



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

Breana Bissell
Management Member, Co-Chair

STATE EMPLOYEE HEALTH COMMISSION MEETING

**Thursday, September 19th, 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, Breana Bissell, Jenny Boyden, Cecile Champagne-Thompson, Lynn Clark, Kevin Dionne, Laurie Doucette, Rebekah Koroski, Danielle Murphy, Doris Parenteau, Shonna Poulin-Gutierrez, Heidi Pugliese, Joanne Rawlings–Sekunda, Kim Vigue, Frank Wiltuck, and Nathaniel Zmek.
(Total = 17)

Commission Members Absent: Diane Bailey, Claire Bell, Jonathan French, Kelly John, and Chris Russell.

Vacant Seat(s): 3

Others Present: Neva Parsons, Paige Lamarre, Devon French, Charles Luce, Nathan Morse, and Roberta DuPont – The Office of Employee Health, Wellness, and Workers’ Compensation; 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; Marie Bridges – Northeast Delta Dental; Amy Deschaines, Kim Greenberg, Terry LaMonica, Ed Pierce and Ken Ralff – Lockton; Lisa Nolan – Health Purchasers Alliance; Thomas Young and Justin Cortes – Teledoc Health/Livongo Health; and Brenden Horwitz and Avni Doshi – Capital Rx.

Agenda Item	Discussion	Action/Next Steps
I. Call Meeting to Order (8:36 am)	Management Member, Breana Bissell, called the meeting to order.	
II. Introductions: Capital Rx Team Introduction – Breana Bissell	Labor Member, Rebekah Koroski, filled in for Jonathan French as co-chair in his absence.	
III. Review and Approval of Minutes (July 18th, 2024)		Labor Member, Kevin Dionne, made a motion to approve the July 18 th , 2024, minutes. Management Member, Joanne Rawlings–Sekunda,



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seconded the motion. Motion passed.

IV. Recurring Monthly Business

a. Employee Health and Wellness Highlights – Paige Lamarre

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

Active and Retiree Demographics –

- Capital Rx Active Population Plan Pay by Drug Classification (07/01/2024 to 08/31/2024): Capital Rx active population plan by drug classification shows generics at \$704K+, brand name at \$5.6M+, and specialty at \$5.7M+.
- Capital Rx Retiree Population Plan Paid by Drug Classification (07/01/2024 to 08/31/2024): Capital Rx retiree population plan by drug classification shows generics at \$86K+, brand name at \$844K+, and specialty at \$705K+.

Wellness Highlights –

- Bumper Crop Pilot: The Bumper Crop program continues and plan members who received vouchers have until December 31, 2024, to utilize them at participating farmers’ markets. Reminder that the link to the pre-survey is located on the rack-card that was mailed to eligible participants along with the vouchers themselves.
- Wellness Wallet: The Wellness Wallet pilot program planning has been underway since August. You’ll learn more about - this new benefit that we’re expanding in 2025 during the ‘Education’ portion of today’s meeting.

Communications Highlights –

- Carrum Health: We have recently published Carrum’s two-pager on our website, as well as a more in-depth Carrum Health Program plan document that outlines the exceptions and appeals process. These can both be found on our Carrum Health webpage.



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- Digital Enrollment Form: With recent retirements within our office alongside Annual Open Enrollment processing, we had paused our digital enrollment form progress this summer. We have recently started back up on the form testing and plan to roll out the digital form later this fall.
- Constant Contact: Constant Contacts were sent out for UV Safety Month (Open Rate 48%), American Red Cross (Open Rate 38%), and Independent Lab and Imaging (Open Rate 49%), Immunization Month (Open Rate 41%), and Back to School Resources (Open Rate 49%).

General Reminders –

- We are preparing for the 2025 State Employee Health Commission retreat. This will be held on October 17th at the Governor Hill Mansion in Augusta. The day will begin with our traditional October public State Employee Health Commission meeting then will transition into the retreat.
- Plan Design meeting will be held in early October.
- There is a shortage of attention-deficit/hyperactivity disorder (ADHD) medication. Capital Rx will work with the affected plan members to try to source the medication from a pharmacy or Optum Home Delivery. In the short term, if needed, an override process is in place to fill the brand medication at a tier-2 copay.

