

SAN FRANCISCO
HEALTH SERVICE SYSTEM



2023-2025



STRATEGIC PLAN CLOSEOUT REPORT



Introduction

Four years ago, the San Francisco Health Service System (SFHSS) embarked on a mission to shape a stronger, more equitable future that would improve the health of all SFHSS members. With the help of dedicated community members, leaders and staff, we launched a three-year Strategic Plan aimed at improving our member's access to the care they need when they need it and aligning SFHSS' efforts with leading health authorities.

This plan represents the voices and priorities of our members, combined with decades of work across SFHSS' programs and initiatives that strive every day to care for the health of both the active and retired public servants of San Francisco as well as their families.

We are proud to now share the measurable progress we've made together. This report highlights key performance indicators (KPIs) that reflect our commitment to continuous improvement and enhancement of service to our members. These metrics track outcomes showing not just how much we do but whether our membership is better off because of our efforts over the last three years.

As public servants serving other public servants, we believe accountability and transparency are essential. More importantly, we believe the numbers presented in this report represent lives touched, opportunities created and barriers to necessary healthcare removed.

We thank you for your trust and your partnership in building a future where SFHSS identifies and takes advantage of opportunities for our members to thrive.

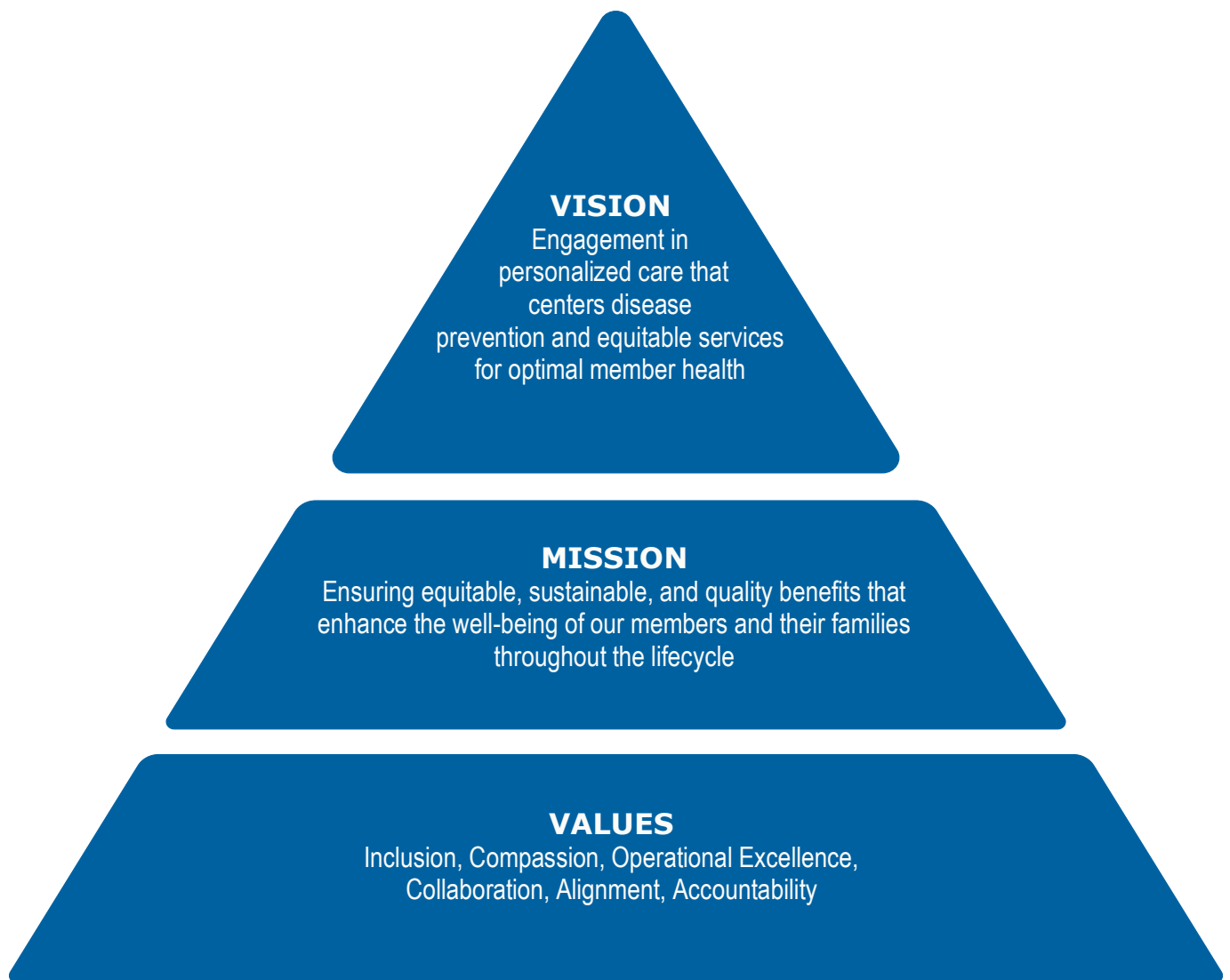
Executive Summary

San Francisco Health Service System's 2023 – 2025 Strategic Plan was more than an announcement of its mission, vision and values. Its purpose was to serve as a performance management tool guiding how we managed, operated and measured success.

