



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, October 10, 2019 @ 8:30am
Central Maine Commerce Center, Augusta

Commission members in attendance: Diane Bailey, Lois Baxter, Kurt Caswell, Laurie Doucette, Darcey Emery, Becky Greene, Peter Marcellino, Carrie Margrave (via phone), Karen O'Connor, Robert Omiecinski, Heather Perreault, Joanne Rawlings-Sekunda, Will Towers, Kim Vigue, Jon Woodard.
(total = 15)

Commission members absent: Derek Chase, Cecile Champagne-Thompson, Eric Cioppa, Jonathan French, Terry James, Kelly John, Mara McGowen, Lew Miller.

Vacant seat(s): One

Others present:– Roberta Leonard, Shonna Poulin-Gutierrez, Joel Hill – Employee Health & Benefits; Holly Pomelow – Bureau Human Resources/DAFS; Sabrina DeGuzman-Simmons Joseph Bataguas, George Doyle, Al Saavedra, Louise McCleery – Aetna; Lianna Della Torre, Burr Duryee – USI; Lisa Lagios, Jonathan Edwards - Anthem Blue Cross and Blue Shield; Erica Brown, Kelsey Robinson – MDC Public Health; Peter Hayes - Healthcare Purchaser Alliance of Maine; Laura Robert - Sun Life; Tashia Fenzi, Tina Marie Cappabianca – The TGN Agency; Mike Sisk – Cross Benefit Solutions; Max Knutsen – Maine Health; Mark Sounders – Maine General Eric Stranger, Mike Morfe – AON; Bill Bourassa – Harvard Pilgrim

Agenda Item	Discussion	Action/Next Steps
<i>I. Call Meeting to Order (8:32am)</i>	Lois Baxter called the meeting to order.	
<i>II. Introductions</i>		
<i>III. Review & Approval of Minutes (September 12, 2019)</i>		Karen O'Connor made motion to accept the minutes; Will Towers seconded; no abstentions. Motion passed.
<i>IVa. UPDATES-MONTHLY</i>		
<i>a.i. Plan Experience Summary (active health & dental) USI - Burr Duryee</i>	Burr Duryee handed out the standard monthly reports: Policy Period Monthly Claims Report – Medical/Rx/Behavioral, Enrollment, Fixed Costs & Expected Claim Calculation and two dental Policy Period Monthly Claims Reports (current period and year end). Discussion highlights below: <ul style="list-style-type: none"> • <u>Medical Budget to actual (policy period):</u> 87.8% total including rebates & guarantees. Over \$13M in medical claims. Over \$4M in pharmacy claims. Over \$18M in total claims. Uptick on RX claims. Still within budget projection. • <u>Recap of FY18:</u> Still being provided for reference. 	



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	<ul style="list-style-type: none"> • <u>Dental</u>: Current loss ratio 99.6% for policy period. Stabilization fund to pay down the balance from previous years. First 3 months pay down by the State of \$69K, \$68K and \$73K. Trending in the right direction. 	
<p>a.ii. State of Maine Health Plan (medical update) Anthem Blue Cross & Blue Shield - Lisa Lagios</p>	<p>Information contained in written report; highlights and discussion noted below:</p> <ul style="list-style-type: none"> • <u>Executive Summary (9/18-8/19)</u>: Rolling medical claims over \$161M, total PMPM \$507K. Retiree population \$34M out of the \$163M. Total paid claims for July 2019 \$13M. Consistent. • <u>Administrative Fees and Claims (3/19-8/19)</u>: Display of weekly and monthly invoices broken into categories. New this month MGARA assessment fee for ancillary members. • <u>High Cost Claimants (over \$50k)</u>: Paid over \$69M to 617 members, 154 are retiree members that account for over \$18M. 19 children under the age of 1 at over \$2M. This number reflects newborn claims, not multiple births and is increasing, watching closely. \$1.6M in complex medical cases. • <u>Paid Claims Distribution</u>: 3,167 members have not filed a medical claim. 48% of members have claims less than \$1K. Less than 1% of members have claims over \$100K. Very consistent with benchmark. • <u>Top Ten Facilities</u>: Consistent based on population. • <u>Emergency Room (rolling 12 months)</u>: Over \$10M in E/R charges or 6.4% of total medical paid amount. 50.6% of total visits are potentially avoidable, costing over \$3M. Members could utilize 24/7 NurseLine, walk in centers or LiveHealth online. 82 members have registered on Live Health on-line. • <u>Top 20 ER Providers by paid amount (rolling 12 months)</u>: Breakdown per facility. Maine General Medical Center had the highest number of ER visits at 1333 and the largest amount in paid claims over \$2M. New walk in center located at 5 Central Maine Crossing in Gardiner, ME. • <u>Targeted Health Conditions</u>: Consistent. Depression for children is high, but not uncommon. Children are considered up to age 26. • <u>Cancer Summary</u>: Breakdown of type of cancer, number of members and claims amount. 	



