



Health Care Update

June 12, 2023



- Financials (Rae-Ellen)
- Partnership (Bernie)
- High-level utilization (Josh)
- Open Enrollment (Tracy/Rae-Ellen)
- RFPs (Josh)
- Quantum Implementation (Betsy)
- Communications (Betsy)
- Program analysis (discussion) (Sandra)



FY 2022-2023 Year End Health Account Balances

Budget Review 5.15.23

Active Employee Healthcare Appropriation	
<i>Projected Appropriation Balance</i>	\$ 27,688,971.69

Active Employee Healthcare FAD Accounts	
<i>Projected Active Health FAD</i>	\$ 36,700,422.37
<i>Projected Active Rx FAD</i>	\$ 23,130,544.98
<i>Combined FAD Balances:</i>	\$ 59,209,906.13

Retired Employee Healthcare Appropriation	
<i>Projected Appropriation Balance</i>	\$ 88,354,605.71

Retired Employee Healthcare OPEB FAD Accounts	
<i>Projected Retiree Health</i>	\$ 188,175,333.62
<i>Projected Retiree Rx</i>	\$ 9,867,065.31
<i>Combined FAD Balances:</i>	\$ 198,042,398.93



Partnership 2.0

As of 6/1/23 we have 160 groups enrolled totaling just under 25,000 employees and approximately 58,000 members.

As of 7/1/23 we will have 3 new groups joining the partnership plan with approximately 700 employees and 1,800 members. At the same time, 7 groups will be leaving, totaling approximately 1,600 employees and over 4,400 members. This leaves us with a net loss of approximately 900 employees and 2,600 members.

Also in July we will be holding a quarterly partnership utilization update for existing groups and those will be held on Monday, July 17th and Thursday, July 20th

Partnership 1.0

As of 6/1/23 we still have 5 groups remaining totaling approximately 2,400 employees and just under 3,400 members.



UTILIZATION DASHBOARD

State of Connecticut

Reporting Periods (Paid through April 2023)

