

**CHAMPAIGN COUNTY**  
**Health Insurance Committee Minutes**

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*Tuesday, October 23, 2012 – 3:00pm*  
*Jennifer K. Putman Meeting Room*  
*1776 E. Washington St., Urbana, IL*

**MEMBERS PRESENT:** Astrid Berkson, Donna Blumer, Deb Busey, John Farney, Stephanie Holderfield, Tea Jones, Barb Doyle-Little, Brian Mennenga, Debbie Mennenga, Michelle Mennenga, Brad Morris, Ed Sexton, Amanda Tucker, Debi Young

**MEMBERS ABSENT:** Josh Jones, Elizabeth Murphy, Josh Reifsteck, Steve Ziegler

**OTHERS PRESENT:** John Malachowski

**CALL TO ORDER**

D. Busey called the meeting to order at 3:00 pm.

**APPROVAL OF MINUTES**

**Motion** by Sexton to approve the minutes of September 17, 2012, as presented; seconded by Berkson. **Motion carried unanimously.**

**REVIEW AND DISCUSSION REGARDING WELLNESS SURVEY**

Busey asked for thoughts on the wellness survey. B. Mennenga mentioned that there were some interesting responses. Busey asked Malachowski for ideas or discussion points. Malachowski stated that Gallagher has a wellness team available for formal discussion to put together a wellness plan. That team had asked Malachowski to point out to the committee that is appeared the survey answers came from an older population. Malachowski said that to him it seemed that a younger average population responded, but that the wellness team interpreted it as an older population. Busey asked for clarification. Malachowski stated that those who responded were younger but that it is based on the population of the entire group.

Malachowski noted that the majority of responses had lack of time, money, and inconvenience of the gym as reasons for not participating in a wellness program. He noted that is a typical response from groups of all kinds. He went on to point out some of the specific responses: 56% stated they were 20 pounds over their ideal weight, over 90% of respondents were doing something to monitor their blood pressure at least once a year, and that the team should be encouraged by the number of employees who said they exercise at least 20 minutes three times each week. He suggested that the team

might want to look at things that would deal with weight. He stated that he didn't want to say much more at this point but would like to hear from the team.

Holderfield said she was encouraged by the responses and how seemingly honest they appeared. She felt the team might want to try a wellness program based on the survey results. Busey noted that the County currently has a weight management plan with Weight Watchers at Work. She also stated that the County has an agreement with the Urbana Park District where employees can get resident rates if they wish to participate in their programs. She suggested that these items be advertised more. Malachowski said that his team has automatic recommendations that they submit that could become more formal with some push. He also noted that the insurance carrier has resources available at no cost. He commented that the County has a new representative with Health Alliance and there are some growing pains right now. He has asked for a list of every free item of the Health Alliance program that could be promoted. Malachowski noted the survey provides enough information for the County to decide if they want to pursue a formal wellness program or not. The challenge is how to force employees down the road of wellness. He provided an example used by Gallagher: their employees get discounts on their medical contributions if they participate in a bio-metric screening. Every person who participates gets a report that they can then share with their physician. They have a heavy financial incentive to participate and this year the participation was up to 84%, which is probably about the max. Next year the incentive for reductions is to see if progress has been made with lowering cholesterol, lowering BMI, etc.

Malachowski stated there will always be push-back with wellness programs, but a system has to be designed that allows incentives to those individuals who can't meet certain criteria so they still get incentives. He said the County could start by doing nothing for 2012 and developing a plan that would have bio-metric screening by 2017, noting that there would be costs to the County for that. He noted that you can't ask an employee to have a screening and have them pay for it as well. He noted that there are certain optional tests that the employee could pay for at significantly reduced costs if they have blood drawn at the same time of the screening. Sexton asked if this could be used to bargain for lower rates in the future. Malachowski said that healthcare costs will go down with healthier employees. He said as the County goes self-funded they won't need to bargain for lower rates but the overall costs will go down. Berkson asked if people with certain chronic diseases, like MS, were out of luck for the discounts. Malachowski said that if those diseases are under treatment, the doctor should be able to provide a note stating that the employee is complying with treatment and that will allow them to qualify. He again commented that there will be push-back from the less healthy population. He said to have a plan set up such that if someone meets the cholesterol guidelines they get one point, if they meet the blood pressure guideline they get one point and so on. Part of the challenge is to force doctors to supply certification as part of a routine physical. He noted that when the County goes self-funded, they could give a discount that would decrease out-of-pocket expenses and that the benefits could also be tweaked to reduce out-of-pocket expenses.

