

MINNETONKA INDEPENDENT SCHOOL DISTRICT #276
District Service Center
5621 County Road 101
Minnetonka, Minnesota

Summary of February 18, 2021 Study Session

The School Board of Minnetonka Independent School District #276 met in study session at 6:00 p.m. on Thursday, February 18, 2021 in the Community Room at the District Service Center, 5621 County Road 101, Minnetonka, Minnesota. Chairperson Chris Vitale presided. Other Board members present were: Mark Ambrosen, Katie Becker, John Holcomb, Mike LeSage, Christine Ritchie, Lisa Wagner and Superintendent Dennis Peterson, ex officio.

Prior to the study session, Board members held a closed session to conduct the Superintendent's mid-year evaluation.

PRESENTATION ON DR. DIKEL'S REPORT ON PARENT AND STUDENT INTERVIEWS

Dr. Peterson noted that as part of the School Board's Goal One: Student Well-Being work, the District had completed a comprehensive evaluation of Student Well-Being and mental health programs and processes. Dr. William Dikel, MD completed this thorough evaluation during the spring of 2020. Upon completion of this evaluation, he recommended that the District conduct student and parent interviews to gain their valuable input on how they perceive and received student well-being support services in the Minnetonka School District and community.

Dr. Dikel completed the interviews of 19 students and parents across grade levels and across the continuum of well-being and mental health needs and experiences. Dr. Peterson noted that Dr. Dikel was present virtually this evening to present his findings to the Board.

Dr. Dikel began his report by thanking the School Board and Dr. Peterson for the opportunity. He noted that he had recommended interviews of elementary, middle, and high school students, and separate interviews of parents with children at these levels. The goal of the interviews was to assist the District in having an in-depth understanding of the opportunities and challenges that students and their families experienced regarding mental health and well-being. Interviewees included parents of elementary, middle, and high school students, as well as students who were in elementary, middle, and high school. All interviewees were encouraged to identify issues that impacted student mental health.

Parents and students were recruited from a variety of sources. A memo was sent to the members of the Mental Health Advisory Council requesting volunteers for this project. Mental health support staff were asked to provide names of potential student and parent interviewees.

The breakdown of interviewees was as follows:

Elementary students - 1
Middle school students - 2
High school students - 2
One year post high school students - 2
Parents of elementary students - 4
Parents of middle school students - 4
Parents of high school students - 3
Parents of one year post high school students - 1

Mental health characteristics ranged from students who had no mental health diagnosis to students who have been hospitalized, been in partial hospital treatment, day treatment and/or outpatient care provided by mental health professionals. Diagnoses included ADHD, generalized anxiety disorder, post-traumatic stress disorder, panic disorder and depression.

Dr. Dikel then went over his findings in more detail with the Board. A full copy of his report can be found at this link:

<https://www.minnetonkaschools.org/district/leadership/board/meetings>

In the discussion that followed, Board members asked questions regarding the methodology used by other districts in connecting students with mental health professionals, and the possibility of gathering feedback from additional staff, parents and students.

UPDATE ON GOAL 1

Executive Director of Student Support Services Michelle Ferris and Director of Curriculum Steve Urbanski led the discussion. Highlights of the report included the following:

Recommendations from the Evaluation of Student and Family Well-being completed in 2019-20

During the spring of 2019-2020 school year the District engaged in a partnership with child and adolescent Psychiatrist Dr. William Dikel, MD. Dr. Dikel provided the District with a comprehensive report outlining his assessment of programs and processes in relation to student well-being and mental health efforts, giving the District concrete action items to consider. He shared his report and recommendations at the June study session,

and he also shared a synopsis of this report with the Minnetonka Mental Health Advisory Council. This report has been shared with all administrators and student support services staff. This report is also posted on the Student Well-being website. District leaders and student services staff are continuing their work on the action items Dr. Dikel set forth and are listed below:

Key recommendations from Dr. Dikel:

- Social Emotional Learning (SEL) – Health curriculum
- Mindfulness, self-mastery, lifestyle, and resilience
- Social Thinking with Kari Palmer
- Further work in the tiered systems of support and expansion of MTSS for all students and staff
- Expansion of co-located mental health
- Analysis and utilization of LCTS funds
- Looking closer at chemical health screening and interventions offered
- Utilizing the expertise of Dr. Mark Sanders, Hennepin County; further work with county case management
- Completion of student and parent interviews
- Incorporate recommendations of the mental health advisory council.
- Examine special education and mental health.
- Expand mental health screening.
- Analysis and clarity on role of the school nurse
- Roles and responsibilities of student support staff

Social, and Emotional Learning and the District's Health Curriculum:

Dr. Dikel recommends SEL evidence-based curriculum and programming for pre-K-12, noting that the health curriculum is a place to embed the SEL standards, along with adding healthy lifestyle education and strategies for all students and families.

