



## President's Letter..

By Debbie Juul

### Points of Interest

- SALGBA Conference Tentative Agenda
- Join SALGBA April 26-29, 2009 in majestic Denver, CO for the 27th Annual Conference & Expo

Join us in wishing Jim Sarver, University of Texas System and Ron Meyer, MCHCP best wishes in retirement. Both are great SALGBA supporters that will be missed!

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The 2009 annual conference in Denver is just a month away! My employer, like most of yours, is facing some challenging budgetary constraints. The one conference I will continue to attend is the SALGBA conference. It is low-cost and high-quality and provides exceptional value. It is the most relevant training and networking opportunity for public sector benefit professionals. It's not too late to register if you haven't already done so!

The SALGBA Board has approved offering a limited number of scholarships for the 2009 conference which includes registration, hotel, and air. If you

would like to attend but can not because of your budget, a scholarship may be the answer. Additional information and application forms are available by contacting the SALGBA office.

We have a great lineup of speakers this year. Keynote sessions include topics ranging from seeing healthcare from a new perspective to how instability, energy, and terrorism abroad impacts the United States to the moral implications of health reform. In addition to the many breakout sessions, the Monday afternoon roundtables provide an opportunity to discuss issues you are facing and share your knowledge and advice with

attendees from similar entities. Roundtables are scheduled for local government, states, educational entities, retirement plans, and, new this year, attendees interested in discussing healthcare reform initiatives.

It has truly been a pleasure to serve as SALGBA president again this year. I look forward to seeing you in Denver!

Warm regards,

Debbie Juul, CGBA,  
CEBS  
LACERA



## Driving Employee Participation in Health Promotions Programs with Communication and Incentives

By Michael S. Taitel, Ph.D., Executive Director, Alere Center for Health Intelligence

In a turbulent economy, it is especially important to examine a health promotion program's communication strategy and incentive value to determine if a program's participation rates can be increased, without increasing the program's cost. Employee participation is the key to maximizing the value of health promotion programming. Many experts agree that achieving high rates of engagement and participation in health promotion programs is absolutely necessary for the programs to be successful. Equally important to organizations is achieving and maintaining high participation rates with health risk assessments (HRAs), as they are typically the entry point into health promotion programs.

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April 26-29, 2009  
**SALGBA 27TH ANNUAL CONFERENCE**  
**Denver, CO**



## Omni Interlocken Resort

### SALGBA Room Rate

\$124.00 - Jurisdictional (Public Entity  
Employee)

\$169.00 - Associate (Corporate)

We hope you will join fellow SALGBA Members and colleagues for another great SALGBA educational experience!

## MARK YOUR CALENDARS

for the  
**2010 SALGBA ANNUAL CONFERENCE**  
 at the  
**HYATT REGENCY**  
 in  
**INDIANAPOLIS, IN**  
**APRIL 18-21**

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 Pasadena, CA 91101  
 djuul@lacera.com

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 Waukesha, WI 53188  
 phans@waukesacounty.gov

Hubert Lincecum, CGBA  
 Office of Group Benefits, LA  
 7389 Florida Blvd., Ste. 400  
 Baton Rouge, LA 70806  
 hlincecum@ogb.state.la.us

Chuck Griffith, CGBA  
 Bernalillo County, NM  
 One Civic Plaza NW, 4th Floor  
 Albuquerque, NM 87102  
 cgriffith@bernco.gov

### **PAST PRESIDENTS**

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 The Best Health Plan  
 1200 Grant Street  
 Denver, CO 80203  
 cdowney@best-healthplan.com

Dan Stewart, CGBA  
 The University of TX System  
 702 Colorado, Suite 6-600  
 Austin, TX 78701  
 dstewart@utsystem.edu

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Roger Holland  
 Medco  
 300 Oceangate, Suite 450  
 Long Beach, CA 90802  
 roger\_holland@medco.com

