

HEALTH SERVICE BOARD CITY & COUNTY OF SAN FRANCISCO

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Stephen Follansbee, M.D Commissioner

Claire Zvanski Commissioner Abbie Yant, MA, RN Executive Director Health Service System

> Holly Lopez Executive Secretary

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HEALTH SERVICE BOARD

REGULAR MEETING MINUTES DRAFT

Thursday, December 14, 2023, 1:00 pm City Hall, Room 416 1 Dr. Carlton B. Goodlett Place San Francisco, CA 94102

and

VIRTUAL PRESENTATION BY SFGOV TV and Webex

Remote Meeting Access

The Health Service Board welcomes public participation during public comment periods. There will be an opportunity for general public comment at the beginning of the meeting, and there will be an opportunity to comment on each discussion or action item on the agenda. Each comment is limited to 3 minutes. For those attending remotely, the Commission will hear up to 30 minutes of remote public comment total for each agenda item. Remote public comment from people who have received an accommodation due to disability will not count toward the 30-minute limit.

Watch at 1:00 pm on December 14, 2023 (via <u>SFGovTV schedule)</u> Click the link to join the meeting – <u>December 14, 2023, HSB Regular Meeting WebEx link</u> Public Comment Call-In: 415-655-0001 / Access Code: 2660 762 1309 Webinar Password: 1145

Listening to the meeting via phone

- 1. Dial 415-655-0001 and then enter access code 2660 762 1309 then #
- 2. Enter Webinar Password: 1145 then press #
- 3. Press *3 to be added to the Public Comment queue and you will hear the prompt "You have raised your hand to ask a question, please wait to speak until the host calls on you." When the system message says "Your line has been unmuted" **THIS IS YOUR TIME TO SPEAK.**
- 4. You will be muted when your time to speak has expired.

Watching the meeting on WebEx

- 1. Join via hyperlink December 14, 2023, HSB Regular Meeting WebEx Link
- 2. Click on the Raise Hand Icon to be placed in the queue to speak. A raised hand will appear next to your name. When you are unmuted in the system, a request to unmute will appear on your screen, please select unmute to speak.
- 3. When you are unmuted in the system, a request to unmute will appear on your screen, please select unmute to speak. Once you hear me say "Welcome Caller," you can begin speaking.
- 4. When your time has expired, you will be muted. Please click on the Raise Hand Icon to lower your hand.

Members of the public are encouraged to state their name clearly although you may remain anonymous. You will hear an audible warning when you have 30 seconds remaining. When your 3 minutes have ended, you will be placed back on mute.

Best Practices when Calling in for Public Comment:

- Call from a quiet location
- Speak slowly and clearly
- Turn down any televisions or radios around you
- Address the Commission as a whole, do not address individual Commissioners

Written Public Comment

Persons unable to attend the meeting may submit written public comments regarding an agenda item. These comments will be made part of the official public record and shall be brought to the attention of the Health Service Board. Written public comments expected to be part of the official record should be submitted to the Board email, <u>health.service.board@sfgov.org</u>, and **received by 5 p.m. on Wednesday, December 13, 2023,** before the meeting. Members can also call 628-652-4646 with any questions.

All comments received by the deadline will be forwarded to Board members, summarized and read aloud by the Board Secretary during the specific agenda item, and included in the meeting minutes. In the body of your email, indicate the meeting date and the specific agenda item number. If you do not specify an agenda item, your emailed public comment will be read under general comment.

The Health Service Board meeting recording is available on the <u>December 14, 2023, HSB Meeting</u> <u>webpage</u>. Regular Board meeting recording archives are available on the <u>SFGovTV Health Service</u> <u>Board meeting webpage</u>.

1. CALL TO ORDER: 1:03 pm

2. ROLL CALL:

President Randy Scott- Excused Vice President Mary Hao- Present Commissioner Karen Breslin- Excused Commissioner Chris Canning- Excused Supervisor Matt Dorsey- Present Commissioner Stephen Follansbee, M.D- Present Commissioner Claire Zvanski- Present

3. <u>GENERAL PUBLIC COMMENT – An opportunity for members of the public to comment on</u> any matter within the Board's jurisdiction that is not on the agenda, including requesting that the Board place a matter on a future agenda.

