



**JOSH GREEN, M.D.**  
GOVERNOR  
**SYLVIA LUKE**  
LIEUTENANT GOVERNOR

**STATE OF HAWAII'  
HAWAII EMPLOYER-UNION HEALTH BENEFITS TRUST FUND**

201 MERCHANT STREET, SUITE 1700  
HONOLULU, HAWAII 96813  
Oahu (808) 586-7390  
Toll Free 1(800) 295-0089  
[www.eutf.hawaii.gov](http://www.eutf.hawaii.gov)

**BOARD OF TRUSTEES**  
**RYAN YAMANE, CHAIRPERSON**  
**ROBERT YU, VICE-CHAIRPERSON**  
**JAMES WATARU, SECRETARY-TREASURER**  
**JACQUELINE FERGUSON-MIYAMOTO**  
**CHRISTIAN FERN**  
**AUDREY HIDANO**  
**WESLEY MACHIDA**  
**SABRINA NASIR**  
**OSA TUJ**  
**MAUREEN WAKUZAWA**  
**ADMINISTRATOR**  
**DEREK M. MIZUNO**  
**ASSISTANT ADMINISTRATOR**  
**DONNA A. TONAKI**

October 16, 2024

**NOTICE OF MEETING OF THE BOARD OF TRUSTEES  
HAWAII EMPLOYER-UNION HEALTH BENEFITS TRUST FUND**

**DATE:** October 22, 2024, Tuesday  
**TIME:** 9:00 a.m.  
**PLACE:** HAWAII EMPLOYER-UNION HEALTH BENEFITS TRUST FUND (EUTF)  
CITY FINANCIAL TOWER  
201 MERCHANT STREET, SUITE 1700  
HONOLULU, HAWAII

**A G E N D A**

**OPEN SESSION PARTICIPATION IN PERSON, VIA TELECONFERENCE AND  
VIA TELEPHONE**  
(see below for teleconference and telephone details)

- I. Call to Order
- II. Review of Minutes – September 24, 2024
- III. Old Business
  - A. Benefits Administration System Implementation Status Update
- IV. Executive Session
  - A. Appeals [Authorized under HRS 92-5(a)(4)(8)(Article I. Section 6 of the Hawaii State Constitution, HIPAA)]
    - 1. Request to Waive Coverage
    - 2. Request to Waive Audit Requirements
    - 3. Request to Waive Audit Requirements
- III. Old Business (continued)
  - B. Permitted Interaction Group
- V. Committee Reports
  - A. Benefits Committee

**EUTF's Mission:** We care for the health and well being of our beneficiaries by striving to provide quality benefit plans that are affordable, reliable, and meet their changing needs. We provide informed service that is excellent, courteous, and compassionate.

1. Medicare Retiree Prescription Drug Plan
  - a. SSI Semi-Annual Utilization Report for the period ending June 30, 2024
  - b. SSI Update on Medicare Part D Benefit Design and the Inflation Reduction Act
2. Active and Non-Medicare Retiree Prescription Drug Plan
  - a. CVS Semi-Annual Utilization Reports for the period ending June 30, 2024
  - b. Proposed CVS Prescription Drug Plan Changes
  - c. Segal Active Annual Prescription Report as of June 30, 2024
  - d. Pharmacy vs. Medical Coverage of Continuous Glucose Monitors and Disposable Insulin Pumps
  - e. PrudentRx Opportunity Analysis
  - f. CVS CostVantage and TrueCost
3. Proposed HMSA Medical Plan Changes
4. Proposed HDS Dental Plan Changes
5. Proposed VSP Vision Plan Changes
6. Dependent Child Eligibility

## VI. Reports

- A. EUTF Benefits Consultant (Segal)
  1. Compliance News
- B. Administrator
  1. Meetings with Legislators and Unions
  2. Staffing Update
  3. Training
- C. EUTF Managers' and Program Specialists' Reports
  1. Member Services Branch (MSB)
    - a. MSB Data
    - b. Outreach & Training
    - c. 2025 Retiree Open Enrollment
  2. Information Systems (IS)
    - a. EUTF Benefits Administration System (BAS) Project
    - b. Equipment Replacement
    - c. Enrollment Counts
  3. Eligibility and Enrollment Report
    - a. Audits Currently in Progress
    - b. Point in Time Reconciliation Audits
    - c. Recurring Audits
  4. Health and Wellness Report
    - a. Worksite Wellness
    - b. Preventive Health
    - c. Chronic Disease Management
  5. Financial Services Branch (FSB)
    - a. FSB Performance Data
    - b. Refunds and Medicare Part B Overpayments Status
    - c. EUTF Collections
    - d. 2024 Financial Audit

e. Financial Statements as of June 30, 2024

D. Carrier Reports

1. CVS Caremark
2. SilverScript
3. Hawaii Dental Service (HDS)
4. Hawaii Medical Service Association (HMSA)
5. Humana
6. Kaiser Health Foundation
7. Securian
8. Verdegard Hawaii (formerly known as HMA)
9. Vision Service Plan (VSP)

IV. Executive Session (continued)

- B. Updated Retiree Rates Effective January 1, 2025 for Kaiser Health Foundation [Authorized under HRS 92-5a(4)(8)]
- C. Deputy Attorney General Legal Opinions [Authorized under HRS 92-5(a)(4) and 92-5(a)(6)]
- D. Review of Minutes – September 24, 2024 [Authorized under HRS 92-5(a)(8) and 92-9(b)]

VII. Next Meeting

Tuesday, November 26, 2024, 9:00 a.m. – Administrative, Benefits and Investment Committee Reports

VIII. Adjournment

If you need an auxiliary aid/service or other accommodation due to a disability, please contact Ms. Desiree Yamauchi at (808) 587-5434 or [outfadmin@hawaii.gov](mailto:outfadmin@hawaii.gov), as soon as possible, preferably at least 3 business days prior to the meeting. Requests made as early as possible have a greater likelihood of being fulfilled.

Testimony may be submitted prior to the meeting via email to [outfadmin@hawaii.gov](mailto:outfadmin@hawaii.gov) or via postal mail to: Hawaii Employer-Union Health Benefits Trust Fund, Attn: Board Meeting-Testimony, 201 Merchant Street, Suite 1700, Honolulu, HI 96813. Please include the word “testimony”, the agenda item number, and subject matter following the address line. There is no deadline for submission of testimony, however, the EUTF requests that all written testimony be received no later than 9:00 a.m., one (1) business day prior to the meeting date in order to afford Board members adequate time to review materials.

To view the meeting and provide live oral testimony during the meeting, following are the Microsoft Teams Meeting details:

-

58a40aaa1a10%22%2c%22Oid%22%3a%221ec28820-992a-428a-a6a0-44c156209163%22%7d

- For instructions to turn on live captions in Microsoft Teams, [please click here.](#)
- Dial-in number: [+1 808-829-4853](#) United States, Honolulu (Toll)
- Phone Conference ID: 854 338 539#

A listing of all documents included in the Board packet will be available at the EUTF website ([eutf.hawaii.gov](http://eutf.hawaii.gov)) through the Events Calendar two (2) business days prior to the meeting.

The Board packet can be accessed at the EUTF website ([eutf.hawaii.gov](http://eutf.hawaii.gov)) through the Events Calendar two (2) business days prior to the meeting. A copy of the packet will also be available for public inspection in the EUTF office at that time.

Please contact Ms. Desiree Yamauchi at (808) 587-5434 or [eutfadmin@hawaii.gov](mailto:eutfadmin@hawaii.gov) if you have any questions.

Upon request, an electronic copy of this notice can be provided.

1 HAWAII EMPLOYER-UNION HEALTH BENEFITS TRUST FUND

2 Minutes of the Board of Trustees

3 Tuesday, September 24, 2024

4  
5 TRUSTEES PRESENT

6 Mr. Ryan Yamane, Chairperson Ms. Audrey Hidano (excused at 9:44 a.m.)  
7 Mr. Robert Yu, Vice Chairperson Mr. Wesley Machida (via video conference)  
8 Mr. James Wataru, Secretary-Treasurer Ms. Sabrina Nasir (via video conference, excused at 9:44 a.m., returned at 11:23 a.m.)  
9 Ms. Jacqueline Ferguson-Miyamoto Mr. Osa Tui (excused at 11:48 a.m.)  
10 Mr. Christian Fern Ms. Maureen Wakuzawa

11  
12 TRUSTEES ABSENT

13 None

14  
15 ATTORNEY

16 Mr. Michael Chambrella, Deputy Attorney General

17  
18 EUTF STAFF

19 Mr. Derek Mizuno, Administrator Mr. Marvin Judd (via video conference)  
20 Ms. Amy Cheung, Financial Management Officer (via video conference) Ms. Emily Kaimuloa (via video conference)  
21 Ms. Lauren Endo, Compliance Officer (via video conference) Mr. Joao Marco Maffini (via video conference)  
22 Ms. Jessica McDonald, Member Services Branch Manager Ms. Katie Matsushima  
23 Mr. Brett Tatsuno, Investment Officer Ms. Lara Nitta  
24 Ms. Desiree Yamauchi

25  
26 CONSULTANTS (via video conference)

27 Mr. Colin Bebee, Meketa Investment Group Ms. Mary Fedor, Segal Consulting  
28 Ms. Shelley Chun, Segal Consulting Mr. Stephen Murphy, Segal Consulting

29  
30 OTHERS PRESENT (via video or audio conference, unless otherwise noted)

31 Ms. Joy Abreu Ms. Meagan Kini-Ho, HMSA  
32 Mr. Blaise Aquino, HMSA Ms. Mae Kishimoto, HSTA-Retired  
33 Ms. Tiffany Andrade, HMSA Ms. Joey Lee, HDS  
34 Ms. Stacia Baek, HDS Mr. Chris Letoto, HMSA (in person)  
35 Ms. Amy Bell, TELUS Health Ms. Denise Mercil, Securian  
36 Mr. Austin Bunag, HMSA Dr. Christopher Miura, Kaiser  
37 Mr. Su Chai, Kaiser Ms. Heather Miyasato, HMSA  
38 Mr. Francis Cuenca, CVS Mr. Ezra Ng, HMSA  
39 Ms. Lori Ann Davis, HMSA (in person) Mr. Mark Nishimura, HMSA (in person)  
40 Mr. Joe Ebisa, WithIntelligence Mr. Chandler Pearson, Kaiser  
41 Mr. Thomas England, Kaiser Mr. Dave Shiroma, Kaiser  
42 Ms. Samantha Furutani, CVS Ms. Jenny Smith, Humana  
43 Ms. Kehau Giles, HMSA Mr. Garret Sugai, HMSA (in person)  
44 Mr. Dale Goya, HMSA (in person) Mr. Troy Tomita, Kaiser  
45 Mr. Galen Haneda, HMSA (in person) Ms. Anne VanHaaren, CVS  
46 Mr. Trevor Hu, HMSA Mr. Scott Yamaguchi, Kaiser  
47 Mr. Jon Kawamura, Legislature Anonymous (x3)  
48 Ms. Monica Kim, VSP

49  
50 I. CALL TO ORDER

51 The meeting of the Board of Trustees of the Hawaii Employer-Union Health Benefits Trust

1 Fund (EUTF) was called to order at 9:01 a.m. by Chairperson Ryan Yamane, in the EUTF  
2 Board Room, 201 Merchant Street, Suite 1700, Honolulu, Hawaii, on Tuesday, September 24,  
3 2024.

4  
5 II. REVIEW OF MINUTES – JULY 30, 2024

6 The Board reviewed the draft minutes of July 30, 2024.

7  
8 MOTION was made and seconded to approve the July 30, 2024 minutes, as circulated.  
9 (Ferguson-Miyamoto/Wataru) The motion passed unanimously. (Employer Trustees-5/  
10 Employee-Beneficiary Trustees-5)

11  
12 III. OLD BUSINESS

13 A. Benefits Administration System Implementation Status Update

14 Ms. Amy Bell, TELUS Health, provided an update on the implementation of the new  
15 Benefits Administration System (BAS) noting the following:

- 16 • Sprints 4/5 (core upgrade and County of Kauai special open enrollment) and 6 (death  
17 file import) went into Production on August 16 and September 6, 2024, respectively.
- 18 • Sprint 7 (core upgrade) is scheduled to go into Production on October 11, 2024.
- 19 • There's no change on the two remaining payroll and other accounting report issues  
20 scheduled to be completed by December 31, 2024.
- 21 • Death imports are working electronically for approximately 70% of the cases with  
22 certain situations (30%) needing further update. Expected completion date is  
23 December 31, 2024.
- 24 • Milestone jobs for recertification of student dependents of surviving spouses and  
25 Medicare new enrollments were put into Production on September 6 and August 19,  
26 2024, respectively. If there are no significant issues, this item will be removed.
- 27 • Ninety percent of the student expiry (e.g., if the student certification is not submitted,  
28 the BAS is supposed to terminate the dependents applicable coverages) job is working.  
29 Two remaining scenarios need to be updated. The Medicare expiry is scheduled to go  
30 into Production by October 31, 2024.

31  
32 IV. EXECUTIVE SESSION

33 MOTION was made and seconded to move into Executive Session at 9:08 a.m.

34 (Yu/Ferguson-Miyamoto) The motion passed unanimously. (Employer Trustees-5/Employee-  
35 Beneficiary Trustees-5)

36  
37 The regular meeting reconvened at 9:44 a.m.

38  
39 Chairperson Yamane reported that during Executive Session, the Board approved an appeal to  
40 enroll outside of open enrollment.

41  
42 Trustees Audrey Hidano and Sabrina Nasir were excused from the meeting at 9:44 a.m.

43  
44 V. COMMITTEE REPORTS

45 A. Investment Committee

- 46 1. Quarterly Performance Report – Q2 2024

1 Mr. Colin Bebee, Meketa Investment Group, highlighted significant points in the Q2  
2 Performance Report. The OPEB Trust finished the quarter at \$7.8 billion, gaining 1.0%  
3 and 8.2% for the quarter and 1-year, respectively (net of fees), underperforming the  
4 policy benchmark of 1.7% and 9.6%, respectively. Underperformance during both  
5 periods was primarily attributed to short-term benchmarking challenges within the  
6 Private Equity and Private Credit asset classes. Since inception (June 23, 2011), the  
7 portfolio has returned 7.3% (net of fees) versus the policy benchmark return of 7.3%.

8  
9 Mr. Bebee reported that the EUTF Trust Fund finished the quarter at \$577.1 million, up  
10 0.6% and 8.6% for the quarter and 1-year, respectively (net of fees). Since inception  
11 (October 1, 2013), the portfolio has returned 3.8% (net of fees).

12  
13 2. Quarterly Private Credit Report and Annual Portfolio Review – Q1 2024

14 Mr. Brett Tatsuno noted that at the end of the quarter, Private Credit reported a market  
15 value of \$576.1 million (7.6% of the OPEB Trust), with a since inception return of  
16 10.1% (net of fees), outperforming the asset class benchmark of 9.6%.

17  
18 3. Quarterly Private Equity Report – Q1 2024

19 4. Quarterly Private Real Assets Report – Q1 2024

20 5. OPEB Evolving Policy Plan

21 Mr. Bebee presented a memorandum recommending an updated Evolving Policy Plan  
22 for the OPEB Trust. The plan consists of five transition stages over a three-year period  
23 to ensure a smooth and gradual path towards the new long-term strategic allocation  
24 approved at the May 2024 Board meeting. While the actual pacing will depend on how  
25 fast private market managers call capital, the overall transition is expected to be  
26 completed by January 1, 2027.

27  
28 MOTION was made and seconded to approve the Investment Committee's  
29 recommended OPEB Evolving Policy Plan. (Ferguson-Miyamoto/Wataru) The motion  
30 passed unanimously. (Employer Trustees-3/Employee-Beneficiary Trustees-5)

31  
32 6. EUTF Trust Fund Strategic Allocation Study

33 Mr. Bebee presented the 2024 Strategic Allocation Study for the EUTF Trust Fund  
34 (Trust Fund). The short-term portion will remain in the existing short-term corporate  
35 bond strategy. Risk/return assumptions for each asset class were developed and used in  
36 a modeling process to create two portfolio options, A and B. Option A maintains a  
37 similar expected return while reducing risk (standard deviation and expected maximum  
38 drawdown). Option B maintains similar risk characteristics and increases the expected  
39 compound return. Both options included the addition of liquid credit (predominately  
40 below investment grade fixed income instruments) and US Treasury Inflation-Protected  
41 Securities (US TIPS) to further diversify the program.

42  
43 MOTION was made and seconded to approve the Investment Committee's  
44 recommendation of Option B as the new policy portfolio and the related evolving  
45 policy plan for the long-term component of the EUTF Trust Fund. (Wataru/Machida)  
46 The motion passed unanimously. (Employer Trustees-3/Employee-Beneficiary

1 Trustees-5)  
2

3 B. Administrative Committee

4 1. 2025 Legislative Proposals

5 Mr. Derek Mizuno noted that the Board proposed a similar bill during the 2024  
6 legislative session to amend HRS 87A-33(c) to have the 2025 to 2026 change in  
7 Medicare Part B premiums change the 2027 base monthly contribution (BMC).  
8 Currently, the 2025 to 2026 change in Medicare Part B premiums will change the 2026  
9 BMC. As a result, retirees may not know the employers' contribution when making  
10 changes to their plans during open enrollment (OE) since retiree OE is held the last two  
11 weeks of October and the upcoming year's Medicare Part B premiums are available  
12 mid-October to early November.

13  
14 For the stub BMC year (2026), EUTF staff propose use of a 10-year annualized  
15 increase in Medicare Part B premiums (5.2% through 2024).

16  
17 MOTION was made and seconded to approve the Administrative Committee's  
18 recommended 2025 legislative proposal to amend HRS 87A-33(c) to have the base  
19 monthly contribution determined by the change in Medicare Part B from the previous  
20 year and to use a 10-year average for the 2026 base monthly contribution. (Wataru/Yu)  
21 The motion passed unanimously. (Employer Trustees-3/Employee-Beneficiary  
22 Trustees-5)  
23

24 2. Biennium Budget Request – July 1, 2025 – June 30, 2027

25 Mr. Mizuno presented the Administrative Committee's recommendation to approve the  
26 fiscal year 2025 and 2026 biennium budget that includes increases for a permanent  
27 investment officer position and an increase in fringe benefits due to the increase in the  
28 fringe rate from 52.6% to 64.25% for all executive branch employers.

29  
30 MOTION was made and seconded to approve the Administrative Committee's  
31 recommended EUTF budget for fiscal years 2026 and 2027. (Machida/Wataru) The  
32 motion passed unanimously. (Employer Trustees-3/Employee-Beneficiary Trustees-5)  
33

34 C. Benefits Committee

- 35 1. Kaiser Permanente Senior Advantage Plan Change
- 36 2. Kaiser Permanente Disease Management/Integrated Health Management (DM/IHM)  
37 Improvement Plan
- 38 3. HMSA DM/IHM Improvement Plan
- 39 4. HMSA Disease Management Programs
- 40 a. AccordantCare Rare Program
- 41 b. Virta Digital Diabetes Program
- 42 5. Segal Clinical Programs Analysis
- 43 6. HMSA Payment Transformation
- 44 7. HMSA e-Consult Program

45 Mr. Mizuno summarized the Benefits Committee report.  
46



1 III. OLD BUSINESS (continued)

2 B. Updated Prescription Drug Plan Retiree Rates Effective January 1, 2025 – Caremark and  
3 SilverScript

4 Mr. Steve Murphy, Segal Consulting, presented an update to the previously approved  
5 retiree prescription drug premiums for the CVS and SilverScript non-Medicare and  
6 Medicare retiree plans effective January 1, 2025. Updates were made due to changes to the  
7 Medicare Part D subsidies and the inclusion of the Medicare Prescription Payment Plan as  
8 a result of the Inflation Reduction Act resulting in a significantly lower Medicare retiree  
9 premium and a slightly lower non-Medicare retiree premium.

10  
11 MOTION was made and seconded to approve the revised prescription drug plan retiree  
12 premiums effective January 1, 2025 as recommended by Segal.

13 (Wataru/Ferguson-Miyamoto) The motion passed unanimously. (Employer Trustees-3/  
14 Employee-Beneficiary Trustees-5)

15  
16 C. Revised EUTF Administrative Rules

17 Ms. Katie Matsushima reported that there was only one question from HGEA that was  
18 addressed to their satisfaction regarding the revised EUTF Administrative Rules that were  
19 provided to the unions and employers.

20  
21 MOTION was made and seconded to approve the revised EUTF Administrative Rule  
22 Changes for submission to the Governor. (Wataru/Ferguson-Miyamoto) The motion  
23 passed unanimously. (Employer Trustees-3/Employee-Beneficiary Trustees-5)

24  
25 D. Permitted Interaction Group

26 Mr. Mizuno reported on the results of the permitted interaction group (PIG).

27  
28 Chairperson Yamane advised that pursuant to the Sunshine Law, the PIG can only report  
29 its' findings at this meeting. No discussions or recommendations can be made at this  
30 meeting. This item will be placed on the October 22, 2024 Board agenda.

31  
32 Trustee Christian Fern expressed his appreciation for Trustee Wesley Machida's  
33 contribution to the PIG.

34  
35 Chairperson Yamane thanked the PIG members for their contributions and thanked  
36 Trustees Fern and Machida for serving as the Chair and Vice Chair, respectively.

37  
38 VI. NEW BUSINESS

39 A. HMSA Network – Kapiolani Medical Center

40 Mr. Mizuno informed the Board that HMSA has provided the requested information on  
41 services utilized by EUTF members at Kapiolani Medical Center. HMSA also expressed in  
42 their memorandum their concerns regarding excluding Kapiolani Medical Center and in  
43 turn Hawaii Pacific Health from the network and the impact it will have on the EUTF  
44 members because of the specialized services offered by Kapiolani Medical Center.

1 Trustee Christian Fern raised concern about how the Kapiolani Medical Center nurses were  
2 being locked out and the detrimental impact it could have on the services provided.

3  
4 B. HMSA HMO Analysis

5 Ms. Lori Ann Davis, Mr. Dale Goya, Mr. Chris Letoto, and Mr. Garret Sugai, HMSA,  
6 presented information on their HMO network.

7  
8 HMSA requested to go into Executive Session to discuss proprietary information regarding  
9 the HMO product.

10  
11 MOTION was made and seconded to move into Executive Session at 10:44 a.m. for  
12 HMSA to discuss proprietary information regarding the HMO product (Fern/Wataru) The  
13 motion passed unanimously. (Employer Trustees-3/Employee-Beneficiary Trustees-5)

14  
15 The regular meeting reconvened at 11:15 a.m.

16  
17 Mr. Mizuno presented a memorandum from EUTF staff noting concerns about the HMSA  
18 HMO medical/CVS prescription drug plan low, declining enrollment, the 100% inpatient  
19 benefit and high premiums. Mr. Steven Murphy, Segal, noted the same concerns and the  
20 long time-frame that HMSA is likely to take to improve the HMO product. Mr. Mizuno  
21 presented options outlined in the memorandum for a July 1, 2025 implementation.

22  
23 Trustee Nasir returned to the meeting at 11:23 a.m.

24  
25 MOTION was made and seconded to close the EUTF HMSA HMO/CVS prescription drug  
26 plan to new active employees (new subscribers) for coverage effective July 1, 2025.  
27 (Fern/Machida) Trustee Osa Tui clarified that employees enrolled in the plan on July 1,  
28 2025 could add dependents (e.g., a newborn) but new hires and current employees during  
29 open enrollment could not enroll in the plan from July 1, 2025. Trustee Fern commented  
30 that there is not much difference between the Payment Transformation coordination of care  
31 model and the HMO model. The motion passed unanimously. (Employer Trustees-4/  
32 Employee-Beneficiary Trustees-5)

33  
34 The meeting recessed at 11:28 a.m. and reconvened at 11:33 a.m.

35  
36 VII. REPORTS

37 A. EUTF Benefits Consultant (Segal)

- 38 1. Amended Five-Year Rate Projection with Approved Updated Prescription Drug Plan
- 39 Retiree Rates Effective January 1, 2025
- 40 2. Quarterly Plan Performance Report – June 30, 2024
- 41 3. Quarterly Performance Guarantee Report – June 30, 2024
- 42 4. June 30, 2024 IBNR Calculation – Prescription Drug Plan and Supplemental Medical
- 43 and Prescription Drug Plan
- 44 5. 2024 Q3 Trends Report

45 Mr. Murphy summarized the Segal reports.

46

1 B. Administrator

2 1. Meetings with Legislators and Unions

3 2. Staffing Update

4 3. Training

5 Mr. Mizuno informed the Board that the Investment Analyst position was posted to the  
6 State Department of Human Resources Development website.

7  
8 C. EUTF Managers' and Program Specialists' Reports

9 1. Member Services Branch (MSB)

10 a. MSB Data

11 b. Outreach & Training

12 c. County of Kauai Special Open Enrollment

13 d. 2025 Retiree Open Enrollment

14 2. Information Systems (IS)

15 a. EUTF Benefits Administration System (BAS) Project

16 b. Security Assessment

17 c. Equipment Replacement

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28 a. FSB Performance Data

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32 e. Financial Statements as of June 30, 2024

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34 1. CVS Caremark

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36 3. Hawaii Dental Service (HDS)

37 4. Hawaii Medical Service Association (HMSA)

38 5. Humana

39 6. Kaiser Health Foundation

40 7. Securian

41 8. Verdegard Hawaii (formerly known as HMA)

42 9. Vision Service Plan (VSP)

43  
44 Ms. Mae Kishimoto, HSTA-Retired, voiced her agreement with the concerns raised by Trustee  
45 Fern.

46

1 IV. EXECUTIVE SESSION (continued)

2 The Board meeting recessed and moved into Executive Session at 11:44 a.m.

3

4 Trustee Tui was excused from the meeting at 11:48 a.m., during Executive Session

5

6 The regular meeting reconvened at 12:15 p.m.

7

8 Chairperson Yamane reported that during Executive Session, the Board:

- 9 • Approved a commitment of funds to a private real assets fund, subject to contract
- 10 negotiations.
- 11 • Approved a commitment of funds to a private equity fund, subject to contract
- 12 negotiations.
- 13 • Approved RFP 25-001 Actuarial Services for Other Post-Employment Benefits.
- 14 • Reviewed and discussed the July 30, 2024 minutes. Since there were no edits or
- 15 objections by the Trustees, the minutes stand approved.
- 16

17 VIII. NEXT MEETING

18 Tuesday, October 22, 2024, 9:00 a.m. – Benefits Committee Report

19

20 IX. ADJOURNMENT

21 MOTION was made and seconded for the Board to adjourn the meeting at 12:17 p.m.

22 (Wataru/Fern) The motion passed unanimously. (Employer Trustees-4/Employee-Beneficiary

23 Trustees-4)

24

25 Documents Distributed:

- 27 1. Draft Board Minutes of July 30, 2024. (6 pages)
- 28 2. Hawaii EUTF – Ariel BAS Update, prepared by TELUS Health, dated September 24, 2024. (5
- 29 pages)
- 30 3. Memorandum to EUTF BOT from Investment Committee, regarding August 20, 2024
- 31 Investment Committee Meeting Report, dated September 18, 2024. (2 pages)
- 32 4. Memorandum to EUTF BOT from Administrative Committee, regarding Administrative
- 33 Committee Report – August 22, 2024 Meeting, dated August 22, 2024. (1 page)
- 34 5. Memorandum to EUTF BOT from Benefits Committee, regarding August 19, 2024 Benefits
- 35 Committee Meeting Report, dated August 19, 2024. (2 pages)
- 36 6. Memorandum to BOT from Segal Consulting, regarding Updated 2025 Retiree Prescription Drug
- 37 Rates, dated September 24, 2024. (5 pages)
- 38 7. Memorandum to EUTF BOT from Eligibility Specialist, regarding Proposed EUTF
- 39 Administrative Rule Changes, dated September 13, 2024. (5 pages)
- 40 8. Memorandum to EUTF BOT from EUTF Permitted Interaction Group, regarding Permitted
- 41 Interaction Group Recommendations, dated July 30, 2024. (5 pages)
- 42 9. Memorandum to BOT EUTF from HMSA, regarding EUTF request to HMSA re: Kapiolani
- 43 Medical Center for Women & Children, dated September 19, 2024. (2 pages)
- 44 10. EUTF’s HMO Plan Offering, prepared by HMSA, dated September 2024, Redacted Version.
- 45 (25 pages)

HAWAII EMPLOYER-UNION HEALTH BENEFITS TRUST FUND

Board of Trustees Meeting

September 24, 2024 Minutes

Page 9

- 1 11. Memorandum to BOT from Program Specialist, regarding HMSA HMO Options, dated  
2 September 24, 2024. (2 pages)
- 3 12. Memorandum to BOT EUTF from Segal Consulting, regarding Open Panel HMO Analysis  
4 (Informational Only), dated May 21, 2024, Redacted Version. (8 pages)
- 5 13. EUTF, Year to Date Contract Plan Experience Report, Contract Year to Date through June 2024,  
6 prepared by Segal Consulting, dated September 24, 2024. (41 pages)
- 7 14. Memorandum to BOT EUTF from Segal Consulting, regarding Performance Guarantee  
8 Reporting for the Second Quarter of 2024, dated September 13, 2024. (16 pages)
- 9 15. Memorandum to BOT EUTF from HMSA, regarding HMSA Customer Service Update, dated  
10 September 11, 2024. (2 pages)
- 11 16. Memorandum to BOT EUTF from Segal Consulting, regarding June 30, 2024, Prescription Drug  
12 IBNR Calculations, dated August 27, 2024. (2 pages)
- 13 17. Memorandum to BOT EUTF from Segal Consulting, regarding June 30, 2024, Supplemental  
14 Medical IBNR Calculations, dated August 27, 2024. (2 pages)
- 15 18. Memorandum to BOT EUTF from Segal Consulting, regarding Segal's 2024 Third Quarter  
16 Trends Report, dated September 24, 2024. (3 pages)
- 17 19. Administrator's Monthly Report to the Board for July 20 – September 13, 2024, dated  
18 September 13, 2024. (1 page)
- 19 20. Memorandum to BOT from Member Services Branch Manager, regarding July – September  
20 2024 Member Services Operations Report, dated September 13, 2024. (8 pages)
- 21 21. Memorandum to BOT from Information Systems Chief, regarding July 2024 – September 2024  
22 Information Systems (IS) Operations Report, dated September 13, 2024. (17 pages)
- 23 22. Memorandum to Administrator from Eligibility Specialist regarding July – September 2024  
24 Eligibility and Enrollment Report, dated September 13, 2024. (2 pages)
- 25 23. Memorandum to EUTF BOT from Program Specialist regarding July – September 2024 Health  
26 and Wellness Specialist Report, dated September 13, 2024. (9 pages)
- 27 24. Memorandum to BOT from EUTF Financial Management Officer regarding July 2024 –  
28 September 2024 Financial Services Branch (FSB) Report, dated September 13, 2024. (6 pages)
- 29 25. CVS/Caremark Monthly Carrier Report for August 2024 dated September 3, 2024. (2 pages)
- 30 26. CVS/Caremark Monthly Carrier Report for July 2024 dated August 4, 2024. (2 pages)
- 31 27. SilverScript Monthly Carrier Report for August 2024 dated September 1, 2024. (2 pages)
- 32 28. SilverScript Monthly Carrier Report for July 2024 dated August 1, 2024. (2 pages)
- 33 29. HDS Monthly Carrier Report for August 2024 dated September 9, 2024. (2 pages)
- 34 30. HDS Monthly Carrier Report for July 2024 dated August 9, 2024. (2 pages)
- 35 31. HMSA Monthly Carrier Report for August 2024 dated September 9, 2024. (3 pages)
- 36 32. HMSA Monthly Carrier Report for July 2024 dated August 9, 2024. (3 pages)
- 37 33. Humana Monthly Carrier Report for August 2024 dated September 9, 2024. (3 pages)
- 38 34. Humana Monthly Carrier Report for July 2024 dated August 8, 2024. (3 pages)
- 39 35. Kaiser Permanente Monthly Carrier Report for August 2024 dated September 9, 2024. (2 pages)
- 40 36. Kaiser Permanente Monthly Carrier Report for July 2024 dated August 9, 2024. (2 pages)
- 41 37. Securian Financial Monthly Carrier Report for August 2024 dated September 9, 2024. (1 page)
- 42 38. Securian Financial Monthly Carrier Report for July 2024 dated August 8, 2024. (1 page)
- 43 39. Verdegard Monthly Carrier Report for August 2024 dated September 9, 2024. (2 pages)
- 44 40. Verdegard Monthly Carrier Report for July 2024 dated August 8, 2024. (2 pages)
- 45 41. VSP Monthly Carrier Report for August 2024 dated September 8, 2024. (6 pages)
- 46 42. VSP Monthly Carrier Report for July 2024 dated August 8, 2024. (6 pages)



# Hawaii EUTF – Ariel BAS Update

October 22, 2024



# 2024 Sprints

Sprint 1 – Completed 1/25/2024

Sprint 2 – Completed 3/22/2024

Sprint 3 – Completed 7/2/2024

Sprint 4: Core System Upgrade – Completed 8/16/2024

Sprint 5: County of Kauai – Completed 8/16/2024

Sprint 6: Death File Import – Completed 9/6/2024

Sprint 7: Core System Upgrades and Milestone and Expiry Jobs –  
Completed 10/11/2024

Sprint 8: Retiree OE

- Scope: Retiree OE, DOH Import Events and Retro Processing Enhancements
- Target production date: 11/18/2024



# Issue Summary

Item	Population Impacted	Cases Resolved	Status	Planned Resolution Date	Impact
Payroll and Other Accounting Reports	Employee and employer contributions; and carrier billing	N/A	EUTF prioritized 12 payroll and Accounting report issues to be fixed by TH. - 10 have been resolved. - 2 report issues are still unresolved and the planned resolution date changed to 12/31/24 due to potential data cleanup.	<del>12/31</del> <del>4/30/24</del> <del>6/30/24</del> 12/31/24	Unable to reconcile accounts with over or under balances



# Issue Summary

Item	Population Impacted	Cases Resolved	Status	Planned Resolution Date	Impact
Death Imports: Triggered Event	30/month	All being manually identified	The Death Import job updates were put into PROD on 9/6/24. There are some scenarios that do not work as expected and TH is working on these issues.	12/31/24	EUTF staff will manually manipulate DOH file to exclude scenarios that are defective and will process these manually. The majority of deaths will be processed via the death file import.
Expiry Jobs - Student expiry - Medicare expiry	Student: 40/month  Medicare: 30/month	All being manually completed	Automating Expiry Jobs: - Student Expiry – Released in PROD 9/6. 2 scenarios need additional review and updates. - Medicare Expiry – Targeted for 10/31/24.	10/31/24	EUTF manually processing and closing the open life events for students and Medicare

# Issue Summary

Item	Population Impacted	Cases Resolved	Status	Planned Resolution Date	Impact
Milestone Jobs - Student dependents of surviving spouses recertification	<10 per month	All being manually identified	<ul style="list-style-type: none"> <li>- Released in PROD 9/6 (verified in October that milestone job is identifying student dependents)</li> <li>- Completed.</li> </ul>	10/31/24	EUTF manually identifying and mailing letter.



