



STATE OF CONNECTICUT
HEALTHCARE POLICY & BENEFIT SERVICES DIVISION
OFFICE OF THE STATE COMPTROLLER

HEALTHCARE COST CONTAINMENT COMMITTEE MINUTES
August 9, 2021

Meeting Called to Order by Tom Woodruff:

Attendance:

Labor	State Comptroller Administrative Staff
Carl Chisem – CEUI	
Dan Livingston – SEBAC	Peggy Haering
Dave Glidden – CSEA	Thomas Woodruff
Alfredo Camargo – A&R	
Jody Barr – Council 4	
C. Michael White - UCPEA	Presenters
	Bernie Slowik – OSC
Management	Rae-Ellen Roy – OSC
Gregory Messner	Betsy Nosal – OSC
	Consultants
Dept. of Insurance	Terry DeMattie, Segal
Paul Lombardo	

Public Comment:

No public comment

Partnership 2.0

Partnership 2.0 as of August 1st, there are 151 groups enrolled, totaling roughly 26,000 employees and over 63K members. As of August 1, 95 groups completed their three-year contract commitments under Partnership and had the option to leave, but to date – no group has elected to leave.

There is one small group confirmed to join for September 1st, 2021.

Partnership 1.0, there are five groups remaining, totaling approximately 2,400 employees, with just under 3,400 members.

Year End fiscal report is expected to be released on the financial status of Partnership by early next week, provided data is made available by the end of this week.

It is expected the state Blue Care Prime plan will now be offered to Partnership Plans July 1st, 2022 (rather than Jan 1 as originally planned). This is contingent upon analysis showing it is performing as anticipated. Initial analysis of claims showed a reduction of PMPM for members as compared with the prior period. Additional time was also needed for administrative purposes related to introducing a new plan.

Financials:

The active health appropriation closed FY2021 at \$40.4M, with FAD accounts continuing to look healthy, building up reserve with active FAD balances totaling around \$200.5M.

The retiree side closed the year with a \$97.8M account balance. Retiree FAD balances are at \$198.2M. The IBNR built into the updated premium equivalents should help to improve the reserve balances in the coming year.

For the new fiscal year, the anticipated spend on the active side is \$710.6M, with the current appropriation at \$711M; we expect to have a surplus of around \$500K. On the retiree side, projected spend is currently at \$738M, with the appropriation at \$835.8M, with a projected surplus of \$97.8M. Assuming half of all eligible employees will retire on or before July 1, 2022. Should a larger number of retirees retire prior to July 1, 2022 the anticipated surplus will decrease. Conversely, there may be a deficit on the active side. If more actives remain on the plan than projected, it may be necessary to reallocate from the retiree to the active account. Currently, approximately 13,000 employees are eligible for retirement, including early retirements.

Communications Update:

July was focused on expanding Care Compass Facebook presence, adding more information on HEP, preventive health activities, Sydney app for Anthem, staying hydrated and signs of heat exhaustion. July's member reach, link clicks and impressions increased with these additions. CareCompass Facebook page now has 300 dedicated followers. Communications were sent to plan members to encourage use of Health Navigator and Care Compass website.

Education materials were shared via a webinar with state agency benefit contacts, including Upswing Health (through Anthem), Signify featuring episodes of care program and Health Advocate. We will continue with member-facing webinars to educate on how to access Upswing Health and other programs in September, with fall health fairs scheduled.

Reminders of self-care were also emailed to members, including tips on desk ergonomics, reminders to stretch during the day, and the availability of LiveHealthOnline for emotional support.

In light of the increase of the Delta variant of COVID-19, a suggestion was made by Dan Livingston to have something on the front page of the website about COVID testing and vaccines. Communications response was that August is Vaccination month and will offer links to CDC information on this.

United Health Care

United HC presented Group Medicare Advantage plan highlights for the first part of 2021, including 2,280 completed house call visits, 53K gym visits (with 8% of members using this regularly), 2,161 inpatient hospital cases supported, and 5,199 care gaps supported for members with diabetes.

More in-home screening is being done to identify risk factors for members willing to participate. Screenings include risk for pre-diabetes, for developing diabetes, colon cancer, Hepatitis C and kidney disease. Follow up is done with those having positive screens to connect with the appropriate provider to address their issue.

United Health foundation sponsors the America's Health Care Rankings, which looks state by state at different measures based on physical health, mental health, health behaviors like smoking and physical activity. A Senior Reports has been added which provides CDC survey data along with other data that compares CT ranking with other states. A Healthcare Disparities report was also added, using national data to highlight health disparities such as maternal mortality.

Physician visits are returning to pre-pandemic levels, including telehealth and in-office visits. In large part, ER usage during January-February 2021 remained below pre-pandemic levels but urgent care saw an increase in utilization beginning in Q4, which was primarily driven by COVID related visits.

On the pharmacy side, members continued to utilize their pharmacy benefit throughout COVID. United made efforts to provide an extra fill to members with chronic medications to be certain they did not run out. While the count of utilizing members has stayed consistent year over year, but the dip in script counts in early March reflected this extra fill. Slight increase in mail order utilization, and in generic utilization adoption as compared to the same time last year.