

FY 2019 INSURANCE FUNDING SCHEDULE - 7.5%					
FY 2018-2019 INSURANCE RATES					
Medical Rates	Monthly	Bi-weekly	Current Rates	Increase to ER and EE	% of Inc
Individual (County Pays)	860.00		800.00	60.00	7.50%
Employee/Child	1,070.00	96.92	96.92	0.00	0.00%
Employee/Children	1,170.00	143.08	143.08	(0.00)	0.00%
Employee/Spouse	1,170.00	143.08	143.08	(0.00)	0.00%
Family	1,280.00	193.85	193.85	(0.00)	0.00%
Dental Rates					
Dental Rates	Monthly	Bi-weekly	Current Rates	Increase to ER and EE	
Individual (County Pays)	27.00		25.00	2.00	8.00%
Employee/Child	49.00	10.15	10.15	0.00	0.04%
Employee/Children	61.00	15.69	15.69	0.00	0.01%
Employee/Spouse	61.00	15.69	15.69	0.00	0.01%
Family	83.00	25.85	25.85	(0.00)	-0.01%
Combined Medical /Dental					
Combined Medical /Dental	Monthly	Bi-weekly	Total Current	Current Bi-Weekly	
Individual (County Pays)	887.00		825.00		
Employee/Child	1,119.00	107.08	994.86	107.07	0.01
Employee/Children	1,231.00	158.77	1,106.12	158.77	(0.00)
Employee/Spouse	1,231.00	158.77	1,106.12	158.77	(0.00)
Family	1,363.00	219.69	1,238.41	219.70	(0.01)
FY 2018-2019 FUNDING AMOUNTS					
Medical Rates	Monthly	# Subscribers	Monthly Totals	Annual Totals	
Individual (County Pays)	860.00	262	225,320.00	2,703,840.00	
Employee/Children	1,170.00	59	69,030.00	828,360.00	
Employee/Spouse	1,170.00	59	69,030.00	828,360.00	
Family	1,280.00	45	57,600.00	691,200.00	
Total		425	\$ 420,980.00	\$ 5,051,760.00	
Dental	Monthly	# Subscribers	Totals	Annual Totals	
Individual (County Pays)	27.00	262	7,074.00	84,888.00	
Employee/Children/Sp	61.00	118	7,198.00	86,376.00	
Family	83.00	45	3,735.00	44,820.00	
Total		425	\$ 18,007.00	\$ 216,084.00	
Employer Rate Per Employee	\$ 10,644.00				
County Funding:			Medical	5,051,760.00	
\$ 4,523,700.00			Dental	216,084.00	
				\$ 5,267,844.00	
			Retiree Insurance	\$ 820,822.92	
			Hartford	\$ (363,130.92)	
			Potential Drug Savings	\$ 300,000.00	
			Retiree Drug Subsidy	\$ -	
			Total Funding	\$ 6,025,536.00	
NEW YEAR COST PROJECTION					
			Fixed Costs	\$ 537,078.16	
			Expected Claims	\$ 5,430,779.04	
			Aggregate Spec Liability	\$ 50,000.00	
				\$ 6,017,857.20	
			Add to Reserves	\$ 7,678.80	

Jackson County, North Carolina
2018 Stop Loss Renewal

EE 258 ES 58 Total EEs
EF 45 EC 56 417



CARRIER	FIRM HCC 15/12	FIRM HCC 15/12
SPECIFIC CONTRACT		
BENEFITS INCLUDED	Medical & Rx	Medical & Rx
SPECIFIC DEDUCTIBLE	\$ 100,000.00	\$ 125,000.00
Lasers	1 @ \$300k con	1 @ \$300k con
Agg/Spec	\$50,000.00	\$50,000.00
Monthly Specific Premium		
Single	\$62.04	\$49.85
EE/Spouse	\$123.58	\$99.31
EE/Child	\$109.37	\$87.89
Family	\$185.61	\$149.15
Annual Specific Premium	\$ 451,813.56	\$ 363,058.44
Annual Aggregate Premium	\$28,873.08	\$30,024.00
Insured Transplant Policy	Tethys	Tethys
Single	\$ 4.51	\$ 4.51
Family	\$ 10.37	\$ 10.37
Annual Transplant Premium	\$ 33,748.92	\$ 33,748.92
TOTAL ANNUAL SL PREMIUM	\$ 514,435.56	\$ 426,831.36
Administrative Fees PEPM		
Medical Administration	\$ 15.00	
Crescent Network Access	\$ 2.25	
Data Analytics	\$ 1.30	
Health Management	\$ 4.40	
Disease Management	\$ 3.50	
Dental Administration	\$ 2.00	
TOTAL Admin Fee PEPM	\$ 28.45	
Annual Administrative Fees	\$ 142,363.80	\$ 142,363.80
Rx Rebates	\$ 32,117.00	\$ 32,117.00
TOTAL ANNUAL FIXED COSTS	\$ 624,682.36	\$ 537,078.16
AGGREGATE CONTRACT	15/12	15/12
BENEFITS INCLUDED	Medical & Rx	Medical & Rx
Corridor	125%	125%
Expected Claims	\$ 5,103,942.53	\$ 5,430,779.04
Monthly Aggregate Claim Factors		
Single	\$ 876.02	\$ 932.12
EE/Spouse	\$ 1,745.03	\$ 1,856.77
EE/Child	\$ 1,544.43	\$ 1,643.33
Family	\$ 2,621.06	\$ 2,788.89
Maximum Claims	\$ 6,379,928.16	\$ 6,788,473.80
TOTAL EXPECTED COSTS	\$ 5,728,624.89	\$ 5,967,857.20
MAXIMUM COSTS	\$ 7,004,610.52	\$ 7,325,551.96
Aggregating/Specific Liability	\$50,000.00	\$50,000.00
TOTAL MAXIMUM COSTS	\$7,054,610.52	\$7,375,551.96

JACKSON COUNTY HEALTH PLAN

ANNUAL REVIEW

May 22, 2018

- I. Crescent Health Solutions
 - Annual Review
 - Crescent Network – Oversight
 - PharmAvail Termination
- II. Open Enrollment Comments
 - Danielle Wittekind, HR Director
 - Others
- III. Plan Changes
 - Renewed with Crescent – 3 year guarantee (administration costs)
 - New PBM – Sona Pharmacy
 - Retirees switched Medicare Supplement from AARP to Hartford Insurance
 - Retirees switched to Medicare Part D insured by Express Scripts
 - BENISTAR Administration Servicing will administer Retiree Group Plan
 - Adjusted Out-of-pocket Maximum to new ACA limits (within Rx)
 - Increased Specific Stop-Loss to \$125,000
 - Increased on rates within the plan
 - Summary Plan Description (SPD) changes
- IV. Renewal for Plan Year 2018-2019
 - RFP's sent to ten carriers
 - Nine TPA's responded with proposals
 - Looked at \$100,000 and \$125,000 Specific Stop-Loss
 - County chose to stay with Crescent with HCC as the re-insurer
- V. Questions/Comments
 - Other

FY 2018 INSURANCE FUNDING SCHEDULE - 7.57% INCREASE ER

FY 2017-2018 INSURANCE RATES

Medical Rates	Monthly	Bi-weekly	Current Rates	Increase to ER and EE	% of Inc
Individual (County Pays)	800.00		744.13	55.87	7.51%
Employee/Child	1,010.00	96.92	95.36	1.56	1.64%
Employee/Children	1,110.00	143.08	141.14	1.94	1.37%
Employee/Spouse	1,110.00	143.08	141.14	1.94	1.37%
Family	1,220.00	193.85	191.82	2.03	1.06%

Dental Rates	Monthly	Bi-weekly	Current Rates	Increase to ER and EE	
Individual (County Pays)	25.00		22.79	2.21	9.70%
Employee/Child	47.00	10.15	9.84	0.31	3.19%
Employee/Children	59.00	15.69	15.41	0.28	1.83%
Employee/Spouse	59.00	15.69	15.41	0.28	1.83%
Family	81.00	25.85	25.79	0.06	0.22%

Combined Medical /Dental	Monthly	Bi-weekly	Total Current	Current Bi-Weekly	
Individual (County Pays)	825.00		766.92		
Employee/Child	1,057.00	107.08	994.86	105.20	1.88
Employee/Children	1,169.00	158.77	1,106.12	156.55	2.22
Employee/Spouse	1,169.00	158.77	1,106.12	156.55	2.22
Family	1,301.00	219.69	1,238.41	217.61	2.08

FY 2017-2018 FUNDING AMOUNTS

Medical Rates	Monthly	# Subscribers	Monthly Totals	Annual Totals
Individual (County Pays)	800.00	265	212,000.00	2,544,000.00
Employee/Children	1,110.00	57	63,270.00	759,240.00
Employee/Spouse	1,110.00	55	61,050.00	732,600.00
Family	1,220.00	45	54,900.00	658,800.00
Total		422	\$ 391,220.00	\$ 4,694,640.00

Dental	Monthly	# Subscribers	Totals	Annual Totals
Individual (County Pays)	25.00	265	6,625.00	79,500.00
Employee/Children/Sp	59.00	112	6,608.00	79,296.00
Family	81.00	45	3,645.00	43,740.00
Total		422	\$ 16,878.00	\$ 202,536.00

Employer Rate Per Employee \$ 9,900.00

County Funding:		Medical	4,694,640.00
\$ 4,177,800.00		Dental	202,536.00
			\$ 4,897,176.00

Reserve at 3/31/17:	Monthly Co-Current	Retiree Insurance	\$ 915,478.61
\$14,954.22	9,203.04	AARP	\$ (156,026.04)
	696.96	Retiree Drug Subsidy	\$ 45,000.00
	7.57%		
		Total Funding	\$ 5,701,628.57

Reserve Goal:			
10 x Specific Stop Loss of \$100,000		Current	\$ 5,210,866.17
		5%	\$ 5,586,716.85
		10%	\$ 5,858,037.94

Potential Drug Savings: \$ 500,000.00

2017

Jackson County Government

EE 270 EC 42 ES 54 420



CARRIER

CONTRACT
SPECIFIC DEDUCTIBLE

	ARCH-CURRENT 18/12 \$ 100,000.00	ARCH-RENEWAL 18/12 \$ 100,000.00 \$200K Laser - Mathis	FINAL ARCH 18/12 \$ 100,000.00 NO LASER 50k Agg/Spec	FINAL ARCH 15/12 \$ 100,000.00 NO LASER 50k Agg/Spec	FINAL ARCH 18/12 \$ 125,000.00 NO LASER 50k Agg/Spec	FINAL ARCH 15/12 \$ 125,000.00 NO LASER 50k Agg/Spec
Monthly Specific Premium						
Single	\$61.37	\$ 71.37	\$83.32	\$61.16	\$51.97	\$50.15
EE/Spouse	\$117.71	\$ 137.95	\$121.92	\$117.61	\$99.30	\$95.68
EE/Child	\$104.70	\$ 122.58	\$108.39	\$104.58	\$88.37	\$85.17
Family	\$174.49	\$ 205.07	\$180.99	\$174.53	\$147.02	\$141.59
Annual Specific Premium	\$ 430,903.44	\$ 503,417.52	\$ 445,616.64	\$ 430,100.64	\$ 364,091.04	\$ 334,710.00
Annual Aggregate Premium	\$29,786.40	\$ 29,534.40	\$ 29,433.60	\$ 29,181.60	\$ 34,927.20	\$ 34,574.40
Monthly Transplant Premium						
Single	\$ 4.29	\$ 4.29	\$ 4.29	\$ 4.29	\$ 4.29	\$ 4.29
Family	\$ 9.78	\$ 9.78	\$ 9.78	\$ 9.78	\$ 9.78	\$ 9.78
Annual Transplant Premium	\$ 10,758.60	\$ 10,758.60	\$ 10,758.60	\$ 10,758.60	\$ 10,758.60	\$ 10,758.60
TOTAL ANNUAL SL PREMIUM	\$ 471,448.44	\$ 543,710.52	\$ 485,808.84	\$ 470,040.84	\$ 409,776.84	\$ 380,043.00

Administrative Fees PEPM
Claims Administration \$13.50
Network Access \$2.25
Data Analytics \$1.25
Health Management \$4.40
Dental Admin Fee \$1.50
Disease Management \$3.50
TOTAL Admin Fee PEPM \$26.40

Annual Administrative Fees

TOTAL ANNUAL FIXED COSTS

	\$ 133,056.00	\$ 133,056.00	\$ 133,056.00	\$ 133,056.00	\$ 133,056.00	\$ 133,056.00
TOTAL ANNUAL FIXED COSTS	\$ 604,504.44	\$ 676,766.52	\$ 618,864.84	\$ 603,096.84	\$ 542,832.84	\$ 513,099.00

Aggregate Claim Projections

Expected Claims	\$ 4,753,309.25	\$ 5,145,240.38	\$ 5,134,274.50	\$ 5,079,260.16	\$ 5,253,275.52	\$ 5,196,428.93
Monthly Aggregate Claim Factors						
Single	\$ 827.38	\$ 895.61	\$ 893.70	\$ 884.12	\$ 914.41	\$ 904.52
EE/Spouse	\$ 1,648.14	\$ 1,784.05	\$ 1,780.25	\$ 1,761.18	\$ 1,821.51	\$ 1,801.80
EE/Child	\$ 1,458.67	\$ 1,576.96	\$ 1,575.59	\$ 1,558.72	\$ 1,612.12	\$ 1,594.66
Family	\$ 2,475.62	\$ 2,679.65	\$ 2,673.95	\$ 2,645.30	\$ 2,735.94	\$ 2,706.32
Maximum Claims	\$ 5,941,636.56	\$ 6,431,550.48	\$ 6,417,843.12	\$ 6,349,075.20	\$ 6,566,594.40	\$ 6,495,536.16

TOTAL EXPECTED COSTS

TOTAL EXPECTED COSTS	\$ 5,357,813.69	\$ 5,822,006.90	\$ 5,753,139.34	\$ 5,682,357.00	\$ 5,796,108.36	\$ 5,709,527.93
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TOTAL MAXIMUM COSTS

TOTAL MAXIMUM COSTS	\$ 6,546,141.00	\$ 7,108,317.00	\$ 7,036,707.96	\$ 6,952,172.04	\$ 7,109,427.24	\$ 7,008,635.16
TOTAL MAXIMUM COSTS w/ Agg/Spec			\$ 7,086,707.96	\$ 7,002,172.04	\$ 7,159,427.24	\$ 7,058,635.16

*QBE, CRU, SunLife, Bardonn - DTQ

**IMG, AIG - No Response

\$ 5,682,354

2017-18 JACKSON COUNTY

Health Plan Changes

Effective July 1, 2017:

- 1) Move PBM to PharmAvail.
- 2) Change Specialty Rx Co-Pay to \$200.00.
- 3) Change the Rx mail order co-pay to three times the monthly co-pay (see attached).
- 4) Adjust Out-of-Pocket on both plans to meet new ACA guidelines.
- 5) Change Stop-loss contract to 15/12 with a \$50,000 Aggregating Specific.
- 6) Move location and change times for Open Enrollment to better accommodate employees.

