



# Health Care Innovation for RIBGH Membership

September 19, 2008

## Rhode Island Health Delivery System

- Quality Technology Investment Advisory Committee – market input for funding decisions
- Lighthouse MD
  - Electronic Medical Record (EMR) Care Tracker: 40% of all physicians in marketplace
  - Affordable alternative to state health information exchange initiative
- Provider Reimbursement Pay for Performance Strategy
  - PCMH
  - Practice Rewards
  - HIT

What if you could...

***Improve health  
outcomes...***

***Engage your  
employees and...***

***Save money***



## ***Address two major drivers of outcomes and rising costs...***

- Member behavior
- Variation in care



***...and use data to drive action***

## ***Leverage innovative programs and resources to engage consumers***

- Online health information and decision tools
- Health Coaching programs
- Customized Wellness Programs
- Consumer Directed Health (CDH) Leadership
- Compliance Engagement

# Get Fit RI Rewards for Wellness Program



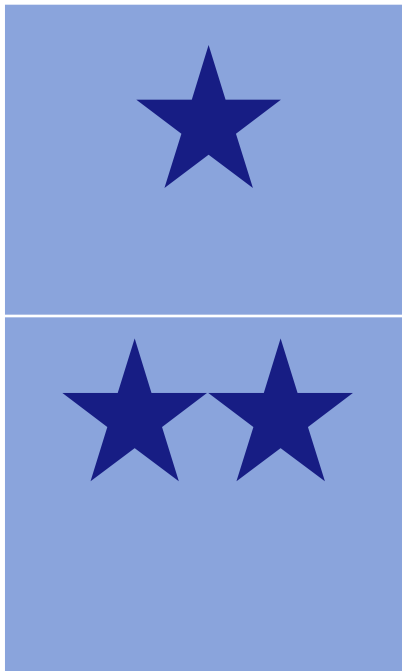
Targets	Health Activity
Smoking Cessation	<b>Certify Non-Smoking Status OR Complete Smoking Cessation Program</b>
Physical Activity	<b>Complete 5-Week UHC On-line Weight Management, Nutrition or Exercise Program</b>
Body Weight	<b>Participate in worksite BMI or Body Fat Screening</b>
Stress	<b>Complete 5-Week UHC On-line Stress Management Program OR Complete 3-session, on-site Stress Management Program</b>
Preventive Care	<b>Participate in worksite Blood Pressure screening;</b>  <b>Obtain a Preventive Care Screening, including annual physical, basic metabolic panel, pap, mammogram, Pre-natal obstetrical exam, or colonoscopy</b>  <b>Complete the UHC on-line Health Assessment</b>

# How do you address variations in care?

## *UnitedHealth Premium® designation program*

Evaluates physicians' quality/performance against nationally-accepted standards

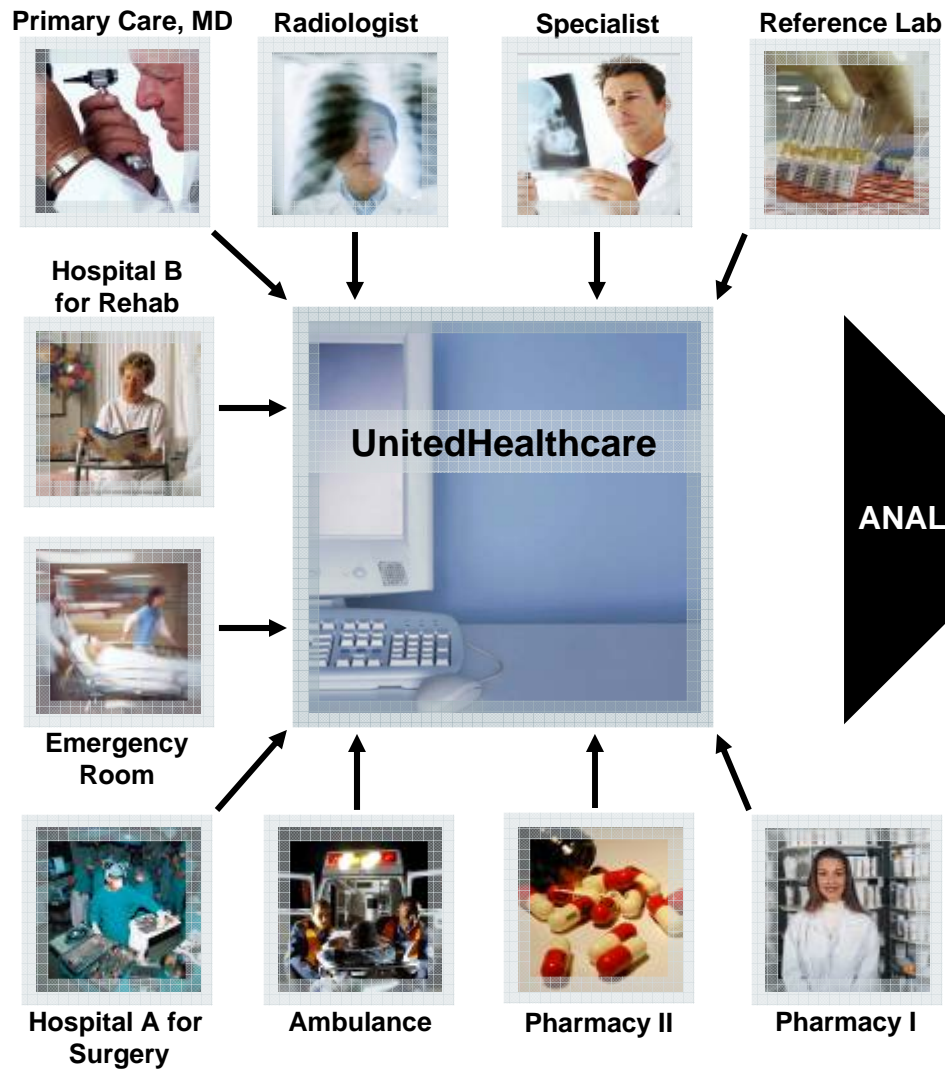
### Our star rating system for doctors and facilities:



**Quality:** meet quality standards based on evidence based care criteria and expert advice

**Quality & Cost Efficiency:** meet quality and efficiency criteria. Cost measurement factors in additional costs for repeated procedures or procedures with complications

# Measuring Physician Quality and Efficiency



## Step 1: Constructing The Episode of Care

### Episode Example

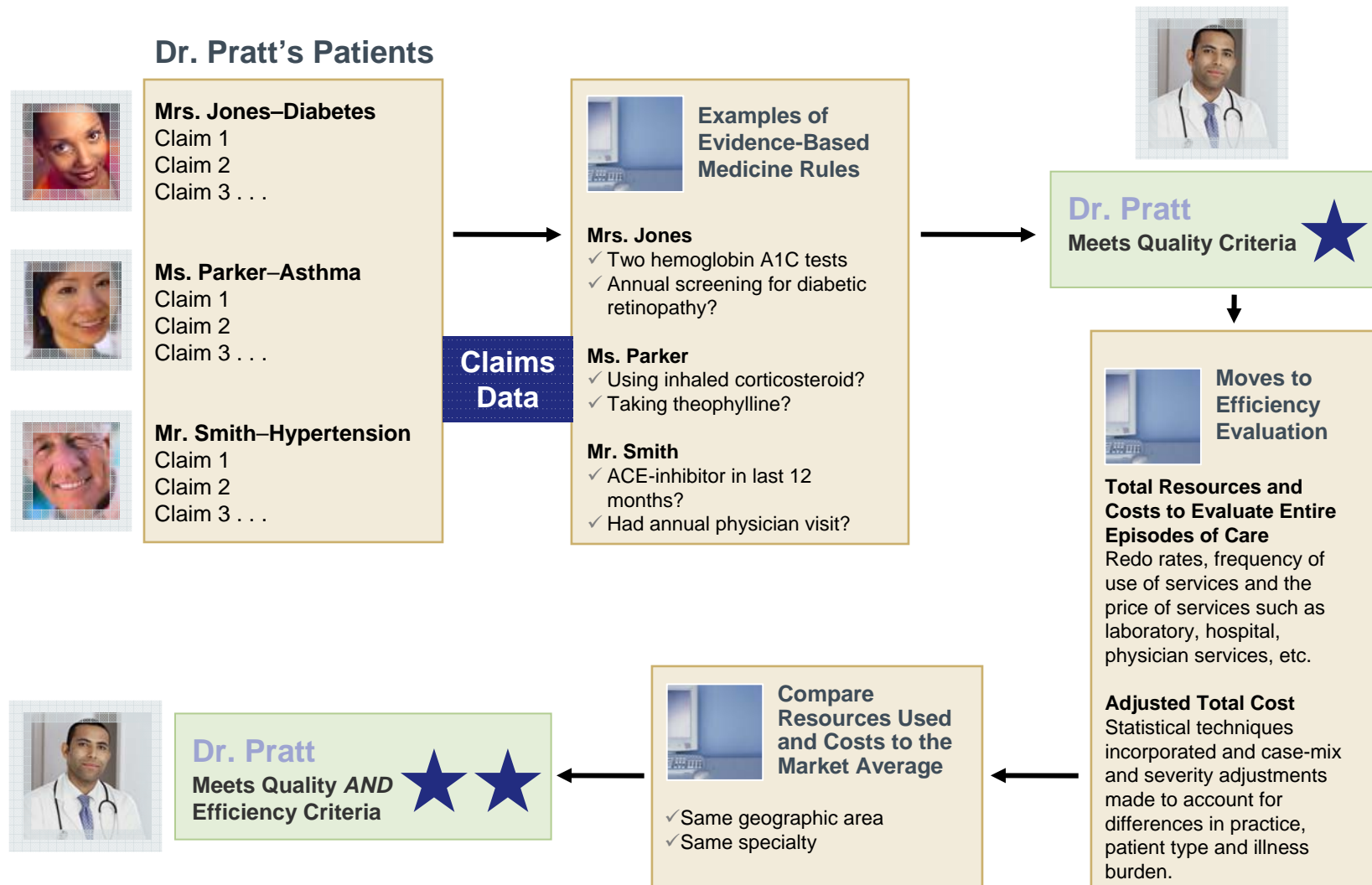
ETG 29: Type 2 Diabetes,  
with comorbidity  
(other illnesses)