PUBLIC COMMENT:

Written Public Comment:

<u>Tim Lee, SFMTA employee</u>: Letter regarding Delta Dental PPO. Shared that his child's dentist decided to leave Delta Dental PPO network due to the reimbursement fee schedule. While trying to find a new in-network pediatric dentist he noticed there are not many dentists being in-network. He Searched on the web there were also similar results of dentists leaving Delta Dental PPO. He asked the Board to shop for new PPO insurance carriers such as Met Life, Signa, Etna, Emeritus, Guardian, Principle, or Carrington, in the new open enrollment.

4. <u>APPROVAL (with possible modifications) OF THE MINUTES OF THE MEETINGS SET</u> <u>FORTH BELOW: (Action)</u> See pdf November 9, 2023, Health Service Board Regular Meeting Minutes

Commissioner Follansbee moved to approve the November 9, 2023, Health Service Board

PUBLIC COMMENT: None

VOTE: Aye: Dorsey, Follansbee, Scott, and Zvanski Noes: None

Meeting Minutes. Commissioner Zvanski seconded the motion.

ACTION: The Health Service Board unanimously approved the November 9, 2023, Health Service Board Regular Meeting Minutes.

5. PRESIDENT'S REPORT: (Discussion)

President Scott said there has been a continuing question that has arisen since the Board of Supervisors made a change in their public comment process. During the pandemic remote public comment was available. Early this year the Health Service Board returned to in-person meetings and maintained both in-person and remote public comment.

At a recent Board of Supervisors public meeting, public comment included hate speech and the Board of Supervisors decided to discontinue the online or virtual public comment process, which

had a ripple effect on the 165+ City Boards and Commissions. The Mayor's Office, City Attorney, and Commissioner Secretaries have met to discuss the issue. President Scott said the current practice is that he Board President is authorized to continue or discontinue on line or virtual public comment. President Scott stated that he will not exercise this authority. President Scott requested the full Board decide whether to continue, discontinue, or modify public comment remote access. President Scott outlined a plan for the next steps:

- 1. Request Executive Director Yant to report on usage and cost of virtual public comment for the last six months
- 2. Request the Board Secretary gather additional information from other Boards and Commission's decisions on public comment procedures.
- 3. Request Counsel to provide written guidance on how to uphold freedom of speech and guidance if public comment includes hate speech.
- 4. Add this issue as an action item to the February 8, 2024, Health Service Board regular meeting to hear the results of these requests and take action on how the Board will proceed.

Commissioner Zvanski said this is a serious matter because members live throughout the City, peninsula, California, nation, and all over the world. Commissioner Zvanski said the Health Service Board meetings serve the unique and specific member population and thus believes it is essential to maintain remote public comment at all meetings. Commissioner Zvanski said it is a matter of respect and consideration to members to make participation accessible. Commissioner Follansbee recalled past situations in the past where public comment either in person or online has addressed other agenda items or comments that do not fall within the goals and mandate of this Board. Commissioner Follansbee also suggested the Board clarify who can rule in those situations, whether it be the Board Secretary or the Board President, and how it can be done fairly to all participants.

Supervisor Dorsey shared that the Board of Supervisors is high profile Government body that draws national attention and a national audience. The issue arose when people called and directed hate speech in ways that were disruptive and the Board of Supervisors did now want to offer a platform for hate speech. Supervisor Dorsey said if the Health Service Board doesn't have the same issue then it may not be something that we have to address in the same way as the Board of Supervisors. Supervisor Dorsey said it would be a disservice to discontinue remote public comment to the people we serve in Commissions like the Health Service Board. Supervisor Dorsey said the Board of Supervisors also sought legal counsel on how to identify callers who had a disability without violating accessibility laws and urged the Health Service Board to do the same. Commissioner Follansbee thanked Supervisor Dorsey for clarifying that the Board of Supervisors did not intend to require other Boards to follow the same public comment protocols.

