



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, March 21st, 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, Diane Bailey, Lois Baxter, Cecile Champagne-Thompson, Lynn Clark, Kevin Dionne, Laurie Doucette, Jonathan French, Kelly John, Rebekah Koroski, Doris Parenteau, Shonna Poulin-Gutierrez, Heidi Pugliese, JoAnne Rawlings–Sekunda, Kim Vigue, Frank Wiltuck, and Nathaniel Zmek.
(Total = 17)

Commission Members Absent: Claire Bell, Danielle Murphy, Lew Miller, Heather Perreault, and Chris Russell.

Vacant Seat(s): 2

Others Present: Paige Lamarre, Devon French, Charles Luce, Nathan Morse, Roberta DuPont, and Emma-Lee St.Germain – Employee Health and Wellness; Breena Bissell – Bureau of Human Resources (Co-Chair); Sabrina DeGuzman-Simmons and Kevin Fenton – Aetna; Kathryn Caiazzo, Kristine Ossenfort, and Becky Craigue – Anthem Blue Cross and Blue Shield; Libby Arbour and Kristin Poulin – MCD Global Health; Judy Paslaski – MedImpact; Marie Bridges – Northeast Delta Dental; Amy Deschaines, Terry LaMonica, Ken Ralff, Kim Greenburg, and Jacqueline Scherer – Lockton; Trevor Putnoky and Lisa Nolan – Health Purchasers Alliance; Joe Miller and Corey O’Brien – Novo Nordisk; and Cindy Walsh – Humana.

Agenda Item	Discussion	Action/Next Steps
I. Call Meeting to Order (8:32 am)	Jonathan French called the meeting to order. Breena Bissell acts as Management Co-Chair in Heather Perreault’s absence.	
II. Introductions		
III. Review and Approval of Minutes (February 15th, 2024)		Kevin Dionne made a motion to accept the February 15 th , 2024, minutes as amended; Frank Wiltuck seconded the motion. Kelly John abstains. 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:

Medical Highlights –

Anthem:

- Top 5 Per Member Per Month Changes (02/2023 – 01/2024): The top 5 per member per month changes by condition from 02/2023 to 01/2024 include Cancer (+\$9.77), Injury and Poisoning (+\$8.76), Respiratory (+\$5.24), Health Status (+\$5.18), and Musculoskeletal (-\$7.65).
- Place of Service Spend (02/2023 – 01/2024): Place of service spend from 02/2023 to 01/2024 are Inpatient with 21.7% of spend, Outpatient with 40.7%, Emergency with 7.8%, and Professional with 29.9%.

Aetna:

- Top 5 Diagnoses – Claims Paid (12/01/2022 – 11/30/2023): The top 5 diagnoses claims paid from 12/01/2022 through 11/30/2023 include Cardiac (Claims Paid: \$14M), Oncologic (Claims Paid: \$12.2M), Musculoskeletal (Claims Paid: \$10.7M), Neurologic (Claims Paid: \$7.2M), and Digestive (Claims Paid: \$6.2M).
- Silver Sneakers Engagement: Silver Sneakers engagement as of November 2023 shows 9,610 eligible members with 21.4% retirees enrolled and 7.2 average visits per participant.

Rebekah Koroski states: ASIFlex is saying the receipts from the doctor are not sufficient.

Shonna Poulin-Gutierrez responds: I am happy to take that offline and look into that.

Jonathan French asks: How many openings do we have on committees?

Devon French responds: Of the 6 committees, there are 3 vacancies.

Kevin Dionne states: If you need someone for the Wellness Committee, you can put me down for Labor.



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Dental Highlights –

- Utilization Claims Summary (03/01/2023 – 02/29/24): Utilization claims summary for the period of 03/01/2023 to 02/29/2024 show Diagnostic and Preventative (\$3.9M), Basic Restorative (\$2.2M), Major Restorative (\$9.2K), and Orthodontics (\$3.4K).

Pharmacy Highlights –

- KPI Summary – January 2024 vs. January 2023: In 2024 there were 22,949 prescriptions while in 2023 there were 21,469. Total costs increased from \$6.2M in 2023 to \$6.8M in 2024. Generic Substitutions increased about 3% from 2023 to 2024.

Wellness Highlights –

Hinge Health:

- Program Engagement: In 2023, 228 members utilized Hinge Health. There were 34 plan member that utilized the program in 2024, thus far 821 plan members have accessed the program since its launch in 2022.

