

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

**Steering Committee Meeting**  
Thursday, September 29, 2016, 11:00 AM  
Cape Cod Regional Technical High School  
Harwich, MA

**MEETING MINUTES**

A meeting of the Steering Committee of the Cape Cod Municipal Health Group (“CCMHG”) was held on Thursday, September, 29, 2016 at 11:00 AM at the Cape Cod Regional Technical High School. The following people attended:

**Steering Committee Members Present:**

Skip Finnell, Steering Committee Chair	Dennis-Yarmouth RSD
Noreen Mavro-Flanders, Board Chair	County of Dukes County
Denise Coleman	Town of Falmouth
Debra Blanchette	Town of Barnstable
Erin Orcutt	Cape Cod Technical High School
Susan Wallen	Nauset RSD
John Kelly	Town of Orleans
Christopher Clark, Alternate	Town of Harwich

**Guests Present:**

Christian Brown	Cape Cod Healthcare Systems
Deanna Desroches	CCMHG Wellness Consultant, MV
Mary Casalli	CCMHG Wellness
Robert Sanborn	Cape Cod Regional Technical High School
Garbrielle Pitcher	Blue Cross Blue Shield of MA (BCBSMA)
Bill Rowbottom	Blue Cross Blue Shield of MA (BCBSMA)
William Hickey	Harvard Pilgrim Health Care (HPHC)
Fred Winer	Tufts Health Plan
Carol Cormier	Group Benefits Strategies (GBS)
Karen Carpenter	Group Benefits Strategies (GBS)

Skip Finnell, Steering Committee Chair, called the meeting to order at 11:00 AM.

**Approval of minutes of the September 20, 2016 Steering Committee meeting:**

Debra Blanchette said the minutes need to be amended under the Investment Committee report, last sentence, that the Steering Committee will make a recommendation to the Board on October 19<sup>th</sup>, not October 3<sup>rd</sup>.

Debra Blanchette made a motion to approve the September 20, 2016 meeting minutes as amended.

Susan Wallen seconded the motion. The motion passed by a unanimous vote.

Motion

**Meeting with Chris Brown, VP, Cape Cod HealthCare (CCHC):**

Carol Cormier said that it was agreed that utilization data would be sent to Cape Cod HealthCare (CCHC) for an analysis to see how CCHC could partner with CCMHG to work on cost saving initiatives. Carol Cormier said that Mr. Brown communicated via email that CCHC had actively pursued getting historic claims data through its relationship with Steward Health Care. She said to date, they have not been able to obtain that data in a suitable format. Ms. Cormier said Mr. Brown is requesting that Blue Cross Blue Shield and Harvard

Pilgrim provide CCMHG member data based on the CCHC PCP data. He said then they will be able to identify the members claims that are available to them from Steward.

Mr. Brown said that there are two options to consider. Under Option 1, CCMHG, through its health plan providers, would provide a list of all HMO members assigned to the CCHC PCPs. He said CCHC will then be able to identify a subset of claims already available through Steward. He said this request would be relatively simple and would have a timely turnaround time. He said the downside is that the Steward data will only include current members.

Mr. Brown said Option 2 would be a request of raw claims from each health plan for a minimum of two calendar years. He said CCHC may have the data processed by its third party analytics vendor, Optum. Mr. Brown said this option would produce a more comprehensive analysis of the claims history, and the ability to assess the mutually beneficial opportunities. Chris Brown said that Steward has a specific metrics setup for BCBS. He said he received member information from Steward on the current members only, and said he will need the per member per month data with historical information.

Skip Finnell said that he wants to be sure that the CCMHG's and CCHC's objectives are the same.

Chris Brown said he believes that CCMHG wants to address cost of care and to provide quality care to its members at a reasonable price. He said there are two different models, one is a low cost care model at whatever facility, and the other is the integration of care model. Mr. Brown said he thought CCMHG wanted CCHC to look at utilization data to identify the areas that CCMHG needs to address. He said one year of data may be enough.

