Healthy Boiler Committee Meeting 2/2/2018

Attendees: Jen Hodges, Keith Helton, Taylor Higner, Nicole Noel, Mandy Smith, Beth McCuskey, Alexis Norton, Pam Aaltonen, April Sauer, Evan Perrault, Candace Shaffer, Grace Hildenbrand, Robert Nowack, Denny Darrow

Dial-In: Michelle Warren, Judy Tillapaugh (IPFW), Kendra Gardin (PNW), Rachelle He

1. 2018 Health and Wellness Updates

- a. PUSH to offer imaging for radiology exam to all benefits-eligible faculty and staff and their dependents
 - i. Films only; includes the reading of the film
 - ii. Referrals have been coming from the Center for Healthy Living
 - iii. There have already been several taking advantage of this new offer
- b. Tobacco Cessation
 - i. Partnership with Purdue Pharmacy, CHL and HR to serve WL students, faculty and staff
- c. Anthem Concierge
 - i. Full time FTE at CHL
 - ii. They will provide case management to employees, helping them understand our benefits and services at the CHL
 - iii. They are here to support and refer patients to appropriate services
 - iv. Goal is to have concierge start in May
 - v. CHL / Benefits will be a part of the screening process for this individual
 - vi. Concierge will not only be a health professional but it will be a more well-rounded person with understanding of benefits as well
 - vii. Regional campuses will have access to the concierge through the phone
 - viii. Questions can be directed to concierge if employee comes to HR

2. Center for Healthy Living

- a. Staffing Updates
 - i. One to One Health started in July; had conversations with current staff and selected the individuals that would fit best with the environment
 - ii. Dr. Isaacson was planning on staying through transition of vendors
 - 1. He provided 2 weeks' notice and moved back to Wisconsin
 - iii. Locum, temporary provider, is starting Monday, 2/5/2018, but One to One Health is still looking for a replacement
 - 1. One to One Health is holding providers to certain standards so it is making the process a little more difficult
 - iv. Looking for possible Nurse Practitioner options
 - v. Receiving feedback that turnover is high
 - 1. Much of the turnover to date have been individuals who were not aligned with the approach Purdue and One to One wants at CHL
 - 2. CHL is working really hard to make sure the people there are friendly and there to stay
 - vi. New dietician
 - 1. Seeing a lot of new patients

- 2. Services provided include nutrition recommendations, pregnancy nutrition, weight loss, diabetes, bariatric surgery, etc.
 - a. Wide variety on what she can offer
- vii. 2 new pharmacists
 - 1. Coaching is available with pharmacists
 - 2. Wide variety of appointments available to employees
 - 3. Working on partnership with Purdue
 - 4. Had 8 new patients since article went out last week

viii. Wellness Coaches

- 1. Nutrition Coach
- 2. Holistic Coach
 - a. Strength is finding barriers
 - b. Writing Healthy Boiler Blog
 - c. Author of the wellness emails that are going out to Purdue employees
- 3. Coaching sessions available in-person or via telephone
 - a. 15 minute minimum, but could last up to an hour depending on the patients' needs
- 4. Possibly work with extension educators to run programs
 - a. Jen Hodges is meeting with one next week
- b. Customer Satisfaction
 - i. Percentages are looking good
 - ii. Working on "professionalism of the person who took your call" 86% had this comment
 - 1. Sent out over 1,000 unique individuals over a 3 month period
 - a. 429 completed the survey entirely

3. Healthy Boiler Wellness Program

- a. Registration is open; please register if you have not already
- b. One to One Health is partnering with Propel and manages the site
- c. 3,200 individuals have registered so far
 - i. 2,771 employees
 - ii. 469 spouses
 - iii. 274 referrals
 - iv. There are 19 active competitions within the portal
 - 1. Competitions have not been promoted but are enabled for users to implement
 - 2. There are a variety of competitions going on
 - a. Wellness/nutrition/running/triathlon, etc.
 - 3. Planning to have a Purdue Today article about competition
 - Dean Barker is going to have a school by school competition for spring fling
 - i. He is very active in wellness so using this to get others involved will be great
 - ii. Wants to know which department is in the lead for having people registered
 - 1. Jen Hodges will get this
- d. Ongoing Communication
 - i. Monthly emails
 - 1. HR

- 2. One to One Health
- ii. Wellness Blog
 - 1. www.healthyboilerpurdue.com
- iii. Social Media
- iv. Home mailers
- v. Presentations through Benefits Ambassadors
 - 1. Healthy Boiler
- vi. Purdue Today Articles
- vii. Healthy Boiler Tagline
 - 1. Your benefits. Your choices. Your well-being.
 - 2. Ties into previous campaign
- e. Social Media Sites
 - i. Facebook
 - ii. Twitter
 - iii. Instagram
 - iv. LinkedIn
 - v. WordPress (blog)

