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**Dan Bernal**  
Vice President

**Edward A. Chow, M.D.**  
Commissioner

**Cecilia Chung**  
Commissioner

**Laurie Green, M.D.**  
Commissioner

**Tessie M. Guillermo**  
Commissioner

**HEALTH COMMISSION  
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**MINUTES**

**HEALTH COMMISSION MEETING**

**Tuesday April 16, 2019 4:00 p.m.**

**101 Grove Street, Room 300**

**San Francisco, CA 94102**

**1) CALL TO ORDER**

Present: Commissioner Dan Bernal., Vice President  
Commissioner Edward A. Chow M.D.  
Commissioner Laurie Green, MD  
Commissioner Tessie Guillermo

Excused: Commissioner Cecilia Chung  
Commissioner James Loyce, Jr., M.S

The meeting was called to order at 4:05pm.

**2) APPROVAL OF THE MINUTES OF THE HEALTH COMMISSION MEETING of APRIL 2, 2019**

Action Taken: The Health Commission unanimously approved the April 2, 2019 minutes.

**3) DIRECTORS REPORT**

Naveena Bobba MD, Deputy Director of Health, gave the report. The full report can be viewed at:  
<http://www.sfdph.org/dph/comupg/aboutdph/insideDept/dirRpts/default.asp>

**State Policy Update**

**Legislation on Conservatorship and Substance Use Treatment in Jails Progress through State Legislature**

On April 10<sup>th</sup>, Mayor London Breed and San Francisco Department of Public Health staff testified before the state legislature in support of two bills: SB 40 (Wiener) Conservatorship for serious mental illness and substance use disorders, and AB 1557 (Chiu) Medication-Assisted Treatment (MAT) Drug Reimbursement Pilot Program. SB 40 provides follow-up language to last year's bill SB 1045, which expanded and strengthened California's conservatorship laws with the aim of better meeting the needs of individuals who have serious mental illness and substance use disorders. SB 40 proposes several changes to SB 1045, including shortening timeframes for the conservatorship (from one-year to a six-month conservatorship), adjusting requirements for seeking assisted outpatient treatment (AOT), and providing allowances for temporary 28-day conservatorship. AB 1557 would create a three-year opt-in pilot program for San Francisco county jail to

receive state funding for a MAT program using FDA-approved medications. Following the testimony, both bills unanimously passed out of their respective committees and are continuing through the legislative process.

### **Notification of Possible Measles Exposures**

DPH issued a notification on April 9 regarding possible measles exposures in San Francisco between April 1<sup>st</sup> and 3<sup>rd</sup>. During this time, an adult visited several locations in San Francisco while contagious with measles. There has been no outbreak, and the risk to the general public is very low. However, people without immunity could potentially develop measles if they were exposed at one of the locations on specific times and days, including Caltrain, Muni, Hayes Valley Bakeworks, Federal Building, and Johnny Doughnuts.

San Francisco benefits from high rates of vaccination against measles. Most people have received measles vaccine (“MMR”) as children and are immune. However, unvaccinated children, unvaccinated adults born in 1957 or later, and those with severely weakened immune systems were advised to review the list of locations and to watch for symptoms of illness including fever, cough runny nose, red eyes, followed by a red rash that starts on the head or face. The press release was widely circulated and the story was covered by KRON 4, KCBS radio, ABC7, KTVU, KPIX, NBC11, KTSF, San Francisco Chronicle and Univision.

### **DPH helps with “420” preparations**

The annual “420” gathering in Golden Gate Park this Saturday is expected to draw a crowd of more than 20,000 to celebrate and consume cannabis. For the past several years, city leaders and agencies have worked with event organizers and the community to protect public health and safety. Dr. Tomas Aragon will represent DPH at a press conference hosted by Supervisor Vallie Brown on the event.

The Health Department’s key messages are to consume cannabis only from a legal and licensed SF retailer, do not consume any street drug (e.g., “synthetic cannabis”), and to prepare for any possible overdoses.. In addition to increasing EMS staff, numerous city staff have been trained by DPH to administer naloxone (an opioid antagonist). Last year several attendees were transported to local hospitals after overdosing on opioid drugs (not cannabis).

The DPH Departmental Operations Center will be activated with Population Health Division Branches working to: (1) Prevent overdoses and OD complications (2) Ensure surveillance and early detection (3) Ensure emergency medical services and transport (4) Ensure hospital notification and readiness (5) Monitor hospital and EMS surge (6) Ensure public and interagency communications (7) Ensure food safety and (8) Coordinate with other city departments such as Rec & Park, Fire, Police, Office of Cannabis.

