

Greater Tompkins County Municipal Health Insurance Consortium

New Member/Director Orientation

Elin R. Dowd- Executive Director

Kylie Rodrigues- Benefits Specialist

Teri Apalovich- Finance Manager





Agenda

Who is the Consortium

Self Funded Multiple Municipal Cooperative

Membership

Governance–Role of the Board
of Directors/ Committees

Annual Municipal Member
Expectations

Other Services

Billing

Enrollment

Consortium Staff Contacts

What is the **Consortium?**



Our Company's Values

Mission Statement:

GTCMHIC is an efficient inter-municipal cooperative that provides high-quality, cost-stable health insurance for members and their employees and retirees.

Vision Statement:

GTCMHIC provides its municipal partners in Tompkins County and the sixteen contiguous counties, a menu of health insurance plans to the benefit of the employees, retirees, and their families.

- The Consortium administers operations by collaborating with claims administrators, providers, and employee representatives in an effort to manage its costs, efficiencies, and success.
- The Consortium strives to provide a trustworthy, responsive, and efficient vehicle that enables access to its quality products, models a new health insurance paradigm, and educates its members to become more directly involved in their own personal health.
- The Consortium promotes a culture of preventive health care for the well-being of its members.

Self Funded Multiple Municipal Cooperative

We are...

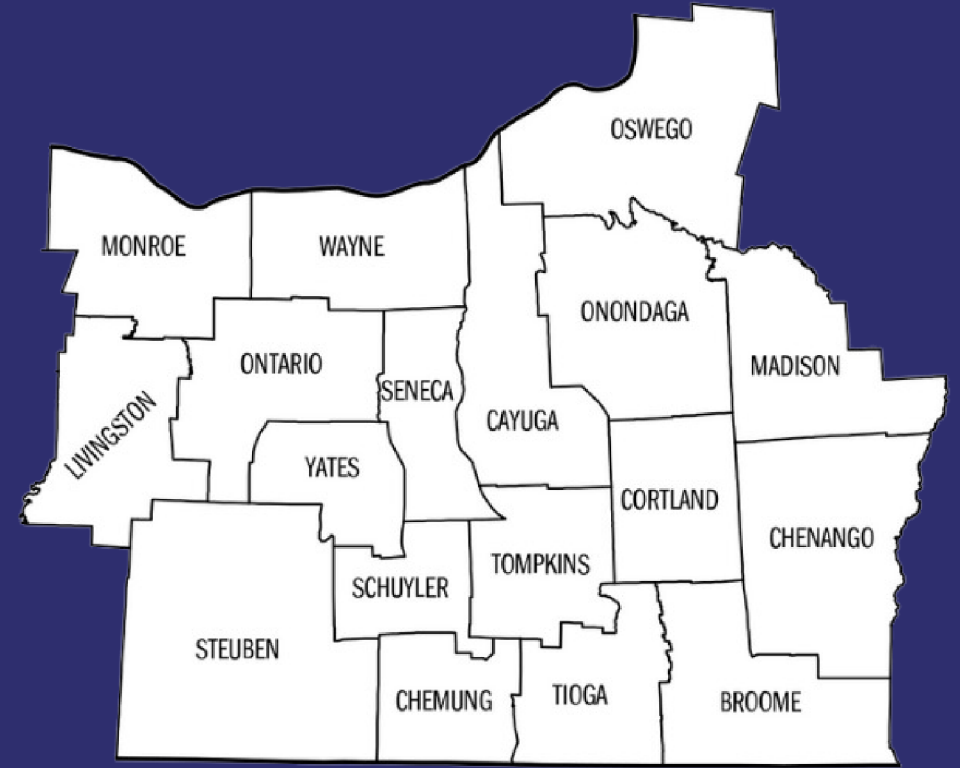
- one self funded community governed under Article 47 of the New York State (NYS) insurance law.
- managed under the adoption of a Municipal Cooperative Agreement (MCA)
- obligated to adhere to specific NYS Mandates
 - Offer COBRA coverage for 36 months
- a large risk pool which helps us keep premium rates low

Our Municipal Members...

- are the owners and write the benefit plans
- fill voting seats on the Governing Board of Directors
- include labor in the Governance Structure
- considered part of a Large Group Health Insurance coverage
 - Medicare will be secondary to any active working employee who is enrolled in Medicare (ESRD exception)

Membership

Consortium membership was initially offered to each municipal corporation within the geographical boundaries of **Tompkins County** and six contiguous counties of **Cayuga, Chemung, Cortland, Schuyler, Seneca, and Tioga**. On August 18, 2021 the NYS Department of Financial Services (DFS) approved a new Certificate of Authority expanding membership to include **Broome, Chenango, Madison, Onondaga, Ontario, Oswego, Steuben, Wayne, and Yates Counties**. In 2023, DFS approved the addition of **Livingston and Monroe Counties**.



In 2024, we will have 64 municipal partners and 7,000 covered lives.

