

**OFFICE OF THE CITY COUNCIL**

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**SPECIAL COMMITTEE ON UTILIZING UF HEALTH AS A HEALTHCARE DELIVERY ORGANIZTION MINUTES**

**May 29, 2014**

**2:00 p.m.**

**City Hall**

**117 W. Duval St., 1st Floor**

**Don Davis Room**

**Attendance:** Council Members Matt Schellenberg (Chair), Robin Lumb, Clay Yarborough,

**Also:** Russell Armistead – UF Health; Karen Bowling – Mayor’s Office; - Employee Services; Jessica Morales – Legislative Services Division; Yvonne Mitchell – Council Research

See attached sign-in sheet for additional attendees.

Council Member Schellenberg called the meeting to order at 2:00 p.m. He began with introductions and welcomed everyone to the meeting. CM Schellenberg shared that a lot of work and preparation has been done although committee had not met recently. He acknowledged Karen Bowling; Hugh Greene at Baptist Health; Moody Chisholm at St. Vincent’s; Patrick Geraghty at Florida Blue; and Michael Mayo at Baptist Downtown for their information and guidance.

CM Schellenberg shared that Michael Mayo suggested he contact Frederick Cerise, CEO of Parkland Hospital in Dallas, Texas since this hospital has successfully overcame similar challenges like UF Health. CM Schellenberg reported Mr. Cerise was very positive and offered to share more details to a delegation on a visit to Parkland. The trip will be one of the committee’s recommendations, to include CM Schellenberg, Karen Bowling, Russell Armistead, Don Davis and Jean Miller as attendees. It was announced that the Civic Council will continue beyond this committee’s work to dig deeper into the matter.

Karen Bowling conducted research to determine the amounts of the City’s Employee Health spend; saving opportunities of the health spend; and the avenues to utilize the health spend to benefit UF Health. The City’s Employee Health spend is about $100 million. A spend reduction is possible through the City becoming self-insured, improving satisfaction and outcomes (via telemedicine and wellness program). Ms. Kelli O’Leary commented that the City is at a point to begin managing assets rather than paying premiums which is considering a self-insured platform. The associated opportunities are being able to: obtain detail claims information, analyze utilization data, identify areas of population of high risk through care coordination programs, and implement wellness programs to reduce claims detail. A significant amount of the high dollar claims currently exist in the retiree population. The first step in pursuing a self-insured status is determining what needs to be put in place through a program designed controlled plan for risk reduction. There are various categories to consider in plan design exploration such as covering smoking, dependent children, and birth control that would affect cost savings. UF Health could benefit from the City being self-insured through additional programs (on-site clinics and telemedicine) that could be incentives for utilization. There was discussion about the amount of wellness dollars from Florida Blue and how it will be allocated. The most effective utilization of these funds may be associated with high risk programs through care coordination or any avenue where funds will provide maximum return.

Russell Armistead stated he wanted to see UF Health as an option for employees through a healthcare benefit design that offers quality service at a lesser price than other plans; and provide additional funds to UF Health without costing the City extra money. He would like to see up to 40% of the City’s insured in the UF Health system for their primary and secondary care. Ms. Bowling provided specifics on how the City has been and plans to work with UF Health to address their need which includes: plan design discussions; promotion of UF Health through open enrollment and workshops; and convenience of services with Saturday hours. It should be noted that UF Health has requested an additional $2.5 million dollars in next year’s budget. Her recommendation is that the additional funds would be accompanied with a FTE position that would act as a liaison to work between both entities.

Mr. Cleveland Ferguson provided a brief summary of telemedicine. This would be a pilot program at no cost to the City. The MOU requires the City to provide office space for the medical onsite staff to provide services to employees, thereby, reducing absenteeism. The two devices are located in City Hall and Ed Ball Building. The technology would assist with transmitting data to local hospitals, transferring medical records and immediate scheduling of appointments. A potential utilization area could be with the correctional facility which could result in a 20% savings in cost.

Director Wildes explained the process of transporting inmates from the jail to UF Health. The fewer inmates transported saves money and maintains safety. She stated that telemedicine could offer access to specialists that may not otherwise be available. There are approximately 20-30 inmates transported to UF Health five days a week for appointments not to include emergency services and medically cleared arrests. **Director Wildes will provide the actual numbers for inmates transported for medical reasons (appointments, emergency room visits, etc.).** Mr. Al Diaz states that technology is the major challenge to the implementation of telemedicine. He stated that emergency visits would decrease because of the ability of the onsite staff to triage inmates with hospital personnel. Mr. Armistead explained that inmate care is covered by the $26 million paid by the City. The number of visits or specialist care is charged additional. Thus, there is no incremental cost just internal and transport expenses. Yet, providing this service could reduce the utilization of beds.

**Mr. Ferguson agreed to schedule CM Schellenberg to view the telemedicine video.** He reported that the pilot program could be ready within 45-60 days which has already begun. However, it was decided to wait until the MOU had received all official signatures that are expected within another week. It was reported that Cisco would name the City the 10th Smart and Connected City within the United States utilizing the telemedicine program.

There was discussion about a Citywide Task Force to further the process in addressing the UF Health as a community issue in developing creative and innovative solutions; and an implementation of a position to work exclusively with coordinating the process. Mr. Armistead shared the importance of business leaders being involved and active throughout the legislature to advocate for UF Health. He shared statistics on patient wait times, bed utilization, length of stay, and cost of opening new unit. Mr. Armistead explained that the additional $2.5 million was a minimum request to assist UF Health’s revenue.

CM Schellenberg thanked the committee members, healthcare leaders and everyone that has contributed time to this subject. He is going to submit a preliminary report for review and request input to ensure pertinent details are covered.

There being no further business, the meeting was adjourned at 3:05p.

Yvonne P. Mitchell, Council Research Division (904) 630-1679

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2:30 p.m.