IDAHO HEALTH INSURANCE EXCHANGE
DBA YOUR HEALTH IDAHO

YOUR HEALTH IDAHO
BOARD MINUTES
FRIDAY, SEPTEMBER 17, 2021

BOARD MEMBERS PRESENT
• Ms. Janice Fulkerson, Vice Chair
• Mr. Hyatt Erstad, Secretary (via videoconference)
• Mr. Kevin Settles, Treasurer
• Mr. Jerry Edgington (via videoconference)
• Ms. Margaret Henbest (via videoconference)
• Dr. Cynthia Fairfax (via videoconference)
• Mr. Peter Sorensen
• Mr. Brett Thomas (via videoconference)
• Ms. Carolyn Lodge
• Ms. Tara Malek (via videoconference)
• Senator Jim Rice
• Senator David Nelson (via videoconference)
• Mr. Shane Leach for Director Dave Jeppesen (via videoconference from 8:39-8:41 am)
• Mr. Weston Trelker for Director Dean Cameron

OTHERS PRESENT
• Mr. Pat Kelly, Your Health Idaho
• Mr. Kevin Reddish, Your Health Idaho
• Ms. Heidi Stockert, Your Health Idaho
• Ms. Meghan McMartin, Your Health Idaho
• Ms. Alanee Thomas, Your Health Idaho
• Ms. Frances Nagashima, Your Health Idaho
• Ms. Julie Sparks, Your Health Idaho (via videoconference)
• Mr. Mike Stoddard, Hawley Troxell (via videoconference)
• Mr. Kevin Smith, Eide Bailly LLP (via videoconference)
• Ms. Ellen Duncan, Eide Bailly LLP (via videoconference)
• Alex Quesada, Accenture (via videoconference)
• Jeremy Pisca, Risch Pisca (via videoconference)

1. CALL TO ORDER

Following proper notice in accordance with Idaho Code Section 74-204, the Board of Directors meeting of the Idaho Health Insurance Exchange (Exchange) was called to order by Ms. Fulkerson (Chair) at 8:33 am, Friday, September 17, 2021, at the offices of Your Health Idaho. In accordance with Idaho Code Section 74-203 (1), the meeting was
open to the public and streamed in video conference format via GoToMeeting and the Idaho Public Television web site.

2. ROLL CALL

Mr. Erstad called roll and determined that Chair Fulkerson, Mr. Settles, Dr. Fairfax (via videoconference), Ms. Henbest (via videoconference), Mr. Edgington (via videoconference), Ms. Lodge, Mr. Sorensen, Mr. Thomas (via videoconference), and Mr. Weston Trexler for Director Cameron were present, resulting in a quorum. Mr. Weeg, Mr. Donaca, Ms. Hart, Ms. Tucker, Representative Dixon, and Director Jeppesen were absent. Senator Nelson joined via videoconference at 8:37 am. Senator Rice arrived at YHI offices at 9:23 am. Ms. Malek joined via videoconference at 11:16 am.

3. PUBLIC COMMENT PERIOD

There were no comments.

4. PRIOR MEETING MINUTES

Chair Fulkerson asked if there were any changes to the minutes from the prior meeting and there were none.

**Motion:** Mr. Settles moved to approve the meeting minutes from the June 18, 2021, Board meeting. **Second:** Ms. Lodge. **The motion carried.**

5. REVIEW AGENDA

Chair Fulkerson asked if there were any changes or additions to be made to the agenda.

Mr. Kelly said that there were no changes to the content of the agenda but that we may move the financial review of FY21 in front of the modernization grant to help improve the flow of the meeting. Mr. Stoddard said that if we would be making a change to the order of the agenda, a motion needed to be made to that effect. He asked Mr. Kelly to state the proposed change and the reason for the change.

Mr. Kelly said that we would move the FY21 update in front of the modernization grant update, the reason being to make the meeting flow more efficiently.

**Motion:** Chair Fulkerson said that she would accept a motion to adjust the agenda as Mr. Kelly suggested. Mr. Settles moved. **Second:** Ms. Lodge. **The motion carried.**

*Senator Nelson joined via video conference at 8:37 am.*

6. REVIEW ROADMAP

Chair Fulkerson reviewed the roadmap, and no changes were made.
7. EXECUTIVE SUMMARY

Mr. Kelly welcomed the new Executive Assistant and Board Liaison, Julie Sparks. He stated that Covid is once again front of mind with increasing case counts and media coverage. Your Health Idaho (YHI) remains committed to keeping their team informed and they have recently revisited Covid protocols to make sure they were still appropriate. YHI is also encouraging team members to wear a mask inside the building to the extent that they feel comfortable and to make the choice to get vaccinated. YHI provides two hours paid time off for employees to go get vaccinated. Should it be deemed necessary for YHI to return to remote work status they would be ready to deploy within hours.

The Public Health Emergency (PHE), and therefore protected Medicaid, remains in place until October 31, 2021. Working with YHI’s partners at the Department of Health and Welfare (DHW) it is estimated that there are approximately 17,000 Idahoans currently on protected Medicaid that would be otherwise eligible for a tax credit. When the public health order is lifted, YHI will be ready to conduct outreach directly to these consumers so they understand their options for enrolling in coverage through the exchange.

Mr. Kelly said that he wanted to briefly touch on strategic initiatives for YHI. As evidenced by the board survey, there is a clear desire for more strategic focus during board meetings and less desire for operational reporting. This aligns well with what YHI has been discussing internally, which is focusing on the long-term goals and financial sustainability. Mr. Kelly said that he looks forward to that discussion later in the morning and hearing the Board’s input on the outlined goals.

Mr. Kelly reminded everyone that the flow of today’s meeting is slightly different than past meetings to accommodate guest speakers around the financial and programmatic audit.

8. FINANCE

Mr. Settles said that at the Finance Committee meeting, the Committee was happy to hear that the auditors had no findings and that there was unmodified opinion. Mr. Settles stated that the Committee reviewed the audit with the auditors and then spoke about the Modernization Grant which Mr. Kelly will cover later today. The Committee then looked at Forecast Year to Date, which is done on a regular basis and talked about the results of the new enrollment period with the American Rescue Plan Act (ARPA) and how it has added enrollment. YHI is still behind budget but doing better than they would be without those changes. The Committee then did their self-evaluation, and the Committee had a favorable response to that.

