



## SEBC and SEBC Subcommittee Meetings **(September 2024 Updates)** *Get the Facts on What's Happening*

As the “administrative arm” of the State Employee Benefits Committee (SEBC), the Statewide Benefits Office (SBO), Department of Human Resources (DHR) is providing the following frequently asked questions document as a resource to employees and retirees, which includes facts on what’s being discussed related to the Group Health Insurance Plan (GHIP) at the SEBC and SEBC Subcommittee meetings and actions taken by the SEBC.

Learn more about the SEBC and SEBC Subcommittees, including committee members, meetings schedules, meeting recordings and meeting materials by visiting the [SEBC page](#) of SBO’s website. Each meeting is open to the public and provides an opportunity for public comment. In addition, suggestions, comments, and/or concerns can be sent to the SEBC at [sebc@delaware.gov](mailto:sebc@delaware.gov).

### **Frequently Asked Questions:**

#### **Q. What decision did the SEBC make regarding the Fiscal Year 2025 Budget for the Group Health Insurance Plan (GHIP)?**

A. At the September 23, 2024 SEBC meeting, the SEBC voted to approve the Fiscal Year (FY) 2025 budget for the Group Health Insurance Plan (GHIP). The FY2025 budget establishes anticipated operating revenues, expenses, net monthly income, reserves, and surpluses needed to manage the GHIP. The total operating expenses for FY2025 are projected to be just under \$1.5 billion, with total revenues expected to be just above \$1.5 billion. Expenses include the GHIP paying back the \$7.3 million transferred from the Office of Management and Budget (OMB) in FY2024. The GHIP is expected to end the FY2025 plan year with a surplus of approximately \$34 million.

#### **Q. What decision did the SEBC make regarding the Scope of Work for the upcoming Life Insurance Benefit Request for Proposals (RFP)?**

A. At the September 23, 2024 SEBC meeting, the SEBC voted to approve the recommendation provided by the Financial and Health Policy and Planning Subcommittees to revise the scope of work for the upcoming Life Insurance Benefit Request for Proposals (RFP). The SEBC voted to update the scope of work to accept the following types of proposals from vendors:

- Group Universal Life proposals that match the current benefit
- Group Universal Life proposals that offer enhancements in the maximum coverage for employees and their spouses, as well as additional enhancements to the Accidental Death and Dismemberment (AD&D) benefit
- Group Term Life proposals that are similar in coverage amounts to the current Group Universal Life benefit
- Group Term Life proposals that offer enhancements in the maximum coverage for employees and their spouses, as well as additional enhancements to the Accidental Death and Dismemberment (AD&D) benefit

In addition to revising the scope of work, the SEBC voted to require that all bidders submit a detailed transition plan should the Proposal Review Committee (PRC) vote to recommend the SEBC award a different life insurance product than what is currently offered by the State. The SEBC also agreed that such an award will be made for either a Group Universal Life or Group Term Life product, but not both, to ensure the best possible pricing for members and maintain compliance with the requirements of most life insurance companies.

At the request of the SEBC and the SEBC Financial and Health Policy and Planning Subcommittees, the Statewide Benefits Office (SBO) will develop and release a survey to gain feedback from employees currently enrolled in the Group Universal Life Insurance plan, as well as those who are eligible for the plan but not currently enrolled. The results of this survey, likely to be released in early Calendar Year 2025, would be shared with the PRC to assist in their review of vendor bids and a recommendation to the SEBC. The RFP is scheduled to be advertised in the first quarter of 2025 for a contract beginning July 1, 2026.

**Q. What decisions did the SEBC make regarding the Scope of Work for the upcoming Audit Services Request for Proposals (RFP)?**

A. At the September 23, 2024 SEBC meeting, the SEBC voted to approve the proposed scope of work for the Audit Services Request for Proposals (RFP), which is to procure medical and prescription drug claim and administration audit services that focus on retrospective reviews of plan experience, as well as allowing bids from companies offering ongoing and real time administrative claims and fee reviews for medical and pharmacy benefit programs. The RFP is scheduled to be advertised in October 2024 for a contract beginning July 1, 2025.

**Q. What program enhancements are the SEBC Health Policy and Planning Subcommittee considering for the Highmark non-Medicare Well360 Virtual Health program?**

A. At the September 16, 2024 Health Policy and Planning Subcommittee meeting, the Subcommittee reviewed potential program enhancements for the Highmark [Well360 Virtual Health program](#). State of Delaware Highmark non-Medicare health plan members have access to the Well360 Virtual Health program for telemedicine services. Well360 provides members the ability to access virtual care for urgent and acute conditions, behavioral health services and psychiatry. There is now the ability to make available virtual primary care, dermatology, women's health and lactation services through the Well360 program. The Subcommittee discussed the potential benefits, drawbacks and costs related to adding these services and is expected to make a recommendation at the October 21, 2024 meeting. This program and recommendation will then be presented to the SEBC at the October 28, 2024 meeting for review and consideration.

**Q. What was reviewed with the SEBC Health Policy and Planning Subcommittee regarding House Resolution 32 and Programs and Services Related to Diabetes Prevention and Management?**

A. At the September 16, 2024 Health Policy and Planning Subcommittee meeting, the Subcommittee reviewed [House Resolution 32](#) which urges the SEBC to collaborate with a health system and technology partner to deliver focused and targeted care protocols to a measurable cohort of GHIP plan participants to proactively address the growing problem of diabetes and metabolic syndrome\* in the population. The goals of this resolution are to improve the health of State employees, retirees, and other Group Health Insurance Plan (GHIP) participants through better health outcomes, improved quality of life, decreases in missed workdays, and reductions in plan costs for participants and the State. This resolution does not mandate action by the SEBC, however, will be reviewed by the SEBC at the October 28 meeting.

In addition to reviewing this resolution, the Statewide Benefits Office (SBO) provided a [presentation](#) on the current programs, services and resources available to State employees, retirees and other GHIP plan participants to assist with the management of chronic conditions such as diabetes, obesity, and metabolic syndrome. Many resources are available at no cost to members and focus directly on diabetes prevention and management. Other available resources target diabetes and metabolic syndrome through overall health and wellness promotion, focusing on a whole-person approach and consider mental health needs, social determinants of health, and a variety of outstanding factors that impact a member's life and wellbeing.

[The full report](#) detailing available diabetes management and prevention programs and resources is available on the [meeting materials section of the SEBC page](#) and provides readers the ability to search for available programs by health plan. All GHIP members are encouraged to review their benefits on the [SBO website](#) and take advantage of the programs and resources available to help them manage their health and prevent the development or worsening of chronic metabolic conditions.

*\* Metabolic syndrome is a group of conditions that together increase the risk of cardiovascular disease, type 2 diabetes, and stroke. A person is diagnosed with Metabolic syndrome if they have at least three of the following conditions: high blood pressure, elevated blood sugar/glucose, low levels of HDL (good) cholesterol, high triglyceride levels, or abdominal obesity.*