Current Period: February 2022 – January 2023

Prior Period: February 2021 – January 2022

Actives & Non-Medicare Retirees

All Plans

Utilization Dashboard

Current Period: Feb 2022 – Jan 2023

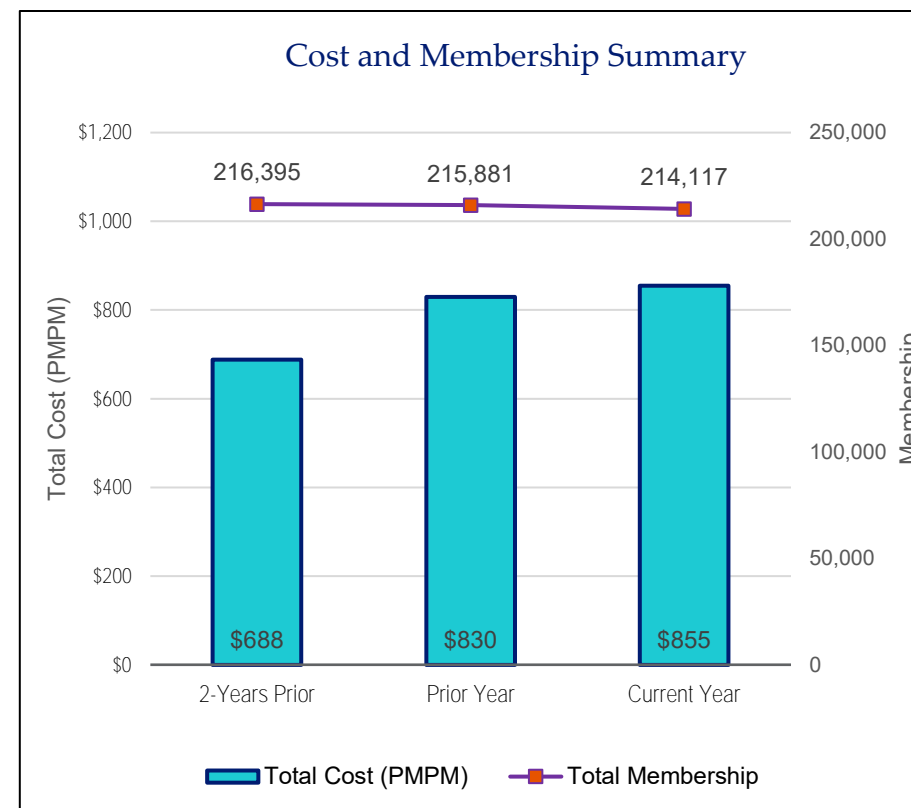
Prior Period: Feb 2021 – Jan 2022

Claims Summary¹

	Total Cost (PMPM)	% of Total Cost	Current Trend
Medical	\$696.72	82%	▲ 2.1%
Inpatient Facility	\$134.55	16%	▼ -5.5%
Outpatient Facility	\$275.84	32%	▲ 5.7%
Professional Services	\$265.42	31%	▲ 3.1%
Ancillary	\$20.91	2%	▼ -2.8%
Pharmacy ²	\$157.96	18%	▲ 7.1%
Total Cost	\$854.68		▲ 3.0%

Drivers of Trend

Service Category	Current PMPM	Prior PMPM	Change
Pharmacy - Specialty	\$47.76	\$40.13	▲ \$7.63
Outpatient - Surgery	\$83.72	\$76.81	▲ \$6.91
Emergency Room	\$47.86	\$41.86	▲ \$6.00
Inpatient - Medical	\$35.74	\$40.24	▼ \$4.50
Outpatient - Lab/Pathology	\$11.23	\$15.71	▼ \$4.48



Observations

- PMPM medical costs have increased 2.1% Year-over-Year (“YoY”) and accounted for 82% of total spend.
- PMPM Rx costs have increased 7.1% YoY and accounted for 18% of total spend. Rx Costs do not reflect PrudentRx savings.
- The second table above illustrates the top 5 drivers of trend. Pharmacy - Specialty was the top driver of spend on a PMPM basis, increasing \$7.63 PMPM over last year.

¹ Claims for the current period have been completed using a factor of 0.98

² Pharmacy costs do not reflect PrudentRx savings.

Actives & Non-Medicare Retirees

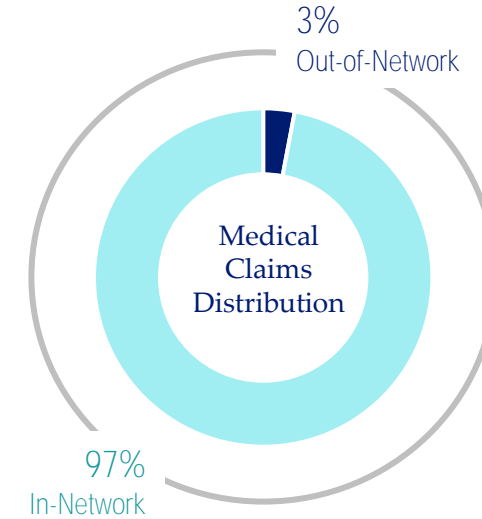
All Plans

Utilization Dashboard

Current Period: Feb 2022 – Jan 2023
 Prior Period: Feb 2021 – Jan 2022

Key Utilization Metrics

Category (Utilization per 1,000)	Current Period	Prior Period	% Change
Office Visits	4,968	5,097	-2.5%
Preventive Services	4,699	4,916	-4.4%
Inpatient Admissions	67	69	-3.1%
Average Cost Per Admission	\$24,165	\$24,761	-2.4%
Emergency Room (ER) Visits	200	183	9.1%
Average ER Visit Cost	\$2,871	\$2,739	4.8%
Urgent Care (UC) Visits	418	486	-14.0%
Average UC Visit Cost	\$214	\$198	8.1%
Rx Scripts	11,453	10,953	4.6%
Average Cost ¹ per Script	\$165	\$162	2.4%



Observations

- Office visits per 1,000 decreased 2.5% YoY, and preventive services decreased 4.4% YoY.
- Inpatient admissions per 1,000 decreased 3.1% YoY, and average cost per admission decreased 2.4% YoY.
- ER visits per 1,000 increased 9.1% YoY, the average cost per visit increased 4.8% YoY.
- Urgent care visits per 1,000 decreased 14.% YoY, while the average cost per visit increased 8.1% YoY.
- Rx scripts per 1,000 increased 4.6% YoY, and unit cost trend increased 2.4% YoY.

