

HBC 8.11.23 Minutes

Cathy Haskell, Judy Stafford, Tara Salaicis, Vanessa Tonn, Blair Howard, Victor Lagunes, John Campbell, Carrie McCloud, Laura Juanitas, Wendy Lewis, Debra DeSpain (Keenan), Gordon Fung (Keenan)

Six retirees asked to speak during public comment.

Carol Curringa: former counselor and DTA member, been working for insurance to get better coverage for a long time. Asking to stay with CalPERS. Largest bargaining in the county, provide advocates, can still be covered if out of state. Consultants also sell insurance.

Deters people from seeking help if needed

Richard Hyland (?) - retired teachers, Econ 101, all companies are in business to make money. Risk factor, premium changes based on the number of employees  
Risk is spread over everyone. My retirement is \$2,100/month. Still paying a mortgage.

Practice to give \$151/month given to Pers, we retired based on the fact that this would be provided. It is illegal and unfair.

Angie Nuctelli - Kenan and conflict of interest. We hear next week's meeting is canceled, would like to know why

Reading for Flo: Too ill to attend, my health insurance matters more to me that I can communicate, to choose my own doctors, these are now affordable under PERS, continue the current health plan

Margaret Nue: Retired music teacher, the timeline listed on the agenda for today has me worried, how will DTA inform it's members, how do they know what they are voting on. Members do not know a thing about what is going on. Many consequences, cannot return for 5 years. Is the vote simply a yes or no? Most concerned about the timeline and the amount of info given.

I agree our economy has not recovered from the pandemic, is healthcare going to follow home insurance. No UCD doctors on the list. Not a good time to change. WE have given a lot, and in the meantime we are being asked to give up. In a fragile state right now.

Rich Hyland: 40 years ago we went to CalPERS, we took a year to study going to PERS. Meetings at District and association levels. Seems there is an attempt to split out retirees from the group.

Concluded public comment.

LJ: Want to be able to decide as a committee what we want to do, will be voting.  
Debra has recommendations for us to review

If we have time we will look at Kaiser plans

We as a committee need to learn what we are doing, retirees will be at the end of the process, \

If we stick to the potential timeline, we are on a very tight timeline. Feeling a lot of stress.

Use August, September and October to look at the buckets of plans available.

January - April : full court meeting with associations and retirees on what has been narrowed down. We would like to do the voting in May before we leave for the summer.

There will be new insurance rates coming next summer.

Will discuss before the vote.

Judy S.: Concerning that there is not a PPO program showing yet. I have been able to get care I need. No deductible, just copays.

VL: The committee formed in the fall, there has been a lot of learning, understanding demographics. Our active members do know about this, we have done a lot of notification, but there has not been a lot of "meat" to give our members. We are not there yet. Much more comfortable with the second option.

TS: I pretty much echo what Victor said, taking another year will help us bring better to staff.

ALT/Conf, CSEA, DTA are all #5 on Fully Recommend the Decision

LJ: Debra will provide a high level of proposals that we have received so far.

PPO plans might take longer

Any retiree less than 65 would be on a active plan

December 13 would be a catch up day or final decision.

Come up with bundles to share with employees. We will be fluid with the meetings.

Debra: Participation and Waivers is sometimes a deterrent

Review of Participation

CalPERS Renewal

Kaiser is increasing rates by 11.78%

Suspect there will be an increase in utilization for next couple of year, with some increases

LJ: Through negotiations, we cannot keep up with meeting the minimum to cover single payer only, talking about financial planning

BH: We have always found it difficult to keep up

We do have PPO plans to look at and also have UCD

Might be worthwhile considering another survey  
May want to survey prior to our education outreach  
Not going to get a full network proposal, won't provide a direct proposal on district's coming out of PERs.  
CalPERS is an off the shelf plan

CCCSIG - Contra Costa County  
San Mateo County Schools Insurance Group

Every year you are going to pick a couple of plans, the first year especially will be a huge change.

There is always open enrollment, still have the same plan, just have to decide which provider you want

Would always include retiree plans.

10:30 - go into the kaiser options

I am going to pay premium every month, when I look at it am I going pay the same  
Very costly to look at that not everyone can afford the high level

Option A-F is making changes to your lookalike plan

Does Kaiser have a + child option? Kaiser, +1 or Family

Kaiser Direct - no access to WHA - Dignity  
Alliance covers UCD with existing patients  
Advantage

Sounds like we will need to do CCCSIG or San Mateo, PPO plans and rates are identical

If we were going to vote, I would say we do it at the next meeting.  
We will be keeping Kennan on for an additional year and get information out the committee

If we can have the app available, it is a 90 day roll out.

Even if people are getting the info in January we can look into that.

Will resend the Benefit Bridge information to Laura

Will streamline the PPO

If you are in agreement for me to put together a packet of what would be my recommendation.

We are looking for a lookalike plan, a low deductible plan and then a mid-level plan

Assuming our lookalike is a lookalike of what we have now.

Basically our surveys are cost vs coverage

Is it co-pays?

Deductible?

This is our opportunity to really target things that really matter to people

Do a survey with real life examples

The co-pay is not as stressful as the deductible

Next meeting will be Kaiser recommendations