



Janet T. Mills
Governor

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

Jonathan French
Labor Member, Co-Chair

Michael Dunn
Management Member, Co-Chair

STATE EMPLOYEE HEALTH COMMISSION MEETING

**Thursday, January 16, 2025 @ 8:30am
Microsoft Teams Meeting**

Department of Labor
45 Commerce Drive, Francis Perkins Conference Room
Augusta, ME 04330

Commission Members in Attendance: Olivia Alford, Lois Baxter, Jenny Boyden, Cecile Champagne-Thompson, Kevin Dionne, Laurie Doucette, Michael Dunn, Jonathan French, Joan Hanscom, Christopher Ike, Kelly John, Rebekah Koroski, Danielle Murphy, Doris Parenteau, Shonna Poulin-Gutierrez, Heidi Pugliese, Joanne Rawlings–Sekunda, Frank Wiltuck and Nathaniel Zmek.
(Total = 19)

Commission Members Absent: Claire Bell, Lynn Clark, Chris Russell and Kim Vigue.

Vacant Seat(s): 2

Others Present: Roberta Dupont, Neva Parsons, Paige Lamarre, Devon French, Charles Luce, Rebecca Adams, Emily Charlton and Nathan Morse – The Office of Employee Health, Wellness, and Workers’ Compensation; William Savage – Department of the Attorney General; Kevin Fenton and Sabrina DeGuzman Simmons – Aetna; Kristine Ossenfort, Becky Craigie, Katherine Caiazzo and Anne Rowles – Anthem Blue Cross and Blue Shield; Deborah Palmer - Living Resources Program; Libby Arbour and Kristin Poulin – MCD Global Health; Amy Deschaines, Kim Greenberg, Ken Ralff, Mark Holloway, Jacqueline Scherer, Katarina Norat, and Ed Pierce – Lockton; Trevor Putnoky and Lisa Nolan – Health Purchasers Alliance, Marie Bridges – Northeast Delta Dental, Avni Dosh – Capital Rx

Agenda Item	Discussion	Action/Next Steps
I. Call Meeting to Order (8:37 am)	Labor Member, Jonathan French, called the meeting to order.	
II. Introductions		
III. Review and Approval of Minutes (November 21st, 2024)		Labor Member, Kevin Dionne made a motion to approve the November 21 st , 2024, minutes. Management Member, Michael Dunn seconded the motion. Motion approved.



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IV. Recurring Monthly Business

<p>a. Open Discussions/Questions on Vendor Reports – All</p>	<p>Information contained in written report; highlights and discussion noted below:</p> <ul style="list-style-type: none"> • Labor Member, Jonathan French, referenced the \$20M medical claims presented at the November commission meeting, asking Lockton what this trend shows and where the State is headed on the plan year. Lockton responded that claims on the health plan side for the month of October into mid-November were held by Anthem as they were negotiating contracts with Northern Light and MaineHealth. This made October claims artificially low. Claims were released mid-November and the numbers rebounded. 	
<p>b. The Office of Employee Health, Wellness, and Workers’ Compensation Highlights - Shonna Poulin-Gutierrez</p>	<p>Information contained in written report; highlights and discussion noted below:</p> <p>Wellness Highlights –</p> <ul style="list-style-type: none"> • <u>Wellness Wallet Pilot</u>: Open enrollment for Wellness Wallet was held November 8 – November 22, 2024. Of the 1,096 applications received, 1,033 were confirmed to be eligible. ThrivePass sent registration emails to eligible members on January 2, 2025, and the program has officially started. • <u>2025 Health Premium Credit Program</u>: Approximately 3,300 eligible members have completed the 2025 Health Premium Credit Program requirements at the end of December 2024. • <u>Virta Health</u>: Member engagement for 2.5 months of services was 832. There are 313 total members enrolled and of these 282 are in Obesity Prevention, 31 are in Type 2 Diabetes Reversal, and 143 remain in the Enrollment Funnel. <p>Communication Highlights –</p> <ul style="list-style-type: none"> • <u>Flexible Spending Account and Wellness Wallet Pilot Program</u>: Communications promoting open enrollment included multiple emails, a Constant Contact email, and a home mailer to all active employees. 	



