



San Francisco Ethics Commission

25 Van Ness Avenue, Suite 220, San Francisco, CA 94102

Phone: 415.252.3100 . Fax: 415.252.3112

ethics.commission@sfgov.org . www.sfethics.org

Received On:

File #: 200674

Bid/RFP #:

Notification of Contract Approval

SFEC Form 126(f)4

(S.F. Campaign and Governmental Conduct Code § 1.126(f)4)

A Public Document

Each City elective officer who approves a contract that has a total anticipated or actual value of \$100,000 or more must file this form with the Ethics Commission within five business days of approval by: (a) the City elective officer, (b) any board on which the City elective officer serves, or (c) the board of any state agency on which an appointee of the City elective officer serves. For more information, see: <https://sfethics.org/compliance/city-officers/contract-approval-city-officers>

1. FILING INFORMATION

TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
Original	
AMENDMENT DESCRIPTION – Explain reason for amendment	

2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
office of the clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Michael Visconti	628-652-4645
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
HSS Health Service System	Michael.visconti@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Kaiser Foundation Health Plan, Inc, North and South CA	TELEPHONE NUMBER 510-271-5910
STREET ADDRESS (including City, State and Zip Code) 1950 Franklin Street Oakland, CA 94612	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 200674
DESCRIPTION OF AMOUNT OF CONTRACT \$472,420,422		
NATURE OF THE CONTRACT (Please describe) <p>Medical Health Insurance: Kaiser Permanente Traditional Plan in California, HMO, Senior Advantage with Part D in California, Kaiser Permanente Early Retiree Plans in Hawaii, Northwest, and Washington regions, and Senior Advantage with Part D in Hawaii, Northwest, and Washington regions.</p> <p>Kaiser Permanente California Active/Early Retirees: \$415,359,148 Medicare Retirees: \$56,119,708 Kaiser Permanente Multi Region Early and Medicare Retirees: \$941,566</p>		

7. COMMENTS
*The amount of this contract is based on the most recent actuarial information and will change due to employee resignations, new hires, terminations and other attrition factors, as well as member selections at the time of qualifying events.

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Greg A. Adams		Board of Directors
2	Ramon Baez		Board of Directors
3	David J. Barger		Board of Directors
4	Regina Benjamin, MD, MBA		Board of Directors
5	Jeff Epstein		Board of Directors
6	Leslie S. Heisz		Board of Directors
7	David F. Hoffmeister		Board of Directors
8	Judith A. Johansen, JD		Board of Directors
9	Meg Porfido, JD		Board of Directors
10	Matthew Ryan		Board of Directors
11	Richard P. Shannon, MD		Board of Directors
12	Cynthia A. Telles, PhD		Board of Directors
13	A. Eugene Washington, MD,		Board of Directors
14	Gregory A. Adams		CEO
15	Anthony A. Barrueta		Other Principal Officer
16	Vanessa M. Benavides		Other Principal Officer
17	Bechara Choucair, MD		Other Principal Officer
18	Richard (Dick) D. Daniels		Other Principal Officer
19	Tom Hanenburg		Other Principal Officer

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
20	Catherine Hernandez		Other Principal Officer
21	Kim Horn		Other Principal Officer
22	Kathy Lancaster		CFO
23	Janet A. Liang		COO
24	Philip Madvig, MD		Other Principal Officer
25	Christian Meisner		Other Principal Officer
26	Julie Miller-Phipps		Other Principal Officer
27	Susan Mullaney		Other Principal Officer
28	Michael Ramseier		Other Principal Officer
29	Jim Simpson		Other Principal Officer
30	Arthur M. Southam, MD		Other Principal Officer
31	Paul Swenson		Other Principal Officer
32	Ron Vance		Other Principal Officer
33	Ruth Williams-Brinkley		Other Principal Officer
34	Mark. S. Zelman		Other Principal Officer
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9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor’s board of directors; (B) the contractor’s principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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Check this box if you need to include additional names. Please submit a separate form with complete information. Select “Supplemental” for filing type.

10. VERIFICATION

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information I have provided here is true and complete.

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

<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
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