Present: Lisa Homes, Laura Granger, Sunday Earle, Schelley Michell Nunn, Judy Drake, Board of Directors Chair and Temporary Member

Excused: Mark Emerson, Janine Bond, Ed Fairbrother, Luann King

Vacancy: One seat

Staff/Guests: Elin Dowd, Executive Director; Michelle Cocco, Clerk of the Board; Teri Apalovich, Finance Manager; Kylie Rodrigues, Benefit Specialist; Rob Spenard, Locey & Cahill

**Call to Order**

Ms. Holmes, Chair, called the meeting to order at 1:03 p.m. and all present introduced themselves.

**Changes to the Agenda**

The resolution entitled Adoption of Amended Application Process was withdrawn from the agenda as further work is needed.

**Approval of January 24, 2022 Minutes**

It was MOVED by Ms. Granger, seconded by Ms. Earle, and unanimously adopted by voice vote by members present, to approve the January 24, 2022 minutes as corrected. MINUTES APPROVED.

**Executive Director Report**

Ms. Dowd reported the Executive Committee will hold a retreat to discuss long-term planning on May 4th. There will be discussion of activity that has taken place with regard to the Medicare Advantage Plan which is being marketed outside of the Consortium and the importance in addressing this going forward. There will also be discussion of risk assessment related to future growth of the Consortium and the impact of members changing plans.

Ms. Dowd reported she has been busy speaking with prospective members and developing plan comparisons, particularly in the Consortium’s new territory. She announced a meeting will be held with Benefit Clerks on May 3rd.

Ms. Dowd provided a staffing update and said interviews will be taking place soon to fill the position of the Clerk of the Board as Michelle Cocco will be retiring soon. Ms. Dowd said the Consortium’s long-range planning will include discussion of staffing for the Consortium, including a look at when it will need to grow in the future, succession planning for all positions, and what responsibilities will need to be covered in the future.

Review/Approve Amended Personnel Policies

Ms. Drake reviewed changes that have been made to the Town of Ithaca’s Personnel Policies that apply to Consortium employees.

It was MOVED by Ms. Granger, seconded by Ms. Michelle Nunn, and unanimously adopted by voice vote by members present, to approve the Town of Ithaca’s Personnel Policies as presented. MOTION CARRIED.

Discussion of Open Meetings Law

Ms. Dowd provided an update on changes to the New York State Open Meetings Law and said the Consortium will return to the practice that was in place during the pandemic that allowed for members to attend meetings from an established satellite location. Ms. Cocco said a statement needs to be posted on the Consortium’s website to explain how a member of the public can attend a meeting. Also the legislation includes language that requires the adoption of a resolution stating that it is acceptable for a member to attend remotely from a private location in specific extraordinary circumstances such as when they are sick.

Ms. Drake said it is her understanding that there must be quorum in one public location. Ms. Cocco said she was advised that any member attending from a public location where proper notice was given would count toward quorum. There was interest by members in adopting a resolution to outline the Consortium’s plan for allowing and publicizing satellite locations and to allow members to attend in extraordinary circumstances.

In response to a question of whether each satellite location should be included in the resolution, Ms. Cocco said a public location can change with each meeting. Ms. Earle suggested the resolution state “a member can attend from any designated publicly-accessible satellite location as posted on the Consortium’s website for the specified meeting.”

Ms. Holmes said the legislation includes a requirement that a resolution needs to be adopted by June 8th. There was consensus to move forward with an understanding by the Committee that the Consortium will return to holding open meetings on June 8th. Ms. Drake said there needs to be discussion of how members of the Joint Committee can continue to be permitted to attend meetings remotely as that has increased members’ ability to attend.

Newsletter Distribution

Ms. Dowd reported the Consortium is proposing to go paperless with the Newsletter in January of 2023. In July, members and retirees will begin to receive information on how to access the Newsletter; there will also be an option for retirees and employees without e-mail to register to receive it electronically. The Newsletter will continue to be sent electronically to Consortium municipalities for distribution to employees. Members were supportive of moving in this direction.

Prescription Benefit Management Contract Review

Ms. Dowd said the Committee received an update in their agenda packet on the status of prescription benefit management services. She explained a situation that occurred at the beginning of the year when ProAct moved to a new platform that hadn’t been discussed in depth during last year’s contract discussions. She said they changed systems in January and when this happened the relationship between ProAct and Excellus was impacted as the information feed was no longer mapped correctly. This particularly impacted the City of Ithaca and its bargaining units that have very unique prescription drug classes and resulted in some members being unable to fill prescriptions.

