



HEALTH SERVICE BOARD

CITY & COUNTY OF SAN FRANCISCO

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HEALTH SERVICE BOARD MEETING

Minutes

Thursday, November 14, 2019, 1:00 p.m.
City Hall, Room 416
1 Dr. Carlton B. Goodlett Place
San Francisco, CA 94103

1. CALL TO ORDER: 1:01pm

2. PLEDGE OF ALLEGIANCE

3. ROLE CALL

President Karen Breslin- Present
Vice President Stephen Follansbee, M.D.- Present
Commissioner Mary Hao- Arrived 1:30pm
Commissioner Randy Scott - Present
Commissioner Wilfredo Lim – Arrived 1:05pm
Commissioner Chris Canning – Present
Supervisor Rafael Mandelman - Excused

4. APPROVAL (with possible modifications) OF THE MINUTES OF THE MEETINGS SET FORTH BELOW: (Action)

DOCUMENTS ATTACHED: The September 12th, 2019 regular board meeting minutes are located on the SFHSS website at: <https://bit.ly/2D70COv>

President Breslin affirmed that the Commissioners reviewed the regular meeting minutes from September 12, 2019. President Breslin asked if there were any corrections to the minutes. There were no corrections offered to the meeting minutes presented.

PUBLIC COMMENT: None.

Action Taken: The Health Service Board unanimously approved the September 12, 2019 meeting minutes.

5. GENERAL PUBLIC COMMENT ON MATTERS WITHIN THE BOARD'S JURISDICTION: (Discussion)

PUBLIC COMMENT:

Jason Lee, a UCSF student, asked about Well-Being program supportive services around “vaping” and the use of the tobacco. Mr. Lee also asked if the SFHSS Well-Being program within the City and County of San Francisco would be interested in expanding these types of programs through their Well-Being programs. Mr. Lee also asked if there would be a more focused program around tobacco cessation specifically.

Executive Director Yant stated that the current health plans provide a tobacco cessation program for our members. Director Yant noted that the SFHSS team would be conducting an assessment with the health plans to see what the need is for tobacco vaping use prevention.

Vice President Follansbee asked if the SFHSS Well-Being program offered tobacco cessation programs in place that members can access through SFHSS. Carrie Beshears, Well-Being Manager, stated that there are tobacco cessation programs available to all members through the health plans. Mrs. Beshears shared that currently, the SFHSS Well-Being program does not offer tobacco cessation; however, the EAP counselor who provided this service to the members in previous years retired a few years ago. Mrs. Beshears noted that at the time of the EAP counselor’s retirement, the Well-Being Manager did not enroll any other EAP counselor in the tobacco cessation program training.

Executive Director Yant affirmed that there is a concern in vaping for both our members and the young people who are also highly utilizing the vaping pens.

Executive Director Yant noted that there is going to be a report given to the Board once the health plan assessment of the tobacco cessation programs is complete. Vice President Follansbee stated that once the report is completed on the services the health plans offer the members, the Board and the SFHSS team need to discuss whether or not there is a need to have tobacco cessation available through the Well-Being program.

6. PRESIDENT’S REPORT: (Discussion)

President Breslin stated she did not have anything to report.

PUBLIC COMMENT: None

GOVERNANCE COMMITTEE MATTERS

7. APPROVE THE INITIATION OF THE HEALTH SERVICE BOARD ANNUAL SELF-EVALUATION PROCESS FOR THE FISCAL YEAR 2018-2019: (Action)

DOCUMENTS ATTACHED: The FY 2018-2019 HSB Self-Evaluation form is located on the SFHSS website at: <https://bit.ly/2XAZewU>

The Proposed timeline for the HSB Self-Evaluation is located on the SFHSS website at: <https://bit.ly/2QHZetv>

Committee Chair Scott introduced this item and discussed the evaluation process that takes place with the collaboration of the Department of Human Resources. This process and draft timeline were reviewed with the Governance Committee in a meeting that took place on November 7th. Committee Chair Scott noted that this is the 4th year that the Board has taken part in this evaluation.