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SYLVIA LUKE  
LIEUTENANT GOVERNOR

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**ASSISTANT ADMINISTRATOR**  
DONNA A. TONAKI

July 30, 2024

TO: EUTF Board of Trustees  
FROM: EUTF Permitted Interaction Group  
SUBJECT: Permitted Interaction Group Recommendations

**Background**

At the November 21 and December 19, 2023 EUTF Board meetings, the Board established a permitted interaction group (PIG) with the following responsibilities and members:

1. A comprehensive review and comparison of Hawaii's public employees and retirees share of health contributions to the West Coast and the US continental states;
2. An analysis of the differences in the HMO and PPO plans;
3. An analysis of the reasons why Hawaii is lagging behind in employer contributions compared to other counterparts;
4. A review of the current process for determining employer health contributions;
5. Analysis of ways to use EUTF unrestricted, unreserved net assets, and
6. Recommendations on possible solutions and outcomes to address these issues

- A. Trustee Christian Fern
- B. Trustee Wesley Machida
- C. Trustee Sabrina Nasir
- D. Trustee Osa Tui
- E. Trustee Ryan Yamane
- F. Trustee Robert Yu
- G. Mr. Ryker Wada, former Director State Department of Human Resources Development
- H. Mr. Ron Shiigi, DAGS internal audit
- I. Randy Perreira, HGEA Executive Director
- J. Bobby Lee, HFFA President

The PIG was supported by EUTF staff, the deputy attorney general, GRS and Segal.

The PIG met on January 8, February 13, May 28 and July 30, 2024.

**Findings**

The PIG identified the following key issues:

1. State employees contribute more to their medical and prescription drug benefits than the market average of 14 other states primarily in the West – 29% vs. 11% for singles – based on a weighted average of the plans selected by the employees. This difference is reduced when comparing the

**EUTF's Mission:** We care for the health and well being of our beneficiaries by striving to provide quality benefit plans that are affordable, reliable, and meet their changing needs. We provide informed service that is excellent, courteous, and compassionate.

- prevalent plans (i.e., HMSA 75/25 PPO and Kaiser Standard) and adjusting for actuarial values – State 10% vs. 7% for market average of CA, CO, NV, OR and WA for singles.
2. State employee retiree benefits lag the market average of the same 14 other states – 10.6% vs. 14.4% – primarily due to lower normal costs for defined benefit pension and retiree health and a lower employer contribution for defined contribution pension benefits.
  3. An estimate of the State’s percentage of employee benefits to total payroll for general employees was higher (43.7%) than the mean and median from a 2021 Hawaii Employer’s Council (HEC) survey (36% and 38%) of private employers in the State. This is possibly due to the vacation, sick leave, holiday benefits and lower pay for State employees and the Hawaii Prepaid Health Care Act.
  4. Approximately two-thirds of the employers in the HEC survey cover 100% of employee (self) medical and prescription drug, respectively, premiums. Less than half of the employers (43%) cover 50% or more of the dependent medical premiums.
  5. 60% and 46% of employers in the HEC survey cover 100% of employee dental and vision premiums, respectively.
  6. State residents have significantly less disposable income (\$5,929) than the other 49 states’ average (\$18,108) based on Forbes Advisor, May 1, 2024.
  7. The State’s future contributions and unfunded liabilities related to OPEB and pension as percentage of state revenues significantly outpace other states. The EUTF’s actuary, GRS, noted that, “the EUTF program for future hires has already been lowered significantly compared to current members eligible to retire. And the current large contributions towards paying the UAAL make the EUTF program feel more expensive to the employers than it really is.”
  8. GRS also noted that, “the corridor funding process is very good and the employers will begin to experience relief as the dollar amounts only grow 1% per year, while their payroll, budget, etc will likely grow by more than that.”
  9. Recently passed HB2404 at the 2024 State Legislature will significantly reduce future revenue for the State.

Overall, health benefits for active employees and retiree benefits of State employees lag those of state employees in the western region of the United States. Additionally, health benefits for State self only plans lag those of other Hawaii employees likely due to the Hawaii Prepaid Health Care Act. Lastly, the State does not have significant financial resources to improve these benefits in the future.

While the State’s position is not ideal, the State and EUTF have a number of strengths and opportunities:

- A. The large enrollment of EUTF members with our carriers provides an opportunity to influence the addition and development of programs to improve the health of our members.
- B. EUTF plans in general have rich benefits that could be modified to encourage behaviors that reduce cost while maintaining member health.
- C. Significant current resources in the OPEB Trust (\$7.8 billion as of May 31, 2024) and unrestricted, unreserved net assets (\$75 million actives and \$323 million retirees as of May 31, 2024).

## **Considerations**

### OPEB Trust Fund

1. Continue to add investment professionals to ensure that investment returns meet long-term objectives and exceed public plan medians within prudent levels of risk. This will be included in the 2025-2029 strategic plan proposal.
2. Asset allocation private market targets are met in a timely manner within prudent levels of risk to remove constraints on asset allocations due to inability to reach targeted levels. This will be included in the 2025-2029 strategic plan proposal.

### EUTF Trust Fund

1. Extend the waiver of the addition of EUTF administrative fees to health premiums to pay for operations from December 31, 2028 retirees and June 30, 2029 actives to December 31, 2033 retirees (\$30 million) and June 30, 2034 actives (\$45 million).
2. Possibly use a portion of the retiree unrestricted, unreserved net assets to reduce the HMSA/CVS-SSI premiums. For example, reducing the HMSA/CVS-SSI retiree premiums by 5% would require use of reserves of approximately \$20 million per year.

### Medical, Prescription Drug and Dental Benefits

1. HMSA Medical Plan
  - Virtual Diabetes Prevention Program (DPP). HMSA has been asked to consider adding a virtual DPP.
  - Virta Digital Diabetes Management Program. Started January 1, 2024. As of May 21, 2024, 125 members enrolled with 48 members enrolled for at least 90 days, with early positive results. HMSA will provide an update at the August 19, 2024 Benefits Committee meeting.
  - Weight management program. The EUTF HMSA plans do not provide coverage for weight management programs. HMSA is considering coverage of a weight management program which would be an option for members with or without diabetes.
  - Cardiac rehabilitation. The HMSA plans currently provide coverage of the Ornish program, an intensive cardiac rehabilitation program, and will be proposing coverage of a more traditional cardiac rehabilitation program at the November 25, 2024 Benefits Committee meeting.
2. CVS Prescription Drug Plan
  - Antidiabetic GLP-1s. EUTF has already adopted utilization management to require users of GLP-1s (e.g., Ozempic and Mounjaro) to either be diagnosed with diabetes or have filled a prescription for another diabetic medication (other than another GLP-1) or supplies within the last 24-months. EUTF staff and Segal will work with CVS to identify/create other utilization management programs that could help address the GLP-1 spend.
  - Weight loss drugs. The CVS prescription drug plans cover weight loss medication (e.g., Wegovy and Zepbound) if the member is obese or overweight with chronic conditions and has participated in a weight management program. Segal will evaluate if there are other ways to reduce the weight loss drug spend (e.g. increasing copays for GLP-1s). CVS confirmed that the Wegovy/Zepbound PA criteria ensure that diabetics needing weight loss are directed to Ozempic or Mounjaro, since they are less expensive than Wegovy or Zepbound, respectively. Segal also asked CVS to provide more information on their weight loss management program as well, for the August 19, 2024 Benefits Committee meeting.

- Change from the current open formulary (i.e., FDA approved drugs, in general, are covered unless excluded by the EUTF Board or utilization management program adopted by the Board) to a more restrictive formulary. Most recently at the April 9, 2024 Benefits Committee meeting, the Committee expressed interest in adding utilization management on 10 drug classes (including diabetic agents) that would reduce annual costs by \$7.5 million (4.2%) actives and \$2.9 million (4.7%) non-Medicare retirees. Another option could be moving to a different exclusionary formulary. A more detailed presentation will be made by CVS and Segal at the October 15, 2024 Benefits Committee meeting.
  - Add the Hyperinflation Management program. Most recently at the April 9, 2024 Benefits Committee meeting, the Committee expressed interest in this program that will exclude drugs from coverage based on pricing, prescription volume, member impact, clinical applicability, and whether there is an alternative clinically effective and lower cost drug to reduce costs by \$210,000 (0.16%) actives and \$128,000 (0.27%) non-Medicare retirees. A more detailed presentation will be made by CVS and Segal at the October 15, 2024 Benefits Committee meeting.
  - PrudentRx. CVS has a program to maximize the benefit of manufacturer coupons on specialty drugs. In the past, EUTF was not able to implement this program because CVS required an exclusive specialty pharmacy network which is prohibited by Hawaii law. More recently CVS relaxed this requirement and EUTF staff and Segal put the project on hold until completion of the medical/prescription benefit manager RFP which was completed earlier this year. EUTF staff and Segal will work with CVS on creating a custom specialty pharmacy network and possible implementation for the EUTF active employees.
  - Non-specialty copayments. Effective July 1, 2016, non-specialty 30-day supply copayments were changed from \$5 generic/\$15 preferred/\$30 non-preferred to \$5 generic-no change/\$25 preferred/\$50 non-preferred. HMSA prevalent plan copayments are \$7 generic/\$30 preferred/\$75 non-preferred. Segal will evaluate the copay structure as part of its active annual report which will be presented at the November 25, 2024 Benefits Committee meeting.
  - Annual maximum out-of-pocket (MOOP). The CVS prescription drug plan bundled with HMSA 75/25 PPO has a lower MOOP (\$3,150 per person/\$6,300 per family) than the other CVS prescription drug plans bundled with the EUTF HMSA plans (\$4,350 per person/\$8,700 per family) which is inconsistent with the lower premium for the HMSA 75/25 PPO bundled CVS prescription drug plan. Will propose increasing or aligning the 75/25 MOOP with the other EUTF active drug plans at the October 15, 2024 Benefits Committee meeting.
3. HDS Dental Plans
- The EUTF and HSTA VB dental plans cover amalgam (silver) fillings (cost \$62) on back teeth at 80% subject to a \$50 deductible (retiree coverage 80% with deductible will be effective January 1, 2025, current coverage is at 60% with no deductible). Composite (white) fillings (\$100) are not covered but the plans will pay based on the amalgam benefit. The change would be to cover composite fillings on back teeth. Currently, the providers can determine the charge and the member is responsible for the difference between the composite and amalgam cost, less the amalgam benefit (approximately \$50). EUTF staff, Segal and HDS plan to propose this for a July 1, 2026 active and January 1, 2027 retiree effective date.

Retiree Benefits

1. HMSA Medicare medical plan. This plan is a 90/10 plan that supplements Medicare. The plan was originally structured, in general, in a way that results in a 100% plan through coordination with Medicare. For example, Medicare pays \$80 (80%) of a \$100 eligible physician charge. The remaining \$20 is billed to HMSA and the plan pays the entire \$20 since it is less than what it would have normally paid \$90 or 90%. A legislative bill could be proposed that would limit the employer’s contribution for new hires to 90/10 plans. EUTF’s actuaries estimated a few years ago that this change would reduce the State’s annual required contributions by \$1.1 billion over the first 30-years after adoption.
2. Retiree tiers. The employer retiree contribution tiers could be changed for new hires as follows:

<b>Years of Service</b>	<b>Current Contribution %age of BMC</b>	<b>Future New Hires Contribution %age of BMC</b>
10-15	50%	25%
15-20	75	50
20-25	75	75
25 and over	100	100

GRS has not been asked for an estimate of the impact on future annual required contributions. However, GRS noted that, “the benefit changes proposed are reasonable and would decrease costs over the long term, if that is the goal.”

Active Employee Benefits

1. Although employers contribute the same percentage to single, two-party and family plans, the employer dollar contribution is more for two-party and family plans. Whereas, private employers in Hawaii generally contribute a higher percentage to self plans than two-party and family. Employer contribution percentages can be adjusted to increase the percentage for self plans while decreasing the percentage for two-party and family plans to remain cost neutral for employers.
2. Review the chiropractic benefit.

Overall Benefits Provided to Active Employees

1. Recommend that the employers conduct a comprehensive review of the overall benefit package provided to current employees including salaries, retirement benefits, vacation health benefits, etc. since the EUTF benefits are part of the larger compensation issue.

**Recommendation to the Board**

1. EUTF staff, Segal and carriers to continue to investigate the health benefit changes noted above and present to the Benefits Committee as planned.
2. Board to discuss other items noted for future presentation to the Board Committees.
3. Submit a letter from the Chair to the Governor, Lt. Governor, Mayors, Senate President and Speaker of the House with recommendations for consideration including a comprehensive review of the overall package provided to current employees.



**PUBLIC**

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**SYLVIA LUKE**  
LIEUTENANT GOVERNOR

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October 15, 2024

**TO:** EUTF Board of Trustees  
**FROM:** Benefits Committee  
**SUBJECT:** October 15, 2024 Benefits Committee Meeting

The Benefits Committee discussed the following items at their October 15, 2024 meeting:

**Medicare Retiree Prescription Drug Plan**

SSI Semi-Annual Utilization Report for the period ending June 30, 2024

SSI presented prescription drug plan reports for the six months ended for the EUTF Medicare retiree plan (EGWP) noting claim trends per member per month (PMPM) of 13.3% (██████ book of business) and 5.3% after rebates and subsidies (no peer data). Specialty and GLP-1 claim trends continue to be areas of concern. In addition, prescription drug claims (ingredient cost and administration) for the treatment of COVID-19 (Paxlovid) are now covered under the EGWP with federal government funding ending on March 9, 2024. Pfizer is expected to provide rebates for Paxlovid claims which CVS is required to pass through to EUTF.

SSI Update on Medicare Part D Benefit Design and the Inflation Reduction Act

SSI reported on Inflation Reduction Act upcoming changes in 2025 related to Medicare Part D coverage phase changes, impact to direct subsidy and reinsurance, CMS’ price negotiation of 10 highly utilized Medicare Part D drugs for 2026, and the Medicare prescription payment plan.

**Active and Non-Medicare Retiree Prescription Drug Plans**

CVS Semi-Annual Utilization Reports for the period ending June 30, 2024

CVS presented prescription drug plan reports for the 12 months ended for EUTF active plans and six months ended for the EUTF non-Medicare retiree plans noting claim trends PMPM of 18.9% (██████ peer) and 15.6% after rebates (██████ peer) for actives and 22.2% (██████ peer) and 17.6% after rebates (██████ peer) for non-Medicare retirees noting the same concerns as the EGWP plan plus increased utilization of GLP-1s for weight management. CVS reported \$2.8 million savings under the active plans from GLP-1 utilization management currently in place.

Proposed CVS Prescription Drug Plan Changes

Segal noted EUTF active prescription drug plan higher year over year claims trend projection (before rebates) for plan year 24-25 of 18.3% versus the Segal public sector and book of business clients of 10.7% to 11.8% over the same time period, primarily due to the EUTF’s open formulary. Segal presented the following plan changes to help address the high trend:

1. Hyperinflation Management program which excludes high-cost drugs with readily available, clinically appropriate and more cost-effective alternatives with low member disruption (██████)

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actives and [REDACTED] non-Medicare retirees) and Year 1 cost savings ([REDACTED] actives and [REDACTED] non-Medicare retirees).

*Recommended implementation for EUTF actives and non-Medicare retirees effective July 1, 2025.*

2. Basic Control Formulary which is an open formulary that adds utilization management on non-preferred products in 10 drug classes. The vast majority of Segal and CVS public sector clients have formularies that are more restrictive than the current EUTF formulary. Low member disruption ([REDACTED] actives and [REDACTED] non-Medicare retirees) and significant Year 1 cost savings ([REDACTED] actives and [REDACTED] non-Medicare retirees).

*Recommended implementation for EUTF actives and non-Medicare retirees effective July 1, 2025.*

3. Standard Control Formulary which is a closed formulary that would cause more member disruption ([REDACTED] actives and [REDACTED] non-Medicare retirees) but significant Year 1 cost savings ([REDACTED] actives and [REDACTED] non-Medicare retirees).

*Not recommended at this time due to member disruption.*

4. Increasing EUTF active copayments which are currently below the HMSA prevalent plan and public sector plans in the western region. Projected savings presented with higher non-specialty copays.

*Recommended implementation for EUTF actives effective July 1, 2025. However, EUTF staff recommended deferring this change.*

5. Two possible options for tighter control over anti-diabetic GLP-1s: 1) adjusting the GLP-1 smart logic by removing metformin and diabetic supplies from the 24-month lookback period criteria or 2) completely removing the GLP-1 smart logic. Option 1 would cause minimal disruption ([REDACTED] actives and [REDACTED] non-Medicare retirees) and Year 1 cost savings ([REDACTED] actives and [REDACTED] non-Medicare retirees) while option 2 would result in higher costs to the plan because of changes to the rebate guarantees.

*Recommend removal of metformin and diabetic supplies from the 24-month smart logic lookback criteria for EUTF actives and non-Medicare retirees effective July 1, 2025.*

6. Increasing BMI thresholds for anti-obesity GLP-1 medications. This would result in higher costs to the plan because of changes to the rebate guarantees.

*No recommendation due to the negative cost impact.*

#### Segal Active Annual Prescription Drug Report as of June 30, 2024

Segal presented their review of the active prescription drug plan through June 30, 2024 noting the high claims trend, cost drivers (i.e., diabetes, autoimmune/psoriasis, and oncology), clinical program savings and the biosimilar pipeline.

#### Pharmacy vs. Medical Coverage of Continuous Glucose Monitors and Disposable Insulin Pumps

Segal presented their initial cost analysis on moving coverage of continuous glucose monitors and disposable insulin pumps from the HMSA medical plan to the CVS prescription drug plan to reduce costs and improve the member experience. Most Segal clients are already doing this and HMSA is planning this change effective January 1, 2025. Segal, HMSA and CVS/SSI will continue to evaluate the cost impact and how to address retirees with HMSA medical but no CVS/SSI prescription drug coverage for future consideration.

#### PrudentRx Opportunity Analysis

Segal reviewed the CVS PrudentRx program to capture the lost value of manufacturer specialty coupons to reduce plan costs. Due to the current legislative issues, potential member confusion due to plan design

changes needed, and difficulty in developing a custom network, Segal does not recommend this program at this time.

#### CVS CostVantage and TrueCost

CVS presented the new reimbursement model for payments made by pharmacy benefit managers (PBM) to CVS pharmacies (CostVantage) based on actual drug cost and an optional pricing model to PBM clients (TrueCost) that provides net cost pricing at the drug level based on the lesser of National Average Drug Acquisition Cost (NADAC) or wholesale acquisition cost (WAC). Segal did not recommend implementing TrueCost since we just completed an RFP process and this is a totally new model that could change the administrative fee and pricing guarantees, and staff noted that EUTF can retain the current guarantees as protection in case the CostVantage changes increase prescription drug costs.

#### **Proposed HMSA Medical Plan Changes**

HMSA proposed coverage of CMS preventive health services at current benefit levels for non-Medicare retirees. HMSA agreed to waive premium adjustments for 2025 but claims will be included in plan experience for future premium renewals.

*Segal recommended implementation for EUTF and HSTA VB non-Medicare and Medicare retiree plans effective January 1, 2025.*

HMSA proposed a cardiac rehabilitation plan for EUTF and HSTA VB active and retiree plans effective July 1, 2025 and January 1, 2026, respectively. At the meeting, HMSA informed the EUTF and Segal that coverage is currently provided for a pilot program which was not mentioned to Segal and EUTF staff during their evaluation process. HMSA will provide information on the pilot program. Segal is also working with HMSA on the premium impact.

*Segal did not recommend this change at this time because of premium impact concerns but will continue to work with HMSA and the new information on the pilot program.*

#### **Proposed HDS Dental Plan Changes**

HDS proposed aligning the fluoride treatment benefit for the HSTA VB HDS active dental and supplemental dental plans with the other plans by increasing the number of treatments to two from one annually for members through age 19. The annual premium impact is [REDACTED].

*Segal recommended implementation for HSTA VB HDS active dental and supplemental dental plans effective July 1, 2025.*

#### **Proposed VSP Vision Plan Changes**

VSP proposed enhancing coverage of highly utilized lens enhancements – anti-reflective coating, polycarbonate for adults and premium/custom progressive lenses. These benefits are not part of the Hawaii VSP book of business and would add significant costs.

*Segal did not recommend this change.*

#### **Dependent Child Eligibility**

EUTF staff investigated at the request of a trustee extending dependent children of active employees dental and vision coverage and dependent children of retirees medical, prescription drug, dental and vision coverage to age 26 under the same criteria as dependent children of active employees medical/prescription drug coverage under ACA. EUTF staff found that the vast majority of other plans in Hawaii and other western region state plans apply the same ACA dependent eligibility criteria. Estimated annual costs for active employee plans are \$1.3 million and the estimated increase in the unfunded liability is \$30.1 million. Additionally, this would significantly reduce EUTF staff time 1.5 full-time equivalents and disruption for the members. Lastly, expansion of the dependent child eligibility criteria

will reduce employer costs in the long-term by bringing low-cost members into the plan that the retirees will be paying for (post June 30, 2001 retirees).

EUTF staff also noted that the recent permitted interaction group found that the state and county employees and retirees had lower benefits than their western region state counterparts and the State faced lower revenues in the future. Adoption of the recommended changes would reduce annual costs with low member disruption (e.g., the Basic Control Formulary) but also provide enhanced benefits (e.g., expansion of the dependent child eligibility).

*Recommendation:* The Committee recommends the following:

1. Adoption of the Hyperinflation Management Program under the EUTF active employee and non-Medicare retiree prescription drug plans administered by CVS effective July 1, 2025
2. Adoption of the Basic Control Formulary under the EUTF active employee and non-Medicare retiree prescription drug plans administered by CVS effective July 1, 2025
3. Revision of utilization management for antidiabetic GLP-1s by removing metformin and diabetic supplies from the 24-month smart logic lookback period under the EUTF active employee and non-Medicare retiree prescription drug plans administered by CVS effective July 1, 2025
4. Coverage of Medicare covered preventive screening services at the current preventive screening benefit level under the EUTF and HSTA VB HMSA non-Medicare and Medicare retiree medical plans effective January 1, 2025
5. Coverage of two fluoride treatments per calendar year through age 19 under the HSTA VB HDS active employee dental and supplemental dental plans effective July 1, 2025 and
6. Coverage of dependent children under the retiree medical and prescription drug plans under the same eligibility criteria as active employee medical/prescription drug plans effective January 1, 2026 and transfer of \$30.9 million from the EUTF Trust Fund to the OPEB Trust Fund.

EUTF staff would like to recommend changing the transfer amount to \$28.2 million.

Attachment

**Annual Premium Impact**

**Actives      Retirees      AAL**

**Benefits Committee Recommendation**

*HMSA Medical*

Medicare covered preventive services 1/1/25

*CVS Prescription Drug*

Hyperinflation Mgmt 7/1/25

Basic Control Formulary 7/1/25

Antidiabetic GLP-1 UM (metformin/diabetic supply removal option) 7/1/25

*Dental*

Additional fluoride (HSTA VB) 7/1/25

*Same Coverage of Retiree Medical and Prescription Drug as Active Medical and Prescription Drug 7/1/25 (or 1/1/26)*

Coverage 19-25

*Total plus transfer of \$30.9 million from EUTF Trust to OPEB Trust*

**- \$8,988,800    - \$2,019,150    - \$44,309,000**

**Original Motion and HMSA Cardiac Rehabilitation**

*Same Coverage of Active and Retiree Dental and Vision as Active Medical and Prescription Drug (19-25) 7/1/25*

*HMSA Cardiac Rehabilitation 7/1/25 actives and 1/1/26 retirees*

*Total plus transfer of additional \$14.5 million from EUTF Trust to OPEB Trust*


**\$1,701,500      \$785,250      \$17,209,000**

*Total plus transfer of \$45.4 million from the EUTF Trust to OPEB Trust*

**- \$7,287,300    - \$1,233,900    - \$27,100,000**

## Memorandum

**To:** Board of Trustees  
Hawaii Employer-Union Health Benefits Trust Fund

**From:** Stephen Murphy 

**Date:** October 22, 2024

**Re:** Segal Reports – Compliance News

Attached for the Board of Trustees' information is compliance news impacting EUTF's health plans.

### **Final Mental Health Parity Rules Establish New Standards (September 26, 2024)**

The new rules amend the longstanding 2013 Mental Health Parity and Addiction Equity Act (MHPAEA) and establish new standards for nonquantitative treatment limitations (NQTs), including implementing the additional documented comparative analyses requirements that were added through the Consolidated Appropriations Act of 2020.

The rules contain additional definitions, call for coverage of core treatments for covered mental health and substance use conditions, and require collection and review of data outcomes.

Some provisions take effect for plan years beginning on or after January 1, 2025, while others for plan years beginning on or after January 1, 2026. Provisions implementing the meaningful benefits standard, the prohibition on discriminatory factors and evidentiary standards, required use of outcomes data, and certain related comparative analysis requirements apply for plan years beginning on or after January 1, 2026.

HMSA and Kaiser Permanente provided the following statements acknowledging the new mental health and substance use conditions coverage standards.

- **“...HMSA agrees to fulfill any new government reporting requirements for insurers as they relate to Mental Health Parity.”**
- **“...Kaiser Permanente is currently reviewing all aspects of the final rule and will work to implement the necessary solutions to support compliance with these provisions.”**

Attachments

cc: Derek Mizuno, EUTF  
Lara Nitta, EUTF

# Final Mental Health Parity Rules Establish New Standards

Final rules for mental health parity under the Mental Health Parity and Addiction Equity Act (MHPAEA) were officially published in the *Federal Register* on September 23, 2024, with notable differences from the proposed rules published by the Departments of Labor, Health and Human Services (HHS) and the Treasury (collectively the Departments) on August 3, 2023.



The rules amend the longstanding 2013 final rules and establish new standards for nonquantitative treatment limitations (NQTs), including implementing the additional documented comparative analyses requirements that were added through the Consolidated Appropriations Act of 2020.

The rules contain additional definitions, call for coverage of core treatments for covered mental health and substance use conditions, and require collection and review of data outcomes.

These rules advance the administration's continued efforts to strengthen parity between medical/surgical and mental health and substance use disorder (MH/SUD) treatment. The rules have staggered applicability dates, with some provisions taking effect for plan years beginning on or after January 1, 2025, and others for plan years beginning on or after January 1, 2026.

