BOARD OF WATER COMMISSIONERS REGULAR MEETING OF MAY 22, 2023

REGULAR MEETING:

The regular meeting of the Board of Water Commissioners was held at the 438 Granby Road on Monday, May 22, 2023. Clerk R. Scott Williams called the meeting to order at 5:00 p.m.

ATTENDANCE:

Newly elected Commissioner

Clerk

Associate Member

Office Manager

Treasurer/Clerk

Resident

Eden DuPerier

R. Scott Williams

William L. Schenker

Jennifer Fernandes

Kari Scytkowski

Michael DuPerier

APPROVAL OF MINUTES:

William L. Schenker made a motion to approve the minutes of April 25, 2023. This motion was seconded by Eden DuPerier.

Motion Carried.

Mary Lou Guarnera

RE-ORGANIZATION OF THE BOARD:

William Schenker made a motion to reorganize the Board by ballot. This motion was seconded by R. Scott Williams.

Motion Carried

The ballot results are as follows (See Note 1):

Chairperson; 2 ballot votes for Eden DuPerier, 1 ballot vote for Scott Williams. Associate Member; 2 ballot votes for William Schenker, 1 ballot vote for Scott

Williams

Resident

Clerk; 1 ballot vote for Eden DuPerier, 1 ballot vote for William Schenker, 1

ballot vote for Scott Williams

Results: Chairperson: Eden DuPerier

Clerk: Scott Williams

Associate Member: William Schenker

BILLING CLERK INTERVIEW SCHEDULE:

Eden DuPerier opened up the discussion by saying she thinks that the Office Manager and Superintendent would be working the closest with the new hire so she thinks they should screen the candidates and the Board take their recommendations then the Board can interview the final picks. Kari Scytkowski asked how many applicants and how many were interviewed for previous positions. William Schenker suggested the Board each choose 2 applicants. Scott Williams thinks that someone who is great at technology would be a plus for the job. Kari Scytkowski said the low number of applicants is concerning as previous years a lot more candidates applied and suggested advertising to a broader audience. Scott Williams suggested advertising in the Springfield paper as he knows a lot of people who read it. William Schenker isn't crazy about readvertising and just wants to be fair to all. Eden DuPerier said that the she has been involved in many job searches that the position says it is open until filled. Eden stated the applicants that have applied will be considered along with any new applicants. Eden DuPerier knows it's a challenge for Jennifer but doesn't think this should be rushed and us end up with something that doesn't work out and have to start all over, then to get the very best candidate. After a brief discussion, the Board decided to readvertise the job to give everyone a chance.

Eden DuPerier made a motion to advertise the Billing Clerk job in the Springfield paper and on Indeed online with a deadline of June 12th. This motion was seconded by William Schenker.

Motion Carried William Schenker would like to modify the motion to add the wages or salary range in the advertisement. After a brief discussion, William Schenker made a motion to include the salary range in the advertisement. This motion was

Motion Carried

seconded by Eden DuPerier.

DENTAL INSURANCE DISCUSSION:

Jennifer Fernandes notified the Board the Treasurer, Kari Scytkowski has found that the employees and District may be able to save some money by changing the Dental plan from the current Guardian to Delta Dental and have better coverage. (See Note 2) Scott Williams said the Fire Fighters Union would like Option 2, but will accept Delta Option 1. Scott Williams said Delta Option 1 is about \$10,000 difference for the District. William Schenker said since when do we worry about the Union? That is the job for the Prudential Committee to recommend. Treasurer, Kari Scytkowski said Delta Option 2 is not \$10,000 more expensive, it is only about \$70 more. Kari said District 2 is choosing Delta Option 2 because it is close to what they everyone has now. Kari stated she suggests Delta option 1 because it saves everyone money (17.4 % reduction) and the coverage is the same if not better and this would help to offset the 6% increase in health this year. Kari spoke with a John Garish who would convert all of our plans and he said if employees didn't like Delta Option 1 then next year, we could switch to Delta Option 2. William Schenker made a motion to recommend Delta Dental Option 1 for the employees to the Prudential Committee. This motion was seconded by Scott Williams. Motion Carried

RESIDENT MARY LOU GUARNERA REQUEST:

