

**Clackamas County
Benefits Review Committee
Meeting Summary for April 17th, 2025**

This document is intended to be a meeting summary.

Attendance and Minutes:

Voting Members Present: Cheryl Bell, Cynthia Kodachi, Phillip Mason-Joyner, Paula McDonald, Ryan Miller, Greta Nickerson, Jon Santana, Sandra Montoya, Ron Wierenga, Rachelle Bonsi, Cynthia Boettcher, Alex Gonzalez, Rob Sadowsky, Gretchen Pacheco

Voting Members Not Present: Nancy Bush, Calley Dean, John Lee, Deena Mehdikhan, Bob Skinner, Fred Yungbluth

Minutes: Toni McGarvey

Facilitator: Cynthia Kodachi

Introductions:

- Nancy Pionk - BRC Facilitator

Attendance:

- Attendance taken. Quorum present.

Providence: Performance and Experience Report

Presenters: Katie Justice Gallacher, Dr. Laurel Soot, Matthew Roos

MEDICAL

1. Benchmark used for reporting is book of business (all clients combined)
2. Experiencing an increase in cost across entire book of business
3. Increase in utilization of telehealth services
 - Positive – Clackamas utilization running above benchmark
4. Emergency room utilization running right at benchmark – would like to see this trending below by seeing an increase in clinic visits over emergency room for urgent care
5. Chronic conditions – increase in spending as chronic conditions are identified and monitored through primary physician visits.
6. Behavioral health – destigmatization means more employees taking advantage of services
 - Depression and behavioral health go hand-in-hand. Depression directly affects the spend on medical services.
 - Chronic medical conditions untreated have direct correlation with depression and other behavioral conditions.
 - Regular doctor visits and supervision, and access to targeted treatments, helps mitigate
7. Other factors such as chronic pain, hyperlipidemia, joint degeneration can affect mood and depression
8. 26% of members are currently enrolled in a behavioral health plan
9. Routine exams are the #1 touch point for targeted intervention in cases where there are several conditions presenting
10. High claims – 3% of members drove 40% of cost
 - All high claims are carefully reviewed by a staff physician for final approval of tx

PHARMACY

1. Seeing positive uptick in generic usage
2. Use of specialty drugs lower than benchmark
3. Pharmacy spending is flat – positive
4. 70% of members are on a prescription
5. Clackamas county is 1.7 million in pharmacy spend dollars returned to us in rebates
6. Anticipated lower infusion costs as members are navigating to lower sites of care

HIGH SPEND – GLP1 (WEIGHT LOSS)

1. Obesity is a top 10 condition and interacts with many other diagnoses and conditions
2. GLP1s have a cost and supply problem
3. GLP1s must go hand-in-hand with long term lifestyle management

Ben:

- As a cardiology nurse, seeing great results with lifestyle management model
- Lack of access to txs, medication and screenings, as well as high cost makes tx unaffordable and inaccessible to many
- How can the county get into the process earlier to provide enhanced support to our employees?

Dr. Soot:

- Confirms cost in this arena is very high
- A patient must be on a lifestyle management tx plan with medication for three years to experience benefits
- Commitment to stick with it must be supported by lifestyle management to truly support the patient

Ben:

- How does the county begin to participate, maybe have an opt-in with a higher co-pay? Participants committing to pay a portion or more to be able to participate?

Dr. Soot and Keith:

- This will be an area to keep our eye on and keep talking about each year during the renewal cycle. Data still coming in and it might be premature to add to our plan at this time.

QUESTIONS:

Cheryl:

- Health Coaching – Can I be sure that the health coaching is 1) trauma informed?, and 2) culturally appropriate?

Dr. Soot:

- Yes, the healthcare management team works with a lense on trauma. Coaching is designed for total wellness and the member receives screening to inform how they will navigate through the coaching.

Cheryl:

- And are clinics including wrap-around care, particularly when seeking gender affirming care?

Dr. Soot:

- Yes, and providers are specifically identified. In closing I will mention that the county pays for health coaching, but we are not seeing much engagement in the program.

COLLECTIVE HEALTH PARTNERSHIP

- Katie with Providence: Exciting new partnership providing a new interface for members and enhanced technological features.
- Goals of the program are help educate our employees/members with enhanced information and easy navigation. All info in one place with ease of access to mitigate stress when accessing.
- Alex: As new items come up maybe pick a topic (such as this) which comes up in the BRC and continue discussion through posting in the weekly county newsletter.
- Rachel: Does this partnership create an additional layer of pre-authorization for the employee?
- Dr. Soot: Utilization will be handled by Collective Health, but the interface with services, support and benefits is defined by Providence who will provide all the follow up, service support and ongoing oversight. The experience for the member should be seamless.
- Alex: Even so, this is a change that will need to be managed with careful communications to employees.
- Dr. Soot: We will work with you to identify any "sore spots" for the members prior to launching. We will have more information coming that will provide clarity.

BREAK

Delta Dental: Utilization Report

Presenters: Tami Long

DENTAL UTILIZATION

1. Benchmark used for reporting is peer group (public entities)
2. Small increase in claims over last year
3. 84% total membership (increase from 78% last year)
4. Consistently performing utilization above peer group
5. Slightly higher enrollment of families in the 40-59 age group
6. Slightly less in the 19-26 age group
7. Increase in xray services. This may be due to the every two years appointment schedule.
8. Increase in endodontics
9. Targeted communications go out from Delta Dental to those members not seen as utilizing services

Cynthia: Can you provide us a breakdown for each plan level showing utilizers vs. non-utilizers. This will help the Benefits Team talk members through selecting the best plan for them.

Member Reports:

1. Alex: Hearing from members that Kaiser scheduling on Fridays is still almost non-existent
- Booking is three months out at best
2. Keith Storie: Will add these comments to share with Kaiser. Rob's survey responses have been parsed as well and sent to Kaiser (by Mercer) to discuss during a future meeting.

Meeting Adjourned:

Cynthia Kodachi adjourns the meeting

Next meeting: May 15th, 2025 – In-Person PSB Conference Room 369A/B