



Welcome to the latest edition of edHEALTH News. This bi-annual publication keeps members informed of news and activities within Educators Health, LLC (edHEALTH).

Urgent items will continue to be communicated via e-mail. Feel free to share the newsletter with colleagues. If you would like to be added to the distribution list, please contact the edHEALTH Administrator, Jack Stone, at jack.stone@usi.com.

edHEALTH... goes SOCIAL!



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A NOTE FROM THE edHEALTH PRESIDENT

Dear Members,

Welcome to the summer issue of The edHEALTH News.

The edHEALTH LLC Board of Managers and the edHEALTH Captive Subscriber Advisory Committee (SAC) held their quarterly meetings in May 2016. Items on the agendas dealt with routine business such as the review of the 4th quarter financial results, operational matters, budget parameters for 2017, and a review of member recruitment activities. The board also spent a considerable amount of time on continued strategic planning for the future of edHEALTH.

It was great to see so many edHEALTH members and partners at our annual members meeting held on June 20, 2016 at the Babson Executive Conference Center. It was a great opportunity to celebrate our 3rd anniversary, share the exciting developments of the past year, and plan for our continued growth. July 1st marked our 3rd anniversary and it is my pleasure to share a brief summary of the past year and our plans going forward:

- * At the April meeting of CEVoNE, the edHEALTH captive paid its first distribution. The full \$1.2M was paid back to all twenty-two of the initial investors.
- * We have seen strong financial results and have retained \$4.5M in savings that would have otherwise gone to commercial carriers.
- * Investment of captive surpluses with Performa Investment Managers.
- * Effective January 1, 2017, edHEALTH will join the Preferred University Rx Purchasing Coalition (PURPC). edHEALTH will join several other universities in carving-out pharmacy benefit management with Optum RX. The carve-out will save members more than \$3M in the first year of membership.
- * Visual Identity and Website – edHEALTH has partnered with the Idea Agency (<http://www.ideaagency.biz>) to help define our visual identity, our marketing strategy, and a robust website that will support both current and prospective members. We are very excited with the work to date and hope you enjoy the new logo and layout of the newsletter! And please check us out on  and .
- * Continued work on Data Analysis, Wellness and Disease Management Programs.

As we look towards 2017, we are focused on our continued successes and growth. Due to the great publicity we have had over the past year, we have inquiries from schools from all over the country. We are working to establish relationships with national carriers/TPA's to meet the needs of growing membership base.

We would like your assistance in sharing the good news about our edHEALTH. The more members we have, the better the savings and efficiencies will be for all of us. If you know colleagues at non-member educational institutions, we would like your help in making introductions or educating them on the successes of edHEALTH. We are developing materials that can be shared electronically which will describe who we are, what we do, and why we do it. If you would like to be part of edHEALTH's growth in membership, please let either Jack or me know.

The next official meetings of the LLC Board of Managers and the Captive Subscriber Advisory Committee (SAC) will be held in August 2016. Please let me know if you have a topic you would like raised at these meetings.

Have a safe and happy summer!

Tracy Hassett

IDEA AGENCY: edHEALTH BRAND UPDATE

Graduating to the Next Level

With a strong launch, over one dozen member institutions, and our first official employee, edHEALTH was ready to move the organization to the next level. In order to build our roster with other New England educational institutions, as well as keep an eye towards eventually expanding to a national audience, we knew we had to up our game by developing a professional brand.

EdHEALTH turned to Idea Agency – a New England firm with expertise in brand development and integrated marketing to help move us to this next, crucial phase. Utilizing their PURPLE® process for brand development, Idea Agency invited edHEALTH to their offices in Sturbridge, MA to partake in a daylong workshop to help discover the best position for edHEALTH in the marketplace. With a focus on innovation, transparency, ownership of the member, and ease – the agency helped edHEALTH put its stake in the ground with a new image and a new visual and messaging platform.

edHEALTH brings common sense to healthcare coverage: lower costs, transparent rates, member-tailored plans. Our growing consortium of educational institutions lends us power through numbers. Power to control costs. Power to ensure quality. Power to meet members' specific needs and improve the face of healthcare.

We believe that there is a better way for educational institutions to access affordable, quality healthcare. We appreciate the financial challenges facing our schools today and the rising demands on tuition. We want to positively impact the trend of increasing healthcare costs, and we know what works.


Our new brand identity is clean and fresh and reflects the personality that we are as an organization: bold, innovative, empowering and fearless. From the logo to the typography to the photography and graphics, every element reflects the edHEALTH pledge to simplify the complex, provide transparency, and collaborate with each other. Note that the “A” in health is not only an asterisk, but multiple arrows, coming together to form something even better.

