



Commonwealth of Massachusetts
Group Insurance Commission

COMMISSION MEETING

December 15, 2022



MA Group Insurance Commission



Group Insurance Commission



@MassGIC

	Topic	Speaker	Schedule
I	Minutes, November 17, 2022 (VOTE)	Valerie Sullivan, Chair Andrew Stern, General Counsel	8:30-8:45
II	Executive Director's Report (INFORM)	Matthew Veno, Executive Director & Members of Senior Staff	8:45-8:55
III	Pharmacy Benefit Procurement (VOTE)	Jannine Dewar, Pharmacy & Ancillary Benefits Manager Deven Shah, Senior Director, Pharmacy & Northeast Region Lead, WTW	8:55-9:15
IV	Preliminary FY24 Rates (INFORM)	Vincent Kane, Senior Director & Actuary, WTW	9:15-9:30
V	Stewardship Report (INFORM)	Cameron McBean, Health & Ancillary Benefits Manager Jannine Dewar, Pharmacy & Ancillary Benefits Manager	9:30-9:40
VI	Municipal Insurance Program Update (INFORM) • Municipal Administrative Bulletin	Michael Berry, Director of Government Affairs Andrew Stern, General Counsel	9:40-10:10
VII	CFO Report (INFORM)	James Rust, CFO	10:10-10:20
VIII	Other Business & Adjournment	Valerie Sullivan, Chair Matthew Veno, Executive Director	10:20-10:30

Motion

That the Commission hereby approves the minutes of its meeting held on November 17, 2022 as presented.

- Valerie Sullivan, Chair
- Bobbi Kaplan, Vice-Chair
- Cassandra Roeder (Designee for A&F)
- Rebecca Butler (Designee for DOI)
- Elizabeth Chabot
- Adam Chapdelaine
- Edward Tobey Choate
- Tamara P. Davis
- Jane Edmonds
- Joseph Gentile
- Gerzino Guirand
- Patricia Jennings
- Eileen P. McAnney
- Melissa Murphy-Rodrigues
- Anna Sinaiko
- Timothy D. Sullivan



II. Executive Director's Report (INFORM)

Matthew Veno,
Executive Director

Members of Senior Staff

Projected 2022 Calendar*

Jan 20	Feb	Mar 3	Mar 24	Apr	May 19	Jun 16	Jul	Aug	Sep 15	Oct 20	Nov 17	Dec 15
Presentation: FY23 Plan Design	No Meeting	Votes: FY23 Plan Rates & Design	Strategy Update	No Meeting	Vote: Trust Funds	Report: Annual Enrollment	No Meeting	No Meeting	Plan Audit	Vote: FSA Procurement	HPC presentation	Vote: Pharmacy Benefit (PBM)
Engagement Update		Report: Public Listening Sessions	Engagement Update		FSA Procurement Update	Vote: EAP Procurement Consultant			EAP Procurement Update	Vote: Medical Benefit	Vote: EAP Procurement	FY24 Preliminary Rates
Report: Out of Pocket		EAP Procurement Consultant Update				EAP Procurement Update			Municipal Presentation			Municipal Update
Public Info Sessions					FY23 Annual Enrollment							Annual Stewardship Report
Stakeholder Engagement				Health Benefit Procurement								

* Topics and meeting dates are subject to change

Projected 2023 Calendar*

Public Info Sessions		Stakeholder Engagement			FY24 Annual Enrollment				Fall buy-out			
Jan 19	Feb 16	Mar 2	Apr 20	May 18	Jun 15	Jul	Aug	Sep 21	Oct 19	Nov 16	Dec 21	
Presentation: FY24 Plan Design	Vote: FY24 Plan Design	Vote: FY24 Rates	TBD	Vote: Trust Funds	Report: Annual Enrollment	No Meeting	No Meeting	Plan Audit	Vote: Plan Audit Procurement	HPC presentation	FY25 Preliminary Rates	
Engagement Update	Report: Public Info Sessions			Report: Out of Pocket								

* Topics and meeting dates are subject to change



III. Pharmacy Benefit Procurement (VOTE)

Jannine Dewar,
Pharmacy & Ancillary Benefits Manager

Deven Shah,
Senior Director, Pharmacy & Northeast Region Lead, WTW



Refresh – Procurement Background

- Over the last six months, the GIC has worked closely with WTW to complete the Pharmacy Benefit Manager (PBM) Request for Response (RFR)
- Today, Commissioners will vote on the recommended vendors for FY24+ (go-live 7/1/2023)



Special thanks to the scoring and advisory team:

Scoring members:

Jannine Dewar, Pharmacy and Ancillary Benefits Manager
Cameron McBean, Health and Ancillary Benefits Manager
Jim Rust, Chief Financial Officer
Erika Scibelli, Deputy Executive Director
Andrew Stern, General Counsel
Donna Wortman, Assistant Director of Operations

Advisory (non-scoring) members:

Margaret Anshutz, Director of Health Policy and Analytics
Lauren Makishima, Data Analytics Manager
Emily Williams, Chief of Staff
Catherine Moore, Budget Director
Matt Veno, Executive Director

A vendor's inclusion in the GIC's benefit program is contingent on successful contracting

Refresh – Evaluation Process

The GIC, in collaboration with WTW, evaluated responses for each bidder with a focus on the GIC's Guiding Principles

Procurement Guiding Principles

Utilize buying power to improve quality and outcomes for members as well as to make health care affordable by addressing underlying problems

Carefully consider and manage member disruption

Present low implementation risk

Improve access to mental health and substance use disorder services

Address diversity, equity and inclusion and social determinants of health

Improve member experience, including navigation

Play to the strengths of health plan partners and tap into specialized solutions to supplement weaknesses

Refresh – GIC Current State

- The GIC currently offers pharmacy benefits through Express Scripts to over 300,000 Active members (Commercial Plan).



