

State Health Benefits Program
Plan Design Committee
Open Session Minutes: April 28, 2021 10:00 a.m.

Adequate notice of this meeting was provided through the annual notice of the schedule of regular meetings of the Committee filed with and prominently posted in the offices of the Secretary of State. A meeting notice was mailed to the Secretary of State on December 29, 2020, and Star Ledger and the Trenton Times on December 23, 2020. Updates regarding the Telephonic meeting was sent to the Star Ledger and posted to the Division's website on April 5, 2021.

The meeting of the State Health Benefits Program Plan Design Committee of New Jersey was called to order on Wednesday, April 28, 2020 at 10:00 a.m. Due to COVID-19 this meeting was held telephonically.

The text of Resolution B (Executive Session) – was read in its entirety in the event that the Committee desires, at any point in the meeting, to approve a motion to go into closed session.

Acting Secretary Nicole Ludwig led the Committee in the Pledge of Allegiance. Acting Secretary Ludwig then took Roll Call and established that a quorum was present.

Roll Call

Committee Members:

Jennifer Keyes-Maloney, Assistant Treasurer (Co-Chair)

Michael Zanyor, NJSTFA (Co-Chair)

Dini Ajmani, Assistant Treasurer

Lynn Azarchi, Director, Office of Management and Budget

Kevin Lyons, NJ State PBA

Justin Zimmerman, Chief of Staff, Department of Banking and Insurance

Kimberly Holmes Assistant Commissioner /Chief of Staff, Department of Community Affairs

Patrick Nowlan, AAUP – AFT (Co-Chair)

Jenelle Blackman, CWA Staff Representative, District 1

Absent:

Tennille McCoy, Assistant Commissioner of Human Capital Strategies, Department of Labor and Workforce Development

Robert Little, AFSCME Department of Research

David Krueger, NJ FMBA

Also Present:

Alison Keating, Deputy Attorney General

Amy Chung, Deputy Attorney General

Christin Deacon Division of Pensions and Benefits

Nicole Ludwig, Division of Pensions and Benefits

Andrew Lawson Division of Pensions and Benefits

Theresa Williams, Division of Pensions and Benefits

Debra Pelto, Division of Pensions and Benefits

Speakers:

Binsy Francis, Horizon

Kim Ward, Aetna

Dr. Esmerelda Serrano, Aetna

Bob Rose, Aetna

Mary Carr, Aetna

Genevieve Wozow, Rethink Benefits

Mike Civello, Rethink Benefits

Pledge of Allegiance:

Acting Secretary Nicole Ludwig led the PDC in reciting the Pledge of Allegiance.

MEETING MINUTES

Commissioner Holmes made a motion to approve the meeting minutes from the February 17, 2020 meetings. Commissioner Zaynor seconded the motion; all voted in favor.

PRESENTATION: RETHINK BENEFITS

Genevieve Wozow and Mike Civello from Rethink Benefits presented on the shortage of behavioural health providers and resources. Ms. Wozow explained that they are not a network of providers, but are behavioural health support to parents and caregivers, providing resources to parents who have children with learning issues, social issues and behavioural challenges. Rethink Benefits was presented as a solution to bring more support to working parents, for mental and behavioural health, and inclusion in the workplace.

According to the CDC, 1 in 6 children across the United States in diagnosed with a developmental disability (included among these are Autism, ADHD, learning disabilities) and many are undiagnosed. It was explained that New Jersey has the highest rate of Autism in the country (NJ has a rate of 1 in 32, while the national

average is 1 in 54). It was explained that when a working parent must also provide care to a child who needs additional support, the parent is two and a half times more likely to experience their own mental health issues, meaning multiple behavioural and mental health concerns in the same family. It was noted that the Covid-19 pandemic has increased mental health struggles, with two out of three employees stating that increased caregiving demands were the top driver of their mental health concerns. The stigma around neurodiversity, including mental, learning, behavioural and developmental struggles, means most employees feel they must hide that part of their life, and therefore do not get the resources to help him.

Ms. Wozow reiterated that their mission is to help employers expand employees' benefits and support workforce diversity and inclusion. They aim to provide clinical behavioural health support for families that have a child with a developmental disability, through personal coaching with a therapist or access to instructional videos.

