



**MINUTES FROM THE HEALTH POLICY & PLANNING SUBCOMMITTEE
TO THE STATE EMPLOYEE BENEFITS COMMITTEE
DECEMBER 5, 2019**

A meeting of the Health Policy & Planning (“HP&P”) Subcommittee to the State Employee Benefits Committee (the “Committee”) was held Thursday, December 5, 2019 in the Large Conference Room of the Statewide Benefits Office (“SBO”), 97 Commerce Way, Dover, Delaware 19904

Committee Members Represented or in Attendance:

Director Faith Rentz, SBO, Department of Human Resources (“DHR”) (Appointee of DHR Sec. Johnson), Chair
Ms. Victoria Brennan, Sr. Legislative Analyst, Office of the Controller General (“OCG”) (Appointee for CG Morton)
Mr. William Oberle, Delaware State Trooper’s Association (Appointee of the DSEA, Jeff Taschner)
Ms. Judi Schock, Deputy Principal Assistant, Office of Management & Budget (“OMB”) (Appointee OMB Dir. Jackson)

Subcommittee Members Not Represented or in Attendance:

The Honorable Colleen Davis, State Treasurer, Office of the State Treasurer (“OST”)
Ms. Molly Magarik, Deputy Secretary, Dept. of Health and Social Services (“DHSS”) (Appointee of Sec. Walker)
Mr. Tanner Polce, Policy Director, Office of the Lt. Governor (Appointee of Lt. Governor Hall-Long)
Mr. Stuart Snyder, Chief of Staff, Department of Insurance (“DOI”) (Appointee of Commissioner Navarro)

Others in Attendance:

Ms. Leighann Hinkle, Deputy Director, SBO, DHR	Ms. Thuy Nguyen, Member of the Public
Mr. Kevin Fyock, Willis Towers Watson (“WTW”)	Ms. Paula Roy, Roy Associates
Ms. Jaclyn Iglesias, WTW	Ms. Christine Schiltz, Parkowski, Guerke & Swayze
Ms. Julie Caynor, Aetna	Ms. Martha Sturtevant, Executive Assistant, SBO, DHR
Mr. Walter Mateja, IBM Watson Health	Ms. Meg Williams, Delaware Healthcare Association
Ms. Jennifer Mossman, Highmark Delaware	

CALL TO ORDER

Director Rentz called the meeting to order at 1:02 p.m.

APPROVAL OF MINUTES –DIRECTOR FAITH RENTZ, CHAIR

The minutes were tabled due to lack of quorum.

DIRECTOR’S REPORT – DIRECTOR FAITH RENTZ, CHAIR

Subcommittee/Committee Updates

The Financial Subcommittee met the morning of December 5th to review FY19 incurred and High Cost Claimant (“HCC”) data. At the December 16, 2019 SEBC meeting, the Committee will review executive summaries for both incurred and HCC data and consider the Proposal Review Committee’s recommendation for supplemental benefits. An Executive Session is also planned to continue discussions on health care contracting.

PRIMARY CARE – MRS. JACLYN IGLESIAS, WTW

The Subcommittee continued discussions on ways to expand access to care. The Subcommittee expressed interest in learning more about how enhanced telemedicine offerings, and third-party vendor-provided primary care clinics could improve primary care capacity in Delaware. Further evaluation is needed to evaluate the feasibility, timeline, and costs of both options.

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The Subcommittee reviewed the goals and findings of a 2017 Request for Information (“RFI”) regarding third-party employee-sponsored clinics. Responses were received by 11 vendors, a fair representation of the marketplace.

Two-key variables identified in the responses were the contract review process and requirements of the build-out process. Most vendors were receptive to a partnership with the State but varied in level of support to be provided.

Cost estimates for key parameters (e.g. scope of services, staffing models, hours, etc.) had a wide variability, between \$4.3-22.4M over the first three years. Estimates exclude build-out costs.

Estimated savings were not directly comparable across vendors due to variability in the underlying assumptions. WTW calculated a potential Return on Investment (“ROI”) using a consistent set of assumptions and methodology, estimating a range from \$1.5M in net cost to \$13.0M in net savings. Several providers declined to estimate savings without more information on claims data.

There was a discussion regarding estimated ROI. Vendors were given flexibility to respond with their recommended approach and assumptions. The RFI intentionally did not provide parameters in order to allow for feedback on best-in-class practices, to test the market for information and to explore all potential alternatives.

The Committee’s decision on how to proceed with further evaluation of employer-sponsored clinics rested on several factors, primarily funding. Further dialog on this topic was tabled until the SEBC met in January 2018. Based on feedback from the Committee and consistent with the GHIP Strategic Framework, goals were proposed to expand access to care, improve quality of care and reduce total cost of care, however the topic was tabled again due to competing priorities. The Committee did not address operating parameters, sources of funding, or oversight considerations.

The Subcommittee discussed the value on investment and the need to refine design scenarios. Upfront investments are anticipated, but a healthier population will lead to net savings long-term.

Mr. Oberle is an advocate for onsite facilities but would like to refine costs estimates before being presented to the SEBC.

There was a discussion regarding a pilot program that would utilize a third-party shared clinic model where the vendor assumes all build-out costs.

Ms. Brennan queried alternate design options, such as a mobile van, preventative screenings, or other cost-effective alternatives. She would like to see data that supports the need and anticipated utilization of onsite/near-site clinics.

Dir. Rentz expressed concerns that mobile clinics could further fragment care but noted that progress being made regarding information sharing makes it a viable option.

The spectrum of shared clinic models has developed since the RFI. The Subcommittee would like more information on options for employee sponsored care and are open to additional vendor presentations, including Cerner and American Well as early as the January 9, 2020 Subcommittee meeting.

Members discussed advanced telehealth technology to expand access to care, and the efficacy of using telehealth to treat for episodic and preventive primary care. There is an opportunity to set best practice standards in primary care by setting objectives and goals that measure and evaluate for long-term impact to wellness.

R-Health Follow-Up

Follow-ups from R-Health were circulated. R-Health recommends a shared risk approach with a guaranteed minimum number of participants.

Members discussed the opportunity to connect potential vendors with other employers to improve competition and build-out a shared network.

There was a discussion regarding where to target employer-sponsored clinics. There is critical mass in higher concentrated areas, but Delaware's rural areas have sparse participation and PCP access is limited. Ideally there would be a mix of both.

Members requested examples where states have partnered with other entities, and more information regarding the process. Ms. Iglesias will provide more information.

STRATEGIC FRAMEWORK –DEPUTY DIRECTOR LEIGHANN HINKLE, SBO, DHR

SBO is compiling outcomes data as it relates to the GHIP Strategic Framework initiatives to be presented at the SEBC meeting December 16, 2019. The Committee will also review an outline of proposed updates to the SBO Strategic Framework, including goals to improve engagement, member education, and outreach.

OTHER BUSINESS

No new business.

PUBLIC COMMENT

No public comment.

ADJOURNMENT

A MOTION was made by Ms. Brennan and seconded by Mr. Oberle to adjourn the meeting at 2:04 p.m.
MOTION ADOPTED UNANIMOUSLY.

Respectfully submitted,

Martha Sturtevant, Statewide Benefits Office, Department of Human Resources
Recorder, Statewide Employee Benefits Committee