Now we can see all services  
across all providers; when  
services were delivered.

Claims data sets have been  
shown to be reliable and  
valid ways of measuring the  
dimensions of quality and  
efficiency in our program

# Measuring Physician Quality and Efficiency

## Step 2: Evaluating Care Delivery



# The Value of Quality, Efficiency & Cost Information

## Lower Costs and Higher Quality Compared to Market Average



### Physicians

Physicians who meet quality and efficiency criteria are projected to have costs that are 10% to 23% below market average

## Significant Results!

### 21 Physician Specialties & 5 Specialty Centers

#### Lower Complications

Non-designated CV surgeons have 70% higher complication rates than designated surgeons

#### Fewer Re-do's

Non-designated CV surgeons have double the re-do rates of designated surgeons



### Hospitals

Hospitals with the highest quality ranking and lowest costs are projected to have hospital costs that are 30% below market average

**Saves average employer up to 3% of total annual medical spend**

SOURCE: UHC claims analysis, November 2005

# UHPD Base Tiered Plan Designs

\*PCP's include – Family Practice, Internal Med., OB-GYN & Pediatrics

## High Level Plan Designs

	Current Plan	UHPD Tiered Base Plans						
	EPO Plan	FI & ASO	FI & ASO	FI & ASO	FI & ASO	FI & ASO	FI & ASO	ASO ONLY
Product Type	2001 COC EPO Plan	2007 SPD	2007 SPD	2007 SPD	2007 SPD	2007 SPD	2007 SPD	2007 SPD
Product Standards	Traditional with deductible	Traditional	Traditional with deductible	Traditional with deductible	Traditional with deductible	Traditional with deductible	Traditional	Traditional
INN Deduct	\$200	N/A	\$500	\$1,000	\$1,000	\$2,000	N/A	N/A
Coins	90%	100%	80%	80%	100%	100%	100%	100%
OOP	\$1,000	N/A	\$2,500	\$3,000	\$1,000	\$2,000	N/A	N/A
In –Patient Hospital Premium Cardiac & Total Joint/Spine	90%	100%	80%	80%	100%	100%	100%	\$0
All Other	90%	100%	80%	80%	100%	100%	100%	\$250
PCP* Copay	\$20	\$20	\$25	\$20	\$25	\$25	\$20	\$20
URC and ER Copays	\$35/\$100	\$50/\$100	\$50/\$100	\$50/\$100	\$50/\$100	\$75/\$125	\$50/\$100	\$50/\$100
Non-Premium Specialist OV Professional Fees	\$40 90%	\$40 90%	\$40 70%	\$50 70%	\$40 90%	\$50 90%	\$60 90%	\$60 90%
PCP* & Premium Specialist OV Professional Fees	\$20/\$40	\$20 100%	\$20 80%	\$25 80%	\$20 100%	\$25 100%	\$30 100%	\$30 100%
Pre-Existing Excel	Optional	Optional	Optional	Optional	Optional	Optional	Optional	Optional
OON Benefits	N/A	70%	60%	60%	70%	70%	70%	70%
Illustrative Premium		\$417.41	\$368.22	\$344.77	\$380.92	\$343.84	\$411.89	

## *Simpler process, smarter solutions, better results*

Improves health care and cost efficiency

Helps transform health care system

Drives members to get involved in health care decisions

May lead to healthier employees

*HEALTHIER BOTTOM LINE*



- Available to groups as small as 100 employees
- Wellness Credit - \$25K - \$50K
- Performance Guarantees:
  - Network Discounts
  - Installation
  - Service
- Health Advisor Service Model
- Industry leading reporting capabilities
  - Annual clinical consultation with assigned Medical Director

## RIBGH Group Purchasing Opportunity

**Available**