

Connecticut SIM

V-BID Consortium Meeting: March 22, 2016



Meeting Overview

- ▶ Review of Project Goals and Timeline
- ▶ Strength, Weaknesses, Opportunities and Threats (SWOT) Analysis Findings
- ▶ Review of V-BID Template
- ▶ Learning Collaborative Design Work Group
- ▶ Next Steps

Project Goals and Timeline

▶ Deliverables to Date:

- Template
- SWOT Analysis
- Summary Report

▶ Upcoming Deliverables

- Communications Materials
- Toolkit
- Employer Guidance on V-BID Adoption

SWOT Analysis

JOHN FREEDMAN MD, MBA
FREEDMAN HEALTHCARE, LLC

Strengths: Internal to CT Stakeholder Team

- ▶ HEP is the leading national model for the self-insured V-BID market
 - Recommendation: Apply HEP's model to other self-insured employers and modify it for other market segments
- ▶ CT SIM includes a Quality Measure Alignment Initiative
 - Recommendation: Leverage to help identify and promote high-value providers
- ▶ Some health plans have already begun defining high-value providers (especially PCPs) to incentivize consumers towards these providers
 - Recommendation: Align cost sharing for high-value providers as part of V-BID plans with existing tiered networks and ACO structures

Weaknesses: Internal to CT Stakeholder Team

- ▶ Some employers may be more interested in immediate cost reduction and give up V-BID if they do not see improved ROI
 - Recommendation: Emphasize short-term non-financial benefits and predicted long-term cost reductions (found in HEP and other V-BID plan evaluations)

- ▶ There are limited examples and little demand for V-BID models in the CT market
 - Recommendations:
 - Leverage Learning Collaborative to build demand for V-BID among employers
 - Encourage Exchange to adopt V-BID plan which may drive demand in market
 - Market at business groups annual meetings (CBID, CTBGH, NEBGH) to build interest for joining the Collaborative

- ▶ CT's regulatory environment presents challenges for offering clinically nuanced differential cost sharing in plan designs
 - Recommendations:
 - Use more flexible self-insured plan designs as a model
 - Explore options for building differential cost-sharing through a care management

Opportunities: External to CT Stakeholder Team

- ▶ Health care costs are rising in the state and nationally - employers and plans are looking for innovative ways to curb costs and improve outcomes
 - Recommendation: Provide examples of how V-BID aligns with these goals in the Tool kit and employer communications materials
- ▶ HSA-eligible High Deductible Health Plans are becoming more common
 - Recommendation: Leverage consumers' increased awareness of the cost of services by identifying strategies for implementing VBID as part of HDHP-HSAs
- ▶ V-BID adoption is growing with innovative employers, Medicare Advantage model, and ACA (requires some differential cost sharing for specific high value services)
 - Recommendation: Market V-BID as a competitive edge for plans by promoting a clinically nuanced incentive structure to get better outcomes and higher ROI

Threats: External to CT Stakeholder Team

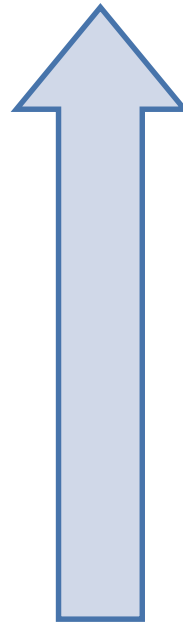
- ▶ Health plans and employers are wary of the administrative burden of implementing clinical nuance
 - Recommendation: Engage Consortium health plan and employer members in strategies to reduce administrative burden when designing V-BID template
- ▶ Patients may not understand the differences between low-value and high-value services, or how differential cost sharing is applied
 - Recommendation: Allow for simple cost sharing schemes; engage union and other employee leaders to educate employees
- ▶ There has been an increase in HSA-eligible High Deductible Health Plans, which do not cover secondary preventive services for chronic diseases under the HSA
 - Recommendation: Adopt innovative designs for HSA-eligible HDHPs, such as the employer contributing to the HSA for utilizing certain preventive services

Template for Recommended V-BID Plan

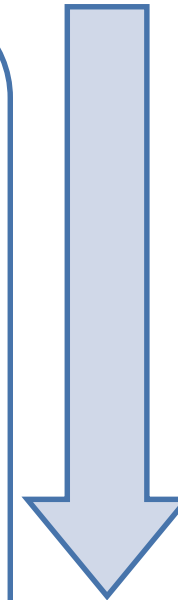
MARK FENDRICK, MD, VBID HEALTH

V-BID Options

Ease of
implementation



1. Change incentives for specific services for all members
2. Change incentives for specific services by clinical condition
3. Change incentives for visits to high value providers
4. Change incentives for participation in chronic disease management programs
5. Change incentives for visits for specific services only if member visits a high value provider



Extent of clinical
nuance

*options are not mutually exclusive nor exhaustive

Incentives

- ▶ Reduced/waived copayment
- ▶ Exclusion from deductible
- ▶ Applied credit to deductible
- ▶ Reduced premium
- ▶ HSA contribution
- ▶ Bonus payment

V-BID Option

Change incentives for specific services for all members

Preventive Services	Visits	Diagnostics	Drugs
Flu shots	Health Maintenance exams	Cholesterol testing	Beta-blockers

▶ Examples:

- Marriott International
- HEP

V-BID Option

Change incentive for specific services by clinical condition

- ▶ Only applies to members with that clinical condition. This requires medical or pharmacy claims to determine which members qualify.

Chronic Condition	Visits	Diagnostics	Drugs
Diabetes	Office visits, nutritional counseling	HgA1c, Eye exams	Insulin
COPD/Asthma	Office visits, smoking cessation	Spirometry	Long-acting inhalers
Depression	Behavioral health visits		Anti-depressants

- ▶ Examples:
 - HEP
 - United Healthcare diabetes program

Potential Clinical Conditions for Targeting

CMS Medicare Advantage Model (Medicare populations)	Connecticut SIM Quality Council Recommendations: Provisional Core Measure Set (Medicaid/Commercial focus)
Diabetes	Diabetes
Chronic Obstructive Pulmonary Disease	Asthma
Congestive Heart Failure	Hypertension
Patient with Past Stroke	Depression
Hypertension	Obesity/High BMI
Coronary Artery Disease	Lower back pain
Mood Disorders	Children with ADHD

V-BID Option

Change incentive for visits to high-value providers

Target population	High-value provider
All members	Visits to NCQA certified PCMH
Members that require specialty care	Specialty care from Center of Excellence

▶ Examples:

- NYC employees
- Lowe's Cleveland Clinic partnership

V-BID Option

Change incentive for participation in chronic disease management programs

Chronic Disease	Disease Management Program
Asthma	Patients with Asthma action plan as part of a disease management program have reduced cost sharing for asthma-related services
Diabetes	Patients who meet with a diabetes educator have reduced cost sharing for diabetes-related services

▶ Example

- Asheville, North Carolina Project

V-BID Option

Change incentive for visits for specific services only if member visits high-value provider

High value provider	Service
Visit to Center of Excellence	Transportation to appointment Specialty care for hip/knee replacement

▶ Example

- Blue Shield of California: Blue Groove

Identifying Low Value Services

Disincentives for services may be applied on the provider and/or consumer side.

Examples of Non-Evidence Based Procedures*
Baseline laboratory studies in patients without systemic disease undergoing low-risk surgery
Stress cardiac or advanced non-invasive imaging in the initial evaluation of patients w/o symptoms
Annual electrocardiograms (EKGs) or other cardiac screening for low-risk patients without symptoms.
Routine annual cervical cytology screening (Pap tests) in women 21–65 years of age.
PSA-based screening for prostate cancer in all men regardless of age.

*Recommendations adapted from Choosing Wisely[®], US Preventive Services Task Force and other recommendations

Design Session Workgroups

- ▶ Learning Collaborative Workgroup
 - Determine structure and goals of Learning Collaborative; plan for annual meeting
- ▶ Clinical Services and Conditions Workgroup
 - Discuss services and conditions to be targeted as part of V-BID template
- ▶ High Value Providers Workgroup
 - Discuss how to incentivize using high value providers as part of V-BID template

Next Steps:

- ▶ Finalize V-BID Template and Employer Guidance on V-BID Adoption
- ▶ Communication Materials
- ▶ Employer Toolkit

Upcoming Meetings:

- ▶ Design sessions: Weeks of April 4 – 15
- ▶ Executive Team Meeting: April 19
- ▶ Third Consortium Meeting: April 27

Appendix

Other V-BID Options:

- ▶ Enhanced coverage of supplemental benefits

Supplemental Benefit	Target Population
Gym membership for members enrolled in program	All members