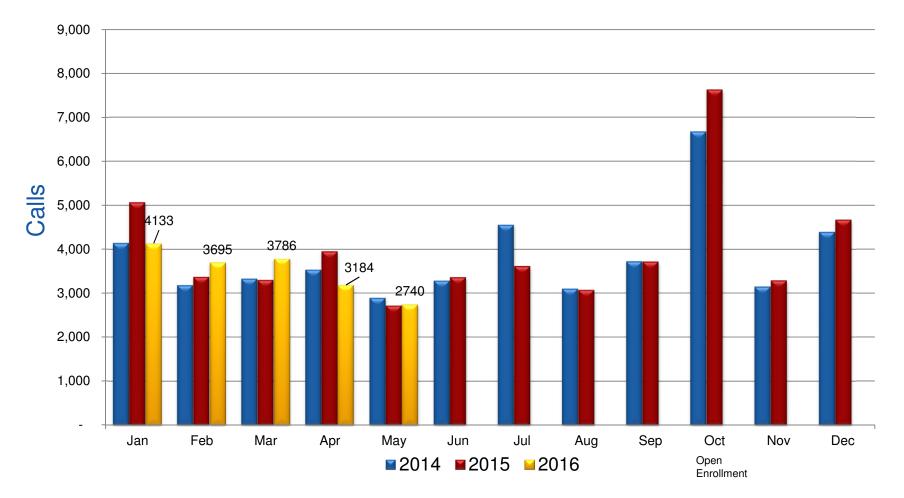
## Calls and Office Visits: May 2016

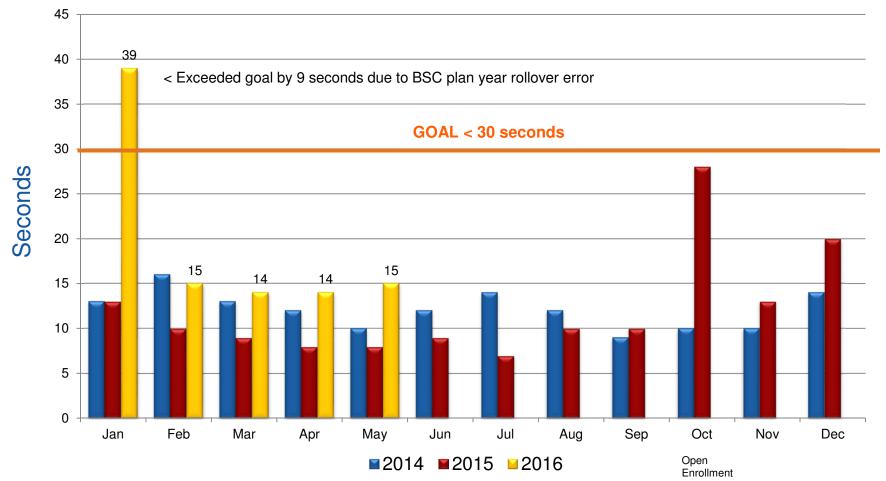
- Calls and In-person Assistance total:
  - Inbound calls: 2,740 answered calls (0.9% ↑ from 2015)
  - Speed of answer: 15 seconds (87.5% ↑ from 2015)
  - Abandonment rate: 0.9% (25 Calls)
  - In-person assistance: 1,218 members (5% ↑ from 2015)

