The State of Delaware

Health Care Stakeholder Request For Information (RFI)

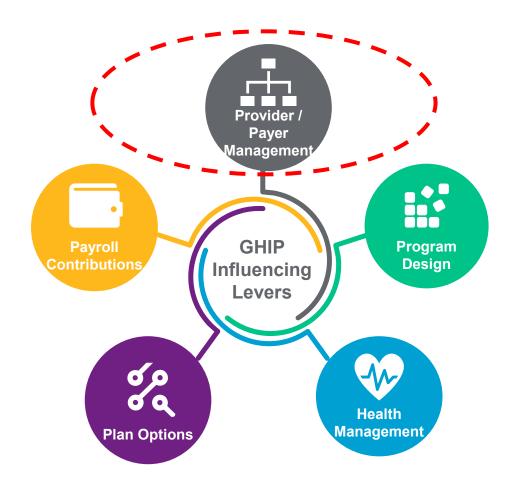
September 10, 2020



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Health care stakeholders play a significant role in influencing GHIP spend and participant health outcomes



- GHIP strategic framework has several goals related to reducing total cost of care
- One of the primary areas of influence on total cost of care is the quality and cost efficiency of medical providers in the health plans' networks
- SEBC has previously engaged Highmark and Aetna in discussions about these vendors' future plans to expand their value-based contracts with network providers
- Opportunity to engage representatives from the Delaware provider community and other health care stakeholders to understand perspectives on opportunities to reduce GHIP total cost of care

Purpose of Health Care Stakeholder RFI

The SEBC has authorized the SBO to issue a health care stakeholder RFI in an effort to gather best practices in cooperative approaches and innovative solutions to reducing the total cost of care for the GHIP. This RFI will identify strategies that have the potential to support the following goals of the GHIP Strategic Framework:

GHIP Strategic Framework Goals

Using the Alternative Payment Model (APM) Framework and FY2021 medical spend as a baseline¹, increase GHIP spend through advanced APMs² to be at least the following by the end of FY2023 (as % of total spend):

- Category 3: 40%
- Category 4: 10%

Reduction of GHIP diabetic cost per-member-permonth (PMPM) by 8% by the end of FY2023^{3,} using FY2021 spend as a baseline

1 Estimated FY21 baseline medical spend in advanced APMs: Category 3 – 17%, Category 4 – 0%. Based on GHIP-specific data provided by Highmark and Aetna.

2 Defined by the APM Framework as Category 3 and Category 4 models.

3 Estimated reduction in diabetic member cost for FY21 is approximately 1.5% (\$0.7m)

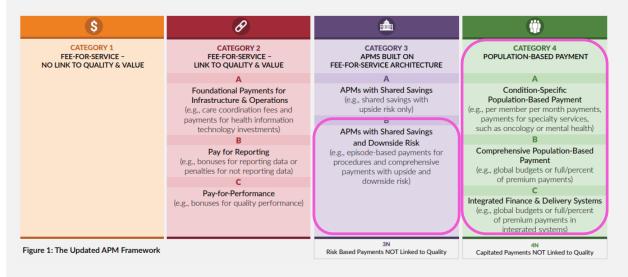
- 1. Health care stakeholders willing to partner with the GHIP in advanced APMs containing down-side risk (Category 3B & 4 models)
- 2. Health care stakeholders willing to expand access to primary care with an effort to improve care delivery and coordination for GHIP participants
- 3. Health care stakeholders willing to improve care delivery, care coordination and care management for GHIP participants

Above groups may include third party vendors that could play a role in the Delaware health care marketplace to support the goals of the SEBC

Health care stakeholders willing to partner with the GHIP in advanced APMs containing down-side risk (Category 3B & 4 models)

Alternative Payment Model (APM) Framework¹

Developed by the Health Care Payment Learning & Action Network (LAN)



Category 3B & 4 models

Consideration given to:

- Targeted opportunities
 - Condition-specific: behavioral health, substance abuse, cancer, maternity, diabetes, musculoskeletal, etc.
 - Procedure-specific: transplants, physical therapy, etc.
- Broader population health – including, but not be limited to, approaches to delivering enhanced primary care, virtual medicine, care coordination / navigation / advocacy, etc.

1 Source: https://hcp-lan.org/workproducts/apm-refresh-whitepaper-final.pdf

Health care stakeholders willing to expand access to primary care with an effort to improve care delivery and coordination for GHIP participants

- Expanded access to primary care may be broadly interpreted by health care stakeholders
- Includes examples such as:
 - Offering priority access for GHIP members
 - Nights/weekend availability
 - Low wait times for new patient appointments (to schedule and once arrived at provider's office)
- Additionally, improvement of care delivery and coordination should be coupled with the longer-term goal of reduction in GHIP member health risk and cost

Health care stakeholders willing to improve care delivery, care coordination and care management for GHIP participants

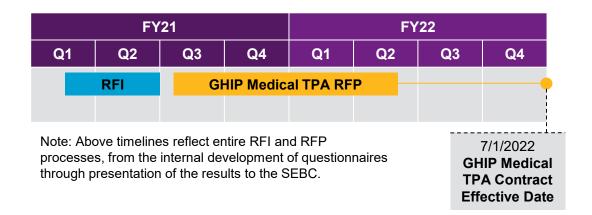
Support in this area would include providing members with engagement tools and clinical support to better manage their care and provide requisite oversight to ensure care is delivered in an efficient manner

Other important considerations

- RFI will seek stakeholders' perspectives on proposed solutions, prior experience with similar models, thoughts on barriers to adoption, timeframe for readiness to adopt, and implications for transformation of care delivery
- Innovation is encouraged stakeholders who have ideas about solutions that are not yet available in the Delaware marketplace are encouraged to participate in this RFI
 - It is critical that those suggestions articulate how those approaches would also maintain the State's commitment to promoting the delivery of highquality care in a cost-efficient manner that does not increase the total cost of care
- There will be no contract awarded as a result of this RFI
 - However, findings from this RFI will be used as key inputs for the upcoming GHIP Medical TPA RFP, which is scheduled for release by Spring 2021

Timing considerations

- Health care stakeholder RFI key dates:
 - RFI released: Tuesday, September 22, 2020
 - RFI response period closes: Tuesday, December 1, 2020
 - Questions from respondents will be accepted throughout the entire response period (September 22 – December 1, 2020)
- Information obtained in this RFI will be used as key inputs for the upcoming GHIP Medical TPA RFP, which is scheduled for release in the Spring, 2021



Next step

RFI will be released publicly on Delaware's Bid Solicitation Directory (<u>http://bids.delaware.gov/</u>) on Tuesday, September 22, 2020