Isn't that the true essence of edHEALTH?

Idea Agency is driven to uncover all the possibilities to help their clients build a path to better futures through brand development, integrated marketing, and idea generation. Led by Christine Tieri, the only Certified Brand Strategist in New England, Idea Agency harnesses a culture of passion, process and the promise to bring their special X-factor to everything they do.

BRAND PROMISE

Bringing a cost-saving and innovative solution that offers members collaboration, transparency, and a seat at the table, edHEALTH is the powerful answer to impact the trend in rising healthcare costs.



Collaboration, transparency,
and a seat at the table.

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SPRING's ACTUARIAL NEWS

Financial Results

EdHEALTH closed 2015 with strong financials. Overall, edHEALTH produced captive net income of \$1.4M on \$6.4M of stop loss premium. In the first quarter, 2016 CEVoNE was dividended its original \$1.2M contribution out of excess surplus earned over the first three years of operation. In the first quarter of 2016, edHEALTH Captive continued its string of positive results with a small net income of \$18K.

2016 renewal increases averaged only 3.7%, well less than industry trends of 7% - 8%. With the addition of Salve Regina, annualized 1st Quarter, 2016 Premium and Equivalents total \$145M, covering almost 9,500 employee lives.

PCORI Fees / Form 720

EdHEALTH has calculated and provided you with the ACA PCORI fee along with instructions on filling out Form 720. As a friendly reminder, if you have not already done so, please complete your form and pay the fees by July 31, 2016. If you have any questions, please contact Steven Keshner at Spring Consulting Group steven.keshner@springgroup.com or 617-589-0930 x120 for assistance.

Large Claims Reporting

We have heard you...out of the back of the June edHEALTH Controller's meeting, edHEALTH will start sharing monthly large claim reports with each school. This should help schools better understand the monthly ups and downs on claim funds resulting from large claims whether short of the stop loss attachment point or exceeding the stop loss point and obtaining a reimbursement from edHEALTH Captive.

Claims Analysis

This summer, edHEALTH is updating last year's benchmark analysis of cost and utilization results by types of service to include year over year results as well. Furthermore, benchmarking of claims by diagnosis will be shared as well. This should help guide schools individually and collectively in choosing wellness initiatives and plan designs.

2017 Renewals

edHEALTH will deliver your renewals by August 26, 2016 and Spring will shortly be reaching out to you for your requested plan offerings, stop loss levels and current census. Also, if you have not yet shared your current Summary Plan Description with edHEALTH, now is a good time to do so.

For those schools that have been able to build up significant funds in their child accounts, in conjunction with the renewal or immediately thereafter, edHEALTH will provide them with guidance on premium holiday considerations.



edHEALTH CAPTIVE ASSET MANAGEMENT

Investing is an important part of how insurance companies maximize the time value of money when holding capital and premium dollars until claim payments are due. As a result of very positive early results, the edHEALTH Captive is in a position to begin investing its funds sooner than originally anticipated.

In 2015, AIG Insurance Management Services, the Vermont captive manager for the edHEALTH Captive, facilitated an investment advisor selection process with the Subscriber Advisory Committee (SAC) members. The selection process began with a request for proposals, which was circulated among various investment advisors who were invited to submit proposals. The firms included those with experience in managing assets for captive insurance companies, as well as firms whose asset management experience was with not-for-profit entities. Proposals were received, summarized, and made comparable with back-and-forth Q&A. A sub-committee of SAC members, which included the edHEALTH Captive's Treasurer and edHEALTH's Executive Director, narrowed the pack down to three candidates based on the responses and materials received. The three finalists were invited to present in person to the entire SAC as part of the edHEALTH Captive November 2015 annual meeting in Vermont.

After the presentations, and additional follow up with the candidates, the SAC selected Performa Limited of Burlington, Vermont to be the edHEALTH Captive's investment advisor. The selection of Performa Limited was a reflection of their experience and teamwork evidenced in the November meeting as well as during the follow up Q&A process. Performa Limited is an independent, employee-owned asset management firm, focused on providing customized investment solutions for captive insurance companies and institutional investors.

In the 2nd quarter of 2016, the edHEALTH Captive has moved \$4 million to be invested in Performa's bond fund. The Captive will reevaluate funding levels on a regular basis to consider if and when additional investments are appropriate. Although the need for the SAC to select an investment advisor arose sooner than originally anticipated, it was agreed by all that this was a good "problem" to have!



New Telemedicine Coverage Available to Members

Effective July 1, 2016, Harvard Pilgrim will add telemedicine as a standard benefit for all commercial, non-Medicare plan members.