To create the plan, leadership interviews were conducted to develop an initial Strengths, Weaknesses, Opportunities and Threats (SWOT) analysis, followed by a special Health Service Board meeting where the team refined and aligned the development of the plan, to serve as our department's North Star for the three-year period from 2023 to 2025.

This strategic plan completion report summarizes the outcomes and progress against the goals outlined in the strategic plan. It provides an analysis of performance against the goals and KPIs, key findings and issues, recommendations, and conclusions. It is designed to provide our stakeholders with a clear picture of the plan's successes as well as its deficiencies and informs both future direction and improvement in the design of future strategic plans.

Mission, Vision and Values



Goals and Objectives



Goal 1: Foster **equity** through intentional organizational culture, accessibility, inclusion, and belonging.

- Objective: Apply health equity lens to our customer service approach
- Objective: Apply equity lens to our workforce environment



Goal 2: Advance **primary care practice** and member engagement to ensure the right care, at the right time and place.

- Objective: Improve primary care and well-being services
- Objective: Advance equity in the delivery of primary care services



Goal 3: Provide **affordable and sustainable** healthcare and high-quality well-being services through value-driven decisions and program design.

- Objective: Monitor funding sustainability
- Objective: Maintain Board Education



Goal 4: Support the **mental health and well-being** of our membership by reducing stigma and addressing barriers to care in partnership with key stakeholders.

- Objective: Provide easily accessible pathways to mental health and substance use disorder services through increased member awareness
- Objective: Enhance programs to support early retiree and retiree well-being



Goal 5: **optimize service** to maintain and advance exceptional member engagement.

- Objective: Enhance member education and support services
- Objective: Improve staff training and professional development
- Objective: Implement quality improvement review processes

Goals and Objective Analysis



Foster **equity** through intentional organizational culture, accessibility, inclusion, and belonging.

- Objective: Apply health equity lens to our customer service approach
- Objective: Apply equity lens to our workforce environment



Summary

SFHSS followed guidance from the San Francisco Office of Racial Equity (ORE) to empower staff through department-wide training and education. These sessions addressed topics such as belonging, equitable development, and inclusive performance reviews.

For the first time, staff across all levels gathered to envision an equitable

workplace and engage in honest conversations about race and equity. These trainings laid the foundation for embedding equity into everyday practices.

We enhanced physical accessibility by updating signage with braille and raised lettering, and we introduced anonymous feedback channels to ensure all voices are heard. In response to staff needs, we also provided SMART goal training to support collaborative performance planning.

Phase II extended this work outward, applying a health equity lens to our services and aligning with health authorities and advocates to reduce disparities. As a result, the Health Service Board formally recognized race and the Social Determinants of Health as key to whole-person well-being.

Through this journey, we've learned that equity is not a one-time initiative—it's a continuous practice.

Objectives Key Results (OKRs) and Assessment

Objective: Apply Health Equity Lens to our Customer Service Approach.				
Key Results				
Q4 2022: Support organization-wide knowledge and understanding of the SFHSS' role in advocating for racial and health equity on behalf of our membership, including staff, as measured through survey response	1 (Fails to Meet) 25% not at all aware	2 ✓ (Inconsistently Meets) 50% Somewhat aware	3 (Meets) 75% Moderately aware	4 (Exceeds) 100% Very aware
Q1 2023: Recruit staff representatives from multiple SFHSS divisions to form internal Equity Working Group	1 (Fails to Meet) Advisory does not meet	2 ✓ (Inconsistently Meets) Advisory meets infrequently	3 (Meets) Advisory meets quarterly	4 (Exceeds) Advisory advances recommendations to Executive Leadership quarterly
Objective: Apply equity to our workforce environment.				
Key Results				
Q4 2023: Use mixed training methods to expand collective knowledge about diversity, racial equity, and equity-related concepts	1 (Fails to Meet) Training not conducted	2 (Inconsistently Meets) Partial completion	3 ✓ (Meets) Full completion: -Biannual training for Leadership/All Staff. -Annual Training for Health Service Board Commissioners.	4 (Exceeds) Full completion and evidenced by behaviors as measured by pre/post survey knowledge, awareness, and skill development
Q2 2024: Conduct bi-annual workforce demographic analysis using provided Department Human Resources Workforce Dashboard	1 (Fails to Meet) Analysis incomplete	2 (Inconsistently Meets) Partial completion	3 ✓ (Meets) Workforce analysis Completed bi-annually	4 (Exceeds) Leadership discussion of bi-annual workforce analysis findings

Key Results Assessment

Objective: Apply health equity lens to our customer service approach

To comply with new executive orders where federal funding could be impacted by diversity, equity, and inclusion programs, SFHSS will shift our focus in 2026 and beyond to focus on our improving our total population health to maintain affordability and sustainability of our health benefits.

Support organization-wide knowledge and understanding of SFHSS' role in advocating for racial and health equity on behalf of our membership, including staff, as measured through survey response.

To build organization-wide understanding of SFHSS's role in advancing racial and health equity, we aligned with the San Francisco Office of Racial Equity (ORE) and launched our first

racial and health equity survey in 2022. This survey established a baseline for staff awareness and experiences, covering topics such as familiarity with racial equity, cultural identity, awareness of equity statements, and experiences with racism.

To reinforce learning, SFHSS regularly highlights diversity, equity, inclusion, and accessibility (DEIA) observances, helping staff connect their daily work to our broader equity goal. These efforts support an understanding of our shared responsibility to advocate for equity on behalf of our membership.

