BOARD OF EDUCATION CITY OF LONG BRANCH NEW JERSEY

MINUTES JULY 23, 2024

The Annual Retreat Meeting of the Long Branch Board of Education was held was held in the 3rd floor conference room of the Long Branch Administrative Office, 540 Broadway, Long Branch, New Jersey.

Mrs. Peters called the meeting to order at 12:20 P.M.

A. ROLL CALL

Mrs. Peters - President

Mrs. Youngblood Brown – 1:21 P.M.

Mr. Garlipp

Mr. Ferraina - Vice President

Ms. Benosky

Mr. Torres

Mr. Zambrano

Mrs. Dangler - absent

Mrs. Perez

Board Attorney - Bruce Padula, Esq.

A-1. STATEMENT OF THE MANNER OF NOTIFICATION OF THE MEETING

Nancy L. Valenti, Assistant School Business Administrator/Assistant Board Secretary stated adequate notice of the meeting of the Long Branch Board of Education has been provided by a Schedule of Public Meetings published in the <u>Asbury Park Press.</u> Mrs. Valenti further stated a Schedule of Public Meetings has been posted in the Board of Education Office and the Office of the City Clerk, Long Branch, New Jersey.

Mrs. Valenti made the following announcement: Fire exits are located in the direction indicated. In case of fire, you will be signaled by bell and/or public address system. If so alerted to fire, please move in a calm and orderly fashion to the nearest smoke-free exit.

A-2. OBJECTIONS, IF ANY, TO THE VALIDITY OF THE MEETING

Mrs. Valenti stated that the objecting member must give supporting reasons.

B. FLAG SALUTE AND PLEDGE OF ALLEGIANCE

Mrs. Peters, Board President, saluted the flag and led the Pledge of Allegiance.

C-1. STATEMENT TO THE PUBLIC

Mrs. Peters made the following announcement: Often times it may appear to members of our audience that the Board of Education takes action with very little comment and in many cases by unanimous vote. Before a matter is placed on the agenda at a public meeting, the administration has thoroughly reviewed the matter with the Superintendent of Schools. If the Superintendent of Schools is satisfied that the matter is ready to be presented to the Board of Education, it is then referred to the appropriate Board committee. The members of the Board committee work with the administration and Superintendent to assure that the members fully understand the matter. When the committee is satisfied with the matter, it is presented to the Board of Education for discussion before any final action is taken. Only then is it placed on the agenda for action at a public meeting. All agenda attachments are available for public review. In rare instances, matters are presented to the Board of Education for discussion at the same meeting that final action may be taken.

C-1. STATEMENT TO THE PUBLIC (continued)

Time may be allocated for public comment at this meeting. Each speaker may be allotted up to three (3) minutes and one (1) opportunity to address the Board when recognized by the presiding officer. Individuals wishing to address the Board shall be recognized by the presiding officer and shall give their names, addresses and the group, if any, that they represent. Although the Board encourages public participation, it reserves the right, through its presiding officer, to terminate remarks to and/or by any individual not in keeping with the conduct of a proper and efficient meeting. With the exception of those individuals whose names are on the agenda this evening, the Board will not respond to questions during the public participation portion of this meeting involving the employment, appointment, termination of employment, negotiations, terms and conditions of employment, evaluation of the performance of, promotion or disciplining of any specific, prospective or current employee.

C-2. OPPORTUNITY TO ADDRESS THE BOARD RELATING TO AGENDA ITEMS No one addressed the Board.

Mr. Rodriguez introduced the presenters to the Board.

E. <u>PRESENTATIONS</u> – Doug Forrester, Partnership Health Joseph Colombo, Arthur J. Gallagher & Co.

Mr. Forrester gave a presentation on the Partnership Health Center and distributed to the Board members a hand out with a review of the operations, highlighting all of the services the Heath Center has to offer our staff members and their families (APPENDIX E-1). He explained the relationship between our carrier, Health Center and claims experience.

