

INSURANCE COMMITTEE MINUTES

Lee County, Illinois
May 16, 2022 at 2:00 PM CDT
Old Lee County Courthouse, Third Floor, 112 E. 2nd St, Dixon, IL 61021

I. Call to Order

Meeting was called to order at 2:01 p.m. by Nancy Naylor

- II. Roll Call Board Members present: Nancy Naylor and Tom Kitson
- III. Employees:

Present: Penny Skibinskie, David Anderson, David Glessner, Lori Miller, Samantha Schmitt, Staci Stewart, Wendy Ryerson

Absent: Teri Zinke, Brandi Barkowski, Carmen Bollman, Christy Laws,

IV. Visitors

(None)

V. Approval of Minutes from the Previous Meeting - (April 9, 2021 and August 19, 2021)

There were no corrections of additions to the minutes; they will stand as presented

VI. Old Business

(none)

VII. New Business

A. Introduction of Benefit Staff – Health Plan Consultant

Wendy Ryerson explained she realized a lot of the committee members hadn't heard why we are at the point we are and why we're having a presentation by a third-party consultant and wants to give the committee a little background, so the committee understands how we got here.

Last fall, we may recall the Health Insurance Committee had a new chairperson – Jim Schielein. Jim brought up it's been 5 years since we evaluated our insurance plan and feels we should step back and analyze where we are at, whether there

is any room for improvement and go out to bid to confirm we are with the right place regarding our health insurance. And that lead us to finding Brad Johnson with Assured Partners. Brad's "job" is to prepare information and present it to the Insurance Committee and Board. Wendy connected with Brad, and they moved through the financial budgetary approval process last Fall, the Board did approve this. Wendy, Nancy N and Brad have been communicating mostly from the prospective of just gathering data and that is what Brad and Tally are here to share with us today kind of what they gathered and most importantly looking for our feed back on any questions we have or anything we see we might want some improvement on. We are anticipating that we do go out to bid it may be nothing more than informational because we may find out that where we are at right now is absolutely the best bang for our buck. But that is the end game to this conversation and the consultant's job is to gather all the information we have and go out for bid, and then this committee, and ultimately finance and full board can decide regarding where we go with our health insurance.

B. Health Plan Review Project

Brad Johnson reviewed the information he put together for the committee. (power-point presentation) Brad asked for feedback from the committee members.

Items we'll be reviewing –

- 1. Comparing what our health benefits offer to comparable Employers (today). Key features will be deductible, out of pocket, how much cost out of our paychecks, and how much does it cost over all with the County.
- 2. Insurance Carrier Bidding & Analysis Note Intergovernmental Personnel Benefit Cooperative (IPBC) requires Stay/Go decision by September.

Things that impact the price are the key things we are going to look at – value adds Wellness Committee/Benefits, customer service, trust, and honesty with employees. One reason why insurance cost has gone up is, 17 move employees (family) have been hired over the past 4 years. Retirees, retire as single.

Key factors will be deductible, co-pays, pharmacy – generic/brand name, out of pocket maximum and possibly a 2nd plan.

Timeline for future Meetings:

May/June/July – really look at our insurance.

August – pros and cons – a closer look at our insurance.

September – Deadline

VIII. Next Meeting

The next meeting is scheduled for May 16, 2022, at 2:00 PM

IX. Adjournment

Meeting adjourned at 3:34 PM

Respectfully submitted by, Penny Skibinskie, Lee County Insurance Deputy



Health Plan Review Project Lee County Insurance Committee March 14, 2022





Today's Discussion

- Introductions of All Committee Members
- Our Role on the Committee
- Future **Meeting** Topics
- Local Benchmark of Health Plan



Our Role



Serving as an Objective
Outside Benefit Expert
to assist committee with
Discussions



Prepare and present content for regular Insurance Committee Meetings



Provide Briefings on Latest Trends & Usable Ideas



Items We'll Be Reviewing



- 1. Compare Your Health Benefit Offering to Comparable Employers (Today)
- 2. Review Underlying Cost Drivers
- 3. Insurance Carrier Bidding & Analysis Note Intergovernmental Personnel Benefit Cooperative (IPBC) Requires Stay / Go Decision by September
- 4. Sharing of New Ideas and Developments in the Market
- 5. Employee Communication Ideas