¹ Pharmacy costs do not reflect PrudentRx savings.

Actives & Non-Medicare Retirees

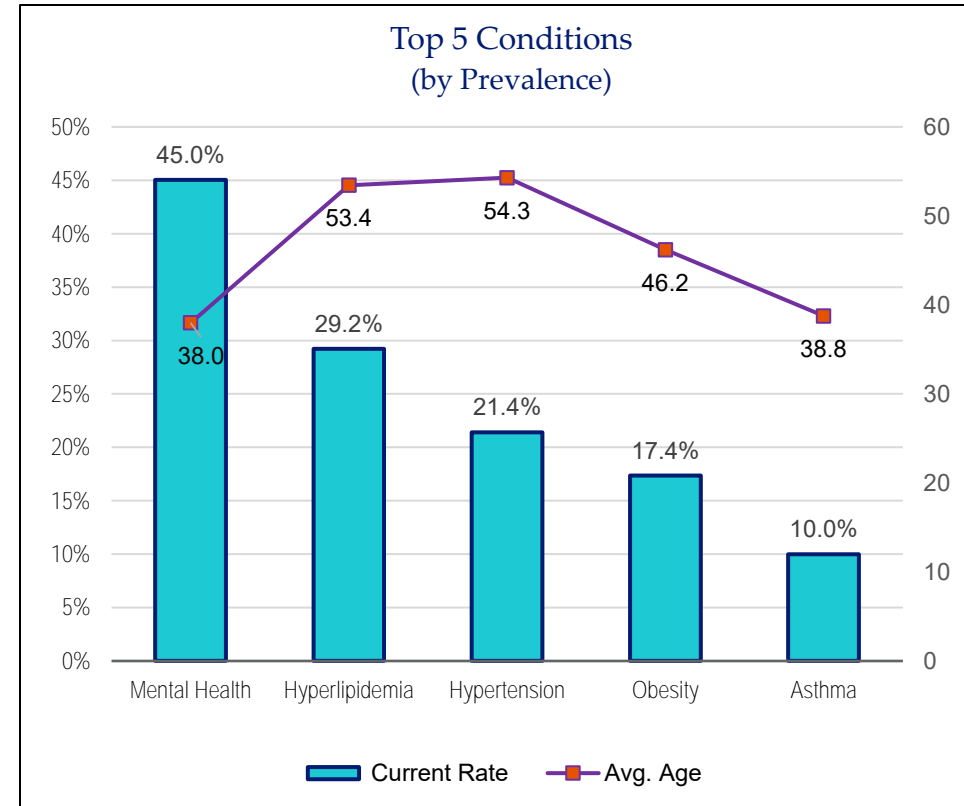
All Plans

Utilization Dashboard

Current Period: Feb 2022 – Jan 2023
 Prior Period: Feb 2021 – Jan 2022

Disease Prevalence (sorted by prevalence)

Chronic Condition	Current Rate	Prior Rate
Mental Health	45.0%	42.5%
Hyperlipidemia	29.2%	28.1%
Hypertension	21.4%	21.2%
Obesity	17.4%	15.8%
Asthma	10.0%	9.8%
Diabetes	7.7%	6.8%
Substance Abuse	6.9%	6.5%
Coronary Artery Disease (CAD)	2.9%	2.8%
Breast Cancer	1.1%	1.1%
Chronic Obstructive Pulmonary Disease (COPD)	0.6%	0.6%
Prostate Cancer	0.5%	0.5%
Congestive Heart Failure (CHF)	0.4%	0.4%
Colorectal Cancer	0.2%	0.2%
Cervical Cancer	0.0%	0.0%



Observations

- Mental health remained the State's top disease condition with 45% of total members (prevalence) and has increased 2.6 percentage points (pp) YoY.
- Continuing increases in Hyperlipidemia, Obesity, and Diabetes

Actives & Non-Medicare Retirees

All Plans

Utilization Dashboard

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Prior Period: Feb 2021 – Jan 2022

