



Greater Tompkins County Municipal Health Insurance Consortium

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"Individually and collectively we invest in realizing high quality, affordable, dependable health insurance."

MINUTES

Greater Tompkins County Municipal Health Insurance Consortium
Joint Committee on Plan Structure and Design
March 2, 2017, 2016 – 1:30 p.m.
Rice Conference Room, Health Department

Approved

Present:

Municipal Representatives: 12 members

Judy Drake, Town of Ithaca and Board of Directors Chair; Betty Conger, Village of Groton; Eric Snow, Town of Virgil; Bud Shattuck, Village of Union Springs; Laura Shawley, Town of Danby; Charmagne Rungay, Town of Lansing; Jennifer Case, Town of Dryden; Joan Mangione, Village of Cayuga Heights; Mack Cook City of Cortland; Carissa Parlato, Town of Ulysses (arrived at 1:34 p.m.); Ann Rider, Town of Enfield (arrived at 1:35 p.m.); Schelley Michell-Nunn (arrived at 1:59 p.m.)

Municipal Representative via Proxy: 1

Tom Brown, Town of Truxton (Proxy – Eric Snow)

Union Representatives: 6 members

Doug Perine, Tompkins County White Collar President (arrived at 1:35 p.m.); Jon Munson, Town of Ithaca Teamsters; Olivia Hersey, TC3 Professional Admin. Assoc. Unit; Tim Farrell, City of Ithaca DPW Unit; Jim Bower, Bolton Point Water Unit – UAW Local 2300; Tim Arnold, Town of Dryden DPW Teamsters (arrived at 1:40 p.m.)

Union Representatives via Proxy: 2

Teresa Viza, TC Library Staff Unit; Kate Devo, TC Library Professional Staff Unit

Others in attendance:

Don Barber, Executive Director; Beth Harrington, Tompkins County Fire, Disaster, & Rescue; Ken Foresti & Beth Miller, Excellus;

Call to Order

Mrs. Shawley, Vice Chair, called the meeting to order at 1:32 p.m.

Changes to the Agenda

There were no additions or deletions to the agenda. The minutes were deferred until a quorum was present later in the meeting.

Chair's Report

Mrs. Shawley said she spoke with Mr. VanWormer prior to the meeting and he had no report.

Report from Chair of the Board of Directors

Ms. Drake reported the Board met on January 26th and approved a records retention policy for the Consortium, increased the membership of the Audit and Finance Committee, and had a lengthy

discussion with Joe Scotti of CanaRX and John Powers, the Consortium's legal counsel, about the CanaRX program. At the next Board meeting on March 23rd the Board will consider a resolution to move forward with the program.

Ms. Parlato arrived at this time.

Executive Director Report

Mr. Barber also spoke of the Board meeting at which Joe Scotti of CanaRX and John Powers were in attendance to talk about the CanaRX program and said many questions were raised and responded to.

Ms. Rider and Mr. Perine arrived at this time.

He said the FDA has not given formal approval to CanaRX operations but has never taken any steps to stop CanaRX. When the Consortium first began looking into CanaRX, input was sought from the New York State Department of Financial Services but the Consortium did not receive a direct answer but DFS stated there is nothing in Article 47 that would prevent the Consortium from using the program and suggested the Consortium look into other laws. This has been done and the Consortium's attorney has found no State laws that would be violated by using CanaRX. Mr. Barber said the Department has audited another Article 47 program and did not make any comments about its relationship with CanaRX. He also noted that all of the contract work with CanaRX would be with the individual member and not with the Consortium. A straw poll was taken at the Board of Directors and it was unanimous that the Board wanted to have this brought back to the next meeting.

Mr. Barber said he asked Mr. Locey to run the Metal Level Plans through the Federal Actuarial Value Calculator and produced the following results for 2018:

- Bronze Plan - 60.49% (required level = 60% +/- 2% deviation)
- Silver Plan – 72.45% (required level = 70% +/- 2% deviation)
- Gold Plan – 79.7% (required level = 80% +/- 2% deviation)
- Platinum Plan – 91.34% (required level = 60% +/- 2% deviation)

The only plan that appears to need a slight adjustment is the Silver Plan and Mr. Locey will be working on a couple of proposals to bring back to the next meeting.

Mr. Barber announced the next educational retreat will be held on May 10th at 9 a.m. in Legislature Chambers. The focus of the retreat will be the patient's role in the Consortium and health care in general. Topics will include the role patients play, medication choices, preventative care, co-pays, trends with Medicaid, the Affordable Care Act, new technologies, telemedicine, plan design, drug tiers, and wellness. He asked labor representatives to encourage labor to attend. Refreshments will be provided.

Mr. Arnold arrived at this time.

Approval of Minutes of January 5, 2017

It was MOVED by Ms. Rider, seconded by Ms. Conger, and unanimously adopted by voice vote by members present, to approve the minutes of January 5, 2017 as submitted. MINUTES APPROVED.

Appointment of Labor Directors and Alternate

Mrs. Shawley said Mr. VanWormer continues to work on reaching out to members to seek interest in filling the fifth labor seat on the Board of Directors. Following a brief discussion Mr. Farrell volunteered to serve in this role.

It was MOVED by Ms. Hersey, seconded by Mr. Perine, and unanimously adopted by voice vote by members present, to appoint Tim Farrell to serve as the fifth labor representative on the Board of Directors. MOTION CARRIED.

