

## Benefits Committee Meeting Minutes

October 27, 2015, 9:30-11 am OHR 220

**Attendees:** Jason Freeman (chair), Raquel Lieberman (vice chair), Wayne Book (retiree rep), Brandon Conkle (OHR), Michael Elliott, Leslie Hall (Staff Council Representative), Tommy Little (Staff Council Rep.)

**Absent:** Stella Richardson (Secretary), Michelle Powell (Executive Board Liaison), Decker Onken (student representative), Kim Harrington (Director, OHR)

### ADMINISTRATIVE

The minutes of the September 29<sup>th</sup> meeting were approved at the end of this meeting with one change - Doug Britton was added as having attended. The motion to approve was made by Tommy, seconded by Wayne, and the subsequent vote to approve was unanimous.

### UPDATES

#### **Discussion with GT Representative to the USG Total Rewards Steering Committee, Mark Braunstein**

Dr. Mark Braunstein joined the meeting via conference call due to time constraints on his end. As a result, Jason Freeman asked if it would be acceptable to jump right into discussion of the USG **Total Rewards Steering** Committee with Mark. The committee agreed, and Mark proceeded to provide a brief intro and background on his involvement with the USG committee.

- Dr. Braunstein is a physician by training – health informatics specialty, he has been at GT for 8 years serving as professor of practice in College of Computing
- He was asked to join this USG committee after a visit to this committee by USG Associate Vice-President of Total Rewards, Karin Elliot, on 02/10/2015, during which it was discovered that GT had no representative at the USG level
- He has also been appointed to wellness subcommittee that met over the summer
- There are representatives from several other institutions on the committee – mix of faculty and staff
- In Mark's opinion, this USG committee is not a policy making committee, but rather it seems to exist as a means for faculty to provide input, and for faculty to feel like they have input on the process
- Substantive decisions on policy appear to come from above and not originate in the committee
- He understands there have been significant concerns on the health plan changes for retirees, but there has not been much input solicited from the USG **Total Rewards Steering** committee on any of this
- In Mark's opinion, he does not see much evidence that the USG **Total Rewards Steering** committee has any substantive impact on policy

Jason then proceeded to outline some of the issues that faculty are facing with the new benefits programs.

## **Retiree benefits changes**

- Concern was expressed that the subsidy will be much less than in the past, and while these are currently not “too bad”, that these subsidies will be eroded over time. Mark agreed that this a reasonable concern in his opinion.
- Wayne expressed concern that it appears the total dollar amount (USG contribution) will be floating from year to year, with little consistency. The retirees that over the past 30 years, they have been subsidizing retirement benefits for previous retirees, but now when it is their turn, they are being cut loose.
- Mark indicated this is a national trend (shifting cost of benefits to the employee) and it is a business trend as well that appears to be purely financially driven.
- Wayne expressed concern that if you pick a plan this year from the exchange that best suits you, and then move to a different plan next year, it makes the retirees subject to added scrutiny regarding prior health history.
- Mark indicated that these are all valid questions. Will the subsidy remain fair over the next 30 years? He is not sure that it will remain fair – speaking from his own perspective.
- Tommy asked if Mark knew what President Peterson’s thoughts were on this new Health Benefit Program, but Mark indicated that he did not know.
- Jason mentioned that he does not see this as just a retiree issue, as the defined contribution model is being pushed down into the current employee plans now.
- Mark indicated that he had only been to three meetings, but the overall USG message is that the health care program is going well at all 30 institutions. He did say that he felt there was no guarantee that the USG contribution would fluctuate with the cost of health care.
- Tommy sought clarification, as based on prior communications, we were not aware of significant changes to current employee benefits plans
- Mark indicated that this was correct, that the biggest changes were for the retiree plan with the transition to the exchange.
- Wayne mentioned that when the Karin Elliott visited here, she did not tell us about all of the implications on the changing costs, and how these might fluctuate from year-to-year.
- Mark replied that this might be because they cannot make commitments for future years, but can only address the current year plans.
- Wayne asked if this is new exchange based health care program was good for retirees, then why is it not being rolled out for all current employees. However he did surmise that it sounds like this may be coming down the pipe for current employees anyway.
- Tommy indicated that this new health care program sounded like it is a done deal, and Mark agreed that it seems that way. However he is happy to express our opinions and views and take them back to the USG committee. He just doesn’t think much will happen, but he certainly wants to get our input to take it back to the USG committee.

