

Connecticut Value-Based Insurance Design Consortium Meeting January 24, 2018 Meeting



Purpose of Today's Meeting

▸ Agenda

- Gather Consortium's input on VBID Technical Assistance
 - Overview of VBID Technical Assistance (TA) opportunity
 - Feedback on TA employer tool: Data Dashboard Template
 - Feedback on TA recruitment strategy
- State of CT Health Enhancement Program update and implications
- Next steps



Technical Assistance Overview

V-BID Initiative Recap

2016

Developed initial VBID templates and implementation manuals for self-insured and fully-insured employers.

2017

Developed 2017 VBID templates, employer outreach to raise awareness of VBID strategies.

2018-2019

Targeted technical assistance for self-insured employers to adopt VBID benefits, update templates.

Technical Assistance Opportunity for Employers

- ▶ PMO/OSC is offering no cost Technical Assistance to self-insured employers interested in providing value-based health benefits
 - Freedman HealthCare and VBID Health will conduct TA
 - Two cohorts of up to 10 employers each will be selected over two years (2018-2019)
 - Selected employers will participate in program for nine months

- ▶ Any self-insured employer with any CT residents enrolled in their employer-sponsored health plan is eligible
 - Can be local or national self-insured employer
 - May already offer wellness and/or limited value-based benefits
 - Apply by completing a short questionnaire by 1/31

What Selected Employers Receive

- ▶ **Peer-to-peer learning** as part of a cohort of 5-10 employers
- ▶ Sessions with VBID founders and **leading experts** Mark Fendrick and Mike Chernew
- ▶ **Support organizing and interpreting data** using benefits inventory and data dashboard to select value-based benefits customized to employer population and culture
- ▶ **Employer case studies**, resource library, communication materials and evaluation tools
- ▶ **One-on-one assistance** to address specific challenges and questions

How this Program is Different

- ▶ Changes to plan design are company-wide, not specific to a market (not limited to CT residents)
- ▶ Participation is no cost and requires minimal time from employers
- ▶ Connects employers to national experts and peers to learn best practices and overcome challenges
- ▶ Builds upon existing plan designs and wellness initiatives
- ▶ Uses data already available from health plans, TPAs, benefits consultants – no new feeds are required
- ▶ Includes role for employers' trusted consultants

