

November 14, 2019

TO: Karen Breslin, President, and Members of the Health Service Board

FROM: Abbie Yant, RN, MA Executive Director SFHSS

RE: September-October 2019 Board Report

# Marketplace Decision to Not Release of Request for Proposals for Health Plans for Plan Year 2021

There continues to be significant changes happening in the marketplace (e.g., Canopy, Sutter Health/Aetna, as well as the Sutter Health lawsuit settlement that requires more time to determine whether there is a valid partnership opportunity for SFHSS. AON has assisted in assessing the competitive market of current non-Medicare, Blue Shield, and United Healthcare health plans. Although there could be potential cost savings through more favorable administrative fees, pooling charges, and/or discounts, there are also no known concerns currently regarding member service, innovation, carrier stability, etc. We have concluded that SFHSS should delay an RFP until a point in time where the potential opportunities in the market have settled, where proof of concept has been established and validated.

# SFHSS Member Focus Groups - Your Health Plan Options: 2021 & Beyond

At the September Health Service Board meeting, SFHSS announced plans to conduct a focus group series with support from Communities in Collaboration (CIC), a facilitation agency specializing in community engagement, inclusive strategic planning, participatory research, and evaluation. SFHSS shared a comprehensive outreach plan targeting diverse members, partners/spouses, and adult dependents who could speak to current and future healthcare needs as well as priorities for our unique membership groups.

CIC and SFHSS staff coordinated nine focus group sessions in San Francisco, San Mateo and Alameda counties at locations including the San Francisco Police Department, San Francisco International Airport, San Francisco Public Libraries (Main Branch and Excelsior Branch), Office of Transgender Initiatives, Oakland Public Library, Hetch Hetchy, and the SFHSS Wellness Center. 117 SFHSS members participated in this focus group series representing 34 unique city-wide departments.

Communities in Collaboration is currently analyzing qualitative and quantitative data from SFHSS members related to healthcare service utilization and experience. SFHSS members engaged in the discussion about healthcare service topic areas, including primary and preventative care, urgent and emergency care, specialists and second opinions, digital applications, and health records, etc. CIC also led focus group participants through a discussion of the high-level model options presented at the July HSB meeting to solicit member understanding, questions, and concerns. A follow-up survey was sent out to all focus group participants to rate their member engagement experience. Members that were unable to attend the in-person sessions were afforded the opportunity to complete an online



survey tool that included adaptations of focus group discussion questions and exercises. Online survey participation from both in-person follow-up and online participation yielded 43 individual responses. Additional analysis will be presented at the December board meeting to share more about our member's experience with health benefits as they are today to better design health plan options for the future.

## Strategic Plan 2020-2022 Update

The SFHSS Strategic Plan 2020-2022 was presented in September, approved in October, and distributed to the Health Service Board in December of 2018. This 2019 preliminary year of strategic plan management has brought about a better understanding of the alignment between strategic goals, operational activities, and projects that involve the staff of all levels. To capture learnings from this preliminary year, a root cause analysis was completed with participation for all divisions to identify continuous quality improvement opportunities that will ensure the likelihood of strategic plan successes for the future.

For 2020, SFHSS is exploring opportunities for consultation support from internal and external partners around KPI development to refine the quantity, scope, and interdependencies of strategic planning initiatives. SFHSS is preparing a preliminary report that highlights achievements in each of the Strategic Goal areas in addition to Organizational Excellence, which encompasses the entire framework as a reflection of the internal standards and processes that motivate our staff to deliver the highest standard of member services. This Strategic Plan preliminary report will be shared at a future Health Service Board meeting in conjunction with the SFHSS Annual Report.

# SFHSS Your Voice Matters: 2019 Employee Engagement Survey

SFHSS employed the support of Integral Talent Systems, Inc. (ITS), a technology-enabled global talent management consulting firm, to conduct another employee engagement survey in 2019 as a follow-up to the 2016 survey. SFHSS worked in partnership with ITS to review the 2016 survey tool in depth to improve the statistical validity and predictiveness of the 2019 survey questions. The enclosed presentation outlines the survey purpose, methodology, results by category, relevant themes, recommended focus areas and proposed next steps for SFHSS. The Your Voice Matters 2019 Employee Engagement Survey yielded a 96% response rate, the highest response rate Integral Talent Systems, Inc. has had from any organization. Presentation to follow.

### **Complex Care Coordination: Kaiser Permanente**

During the Care Coordination presentations at the August HSB meeting, several questions were raised regarding the complex care coordination services at Kaiser Permanente. SFHSS staff met with subject matter experts from Kaiser in October and has further questions to explore. We are targeting a December HSB presentation.

# **Concierge Fees**

UHC has determined that OneMedical, a network provider for the MAPD PPO plan, has a concierge fee for service above and beyond the member's routine PCP visit benefits *that* 



<u>cannot be charged as a condition to see the member on a routine basis</u>. The concierge service is not a covered benefit, and as such, One Medical Group can charge the fee.