- The GIC currently offers pharmacy benefits to over 100,000 Medicare members through CVS Caremark/SilverScript.



RFP Background

- The GIC received RFR responses from CVS Caremark (CVS), Express Scripts (ESI), Ingenio Rx, and Optum Rx.

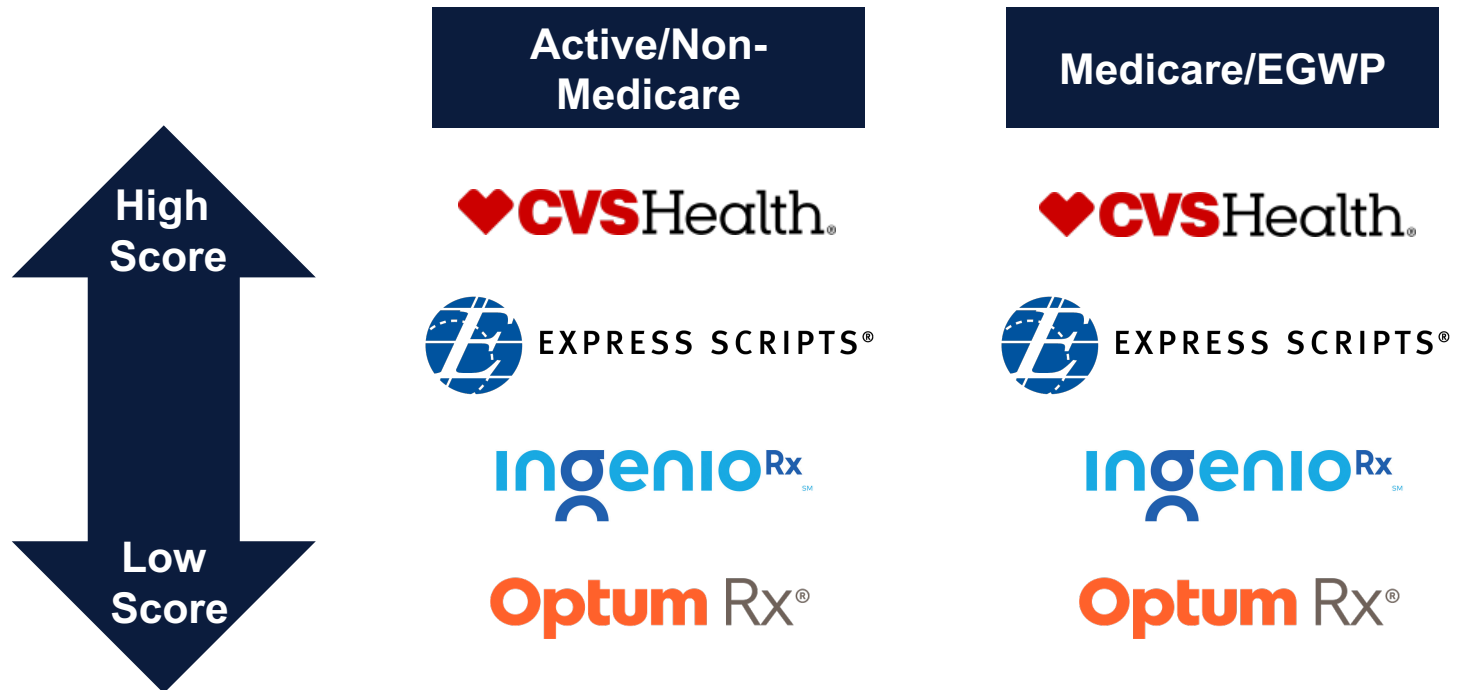


The GIC and WTW evaluated all vendors across six categories:

- Supplier Diversity
- Technical Proposal
- Cost Proposal
- Essay Questions
- Finalist Interviews/Presentations
- References

RFR Scores

- CVS Caremark demonstrated strong commitment to diverse suppliers and received the full possible 25 points
- CVS provided the best financial offer for both the Commercial and EGWP populations
- CVS and Express Scripts scored the highest on the technical proposal
- Both finalists (CVS and ESI) received strong references from similarly large, complex clients



Cost assessment

- WTW used GIC historical data and trended it forward to establish a baseline for contract years
- Each bid was evaluated on the following elements based on minimum guarantees
 - Network discounts (retail, mail and specialty)
 - Admin fees
 - Other program fees
 - Rebates
- Credits and trend guarantees were assessed but not included in the pricing tables

Illustrative Cost chart

	Vendor A	Vendor B	Vendor C	Vendor D
Trended Avg Wholesale Price	X	X	X	X
Minimum Network Discounts	– Discount A	– Discount B	– Discount C	– Discount D
Fees	+ Fees A	+ Fees B	+ Fees C	+ Fees D
Total Claims and Fees	Claims and Fees A	Claims and Fees B	Claims and Fees C	Claims and Fees D
Minimum Rebate guarantees	- Rebates A	- Rebates B	- Rebates C	- Rebates D
Total Rx costs	Gross Cost A	Gross Cost B	Gross Cost C	Gross Cost D

Recommendation

The GIC recommends selecting CVS as the PBM for both the Commercial and EGWP population. This selection will achieve the following:

1. Financial savings over the next three years
2. Operational and communications efficiencies from working with one PBM for the entire GIC population

Recommended PBM:

Active/Non-Medicare



Medicare/EGWP



Next Steps

- The GIC team will begin contracting with selected vendor partners
- GIC to work with vendor partners on implementation activities leading up to July 1, 2023 go-live
- Communicate with members prior to FY24 Annual Enrollment

A vendor's inclusion in the GIC's plan offering is contingent on successful contracting

Motion

That the Commission hereby approves the procurement team's recommendation of CVS/Caremark as the apparent successful bidder to administer Active and Retiree PBM benefits, beginning in FY2024.