Recruit staff representatives from multiple SFHSS divisions to form internal Equity Working Group.

In 2023, City departments were expected to form internal Equity Working Groups. Cross-divisional participation was challenging due to limited staffing and the operational demands on call center staff. As a result, this initiative was not able to be continued.

In 2024, the Office of Racial Equity launched citywide Peer Learning Cohorts (PLCs), shifting from department-led groups to a more collaborative model. These cohorts—Pipelines, Pathways, Justice, and Culture—were organized around shared racial equity priorities.

SFHSS joined the Culture Cohort in 2025 to explore practices that foster belonging and psychological safety, such as affinity spaces, staff engagement, and feedback mechanisms. In response to staff input, we redesigned our all-staff meetings to include more social connection and launched an anonymous suggestion box using QR-coded posters to make feedback more accessible.

We also improved physical accessibility by updating signage to meet California building code standards, including braille, raised lettering, and appropriate mounting height.

Objective: Apply equity lens to our workforce environment

Use mixed training methods to expand collective knowledge about diversity, racial equity, and equity-related concepts.

SFHSS used a combination of city-sponsored and consultant-led trainings to deepen staff understanding of diversity, racial equity, and inclusion. In 2023, all leadership and 20 non-supervisory staff from across divisions participated in an Implicit Bias training facilitated by the Department of Human Resources.

In 2025, SFHSS joined a citywide training initiative with Be the Change™ Consulting, offering 2.5-hour virtual sessions supported by practical tools. These sessions helped both supervisory and non-supervisory staff apply equity principles in supervision, performance reviews, and organizational culture. Six staff from two divisions completed 47 hours of this training.

To track progress, SFHSS contributed to a new Equity Training Hours Measure to the Controller's Office. By the end of FY25, the department will have completed 118 hours of equity-related training—combining 70.4 hours of DHR-mandated sessions with 48 hours from the Be the Change™ series—meeting the city's recommended target for an organization of our size.

Conduct bi-annual workforce demographic analysis using the Department of Human Resources Workforce Dashboard.

Beginning in 2024, the Office of Racial Equity, in partnership with the Department of Human Resources, began providing all City and County departments with bi-annual workforce demographic data. This includes disaggregated diversity data for each department and senior leadership, along with trend analyses on terminations, promotions, new hires, and average hourly pay—sourced from the City's Applicant Tracking System (ATS). SFHSS has received these reports consistently for two years, supporting our efforts to monitor and advance workforce equity.

Goals and Objective Analysis



Advance **primary care practice** and member engagement to ensure the right care, at the right time and place.

- Objective: Improve primary care and well-being services
- Objective: Advance equity in the delivery of primary care services



Summary

As SFHSS developed its 2023–2025 Strategic Plan, the department had just experienced three consecutive years of significant medical plan premium increases—largely driven by advances in technology, surgical procedures, and new drug therapies. Despite higher spending, these innovations did not appear to improve members’ access to care or the quality of care received.

Instead, they contributed to a fragmented, high-turnover model of primary care where members often felt lost in the system.

To address this, SFHSS introduced Advanced Primary Care (APC) objectives aimed at demonstrating how a more coordinated, whole-person care model could improve outcomes and reduce long-term costs. A pilot program was launched with the Pacific Business Group on Health (PBGH), Altais (owners of Brown & Toland Medical Group), and Blue Shield of California. While the pilot showed promising results, it involved only about 1.5% of SFHSS members—those assigned to primary care physicians at ten Brown & Toland clinics.

Although Blue Shield, Altais, and PBGH plan to expand APC efforts with larger medical groups, they were unable to identify additional Northern California networks willing to participate. As a result, future expansion will occur in Southern California, where SFHSS has limited membership.

Given this, SFHSS will maintain its current APC arrangement with Brown & Toland but will not expand the initiative further at this time.

Objectives Key Results (OKRs) and Assessment

Objective: Improve Primary Care and Well-Being Services				
Key Results				
Q2 2023: Improve primary care effectiveness by setting baseline standard metrics and improvement targets	1 (Fails to Meet) No action towards Evaluation and improvement strategies	2 (Inconsistently Meets) Evaluation and/or improvement strategies in process	3 ✓ (Meets) Evaluation and improvement strategies complete	4 (Exceeds) Opportunities embedded into renewal and contacting
2023-2025: Improve population health outcomes in the measurement plan through alignment with other purchasers and healthcare providers	1 (Fails to Meet) Baseline data not reported	2 (Inconsistently Meets) Baseline data reported Q1 2023	3 ✓ (Meets) Incorporate informed data requests into PY2025 Renewal Request Q3 2023	4 (Exceeds) Require a deliberate and consistent approach to assessing health outcomes of underserved populations by Q4 2025
Q4 2023: Adapt methodology, standards, reporting requirements and goals for primary care spend and total cost of care	1 (Fails to Meet) No action towards standards, reporting or goals	2 (Inconsistently Meets) Standards, reporting and/or goals in process	3 (Meets) Standards, reporting, and goals established	4 ✓ (Exceeds) Standards, reporting, and goals included in renewal and contracting
Objective: Advance Equity in the delivery of Primary Care Services				
Key Results				
Q4 2025: Require stratification of nationally recognized equity measures to improve quality of care for underserved populations	1 (Fails to Meet) Data measures not identified	2 (Inconsistently Meets) Analyze high risk/ high-cost conditions Q1 2023	3 ✓ (Meets) Incorporate informed data requests into PY2025 Renewal Requests Q3 2023	4 (Exceeds) Require a deliberate and consistent approach to assessing health outcomes of underserved populations by Q4 2025

Key Results Assessment

Objective: Improve primary care and well-being services

Improve primary care effectiveness by setting baseline standard metrics and improvement targets.

