



HEALTH SERVICE BOARD

CITY & COUNTY OF SAN FRANCISCO

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Diana Guevara
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Commissioner

Rey Guillen
Interim Executive Director
Health Service System

Holly Lopez
Executive Secretary

TEL (628) 652-4646
<http://www.sfhss.org/>

HEALTH SERVICE BOARD

REGULAR MEETING MINUTES DRAFT

Thursday, May 8, 2025, 1:00 p.m.
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 the general public to comment at the beginning of the meeting and on each discussion or action item on the agenda. Each comment is limited to 3 minutes, and the Chair may, at their discretion, limit public comment to less than 3 minutes per member of the public. 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. Remote viewing may not be available due to technology outages.

Watch at 1:00 p.m. on May 8, 2025 (via [SFGovTV schedule](#))

Click the link to join the meeting – [May 8, 2025 HSB Regular Meeting WebEx link](#)

Public Comment Call-In: 415-655-0001 / Access Code: 2661 950 7592 Webinar Password: 1145

Listening to the meeting via phone

1. Dial into **415-655-0001** and then enter **access code** 2661 950 7592#, then # again
2. Press *3 to enter 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.**
3. You will be muted when your time to speak has expired.

Watching the meeting on WebEx

1. Join via hyperlink [May 8, 2025 HSB Regular Meeting WebEx link](#)
2. Webinar Password: 1145
3. **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.
4. 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.
5. 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, health.service.board@sfgov.org and **received by 5 p.m. on Wednesday, May 7, 2025**, 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, and the Board Secretary will note on the record during the specific agenda item that the Board received written public comment on that item and will include that note in the meeting minutes. In the body of your email, indicate the meeting date and the particular agenda item number. If you do not specify an agenda item, your emailed public comment will be read under general comment.

1. **CALL TO ORDER:** 1:02 p.m.

2. **ROLL CALL:**

President May Hao- Excused
Vice President Claire Zvanski- Excused
Commissioner John Cremen- Present
Supervisor Matt Dorsey- Present
Commissioner Diana Guevara- Present
Commissioner Art Howard- Excused
Commissioner Fiona Wilson, MD. Present

3. **GENERAL PUBLIC COMMENT - This is an opportunity for members of the public to comment on 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:

Tracy McCray, President of Police Officers Association, expressed concern about the termination of Meritage and how the disruption in healthcare coverage is affecting city employees, including a lack of notice, difficulties accessing new care, and high costs for emergency care.

Tim O'Brien from the Retired Firefighters and Spouses Association addressed the loss of access to exercise facilities under Blue Shield of California MAPD, urging the Board to compare services provided by UnitedHealthcare.

Katie, a nurse and SEIU 1021 member, expressed concerns about the impact of Blue Shield's changes on nurses and staff, emphasizing the inadequacy of Blue Shield's support in navigating the transition.

Fred Sanchez, President of Protect Our Benefits, acknowledged the ongoing issues with Blue Shield, welcomed new commissioner Diana Guevara, and recognized the contributions of Claire Zvanski, a long-serving commissioner who was not present due to health issues.

Lois Scott, honored Claire Zvanski, highlighting Claire's extensive work for the benefit of members and expressed Claire's presence will be missed but hoped her influence would continue.

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

[See pdf of February 27, 2025, Health Service Board Special Meeting Minutes Approved](#)

[See pdf of March 27, 2025, Health Service Board Special Meeting Minutes Approved](#)

[See pdf of March 31, 2025, Health Service Board Special Meeting Minutes Approved](#)

[See pdf of April 10, 2025, Health Service Board Regular Meeting Minutes Approved](#)

Supervisor Dorsey moved to approve the February 27th, March 27th, March 31st, and April 10th meeting minutes. Commissioner Wilson seconded the motion.

Board Secretary Lopez noted President Hao submitted edits for the April 10, 2025 Regular Meeting minutes.

PUBLIC COMMENT: None

VOTE: Ayes: Cremen, Dorsey, Guevara, and Wilson

Noes: None

ACTION: The Health Service Board unanimously approved the following meeting minutes with edits:

February 27, 2025, Health Service Board Special Meeting Minutes
March 27, 2025, Health Service Board Special Meeting Minutes
March 31, 2025, Health Service Board Special Meeting Minutes
April 10, 2025, Health Service Board Regular Meeting Minutes

5. PRESIDENT’S REPORT: (Discussion)

Chair Cremen shared three updates. Commissioner Zvanski’s term concludes on May 15, 2025. Board Secretary Lopez read a resolution acknowledging Commissioner Claire Zvanski.

