

Insurance Committee Meeting 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 Chair Nancy Naylor.

II. Board Members Roll Call - Nancy Naylor and Tom Kitson

Both members were present and attended in person.

III. Employee Members

Penny Skibinskie, Carmen Bollman, Lori Miller, and Samantha Schmitt were present and attending in person.

Dave Anderson, Brandi Barkowski, David Glessner, Christy Laws, Staci Stewart and Teri Zinke were absent.

IV. Meeting Attendees and Visitors

Brad Johnson and Tally Neofotist (Health Insurance Consultants for Assured Partners), Nancy Petersen (County Clerk and Recorder), and Wendy Ryerson (County Administrator) were present and attended in person.

V. Approval of Minutes from the Previous Meeting - (March 14, 2022)

There were no corrections or additions to the minutes; they stand as presented.

VI. Old Business

None

- VII. New Business
 - A. Health Plan Review Project

Brad walked the committee through his powerpoint presentation focusing this meeting on reviewing the underlying cost drivers.

<u>Demographics</u>: Age, gender, tenure on the health plan, geographic location

<u>Actual claim usage</u>: Lee County has the highest Medical/Rx loss ratio (120.6%) in the QCIP pool of nine municipalities. The target loss ratio is 99%. This will negatively impact bids.

Overview of current annual health insurance cost:

- 1. <u>IPBC Pool \$1,935,105</u>: BCBS plan with \$6,000 individual, \$12,700 family deductibles. Employees share 25% of BCBS premium \$484,000.
- 2. Envision \$351,901: 3rd party vendor which manages the gap between the BCBS plan and the employee benefit plan. Envision also manages the FSA program. The deductible gap between the BCBS plan of \$6,000 (individual), \$12,700 (family), and Lee County employee's benefit of \$500 (individual), \$1,000 (family). Envision also covers the gap between the BCBS maximum out of pocket (including the deductable) of \$6,000 (individual), \$12,000 (family) and the employee plan benefit of \$1,400 (individual), \$2,800 (family).
- 3. <u>Administration Fee</u>: \$11,256 annual estimate; deductible/out of pocket claims for 2021 were \$340,645. Employees do not currently share in this cost.

<u>Current Total Health Insurance Costs</u>: \$2,287,006. Employees are currently paying 25% of the IPBC/BCBS annual cost of \$1,935,105.

IPBC/BCBS (only) rate changes effective for July 1, 2022: \$2,087,978 annually; a 7.9% increase. Employee rates will not change until January 1, 2023. This rate change will be effective for 18 months, until January 1, 2024 to align employee rate changes and IPBC rate change in the future.

Next Steps:

- 1. Go out to bid (Consultant will prepare and distribute bid documents).
- 2. Present bids to insurance committee for review.
- 3. Consider any other viable plan options/modifications.
- 4. Forward recommendation to Finance Committee (August meeting); in advance to September 1, 2022 deadline to notify IPBC of changes to plan.

VIII. Adjournment – Insurance Committee Meeting

Motion to adjourn at 3:14 p.m. moved by Samantha Schmitt. Second by Carmen Bollman. Motion past unanimously by voice vote. The next meeting of the Insurance Committee will be at 2:00 p.m., on Monday, August 1, 2022.

Respectively submitted by,

Penny Skibinskie, Lee County Insurance Deputy



Health Plan Review Project Lee County Insurance Committee May 16, 2022



Items We'll Be Reviewing





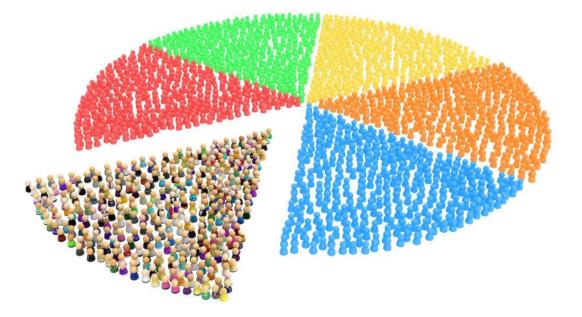
- 1. Compare Your Health Benefit Offering to Comparable Employers
- 2. Review Underlying Cost Drivers
- 3. Insurance Carrier Bidding & Analysis Note Intergovernmental Personnel Benefit Cooperative (IPBC) Requires Stay / Go Decision by September

