Health Benefits Committee

December 3, 2015
Agenda

- 9:00- 9:15  Announcements/Updates & Follow Ups, Jennifer Benford Seibert
  - Introduction of New Staff & Committee Members
  - Consultant Update
  - Next 2016 Meeting Dates:
    - January 21 (note date change from 1/14), March 24, April 28
    - Follow up: Q: How many are enrolled in Cash in lieu? A: 40
  - 9:15-9:20  Focus of Committee
- 9:20-9:50  A review of Peralta Health & Wellness Trends, CoreSource and Kaiser
  - CoreSource, Amanda Benson
  - Kaiser, Gina Hailey
- 9:50-10:00 Questions and Answers about findings and trends, all
  - Budget Review Actual V Projected,
- 10:00-10:20  Affordable Care Act –Review of Timeline, Jennifer Benford Seibert
- 10:00-10:30  Surveys, all
- 10:30-10:35  Next Newsletter Topics, Benefits Office
Announcements

- Introduction of New Staff
- Introduction/Confirmation of Committee Members
- Consultant Update
- Next Meeting Dates: January 21, March 24, April 28
Focus of Committee
Last discussed April 2015

Language reflected in the spirit of all three Collective Bargaining Agreements

The parties agree that a study committee shall be established to study manners and mechanism which will reduce the impact of health and welfare costs to the District. The study committee shall consist of representatives from PFT, SEIU Local 1021, IUOE Local 39, Confidential, Management and Retirees to review potential changes and/or modifications to health and welfare plans. The role of the Committee shall be limited to making recommendations to the unions and the District Focus of Committee.

Language as proposed by Peralta Retirees Organization (PRO)

The PCCD Fringe Benefits Committee shall promote health and well-being as well as review possible manners and mechanisms to reduce the impact of health and welfare costs for all active employees, retirees, and the district without diminishing the quality and level of benefits. The committee shall consist of representatives from PFT, SEIU Local 1021, IUOE Local 39, management and retirees. Part of the members’ responsibilities will also be to review potential changes and/or modifications to health and welfare plans, inform their constituents about these potential changes/modifications and report back to the Fringe Benefits Committee on behalf of their constituents. The role of the committee shall be limited to making recommendations to the groups represented on the committee.
Language reflected in spirit of all three Collective Bargaining Agreements and incorporation of PRO Feedback:

The parties agree that a study committee shall be established to study manners and mechanism which will reduce the impact of health and welfare costs to the District. The study committee shall consist of representatives from PFT, SEIU Local 1021, IUOE Local 39, Confidential, Management and Retirees to review potential changes and/or modifications to health and welfare plans.

Part of the members’ responsibilities will also be to review potential changes and/or modifications to health and welfare plans, inform their constituents about these potential changes/modifications and report back to the Fringe Benefits Committee on behalf of their constituents.

The role of the Committee shall be limited to making recommendations to the unions and the District.
<table>
<thead>
<tr>
<th>Vendor Name</th>
<th>change over prior year 14-15</th>
<th>Amount 2015-2016</th>
<th>YTD Expenses</th>
<th>7/1/2015 thru % of budget</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>MEDICAL</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kaiser-Washington (1)</td>
<td>0</td>
<td>30,948</td>
<td>15,639.00</td>
<td>12/31/2015 51%</td>
</tr>
<tr>
<td>Kaiser-ATL (1)</td>
<td>0</td>
<td>17,861</td>
<td>8,930.40</td>
<td>12/31/2015 50%</td>
</tr>
<tr>
<td>Kaiser North</td>
<td>7.42</td>
<td>-2.61</td>
<td>8,582,885</td>
<td>12/31/2015 51%</td>
</tr>
<tr>
<td>CoreSource Claims &amp; RX</td>
<td>0</td>
<td>2,732,999</td>
<td>1,362,279.22</td>
<td>12/31/2015 50%</td>
</tr>
<tr>
<td>CoreSource Administrative</td>
<td>0</td>
<td>10,692,361</td>
<td>2,337,949.48</td>
<td>10/31/2015 20%</td>
</tr>
<tr>
<td>Wellpoint EAP</td>
<td>0</td>
<td>17,467</td>
<td>9,578.16</td>
<td>12/31/2015 55%</td>
</tr>
<tr>
<td>ING Stop/Loss (2)</td>
<td>-21</td>
<td>894,570</td>
<td>521,100.22</td>
<td>11/30/2015 58%</td>
</tr>
<tr>
<td><strong>DENTAL</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pacific Union / UHDM</td>
<td>10%</td>
<td>28,745</td>
<td>12,831.79</td>
<td>11/30/2015 45%</td>
</tr>
<tr>
<td>ASIG</td>
<td>3.08</td>
<td>882,760</td>
<td>314,617.52</td>
<td>10/31/2015 36%</td>
</tr>
<tr>
<td>ASIG Administrative</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>LIFE/LTD</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ING Life (2)</td>
<td>0</td>
<td>148,143</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ING LTD</td>
<td>0</td>
<td>8,097</td>
<td>51,259.68</td>
<td>12/31/2015 84%</td>
</tr>
<tr>
<td><strong>MISCELLANEOUS</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pension Dynamics 132/125/1</td>
<td>0</td>
<td>8,290</td>
<td>2,925.00</td>
<td>11/30/2015 35%</td>
</tr>
<tr>
<td>Admin Fees for 132/125/1</td>
<td>0</td>
<td>3,105</td>
<td>1,365.00</td>
<td>11/30/2015 44%</td>
</tr>
<tr>
<td>Pension Dynamics Medical</td>
<td>0</td>
<td>15,229</td>
<td>7,016.08</td>
<td>11/30/2015 46%</td>
</tr>
<tr>
<td>Medicare A &amp; B</td>
<td>0</td>
<td>1,234,000</td>
<td>479,231.38</td>
<td>11/30/2015 39%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td></td>
<td>34,144,786.98</td>
<td>11,244,784.75</td>
<td>33%</td>
</tr>
</tbody>
</table>
YourCARE
A tailored health management program

