

**DATE:** February 11, 2021

**TO:** Dr. Steven Follansbee, President, Members of the Health Service Board

FROM: Abbie Yant, RN, MA Executive Director SFHSS

**RE:** February 2021 Board Report

#### SFHSS is Operating in a Virtual Environment and is Closed to the Public

#### **Medical Plan RFP**

The SFHSS staff recommendation for the Medical Plan offerings is included in the Health Service Board Agenda February 11, 2021 and was posted on February 5, 2021. A full narrative report is also available.

#### Reminder: Vendor Black Out Period - Extended

The HSB approved the Vendor Black Out period commenced February 13, 2020. As of June 11, 2020, the vendor Black Out Period was extended through the rest of this calendar year to include the period for the Medical Plan selection process. The recommendation for the Medical Plan selection is scheduled to present to the Health Service Board in February 2021. Subsequently, SFHSS will be in negotiations with Medical, Dental and Vision plans for Plan Year 2022 and therefore the Vendor Black Out Period will continue through June 2021.

#### **COVID-19 Update (see attached slides)**

As you are aware the COVID-19 pandemic continues to impact our communities. SF DPH is the lead agency advising us on precautions to take during these difficult months of the surge. SFHSS stays informed and abides by local health orders. For more information, please refer to the DPH website <a href="https://www.sfdph.org/dph/alerts/coronavirus.asp">https://www.sfdph.org/dph/alerts/coronavirus.asp</a>.

The health plans are also monitoring COVID-19 related utilization of health care services. SFHSS and Aon will consider COVID-19 impact on rate negotiations and plan to rely on embedding recent carrier experience observations into our March UHC/BSC and April KP experience presentations, which will also include COVID-19 specific claims and incidence information.

#### **COVID-19 Vaccinations**

SFHSS is working with the Department of Public Health and hospital and healthcare providers to develop outreach plans for our members as their priority group becomes eligible for and the vaccine is available at vaccine administration sites in San Francisco. There continues to be variation in how the Bay Area counties are able to administer the available vaccine. SFHSS is updating our websites and the links to City sites frequently. We encourage everyone to remain patient as the scheduling systems work out the bugs. While the vaccine delivery is taking on a more consistent cadence, there is still little advance notice and a shortage of the vaccine in comparison to need/demand.



#### **Racial Equity Action Planning**

This update highlights our department's ongoing racial equity work, as well as important updates within the field of diversity and inclusion at the city-wide and national levels.

2021 marks a shift in SFHSS' racial equity work from planning to implementation. This transition involves outlining actionable steps for each initiative and gathering data about the impact that this work has on improving staff programs, policy, and culture. SFHSS submitted a three-year Racial Equity Action Plan to the Mayor's Office, Board of Supervisors, and the Office of Racial Equity; a mandate that all city-wide departments were required to meet. The ORE is currently in the process of reviewing departmental plans through the end of February, at which time they intend to provide feedback and consultation.

Our City is not alone in this work, which is happening on a national scale. An Executive Order was released on January 20<sup>th</sup>: *On Advancing Racial Equity and Support for Underserved Communities Through the Federal Government*. This order outlines a comprehensive approach to advancing equity for all, including people of color and others who have been historically underserved, marginalized, and adversely affected by persistent poverty and inequality.

African American History Month pays tribute to the generations of African Americans who struggled with adversity to achieve full citizenship in American society. Conversations about Black representation, identity, and diversity in our nation's history and today are commemorated throughout February. SFHSS is inviting all staff to join the DHRs month-long celebration of achievements, perspectives, and experiences of African Americans that have worked toward greater equality and have been powerful examples of leadership. Black History Month is also an opportunity to celebrate our shared history and interests as colleagues in alignment with SFHSS' core values of *Respect*, *Inclusivity*, and *Collaboration*.

#### **Price Transparency Regulatory Update**

Hospital Pricing Transparency was written into the Affordable Care Act (ACA). The final rules for the implementation were issued on November 27, 2019, and went into effect on January 1, 2021. CMS requires all hospitals to make the required pricing information accessible to the public online. Hospitals now provide a comprehensive file of their charges for all items and services. Additionally, the hospitals are required to publish an easy to read list of 300 commonly performed services showing their charges, the rate charged for cash-paying patients, the negotiated rates with each of the payers they have contracts, and the highest and lowest negotiated rates.