What is Telemedicine?

Telemedicine is commonly referred to as a virtual visit or a video visit. Members see a doctor through real-time, Skype-like technology—using a smart phone, tablet or computer. This allows them the option to get care without needing to travel to a provider office or urgent care center. Coverage is primarily for on-demand, minor urgent care medical visits such as cold and flu, rashes and skin issues, upset stomach, and pediatric issues.

Harvard Pilgrim has added Doctor on Demand, a well-known national telemedicine provider group of board-certified physicians, to our network. Additionally, members may receive covered telemedicine services from any participating provider who also offers these kinds of services.



This addition is part of our continued offering of high-quality, competitive products and innovative services in a rapidly changing marketplace. Telemedicine aims to improve member experience through a convenient method of care delivery outside of more costly locations like the emergency room (ER), when ER services are not necessary.

Additional Information

- Visits with Doctor on Demand will not require a referral, and member cost sharing will be equal to the PCP cost sharing.
- Doctors providing services are licensed in the state the member is calling from.
- Doctor on Demand has the capability of servicing members in multiple languages. Members may need to schedule an appointment for certain languages.

If you have any questions, please contact your Account Executive.



Tufts Health Plan Launches New Care Management Programs

Tufts Health Plan works collaboratively with providers to help achieve the best health outcomes for your employees – our members – with the services of our care management programs. By sharing with providers the plans for care and treatment, we can help prevent gaps in care and overlapping services. To build on this collaboration, we have launched new care management programs for 2016, such as: Coordinated Outreach for Emergency Department, Healthy Aging, Enhanced Quality of Life, Behavioral Health Integration, and Substance Abuse Case Management.

Coordinated Outreach for Emergency Department

We know that Primary Care Physicians (PCPs) typically reach out to their patients (our members) within 48 hours of a visit to an emergency department (ED). Our care management team supplements this effort by contacting members seven to ten days after their ED visit, whether it was for a medical or behavioral health issue. Strong member engagement rates of 89% and positive member feedback show the effectiveness of this program.

Healthy Aging

A growing number of employees today are delaying retirement and continuing their coverage under a commercial health plan. In fact, our membership of individuals age 65+ rose 36% from 2014 to 2015.

The health care needs of this population are complex and almost double the cost of the general population covered by our commercial plans. To better manage the care of these members, our clinicians who specialize in our Medicare products lend their expertise to develop care plans for conditions and needs that are common among older adults. For example, care plans can address fall prevention, incontinence, cognition, prescription drugs, or the strain of being a caregiver.

Enhanced Quality of Life

This program provides support for members with serious and complex illnesses. Our care managers focus on managing symptoms and coordinating home-based palliative care. Our personal approach looks at an individual member's clinical treatment plan and his or her health care providers to enhance the quality of care and maximize plan benefits.

Behavioral Health Integration

We take an integrated approach to managing behavioral health care by also incorporating substance abuse and primary care services. By doing so, we reduce the chance that a medical or behavioral health problem is overlooked, and we can address both issues more efficiently.

Our program identifies and prioritizes complex health needs for effective treatment in the following ways:

- Screening for behavioral health issues across all of our health management programs.
- Our medical case managers working collaboratively with our BH case managers, including the use of a shared single system, member record and platform for effective coordination.
- Incorporating medication management and adherence programs into both our medical and our behavioral health care management programs.
- Assisting members affected by substance abuse with specialty outreach and transition programs.
- Integrating the coordination of care for behavioral services at inpatient facilities.

Substance Abuse Case Management

This program is designed to meet the unique needs of members affected by substance use disorder. Our Behavioral Health clinicians contact members who have recently left the hospital or inpatient facility following detoxification.

The clinicians also work with the hospital or facility to see that the whole needs of the patient are taken into consideration in planning for their care. For example, a patient who is dealing with medical problems, or other behavioral health issues, at the same time as a substance abuse issue requires a comprehensive approach.

When a patient is discharged, the Behavioral Health clinician reviews the discharge plans with the individual to address any barriers that may prevent him or her from following them. The clinician also sees that the follow-up program for the patient, our member, includes referrals to programs and providers that follow evidence-based practices. These referrals help achieve significantly better health outcomes and reduce the likelihood that the member will need to be readmitted for additional inpatient care.

The clinician also works with the member to help him or her form an ongoing care plan and commit to it. The clinician continues to follow the member through the early stages of recovery to keep the individual engaged and less prone to relapse.

Our mission is to improve the health and wellness of the diverse communities we serve. These new care management programs will be key elements of this mission in the years to come.