Mr. Kelly then introduced Mr. Smith of Eide Bailly to go over the audit results.

a. FY21 Financial Audit

Mr. Smith said that they met with the Finance Committee two weeks ago and reviewed the details of the audit process and procedures in addition to the
financial information that is disclosed in the financial statement. The auditors issued an unmodified or clean opinion, which is always the goal of the audit process. Mr. Smith stated that they were happy to report that they had no comments, no findings, and no adjustments during the audit process.

Mr. Smith said that they also issued a report on the programmatic procedures that are required and there were no comments or findings related to those procedures.

Mr. Smith stated that YHI still has a strong balance sheet, about $17.4 million in assets and the change in net assets was $591K and net position is approximately $16.7 million compared to last year's change in net assets of $2.2 million in the prior year. Revenue went down last year $1.8 million due to Medicaid expansion compared to a reduction of $1.1M last year, also due to Medicaid expansion.

Mr. Smith paused and asked if there were any questions or comments.

Mr. Settles commented that Ms. Stockert and her staff worked very well with the auditors and the auditors were very complementary about the work that Ms. Stockert has done. Mr. Settles stated that he had been through several audits with Eide Bailly and that the praise this time was more glowing than ever.

Ms. Stockert said that this was her second year working with Eide Bailly and that her team was very complimentary regarding working with them. She stated that Eide Bailly provided the materials to YHI early and the field work went smoothly. Additionally, Eide Bailly came onsite to YHI as opposed to last year when the work had to be completed remotely. Ms. Stockert said that doing the work remotely the previous year made it a little more challenging but that they still felt that they worked together very well.

Mr. Smith said that Eide Bailly appreciates the opportunity and echoed what Ms. Stockert had said, that it was efficient, and everyone's help was appreciated.

**Motion:** Mr. Settles moved that the Board, as recommended by the Finance Committee, approve the Audited Financial Statements and Audit Report for the financial year ended June 30, 2021, including additional information contained in the report and as presented today. **Second:** Ms. Lodge. The motion carried.

b. FY21 Programmatic Audit

Mr. Kelly asked Mr. Smith if he had a summary of the programmatic audit as well and Mr. Smith said that he did.

Mr. Smith said that they will issue a programmatic procedures report and did not have any comment or findings. They went through the required areas of the programmatic compliance 45 CFR part 155 and found everything in order.
Motion: Mr. Settles moved that the Board, as recommended by the Finance Committee, approve the Programmatic Audit Report for the financial year ended June 30, 2021, including additional information contained in the report and as presented today. Second: Mr. Sorensen. The motion carried.

c. FY21 Financial Update

Mr. Kelly gave a brief overview of the 2021 Consolidated Income Statement. He started by saying that the document is a view of how YHI reports verses the auditor format. Mr. Kelly stated that YHI’s performance verses budget was very strong. While YHI missed the revenue budget due to the impacts of Covid, the Public Health Emergency and in turn, protected Medicaid, operating expenses were below budget which more than made up for the revenue shortfall. For year ended June 30, YHI’s net operating income, or revenue less operating expenses, exceeded budget by $104,000.

d. Modernization Grant Update

Mr. Kelly said that this grant opportunity was made possible by the American Rescue Plan Act (ARPA). All state-based exchanges, including those leveraging healthcare.gov, were eligible to apply for grant funding. A total of $20 million was available for states to use for modernization activities in response to ARPA. YHI applied for a grant in July and focused the funding request on technology updates, enrollment entities, and administrative oversee required by CMS. On September 10, YHI received a grant award of $1.1 million. While YHI has the authority to apply for the grant, we do not have the authority to spend grant funds without board approval.

At this time, Mr. Kelly paused for questions. Mr. Sorensen asked if the $1.1 million was the amount that was requested or the amount that was awarded. Mr. Kelly replied that YHI requested just under $1.3 million, not knowing what other states would request. All state-based exchanges, operating their own technology with the exception of one, received this exact same amount. Mr. Sorensen asked if the amount was based on population or the amount of people on the exchange or if it was evenly split. Mr. Kelly responded that the intent of ARPA was to distribute the funds equally, not based on enrollment or population.

Motion: Mr. Settles moved that the Board, as recommended by the Finance Committee, approve the grant spending authority as presented today and disbursements of such funds will be made consistent with Your Health Idaho’s Procurement Policy. Second: Ms. Lodge. The motion carried.

e. FY22 Financial Forecast

Mr. Kelly gave a brief update on the FY22 Financial Forecast. He said that while it is still early in the year, YHI is projecting that revenue will exceed the budget due to the modernization grant funding and strong enrollment performance.
Expenses are also projected to beat budget, largely due to open positions and the lower cost allocation from the Department of Health and Welfare (DHW) related to eligibility shared services, which workstream will be transitioned to YHI on October 1. Current projections show that YHI will exceed budget for Net Operating Income by approximately $1.5 million.

Those financial results form the foundation for the cash forecast. YHI’s cash forecast is well above the cash reserve line of $6.6 million and that is expected to continue through the end of FY27. You can see some fluctuations compared to budget and that is primarily due to retiming of expenses as well as including the funding for the modernization grant.

9. GOVERNANCE

Ms. Henbest stated that the Governance Committee met on September 2, 2021. The Committee covered Employee Engagement, the Annual Board Survey, and the Annual Committee Self-Evaluation.

In terms of Employee Engagement, the Committee reviewed the progress of the Employee Engagement Task Force and was supportive of their focus on the key questions from the Gallup survey.

The Committee also discussed the current Covid environment and how YHI is managing this risk for the team while balancing serving Idahoans.

The Committee reviewed the results of the Annual Board Survey. It’s fair to say that the Board has reached a maturity in its functioning and that was reflected in the survey results.

During the Committee Self-Evaluation, the Committee agreed that they are moving forward positively and there were also some comments about the ability to work virtually over the past year and the sentiment that this has allowed the Committee to have better attendance and better discussion.

a. Employee Engagement

Mr. Kelly stated that team member engagement is a top priority for both him and the team at YHI. Following the Gallup survey in May, the Employee Engagement Task Force (EETF) evaluated the survey results and chose to focus on two questions from the survey. The first is question three: “At work, I have the opportunity to do what I do best every day.” The second is question nine: “My coworkers are committed to doing quality work.” While the task force is still finalizing their recommendations, early feedback indicates three areas of opportunity.

First, the number of meetings that each person attends seems to take away from people’s ability to do what they do best every day. Mr. Kelly said that he looks
forward to the recommendations from the task force on how to reduce the number of meetings.

