# MINUTES OF THE CAPE COD MUNICIPAL HEALTH GROUP

#### STEERING COMMITTEE

Thursday, November 05, 2009, 9:30 AM Town of Sandwich Municipal Office Building 16 Jan Sebastian Drive, Sandwich, MA

# **MEETING MINUTES**

A meeting of the Steering Committee of the Cape Cod Municipal Health Group ("CCMHG") was held on Thursday, November 05, 2009 at the Town of Sandwich Municipal Office Building, 16 Jan Sebastian Drive, Sandwich, MA. The following people attended the meeting:

#### **Committee Members Present:**

Bob Whritenour, Chair

Noreen Mavro-Flanders

Marie Buckner

A. Francis ("Skip") Finnell

Gerry Panuczak

Debra Blanchette

Town of Falmouth

County of Dukes County

Town of Sandwich

Dennis-Yarmouth RSD

Town of Chatham

Town of Barnstable

#### **Guests Present:**

Suzanne Donahue Blue Cross Blue Shield of MA (BCBS)
Bill Hickey Harvard Pilgrim Health Care (HPHC)

Fred Winer Tufts Health Plan

Carol Cormier Group Benefits Strategies (GBS)
Karen Carpenter Group Benefits Strategies (GBS)

Bob Whritenour, Chair called the meeting to order at 9:25 a.m.

# **High Cost Claimant:**

Bob Whritenour said he would entertain a motion to go into Executive Session to discuss litigation.

Skip Finnell made a motion to go into Executive Session to discuss litigation pertaining to the BCBS high cost claim.

Motion

Noreen Mayro-Flanders seconded the motion.

There was a roll call vote on the motion as follows:

Bob Whritenour, Town of Falmouth

- Yes,
Noreen Mavro-Flanders, County of Dukes County

Marie Buckner, Town of Sandwich

- Yes,
A. Francis "Skip" Finnell, Dennis-Yarmouth RSD

Debra Blanchette, Town of Barnstable

- Yes,
Gerry Panuczak, Town of Chatham

- Yes

Mr. Whritenour said that the Committee would return to Open Session following the Executive Session.

Bob Whritenour adjourned the Open Session meeting at 9:30 a.m. and declared the Committee to be in Executive Session.

Bob Whritenour, Chair declared the meeting to be in Open Session at 10:00 a.m.

#### **Health Plan Contracts:**

Bob Whritenour asked the Committee for suggestions on ways to improve the BCBS contract at renewal.

Gerry Panuczak asked if the Committee should also review the Harvard Pilgrim Health Plan contract.

Carol Cormier said that the CCMHG did negotiate with HPHC when their contract was agreed upon.

Debra Blanchette made a motion to ask the attorneys at Lurie and Krupp for their assistance in making suggestions to improve the BCBS health plan contract.

Skip Finnell seconded the motion.

There was a discussion.

Bob Whritenour said that he thought that it would be a good idea to ask the attorneys to look at the current contract and to draft some contract language suggestions that the CCMHG could take to BCBS.

Debra Blanchette withdrew the motion to ask the attorneys for their assistance in making suggestions to improve the BCBS health plan contract.

Debra Blanchette made a new motion to ask the attorneys at Lurie and Krupp to assist in making edits to the BCBS health plan contract language.

Motion

Noreen Mavro-Flanders seconded the motion. The motion was passed by unanimous vote.

# Approval of the minutes of the September 23, 2009 Steering Committee meeting:

Skip Finnell motioned to approve the minutes of the meeting of September 23, 2009.

Motion

Gerry Panuczak seconded the motion. Marie Buckner abstained. The motion passed by a majority vote.

# Approval of the minutes of the July 29, 2009 Steering Committee meeting:

Skip Finnell motioned to approve the minutes of the meeting of July 29, 2009.

Motion

Noreen Mavro-Flanders seconded the motion. The motion passed by unanimous vote.

# **Investment Committee Report:**

Skip Finnell said that there was nothing new to report.

# **BCBS High Cost Claim:**

Bob Whritenour told Suzanne Donahue, Blue Cross Blue Shield, that the Committee approved the Memo of Understanding on the high cost claim settlement during its Executive Session.

