

COMMISSION MEETING

February 27, 2025

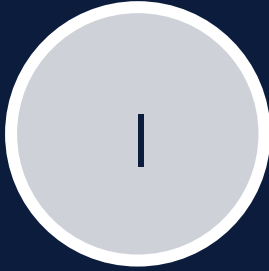
 MassGIC

 Group Insurance Commission

 MA Group Insurance Commission

Agenda

- **I. Minutes, February 6, 2025 (VOTE)** 8:30-8:35
Valerie Sullivan, Chair
Andrew Stern, General Counsel
- **II. Executive Director's Report (INFORM)** 8:35-8:45
Matthew Veno, Executive Director
Members of Senior Staff
- **III. FY2026 Rates (VOTE)** 8:45 -9:45
Cameron McBean, Director of Vendor Management
Margaret K. Anshutz, Director of Healthy Policy and Analytics
James Rust, Chief Financial Officer
- **IV. CFO Report (INFORM)** 9:45-10:15
James Rust, Chief Financial Officer
- **V. Other Business/Adjournment** 10:15-10:30
Valerie Sullivan, Chair
Matthew Veno, Executive Director



APPROVAL OF MINUTES (VOTE)

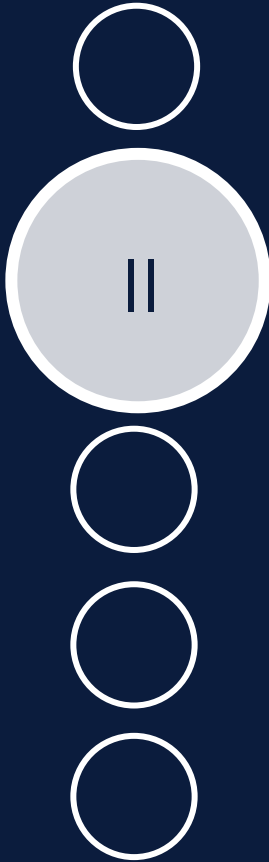
Valerie Sullivan, Chair &
Andrew Stern General Counsel



Motion

That the Commission hereby approves the minutes of its meeting held on February 6, 2025 as presented

- Valerie Sullivan, Chair
- Bobbi Kaplan, Vice-Chair
- Dana Sullivan (A&F Designee)
- Rebecca Butler (Designee for DOI)
- Elizabeth Chabot
- Edward Tobey Choate
- Tamara Davis
- Jane Edmonds
- Joseph Gentile
- Gerzino Guirand
- Patricia Jennings
- Eileen P. McAnneny
- Melissa Murphy-Rodrigues
- Jason Silva
- Anna Sinaiko
- Timothy D. Sullivan
- Catherine West



EXECUTIVE DIRECTOR'S REPORT (INFORM)

Matthew Veno Executive Director

Projected Fiscal Year 2025 Calendar

Jul	Aug	Sep 19	Oct	Nov 21	Dec 19	Jan 16	Feb 6	Feb 27	Apr 17	May 15	Jun 18
No Meeting	No Meeting	Plan Audit	No Meeting	Presentation: HPC	FY2026 Preliminary Cost Increase	Presentation: FY2026 Plan Design	Vote: FY2026 Plan Design	Vote: FY2026 Rates	Tentative Vote: Data Warehouse	Vote: Trust Funds	Report: Annual Enrollment
		GIC Strategic Framework Update		Presentation: Affordability Update	Vote: Dental/Vision Plan	Report: Stewardship Meetings	Report: Public Info Sessions			Report: Out of Pocket	
		Pharmacy Update								Vote: Life/LTD Consultant	
		CFO End of FY Report									

Note: Topics and meeting dates are subject to change



FISCAL YEAR 2026 RATES (VOTE)

Cameron McBean, Director of Vendor Management

Margaret Anshutz, Director of Health Policy & Analytics

James Rust, Chief Financial Officer

FY26 Dental Plan Rates: Retirees

- The FY26 fully-insured dental rates reflect a small increase, but with higher annual maximum and enhanced benefits.
- Members in the Retiree Dental plan pay 100% of premiums.

MetLife Retiree Dental Plan	FY25 Fully-Insured Monthly Premium Rate	FY26 Fully-Insured Monthly Premium Rate
Individual	\$29.27	\$29.66
Family	\$70.54	\$71.48

*Unable to add orthodontia to retiree plan for FY26

FY26 Dental Plan Rates: Active

- The FY26 fully-insured dental rates for first year with Altus.
- Annual maximums increased for in/out of network on both plans.

MetLife Active Dental Plan	FY25 Fully-Insured Monthly Premium Rate	FY26 Fully-Insured Monthly Premium Rate
Classic Individual	\$42.34	\$41.58
Classic Family	\$131.28	\$128.94
Value Individual	\$30.80	\$29.66
Value Family	\$95.49	\$91.55

FY26 Vision Plan Rates: Active

➤ FY26 is the first year of the contract with Altus Vision.

Vision Plan	FY26 Self-Insured Monthly Working Rate
Individual	\$2.34
Family	\$6.84

FY26 Active Dental/Vision Plan Rates

➤ The FY26 active dental/vision rates are calculated by adding the FY25 Altus Vision self-insured working rates to the FY26 Altus fully-insured dental premium rates.

Dental Plan	FY26 Dental Monthly Premium	FY26 Vision Monthly Working Rate	FY26 Total Monthly Dental/Vision Rate
Classic Individual	\$41.58	\$2.34	\$43.92
Classic Family	\$128.94	\$6.84	\$135.78
Value Individual	\$29.66	\$2.34	\$32.00
Value Family	\$91.55	\$6.84	\$98.39

FY26 Active Dental/Vision Plan Rates: Member Contributions

- Below are the rates participants will pay for dental and vision benefits in FY26.
- Participants pay 15% of the managerial dental/vision monthly costs.