PUBLIC COMMENT: None

6. <u>DIRECTOR'S REPORT: (Discussion)</u> See pdf December 14, 2023, Director's Report

Abbie Yant, SFHSS Executive Director presented the following items:

- Welcoming New Staff
- Well-Being Champion Event
- Board of Supervisors Budget and Finance Committee Meeting
- United Healthcare and UCSF Medical Group Situation
- Medicare RFP Update
- Blackout Notice Period November 9, 2023, through June 2024
- CALPELRA Conference Presentation-November 17, 2023

- Data Breach Reported
- Health Service Board 2024 Election
- SFUSD Update
- Social Determinants & Equity Action Planning
- Integrated Healthcare Association-11/7/2023
- Introduction to the Office of Health Care Affordability (OHCA)
- Health Care Affordability Board-12/29/2023
- Health Care Advisory Committee-11/30/2023 and 1/23/2024
- Health Equity, Diversity, and Inclusion Update
- Divisional Reports
 - Human Resources Personnel
 - Operations
 - Enterprise Systems and Analytics
 - Member Services
 - Communications
 - Finance and Budget
 - o Contracts
 - o Well-Being

Commissioner Follansbee appreciated Executive Director Yant and the staff making sure that the UHC and UCSF situation is clear – that it is not UCSF Medical Center, rather the UCSF Medical Group (physicians that practice at UCSF that has not resolved their contracting issues. Commissioner Follansbee thanked Executive Director Yant for monitoring any problems that might arise because of access to both primary and specialty care. President Scott said the Board gave Executive Director Yant full authorization to pursue, prod, prompt, promote, and encourage both UHC and UCSF to come to a resolution and was glad Executive Director Yant exercised her prerogative where possible and encouraged her to continue to do so.

Commissioner Follansbee applauded Executive Director Yant and the department for all their efforts once again for the Department on health equity diversity and inclusion. Commissioner Follansbee said there are misconceptions that quality of benefits equals equity and it does not. Some may ask if everyone has the same employer and the same access to benefits then what's the need for health equity. Equity is outcomes and we know that outcomes for vaccinations and screening for cancer and dental care and all these things are different from a variety of social factors. Commissioner Follansbee said the Board, as well as SFHSS, have requested vendors share how they address equity issues, outcomes, not just benefits but how equity translates into equity in all these areas. The Board recognizes the need for health equity initiatives and affirms the work that SFHSS is doing to lead the way.

PUBLIC COMMENT: None

7. <u>SFHSS FINANCIAL REPORT AS OF OCTOBER 31, 2023: (Discussion)</u> <u>See pdf SFHSS Financial Report as of October 31, 2023 memo</u> See pdf SFHSS Financial Report as of October 31, 2023 memo presentation

Iftikhar Hussain, SFHSS Chief Financial Officer presented the following items:

- SFHSS Financial Report Highlights
 - Employee Benefit Trust Fund
 - Health Sustainability Fund
 - General Fund Administrative Budget
 - Audit Update

Commissioner Follansbee expressed concern about the dental claims remaining consistently low because it means members are not utilizing dental care and poor dental health contributes to other issues like screening for heart disease, gum disease, and certain types of cancers. Commissioner Follansbee said it's also concerning that medical claims are also running high. Iftikhar Hussain confirmed the medical claims are higher than expected and dental claims are consistently trend low.