Mr. Urbanski noted that he is working with District health department chairs, teachers, and student support staff to review and revise the SEL curriculum map, identifying areas where the District may expand the SEL and Lifestyle essential learnings to ensure further implementation of an evidence-based, comprehensive health curriculum that addresses healthy lifestyle, resilience, SEL and student mental health.

In addition, health department chairs and staff have begun reviewing evidence-based instructional resources and have attended District and state led training this year to further support these goals. This work will support the more comprehensive health curriculum review, which will begin next year, and will provide opportunities to expand instructional resources and strategies. As the support for School Board Goal #1 progresses, it will be

important to continue to include and expand SEL professional development for the broader school community.

Ms. Ferris also noted that the District is utilizing Ms. Kari Zweber Palmer MA, CCC-SLP who is a speech-language pathologist/social-cognitive therapist and a renowned author and trainer for Social Thinking and a trainer and coach in the District. Social Thinking teachings help students understand themselves and others better to navigate the social world, foster relationships, and improve their performance at school, at home, and at work. The curriculum's unique tools break down complex social concepts (like perspective taking into understandable and doable parts that can be applied to any setting. For 25 years Social Thinking has been a guiding resource for schools and families, incorporating the latest research and clinical insights. The Social Thinking curriculum is a curriculum and strategies that helps staff, families, and the students. Kari has provided Social Thinking training to all elementary schools building leaders, teachers, and paraprofessionals.

2020-2021 School Year

The 2020-2021 school year marked the fourth year of programming for Deephaven, Excelsior and Groveland. Clear Springs, Scenic Heights and Minnewashta completed year three. We continued our overarching goal for staff to learn and implement Social Thinking Vocabulary concepts.

Programming has been offered virtually to continue our shared work together. Staff attended trainings in communication meetings or professional development days. Paraprofessionals (across all elementary buildings) were offered two trainings in November. This spring, the goal is to complete virtual implementation days.

Ms. Ferris also discussed the EmpowerU program, led by therapist Katie Dorn. EmpowerU is an online solution for students who are stuck in a pattern of anxiety, negative thinking, low self-esteem, or avoidance. EmpowerU puts students in the driver's seat of their life and helps them chart their own path to success.

This course was intentionally designed with evidence-based interventions and best practices to:

- create student movement toward improved emotional and personal wellness
- increase student self-awareness, internal locus of control and growth mindset
- empower student ownership, goal setting and accountability
- increase student social cognition to decrease overwhelming and avoidance behaviors
- improve emotional regulation, perseverance and grit
- celebrate improvements and provide encouragement and hope
- improve each student's academic and social outcomes

Multi-Tiered Systems of Supports

Dr. Dikel also recommended work with Dr. Kim Gibbons of CAREI for further analysis of our MTSS systems work. District leaders reached out to Dr. Gibbons and CAREI for technical assistance pertaining to the current level of implementation of the MTSS framework and special education services. Assistant Superintendent Amy Ladue, Executive Director of Special Education Christine Breen, and Ms. Ferris will facilitate this work. With that, the key work will happen with the building leadership teams as we gather their input and review their data along with District data.

This proposal provides support from CAREI for the district to consider for prioritizing, planning, and implementing the framework of MTSS with fidelity to improve student outcomes. Implementation, review, and District action planning will provide information on implementation for each building with information summarized by elementary, secondary, and at the district level.

Following the implementation review, CAREI will facilitate the development of a multi-year implementation plan at the district level. The following evaluation questions guide systematic data collection and analysis processes:

- To what extent is Minnetonka Public Schools implementing an aligned (K-12) MTSS framework across all buildings?
- To what extent do teachers and staff support implementation of a MTSS framework? Minnetonka Public Schools MTSS Evaluation Proposal 2
- To what extent is staffing sufficient and equitable across tiers of service to support quality implementation of an MTSS framework?
- To what extent is staffing efficient and responsive to appropriately address student needs?
- What is the relationship between implementation of the MTSS framework and student achievement and behavioral outcomes?
- What is the impact of the MTSS framework on special education child count?
- To what extent is special education programming for mild disabilities consistent with best practice research?
- How will the results of the MTSS audit be organized into a 3-year implementation plan for the district and each building?

MTSS Evaluation Work Plan

The work plan for evaluating the implementation of MTSS involves collecting data through surveys and semi-structured interviews as well as reviewing and analyzing extant data. CAREI's Minnetonka Public Schools MTSS evaluators will work in close collaboration with district leaders to implement data collection methodologies.

The evaluation work plan outlines the evaluation questions, data collection and analysis processes, measurement outcomes, and a projected evaluation timeline for completing the work. Rationale for Data Collection Methods and Analysis The proposed MTSS evaluation will consist of analyzing descriptive statistics from semi structured interviews and implementation surveys. Results will be used to identify strengths and opportunities for growth. A review of extant data will focus on student achievement from statewide tests and local assessments to determine the percentage of students at low, medium, and high risk along with outcomes. These data are expected to inform decisions about MTSS implementation and future action planning.