Recommended High Value Benefits

Benefit recommendations are based on 2017 VBID self-insured employer template

1. Financial incentives to increase use of evidence-based age and gender appropriate preventive screenings

E.g. Breast Cancer Screening, Colon Cancer Screening

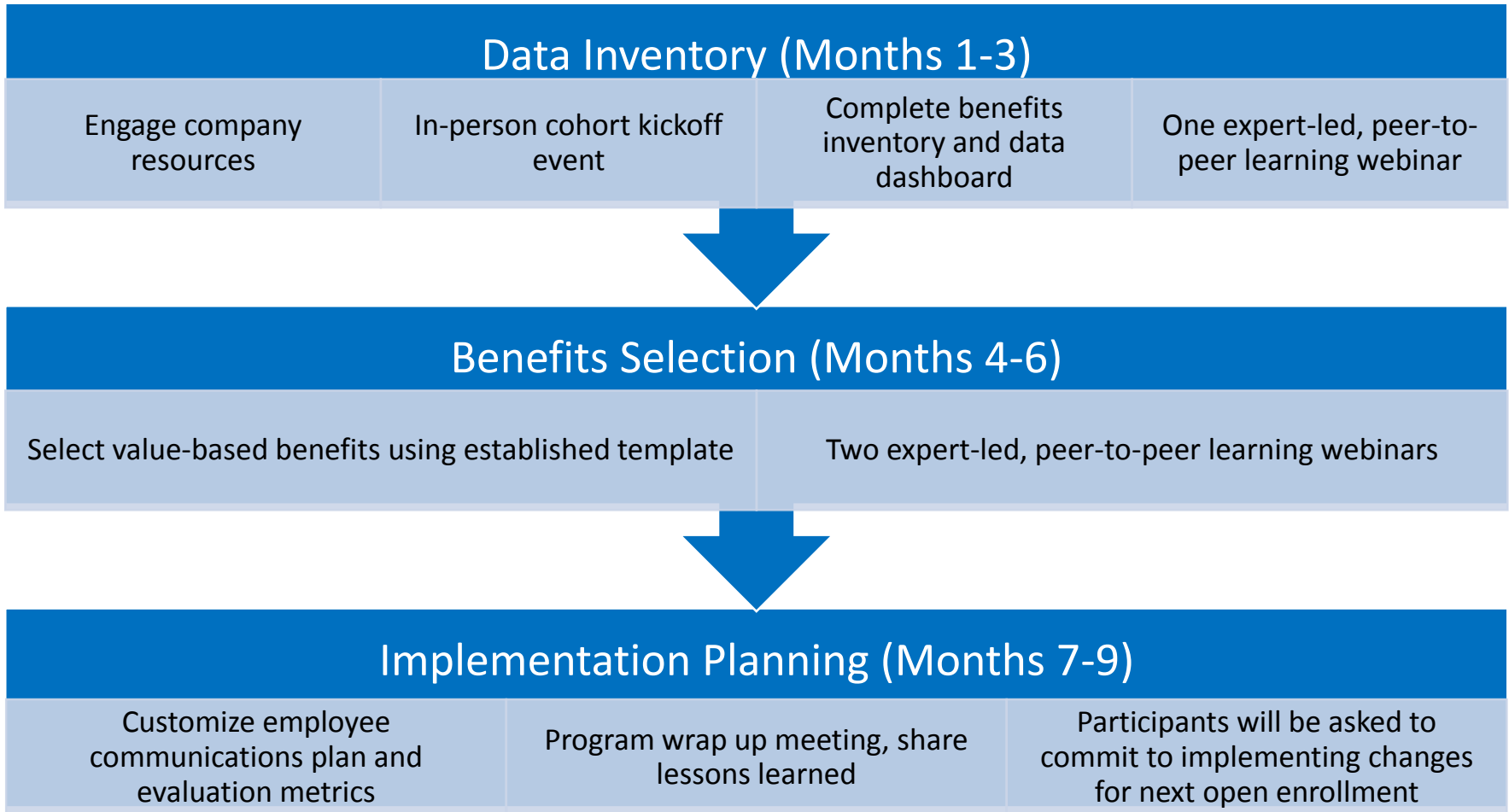
2. Lower employee costs for visits, diagnostics, and drugs related to chronic conditions

E.g. diabetes, asthma, heart disease

3. Give financial incentives for visits to high quality, low cost providers

E.g. Tiered networks, Accountable Care Organizations, Centers of Excellence

Participant Expectations



How to Apply

- ▶ Employers must complete a simple, short questionnaire by 1/31: https://www.surveymonkey.com/r/VBID_App_for_TA
 - Consultants and brokers can apply on behalf of their clients
- ▶ Up to ten employers will be selected for 2018
- ▶ Selected employers must commit in writing to the program
- ▶ Program anticipated to begin in February



Questions on Approach?