Effective Immediately:

Adjust CPT codes for all office surgeries from copay to deductible and coinsurance
Surgery is defined in Summary Plan Description.

Still Under Consideration:

Move Retiree age 65 prescriptions to AARP Part D.

JACKSON COUNTY – STANDARD (NON HRA)

MOOP \$850 INDIVIDUAL \$1700 FAMILY

RETAIL (34 DAYS)	MAIL-ORDER (90 DAYS)
\$4.00 GENERIC	\$8.00 GENERIC
\$55.00 FORMULARY	\$110.00 FORMULARY
\$70.00 NON-FORMULARY	\$140.00 NON-FORMULARY
\$100.00 SPECIALTY MEDICATION	

JACKSON COUNTY – ENHANCED (HRA)

MOOP \$2350 INDIVIDUAL \$4700 FAMILY

RETAIL (34 DAYS)	MAIL-ORDER (90 DAYS)
\$4.00 GENERIC	\$8.00 GENERIC
\$45.00 FORMULARY	\$90.00 FORMULARY
\$60.00 NON-FORMULARY	\$120.00 NON-FORMULARY
\$100.00 SPECIALTY MEDICATION	

PROPOSED CHANGES FOR JULY 1, 2017 **JACKSON COUNTY – STANDARD (NON HRA)**

MOOP \$850 INDIVIDUAL \$1700 FAMILY

RETAIL (34 DAYS)	MAIL-ORDER (90 DAYS)
\$4.00 GENERIC	\$12.00 GENERIC
\$55.00 FORMULARY	\$165.00 FORMULARY
\$70.00 NON-FORMULARY	\$210.00 NON-FORMULARY
\$200.00 SPECIALTY MEDICATION	

JACKSON COUNTY – ENHANCED (HRA)

MOOP \$2350 INDIVIDUAL \$4700 FAMILY

RETAIL (34 DAYS)	MAIL-ORDER (90 DAYS)
\$4.00 GENERIC	\$12.00 GENERIC
\$45.00 FORMULARY	\$135.00 FORMULARY
\$60.00 NON-FORMULARY	\$180.00 NON-FORMULARY
\$200.00 SPECIALTY MEDICATION	

FY 2017 INSURANCE FUNDING SCHEDULE

FY 2016-2017 INSURANCE RATES

Medical Rates	Monthly	Bi-weekly
Individual (County Pays)	744.13	
Employee/Child	950.75	95.36
Employee/Children	1,049.93	141.14
Employee/Spouse	1,049.93	141.14
Family	1,159.74	191.82

Dental Rates	Monthly	Bi-weekly
Individual (County Pays)	22.79	
Employee/Child	44.11	9.84
Employee/Children	56.19	15.41
Employee/Spouse	56.19	15.41
Family	78.67	25.79

Combined Medical /Dental	Monthly	Bi-weekly
Individual (County Pays)	766.92	
Employee/Child	994.86	105.20
Employee/Children	1,106.12	156.55
Employee/Spouse	1,106.12	156.55
Family	1,238.41	217.61

FY 2016-2017 FUNDING AMOUNTS

Medical Rates	Monthly	# Subscribers	Monthly Totals	Annual Totals
Individual (County Pays)	744.13	264	196,449.79	2,357,397.50
Employee/Children	1,049.93	57	59,845.90	718,150.75
Employee/Spouse	1,049.93	53	55,646.18	667,754.21
Family	1,159.74	38	44,070.16	528,841.90
Total		412	\$ 356,012.03	\$ 4,272,144.36

Dental	Monthly	# Subscribers	Totals	Annual Totals
Individual (County Pays)	22.79	264	6,017.09	72,205.06
Employee/Children/Sp	56.19	110	6,180.68	74,168.16
Family	78.67	38	2,989.54	35,874.43
Total		412	\$ 15,187.30	\$ 182,247.65

County Funding:	Medical	4,272,144.36
\$3,791,652.48	Dental	182,247.65
		\$ 4,454,392.01
Reserve at 3/31/16:	Retiree Insurance	\$ 832,253.28
\$1,163,273.34	AARP	\$ (133,779.12)
	Retiree Drug Subsidy	\$ 38,000.00
	Total Funding	\$ 5,190,866.17

JACKSON COUNTY MAY 1, 2016

CARRIER:

CONTRACT:

SPECIFIC:

current - ARCH

18\12

\$100,000.00

FIRM&FINAL

ARCH-RENEWAL

18\12

\$100,000.00

PREMIUM

Single Premium:

EE/Spouse:

EE/Child:

Family Premium:

\$	61.37
\$	117.71
\$	104.70
\$	174.49

ANNUAL SPEC PREMIUM

\$ 408,531.36

\$ 429,430.56

ANNUAL AGG PREMIUM

\$ 30,346.80

\$ 29,644.56

TOTAL ANNUAL PREMIUM

\$ 438,878.16

\$ 459,075.12

4.5%

ADMINISTRATION

Med and Dental Claims ADMIN \$ 15.00

Network Access: \$ 2.25

Commission \$ -

Data Storage and Analytics: \$ 1.50

Health Management: \$ 6.40

\$ 75,240.00

\$ 11,286.00

\$ -

\$ 7,524.00

\$ 32,102.40

\$ 75,240.00

\$ 11,286.00

\$ -

\$ 7,524.00

\$ 32,102.40

TOTAL ADMINISTRATION (\$ 25.15

\$ 126,152.40

\$ 126,152.40

TOTAL FIXED COSTS

\$ 565,030.56

\$ 585,227.52

3.5%

CLAIM FUNDING

Claim Funding Amounts:

EXPECTED CLAIMS

\$ 3,740,537.09

\$ 4,737,383.23

ATTACHMENT POINT

\$ 4,675,671.36

\$ 5,921,729.04

*

TOTAL EXPECTED COSTS

\$ 4,305,567.65

\$ 5,322,610.75

EXPECTED CLAIMS + FIXED COSTS

MAXIMUM LIABILITY

\$ 5,240,701.92

\$ 6,506,956.56

\$ 5,322,610.75



CRESCENT
HEALTH SOLUTIONS

2016 Jackson County

Health Plan Changes

1. **Primary Care** – Copays will be consistent for all PCP visits including Mental Health visits to a Primary Care Physician.
2. **Out-of-Pocket maximums (medical/pharmacy)** – ACA regulations on out-of-pocket (OOP includes deductible, coinsurance, and copays) expenses changed for 2016:
ACA maximum for 2016 = EE only: \$6850 Family: \$13,700
 - a. 2016 Enhanced Plan
 - i. Medical OOP \$4,500 for Individual and \$9,000 for Family.
 - ii. Pharmacy OOP \$2,350 for Individual and \$4,700 for Family
 - b. 2016 Standard Plan
 - i. Medical OOP \$6,000 for Individual and \$12,000 for Family
 - ii. Pharmacy OOP \$850 for an Individual and \$1,700 for Family
3. The County will **add the ALLY Health telemedicine product** as an added benefit for all employees on the Health Plan. Projected cost is \$25,000 (depending on enrollment). Savings to the County are based on reduced Emergency Room, Urgent Care, and Primary Physician visits as well as reduced absenteeism. Projected savings range from \$50,000 to over \$500,000 depending on participation. Promotion, education, and reporting to encourage and reinforce participation by employees are all included in the program

AllyHealth

Telemedicine: \$4.50 /Per Employee Per Month

Prescription Discounts: Free

Medical Bill Negotiation: Free

Pricing Assumptions:

One-time \$3.95 set up fee per customer, which includes the fulfillment of new customer member letters, promotional materials, educational support, and quarterly reports

All employees, dependents, and immediate household members are eligible for services

Rate dependent on employee population within 5% (+/-) of the quoted 413 employees.

Unlimited doctor consultations included with the telemedicine benefit per paid member per year.



JACKSON COUNTY HISTORICAL SAVINGS REPORT

YEAR	ISSUE	SOLUTION	RESULTS
2011	RFP DUE TO INCREASING FIXED COST	CHANGED TPA, ADVISORS, S/L CARRIERS	LOWERED FIXED COST AND ATTACHMENT POINT
2011 - 2012	HIGH COST KIDNEY FAILURE	IMPLEMENTED DIALYSIS CARVEOUT (DCC)	2012-2013 DCC SAVINGS \$369,315
2012 - 2013	HIGH VA HOSPITAL COST	MODIFIED NETWORK	UNDOCUMENTED IMPACT
	HIGH COST TRANSPLANT	2013-2014: ADDED TRANSPLANT POLICY	ADDED AT NO ADDITIONAL COST
	INCREASING STOP LOSS PREMIUM	INCREASED SPEC LEVEL AND CHANGED STOP LOSS CARRIER	SAVED \$165,000 IN PREMIUM AND \$80,000 ON LASER
2013 - 2014	NO HEALTH RISK ASSESSMENT AGGREGATE (HRA) REPORT	CHANGED HRA VENDORS TO "KNOW YOUR NUMBERS"	UNDOCUMENTED COST IMPACT
	INCREASING STOP LOSS PREMIUM	CHANGED STOP LOSS VENDOR	SAVED \$90,000 IN PREMIUM, NO LASERS. LOWERED ATTACHMENT POINT BY \$500,000
	DIALYSIS CARVEOUT CONTRACT (DCC) CONTINUES		2013 - 2014 DCC SAVINGS \$203,546
2014 - 2016	HRA TOBACCO TESTING COST	CHANGED VENDOR	SAVED > \$20,000
	MISSION HEALTH DISCOUNTS	ADDED WNCFC FEE SCHEDULE FOR GREATER DISCOUNTS	MOVED FROM 15% OFF BILLED CHARGES TO 22% OFF BILLED CHARGES. \$168,982.76 IN SAVINGS
	REINSURANCE RENEWAL	CONTINUED AGGRESSIVE RENEWAL STRATEGIES	OFF BILLED CHARGES DESPITE OVER \$300,000 PAYOUT FROM REINSURANCE CARRIER, SECURED AN INCREASE OF ONLY 4%
	HIGH COST SPECIALTY MED/HEP C	CONTACTED REINSURER FOR BEST PRICING	ANTICIPATED \$8,328 IN TOTAL SAVINGS/MEMBER PASSED, ACTUAL SAVINGS \$2,776
	HIGH UTILIZATION ULCER MEDS/PPIS	ADOPTED CAREMARK'S EVIDENCE BASED QUANTITY LIMITS. MAILINGS TO MEMBERS WITH EDUCATION/RATIONALE	SAVED \$25,000 TO DATE COMPARED TO PRIOR YEAR
	HIGH UTILIZATION OF ER/URGENT CARE	IMPLEMENTED ALLY HEALTH (TELE MEDICINE)	PROJECTED ANNUAL SAVINGS IN REDIRECTED CARE AND PRODUCTIVITY \$119,826 - ANNUAL COST OF BENEFIT \$25,434 = \$94,392 IN OVERALL POTENTIAL SAVINGS
TOTAL DOCUMENTED AND PROJECTED SAVINGS			\$1,219,011.76

FY 2016 INSURANCE FUNDING SCHEDULE

FY 2015-2016 INSURANCE RATES

Medical Rates	Monthly	Bi-weekly
Individual (County Pays)	744.13	
Employee/Child	950.75	95.36
Employee/Children	1,049.93	141.14
Employee/Spouse	1,049.93	141.14
Family	1,159.74	191.82

