

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

**STEERING COMMITTEE**

Wednesday, November 17, 2010, 9:00 AM  
Town of Sandwich Municipal Office Building  
Sandwich, MA

**MEETING MINUTES**

A meeting of the Steering Committee of the Cape Cod Municipal Health Group (“CCMHG”) was held on Wednesday, November 17, 2010 at the Town of Sandwich Municipal Office Bldg., 16 Jan Sebastian Drive, Sandwich, MA. The following people attended the meeting:

**Committee Members Present:**

Bob Whritenour, Chair	Town of Falmouth
Noreen Mavro-Flanders, Board Chair	County of Dukes County
Gerry Panuczak	Town of Chatham
Marie Buckner	Town of Sandwich
A. Francis (“Skip”) Finnell	Dennis-Yarmouth RSD
Maggie Downey	Barnstable County
Erin Orcutt	Cape Cod Technical High School

**Guests Present:**

Dr. Michael Follick	The Abacus Group
Linda Loiselle	The Abacus Group
Suzanne Donahue	Blue Cross Blue Shield of MA (BCBS)
Bill Hickey	Harvard Pilgrim Health Care (HPHC)
Fred Winer	Tufts Health Plan (THP)
Carol Cormier	Group Benefits Strategies (GBS)
Karen Carpenter	Group Benefits Strategies (GBS)

Bob Whritenour, Chair, called the meeting to order at 9:10 a.m.

**Approval of the Minutes of the October 27, 2010 meeting:**

Marie Buckner moved approval of the October 27, 2010 minutes as written.

Motion
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Skip Finnell seconded the motion. Noreen Mavro-Flanders abstained.  
The motion passed by a majority vote.

**Investment Committee Report:**

Skip Finnell said that there was nothing new to report.

Erin Orcutt was appointed to the Investment Committee.

Maggie Downey joined the meeting at this time.

**GBS Reports:**

Carol Cormier said that there were no changes made to the Funding Rate Analysis and Level Monthly Deposit reports since the last meeting.

*Stop Loss Reports*- Karen Carpenter reviewed the FY10 Stop Loss report with claims paid through September and said that the claims information has not changed since the last meeting. She said that reimbursements received since the last report totaled \$22,785. Ms. Carpenter reported a total of \$1.4M in reimbursements received for the FY10 policy year. Ms. Carpenter said that there were no reimbursements due on either the FY10 or FY11 policies. years.

#### **Wellness Committee Report:**

Maggie Downey said that the two Wellness Consultant contracts have been executed and said that the Wellness Consultants now submit standardized monthly reports and invoices. Ms. Downey reviewed the progress of the wellness programs for Cape Cod and Martha's Vineyard. Ms. Downey said that the next newsletter will be coming out in January, and she said that they are hoping to include information from the Vineyard. She said that she is going to speak at the CCMHG Benefits Administrators meeting in December and will emphasize the importance of disseminating the wellness information to the members.

Ms. Downey said that Dr. Michael Follick and Linda Loiselle will update the Committee on the progress of the Diabetes Rewards program later in the meeting.

#### **Treasurers Report:**

Treasurer, Rich Bienvenue, CPA reviewed the financial statements through September 30, 2010 (unaudited figures). He said that the Health Trust Fund Balance was \$25.32M at the end of September. He reported assets at \$34.7M and liabilities of \$9.45M. Mr. Bienvenue said that the adjustment to the IBNR (Incurred but not reported claims) is reflected in this balance. Mr. Bienvenue said that the IBNR adjustment brought the calculation down to approximately 0.8 of an estimated average month of claims.

Bob Whritenour briefly reviewed the Fund Balance Policy with the Committee.

Skip Finnell said that he is expecting that there will be additional pressure to get the projected rates out early to the Board this year.

Rich Bienvenue said that one of the entities of CCMHG is behind on member assessments, and he said that he may stop there today to discuss this.

Carol Cormier said that GBS found that the Town of Chatham's Harvard Pilgrim PPO plan invoices were being billed to another Joint Purchase Group since July of 2009. She said that the claims averaged \$5K per month. Ms. Cormier said that GBS contacted HPHC, and they will be making an adjustment to the billing.

#### **Programs managed by Abacus Health Solutions:**

*myMedicationAdvisor® (MMA)* - Linda Loiselle reviewed the MMA utilization through September and said that after four months, the alternative savings program is ahead of projections. Ms. Loiselle said that a promotional mailing was done in September and all new promotional materials were sent out to members.

Carol Cormier asked Ms. Loiselle to add a header to the MMA reports.

Dr. Michael Follick said that the medication lists have expanded and said that the group is on target to double the projected savings. He said that the members are very happy with the program and savings.

*Diabetes Care Reward Program*- Linda Loiselle distributed the rewards program report for the year ending August 31, 2010 and said that 17 additional participants have joined the plan since this report was run. Ms. Loiselle said that there were 217 participants reported and said that 87 or 40% of those have met all five requirements. Ms. Loiselle said that there are several newly enrolled participants that have not had time to become compliant yet. She said that there are approximately 1,150 CCMHG members that have diabetes. Ms. Loiselle said that there were a total of \$11,353 waived co-pays for diabetic medications and supplies through August 31.