The final rules were published after a comment period that generated more than 9,500 comments in response to the 2023 proposed rules.

## Background

On December 27, 2020, Congress enacted the Consolidated Appropriations Act, 2021 (CAA), which amended MHPAEA, in part, to require group health plans and health insurers that offer both medical/surgical benefits and mental health/substance use disorder (MH/SUD) benefits and impose NQTs on MH/SUD benefits to perform and document comparative analyses of the design and application of their NQTs. (We discussed these requirements in our January 14, 2021 insight, "[New Law Strengthens Parity for Mental Health and SUD](#)," which includes examples of NQTs.)

The comparative analysis requirements became effective on February 10, 2021. Plans and insurers must make their comparative analyses available to the Departments or applicable state authorities, upon request.

On July 25, 2023, the Departments announced [proposed rules](#) (published in the *Federal Register* on August 3, 2023), which we discussed in our [August 1, 2023 insight](#). Additionally, the DOL issued [Technical Release 2023-01P](#) seeking comments related to network composition requirements.

## The final rules

Notably, the final rules issued by the Departments do not finalize the application of the substantially all/predominant test to NQTLs that was in the 2023 proposed rules. This test, if even feasible, would have created significant burden for plans and their administrators.

Under the final rules, plans must ensure that the “processes,” “strategies,” “factors” and “evidentiary standards” used in designing and applying an NQTL are comparable and applied no more stringently with respect MH/SUD conditions than for medical/surgical conditions. The final rules include an express prohibition on factors and evidentiary standards that discriminate against MH conditions and SUDs. The final rules do not include the proposed exceptions for clinically standards of care and fraud and abuse. Consequently, such activities should be incorporated, if appropriate, into NQTL analysis.

In addition, the Departments finalized requirements relating to data collection and reviewing data outcomes. Applicable for the 2026 plan year, plans will be required to identify material differences in outcomes. Unlike the proposed rules that suggested de facto findings of noncompliance, plan sponsors will need either to substantiate such differences or take corrective measures to address them. Plans are required to document corrective measures. The Departments acknowledge telehealth as a measure that supports access to MH/SUD benefits which can be taken into account in comparative information.

The final rules add definitions, including relying on the most current versions of the Diagnostic and Statistical Manual (currently the DSM-V) and the International Classification of Diseases (currently the ICD-10). Further, the rules finalize the meaningful benefits standards, which specify that if a plan provides any benefits for a MH/SUD condition or disorder in any classification of benefits, the plan must provide core treatment for that condition or disorder in each classification in which comparative medical/surgical benefits are provided.

Like the proposed rules, the final rules detail the required content of the documented comparative analysis, including a fiduciary certification requirement. In a departure from the proposed regulation, under the final rules the fiduciary certification focuses on the prudent selection and monitoring of service providers involved in the development of documented comparative analysis. The Departments discuss the process for findings of noncompliance, including that plans will have to demonstrate compliance for NQTLs or take remedial action to address violations.

The final rules retain the strict timing requirements for providing information to the Departments or individuals requesting information. This means that plans have 10 days to respond to an initial request. In instances where the response to an initial request is considered insufficient and DOL or HHS request supplemental information, a plan again has 10 days to respond. Finally, in instances of a final determination of noncompliance, plans will be required to provide notice to individuals covered under the plan within seven days.

Finally, as expected, the final rules implement the sunset provision for self-funded, non-federal governmental plan elections to opt out of compliance with MHPAEA.

## Additional resources

The Departments issued the final rules in conjunction with a [press release](#), a [fact sheet](#) and one-page documents for [plans and issuers](#), [consumers](#) and [providers](#).

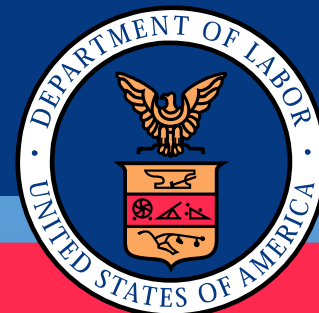
The Departments are expected to issue additional guidance, including guidance related to outcomes data collection and evaluation, as well as an updated self-compliance tool.

## Implications for plan sponsors

The final rules set forth new standards for imposing NQTLs on MH/SUD conditions and requires additional data collection and evaluation requirements for compliant NQTL documented comparative analyses. Plan sponsors should evaluate the final rules and determine the impact on future MHPAEA compliance efforts.

In November, Segal will be hosting a webinar to discuss the final rules. If you're not on our email list, [sign up](#) to be sure to receive an invitation that will include more information and the details.

# New Mental Health and Substance Use Disorder Parity Rules: What They Mean for Plans and Issuers



The Mental Health Parity and Addiction Equity Act (MHPAEA) generally prevents most group health plans and health insurance issuers that provide mental health and substance use disorder (MH/SUD) benefits from imposing more restrictive coverage limitations on those benefits than on medical/surgical (M/S) benefits. The law also requires plans and issuers to document comparative analyses of nonquantitative treatment limitations (NQTLs) (such as preauthorization requirements and network composition standards) that apply to MH/SUD benefits.

**Final rules were released on September 9, 2024, by the Departments of Labor, Health and Human Services, and the Treasury (the Departments) that amend the existing rules and add new rules implementing MHPAEA.**

For group health plans and group health insurance coverage, the final rules generally apply for plan years beginning on or after January 1, 2025. However, the provisions implementing the meaningful benefits standard, the prohibition on discriminatory factors and evidentiary standards, required use of outcomes data, and certain related comparative analysis requirements apply for plan years beginning on or after January 1, 2026. For individual health insurance coverage, the final rules apply for policy years beginning on or after January 1, 2026.

More information on MHPAEA and the text of the final rules is available at <https://www.dol.gov/agencies/ebsa/laws-and-regulations/laws/mental-health-and-substance-use-disorder-parity> and <https://www.cms.gov/marketplace/private-health-insurance/mental-health-parity-addiction-equity>.

EMPLOYEE BENEFITS SECURITY ADMINISTRATION  
UNITED STATES DEPARTMENT OF LABOR

## Key Provisions

*Under the final rules, plans and issuers must:*

- Define whether a condition or disorder is an MH condition or SUD in a manner that is consistent with the most current version of the International Classification of Diseases or Diagnostic and Statistical Manual of Mental Disorders.
- Offer meaningful benefits (including a core treatment) for each covered MH condition or SUD in every classification in which M/S benefits (a core treatment) are offered.
- Not use factors and evidentiary standards to design NQTLs that discriminate against MH conditions and SUDs.
- Collect and evaluate relevant outcomes data and take reasonable action, as necessary, to address material differences in access to MH/SUD benefits as compared to M/S benefits.
- Include specific elements in documented comparative analyses and make them available to the Departments, an applicable State authority, or individuals upon request.

Comparative analyses for plans subject to the Employee Retirement Income Security Act must also include a certification that they have engaged in a prudent process and monitored their service providers.

The new final rules also eliminate State and local government health plans' ability to opt out of compliance with MHPAEA.



## Administrator's Monthly Report to the Board

Coverage Period: September 14 – October 11, 2024

### Ongoing Projects/Issues

No.	Current Status	Progress Made During Coverage Period	Problems/Issues	Next Steps
1.	Meetings with Legislators and Unions	9/18 UHPA 10/14 HGEA Retirees	None	To resume meetings with Legislators once leadership has been determined. To commence meetings with Unions.
2.	Staffing Update	Total positions 62 <i>Ongoing recruitment</i> 1. MSB Member Services Representative 2. FSB Account Clerk III 3. FSB Account Clerk III 4. FSB Account Clerk IV 5. ADMIN Investment Analyst		
3.	Training	11/10-11/13 IFEBP Annual Employee Benefits, San Diego, CA 1/28-1/29 IFEBP Health Benefits Expo, St. Petersburg, FL 3/24-3/26 Pension Bridge Annual Conference, Half Moon Bay, CA 4/28-4/29 Health Care Management Conference, Fort Myers, FL 4/28-5/1 SALGBA Annual Conference, St. Louis, MO 5/17-5/18 NCPERS Fiduciary Program, Denver, CO 5/17-5/18 NCPERS Trustee Educational Seminar, Denver, CO 5/18-5/21 NCPERS Annual Conference, Denver, CO		

Rev 24.10.11



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**SYLVIA LUKE**  
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**HAWAII EMPLOYER-UNION HEALTH BENEFITS TRUST FUND**

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October 11, 2024

**TO:** Board of Trustees  
**FROM:** Jessica McDonald  
Member Services Branch Manager  
**SUBJECT:** September – October 2024 Member Services Operations Report

This report covers the time-period from September 14, 2024 – October 11, 2024. Additional details will be provided upon request.

a. Member Services Branch (MSB) Data

Customer Service Automated Call Distribution (ACD) Report for September 2024:

ACD	Incoming ACD Calls	Outgoing ACD Calls	Total Ans.	Average Call Duration (minutes)	% Ans.	% Ans. within 10 Sec.	% Ans. within 11-30 Sec.	% Ans. within >30 Sec.	Total Abandoned
MSB	4,501	276	4,105	4:07	91.20%	30.37%	11.58%	49.26%	396

See the attached MSB Automated Call Distribution (ACD) report for more information on call trends.

MSB’s call answer rate was 91.20% for the months of September. Members were primarily calling to check the status of their enrollment requests and retirement/Medicare inquiries. We continue to assign more MSR’s on the phones daily, including additional MSR’s during peak hours. Incoming calls are manageable since we are generally processing enrollment forms within the standard processing period and are clearing the backlog of non-life event documents.

Currently, there are twelve (12) MSR’s; five (5) MSR’s answering the ACD line, responding to emails, and walk-ins (one in training) and seven (7) MSR’s processing all forms and documents (the retirement and active processing teams were merged as of 10/1/24). Additionally, there are three (3) MS clerks scanning and indexing enrollment forms into the BAS.

Other Servicing Initiatives

- Number of General Emails received and responded: 310 (405 in September 2023)
- Number of Walk-ins serviced: August: 601 (331 in September 2023)

**EUTF’s Mission:** We care for the health and well being of our beneficiaries by striving to provide quality benefit plans that are affordable, reliable, and meet their changing needs. We provide informed service that is excellent, courteous, and compassionate.

Member Portal Logins

	<b>Count of Logins</b>
January 2024	3,476
February 2024	5,329
March 2024	6,844
April 2024	18,655
May 2024	4,240
June 2024	5,714
July 2024	5,880
August 2024	7,635
September 2024	8,792
<b>Total Count of Registered Users</b>	<b>20,168</b>

	<b>Active EC-1s</b>		<b>Retiree EC-2s</b>		<b>Medicare Related Documents</b>
	<b>2024</b>	<b>2023</b>	<b>2024</b>	<b>2023</b>	<b>2024</b>
September	205	286	181	175	402
August	118	343	153	218	178
July	210	295	188	270	323
June	137	298	218	358	457
May	334	577	221	361	434
April	135 (+21 OE)	245 (+1,248 OE)	125	276	145
March	195	426	117	389	201
February	203	559	177	669*	591
January	232	749	433*	926*	1,456*
	<b>2023</b>	<b>2022</b>	<b>2023</b>	<b>2022</b>	<b>2023</b>
December	297	434	509 *	781	1,163*
November	234	471	294 (+249 OE)	665	706
October	362	NA	239 (+10 OE)	NA	420

*\*Retiree/Medicare counts are high due to 12/31 retirements and annual SSA letters.*

Memorandum to Board of Trustees

October 11, 2024

Subject: September – October 2024 Member Services Operations Report

Page 3

b. Outreach & Training

The Outreach & Training Team conducted four pre-retirement presentations and participated in the DLIR wellness fair during the month of September. Total attendance for the month was 230.

c. 2025 Retiree Open Enrollment

Retiree Open Enrollment will be held October 14 – 31, 2024 and will be conducted via hard copy enrollment forms.

Enclosures

# MSB Automated Call Distribution Report

## September 2024

Day	Day of Week	Incoming Calls	Answered	% Answered	Average Time Per Call (min)	% Answered within x seconds			Abandoned Time (in seconds)				# of Agents in ACD	Outgoing Calls	
						10	10-30	> 30	< 10	10-30	> 30	Total			
2	Monday	HOLIDAY - LABOR DAY													
3	Tuesday	283	250	88.34%	4:07	16.61%	11.31%	60.42%	1	4	28	33	9	18	
4	Wednesday	206	195	94.66%	4:16	41.75%	16.50%	36.41%	1	2	8	11	10	15	
5	Thursday	237	205	86.50%	3:57	25.74%	13.92%	46.84%	1	3	28	32	9	12	
6	Friday	243	228	93.83%	4:18	26.34%	16.05%	51.44%	2	1	12	15	10	13	
9	Monday	260	251	96.54%	4:10	35.77%	14.23%	46.54%	0	1	8	9	10	13	
10	Tuesday	242	220	90.91%	3:54	25.62%	11.16%	54.13%	1	7	14	22	9	12	
11	Wednesday	230	209	90.87%	4:14	20.87%	12.61%	57.39%	2	1	18	21	8	9	
12	Thursday	241	211	87.55%	4:46	20.75%	9.96%	56.85%	1	1	28	30	8	24	
13	Friday	240	212	88.33%	3:45	18.75%	9.17%	60.42%	1	2	25	28	9	13	
16	Monday	264	225	85.23%	4:03	19.70%	6.44%	59.09%	1	1	37	39	7	7	
17	Tuesday	213	191	89.67%	4:05	32.86%	13.15%	43.66%	0	4	18	22	9	10	
18	Wednesday	180	177	98.33%	4:05	63.89%	16.11%	18.33%	0	0	3	3	8	11	
19	Thursday	179	167	93.30%	3:51	43.58%	8.38%	41.34%	2	0	10	12	6	11	
20	Friday	161	155	96.27%	3:41	66.46%	12.42%	17.39%	0	2	4	6	7	5	
23	Monday	268	228	85.07%	4:14	22.76%	9.33%	52.99%	1	4	35	40	8	10	
24	Tuesday	232	212	91.38%	4:03	30.17%	9.48%	51.72%	2	0	18	20	9	18	
25	Wednesday	189	176	93.12%	4:20	44.97%	8.47%	39.68%	1	1	11	13	9	15	
26	Thursday	156	150	96.15%	3:59	46.15%	13.46%	36.54%	0	1	5	6	7	16	
27	Friday	200	195	97.50%	4:06	28.00%	11.00%	58.50%	0	1	4	5	7	23	
30	Monday	277	248	89.53%	4:09	16.25%	10.47%	62.82%	1	3	25	29	7	21	
<b>Monthly Totals</b>		<b>4501</b>	<b>4105</b>	<b>91.20%</b>	<b>4:07</b>	<b>30.37%</b>	<b>11.58%</b>	<b>49.26%</b>	<b>18</b>	<b>39</b>	<b>339</b>	<b>396</b>	<b>166</b>	<b>276</b>	

# MSB Automated Call Distribution Report

## January to December 2024

Month	Incoming Calls	Answered	% Answered	Average Time Per Call (min)	% Answered within x seconds			Abandoned Time (in seconds)				# of Agents in	Outgoing Calls
					10	10-30	> 30	< 10	10-30	> 30	Total		
January	5133	4348	84.71%	4:14	23.63%	8.84%	52.23%	40	74	671	785	127	319
February	4171	3712	89.00%	4:02	37.04%	10.69%	41.26%	20	88	351	459	134	317
March	3902	3461	88.70%	4:02	33.85%	12.61%	42.23%	22	76	343	441	128	284
April	6935	5480	79.02%	4:32	16.77%	7.77%	54.48%	44	202	1209	1455	189	408
May	4202	3889	92.55%	4:13	48.69%	13.61%	30.25%	13	70	230	313	174	395
June	4143	3708	89.50%	4:16	37.94%	14.17%	37.39%	23	88	324	435	141	327
July	5049	4573	90.57%	4:11	33.99%	15.63%	40.96%	28	74	374	476	178	407
August	4847	4554	93.96%	4:21	34.93%	15.12%	43.90%	23	32	238	293	175	352
September	4501	4105	91.20%	4:07	30.37%	11.58%	49.26%	18	39	339	396	166	276
October													
November													
December													

Report Created 10/1/2024

**\*The ACD Assigned MSR column reflects how many MSR were assigned to ACD over the day. The actual number of MSR logged into the ACD may fluctuate throughout the day.**

# MSB Automated Call Distribution Report

## January to December 2023

Month	Incoming Calls	Answered	% Answered	Average Time Per Call (min)	% Answered within x seconds			Abandoned Time (in seconds)				# of Agents in	Outgoing Calls
					10	10-30	> 30	< 10	10-30	> 30	Total		
January	6896	3405	49.38%	6:02	2.31%	0.62%	46.45%	85	122	3284	3491	131	326
February	4125	2964	71.85%	5:18	11.44%	2.98%	57.43%	35	43	1083	1161	113	293
March	4484	3438	76.67%	4:28	18.42%	3.70%	54.55%	23	49	974	1046	115	181
April	4884	3319	67.96%	4:40	10.77%	2.38%	54.81%	27	57	1481	1565	109	220
May	4253	3798	89.30%	4:14	33.81%	6.44%	49.05%	14	31	410	455	124	238
June	4433	3654	82.43%	4:24	21.93%	4.92%	55.58%	22	47	710	779	134	180
July	4613	3425	74.25%	4:07	7.76%	3.23%	63.26%	29	52	1107	1188	116	173
August	4929	3866	78.43%	4:34	17.81%	5.42%	55.20%	40	63	960	1063	138	356
September	4742	3903	82.31%	4:23	21.78%	5.34%	55.19%	32	62	745	839	129	230
October	5013	4328	86.34%	4:09	25.71%	8.50%	52.12%	28	84	573	685	155	287
November	3989	3641	91.28%	4:16	39.18%	8.87%	43.22%	27	39	282	348	136	232
December	3875	3484	89.91%	4:22	36.39%	8.23%	45.29%	27	36	328	391	121	278

Report Created 10/1/2024



JOSH GREEN, M.D.  
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October 11, 2024

TO: Board of Trustees  
FROM: Todd Nishida, Information Systems Chief  
SUBJECT: September 2024 - October 2024 Information Systems (IS) Operations Report

This report covers the period from September 14, 2024 through October 11, 2024. This report provides updates on certain key IS items. Additional details will be provided at the Board of Trustees meeting or upon request.

a. EUTF Benefits Administration System (BAS) Project

EUTF has begun the reconciliation of enrollments with the carriers. The Applications section completed a reconciliation for HMSA that is being reviewed by the Eligibility Specialist.

TELUS Health has completed the Ariel upgrade to 2024 Releases 1 to 4 on October 11. This brings EUTF's Ariel system to the current version.

b. Equipment Replacement

The current phone system contract is set to expire at the end of February 2025. The Systems team has begun the procurement process to replace the current on-premises system with a vendor hosted solution. The goal is to have a replacement installed by January 2025.

c. Enrollment Counts

Ariel BAS enrollment counts for the month of September are attached.

**EUTF's Mission:** We care for the health and well being of our beneficiaries by striving to provide quality benefit plans that are affordable, reliable, and meet their changing needs. We provide informed service that is excellent, courteous, and compassionate.



## Enrollment Counts - Active (Summary)

The table below shows Active enrollment for period ending 09-30-2024

### Count by Subscribers and Dependents

Benefit Plan	Subscribers	Dependents	Total
<b>Medical</b>			
<b>EUTF</b>			
PPO-90/10 HMSA Medical and Chiro bundled with PPO Drug (CVS)	2,383	1,175	3,558
PPO-80/20 HMSA Medical and Chiro bundled with PPO Drug (CVS)	10,561	7,551	18,112
PPO-75/25 HMSA Medical and Chiro bundled with PPO Drug (CVS)	21,382	21,372	42,754
HMO HMSA Medical and Chiro bundled with HMO Drug (CVS)	675	327	1,002
HMO Comprehensive Kaiser Medical, Drug and Chiro	3,917	2,751	6,668
HMO Standard Kaiser Medical, Drug and Chiro	9,689	8,795	18,484
Verdegard Supplemental Medical and Drug	543	925	1,468
<b>EUTF Total</b>	<b>49,150</b>	<b>42,896</b>	<b>92,046</b>
<b>HSTA VB</b>			
HSTA VB PPO-90/10 Medical and Chiro (HMSA) bundled with PPO Drug (CVS), Vision (VSP)	736	713	1,449
HSTA VB PPO-80/20 Medical and Chiro (HMSA) bundled with PPO Drug (CVS), Vision (VSP)	1,619	2,417	4,036
HSTA VB HMO Medical, Drug and Chiro (Kaiser) bundled with Vision (VSP)	577	757	1,334
<b>HSTA VB Total</b>	<b>2,932</b>	<b>3,887</b>	<b>6,819</b>
<b>Medical Total</b>	<b>52,082</b>	<b>46,783</b>	<b>98,865</b>
<b>Drug</b>			
<b>EUTF</b>			
PPO-90/10 CVS Prescription Drug bundled with PPO Medical (HMSA)	2,383	1,175	3,558
PPO-80/20 CVS Prescription Drug bundled with PPO Medical (HMSA)	10,561	7,551	18,112
PPO-75/25 CVS Prescription Drug bundled with PPO Medical (HMSA)	21,381	21,372	42,753
HMO CVS Prescription Drug bundled with HMO Medical (HMSA)	675	327	1,002
<b>EUTF Total</b>	<b>35,000</b>	<b>30,425</b>	<b>65,425</b>
<b>HSTA VB</b>			
HSTA VB PPO-90/10 Prescription Drug (CVS) bundled with HSTA VB PPO Medical (HMSA)	736	713	1,449
HSTA VB PPO-80/20 Prescription Drug (CVS) bundled with HSTA VB PPO Medical (HMSA)	1,619	2,417	4,036
<b>HSTA VB Total</b>	<b>2,355</b>	<b>3,130</b>	<b>5,485</b>
<b>Drug Total</b>	<b>37,355</b>	<b>33,555</b>	<b>70,910</b>
<b>Dental</b>			
<b>EUTF</b>			
Dental (HDS)	51,375	44,197	95,572
<b>EUTF Total</b>	<b>51,375</b>	<b>44,197</b>	<b>95,572</b>
<b>HSTA VB</b>			
HSTA VB Dental (HDS)	3,124	3,923	7,047
HSTA VB Supplemental Dental (HDS)	73	116	189
<b>HSTA VB Total</b>	<b>3,197</b>	<b>4,039</b>	<b>7,236</b>
<b>Dental Total</b>	<b>54,572</b>	<b>48,236</b>	<b>102,808</b>
<b>Vision</b>			
<b>EUTF</b>			
Vision (VSP)	49,356	41,169	90,525
<b>EUTF Total</b>	<b>49,356</b>	<b>41,169</b>	<b>90,525</b>
<b>HSTA VB</b>			
HSTA VB Vision (VSP) - Stand Alone	173	334	507
HSTA VB Vision (VSP) bundled with Medical	2,932	3,400	6,332
<b>HSTA VB Total</b>	<b>3,105</b>	<b>3,734</b>	<b>6,839</b>
<b>Vision Total</b>	<b>52,461</b>	<b>44,903</b>	<b>97,364</b>
<b>Life</b>			
<b>EUTF</b>			
EUTF Securian Life Insurance	58,266	0	58,266
<b>EUTF Total</b>	<b>58,266</b>	<b>0</b>	<b>58,266</b>
<b>HSTA VB</b>			
HSTA VB Securian Life Insurance	3,815	0	3,815
<b>HSTA VB Total</b>	<b>3,815</b>	<b>0</b>	<b>3,815</b>
<b>Life Total</b>	<b>62,081</b>	<b>0</b>	<b>62,081</b>

Data Taken 09-20-2024

## Enrollment Counts - EUTF Active

The table below shows EUTF Active enrollment for period ending 09-30-2024

### Count by Subscribers by Enrollment Coverage

Benefit Plan	Self	Two-Party	Family	Total
<b>Medical</b>				
PPO-90/10 HMSA Medical and Chiro bundled with PPO Drug (CVS)	1,776	315	292	2,383
PPO-80/20 HMSA Medical and Chiro bundled with PPO Drug (CVS)	6,816	1,734	2,011	10,561
PPO-75/25 HMSA Medical and Chiro bundled with PPO Drug (CVS)	11,591	3,780	6,011	21,382
HMO HMSA Medical and Chiro bundled with HMO Drug (CVS)	515	72	88	675
HMO Comprehensive Kaiser Medical, Drug and Chiro	2,558	646	713	3,917
HMO Standard Kaiser Medical, Drug and Chiro	5,577	1,694	2,418	9,689
Verdegard Supplemental Medical and Drug	146	126	271	543
<b>Medical Total</b>	<b>28,979</b>	<b>8,367</b>	<b>11,804</b>	<b>49,150</b>
<b>Drug</b>				
PPO-90/10 CVS Prescription Drug bundled with PPO Medical (HMSA)	1,776	315	292	2,383
PPO-80/20 CVS Prescription Drug bundled with PPO Medical (HMSA)	6,816	1,734	2,011	10,561
PPO-75/25 CVS Prescription Drug bundled with PPO Medical (HMSA)	11,590	3,780	6,011	21,381
HMO CVS Prescription Drug bundled with HMO Medical (HMSA)	515	72	88	675
<b>Drug Total</b>	<b>20,697</b>	<b>5,901</b>	<b>8,402</b>	<b>35,000</b>
<b>Dental (HDS)</b>	<b>28,453</b>	<b>11,087</b>	<b>11,835</b>	<b>51,375</b>
<b>Vision (VSP)</b>	<b>27,974</b>	<b>10,384</b>	<b>10,998</b>	<b>49,356</b>
<b>Life Insurance (Securian)</b>	<b>58,266</b>			<b>58,266</b>

### Count by Subscribers and Dependents

Benefit Plan	Subscribers	Dependents	Total
<b>Medical</b>			
PPO-90/10 HMSA Medical and Chiro bundled with PPO Drug (CVS)	2,383	1,175	3,558
PPO-80/20 HMSA Medical and Chiro bundled with PPO Drug (CVS)	10,561	7,551	18,112
PPO-75/25 HMSA Medical and Chiro bundled with PPO Drug (CVS)	21,382	21,372	42,754
HMO HMSA Medical and Chiro bundled with HMO Drug (CVS)	675	327	1,002
HMO Comprehensive Kaiser Medical, Drug and Chiro	3,917	2,751	6,668
HMO Standard Kaiser Medical, Drug and Chiro	9,689	8,795	18,484
Verdegard Supplemental Medical and Drug	543	925	1,468
<b>Medical Total</b>	<b>49,150</b>	<b>42,896</b>	<b>92,046</b>
<b>Drug</b>			
PPO-90/10 CVS Prescription Drug bundled with PPO Medical (HMSA)	2,383	1,175	3,558
PPO-80/20 CVS Prescription Drug bundled with PPO Medical (HMSA)	10,561	7,551	18,112
PPO-75/25 CVS Prescription Drug bundled with PPO Medical (HMSA)	21,381	21,372	42,753
HMO CVS Prescription Drug bundled with HMO Medical (HMSA)	675	327	1,002
<b>Drug Total</b>	<b>35,000</b>	<b>30,425</b>	<b>65,425</b>
<b>Dental (HDS)</b>	<b>51,375</b>	<b>44,197</b>	<b>95,572</b>
<b>Vision (VSP)</b>	<b>49,356</b>	<b>41,169</b>	<b>90,525</b>

Data Taken 09-20-2024

## Enrollment Counts - HSTA VB Active

The table below shows HSTA VB Active enrollment for period ending 09-30-2024

### Count by Subscribers by Enrollment Coverage

Benefit Plan	Self	Two-Party	Family	Total
<b>Medical</b>				
HSTA VB PPO-90/10 Medical and Chiro (HMSA) bundled with PPO Drug (CVS), Vision (VSP)	417	108	211	736
HSTA VB PPO-80/20 Medical and Chiro (HMSA) bundled with PPO Drug (CVS), Vision (VSP)	596	285	738	1,619
HSTA VB HMO Medical, Drug and Chiro (Kaiser) bundled with Vision (VSP)	257	97	223	577
<b>Medical Total</b>	<b>1,270</b>	<b>490</b>	<b>1,172</b>	<b>2,932</b>
<b>Drug</b>				
HSTA VB PPO-90/10 Prescription Drug (CVS) bundled with HSTA VB PPO Medical (HMSA)	417	108	211	736
HSTA VB PPO-80/20 Prescription Drug (CVS) bundled with HSTA VB PPO Medical (HMSA)	596	285	738	1,619
<b>Drug Total</b>	<b>1,013</b>	<b>393</b>	<b>949</b>	<b>2,355</b>
<b>Dental</b>				
HSTA VB Dental (HDS)	1,267	680	1,177	3,124
HSTA VB Supplemental Dental (HDS)	11	31	31	73
<b>Dental Total</b>	<b>1,278</b>	<b>711</b>	<b>1,208</b>	<b>3,197</b>
<b>Vision</b>				
HSTA VB Vision (VSP) - Stand Alone	26	43	104	173
HSTA VB Vision (VSP) bundled with Medical	1,306	609	1,017	2,932
<b>Vision Total</b>	<b>1,332</b>	<b>652</b>	<b>1,121</b>	<b>3,105</b>
<b>Life Insurance (Securian)</b>	<b>3,815</b>			<b>3,815</b>

### Count by Subscribers and Dependents

Benefit Plan	Subscribers	Dependents	Total
<b>Medical</b>			
HSTA VB PPO-90/10 Medical and Chiro (HMSA) bundled with PPO Drug (CVS), Vision (VSP)	736	713	1,449
HSTA VB PPO-80/20 Medical and Chiro (HMSA) bundled with PPO Drug (CVS), Vision (VSP)	1,619	2,417	4,036
HSTA VB HMO Medical, Drug and Chiro (Kaiser) bundled with Vision (VSP)	577	757	1,334
<b>Medical Total</b>	<b>2,932</b>	<b>3,887</b>	<b>6,819</b>
<b>Drug</b>			
HSTA VB PPO-90/10 Prescription Drug (CVS) bundled with HSTA VB PPO Medical (HMSA)	736	713	1,449
HSTA VB PPO-80/20 Prescription Drug (CVS) bundled with HSTA VB PPO Medical (HMSA)	1,619	2,417	4,036
<b>Drug Total</b>	<b>2,355</b>	<b>3,130</b>	<b>5,485</b>
<b>Dental</b>			
HSTA VB Dental (HDS)	3,124	3,923	7,047
HSTA VB Supplemental Dental (HDS)	73	116	189
<b>Dental Total</b>	<b>3,197</b>	<b>4,039</b>	<b>7,236</b>
<b>Vision</b>			
HSTA VB Vision (VSP) - Stand Alone	173	334	507
HSTA VB Vision (VSP) bundled with Medical	2,932	3,400	6,332
<b>Vision Total</b>	<b>3,105</b>	<b>3,734</b>	<b>6,839</b>

