CONNECTICUT’S
HEALTH
ENHANCEMENT
PROGRAM (HEP)
KEVIN LEMBO
State Comptroller

HOW WE
GOT HERE

• Catalyst:
  » $3.8 billion budget deficit in FY 2011
  » Unions proposed a value-based insurance design to achieve savings and improve the health of their members and their dependents
HEALTH ENHANCEMENT PROGRAM

- Targets preventive care and chronic disease through:
  - Voluntary enrollment for employees
  - Required age appropriate preventive screenings and care
  - Lower co-pays for medication/care associated with five chronic diseases and conditions
  - Chronic disease management education program
- Lowers costs for participating/compliant employees by:
  - Waiving co-pays for preventive care and chronic disease management
  - Reducing monthly premium share ($100 per month)
  - Waiving annual deductible ($350 individual, $1,400 family)

CHRONIC DISEASE MANAGEMENT

- Targets five chronic diseases: Asthma, COPD, diabetes, hypertension, hyperlipidemia
- Lower co-pays for medications used for target chronic conditions

<table>
<thead>
<tr>
<th>HEP Chronic Condition Drugs</th>
<th>Standard Drugs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Generic</td>
<td>$0</td>
</tr>
<tr>
<td>Preferred</td>
<td>$5</td>
</tr>
<tr>
<td>Non-Preferred</td>
<td>$12.50</td>
</tr>
</tbody>
</table>

*All Diabetes drugs have a $0 co-pay

- No co-pays for office visits related to chronic conditions
- Chronic Disease Education Program:
  - Administered by third party vendor with dedicated staff of RNs
  - Participant engagement monitored
    - Compliance with HEP program contingent upon minimum level of engagement
    - Engaged members eligible for $100 annual bonus payment
HEP IMPLEMENTATION

- Program Launch
  - Enrollment Website
  - Enrollment FAQs
  - HR Outreach
  - Compliance Trackers Mailed

- Compliance Monitoring
  - Interactive Website
  - Compliance Status Letters
  - Email Blasts
  - Direct Phone Calls
  - HR/Union Outreach

- Penalty Phase
  - Non-Compliance Letters
  - Ability to Appeal to HCCC
  - Financial Benefits Removed Until Compliance Met

Lessons:
- Deadlines spur action
- Regular and varied communication a must

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HEP COMPLIANCE YEAR TIMELINE

January
- Compliance Year Begins
- Individual Requirement Charts Mailed

September - December
- Monthly Individual Compliance Reports Mailed
- Compliance Year Closes

April-June
- Compliance Review and Appeal Period

April
- Non-Compliance Letters Sent

June
- Health Care Cost Containment Committee Votes to Remove Non-Compliant Members, and Letters Sent

August
- Additional Premiums Deducted from Paychecks of Non-Compliant Members

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HEP IMPACT
OSC/HEALTHCORE

- Compared HEP enrollee outcomes to an in state control group created using propensity score matching using the following factors:
  - Age
  - Comorbidities
  - Gender
  - Benefit design

- Difference in Difference model – program impact determined by observed differences in changes between base year and study year for study vs. control group (2010 base year, 2012 study year)


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HEP IMPACT
OSC/HEALTHCORE

<table>
<thead>
<tr>
<th>Preventive Service</th>
<th>Program Impact</th>
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<tbody>
<tr>
<td>Colorectal Cancer Screensings</td>
<td>▲ 8.9%</td>
</tr>
<tr>
<td>Cervical Cancer Screensings</td>
<td>▲ 2.4%</td>
</tr>
<tr>
<td>Breast Cancer</td>
<td>▲ 8.3%</td>
</tr>
<tr>
<td>Cholesterol Screenings</td>
<td>▲ 10.4%</td>
</tr>
</tbody>
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<table>
<thead>
<tr>
<th>Health Care Utilization</th>
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<tbody>
<tr>
<td>ER Use</td>
</tr>
<tr>
<td>Office Visits</td>
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</tbody>
</table>

**Overall Medical Costs**

Increases in screenings and testing for chronic disease but improved lab numbers were not evident (too early?)


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VBID CENTER
COMPARATIVE ANALYSIS
RESULTS: YEAR ONE

BEHAVIOR CHANGE

CHRONIC DISEASE MEDICATION ADHERENCE*

* CVS Health Prescription Benefit Review FY15
• HEP gets employees to the doctor’s office. Now we must ensure they get efficient and quality care once they get there. To drive future behavior change, we are:
  » promoting new payment arrangements with providers, including Accountable Care Organizations with shared-savings opportunities
  » direct engagement with physicians groups regarding wasteful health care spending
  » and educating employees about appropriate care