GTCMHIC Municipal Partners

Cayuga County

Town of Aurelius
Town of Brutus
Town of Locke
Town of Mentz
Town of Montezuma
Town of Moravia
Town of Owasco
Town of Scipio
Town of Sennett
Town of Springport
Town of Throop
Village of Fair Haven
Village of Union Springs

Cortland County

City of Cortland
Town of Cincinnatus
Town of Cuyler
Town of Homer
Town of Marathon
Town of Preble
Town of Truxton
Town of Virgil
Town of Willet
Village of Homer

**We make a lot of our
connections to new
members through
our referrals from
our existing
members.**

Madison County

Town of DeRuyter

Chemung County

Town of Big Flats
Town of Horseheads
Village of Horseheads

Onondaga County

DeWitt Fire District
Town of Camillus
Town of DeWitt
Village of Camillus
Village of Fayetteville
Village of Minoa
Village of Skaneateles

Ontario County

City of Geneva

Oswego County

Town of Hastings
Town of West Monroe

Schuyler County

Town of Catharine
Town of Dix
Town of Hector
Village of Watkins Glen

Seneca County

Seneca County

Steuben County

Town of Erwin

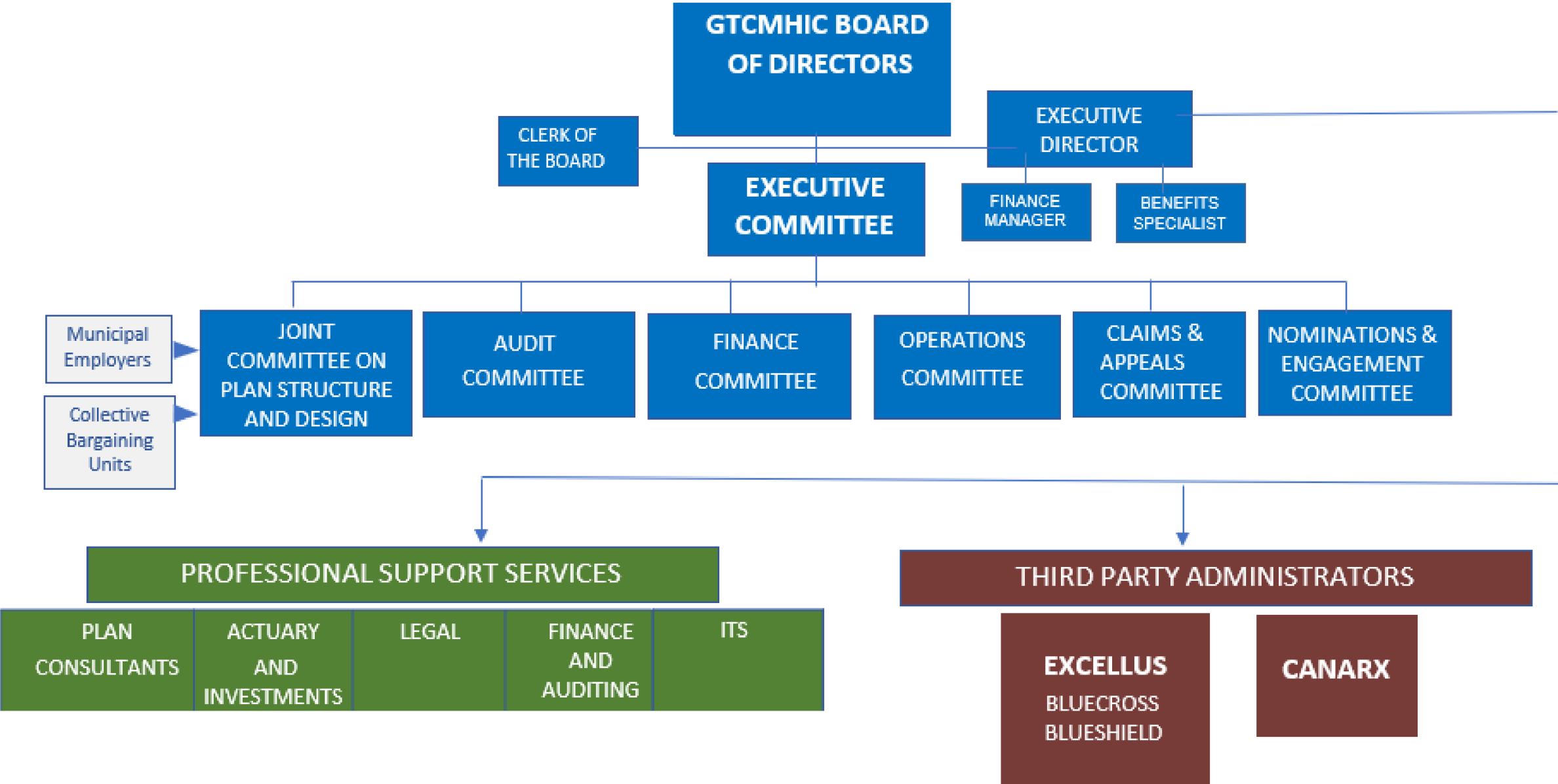
Tioga County

Town of Spencer
Town of Tioga
Village of Owego

Tompkins County

City of Ithaca
Lansing Community Library
Tompkins County
Town of Caroline
Town of Danby
Town of Dryden
Town of Enfield
Town of Groton
Town of Ithaca
Town of Lansing
Town of Newfield
Town of Ulysses
Village of Cayuga Heights
Village of Dryden
Village of Freeville
Village of Groton
Village of Lansing
Village of Trumansburg