Contracts –

- Our Living Resources Program contract with ComPsych is almost complete. There will be no rate change. Please remember that Ancillaries have access to utilize the Living Resources Program services if they choose to.

V. QUARTERLY PLAN UPDATES

**a. Plan Experience Summary:
Active Medical and Dental –
Lockton**

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

**Management Member, Jenny
Boyden,** asks if the revenue
collected in the last fiscal year was



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	<ul style="list-style-type: none"> • <u>High-Cost Claimants</u>: In 2022 there were 53 high-cost claimants (\$250K+) totaling \$23M. Of that \$23M we had \$383K in stop loss reimbursement. In June of 2024 we went from 53 high-cost claimants to 52, which dropped the total dollars to \$21M, with a stop-loss of \$266K. • <u>Self-Funded Medical and Prescription</u>: Self-funded medical and prescription through July of 2024 shows there were 14,531 average subscribers, an increase of 1.9% from the previous period. The loss rate is up 35.3%, at 116.9%, and the total plan cost is \$26.84M, with \$22.96M budgeted. • <u>Rolling 12-Monthly Cost Breakdown</u>: During this period the average per employee per month total plan cost was \$1,619 – of that only \$1,493 was budgeted. Gross claims totaled \$274.9M with total net claims reaching \$265M. The average contract size was 1.79 with a contract size change of -0.54%. • <u>Historical Plan Performance</u>: The total plan cost compound annual growth rate (CAGR) during the reported period was 10.8%, with 4.4% budgeted. The medical CAGR was 7.9% and drug was 12.1% • <u>Self-Funded Dental Experience Detail</u>: Self-funded dental through July of 2024 shows there is currently a deficit under the dental plan of \$11,219, and we're running at 101.6% of the budget. 	<p>\$255M? The total cost is \$254.8M, which would mean this was a break even.</p> <p>Lockton states it might just be the timing of where they pulled these numbers from the numbers that are on that report. They will take that as a takeaway to bump up the two reports that they pulled these numbers from.</p>
<p>b. Medicare Advantage Plan – Aetna</p>	<p>Information contained in written report; 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 9,082 members. The average age of 70.3 is slightly lower, but on par with our book of business with the gender breakdown being 49% male and 51% female. • <u>Measures Showing the Most Significant Change</u>: Current indicators versus the prior period show a 10.8% increase in inpatient admissions, an 11.3% decrease in inpatient surgery, and a 2.0% decrease in the percent of total paid amount for catastrophic claims. 	<p>Labor Member, Lois Baxter, asks how hard it is to get a healthy home visit appointment because she's heard from fellow retirees that they are unable to get one booked.</p> <p>Aetna responds and asks retirees' information be relayed to them because although they did start working with a new company to perform the coordination, there shouldn't be issues.</p>



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- State of Maine Aetna Medicare Advantage Cost Results: Both medical and pharmacy are up about 14% total with the largest contributor being pharmacy, which is up about 8.9%. 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 -0.5%, emergency room visits are up 3.8% and acute admissions were up from 127 the prior year to 141 in the current year, an increase of 10.8%. Book of business is 122. There were 180 high-cost claimants during this period and the average cost for these claimants was \$120,865.
- Top Medical Catastrophic Claims over \$75K: Catastrophic claims over \$75,000 were for neurologic disorders, mental health disorders, oncologic disorders, infectious disease, cardiac disorders, and neurologic disorders. The highest total medical claim paid was \$468K+.
- 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 increased 0.7% and the percentage of members with visits to specialists (-0.7%).
- Telemedicine – Part A and B Plan: The top 3 diagnostic categories were depression, with 538 visits and \$107 paid, adjustment reaction, with 498 visits and \$91 paid, and anxiety/personality/eating disorder/other, with 370 visits and \$105 paid. Total paid amount for telemedicine was \$349K.
- Top 3 Diagnostic Categories: The top 3 diagnostic categories were cardiac, with a total paid of \$13.5M, oncologic, with a total paid of \$13M, and musculoskeletal, with a total paid amount of \$10M.
- Top 3 Providers: The top 3 providers include MaineGeneral Medical Center-Augusta Campus with 2,627 claims and a total paid amount of \$10.6M, Maine Medical Center, with 1,548 claims and a total paid amount of \$8.6M, and Northern Light Eastern Maine Medical Center, with 1,028 claims and a total paid amount of \$4.3M.

