### **HCPC MEETING MINUTES**

**DATE AND TIME:** November 29, 2016, 9 AM **LOCATION:** Risk Management Building

**VOTING MEMBERS:** 

Х	Stephanie Bohrnsen	KPESA	
Х	Joel Burns	КРЕА	
Х	Vaughn Dosko	КРАА	
Х	Matt Fischer	KPEA	
Х	Liz Hayes	District	
Х	John O'Brien	District	
Х	Laurie Olson	District	
AB	Bruce Rife	KPEA	
Х	Tracy Silta	KPESA	
Х	Patty Sirois, chair	KPESA	
Х	Terri Zopf-Schoessler, secretary	КРЕА	

**QUORUM PRESENT:** (NINE MEMBERS NEEDED) \_\_X\_YES \_\_\_\_NO **ADMINISTRATION/CONSULTANTS:** 

Х	Stacey Cockroft	Benefits Manager	
X	Dave Jones	Plan Administrator	
Х	Colleen Savoie	Parker-Smith-Feek Consultant	

#### **GUESTS PRESENT:**

PHONE	Kevin Reilly	Aetna, case management	
PHONE	Tiffany Rogers	Aetna	
PHONE	Maryellen Schuman	Aetna	

Α.	CALL TO	<b>ORDER</b>	BY Patty	Sirois	<b>TIME 9:10 A</b>	M.
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1.	Approval of	Agenda	X	as written,	, with flexibility	with additions
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a. MOTION: Terri SECOND: John VOTE: Unanimous

2. Approval of Minutes October 19, 2016 \_\_X\_ as written \_\_\_\_ with amendments

a. MOTION: Laurie SECOND: Liz VOTE: Unanimous

- B. REPORTS—Reports from individuals listed below were deferred to allow time Aetna's and Teledoc's representatives as well as Colleen Savoie to make their presentations and answer committee members' questions.
  - 1. Dave Jones, Plan Administrator
  - 2. Stacey Cockroft, Benefits Manager. Dave and Stacey jointly commented that...
    - HEALTH PLAN REGIONAL MEETINGS: They have conducted health plan meetings throughout the district explaining the new health plan options.
    - WEBSITE INFORMATION: FAQs about the new health plan options have been posted on the KPBSD website.
    - OPEN ENROLLMENT: Open enrollment continues November 14, 2016 through December 16, 2016. Employees may opt out the plan altogether OR opt in to the HDHP plan. If no change is requested, employees will remain on the traditional plan. Stacey will email employees who fail to list dependents on their open enrollment forms to ensure that their options are correct.

• STOP-LOSS REPORT: The stop-loss report is available. The district is currently waiting for reimbursement on \$216,299.03 in claims.

#### 3. Laurie Olson, Director of Finance

- HEALTH PLAN HANDOUT: Laurie shared the handout that was given to employees at the
  health plan meetings. This handout is also posted on the district's website under FAQs.
  Laurie again stressed that those who do NOT fill out the opt out or opt in to the HDHP forms
  will remain on the traditional plan.
- THANK YOU: Patty thanked Laurie for her service to the district and to the HCPC as she is retiring at the end of December; committee members thanked her as well.

### 4. Colleen Savoie, Parker-Smith-Feek Consultant

- HEALTH FAIR DATA: Colleen shared the health fair utilization document. This year saw increased usage of 10-18%—depending on the tests—over last year, which is healthy growth.
- ACA IMPACTS: She also shared the latest ACA impact alert but warned that the new federal administration's potential changes are largely unknown at this time.
- WELLNESS PLANS: The HCPC requested that Colleen research various fitness/wellness plans
  and report back as to their costs and effectiveness. She said that wellness plans vary greatly
  in their goals, the personnel/time it takes to implement and maintain them, and the kinds of
  resources required.

### C. OLD BUSINESS

- 1. Aetna Network mental health presentation notes: (Tiffany Rogers and Kevin Reilly via teleconference) Managed behavioral health includes mental health services and substance abuse programs. Kevin Reilly, a psychologist and an Aetna case manager, explained that precertification is not needed for outpatient care; inpatient care does require precertification. He was also able to delineate Aetna's behavioral health philosophy, process, and case management system; discussion by the HCPC members centered on availability of mental health professionals in the area.
  RESULTS: Motion to add the "buy-up" managed behavioral health plan at \$1.25 PEPM effective February 1, 2017 made by Matt. Seconded by Tracy. VOTE: Unanimous. Colleen agreed to compile current in/out patient utilization data for the next meeting.
- 2. Caremark Advanced Control Formulary: (Wayne Selverda via teleconference) The Advanced Control Formulary excludes some expensive medications from coverage except as a medical necessity and with an accompanying appeals process. The estimated conservative savings after implementation is \$89,000 per year realized through enhanced manufacturer's rebate guarantees, which are price protection controls designed to counteract some of the direct advertising costs, and improved generic dispensing rates. (The most typical medications affected by the ACF are Albuterol inhalers and insulin, diabetic test strips and supplies.) If implemented, this would impact 121 plan participants who would either have to transition to covered medications or go through the appeals process, which may require a doctor's visit or—in some cases—a phone call. A letter directly notifying those affected by this change would be sent either 30 or 60 days in advance of the change—or possibly twice. Changes to this formulary typically occur in January although some may occur quarterly.

  RESULTS: Motion to implement the Advanced Control Formulary April 1, 2017 made by Matt.

  Seconded by Laurie. VOTE: Unanimous. Dave agreed to draft the notification letter for those directly affected by this change. NOTE: The specialty drug formulary has already been voted in and will be implemented January 1, 2017.
- 3. HDHP: (Patty) Discussions about the new high deductible plan were tabled until the next meeting.

# D. NEW BUSINESS

- 1. <u>2017 Stop-Loss contract renewal</u>: (Dave Jones) Voya will continue as the district's stop-loss insurance provider with the same contract and cost to the district. The renewal contract calls for a \$220,000 ceiling for the point when stop-loss insurance takes over.
- 2. <u>Medically ordered PT/OT visits</u>: (Matt Fischer) There is concern that some physical therapists accept patients and bill treatments that are not medically ordered. Colleen shared that in 2015, Rehn paid claims for 2,302 physical therapy visits. After some discussion, the HCPC asked Colleen and Stacey to prepare data on the number/percentage of PT/OT visits that are medically ordered.
- 3. <u>Health committee communications</u>: As new changes are implemented, timely communications with members are critical. Laurie offered to explore using Tableau, suggested by John O'Brien, as a means of communicated HCPC information monthly to district employees.
- 4. <u>Soldotna Professional Pharmacy</u>: Stacey agreed to contact Justin Ruffridge at Soldotna Professional Pharmacy about the possibility of an on-call pharmacist who could fill off hours prescriptions for Central Peninsula participants. She will report back at the next meeting.

# E. ADJOURN TIME 2:00 PM

- a. MOTION Matt SECOND Laurie VOTE Unanimous
- F. NEXT MEETING January 18, 2017, 3-5 PM, Risk Management Building