Dr. Michael Follick said that to better understand why the CCMHG participation growth is slower than expected, Abacus organized a physician focus group to see how they could best support them in helping their patients meet the goals of the diabetes program. Dr. Follick said that the focus group was comprised of 13 physicians. He said that 2 were endocrinologists and the remainder were primary care or internal or family medicine physicians. Dr. Follick said that the physicians frequently commented on the unpaid time for common services in primary care, such as counseling about diabetes and filling out patient forms. He said some of the participants of the focus group indicated that there was confusion about what they are being asked to do to assist the members in the program. Dr. Follick said that this prompted Abacus to send a targeted mailing to all non-registered Cape Cod diabetic members who might want Abacus to contact their physician for assistance in meeting the program requirements. He said that 20 physician offices have been contacted to date.

Linda Loiselle said that another reason for the slower participation growth may be due to the member's current low co-pay of \$5. They may not think that the free supplies and medications is much of an incentive.

Dr. Follick said that Abacus is committed to working with both the patients and their physicians to support enrollment and compliance in the program as well as developing strategies for further partnering with the physician community. He said the strategies include ongoing communication to the physicians when requested by patients, developing reward strategies, promotion of and access to Centers of Excellence and collaborating with local resource centers to promote the program.

Carol Cormier said that another Group participating in the Diabetes Rewards Program chose to send letters from the Board Chair to the head of each participating employer unit in hopes of gaining their support for the program.

#### **Town of Edgartown Request for Special Open Enrollment:**

Carol Cormier said that the Town of Edgartown is requesting a Special Open Enrollment in January to be effective on February 1, 2011. She said that the Town voted to eliminate the Master Health Plus plan as of July 1, 2011.

Skip Finnell made a motion to approve the Special Open Enrollment for the Town of Edgartown in January to be effective February 1, 2011.

Motion
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Marie Buckner seconded the motion. The motion passed by unanimous vote.

#### **Patient Protection & Affordable Care Act (PPACA) – BCBS Appeals Process:**

Suzanne Donahue said that as a result of the national health care reform law, new internal and external appeals process obligations have been established for self-insured plans. Ms. Donahue said that some of the changes include providing additional information about any state office of consumer assistance or ombudsman to members, providing continuation of coverage, in certain instances, pending the outcome of the appeal, responding within 24 hours to initial requests that have been determined to be urgent care, and contractual relationships with three independent review organization processes. She said that there will be no charge for using outside companies for reviews.

Bill Hickey said that HPHC is currently the Fiduciary for CCMHG and has been the last arbitrator until this ruling. He said under the new rule, a member can go to a third party to appeal, and he said that the cost to the Group could be between \$200 and \$700 per review. Mr. Hickey said that this will not be a common occurrence.

#### **Health Plan Reports-**

Fred Winer said that there was nothing new to report from Tufts Health Plan.

Bill Hickey said that there was a member request to transfer a current authorization of treatment from the HPHC EPO to the HP Medicare Enhanced plan. Mr. Hickey said that in the 2007, authorization to approve

restorative oral services was extended to a member due to a side effect of medical treatment of cancer. He said that this member is now required to move from an active plan to a senior plan because his employer adopted MGL CH. 32B, Section 18. Mr. Hickey said the member is asking that the authorization be carried over to the new plan.

The Steering Committee said that the terms of the authorization did not specify a condition that the member was to remain in the current plan. The Committee said that there was no action needed and the authorization still stands.

Mr. Hickey said that a Massachusetts law mandating coverage of certain medical services for members with autism will be effective on anniversary following January 1, 2011 unless CCMHG decides to opt out. Mr. Hickey said that most of the services that are included in the mandate are already covered under the CCMHG health plans.

Suzanne Donahue said that BCBS will implement this mandate for all of their accounts and said that there will be no option to opt out.

**Other Business:**

Bob Whritenour said that his last day with the Town of Falmouth is December 1, 2010 and said that he regrets that today will be his last day as a representative to the CCMHG and as Chair of the Steering Committee. Mr. Whritenour asked for nominations for Chairman position.

Noreen Mavro-Flanders made a motion to nominate Skip Finnell for Chair of the CCMHG Steering Committee.

There were no other nominations.

Noreen Mavro-Flanders made a motion to close nominations.

Jerry Panuczak seconded the motion.

Noreen Mavro-Flanders made a motion to appoint Skip Finnell as Chair of the CCMHG Steering Committee effective November 17, 2010.

Jerry Panuczak seconded the motion. The motion passed by unanimous vote.

The Steering Committee thanked Mr. Whritenour for doing a wonderful job as Steering Committee Chair over the past ten years and for his work on the CCMHG Board of Directors over the past fifteen years.

Mr. Whritenour said that he thoroughly enjoyed his work on the Board and as Chair of the Steering Committee and said that he would miss everyone.

There was no other business.

Skip Finnell made a motion to adjourn.

Marie Buckner seconded the motion.

Chair Skip Finnell adjourned the meeting at 11:40 AM.

*Prepared by Karen Carpenter  
Group Benefits Strategies*