Second, there continues to be concern around being short staffed. YHI had some turnover earlier this year that led to internal moves and promotions, which in turn created more openings. YHI also had some departures during the summer and the state of the job market has created general challenges around staffing. With all of the changes in staffing, YHI has had multiple people wearing multiple hats, which makes it difficult for an employee to do what they do best every day. Thanks to Ms. Thomas and Ms. Martinez, YHI has made good progress on filling those positions in the last few weeks. To the task force’s credit, it is understood that this may be more situational than systemic and they thought it best that staffing levels be revisited in January once YHI has had a chance to fill positions and let people settle into those roles.

Finally, YHI team members would like to be able to cross train and understand what other teams do at YHI. Again, I look forward to the recommendations of the task force on those items.

Mr. Kelly stated that team member engagement is critical at YHI and he paused for questions or comments from the Board.

Mr. Settles stated that at his business, he is getting a lot of applicants who have lost their jobs due to their unwillingness to get vaccinated and are now changing careers. He has struggled with the decision of whether to hire these applicants. Mr. Settles asked if YHI had noticed the same situation with their applicants.

Ms. Thomas said that as of yet, YHI has not seen much of an influx of applicants. She stated that YHI has taken down the job postings because they have been hiring seasonal employees and that right now, they are only hiring a training specialist. Ms. Thomas said that when they start posting again, they expect to see more of those individuals who weren’t willing to comply with some of the requests from their previous organizations.

b. **Board Survey Results and Committee Self Assessments**

Mr. Kelly stated that, as in previous years, Ms. Ball performed the annual board survey. Mr. Kelly thanked the board members who completed the survey adding that there were new questions regarding virtual attendance and engagement. Overall, thirteen out of nineteen board members participated in the survey. The results reflect a notable increase in statements receiving 100% agreement. There are twenty-five statements in the survey and about two-thirds of those show 100% agreement. There were two statements that had agreement between 90%-100%, one statement with 80%-90% agreement and two statements between 75%-80% agreement.
Comparing this year to the previous year, there were seven statements that improved to 100% agreement and only three statements that declined. Two of those three relate to strategic focus and leveraging board member expertise. The third statement with a decline was around board members familiarizing themselves with materials for either board or committee meetings. Mr. Kelly stated that he was pleased to see the results as YHI had started their strategic planning before the survey came out and it was good to know that what they had been working on aligned well with what the Board was requesting.

There were two statements that were unchanged with 90%-100% agreement. Mr. Kelly said that YHI is encouraged by the positive feedback across the organization, particularly comments regarding virtual engagement. Board members who are not in the Treasure Valley are able to attend meetings virtually and Mr. Kelly believes that board member engagement has gotten stronger versus previous years where there was only telephone engagement for those non-local members. Also, with the rise of Covid, having the option for virtual attendance has also helped.

Last year, the Governance Committee recommended aligning the cadence of the board survey and the committee self-evaluations. They now occur annually and are presented at the September meeting. Based on the conversations at the committee level, the decision to align the board survey and the committee self-evaluations created more clarity around areas of opportunity. Overall, the committees continue to be pleased with meeting cadence, topics, delivery of materials in advance, and again, virtual attendance was seen as a positive, enabling more frequent and meaningful attendance at the meetings. There was an acknowledgement of diversity of views, robust discussion and how it enhances the decision-making process. This fits well with the shift to more strategic discussions at the committee and board level.

Opportunities mentioned were primarily regarding providing sufficient context around topics with significant history to assist some of the newer board members.

Mr. Kelly paused for questions and comments regarding the board survey and committee self-evaluations.

Chair Fulkerson said that she was pleased to see that thirteen out of nineteen board members participated and that she was looking forward to the discussion regarding the strategic initiatives.

10. EXECUTIVE SESSION

**Motion:** The Chair moved that the Board, pursuant to Idaho Code Section 74-206 (1), convene in Executive Session to consider the evaluation of an employee pursuant to Idaho Code Section 74-206 (1) (b), to consider records that are exempt from disclosure pursuant to Idaho Code Section 74-206 (1) (d), and to consider preliminary negotiations
involving matters of trade and commerce, pursuant to Idaho Code 74-206 (1) (e).

**Second:** Mr. Settles. **The motion carried.**

**Executive Session Roll Call:** Mr. Erstad called roll and determined that Chair Fulkerson, Mr. Settles, Dr. Fairfax, Ms. Henbest, Mr. Edgington, Ms. Lodge, Mr. Sorensen, Mr. Thomas, and Senator Nelson were present and agreeable, resulting in a quorum.

The Board entered into Executive Session at 9:06 am and reconvened at 10:03 am. No final actions nor decisions were made while in Executive Session.

**Senator Rice arrived at 9:23 am.**

11. EXECUTIVE COMPENSATION

**Motion:** Ms. Henbest moved that the Board, as recommended by the Governance Committee, approve revisions to the Compensation Policy to 1) eliminate the Executive Director’s Supplemental Bonus plan, and 2) replace it by modifying the Executive Director’s Variable Pay target percentage from 10% to 15%. **Second:** Mr. Erstad **The motion carried.**

12. PRIVACY AND SECURITY

**Motion:** Ms. Henbest moved that the Board delegate to the Executive Director and Chief Information Officer authority to develop an internal Privacy and Security Risk Management Policy. **Second:** Mr. Erstad. **The motion carried.**

13. GETINSURED CONTRACT

**Motion:** Mr. Settles moved that the Board has previously determined that there is only one vendor reasonably available to provide Maintenance and Change Requests and Operations services currently being provided by VIMO, Inc. (dba GetInsured) and that YHI should continue to contract with GetInsured for those services. Accordingly, and consistent with YHI’s Procurement Policy, move that the Board, as recommended by the Finance Committee, approve the extension of the contract with VIMO, Inc. (dba GetInsured) for a period of eight (8) years, January 1, 2022 through December 31, 2029, in an amount of $12,499,315 for Maintenance and $7,611,305 for Change Requests, and that the Executive Director and Chair of the Finance Committee would be authorized to negotiate and execute such extension. The amount of $715,381.71 for Maintenance and $435,622.92 for Change Requests is included in the Fiscal Year 2022 budget, and it is anticipated the Board will include amounts in each subsequent year’s budgets consistent with the total amounts approved by this motion. **Second:** Ms. Lodge. **The motion carried.**
14. APTC ELIGIBILITY

