Call to Order

Danielle Hanson called the meeting to order, which began at 10:02 a.m.

1. Review and approval of meeting minutes

Danielle opened the meeting and requested a review of the meeting minutes from the March 5, 2021 meeting. The Committee members reviewed the meeting minutes. No changes were presented. Kelli Evans made a motion to approve the meeting minutes dated March 5, 2021. Brody Tate seconded the motion. All approved. The motion was carried.

2. CBIZ, Inc. & Human Resources Presentation – Background on Decision to Move to Aetna

Presentation on the background to move to Aetna in 2020. Presentation included overview of current medical plans, fully insured vs self-insured plans, health trend (8% increase each year) and a discussion about the benefits of moving to Aetna, including network comparison and cost savings. Below is a summary of the key points discussed.

- Reviewed 2018 claims
  - Claims processed from 10,751 providers and facilities, approximately 88,000 medical procedures
  - 100% match on hospitals
  - 96% match on providers/facilities
• 976 out of network providers with BCBSIL would be in network with Aetna (503 in-network provider improvement)
• 473 providers were out of Aetna’s network
  – Loyola provided transition-of-care to help members find in-network providers. (72 employees took advantage of the Transition of Care offered for 2020)
  – Aetna worked to contract providers into their network

• Results of the decision to move
  ▪ Maintain plan designs
    – No increase of deductibles and out-of-pocket maximums
  ▪ Maintain employee contributions
    – No increase in premium rates for medical plans (2020 and 2021)
  ▪ Improve network
    – Increase discount amount on claims
  ▪ Match hospitals
    – 503 in-network provider improvement

3. CBIZ, Inc. & Human Resources Presentation – Employee Contributions

Review of the current 3 salary bands for medical premiums including number of employees’ eligible, percent enrolled and average salary. There was a discussion around what the tiers should look like from a social justice perspective. If total contributions are constant, an individual employee will pay more/less depending on the tier. To meet this goal of being more social justice focused with our premiums, the group needs to discuss designing four salary bands for premiums, or consider maintaining the three tier and adjust the salary band ranges within. Additionally, there needs to be consideration on how much more the upper bands should pay than the lower salary bands.

4. Other Business

Discussion about the following items and initiatives:

• Communication about the Flexible Spending Health & Dependent Care account changes related to the Cares Act II was sent to all FSA participants on 4/1/2021. This change impacts about 750 FSA participants.
• Discussion about implementing the Dependent Care Account legislation from the American Rescue Plan Act of 2021 (brought forward by Peter Kotowski). There was a discussion within
the group to move forward with implementing this as soon as possible for the 83 employees enrolled in Dependent Care for 2021.

- There was a review and discussion about the results of the Faculty Council Survey on Experiences with Aetna. Then the group had a brief discussion on next steps for the BAC Aetna Survey that needs to be designed and sent to all benefits eligible / enrolled Faculty & Staff this spring. Kelli & Brody offered to assist with the survey. Brody volunteered his expertise with Qualtrics, a survey tool. The group will need to meet in May to finalize questions for survey.

5. Closing

The next Benefits Advisory Committee meeting will be scheduled for May of 2021 to discuss the Aetna survey and medical premium tiers. Danielle Hanson adjourned the meeting at 10:35 a.m.