The Hospital Pricing Transparency rules were created to help patients get an understanding of what items or services provided to them by the hospital would cost. The report helps patients, or in our case, SFHSS members, get a sense of what they may be charged. It should be considered a rough estimate as their actual costs may vary based on factors such as the actual benefits our members have or whether the services are performed together with other services. As we become more familiar with this tool, we will design a presentation to the Health Service Board.

Reference: 1 – Executive Order January 20<sup>th</sup>: <a href="https://www.whitehouse.gov/briefing-room/presidential-actions/2021/01/20/executive-order-advancing-racial-equity-and-support-for-underserved-communities-through-the-federal-government/">https://www.whitehouse.gov/briefing-room/presidential-actions/2021/01/20/executive-order-advancing-racial-equity-and-support-for-underserved-communities-through-the-federal-government/</a>



#### **Administration Update**

SFHSS.org banner is linked to the most current COVID-19 Vaccination as it becomes available.

#### Legislative Report (see attached slide)

Please see the attached report for a shortened version of the legislation we are monitoring.

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#### SFHSS DIVISION REPORTS: January 2021

#### **PERSONNEL**

#### **Recruitments:**

- 0931 Operations Manager: Selection in Process
- 1813 Senior Benefit Analyst: Selection in Process
- 1210 Benefit Analyst: Testing in Process
- 0932 Enterprise Systems and Analytics Director: Recruitment Underway

#### **Employees' Working Status:**

Due to Shelter-in-Place provisions, HSS employees have been performing a mix of duties in a variety of locations, including but not limited to essential HSS work both in the office and remotely and Disaster Service Assignments at various locations. There were times when working/resources are not available or staff is not available to perform assignments, but HSS got access to resources for all employees before the 2020 Open Enrollment Period.

#### **OPERATIONS**

- Our offices remain closed to the public. We currently have three to four staff on-site Tuesdays and Fridays to perform essential work.
- Member Services took over 4898 calls in January. This number is consistent with last year and less than year over year trend. Call topics included retirement, delinquencies, and eligibility in general.
- Working on a staffing plan for Open Enrollment in 2021 and beyond
- Divisional OE meetings/discussions have begun to prepare for Open Enrollment 2021
- Will begin a robust train/re-train for member services staff
- Member Services Lean Huddles to started back up this week

#### Enterprise Systems & Analytics (ESA) (see attached slide)

- IRS Form 1095-Cs were mailed to individuals this week. As a reminder, not all SFHSS members will receive a 1095-C. SFHSS sends 1095-Cs to employees who worked at least one day in 2020 as the "C" version of the 1095 is meeting our requirement as an employer to demonstrate minimum essential coverage was provided. Your health plans will send you 1095-Bs which show coverage. SFHSS is the health plan for our self-insured medical plans (UHC PPO) and will be sending forms to those individuals as well.
- Several new initiatives are underway. Work commenced on complying with City policy around data management and classification. Work also commenced on internalizing the capability to conduct regular dependent eligibility verification audits.
- SFHSS continues to work on expanding eBenefits. For the 2021 plan year, the focus will be on building out the functionality and onboarding employees of City College of San

Francisco. Additionally, SFHSS has completed modifications to eBenefits to allow for the newly approved IRS allowances for dependent care FSAs due to COVID-19

#### **Communications**

- Annual Report capturing our HSS accomplishments in 2020
- Website updates to SFHSS.org based on member feedback are coming. Have you seen the smaller banners? We need your help to make our website a better tool.
- Social Media Plan to reach and engage more members
- OE Communications Plan
- RFP/RFQ/RFI for social media management tool, video vendor, virtual fair tool, web development agency, Al/decision tree tool to support Open Enrollment

#### FINANCE DEPARTMENT

- Compiled analysis of HSS budget for the Controller's Office 6-month budget status report
- Coordinated with all division managers to ensure receivables and invoices completed to prepare for the City-Wide Q1 closing deadline of February 26, 2021
- Processed employer contributions to premiums delayed from the summer months into the Trust
- Budget Planning for FY 2021-22 and FY 2022-23, General Fund Administrative and Healthcare Sustainability Trust
  - Coordinated budget development with COIT and Capital projects process deadlines
  - Conducted at least two rounds of reviews with division managers on budget and staffing requests
  - Complied General Fund Administrative Budget and Healthcare Sustainability Trust Fund budgets for presentation to the Finance & Budget Committee and Health Service Board
- Initiated Health Plan Rates & Benefits renewal activities

