

Greater Tompkins County Municipal Health Insurance Consortium
Owning Your Own Health Committee
March 22, 2016
3:30 p.m.
Legislature Chambers

Agenda

1. Call to Order (3:30) Schiele
2. Agenda Changes (3:30)
3. Approve Minutes of February 22, 2017 Meeting (3:35)
4. Executive Director's Report (3:37) Barber
 - a. Education Retreat
 - b. Topics at other Consortium committee meetings
5. Update on Blue4U Program (3:45) Miller
6. Healthy Meeting Resolution (4:00)
7. Inter-municipal Competition for Wellness Focus (4:10)
7. Continue Discussion of Promoting the Concept of Wellness: channels, methods, & resources for reaching our audience (4:15) Schiele
8. Next Agenda Items (4:30)
9. Adjournment (4:30)

Next meeting: April 26, 2017

Owning Your Own Health Committee
Minutes – Draft
February 22, 2017
Legislature Chambers

Present: Ted Schiele, , Beverly Chin, Debby Kelley, Michelle Wright, Jackie Kippola, Emily Mallar, Brooke Jobin (arrived at 3:45 p.m.)
Guests: Don Barber

Call to Order

Mr. Schiele, Chair, called the meeting to order at 3:35 p.m.

Changes to the Agenda

There were no changes to the agenda.

Approval of January 25, 2017 Minutes

It was MOVED by Ms. Kippola, seconded by Ms. Mallar, and unanimously adopted by voice vote by members present, to approve the minutes of January 25, 2017 as submitted. MINUTES APPROVED.

Executive Director's Report

CanaRx

Mr. Barber reported at the Board of Directors meeting in January Joe Scotti from CanaRx was present as well as John Powers, the Consortium's legal counsel. Mr. Scotti provided an overview of the program and Mr. Powers spoke about the legal cases that have been brought forward and stated that the FDA (Federal Drug Administration) has never brought a case forward. Judges have not ruled in favor of CanaRX in the two cases brought forward because the FDA has not signed off on the program. Mr. Scotti said the program has been in existence for over ten years and works with many municipalities, including Tompkins County and Tompkins Cortland Community College. The Board of Directors discussed this for over an hour and at the conclusion of the discussion there was a unanimous expression of interest by Directors for this to be brought back to the Board. Mr. Barber noted that the Department has audited another Article 47 that uses CanaRX and did not raise use of the program in the audit.

Introduction of New Member

Mr. Schiele introduced and welcomed Michelle Wright of the Town of Ulysses to the Committee.

Following a brief discussion of newsletters received from Excellus and ProAct, Mr. Barber said he regularly has newsletters from ProAct posted to the Consortium's wellness website page. He will begin circulating information received from Excellus and members can advise if and how they would like the information circulated.

Ms. Jobin arrived at this time.

Blue4U Program Update

Mr. Barber reported communication is taking place with benefit clerks on information that will be sent out to employees. An orientation session was held with Directors from new municipalities and another push for the program was done at that session to raise awareness program.

Flu Clinic Update

Mr. Barber provided statistics on the flu clinics that were held in the Fall and called attention to the total number of vaccines administered at the flu clinics being 245 as opposed to 217 that was previously reported. He said in addition to these vaccines administered by ProAct there were 218 vaccines administered at pharmacies and 838 who received vaccines through their medical provider. He asked Excellus how this overall total compared to other groups and was told that an analysis of members in experience-rated groups showed an average of 15.7% of members received flu vaccines. This compares to 26% for the Consortium. He also said the vaccines are costing the Consortium \$25 thru ProAct and the average provider cost is \$18; he will be checking to see what the pharmacy cost for the vaccine was and will report back. This is something that will need further discussion as planning takes place for the 2017 flu clinics.