-Peralta Community College District-
YourCARE solutions for employee health
HealthCenter

- Driving engagement, providing tools and resources
- Single sign-on from myCoreSource.com to HealthCenter
- Health assessments
- Health trackers
- Screening scheduler
- Incentive tracking system and more
Health risk assessment

- Raises awareness
- Provides personalized feedback
- Triggers engagement
- Gateway for health advising and coaching
- Tool for guiding strategic health management programming
- Aggregate client reports and comparative data
Participant Reporting:

Dear Doctor, This summary contains information gathered during your patient’s participation in a Health Assessment. The graph below (including "Overall Wellness") is on a scale of 0 to 100. The Overall Wellness score takes into account current lifestyle and biometric measures, but not diagnosed diseases, medication use or family history.

Your patient’s health assessment results are presented in the table below. Self-reported biometric values are displayed in parentheses; professionally collected values are without parentheses. The Framingham Heart Score predicts the patient’s risk of dying from heart disease during the next 10 years.
Health advising

- Leverages teachable moment
- Multiple delivery modes
- One-time conversation
- Improves coaching enrollment
Health coaching

- Supports positive lifestyle changes
- Flexibility to interact with coach via Web, mobile device, phone and print
- 13 areas focused on physical activity, healthy eating and healthy living
Personalized lifestyle programs

- **BALANCE** for weight management
- **RELAX** for stress management
- **NOURISH** for healthy eating
- **MOVE** for physical activity
- **BREATHE** for smoking cessation

Self-directed, online programs
Preventive care reminders
Condition management

- Targets top at-risk members that could affect the plan’s bottom line in next 12 months
- Registered nurses engage identified members
- Nurses and coaches refer cases based on member needs
Chronic condition monitoring

- Identify members with chronic conditions
  - Asthma
  - Diabetes
  - Coronary Artery Disease
  - COPD
  - Congestive heart failure
  - Hypertension
  - High cholesterol

- Gaps in care
- Letter to primary care physician (when possible)
Where are we now?

- Peralta CCD has had YourCare program in place since 2011
- Average compliance is below the Verisk Book of Business in 6 of the 7 chronic conditions categories and in preventive categories
Where are we now?

Peralta Community College

All numbers shown are percentages of compliance for each Quality and Risk Measure and overall compliance within each condition.