Mr. Colombo gave the Board an update on the status of the district's medical insurance with Horizon and the rates for Long Branch Board of Education as compared to the State plan.

The Board engaged in a lengthy discussion regarding health benefit rates, additional services, Health Center staffing, stabilizing costs, utilization compared to maximum capacity utilization, and collaboration with outside groups including the City.

Mrs. Youngblood Brown arrived to the meeting at 1:21 P.M.

Mr. Forrester and Mr. Colombo left the meeting at 1:30 P.M.

At 1:37 P.M. Mrs. Peters introduced Richard A. Mojares, M.D. of Family First Urgent Care to give a presentation to the Board.

Dr. Mojares introduced himself to the Board members, giving the Board a brief overview of his background in health care, opening, running and growing urgent care and primary care practices. He described to the Board the services he can provide to the district regarding the Partnership Health Center operation.

Mrs. Perez left the meeting at 2:10 P.M.

The Board engaged in a lengthy discussion regarding the utilization of the Health Center based on staff level.

Minutes – Annual Retreat Meeting July 23, 2024 At the end of the discussion, Mr. Rodriguez stated that based on the Board's discussions, the consensus is to have an outside consultant come in to evaluate our Health Center and provide an opinion on how we can improve our financial operation of the Health Center to be sustainable over time.

The Board agreed. Mr. Rodriguez stated that he and Mr. Genovese will reach out to Dr. Mojares to arrange for an independent expert evaluation of our Health Center operation and will provide a report to the Board at the October Board meeting.

Dr. Mojares left the meeting at 2:26 P.M.

Mrs. Peters thanked the Board members for completing the self-evaluation. She distributed copies of the evaluation compiled by NJSBA to each member and stated that the Board would discuss at the August 28th Board meeting.

F. ADJOURNMENT – 2:29 P.M.

There being no further discussion, motion was made by Mr. Ferraina, seconded by Mr. Garlipp and carried by roll call vote that the Board adjourn the meeting at 2:29 P.M. Ayes (7), Nays (0), Absent (2) Mrs. Dangler and Mrs. Perez

Nancy L. Valenti Assistant School Business Administrator/Assistant Board Secretary



Douglas R. Forrester

Chairmen

Review of *Partnership Health Center Long Branch* Operations Long Branch Board of Education Retreat July 23, 2024

- I. Overview of current PHCLB Operations
 - a. Current Services
 - b. Utilization, Care Coordination & ROI Calculations
 - c. Current Utilization Patterns (See Chart)
- II. Current ROI Estimate
 - a. Current Horizon Reimbursements
 - b. Value of Non-Reimbursable Services
 - c. Value of Care Coordination
 - d. "Embedded" PHCLB Value in Rates (see AJG Commentary)
- III. "Maximizing" Utilization
 - a. "Maximum" Utilization (See Chart)
 - b. Utilization Challenges
 - c. Union Leaders' Observations
 - d. Direct Member Communications
 - e. Weight Loss Drug Program
 - f. Biennial Health Fairs/Health Center Incentives
 - g. Enhanced IT Portal
- IV. Collaboration/Cost Sharing
 - a. Partnership Health Center Association
 - b. City of Long Branch Facility
 - c. SHBP First Responder Program
- V. AJG Commentary (Joe Colombo)
 - a. Current estimate of PHCLB Value in Horizon Rates
 - b. Rate Renewal Collaboration to Isolate future PHCLB related gains



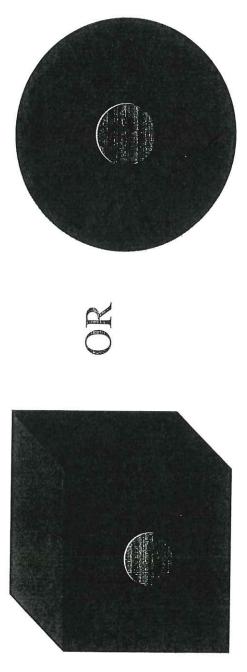
PHCLB Actual Utilization versus Capacity Report¹ Using potential capacity identified over the last 24 weeks