PUBLIC COMMENT: None

8. <u>REPORT OF OPEN ENROLLMENT ACTIVITIES FOR PLAN YEAR 2024: (Discussion)</u> See pdf Report of Open Enrollment Activities for Plan Year 2024

Presented by Rey Guillen, SFHSS Chief Operations Officer, Jessica Shih, Communications Director, Olga Stavinskaya-Velasquez, Operations Manager, and Carrie Beshears, Well-Being Manager the following items:

- Purpose of Open Enrollment
- Objectives for Open Enrollment for 2024 Plan Year
- Who We Service
- Open Enrollment Highlights
- Project Plan
- Communications
- Enterprise System & Analytics
- Member Services
- Outcome of Key Initiatives
- Health Fairs and Flu Clinics
- Results

Commissioner Follansbee asked if members have an option to "opt-out" of receiving a hardcopy benefits guide. Jessica Shih said open enrollment information contains personal and private data so a secure system is needed to share information. As of now, there is no option to "opt-in" or "opt-out" although the department is discussing how to create a system for members to access information through a secure portal. Commissioner Follansbee asked if SFGov emails guarantee confidentiality through the internal system, in which case retirees don't have secure access since they use personal email addresses. Jessica Shih said not all active employees have an SFGov email including the Unified School District, the Superior Courts, and the San Francisco Public Utilities Commission (PUC) so email is not a guaranteed form of communication. Jessica Shih said the department also consulted the City Attorney's office and certain legal documents need to guarantee delivery and US mail is the only way to guarantee delivery.

Commissioner Zvanski expressed concern about piloting a program where retirees no longer receive hard-copy benefits guides. Commissioner Zvanski said some members do not have email, wi-fi, or cell phones and are not tech-savvy. Commissioner Zvanski asked if retirees would have the opportunity to at least let you know how they feel about the change or how they would get that information in advance if they don't have other options for getting materials electronically. Jessica Shih said these issues are certainly something HSS is going to take into consideration and for those members we'll most likely continue to mail them the materials or they can always call us and request a full printed guide in which they'll have more comprehensive information. Jessica Shih reiterated that no change has been made, the department is considering a pilot program. Commissioner Follansbee asked how were calls diverted between the HSS and VSA. Was it after hours it went to VSA, so was it 24/7 accessibility or what was the mechanism? Olga Stavinskaya-Velasquez said VSA supported calls during regular business. The calls were identified into three different queues that would be transitioned over to VSA. We identified those queues specifically that did not require any actual processing while the HSS team held onto the queues that required a more complex review of cases and the actual process of work. VSA supported us with inquiries where members self-selected that they were looking to confirm receipt of documents or they were requesting us to mail documents to them and general eligibility questions that would otherwise be answered would be obtained through our website or the member rules. HSS retained queues that were targeted towards making payments and access to care questions that members may be having. Members had an opportunity to self-select a queue. We also had them divided into active and retiree members to be able to track the volume from each member group.

Commissioner Follansbee noted the amount of time on the call with the two options, HSS versus VSA, VSA was a couple minutes longer on call time which suggests that maybe either the complexity was more than anticipated, it took longer, or that the VSA still hadn't been quite faced enough to deal with what were thought to be simple questions or that the members when they called didn't quite understand where their calls were going to go or had multiple issues. Sometimes you get asked to make a selection and you have three issues so how do you decide which issue to address? Were calls misdirected in that regard? Olga Stavinshaya-Velasquez replied that this is a complicated issue and I appreciate your delving into the details. She further stated that if VSA identified members calling about an issue that had multiple items or escalations, VSA staff transferred members to the HSS Supervisor team or they were then directly transferred to our team to be able to address. VSA had the opportunity to triage and get them to the appropriate party.

Commissioner Follansbee also asked if members knew who they were talking to, that they were talking to HSS staff or VSA staff. Olga Stavinskaya-Velasquez said members didn't know if they were talking to VSA or HSS staff. HSS wanted the process to be seamless for members who put their trust in HSS. HSS provided training for the offsite call center VSA, and VSA was in contact with Olga directly should any additional questions come up that were not included in the training. Commissioner Follansbee questioned whether HSS should disclose the third-party vendor support to members and wanted to make sure all members get equal access to HSS staff when appropriate.

