

December 12, 2019

TO: Karen Breslin, President, and Members of the Health Service Board  
FROM: Abbie Yant, RN, MA Executive Director SFHSS  
RE: November 2019 Board Report

---

### **Open Enrollment Report**

As promised the report on Open Enrollment is included on the agenda today!

### **Marketplace Assessment**

As previously reported, the second part of the Marketplace Assessment is now complete. Heather Imboden, Principal of Communities in Collaboration | Comunidades en Colaboración will present the findings from these most informative focus groups. The goals of the focus groups were to:

- Understand members' experiences with current healthcare delivery and insurance plans
- Gather and understand members' questions and concerns regarding possible future healthcare models
- Learn how members currently engage with SFHSS and how they would like to be served by SFHSS in the future

### **Strategic Plan 2020-2022 Update**

We are coming to the close of the 1st year of the SFHSS Strategic Plan. Enclosed in your packet is an analysis of the progress on the business initiatives. As the Leadership team has embraced this direction, significant learning has occurred, which will inform revision to the Strategic Plan, which will come before the Board in January. (see attachments at the end of the director's report)

### **Blue Shield of California: Brown and Toland Medical Group (BTMG)**

SFHSS continues to field questions about the changes at Brown and Toland, where 48 primary care providers will leave December 31, 2019, to form a new Sutter Medical Group. The change in providers impacts 49 members in Trio and 1450 in Access+. The 1450 members in Access+ may not notice a difference since they will be automatically switched to the Sutter IPA. The 49 members in the Trio will not be able to see these physicians and will need to choose a new primary care provider.

According to BTMG SF based Sutter, primary care physicians are no longer in the BTP network, and the specialists are still available through an existing agreement in place between BTP and Sutter. Additionally, BTP and Sutter are working on a stronger network contract that will serve a longer-term. Therefore, referrals will not be disrupted.

### **Sutter Antitrust Case**

We have recently learned that the Sutter class-action lawsuit settlement terms are scheduled to be released on December 13th. We do not know if the settlement will have an impact on SFHSS. We will report back as we learn more about the settlement.

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

- Status of Brown and Toland primary care providers
- Kaiser Transportation Benefit update
- Tobacco Cessation Programs and Long term Vaping health effects
- Increase Dental Benefit Utilization (Plan support)
- 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:**

Strategic Plan 2020-2022 Update  
Key Performance Indicator Report  
Strategic Plan Business Initiative Report  
ESA Slide  
Well Beings Slides

## **SFHSS DIVISION REPORTS –November 2019**

### **PERSONNEL**

**Welcome to SFHSS: *No new staff were onboarded this month\****

#### **Open Positions:**

- 0931 Engagement Specialist – recruitment underway, interviews in December
- 2820 Sr. Health Planner – recruitment underway
- 0923 – Assistant Well Being Manager- recruitment underway
- 1209 – 3 Benefits Technician – recruitment underway

### **OPERATIONS –**

- Confirmation letters for 2020 enrollment were configured and created in November. Letters were mailed December 2nd and 3rd.
- Call volume for November moderate, and the metrics were met. Calls were majority about non-open enrollment questions or comments.
- Post Open Enrollment survey yielded over 900 responses. Results will be included in the Open Enrollment presentation.
- Member Services worked with Blue Shield on members receiving letters about their providers moving out of Brown & Toland.

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

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

- 4482 flu shots administered at 27 worksite locations (3% increase from last year)
- Annual Champion Appreciation event took place on 11/22 with 56 Champions participating
- Take Time to RECHARGE kick-off event in the Wellness center with 89 unique participants engaged
- 33% of total people served in EAP Organizational services represent Critical Incident Response

## **FINANCE DEPARTMENT**

### Contracts

- Completed assessment of responses to Request for Proposals for 2020 Change, Intervention and Diabetes Prevention Program.
  - Finalized the "Memorandum of Understanding" with the Office of Financial Empowerment. This satisfied a requirement for the 2020 financial well-being pilot.
  - Finalized scope of Request for Proposals for 2020 Well-being challenges, campaigns, and Employee Assistance Program resource guide.

### Procurement and Budget







- Working with Controller's Office on processing the 1099 notices within PeopleSoft
- Successfully implementation of PeopleSoft Update to SF Financials & SF Procurement

### Accounting

- Implemented streamlined Kaiser monthly payment and reconciliation process

# Management Monthly Report

Health Service Board Meeting | December 12, 2019

Project	Status	Key Accomplishments
Cybersecurity / Disaster Preparedness		<ul style="list-style-type: none"> <li>Attended Citywide Cybersecurity forum 12/4</li> <li>Attended monthly disaster preparedness meeting 12/4</li> <li>Added Communication options to reach employees during event</li> </ul>
eBenefits		<ul style="list-style-type: none"> <li>Meeting scheduled with Identity Access Team at Department of Technology and User support teams from DT and from Controller's Office to establish ongoing rollout plan to retirees, other employers</li> <li>Post OE cleanup conducted</li> </ul>
VOIP telephony upgrade		<ul style="list-style-type: none"> <li>Call-Flows for automatic call distribution provided to DT 11/14</li> <li>Met with DT on 11/27 to review training plan for HSS</li> <li>VOIP cutover anticipated for late January</li> </ul>
Payment Gateway: Member facing payments		<ul style="list-style-type: none"> <li>User acceptance testing (UAT) begins 12/11</li> <li>Reviewed with Dept of HR guidelines for email usage as it relates to Citybase accounts</li> </ul>
Enterprise Content Management System (ECM) Business Insights / scanner licenses		<ul style="list-style-type: none"> <li>Business Insights license procured. Implementation scheduled for Q1</li> </ul>
Open Enrollment		<ul style="list-style-type: none"> <li>Confirmation letter data files generated, tested and passed to print vendor on 11/15</li> <li>Review of confirmation letter proofs and data corrections completed 11/21</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

## Well-Being@Work: Flu Clinics

### 2019 Highlights:

- We expanded our worksite flu shot clinics to two additional new locations:
  - ✓ FAM - de Young Museum
  - ✓ PUC - Sunol Valley Water Treatment Plant
- 11 locations provided High-Dose flu vaccines (for those age 65+)
- 17 combined Open Enrollment and Flu Shot Clinic events
- 9 Health/Benefits Fairs
- Airport hosted their first “after hours” Health Fair from 10:00pm-12:00am
- 980 Benefits Fair Passports were collected
  - ✓ 314 from One South Van Ness
  - ✓ 288 from City Hall
  - ✓ 378 from SFHSS



## Well-Being@Work: Flu Clinics

### Total Flu Shots Administered: October 1 - November 5

- Total # of worksite flu shot clinics = **27**
- Total # of flu shots administered = **4482**
- Total # of high dose flu shots = **204**