Wondr Health:

- Program Engagement: The Wondr Health Program started February 19th, 2024. There are 489 participants accepted into the program including 459 employees, 28 spouses, and 2 adult dependents.

Communications Highlights –

- Carrum Health and Hinge Health Webinar: Our office hosted a webinar with Carrum Health and Hinge Health on February 20th. We had 77



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participants join and since then we have added the recoding of the webinar to our website.

- New Flex Spending Account Vendor: A letter was mailed to 2023 Flex Spending Account plan members who did not enroll in the 2024 Flex Spending Account plan, to inform them of how they can access their 2023 roll-over funds through ASIFlex. We are currently working on updating the Frequently Asked Questions (FAQ) webpage.
- Constant Contact: There were 4 campaigns distributed with Constant Contact in February of 2024. The Wondr Health promotion had 12,027 recipients and an open rate of 41%. The American Heart Month promotion had 12,005 recipients and an open rate of 40%. The Carrum Health and Hinge Health Webinar promotion had 12,864 recipients and an open rate of 45%, and the 2024 Health Premium Credit Program promotion had 10,236 recipients and an open rate of 45%.

Vendor Communications –

- Anthem: Due to a third-party vendor security incident, impacted Anthem members received a letter and frequently ask questions document that was mailed on 02/29/2024

Contract Highlights –

- Ongoing Pharmacy Benefit Manager administrator implementation continues. We've started looking at all of the communication components that will go out to members and they'll be informed once Open Enrollment is open.

c. Committee Update

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

- Plan Design** (Chair, Lockton)
 - Renewal Summary: Plan Design has proposed the following updates/changes to the plan –

Heidi Pugliese states: We (Maine Maritime Academy) are very interested in participating in the Wellness Wallet and are looking forward to more information on how



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- Medical/Pharmacy – The final working rate increase for July 1, 2024: +6.4%, and we will eliminate the 4th Quarter Deductible Carryover. We should sign a new contract with Anthem (Medical), and a enter into a new contract with Capital Rx (Pharmacy).
- Dental – There should be a final working rate increase for July 1, 2024: +2.2% and we need to add coverage for cone beams.
- Carrum – We should add an oncology bundle to the voluntary list.
- SmartLight – We should proceed with Proof-of-Concept.
- Virta – We should initiate an implementation pilot.
- Infertility – We should comply with the State mandate to include cycle limits and expand coverage language to be more inclusive.
- Wellness Wallet – We should expand the pilot program through ThrivePass.
- 2024-25 Medical/Pharmacy Renewal: With claims data through December 2023, Lockton is projecting a 7.6% increase (\$19.4M) to the working rates. Key assumptions show the trend at 5.5% Medical and 9.5% Pharmacy, and no margin. There’s an additional 0.9% increase to working rates associated with higher utilization and cost of weight-loss drugs and a stop loss place holder of +20%. This includes adjustment for infertility mandate.
- 2024-25 Budget and Plan Program Decisions: Plan design considerations and how they fit into the budget include eliminating the fourth quarter deductible carryover, looking at benchmarks and what

the ancillary groups can be rolled into the plan.

Nathan Morse Responds: I have that noted.

Rebekah Koroski made a motion to accept the recommendations of the Plan Design Committee for July 1, 2024.

Implement the medical working rate increase of +6.4%, Eliminate 4th Quarter Deductible Carryover, implement the dental working rate increase of +2.2%, add coverage for cone beams, the addition of an oncology bundle to the voluntary list with Carrum, add a Proof-of Concept with SmartLight, implement a Virta pilot, comply with State infertility mandate to include cycle limits, expand coverage language to be more inclusive for infertility and expand the pilot program through ThrivePass.

Heidi Pugliese seconded the motion. Motion passed.



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the majority of the marketplace is doing as well as the cost to the plan.

