

Owning Your Own Health Committee
October 26, 2016 – Approved
3:30 p.m.
Legislature Chambers

Present: Ted Schiele, Olivia Hersey, Emily Mallar, Brooke Jobin, Jackie Kippola, Bev Chin
Guests: Don Barber, Executive Director; Meghan Feeley, ProAct; Via conference call: Beth Miller, Ken Foresti, Excellus

Call to Order

Mr. Schiele, Chair, called the meeting to order at 3:34 p.m.

Approval of Minutes of September 21, 2016

It was MOVED by Ms. Chin, seconded by Ms. Kelley, and unanimously adopted by voice vote by members present, to approve the minutes of September 21, 2016 as corrected. MINUTES APPROVED.

Ms. Mallar arrived at this time.

Report from the Executive Director

Mr. Barber provided an update on the Prescription Benefit Manager selection process and said the six-member review Committee is recommending the Consortium continue its relationship with ProAct for 2017. At its meeting yesterday the Audit and Finance Committee approved a resolution recommending a one-year contract with the option to renew for two additional years. This will be included on the agenda for the November 17 Board of Directors meeting.

Ms. Hersey arrived at this time.

CanaRx

Mr. Barber said this Committee has worked on CanaRx and has forwarded information to other Consortium committees. The Audit and Finance Committee questioned how CanaRx is organized and who its regulators are and a similar question was raised at the last meeting of the Joint Committee on Plan Structure and Design. Joe Scotti of CanaRx was present at the Joint Committee meeting and responded that CanaRx is **NOT** a pharmacy and **IT** is just a middle-person between Tier I drug manufacturers in countries other than the United States and customers from the United States. Since they are not doing anything medical they are only a corporation and do not have any **HEALTH** regulatory oversight agency.

Ms. Jobin questioned if the drug manufacturers that CanaRx receives drugs from are regulated. Ms. Feeley explained in those countries there are regulated Tier I pharmacies that manufacture the drugs that are imported into the United States through CanaRx which are the same drugs. Mr. Barber said if the Consortium were to move forward with CanaRx the relationship would be between the patient and CanaRx, it would not involve the Consortium or the employer.

He spoke of process and suggested a memo be distributed to all employers and the Board of Directors to let them know this is being considered and to also solicit feedback. In addition, he has asked Ms. Feeley to prepare a draft resolution that the Board could review and provide feedback on. He would also provide the Consortium's legal counsel with the resolution. It was suggested that a FAQ accompany the resolution.

There was a discussion of the importance of marketing this and Ms. Jobin suggested there be an open forum where members could speak to ProAct and CanaRx directly as there is often value in hearing someone else's questions being answered in addition to the discussion often generating further questions. Mr. Schiele suggested using a GotoMeeting format; Ms. Feeley has the technical capability to do this and will work on this with a timeline set for the third week in January.

Mr. Barber said the tentative plan is to provide the Board with a draft resolution and to invite feedback. Modifications would be made to the resolution based on the feedback and it would then be forwarded to John Powers, the Consortium's legal Counsel. Upon receipt of an opinion from Mr. Powers the resolution would be forwarded to municipalities.

Mr. Barber reported both the Audit and Finance Committee and the Joint Committee on Plan Structure and Design have discussed other prescription spend containment strategies. ProAct has brought forward two options; the first is a premium prescription drug list which contains prices negotiated by ProAct that are lower and are in exchange for removing particular drug competition from the formulary. At this time 75 medications have been excluded. This would be subject to collective bargaining and although it would be a longer process this is something that would allow for eventually lowering prices for brand name drugs.

Ms. Feeley explained an individual would have to use a brand name prescription that is included on the formulary and because some drugs would be excluded from the formulary there would be an increase in rebates for the Consortium from the pharmaceutical company.

The second option the Joint Committee spent time discussing was a specialty drug copay assistance program. This is a program whereby ProAct's specialty pharmacy, Noble Health, would work to find copay assistance for members. The Consortium would save money by creating a fourth tier that increased the amount of the copay on those drugs. This change would also be subject to collective bargaining.

Mr. Barber said the Audit and Finance Committee at its meeting yesterday agreed to look at the process that would be involved in creating a fourth tier. The reason these options are being discussed is related to a statement by ProAct that they expect by the year 2020 the Consortium's specialty drug spend will equal all of the other prescription costs.

Municipal Interest in the Consortium

Mr. Barber reported Audit and Finance Committee is recommending the Board of Directors approve membership by the Town of Aurelius in the Consortium.

