



HEALTH SERVICE BOARD

CITY & COUNTY OF SAN FRANCISCO

Stephen Follansbee, M.D.
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Vice President

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Supervisor (District 1)
Commissioner

Karen Breslin
Commissioner

Mary Hao
Commissioner

Randy Scott
Commissioner

Claire Zvanski
Commissioner

Abbie Yant, MA, RN
Executive Director
Health Service System

Holly Lopez
Executive Secretary

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HEALTH SERVICE BOARD

NOTICE AND REGULAR MEETING AGENDA MINUTES **DRAFT**

Thursday, May 12, 2022, 1:00pm
City Hall, Room 408
1 Dr. Carlton B. Goodlett Place
San Francisco, CA 94102

and

VIRTUAL PRESENTATION BY SFGOV TV and Webex

Remote Meeting Access

Watch at 1:00 pm on May 12, 2022 (via [SFGovTV schedule](#))

Click the link to join the meeting - <https://bit.ly/3kFEqRm>

Public Comment Call-In: 415-655-0001 / **Access Code:** 2496 295 9285

Providing Public Comment:

Dial **415-655-0001** and then enter access code **2496 295 9285** then #

1. **Press #** again to enter the meeting as an ATTENDEE
2. You will hear a beep when you join the meeting as a participant.
 - a. Stop and LISTEN
 - b. Wait for Public Comment to be announced.
3. When Public Comment is called, dial * then **3** to be added to the speaker line.
4. You will then hear “You have raised your hand to ask a question, please wait to speak until the host calls on you.” Callers will hear silence when waiting for their turn to speak.
5. To withdraw your question, press * then **3**. – you will hear: “You have lowered your hand.”
6. When the system message says “Your line has been unmuted” - **THIS IS YOUR TIME TO SPEAK.**
7. When the President or Commission Secretary states “Welcome Caller,” you are encouraged to state your name clearly. As soon as you speak, you will have **3 minutes** to provide your comments.
8. Once your 3 minutes have expired, you will be moved out of the speaker line and back as a participant in the meeting. You will hear “Your line has been muted.”
9. Participants who wish to speak on other public comment periods can stay on the meeting line and listen for the next public comment opportunity.

Best Practices when calling in for Public Comment:

- Call from a quiet location
- Speak slowly and clearly
- Turn down any televisions or radios around you
- Address the Commission as a whole, do not address individual Commissioners

Written Public Comment

Persons unable to attend the meeting may submit written public comments regarding an agenda item. These comments will be made part of the official public record and shall be brought to the attention of the Health Service Board. Written public comments expected to be part of the official record should be submitted to the Board email, health.service.board@sfgov.org, and **received by 5 pm on Wednesday, May 11th** before the meeting. Members can also call 628-652-4646 with any questions.

All comments received by the deadline will be forwarded to Board members, summarized and read aloud by the Board Secretary during the specific agenda item, and included in the meeting minutes. In the body of your email, indicate the meeting date and the specific agenda item number. If you do not specify an agenda item, your emailed public comment will be read under general comment.

1. **CALL TO ORDER:** 1:02 pm

2. **ROLL CALL:**

President Stephen Follansbee, M.D- Present
Vice President Chris Canning-Present
Commissioner Karen Breslin-Present
Supervisor Connie Chan-excused
Commissioner Mary Hao- Present
Commissioner Randy Scott- arrived at 1:26 pm
Commissioner Claire Zvanski-Present

3. **RESOLUTION ALLOWING TELECONFERENCED MEETINGS UNDER CALIFORNIA GOVERNMENT CODE SECTION 54953(e): (Action)**

The Health Service Board Resolution Allowing Teleconferencing Meetings is available on the SFHSS webpage <https://bit.ly/3GQflgt>

The Health Service Board considered the passage of a resolution that would give it, and all of its subcommittees, authority to hold public meetings while complying with teleconferencing rules and make findings every 30 days to meet California Government Code Section 54953(e).

Vice President Canning moved to adopt the resolution as read and distributed. Commissioner Zvanski seconded the motion.

PUBLIC COMMENT: None

VOTE:

Aye: Follansbee, Canning, Breslin, Hao, Zvanski

Noes: None

Absent: Supervisor Chan

Absent for Vote: Scott

ACTION: The Health Service Board unanimously approved the Resolution Allowing Teleconference Meetings Under California Government Code Section 54953(e).