4. Sharing of New Ideas and Developments in the Market

5. Employee Communication Ideas

Demographics



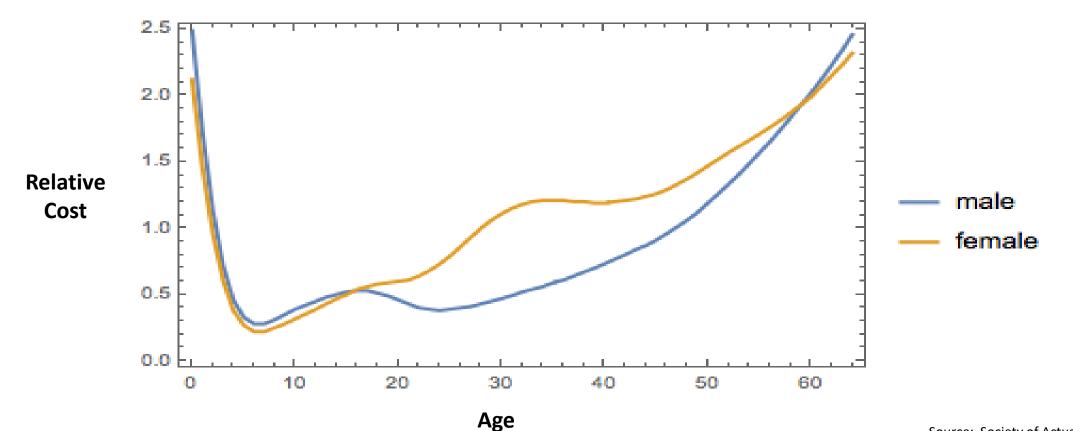


An employer's demographic data is a key factor in determining insurance rates.

