Health Benefits Committee

(Studies the manners and mechanisms to provide cost-effective and fiscally sustainable benefits to the Peralta community of active employees, retired employees and their eligible dependents)

October 13, 2016

Agenda

- Announcements: Benefits Office
  - CalSTRS Collaboration
  - CalPERS Contributions
  - Forward Questions/Topics for Spring 2017 Survey
- Dependent Eligibility Audit (DEA), Benefits Office and Alliant
  - Timeline
  - Outreach Efforts
  - Outreach Results
  - DEA FAQ’s
- Fiscal Update: Benefits Office
  - Benefits Revenues
- Wellness Programs: Alliant In
  - Top 10 Chronic Conditions
  - Top 5 Medical Groups
  - Wellness Programs (Kaiser Permanente & CoreSource
  - Health Risk Assessment (CoreSource)
- Upcoming Events-Help us help you!

Announcements/Questions Received

1. CalPERS contributions, How are they made?

2. CalSTRS collaboration-upcoming quarterly workshops hosted at the District for ALL CalSTRS members

3. Questions for Spring Survey; send your survey questions for upcoming surveymonkey for February 2017

Dependent Eligibility Audit (DEA)

October 13, 2016

Dependent Eligibility Audit (DEA) Timeline
Update from 9/8/16 meeting

What: Dependent Eligibility Audit

Who: All Peralta active and retired employees who had a dependent enrolled in a Peralta group-sponsored medical and/or dental plan on or before 6/30/16

Why: The purpose of this audit is to confirm the continuous eligibility of dependents covered under a group insurance plan sponsored by the District.

- **The last audit was performed in 2014.**
- **We have requested that CoreSource perform this audit for all Peralta medical and dental plans.**
  - All employees and retirees covering a dependent will receive a request for information if they had a dependent on the plan on or before June 30, 2016.
- **Key Dates & Timelines**

Initial announcement from Vice Chancellor Week of 9/9 → Home mailing week of 9/16/2016 → Response due **11/11/2016** → Confirmations mailed and reminders mailed - Ongoing → Dependents enrollments ends due to no or incomplete response 12/31/2016

- **Who do I contact with questions? Question regarding…**
  - Documentation, verification of receipt of your information, to request a duplicate packet or to clarify documentation to be submitted, then contact CoreSource:
    - Dependent Eligibility Audit experts: DependentAuditsBalt@coresource.com or 866-434-1211
  - Benefit plan features or the reinstatement process, then contact the Peralta District Benefits Office:
    - Staff Assistant Ronnie Roberts McCain: benefits@peralta.edu or 510-466-7229
    - District Benefits Manager Jennifer Benford Seibert: jseibert@peralta.edu or 510-587-7868
- **Facts and considerations**
  - According to the CoreSource proposal, the average annual dependent cost $4,000 even if the dependent does not use the plan;
  - Our self funded plans (PPO Lite and PPO Traditional) are exempt from lifetime maximums for active employees; stop loss limit is $225,000.
  - Prescriptions are about 1/3 of our overall medical expense
  - The Affordable Care Act requires that we report the value of insurance on IRS Form 1095 (aka the healthcare W-2.

Request to Committee Representatives (reference emails from 10/12/16)

Supplement District communication efforts by communicating to your constituent groups

DEA Outreach Efforts

The CoreSource and Peralta Benefits teams have been diligently reaching out to both the active and retiree population of Peralta Community College District.

