

Greater Tompkins County Municipal Health Insurance Consortium 2020 Annual Report



Mission Statement:

The Greater Tompkins County Municipal Health Insurance Consortium is an efficient inter-municipal cooperative that provides high-quality, cost-stable health insurance for members and their employees and retirees.

Elin R. Dowd
Executive Director

Judith Drake
Chair, Board of Directors

2020: A Year in Review

Letter from the Executive Director

There has been so much said about the Coronavirus pandemic, but perhaps this quote resonates with you and helps set the stage for the 2020 Annual Report of the Greater Tompkins County Municipal Health Insurance Consortium:

“I wish it need not have happened in my time,’ said Frodo. ‘So do I,’ said Gandalf, ‘and so do all who live to see such times. But that is not for them to decide. All we have to decide is what to do with the time that is given us.’” — J.R.R. Tolkein

The following report outlines the challenges that came with doing business as a healthcare consortium during a global health care crisis. Despite approximately \$2 million in claims related to testing and healthcare to treat positive COVID-19 patients, the Consortium ended the year ahead of budget and shared in a premium holiday when the Board made the decision to waive all December premium payments. Due to subscribers delaying care and or cancelling non-essential procedures and with collecting less in premium dollars, the Consortium still experienced a positive net position.

The Consortium was also nimble in 2020 and adjusted to new health care mandates, having staff work remotely, and realized higher than average attendance at Board and Committee meetings. While learning to operate in this new reality, the staff at the Consortium reorganized and made plans for expansion. In addition, the Board approved an amended Municipal Cooperative Agreement, including potential boundary changes and a new governance model that featured an Executive Committee. As a result, new committees were added and the Owing Your Own Health and the Joint Committee on Plan Structure and Design combined to reinforce our commitment to healthy behaviors and utilizing metrics to guide programs and policies.

In our regular course of business, deductibles and out-of-pocket maximums were changed, some plans were eliminated that no longer had any subscribers and limited participation, and other changes included limiting new members from participating going forward in traditional more expensive plan options. New benefits for hearing aids and vision hardware were added to our Metal Level Plans and the Medicare Supplement Plan to keep us competitive. Furthermore, there was significant migration to less expensive plans as members adjusted budgets and gave incentives to employees to help municipalities control costs.

Overall, the Consortium kept moving during the global crisis and responding to our member and subscriber needs and concerns. The Annual Report outlines primarily the financial performance of 2020, but also provides some narrative to the decisions made by our Committee and Board members to continue to advance our mission and provide high-quality, cost-stable health care to our members and their employees.

Elin R. Dowd – Executive Director

Economic Factors

Economic Factors Affecting the Future

As mentioned above, the ongoing COVID-19 (coronavirus) pandemic has had a major impact on all of us and the Consortium's operations during the 2020 Fiscal Year were no exception. With the onset of the pandemic, the Consortium started to see the impact the pandemic had on the medical community when physicians and hospitals cancelled or delayed non-critical and/or non-essential appointments and/or procedures. These actions resulted in a noticeable downturn in the paid claims of the Consortium as we had budgeted \$37,198,413.76 in medical plan claims and had only \$32,826,396.10 in actual paid claims.

The Consortium finished the 2020 Fiscal Year approximately \$4.37 million below budget in hospital, medical, and surgical paid claims. This much lower than expected paid claims result created a substantive increase in the Consortium's unencumbered or unrestricted fund balance position.

In response to this better than anticipated result in the paid claims, the Board of Directors agreed to forego the billing and payment of the monthly premiums for the month of December 2020. While this action reduced the overall revenue of the Consortium, it maintained the unencumbered or unrestricted fund balance at a level near what it was at the close of the 2019 Fiscal Year.

Looking forward, the Consortium feels it is well positioned from a reserve and overall asset position to deal with the anticipated impact some compression on the hospital, medical, and surgical claims will likely have in the short-term. As the Consortium looks long-term, it is the Board of Director's opinion that the Consortium is in a good place financially to respond to any possible "hyper-inflation" which may occur as the medical community looks to rebound from heavy losses which were incurred in 2020 and the beginning of 2021. The goal is to keep premium increases as low as possible while continuing to ensure all reserves are funded to a reasonable and prudent manner.