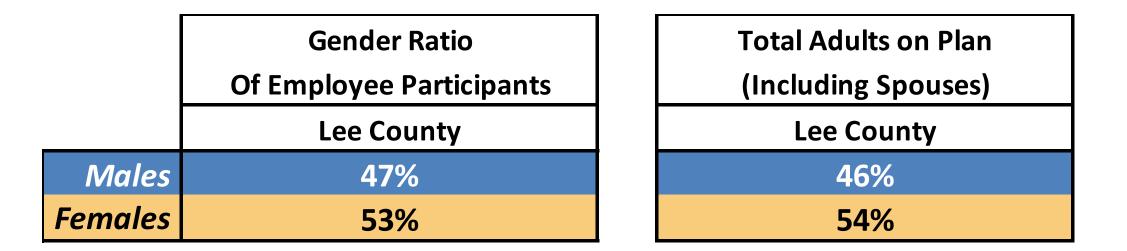


Demographic Snapshot

Impact of Age and Gender on Health Plan Cost





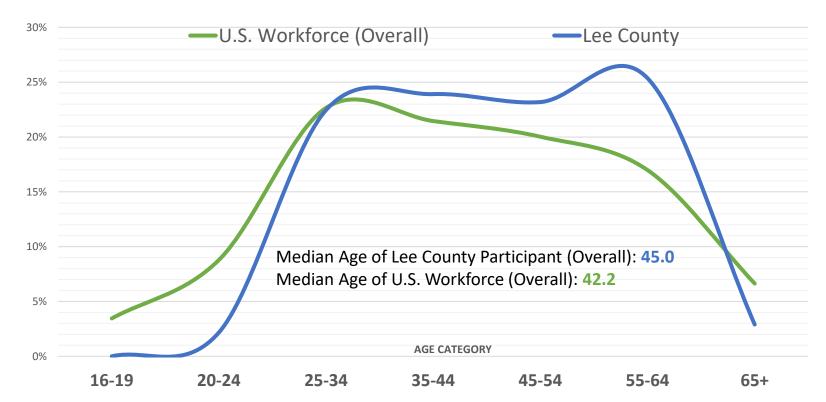


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MPLOYEE BENEFIT

Gender is also a key variable in determining insurance premiums. Generally speaking, males have a lower incidence and severity of medical claims until they reach late 50's. However, females live longer than males on average and are less expensive to insure for Life Insurance. Females have a higher incidence of disability claims with a leading contributor being pregnancy related claims.





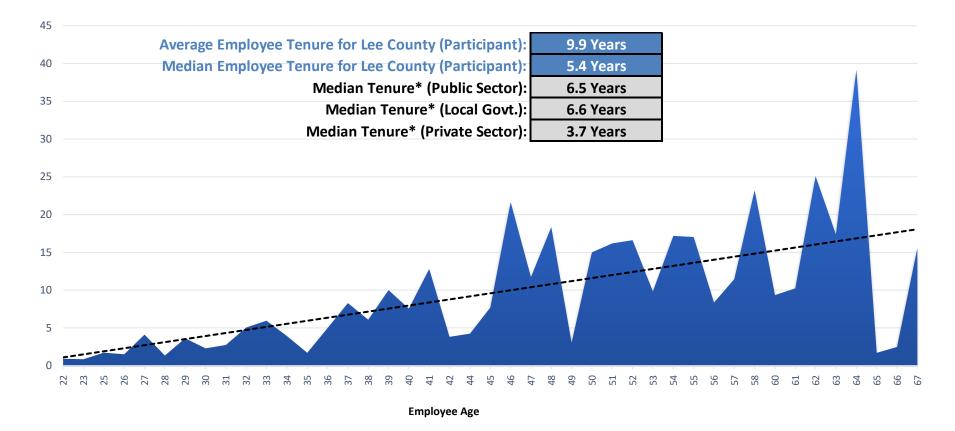
Age is a key variable in determining insurance premiums because it is correlated with claim activity. As people grow older, they have a higher frequency of doctor and hospital visits. Morbidity and Mortality factors increase directly with age. It should also be noted that older individuals have a higher chance of incurring large, catastrophic claims.

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MPLOYEE BENEFIT



Employee Tenure Of Those On Health Plan



As a general rule, years of tenure tend to increase with age. Public Sector workers had the highest tenure while workers in the private sector had the lowest median tenure.

Average Tenure in Years

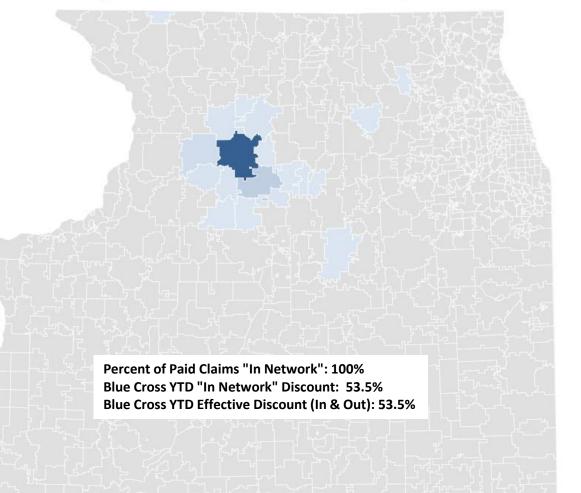
*Source: Bureau of Labor Statistics

Geographic Location of Participants



The location of employees has a direct impact on claim utilization, provider charges, and physician practice patterns. For example: a hospital stay in Dixon, IL will be dramatically less expensive than one in New York City. Also, access to discounted provider networks vary greatly by geography.