## **Health and Wellness program**

- Jason raised the concern of potential bias against those who choose not to participate in some form of a health and wellness program.
- Others also expressed concerns about the use of employee data metrics being collected through the USG wellness programs, and raised questions about how that data would be used.

- Mark indicated that he does have knowledge about this program as he was on the committee that helped to put together the program. It is his understanding that the program was adopted as it was drafted, but he was not able to be at the meeting when this happened, so he did not get to hear any of the discussion.
- Mark stated that this program as it was drafted is a multi-year plan extending out to 2018, but there are no individual participation mandates or polices. The effort is more focused on programs to encourage more health/wellness: smoking cessation, exercise, biking, “take the stairs”, etc.
- Jason indicated that as it was presented to us, participants would have to go somewhere and have blood drawn, and other vitals collected as a condition of the enrollment/participation.
- Mark again reiterated that he had not heard any discussion of this as being mandatory for all employees, and Jason agreed that it was not presented to us as mandatory, but that if you did participate, and if you hit the target metrics that you would get a rebate of sorts the end of the year.
- Mark agreed that rebated idea is in the plan, but that the focus is really to try and get help for people with lifestyle health risks or who have chronic issues that with basic lifestyle and medical interventions could improve dramatically and reduce costs later on.
- There was some discussion regarding the difference between this and the current tobacco surcharge, and that a discount/rebate is essentially the same thing as a surcharge.
- Mark stated that in health care economics, it is almost always the case that a small portion of the demographics drives the majority of the costs. Examples were provided of Medicare, where they are trying to manage healthcare costs by addressing routine low risk diseases (diabetes, hypertension), but addressing these issues is not very profitable. Mark also gave example of Perdue Farms health care plan that reduced costs by 60% due to their aggressive (in a good way) health and wellness plan.
- Michael and others expressed concern was over the use of personal data as part of this wellness program.
- Mark replied that approximately 50% of physicians now work for a networked health care system, so this data is probably already out there in some form or fashion. Michael did mention that HIPPA is there to help protect individuals, and Mark agreed that HIPPA does have some significant penalties for data breaches, however physicians can use this data (with signed releases) for a variety of billing, and other diagnosis tasks.
- Wayne mentioned the concern that the control of the health care and wellness programs and now health data management is centralizing under the USG/BOR and moving away from the local campuses.
- Mark indicated that there is representation on the USG committee from several of the USG campuses, but then quickly followed up with the realization that many of the committee members are USG staff and only nine committee members are non-USG staff (and most likely campus representatives) out of a committee with 16 or so total members. Five of these campus representative are from the research universities.
- Tommy and Wayne both indicated concern that the Total Rewards program is not keeping up with other peer institutions benefits programs, and asked if there had been any discussion during these changes to the USG health plan (and the associated added costs for employees) of linking the USG contribution to cost of living increases.

- Mark replied that he had not heard any discussion on this at the committee, but the impression he received was that all of these kinds of decisions were being made at a higher level within the USG administration and not in the committee.

