

File No. 260202

Committee Item No. 8

Board Item No. _____

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee: Budget and Finance Committee Date April 8, 2026

Board of Supervisors Meeting Date _____

Cmte Board

- Motion
- Resolution
- Ordinance
- Legislative Digest
- Budget and Legislative Analyst Report
- Youth Commission Report
- Introduction Form
- Department/Agency Cover Letter and/or Report
- MOU
- Grant Information Form
- Grant Budget
- Subcontract Budget
- Contract/Agreement
- Form 126 – Ethics Commission
- Notice of Award/Award Letter
- Application
- Public Correspondence

OTHER (Use back side if additional space is needed)

- FYI Referral 3/3/2026
- HSS Presentation 4/8/2026
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____

Completed by: Brent Jalipa Date April 2, 2026

Completed by: Brent Jalipa Date _____



Understanding the Roles, Responsibilities, and Limitations of SFHSS and the Health Service Board

Presented by
Rey Guillen, *Executive Director*

April 8, 2026

Agenda

1. Role of San Francisco Health Service System (SFHSS) and the Health Service Board (HSB)
2. Limitations of SFHSS and HSB
3. Role of Health Plans/Vendors
4. Health Plan Oversight
5. Member Escalation

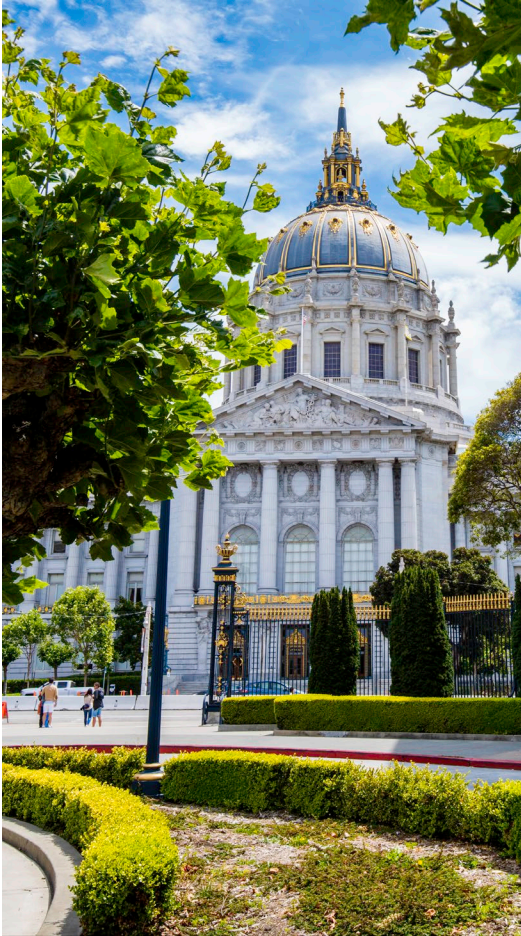
San Francisco Health Service System and Health Service Board

Role of SFHSS: What SFHSS Can Do



- Administer and implement the decisions of the Health Service Board (HSB) according to the City Charter
- Manages enrollment according to local, state, and federal rules
- Supports HSB in fiduciary duties
- Contracts with plan administrators to deliver services
- Evaluates and monitors plan compliance and performance according to our contractual agreements

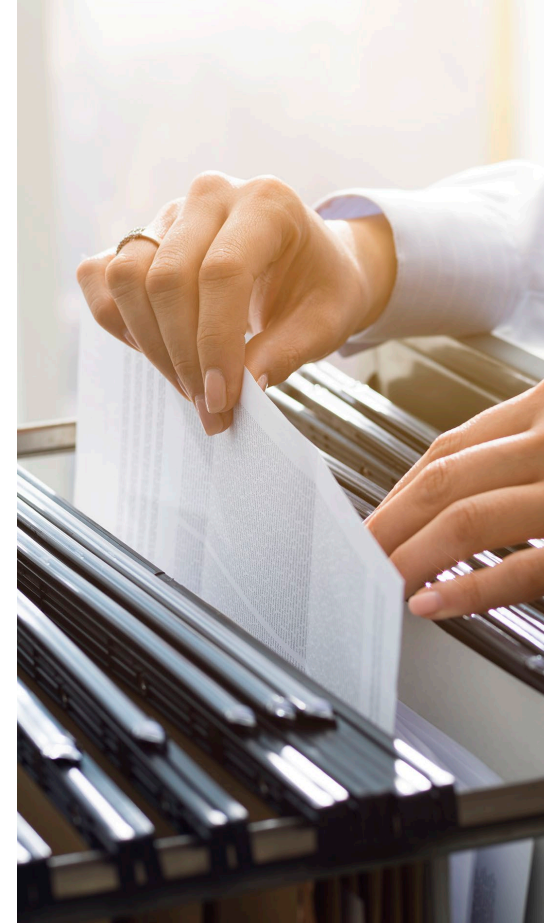
Role of Health Service Board: What HSB Can Do