Community Resource and Supports to Minnetonka Students

Minnetonka School District partners with Relate Counseling for Co-located mental health services and Park Nicollet Growing through Grief program therapist for services. The District is fortunate to have many additional communities supports along with county crisis centers.

Park Nicollet Growing Through Grief Program has been an integral part of the Minnetonka community for 23 years providing school-based grief support through 1:1 counseling, weekly peer support groups and death related crisis support in the elementary, middle, and high schools. Over these years we thousands of Minnetonka students, families and school staff have been supported through this program as they process death related grief. Childhood and teen grief is an underserved area in our communities and Minnetonka has been a leader in helping create change and saving lives by supporting our collaborative partnership.

Relate Counseling Center has served the Minnetonka Schools for 51 years. Last school year Relate served more than 500 students individually or in group formats and they look forward to serving even more students this year with service expansion. This year Relate will continue working with the District to provide individual and group programming along with co-hosting a webinar for parents and participating in other district led engagements.

Relate is presently at all of our of District schools serving students. There has been no wait list thus far and the District is grateful for their continue partnership and support to our students and families.

Ms. Ferris is active with the Hennepin County Mental Health Coalition and this is facilitated by Dr. Mark Sanders. Hennepin County (HC) school mental health, under the leadership of Mark Sanders, has been collaborating with local school districts to form a leadership networking group to create an exchange on school mental health, SEL, and MTSS supports.

In the spring of 2019, Superintendents expressed concerns with Hennepin County over the rising issues related to student mental health. Mark Sanders was charged to bring

together school leaders, listen and understand more about what schools are experiencing.

Ms. Ferris has recently met with Dr. Sanders to formulate a training plan for our school staff on accessing county mental health case management for students in need. This training will take place with a Hennepin County mental health supervisor and our school support staff. Dr. Sanders will also meet with Michelle and District leaders to further review county supports, funding and programs available to our students, families, and staff through the county. District has reached out to Dr. Sanders to meet to review all county supports and possible funds and programs we may access for our students, staff, and families.

Incorporating key recommendations from the Mental Health Advisory Committee:

During the spring of 2019-2020 school year Minnetonka School District established the Minnetonka Mental Health Advisory Council. The establishing of this advisory council as a strategic next step was the effort to further engage community discussion and input from key stakeholders. The Advisory Council will engage key stakeholders, invite student and parent voice and bring in community expert resources to partner in this critical work.

The District Advisory Council is an impressive group of 26 members with cross representation of parents from various grade levels. The advisory council has students in addition to representatives from District support staff, experts from our community agencies and key mental health stakeholders. Objectives for the Minnetonka Mental Health Advisory will be:

- To advise, support and pose critical questions
- Act as communication link to the District and community
- To assist in further assessing needs and analyzing data
- Review and establish goals
- To make recommendations
- To inform District of children's mental health services
- To be leaders and share knowledge and expertise

This advisory council has been active in sharing their time, talents and providing panel presentations and support to outreach activities to the greater community.

The District hosted a Virtual Mental Health Town Hall, "Navigating Mental Health Challenges during COVID-19," on November 18. Two hundred and fifty participants signed up to attend the virtual presentation and panel event, which was sponsored by the Minnetonka Schools Mental Health Advisory Council and the District's Parenting with Purpose Speaker Series.

The town hall included presentations from Dr. JoAnne Hoffman Jecha, MD; Dr. Katie Holter, PsyD; and Sandy Mangle, MA, AMFT. A Q&A panel with presenters followed. Minnetonka Schools school psychologist Dr. Jonna Hirsch, PhD; Relate Chemical Health Clinician and Tonka CARES Coordinator Judy Hanson, LSW, MA; and two students from MHS also joined the panel to answer questions and share their perspectives on student and family mental health.

Dr. Hoffman Jecha presented on health lifestyles, covering topics from sleep, social media, diet, vitamins, and connections to combat anxiety and stress. She also discussed impairment and how to know when it is time to get help.

Dr. Holter presented on the validity of all emotions and the power of validating feelings. She also covered the topics of coping skills and self-regulation.

Sandy Mangle, MA AAMFT, presented on the realities and effects of COVID and the mental health needs of families, while offering many family and self-care strategies.

Our recent outreach was a community viewing of the documentary *Angst*. We had approximately 400 people watching this film across our school community on Wednesday, February 3. Most of these families then tuned in to an elementary or secondary town hall with their panel presentation follow up.

Our intent with this outreach and town hall activity was to start a community conversation with our families about anxiety and mental health. The film helped families identify and understand the symptoms of anxiety as well as encouraged discussion about mental health and to share resources.

