

# San Francisco Health Service System Benefits 2021 + Beyond

Membership Engagement Report to  
San Francisco Health Services Board  
December 12, 2019



COMMUNITIES IN COLLABORATION  
COMUNIDADES EN COLABORACIÓN

# Presentation Outline

## Engagement Overview

- Purpose of Engagement
- Engagement Process
- Engagement Participation

## Engagement Findings

- Member Experience of Care
- Member Response to Future Models
- Members' Asks of SFHSS

## Action Plan for SFHSS

- Current Actions
- Alignment with Strategic Goals
- Key Takeaways

## Appendix

- Participant Demographic Information

# Goals of Member Engagement

SFHSS wishes to discuss any potential modifications to the current health benefits in full view, and with the full and informed participation, of SFHSS Members.

## Purpose of Engagement

- 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

## Targeted Members

- Active employees
- Retirees not yet eligible for Medicare

*Changes to benefits for Medicare-eligible retirees are not being considered at this time, so this was not a target engagement group.*

# Engagement Process

In a follow up survey for focus group participants, 100% of respondents agreed that they “felt supported in discussing both positive and challenging membership experiences openly and honestly.

## Outreach

- Contact list of more than 8,500 email addresses representing all four employer groups, including active members, early retirees, and retirees
- Additional outreach to populations who may face unique health and healthcare challenges

## Surveys

- Administered in person with focus group participants
- Available online for members not able to join a focus group
- Follow up survey for focus group participants

## Focus Groups

- Held 9 focus groups with attention to variety of locations and times
- Select forums for at risk groups: Rural employees, LGBTQ members and Police (SFPD)

## Next Steps

- Complete final report
- Action items to address challenges

# Engagement Participation

Additional demographic information about participants can be found in the appendix at the end of this presentation.

## Participation

- 117 members participated in focus groups
- More than 8,500 email invitations yielded 467 views of the focus group Eventbrite pages
- An additional 45 surveys were collected online and in person for a total of 162

## Representation

- Participation was monitored for representation across employment status, workplace, home location, health plan, and demographic factors.
- Participants were diverse across these measures

# Engagement Findings: Experience of Care

Most participants were very positive about their experience with their covered health benefits.

## Primary Care

- Choice and access are key

*"I would walk through fire for my primary care provider."*

## Specialists

Members value:

- Speedy access to high quality specialists
- Referrals to out-of-network specialists, when needed
- Good communication between specialists and primary care providers

## Urgent Care

- Members praised accessibility, quality, and convenience:

*"I rely on urgent care rather than my primary doctor for the convenience of hours."*

# Engagement Findings: Experience of Care

## Apps and Digital Records

- Convenience and ease of coordination among providers:  
*"You can make appointments. You can email your doctor. You do lots of things through the app; it's very easy."*

## Dental Care

- Friendly care that puts members at ease
- Long-standing relationships with providers
- Convenience and accessibility

## Tele-Medicine

- Members praised the convenience of video and phone appointments:

*"I had a really good experience with a specialist and I didn't have to go and sit face-to-face. We did it remotely on the video chat and it was great."*

# Engagement Findings: Experience of Care

Members were consistent  
in seeking improved access to  
a few types of care.

## Mental Health and Behavioral Health

- Covered providers accepting new patients are difficult to find
- Desire for more robust coverage for non-emergency care
- Difficulties finding specialist providers

## Wellness Services

- More access to whole-person care including fitness, nutrition counseling, and weight loss support
- Accessibility for workers with nonconventional working schedules

## Alternative Medicine

- Finding covered providers is difficult
- Chiropractic care and acupuncture are particularly sought after
- Some members pay out of pocket or with FSA funds



# Proposed Future Models

Five models of possible future health benefits were described to focus group participants. They then shared questions, concerns, and ideas about the models and were asked what features were appealing.

1

Current Plan Offerings

2

Current Plan Offerings with Third-Party Navigation and Advocacy

3

Consolidated Plans

4

System Competition

5

Private Exchange

# Feedback on Proposed Models

## Model 2: Current Plan Offerings w/ Third Party Support

### Key Takeaways:

Mixed and inquisitive feedback. Some questioned quality and fidelity of services and provider.

### Key Question:

How might third party support impact (complicate) overall experience of care?

## Model 3: Consolidated Plans

### Key Takeaways:

Raised concerns can be categorized in 3 themes:

- Choice
- Cost
- Coverage

### Key Question:

How will fewer options impact coverage – in the Bay Area and out of state?

## Model 4: System Competition

### Key Takeaways:

Members liked the availability of more integrated healthcare systems, in addition to Kaiser.

