



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 – APPROVED

Greater Tompkins County Municipal Health Insurance Consortium

Joint Committee on Plan Structure and Design

May 3, 2018 – 1:30 p.m.

Rice Conference Room, Health Department

Present:

Municipal Representatives: 12 members

Judy Drake, Town of Ithaca and Board of Directors Chair; Bud Shattuck, Village of Union Springs; Eric Snow, Town of Virgil; Carissa Parlato, Town of Ulysses; Charmagne Rumgay, Town of Lansing; Laura Shawley, Town of Danby; Schelley Michell-Nunn, City of Ithaca; Mark Witmer, Town of Caroline; Mack Cook, City of Cortland; Kevin Williams, Town of Homer; Michael Murphy, Village of Dryden (arrived at 2:00 p.m.); Sharon Bowman, Tompkins County

Municipal Representative via Proxy: 3

Betty Conger, Village of Groton (Proxy – Charmagne Rumgay); Tom Brown, Town of Truxton (Proxy – Eric Snow); Jeff Walker, Village of Cayuga Heights (Proxy – Mark Witmer)

Union Representatives: 9 members

Olivia Hersey, TC3 Professional Admin. Assoc. Unit; Tim Farrell, City of Ithaca DPW Unit; Doug Perine, Tompkins County White Collar President; Jon Munson, Town of Ithaca Teamsters; Daryl Rutledge, Town of Danby Highway; Zack Nelson, City of Ithaca Admin. Unit; Tim Arnold, Town of Dryden DPW; Jeanne Grace, City of Ithaca Executive Unit; Jim Bower, Bolton Point Water

Union Representatives via Proxy: 1

Theresa Viza, Tompkins County Library Staff Unit (Proxy – Olivia Hersey)

Others in attendance:

Don Barber, Executive Director; Ted Schiele, Owing Your Own Health Committee Chair; Beth Miller, Excellus; Steve Locey, Locey & Cahill; Corey Prashaw, ProAct;

Call to Order

Ms. Hersey called the meeting to order at 1:40 p.m.

Changes to the Agenda

There were no changes to the agenda.

Approval of Minutes of April 5, 2018

It was MOVED by Mr. Williams, seconded by Mrs. Shawley, and unanimously adopted by voice vote by members present, to approve the minutes of April 5, 2018 as submitted. MINUTES APPROVED.

Executive Director's Report

Mr. Barber reported the Audit and Finance Committee has been working on a number of issues, including the issuance of a Request for Proposals related to the Investment Policy that was recently adopted by the Board of Directors. The Owning Your Own Health Committee has been working on developing a work plan for the Wellness Consultant who he hopes will be on board by summer. The Website Committee has a general framework for the new website; data is currently being transferred over to the new site. Mr. Farrell and Ms. Hersey expressed interest in providing feedback and asked to be provided with the website's address once it is available.

Mr. Barber commented on the educational retreat held last week that focused on claims utilization and said it was very well attended. It was decided that because there were not many members of this Committee in attendance at the retreat that it would be good to have the information presented to the full Committee. ProAct will present prescription drug utilization information today and Excellus will attend the next meeting to present utilization data on the prescription drug side.

Labor Representative to Owning Your Own Health Committee

Ms. Hersey said there is a vacancy on the Owning Your Own Health Committee for a labor representative. Mr. Schiele said the Committee meets the third Wednesday of each month at 3 p.m. and explained the Committee markets the programs that are made available through the Consortium and tries to come up with different communication strategies, such as redesign of the website. The Committee will be reaching out to the Wellness Consultant and as many partners as possible to engage them and to find wellness champions in work places.

Ms. Hersey asked if there was a Committee member who is interested in serving on the Committee as a labor representative. It was noted that the representative is not required to be a member of the Committee. No member expressed interest at this time; this will be included on the next meeting agenda.

Financial Update

Mr. Locey distributed and reviewed financial information through March 31, 2018. Revenue was \$77,000 over-budget and paid prescription drug and medical claims for the first quarter were down compared to budget. Medical claims were 2.9% below budget and prescription drug claims were 8.6% below budget for this period. He noted this is common at this time of year because people are paying more out-of-pocket to meet deductibles. He reported CanaRx is running below budget and appears to be diminishing in its impact. Mr. Locey summarized the quarterly results and said expenses were \$771,000 below budget and there was a positive net income of \$630,000, compared to a slight deficit that was budgeted for this point of the year.

Mr. Locey called attention to the Expense Distribution Chart and said 94.39% of each dollar goes towards the payment of benefits and the remaining 5.6% being used to pay all administrative costs which shows the Consortium is extremely efficient from a financial perspective.

He concluded that the Consortium had an extremely good first quarter and provides a positive outlook for the 2019 budget process.

Mr. Shattuck asked if the reason for lower-than-expected results from the CanaRx program is due to generics taking over brand name drugs. Mr. Locey said this it is partly due to the increase in the number of generic drugs that are available and there may be some people who are still uncomfortable with mail order prescriptions or receiving drugs from an out of the Country source.

Ms. Hersey encouraged members to promote usage of the CanaRx program to other subscribers.

