



Janet T. Mills
Governor

STATE OF MAINE
STATE EMPLOYEE HEALTH COMMISSION
61 State House Station
Augusta, ME 04333-0061

Jonathan
French
Labor Co-Chair

Heather Perreault
Management Co-Chair

STATE EMPLOYEE HEALTH COMMISSION MEETING

Thursday, February 15th, 2024 @ 8:30am
Microsoft Teams Meeting

Burton M. Cross Building
111 Sewall Street
Room 103, A and B
Augusta, ME 04330

Commission Members in Attendance: Olivia Alford, Lois Baxter, Claire Bell, Cecile Champagne-Thompson, Lynn Clark, Laurie Doucette, Jonathan French, Rebekah Koroski, Lew Miller, Doris Parenteau, Heather Perreault, Shonna Poulin-Gutierrez, JoAnne Rawlings–Sekunda, Kim Vigue, and Frank Wiltuck.
(Total = 18)

Commission Members Absent: Diane Bailey, Kelly John, Heidi Pugliese, Kevin Dionne, Chris Russell, and Nathaniel Zmek.

Vacant Seat(s): 3

Others Present: Devon French, Charles Luce, Joan Hanscom, Nathan Morse, Roberta DuPont, and Emma-Lee St.Germain – Employee Health and Wellness; Breena Bissell – Bureau of Human Resources; Sabrina DeGuzman-Simmons and Kevin Fenton – Aetna; Stefanie Pike, Kristine Ossenfort, and Becky Craigie – Anthem Blue Cross and Blue Shield; Libby Arbour and Kristin Poulin – MCD Global Health; Lynn Hadley, Judy Paslaski and Aja Tufts Godbout – MedImpact; Marie Bridges and Cindy Reilly – Northeast Delta Dental; Amy Deschaines, Ken Ralff, and Jacqueline Scherer – Lockton; Trevor Putnoky – Health Purchasers Alliance; and Joe Miller – Novo Nordisk.

Agenda Item	Discussion	Action/Next Steps
I. Call Meeting to Order (8:32 am)	Heather Perreault called the meeting to order.	
II. Introductions		
III. Review and Approval of Minutes (January 18th, 2024)		Rebekah Koroski made a motion to accept the January 18 th , 2024, minutes as amended; Lynn Clark seconded the motion. Motion passed.



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IV. Recurring Monthly Business

a. Open Discussions/Questions on Vendor Reports – All

Information contained in written report; highlights and discussion noted below:

- There were no items brought to the commission.

b. Employee Health and Wellness Highlights – Shonna Poulin-Gutierrez

Information contained in written report; highlights and discussion noted below:

Wellness Highlights –

- Wondr Health: Wondr Health application period for plan members began 01/29/24 and will run through 02/12/24. The 2024 program will begin on 02/19/2024. As of 02/05/2024 there were over 500 applications to the program.
- 2024 Health Premium Credit Program: As of 02/09/2024, there have been 1,609 self-entered flu shots, 363 self-entered “My Numbers,” 1,115 self-entered annual physical exams, 574 self-entered well-being visits, and 4,194 completed Wellness Questionnaires, and 3,983 completed Preventative Care Provider resource video/quizzes.
- Health Navigation Appointments: As of 02/09/2024, there are 47 upcoming events, 51 dates completed, 298 participants to date, 483 appointments available, and 57 people with an upcoming appointment scheduled.
- Maine Federation of Farmers’ Markets (MFFM) – Bumper Crop Program 2024: Employee Health and Wellness and WellStarME are looking to implement the Bumper Crop Program to the State of Maine. They are also currently working together on the contractual components and other important details of program implementation.



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Communications Highlights –

- Wondr Health Promotion: A postcard was mailed to all State of Maine Health Plan Members in late January and a statewide email was distributed to all State of Maine employees on 01/29/2024.

Website Updates: The Medicare Advantage 2024 benefits summaries and premiums were added to our website to reflect the 2024 plan year.

- New Flex Spending Account Vendor: A welcome email was sent to all 2024 Flexible Spending Account participants from ASI Flex in early January.
- Constant Contact:
 - **Seasonal Effective Disorder**: A Constant Contact for Seasonal Effective Disorder was sent on 12/26/2023 to 11,619 recipients of which 41% opened the email and 1% clicked on the links.
 - **Cervical Cancer Awareness Month**: A Constant Contact for Cervical Cancer Awareness Month was sent on 01/04/2024 to 11,757 recipients of which 46% opened the email and 1% clicked on the links.
 - **Silver Sneakers Promotion**: A Constant Contact for the Silver Sneakers Program was sent on 01/25/2024 to 1,272 recipients of which 61% opened the email and 12% clicked on the links.