TUFTS  Health Plan

STATUS OF PHARMACY IMPLEMENTATION

edHEALTH membership in PURPC and coordinated implementation of OptumRx as our Pharmacy Benefit Manager (PBM) is in progress for a January 1, 2017 effective date.

The decision to outsource pharmacy services is critical to the edHEALTH mission to provide a competitive offering in the market. Drug trend reports published in 2014 indicated that Express Scripts was reporting an overall prescription drug trend at 13.1% (30.9% for specialty). During the same time period, CVSHealth was reporting an overall trend of 12.7% (32.4% for specialty). Catamaran (now part of OptumRx) reported an overall trend at 5.7% (20.0% for specialty).

Although the trend in 2015 was much lower, specialty drugs continue to be a concern. Movement to OptumRx will allow us to be more knowledgeable about our pharmacy spend and implement targeted programs for edHEALTH members.

Although the core open formulary plan design with 3-tier and 4-tier options will remain unchanged from 2016 to 2017, some additional controls (i.e. step therapy, prior authorizations, quantity limits) will be implemented on new prescriptions in order to effectively begin prescription utilization management. Great care is being taken to minimize disruption where possible and ensure strong communication:

- OptumRx will be receiving active step therapy and prior authorization data from Tufts Health Plan (THP) and Harvard Pilgrim Health Care (HPHC) in order to ensure members who have previously satisfied those requirements will not be required to re-submit information to OptumRx until the appropriate authorization expires.
- For prescriptions that did not require step therapy or prior authorization prior to 1/1/2017, members will be granted a 12 month grace period before requiring step therapy and/or prior authorization.
- Where disruption will exist, most notably a change in copayment level, members will receive a notification during open enrollment and be able to contact OptumRx or their provider in order to determine the best approach given their needs. Three separate mailings will be generated (October, December, January) to ensure all disrupted individuals, including those with new prescriptions in December, will be notified.
- OptumRx is supplying information for all schools to leverage during open enrollment and will be present at all appropriate benefit fairs.

The gains in employee health and productivity due to pharmaceutical developments are astonishing and should not be overlooked. At the same time we need to ensure that we are finding opportunities to be efficient and effective. OptumRx will allow all edHEALTH members to receive rebates based on their specific experience. In addition, they will assist edHEALTH in managing specialty drug trends including, but not limited to, implementing biosimilar scripts and curbing the cost of compounds where possible.

As Massachusetts Governor Charlie Baker continues to talk about the crisis facing the Commonwealth related to opioid abuse and overdose deaths, which have increased by 90% between 2000 and 2010 and now represent more than twice the deaths from car/truck accidents, OptumRx will be able to arm edHEALTH schools with valuable information to identify trends, pinpoint potential abuse, and hopefully find support for members needing advocacy. One such report is the Controlled Prescription Analytic Dashboard that compares utilization to book of business. EdHEALTH schools will also be able to compare themselves to their peer group.

Each member organization has been invited to participate on implementation calls related to the OptumRx implementation. If you have questions, please feel free to reach out to your plan design committee designee or Teri Weber at Spring Consulting Group teri.weber@springgroup.com.



Wellness Committee's First Win!

In early 2016, edHEALTH created a wellness committee to begin to explore the role of wellness within edHEALTH, and pinpoint where cooperation and alignment would support joint wellness goals within the cooperative.

Although the core tenants surrounding wellness are quite similar among member schools, the depth of each schools' wellness program and the corresponding budgets are vastly different. Given that most wellness initiatives were already committed for 2016, the wellness committee decided to create a coordinated survey to explore coordinated opportunities for 2017.

The survey was drafted by Spring Consulting Group and revised by the entire wellness committee with feedback from our partners at Harvard Pilgrim Health Care (HPHC) and Tufts Health Plan (THP). The result was a 25 question survey designed to target:

- Current and prior wellness priorities for employee and their families.
- Motivational triggers.
- Topics of interest for employees and their families.
- Value of previously offered programs and changes that would increase participation.

WPI was the first school to roll out the survey and it was greeted with the overwhelming response from 391 WPI employees. WPI was extremely excited with the amount of participation in the survey, perhaps the highest participation in any survey at WPI! Jessica Szymczak, benefits specialist from WPI, says that they are "both in awe and absolutely thrilled at the same time. This is by far the largest participation... in any wellness initiative and... still shocked by how many employees took the time to complete this survey and let us know what they are looking for". Wellesley and Emerson have also rolled out the survey; it is still active at this time.

All the completed surveys will be analyzed over the summer and results will be shared by school as well as in aggregate. The committee will use the information to set strategy for 2017.



