

WV Health Innovation Collaborative
Lower Cost Work Group
May 21, 2014
Meeting Notes

Participating In-Person: Jeremiah Samples, Jeff Wiseman, Naomi Bays, Carrie Brainard, Perry Brant, Dave Campbell, Ted Cheatham, Chris Clark, Leslie Cottrell; John Earles, Fred Earley, Lynda Ferrell, Sherri Ferrell, Joylynn Fix, Dan Foster, Bethany Hall, Debrin Jenkins, John Law, Dan Mace, Larry Malone, Amanda McCarty, John Moore, Renate Pore, Phil Shimer, Dana Singer, Nancy Sullivan, Nancy Tyler, Kristi Walker, Debbie Waller, Bob Whitler, Sarah Woodrum

Participating by Phone: Sarah Chouinard, Jennifer Gibson, Carol Haugen, Bill MacLean, Ellen Potter

Jeremiah welcomed everyone to the meeting and introductions were made.

HIC Activities – Jeremiah Samples

- Initiative Inventory – still requesting information on the Inventory of Projects. There are 100+ projects submitted. Need to have the capacity to filter. Still working on it. You can view the projects at: <https://www.emailmeform.com/builder/reports/c590sL8ab2qf>
- Better Health Work Group – met earlier today. A presentation from the WV DHHR Bureau for Public Health's State Public Health System Assessment was shared with the workgroup. The workgroup is looking at programs and other initiatives that are available throughout the state. We are in the process of revamping the WV Health Innovation Collaborative website. We are going to work with WV Interactive to help with this project.
- Better Care Work Group – Conference call/webinar set up for May 23 at 3:30 p.m. Karen M. Fitzpatrick, Medical Director, Performance Improvement; Medical Director, Ambulatory Informatics; Associate Professor, Family Medicine WV SOM and Dana E. King MD, MS Professor and Chair, Family Medicine WV SOM will present information about Patient Centered Medical Home projects.
- WV Health Innovation Collaborative Meeting is scheduled for June 12 at 2:00 p.m. The Secretary will be involved in this meeting. Workgroups will be updating the whole collaborative on their efforts to date and there will be other presentations. An agenda will be sent to everyone prior to the meeting.

Project Updates - Jeff Wiseman

- Coverage to Care – CMS launched the Coverage to Care initiative to help consumers know what it means to have health insurance; how to find a provider; when and where to get health services; why prevention and partnering with a provider is important; and Health Literacy. The Insurance Commission has posters available and pamphlets; should be available in a couple of weeks. IPA's will be distributing to DHHR offices. Jeff shared with the work group the workplan for the Coverage to Care Initiative.

- A sub-group made up of members of the Lower Cost Work Group has been set up to assist with this initiative and to also look at templates for other projects the work group can work on.
- A PSA has been filmed with the Secretary as the “star” and should be available by the end of May. The PSA will be distributed to county offices and will work with news channels to air on cable. You can also view on YouTube, Facebook, Twitter, etc.
- Suggestion: hospitals could play over their systems. Share any ideas you have for distribution.

Presentation – PEIA Budget and Budget Drivers – Ted Cheatham

- Mr. Cheatham presented an overview of PEIA.
- PEIA currently serves approximately 147K, approximately 26k non-state folks; 230k total served.
- ACA has taken away lifetime max – claims over \$50k have not increased tremendously.
- There has been a 4,300 increase in dependents up to age 26.
- PEIA has not had any general revenue increase.
- Improve Your Score: program worked better when doing premium discounts. Going to eliminate this program. Move to physician’s office where there would be no change for the program. A 3.5 million dollar project and by moving to wellness, will cost about the same.
- Tobacco Program: Non-tobacco user - a \$600.00 per year per person savings. This program is working.
- Weight Management: One-on-One program didn’t work. Lowered BMI to 25 so more people can participate in the program. Cost about \$1200 per person per year. Program has shown a reduction in medications for participants. Going to keep this program.
- Face-to-Face: Third tier drugs no longer available. Cost approximately \$300k to administer. Not a cost effective program.
- Living Will – Envisioned saving \$10M on this program, but didn’t save a penny.
- Comprehensive Care: Saved about \$11 or \$12M on this program. The physical therapy, bundled payment pilot seems to be working but there is no follow-up data available at this time.
- PEIA is planning to bring on the health care bluebook. A full demo should be available in a week or two.
- Wellness Portal: Will have a weight and exercise tracker. You can pick a doctor or PA. Consumers will need to keep up with their blood work, etc. If consumers don’t follow all the requirements, they would go to Plan F – consumers would share more of the cost.
Healthcarecostcompare - leap frog measures local providers

Mr. Samples thanked Mr. Cheatham for his very informative presentation. A question and answer period followed.

The next meeting of the Lower Cost Work Group is June 18, 2014, 1:00 – 3:00 p.m. at One Davis Square, Suite 100 East, Conference Room 134.