Vendor Communications –

- MedImpact: A letter was mailed to impacted plan members regarding requirements for GLP-1 medications in October 2023.
- Aetna: Due to a third-party vendor security incident, impacted Aetna Medicare members will receive a letter in the month of February.



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- It is important to note that no Social Security numbers or financial account information was included in the security incident.

Plan Design Update –

- Plan Design met on January 25th, 2024, and will meet again on February 21st, 2024. Currently the March meeting is “to be determined”.

Contract Highlights –

- Wellness Administrator: We will be continuing with Medical Care Development as our wellness administrator.
- Pharmacy Benefit Manager Administrator Implementation: Implementation continues to move forward for a July 1st, 2024 launch.
- COBRA Administrator: Our COBRA Administrator is csONE.
- Stop/Loss: We continue to use Sun Life for our stop loss stop loss insurance.

V. QUARTERLY PLAN UPDATES

**a. State of Maine Dental Plan –
Northeast Delta Dental,
Marie Bridges**

Highlights and discussion noted below:

For the reporting period of 02/01/2023 - 01/31/2024 –

- Utilization Summary: In the most recent 12-month period, February 1st through January 31st and at the end of January, the State of Maine had 25,552 enrolled which includes employees and their dependents.
- Claims Comparison Report: There were about \$7.4 million in claims paid in 12 months and that is an up by about 7% over last year. Enrollment is also up.
- Claims Utilization: The number of claims is also up almost 4% and the claim cost is up almost 5%. The overall average cost per employee per month is up close to 5%. Diagnostic and preventive exams are at 53% which includes



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cleanings, exams, x-rays and fluoride treatments and sealants and 30% of your dollars have been spent on basic restorative.

- Network Utilization and Savings Report: We're looking at the in-network utilization, 54% of the number of claims were paid to the premier network in about 36% to the State of Maine specific network, with only 10% out of network.
- Oral Wellness and Utilization Summary: In Oral wellness utilization - over 55% of claims were that of the employee and 19% were spouses with 26% being dependents.
- Oral Wellness Overview: Currently, 38% of the of the members are at low risk for oral health issues, 21% are at moderate risk and 11% are at high risk. In addition, 30% of members received no care at all.
- Member Oral Health Trends: Favorable trends show 4,825 Members were Low Risk for two years in a row (56.62% of Low-Risk members), 560 members that had No Care last year and are now Low Risk (6.57% of Low-Risk members) and 328 Members that had No Care last year and are now Moderate Risk (7.02% of Moderate Risk members).

Unfavorable trends show 4,041 Members had No Care for two years in a row (61.30% of No-Care members), 1,103 No-Care members are new enrollees (16.73% of No-Care members), and 499 No-Care members were High Risk last year (7.57% of No-Care members).
- No Care: There were 6,592 members that did not receive any dental care for the reporting period of 02/01/2023 through 01/31/2024.
- HOW Clinical Risk Assessments: Of the 22,230 covered members, there were 8,569 members that qualified for risk assessments, 682 that did not qualify and 12,979 that did not have a risk assessment at all.

Qualified Members Receiving HOW Enhanced Benefits: There is a new program through the HOW program that allows members who have been approved for



