

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, May 21, 2020 @ 8:30am Microsoft Teams Meeting

Commission members in attendance: Diane Bailey, Lois Baxter, Kurt Caswell, Cecile Champagne-Thompson, Darcey Emery, Jonathan French, Deidre Kinney, Peter Marcellino, Carrie Margrave, Mara McGowen, Lew Miller, Karen O'Connor, Robert Omiecinski, Heather Perreault, Michelle Probert, Joanne Rawlings-Sekunda, Kim Vigue, Frank Wiltuck & Jon Woodard.

(total = 19)

Commission members absent: Derek Chase, Laurie Doucette, Terry James, Kelly John & Will Towers

Vacant seat(s): None

Others present: Roberta Leonard, Shonna Poulin-Gutierrez, Joel Hill & Paige Lamarre – Employee Health & Benefits; Breena Bissell – Bureau of Human Resources/DAFS; Sabrina DeGuzman-Simmons & Kevin Fenton – Aetna; Lianna Della Torre, Burr Duryee, Heidi Giroux & Michael Rosenman – USI; Jonathan Edwards, Lisa Lagios, Kristine Ossenfort, Stefanie Pike & Jean Wood - Anthem Blue Cross and Blue Shield; Sue Wolf – Express Scripts; Laura Roberts – Sun Life; Kelsey Robinson - MCD Public Health; Cindy Walsh – Humana; Trevor Putnoky – Healthcare Purchasers Alliance; Marie Bridges & Courtney Morin – Northeast Delta Dental; Mark Sounders – Maine General & Tina Marie Cappabiance – The TGN Agency.

Agenda Item	Discussion	Action/Next Steps
I. Call Meeting to Order (8:32 am)	Jonathan French called the meeting to order.	
II. Introductions		
III. Review & Approval of Minutes (April 16,2020)		Frank Wiltuck made motion to accept the minutes; Robert Omiecinski seconded; Motion passed.
	IV. COVID-19 UPDATE	
a. COVID-19 Update Employee Health & Benefits - Shonna Poulin-Gutierrez	Information contained in written reports; highlights and discussion noted below: • Common Terms: Probable cases – someone has been identified to be in close contact with a positive case. Antibody test – check your blood by looking for antibodies, which show you have a previous infection with the virus. Recovered cases – a person has met the released from isolation requirements defined by Federal CDC. Epidemiology (Epi)	



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Jonathan French Labor Co-Chair

	 team – disease detectives. Community spread – spread of contagious disease to individuals in a geographic location. Asymptomatic: 35% of individuals that test positive have the virus but do not have systems. Director Shah of the Maine CDC: Gives an update almost daily at 2pm on Maine cases and fields media questions. 23% of Maine cases are healthcare workers as of 5/20/20. Maine has a FrontLine WarmLine available to clinicians and first responders as a support tool. 3 Month Comparison of Confirmed Positive Cases: 3/18/20 30, 4/15/20 770 and 5/20/20 1,819. There are 38,154 negative cases in Maine as if 5/20/20. HR Reentry Transition Committee: Led by Breena Bissell Joanne Rawlings-Sekunda asked if antibody testing will be part of the reentry transition and if the State's health plan would cover the cost. Kurt Caswell responded conversations are happening, but no decisions have been made yet. 	
	V. QUARTERLY PLAN UPDATES	
a. Plan Experience Summary (active health & dental) USI - Burr Duryee	 Information contained in written reports; highlights and discussion noted below: State of Maine Fees (7/19-3/20): Summary of fees totaling over \$46M. Medical Budget to actual (policy period): 90.0% total less rebates & guarantees. Over \$13M in medical claims. Over \$4M in pharmacy claims. Over \$18M in total claims. Overall plan running well to budget. Medical Recap of FY19: Still being provided for reference. Dental Claims Report (policy period): Balance forward after stabilization payment is over \$161K. Summary of loss ratio 86.2% Dental Recap of FY19: Still being provided for reference. 	
b. State of Maine Dental Plan (dental update) Northeast Delta Dental – Marie Bridges & Courtney Morin	Information contained in written reports; highlights and discussion noted below: • <u>Utilization Summary (5/19-4/20)</u> : Total claims paid over \$6M. Average number of enrollments 13,275. Average cost PEPM \$42.24, down about 10%. Ove 50% of claims are paid on preventative services. 83% of dentist are in the SOM premier network.	Kurt Caswell requested information on how any incentive programs in use at other employer work and if there are metrics of success. Marie Bridges will provide.