One of the biggest challenges in delivering care to our members is timely access to primary care. As the foundation of care coordination, primary care carries a heavy workload—yet providers are often underpaid compared to specialists, contributing to a workforce shortage.

To help address this, SFHSS joined the Purchaser Business Group on Health (PBGH) National Primary Care Payment Reform working group. The group piloted a new payment model aimed at strengthening primary care through increased investment tied to quality and performance standards.

In Northern California, Blue Shield of California and Brown & Toland participated in the pilot. The next phase involves expanding to larger medical groups in Southern California to generate more robust results. SFHSS continues to apply select PBGH metrics in its Health Plan Performance Guarantees to support accountability and long-term improvement in primary care delivery.

Improve population health outcomes in the measurement plan through alignment with other purchasers and healthcare providers.

SFHSS has a long history of setting service and quality standards in the performance guarantees (PGs) of the health plan contracts that are aligned with other purchasers and healthcare providers. These metrics and performance standards ensure that members are receiving good service and quality of care.

Adapt methodology, standards, reporting requirements and goals for primary care spend and total cost of care.

SFHSS determined that Primary Care spend is difficult to measure due to capitations and other billing inconsistencies. The available data to demonstrate the efficacy of additional investment had a wide variation from 4% to 15%. For these reasons, we did not adopt a new methodology or standard for reporting requirements.

Objective: Advance Equity in the Delivery of Primary Care Services

Require stratification of nationally recognized equity measures to improve quality of care for underserved populations.

Accurate data is essential to addressing health disparities. SFHSS has built a strong data foundation by enhancing health plan reporting, auditing, and demographic data collection. Using Medicare criteria, we now collect voluntary demographic information from members to better identify and address gaps in care. These efforts strengthen our ability to measure health equity and guide more informed, targeted interventions.

Goals and Objective Analysis



Provide **affordable and sustainable** healthcare and high-quality well-being services through value-driven decisions and program design.

- Objective: Monitor funding sustainability
- Objective: Maintain Board Education

Summary

Compared to three years ago, SFHSS has progressed from a focus on cost management to a value-based approach to care. While we fell short in forecasting Health Sustainability Fund revenues and were unable to fully leverage price transparency data to influence the cost of care, we successfully aligned healthcare spending with national and local trends. We also exceeded expectations in Board education by strengthening fiduciary awareness and governance capacity. Notably, SFHSS conducted an RFP for the Medicare PPO plan for Plan Year 2025, resulting in \$67 million in savings over three years, which demonstrates the impact of value-based decision-making and collaborative leadership. Through this work, SFHSS has learned that achieving funding sustainability and affordable healthcare requires proactive planning, strategic vendor engagement, and strong, informed governance.

Objectives Key Results (OKRs) and Assessment

Objective: Monitor Funding Sustainability				
Key Results				
Q2 each year: Forecast Health Sustainability Fund Revenues ability to fund necessary expenditure	1 ✓ (Fails to Meet) 10% higher	2 (Inconsistently Meets) 5% higher	3 (Meets) Equal	4 (Exceeds) Less than
Q3 each year: Manage change in healthcare spend as compared to national and local trends	1 (Fails to Meet) 10% higher	2 (Inconsistently Meets) 5% higher	3 ✓ (Meets) Equal	4 (Exceeds) Higher
Q3 each year: Use Health Plan Price Transparency data to influence SFHSS cost of care in comparison to national and local trends	1 ✓ (Fails to Meet) 10% higher	2 (Inconsistently Meets) 5% higher	3 (Meets) Equal	4 (Exceeds) Less than

Objective: Maintain Board Education				
Key Results				
Q4 each year: Support Health Service Board knowledge and understanding of their role in assuring affordable health benefits are offered to SFHSS members through securing fiduciary, actuarial, legal, and administrative consultative services and expertise. This should align with the Board three-year Education Plan, including the use of other resources as needed	1 (Fails to Meet) Generally aware	2 (Inconsistently Meets) Moderately aware	3 (Meets) Aware	4 ✓ (Exceeds) Highly Aware

Key Results Assessment

Objective: Monitor Funding Sustainability

Forecast Health Sustainability Fund Revenues ability to fund necessary expenditure.

We have forecasted the Health Sustainability Fund (HSF) on a consistent basis. In the FYE 26/27 budget, we will reevaluate how the fund is used as well as assess the usage in the rate-setting process and provide the HSB with an updated 5-year projection showing the sources and uses of this fund.

Manage change in healthcare spend as compared to national and local trends.

Although healthcare prices continue to show significant variability and have historically outpaced inflation, SFHSS has maintained average rate increases that align with both local and national trends over the past five years. The higher rates for Plan Year 2024 reflect the delayed impact of inflation on healthcare costs, as well as lower-than-anticipated CMS funding for Medicare Advantage (MA) plans. In response, SFHSS issued an RFP for the Medicare PPO plan for Plan Year 2025, securing \$67 million in savings over three years. Looking ahead, SFHSS is advancing a pipeline of competitive bids aimed at identifying vendor partners who can deliver high-quality benefits at strong value.