- Sets the policy direction for the San Francisco Health Service System
- Approves plan design and selects health plan vendors under City Charter authority
- Approves the rates and benefits
- Maintains fiduciary and settlor responsibilities

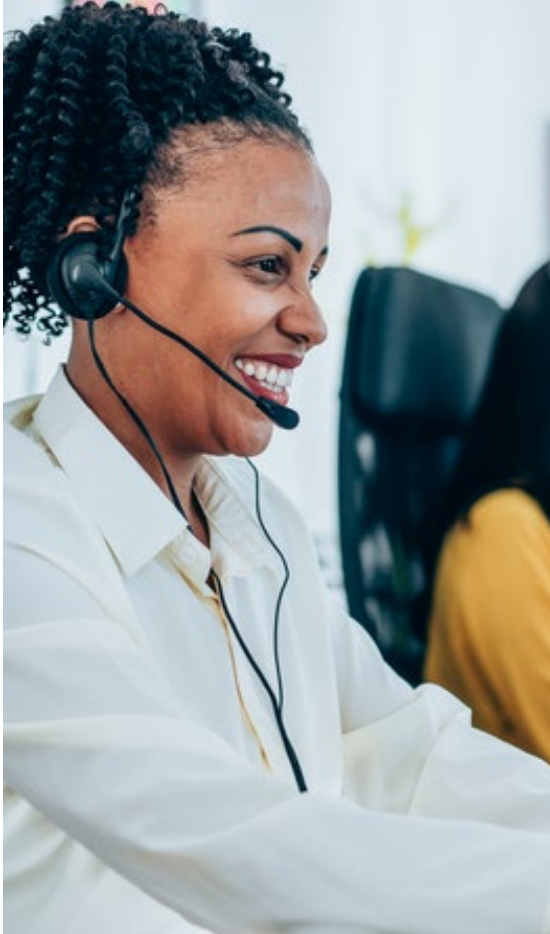
What SFHSS and HSB Cannot Do

- **Cannot demand** health plans overturn denied prior authorizations/claims which follow the plan's or governmental criteria for medical necessity or are otherwise excluded from coverage
- **Cannot reduce** the time allowed by regulators to facilitate the review of prior authorizations, claims, appeals, or grievances
- **Cannot access** individual cases for prior authorization or medical claim denials without HIPAA-compliant release
- **Does not** employ medical professionals for the purpose of reviewing prior authorizations and medical claims



Health Plans and Vendors

Role of Health Plans / Vendors

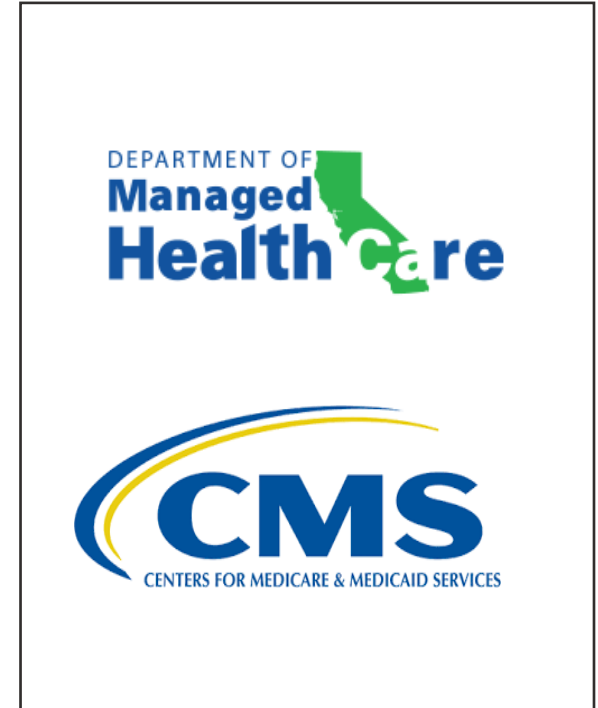


- Provide benefits in accordance with Evidence of Coverage (EOC)
- Manage provider networks and member inquiries
- Conduct medical necessity reviews for prior authorization and claims processing
- **Must comply with:**
 - Department of Managed Health Care (DHMC)
 - California Department of Insurance (CDI)
 - Centers For Medicare & Medicaid Services (CMS)
 - and FDA regulations
- Health plans do not provide direct patient care

