

**MINUTES OF THE
CAPE COD MUNICIPAL HEALTH GROUP**

STEERING COMMITTEE

Wednesday, June 21, 2006
Dennis Yarmouth RSD Administration Building, South Yarmouth, MA

MEETING NOTES
(no quorum)

A meeting of the Steering Committee of the Cape Cod Municipal Health Group (“CCMHG”) was held on Wednesday, June 21, 2006, at the Dennis Yarmouth RSD Administration Building, South Yarmouth, MA. The following people attended the meeting.

Committee Members Present:

Robert Whritenour, Chair	Town of Falmouth
Noreen Mavro-Flanders, Board Chair	Dukes County
Francis “Skip” Finnell	Dennis Yarmouth RSD
Robert Canevazzi	Town of Dennis

Guests Present:

Suzanne Donahue	Blue Cross Blue Shield (BCBSMA)
William Hickey	Harvard Pilgrim Health Care (HPHC)
Amy Travers	Harvard Pilgrim Health Care (HPHC)
Katie Hundt	Delta Dental
Carol Cormier	Group Benefits Strategies (GBS)
Lisa Trombly	Group Benefits Strategies (GBS)

Chairman, Robert Whritenour called the meeting to order at 9:20 a.m. He said that there was not a quorum so the Committee would have to deal with the issues not requiring a vote.

Harvard Pilgrim Reporting Presentation:

Bill Hickey introduced Amy Travers, HPHC Analyst, to review the Harvard Pilgrim reporting capabilities.

Amy Travers reviewed the benchmarking and recommended to the Steering Committee that they consider requesting this report to be CCMHG specific. She stated that it should be included with the Risk Adjustment Analysis report that breaks the risk down by category.

Amy Travers also recommended that CCMHG take advantage of the Cost-Driver Analysis report and said she would explain the data, Group specific, when the report is run.

Carol Cormier asked Ms. Travers if the “over 64” reporting could be separated for Medicare eligibles and have HPHC tell each town how the costs of care for Medicare eligibles enrolled in active employee plans impacts the costs of the plans. She asked that this report identify those on Active plans vs. the Sr. plans.

Ms. Travers said this type of report could be generated.

There was a brief discussion regarding utilization.

It was agreed that the reports should generate ongoing dialogue between the Group and HPHC.

Mr. Whritenour thanked Ms. Travers for her presentation. Ms. Travers left the meeting at this time.

Harvard Pilgrim Disabled Dependent Eligibility:

Bill Hickey explained that the eligibility criteria for HPHC insured plans has changed with regard to disabled dependent status. He said the revision now allows for coverage for those who become disabled while enrolled as a full-time student in an accredited educational institution before age 25. He said previously, the criteria was that the disability would have to have occurred prior to the dependent turning 19. Mr. Hickey further stated that this revision will be applicable to the self-insured plans of CCMHG unless they choose otherwise.

Carol Cormier said that HPHC is the only health plan organization that she is aware of that had the policy written with the age 19 limit.

Skip Finnell said he thought BCBS was like this as well.

Ms. Cormier explained that the BCBS policy states if a student between the ages of 19-25 becomes disabled they are covered as a disabled dependent adult on the family plan. She said the change proposed by HPHC makes their policy the same as the policies of the other health plans.

Bob Canevazzi said he didn't realize this difference in the plans. He said the Group should do more to share these types of differences with catastrophic coverage.

Carol Cormier advised that if such a catastrophe had occurred and the HPHC coverage ended for a dependent, the family could have changed to a BCBS plan during open enrollment.

Bob Whritenour said the policy revision be discussed again and voted upon at the next Steering Committee meeting.

Health Plan Reports:

Blue Cross Blue Shield – Suzanne Donahue said that BCBS has added a Depression Management program as well as programs for impact conditions such as acid reflux, lower back pain, and osteoarthritis. She said they have a new program designed to help identify the members in any of those categories.

Ms. Donahue said there was one member issue she wanted CCMHG to be aware of. She said they have a Medex member who needs a prescription each month and usually pays the \$15 copay. She said the manufacturer of the prescription will no longer supply it to Express Scripts and therefore the 20% copay. She said the medication costs \$4,815 for a one-month's supply. She said the 20% coinsurance amount of \$963 will become the responsibility of the member. Ms. Donahue explained if the member does not have the prescription, he will most likely die. She further explained that the family had applied to the drug manufacturer for financial assistance and to date had been turned down. She said the member has enough medicine to get through this week only.

Bob Whritenour said the Steering Committee cannot take a vote today because there are not enough members present. He said he had authorized Express Scripts to charge the Group for the coinsurance for one more month in order to get the member through until a vote can be taken.

Suzanne Donahue said that Express Scripts has allowed one more prescription refill based on the doctor's written orders.

There was a brief discussion.

Suzanne Donahue informed the Steering Committee of a guideline revision with Chiropractic coverage. She said the revision was effective April 1, 2006 and that BCBS has received a few complaints. Ms. Donahue said that the change information was sent to the providers to inform them that treatment that is not medically necessary will no longer be covered. She said the patient must show signs of improvement and cannot just continue to treat once they have reached a plateau.