Resident Mary Lou Guarnera said at the District Annual Meeting she felt that Mr. Williams made some very inappropriate remarks about reversing the pay raises and then turned his back on a fellow Board member and doesn't think he can be an effective Commissioner and she is calling for his resignation. William Schenker said the answer is if the people think you are wrong, they won't vote for you. Mary Lou said she thinks that Scott Williams could resign as that would be the right thing to do. Scott Williams stated he has not had any issues with anyone else and no one has said anything to him. Scott said other people agreed with a lot of things he was saying and they have to appreciate all the employees and be fiscally responsible and pay employees well and keep the rates down. Mary Lou thought it was very wrong for him to call to take away the water departments raise as they have saved hundreds of thousands of dollars by doing a lot of things in house instead of outsourcing. Scott said he wasn't here for the voting and didn't get to give his opinion and the other 2 Board members voted in favor of it. Scott thought people would be proud of him for trying to save money and spoke up for the people. William Schenker stated he wasn't proud of it and it should have been said in a regular meeting not at an Annual Meeting, and Scott said he would go along with what the Board voted, it was in the minutes. Mary Lou stated that Scott turned on his own people and that's not right. Eden DuPerier said moving forward she feels that the Board should act professionally and have integrity in the public eye as there was not a lot of integrity by some people up on that stage at the

Annual Meeting. Eden said it does not reflect well on us as a Board or for the people of South Hadley.

DISTRICT WEBSITE NOTIFY ME BUTTON:

Jennifer Fernandes notified the Board that the Treasurer, Kari Scytkowski added a "Notify Me' button a resident can sign up for notification of different district meetings. Kari Scytkowski said when a resident clicks the "Notify Me" button it gives options to choose what meetings you would like to notified of.

MONTHLY ANALYSIS & WATER RECIEPTS:

Jennifer Fernandes presented the Board with the April monthly analysis showing we billed \$406,401.64 and taken in \$320,647.82 as of the 25th leaving only \$94,846.28 balance. William Schenker said that is very good.

MOTION TO ADJOURN:

William L. Schenker made a motion to adjourn, which was seconded by Scott Williams.

Motion carried

ADJOURNMENT:

Meeting adjourned at 6:03 p.m.

BOARD OF WATER COMMISSIONERS

R. Scott Williams, Clerk

Chair - Scott Williams

Clerk - Eden Duperier

Agsociate Member-Wm. Schenker

chair Eden clerk Bill member scott

Chair: Eden

Clerk = Scott

Hember= Bill

Note 1 Minutes 5/22/2023

Delta Dental PPOSM Plus Premier

Visit deltadentalma.com for detailed benefit information

Coverage Summary for PPO Plus Premier – Option 1

Co-insurance

Co-insurance

Deductible: \$50 per individual / \$150 per family. Deductible does not apply for members under age 13.

Deductible waived for Diagnostic and Preventive categories.
Calendar Year Maximum: \$1,000 per person.

, ,		Members under		Members age 13	
		age 13		and older	
Category / Procedure	Qualifications	PPO Network	Premier and Out of Network*	PPO Network	Premier and Out of Network*
Diagnostic		100%	100%	100%	100%
Comprehensive Evaluation	Once every 60 months.				
Periodic Oral Exam	Twice every 12 months.				
Panoramic or Full Mouth X-rays	Once every 60 months.				
Bitewing X-rays	Twice every 12 months.				
Single Tooth X-rays	As needed.				
Preventive		100%	100%	100%	100%
Teeth Cleaning	Twice every 12 months.				
Fluoride Treatments	Twice every 12 months for members under age 19.				
Space Maintainers	Required due to the premature loss of teeth. For members under age 14 and not				
Continue	for the replacement of primary or permanent anterior teeth.				
Sealants	Unrestored permanent molars, every 4 years per tooth for members through age 15. Sealants also covered for members age 16 up to age 19 with a recent cavity				
	and are at risk for decay.				
Restorative	and are arrible to access	100%	100%	85%	80%
Silver Fillings	Once every 24 months per surface per tooth.				0070
White Fillings	Once every 24 months per surface per tooth.				
Inlays	Once every 60 months per tooth, inlays are processed as a silver filling and the				
and model ≠ pates.	patient is responsible for the difference between the silver filling and the Delta				
	Dental negotiated fee for an inlay, where permitted by state law. In other states,				
	the patient may be responsible for paying up to the provider's full submitted		/		
	charge for an inlay.				
Protective Restorations	Once per tooth.				
Stainless Steel Crowns	Once every 24 months per tooth (on primary teeth only).				
Oral Surgery		100%	100%	85%	80%
Extractions	Once per tooth.				
General Anesthesia	General Anesthesia and IV sedation allowed with covered surgical impacted wisdom teeth only (up to one hour).				
Periodontics (on natural	wisdom teeth only (up to one hour).	100%	100%	85%	80%
teeth only)		10070	10070	0570	3070
Periodontal Surgery	One surgical procedure per quadrant in 36 months.				
Scaling and Root Planing	Once in 24 months, per quadrant. No more than 2 quadrants per date of service.				
Periodontal Cleaning	4 times every 12 months following active periodontal treatment. Not to be	100%	100%	100%	100%
3	combined with preventive cleanings.				
Bone Grafts/GTR	No more than 2 teeth per quadrant per 36 months on natural teeth.				
Endodontics	L L	100%	100%	85%	80%
Root Canal Treatment	Once per tooth.				
Root Canal Retreatment	Once per tooth after 24 months have elapsed from initial treatment.				
Vital Pulpotomy	Limited to deciduous teeth.	=			
Prosthetic Maintenance		100%	100%	85%	80%
Bridge or Denture Repair	Once per bridge/denture per 12 months, after 24 months of initial insertion.	- 22			20 2200
Crown or Onlay Repair	Once per tooth per 12 months after 24 months of initial placement.				
Rebase or Reline of Dentures	Once per denture within 36 months.				
Recement of Crowns and	Once per crown, onlay or bridge.				
Onlays, Bridges					
Emergency Dental Care		100%	100%	85%	80%
Palliative Treatment	Three occurrences in 12 months.				
Prosthodontics		100%	100%	55%	50%
Dentures	Once within 60 months (age 16 and older).				
Fixed Bridges	Once within 60 months (age 16 and older).				
Implants	Once per 60 months per Implant. (Pre-estimate recommended).				
26	(Pre-estimate recommended).				
Implant Abutments	Once per implant only when surgical implant is benefitted.				