Care Gaps and Compliance Rates

Chronic Condition	Clinical Quality Metrics	All Members				Gender Distribution		Compliance Rate by Gender	
		Population	Current Period	Change (pp)	SHAPE BoB ¹	F	M	F	M
Diabetes	At least 1 hemoglobin A1C test	16,472	83%	▼ 2.9	81%	53%	47%	80%	86%
	Screening for diabetic nephropathy	16,472	70%	▼ 3.1	62%	53%	47%	69%	71%
	Screening for diabetic retinopathy	16,472	56%	▼ 3.0	24%	53%	47%	56%	56%
Hypertension	On anti-hypertensives and serum potassium	31,065	67%	▼ 2.8	62%	42%	58%	66%	67%
Hyperlipidemia	Total cholesterol testing	62,235	80%	▼ 0.5	73%	48%	52%	81%	79%
COPD	Spirometry testing	1,362	36%	▲ 0.5	26%	53%	47%	38%	34%
CAD	Patients currently taking an ACE-Inhibitor or ARB Drug	6,249	41%	▼ 2.2	41%	34%	66%	31%	46%
	Patients currently taking a statin	6,249	79%	▼ 0.1	69%	34%	66%	66%	86%
Preventive Screening	Breast cancer	54,442	67%	▼ 0.2	43%	100%		67%	
	Cervical cancer	88,384	53%	▼ 0.2	30%	100%		53%	
	Colorectal cancer	71,376	55%	▲ 5.1	35%	54%	46%	58%	52%
	Prostate cancer	32,813	70%	▲ 3.6	45%		100%		70%

Observations

- All preventive screening compliance rates are critically important. Early detection of chronic conditions gives the patient a higher probability of a positive outcome. Expensive treatments in the future can be avoided if these conditions are caught/managed early.
- Noticeable increases in Colorectal Cancer and Prostate Cancer screening rates.
- While the majority of **compliance rates are down YoY**, the State's compliance rates remain favorable in all categories when compared to the SHAPE BoB.
- The Plan should frequently communicate the value and importance of preventive screenings.

¹ SHAPE Book-of-Business reflects compliance rates for calendar year 2021. Compliance statistics have not been adjusted for risk or severity

Actives & Non-Medicare Retirees

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ER Comparison to Pre-Pandemic			
	<u>CY 2022</u>	<u>CY 2019</u>	<u>Annualized Change</u>
PMPM:	\$46.40	\$35.54	9.3%
Utilization/K/Yr.:	194.4	177.2	3.1%
Unit Cost:	\$2,864.00	\$2,407.02	6.0%

<u>Top 2022 Hospitals</u>	<u>2022 Rank</u>	<u>2019 Rank</u>	<u>Change 2019 to 2022</u>	<u>2022 Allowed</u>	<u>Annualized PMPM</u>	<u>Annualized Unit Cost</u>	<u>Annualized Utilization</u>
YALE NEW HAVEN HOSPITAL	1	1	0	\$10,477,445	9.4%	3.5%	5.8%
HARTFORD HOSPITAL	2	2	0	\$8,953,760	13.1%	10.5%	2.4%
BRIDGEPORT HOSPITAL	3	6	3	\$7,749,553	15.1%	-6.7%	23.3%
WILLIAM W BACKUS HOSPITAL	4	3	-1	\$7,245,297	5.9%	5.0%	0.9%
HOSPITAL OF CENTRAL CONNECTICUT	5	7	2	\$6,817,245	14.2%	8.5%	5.3%
CONNECTICUT CHILDRENS MEDICAL CENTER	6	11	5	\$5,834,869	28.8%	22.9%	4.8%
JOHN DEMPSEY HOSPITAL	7	8	1	\$5,817,159	13.2%	0.3%	12.9%
STAMFORD HOSPITAL	8	14	6	\$4,866,106	21.9%	0.8%	20.9%
MIDDLESEX HOSPITAL	9	4	-5	\$4,826,575	-6.9%	4.2%	-10.6%
ST FRANCIS HOSPITAL MEDICAL CTR	10	5	-5	\$4,713,148	-3.2%	5.7%	-8.4%