Map of Participant Home Zip Codes



Count 92



Avg. Family Size

			Enrollment:	%
	Avg. Family Size:	Employee Only	68	51%
Lee County	2.05	Employee and Spouse	13	10%
	2.05	Employee and Children	25	19%
Benchmark	2.40	Family	28	21%
			134	100%

Although often overlooked, the average family size of the covered employees will have direct impact on the health insurance plan. All other variables being equal, employees with larger families will incur more claims due to more total members being insured. Average Age, Spousal Surcharges, and Family Contributions can directly impact this ratio.



Claim Experience & Plan Expenses



Insurance companies will blend the expected risk associated with a group's demographic profile with their actual claim usage to determine an insurance rate.



Dollars & Cents

Review of Past 3 Audit Reports

	7/1/18-6/30/19		7/1/19-6/30/20		7/1/20-6/30/21	
Contributions	\$	1,698,581	\$	1,715,919	\$	1,856,361
- Expenses						
Medical Fees	\$	83,587	\$	91,536	\$	93,401
Dental Fees	\$	5,992	\$	6,531	\$	6,776
Data Fees	\$	1,010	\$	1,132	\$	1,147
Misc. Fees	\$	217	\$	459	\$	533
Life Insurance	\$	1,935	\$	2,100	\$	2,124
Stop Loss Insurance	\$	52,290	\$	50,259	\$	58,447
Allocation of Corridor (35k-500k)	\$	119,917	\$	1,601	\$	-
Vision	\$	-			\$	4,504
Claims Paid (Medical)	\$	1,730,823	\$	1,300,810	\$	2,255,349
IBNR Change	\$	1,581	\$	(4,111)	\$	78,807
Claims Paid (Dental)	\$	55,384	\$	47,251	\$	61,581
Stop Loss Recoveries	\$	(333,327)	\$	-	\$	-
Claims Assessed /(Forgiven)	\$	(266,322)	\$	113,978	\$	(311,846)
= Difference	\$	245,494	\$	104,373	\$	(394,462)



-\$44,594 Three Year Total



Overly Simplified View

Claims vs. Premium (Excludes Fixed Costs)

	7/1/18-6/30/19	7/1/19-6/30/20	7/1/20-6/30/21
Raw Med & Dent. Claims (Before Pooling)	\$1,786,207	\$1,348,061	\$2,316,930
vs. Contributions	\$1,698,581	\$1,715,919	\$1,856,361
Ratio:	105%	79%	125%



QCHIP Rankings 7/1/20-6/30/21

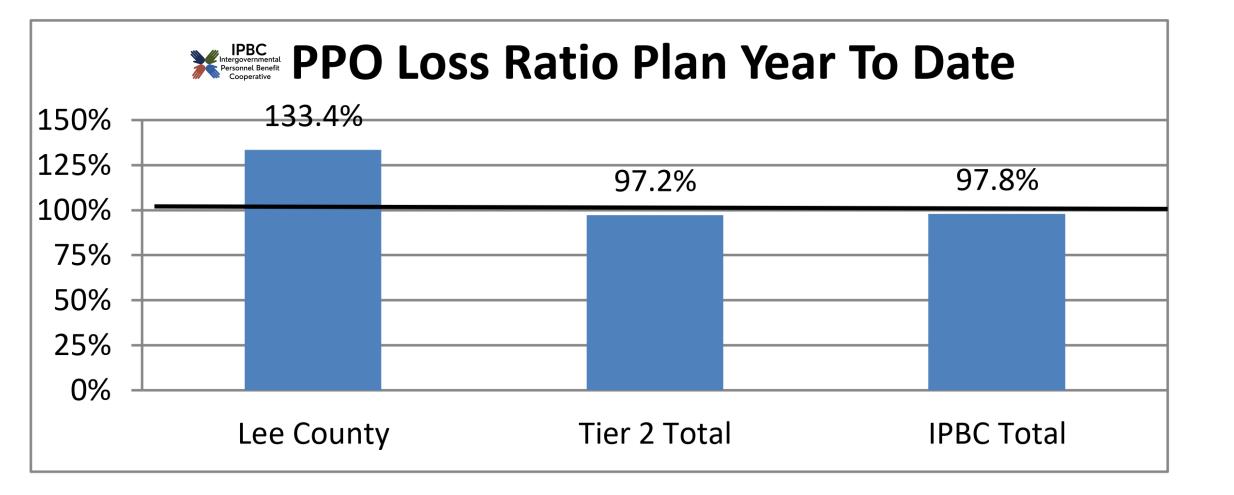
IPBC Intergovernmental Personnel Benefit Cooperative	Avg. EE's	Med/Rx Loss Ratio
Lee County	131	120.6%
Byron Forest Preserve	24	114.5%
Rock Falls	86	113.6%
Rochelle	110	107.9%
Princeton	77	104.2%
Colona	26	102.7%
East Moline	267	102.4%
Freeport	166	94.0%
Washington	71	88.6%
Overall	958	103.7%



