1) CALL TO ORDER
Present: Commissioner Edward A. Chow M.D., President
Commissioner Judith Karshmer, Ph.D., PMHCNS-BC
Commissioner James Loyce, Jr., M.S.
Commissioner David J. Sanchez Jr., Ph.D.

Excused: Commissioner Dan Bernal
Commissioner Cecilia Chung Commissioner

The meeting was called to order at 4:06pm

2) APPROVAL OF THE MINUTES OF THE HEALTH COMMISSION MEETING OF FEBRUARY 20, 2018

Action Taken: The Health Commission unanimously approved the minutes.

3) DIRECTORS REPORT
Barbara Garcia, Director of Health, gave the report. The full report can be viewed at: http://www.sfdph.org/dph/comupg/aboutdph/insideDept/dirRpts/default.asp

President Signs Federal Funding Deal into Law along with Framework for Two-Year Spending Bill
On February 9th, President Trump signed a continuing resolution (CR) and two-year budget framework into law. With the passage of the CR, which will fund the government until March 23rd, and the enactment of the two-year budget framework, the repeated threat of a government shutdown appears to have been eliminated at least until Fiscal Year 2019. The continuing resolution and framework includes provisions to increase federal spending on defense and nondefense programs by $300 billion over the next two years and increase the debt ceiling for one year. A number of public health- and safety-related items were included in the continuing resolution and framework.

Specifically, the measure:
• Extends funding for the Children’s Health Insurance Program (CHIP) for an additional four years beyond its recent six-year reauthorization; CHIP is now authorized for 10 years through 2027;
• Reauthorizes funding of more than $7 billion for community health centers and related programs for two years;
• Provides $6 billion dedicated to opioid treatment and mental health services;
• Increases funding to the National Institutes of Health by $2 billion;
• Extends the Maternal, Infant and Early Childhood Home Visiting Program for five years;
• Provides nearly $90 billion in emergency disaster relief for states and areas impacted by recent wildfires and hurricanes;
• Dissolves the Independent Payment Advisory Board (IPAB) which was created by the Affordable Care Act (ACA) to control rising costs of Medicare; the Congressional Budget Office (CBO) estimated eliminating the board would increase federal spending by $17.5 billion over the next decade;
• Delays cuts to Medicaid Disproportionate Share Hospital (DSH) payments by two years.

The Future of the Prevention and Public Health Fund (PPHF)
In order to partially offset the cost of funding health-related spending items, Congress plans to make further cuts to the Prevention and Public Health Fund (PPHF) in the net amount of $1.35 billion over the next 10 years. These cuts come on top of both the $750 million in cuts the PPHF received under the recent tax reform legislation and an additional $11 billion dollars since its inception to primarily fund Medicare, establishing the marketplace for the Affordable Care Act (ACA) and the 21st Century Cures Act.

The ACA established the PPHF with the goal of creating sustained, mandatory funding for public health, wellness, and prevention efforts. PPHF has provided vital resources to governmental public health program at the federal, state, and local levels. PPHF makes up about 12 percent of the Centers for Disease Control and Prevention’s (CDC) funding. Among the programs at risk at the CDC due to PPHF cuts are the immunization programs, epidemiology and surveillance capacity, HIV and sexually transmitted disease prevention, childhood lead poisoning prevention program, heart disease prevention, and diabetes prevention, among others.

SFDPH would be impacted by these cuts, as it receives over $8 million annually in direct funding from the CDC and millions more as a pass through from the State of California. The reduction in the PPHF could cost California health agencies over $180 million over the next five years and would impact key programs. State and local officials have repeatedly raised concerns that cuts to the PPHF will have significant negative effects on public health preparedness and core health promotion work.

President Trump Releases 2019 Federal Budget Proposal
On Monday, February 12th, the Trump Administration released its Fiscal Year 2019 budget. As proposed, the $4.4 trillion budget would make significant reductions to domestic programs and entitlements, including Medicare, and large increases for the military. The proposal would lead to deficits totaling at least $7.1 trillion over the next decade.