Dental Rates	Monthly	Bi-weekly
Individual (County Pays)	22.79	
Employee/Child	44.11	9.84
Employee/Children	56.19	15.41
Employee/Spouse	56.19	15.41
Family	78.67	25.79

Combined Medical /Dental	Monthly	Bi-weekly
Individual (County Pays)	766.92	
Employee/Child	994.86	105.20
Employee/Children	1,106.12	156.55
Employee/Spouse	1,106.12	156.55
Family	1,238.41	217.61

FY 2015-2016 FUNDING AMOUNTS

Medical Rates	Monthly	# Subscribers	Monthly Totals	Annual Totals
Individual (County Pays)	744.13	253	188,264.38	2,259,172.61
Employee/Children	1,049.93	55	57,746.04	692,952.48
Employee/Spouse	1,049.93	61	64,045.61	768,547.30
Family	1,159.74	39	45,229.90	542,758.79
Total		408	\$ 355,285.93	\$ 4,263,431.17

Dental	Monthly	# Subscribers	Totals	Annual Totals
Individual (County Pays)	22.79	253	5,766.38	69,196.51
Employee/Children/Sp	56.19	116	6,517.81	78,213.70
Family	78.67	39	3,068.21	36,818.50
Total		408	\$ 15,352.39	\$ 184,228.70

			Medical	4,263,431.17
County Funding:			Dental	184,228.70
\$3,754,840.32				\$ 4,447,659.88

			Retiree Insurance	\$ 597,806.28
Reserve at 12/31/14:			31 Retirees on Plan	\$ (276,091.20)
\$1,514,020.16			AARP	\$ (94,153.56)

			Retiree Drug Subsidy	\$ 58,000.00
			Total Funding	\$ 4,733,221.40

2015

JACKSON COUNTY

SINGLE 256 EE/CHILD
FAMILY 37 EE/SPOU54 TOTAL
64 411

CARRIER:

CONTRACT:

SPECIFIC:

ARCH-CURRENT

18/12

\$100,000

ARCH-FINAL

18/12

\$100,000

QBE

100000

18/12

PREMIUM

Single Premium:	\$58.39	\$ 58.48	\$51.74
EE/Spouse:	\$111.97	\$ 111.83	\$135.91
EE/Child:	\$99.60	\$ 99.51	\$135.91
Family Premium:	\$165.98	\$ 165.62	\$135.91

ANNUAL SPEC PREMIUM

\$403,602.96

\$403,553.76

\$411,737.88

ANNUAL AGG PREMIUM

\$29,838.60

\$29,838.60

\$29,592.00

TOTAL ANNUAL PREMIUM

\$433,441.56

\$433,392.36

\$441,329.88

ADMINISTRATION

Claims Admin: MEDICAL	\$73,980.00	\$73,980.00	\$73,980.00
Claims Admin: DENTAL*	\$4,932.00	\$4,932.00	\$4,932.00
Commission	\$0.00	\$0.00	\$0.00
UR (unlimited Case Management)	\$6,165.00	\$6,165.00	\$6,165.00
Disease Management:	\$38,962.80	\$38,962.80	\$38,962.80

TOTAL ADMINISTRATION COSTS

\$124,039.80

\$124,039.80

\$124,039.80

TOTAL FIXED COSTS

\$557,481.36

\$557,432.16

\$565,369.68

CLAIM FUNDING

EXPECTED CLAIMS	\$3,703,171.97	\$3,696,385.63	\$3,898,714.85
-----------------	----------------	----------------	----------------

Maximum:

ATTACHMENT POINT	\$4,628,964.96	\$4,620,482.04	\$4,873,393.56
------------------	----------------	----------------	----------------

TOTAL EXPECTED COSTS

\$4,260,653.33

\$4,253,817.79

\$4,464,084.53

TOTAL MAXIMUM COSTS

\$5,186,446.32

\$5,177,914.20

\$5,438,763.24

ARCH TP Premium

\$30,023.40

\$31,369.68

LASERS

\$200,000

\$150,000

Ashe

Evans

Renew w/ Arch

\$4,253,817.79

Don Adams

From: Ron Mau - Commissioner
Sent: Monday, March 25, 2019 8:32 AM
To: Don Adams
Subject: Health plan questions and information
Attachments: Health_Plan_Request.xlsx

Don,

Good morning.

In doing some homework for our upcoming meeting I would like to have some more information as requested in the attached document. Would it be possible to have the data for the table (including item 1 listed below the table) by close of business Tuesday March 26, 2019.

Questions and comments (2 through 8) below the table could be provided during our meeting although it would be beneficial to have this information as soon as possible.

Thanks and have a great Monday!

Ron

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End of fiscal Year		Self Insurance Fund Reserve	Annual Administrative Costs	Annual Medical Claims	Annual Pharmacy Claims	Total Costs	Actual rates (premiums) used (annual)								Actuarial Minimum recommended rates provided by consultant** (annual)				Actuarial Maximum recommended rates provided by consultant** (annual)				Projected Min Total Costs for Plan Year	Projected Max Total Costs for Plan Year
Date	Year						Medical Rate Individual	N for Ind.	Medical Rate E/S	N for E/S	Medical Rate E/C	N for E/C	Medical Rate E/F (N=XYZ)	N For E/F	Medical Rate Individual (N=XYZ)	Medical Rate E/S (N=XYZ)	Medical Rate E/C (N=XYZ)	Medical Rate E/F (N=XYZ)	Medical Rate Individual (N=XYZ)	Medical Rate E/S (N=XYZ)	Medical Rate E/C (N=XYZ)	Medical Rate E/F (N=XYZ)		
30-Jun	2013																							
30-Jun	2014																							
30-Jun	2015																							
30-Jun	2016																							
30-Jun	2017																							
30-Jun	2018																							
30-Jun	2019*																							

N Number of clients/employees in each category. Need annually for each category (Yes, I know this can change monthly so please provide an average over the year.)

* Year to date

** Typically consultants or provider do provide these estimates on an annual basis please provide this for each of the years indicated.

Other information/comments/questions

- 1 Request similar information as above for dental plan
- 2 Can vision be split out as a separate plan from health care? What would effect on plan be? Rates? Potential saving for couonty and employee? etc.
- 3 ACA allows for premium increase of up to 50 % for tobacco users. What should rate be for tobacco users? How large of a premium could county plan include?
- 4 Please provide a cost breakdown by tobacco user status for current plan year and 2017, 2018 plan year.
- 5 What are the details of our wellness programs?
- 6 Do we have programs in place to encourage cost-effective shopping for healthe services?
- 7 Do we need to consider a consumer-directed (high deductible)health plan?
If we had one what would the rate be for an employee if they selected such a plan?
What would savings be to county?
Could county provide incentive to employee to participate in such a plan that would result in savings to the county.
- 8 What is the process County has used for setting health plan rates in the past?

Don Adams

From: Ron Mau - Commissioner
Sent: Monday, March 25, 2019 9:07 AM
To: Don Adams
Subject: Re: FW: Health plan questions and information

Thanks!

On Mon, Mar 25, 2019, 8:57 AM Don Adams <donadams@jacksonnc.org> wrote:

Hello Ron (Commissioners Bcc'd),

I will forward these request to Human Resources Director Kathleen Breedlove, Finance Officer Darlene Fox and Mark III consultant Mark Browder.

- Kathleen Breedlove is the person to provide Wellness Program Information
- Darlene Fox is the person to provide financial data and past practices
- Mark Browder is the person to provide advice on health laws and alternative medical plans.

I am not sure when this information can be put together. It will be passed along to staff today and I am sure they will do the best that they can to pull the information together. It will be passed along to all Commissioners as it becomes available.

Don Adams

Jackson County Manager

401 Grindstaff Cove Rd, Suite A207

Sylva, NC 28779

828-631-2295

donadams@jacksonnc.org

From: Ron Mau - Commissioner <ronmau@jacksonnc.org>

Sent: Monday, March 25, 2019 8:32 AM

To: Don Adams <donadams@jacksonnc.org>

Subject: Health plan questions and information

Don,

Good morning.

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Ron

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Don Adams

From: Don Adams
Sent: Monday, March 25, 2019 9:41 AM
To: Darlene Fox (darlenefox@jacksonnc.org); 'Mark Browder'
Subject: FW: Health plan questions and information
Attachments: Health_Plan_Request.xlsx

Hello Darlene and Mark,

This is an email sent to me from Commissioner Ron Mau. He is requesting information. I am not sure all of this can be put together by Thursday.

In the attached spreadsheet there are 8 questions along with the requested information in the spreadsheet. So here are my thoughts on who may be able to provide the information:

- Spreadsheet information – Darlene is the only one who could attempt to fill out this information. As you can see Commissioner Mau is attempting to align the reserve information with the actual claims data with the rates used/recommended. I don't think the spreadsheet could be completed as written. But we can discuss a little further.
- Question 1 – Darlene – I believe we do not separate these costs out even though we have separate fees. You may not be able to answer these questions.
- Question 2 – We provide only a \$100 benefit out of our current health plan. Not sure if you could tell me how much we spend on this benefit. Employees have the option to buy additional insurance from Community Eye Care.
- Question 3 – Mark – Please answer the question here. Basically let the Commissioners know that under ACA we must offer an alternative for smokers in lieu of higher premiums or lesser benefit (i.e. classes) I believe you thought this would not amount to a significant savings.
- Question 4 – Darlene – Please let me know whether or not you can provide this data.
- Question 5 – Kathleen Breedlove will provide information.
- Question 6 – I believe the answer is no on this. Mark – please provide any commentary on this question.
- Question 7 – Not sure how to handle. I will defer to Mark on this. Mark please provide any commentary on this.
- Question 8 – Darlene – Please provide the answer to this.

Thanks,

Don Adams
Jackson County Manager
401 Grindstaff Cove Rd, Suite A207
Sylva, NC 28779
828-631-2295
donadams@jacksonnc.org

From: Don Adams <donadams@jacksonnc.org>
Sent: Monday, March 25, 2019 8:58 AM
To: Ron Mau (ron.r.mau@gmail.com) <ronmau@jacksonnc.org>
Subject: FW: Health plan questions and information

Hello Ron (Commissioners Bcc'd),

I will forward these request to Human Resources Director Kathleen Breedlove, Finance Officer Darlene Fox and Mark III consultant Mark Browder.

- Kathleen Breedlove is the person to provide Wellness Program Information
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donadams@jacksonnc.org

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To: Don Adams <donadams@jacksonnc.org>
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Ron

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Don Adams

From: Kathleen Breedlove - HR
Sent: Tuesday, March 26, 2019 8:18 AM
To: Don Adams
Subject: Re: FW: Health plan questions and information
Attachments: WellatWorkSummary.pdf

Please see the attachment.

Kathleen Breedlove
Human Resources
Jackson County
401 Grindstaff Cove Road, Suite A-218, Sylva, NC 28779
Office - 828.631.2264
Fax - 828.631.2266
kathleenbreedlove@jacksonnc.org

On Mon, Mar 25, 2019 at 9:01 AM Don Adams <donadams@jacksonnc.org> wrote:

Kathleen,

Commissioner Mau has requested additional information regarding our health plan. One of the questions is in regards to our Wellness Program. Please put together a brief summary to be provided to all Commissioners. Please send this summary directly to me and I will forward Bcc to all Commissioners.

Thanks,

Don

From: Don Adams <donadams@jacksonnc.org>
Sent: Monday, March 25, 2019 8:58 AM
To: Ron Mau (ron.r.mau@gmail.com) <ronmau@jacksonnc.org>
Subject: FW: Health plan questions and information

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Jackson County Manager

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Sylva, NC 28779

828-631-2295

donadams@jacksonnc.org

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Sent: Monday, March 25, 2019 8:32 AM

To: Don Adams <donadams@jacksonnc.org>

Subject: Health plan questions and information

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Don Adams

From: Don Adams
Sent: Tuesday, March 26, 2019 10:38 AM
Subject: FW: FW: Health plan questions and information
Attachments: WellatWorkSummary.pdf

FYI

From: Kathleen Breedlove - HR <kathleenbreedlove@jacksonnc.org>
Sent: Tuesday, March 26, 2019 8:18 AM
To: Don Adams <donadams@jacksonnc.org>
Subject: Re: FW: Health plan questions and information

Please see the attachment.

Kathleen Breedlove
Human Resources
Jackson County
401 Grindstaff Cove Road, Suite A-218, Sylva, NC 28779
Office - 828.631.2264
Fax - 828.631.2266
kathleenbreedlove@jacksonnc.org

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JACKSON COUNTY

Human Resources Department

401 Grindstaff Cove Road, Suite A-218, Sylva, NC 28779

Phone 828.631.2212 • Fax 828.631.2266



Information about Jackson County Employee Wellness Plan is located on the website at <https://www.jacksonnc.org/well-at-work> and also attached for (FY18-19). Plan information is distributed to all full-time hires and annually to all employees at the beginning of the fiscal year.

The Jackson County Wellness Program is incentive-based through the accumulation of points. Points are awarded for various activities (completion of a challenges and fitness activity logs), which are then submitted for point tracking. Rewards consist of gift cards or wellness time off from work, depending on point accumulation at year-end.

Jackson County's Employee Wellness Program incentives have not been tied to a health plan premium credit for the completion of a Health Risk Assessment (HRA). Completion of a HRA in past years enabled employees to remain on the 80/20 plan, non-completion of the HRA moved the employee to the 70/30 plan.