#### **CONTRACTS**

- Completed evaluation panel review for Health Plan RFP for the 2022 plan year
- Issued RFP for Benefits and Well-Being videos
- Prepared amendment to agreement with Kanopi for website updates and improvements
- Executed agreement with UHC for PPO benefits for 2021
- Executed amendment with UHC for Medicare Premium Stabilization Reserve account
- Executed agreement with UHC for Medicare Advantage plan for 2021
- Executed letter agreement with Kaiser for Well-Being support and services for 2021
- Executed amendment to agreement for Delta Dental PPO for 2021
- Executed amendment to agreement for DeltaCare for 2021

#### **WELL-BEING** (see attached slides)

- Set Up and Go pilot with HSA to launch February
- Mental Health First Aid Workshops will be available to leaders/managers and supervisors starting February
- Department of Emergency Management has met their goal of 95% of their employees downloading the CORDICO Wellness App
- Launched Live Feel Be Better in 2021 campaign
- 10.4% increase in calls to EAP from December to January



#### **Attachments:**

Black Out Period Memo COVID-19 Updates from Health Plans Legislative Report ESA Slide Well-Being Slides



#### **MEMORANDUM**

**DATE:** February 11, 2021

**TO:** Dr. Stephen Follansbee, President, and Members of the Health Service Board

FROM: Abbie Yant, RN, MA Executive Director SFHSS

**RE:** Black-Out Notice Extension through June 2021

This memorandum shall notify the Health Service Board ("Board") of the Blackout Period in connection with the San Francisco Health Service System ("SFHSS") competitive bid process for the medical plans and the Rates and Benefits process for the 2022 plan year.

Pursuant to the Board's Service Provider Selection Policy, the Board must be notified of a Blackout Period prior to the release of any solicitation for the selection of a primary service provider and also includes the annual SFHSS Rates and Benefits process.

During the Blackout Period, the Board is prohibited from any communications with a potential SFHSS service provider on matters relating to SFHSS contracting except communications on SFHSS matters during Board or Board Committee Meetings.

Communications include face-to-face conversations, telephone conversations, email, text messages, letters, faxes, or any other social media, written or electronic communications.

Any communications with service providers for reasons unrelated to SFHSS during the Blackout Period must be immediately disclosed in writing to the Director and the Board.

The Blackout Period commenced on February 13, 2020, and is extended through the competitive bid process for the medical plans (June – December 2020) and the Rates and Benefits cycle for the plan year 2022 and therefore is expected to end in July 2021 after the Board of Supervisors final approval.

### SFHSS Specific Data

| Blue Shield               |                                       | Kai                            | Kaiser                 |                                | UnitedHealthcare (UHC) |  |
|---------------------------|---------------------------------------|--------------------------------|------------------------|--------------------------------|------------------------|--|
| Cases:                    | of California<br>(BSC)<br>as of 12/30 | Non-<br>Medicare<br>as of 1/19 | Medicare<br>as of 1/19 | Non-<br>Medicare<br>as of 1/25 | Medicare<br>as of 1/10 |  |
| Confirmed                 | 107                                   | NR                             | NR                     | 94                             | 484                    |  |
| Probable                  | NR                                    | NR                             | NR                     | 1                              | 9                      |  |
| Possible                  | NR                                    | NR                             | NR                     | 31                             | 22                     |  |
| Total                     | 107                                   | NR                             | NR                     | 126                            | 515                    |  |
| Test Results:             |                                       |                                |                        |                                |                        |  |
| Positive                  | 107                                   | 2,271                          | 350                    | 19                             | 48                     |  |
| Negative                  | 2,777                                 | 28,008                         | 6,648                  | 352                            | 1,307                  |  |
| Inconclusive /<br>Unknown | NR                                    | NR                             | NR                     | 399                            | 3,299                  |  |
| Total                     | <b>2</b> ,884 <sup>[2]</sup>          | 30,289                         | 6,988                  | 770                            | 4,654                  |  |