Management Member, Joanne Rawlings-Sekunda, asks if Aetna is seeing any issues with large provider contracting, particularly with Northern Light?

Aetna states, they are not, however as a precautionary measure, they will take this question back to their network teams.



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- The State’s Part A and B Pharmacy Utilization: In 2023 there were 214,639 scripts generated and of those scripts 87.7% were utilizing generics.
- Top 3 Part A and B Drugs: The top 3 part A and B drugs filled were Eliquis with 4,207 scripts and 1,798 utilizing members, Jardiance with 1,910 scripts and 745 utilizing members, and Trulicity Injectable, with 845 scripts and 450 utilizing members.
- The State’s Part B Only Pharmacy Utilization: Mail order utilization has gone down a point from 4.3% to 3.9%. There was also a slight increase in members enrolled from 482 in 2023 to 493 in 2024. Scripts of opioids have decreased from 115 in 2023 to 80 in 2024.
- Top 3 Drugs Filled for Part B Only Plan: The top 3 part B drugs filled were Abiraterone with 15 scripts and 3 utilizing members, Eliquis, with 153 scripts and 35 utilizing member, and Skyrizi Pen Injectable with 12 scripts and 2 utilizing members. Of the total drugs filled, 70% were specialty representing 10 members.

**c. State of Maine Health Plan:
Medical Update – Anthem**

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

- Financials and Demographics: Employees make up about 56% of your membership, driving 66% of your total plan spend, followed by spouses at 15% of membership driving 21% of cost and dependents at 29% of membership driving 13% of cost.
- Enrollment: The State of Maine plan is 48% male, 52% female, both on the employee side and the total member side and the contract size is 1.8, below the benchmark of 2.2.
- Total Population Health: During the reporting period of February 2024 to July 2024 there were 8.5% of non-utilizing members. In addition, 39.7% of members are listed as “healthy”, 6.8% of members were listed as “at risk”, 41.3% of members were listed as “chronic”, and 3.7% of members were listed as “critical”.



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- Executive Summary: Per member per month trend is 8.3% over the 3 months prior. The top conditions were Cancer (12%), Circulatory (10%) and Health Status (10%).
- Financials: In July 2024 the total medical spend was up 3% from June 2024 at \$18.1M. State of Maine's Rolling 12 Experience is trending really well and is up 9%.
- Insights on Medical Trend: Per member per month, spend increased 8.3% in the current period. This was driven by a \$24 increase in high-cost claimant spend and a \$15 increase in Circulatory spend per member per month.
- Place of Service: Inpatient makes up 21.7% of spend – up 14.2% cost per admit, Outpatient makes up 39.7% of spend, Emergency makes up 8.1% of spend, and Professional makes up 30.6% of spend and there has been a 7.1% 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 13% of spend, Musculoskeletal with 11% of spend, Digestive with 10% of spend, Ill-Defined Conditions with 9% of spend, and Behavioral Health with 8% 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, 20% of members had at least 2 chronic conditions with 19% the prior year.
- High-Cost Claimants: High-cost claimants represented 1.0% of members and 30% of spend. High-cost claimants per member per month increased .10%, which was driven by a 14% increase in the number of claimants per 1,000 and 20% of high-cost claimants spend was for medical specialty drugs.
- Behavior Health Details: Behavioral health is currently at 21% paid per member per month and 22.7% of membership. The State of Maine has 6,575 behavioral health claimants with 91.4% of paid were in-network claims.