Ms. Wozow asked how much of the SHBP population has children, Ms. Deacon provided that 29.2% of SHBP members have children. Commissioner Ajmani asked if this program would replace providers that exist now, and Ms. Wozow answered that Rethink Benefits would be an additional resource for the parents and that any child who was seeing a provider would continue under their care. Commissioner Ajmani then asked if there would be coordination between Rethink Benefits and the provider so that there is no guidance that is in conflict with what the provider is trying to do. Ms. Wozow advised that care team members can be added to their platform, providers as well as teachers, babysitters, etc., so that care can be coordinated among all caregivers. Commissioner Lyons asked Mrs. Deacon to clarify if this was a Division of Pensions and Benefits initiative. Mrs. Deacon advised this was not pushed by a company (Horizon, Aetna, Optum) but was an option for the gap in services in the behavioural health space. Commissioner Keyes-Maloney made a motion to ask the Division of Pensions and Benefits, as administrators, to investigate solutions like Rethink Benefits, as well as for the Division of Pensions and Benefits to research and present their findings at a later PDC meeting. This was seconded by Commissioner Azarchi. All present agreed, motion was passed.

DIVISION UPDATE

Christin Deacon the Assistant Director for the Division of Pensions & Benefits provided an update regarding COVID-19 statistics, including vaccination data for the membership of SHBP. Mrs. Deacon stated that among the commercial population (non-Medicare Advantage population for the Horizon population), from the onset of the pandemic on March 2, 2020 there have been a total of 725,000 tests with 96,872 positive tests for the SHBP population, and about 73,000 antibody tests with about 5,200 positive tests for that population. Inpatient hospitalizations have gone down, trending week over week by about 40.8 percent. She states the claims activity from March 2, 2020 is around \$212 million, including inpatient/outpatient professional lab testing and COVID vaccine administration, and noted the federal government is still paying for the vaccine itself.

Mrs. Deacon stated telemedicine utilization continues to track down as overall utilization and as doctor offices and society open back up, but is still substantially more than pre-COVID. Behavioral Health specific telemedicine utilization was not available for this population, but was to be provided in the next update.

As of April 18, there were about 1,000 single-dose vaccines administered before they were stopped. As of the same date there were about 26,380 vaccines administered for second dose vaccines, with a lag of about 10,000 on the second dose. There was a total administrative cost of these services around \$2 million as of April 18.

Mrs. Deacon provided an update regarding COVID-19 as it relates to the Medicare population. She stated that since March 2, 2020 to date there have been approximated 88,900 COVID tests. The vaccine numbers are on a lag as they must be reported from CMS. There was a peak in telemedicine claims around May/June of 2020 and then a decrease. However, the numbers then stabilized at a substantial telemedicine utilization.

Mrs. Deacon advised that pharmacy benefits for the vaccine were instated, which means members can have access to pharmacies across the country for vaccine administration. The records show about 4,400 total immunizations with Pfizer, 4,500 with Moderna, and 1,500 with Janssen for a total of 10,400. The largest band of population is the age of 55 to 64, but other populations are growing as the restrictions loosen.

Mrs. Deacon noted that with the increased utilization of telemedicine, it should be noted that the reimbursement methodology expired 90 days after the public health emergency. While there is no way to know when that will be, it should be something to be aware of so they can consider the telemedicine and virtual care policy in the future.

PRESENTATION: AETNA

Kim Ward, Dr. Esmeralda Serrano, Bob Rose and Mary Carr from Aetna presented regarding the vaccination program as a part of CVS Health, and making the vaccine available to local stores and communities. Dr. Serrano spoke as the medical director for SHBP and addressed the vaccine strategy for membership. They want to focus on providing easy member experience, promoting and enabling access, and providing education. Aetna planned to focus on digital engagement, proactive outreach, and education and scheduling assistance through their call center teams. They wanted to make members aware there is no charge for the vaccine or the administration of the vaccine. The focus for the outreach and education would be members who were most vulnerable, using digital (email, text), telephonic (call center services as well as notices when appointments become available) and segmentation components (using personalized communication to educate and help influence behavioral change). Aetna explained that in high social vulnerability areas, there would be an emphasis on ongoing education to dispel myths and pre-saved equity appointments for easy access to the vaccine.

