Minuteman Nashoba Health Group

Board Meeting

Monday, September 12, 2022 at 10:30 AM **Virtual Meeting by Remote Participation**

Meeting Minutes

Board and Alternate Members Present:

Town of Groton Melisa Doig, Chair Rajon Hudson Town of Boxborough John Kittredge Town of Clinton Ian Rhames Concord Carlisle RSD Kerry Lafleur Town of Concord Chelsea Mason Narragansett RSD Anne Marie Tucciarone-Mahan North Middlesex RSD William Schlosstein Town of Pepperell Town of Stow **Brad Brightman**

Guests Present:

Marcy Morrison MNHG Wellness Consultant

Malyssa Simard Town of Concord Stephanie Oliver Town of Concord

Patricia Joyce Abacus Health Solutions

Lisa Despres
Tufts Health Plan
Diana Hernandez
Tufts Health Plan
Patrick Flattery
Fallon Health
Mark Nicholson
Harvard Pilgrim

Caroline Burnham Blue Cross Blue Shield of MA (BCBS)
Judy Moniz Blue Cross Blue Shield of MA (BCBS)

Mark Nicholson Harvard Pilgrim Health Care

Mike Hurley PinnacleCare
Chris Collins CanaRx
Jim Riley CanaRx

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

The Chair, Melisa Doig, called the meeting to order at 10:32 AM.

Ms. Doig reminded those present that the meeting was being recorded and asked if there were any objections. There were none. Roll call was taken with voting attendees listed as:

Melisa Doig, Chair Town of Groton
Rajon Hudson Town of Boxborough

John Kittredge Town of Clinton
Ian Rhames Concord Carlisle RSD
Kerry Lafleur Town of Concord
Chelsea Mason Narragansett RSD
Anne Marie Tucciarone-Mahan North Middlesex RSD
William Schlosstein Town of Pepperell
Brad Brightman Town of Stow

Approval of the minutes of July 11, 2022:

Anne Marie Tucciarone-Mahan moved approval of the Board minutes of July 11, 2022 as presented.

Motion

Kerry Lafleur seconded the motion. There was a roll call vote

Melisa Doig, Chair ves Rajon Hudson abstain John Kittredge yes Ian Rhames yes Kerry Lafleur yes Chelsea Mason yes Anne Marie Tucciarone-Mahan yes William Schlosstein ves Brad Brightman abstain

The motion passed by majority vote.

Treasurer's Report:

Treasurer Ian Rhames provided his report of July 31, 2022 (unaudited figures). He said that the change in fiscal year had an impact on making a coherent comparison between last year. The group did have a rough year and ended the year below the target balance. There was a small bounce back in July. Currently the group is at a level where if there is further erosion of the fund balance, the group will need to discuss ways to fund cash flow until the trust recovers.

Steering Committee Vacancies:

There was discussion regarding the need for more members on the MNHG Steering Committee. With the departure of Harvard, the committee was down to four members and Kevin Johnston has retired leaving three members. Melisa Doig urged any interested members to please forward interest to herself, Joe Anderson or Karen Quinlivan.

GBS Reports:

Funding Rate Analysis (FRA) report – Joseph Anderson reviewed the FY22 FRA with data through June 30, 2022. He said the expense-to-funding ratio on a paid claims basis was 109.3 with a deficit of funding to major expenses of \$3,950,853. This number indicates an marked

decline of the trust as a result of higher than normal claims. There was a bounce back in the subsequent month but some things in the numbers are the fact that the Town of Harvard 's runout claims are being paid and for four months the group is paying the equivalent of 60% of Fallon's previous administrative fee which is approximately \$60,000 a month. The last payment for that is September. The most pronounced difficult stretch has been since January. The trust is reflective of the \$1.4M free and clear and there is also \$4.2M in IBNR back stopping claims. Cash flow is imperative to ensure the group is well positioned to accommodate timely payments to vendors.