President Breslin asked whether or not the “unable to assess” option was added to the evaluation, as this was an item that was discussed as a possible option during the Governance Committee Meeting. Committee Chair Scott noted that this additional option was not added to the survey. Committee Chair Scott stated that the reasoning for this decision was to maintain version control of the survey. Committee Chair Scott said that Commissioners who did not feel that they could fairly rate a question or did not feel they had enough experience on the Board at this time to assess, would choose “neutral.” This selection would then require some explanation in the comment box located at the end of the question’s section.

Board Secretary, Natalie Ekberg, agreed with Committee Chair Scott's reasoning and explanation of why the "unable to assess" option was not added to the survey tool.

Vice President Follansbee asked if all of the questions require a response, and if a Commissioner chose the neutral response, will those responses be counted. The Board Secretary clarified the expectation is to respond to all of the questions presented. The neutral selections would be counted and would have some context if the Commissioners who use that option write in their reasoning at the end of each section. The reason for not adding the "unable to assess" possibility to the answer section pool was based on not wanting to alter the survey and preserve its original form for the data collection longevity.

PUBLIC COMMENT: None.

Action Taken: The Health Service Board unanimously approved the initiation of the FY 2018-2019 HSB Self-Evaluation form and the proposed timeline.

REGULAR BOARD MATTERS

8. DIRECTOR'S REPORT: (Discussion)

DOCUMENTS ATTACHED: The Director's Report is located on the SFHSS website at: <https://bit.ly/34f7g14>

The EAP Times of Crisis Presentation is located on the SFHSS website at: <https://bit.ly/2XFLn8l>

Executive Director Yant began her report by acknowledging and giving recognition to Bernard Tyson, Kaiser Permanente's most recent Chief Operating Officer, who passed away in early November 2019. Denise Rodriguez, Director, Strategic Accounts, Public Sector, Northern Ca, also spoke about Mr. Tyson and shared how much he was a leader, a visionary, and an inspiration across the Kaiser Community, as well as the overall community outside of Kaiser. Vice President Follansbee and Commissioner Scott both shared positive experiences during their professional careers in working with Mr. Tyson.

Executive Director Yant moved into her Director's Report, presenting SFHSS's decision not to release an RFP for the plan year 2021. Executive Director Yant noted that SFHSS would continue to monitor the healthcare marketplace during this extended period in time, particularly the current development of the Canopy product and the Sutter/Aetna product.

Executive Director Yant stated that the following presentations would be presented at the December Board meeting: 1) SFHSS Member Engagement sessions report, 2) SFHSS Strategic Plan update with the first-year progress, and 3) Kaiser will also present the Complex Care Coordination presentation.

Executive Director Yant stated that there was more investigation done around the concierge fees that the SFHSS members have been asked to pay. Executive Director Yant shared that United Healthcare clarified that OneMedical does not require any member to participate in this program; it is voluntary. Executive Director Yant Stated that it is precluded for any Medicare Advantage physician to charge an extra fee; however, it is considered an "add on" option that members can choose to pay.

Vice President Follansbee asked if members are given a fee schedule when they utilize OneMedical. Executive Director Yant noted that there is an option to sign up and pay membership fee on the OneMedical website. Additionally, Executive Yant stated that even if members are asked to pay a fee with OneMedical, this is prohibited when the OneMedical is contracted with Medicare Advantage, so the SFHSS members who are Medicare Advantage members do not have to pay this fee. Vice President Follansbee asked whether or not there are follow-ups done with the medical groups and health plans when these issues are identified to a specific physician. Executive Director Yant confirmed that these issues are directly addressed.