Flu Clinics

Ms. Feeley reported there were a total of 245 individuals who were vaccinated at the flu clinics which is 15 more than last year.

The following are the totals by location compared to last year were as follows:

Location	2016	2015
City Hall	52	53
TC Human Resources	61	54
City of Cortland	45	40
TC Highway	18	14
Old Jail	46	52
Public Works/Bolton Point	17	23

Ms. Feeley was asked to report back in January on the number of pharmacies that that administered the vaccine along with a comparison to last year's results.

Blu4U Program

Ms. Miller reported she is waiting to hear from Conor Cornelius about coordination of the timeline to rollout the Blu4U program to the new municipalities in the Consortium as well as bringing the current groups back on board. There will be a conference call with the municipalities that have the metal level plans in the next month. Mr. Schiele asked that she provide an update at the next meeting on the number of individuals who signed up for the program during the last enrollment process.

Discussion of Promoting the Concept of Wellness

Mr. Schiele said the County, in collaboration with Cayuga Medical Center and with the assistance of the Health Planning Council, is in the process of preparing the "Community Health Improvement Plan" for the State which will be a revision of the 2013 report. This report is part of the State's Prevention Agenda which is an attempt to make sure public health is reaching all populations, including those that have traditionally been harder to reach or not able to be included. He listed the five priorities in the Prevention agenda:

1. Prevent chronic disease
2. Environmental health-related
3. Mothers and babies-related
4. HIV, STI's, and other infectious diseases
5. Promoting mental health and preventing substance abuse

All counties are again required to identify two of those five priorities and focus on those in their Community Health Improvement Plan. In 2013 and continuing again this year Tompkins County has identified prevent chronic disease and promote mental health/preventing substance abuse as its priorities for the coming year. The State has created goals, objectives, and strategies that are guidelines for how counties will create their plan. For example, within the prevent chronic disease a focus area is top to reduce obesity in children and adults. Among the goals the State Health Department is recommending are: to create community environments that promote and support healthy food and beverage choices and physical activity, prevent childhood obesity through early child healthcare in schools, expand the role of health service providers and insurers in prevention of obesity, and expand the role of public and private employers in obesity prevention.

Mr. Schiele said there has been discussion of the goal of expanding the role of public and private employees in obesity prevention and including it in the Community Health Improvement Plan and Ms. Chin suggested developing something through this Committee that would be a strategy that could be used to begin to introduce worksite wellness in a preliminary way that would be measurable. He said this is something that can be fluent and thinks it would make sense to be something this Committee works on.

Ms. Chin said there were many counties in the State that identified the same two priorities. Rather than "reinventing the wheel", the intent is to incorporate what is already taking place in the community that is relative to this Committee's work and is also in line with the State's process. Mr. Schiele said he is looking to create a measurable goal or strategy for this committee to reach out to the employers that would jump-start the process. A specific example of an action the Consortium took was to offer a template resolution to all of the employers of which some have adopted. Another idea is to develop a way of convening champions or benefits managers in a way that would lead to a wellness program starting at their worksite. In

summary, Mr. Schiele says this goes back to the question of whether Consortium will try to promote the concept of the culture of wellness at different worksites. Ms. Jobin suggested CSA's (Community Supported Agriculture) and bicycle rental as two ideas that could be pursued. Following discussion and interest in CSA's Mr. Schiele questioned if the Committee could promote this concept to the employers within the Consortium. Mr. Barber said decisions are left to employers but this Committee could promote and provide information to employers. An example of an action that could be taken is to provide employers with information, such as what is already available at Cooperative Extension, that contains options people have to access to fresh vegetables throughout the area. Mr. Schiele said he appreciated the discussion that was generated around this topic and as this moves forward it may be worthwhile to focusing more on specific things such as what has been suggested.

Next Meeting

Due to Thanksgiving, the Committee rescheduled the next meeting to be November 30th at 3:30 p.m. in Legislature Chambers.

Next Agenda Topics

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

Continued discussion of promoting the concept of wellness;
Update on Board of Directors meeting; and
Update on Blu4U signups

Announcement

Ms. Mallar announced CAP (Cayuga Area Physician's Alliance) will be hosting a community health forum. The first of a three-part series will take place on November 1st and is open to anyone with an interest in healthcare. She distributed a flyer and invited members to attend.

Adjournment

The meeting adjourned at 4:33 p.m.