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- Engagement Summary: Total members 26,536, with 420 members engaged. Engaged members work with nurse case managers. Members receive a phone call, then a follow up of 5 letters asking members to participate.
- Lifestyle Conditions: Claims attributed to specific lifestyle conditions make up for over 24% of total dollars spent. Osteoarthritis except low back represents the primary lifestyle related condition by paid amount and is 4.2% of total paid claims amount. Hypertension represents the highest lifestyle related condition per 1000 over 19% above the benchmark. Weight, diet, tobacco use, exercise, obesity and preventative screenings are key factors.
- Preventive Screenings: Above benchmark for most. Gap in cervical and colon cancer screenings.
- Joanne Rawlings-Sekunda asked to explain what MGARA is and why. Kurt Caswell responded this is a fee associated with a high risk pool. That applies to State of Maine ancillaries and legislative employees not active State of Maine employees. Employee Health & Benefits is receiving a lot of push back regarding this. Kurt Caswell has a meeting scheduled with the Attorney General's office to get a final ruling on the fee. Kurt Caswell advised ancillaries to hold any MGARA invoices they may have received until a full explanation of the fee.

**a.iii. Medicare Advantage Plan
Aetna – Sabrina DeGuzman-
Simmons**

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

- Call Summary (1/19-9/19): Trending consistent. Members use of AetnaNavigator.com is increasing.
- Executive Summary – Medical (rolling 12 months): Correction from prior month provided. Membership (6/18-6/19) has increased by 3.1%. Medical pharmacy cost has increased by 5.1%. Going to look into what is driving this increase. Members on the Medicare Advantage plan are increasing, projected to increase drastically for July due to retiree transition program.
- High Cost Claimants Over \$100k: Renal disorders are new to the report.
- Top 10 Diseases by Paid Amount: Hypertension and Hyperlipidemia still the top two. Consistent.



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	<ul style="list-style-type: none"> • <u>Utilization Detail by Medical Cost Category</u>: Total number of claims 285,845. Total admits 1,898. Total paid amount over \$79M. Consistent month to month. Depression replaced by mental health in the top ten. • <u>Top 10 Provider Services Profile by Paid Amount (7/18-6/19)</u>: Consistent. • <u>Website Statistics</u>: 1400 members, low. Talk about having a communication to boost utilization. 	
<p>a.iv. Executive Summary Highlights <i>Employee Health & Benefits - Kurt Caswell</i></p>	<p>The Executive Summary report was provided to the Commission via e-mail prior to the meeting. Discussion highlights below:</p> <ul style="list-style-type: none"> • <u>Communication of Health Premium Credit Criteria – FY20</u>: Only for SOM employee, does not apply to ancillaries. • <u>Dental Deficit Reduction</u>: Theme is heading the right way, end of FY projected to be \$0.00 • <u>WorkDay HRMS “go-live” Date</u>: Moved from January 1, 2020 to March/April 2020. Things are going well, need extra time to produce a quality product. 	
IVb. UPDATES – BIENNIAL		
<p>b.i. Dental Plan <i>Northeast Delta Dental - Marie Bridges</i> <i>(Provided in February & September)</i></p>	<p>Formal report not due this month.</p>	<p>Jonathan French asked is there a way to track individuals participating in the HOW program and the benefit this has on members. Marie Bridges said they are working on this data. September 2019</p>
<p>b.ii. Living Resources Program – ComPsych – Tricia Mahoney <i>(Provided in June & October)</i></p>	<p>Formal report not due this month.</p>	
<p>b.iii. State of Maine Health Plan Express Scripts, Inc. - Sue Wolf and Brian Hammons <i>(Provided in March & August)</i></p>	<p>Formal report not due this month.</p>	
IVc. UPDATES – ANNUAL		