Members may be telling One Medical they are "Medicare eligible" instead of stating UHC Group MA PPO. Providers are allowed to charge a fee for straight Medicare eligible members, and members can choose to pay.

A member at the RECCSF meeting mentioned that his B&T in-network provider charged him a fee; UHC has reached out to B&T to remind them this type of concierge fee is not allowed under the Group MAPD contract.

# **Tracking List of Issues from Prior Board Meetings**

- Kaiser Transportation Benefit update
- UHC Transportation Benefit Update
- SFHSS Risk Management Policy
- Relationship with Workers Compensation
- Other Postemployment Health Care Benefits (OPEB)
- Plan Comparisons: Opioid Epidemic Impact on Chronic Pain patients

#### **Attachments:**

ESA Slide

#### SFHSS DIVISION REPORTS –September- October 2019

#### **PERSONNEL**

#### Welcome to SFHSS

- Julisa Nunez, 2819 Assistant Health Educator
- Ken Shen 1209 Benefits Technician
- Fiorella Fabiani 1209 Benefits Technician
- Shoana Kuang 1209 Benefits Technician
- Doug Wong 1209 Benefits Technician
- Wing Yin Wong 1209 Benefits Technician
- Michael Lee 1210 Benefits Analyst

#### **Open Positions:**

- 0931 Engagement Specialist recruitment underway
- 2820 Sr. Health Planner recruitment underway
- 0923 Assistant Well Being Manager- recruitment underway
- 1209 Benefits Technician recruitment underway

#### **OPERATIONS** -

Successful Open Enrollment – detailed report presentation at December HSB meeting.



- Open Enrollment Confirmation Letter preparation (78,000 qty)
- Open Enrollment and eBenefits Survey emailed to 30,000 City and County of San Francisco and Superior Court of San Francisco employees on November 6, 2019

# Enterprise Systems & Analytics (ESA) – see project dashboard Member Feedback

HSS member Grady Allison generously shared his experiences with accessing eBenefits. He had been unable to login and had called the DT Help Desk for assistance. They had identified his account had been disabled but it took several days for the issue to be resolved. Also, when Grady attempted to log in on a subsequent day, he reported that the experience looked different, and the instructions/videos on SFHSS.ORG also looked different from the preceding day.

On the night of September 20, 2019, the City went live with the new Identity Cloud Service (IDCS). IDCS is a more secure way for people to connect to City systems. This implementation changed its login procedures. SFHSS had been expecting IDCS as early as the first week of August, but technical challenges continued to move back the go-live date. It is this reason that letters to retirees inviting them to set up their accounts for self-service did not print explicit instructions but instead pointed people to SFHSS.org. Since SFHSS was uncertain regarding the date the change would occur, the website provided greater flexibility to update the account creation instructions as soon as the implementation occurred. Understandably this was confusing to some users. However, not all retirees were impacted. SFHSS conducted a phased rollout of invitations with 800 users each week. Only those users first attempting to create their account on the weekend of 9/20 would have experienced the changing environment.

The IDCS change applied to all City & County employees, all City suppliers, CCD/USD employees who access City systems, and retirees invited to eBenefits. This change was made to approximately 200,000 users. As a result, that first week after IDCS go-live, the Department of Technology help desk was experiencing an extremely high call volume. They received four times their call volume and in the two months, have received 9,756 calls. The reported HSS member issue was not with eBenefits but with access to City systems via IDCS. Retirees calling during this peak call volume in late September may have experienced similar issues. HSS appreciates the feedback from Grady so that we can continue to improve the member experience as we chart this new territory.

#### Outstanding Items from the September 2019 Health Service Board meeting:

During the presentation of eBenefits, Commissioner Follansbee wanted to know for the self-service experience, if someone clicked on the emergency contact details, would it take them to the details. The screenshot from the presentation only showed the name of the emergency contact. The answer is yes. This emergency contact information is available to managers and Human Resources for active City and County and Court employees. For non-city employees, the information is not retained. Instead, those employees provide that information directly to their HR department. Retirees information is currently not accessed by anyone.



The Department of HR believes that this information shouldn't be entered. However, SFHSS is exploring the viability of utilizing this data. Of the 16,088 retirees with an emergency contact listed, 99%+ of these were entered when the retiree was an active employee, and therefore this information may no longer be accurate. Since a small percentage of retirees have self-service access, they cannot update any erroneous information

During the presentation of the Express Dashboard, Commissioner Scott had inquired as to why the percentages of employees and members by gender were expressed as % male versus % female. This is a historical measure from the Truven systems and is arbitrary. At the time of the development of the dashboard, it was not felt that two measures would be required.