- Valerie Sullivan, Chair
- Bobbi Kaplan, Vice-Chair
- Cassandra Roeder (Designee for A&F)
- Rebecca Butler (Designee for DOI)
- Elizabeth Chabot
- Adam Chapdelaine
- Edward Tobey Choate
- Tamara P. Davis
- Jane Edmonds
- Joseph Gentile
- Gerzino Guirand
- Patricia Jennings
- Eileen P. McAnney
- Melissa Murphy-Rodrigues
- Anna Sinaiko
- Timothy D. Sullivan



IV. Preliminary FY24 Rates (INFORM)

Vincent Kane,
Senior Director & Actuary, WTW

Expected FY 24 Budget Increase Context Setting

Why are we here today?

- Based on the current medical and pharmacy carriers and plan design offerings, preliminary Fiscal Year 2024 (FY24) full cost premiums were developed for each of the GIC's products (Non-Medicare and Medicare)
- The purpose of this discussion is to present FY24 Medical and Pharmacy preliminary pricing projections prior to incorporating strategic plan design changes. A premium reflects the total sum of money that the product is expected to cost in claims and fees (for medical and pharmacy), including the Commonwealth, municipalities and member portion; typically displayed as a monthly amount

What are premiums?

- Out-of-pocket costs at point of service are not included in premiums (e.g., office visit copays)
- The premiums reflected on the following slides reflect the full cost – members only pay a portion of the full cost premium

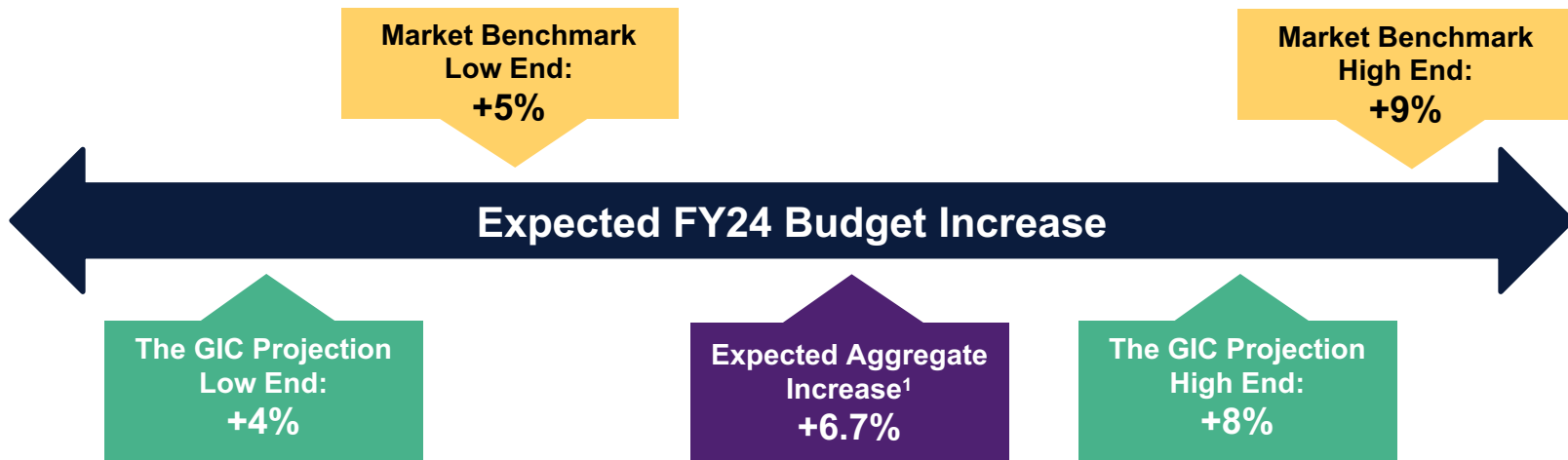
How were the premiums developed?

- Self-insured (i.e., ASO): Wills Towers Watson actuaries calculate FY24 premiums utilizing claims data, member data, and actuarial assumptions; the individual and family premiums reflect the claims experience and demographics for each product offered (applies to Non-Medicare and Medicare Supplement plans for the GIC)
- Fully-insured: The carriers develop and determine the fully insured FY24 premiums for the GIC (applies to Medicare Advantage medical portion only)

III. Expected FY 24 Budget Increase (before plan design changes)



- “Preliminary” = Current plan options, programs, plan design, funding mechanism; no anticipated migration or material changes in member behavior.
- Assumes positive vote on Rx RFR recommendation; 10.3% projected aggregate increase prior to expected Rx contract improvements.



Next Steps

- Finalize pharmacy projections based on RFR contractual improvements in discounts and rebates.
- Finalize medical trend assumptions provided by vendor partners.
- Evaluate and vote on plan design changes, including cost impacts.
- Adjust the budget rate increase accordingly.

¹ Expected aggregate increase reflects the average across non-Medicare and Medicare plans. Specific plan increases may be outside the stated range.



