Employee Benefits Committee Meeting Minutes  
November 19, 2013 10:00-11:30 AM  
203 Student Center

Presiding: Harris, Bill, Chair, EBC

Present: Burton, Debbie, Staff with A&E  
Cox, Penny, AVP Administration & Finance  
Carwile, Debbie, Compensation  
Krauss, Susan, Asst. Treasurer-Endowment Services  
Erway, Ed, UK Healthcare Finance  
Steiner, Shelley, Faculty  
Veach, Rosemary, Agriculture  
Cheser, Kristen, Budget Director/Provost  
Burton, Debbie, Staff with A&E  
Cox, Penny, AVP Administration & Finance  
Carwile, Debbie, Compensation  
Krauss, Susan, Asst. Treasurer-Endowment Services  
Erway, Ed, UK Healthcare Finance  
Steiner, Shelley, Faculty  
Veach, Rosemary, Agriculture  
Cheser, Kristen, Budget Director/Provost  
Bender, Patty, AVP, Office of Institutional Equity  
Sigler, Pamela, Program of Staff Development  
Nikirk, Sara, Auxiliary Services  
McCarthy, Denise, College of Health Sciences  
Green, Adrienne, Campus PPD  
Prats, Armando, English Faculty  
Sizemore, Stephen, Library Administration  

Wilson, Kimberly, VP Human Resources  
Carroll, Shannan, University Legal Office (Ex-Officio)  
Payne, Joey, Chief Benefits Director  
Martin, Angie, VP Financial Planning

Recorder: Carbol, Gail, Employee Benefits

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<th>Agenda Item &amp; Speaker</th>
<th>REPORT</th>
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<td>Call to order – Bill Harris</td>
<td>Mr. Harris called the meeting to order at 10:00 a.m.</td>
<td>No action needed.</td>
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<td>Review/Approval Of 10/22/2013 Minutes - Bill Harris</td>
<td>Mr. Harris moved to pass the EBC minutes for the October 22, 2013 meeting. Motion carried.</td>
<td>The minutes will be posted on the EBC web site.</td>
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<td>Transgender Benefits Review – Dr. Bill Mitchell, UK HealthCare &amp; Dr. L. Tackett and Lynn Lundy, BCBS</td>
<td>Dr. Tackett and Dr. Mitchell were asked to provide the status of groups offering transgender benefits. Dr. Tackett reported Anthem covers 36 million lives nationwide and a minority offer transgender benefits. Nobody in the region offers this benefit. This is a lifelong process for individuals who elect surgery. There are many unanswered questions across the nation and no KY surgeons. Lynn Lundy added there is not enough claims data available to predict future costs. Dr. Mitchell gave perspective of the UK benefits plan. There is no specific residency or training and a lack of standard protocols and literature. The incidence and degree of complications is extensive. Agreed more needs to be done to answer these questions. Committee members gave varying points of view:</td>
<td>The motion passed.</td>
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| - Look at the human being in the decision to offer these benefits... Dr. Mitchell agreed the status of a patient in a doctor’s standpoint is 100% patient.  
- Look at other expenditures: digestive, circulatory, muscular; treating early chronic diseases may be best use of money.  
- If cost is an issue, cap the expenditures, sending a message to the community.  
- In UK plans, no fertility and no bariatric surgery in UK HMO plan.  
- Do not feel good about making a decision where two surgeons have said enough data is not available to support the decision. |

Penny Cox made a motion, “The exclusion, “Charges for or related to sex change surgery or to any treatment of gender identity disorders.” will be changed to “Charges for or related to sex change surgery or to any treatment of gender identity disorders not including normally covered benefits (e.g. mental health) and those that are gender specific (e.g. prostate exam for a biological male).” Rosemary Veatch seconded the motion. The committee voted and the motion passed.

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<th>New $500 FSA Rollover Option-Joey Payne</th>
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| US Department of Treasury and the IRS issued Notice 2013-71 allowing plans to adopt a $500 rollover of unused money in a health care spending plan from one year to the next. Currently, the University allows a 2 ½ month “grace period” for claims to be incurred. The rollover may not be used in conjunction with the grace period. 1127 participants had $500 or more balance as of June 30, 2013 and 2727 participants incurred claims between 7/1/13 and 9/15/13 totaling $1,620,567. A survey will be issued to plan participants to gather feedback on which they would prefer; the $500 rollover or the grace period. The Committee discussed when the change would be effective and agreed it best to wait until the next plan year, beginning 7/1/14.  
There were three questions posed by the EBC regarding the current forfeitures from the health plan FSA.  
1) What are the total forfeitures? $70,161 ($114,067-$43,906) health care FSA and $27,858 dependent care FSA for a total of $98,019.  
2) How many employees separate with having higher expenses than contributions paid in and what is the total of the overage? 160 employees and $43,906.  
3) How much would be forfeited from the health care FSA had the $500 rollover been in place? $32,215.  
It is difficult to measure how much the account balances would be affected with the removal of the grace period, but would there be an increase to the remaining health care FSA balance.  
The health plan FSA amount sheltered from taxes is $4,331,226 and the Employer FICA savings from this is $331,339.  
The administration fees paid for the plan year were $120,153.  
These numbers are taken from the 2011-12 plan year since the 2012-13 plan year has not yet been closed. |

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<td>Meeting convened-Bill Harris</td>
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