Note 2 Minutes 5/22/2023

		Co-insurance Members under age 13		Co-insurance Members age 13 and older	
Category / Procedure	Qualifications				
		In Network	Out of Network*	In Network	Out of Network*
Major Restorative		100%	100%	55%	50%
Crowns or Onlay	When teeth cannot be restored with regular fillings. Once within 60 months per tooth (age 12 and older).	***************************************			
Cast Posts/Buildups	Once per tooth per 60 months only benefitted to retain a crown.	- April - Apri			
Orthodontics: Covered at 50% of administered/supervised by a lic	f Maximum Plan Allowance charges up to age 19. \$1,000 separate LIFETIME maximum.	Orthodontic tre	eatment must	be	

Additional Benefit Information

Deductible waived for periodontal cleanings.

Dependent Eligibility - Dependents to 26

This plan is eligible for Rollover Max. See the benefit guide for details.

Ask your dentist to submit a pre-treatment estimate to Delta Dental for any procedure that exceeds \$300. This will help you estimate any out-of-pocket expenses you may incur and will confirm that the services are covered under your dental coverage.

*Non-participating dentists may balance bill. Subscribers are responsible for the difference between the non-participating maximum plan allowance and the full fee charged by the dentist.

Delta Dental PPO Plus Premier



Easy Access and Great Value -Your Delta Dental Networks

As a Delta Dental PPO *Plus Premier* subscriber, you have access to two of Delta Dental's extensive national networks—Delta Dental PPO, with more than 283,000 dentist locations and Delta Dental Premier, the largest dental network in the country with more than 358,000 dentist locations. Three out of four dentists nationwide participate in one or both of these networks.

You will enjoy great benefits when you receive your dental care from a participating dentist in either the Delta Dental PPO or Delta Dental Premier networks.

- Both networks offer discounted fees and a no balance billing policy.
- You will receive good value from Delta Dental Premier network dentists who generally accept discounted fees, but will be subject to the out-of-network co-insurance level shown on the front of this summary.
- You will enjoy the greatest savings when visiting Delta Dental PPO network dentists and will receive the in-network co-insurance level shown on the front of this summary.

If you choose to receive services from a non-participating dentist, you will have higher out-of-pocket costs as the Delta Dental contract rates and the no balance billing policy do not apply.

Delta Dental members can also take advantage of expanded discounts on many covered services, even after they have used up their benefit dollars, visit limits and other situations. Get the details at http://www.deltadentalma.com/members/discounts-on-covered-services/

Simply visit **www.deltadentalma.com** to find a participating dentist in your area.

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Learn more at deltadentalma.com

Visit the member area of **www.deltadentalma.com** to find plan information, review eligibility status, check on claim status, or find a dentist. If you have any questions or need additional information, you can call customer service at 1-800-872-0500.