### Key Question:

How will integrated systems impact ability receive coverage outside of network?

## Model 5: Private Exchange

### Key Takeaways:

This model raised the most member questions and concerns.

### Key Question:

How will greater variety of plan choices impact equity, quality, and accessibility in relation to care?

# Member Questions About Proposed Future Models

## Cost



How will proposed changes impact cost of care?

“

*It all boils down to the cost.*

”

## Quality



How will quality of service be impacted by each of the proposed models?

“

*How do you have quality control and know that there is access to care that's appropriate or necessary based on the diagnosis?*

”

## Third-Party Support



What is the level of quality and accountability?

“

*Will there be privacy issues? Will there be additional costs? Will third party professionals have same level of expertise?*

”

## Coverage



How will the variations in what each plan offers impact coverage and ability to receive care?

“

*I think for me the big thing is I don't want to lose any of my insurances as I age, or my options.*

”

# Members' Asks of SFHSS

Generally, members reported an overall satisfaction with the services and support provided by SFHSS and deem them valuable in their overall health and well-being.

*"It's important that health services stay involved in the healthcare plans for the employees . . . as long as we stay alive or our dependents stay alive."*

## Service Standards and Accountability

Members expressed a desire for SFHSS to extend more support in enforcing service standards and accountability in ways that better serve patients.

Particularly in the following areas:

- Mental Health
- Alternative Medicine
- Potential third-party support

## Enhanced Communication

Some members stated that they were unaware of some benefits or services provided by SFHSS. Particularly around the following areas:

- Advocacy and problem solving
- Nutrition counseling
- Transition to retirement

## Meeting Population-Based Needs

Different membership groups have different needs based on location, demographics, or employment type. SFHSS continues to engage subpopulations to explore barriers to care, for instance:

- Members who reside outside the Bay Area
- LGBTQ members
- First Responders
- People of Color

# Current Actions

There are challenges identified in this work that SFHSS is already tackling in alignment with our strategic goals.

## Service Standards and Accountability

- As SFHSS enters the renewal period, we can take this opportunity to deepen conversations about access to providers, including for primary care and mental health

## Enhanced Communication

- SFHSS is currently seeking a communications director to develop a comprehensive engagement campaign to increase awareness and participation in SFHSS services.
- Promote SFHSS Advocacy services to members.

## Meeting Population Based Needs

- SFHSS to develop strategies to monitor and enhance services to meet the needs of at risk groups.

# Recommendations in Alignment with Strategic Goals

## Affordable & Sustainable

- Continue to negotiate on behalf members for affordable, comprehensive, and high quality care.

## Reduce Complexity & Fragmentation

- Support in transition to retirement.
- Encourage improved communication among providers.

## Engage & Support

- Offer plan materials earlier, more often, and in a variety of formats.
- Offer translation services and support.
- Increase awareness of services offered by SFHSS.

## Choice & Flexibility

- Advocate for improved and expanded access to providers, especially for mental health care and alternative medicine.

## Whole Person Health & Well-Being

- Provide members with checklist of questions to use with providers and insurers.
- Ensure wellness programs are accessible to shift workers.
- Continue and enhance EAP services.

# Key Takeaways

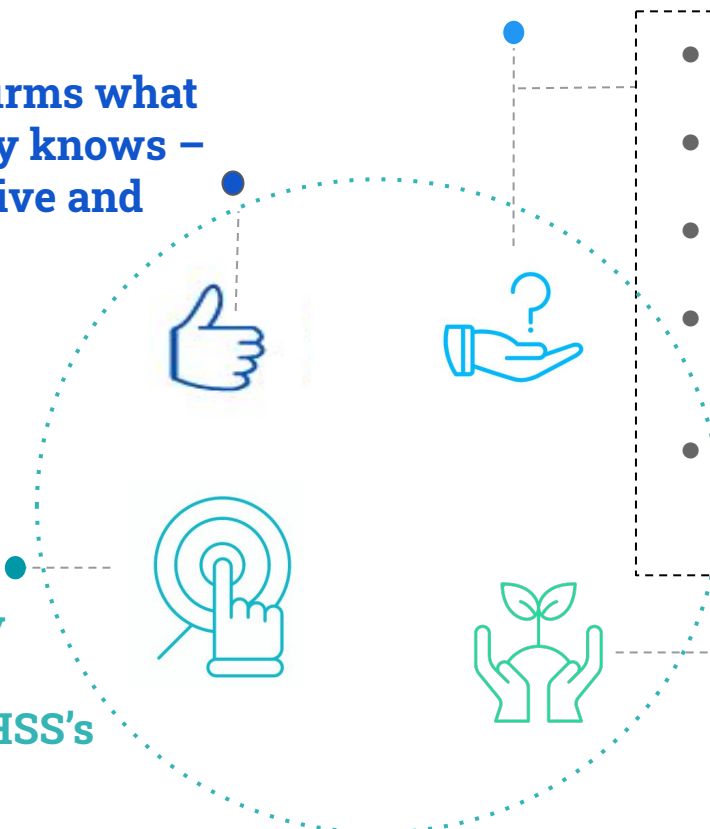
## 2. This work also raises important questions for SFHSS.