### **Regional push for STD awareness and testing**

April is sexually transmitted disease (STD) awareness month, and DPH is joining with Bay Area health officials to urge everyone who is sexually active, especially young people, women, transgender people and men who have sex with men to take charge of their sexual health.

STD testing and prevention is now more crucial than ever because rates are continuing to rise, increasing steadily in San Francisco and statewide since 2013. Rates of chlamydia, gonorrhea and syphilis continue to grow, and syphilis has re-emerged as a significant public health concern. In California, 283 infants were born with syphilis in 2017. In San Francisco, between 2017 and 2018, the number of women with syphilis has increased 144% to 71.

Chlamydia is the most common reportable disease in California. This disease, like most STDs, is easily preventable and treatable but can cause serious health problems such as infertility if left untreated. In San

San Francisco, between 2013 and 2017, reported cases of chlamydia rose 79% from 5,085 to 9,094. Many of these cases are in young women.

Chlamydia, gonorrhea and syphilis are curable with antibiotics. Yet these infections can go undiagnosed and untreated, which can lead to infertility, ectopic pregnancy, stillbirth and increased HIV risk. In San Francisco, the Health Department's City Clinic is dedicated to sexual health, helping patients to prevent, test and treat sexually transmitted diseases.

DPH is encouraging San Franciscans to follow five easy steps to fight STDs: use condoms, get tested, get vaccinated for Hep A, Hep B and HPV, have honest conversations with sexual partners and talk to your provider about STDs.

### **Public Health Week**

Thank you to everyone who followed us on facebook and twitter during National Public Health Week, April 1-7. We gained over 100 new followers and told stories of our work in the shelters, at Navigation Centers, and on the streets. Our most successful tweet was a picture of Dr. Barry Zevin coming out of a rainy tent during a SOMA health fair, and was seen by over 8,000 people. If you haven't already, please follow us on [facebook](#) (@sfpublichealth) and [twitter](#) @SF\_DPH and please like, tweet, and share with your networks.

### **Imperfect produce event at Southeast Health Center**

The Bayview is a "food desert" and has less access to fresh produce and healthy foods. Southeast Health Center and Imperfect Produce have formed a partnership, where free food is available every Monday and Wednesday at the clinic. To celebrate, a special event will be held at Southeast Health Center on Wednesday, April 17 at 10am, with Imperfect Produce giving out produce to the community. Imperfect Produce buys crops that are cosmetically-challenged from farmers and sells and distributes them to people in need.

### **DPH in the News (April 1-16)**

Fixing San Francisco's Behavioral Health System is Complicated – Here's Why

<https://www.sfchronicle.com/politics/article/Fixing-San-Francisco-s-behavioral-health-system-13761497.php>

Measles Health Alert – Infected Person may have Exposed Others at some San Francisco Locations

<https://www.sfchronicle.com/bayarea/article/Measles-health-alert-Infected-person-may-have-13754474.php>

Health Officials Warn Public of Possible Measles Exposure

<https://abc7news.com/health/health-officials-warn-public-of-possible-measles-exposure-in-sf/5240357/>

Possible Measles Exposure in San Francisco

<https://www.nbcbayarea.com/news/local/Possible-Measles-Exposure-in-San-Francisco-508331891.html>

San Francisco Health Officials Warn of Possible Measles Exposure

<https://sanfrancisco.cbslocal.com/2019/04/09/san-francisco-health-officials-warn-possible-measles-exposure/>

Public Health Officials Release Cautious Measles Advisory in SF

<http://www.sfweekly.com/news/public-health-officials-release-cautious-measles-advisory-in-s-f/>

Monthly shots control HIV as well as pills in 2 big studies

<http://www.independent.com/mt/articles/2019-04-09/health/Monthly-shots-control-HIV-as-well-as-pills-in-2-big-studies-6736206398>

States move to legalize CBD to end confusion over US rules

<https://www.nbcnews.com/health/health-news/texas-california-hope-cbd-legalization-will-end-confusion-over-u-n991456>

Treasure Island Tetra Tech EC Work Is Safe: Navy Report

<https://oaklandnewsnow.com/index.php/2019/04/05/treasure-island-tetra-tech-ec-work-is-safe-navy-report/>

Unique CARE Offered At Zuckerberg SF General Hospital

<https://omny.fm/shows/kcbsam-on-demand/unique-care-offered-at-zuckerberg-sf-general-hospital>