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- 2025 Medicare Advantage Plan: The Employee Health and Wellness website has been updated to reflect the 2025 Medicare Advantage Plan documents and premiums.
- Constant Contact: The following campaigns have been sent to one or more of the State of Maine groups in November 2024 – National Diabetes Month (13,818 recipients; 47% Open Rate; 1% Click Rate), Flexible Spending Account/Wellness Wallet Pilot Open Enrollment (11,100 recipients; 53% Open Rate; 1% Click Rate) and Lung Cancer Awareness (13,769 recipients; 48% Open Rate; 4% Click Rate). The following campaigns were sent to one or more State of Maine groups in December 2024 – Seasonal Affective Disorder (11,191 recipients; 48% Open Rate; 1% Click Rate), Virta Health Promotion (13,848 recipients; 50% Open Rate; 1% Click Rate), and Aetna Teledoc Promotion (688 recipients; 61% Open Rate; 1% Click Rate).

Contracts –

- Health and Welfare Benefits Consulting: The State is reaching the end of its consultant contract with Lockton and is required to go out to Request for Proposal. This is in process and closes in January.

State Employee Health Commission –

- State Employee Health Commission Educational Sessions: Management Member, Shonna Poulin-Gutierrez, is meeting with co-chairs and discussing delivery of educational information to State Employee Health Commission members. Members are adult learners with multiple priorities in any given day, so time allocated to education should be used wisely. Instead of a full day retreat, two half-days per year is being proposed to break down the educational sessions. This may also result in regular monthly meetings being shorter in length. Labor Member, Jonathan French, also recommended breaking up vendor presentations to facilitate information absorption by members.

c. Committee Updates

- There are new members on the State Employee Health Commission, as well as vacancies on the following committees: Appeals Committee, Ad Hoc



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Committee, Legislative Committee (1 Management vacancy), Bylaws Committee (1 Management and 1 Labor vacancy), Finance Committee (1 Management and 1 Labor vacancy). One of the most important committees is the Plan Design Committee, which meets at the end of the month. The Wellness Committee consists of Nathan Morse and Labor Member, Jonathan French, serving as de facto chair. Labor Member, Danielle Murphy, and Management Member, Heidi Pugliese, volunteered for the Bylaws Committee. Labor Member, Rebekah Koroski, volunteered for the Appeals Committee.

- If any other members have an interest in serving, they should contact Labor Member, Jonathan French or Management Member, Michael Dunn. Future meeting agendas will reserve time for committees to report to the Commission when they have information to impart.

V. QUARTERLY PLAN UPDATES

a. Healthcare Purchaser Alliance – Lisa Nolan

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

- About the Healthcare Purchasers Alliance: The Alliance is a purchaser-led partnership of multiple stakeholders working together to improve healthcare quality, access, and affordability for the people of Maine. There are more than 60 members of the alliance, encompassing 150K+ commercially insured lives with a \$1B+ annual spend.
- What the Healthcare Purchaser Alliance does: Healthcare Purchaser Alliance’s work includes healthcare cost containment, purchaser advocacy, networking and learning, and custom analytic services.
- Overview of the 132nd Legislature: The 32nd Legislature is underway and will remain in session through June. The first year of this legislature is the “long session” when most bills which will be considered in the next two years are introduced. There are typically 2000 legislative documents (LDs) introduced during the long session. 210 bills have been printed as of January 15. Democrats hold a majority in both House and Senate, and both serve as chairs and hold the majority of all legislative committees.
- Health Plan Related Legislation: Typically, 100-150 of the bills introduced in long session focus on Maine commercial health plans or healthcare market.

Management Member, Olivia Alford asks:

Can the weekly updates from Healthcare Purchasers Alliance be sent to Commission members?

Healthcare Purchaser Alliance responds:

Lisa Nolan will check with their board to see if this is permissible.