A number of public health- and safety-related items were included in the budget proposal, including:
• Reductions in Medicare spending of $236 billion, or 7.1 percent, by 2028;
• Reductions in Medicaid and Affordable Care Act (ACA) subsidy spending by 22.5 percent by 2028 – The budget assumes repeal of the ACA and replaces it with the Graham-Cassidy Block Grant plan and repeal of the Medicaid Expansion;
• Reduction to Department of Health and Human Services (HHS) budget by $18 billion, a 21 percent decrease from 2017;
• Reductions to Center for Disease Control and Prevention (CDC) budget by $878 million compared to the FY2018 CR;
• Cuts to the Substance Abuse and Mental Health Services Administration (SAMHSA) by $688 million;
• Cuts to Supplemental Nutritional Assistance Program (SNAP) spending by 27.4 percent and Section 8 housing assistance by 20.1 percent by 2028;
• Prohibits entities like Planned Parenthood from receiving Medicaid Reimbursement or Title X Family Planning;
• Prohibits the Federal Government, as well as state and local governments that receive Federal financial assistance for health-related activities, from penalizing or discriminating against health care providers based on the providers’ refusal to be involved in, or provide coverage for, abortion services.

Like other presidential budgets, the blueprint will most likely not become law, but the proposal still highlights the White House’s priorities. The final FY 2019 budget will most certainly look different from the version proposed by the Trump Administration. The House and Senate appropriations committees will work on their own spending bills, which will need to be reconciled with each other and approved by each chamber before going to the President for his signature.

**Senator Scott Weiner announces new Conservatorship Legislation (SB 1045)**
Senator Scott Weiner (D-San Francisco) and Henry Stern (D-Canoga Park) recently announced a bill (SB 1045) to expand conservatorships for California’s most vulnerable residents who are unable to care for themselves. The bill allows local governments more flexibility to expand conservatorships, improve administration, and assist individuals who suffer from chronic homelessness, mental illness, drug addiction, repeated psychiatric incidents and frequent use of emergency medical services. Senator Weiner had this to say: “California is in the midst of a crisis, with very sick people suffering and dying on our streets. This is a life-or-death situation, and it is beyond inhumane to sit back and watch as these people die. We must take action, and action means helping people get off the streets, into housing, and into supportive services to get their lives back.” Mayor Mark Farrell added: “In San Francisco, we remain committed to providing compassionate and comprehensive services to our vulnerable populations. Conservatorship is a serious process reserved only for those most in need, including those whose health is complicated by living on the streets. This bill will offer a new path to stable housing, wellness and recovery.”

SB 1045 has been introduced as intent language, so that Senators Wiener and Stern can work with local governments, service providers, and advocates over the coming months to determine how to ensure the conservatorships are structured to best help those most in need of shelter and recovery, should those counties elect to use it. In San Francisco we are supportive of measures that will help provide our community members who have addiction disorders and who are homeless with more intensive treatment options. Treatment, support and care is critically needed to reduce suffering and save lives.

**PrEP Campaign aims to address HIV disparities by reaching out to African Americans**
Earlier this month, the Department of Public Health announced a new campaign in the fight against HIV to accelerate progress on ending disparities impacting African American men. The effort is focused on increasing the use of PrEP (pre-exposure prophylaxis) to prevent HIV infection. PrEP is a once-daily pill for people who are HIV negative and is more than 90 percent effective in stopping transmission of HIV. By improving awareness of PrEP with positive messages, the campaign intends to boost the number of African Americans using this powerful prevention tool. Overall, San Francisco is making tremendous headway “Getting to Zero” in the fight against HIV. New diagnoses hit a record-low of 223 in 2016, down from a high of 2,332 at the peak of the epidemic in 1992. Among men, the annual rate of new HIV diagnoses for all racial and ethnic groups continues a 10-year drop. The progress is not equally distributed, however. For African American men in San Francisco, the rate of new HIV diagnosis in 2016 was 96 cases per 100,000 population, down from 140 in 2015, but still worse than the rate for white men, of 39 cases per 100,000 in 2016.
A new campaign launching this week aims to help close this gap by engaging Black San Franciscans with supportive PrEP messages. Ads will appear on Muni busses, billboards and social media. The campaign features an askaboutPrEP website, as well as a hotline and text line. Later this spring, BART stations and direct mail will expand the campaign further. “Some people have trouble finding a provider willing to talk openly and honestly about sex, HIV, and PrEP,” said Dr. Hyman Scott, a physician at Zuckerberg San Francisco General Hospital’s Ward 86. “Stigma is still an important barrier to seeking sexual health services for many men. We want people to be able to talk with their providers about all aspects of their health, including their sexual health, and how PrEP can be part of the conversation.”

