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MINUTES

Greater Tompkins County Municipal Health Insurance Consortium
Joint Committee on Plan Structure and Design
May 7, 2015 – 1:30 p.m.

Approved

Present:

Municipal Representatives: 7 members

Betty Conger, Village of Groton; Mike Murphy, Village of Dryden; Herb Masser, Town of Enfield
Jennifer Case, Town of Dryden; Laura Shawley, Town of Danby; Joan Mangione, Village of
Cayuga Heights; Brooke Jobin, Tompkins County

Municipal Representative via Proxy: 4

Mack Cook, City of Cortland (Proxy – Brooke Jobin); Judy Drake, Town of Ithaca (Proxy –
Brooke Jobin); Genevieve Suits, Village of Homer (Proxy – Laura Shawley); Ruth Hopkins,
Town of Lansing (Proxy – Betty Conger)

Union Representatives: 6 members

Tim Farrell, City of Ithaca DPW; Olivia Hersey, TC3 Professional Admin. Association; Tim
Logue, City Executive Unit; (arrived at 2:00 p.m.); Jon Munson, Town of Ithaca Teamsters;
Jim Bower, IUOE Local 158, District 832 Bolton Point; Brad Berggren, Town of Danby

Union Representatives via Proxy: 4

Phil VanWormer, City of Ithaca Admin. Unit; Scott Weatherby, Chair, TC3 Staff Unit; Doug
Perine, Tompkins County White Collar (Proxy – Olivia Hersey); Larry Chase, TC3 Faculty
Association (Proxy – Olivia Hersey)

Others in attendance:

Don Barber, Executive Director; Steve Locey, Locey and Cahill; Beth Miller; Ted Schiele,
Tompkins County Health Department and member of the Owning Your Own Health Committee;
Amy Guerri, Tompkins County Personnel Commissioner; Ashley Masucci, ProAct

Call to Order

Mrs. Shawley, Vice Chair, called the meeting to order at 1:37 p.m.

Approval of Minutes of June 4 and August 6, 2015

The approval of minutes was deferred to later in the meeting when quorum was reached.

Chair's Report

Mrs. Shawley, Vice Chair, did not have a report.

Board of Directors Report

Ms. Drake, Chair of the Board of Directors, was not in attendance. Mr. Barber provided a report on her behalf.

Report from the Executive Director

Mr. Barber reported the Board will meet on September 23rd and will be adopting the 2016 budget and premium equivalent rates. The Audit and Finance Committee is looking at a 3% increase for 2016 which is significantly less than what the private sector is looking at. Part of the reason for this is due to the good results for claims in 2015. The Consortium's budget for 2015 is 12% under budget for claims and the Committee will be looking at the results at the end of August to verify numbers further. He reported the Board will also be looking at one to four small municipalities joining the Consortium in 2016.

Mr. Barber said the Board has been working on developing a mission and vision statement and he will be sending out a draft statement to members in the next week asking members of this Committee to respond to questions concerning what does the Consortium do, how do we do it, and for whom do we do it. Members who respond will be given an opportunity to participate in another meeting to work on the responses and develop a draft statement for the Board to consider at its September 23rd meeting.

He reported on the Worksite Wellness Coalition and distributed information on "Fruit & Veggies-More Matters" Month and said the Coalition is asking employers with five or more employees to make this an initiative during the week of September 21-25, 2015.

Ms. Shawley asked how employers can participate in this. Mr. Schiele said this is information that can be posted on a bulletin board and employees can be encouraged to do something during that week to bring more fruit into the workplace to celebrate fruit as a good snack and hopefully build interest and commoradory at the worksite.

RESOLUTION NO. 2015 - ADOPTION OF THE "GREATER TOMPKINS COUNTY MUNICIPAL HEALTH INSURANCE CONSORTIUM STANDARD GOLD PLAN" AND "GREATER TOMPKINS COUNTY MUNICIPAL HEALTH INSURANCE CONSORTIUM STANDARD SILVER PLAN" FOR INCLUSION IN THE GREATER TOMPKINS COUNTY MUNICIPAL HEALTH INSURANCE CONSORTIUM'S AVAILABLE BENEFIT PLAN MENU EFFECTIVE JANUARY 1, 2016

Mr. Locey reiterated that there are several municipalities interested in joining the Consortium who have one of these plans and are waiting for the Consortium to have these plans so they can ask to join.

