

MINUTES OF THE MEETING OF THE BOARD OF COUNTY COMMISSIONERS
BREVARD COUNTY, FLORIDA

9:00 AM

The Board of County Commissioners of Brevard County, Florida, met in special session on January 22, 2015 at 9:08 AM in the Government Center Commission Room, Building C, 2725 Judge Fran Jamieson Way, Viera, Florida.

CALL TO ORDER

Attendee Name	Title	Status	Arrived
Robin Fisher	Chairman/Commissioner District 1	Present	
Jim Barfield	Vice Chairman/Commissioner District 2	Present	
Trudie Infantini	Commissioner District 3	Present	
Curt Smith	Commissioner District 4	Present	
Andy Anderson	Commissioner District 5	Absent	

BUDGET PRESENTATION

Chairman Fisher called the meeting to order and asked Stockton Whitten, County Manager to give a rundown on how the workshop was going to take place. Stockton Whitten, County Manager stated the line-up is Tom Rosenberg, Budget Director will give the Judicial Program overview; and added the County is responsible for a lot of expenses on the Court side. He advised Scott Ellis, Clerk of Court will be presenting first, then Tom Rosenberg will do the Judicial Overview, the Mr. VanBever will do the Courts, then Public Defender, and the State Attorney's Office.

ITEM I.A., CHARTER OFFICERS

Scott Ellis, Clerk of Court advised he has been at \$2 million for a number of years; the Clerk's Office does not change much because all there is, is Finance and Clerk to the Board; and have changed very little since Article V. Chairman Fisher inquired if the \$2 million is just what he gets from the Board's side. Mr. Ellis stated that is correct, and entire budget is around \$20 million. He advised under Article V, Court funding has moved to the State. Chairman Fisher inquired what services he provides for the Board for that \$2 million. He responded, Fund Accounts, basically the Department Books, Accounts Payable, Clerk to the Board comes to the Board of County Commissioners meetings and runs the Value Adjustment Board (VAB). He added if the Board would like the Court side budget, he would be happy to send it. Chairman Fisher inquired if most of that budget is salaries and benefits. Mr Ellis responded yes, for some facilities projects, phones, and mail; there is not a whole lot. He advised Article V is the reason the Board does not receive revenue from traffic tickets and other things. Commissioner Barfield inquired if the Clerk of Court was on the same insurance as the County. Mr. Ellis responded, yes. Commissioner Barfield further inquired if the insurance included retirees. Mr. Ellis responded the way the insurance pool is set up, is that the retirees are all in the large pool, and so the Clerk covers the active duty employees; and the active duty insurance rate does help pay the retirees rates. He added there are also 300 Court employees that are on the County insurance plan; and the way the insurance works, is the Clerk pays roughly \$11,000-\$12,000 per year, per employee; and a certain amount of that is going towards retiree insurance. He added he has asked for in the past, is for the Board to change it to more of a cost of County issue; currently, the Clerk is billed for all full-time employees whether they take the insurance or not; and if the Clerk only got billed for those that took the insurance, it would go up, but would not be billed for those who did not

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take it. Chairman Fisher stated at one time the Clerk's Office went off on his own, and then realized this is the better deal. Mr. Ellis stated they looked in 2008; the cost ended up being about the same, but they did not know where the rates would go. Commissioner Smith stated it is refreshing and remarkable that Mr. Ellis has maintained a budget that is relatively static, and that is phenomenal. Mr. Ellis stated the Clerk's Office is a small part, and as the insurance costs have gone up, he has been able to eliminate a few positions because people get more productive over time, and for the Clerk's Office, it has worked out fine. He added Court side has been tough, and have taken a lot of cuts on the Court side. He advised one year, Howard Tipton advised the County Offices to come in with a 10 percent cut, and his office was the only one to do so; and suffered the consequence. He went on to say, if there is anything that the Board would like to know about Clerk to the Board, or VAB to let him know. He added as a former Commissioner, the budget meeting today is not just the budget, but questions on what each County Department does; he should have gone through that more; and that is what the Board used to do 20 years ago. He went on to say it is not just what is spent, but what is lined up for future expenditures; and the workshop environment is the best place to get that information. He added the presentation at the last workshop was very good, because people think being there is a billion dollar budget, that there is a billion to spend; and that is not the case. Chairman Fisher stated Mr. Ellis has done a great job at maintaining his budget, but he is not sure from a staff standpoint, how the whole County has fared. Stockton Whitten, County Manager stated when looking on the Board side is much the same story; and when looking over a period of time, expenditures were either flat or down. He added in looking at the presentation from last week, the Operating Revenues are flat as well; and thanked Mr. Ellis for pointing out that the Board does not have a billion dollars each year. He advised it is far less than that, but on the Board side, for the Board Departments, it is either flat, and if it is flat that is good, but in most instances it has decreased over time.

ITEM I.B. COURTS

Stockton Whitten stated, as Tom Rosenberg prepares for his presentation, the Board will hear from a number of Court Offices. He advised the Board will hear about Article V, which is Article V of the State Constitution; and back in 2005, revision seven to Article V of the State Constitution changed the way the Courts are funded. He noted it added some County responsibilities for funding certain things; and as the Board talks about unfunded mandates, staff is including under the constitution of the State to fund certain things on behalf of the Courts; such as facilities, telephones, Information Technology; and a lot of citizens do not understand that is the Board's responsibility. He added with the exception of a few local programs, those are the State requirements that are placed upon the Board as obligations under the State Constitution.

Tom Rosenberg, Budget Director stated the Mission for Judicial Support is to provide services to the 18th Judicial Circuit mandated by Article V of the Florida Statutes; and the main funding requirements are for Information Technology, Facilities, Local Requirements and Initiatives and Juvenile Alternatives. He advised the Department is organized by the service provided, for example, there is a block for Information Technology and that funds equipment, personnel, network support, and the Case Management System. He went on to say Facilities is responsible for building services and phone services; and local requirements include court innovations, mental health court and State Attorney and Public Defender local contracts. He added Juvenile Alternatives encompasses juvenile alternative sanctions coordinator, and the juvenile assessment center. He stated specifically, Florida Statutes 29.008, requires the County to fund certain court related functions, such as: Communications Services, Radio Systems, Criminal Justice Information Systems, Construction and/or lease, maintenance, utilities, and security of facilities; County and Circuit courts, Public Defender offices; State Attorney offices; Guardian Ad Litem offices, Clerks of the Circuit and County Courts performing court-related functions; Law

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Libraries; and Legal Aid and Alternative Sanction Coordinators. He noted the County shall pay reasonable and necessary salaries, costs, and expenses of State court systems to meet local requirements; and those are for specialized programs, non-judicial staff, and other expenses encompasses specialized court programs, specialized prosecution needs, specialized defense needs and other special factors. He stated one of the requirements, or mandates, per statute is in most years, the expenditures the County must fund from the County for judicial support are supposed to go up 1.5 percent from the prior year; it has been difficult to do that in the environment the County has been in for the past six years; however, for the current fiscal year 2014-2015, the State has exempted that increment this year, but the statute this year states the County has to maintain whatever the prior year expenditures were; and do not need to reflect the increase this year; and that will go back in effect for next year. He advised the County funds a lot of court related positions, which include two Judicial Technology Specialists, a Senior Network Administrator, Information Systems Technician III, DIS Systems Network Coordinator, Information Systems Consultant I, Trial Court Technology Officer, four Senior Secretaries, and a Court Program Specialist II. He stated the money comes from restricted funds, and Court Information Technology gets their primary funding from a \$2 service charge that is included in the recordation fee of recorded documents in the Clerk of Court, General Fund transfers, and some miscellaneous sales of surplus County items, and interest earned. He stated there is a \$30 surcharge on non-criminal traffic infractions, which was \$15 until about four years ago; they also receive General Fund transfers, if there was balance forward, they would receive that, and they have some rent that is received. He advised the Local Court Mandates and Initiatives gets 25 percent of the \$65 additional court costs for felony, misdemeanor, delinquent act, or criminal traffic offense; that \$65 also goes to Law Library, and Legal Aid. He added local courts also get a General Fund transfer; and Juvenile Alternatives receives 25 percent of the \$65 additional court costs, General Fund transfers, and transfers out to the Juvenile Assessment Center, which is in Housing and Human Services. He went on to say the overall revenue budget, including things he referenced, totals \$5,057,742. Stockton Whitten, County Manager inquired if the General Fund transfer has increased. Mr. Rosenberg stated there is a slide for that; and to support Article V requirements, which facilities is by far the largest piece of the \$5 million, about \$3.3 million is spent to support facility needs for the court offices; the next largest piece is court IT, at about \$1.4 million; and about \$67,000 goes to juvenile alternatives, and about \$240,000 that goes to local court requirements. He advised the revenue trend spiked when the fee went from \$15 to \$30, but has been decreasing, the \$65 court costs have been decreasing, and the bottom line is that most of the revenue sources have been declining over the last few years. He added the \$2 recording fee had a spike right as foreclosures were calming down, but it, too, has went down. He stated General Fund transfers in 2008 had about \$3.7 million transferred, and now it is slightly above \$2.5 million; and the reason for the increase between 2011 and 2015 is because the other revenue sources continue to go down. Chairman Fisher inquired if the State determines the court fees and facility surcharges. Mr. Rosenberg stated they are mandated by Statute. Chairman Fisher inquired about when the fee went from \$15 to \$30, if that was a State Mandate. Mr. Rosenberg responded there was an option given to the Counties to increase from \$15 to \$30, and the Board accepted that option. Mr. Whitten stated those are set by an Ordinance by the Board. Chairman Fisher inquired if it was decreased from \$30. Mr. Rosenberg stated it is still at \$30. Mr. Whitten stated the court fees have dropped dramatically over the past couple years and that is why the General Fund transfer has went up.

Mark VanBever, Trial Court Administrator for the Judges of Brevard County, stated he will explain the functions that are under the supervision of the judges of Brevard County. He noted the mission for the Judges and Court employees is shared by them and the Mission statement is to provide effective administrative and technology support that enables the courts of Brevard County to fulfill the mission to protect rights and liberties, uphold and interpret the law, and provide for the peaceful resolution of disputes. He added they serve as a support system to the Judges of Brevard County; there are some important partnerships that exist in the funding arena; the Board of County Commissioners, State of Florida, and Courts are partners to serve

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the citizens of Brevard County; Chapter 29, Florida Statutes, links them together in a local funding relationship; specifically, 29.008 is the Chapter that governs how the Board relates to the courts in a funding relationship. He added the Board provides about 2.96 percent of the funding that is in all of the budgets, both State and County that the courts manage; and that +/- three percent does not include expenses in the facilities department budget for operating the three court houses in Brevard, but other than the budgets he manages, the Board provides about three percent of the funding. He went on to say, as Mr. Rosenberg mentioned, according to Chapter 29, there are certain expenses that the County provides funding for to the courts including, facilities, security, technology, communications, and other local services, like case management and mental health court. He noted the Legislature does not provide any funding in these areas. He stated there are several programs and services related to the courts, the State provides almost all of the funding, but by statute, these things are funded by the Board, Court Improvement is for staff members to help judges expedite family probate and guardianship cases; they monitor what is going on, and try to get the cases on the docket and heard; Drug Court Administration provides support to adult drug court, most of the monies there are for drug testing kits and for drug lab charges; Court Technology is a cost-center that is vital to the courts for electronically filing documents, for viewing court records, case management, personal computers, for the networks, those computers are on, and for a variety of other applications, very key and critical part of their budget. He added Facilities are important, they occupy three court houses, Melbourne, Titusville, and Viera, and because of the Board's generosity, they have a place to go to work every day; Mental Health Court helps defendants who have mental issues, to get back on track, and to avoid future arrests and not go to a jail if they will meet the requirements that are set forth to them; this program reduces jail population; and the savings in jail population exceeds the cost of the program. He noted the Juvenile Alternative Sanctions individual provides options to incarceration of juveniles, so instead of locking them up, there may be a better alternative that fits the crime that was committed. He went on to say this program reduces juvenile detention center population, and saves more money than it costs. He stated the money provided by the State of Florida, and related to court generated revenues, is almost \$18 million, which is 97 percent of his entire budget, State and County included. He went on to say, from County General Revenue, they receive about three percent, or \$480,821, for the entire budget; and added Judicial Branch Administration is just the County side of the budget and about 38 percent of that comes from General Revenue from the Board. He reiterated that out of the \$1.3 million budget, only about \$480,000 comes from the General Fund, and the other is through a variety of other court related fees and surcharges. He advised they have about 10.5 full-time equivalent (FTE) positions that the Board provides funding for; the courts county budget is comprised of two departments, Court Improvement consists of 2.5 FTE, who expedite family probate and guardianship cases, so they perform a case management function. He added the other two cost centers are Judicial Programs and Drug Court Administration, and they do not require any funding from the Board. He went on to say the remainder of their programs fall under Judicial Support, in which Tom Rosenberg gave a presentation on; his department is a subset of the explanation that Mr. Rosenberg just gave.

Commissioner Infantini inquired where the supervised visits program is in the budget. Mr. Van Bever responded that there is no funding for supervised visitation, but they have not received funding from the Board for that. Commissioner Infantini further inquired who decides where the funds are allocated in these programs. Mr. Van Bever stated the Statute states that the Chief Judge decides where the funds are allocated. Commissioner Infantini stated it is not that the Board is not funding it, it is the Chief Judge determining where the funds are best utilized. Mr. Van Bever stated he believes it is a combination of each; if the Board decided that it wanted to have a supervised visitation program, that the courts would be very much in favor of that, but would also say that it is a conflict of interest for the court to supervise it; and added it should be housed under some other agency. Commissioner Infantini stated when she first came on as a commissioner, there were supervised visits and she remembers speaking with Mr. Van Bever

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and a Judge about the budget and losing supervised visitation; and she questioned the prioritization then, saying that was the best place to cut, and now it is not there.

Stockton Whitten, County Manager stated Ian Golden, Housing and Human Services Director has informed him there are grant dollars in their budget that they will talk about with the Board in regards to a supervised visitation program.

Chairman Fisher inquired about his budget and when adding the numbers together, it comes to about \$960,000. Mr. Whitten stated his budget rolls up into the larger number. Chairman Fisher further inquired if it rolls up into the \$2.5 million. Mr. Van Bever stated his budget is just a piece of what Mr. Rosenberg presented.

