



Janet T. Mills
Governor

**STATE OF MAINE
STATE EMPLOYEE HEALTH COMMISSION
61 State House Station
Augusta, ME 04333-0061**

Jonathan
French
Labor Co-Chair

Heather Perreault
Management Co-Chair

STATE EMPLOYEE HEALTH COMMISSION MEETING

**Thursday, November 16th, 2023 @ 8:30am
Microsoft Teams Meeting**

Burton M. Cross Building
111 Sewall Street
Room 103, A and B
Augusta, ME 04330

Commission Members in Attendance: Olivia Alford, Diane Bailey, Lois Baxter, Lynn Clark, Kevin Dionne, Claire Bell, Kelly John, Rebekah Koroski, Lew Miller, Heather Perreault, Heidi Pugliese, Joanne Rawlings–Sekunda, Kim Vigue and Frank Wiltuck
(Total = 13)

Commission Members Absent: Cecile Champagne-Thompson, Laurie Doucette, Jonathan French, Shonna Poulin-Gutierrez, and Chris Russell
Vacant Seat(s): 5

Others Present: Devon French, Joan Hanscom, Charles Luce, Roberta Dupont, Nathan Morse, Paige Lamarre and Emma-Lee St.Germain – Employee Health and Wellness; Breena Bissell – Bureau of Human Resources; Kevin Fenton– Aetna; Jennifer Webber, Stefanie Pike, Kristine Ossenfort, and Becky Craigie – Anthem Blue Cross and Blue Shield; Libby Arbour and Baylee Doughty – MCD Global Health; Aja Tufts Godbout and Judy Paslaski – MedImpact; Marie Bridges – Northeast Delta Dental; Amy Deschaines, Edward Pierce, Terry LaMonica, and Kim Greenberg – Lockton; Ariele Worrall – Strength in ME

Agenda Item	Discussion	Action/Next Steps
I. Call Meeting to Order (8:32am)	Heather Perreault called the meeting to order.	
II. Introductions		
III. Review and Approval of Minutes (September 21st, 2023)		Rebekah Koroski made a motion to accept the September 21 st ,2023, minutes; Clair Bell seconded the motion. Motion passed.
IV. Recurring Monthly Business		



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<p>a. Open Discussions/Questions on Vendor Reports – All</p>	<p>Information contained in written report; highlights and discussion noted below:</p> <ul style="list-style-type: none"> • There were no items brought to the commission. 	
<p>b. Employee Health and Wellness Highlights – Shonna Poulin-Gutierrez</p>	<p>Information contained in written report; highlights and discussion noted below:</p> <p>Medical Highlights-Anthem-</p> <ul style="list-style-type: none"> • <u>Top Chronic Conditions with Behavioral Health Comorbidities (10/2022 – 9/2023)</u>: The top chronic conditions with behavioral health comorbidities include: <ul style="list-style-type: none"> ○ Obesity ○ COPD ○ Congestive Health Failure ○ Low Back Pain ○ HIV ○ Asthma ○ Cancer <p>We saw that 30.2% of members with mental health diagnoses have another comorbidity and are costing 2 to 5 times more.</p> • <u>Primary Care Provider (PCP) (10/2022 – 9/2023)</u>: Members without a PCP had a lower compliance for cancer screenings, 73% of members had a PCP visit and 43.8% of 18–26-year-olds plan members did not visit with a PCP. <p>Medical Highlights-Aetna-</p> <ul style="list-style-type: none"> • <u>Top 3 Diagnoses – Claims Paid (8/1/2022 – 7/31/2023)</u>: The top 3 diagnoses for Aetna for 8/1/2022 through 7/31/2023 include: <ul style="list-style-type: none"> ○ Cardiac: \$13,982,740 total paid ○ Oncologic: \$12,180,984 total paid ○ Musculoskeletal: \$10,746,580 total paid • <u>Top Five Providers (8/1/2022 – 7/31/2023)</u>: The top five providers for the period of 8/1/2022 through 7/31/2023 are: 	<p>Olivia Alford asks: Can we get a list of who the DHHS Wellness Ambassadors are?</p> <p>Frank asks: Is there a way to have a reactionary look for the people who have PTSD as well as preventative options – is there an outreach we can do to show them there are resources available?</p>



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- Maine General Medical Center
- Maine Medical Center
- Northern Light Eastern Medical Center
- Central Maine Medical Center
- Penobscot Bay Medical Center

Dental Highlights-

- Utilization Summary (11/1/22 – 10/31/23): The top 4 services utilized by employees are Diagnostic and Preventative, with \$3.8M in paid claims (52.78%), Basic Restorative, with \$2.2M in paid claims (30.43%), Major Restorative, with \$888K in claims paid (12.20%), and Orthodontics, with \$334K in claims paid (4.59%).

