

>> GOOD AFTERNOON I LIKE TO CALL THE FEBRUARY 24TH MEETING OF THE KANSAS STATE EMPLOYEE HEALTHCARE COMMISSION TO ORDER.WE DO HAVE I BELIEVE ONE MISSING COMMISSIONER.WHO IS DOWN WITH THE FLU.WE HAVE OPENED UP A LINE IN CASE SHE IS ABLE TO JOIN BUT, JUST GIVEN THE SEVERITY, I ENCOURAGE EVERYONE, TO STAY HOME IF YOU'RE NOT FEELING WELL, TWO, TAKE THE TIME AND REST.IT'S IMPORTANT.THIS FLU SEASON HAS HIT LOT OF US REALLY HARD.COMMISSIONER SCHMIDT IS NOT PRESENT.ALL OTHER COMMISSIONERS ARE PRESENT.WITH THAT, WE HAVE A ROBUST AGENDA AS WE CONTINUE TO HAVE, WHICH IS GOOD.WE'RE GOING TO HOP RIGHT IN.WE HAVE COUPLE OF ACTION ITEMS REPORT AND THEN SOME OLD BUSINESS TO FOLLOW UP ON AND THEN TO NEW BUSINESS TO MOVE THROUGH.I DO WANT TO SAY I BELIEVE WITH THIS MEETING, WE HAVE OFFICIALLY STANDARD MEETING, WE ARE LIVE STREAMING AND PROVIDING CLOSED CAPTIONS.HOPEFULLY THAT IS GOOD NEWS AND THAT ADDITIONAL PEOPLE ARE ABLE TO ACCESS THE MEETING AND INFORMATION.WITH THAT, WE'LL JUMP INTO THE ACTION ITEM.WE START WITH THE APPROVAL OF THE MINUTES FROM THE DECEMBER 13TH MEETING.HAVE MY COMMISSIONERS REVIEW THEM AND ASK FOR A MOTION TO APPROVE.>> I MOVE WE APPROVE THE MINUTES FROM THE DECEMBER 13TH, 2019 MEETING.>> SECOND. >> SEEING FIRST AND SECOND.ANY DISCUSSION?ADDITIONS, ADDS OR CHANGES?HEARING NONE, ALL THOSE IN FAVOR SAY AYE.OPPOSED?MINUTES ARE APPROVED FOR THE DECEMBER 13, 2019 MEETING.I NEED THE APPROVAL OF THE MINUTES OF THE JANUARY 23, 2020 MEETING.THIS WAS A MEET THAT WAS CALLED OUT OF TIMING NECESSITY.IF I CAN GET A MOTION.>> SO MOVED.>> SECOND.>> SECOND.>> COMMISSIONERS TAKE A MOMENT TO REVIEW.ANY DISCUSSION?SEEING NONE, ALL THOSE IN FAVOR SAY AYE.THIS IS THE R.F.P. AWARD.SEND IT OVER TO MIKE.>> THANK YOU.THE PREFERRED OUTPATIENT SERVICES CONTRACT WILL END DECEMBER 31, 2020.REQUEST FOR PROPOSAL FOR THE REFERRED LAB OUTPATIENT SERVICE CONTRACT WAS RELEASE THE ON NOVEMBER 15, 2019 AND CLOSED DECEMBER 19, 2019.THREE BIDS WAS RECEIVED.QUEST DIAGNOSTIC AND UNIVERSITY OF KANSAS HOSPITAL SYSTEM.THE PREFERRED ABOUT LAB OUTPATIENT BENEFIT IS FOR OUTPATIENT NON-EMERGENCY LAB TESTING.THIS IS AN OPTIONAL BENEFIT FOR THE MEMBER.THERE'S NO REQUIREMENT TO PARTICIPATE.THE DECISION TO UTILIZE THIS BENEFIT IS A DECISION OF THE MEMBER AND DISCUSSIONS WITH THE MEDICAL PROVIDER.THE MEMBER CAN SELECT A LAB PROVIDER OTHER THAN ONE OF THE PREFERRED LAB OUTPATIENT PROVIDERS.THE HEALTH PLAN BENEFITS FROM THE REDUCED FEES FOR THE COVERED LAB SERVICES, PLANNED MEMBERS BENEFIT IN THE FOLLOWING WAY.PLAN A MEMBERS SHARING SAVING BY ELIMINATING OUT OF POCKET COST FOR THE COVERED LABORATORY SERVICES SO NO COST TO THE MEMBER.PLAN C, J, N AND Q, MEMBERS IN THEIR DEDUCTIBLE PHASE, BENEFIT FROM THE REDUCED FEES AND NO OUT OF POCKET COST AFTER THEIR DEDUCTIBLE IS MET.THIS IS A MEMBER AND PROVIDERS CHOICE WHICH THE LABS ARE COMPLETED.IF A MEMBER CHOOSES TO HAVE THEIR COVERED LAB SERVICES COMPLETED WITH A DIFFERENT PROVIDER, THEY WOULD BE SUBJECT TO THE APPLICABLE DEDUCTIBLE AND COINSURANCE REQUIREMENTS.QUEST ARE THE CURRENT VENDORS.QUEST HAS BEEN PROVIDING THE SERVICE SINCE 2004.QUEST BID TO CONTINUE TO OFFER A STATEWIDE AND NATIONWIDE LAB CARD NETWORK.UNIVERSITY OF KANSAS HOSPITAL SYSTEM ARE OFFERING SERVICES THAT DESIGNATED LOCATIONS.PETE, IF YOU WANT TO PROJECT THE MAP.COMMISSIONERS YOU HAVE THE MAP INCLUDED IN YOUR MATERIALS.THE GREEN REPRESENTS UNIVERSITY OF KANSAS HOSPITAL SYSTEM LOCATIONS.THE YELLOW ARE THE HEALTHCARE LOCATIONS FOR MEMBERS IN THOSE VARIOUS COUNTIES.QUEST COVERS BASICALLY THE ENTIRE STATE.THEY HAVE BRICKS AND MAR TAR FACILITIES -- MORTAR FACILITIES IN SOME COUNTIES.NEGOTIATIONS WERE HELD WITH ALL THREE VENDORS.SOME ITEMS REVIEWED WERE MEMBER ACCESS TO CARE, QUALITY,

VENDOR CAPACITY AND THE AVAILABLE DISCOUNTS.THE R.F.P. ALLOWS FOR A CONTRACT AWARD TO MULTIPLE VENDORS WITH THE OPTION FOR HEALTHCARE COMMISSION TO RENEW BY MUTUAL WRITTEN AGREEMENT BETWEEN THE PARTIES.THE HEALTH PLAN ONLY INCURS COST WHEN A MEMBER RECEIVES SERVICE FOR OUTPATIENT NONEMERGENCY LAB TESTING.THERE'S NO ADDITIONAL FEES AND COST TO THE HEALTH PLAN.WE'VE SEEN \$2.9 MILLION SAVINGS WHEN COMPARED TO THE STANDARD LAB COST OF THIS PROGRAM.THIS IS A SHARED SAVINGS WITH THE HEALTH PLAN AND MEMBERS.LISTED IN YOUR MEMO ARE COUPLE OF OPTIONS.AWARD THREE-YEAR CONTRACT TO QUEST DIAGNOSTICS, STORM MONTVILLE HEALTHCARE INCORPORATED.OR THE COMMISSION COULD DECIDE NOT AWARD CONTRACT FOR THE PREFERRED LAB SERVICES.>> ARE THERE ANY QUESTIONS FOR MIKE?>> MIKE, HAD ANY COMPLAINTS THROUGH THE YEAR WE'VE BEEN DOING THIS?I KNOW QUEST HAS BEEN AROUND FOR QUITE SOME TIME.>> ON OCCASION WE'LL GET SOME FEEDBACK FROM A MEMBER REGARDING A COLLECTION SITE THROUGHOUT THE STATE.IN THE PRESENCE OR ABSENCE -->> THE ABSENCE.YEAH.OTHER THAN THAT, PROGRAM WORKS VERY SMOOTHLY FOR THE MEMBERS.GOOD BENEFIT FOR THE MEMBERS COST SAVING FOR THOSE ON THE PLANS THAT INDUSTRIAL SOME OUT OF POCKET COSTS.YOU'RE NOT ALLOWED FIRST DOLLAR COVERAGE ON HIGH DEDUCTIBLE HEALTH PLANS.THOSE MEMBERS DO BENEFIT IN THE REDUCED FEE FOR THOSE SERVICES.>> ANY OTHER QUESTIONS FOR MIKE?WHAT WE HAVE BEFORE US IS THE CONSIDERATION OF THE PREFERRED LAB OUTPATIENT SERVICES.I WOULD ENTERTAIN A MOTION.>> I'LL MOVE THAT WE ACCEPT ALL THREE.>> SECOND.>> MOTION ON THE FLOOR TO ACCEPT ALL THREE UNDER THE CONTRACT FOR THE R.F.P. WAS WRITTEN IN SUCH WAY THAT IT'S THREE YEARS.IT'S A THREE-YEAR CONTRACT ACCEPTING ALL THREE VENDORS JUST AS A FRIENDLY AMENDMENT TO THE MOTION.ACCEPTED.ANY DISCUSSION?SEEING NONE.ALL THOSE IN FAVOR SAY AYE.ANY OPPOSED?THANK YOU.OUR FOURTH ACTION ITEM IS CONSIDERATION OF EMPLOYEE ADVISORY COMMITTEE BY LAW.I LIKE TO INVITE THE NEW PRESIDENT OF THE EMPLOYEE ADVISORY COMMITTEE, NATALIE TO JOIN US AT THE MICROPHONE.>> HI COMMISSIONERS.I WILL PROJECT LITTLE BIT MORE.MY LIGHT IS BLUE.I'M THE NEWLY ACTING PRESIDENT FOR THE STATE EMPLOYEE HEALTH PLAN EMPLOYEE ADVISORY COMMITTEE.SINCE THAT IS SUCH A MOUTH FULL, WE CALL IT THE EAC.THAT'S WHAT I WILL DO.I'M STARTING MY THIRD YEAR ON THE EAC.I THOUGHT I TAKE A MINUTE AND TELL YOU THAT I'M ASSOCIATE GENERAL COUNSEL AT THE KANSAS BOARD OF REGIONS.I'M ALSO MOM OF TWO SPIRITED LITTLE BOYS THAT ARE 3 AND 5.THEY ARE ON OUR HEALTH PLAN.SINCE SOME OF THE LISTENERS MAY NOT BE FAMILIAR THE EAC, I THOUGHT I HIGHLIGHT THE PURPOSE IS ESTABLISHED BY STATUTE.THAT IS TO ADVISE THE HEALTHCARE COMMISSION ON MATTERS RELATED TO HEALTHCARE BENEFIT AND TO ASSIST IN THE DEVELOPMENT OF POLICIES RELATED TO THOSE BENEFITS.WE CURRENTLY ARE BYLAWS ESTABLISH THAT WE HAVE 21 MEMBERS, 18 OF THOSE MEMBERS ARE ACTIVE STATE EMPLOYEES AND THREE OF THOSE ARE RETIREES ON THE DIRECT BILL SYSTEM.WE CURRENTLY HAVE A VERY DIVERSE EAC MEMBERSHIP AND IT'S DIVERSE BASED ON GEOGRAPHIC LOCATION AND ALSO ITS AGENCY REPRESENTATION BUT YOU WILL SEE IN THE BYLAWS WE ARE PROPOSING AMENDMENTING THAT WE ARE TRYING TO TWEAK THAT, TO MAKE SURE WE HAVE AS MANY VIEWPOINTS ON THE EAC AS WE CAN REACH.THE EAC MET ON JANUARY 10TH.OUR FIRST ORDER OF BUSINESS WAS TO ELECT NEW OFFICERS.I WAS ELECTED PRESIDENT.WE HAVE A NEW VICE PRESIDENT.HE'S CHARLIE WALKER.HE'S A GRANT SPECIALIST IN WICHITA.THEN ALEXANDER WAS ELECTED SECRETARY.SHE IS EXECUTIVE SECRETARY AT THE KANSAS BOARD OF PHARMACY.THE NEXT THING THAT WE DID WAS ESTABLISH A SUBCOMMITTEE ON COMMUNICATIONS.BECAUSE WE HAVE 21 MEMBERS, LOT OF THE WORK IS BETTER ACCOMPLISHED IF IT STARTS AT A SUBCOMMITTEE.THERE WILL BE FIVE PEOPLE LOOKING AT HOW TO IMPROVE OUR COMMUNICATION AND THAT'S GOES OUT