Shannon Hass, Senior Strategic Account Executive, Public & Labor, United Healthcare, stated that the provider groups who are contracted with Medicare Advantage PPO are prohibited from charging any fees. Ms. Hass noted that a person could be on the individual Medicare Advantage plan and be charged the fee by

voluntarily accepting it. President Breslin asked whether or not members who have a PPO should be sharing that their primary insurance is through Medicare when they are registering in the front office. Executive Director Yant indicated that there is direct outreach required to inform our members of costs, what they mean and who can choose to pay them for the additional services.

Executive Director Yant welcomed new staff who were present at the meeting; there were a total of 7 new staff at the board meeting. Executive Director Yant noted that there were more robust responses written by the SFHSS Enterprise Systems and Analytics Manager, Marina Coleridge. These responses gave more details to various follow-up items that are located in the Director's Report. Ms. Coleridge gave thanks to many staff who work at the Department of Technology and expressed SFHSS' gratitude for all their support during a technical malfunction during Open Enrollment.

SFHSS Staff Engagement Survey Results:

Executive Director Yant presented the SFHSS Staff Engagement Survey history from the 2016 process as well as the results, and then explained the process for the survey that was administered to the staff in September 2019. Executive Director Yant noted that Integral Talent Systems conducted the survey and compiled the results for the SFHSS management team to review.

For this presentation, Executive Director Yant reviewed the survey scales, the results, the overall strengths/weaknesses, and the need to create new action planning steps. These steps are being created by the SFHSS management team so that they can offer their staff support within each area of identified "weakness." The three themes that led to action planning are career/professional development, cross-divisional project collaboration, and employee recognition. Executive Director Yant reviewed a sampling of current initiatives that are being done within each theme, as well as possible options that can be incorporated into SFHSS's culture.

Vice President Follansbee asked whether or not the staff could complete the survey online and wherever they preferred to complete it if it was not in the office. Executive Director Yant confirmed that the survey was available 24 hours a day during the two weeks, and staff could complete it on any computer. Vice President Follansbee also asked how membership who interacts with our member services team shares their recognition of the work with staff. Executive Director Yant noted that this piece of the work had not been addressed; however, this concept is part of the Strategic Plan.

Commissioner Scott stated that there are remarkable improvements from the 2016 survey results and noted that the changes in management are partially due to Executive Director Yant's management style.

EAP Manager's Support in Times of Crisis:

Carrie Beshears, Well-Being Manager, presented the SFHSS EAP for Managers In Times of Crisis, beginning with the introduction of the EAP staff and the services the EAP team provides the SFHSS membership. Ms. Beshears discussed the types of organizational services and Critical Incident Response services offered to city departments. Ms. Beshears spoke about the EAP Critical Incident Response best practices for each event they participate in and provide services.

Ms. Beshears spoke to the partnership that SFHSS is involved with regarding the first responder groups: Fire, Police, Sheriff, Medical Examiner, and Department of Emergency Management, and their need for specialized services for the trauma they are exposed to while they are working. At this time, there is a formal Request for Proposal being planned for a multi-agency First Responder program that would provide services for all of these groups.

Vice President Follansbee asked how many critical incidents the EAP team could maintain annually, or what the capacity for this work may be for the three staff. Ms. Beshears noted the EAP team frequently meets to discuss and adjust the workload to ensure the priorities are being met. Ms. Beshears noted that currently, there is a "tight capacity" for critical incident response. Vice President Follansbee asked if the Health Service Board could support the EAP team in reviewing the metrics so the Board can be involved in this process.

Executive Director Yant noted that SFHSS is in conversations with other organizations to understand what the need is versus the ability to respond with conflicting responsibilities. Executive Director Yant also stated that there had been some discussion around the possibility of an external consultant also conducting a review of the practices to help project what EAP may be able to handle now and what resources may be required for the future.

Commissioner Lim thanked Ms. Beshears for the presentation and noted that the EAP team is often not acknowledged for the amount of work they are doing for the members. President Breslin asked what services EAP can offer the retiree population. Ms. Beshears stated that the EAP services are available for active employees, and the retired members can access mental health services through their health plans. President Breslin asked how the police department supports their retired and active police officers. Ms. Beshears stated that the police have an internal behavioral science unit, and this is what the RFP proposal would be exploring for all five of the first responder agencies in San Francisco.