The Mental Health Town Hall Panel:

- Jennifer Smasal: Minnetonka High School Assistant Principal
- Dr. Jonna Hirsch: Minnetonka High School Psychologist
- Judy Hanson: Relate Chemical Health Specialist and Tonka Cares Coordinator
- Dr. Kate Holter, PsyD: Private Mental Health Clinician
- Dr. Andrea Johnson, PsyD: Private Mental Health Clinician
- Amanda Sullivan: Relate School Based Mental Health Coordinator and Mental Health Clinician
- Stacy DeCorsey: Excelsior Elementary School Principal
- Amy Horning: Clear Springs School Social Worker
- Kari Palmer: M.A., CCC-SLP Social Thinking Trainer | Consultant | Author and Minnetonka Parent
- Shelly Harvey: Private Mental Health Clinician, Life Coach and Parent
- Matia Sollom: Relate Co-located Mental Health Clinician

Student well-being and staff support during COVID-19 Pandemic

During this time of COVID-19, we have put student well-being at the forefront of our work and look for additional professional development, and support to students, and to also support our staff, and families. We are critically aware that we need to continue to provide education, outreach, opportunities for support not only to our students, but for staff and families.

The District continues to add and build upon the well-being website which is another engagement tool for students, families, and staff. The District's well-being website which was released in July 2018, is a comprehensive resource map for families and staff of district and community resources. This well-being website links school resources, outlines the process and who to contact when there may be a concern about a student's well-being. The website is a live document that Student Support Services and the Communications Department updates, as necessary. This website also outlines community resources and supports and provides frequently asked questions and helpful strategies to foster positive student well-being.

<https://www.minnetonkaschools.org/district/departments/student-support/resources/well-being-guide>

The website links to all school counseling pages, and links to the District's COVID-19 website. That website in turn also links to additional mental health resources and supports. We continue to add to this living document that has become a valued resource for students, staff and community.

Ms. Ferris concluded by saying that the District is proud of the great work that has been done to further student well-being supports and processes, yet we also recognize the need for ongoing education, outreach for all, assessment and expanding efforts to reach and support all students who struggle with social, academic, emotional, and behavioral needs. District leadership is critically aware of the high numbers of students that struggle with anxiety, depression, and other mental health needs, at an increased rate with COVID-19. Ms. Ferris noted that the District will continue to prioritize student well-being and mental health.

In the discussion that followed, Board members thanked Ms. Ferris and members of her team for the incredible amount of work that had been done this year on this Goal. Board member Becker asked when EmpowerU would be offered at the middle school level. Ms. Ferris responded that the District was hoping to do a pilot program at the seventh grade level this coming fall. Board member Wagner commented that she was looking forward to the upcoming health curriculum review.

CITIZEN INPUT

Chairperson Vitale outlined the guidelines for the Citizen Input portion of the agenda, noting that this opportunity was available to community members who wished to address the Board on any topic. No one responded to this invitation to speak.

SELF-INSURANCE UPDATE

Executive Director of Finance and Operations Paul Bourgeois led the discussion. He began by saying that the District has had a Self-Insurance Fund for health and dental insurance since Fiscal Year 2001 (FY2001). In the 19-year period since FY2002 after the fund established its reserve, average premium increases have been 3.51%, significantly below regional health insurance cost trends over that same time.

For FY21, the Health Insurance Plan through January is having a closer-to-normal year compared to FY20. Projections for June 30, 2021 indicate a potential cash-basis surplus estimated at \$394,927.96, or 2.5% of projected expenses. This would follow on the FY20 cash-basis surplus of \$2,837,639.11, or 23.3% of actual expenses, which was primarily the result of the onset of the COVID-19 Pandemic. It is important to note that medical premiums were increased 2.2% for FY21. FY21 Medical Claims of \$6,871,602.14 through January 2021 are running approximately level with FY20 Medical Claims of \$6,853,242 through January 2020 (prior to the onset of the pandemic).

For FY21, the Dental Insurance Plan through January 31, 2021 is running at a projected break-even level on a cash basis after premiums were held flat with FY20 premiums. The dental plan had a cash-basis surplus in FY20 of \$203,016.59, or 20.7% of actual expenses. It is important to note that dental premiums were held flat at FY20 rates for FY21. FY21 Dental Claims of \$737,947.34 through January 2021 are running at approximately % above Dental Claims of \$636,620.65 through January 2020 (prior to the onset of the pandemic).

Looking forward to FY22, for the Health Insurance Plan, applying medical trend rates of 7.5% as projected by the Segal Health Trend Cost Survey (a widely used projection by actuaries for developing health insurance premiums) to the FY21 District projection, and 3% historical inflation rates to administrative costs to the FY21 District projection results in total expected expenses for the Health Insurance Plan in FY22 of \$16,158,553. This compares to the CBIZ Actuarial Calculation which used expenses of \$16,066,679 for the 12 months of calendar 2019 (weighted at 20%) and \$15,520,179 for the 12 months of calendar 2020 (weighted at 80%), to get a calculation of \$15,629,479 for FY22.

