

Adopted: 2.11.19

## New Millennium Academy

### HITA Policy

Policy for purchase of group health insurance coverage:

It is New Millennium Academy's (the School) intent to comply with all applicable provisions of the Minnesota Health Insurance Transparency Act (HITA) for covered non-union charter schools, as set forth under Minn. Stat. § 124 e.12 subdiv 5. The following outlines New Millennium Academy's procedures, in accordance with the law.

1. At least once every two (2) years, New Millennium Academy will issue a Request for Proposal (RFP) from at least three (3) different group health insurance sources or issuers. In consultation with its agent of record, the School will determine (1) from which insurance carriers to request proposals, (2) whether to request proposals from more than three carriers, and (3) evaluate a self-funded coverage option, if appropriate.
2. The School will cooperate with the agent of record to supply the required information and documentation in connection with the proposals including obtaining required information from School employees.
3. The RFP will include a deadline by which proposals must be submitted. Such deadline will be selected by the School's agent of record and will provide the agent of record and the School sufficient time following receipt of the proposals to review the proposals, negotiate with providers, select the winning proposal, and implement the new group health insurance contract prior to its effective date.
4. All responses to the RFP must be delivered to the School in a sealed envelope and the authorized school representatives are to open the sealed proposals.
5. All sealed proposal responses will be opened by the designated authorized representatives at the same time, and will be closed to the public. The School's agent of record may be present at this meeting.
6. After the opening of the proposals, the authorized school representatives will, within a reasonable period of time, transmit information regarding each proposal to the School's Board of Directors.

7. The School, with the assistance of the agent of record, reserves the right to request additional information regarding any proposal and/or to negotiate changes to a proposal.
8. The School's authorized representatives, with the assistance of the agent of record, will evaluate all proposals, including any revisions thereto. The School reserves the right to accept the proposal which, in the judgment of the School, is determined to be in the best interest of the School and taking into account multiple factors, including but not limited to rates, benefit plan designs, provider networks, prescription drugs, aggregate benefits, and any other factors the School determines to be relevant to its decision. The School reserves the right to reject any or all proposals.
9. The authorized school representatives will select the group health insurance contract into which the School will enter. Such action will be presented for approval at the next scheduled meeting of the Board of Directors.
10. Following the selection of the group health insurance contract, the School will notify all eligible employees of any changes in the group health insurance coverage that occur as a result of entering into a new group health insurance contract. The School will provide such required notice prior to the effective date of the new group health insurance contract.
11. The proposals will become public data upon opening in accordance with Chapter 13 of Minnesota Statutes.