1. This work affirms what SFHSS already knows – both the positive and the negative.

4. Some challenges raised are currently being addressed in alignment with SFHSS's strategic goals.

3. The findings will impact SFHSS's approach to future plans.

- What are the barriers that prevent members from calling SFHSS?
- How can SFHSS strengthen communication about plans and benefits?
- How can we better support members through the transition to retirement?
- What are additional ways SFHSS can hold providers and insurers accountable for excellent care?
- Are there targeted approaches to improve access and outcomes for populations with specific needs?



# Thank You



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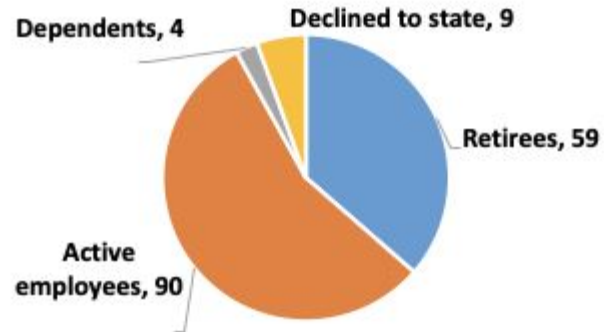
# Appendix



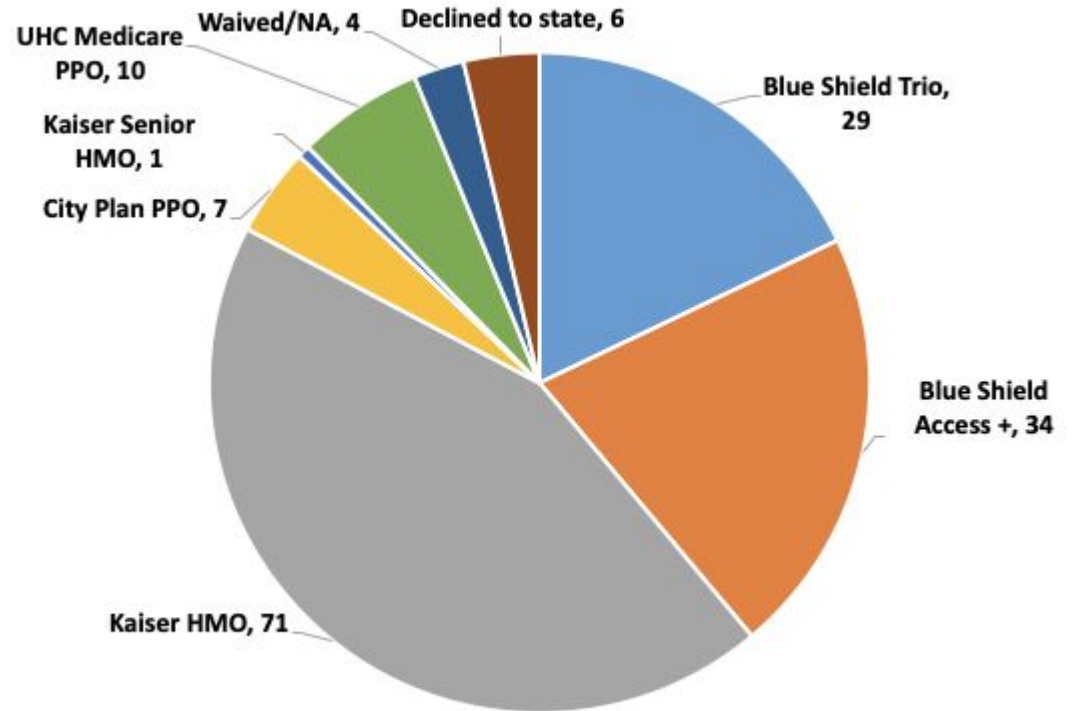
## Participant Demographics

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**All participants by member status (n=162)**



**Participant insurance plans (n=162)**



# Participant Demographics