<u>Top 2022 DX3's</u>	<u>2022 Rank</u>	<u>2019 Rank</u>	<u>Change 2019 to 2022</u>	<u>2022 Allowed</u>	<u>Annualized PMPM</u>	<u>Annualized Unit Cost</u>	<u>Annualized Utilization</u>
Pain in throat and chest	1	1	0	\$9,398,274	7.0%	1.5%	5.5%
Abdominal and pelvic pain	2	2	0	\$7,811,114	6.5%	3.2%	3.2%
COVID-19 CONFIRMED	3			\$4,179,484			
Dorsalgia	4	3	-1	\$2,934,451	5.9%	6.3%	-0.4%
Syncope and collapse	5	4	-1	\$2,502,049	7.0%	3.2%	3.6%
Nausea and vomiting	6	6	0	\$1,884,282	6.9%	5.1%	1.7%
Headache	7	5	-2	\$1,857,785	1.1%	3.7%	-2.5%
Dizziness and giddiness	8	7	-1	\$1,822,779	8.1%	3.2%	4.7%
Major depressive disorder, single episode	9	15	6	\$1,678,795	16.4%	24.2%	-6.3%
Abnormalities of heart beat	10	12	2	\$1,449,586	8.3%	4.2%	3.9%

Open Enrollment Updates

Completed Open Enrollment Plan Changes

	Membership Change
Medical	
Waived	-332
Expanded Access	410
Standard Access	-112
Primary Care Access	-25
State Preferred	-2
Out of Area	12
Quality First Select Access	-17

	Membership Change
Dental	
Waived	-322
Judge's Dental	-1
Basic	127
DHMO	-343
Enhanced	539
Total Care DHMO	0



Procurements

Pharmacy Benefit Manager Procurement

- Target release date:
 - August 2023
- Goals:
 - Retain transparent components of existing contract
 - Pass through pricing
 - Point of service rebates
 - Acquisitions costs
 - 100% of manufacturer revenue pass through
 - In-state hospital specialty pharmacy direct contracting
 - Focus on formulary development that prioritizes highest value prescriptions rather than largest rebate/AWP discount
 - Data sharing with provider groups
 - Ensuring consistent high quality customer service and account management
 - Require dispensing of abortion drugs where legal
 - Investigate options for better participation in maintenance drug network by independent pharmacies

Procurements

Auditing Services

- Target release date:
 - July 2023
- Goals:
 - To get best in class auditing services for the medical, dental and pharmacy plan
 - Review opportunities and value of pre-adjudication auditing
 - Review opportunities for a dependent audit
 - Review opportunities for invoice and fee auditing
 - Review opportunities to audit MAPD and review compliance with CMS regulations including PA/SNF
 - Quantum audit and review PA process

Quantum Implementation



July 1st

- Quantum continues to work with Anthem behind the scenes to ensure simplified member experience
- New Anthem medical ID cards mailed from Anthem to all plan members with the updated Quantum member and Provider contact information, plus the Care Compass URL.
- Quantum's provider look-up tool, called Care Finder, launches in the member portal
 - Includes a simplified member search experience with high quality, low-cost provider options prioritized
 - For example, plan-specific, tiered (\$0 copay) and Provider of Distinction providers populate first by zip code choice
- Temporary Site of Service tool available near Care Finder tool for lab search
- Quantum begins intake of ER copay and Site of Service (lab only) waivers
 - Updated forms ready to post 7/1; agencies will be reminded to use Care Compass Forms page for health care benefit forms
- Quantum begins to process prior authorizations 100%
- Quantum begins Provider of Distinction incentive check process with Signify Health
- Quantum's Care Coordinators educated on Virta Health (diabetes) and Flyte (obesity) management programs (launching 7/1)
- Anthem continues to manage Behavioral Health programs through Carelon
- Quantum test-run provider call intake process.