It was MOVED by Ms. Hersey, seconded by Mr. Munson, and unanimously adopted by voice vote by members present, to appoint David Flaten to serve as an alternate to any labor representative who is unable to attend a Board of Directors meeting. MOTION CARRIED.

Prescription Drug Fourth Tier 4

Mr. Barber provided an update on the development of a fourth prescription drug tier and reported that Mr. Locey discovered that within Section 4303 jj of New York State Insurance Law it is stated that any drug cost sharing or copays cannot be higher than the copay for non-preferred brand name drugs (Tier 3). Therefore, if a fourth tier was created, the copays would have to match those for a third tier. When this was brought to the attention of ProAct they were not aware of this; they have been asked to go back and look at their book of business and find out if anyone else is doing this and if so how they are doing it. Once information is received it will be taken to the Consortium's attorney to confirm what is being done is legal under New York State Law. If it is it will be brought forward at that time.

Telemedicine MD Presentation

Ms. Miller said Excellus has secured an outside vendor, MDLive, for its new Telemedicine program. The program has been utilized by Excellus for its employees and has allowed members to receive services through a medical doctor and receive prescriptions if needed without physically going to a provider's office. As a self-insured program this is something the Consortium would have to select that would have an additional administrative cost at .65 per contract (employee) per month. The Consortium has approximately 2,300 total contracts.

Ken Foresti, Excellus Coordinator for Health and Wellness, said people presently have three options to deal with a medical situation – visit a primary physician, urgent care center, or emergency room. This option allows a patient to talk to a board certified physician through a phone, mobile device, tablet, or a computer to get help for minor conditions. He provided an overview of the program through a video presentation that was summarized as follows:

- Virtual Care – Anywhere; Customized Turnkey Solution
 - Reduced cost – monthly reporting and annual utilization review
- Drive employee satisfaction
 - State of the art innovation for access to care;
 - Real time eligibility and file feed; appropriate co-ay/deductible; no balance billing;
 - Cost share accumulates in-network;
 - \$10 copay (for hybrid and HDHP deductible applies, for plans with lower office visit co-pay, lesser copay will apply)
- Increase Productivity
 - Less time off work for sick appointments

Perfect for Non-Life Threatening Conditions When Your Physician is Not Available

Adult care: acne, allergies, asthma, bronchitis, cold & flu, fever, headache, infections, joint aches & pains, nausea & vomiting, pink eye, rashes, sinus infection, sore throat, sunburn, urinary tract infection

Pediatrics: cold & flu, constipation, earache, fever, nausea & vomiting, pink eye

- MD Live Customer Experience:
 - Easy step-by-step instructions, security of personal health information, virtual visit by appointment or “on demand”, employee doctor selection, real time eligibility exchange, pay by credit card, HAS, HRA, or FSA cost share payment, triage to 911 if necessary – no charge for service, access 24/7 365 days a year including holidays, backed by Excellus commitment to satisfaction
- After the Appointment:
 - Discharge instructions;
 - Updated personal health record;
 - Primary care physician receives clinical visit summary by fax
- Monthly Client Reports:
 - Monthly and YTD;
 - Customizable to include group utilization requirements such as gender, age, time of day
- Telemedicine: Benefits for You Partnering with Us:

	Telemedicine cost=\$40/visit	Physician visit	Urgent care visit	Emergency Room visit
Average cost	\$40	\$116	\$256	\$1,566
Current utilization		23,037	2,276	1,083
Possible % shift to Telemedicine		2-15%	7-45%	10-20%
Example of cost savings range		\$35,016-\$262,622	\$34,381-\$221,022	\$165,266-\$330,532

Mr. Foresti demonstrated how a member would log into the website, add a medical history, schedule an appointment, upload a video, choose a provider, and select a pharmacy. He explained the implementation timeline and said since the Consortium would have to buy into this it would need to start at the beginning of the year. Ms. Miller explained that the cost of the visit is \$40 that would include a \$10 copay to the member regardless of the plan. It is a new delivery of health care at a much lower cost and would have direct impact on the Consortium’s claims expense. It was also noted that employees who are not enrolled in a health plan can use the program but would pay the full cost of \$49. The program would have to be offered Consortium-wide and not by municipality.

Mr. Foresti said based on statistics for the Excellus employees for 2016 and the first two months of 2017, 94% of the patients who utilized the program had their medical issue resolved as opposed to being referred elsewhere. Ms. Miller explained the extensive research Excellus did and the lengthy process that was used to vet responses to its request for proposals to find a vendor they believe meets the standards of excellence they were seeking which included having providers available in every state and a high standard of security. MD Live has been operating for 15 years and are located on the East Coast.

It was stressed that marketing is very important; each month there is an information blast to keep the program in front of people and easily accessible to members. Mr. Foresti said additional reporting is becoming available from other groups that are participating that he will provide. It was noted this would be part of the Excellus renewal; Mr. Barber said it would need approval by the Board of Directors to move forward with the program

Ms. Mangione was excused at 2:30 p.m.

Ms. Drake asked if there have been any issues with misdiagnosis. Mr. Foresti responded that he has not heard of any but can look into this further. They are board-certified doctors that follow a strict protocol and are required to be trained in telemedicine.

Next Meeting Agenda

The following items were suggested for inclusion on the next agenda:

- ProAct Utilization Report;
- Update on fourth prescription drug tier;
- Silver Metal Level Plan Actuarial Value;
- CanaRX update;
- Telemedicine – responses to questions

Adjournment

The meeting adjourned at 2:42 p.m.

Respectfully submitted by Michelle Pottorff, Administrative Clerk