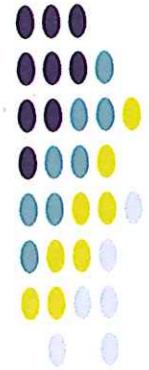


Health Benefits Fringe Committee Meeting

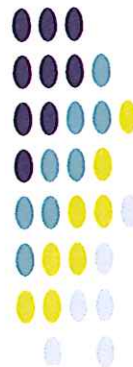
February 7, 2013
Board Room

Agenda



1. Housekeeping/Introductions/Sign in (Benefits Office)
2. Announcements
 1. Wellness Calendar
 2. Peralta @ Warriors Night 2 22 13
3. Open Enrollment 2013
 1. Benefits Fair on Tuesday, April 30
 2. Outreach available at any of your meetings if you coordinate the logistics and provide the Benefits Office sufficient lead time-for April scheduling
 3. Review the "Peralta Benefits Everyone" for feedback on information you want included in this annual publication. Need feedback by Friday, March 8, 2013-provide electronic markup, if you prefer.
4. Fiscal Cliff Update-Pre-tax commuter monthly contribution maximum has increased yet again from \$240 - \$245.
5. Newsletter topics for the February or March Newsletters? Deadline Friday, February 15
6. Review of Medicare Drive Strategy 2013-
 1. Annual re-affirmation of exemptions
 2. Acquisition of emails for retirees
 3. Personal Telephone Calls, appointments and correspondence
7. Joint Powers Authority Recommendation
8. PSW-Review of Health & Wellness Plan (PSW Benefits Resources)
9. Next Meeting & Other Topics?

Joint Powers Authority exploration outcomes and contribution factors



4. During the exploration, what did we learn?
 - 1 While we speak of JPA in terms of a shared risk pool, there are other similar types of arrangements to consider.
 - 2 CalPERS is a Joint Trust (JT)
 - 3 Joint Trusts, JPA's and the like can become insolvent
 - 4 We carry forward our Kaiser Renewal rates event if the JPA or JT rates are higher and we may therefore not recognize any savings.
 - 5 We are committed to the "train-in" rate
 - 6 We lose our flexibility on exceptional processes
 - 7 We lose our subsidies (ie Medicare D)
 - 8 Some partnerships will now allow cash in-lieu
 - 9 Some partnerships REQUIRE Medicare coordination without exception
 - 10 Cost savings is an outcome of which plan design with which we partner
 - 11 JPAs offer more than one-which would fit and help us reach goal
 - 12 We would incur old expenses on top of new expenses concurrently (\$1-2 m)
 - 13 ANYTHING ELSE needed as part of the feasibility study
 - 14 Impact of Patient Protection and Affordable Care Act Health Care Reforms unknown as exchanges are introduced
 - 15 Impact to Other Post Employment Benefits (OPEB) unknown
 - 16 We can join a partnership with or without a consultant or broker

5. WHAT MORE DO WE NEED IN ORDER FOR THE COMMITTEE TO MAKE A RECOMMENDATION?

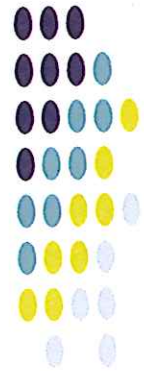
Peralta Community College District
Health Benefits Fringe Committee
Meeting-Thursday, January 10,
2013

10

Peralta Community College District
Health Benefits Fringe Committee
Meeting-Thursday, February 7,
2013

3

Joint Powers Authority (JPA) Different – A recap of the recommendation



Based on:

- ***background information provided at our October, November and December 2012 Benefits Fringe Committee Meetings,***
- ***looming Health Care Reforms and***
- ***prevailing union agreements and***
- ***current plan designs,***

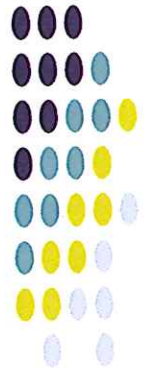
the following motion was carried forward from the January 2013 meeting:

“I motion that JPA consideration be tabled until the first meeting of this Committee in January 2014 with an understanding that our consultant will have an analysis for us at that time”