<table>
<thead>
<tr>
<th></th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
<th>2015 at Year-End</th>
<th>Average of 2015 at Year-End all QRMS combined</th>
<th>Verisk B.O.B</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Compliance</strong></td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td><strong>Asthma</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3002 Drugs</td>
<td>85</td>
<td>86</td>
<td>76</td>
<td>72</td>
<td>74</td>
<td>62</td>
<td>64</td>
</tr>
<tr>
<td>3003 Office Visits</td>
<td>87</td>
<td>83</td>
<td>92</td>
<td>89</td>
<td>93</td>
<td>64</td>
<td>64</td>
</tr>
<tr>
<td>3402 Flu Vaccines</td>
<td>23</td>
<td>15</td>
<td>6</td>
<td>19</td>
<td>20</td>
<td>62</td>
<td>64</td>
</tr>
<tr>
<td><strong>Coronary Artery Disease</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3007 Lipid Profile</td>
<td>26</td>
<td>29</td>
<td>20</td>
<td>17</td>
<td>20</td>
<td>57</td>
<td>80</td>
</tr>
<tr>
<td>3274 Office Visits</td>
<td>95</td>
<td>91</td>
<td>89</td>
<td>91</td>
<td>93</td>
<td>80</td>
<td>80</td>
</tr>
<tr>
<td><strong>Congestive Heart Failure</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3028 Drugs-Ace Inhibitors</td>
<td>63</td>
<td>68</td>
<td>72</td>
<td>63</td>
<td>69</td>
<td>61</td>
<td>70</td>
</tr>
<tr>
<td>3029 Drugs-Beta Blockers</td>
<td>63</td>
<td>64</td>
<td>65</td>
<td>66</td>
<td>69</td>
<td>61</td>
<td>70</td>
</tr>
<tr>
<td>3030 Office Visits</td>
<td>21</td>
<td>76</td>
<td>83</td>
<td>80</td>
<td>82</td>
<td>80</td>
<td>80</td>
</tr>
<tr>
<td>3395 Lab Tests</td>
<td>88</td>
<td>12</td>
<td>33</td>
<td>28</td>
<td>22</td>
<td>80</td>
<td>80</td>
</tr>
<tr>
<td><strong>COPD</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3044 Office Visit</td>
<td>21</td>
<td>13</td>
<td>13</td>
<td>35</td>
<td>16</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2044* Flu Vaccine</td>
<td>28</td>
<td>23</td>
<td>18</td>
<td>18</td>
<td>22</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12522 Breathing Test</td>
<td>0</td>
<td>28</td>
<td>18</td>
<td>37</td>
<td>38</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Where are we now?

**Peralta Community College**

All numbers shown are percentages of compliance for each Quality and Risk Measure and overall compliance within each condition.

<table>
<thead>
<tr>
<th></th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
<th>2015 at Year-End</th>
<th>Average of 2015 at Year-End all QRMS combined</th>
<th>Verisk B.O.B</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Diabetes</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3063</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lab Tests</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>3065</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3072*</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>3087</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Office Visits</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Hyperlipidemia</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5004</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12526</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Hypertension</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3344</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3393</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Male Preventive</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6003</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Female Preventive</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12521</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6008</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6010</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

HBA1C

Lab Tests

Microalbumin Tests

Office Visits

Labs

Anti-hyperlipid Meds

Office Visits

Drugs

Male Colonoscopies

Female Colonoscopies

Mammograms

Pap Tests
### Total Number of Subscribers

<table>
<thead>
<tr>
<th>Year</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>787</td>
<td>767</td>
<td>735</td>
<td>720</td>
<td>705</td>
</tr>
</tbody>
</table>

### Average Age Active

<table>
<thead>
<tr>
<th>Year</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>2011</td>
<td>57</td>
<td>56</td>
</tr>
<tr>
<td>2012</td>
<td>57</td>
<td>55</td>
</tr>
<tr>
<td>2013</td>
<td>55</td>
<td>55</td>
</tr>
<tr>
<td>2014</td>
<td>53</td>
<td>54</td>
</tr>
<tr>
<td>2015</td>
<td>54</td>
<td>54</td>
</tr>
</tbody>
</table>

### Average Age Retired

<table>
<thead>
<tr>
<th>Year</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>2011</td>
<td>79</td>
<td>77</td>
</tr>
<tr>
<td>2012</td>
<td>78</td>
<td>76</td>
</tr>
<tr>
<td>2013</td>
<td>78</td>
<td>75</td>
</tr>
<tr>
<td>2014</td>
<td>77</td>
<td>75</td>
</tr>
<tr>
<td>2015</td>
<td>76</td>
<td>74</td>
</tr>
</tbody>
</table>

### Total Medical Claims Costs (Jan-Jun)

<table>
<thead>
<tr>
<th>Year</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$2,290,640.51</td>
<td>$8,868,808.40</td>
<td>$6,075,662.38</td>
<td>$7,319,517.46</td>
<td>$6,308,891.85</td>
</tr>
</tbody>
</table>

### Health Risk Assessment

<table>
<thead>
<tr>
<th>Year</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>3</td>
<td>2</td>
<td>6</td>
</tr>
</tbody>
</table>