Scott Mixon, CGBA  
 FBMC  
 3101 Sessions Rd.  
 Tallahassee, FL 32303  
 smixon@fbmc-benefits.com

### **EXECUTIVE DIRECTOR**

Tina Scott  
 PO Box 220  
 Big Hill, KY 40405  
 tina.scott@salgba.com  
 P: 888-623-8676  
 F: 859-623-8694  
 C: 859-358-3443

## 2009 SALGBA Conference Agenda at a Glance

Saturday, April 25, 2009									
3:00pm-7:00pm	Board Meeting								
3:00pm-6:00pm	Registration Open								
Sunday, April 26, 2009									
8:30am-2:00pm	Golf Tournament @ Omni Interlocken (Sponsored by Medco)								
8:00am-3:00pm	Frolicking in the Foothills Tour (Sponsored by FBMC)								
12:00pm-6:00pm	Registration Opens								
5:00pm-5:45pm	Board Reception (Invitation Only)								
6:00pm-8:00pm	Opening Night Networking Reception in Exhibit Hall								
Monday, April 27, 2009									
7:30am-4:00pm	Registration Open								
7:45am-8:30am	Continental Breakfast in Exhibit Hall								
8:30am-10:00am	Welcome & Opening Keynote	"The BIG Picture--Seeing Healthcare from a New Perspective" by Mr. Gary Earl, SR Vice President, CIGNA Healthcare							
10:00am-10:45am	Break in Exhibit Hall								
10:45am-Noon	General Session (sponsored by Medco)	"Instability, Energy, and Terrorism in the Central Regions: Implications for the United States" by Rod Moore, Associate Director of Intelligence--United States Central Command							
Noon-1:15pm	Luncheon								
1:30pm-2:45pm	Breakout Sessions	Dependent Eligibility & Enrollment Verification	City of Milwaukee's Strategy for Managing Drug Trends	Total Health Management	Understanding Medicare Parts A, B, C & D	Re-Engineering Paid Time Off in the Public Sector: A Case Study			
		Jennifer Flory, State of Kansas	Mike Brady, City of Milwaukee	Rick Johnson, Segal	Christine Bach, Ingenix	Sharon McCabe, City of Greeley, CO			
		Daniel Montgomery, Claim Technologies, Inc.	Steve Jones, Navitus Health Solutions	Christopher Mathews, Segal		Don Heilman, Gallagher Benefits Services			
2:45pm-3:15pm	Break in Exhibit Hall								
3:15pm-4:30pm	Roundtable Sessions	<b>Local Entities</b>	<b>State Entities</b>	<b>Educational Entities</b>	<b>Retirement Entities</b>	<b>Healthcare Reform Initiatives</b>			
					Debbie Juul	Linn Baker			
Tuesday, April 28, 2009									
7:30am-4:00pm	Registration Open								
7:45am-8:30am	Continental Breakfast in Exhibit Hall								
8:30am-10:00am	Tuesday Keynote (sponsored by Medco)	"Moral Values of Health Reform in America - A Benefits Perspective" by Howard Brody, M.D. Ph.D, University of Texas Medical Branch, Galveston, TX							
10:00am-10:30am	Break in Exhibit Hall								
10:30am-Noon	Breakout Sessions	Healthcare Policy: Challenges and Choices for the New President	Panel Discussion on Transparency in Healthcare & the Impact on Retiree & Employee Benefits	Early Intervention to Reduce Disability	Making Retiree Health care Budgetable, Affordable, & Manageable	Shopping for Wellness Programs: Assessing Quality			
		Dr. James O'Connell, Ceridian Corp.	Reps from: Sherrill Morgan, MedBen, Pharmaceutical Horizons, Inc., Commonwealth Health Corp., RDS Services	Rita Murphey, City & County of Denver	Joe Altman, UnitedHealthcare Retiree Solutions	Leslie Johnstone, State of Nevada			
				Jacqueline Willingham, The Standard		John DuMoulin, URAC			
Noon-1:00pm	Awards Luncheon								
1:15pm-2:30pm	Breakout Sessions	Consumerology: A Scientific Approach to Healthcare Communications	Federal Healthcare Reform	Results Not Promises: Using Healthcare Cost Control Initiatives to Prevent Budget Crisis	Medicare Advantage: The Retiree's Perspective	Effective Management of Diabetes Through Segmentation			
		Robert Nease, Express Scripts	Blaine Bos, Mercer	Sally Natcheck, IFEBP	Gail Miller, Humana	Jeff Bernhard, Aetna			
						Sally Imig, Aetna			

