



HEALTH SERVICE BOARD

CITY & COUNTY OF SAN FRANCISCO

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Rey Guillen
Executive Director
Health Service System

Holly Lopez
Executive Secretary

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

HEALTH SERVICE BOARD

MEETING MINUTES DRAFT

Thursday, April 9, 2026, 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 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 April 9, 2026 (via [SFGovTV schedule](#))

Click the link to join the meeting – [April 9, 2026 HSB Regular Meeting WebEx link](#)

Public Comment Call-In: 415-655-0001 / Access Code: 2664 824 2261 Webinar Password: 1145

Listening to the meeting via phone

1. Dial **415-655-0001** and then enter **access code** 2664 824 2261#, 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 [April 9, 2026 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 4 p.m. on Wednesday, April 8, 2026**, 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:** 1:09 p.m.

2. **ROLL CALL:**

President Mary Hao- Present
Vice President Art Howard- Present
Commissioner John Cremen- Present
Supervisor Matt Dorsey- Present
Commissioner Diana Guevara- Present
Commissioner Gus Vallejo- Present
Commissioner Fiona Wilson, MD.- Excused

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:

Dennis Kruger, Active and Retired Firefighters and Spouses, expressed concern that more retirees were being denied Blue Shield benefits, noting that many did not understand the system and accepted denials without challenge. He urged the Board to keep asking health plans questions during the rates and benefits approval process.

Fred Sanchez, President of Protect Our Benefits, expressed his appreciation with the Budget and Finance Inquiry from Supervisor Chan and noted hearing complaints about long phone wait times that differed from his own experience. He stated that he had been concerned about the city's budget and potential staff cuts at HSS.

Juanita Stockwell, Retired San Francisco Police Officer, Vice President of Veterans Police Officers Association (VPOA), member of Protect Our Benefits, requested SFHSS' Blue Shield contract without redactions. She also raised concerns about a retiree who had been repeatedly denied coverage for necessary knee injections and was paying out of pocket, and she reported that a physical therapist had refused her care due to Blue Shield's reputation for poor payment.

REGULAR BOARD MEETING MATTERS

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

[See pdf of March 6, 2026, HSB Governance Committee Meeting Minutes Approved](#)

[See pdf of March 12, 2026, HSB Regular Meeting Minutes Draft Approved](#)

PUBLIC COMMENT: None

VOTE: Ayes: Cremen, Dorsey, Hao, Howard, Guevara, and Vallejo Noes: None

ACTION: The Health Service Board unanimously approved the March 6, 2026, HSB Governance Committee Meeting Minutes and the March 12, 2026, HSB Regular Meeting Minutes.

5. **PRESIDENT'S REPORT: (Discussion)**

No report this month.

6. DIRECTOR'S REPORT: (Discussion)

[See pdf of April 9, 2026, Director's Report Packet](#)

[See pdf of April 9, 2026, Director's Report Presentation](#)

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

- Board of Supervisors Hearing
- Commissioner Streamlining Task Force Update
- Black-Out Periods Continue
- Follow-Ups from March Health Service Board Meeting
- Personnel Updates
- Finance Updates

Executive Director Guillen explained that the Mayor's Budget Office had directed HSS to identify two additional positions for elimination, bringing the total reduction to three. He reported that affected staff had been notified on April 6, 2026 that their last day with the department is scheduled for June 5, 2026. He noted that the cuts included the City's two internal Employee Assistance Program (EAP) counselor positions and one finance position. He noted that some EAP duties would shift to the outside vendor, but their work could not be fully replicated. He also stated that the loss of more than 6,000 annual work hours, combined with vacant positions, would affect HSS's ability to serve members. President Hao asked whether more instructions were expected from the Mayor's Budget Office. Executive Director Guillen responded that the recent request should have been the final one for that phase. He said the Mayor will submit his budget to the Board of Supervisors in June, and the Board can bring further adjustments.

Vice President Howard said he had found it difficult to believe that the city no longer had internal EAP counselors, noting the importance of their work and expressing hope that the positions could return when financial conditions improved. He acknowledged the broader budget cuts affecting multiple agencies and emphasized planning for the future.

Executive Director Guillen responded that eliminating the EAP counselor positions had been a difficult decision driven by mandated budget cuts. He explained that the reductions lowered HSS's staffing levels (FTE 51.9 to 48.9 total for the department, of which 36.65 positions are charged to the General Fund) and placed additional strain on member services, which already struggled to meet call demand. He stated that the EAP roles were the only positions not tied to mandated programs and, therefore, had been the only option for elimination, while expressing hope that they could be added back in the future.

