

## **State and School Employees Health Insurance Management Board**

### **Standing Monthly Meeting June 25, 2025**

The standing monthly meeting of the State and School Employees Health Insurance Management Board convened on Wednesday, June 25, 2025, in Room 138 of the Woolfolk Building located at 501 North West Street in Jackson, Mississippi, at 9:00 a.m. The presiding officer was Ms. Liz Welch, Chairman of the Board. A quorum was present.

#### **Voting Members Present**

Ms. Liz Welch, Chairman  
Mr. Mike Chaney *(represented by Mr. David Browning)*  
Dr. Lance Evans *(represented by Ms. Kym Wiggins)*  
Mr. Mark Formby  
Mr. Jimmy Gathings *(via Teams)*  
Mr. Kelly Hardwick  
Mr. Ray Higgins *(via Teams)*  
Mr. Kell Smith *(via Teams)*

#### **Non-Voting Members Present**

The Honorable Walter Michel – Chairman,  
Senate Insurance Committee  
The Honorable Jerry Turner – Chairman,  
House Insurance Committee

#### **Voting Members Absent**

Mr. Christopher Burkhalter, Vice Chairman  
Dr. Alfred Rankins

#### **Non-Voting Members Absent**

The Honorable Briggs Hopson - Chairman,  
Senate Appropriations Committee  
The Honorable John Read – Chairman,  
House Appropriations Committee

#### **Department of Finance and Administration Staff Present:**

Mr. Bert Emrick  
Mr. Patrick Black  
Ms. Karen McKlemurry  
Ms. Carlotta Edwards *(via Teams)*  
Ms. Lori Paes *(via Teams)*  
Ms. Makleisha Logan-Hite *(via Teams)*

### **Call to Order**

The meeting was chaired and called to order by Ms. Liz Welch, Chairman of the Board.

### **Agenda Item 1: Minutes of the April 30, 2025 Standing Monthly Board Meeting**

Chairman Welch announced that the minutes of the Board's April 30, 2025, standing monthly meeting had been provided to all Board members for their review in advance of today's meeting. A motion was made by Mr. Hardwick for the Board to approve the minutes for April as presented. Mr. Browning (designee for member Chaney) seconded the motion. The motion passed by a 7 – 0 vote, with members Browning (designee for member Chaney), Wiggins (designee for member Evans), Formby, Gathings, Hardwick, Higgins, and Smith voting affirmatively.

### **Agenda Item 2: GASB Statements 74 and 75 Reports – Independent Auditor's Report of Other Postemployment Benefits (OPEB) Liability as of June 30, 2024 Audit Report prepared by FORVIS**

Chairman Welch recognized Mr. Bert Emrick, who presented an updated valuation of the State's other post-employment benefits (OPEB) liability as of June 30, 2024, applying the GASB Statements 74 and 75 guidelines. Copies of the FORVIS presentation and the full reports were provided to the Board for their review prior to the meeting. No action was required or taken by the Board on this report.

### **Agenda Item 3: Gene Therapy**

Chairman Welch recognized Mr. Bert Emrick, who stated that the Mississippi State and School Employees' Insurance Plan currently lists 'Gene Manipulation Therapy' as one of its exclusions. However, this exclusion does not define or determine what makes up Gene Manipulation Therapy. The Office of Insurance requested to remove the Gene Manipulation Therapy as a plan exclusion and to work with our consultants to redefine this service. A motion was made by Mr. Hardwick for the Board to approve removal of Gene Manipulation Therapy as a plan exclusion and to work with our consultants to redefine this service. Mr. Formby seconded the motion. The motion passed by a 7 – 0 vote, with members Browning (designee for member Chaney), Wiggins (designee for member Evans), Formby, Gathings, Hardwick, Higgins, and Smith voting affirmatively.

**Agenda Item 4: Stop Loss Reinsurance**

Chairman Welch recognized Mr. Emrick, who discussed that costs of both medical and pharmacy treatments have steadily increased over the history of the State Health Plan, with costs increasing more rapidly over the past few years. The State Health Plan holds the sole party responsible for paying these increasing claims costs. However, claim responsibility can be shared with a Reinsurer vendor through Stop Loss coverage. Stop Loss Reinsurance is a type of excess of loss reinsurance where a contracted reinsurer is responsible for losses that exceed a specified dollar amount or percentage of a business measure, such as claim costs, over a certain period, typically a calendar year. With the addition of Stop Loss Reinsurance, the State Health Plan can be protected against high claims costs. A motion was made by Mr. Hardwick for the Board to approve working with our consultants to identify Stop Loss Reinsurance vendors and hear potential presentations/quotes. Mr. Formby seconded the motion. The motion passed by a 7 – 0 vote, with members Browning (designee for member Chaney), Wiggins (designee for member Evans), Formby, Gathings, Hardwick, Higgins, and Smith voting affirmatively.