Commissioner Barfield inquired what Court Innovations is. Mr. Van Bever stated it is four FTE, who perform two different, major functions; one is that they provide support to litigants in the court-houses; stated it is a scary place for many, it is an unfamiliar place for most, and they provide a function to help people get to the right place. He added part of that function is also to support multiple judges with the very high phone volume that comes in; and because of that support, they free up the Judicial Assistants, the Judges personal staff, to help the criminal judges manage those cases where the person is in the County Jail, in order to process them faster to get them out of the County Jail; and either back to normal life, or to State prison or to serves their term. He advised the cost of these positions is less than the amount saved, due to reducing the jail population. Commissioner Infantini inquired if he has the statistics for how much is saved for reducing the jail population. Mr. Van Bever responded the last time they calculated it, but it reduces the jail population by about 20 individuals, and those individuals are in jail at a cost of \$75 per day, 365 days per year, which equates to \$1,500 a day, whereas an employee costs less than \$100 per work day. Mr. Rosenberg interjected that the Judicial Support budget that he was referring to, does not actually include Judicial Branch Administration, it is separated from budget and staffing by program; Judicial Branch Administration is not under Judicial Support, so that \$175,000 General Fund transfer is not part of the \$2.5 million, it is added to it. He went on to say the \$305,000 is part of the \$2.5 million. Chairman Fisher inquired about the \$400,000. Mr. Rosenberg responded that is the sum of the two numbers.

Mr. Van Bever stated probate and guardianship cases are increasing due to aging baby boomers; and it will likely stress the court improvement staff; there is not request for additional staff in this budget. He added foreclosure cases, although declining nationally, are very high in Brevard County; this County is at twice the national average of foreclosures per loans that are out there, and this has been putting enormous pressure on the courts over the last several years. He advised there will be some funding that will expire from the Legislature, on June 30, unless they decide to reinstate it during their upcoming session. He added there are about five positions that help manage these cases that will go away, that are funded by the State, July 1, unless the Legislature decides to reinstate the funding. He noted in relation to the public court houses, public traffic is high; the Viera court house is 19 years old; and ongoing repair and maintenance is required; and technology is increasingly important to court operations, which is a very vital part of the budget.

Blaise Trettis, Public Defender for the 18th Judicial Circuit thanked the Board for the opportunity to allow him to discuss the Information Technology budget in the Public Defender's Office. He quoted the Mission Statement for the Public Defender's office which was founded by Gideon Wainwright; in 1963 the Supreme Court ruled that in one was charged with a felony crime and could not afford a lawyer, the government would have to appoint one for that person. He added Mr. Wainwright had a new trial with a lawyer, and was found not guilty and released. He went on to say if one was charged with a misdemeanor crime, or a juvenile crime, if a lawyer could not be afforded, they one would be provided. He stated Florida is one of the first states to create a

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Public Defenders Office; there are 20 Public Defenders in the State of Florida, one for each judicial circuit; and each one is elected just like the State Attorney is elected for a four year term. He pointed out their case load is very large, and has taken an upturn, after a decline; crime is actually at its lowest rate in Florida in 43 years; and the Florida Department of Law Enforcement has kept records on the State-wide crime rates for 43 years. He added most people find it hard to believe that this is the lowest crime rate in recorded history in Florida, but that is the case. He noted there were 32,000 cases in 2008-2009, so they have taken about a 12 percent reduction in the drop in crime rate; the average cost to be represented by a Public Defender is \$216 that includes serious cases such as a murder case, which is four to five weeks of trial, after two years of preparation with two lawyers. He went on to say the County is required, under Article V, to support some of the funding to the Public Defender's Office. He pointed out before the revision in 2004, the County was responsible for a lot more funding; the counties had to pay for the due process costs, which include transcripts, depositions, court reporters, expert witnesses, expert witnesses appointed by the court for competency evaluations, and these were all tremendously expensive and the revision to Article V basically ended the County's responsibility to pay for all of those things. He stated there was actually a huge benefit to the County after Article V; now the County's responsibility to the Public Defender's Office is simply towards Information Technology (IT) funding. He pointed out his office is funded quite a bit by the defendants; they are charged \$50 when they are appointed a Public Defender, and then either \$50 or \$100 at the end of the case; and last Fiscal Year, that was \$1,066,598. He noted his office has the second highest collection rate in the State; the IT budget the County funds is \$296,000; the \$2 Technology Fund was passed by the Legislature to help the IT budget was \$856,000 last Fiscal Year. He stated more importantly, the trend of the Public Defender's Office has not spent more than was budgeted, but actually less; over the years has not spent the budget or lost it, rather has spent what was needed, and has been pretty consistent through the years; and the average amount spent has been \$272,000. He stated funding is \$296,000; and there has been a reduction since 2008-2009, by 23 percent. He went on to say that is contrary to what Mr. Rosenberg stated that the law requires a 1.5 increase, and also there is an enforcement mechanism in the statute which allows the Legislature to withhold money that would go to the State to the County if the County does not increase the 1.5 percent; and the amount that can be withheld is the amount that should have been funded, and what was funded. He noted the Public Defender and State Attorney has never gone to the Legislature to seek this enforcement; the office has been funded, and has a 23 percent reduction. He pointed out what they are spending now is what the County funds them at; and the unspent amount over a seven year period was \$490,000, last year was about \$10,000.

Commissioner Smith inquired if that \$490,000 was in some kind of reserve. Mr. Trettis responded nothing goes back to the County, which is interesting, because it is not rolled over, and it does not go back to them; and he would assume that it is spent somewhere. He added in Seminole County it is hard to believe, but they actually do roll it over; and the last time he checked the Public Defender budget that had not been spent was around \$700,000.

Commissioner Smith inquired if the money left over from the Public Defender's Office was rolled into the General Fund. Mr. Rosenberg stated up until 2014-2015, there had been some balance forward in the Court IT monies; two years ago there was \$134,000 rolled over, then it was \$200,000; but that money has been expended; there is no more money to be rolled over, so going into 2014-2015, there was no balance forward, and nothing has returned to the General Fund.

Mr. Rosenberg stated to clarify, that is the \$2 Technology Fee that is shared by the State Attorney, Public Defender, and Court Administration. Mr. Whitten stated as that fee has gone down, the General Fund transfer has gone up; there was a point in time that the \$2 fee was sufficient, and there were dollars to be rolled over; and that fee has gone down, so there are no more dollars to be rolled over and, as a consequence, the General Fund transfers have gone

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up. Chairman Fisher inquired if the General Fund transfer has gone up \$350,000. Mr. Whitten responded over the past year the General Fund transfer was \$198,000 and in the current budget it is \$563,000. Mr. Rosenberg stated it is primarily because there is no balance forward anymore.

Tyler Sirois, State Attorney's Office stated derives his authority from Article V of the Florida Constitution, and Title V, Chapter 27, of the Florida Statutes. He noted the Mission Statement for the State Attorney's Office is the pursuit vigorous and fair prosecution of criminal cases, with commitments to serve as an advocate for the rights of all victims and promote the safety and well-being of the public. He added the principal is to focus on the prosecution of criminal cases, they provide support and advocacy to the victims of crime, as they navigate through the judicial process; for offenders that qualify, and have admitted their guilt, diversionary programs, such as Mental Health Court, are available as an alternative to the normal trial process. He advised their investigators work closely with prosecutors to provide all necessary support to resolve cases at all levels. He stated Mr. Archer has developed a Law Enforcement Training Series to provide officers and deputies with resources that will help them in the field and building strong cases to take to the court room. He went on to say in restructuring resources and staff within the office, Mr. Archer has created Elder Services and an Economic Crimes unit with a focus on creating awareness and to educate and serve a population that is vulnerable within this community; and this unit has been staffed by an experienced Assistant State Attorney and Victim Witness Counselor. He stated the 18th Judicial Circuit, is one of 20 in the State of Florida, and there are nearly 300 employees in Brevard and Seminole County; there are 23 Local Law Enforcement Partners, which includes the Brevard and Seminole County Sheriff's Department; and that makes up a total annual operating budget of \$19 million. He pointed out 92 percent of their annual budget is appropriated by the Florida Legislature, and those funds are derived from State General Revenue and the State Attorney Revenue Trust Fund; this portion of the budget is largely devoted to salaries and benefits for employees, and those are State employees; and the Operating Expenses. He added the Operating Expenses include due process funds, which are used for Trial Expenses such as depositions, forensic testing, and the procurement of expert testimony. He stated as Mr. Rosenberg and Mr. Whitten have pointed out, the County is responsible for funding the Article V elements of their budget, which include facilities, communication, and technology. He advised for this current Fiscal year, which amounts to \$636,000, or three percent of their overall annual budget. He noted in the context of Brevard County's overall budget, the State Attorney's Office represents less than .063 percent of the budget. Chairman Fisher noted Brevard County is paying more than Seminole County and inquired what the reason was. Mr. Sirois responded Brevard County provides the State Attorney's Office with some programs and support that Seminole County does not. He added the court technology funding provides two IT systems support staff and computer and networking hardware; the existing dollars are being utilized to implement the Supreme Courts mandated electronic filing of court documents, disaster recovery services, maintenance on the case management and imaging systems, and the office has transitioned into a paperless environment. He went on to say now in the very early stages, Mr. Archer's paperless initiative has the potential to dramatically reduce printing and consumable costs such as toner and machine maintenance; one day they will move away from everyone having a printer on their desk; and one day there will be central printing throughout the building, which will eliminate the cost of paper and toner. He added the other functions funded by the Board are Sexual Assault Victim Services (SAVS) program, and the Witness and Subpoena Services program; Sexual Assault Victim Services represents a long standing partnership between the Board and the State Attorney's Office; it supports a certified Rape Crisis Program is staffed by experienced victim services counselors, there are four of them, and those counselors manage the rape crisis hotline. He pointed out the Rape Crisis Hotline received 400 calls from individuals seeking direct assistance; this program assists victims through the medical evaluation and treatment process; the crimes compensation process; and works closely with prosecutors to navigate victims through the judicial process. He advised these counselors are vital to accompany victims

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through the process to provide the confidence and advocacy needed to achieve the convictions of sexual offenders. He went on to say in the most recent Fiscal year, the SAVS unit served over 700 victims in criminal cases, ranging in age from two years old to 94 years old; those referrals to the SAVS program come through the Hotline; those are primary and secondary reports, either the victim calling to report the crime or, they are calling on behalf of someone else; and in the last Fiscal year, they fielded over 400 calls, and operate that Hotline 24/7. He added the 700 figure are people that are coming into the State Attorney's Office, they are the victims of crime, those cases have been referred by Local Law Enforcement, and the victim counselors in the SAVS program are the ones that are working with the prosecutors, primarily in the sex crimes and juvenile division, to provide the victims the services they need. He stated Witness Coordinators work with prosecutors to issue subpoenas and to facilitate the scheduling and appearances of the State's witnesses; in the last Fiscal year, the Witness Center staff members and subpoena technician, the individual that Brevard County funds, called over 6,000 individuals to appear in court and provide testimony. He noted the Board does provide subpoena support services, and the sexual assault victims services, and that will represent less than .04 percent of the overall annual budget. He added they continually evaluate their budget to find potential savings and to assess items based on past performance, need, and cost; Mr. Archer meets with staff every year to prioritize efforts to identify resources needed to achieve the objectives; and Mr. Rosenberg and Mr. Whitten have been a tremendous asset in helping to develop a budget to get everything in order. He went on to say, in terms of new initiatives, there is the Electronic Service now, E-Filing and E-Service, that was mandated by the Florida Supreme Court. He stated Mr. Rosenberg has previously discussed the challenges with the decline in court revenue; one of the things that, as the State Attorney's Office is focused on are two grants that help the SAVS program; Victims Of Crime Assistance (VOCA) and Violence Against Women Assistance (VAWA), are two grants that fund services that are provided to victims, and those grants are derived from Federal dollars. He went on to say a couple of years ago when there was a potential Government shut down, they were preparing, through direction of the Governor's Office, to deal with not having that funding coming in; and he cannot stress how important that program is to the victims of crime as well as the prosecutors in the court room to have that victim advocacy available; and those are grant funded positions. He stated the other issue they have been working on is the Florida Department of Law Enforcement (FDLE) is requiring the State Attorney to adopt new security requirements to their facilities; such as who can access them at any given period, County contractors, County facilities workers, they all need to be able to stand up to a criminal background check; and the purpose for that is that the data and materials that are in the offices that is being viewed by personnel. He added it could be coming from the Federal Bureau of Investigation (FBI), from the motor vehicles database, and it is very sensitive information that they the Federal Government is making them hold more secure. He noted the Board is their landlord in Melbourne, Viera, and Titusville; these facilities have to be serviced; and there is a lot going on. He advised the Federal Government is getting ready to conduct a security audit, so adjustments will need to be looked at in terms of whom and how people access they building. He stated the final issue he would like to touch on is the issue of police body cameras is something that could potentially be a huge impact on the County. He explained this is in the preliminary discussions at this point as to what body cameras will mean for the State of Florida; and aside from the effect it would have on Law Enforcement Agencies, for the State Attorney's office, these videos would be coming in, they would have to be reviewed by the Assistant State Attorney for evidentiary value; and this could be a video that is a few minutes long or an hour long. He stated he has some figures for the Board just to give it an idea of what could happen if body cameras were mandatory; the Sanford Police Department has already deployed body cameras in the field, they have 70; and they have collected 11 terabytes of data, that equals 2,618 DVD's; and that was collected over a period of one year. He added it is a phenomenal amount of information for the State Attorney's Office, and because Brevard County funds their IT budget, they would need servers, bandwidth, the ability for prosecutors to be able to either download this material from a central site, it would need to be stored somewhere locally, it would need to be able to be viewed, taken into the court room, and

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be retained for a period of time. He pointed out if it is a Capital case, it would need to be retained forever; so those are some challenges, related to body cams, that they are facing in the horizon. He stated the Legislature is in the beginning stages of discussing how they will approach that, but it is something that is on the horizon that needs to be looking at.