Target Loss Ratio is 99%



Loss Ratios 7/1/21-2/28/22 (YTD)













What Do IPBC Rates Cover?

•	Employee Only loyee and Spouse oyee and Children Family	Monthly IPBC Rates \$720.77 \$1,467.18 \$1,371.92 \$2,102.68	Just This
Benefits	B	CBS PF0464	
Major Medical Coverage			
Deductible			
Network	\$6,000 in	dividual* / \$12,700 family	
Non-Network	\$12,000 in	dividual** / \$25,400 family	
Coinsurance			
Network		100%	
Non-Network		100%	Intergovernmental
Out-of-Pocket (includes deductible)			Personnel Benefit
Network	\$6,000 in	ndividual / \$12,700 family	Cooperative
Non-Network	\$12,000 i	ndividual / \$25,400 family	



However, Employees Given More



Benefits	BCBS PF0464	
Major Medical Coverage		
Deductible		
Network	\$6,000 individual* / \$12,700 family	\$500 individual / \$1,000 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	\$1,400 individual / \$2,800 famil
Non-Network	\$12,000 individual / \$25,400 family	<i>+ _,, + _, + _, -,</i>

Envision Admin Fee \$7 PEPM

Envision Healthcare, Inc PO Box 5047 Oak Brook,IL 60522 Phone# 866-672-7526

Bill To
e County
O. Box 329
xon, IL 61021

Invoice

Date	Invoice #
4/1/2022	215896





Envision Admin Fee \$7 PEPM

Envision Healthcare, Inc PO Box 5047 Oak Brook,IL 60522 Phone# 866-672-7526

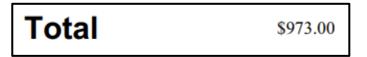
Bill To	
Lee County	
P.O. Box 329	
Dixon, IL 61021	

Invoice

EMPLOYEE BENEFITS

AssuredPartners

Date	Invoice #
4/1/2022	215896



x Annualized Est. = \$11,676

Envision 2019 Claims

Envision

\$304,957 Paid Out

Monthly HRA Claims Report

December, 2019

EMPLOYEE BENEFITS

AssuredPartners

Company

Name:	Lee County	Run Date:	3/31/2022
Address:	P.O. Box 329	Group #:	LEE010
City/State	Dixon, IL	ZIP code	61021
Phone:	(815)288-3309		

YTD Totals, Includes Employees Terminated This Year

RX Claims Paid:	\$33,020.30	3.2%
Medical Claims Paid:	\$271,937.12	26.4%
Special Claims Paid:	\$0.00	0.0%
Total Allotment	\$1,028,300.00	100.0%

Exposure if Everyone Maxed Out Benefit

Envision 2020 Claims



Monthly HRA Claims Report

December, 2020

EMPLOYEE BENEFITS

AssuredPartners

Company

Name:	Lee County	Run Date:	3/31/2022
Address:	P.O. Box 329	Group #:	LEE010
City/State	Dixon, IL	ZIP code	61021
Phone:	(815)288-3309		

