

**PUBLIC SESSION MINUTES  
EMPLOYEE BENEFITS ADVISORY COMMITTEE MEETING  
MONDAY, JUNE 15, 2015**

**A meeting of the Employee Benefits Advisory Committee was held at 11:00 a.m., Monday, June 15, 2015, in the City Council Conference Room – 7th Floor/Mesa City Plaza Building, 20 E. Main St.**

**MEMBERS PRESENT:** Councilmember David Luna, John Pombier, Mary Cameli

**MEMBERS EXCUSED:** Councilmember David Richins, Amy Trethaway

**OTHERS PRESENT:** Gary Manning, Human Resources Director  
Janice Ashley, Employee Benefits Administrator  
Peggy Lynch, Assistant Employee Benefits Administrator  
Marrisa Ramírez-Ramos, City Counsel Assistant  
Noel Vera, Employee Benefits Supervisor - Secretary

**The meeting was called to order at 11:02 a.m. by Councilmember Luna**

**Agenda Item #1: Approval of Previous Meeting Minutes**

- John Pombier moved to adopt the meeting minutes from May 7, 2015. Mary Cameli seconded the motion and all were in favor. The vote was unanimous.

**Agenda Item #2: Hear a presentation, discuss, and provide direction on Pre-Certification Requirements/ Processes and Annual Visit Limitations for certain Rehabilitation Therapies Covered under City of Mesa Medical Plans, including Physical Therapy (PT), Occupational Therapy (OT), Speech Therapy (ST), Music Therapy (MT) and Applied Behavioral Analysis Therapy/Therapeutic Behavior Therapy (ABA/BT).**

- Janice Ashley provided background review of the EBAC discussion from May 7, 2015 and new discussion of other financial modeling requested by EBAC:
  - Current City plan designs allow an unlimited number of medically necessary Rehabilitation Therapies
  - “Short-term progressive” criteria also required, but difficult to enforce for long-term “permanent” diagnostic conditions
  - The Plan identified 17 patients with “permanent” diagnostic conditions whose projected treatment plan costs for rehabilitation therapies in 2015 are more than \$868,000
  - Discussion identified that patients with long-term disabling conditions may be eligible for certain state aided coverage, but in most cases City coverage would be primary for these patients
  - Other city survey data noted that many cities allow a combined therapies 60 visits per year limitation
  - Discussion of potential member disruption if visit limitations and/or coverage denials arise mid-year (2015)
- A financial analysis of unlimited visits versus visit limitations and different coverage levels was modeled and discussed as follows:
  - Current unlimited visits with only medical necessity pre-certification

- Unlimited visits with both medical necessity precertification and application of “short-term/progressive” criteria as of 1/1/15
- 40 or 60 visits per therapy per year, with and without allowance for medically necessary visits above those limitations
- 60 or 90 combined visits per year, with and without allowance for medically necessary (and short-term/progressive) criteria for additional visits above the respective limitations each year and with and without a reduction in benefit level to 50% after annual combined limitation met
- Discussion around best method of introducing visit limitations that are comparable or better than many other cities, with the least amount of member disruption and encouraging more member cost sharing for visits above visit limitations
- John Pombier made a motion to adopt:
  - Medically necessary, pre-certified, short-term and progressive Rehabilitation Therapy Visits up to 90 Combined visits per year (combined PT, OT, ST, MT, ABA/TBT), effective 1/1/16 – no change in co-insurance and copay amounts by plan, only introduction of plan year visit limitations on a combined therapy basis
  - Any additional visits above this combined limitation also require medical necessity pre-certification and short-term/progressive criteria per year, but covered at approximately 50% of allowed charges as compared to the rate of coverage for the first 90 combined visits per year (co-insurance and copay amounts change depending upon plan and whether in-network or out-of-network)
- Mary Cameli seconded the motion; motion was passed with a 2-1 vote; Councilmember Luna voted against (preferred additional coverage above 90 maximum be covered at normal plan levels rather than approximately 50% of allowed charges)
- John Pombier confirmed and both Mary Cameli and Councilmember Luna agreed that current “no limitations and short-term/progressive criteria” may prevail for the balance of 2015 (with pre-certification analysis from 1/1/15)

**The meeting was adjourned at 11:34 a.m.**

Prepared by: Noel Vera, Secretary to the Board