

STATE OF LOUISIANA DIVISION OF ADMINISTRATION OFFICE OF GROUP BENEFITS



MINUTES Of

Office of Group Benefits Policy and Planning Board Meeting Monday, July 15, 2015

CALL TO ORDER

The meeting was called to order at 10:10 a.m. by Ms. Nancy Dewitt

Pledge of Allegiance led by Mr. Krefft

ROLL CALL

Present
Rep Robert Billiot
Barry Blumberg
Rikki Nicole David
Nancy Dewitt
Luke DiMattia
Korey Harvey
Kenneth Kreft
Melissa Lee
Scott McKnight
Seth Smith

Absent Lettie Lowe-Ardoin Sen Gregory Tarver

Sen Gregory Tarver Harold Williams

10 present and 3 absent, representing a quorum

OLD BUSINESS

The minutes of the September 30, 2014 meeting where presented for approval. A motion was made by Mr. McKnight seconded by Mr. Blumberg, to accept the minutes presented. The minutes of the November 20, 2014 meeting were presented for approval. A motion was made by Mr. Smith seconded by Mr. Kreft, to accept the minutes presented. The minutes of the January 12, 2015 meeting where presented for approval. A motion was made by Rep. Billiot seconded by Mr. Blumberg, to accept the minutes presented.

There being no objections, the minutes where approved.

The approval of the minutes for March 9, 2015 were deferred to the next meeting by Ms. Nancy Dewitt.

CEO REPORT

This report will become part of the minutes for the meeting.

Legislative Updates

Act 146
House Concurrent Resolution No. 113

Administrative Updates

Population Health Updates

FINANCIAL REPORT

Mr. Hildebrandt with Arthur J. Gallagher

Fund and Cash Balances - Actual and Projected

Fund Balance Analysis

Projected Plan Experience through Current Fiscal Year

Ongoing Work Streams

Premium Increases and Plan Changes

NEW BUSINESS

Ms. Dewitt proposed that the elected officers remain in place until December. A motion was by Mr. Blumberg seconded by Ms. David to accept the proposal. There were no oppositions.

Ms. Dewitt presented Ms. Deborah Copeland who has volunteered to be the Teachers Retirement representative on the board until the position can be filled with the next election. Mr. Kreft nominated her for the vacant position of Ms. Broussard. The motion to accept the nomination was approved by Mr. Kreft seconded by Mr. Smith. She will be sworn in at the next meeting.

OTHER BUSINESS

There was no other business presented for discussion.

PUBLIC COMMENTS

Carrie Griffin – Assumption Parish School Board

Concerns about being a small agency and only 3 doctors in their parish. Doctors are getting calls about the care they are giving their patients. Prescriptions are needing approval before patients can fill. Ms. Griffin complimented OGB on its improved communication with agencies.

ADJOURNMENT

A motion to adjourn was made by Mr. Blumberg seconded by Mr. McKnight, there were no objections, the meeting was adjourned at 11:08 am.

Nancy-DeWitt, Chairpaerson

Melissa Lee, Secretary



STATE OF LOUISIANA DIVISION OF ADMINISTRATION OFFICE OF GROUP BENEFITS



Office of Group Benefits CEO Summary Report July 15, 2015

Legislative Updates

Act 146

Provides primarily for 4 changes in the law:

- a. Creation of Group Benefits Estimating Conference (La. R.S. 39:21.3G)
- b. Amendment to OGB powers and duties (La. R.S. 42:802)
- c. Duties of the Group Benefits Policy and Planning Board (La. R.S. 42:881)
- d. Composition of the Group Benefits Policy and Planning Board (La. R.S. 42:882)

House Concurrent Resolution No. 113

Resolution urges and requests the Office of Group Benefits (OGB) to study the costs for each member school board to terminate its participation in the programs offered through OGB and to submit a written report of findings to the House Committee on Appropriations and the Senate Committee on Finance not later than sixty days prior to the beginning of the 2016 Regular Session of the Legislature of Louisiana.

Administrative Updates

Third Party Administrator Contract

Blue Cross Blue Shield of Louisiana was notified on June 3, 2015 that they were the successful bidder. Contract will be effective on January 1, 2016.

Fully Insured HMO RFP

RFP was released on June 25, 2015 with proposals due back by July 27, 2015.

Medicare Advantage RFP

RFP was released on July 2, 2015 with proposals due back by August 3, 2015.

Affordable Care Act Compliance

OGB has created a website as a resource for agencies specifically related to ACA employer reporting responsibilities. OGB will conduct regional seminars in August for human resource personnel for non-LaGov agencies. LaGov agencies will receive training through the Office of State Uniform Payroll.

Agency Use Only Phone Line Established

To better serve our agencies, a designated toll-free line has been established, as well as a user friendly email address (ogb.help@la.gov).

Department of Insurance Audit

The Department of Insurance (DOI) is required to audit OGB every 5 years, per La.R.S. 42.851 (N). The actuarial audit was finalized in April 2015 and the operational audit is ongoing.

Ordinary Rule Revisions

The Ordinary Rule will be amended to adopt language associated with the Affordable Care Act, primarily related to HIPAA Special Enrollment events. Also, the rule is being updated to incorporate the changes per Act 146. There are no changes to deductibles, co-pays, or co-insurance for the 2016 Self-Insured Health Plans.

Same-Sex Spouse and Eligible Dependent Enrollment

Members who were married prior to the recent Supreme Court ruling of June 26, 2015, who wish to enroll their same-sex spouse and/or eligible dependents may do so during a limited enrollment period ending August 11, 2015. Members who were married on or after that date or in the future have 30 days to enroll their newly eligible dependents.

Annual Enrollment

Annual enrollment will begin on October 1 and end on November 15 for Non-Medicare members. Medicare members may begin enrollment on October 15 through December 7. This year's enrollment will be considered a "passive enrollment". Members do not need to take action if they want to remain in their current plan and if they do not need to add or delete dependents. Members may enroll through an on-line enrollment portal or by paper.

Population Health Updates

Live Better Louisiana

As of July 6, 2015, more than 18,000 members have taken advantage of the on-site wellness check-ups. In order to receive the \$120 annual credit for the 2016 plan year, members must complete both the check-up and the on-line Personal Health Assessment (PHA). Blue Cross is emailing members reminding them to complete the PHA. OGB has mailed letters to members who have completed both components and who will be receiving a premium credit.

The findings of the wellness screenings revealed more than 4,600 members who were identified as having three or more Metabolic Syndrome risk factors and approximately 13,500 were identified as being overweight or obese.

Summary of Pharmacy Plan Change Results

The plan changes implemented effective September 30, 2014 for active and non-Medicare members has produced significant savings for both the members, as well as for the plan. The implementation of the formulary has resulted in a shift by plan members to choose medication that is less costly. This shift to generics, co-pay adjustments, formulary edits are the primary reasons for the \$16.5M in savings.