FORM SFEC-126: NOTIFICATION OF CONTRACT APPROVAL

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

City Elective Officer Information (Please print clearly.)	
Name of City elective officer(s):	City elective office(s) held:
Members, San Francisco Board of Supervisors	Members, San Francisco Board of Supervisors

Contractor Information (*Please print clearly*.)

Name of contractor:

Delta Dental of California (Delta Dental PPO Active Self Insured and Retiree PPO fully insured, and DeltaCare DHMO)

Please list the names of (1) members of the contractor's board of directors; (2) the contractor's chief executive officer, chief financial officer and chief operating officer; (3) any person who has an ownership of 20 percent or more in the contractor; (4) any subcontractor listed in the bid or contract; and (5) any political committee sponsored or controlled by the contractor. Use additional pages as necessary.

(1)DIRECTORS AND OFFICERS

Glen F. Bergert, **2nd Vice Chair** 560 Mission Street, Suite 1300 San Francisco, CA 94105

R. Kent Farnsworth, DDS, **Secretary** 560 Mission Street, Suite 1300 San Francisco, CA 94105

Lynn L. Franzoi, **Chair** 560 Mission Street, Suite 1300 San Francisco, CA 94105

Roy A. Gonella, 1st Vice Chair 560 Mission Street, Suite 1300 San Francisco, CA 94105

Gregory D. Kaplan, DDS 560 Mission Street, Suite 1300 San Francisco, CA 94105

Steven F. McCann 560 Mission Street, Suite 1300 San Francisco, CA 94105

Terry A. O'Toole, **Treasurer** 560 Mission Street, Suite 1300 San Francisco, CA 94105

Stephen R. Pickering, DDS 560 Mission Street, Suite 1300 San Francisco, CA 94105

Andrew J. Reid, **Immediate Past Chair** 560 Mission Street, Suite 1300 San Francisco, CA 94105

Heidi Yodowitz 560 Mission Street, Suite 1300 San Francisco, CA 94105

Michael J. Castro, **Chief Executive Officer** 560 Mission Street, Suite 1300

San Francisco, CA 94105

(2)

President/Chief Executive Officer – Michael J. Castro Chief Financial Officer – Alicia F. Weber Chief Operations Officer – Roy Gilbert

(3) None

(4) None

None

(5) None

Contractor address:

560 Mission Street, Suite 1300, San Francisco, California 94105

Date that contract was approved:

Amount of contract: (estimated for CY 2020)

Delta Dental PPO -

<u>Policy Number 01673 – Retirees (fully-insured premium)</u>

• \$50,703,767

Delta Dental PPO -

<u>Policy Number 09502 – Actives (self-funded claims + admin.)</u>

• \$15,744,141

DeltaCare USA – DHMO

Policy Number 71797 – DeltaCare (fully-insured

premium)

• \$888,785

Describe the nature of the contract that was approved:

Dental Health Insurance Benefits

Comments:

The amount of this contract is based on the most recent 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. The Delta Dental PPO Active Self-Insured Plan is based on actual claims and administration.

This contract was approved by (check applicable):

- □ the City elective officer(s) identified on this form
- √ a board on which the City elective officer(s) serves San Francisco Board of Supervisors

Print Name of Board

☐ the board of a state agency (Health Authority, Housing Authority Commission Parking Authority, Redevelopment Agency Commission, Relocation Appeals I on which an appointee of the City elective officer(s) identified on this form sits	Board, Treasure Island Development Authority)
Print Name of Board	
Filer Information (Please print clearly.)	
Name of filer: Angela Calvillo, Clerk of the Board	Contact telephone number: (415) 554-5184
Address: City Hall, Room 244, 1 Dr. Carlton B. Goodlett Pl., San Francisco, CA 94102	E-mail: Board.of.Supervisors@sfgov.org
Signature of City Elective Officer (if submitted by City elective officer)	Date Signed
Signature of Board Secretary or Clerk (if submitted by Board Secretary or Cler	k) Date Signe