Premium Rate Increases

A thorough review of the Consortium's finances and paid claims trends during budget preparations resulted in a premium increase recommendation of 5% for the 2021 Fiscal Year. This recommendation brings the overall average increase down to 6.18% since the Consortium's inception and the 5-year average increase is a very modest 4.8%.

Escalating Cost of Prescription Medications

Another area which has drawn the attention of the Consortium's Board of Directors is the significant increase in the cost of prescription medications on a per fill basis. The cost per prescription filled for 2020 was \$147.94 as compared to five (5) years earlier in 2016 when the average cost was \$95.03 per prescription filled according to ProAct, Inc. This equates to a 5-year increase of approximately 57%. These increases are present across all tiers of medications with significant growth in specialty pharmaceuticals purchased by covered members. In fact, over this same 5-year period, specialty medications went from 34.55% of the plan spend to 47.93% of the plan spend. This increase was a combination of an increase in the average cost of approximately 34.5% per prescription and an increase of more than 35% in the number of prescriptions filled during this same 5-year window in time. This increase in expense is somewhat countered by an increase in prescription drug rebates passed through to the Consortium by our Prescription Benefits Manager, Proact. During the 2020 Fiscal Year, the total prescription drug rebates received totaled approximately \$1.98 million, which equals approximately 14.2% of the prescription drug claims paid for the year.

The Board will continue to work with ProAct, Inc. and its other advisors to try and mitigate the rate of growth in this area while maintaining the benefits guaranteed to employees and retirees pursuant to their various labor agreements, personnel policies, and legislative resolutions.

Investment of Reserves

After the Board of Directors adopted an Investment Policy for the Consortium in 2019 which included seeking assistance from outside professionals a decision was made to contract with Wilmington Trust at the end of the 2018 Fiscal Year and funds were moved to Wilmington Trust in February of 2019. This action resulted in a significant increase in earned interest income as the Consortium saw its investments in 2019 create an additional \$443,164 in interest earnings. Unfortunately, with the economic impact of the COVID-19 pandemic, the interest earnings in 2020 were below the prior year. The Consortium Leadership will continue to monitor and review the investment strategy on an ongoing basis to ensure the Consortium is maximizing its interest income whenever possible.

Continued Growth

The Consortium has seen its list of municipal partners grow from its original thirteen (13) members to forty-three (43) municipal partners at the close of the 2020 Fiscal Year.

In the fall of 2019, the Consortium approved four (4) new municipal partners that began in the fall of 2020, coverage in 2020: The Towns of Horseheads and Spencer, the Village of Watkins Glen, and the Lansing Library. In the fall of 2020, the Board of Directors approved six (6) new municipalities to join the Consortium in 2021. The new members are the Towns of Catharine, Cuyler, Dix, Hector, and Tioga, along with the Village of Owego. With these new municipalities, the Consortium now has a total membership of forty-nine (49) municipal partners.

As additional municipalities show interest in joining the consortium, the Board of Directors is taking the steps necessary to ensure future growth is controlled and premium rates are fair for all municipal partners.

Consortium Board of Directors and Staffing

Board of Directors

In 2020, the Board of Directors approved an amended Municipal Cooperative Agreement to commence in January 2021 and included a change in the governance model to include putting additional responsibilities on an Executive Committee comprised of up to 15 members. The newly expanded Executive Committee “will conduct business according to its bylaws within its delegated authority, subject to approval and/or ratification of its actions at the next scheduled Board meeting, manage the Consortium between meetings of the Board, subject to such approval by the Board, establish administrative guidelines for the efficient operation of the Consortium and take all necessary action to ensure the Consortium is operated and administered in accordance with the laws of the State of New York. Under this new model of governance, the Board of Directors will only meet two times per year to approve any benefit plan changes, premium levels, elect officers, and approve the annual budget”. To keep Board members engaged throughout the year additional work will take place at the committee level and both the Nominations and Engagement and the Claims and Appeals Committees have been expanded to include additional responsibilities.

