

V.W.A.S.I.G. MINUTES Wednesday, June 25, 2014

V.W.A.S.I.G. trustees met on June 25, 2014 at willow Bend Country Club at 9:00 a.m. Members present at the time of roll call include Ken Amstutz, Ray Burden, Debby Compton, Mike Estes, Hollie Ford, Kevin Gehres, Brian Gerber, Rachael Harpel, Staci Kaufman, Todd Keller, Jeff Snyder, Carol Williman, Carolyn Winhover, Judy Wortman, and Matt Krites. A proxy was received for Ruth Ann Dowler. Also present were Todd Cullen, Cindy Stever, Ally Druckemiler, Mike Ruen, Lori Davis, Ashley Whetsel, and Troy Bowersock.

Minutes of the April 9 meeting were read silently. Mike Ruen had some minor corrections to the financial report. K. Gehres made a motion to accept the minutes as amended. D. Compton seconded the motion. Voice vote: Yes – 14; No – 0.

Mike Ruen gave the financial report. Financially, the group is doing well as of the end of April and the month of May. The receipts for the month of May totaled \$616,635.53. Expenditures totaled \$565,943.60. The ending cash balance at the end of May was \$3,303,703.10. M. Estes made a motion to accept the financial report. S. Kaufman seconded the motion. Voice vote: Yes – 14; No – 0. The Flex spending report was also given. J. Snyder made a motion to accept the Flex report. R. Burden seconded the motion. Voice Vote: Yes – 14; No – 0.

Todd Cullen presented the Huntington report. He discussed how our year to date has been. We are using only 79% of the money received from premiums. Plan costs are good for claims paid. Todd stated that we are getting strong discounts from Anthem for a rural area. The in-network discount is 42.5% while the out-of-network discount is 36.0%. Claims paid for in-network totaled \$4,436,410 (99.4%) while out-of-network totaled \$25,963 (0.6%).

Huntington looked at several insurance companies while deciding whether to go with Anthem for renewal or to possibly change carriers. Most companies were very close to Anthem in costs. Sun Life, our stop loss carrier, has Anthem as

their provider. Stop loss is not known to employees in the membership. The difference is that Anthem has to report to Sun Life as the re-insurer.

Aetna's proposal guarantees rebates for three years. Anthem's fixed costs total 14.2%; Sun Life's are -9.3%; Aetna's are -32.7%. Todd said that we need to decide whether to change or not. How do the discounts match up? Providers charge different rates and this affects discounts.

Aetna has a \$25,000 wellness program (for three years). They do a lot of government business, including schools. They are also good with retirement insurance. Claims will not vary much (less than 10%). Aetna makes money on rebates (brand names) from pharmacy costs. Anthem does not divulge what they make on rebates. Anthem's stop loss is much higher than any other carrier. Aetna is a strong program and will be matching our plan – the plan will not change. They do use medical necessity instead of limited number of visits (PT, OT, chiropractor). Todd said that we will need know if we are changing at least 60 days before October 1 if we want to change. S. Kaufman asked if we could keep premiums the same for the next plan year. Todd is confident that we could do this. H. Snyder asked if we could see a side by side comparison of benefits. Todd will send that to everyone.

Our PPO's benefit plan is the calendar year (January 1) while HSA's is on the plan year (October 1). If we change, it is time to make both plans begin on October 1. We will need to manage this so that employees are not penalized because all employees' deductible will start over on October 1.

There is not much change in dental. In life insurance the market was significantly lower with Prudential at \$0.095; Aetna at 0.11; Anthem at \$0.16. The supplemental volunteer insurance is a problem with the IRS because younger employees pay less. Stop loss is single/family, not four tiered as our plan is.

Todd spoke about Compass Professional Health Services. This is a service that has the tools and support to find the best providers with the most cost saving and quality. The cost is \$5 per employee per month. They will help you make an appointment at a lower costing facility. HSA employees will be more interested

than PPO because of deductible. Employees must contact Compass to get help. It would cost \$30,000 for all employees. There is no contract and the group can leave the program whenever they want.

B. Gerber made a motion to proceed with the Aetna plan as presented by Huntington, including Aetna medical, dental, RX, and life insurance. Aetna will mirror the plan that we currently have with Anthem ( including deductible and out of pocket), although the way of implementing the plan may differ some. S. Kaufman seconded the motion. Voice vote: Yes – 13; No – 1.

S. Kaufman made a motion to contract with Compass Professional Health Services effective October 1, 2014. B. Gerber seconded the motion. Voice vote: Yes – 14; No – 0.

Todd reported that there is no advantage to do anything about taking spouses off our plan as our costs are dead on. He does recommend that we put a surcharge of \$100 per month for spouses who wish to stay on our plan. Spousal forms would be signed during sign-up for Aetna. D. Compton made a proposal to make the \$100 surcharge but some members were not ready to decide this matter and it was tabled until the August meeting.

B. Gerber briefly discussed Healthy Life Screening. This would be a volunteer, employee paid service. With 100% participation it would cost \$179 and full price would be \$199.

Rachael Harpel gave the wellness report, highlighting the current wellness events including Healthy Body and Mind, Zumba classes, Power of Habits, Let's Just Walk, and the Hope Health Newsletter.

The next meeting will be on Wednesday, August 13 at Willow Bend at 9 a.m. M. Estes made a motion to adjourn the meeting and C. Williman seconded the motion.

Judy Wortman

Recording Secretary