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Bills impacting plan management usually only apply to fully insured health plans, but as a government supported plan, the Maine State Employee Health Plan is often subject to state statute. Health plan bills typically fall into the following categories: mandate coverage of certain services, shift plan costs, limit plan sponsor flexibility, address pharmacy cost, improve transparency, or enhance consumer protections.

- Committee Jurisdiction: Most health insurance related legislation is referred to the Committee on Health Coverage, Insurance and Financial Services (HCIFS) for public hearings and work sessions. Bills specifically impacting the state employee health plan may be referred to either Health Coverage, Insurance and Financial Services or to Committee on Labor. Other bills related to hospital or other healthcare topics, including MaineCare, are referred to the Committee on Health and Human Services and provider workforce legislation is referred to the Committee on Labor.
- Healthcare Purchasers Alliance Legislative Support: Healthcare Purchasers Alliance advocates for Maine employers before the Legislature by providing input on legislative documents that would impact plan costs, sponsor flexibility, market competition or transparency. It also provides purchaser members with weekly updates on all bills that could impact cost and plan sponsors' ability to manage plans. These updates include an email highlighting all key activity which occurred in that week and insights on legislative process, additional context, and expected outcomes.
- Healthcare Purchasers Alliance Seeks to Improve Audit Rights: Healthcare Purchasers Alliance developed the Accountability and Understanding Data in Insurance Transactions (AUDIT) Act in response to purchaser members' frustration with auditing right limitations. This Act would prohibit certain audit restrictions in plan sponsor contracts with third party administrators (TPAs) and pharmacy benefit managers (PBMs) and would also specify key data elements/materials that third party administrator/managers must make available for audits.
- Legislative Process: The legislative process is as follows: legislator introduces a bill; House and Senate refer the bill to committee; committee holds public



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hearing on the bill; committee holds work session on the bill; committee reports out the bill: ought to pass, ought not to pass, or ought to pass as amended. Minority reports may also be reported. The House and Senate then vote on the committee’s majority or minority report, starting in the bill sponsor’s chamber. If the bill is sent to Legislative Files, the bill is dead. If the bill passes the House and Senate, it is engrossed. If the bill passes the House and Senate to be enacted, it is then sent to the Governor. If the bill is sent to the Special Appropriations Table due to budget impact, it then either receives the funding to be enacted; if not funded, then the bill is dead.

- Bills Introduced to Date: Among the bills introduced to date was L.D. 91, *An Act to Authorize Employees of the Maine Association of Retirees to Be Eligible for Participation in the State Employee Health Insurance Program.*

VI. SEMI-ANNUAL UPDATES

a. Compliance Review

Highlight and discussion noted below:

State: Anthem – *Kristine Ossenfort*

- 132nd Legislature: There are 95 Democrats, 88 Republicans, 2 Independent /Unenrolled and 1 vacancy.
- Anticipated Issues: Cloture deadline for submission of bill requests was January 10, 2025; a list of bill titles is not yet available. Expected bills are related to Prior Authorization, mandated benefits, GLP-1/weight loss drugs, Certificate of Need, anti-consumer provisions in provider contracts, pre-payment review and audits, 430B drug program, prescription drug affordability board, medical credit cards, privacy, and disabled adult dependent coverage.
- Bills from the 131st Legislature That May Return: Bills returning from 131st Legislature that may return are L.D. 132, L.D. 444, L.D. 1829, and L.D. 2203.
- Bills Printed: Bills printed as of January 9, 2025, are L.D. 5, L.D. 67, L.D. 91, L.D. 93, L.D. 107, and L.D. 111.



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Federal: Lockton – *Mark Holloway*

- New Year, New Administration, New Congress: A Republican trifecta takes control. The new administration's priorities are the regulatory landscape and Loper Bright. Potential areas of benefit impact are the Affordable Care Act (ACA), contraception coverage, prescription drug reform, mental health parity and taxation of benefits. Longer term issues are the expiration of \$4T in tax cuts with the largest federal tax expenditures being employer healthcare (\$3.4T) and pensions (\$2.7T), and possibly the solvency of Social Security and Medicare.