YTD Totals, Includes Employees Terminated This Year

\$310,794 Paid Out

RX Claims Paid:	\$29,779.47	2.9%
Medical Claims Paid:	\$281,014.35	27.0%
Special Claims Paid:	\$0.00	0.0%
Total Allotment	\$1,038,900.00	100.0%
Evposure if I	Evenuene Maxed Out Penefit	

Exposure if Everyone Maxed Out Benefit

Envision 2021 Claims



\$340,645 Paid Out

Monthly HRA Claims Report

December, 2021

EMPLOYEE BENEFITS

AssuredPartners

Company

Name:	Lee County	Run Date:	3/31/2022
Address:	P.O. Box 329	Group #:	LEE010
City/State	Dixon, IL	ZIP code	61021
Phone:	(815)288-3309		

YTD Totals, Includes Employees Terminated This Year

 RX Claims Paid:
 \$16,554.75
 1.5%

 Medical Claims Paid:
 \$324,090.26
 30.1%

 Special Claims Paid:
 \$0.00
 0.0%

 Total Allotment
 \$1,077,100.00
 100.0%

Exposure if Everyone Maxed Out Benefit



Envision Claims – 3 Year Chart



Envision Claims

■ 2019 ■ 2020 ■ 2021



Putting It All Together...

	Monthly					
	IPBC Rates	x Enrollment:	Total			
Employee Only	\$720.77	68	\$49,012			
Employee and Spouse	\$1,467.18	13	\$19,073			
Employee and Children	\$1,371.92	25	\$34,298			
Family	\$2,102.68	28	\$58 <i>,</i> 875	Envision Admin	Envision	Annual
		Monthly Total:	\$161,259	<u>@ \$7 PEPM</u>	<u>Annual Claims</u>	<u>Total</u>
		Annual Total:	\$1,935,105	+ <mark>\$ 11,256</mark> +	\$340,645	= \$ 2,287,006

Includes Active EE's, COBRA, and Retirees on Plan



Put Another Way....

	Monthly				
	IPBC Rates	x Enrollment:	Total		
Employee Only	\$720.77	68	\$49,012		
Employee and Spouse	\$1,467.18	13	\$19,073		
Employee and Children	\$1,371.92	25	\$34,298		
Family	\$2,102.68	28	\$58,875	Envision Admin Envision	Annual
		Monthly Total:	\$161,259	@ \$7 PEPM Annual Claims	<u>Total</u>
		Annual Total:	\$1,935,105	+ <mark>\$ 11,256</mark> + \$340,645 =	\$ 2,287,006

Need to Inflate Rates by x 18.2% to Reflect Full Cost

(Math: \$2,287,006 ÷ \$1,935,105 = 18.2%)

Challenge is EE Contributions Don't Take Into Account Envision \$\$\$

	Monthly		EE Cost
	IPBC Rates		Monthly
Employee Only	\$720.77	x 25% =	\$180.19
Employee and Spouse	\$1,467.18	x 25% =	\$366.80
Employee and Children	\$1,371.92	x 25% =	\$342.98
Family	\$2,102.68	x 25% =	\$525.67

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EMPLOYEE BENEE

Screenshot of current cost share memo

	Contributions						
					Employer	Employee	EE Per
	<u>Health</u>	<u>Dental</u>	<u>Vision</u>	<u>Total</u>	<u>75%</u>	<u>25%</u>	Pay Period
Employee	\$720.77			\$720.77	\$540.58	\$180.19	\$90.10
Employee & Spouse	\$1,467.18			\$1,467.18	\$1,100.36	\$366.80	\$183.40
Employee & Child	\$1,371.92			\$1,371.92	\$1,028.94	\$342.98	\$171.49
Employee \$ Family	\$2,102.68			\$2,102.68	\$1,577.01	\$525.67	\$262.84