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

Marie Buckner said that there was nothing new to report.

#### **GBS Reports:**

Bob Whritenour said that there was a Statewide Conference at which Carol Cormier was one of the presenters. Mr. Whritenour said that there were approximately 75 town managers in attendance and about 150 people in attendance. Mr. Whritenour said that Ms. Cormier's presentation included several cost savings ideas and that

it was very informative. Mr. Whritenour said that he overheard some of the people asking Ms. Cormier if she would do work for them as well.

Marie Buckner said that the Sandwich Town Manager told her that he rated Ms. Cormier's presentation as excellent and said that the town and CCMHG were extremely well served to have her as their Consultant.

Ms. Cormier said that Group Benefits Strategies is working on developing a website and said that GBS would like to include testimonials from its accounts.

Marie Buckner said that she would be happy to ask the Town Manager for a testimonial.

# Funding Rate Analysis by Plan –

Carol Cormier said that the funding rate analysis summary report with claims paid through September 2009 (first quarter of FY10) were included in the packet. Ms. Cormier said that both the medical and dental plans are doing very well to date.

Stop Loss Reporting –Karen Carpenter reviewed the stop loss report for FY09 and said there were seven claimants who had exceeded the stop loss specific deductible of \$250K with excess claims totaling \$2.9M for claims paid through September 2009. Ms. Carpenter said the group has received a total of \$638K in reimbursements and is eligible to receive an additional \$28K in reimbursements on claims paid through September 2009. Ms. Carpenter said there were 38 claimants on the report of 50% with a total paid claims amount of \$6.36M.

Karen Carpenter reviewed the stop loss report for FY10 and said there no claimants who had exceeded the stop loss specific deductible of \$250K. Ms Carpenter said that there is one claimant on the report of 50% with claims totaling \$130K with claims paid through September 2009.

# **EyeMed Vision Plan Issues -**

Karen Carpenter said that there have been some member issues since the inception of the vision plan on July 1, 2009. Ms. Carpenter said that there was a CCMHG member and his spouse signed up for two family plans, one with CCMHG and the other with another employer, not within CCMHG. Ms. Carpenter said that when the spouse tried to utilize his benefit through his employer, EyeMed denied his benefit telling him that his benefit was already used. Ms. Carpenter said that she notified Stan Steiger, the CCMHG EyeMed Account Manager who said that this was probably a provider issue. Ms. Carpenter said that the member needs to be specific with the provider and tell them that they have two separate family plans which need to be submitted under each ID number. Ms. Carpenter said that the plans can be used to purchase double the materials and exams, but that remaining balances cannot be paid by a second plan.

Ms. Carpenter said the second issue occurred when a CCMHG EyeMed member wanted to coordinate his/her benefits with that of his/her spouse who had a vision benefit through Tufts Health Insurance plan. Ms. Carpenter said that the vision benefits cannot be coordinated to be used in conjunction with each other to pay remaining balances.

Ms. Carpenter said that another issue arose when an in-network provider was not in-network with regards to selling materials. Ms. Carpenter contacted EyeMed who said that all in-network providers who sell materials should be selling the materials in-network too. Ms. Carpenter said that there are some providers who only do exams and some that only sell materials. Ms. Carpenter said that EyeMed would be contacting that provider to sign an agreement to be a full service provider or they would no longer be eligible to be affiliated with EyeMed as a provider.

Ms. Carpenter said that the last issue was a misunderstanding on how the contact lens and glasses lens benefit allowance works. Ms. Carpenter said that the allowance is a one-time use allowance and if the purchase does not amount to the entire allowance, the remaining balance is lost.

#### **CCMHG Strategic Plan:**

Carol Cormier said that the CCMHG Strategic Plan expired in 2008. Ms. Cormier said that there were some items on the plan that were never addressed and suggested that the Committee may want to write up a more targeted plan with action items.

Debra Blanchette said that she would like to have time to review the plan and would like it to be added to the next agenda.

Bob Whritenour suggested scheduling a separate session devoted to the structure and development of a plan.

Carol Cormier distributed the Berkshire Health Group's strategic plan and said that their Group is in a different place than that of CCMHG but said that it may offer some ideas. Ms. Cormier said that the Group may want to work with the health plans to develop programs through benefit design that would address chronic illnesses.