Chair Cremen welcomed Commissioner Diana Guevara to the Health Service Board. Commissioner Guevara was appointed by the City Controller, Greg Wagner, the Health Service Board approved the appointment last month, and she was sworn to take her seat for her first meeting today.

Chair Cremen extended thanks to all who supported the search for the new Health Service System Executive Director, a process that began in October 2024 following Abby Yant’s retirement announcement. He thanked CFO Iftikhar Hussain for his work during the transition and the city’s financial system implementation and acknowledged Rey Guillen for his dedication and leadership as interim Director while also maintaining COO responsibilities. He also recognized the Board Secretary, Holly Lopez, and the entire HSS staff for their support and commitment during the transition. Cremen noted that Berkeley Search Consultants assisted in the recruitment process, thanking Julia Morse, Amanda Kreller, and Elton Hall Jr. for their professionalism. He also acknowledged guidance from Paul Green and Christine Salam of the Department of Human Resources and thanked the Health Service Board members for their active participation and discretion. After reviewing over 80 applications, conducting interviews, and making a final selection, Chair Cremen announced the appointment of Rey Guillen as the new Executive Director of the Health Service System, effective March 12, 2025.

Director Rey Guillen thanked the Health Service Board for the opportunity and expressed gratitude for their trust. He conveyed enthusiasm for leading the Health Service System, with a focus on improving the member experience, increasing operational efficiency amid budget cuts, building strong stakeholder relationships, setting clear priorities, and leading with integrity and innovation.

PUBLIC COMMENT:

Fred Sanchez expressed his gratitude on behalf of POB, RECCSF, CARA, and other senior organizations. He acknowledged the lengthy and challenging process, appreciated Rey’s direction, and looked forward to continued collaboration with Rey and the staff. He thanked the Board for maintaining integrity throughout the process.

6. DIRECTOR’S REPORT: (Discussion)

[May 8, 2025, Director’s Report](#)

Rey Guillen, SFHSS Interim Executive Director presented the following items:

- May is Mental Health Awareness Month
- BSC Meritage Update
- Black-Out Notice Continues
- Health Service Board 2025 Election
- HSB Follow-ups
- Division Reports
- Blue Shield of California Medicare Advantage PPO Transition Dashboard

No discussion by Board members.

PUBLIC COMMENT: None

7. SFHSS FINANCIAL REPORT AS OF MARCH 31, 2025: (Discussion)

[See pdf of SFHSS Financial Report as of March 31, 2025, memo](#)

[See pdf of SFHSS Financial Report as of March 31, 2025, presentation](#)

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

- SFHSS Financial Report Highlights
 - Employee Benefit Trust Fund
 - Healthcare Sustainability Fund
 - General Fund Administrative Budget
 - Audit and Compliance

Iftikhar Hussain reported that the Health Service System was projecting a modest \$1.5 million decrease in the year-end Trust Fund balance, primarily due to rate stabilizations using prior surpluses. He noted pharmacy rebate projections of \$23 million and \$6 million in interest income. The Health Sustainability Fund was projected to end the year at \$5.1 million and remained healthy. The General Fund was expected to show a favorable variance of \$260 million due to staffing vacancies. He also mentioned that planning for the financial audit had begun, with results to be shared in November.

Commissioner Cremen responded that the system appeared to be financially stable. Hussain confirmed this, explaining that reserve balances were maintained to manage fluctuations in flex-funded programs and that the adequacy of reserves was a key measure of financial health. He added that Aon played a significant role in the rate-setting process, which influenced reserve levels and guided reserve policy.

PUBLIC COMMENT: None

RATES AND BENEFITS

8. PRESENTATION OF THE RATES AND BENEFITS CALENDAR FOR THE PLAN YEAR 2026: (Discussion)

[See pdf of the HSB Rates and Benefits Calendar for the Plan Year 2026](#)

Director Rey Guillen stated that the rates and benefits process for plan year 2026 was about 60% complete. He emphasized the importance of meeting the upcoming deadline to submit the rates package to the Board of Supervisors and have it assigned to the Budget and Finance Committee by June 24. He noted that the current agenda included renewals for several non-Medicare plans and the results of the life and disability RFP, with the remaining plan renewals, including Medicare plans, scheduled for presentation next month.