Through July, the expense-to funding ratio was 104.4% with a deficit of funding to major expenses of \$153,984. There was the nonrecurring type of administrative runout claims for Town of Harvard. The financial position of the group is not unprecedented. A trust balance well below target occurred in the late 90's early 2000's. If cash flow becomes an issue one strategy to consider would be early funding in order to get the cash on the books with the stipulation that when the trust gets strong enough, monies would be returned. Discussion would be in order if that were to be the course taken and quick response would be merited.

Reinsurance reports – Karen Quinlivan reviewed reinsurance reports for the FY21 policy period with claims data through June. She said that there were 4 claimants with updated total paid claims of \$2,170,212. The amount exceeding the specific deductible of \$300,000 was \$970,212. Total reimbursements of \$972,468.14 left an overpayment credit of \$2,256.08. There were 28 claimants on the 50% Report with updated total paid claims of \$5,958,741. The same reports for the FY22 showed 3 claimants with updated total paid claims of \$2,560,378. The amount exceeding the specific deductible of \$400,000 was \$1,360,378. Total reimbursements of \$331,026.95 left an outstanding reimbursement amount due of \$1,029,351. There were 10 claimants on the 50% report with total updated claims of \$2,757,238. Reports through July showed 3 claimants with updated total paid claims of \$2,587,501. The amount exceeding the specific deductible of \$400,000 was \$1,387,501. Total reimbursements of \$856,710 left an outstanding reimbursement amount due of \$530,781. There were 17 claimants on the 50% report with total updated claims of \$4,666.597.

Wellness program report:

The Wellness Consultant, Marcy Morrison, provided her Wellness report. Summers are always slower and this was no exception. There was a plant based low carb online program released that had a lot of people take it. It will be resent to the school districts since they were off. The program is not about being vegan but how to become more plant based and all of the health benefits and disease management benefits that come along with it. Fall planning includes Stress management, better sleep and a couch to 5K program. A Yoga program will start for various towns and schools. EFT tapping will be done for stress reduction and meditation. The Health Happy Holiday program will start around Halloween to keep everyone healthy during the holidays.

Pinnacle Care Presentation:

Joseph Anderson said earlier this year it was mentioned how PinnacleCare is a concierge service for members to navigate the challenges of the health care system and manage serious or complex conditions. It is a service that has been rolled out to Cape Cod Municipal health Group and West

Suburban Health Group. Michael Hurley is here from PinnacleCare to go through the intent of the program as a benefit to both he member and MNHG.

