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, Star Ledger and the Trenton Times on December 26, 2020. Updates regarding the Telephonic meeting was sent to the Secretary of State on April 19, 2021, and posted to the Division’s website on June 11, 2021.

The meeting of the State Health Benefits Program Plan Design Committee of New Jersey was called to order on Monday, September 22, 2021 at 1:00 p.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. Mrs. 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)
Patrick Nowlan, AAUP – AFT
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
Tennille McCoy, Assistant Commissioner of Human Capital Strategies, Department of Labor and Workforce Development
Kimberly Holmes Assistant Commissioner /Chief of Staff, Department of Community Affairs
Robert Little, AFSCME Department of Research
Jenelle Blackmon, New Jersey Area Director, CWA/District 1
David Krueger, NJ FMBA
Also Present:
Alison Keating, Deputy Attorney General
Nicole Ludwig, Division of Pensions and Benefits
Ted Holden, Wondr Health
Dave Rexcoat, Wondr Health
Elissa Baker, Wondr Health
Lacy Livingston, Wondr Health
Paul Eberle, Optum RX
Steve White, Optum RX
Kate Miller, Optum RX
Ian Carucci, Aetna
Mary Carr, Aetna

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

PRESENTATION: WONDR HEALTH

Dave Rexcoat, Elissa Baker, Ted Holden and Lacy Livingston gave a presentation about their program, Wondr Health, which is the leading digital behavioral program aimed at treating the root cause of chronic disease, which starts with weight loss. A team of clinical experts built the program for the health care space, and teach the user skills and behaviors for healthy and sustainable relationships with food as well as areas of life that impact eating habits, such as stress and sleep. The return on investments has proven to be not only financial, but emotional with an increase in confidence and how the user feels about themselves, improving an overall quality of life. The program teaches the user these skills, helps them implement them in daily life and then maintain them.

Co-Chair Keyes Maloney asked how many members per SHBP and SEHBP have used the program. Mr. Rexroat advised that 23,900 member in total, but do not have a breakdown at the moment, but will provide it later. Committee Member Nowlan asked if the contract was with the State directly or a contact with Horizon BCBS. Mr. Rexcoat advised that they deliver the program through Horizon and they are contracted, and the State pays the fills and the contract, with no additional cost to the member.

Committee Member Nowlan asked how the program shares information with the member’s primary care physician or specialist who might be advising them, so there is now conflict of medical advice, particularly if the member has a condition that would be impacted by their advice. Mr. Rexcoat advised that from the first week the member is encourage to speak to your doctor about the program and the advice, particularly if they have any condition that could be impacted. Mr. Holden added that in the application process, it is asked if the member has any particular condition, and that they are not replacing the advice of their doctor.
Committee Member Nowlan asked if there is a resource for members when they do not reach their weight goals or struggle with setbacks. Mr. Rexcoat advised that is a key component of the program, and has clinical psychologists who teach coping skills and focus on mental wellbeing that ties to overall health.

Committee Member Lyons wanted to address the financial costs to the Division, from the Division side, and noted that the program should have been voted on by the PDC. He noted that while he supports the program, supports a focus on nutrition, and this should not be taken as his desire to end the program, it should not have been implemented without a PDC vote. Co-Chair Keyes-Maloney advised she could advise how the contractual relationship came about off line.

PRESENTATION: OPTUM RX

Paul Eberle, Steve White and Kate Miller presented from Optum for the twice-yearly formulary and utilization management for January 1, 2022. They sought to present the upcoming changes and impacts to the SHBP membership. Ms. Miller, clinical consultant, presented regarding four brands (Adderall XR, Advair Diskus, Apriso and Lialda) were moved to Tier 1, because they were found to have generics that were priced higher than brand-names. Those brands will behave as generics in terms of coding and member experience (co-pay), and a medical necessity review would be available to any member who requires the generic.

Ms. Miller continued the presentation with a review of Albuterol inhalers, which had begun in 2020 but was placed on hold due to pandemic demand. As the supply chain stabilized and there are a variety of generic inhalers available. She advised that it would be minimally disruptive as most member already made the shift to generic throughout 2020 and 2021.

Ms. Miller advised that several new generics launched in 2021, and the formulary would update to reflect this and the generic alternatives would be preferred. Some would have step-therapy for select. While it may appear disruptive, it was noted that the majority of member will transition naturally when the generic launched, but they did not have an option up until this point. The step therapy will help ensure members who are able are using the lowest net cost most clinically appropriate products.