### Focus Disease Management

- **From previous Mid-Year Report (As of June 2015)**
- 17 Currently Enrolled in FOCUS
GOALS moving forward

- Increase awareness and communication of the YourCare program
- Engage member population
- Complete a successful Health Risk Assessment campaign.
  - Upon HRA campaign completion we will analyze results to identify health promotion opportunities specific to Peralta.
- Healthcare cost avoidance
Health Risk Assessment Campaign
- 3 month campaign – January thru March
- Peralta will advertise via newsletter and website
- Incentivize members to increase participation

Suggested incentives
- Paid Time Off
  - 6 hours if HRA is completed in January
  - 4 hours if HRA is completed in February
  - 2 hours if HRA is completed in March
- Grand Prize Raffle
  - Weekend Getaway
  - Golden State Warriors Game
Questions?
Partnership in Health Report:
Chronic Conditions

Created for Peralta Community College
Commercial | All Members
Report Date: NOV-02-2015
Partnership in Health (PIH) reports
A full picture of workforce health

Claims and utilization data only tell you part of the story.

Clinical data — driven by our electronic health record system — gives you the full story.
Based on your group results, we’ll recommend a more effective action plan.
## Your group at a glance – measurement period ending March 31, 2015

<table>
<thead>
<tr>
<th></th>
<th>Peralta Community College</th>
<th>Kaiser Permanente regionally adjusted average</th>
<th>Comparison</th>
</tr>
</thead>
<tbody>
<tr>
<td>Subscribers</td>
<td>590</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Members</td>
<td>1,241</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Average Age</td>
<td>41.0</td>
<td>34.4</td>
<td>6.6 yrs older</td>
</tr>
<tr>
<td>Gender (% female)</td>
<td>53.5</td>
<td>50.8</td>
<td>2.7% pts higher</td>
</tr>
<tr>
<td>Average Family Size</td>
<td>2.1</td>
<td>1.9</td>
<td>0.2 higher</td>
</tr>
<tr>
<td>% who saw a clinician</td>
<td>82.7</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Enrollment Stability Index</td>
<td>91.9</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

The Kaiser Permanente regionally adjusted averages are based on the weighted average of the purchaser’s distribution of members across the Kaiser Permanente regions for the time period being measured.
Percent of your costs driven by chronic conditions

74% of your costs are driven by 26% of your members*

* Continuously enrolled members during measurement period (April 01, 2014 through March 31, 2015).

The calculations for this graph use DxCG methodology.
Percent of your costs driven by conditions — segmented

Percentage of members compared to percentage of cost by condition*

74% of your costs are driven by 26% of your members*

* Continuously enrolled members during measurement period (April 01, 2014 through March 31, 2015).

Calculations for this graph use DXCG methodology.

Note: Major chronic conditions = diabetes, asthma, coronary artery disease, chronic heart failure, COPD, CKD, and depression.
Prevalence by chronic condition

Your group

- Diabetes: 6.3%
- Asthma: 1.0%
- Depression: 4.7%
- CAD: 0.3%
- CHF: 1.2%
- Hypertension: 6.9%
- Obesity**: 32.0%

Kaiser Permanente average*

- Diabetes: 4.7%
- Asthma: 1.1%
- Depression: 3.3%
- CAD: 0.4%
- CHF: 0.5%
- Hypertension: 5.0%
- Obesity**: 28.8%

* Continuously enrolled members during measurement period (April 01, 2014 through March 31, 2015).

** Based on BMI for all members (adults and children) with a measurement recorded within the last 12 months.

Proven care outcomes — 2014 HEDIS® national scores

<table>
<thead>
<tr>
<th>Metric</th>
<th>Peralta Community College</th>
<th>Kaiser Permanente</th>
<th>HEDIS 90th percentile</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Diabetes — eye exam</strong></td>
<td>69.01%</td>
<td>75.41%</td>
<td>73.54%</td>
</tr>
<tr>
<td></td>
<td>371 plans reporting</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Diabetes — kidney monitoring</strong></td>
<td>85.92%</td>
<td>93.99%</td>
<td>91.24%</td>
</tr>
<tr>
<td></td>
<td>387 plans reporting</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Diabetes — hypertension (&lt;140/90)</strong></td>
<td>71.83%</td>
<td>65.61%</td>
<td>56.78%</td>
</tr>
<tr>
<td></td>
<td>314 plans reporting</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Depression treatment — acute phase</strong></td>
<td>71.49%</td>
<td>73.84%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>381 plans reporting</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Depression treatment — continuous phase</strong></td>
<td>49.44%</td>
<td>57.59%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>381 plans reporting</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Beta blockers for heart attack</strong></td>
<td>88.73%</td>
<td>92.11%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>238 plans reporting</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Heart disease — controlling high blood pressure</strong></td>
<td>81.82%</td>
<td>88.39%</td>
<td>76.89%</td>
</tr>
<tr>
<td></td>
<td>333 plans reporting</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Asthma treatment (all ages)</strong></td>
<td>96.03%</td>
<td>94.20%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>373 plans reporting</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Kaiser Permanente 2014 HEDIS® scores. Benchmarks provided by the National Committee for Quality Assurance (NCQA) Quality Compass® and represent all non-PPO lines of business.

