



Greater Tompkins County Municipal Health Insurance Consortium

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"Individually and collectively we invest in realizing high quality, affordable, dependable health insurance."

Approved 3-22-2018

Board of Directors

November 6, 2017 – 6:00 p.m.

Tompkins County Health Department – Rice Conference Room

Municipal Representatives: 20

Steve Thayer, City of Ithaca	Gary Mutchler, Town of Scipio
John Fracchia, Town of Caroline	Tom Brown, Town of Truxton
Mack Cook, City of Cortland	Rordan Hart, Village of Trumansburg
Judy Drake, Town of Ithaca	Chuck Rankin, Village of Groton
Charmagne Rungay, Town of Lansing	Tom Adams, Town of Marathon (arrived at 6:05 p.m.)
Eric Snow, Town of Virgil	Kristen Case, Village of Homer
David Schenck, Town of Springport	Luann King, Town of Cincinnatus
Ann Rider, Town of Enfield	Peter Salton, Village of Cayuga Heights
Amy Guereri, Tompkins County	Alex Patterson, Town of Aurelius
Gary Hatfield, Town of Moravia	Don Scheffler, Town of Groton (excused at 7:12 p.m.)

Labor Representatives: 1

Olivia Hersey, 1st Labor Representative and Joint Committee on Plan Structure & Design Chair

Excused: 7

Kathrin Servoss, Town of Dryden	Laura Shawley, Town of Danby
Richard Goldman, Town of Ulysses	Bud Shattuck, Village of Union Springs
Jim Bower, 2 nd Labor Representative	Michael Murphy, Village of Dryden
Alvin Doty, Town of Willet	

Absent: 4

Tim Farrell, 5 th Labor Representative	Doug Perine, 4 th Labor Representative
John Malenick, Town of Montezuma	Jim Doring, Town of Preble

Vacant: 1

3rd Labor Representative

Others in attendance:

Don Barber, Executive Director	Kevin Williams, Town of Homer
Rick Snyder, Treasurer	

Call to Order

Ms. Drake, Chair, called the meeting to order at 6:01 p.m.

Approval of Minutes of May 25, 2017

It was MOVED by Mr. Schenck, seconded by Ms. Rider, and unanimously adopted by voice vote by members present, to approve the minutes of September 28, 2017 as submitted.
MINUTES APPROVED.

Changes to the Agenda

The following changes were made to the agenda:

Addition: Resolution No. - Appointment to the Appeals Committee

Withdrawn: Resolution No. – Authorization to Develop RFP – Medical Claims Administrator

Chair's Report

Ms. Drake provided an update on the meeting that was recently held with Senator James Seward and said it was a very good meeting that ended with a request from the Senator for clarification of the talking points raised during the meeting. She said he was supportive of the Consortium having a better line of communication with the Department of Financial Services (DFS) and suggested that a meeting be held with Troy Oechsner, Deputy Superintendent for the Department. Mr. Barber clarified the talking points and they have been sent to DFS.

Mr. Fracchia commented that he thought the Senator was very receptive to how the Consortium is different from typical insurance companies and what some of the barriers are to replicate the model elsewhere. Mr. Salton agreed and said the Senator did not feel this is a political issue but an issue of common sense and financial prudence.

Mr. Cook said in addition to talking about communication with DFS a request was also made for legislative changes in the upcoming session for a waiver for the Consortium to fund the Healthcare Reform Tax in the amount of \$900,000.

Ms. Drake said she made a presentation on the Consortium at the Department of State's 3rd Annual Innovative Conference and one of the panelists was Troy Oechsner. She spoke to him briefly after the presentation and he requested additional information and was in favor of setting up a phone conference to begin discussions. Efforts are being undertaken to facilitate this.

RESOLUTION NO. 022-2017 – ESTABLISH MEETING SCHEDULE - 2018

Mr. Barber distributed a list of actions taken annually by the Consortium to inform discussion of having a reduced number of meetings during the year. Mr. Salton said he was uncomfortable reducing the number of meetings to four as originally proposed. He spoke of the work done by committees and believes the Board benefits from hearing updates. Mr. Barber noted all minutes are posted on the Consortium's website and it was agreed that Directors will receive minutes of the Audit and Finance Committee throughout the year. Mr. Barber suggested an option of having a webinar-type meeting in the summer to provide budget-related information. It was suggested this schedule which reduces the number of Board meetings from six to five could be revisited late in 2018.