Renewal Rates: Note Plan Year

Lee County Renewal Rates

July 1, 2022 through December 31, 2023

LIFE	Rate Tier	7/1/2021 - 6/30/2022	7/1/2022 - 12/31/2023
The Standard Basic Life and AD&D	AD&D Rate	\$ 0.02	0.020
The Standard Basic Life and AD&D	Life Rate	\$ 0.10	0.095
PPO	Rate Tier	7/1/2021 - 6/30/2022	7/1/2022 - 12/31/2023
BCBS PPO	Employee Only	\$ 720.7	7 \$ 777.71
BCBS PPO	Retiree Only	\$ 720.7	7 \$ 777.71
BCBS PPO	Employee and Children	\$ 1,371.9	2 \$ 1,480.30
BCBS PPO	Retiree and Children	\$ 1,371.9	2 \$ 1,480.30
BCBS PPO	Employee and Spouse	\$ 1,467.1	3 \$ 1,583.09
BCBS PPO	Retiree and Spouse	\$ 1,467.1	3 \$ 1,583.09
BCBS PPO	Family	\$ 2,102.6	3 \$ 2,268.79
BCBS PPO	Retiree Family	\$ 2,102.6	3 \$ 2,268.79
Dental	Rate Tier	7/1/2021 - 6/30/2022	7/1/2022 - 12/31/2023
Delta Dental	Employee Only	\$ 24.2	9 \$ 23.08
Delta Dental	Retiree Only	\$ 24.2	9 \$ 23.08
Delta Dental	Employee and Spouse	\$ 48.9	3 \$ 46.53
Delta Dental	Retiree and Spouse	\$ 48.9	3 \$ 46.53
Delta Dental	Employee and Children	\$ 54.2	1 \$ 51.50
Delta Dental	Retiree and Children	\$ 54.2	1 \$ 51.50
Delta Dental	Family	\$ 93.4	9 \$ 88.82
Delta Dental	Retiree Family	\$ 93.4	9 \$ 88.82

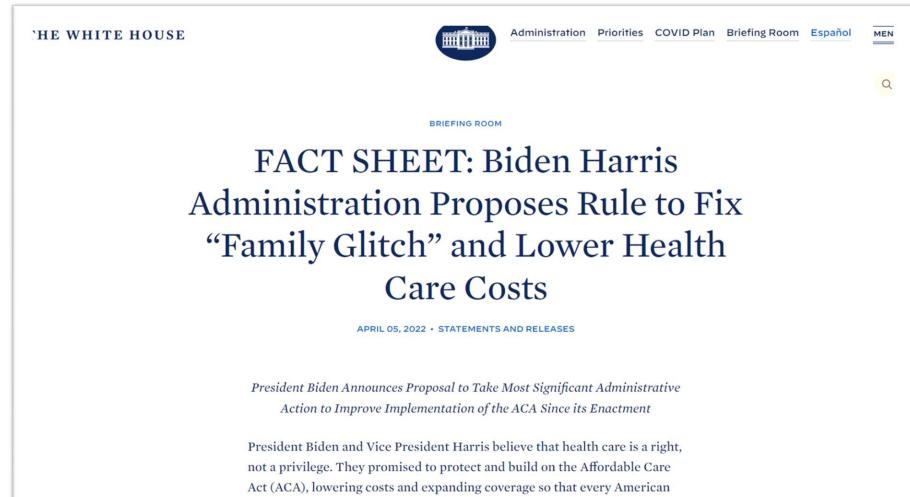
7/1/2022 - 12/31/2	2023 Rate Adjustment Summary
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PPO	HMO	EPO	Dental
7.9%			-5.0%

Reminder- Excludes Cost of Envision Program

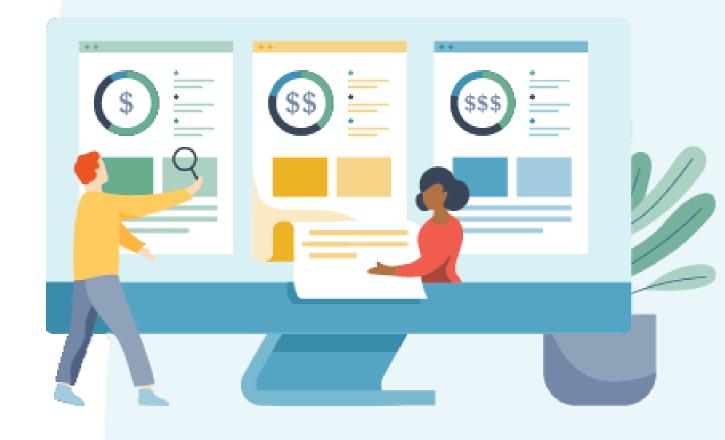
Additional fees for buy up programs through Businesssolver may apply

