

Minutes – APPROVED
Claims and Appeals Committee
September 14, 2021 – 2:00 p.m.
Zoom

Present: Bud Shattuck, Don Fischer, Tanya DiGennaro, Tom Brown, Donna Dawson
Staff/Guests: Elin Dowd, Executive Director; Michelle Cocco, Clerk of the Board; Kylie Rodrigues, Benefits Specialist; Judy Drake, Board of Directors Chair; Rob Spenard, Locey & Cahill

Call to Order

Mr. Shattuck, Chair, called the meeting to order at 2:01 p.m.

Approval of Minutes of July 20, 2021

It was MOVED by Mr. Fischer, seconded by Mr. Brown, and unanimously adopted by voice vote by members present, to approve the minutes of July 20, 2021 as submitted. MINTUES APPROVED.

Changes to the Agenda

There were no changes to the agenda.

Executive Director Report

Ms. Dowd reported the Annual Board of Directors meeting will be held on September 23rd in the Tompkins County Department of Emergency Response conference room with an option for members to attend remotely due to the Legislation recently signed by Governor Hochul. She reported the Department of Financial Services has issued a new Certificate of Authority that allows the Consortium to operate in an expanded territory and as a result she is in discussion with potential new members. The Board will take action on accepting new members at its upcoming meeting and will also be asked to approve a contract with ProAct for Prescription Benefit Management Services. Ms. Dowd noted that as a result of discussions during the negotiation process, ProAct will be putting new things in place that are expected to improve customer service with members.

Ms. Dowd said the proposed budget includes a premium rate increase of 5% which she feels is fair and competitive based on marketplace information she has received. She reported the Executive Committee is discussing how to proceed with developing a long-term business plan and in October the open enrollment period will kick off with a Benefit Clerk meeting in conjunction with our administrative partners; those meetings will be held on October 18 and 19.

Ms. Dowd spoke of the significant increase in requests for information regarding claims payments. As a result of a request for additional support, Excellus will be providing a dedicated customer service team with a dedicated phone number for all Consortium members to call for service with a team that is familiar with the Consortium. She believes many more customer claims and benefit issues will be able to be resolved without the intervention of benefit clerks.

Mr. Shattuck referenced information he has seen that stated Excellus rates were approved in the range of 3-4%. Ms. Dowd asked Mr. Shattuck to share that information but said it could be for a very specific group of Excellus customers. Mr. Spenard said the information he has seen indicates that the Excellus rate increase, although not yet approved, is approximately 9.7%.

Appeal Flow Charts

Ms. Dowd said work has continued with updating the appeals flow chart since the last meeting. Ms. Rodrigues reviewed changes that were made, noting that there continues to be separate charts for Excellus and ProAct as there are two different processes. In addition to helping subscribers, the flow charts will also be helpful to benefits clerks in working through the appeals process.

In response to Mr. Shattuck regarding prior authorization, Ms. Rodrigues said a doctor should be familiar with the process for prior authorization and should be sending in a prescription to ProAct. Once the doctor receives the authorization, they would send it to the pharmacy as this is how the prescription gets paid for through ProAct. She said problems arise when people take their prescriptions directly to the pharmacy without the prior authorization going through the doctor.

Mr. Brown said providers have the option to do a prior authorization instantly through the system but in many cases a Nurse or Physician's Assistant does not have time at that moment and instead does it at a later time. Ms. Dowd said one thing that is being stressed is that when prescriptions are not filled when someone is in the pharmacy the subscriber should not leave the pharmacy as there are things that can be done to resolve the problem there. Some of the reasons why prescriptions are not filled include the wrong card is given, the individual or pharmacy is confused between Excellus and ProAct, or the prescription involves prior authorization.

The Committee expressed support for the revised flow charts and posting them on the Consortium's website.

BMI Claims Audit

Ms. Dowd reported meetings have taken place to close out the medical claims audit. She said issues continue to be raised about orthotics in the audit that are the result of a miscommunication. In response to this a meeting was held to address how claims will be paid. She believes it was the result of a definition issue and once paperwork is set up she expects those issued will be resolved. Ms. Dowd reported she signed the agreement today with BMI to begin the prescription drug claims audit; a planning meeting will be scheduled soon to start the process that is expected to take 20 weeks.

Mr. Shattuck asked if there has been any feedback or questions from members since the Consortium took action to include vision and hearing benefits. Ms. Dowd said there were some initial questions; Ms. Rodrigues has not received any questions. Ms. Dowd said this could be included in another newsletter to inform members that this benefit is available.

In response to a question from Mr. Brown regarding coverage for Covid testing, Ms. Dowd said in cases where an unvaccinated individual is required by their employer to get tested those tests are not covered. Tests are covered for individuals who have symptoms or when testing is required prior to a medical procedure. Treatments are now covered at the regular copay. Ms. Rodrigues reviewed the contents of a communication on the de-implementation of mandates that will be going out to inform members about what is now covered.

Next Agenda

Ms. Dowd said a meeting will be called if a need arises relating to an appeal or one of the audits. Otherwise, the Committee will meet next in early 2022.

Mr. Shattuck said he would like to receive a report on feedback received once the flow charts are posted to the website. Other items to be included on the next agenda include: an update on the prescription drug claims audit, feedback on the vision and hearing benefit utilization, flu shot overview, and Excellus and ProAct utilization report review.

Adjournment

The meeting adjourned at 2:45 p.m.