

**STATE OF CONNETICUT**  
**State Innovation Model**  
***Value Based Insurance Design Consortium Webinar***  
**Meeting Summary**  
**Thursday, June 30, 2016**  
**10:00 am – 11:00 am**

**Members Present:** Alvin Ayers; Mary Bradley; Patrick Charmel; Diane Coniglio; Sandra Czunas; Michael Dimenstein; Jennifer Herz; Desmond Hussey; Robert Krzys; Steven Moore; Russell J. Munson; Catherine Olinski; Hugh Penney; Janice Perkins; Amy Tippet-Stangler; Michelle Vislosky; Steven Wolfson; Thomas Woodruff

**Members Absent:** Lesley Bennett; Mary Ellen Breault; James Cardon; Christine Cappiello; Joseph Dorazio; Tekisha Everette; Cheryl Lescarbeau; Ann Lopes; Thomas Meehan; Nancy Metcalf; Fiona Mohring; Krista Sperry; James Wadleigh; Deremius Williams

**Other Participants:** Cathy Cuddy; Bruce Landon; Jenna Lupi; Rachel Pieciak; Mark Schaefer; Alyssa Ursillo

The meeting was called to order at 10:03 am.

**1. Approval of June 1<sup>st</sup> Meeting Minutes**

After reviewing, the consortium approved the June 1<sup>st</sup> meeting minutes.

**2. Public Comments**

There were no public comments.

**3. Review of Employer Manual Feedback**

Alyssa Ursillo welcomed the Consortium to the meeting and reviewed the agenda for the webinar. She explained that the focus of the webinar was to review the Consortium feedback on the Employer Manual, to discuss the Learning Collaborative and to review the next steps of this phase of the V-BID initiative and the role of the Consortium moving forward.

Ms. Ursillo described the major changes that FHC will be making to the Employer Manual based on the feedback of the Consortium. She described that all feedback has been compiled into a document that references: the proposed change and response for the suggestions of all Consortium members.

The first major issue that was raised by several Consortium members was that the Manual, while done, is much too long and too dense for employers. To address this issue, FHC will separate the manual into two versions, one for self-insured employers and one for fully-insured employers, which will naturally make each Manual shorter. Second, several sections of the Manual will be condensed by including bullets and graphics wherever possible as well as combining the 'Executive Summary' and 'Introduction to V-BID' sections. Additionally, FHC will make several sections appendices, including recommendations development, consumer engagement strategies, and the overcoming obstacles chart, aligning with provider reforms, and resources. Ms. Ursillo explained that while these sections contain valuable information, they are not essential to understanding V-BID or V-BID implementation, and instead serve as specific resources that employers may review if needed. As a result of these formatting changes, Ms.

Ursillo explained that the body of the manual was shortened to about 25 pages, and focuses on introducing the V-BID concept and how it can benefit employers, instructions on how to use the manual, the V-BID template and guiding principles, and implementation and communications strategies.

The second major issue raised by Consortium members was that the Manual needed to make a stronger business case for V-BID by including examples of real outcomes that have been achieved by employers who are currently implementing V-BID. Ms. Ursillo explained that FHC's approach to addressing this issue was multifactorial. First, FHC has developed a 1 page marketing piece explaining what V-BID is, and the bottom line benefit it offers to employers, including examples of success stories from other employers implementing V-BID plans. Because there are no data to provide a dollar amount that employers may spend, or evidence to guarantee that their exact V-BID plan will result in net savings in x number of years, the Benefits to Employers section has been re-framed to focus on how employers will spend healthcare dollars more wisely with V-BID, get higher quality healthcare for their money, and may slow rising healthcare cost trends and improve productivity. Call-out boxes have also been added throughout the Manual to highlight positive outcomes Connecticut employers have achieved implementing V-BID.

Lastly, Ms. Ursillo explained the plan for addressing the Consortium's concern that the Manual should be specific to self-insured or fully-insured employers rather than combining the two into a single manual. To address this concern, FHC will separate the manual so each market has their own manual specific for their market needs. The Manual that the Consortium has reviewed for the purposes of this webinar will be for self-insured employers with any content specific to fully-insured employers removed, such as the Basic plan template. FHC is working to develop the fully-insured manual, but this will continue to evolve as the team engages health plans, brokers and fully-insured employers around the feasibility of implementing V-BID on the fully-insured market.