Moved by Jerry Herman, Second by Rick Greenspan, Carried without opposition

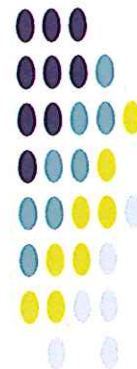
Wellness Campaign

2/5/13



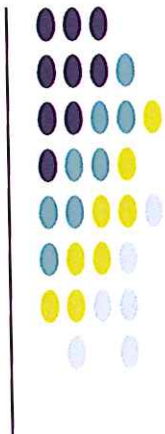
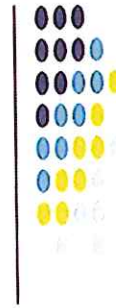
- Over 60 Flu Shots and wellness screenings delivered (55 screenings delivered in August 2012)
- 20+ attended the workshop
 - Prefer a save the date; then the week before reminder
 - Social Security/Medicare + Kaiser Senior Advantage discussed the A-B-C's & D's of Medicare – an hour long discussion
 - Spouses and caregivers were in attendance
- Workshop entitled “Understanding ElderCare Issues” was presented
- Special “Thank You” to our consultant PSW Benefit Resources for the lunch

Another Look at Wellness

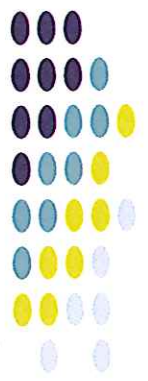


- Last review of wellness data was in April 2010, the year of the weight loss competition

A review of Health and Wellness - PSW Benefits Resources



1. Self-Funding
 1. Medical Wellness Claims Data through CoreSource
 2. At-A-Glance View of Chronic Conditions @Year End
2. Kaiser HMO :Prevention and LifeStyle Risk:
 1. Your results: overview
 2. Your recommended action plan
 3. Create a culture of health at work
 4. Use the tools included in your coverage
 5. More included programs and tools
 6. Broaden your reach with HealthWorks



PERALTA COMMUNITY COLLEGE DISTRICT
MEDICAL WELLNESS CLAIMS DATA THROUGH CORESOURCE
NOVEMBER 1, 2010 THROUGH OCTOBER 31, 2012

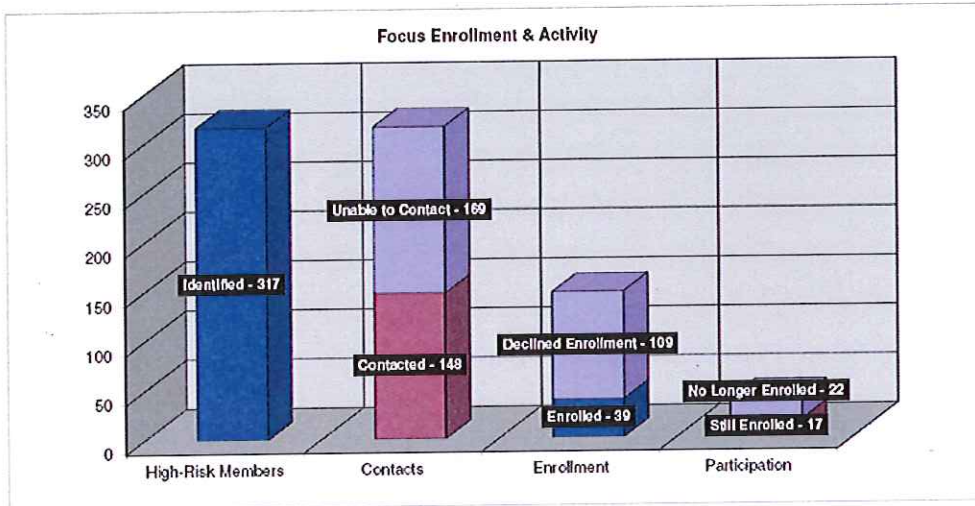
POPULATION BEING REVIEWED	DESCRIPTION	INDIVIDUAL		ACTUAL	ALL CORESOURCE NORM*
		TOTAL RELEVANT	NOT COMPLETED		
More than 50 years old	Patients without any Colorectal Cancer screening in the analysis period.	967	719	74.4%	75.8%
Men more than 50 years old	Men without PSA test in the last 2 years	400	262	65.5%	57.4%
More than 51 years old	Patients without Preventive Care Exam in the last 2 years	962	153	15.9%	26.9%
Women more than 49 years old	Patients without Colorectal Cancer screening in the analysis period	537	396	73.7%	73.9%
Women more than 39 years old	More than 39 years old without Mammogram in the last 12 months	605	428	70.7%	61.7%
Women more than 20 years old	Women without Pap Smear in the last two years	680	441	64.9%	53.8%
Women more than 49 years old	Women without Mammogram in the last 12 months	546	401	73.4%	60.4%
Women between 21 and 65 years old	Women without Pap Smear in the last 2 years	393	195	49.6%	56.4%
Women between 40 and 49 years old	Women without Mammogram in the last 2 years	67	38	56.7%	56.0%
Women between 49 and 69 years old	Women without Mammogram in the last 18 months	338	165	49.1%	50.1%

