

BOARD OF TRUSTEES

Board Retreat

Saturday, May 11, 2024 – 9:00 a.m. Chris T. Matthews Board Room – A201

- 1. Call to Order
- * 2. Announcement and Acknowledgement of Open Meetings Compliance Board Opinion
- * 3. Approval of Revised FY 2025 Group Health/RX, Dental, and Vision Insurance Employer/Employee Contributions Rate Tables
 - 4. Development of Board Policies
 - 5. Adjournment

Under the ADA and Section 504, Frederick Community College (FCC) makes every effort to accommodate individuals with disabilities for College-sponsored events and programs. For FCC employees needing accommodations, including interpreting, please email humanresources@frederick.edu. For students and others with accommodation needs or questions, please call 301-846-2408, or to request sign language interpreter services, please email https://linearching@frederick.edu. Sign language interpreters will not be automatically provided for College-sponsored events without a request for services. Requests must be made at least five workdays before a scheduled event to guarantee accommodations.

WES MOORE
Governor

ARUNA MILLER *Lt. Governor*



LYNN MARSHALL, ESQ., CHAIR RUNAKO KUMBULA ALLSOPP, ESQ. JACOB ALTSHULER, ESQ.

STATE OF MARYLAND OPEN MEETINGS COMPLIANCE BOARD

18 Official Opinions of the Compliance Board 57 (2024) April 22, 2024

Board of Trustees of Frederick Community College

The Complainant alleges that the Board of Trustees of Frederick Community College ("Board of Trustees") violated the Open Meetings Act (the "Act") by failing to make a meeting agenda available to the public in a timely fashion. The Board of Trustees acknowledges the violation.

"[B]efore meeting in an open session," the Act requires a public body to "make available to the public an agenda: (i) containing known items of business or topics to be discussed at the portion of the meeting that is open; and (ii) indicating whether the public body expects to close any portion of the meeting" to the public. § 3-302.1(a)(1). "If the agenda has been determined at the time the public body gives notice of the meeting . . ., the public body shall make available the agenda at the same time" § 3-302.1(a)(2). "If an agenda has not been determined at the time the public body gives notice of the meeting, the public body shall make available the agenda as soon as practicable after the agenda has been determined but no later than 24 hours before the meeting." § 3-302.1(a)(3).²

Here, the Board of Trustees provided notice that it would meet at 4:30 p.m. on February 21, 2024. But as of 11:30 p.m. on February 20—less than 24 hours before the meeting—the Board of Trustees had not made an agenda available to the public.

The Board of Trustees asserts that this was an "inadvertent failure" and, upon learning of the mistake, provided the agenda to local media outlets at 8:28 a.m. February

¹ Statutory references are to the General Provisions Article of the Maryland Annotated Code.

² These timing provisions do not apply if "a public body is unable to comply . . . because the meeting was scheduled in response to an emergency, a natural disaster, or any other unanticipated situation," in which case "the public body shall make available on request an agenda of the meeting within a reasonable time after the meeting occurs." § 3-302.1(b).

18 Official Opinions of the Compliance Board 57 (2024)

April 22, 2024 Page 58

21 and posted the agenda on the Board's website at 8:41 a.m. Nonetheless, because the Board of Trustees failed to provide the agenda at least 24 hours before the meeting, we find a violation of § 3-302.1(a).

This Opinion is subject to the acknowledgement and announcement requirements of § 3-211.

Open Meetings Compliance Board

Lynn Marshall, Esq. Runako Kumbula Allsopp, Esq. Jacob Altshuler, Esq.



To: Dr. Annesa Payne Cheek, President

Frederick Community College Board of Trustees

From: Dr. Bridgette N. Cofield, JD, SPHR

Date: May 11, 2024

Subject: Action Item

Approval of Revised FY 2025 Group Health/RX, Dental, and Vision Insurance

Employer/Employee Contributions Rate Tables

OVERVIEW

On April 17, 2024, the Board approved the Renewal of the FY 2025 Aetna Group Health/RX, Dental, and Vision Insurance and Employer/Employee Contributions. Errors were recently discovered in the information that was previously presented. Human error and manual processes contributed to:

- A miscalculation of the employer/employee contribution amounts for the FY 2025 Health/RX premiums for full-time employees
- The mislabeling of a column header in the Health/Rx table for part-time employees and both the Dental and Vision coverage rate tables for full-time and part-time employees
- The mislabeling of the part-time employee coverage category for Dental and Vision rate tables

The errors have been corrected, therefore making it necessary to bring this item back to the Board for review and approval.