**Motion:** Mr. Settles moved that the Board, as recommended by the Finance Committee, has determined that there is only one vendor reasonably available to provide Advance Premium Tax Credit (APTC) Eligibility Design, Development, and Implementation (DDI), Maintenance and Change Requests, and Operations services which seamlessly integrate with services currently being provided by VIMO, Inc. (dba GetInsured) and that YHI should continue to contract with GetInsured for those services and that the Board confirm the same. Accordingly, and consistent with YHI’s Procurement Policy, move that the Board confirm as described above that there is only one vendor reasonably available to provide these services and approve the contract with VIMO, Inc. (dba GetInsured) for a period of eight (8) years, January 1, 2022 through December 31, 2029, in an amount that the Board Chair, the Executive Director, and Chair of the Finance Committee deem appropriate and necessary, in their discretion and determine appropriate amounts in to be paid each year. **Second:** Mr. Sorensen. **The motion carried.**

15. IV&V

**Motion:** Ms. Henbest moved that the Board, as recommended by the Governance Committee, authorize the Governance Committee to 1) conduct an RFP for Independent Verification and Validation (IV&V) services, 2) establish a Proposal Evaluation Team (PET) to evaluate the responses to the RFP, and 3) accept the recommendations of the PET; and that upon such acceptance the Executive Director and the Chair of the Governance Committee may negotiate and execute the contract with amounts that would not exceed monies otherwise available in the approved FY22 budget. **Second:** Mr. Erstad. **The motion carried.**

*The Board took a break from 10:10 am until 10:19 am.*

16. PLAN CERTIFICATION

Mr. Wes Trexler, standing in for Director Cameron, stated that before plans can appear on the exchange, they must meet certain criteria. The plans are submitted to the Department of Insurance (DOI) for review to ensure that they meet certification standards under the Affordable Care Act (ACA) for qualified health care plans. Some of the criteria that must be met is more stringent than if the plans were to be sold off of the exchange.

By way of explaining the key to reading and understanding his slides, Mr. Trexler said that plan names that are bolded and underlined are new plans for 2022. If the plan name is not bolded, that means that it currently exists on the exchange. If there is a grayed-out number or text following the plan name, that indicates that there is a difference from the prior year. The gray text or numbers state what it was the previous year.

Mr. Trexler stated that SelectHealth submitted 20 plans to DOI. Twelve of them are offered in southwestern Idaho through their SelectHealth Individual network. Eight plans
are offered through the Bright Path network in eastern Idaho and Kootenai county. The main change is that last year all those counties were in the same network. SelectHealth decided to separate eastern and northern Idaho into different networks. Because they are different networks, they are different plans. Technically they are new plans even though the plan is currently offered in those counties, just under a different name and a different network.

SelectHealth also submitted a new plan that met all the criteria called the Silver Copay Plan and that plan is being offered in all their service areas. They discontinued one plan, an HSA 3500, that will not be available in 2022.

There was no change to their service area.

Mr. Sorensen asked if the members who had plans where the network is changing will be moved off the new plan or if they will be terminated and need to re-shop.

Mr. Trexler said that the carriers provide a cross-walk where the consumers are moved from one plan to a comparable or new plan. From the consumer’s point of view, nothing will change. They will be automatically enrolled in the new plan.

Mr. Sorensen asked what will happen to the consumers who were on the plan that was discontinued.

Mr. Trexler said that the carrier will designate the most similar plan and the consumer will be cross walked automatically unless they request enrollment in another plan.

Regence Blue Shield of Idaho submitted 17 plans. Two plans were discontinued, and three plans were introduced. Currently, Regence has the same two networks as what is presented in the slide. However, the individual and family network was limited to a subset of the counties indicated. Previously, Regence Blue Shield of Idaho was not statewide on the exchange. For 2022, they have expanded to all counties offering on-exchange coverage. In going statewide on the exchange, they have introduced three plans which are shown on the slide.

The deductibles increased on several plans which is a normal occurrence for all the carriers. Every year or two they adjust the deductibles due to inflation to keep them within the actuarial value range necessary.

PacificSource had a change in their service area as well. The two networks shown, Navigator and Voyager, and the two service areas, exist currently in 2021. However, eastern Idaho counties were changed from Voyager to Navigator, similar to what was described with SelectHealth. The individuals who were in the Voyager network will be cross walked to the Navigator network.

PacificSource did not introduce any new plans. The Voyager network only had two plans in 2021 but PacificSource has decided to offer eight plans in both networks throughout their entire service area in 2022, which will result in statewide coverage.
Mountain Health had 19 plans in 2021. They are expanding to 23 plans in 2022 with the addition of Silver Base and Gold Base for two of the networks. They have a total of three networks: the Engage network, the Link network, and the Access Care network. The service areas for those networks are shown on the slide. There was very little change, just the introduction of those two plans in the Access Care and Engage service areas.

Molina Healthcare of Idaho is a new entrant for 2022, both on and off the exchange. They are not currently selling individual or small group plans in Idaho but they are not necessarily new to healthcare in Idaho. They have Medicare plans and work with DHW on Medicaid enrollments as well. Molina has offered coverage on dual eligibility plans where a person has coverage both through Medicare and Medicaid. They have submitted seven plans which have met all the requirements. DOI has had discussions about their network as they’ve come in and they had to establish a new network for the individual and small group markets. The plans that they have submitted are only available in seven counties in southwestern, eastern, and northern Idaho, which is where they currently have providers that are able to meet the adequacy requirements.

Blue Cross of Idaho has 81 plans, which is the same as 2021. The plans had very little change to their deductible level, other than the Catastrophic plan which is mandated to increase every year. The changes that Blue Cross made are fairly minor and are primarily to simplify what is offered in northern and central Idaho. They continue to offer plans statewide with at least one network in each county and frequently there is more than one network per county.

Overall, with the addition of the new carrier and other carriers increasing their offerings by either moving statewide or offering new networks, the total number of plans has increased from 136 in 2021 to a proposed number of 164 for 2022. In the individual market, there continue to be no carriers who wish to offer the Platinum plan. Statewide, most carriers are offering Catastrophic, Bronze, Silver, and Gold.

Mr. Trexler presented a slide for review, stating that it shows the distribution of plans across the six rating areas, mostly showing where carriers are and where they aren’t. Each rating area has substantial access and a good number of choices. The numbers shown in gray are again 2021’s numbers.

