



HEALTH SERVICE BOARD

CITY & COUNTY OF SAN FRANCISCO

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Commissioner

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, May 14, 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 May 14, 2026 (via [SFGovTV schedule](#))

Click the link to join the meeting – [May 14, 2026 HSB Regular Meeting WebEx link](#)

Public Comment Call-In: 415-655-0001 / Access Code: 2663 515 0700 Webinar Password: 1145

Listening to the meeting via phone

1. Dial **415-655-0001** and then enter **access code** 2663 515 0700#, 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 14, 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, May 13, 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:** 1:05 pm

2. **ROLL CALL:**

President Mary Hao- Present
Vice President Art Howard- Present
Commissioner John Cremen- Present
Supervisor Matt Dorsey- Excused
Commissioner Diana Guevara- Excused
Commissioner Gus Vallejo- Present
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:

Jeannette Longtin, Employee Assistance Program Senior EAP Counselor and active member of IFPTE Local 21, expressed concern that her position and that of her colleague had been slated for contracting out to ComPsych. She stated that it was her belief the layoffs violated the Local 21 MOU. She expressed concern that the City's EAP services would be degraded under a contractor. She urged the Commission to stop the layoffs and to require SFHSS to follow the contract.

Alicia Flores, IFPTE Local 21 Representative, expressed concern about contracting out EAP work to a third-party vendor and stated that if funding was available for the ComPsych contract, funding should also be available to maintain internal EAP positions. The speaker reiterated that the MOU prohibits displacing bargaining unit members by contracting out. She reported that the union's attempts to meet with the department had been redirected to DHR. The speaker urged the Commission to stop the layoffs and ensure that the department complied with the contracting out provisions of the MOU.

REGULAR BOARD MEETING MATTERS

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

[See pdf of April 9, 2026, HSB Regular Meeting Minutes Draft to be Approved](#)

[See pdf of April 24, 2026, HSB Governance Committee Meeting Minutes Approved](#)

Commissioner Cremen moved to approve the April 9, 2026, HSB Regular Meeting Minutes Draft and the April 24, 2026, HSB Governance Committee Meeting Minutes. Commission Wilson seconded the motion.

PUBLIC COMMENT: None

VOTE: Ayes: Cremen, Hao, Howard, Vallejo, and Wilson Noes: None

ACTION: The Health Service Board unanimously approved the April 9, 2026, HSB Regular Meeting Minutes and the April 24, 2026, HSB Governance Committee Meeting Minutes.

5. PRESIDENT'S REPORT: (Discussion)

President Hao noted that the board had a full agenda for the day and expected another substantial agenda the following month. She encouraged the board to engage in the necessary discussions to ensure thoughtful decision making- on upcoming rates and benefits matters so that the board could make decisions members could support.

PUBLIC COMMENT: None

6. DIRECTOR'S REPORT: (Discussion)

[See pdf of May 14, 2026, Director's Report](#)

[See pdf of May 14, 2026, Director's Report presentation](#)

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

- SFHSS Annual Member Survey
- Update on BOS Hearing on Blue Shield of CA Care Denials
- Mental Health Awareness Month
- Black-Out Periods Continue
- Follow-Ups from April Health Service Board Meeting
- Operations Update

Vice President Howard asked Director Guillen whether the only remaining opportunity to address the elimination of the two EAP counselor positions was through the Board of Supervisors' Budget and Finance Committee. He sought clarification on whether any action remained within the Health Service Board's authority or whether the decision making process had already moved beyond the Board's control. Director Guillen confirmed that the budget had already been submitted to the Mayor's Budget Office and would next be presented by the Mayor to the Board of Supervisors' Budget and Finance Committee on May 10. He stated that no further action was available at the Health Service Board level. Vice President Howard noted his experience working with the peer-driven employee assistance unit and emphasized the value that Jeanette Longtin and Doug Cyr provided, especially during Mental Health Awareness Month. He stated that while ComPsych offered useful services, it operated more as a "faceless" vendor, and the internal EAP counselors helped address gaps in that service. He expressed concern that removing internal counselors eliminated one of the "no wrong door" access points for employees seeking support. He hoped the positions could be restored in the future when financial conditions improved and commented that it was difficult to understand how a city of this size would have no full-time internal EAP counselors. He concluded by confirming that the Board of Supervisors' Budget and Finance Committee would be the venue for any remaining recourse. Director Guillen confirmed that he shared the concerns expressed and explained that only a small portion of SFHSS services were considered discretionary under the City Charter and various MOUs. He stated that internal EAP services were the only discretionary area with dedicated staffing and that, given the department's limited size and extensive mandated responsibilities, eliminating the positions had been the only viable—though difficult—option available. Vice President Howard responded by emphasizing that mental health support functions as suicide prevention and that having multiple access points for assistance was critical. He noted the importance of retaining as many resources as possible and thanked the Director for the explanation.

