FORM SFEC-126: NOTIFICATION OF CONTRACT APPROVAL

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

City Elective Officer Information (Please print clearly.)	2013 AUG - 7 Pii L: 18
Name of City elective officer(s):	City elective office(s) held:
Mayor Edwin M. Lee	Mayor, City and County of San Francisco

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 Barbara J. Burgel

San Francisco, CA 94105 D. Douglas Cassat, DDS

San Francisco, CA 94105 Lynn L. Franzoi

San Francisco, CA 94105 Devang M. Gandhi, DDS, Secretary

San Francisco, CA 94105 Roy Gonella

San Francisco, CA 94105 Beverly A. Kodama, DDS

San Francisco, CA 94105 Steven F. McCann, 1st Vice Chair

San Francisco, CA 94105 Terry A. O'Toole, Treasurer

San Francisco, CA 94105 Renuka (Becky) P. Patel, Chair

San Francisco, CA 94105

Stephen R. Pickering, DDS

San Francisco, CA 94105 Gary D. Radine (Ex Officio)

San Francisco, CA 94105 Jo Bonita Rains

San Francisco, CA 94105 Andrew J. Reid, 2nd Vice Chair

San Francisco, CA 94105

Amount of contract estimated for CY 2014:
\$57,266,493.00*
Delta Dental PPO -Policy Number 1673 – Retirees \$11,215,907.00
Delta Dental PPO -Policy 9502 – Actives: (Self-funded
Claims + Admin.)
\$45,032,742.00
DeltaCare USA – DHMO Policy # 01797
cent information and will change due to employee
s well as member selections at the time of qualifying events.
l claims and administration.
P1 ' M I)
Edwin M. Lee)
Print Name of Board
thority Commission, Industrial Development Authority
sion, Relocation Appeals Board, Treasure Island
elective officer(s) identified on this form sits
Contact telephone number:
(415) 554-5105
E-mail:
Jason.elliott@sfgov.org
8/2/2
ficer) Date Signed
ficer) Date Signed
etary or Clerk) Date Signed