Note: Results will not be displayed if the eligible member population for the metric is less than 30.

Proven care outcomes — 2014 HEDIS® national scores

- Diabetes – eye exam
- Diabetes-kidney monitoring
- Diabetes-hypertension
- Depression treatment-acute phase
- Depression treatment-continuous phase
- Beta-blockers for heart attack
- Hypertension
- Asthma treatment

Kaiser Permanente 2014 HEDIS® scores. Benchmarks provided by the National Committee for Quality Assurance (NCQA) Quality Compass® and represent all non-PPO lines of business.

Note: Results will not be displayed if the eligible member population for the metric is less than 30.
## Your group’s numbers

<table>
<thead>
<tr>
<th>Measure</th>
<th>Your group’s results</th>
</tr>
</thead>
<tbody>
<tr>
<td>Obesity rate (based on BMI)*</td>
<td>32.0%</td>
</tr>
<tr>
<td>High blood pressure rate</td>
<td>7.8%</td>
</tr>
<tr>
<td>High blood glucose levels rate among diabetics</td>
<td>28.2%</td>
</tr>
<tr>
<td>Breast cancer screening rate</td>
<td>84.3%</td>
</tr>
<tr>
<td>kp.org registration rate</td>
<td>85.8%</td>
</tr>
<tr>
<td>Online refill rate</td>
<td>41.1%</td>
</tr>
<tr>
<td>Healthy lifestyle program participation rate</td>
<td>0.5%</td>
</tr>
</tbody>
</table>

* Based on BMI for all members (adults and children) with a measurement recorded within the last 12 months.
Overview of your clinical risk factors that could lead to chronic conditions

<table>
<thead>
<tr>
<th>Measure</th>
<th>Description</th>
<th>Your results (2013 Q1)*</th>
<th>Your results (2015 Q1)*</th>
<th>Kaiser Permanente adjusted regional average</th>
<th>National comparative data+</th>
<th>% of eligible members screened</th>
</tr>
</thead>
<tbody>
<tr>
<td>Weight (BMI)</td>
<td>% of adult members who are overweight or obese</td>
<td>68.6%</td>
<td>68.8%</td>
<td>67.5%</td>
<td>68.7%</td>
<td>70.6%</td>
</tr>
<tr>
<td>Cholesterol</td>
<td>% of members with borderline high or high total cholesterol</td>
<td>35.5%</td>
<td>36.4%</td>
<td>35.4%</td>
<td>N/A</td>
<td>66.5%</td>
</tr>
<tr>
<td>Blood pressure</td>
<td>% of members with blood pressure &gt;140/90</td>
<td>11%</td>
<td>8.5%</td>
<td>7.3%</td>
<td>33.3%</td>
<td>73.8%</td>
</tr>
<tr>
<td>Smoking rates</td>
<td>% of members who smoke</td>
<td>9.5%</td>
<td>9.3%</td>
<td>10.6%</td>
<td>19%</td>
<td>97.4%</td>
</tr>
<tr>
<td>Childhood obesity</td>
<td>% of child members who are overweight or obese</td>
<td>37.2%</td>
<td>35.1%</td>
<td>31.5%</td>
<td>31.7%</td>
<td>76.7%</td>
</tr>
</tbody>
</table>

* Includes members enrolled at the end of the measurement period. ISS (Insufficient Sample Size) will be displayed if eligible member population for the prevention measure is less than 30.