Pharmacy Highlights-

- KPI Summary – Q3: For 2023 there was a prescription count of 62,763, with a total cost of \$19M. Member utilization is at 38.3% with a plan paid, per member, per month of \$230.06. Generic prescriptions were at 82.1% and generic substitutions were at 95.8%.

Medicare Advantage Renewal Update-

- Medicare Advantage Plan: Aetna will continue administering the Medicare Advantage Plan. Plan coverage will remain the same as of January 1, 2024, and there will be a rate decrease. Aetna Medicare Advantage monthly premiums as of January 1, 2024, for part A + B is \$156.40, and for part B only is \$715.58. Annual notice of change and update will be released on our website.

Wellness Highlights-

- Vaccination Clinics: As of 10/31/2023: 83 clinics completed, 3 upcoming clinics, 1,914 Flu shots administered, 838 COVID-19 vaccines administered.



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- 2024 Health Premium Credit Program: As of 10/31/2023: 922 self-entered flu shots, 218 self-entered "My Numbers", 600 self-entered annual physical exams, 361 self-entered well-being visit, 2,705 completed Wellness Questionnaires, and 2,513 completed the PCP resources video/quiz.
- Health Navigation Appointments: As of 10/31/2023 there have been:
 - 16 upcoming events
 - 20 dates completed
 - 138 participants to date
 - 121 appointments available
 - 32 people with an upcoming appointment scheduled

Communications Highlights-

- 2024 Health Premium Credit Program (HPCP): A postcard was mailed, and a statewide email was distributed to all active employees in early September to promote the launch of the 2024 HPCP launch. Communications also included website updated and a constant contact email. Communications will continue to go out through the program year.
- Home Mailers: Hinge Health distributed a promotional flyer mailer to all plan subscribers in late September. Carrum Health distributed a promotional/pilot reminder mailer to all plan subscribers in early October.
- Constant Contact: The following Constant Contact were sent out in the months of September and October 2023 –
 - 2024 Health Premium Credit Program Launch, with 9,886 recipients and an open rate of 52%.
 - Hinge Health Promotion, with 9,865 recipients and an open rate of 51%.
 - Breast Cancer Awareness Month, with 11,538 recipients and an open rate of 35%.
 - Teledentistry/Delta Dental, with 9,911 recipients and an open rate of 38%.

Contract Highlights-



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- Contract Highlights: Both the Wellness Administrator and Pharmacy Benefit Manager (PBM) are currently out to market.

V. QUARTERLY PLAN UPDATES

**a. State of Maine Dental Plan |
Northeast Delta Dental –
Marie Bridges**

Highlights and discussion noted below:

- Utilization Summary: Total claims paid for the reporting period of 11/01/2022 through 10/31/2023 are \$7.28M, an increase of 6.73%. The average enrollment was 13,271, an increase of 1.88%, and the total claims paid were 50,838, an increase of 3.78%. The claim costs per subscriber were up 4.76% as well as the claims per subscriber, up 1.87%. The average claim cost was \$143.23 with the average cost per employee per month being \$45.72.
- Claims Comparison Report: Services provided for the reporting period of 11/01/2022 through 10/31/2023 were Diagnostic and Preventative, with a claim total of \$3.84M, Basic Restorative and Endodontics, with a claim total of \$1.61M, Periodontics, with a claim total of \$268K, Oral Surgery, with a claim total of \$331K, Prosthodontics, with a claim total of \$239K, Major Restorative, with a claim total of \$648K, and Orthodontics, with a claim total of \$334K.
- Claims Utilization: Total claims utilization for the reporting period of 11/01/2022 through 10/31/2023 include the following-
 - Diagnostic and Preventative – Claims total, \$3.84M, with 79,416 procedures paid.
 - Basic Restorative and Endodontics – Claims total, \$1.6M, with 10,985 procedures paid.
 - Periodontics – Claims total \$268K, with 2,901 procedures paid.
- Experience with Member Counts: For the reporting period of 11/01/2022 through 10/31/2023 the total billed was \$7.9M, with a total claim count of 50,838 and total claims paid of \$7.2M. There were 13,271 total subscribers.
- Network Utilization and Savings Report: For all Provider Networks, total utilization shows total submitted at \$19.3M, with a total allowed of \$10.96M and total claims paid were \$7.28M. The total number of claims was 50,838. The Network Discount Summary shows total network discounts of \$8.4M.
- Oral Wellness and Utilization Summary: Dental benefit utilization shows that there were 13,176 members receiving Oral Evaluations, 13,635 members