Commissioner Zvanski asked if HSS tracked calls that were lost. Olga Stavinskaya-Velasquez said HSS did track the calls that were lost and those were the ones where our first mitigation strategy was to have VSA call back the folks that were lost. She noted, that oftentimes what does happen is that when we call members back, they're unavailable or do not answer the call. Commissioner Zvanski said a lot of times people have their phone numbers blocked and asked in cases when HSS couldn't call back if it was because you couldn't access their numbers. Olga Stavinskaya-Velasquez said that could have happened. Commissioner Zvanski asked how many members were not able to be reached when HSS called them back. Olga Stavinskaya-Velasquez did not know how many were not called back. Commissioner Zvanski suggested this situation be tracked in future years.

President Scott noted this was the first time HSS used an outside vendor to support this aspect of Open Enrollment. He asked how the team assessed the result overall. He asked if the support met or exceeded expectations or if HSS would not use this type of support in the future. Olga Stavinskaya-Velasquez HSS we would not have been able to meet our members' needs if we did not have this contract because of our low staffing at the time. And so even though it might not have been the excellent experience that we were expecting to have for our members, we were, at least,

able to connect with them and provide them with a level of support. HSS would not have been able to do that without the VSA contract. President Scott understood there was more work to be done and that HSS would not have been able to do what they were able to accomplish during this open enrollment period without this vendor.

Executive Director Yant commended the entire team for putting this solution together because it was a big challenge and took great effort. The team had a lot of support from the Department of Technology. The Director of Technology, Linda Gerull said she was very impressed with how this all came together in a rather short period and provided a service that was quite remarkable. Executive Director Yant said there were many unintended benefits from that relationship and I think Olga and her team have an understanding that they have to be able to flex and triage to get members to the right place at the right time. That way of thinking and doing business is now embedded in the Member Services process in a new way. Executive Director Yant believed it was a fabulous relationship regardless of it not being perfect. Executive Director Yant commended the team for being able to pull this off in a very effective way—the effort that went into launching a supporting call center, the ongoing learning, and putting into place new procedures were just remarkable.

President Scott noted the lower number of vaccines administered may have been due to more vaccines available in different venues. He said health plan providers or employer-based sites were the primary source of vaccinations a few years ago, and now members can go to any drugstore or supermarket. Carrie Beshears said easy access is a good thing. Commissioner Follansbee added there is a lot of public service messaging around flu season and adding RSV and COVID frankly it's sometimes confusing to the public because you can only offer flu when people are somehow tuned into RSV because there's now a vaccine available for certain subgroups, adults for RSV and the pediatric vaccine was in short supply. This is very confusing to people. Commissioner Follansbee said some of the low participation may just be not only vaccine fatigue but also information overload.

Commissioner Zvanski said community groups in San Francisco, down the Peninsula, and East Bay are also active in flu or COVID clinics and wondered if HSS partnered or was involved with any of the community groups. Carrie Beshears said HSS does not do any direct partnerships with the community locations. HSS does provide information through our materials and online for where someone can go get vaccinated outside of our worksite flu clinics. Commissioner Zvanski said all sites require members to self-report to their health plan. Carrie Beshears said that is correct.

President Scott recognized the intensive work of Open Enrollment and thanked Rey Guillen and his team for all of their hard work during Open Enrollment and the effort to present the report. President Scott marveled at the way Rey Guillen transitioned into the Chief Operations Officer role for the second year and thanked him on behalf of the membership.

Rey Guillen said Open Enrollment is truly a team effort. Every person in our Department plays a critical role in the success of open enrollment from the planning on. Rey thanked the entire team for being team players through the entire process.