Date	Type	Nature/Message	Audience
9/8/2018	Meeting	Announcement to the committee	Benefits Committee
9/9/2016	US Mail	Announcement of audit	All benefit eligible employees and retirees
9/16/2016	US Mail	Actual audit materials	Only employees and retirees with a dependent
9/30/2016	US mail	Reminder to non-respondents	Non respondents
9/12/2016	Email	Announcement of audit	Peralta Announcements and Benefits Homepage
9/21/2016	Email	How to request a duplicate message	Peralta Announcements and Benefits Homepage
10/3/2016	Email	Reminder of upcoming deadline of 10/11	Peralta Announcement
9/9/2016	Web update	DEA packets available for download	Open to the public
10/8/2016	Email	**Deadline extended to 11/11**	Peralta Announcements and Benefits Homepage
10/10/2016	Email	**Deadline extended to 11/11**	Peralta Retirees Organization List Service
10/12/2016	Email	**Deadline extended to 11/11**	Each group represented on the Health Benefits Committee (Local 39; PFT, Local 1021, Managers & Confidential, Retirees
10/24/2016	US mail	Second packet to non respondents as of 10/14	All open audits
11/1/2016	Phone calls	Follow up calls from the Benefits Office	All open audits
Open Audits:	Audits that were mailed and address either has not sent documents or have only partially satisfied the documentation requirement		

US mail is the official communication method. The District engages many other forms of outreach

DEA Outreach Results
(as of 10/11/16)

To date, there has been a significant response to the Dependent Eligibility Audit (DEA) from both employees and retirees.

# of Packets Mailed	# of Packets Received	Remaining
899	288	609

Packets are generated by the DEA team within 24 - 48 hours upon request

DEA FAQ's

Dependent Eligibility Audit (DEA)
Frequently Asked Questions - 17-20
A supplement to FAQ's 1-16 distributed on September 9, 2016
Special note: this document will be included with next home mailing to open audits

17. **I am just hearing about the audit or am just receiving my audit packet. What's this about a deadline?**
The DEA deadline was initially set as October 11, 2016 and has been extended to November 11, 2016.

18. **Why am I sending documents to CoreSource if I am enrolled in Kaiser, Delta Dental, or United Health Care?**
CoreSource is our audit administrator for all Peralta medical and dental plans. A dedicated team of experts supports this District-wide effort. The team provides on-going notifications to each employee/retiree included in the audit. We have partnered with their audit services for three bi-annual audits.

19. **So, how do I ensure uninterrupted coverage for my eligible dependents?**
Step 1: You collect dependent verification documents:
   1. Personalized Dependent Coverage *Summary*
      a. call CoreSource at 866 434 1211; or
      b. email DependentAuditsBalt@coresource.com
   2. Applicable documents as noted on the *Required Documentation Matrix*

Step 2:You forward the **Summary**, **Documents** by one of the following methods:
   1. By United States Postal Service **mail**:
      (You can use the pre-addressed and postage-paid envelope included with your packet
      Dependent Eligibility Audit packet)
      CoreSource-Peralta Community College
      P.O. Box 44257
      Nottingham MD 21236 9935

   2. By **fax** to 888 298 2065

20. **How will I know if my documentation process is complete or incomplete?**
You will receive confirmation that your documents are accepted and the verification process is complete, (or in some cases, more information is needed) within a week of your submission to our audit team.

As stated at the onset of the 2016 Dependent Eligibility Audit, please be assured that the purpose of this audit is not to drop coverage for any family members that meet the plan definitions for eligibility. However, these audits generally find a significant number of dependents that do not actually meet the plan definitions and should be removed from the plan. We realize that, in the majority of situations, the ineligible dependent(s) is covered due to an oversight. For example, you may have forgotten to update your benefit information following a divorce or marriage.

This audit allows the District to:
- *update our dependent information while ensuring that both the District and our employees are not paying higher costs because of dependents that should not be covered under the plan.*
- *provide accurate enrollment information for our upcoming Other Post-Employment Benefits (OPEB) study.*
- *ensure that the IRS reporting forms 1095A 1095 C as required under the Affordable Care Act reflect the correct coverage levels and associated costs*

10/13/16

Benefits Office

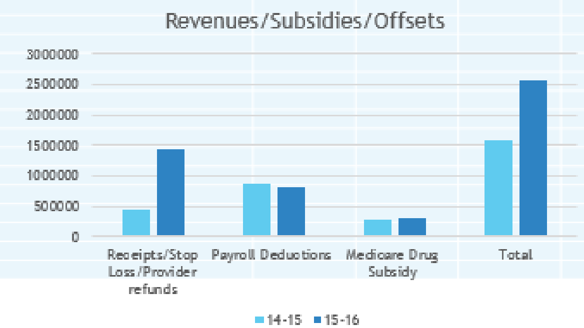
October 13, 2016

Benefits Office Revenues
(Fiscal Years 2014 through 2016 & YTD 2016-2017)