MOVED by Mr. Fracchia, seconded by Ms. Hersey, and unanimously adopted by voice vote by members present.

**BOARD OF DIRECTORS
2018 Meeting Schedule**

March 22

June 28

August 23

September 27 – Annual Meeting (set rates)

Board of Directors
November 16, 2017

December 13

Meeting time: 6:00 p.m. to 8:00 p.m.
Rice Conference Room
55 Brown Road
Ithaca, New York 14850

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RESOLUTION NO. 023-2017 - APPOINTMENTS TO AUDIT AND FINANCE AND OWNING YOUR OWN HEALTH COMMITTEES

MOVED by Ms. Rider, seconded by Mr. Rankin, and unanimously adopted by voice vote by members present.

RESOLVED, That the Board of Directors hereby approves the following appointments to Consortium Committees:

Audit and Finance Committee - Two-Year Terms to Expire 12/31/2019

Chuck Rankin
Olivia Hersey
Rordan Hart

Owning Your Own Health Committee - Three-Year Terms to Expire 12/31/2020

Leslie Moskowitz – Municipal Representative
Debby Kelley – Municipal Representative
Bev Chin - Community Health and Wellness representative

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RESOLUTION NO. 024-2017 – APPOINTMENT TO APPEALS COMMITTEE

MOVED by Mr. Rankin, seconded by Ms. King, and unanimously adopted by voice vote by members present.

WHEREAS, an appeals process is required by the New York State Department of Financial Services (formerly the New York State Insurance Department), and

WHEREAS, the Consortium formed an Appeals Committee in 2010 and in 2013 developed a process and information that would serve as a guide for subscribers to appeal that includes links to State forms and Third Party Medical Claims Administrator forms, and Prescription Benefit Drug Manager forms, and

WHEREAS, if a covered person is not satisfied with an appeal determination regarding a claim that does not relate to a medical necessity or experimental/investigational services denial, the covered person may request a claim review by the GTCMHIC Appeals Committee by filing a written request for review, and

WHEREAS, there is currently one vacancy on the Committee which meets on an as-needed basis, now therefore be it

RESOLVED, That Olivia Hersey be appointed to the membership of the Appeals Committee for no set term.

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Report from the Executive Committee

Ms. Drake, Chair, reported the Committee met and discussed committee structure and a suggestion that will be made next year to the Audit and Finance Committee is to restructure the Committee to provide for another member to Chair the Committee. Another suggestion is to increase membership of the Executive Committee to include the Chair from each of the other Consortium committees. In addition to reviewing the Executive Director's work plan, the Committee also discussed succession planning for the Executive Director and Administrative Clerk roles and will continue that discussion.

RESOLUTION NO. 025-2017 - ELECTION OF OFFICERS FOR 2018

MOVED by Mr. Mutchler, seconded by Mr. Schenck, and unanimously adopted by voice vote by members present.

WHEREAS, the Nominating Committee has proposed a slate of Officers to the Board of Directors at the November 16, 2017 meeting, now therefore be it

RESOLVED, That the Board of Directors elects the following individuals to serve from January 1, 2018 through December 31, 2018 in the roles as follows:

- Chairperson - Judith Drake
- Vice Chairperson – Rordan Hart
- Chief Fiscal Officer – Steve Thayer
- Secretary – Chuck Rankin
- Treasurer – Richard Snyder

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Report from Executive Director

Mr. Barber reported on communications with the Department of Financial Services and said he is hopeful that Ms. Drake's conversation with Troy Oechsner, Deputy Superintendent for the Department, will create a respectful and consistent contact within the Department. He said there was a communication from the Department concerning the Jurat and information not being completed properly. Mr. Snyder was able to supply additional information to bring the Consortium into compliance for the filing.

Mr. Barber reported on CanaRX and said since the program has been offered by the Consortium there have been 16 prescriptions filled. Currently there are 476 prescriptions that qualify that are not being accessed through the program. A quarterly notice will be sent to members who have qualifying prescriptions to make them aware of this opportunity.

Mr. Mutchler asked if there is a way to better communicate this opportunity to employees. Mr. Barber said information cannot come from the Consortium but he will include information again in the December Newsletter and will speak with CanaRx and ProAct about potential ways to inform members of this.