Consortium Staffing

In 2018, the Board of Directors approved the creation of a new full-time Executive Director position for the Consortium. After a comprehensive search, a new Executive Director (Elin Dowd) was hired

in April of 2019 and commenced work for the Consortium. Other positions created in 2019 included a full-time Administrative/Computer Assistant position and the direct hiring of a part time Clerk of the Board who had previously served as a consultant. Even with these additional overhead expenses, the Consortium continues to operate at an extremely efficient level with 93.51% of all expenses going directly to cover claims expenses.

With the commencement of securing in-house staff to effectively manage the business of the Consortium efforts are ongoing to review the dynamic of responsibilities placed on employees and when to secure value added services from consultants or related service contracts. Towards that end the Operations Committee reviewed and approved a new staffing plan with the Executive Director in 2020 to have four staff members in place by the end of 2021. These positions would include the Executive Director, a full time Clerk of the Board, a Finance Manager, and a part-time Benefit Specialist. The full-time administrative assistant position will remain unfilled. Hiring a Finance Manager will allow responsibilities for accounting and finance to transition away from the Tompkins County contracted staff members to the Consortium employees.

Committees

Executive Committee (Judy Drake, Chair) shall operate with standing committees as defined and described below and will conduct business according to its Bylaws within its delegated authority, subject to approval and/or ratification of its actions at the next scheduled Board meeting. Create sub-committees as necessary to monitor operations and make recommendations, to the Executive Committee and/or Board, to facilitate operations. Manage the Consortium between meetings of the Board, subject to such approval by the Board as may be required by this Agreement. Develop Bylaws for its operations. In consultation with a nomination committee, fill any vacancy on the Executive Committee from among the Board's members as set forth in its Bylaws. Establish administrative guidelines for the efficient operation of the Consortium. Take all necessary action to ensure the Consortium is operated and administered in accordance with the laws of the State of New York.

Audit and Finance Committee (Mack Cook, Chair) responsible to assist the Executive Committee and Board in its oversight of the integrity of the Consortium's financial statements, compliance with legal and regulatory requirements, its selection and oversight of its independent auditors (Auditors). The Audit and Finance Committee shall also be responsible for all financial aspects of the Consortium, including review of: annual budgets, periodic review of financial results, evaluation of transactions that are material to the organization's business, review of business and risk insurance policies and actuarial studies to determine premium levels, review and approval of investments and investment plans, enterprise risk management and compliance assessment and review, and oversight of all internal and external financial audits.

Operations Committee (Lisa Holmes, Chair) responsible for oversight of Consortium operations and charged with review and oversight of any policies impacting the overall wellbeing of the organization. The Operations Committee may recommend changes to improve the efficiency of the organization's practices, policies, procedures, and the organizational structure, including personnel and staffing needs.

Joint Committee on Plan Structure and Design (James Bower, Chair) shall review all prospective Board actions in connection with the benefit structure and design of the Plan(s) and shall develop findings and recommendations with respect to such matters.

Owning Your Own Health Committee. (Now a part of the Joint Committee) shall identify and recommend processes to promote a culture of preventative health care, support benefit clerks in that outreach to member employees and retirees, and coordinate wellness activities with the Consortium’s claim administrators and community associates.

Nominations and Engagement Committee (Ed Fairbrother, Chair) shall be responsible for presenting a slate of recommended Officers and Executive Committee members at the annual Board of Directors meeting for approval. The Committee will assist the Executive Committee in engaging Directors in finding meaningful ways to contribute to the organization especially through the consideration of succession and long-term planning.

Claims and Appeals Committee (Bud Shattuck, Chair) will hear all appeals that come to the Board of Directors for action and recommend a determination to the Board. This Committee will also monitor claims data and trends and oversee all annual third-party administrator claim audits.

Ad-Hoc Committees:

The Executive Committee has the authority to create temporary, ad-hoc committees as may be needed, with specific duties and terms. The Chair of any ad-hoc committee shall not be a member of the Executive Committee, unless they are otherwise an at-large member of the Executive Committee.

Stop Loss Insurance and Reserves

Specific Stop-Loss Insurance

The Catastrophic Claims Reserve was initially established during the 2014 Fiscal Year at approximately \$600,000 to create a reserve fund designed to protect the Consortium’s financial integrity when the specific stop-loss risk retention (deductible) was increased from \$250,000 to \$300,000. Over the years, to manage the annual increase in the specific stop-loss insurance premium expense, the Consortium Board has steadily and regularly increased the specific deductible. Each time the deductible has been raised the Board, in response to the increase in risk, has also augmented the Catastrophic Claims Reserve to provide additional cash flow protection to the Consortium.