Ms. Dowd said Ms. Rodrigues met with several groups, including ProAct, Excellus, and Locey and Cahill, to start a cleanup to make sure Excellus had all of the correct information and that it was being fed to ProAct platform correctly. Ms. Dowd said it was also identified during that process that there needed to be a cleanup of plans and that process is underway. Ms. Dowd said at the same time there was a formulary change that specifically impacted diabetic medications and tier changes; another impact of this change was the further accumulator issues.

Ms. Dowd said the Consortium received great support from ProAct and Ms. Rodrigues was given some online tools that allowed her to see how claims were being paid and share information with subscribers immediately. Also, if subscribers weren’t successful in getting resolution with ProAct they were able to contact Ms. Rodrigues. Ms. Dowd noted there continues to be issues with the ProAct website and the ability of members to access particular data.

Ms. Earle said in retrospect she wishes there had been more information to retirees from ProAct, including a way for the notification to get a retiree’s attention better.

Mr. Spenard said the one thing that caught the attention of Locey and Cahill was their tier change and the lack of an alternative insulin drug. Ms. Drake said she learned through the process that there are times when a member can receive a better benefit though a retail pharmacy as opposed to mail order and noted the process of learning how and where to shop for prescriptions can be very confusing for retirees.

It was suggested that the Committee hold an executive session at its next meeting to discuss prescription benefit management services. Ms. Dowd spoke of timing as this contract requires Board of Directors approval. She will alert the Committee if a special meeting is needed.

**RESOLUTION NO - 2022 –** **ADOPTION OF AMENDED ONLINE ENROLLMENT POLICY AND Commercial Group Health Insurance Application/Change Form**

MOVED by Ms. Drake, seconded by Ms. Michell Nunn. Ms. Dowd explained the intent is to bring the policy in line with current practice and also noted the change in the title of the form. The resolution was unanimously adopted by voice vote by members present.

WHEREAS, non-online subscriber enrollment has many opportunities for things to slip through the cracks and can result in delays due to the length of time between when a subscriber submits their enrollment change and when it is in the “system”, and

WHEREAS, the Consortium’s vision statement includes: “*The Consortium administers operations by collaborating with claims administrators, providers, and employee representatives in an effort to manage its costs, efficiencies, and success,”* and

WHEREAS, adopting a policy whereby all enrollment changes being submitted online complies with the Vision Statement and works in concert with the Excellus software system to optimize delivery of service, and

WHEREAS, Excellus has committed to process timelines for online enrollment, now therefore be it

RESOLVED, on recommendation of the Operations Committee, That the Executive Committee, on behalf of the Board of Directors, adopts the amended “Online Enrollment Policy” ensure all enrollment changes as soon as practicable will be done “online”.

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**RESOLUTION NO. – 2022 - ADOPTION OF POLICY REGARDING REINSTATEMENT OR TERMINATION OF SUBSCRIBERS**

MOVED by Ms. Granger, seconded by Ms. Earle. Ms. Dowd explained there is a policy from 2016 that addresses how the Consortium specifically manages retrospective terminations. This resolution clarifies that the Consortium, as an Article 47 self-funded plan, is governed by this 120-day reinstatement or termination. In response to Ms. Earle, Ms. Dowd said the Consortium can terminate a policy due to death at the time of notice and does not need the death certificate to do so. The resolution as unanimously adopted by voice vote by members present.

WHEREAS, as a self-funded plan, the Consortium has **120 days** from the receipt date to make additions, changes, reinstatements and terminations with the Plan Administrator, and

WHEREAS, any change past 60 days requires a “Retro Activity Exception Form”, and

WHEREAS, additions and changes should not be allowed after the 60-day period unless there is qualifying event and a retro exception request submitted with supporting documentation, and

WHEREAS, this policy has been created to help administer any retroactive requests post 60 days of the qualifying event to add or delete a subscriber and is intended to:

• Prevent adverse selection.

• Ensure subscriber and group satisfaction.

• Ensure timely and accurate reimbursement to providers for services rendered to members.

• Meet limitations regarding the ability to retract claims.

• Reduce administrative and provider costs when claims are adjusted or retracted.

• Comply with Federal and NYS requirements

now therefore be it

RESOLVED, on recommendation of the Operations Committee, That the Executive Committee, on behalf of the Board of Directors, hereby adopts the following policy to govern the length of time transactions must be submitted.