Trending Story in the World of Benefits



has the peace of mind that health insurance brings.

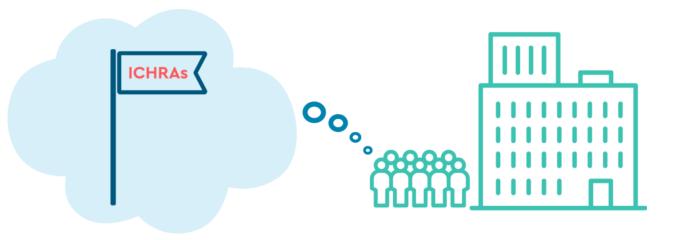
Individual Coverage Health Reimbursement Account





What is an ICHRA?

- The employer determines eligibility and sets allowance amounts
- Employees purchase an individual health insurance plan
- Employees pay in full for the plan of their choosing and provide proof of insurance
- The employer reimburses the employee based on the set allowance amounts
- Employees cover anything exceeding set allowances.

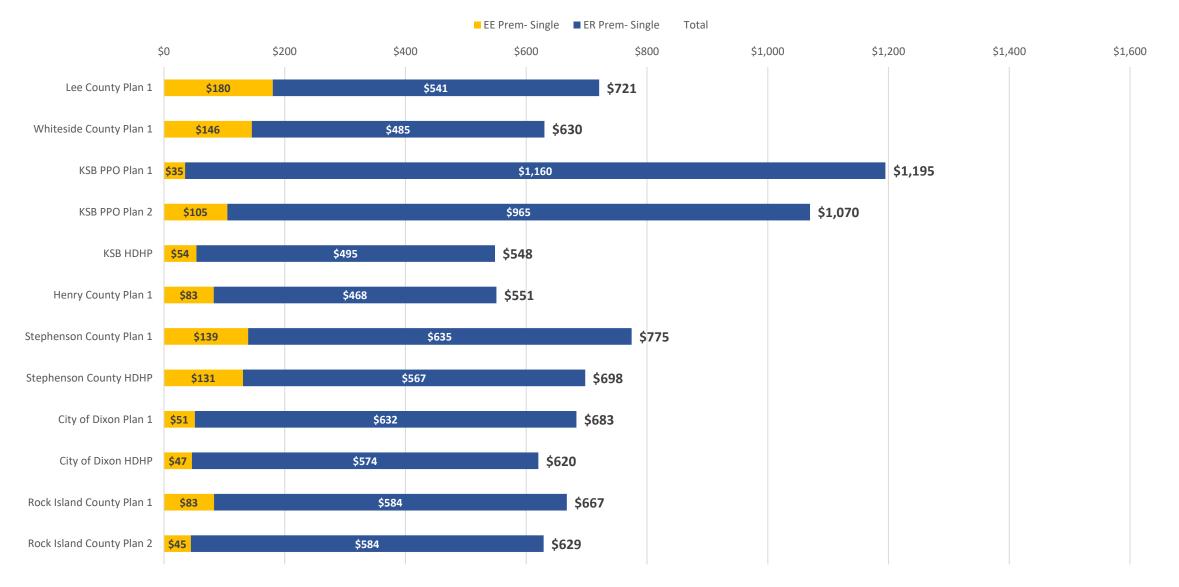




Cost Sharing (Single) - Monthly

Corrected

*State of Illinois not represented



Cost Sharing (Family) - Monthly

Corrected

*State of Illinois not represented

