

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**  
**October 17, 2022**

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
Dave Glidden – CSEA	
	<b>Presenters</b>
	Bernie Slowik – OSC
<b>Management</b>	Rae-Ellen Roy – OSC
Gregory Messner	Betsy Nosal – OSC
	<b>Consultants</b>
<b>Dept. of Insurance</b>	Terry DeMattie, Segal
Paul Lombardo	

**Public Comment:**

No public comment

**Financials:**

Seeing an improvement on the active appropriations, due to an update on the salary allotment on the board of regents at UCONN \$27M surplus on active appropriation side, on the active FAD spend side, claims are continuing to come in very high, this month saw a \$20M spike in medical claims due in large part to HEP related items, with those non-compliance members coming into compliance in addition to new colonoscopy guidance

changing to age 45. On the retiree appropriations side, CMS has released the Part B premium rates and these rates are decreasing by around 3% which translates to a savings, and also changed the IRMA cutoff point and increased the salaries - could be seeing an additional savings related to IRMA post January 1. There is a higher utilization on the retiree side, not as significant a spike as is being seen in the active population so the additional cost is not as high in the retiree OPEB FAD account and cash balance is currently covering costs.

### **Medicare Advantage Update**

Communications schedule to members was reviewed and OSC holding implementation meetings, has completed benefit design and review and is currently testing eligibility between CoreCT the Aetna eligibility process. OSC anticipates communications to go to Med A retirees by November 1. Per CMS requirement, members will receive a termination letter from United, however OSC was able to customize this communication to include notification reassuring members of they will not experience a gap in coverage as they will transition to the Aetna product. Within a few days of this communication, members will also receive communication from Aetna and CMS confirming their coverage with Aetna. By mid-December, they will receive their cards and welcome kit that shows their formulary, benefits and a full evidence of coverage booklet. Members will also receive a welcome call from Aetna to answer any questions members may have. OSC currently working to collect updated phone number and email addresses. In-person informational meetings are being well attended.

Q: What is the anticipated date for United termination letter to arrive

A: OSC does not have the date yet. United met internally on Friday, OSC is anticipating news on final version of the letter and the mailing schedule. OSC requested a date of late November 27th, but this is not yet confirmed and still in the process of being finalized. Customer service center and OSC teams are being kept informed on these dates as they are confirmed

### **Partnership:**

As of 10/1/22, 157 groups are enrolled in Partnership 2.0 totaling just under 26,000 employees and approximately 60,000 members with 124 groups having completed their 3-year contract commitment under Partnership and had the option of leaving the plan without an early termination penalty. Six groups decided to leave prior to 10/1/22, and two groups are leaving on 10/1/22. OSC is scheduled to attend the CT Conference of Municipalities event on November 1, 2022.

#### **Partnership 1.0**

As of 9/1/22, five groups remain in partnership 1.0, totaling approximately 2,400 employees and just under 3,400 members.

## **Communications Update:**

OSC reviewed monthly all-user email, the focus was the flu shot going to state and partnership members. The communication was also sent to state agency contacts for distribution. OSC requested the carriers provide a report highlighting the direction of web traffic. The reports found web-traffic goes largely to Care Compass.

Q: Groups of union contacts receiving copies of communications – would there be a way on the Partnership side, directly from the unions, could have a similar email list for Partnership?

A: Communications team could work with Bernie on this. Communications are currently shared with HR contacts for Partnership asking them to distribute to membership.

Labor offered assistance in this process.

Flu shot postcard reminder will be in the mail by the end of this week. Also in process is focus group activity, following-up on the annual survey and open enrollment.

A survey went directly to the benefits contacts at the agencies to better understand their needs for open enrollment and resources and how often they use online resources for benefits information. Smaller focus groups will be formed to understand the best use of information. An additional focus group will also seek to engage newly hired employees.

Provider of Distinction (POD) program had a relaunch, it was renamed from Network of Distinction. Providers, medical groups and hospitals who have met the requirements of this program have received updated badges detailing the specific service(s) for which they have achieved that distinction. Incentive checks will begin reaching member's homes in the next two weeks for those who received care for a condition or procedure with a qualified provider in June and July. On-going checks will continue to roll out as August and September claims are processed. Each check will be accompanied with an explanation of why the member is receiving the incentive payment.

Josh Wojcik – invited any additional questions or comments from committee members and the public. There were no additional questions or comments.

Motion to Adjourn was made by Dan Livingston, seconded by Karen Nolan.

Meeting was adjourned