



West Suburban Health Group Board Meeting

Thursday December 18th, 2025, at 2:30 PM
Meeting by Virtual Participation

Meeting Minutes

Board and Alternate Board Members in Attendance:

Kevin Mizikar, Board Chair	Town of Shrewsbury
George McCormack	Accept Education
Robin Tusino	Town of Dover
Dawn Fattore	Dover Sherborn RSD
Jon Marshall	Town of Natick
Tatiana Swanson	Town of Needham
Michael McCall	Town of Wayland
Meghan Jop	Town of Wellesley

Guests in Attendance:

Dave Davison	Town of Needham
Ratana So	Town of Wayland
Justine Baker	Town of Needham
Bahiya Sauer	Town of Wellesley
Nick Hawes	Town of Shrewsbury
Jackie Meyer	Town of Dedham
Aimee Carnicelli	Town of Natick
Dolores Hamilton	Town of Wellesley
Kate Ryan	Town of Wayland
Joseph Anderson	Gallagher Benefit Services Inc. (GBS)
Karen Quinlivan	Gallagher Benefit Services Inc. (GBS)
Patrick Flattery	Gallagher Benefit Services Inc. (GBS)

Board Chair Kevin Mizikar called the Board meeting to order at 2:36 PM.

Mr. Mizikar reminded those present that the meeting was being recorded and asked if there were any objections. There were none. Roll call was taken with voting attendees listed as:

Kevin Mizikar, Board Chair	Town of Shrewsbury
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Robin Tusino	Town of Dover
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Michael McCall	Town of Wayland
Megan Jop	Town of Wellesley



Board Char Kevin Mizikar said the purpose of the meeting today was to discuss the Benefit Administration platform that Gallagher had demonstrated several times for the group. They have worked over the last several months to see how the enrollment process could be automated. Patrick Flattery will go through an explanation of the platform costs. When the Steering Committee met earlier in the week there was no recommendation made. There is interest in improving business processes, but the concern now is the associated costs. The group is here to understand the parameters of what the program can do and what the cost would be. Discussion can then be had on what course to take.

Patrick Flattery walked the group through a high-level breakdown of costs for the platform. Costs are broken down into four buckets. Gallagher waived the implementation fees which were up from costs. The EDI fees of \$135,000 were to build out the integration of the carriers into the payroll software in member units. Annual tech fees of \$5,000 per entity would cost \$45,000. Monthly service fees to acquire the license and functionality of the tool would be \$4.25 PMPM and there is a minimum of \$4,000 per entity. When all costs are added together, the annual cost in year one would be \$706,671.00. Year 2 it would drop down to \$571,671.00. Costs were broken into a per contract per month and for year one and came out to \$11.32. The \$706,671 spend represents .5% of the annual funding for the active plans with WSHG. The year 2 rate is about .4% and would be \$9.16.

Outreach was made to Blue Cross and Harvard Pilgrim on technology credits, and they have not made any available. That is becoming common across the market as carriers are facing difficult financial times. Dental and vision are usually estimated at less than half a percent and for everything else Gallagher estimated 1%. That came out to estimated credits of \$43,678.04. That would lower the rate down to \$10.62. There are some levers that can be pulled. Gallagher is currently not the broker of record for lines other than medical. If they were, the GTEC team could negotiate credits but that is up to the group and not mandatory at all.

The desired window to stand this up is 90 to 120 days. Open enrollment will be approaching in roughly that same timeframe.

Kevin Mizikar said that the Steering Committee had a conversation for about 40 minutes and did not reach a clear recommendation. There are a lot of comments on cost and timing, and he wanted to open it up to discussion.

Jon Marshal said that the introduction of PBIRx in the last year should bring some positive financial results in the form of rebates. The desire to improve the antiquated enrollment process is strong but there was more hope that the technology credits would be there to offset some of the cost. The cost seems high. It would certainly help in times of high enrollment, but the group has to weigh benefit analysis with cost.

There was discussion on whether it would be possible to scale back and have the platform for health only. There is a potential for that to be done at a lower PEPM rate. It would be built out at a West Suburban level and then each unit would need to figure out something for all their ancillary lines. If any one unit decided they wanted to have full functionality, they could enter into an agreement on their own with GTEC.

Michael McCall said Wayland had been approached by another entity with another portal providing a similar service for lines other than health.

There was interest in finding out what the cost would be for just medical on the platform. The consensus was that the prospect of an active renewal of over 10% would make the tool uneconomical at this time. Having rates first



may make a decision easier. Another concern was to make a fair comparison based on other options in the marketplace. Putting in the platform for open enrollment may be too aggressive a timeline.

Kevin Mizikar said that significant effort went into this, but he is hearing that there is no sense of urgency. It is important to go into rate setting and beyond and there may be ways to leverage this in the future. It sounds like the item will be tabled for now and revisited in the future with the benefit of having done work up front.

Jon Marshall said that the Steering Committee will need to figure out what the next priority is. An RFP may be the next logical process for a third-party administrator.

Other Business:

There was no other business.

Jon Marshall motioned to adjourn the meeting.

Meghan Jop seconded the motion.

Kevin Mizikar, Board Chair adjourned the meeting by unanimous consent at 3:22 PM.

*Prepared by Karen Quinlivan
Gallagher Benefit Services, Inc. (GBS)*