

BENEFITS ADVISORY COMMITTEE  
MINUTES OF MEETING  
NOVEMBER 16, 2006

[In these minutes: Open Enrollment Update, Retiree Health Plan for those on Disability, Wellness Update, New Pharmacy Incentive, Future RFPs]

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

PRESENT: Gavin Watt (chair), Linda Aaker, William Roberts, Karen Wolterstorff, Jody Ebert, Jennifer Imsande, Rhonda Jennen, Jerremy Mlenar, Don Cavalier, Michael Marotteck, Carl Anderson, Amos Deinard, Richard McGehee, Peh Ng, Theodor Litman, Rodney Loper, Dann Chapman,

REGRETS: Tina Falkner, Carla Volkman-Lien, George Green

ABSENT: Sandi Sherman, Joseph Jameson, Carol Carrier, Frank Cerra, Fred Morrison, Keith Dunder

GUESTS:

OTHERS: Ted Butler, Karen Chapin, Nancy Fulton, Kelly Schrotberger, Joe Kelly, Shirley Kuehn, Kathy Pouliot, Curt Swenson

I). Gavin Watt called the meeting to order.

II). Gavin Watt reported that the health plan reviews for the University's four vendors, Harris HealthTrends, HealthPartners, Medica and RxAmerica, will take place in the spring.

III). Employee Benefits' Announcements:

a). Kathy Pouliot, Benefits Services manager, provided members with a brief open enrollment update. She noted that the process is going well. Employees have not been making a lot of changes to their coverage. The health fairs were very successful in that many people turned out to get their flu shots and to collect information from the health plan vendors. Handouts detailing open enrollment statistics and resources were distributed to members for their information.

Employee Benefits staffed a computer lab yesterday, Wednesday, November 15<sup>th</sup> from 7:00 a.m. to 7:00 p.m. for employees that do not have access to computers and who wanted to make changes to their benefit elections. Turn out was quite low at this lab. Computers were available at the health fairs for this purpose as well.

A member mentioned that the Morris campus ran out of the flu vaccine. Employee Benefits will check into this and make sure that more is distributed to the campus.

b). Karen Chapin, Health Programs manager, stated that the University has a new medical coverage option for people who are under 65 years old, disabled and on Medicare. In the past these individuals were required to enroll in one of the University's active plans. As of January 1, 2007, these people can either continue in an active plan or choose one of the over 65 year old plan options. This option is available to all former employees who are disabled as well as disabled dependents of an early retiree, and under 55 year old disabled dependents of an over 65 year old retiree. A handout outlining this new option was distributed to members.

There has been a great deal of interest concerning this new option because it is significantly less expensive for those who have left the University than participating in one of the active plans, noted Ms. Chapin. Because the plan design is different than that of the active plans, Ms. Chapin recommended that individuals carefully review the plan design, formulary and price before making a decision.

c). Murray Harber, wellness director, distributed a handout, *Wellness Assessment 2006 Key Results* to members. He summarized the findings from the assessment by highlighting the following:

- Approximately 8,200 people completed the wellness assessment, mostly University employees.
- Most people completed the assessment on-line as opposed to on paper.
- Females represented 65% of those that completed the assessment and males 35%.
- Risk areas that the University's population scored higher in than StayWell's book of business included driving, alcohol, stress, well being (mental health issues).
- The five most prevalent health risks at the University include – stress, weight, eating, preventive exams and cholesterol. The University scored under the norm group in all areas except stress.
- Top five highest risks based on participant health behavior levels include – back care, weight, cholesterol, stress and exercise. The health risk of University participants compared similarly to the norm group.
- Employees completing the assessment averaged missing 3.6 days of work in the last 12 months due to illness or injury compared to the norm group, which missed, on average, 2.8 days.
- Wellness assessment participants reported their productivity at work was reduced on average 9.7% due to health problems. This statistic is often referred to as "presenteeism", how present people are at work when they are there.
- Stress (29.6%), weight (21.1%), well being (17%), exercise (8.1%) and cholesterol (7.8%) account for 83.5% of the University's avoidable health care costs. Based on Ingenix data, 43% of the University's claims are avoidable.
- A total of 53% of assessment participants completed all recommended preventive screening exams.

- Sixty-eight percent of participants reported having one or more chronic conditions. Fifty-nine percent of the norm group reported having one or more chronic conditions. Top University chronic conditions include – seasonal allergies, lower back pain, unhealthy cholesterol, depression, and high blood pressure.
- Through second quarter 2006, 55% of eligible participants enrolled in the 6-month lifestyle management program and 61% of eligible participants enrolled in the 12-month lifestyle management program.
- Top disease management conditions include – lower back, cholesterol, blood pressure, heart disease, diabetes and COPD/asthma.

Members interested in receiving a copy of this report in its entirety should contact Employee Benefits.

Before moving on, it was noted that to date over 3,300 people have enrolled in the HealthPartners 10,000 Step Program.