Dental Plan	Proposed Member Monthly Contribution Rates FY26
Classic Individual	\$6.59
Classic Family	\$20.37
Value Individual	\$4.80
Value Family	\$14.76

12/20/2025

Fiscal Year 2026 Full Cost Health Insurance Premiums Presentation and Vote

Table of Contents

- Overview of Rate Development Process & Timeline
- Executive Summary
- Fiscal Year 2026 Full Cost Premiums by Product
 - Non-Medicare
 - Medicare
- Vote to Approve Fiscal Year 2026 Rates
 - Approve recommended Fiscal Year 2026 Non-Medicare and Medicare full cost premiums

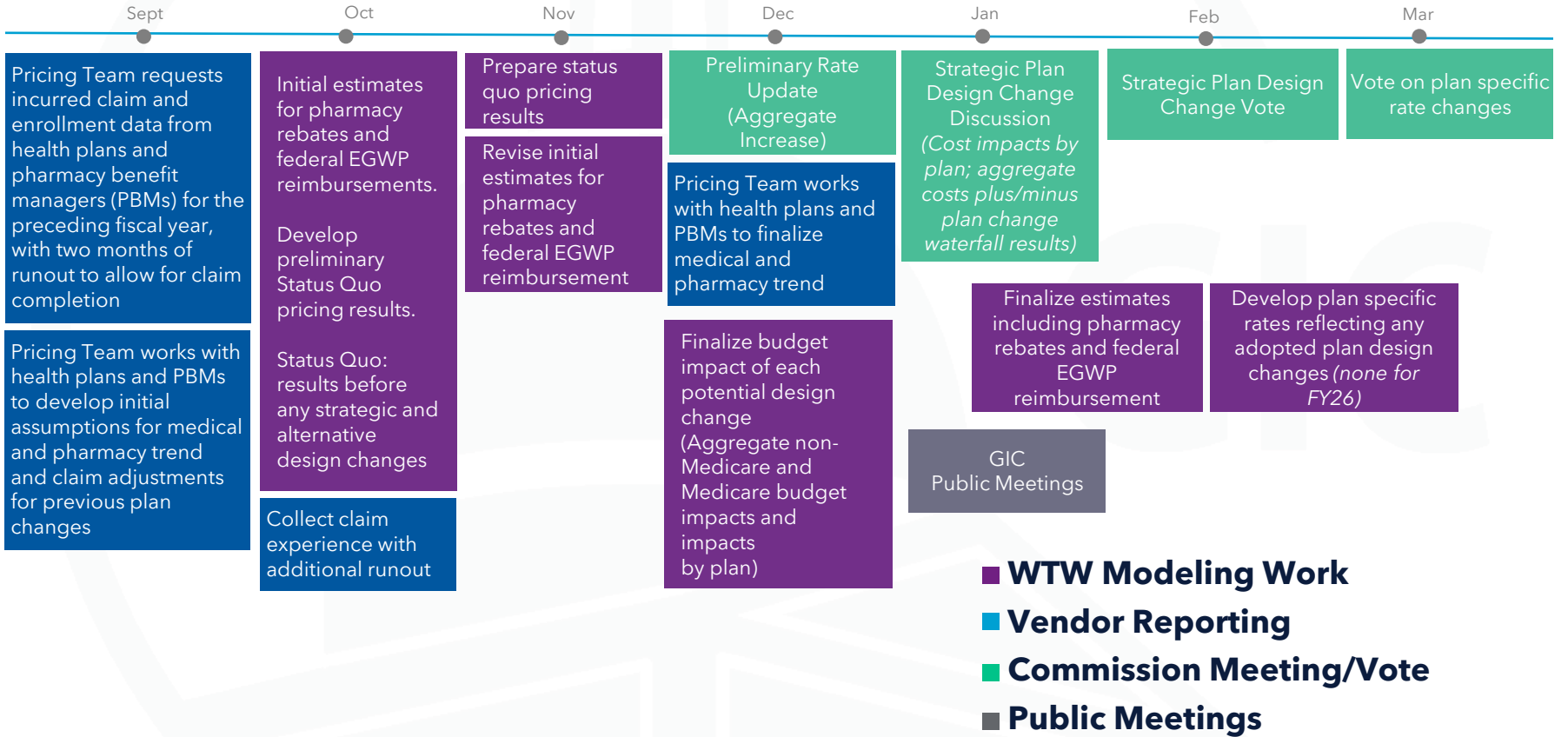
GIC

Why are we here today?

- The purpose of this discussion is to present proposed Fiscal Year 2026 (FY26) health insurance premiums for a Commission vote
- Health insurance premiums are developed annually for each of the GIC's plans based on
 - Anticipated members within each plan
 - Anticipated total cost of those members' claims
- The GIC's health plans are classified as non-Medicare products for active employees and retirees not eligible for Medicare, and Medicare products for retirees
- All insurance carriers and plan offerings for Non-Medicare and Medicare plans remain the same as FY25

Timeline

What does the process look like?



What are premiums?

- A premium is the total sum of money that is needed to pay:
 - Medical providers for all eligible claims for service and medication based on negotiated rates
 - Insurance company costs depending upon the risk model for the products
- Premiums do not include out-of-pocket expenses, such as copays and deductibles
- The premiums reflected on the following slides reflect the full cost - most members only pay a portion of the full cost premium

How are the premiums shared?

- Premium sharing is specified by state law or in contract agreements (Municipalities)
- Depending upon date of hire and the member's status (active/retired), the state contribution ratios are:

Commonwealth	Employee or Retiree
90%	10%
85%	15%
80%	20%
75%	25%

Who takes on the risk?

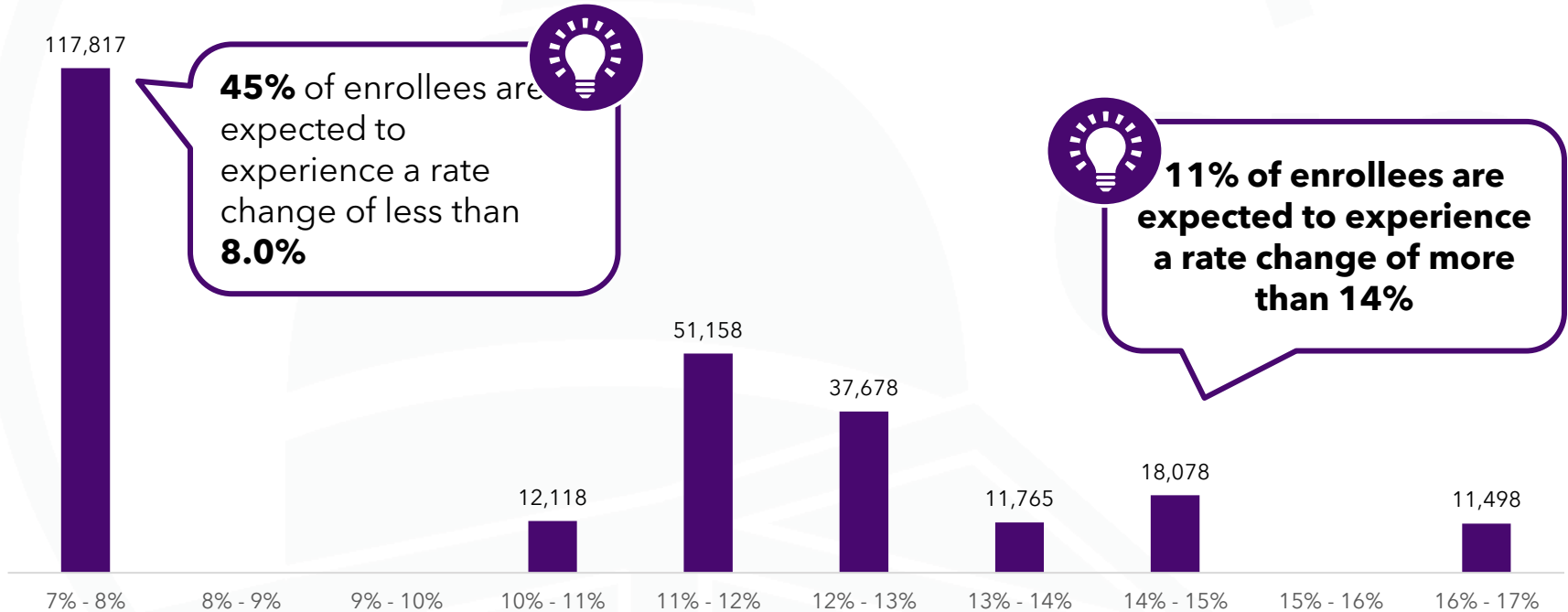
- **The Commonwealth of Massachusetts** takes the risk **for active employees and non-Medicare retirees** by using a **self-insured model** for non-Medicare products and for retirees who purchase Medicare Supplemental plans. This means:
 - If claims exceed the premiums, the state must seek additional funds from the General Fund in a supplemental budget request
 - The health insurance carrier takes no risk in this self-insured model
 - This approach reduces costs by fixing the health insurance carrier's income around administration and eliminating any premium paid to carriers to accept risk
- **The insurance carrier** takes the risk **for retirees** enrolled in Medicare Advantage which is offered in a **fully-insured model**. This means:
 - If total eligible claims exceed collected premiums, the health insurance carrier suffers a loss
 - The health insurance carrier takes a risk in the fully-insured model
 - This approach results in premiums that are higher to cover costs and claims AND ensure a profit
 - If claims are lower than collected premiums, the health insurer retains the difference
 - Medicare Advantage is regulated at the federal level

What is driving premium increases?

- **Medical and pharmacy cost inflation** is the primary driver of premium increases
 - Health care inflation and provider consolidation have led to higher unit prices, representative of the contracts that health plans have in place with hospitals and care providers
 - Levels of plan utilization continue to increase in the market
 - Pharmaceutical companies have raised prices for brand name and specialty drugs
 - Significant increases in GLP-1 drug class utilization for weight loss have contributed to pharmacy claims increases
- **Massachusetts market data** collected by the Center for Health Information and Analysis (CHIA) and presented by the Health Policy Commission (HPC) reflect this inflation in the state's broader commercial market
- **GIC** claims data reflects this in:
 - More expensive claims for the same services provided in prior years
 - Faster rate of unit cost increases in relation to utilization
 - Significant pharmacy claims increases from FY23 to FY24

Executive Summary

Overall average Fiscal Year (FY) 2026 premium increase of **11.7%** over FY 2025; this is greater than the FY 2025 increase of 8.5%, but in line with the preliminary projected increase range (8.5% to 12.5%).

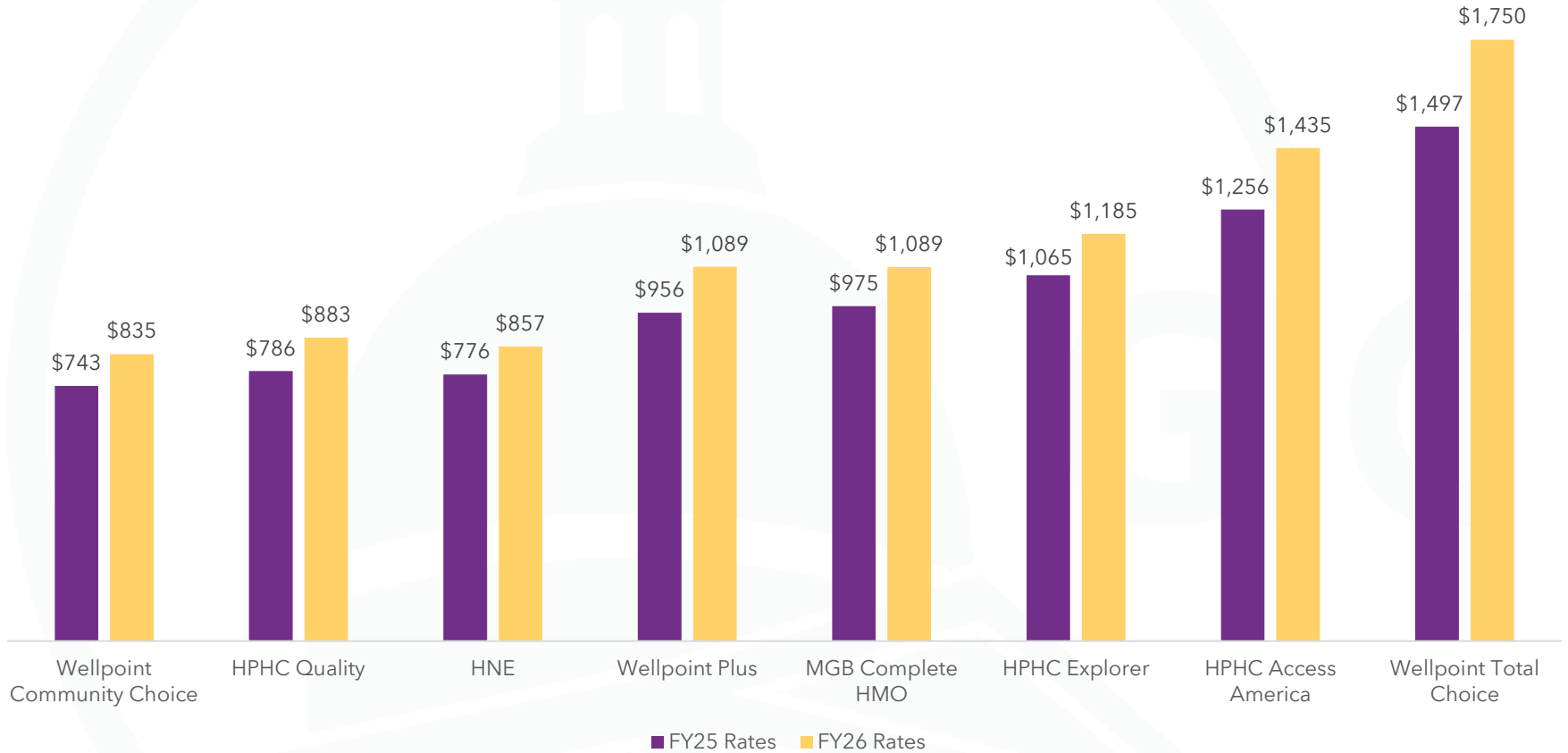


Caveats:

*These are premium rates - not member contributions

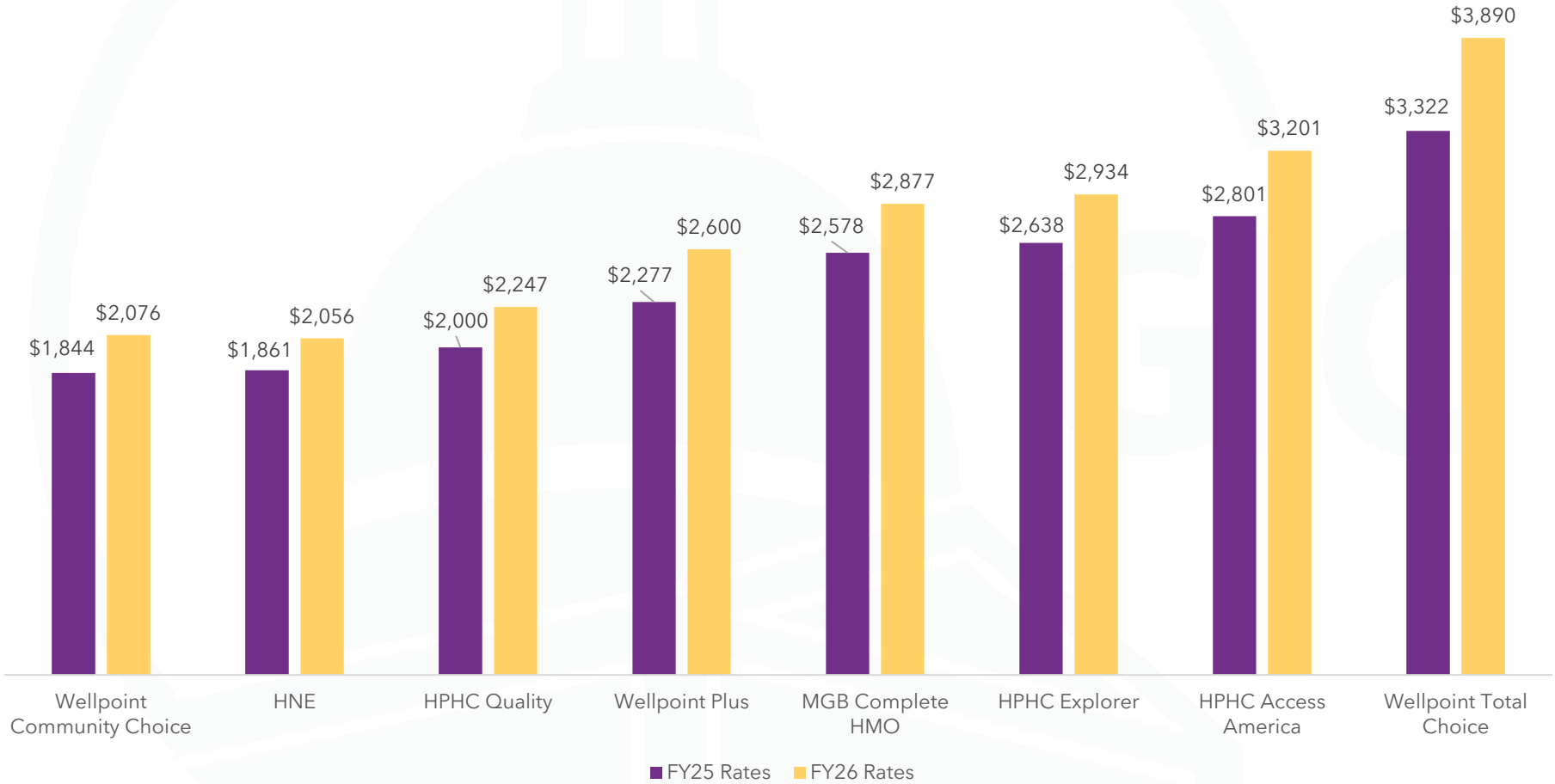
*Enrollment as of July 2024 and does not reflect potential migration between plans

Individual Rates by Plan (Non-Medicare)



Rates are rounded to the nearest dollar in this illustration

Family Rates by Plan (Non-Medicare)



Rates are rounded to the nearest dollar in this illustration

Fiscal Year 2026 Full Cost Premiums: Non-Medicare



Key Insights

Network	Plan	Tier	FY25 Rates	Current FY25 Enrollment	FY26 Rates	% Increase Over FY25 Rates
Regional	Health New England	Individual	\$775.92	6,136	\$857.22	10.5%
		Family	\$1,861.38	5,982	\$2,056.02	10.5%
Narrow	Wellpoint Community Choice	Individual	\$742.74	10,290	\$835.29	12.5%
		Family	\$1,843.56	11,288	\$2,076.10	12.6%
	Harvard Pilgrim Quality	Individual	\$785.68	9,325	\$883.42	12.4%
		Family	\$1,999.81	6,775	\$2,246.89	12.4%
Broad	Wellpoint Plus	Individual	\$955.75	11,765	\$1,089.31	14.0%
		Family	\$2,277.22	15,335	\$2,599.53	14.2%
	MGB Complete HMO	Individual	\$974.74	5,578	\$1,088.74	11.7%
		Family	\$2,577.69	4,962	\$2,877.39	11.6%
	Harvard Pilgrim Explorer	Individual	\$1,064.68	18,238	\$1,185.01	11.3%
		Family	\$2,637.99	22,380	\$2,933.73	11.2%
	Wellpoint Total Choice	Individual	\$1,496.86	6,891	\$1,750.22	16.9%
		Family	\$3,321.75	4,607	\$3,890.10	17.1%
National	Harvard Pilgrim Access America	Individual	\$1,255.62	1,788	\$1,435.03	14.3%
		Family	\$2,800.86	955	\$3,200.78	14.3%

* Enrollment counts as of July 2024

- **Regional products** are offered by provider-owned carriers; their premiums reflect their geographies and favorable contracted rates offered by their parent organizations
- **Narrow network products** offer lower rates due to more efficient providers, and generally attract lower risk members
- **Broad network products** offer a range of premiums; premiums higher than limited products as network is more robust
- **National Products** offer plan choice for GIC members whom live outside of New England, and offer a broad national network

- Overall average Fiscal Year 2026 premium increase amongst Non-Medicare products is 12.7%
- The highest increase is 17.1% (Wellpoint Total Choice) and the lowest is 10.5% (HNE)

Fiscal Year 2026 Member Contributions: Non-Medicare



Network	Plan	Tier	Member Contributions			
			90%/10%	85%/15%	80%/20%	75%/25%
Regional	Health New England	Individual	\$85.72	\$128.58	\$171.44	\$214.31
		Family	\$205.60	\$308.40	\$411.20	\$514.01
Narrow	Wellpoint Community Choice	Individual	\$83.53	\$125.29	\$167.06	\$208.82
		Family	\$207.61	\$311.42	\$415.22	\$519.03
	Harvard Pilgrim Quality	Individual	\$88.34	\$132.51	\$176.68	\$220.86
		Family	\$224.69	\$337.03	\$449.38	\$561.72
Broad	Wellpoint Plus	Individual	\$108.93	\$163.40	\$217.86	\$272.33
		Family	\$259.95	\$389.93	\$519.91	\$649.88
	MGB Complete HMO	Individual	\$108.87	\$163.31	\$217.75	\$272.19
		Family	\$287.74	\$431.61	\$575.48	\$719.35
	Harvard Pilgrim Explorer	Individual	\$118.50	\$177.75	\$237.00	\$296.25
		Family	\$293.37	\$440.06	\$586.75	\$733.43
	Wellpoint Total Choice	Individual	\$175.02	\$262.53	\$350.04	\$437.56
		Family	\$389.01	\$583.52	\$778.02	\$972.53
National	Harvard Pilgrim Access America	Individual	\$143.50	\$215.25	\$287.01	\$358.76
		Family	\$320.08	\$480.12	\$640.16	\$800.20

Note that the member contributions shown above only reflect core medical portion of member contributions and do not include other benefits contributions such as life insurance, dental and vision; additional administrative fees may also apply (i.e., municipality fees)

Fiscal Year 2026 Full Cost Premiums: Medicare



Key Insights

Product	Plan	Tier	FY25 Rates	Current FY25 Enrollment	FY26 Rates	% Increase Over FY25 Rates
Medicare Advantage	THP Medicare Preferred	Individual	\$362.75	4,507	\$390.21	7.6%
Medicare Supplement	Harvard Pilgrim Medicare Enhance	Individual	\$434.83	31,649	\$467.05	7.4%
	HNE Medicare Supplement Plus	Individual	\$437.48	4,054	\$469.54	7.3%
	Wellpoint Medicare Extension OME	Individual	\$443.35	77,607	\$475.14	7.2%

- All Medicare Supplement products offer similar value propositions and premiums
- The majority of GIC Medicare-eligible members are in Wellpoint Medicare Supplement plan

*Enrollment counts as of July 2024

- Overall average Fiscal Year 2026 premium increase amongst Medicare products is 7.3%
- Point32 Medicare Advantage is the only Medicare Advantage product offered to GIC members
- There is little premium variation across Medicare Supplement products with a maximum premium differential of about \$8/month

Fiscal Year 2026 Member Contributions: Medicare

Product	Plan	Tier	Member Contributions			
			90%/10%	85%/15%	80%/20%	75%/25%
Medicare Advantage	THP Medicare Preferred	Individual	\$39.02	\$58.53	\$78.04	\$97.55
Medicare Supplement	Harvard Pilgrim Medicare Enhance	Individual	\$46.71	\$70.06	\$93.41	\$116.76
	HNE Medicare Supplement Plus	Individual	\$46.95	\$70.43	\$93.91	\$117.39
	Wellpoint Medicare Extension OME	Individual	\$47.51	\$71.27	\$95.03	\$118.79

Note that the member contributions shown above only reflect core medical portion of individual member contributions and do not include other benefits contributions such as life insurance, dental and vision; additional administrative fees may also apply (i.e., municipality fees)

Motion

Approve recommended Fiscal Year 2026 full cost premiums as shown on slides 24 and 26

- Valerie Sullivan, Chair
- Bobbi Kaplan, Vice-Chair
- Dana Sullivan (A&F Designee)
- Rebecca Butler (Designee for DOI)
- Elizabeth Chabot
- Edward Tobey Choate
- Tamara Davis
- Jane Edmonds
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**Fiscal Year 2026 Rates:
Establishing the Municipal Administrative Fee**

FY2026 Rates

Municipal Administration Fee

The GIC staff recommends setting the Fiscal Year 2026 Municipal Administrative fee to 0.25% of the full cost premiums.

- This represents a 0.05% change in the municipal administrative fee from the FY25 level (0.30%)
- All participating municipalities pay a fee to the GIC for administering the municipal program
- The GIC is authorized by statute to charge up to 1.0 % of premium

Note: The 0.25% administrative fee is estimated to yield approximately \$2,600,000 in FY26

Motion

Authorize the GIC to set the Fiscal Year 2026 Municipal Administrative fee at 0.25% of the full cost premiums

- Valerie Sullivan, Chair
- Bobbi Kaplan, Vice-Chair
- Dana Sullivan (A&F Designee)
- Rebecca Butler (Designee for DOI)
- Elizabeth Chabot
- Edward Tobey Choate
- Tamara Davis
- Jane Edmonds
- Joseph Gentile
- Gerzino Guirand
- Patricia Jennings
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- Melissa Murphy-Rodrigues
- Jason Silva
- Anna Sinaiko
- Timothy D. Sullivan
- Catherine West

IV

CFO REPORT (INFORM)

James Rust, Chief Financial Officer

FY2025 State Share Expense for GIC Premium Accounts



FY25 STATE SHARE EXPENSE FOR GIC PREMIUM ACCOUNTS

	July 2024	Aug. 2024	Sept. 2024	Oct. 2024	Nov. 2024	Dec. 2024	Jan. 2025	TOTAL
Caremark/Express Scripts/SilverScript Claims	\$101,158,005	\$55,761,453	\$58,837,641	\$94,090,648	-\$4,217,149	\$53,871,699	\$111,781,278	\$471,283,576
Davis Vision Claims	\$42,062	\$47,283	\$42,543	\$42,787	\$35,678	\$35,713	\$39,875	\$285,940
Health New England Claims	\$10,903,323	\$8,959,624	\$9,752,773	\$7,824,988	\$9,495,867	\$8,894,244	\$8,096,786	\$63,927,606
Mass General Brigham Claims	\$11,446,094	\$9,646,021	\$8,658,337	\$11,920,741	\$9,524,359	\$10,024,848	\$10,134,836	\$71,355,236
Point32 Claims	\$86,754,873	\$58,303,875	\$61,754,060	\$87,267,726	\$71,030,399	\$83,161,848	\$63,244,377	\$511,517,157
Unicare Claims	\$86,843,669	\$91,935,965	\$69,768,872	\$87,717,257	\$70,621,558	\$71,165,213	\$82,420,326	\$560,472,860
Other costs (including Tufts run-out claims)	<u>\$902,399</u>	<u>\$689,262</u>	<u>\$376,139</u>	<u>-\$142,541</u>	<u>\$483,550</u>	<u>-\$1,151,227</u>	<u>\$609,824</u>	<u>\$1,767,406</u>
Claims sub-total	<u>\$298,050,426</u>	<u>\$225,343,483</u>	<u>\$209,190,365</u>	<u>\$288,721,607</u>	<u>\$156,974,261</u>	<u>\$226,002,337</u>	<u>\$276,327,302</u>	<u>\$1,680,609,781</u>
Basic Life Insurance Premiums	\$821,174	\$821,643	\$824,066	\$823,914	\$825,366	\$824,927	\$823,853	\$5,764,943
RMT Life Insurance Premiums	\$46,021	\$45,963	\$46,546	\$46,545	\$46,532	\$46,441	\$46,372	\$324,420
Dental Premiums	\$942,185	\$941,605	\$946,059	\$946,294	\$950,653	\$948,355	\$946,442	\$6,621,592
Tufts Medicare Preferred	\$650,447	\$650,303	\$648,641	\$726,917	\$698,923	\$673,669	\$672,518	\$4,721,418
UBH Optum EAP	\$82,584	\$82,584	\$82,584	\$82,584	\$55,800	\$82,584	\$82,584	\$551,304
ASO Administrative Fees	<u>\$7,362,423</u>	<u>\$7,356,006</u>	<u>\$7,360,167</u>	<u>\$7,357,683</u>	<u>\$7,379,976</u>	<u>\$7,373,651</u>	<u>\$7,360,299</u>	<u>\$51,550,205</u>
Premiums sub-total	<u>\$9,904,834</u>	<u>\$9,898,103</u>	<u>\$9,908,062</u>	<u>\$9,983,937</u>	<u>\$9,957,250</u>	<u>\$9,949,627</u>	<u>\$9,932,068</u>	<u>\$69,533,881</u>
TOTAL	\$307,955,260	\$235,241,586	\$219,098,427	\$298,705,544	\$166,931,511	\$235,951,964	\$286,259,370	\$1,750,143,662

Employer state share spending FY25

FY2025 Enrollee Share Expense for GIC Premium Accounts

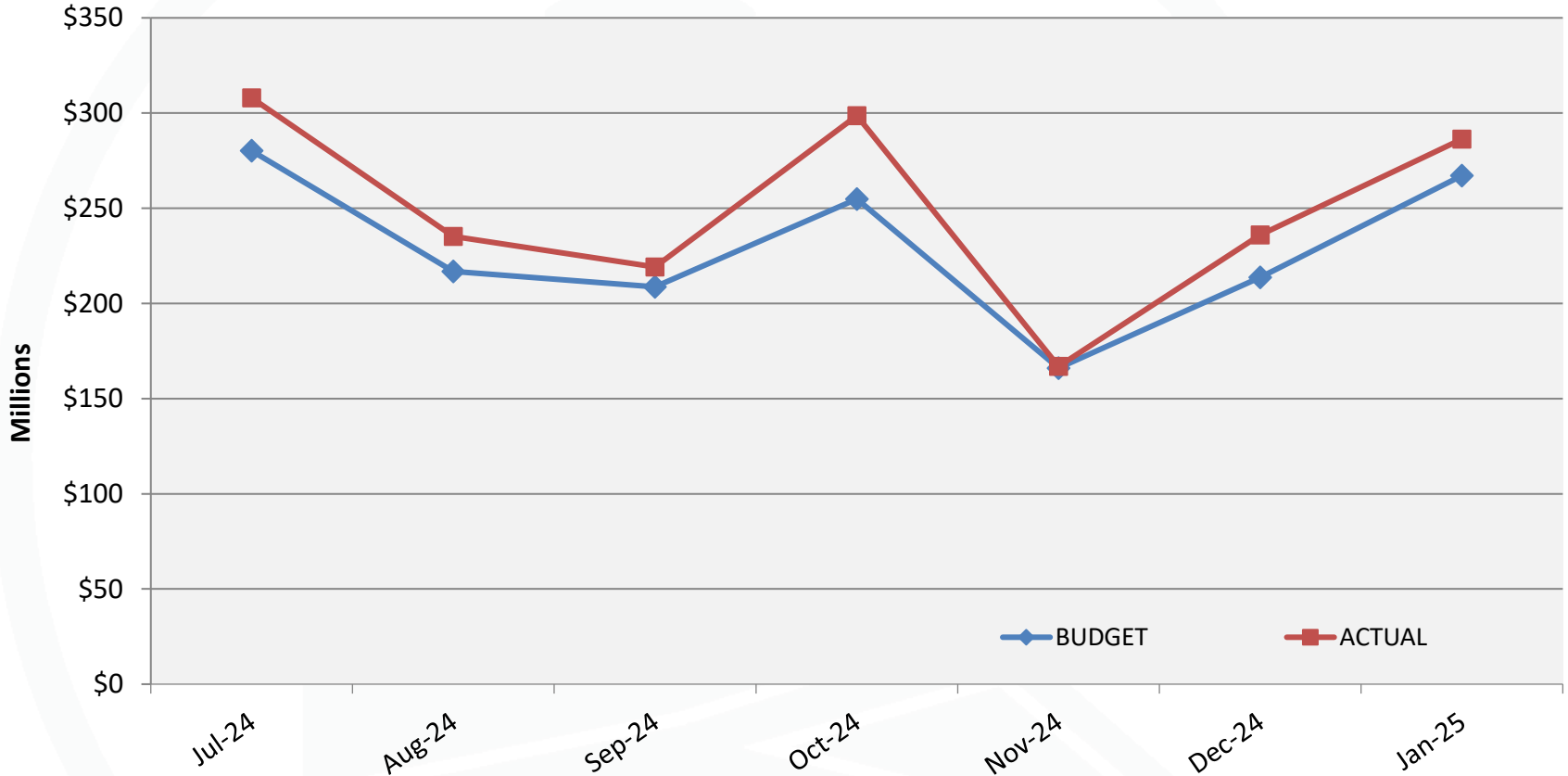


FY25 ENROLLEE SHARE EXPENSE FOR GIC PREMIUM ACCOUNTS

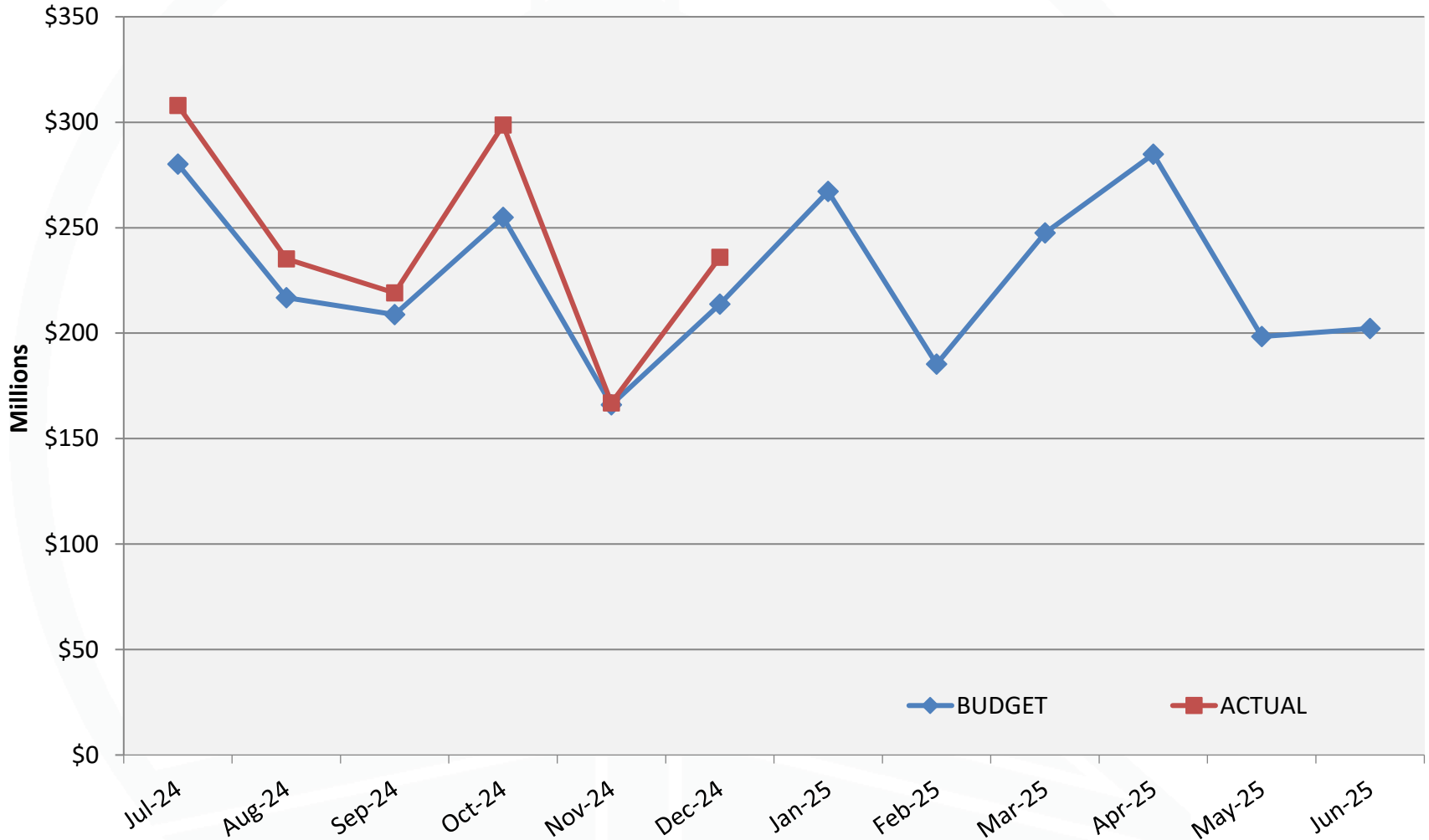
	July 2024	Aug. 2024	Sept. 2024	Oct. 2024	Nov. 2024	Dec. 2024	Jan. 2025	TOTAL
Caremark/Express Scripts/SilverScript Claims	\$27,048,894	\$13,022,589	\$17,252,344	\$25,467,106	-\$1,213,853	\$16,481,803	\$29,653,311	\$127,712,194
Davis Vision Claims	\$7,423	\$8,344	\$7,508	\$7,551	\$6,296	\$6,302	\$7,037	\$50,460
Health New England Claims	\$3,302,487	\$2,716,848	\$2,953,611	\$2,373,721	\$2,885,725	\$2,693,448	\$2,457,810	\$19,383,649
Mass General Brigham Claims	\$3,535,603	\$2,980,192	\$2,678,123	\$3,690,378	\$2,952,821	\$3,109,458	\$3,144,773	\$22,091,348
Point32 Claims	\$23,145,976	\$16,761,899	\$17,914,324	\$25,195,316	\$20,581,057	\$24,050,299	\$18,297,473	\$145,946,344
Unicare Claims	\$24,243,214	\$25,767,983	\$19,457,802	\$24,484,095	\$19,766,846	\$19,889,416	\$23,064,826	\$156,674,181
Other costs (including Tufts run-out claims)	<u>-\$65,921</u>	<u>-\$30,935</u>	<u>\$29,014</u>	<u>-\$108,558</u>	<u>\$24,821</u>	<u>-\$362,518</u>	<u>\$76,741</u>	<u>-\$437,355</u>
Claims sub-total	<u>\$81,217,675</u>	<u>\$61,226,919</u>	<u>\$60,292,726</u>	<u>\$81,109,609</u>	<u>\$45,003,713</u>	<u>\$65,868,209</u>	<u>\$76,701,972</u>	<u>\$471,420,822</u>
Basic Life Insurance Premiums	\$227,909	\$228,184	\$229,126	\$229,157	\$229,776	\$229,643	\$229,358	\$1,603,153
Optional Life Insurance Premiums	\$4,447,026	\$4,461,418	\$4,490,614	\$4,518,407	\$4,541,124	\$4,564,930	\$4,576,542	\$31,600,062
RMT Life Insurance Premiums	\$11,251	\$11,236	\$11,378	\$11,379	\$11,376	\$11,353	\$11,337	\$79,310
Long-Term Disability Premiums	\$1,244,240	\$1,248,871	\$1,263,875	\$1,272,369	\$1,277,736	\$1,286,259	\$1,289,336	\$8,882,686
Dental Premium	\$2,339,184	\$2,345,961	\$2,354,217	\$2,359,582	\$2,364,044	\$2,364,130	\$2,364,511	\$16,491,628
Tufts Medicare Preferred	\$150,655	\$150,799	\$150,514	\$168,619	\$162,215	\$156,355	\$156,218	\$1,095,374
UBH Optum EAP	\$23,976	\$23,976	\$23,976	\$23,976	\$16,200	\$23,976	\$23,976	\$160,056
ASO Administrative Fees	<u>\$2,066,190</u>	<u>\$2,066,024</u>	<u>\$2,069,017</u>	<u>\$2,069,119</u>	<u>\$2,077,843</u>	<u>\$2,075,733</u>	<u>\$2,072,145</u>	<u>\$14,496,070</u>
Premiums sub-total	<u>\$10,510,430</u>	<u>\$10,536,469</u>	<u>\$10,592,718</u>	<u>\$10,652,607</u>	<u>\$10,680,314</u>	<u>\$10,712,379</u>	<u>\$10,723,422</u>	<u>\$74,408,340</u>
TOTAL	\$91,728,105	\$71,763,388	\$70,885,444	\$91,762,215	\$55,684,027	\$76,580,589	\$87,425,394	\$545,829,162

Enrollee share paid claims FY25.