- Infertility Coverage: An Act to Provide Access to Fertility Care P.L. 2022, Chapter 692 (130th L.D. 1539)* Requires coverage for fertility diagnostic care, fertility treatment if the enrollee is a fertility patient, and certain fertility preservation services. In addition, the State mandate and enhanced coverage language is to be more inclusive.
- Cardiometabolic Management Opportunity – Virta: Cardiometabolic diseases are a cluster of disorders that are interrelated in terms of some of the precursory risk factors that eventually progress to diabetes, heart disease and other end stage conditions. There are currently no solutions for diabetes remission in our suite of wellness offerings. This is where Virta can assist.
- Virta Remission Outcomes: Virta shows one year completers experience, on average, a 1.3% decrease in A1c, a 59% decrease in prescription medication utilization and weight loss of, on average, 31 pounds.
- Wellness Wallet – (ThrivePass Update):
 - Phase I Pilot Results: In Phase I of the Wellness Wallet pilot there was a 77% participation rate with an average of \$191.58 out of \$200 participants redeemed.
 - Expansion Plans: During Open Enrollment, active employee health plan subscribers can select enrollment in the Wellness Wallet lifestyle spending account benefit through PRISM. Employees must complete the required health engagement and preventive care actions to be eligible to receive the Wellness Wallet subsidy.
- 2024-25 Dental Program: With claims data through December 2023, Lockton is projecting an increase to premium rates of +2.2% (\$179K).



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- Key assumptions show a trend of 1.0%, no margin, an amin fee of \$3.99 per employee per month and an additional +0.4% increase to working rates associated with come beam imaging. The Plan Design committee’s recommendation is to increase the dental working rates by 2.2% and add cone beam imaging.
- Carrum – Centers of Excellence Partnership: Carrum has a new partnership with New England Cancer Specialists (NECS), and the Plan Design committee’s recommendation is to add the Oncology bundle to Carrum’s current voluntary list.
- SmartLight – Plan Fiduciary Responsibilities: Healthcare experts have estimated that 25% of total healthcare spending goes to unnecessary, ineffective, overpriced, and wasteful services. SmartLight Plan Fiduciary Responsibilities combat fraud, waste, and abuse. The Plan Design committee’s recommendation is to move forward with a Proof-of-Concept analysis with findings to be reviewed upon receipt to determine feasibility of ongoing monitoring.

V. QUARTERLY PLAN UPDATES

a.

Highlights and discussion noted below:

- There are no quarterly plan updates this month.

VI. EDUCATION

a. Cardiometabolic Risk Management – *Kim Greenburg and Nathan Morse*

Highlights and discussion noted below:

- Cardiometabolic Disorders: Cardiometabolic disorders represent a cluster of interrelated risk factors -primarily hypertension (blood pressure), elevated fasting blood sugar, dyslipidemia (elevated triglycerides, abnormal cholesterol levels) and abdominal obesity.



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- Common Cardiometabolic Disorders include Hyperlipidemia, Hypertension, Diabetes, Coronary Artery Disease, Chronic Kidney Disease, and End State Renal Disease.
- Cardiometabolic Disorders Stats:
 - Market Trends: 53% of employers offer condition specific disease management. This could grow to 77% in 2024.
 - National Data: An estimated 47M people in the U.S. are living with Cardiometabolic Disorder (CMD).
 - Disparities in Risk: The black, indigenous, and other people of color community is disproportionately impacted by cardiometabolic disorders.
 - Lockton Data: Cardiometabolic Disorders stats account for 3 of the top 10 conditions by member prevalence, Hypertension, Hyperlipidemia, and Diabetes.
- State of Maine Cardiometabolic Population Health Insights: The total Cardiometabolic spend at \$127M and the average paid amount exceeds the norm. End stage Renal Disease is the top spend condition with an average paid of \$127K with currently 36.0% of members with a cardiometabolic condition. Diabetes prevalence and spend exceeds the norms; costs increase with a greater number of co-morbidities.
- State of Maine Cardiometabolic Disorder Progression: Some members only have hypertension, which might progress to diabetes, hyperlipidemia, and hypertension if they're not managing those conditions, or they don't have some sort of lifestyle management in place. If that continues to progress, we start to see end stage conditions that can be very costly, like coronary artery disease or heart disease, chronic kidney disease and then the most costly being stage renal disease with costs upwards of \$100K.
- Risk Management and Cost Containment Strategies: When we look at the offerings and consider our options, we think that we have a lot of opportunity to help prevent our members from progressing towards higher cost, and more complex risks. Currently there are offerings for prevention, management, and



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high-risk complex cases, however Virta is the only solution that would offer a chance at remission.

- Virta Health Overview: More intensive than Livongo, Virta Health offers nutritional therapy as well as advanced telehealth. Virta focus' on managing conditions through medication compliance, using tools and technology like remote monitoring, as well as helping them set reminders as well as scales and tools to help them.
- Measurable Outcomes to Determine Success: Success really depends on what the goal is for intervention. If the goal is weight loss and avoiding a future cardiometabolic diagnosis we would be looking at it from a metric standpoint – for example, are they improving their biometrics? With a solution like Virta, we would be looking for improved metrics and productivity.

