**STATE EMPLOYEE HEALTH COMMISSION MEETING**

**Thursday, April 12, 2018 @ 8:30am**

**Central Maine Commerce Center, Augusta**

Commission members in attendance: Diane Bailey, Lois Baxter, Jonathan French, Wanita Page, Joyce Oreskovich, Cecile Champagne-Thompson, Derek Chase, Karen O’Connor, Kelly John, Lew Miller, Sandra Doyon, Becky Greene, Nickole Wesley, Carrie Margrave, Peter Marcellino

(total = 15)

Commission members absent: Kim Vigue, Ellen Hughes, Eric Cioppa, Laurie Doucette, Robert Omiecinski, Will Towers, Terry James, Amy MacMillan

Others present: Kurt Caswell, Linsey Gervais, Heather Albert, Shonna Poulin-Gutierrez– Employee Health & Benefits; Sabrina Simmons, Joseph Bataguas, Louise McCreery– Aetna; Burr Duryee– USI; Jodi Collins, Jean Wood– Anthem Blue Cross and Blue Shield; Thomas Record – State of Maine, Bureau of Insurance; Trevor Putnoky- HPA of Maine; Max Knutsen- Maine Health; Alan Parks- Alliant Insurance Services; Laura Robert- Sun Life Financial; Jim O’Connor- ComPsych; Peter Mills- Maine Turnpike Authority

