

# Legislative Finance Committee

June 10, 2016  
State Capitol - Room 102  
Helena, MT

Health Risk Assessment Data  
Montana University System Group Benefit Plan

**MUS\_EB**  
Montana University System  
Employee Benefits

## MUS GROUP BENEFIT PLAN OVERVIEW - RECAP

### ENROLLMENT in FY2015

▪ Active Employees/COBRA	7,112
▪ Retirees <65	295
▪ Retirees 65+ (self-insured)	1,002
▪ Retirees 65+ (fully insured)	860
▪ Dependents	<u>8,979</u>
<b>TOTAL COVERED LIVES</b>	<b>18,248</b>

## **MUS GROUP BENEFIT PLAN – Health Risk Assessment Data**

- 1. Why use health risk assessment data?**
- 2. How MUS gathers health risk data.**
- 3. Applying strategies in managing the MUS Plan.**
- 4. What are the outcomes?**

# MUS GROUP BENEFIT PLAN – Health Risk Assessment Data

## 1. WHY USE HEALTH RISK ASSESSMENT DATA?

- Health Risk Assessments use clinical and financial data to -
  - (1) Forecast the likelihood of using health care services (group and individual)
  - (2) Project the severity of the services (i.e. disease burden)
  - (3) Quantify and estimate healthcare costs (setting budgets and rates)
  
- Benefits Plan Risk Managers use the information to -
  - (1) Develop strategies for managing risk and to target interventions
  - (2) Design employer plan benefits
  - (3) Set budgets, manage finances, and determine rates for benefits programs



# MUS GROUP BENEFIT PLAN – Health Risk Assessment Data

## 2. HOW MUS GATHERS DATA AND WHAT WE DO WITH IT.

- Pharmacy – URx..... Monthly Claims/Plan Exceptions
- Medical/Vision Vendors
  - ✓ Allegiance (24%) – self-insured TPA..... Monthly Claims/Util Rvw/Prior Auth
  - ✓ BCBSMT (72%) – self-insured TPA..... Monthly Claims/Util Rvw/Prior Auth
  - ✓ Pacific Source (4%) – self-insured TPA..... Monthly Claims/Util Rvw/Prior Auth
- Dental - Delta Dental..... Monthly Claims
- Care Management
  - ✓ It Starts With Me – Health Screening..... HRA Questionnaire/Clinical Data
  - ✓ Take Control – Disease Management..... Clinical Data/Monthly Claims
  - ✓ Limeade – Wellness..... Wellness Data

# MUS GROUP BENEFIT PLAN – Health Risk Assessment Data

## 3. APPLYING STRATEGIES IN MANAGING THE MUS PLAN.

PLAN/GROUP LEVEL	TARGETED DATA SOURCE
Financial and Actuarial Forecasting	Monthly Claims and Financial Data
Risk Management and Benefit Design	Health Screening/Pharmacy/Medical Data
Rating	Monthly Claims and Financial Data
INDIVIDUAL PLAN MEMBER LEVEL	
 Low Risk (1 – Wellness)	Health Screening/Pharmacy/Medical Data
Medium Risk (2 – Disease Management)	<u>Health Screening/Pharmacy/Medical Data</u>
 High Risk (3 – Case Management)	<u>Health Screening/Pharmacy/Medical Data</u>

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912 = 5% 'ers'  
4,562 = \$0 'ers'  
12,774 = Everyone Else  
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**18,248 TOTAL COVERED LIVES**

# MUS GROUP BENEFIT PLAN – Health Risk Assessment Data

912



## High Risk – Intensive Case Management Intervention

Goal – Optimize health outcomes for members and cost containment

Top 5 Risk Categories (70%/912 of total plan spent on 5% of people) – Oncology, Cardiac, NeoNates, Renal Failure, Orthopedic

## Medium Risk – Disease Management Programs

Goal - Reduce severity and prevent progression of disease

Take Control – Diabetes, Cardiac, Metabolic Syndrome (2 Year Program: 1 Year Education and Health Coaching/ 1 Year “Graduation”)

WellBaby – Intervenes with Moms in their first trimester of pregnancy

12,774

4,562



## Low Risk – Wellness Program

Goal – Maintain low risk health status as population ages

One year program (requires engagement during all 12 months to achieve incentives) with link to FitBits for activity tracking, nutrition programming, life coaching based on targeted needs identified by individual (25%/4,562 of people in a year will spend \$0 in claims)



# MUS GROUP BENEFIT PLAN OVERVIEW

## 4. WHAT ARE THE OUTCOMES?

### CARE MANAGEMENT and WELLNESS RESULTS

- **Wellness**
  - ✓ 53% of population voluntarily participates in screening and wellness programs
  - ✓ Our 'older' and 'sicker' members (on a risk adjusted basis) take part in our screening and wellness programs
- **Care Management – FY2014 vs FY2015 tracking of screening outcomes**
  - ✓ BMI – 6.3% of participants moved from obese/overweight to optimal
  - ✓ Cholesterol – 20.5% of participants moved from high/borderline to optimal
  - ✓ Blood Pressure – 41%/55% of participants moved from hypertensive to optimal
  - ✓ Blood Glucose – 30.5% of participants moved from pre-/diabetic to optimal
- **Monitor, Stop, and Negotiate Claims in excess of \$75,000**

# QUESTIONS?

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