TA Data Dashboard

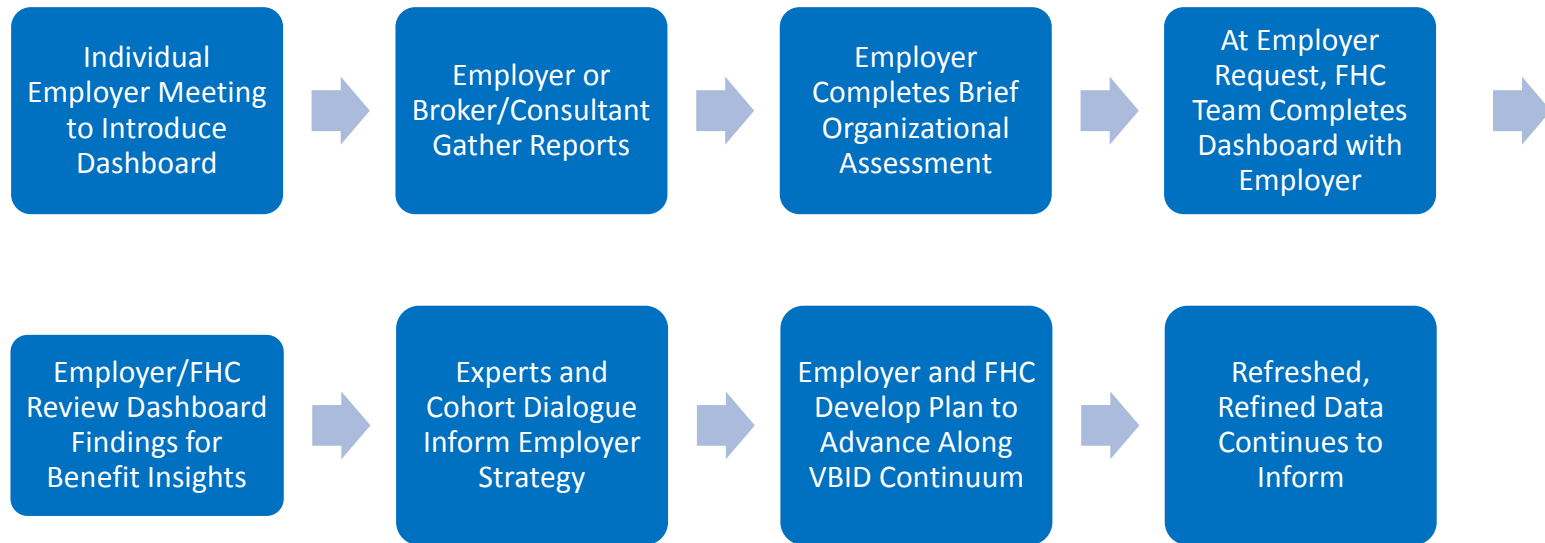
Consortium Feedback

Employer Data Dashboard Template

- ▶ Purpose: Tool for employers to organize and interpret various data they receive from vendors into single dashboard for data-driven benefits selection
 - First step employers take in TA process
 - Helps employers think about data they should be receiving and how it should be presented to drive decisions
 - Helps employers think about what VBID interventions might make sense for their organizations.

Employer Data Dashboard Template

Process:



Activity: Feedback on Data Dashboard

- ▶ Do we have the right goals?
 - Organize Data More Effectively
 - Inform Possible VBID Direction
 - Empower Employers to Ask for New Data or Data Presented Differently

- ▶ Is this the right approach?
 - Select high-level questions aimed at pointing to broader trends and highlighting next round of questions
 - Broad recommendations with directives back to the manual and template
 - Instances where we know data may not be readily available but question intended to get employer thinking about data needed

- ▶ Are these the right questions in the right format?
 - Ease of completion
 - What are we missing?



TA Recruitment Strategies

Consortium Feedback

Multi-faceted Recruitment Strategy

- ▶ Targeted outreach to collaborators
 - Business groups and HR professional organizations
 - Health plans and pharma
 - Brokers and consultants
 - Employer champions
 - Labor unions
- ▶ Direct outreach to employers
 - Database of individual employers to determine connections
 - Connections through events and peers
- ▶ Media promotion
 - Social media promotion: Twitter and LinkedIn
 - SIM newsletter
 - Press releases in business journals

Key Messaging: Why VBID

What: VBID uses financial incentives and education to urge people to get the right care, at the right time, from the right provider:

- ▶ Provide examples of VBID benefits (e.g. lower copays for diabetes drugs)

Why: Employers and health plans report employees better manage diseases, use fewer costly services, improves productivity, increases employee satisfaction:

- ▶ Over 150,000 Connecticut state and municipal employees are enrolled in VBID plans
- ▶ 40% of large employers including Connecticut companies
- ▶ Health plans in the state are ready to manage VBID benefits
- ▶ Share success stories from CT employers
- ▶ Share personal employee stories from “Humans of HEP” campaign

Key Messaging: TA Benefits for Employers

What: FREE Program offered by neutral state agency

- ▶ Program components, highlighting peer-to-peer and expert-led learning

Why: Benefits for employers and employees

- ▶ Lower use of costly services like ED visits and hospital stays
- ▶ Lower use of unnecessary care, reducing healthcare spending
- ▶ Lower per member healthcare costs
- ▶ Increased use of primary care and preventive services
- ▶ Improved productivity, less disability and fewer sick days
- ▶ Increased employee satisfaction by cutting out of pocket costs and improving quality

How Consortium Can Collaborate: Refer Employers!!