June 2016

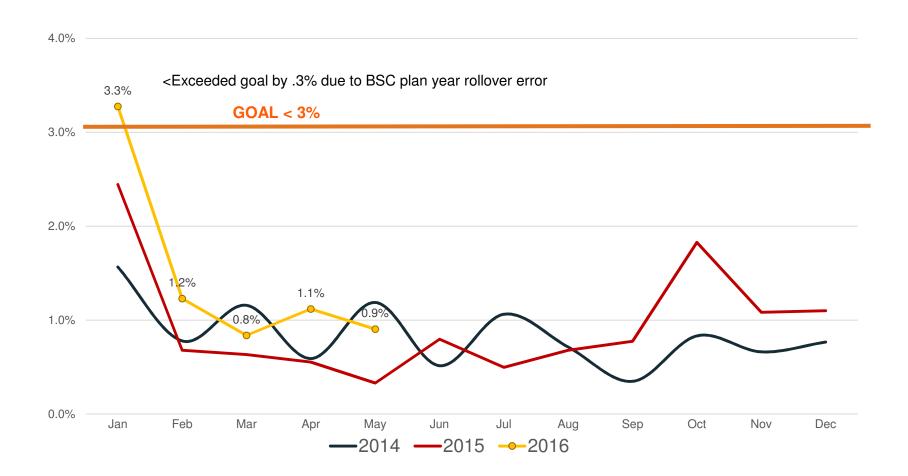
## Inbound Calls: May 2016



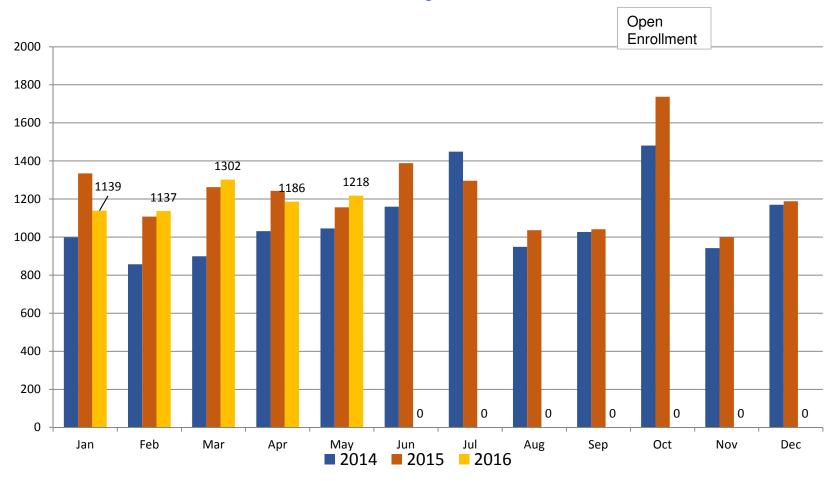
## Call Speed of Answer: May 2016



## Abandonment Rate: May 2016



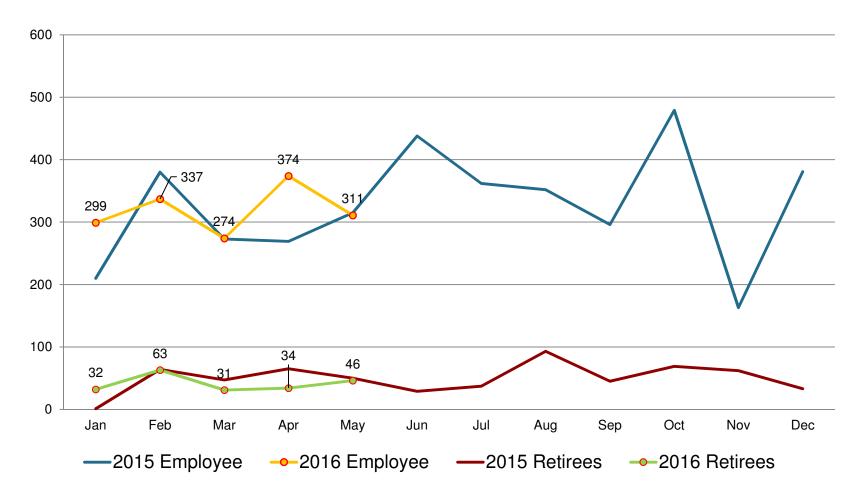
## In-person Assistance: May 2016



## Delinquencies & Terminations: May 2016

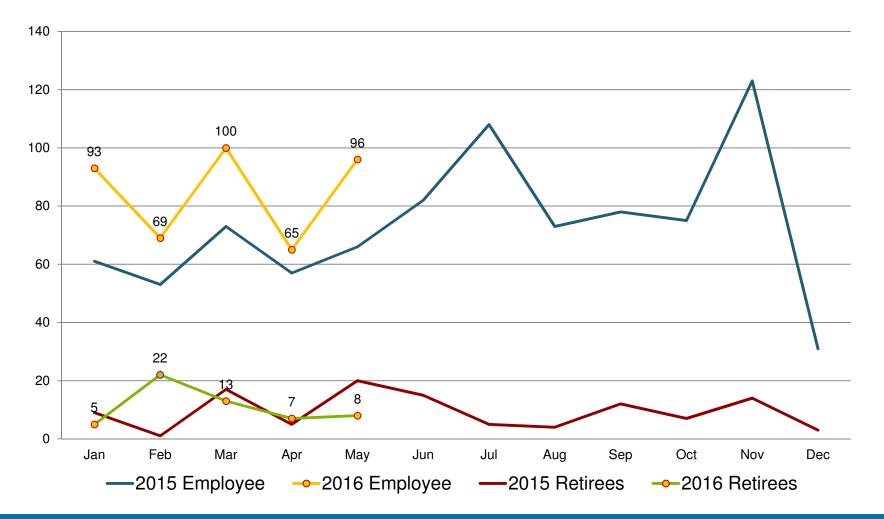
- Delinquency Notices Sent
  - Employees: 311
  - Retirees: 46
- Termination Notices Sent
  - Employees: 96
  - Retirees: 8