### Year by Year Comparisons:

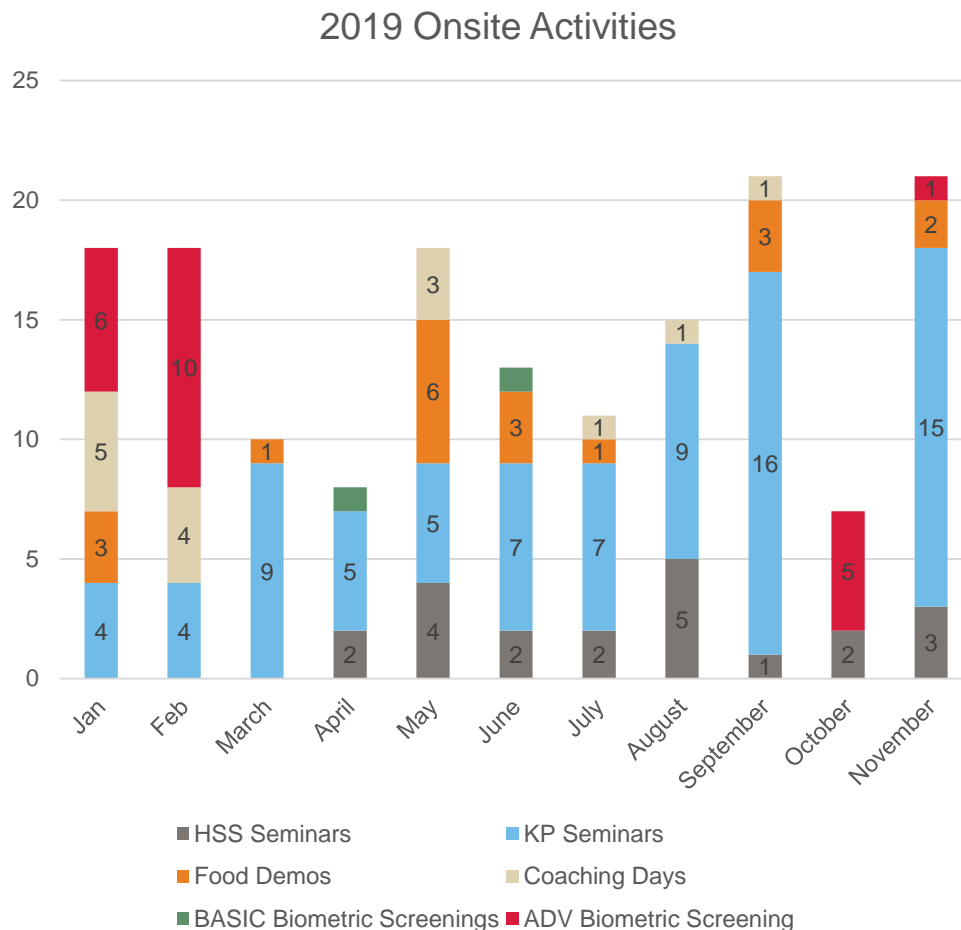
Clinic Participation	2016	2017	2018	2019	Changes from 2018 to 2019
Vaccinations (number)	4158	4131	4349	4482	3.1% increase
Clinics (number)	26	26	25	27	2 additional clinics
Participation (average/clinic)	160	159	174	166	4.6% decrease

## Well-Being@Work: Activities at Worksite Locations

153 onsite activities (YTD)

### November Highlights

- Nutrition was a popular topic this month with 6 seminars being offered at different worksites including:
  - ✓ Food Demonstrations
  - ✓ Kitchen Medicine
  - ✓ Disease Preventing Foods
  - ✓ Cooking Nutritious Meals for Children



## Well-Being@Work: Activities at Worksite Locations

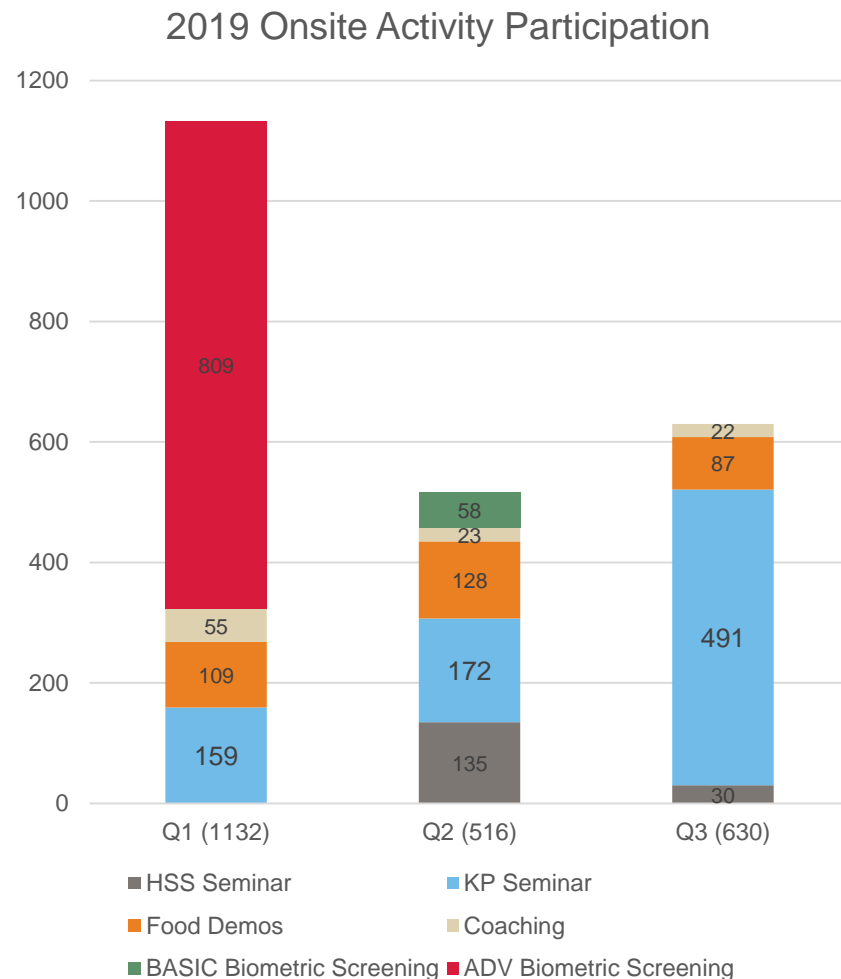
**1864** Total Members Served (YTD)

### Q3 Participation 2019

- 216 members served through onsite activities

### Q3 Highlights

- 5 Advanced Health Screenings
  - ✓ SFO Health Fair (day/night)
  - ✓ Main Library Flu Clinic
  - ✓ Rec & Park Health Fair
  - ✓ Public Works 2323 Cesar Chavez Health Fair



## Well-Being@Work: Champion Appreciation Event

**Friday, November 22, 2019**

- 1:00 – 3:00 pm
- County Fair Building
- 75 Registered Champions / 56 Participated

### **Theme:**

- Gratitude

### **Activities Included:**

- Meditation and walk through the Botanical Gardens
- Rock painting
- Team Building – gratitude tree
- Thank you cards – design and/or complete
- Lotus art reflection
- Make your own terrarium
- RECHARGE Space for reflection, meditation and stress reduction
- Lawn games



# Well-Being

## Catherine Dodd Wellness Center

### Take time to RECHARGE Kick off Event

- Tuesday, November 19, 2019
- 12:00 pm – 2:00 pm
- 89 unique participants

### Relax, Refresh, and RECHARGE!

Participants learned daily activities to help reduce stress, increase focus, and reenergize.

### Activities Included:

- Coloring, journaling, writing thank you cards
- Create DIY crafts to keep at your desk, take home, or gift it to someone!
- Meditate, stretch, and relax in our RECHARGE room
- Register for the RECHARGE 6-week challenge & pick up your tracker