Mr. Schiele suggested looking at TC3's data to see how long it took for usage of the program to build. Mr. Locey said he would check to see if TC3 would be willing to share information. Mr. Prashaw said he would also provide data from other entities.

Mr. Murphy arrived at this time.

Opioid Update

Mr. Barber distributed and reviewed two documents related to opioids. The first was 2016 CDC guidelines for prescribing opioids for chronic pain and the second was an outline of New York State Legislation that has been enacted that relates to opioids and the FDA (Food and Drug Administration) Opioids Action Plan that was issued in May 2018. He encouraged members to review the information.

Ms. Miller said at the request of the Attorney General Excellus will be helping to educate new users who are prescribed opioids to treat pain. As of July 1, 2018, any new user who has Excellus as their prescription drug carrier will receive a letter that speaks to the side effects and other factors that can lead to dependency and urges patients to take medications as prescribed.

Ms. Hersey said there are some people who use acupuncture for pain management but noted there is no insurance coverage past the ten visits per year. She suggested that as an alternative to opioid use there could be discussion of how to provide subscribers with more covered visits.

Silver Metal Level Plan

Mr. Locey distributed a summary of benefits contained in the Silver Metal Plan and two options for plan design changes that would bring the actuarial value into an acceptable range in 2019 with the only change being to the deductible. He also distributed a cost range summary to demonstrate what percentage of the Consortium's population could be impacted but noted there is a very small segment of the Consortium's population in the Silver Plan. He also noted that representatives of employers that currently offer the Silver Plan were supportive of a deductible change. Mr. Locey said the Committee needs to make a recommendation on this benefit change and present it to the Board of Directors so that a change can be adopted in time to be implemented by Excellus in 2019.

	<u>Current Deductible</u>	
	In-Network	Out-of-Network
Individual	\$1,800	\$3,600
Family	\$3,600	\$7,200
	<u>Option 1 Deductible</u>	
	In-Network	Out-of-Network
Individual	\$2,000	\$4,000
Family	\$4,000	\$8,000
	<u>Option 2 Deductible</u>	
	In-Network	Out-of-Network
Individual	\$2,200	\$4,400
Family	\$4,400	\$8,800

Mr. Shattuck said he would prefer to Option 2 because it would make it unlikely that a change would be needed to be made again next year. He said he would like to take this back to his Board before casting a vote.

There was consensus that this would be included on the next agenda for approval.

Pharmaceutical Utilization Review

Mr. Prashaw provided a high-level overview of prescription drug utilization for 2017 and noted the following:

- There was an increase in eligible members from 2016 to 2017 of 110 with a substantial increase in the number of members that utilized the plan from 1.8 prescriptions per member per month (PMPM) to 1.85 prescriptions PMPM. Prescription count from year-to-year steadily increased by approximately 700 prescriptions from 2015 to 2017. From 2016 to 2017 there was a \$430,000 increase in plan spend.
- The Plan paid \$140.75 PMPM in 2015; \$1475.86 PMPM in 2016; and \$179.08 PMPM in 2017.
- The Plan paid \$335.82 per brand script in 2015; \$432.86 in 2016, and \$481.33 in 2017. A major indicator in this area is specialty drugs which are primarily filled as a brand name drug.
- 18% of prescriptions filled in 2015 were generic, 18% of prescriptions filled in 2016 were generic, and 17% of prescriptions filled in 2017 were generic. He noted there was only a 2% increase in the total Rx cost from 2016 to 2017 which demonstrates how well the plan is performing.
- The percentage of generic prescriptions filled for antidepressants increased from 88.27% in 2016 to 97.78% in 2017 and with antihyperlipidemic drugs increased from 86.78% in 2016 to 95.72% in 2017.
- Specialty drug utilizing members increased from 105 in 2016 to 140 in 2017; there was a 12% increase in plan spend in 2017 from 2016. The plan cost per specialty Rx decreased from \$3,937.62 in 2016 to \$3,766.77 in 2015; the member share increased from 0.49% in 2016 to .69% in 2017.
- 91% of prescriptions were filled at a retail pharmacy, 8% were filled through ProAct's mail-order services; and 1% were filled through Noble Specialty Pharmacy.
- There were 515 prescriptions filled through CanaRx in 2015, 528 in 2016, and 480 in 2017

In response to a question by Ms. Hersey on how to increase mail order utilization, Mr. Prashaw said marketing is important and having conversations with members. He also explained that pharmacists are typically the most knowledgeable and informed about prescriptions and what resources are available to offset costs. Mr. Locey commented that many drug manufacturers offer programs to offset costs of expensive medications.

New Business

Ms. Michel Nunn said the City is considering offering the Metal Level Plans to its workforce and asked if there is information available to educate the workforce. Ms. Miller said she could help with that and also noted the addition of these plans to the City's plan offering would require Board of Directors approval.

Next Meeting Agenda

The following items will be included on the June 7, 2018 agenda:

Labor representative to the Owning Your Own Health Committee;
Approval of adjustment to the Silver Metal Level plan;
Excellus utilization review;
Presentation of the Annual Report; and
Expectations for rollout of CanaRx program

Adjournment

The meeting adjourned at 3:06 p.m.

Respectfully submitted by Michelle Pottorff, Administrative Clerk