VII. SEMI-ANNUAL UPDATES

**a. MCD Wellness Program –
Libby Arbour & Kristin
Poulin**

Highlights and discussion noted below:

- Vaccination Clinics: In 2023 there were 86 vaccination clinics with 1,985 flu vaccines and 905 COVID-19 vaccines administered. There were an additional 5 vaccines administered categorized as "other."
- Health Navigation Model: In 2023 there were 58 Health Navigation Dates with 356 participants reached, and 1,462 resources distributed.
- Participant Feedback Survey: In the past 4 years, Health Navigation Appointment participants have rated their health navigation experience as "10-excellent."
- WellStarME Mid-Year Totals:
 - Activated WellStarME Registrations: Activated WellStarMe Registrations as of March 1st of each Program year are:
 - 2021 – 17,024 Individuals Registered
 - 2022 – 18,146 Individuals Registered
 - 2023 – 19,998 Individuals Registered



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- 2024 – 20,505 Individuals Registered
- Number of Primaries Eligible for the Health Premium Credit Program on March 1st of each Program Year:
 - 2021 – 2,037
 - 2022 – 3,149
 - 2023 – 3,649
 - 2024 – 3,324
- 2024 My Health Options: The 2024 My Health Options midyear totals are:
 - Health Navigation – 356
 - My Numbers – 470
 - Flu Shot – 1,916
 - Annual Physical Exam – 1,453
 - Well-Being Visit – 730
- “My Health” Options Comparison, 2023-2024: From 2023 to 2024 there was a 35% decrease in the completion of the Dental Visit in 2023 verses completing the Annual Physical Exam in 2024. There was also a 6.4% decrease in Video completion and a 7.4% decrease in Wellness Questionnaires completed.
- Mid-Year Totals: The total number of resources accessed on the WellStarME Resource Hub was 16,679, and the total number of participants utilizing the Message Center feature was 357.
- Headspace Pilot:
 - Important Update: The one-year extended Headspace pilot ended on November 30, 2023, at 11:59pm. There were 954 members that participated in this pilot with the key areas of use being sleep and meditation.
 - Feeling Nervous or Stressed: Pre-Survey 4.42% of participants almost never felt nervous or stressed. Post-survey that number increased to 16.75% of individuals.



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- Trouble Sleeping: Pre-Survey 26.51% of participants almost never had trouble sleeping. Post-survey that number increased to 34.52% of individuals.
- Pre-Survey Questions - Practicing Mindfulness Techniques: Pre-Survey 26.91% of participants almost never practiced mindfulness techniques. Post-survey that number decreased to 10.15% of individuals.
- Current Wellness Programs: Current Wellness Programs include:
 - Enhanced WellStarME Platform
 - Health and Wellness Navigation Team
 - Self-Monitoring Blood Pressure Program
 - National Diabetes Prevention Program
 - Vaccination Clinics
 - Health and Wellness Pilot Programs
 - Wellness Presentations
 - Monthly Signage Program
 - Customized Health and Wellness Resources
 - Employee Resource Toolkits
 - Health Navigation Model
 - Comprehensive Health and Wellness Resource Hub
 - Secure Messaging Center

VIII. OTHER BUSINESS

a. Legislative Update – Lisa Nolan

Highlights and discussion noted below:

Updates:

- The 2nd year of the 131st Legislature is scheduled to adjourn on April 17th.
- Similar to past years, the session may extend beyond the scheduled adjournment date, as hundreds of bills are still awaiting floor consideration.



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- In addition to 482 carryover bills, the Legislature is considering 253 new bills introduced this year
- The Committee on Health Coverage, Insurance and Financial Services considered and reported out over 20 bills of interest this year, including both carryover and new bills ..
- Most of those bills are awaiting House and Senate floor votes.

Mandates:

- 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).
- 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.

Pharmacy:



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- L.D. 1165, An Act to Enhance Cost Savings to Consumers of Prescription Drugs (Rep. Margaret Craven; D-Lewiston).
- L.D. 1793, Resolve, Directing the Department of Health and Human Services to Contract for Discounted Insulin Manufactured and Distributed by Civica Rx (Sen. Troy Jackson; D-Aroostook)
- L.D. 1829, An Act to Reduce Prescription Drug Costs by Requiring Reference-based Pricing, Sen. Reny(D-Lincoln).
- L.D. 2114, An Act to Improve Patient Access to and Savings from Generic Drugs and Biosimilars, (Sen. Jackson, D-Aroostook).

