

## LMBC Meeting Minutes

February 19, 2019

Rose Room, City Hall

Attendance

### **LMBC Members present**

Tom Armstrong  
Dave Benson  
Jamie Doscher  
Alan Ferschweiler  
Chris Flanary  
Mark Gipson  
Jay Guo  
Jeannette Hopson  
Claire Houston  
Craig Morgan  
Rachel Whiteside

### **Staff**

Cathy Bless  
Anne Hogan  
Michelle Taylor

### **Presenters**

Anne Thompson (Aon)  
Shelley Zhao (Aon)  
Emily Shettel (Aon)

### **LMBC Members absent**

Leslie Goodlow  
Ashlie Grundy

1. **Meeting Called to Order** – Co-chair Dave Benson called the meeting to order at 1:37 pm
2. **Meeting Minutes Discussion** – Co-Chair Alan Ferschweiler joined the meeting and requested that the committee review the meeting minutes for any amendments, changes or deletions. There were no errors and the committee accepted the meeting minutes as written.
3. **Health and Welfare Plan Renewal (Aon)**

Anne Thompson began the discussion on Aon's preliminary plan renewal slide presentation. On slide 4, Shelley Zhao highlighted changes from the previous plan renewal report that was presented at the last meeting:

- Kaiser premium renewal costs will not change from the current coverage year
- **Less of the City's Health Operating Fund Reserve dollars are expected to be used to keep the CityCore premium increase to 5.5% for employees.** CityCore renewal costs are slightly less than reported during last presentation.
- Vision Service Plan (VSP) renewal premium costs are slightly more.

Emily Shettel explained there were no changes on slides 5 and 6 from the previous plan renewal report showing total costs for Basic Life, Long Term Disability (LTD), Employee Assistance Program (EAP) and rate guarantees from each vendor. Slide 8, showing preliminary employee premium contributions showed a very slight decrease in the family rate for the year. Aon was able to negotiate the Moda Stop Loss renewal increase from 15% down to 9.5% as highlighted on Slide 9.

Moda's clinical enhancement proposals starting on slide 10 were highlighted:

- **Item 1 – MagellanRX Management:** Moda clarified that this Infusion Therapy is the same program implemented on 7/1/18 but they had not communicated a cost for the program in error. No admin fees were charged this 2018-2019 coverage year as a result and Moda has

reduced the cost from \$0.35 PMPM to \$.26 PMPM. Moda estimates a savings of \$1.25 PMPM or \$137,000 annually.

Cathy Bless added most of the savings had come from Remicade users and she believes this to be a valuable program as it allows participants to have these services provided at home. There have been no complaints from employees or their dependents. Though Moda is holding firm at the current cost they're looking for a less expensive vendor to administer the program. Jamie questioned whether members can choose to participate, and Cathy confirmed this.

Emily moved on to slide 11 items:

- **Item 2 – Telehealth/Virtual Visits:** In partnership with OHSU, this service allows members to obtain care through live video chat on a computer, tablet or smart phone with providers. The current cost for the City/plan per telehealth session would be \$49 while it costs \$100-\$200 to see a primary care doctor at her/his office. Children can also be treated using this telehealth service.  
**\*\* Members agreed that the \$10.00 copay would be enough of an incentive for members for the next plan year.**

Moda recommends the City consider reducing or waiving member cost share to incentivize member usage. The Committee will need to decide whether copays should be waived or reduced. Chris Flanary, the new labor committee member replacement for Tara Anderson, wanted to know whether there was any guarantee a human being would be advising patients. Emily answered yes and added appointments could only be scheduled at least 30 minutes in advance and members are face-to-face with their provider via their computer, phone, etc. Jamie Doscher asked if the copays could be set at \$10, \$15 or \$20 and Cathy confirmed this. Mark Gipson mentioned he was hesitant to waive copays and wondered if a pilot project with a \$10 copay could be offered for a year. Cathy mentioned the City and a company called 98.6 degrees were conducting a pilot project with our retiree population. This company uses a combination of artificial intelligence (AI) and a provider to diagnose patients. The AI prescreens participants. Providers can prescribe some medications as well. The pilot started in August and some preliminary data should be available soon.

Members were interested in whether this telehealth service could be used by patients to contact their own providers. This particular model through OHSU is only available through OHSU. Participants should be encouraged to talk with their providers about telemedicine opportunities within their clinic, however, the question regarding co-pays for the Committee to consider is only under OHSU.

Alan mentioned that part of the savings can be found in what isn't utilized by patients not going into to doctor's office. Claire Houston asked whether telehealth appointments were available 24 hours a day, seven days a week and Emily answered that they could find out. Claire also wondered whether providers could schedule follow up appointments if necessary and Cathy thought that it probably would be challenging as she wasn't sure if participating hospitals had the capabilities to do this. Rachel Whiteside added that her experience with urgent care is that follow-up visits can't be scheduled at these types of clinics.

Jamie asked whether this telehealth service would still be available to members if the committee decides not to waive or change the copay? Emily confirmed the service would still be available and would be coded as an urgent care or doctor's visit with a \$35 copay. Claire asked if mental health or dermatology providers would be part of this service and Emily replied that it is currently being reviewed and could be added by OHSU in the future. Alan wanted to know if such a visit would count toward the Preventive Care Initiative requirement and Cathy answered no. This specific service is for acute issues and would not meet the preventive exam intent.

