

**MINUTES OF BOARD OF COUNTY
COMMISSIONERS
OF GUILFORD COUNTY**

Greensboro, North Carolina
September 28, 2016

The Board of County Commissioners met in a duly noticed work session on September 28, 2016 at 3:00PM in the Blue Room located on the first floor of the Old County Courthouse, 301 W. Market St., Greensboro, North Carolina.

PRESENT: Chairman Jeff Phillips, presiding; Vice Chairman Alan Branson; Commissioners Kay Cashion, Carolyn Q. Coleman, Alan Perdue, Justin Conrad, Ray Trapp, J. Carlvena Foster and Hank Henning (in at 4:00PM).

ABSENT: None.

ALSO PRESENT: County Manager Marty Lawing; County Attorney Mark Payne, Deputy County Manager Clarence Grier; Ariane Webb, Deputy Clerk to Board; John Dean, Human Resources (HR) Director; Carol Campbell HR Benefits Manager; Yvonne Moebs, Risk Management Director; Jim Albright, Emergency Services Director; Merle Green, DHHS-Public Health Division Director; members of the community and media.

I. WELCOME AND CALL TO ORDER

Chairman Phillips called the meeting to order at 3:09PM and welcomed those present.

County Manager Marty Lawing commented on the importance of the topic and noted emphasis will be placed on the three (3) vendors presenting their proposals for an employee wellness clinic. He stated the session would begin with an overview of the biometric screenings conducted in Spring 2016.

Commissioner Coleman questioned the number of proposals being discussed.

Lawing confirmed three (3) proposals will be presented.

Commissioner Coleman expressed concerns with the potential conflict of interest in United Healthcare (UHC) submitting a proposal, as they currently administer health benefits for the County.

Chairman Phillips stated he agreed to allow their presentation, based upon staff recommendations.

Lawing noted the urgency of addressing employee wellness needs, based upon biometric screening results.

Commissioner Trapp questioned if employees had been polled regarding their interest in a wellness clinic.

Carol Campbell, Human Resources (HR) Benefits Manager, stated a wellness survey was sent earlier in the year with approximately 600 employee responses. She noted the onsite clinic was ranked second in popularity with employees, while an on-site gym was rated number one.

Commissioner Coleman questioned why a gym option was not researched.

Campbell referenced the exercise room located in the DHHS-Public Health building at 1100 E. Wendover Avenue, Greensboro.

Merle Green, DHHS-Public Health Division Director, described the employee exercise room, and noted approximately fifteen (15) pieces of equipment, along with a shower for males and females, was available for use.

Chairman Phillips questioned if the facility was well-utilized.

Green confirmed the facility is well-utilized and noted a sign-in sheet tracks usage. She stated the room averages fifteen (15) daily employee visits, the bulk of use occurs during lunch breaks, and a declaration form is signed by employees, indicating their ability to utilize the exercise equipment.

Commissioner Foster questioned if High Point employees are able to utilize the exercise room.

Green discussed the facility housed within the High Point Public Health building, which includes five to six pieces of equipment. She noted the building does offer shower options for females, but has no facility for males, at this time.

Commissioner Coleman noted the facilities are not centrally located near the bulk of Guilford County employees.

Vice Chairman Branson questioned if the facilities are open to all employees.

Green confirmed both facilities can be utilized by all County employees.

II. NEW BUSINESS

a. 2016 Biometric Screening Overview

Campbell presented a five-year trend with health care claims, and noted the steady increase in claim costs over the last several years. She shared approximately 94% of County employees participated in the February 2016 biometric screening. Campbell stated 1,526 employees had elevated blood pressure of the total employees screened and noted the average County employee was in the hypertensive range and higher than the overall average for Guilford County citizens. She stated 124 employees were outside of the normal glucose range, and confirmed diabetes is a primary cost driver for the plan.

Commissioner Foster questioned if any of the screenings resulted in an initial diagnosis of diabetes for employees.

Campbell discussed her experience with an employee who shared his diabetic screening was higher than normal, and noted that he still needs to follow up with a primary care physician (PCP).

Commissioner Foster questioned if the screening required fasting.

Campbell noted this was a non-fasting screening, and employees were notified.