CBIZ Actuaries have calculated that to have revenues equal expenses for the Health Insurance Plan in FY22, a premium decrease of (1.19%) would achieve that balance. However, they recommend to never reduce premiums in the health insurance world given

that the long-term trend is for increasing costs. But they have communicated that a 0% increase in medical rates would be appropriate.

District calculations using the District alternative methodology of applying trend rates to the FY21 projection, (which uses actual expense projected out to year end based on prior month averages) does show that a 0% premium increase would generate an estimated \$15,516,066 in revenue, which is essentially a breakeven level with numbers very close to the CBIZ Actuary estimates.

Given the unusual medical activity levels over the prior 12 months related to the pandemic, it is prudent to rely on the CBIZ Actuary projection in this instance. Given the fact that the Health Plan had an abnormally high surplus in FY20 due to the pandemic, and that it is projected to operate at a small surplus in FY21, there are sufficient resources to availability to cover a small revenue shortfall in FY22 should that materialize. This option would also be the best way to utilize some of the assets from the large FY20 surplus, by using small amounts at a time to hold down premium increases over time, which has the effect of funneling some of those funds back to the plan members while not setting up a large premium increase at a later date.

The following table of rates will be suggested to the Self Insurance Advisory Committee at their meeting of February 22, 2021:

Base Plan Perform Network	FY21	FY22	Change
Employee	\$727	\$727	\$0
Employee + 1	\$1,235	\$1,235	\$0
Family	\$1,735	\$1,735	\$0
VEBA HRA Plan Open Access	FY21	FY22	Change
Employee	\$672	\$672	\$0
Employee + 1	\$1,144	\$1,144	\$0
Family	\$1,608	\$1,608	\$0
HD HSA Plan Open Access	FY21	FY22	Change
Employee	\$605	\$605	\$0
Employee + 1	\$1,028	\$1,028	\$0
Family	\$1,446	\$1,446	\$0
Smart Care HD HSA Care Lane	FY21	FY22	Change
Employee	\$547	\$547	\$0
Employee + 1	\$929	\$929	\$0
Family	\$1,306	\$1,306	\$0

Looking forward to FY22 for the Dental Insurance Plan, applying dental trend rates of 2.6% as projected by the Segal Health Trend Cost Survey (a widely used projection by actuaries for developing dental insurance premiums), and 3% historical inflation rates to administrative costs results in total expected expenses for the Dental Insurance Plan in

FY22 of \$1,158,746.82. District alternative projections indicate that a 2.6% rate increase would result in FY22 Dental Insurance Plan revenues equaling expenses. This would be an increase that would be rounded to \$2 per month for both Employee and Family monthly premiums.

CBIZ Actuaries have calculated that to have revenues equal expenses for the Health Insurance Plan in FY22, a premium increase of 0.98% would achieve that balance. This would be an increase rounded to \$1 per month for both Employee and Family Premiums.

At this point in time, given the overall uncertainty of the unusual patterns over the past months due to the COVID-19 Pandemic, it is prudent to rely on the CBIZ Actuary projection in this instance.

Suggested Dental Insurance Plan premiums for FY22 are as follows:

Dental Plan	FY21	FY22	Change
Employee	\$43	\$44	\$1
Family	\$106	\$107	\$1

The Self-Insurance Plan also is required by Minnesota statute to request proposals for Third Party Administrator (TPA) services every two years, or after three years with the approval of the largest bargaining unit.

It is important to note that requesting proposals for Third Party Administrator services is a solicitation for professional services, rather than asking for bids on an identical product. With a bid process, the bid solicitor is required to take the low bid meeting specifications. With a request for professional services, each professional organization's service is considered a unique product, so the solicitor may select the service provider based on the whole of factors considered, and not just the price quoted.

Third Party Administrator Services make up a very small part of the overall expenses of the Self Insurance Fund, typically accounting for less than 1% of annual expenses. TPA fees are one component of the analysis but are actually the smallest component.

In addition to administering claims, the Self-Insurance Fund will typically overlay its plan onto existing networks of the Third Party Administrator, so the networks available to accommodate the Self-Insurance Fund's Plans are a very critical component to the overall evaluation process in selecting a Third Party Administrator.

Another important factor is discount levels for services. Third Party Administrators can provide deeper discounts for claims at health facilities owned by the Third Party Administrator. Accordingly, employee choice in selection of primary care facilities and hospital care facilities are very important because the deeper discounts at Third Party Administrator-owned facilities will result in the lowest overall cost of care to the Self

Insurance Fund. Inherent within this component is the analysis of provider disruption to members.

Prior to FY13, most of the plan members were enrolled in the Base Plan, which had open access to all providers. This plan was a very good plan for the member, but it is also the most expensive plan. A relative few were enrolled in the VEBA-HRA plan with a high deductible. In FY13 there was a spike in high-dollar-claims (such as cancers). This necessitated a mid-year 15% premium increase to ensure the fund had a positive Unassigned Fund Balance at the end of the year.