PUBLIC COMMENT: None

9. REVIEW HEALTH PLAN 2026 RATE SUMMARY- ACTIVE EMPLOYEES/ NON-MEDICARE: (Discussion)

[See pdf of Health Plans 2026 Rates Summary - Active Employees/Non-Medicare presentation](#)

Mike Clarke, Aon – Lead Actuary, presented the following items:

- Health Plan 2026 Rate Summary
- 2026 Proposed Rate Actions in Today's HSB Meeting — Commentary by Plan
- Membership Distribution by Plan
- Projected Monthly Rates — 2026 Plan Year
- For Comparison — 2025 Plan Year Monthly Rates

Commissioner Cremen expressed concern about the stark difference in the percentage of rate increases between Blue Shield and Health Net. Specifically, Blue Shield is raising rates by 9%, while Health Net is lowering theirs. Commissioner Cremen questioned the sustainability of Health Net's approach. Mike Clarke responded by acknowledging the higher increases in recent years for Blue Shield plans, citing a low double-digit increase (around 10-11%) last year. He explained that Health Net's Canopy Care plan has retained low increases since its introduction due to commitments made during the RFP process. Initially, the plan had a three-year commitment (2022-2024) to maintain low increases. Clarke also highlighted that Health Net uses a fixed cost capitation model for provider compensation, covering roughly 90% of medical expenses, compared to only about one-third of medical costs being capitated in the Blue Shield model. Clarke mentioned that a CanopyCare representative was present to provide further details on the sustainability and compensation model of the Canopy network.

PUBLIC COMMENT: None

10. REVIEW AND APPROVE HEALTH NET CANOPYCARE NON-MEDICARE MEDICAL/RX FLEX-FUNDED HMO PLAN 2026 RATES AND CONTRIBUTIONS: (Action)

[See pdf of Health Net CanopyCare Non-Medicare Medical/Rx Flex-Funded HMO Plan 2026 Rates and Contributions presentation](#)

Mike Clarke, Aon – Lead Actuary, presented the following items:

- Rate Setting Methodology Preface
- Recommendation for HSB Action
- Health Net CanopyCare 2026 HMO Plan Rating — Renewal Summary
- 2026 Monthly Rate Cards for Health Net CanopyCare HMO Plan
- Recommendation for HSB Action

Commissioner Wilson expressed concern about the long-term sustainability of the CanopyCare plan, noting its affordability but questioning its lack of growth. She worried that stagnation could lead to shrinkage, potentially putting members at risk if the plan were to reduce services or cease funding. Chandra Welsh, Chief Operating Officer of Canopy Health, reassured the Board that while Canopy is not currently expanding, it remains committed to serving existing members, particularly through its partnership with UCSF, its primary owner. She explained that UCSF and other partners provide favorable rates, contributing to the plan's cost-effectiveness. Welsh emphasized that UCSF values its relationship with the City and County and intends to continue supporting the plan. She also noted that Canopy's member base tends to be younger and employee-only, which contributes to its stability, and confirmed that the situation is fundamentally different from what happened with Meritage.

Commissioner Cremen asked if UCSF was Canopy Health's only owner. Chandra Welsh clarified that while UCSF is the primary owner, John Muir and Hill Physicians Medical Group are also involved in the ownership.

Commissioner Guevara, new to the role, asked for clarification on Health Net's involvement with the Canopy model and their responsibilities, particularly regarding utilization management. Chandra Welsh explained that Health Net is the filed health plan with the state and contracts with Canopy Health to provide the provider network. Canopy receives capitation for services it delivers, including professional, facility, and ancillary services. Canopy is delegated to manage utilization for those services and works with its network of IPAs and medical groups for day-to-day utilization management, which Canopy oversees. She added that Canopy also has a small clinical team that supports and supplements the utilization management efforts. Mike Clarke added that CanopyCare partners with at least one other insurance organization besides Health Net. During the RFP process in late 2020 and early 2021, two insurers proposed partnerships with CanopyCare, and Health Net was ultimately selected.

Supervisor Dorsey moved to approve the 2026 Health Net Canopy Care HMO plan rate cards as presented, including the adoption of the SB729 required benefit changes. Commissioner Wilson seconded the motion.

PUBLIC COMMENT:

Fred Sanchez, Protect our Benefits, asked who sets the capitation rates for Delta Dental, and what factors determine those rates? He expressed concern that the capitation rate is significantly lower than the actual charges for dental services, making "free" cleanings costly for members and potentially driving dentists away from the network.