*Based upon national data base of over 6 million lives

December 11, 2012

Focus Enrollment and Activity

YourCare Focus targets the top at-risk members that could have an impact on the plan's bottom line in the next 12 months. High-Risk members are identified by Verisk Medical Intelligence as any member over the age of 17, with an adjusted risk index over 20 and total paid claims less than \$30,000.



*Note: Enrollment statistics in this exhibit are based on a comprehensive time period from the program's inception to present.

High-Risk Members	# of Members	Reason(s)
Members Identified:	317	¹ Member did not return multiple voice messages - 39
Members Identified And Contacted:	148	
Members Identified But Unable To Be Contacted ¹ :	169	¹ YourCare was unable to obtain working phone numbers - 126 ¹ Exhausted Benefit - 3 ¹ Member is participating in another DM program - 1

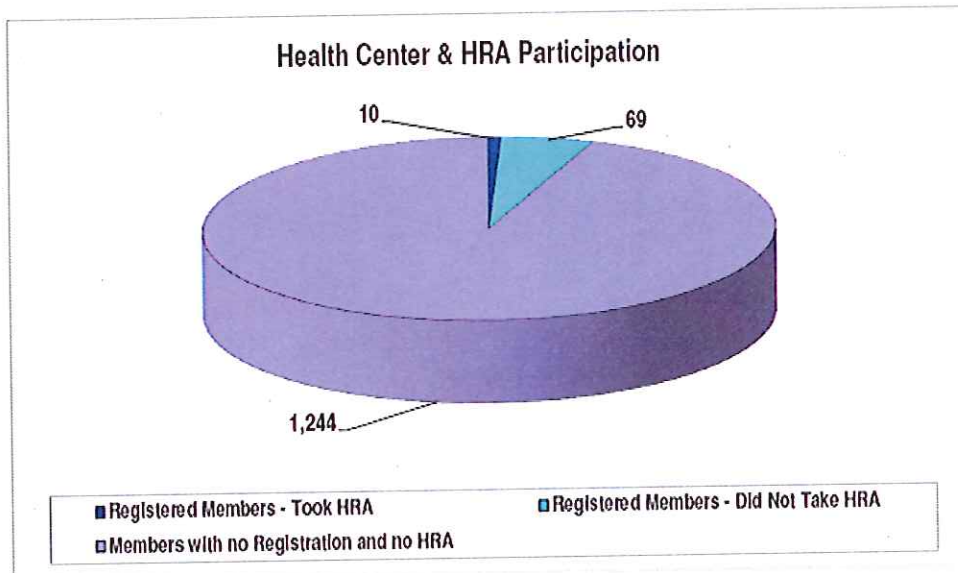
Enrollment	# of Members	Reason(s)
Members Contacted for Enrollment:	148	² Member declined opportunity to participate in program - 47
Members Contacted And Enrolled:	39	
Members Declined Enrollment ² :	109	² Member has not responded to phone calls and/or voicemails - 56 ² Member Opt-Out - 5 ² No Longer Following Case - 1

Participation	# of Members	Reason(s)
Total Members Enrolled:	39	³ Member stopped responding to phone calls and/or voicemails - 8
Members Currently Enrolled:	17	
Members No Longer Enrolled ³ :	22	³ Member completed program - 8 ³ Member voluntarily left program - 6

Member Activity	Count
Phone Calls to Members:	654
Average Calls Per Enrolled Members:	16.8
Educational Materials Sent:	59

Health Risk Assessment

YourCare members can create a personalized health profile through the Health Risk Assessment (HRA) on the Health Center. Here a member answers questions about their health and medical history to create a health profile and can sign up for interactive health programs. The YourCare clinical team uses the results of the HRA in their educational and clinical management outreach efforts.