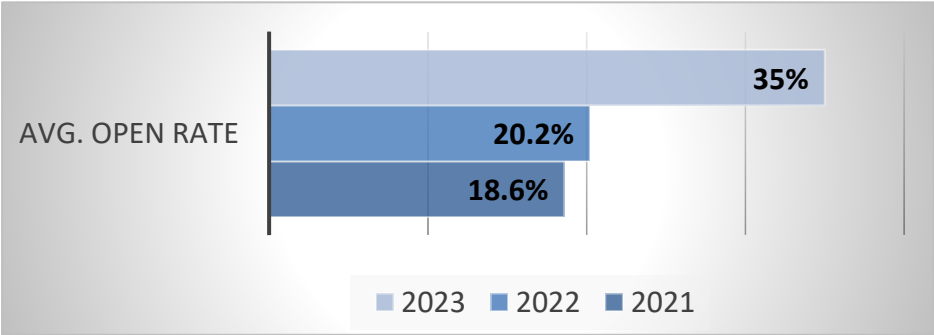
August 1st

- Provider intake calls transition to Quantum 100%

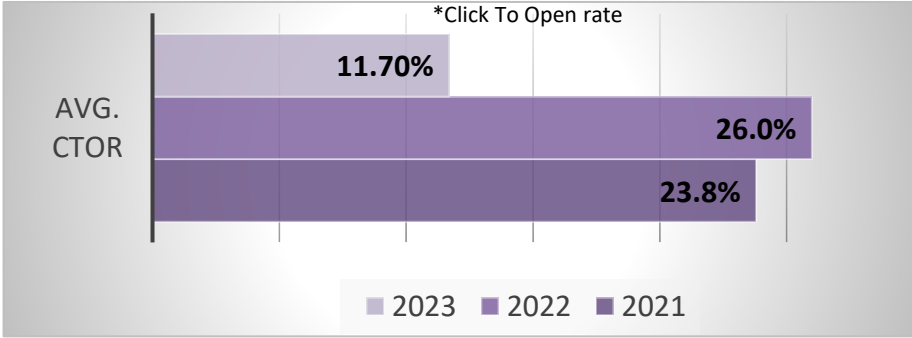
September 1st

- Site of Service search incorporated into the Care Finder tool

Email Communications



Average Open rate for healthcare services: 23.7%



Average CTOR for healthcare service: 13.4%

Email	1	2	3	4	5	6	7
2023	OE Coming (April); (dup.)	Dental Plan Options (dup.)	Benefit FAQs (dup.)	Medical Plan Options (dup.)	OE closing soon (dup.)	*	*
2022	OE Begins (dup.)	Decision-Making Tools	OE Live Events (dup.)	Dental Age 26 (dup.)	Quality First Select Access	OE Final Week (dup.)	
2021	OE Begins	Total Care DHMO	BC Prime Plus POS	Virtual Q & A's	Health Navigator	OE Final Week	OE Final Steps

OPEN ENROLLMENT
IS MAY 1 - MAY 26, 2023

OPEN ENROLLMENT
IS MAY 1 - MAY 26, 2023

What's new with your *dental plan?*

OPEN ENROLLMENT IS MAY 1 - MAY 26, 2023

What you need to know
THIS OPEN ENROLLMENT

OPEN ENROLLMENT IS MAY 1 - MAY 26, 2023

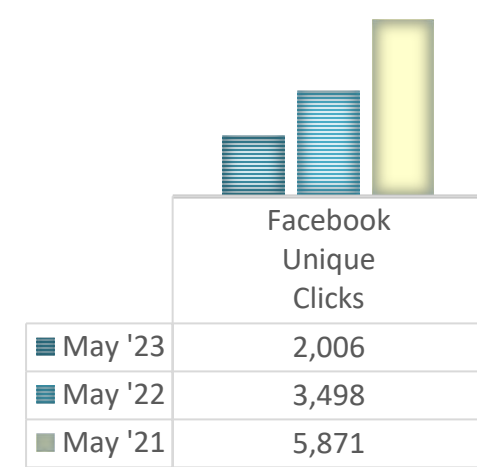
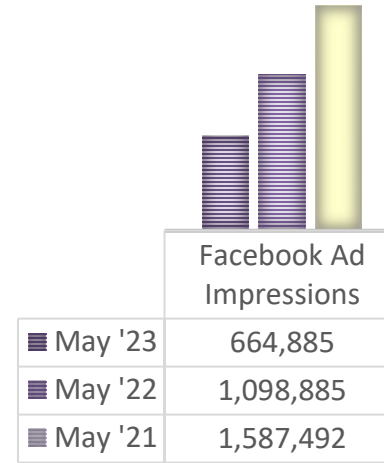
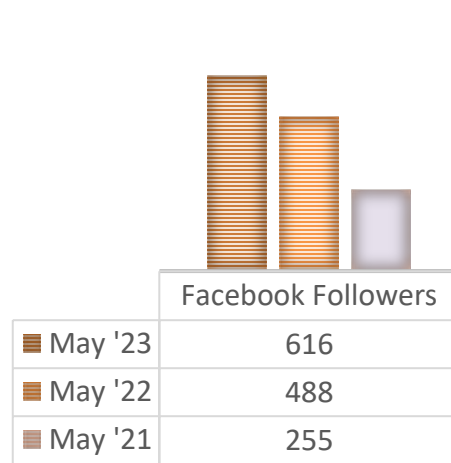
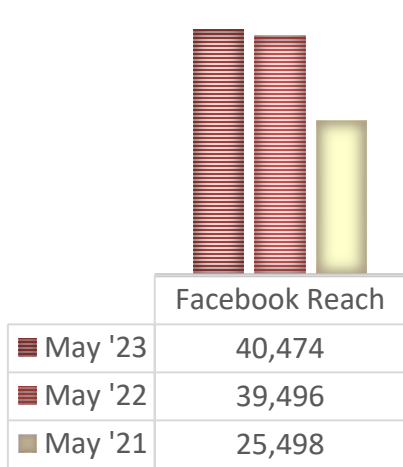
LEARN ABOUT YOUR **Medical Plan**

