

# Welcome!

---

- Thank you for joining the Spring 2022 Updates webinar.
- We will begin in a few minutes.
- All attendees will be muted upon entry.
- We are recording today's session.
- A copy of the slide deck will be shared after the meeting.
- Please use the Q&A feature to submit questions.

If you do not hear the speaker, please dial in:  
**Phone Number: 1-646-558-8656 or 1-669-900-6833**  
**Webinar ID: 918 0018 6020**  
**Password: 627100**



---

# Spring 2022 Updates for NFP BNGA Sub Producers

---



## How to Reach your General Agency team

- **Quoting/Sales Support:** Email completed Rate Request Form Submissions & New Business Inquiries securely to [nfpbnraterequest@nfp.com](mailto:nfpbnraterequest@nfp.com)
- **Renewals/Service:** Email Renewal Decisions & Requests related to existing Group Business to [nfpbnga@nfp.com](mailto:nfpbnga@nfp.com)
- **NFP-BNGA Dedicated Leads (Assigned to each Partner Agency)**
  - Kara Bernhart ([kara.bernhart@nfp.com](mailto:kara.bernhart@nfp.com) | 724.940.9489)
  - Ashleigh Myers ([ashleigh.myers@nfp.com](mailto:ashleigh.myers@nfp.com) | 724.940.9482)
- **Guidance for Contracting, Carrier Related Inquiries or Agency Contacts**
  - Cheranne Jurena ([cheranne.jurena@nfp.com](mailto:cheranne.jurena@nfp.com) | 724.940.9480)
- **Commission Inquiries:** [nfpbncommissions@nfp.com](mailto:nfpbncommissions@nfp.com) | Heather Kiraly (814.289.4225)

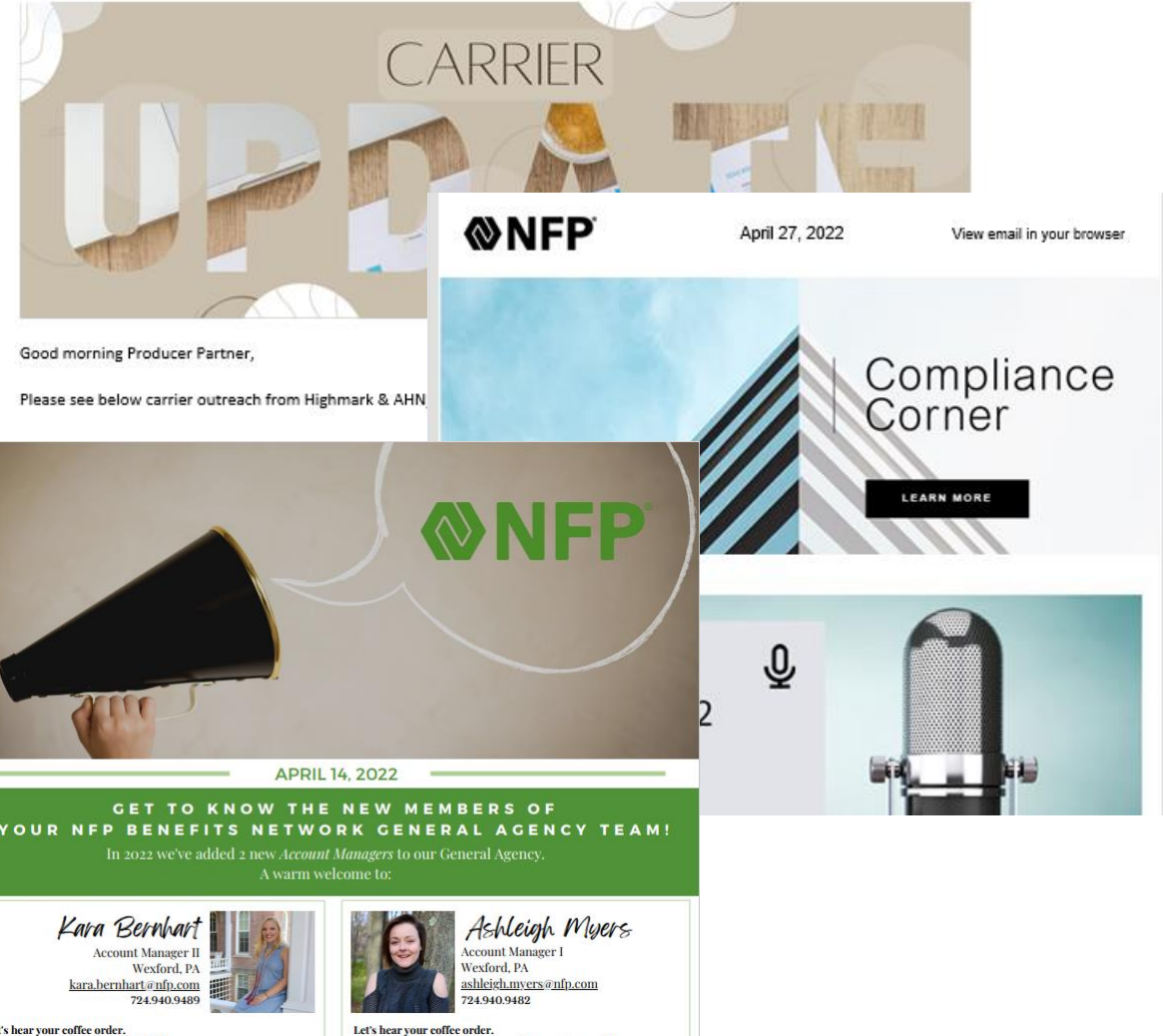


- **How to keep up with what's new?** We're committed to keeping you up to date with carrier correspondence, related industry resources & relevant tools.