GTCMHIC 2024 Organizational Chart



Governance

Role of the Board of Directors and Committees



Municipal Member Committee Involvement

Required Municipal Representation

- Board of Directors
- Executive Committee
 - Only if serving as an officer, committee chair, or at-large member
 - Elected by Board annually
- Joint Committee on Plan Structure and Design

Optional Municipal Representation

- Audit Committee
- Claims and Appeals Committee
- Finance Committee
- Nominations and Engagement Committee
- Operations Committee

Committees

All municipalities are required to have representation on the following committees:

- **Board of Directors**– governing board of the Consortium, responsible for management, control and administration of the Consortium and the Benefit Plan(s).
- **Joint Committee on Plan Structure and Design (Management and Labor)**– is comprised of municipal and labor representatives. This Committee examines and reports out their recommendations to the Board of Directors on any changes of the Health Insurance Consortium benefit plans.
- **Executive Committee**– duties to conduct certain business operations on behalf of the Consortium by the Board of Directors.

Municipalities have the option of joining the following committees:

- **Audit Committee**– ensures necessary compliance and manages annual independent audit process.
- **Finance Committee**– reviews regulatory reporting, develops policies related to investments and financial controls, and recommends a yearly budget to the Board including annual premium rates and funding of reserves.
- **Operations Committee**– reviews and develop methods of operations to preserve and improve efficiency and cost effectiveness.
- **Nominations and Engagement Committee**– develops recommendations to maintain Board and Committee membership and involvement.
- **Claims and Appeals Committee**– review medical/prescription claims and appeals and manages the claims audit.

Board of Directors

- Approve the annual budget each year
- Approve premium rates
- Accept new members
- Approve new benefit plan design
- Elect Executive Committee Members and Officers
- Ensure fiscal soundness and prudent operation of the organization
- Directors are encouraged to communicate back to their respective legislative body
- Directors are encouraged to become involved at the committee level
- Currently meets in August and September or each year

Board Educational Virtual
Session

August 22nd

Mandatory Board Meeting

September 26th Noon

GTCMHIC Headquarters

Joint Committee on Plan Structure and Design (Joint Committee)

Membership

- Made up of labor and management representatives who come together with a common goal.
- Currently meets four times a year starting in May, or as needed.

Benefit Plan Design Changes

- Reviews recommendations on market data regarding benefit plan design changes. Changes are necessary to remain competitive, offer the best value to our members, and stay in compliance with the Affordable Care Act.
- Recommends plan changes to the Board of Directors
- The Board of Directors will consider and approve the plan changes
- Notifications are made to municipal partners
- Changes are coordinated with Excellus
- Plan Changes are usually effective January 1st of the following year

Wellness Program

- The Joint Committee provides input for the Consortium Wellness Program
 - Focused topics for monthly wellness updates
 - Wellness challenge/prize ideas

Annual Municipal Member Expectations

Required Meetings

- Annual Educational Session and Board of Directors Meeting (August and September)
- Joint Committee– held four times per year starting in May or as needed
- Benefit Clerk Trainings

Required Employee Engagement

- Host Open Enrollment (November)
 - Allow all health insurance eligible employees an opportunity to make changes to their coverage and enroll/terminate coverage
 - Changes effective January 1st
- Offer COBRA coverage to all employees leaving coverage
 - Lifetime Benefit Solutions will provide this service to all small group municipalities

Required Documentation Submissions

- Chief Executive Officer must sign the Municipal Cooperative Agreement (MCA) annually
 - Provide supporting municipal resolution
- Directors/ Alternate Directors sign Code of Ethics (annually)

Other Services



Lifetime Benefit Solutions



Consortium Pricing

By being a Consortium member you have access to discounted rates for various services through Lifetime Benefit Solutions.

LBS Sales Representative Daniel Burkey-
daniel.burkey@lifetimebenefitsolutions.com

COBRA Administration Services

| | |
|---|--|
| <input type="checkbox"/> COBRA Administration | \$0.58 Per Enrolled Per Month (\$55.00 Monthly Minimum) |
|---|--|

Flexible Spending Account Administration Services

| | |
|--|---|
| FSA Administration | \$3.00 Per Enrolled FSA Participant Per Month* |
| Account Type Options | (\$75 Monthly Minimum) |
| <input type="checkbox"/> Health Care Account | |
| <input type="checkbox"/> Dependent Care Account | |
| <input type="checkbox"/> Transportation Spending Account | |
| <input type="checkbox"/> Limited Purpose FSA | |
| | *Pricing includes multiple product offerings (i.e. FSA/HRA) |

Health Reimbursement Account Administration Services

| | |
|---|---|
| HRA Administration | \$3.00 Per Enrolled HRA Participant Per Month* |
| Account Type Options | (\$75 Monthly Minimum) |
| <input type="checkbox"/> Health Reimbursement Account | |
| <input type="checkbox"/> Limited Purpose HRA | |
| | *Pricing includes multiple product offerings (i.e. FSA/HRA) |

Health Savings Account Administration Services

| | |
|---|---|
| <input type="checkbox"/> Health Savings Account | \$1.25 Per Enrolled HSA Participant Per Month |
|---|---|

