

## LMBC Meeting Minutes

October 10, 2017

Columbia Square Conference Room, 8<sup>th</sup> Floor  
Attendance

### LMBC Members present

Jamie Burrows  
Tom Armstrong  
Rachel Whiteside  
Betsy Ames  
Jay Guo  
Dave Benson  
Serilda Summers-McGee  
Tara Anderson  
Mike Abbate  
Mark Gipson

### Staff

Cathy Bless  
Jeannine Herrera

### Other Attendees

Anne Thompson (Aon)  
Emily Mungo (Aon)  
Todd Ringwood (Aon)  
Paul Cone (PTE-17)  
Marelle Wallace  
Jamaal Anthony  
Ryan Kinsella

### LMBC Members absent

Craig Morgan  
Jon Allen  
Stephanie Babb  
Alan Ferschweiler

#### 1. Meeting call to order: Co-Chair Betsy Ames facilitating.

Introductions around the room. New members:

- Tom Armstrong-Supervising Planner at BPS replacing Amy Archer
- Rachel Whiteside-Replacing Amy Bowles; union rep for PTE-17
- Dave Benson-Group Manager at PBOT; replacing Suzanne Kahn
- Serilda Summers-McGee- Assistant HR Director Replacing David Rhys
- Mike Abbate- Director for Parks and Rec, replacing Deborah Sievert

#### 2. Minutes for the July 11, 2017 meeting were reviewed and approved as written. The committee noted a name correction and then a request to be specific about which agenda items pertained to a discussion.

#### 3. Self-Insured Plan Experience Reporting: Cathy provided updates:

- The Health plan is running 4 percent higher than this time last year. September had 5 Fridays instead of the usual 4 and this adds an additional week of claims. This happens 2 or 3 times a year and is typically followed by a "normal" invoice for the following period.
- There was a large claim in September.
- The prescription claims are 8 percent lower the previous plan year. The higher claims in the previous year were due to larger than expected specialty medications.
- We continue to get rebates for Express Scripts which helps to offset the total prescription claims paid.
- Dental claims trending up. Experience has shown this trend to level off, and Aon will continue to track. Interest in the Dental buy-up option remains high and this may add to the cost as more participants will seek services.

There was interest from the Committee to better understand what is stop-loss and what is the level of stop-loss the City carries. To ensure new members understood what the term stop-loss meant, Cathy discussed specific stop-loss (claims by an individual) insurance. If individual claims are over a set dollar amount, then stop loss

insurance (purchased by the plan from Moda or another vendor) pays any claims and RX costs above the set limit for the remainder of the plan year. Cathy explained to the Committee the City's stop loss threshold is \$1M. This amount was the Committee's recommendation beginning in plan year 2016-17. When looking historically, the plan continually paid more premium than was refunded back to the City. The Health Fund now tracks this money so the plan can retain any of the dollars budgeted for large claims, but not used.

The Committee would like to better understand the budget for health care. There was detailed discussion regarding how the self-insured health plan is funded, and how the insured plans are funded. The reporting provided today does not show the "loss ratio" of the plan. The loss ratio reporting details how much money the City has collected through bureau, employee and retiree/COBRA contributions and measures the revenue against how much has been paid out in administrative costs, medical, and pharmacy claims. This reporting was not yet completed and is provided to the Committee each Quarter. The report will be available to the Committee at the November meeting.

Cathy will add an Agenda item to one of the upcoming meetings to discuss reporting and what this committee would like to see more of, less of, etc.

4. **Review of LMBC Guiding Principles:** Anne with Aon Consulting discussed the guiding principle's document distributed to the Committee. This document lays the ground work for how the Committee could evaluate options related to plan design, and help the Committee with its recommendations to Council. Over the past 3 years, since this document was created, we have come back to the Committee to reconfirm this document and/or make changes. Cathy's interest is distributing the document is for Committee to review the guiding principles bring back any discussion, concerns, changes for the next meeting in November. The desire would be for the Committee to vote on this document, at some point.

#### 5. **PCI-Preventive Care Initiative Updates**

Cathy Bless provided updates to the Preventive Care Initiative. The Benefits Office has been working with employees, Kaiser, Moda and some unions to ensure information is distributed as many ways as possible. The Benefits Office will be sending out another communication in a couple of weeks with a listing of worksite preventive appointments available to employees who do not have a primary care provider, or can't get in to see their provider by December 31<sup>st</sup>. Locations have been suggested by Moda, based on where they feel these appointments will be most successful. Once all locations and rooms have been scheduled and reserved, we will communicate to employees. Appointments will be available online through Kaiser or by emailing/calling the Health Advocate through Moda. Cathy confirmed to the Committee that the preventive care requirement was only required for the employee. If there is a larger need for the clinics than was scheduled, the Benefits Office is committed, as is Moda and Kaiser to schedule other opportunities. It will be important for the Union to help communicate these opportunities to its members.

If there are specific questions that Committee members are hearing, please let Cathy know so the Benefits Office can address questions/concerns quickly. The main questions received through the Benefits Office typically deal with, have I met the standard? And, Where's my letter? The goal is for folks to be successful and we will work on additional communications as needed.

Mark Gipson asked for additional clarification on what constitutes meeting the Standard? Cathy explained that someone who is seeking regular medical care-whether through PCP, naturopath, etc., with a regular established relationship with a primary care provider doesn't have anything to worry about. Moda will use many different methods to determine if an employee has met the Standard. The intention is not to say "okay, you have established a relationship, but we want you to do this other thing". Having an established relationship with a PCP is the goal to ensure employees have regular check-up's and catch health risks early to maximum their individual quality of life and remain healthy.

The Committee showed an interest in understanding how the City intends to measure the success of this program?

Cathy provided the following:

- First year data will be used as a baseline; then moving forward, Moda and Kaiser will assess the following:
  - How many employees met the Standard (move the % who do not seek care to less than 5%)
  - How many primary care visits
  - Medication compliance
  - Measured improvements in standard health matrix's over the employee population (e.g. aggregate reporting, similar to Moda annual report.
  - Evaluation by the LMBC to implement strategies (plan design) related to the health reporting/outcomes from Kaiser and Moda
  - Is the City stabilizing its trend through these efforts? (measured annually and over time)

**6. Benefit information Requests:**

- a. As requested in a previous meeting, Cathy provided the Committee the prior benefit survey results. We have not done a new survey in the last 2 years and can discuss whether the Committee would like to get additional feedback from employees. Cathy will keep this item under "Other Business" providing the Committee an opportunity to think about how it would like to move forward.
- b. Cathy also distributed a history of health plan changes and what decisions were considered from year to year. This was a request of the Committee and should help provide context for discussion in the future.

**7. Other business: (as time permits)**

- There was a question from the Committee regarding coverage for 3D Mammography. Cathy confirmed the City does cover all types of Mammography and if any employee experiences a claims issue, they can contact the Benefits Office for assistance. Cathy did confirm that problems have come up. Many health plans under Moda don't cover 3D mammography.
- Betsy Ames shared with the new members of the Committee that she has worked for the City for 20 years and was "cheap" for the plan; until she was diagnosed with cancer. Going through treatments, intersects with the work of the committee and provides an increased awareness of the important work the committee does.

**8. Public or final comments-none. Meeting adjured.**