Nurses backing ballot measure to strip Zuckerberg's name from SF General

<https://www.sfexaminer.com/the-city/nurses-backing-ballot-measure-to-strip-zuckerbergs-name-from-sf-general/>

Homelessness A Major Challenge In Eliminating New HIV Infections In San Francisco

<https://kcbsradio.radio.com/blogs/jenna-lane/homelessness-hurts-san-franciscos-efforts-eliminate-new-hiv-infections>

With black babies, moms at high risk in SF, project pairs them with caregivers

<https://www.sfgate.com/bayarea/article/Black-babies-mothers-die-at-a-staggering-rate-in-13745368.php?t=a22e8f9b6d>

Dem Lawmaker Pushes U.S. Surgeon General for Gun Violence Report

<https://washingtoninformer.com/dem-lawmaker-pushes-u-s-surgeon-general-for-gun-violence-report/>

Are e-consults right for your practice?

<http://exclusive.multibriefs.com/content/are-e-consults-right-for-your-practice/healthcare-administration>

New Mental Health Team has a Big Job Ahead and Members get Big Salaries

<https://www.sfchronicle.com/politics/article/SF-new-mental-health-team-has-a-big-job-ahead-and-13727457.php>

Dr. Aragon reported on the recent Measles case in the Bay Area described in the Director's Report. He encouraged everyone who is eligible to be vaccinated.

He also discussed SFPDH preparations for "420" day which is on April 20<sup>th</sup>. On this day, approximately 25,000 cannabis users are expected to gather in Golden Gate Park and other areas of San Francisco to enjoy cannabis products. He noted that public smoking of cannabis is still prohibited and encouraged all users to purchase products from a trusted source. Dr. Aragon also stated that the Board of Supervisors recently approved cannabis smoking at public events; this provision will not be implemented until after 4/20/19.

In addition, Dr. Aragon stated that there has an increase in congenital Syphilis cases throughout the state, although none have occurred in San Francisco. However, between 2017-2018, there was a 144% increase in cases of Syphilis cases in San Francisco female residents. He noted that the SFPDH is focusing on prevention efforts.

#### Commissioner Comments:

Commissioner Green noted that 4/20 falls on a Saturday and asked what preparations have been completed for the event. Dr. Aragon stated that the City's Police, Fire, and MTA Departments are on alert. The SFPDH,

through its Emergency Medical Services section, has trained 35 staff to carry Naxalone to treat any opioid overdoses that may occur during the day.

**4) GENERAL PUBLIC COMMENT**

Chelsea Stewart requested that all City health centers screen and school wellness centers conduct ACES screenings.

Ashley Jackson requested that funding be increased to provide San Francisco schools with rape prevention education including classes on consent.

**5) COMMUNITY AND PUBLIC HEALTH COMMITTEE**

Commissioner Bernal, Chair, stated that the committee discussed a presentation on Behavior Health Services for People Experiencing Homelessness. This included information how a number of SFPD programs, such as the Street Medicine Program, engage with this population.

The Committee also discussed a presentation on the SFPD STD Prevention and Control Strategic Plan and gave input into the process.

**6) ASSISTED OUTPATIENT TREATMENT (AOT) UPDATE**

Angelica Almeida, PhD, Director of Forensic/Justice Involved Behavioral Health Services, gave the update.

Commissioner Comments:

Commissioner Chow asked if there is a difference in outcomes for participants who are voluntary compared to those who were ordered by courts to participate. Ms. Almeida stated that outcomes are similar for both groups of participants.

Commissioner Guillermo thanked Ms. Almeida for the presentation and asked if there is other relevant data available on the program outcomes. Ms. Almeida stated that there is no other data available from the program.

Commissioner Guillermo asked if the program has goals based on the current data. Ms. Almeida stated that the program strives to make 10 presentations per year to reach possible clients. She added that no goals regarding outcomes have been developed.

Commissioner Green asked if there are standard data metrics across all California AOT models. Ms. Almeida stated that the program must submit an annual report to the state. However, the state does not provide any data on other programs. She added that the program participants in quarterly calls with other AOT programs.

Commissioner Green asked if the program reaches all those individuals who are appropriate for the program. Ms. Almeida stated that the program is continuing to expand in an effort to outreach to all qualifying individuals.

Commissioner Guillermo asked for more information regarding the out-of-state referrals. Ms. Almeida stated that this cohort refers to out-of-state parents who made the referral; individuals from these referrals have historically participated in the program voluntarily.