- **Keep on the lookout for these formats**
  - NFP BNGA Producer Plug In
  - NFP Compliance Corner
  - NFP BNGA Producer Newsletter
- Visit [www.nfpbnga.com/login](http://www.nfpbnga.com/login) for archived data and more. *Forgot your username?*  
**Contact the NFP BNGA team for assistance**

Cc: NFPBNGA <[NFPBNGA@nfp.com](mailto:NFPBNGA@nfp.com)>

Subject: NFPBNGA Producer Plug-In: Join Us for a Virtual Panel Discussion on Highmark and AHN Behavioral Health Solutions!



# Agenda

- Welcome!
- 2022 NTH Incentives
- High Performance Networks
- Member Engagement Guides
- Pharmacy Updates
- FI Clinical Management Solutions
- Questions?



---

# 2022 New to Highmark Incentive

---

Melinda Schneider – Producer Strategy Consultant

# 2022 New to Highmark Incentive

For 7/1 WPA  
Clients ONLY  
Incentive  
Doubled

## New to Highmark Incentive Program

Fully Insured	\$100.00 per contract
ASO Rx Carved-In	\$50.00 per contract

## Well360 Enhancement Incentives\*

Well360 Clarity	\$5.00 per contract
Well360 Connect	\$4.00 per contract
Well360 Focus	\$2.50 per contract
Well360 Lifestyle	\$2.00 per contract
Well360 Concierge	\$1.00 per contract
SmartShopper	\$0.50 per contract

*\*These enhancements have group size requirements, work with your Sales Executive for a quote!*

## Bundled Incentives

High-Performance Networks**	\$3.00 per contract
Dental (UCD & BED)	\$1.50 per contract
Spending Accounts	\$2.00 per contract
Stop Loss with HM Life	\$2.00 per contract

## Medical Underwriting Incentives

Completed FormFire App	\$7.00 per contract
Completed Paper App	\$1.00 per contract
Sold MU Case	\$3.00 per contract

*\*\*Blue HPN, Choice Blue, Lehigh Valley Flex Blue, Performance (Flex) Blue and Together Blue*

## HERE ARE THE DETAILS:

- This Incentive applies to Small Group (2-50) and Large Group (51+).
- Applies to effective dates February 1, 2022 – January 1, 2023.
- All PA agencies qualify for the New to Highmark Incentive Program.
- New to Highmark incentive is a one-time payout, paid on sold contracts 60 days after the effective date.

**For questions, please contact your Highmark Sales Executive.**

- Medical Application incentive is only paid when Highmark Medical Applications are completed. If more than one producer submits Medical Applications for the same client - incentive is paid to the first producer to provide a complete submission.
- Incentive is capped at \$500,000, not to exceed \$100,000 per client.
- Incentive is contingent upon received and applied payment from the client.
- Highmark reserves the right to recoup the incentive if the group cancels before their next renewal date, or if the business does not remain in place for one full year.

---

# High Performance Networks

---

Sales Executives – Ashley Festa

# Performance Blue

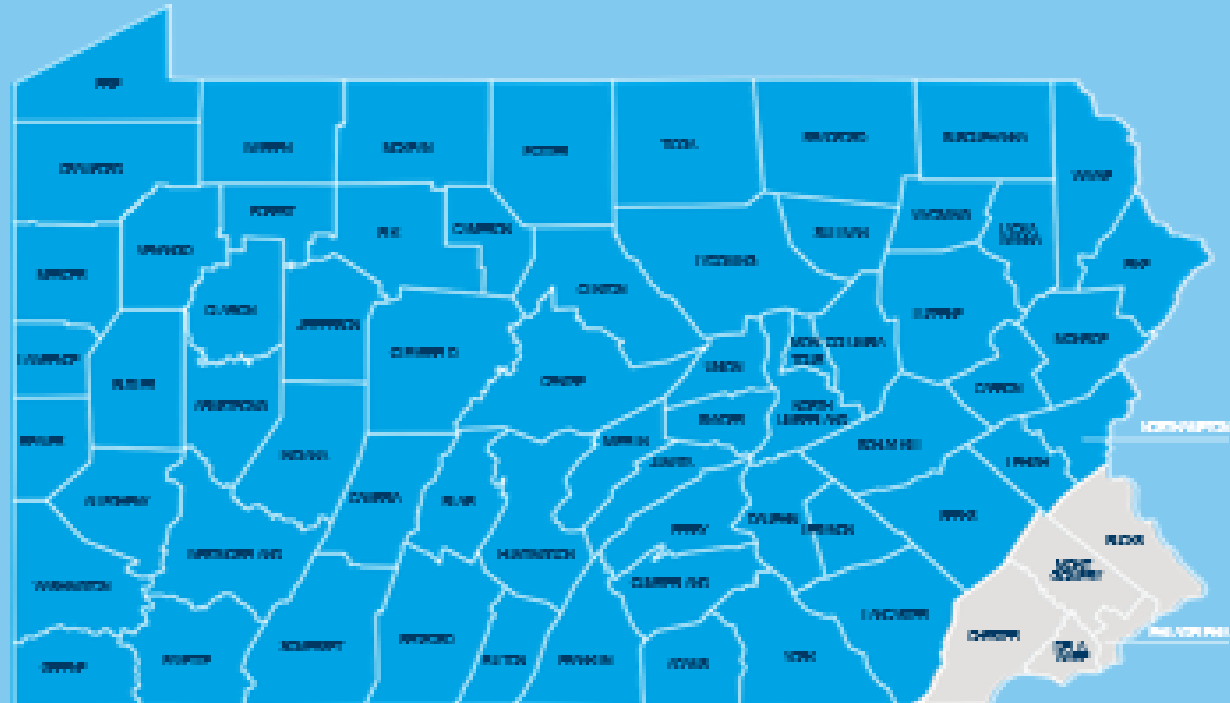
**Performance Blue** is a new Pennsylvania statewide product designed to not only deliver quality care at a lower cost today, but to accelerate an industry-wide shift toward better outcomes and value through collaboration with providers.