OPEN ENROLLMENT IS ALMOST OVER

* Nine emails were sent in May (DPP, Virta, Upswing webinar, HEP webinars; 5 for open enrollment)



Facebook Posts and Ads



Posts and Ads in the Month of May:

Healthcare Benefit Events/Resources: Open Enrollment all-user emails, Live Event dates, Care Compass benefit enrollment page

Point Solution Awareness Campaigns: Orthopedic (Upswing), Diabetes (Care Compass webpage contains DPP program and Virta Health information)

Special Event Ads: HEP Wellbeing seminars, Upswing Health orthopedic webinar

Facebook reach is the number of unique people who see our content. It's a measurement of our brand's effective audience. Not every follower will see every single post.

Facebook followers are people who have opted-in to "follow" our page, meaning that they will receive our updates in their timeline. The most common way to get followers is when people 'like' our page.

Facebook impressions are defined as the number of times our ad was viewed on a user's Facebook timeline. This is an important metric to track because it tells if our ads are compelling.

Unique clicks are the total number of subscribers that have clicked on any link in a campaign. It does not count how many times each subscriber has clicked on a link. Even if a subscriber clicks on the link twice, it will be counted only once.

Live Event Participation



Live Event	2023 Attendance	2022 Attendance	2021 Attendance
HEP / CVS Spotlight	Sept/Oct 2023	746	735*
Cigna Spotlight	Sept/Oct 2023	1,412	996
Anthem Spotlight	Sept/Oct 2023	1,232	1,135
Total Spotlight Events	n/a	3,390	2,866
Total Q&A Session Participation	892	1,283	857
Total benefit questions	929	1,250	791
Total Participation	n/a	4,673	3,723
Total Number of Q&A Events	5	6	8
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	4 Actives 1 Retirees	4 Actives 2 Retirees	6 Actives 2 Retirees

*2021 HEP did not participate in spotlights since HEP was not being tracked due to the pandemic.

Note: July report will include Care Compass website/page and decision tool usage during Open Enrollment

Next Steps



- **Employee Survey**
 - Benefits navigation, marketing, need
 - All employees
- **Focus Groups**
 - Wellness platform (trackers, interaction)
 - All Employees



Proposed Reporting Schedule

July/August 2023: Member Wellness (Behavioral Health transition to Carelon)

- Change to Anthem contracting with Carelon
- Utilization and expenditures
- Quality discussion on behavioral health in CT Quality Council

October: Health Care Reform (Primary Care Initiative, Value Based Contracting)

- Report which groups are in
- High level reporting (contingent on availability of data and reporting)
- High level overview of contract terms, responsibilities of OSC/Provider Groups/Anthem
- Quality and cost components
- Provider feedback on initiative

January 2024: Medical (Upswing)

- Report on utilization
- Behavior change
- Cost savings
- Member feedback/testimonials

April 2024: Pharmacy (Prudent Rx)

- Utilization
- Cost savings
- Member feedback



Questions and Comments



Adjourn