|  |  |  |
| --- | --- | --- |
| Agenda Item | Discussion | Action/Next Steps |
| **I. Call to Order (8:36am)** | Joyce Oreskovich called the meeting to order |  |
| **II. Introductions** | Welcome Peter Marcellino who is replacing Bret Achorn. |  |
| **III. Review & Approval of Minutes** (February 8, 2018) |  | Lois Baxter made motion to accept the minutes; Sandy Doyon seconded; no abstentions. Motion passed. |
| **IV. Health Premium Credit Appeal-** *Ms.**Diane Scott* | * Kurt Caswell provided an overview of the appeal process and the status the appeal being presented to the Commission. * Ms. Diane Scott addressed the Commission as to the nature of her appeal. | Lois Motion made a motion to deny Ms. Scott’s appeal; Karen O’Connor seconded; one abstention. Motion passed. |
| **Va. UPDATES-MONTHLY** | | |
| a.i. Anthem Implantation/ Claims Update- Jodi Collins | Information contained in written report; highlights and discussion noted below:   * Jodi Collins provided medical data claims from July through February. * Medical claims totaled $93,534,005. * Total Per Member Per Month (PMPM) costs were down drastically for February, Spouses PMPM was the highest. * High Cost Claimants (HCC) consist of 305 members which totaled 35.5% of all costs to the plan. * Subscribers are responsible for 66.3% of HCC cost. * 60.8% of members had less than $1,000 in medical plan paid benefit coverage; 26.7% have between $1,000-$4,999; 9.3% had between $5,000-$24,999; 2.8% had between $25,000-$99,999 and 0.4% had $100K+ in the current period. * Total ER claims paid totaled $6,024,317, which was 6.4% of the total medical plan paid amount. * The average ER visit cost was $1,681. * 51.1% of the total ambulatory ER visits were potentially avoidable which cost the plan $1,907,014. * Jonathan French asked to include a communication to members about walk-in centers with the plan design changes that will be taking place in July. Kurt Caswell mentioned limitations around the marketing budget. * The top five health conditions with the top three diagnoses represent $43.1M of total costs and affects 85.9% of unique claimants. * Jodi Collins provided an Engagement Summary for the Clinical population; 27,690 total membership: 5,088 identified for telephonic outreach: 787 enrolled: 566 engaged: and 64 graduated. |  |
| a.ii. Aetna Medicare Advantage Plan- Sabrina DeGuzman-Simmons | Information contained in written report; highlights and discussion noted below:  Sabrina Simmons provided the data for the member service calls.  There was a jump in calls to baseline but Sabrina Simmons mentioned it was nothing that caused concern.  Sabrina Simmons said that going forward she will be including the demographic information for members over the age of 85.  Saw an increase in medical prescriptions costs from February 2017 to February 2018 but a decrease in the total medical paid amount.  There was a small reduction in ER visits from 2017 to 2018.  Aetna’s Microsite is up and running. A postcard will be going out to members the week of April 16th.  Diabetes Prevention Program launched April 1st, mailers going out to 8,750 members over the next 12 months beginning in May 2018.  Aetna offers a Maine Storefront in South Portland which has a Senior Member Advocate available for members to talk to in person with any questions/ concerns. |  |
| a.iii. Plan Experience Summary/ Budget Review-*USI/ Burr Duryee* | Discussion highlights below:   * Burr Duryee stated that the total net claims for January and February were down. * Pharmacy is staying consistent. * The runout claims from Aetna are still slowly coming in. * The reimbursements from the RX vendor are still due to come in $2.5M anticipated. * There is a $965,921 plan surplus currently. * Joyce Oreskovich asked what period the RX reimbursements were for to which Burr Duryee said July through December. * Dental ran high for February and March; loss ratio was 116.5% for February and 118.7% for March. YTD the loss ratio is 105.3%. |  |
| a.iv. Executive Summary Discussion-  *Employee Health & Benefits* | The Executive Summary report was provided to the Commission via e-mail prior to the meeting. Discussion highlights below:   * Kurt Caswell indicated that the SOMER system has been “reset” the team is taking a step back to reevaluate the processes. September is still the go live date but that may be pushed back. |  |
| Break 10:02-10:20 |  |  |
| **Vb. UPDATES – BIANNUAL** | | |
| b.i. Dental Plan Report-  *(Provided in March and September) Marie Bridges of Northeast Delta Dental* | Formal report not due this month. |  |
| b.ii. Employee Assistance Program Report- Jim O’Connor  *(Provided in April and October)* | Jim O’Connor presented handouts and a Power Point reviewing each component of the program (EAP, Family Source, Legal Connect, Financial Connect); discussion highlights below:  Program started 7/1/15 and Serves 21,557 employees and retirees.  Lower utilization for Q1 2018 versus 2017 is primarily due to lower web use and no training requests.  The majority of clients are employees though more spouses and dependents are using the program this year.  HR is referring more than 1/3 of cases.  There have been 9 formal referrals in Q1 versus 14 in all of 2017 and 7 in 2016.  There have been 5 DOT cases in Q1.  Counseling is the most requested service resulting in 99% of EAP calls receiving community counseling referrals.  The resolution rate is 78% compared to 87% in 2017.  Case closure rates are high and no cases have been referred to inpatient treatment.  There will be a mailer going out to all members in Q2. |  |
| b.iii. Express Scripts- Sue Wolf, Bryan Hammons  *(Provided Biannually)* | Formal report not due this month. |  |
|  | VI. Other Business |  |
| i. Health Plan Design Changes  *Kurt Caswell* | Discussion highlights include:   * Kurt Caswell provided at a variety of options for various funding levels. * Kurt Caswell recommended the 5.25% funding option with increases to deductibles and coinsurance. * Kurt Caswell presented a summary of the realignment provisions previously reviewed in detail by the Plan Design Committee. * Open enrollment dates will be May 7th through May 18th. * Carry over from Oct from the previous year to the current plan year will no longer be permitted. * Tom Record asked about the projected plan design changes included the NMCR movement to which Kurt said they have not made any changes with those numbers yet.   Amendment meeting on 4/20/18:   * A majority of the committee voted for option C (3.6% premium increase), with some interest in raising the premium to 4%. * Karen O’Connor said that she would like to see some breathing room in the plan. The plan is always cut so close financially that having some cushion would be beneficial. * Ellen Hughes mentioned that increasing the premiums this year could help not making it so drastic next year. * Peter Marcellino said that it is frustrating to workers that have just received a raise to then have their insurance premium increased and they lose it. He thinks that raising it a little this year and a little next year would be preferred. | Lois made a motion to adopt the Plan design committee’s recommendations. Lew Miller seconded. No abstentions. Motion passed.  Amendment on 4/20/18: Lois Baxter made a motion to adopt the 4% premium increase with no increase to deductibles or coinsurance. Ellen Hughes seconded. No abstentions. Motion passed. |
| VII. Adjourn Meeting (11:07am) |  | Lois Baxter made motion to adjourn the meeting; Carrie Margrave seconded; no abstentions. Motion passed. |

*2018 Meeting Schedule*

* *May 10, 2018*
* *June 14, 2018*
* *July 12, 2018*
* *August 9, 2018*
* *September 13, 2018*
* *October 11, 2018*
* *November 8, 2018*
* *December 13, 2018*