Use Health Plan Price Transparency data to influence SFHSS cost of care in comparison to national and local trends.

SFHSS was not able to utilize Health Plan Transparency data to influence cost of care.

Objective: Support Health Service Board knowledge and understanding of their role in assuring affordable health benefits are offered to SFHSS members through securing fiduciary, actuarial, legal, and administrative consultative services, and expertise.

This should align with the Board three-year Education Plan, including the use of other resources as needed.

Ensuring the long-term financial stability of the Trust remains a core and ongoing responsibility of the Health Service Board's stewardship. To support this, Commissioners were offered a range of educational opportunities designed to deepen their understanding of fiduciary, actuarial, legal, and administrative matters relevant to their role in benefits policy and governance. The completed educational sessions are outlined below, along with the subject matter experts who led them:

1/2023 – Health Insurance Portability and Accountability Act (HIPAA) Training Rin Coleridge, SFHSS Director of Enterprise Systems and Analytics

2/2023 – Healthcare Cost Influencers, Iftikhar Hussain, SFHSS Chief Financial Officer, and Mike Clarke, Lead Actuary, Aon

5/2023 – Healthcare Cost Trend Influencers, Iftikhar Hussain, SFHSS Chief Financial Officer, and Mike Clarke, Lead Actuary, Aon

8/2023 – Healthcare Ecosystem and Market Overview: Iftikhar Hussain, SFHSS Chief Financial Officer and Mike Clarke, Lead Actuary, Aon

9/2023 – Market/Health System Innovation Anne Thompson, Senior Account Executive, Aon

11/2023 – Benefit Design Benchmarking and Plan Design Influence on Member Plan use Behavior: Anne Thompson, Senior Account Executive, and Mike Clarke, Lead Actuary, Aon

11/2023 – Determining City Contribution – SFHSS Retiree Medical Plans: Mike Clarke, Lead Actuary, Aon

12/2023 – Future State Opportunities for SFHSS: Anne Thompson, Senior Account Executive, and Mike Clarke, Lead Actuary, Aon

1/2024 – Fiduciary Training- Chris Sears, Ice Miller Legal Counsel

2/2024 – Employer Budget Positions: City employers include City College of San Francisco, San Francisco Unified School District, City and County of San Francisco

8/2024 – Health Insurance Portability and Accountability Act (HIPAA) Training Rin Coleridge, SFHSS Director of Enterprise Systems and Analytics

9/2024 – Advanced Primary Care Practice Goal Update: Iftikhar Hussain, SFHSS Chief Financial Officer, Raymond Tsai, MD MS, Vice President, Advanced Primary Care, Purchaser Business Group on Health (PBGH)

1/9/2025 – Board Education Non-Medicare Health Plan Rate Setting Methodology, Mike Clarke, Lead Actuary, Aon

1/9/2025 – Rates and Benefits Annual Process and Cycle, Mike Clarke, Lead Actuary, Aon

2/13/2025 – Board Education Healthcare Cost Trend Influencers Update, Mike Clarke, Lead Actuary, Aon

8/14/2025 – Board Education HIPAA, Rin Coleridge, SFHSS Privacy Officer

9/11/2025 – Board Education Settlor and Fiduciary Role Training, Chris Sears, Ice Miller Legal Counsel

Goals and Objective Analysis



Support the **mental health and well-being** of our membership by reducing stigma and addressing barriers to care in partnership with key stakeholders.

- Objective: Provide easily accessible pathways to mental health and substance use disorder services through increased member awareness
- Objective: Enhance programs to support early retiree and retiree well-being



Summary

SFHSS has made meaningful strides in supporting member mental health and well-being by reducing stigma and improving access to care in collaboration with key stakeholders. A major milestone was the inaugural 2022 Mental Health Forum, which convened health plans, city partners, and department leaders to identify challenges and opportunities in navigating mental health resources.

Awareness efforts continued through annual Mental Health Awareness campaigns, with increased engagement in 2023 and 2024, though 2025 saw a slight dip. Internally, the launch of the First Responder EAP Advisory Group created a focused channel to address access issues. However, expanding this model beyond first responders proved difficult, revealing capacity constraints and the need for more tailored departmental approaches.

Since 2022, the landscape has shifted: stigma is declining, demand for services is rising, and more digital and 24/7 supports—like the external EAP and wellness app for first responders—are now available. We've also gained insight into retiree well-being. Although a proposed Healthy Aging Program didn't move forward due to misalignment with retiree needs, the process clarified what matters most to this population and where gaps remain.

Through this work, we've learned that building accessible, equitable mental health pathways requires ongoing collaboration, honest evaluation of system limitations, and flexibility when solutions fall short. Most importantly, empowering members—through awareness, navigation tools, and specialized support—remains central to promoting well-being at every life stage.