## **Delinquency Notices: May 2016**



June 2016

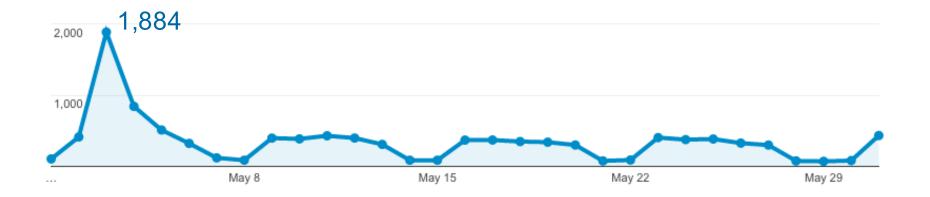
## **Termination Notices: May 2016**



## **Voluntary Benefits Survey**

- Ahead of offering voluntary benefits in 2017, HSS distributed a Voluntary benefits survey through the City and County and Superior Court email system on May 24, 2016. The purpose of the survey is to obtain input from employees on what type of voluntary benefits interests them.
- Survey consisted of 16 questions asking employees if they were likely to elect voluntary benefits such as Short Term Disability, Supplemental Life, Universal Life, Critical Illness, Accidental Injury, Pet Insurance and Identity Theft Protection.
- > As of June 1, 2016, 2500 employees responded.
- Employees overwhelmingly responded that they were likely or somewhat likely to enroll in at least one of the benefits mentioned.
- Additional comments employees provided indicated a very positive and appreciative response to offering these benefits.
- Next steps; reminder emails to complete the survey will be sent as well as posted on the City's employee portal. Departments' HR personnel will be sent flyers to inform non-email based employees of the survey.
- Survey will end mid-June and results will be used to finalize voluntary benefits offerings for 2017.

### Website Visits: May 2016



### 7,670 unique visits spike on May 3 driven by eNews

### Top Page Views: May 2016

Home Page	5,386
City & County Employee Benefits	2,895
DPP Questionnaire	2,252
Retiree Benefits	1,337
Well-being Home Page	1,236
Wellness Center Calendar	993
Colorful Choices	784
Health Service Board	679
Blue Shield	627
Member Services Top Ten Topics	618

### Top Search Terms myhss.org: May 2016

1. Address Change	
2. EAP	
3. FSA	
4. Forms	
5. COBRA	
6. Enrollment	
7. Retirement	
8. Discounts	
9. Family Leave	
10. Make an Appointment	

### eNews May 2016

#### Subject Line: 2016 April eNews

Total Delivered	18,256	
Opened	6,935	38%
Clicked Links	1,183	6.5%

### eNews Clicked Links: May 2016

Diabetes Prevention Questionnaire	249
Second Opinion Vendors Board Presentation	214
Surrogacy and Adoption Benefit Board Presentation	168
Rate Relativity Cost Impact Board Presentation	131
Commuter Benefits	59
Strength Training Seminar Flyer	55
Five Buckets Seminar Flyer	39
Meaningful Retirement Seminar Flyer	39
Get Your Kids to Eat Healthy	37
Health Service Board May Meeting	29

### **Communication Highlights**

- Open Enrollment Guides covers finalized.
- Voluntary benefits survey promotion to all City & County and Superior Court employees. 2500 responses to date.
- Collaborating with wellness manager and outside agency on Route 66 physical activity program materials.
- Web strategy project kickoff scheduled with agency Rolling Orange.

**Communication Highlights** 

- Working with contracts and IT team on migration of myhss.org to new web hosting company.
- Updated wellness flyer templates and EAP brochures.
- Beginning design work on fall flu shot promotion campaign.
- Collaborating with operations on evaluating technologies for member webinars.
- Updated design of finance budget presentation to BOS.