The Jackson County Employee Wellness Program solicits participant feedback through a survey near fiscal year-end.

Jackson County permanent full-time employees are offered a 50% membership discount at the Jackson County Recreation Center.



Well Work

Jackson County Employee Wellness Program

2018 - 2019 Well@Work Wellness Booklet



2018-2019 CALENDAR



1st Quarter 2018		2nd Quarter 2018	
Jul	Aug	Sep	Oct Nov & Dec
Wellness Goals This challenge will help you establish and set an action plan to reach your wellness goals. Healthy recipe cookbooks will be given to each person who sets goals.	Pedometer Try to meet the goal of 10,000 steps per day. Pedometers available. \$50 to individual with the most steps.	Sleep Challenge How often do you focus on getting quality sleep? Make an effort to get 6+ hours of sleep each night.	Healthy Breakfast Try to eat a healthy breakfast every day. Log your meal and approx. calories each day. \$50 to individual with healthiest choices and most creative.
3rd Quarter 2019 Jan & Feb		Apr	4th Quarter 2019 April May
Weight Loss Make a plan to lose. Challenge yourself to start the new year off right with lose extra weight. \$50 to two employees who have largest percentage weight loss and most improved body fat percentage.		Blood Pressure Check blood pressure twice per week.	
5-2-1 Almost None Eat 5 fruit and veggies each day, <2 hrs. of screen time, 1 hr. of activity and almost no sugary drinks		Take Time for 2 Participate in the County's annual 2 mile walk to the historic court house.	
		Wellness Goals This challenge will have you look back on your year of progress toward wellness goals.	

2018-2019 INFORMATION



Exercise Logs

Keep track of all your exercise. For each day you engage in any exercise, moderate to high intensity, jot down the activity you did and the duration in minutes.

Examples of Exercise:

Running, walking, biking, jogging, yoga, bowling, swimming, dancing, weight lifting, canoeing, hiking, golfing, moderate yard work, etc.

How to Earn Points:

1200 minutes of exercise/quarter = 2 points

You must complete the Exercise Log each quarter and submit for credit. \$50 to the individual with the most exercise.

Wellness Opportunity Vouchers

Examples of Wellness Opportunities:

Healthy living classes (Crescent, Rec Center, Senior Center, etc.), financial education classes, Weight Watchers, preventative screening, tobacco cessation program, donate blood, organized events (5K, half-marathon), etc.

How to Earn Points:

Participation in one wellness opportunity = 1 point
You must complete the Wellness Opportunity Voucher and submit for credit.

Participants will be able to select either a Visa gift card or Wellness Leave based on the points earned.

Points	Visa Gift Card amount	Wellness Leave
4 points	\$ 25	2 hours
5-8 points	\$ 50	4 hours
9-12 points	\$ 75	6 hours
13+ points	\$ 100	8 hours

Wellness leave will be credited on July 1, 2019 and must be used by June 30, 2020 or it will be lost. Wellness leave is not paid out at separation.

Wellness Drawings: For each point earned, your name will be added into quarterly drawings (\$100 winner each quarter) and year-end drawings (\$100, \$200, \$500 winners). Each point earned in the quarter will be the number of entries for that quarterly drawings; total points earned through the year will be the number of entries for the year end drawing.

To receive credit for your Well@Work Points, you must submit your Challenge Logs, Exercise Logs and Wellness Opportunity Vouchers on time - each log has the deadline for submission on the form. Wellness Opportunity Vouchers must be submitted within 30 days of the event.

Submit all points documentation ONLY via interdepartmental mail to Jennifer Pressley, Recreation Dept.

The most up-to-date information and detailed program information is available online at jacksonnc.org/well-at-work.html

Monthly emails will be sent containing information about how to participate in monthly challenges, available wellness opportunities, reminders about deadlines for submitting points, and much more! If you have questions about the program, please contact:

Well@Work Committee
at wellatwork@jacksonnc.org or 631-2212



2018-2019 WELLNESS OPPORTUNITY POINT VOUCHER

Name: _____ Phone/Email: _____
Department: _____ Program Date: _____
Program Name: _____
Program Location: _____ Date: _____
Sign Here: _____

It is your responsibility to submit this voucher within 30 days of the program attended (no later than 6/1/19). Please send the voucher via interdepartmental mail to Jennifer Pressley at the Recreation Center.



2018-2019 WELLNESS OPPORTUNITY POINT VOUCHER

Name: _____ Phone/Email: _____
Department: _____ Program Date: _____
Program Name: _____
Program Location: _____ Date: _____
Sign Here: _____

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Name: _____ Phone/Email: _____
Department: _____ Program Date: _____
Program Name: _____
Program Location: _____ Date: _____
Sign Here: _____

It is your responsibility to submit this voucher within 30 days of the program attended (no later than 6/1/19). Please send the voucher via interdepartmental mail to Jennifer Pressley at the Recreation Center.

2018-19 GOAL SETTING WORKSHEET



July 2018

Directions

Use this worksheet to help outline your health goals and your plans to achieve them for the 2018-19 year. Once you complete the worksheet below, turn in one copy to the Well@Work team for 1 point in the Monthly Challenge category and keep one copy for your records. Display your copy in a place that you will see often—on your refrigerator, bedroom mirror, or desk at work. Make a regular habit of reviewing your goals and you will be able to achieve them.



The Monthly Challenge for May 2019 will be an opportunity for you to report on your steps toward achieving your goal. If you need any help completing this worksheet, contact the Well@Work Team. That's what we're here for! Participants who complete this challenge will receive a cookbook.

GOAL SETTING FOR:

(Your name here)

(Date)

GOAL SETTING

What health goal do you want to achieve this year?

Be SMART (Specific, Measurable, Attainable, Realistic, & Timely).

Example: I will lose 25 pounds by June 30, 2019.

1. _____

2. _____

3. _____

OBJECTIVE SETTING

List 5 objectives that will help you reach your goal.

Set objectives that will help you achieve your overall goal. For example, if your goal is to lose 25 pounds, your objectives could include working out 5 days a week, eating 1500 calories a day, and cutting out sugarsweetened beverages.

1. _____

2. _____

3. _____

4. _____

5. _____

2018-19 GOAL SETTING WORKSHEET

OVERCOMING BARRIERS

What barriers might you face in trying to achieve this goal?

What steps can you take to overcome these barriers?

Examples: Block your schedule at noon every day for a walk; Pack your lunch to ensure you are eating something healthy

Who can help you overcome these barriers?

List family members, friends, coworkers, or church and community members who can help you to overcome obstacles to achieve your goal.

REWARDS

How will you reward yourself for achieving your objectives?



WELLNESS OPPORTUNITIES



Earn 1 Point for Each Activity

- To receive your point, fill out the provided Wellness Opportunity Voucher (see example on top of voucher form) and submit the completed voucher via interdepartmental mail to **Jenifer Pressley** at the **Cullowhee Recreation Center**.
- Vouchers can be found on the Well@Work section of the Jackson County website jacksonnc.org/well-at-work.html
- You earn 1 point for each wellness opportunity you participate in.
- To qualify for a point you must participate in the wellness opportunity between **July 1, 2018** and **May 31, 2019**.
- Vouchers must be submitted within **30 days** of participating in the wellness opportunity.
- What activities earn points? Below is a list of example wellness opportunities that you may receive **ONE** wellness point for doing. Participate in an opportunity not listed here? Great! Please contact the Well@Work committee at wellatwork@jacksonnc.org to see if the activity qualifies.
- Example Wellness Opportunities:
 - Weight Watchers (or other supervised weight management program) - you must actively participate for at least 1 month)
 - Preventative Health Care (only 1 point may be earned for this opportunity)
 - Dental cleaning
 - Annual physical at your doctor's office
 - Annual mammogram
 - Pap smear
 - Quitting tobacco (at least 120 days of being tobacco free) or participating in a tobacco cessation program
 - Organized community fitness events (5Ks, sponsored walks, hiking club, bike rides, volleyball tournament, etc.)
 - Blood donation
 - Crescent Disease Management classes
 - Healthful Living classes offered in the community (ex. Health Department, Cooperative Extension, Senior Center, Recreation Center, MedWest, Jackson County Public Library, Western Carolina University, etc.)
- If you are participating in an event as part of your county position you will not get a point. I.e. if you present a Tuesday to Thrive and are being compensated for that activity it does not count.
- All vouchers must be submitted no later than Monday, June 3, 2019.
- Questions? Please contact the Well@Work committee at wellatwork@jacksonnc.org or **Human Resources at 631-2212**.



10,000 STEPS CHALLENGE

August 2018



Increased walking can help you:

lower your blood pressure, lower stress levels, lose weight, and much more!

The general recommendation is to aim for **10,000 steps a day**. For the average person, based on stride length, this is close to **5 miles a day**. If you are not very active, don't worry! You don't have to walk 5 miles a day. Just track your steps, see how much you walk, and try to go a little farther every day. If you are already active and walking/running a lot, see if you can increase your daily steps as well.

Use the pedometer provided for you by Well@Work to track your daily steps. Put the pedometer on as soon as you get up in the morning and don't take it off until you go to bed. Every step counts! Your pedometer will reset if you lay it flat for an extended amount of time, so try to keep it on your body the entire day. Record your steps each day. Have fun! The participant with the most steps will receive a \$50 visa gift card.

Sun	Mon	Tues	Wed	Thur	Fri	Sat
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

Name: _____

Department: _____

Turn in your completed log through interdepartmental mail to **Jenifer Pressley** at the **Cullowhee Recreation Center**
Your log is due by **September 10, 2018**



EXERCISE LOG



4th Quarter (Apr-May)

Due Date: 4th Quarter Activity Log is due by June 1, 2019

Name: _____ Phone: _____

Department: _____ Email: _____

Directions: Complete log with name, department, and contact information. For each day you do any moderate to high intensity exercise document the exercise and the duration of the exercise (time) in minutes. To receive credit you must accumulate 1200 minutes this quarter.

Your Physical Activity by week	Sunday		Monday		Tuesday		Wednesday		Thursday		Friday		Saturday		Weekly Totals
	Activity	Time	Activity	Time	Activity	Time	Activity	Time	Activity	Time	Activity	Time	Activity	Time	
Apr 1 - 6															
Apr 7 - 13															
Apr 14 - 20															
Apr 21 - 27															
Apr 28 - May 4															
May 5 - 11															
May 12 - 18															
May 19 - 25															
May 26 - 31															
Quarter Totals															
Quarter Minimum Goal															

SLEEP CHALLENGE



September 2018

It is recommended that adults get at least 7 hours of sleep each night. This will help us be more productive during the day. Please record the number of hours you sleep each night. Make it a goal to get 7 hours of sleep.

Sun	Mon	Tues	Wed	Thur	Fri	Sat
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
/30						

Name: _____

Department: _____

Turn in your completed log through interdepartmental mail to Jennifer Pressley at the Cullowhee Park and Rec. by October 10, 2018.





EXERCISE LOG



3rd Quarter (Jan-Mar)

Due Date: 3rd Quarter Activity Log is due by April 10, 2019.

Name: _____ Phone: _____

Department: _____ Email: _____

Directions: Complete log with name, department, and contact information. For each day you do any moderate to high intensity exercise document the exercise and the duration of the exercise (time) in minutes. To receive credit you must accumulate 1200 minutes this quarter.

Your exercise by week	Sunday		Monday		Tuesday		Wednesday		Thursday		Friday		Saturday		Weekly Totals
	Activity	Time	Activity	Time	Activity	Time	Activity	Time	Activity	Time	Activity	Time	Activity	Time	
Jan 1 - 5															
Jan 6 - 12															
Jan 13 - 19															
Jan 20 - 26															
Jan 27 - Feb 2															
Feb 3 - 9															
Feb 10 - 16															
Feb 17 - 23															
Feb 24 - Mar 2															
Mar 3 - 9															
Mar 10 - 16															
Mar 17 - 23															
Mar 24 - 30															
Mar 31															

Quarter Totals

Quarter Minimum Goal



EAT A HEALTHY BREAKFAST CHALLENGE

October 2018

Breakfast is the most important meal of the day! Individuals who start their day off with breakfast have a reduced risk of weight gain. Feed your body a healthy breakfast that includes a balance of good carbohydrates, fiber, and lean protein. Breakfast should contain 20-25% of your calorie intake for the day.

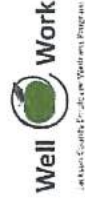
Track how many times you eat a healthy breakfast by logging what you ate and the estimated number of calories it contained. Use your cookbook for healthy ideas! **Circle your most creative breakfast for a chance at winning a \$50 Visa gift card.**

Sun	Mon	Tues	Wed	Thur	Fri	Sat
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

Name: _____

Department: _____

Turn in your completed log through interdepartmental mail to **Jenifer Pressley** at the **Cullowhee Park and Rec.**
Your log is due by **November 10, 2018.**



EXERCISE LOG

Well  Work

2nd Quarter (Oct-Dec)

Due Date: 2nd Quarter Activity Log is due by January 10, 2019

Name: _____ Phone: _____

Department: _____ Email: _____

Directions: Complete log with name, department, and contact information. For each day you do any moderate to high intensity exercise document the exercise and the duration of the exercise (time) in minutes. To receive credit you must accumulate 1200 minutes this quarter.