V. Stewardship Report (INFORM)

Cameron McBean,
Health & Ancillary Benefits Manager

Jannine Dewar,
Pharmacy & Ancillary Benefits Manager

Highlights and Takeaways from FY22 Stewardship Meetings

Medical Benefit

- Cost trends will be a concern for the foreseeable future, as inflationary pressures impact the market. Active plan trends ranged from 2% year-over-year to over 10%.
- Services and claims have fully rebounded from COVID-related deferral of treatment.
 - Continued increases in acuity and cost for inpatient services, reflecting conditions that have gone untreated or diagnosed later than ideal
 - Inpatient stays and costs due to COVID continue to decline, with most COVID-related spend occurring in office settings or labs for testing
- Some carriers have seen success in attempts to steer chemotherapy treatments to outpatient settings or less expensive sites of care.
- Telemedicine continues to be a driver of behavioral health treatment, although other forms of telemedicine services are reverting back to pre-pandemic utilization.

Highlights and Takeaways from FY22 Stewardship Meetings

Pharmacy

Specialty drugs continue to be the biggest cost-driver

- Top indications driving costs
 - Cancer
 - Autoimmune and inflammatory conditions (rheumatoid arthritis, psoriasis)
 - Rare conditions (e.g., Multiple Sclerosis; pulmonary hypertension)
 - Diabetes
- Biosimilars have a projected growth of \$75B by 2030
 - Biosimilars increase market competition making medications more accessible and more affordable
- Prescriptions for weight management drugs Saxenda® and Wegovy® are on the rise.



VI. Municipal Insurance Program Update (INFORM)

Michael Berry,
Director of Government Affairs

Andrew Stern,
General Counsel

48 GIC Municipalities and Regional Entities: M.G.L. 32B Entities

68,720 total subscribers

These entities add up to nearly a quarter of GIC subscribers

- | | | |
|--|--|--|
| <ul style="list-style-type: none"> • Town of Arlington • Town of Ashland* • Town of Bedford* • Town of Brookline* • Town of East Bridgewater • Town of Easton • Town of Framingham • City of Gloucester • Town of Groveland • <i>City of Haverhill</i> • Town of Hingham • Town of Holbrook* • <i>City of Lawrence</i> • Town of Lexington • <i>City of Lowell</i> • South Essex Sewer District | <ul style="list-style-type: none"> • Town of Lynnfield • Town of Marblehead* • City of Medford • City of Melrose* • Town of Middleborough* • Town of Millis* • Town of Monson • Town of North Andover* • City of Northampton • Town of Norwood • Town of Randolph* • <i>City of Salem</i> • City of Somerville • <i>City of Springfield</i> • Town of Stoneham • South Essex Sewerage District | <ul style="list-style-type: none"> • Town of Sudbury • Town of Swampscott* • Town of Wakefield • Town of Watertown • Town of Weston* • Town of Westwood* • Town of Weymouth • Town of Winthrop • Mohawk Trail RSD • Hawlemont RSD • Gill Montague RSD • Athol-Royalston RSD* • Blue Hills Regional High School • Northeast Regional Vocational* • Pentucket RSD • LABB Collaborative |
|--|--|--|

Largest: Springfield, Lowell, Lawrence, Framingham, Brookline

Smallest: Hawlemont Regional School District, Groveland

*Offers GIC retiree dental plan

Bold Italics denotes a Gateway City

Entities in their Renewal Year: Fiscal Year 2022 Renewal Update

1	CITY OF LOWELL	4065
2	TOWN OF FRAMINGHAM	3131
3	CITY OF MEDFORD	1805
4	CITY OF SALEM	1597
5	CITY OF NORTHAMPTON	1385
6	CITY OF GLOUCESTER	1384
7	TOWN OF NORWOOD	1273
8	TOWN OF SUDBURY	703
9	ATHOL-ROYALSTON RSD	354
10	TOWN OF MONSON	311
11	TOWN OF MILLIS	304
TOTAL		16,321

The Athol-Royalston Regional School District is the only entity withdrawing from the GIC (effective July 1, 2023)

FY2023 Renewal Outlook

	Municipal Organization	Total Members
1	TOWN OF ARLINGTON	1938
2	TOWN OF ASHLAND	624
3	TOWN OF BEDFORD	824
4	TOWN OF BROOKLINE	3268
5	TOWN OF EASTON	960
6	TOWN OF FRAMINGHAM	3647
7	CITY OF HAVERHILL	2957
8	TOWN OF HINGHAM	1178
9	TOWN OF LEXINGTON	2463
10	TOWN OF MARBLEHEAD	1332
11	TOWN OF NORTH ANDOVER	1221
12	TOWN OF RANDOLPH	1198
13	TOWN OF STONEHAM	1018
14	TOWN OF SWAMPSCOTT	756
15	TOWN OF WESTON	1003
16	TOWN OF WESTWOOD	805
17	TOWN OF WEYMOUTH	2383
18	GILL MONTAGUE RSD	370
19	LABB COLLABORATIVE	218

Entities, through their PECs, can extend their GIC membership beyond the 2 year roll-over at any time before their renewal deadline

These entities represent a total of 28,163 members

Proposed Administrative Bulletin: Current State

Currently, Municipalities choosing to join the GIC or renew with the GIC under c.32B, Section 19 must negotiate an agreement which sets the health premium contribution ratios for the Municipal Employer's subscribers, **which can differ only by type of plan (PPO, POS, HMO or Indemnity)**. This is based on the GIC's interpretation of section 19(g) which states, in part, that the agreement shall provide:

- Within the same health insurance coverage plan, the percentage contributed by the political subdivision to the premium or cost of health insurance coverage shall be the same for all subscribers covered under this section.
- These payments shall differ only by the type of coverage elected under the plan, including individual, family, optional Medicare extension or other coverage selections;
- but the percentage contributed by the political subdivision may vary among the different health insurance coverage plans offered under the agreement reached between the political subdivision and the public employee committee.