Executive Director Yant stated that the conversation and planning for the first responders have complex components, as well as the national issue around the shortage of mental health professionals for the number of people who require services. Ms. Beshears noted that the aim of this partnership and RFP is to offer the first responder groups immediate access to mental health services, especially after a traumatic event.

PUBLIC COMMENT:

Vice President Follansbee asked if there was an update from Kaiser regarding the transportation benefits. Denise Rodriguez, Director, Strategic Accounts, Public Sector, Northern Ca, stated that the details of this benefit are still being worked on with the Kaiser team. Ms. Rodriguez noted that there is not wheelchair transportation at this time, and the benefit is set to go live on January 1, 2020. Vice President Follansbee asked if Kaiser was testing wheelchair vendors for this benefit. Ms. Rodriguez noted that Kaiser is evaluating this particular level of transportation, and at this time, the wheelchair transportation will not be available in January; however, this benefit will add wheelchair access at a later date.

Commissioner Scott clarified that as of January 1, 2020, the benefits would go live without wheelchair access. Ms. Rodriguez stated that the benefit would go live in January, and the possibility of the wheelchair access will be added: "mid-cycle or at the beginning of 2021." Vice President Follansbee noted that during the Rates and Benefits process, the Board did not agree to this benefit without wheelchair access. Vice President Follansbee pointed out that the Health Service Board does not, and will not, provide a transportation benefit that would exclude a certain percentage of members, as this benefit does in its current plan.

Ms. Rodriguez asked that her team clarify precisely what is or is not going to be covered in the transportation benefit and bring a clear explanation to the Board meeting in December. Commissioner Scott asked that Executive Director Yant follow up on this benefit and the contractual agreement around the cost and the services attached to the contract.

Claire Zvanski, RECCSF/SEIU Representative/West Bay Retiree, stated that she was "thrilled" that the EAP team was doing this work and getting positive attention. Ms. Zvanski noted that she was confused about the OneMedical issue and what this group is as a healthcare provider. Ms. Zvanski asked for more clarification on OneMedical's mission, what the group is, and what it means when a retired member should do or expect if they access these services.

Fred Sanchez, Chair of Protect our Benefits, asked for more clarity on the concierge fees so that he could inform his members about when it was applicable and when it should be paid for. Mr. Sanchez stated that members have shared with him various reasons for this fee, and none of the ideas have been shared with the SFHSS management. Mr. Sanchez commented that in the fire department, there is little support in the stress management unit, and he wondered how the new RFP agreement would honor fire fighter's privacy when or if they accessed the services that may be available in the future.

9. PRESENTATION OF SFHSS STAFF ENGAGEMENT SURVEY RESULTS: (Discussion)

****This item was not officially stated on to the record as a commenced item, it flowed under the Director's Report, item 8****

DOCUMENTS ATTACHED: The SFHSS Employee Engagement Survey Results Presentation is located on the SFHSS website at: <https://bit.ly/37Ehque>

PUBLIC COMMENT: None.

10. PRESENTATION ON CANCER CARE RELATIVE TO THE SFHSS POPULATION: (Discussion)

DOCUMENTS ATTACHED: The Cancer Care Presentation is located on the SFHSS website at: <https://bit.ly/2pM22ea>

Paige Sipes-Metzler, Vice President, Aon, presented the Cancer Care outcomes that are relative to the SFHSS population. Marina Coleridge, SFHSS Enterprise Systems and Analytics Manager, spoke to the slides that hold multiple graphs and charts. The full presentation covered the following sections:

- Key Findings of the SFHSS population
- The Demographics, the focus on models of care, pharmaceutical innovations, improvements in prevention, diagnosis, and treatment
- 2018 SFHSS Preventive Screening Cancer and Prevalence Rate by Plans Active Employees and Non-Medicare Retirees
- 2018 SFHSS Preventive Screening Cancer and Prevalence Rate by Plans Medicare population
- Top 15 type of cancer within the SFHSS community (by patient count)
- Reviewed the comparisons within the top prevalent diseases by IBM MarketScan Benchmarks
- Cost of Oncology for the SFHSS agency
- Net Pay PMPY Year Over Year Trend – Active & Early Retiree members Top Cancers by Cost
- Distribution of Cancer Care by Service Category
- Reviewed the numbers of SFHSS members by cancer stage
- Reviewed key metrics going forward

Vice President Follansbee asked what the term “survival” means- does this mean a five-year survival or three years. Ms. Sipes-Metzler confirmed that this term refers to a five-year survivor.

Vice President Follansbee asked why the 2017 year had fewer members in every type of cancer presented rather than the 2016 year and the 2018 year. Ms. Coleridge noted that the data SFHSS analyzes is given to the data team from the health plans, and to her knowledge, all of the information is presented in the charts/graphs. Ms. Coleridge noted that she is looking into this year's numbers and that this research will take some time to complete.

Commissioner Hao asked if these statistics could be broken down by gender or by race, or any other distinguishing characteristic of people. Ms. Coleridge pointed out that there is some data presented by gender; however, there is not reported data shared by the health plans regarding race or ethnicity.

PUBLIC COMMENT: None.

11. PRESENTATION ON DELTA DENTAL'S NETWORK AND UTILIZATION REPORT: (Discussion)

DOCUMENTS ATTACHED: The Delta Dental Presentation is located on the SFHSS website at: <https://bit.ly/2OBuZlj>

Sharen Stanek-Lowe, Account Manager, National Accounts, Delta Dental, presented the dental network and utilization report with the following sections covered:

- Delta Dental Dentist Accreditation Process
- Delta Dental PPO Network Access for Active members who would like a PPO Dentist

- Delta Dental PPO Network Access for Active Members who would like a Premier Dentist
- Delta Dental PPO Network Access for Retirees who would like a PPO dentist
- Delta Dental PPO Network Access for Retirees who would like a Premier Dentist
- SmileWay Benefits Program Benefit review and participation guidance
- Cost Estimator tool overview and current utilization review
- Dental Service Utilization Review for Active Employees
- Dental Service Utilization for Retirees

During the presentation of credentialing, Vice President Follansbee inquired about the medical education requirements for dentists to uphold while they are practicing their dentistry. Ms. Stanek-Lowe stated that Delta Dental offers webinars throughout the year for the dentists; however, she did not know the specific number of hours that may be required for each dentist per year. Executive Director Yant stated that there are particular requirements for Dentists who practice in California, and the SFHSS team can provide the Board members with that information directly.

While reviewing the SmileWay program requirements, Vice President Follansbee asked about the Rheumatoid Arthritis diagnosis and its effect on a member's dental health. Vice President Follansbee wondered if the specific complication has to do with inflammation, or if arthritis covers Sjogren/Sicca Syndrome, or if the arthritis symptoms affect the member's ability to take care of their oral health. Ms. Stanek-Lowe shared that this disease affects a person's oral health because of the inflammation a member experiences as well as the loss of ability to properly conduct oral hygiene practices.

Ms. Stanek-Lowe presented the Cost Calculator tool and explained that each member's personal experience with a dentist would be populated into the program once a member logged into their Delta Dental portal. When a member is entering a procedure and selects a dentist that they have not seen or is not in the network, these adjustments would change the costs. Mainly if the member had seen a PPO dentist, a Premier Dentist, or if this dentist was in-network or out of network. Vice President Follansbee asked if the Cost Calculator would calculate the member's shared cost if the provider the member selected were out of network. Ms. Lowe confirmed that the member would see the cost based on the last dentist the member had just seen, with an approximate comparative price on the same screen if the member decided to go out of network.