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**RESOLUTION NO. - 2022 – AMENDMENT TO RESOLUTION NO. 011-2020 “Authorization by the Board of Directors to Remove Benefit Plans from the Consortium’s menu OF Benefit Plan Offerings” BY RESTRICTING PLAN ENROLLMENT**

MOVED by Ms. Michelle Nunn, seconded by Ms. Drake. Ms. Dowd said the Consortium is trying to move people out of particular plans and has been having people move back into them. As a result of this she called attention to language contained in the resolution stating “any new or existing members be restricted from enrolling or re-enrolling in the following plans”. The resolution also clarifies coding and plan descriptions. She said the resolution asks that when membership drops to below five enrollees and the plan is no longer being offered to active employees or retirees that the Consortium will eliminate the plan. She said there is a need to clean up the Consortium’s menu of plans, noting any plan requires administration and can be time-consuming. The Consortium will work with municipalities to identify an alternate plan with a comparable benefit and the resolution will be reviewed by the Joint Committee on Plan Structure and Design.

Ms. Michell Nunn said while she understands the intent of the resolution, the City of Ithaca is currently in negotiations and she cannot vote on any action that may conflict to items under negotiation. Ms. Earle said she also could not vote on any action that could potentially impact negotiations at Tompkins Cortland Community College. Ms. Dowd said while she believes the resolution could be revised to accommodate Ms. Nunn’s concerns, she has concern leaving it open-ended as the Consortium would like to discontinue offering the Indemnity Plan. Ms. Drake offered to share sample contract language that could be used.

Ms. Nunn said she is interested in learning more about the Medicare Supplement Plan and the advantages of moving to that. Ms. Earle offered to discuss the positive experiences she has observed at the College.

It was the consensus of members to withdraw this resolution to allow time for a revision to the drafted. RESOLUTION WITHDRAWN.

WHEREAS, to achieve administrative efficiencies the Consortium removed from the Consortium’s Menu of Benefit Plan Offerings effective January 1, 2021 the following benefit plans:

1. **Indemnity Plan MM3**

Plan Description:

MM3 – Basic Benefits with “Major Medical” $100/$200 Deductible & $750/$2,250 Out-of-Pocket Maximum

1. **Medicare Supplement Plans MS1. MS2. MS5, and MS6**

Plan Descriptions:

MS1 - Medicare Supplement Plans with No Prescription Drug Coverage

MS2 - Medicare Supplement Plans with $5/$15/$30 Rx Copay Plan

MS5 - Medicare Supplement Plans with 20%/20%/40% Rx Copay Plan

MS6 - Medicare Supplement Plans with 20%/30%/50% Rx Copay Plan

, and

WHEREAS, to achieve further administrative efficiencies the Consortium wishes to continue consolidation and streamlining its menu of benefit plan offerings, and

WHEREAS, although included in the menu of benefit plan offerings, there are medical and prescription drug plans that are not being utilized by Consortium Participants and have no one enrolled or less than five Participants, and

WHEREAS, the removal of these plans from the Consortium’s menu of benefit plans has been recommended by the Consortium’s Consultants, now therefore be it

RESOLVED, on recommendation of the Operations Committee and the Joint Committee on Plan Structure and Design, That the Executive Committee, on behalf of the Board of Directors, hereby Amends Resolution No. 011-2020 “Authorization by the Board of Directors to Remove Benefit Plans from the Consortium’s Menu of Benefit Plan Offerings” to include the following benefit plans be removed from the Consortium’s Menu of Benefit Plan Offerings, and any new or existing members be restricted from enrolling or re-enrolling in the following plans:

1. **Classic Blue Indemnity Plans**

Plan Descriptions:

MM1- Classic Blue $50/$100 Deductible & $400/$1,200 Out-of-Pocket Maximum

MM2- Classic Blue $100/$200 Deductible & $200/$400 Out-of-Pocket Maximum

MM5- Classic Blue $100/$300 Deductible & $400/$1,200 Out-of-Pocket Maximum

MM3- Classic Blue MM RX (No ProAct Prescription coverage) $50/$150 Deductible & $400/$1,200 Out-of-Pocket Maximum

1. **PPO Plans**

PPO1- PPO $10/$35 with $1,000/$3,000 Out-of-Pocket Maximum and $250/$750 Out-of-Network Deductible

PPO2- PPO $15/$35 with $1,500/$4,500 Out-of-Pocket Maximum and $500/$1,500 Out-of-Network Deductible

PPO3- PPO $20/$35 with $2,000/$6,000 Out-of-Pocket Maximum and $750/$2,250 Out-of-Network Deductible