TAKE A MINUTE TO

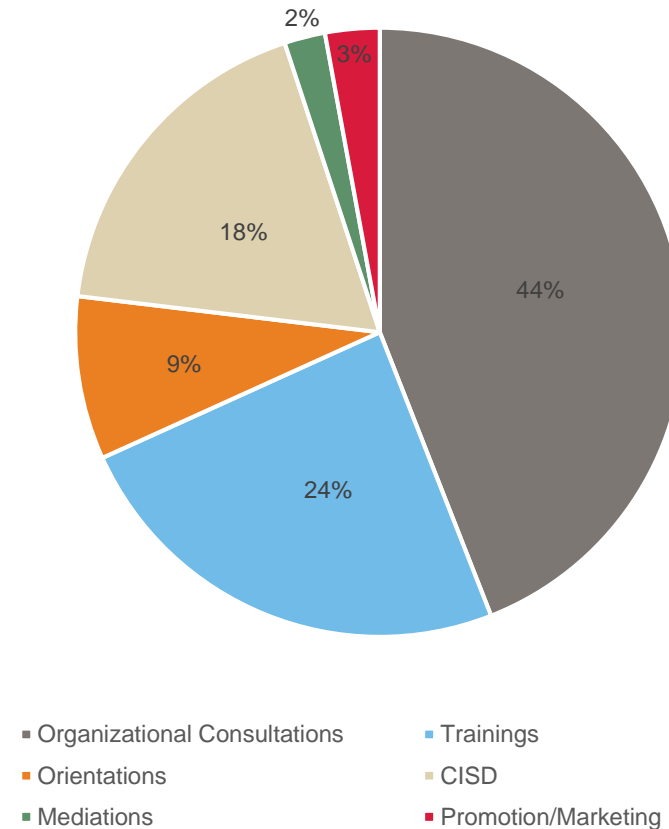


RECHARGE

## EAP: Organizational Services (OD) – YTD through October

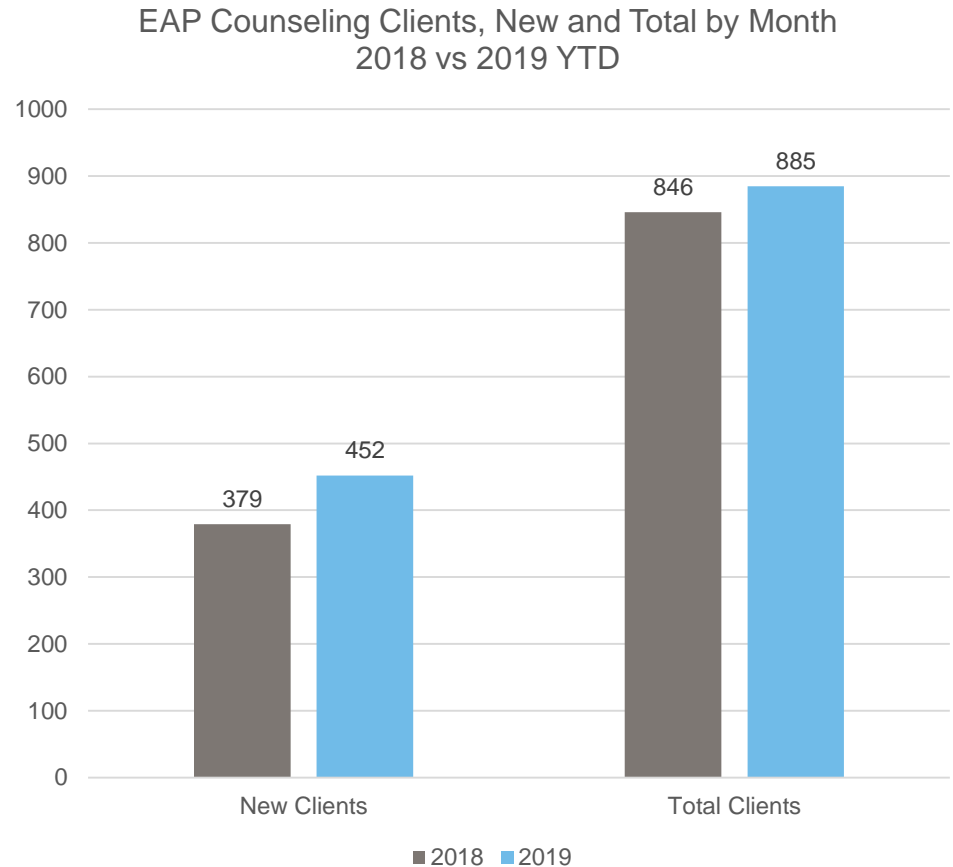
- 44% of OD services are consultations representing 6% of total people served
- 24% of OD services make up trainings, representing 28% of total people served
- **18% of OD services are Critical Incident Response, representing 33% of total people served**
- 3,033 people served through OD services

% of Organizational Services by Type



## EAP: Client Services – YTD through October

- 16% increase in new clients when compared to 2018
- 4% increase in total clients when compared to 2018



## **MEMORANDUM**

December 12, 2019

TO: Karen Breslin, President, and Members of the Health Service Board  
FROM: Abbie Yant, RN, MA  
Executive Director SFHSS  
RE: Strategic Plan 2020-2022 Update

---

The SFHSS Strategic Plan 2020-2022 was approved in October 2018. In December of 2018, SFHSS shared preliminary Key Performance Indicators (KPIs) for all divisions. Key Performance Indicators (KPIs) are measurable values that demonstrate an organization's progress toward achieving strategic goals and objectives.

Enclosed in this packet are:

1. Strategic Plan Business Initiative Report: Listing of 2020 business initiatives associated with each of the 5 strategic goals along with commentary on progress.
2. Key Performance Indicator Report: Summary of Key Performance Indicators and detailed explanation of progress for each indicator.

Next Steps:

Individual division leaders were interviewed to identify improvement opportunities that will ensure the likelihood of strategic plan successes for the future.

SFHSS is also consulting with staff from the Controller Office Performance Division to evaluate progress, identify barriers, enhance the KPIs, take note of the interdependencies and refine the quantity, scope, and of strategic planning initiatives. SFHSS will provide revisions to the Strategic Plan in the first quarter of 2020.

Attachments:

Key Performance Indicator Report  
Strategic Plan Business Initiative Report

## Strategic Plan Business Initiative Report

2020 Business Initiatives	Status	Commentary
<b>Affordable and Sustainable</b>		
Evaluate alternative risk pooling and self-insurance models for health, pharmacy, stop loss and ACO / PCMH programs [ACTION]	<i>Deferred</i>	To be embedded in future procurement process
Request self-insurance quotes from health plans in conjunction with ACO / PCMH design [ACTION]	<i>Deferred</i>	To be embedded in future procurement process
Conduct RFI for second opinion, care coordination, musculoskeletal conditions and care management [ACTION]	<i>Complete</i>	RFI produced preliminary findings around musculoskeletal conditions and care management services; second opinion services were discontinued; overall RFI findings to be embedded in future procurement process
Design an optimal ACO / PCMH model which may include medical, pharmacy, and behavioral programs [ACTION]	<i>Work in progress</i>	Partnered with Pacific Business Group on Health (PBGH) and California Quality Collaborative (CQC) to support primary care initiative.
Assess health plan and/or specialty vendor resources to identify high value providers [PILOT]	<i>Deferred</i>	To be embedded in future procurement process
Review quality and cost decision tools available from the health plan or a specialty vendor [PILOT]	<i>Deferred</i>	Supported utilization of the Integrated Healthcare Association Align Measure Perform (AMP) common measure set with carriers. To be embedded in future procurement process
Consider plan designs that incent desired actions (e.g., reduced copays or deductibles) [PILOT]	<i>Work in progress</i>	Presented the Health Service Board with potential plan/program changes for 2020 renewal which were declined; SFHSS staff will continue to bring ideas to the HSB for consideration
Seek ongoing solution to City Plan services through the renewal process and subsequent RFP for the medical plans [DISCOVERY]	<i>Work in progress</i>	Explored health system models, national/local industry activities, major players, contracting strategies and opportunities as part of the marketplace assessment; received feedback through member engagement focus groups (117 members/34 unique city-wide departments); findings to be embedded in 2020 and 2021 renewal discussions and future procurement process
Review alternative payment models [DISCOVERY] <i>Brought forward from 2022 business initiative list</i>	<i>Work in progress</i>	SFHSS staff participated in the Catalyst for Payment Reform (CPR) Bundled Payment Collaborative for Episodes of Care to reduce overall cost of care and preventable complications; enhancements to existing Accountable Care Organization (ACO) alternative payment model will be explored; alternative payment models will also be embedded in future procurement process
<b>Reduce Complexity and Fragmentation</b>		
Review care management programs for evidence based and best practice approaches [ACTION]	<i>Work in progress</i>	Ongoing discussion with carriers including presentation by carriers to Health Service Board in August 2019 and December 2019
Design value-based plans (e.g., waive copay, deductible) to encourage desired actions [ACTION]	<i>Work in progress</i>	SFHSS staff are working with carriers to determine opportunities to modify plan design that encourages desired actions as part of the 2021 renewal
Coordinate the myriad of program offerings, resources, and tools currently available and implement an operating governance structure with service providers [ACTION]	<i>Work in progress</i>	SFHSS staff developed carrier specific web pages on sfhss.org
Review and consider customer service functions, tools, and navigation to guide members to appropriate care settings [ACTION]	<i>Deferred</i>	To be embedded in future procurement process
Review and analyze data to identify opportunities to consider SDOH in overall health and devise a plan to incorporate into programs and services [DISCOVERY]	<i>Work in progress</i>	SFHSS supported the collection of member engagement data to include variables such as ethnicity, language, age, education level, and non-binary gender identification that can help quantify demographics related to SDOH for our membership; participated in the Government Alliance for Race and Equity to support city-wide racial equity action planning; Enterprise Systems and Analytics to support All Payers Claims Database SDOH integrations.

