



**Minutes/Actes:**

Meeting No: 46/68  
Date: 03 December 2020  
Time: 13:15 - 14:30  
Venue: Virtual  
Quorum: 14/17 Units

## 46<sup>th</sup> Staff Council Meeting Minutes

The meeting was quorate at 13:25 with 12 Units present. The Chair Camille McKenzie chaired the meeting and Secretary Sherif Mohamed took notes. Units present were: 06, 13, 14, 18, 21, 22, 24, 26, 27, 28, 29, 30, 31, 33. The leadership team was in attendance.

### 1. Adoption of the agenda

The agenda was adopted without changes with 09 items.

### 2. Adoption of previous minutes

Minutes for the 65<sup>th</sup> and 66<sup>th</sup> meeting were adopted.

### 3. Health and Life Insurance Committee

The 1<sup>st</sup> VP Aitor Arauz Chapman welcomed the members of the Health and Life Insurance Committee (HLIC), Michael Zilberg, Michelle Rockcliffe, and Robin Dellarocca and presented to them the staff members' questions and concerns regarding the differences in the co-pays between brand and generic medications. He also asked the members of the HLIC to explain any other recent changes to the Empire BCBS insurance.

Robin Dellarocca explained that the overall idea on the part of the representatives of staff on HLIC is to keep the plan as healthy and rich as it can be in terms of benefits, whilst balancing that with cost containment to prevent increasing premiums and that HLIC tries to protect the reserves which was challenging because medical costs are ever-increasing.

She further explained that the recent changes have to do with prescription drugs under the Empire BCBS plan. The 3<sup>rd</sup> party drug administrators come to the HLIC with proposals to contain costs. They recently presented 3 options: (a) the introduction of 'Step therapy', in which patients are asked to start at the lowest cost medication and then escalate, which was rejected because it was restrictive and seemed cumbersome for staff members, (b) the removal of some medications from formulary list, which was also rejected because

it limits the medicine available to staff members, and (c) the introduction of a Mail-in service, with the option to opt-out, which was eventually approved.

She continued that under the approved measure, staff members can ask their doctors for a 90-day prescription that could be mailed to their home or picked up from a certain pharmacy (CVS), which would result in reducing the overall cost of medication. She added that staff members can still opt out and pick up a 30-day prescription at their local pharmacy.

She eventually added that another measure has to do with the use of generics vs brand medications. She explained that when there is a generic, the administrator tells staff they have to take the generic and that in case plan members want the brand medication (noting that doctors must clearly indicate that in the prescription), they have to pay the difference between the brand and generic medications.

Michael Zilberg continued and explained the methodology on which the HLIC operates to decide on changes to the insurance plan. He explained that only two options available to manage the cost of our health insurance are either increasing the premiums or reducing the benefits which the HLIC members tried to avoid while debating the recent changes. He highlighted that the approved measures have allowed us to prevent a 14% raise in premiums. He pointed out the letter that was sent by Empire BCBS with the wrong explanation and that they had promised to resend the letter with a more correct description of the changes.

Michelle Rockcliffe (in her capacity as a member of the HLIC) called for the Council members to encourage their constituents to use in-network medical services, which reduces the overall cost.

She added that the new Communications officer at the Insurance Section has been doing webinars on cost containment, etc. and thought it would be a good idea to have a joint meeting with HLIC representatives of staff and the Communications Officer.

The 1<sup>st</sup> VP called for the HLIC members to have meetings with staff-at-large to explain such changes and to avoid unnecessary misunderstanding.

Answering a question about what to do in cases when a staff member doesn't find the generic drug as effective, Robin Dellarocca explained that after proving that all the possible generic drugs were ineffective, the Insurance Section would work with doctors and third-party administrators to make a decision on a case-by-case basis. She also explained the issues with out-of-network options, the possible abuses that take place and their effects on our premiums.

The Deputy Chair Ramona Kohrs explained that she was not aware of the changes and called for better outreach. She also inquired about what safeguards our plans have from misuse and fraud and called for stricter auditing over the relevant accounts.

