

BENEFITS ADVISORY COMMITTEE  
MINUTES OF MEETING  
NOVEMBER 17, 2011

[In these minutes: Letter to Employee Groups Apprising them of UPlan Changes for 2012, Call for 2012 – 2014 BAC Chair Nominations, Open Enrollment Update, Communication with HealthPartners Members about 2012 UPlan Changes, Wellness Points Bank Update, Medical Premium Relief Program]

[These minutes reflect discussion and debate at a meeting of an Office of Human Resources committee; none of the comments, conclusions, or actions reported in these minutes represent the view of, nor are they binding on the Office of Human Resources, the Administration, or the Board of Regents.]

PRESENT: Gavin Watt (chair), Pam Enrici, Tatyana Shamliyan, Sara Parcels, Jennifer Schultz, Sandi Sherman, Nancy Fulton, Karen Lovro, Michael Marotteck, Amos Deinard, Roger Feldman, Judith Garrard, Richard McGehee, Fred Morrison, Theodor Litman, Rodney Loper, Dann Chapman

REGRETS: William Roberts, Dale Swanson, Jody Ebert, Joseph Jameson

ABSENT: Patricia Miller, Carl Anderson, Kathryn Brown, Aaron Friedman, Keith Dunder

OTHERS ATTENDING: Karen Chapin, Betty Gilchrist, Ryan Gourde, Shirley Kuehn, Kathy Pouliot, Sheri Stone, Jill Thielen, Laurie Warner

I). Gavin Watt called the meeting to order and welcomed all those present.

II). Mr. Watt began by providing information about the letter (there were three versions) that was distributed to different employee groups across the University drawing their attention to upcoming UPlan changes for 2012. The original draft was published in the Minnesota Daily on November 3, 2011 - <http://www.mndaily.com/2011/11/03/health-insurance-costs-university-employees-increase-substantially-2012>. Mr. Watt went on to describe the various hurdles he had to overcome to get the letter distributed, but noted that in the end he believes the letter went out to the vast majority of employees.

In response to questions and comments from members about the content and distribution of the letter, Mr. Watt stated that, in his opinion, despite the fact the letter had been edited from its original form, it still retained the main points that the BAC wanted to communicate to employees. A few members voiced outrage at what they considered censorship of the original letter.

Renee Dempsey, Senate staff, noted that there is institutional protocol for distribution of mass emails to employees. While the Senate Office can send routine Senate-related email messages, it is required get approval to send any non-routine messages, which this

letter was considered. She also reminded members that the BAC is not a Senate committee. Mr. Chapman then took a couple minutes to explain why Employee Benefits declined to send out the letter. He noted that he and a number of other people within Employee Benefits felt the portion of the letter that talked about shifting costs to employees had the potential of inciting people when there was no point in doing so. The decision to increase employee's premium contributions had already been made so there was no point in making people think they could change a decision that was already final.

In response to a question about where the BAC fits into the Senate structure, Mr. Watt explained that the BAC is not a Senate committee, but that the Senate Office provides the committee with staff support and other resources. Professor Morrison added that when the BAC was formed, the goal was to have as broad of representation on the committee as possible. Because of the way that the Labor Relations Act is written, if the BAC were a Senate committee, bargaining unit employees could not serve on the committee. A consequence of the membership decision is that the BAC is an anomalous committee. Being an anomalous committee has its own issues, and will be looked at when the committee's charge is reviewed this year. He added that regarding the letter, he is appalled at the fact that the University wanted it suppressed. Freedom of discussion and robust discussion on sensitive topics is in the nature of the University culture.

Mr. Watt reiterated that the BAC charge will be reviewed in the next few months with an eye to making the committee more functional in terms of its ability to communicate with the employees it represents. Members interested in working on revising the charge were encouraged to contact Mr. Watt.

III). Mr. Watt announced that BAC chair nominations are still being solicited. Members should feel free to either nominate someone or self-nominate. Nominations should be sent to Ms. Dempsey.

IV). Next, Mr. Watt called on Kathy Pouliot, manager, Benefit Services, to provide a mid-point open enrollment update. This year's open enrollment has been very busy, reported Ms. Pouliot. Benefit Fair attendance was also up from previous years. As of yesterday, the Employee Benefit Service Center has received over 900 calls and emails ahead of where it was last year at this time. Employee Benefits is going the extra mile to make sure that employees are aware of the UPlan changes for 2012.

Professor Morrison stated that the only criticism he has heard thus far has to do with the Medica representatives who are counseling employees with HealthPartners coverage using data that is organized by name of physician versus clinic. He suggested bringing this to Medica's attention, and making sure they have clinic information with them as well.

