



Finance Committee Meeting

AGENDA

October 7, 2014

I. **CALL TO ORDER**

II. **MATTERS BEFORE COMMITTEE**

1. [WORKsiteRx Clinic Wellness](#)
2. [Approval - Insurance Plan Amendment](#)

III. **ADJOURN**



Finance Committee Meeting

AGENDA

October 7, 2014

Item:

WORKsiteRx Clinic Wellness

Department:

Additional Information:

Financial Impact:

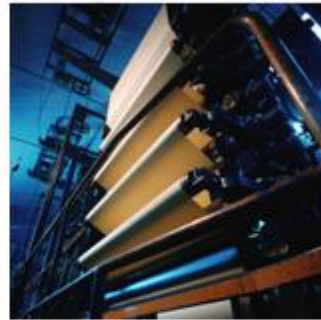
Budgeted Item:

Recommendation / Request:

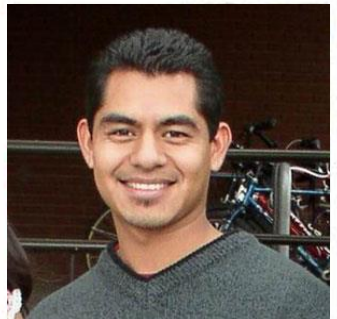
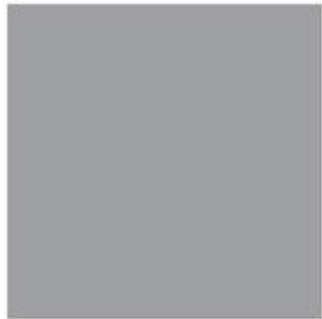
Viewing Attachments Requires Adobe Acrobat. [Click here](#) to download.

Attachments / click to download

 [Health Coaching Program](#)



Health and Wellness Coaching Program



Health and Wellness Incentive Program Expansion

- Current incentive program
 1. Complete HRA and biometric screening by deadline
 2. Points and premium adjusted based on their health status
 3. 2015 premiums set based on wellness status point system
 - 4. Employees lack support to become healthier and earn additional points as their reward**
- Expanded incentive program
 1. Complete HRA and biometric screening by deadline
 2. Points and premium adjusted based on their health status
 3. 2015 Premiums set based on wellness status point system
 - 4. Employees now have a dedicated health coach to guide and support them with reducing their health risks, improving their health status, and reducing their premium**

Item # 1

Health and Wellness Coaching Program Structure

- Expand program to offer employees opportunity to earn points as their health improves – greater rewards for reducing risks
- Points are earned based on health risk assessment AND increased by 1 point for participation with the health coach
- Participants must stay in the program, work to reduce their health risk factors to keep the 1 point
- Progress assessed by health coach quarterly - premium reduced for each goal met

Item # 1

Health and Wellness Coaching Program Structure

- Participants that drop out of the program lose points gained and are adjusted to original point level – no reentry permitted until next plan year event
- Coaching sessions occur every two weeks across a 12-week period – initially 30 minutes and shorten to 15-20 minutes
- Next level monitoring occurs every 3 months
- Participants meeting their goals move to monitoring every 6 months (with updated labs as required)

Health and Wellness Coaching Program Structure

- Coaching sessions conducted using MediSprout
 - Secure end-to-end solution / high-resolution web video
 - Private kiosk locations will be setup at Public Works, Fire, City Offices, other locations to ease access and improve participation
- Health coach will provide 16 hours of coaching per week on Tuesday and Wednesday
- Program cost to expand health coaching to include all participants with one or more risk factors - \$15k-\$20k



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 [Insurance Plan Amendment](#)

Amendment 111-2014-02

Effective April 1, 2014

**Plan Amendment to Plan Document and Summary Plan Description
of
City of Monroe Group Health Plan
Restated April 1, 2014**

In the Eligible Classes of Dependents, Page 12, the following is **deleted**:

An Employee's "Child" includes his natural child, stepchild, adopted child, a child placed with the Employee for adoption, or a Foster Child. An Employee's Child will be an eligible Dependent until reaching the limiting age of 26, without regard to student status, marital status, financial dependency or residency status with the Employee or any other person. When the child reaches the applicable limiting age, coverage will end on the last day of **the calendar year in which the child reaches the limiting age of 26.**

It is replaced by:

An Employee's "Child" includes his natural child, stepchild, adopted child, a child placed with the Employee for adoption, or a Foster Child. An Employee's Child will be an eligible Dependent until reaching the limiting age of 26, without regard to student status, marital status, financial dependency or residency status with the Employee or any other person. When the child reaches the applicable limiting age, coverage will end on the last day of **the child's birthday month.**

ACCEPTED:

by _____
City of Monroe

Date: _____