Olivia Alford asks: Has there been any discussion around using more standardized measure for reporting?

Amy Deschaines responds: I will use this as a takeaway and work with Shonna Poulin-Gutierrez, Maria Bridges, and my team to work on this.



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	<p>receiving cleaning and 6,445 members receiving no care at all. In addition, there were 9,022 members who had HOW Clinical Risk Assessments, of which 8,342 qualified.</p> <ul style="list-style-type: none"> • <u>Oral Wellness Overview</u>: The majority of employees seen for their oral wellness (8,498) were considered "Low-Risk." There were 4,656 members who were considered "Moderate-Risk," and 2,490, that were considered "High-Risk." • <u>Member Oral Health Trends</u>: Favorable trends show 4,828 Members were Low Risk for two years in a row (56.81% of Low-Risk members), while unfavorable trends show 4,088 Members had No Care for two years in a row (63.43% of No-Care members). • <u>No Care</u>: A total of 6,445 member did not receive dental services the majority of which were subscribers. • <u>HOW Clinical Risk Assessments</u>: The number of Non-qualified Risk Assessments was 680, while the total number of members who qualified for Risk Assessments was 8,342. 	
<p>b. Plan Experience Summary Active Medical and Dental – Lockton – Amy Deschaines</p>	<p>Highlights and discussion noted below:</p> <ul style="list-style-type: none"> • <u>State of Maine Health Insurance Admin Payments</u>: • <u>State of Maine Experience Detail – Self Funded Medical</u>: State of Maine is running at 86% for the month of July with a surplus of \$2.9M and we have received a pharmacy rebate of \$3M. Year to date we are running at 100% and at budget and are looking at a trend increase at minimum at potentially 6% to 8%. Claims over stoploss in the current plan year we do not have anyone who has hit \$750K or more, however there were \$382K in claims. There are 6 claimants at \$275K or more, which is up 3 from last year. We have a lot more claim activity below the \$275K threshold. • <u>State of Maine Experience Detail – Self Funded Dental</u>: The surplus deficit total for claims through September is \$131K and the State of Maine is running at 93.7% in actual vs. accrual. 	
<p>c. Medicare Advantage Plan – Aetna – Kevin Fenton</p>	<p>Highlights and discussion noted below:</p> <ul style="list-style-type: none"> • <u>You Member Demographics</u>: Currently Aetna has 9,067 State of Maine members with an average age of 75.2 – of which 49% are male and 51% are female. 	<p>Olivia Alford asks: Do you have a way to see the average wait time for people using telemedicine?</p> <p>Kevin Fenton responds: I can see if there is a way to track that.</p>