Chairman Phillips questioned the percentages of employees in the diabetic range listed on the presentation.

Campbell confirmed the error in the presentation and noted 4.7% of employees are outside the normal range.

Commissioner Trapp questioned the state and regional averages.

Campbell confirmed state and regional averages likely mirror Guilford County's averages.

Chairman Phillips questioned if the identified 124 employees were responsible for the bulk of the claim expenses.

Campbell clarified diabetes, as a disease, is one of the primary drivers in health care claims.

Lawing elaborated on diabetes as one of the top three drivers for healthcare claims.

Commissioner Perdue clarified the 124 employees identified is an indicator of those who do not have their diabetes under control, and does not represent those managed by medication.

Commissioner Coleman questioned why an A1C test was not conducted versus a standard stick test.

Campbell noted the screening was designed to begin a dialogue with the physician, rather than serve as a primary diagnostic tool.

Commissioner Cashion questioned if there was follow-up with those identified as requiring medical attention.

Campbell stated the providers stressed follow-up with a physician when the screenings results were received and noted UHC indicated they would follow-up with employees, as well.

Lawing stated staff received an aggregate report, and did not receive individual results, but noted the wellness clinic physician would receive these results.

Commissioner Cashion questioned the effectiveness of the screenings.

Campbell spoke to the benefits of the clinic in allowing for immediate follow-up, as HR is limited by privacy laws regarding laboratory results and health information.

Campbell reviewed the statistics regarding Body Mass Index (BMI) and obesity. She shared 11% of obese employees were identified as morbidly obese and noted the potential for co-morbidities with vascular disease and high blood pressure. She discussed cholesterol statistics and noted Guilford County exceeds the national average in all categories.

Lawing introduced the vendors and indicated their presentations would be limited to 20 minutes.

Chairman Phillips requested the Board hold all questions until the vendor completed their presentation.

III. PRESENTATIONS

a. Wellness Clinic Provider Proposals

SYNERGY HEALTHCARE

Matt McQuide, President of Synergy Healthcare, introduced the proposal and reviewed the cost of health care. He noted these costs must incorporate the demand for health care multiplied by supply costs and the cost to finance health care.

McQuide discussed the need to detect health-related issues early to decrease health costs, but noted 80% of patients are non-compliant in addressing health needs. He shared Synergy is dedicated to suppressing the need for healthcare and discussed reasons why healthcare costs increase.

McQuide spoke to the health risk assessments conducted by their organization and noted their team creates individualized goals, guidance and incentives; which differentiates them from other organizations. He spoke to the practitioner's ability to closely monitor patients and develop incentives that assist the client in meeting their goals. McQuide noted issues with accountability and resources that could result in barriers to care.

McQuide stated Synergy will offer education and service through convenient sites three (3) locations, at no additional cost to the employee. He noted the proposed clinic is employer-based, resulting in no requirement to clock-out and no copays. McQuide discussed other potential onsite services; including health assessments, primary care, prescriptions, lab analyses, care coordination and convenient appointments lasting 15-20 minutes.

McQuide reviewed statistics from New Hanover County, where Synergy manages a clinic, and noted a 2% reduction in obesity and a 27% decrease in hypertension. He stated approximately 71% of the those identified with 4+ risk factors decreased to 1-2 risk factors.

McQuide confirmed the ultimate goal is to keep benefits at the highest level for as long as possible, to assist employees while avoiding high costs to the employer. He spoke to the significant savings of on-site clinics, and noted the 28% difference in claims costs between those who participate in the clinic versus those who do not. McQuide shared annual claim costs for diabetics, and noted the goal is to assist pre-diabetics, to keep them from reaching full-blown diabetes.

McQuide shared the clinic costs and changes in health plan costs for New Hanover County, and noted the lowest cost possible should be achieved to get the greatest return-on-investment (ROI) for Guilford County. He stated if Synergy staff achieve their goal of two clinic visits/hour, the County could potentially save \$193,720, not accounting for savings generated from decreased health care plan costs. McQuide spoke to Synergy's ability to manage a health improvement program that will incentivize employees.

