

**Fall River Consulting Group Health Care Recommendations for
The University of Alaska, December 7, 2009
What Was Done With the Recommendations**

Recommendations

1. **Retain a consultant who can provide quarterly updates to the JHCC about plan costs and utilization patterns.** The involvement of a knowledgeable consultant will help the JHCC

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7. **Implement Caremark's Specialty Guideline Management program.** Although the savings from this change will be modest, this program is primarily focused on quality of life issues for members. It is designed to assist employees, dependents and their families.

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Adopted Recommendation: The zero copay program was implemented. Active participants in the disease management program receive generic medications for their covered condition with no copay at the time of service. The \$5 brand name copay program was not implemented.

11. **Authorize WIN for Alaska to share Health Risk Assessment and bio-metric data collected by WIN with the disease management vendor. This step would be premised on employee knowledge and consent. Confidentiality and security of this information are...**

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What Was Done With the Recommendations

need to reach more employees, and ideally, spouses/partners as well. Emphasis should be placed on trying to reach more high risk individuals.

Adopted Recommendation: Rural Individual Health Planning (RIHP) sessions were implemented, utilizing telephonic coaching and using the available sessions leftover from the

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will take if an employee fails to notify IIA when dependent is injured or ill

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20. **Expand the requirements for the \$100 Wellness Incentive.** The JHCC recommends that \$100 incentive amount now provided for each member who completes the HRA should be

additional requirements: that the employee be willing to undergo a biometric screen, and consent to have both the HRA and the biometric information released to the DM vendor. Currently, an employee or covered person/dependent who receives a \$100 incentive must complete the HRA

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now believe these types of programs will be key to driving engagement in the wellness program to help control health plan costs.