Your exercise by week	Sunday		Monday		Tuesday		Wednesday		Thursday		Friday		Saturday		Weekly Totals
	Activity	Time	Activity	Time	Activity	Time	Activity	Time	Activity	Time	Activity	Time	Activity	Time	
Oct 1-6															
Oct 7 - 13															
Oct 14 - 20															
Oct 21 - 27															
Oct 28 - Nov 3															
Nov 4 - 10															
Nov 11 - 17															
Nov 18 - 24															
Nov 25 - Dec 1															
Dec 2 - 8															
Dec 9 - 15															
Dec 16 - 22															
Dec 22 - 29															
Dec 30 - 31															
Quarter Totals															
Quarter Minimum Goal															

2018 HOLIDAY CHALLENGE

It's that time of year again!



Welcome back to the **Eat Smart, Move More... Maintain, don't gain!** Holiday Challenge. If you previously participated in the Holiday Challenge some of your information is on file, but we want to make sure the information we have is up to date. Please use the following form to sign up for the 2018 Holiday Challenge. If you have already updated your profile, please ignore this email and we apologize for the redundancy.

If this step is not completed your registration will be incomplete and you will not be able to participate in the 2018 Holiday Challenge.

Sign up for 2018 Holiday Challenge

To earn your Well@Work wellness point for this challenge please complete the following 5 tasks:

Register for the 2018 Holiday Challenge. Print your confirmation and submit with this log.

Follow Eat Smart Move More Weigh Less on social media: LinkedIn, Facebook, Twitter, YouTube or Pinterest for even more ideas on healthy recipes, increasing physical activity and making healthier choices.

- LinkedIn: [linkedin.com/company/eat-smart-move-more-weigh-less](https://www.linkedin.com/company/eat-smart-move-more-weigh-less)
- Facebook: [facebook.com/ESMMWeighLess](https://www.facebook.com/ESMMWeighLess)
- Twitter: twitter.com/ESMMWeighLess
- YouTube: [youtube.com/user/esmmweighless](https://www.youtube.com/user/esmmweighless)
- Pinterest: [pinterest.com/esmmweighless](https://www.pinterest.com/esmmweighless)

Share a holiday dish that you plan to substitute a healthy option with:

- Dish usually served: _____
- Healthier option substituted: _____

Share a healthy recipe you learned about during the challenge:

Share how you incorporated more physical activity during the holiday season:

Name: _____

Dept: _____ Phone: _____

Please return completed challenge log via interoffice mail to **Jennifer Pressley** at the **Cullowhee Recreation Center** by **January 10, 2019**.





EXERCISE LOG



1st Quarter (July-Sept)

Due Date: 1st Quarter Activity Log is due by October 10, 2018

Name: _____ Phone: _____

Department: _____ Email: _____

Directions: Complete log with name, department, and contact information. For each day you do any moderate to high intensity exercise, document the exercise and the duration of the activity (time) in minutes. To receive credit you must accumulate 1200 minutes this quarter.

Your exercise by week	Sunday		Monday		Tuesday		Wednesday		Thursday		Friday		Saturday		Weekly Totals
	Activity	Time	Activity	Time	Activity	Time	Activity	Time	Activity	Time	Activity	Time	Activity	Time	
Jul 1 - 7															
Jul 8 - 14															
Jul 15 - 21															
Jul 22 - 28															
Jul 29 - Aug 4															
Aug 5 - Aug 11															
Aug 12 - 18															
Aug 19 - 25															
Aug 26 - Sep 1															
Sep 2 - 8															
Sep 9 - 15															
Sep 16 - 22															
Sep 23 - 29															
Sep 30															

Quarter Totals _____
 Quarter Minimum Goal _____

EXERCISE SUGGESTIONS



The following activities are only suggestions. You may use any exercise or combination of activities to accumulate your 1200 minutes per quarter.

- | | |
|----------------------------------|--------------------------------|
| Aerobic Dance | Officiating |
| Backpacking | Racquetball |
| Badminton | Roller Skating |
| Baseball | Rope Skipping |
| Basketball | Rowing |
| Bicycling | Rugby |
| Bowling | Running |
| Calisthenics | Scuba-Skin Diving |
| Canoe/Kayak | Snow Skiing |
| Dancing | Snow Shoveling |
| Disc Sports | Soccer |
| Fencing | Softball |
| Football | Squash |
| Golf (No Golf Carts May Be Used) | Stair Climbing |
| Group Exercise | Swimming |
| Gymnastics | Tai Chi |
| Handball | Table Tennis |
| Horseshoe Pitching | Tennis |
| Ice Hockey | Volleyball |
| Ice Skating | Walking |
| In-Line Skating | Volleyball |
| Jogging | Water Aerobics |
| Lawn Bowling | Water Skiing |
| Lawn Mowing (Walk Behind Only) | Weight Training |
| Mall Walking at Brisk Pace | Wheelchair Physical Activities |
| (Not casual shopping) | Woodcutting |
| Marital Arts | Wrestling |
| Nautilus | Yoga |



WORKWISER.ORG

Learn More About Our Employee Wellness Program

A NEW YEAR, A NEW YOU



January - February 2019

**LET THIS YEAR BE THE YEAR YOU
ACHIEVE YOUR WEIGHT LOSS GOALS.**



Well@Work
presents a

**7-Week Weight
Loss Challenge!**

During this challenge, you will weigh in three times & the top 2 employees with the largest percentage of weight loss and the top 2 employees with the most improved body fat percentage with each win a \$50 gift card. More information on weigh-ins will be provided upon registration.

To register, call

631-8033

or email laurarodi@jacksonnc.org

by Dec 21, 2018



Brought to you by:

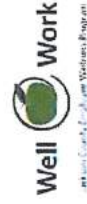
Learn More About Our Employee Wellness Program

EXERCISE LOG



Earn 2 Points for 1200 Minutes of Exercise Each Quarter

1. Select an enjoyable activity(s). Suggestions are listed on the following page.
2. Earns points by participating in *intentional* exercise requiring moderate to high intensity physical activity at least 1200 minutes per quarter. Quarters are July-September, October-December, January-March, and April-May (the last quarter will require at least 800 minutes as logs are due early June).
 - It is recommended that adults participate in intentional physical activity for at least 30 minutes most days of the week. (ex. 30 minutes/day, 5 days a week)
 - 30 minutes can be broken up throughout the day
3. Points awarded are based on quarters. 2 points may be earned for each quarter that you accumulate a minimum of 1200 minutes of exercise.
4. Keep record of your activity on the log provided. Information that **MUST** be on the log includes name, department, phone number and daily documentation of the type of physical activity and total number of minutes for the activity (if you have multiple activities for one day, list all activities and the day's total minutes in the space provided). The Physical Activity Log will total your weekly and quarterly total of minutes for you.
5. Sign and date completed log affirming you fulfilled the requirements.
6. At the end of each quarter submit completed logs via interdepartmental mail to **Jenifer Pressley** at the Cullowhee Recreation Center. *Exercise Logs due dates are listed on each log*. Participants with the most minutes of exercise each quarter will receive a \$50 Visa gift card.
7. The program runs from July 1, 2018 through May 31, 2019. You can join in at any time and stop/start as many times as you like.
8. Logs from the last quarter period are due no later than, June 1, 2019.
9. Additional logs can be found on the Well@Work section of the Jackson County website jacksonnc.org/well-at-work.html
10. Questions? Please contact the Well@Work team at wellatwork@jacksonnc.org or Human Resources at 828-431-2212.



2018-19 RESULTS OF GOAL SETTING

MONTH	ACTION STEPS
Dec	
Jan	
Feb	
Mar	
Apr	
May	
Jun	

Did you face any barriers in trying to achieve your goal? If so, how did you overcome them?

Turn in your completed log to Jenifer Pressley at the Cullowhee Recreation Center via inter office mail. Your log is due by June 1, 2019.

5-2-1-ALMOST NONE CHALLENGE

March 2019



3/3 - 3/9

Mark each time you eat a serving of fruits or vegetables. Strive for 5/day.

3/10 - 3/16

Mark each hour of screen time you watch (non-work related). Strive for less than 2 hours/day.

3/17 - 3/23

Mark each time you participate in physical activity. Strive for 1 hour/day.

3/24 - 3/30

Mark each time you consume a non-sugar sweetened beverage.

Sun	Mon	Tues	Wed	Thur	Fri	Sat	Total
					1	2	
3	4	5	6	7	8	9	
10	11	12	13	14	15	16	
17	18	19	20	21	22	23	
24	25	26	27	28	29	30	

Learn more about the 5-2-1-Almost None campaign at: 521almostnone.com

Name: _____ Department: _____

Turn in completed log to Jenifer Pressley at Cullowhee Recreation Center through interdepartmental mail by April 10, 2019.

2018-19 RESULTS OF GOAL SETTING

May 2019



Directions

Use this worksheet as a follow up to the Goal Setting Worksheet from July 2018. This is an opportunity for you to report on all the hard work that you completed in efforts to achieve the goal you set forth for yourself. Turn in a copy of these results to the Well@Work team for 1 point towards the Monthly Challenges.



If you need any help completing this Worksheet, contact the Well@Work Team. That's what we're here for!

GOAL SETTING FOR:

(Your name here)

(Date)

What health goal did you set for yourself in July 2018?

Did you achieve your goal? YES NOT YET

Complete the chart by listing the steps you took each month towards achieving your goal.

MONTH	ACTION STEPS
Jul	
Aug	
Sep	
Oct	
Nov	

BLOOD PRESSURE TRACKING CHALLENGE

April 2019



High blood pressure can damage your heart and cause health problems if it stays high for a long time. High blood pressure usually has no warning signs, so many people don't realize they have it. There is only one way to tell if you have high blood pressure and that is by measuring it, which is quick and painless!

During the month of April, have your blood pressure checked twice a week. You can use your own cuff if you have it, or have it checked at one of the following places: the Health Department, DSS, Sylva and Cashiers Senior Centers, Justice Center, or the Cullowhee Rec Center. Record your numbers below on each day that you have it checked.

If you have concerns about your blood pressure, please make an appointment with your healthcare provider.

Sun	Mon	Tues	Wed	Thur	Fri	Sat
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

Turn in your completed log through interdepartmental mail to **Jenifer Pressley** at the Cullowhee Rec Center. your log is due by May 10, 2019.

Name: _____

Department: _____



Friday
April 12th
12:00-1:00pm
Walk begins
promptly
at 12 noon.

TAKE TIME FOR 2

Come celebrate National
Employee Health & Fitness Day!

WALK OR RUN 2 miles for wellness

The walk takes place at
Cullowee Recreation Center.

Participation earns

1 point!

To register, contact:
wellatwork@jacksonnc.org
or 828.631.2263



Don Adams

From: Ron Mau - Commissioner
Sent: Tuesday, March 26, 2019 6:09 PM
To: Don Adams
Subject: Re: Health plan questions and information

Don,

Any update on when I can get answers to my questions? I would like the opportunity to be prepared for our meeting on Thursday which will be difficult without the information.

Ron

On Mon, Mar 25, 2019, 8:31 AM Ron Mau - Commissioner <ronmau@jacksonnc.org> wrote:
Don,

Good morning.

In doing some homework for our upcoming meeting I would like to have some more information as requested in the attached document. Would it be possible to have the data for the table (including item 1 listed below the table) by close of business Tuesday March 26, 2019.

Questions and comments (2 through 8) below the table could be provided during our meeting although it would be beneficial to have this information as soon as possible.

Thanks and have a great Monday!

Ron

E-mail correspondence to and from this address may be subject to the North Carolina Public Records Law and may be disclosed to third parties by an authorized county official.

Don Adams

From: Don Adams
Sent: Wednesday, March 27, 2019 12:25 PM
Subject: FW: Health plan questions and information
Attachments: HEALTH AND DENTAL INSURANCE HISTORY FY 2011-FY 2018.pdf; MEDICAL AND DENTAL RATES FY 2010-2019.pdf; SELF INSURANCE RESERVES FY 2008-2018.pdf; Health_Plan_Request.xlsx

Hello Commissioners (all Bcc'd),

This will be my final email regarding this matter prior to tomorrow's meeting at 2p.

Attached is information provided to me today from Finance Officer Darlene Fox. Also attached is the original spreadsheet with questions sent out Monday by Commissioner Mau. So to be clear the requested information included filling out the spreadsheet itself along with 8 additional questions. The attachments provided by Ms. Fox is an attempt to provide most of the information requested by Commissioner Mau in the spreadsheet itself. This is information that was already created by Darlene at my previous request. The spreadsheet from Commissioner Mau is basically asking for past information as it relates to reserves, administrative costs, medical claims, pharmacy claims, the County's specific rate (premium) schedules actually used, minimum and maximum rates (premiums) recommended by the consultant, minimum and maximum projected total costs for the plan dating back to 2013. The attached documents include information on the reserves balances back to 2008, information on annual employee rate costs back to 2010 (does not include dependent rates), and information showing overall annual revenues of the plan back to 2011 and information showing expenditures (medical/dental and administration) back to 2011. The other 8 questions in the spreadsheet are as follows: Responses are in red.