Data Taken 09-20-2024

**Enrollment Counts - EUTF Active**

The table below shows EUTF Active enrollment for period ending 09-30-2024

**Count by Subscribers by Bargaining Unit**

Benefit Plan	00	01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	Total
<b>Medical</b>																	
PPO-90/10 HMSA Medical and Chiro bundled with PPO Drug (CVS)		63	252	23	397	30	364	85	274	122	54	107	30	121	434	25	2,383
PPO-80/20 HMSA Medical and Chiro bundled with PPO Drug (CVS)		183	1,476	154	2,255	164	1,256	301	719	586	210	418	190	653	1,869	92	10,561
PPO-75/25 HMSA Medical and Chiro bundled with PPO Drug (CVS)	1	476	3,099	212	4,070	243	3,202	315	791	1,292	528	948	1,134	950	3,766	253	21,382
HMO HMSA Medical and Chiro bundled with HMO Drug (CVS)		17	75	16	118	11	102	13	43	37	17	35	6	46	127	10	675
HMO Comprehensive Kaiser Medical, Drug and Chiro	1	65	575	90	783	81	513	101	316	161	70	194	76	239	594	54	3,917
HMO Standard Kaiser Medical, Drug and Chiro		178	1,292	87	1,699	101	1,881	147	535	692	216	338	356	328	1,680	102	9,689
Verdegard Supplemental Medical and Drug		15	51	4	132	11	61	10	18	26	15	10	29	23	131	7	543
<b>Medical Total</b>	<b>2</b>	<b>997</b>	<b>6,820</b>	<b>586</b>	<b>9,454</b>	<b>641</b>	<b>7,379</b>	<b>972</b>	<b>2,696</b>	<b>2,916</b>	<b>1,110</b>	<b>2,050</b>	<b>1,821</b>	<b>2,360</b>	<b>8,601</b>	<b>543</b>	<b>202 49,150</b>
<b>Drug</b>																	
PPO-90/10 CVS Prescription Drug bundled with PPO Medical (HMSA)		63	252	23	397	30	364	85	274	122	54	107	30	121	434	25	2,383
PPO-80/20 CVS Prescription Drug bundled with PPO Medical (HMSA)		183	1,476	154	2,255	164	1,256	301	719	586	210	418	190	653	1,869	92	10,561
PPO-75/25 CVS Prescription Drug bundled with PPO Medical (HMSA)	1	476	3,099	212	4,070	243	3,202	315	791	1,292	528	948	1,134	950	3,766	252	21,381
HMO CVS Prescription Drug bundled with HMO Medical (HMSA)		17	75	16	118	11	102	13	43	37	17	35	6	46	127	10	675
<b>Drug Total</b>	<b>1</b>	<b>739</b>	<b>4,902</b>	<b>405</b>	<b>6,840</b>	<b>448</b>	<b>4,924</b>	<b>714</b>	<b>1,827</b>	<b>2,037</b>	<b>809</b>	<b>1,508</b>	<b>1,360</b>	<b>1,770</b>	<b>6,196</b>	<b>379</b>	<b>141 35,000</b>
<b>Dental (HDS)</b>	<b>2</b>	<b>1,070</b>	<b>7,097</b>	<b>619</b>	<b>10,206</b>	<b>703</b>	<b>7,566</b>	<b>1,018</b>	<b>2,756</b>	<b>2,925</b>	<b>1,153</b>	<b>2,150</b>	<b>1,897</b>	<b>2,437</b>	<b>9,005</b>	<b>570</b>	<b>201 51,375</b>
<b>Vision (VSP)</b>	<b>2</b>	<b>1,033</b>	<b>6,879</b>	<b>594</b>	<b>9,821</b>	<b>683</b>	<b>7,151</b>	<b>982</b>	<b>2,599</b>	<b>2,802</b>	<b>1,114</b>	<b>2,061</b>	<b>1,829</b>	<b>2,353</b>	<b>8,712</b>	<b>549</b>	<b>192 49,356</b>
<b>Life Insurance (Securian)</b>	<b>3</b>	<b>1,270</b>	<b>8,083</b>	<b>730</b>	<b>11,898</b>	<b>838</b>	<b>8,045</b>	<b>1,200</b>	<b>3,105</b>	<b>3,250</b>	<b>1,330</b>	<b>2,505</b>	<b>2,101</b>	<b>2,681</b>	<b>10,346</b>	<b>634</b>	<b>247 58,266</b>

**Enrollment Counts - HSTA VB Active**

The table below shows HSTA VB Active enrollment for period ending 09-30-2024

**Count by Subscribers by Bargaining Unit**

Benefit Plan	05	06	Total
<b>Medical</b>			
HSTA VB PPO-90/10 Medical and Chiro (HMSA) bundled with PPO Drug (CVS), Vision (VSP)	736		736
HSTA VB PPO-80/20 Medical and Chiro (HMSA) bundled with PPO Drug (CVS), Vision (VSP)	1,618	1	1,619
HSTA VB HMO Medical, Drug and Chiro (Kaiser) bundled with Vision (VSP)	577		577
<b>Medical Total</b>	<b>2,931</b>	<b>1</b>	<b>2,932</b>
<b>Drug</b>			
HSTA VB PPO-90/10 Prescription Drug (CVS) bundled with HSTA VB PPO Medical (HMSA)	736		736
HSTA VB PPO-80/20 Prescription Drug (CVS) bundled with HSTA VB PPO Medical (HMSA)	1,618	1	1,619
<b>Drug Total</b>	<b>2,354</b>	<b>1</b>	<b>2,355</b>
<b>Dental</b>			
HSTA VB Dental (HDS)	3,122	2	3,124
HSTA VB Supplemental Dental (HDS)	73		73
<b>Dental Total</b>	<b>3,195</b>	<b>2</b>	<b>3,197</b>
<b>Vision</b>			
HSTA VB Vision (VSP) - Stand Alone	172	1	173
HSTA VB Vision (VSP) bundled with Medical	2,931	1	2,932
<b>Vision Total</b>	<b>3,103</b>	<b>2</b>	<b>3,105</b>
<b>Life Insurance (Securian)</b>	<b>3,813</b>	<b>2</b>	<b>3,815</b>

Data Taken 09-20-2024

**Enrollment Counts - Retiree (Summary)**

The table below shows Retiree enrollment for period ending 09-30-2024

**Count by Subscribers and Dependents**

<b>Benefit Plan</b>	<b>Subscribers</b>	<b>Dependents</b>	<b>Total</b>
<b>Medical</b>			
<b>EUTF</b>			
<b>PPO-90/10 Medical (HMSA) - Retiree</b>			
Medicare	34,390	13,342	47,732
Non-Medicare	5,257	4,595	9,852
<b>PPO-90/10 Medical (HMSA) - Retiree Total</b>	<b>39,647</b>	<b>17,937</b>	<b>57,584</b>
<b>HMO Medical (Kaiser), Drug (Kaiser) - Retiree</b>			
Medicare	6,979	2,380	9,359
Non-Medicare	1,072	853	1,925
<b>HMO Medical (Kaiser), Drug (Kaiser) - Retiree Total</b>	<b>8,051</b>	<b>3,233</b>	<b>11,284</b>
<b>PPO Medical - Medicare Advantage (Humana) - Retiree</b>			
Medicare	70	9	79
<b>PPO Medical - Medicare Advantage (Humana) - Retiree Total</b>	<b>70</b>	<b>9</b>	<b>79</b>
<b>Out-of-State Plan - Retiree</b>			
Medicare	188	60	248
Non-Medicare	6	3	9
<b>Out-of-State Plan - Retiree Total</b>	<b>194</b>	<b>63</b>	<b>257</b>
<b>EUTF Total</b>	<b>47,962</b>	<b>21,242</b>	<b>69,204</b>
<b>HSTA VB</b>			
<b>HSTA VB PPO-90/10 Medical and Chiro (HMSA) bundled with PPO Drug (SilverScript or CVS), Vision (VSP) - Retiree</b>			
Medicare	1,934	862	2,796
Non-Medicare	5	0	5
<b>HSTA VB PPO-90/10 Medical and Chiro (HMSA) bundled with PPO Drug (SilverScript or CVS), Vision (VSP) - Retiree Total</b>	<b>1,939</b>	<b>862</b>	<b>2,801</b>
<b>HSTA VB PPO-90/10 Medical and Chiro (HMSA) bundled with Vision (VSP) - Retiree</b>			
Medicare	12	5	17
<b>HSTA VB PPO-90/10 Medical and Chiro (HMSA) bundled with Vision (VSP) - Retiree Total</b>	<b>12</b>	<b>5</b>	<b>17</b>
<b>HSTA VB HMO Medical, Drug and Chiro (Kaiser) bundled with Vision (VSP) - Retiree</b>			
Medicare	207	65	272
Non-Medicare	4	1	5
<b>HSTA VB HMO Medical, Drug and Chiro (Kaiser) bundled with Vision (VSP) - Retiree Total</b>	<b>211</b>	<b>66</b>	<b>277</b>
<b>HSTA VB Out-of-State Plan - Retiree</b>			
Medicare	2	2	4
<b>HSTA VB Out-of-State Plan - Retiree Total</b>	<b>2</b>	<b>2</b>	<b>4</b>
<b>HSTA VB Total</b>	<b>2,164</b>	<b>935</b>	<b>3,099</b>
<b>Medical Total</b>	<b>50,126</b>	<b>22,177</b>	<b>72,303</b>
<b>Drug</b>			
<b>EUTF</b>			
PPO Drug (SilverScript) - Medicare	33,002	12,666	45,668
PPO Prescription Drug (CVS) - Non-Medicare	5,573	4,714	10,287
<b>EUTF Total</b>	<b>38,575</b>	<b>17,380</b>	<b>55,955</b>
<b>HSTA VB</b>			
HSTA VB PPO-90/10 Prescription Drug (SilverScript) bundled with HSTA VB PPO Medical (HMSA) - Medicare	1,932	861	2,793
HSTA VB PPO-90/10 Prescription Drug (CVS) bundled with HSTA VB PPO Medical (HMSA) - Non-Medicare	6	0	6
<b>HSTA VB Total</b>	<b>1,938</b>	<b>861</b>	<b>2,799</b>
<b>Drug Total</b>	<b>40,513</b>	<b>18,241</b>	<b>58,754</b>
<b>Dental</b>			
Dental (HDS)	48,851	22,176	71,027
HSTA VB Dental (HDS) - Retiree	2,163	940	3,103
<b>Dental Total</b>	<b>51,014</b>	<b>23,116</b>	<b>74,130</b>
<b>Vision</b>			
Vision (VSP)	48,772	22,157	70,929
HSTA VB Vision (VSP) bundled with Medical - Retiree	2,165	933	3,098
<b>Vision Total</b>	<b>50,937</b>	<b>23,090</b>	<b>74,027</b>
<b>Life</b>			
EUTF Securian Life Insurance - Retiree	45,679	0	45,679
HSTA VB Securian Life Insurance - Retiree	2,126	0	2,126
<b>Life Total</b>	<b>47,805</b>	<b>0</b>	<b>47,805</b>

**Enrollment Counts - EUTF Retiree**

The table below shows EUTF Retiree enrollment for period ending 09-30-2024

**Count by Subscribers by Enrollment Coverage**

Benefit Plan	Self	Two-Party	Family	Total
<b>Medical</b>				
<b>PPO-90/10 Medical (HMSA) - Retiree</b>				
Medicare	21,564	12,384	442	34,390
Non-Medicare	2,039	2,292	926	5,257
<b>PPO-90/10 Medical (HMSA) - Retiree Total</b>	<b>23,603</b>	<b>14,676</b>	<b>1,368</b>	<b>39,647</b>
<b>HMO Medical (Kaiser), Drug (Kaiser) - Retiree</b>				
Medicare	4,684	2,221	74	6,979
Non-Medicare	458	452	162	1,072
<b>HMO Medical (Kaiser), Drug (Kaiser) - Retiree Total</b>	<b>5,142</b>	<b>2,673</b>	<b>236</b>	<b>8,051</b>
<b>PPO Medical - Medicare Advantage (Humana) - Retiree</b>				
Medicare	61	9		70
<b>PPO Medical - Medicare Advantage (Humana) - Retiree Total</b>	<b>61</b>	<b>9</b>		<b>70</b>
<b>Out-of-State Plan - Retiree</b>				
Medicare	131	54	3	188
Non-Medicare	3	3		6
<b>Out-of-State Plan - Retiree Total</b>	<b>134</b>	<b>57</b>	<b>3</b>	<b>194</b>
<b>Medical Total</b>	<b>28,940</b>	<b>17,415</b>	<b>1,607</b>	<b>47,962</b>
<b>Drug</b>				
<b>PPO Drug (SilverScript) - Medicare</b>				
	20,804	11,797	401	33,002
<b>PPO Prescription Drug (CVS) - Non-Medicare</b>				
	2,251	2,384	938	5,573
<b>Drug Total</b>	<b>23,055</b>	<b>14,181</b>	<b>1,339</b>	<b>38,575</b>
<b>Dental (HDS)</b>	<b>28,910</b>	<b>18,320</b>	<b>1,621</b>	<b>48,851</b>
<b>Vision (VSP)</b>	<b>28,866</b>	<b>18,270</b>	<b>1,636</b>	<b>48,772</b>
<b>Life Insurance (Securian)</b>				<b>45,679</b>

**Count by Subscribers and Dependents**

Benefit Plan	Subscribers	Dependents	Total
<b>Medical</b>			
<b>PPO-90/10 Medical (HMSA) - Retiree</b>			
Medicare	34,390	13,342	47,732
Non-Medicare	5,257	4,595	9,852
<b>PPO-90/10 Medical (HMSA) - Retiree Total</b>	<b>39,647</b>	<b>17,937</b>	<b>57,584</b>
<b>HMO Medical (Kaiser), Drug (Kaiser) - Retiree</b>			
Medicare	6,979	2,380	9,359
Non-Medicare	1,072	853	1,925
<b>HMO Medical (Kaiser), Drug (Kaiser) - Retiree Total</b>	<b>8,051</b>	<b>3,233</b>	<b>11,284</b>
<b>PPO Medical - Medicare Advantage (Humana) - Retiree</b>			
Medicare	70	9	79
<b>PPO Medical - Medicare Advantage (Humana) - Retiree Total</b>	<b>70</b>	<b>9</b>	<b>79</b>
<b>Out-of-State Plan - Retiree</b>			
Medicare	188	60	248
Non-Medicare	6	3	9
<b>Out-of-State Plan - Retiree Total</b>	<b>194</b>	<b>63</b>	<b>257</b>
<b>Medical Total</b>	<b>47,962</b>	<b>21,242</b>	<b>69,204</b>
<b>Drug</b>			
<b>PPO Drug (SilverScript) - Medicare</b>			
	33,002	12,666	45,668
<b>PPO Prescription Drug (CVS) - Non-Medicare</b>			
	5,573	4,714	10,287
<b>Drug Total</b>	<b>38,575</b>	<b>17,380</b>	<b>55,955</b>
<b>Dental (HDS)</b>	<b>48,851</b>	<b>22,176</b>	<b>71,027</b>
<b>Vision (VSP)</b>	<b>48,772</b>	<b>22,157</b>	<b>70,929</b>

**Enrollment Counts - HSTA VB Retiree**

The table below shows HSTA VB Retiree enrollment for period ending 09-30-2024

**Count by Subscribers by Enrollment Coverage**

Benefit Plan	Self	Two-Party	Family	Total
<b>Medical</b>				
HSTA VB PPO-90/10 Medical and Chiro (HMSA) bundled with PPO Drug (SilverScript or CVS), Vision (VSP) - Retiree				
Medicare	1,089	831	14	1,934
Non-Medicare	5			5
<b>HSTA VB PPO-90/10 Medical and Chiro (HMSA) bundled with PPO Drug (SilverScript or CVS), Vision (VSP) - Retiree Total</b>	<b>1,094</b>	<b>831</b>	<b>14</b>	<b>1,939</b>
HSTA VB PPO-90/10 Medical and Chiro (HMSA) bundled with Vision (VSP) - Retiree				
Medicare	7	5		12
<b>HSTA VB PPO-90/10 Medical and Chiro (HMSA) bundled with Vision (VSP) - Retiree Total</b>	<b>7</b>	<b>5</b>		<b>12</b>
HSTA VB HMO Medical, Drug and Chiro (Kaiser) bundled with Vision (VSP) - Retiree				
Medicare	143	63	1	207
Non-Medicare	3	1		4
<b>HSTA VB HMO Medical, Drug and Chiro (Kaiser) bundled with Vision (VSP) - Retiree Total</b>	<b>146</b>	<b>64</b>	<b>1</b>	<b>211</b>
HSTA VB Out-of-State Plan - Retiree				
Medicare		2		2
<b>HSTA VB Out-of-State Plan - Retiree Total</b>		<b>2</b>		<b>2</b>
<b>Medical Total</b>	<b>1,247</b>	<b>902</b>	<b>15</b>	<b>2,164</b>
<b>Drug</b>				
HSTA VB PPO-90/10 Prescription Drug (SilverScript) bundled with HSTA VB PPO Medical (HMSA) - Medicare	1,088	830	14	1,932
HSTA VB PPO-90/10 Prescription Drug (CVS) bundled with HSTA VB PPO Medical (HMSA) - Non-Medicare	6			6
<b>Drug Total</b>	<b>1,094</b>	<b>830</b>	<b>14</b>	<b>1,938</b>
<b>Dental (HDS)</b>	<b>1,240</b>	<b>909</b>	<b>14</b>	<b>2,163</b>
<b>Vision (VSP)</b>	<b>1,248</b>	<b>904</b>	<b>13</b>	<b>2,165</b>
<b>Life Insurance (Securian)</b>	<b>2,126</b>			<b>2,126</b>

**Count by Subscribers and Dependents**

Benefit Plan	Subscribers	Dependents	Total
<b>Medical</b>			
HSTA VB PPO-90/10 Medical and Chiro (HMSA) bundled with PPO Drug (SilverScript or CVS), Vision (VSP) - Retiree			
Medicare	1,934	862	2,796
Non-Medicare	5	0	5
<b>HSTA VB PPO-90/10 Medical and Chiro (HMSA) bundled with PPO Drug (SilverScript or CVS), Vision (VSP) - Retiree Total</b>	<b>1,939</b>	<b>862</b>	<b>2,801</b>
HSTA VB PPO-90/10 Medical and Chiro (HMSA) bundled with Vision (VSP) - Retiree			
Medicare	12	5	17
<b>HSTA VB PPO-90/10 Medical and Chiro (HMSA) bundled with Vision (VSP) - Retiree Total</b>	<b>12</b>	<b>5</b>	<b>17</b>
HSTA VB HMO Medical, Drug and Chiro (Kaiser) bundled with Vision (VSP) - Retiree			
Medicare	207	65	272
Non-Medicare	4	1	5
<b>HSTA VB HMO Medical, Drug and Chiro (Kaiser) bundled with Vision (VSP) - Retiree Total</b>	<b>211</b>	<b>66</b>	<b>277</b>
HSTA VB Out-of-State Plan - Retiree			
Medicare	2	2	4
<b>HSTA VB Out-of-State Plan - Retiree Total</b>	<b>2</b>	<b>2</b>	<b>4</b>
<b>Medical Total</b>	<b>2,164</b>	<b>935</b>	<b>3,099</b>
<b>Drug</b>			
HSTA VB PPO-90/10 Prescription Drug (SilverScript) bundled with HSTA VB PPO Medical (HMSA) - Medicare	1,932	861	2,793
HSTA VB PPO-90/10 Prescription Drug (CVS) bundled with HSTA VB PPO Medical (HMSA) - Non-Medicare	6	0	6
<b>Drug Total</b>	<b>1,938</b>	<b>861</b>	<b>2,799</b>
<b>Dental (HDS)</b>	<b>2,163</b>	<b>940</b>	<b>3,103</b>
<b>Vision (VSP)</b>	<b>2,165</b>	<b>933</b>	<b>3,098</b>

Data Taken 09-20-2024

## Enrollment Counts - All Subscribers

The table below shows All Subscriber enrollments for period ending 09-30-2024

Employer	Medical	Drug	Dental	Vision	Life
<b>City and County of Honolulu</b>					
Active	7,217	5,355	7,550	7,304	8,663
Retiree (Medicare)	6,017	4,528			
Retiree (Non-Medicare)	1,655	1,418	7,781	7,803	6,748
<b>City and County of Honolulu Total</b>	<b>14,889</b>	<b>11,301</b>	<b>15,331</b>	<b>15,107</b>	<b>15,411</b>
<b>Honolulu Board of Water Supply</b>					
Active	460	332	476	459	530
Retiree (Medicare)	474	381			
Retiree (Non-Medicare)	83	78	562	567	485
<b>Honolulu Board of Water Supply Total</b>	<b>1,017</b>	<b>791</b>	<b>1,038</b>	<b>1,026</b>	<b>1,015</b>
<b>Honolulu Authority for Rapid Transportation</b>					
Active	35	26	36	37	37
Retiree (Medicare)	17	15			
Retiree (Non-Medicare)	4	1	22	22	24
<b>Honolulu Authority for Rapid Transportation Total</b>	<b>56</b>	<b>42</b>	<b>58</b>	<b>59</b>	<b>61</b>
<b>County of Hawaii</b>					
Active	2,218	1,713	2,278	2,204	2,661
Retiree (Medicare)	1,354	1,208			
Retiree (Non-Medicare)	413	392	1,782	1,784	1,611
<b>County of Hawaii Total</b>	<b>3,985</b>	<b>3,313</b>	<b>4,060</b>	<b>3,988</b>	<b>4,272</b>
<b>Hawaii Dept of Water</b>					
Active	120	95	126	124	147
Retiree (Medicare)	105	91			
Retiree (Non-Medicare)	14	15	122	122	115
<b>Hawaii Dept of Water Total</b>	<b>239</b>	<b>201</b>	<b>248</b>	<b>246</b>	<b>262</b>
<b>County of Kauai</b>					
Active	1,019	886	1,058	1,033	1,200
Retiree (Medicare)	696	650			
Retiree (Non-Medicare)	181	182	877	893	819
<b>County of Kauai Total</b>	<b>1,896</b>	<b>1,718</b>	<b>1,935</b>	<b>1,926</b>	<b>2,019</b>
<b>Kauai Department of Water</b>					
Active	62	54	70	68	81
Retiree (Medicare)	45	40			
Retiree (Non-Medicare)	11	13	54	54	58
<b>Kauai Department of Water Total</b>	<b>118</b>	<b>107</b>	<b>124</b>	<b>122</b>	<b>139</b>
<b>County of Maui</b>					
Active	2,170	1,077	2,274	2,200	2,573
Retiree (Medicare)	1,320	832			
Retiree (Non-Medicare)	469	313	1,817	1,821	1,676
<b>County of Maui Total</b>	<b>3,959</b>	<b>2,222</b>	<b>4,091</b>	<b>4,021</b>	<b>4,249</b>
<b>State of Hawaii</b>					
Active	37,921	27,251	39,776	38,178	45,012
Retiree (Medicare)	33,676	27,130			
Retiree (Non-Medicare)	3,496	3,153	37,896	37,770	36,169
<b>State of Hawaii Total</b>	<b>75,093</b>	<b>57,534</b>	<b>77,672</b>	<b>75,948</b>	<b>81,181</b>
<b>Hawaii Public Charter Schools</b>					
Active	860	566	928	854	1,177
Retiree (Medicare)	78	59			
Retiree (Non-Medicare)	18	14	101	101	100
<b>Hawaii Public Charter Schools Total</b>	<b>956</b>	<b>639</b>	<b>1,029</b>	<b>955</b>	<b>1,277</b>
<b>Grand Total</b>	<b>102,208</b>	<b>77,868</b>	<b>105,586</b>	<b>103,398</b>	<b>109,886</b>

Data Taken 09-20-2024





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**STATE OF HAWAII'  
HAWAII EMPLOYER-UNION HEALTH BENEFITS TRUST FUND**

201 MERCHANT STREET, SUITE 1700  
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DONNA A. TONAKI

October 11, 2024

TO: Derek Mizuno  
Administrator

FROM: Katie Matsushima  
Eligibility Specialist

SUBJECT: September –October 2024 Eligibility and Enrollment Report

This report covers the time period from September 14 – October 11, 2024. Additional details will be provided upon request.

**Audits Currently in Progress (On hold):**

• Verify Retiree Eligibility and Tiers

In Progress

- EUTF will review **273** retirees with ERS to determine correct tier.

Completed

- Letters to **124** retirees whose tiers are being impacted (e.g. 50% to 75%) were mailed on Friday, October 8, 2021. Tier change was effective January 1, 2022. Retroactive refunds of overpayments will be made but no retroactive collections of underpayments will be required.

**Point in Time Reconciliation Audits between:**

*Please note, this performance guarantee (PG) was waived for the last rating period due to the implementation of the BAS. Point in Time Reconciliation Audits for SilverScript have resumed in May 2024. Point in Time Reconciliation Audits for HMSA have resumed in October 2024 and CVS and Kaiser will resume in November and December 2024. The initial audit will be to reconcile enrollment following the BAS implementation and will not be subject to PG.*

**Prior Reporting Year Results:**

- CVS/SilverScript and EUTF enrollment- Accuracy **99.41%** (Previous Accuracy: N/A)
- Kaiser and EUTF enrollment- Accuracy **99.99%** (Previous Accuracy: **99.72%**)
- HMA and EUTF enrollment- Accuracy **100%** (Previous Accuracy: **91.77%**)
- HDS and EUTF enrollment- Accuracy **100%** (Previous Accuracy: **100%**)
- VSP and EUTF enrollment- Accuracy **100%** (Previous Accuracy: **99.99%**)
- HMSA and EUTF enrollment- Accuracy **99.99%** (Previous Accuracy: **99.99%**)

**EUTF's Mission:** We care for the health and well being of our beneficiaries by striving to provide quality benefit plans that are affordable, reliable, and meet their changing needs. We provide informed service that is excellent, courteous, and compassionate.

**Recurring Audits:**

The Unreported Divorce Audits have resumed as of December 2023. The remaining recurring audits are set to resume in 2024 (refer to projected start dates noted in Current Status).

Description	Active/ Retiree	Initial Terms	Terms for Fiscal Year 24/25	Current Status	Initial Cleanup Date	Frequency
Unreported Divorce Audit	Active	45 & 5 step- children	9	Restarted 2023	6/30/2017	Monthly
Unreported Divorce Audit	Retiree	32 former spouses	1	Restarted 2023	4/30/2018	Monthly
Adult Disabled Recertification	Active	10	12	Completed July 2024	6/30/2017	Every 7 years (2024)
Adult Disabled Recertification	Retiree	N/A	--	Restarted August 2024	2015 by previous Administrator	Every 7 years (2022)
Surviving Spouse/ Surviving Child	N/A	25	--	Restarting Q4 of 2024	11/30/2017 and 2/28/2018	Every other month
Termination of Life Insurance Enrollment for Terminated Employees	Active	2,073	--	Restarting Q4 of 2024	3/27/2019 (retroactive to 3/31/2018)	Annually
Medicare Savings Program	Retirees and Dependents	36	--	Restarting Q4 of 2024	12/31/2018	Monthly
Spouses with Self and Two-Party Plans	Active and Retiree	14	--	Restarting Q1 of 2025	3/31/2018	Annually
Domestic Partner Recertification	Active	167	--	Restarting Q1 of 2025	12/31/2018	Every 2 years (2022)
Domestic Partner Recertification	Retiree	20	--	Restarting Q1 of 2025	8/31/2017	Every 2 years (2022)
Out-of-State Unreported Deaths	Retirees and Dependents	48	--	Restarting Q1 of 2025	4/5/2018 - (Terminations retroactive to date of death)	Every other month
Dependent Children Non-ACA Eligibility (i.e. not married)	Active and Retiree	19	--	Restarting Q1 of 2025	4/30/2021	Every other month



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**ASSISTANT ADMINISTRATOR**  
DONNA A. TONAKI

October 11, 2024

TO: EUTF Board of Trustees  
FROM: Marvin Judd, Program Specialist, for Melissa Tom, Health and Wellness Specialist  
SUBJECT: September – October 2024 Health and Wellness Specialist Report

This report covers the period September 14, 2024 – October 11, 2024

**A. Worksite Wellness**

1. One Education Workshop Webinar was offered this reporting period: “Hearty Advice”, hosted by HMSA. Session recordings are available on the Health and Wellness website.
2. An onsite Health and Wellness Fair was held during the last reporting period. The Department of Labor and Industrial Relations (DLIR) held a Health and Wellness Fair on September 13. EUTF and carriers had resource booths and provided services such as biometrics and flu vaccinations. 170 DLIR employees participated in the event.
3. Wellness Program Activities for October were sent to HROs and Wellness Champions for distribution to employees. The announcement encouraged members to Stay Connected, by registering for activities such as the Kaiser Rewards and attending wellness webinars hosted by Kaiser, HMSA, and Securian (attached).

**B. Preventive Health**

1. HMSA launched their Blood Pressure campaign in September. Direct mail postcards, emails and a blood pressure guides were distributed to members, notifying members of the various resources available to them (attached).

**C. Chronic Disease Management**

1. Virta monthly Health reports were received by HMSA. There were 158 total enrolled members in the program since its January 2024 launch. Early initial results in A1c, weight, and drug utilization reduction are positive. (attached)

Attachments

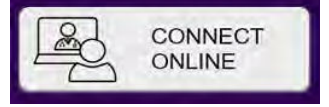


# EUTF WELLNESS PROGRAM October 2024

October  
Healthy Aging

Take time for your well-being!

[HEALTH AND WELLNESS GOALS](#) Stay Connected! Visit our [Virtual Wellness Fair](#) and click on the *Connect Online* wellness station to set-up your health carrier online accounts & access EUTF's Member Portal.



## WEBINARS- Click titles below to register!

**I learned how to make and stick to a budget."**

- Session attendee



[Personal Finance](#): Personal finance strategies to help employees identify money challenges, set goals, and take action. Discover the financial basics you need to know. Join in on October 16, 11:30 AM to 12:30 PM.

## HYPERTENSION EXPLAINED

LEARN SIMPLE WAYS TO PREVENT AND CONTROL HIGH BLOOD PRESSURE.

[Hypertension Explained](#): Learn about what your blood pressure numbers mean, and the health concerns you may have if they're high. Learn how you can prevent and control high blood pressure. Join in on October 24, 11:30 AM to 12:15 PM.

### October Health Education Session

Enter to win a \$100 VISA gift card\*



[Why Sleep Matters](#): Learn simple and effective tools to improve your ability to rest, relax, and sleep. Join in on October 24, 11:30 AM to 12:15 PM.

## CAMPAIGNS & INCENTIVES- Click on Campaigns & Incentives for more info!



[Kaiser Rewards](#) Ready to make healthy changes? Earn up to \$100 in rewards by completing digital health programs to support your wellness goals. Do a simple online survey and earn \$25 in rewards. With the Total Health Assessment. The take up to 3 online health programs for up to \$75 in rewards.