President Hao thanked Rin for the updated dashboard and stated that the revisions made sense. She noted that while the board had previously reviewed numerous operational metrics, it was not always clear how they connected. She stated that integrating the charts and graphs into a unified dashboard helped the board better understand the overall picture.

PUBLIC COMMENT:

Teresa Palmer, representing Protect Our Benefits (POB), requested information on tracking Kaiser out-of-county Skilled Nursing Facility (SNF) admissions and asked where the underlying data could be found. Director Guillen stated that the information was included in the month's Director's Report packet and confirmed that staff would also email it to her. The speaker responded that the packet described the process but did not include the data itself. She requested Kaiser's discharge practices be reviewed. The speaker also expressed concern that POB had not received substantive follow-up from the April 24 meeting with Blue Shield, noting that only required denial rate data had been provided, and emphasized the need for actions to reduce inappropriate denials.

7. SFHSS FINANCIAL REPORT AS OF MARCH 31, 2026: (Discussion)

[See pdf of SFHSS Financial Report as of March 31, 2026, memo](#)

[See pdf of SFHSS Financial Report as of March 31, 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

GOVERNANCE COMMITTEE MEETING MATTERS

8. REVIEW AND APPROVE THE RECOMMENDED CHANGES TO THE ANNUAL HEALTH SERVICE EVALUATION AND THE ANNUAL EMPLOYEE PERFORMANCE EVALUATION: (Action)

[See pdf of Annual HSB Self-Evaluation Summary of Recommended Changes](#)

[See pdf of Annual HSB Employee Performance Summary of Recommended Changes](#)

Governance Committee Chair Wilson reported that the committee reviewed and updated the annual commissioner evaluation and employee performance for the executive director evaluation to better reflect current work, removing duplicative and outdated questions and modestly shortening the questionnaire. Changes included

- Commissioner Survey
 - The rating scale and overall language were retained; the “neutral” option label was changed to “neither disagreed nor agreed” to improve clarity while preserving comparability over time.
 - Adding a calendar of educational items for commissioners was proposed to provide advanced visibility and support a broad curriculum.
- Employee Performance evaluation,
 - The committee updated wording to match current activities and instituted a mid-year survey (in addition to year end) to provide earlier feedback, given the leader's mid-year start.
 - The term “client” was clarified to mean service to employers and members.

Vice President Howard moved to approve the Annual HSB Self-Evaluation Recommended Changes and the Annual HSB Employee Performance Recommended Changes. Commissioner Cremen seconded the motion.

PUBLIC COMMENT: None

VOTE: Ayes: Cremen, Hao, Howard, Vallejo, and Wilson Noes: None

ACTION: The Health Service Board unanimously approved the Annual HSB Self-Evaluation Recommended Changes and the Annual HSB Employee Performance Recommended Changes presented today.

RATES AND BENEFITS

9. 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](#)

Rey Guillen, SFHSS Executive Director reported that the board had received an amended 2027 Plan Year Rates and Benefits calendar. He noted that, by the end of the meeting, the board would be nearing completion of its six-month review cycle for premiums, administrative rates, and benefit adequacy, as required by the City Charter. He reminded the board that any revisions adopted in June would require approval by a three-fourths vote of the Board of Supervisors in July.

He explained that approval of the Blue Shield non-Medicare HMO and PPO rates had been moved to the June meeting because staff needed additional preparation time, which would result in a heavier agenda next month. He outlined the day's planned items: an overview of the health plan negotiation process, a staff recommendation to discontinue the Kaiser Multi-Region plans after 2026, the results of the RFP for the active employee PPO dental plan, and—depending on board action—the renewal for the Delta Dental PPO plan.

Executive Director Guillen stated that the June agenda would also include renewals for the Blue Shield non-Medicare Access+ and Trio HMO plans, the Blue Shield non-Medicare PPO plan, the Blue Shield Medicare Advantage PPO plan, and the Kaiser non-Medicare and Senior Advantage plans, with the possibility of Kaiser multi-region renewals depending on the board's decision on that agenda item.