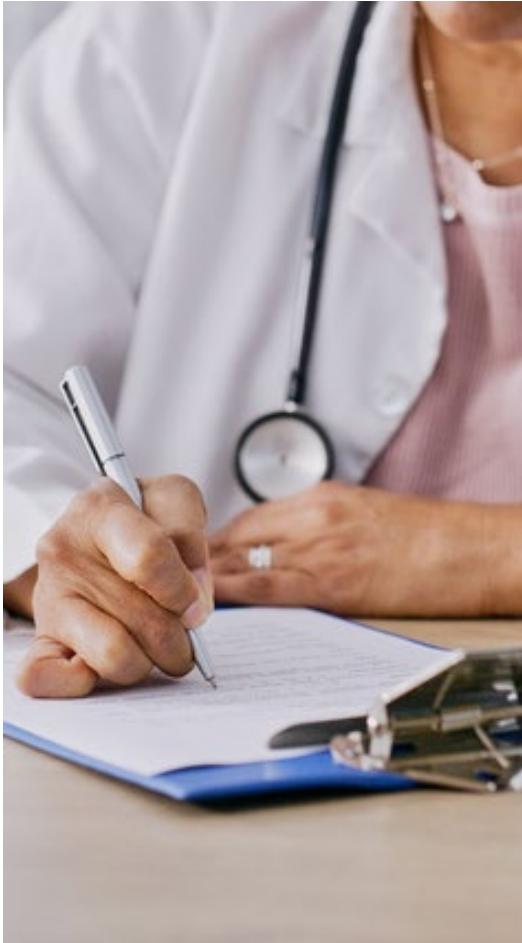
Health Plan Oversight

Health Plan Regulators

- Department of Managed Health Care (DMHC)
- Centers For Medicare & Medicaid Services (CMS)



Health Plan Oversight

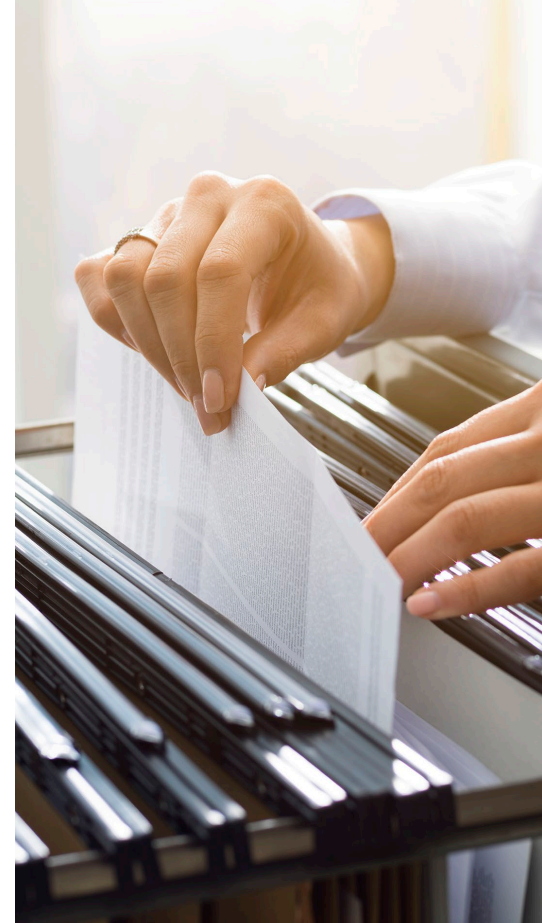


- Regulatory agencies set compliance rules and determine compliance
- Investigate complaints, enforce regulations, issue penalties
- Access point for Independent Review Entities (IREs) such as Maximus for Medicare Advantage