## PRODUCT DETAILS

Narrow network

PPO, EPO, and QHDHPs

BlueCard is in network



\*Coverage would be provided in the IBC region via BlueCard

# Network Composition – WPA



Encourage members to utilize AHN and Conemaugh health systems, where possible

Enhanced/INN	Standard/OON
<ul style="list-style-type: none"><li>• Allegheny Health Network</li><li>• Conemaugh Health System</li><li>• Excelsa Health System</li><li>• Heritage Valley Health System</li><li>• Mon Valley Health System</li><li>• Penn Highlands Healthcare</li><li>• Washington Health System</li><li>• Tyrone Hospital</li><li>• Chan Soon-Shiong Medical Center</li><li>• St Clair Hospital</li><li>• Other high-quality, low-cost health systems</li><li>• Select UPMC facilities &amp; physicians</li><li>• BlueCard</li><li>• Higher quality independent providers *</li><li>• Ancillary High Performing Networks *</li></ul>	<ul style="list-style-type: none"><li>• Select UPMC facilities &amp; physicians (Group 1)</li><li>• Lower quality independent providers *</li></ul> <p><i>* STARTING 1/1/23</i></p>

# Positioning: Performance (Flex) Blue Vs. Community Blue (Flex)

---

## Making this transition easy for you and your clients.

- Performance (Flex) Blue and Community Blue (Flex) hold the same place in the market in WPA.
- The same UPMC physicians and facilities that are excluded in Community Blue (Flex) are also excluded in Performance (Flex) Blue.
- However, Performance (Flex) Blue has greater focus on cost and quality and has deeper discounts than Community Blue (Flex).
- Performance (Flex) Blue will offer your client greater savings than Community Blue and is also statewide.



**Performance Blue/Performance Flex Blue**

---

# Member Engagement Guide

---

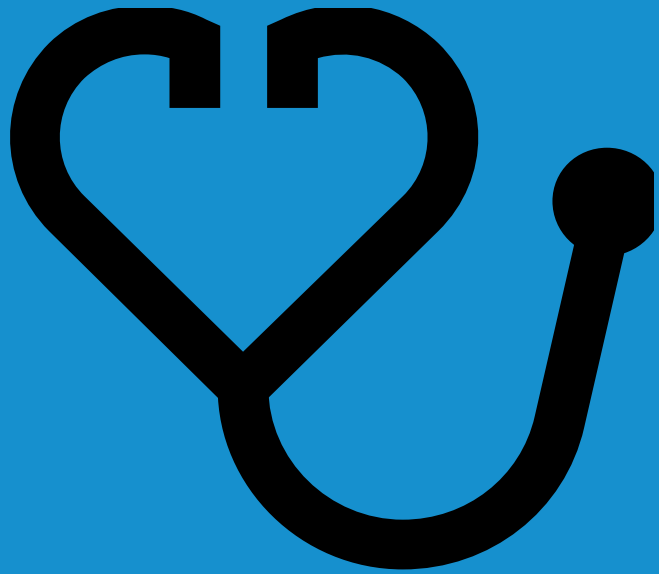
Lee Anne Hrebik – Supervisor Member Engagement



# Make the most of your plan with your Member Engagement Guide.

~ We're all about making it easy  
for you to get the care you need.

That's why our **Member Engagement Guides** are here to help if you need to find a new in-network provider or have questions about your plan.



---

### Your guide can:

- Answer any questions you have.
- Help find the best in-network doctors and care settings for you.
- Schedule appointments and transfer medical records.
- Make sure you're getting the most out of your plan.

Call our Member Engagement  
Guides today at

**1-844-576-1245.**

---

---

# Pharmacy Updates

---

Nick Miller – Sr Pharmacy Consultant



# Current Pharmacy Market Landscape

---

As we all know, prescription benefits are constantly changing, and it is imperative for us all to be proactive in how we manage the potential challenges that arise. Highmark has been actively re-designing our pharmacy services department which regularly includes independent 3<sup>rd</sup> party consultation to help inform our strategies as we grow. As part of that external analysis, it has become clear that the market dynamics for Rx benefits can be summarized in 3 key trends:

## Manufacturer Assistance Programs

- Savings figures assume 100%-member enrollment in free drug programs (PaydHealth, etc.)
- Savings analysis do not include rebate impact by moving these drugs off the plan
- Savings often inflated by using a specialty discount rate well below the guaranteed to the client
- Fees are significant, often 30% of overall savings

## Clinical Savings Guarantees

- Client must typically adhere to all benefit and formulary recommendations from PBM to qualify
- Often underwritten in ways to ensure non-achievement never happens
- Typically utilize caps limiting the value and any change in group demographics nullifies guarantee

## Transparent/Clinically Focused PBMs

- Currently, there is no market standard definition for the term “Transparency” allowing everyone to produce their own.
- Typically, do not offer guaranteed rates for rebates and discounts, unless they are BoB guarantees
- Base economics do not stack up to rates that are offered in the market
- Savings analysis often include aggressive assumptions around clinical programs
- Claims reprices will include other optional programs that could skew the results of the reprice

# Copay Armor – *Powered by Pillar Rx*

Copay Armor leverages manufacturer assistance dollars to decrease costs for high-cost specialty medications.