WHAT THE EAC IS DOING AND IN GIVING STATE EMPLOYEES ACCESS TO OUR GROUP SO THEY CAN VOICE THEIR CONCERNS AND OPINIONS.TURNING TO WHAT WE ARE HERE FOR ACTION ITEM.THE EAC HAS BEEN WORKING ON AMENDMENTS TO THE BYLAWS.BYLAWS ARE WHAT REALLY GOVERN THE EAC'S RIGHTS AND RESPONSIBILITIES.THE EAC'S BYLAWS LAST AMENDMENT AMENDED 10 YEARS.IT IS RIGHT FOR US TO TAKE A LOOK AT THEM.I CHAIRED A SUBCOMMITTEE OF FIVE MEMBERS THAT MET SEVERAL TIMES IN ORDER TO REVIEW THE BY LAWS AND COME UP WITH A PROPOSAL THAT WENT TO THE EAC.THE SUBCOMMITTEE PARTICULARLY DEBATED TERM LIMITS FOR EAC MEMBERS AND THE CALCULUS HOW MEMBERS ARE CHOSEN.ULTIMATELY, THE SUBCOMMITTEE PASSED OUT THE PROPOSED AMENDMENTS AND WERE PRESENTED TO THE EAC ON JANUARY 10TH MEETING.THERE WAS AGAIN A SPIRITED DEBATE PARTICULARLY AROUND WHETHER THERE SHOULD BE TERM LIMITS.ULTIMATELY MAJORITY OF THE EAC VOTED TO APPROVE THE PROPOSAL THAT IS BEFORE YOU TODAY.I DETAILED CHANGE IN WRITTEN MATERIAL.I WILL BRIEFLY SUMMARIZE IS ESTABLISHES TERM LIMITS FOR THE ACTIVE EMPLOYEE.THOSE ARE THE 18 STATE EMPLOYEES.NOT THE THREE RETIREES.THE EAC THOUGHT ANONYMOUSLY IT WILL BE HARD TO RECRUIT AND RETAIN FROM THAT RETIREE POOL.WILL BE BETTER NOT TO ESTABLISH THE TERM LIMIT IN THAT AREA.IT ALSO ADDED A CONFLICT OF INTEREST PROVISION.LIMITS THE NUMBER OF YEARS THAT A MEMBER OF THE COMMITTEE CAN SERVE IN AN OFFICER POSITION.I'M HAPPY TO GO INTO MORE DETAIL ON THE BYLAWS OR TO STAND FOR QUESTIONS.>> THANK YOU NATALIE.WE APPRECIATE THE WORK OF THE EAC IN TAKING YOUR ROLE SERIOUSLY AND TAKING THE OPPORTUNITY TO REVIEW THE BYLAWS AND THERE'S A RECOGNITION OF THE VOLUNTEERISM THAT HAPPENS FOR THE 21 MEMBERS THAT SERVE.CONTINUE TO MAKE THIS COMMITTEE AS EFFECTIVE AS POSSIBLE IS VERY MUCH APPRECIATED BY MYSELF AND I THINK THE OTHER COMMISSIONERS AS WELL.I WOULD LIKE TO OPEN IT UP FOR QUESTIONS FROM THE COMMISSIONERS.YOU HAVE BOTH IN OUR PACKETS THAT WERE DISTRIBUTED, RECOMMENDED AMENDMENTS TO IN A SUMMARY FORM.THERE'S AN ACTUAL COPY OF THE BYLAWS THAT ARE MARKED UP, KIND OF SHOW HOW IT WOULD ACTUALLY PLAY OUT INTO THE ACTUAL WORDED BYLAWS THAT MATCH THAT SUMMARY DOCUMENT.QUESTIONS, OR COMMENTS BY THE COMMISSIONERS ON THE PROPOSED AMENDMENTS TO THE EAC BYLAWS?>> COULD YOU SPEAK TO HOW THE MINIMUM NUMBER OF COMMITTEE MEMBERS FROM EXECUTIVE JUDICIAL, INTERFACES WITH THE EXISTING ELEMENTS OF GEOGRAPHIC, I THINK, GENDER, LOCATION, ETCETERA?>> SURE.HISTORICALLY, WE'VE HAD A HARD TIME GETTING REPRESENTATION FROM THE LEGISLATIVE BRANCH.THAT MAY BE BECAUSE MOST OF THE MEETINGS OCCURRED DURING LEGISLATIVE SESSION.AS WE HAVE BEEN VERY SUCCESSFUL IN DIVERSIFYING WITHIN THE EXECUTIVE BRANCH, WE FEEL LIKE THE MORE DIVERSE WE CAN GET AS FAR AS THE AGENCY GO, THE BETTER NETWORK WE WILL BE.PEOPLE SEEM TO TALK TO THE PEOPLE THAT ARE IN THEIR OWN WORK ENVIRONMENT.THE OBJECTIVE TO THOSE CHANGES WAS TO TRY TO ENCOURAGE, GETTING REPRESENTATION FROM THE BRANCHES THAT ARE NOT AS WELL REPRESENTED BUT RECOGNIZING THAT MAY NOT BE POSSIBLE FOR REASONS UNRELATED TO THE EAC'S OBJECTIVE.MAKING THAT NOT MANDATORY BUT AS A FIRST STEP, IF WE GET APPLICANTS THAT DON'T MEET THE CRITERIA OF THE DIFFERENT AGENCIES OR BRANCHES THAT WE CAN GO BACK AND ASK AGAIN TO MAKE SURE THAT THERE ISN'T SOMEONE WILLING AND ABLE TO SERVE.>> WE DO REALLY WANT TO ADVOCATE AND TRY TO GET AS MUCH DIVERSITY ON THE COMMITTEE AS WE CAN.>> DECREASING TO THREE MANDATORY TO TWO MANDATORY MEETINGS.SAY MORE ABOUT THAT PLEASE.>> OUR PRACTICE HAS BEEN TO IN THE TIME I'VE BEEN OUT COMMITTEE.THE PRESIDENT OF THE EAC CAN ALWAYS CALL A MEETING.MY INTENT IS TO CALL MEETINGS THAT ARE OUTSIDE.FOR EXAMPLE THE WORKS OF THE COMPLETE I INTEND -- SUBCOMMITTEE I SPEND TO CALL A THIRD

MEETING TO FOCUS ON THE COMMUNICATIONS.WE DIDN'T WANT TO VIOLATE BYLAWS.WE JUST LOWERED IT IN CASE AND LEFT IT SO THAT THE PRESIDENT WOULD HAVE THE ABILITY TO CALL ADDITIONAL MEETINGS.>> QUESTION OR COMMENTS FROM THE COMMISSIONERS?NATALIE, WE'VE CHATTED ABOUT THIS BEFORE.ONE OF THE THINGS AROUND TERM LIMITS, WE'VE TALKED ABOUT.I AM IN FAVOR AS WE WANT TO ENSURE THAT WE'RE ABLE TO BRING THAT REPRESENTATION ACROSS THE STATE EMPLOYEE AND GIVE THEM AN OPPORTUNITY TO SERVE.CAN YOU SPEAK FOR ME THE THREE-YEAR TERM LIMITS SEEM LIKE A LONG PERIOD OF TIME.YOU SAID THERE WAS KIND OF LIVELY DEBATE AROUND THAT.I LOVE TO HEAR LITTLE BIT MORE.I WOULD LEAN MORE TOWARDS TWO OR THREE-YEAR TERM LIMITS.I LIKE TO HEAR LITTLE OF THAT DISCUSSION WITH THE MEMBERS THAT CHIMED IN.>> SURE.IN THE SUBCOMMITTEE, WE HAD AT LEAST ONE MEMBER THAT HAD SERVED LONGER THAN THE NINE YEARS THAT WOULD BE ON THE THREE TERMS.I WOULD SAY ONE BENEFIT WAS THAT, WHEN SHE WAS REVIEWING THE BYLAW, SHE AUTOMATICALLY RECOGNIZED THAT WE NO LONGER DO PLANNED RATES BASED ON SALARY.SHE CAN UNDERSTAND WHY THAT WAS A PROVISION IN THE BY -- BYLAWS.THAT WASN'T NECESSARILY SENSIBLE NOW THAT CHANGED.THERE WAS LIVELY DEBATE AS IT WHETHER THERE SHOULD BE TERM LIMITS.PEOPLE ARE VERY COMMITTED TO THIS ORGANIZATION AND THEN IF THERE WERE TO BE TERM LIMITS, HOW YOU WOULD DO IT?DO YOU MOVE TWO-YEAR TERMS AND THREE OR ULTIMATELY, I THINK THE CONSENSUS GOT US TO THE THREE, THREE-YEAR TERMS AND THAT'S WHAT WENT OUT.THERE ARE 21 MEMBERS.I'M SURE THAT WAS A COMPROMISE FOR SOME PEOPLE.>> THANK YOU.OTHER QUESTIONS FOR NATALIE OR EVEN JUST COMMENTS IN GENERAL AROUND THE AMENDMENT TO THE BYLAWS?>> I'LL JUST COMMENT ON THE TERM LIMIT.IF THERE ARE ONLY TWO MEETINGS A YEAR OR EVEN THREE, YOU THINK ABOUT OVER A PERIOD OF TWO OR THREE TERMS, YOU'RE ONLY GETTING OTHER HALF DOZEN TIMES.I THINK THERE'S SOME VALUE IN KIND OF INSTITUTIONAL KNOWLEDGE.I THINK THREE-YEAR TERM IS A GOOD PLACE TO LAND WITH THAT.CERTAINLY NOBODY HAS TO SERVE AT ALL.IN TERMS OF MAKING A COMMITMENT, NO ONE HAS TO SERVE MORE THAN ONE TERM.>> ANY OTHER DISCUSSION?>> I THINK THERE'S BEEN GOOD CHANGES.WE APPLAUD THE COMMITTEE.I DON'T KNOW IF YOU'RE AWARE, NATALIE, I DON'T KNOW IF OTHER COMMISSIONERS ARE AWARE, I CAME FROM THE EAC.I SERVED AS BOTH ACTIVE EMPLOYEE AND RETIRED FROM STATE SERVICE AND I THINK WITHIN SIX MONTHS, I BECAME ONE OF THE RETIREE MEMBERS OF THE EAC.AFTER SOME TIME, WAS ON THE COMMISSION.I'VE BEEN INVOLVED WITH THIS FOR ABOUT 20 YEARS NOW.I REMEMBER THE EAC DAYS.I REALLY LOOK FORWARD TO HEARING COMMENTS AND RECOMMENDATIONS FROM THE EAC JUST IN TERMS OF THE LARGE NUMBER OF PEOPLE INVOLVED AND BREATH OF STATE SERVICE REPRESENTATION THAT IS EMBODIED IN THAT GROUP.I THINK IT'S BOTH WELL WORTHWHILE GROUP TO HAVE AND VALUABLE TO US AS A COMMISSION.>> THIS IS AN ACTION ITEM.I WOULD ENTERTAIN A MOTION.>> I MOVE WE APPROVE THE AMENDMENTS TO THE EMPLOYEE ADVISORY COMMITTEE BYLAWS AS PRESENTED TO US.>> SECOND.>> ANY ADDITIONAL DISCUSSION?HEARING NONE, CALL FOR THE VOTE.ALL THOSE IN FAVOR.>> AYE.>> ANY OPPOSED?THANK YOU SO MUCH NATALIE.PLEASE SEND OUR THANKS TO THE ENTIRE EAC COMMITTEE, THE SUBCOMMITTEE AND THE LARGER COMMITTEE FOR DOING THIS IMPORTANT WORK.>> THANK YOU.>> WITH THAT, ACTUALLY, NATALIE, AS WE MOVE FROM OUR ACTION ITEMS TO OUR REPORT, THE EAC HAS LISTED AS A STANDING REPORT.DO YOU HAVE ANYTHING ADDITIONAL THAT YOU WOULD LIKE TO REPORT?THANK YOU FOR THAT.WE WILL MOVE THROUGH THAT REPORT.I DO WANT TO SAY THAT WE WANT THAT ALWAYS AS A STANDING REPORT.SO WE CAN GET THAT FEEDBACK OUT AND EXCITED ABOUT THE WORK THAT THE SUBCOMMITTEE ON COMMUNICATIONS IS GOING TO BE DOING WITH THE EAC.I THINK IT'S IMPORTANT THAT THEY FEEL LIKE THEY HAVE THE VEHICLE TO