PPOT- PPO $10/$100 with $1,000/$3,000 Out-of-Pocket Maximum and $250/$750 Out-of-Network Deductible

1. **Comprehensive Value Plan**

MM6- Comprehensive Plan with $500/$1,500 Deductible & $2,500/$7,500 Out-of-Pocket Maximum

1. **2-Tier Rx Plans 2T1, 2T2, and 2T3 (No Prior Authorization, Quantity Limit, or Step Therapy)**

2T1 – 2-Tier Rx Plan with $1/$1 generic/brand retail copays and $1/$1 generic/brand mail-order copays

2T2 – 2-Tier Rx Plan with $2/$5 generic/brand retail copays and $2/$5 generic/brand mail-order copays

2T3 – 2-Tier Rx Plan with $2/$10 generic/brand retail copays and $2/$10 generic/brand mail-order copays

1. **3-Tier Rx Plans 3T3, 3T5a, 3T6, 3T7, 3T9, 3T10, 3T11, and 3T13**

3T3 – 3-Tier Rx Plan with $5/$10/$25 Tier 1/2/3 retail copays and mail-order copays at 2x retail

3T5a – 3-Tier Rx Plan with $5/$15/$30 Tier 1/2/3 retail copays and mail-order copays at 1x retail

3T6 – 3-Tier Rx Plan with $5/$15/$30 Tier 1/2/3 retail copays and mail-order copays at 2x retail

3T7 – 3-Tier Rx Plan with $5/$20/$35 Tier 1/2/3 retail copays and mail-order copays at 2x retail

3T9 – 3-Tier Rx Plan with $10/$25/$40 Tier 1/2/3 retail copays and mail-order copays at 2x retail

3T10 – 3-Tier Rx Plan with $15/$30/$45 Tier 1/2/3 retail copays and mail-order copays at 2x retail

3T11 – 3-Tier Rx Plan with 20%/20%/40% Tier 1/2/3 retail and 15%/15%/40% mail-order copays

3T13 – 3-Tier Rx Plan with 20%/30%/50% Tier 1/2/3 retail and 20%/30%/50% mail-order copays

RESOLVED, further, That the Board of Directors shall take action to consider eliminating any of these plans from its menu of offerings once the membership drops to below five (5) enrollment and the plan is no longer being offered to active employees or retirees. In addition, this would eliminate MM6 Comprehensive Plan on December 31, 2023 and MM3 Classic Blue MM RX with an end date of December 31, 2022 due to low enrollment.

**\* \* \* \* \* \* \* \* \* \***

**RESOLUTION NO. - 2022 – ADOPTION OF BUSINESS CONTINUITY AND DISASTER RESPONSE PLAN - 2022**

MOVED by Ms. Drake, seconded by Ms. Earle, and unanimously adopted by voice vote by members present. Ms. Dowd briefly reviewed the purpose of this annual resolution, noting there are very few changes from 2021.

WHEREAS, the Department of Financial Services has advised in Insurance Circular Letter No. 7 (2021) that the Consortium must develop a Business Continuity and Disaster Response Plan (BCPDRP) each year, and

WHEREAS, the purpose of a Business Continuity and Disaster Response Plan is to ensure the organization's system of procedures to restore critical business functions in the event of unplanned disaster, and

WHEREAS, Consortium staff has worked in cooperation with the Tompkins County Information Technology Services Department in creating the Consortium’s first approved Business Continuity and Disaster Response Plan that was originally adopted September 1, 2021, and

WHEREAS, upon approval, the Plan will be maintained by the Executive Director of the Consortium and shall be made available to all Consortium Participants, Consortium employees, and the Tompkins County Information Technology Services Department, and

WHEREAS, the Business Continuity and Disaster Response Plan shall be updated and approved annually, now therefore be it

RESOLVED, on recommendation of the Operations Committee, that the Executive Committee, on behalf of the Board of Directors, hereby approves the Business Continuity and Disaster Response Plan dated April 25, 2022.

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**Next Meeting Agenda Items**

At the next regular meeting on June 25th the Committee will begin to discuss revisions to the Municipal Cooperative Agreement and items deferred from this meeting including: Resolution addressing the Open Meetings Law; a resolution amending the application process, and a revised resolution amending the Consortium’s menu of benefit plan offerings.

Ms. Nunn suggested a future newsletter include information on ways members can avoid out-of-network charges.

**Adjournment**

The meeting adjourned at 2:26 p.m.