## How It Works



# Free Market Health (FMH)

A game-changing, cloud-based platform and operational model focused on transforming the specialty drug ecosystem and disrupting the current specialty pharmacy model.

What if there was a referral and reimbursement ecosystem where **resources, risk, and accountabilities** were aligned?



## Real-Time Authorization (RTA)

Prescribers submit a request in less than two minutes.

RTA shortens the time it takes for drug authorizations and referrals, allowing real-time authorization.

**Result:** Improved speed to therapy for the members.



## The Marketplace

The FMH platform allows for dynamic pricing on specialty pharmacy drugs — on both the medical and pharmacy benefit.

Contracted specialty pharmacies bid competitively on specialty drug referrals through a marketplace.

**Result:** Bidding provides real-time best pricing on high-cost specialty medications.



## Value-Based Framework *Coming Soon*

Members will be stratified into a high- or low-touch model of care.

Specialty pharmacies will have the opportunity to earn a value-based reimbursement on eligible specialty drug referrals.

**Result:** Alignment between the drug, the member, and the pharmacy.

# Value of Free Market Health

---

## Prescriber:

- Minimized prior auth process burden
- Increased efficiencies and transparency

## Pharmacy:

- Easy access to member referrals that are matched to their care model
- Opportunities to be reimbursed for great care
- Reduced administrative burden with cleaner referrals

## Member:

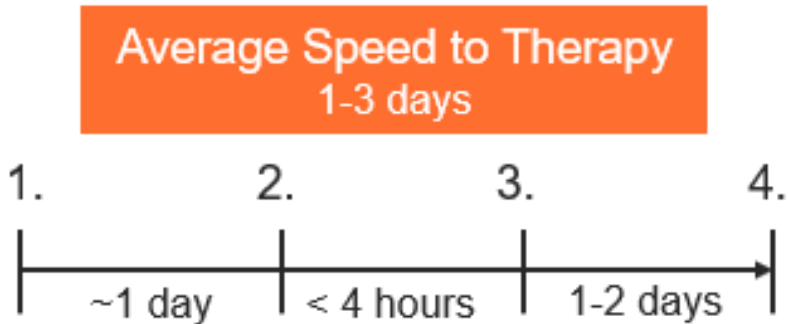
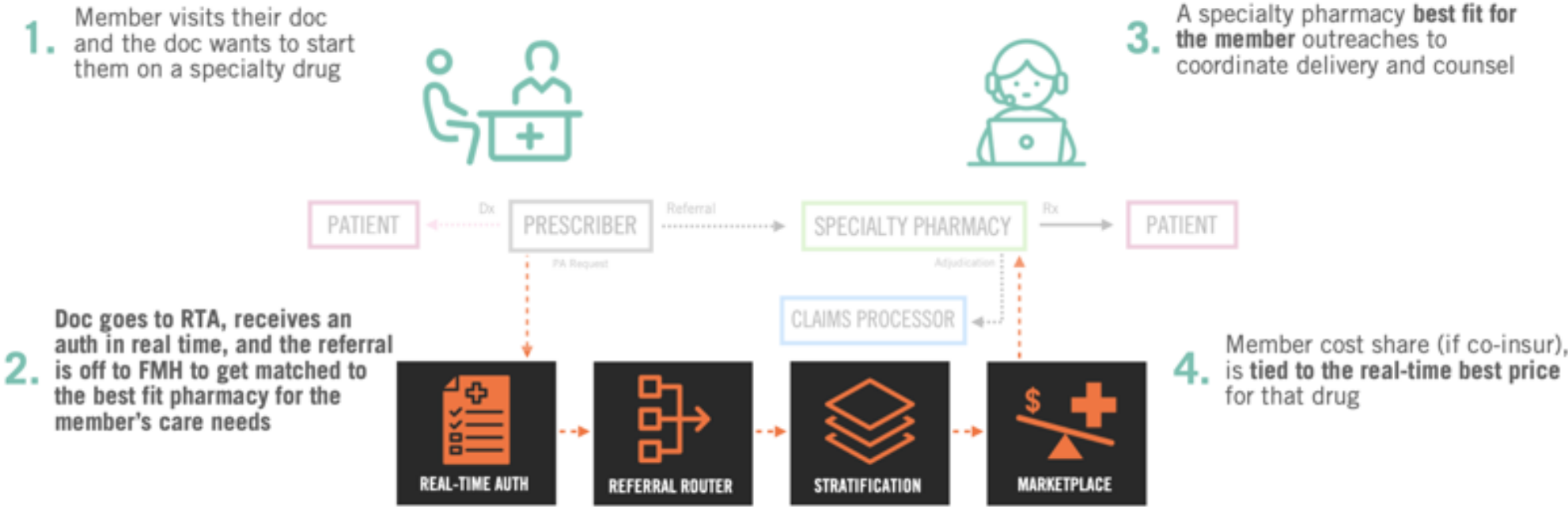
- Improved speed to therapy
- Focused care management for high-touch patients, eliminating a one-size-fits-all specialty pharmacy contracting approach