Objectives Key Results (OKRs) and Assessment

Objective: Provide easily accessible pathways to Mental Health and Substance Abuse Disorder Services through increased member awareness				
Key Results				
Q1 2023: Conduct a mental health vendor summit to support alignment around clear pathways to navigating mental health and emotional well-being resources and services	1 (Fails to Meet) Do not host the summit	2 (Inconsistently Meets) Partially plan the summit	3 ✓ (Meets) Host Summit to Identify the navigation process and gaps to accessing resources and services	4 (Exceeds) Fill in the gaps and inform members
Q3 Annually 2023-2025: Create mental health campaign to increase utilization of mental health and substance use disorder resources and services	1 (Fails to Meet) No change in utilization	2 ✓ (Inconsistently Meets) <5% increase in utilization	3 (Meets) 5% increase in utilization	4 (Exceeds) >5% increase in utilization
Q1 2024: Recruit members among city departments to form an Employee Assistance Program (EAP) advisory group	1 (Fails to Meet) No recruitment	2 (Inconsistently Meets) Partial recruitment	3 ✓ (Meets) Recruitment completed	4 (Exceeds) Advisory meets quarterly
Objective: Enhance programs to support early retiree and retiree well-being				
Key Results				
Q4 2023: Identify evidence-based and best practice approaches to enhancing retiree well-being	1 (Fails to Meet) No research completed	2 ✓ (Inconsistently Meets) Research has begun but program is not secured	3 (Meets) Program identified	4 (Exceeds) Pilot program timeline has been implemented

Key Results Assessment

Objective: Provide easily accessible pathways to mental health and substance use disorder services through increased member awareness

Conduct a mental health vendor summit to support alignment around clear pathways to navigating mental health and emotional well-being resources and services.

SFHSS held an inaugural Mental Health Forum in December 2022 to discuss how to support alignment around clear pathways to navigating mental health and well-being resources and services. The forum brought together stakeholders to understand the current state of mental health and well-being support for members and to collaborate on mapping the journey to care. SFHSS, in collaboration with the Department of Human Resources (DHR), internal department heads, health plans, and vendor partners, will develop timelines and prioritize each recommendation in conjunction with the forum. SFHSS has released the 2022 Mental Health Forum Report embedded in the Director Report in January 2024.

Recruit members among city departments to form an Employee Assistance Program (EAP) advisory group.

An Employee Assistance Program (EAP) advisory group was formed among the first responder departments. Expanding the advisory group to include other departments has proven challenging with respect to staff time and bandwidth. The existing EAP first responder committee meetings are held monthly to address access and mitigate issues. There are no further plans to expand the advisory group to include other city departments at this time.

Create mental health campaign to increase utilization of mental health and substance use disorder resources and services.

The Mental Health Awareness campaign is held annually in May alongside National Mental Health Awareness Month. It focuses on reducing stigma, highlighting the connection between mental and physical health, and encouraging outreach and support. The campaign's key performance indicator is a 5% year-over-year increase in combined engagement across trainings, webinars, CredibleMind assessments and sessions, and EAP cases.

In 2023, we exceeded this goal with a 19.2% increase. In 2024, we achieved a 5.9% increase. However, in 2025, engagement fell short—down 0.9% from the previous year.

Objective: Enhance programs to support early retiree and retiree well-being

Identify evidence-based and best practice approaches to enhancing retiree well-being.

SFHSS explored the development of a Healthy Aging Program to better support retirees. The Well-Being team issued a Request for Information (RFI) to gather input from vendors specializing in elder care programs. A panel of retirees and SFHSS staff reviewed vendor submissions and presentations, using focus groups to identify recurring themes aligned with retiree needs. This process was informed by a prior retiree survey that highlighted key areas for support.

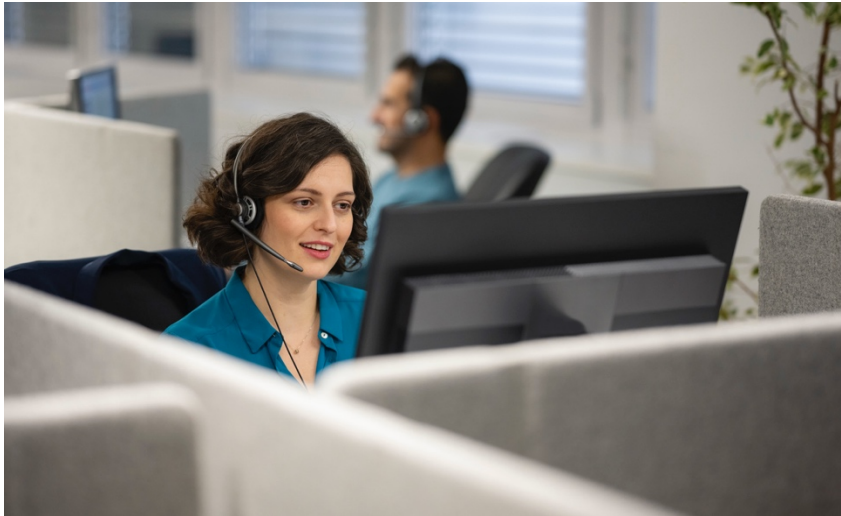
However, the vendor proposals did not align with the priorities identified by retirees, and as a result, the program was not pursued. Despite this, the effort provided valuable insights into retiree preferences and highlighted opportunities for future engagement.

Goals and Objective Analysis



Optimize service to maintain and advance exceptional member engagement.

- Objective: Enhance member education and support services
- Objective: Improve staff training and professional development
- Objective: Implement quality improvement review processes



Summary

To maintain and elevate exceptional member engagement, SFHSS optimized service delivery through standardized procedures, enhanced quality assurance, and consistent member communications—resulting in more reliable experiences.

