

AGENDA

Davis Joint Unified School District Health Benefit Committee Meeting

March 22, 2023

3:30pm – 5pm

1. Committee Members in attendance: Maria De Leon, Katie Herrick-Jasper, Laura Juanitas, Victor Lagunes, Carrie McCloud, Tim McCormick, Sande Royval, Tara Salaices, Julianna Sikes, Vanessa Tonn, Amari Watkins, Debra DeSpain
Committee Members absent: John Campbell, Blair Howard, Bob Kehr, Wendy Lewis,

Meeting start: 3:33 pm

2. Public Comment (15 minutes) – 3 community members, 3 minutes per person.
3. Discussion: adding one CSEA and one DTA retiree to committee (15 minutes)
 - CSEA on board with having a retiree on the committee. Have names but not confirmed with them yet.
 - DTA- revisit vote process – consensus model; adding retiree- how would it change the makeup for the vote. If we add, make sure all groups are represented- DTA, CSEA, ALT/confidential then retiree.
 - What do people think of that thought- convoluted if retirees have a separate vote because they follow their unit (DTA is out so then their retirees are as well). Giving them a separate vote does not work, they should be an advisory for their group.
 - Option to be advisory and not have a vote.
 - How serious this decision is especially with the 5-year time line if we choose to leave CalPERS.

Ready to vote? we are recommending that retirees as a group have representation on the health benefit committee as advisory but non-voting member group.

- Caucus at 3:54 pm for groups to discuss (CSEA, DTA and ALT/Confidential).
Resume 3:59 pm

- Vote: CSEA – 5; ALT/Confidential – 5; DTA – 4. **Vote Passes**

Do we want to decide how many of each group be on the advisory?

- Should have a retiree from each group is recommended and what we strive for but not mandatory.
- Consensus as a group as retirees and not with their former classification.
- Don't want them to be a ghost there with no input- want them to be part of a group.

4. Medical Plan Design (30-45 minutes)

- Active plans for current employees and early retirees.
- Yellow highlights have multiple options.
- These will go out to market tomorrow- need information from committee.
- HMOs
- Debra suggests a Kaiser look-alike plan, HMO with a higher co-pay, lower co-pay and a deductible for hospital. The more you pay out of pocket, the lower the premium. By having multiple plans- high, medium, low- allows employees to choose what works best for them. We will need to look at multiple options to get different rates.
- Explanation of HMO, DHMO and HSA.
- Enrollment demographics are used for the plan information.
- CalPERS 'look-alike' plan – similarity to what we have now. Goal is to have chiro and acupuncture on all plans except maybe lowest plan. High, mid and low plan explanation. Mental health and substance abuse treated the same as all other medical conditions for co-pays and such.
- Debra will look at getting options with higher hospital, outpatient co-pays to see how it changes the premium.
- ER costs are higher overall so want to incentivize going to the doctor for non-emergency and avoid ER unless needed. Urgent care costs need to flow with regular appointment co-pays.
- Pharmacy- personal to people, maintenance meds- CalPERS does not require you go through mail order others may. Going to look at 3 tier plan (generic, brand formulary, brand non-formulary). This is a big ticket item – higher co-pays will lower premiums.
- Question about brand formulary costs. Will employees be able to see what drugs are included and/or excluded from the insurance formulary. Specialty – not necessarily formulary

- Brought up inclusivity for gender (non-binary especially), ethnicity, etc. – make sure the healthcare and pharmacy are aligned.
- PPO's
- Scratch the PERS Platinum and look at gold plan.
- Adjust the office visits- up doctor visit by \$5
- Hospitalization- drop the 80/70%, use only 80%
- Emergency, urgent – look at more options.
- Pharmacy – keep HMO and PPO plans the same. Talk about medical vs. pharmacy medications. Mail order medication – mail order for maintenance meds mandated? Can reduce prescription costs at renewal.

5. Survey Updates (15 minutes)

389 responses; discussion on some of the questions

- a. Employee Survey due 5:00 pm 3.24.23
- b. Retiree Survey going out in hardcopy mail this week

6. Next Meeting Scheduled, April 26, 2023, from 3:30-5:15ish at DO Tech Center

- a. Plan Design
- b. Plan Review

Meeting end: 5:23 pm