## Client:

- The best rates are achieved in real-time on high-cost specialty drugs
- A streamlined and optimized experience for their employees on a specialty drug



# Member Experience Flow with FMH



---

# Fully Insured Clinical Management Solutions

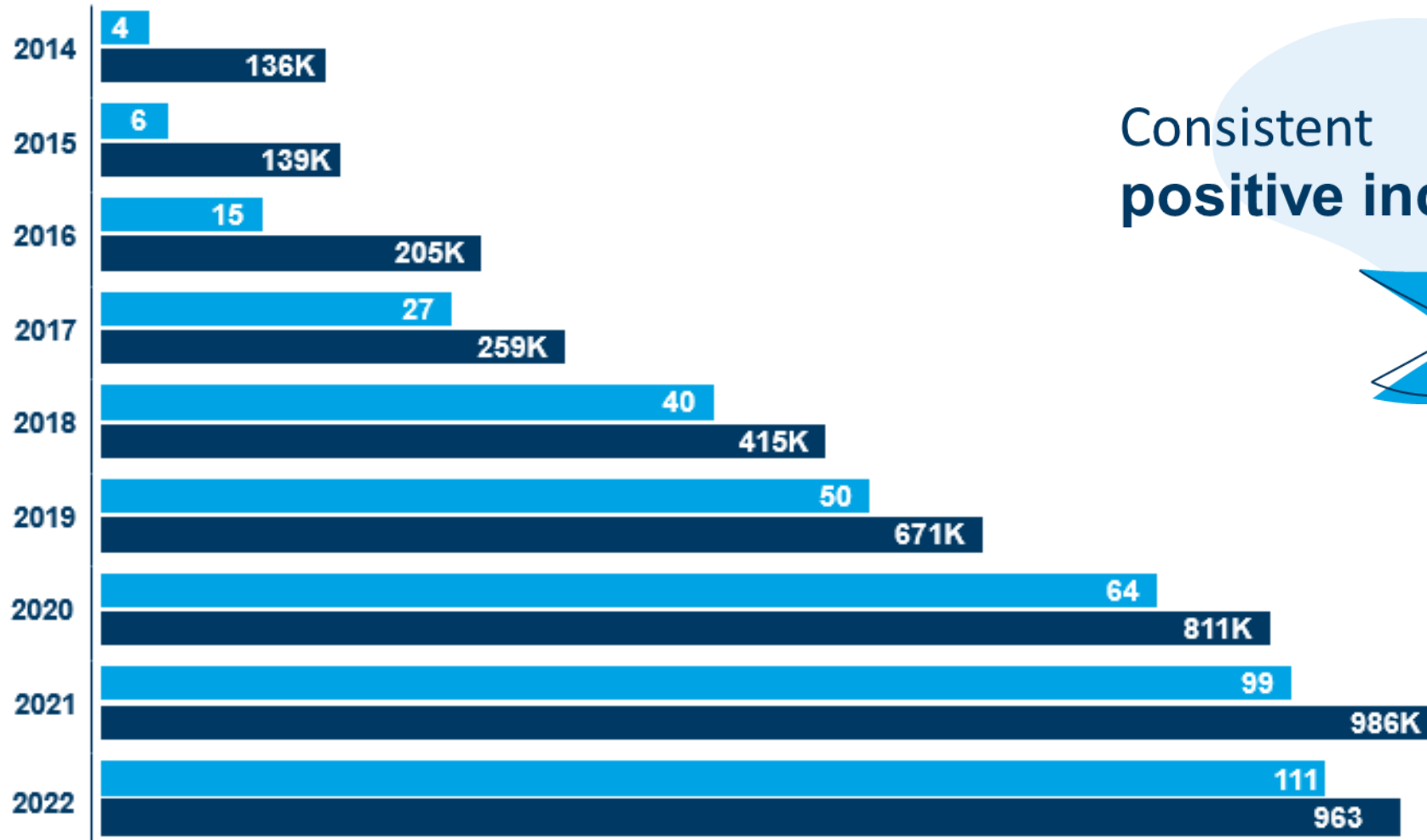
---

Sarah Slavic, RN, BSN – Clinical Strategy Consultant



# Product Evolution

■ Clients ■ Members



Consistent  
positive increase

Highmark Blue Cross Blue Shield or Highmark Blue Shield received one of the highest CX Index™ scores among health insurers in Forrester's proprietary 2021 CX Index™ survey. The ranking was based on responses from 12,824 US individuals measuring 17 brands in the industry. The proprietary survey results are based on consumers' opinions of the experiences with the brands in the survey. Forrester Research does not endorse any company included in any CX Index™ report and does not advise any person to select the products or services of any particular company based on the ratings included in such reports.