Chairman Phillips requested additional clarification regarding their proposal to provide forty-eight (48) hours of clinic coverage at three (3) locations.

McQuide recommended a separate High Point clinic location staffed twelve (12) hours weekly with one (1) practitioner working three (3) days per week, four (4) hours each day. He suggested two (2) additional clinics located in downtown Greensboro and on Wendover Avenue, with a second practitioner alternating hours between the two clinics. McQuide confirmed the forty-eight (48) hours of clinic coverage would meet County employee demands, with an average cost of \$,500 per clinic.

Vice Chairman Branson questioned the total number of wellness clinics managed by Synergy and if they experience excessive visits from employees.

McQuide stated Synergy manages fifteen (15) clinics in North Carolina, with a total of twenty (20) clinics between Virginia and South Carolina. He noted the rarity of excessive employee visits to the clinics, but noted the option to develop a policy limiting the number of visits.

Vice Chairman Branson questioned the protocol for scheduling appointments.

McQuide confirmed clinic staff will manage their own schedule, and spoke to their ability to send text and email reminders to employees regarding upcoming appointments.

Commissioner Foster thanked McQuide for including a separate High Point location in Synergy's wellness clinic proposal.

Commissioner Henning arrived to the meeting at 4:00PM.

Commissioner Cashion questioned if New Hanover County requires supervisory approval prior to clinic visits.

McQuide stated their team will work with the County to schedule appointments that will not interfere with productivity, but noted there is no official approval process required to visit the New Hanover County clinic.

Chairman Phillips questioned the average cost listed for a community visit (\$120).

McQuide discussed the average number of visits required to obtain significant cost savings.

Commissioner Coleman questioned the total number of clinic staff proposed for Guilford County clinics.

McQuide stated one (1) provider would staff the High Point clinic, and Greensboro would house one (1) physician assistant and an office assistant.

Chairman Phillips questioned the average health care plan annual cost increase for a group the size of Guilford County.

McQuide stated the average is normally between 7-8%.

Campbell noted claims costs have increased by 10.8% over the past five (5) years.

Lawing questioned if Synergy administered fasting or non-fasting Health Risk Assessments (HRA).

McQuide confirmed their HRA's are fasting-based.

Lawing questioned the potential cost-savings if an option to fill prescriptions on-site was included with the clinic proposal.

McQuide spoke to the trend of increased generic prescription use through the clinic, which could result in significant cost savings. He noted there would be no additional cost if this option were added to the clinic.

OPTUM ON-SITE SOLUTIONS

Kristin Stadler and Dr. Amy Myers introduced Optum On-site and discussed their suite of services.

Myers spoke to the programs flexibility to incorporate outside vendors into their program.

Stadler discussed the program's ability to customize to the employer's needs, and to accommodate employers of all sizes through their services.

Myers reviewed the scope of services available through their service model.

Stadler reviewed the proposed staffing model and noted they are cross-trained to offer multiple services within the clinic.

Myers noted the clinic will remain connected to providers through their electronic medical records system, which allows them to view specialty visits and other claims generated by the patient. She shared their goal of identifying cost-savings for the employer, while ensuring the health and wellness of employees.

Michael Kearns, Optum representative, reviewed Optum's capacity to receive information directly from onsite clinics, and their ability to transmit data to the clinics regarding services provided by the employee's PCP, such as laboratory services.

Stadler reviewed drivers for operational excellence and reviewed the sample layouts for various sized clinics. She spoke to their ability to customize the layout, based upon the size of the space.

Stadler reviewed branding options and their employee engagement strategy.

Myers reviewed the proposed staffing model, and spoke to the benefits of advanced practitioners in the clinic.

Stadler reviewed a case study involving occupational medicine and spoke to the importance of including this field in on-site clinics. She discussed the savings associated with providing this service through the clinic.

Stadler spoke to the clinic staff's ability to provide medical care and increase utilization of the programs already available.

Kearns reviewed the detailed proposal included in the packet, and noted estimates for prescription dispensing and other services are available., including Rx dispensing and estimates for additional offerings. He confirmed biometric screenings are included in the proposed costs for the clinic.

Commissioner Coleman questioned Optum's relationship to UHC.