Suzanne Donahue said that one of the ways may be to add value-based plans and to specify certain illnesses to target. Ms. Donahue said that Wellesley have established Health Reimbursement Agreements (HRAs) to cover co-pay costs on Rate Savers.

Bob Whritenour said that he would like to add the topic to the next Steering Committee meeting agenda and would like to put aside time to develop goals with action steps. Mr. Whritenour asked the Committee to email their ideas to Karen Carpenter to summarize prior to the next meeting.

Carol Cormier said that she would email a template or slides to the Group.

Debra Blanchette said that the Town of Barnstable has been working very hard to move forward with plans to adopt Section 18. Ms. Blanchette said that Carol Cormier attended their last meeting with the retirees and said that she is hopeful that it will be adopted by the end of December.

Bob Whritenour said that Ms. Blanchette developed a spreadsheet that the Town of Falmouth used to determine what the savings would be if Section 18 were adopted.

Ms. Blanchette said that the Town of Barnstable stood to save approximately \$34,800 yearly if the Section were to be adopted.

Carol Cormier asked Ms. Blanchette to forward her a copy of the spreadsheet.

Bob Whritenour asked that Section 18 be added to the list of goals on the strategic plan.

# **Timeline and Schedule of Meetings for FY11 Rate Development:**

The Steering Committee scheduled the following meetings for FY11 Rate Development: January 22, 2010 Steering Committee Meeting to be held in Sandwich, MA at 9:30 AM January 27, 2010 Steering Committee Meeting at 8:30 AM and Board Meeting at 9:30 AM, both to be held at COMM Fire District.

# **Health Plan Reports:**

Blue Cross Blue Shield-

Suzanne Donahue said that the BCBS Network Blue Rate Saver co-pay for Out-Patient Surgery is \$250 which also applies to Colonoscopies. Ms. Donahue said that the Group may want to consider lowering the co-pay to align this with their wellness initiatives.

Bob Whritenour asked that this topic be added to the next Steering Committee Meeting Agenda.

Ms. Donahue thanked Karen Carpenter for gathering the individual Tax ID information from all of the CCMHG units.

Carol Cormier said that she received an email stating that BCBS has approved the Memo of Understanding regarding the high cost claim settlement and has dismissed the Motion to Dismiss.

# Tufts Health Plan-

Fred Winer said that the Medicare Part B premium would not be increasing for those that are currently enrolled, however he said that for all new enrollees, the Part B premium would be increasing to \$110.50 for most but a higher amount for those with high annual incomes.

Mr. Winer said that there is no co-pay for colonoscopy screening for those on the Tufts Medicare Advantage Plans. He said, however, that some of the other health plans charge a \$50 co-pay for this screening.

#### Harvard Pilgrim Health Plan-

Bill Hickey said that since HPHC's former President and CEO, Charles Baker, left HPHC, there has been an active search to find someone to replace him. Mr. Hickey said that Bruce Bullen, COO of HPHC, has been the interim President and CEO during the search and is a candidate for the position.

Mr. Hickey said that the HPHC Heart Champion will be changing in January 2010. Mr. Hickey said that HPHC believes that they can do this program in-house with improvements and said that the cost will remain the same until the July renewal. Mr. Hickey said he is unsure of what the renewal cost will be, but said that the cost could go down or go away altogether. Mr. Hickey said that the new program will be named "Heart Beats".

Debra Blanchette asked Mr. Hickey why HPHC does not cover chiropractic services and said that other groups offer 12 visits at a \$5 co-pay.

Mr. Hickey said that CCMHG decided not to offer this benefit and said that it is a rider that is purchased separately.

Skip Finnell said that CCMHG made a conscious decision not to include chiropractic services on the EPO plans because it is often used unnecessarily.

# Other Business:

There was no other business.

Gerry Panuczak made a motion to adjourn the meeting.

Motion

Debra Blanchette seconded the motion. The motion was passed by unanimous vote.

Bob Whritenour adjourned the meeting at 11:18 a.m.

Prepared by Karen Carpenter Group Benefits Strategies