COMMUNICATE OUT TO THE EMPLOYEES BUT ALSO AS THEY'RE WORKING TO CREATE VEHICLES FOR EMPLOYEES TO COMMUNICATE IN TO THEM SO THEY THEN CAN USE THIS OPPORTUNITY TO BRING THOSE ISSUES FORWARD TO US. I THINK THERE'S SOME EXCITING WORK HAPPENING AND WE APPRECIATE THAT AND LOOK FORWARD TO FUTURE REPORTS. WITH THAT, OUR NEXT REPORT IS THE CONTRACT REPORT FOR PENDING R.F.P.S. THAT'S MIKE. >> R.F.P.S WILL BE ISSUED FOR SIX CONTRACTS OVER THIS REVIEW PERIOD. WE HAVE THE VOLUNTARY INSURANCE PLAN, WHICH WAS RELEASED ON OCTOBER 18, 2019 AND CLOSED ON DECEMBER 3, 2019. IT'S PROJECTED TO BRING BACK TO THE COMMISSIONERS AT THE APRIL MEETING FOR CONSIDERATION. WE HAD THE PREFERRED LAB BENEFITS CONTRACT THAT WAS JUST REVIEWED AND AWARDED BY THE COMMISSIONERS. WE HAVE THE TRANSPARENCY TOOLS, R.F.P. POSTED JANUARY 3, 2020 AND CLOSED ON FEBRUARY 20, 2020. THE R.F.P. FOR THE MEDICAL PLAN ADMINISTRATIVE SERVICES WAS POSTED FEBRUARY 6TH AND WILL CLOSE MARCH 19, 2020. WE HAVE TWO ADDITIONAL R.F.P.S IN PROCESS. THEY ARE THE AUDIT SERVICES CONTRACT AND THE MEDICARE PART D PRESCRIPTION DRUG. >> ARE THERE ANY QUESTIONS? >> MIKE, ANY CONVERSATION ABOUT THE MED -- MEDICARE PART D PRESCRIPTION DRUG. LOOKING AT THE PLANS -- ARE WE LOOKING AT TWO DIFFERENT LEVELS AGAIN OR WHAT ARE THE THOUGHTS IN REGARD TO THE PART D? >> LAST YEAR, WHEN THE R.F.P. WAS RELEASED AND WE BROUGHT IT BACK, WE HAD ONE COMPANY THAT NEEDED TO WITHDRAW AND LEFT US WITH ONE COMPANY THAT'S COMMISSIONED TO THE US AND AWARDED ONE-YEAR CONTRACT AND WANTED THE R.F.P. TO BE RERELEASED AGAIN THIS YEAR TO BRING BACK. WE'LL LOOK AT MULTIPLE PLAN DESIGN OPTIONS FOR OUR MEDICARE FOLKS THAT GOES THROUGH THAT R.F.P. TRADITIONALLY JUST BECAUSE OF THE NATURE OF IT AND THE WAY THAT THE COMPANIES RECEIVE THE INFORMATION AT THE FEDERAL LEVEL. THAT'S DISCUSSED TRADITIONALLY AT THE AUGUST MEETING. >> OKAY. THAT'S FINE. >> ANY OTHER QUESTIONS? SEEING NONE, WE WILL MOVE TO OUR FINANCIAL REPORT BY OUR PARTNERS. INTRODUCE YOURSELF. >> WE HAVE TWO COMPONENTS U ONE IS A POWERPOINT FINANCIAL REVIEW. WE'LL DO THAT ONE FIRST AND WE'LL WALK THROUGH THE YEAR END NUMBERS AND KIND OF FORECAST CHANGE. SLIDE ONE, AFTER THE TITLE SLIDE. THE FIRST THING WE'LL TALK ABOUT IS THE ENROLLMENT TREND. WE GO BACK TO 2014 UP TO 2019, WE HAVE TWO GRAPHS BELOW. ONE SUBSCRIBERS AND THEN TO THE RIGHT IS THE MEMBERS. IT'S A BAR CHART AND THE DARK BLUE IS PLAN A. LIGHTER BLUE IS PLAN C. WHEN YOU BROUGHT IN THE NEW PLAN IN 2018, GOT PLANS C AND Q. THAT'S THE RED SECTION. THE KEY TAKE AWAY IS IN GENERAL, SINCE 2015, WE'VE LOST ENROLLMENT BOTH IN TERMS OF MEMBERS AND SUBSCRIBERS AND WE'VE HAD MORE MEMBERSHIP LOST THAN SUBSCRIBERS. 12% VERSUS 17%. THERE'S ALSO BEEN MIGRATION FROM PLAN A AND TO THE OTHER PLANS. THE NEXT SLIDE -- LOT OF THAT WAS JUST FROM DESIGN. YOU TOOK AWAY LOT OF BENEFITS IN PLAN A AND YOU MODIFIED THE PREMIUMS, CONTRIBUTIONS. LOST MORE DEPENDENTS THAN YOU DID SUBSCRIBE BECAUSE OF THE CONTRIBUTION DIFFERENTIAL. THIS IS A NEW SLIDE. IT'S A PLAN COMPARISON. WE SHOW THE NUMBER OF SUBSCRIBERS, THE MEMBERSHIP SUBSCRIBER RATIO. IT'S INTERESTING PLAN A HAS 1.67 WHERE OTHER PLANS ARE IN THE LOW TWOS. THE BIG REASON FOR THAT IS JUST THE FUNDING COMPONENTS, AND WHAT THE CONTRIBUTIONS ARE FOR THOSE DEPENDENTS. >> DESCRIBE WHAT THE RATIO IS. >> FOR THE NUMBER OF MEMBERS IN THE PLAN OVER THE NUMBER OF SUBSCRIBERS. >> FOR EXAMPLE, UNDER PLAN A, THE 1.67, THAT MEANS FOR EVERYONE SUBSCRIBER, THERE'S 1.67 PERSONS? >> YES..67 DEPENDENTS. WHICH MEANS NOT A LOT. AS YOU GO TO THE CONSUMER PLAN C, YOU GOT MORE DEPENDENTS IN THERE. >> PLAN A LOT MORE SINGLE CONTRACTS. THE ACTUAL REAL VALUE, THAT'S THE BENEFIT RICHNESS AND THIS IS WITHOUT ANY OF THE HRCA MONEY. PLAN A AND J ARE YOUR TWO RICHEST PLANS. THEY'RE ALL FAIRLY

TIGHT. WHAT YOU'D EXPECT TO SEE WHEN YOU GO DOWN TO THE TOTAL PAID EPM, IS THAT THE RICHER THE PLAN, THE MORE EXPENSIVE IT WILL BE. THE ONE THING THAT YOU'RE NOT SEEING HERE IS THE RISK COMPONENT. YOU CAN SEE THAT -->> I WILL BACK YOU UP. I REALLY NEED YOU ONE, WE HAVE MANY LISTENERS ON THE PHONE. ALL OF US ARE IN DIFFERENT PLACES IN TERMS OF KNOWLEDGE. WHEN YOU SAY EPM, THAT MEANS NOTHING TO THE AVERAGE PERSON. I NEED YOU TO WALK US THROUGH WHAT WE'RE LOOKING AT SO BOTH US AS WELL AS LISTENERS HAVE AN UNDERSTANDING OF WHAT WE'RE HEARING.>> THAT'S PER EMPLOYEE PER MONTH COST NUMBER. WE HAVE MEDICAL, PHARMACY AND COMBINED. THOSE NEW PLANS, YOU CAN SEE 350, 370, EVEN 586, THEY ARE A LOT LESS THAN PLAN A AND C. WE LOOKED AT THE RISK COMPONENTS, WE DON'T HAVE RISK PER SE, WE HAVE AVERAGE AGE PER SUBSCRIBER AND PLAN A YOU'RE AT 48 YOUR AVERAGE AGE FOR ARE THE SUBSCRIBER. PLAN C THAT'S 45. THEN THESE NEW PLANS ARE DOWN TO LIKE LOW 40S. I THINK THAT'S WHY THE COST IS SO MUCH LOWER. JUST THE RISK.>> WE HAD LOT OF SELECTIONS. HIGH RISK PEOPLE, COST LITTLE MORE. YOU CAN SEE REALLY JUMPS OUT MORE IN PHARMACY THE MOST.>> ON THE NEXT SLIDE -->> IF I MAY, AGAIN, NOTHING REALLY SURPRISE ME, JUST THE NATURE OF THE PLANS ARE AND THE -- NATURE OF THE PEOPLE, THEIR HEALTH CONDITIONS PEOPLE THAT NAVIGATE TO THOSE DIFFERENT PLAN REQUESTS>> LOT OF TIMES YOUR YOUNGER, HEALTHIER PEOPLE WILL SELECT THE CHEAPEST CONTRIBUTION THAT USUALLY COINCIDE WITH LESS BENEFIT VALUE. THAT'S WHAT WE'RE SEEING.>> THANK YOU.>> ANOTHER WAY TO PUT IT, PEOPLE PAY MORE MONEY IN CONTRIBUTIONS, THEY'LL USUALLY GET MORE BENEFIT VALUE SO PEOPLE KIND OF KNOW WHAT'S GOOD FOR THEM. TO GO INTO THAT PLAN, THEY'RE MAKING IT WORTH TO TAKE THAT PLAN. PEOPLE MAKE FINANCIAL DECISIONS.>> COULD THE PHARMACY BE LOWER, PLAN C DOESN'T COVER PHARMACY UNTIL THEY HIT THEIR DEDUCTIBLE. WHEREAS PLAN A, THEY ALWAYS ARE COVERED WITH THEIR PHARMACY?>> EXACTLY.>> IN TERMS OF THE NUMBER, SUBSCRIBER RATIO AND OTHER HEALTH PLANS LIKE OTHER STATE HEALTH PLANS? IS THAT PRETTY AVERAGE WHAT WE HAVE IN TERMS OF PLAN A BEING 1.67.>> IT'S REALLY LOW. THAT'S A LOW AVERAGE. IT'S 100% RELATED TO HOW MUCH YOU CONTRIBUTE TOWARDSTHECOVERAGE. IF I GO INTO MISSISSIPPI WHERE THEY PAY ACTUALLY NOTHING FOR THE PENDING COVERAGE FOR ANY TIER, YOU GET A LOWER RATIO. IF I GO TO PLAN THAT'S KIND OF LIKE 80% FOR ALL TIERS, THEY'LL GET A REALLY HIGH RATIO. YOU'LL GET LIKE 2.5 OVERALL. 1.96 IS LOW OVERALL. ALMOST ALL THE STATES ARE LOOKED AT IT IN THE 2.5 RANGE. THERE'S TWO STATES THAT ARE REALLY LOW. MISSISSIPPI IS ONE OF THEM, NORTH CAROLINA IS ONE OF THEM. YOU'RE HIGHER THAN THEIRS YOU DO CONTRIBUTE TOWARDS THE COVERAGE. YOU'RE KIND OF IN BETWEEN THEM.>> THANK YOU.>> WHEN YOU MADE THAT STATEMENT, ABOUT 2.5 YOU'RE TALKING ABOUT THE ALL PLAN RATIO?>> YES, OVERALL. YOU DON'T HAVE ANY PLANS THAT HIT THAT REALLY. WE HAVE BENCHMARK DATA FOR ALL THAT. THAT'S EASY FOR US TO GET. IT'S RELATED TO THE CONTRIBUTION STRATEGY. IT'S NOTHING STARTLING BECAUSE IT HAS TO DO HOW MUCH YOU SPEND. IF YOU MAKE PEOPLE PAY FOR THE MAJORITY OF IT, THEY'LL GET COVERAGE SOMEWHERE ELSE. WE UTILIZED THE INFORMATION FROM THE DATA WAREHOUSE. WE WENT BACK FROM 2014 TO 2019 AND NOW WE'RE LOOKING AT ALLOWED PMPM. PER MEMBER PER MONTH INSTEAD OF PER SUBSCRIBER PER MONTH. IT'S A LITTLE MORE DETAILED. THAT'S BEEN ANY COST SHARING. THAT'S WHAT THE MEMBER PAY IS OUT OF POCKET PLUS WHAT THE PLAN PAYS. THAT TAKES OUT ANY VOLATILITY FOR PLAN CHANGES THROUGHOUT THE YEARS. ON THE RIGHT, WE'LL START WITH THE TOP RIGHT MEDICAL PMPM. IT'S BEEN FAIRLY STABLE. 2%, 6 IN 2016. WE HAD A LARGE BUMP IN LARGE CLAIMS THAT YEAR. IT CAME BACK DOWN AFTER THAT NORMALIZED IN 2017. IN THE LAST YEAR, WE'VE BEEN AT 4 OR 5%. TAKE 5-YEAR AGGREGATE, WE'RE AT 2.0 ON MEDICAL. THAT'S WELL