Retiree and/or Active Premium Billing Administration Services

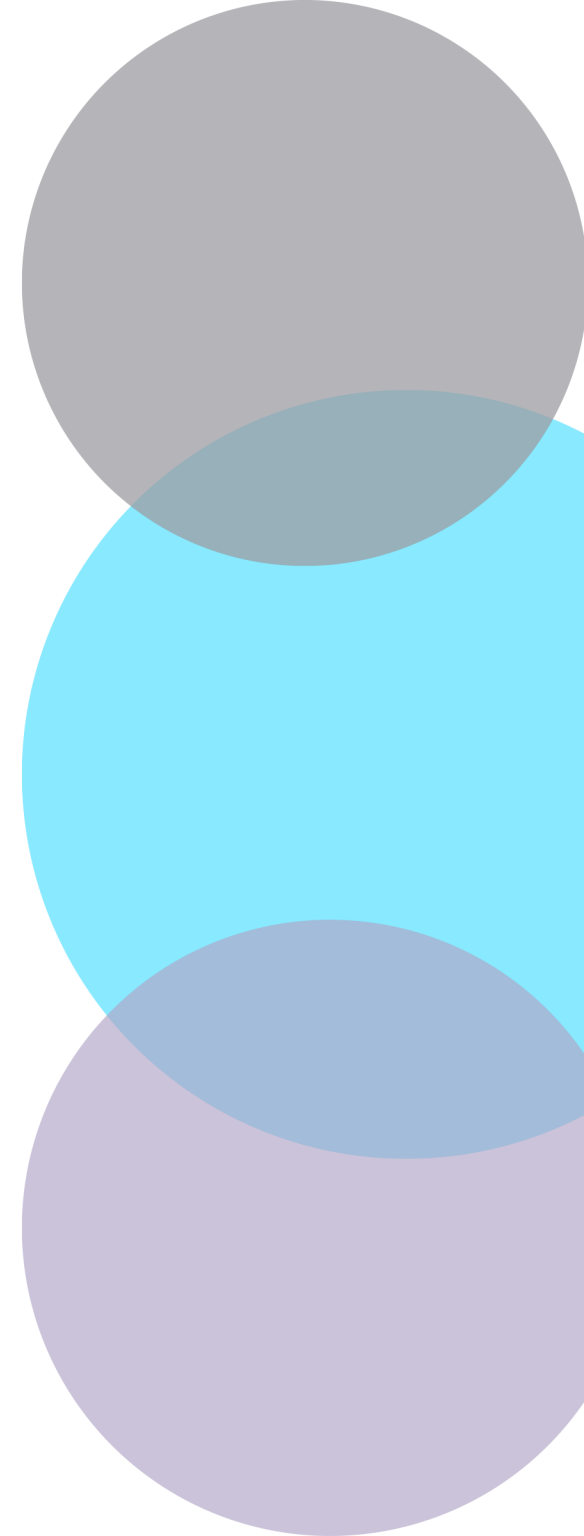
| | |
|--|---|
| <input type="checkbox"/> Retiree and/or Active Premium Billing | \$2.75 Per Billed Retiree/Active Per Month (Monthly minimum of \$50 for retiree premium billing Monthly minimum of \$75 for active premium billing) |
|--|---|

COBRA Administration

Small Group Administration Only

Lifetime Benefit Solutions Administration

- Terminations are submitted via Consortium/Excellus Website
- COBRA notices/mailings are generated
 - Enrollment is processed through LBS submission to Excellus
 - LBS bills the ex-employee directly 102% premium rate
 - LBS sends payments to the municipal employer
 - Consortium's billing continues but with 102% premium rate for COBRA enrollments



Small Group: Municipal Members

Town of Aurelius

Town of Big Flats

Town of Brutus

Town of Caroline

Town of Catharine

Town of Cincinnatus

Town of Cuyler

Town of Danby

Town of DeRuyter

Town of Dix

Town of Dryden

Town of Enfield

Town of Erwin

Town of Groton

Town of Hastings

Town of Hector

Town of Homer

Town of Horseheads

Town of Lansing

Town of Locke

Town of Marathon

Town of Mentz

Town of Montezuma

Town of Moravia

Town of Newfield

Town of Owasco

Town of Preble

Town of Scipio

Town of Sennett

Town of Springport

Town of Spencer

Town of Throop

Town of Tioga

Town of Truxton

Town of Ulysses

Town of Virgil

Town of West Monroe

Town of Willet

Village of Camillus

Village of Cayuga Heights

Village of Dryden

Village of Fair Haven

Village of Fayetteville

Village of Freeville

Village of Groton

Village of Homer

Village of Horseheads

Village of Lansing

Village of Minoa

Village of Owego

Village of Skaneateles

Village of Trumansburg

Village of Union Springs

Village of Watkins Glen



DeWitt Fire District

Lansing Community Library

EAP- Employee Assistance Program

Joint Committee Requested Additional Mental Health Supports

Consortium Negotiated Pricing

Pricing is \$18.61 Per Employee Per Year for 2024

**Direct Contracted Service with ESI EAP to
Municipalities**

ESI EAP offers services beyond mental health support, including financial planning, caregiving support, childcare support and more!

Notify krodrigues@tompkins-co.org if interested in enrolling or to request the full list of benefits.



