



Via Email

May 29, 2026

Victor Young
Clerk of the Board
Board of Supervisor Office
Victor.Young@sfgov.org
1 Dr. Carlton B. Goodlett Place, Room 244
San Francisco, CA 94102

Re: Appointment of Michael Chung to the San Francisco Health Authority Governing Body

Dear Mr. Young:

This purpose of this letter and enclosed documents is to request the appointment of Michael Chung to Seat #2 of the Governing Body of the San Francisco Health Authority.

I certify that Michael Chung, as President & CEO, Chinese Hospital, is qualified to be appointed to Seat #2 of the San Francisco Health Authority Governing Body under (A) the provisions of California Welfare and Institutions Code Section 14087.36(k)(1)(B) which permits the appointment of a "person employed in the senior management of a hospital not operated by the county or the University of California."

Enclosed please find a letter from the Hospital Council of Northern and Central California, designating Mr. Chung to serve on the San Francisco Health Authority Governing Body. Additionally, Mr. Chung has provided a statement indicating a willingness to serve and this statement is also enclosed. We request that the Rules Committee and Board of Supervisors schedule the appointment of Mr. Chung to the San Francisco Health Authority Governing Body, retroactively to January 21, 2026, as soon as possible.

We appreciate your assistance with our request. Please feel free to reach out with any additional information needed or questions.

Sincerely,

A handwritten signature in black ink, appearing to read "Nina Maruyama", written over a horizontal line.

Nina Maruyama
Chief Compliance and Regulatory Affairs Officer
nmaruyama@sfnhp.org

Enclosures

January 5, 2026

Yolanda R. Richardson
Chief Executive Officer
San Francisco Health Authority (dba San Francisco Health Plan)
50 Beale, 12th Floor
San Francisco, CA 94105

Dear Ms. Richardson:

This letter is to inform San Francisco Health Plan (SFHP) of a nomination to the SFHP Governing Board by the Hospital Council of Northern and Central California (“Hospital Council”).

According to Section 14087.36(k)(1)(B) of the California Welfare and Institutions Code, a seat is designated for a person who is employed in a senior management position of a hospital not operated by the City and County of San Francisco or the University of California. The nominating body for this seat is the Hospital Council. This seat has been held by Jian Zhang, DNP, MS, FNP-BC, CEO, Chinese Hospital, who will be leaving the SFHP Governing Board due to her retirement at the end of the year. The Hospital Council nominates Michael Chung, Chinese Hospital, to fill this seat.

Sincerely,



Michon Coleman
Regional Vice President
Hospital Council—Northern & Central California



Board of Supervisors
City and County of San Francisco
1 Dr. Carlton B. Goodlett Place, Room 244
(415) 554-5184 FAX (415) 554-7714

Application for Boards, Commissions, Committees, & Task Forces

Name of Board, Commission, Committee, or Task Force: SFHP Governing Board

Seat # or Category (If applicable): #2 District: n/a

Name: Michael Chung

Zip: 94579

Home Phone: _____ Occupation: Hospital Administrator

Work Phone: (415) 677-2496 Employer: Chinese Hospital Association

Business Address: 845 Jackson St., SE CA 94133 Zip: _____

Business E-Mail: michaelc@chasf.org Home E-Mail: _____

Pursuant to Charter Section 4.101 (a)2, Boards and Commissions established by the Charter must consist of electors (registered voters) of the City and County of San Francisco. For certain other bodies, the Board of Supervisors can waive the residency requirement.

Check All That Apply:

Registered voter in San Francisco: Yes ☐ No ☒ If No, where registered: _____

Resident of San Francisco ☐ Yes ☒ No If No, place of residence: _____

Pursuant to Charter section 4.101 (a)1, please state how your qualifications represent the communities of interest, neighborhoods, and the diversity in ethnicity, race, age, sex, sexual orientation, gender identity, types of disabilities, and any other relevant demographic qualities of the City and County of San Francisco:

Business and/or professional experience:

Civic Activities:

Have you attended any meetings of the Board/Commission to which you wish appointment? Yes ☐ No ☐

For appointments by the Board of Supervisors, appearance before the RULES COMMITTEE is a requirement before any appointment can be made. (*Applications must be received 10 days before the scheduled hearing.*)

Date: 4/3-12/21 **Applicant's Signature: (required)**



(Manually sign or type your complete name.
NOTE: By typing your complete name, you are
hereby consenting to use of electronic signature.)

Please Note: Your application will be retained for one year. Once Completed, this form, including all attachments, become public record.

FOR OFFICE USE ONLY:

Appointed to Seat #: _____ Term Expires: _____ Date Seat was Vacated: _____

**CERTIFICATE OF WILLINGNESS TO SERVE ON THE GOVERNING BOARD
OF THE SAN FRANCISCO HEALTH AUTHORITY**

X x, 2026

I, Michael Chung, as a representative of Chinese Hospital, am willing to accept the appointment to serve on the Governing Board of the San Francisco Health Authority.