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<p>c.i. WellStarME Medical Care Development – Erica Brown (Provided in August)</p>	<p>Formal report not due this month.</p>	
<p>c.ii. Expert Medical Opinion Grand Rounds – Ellen Fallon (Provided in October)</p>	<p>Information contained in written report; highlights and discussion noted below:</p> <ul style="list-style-type: none"> • Speaker unable to attend, will reschedule. 	
<p>IVd. EDUCATION</p>		
<p>d.i. Retiree Exchange Model AON- Eric Stranger, Mike Morfe</p>	<p>Information contained in written report; highlights and discussion noted below:</p> <ul style="list-style-type: none"> • <u>The Mechanics of the Strategies</u>: An innovation for over 10 years in the private sector focusing on Medicare eligible plan participants. Plan sponsors have offered national medical indemnity Medicare supplemental coverage to post 65 retirees and dependents. Councilors work with members to develop a plan that most meets their needs by learning the members demographic information, what prescription drugs the member is currently taking and about possible health factors. Counselors work to provide clarification to member’s making sure eligibility requirements are understood and by clarifying the different plan choices, making it less confusing for the member. Councilors also help the member enroll. Members may change their plan annually. • <u>Evaluating the Options</u>: Plan sponsors typically get savings from utilizing this program. Member see savings as well, harder to retrieve. data on this. 	
<p>V. Other Business</p>		
<p>V.i. Medical Advantage Renewal – Kurt Caswell</p> <p>V.ii. Open Discussion - All</p>	<p>Information contained in written report; highlights and discussion noted below:</p> <ul style="list-style-type: none"> • <u>Gene Therapy Drugs</u>: Zolgensma – designed to cure Retinal Dystrophy (rare genetic condition-gradual vision loss) costing over \$425K per eye. The drug is administered 1 time for a child less than 2 year of age. Luxturna – designed to cure Spinal Muscular Atrophy costing over \$2M. for one infusion. This is the first drug on the market that has a payment plan. Lisa Lagios stated Anthem would 	<p>Lois Baxter made a motion to wait until plan design to implement Zolgensma and Luxturna with the exception of a case in need Diane Bailey seconded; no abstentions. Motion passed.</p>



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	<p>pay the claim in full not in portions. Current treatment is on going and only maintains the illness does not cure it. Laura Roberts stated Sun Life has already seen one case.</p> <ul style="list-style-type: none"> • <u>Medicare Advantage Renewal</u>: Two options. Option one – unsmoothed rates. Option 2 – smoothed rates. Changes recommended by plan design, removal of coaching benefit 0% utilization and Teladoc 1 person used. Add transportation benefit (24 one-way trips/60mile rides). Increasing the premium but still staying within the statutory limit for FY20. • <u>Hearing Aid Provisions</u>: 4 different levels to consider. Most cost effective is to update the benefit to \$1,000 per 36 months. Increasing the premium by \$0.75 cents. Current benefit is \$500. per 36 months. Sabrina DeGuzman-Simmons stated this benefit will resets at \$1,000. • Karen O'Connor asked if plan design could consider reducing the copay for chiropractic services, not a lot of support in the past, but will readdress at the next plan design meeting. 	<p>Lois Baxter made a motion to accept option 2 with the hearing aid recommendation, Robert Omiecinski second, 1 abstention. Motion passed.</p> <p>Diane Bailey requested to have a copy of the Medicare Advantage transition letter before the letter is distributed to help field calls. Kurt Caswell is currently working on edits and will provide a copy. The letter is projected to go out in about a month.</p>
VI. Adjourn Meeting (10:24 am)		<p>Karen O'Conner made motion to adjourn the meeting; Laurie Doucette seconded; no abstentions. Motion passed.</p>

2019 meeting schedule available at www.maine.gov/bhr/oe