

**Greater Tompkins County Municipal Health Insurance Consortium**  
**Operations Committee**  
**October 23, 2023 – 1:00 p.m.**  
**Zoom Remote or Aurora Room, Town of Ithaca Building**

Present: Laura Granger\*, Committee Chair; Schelley Michell-Nunn (arrived 1:04p); Judith (Judy) Drake, Committee Vice Chair; Brian Weinstein\*, Labor; Ruby Pulliam; Janine Bond\*; Sunday Earle\*; Rita McCarthy\*; Mark Emerson\*

Excused:

Absent: LuAnn King, Ed Fairbrother

Staff/Guests: Elin Dowd, Executive Director; Teri Apalovich, Finance Manager; Kylie Rodrigues, Benefits Specialist; Lynne Sheldon, Clerk of the Board; Sarah Thomas, Tompkins County (arrived 1:19p)

\* = Via Zoom remote

**Call to Order**

Ms. Granger, Chair, called the meeting to order at 1:00 p.m.

**Changes to the Agenda**

There were no changes to the agenda.

**Approval of July 24, 2023 Minutes**

It was MOVED by Ms. Pulliam, seconded by Ms. Drake, and unanimously adopted by voice vote by members present and seen members via online, to approve the minutes as corrected of July 24, 2023. MINUTES APPROVED.

**Executive Director Report Update**

Ms. Dowd said that the Consortium is hoping to have the ability to start moving into the new office in Cayuga Heights after the furniture arrives around November 6th and hopes to be fully moved and hosting meetings by the 15<sup>th</sup> of November.

- a. **Department of Fiscal Services (DFS)/Audit Recommendations:** Ms. Dowd said the auditors started their audit of the Consortium at the beginning of this year and it is still on-going. She said there have been many claim questions for both Excellus and ProAct. Ms. Dowd added most of the financial technical governance recommendations have been minimal such as: No Officer should be on the Audit Committee, and the Chief Financial Officer cannot chair the Audit Committee; Request to update the Consortium's records retention policy; and adopting additional cybersecurity programing.

Ms. Dowd said DFS has billed the Consortium through the end of March, with an average of approximately \$15K per month. She expects that amount to increase as DFS continues to bill for more items.

- b. **Cyber Security Update with Foxpointe Solutions Proposal:** Ms. Dowd said the Consortium is working with the Tompkins County Information Technology (TC-IT)

Department as DFS recommends the Consortium to name an individual as the Information Security Officer. DFS would like cyber security programs in place to protect administrative staff from accessing HIPAA information, a safe filing system, and protection if one of the Consortium's vendors had a cyber-attack, questioning whether the Consortium would still be able to conduct business. Ms. Dowd said TC-IT does not have the manpower to provide the Consortium with an Information Security Officer, therefore, the Consortium has received a quote from Foxpointe Solutions to perform as the Consortium's Virtual Information Security Officer. Ms. Dowd said that Tompkins County may have a shared need for the services which may be beneficial as they and the Consortium could possibly share the financial aspect.

- c. **Strategic Planning Updates:** Ms. Dowd said the Consortium hired Segal Consulting in 2022 to look at the Consortium's premium equivalent rate study. Locey & Cahill has continued using research data from Segal Consulting to report if the Consortium moved into a 4-tiered system, how would this move impact the Consortium and the insured. Locey & Cahill presented their analysis last week to the Executive Committee reporting there were several ways, but the options would not be easy to implement. For example, if the Consortium set a lower rate for a single plus one coverage, the family coverage premiums would have to be increased as well. She said Locey & Cahill has been asked by the Consortium to compare with the open market and how would rates compare to Excellus BCBS and/or New York State plans. These results will be discussed at the next Executive Committee meeting.
- d. **PBM Transition Update:** Ms. Dowd reported Consortium staff meets with Excellus BCBS weekly to discuss the pharmacy benefit manager transition. Consortium staff is working with Excellus to confirm all the Consortium's plan descriptions to make sure that when plans are set up in their system, they are being set up correctly. Excellus BCBS has placed the Consortium in a "black out period" where the Consortium cannot do any data entry for new enrollments, as Excellus BCBS is currently setting up the new accounts. Letters to members have started to go out explaining that they will be getting a new pharmacy benefit manager. These letters will also include notifications if drugs will be increasing in tier levels, causing a negative price impact, and/or if one's pharmacy is out of network. New Excellus BCBS insurance cards identifying the new pharmacy benefit manager will also be sent out via US Mail in December. Ms. Michell-Nunn inquired what will happen with prior authorizations. Ms. Rodrigues responded if an individual has a prior authorization currently, it will roll to Excellus BCBS using the same ProAct expiration date, so individuals are not having to obtain brand new authorizations at the start of a new year. Ms. Rodrigues also explained that if an individual is on a medication that currently does not have a ProAct preauthorization, whereas Excellus BCBS requires one, Excellus BCBS will allow a 3-month extension to members so that they may pick up their medication. They will then receive a letter from Excellus BCBS stating they have picked up a medication that now requires pre-authorization, and to please reach out to their physician to send in that documentation.
- e. **Update to Operations 2024 Meeting Schedule/Time:** Ms. Dowd reported that the Consortium has made a slight change to the 2024 meeting days/times.