Commissioner Smith stated that is a massive amount of information and they are going to have to have a cloud or something, and a 70 member force with 11 terabytes of data is a lot of information; and the cameras would not be a problem, it would be all of the video, with viewing and storage that would cause a problem in the future. Mr. Sirois stated the issue, he would assume, it would be just like a witness, and the attorneys will interview those people to evaluate their perspective; what they saw, what they have to add to the event of the crime; and it will be the same way with the videos, some witnesses no more than others. He added it would be the same evaluation with every video that comes in; it has to be viewed, because there may be something on it that is beneficial; and that cannot be assessed until an attorney has had an opportunity to view it. Commissioner Barfield stated there would be security needed with that and inquired what the backup would be, because there can not be just one camera, there would have to be a backup; and that number would be doubled. Chairman Fisher stated he believes they would have to keep just about everything, because the attorneys will have varying views of what is, and what is not, important. Commissioner Smith inquired if Mr. Sirois has any idea of what the cost would be for the cameras and video storage. Mr. Sirois responded he is not sure about Sanford, but the number he heard was that each unit would be about \$1,000 per unit, that is the only figure he's aware of. He added the Legislature is in the initial discussions of who would be paying for them, but if past history shows anything, it is that the local government will be the ones to pick up the tab. He noted in terms of the camera unit itself, the local law enforcement agencies will have to get those; but the ability to view it, and to store it will be an Article V issue that the Board will have to take on. Commissioner Smith inquired whether this will be a voluntary effort, or if it will be mandated for all police departments. Mr. Sirois responded he does not know, and the Legislature is in the very early stages of the discussion; and his personal opinion is that some of the members had some heartburn over the enormous cost that this would be for the State; either to regulate it, put features and guidelines in place, to address the privacy issues of what it would mean if a law enforcement officer to have a camera. He pointed out if in the course of investigation, a law enforcement officer knocks on the door of one's personal residence, and is taking video, and when they would turn the camera on or off. He stated they do not know what scenarios they would have the camera deployed with them in the field; and this is an issue that is something that needs to be looked at, and is cause for potential concern down the road. Commissioner Smith stated his view of the potential of this as a person that is anti-government, and he realizes he is an elected official, and part of the problem; and he sees this as a feel good measure to put cameras on police officers to have an effective view of what actually happened in every single instance; but going forward there are tens of thousands of hours that produces nothing. He added the Board will still have to be responsible for keeping track of all of that; and he likes the idea, of when there is a questionable event, it is great to have a body camera, but the cost benefit needs to be weighed. He stated he believes the Board would have a tremendous amount of cost; he is afraid that because of the feel good issues that everybody jumps on board with; but it really needs to be thought about because of the cost.

Chairman Fisher stated with the whole public safety issue, at some point in time, the Board is going to have to deal with how safe is enough; because the costs keep going up; and he knows when 9-1-1 is dialed, the people want someone coming to help. Commissioner Barfield stated it would have to be protected so much, because anything could be picked up on camera; and there would be privacy issues among other things that would need to be dealt with. Commissioner Smith stated if a police officer knocks on a door because somebody has a complaint, what if that person comes to the door not properly attired, or an officer comes upon a very grizzly accident scene, the potential for that getting out on TV would be bad for the families.

Mr. Sirois stated the State Attorney's Office will carry out whatever policy that the policy makers decide, whatever laws that are enacted; he will remind the Board, regardless of what happens on the issue of body cameras, the security of that information is going to be a significant cost; it is not something that can be put on the cloud and be done with. Chairman Fisher stated this is peanuts compared to what it would cost to get body cameras; he wants to make sure that Seminole County is paying their fair share of the State Attorney budget; and it appears, from the presentation, that Brevard County is paying more. Mr. Sirois stated in Brevard County, the IT budget, provided by the County, funds two IT positions in the office; a network administrator and a network support person; they also have a larger staff in Brevard than Seminole; and there are more computers that require maintenance. He advised their office in Seminole County has a smaller staff; there is only one network assistant over there; and there are some differences between here and there. Chairman Fisher inquired if data was shared between Brevard and Seminole Counties. Mr. Sirois responded email, inter-office communication, and things like that are the only thing that is shared; and in terms of the Case Management systems, they are the same system, but they interface with the Clerk of Courts and Judicial Offices differently in each county; and there are differences. Chairman Fisher inquired if Brevard County was paying any of Seminole County's share. Mr. Sirois responded no. Commissioner Infantini inquired if there were that many fewer cases over there; and she is not sure why Brevard pays so much more than Seminole. Mr. Sirois stated he does not have crime rate information with him, but he can say that Brevard County is larger; there are 13-15 municipal police departments and a sheriff's department; and in Seminole County, he believes there only three or four municipalities; and they receive many more criminal referrals for cases in Brevard rather than Seminole. Commissioner Infantini inquired if it would be based more on population rather than how many municipalities there are; because they may have a larger unincorporated area, maybe more areas never became a city as in this community. Mr. Van Bever responded there are 27 judges in Brevard County, and in Seminole County there are 16; judges are funded by the Legislature based on the case load data; and Brevard has 50 percent more activity than Seminole County. He added the population is at least 25 percent less in Seminole County. Chairman Fisher inquired who determined that figure. Mr. Whitten stated it is their request and they make a request for their IT and Communication needs; and the Board is required to fund that. He added they are the experts as far as what they need.

Mr. Whitten stated next up will be the Health Insurance; for the Board to remember it does not have \$1 billion each year to spend; and all of the needs for the court system are woefully underfunded, but there is not any extra money to throw towards that.

ITEM 1.C. HEALTH INSURANCE / HUMAN RESOURCES

Frank Abbate, Human Resources Director, stated he is doing the presentation this morning about the group health insurance program as it relates to the budget and giving the Board a historical reflection; the Board will be looking at what the demographics are; who is involved; and Interlocal agreements. He went on to say the Board will look at the plan design and how that evolved over the last 25 plus years; it will look at the County's financial position relative to group health insurance from a medical trend perspective, a contribution perspective, the plan revenues and expenses, from both an incurred basis, an annual basis, as well as a cash in, cash out basis; and he will talk about the outstanding liability for Governmental Accounting Standards Board (GASB) 45, which is the other post-employment benefits that they had to start having an actuarial analysis done every two years. He stated he will then talk about where the health insurance is today from and plan and financial perspective. He stated as the Board will recall, it has recently been discussed about going out for Request for Proposals (RFP), so he will use this opportunity this morning to go through a variety of decision point issues; John Robinson, Robinson Bush, the Board's employee benefits consultant, will be following his presentation with more specifics as it relates to the RFP that is coming out in a couple of

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months; staff will bring the RFP back to the Board as it instructed; and they want to make sure they are covering all of the basis. He noted since there is a new Board of County Commissioners, as part of that dialogue, staff will also have the opportunity to give them input relative to where it is as a body in terms of where it wants to see them going in the future, both from a plan design perspective, contribution, which means premium perspective, and from the employer/employee/retiree/dependent perspectives; and they have a lot of information to share with the Board about that. He expressed his appreciation to Jan Bush, Robinson Bush, for all of the work she put into this presentation; and most importantly Gerard Visco, Insurance Director, for all of the assistance he has provided of putting the statistics together, the PowerPoint presentation together, and having all of the backup material so hopefully staff will be able to answer on the spot most, if not all, the questions the Board may have. He explained to the Board there is a number of participating groups; Under Florida Statutes 112.08, Counties, Constitutional Officers, and Special Districts can enter into a risk management consortium, i.e. a self-insured health insurance program; the Board has had that program in place since 1967; all of the Charter Officers participate; and the current slide tells the Board when they began. He went on to say the Economic Development Corporation (EDC) left the insurance program in 2015; and Port Canaveral left the program in 2010. He stated the Board has the most participants at 1,789; the Sheriff is the next largest group with a little over 1,100; and the total enrollees in the program are 8,732. He stated in 2006 and 2007, the County started having layoffs and eliminated positions, and that has reduced the overall number of members in the program currently; there was 809 retirees, down from 941 a couple of years ago; and he will talk to the Board later on what has happened with that. He pointed out the retirees had been a group that was growing; in 1989 there was many 200 plus retirees in the program gone to 900; retirees are funded in part by the employer contribution made on behalf of every full-time eligible employee; and he will talk to the Board more about that in detail as he moves along. He stated with all those groups that are participating, the County entered in 2008 Interlocal agreements with each of the Charter Officers and groups; they signed agreements that spelled out their agency obligations and responsibilities, how the program would be funded moving forward, and what conditions they could leave the program; the Interlocal agreement also provides for how the financial obligations under GASB will be handled moving forward; and that is basically the retiree liability associated with that. He noted the Interlocal agreements provide for the Employee Benefits Advisory Committee that basically provides recommendations to the Board; under these Interlocal Agreements that currently exist, that Committee participates in benefit vendor selections; that way every Charter Officer and agency feels they have at least an opportunity to provide input about how the program will look in the future; they also provide input on plan design changes and the premium structure that is in place; and they make recommendations every year to the Board on those issues. He went on to say over the years the Committee has made very difficult decisions when it comes to sustainability of the program in terms of premium increases like last year in terms of the 30 percent increase; sometimes the Board has accepted that and sometimes the Board has chosen not to go that far; and this is historical in terms of where the program has been. He added the Committee is made up of one representative from Human Resources (HR); one representative is appointed by each Board of County Commissioner District office; there is one representative from each participating employer group, alternates may be appointed at the participants discretion; and one representative from the County Manager's Office, Budget Office, International Association of Fire Fighters (IAFF), and a retiree representative. He stated as a plan they have gone to what is known as a traditional indemnity self-insurance product back in the 1980's and early 1990's; that went into a self-insured Health Maintenance Organization (HMO) and Preferred Provider Organization (PPO) point of service, which was a hybrid type of product; with self-insured the Board also had it fully-insured; later on the County went into a partnership agreement where it went with the School Board to accomplish certain objectives the Board wanted to see; and it ended up finally with a high deductible, consumer driven Health Reimbursement Account (HRA) plan, along with the tradition PPO plan. He stated as he mentioned for the first several years they were an indemnity plan; Gallagher Basset was the carrier; and it was pretty standard in

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terms of 80/20 with a very low deductible. He went on to say the County then went to a fully-insured in the mid-1990's program with Humana with an HMO and PPO; and it is staff's belief that a fully-insured on the long-term will not be cheaper than a self-insured program. He stated during staff's experience with Humana, when they bought the business, two years into that contract before it expired, they offered the County a couple of million to get out of the contract because they were using money; the Board made them stay; and they left at the end of that year. He pointed out the County moved to a program where Aetna and United was the providers; the Board has maintained a competitive model, more than one provider; the Board learned that when one became pretty much the provider that had a lot of leverage, they leveraged out one or more of the primary providers so they could get better contract rates; and the Board wanted to see at least one option where all of the hospital systems of the County were provided for. He stated during the 1990's they dealt with anti-trust litigation, there was no major provider that could provide all of the hospital systems; that is when the County went into an outstanding partnership with the School Board; they negotiated with the three hospital systems with physician groups on a cost basis where it was based on Medicare plus a certain percentage with the physician groups with the School Board so the County could have a network that provided all of the hospital systems; and it was a clear Board priority at the time. He went on to say Brevard Physicians Network (BPN) said they were going to cut out the national carriers and save the Board all kinds of money because the costs would not be there; as a self-insured plan at time, the County was able to capture all of that data; the Board noticed after several years, it could not keep those costs; and it reached a point several years later where it had to move away from the partnership plan, because the other major carriers were able to get good negotiated contracts that ended up being more favorable. He noted for a point in time the County had Brevard Partnership Plan (BPP), Aetna, and First Health plan, with Cigna and Health Fire because the Board has always, up to now, maintained a competitive model; during those years as the transition occurred, the County did not share the same perspective as the School Board currently has; the Board has had a health plan, including pharmacy and mental health benefits which were carved out; and the Board looked for each component which was the best savings to the County on a component by component basis. He stated the School Board at a certain pointed decided they wanted to be a single provider that was fully-integrated; they chose to do that a few years ago; and that is the model they have in place. He stated at this time the Board has maintained, and continues to maintain, a competitive model where it has more than one provider; the providers currently are Cigna and Health First; in 2010 they had a major cost shift when Port Canaveral left; and that was a shift that reduced the employer's contribution rate very substantially. He stated there have been a number of strategies from 2000 and 2006; there was the partnership with the School Board; a retiree premium year of service model has been initiated; retiree health insurance premiums for employees hired after January 1, 2006 was based upon years of service; work site biometrics screenings , health and wellness communications, health fairs, and weight management and smoking cessation programs were implemented; incremental retiree premium increases were implemented; and plan design and co-pay increases were adopted. He stated they have changed plan design from what he showed the Board in a prior chart very substantially over the years; the Board has been family friendly from both a spouse and dependent perspective; recognizing that other organizations could take advantage of that, i.e. their spouses were part of the County's plan, a number of years ago from 2006 to 2010 staff recommended and the Board implemented a working spouse premium surcharge of \$100 per month; and if he as an employee has a spouse had coverage available elsewhere, and that spouse still stayed on his plan, they paid \$100 per month as a surcharge. He stated to this day the County collects as part of its revenues \$260,000 because of employees who have spouses and they pay the surcharge. He went on to say a high deductible consumer drive plan was adopted with a \$1,500 deductible, but there is an HRA layer.

Chairman Fisher inquired how many people the \$260,000 surcharge covers. Mr. Abbate responded it would be 1,200 into \$260,000, and that is probably over 200 people.

Commissioner Smith inquired how the County knows if a dependent is working for a company that provides or does not provide insurance. Mr. Abbate replied an affidavit has to be signed by the employee; in the work rules if someone provides false information and materials it is a terminal offense; and if it is discovered someone provide false information, he or she would be jeopardizing their job.