PUBLIC COMMENT: None

10. BOARD EDUCATION: SFHSS HEALTH PLAN RATES NEGOTIATION PROCESS: (Discussion)

[See pdf of Board Education: Health and Welfare Plan Rates Negotiation Process](#)

Rey Guillen, SFHSS Executive Director and Mike Clarke, Lead Actuary-Aon presented the following items:

- Introduction
- How Proposed Rates Are Set
- Who Owns the Risk Determines What Can Be Negotiated
- Example of What Can Be Negotiated

- Summary of Negotiations Process
- Post Negotiations: Rates Presented to HSB

PUBLIC COMMENT: None

Break: ~2:00- 2:18 pm

11. STAFF RECOMMENDATION TO DISCONTINUE KAISER PERMANENTE MULTI-REGION MEDICAL/RX FULLY INSURED RETIREE HMO PLANS AFTER 2026: (Action)
[See pdf of Staff Recommendation to Discontinue Kaiser Permanente Multi-Region Medical/Rx Fully Insured Retiree HMO Plans After 2026](#)

Rin Coleridge, SFHSS Chief Operating and Experience Officer, presented the following items:

- Introduction
- Results of Evaluation
- Administrative Challenges
- Transition Resources
- Recommendation Summary

Commissioner Wilson stated that the proposal effectively discontinued a pilot program that had not grown as expected. She noted that enrollment numbers were very low and that maintaining the plans required a disproportionate amount of staff time. After reviewing the geographic access information, she observed that travel distances to providers were not unique to this group of retirees and were comparable to limitations experienced by anyone living in rural or suburban areas. She stated that access issues did not appear significantly different under the proposed change. She acknowledged the cost impacts to members but emphasized that the operational cost to SFHSS was substantial and could not be overlooked. She expressed support for the staff recommendation to discontinue the plans.

Commissioner Cremen asked for clarification that, if the recommendation were approved, Kaiser plans would only be available in California. Rin Coleridge confirmed that this was correct and stated that Kaiser was not offered elsewhere for SFHSS members except in the three multi-region states being considered for discontinuation.

President Hao stated that the analysis was thorough and well researched. She noted that the zip code review was particularly helpful. She observed that, based on the figures presented, most affected members—especially those in Medicare—would experience either no change or a reduction in premiums if the recommendation were approved. She commented that although changing plans could be challenging for members, the long-term effect for Medicare enrollees would generally be cost savings.

Vice President Howard noted that approximately 72–75 percent of affected members would pay the same or lower premiums and stated that the primary challenge for members would be the transition itself, including changes in plans and providers. He asked whether the high-touch concierge support previously provided by Blue Shield during the Medicare transition would also be available for this change. Rin Coleridge confirmed that Blue Shield would provide concierge services. Rin Coleridge stated that once members were officially enrolled, Blue Shield would conduct outreach calls and

assist with prescription transfers, provider searches, and general plan navigation. Rin Coleridge added that SFHSS would communicate frequently with members and direct them to the dedicated support line.

Commissioner Wilson moved to discontinue offering Kaiser multi-region HMO plans currently available to retirees living in Washington, Oregon, and Hawaii after December 31, 2026.

Commissioner Cremen seconded the motion.

PUBLIC COMMENT: None

VOTE: Ayes: Cremen, Hao, Howard, Vallejo, and Wilson Noes: None

ACTION: The Health Service Board approved discontinuing offering Kaiser multi-region HMO plans currently available to retirees living in Washington, Oregon, and Hawaii after December 31, 2026.

12. REVIEW RESULTS OF ACTIVE DENTAL ASO PPO PLAN REQUEST FOR PROPOSAL (RFP) FOR PLAN YEAR 2027 AND BOARD ACTION TO ACCEPT OR NOT ACCEPT RFP RESULTS: (Action)

[See pdf of Active Dental ASO PPO Plan Request for Proposal \(RFP\) for Plan Year 2027 Results](#)

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

- Key Considerations
- RFP Summary and Background
- RFP Results / What the RFP Showed Us
- Scope and Goals of the RFP
- 2026 Dental PPO Design
- 2027 Dental PPO Rates
- Key Takeaways
- Summary
- Board Action

Commissioner Cremen asked whether the board could be informed of Delta Dental's projected 2027 rates prior to taking action on the preceding agenda item. Michael Visconti responded that Delta Dental's renewal figures were consistent with the information already reflected in their RFP submission.

Vice President Howard asked about the contract length if the board proceeded to the next agenda item concerning the Delta Dental renewal. Michael Visconti responded that the renewal would be a one-year agreement, whereas the RFP had required a three year period of fixed ASO fees.

Mike Clarke clarified that, under the standard renewal process, Delta Dental's existing commitment—originally established in 2024—included a three year administrative fee structure. He noted that while the board would vote only on the 2027 rates, the renewal also carried a three year administrative fee commitment extending through 2029.