Suggestions or feedback are welcome for different communication options

4. Open Enrollment Survey

- a. 2,852 took the survey
 - i. 80% at Wes Lafayette
 - ii. Other campuses had less participation in the survey
 - iii. Evan to provide complete percentages for each location
 - iv. The incentive will be mailed out soon to participants
- b. Usefulness of Tools
 - i. Benefits Website, PT Article and Mailed Benefits Guide were the most useful
- c. Time Taken
 - i. Less than 45 minutes to complete OE survey
- d. Opinions on Benefitfocus
 - i. Wasn't as clear as previous tool
 - ii. Hopefully next year things will be more developed
 - iii. 20% said it was harder than previous
- e. What areas of this tool did you have difficulties with?
 - i. There was not an option to select what you had the previous year; possibly have previous year selections with in the tool for next year
 - ii. Wasn't really clear if the benefits that I selected were actually recorded
 - iii. Mandatory requirements
 - 1. It should be stated that you do not have an option to opt out
 - iv. 400 comment responses for this area
- f. Suggestions to improve Benefitfocus
 - i. An easy button needs to be implemented
 - ii. Health plan enrollment to be a separate process
 - iii. Clearly list the items that need to be completed
 - iv. Would like to see a side by side comparison to be sure you are selecting the correct benefits
 - v. People wanted to know that you actually completed the process/benefits

- 1. No confirmation email was sent out
- 2. Just got a comment at the top that said that you completed it
- 3. This can be done on the backend but at the time they were not aware that they could select this option
- vi. Attitude toward personal health
 - 1. Overall people think that they are in good health
 - a. However...people take into account that they feel good today but not overall
- vii. Attitude for CHL
 - 1. Most do not have an attitude for it
 - 2. Most do not know if you can establish a PCP at the CHL
 - a. This needs to improve; working on awareness
 - b. A new message needs to go out regarding this
 - i. Dr. Keith Helton agreed to this
 - 3. There is room for improvement for the Center for Healthy Living
- viii. Center for Healthy Living Opinions
 - 1. 1,389 responses to this question
 - a. "I will never return"
 - b. "Staff not professional"
 - c. "Heard that they are not great, will not attend myself because of what I heard"
 - d. "Never used it"
 - e. "I'd like to use it if I can select PCP"
 - f. "People think that PU is going to find out their information if they go to CHL"
 - g. "I don't know if it is a real doctor's office"
 - h. "A lot have tried to get in but cannot get appointment for 2 weeks"
 - i. "Looks abandoned"
 - i. CHL plans to do a video tour, introduce to doctors
 - 1. This will help reduce uncertainty, hopefully
 - ix. Key takeaways for OE Survey
 - 1. Mailed benefits guides are great
 - a. Mailed early enough so that they can be reviewed beforehand
 - b. Send a follow up article
 - 2. Strong opinions about Benefitfocus
 - 3. Strong opinion of CHL
 - a. There is room for improvement for the center
 - b. Update testimonials on the site to more current ones

5. Population Health

- a. Top 5 chronic conditions
 - i. Diabetes
 - ii. Hypertension
 - iii. Lipid disorders
 - iv. Depression
 - v. Persistent asthma
- b. Top 5 health indications
 - i. Musculoskeletal system

- ii. Circulatory
- iii. Neoplasms malignant
- iv. Digestive system
- v. Nervous system
- c. Overall Spend
 - i. Northwest is the most cost efficient for healthy and moderate users
 - ii. Fort Wayne is least efficient
 - 1. CHL is onsite
 - 2. Working with them in creating efficiencies
 - 3. They are in the beginning stages of assessments
- d. Medical Spend
 - i. ER costs
 - 1. Watching this with the Anthem rules effective 1/1/2018
 - 2. ER spend is around benchmark but interested to see moving forward
 - Lab costs
- e. Pharmacy Spend
 - i. 41% specialty
 - ii. \$290,000 decrease in spend for Crestor in the last 12 months
 - iii. Prescription running through the medical plan at 9%
 - iv. Looking at infusion at CHL

6. Task Force

- a. Two that are going to start in the next week
 - i. Mental health
 - 1. Mental health is already implemented but working on broadening this area
 - a. Is there interest for Emotional Wellness?
 - b. What is the difference between the two?
 - 2. Depression is one of the top 5 conditions
 - 3. CAPS and PUSH looking at mental health on campus
 - a. What are the options?
 - b. One to One Health is going to help; tie in with EAP
 - 4. More to come
 - a. Know there is a need but looking, researching, and bringing outside people in for help
 - ii. Musculoskeletal
 - 1. One to One and LHD working together on this
 - a. Also working with workers comp

7. Next Meeting April 19 at 1:30PM in Stewart

8. CVS feedback:

- a. HR is not getting a lot of feedback
 - i. Only about pre-auth
- b. CHL is getting a lot
 - i. It has been difficult for pre-auth
- c. Nicole stated that there is a lot of feedback on what CVS is not allowing

- i. For example, not filling what the prescriptions states but filling it differently and not informing the patient of the change
- ii. Candace stated that we need to hear the feedback that Nicole shared

Comments from Committee:

- 1. Felt that we did not do enough flu shots even though we did over 6k shots in 2017
 - a. Release time for getting flu shots/physical etc.?
 - i. More conversation is needed here
 - ii. CHL has the shifts that go out for the flu shots on campus/departments
 - iii. We need metrics on this so that we can make better decisions
 - iv. We do not reach enough students for immunizations
 - 1. Is there messaging that we can send out so that we can push where the resources are on campus?
 - 2. Have flu clinics at the dinning courts or Co-Rec, etc.?