Mr. Abbate explained to the Board Stop Loss Insurance is something that the County has that says once it reaches a certain amount of claims, it is then covered by the re-insurance; the County stopped using that because it was so cost effective for a number of years; and staff has all the data that shows it actually saved the Board money. He pointed out in the last few years because of the changes under the affordable care act Stop Loss Insurance has been implemented. He also informed the Board the surcharge covers 205 people to be exact. He stated as far as adopted strategic initiatives, there was a \$10 million shift in 2010; part of that was pharmacy cost containment that was \$1.2 million; there was an RFP for pharmacy, which was another \$1.2 million; pharmacy co-pays were increased in 2010 at 697,950; and then the HRA/PPO changes in terms of going to that high deductible plan provided \$6.5 million. He noted the total of that was \$9.7 million in 2010. He stated the employer rate contribution rate history for 2001 at \$447; by 2008 it increased to \$855; that chart shows how much the employer contribution increased every year; and the average over those eight years were 9.85 percent a year. He stated from 2009 forward, in 2009 the employer paid contribution was \$907; in 2010 was the major shift and the contribution went down by 13.61 percent; and it stayed constant for the next three years. He stated that is one of the reasons staff ran into the problems it did last year they were having increases in medical trend yet it was not being funded at any greater level. He stated in 2014 it was still below the 2009 level; the Board was drawing from Reserves which had built up over the years; and if it continued to do that, the plan was going to be in substantial trouble. He advised the Board this plan year increased for 2015 and it is the first year the Board has gone above what it contributed in 2009 at a rate that was a 14 percent increase. He stated the next slide shows what the plan membership has been in terms of employee participation; the high point was in 2008 and 2009 when the County had Port Canaveral; now it is at 4,426 members; and it has gone from a \$27 million plan in 2003 to double that \$54 million of plan expenses in 2014. He advised the projected revenue for 2015 is \$46.1 million from the employers; many of those employers are funded by the Board; employee premiums equate to approximately \$923,940; the employees are paying for their spouses and children \$2.8 million; the employee surcharge is another \$246,000; retirees are paying under 65 and over 65 are paying \$5.14 million; and the total revenues for the plan this year are projected to be about \$6.4 million. He noted there is 69 percent of the employees in the Cigna HRA and PPO Plan; the remaining 31 percent of employees are either in Health First EPO, which is the new plan a narrower network with no outside benefits at all; the other is the Health First HRA which is identical to the Cigna program; and then the Health First PPO which is identical to the Cigna plan. He stated the next graft is very telling for the Board; what this slide has is the bar graft shows there were over 10,000 covered lives in 2008, 2009, and 2010; it then just dropped; the drop is because the Board had for a period of time the loss of employees due to not filling positions and layoffs, Port Canaveral left, and the Clerk of Courts left; and the low point in terms of participation where it was less than 800 covered lives was in 2012. He pointed out as the Clerk re-joined, there was a bump up in 2014. He explained the Claims Trend graft to the Board. He stated in the last four months, several of the highest cost cases the County had dropped out of that trend; there have not been additional high plus cases replace them; the current 15-month trend is 8.2 percent; and staff projects this 18 to 24 months ahead of time. He went on to say he is glad to say hopefully the County will stay where it is. He stated the next slide shows where the County was in terms of Reserves; in 2014 for the calendar year based on an incurred basis, the County was at 14.9 million; as a self-insured program under Florida Statute 112.08, the County has to file with the State actuarially; they had to have \$7.9 million; when the green trend line of revenues exceed the medical experience, the County lost on an

incurred basis \$3.5 that was taken out of that Reserve; and the year finished at \$11.4 million. He noted that will put the Reserve at \$9.5 million; and staff has been very accurate with their predictions over the year. He advised the Board if it did nothing this year, went back to zero, and no increase in premiums, with that 8.1 percent trend, it would be \$6.4 million in the hole, which would put the Reserves at \$3.1 million. He stated if the Board went with the trend, which is not what he is recommending, and trended employer increase at eight percent, employee dependent at 8 percent, and retirees at 12 percent, and next year the Board would have an estimated deficit of \$840,000. He stated he wants to give the Board a high level view in terms of where it has been and where it is; in 2009, employers were contributing \$48.4 million of the health plan costs; employees in terms of the premiums and retirees were paying \$6 million; and their out of pocket expense for retirees, employees, and dependents was \$5.6 million. He went on to add compared to 2014 the employer was paying about 80 percent of the cost, and the members were paying close to 20 percent; in 2014 once all those cost shifts he talked about occurred, the employer is paying \$41.6 million; and the employees are paying \$23 million. He pointed out that has shifted to a 64/35 percent when looking at all that money. He stated looking at the out of pocket expense total plan cost is approaching \$65 million. He advised the Board the employer costs has two areas, the five percent from the HRA and the plan that is paid by the employer at 64 percent; and it actually comes out to about 69 percent. He stated plan costs covered by employee/retiree premiums are 13 percent; coordination of benefits from Medicare and third party recoveries is eight percent; and the member contribution out of pocket is 10 percent. He noted for those who are not familiar with what an HRA is, it is a Health Reimbursement Account; it is a credit, not dollars that are given to the employee; it is a credit they are eligible for against their deductibles; and it used to be the first dollar towards the deductible, but that changed in the current plan year 2015. He explained to the Board, how that works is that the Board provides, depending on a person's salary, certain amount for an individual or family; if a person is the lowest paid employee, he or she receives the most, \$1,000 toward the \$1,500 deductible; and if a person has a family, he or she gets \$2,000 towards the \$3,000 family deductible. He went on to say there are 517 individual employees who are getting the \$1,000; there are 525 that are getting the \$2,000 credit; and that costs the Board the equivalent of \$1.6 million. He stated for the mid-range salary employees, \$35,000 to \$70,000, and individual gets a \$750 credit toward the \$1,500 deductible, and \$1,500 for the family; there are 477 employees who are in that range for individual only, and 910 who get the \$1,500 for the family; and that costs the Board almost \$1.8 million. He pointed out for the \$70,000 plus employees, he or she receives \$500 for an individual, and \$1,000 for the family; there are 28 who are individual and family is 83; and when those numbers are added up it comes up to \$98,000. He noted retirees are given \$500 for an individual and \$1,000 for family; that is a total cost of \$349,500; and with the HRA strategy, that is \$3,830,250 that can occur. He advised the Board all of that does not occur because everyone does not use all their dollars; the Board rolled over \$1.7 in 2012; in 2013 the current balance is \$3.2 million; and if someone leaves they do not take that money with them. He stated there was major changes in 2015; last year there was a significant bump up of premium contributions of 14 percent, because the Board had no increase for the prior couple of years; that 14 percent employer increase was the equivalent of \$5.7 million; active employees going of 30 percent for themselves and their dependents there was a 30 percent increase, or \$800,000 more, in premium contributions; and retirees had that same 30 percent increase at \$500,000. He stated plan design changes last year, staff went out for RFP like in 2010, and there was significant cost savings associated with that both in terms of the pharmacy benefits manager and the integration where Cigna started doing it; and then there was a variety of plan changes. He pointed out last year the County went out on a fully-insured RFP to look at what a fully-insured plan to do compared to the self-insured plan; there was two responses and it was substantially different dollars depending on who they were; one was a national provider and one was a local provider; there was a \$5 million difference; and that tells the Board that the network can make a substantial difference in terms of how it was looked at. He noted the Board made a lot of plan changes in part based on what was learned from that RFP process; deductibles were changed; and a lot of it really related to pharmacy additional

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savings in terms of going to co-pays, adding a deductible as it related to brand, and shifting the HRA dollars to the front. He provided the Board with a slide showing the prescription drug plan design. He stated there are retiree premiums Medicare Eligible, those 65 or over; there is HRA and PPO; for the single under the HRS is \$328 and the PPO is \$438. He noted if there is a spouse, it is additional dollars. He stated for the under 65 retirees, because of that one and one-half times inflation rate, those rates for the HRA, PPO, EPO are much higher. He stated the average retiree does not make that much. He stated the unfunded liability as it relates to retirees is called GASB 45.

Chairman Fisher inquired how many retirees there are. Mr. Abbate replied 809. Chairman Fisher inquired if with their dependents it is 1,180. Mr. Abbate responded affirmatively. Chairman Fisher inquired how many of them in this retiree/spouse category are not Medicare eligible. Mr. Abbate replied they will count it up and give that information to the Board.

Mr. Abbate stated GASB 45 is issued by the Government Accounting Standards Board in June 2004; it requires accrual account for Other Post-Employment Benefits (OPEB), such as health plan benefits and life and disability benefits; it is calculated from present employer liability for current and future OPEB obligations; and there are disclosure requirements.

Gerard Visco, Insurance Director, Stated roughly two-thirds of the retirees are Medicare eligible, and one-third are not Medicare eligible. He stated when this particular count was taken the number was 386 not Medicare eligible and 608 Medicare eligible.

Mr. Abbate stated most employers are pay as they go; the Board funds the program through whatever the contribution structure is and plan design that changes annually; but the Board is sensitive to continuing to monitoring reactions from the Bond market as it relates through this unfunded liability. He pointed out staff considers that as it goes forward and look at where the plan is what needs to be done moving forward. He noted valuation can be done is what is annually required to fund retirees in a current year; and then what is the Board's actuary liability over time. He stated the County has been doing this since 2010; and staff has provided the numbers for the Board only and then the total plan. He stated in 2010 the overall plan liability was \$96 million; subsidized for the retirees was \$6.4 million; in 2012 it went down to \$6.1 million, but the accrued actuarial liability actually went up to \$112 million; and in 2014 with the changes the Board has made over the last year, the subsidy has dropped to \$3.7 million for over 65 retirees, and the overall plan liability was \$63 million, virtually cut in half. He stated based on plan designs for 2015, which are not incorporated in these numbers yet, staff would anticipate if the trend continues those numbers may continue to go down. He provided a chart to the Board showing employee premiums for Health First HRA, Cigna HRA, Health First EPO, Health First PPO, and Cigna PPO. He stated as the Human Resources Director it is his responsibility, and under the Direction of the County Manager, he followed his direction as well, to make sure he shares with the Board the employees benefits packages; it is both salaries and benefits; the Board looks at that through a recruitment, retention, and moral perspective; and he provided the Board with the actual numbers. He went on to say the Board's general and blue collar bargaining unit employees have not received pay increases in five of the last Fiscal Year's; during the last seven fiscal years, salary adjustments have been totaled 4.5 percent for the average employee; the average employee's contribution towards their health insurance has increased by approximately \$3,116 during the past seven Fiscal Years; employees were required to begin contributing three percent of their salaries as mandatory employee FRS contributions three percent of their salaries beginning in July 2011; and the Board's retirees, 1,400 plus, average pension is \$15,658 for 18 years of service. He explained to the Board the projections for 2016, if the medical trend is 8.1 percent and premiums increase, and the Board stays at the 14 percent, the impact on revenue would be \$3.2 million; and if the Board went to eight percent for employer, employees, and dependents and 12 percent for retirees, the impact on revenue there would be \$840,000 shortfall. He stated under the Florida Care Act, if an

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employer is a fully-insured under this Act, it provides for administrative costs of 15 percent; where the County is currently is at six percent or \$3.5 million, including all administrative costs; and that is much lower than what many plans would charge. He went on to say the inpatient and outpatient is a little more than \$17 million, or 33 percent of the plan cost; the primary care physicians are \$2.5 million or five percent; and the specialist are at \$9.4 million, or 17 percent. He noted labs and imaging are at \$2.3 million, or four percent; there is other medical at \$4.9 million, or nine percent; and prescriptions are \$10.6 million. He stated this is if the Board stays in the insurance business; if the Board made a decision it was not in the position to do that, it could impact from a recruitment, retention, and moral perspective; if the Board chose to do something like that, it would have to give the Federal Government \$9 million less; and anything between the \$9 million and \$46 million could be given to employees to go into the marketplace to find their own insurance.

Commissioner Smith stated he is impressed and thankful the County has Mr. Abbate and Mr. Visco giving the Board the Background it needs to make a good decision.

Commissioner Barfield stated there is so much that goes into insurance; and he expressed his appreciation to Mr. Abbate and Mr. Visco.

*The Board recessed at 11:57 a.m. and reconvened at 12:40 p.m.

ITEM 1.C. HEALTH PLAN RFP

John Robinson, Robinson Bush, stated over the next hour they would like to present to the Board the additional information that Frank Abbate, Human Resources Director, talked about this morning to give it more details on some of the costs of some of the items they would like to get feedback on; the exercise today is to give the Board some of that history and some of the Policy issues that have been up to this point and get its feedback on that; and they would like to break down the County costs a little more and talk about that in a little more detail. He went on to say they would like to talk about, as Mr. Abbate mentioned, the \$46.15 million that the Board is currently funding; they will break that down to see where the subsidies are and give the Board some information on that so it can help them make some informed decisions on that; they would also like to talk about the plan design and the plan cost and get into some more details on that; and then talk about the network issues and what will be important to the Board as it looks at this particular Request for Proposals (RFP). He noted he would like to get some feedback on the marketplace impact to make sure that the RFP that is released is one that meets the Board's specific needs; and the goal of this presentation is to seek that direction from the Board on areas that are important to it. He pointed out they will give the Board some items of discussion; they are meant to spark some discussion and some ideas from the Board; and they would like direction on those. He advised the Board their objection, as a consulting firm, is to make sure there is a fair and objective process, that the process is open to full examination; and that the information that is presented would show different proposals that are received so informed decisions can be made by the Committee and by the Board. He added they want to make sure they are able to quantify the actual cost and benefit of the proposals that are there; and they think it is very important to look at a number of different ideas when they develop and RFP, and to keep it open to that, but to keep it something that can be measured. He stated it has been important for Brevard County Government to have all of the Brevard County hospitals; it is included in at least one of the plans they have available to employees; and the Board can see by the information that has been presented to it, that has worked well over time. He stated another think that was mentioned was competitive model; there are currently two carriers, Cigna and Health First; the membership fluctuates with the plans and how it is set up; both are important issues and both are important products that employees have enjoyed over the last number of years; one of the reasons that this competitive model came into place was because of the network instability that has existed for many years within the County; network instability

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meaning that one hospital may be in the network this year but not in the next, the same with providers; and it provides stability to employee because if there was a change it did not require and additional RFP to go out. He pointed out each one of those networks should have a broad network of providers specifically with the County in mind; it does not do much good to have a great network if it is in Orange County; and those are issues to talk about moving forward. He noted the coverage should be State and national and include coverage more than just emergency treatment outside of this particular area. He explained to the Board they want to spend a good deal of time talking to the Board a little bit about the cost to the County; they talked about the \$46.15 million and how it is being spent; currently when looking at the premium portion of it, the County is paying almost 82 percent of the actual cost itself; they will go through of what is being subsidized and the Board will see the actual numbers they have at this point; and one of the other issues the Board has had the policy of having the retiree rates being 1.5 times the actual employee rates. He advised plans are evaluated on minimum values; minimum values have been set up through the health care reform; they will talk about health care reform and the impact it has on the County's plan; and they will get feedback from the Board of where it wants to go at this point. He went on to say when adding the HRA dollars contributing to the plan, it is a plan that has a minimum value of 88 percent; looking at without the health reimbursement arrangement, it is 81 percent; and that is the impact the County sees. He added that plan has been self-funded for several years; there is stop loss protection also included in the plan itself; stop loss protection is for those cases that are catastrophic cases in nature; and the plan has a carve-out pharmacy program, which went out for RFP in 2014. He stated there is the plan cost and the County cost; the plan cost includes the cost of the employees pay or the premium, and the County cost is what it is funding as a part of the overall funding part; the employee only coverage is primarily paid by the County; there is a small portion the employee pays for a part of it; and there is subsidy for spouse and children coverage. He went on to say they will be breaking the retirees out from the employees over 65 and those under 65; the health reimbursement arrange is pro-rated based on salary; and the County monthly contribution for 2015 is \$980.17 for each full-time budgeted position.