Specifically, for the 2020 Fiscal Year, the Board of Directors approved a specific stop-loss insurance policy which included a standard deductible of \$1,000,000 and one separate or “laser” deductible of \$1,200,000. “Laser” deductibles are placed on covered members who present a substantially higher-level risk as determined by a review of their medical claims history and their prognosis. Based on the risk associated with this higher standard deductible and the presence of two individual “laser” deductibles of \$1 million and \$1.2 million, the Board of Directors made the decision to increase the Catastrophic Claims Reserve by another \$1,700,000, bringing the reserve balance up to \$4,500,000. An additional \$532,220 was added to this Reserve to recognize the difference (\$498,115) between the 2020 budgeted amount for stop-loss insurance premium and the actual paid premium for the year, and the interest income earned on this Reserve (\$34,105); thus, the total for the Catastrophic Claims Reserve at year-end was \$4,500,000.

As part of the 2020 budget deliberations, the Consortium’s Audit & Finance Committee reviewed multiple specific stop-loss insurance quotations. Based on this review, the Committee recommended to the Board of Directors that they approve a specific stop-loss insurance policy with a standard deductible of \$1,000,000 and a “laser” deductible of \$1,200,000 on one covered member.

In addition, as part of the overall budget process, the Consortium established a Catastrophic Self-Insurance Pool which converted the Catastrophic Claims Reserve into a fund which will be used to cover paid losses for covered members who have paid claims expenses which exceed \$500,000 up to the specific stop-loss insurance deductible of \$1,000,000. The only exceptions to this payment are the two claimants who would have had a “laser” deductible placed on them at \$1.0 million and \$1.2 million, respectively.

In addition to the funds from the Catastrophic Claims Reserve, this Pool will be further funded with the variance between the budgeted premium for a specific stop-loss insurance policy at the \$600,000 deductible level and with the interest earned on the Pool each year. For the 2020 Fiscal Year, this collective decision resulted in the lowering of the budgeted specific stop-loss insurance premium expense by approximately \$500,000 and the Consortium did not incur any claims which needed to be paid by the Pool. As a result of this positive outcome, the Consortium has chosen to continue this strategy for the 2021 Fiscal Year.

This is an area which will be reviewed by the Board of Directors on an annual basis to ensure a tolerable balance is achieved between risk and the cost of stop-loss insurance.

Aggregate Stop-Loss Insurance

We are pleased to report that the New York State Department of Financial Services continues to honor the waiver granted to the Consortium relative to the requirement to purchase aggregate stop-loss insurance as found in §4707 of the New York State Insurance Law for 2020 and the foreseeable future. This waiver does not create a substantive risk to the Consortium or its members, as the Consortium maintains reserves and fund balance which protects the financial integrity of the Consortium and the New York State Department of Financial Services agreed this was a reasonable approach. This action has reduced the Consortium’s expenses by approximately \$70,000 per annum.

Rate Stabilization Reserve

With paid claims and expense results below budget in the initial years of operation, the Board of Directors decided during the 2015 Fiscal Year, to establish a Claims/Rate Stabilization Reserve to further protect the Consortium’s cash flow and provide additional financial stability. The level of this reserve was originally set at 5% of the expected/paid claims expense for the year. However, with recent results performing better than expected, this reserve was increased to 7.5% of the expected/paid claims for the year. These funds are available to mitigate premium rate increases at budget time. This reserve grows each year as the level of claims increases and had a total balance of \$3,391,769 at the close of the 2020 Fiscal Year. With the positive results for the 2020 Fiscal Year and in recognition of some of the additional risk the Consortium was taking on, the Board of Directors agreed to continue to set the Rate Stabilization Reserve at 7.5% of the expected paid claims for the 2021 Fiscal Year.