# Well360 Core

## Improving Health from every angle.

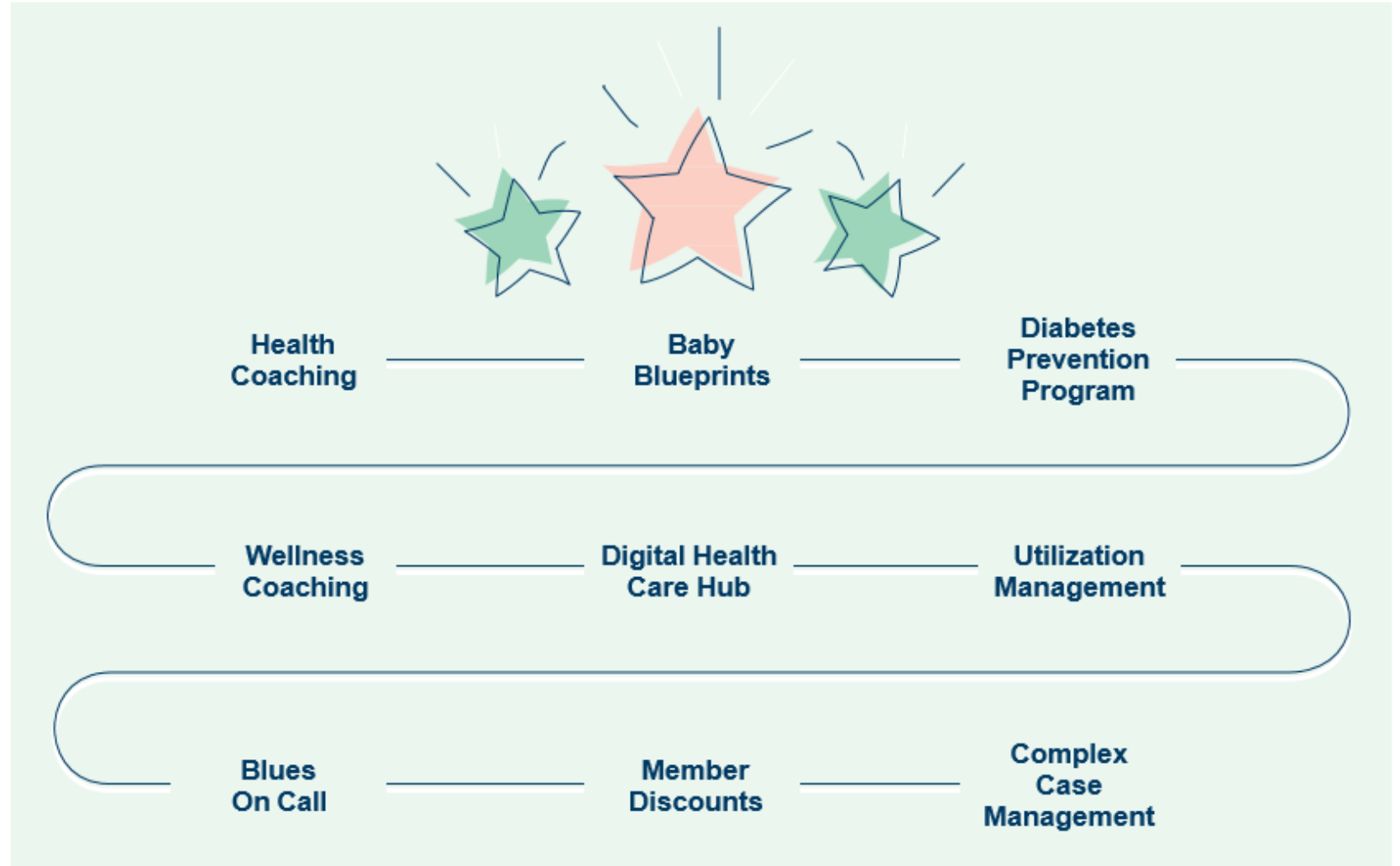
Helps members navigate care, make healthy lifestyle changes, and manage chronic conditions.

- Holistic health management solution that integrates clinical, wellness, and member services
- Digital health hub with Sharecare
- Includes complex case management, our transition of care program, and behavioral health for members in need of support
- Member listening system anticipates next best action and delivers personalized and timely interventions



### The Right Fit

for a specific health concern,  
like preventive care or  
wellness, needs addressed



# Well360 Core Program Impacts



**\$875** PMPM  
Reduction  
in medical cost savings for our  
Transition of Care program.

**\$850** PMPM  
Reduction  
in medical cost savings for our  
Complex Case Management program.

**\$44** PMPM  
Savings  
per engaged member (across all programs).

# Integrated Care Team (ICT)

Our Integrated Care Team (ICT) is a multi-disciplinary clinical care team whose members coordinate and streamline care for our HIGHEST RISK, HIGHEST COST inpatient members. ICT provides END-TO-END utilization and case management services to support members during and after their inpatient admission.

# 2:1

**Real-Time  
Intervention**

# ROI\*

**High-Intensity  
Care Management**

**Real-Time Intervention Leads  
to Remarkable Results.**

***Our rigorous analysis showed \$817 savings  
per case which equates to a 2:1 ROI.***

This was achieved through a 24% reduction in readmissions, a reduction of 1.14 days for inpatient average length of stay, and lower post-acute utilization rates, including 38% lower skilled nursing, 29% lower long-term acute care and 12% lower inpatient rehab facilities.\*

## How It Works

- 1 Member Admitted to Hospital / Prior Authorization Received
  - 2 Real-time Member Listening System Identifies ICT member
  - 3 Member is Auto-Routed to ICT  
*Standard UM begins with prior authorization and is routed to general unit.*
  - 4 ICT Utilization Management (UM) and Case Management (CM) Begin Immediately and Concurrently  
*Standard CM may begin at discharge, dependent on Well360 Care Management model.*
  - 5 Dedicated UM nurse works with provider, facility and CM nurse. **Proactive and High Touch.**
- OR**
- Dedicated CM nurse works with member/family and continues post-discharge as long as needed. **Proactive and High Touch.**

# Integrated Care Team (ICT)

---

How does this compare to standard (UM)?

---

Our real-time member listening system identifies ICT appropriate members through sophisticated algorithms and machine learning at the point of admission and prior authorization. This allows complex case management to begin immediately where standard case management typically begins at discharge. A consistent nurse reviewer and dedicated case management nurse collaboratively work with the member throughout their inpatient stay on care, discharge planning, condition management, and transition of care needs.