President Hao asked how the data from the health value initiative study would be used. Executive Director Guillen explained that the data had been used to compare HSS programs to others in the marketplace, showing strong program value, and that the information supported ongoing evaluation of benefits. President Hao added that the data could help inform long-term sustainability efforts.

PUBLIC COMMENT:

Jeannette Longtin, Employee Assistance Program, Senior EAP Counselor, active member of IFPTE Local 21, expressed deep concern about the City's decision to cut jobs at HSS, noting that the reductions amounted to a significant loss for the Well-Being Division and effectively ended the longstanding internal EAP program. She warned that removing the internal EAP would harm employees who relied on its specialized support and asked the Board to urge City leaders to stop the proposed layoffs.

Tim Lieb, Senior Vice President of the Commercial Markets for Blue Shield of California, said that Blue Shield had addressed concerns raised at the Budget and Finance Committee hearing by improving phone handling, prior authorization, and oncology outreach. He noted that the company heard retirees' concerns, committed to responding to Supervisor Chan's requests, and already reached out to schedule a meeting with Protect Our Benefits. He emphasized Blue Shield's commitment to continuous improvement and to supporting City employees, retirees, and their families.

Allen Zhang, SFHSS Accountant II, active member of IFPTE Local 21, expressed concern about the City's decision to cut jobs for himself and his co-workers, explaining that the elimination of his accounting position would affect both the department's operations and his ability to support his family. He noted his long service to HSS and described the layoffs as deeply personal and difficult for him and his coworkers.

Alicia Flores, staff representative of Local 21, expressed disappointment that HSS had eliminated employee positions while continuing to contract work to outside vendors, arguing that internal staff provided unmatched expertise and support. She warned that the cuts would have long-term consequences for the City's workforce and urged the Board to push City leaders to stop the proposed layoffs.

Rudy Faltus, United Educators of San Francisco Retired Division, said she had been upset about the planned staff reductions, arguing that layoffs were the wrong approach when the city had other ways to raise revenue. She emphasized that employee health and retiree support should have been priorities and urged the city not to cut positions that served workers and retirees.

Fred Sanchez, Protect Our Benefits, expressed concerned about how skilled nursing placements were handled and questioned why Blue Shield could provide facility lists while Kaiser could not. He also criticized the city's long-term practice of leaving positions vacant and then eliminating them, arguing that resources should instead come from reviewing high salaries in contracted organizations. He supported restoring the affected union positions.

WRITTEN PUBLIC COMMENT:

Teresa Palmer, shared the central issue brought to the Board of Supervisors hearing was the pattern of care denials by Blue Shield, not administrative or billing related errors. She highlighted several cases shared at the hearing as examples of harmful delays and stated that such denials created serious risks for retirees and burdened families and care providers. She said the appeals and authorization process functioned as an obstacle to needed services and warned that these practices discouraged providers from working with Blue Shield, ultimately endangering all retirees who relied on the plan.

7. SFHSS FINANCIAL REPORT AS OF FEBRUARY 28, 2026: (Discussion)

[See pdf of SFHSS Financial Report as of February 28, 2026, memo](#)

[See pdf of SFHSS Financial Report as of February 28, 2026, presentation](#)

Teresa Tan, SFHSS Chief Financial and Affordability Officer presented the following items:

- Employee Benefit Trust Fund
- Healthcare Sustainability Fund
- General Fund Administrative Budget

No Board discussion.

PUBLIC COMMENT: None

RATES AND BENEFITS

8. PRESENTATION OF THE RATES AND BENEFITS CALENDAR FOR THE PLAN YEAR 2027: (Discussion)

[See pdf of Rates and Benefits Calendar for the Plan Year 2027](#)

No Board discussion.

PUBLIC COMMENT: None

9. REVIEW KAISER PERMANENTE HMO PLANS 2025 EXPERIENCE: (Discussion)

[See pdf of Kaiser Permanente HMO Plans 2025 Experience](#)

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

- Introduction
- Kaiser HMO Plans 2025 Experience — Insights

Commissioner Cremen asked whether the 2027 rate increase would be similar to 2026. Mike Clarke said he expected the 2027 increase to be lower but noted that nothing would be certain until Kaiser released its rates. When Commissioner Cremen asked about timing, Mike Clarke confirmed that negotiations would begin once Kaiser provided its rates.

President Hao asked whether the data could help inform new strategies to improve member wellness and screening rates. Executive Director Guillen said the data showed strong member participation in preventive care and higher costs driven by richer benefits, but he noted that most findings were informational rather than actionable. President Hao suggested hearing from Carrie Beshears in the future, and Executive Director Guillen agreed to schedule an educational item.

PUBLIC COMMENT:

[Fred Sanchez, Protect Our Benefits](#), asked who handled the detailed negotiations behind rate increases, including how costs tied to services and new labor contracts were evaluated. He also questioned whether HR or Aon conducted the main negotiation work and how they separated different cost drivers when setting contract rates.