Michael Hurley, Senior Vice President of Sales at PinnacleCare introduced himself. He said that at a high level, what they are doing is providing white glove healthcare, concierge services anytime a member spouse or dependent is faced with any sort of medical condition. If you really think about it, you use a real estate agent to buy a house, you use a lawyer anytime you're dealing with something legal, you're using a financial advisor for all your finances. And for something as important as your healthcare, they think it's very important that you have this support, white glove, healthcare cost, your support to be able to understand the difficult healthcare landscape. Pinnacle care has been around for 21 years and over those 21 years, they have spent that time building relationships with physicians, Regional Health systems and centers of excellence across the country. They partner with 130 Centers of excellence across the country. The goal is to get people to the best doctor based on their unique condition. From research to records they coordinate all aspects of a members care. It can be something as simple as a COVID diagnosis all the way to something much more serious like a cancer diagnosis or maybe a muscoskeletal diagnosis. They are in the business of collecting medical records as well. There a whole team behind the scenes that focuses on just medical records. So when you start an engagement with Pinnacle Care, they actually collect all your records and just one to two days. And not only do they collect them, they organize them and summarize them so that when referring you to a new physician, they immediately know what's going on with that patient. Members get fast access to the best doctors and institutions. A quick example was someone that actually works at Gallagher used the service. She had been seeing her doctor for a very, very long time and ended up having some back issues. Her doctor had said that she should probably have back surgery. What ended up happening was we ended up doing 3 separate second opinions with all the top experts all who said that that surgery should have been avoided if that surgery had happened, that might have deemed her immobile for the rest of her life. Instead, she did some physical therapy and that person is feeling great today. So just a quick example there, getting people fast access to the top experts and rendering a new decision for that person instead. The service delivers better health outcomes and minimizes high cost claims. The ROI average across the book of business is 3 to one, so the cost savings do follow with the solution as well. In 2021 the average cancer engagement saw average savings for \$24,000. Currently there's no guide for vetting a physician's experience or expertise. Your PCP may recommend a new Doctor to go see. You have no idea about the quality of care that physician. Why are they recommending that person? Why are they passing you along to them? Are they in network? These are all questions that Members are asking. Pinnacle vets 30,000 providers per year. Additionally, many physicians don't take the time to educate or explain the details right. A person has their 30 minute time slot with their doctor. If you're dealing with something serious, they're talking about some overwhelming information. How do you process it all? How do you ask the right questions? Members get set up with a personal health advisor immediately when they started engagement. And they speak to Members before and after every single appointment if they wish to help them understand what information they're doctor might deliver, what questions they might ask. And really, sometimes just to be a sound board to listen to their emotions and feelings. They're dealing with one of the most difficult times in their lives, and they have an expert on the other end of the phone that they can call at any point in time to listen to any other concerns, talk about their treatment path, and they stay with them throughout the entire course of treatment, whether that be six weeks, six months, one year, you're always working with that same personal health advisor. And members actually become very close with that personal health advisor. For employers, high cost claims continue to increase. Having their solution like this to keep cost savings down is very, very important. Health advisors that deal with members are highly trained, highly qualified folks

at all, have a medical background. They are a minimum MDMD, RN, BSN or MSA. So really experts there on the other end of the phone and they deal directly with Pinnacle's medical director team. They partner with 75 top Medical Advisory Board members who are experts in their field. They also partner with 130 centers of Excellence, 14 of which are located right here in Massachusetts. There are also 10 internal behavioral health coaches and they are building out resources there because of where behavioral health is going. If you're calling to get an appointment on your own right now, it might be three to six months out with an emotional health provider. If members call to deal with an emotional health issue, Pinnacle does an intake to assess kind of where you're at on that emotional health spectrum. From there, they recommend a provider for you to see. They set that appointment for you, and typically get members in and just 7 to 10 days for that first mental health appointment. So about three to six months on your own, about 7 to 10 days when working with PinnacleCare. Additionally, they partner with 27 academic medical centers to do remote second opinions. There are also 4500 top experts to do video consultations from anywhere in the world. Physician matching is something that sounds simple on the surface, but is actually something that's very, very detailed. Anytime members need just a new PCP specialist, a surgeon, an intake call will assess what is looked for in that position such as location, gender, age. Physicians who meet that criteria are confirmed for availability for a quick appointment. About two to three days after the initial call with the member they share a report that has typically three doctors. A picture of the doctor, their background, their education, their fellowships and an annotation right up from our medical director team as to why they are recommended and when they're available for a quick appointment. Expert second opinion is also important. In 2021, 30% of second opinions resulted in a new diagnosis. If it was cancer specific. 28% of the time it resulted in a new diagnosis. That's almost one in three people being misdiagnosed from the onset, which leads to incorrect treatment, which leads to wasteful spend in the medical plan, which leads to that member then going back to the doctor down the road. It really depends on what the diagnosis is and what the recommendation is for that next course of action. All of this typically happens in just 7 to 10 days. However, again, the personal health advisor stays with the member throughout the entire course of treatment whether that be one year or two years. Thirty days after all engagements end, the personal health advisor does a soft reach out just to check in, see how members are doing, see if there's anything else Pinnacle can help with.

