

HEALTH, WELLNESS AND INSURANCE COMMITTEE MINUTES
November 7, 2007

Present: Maria Dandar, DeeDee Wentland, Ellen Naderer, Chris Haar, Gaylyn Finn, Linda Hamilton, Donna Wittwer, Pat Kelly, Maria Rizzo and Glenn Egelman

Absent: Judy Jackson May, Christine Cucciarre, Terri Schaller, John Stewart, and Faith Olson

The meeting started at 3:36 PM. Donna started the meeting with introductions because of all of the new faces. She said that she would start the meeting to vote for a new chair. The committee had seven voting members, enough to make a quorum. Ellen Naderer was nominated by Chris and seconded by Glenn. No one else was nominated and Ellen won by a vote 7-0.

Ellen started the first topic, which was the review of the minutes. After a few brief changes, the minutes were approved as amended.

With the next agenda item, the open enrollment update, Ellen turned it over to Donna. Donna said that the spousal form is very important to get in. Because of this, information went out regarding open enrollment/spousal form in early October, despite the fact that open enrollment did not start until October 22nd. If a BGSU employee wants to cover a spouse (not working at BGSU) as primary coverage, the employee must fill out a spousal form. This means that the spouse would have healthcare coverage through BGSU only and not their employer or any other plan. If a spousal form is not completed and returned to the Office of Human Resources by 5 PM on November 16, 2007, the spouse will be taken off of BGSU's healthcare plan effective January 1, 2008. The spouse will be offered COBRA coverage that will cost significantly more, over \$440 a month. Donna stated that she has sent out emails confirming that documents have been received by HR. The Office of Human Resources will take forms sent in campus mail (but they must arrive before November 16, 2007 at 5 PM) or even via fax. Donna asked that all members go back to the constituent groups to help get the message out. Human Resources is not making personal phone calls to inquire about forms because between the confirmation emails, phone calls, and drop in employees asking questions, no time is available. Glenn said that though students had four months to get forms in, some did not respond and had to be removed from the Student Health Service plan.

Donna went on to give the committee an update regarding the forms that have come in through November 6th. The result is that classified staff are turning in forms at a much faster rate than either administrative staff or faculty members.

Ellen moved to the next topic, which was WellAware, the wellness subcommittee. Chris spoke on behalf of the group. She handed out copies of the draft mission statement and asked for input. Also, Chris said that the group would like to belong to the Wellness Council of America (WELCOA). The membership dues are \$365 per year but would include many free member benefits/resources that can be utilized by the WellAware committee for future programming. Chris is asking for Health, Wellness, and Insurance's approval to move forward to ask for funding. DeeDee asked about what the committee is doing. Linda asked about the programming through MMO. Donna responded that MMO does have wellness programming, but because of the

BGSU's healthcare program, only full time employees are eligible to participate in them. By belonging to WELCOA, as an institution, the WellAware committee can get some good ideas on programming of wellness programs that could be offered to all employees. In addition, BGSU can tailor programming to the specific needs and issues that pertain to BGSU employees. Glenn wanted to review the information before making a decision, but said that others may not have the same need that he has before voting to support it.

Ellen said that she did get some feedback from part time staff regarding the wellness initiative. Chris followed up that not everything is free through WELCOA with the \$365 fee, but many resources are and is well worth the money. Linda moved to endorse joining WELCOA. DeeDee seconded the motion. The vote was 4-0. Health, Wellness, and Insurance officially endorses WellAware asking for funding to join WELCOA.

Questions

DeeDee started with questions. She said that Faith had some questions. Faith wanted to know if Donna had received the packet of information that she sent over regarding another plan. Donna said that she had briefly gone over the plan, and found some good things.

However, before the committee review the information that Faith would like them to review, Donna went over the BGSU plan of benefits for a baseline.

Another question that arose was the age limit for dependent children on the BGSU healthcare plan. It is age 23. BGSU takes dependents off at the end of the year. The complaint was that if a dependent's birthday for when they turn 23 is in January, they remained on the plan until the end of the year, whereas if someone else's 23rd birthday was in December, the dependent would come off the plan at the end of December.

Donna said the current BGSU policy is to cover until the end of the year they obtain 23. This could be reviewed and changed and coverage dropped at the end of the month the dependent turns 23. Dependent eligibility is something the committee can review this next year.

A final question focused on a prescription that employees could always obtain in a generic form (compounding hormone cream), thus costing the employee less and now the cost was high. Donna answered that she is aware of the change and that it has everything to do with the manufacturer of the product and how they bill the NDC to the purchaser. It has nothing to do with BGSU or Caremark. Donna said that Kelly and Terri have the phone number of the manufacturer if someone wants to complain to the manufacturer and that we have already done so.

A faculty member wanted an explanation for a specific denial of a claim. The HWI member described the situation. Donna, using Glenn as an example, said that doctor's office code office visits. This information is sent to MMO for processing. The claim could be denied based on the code, lack of information, or lack of connectivity between the diagnosis and issues or other reasons. Donna suggested that the faculty member contact Kelly or Terri to set up an

appointment to go over the claim specifically to identify the reason for the denial. Also, sometimes people see a claim as denied when in fact it may have applied to the person's deductible.