These improvements contributed to a rise in member satisfaction from 58% to 61%, and a notable increase in First Call Resolution from 62% to 70%.

Staff readiness also improved significantly, with 100% of survey respondents reporting they felt supported and equipped to assist members. Compared to three years ago, SFHSS now operates with stronger feedback loops, clearer performance standards, and more structured training resources that drive continuous service improvement.

While some initiatives were delayed due to staffing constraints, the experience underscored the importance of maintaining adequate capacity, consistently tracking performance, and actively engaging staff. It also reinforced the need for ongoing operational enhancements and targeted resource investments to meet the evolving needs of both members and employees.

Objectives Key Results (OKRs) and Assessment

Objective: Enhance member education and support services				
Key Performance Indicators - KPI				
Increase the percentage of members who agree to the electronic delivery of all Employee Benefit Notices by 5% year-over-year	1 ✓ (Fails to Meet) Collection of electronic disclosure not completed	2 (Inconsistently Meets) Below annual targets	3 (Meets) Achieves Target of 5% by Q4 2023, 10% by Q4, 15% by Q4 2025	4 (Exceeds) Exceed annual targets
Improve Member Satisfaction by 2% year-over-year for the services provided by SFHSS Member Services, as measured by satisfied or higher through the survey response	1 (Fails to Meet) Survey not completed	2 (Inconsistently Meets) <2% Increase in member satisfaction	3 ✓ (Meets) Develop baseline in Q3 2023, Achieves baseline +2% by Q2 2024, Achieves baseline +4% by Q2 2025	4 (Exceeds) >2% Increase in member satisfaction
Improve First Call Resolution rate by 2% year-over-year for calls placed to SFHSS Member Services	1 (Fails to Meet) Decrease in first call resolution rate	2 ✓ (Inconsistently Meets) <2% Increase in first call resolution rate	3 (Meets) Baseline is 73%, Achieve Target of 75% by Q4 2023, 77% by Q4 2024, 79% by Q4 2025	4 (Exceeds) >2% Increase in first call resolution rate
Q4 2023: Develop member portal for personalized benefits information and wellness engagement	1 ✓ (Fails to Meet) Portal not developed	2 (Inconsistently Meets) Portal Partially developed	3 (Meets) Portal development completed	4 (Exceeds) Portal developed with enhanced features

Key Results Assessment

Objective: Enhance member education and support services

Improve Member Satisfaction by 2% year-over-year for the services provided by SFHSS Member Services, as measured by satisfied or higher through survey response.

To better understand and improve member experience, SFHSS launched an annual Member Satisfaction Survey. The 2024 survey established a baseline: 58% of members reported being satisfied or highly satisfied, 20% were neutral, and 22% were unsatisfied. In 2025, satisfaction rose to 61%, surpassing the 2% annual improvement goal. Neutral responses declined to 18%, and unsatisfied responses dropped to 21%.

These results reflect a positive trend in member engagement and validate the service enhancements implemented in response to 2024 feedback. Overall, the survey has proven to be a valuable tool for tracking progress and guiding continuous improvement in member satisfaction.

Improve the First Call Resolution rate by 2% year-over-year for calls placed to SFHSS Member Services.

To enhance service efficiency and member engagement, SFHSS prioritized resolving member needs during their initial call by implementing targeted improvements to First Contact Resolution (FCR). This initiative focused on strengthening quality assurance, standardizing customer service practices, and refining communication tools to ensure accurate and consistent support.

In 2023, the baseline FCR rate was 63%. Although it dipped slightly to 62% in 2024—prompting a review of resources and processes—continued refinements led to a significant rebound. By July 2025, the FCR rate had climbed to 72%, marking a 10% year-over-year improvement and positioning SFHSS to meet its 2% annual growth target for Plan Year 2025.

These results demonstrate that proactive system enhancements, staff engagement, and a member-centered approach are driving measurable gains in service reliability and first-contact issue resolution.

Objective: Improve staff training and professional development				
Key Results				
Q4 2023: Document, analyze, and improve standard operating process in the Member Services Division	1 (Fails to Meet) Documentation not completed	2 ✓ (Inconsistently Meets) Documentation partially completed	3 (Meets) Documentation of standard operating process completed	4 (Exceeds) Efficiency improvements based on standard operating process
Q4 2023: All Call Center staff are provided with 2 internal process improvement opportunities that involve cross-functional team participation and that promote career development	1 ✓ (Fails to Meet) No process improvement opportunities provided	2 (Inconsistently Meets) Inconsistent process improvement opportunities provided	3 (Meets) 2 process improvement opportunities provided	4 (Exceeds) >2% process improvement opportunities provided
Q4 2023: Each Call Center staff provides input (through case narratives) that leads to Salesforce Knowledge Base Articles being updated 2x/year	1 ✓ (Fails to Meet) Management does not evaluate staff	2 (Inconsistently Meets) Management infrequently evaluates staff	3 (Meets) Management evaluations are completed, staff meet the documentation target and Knowledge Base Articles are updated 2x/year	4 (Exceeds) Management evaluations are completed, staff meet the documentation target and Knowledge Base Articles are updated >2x/year
Q2 2024: Develop standardized training for SFHSS Operations staff focusing on general customer service skills and program specific education	1 (Fails to Meet) Training not developed	2 ✓ (Inconsistently Meets) Training partially developed	3 (Meets) Training development completed	4 (Exceeds) Training implemented
Increase percentage of staff that report readiness: having access to the knowledge, training resources, and tools that they need to complete Open Enrollment-related tasks successfully, as measured by agree or strongly agree through survey response	1 (Fails to Meet) Decrease in staff reported readiness	2 (Inconsistently Meets) <85% reported staff readiness	3 (Meets) Baseline staff reported readiness is 69%, Achieve Annual Target of 85%	4 ✓ (Exceeds) >85% reported staff readiness

Key Results Assessment

Objective: Improve staff training and professional development

Review, analyze and document the standard operating processes (SOP) in the Member Services Division.