### PEOPLESOFT:

- Completed 4th round User Acceptance Testing (UAT) and coding remediation of identified issues for 1094/1095 electronic filing. 74 total issues identified; 8 issues outstanding
- Remediation of coverage termination issue with United HealthCare data file
- Ongoing remediation of PeopleSoft 9.2 Benefits customizations

### IT INITIATIVES:

- Open Enrollment final schedule released, tracking 312 tasks
- Enterprise Content Management (ECM) software installation completed
- ECM design meetings completed
- Participating in RFP panel for phone system replacement
- Collaborating with Ricoh on installation and configuration of new copiers and AutoStore & Output Management systems
- Completed data quality improvements in Salesforce

#### DATA ANALYTICS:

- Extracted and analyzed and prepared utilization data for Medicare retirees from the APCD
- Generated ad-hoc reports on Bariatric Surgery, Behavioral Counselling-BMI and Hospice utilization
- Generated new analytic reports
- Presented proposals on various analytics in support of HSS goals
- Generated SalesForce transactional reports

OTHER:

- Attended Tableau Data Visualization training via Citywide Analyst Network
- Conducted ECM orientation with the HSS Administrative team
- Provided data required by SB272 which mandates the creation of a catalogue of multi-departmental systems which are also systems of record

# Health Plans Dashboard

Q4 2015 Dashboard Summary Report A review of Inpatient, Outpatient and RX trends For Medicare Retirees

June 09, 2016

Prepared by HSS

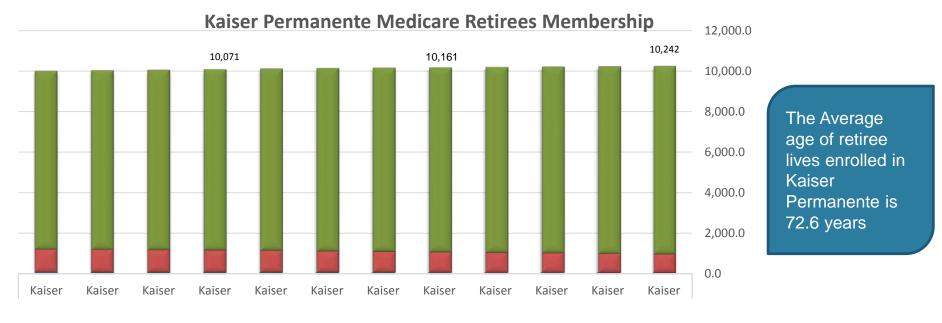
#### Introduction

This report details the inpatient, outpatient and pharmacy utilization across Blue Shield, Kaiser Permanente, and City Plan for the Medicare retiree population through Q4 2015. This is the first dashboard presented to the HS Board for the retiree population since Q3 2010.

This insight into the health plans' performance has been sourced from the All Payer Claims Database (APCD). For the post 65 Medicare population financial information is limited and therefore this report focuses on utilization metrics.

Please note that this report contains information through December 31, 2015. Since the United Healthcare Medicare Advantage NPPO (UHC NPPO) was not implemented until the 2016 plan year, data for the UHC NPPO will not be available until the next quarterly update of the dashboard.

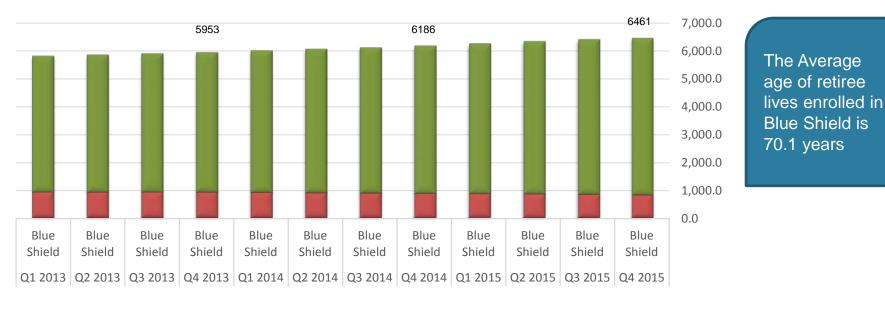
#### Health Plan Medicare Retirees: Membership





- Kaiser Permanente Medicare retirees comprise 45% of the total Medicare retiree population
- Proportionally, enrollment has been consistent over the past two years

#### Health Plan Medicare Retirees: Membership



#### **Blue Shield Medicare Retirees Membership**

Ages 0-17 Ages 18-64 Ages 65+

- Blue Shield Medicare retirees comprise 29% of the total Medicare retiree population
- The average age has increased slightly from 69.3 in 2010 to 70.1 in 2015