Moving on from the individual market, Mr. Trexler stated that the Board also certifies small group plans. The main benefit is that there are some employer credits available if the employers meet certain criteria and enroll their employees in a qualified health plan. The changes in the small group plans are similar to those in the individual market.

SelectHealth introduced the BrightPath network in ten counties, similar to what it did in the individual market.

PacificSource made the same change to expand the Navigator plans to eastern Idaho.

Blue Cross introduced a new Gold HSA plan for five of their networks.
Regence does offer small group plans but has not submitted those for certification.

Mr. Trexler said that with the new plan from Blue Cross of Idaho and SelectHealth introducing a new network, the total plans submitted for certification in the small group market has increased from 153 in 2021 to 173 in 2022.

Mr. Erstad added by Regence not certifying, it does not qualify for the tax credits under the shop plan. Although the shop plan never really came into existence, they do allow those tax credits to be applicable to those small employers that qualify in that category if it is a certified plan.

Mr. Trexler moved on to discuss dental plans. He said that carriers submit individual dental plans for certification and the plans appear on the exchange. The biggest change from last year to this year is the new carrier which is Educators Mutual Insurance Association. They submitted four individual plans for certification. The plans are similar in that they meet the criteria for a qualified dental plan and offer the required pediatric benefits. The addition of those four plans increases the total dental plans from 28 to 32.

Overall, DOI has reviewed 369 plans against the qualified health plan and qualified dental plan criteria and is recommending those plans for certification by the Board.

Chair Fulkerson thanked Mr. Trexler and asked if there were any questions or comments from the Board. There were none.

Mr. Kelly stated that he wanted to ask YHI’s general counsel about how carriers should vote on this particular motion. Mr. Stoddard said that it made sense to have the carriers stay in the discussion and perhaps make the motions but that traditionally the carriers abstain from voting so that technically, they aren’t certifying their own plans.

Chair Fulkerson asked Mr. Stoddard if there would be a quorum for voting if the carriers abstained. Mr. Stoddard that as long as there was still a quorum, the voting only required a majority vote to pass the motion.

Motion: Mr. Edgington moved that the Board accept the recommendation of the Department of Insurance and approve and certify the 369 plans as qualified health plans for plan year 2022, as presented today. Second: Ms. Lodge. The motion carried.

Jeremy Pisca joined via telephone at 10:39 am.

17. MARKETPLACE

Chair Fulkerson said that the Marketplace Committee reviewed the enrollment updates and the customer profile through August. They were pleased to see the stability in enrollment since ARPA and the clear savings for customers. She said that the Committee reviewed the customer experience levels through May and the operational changes that
were put in place that depend on the APTC support going forward. In addition, they also reviewed the progress on the annual certification of brokers and agents. Related to preparations for Open Enrollment 2022, the Committee reviewed the timeline, the technology roadmap, and overall events for the coming year. There was some discussion around the quality rating system that will be displayed with the 2022 plan and how those ratings are going to be determined. The Committee also reviewed the messaging survey. We were pleased to see how things were progressing, the focus on the customer experience, the low-cost promise and all the great work that YHI is doing. The Committee also reviewed the annual self-assessment. All the members agreed that the organization of materials and efficiency is to be commended. There was discussion about level setting and giving a bit more context for the new Committee members who are also new to the Board.

Mr. Kelly said that for the first time ever, YHI has seen growth in enrollments both January to September as well as May to September. That is largely due to there being two enrollment periods: the uninsured special enrollment period and the ARPA enrollment period. ARPA delivered savings to Idahoans of about 36% in the form of enhanced subsidies. Those enhanced subsidies have made health insurance more affordable than ever and that is driving the strong retention. The September number was 75,100 enrollments, which was a decline of about 500 enrollments from the previous month. YHI continues to see high effectuation rates, with all but 500 of the 75,000 having fully paid their premiums.

One of the questions that is often asked is “Why do people leave the exchange?” YHI is unable to capture all of the reasons for disenrollment. Some of it is through automation for things like termination for non-payment but when someone voluntarily unenrolls they are asked why they are leaving. Voluntary disenrollments make up about 31% of all disenrollments on the exchange and of those, almost half report gaining other coverage. Of those that report gaining other coverage, the majority gain employer-sponsored coverage or coverage through their spouse. The second highest group is those gaining Medicare. This is not a surprise given the high percentage of enrollments on the exchange that are age 55-64. This question has been asked multiple years and thanks to Ms. Husler and her team, YHI has been able to dive in and get some clarity on it. It helps YHI inform where they can improve but unfortunately, there is not a lot that can be done when people gain coverage elsewhere.

a. Customer Support Center Metrics

Mr. Kelly stated that inbound customer inquiries continue to decline year over year. This includes call volume as well as email. This excludes the March and April time period which is when the uninsured and the ARPA special enrollment periods were. Despite the staffing challenges, the YHI support center continues to deliver exceptional customer service with the NPS just over 44 for the average for 2021. That is about 30% higher than last year. That is a number that YHI is very proud of, and we continue to deliver to nearing world-class customer service.
Another question that YHI is asked is “What effect does having an agent or broker have on tenure with YHI?” More than three-quarters of people who have been with YHI for more than three years work with an agent or broker, compared to less than 25% that do not. It is an incredibly important partnership and one that YHI continues to hold in high regard.

b. Plan Year 2022 Preparations

Mr. Kelly said that YHI’s consumer connectors (which are agents, brokers, and enrollment counselors from all across the state) are currently going through their certification process for next year. All the live virtual training has completed and if anyone out there who is listening wants to get certified they can still attend online training and they will take exams in order to get certified. All of this needs to be completed by October 31 to be certified for plan year 2022. YHI also extended contracts with St. Luke’s and the Idaho Primary Care Association to work with YHI as enrollment entities. These two groups have been with YHI since the beginning and YHI is very excited to work with them in the coming year.

Mr. Kelly moved on to discuss staffing, training, and eligibility transition. Mr. Kelly said that it has been touched on a bit previously in the meeting but he wanted to make sure that there was an intentional discussion regarding the transition of work from DHW to YHI as it relates to APTC work. The staffing challenges have resulted in smaller classes than anticipated. Because of that, some of YHI’s existing team members were moved into the eligibility workstreams, essentially cross-training where possible. This will allow YHI to have a more broad-based set of skills to better serve Idahoans in the fall. The group working on APTC has transitioned from the classroom to the floor and is doing on the job training for the next two weeks. Two weeks from today, YHI will go live and will be on their own for APTC eligibility.

