



**STATE OF CONNECTICUT**  
HEALTHCARE POLICY & BENEFIT SERVICES DIVISION  
OFFICE OF THE STATE COMPTROLLER

**HEALTHCARE COST CONTAINMENT COMMITTEE MINUTES**  
**May 10, 2021**

Meeting Called to Order by Tom Woodruff:

**Attendance:**

<b>Labor</b>	<b>State Comptroller Administrative Staff</b>
Carl Chisem – CEUI	Martha Carlson
Dan Livingston – SEBAC	Josh Wojcik
Dave Glidden – CSEA	Peggy Haering
Alfredo Camargo – A&R	Thomas Woodruff
Jody Barr – Council 4	
C. Michael White - UCPEA	<b>Presenters</b>
	Bernie Slowik – OSC
<b>Management</b>	Rae-Ellen Roy – OSC
Gregory Messner	Betsy Nosal - OSC
Sandra F. Brown-Brewton	
	<b>Consultants</b>
<b>Dept. of Insurance</b>	Terry DeMattie, Segal
Paul Lombardo	

**Public Comment:**

No public comment

**Partnership:**

As of 5/1/21 there are still 141 groups enrolled in Partnership 2.0, totaling approximately 25,000 employees and over 59,500 members.

One group will join on 6/1/21 and eight are confirmed to join on 7/1/21, which totals approximately 1,500 new employees and 3,500 members.

Rate renewal letters were sent to existing groups and they came in lower than initially projected. The range was from -3.3% to 4.6% for active (depending on county) and between 1.1% to 9.3% for non-Medicare retirees. This includes an IBNR identical the state of \$2.99 PMPM.

As of 5/1/21, there are five groups remaining in Partnership 1.0, totaling approximately 2,400 employees and just under 3,400 members

### **Financials:**

The main reason for the drastic drop in the biennium budget is that we have introduced an IBNR rate into our monthly payroll deductions. We have worked with Segal to determine the amount of reserve funds necessary to provide sufficient funding to cover our full IBNR by the end of Fiscal Year 2024. In order to meet this need we have added a \$2.99 PMPM to the full active rate for FY22. On the retiree side we already have sufficient funds to cover this needed balance.

The underutilization of the plan during the pandemic, the receipt of COVID relief funds, better than anticipated medical and pharmacy trend, and the introduction of an IBNR offset are resulting in a savings of approximately \$369.6-million over the original projections in the next biennium.

Because the payroll deductions reflected in the June pension cycle are reflective of the new rates for the coming fiscal year, this reduction in payroll deduction is also now resulting in an anticipated surplus on the retiree health appropriation of approximately \$9-million.

### **Communications Update:**

The Virtual Open Enrollment time-lines, member communications and participation for CVS, Anthem and Cigna were reviewed and discussed. Member communications via Google, Facebook and Care Compass were also discussed and view counts shared, indicating the level of usage of these mediums to communicate health plan options and other activity within the SOC health plan.