Commissioner Guillermo asked for more information regarding the number of referrals for programs in other counties compared to referrals to the San Francisco program. Ms. Almeida stated that programs in other counties often have more referrals but the San Francisco program has conducted more trainings and outreach. She added that the program is required to conduct one training per year and implemented 63 trainings last year.

Commissioner Bernal asked for more information regarding 60% of referrals that do not result in program contacts. Ms. Almeida stated that many of these referrals come from family members who report that an individual is not engaged in services; however, when the program checks, the individual is engaged. She added that other referrals in this category result in attempted outreach but the individual cannot be found. In addition, some individuals referred to the program by family members have moved out of the city.

**7) RESOLUTION: APPROVING CHANGES TO THE SLIDING SCALE PROGRAM AND ENDORSING CHANGES TO PATIENT BILLING AND FINANCIAL ASSISTANCE PROGRAMS**

Greg Wagner, CFO, presented the item.

Commissioner Comments:

Commissioner Bernal thanked Mr. Wagner and Dr. Ehrlich in addition to the Mayor and Board of Supervisors for the urgency and impactful work completed on this issue in a relatively short period of time. He asked if there will be any change in how ZSFG will pursue litigation against health insurance companies when appropriate to do so. Mr. Wagner stated that the resolution and changes to policy were made to protect patients. The SFDPH will continue to pursue fair compensation from health insurance companies.

Commissioner Guillermo thanked Mr. Wagner and the team for the work on this project. She noted that only a small patient population would be impacted by these changes. She asked if the San Francisco Health Network will be pursuing contracts with health insurance companies. She also asked how the SFDPH obtained charge-masters from other hospitals. Mr. Wagner stated that charge masters are published on a statewide website but noted that analysis is necessary to adequately compare this data. The SFDPH has contracted with Deloitte to conduct this analysis. In regard to contracting with health insurance companies, he noted that the ongoing challenge is that these contracts are usually developed for a hospital to give discount in exchange for volume of patients. However, due the ongoing issues of capacity at ZSFG due to a consistent high census, it is not possible to negotiate broadly in this manner. He added that the San Francisco Health Network has identified specific areas in which there is capacity so patient volume could be increase. Therefore, the Network has been pursuing contracts including OB and post-trauma follow-up care.

Commissioner Chow suggested that the acute rehab facility at Laguna Honda Hospital may be another source of contracting.

Commissioner Chow noted that in situations of Worker's Compensation, a patient may receive payment but does not pay the hospital bill. Mr. Wagner stated that the SFDPH relies on the City Tax Collector and the City Attorney to assist in these types of situations.

Commissioner Green asked if the changes in billing policy are only for San Francisco residents. Mr. Wagner stated that the changes will impact all ZSFG patients. He noted that 75% of patients with balanced billing issues are San Francisco residents.

Commissioner Green asked if there is concern that consumer complaints about billing have led to policy changes that may prevent insurance companies from contracting with the San Francisco Health Network/ZSFG. The billing caps may lessen pressure that patients could put on their health insurance companies to assist with large hospital bills. Mr. Wagner stated that the billing changes will likely cost the Network \$1.9 to \$2.2 million annually.

Commissioner Bernal asked if the billing changes will impact the clinical work of ZSFG. Mr. Wagner stated that there will be administrative changes in implementing the policy. The Network will need to revisit claims and patient communication efforts. He noted that these changes will happen as EPIC is being implemented so there will be a tremendous change of workflow throughout the Network. Dr. Ehrlich stated that most of the

changes related to the billing practices will be felt by the ZSFG financial team. She added that in the clinical realm, medical providers will likely be relieved not to have concern of patients having costly bills for the care provided.

Dr. Colfax thanked Mr. Wagner for his effective work on this complex issue.

Commissioner Chow offered a revision to the following Resolved statement in the resolution:

“RESOLVED, That the Health Commission endorses the concept of establishing new policies and procedures to require that insured patients receiving services at ZSFG as an out-of-network facility will be billed no more than the cost sharing the patient would pay for the same services at an in-network, contracted hospital under the patient’s insurance policy; and be it further”

Action Taken: The Health Commission unanimously approved the resolution with the amendment.  
(See Attachment)

**8) SFDPH IT AND EPIC PROJECT UPDATE**

Winona Mindolovich, Acting CIO, presented the item.