### **Items for Mark to take to the USG Health Benefits Committee & Other Discussions**

- Jason stated that we (the GT Benefits Committee) need to think about comments/requests/concerns we want Mark to take back up to the USG committee.
- Mark indicated that the next meeting would be November 13, and that he would be happy to take something back to the USG/BOR Committee
- Jason also suggested the idea of making Mark (and more generally his representative position on the USG Benefits Committee) an ex-officio member of the GT Faculty Benefits committee. Mark indicated that he would be happy to participate and that this kind of dialog was most helpful for him in representing the GT faculty.
- Doug mentioned that this GT committee would really like to get ahead of some of the decision making processes at USG so that we can have some input on the process before policies are set.
- Wayne did indicate that while it has been a big change, he did have a positive experience with the current health care exchange system.
- Tommy did want Mark to convey to the USG committee the concern that premiums for active employees are going up but salaries for staff are not, and that this is an issue for many of our lower paid employees.
- Mark summarized the issues he was going to take back as:
  - The salary/premium cost issue that Tommy raised
  - Concern about the uncertainty/fluctuations in out-of-pocket cost for retirees in the out years raised by Wayne
- Mark asked if there have there been any discussions more broadly with the other research universities regarding the feedback on some of the changes to the health care programs, and is there a unified voice among these communities? Jason said that no, there had not been any communication with the other institutions, at least not yet. Tommy added that this was something that Staff Council really wanted to consider doing.
- Jason cautioned that there can be an issue with running ahead of senior leadership at the institution with regards to this, so to be sure that communication is occurring up the chain here at GT as well.
- Mark reiterated that there is the need for the USG to understand the position of the research universities, and that they have specialized needs when it comes to recruitment and retention that may not be uniform across all USG institutions.

### **Discussion of GT serving as a testbed for health/wellness technology/tools**

- Mark wanted feedback on the idea of having GT serve as a testbed for trying some health/wellness related technology/tools. The objective would be to understand and capture various measurable outcomes. He wanted to know what the committee thought about this.
- Wayne thought it does make sense, and it follows a national trend of data driven health programs, but it could bring some backlash from faculty.
- Michael felt that this is the kind of research that shouldn't require a significant effort to do, but also felt that the BOR does not seem particularly receptive to this kind of approach of trying new programs in test environments and collecting data and information on them.

## **Post call discussions**

Mark's time had expired and he needed to leave the call, but the committee continued some of the discussions. Overall the committee agreed that Jason should invite Mark to attend the GT Benefits Committee meetings, and that this discussion was very helpful. In addition, the committee was intrigued that the link between the lack of cost of living salary adjustments and rise in health care premiums had not come up at the USG level. Brandon surmised that this could be because Karin Elliott and the committee do not have anything to do with compensation. Several echoed concern that eventually the USG might move all employees to health care exchange, and that Mark had indicated this was not out of the question.

Regarding the health and wellness program and Mark's question about leveraging GT as a testbed for data driven approaches, Doug mentioned that it is a fine line between opting in to support health care related research studies versus having that same data captured for use in putting together USG health care benefit programs. Brandon chimed in with the different levels of protections that are required by USG and GT of health benefits vendors. Jason made the distinction also between data being collected to help individuals improve health versus aggregating this data across the entire campus and then using it to set health care policy and establishing benefits.

Finally, Brandon stated that they are still working on the idea of establishing a minute-clinic on campus, and that this has actually been proposed as part of a west campus dining commons renovation plan.

## **Other Updates**

- Tommy provided a brief update on the election cycle for staff council, which had just completed vetting process for current candidates. Staff Council voting will begin soon and there are several seats being filled.
- Michael asked about the USG supplemental plans for retirees and Medicare Part D and how they compared. There was some discussion on the requirements to participate in Medicare Part A, as USG coverage becomes secondary at the point of retirement. Michael suggested that GT really needs to provide some real guidance/outreach for those who are over 65, but have no plans to retire regarding the information of options and things that need to be done in order to transition to the Medicare and other USG supplemental health care programs. One of the concerns was that without some discussion, folks would not even know what questions to ask.
- Brandon provided an update on Open Enrollment, which was opening on November 2. Several on the committee indicated that they had not yet received the packet from GT/USG describing the new benefits programs and premiums. Brandon indicated that this year employees would not be required to certify tobacco use, and that if the employees did nothing, the previous benefits elections would roll into 2016, with the exception of the Flexible Savings Accounts (FSA). Brandon mentioned that of the 17,000 retirees from USG, 4000 have already completed an enrollment option, and another 8000 have confirmed appointments, with no contact from the rest. The deadline for retirees to enroll is December 31.
- Tommy expressed concerns that some folks may not know what questions to ask, and Brandon indicated that HR would have someone help to discuss the benefits plans with the staff.

The remainder of the items on the agenda were tabled for consideration at a later date.

Prepared and Submitted by Doug Britton (filling in for Stella Richardson, Committee Secretary)