**Agenda Item 5: Potential Benefit Changes for Calendar Year 2026**

Chairman Welch recognized Mr. Emrick, who mentioned that each year the Board authorizes the staff to evaluate potential benefit changes to the State and School Employees' Health Insurance Plan. A list was provided to the Board of proposed changes including suggestions from staff, Plan participants, providers, State and School Employees' Health Insurance Advisory Council members, and the Board's consultant, actuary, and related vendors. Members of the Board may request that additional items be included on the list, and/or request that any of the proposed items be deleted from the list. Once the Board determines those potential benefit changes to be considered, the staff will begin working with the consultant, actuary, and respective vendors to conduct the formal evaluation process, including need determination, best practice application, and cost/savings analysis on each item. The results of the analyses and the staff recommendations for each item will be presented later this year to the Advisory Council for their consideration and recommendations. At the August 2025 Board meeting, the staff will present the results of the analyses, along with the Advisory Council's recommendations and the staff's recommendations, in order for the Board to make a final determination on Plan benefit changes to be effective January 1, 2026.

**Agenda Item 6: Supplemental Indications Only Criteria – GLP-1 Indications**

Chairman Welch recognized Mr. Emrick, who discussed GLP-1 (Ozempic, Mounjaro, Wegovy, Zepbound) and new indications – Board approved Wegovy for the Cardiovascular indication in the second quarter of 2024. There are new indications coming in 2025; Obstructive Sleep Apnea (OSA), fatty liver disease, and chronic kidney disease.

CVS Caremark is in the process of updating their PA criteria to add these new indications. For the Plan, we show only the Cardiovascular criteria on our website; however, this will be rolled up into a new criteria section, 'Supplemental Indications Only Criteria'. This new criteria section will house all the PA requirements for our current approved indication and all new indications.

The Board will need to decide whether we want to proactively approve the new indications as they become available and have MDFA OI advise that Board when this occurs or approve each indication as they become available.

Mr. Hardwick made a motion to approve allowing sleep apnea as an approved GLP-1 indication and have each new indication approved individually as they become available. Mr. Formby seconded the motion. The motion passed by a 7 – 0 vote, with members Browning (designee for member Chaney), Wiggins (designee for member Evans), Formby, Gathings, Hardwick, Higgins, and Smith voting affirmatively.

#### **Agenda Item 7: PBM Discussion**

Chairman Welch recognized Mr. Black, who stated that the term of the pharmacy benefit manager (PBM) contract with CaremarkPCS Health, LLC d/b/a CVS Health (CVS Caremark) is from January 1, 2021, through December 31, 2024, with an option to renew for one additional year at the Board's discretion. The Board approved this additional year at the February 2024 meeting. The Office of Insurance released the PBM RFP in October 2024. The RFP process was closed when no prospective vendors were deemed to be responsive. The Office of Insurance is in the process of reviewing and rewriting the PBM RFP. The Board's contract with CVS Health for PBM services will expire on December 31, 2025. A motion was made by Mr. Hardwick for the Board to approve Exigent Circumstance with CVS Caremark to extend the PBM contract January 1, 2026 through December 31, 2026. Mr. Formby seconded the motion. The motion passed by a 7 – 0 vote, with members Browning (designee for member Chaney), Wiggins (designee for member Evans), Formby, Gathings, Hardwick, Higgins, and Smith voting affirmatively.

#### **Agenda Item 8: Financial Statements**

Chairman Welch recognized Mr. Bert Emrick, who briefly reviewed the financial statements for the State and School Employees' Life and Health Insurance Plan for the previous month. Copies of these financial statements were provided to the Board members for review prior to the meeting. No action was required or taken by the Board on this matter.

#### **Agenda Item 9: General Schedule**

Chairman Welch recognized Mr. Bert Emrick, who reviewed the schedule of major activities and actions to be taken by the Board for the next few months.

**Agenda Item 10: Old Business**

There was no old business.

**Agenda Item 11: New Business**

There was no new business.

**Adjournment**

Chairman Welch announced that the next standing meeting of the State and School Employees Health Insurance Management Board is scheduled for 9:00 a.m., on Wednesday, July 23, 2025.

As there was no further business, the meeting was adjourned at 9:33 a.m.



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Liz Welch  
Chairman  
State and School Employees Health Insurance Management Board