Michael Chung (SIGNATURE)

4/30/2026 (DATE)

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

A PUBLIC DOCUMENT

Date Initial Filing Received

Filing Official Use Only

 E-Filed
 05/26/2026
 13:01:21

 Filing ID:
 216818937

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)

Chung, Michael

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City and County of San Francisco

Division, Board, Department, District, if applicable

Your Position

Health Authority

Board Member

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: _____ Position: _____

2. Jurisdiction of Office (Check at least one box)☐ State☐ Judge (Supreme, Appellate, Superior Court), Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)☐ Multi-County _____☒ County of San Francisco☐ City of _____☐ Other _____**3. Type of Statement (Check at least one box)**☐ **Annual:** The period covered is January 1, 2025, through December 31, 2025.

-or-

The period covered is ____/____/____, through December 31, 2025.

☒ **Assuming Office:** Date assumed 01 / 21 / 2026☐ **Leaving Office:** Date Left ____/____/____
(Check one circle below.)☐ The period covered is January 1, 2025, through the date of leaving office.

-or-

☐ The period covered is ____/____/____, through the date of leaving office.☐ **Candidate:** Date of Election _____ and office sought, if different than Part 1: _____**4. Schedule Summary (required)**

► Total number of pages including this cover page: 1

Schedules attached☐ **Schedule A-1 - Investments** – schedule attached☐ **Schedule C - Income, Loans, & Business Positions** – schedule attached☐ **Schedule A-2 - Investments** – schedule attached☐ **Schedule D - Income – Gifts** – schedule attached☐ **Schedule B - Real Property** – schedule attached☐ **Schedule E - Income – Gifts – Travel Payments** – schedule attached☐ **Attachment 700-P - Prospective Employment (87200 Filers Only)** – schedule attached-or- ☒ **None - No reportable interests on any schedule****5. Verification**MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)

San Francisco

CA

94015

DAYTIME TELEPHONE NUMBER

()

EMAIL ADDRESS

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 05/26/2026
(month, day, year)Signature Michael Chung
(File the originally signed paper statement with your filing official.)



Via Email

May 29, 2026

Victor Young
Clerk of the Board
Board of Supervisor Office
Victor.Young@sfgov.org
1 Dr. Carlton B. Goodlett Place, Room 244
San Francisco, CA 94102

Re: Appointment of Tangerine Brigham to the San Francisco Health Authority Governing Body

Dear Mr. Young:

This purpose of this letter and enclosed documents is to request the appointment of Tangerine Brigham to Seat #3 of the Governing Body of the San Francisco Health Authority.

I certify that Tangerine Brigham, Deputy Director/Chief Operating and Strategy Officer, San Francisco Health Network (SFHN), is qualified to be appointed to the San Francisco Health Authority Governing Body Seat #3, who "Must be employed in the senior management of San Francisco General Hospital (now known as Zuckerberg San Francisco General Hospital (ZSFG)." Ms. Brigham's position as the Deputy Director/Chief Operating and Strategy Officer of SFHN includes senior management responsibilities of ZSFG. Enclosed please find a letter from Daniel Tsai, Director of Health, designating Ms. Brigham to serve on the San Francisco Health Authority Governing Body. Additionally, Ms. Brigham has provided a statement indicating a willingness to serve, which is enclosed. We request that the Rules Committee and Board of Supervisors schedule the appointment of Ms. Brigham to the San Francisco Health Authority Governing Body, retroactively to January 21, 2026, as soon as possible.

We appreciate your assistance with our request. Please feel free to reach out with any additional information you may need or questions you may have.

Sincerely,

A handwritten signature in black ink, appearing to read "Nina Maruyama", with a large, stylized loop at the beginning.

Nina Maruyama
Chief Compliance and Regulatory Affairs Officer
nmaruyama@sfhp.org

Enclosures



City and County of San Francisco
Daniel L. Lurie
Mayor

San Francisco Department of Public Health

Daniel Tsai
Director of Health

May 6, 2026

Yolanda R. Richardson
Chief Executive Officer
San Francisco Health Authority
50 Beale Street, 12th Floor
San Francisco, CA 94105

Dear Ms. Richardson:

In accordance with Section 14087.36(k)(1)(C) of the California Welfare and Institutions Code and Section 69.4(j) of the San Francisco Administrative Code, the Zuckerberg San Francisco General Hospital and Trauma Center hereby designate Tangerine Brigham, Deputy Director/Chief Operating and Strategy Officer, San Francisco Health Network, to serve on the Governing Board of the San Francisco Health Authority.

Sincerely,

A handwritten signature in blue ink, appearing to read "D. Tsai".

Daniel Tsai
Director of Health

Cc: Tangerine Brigham, Deputy Director/Chief Operating and Strategy Officer, SFHN



Board of Supervisors
City and County of San Francisco
1 Dr. Carlton B. Goodlett Place, Room 244
(415) 554-5184 FAX (415) 554-7714

Application for Boards, Commissions, Committees, & Task Forces

Name of Board, Commission, Committee, or Task Force: San Francisco Health Authority

Seat # or Category (If applicable): #3 District: n/a

Name: Tangerine Brigham

California United States Zip: 94608

Occupation: Health Professional

Work Phone: 1 415-770-8322 Employer: San Francisco Department of Public Health

Business Address: 1001 Potrero Avenue, Building 2, 2nd Fl., Room 227 San Francisco California United States Zip: 94110

Business E-Mail: tangerine.brigham@sfdph.org Home E-Mail: _____

Pursuant to Charter Section 4.101 (a)2, Boards and Commissions established by the Charter must consist of electors (registered voters) of the City and County of San Francisco. For certain other bodies, the Board of Supervisors can waive the residency requirement.