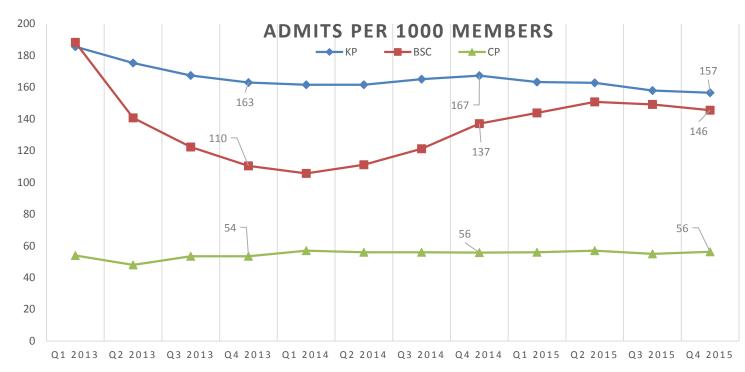
#### Health Plan Medicare Retirees: Membership



#### **City Plan Medicare Retirees Membership**

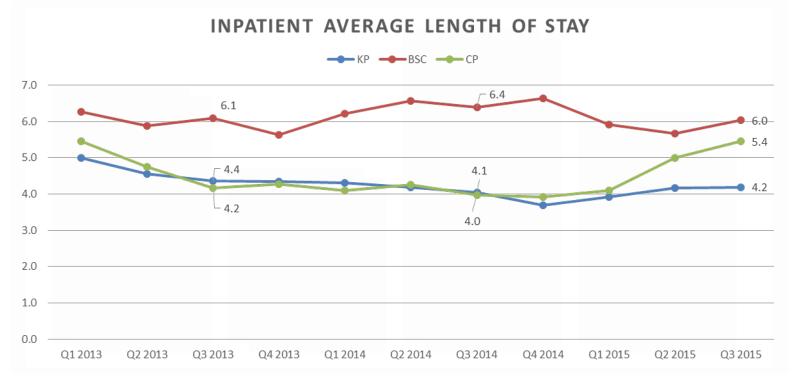
- City Plan Medicare retirees comprise 26% of the total Medicare retiree population
- 35 City Plan members live outside of the United States

#### Health Plan Medicare Retirees: Admits per 1000 Members



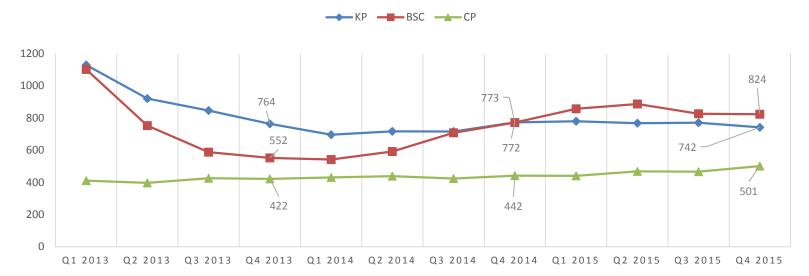
- Kaiser has a greater number of admissions per 1000 retirees, although this has been trending downwards, 10 admits/1000 less in the past year
- City Plan's admits per 1000 has remained stable
- Blue Shield's admits per 1000 are increasing, 9 admits/1000 more in the past year

#### Health Plan Medicare Retirees: Inpatient Average Length of Stay



• Since 2010, both Kaiser and City Plan have reduced their Average length of Stay from 7 and 8 respectively. Blue shield has increased by 2 days and is consistently higher than the other health plans

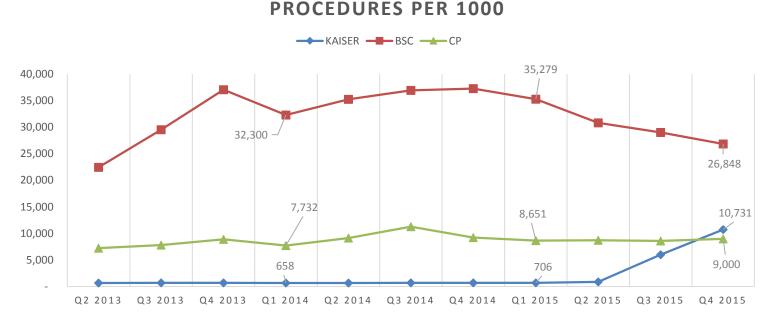
#### Health Plan Medicare Retirees: Inpatient Days per 1000 Members