Continued Discussion of Promoting the Concept of Wellness: Channels, Methods, and Resources for Reaching Our Audience

Mr. Barber said at the last meeting Ms. Kippola mentioned the interest County employees had in the employee picnic that took place last summer and suggested a Consortium-wide event could be an opportunity bring information forward. He shared a document from Interactive Health entitled: "Proof Positive Study Demonstrates Interactive Health Outcomes-Based Wellness Program Lowers Medical Costs and Increases Productivity". While producing the Consortium Newsletter he said he was writing about how the Consortium pools its risk together and thought about how to run a wellness program when it loses its identity by asking each municipality to run its own wellness program that has no identity to it. He said any wellness program the Consortium were to take on would have to be for the total group and not for any one specific subset. In thinking about how many municipalities have to rollout the Blue4U program for only a segment of their employees he said it makes wellness a "stepchild" and not something for the entire group. He then asked Ms. Miller and Mr. Foresti if there would be a way the Consortium could be billed for the Blue4U program as an a la carte program that would be available to everyone. This was raised at last year's educational retreat and an estimate was given of \$1.50 per individual and \$3 for family plans to add this to the premium. Mr. Barber said if this is possible there would need to be discussion of whether to do this Consortium-wide as opposed to relying on each employer to roll it out on their own.

Mr. Schiele said his biggest concern is how information would be relayed to employees on a regular basis and in a way it would get attention.

Ms. Jobin said there are people who have a healthy lifestyle, those who are trying to impact those who don't have a lifestyle or who may have something wrong but don't know about it yet, and those who don't have any interest, and asked how to quantify the use of the program and how it would impact claims costs. Mr. Barber referred to the report and said it addresses that question. It was noted that it is hard to quantify prevention and the results of a wellness program are not immediate. Mr. Schiele said initially you have to look at whether people use the program and continuing to use the program, particularly the telephonic coaching. There was consensus that bursts of information and effective and ongoing promotion would be critically important to any wellness program being successful. It was also suggested that there be informational Power Point presentations or videos that members could access that would provide information.

It was suggested that there be follow-up on the individuals who participated in the program last year to see how many received a second blood draw and how many used the health coaching sessions.

Mr. Barber spoke of the importance from having buy-in from the top and said this needs to be part of any wellness program strategy. He is planning to meet with all legislative bodies and benefit

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clerks to provide an update on the Consortium and information on the CanaRx program and how it is an opportunity to save money for the Consortium and employees.

Ms. Jobin was excused at this time.

Next Agenda Items

The following items will be included on the next agenda:

Continued discussion of marketing for a Consortium-wide wellness program;
Update on the Blue4U program and how it was used in 2016

Ms. Kippola asked for clarification of what it would cost to offer the Blue4U Program to all members. Mr. Barber said it would be offered to all employees; however, a prediction would need to be made on how many members would use the program. A voluntary program with no incentive would be \$150 per claim times 20% (estimated) of the number of people in the Consortium. Mr. Barber noted the cost would be less than \$250,000 in a budget of \$32 million. He noted that the purpose would be to save money and the report presented shows that the program pays for itself many times over.

Adjournment

The meeting adjourned at 4:25 p.m.



Greater Tompkins County Municipal Health Insurance Consortium

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

RESOLUTION NO. - 2017 – ADOPTION OF GUIDELINES FOR HEALTHY MEETINGS

RESOLVED, That the Owing Your Own Health Committee recommends that the Greater Tompkins County Municipal Health Insurance Consortium Board of Directors adopt the following commitment and guidelines for healthy meetings:

Commitment:

We are committed to supporting good health for our volunteer leadership and employees and to modeling a healthy lifestyle.

Guidelines:

At meetings or events lasting longer than 60 minutes, we will encourage employees to take care of their comfort needs, and we will schedule appropriate break times and physical activity breaks.

At meetings and events where food will be served, we understand the value of providing choices to accommodate a variety of needs. This may include:

- A variety of delicious and colorful fruits and vegetables
- Tasty salad toppers such as low calorie salad dressings, nuts and seeds, beans, and low fat fruit and vegetable dips
- 100% fruit and vegetable juices, Unsweetened tea, or Water
- Other healthy items such as whole grain breads, nonfat dairy products, lean meats, and minimally processed products