BELOW INDUSTRY TREND. FLIPPING OVER TO THE PHARMACY DOWN BELOW, IT'S GROWN IN RECENT YEARS. SO 7%. THIS PAST YEAR, STILL BELOW MARKET TRENDS. BUT THE ONE THING THAT'S NOT SHOWING HERE IS THAT \$4.7 MILLION CREDIT FROM CAREMARK FROM MISSING THE GUARANTEES. IF YOU FACTOR IN IN 2018, THAT WILL BE LIKE A 2%.>> IF YOU PUT THE 4.5 REBATES, THAT WOULD BRING THAT PERCENTAGE INCREASE DOWN?>> YES. FOR 2018. YES. WHAT IT ALSO DOES IS IT MAKES '18 AND '19 A BIGGER INCREASE. PATRICK SHOWING 6% HERE, 2018 A LOWER NUMBER, THAT MAKES '19 TREND CLOSE TO 10%.>> WE HAVE TO TAKE INTO ACCOUNT WHEN GET THE SAME THING NEXT YEAR.>> 10% IS THE MARKET RATE. EXPECTATION OF INCREASE -- IT'S NOT WHAT WE'RE USING IN OUR PROJECTIONS.>> NOT UNREASONABLE.>> SOME THOUGHTS ON -- LET'S TALK ABOUT THAT 10%. KIND OF THE REAL JUMP THAT WE SAW. WHAT CORRECTED -- CONTRIBUTED TO THAT IN YOUR OPINION?>> ON THE PHARMACY SIDE, YOU'LL HAVE THE PHARMACY TREND. YOU'LL MOVE TO SPECIALTY MEDICATION, YOU'LL HAVE ESCALATION OF PRICE. YOU HAVE COPAY DESIGN FOR A LOT OF THEM. THAT'S A LEVERAGE NUMBER WHEN THE PRICE GOES UP, MEMBERS DON'T PAY ANYMORE BUT THE COST GOES UP. YOU'RE LEVERAGED ON THAT.>> IF YOU'RE DIALED IN, PLEASE MUTE YOUR PHONE. THANK YOU.>> I WANT TO CAUTION LOOKING AT ONE YEAR IN ISOLATION, IF YOU LOOK AT IT IN MULTIPLE YEARS. 3.5% ARE TRENDS OVER ALL THOSE YEARS, THAT'S NOT GOING TO CHANGE IF '18 GOES DOWN. YOU LOOK AT '19 VERSUS THAT YEAR. 3.5% IS PRETTY LOW. YOU LOOK AT MARKET TREND OVER THAT PERIOD, IT'S LIKE 8% TO 10% ANNUALLY. MEDICALS MAYBE MORE LIKE 4% TO 6% MARKET TO TREND OVER THOSE YEARS. YOU'RE ABOUT THREE POINTS UNDER THAT TOO.>> I UNDERSTAND NOT LOOKING AT ONE YEAR BUT LAST COUPLE OF YEARS, WITHOUT INCLUDING THE \$4.5 MILLION, WE HAVE SEEN A MARKED INCREASE. I THINK WE'VE PROBABLY GOTTEN SPOILED OUR TRENDS HAVE BEEN LOW. I'M HOPING THAT THE PHARMACY TREND DOESN'T CONTINUE TO CLIMB LIKE IT HAS BECAUSE IT'S BEEN NICE TO BE SPOILED. I DON'T KNOW IF THERE'S MUCH ANYTHING WE CAN DO ABOUT IT. THE REFERENCE THAT PATRICK MADE, 16,, WHEN WE HAD THE LARGE CLAIM. WE WERE TERRIBLY CONCERNED FOLLOWING THAT YEAR. EVEN THOUGH YOU OR YOUR PREDECESSOR SAID, HANG IN THERE, YOU WERE CORRECT. WE DID COME DOWN. IT'S PROVEN TO BE A CONCERN. IF THERE'S SOMETHING THAT WE CAN DO TO INTERJECT PUT A LID ON IT, I THINK IT'S WORTH LOOKING AT IT AND ASKING THE QUESTIONS ALONG THAT LINE.>> LARGE CLAIMS ARE SO VOLATILE, YOU DON'T WANT TO OVERREACT?>> I DON'T WANT TO OPEN THAT WHOLE BAG OF WORMS AGAIN. I REMEMBER, WE WERE QUITE CONCERNED. ESPECIALLY IF THAT WOULD HAPPEN ANOTHER YEAR TYPE OF THING. PHARMACIES ARE A BIG PART OF WHAT THE COST ARE OF COURSE. I WANTED TO PUT THAT OUT THERE SO WE DON'T LET IT GO PASS US SO WE CAN RECOGNIZE MAYBE WE NEED TO PAY ATTENTION TO AND SEE IF THERE'S SOMETHING WE CAN DO.>> SLIDE FOUR. THANKS. YOU CAN SEE THAT BIG BUMP IN 2016. NOT ONLY IN TERMS OF THE AMOUNT, S. THE BAR THERE IS THE TOTAL DOLLARS OVER DIFFERENT THRESHOLDS. WE GO FROM 250 TO \$500,000 FROM 500 TO A \$1 MILLION. THE WHITE LIGHT BLUE IS OVER A \$1 MILLION. THEY HAD A HUGE JUMP IN CLAIM OVER A MILLION IN THAT YEAR. THAT'S JUST KIND OF BAD LUCK. IT BOUNCES AROUND. THIS YEAR, 2019, WE SHOW THE EXPECTED. WE TAKE THREE YEARS OF DATA AND AVERAGE TREND. WE HAVE A MODEL THAT WE LOOK AT, MAKE SURE THAT'S IN CHECK. THIS YEAR, IN TERMS OF THE ACTUAL VERSUS EXPECTED IT'S PRETTY DARN CLOSE IN TERMS OF DOLLARS. NEXT SLIDE PLEASE. THIS IS SHOWING HOW THE YEAR ENDED, SHOWING THE BUDGET VERSUS THE ACTUALS. IN TERMS OF TOTAL, THE LAST TIME WE HAD DATA THROUGH OCTOBER AND I BELIEVE WE'RE \$4.5 MILLION LOSS. THINGS IMPROVED IN NOVEMBER AND DECEMBER. WE ENDED THE YEAR \$3.7 MILLION. THAT'S NET CASH FLOW AT THE VERY BOTTOM. BIG DIFFERENCE, WAS BEFORE WE WERE HURTING ON REVENUE. THAT CAME BACK. ON PER CAPITA BASIS, WE ONLY HAD .1% LOSS BECAUSE WE

HAD HEAD COUNT DOWN FROM WHEN WE ORIGINALLY PROJECTED.EVEN THOUGH WE HAD \$2.9 MILLION LOSS IN TERMS OF TOTAL DOLLARS, IF YOU LOOK AT THE PER EMPLOYEE PER MONTH FOR BUDGET, THEY WERE REALLY CLOSE.MOVING DOWN TO THE COST SIDE, MEDICAL, WE HAD A LOSS.THAT WAS OFFSET BY THE PHARMACY AND THE DENTAL.THE PHARMACY WOULD HAVE BEEN RIGHT ON HAD WE NOT GOT THE \$4.5 MILLION CREDIT.WE HAD GAIN ON DENTAL.WE HAD A LOSS ON ADMIN, ABOUT \$900,000.THEN IN TOTAL, WE'RE OFF BY \$1 MILLION.WE LOOKED AT JANUARY AND SO FAR THAT SEEMS TO BE FAIR TOO.ANY QUESTIONS ON THAT?THE LAST SLIDE WE HAVE IS THE TOP 10 CLAIMS.THIS SHOWS WHAT THE DIAGNOSIS CATEGORY WAS.THE DOLLAR AMOUNT THIS YEAR AND WE CAN SEE WHAT THE CLAIMS FOR THAT PERSON LAST YEAR AS WELL AND WHAT THEIR STATUS IS.OUT OF THE TOP TEN CLAIMS, THERE'S ONLY ONE PERSON WHO TERMED THROUGHOUT THE YEAR.EVERYBODY STILL CURRENT.WHEN WE COMPARED THIS TOP TEN TO YEARS PAST, I GUESS 2018 SPECIFICALLY IT'S PRETTY CLOSE.>> LOT MORE ACTIVE.>> I THINK IN YEARS PASS, THREE OUT OF SEVEN RETURNED.>> PATRICK WENT THROUGH THAT ALREADY.WHEN YOU GO TO THE PAGE 4 OF THAT, I THINK LAST TIME WE WERE ESTIMATING \$4.5 MILLION OR SOMETHING LOSS OR 3.7.WE'RE LITTLE BIT AHEAD OF LAST TIME.IN GENERAL, SAME MESSAGE.NEXT TIME IN THE APRIL MEETING WE'LL GIVE YOU THE 2020 VERSION OF THAT.YOU CAN SEE WHERE THAT'S AT.WE DID LOOK AT JANUARY, YEAR TO DATE.JANUARY WE'RE A LITTLE BIT AHEAD WHERE WE THOUGHT.IT'S ONE MONTH.AT LEAST IT'S WHERE YOU WANT IT TO GO.THE 4.8% FOR THE LONG-TERM INCREASE, THAT'S STILL THE SAME NUMBER IT WAS BEFORE.NOTHING CHANGED ON THAT.I THINK THAT'S IT.UNLESS THERE'S ANY QUESTIONS.>> QUESTIONS FROM THE COMMISSIONERS?>> CAN I GO BACK TO THAT TOP TEN?FOURTH THING DOWN, WHAT IS ADMINISTRATIVE CONCERN AND NON-SPECIFIC ABNORMALITIES.WHAT KIND OF DIAGNOSIS IS THAT?>> NOT A GOOD ONE[LAUGHTER]THESE ALL WE GOT DIAGNOSED FROM THE CARRIER.THEY GIVE US THE DIAGNOSIS.I GUESS WE CAN GET MORE DETAIL.>> I'M JUST CURIOUS.>> I'LL FOLLOW-UP WITH THEM AND SEE IF WE CAN GET MORE DETAIL.>> I THINK IT'S IN THE CANCER SPECTRUM.I DON'T KNOW.>> ANY ADDITIONAL QUESTIONS.THANK YOU.WE HAVE COUPLE OF ITEMS THAT ARE IN OLD BUSINESS.WE WILL START WITH THE 2021 PLAN YEAR MODELING.>> WE HAVE LOT OF INFORMATION HERE.WHAT WE TALK ABOUT TODAY ALWAYS AVAILABLE OUTSIDE OF THE MEETING TO MEET WITH THE COMMISSIONERS, VIA PHONE OR IN PERSON TO DISCUSS ANY QUESTIONS.YOU GOT JUST AN OVERALL PROJECTION MODEL EXPLANATION, MEMORANDUM THERE.WE HAVE INCLUDED SOME SAMPLES JUST TO GIVE THE COMMISSIONERS AN IDEA WHAT IT WOULD LOOK LIKE AS YOU PICK AND CHOOSE WHICH DIRECTION YOU MAY WANT TO GO.LAST YEAR THE COMMISSION LOOKED AT REDUCING THE CONTRIBUTION AMOUNTS FOR THE REALLY ALL THE TIERS.THEY HELD EMPLOYEE ONLY AND EMPLOYEE PLUS CHILDREN AND REDUCED EMPLOYEE SPOUSE TIER AND RETIREE BY 6% AND JUST ONE ADJUSTMENT ON PLAN C.THAT'S ONE AVENUE OF THOUGHT.THEN OF COURSE THEY COMBINED WHICH WE WILL SHOW IN SOME OF THE MODELS.JUST TO KEEP THE CONVERSATION GOING AGAIN, THESE ARE JUST SAMPLES.NO DECISIONS WILL BE MADE UNTIL THE JUNE MEETING.PLENTY OF TIME TO FORMULATE SOME THOUGHTS ON WHERE YOU WANT TO GO FOR PLAN YEAR 2021.I WILL JUMP INTO THE MODEL.>> JUST TO BACK US UP A LITTLE BIT, WE HAD A COUPLE OF CONVERSATIONS AT OUR LAST MEETINGS IN TERMS OF TRYING TO BE BETTER READY OR INFORMED FOR THAT JUNE CONVERSATION OF WHAT DECISIONS, WHAT LIVERS CAN WE -- LEVERS CAN WE MOVE.WE BEGIN TO DO SOME MODELING, THESE ARE SOME OF THE FACTORS TO BE CONSIDERED.HERE ARE SOME OF THE AREAS TO BE IMPACT WITH THE SOME OF THOSE TRIGGERS.ONE THE THINGS WE'VE TALKED ABOUT, WHAT MIKE WAS ALLUDING TO, IF ANY OF THE COMMISSIONERS WANT TO SIT DOWN ONE ON ONE WITH MIKE AND HIS TEAM AND WALK THROUGH SOME OF THE MODELS SO THAT YOU'RE UNDERSTANDING THE

