



# Health Care Update

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July 10, 2023



- Financials (Rae-Ellen)
- Partnership (Bernie)
- High-level utilization (Josh)
- Quantum Implementation (Quantum)
  - Accolades
  - Portal registration
  - Calls
  - Other assistance
- July 1 launch reminders
  - Intellihealth
  - Care Finder
  - Virta
- Communications (Josh)
- Program Analysis – PrudentRx (Sandra)



## FY 2022-2023 Year End Health Account Balances

Budget Review 6.15.23

<b>Active Employee Healthcare Appropriation</b>	
<i>Projected Appropriation Balance</i>	\$ 26,940,992.38

<b>Active Employee Healthcare FAD Accounts</b>	
<i>Projected Active Health FAD</i>	\$ 12,999,354.56
<i>Projected Active Rx FAD</i>	\$ 20,262,168.81
<i>Combined FAD Balances:</i>	\$ 33,261,523.37

<b>Retired Employee Healthcare Appropriation</b>	
<i>Projected Appropriation Balance</i>	\$ 98,662,022.08

<b>Retired Employee Healthcare OPEB FAD Accounts</b>	
<i>Projected Retiree Health</i>	\$ 201,112,244.20
<i>Projected Retiree Rx</i>	\$ -2,365,412.08
<i>Combined FAD Balances:</i>	\$ 198,746,832.12

## **Partnership 2.0**

- As of 7/1/23 we have 153 groups enrolled totaling just under 24,000 employees and approximately 54,000 members.
- As of 7/1/23 we had 3 new groups join the partnership plan and at the same time, 8 groups left.
- Just a reminder, will be holding a quarterly partnership utilization update for existing groups and those will be held on Monday, July 17<sup>th</sup> and Thursday, July 20<sup>th</sup>

## **Partnership 1.0**

- As of 7/1/23 we still have 5 groups remaining totaling approximately 2,400 employees and just under 3,400 members

# Actives & Non-Medicare Retirees

All Plans

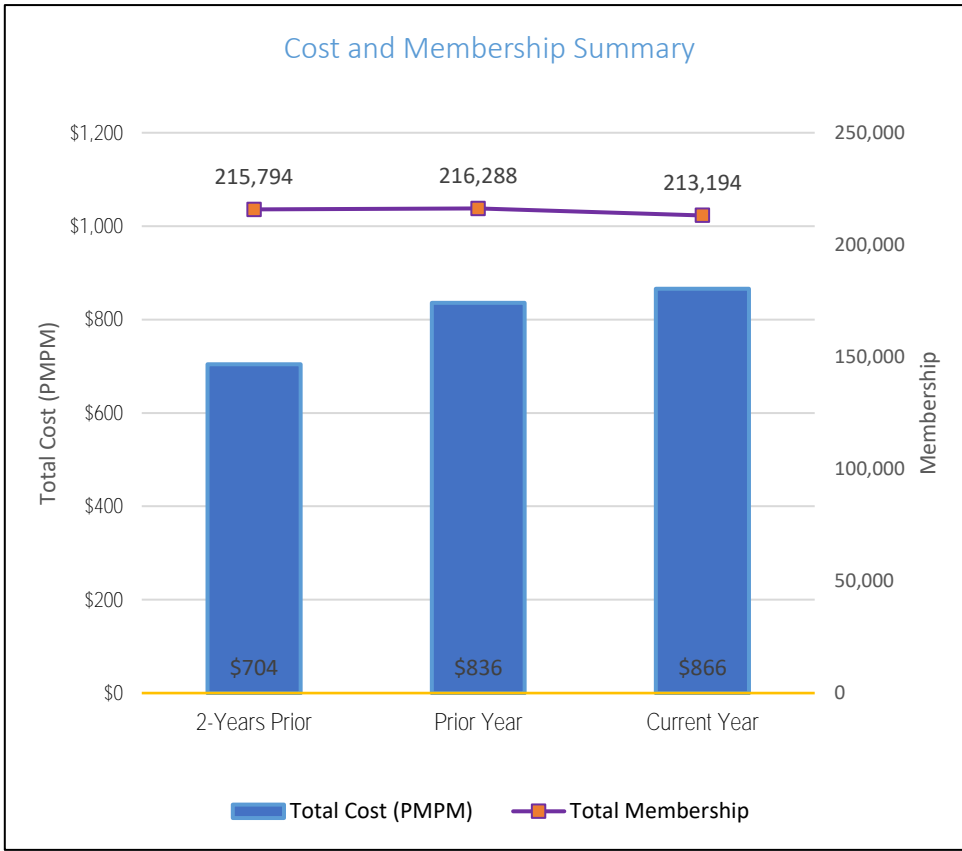
Current Period: Apr 2022 – Mar 2023  
Prior Period: Apr 2021 – Mar 2022

## Claims Summary<sup>1</sup>

	Total Cost (PMPM)	% of Total Cost	Current Trend
Medical	\$705.81	81%	▲ 3.0%
Inpatient Facility	\$134.54	16%	▼ -3.6%
Outpatient Facility	\$280.04	32%	▲ 5.6%
Professional Services	\$269.91	31%	▲ 4.2%
Ancillary	\$21.32	2%	▼ -1.1%
Pharmacy <sup>2</sup>	\$160.36	19%	▲ 6.7%
<b>Total Cost</b>	<b>\$866.17</b>		<b>▲ 3.7%</b>