Commissioner Lim stated that it is strange that in the Active Utilization slide that over 36% of members are not seeing a dentist at all during the year. Ms. Stanek-Lowe agrees that this number is high, and she is working with the SFHSS Executive Team to brainstorm more options that may motivate members to visit a dentist each year.

President Breslin asked what the difference is if a member uses an out of network dentist versus a Premier dentist, does the overall cost change or are the costs the same to the members. Ms. Stanek-Lowe explained the experience of going to an in-network Premier dentist lies in the administration of the benefits, the claim submission, and dental history tracking. The member only pays a co-pay or the fee for the service at the time of the visit. When a member goes to an out of network dentist, the member is responsible for the paperwork and claim submission. Additionally, The procedures are paid upfront by the member at 100% cost, and then once Delta receives the claim, would the member know how much they are being reimbursed.

President Breslin asked whether the PPO dentist or the Premier dentists are paid differently and if the rate of payment is more or less. Ms. Stanek-Lowe stated that the PPO dentists are less expensive to the members, and the contract with the PPO dentists is rated differently than the Premier dentists who are paid more than the PPO dentist for their services. President Breslin asked whether or not the Delta Dental team has the authority to hold the dentists accountable when a member is dissatisfied or has any issues with a provider who is in-network. Ms. Stanek-Lowe shared that within Delta Dental's management model, there is a unit assigned to each provider who would review the complaint or issue report with the dentist in question. This unit would work with the dentist when there is a complaint and continually

follow up with the provider. These reports are critical to understanding the member experiences and act as a tracking tool for dentists who may have other complaints.

PUBLIC COMMENT: None.

12. APPROVE SFHSS INFERTILITY BENEFIT CLARIFICATION: (Action)

DOCUMENTS ATTACHED: The Infertility Benefit Clarification memo is located on the SFHSS website at: <https://bit.ly/33bLfif>

The Infertility Benefits chart is located on the SFHSS website at: <https://bit.ly/2D9lwva>

Executive Director Yant presented the clarification memorandum, and the infertility benefits coverage chart that explains all the details and cost-sharing for the member's use. Executive Director Yant noted that this benefit had had multiple discussions at board meetings, in the SFHSS offices, and with the medical plan providers. Executive Director Yant asked the Commissioners to approve the additional services listed and to support the clarification statement as it is written.

Executive Director Yant clarified that the updates to the benefit ask that the HSS member access the infertility services to determine the member's ability to achieve or cause pregnancy. In this memo, it shared that the least invasive services are diagnostic and may lead to a ruling in or out of the diagnoses of infertility. With this adjustment, the decision to proceed with these services will have more support by consultation with the member's physician.

Executive Directory Yant stated that in addition to the benefit clarification, the SFHSS team is committed to working with the plans to ensure the members who are accessing these benefits have no problems while a physician is administering these benefits.

Vice President Follansbee asked if there any other issues with the two different health plans regarding the infertility benefits or just one. Executive Director Yant noted that there were no other complaints regarding other plans. Vice President Follansbee asked if there is a system in place within SFHSS to ensure that members who may experience issues accessing this benefit can get support.

PUBLIC COMMENT:

Erica Maybuam, an SFHSS member, shared her concerns with the Board regarding the current updates, and calcifications made to the infertility benefits were not as equitable for all SFHSS members. Ms. Maybaum expressed her concerns about the change in language were based on the need for policies to be written in clarity for the members who are reading it. Ms. Maybaum asked the Commissioners if the changes made in the policy was written clear enough for all the members to understand how to access the services listed.

Vice President Follansbee commented that there had been many discussions around this benefit and the use of the word "fertility" and "infertility." Vice President Follansbee shared that he reviewed the policy clarification before the board meeting. During this process, Vice President Follansbee gave various possible situations to the SFHSS staff as a way to evaluate the benefit so it is accessible to all members no matter what their sexual orientation, gender, or relationship status would be. Vice President Follansbee stated that in his review and his understanding of the policy as it is written today, the policy offers the possibility of any situation offering infertility services to any member. Vice President Follansbee stated that he is comfortable with the policy on infertility benefits and how it is written currently.