VARIOUS LEVERS, THEY CAN DO THAT INDIVIDUALLY. IF YOU WALK THROUGH SOME THIS AGAIN, NONE OF THIS DECISION-MAKING. THEY PUT TOGETHER COUPLE OF THINGS. WHAT WE TRYING TO DO A GET LITTLE BIT OF FEEDBACK ON WHAT ELSE MIGHT WE WANT TO SEE OR NEED TO HELP US BE INFORMED. REPRESENTING IT HERE, WE STILL HAVE THE APRIL MEETING TO TALK ABOUT IT AGAIN SO THAT WHEN WE WALK INTO THAT JUNE MEETING THAT WE ALSO A BIT MORE CLEAR ON WHICH LEVERS AND WHICH DECISIONS AND WHAT THAT LOOKS THAT AS WE HAVE THOSE CONVERSATIONS AND MOVE TO MAKE THOSE DECISIONS. >> WE CAN DO THE MODELING. I WANTED TO TOSS OUT -- I DON'T KNOW IF THERE'S EVER ANYTHING SET, BUT IT'S OBVIOUSLY LOOKING AT THE NUMBERS THAT THERE'S SOME TREND TO WHAT PERCENTAGE THE COST TO AN EMPLOYEE. WHETHER IT BE AN EMPLOYEE ONLY OR EMPLOYEE SPOUSE, EMPLOYEE KID OR EMPLOYEE FAMILY THAT THE EMPLOYER PAYS. STARTING ABOUT THREE OR FOUR YEARS AGO, WHEN WE HAD PRETTY TRAUMATIC INCREASES OR CHANGES, WE WOULD HAVE SKEWED WHAT MAY HAVE BEEN GOING ON FOR A FEW YEARS. AS I THOUGHT ABOUT THIS, DO WE WANT TO ACCEPT SOME PARAMETER -- SET SOME PARAMETER FOR OURSELVES? I DON'T KNOW WHAT THEY MAY TURN OUT. I DIDN'T DO THE MATH. I WOULD GUESS SOME PLACE IN THE AREA OF AN EMPLOYEE ONLY. THE EMPLOYEE PAY BEING 5% OR MAYBE 10 OF HIS OR HER COST OF THAT PLAN. WHEN IT GETS TO EMPLOYEE-SPOUSE OR EMPLOYEE-FAMILY. THERE'S A MUCH GREATER PERCENTAGE. DO WE WANT TO SET THAT KIND OF THING. I HAVE NO IDEA WHERE WE ARE AT. I'D BE INTERESTED KNOWING WHAT WE MAY LOOK LIKE IN COMPARISON TO SOME OTHER STATES. THAT'S BEEN MY THINKING ABOUT THIS. I HAVEN'T BEEN SO MUCH LEANING TO DOING A TWEAK HERE AND THERE. WE CAN ALWAYS DO THAT, LOOKING AT THE MODELS THAT ARE PRESENTED. FAIRLY MINOR TWEAKS AND DON'T MAKE BUT .1 PERCENT DIFFERENT ONE WAY OR ANOTHER. I LIKE US TO SET AT LEAST TALK ABOUT SETTING -->> LARGER -->> LARGER UMBRELLA TYPE OF THING. WE WANT THE EMPLOYEE TO PICK UP ABOUT X PERCENT IF IT'S THE ONLY EMPLOYEE COVERAGES. WE WANT CAN THE EMPLOYEE IF IT'S EMPLOYEE-SPOUSE OR EMPLOYEE-FAMILY TO PICK UP THIS PERCENTAGE AND THE EMPLOYER THE OTHER. USE THAT THEN AS FUTURE COMMISSIONS LOOK AT IT TO NOT THAT THEY ARE BOUND, AS GUIDE POSTS MAYBE. WHEN THERE ARE SIGNIFICANT CHANGES BEING CONSIDERED. THAT'S BEEN MY THINKING IN TERMS OF NOT SO MUCH PLAN DESIGN BUT MAYBE MORE SO RATE DESIGN IN REGARD TO LOOKING TO 2021 AND COMING FROM THE LAST SEVERAL YEARS WHEN SIGNIFICANT CHANGES WERE MADE TO RATE DESIGN. >> DO YOU THINK THAT WOULD HAVE HELPED THE RATE NOT DO WHAT THEY DID? >> MAYBE. THERE WERE MULTIPLE FACTORS THAT WENT INTO THOSE THINGS. I THINK IT WOULD HAVE. AT LEAST IT WOULD HAVE BEEN A MORE CONSCIOUS DECISION THAT WE'RE GOING TO GO OUTSIDE OR BEYOND MAYBE THE BOUNDARIES OR THE GUIDE POST THAT WERE ESTABLISHED BY SOME PART OF THIS BODY IN THE PAST OR WHATEVER. I'D BE INTERESTED IN THAT. SEEING MUCH BROADER TRENDS AND WHAT NOT. >> I THINK DECISIONS THAT WERE MADE IN THE PAST ARE BASED UPON WHERE THE PLANS AT FINANCIALLY. STEVE, YOU WERE PART OF SOME OF THOSE CHANGES. IT WAS FAIRLY SUBSTANTIAL AND HIGHER THAN IT NEEDED TO BE, GO BELOW TO WHERE IT NEEDED TO BE. AS THOSE COMMISSIONS MADE THOSE DECISIONS THEY WERE WORKING WITH WHAT THEY HAD NO FRONT OF THEM. BASICALLY THE PLAN SURVIVES ON THREE-LEGGED STOOL. YOU GOT YOUR REVENUE FROM YOUR EMPLOYER AND REVENUE FROM YOUR EMPLOYEES. WHATEVER YOUR COST SHARE IS AND THE PLAN IS. MEMBERS DEPENDING ON WHERE THE REVENUE STREAMS ARE COMING FROM OR NOT COMING FROM. LEFT THE COMMISSION IN POSITION IN THE PAST, WASN'T OF THE LEGS OF THE STOOL WAS NOT WHAT IT HAD BEEN HISTORICALLY. WHICH LEFT THE EMPLOYEE CONTRIBUTION AND THE COST SHARED WITH THE MEMBER REALLY ON THE TABLE FOR THE COMMISSIONERS TO MAKE DECISIONS. IF YOU'RE IN A SITUATION, LIKE LAST YEAR WHERE THE

COMMISSION RIGHT NOW IT'S LAID OUT USING THIS YEAR'S 4.8% AS AN EXAMPLE ACROSS EMPLOYER AND EMPLOYEE. ALL THE RETIREE TIERS, LAST YEAR THE COMMISSION WAS ABLE TO PUSH COUPLE OF POINTS OVER TO THE EMPLOYER SIDE THAT ALLOWED THEM TO HOLD NO RATE INCREASE FOR FEW OF THE TIERS AND DECREASE SOME OF THE OTHERS. THAT'S REALLY WHAT YOU'RE LOOKING AT. THOSE THREE DIFFERENT FUNDING MECHANISMS AND THE HEALTH PLAN WITH COMMISSION HAS PUT SEVERAL PROGRAMS IN PLACE TO TRY TO HELP REDUCE COST FOR THE MEMBERS AND THEREFORE, THE COST FOR THE HEALTH PLAN WHICH DOES HELP LOWER THAT 4.8% THAT SEGAL ESTIMATED IT WOULD TAKE. EVERY YEAR, EVERY ADMINISTRATION IS A LITTLE BIT DIFFERENT. IT DEPENDS ON WHERE YOUR SOURCES ARE AND WHAT YOU CAN DO. RIGHT NOW THE COMMISSION IS LOOKING AT TOTAL RESERVE BALANCE REALLY RIGHT WHERE IT NEEDS TO BE YEARS AGO AND STEVE, YOU'LL REMEMBER THIS AND POSSIBLY HEATHER WHEN THE FUND BALANCE WAS LARGER. ALTHOUGH, THERE MAY HAVE BEEN A REQUEST FROM AN STANDPOINT. THEY WERE TRYING TO SPEND DOWN THAT LARGER FUND BALANCE. DON'T REALLY HAVE THAT LUXURY TODAY. YOU TRYING TO MAINTAIN THAT FUND BALANCE AND GET BACK TO WHERE YOU WERE SO YOU DON'T HAVE AS MUCH LEEWAY TO DO THAT LIKE PREVIOUS YEARS WITH FUND BALANCE WAS HIGHER THAN WHAT IT NEEDED TO BE. >> I DO THINK, MORE LARGER ALMOST STRATEGIC CONVERSATION WILL BE HELPFUL TO THINK ABOUT WHERE THOSE POSTS ARE AND WHAT THAT MEANS OR HOW THAT IMPACTS THE PLAN AND THE RESERVES BEING ABLE TO HAVE SOME OF THAT INFORMATION COMPARATIVE TO NOT ONLY WHERE WE ARE AND WHAT WE'VE BEEN BUT ALSO TO POTENTIALLY OTHER STATES OR KIND OF MARKET TRENDS. IT WOULD BE HELPFUL AS WELL. PART OF IT IS, SOME OF THIS MODELING, IT'S INSIGHTFUL TO UNDERSTAND ALL THE VARIOUS LEVERS. WE GOT TO GET THROUGH A PLACE WHERE WE UNDERSTAND WHERE WE WANT TO GO AND WHICH ONES HELP US ACHIEVE THOSE OUTCOMES FOR THE EMPLOYER, CONTRIBUTION FOR THE EMPLOYEE CONTRIBUTION AND SO FORTH. BECAUSE I THINK WE'RE ALL COMING IN DIFFERENT STAGES WITH COUPLE OF OUR COMMISSIONERS BEING HERE FOR A NUMBER OF YEARS AND FEW OF US NEWER, GETTING ALL WHERE WE FEEL COMFORTABLE TO BE ASKING THAT QUESTION OR KNOW WHICH QUESTIONS TO ASK. THIS IS THE BEGINNING OF THE CONVERSATION. I HOPE WE CAN CONTINUE TO HAVE THIS CONVERSATION AT THE POLITICAL MEET -- APRIL MEETING AND TALK MORE ABOUT IT. IF THERE'S COUPLE OF THINGS WE CAN OUTLINE BY THEN SO WE COME IN EVEN MORE INFORMED IN APRIL, I THINK THAT WILL BE HELPFUL FOR ME. >> WHAT I LIKE TO SEE, IF THERE'S A CONCURRENT, I LIKE TO KNOW, HAS THERE BEEN, I THINK ONE TIME THERE WAS, THAT PERCENTAGE OF EMPLOYEE CONTRIBUTION DEPENDING WHETHER THE EMPLOYEE SELF OR EMPLOYEE PLUS DEPENDENTS. WHAT HAPPEN PERCENTAGE WAS EXPECTED FROM THE EMPLOYEE VERSUS EMPLOYER AND HAVE COMPARISONS WITH OTHER STATES. I DON'T KNOW IF I HAVE WANT HIGHEST, RICHEST COVERAGE OR THE LOWEST COVERAGE. IF WOULDN'T BE THAT'S WHERE WE WANT TO BE TODAY. IF WE LIKE TO BE AT THESE POINTS, WE WOULD THEN DEAL WITH THE PLAN DESIGN GIVEN THE FUNDS THAT WE PROJECT HAVING AVAILABLE TO ACHIEVE THAT. HOPEFULLY, IT WOULD HELP US, IF THE MONEY JUST ISN'T THERE, WE HAVE TO DEAL WHAT HAVE TO DO TO EKEEP THE PLAN SOLVENT. SOME OF THE -- COMMISSIONER YOUR QUESTION, -- SOME OF THE FACTORS HAVING SIGNIFICANT IMPACT HAD TO DEAL WITH LEGISLATIVE ACTION THAT WAS TAKEN UNILATERALLY OR MESSAGE DELIVERED THAT WE BETTER DO SOMETHING IN A CERTAIN WAY. I WOULD HOPE THAT MAYBE IF WE HAVE THIS UMBRELLA GUIDE POST THAT WE CAN UTILIZE IT. IF YOU DISAGREE WITH THE GUIDE POST THAT WE SET, THAT'S ONE THING. WE GOT THESE WHAT WE TRYING TO DO AS WE MOVE THROUGH TIMES WHERE EXTERNAL FORCES THAT COME TO BEAR. >> WHEN I FIRST STARTED AT THIS STATE 20 YEARS AGO, THERE WAS STATE PAID THIS MUCH. YOU PAID THIS MUCH. IT WAS AS ON A TIERED PAY LEVEL. SO THAT SOMEBODY