4. **GENERAL PUBLIC COMMENT – An opportunity for members of the public to comment on any matter within the Board’s jurisdiction that is not on the agenda, including requesting that the Board place a matter on a future agenda.**

PUBLIC COMMENT: None

5. **APPROVAL (with possible modifications) OF THE MINUTES OF THE MEETINGS SET FORTH BELOW: (Action)**

The Health Service Board meeting minutes are available on the SFHSS webpage <https://bit.ly/3aoCuKT>

Commissioner Breslin added a clarification on page 9.

Commissioner Breslin moved to approve April 14, 2022, Health Service Board Regular Meeting Minutes as corrected. Commissioner Zvanski seconded the motion.

PUBLIC COMMENT: None.

1145 MARKET STREET 3RD FLOOR, SAN FRANCISCO, CA 94103

VOTE:

Aye: Follansbee, Canning, Breslin, Hao, Zvanski

Noes: None

Absent: Supervisor Chan, Commissioner Scott

Absent for Vote: None

ACTION: The Health Service Board unanimously approved April 14, 2022, Health Service Board Regular Meeting Minutes.

6. PRESIDENT'S REPORT: (Discussion)

President Follansbee said that there are now over 1,300,500 COVID-19 reported deaths and cases are still rising and he appreciated everyone's continued efforts to stay safe.

Commissioner Zvanski shared remarks on the passing of a former Health Service Board Member, James Deignan. He served on the San Francisco Health Service System Board for 22 years (1987-2009). James was born in San Francisco. A graduate of Polytechnic High School and City College, Jim joined the San Francisco Sheriff's Department before entering the San Francisco Police Department in 1972 and proudly served the city he loved for 42 years. Jim remained at Central Station for most of his career except for a seven-year stint as the Chief's Public Information Officer in the early 2000s. James was a really lovely man with a wonderful sense of humor. James was always available to help and dedicated to doing the best for our members. He took the job seriously and must be listed among the nicest and best of those devoted to City service, including serving as an exemplary HSS board member.

President Follansbee noted the Webex public comment was not available for a period of time and offered that agenda item number six also include any general public comments for viewers joining via Webex.

PUBLIC COMMENT: None

7. DIRECTOR'S REPORT: (Discussion)

April 14, 2022, Director's Report is available on the SFHSS webpage <https://bit.ly/3N9Mbel>

SFHSS Executive Director Abbie Yant presented the following items:

- COVID-19 Update
- Strategic Planning Process
 - Additional Future State Education: June 9, 2022
 - Next Steps
- Mental Health Awareness Month and Asian American and Pacific Islander Heritage Month
- DEVA-Dependent Eligibility Verification Audit
- Split Families
- Black Out Period Notice
- Public Safety Mental Health and Substance Use Disorder Treatment
- Follow-ups to Public Comment
 - Delta Dental Pediatric Coverage Question
 - VSP Question: Why do members who go to Costco pay less for glasses and eye care?
- Administrative Updates

- Division Reports
 - Personnel
 - Operations
 - Enterprise Systems and Analytics (ESA)
 - Communications
 - Finance and Budget
 - Contracts
 - Well-Being

Executive Director Yant introduced Rey Guillen, the new Chief Operating Officer to the Board. Rey Guillen said his career has been in the public sector working with several California public agencies in Human Resources. Rey Guillen said he looked forward to using his experience to achieve the shared goal of affordable quality benefits and exemplary customer service to our members.

Executive Director Yant recognized May as Mental Health Awareness month and the City's tremendous efforts to lift messages about mental health awareness, including the Mayor's video. Executive Director Yant shared the City experienced a tragedy last week at the Main Library, where a patron took their own life. The Employee Assistance Program (EAP) supported the staff during the crisis. San Francisco City Librarian, Michael Lambert, wrote Executive Director Yant to express his gratitude for EAP counselors, Jeff Lintner and Jeanette Longtin, stating "The capacity for my staff to be able to grieve together, express their feelings, and receive soothing guidance and counsel from licensed professionals who are City and County of San Francisco colleagues was immensely valuable to putting my organization on a path of healing and recovery... I've been deeply moved by the compassion that's been expressed over the past couple of days all facilitated by your extraordinary team. I'm grateful for the level of support HSS has been able to provide the library repeatedly during our time of tremendous need. Please accept my sincere gratitude for the two angels you have in your department." Jeannette Longtin, Health Service System, EAP Counselor, expressed her honor to serve fellow members and honored to hear people's stories and experiences. Jeanette Longtin also thanked Carrie Beshears, Well-Being Manager, and Julisa Nunez, Well-Being Assistant Health Educator for working together and bringing synergy between the EAP and Well-Being teams. President Follansbee commended the EAP Team and the Mayor's Office for the effort to devise programs to support mental health this month and year-round.

President Follansbee noted the Enterprise Systems and Analytics (ESA) report highlighting all systems are on schedule with resources, within budget, and risks of control and acknowledged the ESA team for the continued maintenance and updates.

PUBLIC COMMENT: None

8. SFHSS FINANCIAL REPORT AS OF MARCH 31, 2022: (Discussion)

The SFHSS Financial Reporting as of March 31, 2022 Memo and Presentation are available on the SFHSS webpage <https://bit.ly/3zc5H6d> and <https://bit.ly/3NNEOth>

SFHSS Chief Financial Officer, Iftikhar Hussain presented the following items:

- SFHSS Financial Report Highlights
 - Employee Benefit Trust Fund
 - Health Sustainability Fund
 - General Fund Administrative Budget

No questions or discussion.

PUBLIC COMMENT: None

RATES AND BENEFITS

9. PRESENTATION ON THE 2022 RATES AND BENEFITS CALENDAR FOR THE PLAN YEAR 2023 (Discussion)

The 2022 Rates and Benefits Calendar Schedule for Plan Year 2023 is available on the SFHSS webpage <https://bit.ly/3tcJhhv>

SFHSS Executive Director Abbie Yant said the Rates and Benefits calendar is coming to an end and recommended the May 26th meeting hold be released if all action items are approved today. Executive Director Yant predicted the June 9, 2022 Board meeting will conclude the rates and benefits action items and anticipated the June 23, 2022 meeting hold will be canceled.

PUBLIC COMMENT:

10. HEALTH PLAN 2023 RATE SUMMARY-ACTIVE EMPLOYEE/ EARLY RETIREE HEALTH PLANS: (Discussion)

The Health Plan 2023 Rate Summary Active Employee/Early Retiree Health Plans presentation is available on the SFHSS webpage <https://bit.ly/3NU4V21>

Mike Clarke, Aon presented the following items:

- Health Plan 2023 Rate Summary
- 2023 Proposed Rate Actions-Commentary by Plan
- Member Distribution by Plan
- Projected Monthly Rates- 2023 Plan Year
- Health Plan 2023 Rate Summary

President Follansbee asked about the split family non-Medicare families and if there would be any disruption in the current primary care providers who might be in the Blue Shield HMO plans but not in the UHC networks. Mike Clarke said the Aon team has collected data from Blue Shield of California and UnitedHealthcare to analyze provider disruption for lives now in Access Plus and Trio. Mike Clarke evaluated the financials, and the administrative change would not impact the rates presented today and the Split Family Administration recommendation will possibly be presented at the June Board meeting. Commissioner Zvanski was also concerned about the disruption between Blue Shield and UHC networks. Mike Clarke said Access Plus has a very strong provider match to translate into the United Healthcare equivalent and Aon is working to understand provider match for members in Trio plan transitioning to the United Healthcare plan platform. Executive Director Yant said there are 800 out of 130,000 lives under this plan administration and Mike Clarke said 500 lives in Access Plus and roughly 300 in Trio. Commissioner Zvanski asked if any of the 800 members are in Tuolumne County. Mike Clarke said HMOs are not available in Tuolumne County so members in the Hetch Hetchy area would not be affected or experience disruption.