10. REVIEW AND APPROVE HEALTH NET CANOPYCARE NON-MEDICARE MEDICAL/RX FLEX-FUNDED HMO PLAN 2027 RATES AND CONTRIBUTION: (Action)

[See pdf of HN Non-Medicare Medical/Rx Flex-Funded HMO Plan 2027 Rates and Contributions](#)

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

- Rate Setting Methodology Preface
- Health Net CanopyCare 2027 HMO Plan Rating — Renewal Summary
- 2027 Monthly Rate Cards for Health Net CanopyCare HMO Plan
 - Active Employees (93/93/83 and 100/96/83 contribution strategies)
 - Non-Medicare Retirees (per City Charter employer contribution guidance)
- Recommendation for HSB Action

President Hao noted that the rate figures were significant, especially after several years of modest changes. Mike Clarke explained that the plan had seen decreases or very small increases in

recent cycles, starting out the first renewal was a 10.4% decrease. There was a 3.7% increase in 2024, only 1% increase in 25 and a 0.3% increase in 26. He said higher large claim costs had driven the latest projected increase and were expected to continue, according to Health Net.

Vice President Howard asked why the plan was not taking on new business. Mike Clarke explained that the organization had been undergoing an ownership transition and was currently focused on its two primary clients, SFHSS and the University of California. He added that while they remained committed to those clients, he hoped they would consider expanding once the transition settled.

Commissioner Cremen asked for Aon's view on the stability of Health Net Canopy Care. Mike Clarke explained that Health Net was a large national administrator and that Canopy Care, owned by UCSF and affiliated physicians, remained focused on sustaining its Bay Area network. He said past evaluations favored Health Net because it allowed Canopy's providers to make care decisions, and he indicated that both organizations appeared committed to continuing the partnership.

Commissioner Cremen moved to approve the Health Net CanopyCare Non-Medicare Medical/Rx Flex-Funded HMO Plan 2027 Rates and Contributions. Commissioner Guevara seconded the motion.

PUBLIC COMMENT: None

VOTE: Ayes: Cremen, Dorsey, Hao, Howard, Guevara, and Vallejo Noes: None

ACTION: The Health Service Board unanimously approved the Health Net CanopyCare Non-Medicare Medical/Rx Flex-Funded HMO Plan 2027 Rates and Contributions.

11. REVIEW AND APPROVE BLUE SHEILD OF CALIFORNIA (BSC) HMO AND PPO HEALTH PLANS 2027 STABILIZATION RESERVE ACTIONS: (Action)

[See pdf of Blue Shield of California \(BSC\) HMO and PPO Health Plans 2027 Stabilization Reserve Actions](#)

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

- Introduction—Health Plan Reserves Background
- Rate Stabilization Recommended Actions by Plan
 - Blue Shield of California (BSC) Flex-Funded HMO Plans
 - BSC Self-Funded Non-Medicare PPO Plan
- Recommendations for HSB Action

President Hao asked why the deficit continues to grow and whether anything is being missed or could be done better. Mike Clarke explained that all Blue Shield plans are seeing a sharp rise in large medical claims for 2025, driven by chronic conditions and preventive care gaps from the pandemic, along with some rare or unpredictable high-cost events and rising pharmacy costs. He noted that Aon and SFHSS continue working together on strategies to promote preventive care and wellness to mitigate future high-cost claims. President Hao reiterated concern about the trend and asks what more could be considered. Clarke responded that it will require ongoing collaboration to explore ideas, since no one wants to see claims consistently running above budget.

PUBLIC COMMENT:

Fred Sanchez, Protect Our Benefits, expressed concern about concern that the approval process was moving too quickly, allowing carriers to submit low bids knowing they could later return with much higher cost adjustments. He felt the \$17.5 million carry-forward showed the projections had been inaccurate and resembled the higher costs previously proposed by United. He argued that with modern AI and available data, insurers should be able to accurately predict claims, and unexpected cost increases should not occur. He expressed frustration that the Board kept approving these adjustments without pushing back, which he believed contributed to continued large deficits.

Juanita Stockwell, Retired San Francisco Police Officer, Vice President of Veterans Police Officers Association (VPOA), member of Protect Our Benefits, expressed concern about the current plan not working, stating that members had been happier under UnitedHealthcare, where she felt services and medications were not being denied, and she urged the Board to consider switching back by allowing United to bid again

President Hao moved to approve the Blue Shield of California (BSC) HMO and PPO Health Plans 2027 Stabilization Reserve Actions:

In congruence with the Stabilization Fund Policy, approve the use of one-third of the December 31, 2025, stabilization fund balances in plan year 2027 plan rates to apply proportionately between active employees and non-Medicare retirees as follows:

1. BSC HMO plans: apply a Deficit amount of \$11,519,000 (or one-third of \$34,557,000) towards buy-up of rates across all rating tiers for plan year 2027; and
2. BSC Non-Medicare PPO plan: apply a Surplus amount of \$518,000 (or one-third of \$1,554,000) towards buy-down of rates across all rating tiers for plan year 2027.