The Secretary Sherif Mohamed inquired whether these changes occurred in the case of other insurance companies that service the UN staff members (Aetna, for instance). He also inquired how the HLIC make their decisions.

Michelle Rockcliffe explained that in accordance with the relevant ST/IC, the HLIC is made up of representatives of management and staff. They start their work by inspecting the performance reports of the insurance plans during the previous year.

Robin Dellarocca explained that HLIC makes their decisions by consensus, and in case of disagreement, the case gets escalated to the Joint Negotiations Committee (JNC). She also added that the recent changes only apply to staff members insured under the Empire BCBS plans.

The Treasurer Jaime Garreta called for sending messages to all staff members as soon as possible to explain such changes rather than waiting until the changes are in effect and inform the staff after. He also thought that the representatives of the staff should address the Council when such changes were introduced to make sure the staff voices were heard.

Kathryn Kuchenbrod asked how to dispute a decision to increase the medical costs.

Answering a question about international medical claims, Robin Dellarocca explained that there is a number on the back of the insurance card that handles international claims, who would give instructions and guidance on how to use the insurance internationally.

The Treasurer explained that medical services abroad are similar to out-of-network services and that staff members are expected to pay for the services in full and bring receipts for an 80% reimbursement.

For the sake of time, Michelle Rockcliffe offered to prepare answers to the unanswered questions and the Chair decided to place the item on the agenda of next Council's meeting.

#### **4. Reports by Units**

Winryck Ford reported that they received news about the discontinuation of the publication "The United Nations Yearbook" and that the relevant Office will be dissolved. He added that the Director invited the Department's staff representatives to discuss the matter.

Winryck Ford raised a question about a message his Unit received from their EO with instructions on how to request temporary suspension of assigned UN phone numbers, which would save some unnecessary costs given the current remote working arrangements.

Regarding the discontinuation of the Organization's Yearbook, the Deputy Chair explained that the discontinuation of this publication and similar publications was trending and explained the importance of such publications and called for the Council to pay this matter its utmost attention.

The 1<sup>st</sup> VP thought that the GA's Committee on Information should be the entity to make decisions regarding what should be published and what should be discontinued.

## **5. Follow-up on OSH Townhall**

Sebastian Cervantes (Unit 22) explained that staff perceived that the Union support management's proposals and instructions given in these meetings, only because the Union was proactive enough to facilitate the past OSH Townhall meetings and called for the Leadership to explain that the Union only facilitates these meetings and doesn't necessarily agree or support the views shared by managers during such meetings.

The President explained the role of the Committee and that OSH doesn't have anything to do with policy making.

Karina Loktionova (Unit 29) explained the arrangements that has taken place in DGACM about lending ergonomic chairs and equipment to staff during the alternative working arrangements (AWA) and thought that if such arrangements were made in one Department, it could be done in other Departments. The President explained that Security has a process in place for lending equipment and encouraged staff representatives to reach out to their EO and ask about such procedure.

## **6. President's Report and Summary of Communications**

Nothing was raised.

## **7. Executive Board Report**

Nothing was raised.

## **8. UNSU Finances**

Nothing was reported.

**9. AOB**

The President informed the Council about the recent survey on Flexible Working Arrangements, which was eventually suspended.

The Deputy Chair inquired about updates related to the abolition of G to P. The President explained that the matter will be discussed at the 5<sup>th</sup> Committee in the spring, and that a campaign to support this cause is being planned.

Michelle Rockcliffe thought the issue of G to P should be approached differently, given its political and financial implications, and that a new approach might help push the issue forward. She also added that while we fight for the abolition of G to P, the Union should support those who wish to take the exam by providing mentor programs, as was the practice in the previous years.

The Assistant Treasurer Yogesh Sakhardande listed a number of issues with the G to P examinations and called for an action in this regard.

*The meeting adjourned at 15:10.*

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