Commissioner Scott asked if there is any forecast for a post-pandemic utilization increase. Mike Clarke said there is some pressure on very high-cost claimants from the pandemic, possibility that

individuals may have deferred care where an early stage detection of a condition may have been missed that perhaps is leading to more intensive care now. One of the Blue Shield plans has experienced higher claims in April that will be reflected in the April SFHSS Financial statement next month. In general, based on review of recent client experience, Aon is seeing pressure on cost early in 2022 because of higher incidence of COVID-related patient hospitalizations, but not in ICUs the way they were happening in 2020 and 2021. A recent Federal Government report anticipated the possibility of higher COVID activity and potentially COVID costs into the fall months, so we'll continue to keep a close eye on those developments. We're not anticipating going into 2023 that we're going to see any spikes in plan utilization relative to what we've observed let's say since mid-2021. The Aon team is closely following developments nationally and is confident that trend rates more generally are going to play out certainly mindful of filling in COVID suppression but similar to how they played out pre-pandemic.

PUBLIC COMMENT: None

11. REVIEW AND APPROVE BLUE SHIELD OF CALIFORNIA MEDICAL/RX FLEX-FUNDED NON-MEDICARE HMO PLANS 2023 RATES AND CONTRIBUTIONS: (Action)

The Blue Shield of California Medical/Rx Flex-Funded Non-Medicare HMO Plans 2023 Rates and Contributions presentation is available on the SFHSS <https://bit.ly/3Nc8ArH>

Mike Clarke, Aon presented the following items:

- Health Plan Funding
- Health Plan Rate Setting Process for Next Plan Year
- Non-Medicare Medical Plan 2023 Rate Renewal Summary
- Non-Medicare Medical Plan 2023 Proposed Total Rates, Active Employees, Early Retirees
- BSC HMO 2023 Plan Rating-Recommendation
- BSC 2023 HMO Plans Rating-Renewal Summary
- 2023 BSC HMO Monthly Rate Cards-Access+
 - Monthly Renewal Premiums/contributions-2023 versus 2022
 - Proposed Rate Cards
- 2023 BSC HMO Monthly Rate Cards-Trio
 - Monthly Renewal Premiums/contributions-2023 versus 2022
 - Proposed Rate Cards
- Recommendations for HSB Action

President Follansbee said there seemed to be a convergence in total cost between the Access Plus and Trio plans, seen in the total cost per month decrease from \$115 to \$75, perhaps due to adverse experience in Trio, and wondered where this is going in the future. President Follansbee noted the importance of our Strategic Plan to include issues around high-cost pharmacy since some of this seems to be related to the pooling charges that have gone up considerably as part of these rate calculations. Mike Clarke said the administrative fees are certainly a component of costs. Mike Clarke explained the per employee per month administrative fees and the large claim pooling fees are the same for the two plans so that is not a differential in cost between the two. Ultimately what rolls through as differentials are capitation costs, pharmacy costs, and remaining medical claim costs which are primarily in-patient and other things not associated with physicians. Mike Clarke agreed with President Follansbee that every year Trio increases at a higher percentage than Access Plus and in some ways, it is a function of what has just happened to transpire on large claims between each of the two plans, but it is something we'll continue to closely discuss with Blue Shield and their accountable care organization physician partners.

Commissioner Scott asked if this medication feature is being seen in the other health plans and wondered what disease categories are most present. Mike Clarke said there are very rare conditions so not something that is predominant and it's more individual circumstances. Mike Clarke said Aon is consistently meeting with the health plans to understand how they're staying ahead in their strategies for patient management on specialty medications. Mike Clarke said in the past there wasn't emphasis by pharmaceutical organizations on research and development into drugs for rare conditions simply because there wasn't a large market share but starting ten or so years ago there is a substantial effort on the part of pharmaceutical organizations, all in the spirit of improving life and certainly sustaining life, where perhaps in the past someone may not have been able to survive a given condition but with that certainly comes a cost. Executive Director Yant said any particular case would be protected under HIPAA but in general, drug utilization is an ongoing discussion as the high cost is a reality, particularly for orphan conditions and rare diseases, and pharmaceutical and biological treatments are being explored as well as genomics. President Follansbee said it would be interesting to note which interventions are short-lived and acute for an immediate condition and which are basically for the month, decades, or life of the member.

Executive Director Yant said the pharmaceutical industry and genomics are a Board Education topic for later this year and although there is little influence on the entire pharmaceutical industry, the topic will share updates on the industry. Commissioner Scott said the presentation would be a good background for the Board.

Vice President Canning moved to approve the Blue Shield of California Medical/Rx Flex-Funded Non-Medicare HMO Plans 2023 Rates and Contributions. Commissioner Breslin seconded the motion.