VOTE: Ayes: Cremen, Dorsey, Guevara, and Wilson

Noes: None

ACTION: The Health Service Board unanimously approved the 2026 Health Net Canopy Care HMO plan rate cards as presented, including the adoption of the SB729 required benefit changes.

11. REVIEW AND APPROVE BLUE SHIELD OF CALIFORNIA NON-MEDICARE FLEX-FUNDED HMO MEDICAL/RX PLANS 2026 RATES AND CONTRIBUTIONS: (Action)
[See pdf of Blue Shield of California Non-Medicare Flex-Funded HMO Medical/RX Plans 2026 Rates and Contributions](#)

Mike Clarke, Aon – Lead Actuary, presented the following items:

- Rate Setting Methodology Preface
- Recommendation for HSB Action
- BSC HMO Plans 2026 Rating — Renewal Summary
- 2026 Monthly Rate Cards for BSC Access+ HMO and BSC Trio HMO Plans
- Recommendation for HSB Action

Commissioner Cremen asked whether the California Title 28 rule regarding BMI changed from 30 to 40, or if it had always been 40. Mike Clarke responded that, to his understanding, the threshold had always been a BMI of 40, corresponding to Class III (morbid) obesity, though he wasn't completely certain.

Commissioner Wilson asked whether Blue Shield was changing its GLP coverage threshold from a BMI of 35 to 40 and expressed concern about the potential impact on members. Mike Clarke

clarified that the change was part of SFHSS's clinical recommendation, not a Blue Shield policy change, and aligned with Kaiser's broader decision effective January 1, 2025. Of the 350 members using weight loss medications, 250 meet the new BMI 40+ criteria. He confirmed efforts would be made to support the approximately 100 affected members during the transition.

Commissioner Cremen asked whether Blue Shield or other organizations had studied if prescribing weight loss medications earlier (at a lower BMI) could result in long-term savings by preventing progression to more severe obesity. Mike Clarke responded that various studies are underway—some by pharmaceutical companies, others by healthcare organizations—but definitive conclusions are not yet available. He noted it's still too early to fully understand long-term benefits or risks.

Supervisor Dorsey moved to approve the BSC Access+ HMO and Trio HMO 2026 plan year monthly rate cards presented in this material, including design changes for GLP-1 weight loss medications and SB729-required changes to the infertility benefit. Commissioner Wilson seconded the motion.

PUBLIC COMMENT: None

VOTE: Ayes: Cremen, Dorsey, Guevara, and Wilson

Noes: None

ACTION: The Health Service Board unanimously approved the BSC Access+ HMO and Trio HMO 2026 plan year monthly rate cards presented, including design changes for GLP-1 weight loss medications and SB729-required changes to the infertility benefit.

12. REVIEW AND APPROVE BLUE SHIELD OF CALIFORNIA NON-MEDICARE SELF-FUNDED PPO MEDICAL/RX PLAN 2026 RATES AND CONTRIBUTIONS: (Action)

[See pdf of Blue Shield of California Non-Medicare Self-Funded PPO Medical/Rx Plan 2026 Rates and Contributions](#)

Mike Clarke, Aon – Lead Actuary, presented the following items:

- Rate Setting Methodology Preface
- Recommendation for HSB Action
- Non-Medicare PPO and Non-Medicare PPO— Choice Not Available 2026 Plan Rating — Renewal Summary
- 2026 Monthly Rate Cards for Non-Medicare PPO and Non-Medicare PPO—Choice Not Available Plans
- Recommendation for HSB Action

Commissioner Cremen noted that the cost difference between PPO and HMO plans has significantly narrowed over time. Mike Clarke confirmed this trend, explaining that increased enrollment, particularly by around 300 active employees per year, has positively influenced the PPO plan's claims experience. This has contributed to low rate increases for the PPO plan in recent years, while HMO plan rates have seen higher increases.

Commissioner Wilson observed that the healthcare industry is increasingly focusing on total cost of care, which has contributed to the narrowing cost gap between PPO and HMO plans. She emphasized that physicians treat patients consistently regardless of plan type, but affordability is a growing concern across the entire system, not just for the City. She agreed with Commissioner Cremen's earlier point that PPO and HMO plans have become more similar in cost and structure than in the past.

Supervisor Dorsey moved to approve the Non-Medicare PPO Plan and Non-Medicare PPO Plan—Choice Not Available 2026 plan year monthly rate cards presented in this material, including design changes for GLP-1 weight loss medications and SB729 changes to the infertility benefit. Commissioner Wilson seconded the motion.