Consortium Wellness Program

- We are dedicated to promoting healthy living to all of our members. We do this by providing **monthly emails to all Benefit Clerks/Wellness Champions** to promote wellness activities, education, and various wellness challenges.
- We provide prizes for wellness challenges, some are individual challenges and some are municipality challenges.
- We also **host yearly flu clinics and Blue4U clinics (biometric screenings)** during the calendar year that are included in your membership and available to all subscribers enrolled with the Consortium.
- We encourage you to share our wellness emails with staff, promote participation in challenges and use of the Excellus tools such as Blue365, Wellframe, and online account access that all have features that promote wellness.
- Join our Facebook page: [GTC Municipal Health Insurance Consortium](#)



Wear Pink Day- promoting
October Breast Cancer
Awareness Month
Town of Dryden employees

Staying Connected in 2024



Consortium Connection (Newsletter)

New!!* Subscribe to the Consortium Connection Newsletter

* indicates required

Email Address *

First Name

Last Name

Subscribe

made with  mailchimp

Click on the Current Newsletter Tab. It will take you to the subscribe page to sign up to receive our newsletter via email in 2024.

Our newsletter is published quarterly and contains information on a variety of topics including budget information, wellness, staffing changes, new member additions, and more!

Consortium Member Support

Customer Service

- Has a direct Excellus Customer Service line **1-877-253-4797** available to all our members
- Consortium Benefits Specialist available on staff to handle and investigate any member issues including claims, benefit questions and comparisons
- Plan Information By Municipality is available on our website:
<https://www.healthconsortium.net/empl-retiree/benefits-municipality>

Plan Options

- Works with your municipality to determine the plan that best fits your needs
 - provides additional data to help with your negotiations
 - host employee informational meetings including Open Enrollment which is required to be held each November
- Offers a variety of plan options including, Medicare Supplement for retirees

Accessibility of Information

- Our website and staff provide current information whenever needed
- Continual available trainings offered throughout the year through the Consortium

Excellus



Access to Care

**Provider and Pharmacy Networks,
BlueCard**

Member Resources

MD Live, Blue 365, Mobile App, Online Account

Customer Service

1-877-253-4797

Billing



Invoicing Process

- The Consortium receives your full/reviewed employee roster of new health plan enrollees and submits the information to Excellus
- The Consortium receives the Excellus roster file to create an invoice
- Pay your invoice as it is sent, adjustments will be made on future invoices
- Regardless of when you add a new member you will be charged the full month premium

GTCMHIC Billing Procedure

- Enrollment changes that are entered by the Municipality/GTCMHIC and made by Excellus **prior to the 12th of the month will be picked up in the Excellus reports that are run on the 14th of the month for billing to the municipality by the GTCMHIC.**
- **GTCMHIC invoices in full months only.** This is especially useful to know when entering **terminations** into Excellus. If an employee's last day is the last day of the month, please use the actual date at the end of the month, **do not use the 1st of the next month.** If the 1st of the next month is used, the municipality will be invoiced for another full month of insurance for that employee.
- **In order to process payments in a timely manner, GTCMHIC bills municipal partners 2 months ahead.** The reason for this timing is so municipalities that send the GTCMHIC invoice through their abstract have time to get this process completed and have payment to GTCMHIC by the due date.

GTCMHIC Billing Example

First New Municipal Member Bill

- GTCMHIC has generated a bill based off the enrollment census
- The bill is sent in November with a due date of 12/31/2023.
- The bill will include January 2024 premiums.

Example: Tom Jones is hired 2/1/2024

- His Enrollment form is entered prior to 2/12/2024
- The Excellus report run by GTCMHIC happens on 2/14/2024.
- Invoice produced in February is for the Municipality for April 2024, due date of 3/31/2024
 - There will be a retroactive adjustment for 2 months (February and March)

GTCMHIC Billing Example

Example: Anita Baker is hired 5/1/2024

- Enrollment form is entered 6/16/2024
- Excellus report run by GTCMHIC takes place 5/14/2024
 - Invoice produced for the Municipality for July, due date 6/30/2024 will not have Anita Baker on it
- Excellus report run by GTCMHIC on 6/14/2024
 - Invoice produced for the Municipality for August, due date of 7/31/2024 will not have Anita Baker on it.
- Excellus report run by GTCMHIC on 7/14/2024
 - Invoice produced for the Municipality for September 2024, due date of 8/31/2024 will have a **retroactive adjustment** added for 4 months (May, June, July, and August for Anita Baker)

New Subscriber or Subscriber Changes

- Small Group municipalities would complete Plan Enrollment Forms and submit them directly through the Consortium Subscriber Enrollment Portal on the website.
 - The Plan Enrollment form is used to add, remove, or make changes to a subscriber's coverage

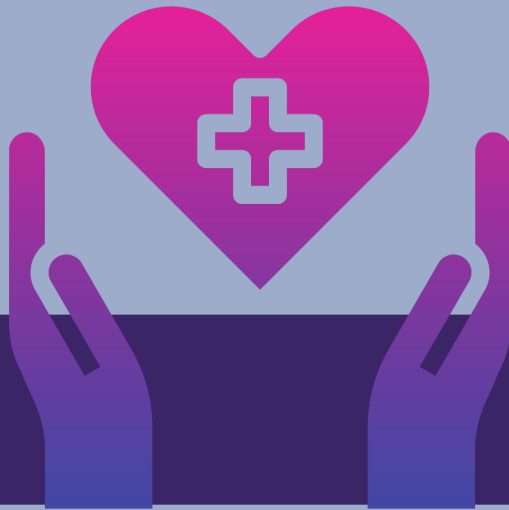
www.healthconsortium.net

- Large Group Municipalities would enter enrollments and changes directly into the Excellus website.

www.excellusbcbs.com

Who can be covered by the plan?