---

What UM and CM activities contribute to the savings?

---

With ICT, the member's discharge planning begins at the admission. The UM nurses work to begin the discharge discussion as early as when the patient is admitted. This is the primary difference between standard UM and ICT UM. The dedicated case management nurses are hyper-focused on the highest risk impactable population. The early and ongoing engagement by this dedicated team begins upon admission and leads to better outcomes.

---

Is there a fee?

---

Clients will be charged a case rate per member who is engaged in ICT. This means that clients will only be charged when their members are actually enrolled in the program, rather than broadly charging a flat per employee fee.

---

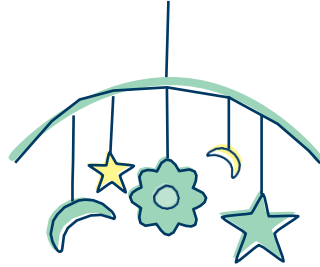
Who would benefit from ICT?

Between 0.5% to 1.5% of the population will benefit from ICT intervention. This may include members with multiple co-morbidities like brain dysfunction, acute heart disease, diabetes, and lung diseases. Other examples may include complicated births, neonates, major traumas, sepsis, and other admissions that forecast high claims costs.

# Baby Blueprints®

---

We offer Baby Blueprints® maternity education and support programs to help expectant mothers better understand every stage of their pregnancy.



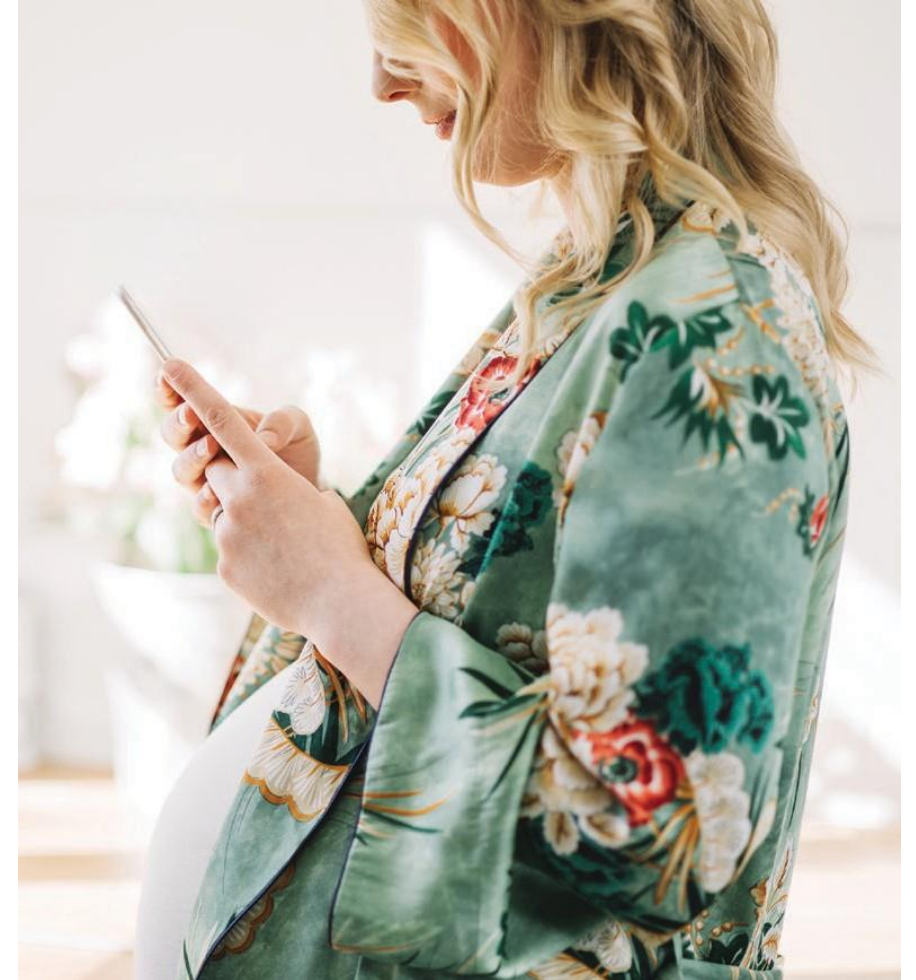
## **This free program provides members with:**

Easy and convenient enrollment over the phone.

Access to in-depth educational information on all aspects of pregnancy.

Individualized support throughout their pregnancy from a nurse case manager.

Information on reimbursement for childbirth classes.



# At-Risk Maternity Management Strategy

Comprehensive, holistic care throughout the maternity journey.