Identify collaboration partners for SDOH (e.g., community, health plan, stakeholders, etc.) [DISCOVERY]	<i>Work in progress</i>	Held advisory meetings with UCSF, Hill Physicians, Dignity Health, Brown and Toland Medical Group, and Blue Shield of California to discuss social, environmental, and behavioral health indicators that impact high risk/high cost conditions for our membership; working with the City & County of San Francisco's Department of Human Resources to assess opportunities to include worker's compensation claims in the All Payers Claims Database.
<b>Engage and Support</b>		
Consider additive, replacement, or modification of current customer service resources to offer health navigation services [ACTION]	<i>Deferred</i>	To be embedded in future procurement process
Identify top categories of high value services that benefit from navigation (e.g., point of service care, serious care needs) [ACTION]	<i>Deferred</i>	To be embedded in future procurement process
Enhance, expand, and integrate wellbeing programs with health care programs / services that provides a seamless "handoff" between service providers [ACTION]	<i>Work in progress</i>	Employee Assistance Program staff met with carriers to identify opportunities for seamless handoffs related to accessing behavioral health benefits
Design plans to encourage desired behaviors through incentives, communication, education, advocacy, technology, and SDOH [DISCOVERY]	<i>Work in progress</i>	SFHSS staff are working with carriers to determine opportunities to modify plan design and encourage desired actions as part of the 2021 renewal; the Engagement Specialist role will also support activities in this area
Implement a comprehensive and ongoing communication and engagement campaign to create awareness and usage of available plans and services [ACTION]	<i>Deferred</i>	Pending Engagement Specialist hire
Devise a plan to continually monitor and enhance understanding and usage of programs [ACTION]	<i>Work in progress</i>	Ongoing reporting from the Wellbeing Manager as well as from carriers on utilization of programs
<b>Choice and Flexibility</b>		
Survey population to gain insights on needs and preferences of health choices [ACTION]	<i>Complete</i>	Performed membership engagement process
Understand population's preferences with engagement and communication (e.g., print, electronic, mobile, etc.) methods [ACTION]	<i>Work in progress</i>	Pending Engagement Specialist hire
Understand how current resources are used and valued [ACTION]	<i>Complete</i>	Performed membership engagement process; held mid-year Open Enrollment for voluntary benefits
Develop and implement a comprehensive engagement and communication plan in collaboration with health plans/vendors, SFHSS, DHR, employers, and other stakeholders [ACTION]	<i>Work in progress</i>	Pending Engagement Specialist hire; will utilize member engagement feedback
<b>Whole Person Health and Well-being</b>		
Conduct root cause analysis of stressors [ACTION]	<i>Discontinued</i>	Embed in other business plan initiatives: member engagement and social determinants of health
Expand and enhance well-being programs to incorporate dimensions beyond physical health including emotional (e.g., stress, sleep, resiliency, mindfulness) and mental/behavioral health [ACTION]	<i>Work in progress</i>	Wellbeing supported work around mindfulness initiatives; rolling out new wellbeing module that includes financial wellness
Integrate well-being, health and benefits programs, and service providers to optimize impact and support members across the full health continuum [ACTION]	<i>Deferred</i>	To be embedded in future procurement process
Provide education, programs and tools to support and promote retiree well-being [ACTION]	<i>Deferred</i>	Holistic retiree health and well-being strategy to be developed in 2020
Incorporate retiree survey data in designing and implementing well-being programs for the retired population [ACTION]	<i>Deferred</i>	Holistic retiree health and well-being strategy to be developed in 2020
Expand current and future well-being programs that are relevant to the retirees [ACTION]	<i>Deferred</i>	Holistic retiree health and well-being strategy to be developed in 2020
Explore partnership with retiree groups and other City departments (e.g., RPD, DAAS) [ACTION]	<i>Deferred</i>	Holistic retiree health and well-being strategy to be developed in 2020
Develop and execute on a comprehensive engagement and communication plan leveraging resources across SFHSS, service providers, and key stakeholders [ACTION]	<i>Work in progress</i>	Pending Engagement Specialist hire

# SFHSS Key Performance Indicator Report

## High-Level Overview

---

### Description

In May of 2019, SFHSS debuted Key Performance Indicators (KPIs) for all departments to the Health Service Board. Key Performance Indicators are measurable values that show an organization's progress toward achieving strategic business initiatives. KPIs are a single measure that represents a roll up of diverse activities and projects that support strategic business initiatives and overarching Strategic Plan Goals.

### Key Performance Indicators by Department

---

#### Operations

- Increase access to Self-Service eBenefits to approximately 40K members by October 2019.
  - Achieve 50% decrease in Delinquency Termination Notifications by June 2020.
  - Achieve 5% decrease in Member call counseling volume related to delinquency questions and payments by March 2020.
- 

#### Enterprise Systems & Analytics

- Identify disease prevalence, cost, and quality of care for SFHSS membership conditions by June 2019.
- 

#### Finance

- Complete Invoice Payments to Vendors <10 days (average) for NET30 by June 2019.
  - Complete Invoice Payments to Vendors <4 days (average) for NET10 by June 2019.
- 

#### Communications

- Achieve monthly mailing score of 9 for Emma E-Newsletters as a representation of marketing success by March 2020.
  - Achieve click to open rate of 15% for Emma E-Newsletters by March 2020.
- 

#### Well-Being

- Engage 168 participants in 12 Crisis Prevention Institute Trainings (CPI) by July 2020.
  - Engage 12 active participants at each of the 10 Diabetes Prevention Program cohort sites by December 2019.
-

