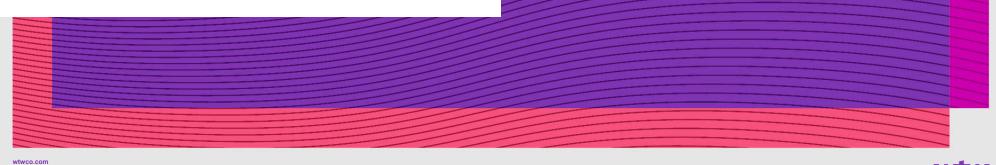
The State of Delaware

GHIP Strategic Framework

State Employee Benefits Committee

February 20, 2023



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Updates following the January 2023 SEBC meeting

- SBO has reached out to its contact from Johns Hopkins University for an update on prior work related to hospital costs and transparency
 - The principal researcher from that team is no longer with Johns Hopkins University
 - There are now other sources of publicly available information that provide similar information as the earlier work being through Johns Hopkins University and funded by the Arnold Foundation
 - Further discussions with the SEBC about these other sources of information have been incorporated into the updated timeline for suggested next steps on the following slide
- SBO/WTW initial discussions with Highmark and Aetna in preparation for vendors' April 2023 presentations to SEBC
- SBO/WTW met with Cristine Vogel of the DOI's Office of Value Based Health Care Delivery
- SBO/WTW had initial conversation with Nemours prompted by the health system's interest in exploring partnership opportunities with the GHIP

GHIP Strategic Framework

Updated timeline for suggested next steps

Month	Suggested next steps	*Studies and resources include
February 2023	 Review updates from January 2023 meeting Discuss current GHIP benefits for diabetes care and prevention 	Georgetown University 2022 survey of state
March 2023	 Discuss selected results from deep dive discussions with the Financial Subcommittee related to chronic condition prevalence and cost and top cost drivers for the GHIP and participants Introductory discussion on other studies* of health care cost, price transparency, provider quality and patient safety that can inform the work of the SEBC Following this meeting, pre-read materials will be provided to the SEBC for the April 2023 meeting that provides additional background and some key insights from these materials 	 employee health plan cost containment initiatives NASHP Hospital Cost Tool RAND Hospital Price Transparency Study Primary Care Collaborative's¹ State Primary Care Investment Hub Fall 2022 Leapfrog Safety Grades Report 1 A third party, not-for-profit organization. https://www.pcpcc.org/2 Discussed with the SEBC in November and December 2022.
April 2023	 Aetna and Highmark to present an update on their efforts to establish pay-for-value contracts with Delaware providers and an update on the outcomes achieved by their care management programs Following this meeting, additional pre-read materials will be provided to the SEBC for the May 2023 meeting on background and insights from other studies* of health care cost, price transparency, provider quality and patient safety 	
May 2023	 OVBHCD presentation on perspectives related to Delaware's progress with adoption of alternative payment models and insights from other public sector experience Debrief on medical carrier presentations and insights from pre-read materials, including how these can inform updates to GHIP Strategic Framework goals 	
June 2023	 Review concepts and case studies of how other employers have been successful in driving engagement among plan participants Discuss updates to GHIP Strategic Framework goals based on this information 	
July 2023 and later	 Continue discussing updates to GHIP Strategic Framework strategies and tactics that support updated goals, including opportunities to incorporate longer term planning opportunities for FY25 and later² 	

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Current GHIP benefits for diabetes care and prevention

For participants of the State's:	Resources include:
Medical plans	 Diabetic education and nutritional counseling (member cost sharing applies)
	 Discounts on gym memberships, weight loss programs, etc.
	 Online education and wellness programming via medical TPA's website¹
	 24/7 nurse line¹
	 Broad care management program¹
	Diabetes care management program:
	 Livongo (for active employees and non-Medicare pensioners in Highmark PPO and First State Basic plans)
	 Transform Diabetes Care (for active employees and non-Medicare pensioners in Aetna HMO and CDH Gold plans plus all Medicare pensioners)
	AbleTo behavioral health treatment to members identified with certain medical conditions (including diabetes) (Aetna only)
	 Diabetes prevention programs online (Livongo, Solera) and in-person (YMCA of Delaware)¹
	 Savings on diabetic medications and supplies available through CVS Health
	 Access to the ComPsych employee assistance program²
Vision plan	Additional coverage of certain exams and procedures for members with Type 1 or Type 2 diabetes with diabetic retinopathy
Other resources	 Additional gym discounts at Delaware-based fitness centers
(not dependent upon plan participation)	• Access to information on diabetes-related health and wellness classes and events at Delaware-based health care facilities

1 Active employees and non-Medicare pensioners only.

2 Currently available (until no more than 30 days following the end of the COVID-19 national public health emergency) to all State of Delaware employees including temporary, casual seasonal and benefit eligible employees/non-Medicare pensioners who are not currently enrolled in a State of Delaware Highmark Delaware or Aetna health plan.

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Diabetic Medications & Supplies Savings Program

For non-Medicare plan participants

assessed

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	Coverage Details	
Diabetic Supplies	 Diabetic supplies such as lancets, syringes/needles, and test strips provided, either at a participating retail pharmacy, a 90-day participating retail pharmacy, or CVS Caremark Home Delivery may be obtained under the prescription plan at <u>no cost</u> to the member. Supplies do not need to be filled at the same time as diabetic medications. 	
Diabetic Medications	 Multiple diabetic medications may be obtained for <u>one copay</u> when filled at the same time at a 90-day participating retail pharmacy or the CVS Caremark Pharmacy (mail order*). To ensure the lowest copayment for covered diabetic medications, make sure to ask the pharmacy to process all diabetic medications <u>on the same day</u> and <u>submit the lowest cost generic</u> medication first. IMPORTANT: Diabetic medications are considered maintenance medications and must be filled in accordance with the <u>Maintenance Medication Program</u>. These medications must be filled as 90-day prescriptions to avoid a penalty copay after receiving three 30-day prescriptions. *Medications filled through CVS Caremark Pharmacy (mail order) will be processed at a 90-day copay, even if requested at less than a 90-day supply. 	
 When multiple diabetic medications are filled and purchased on the same day, the member will pay one copay 		

- If the member's doctor prescribes another diabetic medication that is filled on a different day within the same month, another copay will be
- Members need to work with their physicians and pharmacists to coordinate diabetic prescriptions to be processed on the same day

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