ANALYSIS

Accurate employer/employee contribution amounts for the FY 2025 Health/RX premiums for full-time employees are being provided (see highlights in the attachment). These employer/employee contribution amounts were included on two separate pages of Item 5A of the April Board packet (page 4 and 5). The contribution amounts (including the percentage increases to employees) were correct on page 4, however the contribution amounts on page 5 were incorrect.

The "FY24 Monthly Premium" column headers for the Health/Rx table for part-time employees and both the Dental and Vision coverage rate tables for full-time and part-time employees have been corrected to "FY25 Monthly Premium" (see highlights in the attachment). The rates, as presented in April, are accurate and remain the same.

The part-time employee coverage category for the Dental and Vision coverage rate tables has been corrected from "Full-time" to "Part-time" (see highlights in the attachment).

RECOMMENDATION

Recommend approval of the:

- Corrected employer/employee contribution amounts for the FY 2025 Health/RX premiums for full-time employees
- Corrected labeling of a column header to "FY25 Monthly Premium" in the Dental coverage rate table for full-time employees
- Corrected labeling of a column header to "FY25 Monthly Premium" in the Vision coverage rate table for full-time employees
- Corrected labeling of a column header to "FY 25 Monthly Premium" in the Health/Rx table for part-time employees
- Corrected labeling of a column header to "FY25 Monthly Premium" in the Dental coverage rate table for part-time employees
- Corrected labeling of the part-time employee coverage category to "Part-time" in the Dental rate table
- Corrected labeling of a column header to "FY25 Monthly Premium" in the Vision coverage rate table for part-time employees
- Corrected labeling of the part-time employee coverage category to "Part-time" in the Vision rate table

ATTACHMENT(S)

 Revised FY 2025 Group Health/RX, Dental, and Vision Insurance Employer/Employee Contributions Rate Tables

Frederick Community College

7/1/24 - 6/30/25 Plan Year Employee/Employer Contributions Health/RX Insurance for Full-Time Employees

ORIGINAL

Health/RX Coverage: AETNA

		M	onthly Rates	Employee Per Pay Rates		
		FY25 Monthly	Employer	Employee	10 Months	12 Months
Coverages	Elections	Premium	Rate	Rate	(20 Pays)	(24 Pays)
AETNA - In-Ne	etwork					
Full-time	Employee	\$1,021.17	\$1021.17	\$0.00	\$0.00	\$0.00
	Employee + Adult	\$2,089.67	\$1,676.40	\$413.27	\$247.96	\$206.64
	Employee + Child(ren)	\$1,875.96	\$1,541.35	\$334.61	\$200.77	\$167.31
	Family	\$2,837.53	\$2,105.25	\$732.28	\$439.37	\$366.14
AETNA - High	Deductible*					
Full-time	Employee	\$930.83	\$930.83	\$0.00	\$0.00	\$0.00
	Employee + Adult	\$1,885.68	\$1,500.73	\$384.95	\$230.97	\$192.48
	Employee + Child(ren)	\$1,694.74	\$1,386.77	\$307.97	\$184.78	\$153.99
	Family	\$2,554.13	\$1,899.69	\$654.44	\$392.66	\$327.22