Health Plan Offerings of Comparable Illinois Municipalities March 2022











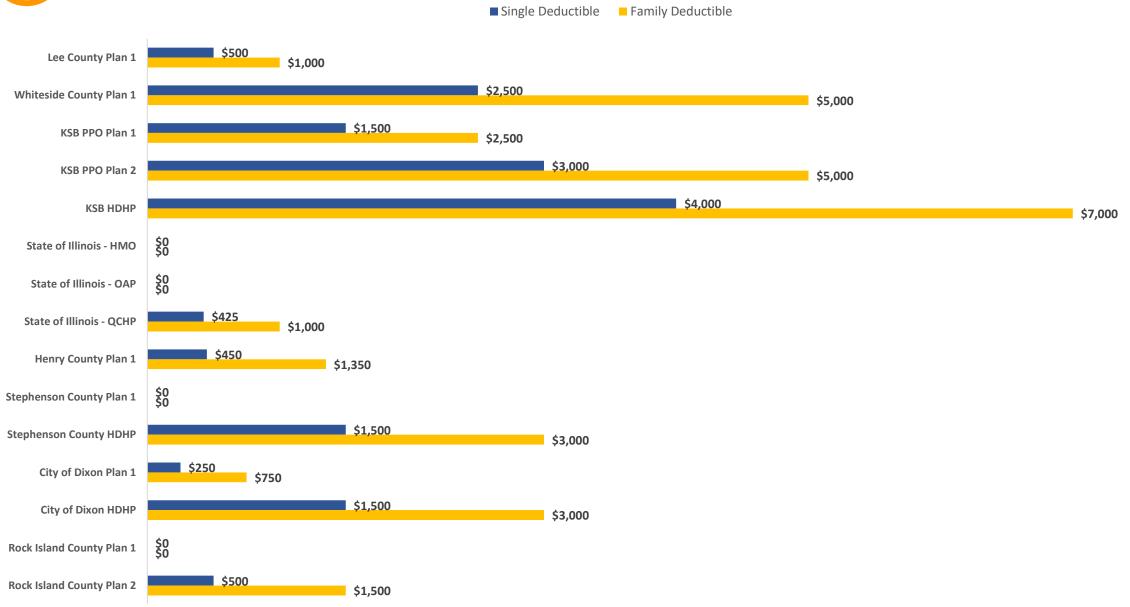


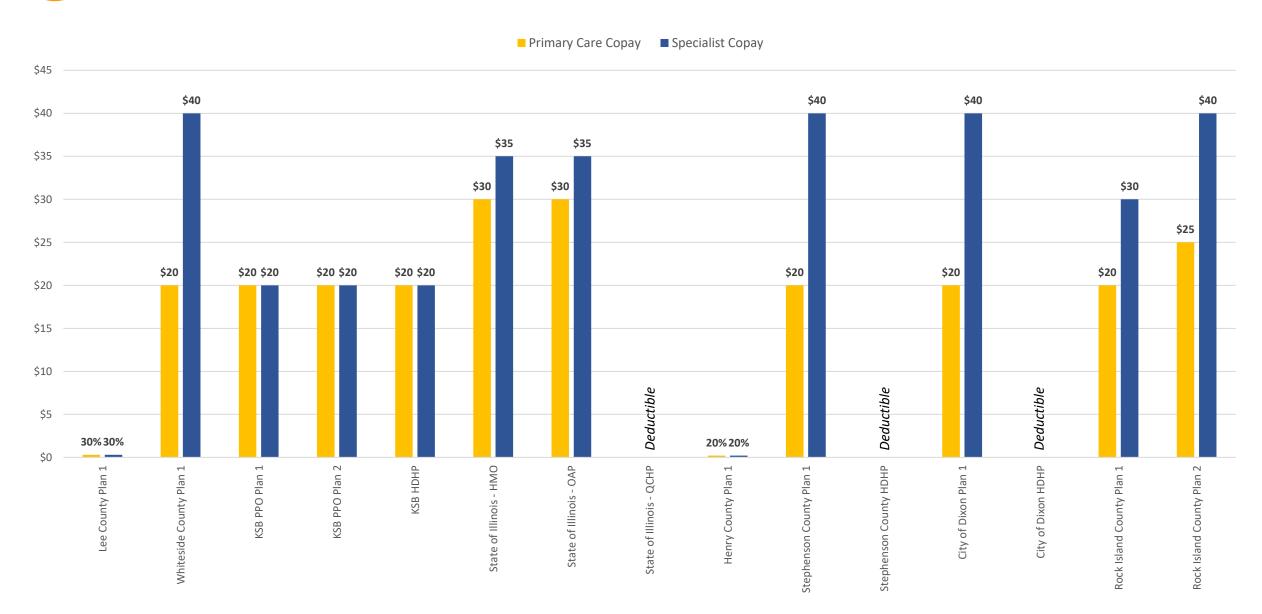




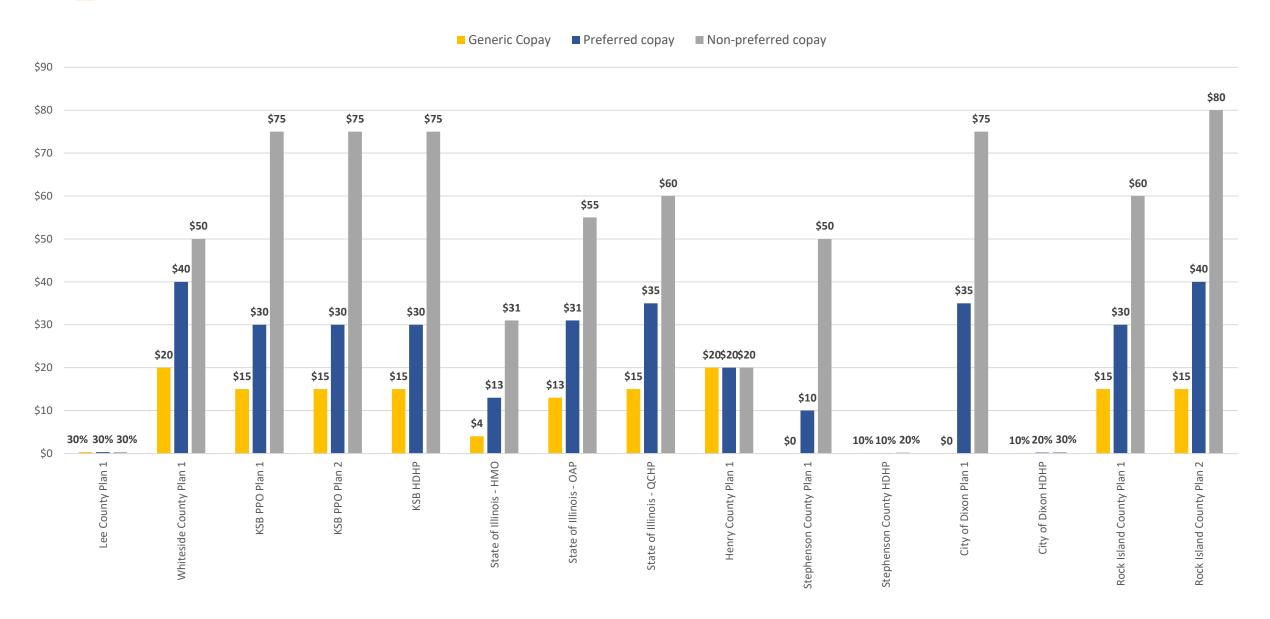


Health Plan Deductibles – All Plans



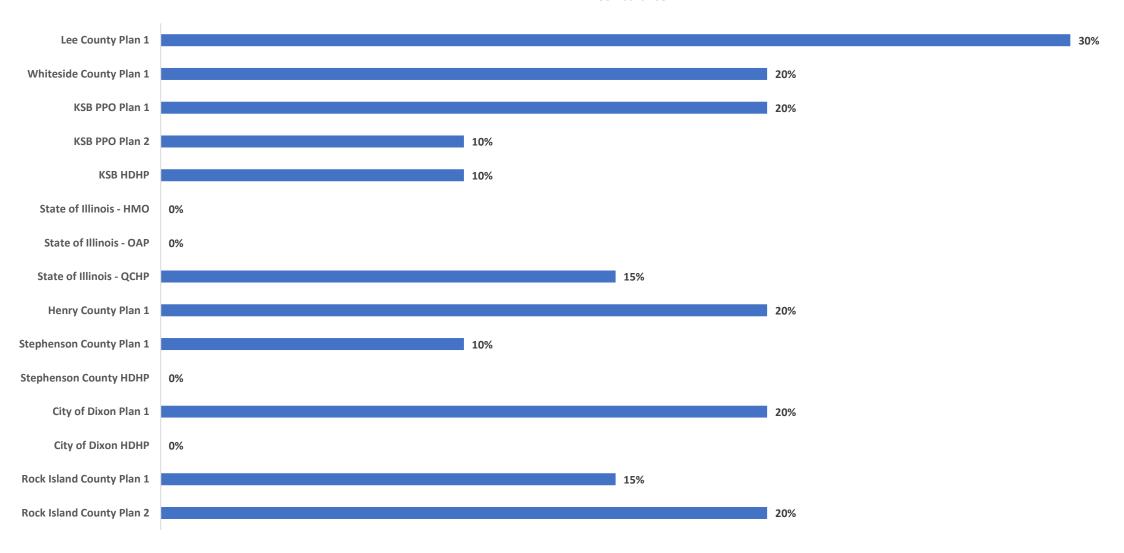


Rx Copayments



Medical Coinsurance Level



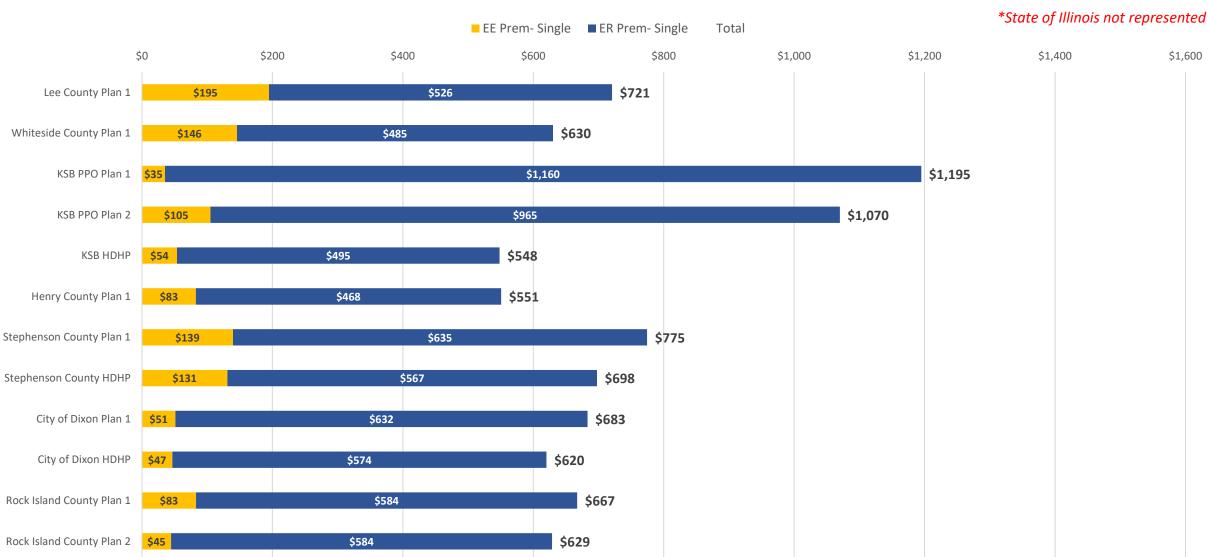


Out-of-Pocket Maximum



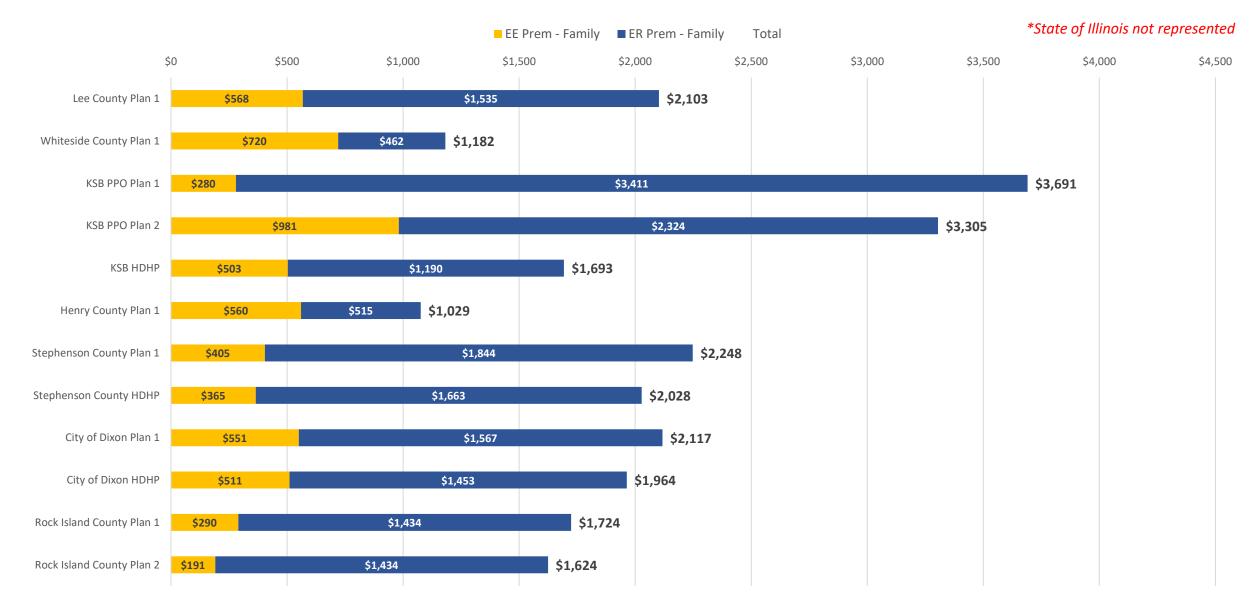


Cost Sharing (Single) - Monthly





Cost Sharing (Family) - Monthly









Whiteside County -

Spouses who have coverage available to them through their employer, are not eligible for coverage on the Whiteside County Plan.



KSB -

Deductibles assume services are performed at KSB unless service is not available. Deductible is higher at other providers.



State of Illinois –

There is a separate Rx deductible of \$150 per enrollee in each plan.



Henry County -

The out-of-pocket maximum for a family increases with each enrollee up to 6 members. This benchmark represents 4 members.



Lee County -

