

MEETING:
SUPERINTENDENT'S INSURANCE ADVISORY
COMMITTEE (SIAC)

March 9, 2022

1:00 – 4:00 p.m.

Location:
ESF Training Room 3 & 4

Meeting called by: Amy Williams

Type of meeting: Advisory

Minutes by: Antonia Scipio

SIAC Members present: Amy Williams (BFT); Kyle Savage (BFT); Leslie Lawter (Local 1010); Sharon McNichols (Retirees); Nel Marshall (School Administration); Patrick Darville (1010); Lisa Schmidt (Benefits)

Staff: Cindy Lesinski (CFO), Katye Campbell (Board member); Antonia Scipio (Dir. Employee Benefits & Risk); Dr. Beth Thedy (Deputy Superintendent/CHRO); Bonnie Doss (BPS)

Absent: Dan Bennett (BFT)

Guests: Karyle Green

MINUTES

Welcome and Introductions: Amy welcomed all to the meeting and called the meeting to order.

Approval of the February 23, 2022, SIAC Minutes: Amy asked if any discussion was needed on the last meeting's minutes. There was none. Nel Marshall made a motion to approve the minutes, Sharon McNichols seconded. The committee unanimously approved the minutes.

Old Business

Contribution Modeling 2023 Workbook Discussion: All Committee Members participated in the modeling of the 2023 Workbook Discussion.

- 2023 Renewal Projection: modeling examples and discussion by the committee:
 - EE Modeling Tab used to show results for the following percentage increases to the coverage tiers of Employee only/ Employee + spouse /Employee + child(ren) /Family:
 - 20/25/20/25 (both plans)
 - 25/35/30/35, 15/40/25/40 (Gold)
 - 16/20/17/20 10/33/20/30 (Silver)
 - EE + Spouse increase scenarios to include the Spousal Surcharge
 - EE + Children increase scenarios: How many children are on the plan and possible look at a tiering option
 - Kids Care Options offered by the state
 - Surcharge increases for: Tobacco (self-reported), Spousal coverage and Wellness
 - Employer contribution levels are out of range on some of the tiers particularly EE + Spouse
 - Employee and Spouse working for BPS ("Combined Household") and premium cost differential
 - Shifting *active* employees 65+ to Medicare
 - Major migration to the Silver plan would impact revenue
- **Plan Design Change Discussion:**
 - Proposed Plan Design changes will have very little impact to the cost of the plan but will influence steerage
 - Reviewed proposed plan design changes to A) increase the Silver plan Schedule 2 deductibles and B) eliminate cross accumulation of deductibles between Schedule 1 and Schedule 2. This requires employees to start from a \$0 deductible for Schedule 2 services (rather than starting with a "credit" from Schedule 1 services).
 - Increase the out-of-pocket maximum for Silver Plan Schedule 2 to the highest allowable by ACA.
 - Debbie explained that this recommendation addresses utilization of Gold In-network providers vs. Silver Schedule 2 providers and steers employees to the right hospitals

and facilities. Cigna reported current usage of Silver Schedule 2 facilities is at 4% cost due to usage. 47% of admissions are going to Health First facilities

- Out-of-network spend on Gold is relatively low
 - Kyle made the motion not to make any changes to the proposed plan design changes. The motion did not pass.
 - Clean up the plan design: Sharon made a motion to discontinue cross accumulation of deductibles between Schedule 1 and Schedule 2 on the Silver plan. Kyle seconded the motion, which was passed by all.
 - Recommendation to change the proposed deductible increase of \$5,000/\$10,000 to \$3000/\$6000. Request to model an in-network Gold as a separate deductible like an out-of-network Silver, however this will not make the plan rightsized on the wellness option.
 - Request for data by salary level for tier banding. This can be provided for use in modeling plan year 2024 premiums.
- **Discussion:**
 - Marathon Well-Care Center cost vs. benefits to the 1010 employees who are robust users
 - Committee agrees that, based on the state of the Trust Fund, there will need to be an increase to premium. Nell would like to hear about a tiered approach. Lisa would like Lockton to provide modeling on salary banding. Leslie brought up the cost to retirees
 - Lockton explained how salary banding works; can have the potential to have more than 36 rates for 2 plans due to: wellness, incentives, different rates. Recommended only 2 salary bands (TBD) and a set date after which salary changes would not affect premiums.
 - Medical plan cost based on salary and group. Lockton indicated this information is not captured by Cigna. The current structure includes Active, Retiree, and Cobra

Kyle and Leslie requested data by employee by income group for 1010 – BFT – Non-bargaining on the health plan. Lisa said she can prepare that.

Kyle requested to continue the discussion in the next meeting to make an additional decision on annual wellness exams for the 2023 plan year instead of waiting for the 2024 plan year. Add CBC panel to annual physical to the upcoming 2023 plan year by adding a look-back period

Kyle proposed to have participants on the Gold Plan in 2024 complete an annual exam. This will be the gatekeeper for participation in that plan. Lockton confirmed this can be done. Requested to bring back a plan on how we can make the CBC panel during an annual physical a reality

Negotiate a plan with Marathon to get more appointments for the annual exams at the Well-Care Centers. Lockton provided the following data from Cigna: 72% of employees have a PCP or specialist office visit, 45% of adults completed an annual wellness exam

Amy requested employee-only data of who completed an annual exam

Katy Campbell, brought up the possibility of on-site mobile wellness exams

Amy asked what is the deadline for any suggested changes? Antonia responded: Committee suggestions needed by no later than the next meeting (Wednesday, March 23, 2022)

Kyle asked about the Dental report. Lockton responded the report was received the day before (Tuesday, March 8, 2022). Antonia shared that the Dental report will be sent with the next meeting's documents.

Adjourned: The meeting adjourned at 3:51 p.m.

Upcoming SIAC Meeting: Wednesday, March 23, 2022