# SFHSS Key Performance Indicator Tracking

**Important Note:** An in-depth look at Key Performance Indicator Commentary is provided on pages 3-4.

KPIs by Department	2019						
Operations	May	June	July	Aug	Sept	Oct	Status
Increase access to Self-Service eBenefits to approximately 40K members by October 2019.	13K members	13K members	13K members	13K members	13K members	42,628 members	Complete
Achieve 50% decrease in Delinquency Termination Notifications by June 2020. Goal is 91.	181 notices	228 notices	113 notices	139 notices	131 notices	120 notices	On Track
Achieve 5% decrease in Member call counseling volume related to delinquency questions and payments by March 2020. Goal is 457.	725 calls	647 calls	701 calls	750 calls	695 calls	596 calls	On Track
Enterprise Systems and Analytics	May	June	July	Aug	Sept	Oct	Status
Identify disease prevalence, cost, and quality of care for SFHSS membership conditions by June 2019.	30% progress	40% progress	60% progress	80% progress	80% progress	80% progress	On Track
Finance	May	June	July	Aug	Sept	Oct	Status
Complete Invoice Payments to Vendors <10 days (average) for NET30 by June 2019.	7 days	17 days	18 days	15 days	16 days	14 days	Work in Progress
Complete Invoice Payments to Vendors <4 days (average) for NET10 by June 2019.	3 days	10 days	18 days	15 days	16 days	14 days	Work in Progress
Communications	May	June	July	Aug	Sept	Oct	Status
Achieve monthly mailing score of 9 for Emma E-Newsletters as a representation of marketing success by March 2020.	8.8 Mailing score	N/A	N/A	N/A	N/A	N/A	Discontinued
Achieve click to open (CTO) rate of 15% for Emma E-Newsletters by March 2020.	8% CTO rate	5% CTO rate	5% CTO rate	N/A	9% CTO rate	6% CTO rate	Work in Progress
Well-Being	May	June	July	Aug	Sept	Oct	Status
Engage 168 participants in 12 Crisis Prevention Institute Trainings (CPI) by July 2020.	N/A	N/A	N/A	N/A	30 people	N/A	Work in Progress
Engage 12 active participants at each of the 10 Diabetes Prevention Program cohort sites by December 2019.	48 people	N/A	N/A	10 people	25 people	N/A	Work in Progress

# SFHSS Key Performance Indicator Commentary

## *An In-Depth Look*

---

### Operations

There are 48 reasons coded in PeopleSoft for why members call SFHSS (e.g. Open Enrollment, family status change, eligibility, etc.). Between February 2016 and February 2019, 11.5% of calls (11,864 calls) received by SFHSS were for delinquency payment issues. SFHSS has entered into collaborative partnerships with the City Performance LEAN Program and the Department of Human Resources to support action planning that reduces delinquencies and benefit termination. SFHSS also held Voice of the Member focus groups so that employees impacted by benefit termination could share their experiences and work in partnership with staff on process improvement solutions. Data analysis was completed to track trends between calls and delinquency notification volume and to identify departments whose members experience the highest proportion of delinquencies city-wide. SFHSS is committed to internal, inter-divisional, and city-wide efforts to reduce benefit termination for our membership and will continue to track progress that results using the identified KPI measures for calls and delinquency notifications. These KPIs align with the Strategic Plan Goals of Reducing Complexity and Fragmentation and Engage and Support.

Another paramount achievement for SFHSS was successfully increasing Self-Service eBenefits from approximately 13K to 42K members, fulfilling this Key Performance Indicator at 100% completion. Nearly 1K SFHSS members rated their Open Enrollment experience using a premier 2019 survey aimed at gauging customer effort and satisfaction. This Open Enrollment survey was debuted after completion of the full roll out of Self-Service eBenefits and analysis of results is currently underway. This KPI complements the Strategic Plan Goals of Engage and Support and Choice and Flexibility.

### Enterprise Systems and Analytics

The top conditions identified in the Strategic Plan for analysis were Bariatrics, Diabetes, Musculoskeletal, Behavioral Health, and Maternity Care. ESA has extracted 80% of the data that provides insights on disease prevalence, costs and in some cases quality for 4/5 conditions. ESA also completed analysis on 4 other conditions not initially included in the scope: infertility, cancer, specialty drugs, and conditions that would qualify members for the Smileway benefit. SFHSS also obtained access to race data as part of the road map towards analyzing the social determinants of health for our membership population in accordance with our principle of inclusivity. This Key Performance Indicator analysis is aimed at continuously informing future plan design and supporting the Strategic Plan Goal of Reducing Complexity and Fragmentation for our membership in relation to complex care management.

### Finance

Finance's Key Performance Indicators focus on the time that it takes between receipt of an invoice and payment by the City in connection with the Strategic Plan Goal of Affordable and Sustainable. The data is collected from the City's Financial system and the timeline for payment is established through contracts with the vendors. In the case of these two KPI measures, the requirement to pay the invoices is either within 10 or 30 days from receipt. SFHSS has made arrangements with the Controller's Office, Office of the Treasure Tax Collector, and the Office of Contract Administrator to pay the health plans the same day as receipt of the invoice. Finance strives to meet these Key Performance Indicators throughout the year and does encounter outliers in June and September due to the number of transactions associated with year end activities.

# SFHSS Key Performance Indicator Commentary

## *An In-Depth Look*

---

### Communications

The EMMA Marketing Database was used to send monthly campaigns to over 15K subscribers from January through May of 2019. The first Communication's KPI focuses on the monthly mailing score for Emma E-Newsletters, a representation of marketing success that factors in open rate, click-through rate, shares %, opt-out %, and sign up%. Split testing is used to produce the SFHSS monthly mailing score on a 10-point scale and this score is compared with a benchmarking database of national customers that also utilize this E-Newsletter platform. In June SFHSS switched to a new email marketing platform called Mailchimp that does not produce the proprietary mailing score previously reported out from the EMMA Marketing Database. As such this specific KPI was discontinued and research is underway to find a comparable alternative that aligns with communication planning for 2020.

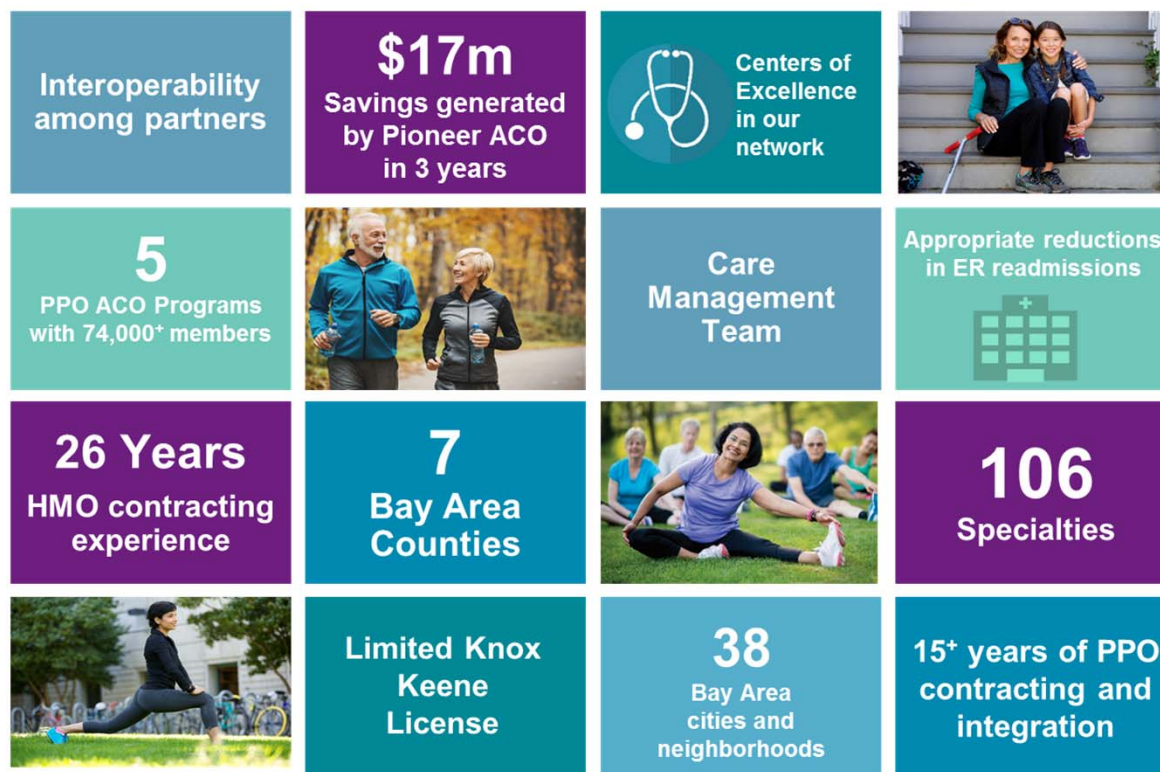
The second Communication's KPI focuses on HSS' click to open (CTO) rate. The click to open measure indicates how effective the email message performed and if it created a level of interest by the recipient to click-through to learn more about the content within the email. Even with the switch from the EMMA Marketing Database to Mailchimp, this KPI measure continued to be tracked, as it is produced in reports from both email platform systems. HSS' click to open rate is being compared to the 2018 *Get Response* global marketing benchmark report that analyzes 4 billion unique emails sent by *Get Response* customers in 126 countries across 19 industries. The 2018 *Get Response* global marketing benchmark for Health Care related industries is 15% for click to open rate. Communications is dedicated to achieving the industry standard of 15% for this Key Performance Indicator in connection with the Strategic Plan Goal of Engage and Support.