The Operations Committee meeting will be moved to the first Thursday of the month (no longer on Monday) and will now be held quarterly. The time of the meeting will also be moved from 1:00PM to 1:30PM.

**Resolutions:**

**Resolution: Amendment to Resolution No. 032-2022 that Amended 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:**

Ms. Dowd shared that the Consortium has been cleaning up the group coding system, and consolidating, and eliminating plans that the Consortium is administering. The Consortium is asking the Operations Committee to approve elimination of plans that have no individuals attached to for coverage, or plans that no municipality would like to return to. Ms. Rodrigues explained that these plans affect very few municipalities and participants, and eliminating them will really help the Consortium with not having to create benefit summaries, summary of benefits, and plan structures.

**RESOLUTION NO. XXX - 2023 – AMENDMENT TO RESOLUTION NO. 032- 2022 THAT AMENDED 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. Drake, seconded by Ms. McCarthy. The resolution was unanimously adopted by voice vote of members present, and visibly seen members via remote locations to approve the following resolution.

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:

**Indemnity Plan MM3**

Plan Description:

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

**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 maintain continued administrative efficiencies the Consortium removed from the Consortium’s Menu of Benefit Plan Offerings effective January 1, 2023 the follow benefit plans:

**Indemnity Plan MM3- Classic Blue MM RX (No ProAct Prescription Coverage)**

Plan Description:

MM3- Classic Blue MM RX \$50/150 Deductible & \$400/ \$1,200 Out-of-Pocket Maximum

**PPO3- PPO \$20/35**

Plan Description:

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

, and

WHEREAS, per Resolution No. 032-2022, the Consortium voted to remove from the Consortium's Menu of Benefit Plan Offerings effective January 1, 2024, the following benefit plan:

**Comprehensive MM6 Plan**

Plan Description:

\$500/\$1500 Deductible & \$2,500 \$7,500 Out-of-Pocket Maximum

**Due to End December 31,2023**

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, now therefore let it be

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. 032-2022 and 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 Participants will be restricted from enrolling in the following plans due to low enrollment, to be effective January 1, 2024.

**3T11- 3 Tier Prescription Drug Plan**

Plan Description:

3T11- 3 Tier 20%/20%/40% Prescription Coverage

**3T13- 3 Tier Prescription Drug Plan**

Plan Description:

3T13- 3 Tier 20%/30%/50% Prescription Coverage

**PPO1 \$10/35 OV Kids \$0**

Plan Description:

PPO1 \$10/35 OV Kids \$0 Copay Under 19 for select services with \$1,000/ \$3,000 Out-of-Pocket Maximum & \$250/\$750 Out of Network Deductible.

**Indemnity Plan MM1 Classic Blue \$100/300 Medical Plan**

Plan Description:

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

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**Resolution: Complete and Close 2022 Dependent Audit:** Ms. Dowd explained that the Consortium started a dependent audit in 2022, where some extensions were given. She said these audits support the Consortium to pay claims effectively by removing dependents who are no longer qualified dependents. These records will be audited on a more regular basis every three years to confirm that municipalities are keeping updated records, due to divorced individuals, new retirees, as well as stepchildren, or aged children turning 26 that should be terminated coming off coverage that should not be covered. Currently, all audits have been completed. Ms. Rodrigues added that during the audit, the Consortium did not find many who carried unqualified dependents. She said Excellus has taken on notifying people when dependents age out, which has helped dramatically. She said this wasn't happening previously, which was portion of why some adult dependents were still on the plan when they shouldn't have been.

**Resolution No. XXX- 2023: Complete and Close 2022 Dependent Audit**

MOVED by Ms. Pulliam, seconded by Mr. Emerson. The resolution was unanimously adopted by voice vote of members present, and visibly seen members via remote locations to approve the following resolution.