2016-2017 YTD Receivables	**$428.509.25**

Benefits Office Revenues 2014-2016

	2014-2015	2015-2016
Receipts/Stop Loss/Provider refunds	$442,886	$1,442,029
Payroll Deductions	$871,520	$812,843
Medicare Drug Subsidy	$283,382	$313,249
Total	$1,597,788	$2,568,121



Wellness Initiatives

October 13, 2016

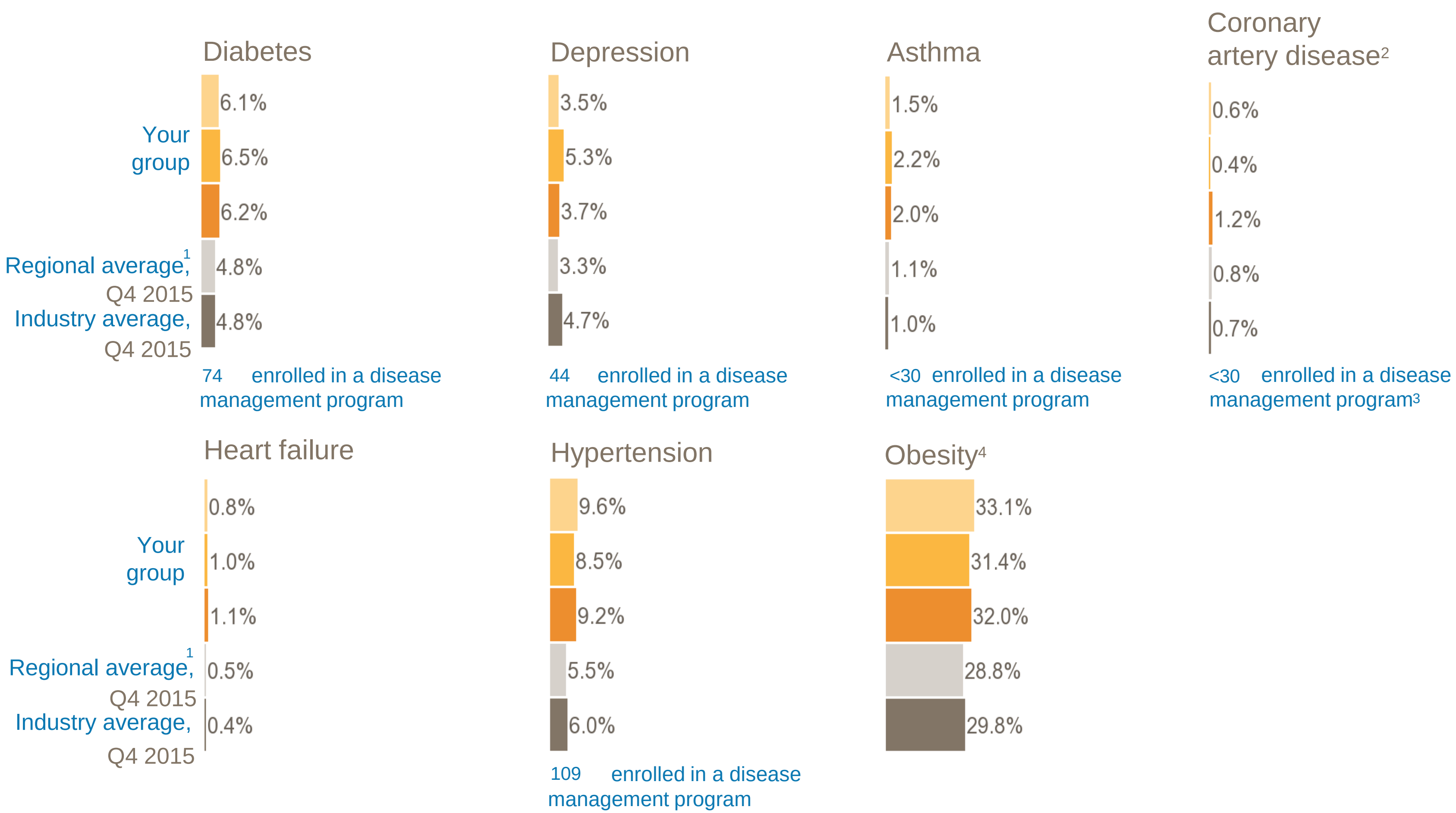
Top 10 Chronic Conditions & Top 5 Medical Groups
(CoreSource – active/retirees & dependents)