Bill Hickey said that for option two, HPHC will need the list of CCHC's PCPs, which would need to be updated on an ongoing basis. He said there are contracts for HIPAA compliance that will need to be signed in order to share the data. Mr. Hickey said that the raw claims data request brings up privacy concerns. He said there also may be an expense to write new programs, along with other hospital agreements that state that the data cannot be shared. He said there is a lot to consider. Mr. Hickey said that CCHC should send a list of the PCPs and state what they want HPHC to do with the list. He said the specifications, file layout and frequency are needed. Mr. Hickey said option one would be able to be done by next week.

Garbrielle Pitcher, BCBSMA, said that what Mr. Hickey said applied to BCBS as well.

There was a discussion.

Mr. Brown agreed to send the list of the PCPs in the CCHC Physician Hospital Organization to Ms. Cormier for distribution to BCBSMA and HPHC.

Skip Finnell thanked Mr. Brown for attending.

**Senior plan CY17 renewals:**

Carol Cormier reviewed the CY17 preliminary rate projections for the Medex 2 with Blue Medicare Rx and HPHC Medicare Enhance with Aetna PDP plans. She reviewed the administrative fees and said that BCBS has proposed no increase to its \$19.53 fee and HPHC is increasing its fee by 1.5% to \$26.29. She noted that BCBS has not increased its fee since 2013. Ms. Cormier said Bill Hickey worked to lower the original 3% increase down to 1.5%. Ms. Cormier reviewed the GBS fees that were included in the funding rates and previously approved by the Board.

Ms. Cormier explained how she calculates the claims projections. She reviewed the claims and anticipated claims for the BCBS Medex 2 plan and said that the BCBS projected rate, including the PDP plan is \$351.71,

an 8.6% increase with monthly funding of \$1,127,582. She said the GBS projection is \$360.64, an increase of 11.3% with monthly funding of \$1,156,215.

Ms. Cormier reviewed the HPHC Medicare Enhance projections and said the same process was followed to determine the proposed rates. She said that the HPHC rate projection is \$317.01, a 9.3% increase and the GBS rate projection is \$322.87, an 11.3% increase.

Ms. Cormier said she is recommending an average of the 2 projections, \$356.00 for the Medex 2 plan and \$320.00 for the HPHC Medicare Enhance plan with rates rounded.

There was a discussion about why the increases were as high as they were.

In response to a request, Carol Cormier said that she would create a one page piece to explain the reasons for the rate increases to the senior members.

Fred Winer said the reasons are explained on the senior rate presentation he sent to GBS.

Christopher Clark made a motion to recommend to the Board \$356.00 as the CY17 rate for Medex 2 with Blue Medicare Rx and the \$320.00 as the CY17 rate for HPHC Medicare Enhance with AETNA PDP.

John Kelly seconded the motion. The motion passed by a unanimous vote.

Motion

*Insured Senior Plan rates* – Fred Winer said that the CCMHG’s populatin on Tufts Medicare HMO is small, but said that the government is taking away \$19.95 of funding from all employer groups senior plans to fund part of the ACA. He said that CMS is waiving the Part C bidding requirement for employer group plans. Mr. Winer said the pharmacy trend is higher than expected for the PDP at 12%. Mr. Winer said that for CY17 the Tufts Medicare HMO rate will be increasing to \$296 from \$267 and the Medicare Preferred Supplement plan is increasing to \$363 from \$342. Mr. Winer said that in efforts to help contain costs, Tufts has renegotiated its specialty pharmacy provider contracts and added mail order discounts and incentives to promote mail orders.

**ACA Employer Reporting – reports from BCBS and HPHC:**

Carol Cormier said that BCBS and HPHC will be providing the same reports as last year, but without charge since their systems are now set up to do the reporting. She said GBS ordered the reports and will separate them by employer and send to the employers without a fee.

**Other Business:**

There was no other business.

Christopher Clark made a motion to adjourn. Erin Orcutt seconded the motion.

Motion

Steering Committee Chair, Skip Finnell adjourned the meeting at 12:20 PM.

*Prepared by Karen Carpenter  
Group Benefits Strategies*