Financial Report

Mr. Barber reported on behalf of Mr. Locey who was not in attendance and stated as of the end of September revenue was up 4.4% with 1.3% due to increased membership and a large portion due to the receipt of prescription drug rebates. Medical and pharmaceutical claims are 8.5% below budget and the year-to-date net income is \$2.9 million compared the budgeted

amount of -\$1 million. Mr. Barber said the Consortium has had good financial results to this point of the year and he will keep Directors informed as information become available through the end of the year.

Audit and Finance Committee Presentation of Resolutions and Report

**RESOLUTION NO. 026- 2017 - AUTHORIZATION TO CONTRACT WITH INSERO & CO.
FOR THE PROVISION OF FINANCIAL AUDITING
SERVICES – FISCAL YEARS 2017, 2018, AND 2019**

Mr. Thayer said a Request for Proposals was issued and three responses were received. Following a review of the qualifications and costs of each of the responses, Insero, being the lowest bid by a significant amount, has been recommended to receive the bid award.

MOVED by Mr. Thayer, seconded by Mr. Fracchia, and unanimously adopted by voice vote by members present.

WHEREAS, by Resolution No. 21 of 2015 directed the Consortium’s Executive Director to establish a process in 2017 to seek proposals for external auditing services for the fiscal years ending December 31, 2017, 2018, and 2019, and

WHEREAS, upon recommendation of the Executive Director and Consortium Treasurer, the Audit and Finance Committee authorized the inclusion of auditing the Consortium’s financial records as a separate component in the County’s Request for Proposals for financial auditing services, and

WHEREAS, responses to the Request for Proposals relating to the auditing of financial records for the Consortium were evaluated by the Executive Director and Consortium Treasurer and results presented to the Audit and Finance Committee, now therefore be it

RESOLVED, on recommendation of the Audit and Finance Committee, That the Chair of the Board of Directors is hereby authorized to sign a contract with Insero & Co to perform financial auditing services, which include certification that the officers have implemented Board adopted procedures for the Consortium, for the fiscal years ending December 31, 2017, 2018, and 2019, with an option to extend the contract for 2 additional years.

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**RESOLUTION NO. 027-2017 – AUTHORIZING CONTRACT EXTENSION FOR ACTUARIAL
SERVICES - ARMORY ASSOCIATES – 2019**

MOVED by Mr. Thayer, seconded by Mr. Salton, and unanimously adopted by voice vote by members present.

WHEREAS, the Greater Tompkins County Health Insurance Consortium issued a Request for Proposals for Actuarial Services on January 4 2016, and

WHEREAS, by Resolution Nos. 004 and 009 of 2016 approved an option to extend the contract with Armory Associates for the years 2017, 2018, and 2019, and

WHEREAS, Resolution No. 11 of 2017 authorized an extension of the contract for only the years 2017 and 2018, now therefore be it

RESOLVED, on recommendation of the Audit and Finance Committee, That an extension of the contract with Amory Associates by amended to include 2019.

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**RESOLUTION NO. 028-2017 - AUTHORIZATION TO PURCHASE INSURANCE POLICIES:
STOP LOSS INSURANCE**

Mr. Barber distributed information on Stop Loss insurance that the Consortium is required to have under Article 47. He explained that when risks are pooled together money can be saved and said an opportunity has become available to reduce the Consortium's Stop Loss costs. NYSAC has developed a Stop Loss model that would take the profit part that the private sector sees out of the middle layer which can save money for local governments that are fully insured. There currently are four counties in addition to the Consortium that have been approached about starting this initial cooperative. He said the counties that are interested are looking at the savings they can achieve over time as well as the shared services credit.

Mr. Barber said the Consortium's legal counsel has expressed two concerns about this. The first is whether this structure will work under Article 47 and NYSAC has asked the Department of Financial Services to provide an opinion on how this model works with Article 47 and Article 70 of the New York State Insurance Law. The other issue is that the model talks about the captive layer and transparency in how the funds are being used and how they are being sent back if there are rebates or an assessment coming forward. Mr. Barber said a governance committee made up of all the original partners is being proposed; however, language has not been finalized. The Consortium's legal counsel is concerned that the current contract as written does not clearly state the role of the governing board.