You can also find more information about your plan in the Delta Dental Member Guide, available from your benefits administrator or online at www.deltadentalma.com. In the guide, you can learn how to use your benefits, how to find a dentist or specialist, how to access online resources, and more about keeping a healthy mouth for life.

The information on this coverage summary should be used only as a guideline for your dental benefits plan. For detailed information on your group's plan, riders, terms and conditions, or limitations and exclusions, refer to your plan's Subscriber Certificate, which is available through your benefits administrator.

Your Plan is Administered by: **Delta Dental of Massachusetts** 1-800-872-0500 www.deltadentalma.com

465 Medford Street Boston, MA 02129 0.000 1000 0.000

Delta Dental PPOSM Plus Premier

Visit deltadentalma.com for detailed benefit information

Coverage Summary for PPO Plus Premier - Option 2

Deductible: \$50 per individual / \$150 per family. Deductible does not apply for members under age 13. Deductible waived for Diagnostic and Preventive categories.

Calendar Year Maximum: \$1,500 per person. Co-insurance Co-insurance

Calendar Year Maximum: \$1,	ndar Year Maximum: \$1,500 per person.		Co-insurance		Co-insurance	
		Members under age 13		Members age 13 and older		
Category / Procedure	Qualifications	PPO Network	Premier and Out of Network*	PPO Network	Premier and Out of Network*	
Diagnostic		100%	100%	100%	100%	
Comprehensive Evaluation	Once every 60 months.					
Periodic Oral Exam	Twice every 12 months.					
Panoramic or Full Mouth X-rays	Once every 60 months.					
Bitewing X-rays	Twice every 12 months.					
Single Tooth X-rays	As needed.		î .			
Preventive		100%	100%	100%	100%	
Teeth Cleaning	Twice every 12 months.		757.62			
Fluoride Treatments	Twice every 12 months for members under age 19.					
Space Maintainers	Required due to the premature loss of teeth. For members under age 14 and not					
Space Maintainers	for the replacement of primary or permanent anterior teeth.					
Sealants	Unrestored permanent molars, every 4 years per tooth for members through age					
Sealarits	15. Sealants also covered for members age 16 up to age 19 with a recent cavity					
	and are at risk for decay.					
Restorative		100%	100%	85%	80%	
Silver Fillings	Once every 24 months per surface per tooth.					
White Fillings	Once every 24 months per surface per tooth.	1				
Inlays	Once every 60 months per tooth, inlays are processed as a silver filling and the					
inays	patient is responsible for the difference between the silver filling and the Delta		1			
	Dental negotiated fee for an inlay, where permitted by state law. In other states,	9				
	the patient may be responsible for paying up to the provider's full submitted					
	charge for an inlay.					
Protective Restorations	Once per tooth.					
Stainless Steel Crowns	Once every 24 months per tooth (on primary teeth only).					
Oral Surgery		100%	100%	85%	80%	
Extractions	Once per tooth.	10070	10070	3370	0070	
General Anesthesia	General Anesthesia and IV sedation allowed with covered surgical impacted					
General Anesthesia	wisdom teeth only (up to one hour).					
Periodontics (on natural	modern teeth only tup to one hours.	100%	100%	85%	80%	
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Periodontal Surgery	One surgical procedure per quadrant in 36 months.					
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		1000/	1000/	1000/	1000/	
Periodontal Cleaning	4 times every 12 months following active periodontal treatment. Not to be	100%	100%	100%	100%	
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Bone Grafts/GTR	No more than 2 teeth per quadrant per 36 months on natural teeth.					
Endodontics		100%	100%	85%	80%	
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Rebase or Reline of Dentures	Once per denture within 36 months.					
Recement of Crowns and	Once per crown, onlay or bridge.					
Onlays, Bridges	- t - 314 2 4 3000 M32					
Emergency Dental Care		100%	100%	85%	80%	
Palliative Treatment	Three occurrences in 12 months.	100/0	100/0	5570	2070	
Prosthodontics	THEC COMMENCES IN 12 MORNIS.	100%	100%	E E 0/	E00/	
	Ones within 60 ments (16 1-14)	100%	100%	55%	50%	
Dentures	Once within 60 months (age 16 and older).					
Fixed Bridges	Once within 60 months (age 16 and older).					
Implants	Once per 60 months per Implant. (Pre-estimate recommended).					
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Category / Procedure			Co-insurance Members under age 13		Co-insurance Members age 13 and older	
	Qualifications	In Network	Out of Network*	In Network	Out of Network*	
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