After that year, many changes have been recommended to the Self-Insurance Committee and enacted by the School Board that made the VEBA-HRA plan more attractive to members and added two HSA high-deductible plan options. Included in those changes were one that made the Base Plan no longer open access by moving Mayo Clinic and Hazelden Clinic out of the Base Plan network.

The various changes have moved enrollment to 55% in the VEBA-HRA and HSA plans, and 45% remaining in the Base Plan. As the Base Plan typically has a loss ratio at-or-above 100% of the premium contributions of the members choosing the base plan, and the VEBA-HRA and HSA plans typically have a loss ratio low enough to cover their costs, cover the plan administrative costs, and cover any Base Plan expenses over a 100% Base Plan loss ratio, the fund has been very stable.

Continuing to make the VEBA-HRA and HSA plans more attractive to District employees by having lower premium and open access compared to the Base Plan is a critical component of the future financial success of the Self-Insurance Fund. The variety of plan offerings enable it to continue forward with average premium increases in the 3.5% range as has been its history because it incents staff to move to the lower cost plans over time.

In Minnesota, there are five entities that make up the Third Party Administrator Market:

Blue Cross Blue Shield of Minnesota
HealthPartners
Medica
Preferred One
United Healthcare

Of these providers, all but United Healthcare have served for periods of time as the Third Party Administrator for the Self-Insurance Fund, with HealthPartners being the current TPA provider.

Quote packets were received from Blue Cross Blue Shield of Minnesota, Health Partners, and United Health Care.

The District works with CBIZ Consulting as advisors to the Self Insurance Fund and for all other insurance work such as long-term disability and group life insurance. CBIZ assisted the District with the analysis of the three proposals.

A summary of the results of the three key factors for the proposals are as follows:

Estimated Fee Proposal

- United Healthcare proposed the lowest fees of the three, with an estimate of \$34,033 per year.
- Blue Cross Blue Shield proposed a fee with an estimate of \$59,431 per year
- HealthPartners proposed a fee estimated at \$135,963 per year

Overlaying Current Plan Offerings on Proposer TPA Networks

- United Health Care's proposal would place the restricted-access Base Plan, open access VEBA-HRA and open access HSA into the UHC Open Access network - it would move the high-cost Base Plan into open access, which would disincentivize the use of VEBA-HRA plan and HSA Plans
 - The lowest cost limited primary care access network (Core ACO) for the \$3,000 limited primary care access HSA is competitive in terms of locations (3)
- Blue Cross Blue Shields's proposal would place the restricted-access Base Plan, open access VEBA-HRA and open access HSA into the BCBS Aware Open Access network - it would move the high-cost Base Plan into open access, which would disincentivize the use of VEBA-HRA plans and HSA Plans
 - The lowest cost limited primary care access network (High Value Network) for the \$3,000 limited primary care access HSA is competitive in terms of locations (6)
- Health Partners' proposal would keep all plans in their current categories regarding open access, with the Base Plan continuing as restricted access and the VEBA-HRA plan and HSA plans continuing as open access – this would allow for continuing the incentivizing of movement to the lower cost plan to increase those percentages above 55% over time
 - The lowest cost limited primary care access network (SmartCare) for the \$3,000 limited primary care access HSA is competitive in terms of locations (4)

Service Discounts

- As previously stated, Third Party Administrators will offer deeper discounts on health care prices for claims that come through the facilities that they own. These can run in the high-six-figure range and possibly more during the year. The largest provider of primary care and additional care to members of the Self Insurance

Fund, out of 42 total providers used by plan members over the last 18 months, is Park Nicollet, which handles 52% of all claims of the Self Insurance Fund.

- The next largest provider is Ridgeview Clinics, which handles 10% of all claims
- The remaining 38% of claims are divided among the remaining 40 providers

Mr. Bourgeois noted that the Self-Insurance Advisory Committee is considering all this information and is scheduled to vote on recommendations at the February 22, 2021 committee meeting. Health and Dental premium rates for FY22 need to be set at the March 4, 2021 School Board meeting so that they can be communicated to employees and plan members 90 days before they become effective, as required by the Affordable Care Act.

UPDATE ON GOAL 2 FROM HUMAN RESOURCES

Executive Director of Human Resources Dr. Mike Cyrus led the discussion. He noted that as part of the School Board's Goal #2, the Board had set a specific target for recruitment efforts and mandated an internal look at the District's recruiting practices. Highlights of his report included the following:

Casting a Wider Net

The Board's specific charge for the Human Resources Department was as follows:

Review hiring activities to further promote hiring staff with diverse backgrounds, particularly people who are BIPOC and LGBTQIA+, to enrich the learning environment for all students by way of diversified perspectives, identities and experiences. Conduct a minimum of three recruiting activities aimed at this effort.