BERKLEE MERGER

As of June 1, 2016, The Boston Conservatory and Berklee College of Music merged. As a result, Berklee is fully poised to realize its vision of becoming the world's most comprehensive and dynamic training ground for music, dance, theater, and related professions.

Evidence of things to come is represented by the seven 2016 Tony nominations for Berklee and Boston Conservatory alumni and the strong demand by Berklee students for elective dance courses, including instruction by the Conservatory's new hip-hop dance faculty. We are also ecstatic to be planning the newly merged institution's first-ever opera program in Valencia, Spain. The most exciting thing about these new initiatives is that our students are leading the way, bringing the value and promise of one institution to life through their many collaborations.

Surprising and unexpected synergies will emerge as our communities unite; indeed, that's the power of joining two institutions with such an abundance of creative and passionate students, faculty, staff, and alumni. We have a truly unique opportunity to create an educational environment that will enable the next generation of performing artists and arts professionals to thrive and lead the field. We are fully energized to make this a reality for current and future students at the combined institution, and we count on your creativity to help us blaze these new trails.

About The Boston Conservatory

Founded in 1867, The Boston Conservatory offers fully accredited programs in music, dance, and theater that train exceptional young performing artists for careers that enrich and transform the human experience. Known for its multidisciplinary environment and deep community engagement, The Boston Conservatory is internationally recognized as an innovative leader among conservatory programs, focused on elevating and celebrating every aspect of the performing arts, presenting more than 700 performances each year. The institution has established itself as an important voice in the movement to make all forms of performing arts a more visible and valued dimension of communities locally and abroad.



Roger Brown (left), the president of Berklee College of Music, and Richard Ortner, president of The Boston Conservatory.

About Berklee

Berklee was founded on the revolutionary principle that the best way to prepare students for careers in music is through the study and practice of contemporary music. For 70 years, the college has evolved to reflect the current state of the music industry, leading the way with baccalaureate studies in performance, music business/management, songwriting, music

therapy, film scoring, and more. To date, 107 Berklee alumni have received 266 Grammy Awards, popular music's highest honor.

With a focus on global learning, the Berklee campus in Valencia, Spain, offers graduate programs and study abroad opportunity, while Berklee Online serves distance learners worldwide with extension classes and degree-granting programs. The Berklee City Music Network provides after-school programming for underserved teens in 47 locations throughout the U.S. and Canada. With a student body representing more than 100 countries and alumni and faculty that have won more than 300 Grammy and Latin Grammy Awards, Berklee is the world's premier learning lab for the music of today—and tomorrow.

MEMBER SPOTLIGHT: BRANDEIS UNIVERSITY

Founded in 1948, Brandeis University is named for the late Louis Dembitz Brandeis, the distinguished associate justice of the United States Supreme Court, and reflects the ideals of academic excellence and social justice that he personified.

The only nonsectarian Jewish-founded institution of higher learning in the United States, Brandeis is one of the world's youngest private research universities. In 1985, Brandeis was elected to membership in the prestigious Association of American Universities (AAU), which represents the 62 leading research universities in the United States and Canada. Brandeis has been ranked among the top 35 national universities by U.S. News & World Report every year since the rankings' inception, and the Princeton Review ranked Brandeis No. 1 nationally in student engagement in community service in its 2015-2016 survey.



Located on 235 rolling acres nine miles west of Boston in the suburb of Waltham, Brandeis' distinguished faculty are dedicated to the education and support of 3,600 undergraduates and more than 2,000 graduate students. Brandeis combines the faculty and resources of a world-class research institution with the intimacy and personal attention of a small liberal arts college. For students, that means unsurpassed access — both in and out of the classroom — to a distinguished faculty known for groundbreaking research, scholarship and artistic output. As a research university, Brandeis promotes strong interdisciplinary research, particularly in the sciences, and collaborative teaching opportunities across disciplines. For a university of its size, Brandeis enjoys noteworthy depth and breadth of research success; in 2014, for example, external grants received for faculty research from the National Institutes of Health alone totaled \$28.8 million.

Brandeis is composed of the College of Arts and Sciences as well as four graduate schools: the Graduate School of Arts and Sciences, the Heller School for Social Policy and Management, the International Business School, and the Rabb School for Continuing Studies.

“Brandeis joined with edHEALTH LLC in 2015 in its collaborative effort to preserve, and in some cases, expand quality employee health coverage while controlling the ever-rising cost of health care,” said Marianne Cwalina, Senior Vice President for Finance & Treasurer at Brandeis. “Brandeis has benefited from this collaboration by reducing unnecessary overhead costs and from economies of scale.”



Berklee



EMERSON
COLLEGE

WELLESLEY



Brandeis



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