PUBLIC COMMENT: None

VOTE:

Aye: Follansbee, Canning, Breslin, Hao, Scott, Zvanski

Noes: None

Absent: Supervisor Chan

Absent for Vote: None

ACTION: The Health Service Board unanimously approved the Blue Shield of California Medical/Rx Flex-Funded Non-Medicare HMO Plans 2023 Rates and Contributions.

BREAK: 2:30-2:41pm

ROLL CALL:

President Stephen Follansbee, M.D-Present

Vice President Chris Canning-Present

Commissioner Karen Breslin-Present

Supervisor Connie Chan- Excused

Commissioner Mary Hao- Present

Commissioner Randy Scott-Present

Commissioner Claire Zvanski-Present

12. REVIEW AND APPROVE HEALTH NET CANOPYCARE MEDICAL/RX FLEX-FUNDED NON-MEDICARE HMO PLAN 2023 RATES AND CONTRIBUTIONS: (Action)

The Health Net CanopyCare Medical/Rx Flex-Funded Non-Medicare HMO Plan 2023 Rates and Contributions is available on the SFHSS <https://bit.ly/3taEPjn>

Mike Clarke, Aon presented the following items:

- Health Plan Funding
- Health Plan Rate Setting Process for Next Plan Year
- Non-Medicare Medical Plan 2023 Rate Renewal Summary
- Non-Medicare Medical Plan 2023 Proposed Total Rates, Active Employees, Early Retirees
- Health Net CanopyCare HMO 2023 Plan Rating-Recommendation
- Health Net CanopyCare HMO Plan Rating-Renewal Summary
- 2023 Health Net CanopyCare HMO Plan Monthly Rate Cards
 - Monthly Renewal Premiums/contributions-2023 versus 2022
 - Proposed Rate Cards
- Recommendations for HSB Action

Commissioner Scott wondered if an increase in enrollment and utilization this year would impact the outcome of the premium for the following year. Mike Clarke said the demographics of the 2022 population were favorable, which supports a \$0 contribution for early retirees with Retiree Only coverage in 2023. The drop in contribution is also expected to lead to additional enrollment with potential demographic risk changes. Greg Christensen, Senior Director of Pricing and Underwriting at Health Net, said the 2023 forecast assumed the plan enrollment would grow by 1,500 members and that the projections take into account some deterioration in performance relative to what we're seeing. He noted that Health Net believes its cost projections are in alignment with this growth and utilization expectation. Greg Christensen said Health Net also committed that the overall cost projection for 2024 wouldn't exceed 8% over 2023 to address any concerns about the impact of the large drop in cost projection/premium on 2024 projections. Commissioner Scott thanked Mike Clarke and Greg Christensen for the clarification and the background.

President Follansbee asked if Health Net had data on the health status or risk factors like chronic or severe conditions for enrollees compared to other health plans. Greg Christensen said Health Net had historical information on plan performance, demographics, and also claims history when they did the cost projection for 2022. Looking at the demographic mix expected compared to the actual enrollment, the expected demographic mix was about 20% higher than the actual enrolled population. The difference in expected vs. actual demographic mix can be influenced by many things: low enrollment being the new plan, those who were incentivized to move and explore that CanopyCare HMO plan fit a more favorable profile, etc. Greg Christensen expects the demographic mix to regress more towards the mean as enrollment increases but the population enrolled in the Health Net plan today is particularly well relative to the average when looking at the demographic mix.

Commissioner Scott moved to approve the Health Net CanopyCare Medical/Rx Flex-Funded Non-Medicare HMO Plan 2023 Rates and Contributions. Commissioner Zvanski seconded the motion.

PUBLIC COMMENT: None

VOTE:

Aye: Follansbee, Canning, Breslin, Hao, Scott, Zvanski

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Noes: None
Absent: Supervisor Chan
Absent for Vote: None

ACTION: The Health Service Board unanimously approved Health Net CanopyCare Medical/Rx Flex-Funded Non-Medicare HMO Plan 2023 Rates and Contributions.