1 Request similar information as above for dental plan. **Ms. Fox states that needs more time for this along with the spreadsheet. Since this requires a significant amount of time on her part, the Board needs to be in agreement that it wants the information presented in this format.**

2 Can vision be split out as a separate plan from health care? What would effect on plan be? Rates? Potential saving for county and employee? etc. **The vision policy for Jackson County is very basic. Employees qualify for a \$100 annual reimbursement for vision services if needed. Employees have the option to purchase themselves additional insurance from Community Eye Care. If the Board does not want this service then you can eliminate. I will see if Darlene can give an estimate on the annual cost of this benefit.**

3 ACA allows for premium increase of up to 50 % for tobacco users. What should rate be for tobacco users? How large of a premium could county plan include? **This is something that Mark Browder will need to discuss directly with the Board. There are basically two issues with this. 1. He will caution going up to 50% based upon case law 2. An alternative solution must be provided other than rate increase or stop smoking (i.e. classes). If the employee participates then this premium increase cannot be applied. This will also complicate our existing standard and enhanced plan system.**

4 Please provide a cost breakdown by tobacco user status for current plan year and 2017, 2018 plan year. **Again this will require additional research from Darlene.**

5 What are the details of our wellness programs? **Information was sent in a previous email.**

6 Do we have programs in place to encourage cost-effective shopping for health services? **Not that I am aware of at this time. But both proposals have something like this for next year. This will be discussed at the meeting.**

7 Do we need to consider a consumer-directed (high deductible) health plan?

If we had one what would the rate be for an employee if they selected such a plan?

What would savings be to county?

Could county provide incentive to employee to participate in such a plan that would result in savings to the county.

Mark Browder will need to discuss this with the board.

8 What is the process County has used for setting health plan rates in the past?

This can be discussed with the Board tomorrow.

The line of questions above can be broken down into two areas. They are as follows:

1. Research about how we got to the point of where we are today. This research is associated with the spreadsheets detailing the history, components in the spreadsheet that relates to past projected costs, actual rates established and projected/recommended rates and the process the County has used for setting health plan rates in the past.
2. Questions that relate to next year's plan. Questions about vision benefits, tobacco users, wellness program, cost effective shopping for health services and consumer directed health plans all relate to next year's plan.

I recommend that we initially focus on number 2 – next year's plan tomorrow. We are just simply out of time and need to move forward with selecting a provider, a plan and set rates. Mark Browder will present updated financial information tomorrow on both proposals. I plan on presenting a summary of both pros and cons about both Crescent and Blue Cross Blue Shield. I also plan on having a detailed rate sheet that will plainly show the proposed rates for employees and dependents. I still need additional information from Mark Browder to put this information together. We will be on a conference call this afternoon. It is extremely important for the Board to move forward with making decisions on next year.

The research/discussion about how we got to the point of where we are today needs to be discussed further by the Board. I believe it necessary to discuss the purpose of this research. And depending upon purpose of this research then the discussion may have to move to closed session – personnel. It may be safer to start these conversations off in closed session – personnel and then move them to open session. These issues may need to be discussed at another meeting if time does not allow for us to move forward in these discussions. It is up to the Board.

Thanks and look forward to seeing you tomorrow,
Don Adams
Jackson County Manager

From: Darlene Fox <darlenefox@jacksonnc.org>
Sent: Wednesday, March 27, 2019 9:17 AM
To: 'Don Adams' <donadams@jacksonnc.org>
Subject: RE: Health plan questions and information

Don,

Attached are spreadsheets that cover most of the requested information.

I will need some additional time to provide the information as requested.

Thanks,
Darlene

From: Don Adams <donadams@jacksonnc.org>
Sent: Monday, March 25, 2019 9:41 AM
To: Darlene Fox <darlenefox@jacksonnc.org>; Mark Browder <mark@markiieb.com>
Subject: FW: Health plan questions and information

Hello Darlene and Mark,

This is an email sent to me from Commissioner Ron Mau. He is requesting information. I am not sure all of this can be put together by Thursday.

In the attached spreadsheet there are 8 questions along with the requested information in the spreadsheet. So here are my thoughts on who may be able to provide the information:

- Spreadsheet information – Darlene is the only one who could attempt to fill out this information. As you can see Commissioner Mau is attempting to align the reserve information with the actual claims data with the rates used/recommended. I don't think the spreadsheet could be completed as written. But we can discuss a little further.
- Question 1 – Darlene – I believe we do not separate these administrative costs out even though we have separate fees. You may not be able to completely answer these questions.
- Question 2 – We provide only a \$100 benefit out of our current health plan. Not sure if you could tell me how much we spend on this benefit. Employees have the option to buy additional insurance from Community Eye Care.
- Question 3 – Mark – Please answer the question here. Basically let the Commissioners know that under ACA we must offer an alternative for smokers in lieu of higher premiums or lesser benefit (i.e. classes) I believe you thought this would not amount to a significant savings.
- Question 4 – Darlene – Please let me know whether or not you can provide this data.
- Question 5 – Kathleen Breedlove will provide information.
- Question 6 – I believe the answer is no on this. Mark – please provide any commentary on this question.
- Question 7 – Not sure how to handle. I will defer to Mark on this. Mark please provide any commentary on this.
- Question 8 – Darlene – Please provide the answer to this.

Thanks,

Don Adams
Jackson County Manager
401 Grindstaff Cove Rd, Suite A207
Sylva, NC 28779
828-631-2295
donadams@jacksonnc.org

From: Don Adams <donadams@jacksonnc.org>
Sent: Monday, March 25, 2019 8:58 AM
To: Ron Mau (ron.r.mau@gmail.com) <ronmau@jacksonnc.org>
Subject: FW: Health plan questions and information

Hello Ron (Commissioners Bcc'd),

I will forward these request to Human Resources Director Kathleen Breedlove, Finance Officer Darlene Fox and Mark III consultant Mark Browder.

- Kathleen Breedlove is the person to provide Wellness Program Information
- Darlene Fox is the person to provide financial data and past practices
- Mark Browder is the person to provide advice on health laws and alternative medical plans.

I am not sure when this information can be put together. It will be passed along to staff today and I am sure they will do the best that they can to pull the information together. It will be passed along to all Commissioners as it becomes available.

Don Adams
Jackson County Manager
401 Grindstaff Cove Rd, Suite A207
Sylva, NC 28779
828-631-2295
donadams@jacksonnc.org

From: Ron Mau - Commissioner <ronmau@jacksonnc.org>
Sent: Monday, March 25, 2019 8:32 AM
To: Don Adams <donadams@jacksonnc.org>
Subject: Health plan questions and information

Don,

Good morning.

In doing some homework for our upcoming meeting I would like to have some more information as requested in the attached document. Would it be possible to have the data for the table (including item 1 listed below the table) by close of business Tuesday March 26, 2019.

Questions and comments (2 through 8) below the table could be provided during our meeting although it would be beneficial to have this information as soon as possible.

Thanks and have a great Monday!

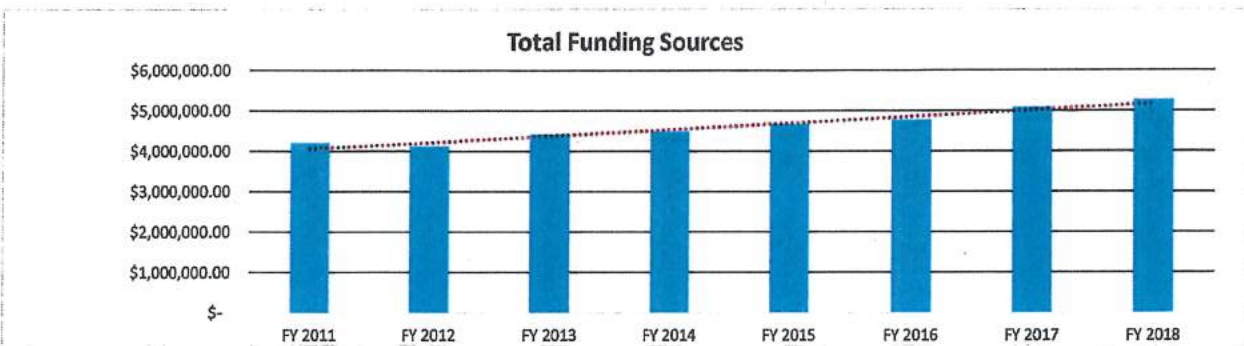
Ron

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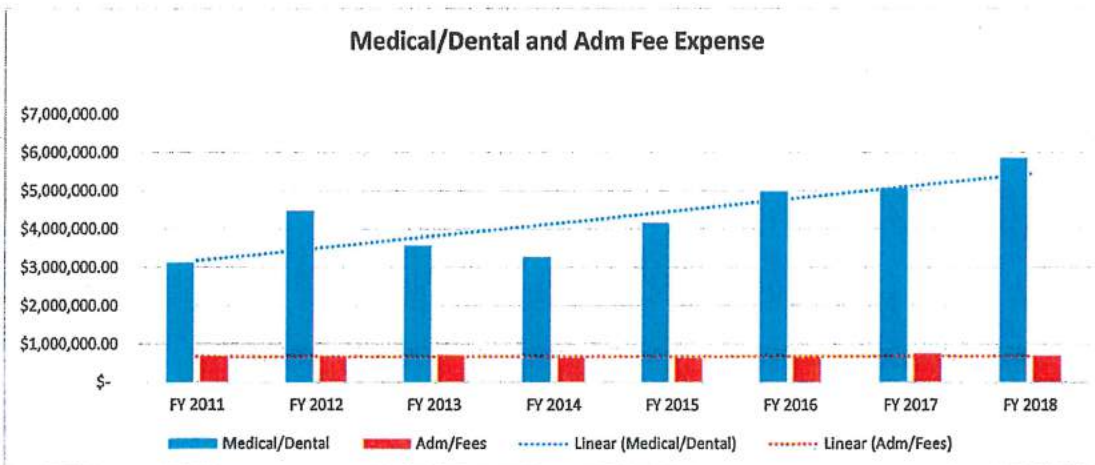
E-mail correspondence to and from this address may be subject to the North Carolina Public Records Law and may be disclosed to third parties by an authorized county official.

JACKSON COUNTY HEALTH AND DENTAL INSURANCE

	Total	Retiree-Rev	Interest	CMS-Retiree	Retiree-Transfer	RX Rebate	Subrogation	Payroll Transfer
FY 2011	\$ 4,192,643.12	\$ 28,331.08	\$ 1,888.01	\$ 57,673.24	\$ 436,195.00	\$ -	\$ -	\$ 3,668,555.79
FY 2012	\$ 4,102,539.12	\$ 36,934.72	\$ 1,355.85	\$ 44,542.38	\$ 500,981.64	\$ -	\$ -	\$ 3,518,724.53
FY 2013	\$ 4,408,216.47	\$ 40,102.15	\$ 745.16	\$ 59,671.57	\$ 518,444.00	\$ -	\$ 46,087.41	\$ 3,743,166.18
FY 2014	\$ 4,478,834.18	\$ 66,947.74	\$ 617.71	\$ 19,692.59	\$ 631,277.00	\$ -	\$ -	\$ 3,760,299.14
FY 2015	\$ 4,650,524.46	\$ 50,065.48	\$ 614.98	\$ 36,853.55	\$ 750,745.00	\$ -	\$ -	\$ 3,812,245.45
FY 2016	\$ 4,763,775.93	\$ 73,330.85	\$ 776.43	\$ 45,741.66	\$ 769,539.00	\$ -	\$ 10,000.00	\$ 3,864,387.99
FY 2017	\$ 5,063,690.91	\$ 67,064.22	\$ 349.02	\$ 26,973.68	\$ 825,450.00	\$ -	\$ 22,500.00	\$ 4,121,353.99
FY 2018	\$ 5,255,986.14	\$ 73,126.26	\$ -	\$ 47,313.35	\$ 926,068.00	\$ 11,007.50	\$ -	\$ 4,198,471.03