Proposed Administrative Bulletin

- We have received requests to allow contributions to differ by individual plan rather than by plan type, as allowed for communities joining under Section 23.
- We believe the statutory language supports this, allows the negotiating parties more flexibility and could make moving to the GIC a more attractive option under Section 19.

Proposed Administrative Bulletin

New Guidance, specifically, section 19(g) requires the following:

- All employees enrolled in a Plan shall be given the same premium contribution percentage. In other words, an employer may not discriminate against various classes of subscribers when setting premium contribution percentages, including whether they are active, retired, or survivors.
- Premium payments, but not premium contribution percentages, may differ by Type of Coverage or tier within the Plan. The Commission sets the full cost premium for each Type of Coverage within the Plan.
- Premium contribution percentage may vary among the Plans offered. A PEC agreement may set a premium contribution percentage for each specific Plan offered by the Commission, rather than only by Plan Type or network design (such as limited network Plan). However, PEC agreements are not prohibited from doing so.



VII. CFO Report (INFORM)

James Rust,
CFO

- FY23 Budget Update

FY2023 State Share Expense for GIC Premium Accounts

FY23 STATE SHARE EXPENSE FOR GIC PREMIUM ACCOUNTS						
	July 2022	August 2022	September 2022	October 2022	November 2022	TOTAL
AllWays Health Claims	\$6,836,814	\$6,838,101	\$5,827,806	\$6,360,384	\$7,811,544	\$33,674,648
Caremark/Express Scripts/SilverScript Claims	\$46,831,129	\$41,366,861	\$69,277,601	-\$23,430,455	\$42,729,862	\$176,774,997
Davis Vision Claims	\$31,769	\$37,602	\$37,105	\$36,305	\$28,230	\$171,011
Fallon Health Claims	\$5,175,531	\$2,285,532	\$1,065,930	\$447,641	\$223,851	\$9,198,485
Harvard Pilgrim Claims	\$34,599,772	\$31,866,611	\$26,673,987	\$27,405,431	\$33,628,973	\$154,174,773
Health New England Claims	\$6,007,317	\$7,571,440	\$6,351,814	\$7,174,590	\$6,993,360	\$34,098,520
Tufts Navigator Claims	\$33,691,822	\$27,974,428	\$38,499,636	\$28,998,982	\$28,099,240	\$157,264,108
Tufts Spirit and Medicare Complement Claims	\$4,623,818	\$3,385,476	\$4,653,496	\$3,196,478	\$3,539,936	\$19,399,204
Unicare Claims	\$54,382,656	\$72,476,689	\$52,503,984	\$75,588,172	\$56,234,705	\$311,186,207
Other costs	<u>\$651,882</u>	<u>\$240,004</u>	<u>\$238,045</u>	<u>\$231,339</u>	<u>\$353,360</u>	<u>\$1,714,630</u>
Claims sub-total	<u>\$192,832,509</u>	<u>\$194,042,744</u>	<u>\$205,129,404</u>	<u>\$126,008,867</u>	<u>\$179,643,061</u>	<u>\$897,656,584</u>
Basic Life	\$799,628	\$799,594	\$797,591	\$797,175	\$798,113	\$3,992,100
Optional Life	\$0	\$0	\$0	\$0	\$0	\$0
RMT Life	\$45,797	\$45,734	\$46,299	\$46,452	\$46,442	\$230,725
Long-Term Disability	\$0	\$0	\$0	\$0	\$0	\$0
Dental	\$822,459	\$823,149	\$819,128	\$819,977	\$820,037	\$4,104,750
Tufts Medicare Preferred	\$683,660	\$684,488	\$697,965	\$698,273	\$699,389	\$3,463,775
UBH Optum	\$93,744	\$93,744	\$93,744	\$93,744	\$93,744	\$468,720
ASO Administrative Fee	<u>\$6,835,706</u>	<u>\$6,824,891</u>	<u>\$6,849,917</u>	<u>\$6,816,952</u>	<u>\$6,858,117</u>	<u>\$34,185,582</u>
Premiums sub-total	<u>\$9,280,994</u>	<u>\$9,271,599</u>	<u>\$9,304,644</u>	<u>\$9,272,573</u>	<u>\$9,315,843</u>	<u>\$46,445,652</u>
TOTAL	\$202,113,502	\$203,314,343	\$214,434,048	\$135,281,439	\$188,958,903	\$944,102,237