Your results: diabetes

<table>
<thead>
<tr>
<th>Blood sugar control</th>
<th>Eye Exam</th>
<th>Hospitalization</th>
</tr>
</thead>
<tbody>
<tr>
<td>% of members with diabetes who had known HbA1c &gt;9%</td>
<td>% of members that had an eye exam during the measurement period</td>
<td>Hospital admissions for all causes per 1,000 members with diabetes</td>
</tr>
</tbody>
</table>

- **Lower is better**
- **Higher is better**

### Blood sugar control

- **Peralta Community College**
- **Kaiser Permanente regionally adjusted average**
- **HEDIS® 75th percentile**
- **HEDIS 90th percentile**

### Eye Exam

- **Blood sugar control**
- **Eye Exam**
- **Hospitalization**

- **Blood sugar control**
- **Eye Exam**
- **Hospitalization**

* Continuously enrolled members during measurement period (April 01, 2014 through March 31, 2015).

† The Kaiser Permanente regionally adjusted averages are based on the weighted average of the purchaser’s distribution of members across the Kaiser Permanente regions for the time period being measured.

Note: Results will not be displayed if the eligible member population for the metric is less than 30.
### Your results: diabetes

<table>
<thead>
<tr>
<th><strong>ACE Rx usage</strong></th>
<th>% of members with diabetes who received an angiotensin-converting enzyme inhibitor or angiotensin-II blocker medication during the measurement period</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Blood pressure control</strong></td>
<td>% of members with diabetes who had a blood pressure level &lt;140/90 mm Hg during the measurement period</td>
</tr>
<tr>
<td><strong>Emergency visits</strong></td>
<td>Emergency visits for diabetes per 1,000 members with diabetes</td>
</tr>
</tbody>
</table>

### Metrics
- **ACE Rx usage**: Higher is better.
- **Blood pressure control**: Higher is better.
- **Emergency visits**: Lower is better.

### Notes
- The Kaiser Permanente regionally adjusted averages are based on the weighted average of the purchaser’s distribution of members across the Kaiser Permanente regions for the time period being measured.
- Results will not be displayed if the eligible member population for the metric is less than 30.

---

* Continuously enrolled members during measurement period (April 01, 2014 through March 31, 2015).

† The Kaiser Permanente regionally adjusted averages are based on the weighted average of the purchaser’s distribution of members across the Kaiser Permanente regions for the time period being measured.

Note: Results will not be displayed if the eligible member population for the metric is less than 30.

Diabetes: member engagement

Clinical intervention strategy
- Automatic enrollment in a diabetes management program
- Nurse outreach calls to assist diabetics with poor control over their condition
- Diabetes care gaps addressed at every office visit
- Regular physician follow-up visits including lab work and eye and foot exams
- Preventive medications to minimize complications

Available tools and services
- Interactive online diabetes classes
- In-person diabetes prevention and care classes
- Healthy eating classes
- Weight-management programs
- kp.org/diabetes
### Your results: adult exercise

#### 77.0% of your member population was measured in the last 12 months

<table>
<thead>
<tr>
<th>Active</th>
<th>Some activity</th>
<th>Sedentary</th>
</tr>
</thead>
<tbody>
<tr>
<td>Weekly minutes ≥ 150, meeting recommendation</td>
<td>Weekly minutes 31–149, not meeting recommendation</td>
<td>Weekly minutes &lt; 31, not meeting recommendation</td>
</tr>
<tr>
<td>0.0%</td>
<td>0.0%</td>
<td>0.0%</td>
</tr>
<tr>
<td>31.4%</td>
<td>18.2%</td>
<td>50.4%</td>
</tr>
<tr>
<td>30.3%</td>
<td>19.2%</td>
<td>50.4%</td>
</tr>
<tr>
<td>30.0%</td>
<td>19.6%</td>
<td>50.4%</td>
</tr>
</tbody>
</table>

#### 70.0% of your 2015 Q3 adult member population does not meet the minimum exercise recommendation

Total percentage of members ages 18 and older. Excludes members who utilized maternity services.
The customer values will be displayed as 0% if the eligible member population for the metric is less than 30.
Data isn’t available for any region prior to Q2 2013.

Peralta Community College | Measurement period: OCT-01-2014 through SEP-30-2015
Adult weight & exercise: member engagement

Clinical intervention strategy
- Body mass index (BMI) recorded, based on height and weight measurements
- Exercise as vital sign (physical activity) recorded
- Medical care team discusses weight-loss options and resources with patients

Available tools and services
- Online BMI calculator
- Food and activity diary
- Online healthy lifestyle program
- Weight-management and exercise classes
- Fitness club (preferred rates)
- Calorie counts posted at our hospital cafeterias (first major health care system in U.S. to do so)
- Fitness videos and weight-loss podcast
- Wellness Coaching by Phone
- Every Body Walk! free tools, programs, and app
- kp.org/weight
Engaging employees outside of the workplace

At our medical facilities  Online  At home
Video Visits

For your next appointment, you may be offered a video visit.