## Drivers of Trend

Service Category	Current PMPM	Prior PMPM	Change
Pharmacy - Specialty	\$49.21	\$41.25	▲ \$7.96
Outpatient - Surgery	\$84.88	\$78.70	▲ \$6.18
Emergency Room	\$49.14	\$43.28	▲ \$5.86
Outpatient - Lab/Pathology	\$10.86	\$15.20	▼ \$4.33
Professional - Lab/Pathology	\$18.46	\$21.99	▼ \$3.53



### Observations

- PMPM medical costs have increased 3.0% Year-over-Year (“YoY”) and accounted for 81% of total spend.
- PMPM Rx costs have increased 6.7% YoY and accounted for 19% of total spend. The Rx costs does not account for 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 \$7.96 PMPM over last year.

<sup>1</sup> Claims for the current period have been completed using a factor of 0.98  
<sup>2</sup> Pharmacy costs do not reflect PrudentRx savings.



## July 1<sup>st</sup>

- Quantum continues to work with Anthem behind the scenes to ensure a simplified member experience.
- 'Welcome to your new plan year' all-user email - July 18
- Care Coordinator bi-fold mailer to arrive in mailboxes –July 20
- Virta Health diabetes care all-user email -July 12
- Flyte program description on portal and on [carecompass.cy.gov/pharmacy](http://carecompass.cy.gov/pharmacy)

## August 1<sup>st</sup>

- Provider intake calls transition to Quantum 100%
- Quantum take 100% Chronic Health Education (Wellspark closed out cases)
- Member benefits survey to launch with postcard mailer and email announcement

## September 1<sup>st</sup>

- Quantum's provider look-up tool -Care Finder- launch in the member portal
  - Site of Service search incorporated into the Care Finder tool



# New Program Launches

- Virta Health – Diabetes Management and Diabetes Reversal Program
- Intellihealth – Clinical Obesity Management Program
- CVS Razor Metrics – lettering providers with drug switch opportunities (same therapeutic class at least \$25 cost differential)

# Monthly All-User Email Impact



Email Topic	Sent*/Group	Open Rate	CTOR
<b>HEP Wellbeing seminars- Monthly</b>	State (6/6)	17%	5%
	SPP (4/11)	41%	1%
	State personal (6/5)	42%	2%
<b>Upswing Health webinar Monthly: Shoulder pain</b>	State (6/21)	18%	4%
	SPP (6/21)	40%	3%
	State personal (6/21)	39%	1%

Two supplemental email distributed in July to active employees: Liberty Mutual and Norton



**Open Rate** = Unique Opens / Deliveries; **Industry standard = 23.7%;**  
**CTOR** = Unique Clicks / Unique Opens; **Industry Standard = 13.4%**

\*Emails also sent to agency/group benefit contacts, call centers, Judicial and Higher Ed, HCCC representatives

## Arriving in mailboxes soon! Bi-fold –Welcome to Quantum

**QUANTUM HEALTH CARE COORDINATORS ARE HERE TO HELP YOU GET THE MOST FROM YOUR BENEFITS**

Download the MyQHealth app  
Create an account or log in from carecompass.ct.gov

(833) 740-3258  
(Monday-Friday, 8:30 a.m.-10 p.m. ET)

**DOWNLOAD THE APP**

**YOU'LL LOVE HOW WE MAKE YOUR BENEFITS WORK FOR YOU**

Quantum Health is your dedicated team of benefits experts.

Quantum Health Care Coordinators are here to personally assist State of Connecticut health plan members with their benefits. We're your dedicated team of nurses, benefits experts and claims specialists standing by to help with your healthcare needs at no cost to you. We can help you:

- + Get answers to claims, billing and benefits questions
- + Find in-network providers, including Providers of Distinction for eligible procedures or care
- + Verify coverage and get prior approval if needed
- + Navigate your new personal benefits portal
- + Confirm HEP compliance
- + Review your care options
- + Replace ID cards

Sometimes we may call you – but we wouldn't call if it weren't important. We might call if:

- + You could save on your out-of-pocket costs
- + There is a concern with your prescriptions
- + Insurance information is needed
- + You qualify for a coaching program
- + We need to follow up on a procedure or discharge
- + There is a question on your HEP compliance

**“I wanted to commend Jalen for his care and attention to my concerns. He was able to help me access the information about choosing a plan online. He walked through everything very carefully, and helped me pick the primary care physician that met my criteria. He was terrific at answering my questions, kudos and the highest rating to Jalen!”**

- State of CT plan member

carecompass.ct.gov  
(833) 740-3258  
(Monday-Friday, 8:30 a.m.-10 p.m. ET)