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	<p>enhanced benefits in the last 12 months eligibility for a Sonic Air electric toothbrush at a 50% discount.</p> <ul style="list-style-type: none"> • <u>Assessments, Risk and Severity</u>: Oral risk assessments have increased since 2021. There has not been much of a difference in gum disease or tooth decay risk score, but the gum disease severity score has gone down year over year which is what we expect to see from the HOW program. 	
<p>b. Plan Experience Summary – Active Medical and Dental, Amy Deschaines</p>	<p>Highlights and discussion noted below:</p> <ul style="list-style-type: none"> • <u>Health Insurance Admin Payments</u>: For the policy year July 2023 through June 2024, vendor fees totaled \$6.6M. • <u>Self-Funded Medical Experience Detail</u>: Self-funded medical through December of 2023 shows there were 85,917 employees with total net claims reaching \$123.2M and total plan costs of \$129.5M. • <u>Rebates</u>: Every 3 months we receive rebate reimbursements from MedImpact. The last one received was in January of 2024 in the amount of \$3.1M. • <u>Market Trend</u>: We are seeing the consequences of delayed care from the pandemic and in turn we are seeing higher than expected claims with pharmacy and drug. • <u>Self-Funded Dental Experience Detail</u>: Self-funded dental through December of 2023 shows there is currently a surplus under the dental plan, and we're running at 91.8% of the budget. 	
<p>c. Medicare Advantage Plan – Aetna, Sabrina DeGuzman-Simmons</p>	<p>Highlights and discussion noted below:</p> <ul style="list-style-type: none"> • <u>Your Member Demographics</u>: The A&B population is experience rated and includes about 9,000 members. The average age is slightly lower, but on par with our book of business, and you'll see the majority of the membership line between age 70 to 74 and the next is, you know, 65 to 69. If you look at the gender breakdown, you'll see it's 49% male and 51% female. 	



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- Measures Showing the Most Significant Change: Current indicators versus the prior period show a 7.5% increase in inpatient admissions, a 4.8% increase in inpatient surgery, and a 41.9% increase in the percent of total paid amount for catastrophic claims.
- State of Maine Aetna Medicare Advantage Cost Results: Both medical and medical pharmacy are up about 11.8% with the largest contributor being medical pharmacy, which is up about 18.3%. The overall cost that contributes to the medical spend is actually the Part B medications.
- Utilization Results: Per 1,000 members, office visits are down -10.8%. emergency room visits are up 17.8% and admissions were up from 129 the prior year to 138 in the current year, an increase of 7.5%. Book of business is 122. There were 167 high-cost claimants during this period and the average cost for these claimants was \$127,990.
- Top Medical Catastrophic Claims over \$75K: Catastrophic claims over \$75,000 were for Oncologic Disorders, Cardiac Disorders, Neurologic Disorders, and Infectious Disease. The highest total paid medical claim was \$444K.
- Primary and Specialist Physician Office Visit Utilization – Part A and B: Looking at primary care visits versus specialty office visit utilization, the total spend for primary care has gone down -10.3% and the percentage of members with visits to primary care (-3.1%) or specialist (-6.1%) has also trended down.
- Telemedicine – Part A and B Plan: The top 3 diagnostic categories were Adjustment Reaction, with 565 visits and \$93 paid, Depression, with 550 visits and \$105 paid, and Anxiety/Personality/Eating Disorder/Other, with 383 visits and \$95 paid. Total paid amount for telemedicine was \$371K.
- Top 3 Diagnostic Categories: The top 3 diagnostic categories were Cardiac, with a total paid of \$14.2M, Oncologic, with a total paid of \$12.1M, and Musculoskeletal, with a total paid of \$10.6M.
- Top 3 Providers: The top 3 providers include Maine General Medical Center-Augusta Campus with 2,575 claims and a total paid amount of \$9.9M, Maine



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Medical Center, with 1,015 claims and a total paid amount of \$8.6M, and Northern Light Eastern Maine Medical Center, with 1,032 claims and a total paid of \$4.9M.

- State of Maine Member Provider Survey: From January 2023 for those members who responded to the survey within the last six months, members are receiving access to their healthcare services for their specialist. Same day visits were at 2% and about 39% already had had a prescheduled appointment. For Primary Care visits, 6% of members were seen within a week.
- The State’s Part A and B Pharmacy Utilization: The State of Maine’s generic utilization did go down one point; however, it is difficult to steer the State of Maine’s population towards generics. In 2023 there were 226,150 scripts generated and of those scripts 87.3% were utilizing generics.
- Top 3 Part A and B Drugs: The top 3 part A and B drugs filled were Eliquis with 3,720 scripts and 875 utilizing members, Trulicity Injectable, with 966 scripts and 202 utilizing member, and Xarelto wit 1,207 scripts and 298 utilizing members. Of the top drugs filled, 50% were specialty representing 52 members.
- The State’s Part B Only Pharmacy Utilization: Mail order utilization has gone down a point from 5.6% to 4.0%. There was, however, an increase in members enrolled by 30 as well as an increase in utilizing members by 25.
- Top 3 Drugs Filled for Part B Only Plan: The top 3 part B drugs filled were Erleada with 11 scripts and 1 utilizing members, Eliquis, with 172 scripts and 30 utilizing member, and Abiraterone wit 13 scripts and 2 utilizing members. Of the total drugs filled, 60% were specialty representing 7 members.
- Timeline Changes to Vaccines, Insulins, and Negotiated Prescriptions: Notable items on this timeline are 2023 vaccines that were Part D were covered at 100% insulin. The Centers for Medicare & Medicaid Services published 10 drugs that they were going to start negotiations with and the pricing for those drugs will be published in September of 2024. In addition, members that fell



