

[Meeting topics: Provider Payment Report and Open Enrollment Issues]

MINUTES

HEALTH PLAN TASK FORCE

Thursday, October 15, 1998

10:00-11:00 A.M.

300 Morrill Hall

Present: Richard McGehee (chair), Linda Aaker, Richard Butler, Amos Deinard, Robert Fahnhorst, David Hamilton, Richard Purple, Robert Sonkowsky, Larry Thompson

Absent: Avner Ben-Ner, Keith Dunder, George Hoh, Martha Johnson, Harlan Smith

Regrets: Bart Finzel, Priscilla Pope

Guests: None

Others: None

These minutes reflect discussion and debate at a meeting of a committee of the University of Minnesota Senate or Twin Cities Campus Assembly; none of the comments, conclusions, or actions reported in these minutes represent the views of, nor are they binding on, the Senate or Assembly, the Administration, or the Board of Regents.

1. Chair's Report

Professor McGehee reviewed the changes that had been made to the Health Plan Task Force web site, including the opening of a new message board for open enrollment this fall.

2. Provider Payment Report

The Provider Payment Report, prepared for the Task Force by Matt Maciejewski, was also posted on the web along with a statement about the report. Professor McGehee said the statement describes the process Matt followed in preparing the report. That is to say, that each health plan was contacted for information about their reimbursement strategies and each company had an opportunity to read a preliminary version of the report and respond to it. The statement also addresses the controversial part of the report, and includes a disclaimer expressing that the

opinions in the report are those of Matt and do not necessarily represent the opinions of the Task Force.

Professor McGehee reviewed options for the Task Force to consider: 1) leave the report as is and attach the disclaimer or 2) modify the report, in consultation with Matt, to incorporate some changes recommended by the Task Force. The Task Force, he said, will also need to decide whether it wants to endorse the report or simply provide it for information. For timing reasons, he does not believe that the Task Force should embark on the task of using Matt's report as a basis for producing its own report. It is his belief that the report should be made available for University employees as they go into the open enrollment period this fall.

This led to a dialogue about the report and what direction the Task Force should take. After some discussion, members agreed that the table on page 6 (strengths and weaknesses of each payment method for patients and physicians) was not completely accurate and included some misleading information.

One member noted that in her recommendations to Matt, she suggested replacing the table on page 4 (impacts of payment methods on patient care and referrals) with the table on page 6 to coincide with the text. This appears to be an oversight because the text changes were made, but not the tables.

In conclusion, the committee agreed to remove the table on page 6 (strengths and weaknesses of each payment method for patients and physicians) and replace it with the table on page 4 (impacts of payment methods on patient care and referrals); modify the text, as appropriate; edit the web page to reflect the changes; and discuss the changes with Matt. Some minor editorial corrections were also made.

One person raised a question about capitations. Matt assumes that a care system is capitated in total, but in some situations there is partial capitation. There are no distinctions drawn between total and partial capitation in the report. The committee did not know whether this had an effect on any of the five University plans. Because the report had been reviewed by each plan, the committee did not propose modifying the text.

2. Fall Open Enrollment Issues

An inquiry was made whether the web page addresses health benefit issues for retirees. If not, it was recommended that it should. Other recommendations included linking the Employee Benefits, Health Plan Task Force, and U of M Physicians web sites.

Professor McGehee said he had also posted on the web a bulletin produced by AFSCME summarizing the differences between the 1998 and 1999 health plan options.

In this regard, Mr. Fahnhorst distributed a handout entitled "1998 Open Enrollment Review," that clearly and succinctly outlines information related to open enrollment, including rate changes, reasons for the changes, health fair dates and information, changes that can be made

during the open enrollment period, and effective dates for changes. Employee Benefits has utilized this handout at a number of fairs and presentations.

Mr. Fahnhorst said he would like to send an email to all employees reminding them of the health benefits fairs to be held on October 27 and 28 and providing other pertinent information relating to open enrollment. Ms. Kvanbeck said the Senate Office can assist in getting these messages out quickly.

Before adjourning, Professor McGehee announced that Linda Aaker, Bob Fahnhorst, and he would be attending the State Labor Management meeting the following week. He understands they will be addressing issues that have been raised in the past, such as referrals, and invited members to submit to him any questions or issues they would like to have addressed at that meeting.

One suggestion was to ask why it is not financially feasible to allow clinics that have full mental health services to let their patients receive that care at the same place they get their medical care.

The meeting was adjourned at 11:10 a.m.

-- Martha Kvanbeck