MAKING \$12 AN HOUR WASN'T PAYING THE SAME FOR THEIR FAMILIES AS SOMEBODY MAKING \$60,000. YOU HAVE TO LOOK AT THAT TOO.>> I LIKE TO KNOW WHAT WE LOOKED AT ONE TIME, WHAT KIND OF EXISTENCE NOW IN COMPARISON WITH OTHER STATES. THEN LEAST FOR ME, I CAN SAY, OKAY, THAT'S SOMETHING I KIND OF LIKE TO HEAD TOWARDS.>> BASED ON SOME OF THE MODELING THAT YOU ALL DONE, IS THERE SOMETHING IN HERE THAT WE CAN BEGIN WITH? IS THIS SOMETHING YOU FEEL WE NEED TO PULL MORE INFORMATION FOR THE COMMISSIONERS?>> WE WERE JUST PUTTING OUT EXAMPLES. I THINK WE SHOULD TAKE A LOOK AT WOULD BE THE SECOND MODEL. THAT WAS A REQUEST BY ONE OF THE COMMISSIONERS AT THE LAST MEETING. WHICH SHOWS THE RESULTS OF MOVING THE PLAN A FROM A 3 TIER DEDUCTIBLE, IT'S CURRENTLY THOUSAND FOR SINGLE, 2000 FOR MEMBER PLUS ONE AND 3000 FOR MEMBER PLUS TWO OR MORE DEPENDENTS TO WHAT THE PLAN A WAS UNTIL FEW YEARS AGO TWO TIERED DEDUCTIBLE WHICH WOULD BE 1000 FOR EMPLOYEE ONLY AND 2000 FOR EMPLOYEE PLUS ONE MORE OR DEPENDENT OPTION -- ON THE PLAN. YOU CAN SEE THE IMPACT TO THE CONTRIBUTION RATE IN THAT HIGHLIGHTED AREA ON YOUR DOCUMENT JUST MOVES FROM 4.8% TO 4.9% AND CLOSED DOWN THROUGH AT LEAST THE FUND BALANCE TO WHERE IT NEEDS TO BE. PHYSICALLY FOR THE CONTRIBUTION, SMALL UPTICK WITH THAT. THAT WAS THE SPECIFIC REQUEST BY THE COMMISSIONER AT THE LAST MEETINGS. WE WANTED TO MAKE SURE WE BROUGHT THAT FORWARD FOR EVALUATION. OTHERS ARE JUST SAMPLES OF JUST TRYING TO GENERATE A CONVERSATION AND COMMISSIONERS CAN SEE WHAT WOULD HAPPEN. MODEL THREE, THERE HAVE BEEN SOME CONVERSATIONS, NOT A SPECIFIC REQUEST, WHAT WOULD HAPPEN IF THERE WERE HEALTH REIMBURSEMENT ACCOUNT. WHAT WOULD THAT BE IF IT WAS SET UP?>> CAN WE DO HRA FOR CLINIC?>> YOU CAN.>> EVEN IF THEY HAVE FLEXIBLE SPENDING.>> IF THIS WERE SET UP SIMILAR TO THE PLAN J AND Q WHERE THE EMPLOYEES COULD EARN LIKE \$500 BY PARTICIPATION THROUGH THE ACTIVITIES, THAT IMPACTS IN THAT HIGHLIGHTED AREA TO THE CONTRIBUTION, JUST MOVES THAT TO 4.8% TO 4.9%.>> LEAVING IT A THREE TIERED DEDUCTIBLE?>> THIS WILL BE STAND ALONE. VERY LAST MODEL COMBINES ALL OF THESE INTO ONE JUST TO GET THE COMMISSIONERS AN IDEA IF YOU DID MULTIPLE THINGS, WHAT WOULD THE IMPACT BE. MODEL 4 IS SOMETHING THE COMMISSIONERS WOULD HAVE TO CONSIDER THIS YEAR. IN ORDER TO BE IN COMPLIANCE AND NOT RESULT IN MORE OF OUT OF POCKET COST FOR THE MEMBERS ON THE HIGH DEDUCTIBLE HEALTH PLANS. WE NEED TO MOVE THAT DEDUCTIBLE FROM 2750 TO 2800. WHERE IT DIDN'T MOVE WAS ON THE EMPLOYEE ONLY AND DID NOT CHANGE OUT OF POCKET MAXIMUM. IF YOU WANTED TO LINE THAT DEDUCTIBLE UP WITH ALL FOUR TIERS WHAT WE KNOW TO PAY ALL FOUR TIERS WILL BE 2800 AND OUT OF POCKET FOR MEMBER ONLY WOULD INCREASE \$100 FROM 55 TO 5600. FOR THE FAMILY FROM 11 TO 11200. THEN \$200 INCREASE. DOES NOT IMPACT THE CONTRIBUTION AMOUNT. IT DOES REDUCE PLAN EXPENSES THE OTHER HIGHLIGHTED LINES ON THE TOTAL EXPENSE. LITTLE OVER \$450,000 FOR THAT CHANGE. THAT'S SOMETHING THAT WILL NEED TO BE TALKED ABOUT RELATED TO THOSE PLANS. MOH 5 IS WHAT COMMISSIONER YOUNG TALKED ABOUT, JUST COMBINES THE PREVIOUS MODELS. JUST LOOKING AT THE CONTRIBUTION IMPACT THERE WITH THOSE CHANGES MOVE IT FROM 4.8 TO 4.9. I WOULD REDUCE DOWN TO TWO-YEAR DEDUCTIBLE. PUT THE HRA ON PLAN A AND MOVE THAT DEDUCTIBLE UP ON TIER 1 IN OUT OF POCKET MAX ON PLAN C AND N. THAT'S THE IMPACT OF THOSE COMBINE JUST TO GET THE COMMISSIONER A SAMPLE. YOU CAN DO MORE THAN ONE OR TWO THINGS.>> MIKE I WILL HOP AROUND JUST A MINUTE. YOU HAVE FROM MY COMMISSIONERS, THE LONG FORM THAT ARE IN YOUR PACKET. WHICH HAVE VARIOUS INFORMATION OF SHOWING KIND OF HISTORICAL. THERE'S ONE SPEAKING TO THE ISSUES WE WERE JUST TALKING ABOUT. ON PAGE 11, LOOKING AT THAT CORRECTLY, THAT SHOWS THE TREND OF THE EMPLOYER CONTRIBUTION. IS THAT CORRECT?>> THAT'S THE

EMPLOYER RATES FROM FISCAL YEAR '10 TO '21.COMMISSIONERS WILL REMEMBER THAT THE EMPLOYER RATE CHANGE ON THE FISCAL YEAR WHICH IS JULY 1 FROM THE STATE WHERE THE EMPLOYEE CONTRIBUTION CHANGED WITH THE START OF THE PLAN YEAR ON JANUARY 1.>> THEN ON PAGE 10 OF 11, IT SHOWS THE EMPLOYEE CONTRIBUTION.>> ON PAGE 10 WOULD BE THE RATES '08 THROUGH '20 THROUGH EARLY RETIREE.PAGE 4 OF 11, FIRST PAGE OF THAT SET DOCUMENTS IT'S FOR YOUR ACTIVE EMPLOYEES.THOSE ARE PLAN DESIGN CHANGES HIGHLIGHTED IN YELLOW WHEN THEY OCCURRED.I'LL WALK THROUGH THESE REAL QUICK.THEN PAGE 5 OF 11 IS JUST CONTINUATION OF THAT PLAN DESIGN CHANGES.YOU'RE GOING TO GET WILL BE THE RATE.ON PAGE 6 OF 11, ACTIVE EMPLOYEES ACROSS THE TOP, THAT CHART, YOU HAVE THE PERCENT THAT OCCURRED IN AND THEN THE ACTUAL RATE DOWN IN THE BODY.>> GOING BACK TO THE COMMISSIONERS EARLIER COMMENT ABOUT THINKING BROADER AND MORE STRATEGICALLY AND THINKING ABOUT RATES SETTING AND UNDERSTANDING.THIS SET OF DOCUMENTS GIVE US THE INFORMATION TO SEE THE HISTORICAL PICTURE WHAT THOSE PERCENTAGES AND RATES HOW THEY MOVED ACROSS TIME AND WHERE WE ARE NOW.BOTH FROM THE EMPLOYEE AND THE EMPLOYER SIDE.AS WE DIGEST IT, IT WOULD BE FOR US TO HAVE THE MORE STRATEGIC CONVERSATION WHERE WE GO.NO -- NOW WE'RE STARTING WITH THE SAME SET OF INFORMATION AS AN UNDERSTANDING TO THEN THINK ABOUT WHERE SHOULD EBE AND WHAT ARE THE THINGS THAT WOULD IMPACT US.DOES THAT MAKE SENSE?I THINK THIS IS WHAT I WAS LOOKING FOR, WHERE DO I SEE THAT, WHERE DO I SEE THE PATTERNS AND THE TRENDS THAT HAVE MOVED.>> I WAS TRYING TO DO SOME PERCENTAGE FIGURING.MY BELIEF, CORRECT OR INCORRECT, HAS BEEN THAT THE NON-MEDICARE RETIREES PAY 100% OF THE COST OF THE PLAN.IS THAT CORRECT STATEMENT?>> YES.WE'LL FLIP TO THAT.WHICH IS PAGE 10.10 OF 11 WILL BE YOUR NON-MEDICARE RATES.THE EARLY RETIREES AND NON-MEDICARE RETIREES BY STATUTE IN KANSAS, PAY 100% OF WHAT THE PUBLISHED RATE IS.HISTORICALLY PUBLISHED RATE AND THAT'S WHEN SOME OF THE HIGHER CHANGES STARTED TO TAKE PLACE IN 2016 OCCURRED, HAD TO DO WITH THAT REPORT IN THE PREVIOUS MEETING.CAME IN.SO THE PUBLISHED RATE MAY HAVE BEEN \$10 A MONTH FOR THE RETIREE.THEY PAID THAT FULL \$10.THERE'S NO EMPLOYER CONTRIBUTION LIKE THERE IS WHEN WE'RE AN ACTIVE EMPLOYEE.WHEN ALL THOSE \$10 CAME IN FOR THAT PLAN AT THE END OF THE YEAR, HEALTH PLAN WAS PAYING OUT, \$10.05 ON EVERY MEMBER.THERE WAS A SUBSIDY ON THE BACK-END THAT THE REPORT RECOMMENDED TO GET RID OF.THAT'S WHEN THE COMMISSION MOVED TO NOW OVER THE ADJUSTMENT FROM LAST YEAR THEY WERE PAYING 100% TO COVER THE PREMIUM.IF THAT POOL HAS SHRUNK OVERTIME BECAUSE -->> MIGRATION PROBABLY>> WITH THOSE RATE INCREASES TOOK PLACE IN '16 AND '17.SUBSTANTIALLY INCREASED THAT RATE FOR THE MEMBERS AND MEMBERS BEGAN TO SHOP ELSEWHERE FOR THEIR SERVICES.THEREFORE THAT POOL HAS DIMINISHED.WHICH IS A DOUBLE NEGATIVE FOR THEM.THOSE THAT HAVE LEFT, STILL TRYING TO FUND THAT AT 100%.COST IS GOING TO INCREASE TO DO THAT. >> THAT'S GOOD INFORMATION.I WASN'T REALLY SEEKING TO GET THERE.BUT THAT'S OKAY.WHERE I WAS WANTING TO GET, I'M LOOKING AT PAGE 6 THEN PAGE 11.WHICH GIVES THE EMPLOYEE AND EMPLOYER CONTRIBUTIONS.I GUESS I WAS EXPECTING TO SEE THAT THOSE TWO NUMBERS ADDED TOGETHER SHOULD COME PRETTY CLOSE TO THE WHAT'S ON PAGE 10.THE AMOUNT PAID BY THE NON-MEDICARE RETIREE.SHE -- THEY DON'T COME CLOSE.I WAS LOOKING AT THE SINGLE TO GET AN IDEA.SO I CAN FIGURE, WHAT PERCENTAGE OF THE COST OF THE PLAN IS THE EMPLOYEE PAYING?WHETHER IT'S SINGLE OR EMPLOYEE AND SPOUSE OR EMPLOYEE AND OTHER DEPENDENTS.YOU UNDERSTAND WHAT I'M ASKING?>> LOOKING AT FISCAL '20, I EXPECT IF I TOOK THE \$606.88 THAT THE EMPLOYER IS PAYING FOR FULL-TIME EMPLOYEE ONLY COVERAGE AND ADDED THAT TO THE \$39, THAT EMPLOYEE ONLY PAYING ON PLAN A, THAT THOSE TWO TOGETHER

WOULD COME CLOSE TO THAT 978 THAT THE NON-MEDICARE RETIREE IS PAYING.>> PART OF THAT, YOU HAVE TO REMEMBER THAT YOUR LOSS RATIOS WILL BE DIFFERENT FROM THAT LARGE GROUP OF ACTIVE EMPLOYEES THAT HAVE ZERO DOLLARS IN CLAIMS COST OVER THE YEAR, VERSUS YOUR SMALLER GROUP WHEN YOU'RE RATING AGAINST THOSE CLAIM COSTS.I'LL LET PATRICK AND KEN JUMP IN TO SEE WHAT ELSE THEY HAVE TO ADD.PART OF THAT IS A FACTOR IN THERE>> NON-MEDICARE GROUP IS SPECIFIC GROUP WITH A DIFFERENT RATE.THEY'RE NOT THE SAME. >> WE ACTUALLY DO PROVIDE THEM THE RATE.WE DO A LOSS RATIO SO YOU CAN SEE WHAT PERCENTAGE THE EMPLOYEE PAYS.IT'S LITTLE MESSED UP BECAUSE THEY'RE ON DIFFERENT CYCLES.>> STILL, REASONABLY CLOSE, EVEN THOUGH THE CYCLES ARE 6 MONTHS OFF.>> WE HAVE THAT PLAN IN THE MODEL, MEDICAL BUILDUPS, WE HAVE THAT BREAKOUT.WE CAN EASILY GO OVER THAT NEXT TIME.>> PART OF THIS IS US LEADING TO INDIVIDUALLY AS COMMISSIONERS AND COLLECTIVELY, DO LITTLE BIT MORE OF A DEEP DIVE OF UNDERSTANDING AND PROVIDING SOME OF THAT BACKGROUND INFORMATION I THINK SOME THAT CAN COME FROM SEGAL AND STATE EMPLOYEE HEALTH PLAN OFFICE.MAY I ASK PLEASE FEEL FREE TO CHIME IN OR PUSH BACK.I LIKE FOR US TO TAKE THE OPPORTUNITY FOR EACH COMMISSIONER TO SPEND LITTLE BIT OF TIME WITH SOME OF THE DATA THIS THEY PUT TOGETHER ALREADY AND COMPOSE A SET OF QUESTIONS THAT YOU MIGHT HAVE OR AN ADDITIONAL PIECES OF DATA THAT YOU MIGHT HAVE THAT COULD BE SENT TO MIKE AND TO SEGAL.THEN TO HAVE EACH COMMISSIONER TOUCH BASE WITH MIKE SO THAT YOU'RE CLEAR IN YOU'RE GETTING YOUR ANSWERS.ANY QUESTIONS POSED BY ANY INDIVIDUAL COMMISSIONER WOULD BE SENT BACK OUT TO ALL COMMISSIONERS SO THAT EVERYONE HAS SIMILAR INFORMATION.WHAT I LIKE FOR US TO BE ABLE TO DO AT THE APRIL MEETING IS TO BE A BIT MORE INFORMED AND HAVE THE STRATEGIC CONVERSATION SO THAT WE'VE GOTTEN A BUNCH OF OUR QUESTIONS ANSWERED.WE'RE UNDERSTANDING THE DATA WE'RE LOOKING AT AND IN APRIL, WE HAVE A STRATEGIC CONVERSATION AND PREPARATION FOR JUNE OF MAKING SOME ACTUAL DECISIONS.I THINK FOR ME, KIND OF TRYING TO GO THROUGH SOME OF THIS, I THINK EACH OF US MIGHT HAVE AN INDIVIDUAL SET OF QUESTIONS AS WE PLAY WITH THE DATA.THAT MIKE CAN SIT DOWN WITH EACH OF US TO MAKE SURE OUR QUESTIONS ARE ANSWERED OR IF THERE'S ADDITIONAL DATA THAT NEEDS TO BE GENERATED.THERE'S SOME PIECES THAT SEGAL CAN CONTRIBUTE TO HELP US UNDERSTAND WHAT'S GOING ON PARTICULARLY IN THOSE PERCENTAGES AND WE COMPARE IT ACROSS STATE SO WE ALSO HAVE A SENSE OF WHERE WE ARE AND POTENTIALLY WHERE WE NEED TO BE.WE'LL SHARE ACROSS THE COMMISSIONERS AND THEN IF WE'RE PREPARED TO HAVE A SUBSTANTIVE CONVERSATION AN AGENDA ITEM FOR OUR APRIL MEETING SO THAT WE CAN REALLY SET STRATEGY AROUND WHERE WE MIGHT WANT TO GO IN RELATIONSHIP TO THE DECISIONS THIS YEAR.HOW DOES THAT FEEL TO MY OTHER COMMISSIONERS?>> I THINK IT'S A GOOD IDEA.>> I DID WANT TO ADD, COUPLE OF PIECES OF INFORMATION.READY FOR THAT?>> I WAS GOING TO SAY, I LIKE THAT IDEA.LOOKING AT IT MORE AND TALKING TO MIKE.ONE THING THAT WILL HELP ME WITH THIS INFORMATION, I WORRY ABOUT OUR STATE IN TERMS OF BEING ATTRACTIVE FOR PEOPLE TO STAY HERE AND FOR PEOPLE TO MOVE HERE.SEEMS LIKE HAVING A BENEFIT PACKAGE IN TERMS OF HEALTH INSURANCE, THAT'S ATTRACTIVE, WOULD MAKE SENSE FOR US AS A STATE.I'M CURIOUS, WHAT OTHER STATES DOING?HOW CAN WE MOVE THE NUMBERS?TO ME WHERE THE MEMBER BENEFIT RATIO IS SO LOW.THAT DISTURBS ME.I WANDERED, WHEN DID WE MOVE AWAY FROM THE THREE TIER THING?HOW CAN WE USE THE MONEY WE HAVE TO MIGHT IT -- MAKE IT BETTER TO PEOPLE?I DON'T KNOW THAT AND I CAN'T TELL BY LOOKING AT THE NUMBERS.>> WHEN YOU SAY STATES, I GUESS, ARE YOU TALKING ABOUT NEIGHBORING STATES OR ALL STATES?>> I GUESS I'M SAYING KANSAS, WE DON'T HAVE THAT MUCH APPEAL.I FEEL LIKE FOR US NOT HAVE AT LEAST AVERAGE FOR THE NATION