Incurred But Not Reported (IBNR) Claims Liability Reserve

The Consortium continues to see a decrease in the IBNR calculation as determined by the Consortium’s Actuaries, Armory Associates, LLC. At the close of the 2011 Fiscal Year, the Consortium’s calculated IBNR was 10.15% of paid claims. The IBNR calculation for the 2020 Fiscal Year was 5.48%. While this does not directly impact the mandated 12% of expected incurred claims reserve required by the NYS Department of Financial Services, it does provide credible data demonstrating the IBNR Reserve at 12% is very conservative and amply protects the Consortium for its claims’ liabilities.

Statement of Position – December 31, 2020

	<u>2020</u>	<u>2019</u>
ASSETS		
Current Assets		
Cash and Cash Equivalents	\$ 8,343,168	\$ 11,304,684
Unrestricted Investments	7,686,088	6,340,983
Accrued Interest	58,725	141,159
Accounts Receivable - Stop Loss and Drug Rebates	-	380,746
Premiums Receivable	-	127,906
Total Current Assets	<u>16,087,981</u>	<u>18,295,478</u>
OTHER ASSETS		
Noncurrent Assets		
Premium Claims Deposit	761,400	647,700
Restricted Investments	16,662,408	13,136,929
Total Noncurrent Assets	<u>17,423,808</u>	<u>13,784,629</u>
Total Assets	<u>33,511,789</u>	<u>32,080,107</u>
LIABILITIES		
Current Liabilities		
Incurred Claims Liability	5,828,922	5,637,280
Accounts Payable	610,385	605,015
Unearned Premiums	1,072,302	509,798
Total Current Liabilities	<u>7,511,609</u>	<u>6,752,093</u>
Total Liabilities	<u>7,511,609</u>	<u>6,752,093</u>
NET POSITION		
Restricted		
Restricted for Contingency Reserve - §4706(a)(5)	<u>2,409,497</u>	<u>2,514,837</u>
Unrestricted - Board Designated		
Catastrophic Claims Reserve	5,032,220	2,800,000
Rate Stabilization Reserve	3,391,769	2,184,812
Total Unrestricted - Board Designated	<u>8,423,989</u>	<u>4,984,812</u>
Unrestricted - Undesignated	<u>15,166,694</u>	<u>17,828,365</u>
Total Net Position	<u>\$ 26,000,180</u>	<u>\$ 25,328,014</u>

Net Position Summary

Statements of Net Position

The Statements of Net Position represent the financial position of the Greater Tompkins County Municipal Health Insurance Consortium at December 31, 2020, 2019, and 2018. The following table reflects, in summary, the financial position of the Plan at December 31, 2020:

	2020	2019	2018
Current Assets	\$ 16,087,981	\$ 18,295,478	\$ 16,554,798
Noncurrent Assets	17,423,808	13,784,629	10,509,101
Total Assets	33,511,789	32,080,107	27,063,899
Current Liabilities	7,511,609	6,752,093	5,420,136
Total Liabilities	7,511,609	6,752,093	5,420,136
Net Position	\$ 26,000,180	\$ 25,328,014	\$ 21,643,763

The increases in total assets are mainly due to the Plan's operating results and additional funding of the reserves. The increases in current liabilities are primarily due to increased unearned premiums.

Revenue

Revenue Overview

	2020	2019	2018
Premiums	\$ 48,189,940	\$ 50,296,736	\$ 42,401,705
Interest Earnings	266,205	456,386	21,938
Unrealized Gain	56,800	8,715	
Nonoperating Revenues - Other	4,535		
Total Revenues	\$ 48,517,480	\$ 50,761,837	\$ 42,423,643

The decrease in premium revenue for 2020 is primarily the result of the waiving of one month of premiums to be more closely aligned with actual medical claims expense. Premiums from four new municipalities were added in 2020. The increases in premium revenues for 2019 and 2018 are primarily the result of the addition of municipalities participating in the Plan along with premium increases necessitated by the rising cost of health care. The decrease in interest earnings in 2020 is mostly due to decreased interest rates. The increases in interest earnings in 2019 and 2018 are the result of maintaining additional cash balances in interest earning bank accounts each year as well as the addition of investments for 2019, which led to the recognition of unrealized gains for 2019 and additional interest income. The current year increase in unrealized gains is a result of market conditions.