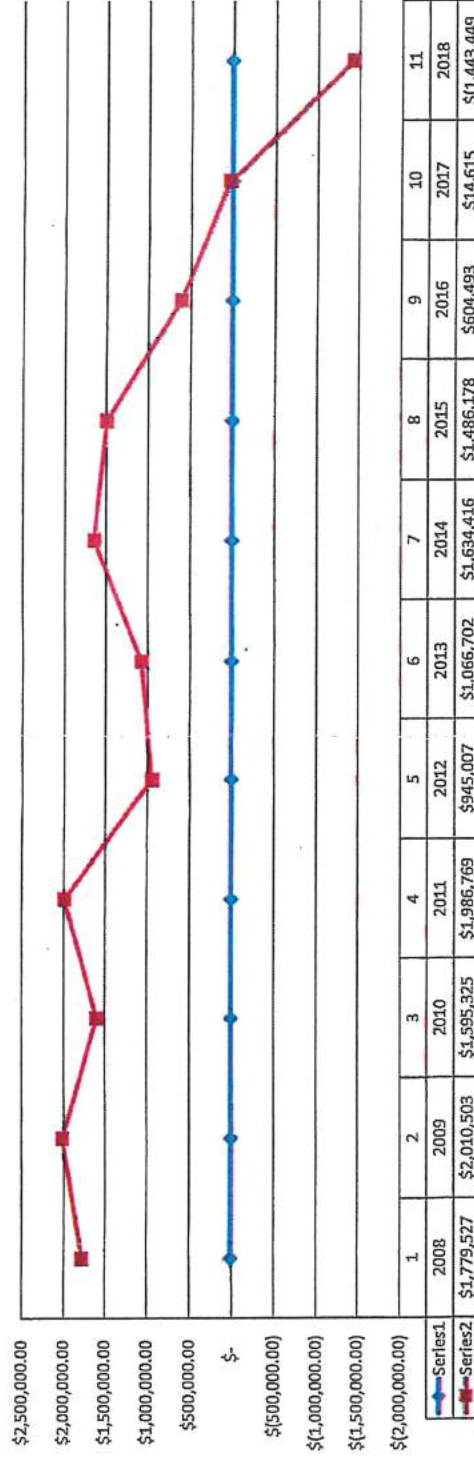
	Medical/Dental	Adm/Fees	Total
FY 2011	\$ 3,125,655.38	\$ 680,094.15	\$ 3,805,749.53
FY 2012	\$ 4,473,556.60	\$ 666,183.46	\$ 5,139,740.06
FY 2013	\$ 3,561,258.98	\$ 725,262.45	\$ 4,286,521.43
FY 2014	\$ 3,263,464.43	\$ 648,251.69	\$ 3,911,716.12
FY 2015	\$ 4,162,450.34	\$ 635,716.78	\$ 4,798,167.12
FY 2016	\$ 4,982,320.73	\$ 663,140.30	\$ 5,645,461.03
FY 2017	\$ 5,069,258.78	\$ 741,905.27	\$ 5,811,164.05
FY 2018	\$ 5,853,895.72	\$ 691,559.63	\$ 6,545,455.35



Self Insurance Fund Reserves
As of Fiscal Year ending June 30th

Year	Amount
2008	\$ 1,779,527
2009	\$ 2,010,503
2010	\$ 1,595,325
2011	\$ 1,986,769
2012	\$ 945,007
2013	\$ 1,066,702
2014	\$ 1,634,416
2015	\$ 1,486,178
2016	\$ 604,493
2017	\$ 14,615
2018	\$ (1,443,449.58)

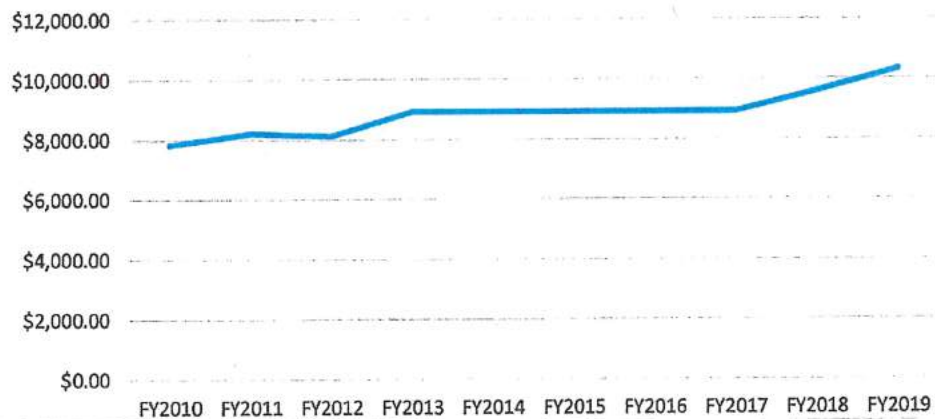
Insurance Reserves



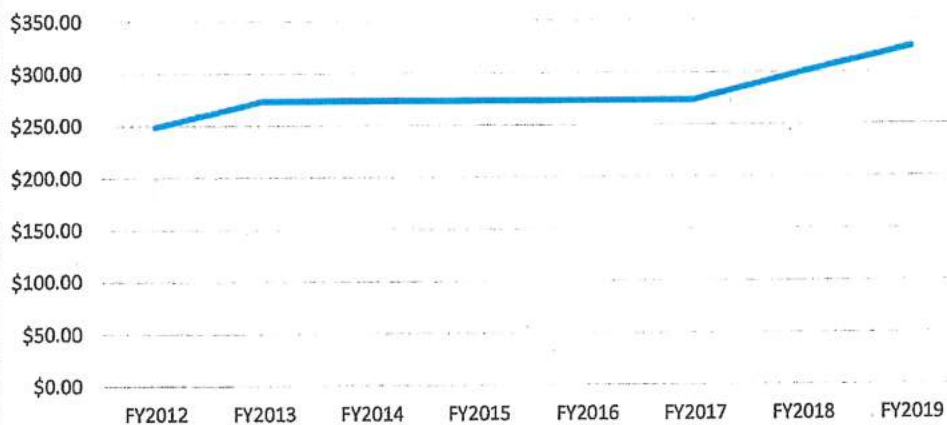
**JACKSON COUNTY YEARLY COST
EMPLOYEE MEDICAL AND DENTAL INSURANCE
FY2010 - FY2019**

FISCAL YEAR	MEDICAL	FISCAL YEAR	DENTAL	TOTAL
FY2010	\$7,826.16	FY2010		\$7,826.16
FY2011	\$8,217.48	FY2011		\$8,217.48
FY2012	\$8,117.76	FY2012	\$248.64	\$8,366.40
FY2013	\$8,929.56	FY2013	\$273.48	\$9,203.04
FY2014	\$8,929.56	FY2014	\$273.48	\$9,203.04
FY2015	\$8,929.56	FY2015	\$273.48	\$9,203.04
FY2016	\$8,929.56	FY2016	\$273.48	\$9,203.04
FY2017	\$8,929.56	FY2017	\$273.48	\$9,203.04
FY2018	\$9,600.00	FY2018	\$300.00	\$9,900.00
FY2019	\$10,320.00	FY2019	\$324.00	\$10,644.00

MEDICAL



DENTAL



Don Adams

From: Ron Mau - Commissioner
Sent: Sunday, March 31, 2019 12:29 AM
To: Don Adams
Subject: Re: FW: Health plan questions and information

Don,

We did not discuss item number 1 so not sure what that means for the board nor am I sure how we are to make informed decisions as a board if information board members have requested to inform their decisions is not provided.

Individual board members may have different processes to make informed decisions than other board members. Some board members may do little or no research; others may do substantial research and attempt to make very informed decisions to benefit all stakeholders. Commissioners who do more research likely request additional data/information and go beyond what typical county commissioners do as part of their service to the public. These deliberate decision makers may expect timely information will be provided so optimal decisions can be made. Most likely they do not expect exempt staff to indicate there is not enough time to fulfill requests.

If commissioners request data, I would expect those requests would be fulfilled in a timely manner. It was quite interesting previously requested data was not provided to commissioners due to time constraints yet requested information was presented in our meeting on meeting March 28th. Is such information available prior to our meeting or is it not? Can commissioners be provided with the information prior to meetings to assist in making informed decisions or not? Is there a reason to withhold information from commissioners?

Not being provided with timely information is an issue. Being asked to make decisions based on incomplete information is an issue. Being asked to make decisions based solely on data others have decided is the appropriate data is an issue.

To date, there are a number of requests that have not been fulfilled related to county health insurance plans, yet commissioners will be asked to vote and make a decision on proposed plans. Our recent history suggests our plan has issues, rates have not been adjusted appropriately, and the accounting for millions of dollars of plan deficits is questionable.

I would request the previously submitted requests for information be provided as soon as possible. This would allow commissioners to make better and more informed decisions. However, based on the current timeline, it is likely too late for information to be received by commissioners and provide commissioners the time to consider and reflect upon the information and make optimal decisions. This is yet another issue.

Enjoy the rest of your weekend.

Ron Mau

On Wed, Mar 27, 2019, 12:25 PM Don Adams <donadams@jacksonnc.org> wrote:

Hello Commissioners (all Bcc'd),

This will be my final email regarding this matter prior to tomorrow's meeting at 2p.

Attached is information provided to me today from Finance Officer Darlene Fox. Also attached is the original spreadsheet with questions sent out Monday by Commissioner Mau. So to be clear the requested information included filling out the spreadsheet itself along with 8 additional questions. The attachments provided by Ms. Fox is an attempt to provide most of the information requested by Commissioner Mau in the spreadsheet itself. This is information that was already created by Darlene at my previous request. The spreadsheet from Commissioner Mau is basically asking for past information as it relates to reserves, administrative costs, medical claims, pharmacy claims, the County's specific rate (premium) schedules actually used, minimum and maximum rates (premiums) recommended by the consultant, minimum and maximum projected total costs for the plan dating back to 2013. The attached documents include information on the reserves balances back to 2008, information on annual employee rate costs back to 2010 (does not include dependent rates), and information showing overall annual revenues of the plan back to 2011 and information showing expenditures (medical/dental and administration) back to 2011. The other 8 questions in the spreadsheet are as follows: Responses are in red.

- 1 Request similar information as above for dental plan. **Ms. Fox states that needs more time for this along with the spreadsheet. Since this requires a significant amount of time on her part, the Board needs to be in agreement that it wants the information presented in this format.**
- 2 Can vision be split out as a separate plan from health care? What would effect on plan be? Rates? Potential saving for county and employee? etc. **The vision policy for Jackson County is very basic. Employees qualify for a \$100 annual reimbursement for vision services if needed. Employees have the option to purchase themselves additional insurance from Community Eye Care. If the Board does not want this service then you can eliminate. I will see if Darlene can give an estimate on the annual cost of this benefit.**
- 3 ACA allows for premium increase of up to 50 % for tobacco users. What should rate be for tobacco users? How large of a premium could county plan include? **This is something that Mark Browder will need to discuss directly with the Board. There are basically two issues with this. 1. He will caution going up to 50% based upon case law 2. An alternative solution must be provided other than rate increase or stop smoking (i.e. classes). If the employee participates then this premium increase cannot be applied. This will also complicate our existing standard and enhanced plan system.**
- 4 Please provide a cost breakdown by tobacco user status for current plan year and 2017, 2018 plan year. **Again this will require additional research from Darlene.**

5 What are the details of our wellness programs? **Information was sent in a previous email.**

6 Do we have programs in place to encourage cost-effective shopping for health services? **Not that I am aware of at this time. But both proposals have something like this for next year. This will be discussed at the meeting.**

7 Do we need to consider a consumer-directed (high deductible) health plan?

If we had one what would the rate be for an employee if they selected such a plan?

What would savings be to county?

Could county provide incentive to employee to participate in such a plan that would result in savings to the county.

Mark Browder will need to discuss this with the board.

8 What is the process County has used for setting health plan rates in the past?

This can be discussed with the Board tomorrow.

The line of questions above can be broken down into two areas. They are as follows:

1. Research about how we got to the point of where we are today. This research is associated with the spreadsheets detailing the history, components in the spreadsheet that relates to past projected costs, actual rates established and projected/recommended rates and the process the County has used for setting health plan rates in the past.
2. Questions that relate to next year's plan. Questions about vision benefits, tobacco users, wellness program, cost effective shopping for health services and consumer directed health plans all relate to next year's plan.

I recommend that we initially focus on number 2 – next year's plan tomorrow. We are just simply out of time and need to move forward with selecting a provider, a plan and set rates. Mark Browder will present updated financial information tomorrow on both proposals. I plan on presenting a summary of both pros and cons about both Crescent

and Blue Cross Blue Shield. I also plan on having a detailed rate sheet that will plainly show the proposed rates for employees and dependents. I still need additional information from Mark Browder to put this information together. We will be on a conference call this afternoon. It is extremely important for the Board to move forward with making decisions on next year.

The research/discussion about how we got to the point of where we are today needs to be discussed further by the Board. I believe it necessary to discuss the purpose of this research. And depending upon purpose of this research then the discussion may have to move to closed session – personnel. It may be safer to start these conversations off in closed session – personnel and then move them to open session. These issues may need to be discussed at another meeting if time does not allow for us to move forward in these discussions. It is up to the Board.

Thanks and look forward to seeing you tomorrow,

Don Adams

Jackson County Manager

From: Darlene Fox <darlenefox@jacksonnc.org>
Sent: Wednesday, March 27, 2019 9:17 AM
To: 'Don Adams' <donadams@jacksonnc.org>
Subject: RE: Health plan questions and information

Don,

Attached are spreadsheets that cover most of the requested information.

I will need some additional time to provide the information as requested.

Thanks,

Darlene

From: Don Adams <donadams@jacksonnc.org>
Sent: Monday, March 25, 2019 9:41 AM
To: Darlene Fox <darlenefox@jacksonnc.org>; Mark Browder <mark@markiieb.com>
Subject: FW: Health plan questions and information

Hello Darlene and Mark,

This is an email sent to me from Commissioner Ron Mau. He is requesting information. I am not sure all of this can be put together by Thursday.

In the attached spreadsheet there are 8 questions along with the requested information in the spreadsheet. So here are my thoughts on who may be able to provide the information:

- Spreadsheet information – Darlene is the only one who could attempt to fill out this information. As you can see Commissioner Mau is attempting to align the reserve information with the actual claims data with the rates used/recommended. I don't think the spreadsheet could be completed as written. But we can discuss a little further.
- Question 1 – Darlene – I believe we do not separate these administrative costs out even though we have separate fees. You may not be able to completely answer these questions.
- Question 2 – We provide only a \$100 benefit out of our current health plan. Not sure if you could tell me how much we spend on this benefit. Employees have the option to buy additional insurance from Community Eye Care.
- Question 3 – Mark – Please answer the question here. Basically let the Commissioners know that under ACA we must offer an alternative for smokers in lieu of higher premiums or lesser benefit (i.e. classes) I believe you thought this would not amount to a significant savings.
- Question 4 – Darlene – Please let me know whether or not you can provide this data.
- Question 5 – Kathleen Breedlove will provide information.
- Question 6 – I believe the answer is no on this. Mark – please provide any commentary on this question.
- Question 7 – Not sure how to handle. I will defer to Mark on this. Mark please provide any commentary on this.
- Question 8 – Darlene – Please provide the answer to this.