The other workstream related to staffing and training is the customer support center enrollment seasonal team. This is the traditional seasonal work force. YHI started hiring earlier this year to help backfill some of the existing team members that are now being cross trained. The first group hit the floor this week and they are continuing to leverage the buddy system as they get up to speed. YHI has paused some of the recruiting to let the postings rest a bit. The next class will be in October, a second one later in October, and a third class in November if needed.

Moving on to the technology update, Mr. Kelly said that they continue to implement the roadmap with the September release in a few weeks. The September release will focus on customer support tools, including ticketing and noticing, along with being the pilot for GetInsured’s broker mobile app. That has also been piloted over the summer and it will be deployed for all agents in January along with the typical update around 1095s. YHI is very excited about deploying Shop While You Wait. Essentially, this will allow consumer connectors
to meet with their clients once instead of an initial meeting to verify qualifying
life event documents and then another meeting to select a plan. Now they will be
able to select a plan, put it in a shopping cart and once their documents clear the
enrollment process will complete.

In March, YHI’s compromised credential check will be deployed as well as allow
YHI to change noticing verbiage in real-time.

c. Marketing and Outreach Update

This summer, YHI conducted a two-part messaging survey with the intention of
identifying messages and what works best for different audiences. The responses
were grouped into three categories. The first category is the Uninsured, which is
self-explanatory. The second is the Insecure. These are people who currently have
coverage but recently did not. The last category is the Direct Purchasers. These
people may be customers of YHI and they currently have coverage. What the
survey does not include is employee-sponsored coverage, Medicare, or Medicaid.
In addition to what is listed on the slide, the following key elements were
discovered: 1) Idahoans want insurance and they know they need it, they just
don’t think they can afford it. 2) Consumers believe quality of coverage is the
most important factor when choosing health insurance. (2:1 over cost) 3) Going
forward, YHI’s message needs to communicate both quality and affordability and,
most importantly, one single message to resonate with all audiences. 4) Lack of
awareness among the uninsured indicates the need for “always-on” advertising.

Ms. Henbest said that she had a question regarding the statement that YHI had
found that quality was equally as important as affordability. She asked if there
was a sense of how quality was defined. Mr. Kelly asked Ms. McMartin to
respond. Ms. McMartin said that quality had not been defined in the question but
that it can be inferred that it relates to the availability of preferred providers as
well as the services covered. She said that she thinks that access to care and
coverage is generally what is discussed regarding quality. She also added that, in
her personal opinion, she thinks that people include cost in that assessment; that
the value of their coverage is actually the quality. She said that it is important to
note that even though they said quality of the plan was 2:1 more important than
cost, cost remains the biggest barrier.

Ms. Henbest replied that it might be interesting to try to tease that out a little bit in
the future. It might be good feedback for the insurance community to get some
insight about provider network and quality from a customer’s stance.

Mr. Kelly asked, what are the next steps? YHI’s partners at Drake Cooper are
working to finish up the creative. The paid media campaigns will go live on
October 18. In addition to paid media with Drake Cooper in the creative space,
YHI is also building awareness. To broaden their reach even further during open
enrollment, they have engaged a two-year partnership with Learfield Sports,
which is the sports marketing firm that handles marketing with Boise State
University, Idaho State University, and University of Idaho. This is primarily focused on the football season since it is perfect timing for open enrollment and the right demographic. Anyone who was at the home opener last week should have seen YHI’s ads on the ring as well as broadcast reads during the game.

A return to in-person events is being seen, with this month being especially busy with events like Boise Pridefest and the College of Western Idaho Resource Fair. Today and tomorrow the YHI team will be at the Famous Potato Marathon and next week they are sponsoring the Treefort Volunteer welcome party. While Covid does continue to be a factor with many events requiring masks or reduced capacity, YHI continues to offer education classes online through various resources and plans to keep that going through open enrollment.

d. CMS/Policy Update

As it has been discussed in the past couple of meetings, there was an update to the Notice of Benefit and Payment Parameters (NPP) for plan year 2022. The proposed rule was issued in July and YHI is still awaiting final rules on that, which were expected in early September. Key details that are expected:

i. YHI expects that enrollment dates will be recommended for November 1 through January 15, however, state-based exchanges will continue to have flexibility. Based on discussions with Director Cameron and YHI’s carrier and agent partners YHI will stick with November 1 through December 15 this year.

ii. Assessment fees within the proposed rule for healthcare.gov and state-based exchanges that leverage healthcare.gov for enrollment were finalized at 2.75% and 2.25%, respectively, which means that YHI is still substantially lower than the federal exchange.

iii. Two other components around enhanced direct enrollment and 1332 Waiver guidelines: a final rule is expected to tighten or rescind that guidance primarily because enhanced direct enrollment was not really leveraged in the way that it was proposed under those rules.

iv. The special enrollment period for individuals under 150% of the federal poverty level.

Mr. Kelly stated that the final item was very opaque in terms of how the rule is to be implemented. He said that YHI would leverage the policy steering team, which is made up of carrier representatives and people from DOI, to work through how Idaho could operationalize this. Mr. Kelly said that there is more to come, particularly on that special enrollment period.

Mr. Settles questioned if the states would add a fee above the 2.25% to cover their internal costs.
Mr. Kelly replied that the states that leverage healthcare.gov that are state-based exchanges would pay the federal government 2.25%. They have operational costs that they have to cover but they essentially pay 2.25% to the federal government.

Congress is debating a $3.5 trillion spending bill and YHI is watching the progress of that. There is a proposal to extend the enhanced subsidies that were implemented under ARPA, which are currently set to expire at the end of next year. Depending on whether you listen to the House or the Senate there are differing views of how long those will be extended but that will likely be part of the negotiation process as they move forward. It seems that both sides of Congress understand the significant savings and affordability that the enhanced subsidies delivered, it is just a matter of how long they will be extended.

Additionally, YHI is watching the discussion of Medicare benefit expansion, which is primarily focused in the dental and vision space. One of the items that has been discussed over the years is lowering the Medicare eligibility age. Currently, that is not in the front of the discussions around the spending bill but if the eligibility age was lowered to 60, it could mean a loss of about $1 million in revenue for YHI.