PARTICIPATION FROM FAMILIES AND THE HEALTH PLAN, ISN'T GOOD. I DON'T KNOW WHAT THE BEST THING IS AND MAYBE IN GENERAL ACROSS THE NATION. >> WE'LL DONE IN THE PAST, WE'LL DONATIONWIDE AND WE DO BAR CHART AND COMPARE. WE'LL DO REGIONAL AND STATES AROUND YOU. PEOPLE AREN'T MOVING TO OUR STATE BECAUSE OF THE BENEFIT PLAN. SOME STATES SAY, I GOT TO LOOK AT IT IN TOTALITY. THERE'S PAY, PENSION, ALL OF STUFF. HEALTH IS ONE LITTLE LINE ITEM. THERE'S LOT OF MOVING PARTS. WE CAN EASILY COMPARE THE HEALTH PLAN. OTHERS WE HAVE THAT DATA AVAILABLE. WE CAN SHOW YOU HOW THAT IS. YOU GUYS HAVE LOT MORE PEOPLE IN HIGH DEDUCTIBLE PLANS IN OTHER STATES. MOST STATE HAVE OPTIONS THAT'S REALLY NOT THE MAIN PLAN. IN INDIANA AND EVERYWHERE ELSE IT'S LIKE SLICED PLAN. LOT OF STATES GOTTEN RID OF IT. THEY DISCUSSED THEIR UNHAPPINESS WITH CONSUMER DIRECT PLAN. LOT OF STATES ARE ALMOST PUSHING AWAY FROM IT. IT DOESN'T MEAN THAT'S THE ANSWER. THEY'RE NOT AS HAPPY WITH IT. LOT OF IT HAS TO DO WITH LOT OF RISK FOR LOW PAYING PEOPLE. THEY DON'T REALLY RECOGNIZE THERE'S A BIG GAP WHEN YOU HAVE A BIG CLAIM. LOT OF PEOPLE MIGRATE WITH LESS EXPENSIVE PLAN. THERE'S A LOT OF EXPOSURE. SOME PEOPLE THINK IT'S NOT THE BEST PLAN FOR THEM. WE ONLY HAVE SO MUCH MONEY TO PUT IN A PROGRAM. IF YOU GO BACK TO THE SURVEY, EFFICIENCY REPORT, THEY WERE ALL ABOUT CONSUMER PLANS. WHOLE THING WAS THAT DRIVE. THEY WERE SAYING GET RID OF THE A PLAN BACK THEN. COMMISSION AT THAT POINT SAID, WE'RE NOT DOING THAT. WE'RE NOT GOING TO GET RID OF IT. THAT'S WHY WE LOOK AT THE PLAN, LET'S JUST CURATE LITTLE BIT SO PEOPLE MIGRATE AWAY FROM IT. THAT'S A COMMISSION DECISION. WHAT KIND OF PROGRAM YOU WANT TO LOOK LIKE? IT DOESN'T HAVE TO BE LIKE IT IS NOW. YOU CAN DESIGN THE PROGRAM HOWEVER YOU WANT TO DESIGN IT. YOU HAVE OVERLAPPING WELLNESS PROGRAM THAT YOU HAD IN PLACE FOR YEARS. YOU LIKE THAT STRUCTURE, YOU WANT TO EXPAND IT. YOU WANT TO TARGET DISEASE CATEGORIES. YOU WANT TO GO AFTER ALL THE DIABETICS. THERE'S A LOT OF DIFFERENT MOVING PARTS. I THINK THE TARGETED PROGRAMS ARE VERY POPULAR IN OTHER STATES NOW. EVERYBODY TRYING TO DO -- GOING AFTER DIABETES IS HUGE EVERYWHERE. IT'S JUST AN ISSUE EVERYWHERE AND EXPANSION OF IT. THERE'S DEFINITELY KIND OF THINGS TO THINK ABOUT. >> I THINK THERE'S A BEGINNING THE COMMISSIONERS WOULD APPRECIATE ANY OF THE KIND OF BENCHMARKING DATA THAT YOU HAVE AVAILABLE. OF SO OF THOSE TREND INFORMATION AND SOME OF THE COMMISSIONERS MAYBE LITTLE BIT MORE VERSE THAN OTHERS. I SEE SOME OF WHAT YOU ALL PREPARED. I THINK EVEN THAT WILL HELP GIVE SOME BENCHMARKING. OUR STATE IS DIFFERENT. THERE'S OTHER FACTORS AND THERE'S MANY DIFFERENT THINGS. TRYING TO GET US FROM A STARTING BASE OF SIMILAR INFORMATION THAT WE CAN ASK STATE SPECIFIC QUESTIONS, I THINK IT WOULD BE HELPFUL AS WELL. I KNOW WITH THE ABSENCE OF COMMISSIONER SCHMIDT, I KNOW SHE HAS QUESTIONS IN THIS AREA. THIS WILL GIVE HER TIME TO ASK ADDITIONAL QUESTIONS THAT WILL BE HELPFUL ACROSS AS WELL. >> COUPLE OF THINGS I WANT TO MENTION, IT'S BEEN OUR INTENT FOR SEVERAL YEARS TO PROMOTE MIGRATION FROM PLAN A TO PLAN C. AS YOU MENTIONED, AT THE SAME TIME, WHEN THERE WAS PUSH TO ELIMINATE PLAN A, WE SAID NO. I THINK HEATHER SPEAKS TO THAT. OFFERING THAT TYPE OF PLAN THAT FITS FOLKS THAT WANT A TYPE OF PLAN. I THINK THAT'S A DECISION TO EITHER CONTINUE TO CHANGE. THERE'S BEEN AN INTENTIONAL EFFORT TO HAVE FOLKS MOVE TO PLAN C. NOT BECAUSE IT'S CHEAPER BUT THE IDEA OF PROMOTING MORE CONSUMER BEING ACTIVELY ENGAGED IN MAKING DECISIONS AND NOT JUST MY PLAN IS GOING TO PAY 80% OR 90% OR WHATEVER AND BE DONE WITH IT. OTHER THING I WANTED TO MENTION, WE ALSO MADE A DECISION TO ACTIVELY ENCOURAGE SPOUSES OF EMPLOYEES TO LOOK AT THEIR EMPLOYER'S PLAN. IT WAS FELT AT THAT TIME THAT THE STATE PLAN WAS PRETTY RICH AND WE WERE HAVING FOLKS STAY WITH THE STATE PLAN AND AS A MATTER OF FACT, I SHARED THAT -- I KEPT

MY WIFE ON MY STATE PLAN THE WHOLE TIME BECAUSE IT WAS CHEAPER AND MORE BENEFICIAL PLAN THAN HER EMPLOYER'S PLAN. OUR INTENT WAS TO ENCOURAGE SPOUSES TO LOOK AT THEIR EMPLOYER'S PLAN AND NOT UNDERWRITE FOLKS WHO HAVE THEIR OWN EMPLOYER? THOSE WERE COUPLE OF DECISIONS, THE SPOUSE ENCOURAGING SPOUSES TO LOOK AT THEIR OWN EMPLOYER MORE RECENT, ENCOURAGE MIGRATION OF PLAN C HAS BEEN PROBABLY 5 TO 8-YEAR PROCESS. I WAS ENCOURAGED TO SEE THAT WE FOR THE FIRST TIME, WE HAD LESS THAN 60% OF FOLKS ON PLAN A. I THINK THAT PLAN C DOES ENCOURAGE PEOPLE TO BE ACTIVELY INVOLVED IN THE MEDICAL DECISIONS AND WHAT NOT. IT'S NOT FOR EVERYBODY. I RECOGNIZE THAT. THERE NEEDS TO BE, FROM MY OPINION, THERE NEEDS TO BE THE OPPORTUNITY FOR FOLKS TO CHOOSE. >> SOME PEOPLE DIDN'T DO IT BECAUSE THEY ARE MORE ACTIVELY INVOLVE THIS THEIR HEALTHCARE. THEY DID IT BECAUSE VERY MUCH CHEAPER. THEN YOU GOT PEOPLE WHO I WENT WITH THIS BECAUSE IT'S CHEAPER. NOW I'M IN MEDICAL BANKRUPTCY BECAUSE I DIDN'T THINK ABOUT THE COST IF I HAD A MAJOR MEDICAL EVENT HAPPEN. I DON'T WANT TO HAPPEN TO PEOPLE EITHER. >> THAT'S WHERE THE MORE EDUCATION WE CAN DO. YET, AT THE SAME TIME, MY OPINION, WE CAN'T PROTECT EVERYBODY FROM THEMSELVES. THERE'S CERTAIN AMOUNT OF RESPONSIBILITY THAT LIES WITH ME AS AN INDIVIDUAL TO MAKE A DECISION. WHEN I MIGRATED FROM A TO C, I WAS DISAPPOINTED THAT I HAVEN'T DONE IT 10 YEARS EARLIER. I DID WHAT HEATHER JUST TALKED ABOUT. WHAT IF THERE WAS A TREMENDOUS EVENT HAPPEN. WHAT IMPACT WOULD THAT HAVE? EACH OF US NEED TO MAKE THAT DECISION AND GO THROUGH OUR OWN -- ANYWAY. THOSE TWO ITEMS THE SPOUSE AND THE MIGRATION TO PLAN C. >> WHAT I WOULD ASK IS THAT WE DO THE FOLLOW-UP IN THIS PARTICULAR AREA. I WILL REACH OUT TO EACH COMMISSIONER AND ENCOURAGING TO WORK THROUGH THE DATA THAT'S HERE AND TO PROVIDE TO MIKE AND HIS TEAM AND THE SEGAL TEAM ANY ADDITIONAL QUESTIONS THAT YOU MIGHT HAVE AROUND THIS DATA AND THEN WE CAN -- HE CAN DO THOSE INDIVIDUAL TOUCH BASE, DEEP DIVE INTO THE DATA, SHARE ANY ADDITIONAL QUESTIONS AND DATA THAT WAS GENERATED OUT OF THAT PROCESS AS WE PREPARE TO COME BACK TO THE APRIL MEETING FOR A MORE STRATEGIC CONVERSATION OF WHERE WE NEED TO GO ASKING OUR PARTNERS AT SEGAL TO PROVIDE IN THAT IN BETWEEN PERIOD, ANY BENCHMARK DATA YOU THINK WILL BE HELPFUL AS WE TRY TO UNDERSTAND OUR DATA PARTICULARLY ACROSS THE HISTORIC PERIOD OF TIME THAT WE'RE LOOKING AT. I WOULD LIKE TO MOVE US TO DISCUSSION AT THIS TIME ON THAT ITEM TO MOVE US THROUGH OUR OLD BUSINESS AS QUICKLY AS WE CAN.