## 2009 SALGBA Conference Agenda at a Glance

2:30pm-3:15pm		Break in Exhibit Hall--Door Prize Drawing (must be present to win)							
3:30pm-4:30pm	Breakout Sessions	The Oklahoma Experience: Partnering Open Enrollment for Employee Benefits & Deferred Compensation	The Impact of Value Based Drug Plan on Medication Use and Employer and Employee Costs	Consumerism & Account Based Health Benefit Plans in the Public Sector	Pension Plan Choice: Challenges to Making the Right Choice	Innovative Health Benefit Strategies			
		Frank Wade, OK-EBC; Ray Pool, OK-ERS	Stephen Rosenberg, ActiveHealth Management	Sander Domaszewicz, Mercer	David Maurek, Colorado PERA	Mayor Stephen Acropolis, Township of Brick, NJ			
		Mike Abkowitz, GWRS		Tony Holmes, Mercer		Charles Reuter, Marathon Health			
6:00pm-11:00pm		Gala Event at the Denver Museum of Nature & Science (Sponsored by ActiveHealth Management)							
<b>Wednesday, April 29, 2009</b>									
8:00am-8:45am		Jurisdictional Members Business Meeting/Breakfast							
9:00am-10:15am	Wednesday Keynote	Driving Alternatives & Pre-Tax Transit Benefits, Faiz Khan, City & County of San Francisco			The Evolution of Retiree Rx Benefits: Staying Ahead of the Curve, Mary Dorholt, MEDCO				
10:30am-11:30am	Breakout Sessions	Reducing Health & Productivity Costs during Turbulent Economic Times	Saving by Spending: Using Incentives to Change Behavior & Save Healthcare Dollars	Is there a Difference: Public Sector versus Private Sector Cost	Lessons Learned from the Initial Years of Operating Group Retiree Plans Under the Retiree Drug Subsidy Program and How to Measure the Costs and Benefits of Conversion to Part D	A New Challenge for State & Local Government Health Care Coverage for US Hispanic Workforce			
		Dr. Michael Taitel, Alere	Donna Marshall, CO Business Group on Health	Tom Weatherup, Thomson Reuters	Paul Kersting, Jerry Hercenberg, & Greg Whittle	Jaime Gonzalez, UnitedHealthcare			
			Tamara Kirk, CO Springs Utilities; Ken Detweiler, CO Springs School District; & Mark Cauthen, City of Colorado Springs		Buck Consultants	Russell Bennett, UnitedHealthcare			
11:45am-12:45pm	Breakout Sessions	Re-Engineering Paid Time Off in the Public Sector: A Case Study	What's On the Mind of Consumers When It Comes to Generics?	HR and Benefit Plan Audits--Cost Saving Strategies That Produce Significant and Rapid Results	Funding Pensions: Looking at the Market Value of Liabilities	NH Local Government Centers Slice of Life Initiative--A Multi-Year Case Study			
		Sharon McCabe, City of Greeley, CO	Emily Cox, Ph.D., Express Scripts	Bruce Borgos, Secova	Paul Angelo, Segal	Scott Weden, NH Local Government Center			
		Don Heilman, Gallagher Benefits Services		MaryAnne Watson, Segal		Dr. Adam Long, Gordian Health Solutions			
1:00pm	Adjourn--See you next year in Indianapolis, IN-----April 18-21, 2010 at the Hyatt Regency								