The PHE is extended to October 31. However, when it is lifted, YHI believes that there are about 17,000 protected Medicaid enrollees in Idaho that are APTC eligible. When the PHE it is lifted, DHW will run eligibility on those people and YHI will receive an updated tax credit eligibility with the account transfer overnight. YHI would then do direct outreach to those consumers to help them find an agent or broker to work with and complete the enrollment process.

There was a question in Marketplace about how to handle the extra load, given that if it were to occur on October 31 it would be during open enrollment. YHI would leverage our agent and broker network and try to connect as many people as we can and also provide a how-to guide with the direct communications so that people can self-serve on the enrollment process.

YHI will continue to watch the discussion on the PHE and will keep the Board updated.

18. STRATEGIC INITIATIVES

Over the last 18 months, everyone has felt like they are either adapting or reacting to things. For YHI, it was Covid, remote working, buy a building, be on site, go remote, have open enrollment, hybrid, uninsured SEP, ARPA, take a deep breath, and now we are trying to hire for the next open enrollment. Mr. Kelly said that he firmly believes that leaders need to provide clarity for their teams. There need to be long-term goals that people can rally around, so they can understand what their position is and how they can help achieve those goals. Mr. Kelly said that when he and his team talked about it, they discussed three key elements to a strategic plan, and those are improving the customer experience, increasing operational efficiencies, and lowering the uninsured rate in Idaho.
through increased enrollment on the exchange. YHI is setting a goal of 125,000 enrollments on the exchange for plan year 2025.

In discussing how to achieve the goals set with the strategic initiatives, Mr. Kelly said that it is important to note that some of the goals are more well-formed than others, so he wanted to start by discussing a goal that has already been discussed today and that is launching real-time eligibility. This is a game changer for YHI, going live on June 29, and it provides one of the most important foundational elements of their strategic plan. The other piece is always-on advertising. People will no longer hear about YHI only in October, November, and December. They will hear about it in January, when they have a baby in May, and when they get married in September. People will always hear about YHI so it will be top-of-mind and people can come on to the exchange when they have a qualifying life event and enroll.

One of the other strategic initiatives is lengthening open enrollment. Those words were chosen because YHI knows that we need more than six weeks. There needs to be a balance between the needs of the partners across the state, whether it be carriers, agents, or brokers and YHI. YHI will investigate this more, once the final rule for 2022 comes out but Mr. Kelly stated that there is a general idea that we would want to start earlier. He said that he doesn’t know what that looks like but they will work with Director Cameron and Deputy Director Trexler, as well as the carrier partners and agents to find the sweet spot in providing more time.

Another initiative is growing the number of certified connectors. YHI can improve efficiency with real-time eligibility and we can have our 800 consumer connectors be able to work with more people but if we want to grow, there need to be more connectors involved. This is a multi-year initiative. YHI has put out goals of going from 800 to 900 in the first year and 900 to 1,000 in the second year. It’s unknown where we will go from there but Mr. Kelly states that the key elements are to increase efficiency and increase the number of connectors.

The last item on the list is the EZ Enrollment Initiative, which is an idea that YHI has come up with that is challenging and it is unknown if it will even work in Idaho. Mr. Kelly stated that it is complex, but a simple explanation is that YHI would like to have a box added to the state tax form that people could check where they could choose to share their information that would allow YHI to run eligibility, potentially create an enrollment period, and allow Idahoans the opportunity to get health insurance through the exchange. In order to implement this idea, YHI would need to work with state partners such as the tax commission or the legislature. This idea is just in the beginning stages of development and, if it is possible, YHI believes it is years in the future due to the complexity of implementation. It has been successful in Maryland and Pennsylvania is actively working on it, as is Nevada. It is an interesting idea that is 100% opt-in and Mr. Kelly said that they would find something that is fit-for-purpose for the state of Idaho.

In discussing the next steps for the strategic initiatives, Mr. Kelly stated that he thinks that it is important to be careful in planning for these things. Over the coming months and in support of the FY23 budget process, YHI will develop a bottom-up needs analysis.
Some of the items that need to be addressed are staffing, facilities, technology, and partner needs. Once all those things are taken care, YHI will develop a project plan and confirm milestones, deadlines, and deliverables. Mr. Kelly said that YHI would like the Board’s input on these things to make sure that we are on the right track, discussing anything that might be missing or what some potential pitfalls may be.

Chair Fulkerson commented that some of the things that Mr. Kelly has included in the strategic initiatives fit with some of the things that were noted in the board survey, such as more focus on strategy. She said that she is very excited about always-on advertising and said that there are a lot of companies that can be used as examples of companies that advertise year-round. She brought up that Mr. Sorensen had mentioned that it was difficult for people who had just moved into the state to find the exchange in say February, for example, if there is only advertising in October. Chair Fulkerson also noted that the Board had discussed the customer experience, the turnaround time in APTC, offering people opportunities when they have a qualifying life event and that she thinks that these are all ways to help YHI grow and support these strategies.

At this time, Chair Fulkerson asked if there were any questions or observations from the Board.

Ms. Lodge stated that she wanted to echo what Chair Fulkerson had said, that with the strategic initiatives, YHI was attacking the challenges from multiple different aspects and she thinks that is commendable. She said that she is a big supporter of the always-on advertising and that she thinks the real-time eligibility will impact the customer experience. She asked if one of the main goals was to reduce the number of uninsured Idahoans, had the idea of doing something with a national, digital broker network been considered.

Mr. Kelly replied that YHI wants to be very cognizant of one of their key partners, which is the agents and brokers that are in Idaho, working with their neighbors, and stated that that has been a key part of YHI’s success from the beginning. There has been some growth of web brokers or people from out of state that are leveraging YHI’s technology to help consumers that prefer an online experience. Mr. Kelly said that he has been a little hesitant to push that, because they want to protect the agents and brokers that are here in Idaho. He said that he would open it up to Mr. Thomas or Mr. Erstad as to whether they would see that as a compliment. Mr. Kelly said that he thinks about it as an “and” instead of an “or” but that he would welcome feedback from any board member, especially the agent and broker representatives.

Mr. Erstad said that potentially, that may be an opportunity. He said that the pushback is that a lot of the online people do not go through the process of getting certified. He asked Mr. Thomas if he had run into any competition from that aspect.

Mr. Thomas replied that he has not. He believes that it is easier for web-agents or web-enrollers to contract through healthcare.gov because then they can sell in multiple states. He said that he has personally never had a client move away from him to someone who is selling out of state. Mr. Thomas stated that, as a broker, he didn’t have a problem with
promoting that as an opportunity for growth but he didn’t know how much interest there would be.