[CAPTIONERS TRANSITIONING, PLEASE STAND BY]

WE'RE GOING TO MOVE INTO NEW BUSINESS. THIS IS MY ITEM FOR PRESENTING. MIKE CAN CHIME IN. THE GOVERNOR SUBMITTED THESE EXECUTIVE REORGANIZATION ORDER NUMBER 45 ON JANUARY 30TH. IT IS THE TRANSFERRING OF THE FUNCTIONS OF THE STATE EMPLOYEE HEALTH BENEFITS PLAN AND THE STATE WORKERS COMPENSATION SELF-INSURANCE FUND THAT'S CREATED WITHIN THE DEPARTMENT OF ADMINISTRATION. IT IS -- COMMISSIONER RED RECEIVED A COPY OF THE E.R.O. IT IS LITERALLY PICK UP THE OFFICE AND MOVING IT OVER AND NOT CHANGING ITS ORGANIZATION, NOT CHANGING ITS BUDGET. IT IS TAKING ALL OF ITS FUNCTION. ITS STAFF, ITS EMPLOYEES AND IT IS REORGANIZING IT IN THE DEPARTMENT OF ADMINISTRATION. I DID TESTIFY ALONG WITH SECRETARY NORMAN ON THIS ERO EARLIER THIS MONTH. IN WHICH WE BOTH EXPRESSED THAT THE DEPARTMENT OF ADMINISTRATION IS BY ITS NATURE, WHERE WE SERVE BOTH EMPLOYEES AND AGENCIES BY OUR FUNCTION. THAT WE BELIEVE THAT THESE TWO OFFICES ARE MUCH BETTER FIT IN TERMS OF THEIR OVERALL MISSION AND THEIR EXECUTION WITHIN THE DEPARTMENT OF ADMINISTRATION. WE'LL

CONTINUE TO STRENGTHEN THE WORK THAT HAPPENS IN THAT SPACE. THIS SITS WITH THE LEGISLATOR. IT IS RUNNING ON THE WAY THAT EXECUTIVE REORGANIZATION ORDERS WORK. ONCE THEY ARE INTRODUCED, THEY MOVE THROUGH VARIOUS COMMITTEES AND THEN HAVE ALMOST LIKE A CLOCK ON THEM SO NO ACTION IS TAKEN DURING THAT PERIOD OF TIME, THEY BECOME EFFECTIVE AT THE BEGINNING OF THE NEXT FISCAL YEAR. AS OF NOW, THIS HAS BEEN HEARD INTO COMMITTEE, BOTH COMMITTEES PASSED IT THROUGH. AT THIS TIME, WE ARE WAITING FOR THAT CLOCK TO SEE IF THERE WILL BE ANY ADDITIONAL ACTION ON THIS ITEM. THAT CLOCK EXPIRES ON MARCH 30TH. IF THERE'S NO LEGISLATIVE ACTION TAKEN AGAINST THIS EXECUTIVE ORDER EFFECTIVE JULY 1, PART OF THE AGENCIES WOULD BECOME PART OF THE DEPARTMENT OF ADMINISTRATION. WE WANT TO MAKE SURE THAT ALL THE COMMISSIONERS WERE AWARE OF IT, HAD SEEN THE ERO, IT WILL CHANGE NOTHING IN THE MANNER THE WAY IN WHICH YOU ENGAGE WITH THE STATE EMPLOYEE HEALTH PROGRAM. IT'S A REORGANIZATION OF THAT OFFICE INTO THAT DEPARTMENT OF ADMINISTRATION. ANY QUESTIONS OR COMMENTS FROM THE COMMISSIONERS? >> JUST CURIOUS, JUST THE MOTIVATION TO MAKE THAT CHANGE. >> ONE OF THE THINGS IT WAS GOING BACK TO THE AMN STUDY. IT WAS A STUDY THAT WAS FEW YEARS BACK. EVEN MORE SO FOR MYSELF AND WITHIN THE DEPARTMENT AND CONVERSATIONS WITH THE SECRETARY NORMAN, THE NATURE OF THIS OFFICE AND THE WORK THAT IT DOES IT'S MUCH MORE ALIGNED AND THE SERVICES IT PROVIDE TO STATE EMPLOYEES IN GENERAL AND TO STATE AGENCIES. I WANTED TO FORMALLY PUT IT ON THE AGENDA AND GET DATA AROUND THIS CONVERSATION. LAST YEAR WE WERE ALMOST TOO LATE. THEY CAN FORMALLY PULL AND MAKE SOME CHANGES EARLIER ENOUGH ON TO IMPACT PLAN YEAR 21. I DON'T KNOW IF YOU HAVE ANYTHING ADDITIONAL ON THIS ITEM. >> I DO NOT, AND, AGAIN, WHEN INTERESTING TIMING THINGS THAT HAPPEN WITH NEW EMPLOYEE WAITING PERIODS. SO THERE IS TECHNICALLY A 30-DAY WAITING PERIOD, BUT BECAUSE OF THE WAY IT'S PROCESSED, IT CAN BE 30 DAYS OR 58 DAYS BECAUSE OF THE TIMING WHEN A PERSON STARTS AND IT KICKS IN AND THE 30-DAY CLOCK. I ADDED THIS AS A NEW BUSINESS ITEM BECAUSE I WOULD LIKE FOR MIKE'S TEAM TO PULL SOME INFORMATION SO THE COMMISSIONERS ARE AWARE AND SEE IF WE CAN HAVE A CONVERSATION REGARDING OUR CURRENT PROCESS AND PRACTICE, AND IF THERE ARE THINGS I GO THROUGH THE SECOND, OR IF MAYBE PAY-PERIOD TIED, WHAT ARE SOME OF THE OPTIONS, AND WHAT ARE SOME OF THE IMPLICATIONS AS FAR AS COST, PROCESSING, SOME OF THOSE THINGS, SIMILAR TO THE CONVERSATION YOU ALL HAD LAST SUMMER ABOUT THAT EMPLOYEE THAT WAS SEPARATING, I WANT TO MAKE SURE WE ARE THINKING ABOUT THAT EMPLOYEE THAT'S COMING IN AND MAKING IT ADVANTAGEOUS FOR THEM, AND SO PUTTING IT HERE SO WE CAN BEGIN TO GET SOME OF THAT BACKGROUND DATA, HAVE AN UNDERSTANDING OF IT, AND THEN IF THE COMMISSION FEELS THERE IS AN ACTION THAT NEEDS TO BE TAKEN WHERE WE CAN MOVE FROM THERE. >> WHAT WAS THE REASONING FOR MAKING THEM WAIT 30 DAYS VERSUS DATE OF HIRE? >> THE CHANGE PROBABLY OCCURRED '11, '14 -- IT USED TO BE A 90-DAY WAIT. >> I HAD TO WAIT 90 DAYS. >> AS FAR AS THIS PROCESS, IT'S THE FIRST OF THE MONTH FOLLOWING THE QUALIFYING EVENT, AND THAT'S JUST WHAT -- THAT'S IN REG. WE MOVE FORWARD WITH THAT. WE'LL MAKE A REG CHANGE ON THAT. THAT'S PART OF WHAT WE'LL RESEARCH FOR THE COMMISSIONERS TO -->> I MEAN, IS IT DOABLE TO DO AFTER THE FIRST PAY PERIOD? I KNOW YOU DON'T GET PAID, USUALLY, FOR LIKE A MONTH, BECAUSE THE STATE'S TWO WEEKS BEHIND, BUT IS IT DOABLE TO -->> I THINK WE SHOULD EVALUATE. >> YES, WHAT ALL IS VIABLE, AND FOR EACH VIABLE OPTION, WHAT'S THE IMPACT ON COST, WHAT'S THE IMPACT ON THE EMPLOYEE, IN TERMS OF THE IMPACT ON PROCESSING, BECAUSE THERE'S ALSO SOME REALITIES OF MAKING SURE WE UNDERSTAND -->> RIGHT, DOABLE, BECAUSE IT'S DONE RIGHT

AFTER TWO -- BECAUSE I KNOW THAT'S A LOT OF PAPERWORK, AND A LOT OF PROCESSING, AND A LOT OF THINGS THAT GO INTO IT. >> AND I THINK FOR ME AND FOR THE SAKE OF, KIND OF, THE CONVERSATION, TO WANT TO MAKE SURE WE'RE DOING ALL THAT'S POSSIBLE, UNDERSTANDING THAT, YES, THERE ARE REAL IMPLICATIONS FOR THAT BEING DIFFERENT, AND THERE MIGHT BE A PROCESSING IMPLICATION. THAT DOESN'T MEAN THAT'S NOT A DECISION WE WOULD FOLLOW. IF NOT, THE IMPACT ON THE EMPLOYEE IS GREATER THAN THE PROCESSING IMPACT, BUT I WANTED TO BE CAREFUL BEFORE BRINGING SOMETHING BEFORE THE COMMISSION AND SAYING HEY, LET'S JUST MAKE IT DAY ONE, BECAUSE THERE ARE ALSO IMPLICATIONS FOR DAY ONE FROM AN EMPLOYEE STANDPOINT AND THEN MAKING A SELECTION AND THOSE TYPES OF THINGS, SO I WANT US TO LOOK ACROSS ALL OF THOSE AREAS SO THAT -- THEN I THINK WE CAN MAKE AN INFORMED DECISION. MY CONCERN IS HOW THIS WAS GENERATED, THAT QUALIFYING EVENT IN THE 30 DAYS, AN EMPLOYEE STARTS ON THE 2ND OF THE MONTH, THE QUALIFYING -- IT DOESN'T HAPPEN UNTIL, SO IF THEY STARTED NOVEMBER 2ND, YOUR THOUGHT MAY BE, OH, THEIR INSURANCE KICKS IN ON DECEMBER 2ND. WELL, IT DOESN'T. DECEMBER 1ST ACTUALLY STARTS THEIR CLOCK. SO IF THEY HEALTHCARE ISN'T ACTIVE UNTIL JANUARY 1ST, AND THAT IS ALMOST TWO FULL MONTHS, AND I DON'T THINK THAT'S THE INTENT OF HOW THE POLICY WAS SET UP, AND SO THAT'S WHY I WANT US TO MAKE SURE WE'RE EXPLORING WHAT'S VIABLE, AND, YES, IT WOULD TAKE A REGULATION CHANGE, BUT IF IT WOULD BE ADVANTAGEOUS TO THE EMPLOYEE, IT'S WORTH MAKING THAT CHANGE VERY SIMILAR TO WHAT YOU ALL DID LAST SUMMER FOR SEPARATING EMPLOYEES. >> BECAUSE WE MADE IT BACK TO THE END OF THE MONTH, CORRECT?>> CORRECT. >> WITH THAT, IS THERE ANY OTHER NEW BUSINESS ITEMS THAT ANY COMMISSIONER WOULD LIKE TO PUT ON THE TABLE FOR US TO RESEARCH, BRING BACK UP, HAVE CONSIDERATION FOR? SEEING NONE, OUR NEXT MEETING IS APRIL 13TH. >> OR THE WEEK OF. >> OR THE WEEK OF IF WE FIND THAT WE RUN INTO A CONFLICT. WITH THAT, ARE THERE ANY OTHER ISSUES, COMMENTS FROM ANY OF THE COMMISSIONERS? >> WERE WE GOING TO SET A DATE?>> IT'S NOT SET. IT'S NOT SET. WELL, THEN, LET'S DO THAT. UM IT IS SET FOR THE WEEK OF APRIL 13TH. >> I WOULD PROPOSE THE 13TH IF IT'S A DATE THAT'S GOOD FOR ALL OF US.[INDISCERNIBLE] I DON'T KNOW IF THAT HAS AN IMPACT OR NOT. >> I DO HAVE A DIRECT CONFLICT. HOW DOES FRIDAY THE 17TH WORK? >> THAT WORKS. >> THAT WORK? WE WOULD HOLD THE SAME TIME AND LOCATION, AND SO IT WOULD BE THE AFTERNOON STARTING AT 1:30 IN THIS LOCATION, IN OUR BOARD ROOM LOCATION. WE HAVE COMMISSIONER NOT HERE, WE WILL CHECK THAT SHE DOES NOT HAVE A MAJOR CONFLICT, BUT SEEING NONE, WE WILL MAKE IT A 1:30 START ON APRIL 17TH HERE IN THE BOARD ROOM. WITH THAT, SEEING NO OTHER BUSINESS BEFORE THIS BODY, I WILL MOVE TO ADJOURN THIS MEETING. THANK YOU.