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- Measures Showing Most Significant Change: There has been an increase in inpatient admissions by 8.5%, as well as an increase in inpatient surgery by 17.3%. There was, however, a decrease in ambulatory surgeries by -2.2%.
- State of Maine Aetna Medicare Advantage Cost Results: Inpatient and pharmacy paid are the main contributors to the overall spend. In the prior year the inpatient paid amount per member was \$2,808, and the current year it was \$3,221. Pharmacy paid amount per member has increased by 19.4%.
- Your Utilization Results: This year there were 137 acute admissions, and increase of 8.5%, and for non-acute admissions there was a significant increase of 84.3%.
- Medical Catastrophic Claims over \$75,000: Inpatient catastrophic claims paid totaled \$11M+, while ambulatory totaled \$11.7M+ this past year.
- Primary and Specialist Physical Office Visit Utilization – Parts A and B: We are seeing the utilization down a bit. Seeing a reduction across the board was surprising and we will continue to keep an eye on it.
- Telemedicine – Parts A and B Plan: The paid amount for Telemedicine in the current year is down -16.5% at \$395K. As we come out of the pandemic more people are visiting the doctor’s office in person, so the utilization has gone down. There were 244 viral visits done virtually which is up since last year and we expect that to continue to go out. The other diagnosis seen via telemedicine we are hoping to see a stabilization.
- Your Top 3 Diagnoses: The top 3 diagnoses are Cardiac, with 14.9% total paid (\$13.9M), Oncologic, with 13% total paid (\$12.1M) and Musculoskeletal, with 11.5% total paid (\$10.7M).
- Your Top 3 Providers: The top 3 providers for 2023 were MaineGeneral Medical Center – Augusta Campus, with 10.5% total paid, Maine Medical Center, with 8.7% total paid, and Northern Light Eastern Maine Medical Center, with 5.6% total paid.
- Top 3 Part A and B Prescription Drugs Filled: Of the top drugs filled, 50% were specialty drugs, representing 41 members. The top 3 drugs filled are Eliquis, with 2,658 scripts, Trulicity Injectable, with 803 scripts, and Jardiance with 840 scripts. Currently as of July 2023, there are 9,561 eligible member and 1,993 enrollees with 401 people actually participating.
- The State’s Part B Only Pharmacy Utilization: The number of enrolled members in 2023 was 9,049 with 8,740 identified as utilizing members. There were 150K scripts written , and 1,894 specialty scripts.

Joanne Rawlings-Sekunda asks: Does the CAPS survey cover that?

Kevin Fenton responds: It might, I can check. If so, I can incorporate that going forward.

Heather Perreault asks: One of the complaints we hear is the availability of gyms. Do we have any updates on facilities potentially contracting with silver sneakers?

Diane Baily states: I agree – lack of gyms is our biggest complaint.

Kevin Fenton responds: We can approach them again and reach out.



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- Top 3 Part B Only Prescription Drugs Filled: The top 3-part B only prescription drugs filled in 2023 were Eliquis, with 8.5% total cost, Trulicity Injectable, with 3.8% total cost, and Jardiance, with 3.3% total cost.
- Silver Sneakers Results: There has been a slight increase in members since the pandemic, however we are still below book of business.
- Medicare News: Each year, the Medicare Part B premium, deductible, and coinsurance rates are determined according to provisions of the Social Security Act.
 - The standard monthly premium for Medicare Part B enrollees will be \$174.70 for 2024, an increase of \$9.80 from \$164.90 in 2023.
 - The annual deductible for all Medicare Part B beneficiaries will be \$240 in 2024, an increase of \$14 from the annual deductible of \$226 in 2023.

d. State of Maine Health Plan | Pharmacy Update – Med Impact – Judy Paslaski and Aja Tufts Godbout

Highlights and discussion noted below:

- Performance Review: The cost has increased \$15 per member per month, and this is due to brand name drugs.
- Specialty Overview: Specialty per member per month is up just 2.7%, \$121.30 for this reporting period. The 52.7% of our total expenditures is for specialty plan paid. We are seeing the top chronic condition is obesity.
- Specialty Trend, Utilization and Cost: There have been \$9.5M spent on specialties.
- KPI Summary – State of Maine Q3 2023 vs Q3 2022: We are down about 1000 scripts despite the fact that there are 439 more eligible members.
- Top 3 Retail Chains: The top 3 retail chains are Walgreens with a utilizer count of 5,060 (% Plan Paid 26.31%), Hannaford Food and Drug with a utilizer count of 4,457 (% Plan Paid 26.02%), and CVS with a utilizer count of 2,093 (% Plan Paid 14.39%).
- Top Therapeutic Classes: Diabetes and Obesity are currently driving use of brand name medication.
- Top 3 Drug Entities for the State of Maine: The top 3 drug entities for the State of Maine in 2023 were Stelara, with a prescription count of 64 (% Plan Paid 8.5%), Humira(CF) Pen, with a prescription count of 157 (% Plan Paid 8.3%), and Ozempic, with a prescription count of 554 (% Plan Paid 3.6%).