Conditions
RADIOTHERAPY
MULTIPLE MYELOMA NOT HAVING ACHIEVED REMISSION
MALIGNANT NEOPLASM OF TONSIL. UNSPECIFIED
HISTIOCYTIC SARCOMA
ABDOMINAL AORTIC ANEURYSM. WITHOUT RUPTURE
ENCOUNTER FOR ANTINEOPLASTIC CHEMOTHERAPY
SPINAL STENOSIS OF LUMBAR REGION WITHOUT NEUROGENIC CLAUDICATION
ATRIAL FIBRILLATION
MALIGNANT NEOPLASM OF OVERLAPPING SITES OF LEFT BRONCHUS AND LUNG
MALIGNANT NEOPLASM OF COLON. UNSPECIFIED

Medical Groups
Sutter Health
John Muir Medical
UCSF
Alta Bates
Stanford Medical

Chronic Conditions
(Kaiser-active employees and dependents only)

Peralta Community College | Measurement period: Jan-1-2015 through Dec-31-2015



Wellness Programs
(CoreSource)

Existing Programs
Self-directed Online Coaching • Eat Healthier • Deal with Stress • Quit smoking
Lifestyle Programs

Wellness Programs
(CoreSource)

YourCARE

2016

YourCare Employee Communications Calendar

January
It's YOUR New Year – time for a new you?
Make this year different –
Evaluate what is important to you.

February
Overcome bad blood
Learn why it's important to know your blood pressure and why high blood pressure is considered the silent killer.

March
Colorectal Cancer Awareness
Get informed on reducing the risk and early detection of this cancer that can affect men and women.

April
Get busy with your active self
Move and Make it Matter!
Discover the importance of fitting exercise into your lifestyle.

May
Get right on portions
The New American Plate:
Understanding Portion Control

June
Take care of yourself with healthy eating
Break through potential barriers that prevent you from choosing to eat healthy.

As part of YourCare's focus on employee engagement, CoreSource makes it easy for you to deliver education to your employees on a different health and wellness topic each month—along with a YourCare message that you can customize. Not only do health plan members get important information in an easy-to understand format, but they learn about YourCare resources designed to help them reach their personal health goals.

These monthly employee communications are available from your Client Manager or from our YourCare employer microsite. They can be e-mailed to your employees, posted on your company's intranet, and/or displayed in your office or at company events. You may choose to follow the schedule in the calendar provided here, or decide to send any of these topics at a time that works best for you and your employees.

CORESOURCE
A Trustmark Company
PERSONAL FLEXIBLE TRUSTED

July
Save your own skin
Learn the facts about skin cancer, what to look for and steps to take to prevent it.

August
Sleep better, live better
Quality sleep is important, so how can you get more of it?

September
Do a # on cholesterol
Cholesterol lowdown
High blood cholesterol is a major risk factor for heart disease.

October
Clean your bill of health
Learn about breast cancer risk factors, screening recommendations and how to reduce your risk.

November
Health is wealth
In the month of the Great American Smokeout, get ready for change and take steps to learn how to quit.