Commissioner Wilson remarked that the RFP process had been informative, noting that its purpose was to reveal options the board could not otherwise predict. She stated that the results highlighted the significant level of disruption members would face under the non-incumbent options. While acknowledging the projected \$11 million in trust savings, she emphasized that the savings would effectively shift costs onto employees. Based on the analysis presented, she stated

that it appeared reasonable not to support the RFP's recommended outcome.

Vice President Howard asked for clarification on the Delta Dental *Premier* tier and how it differed from the two-tier structure proposed by the other bidders. Michael Visconti explained that the current Delta plan used three tiers, with the Premier level functioning as a secondary network that carried different cost sharing for members. He noted that while some Premier dentists would fall into the in-network category under MetLife, the majority would shift to out-of-network under the two-tier models offered by the nonincumbent bidders.

President Hao noted that the RFP results were mixed and that no single bidder performed strongly across all categories. She stated that the process nonetheless demonstrated responsiveness to member concerns about recent changes within the Delta Dental network and thanked staff for their work.

Vice President Howard commented that he had heard from members whose providers had either stopped accepting Delta Dental or were difficult to find within the Delta network. He noted that this seemed inconsistent with the data presented, which indicated that Delta continued to have the broadest network. Michael Visconti responded that Delta had indeed maintained the largest network in the region. He explained that while other networks were expanding, the data clearly showed the significant disruption members would experience under alternative administrators, including substantial movement from in-network to out-of-network providers.

Commissioner Cremen asked whether, if the board declined to award the RFP, the Delta Dental arrangement would continue as a three year contract and whether the board could revisit an RFP in two years. Mike Clarke clarified that the board was voting only on the 2027 plan year. Vice President Howard noted that Delta Dental had a three-year administrative fee commitment covering 2027–2029, which provided certainty for future administrative costs, but emphasized that the board would be approving only the 2027 rates.

Commissioner Wilson moved to not accept the results of the Active Dental ASO-PPO Request for Proposal (RFP). Commissioner Cremen seconded the motion.

PUBLIC COMMENT:

Dr. Teresa Palmer suggested that the board might benefit from hearing the next agenda item before voting on the RFP outcome. She stated that reviewing the following item first could provide clearer context, particularly given the approximately \$11 million difference referenced in the discussion.

VOTE: Ayes: Cremen, Hao, Vallejo, and Wilson Noes: Howard

ACTION: The Health Service Board approved not to accept the results of the Active Dental ASO-PPO Request for Proposal (RFP).

13. REVIEW AND APPROVE 2027 SELF-FUNDED ACTIVE DENTAL PPO PLAN RENEWAL RATES: (Action)

[See pdf of Self-Funded Active Dental PPO Plan Renewal Rates 2027](#)

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

- Introduction
- Rate Setting Methodology Preface

- Self-Funded Active Employee Delta Dental of California (Delta Dental) PPO Plan Renewal 2027 Rates
- Renewal Summary
- Rating Details
- Recommendation for HSB Action

No Board discussion.

Commission Cremen moved to approve the Self-Funded Delta Dental Active Employee PPO renewal rating actions for 2027: 1. Administrative fee of \$4.94 per employee per month (PEPM) for the 2027 plan year; and 2. A 3.3% increase in self-funded total cost rates from 2026 to 2027 as presented in this material. Commissioner Wilson seconded the motion.

PUBLIC COMMENT: None

ACTION: The Health Service Board unanimously approved the following Self-Funded Delta Dental Active Employee PPO renewal rating actions for 2027:

1. **Administrative fee of \$4.94 per employee per month (PEPM) for the 2027 plan year; and**
2. **A 3.3% increase in self-funded total cost rates from 2026 to 2027 as presented in this material.**

REGULAR BOARD MEETING MATTERS

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

Liz Knappe, Strategic Account Executive with Blue Shield of California, reported on a contracting issue between Brown & Toland and Sutter Health that affected Blue Shield HMO members, including active employees and non-Medicare retirees. She stated that Brown & Toland's agreements with certain Sutter specialists had terminated as part of Brown & Toland's broader contract review. She noted that discussions between the two organizations were ongoing and that new referrals were being directed to in-network specialists at Stanford Health, UCSF Health, and other community providers. She explained that Brown & Toland would honor Continuity of Care requests in accordance with regulatory requirements and had established a dedicated concierge service line to assist affected members with referrals and appointment coordination. She clarified that Blue Shield was not directly involved in the contract termination but recognized the impact on HMO enrollees. She added that PPO members were not affected because referrals are not required under PPO plans. She concluded by stating that Blue Shield would ensure customer service staff and SFHSS had the concierge contact information to support members during the transition.

PUBLIC COMMENT: None

15. ADJOURNMENT: 3:37 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 [May 14, 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.