PUBLIC COMMENT: None

VOTE: Ayes: Cremen, Dorsey, Guevara, and Wilson

Noes: None

ACTION: The Health Service Board unanimously approved the Non-Medicare PPO Plan and Non-Medicare PPO Plan—Choice Not Available 2026 plan year monthly rate cards presented in this material, including design changes for GLP-1 weight loss medications and SB729 changes to the infertility benefit.

13. SFHSS STAFF RECOMMENDATION FOR THE REQUEST FOR PROPOSAL FOR LIFE AND DISABILITY BENEFITS (GROUP LIFE AND LONG-TERM DISABILITY [EMPLOYER-PAID]; SUPPLEMENTAL LIFE AND ACCIDENTAL DEATH & DISMEMBERMENT AND SHORT-TERM DISABILITY [VOLUNTARY, EMPLOYEE-PAID]) BENEFITS FOR 2026 PLAN YEAR (Action):
[See pdf of SFHSS Staff Recommendation for RFP for Life and DI for PY 2026](#)

Michael Visconti, SFHSS Contracts Administration Manager and Mike Clarke, Aon - Lead Actuary presented the following items:

- Staff Recommendation
- Roles and Responsibilities
- Scope
- Objectives, Targeted Improvements, Outcomes and Qualified Respondents
- RFP Process, Scoring Criteria and Minimum Qualifications
 - Non-Financial, Oral Interview and Financial Scores
 - Annualized Premiums by Respondent
- 2026 Plan Rates—Recommended Respondent
- Next Steps
- Recommendation for HSB Action

No discussion by the Board.

Commissioner Wilson moved to approve SFHSS' request for proposal recommendation for Life and Disability benefits group (group life and long-term disability (employer paid); Supplemental life and accidental death and dismemberment and short-term disability (voluntary, employee paid) for plan year 2026) presented on page 25 of the presentation. Commissioner Guevara seconded the motion.

PUBLIC COMMENT:

Fred Sanchez, Protect Our Benefits, asked how eligibility is determined for the employer-paid benefit being discussed. He also inquired about how many people it applies to and questioned why more individuals wouldn't enroll in it if the employer is covering the cost.

VOTE: Ayes: Cremen, Dorsey, Guevara, and Wilson

Noes: None

ACTION: The Health Service Board unanimously approved, effective January 1, 2026:

1. Life Insurance Company of North America [New York Life] to provide Group Life and Long-Term Disability Insurance to eligible Employees (100% employer-paid), and offer New York Life Supplemental Life and Accidental Death & Dismemberment and Short-Term Disability Insurance (voluntary, 100% employee-paid) to eligible Employees through our third-party benefits administrator for voluntary benefits;
2. Discontinue offering Hartford Life and Accident Insurance Company [Hartford] Group Life and Long-Term Disability Insurance to eligible Employees (100% employer-paid);
3. Discontinue offering Hartford Supplemental Life and Accidental Death & Dismemberment (voluntary, 100% employee-paid) and ManhattanLife Insurance and Annuity Company Short-Term Disability Insurance (voluntary, 100% employee-paid) to eligible Employees through our third-party benefits administrator for voluntary benefits; and
4. Program rates for the 2026 plan year for rates presented in this material by New York Life.

REGULAR MEETING MATTERS

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

No reports or updates.

PUBLIC COMMENT: None

15. ADJOURNMENT: 3:12 p.m.

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

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; the Chair has the discretion to limit public comment to less than 3 minutes per member of the public.
3. Public Comment can be given in-person, remotely, or written.
4. Members may submit their comments by email to health.service.board@sfgov.org by 5 p.m. 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 and the Board Secretary will note on the record during the specific agenda item that the Board received written public comment on that item, and will include that note 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.
5. Remote public comment from people who have received 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 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 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. There are elevators and accessible restrooms located on every floor. **Wheelchair-accessible entrances are located on Van Ness Avenue and Grove Street. Please note the wheelchair lift at the Goodlett Place/Polk Street is temporarily not available.** After multiple repairs that were followed by additional breakdowns, the wheelchair lift at the Goodlett/Polk entrance is being replaced for improved operation and reliability. We anticipate having a functioning lift after the completion of construction in May 2025.

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 [May 8, 2025 HSB Regular Meeting WebEx link](#) 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 holly.lopez@sfgov.org. The following email has been established to contact all members of the Health Service Board: health.service.board@sfgov.org.

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.