

**WESTBROOK BOARD OF EDUCATION
EDUCATE, CHALLENGE, & INSPIRE**

**WESTBROOK BOARD OF EDUCATION
Tuesday, August 16, 2022 @ 6:00 p.m.
Fiscal and Budget Planning Subcommittee
BOE Conference room**

AGENDA

- I. Call to Order
- II. Approval of Minutes
 - 1. May 19, 2022
- III. Student Insurance Renewal
- IV. Health/Dental Renewal
- V. Draft Budget Guidelines
- VI. Adjourn

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WESTBROOK BOARD OF EDUCATION Thursday, May 19, 2022 at 6:30 p.m. Fiscal and Budget Planning Subcommittee WHS Library

MINUTES

Members Present: K. Walker, A. Miesse, Z. Hayden

Also Present: Superintendent Kristina J. Martineau; Director of Finance and Operations, Lesley Wysocki

- I. Call to Order: The Fiscal and Budget Planning Subcommittee meeting was called to order at 6:40 p.m. by Chair, Z. Hayden.
- II. Approval of Minutes
 - 1. January 27, 2022: MOTION BY Z. Hayden and SECOND by A. Miesse to approve the minutes of January 27, 2022. Vote unanimous.
- III. Insurance Presentation: Lesley Wysocki, Director of Finance and Operations, briefly reviewed glossary and offered to add additional terms as needed. She also shared insurance research-insurance overview and historical information. FAQ running document will be open for the committee to add to and Mrs. Wysocki and Superintendent Martineau will develop responses.
- IV. Date and Topic for next meeting: August 16 at 6:00 p.m. Topic TBD.
- V. Adjourn: MOTION by Z. Hayden and SECOND by A. Miesse to adjourn at 7:22 p.m. Vote unanimous.

Respectfully submitted,

Christine Kuehlewind, Board Secretary

Cecilia S. Lester, Board Recording Clerk

Board of Education Budget Guidelines 2020 - 2021

1. Improving and Enhancing Curriculum and Instruction

- Professional Growth & Development for teachers and staff to meet statutory and other training requirements
- Ongoing Curriculum Revision/Implementation
- Assessments (SAT/ACT, etc.), Grade Reform
- English Language Learners (EL)
- Promote Positive Climate and Restorative Practices

2. Support Technology Integration

- Maintain Technology Plan/Monitor Integration

3. Support Board of Education Enrollment Study/Initiative

- Class Size Guidelines: K-2: 16+-2 3-4: 18 +-2 5-8: 22+-2

4. Support All Current and Upcoming Contractual Obligations

- Westbrook Educators Association (WEA) Contract (certified staff)
- Administrator Agreements
- American Federation of Teachers (AFT) Contract (non-certified staff)
- Transportation
- Health Insurance
- Facilities/Maintenance

5. Support Services for all students under ESSA Guidelines

- Guidance
- Health Services
- Psychological Services
- Speech/Hearing/Language
- Special Needs Tuition/Transportation /Instructional Services

6. Maintaining and Preserving Buildings and Grounds

- Update Capital Improvement Plan with a focus on energy efficiencies and other cost saving measures
- Continue operational preventive maintenance
- Systems, Equipment and Structural Upgrades

7. Safety and Security Measures

- All Hazards Plan
- Chemical Hygiene Plan
- Title IX (Equity, Diversity, Investigations)
- Mandated Expert Orientations/trainings

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Bollinger Specialty Group
Student Accident Insurance Renewal Proposal
Designed Especially for
Westbrook Public Schools

Bollinger Contact: Laura Kajor
Phone Number: (973) 921-8038
Carrier: Zurich
Plan Year: 2022-2023
Broker Name: USI Insurance Services, LLC
Broker Commission: 5.00%

Proposal Type: Renewal
Proposal #: 047985
Policy #: MCB5858710
Effective Date: 8/1/2022
Expiration Date: 7/31/2023

Athletic Coverage Including All Interscholastic Sports & Football

Coverage	Plan Options	Maximum Benefit	Benefit Period	Payment Basis	Deductible	Ded. Type
All Athletes	Standard Plan - See Attached for Benefit Summary	\$5,000,000	10 Year	Excess	\$100	Integrated

Football coverage pertains to Co-Op Football ONLY.

Optional Athletic Coverages

Coverage	Maximum Benefit	Benefit Period	Payment Basis	Deductible
Co-Op Football	\$5,000,000	10 Year	Excess	\$100
Co-Op Football covered for Junior High School and Senior High School.				
Junior High School Sports & Football	\$5,000,000	10 Year	Excess	\$100
Football coverage pertains to Co-Op Football only.				
Intramural Sports	\$5,000,000	10 Year	Excess	\$100
Band and Cheerleaders	\$5,000,000	10 Year	Excess	\$100
Field Trip(s)	\$5,000,000	10 Year	Excess	\$100

The premium for the Optional Coverages listed above is included in the total Annual Premium quoted.

Annual Premium*: \$24,568.00

We thank you for the opportunity to provide a proposal for your insurance needs. Please feel free to call your sales representative if you have any questions about this proposal.