Collaborator	Messaging
Business Groups	Respond to members' concerns about employees' chronic conditions, pharmaceutical costs and lack of engagement with tangible action step
Consumers/Labor Unions	Engage in more effective bargaining between union negotiators and employers with a win-win strategy for both parties. Advocate for VBID benefits from your employer.
Employer "Champions" and Individual Employers	Connect peers with free assistance to achieve health benefits goals and showcase success of your health benefits strategies
Health plans and pharma	Consider how your standard benefit designs could be enhanced to better support VBID principles. Assist employer clients throughout TA process as requested.
Providers	Be an industry leader in high value care by moving to value based benefits.

Activity: Feedback on Recruitment Strategies

- ▶ Messaging
 - Star: Which messages are most compelling?
 - Red post-it: Do any messages need to be changed?
- ▶ Collaborators
 - Red post-it: Who are we missing? Are there specific contacts we should reach out to?
- ▶ Direct employer outreach
 - Star: What strategies for reaching employers do you think will be most successful?
 - Red post-it: Are there specific employers we should reach out to?
- ▶ Media promotion
 - Star: Which channels do you use/would trust to find this info?
 - Red post-it: Which channels are not relevant to you?



State of Connecticut Health Enhancement Program (HEP) *Update*

State of CT HEP 1.0



State Employees elect to participate and receive incentives

- ▶ HEP targets preventive care and chronic disease by:
 - Lowering co-pays for medications/care for five chronic conditions (Diabetes, Hyperlipidemia, Asthma/COPD, Hypertension, Coronary Artery Disease)
 - Requiring age appropriate preventive screenings
 - Offering chronic disease management education

- ▶ HEP lowers costs for participating employees by:
 - Waiving co-pays for preventive care and chronic disease management
 - Reducing monthly premium share (\$1,200 annually)
 - Waiving annual deductible (\$350 individual / \$1,400 family)

State of CT HEP 1.0



Recent *HealthCore* studies finds HEP participants have had improved HEDIS outcomes, resulting from:

- ▶ Increased preventive care services (e.g. mammography and lipid screenings)
- ▶ Increased office visits, including those for preventive and chronic conditions
- ▶ Decreased Emergency Department use and specialty visits

The HEP plan is also available to municipalities through the CT Partnership Plan 2.0, administered by *UnitedHealthcare*

<http://www.osc.ct.gov/ctpartner/>

State of CT HEP 1.0



Change in HEDIS outcomes – Preventive Care

HEDIS Metrics	VBID			Non-VBID			DID (Δ1-Δ2)
	Pre-Period	Post-Period	Change from Pre to Post (Δ1)	Pre-Period	Post-Period	Change from Pre to Post (Δ2)	
Adults' access to preventive health services (AAP) (≥20 years)	64.2%	69.3%	5.0%	62.9%	59.9%	-3.0%	8.1%***
20-44	61.2%	59.0%	-2.2%	58.1%	50.0%	-8.1%	6.0%***
45-64	66.5%	75.2%	8.7%	67.2%	65.9%	-1.4%	10.1%***
65+	74.9%	81.7%	6.9%	68.1%	70.6%	2.5%	4.4%*
Cholesterol screening (CMC-like) (≥18 years)	40.7%	58.8%	18.1%	43.6%	42.0%	-1.6%	19.7%***
18-44	27.9%	34.8%	6.9%	28.6%	22.8%	-5.8%	12.7%***
45-64	52.1%	75.5%	23.3%	59.0%	56.1%	-2.8%	26.2%***
65+	70.1%	85.2%	15.1%	60.2%	63.9%	3.7%	11.4%***
Cervical cancer screening (CCS) (24-64 years)	53.9%	44.0%	-9.9%	58.4%	39.9%	-18.5%	8.7%***
24-29	69.2%	47.3%	-21.9%	70.0%	45.4%	-24.6%	2.7%
30-64	53.0%	43.9%	-9.2%	57.6%	39.6%	-18.1%	8.9%***
Colorectal cancer screening (COL) (51-75 years)	24.9%	34.6%	9.8%	27.0%	25.7%	-1.3%	11.0%***
Breast cancer screening (BCS) (35-69 years)	50.7%	60.4%	9.8%	55.1%	54.8%	-0.4%	10.1%***
35-41	23.0%	27.5%	4.6%	26.1%	21.8%	-4.3%	8.9%***
42-52	58.2%	64.0%	5.8%	60.2%	57.5%	-2.7%	8.5%***
53-69	61.7%	69.4%	7.6%	69.1%	62.3%	-6.7%	14.4%***