Commissioner Follansbee asked for further details on the Quality Markers:

- Readmissions are episodes when a patient is discharged and admitted again within
   15 days of a prior admission of the same patient
- Complication of Care identifies the principal or secondary diagnosis codes from facility
  or professional claims that denote a complication of a medical or surgical care arising
  from a healthcare intervention. This is based on a list of around 1000 Dx Codes
  sourced from Health Care Cost and Utilization Project (HCUP), which has partnered
  with the Agency for Healthcare Research and Quality (AHRQ). A list of the Dx codes
  with their description is available upon request.
- Avoidable Admits identify conditions on admission claims that generally would not have resulted in inpatient admission if appropriate prior treatment had occurred. Source is AHRQ Prevention Quality Indicators
   eg., for Asthma – the numerator would include discharges for patients 40 years and older with a principal ICD 10 Dx for Asthma.

It would exclude admissions where there is a diagnosis code for cystic fibrosis or respiratory anomaly or acute bronchitis. It will also exclude obstetric admissions and transfers from other Institutions. The exclusion list is missing gender, missing age, principal diagnosis or county. The denominator would include population 40 years and older in the metropolitan area or county. Discharges in the numerator are assigned to the denominator based on the metropolitan statistical area or county of the patient residence and not of the hospital where the discharge occurred

#### **Note of Commendation:**

On October 23, 2019, the main fax for SFHSS stopped working. During these last days of Open Enrollment, thousands of applications can be faxed into SFHSS. We identified the issue was with the phone line and not our fax server or software. We reached out to our Department of Technology partners, and they completely understood our sense of urgency from getting AT&T to our premises, to providing additional onsite troubleshooting of both our fibre networks and our telecom lines outside of business hours in an attempt to remediate the



issue as quickly as possible. Ultimately Royce Shia diagnosed a loose wire in the basement of our building.

The following individuals were deeply invested in getting us back up and running, and SFHSS is deeply grateful to them for their expertise and assistance:

Imelda Bautista Marcus Gaines Royce Shia Rene Simon Giller Tolentino

#### **WELL-BEING**

#### **EAP**

- 23% increase in trauma responses compared to 2018 year-end (this includes group and individual)
- 177% increase in individuals served compared to 2018 year-end Well-Being@Work
- 132 onsite activities YTD
- 5 Health Screenings offered in October
- Flu information will be presented in the December meeting

#### FINANCE DEPARTMENT

#### Contracts

Executed 2020 Contracts with

- UHC (Dental)
- Delta Dental PPO
- Website development
- UHC Medicare
- WORKTERRA
- VSP
- Pantheon (Drupal website hosting services) under City's Enterprise Agreement
  - · Fully executed agreement with The Hartford
- · Released request for proposals (RFP) for Change, Intervention, and Diabetes Prevention Program
- · Completed selection of highest ranked respondent for Employee Assistance Program (EAP) case management software, a contract under negotiation
- · Finalized review and confirmation of 2020 plan materials for Open Enrollment
- · Finalized termination notice to Best Doctors (Teladoc) and destruction of HSS and Member data



# **Budget and Procurement**

- Preparing for PeopleSoft Update Project Go Live on November 12, 2019, by attending various webinar training in SF Employee Portal Learning Attended
- SF Financials and SF Procurement User Forum
- Quarterly Technology Procurement Meeting
- GASB 87 Implementation Workshop
- Sales Tax and Use Training

# **Accounting**

- Calculated and verified rates for open enrollment documents and detailed PeopleSoft rates for Community College District and Superior Court
- Prepared financial statements, Management Discussion, and Analysis (MD&A), and footnotes to the financial statements for the fiscal year ended June 30, 2019
- · Working with Kaiser Permanente on payment and reconciliation optimization

# Management Report

Health Service Board Meeting | November 14, 2019

Project	Status	Key Accomplishments
Cybersecurity / Disaster Preparedness		<ul> <li>Attended Citywide Cybersecurity forum 10/16</li> <li>Attended monthly disaster preparedness meeting 11/6</li> <li>Implemented new asset management / end point solution tools</li> <li>Ran resource request drill 9/24</li> <li>Assessing resiliency for Public Safety Power Shutoffs (PSPS)</li> </ul>
eBenefits		<ul> <li>Onboarding to self-services for 4500 retirees is continuing on schedule</li> <li>Onboarding of SFUSD pilot will proceed</li> </ul>
VOIP telephony upgrade	$\triangle$	<ul> <li>All wiring is complete and equipment secured</li> <li>Internal Kick-off meeting manage rollout held on 11/5</li> <li>Pending confirmation from DT confirming go-live date in Nov/Dec</li> </ul>
Payment Gateway: Member facing payments		<ul> <li>PeopleSoft outbound file modifications migrated to production 11/7</li> <li>Vendor UAT scheduled for 11/18-11/22</li> </ul>
Enterprise Content Management System (ECM) Business Insights / scanner licenses		<ul> <li>Emergency upgrade completed week of 9/23 to address unforeseen issue from the City no longer using Internet Explorer</li> <li>Business Insights license procured. Implementation scheduled for Q1</li> </ul>
Open Enrollment		<ul> <li>Moved into post election period wrap-up</li> <li>Modifications to program for confirmation letters coded, tested and migrated to production 11/7</li> <li>Data extraction for confirmation letters scheduled for 11/12</li> </ul>

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



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



Serious issues. Project most likely delayed or significant budget overrun