### Well-Being

The Key Performance Indicators for Well-Being relate to member participation in both Crisis Prevention Institute (CPI) trainings and Diabetes Prevention Program (DPP) cohort sites. In partnership with Kaiser and the YMCA, SFHSS Well-Being aimed to launch 10 Diabetes Prevention Program work site location in 2019. In order for a DPP to take place there must be a minimum of 8 qualified participants for the program. Of the 9 desired locations, 7 were executed with required minimums being met. Well-Being worked in partnership with Champions to identify each location, secure space, and assist with planning of the 7 fully executed cohorts. Data tracking for this KPI is completed by the external program provider and reporting is completely exclusively in months where qualified participants attend their initial DPP sessions versus reporting on a monthly basis.

To inform the Key Performance Indicator around Crisis Prevention Institute (CPI) trainings, Well-Being took a historical look at participation from 2015-2018. There were 14 participants on average per CPI class between 2015-2018 and this average informed the 2020 goal of 14 participants across 12 trainings for a total of 168. CPI is a training that is offered one day for 8 hours. Therefore, the participation numbers represent the number of individuals trained for that month. If no training took place in a particular month, no statistics were presented in KPI progress tracking. In 2019 Well-Being saw a rise in critical incident responses and has committed to sending a second Employee Assistance Program counselor to CPI training in February of 2020 so that the team can be even more equipped to support progress toward this KPI in relation to the Strategic Plan Goal of Whole Person Health and Well-being.

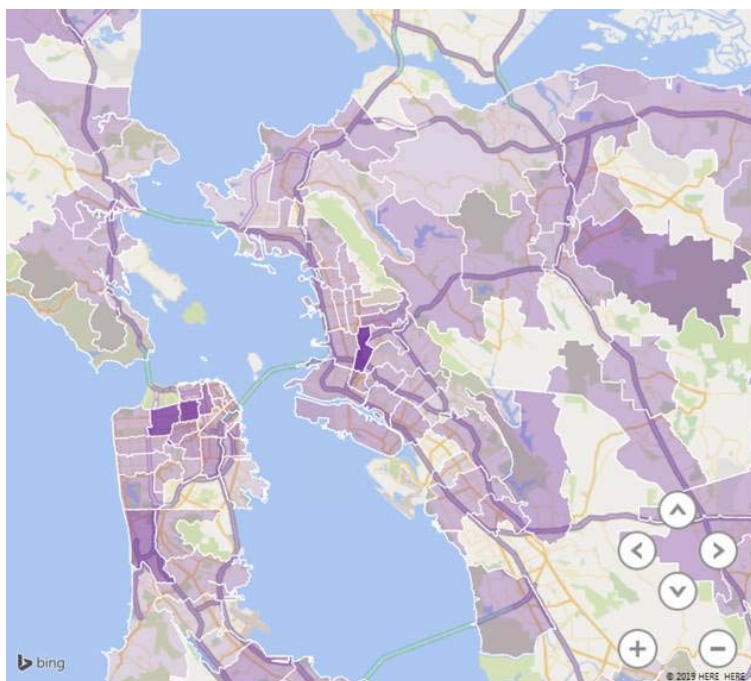
# 26 Years of Experience & Success



# Brown & Toland Network

*Brown & Toland brings a broad network of experienced clinicians and partners with a full spectrum of capabilities to serve a diverse patient population.*