Communicating the benefits of these plans and similar to what is done with Cape Cod Municipal Health Group and West suburban Health group. There would be a welcome kit right up front that has all of our information with it. Employee webinars, can be done during the day or evenings as well, which is actually a big hit because spouses join as well. There is also included with this rate one home mailer per year. Initially it would be best to get on a call with all the benefit administrators of every group within Minuteman here kind of educate all of them. Then when the program rolls out, set up webinars for all the employees, release the Internet site. And a lot of print materials and then maybe a couple months into the program releasing the postcard as well. Utilization grows with this program year over year. People find out about it, they use it, they love it, they go back to work, they tell their coworkers about it.

Joe Anderson said the next step would be to take a vote to send an RFP out to bid for these services. This was previously done for CCMHG and WSHG. What was found is that because of the unique nature of the services that Pinnacle provides, there are very few players in the market that would actually fit the bill. It is Pinnacle's local Massachusetts municipal experience that is critical to the success of the program. If the RFP is voted on there would be a turnaround of about a month and then there could be a cote on adoption and an implementation date.

Kerry Lafleur motioned to start an RFP process for this type of service.

Motion

Anne Marie Tucciarone-Mahan seconded the motion. There was a roll call vote.

Melisa Doig, Chair yes Rajon Hudson yes John Kittredge yes Ian Rhames yes Kerry Lafleur yes Chelsea Mason yes Anne Marie Tucciarone-Mahan yes William Schlosstein yes Brad Brightman yes

The motion passed by unanimous vote.

Health Plan and vendor reports:

Tufts – Lisa Despres said that Richard Caparso is no longer with Tufts Health Plan. She introduced a new account Associate Diana Hernandez. She is familiar with your accounts because she is from Harvard Pilgrim and supported Bill Hickey with some of your enrollment meetings in the past. The PBM is changing as of 01/01/23 to Optum. More information will be coming. As soon as the formulary is available it will be provided. The travel benefit was discussed at the last meeting. Weather the group decides to take it or not, Tufts is asking that the form be completed with a yes or no.

Anne Marie Tucciarone-Mahan motioned to accept the travel benefit with a max benefit of \$2,500.

Motion

Rajon Hudson seconded the motion. There was a roll call vote.

Melisa Doig, Chair yes Rajon Hudson yes John Kittredge yes Ian Rhames yes

Kerry Lafleur no response

Chelsea Mason yes Anne Marie Tucciarone-Mahan yes William Schlosstein yes Brad Brightman yes

The motion passed by majority vote.

Harvard Pilgrim- Mark Nicholson had nothing new to report

Blue Cross – Caroline Burnham introduced herself as the new Account Executive taking over the Chris Myhre. She is looking forward to working with the group.

Joe Anderson said that Blue Cross was slated to have the limited network on the qualified high deductible plan ready for January. In light of all the things going on with a New PBM their preference it to push it to a July 1st availability.

CanaRx- Jim Riley said that the group has saved just over \$100,000 compared to \$107,000 last year. The group is getting closer to being on track. There are new metrics available which can determine which campaigns are successful on the website. That will help develop marketing campaigns for future use. Reverse emails can also be used for member units to send out to employees.

Other Business:

Next meetings - Melisa Doig announced the next scheduled meetings:

- Steering Committee on Monday October 17, 2022 at 10:00 A.M.
- Board meeting on Monday, October 17, 2022 at 10:30 A.M.

Meetings were subsequently changed so that there will be no Steering Committee meeting and the Board Meeting will meet at 11:00 A.M.

There was no other business.

Anne Marie Tucciarone Mahan motioned to adjourn the meeting.

Motion

Rajon Hudson seconded the motion. There was a roll call vote.

Melisa Doig, Chair yes Rajon Hudson yes John Kittredge yes Ian Rhames yes

Kerry Lafleur no response

Chelsea Mason yes Anne Marie Tucciarone-Mahan yes William Schlosstein yes Brad Brightman yes

The motion passed by majority vote.

Melisa Doig, Chair, adjourned the meeting at 11:36 AM.

Prepared by Karen Quinlivan, Gallagher Benefit Services, Inc.