Member Escalation

Member Escalation Paths

- Vendor Appeals & Grievances (most expedient and required process)
 - External review from Qualified Independent Contractor
- Submit complaint directly to regulator after the vendor has issued an adverse determination
- If unclear where to start, contact SFHSS for next steps members can take to facilitate access to care



Summary

Summary

What SFHSS Can Do	What HSB Can Do	What SFHSS & HSB Cannot Do	Role of Health Plan	Health Plan Oversight
<ul style="list-style-type: none"> ▪ Implement HSB decisions ▪ Manage enrollments ▪ Contracts with vendors ▪ Monitor contractual agreements 	<ul style="list-style-type: none"> ▪ Set policies ▪ Approve plan designs ▪ Select health plan vendors ▪ Approve rates and benefits 	<ul style="list-style-type: none"> ▪ Overturn denied prior authorizations/claims that follow medical necessity ▪ Access individual cases ▪ Reduce time allowed by regulators for review 	<ul style="list-style-type: none"> ▪ Provide benefits per EOC ▪ Manage provider networks ▪ Conduct medical necessity reviews for prior authorizations and claims 	<ul style="list-style-type: none"> ▪ Set compliance rules ▪ Determine compliance ▪ Enforce regulations ▪ Investigate complaints



Thank You

Questions?

BOARD of SUPERVISORS



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MEMORANDUM

TO: Rey Guillen, Executive Director, Health Service System
Mary Hao, President, Health Service Board
Andrew Kiefer, Vice President of Government Affairs, Blue Shield of California
Fred Sanchez, President, Protect Our Benefits

FROM: Brent Jalipa, Assistant Clerk
Budget and Finance Committee

DATE: March 3, 2026

SUBJECT: HEARING MATTER INTRODUCED

The Board of Supervisors' Budget and Finance Committee has received the following hearing request, introduced by Supervisor Connie Chan:

File No. 260202

Hearing on the denial of health care, including cancer care for San Francisco workers, retirees and their families by Blue Shield; and requesting the San Francisco Health Services Board, Blue Cross Blue Shield of California, and Protect our Benefits to report.

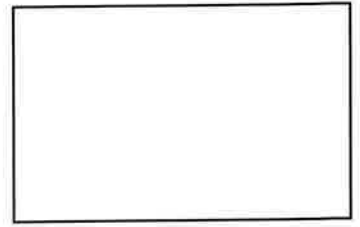
Pursuant to the hearing request, you or a representative will be expected to attend and present on the subject when this matter is agendaized.

If you have any comments or reports to be included with the file, please forward them to me by email to: brent.jalipa@sfgov.org.

c: Holly Lopez, Health Service Board
Robyn Burke, Office of Supervisor Connie Chan

Introduction Form

(by a Member of the Board of Supervisors or the Mayor)



I hereby submit the following item for introduction (select only one):

- 1. For reference to Committee (Ordinance, Resolution, Motion or Charter Amendment)
- 2. Request for next printed agenda (For Adoption Without Committee Reference)
(Routine, non-controversial and/or commendatory matters only)
- 3. Request for Hearing on a subject matter at Committee
- 4. Request for Letter beginning with "Supervisor _____ inquires..."
- 5. City Attorney Request
- 6. Call File No. _____ from Committee.
- 7. Budget and Legislative Analyst Request (attached written Motion)
- 8. Substitute Legislation File No. _____
- 9. Reactivate File No. _____
- 10. Topic submitted for Mayoral Appearance before the Board on _____

The proposed legislation should be forwarded to the following (please check all appropriate boxes):

- Small Business Commission Youth Commission Ethics Commission
- Planning Commission Building Inspection Commission Human Resources Department

General Plan Referral sent to the Planning Department (proposed legislation subject to Charter 4.105 & Admin 2A.53):

- Yes No

(Note: For Imperative Agenda items (a Resolution not on the printed agenda), use the Imperative Agenda Form.)

Sponsor(s):

Chan, Dorsey

Subject:

Hearing - Blue Cross Blue Shield of California Insurance Denial of Care

Long Title or text listed:

Hearing on the denial of health care, including cancer care for San Francisco workers, retirees and their families by Blue Shield; and requesting that the San Francisco Health Services Board, Blue Cross Blue Shield of California, and Protect our Benefits to report.

Signature of Sponsoring Supervisor: