

UUA Employee Benefits Trust Trustees Meeting

MINUTES

FEBRUARY 5, 2016

10:00 A.M. EST

TELECONFERENCE

ATTENDEES	Trustees: Jan Sammons, Barbara Johnson (Chair), Tom Loughrey, Suzyn Smith Webb, John Vogt, Larry Ladd UUA Staff: Jim Sargent, Patti Angelina, Rachael Brennan, Richard Nugent, Rob Molla, Kati McDonald
PRESENTER	Staff

Agenda topics

CALL TO ORDER

10:00 AM	Check-in and appointment of a process reviewer	BARBARA JOHNSON
----------	--	-----------------

10:10 AM	BENCHMARK PROGRESS REVIEW	JIM SARGENT/ BOARD DISCUSSION
----------	---------------------------	----------------------------------

PRESENTATION & DISCUSSION	<p>Jim Sargent presented the annual review of progress against the formal benchmarks established by the EBT Board and periodically updated. Results by each approved critical measure:</p> <ol style="list-style-type: none"> 1. Achieve increasing membership. Continued pressure from ACA plans and the loss of most of our COBRA membership has caused membership to be between flat and a slight decline. 2016 projections have been adjusted accordingly. 2. % of congregations participating. We expect to see a slight decline in active congregations, as participating congregations continue to explore their ACA options. 3. Adequate financial reserves. Reserves exceed the minimum target set by the EBT and the Plan actuaries. During 2016, we will need to consider returning to a policy of adding explicit margin to our rates for 2017. 4. Competitive premium pricing. The 8-year compound growth rate continues well below the rate of medical inflation. We now face organized, government-sponsored competition, with rates and rate increases varying widely by state, making competitive benchmarking nearly impossible. For at least another year, we also face the competitive disadvantage of not being able to offer the same tax incentives available in the ACA small business market. 5. Member health. The Plan continues to outperform Highmark PPO benchmarks for all HEDIS measures. Year-over-year improvement has been more difficult to achieve, which underscores the importance of the decision to introduce enhanced clinical engagement programs for 2015. 6. Increase the percentage of congregational staff with access to health insurance. Before the advent of the ACA, the Plan significantly improved access to high quality, affordable health insurance. In theory, access is now at 100%. The Board is now shifting its focus from availability to affordability, looking at how congregations expand plan choices and offer financial support for employee purchase of coverage. 7. Maintain a high level of member and congregation satisfaction with the Plan. Because Highmark member survey data is aggregated, and survey participation by UUA Plan subscribers does not reach a statistically valid level, the Plan relies on an analysis of member complaints and all problem resolution activities. All measures were satisfactory in 2015. 8. Improve enterprise risk management. This is an evolving measure. Currently, the Plan uses the standard "No avoidable legal or regulatory actions." Over the course of 2016, the Board will continue to explore an expansion of the measures to include data protection from breaches such as occurred at Anthem Blue Cross and a formal assessment of the competitive risk posed by the ACA.
--------------------------------------	--

10:50 AM	2015 CASH FLOW ANALYSIS, COMPLETE Jim reviewed the calendar year operating results in the format used throughout the year to project rates for the next calendar year. Overall, the Plan had an operating	Jim Sargent
----------	--	-------------

