A meeting of the Health Insurance Committee was held on Tuesday, November 19, 2019, at the Mark Sanford Education Center with Kevin Ohnstad presiding.

**Committee Members Present:**
Kevin Ohnstad, Principal Voting Member
Elizabeth Hildebrand, Teacher Voting Member
Amanda Weston Caillier, Teacher Voting Member
Kelly Neis, Classified Voting Member
Scott J. Berge, Business Manager/Advisory Member/Facilitator
Tracy Abentroth, HR Manager Advisory Member/Facilitator
Bill Palmiscno, GF School Board/Advisory Committee Members Absent:
Dr. Terry Brenner, Superintendent/District Administrator Voting Member

**Others Present:**
Michelle Emineth, Accounting Supervisor
Kelly Gates, Hays of Utah Insurance Services
Alice Sanders, Medica
Pete Stewart, Medica
Cindy Johnson, Meeting Secretary

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**Call to Order.** The meeting was called to order at 4:02 p.m.

**Approval of Minutes.** It was moved by Neis and seconded by Hildebrand to approve the May 15, 2019, minutes as written. Motion carried unanimously. Absent: Brenner.

**Medica.** Sanders and Stewart reviewed claim data for Altru ACO and Passport members. Key findings include:
- All utilization and per-member-per-month costs are below Medica’s Book of Business average.
- ACOs are driving cost savings.
- In-network utilization is excellent (96% of claims).
- Overall spend is driven by four main diagnostic categories (cancer, nervous system, cardiovascular, and musculoskeletal).
- Pharmacy trend is driven by specialty and brand drugs related to autoimmune conditions, cancer, and diabetes.

Weston Caillier joined the meeting at 4:20 p.m.

Sanders and Stewart explained new programs and product enhancements (some are available only to ACO members) related to population health, user incentives (My Health Rewards will migrate to a new platform January 1, 2020), chronic condition support, caregiver support, and member engagement. Recommendations include:
- Address risk due to chronic conditions.
- Educate on lower cost sites of service.
- Leverage new My Health Rewards experience.

Sanders and Stewart explained pharmacy coverage will change to Express Scripts (ESI)
effective January 1, 2020. A communication plan regarding this change was discussed.

Recommended benefit and administrative changes to the plan document were provided for consideration.

**Hays – Utilization Year-Over-Year, Financials.**
Gates reported a great year for the GFPS health plan. The annual cost per employee was below the norm. Claims related to behavior decreased considerably, claims related to prevention and early detection are slightly down, and claims related to chronic disease are down significantly. The employee cost per year over the last seven years is flat compared to the national trend. There were only four claimants over the $125,000 specific deductible. Altru Network claims are less than Altru Choice Passport claims. Specialty drugs continue to be very pricey and account for 1% of the prescriptions filled but 51% of the RX spend. Year-over-year comparison indicates a decrease in in-patient hospital claims, an increase in emergency room claims, and in increase in prescriptions. 11% of members make up 84% of claims. The rolling 12-month loss ratio is at 81%, which is good. The claims trend has decreased.

**Date/Time of Next Meeting.** The next meeting will be held toward the end of February 2020. An availability poll will be sent out later.

**Adjournment.** There being no further business, the meeting was adjourned at 5:33 p.m.

APPROVED ________________________________

(Date)

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Kevin Ohnstad, Committee Chair