## Staff Health Care Committee, March 4, 2016 Meeting notes

From Kathleen McCoy

**Attending by teleconference**: Melodee Monson UAA (alt for Danielle Dixon UAA), Maureen Hunt UAA Mat-Su (alt), Lesli Walls UAF, Linda Hall SW, Monique Musick SW, Wendy Miles UAS, Gwenna Richardson UAS, Kayti Coonjohn UAS (alt), Kathleen McCoy UAA.

**Not attending:** Marie Williams UAA, Danielle Dixon UAA, David Bantz UAF (alt), Susan Mitchell UAF (alt), Arthur Hussey, SW (alt), Stacy Howdeshell UAF.

## **Guest:**

Timothy Armbruster, UA Benefits Lead Accountant

JHCC set premium rates for FY 17, and UA approved. (see attached). Timothy explained that a steep drop in plan membership could still affect these rates, though not drastically. Currently projected is a 7% decline or about 300 people. Also, JHCC chose to apply \$1M of a projected \$1.5M over recovery from FY16 – still underway until Jun 30 --toward keeping health plan premiums at the lowest, Option A. for FY17. Unused wellness rebates do account for at least part of the projected over recovery.

Deductible for Consumer Driven Health Plan CDHP increased to \$1500 for the individual and \$3000 for the family, but out of pocket was capped at \$6,850, down from \$11,000, to comply with Affordable Care Act requirements.

**Legislature/UA budget**: Monique mentioned that the Senate finance subcommittee on UA will recommend a \$325M budget for UA, compared to House recommendation of \$300M. Watch for the <u>Capitol Report</u> by Chris Christiansen to stay up on UA and legislative budget discussions.

**Fairbanks oncology**: Tim said negotiations are underway between Premera, Mike Powers of UAF and the out-of-network oncologists in Fairbanks. Anchorage has 17 in-network oncologists. Existing patients will continue at the same level of coverage through June 30. New patients, and existing patients beginning July 1 will pay at innetwork levels (80 percent) of 125% Medicare.

**Service experience**: Experience reports with auxiliary services like Patient Care, Nurse Line and Best Doctors are always welcome, Timothy said. We pay for their services and have expectations of their delivery; so please report experience to Erika and Timothy so they can address any shortcomings with the vendor.

**Health Travel Benefits:** Timothy said the list of 17 approved travel reasons is gone from the website as of Jan. 1. He said plan members can travel for any procedures;

he advises calling Premera to check in. UA health travel benefit will pay at the IRS allowable rates. Usually travel expenses are paid up front and reimbursed, though Timothy said check with Premera if that is a problem. A companion traveler, if deemed medically necessary, will also be covered at the IRS allowable rates. Includes \$30/day toward car rental. Timothy said the Blue Cross network is huge, and health travelers can consider destinations beyond Seattle where they have family. Timothy said Premera is working up a new brochure on health travel benefit.

**Doctors and Premera network status**: Timothy said ENT doctors are out of network in Fairbanks and in Anchorage. Orthopedic surgeons are mostly out of network in Anchorage, though a recent business merger between two big practices in Anchorage suggests some movement for some smaller practices to come back in network as a defense against what some might consider a monopoly.

**125% Medicare out of network issue**: Timothy said Premera and UA benefits are drawing up some illustrative scenarios to better explain how out-of-network payments are handled. He said UA benefits and Premera have heard the complaints from plan members who did not understand the impact. Timothy confirmed that Premera is delivering an analysis of impact on health plan members based on the July 1, 2016 start of out of network payments at the 125% Medicare level. This will be an issue at the March JHCC, date not set yet.

**Posters by SHCC**: SHCC has long had a desire to increase communication to health plan members. Rather than a comprehensive approach to everything about the health plan (as UA Benefits is charged with) SHCC is more interested in targeting key messages to warn against costly mistakes, and to advise use of auxiliary benefits like Best Doctors, Nurse Line and Patient Care to help plan members make costeffective health decisions.

At today's meeting we agreed on two ideas for graphic designers to work up. There are more ideas on our Road Map spread sheet, but at least we can start with these. I'll share these with Kayti Coonjohn and Danielle Dixon, volunteer graphic artists, so they can draft up posters for us. UA Benefits will review for accuracy.

1.

## Going out-of-network for your health care will cost you more:

- 'allowable rate' set at 125% Medicare
- unlimited balance billing
- won't count toward out-of-pocket maximum

2.

## What would you rather pay: 20% of \$20,000, or 20% of \$10,000?

When it comes to health care costs, location matters. Alaska has the country's highest costs. If you need a procedure, investigate Premera's health travel benefit, paid at IRS-approved levels and covering medically-necessary travel partners. You don't have to pay Alaska prices.

**Next meeting:** We will Doodle poll for a meeting time after the next JHCC meeting, which is planned for late March, exact date not yet set.

ALSO, SHCC member requested 90-minute meeting slots. We can always end early, but we should allow enough time for full discussion if we need it. Kathleen will advise Morgan.