Heat Map



## 2,500+ board certified physicians

Caring for  
335,000  
patients

+

22 after  
hours &  
urgent care  
locations

+

5 PPO  
ACOs

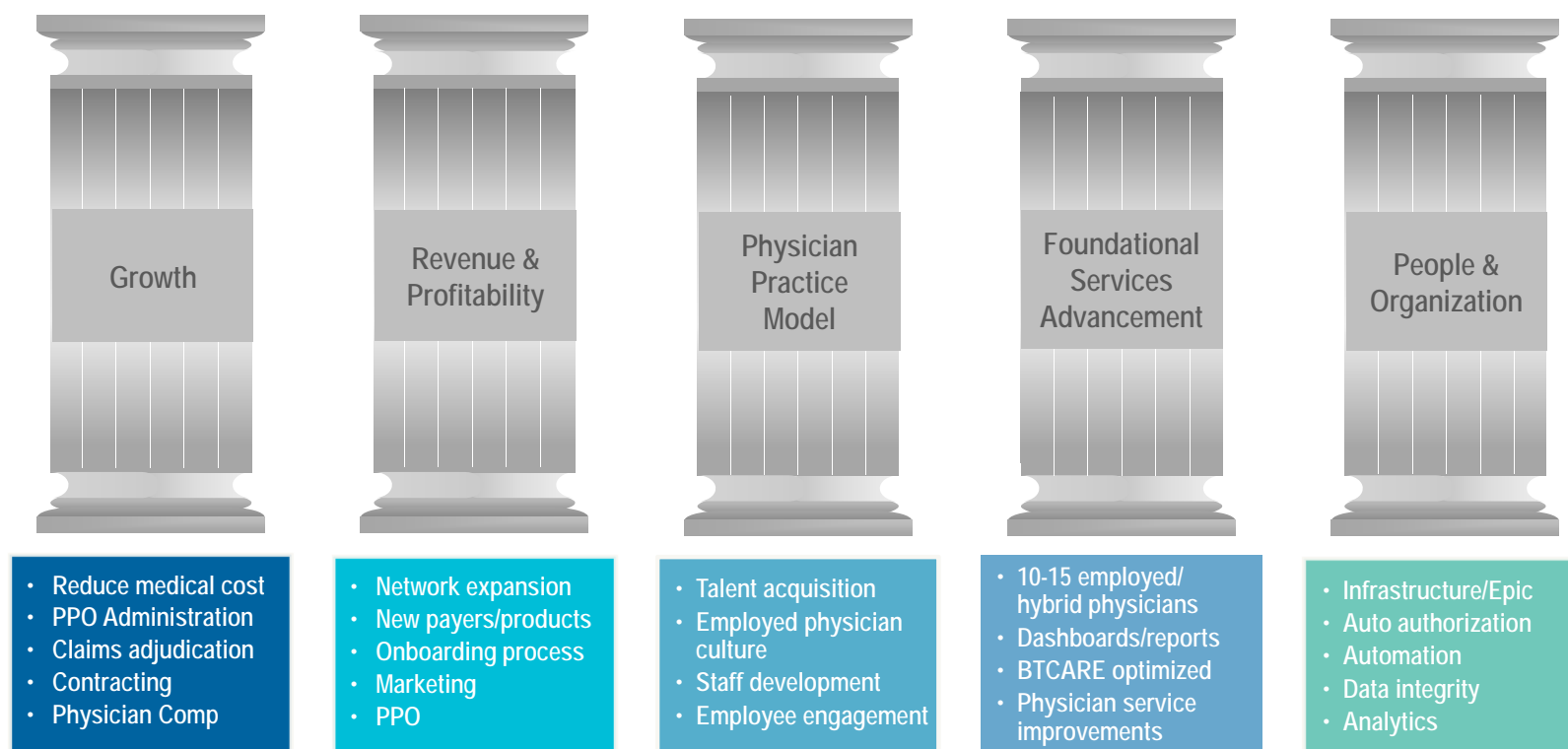
+

106  
specialties

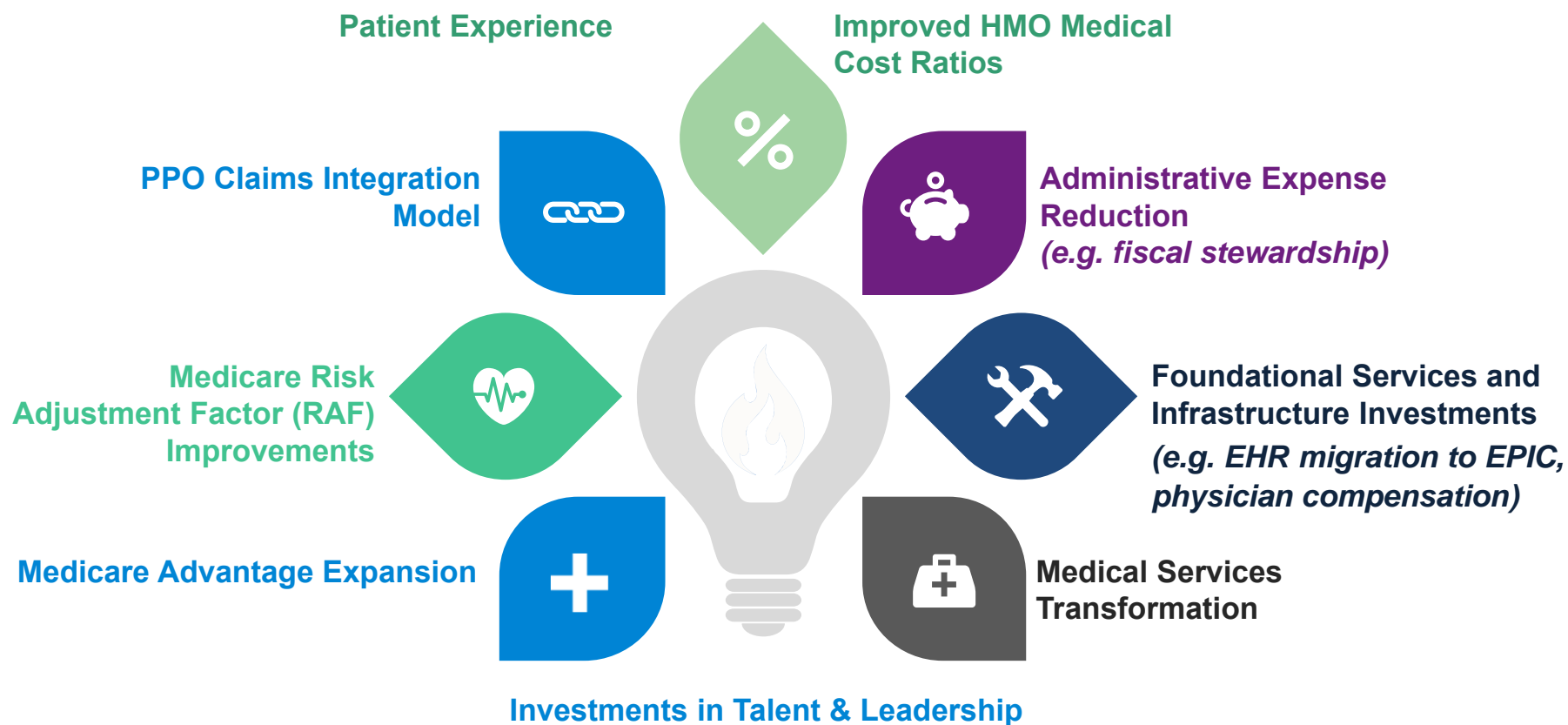
## Key Attributes

- Care Management
  - TOC/ED monitoring
  - Med Rec
  - Behavioral health navigators
  - Chronic care management
  - Hospice
- Facility Partnerships
  - 23 hospital partners
  - Centers of Excellence
  - Ambulatory Surgery Centers
  - Urgent Care Centers
  - Go Health Urgent Care

# Strategic Plan – Key Strategies



# Transformational Focus Areas



# Board of Directors



**Fabiola Cobarrubias,  
MD, MBA,**  
Chair, Board of Directors



**Anita Demas, M.D.**  
Primary Care Physician,  
Internal Medicine



**Edward Diao, M.D.**  
Specialist, Orthopedics



**Jesse Dohemann, M.D.**  
Primary Care Physician,  
Internal Medicine



**Katherine Gregory, M.D.**  
Specialist, Gynecology



**Yenjean Hwang, M.D.**  
Specialist,  
Infectious Disease



**Joel Piser, M.D.**  
Specialist, Urology



**Christopher Rooke, M.D.**  
Specialist, Hospital Medicine



**Andrew Ross, M.D.**  
Primary Care Physician,  
Internal Medicine



**Dan Roth, M.D.**  
Primary Care Physician,  
Family Practice



**Elizabeth Salsburg, M.D.**  
Primary Care Physician,  
Pediatrics



**Leah Tessler, M.D.**  
Primary Care Physician,  
Internal Medicine



**Christopher Wong, M.D.**  
Primary Care Physician,  
Internal Medicine

# Experienced Leadership Team

**Kelly Robison, Chief Executive Officer**

A healthcare executive with over 25 years of industry experience, Robison worked in leadership and executive roles with Brown & Toland from 1995 to 2013. She was part of the team that initially united California Pacific Medical Group and UCSF Medical Group to form Brown & Toland in 1997. Most recently, she was OptumCare's Chief Development Officer and worked to successfully build, acquire and transform large physician groups, growing to more than 30 markets and over 20,000 employed and contracted physicians in various medical groups and independent practice association (IPA) settings.

**Lynn Grennan, Chief Financial Officer, CPA/ABV**

Lynn is a Certified Public Accountant and accredited in business valuation. She brings more than 20 years of healthcare experience in finance and operations, including physician practice management, medical group and IPA affiliation and growth, mergers and acquisitions, performance improvement and strategic business planning. She has held senior leadership positions with University of Arizona Physicians, Sutter, and Huron Consulting.

**Ryan Faulkner, Chief Strategy Officer**

Ryan joined Brown & Toland in April 2018. He previously held leadership positions in business development, integration and human capital for OptumCare and OptumHealth, most recently as Senior Vice President, Business Integration. He has executive and consulting experience across multiple industries, and has focused more recently on helping physician-led organizations address the reimbursement, clinical, and population health opportunities that are driving change across the healthcare industry.

# Experienced Leadership Team



## **Kara Ricci, Chief Legal Officer and General Counsel**

Kara joined Brown & Toland as Chief Legal Officer and General Counsel in May 2019. Kara has comprehensive experience in the compliance and legal profession with extensive in-house experience supporting a broad range of corporate clients in a time-sensitive environment. She is also an experienced negotiator with regulators, insurance producers, risk managers, purchasing and retention groups. Ricci previously served as Senior Vice President, Chief Legal Officer and Corporate Secretary at NORCAL Mutual Insurance Companies in San Francisco. In this role, she planned and directed all aspects of the NORCAL Group's legal affairs at the staff and board levels. She also served as legal counsel to NORCAL and all its subsidiary companies.



