Scantic Valley Regional Health Trust (SVRHT)

Board Meeting

Tuesday November 14, 2023 9:30 AM By Remote Participation

Meeting Minutes

Board Members and Alternates present:

Arlene Miller, Chair Town of Longmeadow Dick Patullo Town of Hampden

Joan Iwanicki Town of East Longmeadow Barbara Hancock Town of Wilbraham

Christina Gagnon Hampden Wilbraham RSD

Anna Bishop Lower Pioneer Valley Educ. Collab.

Guests present:

Marcy Morrison SVRHT Wellness Coordinator

Mark Gold Town of Longmeadow Jocelyn Sanchez Town of Longmeadow Claire Kawalec Town of Longmeadow Herta Dane Town of Wilbraham

Karen Fink Lower Pioneer Valley Educ. Collab. Heidi Fountain Blue Cross Blue Shield of MA (BCBS) Judy Moniz Blue Cross Blue Shield of MA (BCBS)

Michael Gauvin
Alysha Beaudry
Amy Bickford
Abacus Health Solutions
Abacus Health Solutions

Chris Collins CanaRx
Jim Riley CanaRx

Joseph Anderson Gallagher Benefit Services, Inc. (GBS Karen Quinlivan Gallagher Benefit Services, Inc. (GBS)

Arlene Miller, Chair, called the meeting to order at 9:33 AM. Roll call was taken with voting attendees listed as:

Arlene Miller, Chair Town of Longmeadow Dick Patullo Town of Hampden

Joan Iwanicki Town of East Longmeadow Barbara Hancock Town of Wilbraham Christina Gagnon Hampden Wilbraham RSD

Approval of the minutes of the October 3rd, 2023 meeting:

Dick Patullo moved approval of the minutes of October 3rd, 2023 meeting as presented with corrections for spelling.

Motion

Christina Gagnon seconded the motion. There was a roll call vote on the motion:

Arlene Miller	Yes
Dick Patullo	Yes
Joan Iwanicki	Yes
Barbara Hancock	Yes
Christina Gagnon	Yes

The motion passed by unanimous vote.

Anna Bishop, a voting member, joined the meeting at this time.

Wellness Program report:

Marcy Morrison presented her wellness report. The newsletter is well received and providing monthly meal planning help with recipes, shopping lists and hints for creating easy, healthy meals. A program called Empowered Parents/ Empowered Kids was put out to address preventing injury as kids are back from summer and jumping into sports. It is put out by a physical therapist on how to prevent injury with proper stretch etc. The program will be available for six months. The Colonoscopy program is going strong. There have been 32 participants since Ms. Morrison started. There was a backlog of about 10 from the gap after Lynn left. The Blue Cross Wellness Works incentive program began this month. Information about the program was included in the SVRHT Wellness Newsletter and will be included each month until the program ends in May. Happy Healthy Holidays, formerly Maintain Don't Gain will begin again helping employees make healthy choices over the holidays.

Arlene Miller asked if there are still weigh in's.

Ms. Morrison said that that stopped during COVID. Direct emails are sent to participants with a quiz each week. It's more a reminder than a test.

Ms. Miller also said she watched the video that was done with CanaRx and it was very good. It was probably recorded before online enrollment so perhaps another update could address that.

Treasurer Report:

Treasurer Paul Pasterczyk was unable to attend the meeting but did send his report through September 2023 financial reports (unaudited figures). Joseph Anderson pointed out a few highlights. There was a \$40,000 Diabetes rebate. In October there was a \$198,000 drug rebate. Cash was down because some of the receivables were still outstanding and that is a cyclical thing. At this point in time, the trust is demonstrating strength as the group approaches the renewal and that is a positive.

GBS reports:

Joe Anderson reviewed the FY24 Funding Rate Analysis (FRA) report as of September 2023. Mr. Anderson said the expense to funding ratio through September was 96.6% resulting in a funding surplus of \$294,252. FY24 is running close to funding and that is reflected on the relatively static Trust balance within the

Treasurer's report. Blue Cross had a large claimant in August. With only three months of FY24 data as a buffer, a large claimant will have a material impact. The rebate coming in will give a bit of a cushion.

Karen Quinlivan reviewed the FY23 reinsurance reports. She said with data through September, there were 6 claimants with \$624,916.14 in claims above the \$250K deductible. The \$150K Aggregating Specific Deductible has been met. Total reimbursements to date were \$440,030.17 and there is an outstanding amount due of \$34,885.97. There were 16 claimants with claims between \$125K and \$250K totaling \$2,898,255.86. The same report for FY24 through August had 1 claimant with \$4,122.70 in claims above the \$250K deductible. There has been no reimbursements and the outstanding amount due is \$4,122.70. There was 1 claimant having claims between \$125K and \$250K totaling \$129,723.81.