Mr. Abbate stated it is full-time eligible employees; there is a difference between budgeted because there are vacant budgeted positions; there are jurisdictions that do that; and the Board only does it on the full-time employee. He added once that full-time employee is onboard then the County collects for the premium; but if there is a budgeted vacancy, those dollars do not go into the group health insurance program.

Chairman Fisher inquired if there are 100 people in Parks and Recreation Department, but there is actually 98 collecting a paycheck, are they budgeting it on the 98 people. Mr. Abbate responded the County only collects on full-time benefits eligible employees.

Mr. Robinson stated in looking at health plans, the Board as employer if it offers health plan coverage, have to offer coverage for those full-time employees working at least 30 hours a week; the lowest minimum value of the plan is at least 60 percent; and an employee only deduction cannot exceed 9.5 percent of annual salary or 100 percent of the Federal Poverty Level (FPL). He went on to say the Florida Statutes requirements for retiree coverage is they must be offered the same plans as active employees at premiums not greater than active employee premiums; and retirees eligible for Medicare may be experience rated separately as long as coverage is basically and the same and premiums not greater than active employee premiums. He stated the current HRA Program has the reimbursement by salaries; it has an annual deductible that HRA can be used for; and it is an 80 percent, 20 percent plan. He stated there is an out of network benefit; when running this plan through the minimum value calculator has a value of 88 percent. He showed the Board a slide showing a breakdown for a 62 percent plan. He stated the total cost for 2015 for the plan is \$70.48 million; the County portion of premium, including HRA cost, is \$46.15 million; the premium deductions from employees and retirees is \$10.28 million; out-of-pocket payments by members is estimated to be \$12.11 million;

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and the 2015 projected costs are expected to exceed premiums by \$1.94 million. He advised the Board the total County cost for 2015 is \$46.15 million; employee funding by County, is the County pays 93.6 percent of plan cost, and the employer subsidy is \$28.35 million; children funding by the County, the County pays 88.2 percent of the plan cost; and the employer subsidy is \$8.2 million. He noted the Spouse funding by the County, the County pays \$83.1 percent of the plan cost, and the employer subsidy is \$7.2 million; and the retiree funding by the County, the employer subsidy is \$2.4 million.

Chairman Fisher to provide spouse and children coverage, it is an \$18 million expense, and the Board receives \$3 million in premiums; and it is a \$15 million employers portion.

Mr. Robinson stated the employee portion of the plan is 93.6 percent; if the Board lowered that percent to 92.6 percent, it would have an impact of \$308,000; the impact it would have on the employee rates is the employee rates would have to raise by 15.7 percent for each percent the Board lowers the Board contribution; and if is lowered by another three percent, it would be a 47 percent increase on the employee costs. He went on to say the children coverage is at 88.2 percent; each percent the Board would change would be \$104,000; and to generate that through children contributions in premiums, it would be another 8.5 percent. He pointed out those for spouse coverage is 83.1 percent; if it was lowered to 82.1 percent, it would have a \$95,000 impact; and it would be an increase of close to 6 percent on the spouse coverage. He stated what some groups are doing is they are looking at the increasing spouse coverage and not children or employees.

Mr. Abbate stated they are not really looking at definitive Board direction on this, it is only as they move forward to an RFP process looking at the plan design, premium structures recommended to the Board in July, if there is going to be a change, is it comfortable if the way things are now or should staff be looking in other areas. He noted it gives staff valuable direction as it goes back to the Employee Benefits Advisory Committee.

Commissioner Infantini stated she is comfortable with where the Board has gotten this past year; it has made huge strides in changing up the medical insurance premiums; and she reiterated she is comfortable where they are at now.

Chairman Fisher inquired on the \$308,000 and the impact is 15.7 percent to the employee, if the plan was changed could it be changed without the 15.7 percent increase. Mr. Abbate responded there are two ways to do it, one is on the premium side; the difference between the two alternatives are if it is done on the premium side, all members share on a proportionate basis on the premium change; and the other alternative is not touching premiums, it would be done on the plan benefit designs, so those using the benefit would see the increase.

Commissioner Smith inquired if the co-insurance would be a user fee. Mr. Abbate replied affirmatively, based on the usage a person with a lot of medications, he or she will be paying more out of pocket. He pointed out it will impact people significantly.

Chairman Fisher stated the out-of-pocket expenses can be shifted to the employee and not increase the premium. He inquired if he went to a \$2,000 individual deductible and a \$4,000 family, what kind of savings is that. Mr. Abbate responded any of that can be calculated based on where the Board wants to go; he stated at that 88 percent current level on the plan design, if the PPO plan was eliminated and only had the high deductible of \$1,500 and \$3,000 maximum out-of-pocket, the 88 percent plan would drop to a 79 percent, with no HRA.

Mr. Robinson stated they were looking at the minimum values using that as the idea; if the Board wants a three percent, they would look at an 85 percent plan instead of an 88 percent plan and design something and give the Board some options off of that.

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Commissioner Infantini stated when helping subsidize the cost of medical insurance, it is a non-taxed benefit to the employee; she does not see the funds in the budget to raise employee salaries; to increase the burden on insurance and medical costs on them, she is not in favor of; and she would rather give them a benefit.

Chairman Fisher stated health costs continue to climb; but the Board may be forced as a Board to change that.

Commissioner Barfield stated he would like to come up with a number overall for the whole plan and then see what can be done.

Commissioner Infantini stated she has certain minimum standards; she does not want to have a co-pay of \$50; and she would rather not penalize employees for having more than one child.

Chairman Fisher stated the problem is the Board going to continue to cover spouse and children.

Mr. Abbate stated employee only there are 1,500 employee only, employee and spouse 496, employee and children 767, and full-family coverage 754; and that makes up a total of \$3,542.

Mr. Robinson stated the retirees over 65 can be rated separately as long as the plan is substantially the same and the premiums are the same or less; when looking at the retirees under 65, the current subsidy is \$858,000 of plan cost; out of that \$858,000 the Board can only charge the vested rates or up to what the active employee rates would be for that particular population; and the County cannot cover all of the expenses for their loss based on the way the Florida Statute is set up. He noted the Board can raise the premiums for those retirees under 65 by \$561,000, but that would be the limit because it would take the Board to those vested rates for the active employees; there would still be a subsidy of close to \$300,000; but an additional savings of the \$561,000 can be generated. He stated the savings is not a savings to the plan, it is the shift to the retiree under 65; and they are not suggesting it, they are giving them the numbers. He went on to say retirees over 65 can be looked at differently; the Board is currently subsidizing that group by \$1.5 million for the plan cost; there are options available through Medicare supplements and Medicare employee group waiver plans, as well as Medicare Advantage plans that are a part of the equation. He advised the Board they looked at three basic options regarding the retirees under 65 to see where if anything the Board wants to make a change; if the Board is looking at the 1.5 times the active employee and dependent premium increase, if it charges them the eight percent, they would be charged an additional four percent for that particular premium; the four percent difference would be \$86,600; and that is the difference in the plans themselves that the retiree would be picking up. He added the other option included for the Board's consideration is if the Board raised the amount to the vested rates; in two years the retirees under 65 to the vested rates; that would be a little over \$280,500 a year; and that would be a little over a 13 percent increase above what those plan costs would be.

Commissioner Barfield inquired if the Board could give retirees under 65 the money and let them purchase a plan. Mr. Abbate responded there are two other alternatives; one take the under 65 retirees and tell them if they are willing to leave the County's plan the County will give them the equivalent of what he or she would get under a federal subsidy for a one-year period; and then in the second year, he or she is on their own and will get whatever the federal subsidy would be. He went on to say staff did not present it again because that was vetted out last year, and the decision was the County was not going to the vested rate yet. He noted the second one would be the County would not offer the same exact plans, it would offer them a marketplace and the retiree go find the insurance on their own; and there are employers who are doing that.

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Mr. Robinson stated the way the Statute is set up for those under 65 is the County still has to offer them the plans that are the active employee plans.

Mr. Abbate stated it is different from the over 65.

Jan Bush, Robinson Bush, stated for the under 65 plan today, the retiree only already is at the vested rate, so there is no movement there at all, it is the dependent tiers where there is still some opportunity when a person has a spouse, children, or family coverage to raise those rates to the full vested.

Mr. Whitten inquired if direction is to come later; and he inquired if the Board is not coming back to the two items on page 11 and 14. Mr. Abbate noted on the employee and dependents he has not heard any Board direction to change from where it currently is; staff's intention is this item as they develop the RFP process, they assume they will be staying at the same proportionate basis for those three categories.

Commissioner Smith stated it would be his preference.

Mr. Whitten stated as staff moves past these discussion slides, if the Board does not give any direction, staff will stay where it is in terms of prepping for the RFP.

The Board directed staff to maintain family coverage levels with proportionate contributions as they exist currently to provide stability to employees following the 2015 plan designs already implemented; and to maintain the current funding mechanism for non-Medicare eligible retirees (i.e. premium increases at 1.5 times employee increases).

Mr. Abbate informed the Board it would to keep the plan level; it would need an eight percent across the Board increase.

Chairman Fisher stated the challenge is some will say this health thing no one has a handle on it; in a way the Board may be kicking the can down the road not addressing the retirees; health cost is getting crazy for the County; and if it moves down the road, at some point, with a bad trend year, it could get way out of whack.

Commissioner Infantini stated she thinks the greatest opportunity for savings without affecting the pocketbooks of the employees or retirees the greatest is going to be in the hospital selection; she thinks that if the Board has leverage, should it choose to use it or not; and that will be for the Board to decide. She inquired what is more important saving out of pocket monthly costs for the isolated times a person goes to the hospital, or having a hospital closer by.

Mr. Robinson stated the next item they would like to talk about is the over 65 population, and this is the population eligible for Medicare; there are Medicare supplements, Medicare Advantage Plans, and there are pharmacy plans available to retirees over 65; what some groups are doing is looking at providing the benefit the Board provides that it has to provide to retirees as a part of the Statutory obligation; the Medicare supplements, Medicare Advantage Plans, and pharmacy plans would be the Board's sponsored plans; and they believe they would meet the Statutory requirements. He went on to say there are a number of school districts looking into these plans and changing the plans that they have, the active employee plans that are acting as Medicare supplements; the Medicare supplements literally supplement Medicare; Medicare pays first and these particular plans pay secondary; and a Medicare Advantage Plan that is also of great value to a lot of retirees because the cost is much less. He noted there are two very popular plans when it comes to Medicare supplements; they are regulated as to what they cover; and this covers what Medicare does not cover, Plan F and Plan N. He pointed out

Plan F covers basically everything that Medicare does not cover; Medicare supplement just covers medical, it does not cover pharmacy; there are a number of things that Plan F covers; and it covers all of the deductibles and all of the out-of-pocket expenses. He advised the Board if a Medicare member goes to a hospital or to a provider out of network, that provider could charge as much as 15 percent, and Plan F would cover that 15 percent. He stated Plan N is a cheaper plan; cheaper plan meaning that there are out-of-pocket expense that Plan F does not have; Plan N has a \$20 co-payment for an office visit; it does not cover the out of network; and that benefit is considerably cheaper because of the coverage. He noted there is pharmacy coverage that the Board can get as an employer; it is a comprehensive premier plan; the pharmacy portion of the plan is \$84 and \$155; when it is added to the Medicare portion of the Medicare supplement plan, the plans are in the neighborhood of \$320; and this is much more expensive than Medicare Advantage types of plans. He pointed out if the Board does nothing in this area it will have the same liability as it does today; if it raised to the vested rates it would be a savings of approximately \$800,000 over a two-year period; and it would increase the retiree over 65 premium by 34 percent. He added if the Board looked at the option of providing it has its Board sponsored plan, the savings would be \$175,000 in premiums, and the savings would be about \$1.5 million at this point. He inquired if that is an area the Board wants them to look into; and he stated if so, it would be included in the RFP.

Commissioner Barfield inquired if the retiree goes to the Medicare option and it is a spouse, can a spouse be on regular coverage. Mr. Robinson replied affirmatively. Commissioner Barfield suggested to the Board that it look at the Medicare supplement and go that route. Mr. Abbate stated it will be included in the RFP.

The Board directed staff to implement a Medicare Supplement Plan with a comprehensive pharmacy plan as the only County sponsored plans available to Medicare eligible retirees for plan year 2016.

RESULT:	ADOPTED [UNANIMOUS]
MOVER:	Jim Barfield, Vice Chairman/Commissioner District 2
SECONDER:	Curt Smith, Commissioner District 4
AYES:	Robin Fisher, Jim Barfield, Trudie Infantini, Curt Smith
ABSENT:	Andy Anderson

ITEM 1.C., HEALTH PLAN RFP (2)

Mr. Robinson stated the next area they would like to receive direction from the Board is the Health Reimbursement Account and the plans it has now; currently the employer funding of this is the \$3.8 million; and the actual cost of that is estimated at \$3 million. He stated the discussion items is this is the way these plans have been set up at this point; and they are looking for direction to see if it wants to change anything or if the Board is fine with the ways the levels are setup. He stated the impact would be the \$3 million for the funding portion; it is set up as a tiered salary based on the lower employees get more money and the higher employees get less money into their HRA; and the other issue is if the Board wants to look at something and eliminate some of the HRA funding for retirees at an impact of \$148,000.

Chairman Fisher inquired if a person has Cigna HRA and has a \$1,500 individual deductible and a \$3,000 family, even though it is a \$1,500 individual deductible, if a person makes between \$35,000 and \$70,000 the County would pay \$750 of that \$1,500. Mr. Abbate responded the way it works now is the first \$250 comes out of pocket, and then the next \$750 would be the

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HRA, and then a person pays the remaining \$500 out of pocket; and then he or she goes into the 80/20 plan. Chairman Fisher inquired if the County could save the \$3.8 million claim cost if everyone paid their own \$1,500 deductible or \$3,000 deductible. Mr. Abbate replied affirmatively.

