PSERS PULIC SHOOL ENFLORMED						Date Flexibility		Committee	Board Action		2			6		25		-70		
PULIC SCHOOL EMPLOYMENT			Public School Employees' Retirement Board HCC Work Plan Items 2024	Start date	End date	(can be earlier, but not later)	Frequency	Action Item	ltem	January	February March 21-22	May 30-31	June	August 15-16	September	October 24-	November	Special Comments		
Status for 2024	Training	Board or Committee Training	Health Care Committee							x	x	x		x			x	Meet at least 4 times a year	Committee Motion Date	Board Resolution Date
Complete			The Committee Chair is to set the dates and times of the committee																	
Complete			meetings. Elect Chair		1/19/24 1/19/24	No No	Annually Biennially	No Yes	No No	x x				-						
Complete			Elect Vice-Chair		1/19/24	No	Biennially	Yes	No	x										
			Conduct a self-evaluation of the Committee's performance as part of the Board's self-evaluation process.		TBD	Yes	Annually	No	No									Contingent on the development of the Board's self-evaluation process.		
			Review the Committee Charter at least every three years.	last reviewed 3/2022	TBD March 2025	No	Every 3 years	Yes	Yes									Any proposed changes are to be referred to the Governance and Administration Committee. If no proposed changes, then the Committee's report to the Board will document that the charter was reviewed and no changes were referred.		
			A. Activities Conducted on behalf of the Board																	
			1. Conduct the search for the health plan consultant, with the assistance of staff, and make recommendations to the Board. The Committee should ensure that an RFP is issued for the health plan consultant contract at least every five (5) years unless the Board chooses otherwise.				Every 5 years	Yes	Yes											
			Segal (HC and PA Consulting Services)		8/15/24	No	Every 5 years	Yes	Yes					x				Current contract expires 12/31/2024. Depending on committee time resources, will try to schedule this for May 30, 2024.		
			Gallagher (Bluepeak)		2/1/26	No		Yes	Yes											
			2. Evaluate the performance of all health plan service providers necessary or desirable for the administration of the health plan annually.			Yes	Annually	No	No									Staff meet with vendors and consultants monthly to review.		
			Review contracts the Committee has not delegated for any necessary activity		TBD	Yes	As Needed	No	No									Common Committee Responsibility		
			Identify, based on work contracted, which service providers need to be evaluated		TBD	Yes		No	No									Common Committee Responsibility		
			Develop the standards of evaluating performance, i.e. SLAs, metrics, benchmarking, etc.		TBD	Yes		No	No									Common Committee Responsibility		
			Evaluate identified service providers		TBD	Yes		No	No									Common Committee Responsibility		
			3. The Committee should ensure that RFPs are conducted for each key service provider contract at least every five (5) years unless the Board chooses otherwise.			No	Every 5 years	Yes	Yes											
			HOP Third Party Administrator (Luminare Health Benefits)		12/31/25	No	Every 5 years	Yes	Yes											
			Vision (EyeMed)		12/31/25		Every 5 years		Yes											

	Dental (MetLife)		12/31/25	No	Every 5 years	Yes	Yes						
	Silver Sneakers (SoleSource) (Informational Item)												
			12/31/25	No	Every 5 years	No	No					 Full Delegation to Staff (Inform Committee)	
	Optum Rx (Prescription Drug Provider)	4/4/25	1/1/20	Nie	Even Event	Voc	Vas					Two year contract with three one-year renewals. First one-year renewal 1/1/2025. Need approval in August to give enough time to	
	B. Recommend direction and policy to the full Board:	1/1/25	1/1/28	No	Every 5 years	Yes	Yes			X		negotiate the renewal.	
	1. Annually identify anticipated health insurance policy priorities and establish a calendar of anticipated policy decisions and discuss with the Board.				Annually							Tied to the approval of the work plan.	
								_					
	2. Review and recommend vital signs and metrics for health insurance and identify tolerances for acceptable vs. unacceptable variability in performance.			Yes	As Needed	Yes	Yes					Common Committee Responsibility	
	C. Recommend approval of key decisions:												
	1. Make recommendations to the Board regarding changes to the health												
	insurance programs and to the Premium Assistance Program, including, but not limited to, changes to the type or level of benefits offered to retirees and the scope of the health insurance programs; and shall recommend the annual administrative budgets for the health insurance and Premium Assistance Programs.												
	Approve proposed 2025 HOP Value Medical Plan & Rates		5/30/24	No	Annually	Yes	Yes		x				
	Approve proposed 2025 HOP Pre-65 Medical Plan & Rates		5/30/24	No	Annually	Yes	Yes		x			 	
	Approve proposed 2025 HOP Enhanced Medicare Part D Rx Plan & Rates		5/30/24 5/30/24	No	Annually Annually	Yes Yes	Yes	 	X		_		
	Approve proposed 2025 HOP Basic Medicare Part D Rx Plan & Rates Approve proposed 2025 HOP Value Medicare Part D Rx Plan & Rates		5/30/24	No No	Annually	Yes	Yes	 	x			 	
	Approve proposed 2025 HOP Medical Plan & Rates		5/30/24	No	Annually	Yes	Yes		x				
	Approve proposed 2025 HOP Budget		12/19/24	No	Annually	Yes	Yes					Calendar Year Budget for premiums and claims, x HOP Administration, and PDP Administration	
	Identify and approve any revisions to previously approved rates		8/15/24	Yes	As Needed	Yes	Yes			x		Contingent on CMS action	
	Recommend approval of the staffing complement for the administration of the HOP.		5/30/24	Yes	Annually	Yes	Yes		x			This recommendation is for when the Board approves budget for next fiscal year in October. NOT IN CHARTER BUT IN OTHER CHARTERS	
	Inflation Reduction Act Formulary Alignment and Plan Design		5/30/24	No		Yes	Yes		x				
Yes Comn	Inflation Reduction Act 2025 Provisions and Impact		TBD April 2024	No		No	No		x			Tied to Section D.1	
	D. Oversee Board-approved direction (see committee charter for scope)												
	1. Monitor and review the operations of the health insurance programs which the System offers to its retirees and their dependents.												
	Receive update on Dental/Vision Plan plans and rates		8/15/24	Yes	Annually	No	No			X			
	Receive MCO Report Medicare Advantage plans and rates2. Monitor and review the Premium Assistance Program which the System administers for the purpose of reimbursing eligible retirees for out-of-pocket health insurance premium expenses		8/15/24	Yes	Annually	No	No			X			
	2023 Premium Assistance Verification Process Results		8/15/24	Yes	Annually	No	No			x			
Yes Comn	mittee Premium Assistance Overview and Verification Process		8/15/24	Yes		No	No			x			
	3. Oversee management of risks related to the responsibilities of this											Not in charter but in another charter.	
	committee.												
	Health Options Program Risk and Controls Assessment Findings		3/21/24	Yes	As Needed	No	No	x				Executive Session	
	4. Oversee strategic initiatives most directly related to the responsibilities of this committee.											Not in charter.	

E. Obtain independent verification.										
1. Periodically obtain appropriate health plan benchmarking information which compares the PSERS health insurance program to peer programs with respect to cost and outcomes and to present the results to the Board.										
Enrollment Experience	3/21/24	Yes	Annually	No	No	x				
2024 Market Report Comparison	3/21/24	Yes	Annually	No	No	x				