Mrs. Shawley stated that because there is not quorum the Committee will not be able to vote on the resolution but she will pass comments along to the Board. Mr. Masser questioned if the time of the meeting was an issue; Mr. Bower said based on his communication with members over recent months there are a variety of reasons and members were encouraged to submit proxy forms if unable to attend. It was not felt that the time was a major impediment to members being able to attend meetings.

No vote was taken on the resolution at this time; however, quorum was reached later in the meeting and a formal vote was taken.

WHEREAS, the Greater Tompkins County Municipal Health Insurance Consortium (Consortium) is a self-insured municipal cooperative health benefit plan operating pursuant to a Certificate of Authority issued on October 1, 2010 in accordance with the provisions of Article 47 of the New York State Health Insurance Law, and

WHEREAS, the Consortium's consultant, Locey and Cahill, LLC and medical claims administrator, Excellus BlueCross BlueShield, have collaboratively developed the "Greater Tompkins County Municipal Health Insurance Consortium Standard Gold and Silver Plan" which is consistent with and meets the standards for Gold and Silver level benefit plans as defined by the Patient Protection and Affordable Care Act, and

WHEREAS the "Greater Tompkins County Municipal Health Insurance Consortium Standard Gold Plan" will have an Actuarial Value as defined by the Patient Protection and Affordable Care Act equal to an overall plan benefit for the average participant of 80%, and

WHEREAS the "Greater Tompkins County Municipal Health Insurance Consortium Standard Silver Plan" will have an Actuarial Value as defined by the Patient Protection and Affordable Care Act equal to an overall plan benefit for the average participant of 70%, and

WHEREAS, the Joint Committee on Plan Structure and Design has reviewed the details of the "GTCMHIC Standard Gold and Silver Plans", and

WHEREAS, the addition of this Plan or other metal level Plans of coverage will not diminish, alter, or eliminate any current medical or prescription drug plans offered by the Consortium, and

WHEREAS, comparable benefit plans are available to the Consortium's Participating Municipalities either through the Patient Protection and Affordable Care Act Health Insurance Exchange or on the private health insurance marketplace, and

WHEREAS, several Participating Municipalities in the Consortium are seeking plan designs consistent with the metal levels of coverage as defined by the Patient Protection and Affordable Care Act, now therefore be it

RESOLVED, on recommendation of the Joint Committee on Plan Structure and Design and the Audit and Finance Committee, That the Greater Tompkins County Municipal Health Insurance Consortium adopts the "Greater Tompkins County Municipal Health Insurance Consortium Standard Gold Plan" and "Greater Tompkins County Municipal Health Insurance Consortium Standard Silver Plan" for inclusion in the Greater Tompkins County Municipal Health Insurance Consortium's available benefit plan menu to be effective January 1, 2016,

RESOLVED, further, the Consortium Joint Committee on Plan Structure and Design and the Audit and Finance Committee That said Actuarial Value be calculated annually by the rating and underwriting department at Excellus BlueCross BlueShield or an independent actuarial firm using the Actuarial Value Calculator developed by the Centers for Medicare & Medicaid Services (CMS) Center for Consumer Information & Insurance Oversight (CCIIO) which was implemented in accordance with the Patient Protection and Affordable Care Act. If such calculator is no longer available or in use, the Consortium Joint Committee on Plan Structure and Design recommends an independent Actuary develop the Actuarial Value of the health insurance plan on an annual basis. In either case, it is the intent that the result will represent an empirical estimate of the Actuarial Value calculated in a manner that provides a close approximation to the actual average spending by a wide range of consumers in a standard

population and that said Actuarial Value will be equal to or greater than 80% within an acceptable deviation of + or – 2% for the Standard Gold Plan and Actuarial Value will be equal to or greater than 70% within an acceptable deviation of + or – 2% for the Standard Silver Plan.

Blue4U Program Presentation

Ms. Miller explained the Blue4U program is the wellness component Excellus has attached to the metal level plans and it is administered through Interactive Health Solutions. She distributed two brochures on the program and explained how an individual enrolled in a metal level plan can take advantage of being a participant. The program begins with a biometric screening of glucose, total cholesterol, triglycerides, HDL and LDL cholesterol. A health history is also gathered through a survey that can be completed online. Interactive Health Solutions uses this information to make a health assessment and produces a score to gauge a person's risk level. It also establishes a health goal for the next year. Health coaching is also available to guide people through making lasting lifestyle changes and meeting health goals. The program is voluntary and the information gathered is confidential.

In response to a question by Ms. Hersey of whether the goal is to capture individuals who don't regularly go to a doctor Ms. Miller said this could do that. She said there are people who have routine physicals and there are many levels when it comes to visits with physicians and not all do blood tests. These results are designed to capture whether some is at risk for a health condition.