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into that catastrophic that change for 2024 is that those Members that fall into the catastrophic will have no cost share for the remainder of the year.

- Two Initiatives Prioritizing Member Health:
 - Healthy Home Visit: If members invite us to their homes, the completion rate is 31%, slightly lower than book a business for Q3 of 2023.
 - Health Risk Assessment: Health Risk Assessments are done annually. During this period 11% of members completed a Health Risk Assessment.
- Three Telehealth Options Make Getting Care Easier:
 - Teledoc Health: We're trying to promote it as much as we can, as there is very low utilization for Teladoc with State of Maine members.
 - MD LIVE: MD LIVE utilization is also low, we've had nine members this year for MD LIVE, which are your behavioral health visits.
- SilverSneakers Results: Currently, a major concern is outreach in areas where there is a lack of facilities which we are currently working on and there are discussions happening in areas we have yet to be successful. Members can, however, order at-home kits.
- State of Maine Aetna Medicare Advantage Program Results:
 - Rewards Program: There has been 80,083 thousand cards, gift cards that have been issued in this rewards program.
 - Meal Delivery: There were 455 meals delivered and we are currently using the vendor "Nations," which is fresh food.
 - Non-Emergency Transportation: There were 33 retirees that used non-emergency transportation and 108 total rides.
- Resources for Living: There were 51 members with referral source cases that were connected with programs like Government Healthcare Relief, Financial-Medical Bills, and Durable Medical Equipment.

**d. State of Maine Health
Plan Pharmacy Update –**

Highlights and discussion noted below:



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**MedImpact, Judy
Paslaski and Aja Tufts-
Godbout**

- Performance Overview: The planned paid per member per month trend is up 13.6% that is primarily due to the drug mix in play is up \$29.00 due to brand name drugs. Generics make up 1/3 of that trend.
- Specialty Overview: Specialty has always been the primary driver of we've seen this up in the 20% across our book of business. The use of Glucagon-like peptide-1 and the whole category of diabetes has just taken off. State of Maine is 3.8% up for use of specialty drugs and 1% of the State's population is driving over 52% of overall expenditures.
- Specialty Trend, Utilization and Cost: Specialty utilizers are up 6.5% and there are about 30 additional specialty users this quarter which means specialty plan paid that's up 3.2% overall. The primary driver for specialty continues to be autoimmune and the autoimmune category.
- KPI Summary – State of Maine: In Q4 of 2023 retirees had 269 fewer scripts, and eligible members were down 462. State of Maine's net per member per month totaled just over \$200 with an estimated \$3.2M taken off of plan paid.
- Top Therapeutic Classes: In Q4 of 2023 most of the classes were stable and the top three therapeutic classes were inflammatory disease, diabetes and asthma and COPD. There was movement in six class immunization which was up from the number 10 spot previously and this is likely due to seasonal activity.
- Top Drug Entities: Ranked by plan paid cost, the top drug entities are Stelara with an RX Count of 63, Humira(CF) Pen with an RX Count of 148, Ozempic with an RX Count of 610, Trikafta with an RX Count of 26, and Wegovy with an RX Count of 384.
- Glucagon-Like-Peptide-1 (GLP-1): The efficacy of these drugs have been shown to be superior. Quarter over quarter we have noted a steady increase in use of GLP-1 drugs for both diabetes and obesity. In Q4 of 2023 there were 988 members utilizing one of these drugs and as of Q3 2023, the plan paid \$2.5M.



