



CECHCR 2012

The escalating costs of health care combined with severe budget cuts in public education are having a devastating effect. In response to this crisis, leaders have joined together via the California Education Coalition for Health Care Reform (CECHCR) – a coalition of all major statewide management and labor associations and unions in California’s public education arena. (CECHCR member organizations include ACSA, CASBO, CCLC, CCSESA, CFT, CSBA, CSEA, CTA, and SEAC.) CECHCR is committed to leveraging its combined power and resources to improve health care quality and reduce costs through training, education and advocacy. Representing California’s 1,166 public school and community college districts, CECHCR member organizations are working together to find health benefits solutions for all 1.75 million public school employees and their families.

CECHCR’s strategies for accomplishing its mission have evolved since its founding in 2005. Today, CECHCR focuses its efforts on three major areas, with two additional initiatives currently under development. CECHCR also engages in ongoing information-sharing—through sponsoring annual summits, making presentations at conferences, and engages in advocacy in support of wise public policy.

CECHCR HEALTH BENEFITS TRAINING

Remaining at the core of its effort is Health Benefits Training for district/union teams. Through three stand-alone modules of training, CECHCR provides a deeper understanding of the health care industry and health coverage options, and offers tools and approaches for evaluating cost control strategies and making informed choices. CECHCR training modules are three hours in length and are offered free of charge. CECHCR leaders develop and field-test the training curriculum, and update it annually based on participant feedback and developments in the field. Training is delivered by a cadre of volunteer trainers, with each session conducted by a joint trainer team representing both labor and management. CECHCR training has now been provided for over 350 district/union teams. Through its Module IV, CECHCR offers follow-up support services to teams that have been trained.

CECHCR HEALTH BENEFITS SECOND OPINION PROGRAM

To further help districts and unions with cost and quality issues, CECHCR established its Module V Second Opinion services in 2011. A CECHCR team of expert consultants from J Glynn & Co. conducts an analysis, makes recommendations and helps with implementation—often resulting in savings totaling many millions of dollars. The CECHCR staff, and CECHCR’s management and labor representatives, work with district and union leaders throughout the process to help bring each Second Opinion case to a successful outcome.

Module V is CECHCR’s only fee-for-service offering. When a district and its unions express interest in CECHCR’s Second Opinion program, CECHCR provides a free informational Orientation to thoroughly explain the program. The next step is a Desk Review of the district’s health benefits situation to determine an estimate of savings that could be achieved—also provided by CECHCR free of charge. If the parties then agree to engage in a full Second Opinion investigation and recommendations process, the fee charged is based on savings. Fees go to pay J Glynn & Co. for all their work to bring about savings, and to support the work of CECHCR.

RISK POOLING

CECHCR is also actively involved in finding urgently needed, comprehensive public policy solutions that will limit the cost and improve the quality of health benefits for public education employees and their families. In this capacity CECHCR undertook a major initiative to explore the formation of a statewide public education risk pool. (AB 256—signed by the governor into law in 2006—called for a CalPERS feasibility study of combining all public education employees into one large risk pool statewide. This study was completed a year later, and concluded that, if structured properly, the concept is viable and could save up to \$400 million per year if implemented. CECHCR took the lead in studying this concept further, interviewed 21 CECHCR-member and other stakeholder organizations to gain their views and insights, and published a major position paper in May 2010.) After further study and consideration of specific options, at this time there is no consensus among CECHCR-member organizations regarding the creation of a mandatory pool.

CECHCR and all its member organizations, however, recognize the power and benefits of large health benefits risk pools, and have determined that CECHCR should continue to study the issue in depth. Further, the CECHCR coalition supports proactively seeking to assist districts not in large pools to re-evaluate their situation and help them enter larger pools, as well as helping these districts to design and implement other cost savings, quality improvements in their health care and health improvements among their staff—via CECHCR’s Module V Second Opinion program. Member organizations also agree that CECHCR should seek to help existing small and large pools achieve lower cost and higher quality solutions for their covered members.

TWO NEW INITIATIVES

CECHCR is in the development stages of a collaboration with the Stanford University Medical Center on **Health Promotion and Wellness**, with the dual goal of improving the health and well being of our public education staff and their families and reducing the cost of employee health benefits.

CECHCR is also exploring the creation of a new module of training and other support services to help districts and unions with the many and complex issues involved in implementation of the federal **Affordable Care Act**.

THE CECHCR ORGANIZATION

Each CECHCR-member organization has two representatives on the CECHCR board. Board Standing Committees include Executive, Training, Governmental Affairs and Research & Information. CECHCR’s governance structure includes Co-Chairs for labor and for management—who with the project director form the Executive Committee, and a Leadership Team made up of the Executive Committee and the Standing Committee Co-Chairs. CECHCR is an initiative of the non-profit Center for Collaborative Solutions, which staffs the project and serves as its fiscal agent.

The CECHCR coalition believes that its program of education, training, consultation, and legislative action helps to bring better quality health care at more reasonable costs to all school employers and employees in California, while also improving labor-management relations and enabling districts to devote more time, energy and funding to the districts’ primary mission of educating students.