Health Center & HRA Participation for Peralta Community College

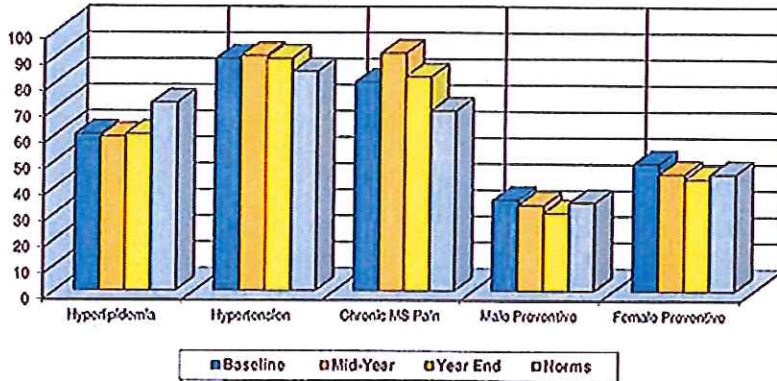
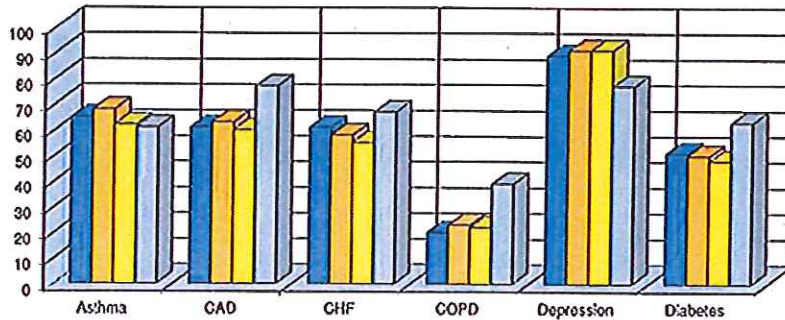
Number of eligible members - 1,323
 Members registered on Health Center - 79
 Health Center registration rate - 5.97%

Members who have taken an HRA - 10
 Percentage of eligible members w/ HRA - 0.76%

Note: This health center & HRA participation exhibit for Peralta Community College is for data through October 31, 2012. A detailed report with complete HRA results can be requested through the group's client manager.

To further engage members in their enrollment in the HealthCenter and understand how to get the most out of it, speak with your Client Manager about developing appropriate communication strategies for your population or visit the HealthCenter Marketing Website at www.coresource.com/HCMarketing/index.html.

At-a-Glance View of all Conditions at Year End



Overall Compliance Summary	Baseline	Mid-Year	Year End	Change from Baseline	Norm
	60	61	59	-1	63

Care Index	Baseline	Mid-Year	Year End	Change from Baseline	Norm
Asthma	65	68	62	-3	61
CAD	61	63	60	-1	77
CHF	61	58	55	-6	67
COPD	20	23	22	+2	39
Depression	89	91	91	+2	77
Diabetes	51	50	48	-3	63
Hyperlipidemia (High Cholesterol)	60	59	60	0	72
Hypertension (High Blood Pressure)	89	90	89	0	84
Chronic Musculoskeletal Pain	80	91	82	+2	69
Male Preventive	35	33	30	-5	34
Female Preventive	49	45	43	-6	45

** Group currently has no members identified with this condition.

Key Points:

- * Compliance scores for 5 of the 11 conditions improved or remain unchanged at Year End.
- * The average overall year end compliance score of 59 for all of the conditions lost 1 point over the baseline and was 4 points lower than the normative average.

Prevention and Lifestyle Risk

Your results: overview

Measure	Description	Your Results, 2011 Q4	Your Results, 2012 Q1	Year-Over-Year Change
BMI: Weight Management+	% of adult members who are overweight or obese	70.16%	70.18%	Declined
Cholesterol management+	% of members borderline high or high total cholesterol	36.86%	37.74%	Declined
Blood pressure management+	% of members with blood pressure $\geq 140/90$	12.33%	12.92%	Declined
Smoking rates+	% of members who smoke	10.6%	10.37%	Improved
Breast cancer screenings**	% of eligible population screened	85.96%	85.31%	Declined
Cervical cancer screenings**	% of eligible population screened	87.58%	86.86%	Declined
Colorectal cancer screenings**	% of eligible population screened	76.67%	68.72%	Declined
Childhood immunization rates**	% of eligible population screened	ISS	ISS	
Childhood obesity+	% of child members who are overweight or obese	38.98%	34.15%	Improved

*Continuously enrolled members during measurement period.
 +ISS (Insufficient Sample Size) will be displayed if eligible member population for the prevention measure is less than 30.