Expenses

Expense Overview

The following table summarizes expenses by function for the years ending December 31, 2020:

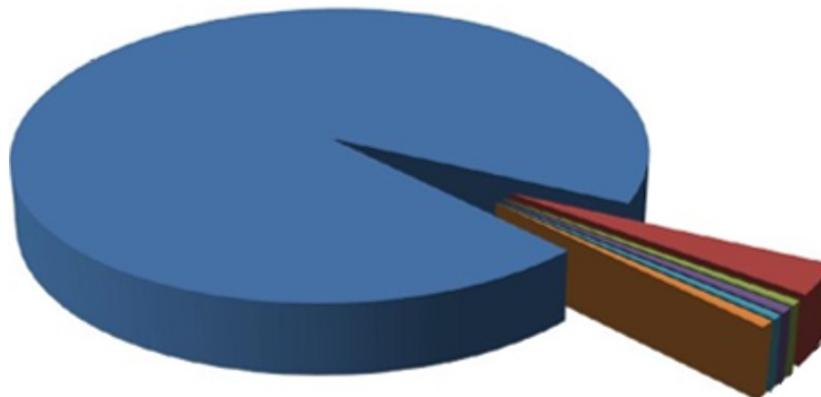
	2020	2019	2018
Claims Expense	\$ 44,913,878	\$43,340,299	\$ 38,991,995
Salaries and Benefits	208,209	121,481	
Reinsurance Expenses, Net of Recoveries	234,193	641,621	(10,448)
Insurance	43,612	40,114	33,139
Claims Administrative Fees	1,616,236	1,468,608	1,169,230
Aggregate Write-ins for Other Expenses	637,544	749,135	554,668
Other Expenses		10,895	1,390
Total Expenses	\$ 47,653,672	\$ 46,372,153	\$ 40,739,974

The increases in claims expense are primarily a result of increased insurance claims paid for participating municipality employees and the addition of new participating municipalities into the Plan. The increase in claims administrative and other expenses is primarily due to increased costs associated with adding new municipalities into the Plan. The changes in reinsurance are primarily due to timing of reimbursement payouts and the cost of reinsurance.

Operating Expenses 2020 Expense Distribution January 1, 2020 to December 31, 2020