INPATIENT DAYS PER 1000 MEMBERS

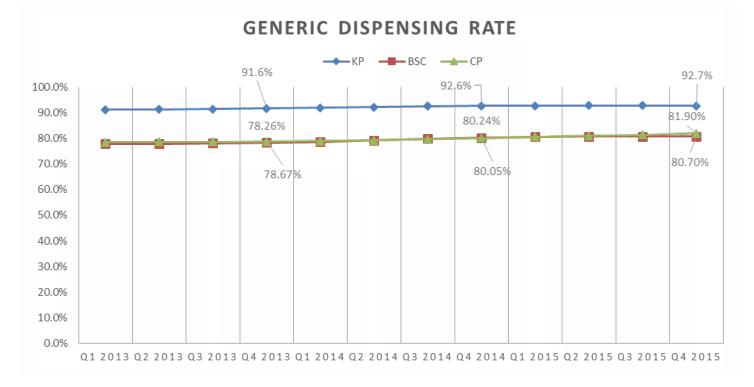
- Kaiser's Inpatient Days per 1000 has been gradually trending downwards while Blue Shield and City Plan's days/1000 has been trending upwards
- In 2010, Blue Shield's days/1000 was almost double that of Kaiser's. While Blue Shield has improved significantly over the years, the recent upward trend results for Q4 2015 in an additional 82 days/1000 which conservatively amounts to \$3.6 Million

#### Health Plan Medicare Retirees: Outpatient Procedures Per 1000



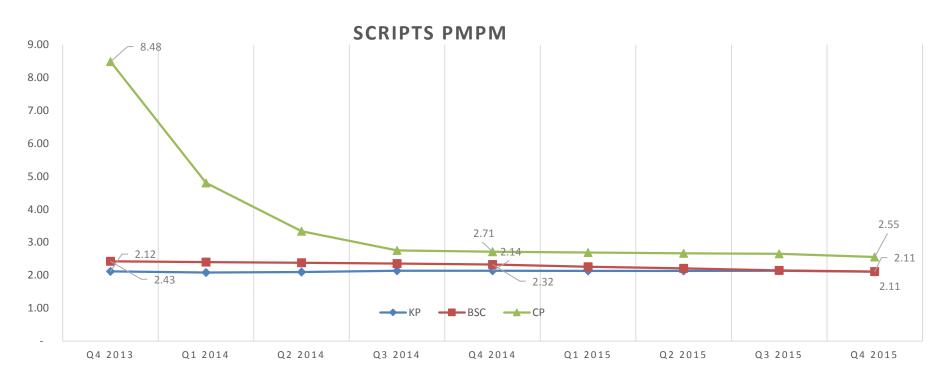
- The procedures per 1000 aggregates emergency room, surgical, medical, laboratory, radiology, office visit and other procedures such as physical and occupational therapies.
- The spike in procedures for Kaiser beginning in Q3 of 2015 is attributed to improved coding and data capture which renders more accurate information

#### Health Plan Medicare Retirees: Dispensing Rate for Generic Drugs



- The generic dispensing rate across all three health plans has remained relatively flat possibly in part due to specialty drugs
- Blue Shield's PMPM cost for Q4 2015 is \$263 and for United HealthCare it is \$245

#### Health Plan Medicare Retirees: Scripts PMPM



 By volume the largest therapeutic classes represented are Cardiovascular Agents and Central Nervous System drugs which are utilized in the treatment of Alzheimer's, migraines, MS/Parkinsons, depression, anxiety and epilepsy

#### Next Steps:

This presentation completes the first pass of reporting on our active, early retiree and retiree populations across all three health plans. During this production cycle, the Data Analytics team has been able to validate the data as well as understand the differences and limitations in order to accurately represent the information. Claims data into the All Payer Claims Database (APCD) is incomplete and some data will continue to be sourced directly from the health plans.

Consistent reporting for all of the HSS' populations is the goal. The intended reporting schedule is to have updates every quarter according to the data refresh cycle of the APCD. Additionally, HSS will provide annually to the HS Board the risk scores.

The future development will focus on incorporating benchmarks as well as providing a revised dashboard layout. And lastly, HSS will be exploring opportunities to utilize the SF Open Data portal to share dynamic versions of these reports.