Kearns stated Optum is the sister-company to UHC.

Commissioner Coleman expressed concerns with a potential conflict of interest in utilizing Optum as a clinic provider, while UHC serves as benefits administrator for Guilford County.

Kearns noted savings with regards to the health care plan would result in cost-savings for the County, but clinic utilization would result in additional cost-savings that would drive down claims.

Commissioner Coleman expressed concerns with receiving the best medications if UHC does not provide coverage, and the County does not choose to the option for prescription dispensation through Optum.

Myers stated the administering physician would advocate on behalf of the patient to get the medication needed, whether it is or is not included on the UHC formulary.

Kearns noted the County is self-insured and has final say on the medications included on the formulary.

Chairman Phillips questioned if Optum services are stand-alone from UHC.

Stadler confirmed Optum services are separate from those provided by UHC.

Chairman Phillips questioned if there were advantages for the County utilizing Optum as UHC customers.

Kearns spoke to the advantage of data integration for UHC customers, as the provider will have access to all UHC care management systems. He noted a third-party provider cannot receive information regarding patient claims, due to their proprietary nature.

Lawing questioned the cost of the Tele-medicine option.

Myers noted the provider would facilitate the call, and the Tele-medicine visit would occur at the on-site clinic.

Kearns clarified the Tele-medicine option is a new benefit through UHC, and noted they traditionally recommend no co-pay visits to the on-site clinics, to encourage utilization by employees.

Commissioner Coleman questioned if a physician will visit and monitor the clinic.

Myers confirmed physicians normally mandate on-site visits, and noted these visits may be statutorily required, based upon state law.

Stadler discussed quarterly utilization reviews designed to determine if additional staff are needed to accommodate the volume of patients served at the clinic.

Kearns noted the onsite nurse practitioner (NP) has the ability to write prescriptions, and the proposal includes the option to dispense prescriptions onsite. He confirmed they have sufficient staffing options to support multiple locations.

Commissioner Coleman questioned if Guilford County employees were aware of the Tele-medicine service.

Lawing confirmed this was a brand new service discussed during recently conducted mandatory staff meetings.

Campbell shared the mandatory meetings discuss self-funding, virtual visit options and the employees' ability to determine service costs within the local community. She noted the Tele-medicine copay is \$20 and the total visit length is approximately fifteen (15) minutes. Campbell stated the service requires use of a smartphone or laptop with a camera, to allow the physician capability to observe the patient.

Commissioner Coleman spoke to the need for additional training regarding the service.

John Dean, HR Director, confirmed multiple mandatory staff meetings had been held and would occur through next month to share more about this option and additional services.

The Board discussed the Tele-medicine option and requested additional information from Dean regarding the HR meetings.

Commissioner Henning spoke to the benefits of the Tele-medicine service, and expressed his interest in learning more about this option versus the on-site wellness clinics.

Commissioner Foster left the meeting at 4:45pm.

CONE HEALTH EMPLOYEE HEALTH & WELLNESS SERVICES

Lisa Pennington, Executive Director – Cone Health Corporate & Community Health & Wellness, introduced the presentation and reviewed their packet enclosures. She shared Cone Health's success in implementing high quality employee health and wellness programs.

Pennington noted the proposal includes five (5) main components and spoke to their flexibility in tailoring a program to meet the needs of Guilford County employees.

Pennington discussed the benefits of an onsite clinic, including increased productivity, decreased absenteeism and noted the costs associated with a NP and support staff, prescription dispensation and access to the electronic records management system utilized by all Cone Health providers. She noted the majority of County employees are being treated by Cone providers, and stated the total costs of these recommended services is approximately \$225,000.

Pennington spoke to the benefits of staffing a full-time wellness coach to focus on employees with chronic diseases and risk factors that could potentially lead to chronic diseases. She discussed the online portal available to track the progress of employees who chose to utilize the option and noted the cost of this service is approximately \$64,000. Pennington shared this option includes access to care through the near-site employee health & wellness clinics, and their Telehealth service.

Dr. John Jenkins discussed the Telehealth option, and noted the integrated network of care which allows data management through the electronic health records (EHR) network. He spoke to Telehealth as an alternative to more expensive venues of care and discussed the potential for ongoing savings through this system.