PUBLIC COMMENT: None

BREAK: 2:36 - 2:46~

ROLL CALL

President Randy Scott- Present Supervisor Matt Dorsey- Present Commissioner Stephen Follansbee, M.D- Present Commissioner Zvanski- Present

9. <u>BOARD EDUCATION: OPPORTUNITIES FOR FUTURE CONSIDERATION: (Discussion)</u> See pdf Board Education: Opportunities for Future Consideration

Anne Thompson, Senior Account Executive, Aon, and Mike Clarke, Lead Actuary, Aon presented the following items:

- Health Service Board Education Modules-Overview and Key Takeaways
- Driving High Value In Healthcare
- Improving Health Outcomes/ Reducing Utilization
- Efficient and Effective Care Delivery
- Opportunities for Future Consideration
 - High-Quality, Low-Cost Care
 - o Affordability and Sustainability
 - Health and Well-Being
 - Chronic Condition Management
- Conclusion-Takeaways from Today's Discussion
- Upcoming HSB Education Discussions

Commissioner Follansbee said the network size was confusing and asked if we knew the number of providers our members see in each of the health plans. He also asked do the members of the PPO plan, who are paying much more, have access to more providers than, for example, Kaiser Permanente offers. Mike Clarke said the vast majority of Kaiser Permanente members seek care within the Kaiser Permanente medical group, but some care does go outside the network, for example with complex care needs that Kaiser may not be equipped to handle. Kaiser Permanente members have the choice to go out of Kaiser Permanente for emergency care although well over 90% of emergency room visits happen within the Kaiser Permanente environment based on Kaiser's reporting quarterly to SFHSS. Within the Health Net CanopyCare platform, the primary providers are Hill Physicians, John Muir, and Meritage. Blue Shield of California (Trio and Access+) provides data guarterly on the percentage of members aligned with various physician groups in their network. Hill Physicians and Brown and Toland are the dominant physician groups for Blue Shield of California members--within the Blue Shield of California Trio environment, these two physician groups account for probably 80-85% of the total members. John Muir is also a prominent provider. Within Access+, about 60% of Access+ members leverage an IPA physician practice that is also available within Trio. One-third of Access+ members are affiliated with a Sutter Health or Palo Alto Medical Foundation physician and those physician groups are only available within the Blue Shield plans in Access+ and the Non-Medicare PPO plan, but they're not available within Trio.

Commissioner Follansbee said the care management information is misleading because members could look at the PPO network and think it's a huge provider network and worth the extra money but where members receive care is limited to their location. Mike Clarke said members in Hetch Hetchy and Sonora would use systems like Adventist in their area, or out-of-state provider systems if living outside of California. Mike Clarke also pointed out that for 2024 Access+ had the higher rate increase and Trio had a nominal increase but there wasn't a lot of movement between plans. Mike Clarke said within the Bay Area itself there is not going to be a great difference in provider composition in the network in the PPO for Blue Shield versus Access+. There will be when

members go from Access+ to Trio.

President Scott asked if efforts for national cost and data transparency still moving forward. Mike Clarke said the federal Centers for Medicare and Medicaid (CMS) <u>https://www.cms.gov/</u>has two initiatives around data transparency which originally started with hospitals and then broadened its scope. The United States House of Representatives passed additional data transparency legislation this week which will now go before the United States Senate next. As of now, data sets are large and unwieldy, so compliance is possible but it may be more technical compliance instead of information that is clear, concise, and usable. Efforts are underway by data organizations to advance technologies that would allow better insights into the data being released. President Scott said the project is underway but hasn't reached maturation at this point. Mike Clarke agreed and said it's good the regulations are in place and work will continue to make the data sets more usable over time.

Commissioner Follansbee suggested changing one the of drivers of high value in healthcare listed on slide 6. The driver listed as "Reducing Member Utilization" could be reworded to "Optimizing Healthcare Utilization". Reducing member utilization such as early utilization can increase conditions that end up only being managed by brand drugs or inpatient hospitalization or surgeries, making it more expensive in the long run for members. Commissioner Follansbee said "optimizing" aligns with the Board's goals because the Board wants to optimize preventative strategies and increase early healthcare utilization. Anne Thompson appreciated the suggestion and agreed that the intent is to get upstream on preventative care actions like health and well-being options. Commissioner Zvanski said we want to encourage members to properly utilize benefits so they won't need as much in the future. She said early utilization and prevention lead to cost savings in the end so we want to optimize the opportunities for the best care while being cost-effective, affordable, and sustainable.

