

**CITY OF HENDERSON  
SELF-FUNDED INSURANCE COMMITTEE MEETING**

**MINUTES  
June 13, 2012**

**I. Call to order**

Chairman Fred Horvath called the City of Henderson Insurance Committee meeting to order at 10:12 a.m., in the Westgate Conference Room, 1<sup>st</sup> Floor, City Hall, 240 Water Street, Henderson, Nevada.

**II. Confirmation and posting**

Ms. Neilson confirmed the meeting had been posted in accordance with the Open Meeting Law by posting the agenda three working days prior to the meeting at City Hall, Multigenerational Center, Silver Springs Recreational Center, and Fire Station No. 86.

**Roll Call**

PRESENT: Chairman Fred Horvath

Connie Kershaw  
Norm "Doc" Halliday  
Priscilla Howell (left at 1:35 p.m.)  
Tim O'Neill (left at 12:30 p.m.)  
Dan Pentkowski  
Sean Simoneau (left at 12:30 p.m.)

ABSENT: Jayne Mazurkiewicz

STAFF: Bob Osip, Risk Manager  
David Hintzman, Assistant City Attorney  
Alysa Neilson, Employee Benefits Coordinator  
Tedio Jackson, Minutes Clerk

ALSO PRESENT: Bill Bixler, The Loomis Company  
Shawn Adkins, Gallagher Benefit Services  
Pam Levy, Sierra Healthcare Options  
Thomas Chiello, HPSA  
Judy Schulz, COH retiree

**III. Acceptance of Agenda**

(Motion) Mr. Pentkowski introduced a motion to accept the agenda as submitted, seconded by Mr. Halliday. The vote favoring approval was unanimous. Chairman Horvath declared the motion carried.

**IV. Approval of Minutes**

**A. Regular Meeting of May 9, 2012**

Page 2, Item D, 2011 should be changed to 2012; and 2.5 hospital stays should be changed to 2.5 hospital days.

Page 2, Item B, \$255,943.00 loss year to date should be changed to \$235,000.00.

Page 3, last sentence in the last paragraph change “genetic” to “generic.”

(Motion) Mr. Pentkowski introduced a motion to approve the minutes of May 9, 2012, as amended, seconded by Mr. O’Neill. The vote favoring approval was unanimous. Chairman Horvath declared the motion carried.

**V. Staff Reports**

**A. Financial Report**

Connie Kershaw, Accounting Manager, distributed and reviewed the financial report as of May 31, 2012. She noted that the loss only increased by \$20,000.00 this month and the recent increases in dental claims has slowed down.

**B. Loomis Monthly Claims Report**

Bill Bixler, The Loomis Company, reviewed the monthly claims report and noted that there was a new large claimant in May for \$65,000.00. He noted that dental claims have decreased and he will begin tracking the number of claims submitted by Delta Dental.

Shawn Adkins, Gallagher Benefit Services, commented that it is important to keep in contact with the stop loss carrier regarding any additional retirees who come onto the plan.

Chairman Horvath asked Mr. Bixler to create a document outlining medical claims, both billed and allowed, including a summary document for a six-month time frame.

**D. Sierra Healthcare Options Report**

Pam Levy, SHO, distributed and reviewed the 2012 monthly average length of stay report through May and noted there were 2.88 hospital days in May.

**E. Status Report - Gallagher Benefit Services**

Shawn Adkins, GBS, commented that the Supreme Court decision regarding Patient Protection and Affordability Care Act (PPACA) should be released next week. Depending on whether the health bill is rejected, the committee will need to discuss undoing some of the issues that were mandated.

Mr. Adkins reported that the changes adopted for Express Scripts at the last meeting cannot be put in place until August 1, 2012. There was a consensus of the committee that it is okay to use three months of free prescriptions as an incentive for members to switch to a generic PPI.

As a reminder, Mr. Adkins noted that they are preparing a report for the August meeting for use in establishing 2013's rates. He also mentioned that that adult orthodontics is still an option for the committee to add as a benefit.

**F. Committee Staff Report**

Bob Osip, Risk Manager, referred to the flexible spending accounts and reported that any carryover from Plan Year 2012 into 2013 will not count against the new limit of \$2,500.00 per federal guidelines.

The updated Plan Document will be completed on June 1, 2012, and an electronic copy will be posted on the website.

Mr. Osip reported that UCLA claims amount to \$2,000.00 year to date. He noted that a non-PPO facility in Utah is offering a 22-percent discount off billed charges after a member had surgery at that facility. A lengthy discussion ensued regarding whether these facilities will save the plan money, the member money, or both. There was a consensus to draft agreements with such companies if it is beneficial to the plan.

Chairman Horvath commented that the Mayo Clinic wants to develop business in Las Vegas.

Mr. Osip stated that the geneticist cannot attend the July meeting so he will be rescheduled for the August meeting.

Alysa Neilson, Employee Benefits Coordinator, reported that a member recently switched to Delta Dental and is now paying \$100.00 more out of pocket. This member would like to switch back to the City Self-Funded Dental Plan midyear.

Following a discussion that employees were provided information through several workshops regarding the benefits of switching to Delta Dental, there was a consensus that employees should take responsibility for their actions and must wait until open enrollment in January to change back to the City Self-Funded Dental Plan.

**VI. Public Comment**

Judy Shultz, City of Henderson retiree, commented that both her dentist offices told her to stay with Sierra for dental coverage. She agreed that employees should be responsible for their actions.

**VII. Unfinished Business**

**A. Presentation on Medicare and aggregator services.**

Robin Wynne, representing Extend Health, reviewed presentation in the backup material and highlighted the following topics: Medicare Exchange, Extend Health services and history, change management, implementation timeline and requirements, comprehensive communication strategy, a financial analysis, plan access and choices, and a 2012 cost summary.

Responding to a question regarding how Extend Health is compensated, Mr. Wynne said they are paid on a fixed commission structure.

Note: A lunch recess was taken from 12:27 p.m. to 12:50 p.m.

Note: Shawn Simoneau and Tim O'Neill left at 12:30 p.m.

**B. Discussion and vote regarding coverage for post 65 Medicare retirees.**

Shawn Adkins, GBS, reviewed the Medicare 101 packet regarding Part A, Part B, Part C, Part D, group retiree trends, group retiree risks, group retirees alternatives, Medicare Supplement (Medigap), Medicare Advantage, and plan considerations.

It was noted that if all retirees sign up for Senior Dimensions, it would save the Plan and the retiree money. Due to the absence of several committee members, this item was continued to the next meeting.

**C. Discussion and vote on the Self-Insurance Health Plan committee Bylaws.**

This item was continued to the next meeting.

**D. Discussion and vote on retiree pricing.**

This item was continued to the next meeting.

**E. Discussion and vote on contracting with the Hospital Coalition.**

This item was continued to the next meeting.

**VIII. Staff Comment**

A brief discussion ensued regarding more issues on genetic testing

**IX. Set Next Meeting Date and Adjournment**

The next meeting was scheduled for July 10, 2012, from 10:00 a.m. to 1:00 p.m.

Note: Following this meeting, the July 10, 2012, meeting was cancelled.

There being no further business to come before the Committee,  
Chairman Horvath adjourned the meeting at 1:42 p.m.

Respectfully submitted,

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Tedie Jackson, Minutes Clerk