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

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- <u>Claims Comparison Report</u>: Comparison of FY18, FY19 to current. Current months lower than previous years.
- Claims Utilization (5/19-4/20): Total subscriber claims over \$3M.
- Annual Maximum Summary: 2.06% of member have met the plan maximum.
- Oral Health: 28% of members have not been to the dentist at all.
 Kurt Caswell asked if NEDD has developed any communication or
 incentives to encourage members to utilize dental care. Marie Bridges
 stated NEDD can reach out to the targeted members via mail. Some
 employer groups give a discount as an incentive. Members can
 register online to learn more about the benefits of oral health. SOM
 very close to Delta's BOB
- HOW Program: Implemented a HOW program to help improve overall oral health for members. The HOW program is a free software program provide to all dentist offices. The hygienist logs information to see if the member qualifies. Out of 6,518 assessment completed 5,799 members qualified. Once a member qualifies, they always have the benefit.
- Claims Comparison by year (2015-2019): High risk members, low risk members and members with no risk score. Total paid claims have increase for high risk members from \$68K in 2015 to over \$2M in 2019. Low risk increased from \$14k in 2015 to \$266K in 2019. No risk has decreased from \$6M in 2015 to \$4M in 2019.

c. State of Maine Health Plan (medical update) Anthem Blue Cross & Blue Shield - Lisa Lagios

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

- Executive Summary (4/19-3/20): Rolling medical claims over \$166M, total PMPM \$523K. Retiree population \$31M out of the \$166M. Total paid claims for current month over \$13M.
- Administrative Fees and Claims (10/19-3/20): Display of weekly and monthly invoices broken into categories. \$412K in administrative fees for the month of March.
- High Cost Claimants (over \$50k): Paid over \$76M to 655 members, 147 are retiree members that account for over \$19M. 18 children under the age of 1 at over \$2.3M. This number reflects newborn claims, not multiple births. 2 new cases have been added and 3 are no longer active.

Kurt Caswell requested the emergency room information separated out by Maine geographies. Lisa Lagios will provide starting next month.



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

Jonathan French

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- <u>Paid Claims Distribution</u>: 2,897 members have not filed a medical claim in the past 12 months. 49.4% of members have claims less than \$1K. Less than 1% of members have claims over \$100K. Consistent.
- <u>Top Ten Facilities</u>: Consistent based on population. Maine Heart Center affiliated with Manie General.
- Emergency Room (rolling 12 months): Over \$10M in E/R charges or 6.3% of total medical paid amount. 50% of total visits are potentially avoidable, costing over \$3.4M. Members could utilize 24/7 NurseLine or LiveHealth online. 908 new members have registered on LiveHealth On-line from 1/20-4/20. 194 members called the nurse 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 1358 and the largest amount in paid claims over \$2M.
- <u>Targeted Health Conditions</u>: Consistent month to month. 67% of members account for these conditions. Low back pain has moved up to #5.
- <u>Chemotherapy Summary (rolling 12 months)</u>: Breakdown of type of cancers. Top two: aftercare and breast cancer. Lung cancer has increased. Increased utilization at Maine General Medical Center.
- <u>Engagement Summary</u>: Total members 26,584, with 421 members engaged. Engaged members work with nurse case managers.
- <u>Chronic and Complex Conditions</u>: Claims attributed to specific chronic and complex conditions make up for over 24% of total dollars spent.
 Stress, anxiety and depression have increased.
- <u>Preventive Screenings</u>: Above benchmark for most screenings, consistent.
- <u>Covid-19 Results</u>: 81 labs processed in Maine, 29 are positive as of 5/21/20. 10 members have been admitted in the hospital, 9 have been discharged. Federal guidelines are recommending covering 100% of treatment through 12/31/20 and TeleHealth through 9/30/20. Cecile Champagne-Thompson asked if antibody testing is covered at 100%. Lisa Lagios stated yes.



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

Jonathan French Labor Co-Chair

	 Jonathan French asked about LiveHealth Online wait times. Lisa Lagios stated calls have increased due to Covid-19. Physicians are 	
d. State of Maine Health Plan (pharmacy update) Express Scripts - Sue Wolf	 utilizing telehealth as another option to help lower wait times. Information contained in written report; highlights and discussion noted below: Trend Dashboard (7/19-3/20): Comparison of the State of Maine to ESI Government peer. Total plan cost net PMPM, non-specialty plan cost net PMPM and specialty plan cost net PMPM the State is slightly higher in all 3. Top 3 Conditions: Inflammatory increased 26.4%, cancer increased 46.2% & diabetes increased 7.6%. Multiple sclerosis decreased 17.9%. Over 50% of plan spend is on specialty medication. Mental health increase is being watch carefully by ESI. Has increased slightly for 2020. Mental health refers to the following: sleep disorder, depression and anxiety. Trend Components Plan Cost Net PMPM: Specialty vs non specialty and manufacture cost. Totaling trending at 12.2%. Covid-19 medication are generally distributed in hospitals. Benefit Plan Overview: Provided as a reference Top 25 Drugs: Top 3 are used to treat inflammation. Jonathan French asked if ESI has a plan to keep cost down for drugs prescribed for inflammation. Sue Wolf stated yes, but subscriber approval is needed to change the drug prescribed. Cost are lower, but not as low as a generic price point. Kurt Caswell stated EH&B is taking a hard look at formulary RX's to determine what is appropriate to remain in the plan. Some drugs prescribed are a combination of over the counter drugs. 	
e. Medicare Advantage Plan Aetna – Sabrina DeGuzman- Simmons	 Information contained in written report; highlights and discussion noted below: Performance Highlights (2/19-1/20) Treading above BOB. When comparing with the BOB the SOM data is removed. Demographics: Average age 75, consistent month to month. 13.1% of members are above the age of 85. Cost Overview (2/19-1/20): Total medical paid over \$81M. Pharmacy spend increased 14.3%. Catastrophic Claims: Inpatient over \$4M, Ambulatory over \$5M. 	Kurt Caswell will look at 60-day utilization of Telehealth with Aetna effective March 1. If members are utilizing the Commission may want to consider adding it back to the Aetna plan for the remainder of the calendar year. April 2020