#### APPENDIX

#### Data Analytics Update Glossary

- APCD All payer claims database
- Fee for Service Payment is made each time service is rendered
- Formulary Compliance Adhering to prescription formulary drugs that have been selected and approved for their safety, quality and cost effectiveness
- Generic Dispensing Rate Measures the number of drugs dispensed as generic divided by the total number of drugs dispensed
- Inpatient Admittance to a hospital or clinic for treatment that requires at least one overnight stay
- Loss Ratio The total amount of dollars paid out in claims divided by the amount collected in premiums
- Members A person enrolled in and eligible for benefits under a health care plan
- Member Share The portion of health care costs (copayments, deductibles, and coinsurance) for which the member enrolled in a health plan is responsible

- Outpatient Admittance to a hospital or clinic for treatment that does not require an overnight stay. This includes emergency room visits, dialysis, group therapy at the facility setting, lab work, observation room, surgeries, radiology and medical supplies and services
- PMPM Per member per month
- Professional Procedures All services not provided in an inpatient setting
- Specialty Drug High-cost injectable, infused, oral, or inhaled drugs that generally require special storage or handling and close monitoring of the patient's drug therapy
- Total Paid Claims Total dollar amount paid for services and costs from health care providers and facilities submitted to the insured for payment
- Utilization The extent to which an insured group uses a particular health care service in a specified period, typically expressed as the number of services user per year per 100 or per 1000 persons

### **Finance and Accounting**

- FY 2016-17 & 2017-18 Mayors Proposed Budget incorporated the HSB approved budget with no changes.
- Initial kick-off meeting with KPMG was held for the FY 2015-2016 external audit.
- CY 2015 Post Audit by the Controller's Office yielded no material weakness, additional desk procedures to be developed for journal entries

### **Contracting and Vendor Management**

- New Contracts Managers hired, and scheduled to start on June 20, 2016.
- Fully executed the Agreement between Circlepoint and the City and County of San Francisco for additional development and design of print and web-based promotional materials, with copy writing services for Wellness Champions.
- Fully executed the the Agreement between Rolling Orange Inc. and the City and County of San Francisco for professional services to provide website strategy, design and engineering services in preparation for a redesign of the Health Service System Website.

#### Wellness and EAP Collaborative Efforts

- Wellness/EAP Orientations
  - SF City Clinic 37 attendees
  - 2 LHH Orientations 32 + 17 attendees
- Wellness/EAP Tabling
  - REC Health Fair 65 attendees

- Southeast Clinic Retreat 37 attendees
  - Wellness/EAP Orientation
  - Stress Management Workshop
  - Exercises at Workstation
  - Walking Activity to illustrate the importance of physical activity during the day for physical and mental well-being
  - 2 Wellness Champions were recruited as a result of this event
  - This was the beginning of a continuing partnership between HSS and the clinic

#### **May Wellness Events**

- Coordinated 12 events at departments (1 coaching, 1 screening, 9 seminars, 1 stress and resiliency training)
  - HSS staff attended 4 of the coordinated events
- HSS staff coordinated and provided 3 EAP seminars at departments

#### **May Champion Support**

- Supported PRT and LIB Champion Communities
- Met with the POL staff physician to discuss best program opportunities for POL

#### **Diabetes Prevention Program Recruitment**

- Main Public Library 19 enrolled
- Unified School District 8 enrolled and were randomized into the Library group since the minimum enrollment of 16 was not met
- In June, participants will be recruited at Laguna Honda Hospital and the Port
- In July, participants will be recruited at PUC Waste Water and the offices around 1650/1660 Mission St.
- To increase awareness of the opportunity HSS staff pursued new promotional efforts, such as tabling at the beginning of the work day to make sure employees had heard about the upcoming information sessions
- 113 employees have enrolled so far

#### **EAP Organizational Well-being Activities**

- Peer Support Collaboration
  - EAP worked with 2 departments interested in starting a Peer Support Program
  - Introduced them to state resources and the existing SHF Peer Support Program
- Grief Support
  - Worked with 2 departments that recently experienced the loss of employees
- Critical Incident Stress Debriefing
  - Worked with the SF Critical Incident Response Team

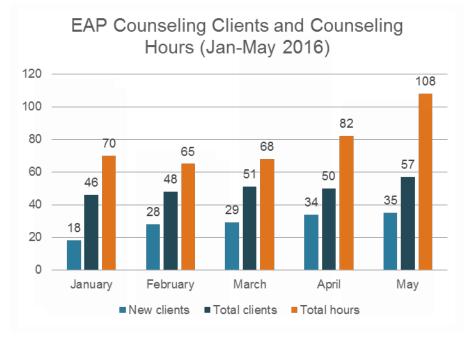
- Nonviolent Crisis Intervention
  Training Pilot
  - 5 pilot location trainings are complete
  - 3 of the refresher trainings have been completed
  - 20 Organizational Consults

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• Topics may include low morale, conflict between employees, training and orientation opportunities, etc.