CORRECTED

Health/RX Coverage: AETNA

	Elections	M	onthly Rates		Employee Per Pay Rates	
Coverages		FY25 Monthly Premium	Employer Rate	Employee Rate	10 Months (20 Pays)	12 Months (24 Pays)
AETNA - In-Ne	etwork					
Full-time	Employee	\$1,021.17	\$1021.17	\$0.00	\$0.00	\$0.00
	Employee + Adult	\$2,089.67	<mark>\$1,604.97</mark>	<mark>\$484.70</mark>	<mark>\$290.82</mark>	<mark>\$242.35</mark>
	Employee + Child(ren)	\$1,875.96	<mark>\$1,484.21</mark>	<mark>\$391.75</mark>	<mark>\$235.05</mark>	<mark>\$195.88</mark>
	Family	\$2,837.53	<mark>\$1,983.84</mark>	<mark>\$853.69</mark>	<mark>\$512.21</mark>	\$426.8 <mark>5</mark>
AETNA - High	Deductible*					
Full-time	Employee	\$930.83	\$930.83	\$0.00	\$0.00	\$0.00
	Employee + Adult	\$1,885.68	<mark>\$1,436.90</mark>	<mark>\$448.78</mark>	<mark>\$269.27</mark>	\$224.39
	Employee + Child(ren)	\$1,694.74	\$1,335.70	<mark>\$359.04</mark>	<mark>\$215.42</mark>	<mark>\$179.52</mark>
	Family	\$2,554.13	<mark>\$1,791.18</mark>	<mark>\$762.95</mark>	<mark>\$457.77</mark>	\$381.48

^{*}FCC provides a contribution of \$1,500 for Employee only coverage or \$3,000 for Employee plus family member coverage to a Health Savings Account (HSA). This contribution is prorated for anyone who joins the health plan once the new plan year has started.

Full-time employees who opt-out of the health insurance coverage are eligible for an opt-out incentive of \$300 per month. This opt-out incentive payment is taxable. In order to opt-out, the employee must provide proof of other insurance coverage, such as insurance ID card, certificate of coverage, or letter from an employer verifying insurance coverage.

Note: Employees who elect the Open Access Plus High Deductible health plan and later in the plan year terminate their coverage are NOT eligible for the Opt-Out payment.

Frederick Community College 7/1/24 - 6/30/25 Plan Year Employee/Employer Contributions

Dental Insurance for Full-Time Employees

ORIGINAL

Dental Coverage: AETNA

		М	onthly Rates	Employee Per Pay Rates		
Coverages	Elections	FY24 Monthly Premium	Employer Rate	Employee Rate	10 Months (20 Pays)	12 Months (24 Pays)
Full-Time	Employee	\$38.11	\$28.58	\$9.53	\$5.72	\$4.76
	Employee + Adult	\$75.82	\$28.58	\$47.24	\$28.34	\$23.62
	Employee + Child(ren)	\$89.59	\$28.58	\$61.01	\$36.60	\$30.50
	Family	\$127.30	\$28.58	\$98.72	\$59.23	\$49.36

CORRECTED

Dental Coverage: AETNA

		М	Employee Per Pay Rates			
Coverages	Elections	FY25 Monthly Premium	Employer Rate	Employee Rate	10 Months (20 Pays)	12 Months (24 Pays)
Full-Time	Employee	\$38.11	\$28.58	\$9.53	\$5.72	\$4.76
	Employee + Adult	\$75.82	\$28.58	\$47.24	\$28.34	\$23.62
	Employee + Child(ren)	\$89.59	\$28.58	\$61.01	\$36.60	\$30.50
	Family	\$127.30	\$28.58	\$98.72	\$59.23	\$49.36

Frederick Community College

7/1/24 - 6/30/25 Plan Year Employee/Employer Contributions Vision Insurance for Full-Time Employees

ORIGINAL

Vision Coverage: AETNA

		М	onthly Rates	Employee Per Pay Rates		
Coverages	Elections	FY24 Monthly Premium	Employer Rate	Employee Rate	10 Months (20 Pays)	12 Months (24 Pays)
Full-Time	Employee	\$5.31	\$3.98	\$1.33	\$0.80	\$0.66
	Employee + Adult	\$10.09	\$3.98	\$6.11	\$3.66	\$3.05
	Employee + Child(ren)	\$10.63	\$3.98	\$6.65	\$3.99	\$3.32
	Family	\$15.62	\$3.98	\$11.64	\$6.98	\$5.82

CORRECTED

Vision Coverage: AETNA

		М	onthly Rates		Employee Per Pay Rates		
		FY25 Monthly	Employer	Employee	10 Months	12 Months	
Coverages	Elections	Premium	Rate	Rate	(20 Pays)	(24 Pays)	
Full-Time	Employee	\$5.31	\$3.98	\$1.33	\$0.80	\$0.66	
	Employee + Adult	\$10.09	\$3.98	\$6.11	\$3.66	\$3.05	
	Employee + Child(ren)	\$10.63	\$3.98	\$6.65	\$3.99	\$3.32	
	Family	\$15.62	\$3.98	\$11.64	\$6.98	\$5.82	