Comments/questions from members included:

- Use the claims data to uncover which providers and clinics are not doing as good a job when it comes to performing preventive exams, and encourage them to do so.
- A member suggested Employee Benefits do more to communicate the importance and benefits of taking the wellness assessment. The wellness assessment could be used as a marketing tool to get people more involved in wellness issues. Dann Chapman stated that a lot of thought and discussion went into how to best promote this tool. In his experience, speaking to many different groups regarding the University's wellness program, he receives diametrically opposed reactions from people. A large piece of the overall message the University is trying to communicate to people is that they are in the best position to be their own primary care provider, and that physicians and other resources are available to assist them in taking better care of themselves.
- Some employees are reluctant to complete the assessment because they are suspicious about what the data will be used for. Mr. Chapman is well aware of this and stated that the University has been very up front about what the information would be used for. The University will continue to build employees trust and remind them that University personnel responsible for hiring and firing decisions do not have access to this information.
- Are some employees simply completing the assessment for the money and not providing accurate information? It was noted that this is always an issue with health assessments.

- To alleviate suspicion, would it be possible for Harris HealthTrends to issue the incentive checks or is there some other method for issuing these checks, which would serve to reduce employee suspicion? Employee Benefits looked at numerous options concerning issuance of the incentive payments, and because these payments are considered income they need to be taxed and run through the University's payroll system.
- If Harris HealthTrends learned through the lifestyle management program or the disease management program that a participant is suicidal, would this information ever be communicated back to the University? No, stated Mr. Chapman, this information would never come back to the University. Harris HealthTrends is contractually obligated not to share individually identifiable data with the University. In addition, there are other legal requirements, such as HIPAA, which prohibit such information being shared with the University.
- Who can Harris HealthTrends share University data with? They are allowed to share data, as appropriate, with other entities that the University has under contract such as the data warehouse stated Mr. Chapman. None of the data they collect is shared with the health plans.
- Does data warehouse data go in with individual identifiers or in aggregate? All data goes into the warehouse in an individually identifiable manner, stated Mr. Chapman. The data warehouse then has the contractual responsibility to protect this confidential information. Therefore, what comes in as identifiable data is assigned unique identifiers, which makes it impossible for the University to know whose data it is. The University goes to great lengths to protect the confidentiality and privacy of all UPlan participants.

Related to confidentiality, Dann Chapman noted that the draft Board of Regents policy, Employee Health Benefits, went before the Board this month for review and was well received. This is the draft that the committee reviewed and had input on. The University's concern for confidentiality and data privacy is specifically embodied in this policy. This policy will go before the Board in December for action. Dann Chapman volunteered to send a copy of this draft to members.

Before moving to the next agenda item, Gavin Watt requested that future wellness reports include information on penetration by campus.

d). Karen Chapin reported that the University has made significant progress in its use of generic drugs. In early 2006, the University's generic drug usage was at 50.4%, while the most recent month's usage is at 61.2% and, overall for the year, the University's usage is at 58.1%. Increased generic usage reduces the overall cost employees pay for their prescriptions as well as UPlan costs.

In an effort to further increase the University's generic drug usage, a new program will be launched starting January 1, 2007, *Buy 1 – Get 3 Months Free Program*. Ms. Chapin described this voluntary program, which will run January 1, 2007 – June 30, 2007 to members. A copy of the flyer that will be sent to UPlan participants that qualify to participate in the program was distributed to members.

Ms. Chapin took members specific program questions. She encouraged members to look over the flyer and to send her any comments concerning the clarity of this communication piece before it is distributed in December.

Ms. Chapin also distributed a handout describing the RxAmerica/UPlan Prior Authorization and Step Therapy Programs. This handout contained the list of drugs that either require prior authorizations or step therapy. She stated that it is very common for health plans to have prior authorization and step therapy requirements. In response to concerns voiced by a few members, Mr. Chapman added that in a perfect world every clinic/provider would check the member's formulary in order to know whether a prior authorization or step therapy is required. Obviously this is not occurring. Employee Benefits is working hard to try to communicate the UPlan's formulary to all parties that need to know. If the University did not have step therapy or prior authorization requirements there would be cost implications for both employees in terms of co-pays and a higher cost for the UPlan. Members suggested some modifications to these programs, which Employee Benefits agreed to look into.

- e). The RFP process for dental, life and retiree health will begin in the spring of 2007.
- f). Karen Chapin introduced Kelly Schrotberger, assistant health program manager.

IV). Other business:

- a). Gavin Watt tentatively cancelled the December BAC meetings. Barring any unforeseen business that needs immediate attention, the committee will not meet in December, but will reconvene in early 2007.
- b). A member asked whether the University would be willing to administer shingles vaccines similar to the annual flu shot clinics it sponsors. Dann Chapman stated that Employee Benefits would look into this request, and report back.

V). Hearing no further business, Gavin Watt adjourned the meeting.

Renee Dempsey  
University Senate