#### **EAP Counseling**

- Averaged 50 clients in the first 5 months of 2016
- May had the highest number of new and total clients as well as total counseling hours



# Wellness Center: May

- No changes were made to the group exercise schedule
- Seminars:
  - Creating a Meaningful Retirement 4 part series
  - Importance of Strength Training
  - Five Buckets Principle

## Wellness Center: Coming in June

- Be Healthy, Live Healthy is a pilot program for small group wellness coaching
- New 1:10 Yoga Class
- Seminars:
  - Healthy Food on a Budget
  - Food Demonstration: 5 Ingredients or Less
  - Meal Planning
  - Plan Based Eating
  - Stress Management
  - Managing Emotions
  - What to do When I Retire (Deferred Compensation)



#### BE HEALTHY, LIVE HEALTHY

#### JUNE-JULY 2016

#### Small Group Wellness Coaching

Sign up today to join a group that will keep you motivated, feel supported, and help you to succeed in reaching your goals of being a healthier version of you!

Your small group will include a Wellness Coach who will help you tackle issues in your day-to-day life related to nutrition, weight, stress, sleep and exercise.

HEALTH SERVICE SYSTEM CITY & COUNTY OF SAN FRANCISCO GROUPS WILL MEET EVERY OTHER WEDNESDAY IN JUNE

CHOOSE THE TIME THAT WORKS BEST FOR YOU:

> 2:10-12:55PM 1:10-1:55PM 4:30-5:15PM 5:15-6:00PM

ABOUT THE PROGRAM:

- GROUPS OF 2-8
- THREE, 45-MINUTE
  SESSIONS
  SESSIONS
- FREE TO EMPLOYEES AND RETIREES
   CONS. AT LUNCH
- AFTER WORK

REGISTRATION IS REQUIRED. EMAIL WEINERGOSTION OF OR CALL 415-554-0643

#### LOCATION

HSS Wellness Center 1145 Market Street 1st Floor San Francisco, CA 94103

415-554-0643

myhss.org

## Retiree Well-being Update

#### **May Activities**

- Attended the RECCSF monthly meeting and provided promotional materials on Wellness Center services and classes
- Coordinated a Nutrition, Healthy Meal Preparation and Stretching Presentation by CCSF retiree, Al Garza for the May 11, 2016, RECCSF meeting (67 retirees attended)

#### <u>Thank you</u> (From a HSS Member)

That's my story. No, really. I had already previously planned to just say "Thank you" and tell you why before your request for a story.

When I say this program has saved me, I am not exaggerating. I was in a horrible rut. I needed and desired to eat clean and healthy. Addicted to sugar? Check. Overindulgence in alcohol? Check. Lack of exercise? Check. Joint pain? Check. Emotional eating? Check. It has been a vicious cycle. (I'm still working on it.) I had been seeking a solution to get on track for a healthy future. My doctor was not helpful. I tried but was unsuccessful in locating a personal trainer that focused on a comprehensive solution incorporating healthy, natural eating with an exercise program that complimented my personal needs. I tried to find a nutritionist who could work with me and not cost me an arm and a leg. I didn't want a fad diet or vitamin program, or anything that required me to eat processed foods.

Then, this program appeared. Free, guided, and motivational. I thought this might be my start, my answer...and it was free! Since the start of this program I have focused on eating a minimum of five vegetables and fruits a day. It was an eye opener on how little I was actually eating. Prior to this program, even though I knew what was healthy and what I should be doing, I was just unable to focus and commit. The sugar additions would constantly come in to play. I needed someone to help focus and guide me, if that makes sense. As soon as I realized I had to buy AND consume the produce to achieve the goal, it became very easy and instantaneous. As I ate the meals, based on the produce philosophy, I no longer craved sugar. I was full...and actually satisfied. I had no room for sweets. Daily tracking on your wonderful website painted a clear and beautiful picture for me. Slowly, I started to look forward and sometimes actually crave my next meal focused on produce as my main ingredient.

I don't know if I've lost weight because I haven't yet been brave enough to step on a scale, but I know I am on the right track. I feel great, emotionally. My joint pains have lessened considerably. While away on vacation, it was difficult to get the full benefit of Colorful Choices so I made some "bad choices"...a lot. I now recognize how easy it is to begin "re-addiction". They say it takes three years to break a bad habit, so it was actually helpful to see how easy it was to "relapse" before securing my new healthy habit under my belt! I am so grateful that San Francisco found the resources and commitment to offer this program. I really hope that even though it will end, you will still offer a version of it...a website perhaps to help people continue their new healthy beginning.

So again, thank you. From the bottom of my heart!