Commissioner Comments

Commissioner Green asked for more information regarding the determination of which employees receive in-person or online training. Mr. Shafer stated that EPIC training has both classroom and E-learning components. Through classroom instruction, the team will identify staff members who could benefit from one-on-one attention. Dr. Yu stated that EPIC is able to track the length of time a user takes to complete E-learning components; this data can be used to determine who may need attentional mentoring.

Commissioner Guillermo complimented the team on its strategic plan. She encouraged the team to develop benchmarks to measure performance during the “Go Live” phase so the Health Commission can monitor the impact of the project as it is implemented.

Commissioner Chow stated that the new CIO should review the strategic plan and work with staff to make any appropriate changes. Dr. Colfax stated that the Health Commission will be updated as the SFDPH implements EPIC and that the new CIO will be reviewing the strategic plan.

**9) SFDPH ANNUAL REPORT FY17-18**

Patrick Chang, Senior Health Program Planner, presented the item.

Commissioner Comments

Commissioner Chow thanked Mr. Chang for incorporating changes suggested by the Finance and Planning Committee members. He suggested that in future reports, that Population Health activities be more prominently highlighted in the SFDPH Annual Reports.

Commissioner Guillermo stated that it was helpful to have quotes from staff and vignettes to match the data in the report. She also suggested using other forms of graphics than pie-charts for future reports.

Commissioner Green stated that the report is a great reflection of the impactful work done by all the dedicated SFDPH staff.

**10) OTHER BUSINESS:**

Mr. Morewitz noted that each Commissioner has the Health Commission calendar. There were no other comments on this item.

**11) JOINT CONFERENCE COMMITTEE REPORTS**

Commissioner Chow stated that the April 9, 2019 LHH JCC meeting was primarily a closed session meeting to discuss quality reports and staff credentialing issues.

**12) ADJOURNMENT:**

The meeting was adjourned at 6:37pm.

**HEALTH COMMISSION  
RESOLUTION No 19-8**

**APPROVING CHANGES TO THE SLIDING SCALE PROGRAM AND ENDORSING CHANGES TO PATIENT BILLING AND FINANCIAL ASSISTANCE PROGRAMS**

WHEREAS, SFDPH is dedicated to meeting the highest standards in all aspects of patient care, including protecting the financial well-being of its clients and patients; and

WHEREAS, Hospital billing has become a significant public policy issue across the country, with many patients facing unmanageable medical costs resulting from hospital visits; and

WHEREAS, One factor contributing to patient financial problems in health care is the practice known as “balance billing,” where a patient’s insurer covers only a portion of a hospital bill and the patient becomes responsible for the remainder; and

WHEREAS, In addition to causing financial hardship, the practice of balance billing can cause stress, anxiety and frustration for patients as they are forced to navigate complex financial and administrative requirements of insurance providers and hospitals in resolving billing issues; and

WHEREAS, in recent weeks and months there has been increased scrutiny on the practice of balance billing at Zuckerberg San Francisco General Hospital and Trauma Center (ZSFG), including the stories of patients who received large bills for services at ZSFG; and

WHEREAS, Less than 2 percent of patients at ZSFG are potentially subject to balance billing under current law, policies and procedures; and

WHEREAS, Despite the relative infrequency of this practice at ZSFG, for those individuals impacted by balance billing, the financial hardship and stress of the experience are very real; and

WHEREAS, it has become clear that ZSFG’s existing policies do not fully take into account the burden imposed on patients affected; and

WHEREAS, on February 1, 2019, Mayor London Breed announced a temporary hold on the practice of balance billing and directed SFDPH to undertake a comprehensive 90-day review of its billing and collections policies; and

WHEREAS, At the direction of Mayor Breed and the Health Commission SFDPH has completed its review and developed a set of recommendations to significantly reduce financial burdens on patients, including revisions to the Sliding Scale Policy previously adopted by the Health Commission;

NOW, THEREFORE, BE IT RESOLVED, That the Health Commission approves proposed changes to the Sliding Scale Policy to expand eligibility for the program and further reduce out-of-pocket expenses for the lowest income patients; and be it further

RESOLVED, That the Health Commission endorses the concept of establishing new policies and procedure to require that insured patients receiving services at ZSFG as an out-of-network facility will be billed no

more than the cost sharing the patient would pay for the same services at an in-network, contracted hospital under the patient's insurance policy; and be it further

RESOLVED, That the Health Commission endorses the concept of establishing income-based out-of-pocket maximum payment levels for patients at ZSFG.

I hereby certify that the San Francisco Health Commission at its meeting of April 16, 2019 adopted the foregoing resolution.

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Mark Morewitz  
Executive Secretary to the Health Commission