[Win Big in 2024 with HMSA!](#) If you visit your PCP for an in-person annual evaluation and log in to My Account, you'll be entered in a drawing for a chance to win a \$1,500 Visa gift card. For more information about the annual evaluation, see your plan's Guide to Benefits at [hmsa.com/eutf](https://hmsa.com/eutf).

Host a Worksite "Group Watch"

Setup a group watch, simply reserve your conference room and invite your colleagues. After the event, email the [Group Watch Form](#) to the webinar host to be entered in any prize drawings offered.

Webinars on-demand

Unable to attend or want to re-watch a previous webinar? Most [Wellness Webinars](#) are recorded and available for the year!

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Contact us at [eutfwellness@hawaii.gov](mailto:eutfwellness@hawaii.gov)



4000-1089150 2024 EUTF Blood Pressure Awareness Campaign - Email  
R2

Subject line: Blood Pressure Guide for EUTF HMSA members

At HMSA, we want to help you take control of your health and well-being so you can live your best life.

One in three Hawaii adults has high blood pressure and many don't know they have it. A blood pressure test during your annual visit to the doctor can reveal whether your blood pressure is too high. If your blood pressure changes significantly between annual visits, you should see your doctor as soon as possible.

To find out if you're at risk for high blood pressure, visit [hmsa.com/bloodpressure](https://hmsa.com/bloodpressure) [LINK]. You'll find useful information on preventing or managing high blood pressure, including a free guide, action plan, healthy lifestyle tips, recipes, and more. Download our [blood pressure guide](#) or visit our [EUTF member resources](#) page.

We also have a team of health coaches, educators, and other health care professionals who can provide you with guidance and support at no cost. To learn more, call [HMSA Health and Well-being Support](#) at 1 (855) 329-5461 Monday through Friday, 8 a.m. to 5 p.m. You can also enroll online for our [Condition Care Program](#) for hypertension.

You don't have to tackle high blood pressure on your own. HMSA is here with you.



# Blood Pressure Guide

For EUTF HMSA Members  
2024-25



An Independent Licensee of the Blue Cross and Blue Shield Association

# HIGHLIGHTS

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# A guide to understanding blood pressure

We want you to live a full, healthy life in your working years and through retirement. An important way to gain better well-being is to use the health plan benefits you're already paying for and to choose a healthy lifestyle. We hope this guide motivates you to use your benefits to achieve your best health!

## Did you know?

High blood pressure doesn't just happen to older adults. About one in four men and nearly one in five women ages 35 to 44 has high blood pressure.



One in three adults in Hawaii has high blood pressure and some don't even know it. Having high blood pressure increases your risk of a heart attack, stroke, heart failure, and other complications:

- ✓ Seven in 10 people who have a first heart attack have high blood pressure.
- ✓ Three in four people who have a stroke have high blood pressure.
- ✓ Three in four people who have congestive heart failure have high blood pressure.

## Knowledge is power

Take the quiz to test your knowledge.

### True or False?

1. If you feel fine, you don't have to worry about high blood pressure.
2. If high blood pressure runs in your family, there's nothing you can do to prevent it.
3. If you don't add salt to your food at the table, you're in control of your sodium intake and blood pressure.
4. Your primary care provider (PCP) checks your blood pressure when you visit them, so you don't need to check it at home.
5. If you've maintained lower readings despite a high blood pressure diagnosis, you can stop taking your medication.
6. Your EUTF HMSA medical benefit includes a no-cost annual preventive exam with an in-network primary care provider.

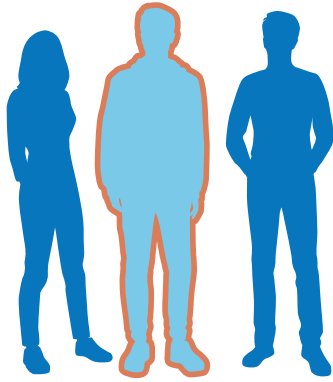
### Yes or No?

Do you know your blood pressure measurement? Have you scheduled your preventive health exam with your PCP this year?

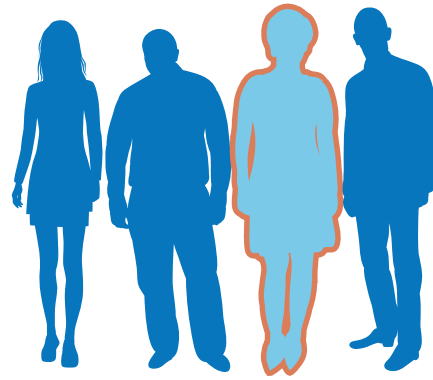
Statements 1-5 are false, while statement 6 is true.



About one in three adults over the age of 20 has elevated or high blood pressure.



Only one in four adults with high blood pressure has their condition under control.



### What's high blood pressure?

High blood pressure, also known as hypertension, is when the force of blood flowing through your blood vessels is consistently too high.

### Reasons to know your blood pressure

One in three Hawaii adults has high blood pressure and many don't know they have it. Most of the time, there are no obvious symptoms. Certain physical traits and lifestyle choices can put you at a greater risk for high blood pressure.

Left untreated, high blood pressure can damage your circulatory system, leading to heart attack, stroke, and other health conditions.

### Some health risks of high blood pressure



• Blindness



• Heart attack and heart disease



• Kidney disease



• Stroke

## There's good news!

There are many things you can do to keep your blood pressure within a healthy range.

While there generally isn't a single cause of high blood pressure, reducing risk factors such as smoking, poor diet, being inactive, overweight, or obese, or having high levels of stress can have a positive impact.

The best way to protect yourself is to work with your PCP and make healthy changes to your lifestyle.

## Do you know your blood pressure?

A blood pressure reading of more than 120/80 means that there's too much pressure on the walls of your blood vessels. Use this chart to understand your numbers.

Blood pressure category	Systolic mm Hg (upper number)	Diastolic mm Hg (lower number)
Normal	Less than 120	Less than 80
Elevated	120-129	Less than 80
High blood pressure (hypertension) stage 1	130-139	80-89
High blood pressure stage 2	140 or higher	90 or higher
Hypertensive crisis	Higher than 180	Higher than 120

## Talk with your doctor

- As an EUTF HMSA member, you're highly encouraged to visit your PCP at least once a year for a preventive checkup.
- This annual visit is a benefit available to you at no cost when seeing an in-network provider.
- If you have a PCP, make an appointment for an annual checkup to assess your overall health.
- If you don't have a PCP go to [hmsa.com/eutf](https://hmsa.com/eutf) and click Find a Doctor. Or call (808) 948-6499 or 1 (800) 776-4672.



# Blood Pressure Benefit Worksheet



These health plan benefits are available to you at no cost:

**Annual preventive checkup.**  
This annual checkup with your PCP will help assess your overall health. When you see a provider in the HMSA network, the checkup is available at no cost. If you don't have a PCP, go to [hmsa.com/eutf](https://hmsa.com/eutf) and click Find a Doctor. Or call (808) 948-6499 or 1 (800) 776-4672.

**A dedicated health care team.**  
A team of health care professionals, registered dietitians, and health coaches can supplement the care you receive from your PCP. To learn more, call 1 (855) 329-5461, option 1, Monday through Friday, 8 a.m.-5 p.m. Or visit [hmsa.com/well-being](https://hmsa.com/well-being). Click Health and Well-being Support then Hypertension.

**Personalized care.**  
If you've been recently diagnosed with hypertension and have other chronic conditions, an HMSA representative from our health and well-being support team can help you better understand the benefits, programs, and health coaching that are available to EUTF members. Connect with an HMSA health coach to set nutrition, exercise, stress, and weight management goals customized just for you. Visit [hmsa.com/well-being](https://hmsa.com/well-being) and click on Health Coaching. Or call 1 (855) 329-5461, Monday through Friday, 8 a.m.-5 p.m.

**Referrals to behavioral health care providers.**  
Alleviate the stress of managing your health conditions. For behavioral health care providers, resources, and services, call (808) 695-7700 or 1 (855) 856-0578.

**Fun and interactive health education workshops.**  
Participate in our fitness, nutrition, stress management, or other health and well-being workshops at no cost. To find a workshop, go to [hmsa.com/healtheducation](https://hmsa.com/healtheducation). To register, call 1 (855) 329-5461, Monday through Friday, 8 a.m.-5 p.m.

I plan to use one or more of these services by \_\_\_\_\_ date

# How to lower your blood pressure



Work with your PCP to determine the best treatment for you. Together, you can set goals to improve your blood pressure.

A healthy lifestyle is important to managing your blood pressure. A healthy lifestyle, which affects your physical and mental well-being, includes:

- Staying physically active.
- Eating a healthy diet.
- Maintaining a healthy weight.
- Being tobacco-free.
- Limiting alcohol.
- Managing stress.
- Having regular medical checkups with blood pressure checks.

## Shake it up and move regularly!



Exercise can help prevent and lessen the effects of health conditions such as:

- Arthritis
- Diabetes
- Excess weight
- High blood pressure
- High cholesterol
- Stress



Mindful movement such as yoga and tai chi can:

- Improve mood
- Manage depression
- Reduce stress and anxiety



Before you begin an exercise program, check with your PCP to determine what type of exercise and how much of it is safe for you.

- Choose activities that are fun.
- Exercise with a friend for support.
- Wear comfortable shoes and clothes.



Engage in moderate intensity exercise for 30 minutes or more at least five days a week.

- A moderately intense workout increases your heart rate and causes you to breathe harder, but you still should be able to talk comfortably.
- Try an exercise such as walking, cycling on flat terrain, water aerobics, or gardening.

For more information on physical activity guidelines for adults, check out [cdc.gov](https://www.cdc.gov) and search for physical activity basics for adults.

## DASH to good health

Want to stop hypertension the healthy way?

There's a diet for that. The Dietary Approaches to Stop Hypertension Diet (DASH) was created by the National Institutes of Health. It's a heart-healthy diet that doesn't require any fancy recipes or special foods.



To follow DASH, the American Heart Association recommends you focus on eating:

- A variety of fruits and vegetables.
- Whole grains.
- Low-fat dairy products.
- Skinless poultry and fish.
- Nuts and legumes.
- Non-tropical vegetable oils.
- Foods low in saturated fat, trans fat, and sodium, and fewer sugar-sweetened beverages.
- The leanest possible cuts of red meat.

## Eat the rainbow

A colorful plate is a healthy plate. Luckily, there's a rainbow of fruits and vegetables so you can get your five servings daily, three of vegetables and two of fruits. Fresh produce is best, but if you can't go to the farmers market, frozen is a good second choice. Canned in water or in their own juices is a good third choice.

### DASH Chicken Quinoa Bowl with Olives & Cucumber

- |   |                                       |
|---|---------------------------------------|
| 1 lb. boneless, skinless chicken breasts, trimmed | ½ tsp. ground cumin                   |
| ¼ tsp. salt                                       | ¼ tsp. crushed red pepper (optional)  |
| ¼ tsp. ground pepper                              | 2 cups cooked quinoa                  |
| 1 7-ounce jar roasted red peppers, rinsed         | ¼ cup pitted Kalamata olives, chopped |
| ¼ cup slivered almonds                            | ¼ cup finely chopped red onion        |
| 4 Tbsp. extra-virgin olive oil, divided           | 1 cup diced cucumber                  |
| 1 small clove garlic, crushed                     | ¼ cup crumbled feta cheese            |
| 1 tsp. paprika                                    | 2 Tbsp. finely chopped fresh parsley  |



Position a rack in upper third of oven; preheat broiler to high. Line a rimmed baking sheet with foil. Sprinkle chicken with salt and pepper and place on the prepared baking sheet. Broil, turning once, until an instant-read thermometer inserted in the thickest part reads 165 F, 14 to 18 minutes. Transfer the chicken to a clean cutting board and slice or shred. Meanwhile, place peppers, almonds,

2 tablespoons oil, garlic, paprika, cumin and crushed red pepper (if using) in a mini food processor. Puree until fairly smooth. Combine quinoa, olives, red onion, and the remaining 2 tablespoons oil in a medium bowl. To serve, divide the quinoa mixture among four bowls and top with equal amounts of cucumber, chicken, and the red pepper sauce. Sprinkle with feta and parsley.

## Keep a healthy weight

Obesity rates have been rising worldwide for the past decade. Excess weight is a common precursor to many health conditions, including high blood pressure and heart disease. In fact, when you gain weight, your blood pressure rises. Losing just 10 pounds can help bring it down.

### Steps to weight loss



1. Calculate your BMI (page 10) and waist circumference.



2. Check with your PCP to see whether you need to lose weight.



3. If so, set a goal to lose 10% of your current weight.



4. Create a heart-healthy meal plan and stick to it.



5. Elevate your heart rate with 30 minutes of moderate exercise at least five times per week.

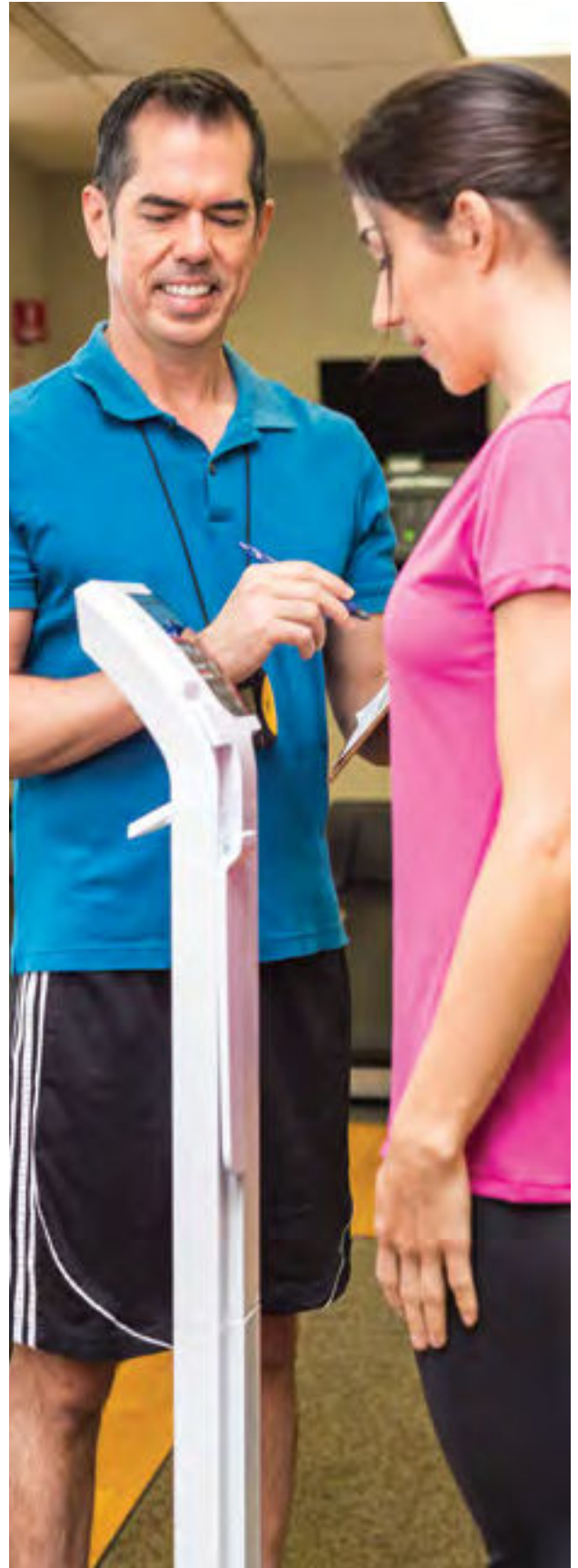


6. Break exercise into chunks. Try 10-15 minutes of brisk walking or stair climbing two to three times a day.



7. Check in once a week to see how you're doing.

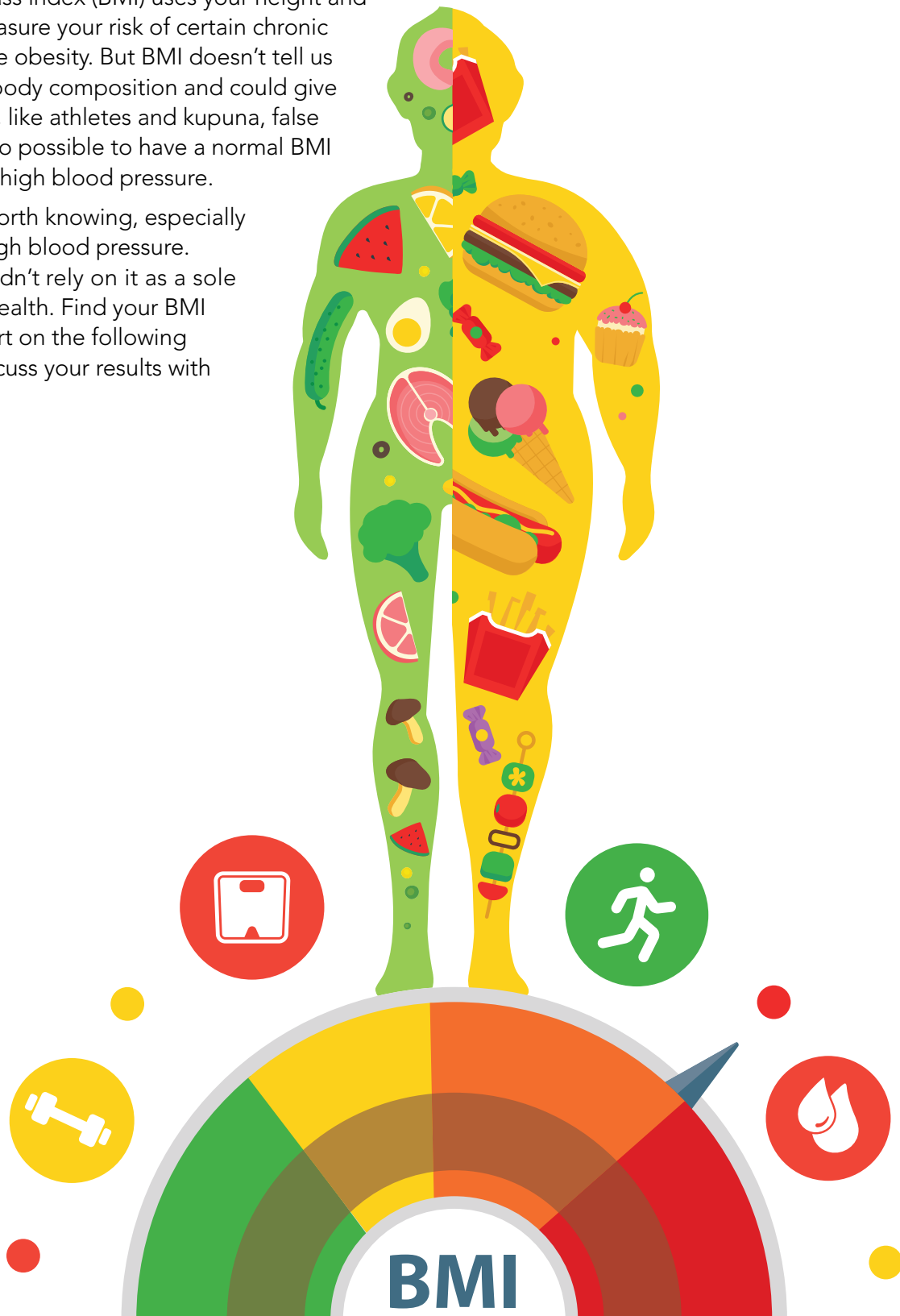
Remember that healthy weight loss takes time. Losing one to two pounds per week is the recommended way to take it off and keep it off. Talk to your PCP before starting a new diet or exercise plan.



## What's BMI got to do with it?

Your body mass index (BMI) uses your height and weight to measure your risk of certain chronic conditions like obesity. But BMI doesn't tell us much about body composition and could give some people, like athletes and kupuna, false results. It's also possible to have a normal BMI and still have high blood pressure.

Your BMI is worth knowing, especially if you have high blood pressure. But you shouldn't rely on it as a sole indicator of health. Find your BMI using the chart on the following page and discuss your results with your PCP.



# Body Mass Index (BMI)

HEIGHT	HEALTHY					OVERWEIGHT					OBESITY					EXTREME OBESITY																
	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50
4'10"	91	96	100	105	110	115	119	124	129	134	138	143	148	153	158	162	167	172	177	181	186	191	196	201	205	210	215	220	224	229	234	239
4'11"	94	99	104	109	114	119	124	128	133	138	143	148	153	158	163	168	173	178	183	188	193	198	203	208	212	217	222	227	232	237	242	247
5'	97	102	107	112	118	123	128	133	138	143	148	153	158	163	169	173	179	184	189	194	199	204	209	215	220	225	230	235	240	245	250	255
5'1"	100	106	111	116	122	127	132	137	143	148	153	158	164	169	174	180	185	190	195	201	206	211	217	222	227	232	238	243	248	254	259	264
5'2"	104	109	115	120	126	131	136	142	147	153	158	164	169	174	180	185	191	196	202	207	213	218	224	229	235	240	246	251	256	262	267	273
5'3"	107	113	118	124	130	135	141	146	152	158	163	169	175	180	186	192	197	203	208	214	220	225	231	237	242	248	254	259	265	270	278	282
5'4"	110	116	122	128	134	140	145	151	157	163	169	174	180	186	192	197	204	209	215	221	227	232	238	244	250	256	262	267	273	279	285	291
5'5"	114	120	126	132	138	144	150	156	162	168	174	180	186	192	198	204	210	216	222	228	234	240	246	252	258	264	270	276	282	288	294	300
5'6"	118	124	130	136	142	148	155	161	167	173	179	186	192	198	204	210	218	223	229	235	241	247	253	260	266	272	278	284	291	297	303	309
5'7"	121	127	134	140	146	153	159	166	172	178	185	191	198	204	211	217	223	230	236	242	249	255	261	268	274	280	287	293	299	306	312	319
5'8"	125	131	138	144	151	158	164	171	177	184	190	197	203	210	216	223	230	236	243	249	256	262	269	276	282	289	295	302	308	315	322	328
5'9"	128	135	142	149	155	162	169	176	182	189	196	203	209	216	223	230	236	243	250	257	263	270	277	284	291	297	304	311	318	324	331	338
5'10"	132	139	146	153	160	167	174	181	188	195	202	209	216	222	229	236	243	250	257	264	271	278	285	292	299	306	313	320	327	334	341	348
5'11"	136	143	150	157	165	172	179	186	193	200	208	215	222	229	236	243	250	257	265	272	279	286	293	301	308	315	322	329	338	343	351	358
6'	140	147	154	162	169	177	184	191	199	206	213	221	228	235	243	250	258	265	272	279	287	294	302	309	316	324	331	338	346	353	361	368
6'1"	144	151	159	166	174	182	189	197	204	212	219	227	235	242	250	257	265	272	280	288	295	302	310	318	325	333	340	348	355	363	371	378
6'2"	148	155	163	171	179	186	194	202	210	218	225	233	241	249	256	264	272	280	287	295	303	311	319	326	334	342	350	358	365	373	381	389
6'3"	152	160	168	176	184	192	200	208	216	224	232	240	248	256	264	272	279	287	295	303	311	319	327	335	343	351	359	367	375	383	391	399
6'4"	156	164	172	180	189	197	205	213	221	230	238	246	254	263	271	279	287	295	304	312	320	328	336	344	353	361	369	377	385	394	402	410

← REDUCED RISK

INCREASED RISK →

## Health Risks Associated with Obesity

- Insulin resistance (type 2 diabetes)
- Elevated cholesterol
- Sleep apnea
- Osteoarthritis

- High blood pressure
- Coronary heart disease
- Stroke
- Many types of cancer

- Depression
- Premature death
- Other



# Get the most from medications

Medications can help control high blood pressure, prevent complications like heart attack or stroke, and reduce the risk of heart disease. To be effective, they must be taken as prescribed. Taking medication in the wrong dose or at different times can be dangerous.

Let your doctor know about any new supplements or prescriptions you're taking in case they interact with your blood pressure medications. If you have questions about your medications, your pharmacist is a great resource.

Make sure you know:

- The names of your medications.
- The dosages.
- How often to take them.
- The possible side effects.
- Whether the medications may interact with other drugs you take or with certain foods or beverages.
- What to do if you miss a dose.
- Your blood pressure. Take a reading regularly to help your doctor know how well your medications are working.

Download a My Medicines form to fill out.  
[hmsa.com/media/default/documents/well-being/hmsa-medication-tracker.pdf](https://hmsa.com/media/default/documents/well-being/hmsa-medication-tracker.pdf)



**How many of these tips have you tried to remember to take your medications?**

- ✓ Take your medications at the same time every day and tie them into a routine you already have, such as brushing your teeth.
- ✓ Keep them all in one place where you'll always see them.
- ✓ Set an alarm on your smartphone so you'll remember to take your medication.
- ✓ Buy and use a pill sorter, which is available at the drugstore, and refill it at the same time every week.
- ✓ If you need to travel, bring a few extra days' worth of medication, just in case, and stow them in your carry-on bag.

# Blood Pressure Action Plan

Patient name: \_\_\_\_\_ Date: \_\_\_\_\_  
 PCP: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Emergency contact: \_\_\_\_\_ Phone: \_\_\_\_\_

**Take this form to your next appointment with your PCP. Together, you and your doctor can create a blood pressure goal and develop a plan to achieve it.**

## Medication Management

List all the medications you currently take. Your PCP can review this list and help you determine if changes are needed. Tell your doctor if you have problems with any medication.

Name of medication (e.g., metoprolol)	How much to take (e.g., 100 mg)	When to take it (e.g., once daily in the morning)	What is it for (e.g., lower blood pressure)

## Blood Pressure Monitoring

It's important to check your blood pressure regularly. A blood pressure reading consists of two numbers – systolic (the top number) and diastolic (the bottom number). Systolic pressure is created when the heart pumps blood. Diastolic pressure is created when the heart is at rest between beats.

Normal blood pressure      120/80 or less  
 Prehypertension            120-139/80-89  
 High blood pressure        140/90 or higher

My blood pressure goal is:  Date:

Date/time	Reading		Comments
	Blood pressure	Heart rate (pulse)	
	/		
	/		
	/		
	/		

**Contact your PCP if either number exceeds:**

**Systolic**       **Diastolic**

# Blood Pressure Action Plan (continued)

## Controlling Sodium

Sodium increases blood pressure because it holds excess fluid in the body. Most of the sodium we eat comes from processed foods such as canned soup, lunch meat, fast food, pickles, ham, and chips. Read food labels to see which foods are high in sodium and avoid those foods or eat small amounts. Also, add salt in moderation when cooking or eating. Ask your PCP how much sodium you should consume per day.

Here are three high-sodium foods that I can cut back on right now:

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

## Losing Weight

Small changes in your diet can make a big difference to your weight. Losing five pounds can help lower your blood pressure.

Current weight:

My weight	In three months	In six months	In 12 months
Date			
Weight			

Here are four things I can do right now to lose weight:

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_ 4. \_\_\_\_\_

## Activity Planning

Exercising most days of the week for at least 30 minutes a day can help lower your blood pressure. You can break up a day's exercise into three 10-minute segments. Good activities are walking and swimming.

Here are three things I can do right now to be more active:

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

## Smoking, Alcohol, and Stress

Quitting smoking may be the most important thing you can do to lower your blood pressure. You'll also reduce your risk of heart disease and stroke.

I currently smoke  packs/or  cigarettes per day.

Goal: Reduce to  packs/or  cigarettes per day.

Goal: Quit by (date) .

I don't smoke.

Alcohol can increase risk factors associated with hypertension, such as weight gain and elevated blood glucose levels, and can interfere with medications. Decreasing alcohol consumption can help you keep your blood pressure in check.

Goal: Limit amount of alcohol to  drink(s) each week.

I don't drink.

Our bodies release hormones that increase our blood pressure when we're stressed. Chronic stress can lead to hypertension over time. Reducing stress is good for your mental and physical health.

To reduce stress, I will \_\_\_\_\_.



## Additional resources

- **HMSA**  
[hmsa.com/bloodpressure](https://hmsa.com/bloodpressure)
- **U.S. Centers for Disease Control and Prevention**  
[cdc.gov/bloodpressure/index.htm](https://cdc.gov/bloodpressure/index.htm)
- **American Heart Association**  
[heart.org/en/health-topics/high-blood-pressure](https://heart.org/en/health-topics/high-blood-pressure)
- **Hawaii Health Initiative**  
[livinghealthy.hawaii.gov/blood-pressure/](https://livinghealthy.hawaii.gov/blood-pressure/)

Blood pressure monitors are available at your doctor's office, fire stations, and HMSA Centers.

# We're here with you

[hmsa.com/eutf](https://hmsa.com/eutf)

Call (808) 948-6499 or 1 (800) 776-4672 Monday through Friday, 7 a.m. to 7 p.m. and Saturday, 9 a.m. to 1 p.m.

Or meet with knowledgeable, experienced health plan advisers. We'll answer questions about your health plan, give you general health and well-being information, and more. Hours of operation may change. Please go to [hmsa.com/contact](https://hmsa.com/contact) before your visit.

## **HMSA Center in Honolulu**

818 Keeaumoku St.  
Monday–Friday, 8 a.m.–5 p.m. | Saturday, 9 a.m.–2 p.m.

## **HMSA Center in Pearl City**

Pearl City Gateway | 1132 Kuala St., Suite 400  
Monday–Friday, 9 a.m.–6 p.m. | Saturday, 9 a.m.–2 p.m.

## **HMSA Center in Hilo**

Waiakea Center | 303A E. Makaala St.  
Monday–Friday, 9 a.m.–6 p.m. | Saturday, 9 a.m.–2 p.m.

## **HMSA Center in Kahului**

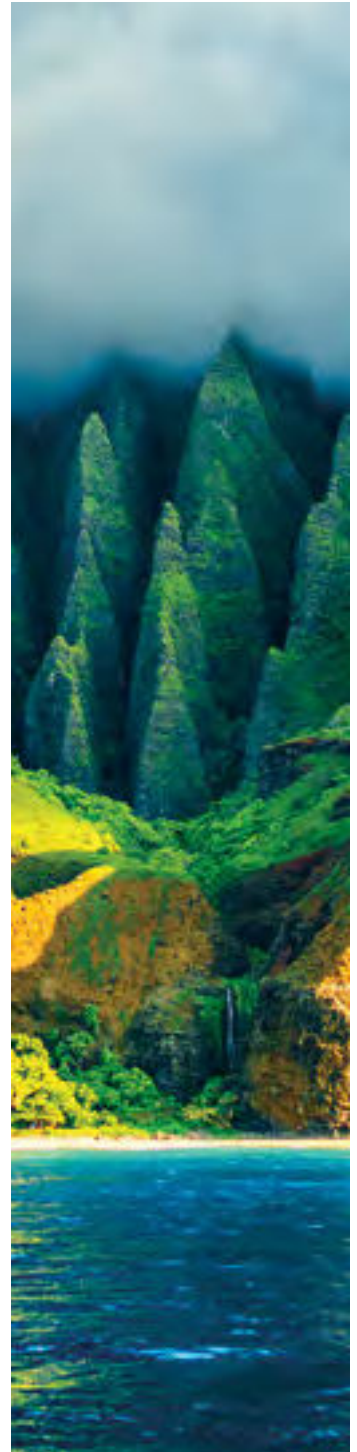
Puunene Shopping Center | 70 Hookele St., Suite 1220  
Monday–Friday, 8 a.m.–5 p.m. | Saturday, 9 a.m.–1 p.m.