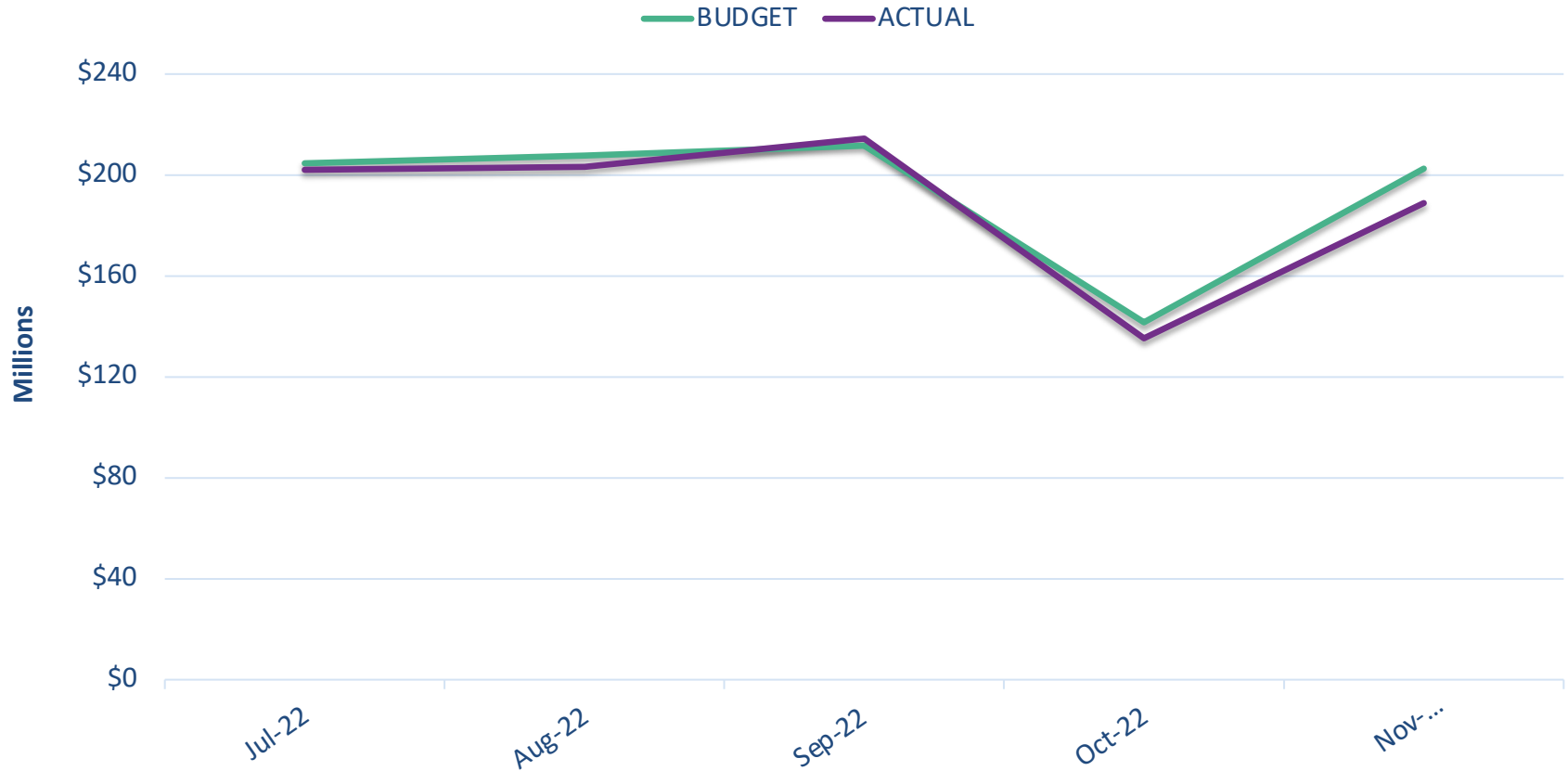
Through November, Commonwealth spending reflects a consistent pattern of post covid medical claims. Pharmacy rebates are reflected in October and November total spending.