## Article for the State of Colorado

Submitted by Cindy Downey  
The Best Health Plan

In 2007 the Blue Ribbon Commission for Health Care Reform (208 Commission) was created by the Colorado Legislature to study and establish health care reform models for expanding coverage, especially for the underinsured and uninsured, and to decrease health care costs for Colorado residents. The Commission's goal was to increase coverage and reduce cost. The Commission was charged with:

Examining health coverage and reform models designed to ensure access to affordable coverage for all Colorado residents; soliciting comprehensive reform proposals from interested parties; selecting between three and five proposals for in-depth technical assessment by an independent contractor; holding meetings around the state to solicit public input; and completing a final report with recommendations to the General Assembly by January 31, 2008.

The Commission's final report laid out a vision for change - a roadmap to reform. They developed a bold yet realistic package of recommendations for health reform that are linked together in a comprehensive package that can be implemented in stages. The report also included information on five alternative proposals evaluated by the Commission, as well as background information on the uninsured and health care costs in Colorado.

Twenty-four of 27 commissioners endorsed the Commission's recommendations - an achievement, given the diverse backgrounds, perspectives and ideologies represented on the Commission. Three commissioners dissented and prepared two minority reports, which are included in the Commission's final report document.

### **However..... 2 years later.....**

According to a recent article in the Rocky Mountain News regarding the 2009 Colorado Legislative Session, health care is "on hold" again!

For the past few years, State lawmakers have had ambitious health care goals, including proposals to provide universal coverage for Coloradans. But lawmakers have said that, again this session, chances are remote that broad health care reform will be enacted.

The incoming House Speaker said the state is in a "holding pattern" with health care reform. He wants to give every person access to high-quality health care. He supports single-payer, Canada-style health care. But with an estimated \$13 billion startup cost, and the prospect of a \$604 million budget deficit because of the recession, the state can't afford it right now.

State Rep. Mary Hodge said smaller-scale proposals could be passed.

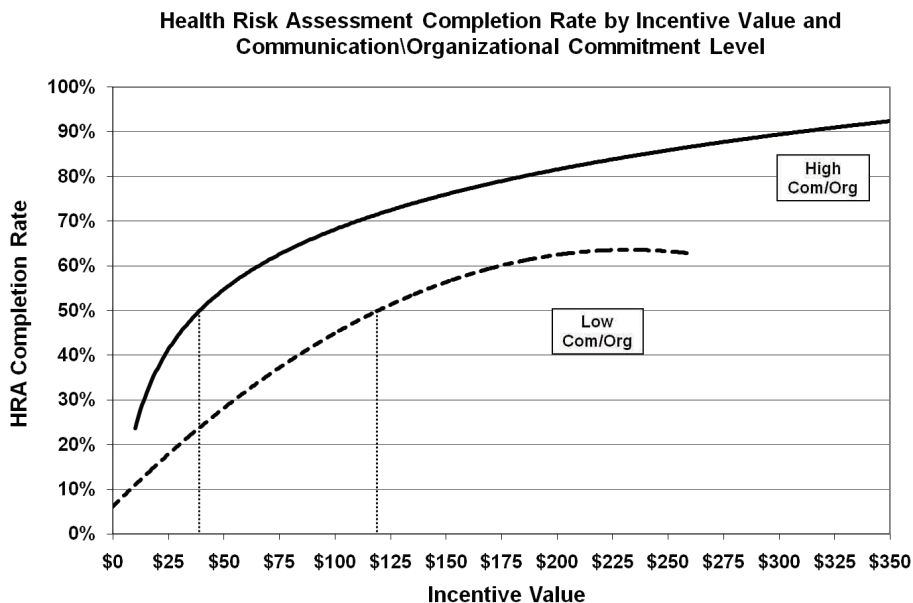
For Colorado, healthcare reform seems to be a difficult change.