How to make changes?



Employees
**Employee's spouse/
domestic partner**

Dependents which include:
**Children- natural, adopted
and step-children**
Domestic partner children

**Verify any
dependents qualify
and collect
supporting
documentation for
your records.**

**Complete an updated
Enrollment Form and
submit to the Consortium/
Excellus**



Greater Tompkins County Municipal Health Insurance Consortium

Governance ▾

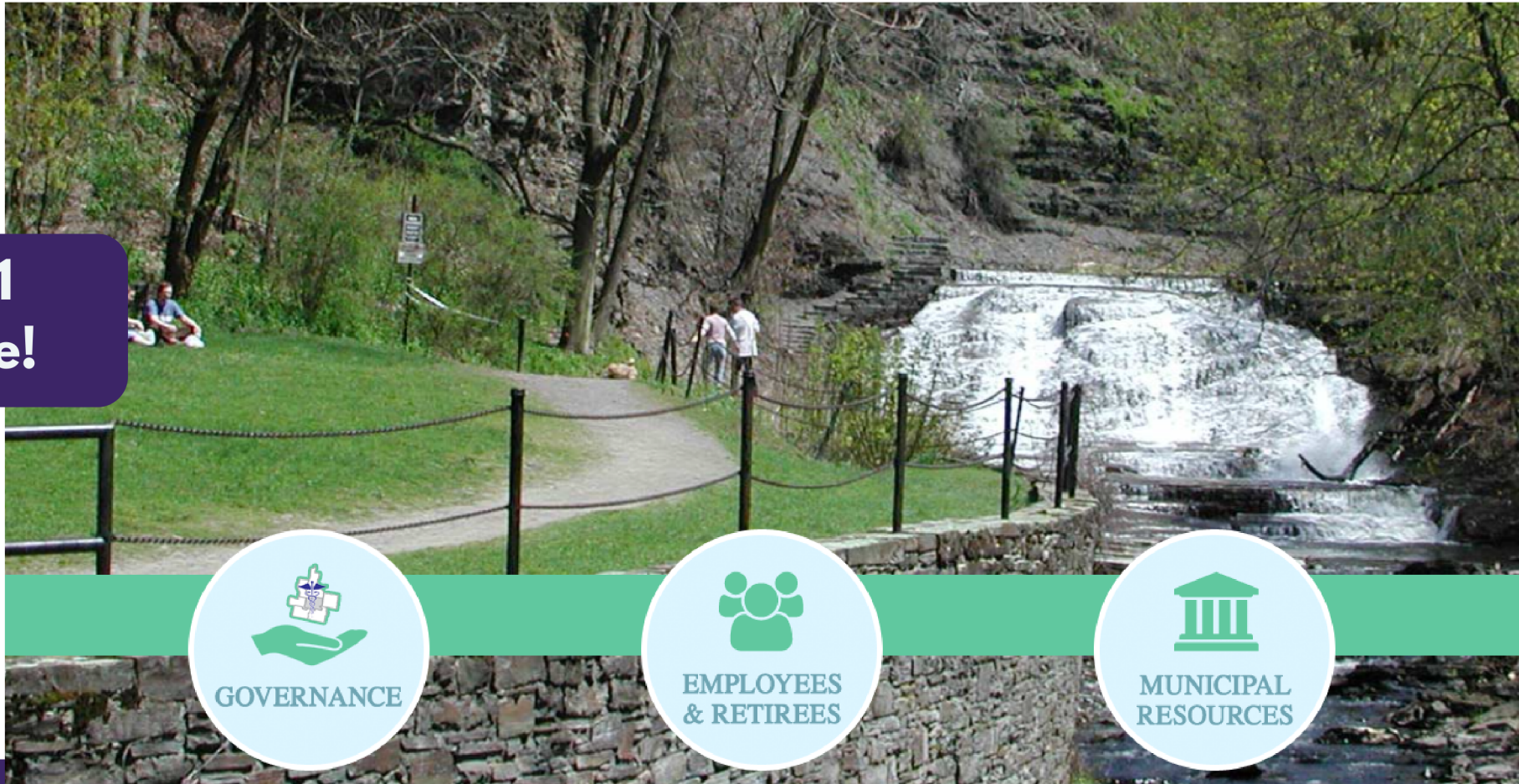
Employee/Retiree
& Wellness
Information ▾