FY2023 Enrollee Share Expense for GIC Premium Accounts

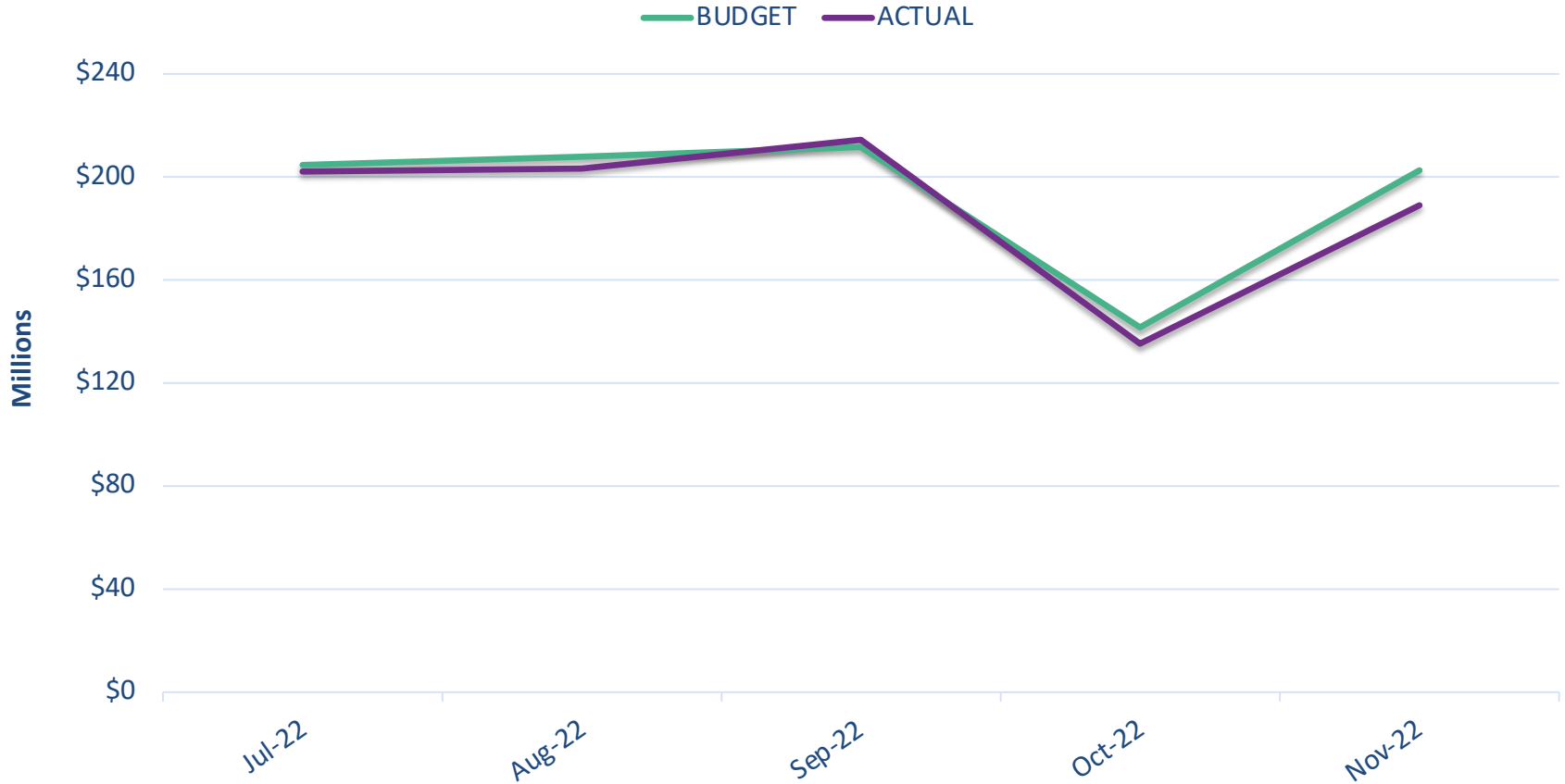
FY23 ENROLLEE SHARE EXPENSE FOR GIC PREMIUM ACCOUNTS						
	July 2022	August 2022	September 2022	October 2022	November 2022	TOTAL
AllWays Health Claims	\$2,093,517	\$2,119,143	\$1,514,782	\$1,868,851	\$2,296,310	\$9,892,603
Caremark/Express Scripts/SilverScript Claims	\$12,304,792	\$12,124,663	\$18,004,772	-\$7,915,686	\$11,975,446	\$46,493,987
Davis Vision Claims	\$5,606	\$6,636	\$6,548	\$6,407	\$4,982	\$30,178
Fallon Health Claims	\$1,491,936	\$665,790	\$303,586	\$130,166	\$65,057	\$2,656,534
Harvard Pilgrim Claims	\$9,781,177	\$9,088,732	\$7,269,182	\$7,474,042	\$9,173,251	\$42,786,384
Health New England Claims	\$1,804,737	\$2,273,426	\$1,669,372	\$2,073,045	\$2,024,847	\$9,845,427
Tufts Navigator Claims	\$9,782,152	\$8,125,473	\$10,088,025	\$8,112,431	\$7,866,812	\$43,974,894
Tufts Spirit and Medicare Complement Claims	\$1,316,260	\$964,958	\$1,156,727	\$859,768	\$975,120	\$5,272,833
Unicare Claims	\$15,725,295	\$20,921,071	\$14,652,375	\$21,185,981	\$15,737,679	\$88,222,400
Other costs	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>
Claims sub-total	<u>\$54,305,473</u>	<u>\$56,289,893</u>	<u>\$54,665,368</u>	<u>\$33,795,005</u>	<u>\$50,119,504</u>	<u>\$249,175,242</u>
Basic Life	\$217,960	\$218,051	\$217,495	\$217,542	\$217,976	\$1,089,024
Optional Life	\$3,974,305	\$3,990,388	\$3,986,202	\$4,055,838	\$4,077,008	\$20,083,742
RMT Life	\$11,196	\$11,181	\$11,319	\$11,356	\$11,354	\$56,406
Long-Term Disability	\$1,077,747	\$1,078,678	\$1,098,900	\$1,103,450	\$1,109,084	\$5,467,859
Dental	\$2,134,223	\$2,140,911	\$2,149,660	\$2,158,049	\$2,162,471	\$10,745,313
Tufts Medicare Preferred	\$155,542	\$155,806	\$150,520	\$150,757	\$151,097	\$763,721
UBH Optum	\$27,216	\$27,216	\$27,216	\$27,216	\$27,216	\$136,080
ASO Administrative Fee	<u>\$1,946,472</u>	<u>\$1,943,969</u>	<u>\$1,874,493</u>	<u>\$1,867,524</u>	<u>\$1,879,985</u>	<u>\$9,512,443</u>
Premiums sub-total	<u>\$9,544,661</u>	<u>\$9,566,200</u>	<u>\$9,515,805</u>	<u>\$9,591,732</u>	<u>\$9,636,191</u>	<u>\$47,854,588</u>
TOTAL	\$63,850,133	\$65,856,093	\$64,181,173	\$43,386,737	\$59,755,694	\$297,029,830

As expected, enrollee share paid claims have an identical pattern.

GIC Appropriation for Premium Accounts FY23 Budgeted vs. Actual to date



GIC Appropriation for Premium Accounts FY23 Budgeted vs. Actual (By Month)



FY23 State Share Premium Budget for GIC Premium Accounts Final Results

FY23 STATE SHARE PREMIUM BUDGET FOR GIC PREMIUM ACCOUNTS AS OF NOVEMBER 30, 2022

	BUDGET	EXPENSES	Surplus / Deficit	%	VAR
Basic Life & Health* Account #1108-5200 & #1599-6152	\$964,058,711	\$939,826,475	\$24,232,236	2.5%	
Active Dental & Vision Benefits Account #1108-5500	\$4,275,127	\$4,275,762	(\$635)	0.0%	
Total State Share YTD	\$968,333,837	\$944,102,237	\$24,231,601	2.5%	



VII. Other Business & Adjournment

Valerie Sullivan,
Chair

Matthew Veno,
Executive Director



FY2023 GIC Commission Meeting Schedule

Unless otherwise announced in the public notice, all meetings take place from 8:30 am - 10:30 am on the 3rd Thursday of the month. Meeting notices and materials including the agenda and presentation are available at mass.gov/gic under Upcoming Events prior to the meeting and under Recent Events after the meeting.