## **HMSA Center in Lihue**

Kuhio Medical Center | 3-3295 Kuhio Highway, Suite 202  
Monday–Friday, 8 a.m.–4 p.m.

[hmsa.com](https://hmsa.com)

     [@hmsahawaii](https://www.instagram.com/hmsahawaii)



Together, we improve the lives of our members and the health of Hawaii.  
Caring for our families, friends, and neighbors is our privilege.





## **Virta Monthly Enrollment Report**

Date: October 7, 2024

Carrier: Hawaii Medical Service Association (HMSA)

Period Report Covers: September 2024

### **EUTF Enrollment Count**

Week 1- as of 9/4/2024

Group	Enrolled Members	Applicants in Process	All-time Applicants
EUTF	157	21	556

Week 2- as of 9/11/2024

Group	Enrolled Members	Applicants in Process	All-time Applicants
EUTF	158	31	568

Comment:

*"Supportive with lots of helpful resources provided." -EUTF member*

Week 3- as of 9/18/2024

Group	Enrolled Members	Applicants in Process	All-time Applicants
EUTF	158	31	568



**Week 4- as of 9/25/2024**

Group	Enrolled Members	Applicants in Process	All-time Applicants
EUTF	158	29	568

**End of September 2024**

Group	Enrolled Members	Applicants in Process	All-time Applicants
EUTF	158	24	568

**Comment:**

*"I actually already have recommended Virta to friends because the system works, and it's totally sustainable for the long term, as long as one is not too picky of an eater." -EUTF Member*

**EUTF Member Lost Applicant Reasons**

- Unresponsive: 76%
- Unqualified Diagnosis: 16%
- Dropout of Enrollment Process: 7%
- Not covered: 1%

**Demographic Information**

See attached Virta report

**Marketing Plan Reach**

**Drop Date: Tue. Oct-8** – Email #7 titled "Nothing to Lose", content includes a member quote and a link to claim their Virta benefit.

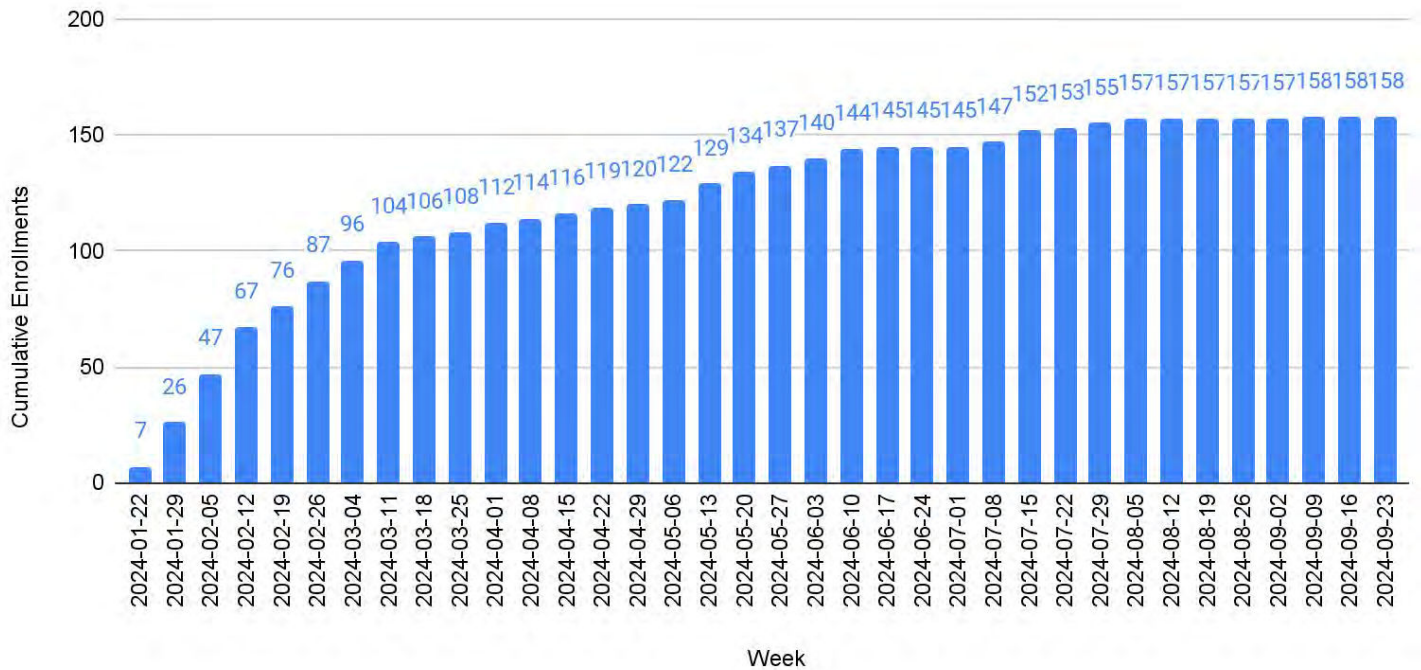
**Drop Date: November** – Mailer #4 titled "What You Get", a one-page letter that Virta mentioned has tested well with other groups due to its simplicity and clear benefits.

# Virta Health + EUTF Enrollment Summary

Launch Date: 01/01/2024

Data as of: 9/30/2024

## Cumulative Enrollment By Week



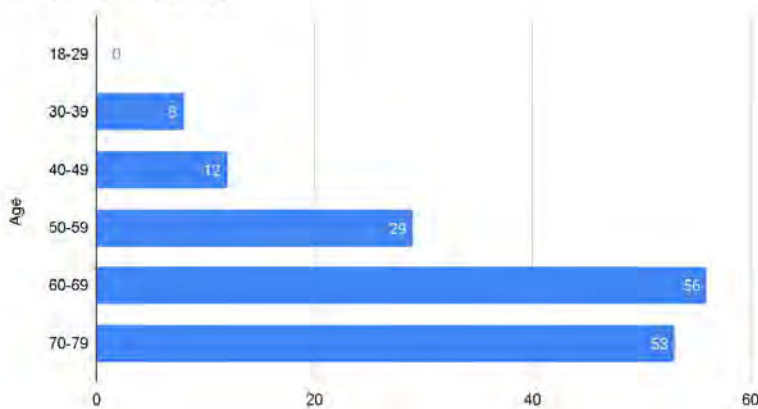
## A BENEFIT YOUR MEMBERS THANK YOU FOR...

“This morning I am thanking God, my health plan providers, VIRTa and my coaches because I made my goal weight! I lost 7 pounds in 9 weeks! More importantly my blood glucose numbers are greatly improved! When I started my fasting BG numbers were in the high 200s. Now they are in the low 100s. I feel more energetic and more hopeful for the future with my family!

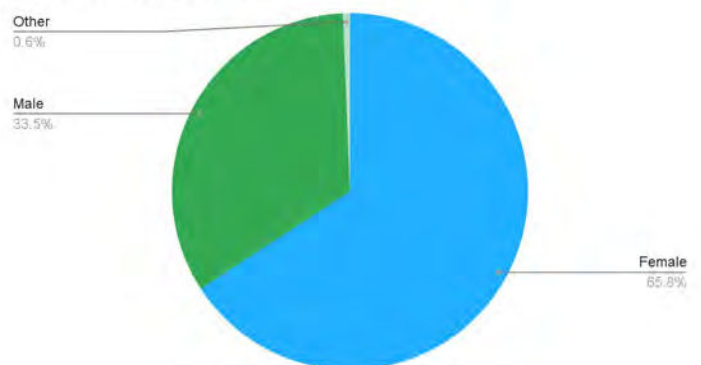
Thank you HMSA for offering and sponsoring this. My regular doctor has been supportive also.  
This VIRTa program ROCKS!!!”

## EUTF Enrollment Demographics

Enrollments by Age



Enrollments by Gender



Source: Virta internal EMR data for EUTF member population with type 2 diabetes enrolled since launch.







JOSH GREEN, M.D.  
GOVERNOR  
  
SYLVIA LUKE  
LIEUTENANT GOVERNOR

**STATE OF HAWAII'  
HAWAII EMPLOYER-UNION HEALTH BENEFITS TRUST FUND**

201 MERCHANT STREET, SUITE 1700  
HONOLULU, HAWAII 96813  
Oahu (808) 586-7390  
Toll Free 1(800) 295-0089  
www.eutf.hawaii.gov

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DONNA A. TONAKI

October 11, 2024

TO: Board of Trustees  
  
FROM: Amy Cheung *ac*  
EUTF Financial Management Officer  
  
SUBJECT: September 2024 – October 2024 Financial Services Branch (FSB)

This report covers the period of September 14, 2024 through October 11, 2024. Additional details will be provided upon request.

a. FSB Performance Data

FSB's call answer rate was 92.14% (1,125 out of 1,221 calls) for September 2024 compared to 94.97% for August 2024. Please see attached for the Automated Call Distribution (ACD) reports for more information.

During September, staff reviewed and issued 440 shortage notices and 222 cancellation notices compared to 537 shortage notices and 259 cancellation notices last year. Staff also reviewed and mailed out 140 retiree invoices to retirees who pay a portion of their premiums via check for the month of September.

b. Refunds and Medicare Part B Overpayments Status

*Refunds:* The new BAS processes pre-tax refunds for active employees through payroll except for events related to terminations, deaths, and non-payment terminations. The net payable to employee-beneficiaries as of June 30, 2023 was \$495,191 and as of June 30, 2024 was \$1,264,419, an increase of \$769,228. During the fiscal year, staff continued to focus on post system implementation activities (e.g. defect/issue resolution, account corrections and clean-up) which have delayed the handling of refunds. We are working on streamlining the current refund process to reduce the net payable balance.

*Medicare Part B Overpayments:* The financial management team continues to collect on the prior fiscal years overpayment balance by contacting the debtor or estate (at least two times). If there is no response, we forward the collection to the Department of the Attorney General for collection and/or write off. Since July 1, 2024, the EUTF has written off 163 Medicare Part B overpayments totaling \$39,301. We recovered 12 overpayments totaling \$14,031 in September.

**EUTF's Mission:** We care for the health and well being of our beneficiaries by striving to provide quality benefit plans that are affordable, reliable, and meet their changing needs. We provide informed service that is excellent, courteous, and compassionate.

c. EUTF Collections

The following provides the collections status on completed audits as of September 30, 2024.

Description	Date of Collection Letters	Number of Accounts Outstanding <sup>^</sup>	Total Recovery Amount*	Total Amount Collected (To-Date)	Total Amount Referred to AG for Collection	Remaining Outstanding Balance
Surviving Spouse/Surviving Child Audit	02/08/18	2	\$120,027	\$36,023	\$71,520	\$12,484
Surviving Spouse/Surviving Child Audit - Ongoing	08/30/18-present	5	\$186,251	\$84,248	\$48,727	\$53,276
Unreported Divorces for Retirees/Actives - Ongoing	08/30/18-present	18	\$860,452	\$267,973	\$479,821	\$112,658
Family Link & Special Audits - Ongoing	12/31/18-present	5	\$21,251	\$12,946	\$0	\$8,305
<b>Total</b>		<b>30</b>	<b>\$1,187,981</b>	<b>\$401,190</b>	<b>\$600,068</b>	<b>\$186,723</b>
<b>% of Total</b>				<b>34%</b>	<b>51%</b>	<b>15%</b>

<sup>^</sup> Adjusted to exclude accounts on appeal status, approved appeals, and referred to AG for collection.

\* Total recovery amount represents total employer contributions owed less adjustments related to approved appeals.

d. 2024 Financial Audit

The auditors have completed fieldwork at the EUTF office. The final financial statements and other report deliverables are expected to be issued by November 25, 2024.

e. Financial Statements as of June 30, 2024

Financial statements for the month of June 2024 are included in your packet for review.

# Accounting Automated Call Distribution Report

## September 2024

Day	Day of Week	Incoming Calls Accounting	Answered	% Answered	Average Time Per Call (min)	% Answered within x seconds			Abandoned Time (in seconds)				Voice Message	Outgoing Calls Accounting	
						10	10-30	> 30	< 10	10-30	> 30	Total			
2	Monday	HOLIDAY - LABOR DAY													
3	Tuesday	75	70	93.33%	4:24	61.33%	8.00%	24.00%	2	0	3	5	0	4	
4	Wednesday	50	47	94.00%	4:23	78.00%	12.00%	4.00%	2	1	0	3	0	9	
5	Thursday	67	65	97.01%	2:55	73.13%	8.96%	14.93%	0	0	2	2	0	2	
6	Friday	57	53	92.98%	4:15	59.65%	7.02%	26.32%	0	0	4	4	0	10	
9	Monday	80	77	96.25%	3:33	72.50%	12.50%	11.25%	0	1	2	3	0	4	
10	Tuesday	68	55	80.88%	3:22	55.88%	4.41%	20.59%	1	2	10	13	0	5	
11	Wednesday	52	52	100.00%	3:26	92.31%	1.92%	5.77%	0	0	0	0	0	1	
12	Thursday	48	46	95.83%	3:28	85.42%	0.00%	10.42%	1	0	1	2	0	8	
13	Friday	67	64	95.52%	2:43	70.15%	8.96%	16.42%	2	0	1	3	0	3	
16	Monday	58	52	89.66%	3:38	67.24%	0.00%	22.41%	3	0	3	6	0	2	
17	Tuesday	47	44	93.62%	3:44	74.47%	10.64%	8.51%	0	0	3	3	0	5	
18	Wednesday	41	41	100.00%	3:30	100.00%	0.00%	0.00%	0	0	0	0	0	3	
19	Thursday	52	47	90.38%	4:16	71.15%	1.92%	17.31%	2	0	3	5	0	1	
20	Friday	66	61	92.42%	4:28	83.33%	0.00%	9.09%	0	1	4	5	0	0	
23	Monday	66	59	89.39%	4:47	57.58%	4.55%	27.27%	1	1	5	7	0	4	
24	Tuesday	50	49	98.00%	4:56	84.00%	8.00%	6.00%	1	0	0	1	0	1	
25	Wednesday	49	46	93.88%	3:55	79.59%	2.04%	12.24%	2	0	1	3	0	3	
26	Thursday	47	47	100.00%	4:23	85.11%	4.26%	10.64%	0	0	0	0	0	2	
27	Friday	72	59	81.94%	4:47	50.00%	4.17%	27.78%	3	0	10	13	0	2	
30	Monday	109	91	83.49%	4:37	49.54%	2.75%	31.19%	3	2	13	18	0	3	
<b>Monthly Totals</b>		<b>1221</b>	<b>1125</b>	<b>92.14%</b>	<b>3:59</b>	<b>70.11%</b>	<b>5.24%</b>	<b>16.79%</b>	<b>23</b>	<b>8</b>	<b>65</b>	<b>96</b>	<b>0</b>	<b>72</b>	

# Accounting Automated Call Distribution Report

## January to December 2024

Month	Incoming Calls Accounting	Answered	% Answered	Average Time Per Call (min)	% Answered within x seconds			Abandoned Time (in seconds)				Voice Message	Outgoing Calls Accounting
					10	10-30	> 30	< 10	10-30	> 30	Total		
January	1416	1269	89.62%	4:12	55.44%	6.36%	27.82%	46	16	85	147	0	84
February	1130	1013	89.65%	4:20	63.45%	5.04%	21.15%	27	19	71	117	0	82
March	1037	919	88.62%	5:21	57.18%	5.59%	25.84%	16	15	87	118	0	102
April	1627	1409	86.60%	4:18	59.13%	5.04%	22.43%	33	39	146	218	0	129
May	1065	923	86.67%	4:48	63.29%	7.98%	15.40%	26	23	93	142	0	116
June	1189	1040	87.47%	3:59	67.62%	4.54%	15.31%	24	27	98	149	0	46
July	1481	1306	88.18%	3:48	68.26%	3.58%	16.34%	46	24	105	175	0	71
August	1133	1076	94.97%	4:15	75.11%	6.35%	13.50%	16	2	39	57	0	63
September	1221	1125	92.14%	3:59	70.11%	5.24%	16.79%	23	8	65	96	0	72
October													
November													
December													

Report Created 10/1/2024

# Accounting Automated Call Distribution Report

## January to December 2023

Month	Incoming Calls Accounting	Answered	% Answered	Average Time Per Call (min)	% Answered within x seconds			Abandoned Time (in seconds)				Voice Message	Outgoing Calls Accounting
					10	10-30	> 30	< 10	10-30	> 30	Total		
January	2600	1590	61.15%	5:55	12.96%	2.15%	46.04%	24	45	941	1010	0	106
February	1489	1173	78.78%	5:24	30.49%	2.96%	45.33%	14	29	273	316	0	84
March	1599	1399	87.49%	5:38	42.34%	8.44%	36.71%	7	23	170	200	0	98
April	1475	1243	84.27%	5:57	40.75%	5.97%	37.56%	15	14	203	232	0	105
May	1147	1048	91.37%	5:45	56.15%	7.76%	27.46%	11	8	80	99	0	81
June	1329	1218	91.65%	5:25	54.40%	8.05%	29.19%	8	11	92	111	0	123
July	1506	1296	86.06%	5:43	41.50%	6.64%	37.92%	14	18	178	210	0	138
August	1315	1201	91.33%	5:06	61.29%	8.14%	21.90%	15	11	88	114	0	121
September	1323	1178	89.04%	4:34	51.55%	5.90%	31.59%	24	14	107	145	0	86
October	1514	1343	88.71%	5:03	52.58%	4.95%	31.18%	29	20	122	171	0	118
November	1095	1003	91.60%	4:28	62.92%	5.11%	23.56%	12	9	71	92	0	89
December	984	924	93.90%	4:42	66.57%	4.98%	22.36%	17	5	38	60	0	93

Report Created 10/1/2024

**Hawaii Employer-Union Health Benefits Trust Fund**  
**ENTERPRISE (ACTIVES) - STATEMENT OF NET POSITION**  
**12 Month Ended June 30, 2024**  
**(PRELIMINARY-Unaudited)**

		UNAUDITED Current Month Ended June 30, 2024	UNAUDITED Current Month Ended March 31, 2024	AUDITED Current Month Ended June 30, 2023	Notes
<b>ASSETS</b>					
<b>Current Assets:</b>					
1	Cash	\$ 3,616,719	\$ 18,297,967	\$ 36,077,987	
2	Short-term investment (principal)	155,000,000	155,000,000	155,000,000	
3	Net return on investment	22,316,349	21,037,775	9,024,456	
4		177,316,349	176,037,775	164,024,456	
5	Total cash and investments	180,933,068	194,335,741	200,102,443	
Receivables:					
6	Premium receivable from State of Hawaii and counties	39,566,435	45,763,908	42,592,919	Receivable for one month of employer contributions and one pay period of employee payroll premium deductions withheld net of prepayments.
7	Rebates receivable	25,950,937	24,930,165	18,886,779	CVS drug rebates \$25.37M, CVS network guarantees \$410.32K and HMSA, VSP, HUMANA performance penalties \$168.54K.
8	Experience refunds due from insurance companies	1,838,581	-	2,757,578	Experience refunds for HDS \$950.44K, HMSA \$860.04K and VSP \$28.1K.
9	Self-funded reserves	5,021,274	5,021,274	5,021,274	Reserves held by self-funded carriers (CVS \$4.958M and HMA \$63.2K) to cover claim payment lag.
10	Prepaid expenses	29,143	46,538	29,744	Prepaid expenses such as insurance and computer maintenance.
11	Total current assets	253,339,438	270,097,627	269,390,738	
12	Capital assets, net of accumulated depreciation	6,560,948	7,076,085	8,033,400	Capitalized assets such as computers, benefits administration system, and other fixed assets.
13	<b>TOTAL ASSETS</b>	<b>\$ 259,900,386</b>	<b>\$ 277,173,712</b>	<b>\$ 277,424,138</b>	
14	Deferred outflows of resources related to pension	967,749	967,749	967,749	
15	Deferred outflows of resources related to OPEB	636,160	636,160	636,160	
16		<b>\$ 261,504,295</b>	<b>\$ 278,777,621</b>	<b>\$ 279,028,046</b>	
<b>LIABILITIES</b>					
<b>Current Liabilities:</b>					
17	Vouchers and contracts payable	\$ 2,011,070	\$ 1,329,434	\$ 1,209,914	Accounts payable (includes payments to TELUS Health for the maintenance and support of the BAS, short-term/long-term lease payments, and PCORI fees).
18	Due to State of Hawaii	109,913	-	85,469	Forfeitures for FY24..
19	Accrued wages and employee benefits payable	570,941	553,195	452,551	
20	Premiums payable to insurance carriers	60,461,625	73,052,095	56,983,139	One month of premiums owed to fully insured plan carriers. Payable to HMSA for FY23 initial accounting loss of \$12.284M was accrued in 2/24 and paid in 4/24.
21	Payable to employee - beneficiaries	1,199,979	427,067	596,245	Refunds owed to employee-beneficiaries.
22	Claims and administrative fee liability for self-funded plan	7,296,006	7,323,864	7,309,128	Claims reimbursements and administrative fees owed to CVS 1/2 month and HMA outstanding claims.
23	Compensated absences, current portion	138,657	138,657	138,657	Current portion of unpaid vacation liability.
24	Total current liabilities	<b>\$ 71,788,191</b>	<b>\$ 82,824,312</b>	<b>\$ 66,775,103</b>	
<b>Noncurrent Liabilities:</b>					
25	Net other postemployment benefits payable	6,116,867	6,116,867	6,116,867	EUTF share of OPEB liability.
26	Compensated absences	477,792	434,373	434,373	Non-current portion of unpaid vacation liability.
27	Net pension liability	5,959,234	5,959,234	5,959,234	EUTF share of pension liability.
28	L/T Lease Liability	532,651	723,620	723,620	
29	Total Liabilities	<b>\$ 84,874,735</b>	<b>\$ 96,058,405</b>	<b>\$ 80,009,196</b>	
30	Deferred inflows of resources related to pension	692,862	692,862	692,862	
31	Deferred inflows of resources related to OPEB	1,291,233	1,291,233	1,291,233	
32	<b>TOTAL LIABILITIES</b>	<b>\$ 86,858,830</b>	<b>\$ 98,042,500</b>	<b>\$ 81,993,291</b>	
<b>NET ASSETS:</b>					
33	Net investment in capital assets	\$ 6,560,948	\$ 7,076,085	\$ 8,033,400	
Unrestricted gain primarily from benefit plans					
34	ACA PCORI	3,807,399	5,044,063	4,298,930	At the 4/28/20 meeting, the Board approved to reserve additional funds to pay for PCORI fees through 6/30/29 for actives and 12/31/28 for retirees.
35	Self-funded claim stabilization reserve	49,321,478	49,321,478	46,605,000	Reserve reflects 35% of FY23 self-funded prescription drug plan claims and expenses.
36	Administrative fees (07/24-06/29 Actives)	30,446,915	31,664,915	29,232,000	At the 6/26/18 meeting, the Board approved waiver of administrative fees from 7/1/19 (actives) and 1/1/19 (retirees) through 6/30/24 (actives) and 12/31/23 (retirees). At the 9/25/18 meeting, the Board extended the waiver through 6/30/29 (actives) and 12/31/28 (retirees).
37	Unreserved	84,508,725	87,628,580	108,865,425	
38	Unrestricted gain primarily from benefit plans	168,084,517	173,659,036	189,001,355	Unrestricted gain or surplus for EUTF. This amount is cumulative from year-to-year.
39	Total Net Assets	174,645,465	180,735,121	197,034,755	
40	<b>TOTAL LIABILITIES AND NET ASSETS</b>	<b>\$ 261,504,295</b>	<b>\$ 278,777,621</b>	<b>\$ 279,028,046</b>	

Hawaii Employer-Union Health Benefits Trust Fund						
ENTERPRISE (ACTIVES) - STATEMENT OF REVENUE, EXPENSES and CHANGES IN NET POSITION						
12 Month Ended June 30, 2024						
(PRELIMINARY-Unaudited)						
		6/30/2024 12-Month Budget	6/30/2024 12-Month Actual	Variance	6/30/2024 Self-Funded Plans and Other 12-Month Actual	Notes
<b>REVENUES:</b>						
1	Premium revenue for self-funded plans	\$ -	\$ -	\$ -	\$ 104,704,266	
2	Administrative fee - EUTF	-	-	-	-	Administrative fees paid by employees and employers are added to the premiums. Effective 1/1/19 and 7/1/19, administrative fees for retirees and actives are waived through 12/31/28 (retirees) and 6/30/29 (actives), respectively.
3	Investment income	-	-	-	7,341,047	\$1.89M dividends from short-term investments, \$4.55M interest income from money market account and \$895.75K BOH excess credits.
4	Unrealized gain (loss) on investments	-	-	-	8,784,199	Appreciation (Depreciation) in fair market value of short-term investments.
5	CVS rebates	-	-	-	46,459,992	Net of \$2.5M adjustment related to prior years.
6	Purchasing card rebates	-	-	-	1,338	
7	Performance penalties	-	-	-	1,552,541	
8	Experience refunds	-	-	-	(8,963,852)	Initial and final accounting for HMSA FY23 loss (\$11.03M), HMSA FY24 \$860.04K, HDS FY23 \$245.21K, HDS FY24 \$920.23K, VSP FY23 \$36.02K.
9	Total Revenues	\$ -	\$ -	\$ -	\$ 159,879,533	
<b>EXPENSES:</b>						
10	TPA expenses	\$ -	\$ -	\$ -	\$ 942,094	Administrative expenses paid to self-funded plan carriers (CVS \$830.75K and HMA \$111.34K).
11	Benefits paid for self-funded plans	-	-	-	167,772,094	Claims paid to self-funded plan carriers (CVS \$167.47M net of Ranbaxy, Restasis, and Opana settlements and HMA \$279.28K), and IBNR for CVS \$8.2K and HMA \$16K.
12	Personnel services	6,497,342	6,555,178	(57,836)	-	Salaries for EUTF staff. Fringe benefits were over-budget by \$197.7K due to a one-time OPEB retro assessment paid to DAGS in 6/24.
13	Office supplies	6,500	26,595	(20,095)	-	Office supplies includes copier paper, envelopes, repair and maintenance, board refreshments, paper shredding services, and other small purchases. FY24 actual expenditures were higher because of one-time costs of cubicle reconfigurations.
14	Dues & subscriptions	900	-	900	-	
15	Postage	157,000	165,060	(8,060)	-	\$62.4K in regular postage refill for monthly shortage and cancellation notices, confirmation letters, COBRA notices, and student certifications, \$60.1K retiree guides postage, and \$42.6K active notice packets.
16	Telephone	48,000	45,677	2,323	-	Telephone charges includes phone lines, long distance charges, toll-free line and annual maintenance of telephone equipment.
17	Printing & binding	138,000	119,122	18,878	-	Holomua \$16.95K, HIPAA notices \$3.4K, COBRA packets \$5.46K, and retiree guides \$93.31K
18	Transportation - intra state	3,500	3,579	(79)	-	Interisland travel expenses such as airfare, per diem, car rental, staff car mileage reimbursement, motor pool car rental.
19	Transportation - out of state	68,000	36,864	31,136	-	IFEBP annual conference.
20	Office space	400,000	220,059	179,941	-	Office lease rental.
21	Rental of equipment (copier)	26,000	4,097	21,903	-	Xerox copiers and postage meter machine.
22	Insurance	66,000	68,980	(2,980)	-	Amortization of Fiduciary Liability.
23	Services on a fee basis - legal	161,000	208,009	(47,009)	-	Deputy AG's salary and fringe benefits, and outside non-OPEB Trust Fund services.
24	Consultant services	827,000	857,558	(30,558)	-	Segal \$445.48K, audit fees \$203.8K, DOH death verifications \$0.56K, claims audit fees \$188.65K and office cubicle delivery & installation \$19.08K.
25	Training and registration	35,000	25,074	9,926	-	IFEBP registration and SALGBA annual fee.
26	Computer hardware/software maintenance	1,208,317	1,757,377	(549,060)	-	\$1.5M expenses for the TELUS Health (fka Lifeworks) benefits administration system which includes amortization of software/hardware maintenance, M&O maintenance, services related to TELUS Health contract and \$257.38K other computer and software expenses. The variance is attributed to expenditures encumbered in FY23 and paid in FY24, and a budget reallocation of current expenditures to personnel services to cover a one-time OPEB retro assessment paid to DAGS in 6/24.
27	Depreciation and Amortization	-	-	-	1,472,452	Depreciation and amortization expense for fixed and prepaid assets.
28	ACA Reinsurance and PCORI Fees	-	-	-	491,531	
29	Investment fees - EUTF reserves	-	-	-	16,785	Fees associated with short-term investments.
30	Interest expense	-	-	-	31,970	Fees associated with right to use and lease payable assets in accordance with GASB 87.
31	(Gain) loss from carrier payments	-	-	-	1,448,667	This amount is the resulting (gain) loss after the collection of employer/employee contributions and the payment to carriers. This amount fluctuates every month.
32	Total Expenses	\$ 9,642,559	\$ 10,093,229	\$ (450,670)	\$ 172,175,594	Over budget is due to the expenses during FY24 related to 6/30/23 encumbrances amounting to \$500K.
33	EXCESS OF REVENUES OVER EXPENDITURE	\$ (9,642,559)	\$ (10,093,229)	\$ 450,670	\$ (12,296,061)	

**Hawaii Employer-Union Health Benefits Trust Fund  
AGENCY (RETIRES) - STATEMENT OF FIDUCIARY NET POSITION**

12 Month Ended June 30, 2024

(PRELIMINARY-Unaudited)

