

Minuteman Nashoba Health Group

Board Meeting

Monday, May 11, 2020, 2020 at 10:00 AM
Virtual Meeting by Remote Participation

DRAFT

Meeting Minutes

Board and Alternate Members Present:

Melisa Doig, Chair	Town of Groton
Kevin Johnston, Vice Chair	Town of Ayer
Ian Rhames, Treasurer	Concord Carlisle RSD
Debbie Nutter	Town of Pepperell
Marie Sobalvarro	Town of Harvard
Brandi Mahlert	Lincoln Sudbury RSD
Nick Federico	Town of Boxborough
Donna Kunst	Town of Stow
Kristen Noel	Town of Bolton
Kaylin Carpenter	Narragansett RSD
Anne Marie Tucciarone-Mahan	North Middlesex RSD
Brigette Bell	Town of Tyngsborough
Kerry Lafleur	Town of Concord

Guests Present:

Marcy Morrison	MNHG Wellness Consultant
Andrew MacLean	Town of Pepperell
Nancy Haines	North Middlesex RSD
Malyssa Simard	Town of Concord
Crystal Orellana	Town of Concord
Stephanie Oliver	Town of Concord
Kimberly Kane	Town of Carlisle
Patricia Joyce	Abacus Health Solutions
Lisa Despres	Tufts Health Plan
Rae Felts	Tufts Health Plan
Fred Winer	Tufts Health Plan Senior Products
Mary Bartkiewicz	Tufts Health Plan Senior Products
Katelyn Glennon	Fallon Health
Patrick Flattery	Fallon Health
Julia Lebrun	Fallon Health
Bill Hickey	Harvard Pilgrim Health Care
Jeff Beane	MyTelemedicine
Chris Collins	CanaRx
Carol Cormier	Gallagher Benefit Services, Inc., (GBS)
Karen Quinlivan	Gallagher Benefit Services, Inc., (GBS)
Chris Nunnally	Gallagher Benefit Services Inc., (GBS)

The Chair, Melisa Doig, called the meeting to order at 10:00 AM.

Ms. Doig reminded those present that the meeting was being recorded and asked if there were any objections. None was voiced. She said on items moved and seconded she would ask if there were any objections. She said if there were no objections, the vote on the motion would be considered unanimous.

Approval of the minutes of February 10, 2020:

Debbie Nutter moved approval of the Board minutes of February 10, 2020.

Motion

Kerry Lafleur seconded the motion. The motion passed by unanimous vote.

Treasurer’s Report:

Treasurer Ian Rhames reviewed the financial statements of March 31, 2020 (unaudited figures). He said that the Fund Balance increased in the short term due to a drop off in claims during the current coronavirus pandemic. The Fund Balance on March 31, 2020 was about \$5.4 million, which is short of the \$6.2 million target, but he said April’s Fund Balance will be over the target due to continued reduced claims.

Mr. Rhames said that work on the FY20 financial audit has begun already.

Debbie Nutter moved to accept the Treasurer’s report as presented.

Motion

Kerry Lafleur seconded the motion. The motion passed by unanimous vote.

Steering Committee Vacancy:

A list of current Steering Committee members was presented. Melisa Doig said that there is vacancy on the Steering Committee and asked if anyone had interest in joining. There was no response. Ms. Doig asked that anyone interested please email her before the next meeting.

GBS reports:

Funding Rate Analysis (FRA) report – Carol Cormier reviewed the *FRA* with data through March 31, 2020. She said the expense-to-funding ratio on a paid claims basis was 92% with a surplus of funding over major expenses of \$3.3M.

Reinsurance reports – Karen Quinlivan reviewed reinsurance reports for the FY19 and FY20 policy periods with claims data through March. She said that in FY20 there were 3 claimants with updated total paid claims of \$1,224,077. The amount exceeding the specific deductible of \$300,000 was \$324,077. Total reimbursements of \$26,684 left an outstanding reimbursement amount due of \$ 297,393. The FY19 policy had 2 claimants with total updated paid claims if \$993,563. Total excess claims were \$393,563. Total reimbursements were \$314,340, leaving outstanding reimbursements due of \$79,223.

Carol Cormier spoke about OPTiMed Health Partners (OHP) a program being promoted by the MMRA. She said OptiMed had analyzed data and found a test case in MNHG that they could provide significant cost savings for high cost specialty medication. In order to begin the cost savings program, a proposed contract has been provided for review and approval by MNHG. Ms. Cormier said that West Suburban Health Group, a member of the MMRA, has signed the agreement.

Debbie Nutter motioned to approve the contract with OptiMed Health Partners to review possible savings on a case-by-case basis going forward.

Motion

Kevin Johnston seconded the motion. The motion passed by unanimous vote.

Wellness Program report:

The Wellness Consultant, Marcy Morrison reviewed the status of the Wellness program. Due to the current pandemic, she said the program was placed on hold but is gearing up for late spring and summer. One focus will be reaching out to Abacus to get a comprehensive campaign started to help people with Type 2 Diabetes understand how important it is to understand their illness and encourage self-care during this difficult time. Home fitness, stress management, and health coaching will be other topics.

Covid-19 and Furloughed Employees:

Carol Cormier said that there was an order from the state mandating to the health plans waiver of co-pays associated with diagnosis and treatment for Covid-19. The mandate has also requested waiver of co-pay and deductible for Telehealth services from the health plans. She said for the sake of reinsurance, the Board should take a vote that they agree and will comply with the provisions of the state order.