Press Release urges STD screening for Valentine’s Day
Across the country and in California, syphilis, gonorrhea, and chlamydia have been increasing for the past five years. According to the Centers for Disease Control and Prevention (CDC), California has the highest rates among all states. Having an untreated STD can increase risk of HIV infection, infertility problems, long-term pelvic or abdominal pain, and complications in pregnancy.

In San Francisco, fewer people were diagnosed with HIV in 2016 than at any previous time since the disease was identified. However, cases of chlamydia, gonorrhea and syphilis increased from 11 to 26 percent in 2017 compared to 2016. Condoms lessen the risk of getting these diseases, and routine screening and prompt treatment can prevent complications and transmission to partners. The Health Department’s San Francisco City Clinic has been helping people share the love, but not the STDs since 1911. “No matter who you are, or what you’re into, we want you to feel comfortable coming to SF City Clinic for your sexual health concerns,” said Dr. Stephanie Cohen, Medical Director of City Clinic. “We recommend regular screening for STDs so you can get treated if you need it, and take charge of your health.”

Gender Health and HIVE staff recognized at Hearts and Heroes Event
San Francisco General Hospital Foundation’s Hearts and Heroes Event was held on Thursday, February 15th at AT&T Park. The annual event is held as a fundraiser to benefit Zuckerberg San Francisco General Hospital. Each year, extraordinary staff are selected and recognized for their exceptional contributions. The 2018 heroes, Karen Aguilar and Caroline Watson were recognized for their outstanding work in Gender Health and HIV care. Karen Aguilar, Lead Patient Navigator for Gender Health SF, was recognized “…for always going above and beyond for her patients and community; fighting daily to get her patients access to the best care; to identify when that care isn’t adequate and for her work improving the care which transsexual, transgender and gender non-conforming people receive. As the Lead Patient Navigator at Gender Health SF and a bilingual speaker, Karen works with all the Spanish speaking gender patients – nearly half of the entire program. In 2014, Karen herself was a patient of the Gender Health SF program, which serves as an example nationwide of how to deliver compassionate, and high quality healthcare to the trans community.

Caroline Watson, Social Justice and Communications Coordinator at UCSF’s HIVE program, was recognized for “…her fierce commitment to community inclusion and improving positive and supportive communications around HIV, through blog content development and advocacy through the ‘Share Your Story’ campaign, and challenging providers to use non-stigmatizing language with their patients through the #LanguageMatters program.” The HIVE clinic and program has provided preconception and prenatal care to women and couples affected by HIV since 1989. A big congratulations to just two of the amazing staff that we are honored to work with every day.

UCSF Preterm Birth Initiative presents: “The Naked Truth: Death by Delivery”
The mortality rate among black infants in the U.S. is more than twice that of white infants—in some urban areas, even higher—and a growing body of evidence suggests that a key factor may be stress among black mothers caused by racial discrimination, according to Harvard epidemiologist Nancy
Krieger. Join the UCSF Preterm Birth Initiative this Black History Month for a special screening of the documentary film “The Naked Truth: Death by Delivery” followed by a panel on maternal mortality and early birth, focusing on what can be done about this epidemic affecting black women and infants. Moderated by Jenée Johnson, Director of Black Infant Health. Panelists will include Joia Adele Crear-Perry, MD; Linda Jones, Doula and cofounder of “Black Women Birthing Justice” and Joi Jackson-Morgan, Executive Director of the 3rd Street Youth Center and Clinic. Tuesday, Feb 27th, 2018 5:30-8:00pm at the Bayview Opera House. More info: PretermBirth@ucsf.edu

Commissioner Comments:
Commissioner Chow congratulated all those who were acknowledged at the Hearts and Heroes event.

Director Garcia asked Karen Aguilar, Lead Patient Navigator for Gender Health, to stand and be recognized as one of the Hearts and Heroes awardees.

4) GENERAL PUBLIC COMMENT
There was no general public comment.