When Ms. Ursillo opened up the discussion to the Consortium, several members had additional comments and concerns. Jennifer Herz emphasized that when separating the Manual that the outcomes described in the manuals be appropriate for the intended audience. She cautioned the group to not "overpromise and under deliver" a sentiment that was echoed by several other Consortium members. Mary Bradley was curious as to whether or not there would be a distinction for experience-rated v. non-experience-rated among the fully-insured market to which Ms. Ursillo offered as a future direction for the initiative.

Mark Schaefer summarized that the communications to employers, regardless of size or market, need to be defensible and nuanced. Ms. Ursillo explained that the 1 page marketing piece that is currently in development can be circulated amongst select Consortium members to ensure that the communication is aligned with their perception of market needs and is able to effectively pitch V-BID.

Ms. Ursillo asked the group for their opinion on Steve Wolfson's comment regarding the potential interference that onsite clinics could have on care coordination. Alvin Ayers and Janice Perkins both described the overall success stories of their onsite clinics. Dr. Wolfson described that his concern for this component comes from what he calls the "oh by the way" phenomenon which describes when patients use office visits with their PCP as an opportunity to discuss other health issues that they may not divulge otherwise. Mr. Ayers answered to this concern saying that their onsite clinic has licensed medical staff there allowing for complete integration of services. Ms.

Perkins reemphasized that onsite clinics are not intended to replace the PCP but rather to increase utilization of wellness initiatives. Ms. Ursillo reminded the group that all components of the V-BID templates are simply recommendations. Sandra Czunas described how HEP collaborates with the CVS Minute Clinic so that information is guaranteed to be reported back to the PCP. Steven Moore reminded the group that onsite clinics will make it more convenient for some employees to complete the recommended services for earning incentives. Upon conclusion of conversation, the Consortium had agreed that onsite clinics could be a vital component of increasing the utilization of wellness initiatives, but as Ms. Czunas had mentioned in her comment, there needs to be a means of reporting health information back to the primary care physician.

#### **4. Discussion of Employer Engagement Strategies**

Ms. Ursillo directed the conversation to the next phase of the initiative, which is to promote V-BID and initiate employer adoption of the templates. She explained how the different implementation strategies will require two different strategies for engaging self-insured v. fully-insured employers in V-BID. For fully-insured employers, the goal is to get them and their health plans interested in V-BID and plan design by creating a demand for these types of plans in the fully-insured market. For this market, the strategy will also need to engage the health plans around developing V-BID plans for health insurers. The team intends to engage health plans around the feasibility of adopting the Basic Plan template and to engage the broker community through broker organizations, and to meet employers, with limited time, where they are, such as at Chambers of Commerce meetings and other local and employer organization meetings. Ms. Herz added that it is important to have a game plan for engaging these employers and suggested that a plan for an engagement strategy be outlined. Amy Tippet-Stangler added that in developing this strategy a realistic timeline and persistent approach are critical for its success.

For the self-insured market the primary avenue for recruitment will be the Learning Collaborative. Therefore, the goals of the Learning Collaborative are to engage this segment of employers to get buy-in into implementing the V-BID Expanded Plan template, and then to provide a network and forum that allows employers who are trying to implement V-BID share best practices, learn from each other, and overcome barriers. Ms. Ursillo described the current recruitment strategy to be the Kickoff meeting in the fall. The meeting will be targeted toward HR and Benefits Department professionals, as well as senior leadership. By inviting a large number of people to the Kickoff the hope is to recruit 25-50 employers into the Collaborative. The Kickoff meeting will focus on introducing the SIM, V-BID initiative, plan design template, and Employer Manual as tools for initiating a V-BID plan and include a panel discussion with employers currently implementing V-BID, and to feature provider and/or patient stories about how V-BID benefits have positively impacted them. After the Kickoff, the Collaborative will continue to meet via webinar, conference calls, work sessions, and online forums, and will eventually evolve into a network of employers implementing V-BID plans.

Ms. Bradley suggested that those recruited should not be employers doing V-BID. She also asked if there was any process for developing a benchmark for V-BID. Jenna Lupi of the PMO explained that they are currently in the process of doing so.

#### **5. Next Meeting and Next Steps**

- i. The Connecticut team will present the Employer Manual to the SIM Steering Committee on July 14<sup>th</sup>. The fully insured manual will be presented as a working draft.

- ii. The Learning Collaborative Kickoff will be in September or October 2016. Consortium members are invited to attend.
- iii. Plan to keep Consortium members updated on the progress of the initiative through a monthly email

The meeting adjourned at 11:00 am.