Commissioner Foster returned to the meeting at 4:55PM.

Steve Knorr, Chief Administrative Officer for Triad Health Network, discussed the potential ROI through utilization of the Cone Health & Wellness programs. He noted the ability of the onsite clinic and Telehealth to create cost avoidance and cost-shifting and stated the more visits achieved, the greater the savings.

Knorr emphasized the need to engage employees in healthcare management, and spoke to the potential for a 5% ROI during the first year of clinic operation. He noted the Telehealth option is available to all dependents at a fixed rate cost, and estimated achieving an ROI of \$144,000 with approximately 1,200 visits per year.

Knorr discussed the benefits of care management dedicated primarily to high-risk patients through education and coaching and stated this investment would require \$423,000 resulting in a 3% ROI during the first year of implementation. He proposed a total investment of approximately \$900,000 to incorporate all recommended Cone Health recommended strategies in the Guilford County wellness program.

Vice Chairman Branson questioned the percentage of Cone Health employees utilizing these services.

Knorr stated approximately 5% of their staff utilize the care management option.

Jenkins shared approximately 2,000 employees registered for Telehealth services during the initial month of implementation and noted their goal of 90% registration during the next insurance re-enrollment process. He spoke to social media and email blasts sent as registration reminders.

Pennington noted 84% of Cone Health employees utilized the acute care clinic and 40% of employees participated in the wellness coaching service. She discussed the incentives offered to their employees, and noted their organization recognized cost-savings up to 20% of the plan costs.

Knorr spoke to the impact of health care education and wellness coaching on cost savings.

Commissioner Coleman questioned if Guilford County employees would only utilize Cone Health's existing clinics.

Knorr confirmed they will establish the on-site clinic, but offer the option to utilize near-site clinics already existing within the network.

Pennington confirmed the on-site clinic would employ nurse practitioners.

Commissioner Coleman questioned if the near-site clinics utilize physicians.

Pennington noted some of the clinics are staffed by NP's, while others are staffed by physicians.

Jenkins spoke to the benefits of utilizing NP's and their ability to address acute care issues, while those with chronic conditions will be referred to teams of physicians to address issues.

Commissioner Coleman questioned length of time involved in scheduling a visit with a physician team.

Jenkins shared they are working to decrease the current wait time of twelve (12) days; however, critical needs will be addressed immediately.

Commissioner Foster questioned the proposed locations of the on-site clinics.

Pennington stated they will follow County direction regarding clinic locations, but noted the clinic should be located near the highest concentration of employees. She spoke to the option of accessing near-site clinics at fixed rate fees.

Commissioner Perdue questioned the potential employee response to the employer having access to employee health information.

Pennington noted the wellness clinics will be completely separate from the employer, and confirmed they will advertise this protocol to the employee.

Commissioner Perdue commented on Cone Health's connectivity to other providers throughout the County shared his recent experience at MedHealth High Point. He spoke to the benefits of accessing Cone providers and questioned the total fee of visiting a private clinic versus the fee charged through the Cone Health system.

Jenkins noted the average urgent care fee is approximately \$120, while an emergency room visit averages \$300.

Commissioner Perdue emphasized the benefits of expanded care options, and spoke to the need to incorporate workman's compensation policies with employee wellness.

Pennington noted Telehealth visits are communicated to the on-site clinic provider, and the employee's PCP, if they are affiliated with the Cone Health network.

Commissioner Cashion expressed concern with the emphasis placed upon wellness coaching services and expanded access to care via Cone Health's near-site clinics and the Telehealth service. She questioned if the goal is to encourage the County to pursue these care management services, versus an on-site clinic, through Cone Health.

Pennington confirmed the foundation of the plan is developing an on-site wellness clinic for Guilford County employees.

Knorr noted the clinic would have the ability to interface with other providers throughout the County, including many local PCP's, and spoke to the advantages of this data exchange.

Lawing commented on the benefits of the near-site clinic and spoke to the need to develop a priority appointment scheduling system for County employees, along with billing directed to the County. He questioned if employees would have 24-hour access to the Telehealth system. Lawing shared his interest in exploring a data analytics service tier to identify those in need of chronic disease management, and questioned if the proposal included health risk assessments.