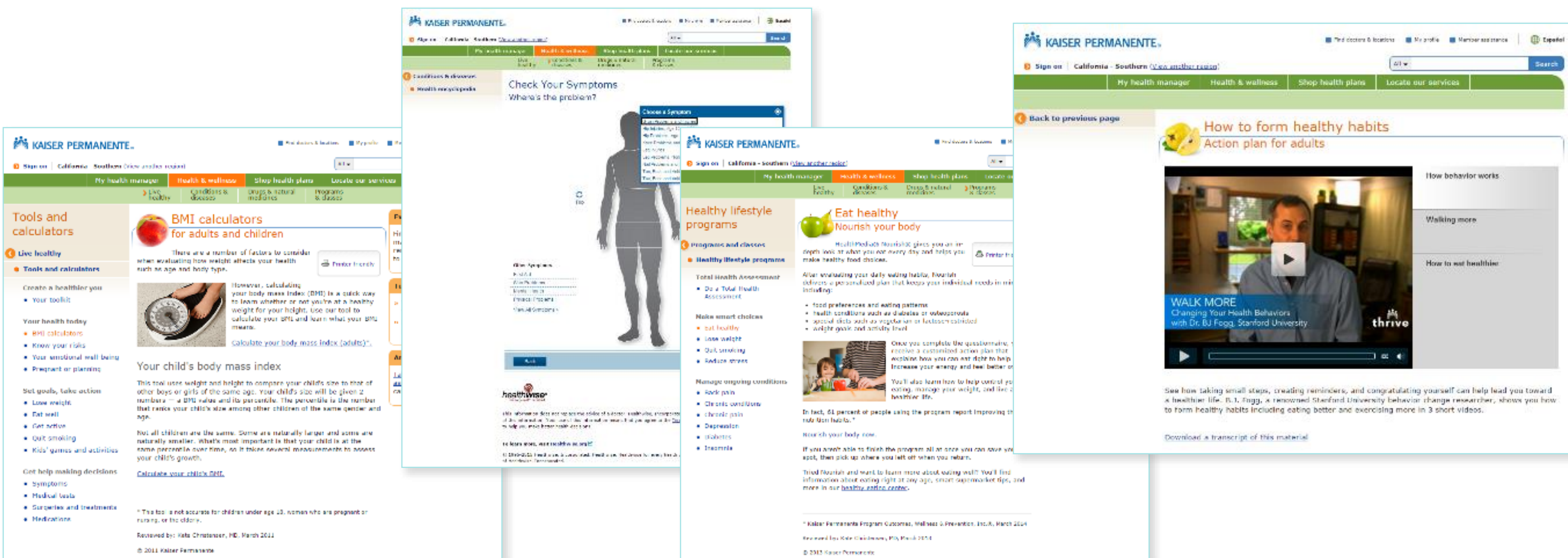
December
Live Large in the present
Give yourself the gift of staying active this holiday season

Wellness Programs
(Kaiser)

kp.org: A hub for managing health

Tools and resources for members

- ✓ Total Health Assessment
- ✓ Health and drug encyclopedias
- ✓ Symptom checker
- ✓ Healthy lifestyle programs
- ✓ Health videos
- ✓ Total Health Radio online radio show and podcast



 October 13, 2016

Health Risk Assessment - 2017 Launch
(CoreSource)

Launching a Health Risk Assessment Campaign

YourCARE

A health risk assessment (HRA) is a tool used to assess employees' health behaviors and how well they meet current "good health" recommendations. It provides participants with immediate, personalized feedback. Because it is a valuable tool, a campaign to encourage HRA participation is key.

Target audience for an HRA

All employees can benefit from taking an HRA. It provides individuals with the opportunity to gain knowledge of their current health and lifestyle risk factors, while providing the organization with aggregate reporting on overall employee risks.

Benefits of conducting an HRA campaign*

HRAs can:

- Allow an employee the ability to monitor his or her health over time, providing motivation for lifestyle changes
- Provide important information concerning employees' readiness to change
- Help employers measure and monitor the health of their overall employee populations
- Provide employers with important information that can help them build results-oriented health promotion programs
- Allow employers to evaluate changes in health behavior and health risks over time
- Engage both employers and employees in the health management process

What does the HRA provide to the *Your*Care program?

The HRA provides an opportunity for individuals to assess their health status and the lifestyle choices that influence their health and well-being. This comprehensive tool asks a series of questions covering smoking, safety, stress, nutrition, physical activity, prevention and health history. The HRA also evaluates certain biometric measures, including weight, height, blood pressure, blood cholesterol and blood glucose.

