

Dartmouth College Benefits Council (CBC)
Meeting Minutes - December 2, 2008
HR Training Room, 7 Lebanon Street
(Approved March 17, 2009)

Members in attendance: Mary Gorman, Scott Holmes, Richard Howarth (Chair), Jennifer Loros, Daniel Lynch, Thomas Shemanske, Karen Summer, John Tansey, Lora Thompson, Tina Wilcox; Non-voting: Adam Keller, Dianne Kenney, Traci Nordberg

Members absent: Kim Cooper, Elliott Fisher, Kathleen Hayes, Diana Kiefer, Charles Mannix, Monika Otter, Jill Savage, Robert Shumsky, Diederik Vandewalle

Chairman Howarth called the meeting to order at 3:08pm, introduced himself as the Chair of the CBC and reviewed the group's charge. All members of the CBC introduced themselves, and the meeting agenda was reviewed.

1) Review of May 6, 2008 Minutes

After the minutes were reviewed, a motion was made to approve the minutes. The motion carried unanimously.

There was some discussion regarding construction of the minutes and postings. The minutes will be in summary format and posted to a forum accessible to the Dartmouth community.

2) Recap of Annual Report to COP

Chairman Howarth reported that he presented the CBC's recommendation for a new infertility benefit at the annual COP meeting in the fall of 2008. According to Chairman Howarth, President Wright thereafter approved the CBC's recommendation and, on January 1, 2009, the new \$5000 infertility reimbursement benefit will go into effect.

3) CBC Guidelines for Evaluating College Benefits

A member introduced this discussion because currently there doesn't seem to be a good set of guidelines for the CBC to consider when regarding benefit selection. Usually health and retirement benefits are considered because peer data has been collected and benchmarking studies have been performed.

Adam Keller introduced eight principles which the CBC may want to consider as it seeks to clarify standards for evaluating proposed new benefits and/or benefit changes:

- Maintain Dartmouth's status as an 'Employer of Choice'
- Support a minimum standard of living
- Comparisons to balance benefits (trade offs)
- Willingness to provide greater subsidies to lower paid employees
- Strategic recruitment/retention tool
- Family-friendly
- Affect on workplace environment
- Provide choice for employees

4) *Presentation of Behavioral Health Access and Affordability: "A Day in the Life" by James Platt, MA, CEAP, LADC, LCMHC, Director, Dartmouth Faculty/Employee Assistance Program (F/EAP)*

Jim Platt explained that in preparation for this discussion and in order to experience the challenge our employees face when dealing with Anthem BC/BS, he accessed the Anthem website in search of mental health resources. The website list contains 117 providers, including providers with Master of Social Work (MSW) degrees, within 20 miles of Hanover. On this list:

- 38 providers are in West Central Behavioral Health
- 29 are in Dartmouth Hitchcock Psychiatric Associates (DHPA)
- 16 are highly rated/reliable
- 15 are no longer in practice
- 8 are unknown to FEAP staff
- 7 are rated poorly
- 2 see only Dartmouth students
- 2 rarely have openings

West Central Behavioral Health Services sends all contracted mental health plan members to its Claremont, NH office except in cases where substance abuse is the problem or the client is on Medicare/Medicaid. The providers have limited availability, and a treatment team chooses clinicians as appropriate. Many clients participate in group therapy, which has been determined to be highly effective.

Dartmouth Hitchcock Psychiatric Associates (DHPA) sees F/EAP-referred clients first, due to F/EAP's relationship with the practice. Of the 29 providers:

- 12 supervise trainees and/or are assigned to programs
- 5 are program administrators who do not provide treatment
- 4 are rotating trainees
- 4 provide treatment to children exclusively
- 3 are emergency/crisis providers
- 1 provides medical evaluations only

The overall experience has been:

- accessibility is a problem
- most clinicians do not accept insurance

Mental Health providers selected by Anthem:

- must be licensed
- must be a graduate from an educational institution recognized by the American Psychiatric Association (APA)
- must agree to the fee schedule, rules, and regulations

The Role of F/EAP at Dartmouth

F/EAP is a resource for mental health services, and a referral source for financial and legal services, to College faculty, staff, and family members. Response time is within 24 hours. The number of sessions per client depends on individual circumstances; F/EAP makes referrals to mental health providers as appropriate. In the event a provider is not available, F/EAP will continue to work with a client until an appropriate provider can be found.

F/EAP presents information about its programs at each new employee orientation. With 85-90 percent participation in the orientations, most new employees are at least acquainted with F/EAP and its services. Additionally, F/EAP has a website, monthly satellite hours at Centerra, DHMC, the Hop, and Baker Library, and a presence at the annual Fall Employee Services Fair.

Other Facets of the Mental Health Issue

Since the College is self-insured in its health plans, Committee members felt that the College should be able to decide how the plans should work. (For example, in some hospitalizations, Anthem requires daily updates. This type of case management can create problems.) Additionally, the College has the flexibility to determine how to subsidize the mental health programs.

Jim informed the Committee that a substantial number of people use their primary care physicians (PCP) for mental health medications. Since medications should be used in conjunction with therapy for successful outcomes, stand alone medications can lead to treatment failure. For chronic conditions, better education and more collaboration between bona fide providers and PCP's is in order.

Mental health issues impact the workplace and can be costly to the College. Currently 25 percent of the College's disability cases are mental health-related. DHMC has a similar disability case history. Short-term disability cases can convert to long-term disability if

the treatment plan is not successful. Upon reassessment, the diagnoses of some cases must be revised.

Chairman Howarth concluded that improving access and renegotiating the health contract are two areas worth reviewing. Dianne Kenney asked that the membership begin to consider health care/benefits priorities that can be addressed if/when the College puts out to bid administration of its health plans. Traci Nordberg stated that there may be enough potential actions to warrant a meeting of the Health Insurance Working Group (HIWG). In the interim Jim can research models from peer institutions across the country.

5) Health Plan Administration

Dianne Kenney presented information about the health plan administration bid process. Currently the College uses Anthem to administer its health plans. The administrator's duties include negotiating rates with health care providers, processing all claims payments according to the terms of the College's plan, and working with the College to inform employees about new programs and opportunities for both more comprehensive care (i.e. disease management) and options for cost control (i.e. mail-order pharmacy).

In order to ensure the best possible rates, the administration work should be put out to bid every three to four years. Dartmouth has not requested bids in at least six years.

The earliest possible bid process would begin in January 2010 for health plan administration work that would begin in January 2011. Traci pointed out that the health plans could certainly be put out to bid without any benefits or coverage changes, but that the bidding process provides a good opportunity to incorporate changes if there is a desire to make any.

6) Other Items

Chairman Howarth requested that we try to set next meeting for late January. The agenda should include:

- continuation of the mental health discussion
- review of the College retirement plans

The meeting was adjourned and ended at 5:00p.m.