Paid Claims

■ 94.48%



■ Claims Admin

3.162%

■ Stop Loss

0.527%

■ Taxes and Fees

0.637%

■ Professional Services

0.495%

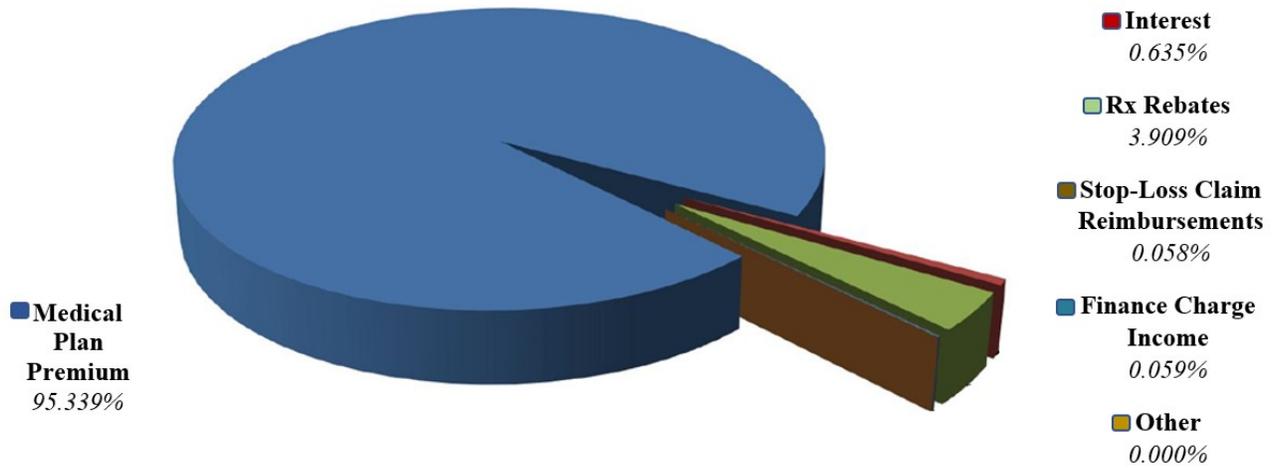
■ Insurance/Internal Fees

0.692%

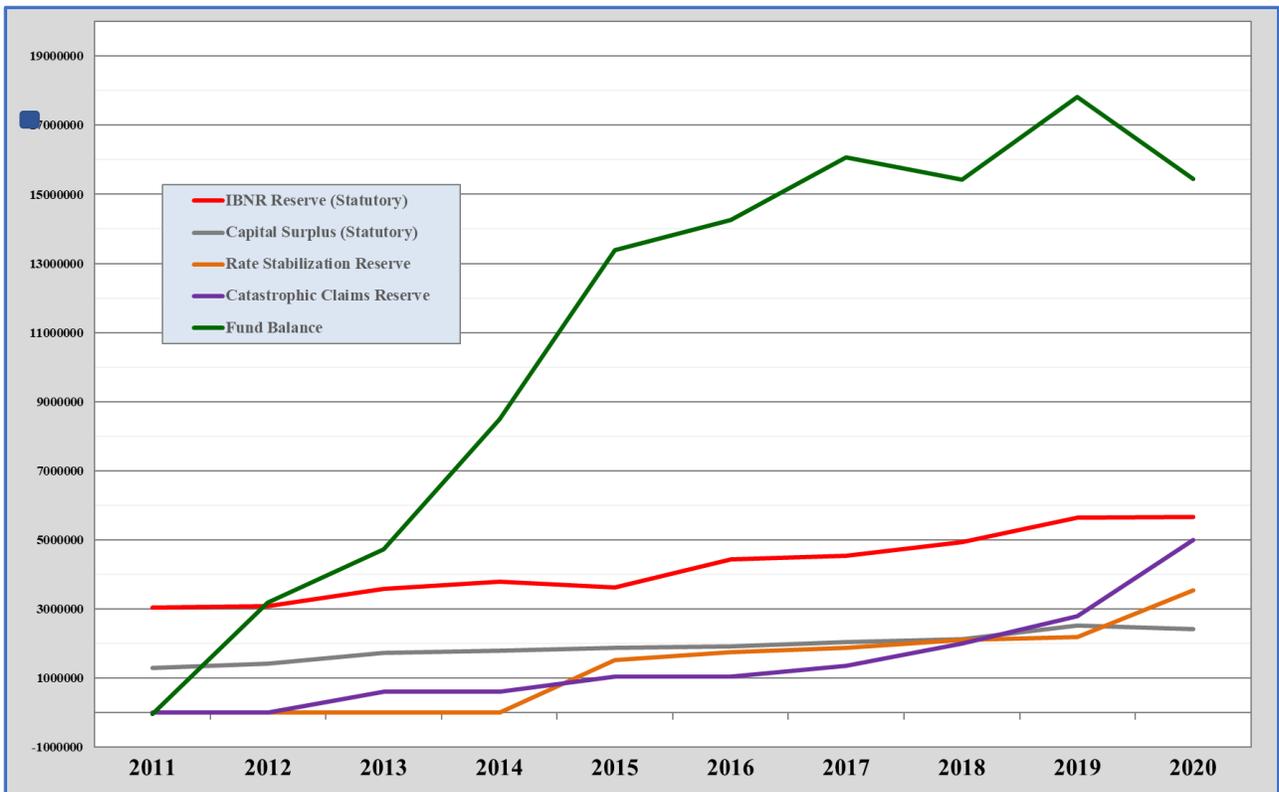
Sources of Revenue

2020 Income Distribution

January 1, 2020 to December 31, 2020



Reserves and Fund Balance



Membership and Effective Date

Town of Caroline	1/1/2011	Town of Cincinnatus	1/1/2017
Town of Danby	1/1/2011	Town of Aurelius	1/1/2017
Town of Dryden	1/1/2011	Town of Montezuma	1/1/2017
Town of Enfield	1/1/2011	Town of Newfield	1/1/2018
Town of Groton	1/1/2011	Town of Homer	1/1/2018
Town of Ithaca	1/1/2011	Town of Owasco	1/1/2018
Town of Ulysses	1/1/2011	Village of Horseheads	1/1/2019
Village of Cayuga Heights	1/1/2011	Town of Big Flats	1/1/2019
Village of Dryden	1/1/2011	Village of Freeville	1/1/2019
Village of Groton	1/1/2011	Village of Lansing	1/1/2019
Village of Trumansburg	1/1/2011	Town of Niles	1/1/2019
Tompkins County	1/1/2011	Seneca County	1/1/2019
City of Ithaca	1/1/2011	Town of Sennett	1/1/2019
City of Cortland	1/1/2013	Town of Mentz	1/1/2019
Town of Lansing	1/1/2013	Village of Watkins Glen	1/1/2020
Village of Homer	1/1/2015	Town of Horseheads	1/1/2020
Town of Willet	5/1/2015	Lansing Community Library	1/1/2020
Town of Virgil	1/1/2016	Town of Spencer	1/1/2020
Town of Truxton	1/1/2016	Village of Owego	1/1/2021
Town of Marathon	1/1/2016	Town of Catharine	1/1/2021
Town of Moravia	1/1/2017	Town of Cuyler	1/1/2021
Town of Preble	1/1/2017	Town of Dix	1/1/2021
Town of Scipio	1/1/2017	Town of Hector	1/1/2021
Town of Springport	1/1/2017	Town of Tioga	1/1/2021
Village of Union Springs	1/1/2017		

2020 Board of Directors

1. Steven Thayer, CFO**
2. Mack Cook*
3. Lisa Holmes*
4. Chris Wagner*
5. Alex Patterson
6. Edward Fairbrother*
7. Mark Witmer
8. LuAnn King
9. Laura Shawley
10. Kathy Servoss
11. Ellen Woods
12. Chuck Rankin
13. Kevin Williams
14. Donald J. Fischer
15. Judy Drake, Chair**

City of Ithaca
 City of Cortland
 Tompkins County
 Seneca County
 Town of Aurelius