Mr. Erstad said that it is important that it is kept on a level playing field. He said that if you are bringing in someone who is online, you need to make sure that they have gone through everything that the current brokerage community does to get certified in order to sell their product. Mr. Erstad said that, in a lot of cases, it is more of a relationship business. He referred to the number that Mr. Kelly quoted earlier, that just under 75% of YHI enrollments are connected to an agent or a broker. Mr. Erstad said that he thinks a key part of longevity of people on the exchange is that they are working with a broker and he thinks that the majority of those are not online brokers. He believes that there is the potential for opportunity for growth here but that he wants to be cautious and make sure that that everyone is complying with the same requirements. Mr. Erstad added that he believes that bringing the APTC in-house is going to be an incentive for other producers in the Idaho marketplace to get certified and move back into the individual market.

Mr. Thomas added that he agreed with what Mr. Erstad said. He also said that as an Idaho agent, he has a difficult time keeping track of just Idaho-based plans and all the nuances of the networks. He thinks that agents who are successfully selling nationwide are selling things like Medicare supplements with plans and networks that are the same everywhere. Mr. Thomas said that he feels that it would probably be doing a disservice to Idahoans to have them working with out of state agents because it would be difficult to find someone out of state who was really knowledgeable about plan design. He said that something that a licensed agent or broker can do that an enrollment counselor cannot is to make plan suggestions and he thinks that would be difficult for an out of state agent. Mr. Thomas said that we need to be careful that what is being offered to Idahoans is what is best for them.

Chair Fulkerson said that she feels that all these comments are valuable. She said that there are a lot of good things happening such as the broker mobile apps, real-time eligibility, and Shop While You Wait and said that it would be good to have a chance to see what kind of impact all of that will have.

Ms. Lodge said that the issues with certification and the things that Mr. Thomas brought up were not complications that she was aware of. She said that she felt that it was important to keep an eye on the younger generation specifically and how they like to shop. She said that Mr. Thomas had mentioned the relationship with brokers and she thinks that is true for a lot of Idahoans. However, Ms. Lodge said that she thinks that as the younger generation comes up and gets off their parents’ insurance, there will be a whole different demographic that, frankly, does not want to talk to somebody. She said that there are those who find value and convenience in a relationship with a broker but that that is changing. Ms. Lodge said that ultimately, it might not be conversion so much that this does but that the value might be more of an advertising aspect. She said that she hopes that all aspects are being utilized to fill the education gap that has been identified.
Chair Fulkerson said that there are a lot of options and opportunity to bring people to YHI.

Mr. Settles said that people can’t buy what they don’t know about. He said that he remembers that several years ago, someone was mimicking the YHI website and selling a policy that was incorrect so he said that it is important to make sure that we own the space and can control it. He said that he hopes that people are sophisticated enough to not buy false policies.

Mr. Kelly said that he wanted to clarify a couple of things. First, if you are going to sell in Idaho you have to be licensed by DOI and if you want to be involved with the exchange, you have to be certified by YHI. It doesn’t matter if you have an office or website or work out of your car. If you are going to sell via YHI, you have to be certified. The second item that he said he wanted to add was that YHI keeps track of web brokers that might exaggerate their relationship with YHI and often reach out to them to reset the relationship with YHI. He stated that they can’t catch everything but that they do keep a close eye on it and involve counsel when needed.

Chair Fulkerson circled back to the questions that Mr. Kelly had posed at the end of presenting the strategic initiatives: “Are we on the right track What are we missing? What are some potential pitfalls?” She stated that she thinks most of those have been discussed and asked if Mr. Kelly had anything to add.

Mr. Kelly said that the one that he knows the least about is the EZ Enrollment. He said that he believes they need to have some conversations with a lot of people to figure out if it is even viable in Idaho. He said that he would welcome any feedback regarding that. Mr. Kelly said that he is a believer in investigating options but also not spending time on things that are not viable. He said that if anyone else, either in the room or online, had any thoughts or ideas, he welcomed those as well.

Senator Rice asked Mr. Kelly to go over the EZ Enrollment again.

Mr. Kelly said that he would explain how it works in other states with the understanding that Idaho could do it however they wished or not at all. He said that on the state income tax form there would be a box that could be checked that would say “I would like to have my information shared with the exchange to calculate tax credit eligibility.”

Senator Rice stated that it is unlikely that adding that to the Idaho income tax form would ever be approved. He said that in the past, they have been very interested in keeping the form very simple and straightforward and anything that would add to the Idaho income tax form has been looked upon with disfavor. He said that that is unlikely to be something that would happen in the near future.

Mr. Kelly said that this is exactly why this discussion is being held: to avoid spending time on things that are not possible. He says that he understands that it was a long shot to even put on the table and he appreciates the transparency and clarity on the likelihood of it happening.
Ms. Lodge said that when she looks at the initiatives, she sees opportunity much more than pitfalls. She said that what she gets excited about with the EZ Enrollment is creating a whole new database of people to market to in a different way. She asked if there are opportunities to do that same thing that aren’t on the tax form but perhaps with the provider network, where they could share data of uninsured people who are getting care and have noted that they would like to be reached out to. Ms. Lodge stated that she knows that some of these things are already being done but she is interested in seeing if there is a way to extend the work that is already being done with the partners to gather insight and data that can then be utilized.

Senator Rice stated that he would note that there are probably some other applications for various things, particularly administered by DHW, that might be appropriate and available to do that very thing.

Chair Fulkerson said that this was one of the discussions that they had in the Marketplace Committee meeting in August. She said that there is a relationship with the Idaho Primary Care Association and St. Luke’s to help with some of that information. She questioned how that could be expanded to other areas in the state.

Senator Rice suggested that divorce lawyers and realtors could be good resources for data for information on people who have had a qualifying life event.

Mr. Kelly thanked Senator Rice for the suggestions and said that divorce attorneys are on their list.

Ms. Malek joined via video conference at 11:16 am.

19. NEXT MEETING

Mr. Kelly said that Ms. Sparks would reach out in the coming weeks to get committee meetings set up. They will be held the end of November or early December and the board meeting is already set for December 17, 2021.

20. ADJOURN

There being no further business before the Board, the Chair requested a motion to adjourn the meeting. Mr. Sorensen moved. Senator Rice seconded. The meeting was adjourned at 11:34 am.

Signed and respectfully submitted,

Stephen Weeg, Chairman of the Board