Mr. Barber spoke of the money that can be saved and said since 2011 the Consortium has paid \$3.5 million in premium to High Mark Insurance Co. for Stop Loss insurance and in 2016 they paid \$2 million in claims. The captive layer would take the current \$450,000 deductible and adding another \$500,000 and putting it into the captive layer. When the deductible is raised it assumes more risk and therefore, reduces premium and has been a standard practice of the Consortium. In addition to the potential for saving money the cooperative would also provide data analytics on the Consortium's specific de-identified high claims that would allow for the Consortium to develop strategies and know what is happening with high cost claims as well as collaborate with other partners if there are initiatives to work on with other partners.

Mr. Barber said there is only one of the insurance bidders (Berkley) that is interested in doing this. Recognizing that the Consortium will not know by January 1st whether it can enter due to the question relating to Article 47, Berkley has submitted a bid and is willing to provide Stop Loss insurance regardless of whether it has the captive layer. Mr. Barber said Mr. Locey would like to re-evaluate the deductible and the actuary has been engaged to help with that; therefore, at this time there is not enough information to move forward.

Mr. Barber explained the resolution contains two components; the first is a Stop Loss policy and the other is a captive agreement. The Stop Loss policy is through Berkley and works like regular Stop Loss. Within that there is a ceded layer that is the captive layer and the premiums that are paid to Berkley are given to the captive layer to cover the risk that is assigned to that. He described how the process would work and said the \$500,000 layer of each one of the partners is a risk-taking entity that needs to be properly reserved. The Consortium would have to put up \$152,000 that could be placed in the Consortium's Catastrophic Claims Reserve. These are funds that can stay with the Consortium but need to be committed in the event there is an assessment. This would be the total amount of the

assessment and could not be more. If the number of high claims were to pierce that layer and use up all of the funds the most the Consortium would have to contribute would be this amount. Claims that exceed that layer would be covered by the Berkley, the Stop Loss carrier. At the end of the year if there are funds left over the governing board could determine whether it wanted to retain the funds within the captive or return the funds to municipal partners on a prorated basis.

Mr. Barber said the Board is not being asked to make a decision on this at this time; however, this does play a role in the decision about a Stop Loss carrier. If this moves forward a full presentation will be made to the full Board of Directors. It was clarified that at the December Audit and Finance Committee meeting a decision will be made on the Stop Loss carrier for 2018 and not the captive.

Mr. Salton questioned if it would be possible to move to Berkley mid-year. Mr. Barber said Excellus or Highmark have not been asked about changing-out mid-year if Berkley wasn't initially selected but he will look into this.

MOVED by Mr. Thayer, seconded by Mr. Schenck, and unanimously adopted by voice vote by members present.

WHEREAS, the Consortium must select Stop Loss insurance, as required by Article 47 of New York State Insurance Law, and

WHEREAS, the Consortium has received quotations to provide Specific and Aggregate Stop-Loss Insurance for 2018, and

WHEREAS, the quotes were not received in sufficient time for the Consortium's Consultant and Executive Director to analyze the differences between the three products and conduct follow-up conversations with the applicants for such items as aggregate Stop-Loss quoted premium vs risk, options available for lasered High Cost Claimant, "follow form" experience with Excellus, etc., now therefore be it

RESOLVED, on recommendation of the Audit and Finance Committee, That the Audit and Finance Committee directs the Plan Consultant, Locey & Cahill, LLC and the Executive Director to develop comparison data for these Stop-Loss carriers: Highmark, Excellus, and Berkley,

RESOLVED, further, That the Plan Consultant, Locey & Cahill, LLC and the Executive Director report the status of their findings to the Board of Directors at the November 16, 2017 meeting,

RESOLVED, further, That in the event that the Board of Directors determines that it does not have enough information to make a decision on Stop-Loss carrier for 2018 at this meeting, then the Audit and Finance Committee recommends the Board of Directors authorizes the Chairperson, Executive Director, and Audit & Finance Committee to finalize the negotiations relative to the underlying terms, conditions, and costs of the policy within the requirements of Section 4707 of the New York State Insurance Laws and the cost must be no greater than what was included on the 2018 GTCMHIC Budget adopted by the Board of Directors at their September meeting,

RESOLVED, further, That should the negotiated policy terms produce the condition that changes be made to Consortium Reserves, then those reserve changes would be made by the Board of Directors at a subsequent meeting,

RESOLVED, further, That the Plan Consultant is directed to provide the Administrative Clerk of the Consortium with a copy of the policy.

