

GOAL: REDUCE COSTS NOT COVERAGE

- Need for a new strategy:
 - » From 2003 2010 the Connecticut state employee plan saw premiums rise by an unsustainable 53%
- Catalyst:
 - » In FY 2011 the state faced a projected \$3.8 billion deficit, the status quo was no longer tenable

HEALTH ENHANCEMENT PROGRAM

- Targets preventive care and chronic disease through:
 - » Required age appropriate preventive screenings and care
 - » Lower co-pays for medication/care associated with five chronic diseases and conditions
 - » Chronic disease management education program
- Lowers costs for enrolled/compliant participants by:
 - » Waiving co-pays for preventive care and chronic disease management
 - » Reducing monthly premium share
 - » Waiving annual deductible

CONSUMER ENGAGEMENT

PROGRAM LAUNCH

- ENROLLMENT WEBSITE
- ENROLLMENT FAIRS
- HR OUTREACH
- COMPLIANCE TRACKERS MAILED

COMPLIANCE MONITORING

- INTERACTIVE WEBSITE
- COMPLIANCE STATUS LETTERS
- EMAIL BLASTS
- DIRECT PHONE CALLS
- HR/UNION OUTREACH

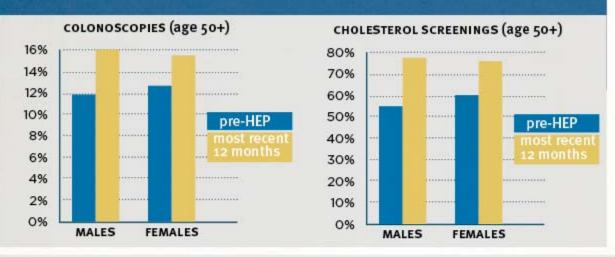
PENALTY PHASE

- NON-COMPLIANCE LETTERS
- ABILITY TO APPEAL TO HCCCC
- FINANCIAL BENEFITS REMOVED UNTIL COMPLIANCE MET

Lessons:

- Deadlines spur action
- Regular and varied communication a must

BEHAVIOR CHANGE

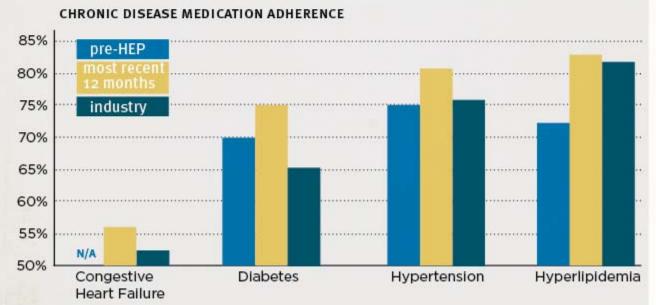


Medical & Pharmacy Trend

- 12 months Prior to HEP 8.9%
- Most Recent 12 Months 2.8%

Emergency Room Visits DOWN 9%

Preventive Exams UP 20%



PLAN DESIGN & PAYMENT REFORM

Does a value based insurance design like HEP enhance the impact on cost, utilization and outcomes of payment reform models?

Medical Home Pilot

State Innovation Model

– Accountable Care
Organizations (ACO)

CHALLENGES/ LESSONS LEARNED

Clear Communication

- » Participants
- » Physician Community

Compliance monitoring

- » Protecting Personal Health Information
- » Claims lag
- » Defining codes that meet compliance standards (physicals)
- » Adjusting plan requirements to meet latest medical recommendations
 - Dental cleanings
 - Vision