A brief discussion followed.

Suzanne Donahue said that BCBS has not yet determined how it will handle the new Mass. law with regard to the extension of dependent coverage. She said BCBS is expecting an interpretation of the law by July 2007.

Carol Cormier explained the law stating that in some cases it will allow for dependents to be covered an additional 2 years beyond the original eligibility guidelines. She further explained that another law was recently passed that states any non-teacher public school employee is to be treated the same as teacher employees with regard to health insurance coverage for the months of July and August. She said she sent an email to the Group to inform them of this.

Skip Finnell said he doesn't think this is right. He said some of the non-teacher employees terminate in June and are not scheduled to return in September so he doesn't understand why they should continue on the employers health plan.

Ms. Cormier said it could be seen as an unfunded state mandate and that the Group could ask for a review by the State Auditor.

The Committee members expressed interest in pursuing a review by the state auditor.

CCMHG Website:

Lisa Trombly presented the CCMHG website. She said she needed the comments and review of the Steering Committee in order to proceed to the finished product.

Bob Whritenour suggested adding the pictures of the Steering Committee members. He also wanted to include a mission statement with the goals and objectives of the CCMHG.

Noreen Mavro-Flanders asked that the Facts and Profile be combined under one topic.

There was a brief discussion of proposed changes.

Reinsurance Quotations for FY07:

Carol Cormier reviewed the quotes that were received. She said the broker Cook and Company with Companion Life Insurance Company had supplied the most favorable quote of \$4.59 per individual contract and \$10.09 per family contract with a \$150 Deductible and a \$500K Aggregating Specific Deductible. Ms. Cormier said CCMHG needed to submit a disclosure statement before quotes would be finalized.

Bob Whritenour said he would like to accept the proposal on behalf of the Steering Committee members who were not present since the current policy ends on June 30. He said the acceptance could be ratified at the next meeting.

Noreen Mavro-Flanders said that an executive decision needed to be made and considering that both the Chair and Vice-Chair were present, the vote should be made.

Mr. Whritenour asked Carol Cormier about the proposals for the Carve-out plans.

Ms. Cormier said that Companion Life would not cover the Carve-out A but that they did agree to cover excess claims for Carveout A members as part of the Active plans policy to meet the \$150K deductible instead of the lower deductible. She also stated that Cook and Company runs its own data so they do not need to use the GBS data for tracking.

Request from Treasurer, West Tisbury:

Bob Whritenour said Kathy Logue, Treasurer of West Tisbury, was unable to attend the meeting today but she asked that her letter be discussed. He said Ms. Logue suggests that the CCMHG have a strategy for eliminating the traditional indemnity plans from the CCMHG menu.

Bob Canevazzi said he cannot see eliminating the traditional indemnity plans at the CCMG level. He said that this is a bargainable issue that can be dealt with at the local level.

Carol Cormier explained that if the Group were to decide to do away with the traditional indemnity plans and if an employer was not able to bargain this to agreement with one or more unions, the employer could stay in the Group, adopt the new benefit plans and then make the employees whole back to the previous copay levels through a reimbursement mechanism. She said another option would be for the employer to leave the Group and purchase health benefits on its own. She said that the legal counsel for another joint purchase group that had changed benefits said that an employer may charge the unions that don't agree to the benefit changes the premium that would have been set had there been no benefit changes. She said that counsel said that this was justified since the union members would be getting the higher benefit level through the employer's reimbursement mechanism.

Suzanne Donahue said that the Master Health Plus plan is slowly fading and has very few members left on it statewide, but BCBS is not terminating it all together at this time.

There was a discussion.

Noreen Mavro-Flanders said she saw a couple of issues with attempting to eliminate the indemnity plans at the joint purchase group level. She said that a lot of people in Duke's County are on the indemnity plans because the HMOs have not been sufficiently developed on the Island. She said she would like to see the enrollment numbers for each Island employer.

Bob Whritenour said he could understand this and does not feel that the CCMHG is at the point to be able to eliminate Master Health Plus or Master Medical but that it should be discussed. He said the Steering Committee may want to alert the Board about Kathy Logue's letter and get the broader feedback from the Board. He said it could be discussed at the next Board meeting in July.

Other Business:

Carol Cormier distributed a document listing cost-sharing and cost-savings measures that governmental employers can consider.

Ms. Cormier reviewed the draft advertisement for the Wellness Coordinator for Martha's Vineyard. She asked if the Steering Committee thought it should be advertised now.

Noreen Mavro-Flanders said it was already voted upon at the last meeting and so the Wellness Committee could proceed with the advertisement.

Carol Cormier said that Marie Buckner was not only the writer of the advertisement but was also nice enough to volunteer to be the contact.

Noreen Mavro-Flanders noted that there was a section of a sentence missing from the Minutes of May 24, 2006 and needed to be amended.

Bob Whritenour asked Carol Cormier to contact Ann Ludlow, MIIA, to try to obtain information on the credentials of the MIAA Wellness program coordinator.

There was no other business.

The meeting was adjourned at 11:50 a.m.

*Prepared by Lisa Trombly
Group Benefits Strategies*