Action Taken: The Health Service Board unanimously approved the infertility benefit clarification as it is written on November 14, 2019.

13. REPORTS AND UPDATES FROM CONTRACTED HEALTH PLAN REPRESENTATIVES: (Discussion)

PUBLIC COMMENT:

Shawn Lovering, Major Account Manager, Premier Accounts, Blue Shield of California, shared an update regarding the Access+ and Trio network of providers in San Francisco. As of October 1, 2019, Sutter Health

sent a letter to 1450 members who have Access+ and 50 Trio members, to let them know that 48 primary care providers would be leaving Brown and Toland medical group effective December 31, 2019. These primary care providers are forming a new IPA under the Sutter group.

Ms. Lovering noted that Brown and Toland have not officially notified Blue Shield of this change; however, the Blue Shield executive team does anticipate this IPA to be formed. Ms. Lovering shared that under the Blue Shield of California and SFHSS contract, the members were notified of this change on November 1, 2019. Ms. Lovering stated that the Sutter group would be providing the Blue Shield team a panel of primary care physicians who will be accepting new patients.

President Breslin asked if the members who had lost their Trio primary care physician would need to select a new physician. Ms. Lovering confirmed that members who are in Trio with Brown and Toland would need to pick a new doctor.

14. OPPORTUNITY FOR THE PUBLIC TO COMMENT ON MATTERS WITHIN THE BOARD'S JURISDICTION: (Discussion)

PUBLIC COMMENT: None.

15. OPPORTUNITY TO PLACE ITEMS WITHIN THE BOARD'S JURISDICTION ON FUTURE AGENDAS: (Discussion)

PUBLIC COMMENT: None.

16. ADJOURNMENT: 4:10pm

Summary of Health Service Board Rules Regarding Public Comment

- Speakers are urged to fill out a speaker card in advance but may remain anonymous if so desired.
- A member of the public has up to three (3) minutes to make pertinent public comments before action is taken on any agenda item.
- A member may comment on any matter within the Board's jurisdiction as designated on the agenda.

Health Service Board and Health Service System Web Site: <http://www.sfhss.org>

Disability Access

Regular Health Service Board meetings are held at City Hall, 1 Dr. Carlton B. Goodlett Place, in Hearing Room 416 at 1:00 PM on the second Thursday of each month. The closest accessible BART Station is Civic Center, three blocks from City Hall. Accessible MUNI lines serving this location are: #42 Downtown Loop, and the #71 Haight/Noriega and the F Line to Market and Van Ness and the Metro stations at Van Ness and Market and at Civic Center. For more information about MUNI accessible services, call (415) 923-6142. There is accessible parking in the vicinity of City Hall at Civic Center Plaza adjacent to Davies Hall and the War Memorial Complex.

Accessible seating for persons with disabilities (including those using wheelchairs) will be available.

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Lobbyist Registration and Reporting Requirements

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Summary of Health Service Board Rules Regarding Cell Phones and Pagers

- The ringing and use of cell phones, pagers and similar sound-producing electronic devices are prohibited at Health Service Board and committee meetings.
- The Chair of the meeting may order the removal of any person(s) in violation of this rule from the meeting room.
- The Chair of the meeting may allow an expelled person to return to the meeting following an agreement to comply with this rule.

The complete rules are set forth in Chapter 67A of the San Francisco Administrative Code.

If any materials related to an item on this agenda have been distributed to the Health Service Board after distribution of the agenda packet, those materials are available for public inspection at the Health Service System during normal office hours. For more information, please contact Natalie Ekberg at (415) 554-1727 or email Natale.Ekberg@sfgov.org.

The following email has been established to contact all members of the Health Service Board:
health.service.board@sfgov.org.

Health Service Board telephone number: (415) 554-0662