		UNAUDITED Current Month Ended June 30, 2024	UNAUDITED Current Month Ended March 31, 2024	AUDITED Current Month Ended June 30, 2023	Notes
<b>ASSETS:</b>					
1	Cash	\$ 73,583,170	\$ 27,030,820	\$ 64,014,076	
2	Short-term investment (principal)	303,250,000	303,250,000	315,000,000	Transferred \$11.75M from Agency to OPEB in 1/2024 for the Kaiser Silver & Fit Program (\$1.75M - board approved on 7/25/23) and for the additional costs in Kaiser premiums related to the hearing aid coverage (\$10M - board approved on 10/24/23).
3	Net return on investment	96,541,122	94,039,130	63,395,344	
4		399,791,122	397,289,130	378,395,344	
5	Total cash and investments	473,374,292	424,319,950	442,409,419	
Receivables:					
6	Premium receivable from State of Hawaii and counties	-	58,845,599	20,495	Receivable for one month of employer contributions and one pay period of employee payroll premium deductions withheld net of prepayments.
7	Rebates receivable	62,281,110	55,601,836	34,559,700	\$10.2M (CVS drug rebates), \$40M (Silverscript drug rebates), and \$11.9M (coverage gap) through 3/31/24, and performance Penalties \$181.27K.
8	Experience refunds due from insurance companies	(19,765,072)	-	3,731,418	Experience refunds/losses for HMSA (\$19.82M) and HDS \$54.88K for CY2023.
9	Medicare reimbursements from individuals, net of allowance	354,392	285,025	101,353	Receivable from beneficiaries of deceased retirees who were overpaid for Medicare Part B premium reimbursements (net of allowance for bad debt).
10	Receivables from agencies	-	150,000	-	2023 Actuarial Valuation Reports (paid 6/2024).
11	Total receivables	42,870,430	114,882,460	38,470,391	
12	Self-funded reserves	8,165,204	8,165,204	8,165,204	Reserves held by self-funded carriers (CVS \$1.7M and Silverscript \$6.4M) to cover claim payment lag.
13	<b>TOTAL ASSETS</b>	<b>\$ 524,409,926</b>	<b>\$ 547,367,614</b>	<b>\$ 488,987,590</b>	
<b>LIABILITIES:</b>					
14	Vouchers and contracts payable	\$ 199,383	\$ 7,876	\$ 194,325	
15	Premiums payable	54,569,126	54,455,293	53,254,423	One month of premiums owed to the fully insured plan carriers.
16	Due to retirees	64,440	4,314	-	Refunds owed to retirees.
17	Medicare Part B premium reimbursement payable	-	-	-	At quarter-end, we reimburse retirees Medicare Part B premiums. Therefore, quarter-end balances are zero.
18	AP unclaimed checks	267,521	267,521	248,823	Uncashed checks either older than 6 months or deceased (unclaimed) owed to members.
19	Benefit claims payable	27,496,710	30,448,806	28,159,678	Claims reimbursements and administrative fees owed to CVS and Silverscript.
20	IBNR liability for self-funded plans	492,900	414,400	414,400	Incurred but not reported (IBNR) liability for claims reimbursement from self-funded plans.
21	Total Liabilities	\$ 83,090,080	\$ 85,598,209	\$ 82,199,504	
<b>NET ASSETS:</b>					
Unrestricted gain primarily from benefit plans					
22	ACA PCORI fees	\$ 3,393,575	\$ 3,776,458	\$ 3,086,411	At the 4/28/20 meeting, the Board approved to reserve additional funds to pay for PCORI fees through 6/30/29 for actives and 12/31/28 for retirees.
23	Self-funded claim stabilization reserve	96,830,789	96,830,789	88,796,000	Reserve reflects 35% of FY23 self-funded prescription drug plan claims and expenses.
24	Administrative fees (07/24-12/28 Retirees)	18,444,776	19,890,720	11,895,126	At the 6/26/18 meeting, the Board approved waiver of administrative fees from 7/1/19 (actives) and 1/1/19 (retirees) through 6/30/24 (actives) and 12/31/23 (retirees). At the 9/25/18 meeting, the Board extended the waiver through 6/30/29 (actives) and 12/31/28 (retirees).
25	Unreserved	322,650,707	340,548,466	303,010,549	
26	Unrestricted gain primarily from benefit plans	441,319,847	461,769,405	406,788,086	Unrestricted gain or surplus for EUTF. This amount is cumulative from year-to-year.
27	<b>TOTAL LIABILITIES AND NET ASSETS</b>	<b>\$ 524,409,926</b>	<b>\$ 547,367,614</b>	<b>\$ 488,987,590</b>	



**Hawaii Employer-Union Health Benefits Trust Fund**  
**AGENCY (RETIREES) - STATEMENT OF REVENUE AND EXPENSES and CHANGES IN NET POSITION**  
**12 Month Ended June 30, 2024**  
**(PRELIMINARY-Unaudited)**

		6/30/2024 12-Month Actual	6/30/2024 Self-Funded Plans and Other 12-Month Actual	Notes
<b>REVENUES:</b>				
1	Premium revenue for self-funded plans	\$ -	\$ 163,683,820	
2	Investment income	9,093,948	-	<i>Dividends from short-term investments.</i>
3	Unrealized gain (loss) in investment	24,106,296	-	<i>Appreciation (Depreciation) in fair market value of short-term investments.</i>
4	CVS & Silverscript rebates		96,549,939	<i>Net of \$2.6M adjustment related to prior years.</i>
5	Direct subsidy - Silverscript	-	1,257,505	
6	LIPS low income subsidy - Silverscript, Kaiser	-	230,785	<i>Low income subsidy for Medicare Part D prescription drug plan Silverscript (\$202.08K); Kaiser (\$28.71K).</i>
7	LICS low Income subsidy - Silverscript		1,118,745	
8	Coverage GAP discounts - Silverscript		46,101,219	<i>Net of \$1.8M adjustment related to prior years.</i>
9	Reinsurance - Silverscript	-	34,720,049	
10	Performance penalties		1,243,268	
11	Experience refunds		(9,581,151)	<i>Initial and final accounting for HMSA CY22 \$10.18M, HMSA CY23 loss (\$19.82M), HDS CY23 \$54.88K.</i>
12	Total revenues	\$ 33,200,244	\$ 335,324,180	
<b>EXPENSES:</b>				
13	TPA expenses	\$ -	\$ 4,385,079	<i>Administrative expenses paid to self-funded plan carriers (CVS \$141.79K and Silverscript \$4.24M).</i>
14	Benefits paid for self-funded plans	-	316,759,032	<i>Claims paid to self-funded plan carriers (CVS \$67.45M and Silverscript \$249.23M) net of network guarantees and Rx settlements (Ranbaxy, Restatis, and Opana), and IBNR for CVS \$78.5K.</i>
15	ACA Reinsurance & PCORI fees		393,648	
16	Investment fees	54,737	-	<i>Fees associated with short-term investments.</i>
17	Bad Debt Expense	361,407		<i>Medicare Part B premium receivables deemed uncollectible.</i>
18	(Gain) loss from carrier payments	-	288,761	<i>This amount is the resulting (gain) loss after the collection of contributions and the payment to carriers. This amount fluctuates every month.</i>
19	Total expenses	416,144	321,826,519	
20	<b>EXCESS OF REVENUES OVER EXPENDITURES (LOSS)</b>	<b>\$ 32,784,100</b>	<b>\$ 13,497,661</b>	
21	Transfer to OPEB Trust to fund enhancement of KP hearing aid benefit (\$10M) and coverage of KP Silver and Fit fee (\$1.75M)	(11,750,000)		
22	<b>CHANGE IN NET ASSETS</b>	<b>\$ 21,034,100</b>	<b>\$ 13,497,661</b>	

**Hawaii Employer-Union Health Benefits Trust Fund**  
**OPEB STATEMENT OF NET POSITION**  
**12 Month Ended June 30, 2024**  
**(PRELIMINARY-Unaudited)**

			UNAUDITED Current Month Ended June 30, 2024		UNAUDITED Current Month Ended March 31, 2024		AUDITED Current Month Ended June 30, 2023	Notes
<b>ASSETS:</b>								
1	OPEB operating account	\$	2,183,024	\$	131,090	\$	712,435	
2	OPEB contributions in transit / receivable		-		-		45,588	
3	OPEB contributions		5,491,724,315		5,328,987,045		4,928,927,860	<i>Transferred \$11.75M from Agency to OPEB in 1/2024 for the Kaiser Silver &amp; Fit Program (\$1.75M - board approved on 7/25/23) and for the additional costs in Kaiser premiums related to the hearing aid coverage (\$10M - board approved on 10/24/23).</i>
4	OPEB contributions, at cost		5,491,724,315		5,328,987,045		4,928,973,449	
5	Net return on investment		2,378,972,154		2,299,217,395		1,801,403,575	
6	Total Assets	\$	7,872,879,493	\$	7,628,335,530	\$	6,731,089,458	
<b>LIABILITIES:</b>								
7	Vouchers and contracts payable		2,302,640		2,262,387		2,266,659	<i>Payable to Acuitas, Alliance Bernstein, ASB Int'l, BlackRock, Callan, Gateway, Geode, Heitman, Longtail, MS Prime, Mt. Lucas, Northern Trust, Nossaman, Meketa Investment Group, Inc., Reinhart, and SLC/Ryan Labs.</i>
<b>NET POSITION - Restricted for Other</b>								
8	Postemployment Benefits	\$	7,870,576,853	\$	7,626,073,143	\$	6,728,822,800	
<b>Employers</b>			<b>OPEB Net Assets</b>					
9	Hawaii DWS	\$	31,074,570					
10	Honolulu BWS		133,507,552					
11	Kauai DWS		17,054,494					
12	County of Maui		535,061,708					
13	County of Hawaii		371,993,121					
14	County of Kauai		235,490,947					
15	C&C Honolulu		1,397,339,216					
16	State of Hawaii		5,143,043,522					
17	HART		6,011,721					
18	Total	\$	7,870,576,853					

**Hawaii Employer-Union Health Benefits Trust Fund**  
**OPEB STATEMENT OF REVENUE AND EXPENSES**  
**12 Month Ended June 30, 2024**  
**(PRELIMINARY-Unaudited)**

		6/30/2024 12-Month - Other	6/30/2023 12-Month - Other	Notes
	<b>ADDITIONS:</b>			
1	OPEB ER contrib (PREFUNDING)	\$ 551,046,454	\$ 548,467,357	
2	OPEB ER contrib (PREMIUMS)	594,006,313	592,607,644	
3	Employer contributions at cost	\$ 1,145,052,767	\$ 1,141,075,000	
	Investment earnings:			
4	Investment income	123,020,690	89,266,284	
5	Securities lending income	842,237	333,861	
6	Unrealized gain (loss)	466,171,816	194,376,103	
7		\$ 590,034,743	\$ 283,976,249	
	Investment fees:			
8	Securities lending expense	\$ 185,233	\$ 73,403	
9	Management - Acuitas	3,288,991	3,158,630	
10	Management - Northern Trust	701,562	548,715	
11	Management - SLC (fka Ryan Labs)	79,176	61,383	
12	Management - Geode	291,804	307,790	
13	Management - Mt. Lucas	755,416	590,487	
14	Management - Reinhart	136,743	29,600	
15	Management - Gateway	386,343	415,618	
16	Management - Nossaman	71,690	42,831	
17	Management - Callan	218,000	219,000	
18	Management - BlackRock	64,497	341,745	
19	Management - AllianceBernstein	-	5,072	
20	Management - ASB Intl	927,580	1,130,515	
21	Management - MS Prime	1,798,892	2,446,544	
22	Management - Heitman	781,708	478,716	
23	Management - Longtail	852,833	63,750	
24	Custodial - Northern Trust	66,996	66,996	
25	Consulting - Meketa Investment Group, Inc.	469,680	448,000	
26	Total Investment Fees	\$ 11,077,144	\$ 10,428,795	
27	Investment Earnings, Net	\$ 578,957,599	\$ 273,547,454	
28	Retirees Premium	594,006,313	592,607,644	
29	<b>EXCESS OF REVENUES OVER EXPENDITURES (LOSS)</b>	\$ 1,130,004,053	\$ 822,014,811	
30	Net Position - Beginning	6,728,822,800	5,896,307,988	
31	Transfer from Agency Fund	11,750,000	10,500,002	
32	Net Position - Ending	\$ 7,870,576,853	\$ 6,728,822,800	

Experience Accounting of CVS Caremark Actives Self-Funded Plans  
Summary of FYE 6/30/2023 & FYE 6/30/2024

CVS Caremark Actives													
	JULY 2022	AUGUST 2022	SEPT 2022	OCT 2022	NOV 2022	DEC 2022	JAN 2023	FEB 2023	MAR 2023	APR 2023	MAY 2023	JUNE 2023	FYE 6/30/2023
	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>TOTAL</u>
Revenue	8,809,399	8,738,029	8,840,849	8,835,695	8,843,653	8,715,506	8,713,573	8,703,484	8,718,987	8,738,390	8,708,899	8,600,009	104,966,473
Less:													
Benefit Claims	10,881,201	10,854,133	10,787,729	11,270,702	11,118,727	11,414,070	12,216,663	11,194,183	13,500,640	11,895,106	12,121,836	13,842,497	141,097,489
Administrative Expense	68,052 10,949,254	68,052 10,922,186	68,052 10,855,781	68,052 11,338,754	68,052 11,186,780	68,052 11,482,122	68,351 12,285,014	68,508 11,262,691	72,814 13,573,454	68,632 11,963,738	68,455 12,190,291	68,041 13,910,538	823,114 141,920,603
Subtotal	(2,139,855)	(2,184,157)	(2,014,933)	(2,503,059)	(2,343,127)	(2,766,616)	(3,571,440)	(2,559,207)	(4,854,467)	(3,225,348)	(3,481,392)	(5,310,529)	(36,954,130)
Add:													
CVS Caremark Rebate	0	0	9,657,560	0	0	9,691,872	0	0	10,773,921	0	0	11,659,145	41,782,497
Network Guarantee	0	0	0	0	0	0	0	0	0	0	0	2,311,971	2,311,971
Epi pen Antitrust Settlement	0	0	0	0	0	0	0	0	0	0	0	131,129	131,129
IBNR	0	0	0	0	0	0	0	0	0	0	0	6,500	6,500
TOTAL	(2,139,855)	(2,184,157)	7,642,627	(2,503,059)	(2,343,127)	6,925,255	(3,571,440)	(2,559,207)	5,919,454	(3,225,348)	(3,481,392)	8,798,215	7,277,966

CVS Caremark Actives													
	JULY 2023	AUGUST 2023	SEPT 2023	OCT 2023	NOV 2023	DEC 2023	JAN 2024	FEB 2024	MAR 2024	APR 2024	MAY 2024	JUNE 2024	FYE 6/30/2024
	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>TOTAL</u>
Revenue	8,645,481	8,673,495	8,741,901	8,734,411	8,720,947	8,745,611	8,641,665	8,668,276	8,715,749	8,647,110	8,723,976	8,655,753	104,314,375
Less:													
Benefit Claims	12,670,110	13,855,282	12,628,170	13,753,835	12,928,072	13,782,520	14,680,184	14,090,583	14,353,864	14,972,343	15,521,274	14,322,953	167,559,189
Administrative Expense	68,413 12,738,523	68,417 13,923,699	69,073 12,697,243	69,181 13,823,016	69,485 12,997,557	69,555 13,852,075	69,095 14,749,279	69,411 14,159,994	69,654 14,423,518	69,631 15,041,974	69,595 15,590,869	69,242 14,392,194	830,752 168,389,941
Subtotal	(4,093,042)	(5,250,205)	(3,955,341)	(5,088,605)	(4,276,610)	(5,106,464)	(6,107,615)	(5,491,718)	(5,707,769)	(6,394,864)	(6,866,892)	(5,736,441)	(64,075,566)
Add:													
CVS Caremark Rebate	0	0	12,036,355	0	0	12,205,054	0	0	11,415,017	0	0	13,300,000	48,956,426
Ranbaxy Settlement	0	0	0	0	0	0	0	67,593	0	0	0	0	67,593
Restasis Settlement	0	0	0	0	0	22,560	0	0	0	0	0	0	22,560
Opana Settlement	0	0	0	0	0	0	0	0	420	0	0	0	420
IBNR	0	0	0	0	0	0	0	0	0	0	0	(8,200)	(8,200)
TOTAL	(4,093,042)	(5,250,205)	8,081,014	(5,088,605)	(4,276,610)	7,121,150	(6,107,615)	(5,424,126)	5,707,667	(6,394,864)	(6,866,892)	7,555,359	(15,036,768)

Experience Accounting of CVS Caremark Non-Medicare Retirees Self-Funded Plan  
 Summary of FYE 6/30/2023 & FYE 6/30/2024

CVS Caremark Non-Medicare Retirees													
	JULY 2022	AUGUST 2022	SEPT 2022	OCT 2022	NOV 2022	DEC 2022	JAN 2023	FEB 2023	MAR 2023	APR 2023	MAY 2023	JUNE 2023	FYE 6/30/2023
	Retirees	Retirees	Retirees	Retirees	Retirees	Retirees	Retirees	Retirees	Retirees	Retirees	Retirees	Retirees	TOTAL
Revenue	2,257,359	2,440,859	2,391,461	2,391,243	2,399,342	2,474,769	2,597,531	2,832,565	2,843,400	2,803,992	2,871,685	2,872,213	31,176,418
Less:													
Benefit Claims	4,272,966	4,750,869	4,533,873	4,429,432	4,647,803	4,476,181	5,699,607	5,058,098	5,410,465	5,117,660	5,644,014	5,184,499	59,225,466
Benefit Claims Medicare	(1,082,005)	(1,223,020)	(1,787,610)	(1,174,370)	(1,109,898)	(1,223,605)	(1,746,417)	(1,332,109)	(1,301,490)	(1,210,098)	(1,247,686)	(1,257,702)	(15,586,010)
Net Benefit Claims	3,190,961	3,527,849	2,746,263	3,255,062	3,537,906	3,362,575	3,953,190	3,725,989	4,108,975	3,907,562	4,396,327	3,926,797	43,639,457
Administrative Expense	14,628	14,628	14,628	14,628	14,628	14,628	16,460	16,997	19,688	17,275	17,503	17,723	193,414
	3,205,589	3,542,478	2,760,891	3,269,690	3,552,534	3,377,203	3,969,649	3,742,986	4,128,663	3,924,837	4,413,830	3,944,520	43,832,871
Subtotal	(948,229)	(1,101,619)	(369,431)	(878,448)	(1,153,192)	(902,435)	(1,372,118)	(910,422)	(1,285,263)	(1,120,844)	(1,542,145)	(1,072,308)	(12,656,453)
Add:													
CVS Caremark Rebate	0	0	3,345,546	0	0	3,371,582	0	0	3,858,914	0	0	4,229,384	14,805,426
Network Guarantee	0	0	0	0	0	147,885	0	0	0	0	0	0	147,885
Epi pen Antitrust Settlement	0	0	0	0	0	0	0	0	0	0	0	32,782	32,782
IBNR	0	0	0	0	0	0	0	0	0	0	0	(39,000)	(39,000)
TOTAL	(948,229)	(1,101,619)	2,976,115	(878,448)	(1,153,192)	2,617,033	(1,372,118)	(910,422)	2,573,651	(1,120,844)	(1,542,145)	3,150,859	2,290,640

CVS Caremark Non-Medicare Retirees													
	JULY 2023	AUGUST 2023	SEPT 2023	OCT 2023	NOV 2023	DEC 2023	JAN 2024	FEB 2024	MAR 2024	APR 2024	MAY 2024	JUNE 2024	FYE 6/30/2024
	Retirees	Retirees	Retirees	Retirees	Retirees	Retirees	Retirees	Retirees	Retirees	Retirees	Retirees	Retirees	TOTAL
Revenue	2,940,329	2,823,986	2,105,829	2,484,616	2,475,815	2,282,336	2,454,961	2,591,875	2,448,422	2,386,140	2,403,847	2,428,952	29,827,109
Less:													
Benefit Claims	5,267,184	6,135,304	5,283,520	5,676,908	5,460,283	5,307,676	6,650,257	5,961,759	5,398,378	5,986,462	5,788,516	5,084,284	68,000,531
Benefit Claims Medicare	(1,261,897)	(1,430,740)	(1,226,295)	(1,251,388)	(1,287,964)	(1,204,904)	(2,388,774)	(1,721,739)	(1,568,056)	(1,544,140)	(1,541,858)	(1,370,099)	(17,797,854)
Net Benefit Claims	4,005,287	4,704,564	4,057,225	4,425,520	4,172,319	4,102,772	4,261,483	4,240,020	3,830,322	4,442,322	4,246,658	3,714,184	50,202,676
Administrative Expense	14,448	13,579	11,924	11,962	11,900	11,877	11,370	11,468	11,058	10,802	10,680	10,720	141,788
	4,019,735	4,718,143	4,069,150	4,437,482	4,184,218	4,114,649	4,272,852	4,251,488	3,841,380	4,453,124	4,257,338	3,724,904	50,344,464
Subtotal	(1,079,406)	(1,894,157)	(1,963,320)	(1,952,866)	(1,708,403)	(1,832,313)	(1,817,891)	(1,659,613)	(1,392,958)	(2,066,984)	(1,853,491)	(1,295,952)	(20,517,354)
Add:													
CVS Caremark Rebate	0	0	4,706,936	0	0	4,321,018	0	0	4,260,577	0	0	4,200,000	17,488,531
Network Guarantee	0	0	0	0	0	421,294	0	0	0	0	0	0	421,294
Ranbaxy Settlement	0	0	0	0	0	0	0	50,149	0	0	0	0	50,149
Restatis Settlement	0	0	0	0	0	75,392	0	0	0	0	0	0	75,392
Opana Settlement	0	0	0	0	0	0	0	0	872	0	0	0	872
IBNR	0	0	0	0	0	0	0	0	0	0	0	600	600
TOTAL	(1,079,406)	(1,894,157)	2,743,616	(1,952,866)	(1,708,403)	2,985,391	(1,817,891)	(1,609,464)	2,867,619	(2,066,984)	(1,853,491)	2,904,048	(2,556,781)

Experience Accounting of Silverscript Medicare Retirees Self-Funded Plan  
 Summary of FYE 6/30/2023 & FYE 6/30/2024

SILVERSCRIPT - MEDICARE RETIREES ONLY													
	JULY 2022	AUGUST 2022	SEPT 2022	OCT 2022	NOV 2022	DEC 2022	JAN 2023	FEB 2023	MAR 2023	APR 2023	MAY 2023	JUNE 2023	FYE 6/30/2023
	MEDICARE	MEDICARE	MEDICARE	MEDICARE	MEDICARE	MEDICARE	MEDICARE	MEDICARE	MEDICARE	MEDICARE	MEDICARE	MEDICARE	TOTAL
	Retirees	Retirees	Retirees	Retirees	Retirees	Retirees	Retirees	Retirees	Retirees	Retirees	Retirees	Retirees	
Revenue	10,480,463	10,555,060	10,366,524	10,366,524	10,381,229	10,105,817	10,964,248	10,949,852	10,864,670	10,877,841	10,833,734	10,832,090	127,578,053
Less:													
Benefit Claims	16,507,048	18,532,423	17,046,654	17,839,389	17,261,368	17,389,816	18,692,727	17,245,511	19,315,666	18,413,160	18,093,364	19,126,995	215,464,121
Benefit Claims Paid to CVS	1,082,005	1,223,020	1,787,610	1,174,370	1,109,898	1,113,605	1,746,417	1,332,109	1,301,490	1,247,686	1,247,686	1,257,702	15,586,010
Administrative Expense	350,452	350,452	351,594	351,594	351,166	351,166	348,697	348,279	347,320	346,831	346,004	345,545	4,189,099
	17,939,505	20,105,894	19,185,858	19,365,353	18,722,431	18,854,587	20,787,841	18,925,899	20,964,476	19,970,088	19,687,055	20,730,242	235,239,230
Subtotal	(7,459,042)	(9,550,834)	(8,819,334)	(8,998,829)	(8,341,202)	(8,748,770)	(9,823,593)	(7,976,047)	(10,099,806)	(9,092,247)	(8,853,321)	(9,898,152)	(107,661,177)
Add:													
Coverage Gap Discount	0	0	12,623,266	0	0	12,389,405	0	0	5,381,129	0	0	10,872,773	41,266,573
Silverscript Rebate*	0	0	15,728,777	0	0	15,483,240	0	0	18,449,535	0	0	19,301,124	68,962,675
Direct Subsidy	(9,739)	(292,130)	(290,928)	(381,886)	(378,790)	(300,120)	(368,239)	(369,781)	(370,367)	(376,443)	(377,851)	(292,442)	(3,808,717)
LIPS Subsidy	17,975	17,302	17,444	17,976	17,343	17,277	16,259	16,788	16,757	16,460	15,930	15,230	202,739
LICS Subsidy	0	0	0	0	7,042	1,208,095	17,524	0	0	0	0	0	1,232,662
Part D Reinsurance	2,999,671	2,980,816	2,980,443	2,976,236	2,974,450	2,979,508	3,083,937	3,069,452	3,057,148	3,073,837	3,064,674	3,062,765	36,302,936
Network Guarantee	0	0	0	0	0	1,127,729	0	0	0	0	0	1,143,308	2,271,037
TOTAL	(4,451,135)	(6,844,846)	22,239,667	(6,386,502)	(5,863,531)	17,362,282	(7,074,112)	(5,259,588)	16,434,395	(6,378,393)	(6,150,569)	24,204,606	31,832,273

SILVERSCRIPT - MEDICARE RETIREES ONLY													
	JULY 2023	AUGUST 2023	SEPT 2023	OCT 2023	NOV 2023	DEC 2023	JAN 2024	FEB 2024	MAR 2024	APR 2024	MAY 2024	JUNE 2024	FYE 6/30/2024
	MEDICARE	MEDICARE	MEDICARE	MEDICARE	MEDICARE	MEDICARE	MEDICARE	MEDICARE	MEDICARE	MEDICARE	MEDICARE	MEDICARE	TOTAL
	Retirees	Retirees	Retirees	Retirees	Retirees	Retirees	Retirees	Retirees	Retirees	Retirees	Retirees	Retirees	
Revenue	10,729,184	10,834,940	11,649,801	11,212,107	11,112,010	11,390,607	11,487,566	11,257,945	11,079,395	10,994,064	10,819,949	11,289,143	133,856,711
Less:													
Benefit Claims	19,175,990	20,580,038	19,701,025	21,134,610	20,736,808	20,511,499	26,948,051	19,916,938	21,243,158	22,061,657	23,055,924	15,971,768	251,037,467
Benefit Claims Paid to CVS	1,261,897	1,430,740	1,226,295	1,251,388	1,287,964	1,204,904	2,388,774	1,721,739	1,568,056	1,544,140	1,541,858	1,370,099	17,797,854
Administrative Expense	339,303	344,638	353,685	353,654	353,297	353,440	357,592	357,265	357,143	357,408	358,958	356,908	4,243,292
	20,777,189	22,355,415	21,281,005	22,739,652	22,378,070	22,069,843	29,694,416	21,995,943	23,168,357	23,963,205	24,956,741	17,698,776	273,078,613
Subtotal	(10,048,005)	(11,520,476)	(9,631,205)	(11,527,544)	(11,266,060)	(10,679,237)	(18,206,850)	(10,737,998)	(12,088,962)	(12,969,141)	(14,136,793)	(6,409,633)	(139,221,903)
Add:													
Coverage Gap Discount	0	0	13,796,395	0	0	14,179,129	0	0	5,394,773	0	0	10,900,000	44,270,298
Silverscript Rebate	0	0	19,383,126	0	0	20,240,066	0	0	18,682,397	0	0	18,100,000	76,405,589
Direct Subsidy	(107,358)	(419,171)	(352,380)	(356,004)	(330,785)	(360,723)	517,721	522,368	515,906	512,883	512,883	602,165	1,257,505
LIPS Subsidy	16,276	15,985	16,392	15,770	16,654	16,358	8,539	16,852	18,176	16,644	28,300	16,130	202,075
LICS Subsidy	0	0	0	0	0	0	0	0	15,234	0	0	1,103,511	1,118,745
Part D Reinsurance	3,059,455	3,068,909	3,063,373	3,066,616	3,078,304	3,074,674	3,331,474	3,280,565	3,283,668	3,318,815	3,318,339	3,309,812	38,254,003
Reinsurance Settlement	0	0	0	0	0	0	0	0	0	0	0	(3,533,954)	(3,533,954)
Ranbaxy Settlement	0	0	0	0	0	0	0	100,299	0	0	0	0	100,299
Network Guarantee	0	0	0	0	0	1,709,460	0	0	0	0	0	0	1,709,460
IBNR	0	0	0	0	0	0	0	0	0	0	0	(79,100)	(79,100)
TOTAL	(7,079,633)	(8,854,754)	26,275,700	(8,801,162)	(8,501,888)	28,179,728	(14,349,115)	(6,817,914)	15,821,193	(9,120,799)	(10,277,271)	24,008,930	20,483,017

Experience Accounting of Verdegard (formerly known as HMA, LLC) Actives Self-Funded Plan  
 Summary of FYE 6/30/2023 & FYE 6/30/2024

Verdegard (formerly known as HMA, LLC)													
	<u>JULY 2022</u>	<u>AUG 2022</u>	<u>SEP 2022</u>	<u>OCT 2022</u>	<u>NOV 2022</u>	<u>DEC 2022</u>	<u>JAN 2023</u>	<u>FEB 2023</u>	<u>MAR 2023</u>	<u>APR 2023</u>	<u>MAY 2023</u>	<u>JUNE 2023</u>	<u>FYE 6/30/2023</u>
	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>TOTAL</u>
Revenue	33,919	33,482	34,535	34,535	34,731	33,533	31,227	32,158	32,991	33,125	33,046	31,867	399,149
Less:													
Benefit Claims	21,622	25,638	27,855	27,855	17,294	12,684	52,315	23,479	15,866	21,174	13,384	20,443	279,610
Administrative Expense	9,843	9,843	9,843	9,843	9,843	9,843	9,145	9,006	8,804	7,766	7,642	12,416	113,832
IBNR	0	0	0	0	0	0	0	0	0	0	0	(2,000)	(2,000)
	31,465	35,481	37,698	37,698	27,136	22,527	61,460	32,484	24,670	28,940	21,025	30,858	391,442
<b>TOTAL</b>	<b>2,454</b>	<b>(1,999)</b>	<b>(3,163)</b>	<b>(3,163)</b>	<b>7,594</b>	<b>11,006</b>	<b>(30,233)</b>	<b>(326)</b>	<b>8,321</b>	<b>4,185</b>	<b>12,021</b>	<b>1,009</b>	<b>7,708</b>

Verdegard (formerly known as HMA, LLC)													
	<u>JULY 2023</u>	<u>AUG 2023</u>	<u>SEP 2023</u>	<u>OCT 2023</u>	<u>NOV 2023</u>	<u>DEC 2023</u>	<u>JAN 2024</u>	<u>FEB 2024</u>	<u>MAR 2024</u>	<u>APR 2024</u>	<u>MAY 2024</u>	<u>JUNE 2024</u>	<u>FYE 6/30/2024</u>
	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>Actives</u>	<u>TOTAL</u>
Revenue	32,953	33,527	32,153	34,155	32,874	32,445	31,053	33,717	31,659	31,721	31,794	31,840	389,891
Less:													
Benefit Claims	16,265	23,393	32,058	26,406	23,014	26,909	50,687	19,037	20,254	10,776	16,142	14,336	279,277
Administrative Expense	9,415	9,448	9,415	9,560	9,496	9,432	9,239	9,399	9,399	9,287	9,223	8,028	111,342
IBNR	0	0	0	0	0	0	0	0	0	0	0	16,000	16,000
	25,681	32,841	41,473	35,965	32,510	36,341	59,926	28,436	29,654	20,063	25,365	38,364	406,619
<b>TOTAL</b>	<b>7,272</b>	<b>686</b>	<b>(9,321)</b>	<b>(1,810)</b>	<b>364</b>	<b>(3,895)</b>	<b>(28,873)</b>	<b>5,281</b>	<b>2,006</b>	<b>11,658</b>	<b>6,430</b>	<b>(6,524)</b>	<b>(16,728)</b>



**Monthly Carrier Report**

Date: October 1, 2024

Carrier: CVS Health

Period Report Covers: September 2024

**Customer Service Utilization and Performance Data:**

• **Call Center Statistics:**

- Number of calls answered by a live representative: 430
- Percentage of calls answered in 10 seconds: 99.1 % (384 calls)
- Percentage of calls answered in 30 seconds: 99.3 % (397 calls)
- Average speed of answer (number of seconds before live person answers calls): 11.5 seconds
- Average call duration: 805 seconds
- Calls abandoned at 30 seconds or greater: 2
- Percentage of calls abandoned at 30 seconds or greater: 0.2 %

Breakdown of calls by subject matter (one call can be logged in more than one category)

- Miscellaneous – View Account 39
- Claim Inquiry – Rejected Claim 81
- Claim Inquiry – Other 19
- Rx Order – Check Status 22
- Account Maintenance – ID Cards 21
- Rx Order Refill 48
- Plan Design - Override 34
- Plan Design- Prior Authorization 53
- Drug Coverage 162
- Eligibility – Processing Information 27
- Others 151

• **Requests by EUTF to Account Mgmt/Customer Care:**

Number of Requests: 86

The average turnaround time for requests was responded to in 1 business day.