V). Moving on, Betty Gilchrist, communications project manager, shared information about what Employee Benefits has done and will be doing to communicate the 2012 UPlan changes to HealthPartners members. Salient highlights from Ms. Gilchrist's presentation included:

- In September, a special newsletter was sent to HealthPartners members only with the message that they need to make a positive election during open enrollment in order to maintain their health insurance coverage in 2012.
- In September and November, all-employee newsletters were sent out informing employees about the transition to Medica as the sole UPlan administrator, open enrollment election requirements for HealthPartners members, resources for HealthPartners members, etc.
- Several *Meetings with Medica* were held on the East Bank, West Bank, St. Paul and Duluth campuses. These meetings were an opportunity for HealthPartners members to meet with a Medica representative prior to open enrollment to discuss Medica plan options and learn about provider networks. These sessions were extraordinarily popular.
- Worked with Medica to redesign their website to make it easier to use.
- An open enrollment email was sent out on November 1 and another will be sent out this evening, reminding HealthPartners members that they need to make a medical benefit election by November 30. Then, a final open enrollment email will be sent out on November 27, which will include a need-to-enroll message to HealthPartners members.
- In December, a letter will be sent to HealthPartners members to educate/remind them about the new Medica plans.
- The benefit fairs were also an opportunity for HealthPartners members to speak to Medica representatives and Employee Benefits staff to get their questions answered.

Sandi Sherman reminded the committee that HealthPartners members have to re-enroll at their fitness facility in January. Jill Thielen added that these individuals will also experience a two month delay in receiving their \$20 reimbursement from Medica. However, HealthPartners members will continue to receive reimbursements from their program for January and March so there will not be a gap.

VI). Mr. Watt introduced the next agenda item, a Wellness Points Bank update, and called on Jill Thielen, wellness program administrator, to provide more information. Ms. Thielen began by distributing a handout to supplement her presentation. Highlights from her presentation included:

- Beginning in 2012, UPlan members will have the opportunity to earn points (300 points for employee only and employee plus child/children coverage and 400 points for employee plus spouse/same sex domestic partner (SSDP) and employee plus spouse/SSDP and child/children coverage) in order to qualify for a \$300 or \$400 premium reduction for the following year, depending on their coverage level.
- A wide variety of wellness activities will be offered so employees will have a number of options from which to choose for earning points.
- A number of different communication pieces will be sent to UPlan members informing them about the new program.

- The Group Strength Express and the Mindfulness-Based Stress Reduction programs will continue to be offered and financial reimbursements continued, but they are not included in the Wellness Points Bank program.

Questions/comments from members included:

- How will employee privacy be handled when people self-report on some of the programs. Employees will self-report to the University's wellness vendor, StayWell, directly via a web portal. Mr. Chapman added that the only information the University will get from StayWell is the number of points people have earned. StayWell will not share information about which wellness activities, etc. that employees participated in.
- Regarding the biometric health screenings, in the future, will points only be awarded if people meet the healthy biometric standards? Ms. Chapin stated that this has not yet been decided. Employee Benefits intends to have discussions with the BAC about this matter at some point in the future.
- The footnote at the bottom on the handout is somewhat misleading in that it could be interpreted as people can continue to earn the \$65 rewards beyond 2012. Ms. Chapin stated this will be clarified on future materials.

VII). Mr. Watt turned to Shirley Kuehn, support services manager, for an update on the 2012 Medical Premium Relief Program. An informational handout about the program and the corresponding application form were distributed to members. Salient highlights from this update included:

- Employee Benefits is making a concerted effort to make all employees aware of the 2012 Medical Premium Relief Program.
- To protect employee's privacy, the number of Employee Benefits staff who handle the completed forms is minimal. Once the forms are processed, the tax documents are immediately destroyed.
- To date, 149 forms have been submitted.

Is there a possibility that this program could run out of money, asked Ms. Enrici? The program will not run out of money, stated Mr. Chapman. The University has committed to fund it to the extent necessary to meet eligible demand for 2012.

Mr. Chapman then took a couple minutes to talk about the 2012 Medical Premium Relief Program. Employee Benefits is working hard to make sure that employees are aware of this program. The goal is have the program be as accessible as possible and to make sure that all employees who qualify for the program have the opportunity to apply. The administration continues to be concerned about the impact of premium increases on lower paid employees.

On a quasi-related noted, Mr. Chapman noted that Employee Benefits is also making every possible effort to ensure that no HealthPartners members will default into no coverage because they failed to make an affirmative health plan election during open enrollment. After open enrollment closes, Employee Benefits will verify that all current HealthPartners members who want health insurance through the UPlan made an

affirmative election. Employee Benefits is committed to making sure that any HealthPartners members who unintentionally failed to make an election will not go without coverage next year.

Professor Deinard asked whether HealthPartners is also notifying its UPlan members about the UPlan change to a single administrator, Medica, and that HealthPartners members need to make an active election during open enrollment. No, stated Mr. Chapman, because the UPlan is not a HealthPartners plan, this is not something the University can ask them to do.

VIII). Before the meeting was adjourned, Professor Schultz asked why only silver fillings are covered in the dental plans. Ms. Chapin explained that white fillings are covered in the two higher cost plans and this is clearly stated in the Summary of Benefits and the open enrollment comparison charts. In response, Professor Schultz stated that some dentists no longer use silver fillings, and, as a result, UPlan members are being forced to enroll in the more expensive dental plans in order for fillings to be covered. Ms. Chapin agreed to follow-up with the dental plans about this concern.

Hearing no further business, Mr. Watt adjourned the meeting.

Renee Dempsey  
University Senate