Affordable Care Act Updates –

- Affordable Care Act Reporting: A permanent extension of "furnishing deadline" for 1095-Cs makes March 3 the deadline and no additional extensions will be granted. Filing deadline is February 28 for paper, and March 31 e-filing and extensions are available.
- Brand New for 2024 Filings: Plan sponsors (and health insurance providers for fully insured plans) are no longer required to send 1095-C forms to all full-time employees and covered individuals. If an employee/covered individual requests this from the employer, it will be provided 30 days after date of request or January 31, whichever is later. Plan sponsors must provide notice to employees about their right to ask for a form.
- Other News on Affordable Care Act Filings: Plan sponsors will have at least 90 days response time to a proposed Employer Shared Responsibility Payment (ESRP) before further action is taken. There will be a 6 year period for collecting these payments counted from the due date for filing applicable Forms 1095-B and 1095-C or actual filing date, whichever is later. It's permissible to use date of birth on 1095 forms if Social Security Number is unavailable.
- Accountable Care Act Preventive Care Requirement: A United States District Court ruling, *Braidwood Management v. Becerra* (2022) ruled that aspects of the Accountable Care Act preventive care mandate violates the Constitution



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and religious freedom. The case is in appeals process and will likely reach the United States Supreme Court. Currently all Accountable Care Act preventive care and United States Preventative Services Task Force (USPSTF) recommendations should be covered as required.

- Wellness Programs – Smoker Lawsuits: Lawsuits allege that “full reward” must be available to employees completing a smoking cessation program or quit smoking during the plan year. The Affordable Care Act requires employees receive retroactive credit (cash rebates) if qualifying as a non-smoker during the plan year. The recommendation is to follow the Affordable Care Act guidelines. Some employer wellness plans require completion of the wellness criteria in advance of the plan year. In that instance retroactive “full reward” requirement should not apply.

Health Insurance Portability and Accountability Act (HIPAA) –

- HIPAA and Reproductive Rights: Final rules restrict uses and disclosures of protected health information (PHI) for certain non-health care purposes such as conducting criminal, civil or administrative investigation into any person to seek, obtain, provide or facilitate reproductive health care or to impose criminal, civil or administrative liability on any person for same. Employer health plans will need to issue updated privacy notice by February 2026 and revise HIPAA training, policies and procedures addressing new requirements. The rule has been challenged in court and it’s unclear whether the rule will be stayed or rescinded.
- HIPAA Electronic Data Security: High profile cyber-attacks and data breaches of electronic protected health information (ePHI) are listed on the Health and Human Services “wall of shame”. Proposed rules would tighten data security rules, require speedier reporting of breaches and amendments to Business Associate Agreements requiring written documentation of policies, procedures, plans and analyses. There would also be a requirement for health plans to annually obtain written verification from business associates that they have deployed HIPAA technical safeguards and obtain such verification from their own subcontractors.



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Pharmacy benefits – the great frontier –

- Rx Coupons and Out of Pocket (OOP) Maximums: The Federal government will propose that all covered drugs are considered essential health benefits (EHBs) that apply toward the out of pocket limit which, once implemented, would kill coupon maximization programs. The HIV and Hepatitis Policy Institute v. Health and Human Services struck down the ruling allowing group health plans and carriers from excluding copay assistance counting toward deductible and out of pocket maximum.

Mental health parity compliance –

- When Do Requirements Come Into Play: For plan years beginning on or after January 1, 2025, updated definitions of terms like “medical/surgical benefits”, “mental health benefits”, and “substance use disorder benefits” are required to adhere to current versions of independent medical standards. For plan years beginning on or after January 1, 2026, there are requirements around meaningful benefits/core treatment, prohibition on discriminatory factors and evidentiary standards, evaluation of outcomes data, and heightened comparative analysis.
- Mental Health Parity and Addiction Equity Act (MHPAEA) Compliance: Plans must have a Non-Quantitative Treatment Limitation (NQTL) Comparative Analysis. Plans should be reviewed for a quantitative treatment limitation and compliance red flags, and plan sponsor should review service provider contract language and incorporate provisions to ensure provider will assist in compliance, including an adequate comparative analysis.
- Mental Health/Substance Abuse Parity: Red flags identified in the report to Congress include exclusions related to nutritional counseling, Applied Behavioral Analysis (ABA) therapy, residential treatment, telehealth benefits, drug testing and opioid treatment; experimental/investigational determinations; preauthorization and concurrent review requirements; network adequacy; provider reimbursement rates and admission criteria.