Commissioner Lyons asked Dr. Serrano about the no cost for Medicare Advantage members, and it was clarified that the vaccine and administration are not free, but the federal government is paying for it. There is no cost to the member. Commissioner Lyons also asked for clarification on the equity appointments. Dr. Serrano explained that the premise behind these appointments was that throughout

2020 and 2021 certain communities have been impacted really greatly by COVID, particularly African-American and Latino communities. In addition, these communities had disparate access to the vaccines, so the program is in place to save some appointments in these areas for people who have had poor access. It was clarified that these populations are by race, but also by geography. Dr. Serrano stated that it was getting to a point where there was enough supply for most people who want the vaccine had easy access to it, and their main focus was pivoting to those who were fearful or have concerns about the vaccines.

DIVISION UPDATE: NJ WELL

Christin Deacon the Assistant Director for the Division of Pensions & Benefits provided an update on the NJ Well program in its eighth year, noting increased engagement levels across the population. There was a 23 percent increase in award winners, from 35,000 in 2019 to almost 44,000, and a 11.4 percent increase across coaching protocols, which shows the most clinical benefit.

On December 23, 2020 the PDC, this body, approved a resolution allowing SHBP members CWA Unity Direct, NJ Direct, Omnia, HMO and high-deductible health plans to also earn the \$350 incentive. Due to the late implementation of the resolution, as well as programming errors, 320 member incorrectly received \$250 gift cards, rather than the \$350 they should have gotten. On April 20, 2021, a file processed a separate \$100 gift card to those members. As of April 26, 2021 a total of 1,365 member have been issued their \$350 card and in total 131,202 eligible active members were eligible to earn the \$350 incentive going forward.

Commissioner Blackman asked for a list of member who redeemed the additional \$100 card. Binsy Francis advised she would get the requested information and distribute it. Commissioner Lyons asked Mrs. Deacon if there was a numeric value of ROI, and Mrs. Deacon advised there have been several meetings to agree upon a methodology. She advised that the approached under consideration are total cost of care and a risk-adjusted cohort. She advised it could be analyzed by a group of people within a risk category, and comparing the cost of care to another group of the same size and risk category who did not engage in NJ Well. It can also be analyzed by cost of care for a particular member before and after the NJ Well program. Commissioner Lyons then asked if there was a way to incorporate early retirees, stating that the monetary incentive encourages healthy behavior which drives down the costs, specifically stating that he was not asking about including the Medicare population. It was previously determined that as retirees were not paying for the health benefits, they should not be given money. Commissioner Lyons noted that more retirees are now paying towards their health benefits, and early retirees have the highest spend and the most medical issues, and could be incentivized to engage in behaviors that lead to better health outcomes thereby reducing cost. Commissioner Lyons asked that the Chairs put this topic as a discussion for the next meeting.

SUBGROUP UPDATE:

In regard to the prescription subgroup, Commissioner Jennifer Keyes-Maloney spoke about an exploration into over the counter medications that were no longer on the formulary due to OTC status. There is exploration into data from the division and AON regarding re-visitation of the plan design to address situations where there may be a medical situation.

PRESENTATION: HORIZON

Binsy Francis spoke for Horizon regarding a follow-up to the Horizon behavioral health presentation. Commissioner Zaynor noted that there had been a behavioral health subcommittee that was formed, but did not have an opportunity to meet yet. It was stated that between the report from Horizon, the presentation from Rethink Benefits and the subcommittee they were making progress but still collecting information. It was asked to be noted by Commissioner Keyes-Maloney that there be a discussion regarding telemedicine in regards to behavioral health after the health crisis is over. It was noted.

OTHER

It was noted that Hetty Rosenstein had resigned from her position, and Jenelle Blackman would be taking the position.

Adjournment

Having no further action to discuss, Commissioner Holmes made a motion to adjourn. Commissioner Zaynor seconded. The board approved. The meeting concluded at 2:41 pm.

Respectfully Submitted,



Nicole Ludwig
Acting Secretary SHBP PDC