NR = Not Reported

- [1] Does not represent unique members
- [2] May be underreported due to claim submission lag



### **COVID Health Plan Benefit Info**

|                                   | BSC<br>as of 12/30/2020                               | Kaiser Non-<br>Medicare<br>as of 2/1/2021  | Kaiser Medicare<br>as of 2/1/2021  | UHC Non-Medicare<br>as of 1/6/2021   | UHC Medicare<br>as of 1/25/2021   |
|-----------------------------------|---|--|--|--|---|
| Early Rx<br>Refills<br>Available? | Yes   | At Pharmacist's<br>discretion and may<br>allow up to a 100-day<br>supply<br>(no end date on this)  | At Pharmacist's<br>discretion and may allow<br>up to a 100-day supply<br>(no end date on this)         | Yes, through 1/20/2021   | Yes, through 8/31/2020  |
| Tele-<br>Medicine                 | Via PCP: Copays<br>waived<br>Via Teladoc: No<br>copay | No copay<br>(no end date on this)  | No copay<br>(no end date on this)  | COVID related copays<br>waived<br>through 4/20/2021<br>Non-COVID related<br>copays waived through<br>9/30/2020 | COVID treatment related copays waived through 1/31/2021 COVID testing related copays waived through 4/20/2021 |
| Tele-<br>Behavioral<br>Health     | No copay  | No copay<br>(no end date on this)  | No copay<br>(no end date on this)  | COVID related<br>copays waived<br>through 1/20/2021<br>Non-COVID related<br>copays waived through<br>9/30/2020 | COVID related copays waived through 1/31/2021   |
| Testing /<br>Diagnostics          | Copays waived   | Copays waived through 4/21/21 or the last day of the month following the end of the national public health emergency, whichever is later | Copays waived through last day of the month following the end of the national public health emergency. | Copays waived<br>through 4/20/2021   | Copays waived<br>through 4/20/2021  |



### COVID Health Plan Benefit Info (cont.)

|                                      | BSC<br>as of 12/30/2020  | Kaiser Non-<br>Medicare<br>as of 2/1/2021  | Kaiser Medicare<br>as of 2/1/2021  | UHC Non-Medicare<br>as of 1/6/2021  | UHC Medicare<br>as of 1/25/2021  |
|--------------------------------------|--|--|--|---|--|
| Treatment                            | Copays waived for<br>treatment between<br>3/31/2020 – 12/31/2020   | Copays waived through 4/21/21 or the last day of the month following the end of the national public health emergency, whichever is later | Copays waived through last day of the month following the end of the national public health emergency.           | Copays waived through<br>4/20/2021<br>Out of Network waived<br>through 10/22/2020 | Copays waived through<br>1/31/2021   |
| Specialist<br>and<br>Primary<br>Care | If a member presents at<br>a specialist office and<br>receives testing or<br>treatment with a COVID-<br>19 diagnosis, there<br>would be no member<br>cost share for services | Copays waived through 4/21/21 or the last day of the month following the end of the national public health emergency, whichever is later | Copays waived through last day of the month following the end of the national public health emergency.           |   | Copays waived through 9/30/2020 for specialist; through 12/31/2020 for Primary Care            |
| Other                                | https://www.blueshieldca<br>.com/coronavirus/your-<br>coverage   | https://healthy.kaiser<br>permanente.org/north<br>ern-california/health-<br>wellness/coronavirus-<br>information                         | https://healthy.kaiserper<br>manente.org/northern-<br>california/health-<br>wellness/coronavirus-<br>information | Sanvello: On-demand em<br>free to r<br>https://www.uhc.com/he                     | vailable: 1-866-342-6892 otional support mobile app, nembers alth-and-wellness/health-covid-19 |