Commissioner Zvanski pointed out that the copay increases suggestions on slide 15 may not be affordable (\$35 to \$100 copayment), especially for retirees; the increase may reduce members' options to seek care.

Commissioner Follansbee wanted to point out that three high-cost conditions- Chronic Pulmonary Disease (COPD), prenatal/maternity care, and substance use, can all lead to hospitalizations, complicated surgeries, organ transplants, and high-cost medications. All of these conditions can be supported through early optimal utilization of healthcare services.

President Scott said the four employer groups- the San Francisco Unified School District, the San Francisco Community College District, the Superior Court, as well as the City and County of San Francisco represented by its Controller- are invited to present at the February Health Service Board meeting to discuss the budgetary impacts of rising healthcare costs in terms of their operations. President Scott said he requested City Controller, Ben Rosenfeld to attend as he is leaving CCSF service in February, to provide counsel and guidance, lessons learned, coming from his experience over the past several years with this issue and how it has impacted the overall budget of the City and County of San Francisco. Each employer will discuss the impact of increasing healthcare costs on their total operations, not just their budget position.

President Scott thanked Anne Thompson and Mike Clarke for their expertise in delivering the Health Service Board Education Modules over the past months. President Scott said the intent is for Board Education but hoped it has laid a public foundation for what the Board will grapple with in the upcoming rates and benefits cycle.

PUBLIC COMMENT: None

10. HEALTH SERVICE BOARD ANNUAL SELF-EVALUATION AND EMPLOYEE PERFORMANCE OF SFHSS EXECUTIVE DIRECTOR EVALUATION AND TIMELINES FOR PLAN YEAR 2023: (Action)

See pdf of Performance Evaluation of SFHSS Executive Director 2023 Timeline See pdf of Performance Evaluation of SFHSS Executive Director 2023 See pdf of HSB Self-Evaluation for Plan Year 2023 Timeline See pdf of HSB Self-Evaluation for Plan Year 2023

Commissioner Zvanski said the Governance Committee met on December 12, 2023, and approved timelines and evaluations for the Annual Health Service Board Self-Evaluation and Employee Performance of the SFHSS Executive Director.

The Committee made no edits or changes to the Performance Evaluation of SFHSS Executive Director 2023 Timeline or the Performance Evaluation of SFHSS Executive Director 2023.

The Committee made no edits or changes to the HSB Self-Evaluation for Plan Year 2023 Timeline. The Committee modified six questions in the evaluation:

Question 3: "The Board orientation program met your expectations." REMOVED Question 16: "The Board routinely adheres to its own policies." REMOVED the word "routinely." Question 24: "The Board communicates effectively to Plan Members." REMOVED Question 27: "The Board communicates effectively to the City." REMOVED Question 34: "The Board ensures management has the necessary financial and human resources to achieve the organization's goal." REMOVED Question 38: "Where feasible, the Board engages in effective management succession planning. EDIT- Where feasible, the Board may make recommendations regarding management succession planning.

Commissioner Follansbee moved to approve the Performance Evaluation and Timeline for SFHSS Executive Director 2023 and the Health Service Board Self-Evaluation and Timeline for Plan Year 2023. Supervisor Dorsey seconded the motion.

PUBLIC COMMENT: None

VOTE: Ayes: Dorsey, Follansbee, Scott, and Zvanski Noes: None

ACTION: The Health Service Board unanimously approved the Performance Evaluation and Timeline for SFHSS Executive Director 2023 and the Health Service Board Self-Evaluation and Timeline for Plan Year 2023.