Your recommended action plan

Three steps to a healthier workforce



Create a culture of
health at work



Use the tools included
in your coverage—
Kaiser Permanente
HealthWorks

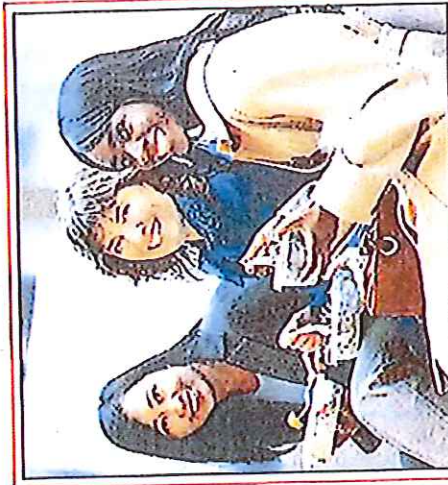


Broaden your reach

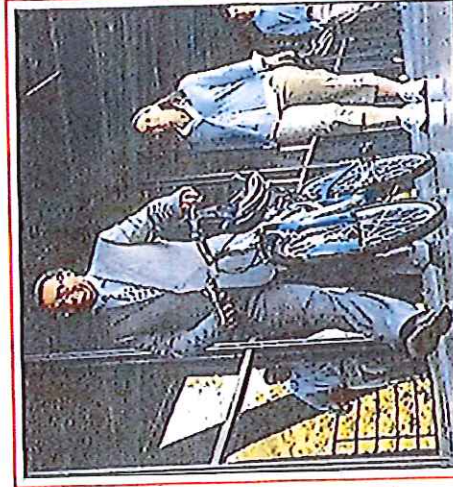
Create a culture of health at work

Worksite health promotion boosts employee wellness program participation by 40 percent*

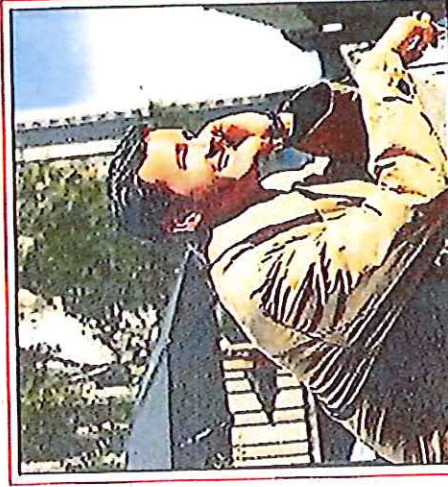
Use your worksite to encourage:



Better eating habits



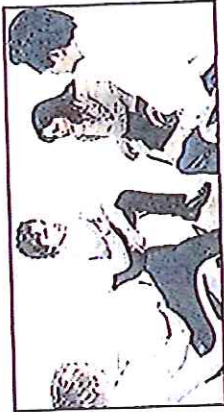
More exercise



Smoking cessation

*Closing the Gap: 2008/2009 Employee Perspectives on Health Care, Watson Wyatt, 2008.

Use the tools included in your coverage



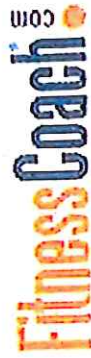
Online resources

- HealthWorks workbook
- Total health and productivity library at businessnet.kp.org
- Total health assessment
- Online services, including e-mail your doctor's office, view lab results, prescription refills, and more
- Digital coaching sessions
- BMI and health calculators
- Health and drug encyclopedias
- Health screening, self-exam, and symptom tools
- Fitness widget and podcasts

More included programs and tools

Membership extras

- Fitness clubs reduced rates
- Complementary medicine reduced rates
- Individual and phone counseling
- Educational theater program
- Kids in Dynamic Shape program



Facility resources

- Healthy living classes and support groups*
- Calorie counts in hospital cafeterias



*Availability varies by region. Some classes require an additional fee.

Broaden your reach with HealthWorks



Onsite

- The FruitGuys produce delivery service
- Healthy Picks vending machine program
- Health promotion classes
- Biometric screenings for cholesterol, blood pressure, and BMI
- Customized communications—flyers, posters, etc.



Online

- Total health assessments for all employees
- Customized e-mail coaching for your entire workforce
- Customized Web site with information and links on participating in the total health assessment, digital coaching sessions, or 10,000 Steps®
- Participation reports and summaries