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**RESOLUTION NO. 029-2017 - AUTHORIZATION TO CONTRACT WITH THIRD PARTY
ADMINISTRATOR - EXCELLUS BLUE CROSS BLUE
SHIELD**

MOVED by Mr. Thayer, seconded by Mr. Mutchler, and unanimously adopted by voice vote by members present. Ms. Drake thanked Mr. Barber for his work with Excellus, particularly with regard to the online enrollment issue.

WHEREAS, the Greater Tompkins County Municipal Health Insurance Consortium (GTCMHIC) is a self-insured municipal cooperative health benefit plan operating pursuant to a Certificate of Authority issued by the New York State Department of Financial Services pursuant to Article 47 of the New York State Insurance Law, and

WHEREAS, Section E Paragraph 11 of the current GTCMHIC Municipal Cooperative Agreement defines the actions to be taken by the GTCMHIC Board of Directors to include the approval of contracts with third parties for the furnishing of goods and services, and

WHEREAS, following a collaborative negotiation process and discussions within the Audit and Finance Committee, it has been determined to be in the Consortium's best interest to continue its relationship with Excellus Blue Cross Blue Shield for the administration of the Consortium's medical claims, and

WHEREAS, Excellus has agreed to add the attached Memorandum of Understanding to the 2017 Amendment of our 2013 Administrative Service Agreement (ASC) to provide agreed actions going forward for online enrollment that provide timely feedback to those Consortium employers submitting online applications, and

WHEREAS, Excellus has agreed to amend Section 6.7 of the 2017 Amendment of our 2013 Administrative Service Agreement (ASC) as follows:

Excellus BCBS may, from time to time, enter into arrangements with its Participating Providers that are designed to drive improvements in the cost and quality of health care delivery within its service area. Such arrangements may include risk-sharing programs whereby Participating Providers are paid compensation and other remuneration for achieving certain performance targets, as well as other programs that may result in associated vendor fees and providers receiving compensation for implementing quality infrastructure or meeting certain quality, performance or operational goals. The payments described in this section may be included as a claims expense or as a separate amount charged by Excellus BCBS to Employer. Excellus BlueCross BlueShield will provide Employer with an explanation of the basis on which such fees and charges were allocated to Employer. In the event these payments exceed actual program costs, Excellus BCBS may credit such excess funds to Employer or, if funds are not credited, then Excellus BlueCross BlueShield will apply such excess funds to quality improvement programs that benefit Employer's Members.

and

WHEREAS, Excellus has provided assurances that it will provide the Consortium annual updates on the above referenced Provider Performance Improvement Programs, now therefore be it

RESOLVED, on recommendation of the Audit and Finance Committee, That the Board of Directors hereby accepts the amendment to Section 6.7 of the ASC,

RESOLVED, upon the recommendation of the Audit and Finance Committee, the Board of Directors hereby accepts the attached Memorandum of Understanding regarding Online Enrollment, and further,

RESOLVED, the Board of Directors authorizes the Chairperson to sign a three (3) year renewal Administrative Services Contract with Excellus BlueCross BlueShield for Medical Claims Administration with fees of \$35.63 PMPM for 2018 (3%), \$36.87 PMPM for 2019 (3.5%), and \$38.17 PMPM for 2020 (3.5%).

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**RESOLUTION NO. 030-2017 - AUTHORIZATION TO PURCHASE INSURANCE POLICIES:
ERRORS AND OMISSIONS, AND DIRECTORS AND
OFFICERS LIABILITY COVERAGE**

MOVED by Mr. Thayer, seconded by Mr. Fracchia, and unanimously adopted by voice vote by members present. It was noted that the rates will need to be adjusted for the three new additional Directors.

WHEREAS, it is the desire of the Board of Directors to ensure liability coverage for the Consortium, the Board of Directors personally and professionally, and the participating municipalities, now therefore be it

RESOLVED, upon recommendation of the Plan Consultant, Locey & Cahill, LLC, the Tompkins County Risk Manager and the Audit and Finance Committee, That the Consortium shall purchase coverage for these policies from the following for the period January 1, 2018 thru December 31, 2018:

- Errors and Omissions Insurance with the Darwin Group at \$1,000,000 limit with \$25,000 retention (placed by insurance agent Haylor, Freyer and Coon);
- Directors and Officers Liability Insurance with the Darwin Group at \$1,000,000 limit with \$25,000 retention (placed by insurance agent Haylor, Freyer and Coon)

RESOLVED, further, That the Plan Consultant is directed to provide the Administrative Clerk of the Consortium with a copy of each policy.