Gaylyn cited an example where he had appealed a claim and after three appeals and a large amount of time, he was able to get MMO to pay the claim. He suggests keep researching and pushing the issue. Also, if claims have been denied, there is MMO appeals process and also a BGSU appeals process.

Review of Healthcare Plan

Donna wanted to go over the healthcare plan and gave a quiz at the start of her discussion saying that she would answer all eleven questions. She started with page 3 on the 2008 open enrollment booklet that she handed out. She went over the cost chart and showed how they differ by pay periods. Also, the plan year equals the calendar year. She discussed that if a nine month faculty member quit during the summer months, that Human Resources would bill the individual if they owed something in healthcare contributions. She noted that Delta Dental cost paid by BGSU is separated on employee pay advices online.

Delta Dental is a fully insured plan, meaning that they take all of the risk and administration issues. BGSU negotiates and renews with Caremark everyone two years. Page four of the document contains the information update address information. She explained the difference between local and permanent address, how it can be changed by all BGSU employees, and how important it is to keep address updated. It affects where healthcare information is sent as well as W2s. The next item on the page is the nurse line that all benefit plan members can call 24 hours a day to discuss specific issues/concerns/problems. Glenn mentioned that the Student Health Service has a similar tool for students that is located online. Donna brought up if employees are traveling, they need to go to the BGSU website for guidance. The website is <http://www.bgsu.edu/offices/ohr/benefits/index.html>.

On page 5 is the healthcare plan. The PPO to which BGSU belongs fits the employee population most closely as opposed to an HMO (health maintenance organizations) or POS (point-of-service plans). The BGSU PPO has two plans, network and non network. Update: As of January 1, 2007, both Toledo Hospital and Flower Hospital are moving back into the network. Donna mentioned that MMO subcontracts for networks across the country, so that services can be obtained, even if employees are traveling. Dependents are covered by the BGSU plan, though they must be unmarried dependents. If they are disabled, they may be able to remain on the plan after age 23.

Page 6 of the open enrollment information contains the benefit design. This is where the appropriate codes from doctors are critical and how they are paid from the plan. MMO acts as BGSU's plan adjudicator and appeals process. BGSU is self funded and contracts with MMO for their expertise in paying claims and other processes.

As a self funded plan, BGSU assumes the risk for claims costs and maintains money in reserve. Also, the BGSU plan has a stop loss of \$250,000. This ensures that if any individual person goes

over \$250,000 in claims in one benefit year, then the claims are reinsured and the risk is moved away from BGSU.

In going down the benefit listing, Donna points out that because BGSU has two plans, network and non-network, that deductibles do not work together, that means that if an employee has met a deductible in the network plan, it does not transfer over to the non-network program. The deductible is defined as the amount that an employee must pay before the plan starts. In most cases, then the plan takes over paying 90% of claims.

There is a co-insurance limit maximum. This means that once an employee hits this amount that they have paid in one benefit year, the plan picks up 100% of the charges as long as they continue to use the appropriate level of providers based on meeting the co-insurance under the network or non-network plan. Lastly, the co pay for any office visit is \$20.00.

Further down on page 6 are the limits for related services such as physical, occupational, and speech therapy. If these services are in relationship to an ongoing issue, additional resources may be available through case management.

Page 8 of the brochure describes BGSU's prescription drug program. The plan is broken down into 4 tiers; namely generic, brands on a primary list, brands not on a primary list, and miscellaneous/life style drugs, which are not covered by BGSU. Some of these drugs that are not covered by BGSU can be obtained more cheaply through the BGSU pharmacy.

The dental coverage is provided by Delta Dental. This plan is fully insured.

The last point on benefits was spending accounts, specifically the Health Care Reimbursement Account. If an employee has to spend money on vision care, if they know that they have surgery coming, have orthodontia expenses coming, have costs through prescription drugs, or have a combination of the above, then they might want to consider this option. It reduces the taxable income of employees and families.

One last question came up regarding health related vision issues. If someone was at risk for glaucoma, and was being tested for it periodically, would this be covered under the healthcare plan? Donna responded that if a disease of the eye was found, or the employee/covered dependent would have the disease, then the examination/tests/etc. would be covered under the plan. If the examination tested for it and it was negative, the plan would not cover the visit because it is seen as a regular eye exam. This is similar to a colonoscopy under the age of 50. If something was found, the procedure would be covered. If the procedure found a healthy organ, the plan would not cover it.

The last point brought up is that all employees/covered dependents have a \$2,000,000 lifetime limit of coverage on the BGSU plan.

Homework

Donna asked that everyone read over the health care plan and come to the next meeting with questions. Also, Faith's document will be emailed out. Please compare it to the BGSU document.

The meeting was adjourned at 5:17 PM with Ellen thanking everyone who attended.

THE NEXT MEETING WILL OCCUR DECEMBER 5, 2007 3:30 PM