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

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f. Financial Update – Frank Wiltuck	 High Cost Claimants Over \$100k: Consistent. Diagnosis Category (all members): Hypertension and Hyperlipidemia are the top two. Members are counted per diagnosis. Top Facilities: Consistent. All facilities listed are in network and are located in Maine. Care Management Programs: Q2 2020 is slightly above BOB. Stars Outcome (Q1 2019 to Q2 2020): Adult BMI assessment increased from 43% to 60%. Fitness Overview: SilverSneakers 26% of members are enrolled New Programs Update: Access2Care - transportation to and from medical appointments. AbleTo- well-being support treats PTSD, depression and anxiety. Meal Program – 14 meals delivered after a hospital stay to provide 2 meals a day for 7 days. A communication will be going out to members shortly. Website Activity (4/19-4/20): Total visits 2,297. Covid-19 Update: Continue to wave copays for diagnostic testing and will continue to adjust timeline. Information contained in written report; highlights and discussion noted below: Financial Update: YTD snap shot as of 3/18/20 of the operating system for EH&B. Over all expenses over \$125M overall revenue \$46M. Balance Sheet (7/1/19-5/18/20): 3-month lag on claims. About \$86M of liabilities. Mimic closing of the books total \$46M. Finance committee has not met yet to go over details or how the report will be in the future. 	
	VI. OTHER BUISNESS	
a. Executive Summary Highlights (EH&B) - Kurt Caswell	 Information contained in written report; highlights and discussion noted below: IRS Covid-19 Relief Options: Allow employees to elect health coverage to enrolled, change coverage or cancel coverage thru 2020. Allow changes to FSA contributions, use period or carry-over amounts. Plan sponsors may adopt all, some or none of the options. Jonathan French asked how this could affect open enrollment. Kurt Caswell stated EH&B would provide a formal communication on what is decided. Mara McGowen stated changes may not be highly utilized, 	Lisa Lagios to provide a list of extension option Anthem can accommodate. Karen O'Connor made the motion to extend for 3 months the suspension of Covid-19 related co-sharing provision spending receipt of Anthem's ability to adjudicate interim extensions Robert Omiecinski seconded. Motion passed.



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a. Compliance Review	most are going to be qualifying life event. Burr Duryee states the stop loss must be considered before changes can be made to see if they can accommodated. • Medicare Advantage Plan Updates: Aetna has extended special Covid-19 plan provisions, waiving copays for Covid-19. • Anthem Medical Plan: Anthem has not extended special Covid-19 plan provisions of waiving copays for Covid-19 testing. • Dental Plan: Surplus as of 4/30/20 is \$854K. Delta Dental is providing a July "premium holiday" for fully insured customers. Effective 7/1/20 the State's dental plan will be self-insured. • Pharmacy RFP: Passed the States review process, estimated release date of 6/1/20. • General Health Plan Information: Medical claims have decreased 30%-40%, similar decrease expected in April. VII. UPDATES - SEMI-ANNUAL Information contained in written report; highlights and discussion noted below:	Carrie Margraves made to motion to wait until the June SEHC meeting to asses the premium holiday for the dental program. Joanne Rawlings-Sekunda seconded. Motion passed
a.i. State – Anthem – <i>Kristine</i> Ossenfort	Reporting did not take place due to time allotment.	
a.ii. Federal – USI <i>– Michael</i> <i>Rosenman</i>	Information contained in written report; highlights and discussion noted below: • Reporting did not take place due to time allotment.	
	VIII. EDUCATION	
	Formal report not due this month.	
	IX. FUTURE UPDATES – SEMI-ANNUAL	
a. Living Resources Program - ComPsych - Tricia Mahoney (Provided in June & October)	Formal report not due this month.	
b. WellStarME Medical Care Development – Erica Brown (Provided in August)	Formal report not due this month.	
c. Carrum Health Program – Carly Winokur (April & October)	Formal report not due this month.	



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d. USI Compliance Presentation (May & November)	Formal report not due this month.	
e. Expert Medical Opinion Grand Rounds (June & December)	Formal report not due this month.	
	X. REQUEST MOTION TO ADJOURN	
X. Adjourn Meeting (12:31 am)		Robert Omiecinski made motion to adjourn the meeting Jon Woodard seconded; no abstentions. Motion passed.

2020 meeting schedule available at www.maine.gov/bhr/oeh