|                                     | LEGISLATIVE UPDATE FEBRUARY 11, 2021            |  |   |  |  |  |
|-------------------------------------|---|--|---|--|--|--|
|                                     | Subject   | Legislation Title  | Activity  | Comment  |  |  |
| <b>COVID-19 RELATE</b>              | :D  |  |   |  |  |  |
| Federal                             | Surprise Medical Bills                          | HR 533 A bill to prevent surprise medical bills with respect to COVID-19 testing   | Introduced January 28, 2021 and referred to the House Committee on Energy and Commerce; Ways and Means; Education and Labor | A summary is in progress.  |  |  |
| Federal                             | Antibody Treatments                             | HR 467 A bill to amend the Families First Coronavirus Response Act and the CARES Act to require group health plans and health insurance issuers offering group or individual health insurance coverage to provide coverage, without cost sharing, of certain COVID-19 antibody treatments.   | Introduced January 25, 2021 and referred to the House Committee on Energy and Commerce; Ways and Means; Education and Labor | A summary is in progress.  |  |  |
| Federal                             | Vaccination                                     | HR 330 A bill to direct the Federal Emergency Management Agency to assist States and local governments with the distribution and tracking of vaccines for COVID-19, to direct the Secretary of Health and Human Services to carry out a national program to oversee the collection and maintenance of all Federal and State data on vaccinations of individuals in the United States for COVID-19 to achieve mass vaccination saturation | Introduced January 15, 2021 and referred to the House Committee on Energy and Commerce; Transportation and Infrastructure   | A summary is in progress.  |  |  |
| Federal                             | Telehealth                                      | HR 341 A bill to make permanent certain telehealth flexibilities established in response to COVID-19.  | Introduced January 15, 2021 and referred to the House Committee on Ways and Means; Energy and Commerce.                     | A summary is in progress.  |  |  |
| SOCIAL DETERMI                      | NANTS OF HEALTH                                 |  | .!  | <del>!</del>   |  |  |
| Federal                             | CDC Social Determinants of<br>Health Program    | S 104 A bill to authorize the Director of the Centers for Disease Control and Prevention (CDC) to carry out a Social Determinants of Health Program, and for other purposes.   | Introduced January 28, 2021 and referred to the Senate Committee on Health, Education, Labor, and Pensions                  | A summary is in progress.  |  |  |
| House - Judiciary                   | Housing, Healthcare,<br>Education and Nutrition | H.J.Res. 20 Proposing an amendment to the Constitution of the United States recognizing and securing the fundamental right to life, liberty, and property, which includes housing, health care, education, and nutrition.  | Introduced January 28, 2021 and referred to the House Committee on the Judiciary  | A summary is in progress.  |  |  |
| Federal                             | CDC Social Determinants of<br>Health Program    | HR 379 A bill to authorize the Director of the Centers for Disease Control and Prevention (CDC) to carry out a Social Determinants of Health Program, and for other  | Introduced January 21, 2021 and referred to the House Committee on Energy and Commerce                                      | A summary is in progress.  |  |  |
|                                     | PUBLIC HEALTH AWARENESS                         |  |   |  |  |  |
| House - Judiciary                   | Maternal Health                                 | S.Res. 14 Proposing a resolution designating January 23, 2021, as "Maternal Health Awareness Day"  | Introduced January 22, 2021 and referred to the House Committee on the Judiciary  | This resolution designates January 23, 2021, as Maternal Health Awareness Day. |  |  |
| BENEFIT DESIGN & ENROLLMENT OPTIONS |   |  |   |  |  |  |
| Federal                             | Primary Care Service<br>Arrangements            | S 128 A bill to amend the Internal Revenue Code of 1986 to provide for the treatment of direct primary care service arrangements as medical care, to provide that such arrangements do not disqualify deductible health savings account contributions, and for other purposes.   | Introduced January 28, 2021 and referred to the Senate Committee on Finance   | A summary is in progress.  |  |  |
| Federal                             | Special Enrollment Periods                      | HR 526 A bill to provide for special enrollment periods during public health emergencies.  | Introduced January 28, 2021 and referred to the House Committee on Energy and Commerce; Ways and Means; Education and Labor | A summary is in progress.  |  |  |