Carrier Telemedicine Options:

Joe Anderson said previously the experience with the telemedicine that was offered through an external vendor in Texas did not work. Eligibility files had to be funneled through Gallagher and they did not actively engage at all and in the municipal world, it is all about engagement and and availability. Having terminated that relationship, what are the options? An available option would not be to turn to a single vendor but employ who the carriers use as a partner. The request was to provide information and data available so that a consideration could be made as to whether it made sense to move forward with a less expensive alternative that is synchronized with each carrier. Blue Cross has a benefit called WellConnection which provides medical care 24/7. It is secure and convenient via MY Blue with doctors and providers with an average of 15 years experience. Prescriptions can be delivered to a member's pharmacy as needed. No referrals are needed and it is available to adults and children. Mental health care can be arranged by appointment. It is estimated that 85% of issues can be resolved by a video visit. HNE offers Teladoc which is one of the largest telemedicine options in the country. It is a standard soluton that is national based. There is an online assessment and members can choose an online provider and meet by phone or video. General medical and mental health visits are available. Adolescent mental health is an increasingly important piece. Blue Cross and Health New England together would have annual costs of over \$7,000. Utilization is difficult to project whereas it relies is on local engagement and education. This is a rider so it could be added and then taken off if it does not work.

Anna Bishop explained her experience with the previous My Telemedicine. If you can't get to an ER or walk in clinic, you can call them 24/7 and speak with a doctor. They are able to prescribe antibiotics and you can start immediately.

Dick Patullo asked if the carriers will be sending out notices to members.

Heidi Fountain said that SVRHT is self-insured so it would be the plans responsibility to pay for mailings. Account credits or Wellness credits could be used to cover the cost. Information will be available to members when they log into their My Blue account.

Michael Gauvin said that HNE can work with their vendor to reach out to members to promote the new program.

Mr. Patullo then asked if feedback from the carrier programs on engagement would be available.

Heidi Fountain responded that Blue Cross would do it every six Months.

Michael Gauvin said that HNE would do it quarterly.

Mr. Patullo asked if there is a claims savings by going telemedicine versus a PCP visit.

Heidi Fountain said that there is a inherent claims cost savings so the trust would save a little money. It is recommended that when available, members seek care from their PCP but when not available, this is a good option.

Michael Gauvin said that annualized savings are being realized. There is an opportunity on the behavioral health side and with the addition of adolescent behavioral health, to get members the care that they need.

Joan Iwanicki asked about Tufts.

Joe Anderson said they have a very small population and don't have telemedicine but Harvard gives it without charge as part of what they offer and plans will move to the Harvard platform as of July 1st. Doctor on Demand is the benefit and carries a regular office copay.

Anna Bishop mentioned to add the telemedicine riders to the Scantic Valley Regional Health Trust.

Motion

Richard Patullo seconded the motion. There was a roll call vote.

Yes
Yes

The motion passed by unanimous vote.

The anticipation is that the programs would start for February 1st.

Good Health Gateway Annual Report:

Alysha Beaudry presented a brief annual overview of the Diabetes Care Rewards program for SVRHT. Through 08/31/2023 there were 35 % of 233 eligible members enrolled in the program with 62% adherent members over the last 12 months. There were 36 identified high risk members of which 58% were registered and 52% were adherent. There were a total of 680 prescriptions with \$10,383 in copay waivers and rebates of \$87,922. The estimated annual ROI was 9.7. There were 550 letters and emails sent, 131 helpline calls and 516 text reminders. There were 55% of Scantic members receiving text updates and reminders. Targeted outreach will continue as well as attendance at health fairs and open enrollment activities.

Health plan and vendor reports:

<u>Blue Cross</u> – Judy Moniz said that senior health fairs were successful. There is information for training on legislative updates that will be sent out if anyone wants to attend.

<u>Tufts</u> – Fred Winer and Mark Nicholson were on the road and unable to attend.

<u>Health New England</u> – Michael Gauvin said that the 2024 semiannual notice will be going out and it will include medical management changes as well as formulary changes for the two active HMO plans

<u>CanaRx</u> – Jim Riley said that as of September the total savings were \$207,653.35. The monthly average was \$23,072.59. The average employee savings is \$159.88. That information will try to be incorporated in promotional material. As of October 1st, online enrollment went live. The fourth quarter post card campaign addresses that. There have also been about 7 or 8 new medications added to the formulary. Screen shots of the landing page on the website were reviewed. Members still have the opportunity to print off forms and scan and fax if they want but it is hoped that the online process will be adopted. Members will always get a call from CanaRx as well.

Marcy Morrison suggested perhaps a one hour zoom meeting in case people have questions would be a good idea.

Chris Collins said those have worked well in the past.

Other business:

There was no other business.

The Chair, Arlene Miller, set the next Board meeting for Thursday January 18, 2024 at 9:30 AM.

Ms. Miller adjourned the meeting at 10:37 AM.

Minutes prepared by Karen Quinlivan Gallagher Benefit Services, Inc.