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	<ul style="list-style-type: none"> • <u>Formulary Strategy Update, GLP-1 Medications</u>: Effective January 1, 2024, approval of GLP-1 medications (Byetta, Bydureon, Trulicity, Rybelsus, Ozempic, Mounjaro, Victoza) now requires a diagnosis of Type 2 Diabetes as this is the only FDA approved indication for these medications. 	
<p>e. State of Maine Health Plan – Medical Update – Anthem, Stefanie Pike</p>	<p>Highlights and discussion noted below:</p> <ul style="list-style-type: none"> • <u>Financials and Demographics</u>: Employees make up about 56% of your membership, driving 67% of your total plan spend, followed by spouses at 15% of membership driving 20% of cost and dependence at 29% of membership driving 13% of cost. • <u>Enrollment</u>: The State of Maine plan is 50% male, 50% female, both on the employee side and the total member side and the contract size is 1.8, below the benchmark of 2.2. • <u>Total Population Health</u>: During the reporting period of January 2023 through December 2023 there were 9.1% of non-utilizing members. In addition, 40.6% of members are listed as “healthy”, 6.5% of members were listed as “at risk”, 40.3% of members were listed as “critical”, and 3.4% of members were listed as “critical”. • <u>Executive Summary</u>: Per member per month trend is 6.6% over the prior 12 months. The top conditions were Cancer (11.7%), Health Status (10.6%) and Musculoskeletal (9.3%). Currently 40.3% of members are effected by chronic conditions and 21.9% of members had a behavioral health claim. There was an increase in Adult Wellness Compliance from 52.8% to 56.8%. • <u>Financials</u>: In November 2023 the total medical spend was down 16% from December to November at \$14.3M. State of Maines Rolling 12 Experience is trending really well and is up 6.6%. • <u>Insights on Medical Trend</u>: Per member per month, spend increased 7% in the current period. This was driven by a 9% increase in high-cost claimant spend and a 24% increase in injury and poisoning spend. 	



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- Place of Service: Inpatient makes up 21% of spend – up 19% per member per month, Outpatient makes up 41% of spend, Emergency makes up 8% of spend, and Professional makes up 30% of spend and there has been a 3% increase in the cost per visit.
- Non-High-Cost Claimants Top 5 Health Conditions Categories: Non-high-cost claimants top 5 health conditions categories include Health Status with 16.6% of spend, Ill-Defined Conditions with 10.3% of spend, Musculoskeletal with 10% of spend, Digestive with 8.9% of spend, and Behavioral Health with 8.6% of spend.
- Chronic Lifestyle Conditions: Obesity is on the rise, however the top falling chronic condition by prevalence is Lower back pain. Of the State of Maine member population 40% of members had a chronic condition which accounted for 62% of the total spend.
- High-Cost Claimants: High-cost claimants represented 2.3% of members and 44% of spend. High-cost claimants per member per month increased 9%, which was driven by a 2% increase in the number of claimants per 1,000 and 16% of high-cost claimants spend was for medical specialty drugs.
- Behavior Health: Behavioral health accounted for 6% of spend and 22% of membership. Per member-per-month spend increased 14% at \$10.6M and 45% of visits were via Telehealth.
- Primary Care Provider (PCP): In 2023 74% of members had a Primary Care Provider visit, up 1% of the previous year, while 42.5% of 18–26-year-old members did not have a Primary Care Provider visit at all.
- Preventative Care: Screening rates have increase in 8 out of 8 categories in 2023. Male wellness screening compliance has increased to 49% while women’s wellness screenings increased to 64%. Adult cancer screening compliance rates for breast cancer increased to 75%, cervical cancer increased to 52%, and colon cancer increased to 67%.



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- Engagement: Member engagement shows 2% of traditional engagement, 23.7% of care coordination and 93.4% of comprehensive engagement.
- Top 3 In-Network Facility Inpatient Providers: Top 3 in-network facility inpatient providers were Maine Medical Center with a paid amount of \$13.1M, MaineGeneral Medical Center with a plan paid amount of \$5.8M, and Northern Light Eastern Maine Medical Center with a plan paid amount of \$4.9M.
- Top 3 Emergency Department Providers by Paid Amount: The top 3 emergency department providers by paid amount are MaineGeneral Medical Center with 1,243 emergency room visits and claims totaling \$2.5M, Maine Medical center with 567 emergency room visits and claims totaling \$1.6M, and Northern Light Eastern Maine Medical Center with 252 emergency room visits and claims totaling \$1M.