Commissioner Coleman expressed concerns with evaluating on-site clinic options with the Telemedicine service available through UHC.

Lawing spoke to the ability for on-site clinic NP's to provide a high quality of medical care and their ability to coordinate with the patient's PCP.

Commissioner Cashion questioned the health care staff available through UHC's Telemedicine service.

Campbell stated a number of physicians across the US are accessible through Telemedicine, and confirmed Mental Health practitioners are available through this service, as well.

The Board discussed the fees associated with UHC's Telemedicine service versus the comparable service offered through Cone Health.

Chairman Phillips requested the Board consider if there is sufficient interest to request staff move forward with negotiating an onsite wellness clinic.

Commissioner Perdue recommended exploring the option, and noted a small percentage of individuals are currently utilizing the existing exercise facilities. He stated the clinic is designed to reduce future health care costs, while maintaining decent coverage for the employees, and spoke to the need to include a clawback provision in any contracts with a clinic provider, if the proposed ROI is not achieved.

Commissioner Coleman noted the ultimate goal is to ensure the health of employees, and spoke to the need for education and wellness coordination offered by Cone Health.

Commissioner Cashion spoke to the need to maintain an open mind, but requested additional information. She requested staff pull information from other counties regarding their strategies in addressing employee wellness, and expressed the need to reinforce the primary goal of employee health & wellness to encourage participation.

Lawing noted most employees with clinics offer incentives to encourage participation.

Coleman questioned the outcome should the employee choose to visit their PCP versus utilizing the clinic.

Lawing noted the option for incentive provisions, and emphasized the key to the wellness program is maintain and strengthening the relationship with the employee's PCP. He stated most counties and cities utilize some form of an onsite clinic.

Chairman Phillips questioned the Board regarding their opinions of the three (3) presentations.

Commissioner Conrad expressed concerns about requiring employees to visit an onsite clinic and improve health outcomes.

Commissioner Henning shared his concerns and noted the need for additional information. He questioned if the cost-savings discussed were literal or if they were projecting savings. Henning's spoke to his interest in learning more about the Telemedicine option, versus a brick & mortar clinic.

Chairman Phillips spoke to the need to quantify an onsite clinic's ROI and health impact upon employees, and noted the benefits for those who chose to participate. He shared his interest in the Telemedicine service and emphasized the need to encourage employee utilization of this option, in addition to promoting fitness and other wellness alternatives.

Commissioner Trapp questioned if County employees were aware of the fitness benefits available through local gyms and other organizations. He noted the need to advertise these incentives and suggested staff determine the will of the Board prior to scheduling future work sessions.

Commissioner Trapp left the meeting at 5:40PM.

Commissioner Coleman recommended conducting another employee survey, and noted the need to ask specific questions related to on-site clinics before moving forward with development.

Commissioner Cashion questioned the results of the previous survey.

Campbell spoke to the positive feedback received from a recent survey regarding an on-site clinic option and noted that an earlier employee survey received comparable results, but garnered fewer responses.

Commissioner Foster noted the bulk of those who responded to the survey were likely health-conscious.

Vice Chairman Branson expressed his interest in incentivizing employee wellness by offering alternative options other than utilizing employee leave time for doctor's visits, but shared his concerns regarding potential misuse of an onsite clinic.

Commissioner Perdue spoke to the need to clarify the County's desire regarding the number and location of potential sites for the clinics.

Chairman Phillips requested Board review of any survey questions developed, prior to sending to employees.

Commissioner Coleman requested the survey include a question to determine employee interest in being offered 1 ½ hours of leave time dedicated for an annual wellness visit with their physician.

Commissioner Foster left the meeting at 5:48PM.

Chairman Phillips noted the Board was not prepared to make a decision regarding the onsite clinic. He noted the Board's interest in learning more about the UHC Telemedicine service and receiving additional employee feedback regarding wellness options, through a survey.

IV. ADJOURN

There being no further business, the Board adjourned the meeting by unanimous consent at 5:50PM.

Jeffrey M. Phillips
Chairman

Ariane Webb
Deputy Clerk