Commissioner Barfield stated for a person who makes less than \$35,000 to leave the County to pay that HRA and take out the other.

Mr. Abbate advised the Board the amount of money involved in the \$35,000 and under is \$1.6 million; the \$35,000 to \$70,000 is \$1.8 million; and the \$70,000 and over is \$98,500.

Commissioner Infantini stated people who are having medical emergencies are the most in need. She stated she would rather see how many people have to go to the hospital instead of who uses medical insurance; and there will be a far fewer number of people who have to go to the hospital for their specialty care, which may be the easiest, less impact way to generate a cost savings.

Mr. Abbate stated he fully discussed the premium and how that is even; what they are talking about now is either by raising the deductible for reducing the HRA, the Board will be hitting everyone who uses any healthcare; the third alternative is the narrowest tier, the heaviest users; and the Board could raise the out of pocket maximums if it is interested in gaining money. He stated the Board can raise the out of pocket maximums; it will not affect 60 percent of the employees; and it will only affect the high end utilizers.

Chairman Fisher inquired what percentage is just a single person on the plan. Mr. Abbate replied the number of people who are single only is \$1,525. Chairman Fisher inquired what they pay. Mr. Abbate replied \$29, \$38, and \$71. Chairman Fisher inquired if the one who pays \$29, and they hit eight percent; and he thinks the people would rather not lose the deductible. Mr. Abbate pointed out it will not raise a lot of money; it would have to be raised a lot. Chairman Fisher inquired if the County still does the step therapy. Mr. Abbate responded affirmatively; it is where before a person goes to a more expensive brand drugs, a person has to try the less cost alternatives the plan has in place for; and it has been in place for a number of years. He noted the doctor has to certify the less costly alternatives have been tried. Ms. Bush inquired if Chairman Fisher is talking about compound drugs. Chairman Fisher replied affirmatively. Ms. Bush advised the Board it is covered in most cases. Chairman Fisher inquired how much the County is spending. Ms. Bush replied they can look at that. Mr. Abbate stated he thinks the County spent \$750,000 for four prescriptions of a specialty drug. Chairman Fisher inquired if there is a drug for Hepatitis C on the market. Mr. Abbate responded there are only specialty drugs for that. Chairman Fisher inquired how much of \$10 million was generic. Mr. Abbate replied 82 percent are generic.

Mr. Whitten stated if the Board gets through this, Natural Resources Management is next, Transit, Extension Services, and Space Coast Government TV (SCGTV) are next; he does not want to have the directors hanging around all day; and he inquired what the Board thinks its tolerance is. He pointed out the only presentation needed today is Natural Resources Management because Ernie Brown, Natural Resources Management Director, is leaving next month, and he is going on Coast Guard duty for two weeks.

Mr. Abbate stated they will get right to the network issue as it is the heart of the RFP.

The Board directed staff to maintain current level of Health Reimbursement Account (HRA) funding.

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Mr. Robinson stated they want to get some feedback on the importance of Brevard County hospitals and the network; they would like to talk to the Board about the board versus the narrow networks; the smaller the network, potentially the more cost savings there are with those particular networks; they are looking at the possibility if the Board wants them to look at those with certain standards; and from the network coverage perspective, they want Board feedback on what is important. He stated they will be talking about the marketplace and they would like to get some free flow discussion on that as well to make sure they address the issues in the RFP that are most important to the Board. He pointed out they are looking this now in terms of questions to see what the Board's direction would be on the network coverage of Brevard County hospitals.

Chairman Fisher stated he does not believe Commissioner Infantini would want to drive to Titusville and he does not believe he wants to drive to Holmes Regional Medical Center; and he thinks the network should be broad.

Commissioner Smith stated the other side of that coin is how often is it going to be a necessity that a person is going to have to choose; he does not have a lot of experience, he does not get sick much; and he understands what Chairman Fisher is saying, but the odds are a person will have to do that maybe once over the next ten years.

Commissioner Barfield inquired what if it is one time.

Commissioner Smith stated he has personal experience with friends who came here from up north and their insurance policies are only good maybe some place in Orlando; and that is where they have to go. He went on to say they are happy to do it because they have no other choice; if a person is in an emergency situation, he or she can go to Titusville.

Mr. Abbate stated emergency situations will be covered.

Commissioner Smith stated if a person has an elected procedure; and the County can save the employees and the County money.

Chairman Fisher stated he thinks the Board can ask for an RFP considering all three hospitals in the network, and considering one; and the Board can see what the numbers are.

Mr. Abbate stated they did it last year; the RFP was to give the County's plan design and what a fully-insured cost is; and staff knows what the difference. He pointed out it was \$5 million a year; in that particular situation, Wuesthoff Hospital and Parrish Medical Center would not be in the network, as opposed to a carrier who provided that same plan design and had a broader national network; and it is 10 percent of the plan cost.

Chairman Fisher stated if the County did that, he would be inclined to say it has to be on a long-term basis; he thinks these guys come in with an introductory rate; and in year two there is a jump.

Commissioner Infantini stated she would like to see the differences; her biggest tolerance for change is the hospital locations; and she does not want to see all of the other costs go up. She inquired how often people are electing to go to the hospital; and she stated she is hoping it is a very small number

Commissioner Barfield stated if a person is having surgery, he or she may not have the surgeon the person wants because the doctor does not have privileges at that hospital.

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Mr. Abbate stated there is emergency coverage and there is even in a narrow network, however a person may be paying bill charges, which means no discount.

Commissioner Infantini stated she agrees with Chairman Fisher, she wants to have it for a number of years.

Mr. Abbate stated when staff did it last year, they asked the Board and it agreed that it had to know the second year maximum cost was. He went to say some people did not think they would even get bids with the second year guarantee; it is difficult to do that; and when providing fully-insured it can provide two and three years with a guarantee, and all of a sudden the costs are not at eight percent they are at 16 percent.

Commissioner Smith stated if the Board said five years for example, and no one got back with it with a number, then that is the answer; and he thinks it is worth considering.

Mr. Robinson stated it looks like the Board may want to look at a narrower network potentially as long as it has some standards and has to be long-term.

Mr. Abbate stated if the Board does not set the minimum of what needs to be in the plan; and what the Board has to compare is plan design versus plan design where it is getting two bids that are similar so it knows what the deviations are.

Commissioner Barfield inquired why not let the healthcare industry propose different types of plans for the Board for a certain price.

Mr. Abbate stated staff can give the Board a plan for \$20 million less than where it is today if it is Board's direction; he does not have to go to the marketplace for it; and he would just change the plan design.

Chairman Fisher inquired if staff asks for \$46 million to give the Board something similar to the gold plan, could it be gotten.

Commissioner Infantini stated the Board has to give staff the minimum standards; she does not think the County will get for it is looking for, for the \$46 million.

Mr. Whitten stated he is trying to keep up like everyone else; and he inquired if the Board can go back to the network to get direction.

Commissioner Infantini stated she believes it should be three years instead of five years as it is an unrealistic expectation.

Mr. Abbate stated he is rather confident that no one will bid on a five-year plan with a guarantee; and he could be wrong.

Commissioner Smith stated if the providers do not feel comfortable, they will not come back with a bid; they may have alternatives for the Board; and then the Board can entertain what those ideas are.

Chairman Fisher stated it may be more of an RFQ than an RFP. Mr. Abbate stated if it is three years and a guarantee that is what the Board wants.

Commissioner Barfield stated it does not give the bidder the chance to be innovative if a provider has better options.

Mr. Robinson stated there are some variables that can be looked at that will be talked about; it can be fully-insured versus self-funded; if the Board says self-funded it has more options to do what the Board is talking about doing, to be creative in that particular aspect of things; and if the County goes fully-insured, it is difficult to get that lock in pricing over a long period of time. He went on to say the Board can look at some discounts that may be guaranteed for that time period; and components of the plan can be locked down for an extended period of time.

Mr. Abbate pointed out it is nice to have administrative fees locked in; it is a very small part of the County's cost; when there is a percentage off discount and guarantee that for three years and raise the prices the second year by 35 percent and give a 40 percent discount over what this year's prices were, he would be hurting.

Chairman Fisher stated he does not know if anyone will say no to the five years; the Board can ask the question to see if anyone is interested; and someone might just say they will gamble with it.

The Board directed staff to draft an RFP that requests proposals for a narrow network health plan design offered by a single health plan provider with a five-year cost guarantee.

RESULT:	ADOPTED [UNANIMOUS]
MOVER:	Curt Smith, Commissioner District 4
SECONDER:	Trudie Infantini, Commissioner District 3
AYES:	Robin Fisher, Jim Barfield, Trudie Infantini, Curt Smith
ABSENT:	Andy Anderson

ITEM 1.C., HEALTH PLAN RFP (3)

Chairman Fisher inquired if the Board can ask for a proposal for a five-year commitment throughout the County.

The Board directed staff to draft an RFP that requests proposals for a broad network health plan design that includes all three Brevard County Hospital systems offered by a single health plan provider with a five-year cost guarantee.

RESULT:	ADOPTED [UNANIMOUS]
MOVER:	Jim Barfield, Vice Chairman/Commissioner District 2
SECONDER:	Robin Fisher, Chairman/Commissioner District 1
AYES:	Robin Fisher, Jim Barfield, Trudie Infantini, Curt Smith
ABSENT:	Andy Anderson

ITEM 1.C., HEALTH PLAN RFP (4)

Mr. Robinson stated they will move forward with the self-funded and fully-insured based on what the Board is talking about now, because there may be some appetite to do something with fully-insured with some caps on a longer term basis; and they will try to design it. He stated what a number of groups are doing now is encouraging individuals to improve their health by providing

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alternatives or incentives in order to have people become compliant with certain things to improve their health; it can be tied to a health risk assessment; typically it goes from participation to outcomes; and there are some groups that do a tobacco surcharge. He noted if it is looked at from an outcomes perspective, there have to be alternatives based into those programs themselves because of the way the laws are set up for that; and if his blood pressure is high and he cannot get it down to something normal, with some sort of alternative he can meet that arrangement or have it waived by the doctor. He pointed out there would be biometric screenings that had to be done every year for body mass index, blood pressure, blood sugar, and cholesterol; the first year a person would get a baseline; the second year a person would have to show improvement or be at compliance in one of the four areas; the year after that two of the areas; and then by year four, to be compliant in all areas.

Commissioner Infantini stated the people who did not want to participate with the adherence-based incentive plan, in the HRA plan, he or she could pay the deductible.

Chairman Fisher stated health companies thought that the Board would provide fitness programs.

Commissioner Smith inquired if that would tie in with the five year plan that this would play into it. Mr. Abbate replied it is possible.

Mr. Abbate noted if the PPO option was removed, and everyone had to be in a high deductible with an HRA plan, it is something the Board could do; and it would be \$1 million savings.

Chairman Fisher stated most of the people were on a PPO and the Board encouraged the HRA. Mr. Abbate is the Board eliminates the PPO, the shortfall is gone. He stated it is \$333,000.

The Board reached consensus to implement an adherence-based incentive plan to include health risk assessments and biometric screening requirements which must be met in order to qualify for Health Reimbursement Account (HRA) funding contributions.

RESULT:	ADOPTED [UNANIMOUS]
MOVER:	Trudie Infantini, Commissioner District 3
SECONDER:	Curt Smith, Commissioner District 4
AYES:	Robin Fisher, Jim Barfield, Trudie Infantini, Curt Smith
ABSENT:	Andy Anderson

ITEM 1.C., HEALTH PLAN RFP (5)

Commissioner Infantini inquired what if in the RFP it asks that it is based on plan enrollment as it is now, and plan enrollment if the PPO were eliminated; then there would be a guarantee everyone would get into the plan; and she thinks it would be more attractive to her. Mr. Abbate replied they would have to see; if staff does all of the things the Board have talked about, including the adherence based and tying that in, they are hopeful it would be better than the \$350,000.

Motion by Commissioner Smith to eliminate the PPO from the health plan.

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Commissioner Infantini inquired why not have the RFP come back rather than making it iron clad that the PPO is being eliminated; and it can come back for the Board to see what the cost savings would be.

Chairman Fisher stated if the PPO is gotten rid of and a person is a \$35,000 employee who has a tough year where two family members had to be hospitalized, it can be expensive. He stated the Board is concerned about shifting more cost to the employee, and that would be what it would be doing by getting rid of the PPO.

Commissioner Smith stated it only affects 30 percent of the employees.

Mr. Abbate stated depending on what the Board decides on this, the RFP could be structured with a baseline; the Board can offer deviation; if it is a single plan it is easier to evaluate because they would all be against the same baseline; staff intends on doing an RFP that permits deviations and alternatives to the baseline; and they just want to know what the baseline cost is.

Commissioner Smith stated if the Board has that much latitude, he will withdraw his motion.

The Board reached consensus to direct staff to draft an RFP that uses the current program as a base line option and allow for deviations from the base line to be proposed.

Mr. Abbate inquired the service and administration, health plan design, network, plan management, and cost and guarantees need to be weighted; and it would be helpful to know what the Board wants staff to give weight to these other areas. He inquired if the Board wants staff to add other areas to that.

Commissioner Barfield stated he wants to make sure the providers know how to handle groups as large as the County.

Commissioner Infantini stated it will most likely be cost because the Board was able to narrow down the other parameters; and cost will be given the primary consideration.

Mr. Abbate stated staff will be evaluating based on those costs relative to what the network is; and there has to be some value about how much weight to give to the network.

Chairman Fisher stated he hopes the Board is not tying the vendor's hands into being creative.

Commissioner Barfield stated one of the criteria should be innovative methods; it would give the providers a category they had to respond to; and the Board would score at that point.

Mr. Robinson stated they had talked about something that is verifiable; it will be more difficult to evaluate the innovative portion of it.

Commissioner Barfield stated they can point out the item and what the benefit is.

Mr. Whitten inquired how to quantify innovative methods. Commissioner Barfield replied if the provider gives an innovation that there is very little value of anything to it, which is not a big rating. Mr. Whitten stated they can be innovative and still be the most costly proposal. Mr. Whitten stated he does not know if the Board can get to this ask in this place in time; and staff can give it to the Board through the RFP and react to that.

Chairman Fisher stated at the end of the day it is the plan and value in the plan and not just a pure cost thing.