- Convenient access from your home or office
- Secure and easy way to visit your doctor
- Saves travel expense and time

Connect with your doctor securely over the Internet using your computer and webcam, or with your iPhone®, iPad®, Android phone or tablet computer.

Visit kp.org/mydoctor/videovisits for more information.
The value of effective engagement

Employees are healthier and more productive

- Americans with easy access to their online personal health record (PHR) are more engaged in their health and medical care:\(^1\)
  - 38% feel more connected to their doctors
  - 32% used their PHR to improve their health
- Employees in chronic condition management programs have fewer doctor’s office visits, fewer emergency visits, and shorter hospital stays.\(^2\)
- Members have participated in more than 1 million online healthy lifestyle programs.\(^3\)

---

## Plan your approach
Tools available to Kaiser Permanente members

<table>
<thead>
<tr>
<th>Online resources</th>
</tr>
</thead>
<tbody>
<tr>
<td>▪ Total Health Assessment</td>
</tr>
<tr>
<td>▪ Healthy lifestyle programs</td>
</tr>
<tr>
<td>▪ <a href="http://kp.org">kp.org</a> tools, including email your doctor’s office, view lab results, prescription refills, and more</td>
</tr>
<tr>
<td>▪ Live health talks with Kaiser Permanente physicians and experts</td>
</tr>
<tr>
<td>▪ BMI and health calculators</td>
</tr>
<tr>
<td>▪ Health and drug encyclopedias</td>
</tr>
<tr>
<td>▪ Self-exam and symptom tools</td>
</tr>
<tr>
<td>▪ Videos and podcasts by health topic</td>
</tr>
<tr>
<td>▪ Healthy recipes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Membership extras</th>
</tr>
</thead>
<tbody>
<tr>
<td>▪ Reduced rates at fitness clubs</td>
</tr>
<tr>
<td>▪ Reduced rates for complementary medicine (acupuncture, chiropractic)</td>
</tr>
<tr>
<td>▪ Wellness Coaching by Phone</td>
</tr>
<tr>
<td>▪ Educational theater</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Facility resources</th>
</tr>
</thead>
<tbody>
<tr>
<td>▪ Health education classes and peer support groups*</td>
</tr>
<tr>
<td>▪ Calorie counts in hospital cafeterias</td>
</tr>
</tbody>
</table>

* Availability varies by region. Some classes require an additional fee.
Questions and next steps
Affordable Care Act Timeline

Small employer tax credit

Over-the-counter drugs may only be reimbursed with a prescription

Patient-Centered Outcomes Research Institute (PCORI) Fee

Medical device fee (may increase employer costs)

Summary of Benefits and Coverage and the Uniform Glossary

60-Day Advance Notice of Mid-Year Benefit Changes

W-2 reporting of employer-sponsored health coverage for employers who file 250+ W-2s

Mandatory reporting of employer-sponsored health care coverage for employers who file 250+ W-2s

Health FSA contributions limited

Employer deduction for Medicare retiree drug subsidy eliminated

Quality reporting guidance due (March 23)

Exchange Reinsurance Fee reports due November 15

Exchange coverage available for individuals/small employers

Individual mandate to obtain health coverage

Federal premium tax credit to buy Exchange coverage

Waiting periods over 90 days prohibited

Annual limits prohibited

Pre-existing condition limits for adults prohibited

Grandfathered plans must cover all children to age 26

Incentive for wellness participation increases to 30%

Insured small group plans must cover essential health benefits

May not discriminate against individuals in clinical trials

Insured small group plans must comply with limits on deductibles (REPEALED)

Must comply with limits on out-of-pocket maximums

May not discriminate against a provider acting within scope of license

Excise tax on high cost plans ("Cadillac Tax")

Provisions affecting an employer's costs and type of plans to sponsor

Provisions impacting health FSAs, HRA's, or HSA's

Provisions impacting plan design that apply to all plans

Provisions impacting plan design that only apply to certain non-grandfathered plans

Administrative requirements

Effective Date: The first plan year beginning on or after this date.
## Benefits Home Page Activity