13. REVIEW AND APPROVE BLUE SHIELD OF CALIFORNIA PPO-ACCOLADE MEDICAL/RX SELF-FUNDED NON-MEDICARE 2023 RATES AND CONTRIBUTIONS: (Action)

The Blue Shield of California PPO-Accolade Medical/Rx Self-Funded Non-Medicare 2023 Rates and Contributions presentation is available on the SFHSS <https://bit.ly/3za3Sqv>

Mike Clarke, Aon presented the following items:

- Health Plan Funding
- Health Plan Rate Setting Process for Next Plan Year
- Non-Medicare Medical Plan 2023 Rate Renewal Summary
- Non-Medicare Medical Plan 2023 Proposed Total Rates, Active Employees, Early Retirees
- BSC PPO-Accolade Plans 2023 Plan Rating-Recommendation
- BSC PPO-Accolade Plans 2023 Plan Rating-Rating-Renewal Summary
- Monthly Rate Cards
 - BSC PPO-Accolade Monthly Rate/Contribution Change-2023 verses 2022
 - Proposed Rate Cards
 - BSC PPO-Accolade -Choice Not Available Monthly Rate/Contribution Change-2023 verses 2022
 - Proposed Rate Cards
- Recommendation for HSB Action

No questions or comments. Commissioner Breslin moved to approve the Blue Shield of California PPO-Accolade Medical/Rx Self-Funded Non-Medicare 2023 Rates and Contributions. Commissioner Scott seconded the motion.

PUBLIC COMMENT: None

VOTE:

Aye: Follansbee, Canning, Breslin, Hao, Scott, Zvanski

Noes: None

Absent: Supervisor Chan

Absent for Vote: None

ACTION: The Health Service Board unanimously approved the Blue Shield of California PPO-Accolade Medical/Rx Self-Funded Non-Medicare 2023 Rates and Contributions.

14. REVIEW AND APPROVE KAISER PERMANENTE (CALIFORNIA) MEDICAL/RX FULLY INSURED NON-MEDICARE HMO PLAN 2023 RATES AND CONTRIBUTIONS: (Action)

The Kaiser Permanente CA Fully Insured Non-Medicare Medical/Rx Fully Insured Non-Medicare HMO Plan 2023 Rates and Contributions presentation is available on the SFHSS <https://bit.ly/3zb524Y>

Mike Clarke, Aon presented the following items:

- Health Plan Funding

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- Health Plan Rate Setting Process for Next Plan Year
- Non-Medicare Medical Plan 2023 Rate Renewal Summary
- Non-Medicare Medical Plan 2023 Proposed Total Rates-Actives, Early Retirees
- Kaiser 2023 HMO Plan Rating-Renewal Summary
- Kaiser HMO 2023 Rates and Contributions
- Rate Card Information
- Monthly Rate Cards
 - Monthly Renewal Premiums/Contributions-2023 versus 2022
 - Proposed Rate Cards
- Recommendation for HSB Action

President Follansbee asked if Kaiser operating expenses increased in 2021 due to staffing issues. Denise Rodriguez, Kaiser Permanente said several components contributed to increased expenses: 1. higher care volume caused by COVID, and Kaiser is addressing the deferred care right now so there was a backlog, 2. unprecedented national healthcare labor shortage, 3. higher than anticipated COVID costs including higher testing expenses- supply chain disruptions because of labor shortages in the supply chain, 4. external provider charges when we have to send our members out they're seeking care in an emergency or urgent situation, and 5. drug cost escalations with new regulatory requirements. Commissioner Scott asked if Kaiser predicts these operating costs to carry over to the next rating cycle. Denise Rodriguez said Kaiser is seeing a 1% increase in our average commercial rate increase year-over-year. Denise Rodriguez said it's hard to predict future COVID costs but Kaiser learned a lot in the last couple of years, opened up new labs, opened a lot of clinics, and partnered a lot with cities and counties like San Francisco to serve members so they are in a better place, but we don't know what the volume is going to look like and that's the unknown.

Commissioner Scott moved to approve the Kaiser Permanente CA Fully Insured Non-Medicare Medical/Rx Fully Insured Non-Medicare HMO Plan 2023 Rates and Contributions. Commissioner Zvanski seconded the motion.

PUBLIC COMMENT: None

ACTION: The Health Service Board unanimously approved the Kaiser Permanente CA Fully Insured Non-Medicare Medical/Rx Fully Insured Non-Medicare HMO Plan 2023 Rates and Contributions.