The Board reached consensus to direct staff to draft an RFP that encourages use of innovative methods.

*The Board recessed at 2:30 p.m. and reconvened at 2:40 p.m.

ITEM 1.D., NATURAL RESOURCES

Ernie Brown, Natural Resources Management Director, stated essentially what staff has done over the last 10 years is created a Natural Resources Department that focused on two things, and leverage is based on that, the ecology and the economics; there is another element that is the recreational; but it is really of social value. He went on to say the Board has constructed this organization so that it operates with all three of those elements in play, focusing specifically on the economics and ecological where there is value and synergy associated with that; all of the programs they are associated with have an ecological foundation and a linkage to the Natural Resources and its management component; and it is driven by the understanding of hard science and the economic value and benefit to the community. He provided the Board with a slide of the structure of Natural Resources Management Department, which is Mosquito Control, Watershed Management, Remediation and Compliance, and Environmental Resources Management. He stated Environmental Resources Management, which ranges from development assistance as far as helping the development community navigate the County's 10 environmental regulatory frameworks; the objective there is to help them get through that and a buildable product on the street as soon as possible after meeting all of those regulatory requirements; they also deal with the multimedia compliance, assistance as it relates to those Codes; the ecosystem management is supporting the Utilities Services with the Viera Wetlands; and the larger components in impact for this particular program is boating and waterways. He pointed out the remediation and compliance three major areas are petroleum cleanup and remediation and pollutant storage system compliance, which are State Contracts; the department serves as a delegated representative to the State; this is funding by the State; and there are no local dollars associated with that. He advised the Board the third element is hazardous waste compliance; this is the small quantity generator; this is a compliance assistance based; and it is not regulatory. He stated the third program the department deals with is the Watershed Management; one of the major programs they deal with is the beach and coastal management program; this is virtually completely funded by the Tourist Development Tax; they deal with the 34 miles of beaches in Brevard County; and the County's beach tourism is a \$1.6 billion benefit. He noted the other two elements are the stormwater engineering and design and water quality for the Indian River Lagoon and St. Johns River water quality and it deals with the flooding programs. He explained to the Board the last program the Department is in charge of is Mosquito Control; their primary emphasis is an environmentally based, safe, and scientific driven management of mosquitoes with the first emphasis on public safety, and the second emphasis on quality of life; this is done through a multitude of avenues; the first approach is the 20,000 acres of impounded salt marsh, which is all hydrologically connected, with a few exceptions, to the Indian River Lagoon; and there is this incredible ecological interface with species management, habitat management, and mosquito control. He went on to say the other element is dealing with aquatic weed control; aquatic weeds are a habitat for breeding of mosquitoes, so to deal with that they also have a lot of services they provide to other entities, internal agencies, as well as St. Johns River Water Management District and others, to deal with aquatic weeds; the third element is chemical/biological treatment, biological treatment primarily for larvicide where it is actually getting the mosquito at the larva stage before they start biting; and as a last resort, they apply adulticides to control the population once they have taken to wing. He stated the Department has a \$32 million budget; \$342,000 of that is General Fund, approximately one percent; and the rest is coming from a wide array of sources, State funding, State Contracts, State Grants, Federal Grants, Stormwater Utility Assessment,

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Mosquito Control, dedicated Ad Valorem, and the list goes on. He stated the Environmental Resources Management funding sources, including a \$9 million Grant; this is also the only place where the General Fund exists; and that funds the Boating Waterways Program and the Code Enforcement Program, things that should not be permit based issues.

Commissioner Barfield inquired if Natural Resources Management received many Federal funds. Mr. Brown replied beaches in particular receive tens of millions in dollars.

Mr. Brown stated Remediation and Compliance, again almost all of this is State funded; there is a portion that comes out of business tax receipts; and it helps businesses that are having to deal with small quantity generation of hazardous waste pay a fee associated with the business tax receipt, and it goes to fund this program. He pointed out Watershed Management is also one of the larger funded areas; most of this comes from the Stormwater Assessment, approximately \$5 million; the other large portion of it are State and Federal Grants; and there is the balance forward component. He stated the Mosquito Control portion is almost exclusively Ad Valorem; and they have a remainder for balance forward. He stated the Department itself has approximately 92 positions; currently there are about 10 percent that are vacant; but as a Department most of the reductions were done in Environmental Permitting and Mosquito Control. He stated the General Fund transfer since 2007 has had a 54 percent decrease; this was intentional; their objective was to try where they could provide relief to the General Fund; and there was a 54 percent decrease in the General Fund transfer. He stated approximately 45 percent of expenditures is Capital Outlay. Environmental Resources Management is mostly Capital Outlay. The Remediation and Compliance is mostly Compensation and Benefits because it is a people program, as they provide a service; Watershed Management is much more spread out, but over 25 percent of it is Capital Outlay; and Mosquito Control are mostly Compensation and Benefits. He stated the trends and issues are the Indian River Lagoon, Beach Management and Nourishment, Grant Leveraging, Development Assistance and Review, Mosquito Control Program Sustainability, Exodus of experienced personnel, and Aging Vehicle Fleet; and the average of vehicles are 11 years old, with an average mileage of 94,912.

Mel Scott, Assistant County Manager, stated while the Board may not be impressed with 11 year old vehicles at 94,912 miles; but the function that results in these miles is low gear, low speed trucks traveling the berms doing the spraying, so a lot of these trucks are not just coming out of 10 or 12 miles per hour.

Commissioner Smith stated he painted a lot of vehicles that did highways at 300,000 miles and then there were cars that were County owned like Mosquito Control with a fraction of those miles, but they would be beat up. Mr. Brown stated they are thinking of going to light weight diesel trucks, which can handle it better.

Chairman Fisher inquired if the trucks are purchased through Mosquito Control. Mr. Brown responded affirmatively, the funds are dedicated and restricted. Chairman Fisher inquired if the General Fund is purchasing any of these vehicles. Mr. Brown replied most of the old vehicles are the General Fund; they sometimes play the hand-me-down game; but it works until the aging fleet becomes a real problem.

Commissioner Smith inquired what the Chevy Blazer, Lumina, and Cavalier is used for. Mr. Brown responded the Lumina are basically an administration vehicle for meetings to attend; the Cavalier is used for the same purposes; and the Blazer is used in areas where a four-wheel drive vehicle is needed to carry equipment. Commissioner Smith inquired if these are put out for bid. Mr. Brown advised they use the Florida State Sheriff's Association contract to piggyback off of. Commissioner Smith inquired if staff is limited to types of cars; and he inquired if they can be a Toyota or Nissan. Mr. Brown replied Teresa Camarata, Central Services Director,

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could provide the Board with the details of the spread of the bids; and he knows they do have a variety.

Stockton Whitten, County Manager, stated the County has standardized with General Motors (GM) products because the mechanics are GM trained; where there are Fords it is an unusual circumstance; but it is basically GM products. Mr. Brown pointed out the Ford Fusions was bought by the State through the Tank Program.

Commissioner Smith stated from his business experience he can tell the Board a Corolla will run circles around a Cavalier for a lot more years; but if those cannot be purchased on a competitive basis, there is no point. Commissioner Smith stated the mechanics can work on anything.

Mr. Whitten stated he thinks Commissioner Smith hit the two points, how competitive in terms of price and then obviously switching over the equipment and mechanic training; and the reason the County has standardized is economies are standardized by one set of training standards with the equipment and those sorts of things. He stated he is not sure what they bid out on the State bids, but he would guess not often would a Toyota be on the State bid.

Commissioner Infantini stated it depends on how long they last; and if it will hold up substantially longer, it would be worth the price.

Mr. Whitten stated he agrees with that, but if there is not the ability to maintain it or buy it, but he agrees if something can be bought that lasts twice as long; but the cost to retain the mechanics and to get new equipment is part of the consideration.

Mr. Brown explained to the Board stated the retirement of seasoned personnel creates a loss of corporate knowledge; filling positions is difficult with current salaries and usually requires increases over the cap which creates a disparity with other remaining employees; lack of competitive salaries and benefits makes the County a transitory employment location; and staff trains individuals for private entities.

Commissioner Barfield inquired if staff uses consulting engineers or architectural engineering firms. Mr. Brown responded affirmatively, they have continuous service agreements; the State regulates how that is operated; they spend several million dollars a year; and outsourcing through that is by far the Departments largest non-capital expenditure.

Commissioner Infantini inquired when the last time there was a big mosquito outbreak. Mr. Brown replied he thinks it was 2009. Commissioner Infantini inquired if it was about \$3 million the County had to spend. Mr. Brown responded he does not have the number, but he can get it for the Board.

He stated development assistance permitting assistance staff decreased from 2007 to present at negative 38 percent; and environmental review workload has increased at 50 percent from 2014. He went on to say with the beach management and nourishment, the most recent data indicates a minimum of a 5:1 return on investment State wide; and beach tourism provides direct and indirect economic benefit to Brevard of approximately \$1.6 billion annually. He explained to the Board the Beach Management and Nourishment received the 2014 National Best Re-nourished Beaches Award; the North Reach, South Reach, and Mid Reach are funded by Tourism Tax (TDT); South Beaches remain unfunded; and Amendment 1 may provide additional resources for strategic acquisition to the South Beaches. He provided pictures to the Board of some of the beach re-nourishment projects. He stated staff targets priority retrofit projects; they install treatment systems on untreated discharges; they re-divert freshwater back to St. Johns River; and they harvest aquatic weeds. He went on to say they increased street

sweeping and baffle box maintenance; and they engaged the community in solutions. He stated the assist State and Federal partners to remove muck; expand filtration restoration programs, such as continuing oyster gardening program and constructing/restoring oyster reefs, claim beds, and living shorelines; and they foster action-based research. He stated the State Legislature funding from last year for the Lagoon is out on the street now; and they will continue that work next year. He noted Brevard County has the largest oyster program in the Universe with 1,000 plus oyster gardeners have been trained to date; there have been 30 plus workshops to date; and over 1 million spat growing or already placed on pilot reefs. He pointed out that five sites have been identified for muck removal; one up north, two in the central portion, and the Grand Canal and Turkey Creek are the primary sites through the \$10 million grant with the State; and the goal is to have dredging under contract by April 2015. H explained to the Board when it comes to outfalls, staff is mapping them and doing work to actually loading what nutrients where the biggest problems are; and they should go to design the end of this year or next year.

Chairman Fisher stated Mr. Brown mentioned about the experienced employees leaving; when Frank Abbate, Human Resources Director, was up there he stated the average employee made \$39,000 a year; looking at Natural Resources Management at \$6.1 million compensation and benefit, which makes it about \$66,000 a year, which is a lot higher average than the average employee on the health plan; and he inquired if it is money they are leaving for or benefits.

Commissioner Infantini stated Mr. Abbate was taking salary, compensation and benefits is typically 25-30 percent and 70 percent is about the compensation.

Mr. Brown stated it would be the average compensation package. He stated it depends on if there are skilled workers, engineers, geologists, and scientists; and they receive a higher salary.

ITEM 1.E., TRANSIT SERVICES

James Liesenfelt, Transit Services Director, introduced Colby Stallings, Finance Director for Transit Services. He stated the Transit Services mission is to provide quality transportation services that meet the needs of the public and enhance the quality of life of the community. He went on to say the bus service fixed routes are 29 buses on 18 routes on weekdays, 17 buses on 14 routes on Saturday, and 3 buses on 3 routes on Sundays; there are over 1,000 bus stops in the system, leading to over 1,000,000 different ways to utilize the system; and they operating over 370 loops and making over 360 connections per day. He explained to the Board the boarding levels are higher than Houston and Minneapolis/St. Paul; and the five most common trip purposes are home to work, home to shopping, home to social/personal, work to home, and work to work. He noted the paratransit services have 27 buses and six vans daily; the programs are offered to transportation disadvantaged, contracted routes, ADA complementary, and Volunteers in Motion; each program has different funding and eligibility requirements; and it is the 40th largest paratransit system in the Nation as of 2012. He stated there are 47 vans on a daily basis; the Space Center and VA Clinic are the two largest destinations; Human Service agencies provide transportation to the disadvantaged with 42 vans; and some of those are the Brevard Alzheimer's Foundation, Senior Care of Brevard, Space Coast Center for Independent Living, and 18 other agencies. He pointed out trips provided in FY 2014 for fixed routes is 2,341,831, paratransit at 121,860, commuter vanpools at 155,847, human service agency vanpools at 274,071 trips, for a total of 2,893,609. He noted the Board directed the focus on the elderly, disabled, and service workers; there are contracts and funding sources to help to define service priorities; transportation disadvantaged funding cannot be used for fixed routes; corridor funds are specific to the routes; grants have limitations on eligible expenditures; and Toll Revenue Credits for Capital Grants free up local funding for operations purposes. He stated total revenue credits is a word to remember; the County is eligible for toll revenue credits in the

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State of Florida; it is a paper match, so the Federal Funds they do not have to match local match; and the Federal Funds are 100 percent, which saves approximately \$1.3 million to use for bus service on the road as opposed to just capital programs. He pointed out close to 70 percent of their funds are intergovernmental at a little of \$16 million, State and Federal Funds; they have to budget for all revenue and all grants; they have to include projects that may take longer than a year; and a great example are buses. He explained to the Board their budget is about \$22 million; it depends on how much the Department spends in capital; and they spend between \$13 million and \$15 million each year. He stated they have about \$4 million from the State; charges for services are a little under \$2 million; fares are about \$1.3 million; and the General Fund transfer is about \$1.6 million. He went on to state they receive a little more than \$6 million in General Fund; that General Fund is equal to what they get from the Florida Transit Public Block Grant, which is a 50/50 match; they have special service in Viera and Rockledge, which is a two-year grant; and that gives them \$1.6 million, which match the State Grants perfectly. He noted the \$1.6 million allows them to draw other funds from Florida Department of Transportation (FDOT); they get about \$2.3 million from FDOT; they get a little under \$1.5 million from the Transportation Disadvantaged Fund; and they can draw about \$7 in Federal Transit Administration, which are Federal Funds. He stated every year they can draw about \$8.9 million of State and Federal Funds and run the program because they receive \$1.6 in General Fund. He stated the leveraging ratio is \$1.6 a year. He explained to the Board they are just under \$6 in compensation and benefits for expenditures/operations; 82 percent of the salaries go to bus drivers; and 17 percent go to people who are not driving buses. He stated they budget about \$1.7 million in fuel; last year they spend about \$1.9 million, they went over the budget, and used other funds to cover that; this year they were on pace for \$1.9 million until December showed up; and he cannot wait to see the January bill since the fuel went down. He noted there are \$3 million in services and \$5 in facilities and equipment repair; and they will bring the annual grant application in April and May. He stated the biggest portion of the Capital Budget are the buses; this year they have budgeted \$3.5 million; a 40-foot bus costs \$406,000 fully-loaded; paratransit buses cost about \$1.5 million; they have about \$900,000 in vans to buy for the Van Pool Program. He explained to the Board their buses have been 60 percent made in America; they have to make sure all of the components where they are manufactured and do an audit; and it has to be built in the United States. He stated there is not a mini-van built in the United States that is Buy America compliant; Ford no longer builds mini-vans; Chevrolet has pulled out of it; Chrysler is building their mini-vans in Canada; and they do not qualify. He noted they have not bought mini-vans in two years because of Buy America issues; and mini-vans are the demands for commuters.

