

HEALTHCARE COST  
CONTAINMENT COMMITTEE



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

**HEALTHCARE COST CONTAINMENT COMMITTEE MEETING MINUTES**  
**April 8, 2024**

Meeting Called to Order by **Josh Wojcik**:

**Attendance:**

<b>Labor</b>	<b>State Comptroller Administrative Staff</b>
Carl Chisem – CEUI	Joshua Wojcik
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:**

No public comment

**Financials:**

The active appropriation is projected to close the year at approximately \$9.3 million, consistent with what we saw last month. However, we did experience a slight increase in medical claims this past month, resulting in a dip in the combined FAD balances. The active health account still looks very good, with a projected year-end balance of around \$137 million.

The retiree appropriation continues to hold steady, with a surplus of approximately \$2.2 million. We have seen a slight fluctuation in this account over the past month or two, except for the same small spike in medical claims we saw on the active side. Nonetheless, the account balances in the OPEB FAD accounts for the retirees are still doing very well, with a projected year-end balance of about \$220.5 million. This is a healthy reserve that we're still working to spend down on the retiree side.

### **Partnership:**

As of April 1st, we have 156 groups enrolled in Partnership 2.0, which includes just over 23,000 employees and approximately 50,000 members. We had one new small group join on April 1st, and six confirmed groups will join on July 1st, and we expect a few more. Although some of our larger groups are still making final decisions, these six groups alone will add approximately 600 new employees and 1,300 members.

All the groups have received their renewal letters for July 1st, and we are beginning to schedule open enrollment meetings for both new and existing groups.

In Partnership 1.0, five groups are still enrolled, including around 2,400 employees and just under 3,400 members.

### **High-Level Utilization:**

In this month's report, we can see a total trend in the numbers. The percentage has jumped to 3.7% from the high twos we've seen in the last few months. This increase is primarily driven by the inpatient facility being less negative than previously. Additionally, the pharmacy costs have continued to creep up as the manufacturer assistance savings from Prudent RX continue to roll into the baseline. This will continue to increase until we begin our new pharmacy contract and some other implementation measures on July 1st. There are no other significant items to call out, but we will monitor any changes in the inpatient facility costs if they continue to increase.

### **Communications Update:**

We have been focusing on improving our communication efforts in the past month. We recently acquired email addresses for our employees' spouses, and it was important to include them in our updates about Care Compass, the portal, benefits, and applications. We received positive feedback from that outreach and plan to send out a similar message to our employees soon.

As we prepare for open enrollment, we also want to remind everyone about Care Compass and the portal. We sent an email with instructions on how to access it and why checking their HEP status is beneficial. Additionally, we supported Quantum Health and shared announcements and new changes regarding the new year.

We also took advantage of Diabetes Alert Day to remind everyone about Virta's diabetes maintenance and reversal program. We also announced the upcoming registration for the new class

of the diabetes prevention program series. Feedback on our chronic and well-being seminars has been positive, and we will continue with those efforts.

Overall, we want to continue to promote the Care Compass and its benefits to our employees and their spouses.

You saw this last month, but now the focus is on the upcoming two months, as it is open enrollment season. This week, you will receive a mailer we intentionally held back about the provider distinction program. The mailer will guide you to our provider distinction page and explain the benefits of choosing a provider of distinction. The back spine health program is highlighted in this mailer, and there are three options for employees to choose from - a provider, a virtual Upswing point solution opportunity, or an onsite comprehensive spine program. The spine program is an 8-week interactive program, and the mailer will lay out the variety of treatments and options available for our employees.

We've completed most of the work on our transition to retirement guide, which the retirement unit will soon review. Once approved, we'll post it on our portal to help employees considering retirement and needing guidance on healthcare options.

We're working on a flyer insert for payroll. Around 8,000 people receive paper paychecks, and we want to remind them about open enrollment and the benefits portal. We'll also provide a link on the CoreCT, which most employees use to access their information.

We're revamping our entire benefits enrollment page. The new design features a small picture of Care Compass at the bottom right and two large buttons. One is for forms, a resource commonly needed by employees and HR personnel. The other is for state employee benefits enrollment. Originally created for open enrollment, we've expanded it to include information for new hires and anyone needing to make changes to their coverage due to a qualifying life event. We hope the revamped page will be easier to navigate and provide all the necessary information for retirees and active employees, including planners, enrollment tools, and plan comparison options. Two items on the page are worth noting. The first is an active mailer that will be sent out in the coming weeks before the first week of open enrollment. This year's theme is to remind everyone that there are no plans or carrier changes. Instead, the focus is on ensuring that your family's needs match the plans available and encouraging an annual checkup. The second item is a summary of all the planned comparisons being sent to retirees. Instead of a large, printable booklet, the information is available online on the benefits enrollment and retiree pages. The summary includes accurate plan rates specific to each group, reminders of who to contact for assistance, and even directs those with Medicare Advantage to the right contacts. We hope this addresses the feedback we received throughout the year and that the information provided is helpful.

We will share a message with the union. It might be in newsletter format, or it could be sent in an email. However, we're going to ask for distribution help from the union reps accordingly. We will continue to work with our DOT and DOC benefit contacts to reach all who may or may not have access to digital resources during their workday.

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

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

Meeting was adjourned.