School Year '21 will be a key, base-line year for gathering and reviewing data on the District's success at hiring staff with diverse backgrounds. A preliminary review of our demographic data reveals that our entire staff is comprised of 7% people of color. Currently, we have no legal means to ascertain what percentage of our staff may consider themselves LGBTQIA+. At the same time, our data reveals that 16% of our student body is comprised of people of color. We do not have a viable means of ascertaining whether students identify themselves LGBTQIA+ individuals either. As recruiting season is about to dawn, we do not currently have complete data on applicant demographics, but we expect to have this by the close of the fiscal year.

Up until now, the School District has not established a regular presence on the national recruiting scene. Due to its superb, state-wide reputation, Minnetonka has traditionally attracted more than enough candidates for available openings year after year. The one recruiting event which we faithfully staffed was the large, Minnesota Education job fair that takes place in April each year. This is a cooperative venture between almost all of

the teacher preparation institutions in the state, including the University of Minnesota. Given the scope of students and alumni from these schools, we know anecdotally that this fair produces diverse candidates; we do not have hard data, though, to demonstrate how fruitful this event has been in this regard. This year, we plan to participate again, and we will carefully track leads and potential hires that result from this event. The District had tried in-person recruiting out of state for a few years, but this effort was discarded as the return on investment was low. The HR department is already spread thin and being away for recruiting for long stretches of time became untenable, especially when we secured no new hires as a result of this effort.

One of the hidden advantages of the pandemic is that all of the recruiting events around the country have now migrated online. This is now making it possible for Minnetonka to be a presence in these events that promise us exposure to a more diverse candidate pool at a minimal expense. In an ideal world, all of these events will stay “virtual,” which means that we could potentially recruit in diversity-rich locales for the foreseeable future. If, alternatively, they revert to their former in-person format, we can use this year to gauge whether the venue promises to be productive. School Year '21 has allowed us to dramatically increase our participation from one fair to many with very little monetary expenditure and investment of time.

Taking advantage of the ability to recruit remotely, we are now registered participants in sixteen sites. Some of the places at which we will be present are known for producing quality teacher candidates and as a team, we wanted to be there! Examples of these schools are Iowa State, University of Northern Iowa, and Western Governors. We are taking a chance on a nationwide STEAM / Special Education Fair as the latter subject area is extremely challenging to staff. A new, online Minnesota Fair (Educate Minnesota) has emerged and we will recruit there; thus far, it appears very promising. Now, of these sixteen venues, eleven promise exposure to candidates from diverse backgrounds and for this reason, we targeted them specifically.

Using the *US News & World Report* rankings, we targeted the ten most diverse university programs in the country as well as the ten largest, Hispanic-serving schools. Of these twenty schools, we sought out ones who had Schools of Education large enough to host their own teacher job fair during the spring semester of the current school year. From this potential list of twenty, we registered to participate in eight teacher hiring events as follows:

- University of Texas – El Paso, February 5 - #8 Hispanic population
- University of San Francisco, February 23 – #4 most diverse
- Florida International University, February 24 – #3 Hispanic population
- University of Nevada – Las Vegas – #2 most diverse
- George Mason University, March 17 - #9 most diverse
- University of Texas – San Antonio, March 31 - #4 Hispanic population
- University of Houston, April 7 - #7 most diverse

California State – San Bernardino, April 8 - #2 Hispanic population

Additionally, we are registered and have designed a booth for the national, Diversity in Education Fair that will culminate our remote recruiting efforts. This event should see over 1000 registered candidates and many large and prominent school districts will also be present. Among our competitors at the event will be the Anne Arundel Public Schools in Maryland; Gwinnett County Public Schools in Georgia; and the Orange County (California) Department of Education. Notably, New Trier Township High School, a very demographically similar district to Minnetonka will be recruiting at this fair as well. About 150 districts in total will be represented.

When we return to the Board's charge of reviewing our hiring efforts vis-à-vis diversity candidates, our first goal will be to determine if this enlarged recruiting footprint has yielded more candidates from diverse backgrounds. Of course, we will also be seeking well-qualified individuals as it is important that we hire individuals who demonstrate the District's emphasis on child-centeredness and excellent pedagogy. The key to be able to conduct an effective review is good record-keeping and subsequent data analysis. As noted earlier, this will be a baseline year for us to gather actionable data related to our charge.

At the same time as we devote attention to widening our net, we must also look at our track record of retaining candidates who hail from under-represented backgrounds. Many districts have found that an enhanced recruiting presence yields more hires, but once aboard, these new diverse employees do not remain long with the organization. To help us start to gauge the effect of attrition on our BIPOC and LGBTQIA+ employees, we have recrafted our employee exit form. We are now asking specifically if onboarding and mentoring met the needs of people from diverse communities. We have also devised a way for people to share normal exit interview information with us anonymously, but at the same time present themselves for participation in a diversity focus group of leavers. So, too, we have altered the anonymous, New Hire survey to allow for sharing of one's experience in onboarding and also volunteer for focus group conversations on how well the District is meeting the needs of diversity populations in our onboarding and mentoring. We have already begun preliminary conversations with the Teaching & Learning staff on how mentoring models can be developed to enhance conversations between new hires from diverse backgrounds and veteran staff who may not be from an under-represented population.