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Visitors</td>
<td>743</td>
<td>856</td>
<td>912</td>
<td>914</td>
<td>45</td>
<td>27</td>
<td>18</td>
</tr>
<tr>
<td>Page Views</td>
<td>1,801</td>
<td>2,813</td>
<td>6,875</td>
<td>6,189</td>
<td>338</td>
<td>200</td>
<td>138</td>
</tr>
<tr>
<td>Spiders</td>
<td>559</td>
<td>753</td>
<td>592</td>
<td>597</td>
<td>41</td>
<td>23</td>
<td>18</td>
</tr>
<tr>
<td>Feeds</td>
<td>99</td>
<td>565</td>
<td>5,325</td>
<td>4,648</td>
<td>252</td>
<td>147</td>
<td>105</td>
</tr>
</tbody>
</table>

![Graph showing visitor, page view, spider, and feed activity over time](chart.png)
Benefit Bridge Features

Peralta Community College District Life Event online benefits enrollment is easy with BenefitBridge!

- View current plan year benefits
- Compare plan options
- Complete qualifying life event benefits enrollment
- Quick links: carriers, health resource libraries and employer documents
- Planning tools: retirement and other life events
- Available 24/7 via the Internet

Registration & Login

- Already have login credentials? Login to BenefitBridge at: www.benefitbridge.com/veralta
- Forgot your username or password? Click on “Forgot Username/Password”
- Please add or update your email address to receive an email confirmation of your enrollment approval.
- Need to create login credentials? Go to www.benefitbridge.com/veralta and follow the instructions below.

Step 1 ➔ Select “Register” to Create an Account
Step 2 ➔ Create a Username & Password
Step 3 ➔ Select “Continue” to access BenefitBridge
(Print page with account information)

Enrolling in Benefits

Access the Enrollment Center via the Enrollment tab or the Begin Life Event Enrollment button (see sample screen below).

Need Help? Contact BenefitBridge Support: (800) 814-1862; Mon. – Fri., 8:00 am – 5:00 pm PST
Please click on the links below for a summary of the individual benefit plans to help you make informed decisions. Access the links to the right for more detailed information about the carriers and the offered plans.

### Plans

#### Current Year

**Health**

### Medical

- Kaiser Permanente Insurance Company - HMO - Local 39
- Kaiser Permanente Insurance Company - HMO - All Employees Except Local 39
- Anthem Blue Cross - PPO - Trad - Local 39
- Anthem Blue Cross - PPO Lite - Local 39
- Anthem Blue Cross - PPO Lite
- Anthem Blue Cross - PPO Lite - Trad

### Dental

- United HealthCare Insurance Company - UHC DMO Dental

**Click here to Compare**
Survey-Websites (Homepage and Benefit Bridge)

1. What is the reason you visit the benefits website:
   - For enrollment information
   - For updates to workshops and activities
   - For wellness resources
   - For tax-deferred planning resources
   - For voluntary and/or other vendor benefit information
   - Other (list other)

2. How often do you visit the website for benefits-related information
   - Weekly
   - Monthly
   - After an email from the benefits office
   - At my union's request

3. If you are benefit-eligible, have you confirmed that your life insurance beneficiary is current on the secure portal Benefit Bridge (in use since October 2014)?
Survey-Health & Wellness

1. Have you taken a health-risk assessment (define it)
   - Kaiser
   - CoreSource
   - Elsewhere

2. Do you know if anyone in your family covered under a Peralta plan has taken a Health Risk Assessment?

3. Did you know that the District has a health & Wellness portal on the Benefits Website?
Survey-Other Activities

- Are you interested in a spring tailgate with the Oakland A’s.
  - Tailgate food and ticket $50
- Would you be interested participating in a Napa Valley wine tour as fun-raiser for the Foundation. We want to gage interest in a variety of interests.
  - 4 winery excursions $100
  - 3 winery excursions $75
- Would you be interested in participating in a 3-5 day cruise in May 2015 (our last group cruise was in 2009) there is a renewed interest. Cost $300-400
- If you attended any workshops delivered by the Managed Health Network, Employee Assistance Program, did you find it useful?
Next Newsletter December 2015

- Affordable Care Act Update (new form)
- What if payments are received late
- Medicare D Annual Announcement
- New limits for 2016 (Flexible Benefits, 403(b))
- Customer Service Resources
- Save the Dates:
  - 12/10
    - Retirement Planning Dinner sponsored by Teacher’s Pension
  - 2/6
    - Medicare Campaign
  - 1/25-2/29
    - Part Time Hourly Faculty Open Enrollment
  - 5/5/16
    - Spring Open Enrollment
- Reimbursement Forms Deadlines
  - 12/31/15 Kaiser
  - 03/31/16 for 2015 reimbursements for Medicare
- In memoriam