Debbie Nutter motioned to replicate what the health plans are doing for their fully insured business per the state mandate, i.e. waive member cost share for COVID-19 related diagnosis and care and from all telehealth

Motion

Kevin Johnston seconded the motion. The motion passed by unanimous vote.

Ms. Cormier said that some governmental units and joint purchase groups have defined whether employees furloughed because of the Covid-19 state of emergency may remain on the health insurance. MNHG must decide if they want to allow individual participating governmental units to keep furloughed employees as benefits eligible. The conditions would be that the employees must have had coverage at the time of the furlough and they must remain on the roster and have their premiums paid.

Debbie Nutter asked if current payment contribution splits between employers and employees would continue.

Carol Cormier responded that other employer groups are continuing with the current employer/employee cost shares. She said she assumed the furloughed employees would be treated as other employees with regards to health benefits.

Debbie Nutter motioned to allow participating governmental units of MNHG to decide to keep employees furloughed due to Covid-19 as benefits eligible.

Motion

Marie Sobalvarro seconded the motion. The motion passed by unanimous vote.

Diabetes Care Rewards program reports:

Patty Joyce presented the quarterly Diabetes Care Rewards program report from Abacus Health Solutions. They are working with the vulnerable population to track and grant extensions on care deadlines for services required by the program when possible. Ms. Joyce said Abacus worked with Jocelyn Diabetes Center to develop a 5-question survey when members call in to get an

extension and are able to grant 30-60 day extensions. They are continuing member and registration outreach. Currently there are 96 participants in MNHG but Abacus would like to see more. There has been \$150,619 in pharmacy claims with an estimated savings of \$22,341. The Total Spend YTD Report shows a total of \$405,873 through June 1, 2019 through April 30, 2020.

MyTelemedicine:

Jeff Beane emphasized that their service provides zero co-pay consultations for both medical and behavioral health. Right now, he said a large focus is on behavioral health. Services are available 24/7 through the pandemic with crisis support and counselors. MyTelemedicine also created a member self-assessment tool with about nine questions where members can be directed to a video or phone conversation with a Board certified physician. He said they are growing their footprint in the New England area adding over 40,000 employees over the next several months. Wait times during the Covid -19 crisis are under 30 minutes compared to the nearest competitor in the state, which is over an hour. Through May so far, annualized utilization is 2.11% with 59 consults YTD. Mailers will drop with monthly or quarterly updates to Benefits administrators. They have expanded their call center to allow for direct employee outreach and education if phone numbers are provided to them. More mailers are going out than the contractual requirement because of lost engagement through cancelled health fairs.

CanaRx:

Chris Collins provided quarterly reports for utilization for each of the three carriers through March 31, 2020. He said that many people are getting more used to receiving medication through mail order. CanaRx has purchased new software that allows them to do direct member informational emails if they are provided with email addresses.

Carol Cormier indicated she would have to see if it is possible to add this information to the enrollment file if the MNHG wanted to do direct-to-employee emails..

Health Plan reports:

Tufts – Lisa Despres said that a preliminary report on Covid-19 assumptions showed that there was a total of 16 Covid-19 tests performed with 4 positive, 2 negative, and the remaining suspected. So far, there have been 30 claims for suspected Covid-19 member treatment with a total claims spend of \$59K. She said these are mostly inpatient claims. The report will be fine-tuned as more data becomes available.

Fred Winer said that the majority of nursing home populations are on Medicaid not Medicare so there is no feel for how Covid-19 will affect Medicare costs. He said that Part B premium is anticipated to rise between \$9 to \$10 next year.

Harvard Pilgrim- Bill Hickey said that it is very early for meaningful data on Covid-19. Through May 8, there have been only 15 tests with 9 potentials and 6 negative for MNHG's Harvard Pilgrim population. He said that as claims start coming in there will be tools in place to analyze the data.

Fallon Health - Katelyn Glennon said that there have been 9 total tests with 1 positive, no inpatients, and no deaths in the Fallon MNHG population. There has been a total of \$1,100 in claims. She said Fallon is still waiting for more claims detail.

Other Business:

Medicare Buy In -

Carol Cormier said that at the February Board meeting MNHG discussed the potential of buying into Medicare for those members that are 65 or older and retired but have not accumulated 40 quarters paid into Medicare in order to be eligible. At that last meeting, it was anticipated that each participating governmental unit would collect information regarding eligible candidates.

Mary Bartkiewicz of Tufts Health Plan presented a high-level overview of the program for MNHG. The goal of the plan is to realize claims savings by moving retirees from the active plans to Medicare plans with richer benefits for retirees and lower premium and claims costs. If the group were to go ahead with the program, the process would need to be started for a July 1, 2021 effective date by September of 2020.

There was discussion. The question arose whether the program would have to be undertaken by all participating governmental units within MNHG and if this was something the group wanted to pursue. Each town would have to pay the Medicare Part A premium and Part A penalty and the Part B late enrollment penalty. Given budget constraints, more information needs to be gathered by each unit regarding eligible members so penalty and claims data can be reviewed. Cost savings cannot be estimated without it. It was agreed that before the next meeting, GBS will work to communicate information requirements and deadlines.

Next meetings - Melisa Doig scheduled the next meetings: Steering Committee on August 24 at 9:00 AM and Board meeting on August 24 at 10 AM.

There was no other business.

Melisa Doig adjourned the meeting at 12:32 PM.

*Prepared by Karen Quinlivan,
Gallagher Benefit Services, Inc.*