Mr. Eberle presented that members impacted by these changes would receive mailings, and would comply with the 60-day advance notice mailing requirements.

Co-Chair Zanyor asked if there was an approximation of how many of the exclusions have a comparable covered drug or an OTC equivalent. Ms. Miller advised 100 percent have a comparable covered alternative. Committee Member Nowlan asked if there as another notice, after the 60-day notice, before the new plan year starts. Mr. Eberle advised that there was not an additional notice, but the system would be able to catch a member with an effected drug within 120 days, and they would have a member services option to accommodate anyone who was not captured through that system. Mr. White advised that contract with the Division requires a 60-day notification, but they will work with the division to review if another notice is needed.
UPDATE: 2022 CDT DENTAL CODES

Mary Carr and Ian Carucci from Aetna spoke regarding Current Dental Terminology updates for January 2022. These codes are used by the American Dental Association as a way for dentists to communicate with insurance companies as a way to bill, to avoid confusion and receive claims. They went through a description of codes that were deleted and replaced for clarity.

Co-Chair Zanyor asked if any of the changes would potentially cause a cost increase to members. Mr. Carucci advised that the codes would not affect cost, but would give better options to the dentists.

UPDATE: RX SUBGROUP

Co-Chair Keyes-Maloney advised that the committee is continuing work, and had questions that needed to be directed back to the Division. They are preparing for a more robust conversation at the subcommittee level, and hoping for something for the full Committee level around October.

DIVISION UPDATE

Nicole Ludwig from the Division of Pensions & Benefits provided an update regarding COVID-19 as it relates to the commercial population. She advised that vaccines are covered under medical as well as prescription benefits, and Everside Health and Sanitas Medical Centers of New Jersey (previously Paladina) two of the primary care medical home vendors, were approved to administer the COVID-19 vaccine and have vaccines in stock. Any eligible SHP member can get vaccinated through these partners, provided they meet vaccine eligibility requirements.

Mrs. Ludwig stated that from March 2, 2020 to the week of September 12, 2021 there have been over 1,017,025 CVID tests with approximately 131,293 being positive, which is a 12.9% positivity rate. There have been 109,523 antibody tests with 7,484, which is a 6.8% positivity rate. For the Medicare Advantage population, through Aetna, from Match 1 through August 20, there have been a total of 117,426 tests performed on 45,331 claimants. There is a lag in these results as they come from CMS. The Division will provide updated information as it becomes available.

According to Horizon’s data, there have been almost 4,000 cumulative admissions from March 2, 2020 through September 12, 2021. The total costs for services have been approximately $4,164,241. For medical claims only, the total cost was $65,697,772 for 48,804 claimants. The SHBP has 178,905 full vaccinated members, approximately 38.18 percent of the population. There are 19,082 members who have received the first dose of the two dose regimen which is about 5.65 percent of the population. Aetna’s data is pending as it does come from CMS and there is a lag in the information.

Committee Member Zanyor asked if there could be a cost breakdown of all expenditure and how the Division pays for the Wondr Health program, so they could be sure that the payment is appropriate. He also asked for a review of how the program was added without going through the committee. He added, on another note, that there was a complaint against Horizon for not following through on metrics with members and was put in pending status. Co-Chair Keyes-Maloney advised that action would be taken through the Division, and if necessary, legal counsel.
Committee Member Nowlan asked to clarify that 38% of the population that were noted as vaccinated were only members who were asked to show their insurance card. Mrs. Ludwig advised that the Policy and Planning teams were working on an outline, and would be able to clarify if that population is only people who had to present Horizon/Optum card, or if there was additional data about members who used other insurance coverage for their vaccine.

**Discussion: Other Business**

Co-Chair Keyes-Maloney acknowledged that Committee Member Dini Ajmani, Assistant State Treasurer would be leaving the Committee. She was vital to the work and efforts of this group and the Division of Pensions and Benefits, and her expertise knowledge and tenacity would be missed. Committee Member Lyons echoed his appreciation and wished her the best.

Committee Member McCoy asked if there had been any updates of return to work on the planned date of October 18th, 2021, and how COVID tests for employees would be paid for. Co-Chair Keyes-Maloney advised that was an active conversation outside of the PDC and Division of Pensions and Benefits.

**Adjournment**

Having no further action to discuss, Committee Member Nowlan made a motion to adjourn. Committee Member McCoy seconded the motion; all voted in favor. The meeting concluded at 2:21 pm.

Respectfully Submitted,

Nicole Ludwig
Acting Secretary SHBP PDC