## **Soma Bulusu, Chief Information Officer**

Soma was named Chief Information officer at Brown & Toland in March, 2013. An information technology veteran with close to 20 years' experience in the healthcare sector, he previously was Vice President, Chief Information Officer for Marin General Hospital, a Director at Covansys, and a Senior Principal with Oracle Corporation. Bulusu previously received the CIO Innovators of the Year award from Frost & Sullivan for his work and contribution in pioneering care management solutions at Marin General Hospital.



## **Joel Klompus, M.D., President, Interim Chief Medical Officer**

Dr. Klompus took the helm as president of Brown & Toland after serving on the company's Board of Directors for 17 years. Previously, he was Vice Chairman of the Department of Medicine at California Pacific Medical Center (CPMC) and head of the CPMC outpatient teaching clinic. Dr. Klompus has been in private practice with Pacific Internal Medicine Associates Medical Group for 30 years. Dr. Klompus earned his undergraduate degree from Brown University, his medical degree from the University of Pennsylvania and completed his residency at CPMC.

# Experienced Leadership Team

**Elisa Johnson, Vice President, Human Capital**

Elisa joined Brown & Toland Physicians as Vice President, Human Capital in August 2018. A veteran with more than 20 years' experience leading global Human Capital teams in such locations as Singapore, China, South Korea, Japan, and France, ranging from start-ups to Fortune 20 companies across a variety of industries. In healthcare, Johnson held leadership roles at UnitedHealthcare and in Enterprise Talent Development for UnitedHealth Group leading physician and senior executive development programs.

**Pat Aubort, Chief of Staff**

Pat joined Brown & Toland Physicians in November 2018. She offers both deep and broad experience gained over 30 years as a CFO, finance executive, VP of Acquisitions, financial and operational consultant, and tax accountant. She has served both private and publicly-traded companies in various finance-related capacities during her career. Pat serves as the Vice President, Chief of Staff and effectively spans both financial and operations as a high-functioning, executive manager.

**David Koury, Chief Operations Officer**

David Koury joined Brown & Toland as Vice President, Operations in December 2018. With over 25 years in healthcare, Koury has a broad, extensive background in all aspects of managed care/accountable care through experiences of leading teams responsible for provider contracts, provider relations, customer service, claims and eligibility management. Koury previously held senior leadership roles in network management at Health Net of California and CIGNA Healthcare. He also served in operations leadership roles for both Stanford Health Care/UHA and Coram Specialty Infusion Services.

## Sutter/Brown & Toland Timeline

1. December 2018- Sutter and Brown & Toland initiated efforts to streamline all agreements between the two parties to reduce administrative burden to operationalize. This included professional, facility, and ancillary agreements for all Sutter entities in multiple counties.
2. Q2-Q3 2019- Sutter communicated that it was building its own network of physicians in SF County and thus would terminate SPMF PCP participation in the BTP network. A termination was issued for a contract which included both SPMF PCPs and SCPs with the mutual understanding that SPMF SCPs would be included in the new agreements being negotiated. Discussions were co-mingled with operational discussions, thus delaying negotiation progress.
3. Q4-Current- Brown & Toland and Sutter focused on Specialist agreement. Working on LOA to support continued talks through 2020.

## Impact to SFHS

1. Brown & Toland holds a reciprocity agreement with SPMF that will allow Brown & Toland members to see SPMF specialists. SPMF specialists remain contracted through this agreement, but are not listed in directories.
2. Since Brown & Toland is capitated by Blue Shield for the professional fees, access to SPMF specialists is Brown & Toland's risk.
3. Members assigned to BTP community PCPs should not see a disruption in care.
4. 34 SPMF PCPs are being terminated from Brown & Toland's network.
5. Network adequacy for PCP care in San Francisco is 18 PCPs. Currently Brown & Toland has 223 PCPs in San Francisco.
6. 1,750 current SFHS/ BTP members are assigned to a Sutter PCP. Brown & Toland has been working with Blue Shield to support transfer of membership where feasible.

## Support for SFHS Members

Brown & Toland is committed to SFHS members to provide support during this transition and change of the PCP network.

Member Services	415.972.6000
-----------------	--------------

Physician Relations	415.972.4350
---------------------	--------------

## Why is there an annual membership fee?

The Annual Membership Fee allows us to offer you the innovative digital health tools and value-added services that make One Medical unique. The Annual Membership Fee is paid to 1Life Healthcare, Inc., the healthcare technology and management company affiliated with One Medical, that develops the digital health tools and enhanced services that One Medical offers to its members.

The Annual Membership Fee covers costs associated with access to the 1Life Healthcare proprietary technology platform, which includes such benefits as online appointment booking and online prescription renewal requests. Members who pay the Annual Membership Fee also have access to time-saving services through the One Medical Mobile App offered by 1Life, including online appointment booking, online prescription renewal requests, on-demand video visit technology, and digital access to virtual medical services on the go.

The Annual Membership Fee also covers costs associated with high-touch and value-added non-medical services including lifestyle and wellness offerings and value-added personal assistance services. The Annual Membership Fee is not a covered benefit under most health insurance plans.

Payment of the Annual Membership Fee is not a prerequisite for receiving medical care in One Medical offices. To understand your options for accessing medical services with One Medical without payment of the Annual Membership Fee, [click here](#).



# Member Financial Assistance

At One Medical, it's our mission to make quality care accessible to everyone. We believe financial hardships shouldn't prevent members from receiving the medical care they need. While we accept most major insurance plans, we know that some members may not have access to medical insurance or other resources to pay for necessary primary care. Our member financial assistance guidelines are here to help those who are unable to pay for their care at One Medical.

You may be eligible for financial assistance on medical care and/or the [annual membership fee](#) if:

- You complete the financial assistance application and supply necessary documentation within the allotted time frame, and
- You meet the financial criteria

And one or more of the following apply to your financial and healthcare status:

- You don't have health insurance, or
- Your health insurance policy doesn't cover all necessary medical care, or
- Your health insurance policy imposes substantial patient responsibility\* for medical care (may include deductible and/or coinsurance based on specific plan benefits)

# Financial Criteria

We provide assistance to eligible patients who don't have insurance and other payment resources available to them. Eligibility will be determined using your most recent tax return. You have the option of uploading additional documentation including all your current year's W2, 1099 earnings statements, or 6 months of current pay stubs. If you'd like to apply for financial assistance, you'll need to fill out a [member financial assistance application](#), request a paper form by emailing us at [financialassistance@onemedical.com](mailto:financialassistance@onemedical.com), or call your local One Medical office.

If you meet the criteria, you'll receive financial assistance and a discount will be applied to your annual membership fee as well as any out-of-pocket costs\*\* for one year. If you don't meet the requirements but feel you still need assistance, please reach out to a member of our team to discuss options. There are other One Medical financial programs, including no-interest payment plans, which we may recommend depending on the specific situation. Please reach out to us at [financialassistance@onemedical.com](mailto:financialassistance@onemedical.com).

You'll need to reapply for financial assistance every 12 months after initial eligibility determination.

\* Copayments are exempt from this policy due to contractual obligations and must be collected at the time of service.

\*\* Financial assistance discounts are *not* applicable towards services rendered by outside facilities, e.g. labs, specialist facilities, imaging facilities, etc.

# Request Limited Access to One Medical

You may access medical services from One Medical providers without the benefits of the 1Life enhanced digital tools and value-added member services. This access does not include use of the 1Life Healthcare proprietary technology platform, including online and mobile appointment booking, on demand video visit technology and conveniences of the Mobile App. You would need to call to schedule appointments.

To receive all the benefits of One Medical membership, including online and mobile appointment booking, online and mobile prescription renewal requests, on-demand video visit technology, and digital access to virtual medical services through the One Medical Mobile App, continue with registration as a One Medical member.

[Go to Membership Registration](#)