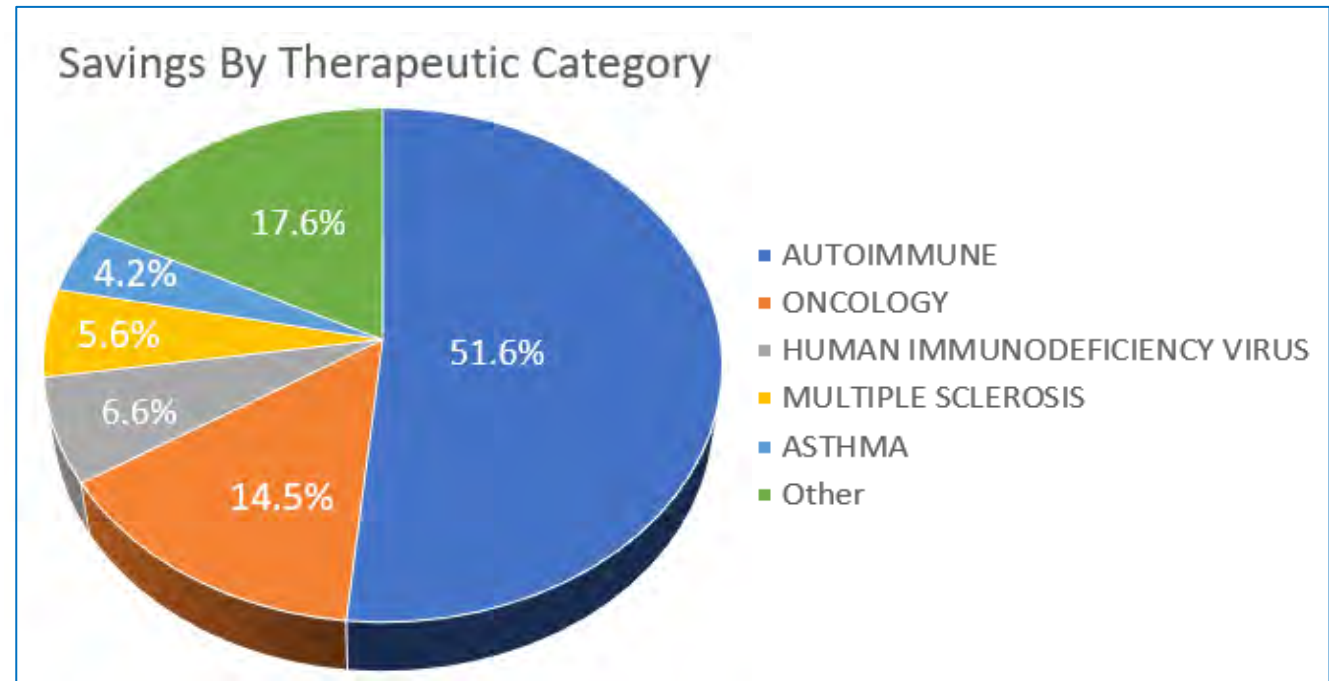
# PrudentRx Update



	Specialty Spend	Baseline Member Cost Share Savings *	PrudentRx Gross Savings Amount	Program Fee	# of Claims/ Scripts	Net Savings
<b>State of CT</b>	\$122,457,802	\$979,654	\$27,408,322	\$6,721,028	28,344	\$20,685,294
<b>Partnership</b>	\$47,201,898	\$377,611	\$10,072,658	\$2,457,825	11,321	\$7,614,833
<b>State of CT &amp; Partnership Plan</b>	<b>\$169,659,700</b>	<b>\$1,357,265</b>	<b>\$37,480,980</b>	<b>\$9,178,853</b>	<b>39,665</b>	<b>\$28,300,127</b>

Source: CVS Caremark, SOCT health plan data,  
Based on Invoice dates 7/2022 – 5/2023

PrudentRx Utilizers By Month			
CY 2023	SOCT	Partnership	Total
Jan	2,309	899	3,208
Feb	2,268	863	3,131
Mar	2,425	929	3,354
Apr	2,323	899	3,222
May	2,465	963	3,428



\* Obtained from the base line member cost share credit provided to the client and is equal to the average member's copayment responsibility prior to the PrudentRx Solution



## Report Definitions

**Total Specialty Spend:** Total overall spend on specialty prescriptions within the PrudentRx Solution.

**Manufacturer Bill Amount (MFG Bill Amount):** Total coinsurance amount adjudicated with CVS Caremark, and is the amount billed to the Manufacturer.

**COB amount:** The residual copay required by the manufacturer program, or the remaining drug cost after program benefits are exhausted or unavailable. This amount is billed back to the plan.

**Baseline Member Cost Share Savings:** The average member's co-payment responsibility (in percentage) prior to the PrudentRx Solution and is provided as a credit.

**PrudentRx Gross Savings Amount:** The gross savings generated by the PrudentRx Solution.

**Program Fee:** Program shared savings fee.

**Net Savings:** PrudentRx gross savings amount minus the program fee.

**# of Claims:** The number of primary claims adjudicated as part of the PrudentRx Solution.

**Utilizers:** Number of unique utilizers by therapeutic category.

**Avg. Savings Per Utilizer:** Average savings to the plan per unique utilizer.



# Questions and Comments



**Adjourn**