Check All That Apply:

Registered voter in San Francisco: Yes ☐ No ☒ If No, where registered: Alameda County

Resident of San Francisco ☐ Yes ☒ No If No, place of residence: Oakland, CA

Pursuant to Charter section 4.101 (a)1, please state how your qualifications represent the communities of interest, neighborhoods, and the diversity in ethnicity, race, age, sex, sexual orientation, gender identity, types of disabilities, and any other relevant demographic qualities of the City and County of San Francisco:

I am dedicated to improving communities and mitigating the impacts of low-income socio-economic status that jeopardize health outcomes and quality of life. As a former Medi-Cal recipient and someone who has a family member on Medi-Cal, I understand the importance of providing publicly-funded health insurance that is accessible, timely and high quality. With respect to my demographic profile, I am a single black woman in her 60s.

Business and/or professional experience:

I serve as the Chief Operating and Strategy Officer of the San Francisco Health Network which serves as the integrated health care delivery system for the San Francisco Dept. of Public Health (SFDPH). The network includes Zuckerberg San Francisco General. I have over 25 years of experience in the public and non-profit sectors crossing the fields of health, supportive housing, philanthropy and social services. I have significant Medi-Cal managed care experience and currently under my jurisdiction is SFDPH's Office of Managed Care. Former positions with managed care responsibilities include Chief Administrative Officer – Population Health (Alameda Health System), Deputy Director, Managed Care Services (Los Angeles County Dept. of Health Services) and Chief of Staff - Administrative Services (L.A. Care). In a prior SFDPH position, I worked on the development of the San Francisco Health Authority.

Civic Activities:

I have served on and held leadership positions on several non-profit boards, including but not limited to: San Francisco Housing Accelerator Fund (2022 to present), Mercy Housing California (2012 - 2021), Insure the Uninsured Project (2011 - 2020), Tenderloin Neighborhood Development Corporation (2004 - 2010) and First Place for Youth (2004 - 2010).

Have you attended any meetings of the Board/Commission to which you wish appointment? Yes ☒ No ☐

For appointments by the Board of Supervisors, appearance before the RULES COMMITTEE is a requirement before any appointment can be made. (*Applications must be received 10 days before the scheduled hearing.*)

Date: 05/04/26 Applicant's Signature: (required)

Signed by:
Tangerine Brigham
28A57FE0FE9E492...

(Manually sign or type your complete name.
NOTE: By typing your complete name, you are
hereby consenting to use of electronic signature.)

Please Note: Your application will be retained for one year. Once Completed, this form, including all attachments, become public record.

FOR OFFICE USE ONLY:

Appointed to Seat #: _____ Term Expires: _____ Date Seat was Vacated: _____

**CERTIFICATE OF WILLINGNESS TO SERVE ON THE GOVERNING BOARD
OF THE SAN FRANCISCO HEALTH AUTHORITY**

May 1, 2026

I, Tangerine Brigham, as a representative of the Zuckerberg San Francisco General Hospital and San Francisco Health Network, am willing to accept appointment to serve on the Governing Board of the San Francisco Health Authority.

Signed by:

Tangerine Brigham

28A57FE0FE9E492...

(SIGNATURE)

05/04/26

(DATE)

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

A PUBLIC DOCUMENT

Date Initial Filing Received

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 E-Filed
 05/15/2026
 18:56:20

 Filing ID:
 216777767

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)

Brigham, Tangerine M

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City and County of San Francisco

Division, Board, Department, District, if applicable

Your Position

Health Authority

Board Member

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: Position:

2. Jurisdiction of Office (Check at least one box)☐ State☐ Judge (Supreme, Appellate, Superior Court), Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)☐ Multi-County☒ County of San Francisco☐ City of☐ Other**3. Type of Statement (Check at least one box)**☐ **Annual:** The period covered is January 1, 2025, through December 31, 2025.

-or-

The period covered is ____/____/____, through December 31, 2025.

☐ **Leaving Office:** Date Left ____/____/____
(Check one circle below.)☐ The period covered is January 1, 2025, through the date of leaving office.

-or-

☐ The period covered is ____/____/____, through the date of leaving office.☒ **Assuming Office:** Date assumed 01 / 21 / 2026☐ **Candidate:** Date of Election and office sought, if different than Part 1:**4. Schedule Summary (required)**

► Total number of pages including this cover page: 1

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 MAILING ADDRESS STREET CITY STATE ZIP CODE
 (Business or Agency Address Recommended - Public Document)

San Francisco

CA

94110

DAYTIME TELEPHONE NUMBER

EMAIL ADDRESS

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I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

 Date Signed 05/15/2026
 (month, day, year)

 Signature Tangerine M Brigham
 (File the originally signed paper statement with your filing official.)