15. REVIEW AND APPROVE ACTIVE EMPLOYEE 2023 DENTAL RATES FOR SELF-FUNDED DELTA DENTAL PPO PLAN, FULLY INSURED DELTACARE USA HMO PLAN AND FULLY INSURED UNITED HEALTHCARE (UHC) HMO PLAN: (Action)

Active Employee 2023 Dental Rates for Self-Funded Delta Dental PPO Plan, Fully Insured Deltacare USA HMO, and Fully Insured UnitedHealthcare (UHC) HMO Plan presentation is available on the SFHSS <https://bit.ly/3tbnMxj>

Mike Clarke, Aon presented the following items:

- Health Plan Funding
- Health Plan Rate Setting Process for Next Plan Year
- Active Employee Dental Plans 2023 Plan Rating Renewal Summary and Proposed Monthly Rates
- Recommendation for HSB Action Rating Details
 - Delta Dental Active Employee PPO

- DeltaCare USA Fully Insured Dental HMO Plan
- UnitedHealthcare (UHC) Fully Insured HMO Plan
- Recommendation for HSB Action

Commissioner Breslin asked what percentage of members receive diagnostic and preventive care. Mike Clarke said the March presentation reported that 5% of members achieve the annual maximum. Commissioner Breslin said it doesn't seem like there is a barrier to care diagnostic and preventative care but rather education. Mike Clarke said the plan is self-funded so the claim increase estimate is dependent on how members utilize the plan, 2.6% is the best estimate but the actual claim experience has the potential to vary from that estimate. Commissioner Breslin recalled UnitedHealth care sending printed reminders for preventative care and asked how Delta Dental educator members on preventative. Michele Bodie, Delta Dental, said Delta Dental utilizes email and printed mailings for member education and initiatives including monthly wellness calendar, Mental Health Month, or the SmileWay Program (automatically enrolled). Commissioner Breslin asked if they send email campaigns and printed materials for preventative care. Michele Bodie said Delta Dental can send printed materials because they have member addresses but would need member email addresses. Commissioner Breslin asked the Health Service System to follow up on preventative care campaigns. Commissioner Zvanski commented that she receives appointment reminders directly from her dentist. President Follansbee imagined if a member doesn't have a regular dentist, then education material would be limited. President Follansbee asked if Delta Dental conducted member surveys or has data on barriers to accessing services. Executive Director Yant said Delta Dental submits a quarterly report-not presented during the rates and benefits cycle- and HSS met with the Delta Dental marketing research team 6-8 months ago and all the data will be reported to the Board.

Commissioner Hao said in the effort to bring down the surplus from last year we're experiencing sticker shock and I understand it's relative to the spend-down of the reserves, but I think that 15.3 still has a psychological effect. Mike Clarke agreed and said the team took careful consideration of that during this time last year and did reference during the rate approval discussion for the active PPO plan this year that this was the likely impact. Mike Clarke said he thinks so this in terms of a three-year progression from typical rate, low rate, back to the typical rate.

Commissioner Scott moved to approve the Active Employee 2023 Dental Rates for Self-Funded Delta Dental PPO Plan, Fully Insured DeltaCare USA HMO and Fully Insured UnitedHealthcare (UHC) HMO Plan. Commissioner Hao seconded.

PUBLIC COMMENT: None

VOTE:

Aye: Follansbee, Canning, Breslin, Hao, Scott, Zvanski

Noes: None

Absent: Supervisor Chan

Absent for Vote: None

ACTION: The Health Service Board unanimously approved the Active Employee 2023 Dental Rates for Self-Funded Delta Dental PPO Plan, Fully Insured Deltacare USA HMO, and Fully Insured UnitedHealthcare (UHC) HMO Plan.

REGULAR BOARD MEETING MATTERS

16. REPORTS AND UPDATES FROM CONTRACTED HEALTH PLAN REPRESENTATIVES: (Discussion)

Blue Shield of California-Paul Brown announced he will take a new position within Blue Shield of California and shared his appreciation of the 8-years of work with HSS including the work about gender dysphoria, health equity, and the ACO partnership. Paul Brown introduced his successor, Amy Dehart. Pushing meaningful work around health equity, and gender dysphoria. Amy Dehart said she has worked with Blue Shield for 20 years and looked forward to continuing the legacy of Paul Brown and serving the City and County of San Francisco employees.