Provider Authorizations and Other Provider/Carrier Issues:

- L.D. 796, An Act Concerning Prior Authorizations for Health Care Provider Services (Rep. Jane Pringle; D-Windham).
- L.D. 2151, An Act Regarding the Cost of Copies of Medical Records (Rep. Margaret Craven; D-Lewiston)
- L.D. 1407, An Act to Amend the Maine Insurance Code Regarding Payments by Health Insurance Carriers to Providers (Rep. Anne-Marie Mastraccio; D-Sanford)
- L.D. 1498, An Act to Create an Advocacy and Complaint Process for Health Care Providers Within the Bureau of Insurance (Rep. Anne Perry; D-Calais)
- L.D. 1533, An Act to Provide for Consistent Billing Practices by Health Care Providers (Rep. Josh Morris; R-Turner).
- L.D. 1708, An Act to Address Anticompetitive Terms in Health Insurance Carrier and Health Care Provider Contracts (Rep. Josh Morris; R-Turner)

Transparency and Consumer Protections:



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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. 2271, An Act to Implement the Recommendations of the Task Force to Evaluate the Impact of Facility Fees on Patients to Improve Facility Fee Transparency and Notification and to Prohibit Facility Fees for Certain Services (Committee Bill)

L.D. 1955, An Act to Require Hospitals and Hospital-affiliated Providers to Provide Financial Assistance for Medical Care (Rep. Rachel Talbot Ross; D-Portland)

L.D. 2115, An Act to Require Health Care Providers to Engage in Fair Practices When Selling Medical Debt (Sen. Mike Tipping; D-Penobscot)

State Employee Health Plan Specific Bills:

- L.D. 111, An Act Requiring the State to Pay a Share of a Retired State Employee's or Retired Teacher's Premium for Medicare Part B Under Medicare Advantage
- L.D. 121, An Act to Expand Health Insurance Coverage to Certain State Employees
- L.D. 362, An Act to Clarify Coverage for Retired County and Municipal Law Enforcement Officers and Municipal Firefighters Under the State Employer Group Health Plan
- L.D. 591, An Act to Provide Funding for Medicare Payments for Certain Retired State Employees
- L.D. 733, An Act to Require an Annual Itemized Statement of Employee and Retirement Benefits and Total Employer Contributions to the Maine Public Employees Retirement System and Health Insurance Plans for State Employees and Teachers



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- L.D. 882, An Act to Allow Nonmunicipal Emergency Medical Service Providers to Participate in the Maine Public Employees Retirement System and State Benefit Program
- L.D. 1152, An Act to Make Long-term Disability Insurance Coverage Available to Public Employees

b. Open Discussion

Highlights and discussion noted below:

- **Kevin Dionne states:** I have received several concerns with Carrum and Anthem not being available in Bangor. I don't know what time timeframe is to see if anything is going to be moved north of Lewiston. Anthem will not cover surgeries that are not done at a Center of Excellence.
- **Heidi Pugliese states:** I will second the concerns with the long distance to the Carrum facility for our employees.
- **Jonathan French responds:** We will be hearing from Carrum next month, so that would be a great place to raise these questions. It is currently a mandate that these conditions be treated through Spectrum.
- **Shonna Poulin Gutierrez states:** We do have a self-insured plan so Anthem denying something is part of our plan design. The intent is not to create barriers, it is to get employees timely care. I would encourage health plan members to reach out for these difficult situations. If you have questions, send our office an email and we can make sure that it is included in upcoming presentations.
- **Frank Wiltuck states:** As these decisions are being made, that are discussed, agreed to, and voted on, it is important that we are advocating for all groups early in that process as we go.
- **Jonathan French suggests:** I do want to have a conversation regarding commission members have been looking for contracts with the vendors. We



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have not yet established a protocol to access that information and I do want to make sure we have this in place.

- **Jonathan French states: I also want to remind** folks to respond to the doodle poll so we can get the results as soon as possible.
- **Breana Bissell asks:** Can the bylaws committee look into the protocol to access contracts with vendors?
- **Jonathan French responds:** Possibly!
- **Heidi Pugliese asks:** Is there still an opening on the wellness committee? I would like to join as management.
- **Jonathan French states:** Great, we have not filled that management position yet.

IX. REQUEST MOTION TO ADJOURN

a. X. Adjourn Meeting (11:41 am):

Frank Wiltuck made a motion to adjourn; Kevin Dionne seconded the motion. Motion passed.

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