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- Behavioral Health Co-Morbidities: During this reporting period 50.2% of members with a behavioral health diagnosis have at least one other chronic condition. The most prevalent was chronic obstructive pulmonary disease (COPD) with 33.2% of members suffering from this condition.
- Preventative Screenings: Screening rates have increased in 7 out of 8 categories in the first quarter of 2024. There has also been an increase in adult wellness visits, at 59%, with 56% utilizing this benefit in 2023.
- Engagement: Member engagement shows 2.2% of traditional engagement, 24.3% of members engaged with a nurse and 2.4% of members declined engagement.
- Top 3 In-Network Facility Inpatient Providers: Top 3 in-network facility inpatient providers were Maine Medical Center with a paid amount of \$14.9M, MaineGeneral Medical Center with a plan paid amount of \$6M, and Northern Light Eastern Maine Medical Center with a plan paid amount of \$5M.
- Top 3 Emergency Department Providers by Paid Amount: The top 3 emergency department providers by paid amount are MaineGeneral Medical Center with 1,292 emergency room visits and claims totaling \$2.8M, Maine Medical Center with 659 emergency room visits and claims totaling \$2M, and Northern Light Eastern Maine Medical Center with 294 emergency room visits and claims totaling \$1.1M.

**d. State of Maine Dental Plan –
Northeast Delta Dental**

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

For the reporting period of 09/01/2023 - 08/31/2024 –

- Utilization Summary: In the most recent 12-month period, September 1st, 2023, through August 31st, 2024, the State of Maine had 13,464 enrolled, up 1.86% from the previous period, with 3.85 claims per subscriber.



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- Claims Comparison Report: There were about \$7.48 million in claims paid in 12 months, the majority of which are for diagnostic and preventative measures (52.94%).
- Claims Utilization: During this reporting period there were 51,849 total claims, with an average cost of \$144.28 per claim and 106,958 procedures paid total.
- Network Utilization and Savings Report: In-network utilization shows 20.9% of the claims were paid to the premier network in about 40.5% to the State of Maine specific network, with only 8.6% out of network.

VI. EDUCATION

a. Wellness Wallet/Thrive Pass – Nathan Morse

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

- Wellness Wallet Goals: Wellness Wallet goals include streamlining administration with State of Maine partners, influencing behavior change and generating an enhanced culture of health, improving access to physical and emotional wellbeing resources, and increasing wellness engagement and annual preventative care.

Wellness Wallet (Pilot) – Who is Eligible to Apply: They must be a State of Maine employee `active` on the State of Maine Health Plan as the Primary Subscriber. They must have completed the requirements for the prior year (2024), and/or the current year (2025) Health Premium Credit Program (HPCP) prior to the end of open enrollment and have met all the above requirements and completed the Wellness Wallet pilot program enrollment application during open enrollment.
- Wellness Wallet: How the Program Works 1: The employer payroll & IRS compliance requirements must not duplicate other subsidy benefits that are tax advantaged benefits. The employer must process the subsidy accessed in payroll tax deduction, imputed income. The calendar year benefit is to align with payroll processing and tax filing timelines (January – December). Reimbursement authorizations and documentation review/approval is conducted by the vendor, and Thrive Account offers reimbursement for approved purchases via two options & curated Marketplace - by transfer to a



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bank account (ACH), or through a gift card. Marketplace purchases are another option for enrolled member to make a purchase; no reimbursement required and personal funds payment an option.

- Wellness Wallet: ThrivePass / State of Maine Approved Categories: The approved categories for Wellness Wallet are Healthy Eating, Emotional, Financial, Alternative Health, Health, and fitness.
- Wellness Wallet: How the Program Works 2: An example of how this would work would be the Category 'Emotional' – Members could select weighted blanket as a product to help them with improving their sleep and overall wellbeing. Online purchase receipt and any supporting documentation linked to the purchase for their weighted blanket are submitted via Wellness Wallet Thrive Account portal. The member identifies one of two options for reimbursement, Transfer to a Bank Account (ACH), or through a Gift Card. ThrivePass Account Team reviews the reimbursement request. ThrivePass authorizes the reimbursement if the submission meets the terms/requirements. If not authorized ThrivePass helps the enrolled member identify what's missing so the member can resubmit their reimbursement request which meets the terms/requirements.
- Wellness Wallet: How the Program Works 3: Starting in January 2025, eligible enrolled members will see \$100 deposited into their Wellness Wallet via their ThrivePass account. Enrolled Wellness Wallet pilot participants will be able to use this benefit in one of two ways - through the ThrivePass Marketplace or Reimbursement for Wellness Wallet pilot program approved claims paid out-of-pocket by the enrolled member. Once enrolled, you will receive an email from ThrivePass in late December 2024 with instructions on how to access the online portal, create your profile, and start using your Wellness Wallet pilot program services through ThrivePass.
- Wellness Wallet - Evaluation: ThrivePass is a pilot program benefit that the State Employee Health Commission voted to expand with Wellness Wallet starting fiscal year 2025. Reporting provided by ThrivePass evaluates categories used for future planning (expansion or elimination) of program eligible categories/reimbursements. Year over year we will evaluate payroll