Frederick Community College 7/1/24 - 6/30/25 Plan Year Employee/Employer Contributions Health/RX Insurance for Part-time Employees

(Working at least 17.5 hrs/week but less than 35 hrs/week)

ORIGINAL

Health/RX Coverage: AETNA

		М	Ionthly Rates	Employee Per Pay Rates		
		FY24 Monthly	Employer	Employee	10 Months	12 Months
Coverages	Elections	Premium	Rate	Rate	(20 Pays)	(24 Pays)
AETNA - In-N	etwork					
Part-time	Employee	\$1,021.17	\$520.64	\$500.54	\$300.32	\$250.27
	Employee + Adult	\$2,089.67	\$786.17	\$1,303.50	\$782.10	\$651.75
	Employee + Child(ren)	\$1,875.96	\$745.56	\$1,130.40	\$678.24	\$565.20
	Family	\$2,837.53	\$964.68	\$1,872.86	\$1123.71	\$936.43
AETNA - High	Deductible*					
Part-time	Employee	\$930.83	\$465.42	\$465.42	\$279.25	\$232.71
	Employee + Adult	\$1,885.68	\$704.13	\$1181.55	\$708.93	\$590.78
	Employee + Child(ren)	\$1,694.74	\$656.39	\$1038.35	\$623.01	\$519.17
	Family	\$2,554.13	\$871.24	\$1682.89	\$1009.73	\$841.45

CORRECTED

Health/RX Coverage: AETNA

		ı	Monthly Rates		Employee Per Pay Rates	
		FY25 Monthly	Employer	Employee	10 Months	12 Months
Coverages	Elections	Premium	Rate	Rate	(20 Pays)	(24 Pays)
AETNA - In-N	etwork					
Part-time	Employee	\$1,021.17	\$520.64	\$500.54	\$300.32	\$250.27
	Employee + Adult	\$2,089.67	\$786.17	\$1,303.50	\$782.10	\$651.75
	Employee + Child(ren)	\$1,875.96	\$745.56	\$1,130.40	\$678.24	\$565.20
	Family	\$2,837.53	\$964.68	\$1,872.86	\$1,123.71	\$936.43
AETNA - High	Deductible*					
Part-time	Employee	\$930.83	\$465.42	\$465.42	\$279.25	\$232.71
	Employee + Adult	\$1,885.68	\$704.13	\$1,181.55	\$708.93	\$590.78
	Employee + Child(ren)	\$1,694.74	\$656.39	\$1,038.35	\$623.01	\$519.17
	Family	\$2,554.13	\$871.24	\$1,682.89	\$1,009.73	\$841.45

^{*}FCC provides a contribution of \$1,500 for Employee only coverages or \$3,000 for Employee plus family member coverage to a Health Savings Account (HSA). This contribution is prorated for anyone who joins the health plan once the new plan year has started.

Part-time employees who Opt-Out of the health insurance coverage are eligible for an opt-out incentive of \$150 per month. This opt-out incentive is taxable. In order to opt out, the employee must provide proof of other insurance coverage, such as insurance ID card, certificate of coverage, or letter from an employer verifying insurance coverage.

Note: Employees who elect the Open Access Plus High Deductible health plan and later in the plan year terminate their coverage are NOT eligible for the Opt-Out payment.

Frederick Community College 7/1/24 - 6/30/25 Plan Year Employee/Employer Contributions

Dental Insurance

for Part-time Employees

(Working at least 17.5 hrs/week but less than 35 hrs/week)

ORIGINAL

Dental Coverage: AETNA

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Frederick Community College 7/1/24 - 6/30/25 Plan Year Employee/Employer Contributions Vision Insurance

for Part-time Employees

(Working at least 17.5 hrs/week but less than 35 hrs/week)

ORIGINAL

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	Employee + Child(ren)	\$10.63	\$3.98	\$6.65	\$3.99	\$3.32	
	Family	\$15.62	\$3.98	\$11.64	\$6.98	\$5.82	

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	Employee + Child(ren)	\$10.63	\$3.98	\$6.65	\$3.99	\$3.32
	Family	\$15.62	\$3.98	\$11.64	\$6.98	\$5.82