To strengthen operational consistency and service quality, SFHSS launched a focused effort in 2023 to document key business practices through the development of Standard Operating Procedures (SOPs). A TPV 1813 Sr. Benefits Analyst was hired in 2024 to lead the initiative, which began with a comprehensive review of existing processes and the creation of a project plan to guide SOP development.

The Retiree Application SOP was completed as a pilot and served as a model for future documentation across business functions. While the initiative showed early promise, progress stalled in 2025 due to staffing constraints. No additional SOPs were developed, and the effort has since been paused. Without dedicated resources, SFHSS is currently unable to maintain or expand SOP development, underscoring the importance of sustained capacity to support long-term operational improvements.

Increase percentage of staff that report readiness and job satisfaction: having access to the knowledge, training resources, tools, and support that they need to complete Open Enrollment related tasks successfully, as measured by agree or strongly agree through survey response.

To better prepare staff for Open Enrollment (OE), SFHSS launched annual post-OE surveys in 2023 to assess staff readiness and identify areas for improvement. The goal was to ensure Member Services staff had the knowledge, tools, and support needed to confidently assist members.

In 2023, 56% of staff reported feeling prepared. By 2024, satisfaction rose to 90% with a 59% response rate. In 2025, satisfaction reached 100% with a 61% response rate—demonstrating both full satisfaction and increased engagement.

This progress reflects targeted strategies, including enhanced OE training modules informed by prior feedback, accessible support materials, and weekly check-ins to address learning gaps in real time. Year-over-year data confirms that sustained investment in training directly improves staff readiness and service quality. Continued focus on training participation and survey engagement will help maintain these high standards moving forward.

Objective: Improve quality assurance review processes				
Key Results				
Q4 2024: Develop Formal Quality Improvement Standards for the Member Services functions*	1 (Fails to Meet) No QA standards developed	2 ✓ (Inconsistently Meets) Partial QA standards developed	3 (Meets) Management develops standards for evaluating all Member Services functions	4 (Exceeds) Management develops standards for evaluating all Member Services functions with accompanying process improvement
Beginning in Q1 2025: Conduct formal Quality Improvement Reviews of the Member Services functions*	1 (Fails to Meet) Quality Assurance reviews are not conducted	2 ✓ (Inconsistently Meets) Quality Assurance reviews conducted in some areas	3 (Meets) Quality Assurance reviews conducted in all areas	4 (Exceeds) Quality Assurance reviews conducted in all areas and the frequency of staff meeting the standards increase

*Member Service functions include responding to calls to the SFHSS Call Center, processing of Benefits Administration System (BAS) transactions, administering carrier and internal SFHSS discrepancy reports, and processing premium delinquency actions.

Key Results Assessment

Objective. Implement quality improvement review processes

Develop formal Quality Improvement Standards for Member Services functions.

To ensure members receive consistent, high-quality service with every call, SFHSS launched a formal Quality Assurance (QA) initiative in 2023. The effort aimed to align customer service strategies with key member touchpoints, using performance-based metrics to identify inefficiencies and increase automation where possible.

A major outcome was the development of Call Center QA metrics to assess both the quality and accuracy of information shared with members. These metrics also supported improvements in enrollment processing, reconciliation, and discrepancy resolution.

While the initiative led to the successful implementation of one operational tool and showed early promise, it will not continue in the upcoming period due to limited staffing resources.

Conduct formal Quality Improvement Reviews of Member Services functions.

Following the implementation of the Call Center Quality Assurance (QA) review process initiated in 2024, SFHSS supervisors will continue to review two calls per staff member each month to ensure service consistency and quality. This monthly review process will remain in place, with Plan Year 2025 data scheduled for release on October 31, 2025.

Key Learnings

Following a thorough reflection, SFHSS leadership believes that the largest lesson learned from its 2023-2025 Strategic Plan was that it lacked a clear destination. A "strategic plan with no destination" is a plan that lacks clear, defined goals and a future vision, making it a set of actions without a clear outcome. Although SFHSS' plan started with the required components of a vision and mission, these lacked clear definition of their terms. Such clarity is needed to guide actions and ensure resources are focused on achieving a particular future state.

Going forward, SFHSS will ensure the strategic plans are designed with a clear end goal or destination to ensure our work is connected to the desired outcome.

Generative AI tools were used to review the content for spelling, grammar, and clarity.



Our Mission

Ensuring equitable, sustainable, and quality benefits that enhance the well-being of our members and their families throughout the lifecycle.

Our Vision

Engagement in personalized care that centers disease prevention and equitable services for optimal member health.

Our Values

- Inclusion
- Compassion
- Operational Excellence
- Collaboration
- Alignment
- Accountability