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- Top Therapeutic Classes By Plan Paid – Diabetes: The top drug classes and drugs in therapeutic classes for Diabetes are Ozempic, with a prescription count of 554, Humalog, with a prescription count of 140, and Jardiance, with a prescription count of 372.
- Top Therapeutic Classes By Plan Paid – Weight Reduction: The top drug classes and drugs in therapeutic classes for weight reduction Wegovy, with a prescription count of 403, Contrave, with a prescription count of 10, and Orlistat, with a prescription count of 1.
- Glucagon-like peptide-1 (GLP-1) Increased Utilizer: There was an increased utilizer count for GLP-1 drugs in Q3 of 2023, with 754 individuals using the drug for diabetes and 200 using the drug for obesity.
- Glucagon-like peptide-1 (GLP-1) Increased Plan Paid: There was an increase plan paid for GLP-1 drugs with \$1.8M plan paid for diabetes and \$681k plan paid for obesity.
- Formulary Strategy Update – GLP-1 Medications: Effective January 1, 2024, approval of GLP-1 medications (Byetta, Bydureon, Trulicity, Rybelsus, Ozempic, Mounjaro, Victoza) will require a diagnosis of Type 2 Diabetes as this is the only FDA approved indication for these medications. If a diagnosis cannot be confirmed at Point of Sale via an ICD-10 code, a manual Prior Authorization (PA) will need to be submitted by the pharmacy/provider to confirm diagnosis via clinical review. Due to the rampant off-label use of these medications and subsequent skyrocketing costs to plans, the industry is moving to this requirement to ensure appropriate use.

**e. State of Maine Health Plan |
Medical Update – Anthem –
Stefanie Pike**

Highlights and discussion noted below:

- Financials and Demographics: Membership and paid about by relationship shows not much has changed – 56% of the membership is employees. Subscribers, members and total paid by month show a decrease by 13%.
- Enrollment: Enrollment in Q3 of 2023 shows a membership increase of .3% and 26k members. The average age of members is 49.5 with 51.8% of members being female and 41.2% being male.
- Total Population Health: Currently the focus on keeping low risk members healthy to help control long term healthcare costs. Currently, 41.2% of members are considered "healthy," 6.4% of members are considered "at risk," 40% are considered "chronic," and 3.3% of members are considered Critical.

Olivia Alford asks: Going forward, is there a way to identify crisis services and how does our plan cover crisis services from a medical perspective?

Joanne Rawlings-Sekunda asks: Will you also be tracking how long it take for someone to get a starting appointment?



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- Executive Summary: Encouraging Primary Care Provider (PCP) visits can help members become more proactive in their healthcare. Currently 73.2% of members are visiting their PCP's.
- Monthly Summary: As of September 2023, medical spend is down 13% from August 2023 sitting at \$14.3M. Total per member per month was \$556.33.
- Insights on Medical Trends: Per member per month spend increased 6% in the current period. This was driven by a 7% increase in HCC spend and a 22% increase in Injury & Poisoning spend.
- Place of Services: Inpatient spend increased 19% per member per month while Outpatient spend decreased -1% per member per month. Emergency spend increased 15% per member per month and Professional spend increased 5% per member per month.
- Non-High-Cost Claimant Top 5 Condition Categories: Obesity is top rising condition, and we will be changing our reporting methodical to reflect that. Non-High-Cost Claimants represented 97% of member and the highest spend category was Health Status.
- High-Cost Claimants (Medical): Currently, 40% of member have a chronic condition which accounts for 61% of total spend. Consider implementing wellness initiatives or incentives that target healthy eating, exercise, and stress management.
- Behavior Health: Behavioral health accounted for 6% of spend (5% prior) and 21% of membership.
- Behavioral Health Comorbidities: Currently, 30.2% of members with a behavioral health diagnosis have at least one other chronic condition and 2x-5x patients with medical and behavioral condition comorbidity cost 2 to 5 times more and are less compliant with key condition management actions (e.g., medication compliance, etc.)
- Primary Care Provider: This past year 73% of members had a Primary Care Provider (PCP) visit, while 74% did the previous year. Of the individuals meeting with their PCP's, 69% were male and 77% were female.
- Preventative Care: Screening rates have increased in the current period for both Well Visits and Cancer Screenings.
- Engagement: Member engagement shows .9% of members connecting in a traditional way, 24.9% connecting through care coordination, and 93.5% connecting through comprehensive channels.

Stefanie Pike responds: I can outreach to our provider – they would be the ones to track that. I will get a report from them.