Thanks,

Don Adams

Jackson County Manager

401 Grindstaff Cove Rd, Suite A207

Sylva, NC 28779

828-631-2295

donadams@jacksonnc.org

From: Don Adams <donadams@jacksonnc.org>

Sent: Monday, March 25, 2019 8:58 AM

To: Ron Mau (ron.r.mau@gmail.com) <ronmau@jacksonnc.org>

Subject: FW: Health plan questions and information

Hello Ron (Commissioners Bcc'd),

I will forward these request to Human Resources Director Kathleen Breedlove, Finance Officer Darlene Fox and Mark III consultant Mark Browder.

- Kathleen Breedlove is the person to provide Wellness Program Information
- Darlene Fox is the person to provide financial data and past practices
- Mark Browder is the person to provide advice on health laws and alternative medical plans.

I am not sure when this information can be put together. It will be passed along to staff today and I am sure they will do the best that they can to pull the information together. It will be passed along to all Commissioners as it becomes available.

Don Adams

Jackson County Manager

401 Grindstaff Cove Rd, Suite A207

Sylva, NC 28779

828-631-2295

donadams@jacksonnc.org

From: Ron Mau - Commissioner <ronmau@jacksonnc.org>

Sent: Monday, March 25, 2019 8:32 AM

To: Don Adams <donadams@jacksonnc.org>

Subject: Health plan questions and information

Don,

Good morning.

In doing some homework for our upcoming meeting I would like to have some more information as requested in the attached document. Would it be possible to have the data for the table (including item 1 listed below the table) by close of business Tuesday March 26, 2019.

Questions and comments (2 through 8) below the table could be provided during our meeting although it would be beneficial to have this information as soon as possible.

Thanks and have a great Monday!

Ron

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Don Adams

From: Gayle Woody - Commissioner
Sent: Wednesday, March 27, 2019 11:28 PM
To: Don Adams
Subject: Re: Health plan questions and information

Dear Don,

Thank you for all the EXTRA hard work you did to answer these questions. Please thank Darlene and Kathleen as well.

Gayle

Sent from my iPad

On Mar 27, 2019, at 12:25 PM, Don Adams <donadams@jacksonnc.org> wrote:

Hello Commissioners (all Bcc'd),

This will be my final email regarding this matter prior to tomorrow's meeting at 2p.

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Thanks and look forward to seeing you tomorrow,
Don Adams
Jackson County Manager

From: Darlene Fox <darlenefox@jacksonnc.org>
Sent: Wednesday, March 27, 2019 9:17 AM
To: 'Don Adams' <donadams@jacksonnc.org>
Subject: RE: Health plan questions and information

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Thanks,
Darlene

From: Don Adams <donadams@jacksonnc.org>
Sent: Monday, March 25, 2019 9:41 AM
To: Darlene Fox <darlenefox@jacksonnc.org>; Mark Browder <mark@markiieb.com>
Subject: FW: Health plan questions and information

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- Question 8 – Darlene – Please provide the answer to this.

Thanks,

Don Adams
Jackson County Manager
401 Grindstaff Cove Rd, Suite A207
Sylva, NC 28779
828-631-2295
donadams@jacksonnc.org

From: Don Adams <donadams@jacksonnc.org>
Sent: Monday, March 25, 2019 8:58 AM
To: Ron Mau (ron.r.mau@gmail.com) <ronmau@jacksonnc.org>
Subject: FW: Health plan questions and information

Hello Ron (Commissioners Bcc'd),

I will forward these request to Human Resources Director Kathleen Breedlove, Finance Officer Darlene Fox and Mark III consultant Mark Browder.

- Kathleen Breedlove is the person to provide Wellness Program Information
- Darlene Fox is the person to provide financial data and past practices
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Sylva, NC 28779
828-631-2295
donadams@jacksonnc.org

From: Ron Mau - Commissioner <ronmau@jacksonnc.org>
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To: Don Adams <donadams@jacksonnc.org>
Subject: Health plan questions and information

Don,

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Thanks and have a great Monday!

Ron

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<HEALTH AND DENTAL INSURANCE HISTORY FY 2011-FY 2018.pdf>

<MEDICAL AND DENTAL RATES FY 2010-2019.pdf>

<SELF INSURANCE RESERVES FY 2008-2018.pdf>

<Health_Plan_Request.xlsx>

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Don Adams

From: Don Adams
Sent: Tuesday, March 26, 2019 10:38 AM
Subject: FW: FW: Health plan questions and information
Attachments: WellatWorkSummary.pdf

FYI

From: Kathleen Breedlove - HR <kathleenbreedlove@jacksonnc.org>
Sent: Tuesday, March 26, 2019 8:18 AM
To: Don Adams <donadams@jacksonnc.org>
Subject: Re: FW: Health plan questions and information

Please see the attachment.

Kathleen Breedlove
Human Resources
Jackson County
401 Grindstaff Cove Road, Suite A-218, Sylva, NC 28779
Office - 828.631.2264
Fax - 828.631.2266
kathleenbreedlove@jacksonnc.org

On Mon, Mar 25, 2019 at 9:01 AM Don Adams <donadams@jacksonnc.org> wrote:

Kathleen,

Commissioner Mau has requested additional information regarding our health plan. One of the questions is in regards to our Wellness Program. Please put together a brief summary to be provided to all Commissioners. Please send this summary directly to me and I will forward Bcc to all Commissioners.

Thanks,

Don

From: Don Adams <donadams@jacksonnc.org>
Sent: Monday, March 25, 2019 8:58 AM
To: Ron Mau (ron.r.mau@gmail.com) <ronmau@jacksonnc.org>
Subject: FW: Health plan questions and information

Hello Ron (Commissioners Bcc'd),

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Don Adams

Jackson County Manager

401 Grindstaff Cove Rd, Suite A207

Sylva, NC 28779

828-631-2295

donadams@jacksonnc.org

From: Ron Mau - Commissioner <ronmau@jacksonnc.org>

Sent: Monday, March 25, 2019 8:32 AM

To: Don Adams <donadams@jacksonnc.org>

Subject: Health plan questions and information

Don,

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Thanks and have a great Monday!

Ron

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Don Adams

From: Ron Mau - Commissioner
Sent: Friday, April 05, 2019 12:45 PM
To: holly@smokymountainnews.com
Cc: Don Adams; Heather Baker
Subject: Fwd: Closed Session 4/2/2019 Work Process Discussion

Holly,

As requested.

Ron Mau

----- Forwarded message -----

From: Ron Mau - Commissioner <ronmau@jacksonnc.org>
Date: Wed, Apr 3, 2019, 12:01 PM
Subject: Closed Session 4/2/2019 Work Process Discussion
To: Don Adams <donadams@jacksonnc.org>

(All commissioners have been BCC'd)

All,

After further thought I feel I need to express my concerns related to one of the topics discussed in last evenings closed session.

Discussing a process in no way is a closed session topic. As a board we may have violated open meetings laws by discussing a work process.

Tuesday afternoon at about 1:30 pm, I was asked several questions related to our health insurance plan and process by local media. Some of the topics were also discussed in our closed session. I was specifically asked about what our past process was. At that time, I indicated I was not sure. I had asked the question but had not been provided a response. The interviewer indicated my response was interesting and I responded "exactly".

The media appears to be aware there has been an issue in our process. The media is aware 1.4 million taxpayer dollars were transferred from our fund balance to our insurance plan last year. The media is aware there will likely be at least 1.2 million taxpayer dollars transferred from our fund balance to our insurance plan this year.

A related concern deals with the accounting of the above amounts and total 4.3 million dollars over the last 5 years for an item that is not a line item in our budget nor is it listed in our audited statements. I have asked the county manager how would the public be able to identify what caused the 1.4 million dollar transfer last year. Unless someone digs into the "Report to the County Board of Commissioners, Jackson County North Carolina, June 30th, 2018," there is no way to know. As mentioned in the past the 1.4 million was charged to public safety.

I have expressed concerns related to the audited report multiple times and am somewhat surprised by the rather flippant responses in previous discussions and last night and here is why.

I have a colleague who in the past performed audits for the FBI although their work did not focus on government institution audits. After delving into this issue as much as I could, based on the information available, I explained the situation to my colleague. This person thought this was an odd situation and indicated I was indeed asking the correct questions. Their response was couched that there may be legal technicalities of which they are not aware.

In addition to asking about and properly reconciling the accounting of taxpayer dollars; the comment from my colleague that raised the biggest concern for me personally was, "Ron, what personally liability do you potentially assume in this situation if there is indeed an issue with the audit?"

This is not about not trying to improve processes in the future; this must be done. This is not about "micro analysis" as stated last night. This is a serious issue that needs to be resolved in a thorough process and the process may require additional data and analysis. The issue stems from decisions with our health insurance plan which have resulted in issues in our audited statements; they are interrelated and need to be fully addressed.

I have no intention of assuming personal liability for actions I was not aware. I have no intention of assuming personal liability for decisions that have information and data available to address the issue. I have no intention of not ensuring the proper accounting of past, present or future taxpayer dollars particularly after an issue has been identified.

As agreed to last night, I will be meeting with our County Manager to obtain additional data and information.

Enjoy the day.

Ron Mau

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Don Adams

From: Ron Mau - Commissioner
Sent: Friday, April 05, 2019 9:42 AM
To: Don Adams; Heather Baker
Subject: Fwd: Email request

Don and Heather,

Is there any specific process I need to follow to comply with the request?

Ron

----- Forwarded message -----

From: Holly Kays <holly@smokymountainnews.com>
Date: Fri, Apr 5, 2019, 9:34 AM
Subject: Email request
To: Ron Mau - Commissioner <ronmau@jacksonnc.org>

Hi Ron,

Hope all is well with you. I'm reaching out to ask that you forward me an email sent to commissioners Wednesdays regarding the closed session Monday. Thanks!

Holly

Holly Kays
Outdoors editor
News reporter
Author, Shadows of Flowers

—
Smoky Mountain News
holly@smokymountainnews.com
828-452-4251
smokymountainnews.com
www.facebook.com/shadowsofflowers

Don Adams

From: Ron Mau - Commissioner
Sent: Wednesday, April 03, 2019 12:02 PM
To: Don Adams
Subject: Closed Session 4/2/2019 Work Process Discussion

(All commissioners have been BCC'd)

All,

After further thought I feel I need to express my concerns related to one of the topics discussed in last evening's closed session.

Discussing a process in no way is a closed session topic. As a board we may have violated open meetings laws by discussing a work process.

Tuesday afternoon at about 1:30 pm, I was asked several questions related to our health insurance plan and process by local media. Some of the topics were also discussed in our closed session. I was specifically asked about what our past process was. At that time, I indicated I was not sure. I had asked the question but had not been provided a response. The interviewer indicated my response was interesting and I responded "exactly".

The media appears to be aware there has been an issue in our process. The media is aware 1.4 million taxpayer dollars were transferred from our fund balance to our insurance plan last year. The media is aware there will likely be at least 1.2 million taxpayer dollars transferred from our fund balance to our insurance plan this year.

A related concern deals with the accounting of the above amounts and total 4.3 million dollars over the last 5 years for an item that is not a line item in our budget nor is it listed in our audited statements. I have asked the county manager how would the public be able to identify what caused the 1.4 million dollar transfer last year. Unless someone digs into the "Report to the County Board of Commissioners, Jackson County North Carolina, June 30th, 2018," there is no way to know. As mentioned in the past the 1.4 million was charged to public safety.

I have expressed concerns related to the audited report multiple times and am somewhat surprised by the rather flippant responses in previous discussions and last night and here is why.

I have a colleague who in the past performed audits for the FBI although their work did not focus on government institution audits. After delving into this issue as much as I could, based on the information available, I explained the situation to my colleague. This person thought this was an odd situation and indicated I was indeed asking the correct questions. Their response was couched that there may be legal technicalities of which they are not aware.

In addition to asking about and properly reconciling the accounting of taxpayer dollars; the comment from my colleague that raised the biggest concern for me personally was, "Ron, what personally liability do you potentially assume in this situation if there is indeed an issue with the audit?"

This is not about not trying to improve processes in the future; this must be done. This is not about "micro analysis" as stated last night. This is a serious issue that needs to be resolved in a thorough process and the process may require additional data and analysis. The issue stems from decisions

with our health insurance plan which have resulted in issues in our audited statements; they are interrelated and need to be fully addressed.

I have no intention of assuming personal liability for actions I was not aware. I have no intention of assuming personal liability for decisions that have information and data available to address the issue. I have no intention of not ensuring the proper accounting of past, present or future taxpayer dollars particularly after an issue has been identified.

As agreed to last night, I will be meeting with our County Manager to obtain additional data and information.

Enjoy the day.

Ron Mau

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