Delta Dental: Michele Bodie introduced Julie Fernandez, newly designated Delta Dental Account Manager. Julie Fernandez appreciates the opportunity to support member initiatives.

Health Net CanopyCare: Tim Closson introduced Fred Reyes, newly appointed account manager for HSS. Fred Reyes looked forward to improving the experience one member at a time.

PUBLIC COMMENT: None.

17. ADJOURNMENT: 4:05 pm

Health Service Board and Health Service System Website: <http://www.sfhss.org>

Summary of Health Service Board Rules Regarding Public Comment

1. A member of the public has up to three (3) minutes to make pertinent public comments before action is taken on any agenda item.
2. A member may comment on any matter within the Board's jurisdiction as designated on the agenda.
3. Members may submit their comments by email to health.service.board@sfgov.org by 5 pm the day before the meeting start time. These comments will be made part of the official public record and shall be brought to the attention of the Health Service Board. All comments received by the deadline will be forwarded to Board members, summarized and read aloud by the Board Secretary during the specific agenda item, and included in the meeting minutes. In the subject line of your email, indicate the meeting date and the specific agenda item number. If you do not specify an agenda item, your emailed public comment will be read under general comment.

Knowing Your Rights Under the Sunshine Ordinance

Government's duty is to serve the public, reaching its decision in full view of the public. Commissions, boards, councils, and other agencies of the City and County of San Francisco exist to conduct the people's business. This ordinance assures that deliberations are conducted before the people and that City operations are open to the people's review. For more information on your rights under the Sunshine Ordinance or to report a violation of the ordinance, visit the Sunshine Ordinance Task Force website at <http://www.sfgov.org/sunshine>.

Summary of Health Service Board Rules Regarding Cell Phones and Pagers

The ringing and use of cell phones, pagers, and similar sound-producing electronic devices are prohibited at Health Service Board and committee meetings. The Chair of the meeting may order the removal of any person(s) in violation of this rule from the meeting room. The Chair of the meeting may allow an expelled person to return to the meeting following an agreement to comply with this rule. The complete rules are outlined in Chapter 67A of the San Francisco Administrative Code.

Disability Access and Accommodation

Regular Health Service Board meetings are held at City Hall, 1 Dr. Carlton B. Goodlett Place, in Hearing Room 416 at 1:00 PM on the second Thursday of each month. The closest accessible BART station is Civic Center, three blocks from City Hall. Accessible MUNI lines serving this location are #42 Downtown Loop and the #71 Haight/Noriega and the F Line to Market and Van Ness and the Metro stations at Van Ness and Market and Civic Center. For more information about MUNI accessible services, call (415) 923-6142. There is accessible parking in the vicinity of City Hall at Civic Center Plaza adjacent to Davies Hall and the War Memorial Complex. Accessible seating for persons with disabilities (including those using wheelchairs) will be available. To obtain a disability-related modification or accommodation, including auxiliary aids or services, to participate in the meeting, please contact Holly Lopez, at 628-652-4646 at least 48 hours before the meeting, except for Monday meetings, for which the deadline is 4:00 pm the previous Friday.

Sensitivity to Chemical-based Products

To assist the City's effort to accommodate persons with severe allergies, environmental illnesses, multiple chemical sensitivity, or related disabilities, attendees at public meetings are reminded that other attendees may be sensitive to various chemical-based products. Please help the City accommodate these individuals.

Location of Materials

If any materials related to an item on this agenda have been distributed to the Health Service Board after distribution of the agenda packet, those materials are available for public inspection at the Health Service System during normal office hours. For more information, please contact Holly Lopez at 628-652-4646 or email holly.lopez@sfgov.org. The following email has been established to contact all members of the Health Service Board: health.service.board@sfgov.org. Health Service Board telephone number: 628-652-4646

Lobbyist Registration and Reporting Requirements

Individuals and entities influencing or attempting to influence local legislative or administrative action may be required by the San Francisco Lobbyist Ordinance [SF Campaign & Governmental Conduct Code § 2.100] to register and report lobbying activity. For more information about the Lobbyist Ordinance, please contact the San Francisco Ethics Commission at 25 Van Ness Avenue, Suite 220, San Francisco, CA 94102; telephone (415) 252-3100; fax (415) 252-3112; web site www.sfgov.org/ethics.