Benefit is partially selffunded by the county.



Stephenson County –

Spousal carve-out in place, though not defined.



City of Dixon –

\$1500 Single and \$3700 Family annual contribution to an employee HSA account.



Rock Island County –

Employee wellness discount rates are represented in this benchmark.

Medical Plan

Benefits	BCBS PF0464		
Major Medical Coverage			
Deductible			
Network	\$6,000 individual* / \$12,700 family		
Non-Network	\$12,000 individual** / \$25,400 family		
Coinsurance			
Network	100%		
Non-Network	100%		
Out-of-Pocket (includes deductible)			
Network	\$6,000 individual / \$12,700 family		
Non-Network	\$12,000 individual / \$25,400 family		
Outpatient Surgery & Diagnostic			
Network	Deductible applies, then 100%		
Non-Network	Deductible applies, then 100%		
Hospital Care - Inpatient			
Network	Deductible applies, then 100%		
Non-Network	Deductible applies, then 100%		
Hospital Care - Outpatient			
Network	Deductible applies, then 100%		
Non-Network	Deductible applies, then 100%		
Hospital Emergency Care			
Network	Deductible applies, then 100%		
Non-Network	Deductible applies, then 100%		
Physician Services			
Network	Deductible applies, then 100%		
Non-Network	Deductible applies, then 100%		
Other Covered Services			
Network	Deductible applies, then 100%		
Non-Network	Deductible applies, then 100%		
Preventive Services			
Network	100%		
Non-Network	Deductible applies, then 100%		
Prescription Drug Coverage (administered by Express Scripts)			
Retail (30-day supply)	Deductible applies, then 100%		
Mail Order (90-day supply)	Deductible applies, then 100%		

This benefit schedule is for illustrative purposes only; please consult benefits booklet for more information. This exhibit in no way replaces the plan document of coverage, which outlines all the plan provisions and legally governs the operation of the plans.



^{*}Employee pays first \$500. Employer pays 70% of next \$3,000 (or \$2,100) & employee pays 30% (or \$900). Employee pays a total of \$1,400. Employer pays last \$2,500 at 100% for a total of \$4,600.

^{**}Employee pays first \$500 x2. Employer pays 70% of next \$3,000 x2 (or \$2,100 x2) & employee pays 30% (or \$900 x2). Employee pays a total of \$1,400 x2. Employer pays last \$5,700 at 100% for a total of \$9,900 max.

DeductibleNetwork\$6,000 individual* / \$12,700 familyNon-Network\$12,000 individual** / \$25,400 family

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	Employer	Employee	<u>Total</u>
First \$500	\$0	\$500	\$500
Next \$3000	\$2,100	\$900	\$3,000
Next \$2500	<u>\$2,500</u>	<u>\$0</u>	<u>\$2,500</u>
	\$4,600	\$1,400	\$6,000

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	Employer	Employee	<u>Total</u>
First \$1000	\$0	\$1,000	\$1,000
Next \$6000	\$4,200	\$1,800	\$6,000
Next \$5000	<u>\$5,700</u>	<u>\$0</u>	<u>\$5,700</u>
	\$9,900	\$2,800	\$12,700



Debrief

What is working about current program that you want to keep?

What are things that you'd like to explore to change?

When employees talk about the health plan, what do they say?

Considerations: Coverage / Cost / Access to Providers / Employee Communication / Quality / Service Levels