# Clackamas County Benefits Review Committee Meeting Summary for August 8, 2024

This document is intended to be a meeting summary. These meetings are recorded.

**Voting Members Present**: Bob Skinner, Fred Yungbluth, Alex Gonzalez, Greta Nickerson, Jennifer Harvey, Deena Mehdikhan, Gretchen Pacheco, Jon Santana, Paula McDonald, Rob Sadowsky, Lauren Haney, Ryan Miller, Rachelle Bonsi, Darrel Mally

Voting Members Not Present: John Lee, Kristi Durham, Chuck Kearns, Ariel Owens,

Minutes: Toni McGarvey

Facilitator: Cory Mathews, Billie Hurley

Meeting Time: 1:30pm

### **Attendance and Minutes:**

Recordings will be provided upon request within one year of the meeting.

## **Mercer: Renewal Discussion:**

Mercer Presenter: Joe Bober

- Projections from last meeting: Providence coming in at a 2.4% increase; Kaiser is coming in at 13.7% increase option of a \$350 deductible increasing from \$250, OOP increasing from \$1000 to \$1500 got to a 5.6% overall increase.
  - With no plan changes 6.8% across the board, and employees would have to pay the difference above 5%
    - Weighing options of increasing copay, office visit copays, Rx copays (generic, etc),
       Vision copays
- Greta would you expect to continue to see consistent increases over the next 5-6 years
- Joe yes. Two years in a row, costs have gone up. Above 5% would not be unheard of. The market is trending up.
- Greta as time goes on, we will continue to negotiate our way through changes to lower cost. Strategically, we'll continue to make changes and don't want to be backed into a corner.
- Bob most people with claims would be most impacted. Fewer people impacted that have regular care without claims.
- Billie hospital stays are the most impactful to the rate increases. For example, having a baby would
  get more expensive, but we could talk more about flexible spending and Aflac programs. Other options
  for paying the higher costs.
- Rob what would the impact be if Kaiser and Providence became closer in cost? Would we see a lower cost to be competitive long term?
- Joe not necessarily, but a shift in enrollment will likely happen. Claims and utilization. Kaiser is a little less than the personal option, but of the mix between families and single members, the composite rate is higher.
- Billie more new hires are choosing Kaiser because the cost is lower. If a member receives bad service or care, people might move to a different plan. If getting good service, people won't move. Model of service is completely different. The different plans provide more options.
- Joe yes, if you move between United Healthcare to Providence, there is a possibility that you can keep the same doctor. With Kaiser, if you move insurance providers, you have to change all that.

- Billie do we need to examine more options? More discussions? Is there an option we can rollout right now? We need decisions to be ideally made by the end of August so we can be prepared for open enrollment. We need to get in the vendor's que to get all plan summaries, rates from Joe, uploaded to the webpage (involving PGA). So we don't scramble to get in line with open enrollment.
- Joe also, if there needs to be a combination of the plans presented today, I'll need to bring those to the providers. How many options to combine, who is busy, who is in the 'que.'
- Toni we have meetings through the 12<sup>th</sup> of September.
- Greta I prefer not to mess with people's benefits as much as possible. With future years, we
- Gretchen I want to echo what Greta says not messing with out of pockets would be ideal, but there are a couple options she would like to discuss further.
- Rob something to communicate with the members, is if we did have additional costs, what would they be. Bottom line on rate sheet (in red) addressing the change in monthly cost to the [union] member(s).
- Joe We could say what the monthly cost would be on a composite basis.
- Cory any more suggestions for Joe? Joe, how many proposals for revisions are we discussing?
- Joe there are possibly three more scenarios/suggestions. Do we want a combination of any of these?
- Group consensus changing the outpatient rate would be the easiest change (least impact) to lower cost.
- Billie does everyone have enough information to go back to their members and get feedback?
- Bob I think Joe came to us with the best variety of options to decide as a group.
- Joe all options are close to the 5%. After this meeting, as asked, I can get overall blended increase and the monthly contribution would be on a composite basis, then I will send out the presentation back out tomorrow at the latest.
- Cory we can do a straw pull (not an official vote, non-binding) to see where everyone is at with the current options as presented.
- Alex I'd like to see a straw poll to get a sense of the room. (Also shares concerns that cost will
  continue to get higher and county will be backed into a corner to not change costs.)
- Joe can we play above 5% leeway than what was requested? More of the premium will be passed on to the employees.
- Rob some people are willing to pay an additional \$5 a month if it means the same benefits.
- Joe so I will not go back to Kaiser as I've met everyone's requests/needs?
- Cory does anyone have a different opinion on that? (no answer)
- Billie received confirmation a replacement for Eric Sarha as a voting member is Ryan Miller (introduces Ryan to the group). If a decision is not made by next week, we can cancel the meeting as this is our only action item. Please get feedback from membership and other stakeholders.
  - o Consensus indicates cancelling of 8/15/24 and 8/22/24 BRC meetings
  - Next meeting will be held on 8/29/24. Voting will occur if a quorum is present, which makes this
    potentially our last meeting of the BRC 2024 season.

### **Member Reports:**

Toni - Billie and I collected the vendor questions and have forwarded them (to Kristi and Joe) for review.

# **Meeting Adjourned:**

Cory Mathews adjourns the meeting at 2:3 6pm Next meeting: August 29, 2024