5) COMMUNITY AND PUBLIC HEALTH COMMITTEE
Commissioner Loyce, Chair, stated that the Committee stated that the Committee discussed a Maternal, Child, Adolescent Health update and a presentation on SFDPH activities to combat food insecurity. He noted that Commissioner Chow requested that a presentation be made on food insecurity later in the year.

Commissioner Comments:
Commissioner Chow stated that the presentation on food insecurity highlighted the importance of food in dealing with social determinants of health. He looks forward to a full Health Commission presentation on this topic in the future.

6) SFDPH FY18-20 BUDGET UPDATE
Greg Wagner, SFDPH Chief Financial Officer, and Jen Louie, SFDPH Budget Director, presented the item.

Commissioner Comments:
Commissioner Chow asked if there has been a review of the UCSF Affiliation Agreement to develop budget projections for the future. Mr. Wagner stated that the SFDPH has been working with the UCSF Dean’s office on long-term budget projections. He noted that, as Ms. Louie stated in her presentation, the SFDPH has been able to use one-time revenue to fund the $10.3M for the UCSF Affiliation Agreement costs related to the Electronic Health Record (EHR). He noted that the SFDPH will continue close monitoring of the UCSF Affiliation Agreements and the EHR budget. He added that the SFDPH will also work to increase UCSF revenue through increased efficiency of billing processes. He also stated that the SFDPH is committed to remaining within budget for the EHR project.

Director Garcia noted that she requested an external review of the EHR projected budget to ensure the planned cost are realistic.

Commissioner Chow stated that the SFDPH and UCSF have an interdependent relationship.

Commissioner Chow asked for an update on plans to ensure the SFDPH TB budget is adequate. Director Garcia stated that the SFDPH continues to develop projections for SFDPH TB prevention and treatment activities.

Action Taken: The Health Commission unanimously approved the SFDPH FY18-20 Budget.
7) **GENDER HEALTH SF PROGRAM & EVALUATION UPDATE**
Julie Graham, Director, and Seth Pardo, Evaluator, presented the update.

**Commissioner Comments:**
Commissioner Loyce asked how a patient’s substance use may impact surgical options. Ms. Graham stated that the program assesses every client’s situation to ensure substances will not adversely impact surgery or post-surgery outcomes.

Commissioner Loyce asked how a patient’s mental health issues may impact surgical options. Ms. Graham stated that clients should not have been hospitalized for psychiatric reasons anytime during the six months prior to surgery.

Commissioner Karshmer thanked the presenters and all program staff for their impactful work. She asked for more information regarding the decreasing number of surgeries completed in the last year. Ms. Graham stated that several of the contracted surgeons have a multi-year waitlist. This is due to the few number of surgeons who perform these types of specialized surgeries. She noted that surgeries that can be performed by San Francisco Health Network medical staff are done more quickly.

Commissioner Sanchez thanked the presenters and Director Garcia for the effective program. He noted concern that medical providers at ZSFG may be trained in performing these surgeries but may leave for better paying jobs. Ms. Graham stated that one of the program’s goals is to develop a formal UCSF medical staff training program to ensure adequate staffing for ZSFG surgeries and to help train more people to perform these surgeries throughout the world.

Commissioner Chow stated that is meaningful to witness the evolution of this groundbreaking program.

8) **SFPD 2016-2017 ANNUAL REPORT**
Krishna Patel, Health Program Planner, presented the item.

**Commissioner Comments:**
Commissioner Chow thanked Ms. Patel for incorporating comments previously made by Commissioners at the Finance and Planning Committee. He added that the report is wonderful and summarizes the enormous amount of work conducted by the SFDPH. He suggested that the SFDPH consider adding a page to this report highlighting the groundbreaking research conducted by the SFDPH.

Commissioner Karshmer stated that reading the report made her very proud of the SFDPH.

Commissioner Loyce thanked Ms. Patel for the report, which he noted was written in a way to make the information accessible to the reader.

Commissioner Sanchez thanked the SFDPH for the wonderful report.

9) **OTHER BUSINESS:**
Commissioner Chow reminded the Commissioners to notify Mr. Morewitz of any expected absences.

10) **JOINT CONFERENCE COMMITTEE REPORTS**
Commissioner Sanchez, LHH JCC Chair, stated that at the February 13, 2018 meeting, the Committee held a primarily closed session.

11) **ADJOURNMENT**
The meeting was adjourned at 5:30pm.