Olivia Alford asks: I want to understand what our plans for coverage for crisis services is.

Stefanie Pike responds: We can get you more information on that.



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- Top 3 In-Network Facility Providers: The top 3 providers for 2023 were Maine Medical Center, with \$12.8M in total paid, MaineGeneral Medical Center, with \$5.8M in total paid, and Northern Light Eastern Maine Medical Center, with \$5.6M in total paid.
- Top 3 Emergency Department Providers By Paid Amount: The top 3 providers for 2023 were MaineGeneral Medical Center, with \$2.6M in total paid, Maine Medical Center, with \$1.7M in total paid, and Northern Light Eastern Maine Medical Center, with \$935K in total paid.

VI. EDUCATION

a. Wellness Wallet/Thrive Pass – Nathan Morse and Lockton; Kim Greenburg and Terry Lamonica

Highlights and discussion noted below:

- Current Gym Reimbursement Benefit: The current Gym Reimbursement Benefit is focused on gym/fitness memberships only; virtual fitness, group exercise are not included. There has been low historical participation and utilization; and costs have been less than \$100k over last two years.
- Why Offer a Wellness Wallet: Employees highly value lifestyle spending accounts, with benefits including increased employee satisfaction, retention and attraction, and productivity. There is an opportunity to streamline administrative burden for the State and it also addresses key population health opportunities.
- Wellness Wallet (Pilot) - In Partnership with ThrivePass: Wellness Wallet in conjunction with ThrivePass offers a holistic digital lifestyle spending account (ThriveAccount) with 100+ spending categories and a marketplace with discounted services and products with a reimbursement option, marketplace option as well as administrative and engagement support for members.
- Wellness Wallet: Phase I Pilot Overview: The Phase I Pilot has a population focus of 500 employees, with a 6-month timeframe (July-December 2023), an incentive value of \$200 per employee and a budget of \$110K.
- Wellness Wallet: ThrivePass / State of Maine Approved Categories: The approved categories for Wellness Wallet are Healthy Eating, Emotional, Financial, Alternative Health, Health, and fitness.
- Defining Pilot Success: Metrics for success include streamlined administration, increased participation, and support for the State of Maine Brand.
- Phase I Pilot Outcomes: Administration: Currently there is an increased administrative time required for execution of the Gym Reimbursement



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program. While the ThrivePass Wellness Wallet implementation required increased administrative time, during the execution phase the administrative time averaged 2 hours/week. In comparison, an average of 5 hours/week is generally required to administer the Gym Reimbursement program. A greater number of State of Maine employees support the Gym Reimbursement program. Up to 80 payroll employees support the Gym Reimbursement program 4x/year, as compared to 5 employees providing support for Wellness Wallet intermittently, as needed.

- Phase I Pilot Outcomes: Participation and Interests: Currently, 287 of 500 employees participated to-date; 57% participation rate. There's been an average of \$177.34 out of \$200/participation redeemed; 89% funds/participant redeemed, and the top redemption categories included athletic gear and home gym equipment; 70% of redemptions made in the ThrivePass Marketplace.
- Phase I Pilot Outcomes: Employee Satisfaction: To date, employees have expressed a lot of excitement for this program.
- Next Steps: Long term goals include launching new offerings to the full eligible population in January 2025, promoting enhanced benefits with greater choice to increase employees' attraction and retention, and comparing engaged versus non-engaged cohorts to evaluate risk migration overtime related to condition prevalence, EAP visits, Worker's Comp claims, healthcare spend, etc.

VII. SEMI-ANNUAL UPDATES

a.	Highlights and discussion noted below: <ul style="list-style-type: none"> • There is no Semi-Annual update this month. 	
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VIII. OTHER BUSINESS

a. Upcoming Plan Design Committee Meeting	Highlights and discussion noted below: <ul style="list-style-type: none"> • This item was not discussed during this meeting. 	
b. Open Discussion	Information contained in written report; highlights and discussion noted below: <ul style="list-style-type: none"> • There were no items brought to the commission. 	



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IX. REQUEST MOTION TO ADJOURN

**a. X. Adjourn Meeting
(12:01pm):**

Frank Wiltuck made a motion to adjourn; Lois Baxter seconded the motion. Motion passed.

2023 meeting schedule available at www.maine.gov/bhr/oe