Mr. Logue arrived at this time.

Ms. Guerreri asked if this program would be limited to metal level plan participants. Mr. Barber said the Bronze and Platinum metal level plans the Consortium has adopted each have a wellness component. The municipalities that are joining the Consortium that already have those plans already have a wellness component through Excellus. It is being proposed currently to be added to only metal level plans. If it were to be added to other health plans that would need to be approved by the Board of Directors.

Ms. Guerreri said the proposal is to be offered to metal level plan participants at a cost of \$150 per person and that cumulative cost would be shared throughout the entire Consortium pool of members. She expressed concern that the majority of Consortium members are employees of Tompkins County and will not be eligible; therefore, they would be sharing a cost for a program that they are not eligible for.

Mr. Locey said when metal level plans were being developed the Consortium used Excellus templates and based rates off of the community rating at the time and which did contemplate the wellness component being built in to the overall benefit design. He said the idea of the Consortium is that everything is shared in terms of expense. Although the expense would be shared across the Consortium the rate that was developed for the metal level plans included this benefit as part of the overall benefit design. He added that if anyone wanted to add the benefit they could do some through collective bargaining, approval by a municipal board, and approval by the Board of Directors. Mr. Murphy said he views this being a shared expense, just as the cost of a high claimant in one municipality, such as the County, would be shared among Consortium members.

Mr. Barber said instead of this being an additional cost, the employees that had been on the Plan when they came into the Consortium in 2015 were paying for this benefit but didn't

have it. He added that results of these programs are showing a seven percent decrease in premium after three years.

Mr. Locey provided an estimate of using 30% of the 100 eligible members using the program at a cost of \$150 per year and said it would be \$45 a year in premium for the 100 person group which would be \$3.75 per member per calendar year of their premium.

Ms. Jobin questioned who would be responsible for rolling out educating employees about this benefit and the cost of providing information. Ms. Miller said Interactive Health Solutions would provide information to members. Mr. Barber said the Owing Your Own Health Committee plans to talk about marketing at its meeting next week and will be bringing a process forward to the Board of Directors.

At this time Mr. Perine's proxy was submitted, allowing the Committee to take vote on action items on the agenda.

RESOLUTION NO. 2015 - ADOPTION OF THE "GREATER TOMPKINS COUNTY MUNICIPAL HEALTH INSURANCE CONSORTIUM STANDARD GOLD PLAN" AND "GREATER TOMPKINS COUNTY MUNICIPAL HEALTH INSURANCE CONSORTIUM STANDARD SILVER PLAN" FOR INCLUSION IN THE GREATER TOMPKINS COUNTY MUNICIPAL HEALTH INSURANCE CONSORTIUM'S AVAILABLE BENEFIT PLAN MENU EFFECTIVE JANUARY 1, 2016

MOVED by Mrs. Shawley, seconded by Ms. Conger. A voice vote resulted as follows: Ayes – 20; Noes – 1 (Olivia Hersey). MOTION CARRIED.

Approval of Minutes of June 4, 2015

It was MOVED by Ms. Hersey, seconded by Mr. Murphy, and unanimously adopted by voice vote by members present, to approve the minutes of June 4, 2015 as submitted. MINUTES APPROVED.

Approval of Minutes of August 6, 2015

It was MOVED by Ms. Conger, seconded by Ms. Hersey, and unanimously adopted by voice vote by members present, to approve the minutes of August 6, 2015 as submitted. MINUTES APPROVED.

New Business

Ms. Hersey said the Consortium has approved both Medicare Supplement and the Platinum Metal Level plan and questioned how many municipalities are offering these.

Mr. Locey said the Platinum Plan is being offered by the Village of Homer, Town of Willet, Town of Ithaca, and Tompkins County. The Medicare Supplement is being offered by the Town of Ithaca, Village of Groton, and the Village of Dryden.

Mr. Locey suggested doing a survey of who is municipalities who are offering these plans to find out at what level they are being offered and what the satisfaction is. He suggested also looking at other Medicare options that could be considered.

Joint Committee on Plan Structure and Design
September 3, 2015

here was no new business.

Old Business

There was no old business.

Next Meeting Agenda Items

The following items will be included on the next agenda: discussion of 2016 Budget and the Mission and Vision Statement for the Consortium

Adjournment

The meeting adjourned at 2:42 p.m.

Respectfully submitted by Michelle Pottorff, Administrative Clerk