Municipal
Resources ▾

About Us ▾

Current
Newsletter

**Your #1
Resource!**



GOVERNANCE



EMPLOYEES
& RETIREES



MUNICIPAL
RESOURCES

www.healthconsortium.net

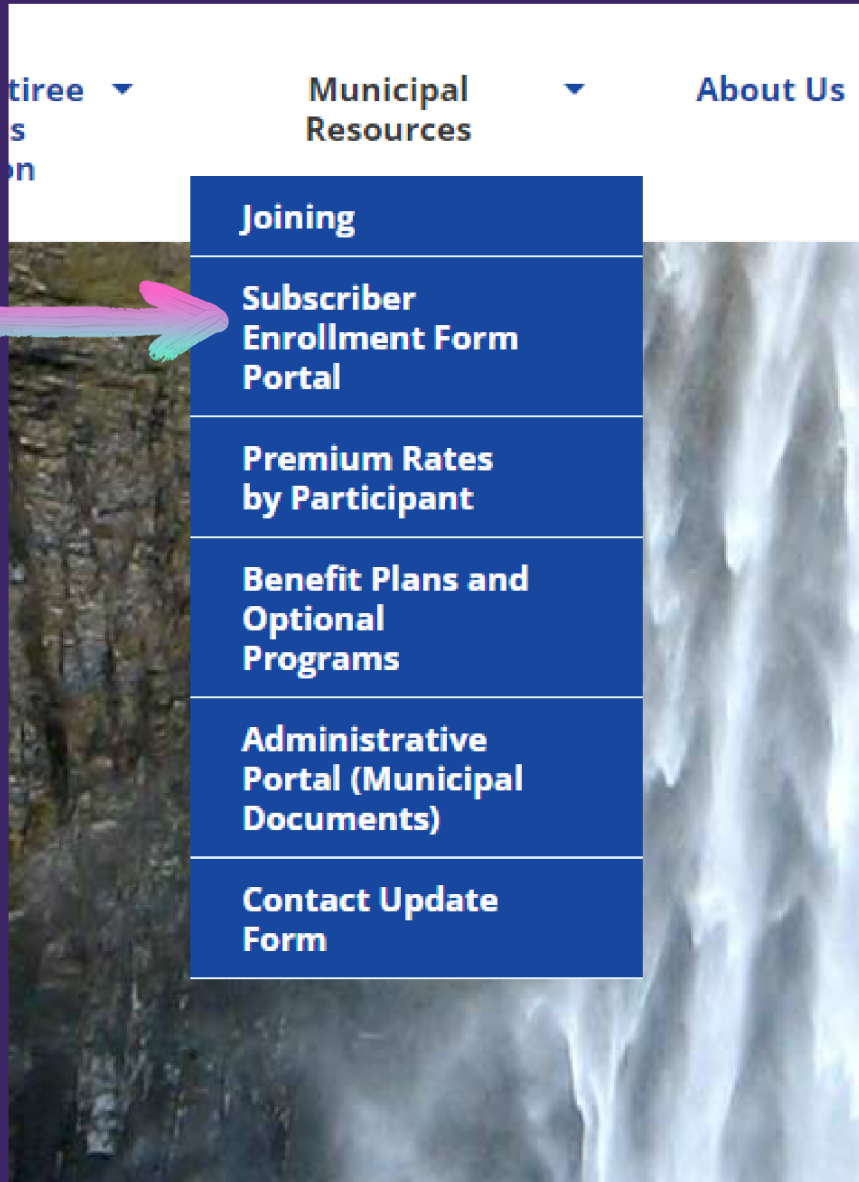
Enrollment Forms

Enrollment Forms can be found on our website
www.healthconsortium.net

Hover over Municipal Resources and select Subscriber Enrollment Form Portal.

You will see a list of municipalities. Select your municipality and it will take you directly to a PDF version of your Enrollment Form.

Note: Each enrollment form is municipality specific with their distinct group number and available plans filled in on the form.



Submitting Enrollment Forms



If you submit directly through Excellus you would continue to follow the same procedure.

tree
s
in

Municipal Resources

About Us

Joining

Subscriber Enrollment Form Portal

Premium Rates by Participant

Benefit Plans and Optional Programs

Administrative Portal (Municipal Documents)

Contact Update Form



If you submit all your enrollment changes to the Consortium you scan the completed Enrollment Form and upload to the Subscriber Enrollment Form Portal.

Plan Enrollment/Change Forms

Instructions for Enrollment Additions/Deletions/Changes:

- Complete Enrollment Form (Below) and Submit by secure [Subscriber Enrollment Form Portal](#);
- Once the enrollment application is received by the Consortium, the enrollment data will be submitted online within three (3) business days. Confirmation or notice of incomplete information will be sent to municipal partner from the Consortium within 3 business days.
- Online Enrollment Policy (Adopted via Resolution No. [003-2018](#))





FOR INTERNAL USE ONLY

HIOS ID#

EC

Commercial Group Health Insurance Application/Change Form

Please print clearly and complete all sections that apply. Signatures are required. Additional instructions included on Page 4.

Section 1: Employer Group & Benefit Information To be completed with your Group Administrator

Town of Groton

Check Desired Action
☐ Add ☐ Cancel ☐ Change

Employer Name

Association/Chamber Name (if applicable)

Group Administrator's Signature (required)

Date

Employee Number

Department Number

Medical Information

00036762

Medical Group Number (8 digits)

Medical Subgroup Number (4 digits)

Medical Class Number (e.g. A001)

If enrolling in a Medical plan, who do you need coverage for?
☐ Self Only
☐ Self & Child(ren)
☐ Self & Spouse, or Self & Domestic Partner
☐ Family

Medical Effective Date

Subscriber Status:
☐ Actively Working
☐ Retired
☐ Disabled
☐ Canceled
☐ COBRA

Dental Information

Dental Group Number

Dental Subgroup Number

Dental Class

Dental Effective Date

If enrolling in a Dental plan, who do you need coverage for?
☐ Self Only
☐ Self & Child(ren)
☐ Self & Spouse, or Self & Domestic Partner
☐ Family

Medical Plan Selection

☐ BGO CB 100/300

☐

☐

☐

☐

☐

Dental Plan Selection

☐

☐

☐

☐

☐

☐

Section 2: Subscriber's Information

The enrollment form will show the group number and plans currently available under your municipality.