**Member consensus was the \$10.00 copay would likely be the recommendation for this service.**

- **Item 3 – MyIDCare:** Financial and medical identity protections; unusual service as it monitors medical claims history.  
**\*\*No, members expressed no interest in this service\*\***
- **Item 4 – EviCore Health Imaging Management:** Pre-authorization review of advanced imaging services; Moda has not been able to provide potential savings to justify cost of \$.55 PMPM.  
**\*\*No, members are not interested in adding this service\*\***

Slide 12 highlighted the state-based regulatory changes and Aon was able to clarify the following information:

- **Item 2 – Reproductive Health and Women’s Preventive Health Services:** All mandated contraceptive devices, drugs and products are covered at no cost share. If covered through Moda, condoms would be covered but members would have to submit receipts for reimbursement. **However, Aon is asking prescription vendor Express Scripts whether they would allow pharmacy point-of-purchase sales of condoms to be covered so that members would not have to submit reimbursement forms and receipts to Moda.**
- **Item 3 - Reproductive Health and Women’s Preventive Health Services:** Abortion and male contraception/sterilization are covered at \$0 copay after deductible is met; Moda has estimated that the claims impact to be \$15,000 or less.

Chris wanted to know if the abortion pill (RU486) would be part of the coverage and Emily responded that she would find out.

Slide 16 highlighted other benefit change proposals and additional clarification:

- **Item 2 – Tobacco Cessation:** Moda is requesting that out-of-network services be paid at the out-of-network coinsurance rate and accrue at the out-of-network out-of-pocket maximum. Only 1 member utilized out-of-network services in 2017 and there were no out-of-network claims in 2018. **Aon recommends no change.**
- **Item 3 – Mental Health Copays:** For the July 1, 2019 to June 30, 2020 plan year, copays for mental health/substance abuse related office visits will be reduced to \$0; Prescription drugs related to mental health/substance abuse would have a \$15/\$30 maximum copay for retail or mail order

Because of the Preventive Care Initiative data, Cathy, on behalf of BHR, is specifically making a request to the committee to implement a mental health copay waiver for the 2019-20 plan year to help push a broader year-long, initiative promoting a focus on mental health. By waiving copays for CityCore participants, the goal is to increase mental healthcare accessibility. Alan wanted to know the potential cost of the waiver and Aon estimates that it would be under \$25,000 a year. Cathy reminded committee members about the employee’s ability to first reach out to Cascade Centers (our EAP providers), as their representatives can help participants find in-network providers. Moda patient advocate Heidi Jurgens is also able to provide additional information about mental health providers. Claire requested it be documented that the committee will revisit the \$0 copay waiver prior to next coverage year beginning on July 1, 2020.

Slide 18 highlighted Express Scripts clinical enhancement proposals and Aon was able to clarify the following information:

- **Item 2 – SaveOn Copay Offset Program:** Allows the plan and member to save money by utilizing the manufacturer rebates available for over 90 different specialty drugs. One challenge of this program is that members must sign up for program. Currently, 70 members could be affected and pay a \$0 copay. Emily noted that Express Scripts could reach out to these members to inform them about program.

However, if this program is implemented and members don't opt-in to this program, they could be faced with a \$1000 prescription copay at their pharmacy. The estimated savings are \$373,000 but the potential communication breakdown is problematic. Members must be proactive and call in to Express Scripts to participate in this program.

Because of time constraints, the committee moved on to the Kaiser Plan Renewal slides and the following potential benefit changes were highlighted on slides 24-28:

- **Item 1 – Mental Health Copays** - With the mental health enhancement (waiving copays for office visits), the Kaiser renewal premium would increase by 0.1% compared to the status quo renewal.

Aon also requested Kaiser provide more detailed information on what the alternative care benefit would include and potential costs (based on other public sector's alternative care benefits experience):

- **Item 2 – Alternative Care Rider** - Copays would be \$20 per visit and members could see chiropractors, naturopaths and acupuncturists.
  - The plan maximum would be \$2000 which would cover approximately 15-20 visits per person per plan year

This benefit could potentially cost the City \$16.69 per employee per month or \$375,000 annually but Kaiser has offered this benefit to the City for free for the next three years (valued at \$1.1 million). Chris asked if the Kaiser plan could include an alternative care buy-up plan or even a third-party vendor? Emily responded that Kaiser's own fully insured plan and these benefits are all bundled within their medical plan.

If the alternative care offer is accepted by committee, Aon asked Kaiser to propose a plan design to balance this additional benefit as seen on slide 25:

- **Item 3 – Out-of-Pocket Maximum and Inpatient Copay Increases** - Increase the OOP maximum from \$600 per individual and \$1,200 per family to \$1,000 per individual and \$2,000 per family.
  - Include an inpatient copay of \$50 per day up to \$250 maximum per admission (members average length of stay is 2-3 days)

Because of this plan change, there would be a \$8.71 savings for the City with employees seeing a \$0.40 reduction in their costs.

As the meeting wrapped up, Cathy wanted to let committee members know that former LMBC committee member Betsy Ames recently passed away after her long battle with cancer. Cathy attended her memorial service over the weekend and she told members that she fought her battle with grace and dignity. Her last LMBC meeting was in March of last year.

#### 4. Other Business: None

5. **Public Comment:** As the meeting wrapped up, PROTEC17 President Paul Cone wanted to make an appeal for the mental health enhancement change. It would be an important benefit for patients who see a therapist every week as these copays quickly add up.

6. **Next Meeting: Tuesday, March 19, 2019, 1900 SW Fourth Ave, Room 2500C. The meeting will begin at 1:30 pm and will be scheduled to go until 3:00 pm.**
7. **The meeting was adjourned at 3:03 PM.**