 Town of Big Flats
 Town of Caroline
 Town of Cincinnatus
 Town of Danby
 Town of Dryden
 Town of Enfield
 Town of Groton
 Town of Homer
 Town of Horseheads
 Town of Ithaca

Board of Directors (continued)

16. Charmagne Rungay	Town of Lansing
17. Thomas Adams	Town of Marathon
18. Richard Nielens Jr.	Town of Mentz
19. John Malenick	Town of Montezuma
20. Terrance Baxter	Town of Moravia
21. Christine Laughlin	Town of Newfield
22. Joan Jayne	Town of Niles
23. Ed Wagner	Town of Owasco
24. Jim Doring	Town of Preble
25. Gary Mutchler*	Town of Scipio
26. Tom Gray	Town of Sennett
27. Ray Bunce	Town of Spencer
28. David Schenck	Town of Springport
29. Tom Brown	Town of Truxton
30. Richard Goldman	Town of Ulysses
31. Eric Snow	Town of Virgil
32. Alvin Doty, Jr.	Town of Willet
33. Peter Salton, Secretary**	Village of Cayuga Heights
34. Michael Murphy	Village of Dryden
35. Miles McCarthy	Village of Freeville
36. Nancy Niswender	Village of Groton
37. Tanya DiGennaro	Village of Homer
38. Donna Dawson	Village of Horseheads
39. Ronny Hardaway	Village of Lansing
40. Rordan Hart, Vice Chair**	Village of Trumansburg
41. Bud Shattuck*	Village of Union Springs
42. Lonnie Childs	Village of Watkins Glen
43. Darcey Rigdon	Lansing Community Library
44. Nancy Webster	Labor Rep #1
45. Jim Bower*	Labor Rep #2 (Chair, JCPSD)
46. Zack Nelson	Labor Rep #3
47. Doug Perine	Labor Rep #4
48. Tim Farrell	Labor Rep #5
49. Carol Sosnowski	Labor Rep #6
Labor Alternate – Jeanne Grace	
Rick Snyder – Treasurer	

* Executive Committee Member

** Officer

The **Health Consortium** launched in 2009 in Thompsons County, with a GML 5-G shared service agreement, and has now expanded to sixteen contiguous counties in upstate NY. The goal of the **Health Consortium** remains the same as when it began, to provide competitive health insurance premiums to our members. The Health Consortium is jointly owned by its municipal partners and writes its own benefit plans. We pride ourselves in providing high-quality, trustworthy, cost stable, responsive service for our subscribers.