WHEREAS, the Greater Tompkins County Municipal Health Insurance Consortium (GTCHMIC) is a self-insured municipal cooperative health benefit plan operating pursuant to Article 47 of the New York State Health Insurance Law, and

WHEREAS, changes occur in employees lives with marriage, divorce, childbirth, and adoptions that may not become known to the health insurance provider, and

WHEREAS, the GTCMHIC has a responsibility to all employees and employers to ensure that the Plan covers only eligible spouses and/or dependents, and

WHEREAS, the latest deadline for completion, May 15, 2022, for the Dependent Certification Audit, as outlined in Resolution No. 01-2015, by all municipal members has expired, and

WHEREAS, the Consortium member municipalities have completed the dependent verification process and have documented that 40 enrollees needed to be moved from active class to retiree class but there were no errors of the certified contracts with dependents found, and

WHEREAS, Resolution No. 013-2023, Directing Executive Director and Staff to Complete the City of Ithaca's Dependent Certification Audit, has been completed as of September 15, 2023, with the exception of the union groups IPFFA and COU, per the City of Ithaca's request and per the Memorandum Of Understanding, MOU, recently established with the IPFFA and COU unions, and

WHEREAS, The City of Ithaca will complete the audit for these groups as of November 30, 2023, now therefore be it

RESOLVED, on the recommendation of the Operations Committee and the Executive Committee that the Dependent Audit has been completed and all municipal members have sent in reports to the Consortium, and be it

FURTHER RESOLVED, pending the completion by the City of Ithaca dependent audit on November 30, 2023, the 2022 Dependent Audit can be closed.

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**Resolution: Amendment of Outdated Resolution No. 001 of 2017 “Adoption of GTCMHIC Records Retention Policy” and Adopt the UPDATED LGS-1:** Ms. Dowd explained that the Department of Financial Services (DFS) recommended during their audit of the Consortium that the Consortium must adopt a 2017 “Records Retention Policy” that New York State Archives updated in 2021. The LGS-1 features records for the general administration of all local government NY State archives.

**RESOLUTION NO. XXX - 2023 – AMENDMENT OF OUTDATED RESOLUTION NO. 001 OF 2017 “ADOPTION OF GREATER TOMPKINS COUNTY MUNICIPAL HEALTH INSURANCE CONSORTIUM (GTCMHIC) “RECORDS RETENTION POLICY” and ADOPT THE UPDATED LGS-1 FEATURING RECORDS FOR THE GENERAL ADMINISTRATION OF ALL LOCAL GOVERNMENT NY STATE ARCHIVES**

MOVED by Ms. Drake, seconded by Mr. Emerson. The resolution was unanimously adopted by voice vote of members present, and visibly seen members via remote locations to approve the following resolution.

WHEREAS, Per Resolution No. 001-2017, The GTCMHIC adopted the New York State Archives CO-2 as its records retention schedule for the Consortium’s administrative records, and

WHEREAS, The record retention report the GTCMHIC adopted via resolution, is now deemed outdated by the NYS Department of Financial Services (DFS), and

WHEREAS, Per New York State Archives, 2021 LGS-1 consolidates, supersedes, and replaces Schedule CO-2, MU-1, MI-1 and ED-1, therefore now be it,

RESOLVED, By the GTCMHIC that *Retention and Disposition Schedule for New York Local Government Records (LGS-1)*, issued pursuant to Article 57-A of the Arts and Cultural Affairs Law, and containing legal minimum retention periods for local government records, is hereby adopted for use by all officers in legally disposing of valueless records listed therein.

FURTHER RESOLVED, that in accordance with Article 57-A:

(a)only those records will be disposed of that are described in *Retention and Disposition Schedule for New York Local Government Records (LGS-1)*, after they have met the minimum retention periods described therein;

(b)only those records will be disposed of that do not have sufficient administrative, fiscal, legal, or historical value to merit retention beyond established legal minimum periods.

FURTHER RESOLVED, On recommendation of the Operations Committee, That the Executive Committee on behalf of the Board of Directors, hereby adopts the amended 2021 Records Retention Policy – LGS-1 as the record retentions policy for the Greater Tompkins County Municipal Health Insurance Consortium effective immediately.

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**Future Discussion Topics:**

Update Appeal Procedure with new Excellus PBM in place  
Summary Plan Language

**Adjournment**

The meeting was adjourned at 1:32 p.m.

The next meeting will be held February 1, 2024 (1<sup>st</sup> Thursday) @ 1:30PM

*Respectfully submitted by Lynne Sheldon, Clerk of the Board*