



COMMISSION MEETING

MARCH 2, 2023

(Public Notice: G.L. C-30A, Sec. 20, February 28, 2023)

Topic	Speaker	Schedule
I Minutes, February 16, 2023 (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	8:45-9:00
III FY24 Rates (VOTE) <ul style="list-style-type: none"> • Elderly Government Retiree rate stabilization reserve (vote) • Non-Medicare and Medicare plan rates (vote) • Municipal Administrative Fee (vote) 	Jim Rust, Chief Financial Officer Margaret Anshutz, Director of Health Policy & Analytics	9:00-9:45
IV. Other Business & Adjournment	Valerie Sullivan, Chair Matthew Veno, Executive Director	9:45-10:00

Motion

That the Commission hereby approves the minutes of its meeting held on February 16, 2023 as presented.

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



II. Executive Director's Report (INFORM)

Matthew Veno,
Executive Director

Members of Senior Staff

Projected 2023 Calendar*

Public Info Sessions			Annual Enrollment Info Sessions								
Stakeholder Engagement			FY24 Annual Enrollment					Fall buy-out			
Jan 19	Feb 16	Mar 2	Apr	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	No Meeting	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	Annual enrollment sessions		Report: Out of Pocket	Modernization Update						
				Behavioral Health Update	Carrier Performance Guarantees Update						

* Topics and meeting dates are subject to change



III. FY24 Subsidies & Rates (INFORM & VOTE)

James Rust,
Chief Financial Officer

Margaret Anshutz
Director, Health Policy and Analytics



FY24 Dental Plan Rates: Retirees

- The FY24 fully-insured dental rates reflect a slight increase over FY23, as agreed to in the contract executed with MetLife.
- Members in the Retiree Dental plan pay 100% of premiums.

MetLife Retiree Dental Plan	FY23 Fully-Insured Monthly Premium Rate	FY24 Fully-Insured Monthly Premium Rate
Individual	\$28.79	\$29.27
Family	\$69.36	\$70.54

FY24 Dental Plan Rates: Active

- The FY24 fully-insured dental rates reflect a slight increase over FY23, as agreed to in the contract signed with MetLife.
- FY24 is the third year of the contract with MetLife.

MetLife Active Dental Plan	FY23 Fully-Insured Monthly Premium Rate	FY24 Fully-Insured Monthly Premium Rate
Classic Individual	\$39.72	\$40.91
Classic Family	\$123.15	\$126.84
Value Individual	\$28.89	\$29.76
Value Family	\$89.58	\$92.26

FY24 Vision Plan Rates: Active

- For FY24, Davis Vision's fixed administration and vision commodity prices will decrease slightly.
- This is also the third year of the contract with Davis Vision.

Davis Vision Plan	FY24 Self-Insured Monthly Working Rate
Individual	\$1.93
Family	\$5.55

FY24 Active Dental/Vision Plan Rates

The FY24 active dental/vision rates are calculated by adding the FY24 Davis Vision self-insured working rates to the FY24 MetLife fully-insured dental premium rates.

Dental Plan	FY24 MetLife Dental Monthly Premium	FY24 Davis Vision Monthly Working Rate	FY24 Total Monthly Dental/Vision Rate
Classic Individual	\$40.91	\$1.93	\$42.84
Classic Family	\$126.84	\$5.55	\$132.39
Value Individual	\$29.76	\$1.93	\$31.69
Value Family	\$92.26	\$5.55	\$97.81

FY24 Active Dental/Vision Plan Rates: Member Contributions

- Below are the rates participants will pay for dental and vision benefits in FY24
- Participants pay 15% of the managerial dental/vision monthly costs

Dental Plan	Proposed Member Monthly Contribution Rates FY24
Classic Individual	\$6.43
Classic Family	\$19.86
Value Individual	\$4.75
Value Family	\$14.67

**Fiscal Year 2024 Rates:
Rate Stabilization Reserve Allocation for
Elderly Governmental Retirees and their Survivors
(EGRs)**

Returning Rate Stabilization Reserves to Elderly Governmental Retirees (EGRs)

- Through the end of FY18, the EGR program, by statute, was fully-insured and the basic indemnity and Medicare indemnity plans for EGRs had insurance reserve accounts associated with their premiums
- Over the years, excess funds that were returned to the GIC by the carrier were transferred to these reserve accounts, including excess enrollee contributions
- For many years staff has asked the Commission to authorize the use of the funds in the EGR reserve accounts to reduce the basic and Medicare indemnity plan premiums for the EGRs (There are now five EGRs)
- Today we again recommend that the GIC use the EGR reserves to reduce the remaining EGRs' premiums for FY24
- GIC staff recommends the Commission approve the following use of these funds to reduce FY24 monthly premiums for EGRs

Elderly Governmental Retirees: Returning Rate Stabilization Reserves

- Use approximately \$2,400 of the \$64,000 projected EGR rate stabilization reserve balance to offset the insured share of the Fiscal Year 2024 individual, family, and Medicare indemnity plan premiums
- Use approximately \$700 of the \$64,000 projected EGR CIC rate stabilization reserve balance to offset the insured share of the Fiscal Year 2024 individual, family, and Medicare CIC premiums*
- The combined effect of these subsidies is to hold the EGR premiums constant for FY24

*Note that although CIC has been discontinued for GIC enrollees, the EGRs continue to have a CIC reserve, which we recommend using to subsidize their premiums.

Fiscal Year 2024 Monthly EGR Contributions

The table below displays the FY24 EGR share for UniCare basic and Medicare indemnity plans, pending approval of the EGR reserve spending and the FY24 premiums

FY24 EGR Insured Share

Carrier	Product	Tier	EGR Net Monthly Premium
UniCare	Indemnity Plan	Individual	\$10.00
		Family	\$24.00
		Medicare	\$1.10

Motion

That the Commission hereby approves spending from The Elderly Government Retirees (EGRs) rate stabilization and CIC reserves to reduce the Fiscal Year 2024 premiums as presented.

- Valerie Sullivan, Chair
- Bobbi Kaplan, Vice-Chair
- Undersecretary Catharine Hornby (A&F Designee)
- Rebecca Butler (Designee for DOI)
- Elizabeth Chabot
- Adam Chapdelaine
- Edward Tobey Choate
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**Fiscal Year 2024 Full Cost Health Insurance Premium
Presentation and Vote**

Table of Contents

- **Overview of Rate Development Process & Timeline**
- **Executive Summary**
- **Fiscal Year 2024 Full Cost Premiums by Product**
 - Non-Medicare
 - Medicare
- **Vote to Approve Fiscal Year 2024 Rates**
 - Approve recommended Fiscal Year 2024 Non-Medicare and Medicare full cost premiums

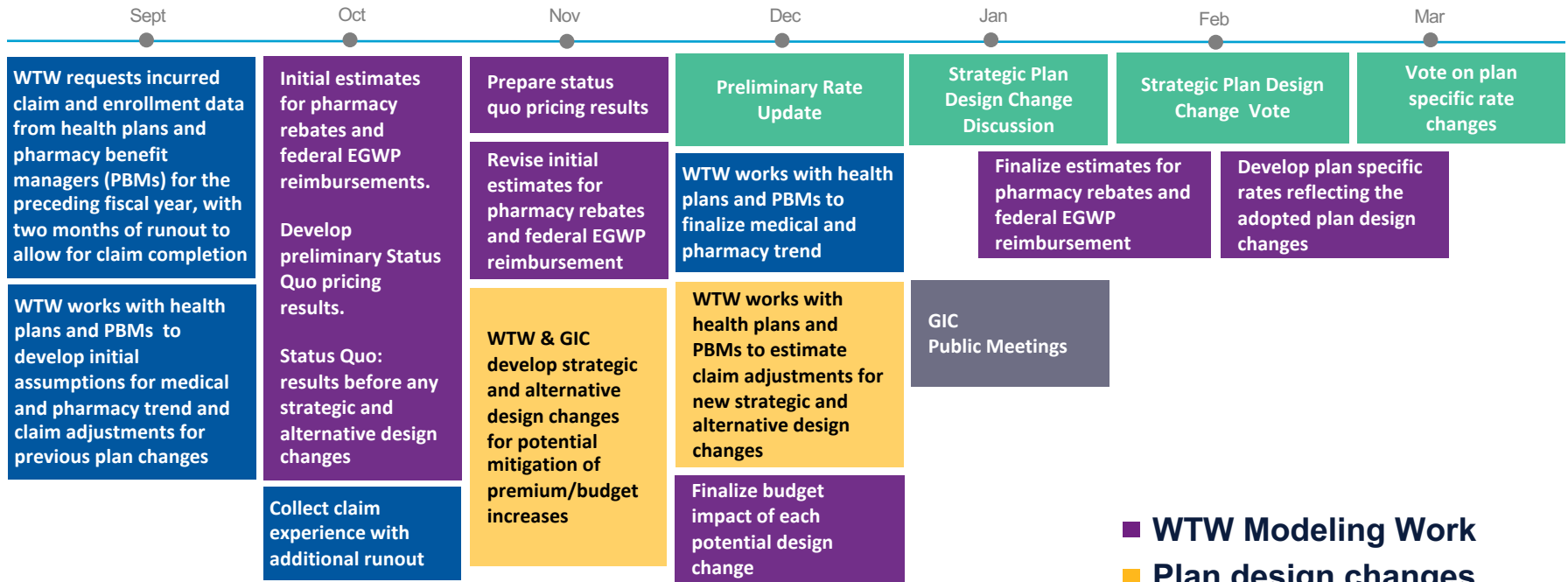
Purpose

Why are we here today?

- The purpose of this discussion is to present proposed Fiscal Year 2024 (FY24) health insurance premiums for a Commission vote. If approved, these rates will be in effect July 1, 2023 – June 30, 2024
- 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 offering Non-Medicare and Medicare plans remain the same, with the exception of Tufts Health Plan and Harvard Pilgrim Health Care which merged into a single entity, Point32 Health; the national plan offering was also moved from UniCare Basic to HPHC All Access

Timeline

What does the process look like?



- WTW Modeling Work
- Plan design changes
- Vendor Reporting
- Commission Meeting/Vote
- Public Meetings

Definitions

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 like copays and deductibles, over the counter items, or other services that are not covered
- The premiums reflected on the following slides reflect the full cost premiums– most members only pay a portion of the full cost premium

Definitions

How are the premiums shared?

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

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

Definitions

Who takes on the risk?

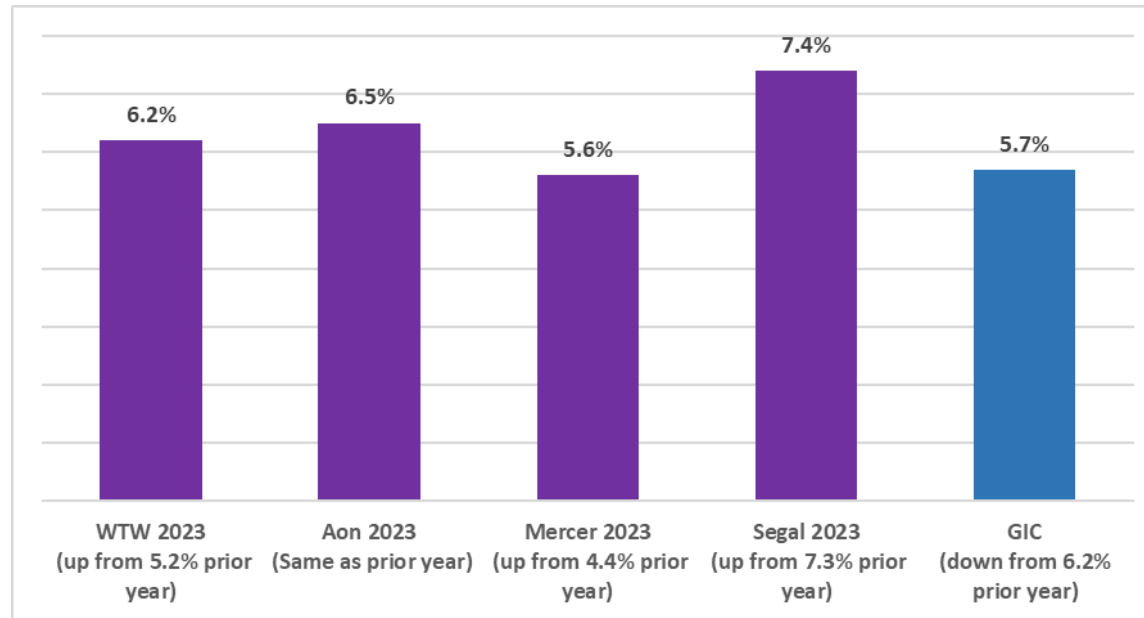
- **The Commonwealth of Massachusetts** takes the risk **for active employees and non-Medicare retirees** by using a **self-insured model** for non-Medicare products and for retirees who purchase Medicare Supplemental plans. This means:
 - If claims exceed the premiums, the GIC must seek additional funds from the Commonwealth 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 built in to profit from risk-taking
 - The Commonwealth pays less in years when claims are lower than the premiums
- **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

Background

What is driving premium increases?

- **Medical 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 are returning to pre-pandemic levels
 - Continuing costs associated with COVID-19
 - Pharmaceutical companies have raised prices for brand name and specialty drugs
- **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 FY21 to FY22

2023 non-Medicare rate increases in context



- For clients with 1000+ members, four major consulting firms projected the above 2023 non-Medicare increase
- GIC's FY24 average non-Medicare increase is 5.7%
- The average 2023 rate increase at the MA Connector is 7.6%

<https://aon.mediaroom.com/2022-08-18-Aon-U-S-Employer-Health-Care-Costs-Projected-to-Increase-6-5-Percent-Next-Year>

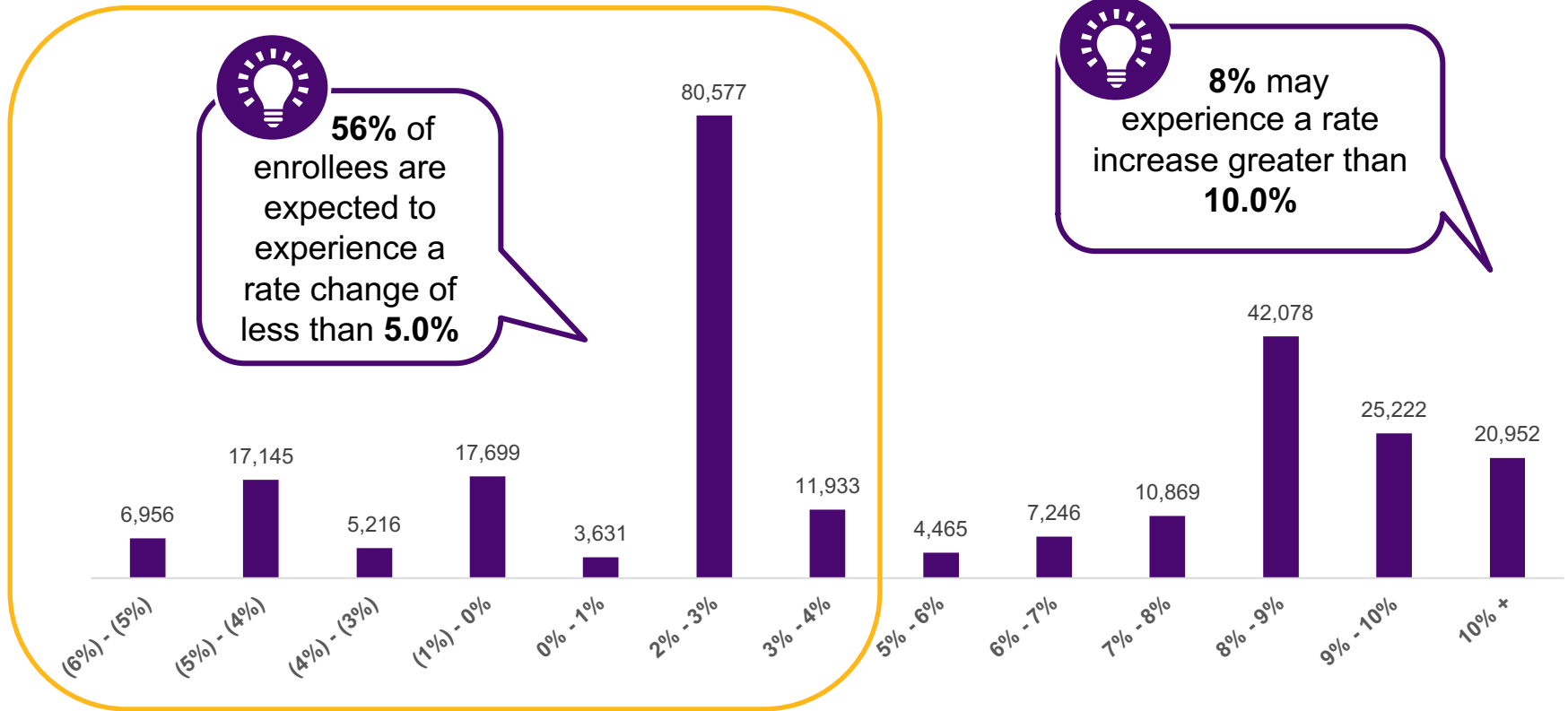
<https://www.mercer.us/newsroom/health-benefit-cost-growth-will-accelerate-in-2023.html>

https://www.segalco.com/media/2989/segal-trend-survey-2023.pdf?utm_source=list_email&utm_medium=email&utm_campaign=2023_segal_HPCTS

<https://www.wtwco.com/en-US/Insights/2023/01/2022-best-practices-in-healthcare-survey>

Executive Summary

GIC initially expected a rate increase in FY24 between 4% - 8%, given market trends. Final aggregate increase across the portfolio is at the low end, with the overall average FY24 premium increase of 5.1% (5.7% non-Medicare 2.3% Medicare) over FY23.



Caveats:

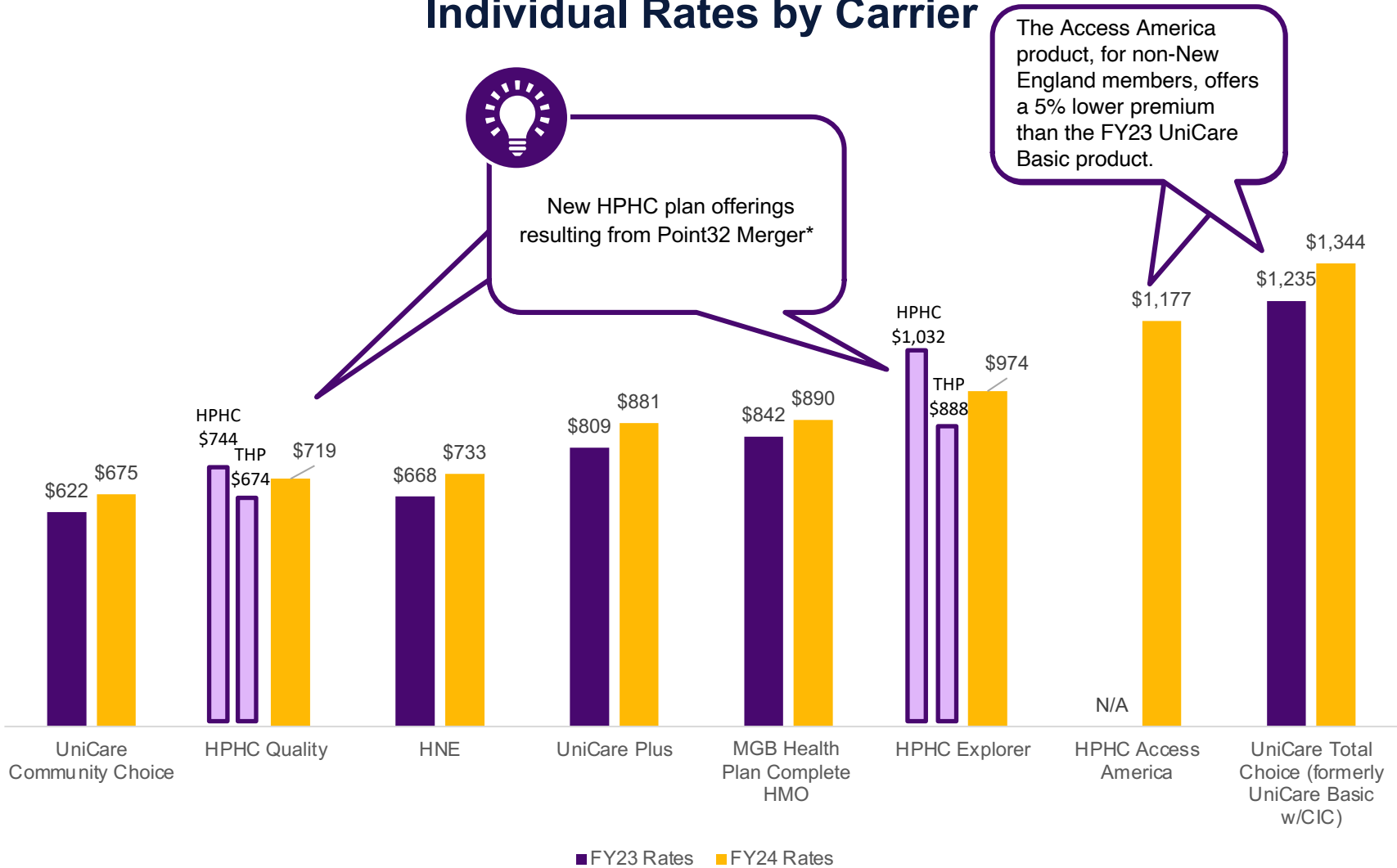
*These are premium rates – not member contributions

* Premium increases reflect changes from HPHC and Tufts to respective Point32 plan offering

*Enrollment as of July 2022 and does not reflect potential migration between plans and member shopping and enrolling in plans that best suit their needs

* Note, rate increases are inclusive of all approved plan design changes and vendor consolidation

Individual Rates by Carrier



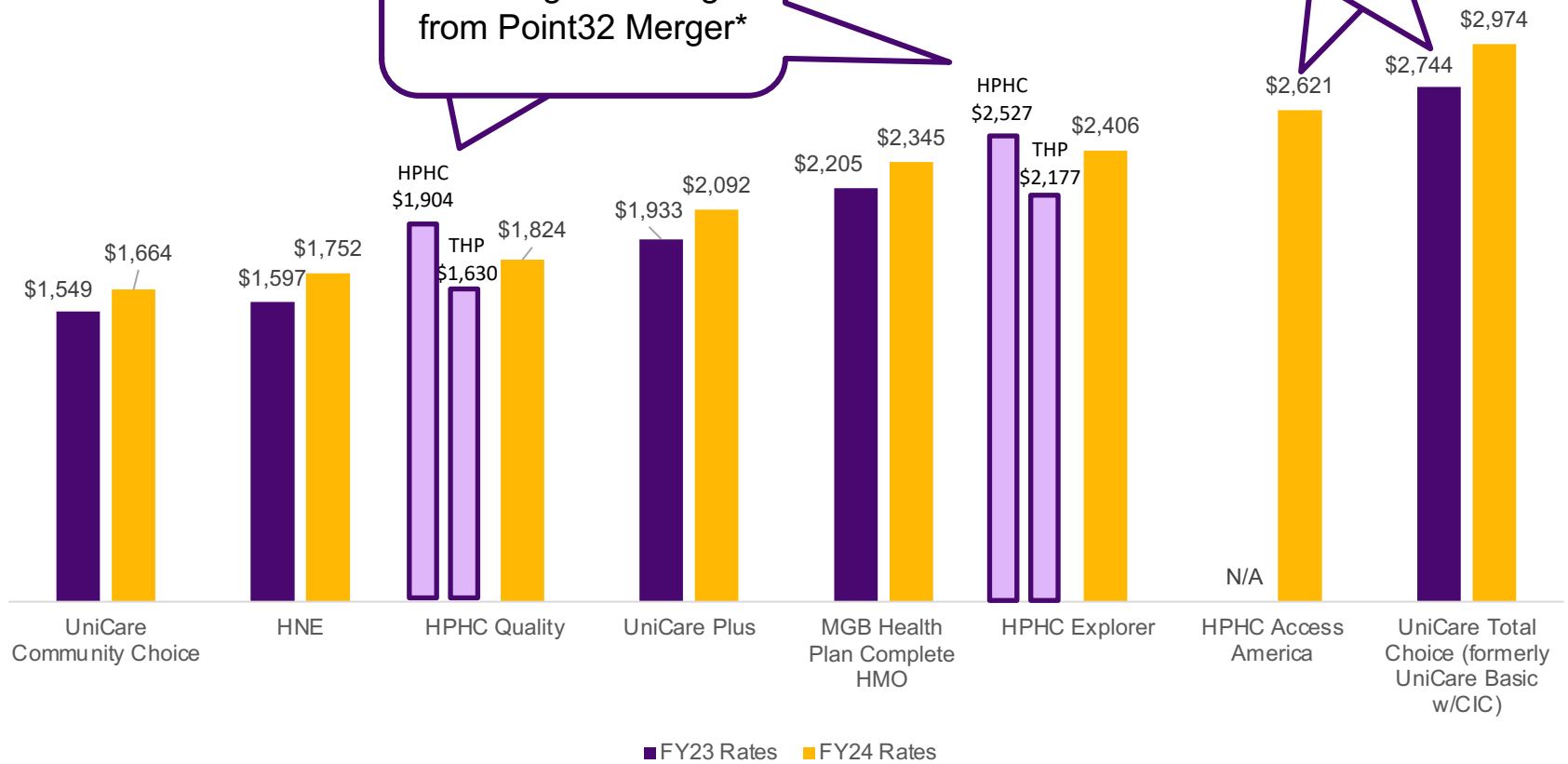
*FY23 rates for HPHC and Tufts broad and narrow plans shown for comparison against FY24 plans offered by Point32 (rates rounded to nearest dollar)

Family Rates by Carrier



New HPHC plan offerings resulting from Point32 Merger*

The Access America product, for non-New England members, offers a 4.5% lower premium than the FY23 UniCare Basic product.



*FY23 rates for HPHC and Tufts broad and narrow plans shown for comparison against FY24 plans offered by Point32 (rates rounded to the nearest dollar)

Fiscal Year 2024 Full Cost Premiums: Non-Medicare

Key Insights

- **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** remain the most expensive; they offer the most generous benefits and maximum choice

Network	Tier	FY23 Plan	FY23 Rates	Current FY23 Enrollment*	FY24 Plan	FY24 Rates	Projected Enrollment**	% Increase Over FY23 Rates
Regional	Individual	HNE	\$667.71	5,636	HNE	\$732.80	5,636	9.7%
	Family		\$1,597.34	6,031		\$1,752.35	6,031	9.7%
Narrow	Individual	UniCare Community Choice	\$621.96	8,724	UniCare Community Choice	\$674.72	8,724	8.5%
	Family		\$1,548.76	10,869		\$1,664.17	10,869	7.5%
	Individual	Tufts Spirit			HPHC Quality	\$719.17	8,535	0.3%
	Family		\$673.71	3,319		\$1,823.77	7,341	-0.7%
	Individual		\$1,629.65	1,805				
	Family		\$744.49	5,216				
Individual	HPHC Primary Choice	\$1,903.87	5,536					
Family								
Broad	Individual	UniCare Plus	\$808.96	9,558	UniCare Plus	\$881.35	9,558	8.9%
	Family		\$1,932.95	12,382		\$2,091.70	12,382	8.2%
	Individual	AllWays Health Partners Complete HMO	\$841.94	4,024	MGB Complete HMO	\$889.83	4,024	5.7%
	Family		\$2,205.02	3,927		\$2,345.38	3,927	6.4%
	Individual	Tufts Navigator			HPHC Explorer	\$973.50	20,511	3.8%
	Family		\$888.49	13,555		\$2,405.64	27,572	4.9%
	Individual		\$2,176.62	18,473				
	Family		\$1,032.93	6,956				
Individual	HPHC Independence	\$2,527.05	9,099					
Family								
National	Individual	UniCare Total Choice (formerly UniCare Basic)			UniCare Total Choice (formerly UniCare Basic)	\$1,344.40	7,443	8.8%
	Family					\$2,974.26	4,645	8.4%
	Individual	UniCare Basic w/o CIC			HPHC Access America	\$1,176.87	1,590	-4.7%
	Family		\$1,176.39	381		\$2,621.18	920	-4.5%
	Individual		\$2,610.11	293				
	Family		\$1,235.38	8,652				
Individual	UniCare Basic w/CIC	\$2,744.42	5,272					
Family								

* Current counts as of July 2022

- Overall average Fiscal Year 2024 premium increase amongst Non-Medicare products is 5.7%
- UniCare Community Choice remains the lowest cost product followed by HPHC Quality and Health New England
- As a result of the HPHC and Tufts Combination, the current HPHC and Tufts plans will be merged into HPHC Explorer (Broad) and HPHC Quality (Narrow). Resulting increments/decrements shown in the chart represent the blended impact of the combined populations.
- AllWays Health Partners Complete HMO is being rebranded as MGB Health Plan Complete HMO
- OOA population of UniCare Basic w/ CIC will move to Point32 National network (HPHC Access America)

Fiscal Year 2024 Member Contributions: Non-Medicare

Network	Plan	Tier	Member Contributions			
			90%/10%	85%/15%	80%/20%	75%/25%
Regional	HNE	Individual	\$73.28	\$109.92	\$146.56	\$183.20
		Family	\$175.24	\$262.85	\$350.47	\$438.09
Narrow	UniCare Community Choice	Individual	\$67.47	\$101.21	\$134.94	\$168.68
		Family	\$166.42	\$249.63	\$332.83	\$416.04
	HPHC Quality	Individual	\$71.92	\$107.88	\$143.83	\$179.79
		Family	\$182.38	\$273.57	\$364.75	\$455.94
Broad	UniCare Plus	Individual	\$88.14	\$132.20	\$176.27	\$220.34
		Family	\$209.17	\$313.76	\$418.34	\$522.93
	MGB Complete HMO	Individual	\$88.98	\$133.47	\$177.97	\$222.46
		Family	\$234.54	\$351.81	\$469.08	\$586.35
	HPHC Explorer	Individual	\$97.35	\$146.03	\$194.70	\$243.38
		Family	\$240.56	\$360.85	\$481.13	\$601.41
	UniCare Total Choice	Individual	\$134.44	\$201.66	\$268.88	\$336.10
		Family	\$297.43	\$446.14	\$594.85	\$743.57
National	HPHC Access America	Individual	\$117.69	\$176.53	\$235.37	\$294.22
		Family	\$262.12	\$393.18	\$524.24	\$655.30

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 2024 Full Cost Premiums: Medicare



Key Insights

- Premium increases across most plans while HNE stays level
- All Medicare Supplement products offer similar value propositions and premiums
- The majority of GIC Medicare-eligible members are in UniCare OME

Product	Tier	FY23 Plan	FY23 Rates	Current FY23 Enrollment*	FY24 Plan	FY24 Rates	Projected Enrollment*	% Increase Over FY23 Rates
Medicare Advantage	Individual	Tufts Medicare Preferred	\$344.39	4,635	Tufts Medicare Preferred	\$351.69	4,635	2.1%
Medicare Supplement	Individual	HPHC Medicare Enhance	\$422.70	17,699	HPHC Medicare Enhance	\$420.58	29,632	1.2%
	Individual	Tufts Medicare Complement	\$404.81	11,933				
	Individual	UniCare OME w/o CIC	\$400.81	441	UniCare OME	\$423.84	76,383	2.8%
	Individual	UniCare OME w/ CIC	\$412.13	75,942				
	Individual	HNE Medicare Supplement Plus	\$429.00	3,631	HNE Medicare Supplement Plus	\$429.00	3,631	0.0%

*Enrollment counts as of July 2022

- Overall average Fiscal Year 2024 premium increase amongst Medicare products is 2.3%
- Tufts Medicare Preferred 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 \$8/month

Fiscal Year 2024 Member Contributions: Medicare

Product	Plan	Tier	Member Contributions			
			90%/10%	85%/15%	80%/20%	75%/25%
Medicare Advantage	Tufts Medicare Preferred	Individual	\$35.17	\$52.75	\$70.34	\$87.92
Medicare Supplement	HPHC Medicare Enhance	Individual	\$42.06	\$63.09	\$84.12	\$105.15
	UniCare OME	Individual	\$42.38	\$63.58	\$84.77	\$105.96
	HNE Medicare Supplement Plus	Individual	\$42.90	\$64.35	\$85.80	\$107.25

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

That the Commission approve the recommended Fiscal Year 2024 full cost premiums as shown on slides 29 and 31

- Valerie Sullivan, Chair
- Bobbi Kaplan, Vice-Chair
- Undersecretary Catharine Hornby (A&F Designee)
- Rebecca Butler (Designee for DOI)
- Elizabeth Chabot
- Adam Chapdelaine
- Edward Tobey Choate
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**Fiscal Year 2024 Rates:
Establishing the Municipal Administrative Fee**

Municipal Administration Fee

The GIC staff recommends setting the Fiscal Year 2024 Municipal Administrative fee to 0.30% of the full cost premiums.

- This represents no change in the municipal administrative fee from the FY23 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 0.30% administrative fee is estimated to yield approximately \$2,600,000 in FY24

Motion

Authorize the GIC to set the Fiscal Year 2024 Municipal Administrative fee at 0.30% of the full cost premiums.

- Valerie Sullivan, Chair
- Bobbi Kaplan, Vice-Chair
- Undersecretary Catharine Hornby (A&F Designee)
- Rebecca Butler (Designee for DOI)
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- Melissa Murphy-Rodrigues
- Timothy D. Sullivan
- Anna Sinaiko



IV. 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 2023 Group Insurance Commission Meetings

January 19	February 16	March 2	April NO MEETING
May 18	June 15	July NO MEETING	August NO MEETING
September 21	October 19	November 16	December 21

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

Matthew Gorzkowicz, 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 Qualifying Events Information Changes	Retirement Life Insurance Marriage Status Changes	Premium Payments Long-Term Disability 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: February 28, 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:

Remote work update:

The GIC staff is continuing our hybrid work model with most employees working primarily on a remote basis, utilizing systems and processes developed to provide strong levels of support to GIC members. Members of the management team and others are coming into our office in the McCormack Building on a regular basis as well, and the workspace reservation system implemented in partnership with Stonewall Solutions is working well. We have worked with DCAMM to ensure that the GIC has the in-office facilities required to support our work, and we will continue to work with them as we implement modifications and upgrades to the GIC office space going forward. All GIC employees who are working remotely have completed and returned Telework Agreements developed by the Human Resources Division that clarify the Commonwealth's expectations for employees who are working from their homes.

COMMUNICATIONS:

Please note communications messages, methods, and audiences are subject to change.

Implementation of the GIC's comprehensive Annual Enrollment communications strategy is well underway, with methods and audiences highlighted below.

- **GIC Member Benefit Statements (COMPLETED)**

GIC staff sent an email blast to Members registered for the MyGICLink portal, reminding them to log in to review their benefits and make corrections/updates. Members not yet registered for MyGICLink received a printed benefit statement that also encourages them to review their benefits to ensure their information is accurate before Annual Enrollment. The mailing also provides a reminder to register for the MyGICLink portal.

- **Annual Public Information Sessions (COMPLETED)**

Following the January Annual Public Information Sessions, GIC sent an email blast to members sharing resources from the sessions, including links to the YouTube recordings, slide presentation and FAQs. GIC staff will present a more detailed report on the sessions during this month's Commission meeting.

- **GIC Member Annual Enrollment Information Sessions**

For the first time this year, GIC will offer members an additional opportunity to engage with members of GIC senior staff ahead of Annual Enrollment. In a format similar to the Public Information Sessions, members will be able to join a Zoom Webinar to hear a presentation from the GIC about Annual Enrollment and learn what is changing and how best to evaluate their options. Members may also ask written questions and receive real-time answers in the webinar Q&A chat function.

Members will be notified of the sessions through the following methods:

- Social media – LinkedIn, Twitter (*General Public*)
- GIC website (*General Public*)
- Email marketing (*GIC Coordinators, and Members on MyGICLink*)
- MyGICLink Portal (*Members on MyGICLink*)
- Collaborations (*GIC Members*)
 - Human Resources Division (HRD)
 - Mass Retirees
 - Massachusetts State Retirement Board (MSRB)
 - GIC Municipal leaders and HR Directors
 - Labor, AFL-CIO and others
 - Legislators and staff

- **Annual Enrollment Mailings**

In addition to communicating through the MyGICLink member portal, the GIC will send a printed mailing to all members to remind them about Annual Enrollment and inform them of where to find resources. We will also be working with carriers to send targeted mailings to segmented populations. More details are below:

- GIC Benefit Guides (*GIC Members*)
 - Print mailing before Annual Enrollment starting date (*GIC Retirees*)
 - Mass.gov/GIC website (*General Public, GIC Members*)
- Printed Letter (*GIC Members*)
 - A printed letter will be sent to all GIC members urging them to review their options and shop during Annual Enrollment. The letter will include information about how to review the Benefit guides, where to find health plan information on the GIC website, and how to register for MyGICLink.
- Printed Letter (*GIC Members affected by FY24 updates*)

- We are collaborating with our health and pharmacy vendors to send targeted members letters explaining the changes from their FY23 benefits and providing a clear explanation of options and resources for FY24.

- **GIC Website Updates**

We are making updates to our website to enhance member experience and to ensure members are provided with all of the information necessary to make informed choices during Annual Enrollment. Some of those updates include:

- Enroll In or Update Your GIC Benefits Page
 - MyGICLink Resources & Tutorials (*GIC Members registered for MyGICLink*)
 - GIC Online Forms
 - GIC Print Forms
 - Annual Enrollment ADA-friendly forms
- Alert Banner about Annual Enrollment
- News & Announcements Page
 - Sample letter being sent out by each carrier
 - Sample letter being sent out by GIC
 - Default enrollments if no member action is taken during Annual Enrollment
 - Network changes (reclassifications) & eligibility changes based on geography
 - Annual Enrollment updates & what members need to do
 - Annual Enrollment dates & ways to update / enroll in benefits during annual enrollment
 - Health plan name changes/mergers
- Annual Enrollment Page
 - Benefit Guides
 - Carrier & vendor benefit presentations
 - Hospital list
 - Benefit rates
 - MyGICLink
- Carriers & Vendors Pages
 - Carrier & vendor benefit presentations
 - New FY24 Pages
- GIC Coordinators Page
 - Coordinators resources & manual
 - 2023-2024 Coordinator training
- Glossary Page
- New Frequently Asked Questions Page

- New Resources Page

- **Social Media Campaign (*General Public, GIC Members*)**
 - We will be leveraging GIC social media channels to share information about MyGICLink registration; making Annual Enrollment changes; Annual Enrollment dates & deadlines

- **MyGICLink Member Benefits Portal (*GIC Members registered for MyGICLink*)**
 - Notification banner highlighting Annual Enrollment on login page for members

- **GIC Coordinator Annual Enrollment Information Email (*GIC Coordinators*)**
 - In preparation for Annual Enrollment, this email provides annual enrollment information to help coordinators guide GIC members and answer questions they might have.

- **GIC Coordinator Annual Enrollment Email for GIC Members (*GIC Coordinators and Members*)**
 - We will be relying on our relationship with our agency GIC Coordinators to reach employees in their agencies through e-mails

- **Rate Sheets and Default Enrollment Sheets shared with Municipalities**