|                | LEGISLATIVE UPDATE FEBRUARY 11, 2021 |   |   |                           |  |  |
|----------------|--------------------------------------|---|---|---------------------------|--|--|
|                |                                      | Legislation Title   | Activity  | Comment                   |  |  |
| BENEFIT DESIGN | & ENROLLMENT OPTIONS CO              |   |   |                           |  |  |
| Federal        |                                      | S 41 A bill to amend the Public Health Service Act, the Employee Retirement Income Security Act of 1974, the Internal Revenue Code of 1986, and the Patient Protection and Affordable Care Act to require coverage of hearing devices and systems in certain private health insurance plans, and for other purposes   | Introduced January 28, 2021 and referred to the Senate Committee on Health, Education, Labor, and Pensions                  | A summary is in progress. |  |  |
| Federal        |                                      | HR 477 A bill to amend the Public Health Service Act, the Employee Retirement Income Security Act of 1974, the Internal Revenue Code of 1986, and the Patient Protection and Affordable Care Act to require coverage of hearing devices and systems in certain private health insurance plans, and for other purposes | Introduced January 25, 2021 and referred to the House Committee on Energy and Commerce; Education and Labor; Ways and Means | A summary is in progress. |  |  |
|                | Mental Health and Substance<br>Abuse | HR 434 To direct the Secretary of Health and Human Services to convene a task force to advise the Assistant Secretary for Mental Health and Substance Use on a national strategy for preventing mental health and substance use crises during a public health emergency, and for other purposes                       | Introduced January 21, 2021 and referred to the House Committee on Energy and Commerce                                      | A summary is in progress. |  |  |
| Federal        | Health Savings Accounts              | HR 373 Protecting Individuals and Families Act - A bill to treat certain face coverings and disinfectants as medical expenses for purposes of certain Federal tax benefits [health savings accounts or flexible spending accounts]  | Introduced January 21, 2021 and referred to the House Committee on Ways and Means   | A summary is in progress. |  |  |
| Federal        | Health Savings Accounts              | HR 295 A bill to waive high deductible health plan requirements for health savings accounts   | Introduced January 13, 2021 and referred to the House Committee on Ways and Means   | A summary is in progress. |  |  |
| Federal        | Lung Cancer Screenings               | HR 238 A bill to amend title XXVII of the Public Health Service Act to require group health plans and health insurance issuers offering group or individual health insurance coverage to provide benefits for lung cancer screenings for certain individuals without the imposition of                                | Introduced January 11, 2021 and referred to the House Committee on Energy and Commerce                                      | A summary is in progress. |  |  |
| COST OF CARE   |                                      |   |   |                           |  |  |
| Federal        |                                      | S 30 A bill to set forth a method of determining maximum out-of-pocket limits and annual updates to premium tax credit eligibility under the Patient Protection and Affordable Care Act.  | Pensions  | A summary is in progress. |  |  |
| Federal        | Premium Cost                         | HR 369 A bill to amend the Internal Revenue Code of 1986 to improve affordability and reduce premium costs of health insurance for consumers.   |   | A summary is in progress. |  |  |
| DATA SECURITY  |                                      |   |   |                           |  |  |
|                |                                      | S 81 A bill to protect the privacy of health information during a national health emergency   | Introduced January 28, 2021 and referred to the Senate Committee on Health, Education, Labor, and Pensions                  |                           |  |  |
| Federal        | Data Protection                      | S 24 A bill to protect the personal health data of all Americans.   | Introduced January 22, 2021 and referred to the Senate Committee on Health, Education, Labor, and Pensions                  | A summary is in progress. |  |  |

|                  | LEGISLATIVE UPDATE FEBRUARY 11, 2021   |   |  |  |  |  |
|------------------|--|---|--|--|--|--|
|                  | Subject  | Legislation Title   | Activity                                 | Comment  |  |  |
| OFFICIAL NOTIFIC | CATIONS  |   |  |  |  |  |
| Federal          | Centers for Medicare &<br>Medicaid Services,<br>Department of Health and<br>Human Services (HHS)<br>Extension      | HHS Extends the National Public Health Emergency into April                                       | Effective through April 21, 2021.        | The federal government has extended the COVID-19 public health emergency for an additional 90 days, until April 21, 2021. This is the fourth extension of the emergency, which the secretary of the Department of Health and Human Services initially declared on January 31, 2020 (retroactive to January 27, 2020). The secretary could terminate the public health emergency earlier than April 21, 2021 or extend it again. This public emergency declaration is important to health plan sponsors because it determines the period of time during which group health plans and insurers must pay for COVID-19 tests and related services without charging cost sharing. In addition, non-grandfathered plans must cover vaccines in network as a preventive benefit, but during the public emergency must also cover it on an out-of-network basis. |  |  |
| Federal          | White House Releases Executive Order   | Executive Order 13999: Protecting Worker Health and Safety From COVID-19                          | Executive Order issued January 21, 2021. | President Biden signed an executive order directing the Occupational Safety and Health Administration (OSHA) to release guidance within two weeks to employers on protecting workers from COVID-19. The executive order requires OSHA to evaluate whether any emergency temporary standards are needed. OSHA has until March 15 to issue emergency standards, which could include mask-wearing in the work place. The order also requires a review of OSHA's enforcement efforts related to COVID-19 and requires the agencies to identify what changes could be made to protect other categories of workers during the pandemic.  |  |  |
| Federal          | United States Department of<br>Labor, Occupational Safety<br>and Health Administration<br>(OSHA) Releases Guidance | Protecting Workers: Guidance on Mitigating and Preventing the Spread of COVID-19 in the Workplace | Guidance posted January 29, 2021.        | This guidance is intended to inform employers and workers in most workplace settings outside of healthcare to help them identify risks of being exposed to and/or contracting COVID-19 at work and to help them determine appropriate control measures to implement. Separate guidance is applicable to healthcare (CDC guidance) and emergency response (CDC guidance) settings. OSHA has additional industry-specific guidance. This guidance contains recommendations as well as descriptions of mandatory safety and health standards. The recommendations are advisory in nature, informational in content, and are intended to assist employers in providing a safe and  |  |  |