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Mr. Thayer, Chair, said the Committee's December agenda will include Stop Loss and an update on the prescription drug claims audit update.

Report from the Owing Your Own Health Committee

Mr. Barber reported on behalf of Ted Schiele, Committee Chair, who was unable to attend, and said the Committee has been looking at utilization data and has found that 90% of the Consortium's subscribers used the healthcare system last year and 70% of them had some form of preventive health care which is a very high percentage compared to Excellus' book of business. They were also able to identify for 2016 and 2017 that 80% of subscribers had a primary care physician. One area that fell very short (27%) was the number of members who received an annual physical. The Committee will be developing an action plan for the Consortium and bringing it forward.

Report from the Joint Committee on Plan Structure and Design

Ms. Hersey, Chair, reported the Committee met last in October and canceled its November and December meetings. The Committee continues to discuss the need for more labor representation. Ms. Drake commented that she had a discussion with Scott Futia, CSEA Deputy Director of Contract Administration, Health Benefits about this and he understood and indicated he was open to having discussion of the formula. Mr. Barber said at the January 4 meeting there will be a presentation on from Excellus, ProAct, and the local provider network on the opioid crisis. He encouraged Directors to attend and said it will be videotaped.

Report from the Government Structure Committee

Mr. Fracchia, Chair, reported the Committee met a few weeks ago and discussed the feedback received from the Board. It confirmed that there isn't significant interest in making major changes to the current governance structure at this time. The Committee focused on the recommendation to the Executive Committee to consider slightly reducing the number of meetings held during the year. One of the concerns was when there are fewer meetings there can be less engagement and people feeling out of the loop. There was discussion about strategies for capturing information such as videotaping and a suggestion was also made to build in a social component to the annual retreat that would provide an opportunity outside of the meetings to have discussions. The Committee also discussed the importance of having labor participation at committee meetings and at Board meetings. Mr. Fracchia said the Committee felt that rather than disbanding at this time that its work be placed on pause as there may be a need to re-examine the structure as additional members join.

Mr. Barber asked Directors to submit ideas on additional ways information can be shared in addition to being made available on the website and through the Newsletter. Committees will also be asked to consider the composition of their membership and such things such as whether there should be a geographic component. Mr. Barber said he will explore options to build a social component into the retreat or Board meetings as he feels this is good way to build trust within a group. He also welcomed feedback on the change in the layout of the room for the meetings.

Website Committee

Mr. Barber reported the Committee has been meeting monthly. The Committee had engaged the idea of doing an RFP; however, after speaking with the County's Information Technology Director, determined it would likely result in a significant escalation in pricing. Also, because the County already works with eGov there are resources in place to support any needs the Consortium may have. He said anyone who has an interest in providing feedback on the

website will be provided with opportunities throughout the process to do so. Mr. Fracchia stressed the importance in Committee receiving feedback.

RESOLUTION NO. 031-2017 – AUTHORIZATION TO ENTER INTO CONTRACT WITH DISCOVER EGOV FOR WEBSITE DEVELOPMENT SERVICES

WHEREAS, the Consortium’s website was initially created in 2011 for the purpose of hosting meeting information that could be accessed by its Directors and committee members, and

WHEREAS, the website has evolved into being a resource for access to information by subscribers, municipal members, prospective members, and others, and

WHEREAS, a Website Committee was formed to review site content and structure and has recommended a full redesign of the site, including divesting from the Tompkins County website, and

WHEREAS, the Committee has considered several options for development and support that included consultation with the Tompkins County Director of Information Technology Services, and

WHEREAS, the Committee has reviewed a Scope of Work and cost proposal for redevelopment, hosting, and technical support for the Consortium’s website submitted by Discover eGov, now therefore be it

RESOLVED, on recommendation of the Website Committee, That the Board of Directors hereby authorizes the Consortium to enter into a contract with Discover eGov for website services for an initial cost of \$3,850 (50% at signing; 25% at project mid-point; 25% on delivery); and for ongoing support and management at an annual cost of \$600/year.

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Expressing Appreciation to Retiring County Administrator, Joe Mareane

The Board of Directors extended its sincere appreciation and best wishes to Joe Mareane, County Administrator, for all he has done for the Consortium. It was noted that he was instrumental in getting the Consortium started and its success is due in large part to Mr. Mareane and his commitment of County staff.

Adjournment

The meeting adjourned at 7:25 p.m.