Please complete as much as the form as possible. Incomplete forms can slow down the enrollment process.

Let's review how to complete an enrollment form.





Greater Tompkins County Municipal
Health Insurance Consortium

FOR INTERNAL USE ONLY

HIOS ID# _____
EC _____

Commercial Group Health Insurance Application/Change Form

CONFIDENTIAL

Please print clearly and complete all sections that apply. Signatures are required. Additional instructions included on Page 4.

Section 1: Employer Group & Benefit Information To be completed with your Group Administrator

Town of Groton

Check Desired Action

☐ Add ☐ Cancel ☐ Change

Employer Name

Association/Chamber Name (if applicable)

Group Administrator's Signature (required)

Date

Employee Number

Department Number

Medical Information

00036762

Medical Group Number (8 digits)

Medical Subgroup Number (4 digits)

Medical Class Number (e.g. A001)

If enrolling in a Medical
plan, who do you need
coverage for?

☐ Self Only

☐ Family

Medical Effective Date

Subscriber
Status:

☐ Actively
Working

☐ Retired

☐ Disabled

☐ Canceled

☐ COBRA

Note: Terminations should be on the end of the month so another bill is not incurred for ending coverage on the first the following month.

Section 1: The Enrollment Form needs to be signed by the Group Administrator. This can be the Benefit Clerk or designated Consortium Director for the municipality.

Check Desired Action:

Add- New Hires

Cancel- Terminates policy

Change- adding/removing dependents, updating address/ phone number

Medical Effective Date

Must be completed to know when desired action needs to occur.



Greater Tompkins County Municipal
Health Insurance Consortium

FOR INTERNAL USE ONLY

HIOS ID# _____
EC _____

Commercial Group Health Insurance Application/Change Form

CONFIDENTIAL

Please print clearly and complete all sections that apply. Signatures are required. Additional instructions included on Page 4.

Section 1: Employer Group & Benefit Information To be completed with your Group Administrator

| | | | |
|---|--|---|-----------------|
| Town of Groton | | Check Desired Action <input type="checkbox"/> Add <input type="checkbox"/> Cancel <input type="checkbox"/> Change | |
| Employer Name | | Association/Chamber Name (if applicable) | |
| Group Administrator's Signature (required) | | Date | Employee Number |
| Department Number | | | |
| Medical Information | | | |
| 00036762 Medical Group Number (8 digits) | | If enrolling in a Medical plan, who do you need coverage for? <input type="checkbox"/> Self Only <input type="checkbox"/> Family | |
| Medical Subgroup Number (4 digits) | | Subscriber Status: <input type="checkbox"/> Actively Working <input type="checkbox"/> Retired <input type="checkbox"/> Disabled <input type="checkbox"/> Canceled <input type="checkbox"/> COBRA | |
| Medical Class Number (e.g. A001) | | Medical Effective Date | |

Note: Medical Effective Date can be the date of hire but the Consortium will still bill the municipality for the entire month.

Self Only vs. Family

Select Self Only for individual coverage.

Select Family coverage if the subscriber is covering spouse/domestic partner or dependents.

Subscriber Status:

Actively Working- employees actively working

Retired- employees not working but covered under the policy in retirement

Canceled- terminated

COBRA- offered to employees who lose employment

Subscriber Status= Plan Classification

This is important to set up coordination of benefits especially for retirees.

Consortium Website

www.healthconsortium.net

- Utilize our website to secure information
- Access [benefit plan enrollment forms](#)
- [Subscriber portal upload link](#) (to submit enrollment forms)
- [Plan benefit summaries](#)
- [Premium equivalent rates](#)
- All meeting agendas and minutes
- Calendar of upcoming meetings, trainings, and events
- [Financial reports](#)
- [Consortium Connection Newsletters](#)
- Facebook Page: [GTC Municipal Health Insurance Consortium](#)

What do your employees **Need to know?**

Utilize the Excellus website and 800 number for additional information

Excellus: www.excellusbcbs.com

1-877-253-4797

Excellus Mobile App

Questions about providers/pharmacies being in network with new insurance can be verified on the Excellus website or by calling their customer service phone number.

Check out **CanaRx** on the Consortium website for additional **prescription savings**

Contact Information

Who to call at the Consortium



Elin Dowd-
Executive Director

edowd@tompkins-co.org
607-274-5590



Lynne Sheldon-
Clerk of the Board

Administrative and Board related
questions
consortium@tompkins-co.org
607-274-5931



Teri Apalovich-
Finance Manager

Invoices and Billing
tapalovich@tompkins-co.org
607-274-5932



Kylie Rodrigues-
Benefit Specialist

Benefits and Enrollment
krodrigues@tompkins-co.org
607-274-5933

Greater Tompkins County Municipal Health Insurance Consortium

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Health Insurance Consortium
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Ithaca, NY 14851

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Ithaca, NY 14850

Phone: (607) 274- 5590

Email: consortium@tompkins-co.org

Website: www.healthconsortium.net

Facebook: [GTC Municipal Health Consortium](#)