# Enterprise Systems & Analytics Report

February 11, 2021

### **Project** Cybersecurity / Disaster

**Enterprise Content Management** 

System (ECM) Business Insights

Dependent Eligibility Verification Audit

### **Key Accomplishments**

VOIP telephony upgrade



• Data management kick-off held 1/19/21. One goal of this initiative will be to classify all HSS data by sensitivity level

terms of quality, reliability and resiliency

· 4 reports design and validation completed

IRS 1095 filing with the IRS is in progress

7 cycle time / work-in-progress reports in development

IRS 1095-C Forms for individuals have been posted

onboard their population for Open Enrollment

Tier 1B vaccination definitions based on job function

· Layering in various data points related to social determinants

DT currently piloting Contact Center "Enterprise" Implementation

**Status** 

Expect two months for confirmation that solution meets all standards in

Post pilot HSS will have discovery session with vendor for requirements

Kick-off meeting held 1/15/21 to capture requirements to build internal

 Configured eBenefits for 2021 IRS allowed changes to Dep Care FSA Initiated kick-off meeting with Community College San Francisco to

· Working with DHR & HSS leadership to identify City Employees who meet

Working with USD to identify employees who meet Tier 1B vaccination

Preparedness

**eBenefits** Covid-19

IRS-1095

(SDoH)

On Schedule, Adequate Resources, Within Budget, Risks in Control

Social Determinants of Health

Potential issues with schedule /budget can be saved with corrective actions

capability

definitions based on job function

· Collaborating on pilot analysis

SFHSS.ORG

Serious issues. Project most likely

delayed or significant budget overrun

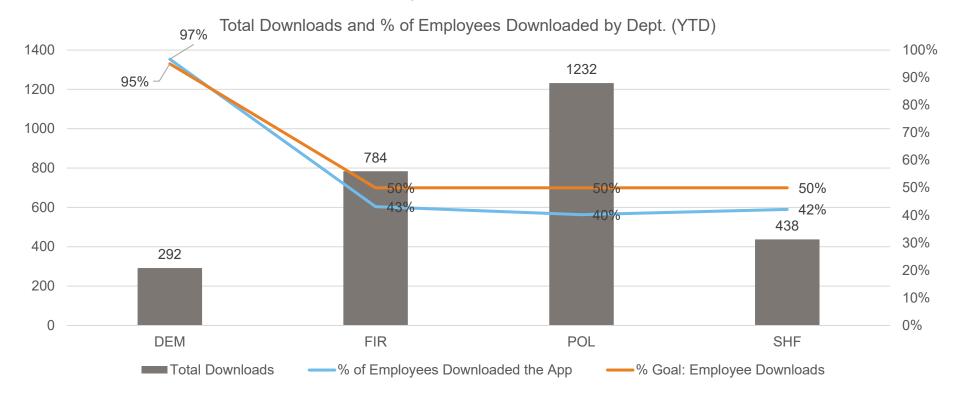
SAN FRANCISCO

### Well-Being Monthly Report

Health Service Board Meeting | February 11, 2021

### **Behavioral Health: Cordico Wellness App**

- Total downloads:
  - 2,746 (4.25% increase from December)
  - 112 new downloads in January