Focus on high-cost drivers –  
pre-term birth,  
C-sections, NICU stays

Proactive outreach and engagement in  
clinical programs

Collaboration with provider and  
clinical care team

**Cost related to high-risk pregnancies  
continue to rise year over year.**

**16% of inpatient costs are attributed  
to maternity and newborn costs.**

**44% of maternity and newborn inpatient costs  
are attributed to high-risk pregnancy.**

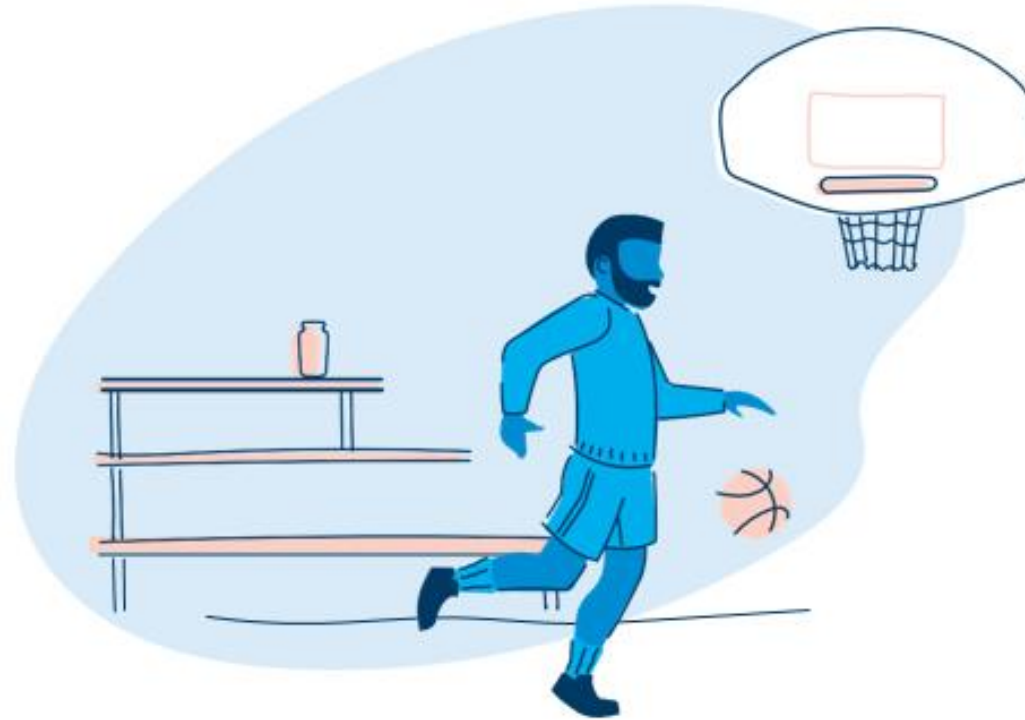
**Employees want simple and  
engaging solutions to guide their care.**



# Diabetes Prevention Program (DPP)

Diabetes is preventable. Prediabetes is reversible.

- As many as 1 in 3 US adults are pre-diabetic.
- DPP is available to all members as part of our preventive schedule.



**DPP is a structured lifestyle and health behavior change program that is designed to prevent the onset of Type 2 diabetes.**

With DPP, you get:



**Expert Coaching**



**Engaging Lessons**



**Support of a Community**



**100% Preventive Medical Benefits**



**No Member Cost Share**

# Well360 Diabetes Management — Powered by Onduo



The Onduo program helps people achieve their goals through building relationships and on-demand care.

Effective 1/1/2022

- ☒ A virtual health clinic that includes access to telehealth services with endocrinologists
- ☒ Remote prescriptions
- ☒ Continuous Glucose Monitoring systems (CGMs) to those who qualify
- ☒ An extension of primary care and coordinates care with PCPs

# Well360 Diabetes Management



## Members receive:

- ✓ A free glucose meter and unlimited test strips
- ✓ A personal health coach
- ✓ Access to experts through their smartphone via the Onduo app

Members will be supplied with glucometer that meets their needs.

3-5 daily  
readings  
BGMs



300 daily  
readings  
CGMs



# Welcome Kit



After the member registers and completes the onboarding questionnaire, a **Welcome Kit** is shipped to their home.

Instructions

A1c Test Kit and return packaging addressed to lab (shipped automatically 5 days after Welcome Kit)

Cooler Bag



Telcare Blood Glucose Meter



100 Strips

Lancing Device

# Onduo Participants Achieve Favorable Change in Key Measures Impacting Co-morbidity



**1.6**  
percent

DECREASE  
in HbA1C



**4.4**  
mmHg

DECREASE  
in Systolic BP



**16.6**  
mg/dl

DECREASE  
in Total Cholesterol



**9**  
pounds

AVERAGE  
Weight Loss

**10% of program savings**  
over three years

**2:1 ROI**  
by three years



# Kidney Care Management

## A White Glove, Two-Pronged Approach

- **Quality Practice Advisors:**

- Registered Nurses who work with Providers to identify Gaps in Care and Care Action Plan. Also identifies opportunities to improve care for member.

- **Care Navigators:**

- Nurses, Dietitians, Mental Health & Social Services Professionals.
- Work with Members to execute the Provider established Care Action Plan. Educate members on kidney disease, identify Social Determinants of Health and address Medication Management.
- Planned and Optimized Renal Replacement Therapy (Dialysis)
- Available for Fully Insured Implementation on May 1, 2022.
- Program Results:
  - Reduction in avoidable ER visits & Unplanned Hospitalizations
  - Improved medication management
  - Lower overall total medical costs



# Behavioral Health

## Telemedicine In-Network Providers

- Ria: Treatment of Alcohol Use Disorder, Bluetooth & prescribing capabilities
- Tempest: Alcohol Use Disorder treatment, more closely resembling IOP
- MAP Healthcare: Substance Use Disorder & certain psychiatric treatments. Utilizes Peer Recovery Support.
- Bright Heart Health – Opioid Use Disorder & Eating Disorders.
- FreeSpira – PTSD & Panic Disorders with DME device .
- Meru – Depression & Anxiety Disorders, 12-week program.
- NOCD – OCD treatment utilizing exposure therapy, ages 5 and up.
- JOON – Specialized therapy provider for adolescents & young adults.





---

# Thank You

---