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data and continue our partnership with the Office of State Controller as we transition to PRISM implementation. Our 'evaluation goal' is to develop a sustainable benefit plan for how this can be used to incentivize behaviors/activities where members choose health, wellness, and well-being to be part of their everyday lives. Our 'answer evaluation goal' questions are the plan observing improvements in behavior change, wellness engagement, and annual preventive care in the active plan member population utilizing this Wellness Wallet lifestyle account benefit.

VII. SEMI-ANNUAL UPDATES

**a. MCD Wellness Program –
MCD Global Health,
WellstarME**

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

- Activated WellStarME Registrations: In 2024 there were 21,156 individuals registered in the WellStarME program, with 7,531 members eligible for the 2024 Health Premium Credit Program.
- My Health Options: Of the My Health Options, 1,026 individuals had Health Navigation Appointments, 1,162 participated in "My Numbers", 3,288 received flu shots, 3,470 had Annual Physical Exams, and 1,681 had a well-being visit.
- My Numbers - Average for Each Metric: Results for the lab testing done for "My Numbers," show each metric remains about the same from last year's figures.
- Risk Factors: The highest risk factors among "My Numbers" participants were pre-hypertension at 52%, fasting blood glucose at 39%, and obesity – at 39%.
- Self-Reported Prediabetes Risk Quiz: The risk breakdown for participants shows 59% are low risk, 31% are high risk and 10% have diabetes.
- Self-Reported Health Risk Assessment Overview: Health Risk Assessment participants stated:
 - 32% consume sugar sweetened drinks or soda sometimes, 52% state never and 16% usually.
 - 57% of employees would prefer to participate in physical activity utilizing their outdoor surroundings.



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- 90% of employees brush their teeth at least twice a day.
 - 85% visit the dentist at least once a year.
 - 83% of employees have had a routine checkup in the past year.
 - 86% of employees are up to date on their preventative health screenings.
 - 85% of employees are up to date on their immunizations.
 - 59% of employees have a medium level of stress.
 - 57% of employees are managing their stress well.
 - 47% of employees never have to think about their mental health and 37% think about it 1-3 days a month.
 - 71% of employees are able to perform their everyday activities with no problem.
 - 72% of employees are not feeling depressed at all.
- WellstarME Totals: The total Number of Resources Accessed on the WellStarME Resource Hub is 20,990 and there were 491 participants utilizing the “My Message” feature.
 - Current Wellness Programs: Some of WellStarMe’s current wellness programs include:
 - Enhanced WellStarME Platform
 - Health and Wellness Navigation Team
 - Wellness Ambassador Network
 - National Diabetes Prevention Program
 - Bumper Crop Program: State of Maine employees enrolled in the State of Maine Health Plan as of May 1, 2024, received access to \$15 in Bumper Crop vouchers to spend at over 50 participating farmers’ markets across Maine by December 31, 2024.
 - 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.”
 - 2024 Accomplishments and Enhancements: Some of the 2024 accomplishments and enhancements include:



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- Reviewed all participant feedback related to WellStarME programs and offerings.
- Updated the WellStarME platform design and usability for the 2024 Health Premium Credit Program year.
- Increased awareness of the WellStarME platform.
- Increased access to health and wellness resources on the WellStarME platform through the addition of over 500 evidence-based resources on 25 health and wellness topics.
- Increased visibility to the Health and Wellness Navigation Team by promoting the secure message center within members of WellStarME accounts.
- Enhanced the annual "Wellness Questionnaire" by adding additional questions related to preventative health.
- Relaunched and evaluated a 1-year extended mindfulness pilot through Headspace.
- Assisted with the implementation of a 6 month "Wellness Wallet" pilot through ThrivePass, Inc.
- Facilitated quarterly Wellness Ambassador Network meetings to promote health and wellness opportunities and updates.