All reciprocal memberships (including Long Branch) utilizing PHCLE	Capacity (MsitsPer Week)	Total Paid Amount per week at 100% Capacity ²	Annual Wisit Count at 100% Capacity	Annual Paid Amount at 100% Capacity ²	Hours (Per Week)	Last 24 Week Visit Average (Visits Per Week 12/29/2024) 5/31/2024)	% Capacity based on Last 24-week Average
Primary Care	130/wk	\$15,626.42	6,760	\$812,573.84	65/wk	65/wk	20%
Physical Therapy	32/wk	\$2,975.25	1,664	\$154,713.00	16/wk	12/wk	38%
Behavioral Health	12/wk	\$1,738.27	624	\$90,390.04	12/wk	3/wk	25%
Chiropractic	28/wk	\$6,514.60	1,456	\$338,759.20	11/wk	12/wk	43%
Acupuncture	16/wk	\$479.54	832	\$24,936.08	10/wk	5/wk	31%
Total			11,336	\$1,421,372.16			

^{1.} Hours involve strictly clinical time seeing patients
2. Based on the avg BCBS reimbursement rates in 2023 for each category

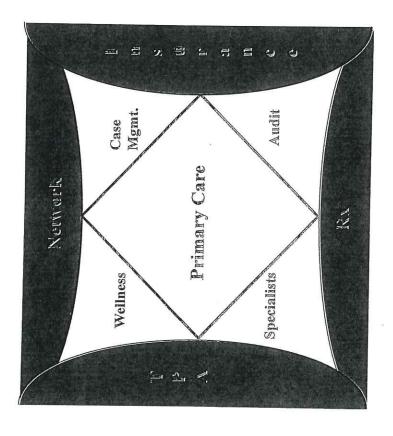
VINTEGRITY HEALTH

Want to Go Faster and at Less Cost? Which Wheel Gets You Where You





Healthcare Status Quo is a Square Wheel





Traditional Model Doesn't Work

O'Brien's Law

Fortune 100 Company Initiatives

- Preoccupation with Networks
- · Lack of Data Transparency
- · Lack of Financial Transparency
- Economic Conflicts of Interest
- Commoditization of Healthcare
- · Foolishness of Zero Sum Game
- · One Size Fits All
- · Short Time Horizon for Financial Goals

INTEGRITY HEALTH

Healthcare's Future Is A Round Wheel



INTEGRITY HEALTH

Integrative Services With Coordinated Care The Wheel of Partnership Health Centers:

- · One-Stop-Shopping
- Doctor Visit
- Lab & X-ray
- **Pharmacy**
- Physical Therapy
- Chiropractor/Acupuncture
- Mental/Behavioral Health Services
 - Care Coordination
- Member Advocacy
- Integrative Services
- No-Copays
- Same-day Appointments



Integrative Services With Coordinated Care The Wheel of Partnership Health Centers:



Equal Network Access

Partnership Health Center-Voluntary

Partnership Health Center-No Co-Pays

Coordinated Care with Specialty Referrals

Effective Disease Management

Green Circle Providers

In-Network

- Providers

Providers*

Out of

Superior Member Services
 Integrated Health Data

Lower Plan Costs

Partnership
Health
Center
(PHC)

PHC Green Circle Referrals: Best-Practice Specialists—In and Out of Network

INTEGRITY HEALTH

Partnership Health Centers

· Focus on Health: Better Health Is Only Way to Save

• No Economic Conflicts: Connecting Patients to Best Practice & Coordinating Providers

Culture of Health: People Need a Dedicated, Stable Medical

Capturing Long Term Value: Building Culture of Health Captures Long Term Value—particularly for public employees

Transparency of Operations: Confidence of Employees

Minimizing Distractions: Patient Advocacy

Integrating the Plan: Holding Components Accountable

The Value of Time



Which Wheel Is In Your Future?