Malachowski stated that a wellness program is a work in progress and is a moldable product. He said that research shows for every dollar spent on wellness there is at least that dollar in return, usually more. He asked if anyone had heard of any other

wellness programs available thru spouses or friends. Holderfield suggested starting with a physical as an incentive to lower the premium. Malachowski stated that with the healthcare reform a physical has not out-of-pocket expenses, but that it isn't a "free" physical because the insurance company will show it as a claim. Blumer says she knows of another company that has someone come in for blood pressure screening. She stated that one person had lower blood pressure than they had ever had and was worried that the discount would be gone if she tested higher than last year. Busey stated that the incentives should be based on more than one criteria and that if results show in the normal range the discount should be given.

Malachowski noted that there is some evidence that shows it's too easy for people to contact their doctor's office to get the information, which may be from a chart that is two years old. He said to have more accuracy a doctor has to be forced to certify that they actually saw the patient. He also said that if a physician is happy with the patient's treatment that the employer should be happy with it as well.

Holderfield mentioned the wellness center at Provena. Busey said there is a cost associated with that. D. Mennenga said she has been in contact with them. Busey asked Malachowski to bring more information in January. Malachowski suggested he bring his wellness team to give a presentation of model programs.

M. Mennenga asked if Obama is re-elected will it affect the committee. Busey said she does not see it as having an impact and that Malachowski will advise of any changes. Malachowski stated that Obamacare won't go away even with a new president. He said it mostly will affect employers with 50 or less employees who will have to decide if it's cheaper for them to pay the penalty and drop insurance coverage. Malachowski said that Gallagher's job will be to look at ways to mitigate the costs.

## **UPDATE ON OPEN ENROLLMENT**

D. Mennenga stated that the last day to send in paperwork is Friday, October 26. She will go thru what has been received and if someone hasn't supplied information she will contact them by email and give them one chance to submit it.

Malachowski asked how many have signed up for the vision insurance. D. Mennenga said about 130. She also said that there aren't as many people signing up for the FSA as in the past. Malachowski asked if there were many comments about the changes. D. Mennenga answered that there was a lot of marketing before the open enrollment packets went out so there weren't as many comments as there could have been. She noted that she is concerned about the nursing home though because most people there don't have email. Young said that most of the complaints she is hearing are about the convenient care costs going up. D. Mennenga said that she has been told by employees that if they add the employee + spouse premium and the employee + child premium it doesn't add up to the family premium. Malachowski stated that the only real answer to that is that they have been unfairly subsidized in the past.

Malachowski stated that physicians have seen convenient care as a revenue generator because they have the patient follow up with their regular physician. Insurance companies are fighting back by having higher co-pays for the convenient care visits. He stated the idea isn't to have someone who really needs to go to convenient

care not do so, but rather make someone think about if they really need to use convenient care or not.

### **OTHER BUSINESS**

D. Mennenga mentioned that she always has employees that have claim issues that are six months old but she doesn't find out about them until open enrollment. She encouraged the committee to have their employees contact her as soon as they hear of any claim issues.

B. Mennenga asked how the flu shot turnout has been. D. Mennenga said she doesn't have the numbers but that she knows there was a good turnout.

Busey asked about the hearing screening. Tucker said that there are only six slots left.

Morris stated that he is aware of a number of people who had family coverage that have changed. Busey noted that a private policy for kids is not available right now due to Obamacare. D. Mennenga said that Health Alliance is writing temporary policies for people to cover December thru March, which is their general open enrollment. She mentioned that some of those people who dropped family coverage may be coming back to the County in March depending on the rates at that time. She said that isn't a problem because it triggers a loss of coverage event.

### **ADJOURNMENT**

Meeting declared adjourned at 4:03 pm.

Respectfully submitted,

Linda Lane  
Administrative Assistant