

HEALTHCARE COST  
CONTAINMENT COMMITTEE



165 Capitol Ave  
HARTFORD, CONNECTICUT  
06106-1775  
Telephone (860) 702-3480  
Facsimile (860) 702-3556

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

**HEALTHCARE COST CONTAINMENT COMMITTEE MEETING MINUTES**  
**August 12, 2024**

Meeting Called to Order by **Josh Wojcik**

**Attendance:**

<b>Labor</b>	<b>State Comptroller Administrative Staff</b>
Carl Chisem – CEUI	
Dan Livingston – SEBAC	Thomas Woodruff
	<b>Presenters</b>
	Bernie Slowik – OSC
	Rae-Ellen Roy – OSC
<b>Management</b>	Betsy Nosal -OSC
Gregory Messner	
Karen Nolen	
	<b>Consultants</b>
<b>Dept. of Insurance</b>	Terry DeMattie, Segal
Paul Lombardo	

**Public Comment:**

Public comment made by an active employee about the HEP program.

**Financials:**

Regarding the finances, we expect the active employee healthcare appropriation to end at roughly \$2,000,000. Both FAD accounts show positive reserves, with \$130,000,000 on the active side and \$220 million on the retiree side. Additionally, the retiree healthcare appropriation is projected to end in a nearly balanced fiscal year.

## **Partnership:**

As of August 1st, we have 167 groups enrolled in Partnership 2.0, with a total of just over 25,000 employees and over 60,000 members. We completed the quarterly update meetings on July 22nd and 26th for existing partnership groups, and we have one confirmed group joining on 9/1.

As for Partnership 1.0, we still have five groups remaining, totaling approximately 2,500 employees and 3,500 members.

*Question by Dan Livingston:* Do we had some groups joined us in July?

*Answer:* We had eleven groups join in July, so that's how we got the higher numbers this month. We are also collaborating with the Primary care initiative groups to integrate these new groups into our Primary care initiative.

## **High-Level Utilization:**

We are seeing a bit of a jump up here, over 5% in our year-over-year trend, which we haven't seen in quite some time. We'll take a further dive into that.

Pharmacy continues to have the greatest impact. However, we anticipate this to decrease as we transition into the new fiscal year and the new contract. We are not overly concerned about this item. On the other hand, professional services expenses are slightly higher than before. Outpatient facility costs have been consistent in the fours and fives for several years. It's the largest cost driver, while inpatient costs are staying flat. We're not overly worried about the medical expenses, but we will investigate the reasons behind the increase in professional services costs. Furthermore, we anticipate improvements in pharmacy expenses with our new contract with CVS.

## **HEP Compliance Totals:**

These are the updated end-of-year compliant totals for 2023. The totals include eligible households and compliant and non-compliant numbers as of August 7th, and they look good from my perspective. Additionally, the current 2024 compliant totals as of August 7th for both compliant and non-compliant numbers are looking promising, considering we are just a couple of months away from December 31st. In terms of chronic care conditions, we are almost at 100% compliance with 2023 requirements, and the numbers look good for 2024 as well. The only area of concern is the dental requirements, which are currently at 73%. A significant improvement from the last report to HC4. We are also working on redesigning the HEP portal to make it more user-friendly.

## **Communications Update:**

Our communications cover all user emails sent to the state, as well as the personal email addresses of state personnel that we have, and our state partnership plan email addresses.

We started July with our new plan year beginning on July 1, focusing on the newest tool within the member portal that we launched during open enrollment in May. Many new and improved

features are continually being added. We promote it to the employees and hope that they utilize it to look up their providers.

In the first email in July, we informed them that if they changed plans, they would get a new card. We also provided information on what to do if they lost their card or how to contact a care coordinator for any questions. Additionally, we highlighted some features of the provider tool and explained why they would want to log into their portal and utilize it.

We also continue to educate our employees and offer opportunities for well-being and health through seminars held every month. We also have chronic condition education sessions that can be used for help or just as an educational resource. These are posted on the portal as well as on Care Compass. The scheduling and diabetes prevention program continues as a year-long program with about 4 sessions of work classes. One is about to end, three are tapering off, and the fourth one is about to start in another week. We are consistently averaging about 60-70 people per class, with around 150 people applying every time we run the program. The eligibility ends up being about 60 to 70 individuals, which has been a great following in the past year for diabetes prevention.

We also highlighted how we work with Quantum in the portal, where members see little sliders or tiles at the top that move like a carousel and coincide with a lot of the communication. There's a call-out for 2024 HEP compliance and a reminder about the tool, both of which can be accessed through the sliders to help members stay updated with their status and utilize the tool within their portal. When they use their portal, it defaults to their plan, making it truly personal. We also remind them of care coordinators and how they're there to help, with their contact numbers visible whether on the app or desktop while viewing their portal.

**Josh Wojcik** – Invited other questions or comments from committee members and the public. There were no additional questions or comments, call for motion to adjourn.

Motion to Adjourn was made by Gregory Messner, seconded by Dan Livingston

*Meeting was adjourned.*