VI. EDUCATION

a. Living Resources Program – Nathan Morse

Highlights and discussion noted below:

- Living Resources Program: The Living Resources Program is a single source for confidential support, expert information, and valuable resources when you need it most. This employee assistance program is available to members the first day of employment and is available to family members as well – 24 hours a day, 7 days a week. There are also additional resources available on guidanceresources.com.
- The HealthyGuidance Well-Being Coaching Program: This well-being program gives you the ability to meet with a coach on 21 different program topic for 5 sessions. Each well-being coaching session is customized around the participants unique needs, goals, and readiness for change.
- Learning and Organization Excellence Sessions – a.k.a. Training Requests: Trainings on over 100 personal development, work/life topics are- available through your Living Resources Program; on-site sessions or webinar. All sessions are designed to be 45-60 minutes and length. You must give 30 days' notice to schedule a training.



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- Critical Incident Stress Management Services: If there ever is a critical incident or an event that occurs where we might need to set up and have a counselor or some type of support service available to our team or individuals, we can simply call and request that through the Living Resources program.
- Maine First Responder Network – Living Resources Program: The Maine State Police have a unique volunteer program where they help employees do wellness resiliency checks. Maine State Police are looking for providers who have backgrounds in law enforcement, military and other service-oriented backgrounds and providing support.

VII. SEMI-ANNUAL UPDATES

a.

Highlights and discussion noted below:

- There is no Semi-Annual update this month.

VIII. OTHER BUSINESS

**a. Legislative Update –
Kristine Ossenfort**

Highlights and discussion noted below:

- L.D. 132, An Act to Require Health Insurance Carriers to Provide Coverage for Blood Testing for Perfluoroalkyl and Polyfluoroalkyl Substances (Sen. Stacy Brenner; D-Cumberland).
- L.D. 444, An Act to Designate First Responders and Other Public Safety Professionals as a Special Risk Population for the Purposes of Improving Insurance Coverage for the Effects of Trauma, Sen. Bailey (D-York).
- L.D. 663, An Act to Require Health Insurance Coverage for Pediatric Autoimmune Neuropsychiatric Disorders Associated with Streptococcal Infections and Pediatric Acute-onset Neuropsychiatric Syndrome (Rep. Amy Roeder; D-Bangor).
- L.D. 1577, An Act to Require Health Insurance Coverage for Biomarker Testing (Rep. Sam Zager; D-Portland).



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- L.D. 1832, An Act to Require Reimbursement of Fees for Treatment Rendered by Public and Private Ambulance Services (Rep. Scott Cyrway; R-Albion)
- L.D. 2203, An Act to Require Health Insurance Coverage for Federally Approved Nonprescription Oral Hormonal Contraceptives.
- L.D. 1165, An Act to Enhance Cost Savings to Consumers of Prescription Drugs (Rep. Margaret Craven; D-Lewiston).
- L.D. 1829, An Act to Reduce Prescription Drug Costs by Requiring Reference-based Pricing, Sen. Reny(D-Lincoln).
- L.D. 2096, An Act to Ensure Access to Nonopioid, Nonnarcotic Medication for Acute Pain Relief, (Sen. Jackson, D-Aroostook).
- L.D. 2114, An Act to Improve Patient Access to and Savings from Generic Drugs and Biosimilars, (Sen. Jackson, D-Aroostook).
- L.D. 796, An Act Concerning Prior Authorizations for Health Care Provider Services (Rep. Jane Pringle; D-Windham).
- L.D. 1533, An Act to Provide for Consistent Billing Practices by Health Care Providers (Rep. Josh Morris; R-Turner).
- L.D. 1740, An Act to Support an Insured Patient's Access to Affordable Health Care with Timely Access to Health Care Prices (Rep. Poppy Arford; D-Brunswick).
- L.D. 591, An Act to Provide Funding for Medicare Payments for Certain Retired State Employees.

b. Open Discussion

Highlights and discussion noted below:

- **Jonathan French states:** The Wellness Committee has not met in a while. We are looking to get something together in March. We do have a labor seat and management seat open.



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- **Breana Bissell Responds:** I would like to fill the role for the Management seat if the bylaws allow.
- **Jonathan French states:** We will have to look into it.

IX. REQUEST MOTION TO ADJOURN

a. X. Adjourn Meeting (11:56 am):

Rebekah Koroski made a motion to adjourn; Laurie Doucette seconded the motion. Motion passed.

2024 meeting schedule available at www.maine.gov/bhr/oeH