All rush enrollments were processed within 1 business day.

Breakdown of escalations by subject matter:

- Account Maintenance – 20
- Enroll Verify – 4
- Outreach – 0
- Reinstatements – 7
- Research – 4
- Rush Enrollments – 51

• **Appeals: There is a lag in appeals activity. The following appeals information is for the month of August 2024.**

24 Total appeals for non-specialty drugs – 14 approved, 10 denied

17 Total appeals for specialty drugs – 10 approved, 7 denied



- **CVS Health Walk-In Servicing**  
No CVS Health members visited the customer service office on Bishop Street during the month of September 2024.
- **Operational Issues Pertaining to EUTF Members:**  
No information to report.
- **Issues Raised By or With the Vendor and Correspondence to or Referred to the Vendor:**  
No information to report.
- **Any Legal Actions or Proceedings Involving EUTF Members:**  
No information to report.
- **Pending or Approved Insurance Regulations or State Legislation Affecting Benefits:**  
No information to report.
- **New Issues with Respect to New Programs or Benefits of Interest to Board:**  
Learn more about a variety of topics for plan sponsors at <https://business.caremark.com/employers.html>  
You will find information about our 2025 formulary updates, Expanding RSV prevention, and Reducing the impact of drug shortages to help people stay on track.
- **EUTF Client Service Team Contact and Pending Changes to Team, If Any:**  
No information to report.
- **Community Activities Relating to Vendor's That May Be of Interest to EUTF:**  
No information to report.
- **Other:**

The Longs Drugs store located at 91-919 Fort Weaver Road closed for business on 9/10/2024. There were approximately 700 utilizers that filled prescriptions at that location in the last 12-months and active prescriptions were transferred to Longs Drugs located at 91-1401 Fort Weaver Road, which is approximately 1 mile away. Additionally, there are 3 other Longs Drugs stores located within a 5-mile radius as well as several other non-CVS network pharmacies.

There was one Consumer-level recall notices received by CVS Caremark for the month of September 2024.

- Atovaquone Oral Suspension, USP 750 mg/5 mL, distributed by Bionpharma Inc.

If you have questions, please contact me at 808-282-0724, or by email at [sandra.benevides@cvshealth.com](mailto:sandra.benevides@cvshealth.com).

Mahalo,



Sandra Benevides  
Strategic Account Executive

## Monthly Carrier Report

Date: October 1, 2024

Carrier: 9445

Period Report Covers: September 2024

▪ **Customer Service Utilization and Performance Data:**

▪ **Call Center Statistics:**

Number of calls – 776

Percentage of calls answered in 30 seconds – 89.4% (872 calls)

Average speed of answer (number of seconds before live body answers calls) 14.8 seconds

Abandonment rate 0.8%

Average call duration 700 seconds

Breakdown of calls by subject matter (one call can be logged in more than one category):

- Miscellaneous – View Member Account – 200
- Rx Verification - Rx Verify Directions – 84
- Plan Design – Prior Auth - 78
- Order Placement – CCR Refill – 438
- Order Status – Order Inquiry - 109
- Plan Design – Plan Benefit Override - 103
- Retail Test Claim - 90
- Plan Design – Plan Design Education - 265
- Others – 584

▪ **Requests by EUTF to Account Management/Customer Care:**

*Number of Requests:25*

*Average turnaround time complaints were responded to: less than 1 Day*

***Breakdown of escalations by subject matter:***

- *Account Maintenance:6*
- *Reinstate: 7*
- *Research:5*
- *Verify Enrollment:4*
- *Outreach: 1*
- *Rush/Manual Enrollments: 2*

- **CVS Health Walk-In Servicing**

*0 SilverScript member visited the customer service office on Bishop Street during the month of September 2024.*

- **Operational Issues Pertaining to EUTF Members:**

*No new issues to report.*

**Issues Raised by or With the Vendor and Correspondence to or Referred to the Vendor:**

*No new issues to report.*

- **Any Legal Actions or Proceedings Involving EUTF Members:**

*No new actions to report.*

- **Pending or Approved Insurance Regulations or State Legislation Affecting Benefits:**

*No new information to report.*

- **New Issues with Respect to New Programs or Benefits of Interest to Board:**

*No new issues to report.*

- **EUTF Client Service Team Contact and Pending Changes to Team, If Any:**

*No new issues to report.*

- **Community Activities Relating to Vendors That May Be of Interest to EUTF:**

*No new information to report*

- **Other:**

*No new information to report*

If you would like to have further detail on any of these topics, please feel free to contact Ty Bowers at 480-253-2963 or via email at [ty.bowers@cvshealth.com](mailto:ty.bowers@cvshealth.com).

Mahalo,



Ty Bowers  
Strategic Account Director, Medicare Account Services

## Monthly Carrier Report

Date: October 8, 2024

Carrier: Hawaii Dental Service

Period Report Covers: September 2024

- Customer Service Utilization and Performance Data:  
Number of in person interactions with HDS and EUTF participants (walk-ins) = 1
- Call Center Statistics:  
Total number of calls = 1038  
Percentage of calls answered in 10 seconds = 30.32%  
Percentage of calls answered in 30 seconds = 93.29%  
Average speed of answer (number of seconds before live body answers calls) = 15.26 seconds  
Abandonment rate = 0.87%  
Average call duration = 5:43 minutes  
Breakdown of calls by subject matter  
Eligibility/Benefits: 50%  
Claim Status: 13%  
Request for ID card: 10%  
Refer to EUTF (address change): 1%  
Dentist search: 2%  
Other Misc.: 12%  
HDS Online Support: 4%  
Results may not total 100%. One call could have more than one subject matter.
- Complaints:  
Number of Complaints = 0  
Average turnaround time complaints were responded to = n/a  
Breakdown of complaints by subject matter Number Resolved/Number Pending  
Resolution - None

- Operational Issues Pertaining to EUTF Members:

<b>Network Additions</b>
Dr. Edward Akioka - Hawaii
Dr. Ciara M Germano - Hawaii
Dr. Reginald C Rice - Hawaii
Dr. Shayma Thoppiyil - Oahu
Dr. Kristiana Tupua - Hawaii
Dr. Matthew W Willis - Oahu

Network Exits: None

- Issues Raised by or With the Vendor and Correspondence to or Referred to the Vendor: None
- Any Legal Actions or Proceedings Involving EUTF Members: None
- Pending or Approved Insurance Regulations or State Legislation Affecting Benefits: None
- New Issues with Respect to New Programs or Benefits of Interest to Board: None
- EUTF Client Service Team Contact and Pending Changes to Team, If Any: None
- Community Activities Relating to Vendors That May Be of Interest to EUTF:  
 HDS Employees prepared more than 10,000 infant toothbrush packets for Hawaii's youngest keiki. Throughout the year, the HDS foundation will distribute the packets to maternity wards at hospitals statewide. HDS Foundation donated 3,100 keiki SMILEKits to Dole Middle School and 400 adult SMILEKits to the State of Hawaii Department of Health. HDS Foundation attended HDS sponsored a panel discussion for the Council of Native Hawaiian Advancement at the Native Hawaiian Convention on September 17th. HDS Sponsored the March of Dimes Feeding Motherhood on September 20<sup>th</sup> as well as the HDA 007 Gala Give Kids a Smile Fundraiser of September 28<sup>th</sup>.

Other: HDS received one appeal.



Joey Lee, Director of Sales



## **Monthly Carrier Report**

Date: October 8, 2024

Carrier: Hawaii Medical Service Association (HMSA)

Period Report Covers: September 2024

### **Customer Service Utilization and Performance Data:**

- **Call Center Statistics:**

- Number of calls - 2590
- Average speed of answer (number of seconds before live body answers calls) - 00:42
- Abandonment rate - 2.41%
- Average call duration - 07:53 (MM:SS)

- **Appeals:**

HMSA's organization is set up with an initiative known as First Call Resolution (FCR). FCR is the concept that members should only have to contact HMSA one time with their concern/inquiry for it to be resolved. Although members' inquiries may not be resolved during the first call, the idea is that the member should not have to call HMSA again after their initial contact.

If a member is not satisfied with a response by a customer service representative, the member is provided with HMSA's Appeals Rights and Processes. If a member decides to submit a formal Appeal with HMSA, HMSA begins tracking the member appeal through our Appeals Department, which is the information that we have provided below.

- **April 2024**

- Total number of appeals unresolved from the previous month: 39
- Total number of appeals received: 25
- Average turnaround time appeals were responded to: 35.5 days (excluding appeals that were extended)
- Total number of appeals resolved with extensions: 0
  - In some instances, additional information is required to support the nature of an Appeal, such as additional medical records. Extensions are applied after obtaining member approval.
- Total number of appeals resolved without an extension: 26
- Breakdown of appeals by subject matter - Number Resolved/Number Pending Resolution:
  - 29 Appeals pending as of October 7, 2024.
  - 26 Appeals resolved in September 2024.
  - 9 Appeals withdrawn in September 2024.
  - 0 Appeals voided in September 2024.



Appeal Description	Count of Cases
<b>Overtured</b>	<b>14</b>
Imaging (MRI / XRAY)	6
CT	2
Lab Service	1
Out of State Surgery	1
Medication	1
Colonoscopy	1
Ambulance	1
Hyperbaric Oxygen Therapy	1
<b>Upheld</b>	<b>12</b>
Office Visit	2
CT	2
ER Services	2
Speech Therapy	1
Implant	1
Telehealth	1
Glucose Monitoring	1
Colonoscopy	1
Physical Exam	1
<b>Withdrawn</b>	<b>9</b>
Lab	2
Imaging (MRI / XRAY)	2
Office Visit	2
Ambulance	1
Chiro	1
PT	1
<b>Total</b>	<b>35</b>



**Operational Issues Pertaining to EUTF Members:**

None for September 2024.

**Issues Raised By or With the Vendor and Correspondence to or Referred to the Vendor:**

None for September 2024

**Any Legal Actions or Proceedings Involving EUTF Members:**

None for September 2024.

**Pending or Approved Insurance Regulations or State Legislation Affecting Benefits:**

None for September 2024.

**New Issues with Respect to New Programs or Benefits of Interest to Board:**

None for September 2024.

**EUTF Client Service Team Contact and Pending Changes to Team, if Any:**

None for September 2024.

**Community Activities Relating to Vendor's That May Be of Interest to EUTF:**

**West Hawaii Career Exposure Fair**

**Project Vision Eye Ball**

**Mililani Town Association Autumn Craft Fair**

**Hawaii Dental Association Foundation**

Give Kids a Smile

**Nanakuli Elementary School career day**

**March of Dimes**

**Girl Scouts - Women Distinction**

**MADD - Walk Like MADD**

**Hawaii Children's Action Network**

**Walk to End Alzheimer's Hilo**

Champions for Children

**COPD Education Day**

**REHAB Foundation - The Joy of Food and Wine**

**DOE externships**

**Hawaii Behavioral Health & Wellness Convention**

**La Ulu**

**HMSA/Longs drive thru flu shot clinic**

Oahu & Kauai

**Hawaii Literacy - Pau Hana Party**

**Other:**

None.

If you have any questions, please contact me at 952-7845.

Sincerely,

Christopher M. Letoto  
Manager, EUTF Program  
Account Management and Sales





**Monthly Carrier Report**

**Date:** October 8, 2024

**Carrier:** Humana

**Plan:** EUTF Medicare Advantage Plan (MA Only)

1. **Period Report Covers:** September 1, 2024 through September 30, 2024

**Customer Service Utilization and Performance Data:**

• **Call Center Statistics:**

- Number of calls answered by a live representative
  - EUTF specific: 2
  - Humana Book of Business: 64,410
- Percentage of calls answered in 30 seconds
  - Humana Book of Business: 96.32%
- Average speed of answer (number of seconds before live person answers calls):
  - Humana Book of Business: 6 seconds
- Average call duration:
  - Humana Book of Business: 575 seconds

**Breakdown of calls by subject matter** (calls can be logged in more than one category or not logged)

<b>Call Driver*</b>	<b>Number of Calls*</b>
○ Authorization/Referral	0
○ Benefits	0
○ Claims	0
○ Communication	0
○ Demographics	0
○ Disenrollment	0
○ Eligibility	0
○ Enrollment	0
○ Fulfillment	0
○ Grievance & Appeals	1
○ Rx	1
○ Provider	0
○ Outbound Call	0
○ Wellness	0
○ Other/Miscellaneous	0

\*EUTF specific

- **Requests by EUTF to Account Management/Customer Care (Account Concierge ACS):**
  - Number of Requests in September: 0 Account Management and ACS
  - The average turnaround time for request: N/A
  - All rush enrollments were processed within 1 business day(s): 0 requests made
  - Breakdown of escalations by subject matter:
    - Account Management and ACS subject matter – N/A
    - Rush enrollment subject matter – N/A
  
- **Appeals: The following appeals information is for the month of September 2024.**
  - Number of Appeals in September 2024: 0
  - Number of Appeals resolved in September 2024: 0
  - Number of Appeals withdrawn in September 2024: 0
  - Number of Appeals voided in September 2024: 0
  - Number of Appeals pending in September 2024: 0
  - Total number of appeals remaining open in September 2024: 0
  - Average turnaround time appeals were responded to: 0 or N/A days (excluding appeals that were extended)
  - Breakdown of appeals by subject matter:

Appeal Description	Count of Appeals
Overtured	N/A
Upheld	N/A
Outpatient Surgery	N/A
Withdrawn	N/A
<b>Total</b>	N/A

- **Humana Walk-In Servicing**
  - The Humana office at 733 Bishop St, Suite 2100, Honolulu, HI 96813 is open with normal business hours (Monday through Friday from 8:00 a.m. to 5:00 p.m.)
  - There were 0 EUTF members that visited the Humana office in September.
  
- **Operational Issues Pertaining to EUTF Members:**  
No information to report for September 2024.
  
- **Issues Raised By or With the Vendor and Correspondence to or Referred to the Vendor:**  
No information to report for September 2024.
  
- **Any Legal Action or Proceedings Involving EUTF Members:**  
No information to report for September 2024.
  
- **Pending or Approved Insurance Regulations or State Legislation Affecting Benefits:**  
No information to report for September 2024.

- **New Issues with Respect to New Programs or Benefits of Interest to Board:**  
No information to report for September 2024
- **Other:**  
No information to report for September 2024.

Please contact me with any questions at 502-418-2712, or by email at [jsmith55@humana.com](mailto:jsmith55@humana.com) .

Thank you,



Jenny Smith

Senior Account Executive

## **Monthly Carrier Report**

Date: October 9, 2024

Carrier: Kaiser Permanente

Period Report Covers: September 2024

- **Customer service utilization and performance data:**

- **Call center statistics:**

Number of calls: 454 Calls

Percentage of calls answered in 30 seconds: 90.35%

Percentage of calls answered in 20 seconds: 89.69%

Percentage of calls answered in 10 seconds: 89.25%

Average speed of answer: 12 seconds

Abandonment rate: 0.44%

Average call duration: average talk time 498 seconds

(29%) Access, (46%) Benefits, (0%) Billing Issues, (4%) Claims, (2%) Complaints,  
(12%) Eligibility, (3%) ID/Demographics, (4%) Materials Requested

- **Complaints:**

Number of Complaints: 57

Average turnaround time complaints were responded to: 9.23 days to close concerns

Breakdown of complaints by subject matter – Number Resolved/Number Pending

Resolution: 31 closed, 26 open

– Access – (4) Appointment schedule, (1) Referral

– Benefits & Enrollment – (1) Prescription, (1) COBRA

– Facility – (2) Wait for service, (2) Check in/out process

– Operational Process – (7) Phone system, (1) Membership system, (1) Other system, (7) KP.org, (1) Other

– Physician – (8) Courtesy & communication, (7) Diagnosis treatment or care

– Other – (7) Billing issue, (3) Confidentiality, (2) Lost property, (2) Balance billing

- **Appeals:**

Number of Appeals in September 2024: 0

Number of Appeals approved in September 2024: 0

Number of Appeals denied in September 2024: 0

- **Operational issues pertaining to EUTF members:**

Holiday Clinic Closures:

November 11, 2024 – In observance of Veterans Day

November 28, 2024 – In observance of Thanksgiving

November 29, 2024 – In observance of Thanksgiving

ER will remain open 24/7

Lihue Clinic closed for building fumigation – The Lihue Clinic will be temporarily closed on Tuesday, November 12 and Wednesday, November 13 due to fumigation of the building. Our Lihue Clinic doctors will be providing virtual phone and video appointments. The building and clinic will reopen on Thursday, November 14.

- **Issues raised by or with the vendor and correspondence to or referred to the vendor:**

No information to report

- **Any legal actions or proceedings involving EUTF members:**

No information to report

- **Pending or approved insurance regulations or state legislation affecting benefits:**

No information to report

- **New issues with respect to new programs or benefits of interest to board:**

No information to report

- **EUTF client service team contact and pending changes to team, if any:**

No information to report

- **Community activities relating to vendor's that may be of interest to EUTF:**

No information to report

- **Other:**

Healing garden blooms at the center of Moanalua Medical Center – A blessing was held on Friday, September 27, for Moanalua Medical Center's new garden courtyard. Once a stone garden, the courtyard was revitalized with plants and seating areas to provide visitors, patients, and employees a space to find calm and healing. The flourishing courtyard is named 'Īemikalu'ulu'u, meaning to reduce the heavy weight of sadness and pain, similar to the feeling of a breath of fresh air after of diving into deep waters.

For anyone who wishes to catch their own breath of fresh air, the courtyard is open between 7 a.m. and 6 p.m. daily right off of Moanalua Medical Center's lobby.

Troy Tomita



Senior Account Manager  
Kaiser Permanente

# Monthly Carrier Report – Hawaii EUTF

Date: October 08, 2024  
Carrier: Securian Financial  
Report Period: September 2024

## Customer Service, Utilization and Performance Data

- Group Term Life Claims Paid: 140
- Active Employee Claims: 11
- Retiree Claims: 39
- Average Processing Time: 5 business days

## Appeals Summary

- Number of Active Appeals: 0
- Number of Resolved Appeals: 0
- Average Time to Resolve: N/A
- Resolution Summary: N/A

## Walk-In Servicing

- Number of Walk-In Visits: 0
- Average Time per Walk-In: 0 minutes 0 seconds

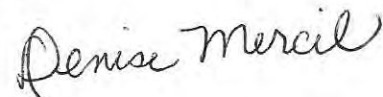
## Customer Service Statistics

- Number of Calls Received: 164
- Average Speed to Answer: 5 seconds
- Abandonment rate of all calls received: 0.00%
- Average Call Duration: 5 minutes 36 seconds
- Requests by Category:
  - Claims: 1
  - Member information changes or updates: 48
  - Policy related requests: 86
  - Other: 33

## Narrative of Other Activities

- Complaints: None to report.
- Operational Issues Impacting EUTF Members: None to report.
- Issues Raised By or With the Vendor: None to report.
- Legal Actions/Proceedings Involving EUTF Members: None to report.
- Pending/Approved Insurance Regulations Impacting Benefits: None to report.
- New Programs and Benefits of Interest to Board: None to report.
- Changes to EUTF Service Team: None to report.
- Community Activities of Interest to the Board: None to report.

Submitted 10/08/2024 by:  
Denise Mercil, Field Service Representative, Securian Financial  
(808) 282-6783, [Denise.Mercil@Securian.com](mailto:Denise.Mercil@Securian.com)





# Monthly Carrier Report

**Date:** October 9, 2024

**Plan:** EUTF Supplemental Medical and Prescription Drug Plan

**Carrier:** Verdegard Hawaii formerly known as HMA

**Period Report Covers:** September 1<sup>st</sup>, 2024 through September 30<sup>th</sup>, 2024

## Customer Service Utilization and Performance Data

**Total number of employees enrolled:** 543

**Total number of members enrolled:** 1469

**Total number of claims paid:** 187

**Average turnaround time:** 25 days

## Call Center Statistics

**Number of Calls:** 15

**Average Speed of Answer From a Live Body:** 6 Seconds

**Abandonment Rate:** 0%

### Breakdown of Calls (By Subject Matter)

Although we do not have an automated manner in which to track the breakdown of calls by subject matter, our detailed assessment for this month is as follows:

- **Approximately 50% of calls received are member's following-up on claims status.**

**Claims status inquiries include:**

- Confirm receipt of claims and documents
- Confirm claim reimbursement amounts
- Claims status

- **Approximately 50% of calls received are of other miscellaneous related inquiries.**

**Miscellaneous inquiries include:**

- Requests for claim form
- Inquiry to learn more about the plan
- Benefit check
- Eligibility

- **Complaints:**  
Number of Complaints: 0  
Average turnaround time complaints were responded to: N/A  
Breakdown of complaints by subject matter: N/A  
Resolution: N/A
- **Operational issues pertaining to EUTF Members:**  
None to report.
- **Issues raised by or with the vendor and correspondence to or referred to the vendor:**  
None to report.
- **Any legal actions or proceedings involving EUTF Members:**  
None to report.
- **Pending or approved insurance regulations or state legislation affecting benefits:**  
None to report.
- **New issues with respect to new programs or benefits of interest to board:**  
None to report.
- **EUTF client service team contact and pending changes to team, if any:**  
None to report.
- **Community activities relating to vendor's that may be of interest to EUTF:**  
None to report.
- **Others:**

Please feel free to contact me directly at (480)-921-8944 ext 3319 with any questions or clarification concerning this report.

Sincerely,  
Salena Atencio




Account Management  
Verdegard Hawaii





**Monthly Carrier Report**

**Date:** October 6, 2024  
**To:** **EIF Board of Trustees**  
**From:** VSP Vision Care   
Monica Kim, Market Director - Hawaii  
**Report Period:** **SEPTEMBER 2024**

• **Customer Service Utilization Data:**

- EIF customer walk-ins to the VSP Hawaii Office in September 2024: N/A

• **Call Center Statistics:**

**VSP's main 1-800 customer service line (1-800-877-7195)** *Monthly Data*

*2024 Quarterly Performance Guarantee applied to VSP's main Customer Service Line*

- Number of Calls Company-Wide: 702,364 calls

**EIF-specific toll-free number (1-866-240-8420)** *Monthly Data*

*2024 Quarterly Performance Guarantee now applies to EIF-specific phone line*

*Q3 2024 Results included in VSP's Performance Standards Report*

- Number of calls: 105 Active & Retiree calls
- Average speed of answer (# of seconds before live body answers calls): 49 seconds
- Call abandonment rate: 3.81%
- Average call duration: 2 minutes 42 seconds

**EIF Member Call Response Report (combined):** 197 Active & 310 Retiree calls

- VSP Confidential EIF Call Response Reports enclosed  
(Call breakdown by subject matter)

• **Complaints:**

- Number of Complaints\*: 2 (2 Active & 0 Retiree)
- Average turnaround time complaints were responded to:
  - Call Resolution (same day) 100%
  - Complaint Acknowledgement within 5 business days 100%
  - Complaint Resolution within 30 calendar days 100%

- Breakdown of complaints by subject matter:

VSP Confidential Complaint & Grievance Summary Reports (Active & Retiree) enclosed

- Number Resolved 2
- Number Pending Resolution 0

\*Individuals with complaints may state more than one issue

- **Operational Issues Pertaining to EUIF Members:**

**What's changing?**

VSP has been working on ways to improve our member experience with the Intelligent Virtual Agent (IVA, formerly known as Interactive Voice Response or IVR) Self-Service Application. **Beginning September 11, 2024, the Member IVA application will use a new process for caller authentication.** A pilot run from July 10, 2024, through the present resulted in an 8% increase in authentication for VSP's book of business, over the current method.

**New IVA Authentication Process Details**

Calls to our member toll-free numbers will be asked to verbally spell the primary member's first and last name and to provide the primary member's date of birth. This method aligns with the most successful process currently used by VSP Customer Care representatives to identify a member on a live call, today.

**Why It Matters**

**Improved Member Satisfaction** – Increasing authentication rates in the IVA will allow more members to self-serve when that's their preferred method.

- **Issues Raised By or With the Vendor and Correspondence To or Referred to the Vendor:** None
- **Any Legal Actions or Proceedings Involving EUIF Members:** None
- **Pending or Approved Insurance Regulations or State Legislation Affecting Benefits:** None
- **New Programs or Benefits of Interest to the Board:** None
- **EUIF Client Service Team Contact and Pending Changes to Team, if Any:** None
- **Community Activities Relating to Vendor's That May Be of Interest to EUIF:** None
- **Other:** None

Call Response Summary Report  
 HI EMPLOYER UNION HEALTH TRUST 12216503  
 September 2024

On average, for 1,000 subscribers, VSP receives 6 calls per month

Total Client Calls

197

<u>Reason</u>	<u>Reason For Calling</u>	<u>Client Counts</u>	<u>Client Percent</u>	<u>VSP Percent BOB</u>
Claims	In-Network Claim	3	1.52%	1.23%
	Out of Network Claim	9	4.57%	2.55%
Doctor Referral	Provided Dr List	2	1.02%	4.88%
	Refer to Client	1	.51%	.68%
Eligibility Not Online	Benefits Description link received	43	21.83%	25.10%
	Dependent Check Eligibility	1	.51%	1.47%
	Member Benefits Description	9	4.57%	4.86%
	Member Check Eligibility	23	11.68%	15.23%
	Provider List Link received	1	.51%	.86%
IVA Service	In Person Sign Language Translation	1	.51%	.00%
	Issuing	3	1.52%	.62%
Language Assistance / Translation	Available Services	37	18.78%	12.46%
	Benefits Description	39	19.80%	14.25%
Member Authorization	Correct Member/Dependent Info	1	.51%	.69%
	ID Number/ID Card Inquiry	16	8.12%	3.86%
Member Benefits & Services	Patient Paid Privately	1	.51%	.09%
	Password Reset	1	.51%	2.20%
	Register / Update Account	1	.51%	1.99%
	Change/Cancel	2	1.02%	1.48%
Member VSP.com	Premiums/Billing	3	1.52%	1.10%
TPA/Individual Plan				
Grand Total		197		

Report includes authenticated and tracked calls and should only be used for trending purposes and does not represent the total number of calls received by VSP. It should not be used as a comparison to other reports, or for reporting of Performance Guarantees.

Call Response Summary Report  
 HI EMPLOYER-UNION TRUST RETIRE 12216652  
 September 2024

On average, for 1,000 subscribers, VSP receives 6 calls per month

Total Client Calls

310

<u>Reason</u>	<u>Reason For Calling</u>	<u>Client Counts</u>	<u>Client Percent</u>	<u>VSP Percent BOB</u>
Claims	In-Network Claim	4	1.29%	1.23%
	Out of Network Claim	10	3.23%	2.55%
Doctor Referral	Provided Dr List	8	2.58%	4.88%
	Member Not Found	2	.65%	.16%
Eligibility Not Online	Refer to Client	1	.32%	.68%
	Benefits Description link received	77	24.84%	25.10%
IVA Service	Dependent Benefits Description	1	.32%	.54%
	Dependent Check Eligibility	1	.32%	1.47%
	Member Benefits Description	36	11.61%	4.86%
	Member Check Eligibility	56	18.06%	15.23%
	Provided Dr List	2	.65%	.64%
	Provider List Link received	4	1.29%	.86%
Member Authorization	Issuing	1	.32%	.62%
Member Benefits & Services	Available Services	48	15.48%	12.46%
	Benefits Description	33	10.65%	14.25%
	Correct Member/Dependent Info	1	.32%	.69%
	ID Number/ID Card Inquiry	13	4.19%	3.86%
Member VSP.com	Medically Related	2	.65%	.20%
	Claim Submission	2	.65%	.46%
	Password Reset	6	1.94%	2.20%
	Register / Update Account	1	.32%	1.99%
TPA/Individual Plan	Change/Cancel	1	.32%	1.48%
Grand Total		310		

Report includes authenticated and tracked calls and should only be used for trending purposes and does not represent the total number of calls received by VSP. It should not be used as a comparison to other reports, or for reporting of Performance Guarantees.

Complaints and Grievances Summary Report  
 HI EMPLOYER UNION HEALTH TRUST - 12216503  
 September 2024 - September 2024  
 State: ALL

Complaint Category: Member

Complaint Description	SEP	TOTAL
MEMBER UNHAPPY WITH VSP REGARDING CLAIM PROCESSING-PROCEDURE S/ACCURACY	1	1
MEMBER UNHAPPY WITH VSP REGARDING POLICIES-AOB/OON	1	1
<b>TOTAL</b>	<b>2</b>	<b>2</b>

Complaints and Grievances Summary Report  
HI EMPLOYER-UNION TRUST RETIRE - 12216652  
State: ALL  
September 2024 - September 2024

NO COMPLAINTS FOR THIS CLIENT DURING THIS PERIOD.