Please note:

- Until further notice, Commissioners will attend meetings remotely via a video-conferencing platform provided by GIC.
- Anyone with Internet access can view the livestream via the MA Group Insurance Commission channel on YouTube. The meeting is recorded, so it can be replayed at any time.

Upcoming Group Insurance Commission Meetings

January 2023

19

February 2023

16

March 2023

2

Appendix

Commission Members

GIC Leadership Team

GIC Goals

GIC Contact Channels

Commission Members

Valerie Sullivan, Public Member, Chair

Bobbi Kaplan, NAGE, Vice-Chair

Gary Anderson, Commissioner of Insurance

Michael Heffernan, Secretary of Administration & Finance

Elizabeth Chabot, NAGE

Joseph Gentile, Public Safety Member

Adam Chapdelaine, Mass Municipal Association

Patricia Jennings, Public Member

Edward Tobey Choate, Public Member

Anna Sinaiko, Health Economist

Christine Clinard, Public Member

Timothy D. Sullivan, Massachusetts Teachers Association

Tamara P. Davis, Public Member

Eileen P. McAnneny, Public Member

Jane Edmonds, Retiree Member

Melissa Murphy-Rodrigues, Mass Municipal Association

Gerzino Guirand, Council 93, AFSCME, AFL-CIO

GIC Leadership Team

Matthew A. Veno, Executive Director

Erika Scibelli, Deputy Executive Director

Emily Williams, Chief of Staff

Stephanie Sutliff , Chief Information Officer

Paul Murphy, Director of Operations

James Rust, Chief Financial Officer

Andrew Stern, General Counsel

Brock Veidenheimer, Director of Human Resources

GIC Goals

1

Provide access to high quality, affordable benefit options for employees, retirees and dependents

2

Limit the financial liability to the state and others (of fulfilling benefit obligations) to sustainable growth rates

3

Use the GIC's leverage to innovate and otherwise favorably influence the Massachusetts healthcare market

4

Evolve business and operational environment of the GIC to better meet business demands and security standards

Contact GIC for Enrollment and Eligibility

	Enrollment	Retirement	Premium Payments
	Qualifying Events	Life Insurance	Long-Term Disability
	Information Changes	Marriage Status Changes	Other Questions
Online Contact	mass.gov/forms/contact-the-gic		Any time. Specify your preferred method of response (phone, email, mail) from GIC
Email	gicpublicinfo@mass.gov		
Telephone	(617) 727-2310		M-F from 8:45 AM to 5:00 PM
Office location	1 Ashuburton Place, Suite 1619 Boston, MA		Not open for walk-in service
Correspondence	P.O. Box 8747 Boston 02114		Allow for processing time. Priority given to requests to retain or access benefits, and to reduce optional coverage during COVID-19.
Paper Forms	P.O. Box 556 Randolph, MA 02368		

Contact Your Health Carrier for Product and Coverage Questions

- Finding a Provider
- Accessing tiered doctor and hospital lists
- Determining which programs are available, like telehealth or fitness
- Understanding coverage

Health Insurance Carrier	Telephone	Website
AllWays Health Partners	(866)-567-9175	allwayshealthpartners.org/gic-members
Harvard Pilgrim Health Care	(800) 542-1499	harvardpilgrim.org/gic
Health New England	(800) 842-4464	hne.com/gic
Tufts Health Plan (THP)	(800) 870-9488	tuftshealthplan.com/gic
THP Medicare Products	(888) 333-0880	
UniCare State Indemnity Plans	(800) 442-9300	unicarestatplan.com

Date: December 11, 2022
To: Group Insurance Commission
From: Matthew Veno, Executive Director
Subject: Executive Director's Report

Purpose: The purpose of this memo is to provide Commissioners with the monthly Executive Director's report in writing. Questions and comments from Commissioners on the content of this memo are welcome during this portion of the agenda.

HUMAN RESOURCES:

- **Employee Engagement:** We have scheduled an all-employee, year-end MS Teams gathering on December 16. This will provide an opportunity for all GIC employees to gather for updates on key activities and initiatives at the GIC, to reconnect while many employees are working remotely, and to celebrate the upcoming holidays. The GIC Activities Committee has prepared holiday-related activities that we hope employees will enjoy. We will close the Operations unit phone lines for one hour during the call so that all employees are able to participate.

COMMUNICATIONS UPDATE:

- GIC has begun the internal planning process for the next annual enrollment. As usual, we are also preparing to host public information sessions in the new year for all members. As we informed Commissioners at our November meeting, these sessions will be held on January 24, 2023 at 12pm and 6pm as well as January 26, 2023 at 9 am. More information, including how to register, will be posted on our website and communicated to members in the coming weeks.
- The MyGICLink member benefits portal email and social media 3-month marketing campaigns concluded in November. The campaign targeted GIC members that have received an email inviting them to register but have not yet done so. This campaign began in September of 2022 to increase the number of registrations for MyGICLink by the end of 2022 in an effort decrease printed benefit statements and to boost the portal's usage for the FY24 annual enrollment.
- GIC communications continues to collaborate with Mass4YOU's benefit manager to develop ongoing email, social media, and newsletter communications to increase usage and awareness of the program.

LEGISLATIVE UPDATE:

- In January, the Massachusetts House of Representatives and Senate will welcome 26 or 27 new members (two recounts are pending as of this writing). There will be 5 new Senators, 3 of whom come directly from serving in the House. Depending on recounts resolve, there will be at least 21 new members in the House.
- After successful passage of mental health legislation in 2022, we expect that the new legislative session will have a renewed focus on oversight of pharmacy/prescription drug benefits and health care provider expansion, as well as support of community hospitals – all areas that either the House or Senate gave significant attention to in the 2021-2022 session.