Accepted: _____ **Title:** _____ **Date:** _____

To renew coverage, this form must be signed and returned prior to the effective date. Please mail this form to the address listed below or email to Laura_Kajor@rpsins.com.

***Please note premium is contingent upon review of enrollment at the time of renewal.**

This quote letter provides a summary of the coverage to be provided and is not intended to substitute for or duplicate policy provisions. It is subject to the provisions of the policy of insurance to be issued by Zurich American Insurance Company. You will need to contact us for exact policy language, as well as for any limitations and restrictions that may be applicable. The policy is the only contract between the Policyholder and us. It contains the actual terms, conditions and limits of the coverage to be provided. If there is any conflict between this quote and the policy, the policy will govern in all cases. Acceptance of this quote is contingent upon and subject to the actual terms and conditions of the policy as issued.



Town of Westbrook & BOE
 Medical/Rx Plan - Renewal Projection - BOE
 July 1, 2022 Renewal Date

Stop Loss Outline		Current	Renewal	Renewal Alternative
TPA / Network Name		Anthem	Anthem	Anthem
Stop Loss Carrier		Anthem	Anthem	Symetra
Specific Stop Loss (SSL)		\$125,000	\$125,000	\$125,000
Contract Basis		24/12	24/12	24/12
Coverages Included		Medical & Rx	Medical & Rx	Medical & Rx
Aggregate Stop Loss (ASL)		125%	125%	125%
Fixed Costs				
Administration				
Medical/Rx Administration Fee	133	\$0.00	\$0.00	\$0.00
Discount Share	133	\$37.12	\$42.76	\$42.76
PCORI Fee	133	\$0.56	\$0.58	\$0.58
Broker Service Fee	133	\$17.09	\$17.09	\$17.09
Dental Administration Fee	141	\$5.56	\$5.56	\$5.56
Monthly Total Fees		\$8,068	\$8,821	\$8,821
Annual Total		\$96,820	\$105,852	\$105,852
Dollar Change			\$9,031	\$9,031
Percentage Change			9.3%	9.3%
Specific Premium	133	\$305.82	\$428.15	\$289.47
ASL Premium	133	\$12.29	\$12.90	\$12.85
Annual Total		\$507,704	\$703,916	\$482,503
Dollar Change			\$196,212	(\$25,201)
Percentage Change			38.6%	-5.0%
Annual Total Fixed Costs		\$604,524	\$809,768	\$588,355
Dollar Change			\$205,244	(\$16,169)
Percentage Change			34.0%	-2.7%
Expected Claims Liability				
Total Medical/Rx PEPM	133	\$1,415.91	\$1,744.35	\$1,744.35
Annual Total Medical Claim Liability		\$2,259,792	\$2,783,990	\$2,783,990
Laser Liability		\$0	\$250,000	\$125,000
Annual Total Medical Claim Liability		\$2,259,792	\$3,033,990	\$2,908,990
Dollar Change			\$774,197	\$649,197
Percentage Change			34.3%	28.7%
Total Dental PEPM	141	\$61.57	\$62.88	\$62.88
Monthly Total Dental Claim Liability		\$8,681	\$8,866	\$8,866
Annual Total Dental Claim Liability		\$104,176	\$106,395	\$106,395
Dollar Change			\$2,219	\$2,219
Percentage Change			2.1%	2.1%
Total Cost				
Annual Total Expected Costs		\$2,968,493	\$3,950,152	\$3,603,739
Dollar Change from Current			\$981,659	\$635,246
Percentage Change			33.1%	21.4%

2022-2023 Health/Dental Rates - USI Rates w/Symetra ISL Including Laser Liability
DENTAL RATES ARE ANTHEM RATES

HDHP PLAN (\$2,000/\$4,000 DED. 100% COINSURANCE; \$5/15/30 UNL. RX AFTER DED.)

100% Plan Rate:

Plan Type	Employee Category	Single Person Mo. Rate	Two Person Mo. Rate	Family Mo. Rate
Medical & Rx Dental	All	\$1,110.33	\$2,220.69	\$2,975.73
	All	\$32.40	\$74.49	\$93.03
Total Monthly:		\$1,142.73	\$2,295.18	\$3,068.76
Total Annual:		\$13,712.76	\$27,542.16	\$36,825.12

12 month employee*:

Plan Type	Employee Category	Single Person Mo. Rate	Two Person Mo. Rate	Family Mo. Rate
HDHP PLAN	20%			
Medical & Rx Dental		\$222.07	\$444.14	\$595.15
		\$6.48	\$14.90	\$18.61
Total Monthly:		\$228.55	\$459.04	\$613.75
Total:		\$114.27	\$229.52	\$306.88

* deductible twice/month; 24 equal July - June

10 month employee:**

Plan Type	Employee Category	Single Person Mo. Rate	Two Person Mo. Rate	Family Mo. Rate
HDHP PLAN	20%			
Medical & Rx Dental		\$222.07	\$444.14	\$595.15
		\$6.48	\$14.90	\$18.61
Total Monthly:		\$228.55	\$459.04	\$613.75
Total:		\$137.13	\$275.42	\$368.25

** deductible twice/month; 20 equal Sept - June