A confidential, personalized report is automatically generated and provided to employees using a secure Internet protocol. Participants' reports include summaries of their results, as well as suggested action plans and resources to help them better manage their health behaviors and risks.

Timeline for launching an HRA campaign**

An HRA can be taken at any time. It is recommended that you hold an annual HRA campaign to re-evaluate and update participant information and to help you continually gather information to strengthen your health and wellness program.

Suggested Timeline:

- 14 weeks prior to HRA launch – Select your incentive (if applicable).
- 12 weeks prior to launch – Create your communications campaign/plan.
- 8 weeks prior to launch – Finalize and distribute your initial communication announcing the program. This should include the purpose of the HRA, how long the assessment takes to complete, and language regarding confidentiality and privacy of individual data. Information about any incentives should be included in the announcement, as well as how they are awarded.
- 1-4 weeks prior to launch – Send a follow-up e-mail to remind employees about the upcoming HRA campaign details.
- HRA launch day – Send eligible employees an e-mail with instructions on how to access and complete the HRA.
- 1-2 weeks after the HRA launch date (depending on the length of your HRA campaign) – Send a reminder e-mail to the eligible employees, reminding them to complete the HRA including the deadline for completion.
- One week before the end of the campaign – Send a final reminder e-mail to those who have not yet completed the HRA.
- 1–2 months after HRA is completed – Review aggregate report (if applicable) and decide what health promotion programs you may want to implement.

* Hunnicutt, D. (2008). The Benefits of Conducting A Personal Health Assessment. WELCOA's Absolute Advantage, 7(7), 2-9.

** Hunnicutt, D. (2008). 12 Steps To Successfully Implementing Your Health Risk Appraisal. WELCOA's Absolute Advantages, 7(7), 21-33.

Upcoming Events-Help us help you!

October 13, 2016

Next Meetings & Share the Information

Email me your agenda items at least 3 weeks in advance of each meeting. In some cases research may be required.

Next Meetings:

- ✓ December 8, 2016
- ✓ January 31, 2017

Share the Information

Remind your constituents of upcoming events as noted on previous slide

- ✓ Dependent Audit-Now through November 11, 2016
  - ✓ Audience: All employees and retirees covering a dependent
- ✓ Flexible Benefits Enrollment November 1 – 31, 2016
  - ✓ Audience: Active employees
  - ❑ For calendar year 2017 plan participation
  - ❑ IRS Flexible Benefits Plan 125 enrollment
- ✓ 8th Annual District-Sponsored Medicare Open Enrollment Campaign 2/1/17
  - ✓ Audience: retirees and/or soon to be retirees and or eligible dependents
  - ❑ Social Security, CoreSource, CalSTRS, Kaiser are all invited to attend
  - ❑ We need PRO volunteers to make outgoing calls in February and March

Medicare Enrollment Campaign 2017

8th Annual Medicare Enrollment Campaign
Wednesday, February 1, 2017
9:00am – 11:00am
PCCD Boardroom
Retirees and Active Employees are Welcome.
Come and Bring a Friend or Caregiver.

You may benefit from these informational sessions if you are
- ✓ already 65 or
- ✓ reaching 65 during calendar year 2017 or
- ✓ considering separating from Peralta employment

Time	Topics
9—10	**Planning a Peralta Retirement?** • During this workshop we will cover •What happens to medical coverage •What dental coverage options are available •The timeline for effecting a Peralta retirement & more!
10—11	**Medicare, Peralta & You** → How, when and why enroll in Medicare → What are the different Medicare Programs A-D? → What a Peralta retiree should know → What survivors of a Peralta retiree should know

Invited Guests Include:
Kaiser Permanente, CareSource
Social Security/Medicare Administration
Pension Dynamics
The Peralta Benefits Office
There will be on-site assistance with Medicare and/or
Kaiser Senior Advantage Enrollment!

Lite refreshments will be provided!
Event Proudly Sponsored by the
Peralta District Benefits Office