Returning to the notion of widening our net, we will be spending important effort on how we market our opportunities to a broader audience. An initial foray here happened with our posting of the Director of Aquatics position. We produced a more graphic and information-rich marketing piece to accompany our normal job posting. As the District hopes to bring more candidates on board that had not considered us before, it is critical that we start to 'tell our story!' Minnetonka has a phenomenal reputation, but likely that reputation dims as we cross the state line. We need to articulate what is great about

working here and all the tremendous opportunities a Minnetonka education involves and what this means from an employee's perspective. To effectively cast a wider net, we should not only rely on candidates self-selecting to apply; we should be in the business of encouraging a wider pool to submit an application.

When we build these marketing pieces, and the next one will be a presentation for use at job fairs, we want to take into consideration that this is a 'next generation' audience. Research tells us that if we want to attract these younger applicants, we should really ensure that our marketing appeals to this demographic. We will be looking to see, for example, whether we are being explicit in describing how working in Minnetonka communicates purpose. Another facet for our attention is being explicit about stability in getting a job here and the potential for growth. What we say and depict about Minnetonka as a diversity-friendly employer is critical in addressing the Board's charge and also in attracting a broader applicant pool. Going forward, we will start to not only post our openings, but market them as well.

Along those lines, the District is currently advertising openings at a local job-posting site, Jobs in Minneapolis.com. Along with online exposure this brings, our vacancy notices get pushed out to up to 20,000 community sites that have a specific diversity angle. To date, we do not have solid data on whether these secondary postings are yielding candidates. Once the current recruitment cycle has concluded, we should be able to better gauge whether this posting regime is yielding results. At the same time, we are seeing a competitor, Indeed.com establishing a more prominent market presence. As we wind down this year, we will want to closely examine whether this site could be added to our advertising repertoire or whether it could replace the current channel.

Dr. Cyrus concluded his report by noting that the main thrust of the Board's Goal #2 regarding diversity recruiting has been achieved. The Human Resources Department will be present at nine events that offer great promise of exposure of District opportunities to candidates from diverse backgrounds. Once we have completed this recruitment cycle, we will be well-positioned to examine how effective our efforts at locating diverse candidates, identifying high-potential hires and bringing them aboard have been.

In the discussion that followed, Board members discussed how obtaining a teaching license in Minnesota may be a barrier for potential employees from out of state, and how to deal with those barriers. Board member LeSage suggested talking with several large employers in the state, including Target, Cargill and 3M, to see how they have recruited and retained diverse employees coming from out of state. The possibility of having current District employees serve as mentors to new hires and their families was also discussed.

REVIEW OF 2022-23 CALENDAR PARAMETERS

Dr. Cyrus led the discussion. He noted that the District's Calendar Committee had met for the first time last week, and the discussion had been very productive. He asked for feedback from the Board on the length of winter break, and showed several drafts of different scenarios. After discussion, it was agreed that Draft #3 was the one preferred by most Board members.

Dr. Cyrus thanked the Board for the feedback and said he would take it back to the committee.

REVIEW OF FY21 AMENDED BUDGET

Executive Director of Finance and Operations Paul Bourgeois led the discussion. He explained that the District continually monitors actual revenue and expenses against budgeted amounts through the year, and typically makes mid-year budget adjustments to reflect any changes in revenue and expense projections that have materialized in the first 6-7 months of the year. For FY21, there have been more adjustments than usual due to the impact of the COVID-19 Pandemic on the cost of delivering instruction in a safe manner.

The FY2021 Amended Budget projects the following amounts for the General Fund:

<i>General Fund Revenues</i>	\$139,631,456
<i>General Fund Expenses</i>	\$145,985,233
<i>Projected Revenues Over (Under) Expenses</i>	\$ (6,353,777)
<i>Net Change in Fund Balance</i>	\$ (6,353,777)
<i>Projected Ending Unassigned Fund Balance</i>	\$ 20,135,155
<i>Unassigned Fund Balance as Percent of Expenses</i>	13.8%
<i>Net Change in Unassigned Fund Balance From FY20</i>	\$ (6,365,199)

Mr. Bourgeois then went over amended budgets for the Nutrition Services Fund, Community Education Fund, Capital Expenditures Fund, Building Construction Fund, Debt Service Fund, Fiduciary Funds, Arts Center Fund, Dome Operations Fund, Aquatics Fund and Pagel Center Operations Fund. Chairperson Vitale noted that the revised FY21 Budget would be brought back to the Board's March 4 regular meeting for approval.

ADJOURNMENT

The Board adjourned the Study Session at 9:00 p.m.