REGULAR BOARD MEETING MATTERS

11. <u>REPORTS AND UPDATES FROM CONTRACTED HEALTH PLAN REPRESENTATIVES:</u> (Discussion)

PUBLIC COMMENT: None

Summary of Health Service Board Rules Regarding Public Comment

- 1. There will be an opportunity for general public comment at the beginning of the meeting, and there will be an opportunity to comment on each discussion or action item on the agenda. A member may comment on any matter within the Board's jurisdiction as designated on the agenda.
- 2. A member of the public has up to three (3) minutes to make pertinent public comments.
- 3. Public Comment can be given in-person, remotely, or written.
- 4. Members may submit their comments by email to <u>health.service.board@sfgov.org</u> by 5 pm the day before the meeting start time. These comments will be made part of the official public record and shall be brought to the attention of the Health Service Board. All comments received by the deadline will be forwarded to Board members, summarized and read aloud by the Board Secretary during the specific agenda item, and included in the meeting minutes. In the subject line of your email, indicate the meeting date and the specific agenda item number. If you do not specify an agenda item, your emailed public comment will be read under general comment.
- For those attending remotely, the Commission will hear up to 30 minutes of remote public comment total for each agenda item. Remote public comment from people who have received an accommodation due to disability will not count toward the 30-minute limit.

Knowing Your Rights Under the Sunshine Ordinance

Government's duty is to serve the public, reaching its decision in full view of the public. Commissions, boards, councils, and other agencies of the City and County of San Francisco exist to conduct the people's business. This ordinance assures that deliberations are conducted before the people and that City operations are open to the people's review. For more information on your rights under the Sunshine Ordinance or to report a violation of the ordinance, visit the Sunshine Ordinance Task Force website at http://www.sfgov.org/sunshine.

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 outlined in Chapter 67A of the San Francisco Administrative Code.

Disability Access and Accommodation

Regular Health Service Board meetings are held at Čity 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 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. To obtain a disability-related modification or accommodation, including auxiliary aids or services, to participate in the meeting, please contact Holly Lopez, at 628-652-4646 at least 48 hours before the meeting, except for Monday meetings, for which the deadline is 4:00 pm the previous Friday.

City Hall Room 416 is wheelchair accessible. This meeting will be broadcast and captioned on SFGovTV. Remote public participation is available upon request for individuals who cannot attend in person due to disability. Making a request to participate remotely no later than one (1) hour prior to the start of the meeting helps ensure the availability of the meeting link. Sign Language Interpretation is also available upon request. If requesting remote Sign Language Interpretation, please submit an accommodation request a minimum of 4 business hours prior to the start of the meeting. Allowing a minimum of 48 business hours for all other accommodation requests (for example, for other auxiliary aids and services) helps ensure availability. To request an accommodation, please contact Holly Lopez, holly.lopez@sfgov.org 628-652-4646.

To access the meeting remotely as an accommodation, please *use* <u>December 14, 2023 HSB Regular Meeting WebEx link</u> or call 415-655-0001. Please find instructions at the beginning of this agenda for how to use WebEx for the purposes of remote public comment.

Sensitivity to Chemical-based Products

To assist the City's effort to accommodate persons with severe allergies, environmental illnesses, multiple chemical sensitivity, or related disabilities, attendees at public meetings are reminded that other attendees may be sensitive to various chemical-based products. Please help the City accommodate these individuals.

Location of Materials

If any materials related to an item on this agenda have been distributed to the Health Service Board after the 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 Holly Lopez at 628-652-4646 or email <u>holly.lopez@sfgov.org</u>. The following email has been established to contact all members of the Health Service Board: <u>health.service.board@sfgov.org</u>. Health Service Board telephone number: 628-652-4646

Lobbyist Registration and Reporting Requirements

Individuals and entities influencing or attempting to influence local legislative or administrative action may be required by the San Francisco Lobbyist Ordinance [SF Campaign & Governmental Conduct Code § 2.100] to register and report lobbying activity. For more information about the Lobbyist Ordinance, please contact the San Francisco Ethics Commission at 25 Van Ness Avenue, Suite 220, San Francisco, CA 94102; telephone (415) 252-3100; fax (415) 252-3112; web site www.sfgov.org/ethics.