## Driving Employee Participation in Health Promotions Programs with Communication and Incentives

By Michael S. Taitel, Ph.D., Executive Director, Alere Center for Health Intelligence

Now, organizations have empirical evidence to guide them as they determine the best ways to drive participation in their health promotion programs. According to a study published in the August 2008 issue of the *Journal of Occupational and Environmental Medicine*, the strongest predictors of HRA completion are “the monetary value of incentives” and the organization’s level of “communication and organizational commitment (Com/Org).” The study, “Incentives and Other Factors Associated with Employee Participation in Health Risk Assessments,” examines the various factors that influence employee participation in HRAs. It represents the largest study on this topic and includes data from 124 employers in a variety of industries with 882,275 eligible employees who completed 344,825 HRAs.

**The results show that a healthy workplace culture with good communications, employee involvement and senior leadership support, or Com/Org, is essential if organizations want to achieve high participation rates in their programs and maximize the impact of the incentives in their health promotion programs — even if the program has incentives with high monetary value.** The study found that to achieve a 50% HRA completion rate, organizations with a low Com/Org level would require an incentive of \$120 dollars whereas organizations with a high level only need a \$40 dollar incentive — a savings of \$80! From a different perspective, with a \$100 dollar incentive, an employer with a high Com/Org level would expect to achieve a 68% completion rate, whereas an organization with a low level would only achieve 45%. Differences between high and low Com/Org levels are defined in the study.



Interestingly, the type of incentive did not predict HRA participation rates; the monetary value was found to be more important than the type of incentive. Therefore, incentive types can be tailored to the preference of the specific employee population. These findings are also important to organizations who do not offer incentives, in that a high level of Com/Org would be essential to achieve a minimally acceptable HRA completion rate. To obtain a free copy of the *Journal of Occupational and Environmental Medicine* study, email [erica.moreland@alere.com](mailto:erica.moreland@alere.com).



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## Membership Application

Entity \_\_\_\_\_

Address \_\_\_\_\_

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Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Name \_\_\_\_\_ Email \_\_\_\_\_

Position/Title \_\_\_\_\_

Website \_\_\_\_\_

Referral Source:  Website  SALGBA member  Other \_\_\_\_\_

How did you hear about SALGBA? \_\_\_\_\_

What do you most hope to gain from your membership? \_\_\_\_\_

## Membership Descriptions

### Jurisdictional Member

A public sector entity actively engaged in administering an employee benefits program. Jurisdictional members may vote at the annual business meetings and are eligible to serve on the Board of Directors. The Secondary Member is a reduced fee for additional members from the same entity however there must be a Primary Member from the entity on file or applying.

Membership Type:  **Primary Entity Member \$195**       **Secondary Entity Member \$50**  
 Local Government       School/University       State Entity       Other: \_\_\_\_\_

### Associate Member

A consultant organization, insurance company or other professional group that is a seller of employee benefits services, not a purchaser. Associate Members do not vote or serve on the Board, except in the nonvoting capacity of Associate Member Advisor. They are encouraged to serve on committees. The Secondary Member is a reduced fee for additional members from the same entity however there must be a Primary Member from the entity on file or applying.

Membership Type:  **Primary Associate Member \$300**       **Secondary Associate Member \$150**  
 Company Type:  Dental/Vision  Health Insurance  Pharmaceutical Company  Software Management  Consultant  
 Other (Please explain) \_\_\_\_\_

### Payment Information

The annual membership fee is due with this application. Payment may be made by check and payable to SALGBA, or by credit card. In order to pay by credit card please contact the SALGBA National Office at 859.622.2535 or visit [www.salgba.com](http://www.salgba.com).

Please submit completed application with payment to:

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 PO Box 220  
 Big Hill, KY 40405  
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Signature \_\_\_\_\_ Date \_\_\_\_\_

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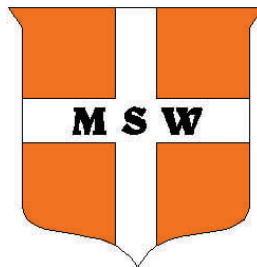


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