



REMIF Self-Insurance Committee Agenda

Date: May 23, 2019

Time: 2:00 p.m.

Telephonic Committee Meeting

Dial In: (646) 664-4400/ Conference ID: 17171#

AGENDA

- I. ROLL CALL
 - A. Present:
 - B. Also in attendance:
 - C. Absent:
- II. APPROVAL OF MINUTES
 - A. Meeting of February 28, 2019, March 14, 2019, April 11, 2019 and May 9, 2019
- III. ITEMS FOR DISCUSSION
 - A. EnvisionRx Potential Plan Changes for FY 19/20 – **Action Item** – Attachment
 - i. Non-Essential Drug draft letters
 - ii. 90 day maintenance drugs at retail pharmacy draft letter
 - iii. Update on effective dates for Non-Essential Drugs and 90 day maintenance drugs at Retail Pharmacy
 - B. SUMMARY PLAN DESCRIPTION (SPD) for PLAN YEAR 7-1-19/20 – **Action Item** – Attachment –
 - i. Clarify eligibility for members returning from military service
 - ii. Electronic Consultations while confined in hospital
 - C. SELF-FUNDED PLAN – QUALITY OF CARE ISSUES – Discussion
 - i. A member city has expressed quality of care issues in the plan. Discussion on concerns and how to respond to concerns.
 - D. Audit – Discussion Only
 - E. Policies and Procedures project – Informational only - Update
 - F. Dependent Eligibility Audit – Update Informational Only

Next Meeting: TBA

Meeting adjourned:

Health Insurance Committee Members:

Danette Demello – City of Arcata – 736 F Street, Arcata, CA 95521; 707-825-2120; ddemello@cityofarcata.org

James Leon – Town of Windsor – 9291 Old Redwood Highway, Windsor, CA 95492; 707-838-5379; jleon@townofwindsor.com

Kelly Buendia – City of Lakeport – 255 Park Street, Lakeport, CA 95453; 707-263-5613 x30; kbuendia@cityoflakeport.com

Sheri Mannion—City of Ukiah –300 Seminary Drive, Ukiah, CA 95482; 707-463-6244; smannion@cityofukiah.com

Stephanie Garrabrant-Sierra – City of Willits—111 E. Commercial, Willits, CA 95490; 707-459-4601; sgsierra@cityofwillits.org

_____ I certify this document was posted at my location on
_____, 2019.

After signing, please scan a copy to Anna Santos at REMIF.

City: _____ Signature _____

Print Name: _____