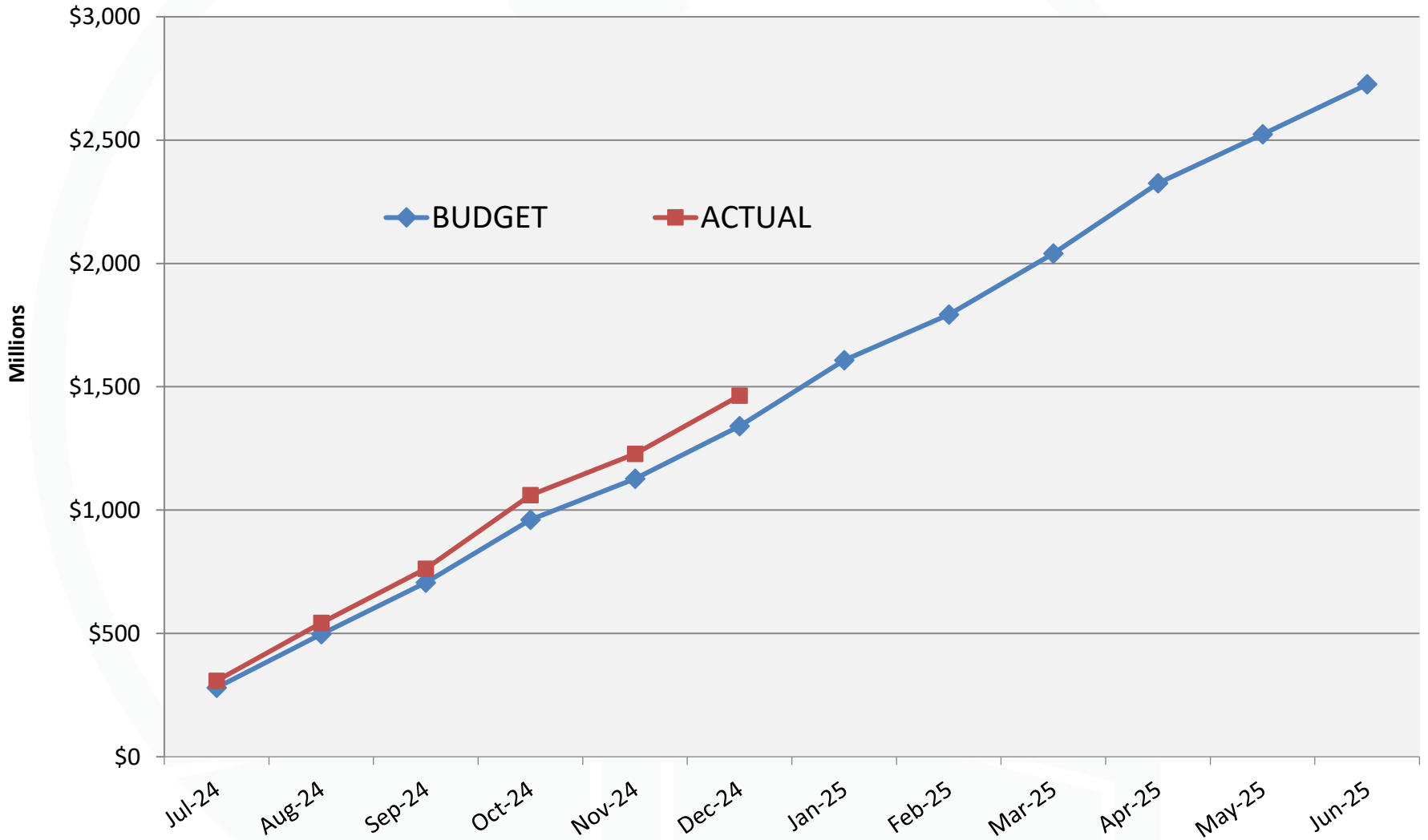
GIC Appropriation for Premium Accounts FY25 Budgeted vs. Actual as of January 31, 2025



GIC Appropriation for Premium Accounts FY25 Budgeted vs. Actual as of January 31, 2025



GIC Appropriation for Premium Accounts FY25 Budgeted vs. Actual to Date Cumulative



FY2025 State Share Premium Budget for GIC Premium Accounts as of January 31, 2025



	BUDGET	EXPENSES	Under Budget / (Over Budget)	% VAR
Basic Life & Health*				
Account #1108-5200 & #1599-6152	\$1,600,622,714	1,743,236,130	(\$142,613,415)	-8.9%
Active Dental & Vision Benefits				
Account #1108-5500	\$7,016,416	6,907,532	\$108,884	1.6%
State Share YTD	\$1,607,639,130	1,750,143,662	(\$142,504,531)	-8.9%



OTHER BUSINESS / ADJOURNMENT

Valerie Sullivan, Chair
& **Matthew Veno**, Executive Director

2025 Group Insurance Commission Meetings & Schedule

January 16	February 6	February 27	April 17	May 15
June 18	September 18	October 16	November 20	December 18

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.

Note: Topics and meeting dates are subject to change

Appendix

Commission Members

GIC Leadership Team

GIC Goals

GIC Contact Channels

Commission Members



Valerie Sullivan, Public Member, Chair



Bobbi Kaplan, NAGE, Vice-Chair



Michael Caljouw, Commissioner of Insurance



Matthew Gorzkowicz, Secretary of Administration & Finance



Elizabeth Chabot, NAGE



Patricia Jennings, Public Member



Edward Tobey Choate, Public Member



Eileen P. McAnneny, Public Member



Tamara P. Davis, Public Member



Melissa Murphy-Rodrigues, Mass Municipal Association



Jane Edmonds, Retiree Member



Jason Silva, Mass Municipal Association



Joseph Gentile, Public Safety Member



Anna Sinaiko, Health Economist



Gerzino Guirand, Council 93, AFSCME, AFL-CIO



Timothy D. Sullivan, Massachusetts Teachers Association



Catherine West, Public Member

GIC Leadership Team

Matthew A. Veno, Executive Director

Erika Scibelli, Deputy Executive Director

Emily Williams, Chief of Staff

James Rust, Chief Financial Officer

Paul Murphy, Director of Operations

Andrew Stern, General Counsel

Stephanie Sutliff, Chief Information Officer

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 from GIC (email, phone, mail)
Email	gicpublicinfo@mass.gov	
Telephone	(617) 727-2310, M-F from 8:45 AM to 5:00 PM	
Office location	1 Ashburton Place, Suite 1413, Boston, MA, Not open for walk-in service	
Correspondence & Paper Forms	P.O. Box 556 Randolph, MA 02368	Allow for processing time. Priority given to requests to retain or access benefits

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
Mass General Brigham Health Plan	(866) 567-9175	massgeneralbrighamhealthplan.com/gic-members
Harvard Pilgrim Health Care	(844) 442-7324	point32health.org/gic
Health New England	(800) 842-4464	hne.com/gic
Tufts Health Plan (Medicare Only)	(855) 852-1016	Tuftshealthplan.com/gic
Wellpoint Non-Medicare Plans Medicare Plans	(833) 663-4176 (800) 442-9300	wellpoint.com/mass