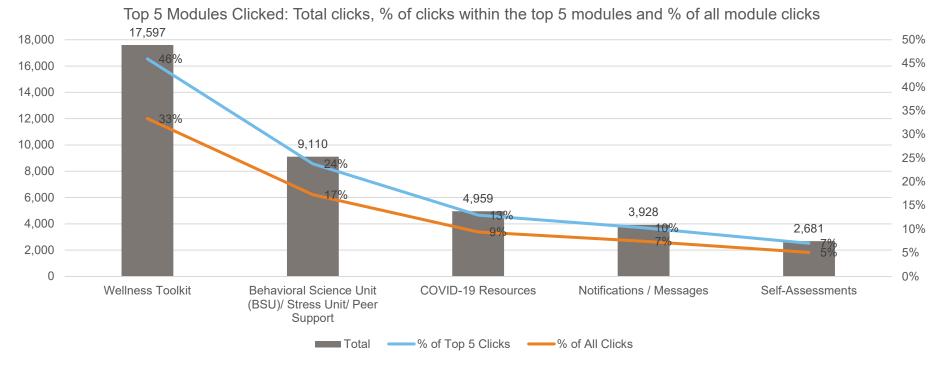


Data represented 5/25 through 1/29/2021

### **Behavioral Health: Cordico Wellness App**

#### Modules -

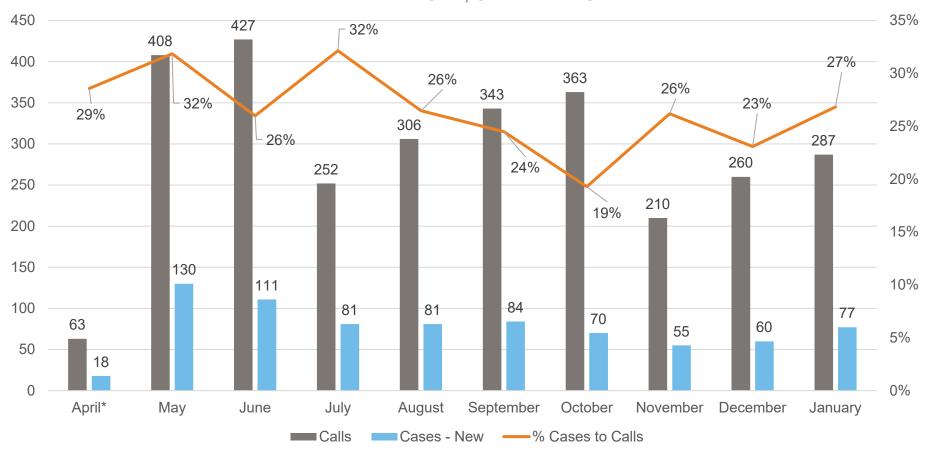
- Total of 52,888 modules clicks YTD
- 72% of all clicks come from the top 5 clicked modules



<sup>\*</sup>Data represented 5/25 through 1/29/2021

### 10.4% increase in calls from December to January

External 24/7 EAP + SFHSS Internal EAP: Total Number of Calls, Cases and % Cases



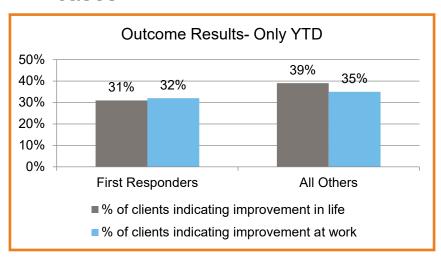
\*April represents only External 24/7 EAP from 4/24 (inception)

### **January**

- 287 calls total of which 77 became a case
  - 33% are from SFHSS Internal EAP
  - 67% are from External 24/7 EAP

## External 24/7 EAP (Data represents 4/24/2020 through 1/31/2021)

2027 calls of which 650 became cases



#### **SFHSS Internal EAP**

(Data represents 5/1/2020 through 1/31)
Services

- 222 leadership consultations
- 532 individual consultations
- Responded to 17 critical incidents serving 333 individuals
- Took on 117 new cases