* P<0.05; **P<0.01; ***P<0.001

State of CT HEP 1.0



Change in Medication Measures

Metrics	VBID			Non-VBID			DID ($\Delta 1 - \Delta 2$)
	Pre-Period	Post-Period	Change from Pre to Post ($\Delta 1$)	Pre-Period	Post-Period	Change from Pre to Post ($\Delta 2$)	
Medication Adherence- Proportion of Days Covered (PDC)							
Oral Diabetes	80.3	91.3	13.7%	81.1	84.2	3.9%	9.9%***
Hypertension (ACE/ARB)	84.0	91.6	9.1%	83.2	85.3	2.5%	6.5%***
Cholesterol (Statins)	81.1	89.5	10.4%	79.2	82.2	3.7%	6.7%***
Annual Monitoring for Persistent Medications							
Digoxin	88.2%	95.1%	6.8%	86.7%	83.3%	-3.3%	10.2%
ACE/ARB	79.1%	90.7%	11.7%	81.9%	84.0%	2.2%	9.5%***
Diuretics	77.8%	90.2%	12.4%	81.9%	83.8%	1.9%	10.5%***
Other Acute and Chronic Care Measurements							
Arthritis: Disease Modifying Anti-rheumatic Drug (DMARD) Therapy in Rheumatoid Arthritis	9.1%	8.5%	-0.6%	14.4%	14.8%	0.4%	-1.0%
New Episode of Depression: Effective Acute Phase Treatment	72.8%	90.3%	17.5%	63.1%	65.7%	2.6%	15.0%***
New Episode of Depression: Effective Continuation Phase Treatment	41.5%	66.8%	25.4%	33.1%	40.5%	7.4%	17.9%***
Generic Dispensing Rate	40.1%	75.9%	35.8%	44.9%	78.8%	33.9%	1.9%**

* P<0.05; **P<0.01; ***P<0.001

State of CT HEP 2.0



HEP 2.0 incentivizes the use of high quality, lower cost providers and facilities through:

- Waived copays for Preferred Providers, in-network PCPs and specialists
- Waived co-insurance for preferred in-network imaging and lab facilities
- Bonus payment for using Centers of Excellence for certain procedures (e.g. joint replacement) using *State of Connecticut Smart Shopper*



State of CT Medicare Advantage



- ▶ State moved to custom group *United Medicare Advantage* plan for state retirees that features VBID components
 - Expanded preventive care
 - Gift cards for completing screenings, flu shots, and other wellness activities
 - 24/7 registered nurse hotline
 - Annual house calls

- ▶ Projected to save the State over \$100M annually, and decrease the state's net actuarial liability by \$5B

Implications for VBID Templates

- ▶ 2017 VBID templates recommend incentivizing visits to high value providers, but this is somewhat undefined
- ▶ Considerations for 2018 templates:
 - Build on recommendations for using Centers of Excellence for specific procedures
 - Adopt programs like *CTSmartShopper* to incentivize use of high quality, low cost providers
 - Reference based pricing designs



Questions?

Next Steps

- ▶ Share TA application with your network and peers who may benefit from program!
 - Connect us with any peers or colleagues who may be interested for more information
 - Refer employers to the program
- ▶ Send us any additional feedback on benefits inventory, data dashboard, and/or recruitment strategies
- ▶ Next meeting: June 2018
 - Purpose: Update VBID templates based on current market trends and feedback from TA employers