Vice President Howard seconded the motion.

VOTE: Ayes: Cremen, Dorsey, Hao, Howard, Guevara, and Vallejo Noes: None

ACTION: The Health Service Board unanimously approved the Blue Shield of California (BSC) HMO and PPO Health Plans 2027 Stabilization Reserve Actions:

In congruence with the Stabilization Fund Policy, approve the use of one-third of the December 31, 2025, stabilization fund balances in plan year 2027 plan rates to apply proportionately between active employees and non-Medicare retirees as follows:

- 1. BSC HMO plans: apply a Deficit amount of \$11,519,000 (or one-third of \$34,557,000) towards buy-up of rates across all rating tiers for plan year 2027; and**
- 2. BSC Non-Medicare PPO plan: apply a Surplus amount of \$518,000 (or one-third of \$1,554,000) towards buy-down of rates across all rating tiers for plan year 2027.**

12. REVIEW AND APPROVE 2027 FULLY INSURED ACTIVE AND RETIREE DENTAL PLANS RATES AND CONTRIBUTIONS (DELTA DENTAL RETIREE PPO PLAN, DELTACARE USA HMO PLANS, AND UNITEDHEALTHCARE HMO PLANS): (Action)

[See pdf of Fully Insured Active and Retiree Dental 2027 Plans Rates and Contributions \(Delta Dental Retiree PPO Plan, DeltaCare USA HMO PPO Plans, and UnitedHealthcare HMO Plans\)](#)

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

- Rate Setting Methodology Preface
- 2027 Fully Insured Active and Retiree Dental Plans Rates and Contributions — Renewal Summary and Rating Details
 - Delta Dental Retiree PPO

- DeltaCare USA Dental HMO (actives and retirees)
- UnitedHealthcare (UHC) Dental HMO (actives and retirees)
- Recommendation for Health Service Board (HSB) Action

Vice President Howard expressed that the main complaints received had been about Delta Dental coverage and confirmed that the current active dental RFP would apply to coverage for plan year 2027. Mike Clarke clarified that only the 2027 rate increases were under consideration and no coverage changes were included. President Hao noted that a recommendation on active dental RFP would be reviewed the following month.

Vice President Howard moved to approve the Fully Insured Active and Retiree Dental 2027 Plans Rates and Contributions (Delta Dental Retiree PPO Plan, DeltaCare USA HMO PPO Plans, and UnitedHealthcare HMO Plans). Supervisor Dorsey seconded the motion.

PUBLIC COMMENT:

Juanita Stockwell, Retired San Francisco Police Officer, Vice President of the Veterans Police Officers Association (VPOA), member of Protect Our Benefits, expressed concern about Delta Dental’s poor coverage, noting that many dentists refused to accept it, required full upfront payment, and left her reimbursed far below her costs.

VOTE: Ayes: Cremen, Dorsey, Hao, Howard, Guevara, and Vallejo Noes: None

ACTION: The Health Service Board unanimously approved the Fully Insured Active and Retiree Dental 2027 Plans Rates and Contributions (Delta Dental Retiree PPO Plan, DeltaCare USA HMO PPO Plans, and UnitedHealthcare HMO Plans).

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

Commissioner Cremen asked why Kaiser was not providing requested aggregate data on skilled nursing placements. Denise Rodriguez explained that skilled nursing placement was highly complex, driven by clinical need, physician–member decisions, facility availability, and family location, making individual cases too varied for simple reporting. Commissioner Cremen and Vice President Howard still asked for basic aggregate numbers on how many members stayed in or had to leave San Francisco.

PUBLIC COMMENT:

Fred Sanchez, Protect Our Benefits, expressed concern that many Kaiser members were being placed in skilled nursing facilities outside San Francisco, often without an advocate like a friend or family member, and sometimes because lower cost options were chosen by default. He emphasized the need for clearer data on placements, stronger patient advocacy, and better information about available facilities in the city.

14. ADJOURNMENT: 3:10 p.m.

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

Summary of Health Service Board Rules Regarding Public Comment

1. There will be an opportunity for 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 [April 9, 2026 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 <https://sfethics.org/>

ChatGPT and Microsoft CoPilot AI were used to summarize and clarify discussion points in the agenda.