**b. Livongo: State of Maine
Wellness Benefit – Livongo
Health**

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

- Member Demographics – All Time: Currently 84% of membership subscribers are State of Maine employees, with 53% being female, and 47% being male. The majority of members utilizing Livongo have type 2 diabetes, representing 95% of the population subscribed.
- Overall Engagement Dashboard: The average 90 days member engagement rates (% of activated) are as follows:
 - Device Monitoring, 88%
 - Self-Guided Activity, 78%
 - Digital Coaching, 60%
 - Expert Coaching, 7%

Members engage with the chronic condition management programs on average 20 times per month.



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- Member Enrollment by Program Dashboard: There were 2,881 recruitable potential members for the Diabetes Management Program, with 531 enrolled and 518 activated.
- Clinical Outcomes – Diabetes Movement: For members enrolled at least 6M, the share of members with controlled diabetes (HbA1c < 7%) has increased from 40% at baseline to 65.4%. The share of members with HbA1c > 8, which indicates an above normal BG, has decreased from 30.4% at baseline to 15.4%.
- Clinical Outcomes – Diabetes Movement (Sankey): For members enrolled 6M+, 42.1% of members made improvement, with 36.6% of members moved to eA1c<8, and 1.7% improved, but were still above 8. 40.7% of members maintained and 17.1% worsened.
- AI Powered Digital Health Interventions: Within the first 4 months of journey, predictive models help identify which members will be at risk of uncontrolled blood glucose (>7.5 eA1c) at 12 months using blood glucose, engagement, medical record. Recommend personalized, timely interventions from 138 health nudges to help guide members to the next best action. Adaptive learning of our AI models increases engagement and promotes positive clinical outcomes. This results in a 3x increase in health meter nudge engagement and 0.5 point reduction in A1c in intervention verses control groups.
- Enhancing Clinical Outcomes through AI-Driven Nudges: Since May 2023, our AI-powered health nudges have targeted 72 (14.0%) currently activated members at risk of uncontrolled A1c (>7.5) at the end of their first or second year of the program. Of the targeted population, 64 (88.9%) responded to at least one nudge and logged BG checks in the 90 days before and after the nudge response, resulting in 74.2% blood glucose checks falling within the normal range (+4.2% from before the nudge response). This intervention has improved diabetes management, with members decreasing their eA1c an additional 0.2% to 7.0%.
- Chronic Condition Management Journey: Some of the chronic condition management journey shows when a member signs up, this gets the member



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excited about joining the program as they wait for their welcome kit, including shipping information and a free habit tractor. Then, throughout the journey Livongo sends a series of communications aimed at getting the member to do their very first check on their device, whether it is a meter monitor or scale in the first 30 days. We also have a proactive coaching outreach encouraging members. Tension is associated with members who have done 5 checks in the first 14 days. The onboarding journey builds good habit forming behavior by including things like a check challenge to get them to use their devices consistently.

- Weekly Newsletter: There’s a weekly newsletter tenure (member who has been with Livongo for 1+ month) and health acuity-based (member has an uncontrolled A1c) segmentation that is powering personalized goals based on clinical and behavioral science guidance.
- Expert Coaches Providing Continuous Guidance: Dedicated coaches allow members to develop a trusted relationship. Members have unlimited access to live, over-the-phone coaching sessions and messaging and 96% of members felt their coaching session was personalized to their needs and health goals.

VIII. OTHER BUSINESS

a. Open Discussion

Highlights and discussion noted below:

- No items were brought to the commission.

IX. REQUEST MOTION TO ADJOURN

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

Management Member, Jenny Boyden made a motion to adjourn; Labor Member, Lois Baxter, seconded the motion. Motion passed.



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