Commissioner Infantini inquired if the County has to buy new mini-vans; and can it use Auto Trader or something. Mr. Liesenfelt responded his guess is VRide would not want to insure them; staff works with them to specifications; there have been years where people bolted in seats that did not meet safety tests; and he will look into it. Commissioner Infantini stated she has always had a Chevrolet van since 1985; and it is a great vehicle and it seats a lot of people. Mr. Liesenfelt stated the Federal Government says a van has to last four years or 100,000 miles; they work with VRide; and they average about five years at 120,000 miles.

Mr. Liesenfelt pointed out there is about \$400,000 in bus stop improvements. He stated in the CIP they are waiting for the Feds to approve the grant; they need to fix electrical work at both garages; and they need to fix the bus lift. He added the Cocoa Fuel Island Canopy needs to be replaced; and the Melbourne Bus Bay Electrical modifications/lift replacement is at \$232,506. He stated some of the trends are growth in service, overcrowding, and service needs. He advised the Board their focus is changing from adding service to improving service; passenger loads have increased; strollers, shopping bags, and bicycles add to the overcrowding; and the passenger loads are causing on-time issues. He noted the Saturday service needs are in Mims, West Cocoa, and Viera; Cocoa and Rockledge needs a second Saturday bus; and Route 1 (Titusville to Melbourne) operates only every two hours. He stated on Sunday they only have

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three fixed routes that operate; and there is no service on Martin Luther King Day, Memorial Day, Labor Day, and Veterans Day. He pointed out the issues they have are bus stops, reliance on outside funding, and vehicle operator retention. He stated bus transfer points, there are no locations are County-owned; more shelters, benches, and pads are needed; and cleaning and maintaining bus stops is needed.

Commissioner Infantini stated she has pushed for a long time regarding the bus stops; at one time people would put bus stops for free as long as they allowed advertising; and she inquired if that can be readdressed. Mr. Liesenfelt replied staff has talked with the County Attorney's office in the last couple of months; they put a letter together to help; and 20/20 media is the contractor. He pointed out they have not built a shelter in years; they build good shelters and keep them clean; but he reiterated they have not done anything to help the County with its passenger. He advised they are talking to the County Attorney to find out what needs to come back to the Board regarding the Contract; and if the Board wants to put it out to bid for a shelter provider, it is what needs to be done. He stated staff talks to 20/20 Media, but they do not talk back.

Commissioner Barfield pointed out the County advertises on the buses; and he inquired where that money is in the revenue. Mr. Liesenfelt replied in the miscellaneous area; and it is about \$55,000 a year. He stated the City of Titusville is looking at a solar shelter provider, which he had not heard of before, to put 10 shelters in the City of Titusville.

Commissioner Barfield stated when he was campaigning, he took the bus a lot; and he was impressed by how courteous the drivers were. Mr. Liesenfelt stated the drivers get to know their riders.

Commissioner Infantini inquired if Mr. Liesenfelt would come back to the Board with how much it would cost to add bus service on the holidays

Mr. Liesenfelt stated vehicle operators with seven years' experience are paid \$0.28 per hour more than a new hire; 60 percent of vehicle operators rate of pay is at the minimum of the pay grade; and the turnover for full-time positions has increased to 20 percent in FY 2012/2013 and FY 2013/2014, up from 12 percent during the previous six years. He went on to say with the daily operations those are State funded at \$3.8 million; daily operations are \$1.29 million federally funded; and fleet maintenance is federally funded. He advised the Board that capital projects are all federally funded; and the Federal Authorization Bill, MAP-21, expires in May.

ITEM 1.F., UNIVERSITY OF FLORIDA EXTENSION SERVICES

Linda Seals, University of Florida Brevard County Extension Service Director, stated IFAS stands for Institution for Food and Agricultural Sciences; they deliver research-based educational programs to Brevard County citizens; and the key is they are research-based educational programs. She went on to say they are unbiased programs based on research from University of Florida and other universities throughout the County; and it is good science. She stated they are a partnership through the University of Florida, Brevard County, and United States Department of Agriculture (USDA). She stated Dr. Nick Place is the Dean of Extension, Dr. Joe Shaefer is the South District Director, and she is the Extension Director. She stated there are nine County Extension faculties at the University of Florida; there are five food and nutrition program assistants; and there is four County support staff. She stated every four years, the University Statewide gets together in the counties with the stakeholders and they ask what is important to the counties and what educational programs are needed in the communities; folks in Brevard County cared about food systems and environment; they also care about sustainability and conservation of resources in the Florida communities; and they care about financial security of individuals, business enterprises, and communities. She went on

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to say it is important to residents of the County that there is an opportunity for the youth to experience science, technology, engineering and math; and for the opportunity for Floridians to embrace healthy lifestyles. She stated the super issues are Sea Grant, which is marine sciences; family consumer sciences is the new way of saying home economics; agriculture and 4-H and youth development is part of the Extension Service; and community development is a new area for them. She noted one of the programs they have is nutrition education; they educate adults and children; they are educated on the USDA My Plate healthy cooking fresh foods; they taught 91 teens and their parents about health eating and exercise through the Be Fit Program for eight weeks; and in the end, 50 percent made healthy changes to their diet by drinking fewer sodas, eating more fresh fruit and vegetables, and increased physical activity. She stated the Food and Nutrition Program (FNP) delivered to Title I schools and senior centers; it is a USDA Grant-funded program; some of the topics include exercise and healthy eating; and currently 4.5 Full Time Equivalents (FTE) are employed. She went on to say studies have shown that for every dollar invested in nutritional education, between \$9 and \$18 million are saved in medical costs; FNP educated 5,741 youth and adults; and it saved Brevard County approximately \$51,669 in medical care costs. She stated they teach adults about canning and preserving fresh food, food safety for consumers and producers, and they educate them about the farmers markets and buying local seafood. She added they have a national award winning program called Sea Food at Your Fingertips; they teach consumers how to purchase local seafood, cook it, and the health benefits of eating seafood; and it has been a successful program. She noted they also do Food Handlers Certification. She explained to the Board they actually do financial management education; they partner with Career Source; and they provide budgeting education, credit management education, and youth education in the areas of money. She stated UF/IFAS Extension in Brevard County partners with Brevard Career Source and the Housing Authority to deliver educational programs on financial management; and in 2014, 257 consumers learned how to budget, save money, and manage credit. She pointed out they do a program for Child Passenger Seat Safety; there is a wrong and right way to install a car seat; and a correctly use child safety seats can reduce the risk of death by as much as 71 percent. She advised the Board the agriculture component of the Department has a cattle reproductions school; they do a lot of work in the County with best management practices for small producers; there is an area gearing up in reducing stormwater runoff and fertilizer; and they provide poultry education for backyard flocks. She stated they provide licenses and continuing education units for County employees; they show larvae/adult identification; and they provide mosquito habitat management. She noted in 2014, the My Brevard yard program taught over 1,401 residents how to reduce fertilizer applications and comply with local fertilizer ordinances while maintaining a healthy yard. She stated they work with the small farmers; they have a program called Learn to Earn; they teach small farmers; and a farm needs to be run like a business. She went on to say they provide best management practices certification to landscapers and their pesticide licensing; and they help them get their fertilizer licenses. She noted one-on-one consultations with landscapers resulted in a reduction of 4,431 pounds of nitrogen applications, and 72 pounds of phosphorus applications. She stated the Brevard County Farmers Market is something they are proud of; it was started in 2009 to provide a market outlet for small producers and to educate the consumer about local food; they have an average of 350 customers weekly; and one of 20 Florida markets enrolled in the Fresh Access Bucks Incentive Grant.

Commissioner Infantini inquired what SNAP Ed is. Ms. Seals replied food stamps; and it is the education of those folks.

Ms. Seals stated there has been a 12 percent increase in the number of folks coming through the market who are using the SNAP Ed program. She stated they are proud of is their youth market poultry project; studies show that youth who take care of animals, especially in a livestock situation through a 4-H Program increase significantly their abilities to be leaders and their life skills increase tremendously; and they teach life skills and leadership. She advised

community development is a new buzz at the University of Florida right now; the Citizens Academy is one of those things where they bring in the different Directors in the County who teach what the County does; another program is Sustainable Floridians Program, which is how to get things done in the community through leadership and action; and the UF/IFAS Water School is a Statewide Program that is for elected officials, community leaders, and policy makers who are making important decisions about water issues. She stated they are part of the Seafood at Your Fingertips Program, Oyster Gardening, Eco-tourism, Fisheries Education, and Aquaculture. She stated they provided a list of services the Department provides. She pointed out they thrive on volunteers; without volunteers they would be in a world of hurt; last year the volunteers gave 23,646 hours; and that equates to \$502,241 in value. She stated they have received 15 State awards and five National awards. She noted client satisfaction is 90 percent for the quality of the service provided; 85 percent said it solved their problem or answered their question; and 73 percent of the clients shared the information to someone else. She stated the General Fund provides \$812,942 to the Department; internal services fund are at \$257,006; and the special revenue funds total \$335,359. She stated the revenue to the Department is \$812,942. She noted the faculty is 10 FTE's and four FTE's, not counting the program assistants because that it totally grant funded. She stated most of the faculty gets some of their salaries from the University of Florida and some from the County; they utilize the University's health benefits; but money is taken out of the budget to provide health benefits here. She stated Capital Outlay is not much at \$2,682. She stated some trends are the Indian River Lagoon programming, moving towards more urban extension programs, adjusting to delivering program to Millennials, and increasing off-site programming. She explained to the Board some of the issues for the Department are aging vehicle fleet; four faculties will apply for promotion/permanent status over the next two years; there will be increased travel dollars for professional development; and building upgrades are needed.

ITEM 1.G., SCGTV/COMMUNICATIONS

Don Walker, Space Coast Government TV Director, stated their mission is to provide information on Brevard County Government programs, services and accomplishments, as well as emergency information, through the Space Coast Government TV (SCGTV) cable-access government channel, the Internet, the new media, and via Social Media; and in 2010, web streaming was added to allow those without digital cable to view government programming via the Internet. He went on to say SCGTV began operations in 1999 and has become an important communications tool for Brevard County Government that provides the opportunity for more than 200,000 households countywide to view live and videotaped government meetings, programs, and other important information on cable government-access television 24 hours per day, seven days per week. He stated in 2006, an Emergency Information System was created and implemented, allowing for live emergency briefings to be televised from the Emergency Operations Center (EOC) via SCGTV, with the capability of remote access and control for television staff; SCGTV/Communications Director serves as public Information Officer for EOC activations; in 2014, there were 26 activations and 15 rocket launches; 2014 also included activation for Statewide hurricane drill, St. Lucie radiological drill, infectious disease drill, and two municipal hurricane exercises; and they were activated in June 2014 for Tropical Storm Arthur. He explained to the Board the Communications/SCGTV is a three-person operation consisting of a Communications Director, Production Manager, and Programming Assistant; part-time vendor assists on meeting days for production purposes. He stated 24/7 operations encompass 58 County meetings, including Board meetings, Planning and Zoning meetings, and Transportation Planning Organization (TPO) meetings; and these meetings total 118-plus hours. He stated SCGTV aired 142 municipal meetings, including Barefoot Bay, Cocoa, Cocoa Beach, Melbourne, Palm Bay, and Titusville; these meetings totaled 333-plus hours; they aired 2,427 Florida Channel program hours; and they spent \$3,695 in 2014 for equipment repairs. He stated in 2014 Communications issued 430 press releases, produced more than 100

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promotional items ranging from Creature Features to Public Service Announcements to Board presentations and speeches, produced *INSIDE Magazine*, the County's annual report, produced four quarterly County newsletters, produced national article for *American City and County Magazine* drawing attention to Brevard County Government's rebound from the Space Program layoffs, produced updates for County web page/spotlights, produced regular Face/Twitter posts regarding County programs and initiatives and the Palm Bay Road Culver Replacement Page, topped 10,000-plus subscribers for press releases, and produced Resolution photos, ground breakings, ribbon cuttings, and various ceremonial and event pictures, including Black History Month, Hispanic Heritage Celebration, and ELI graduation. He noted the adopted budget from the General Fund is \$255,765; it covers operating expenses and compensation and benefits; SCGTV capital replacement projects would allow the SCGTV/Communications Office to increase efficiency, reduce ongoing maintenance costs, and increase production quality; and much of the equipment has become obsolete or is approaching the end of its useful life. He pointed out their objectives are to increase production of Public Service Announcements toward the 'Telling Our Story' initiative, a 'Who We Are' videos for the County webpage, and high-definition broadcasting. He concluded by saying effective March 3, 2015, SCGTV programming is moving from Brighthouse Channel 199 to Channel 499 as part of the cable network's initiative to standardize channel lineup for public, education, and government programming across Central Florida.

ITEM III.A., POLICY PROHIBITING FORMER COUNTY COMMISSIONERS FROM MONETARY RENUMERATION FROM ANY COUNTY GOVERNMENT AGENCY OR CONTRACTED ENTITY

The Board tabled consideration of a policy prohibiting former County Commissioners from monetary remuneration from any Brevard County Government Agency to the January 27, 2015, Board meeting.

ADJOURNMENT

Upon consensus of the Board, the meeting adjourned at 5:04 p.m.

ATTEST:

ROBIN FISHER, CHAIRMAN
BOARD OF COUNTY COMMISSIONERS
BREVARD COUNTY, FLORIDA

SCOTT ELLIS, CLERK