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	<p>Reminders –</p> <ul style="list-style-type: none"> • <u>Other Issues to Watch:</u> The Patient Centered Outcomes Research Institute (PCORI) fee is due July 31 and there is an advance Explanation of Benefits (EOB) requirement which needs addressing by the Federal government. 	
<p>b. Living Resources Program – Deborah Palma</p>	<p>Information contained in written report; highlights and discussion noted below:</p> <p>ComPsych and the Living Resources Program –</p> <p><u>Who We Are and What We Believe:</u> ComPsych is a trusted brand with demonstrated performance and scalable operations supporting the continuum of mental health from coaching to crisis.</p> <ul style="list-style-type: none"> • <u>Living Resources Program:</u> The Living Resources Program offers 24/7 multilingual access to professionals. Through GuidanceConnect and First Responders Network Providers they provide a 5-session Employee Assistance Program model per person, per issue, per year as well as 5-session well-being coaching. Integrated work-life services include Estate Guidance, FamilySource, LegalConnect and FinancialConnect programs. Unlimited on-site hours for training and/or Critical Incident Stress Management (CISM) services are also provided. • <u>Next Generation GuidanceResources Online Platform:</u> This platform’s primary objectives are best in class design and visual experience, highly personalized experiences and comprehensive and holistic care with tangible improvement measures. <p>Program Engagement –</p> <ul style="list-style-type: none"> • <u>2024 Program Engagement Overview:</u> In 2024 there were 15,345 total covered employees representing a 36.6% annualized utilization rate, up from 26.07% 	



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in 2023. There was a 140% increase in training session attendance and overall teammate engagement increased by 40%. The Employee Assistance Program had a 92% satisfaction rate, while FamilySource, LegalConnect and FinancialConnect each had a 100% member satisfaction score. GuidanceResources Online had an 88% satisfaction score.

- 2024 Live Engagement: Employees were 89% of members engaging live, while 4% were spouses and 7% were dependents. Live engagement encompasses in-person, telephonic and video counseling, well-being coaching, legal, financial and work life cases. Counseling issues included stress, anxiety, partner/relationship, psychological issues, and depression. Approximately 18% of individuals aged 18-54 have an anxiety disorder in any given year and is the highest reported mental health issue with 42.5 million Americans suffering from anxiety.

2024 Digital Engagement: Digital engagement includes emotional health, work-life, financial, wellness and legal services. Digital engagement has been consistent throughout 2022 through 2024.

VII. Other Business

a. Confidentiality Agreement

- The confidentiality agreement which is typically signed by Commission members annually for fiduciary responsibility purposes has not yet been prepared; however, Clerk, Devon French, anticipates it will be available at the next meeting in February and will be disseminated for signature in January for following years.

b. Open Discussion

- Clerk, Devon French, will be sending a revised invitation for the June meeting which had to be rescheduled due to a holiday. The June meeting may need to be held in another location which is unable to accommodate hybrid meetings, but members will be updated on whether this will need to be an in-person meeting, or if an alternate venue can be booked. The vendor cadence will also change, and a new schedule will be sent.

General Reminders –

- The next Plan Design meeting is scheduled for Thursday, January 30th, 2025.



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VIII. REQUEST MOTION TO ADJOURN

a. **VIII. Adjourn Meeting
(10:58 am):**

Management Member, Frank Wiltuck made a motion to adjourn;
Management Member, Heidi Pugliese seconded the motion.
Motion passed.

2025 meeting schedule available at www.maine.gov/bhr/oeh