

buyers health care action group

BHCAG



**eValue8
Minnesota
Health Plan
Evaluation**

2008



How Purchasers Use eValue8

Purchasers use eValue8 to understand the relative quality and efficiency of various health care plans. This allows purchasers to make decisions using the value-based framework. The data contained in this report helps purchasers:

- Compare value, based on their own selection criteria
- Negotiate pricing with health plans
- Set employee premiums
- Stimulate market-wide improvements in health care quality

eValue8 is Making a Difference

BHCAG and eValue8

BHCAG uses information from eValue8 to set community-wide improvement opportunity areas and hold Employer Forums around these opportunities. Each participating plan is invited to host a forum where groups educate and inform one another about an issue, discuss potential solutions and determine how health care plans and the coalition can collaborate across the market to improve care. The selected areas in 2008 are: Health Care Disparities, Medical Home, Patient Safety and Alcohol and Substance Use Disorders.

eValue8 Innovation Awards

Each year, eValue8 recognizes health care plans that develop innovative programs to solve problems in the health care industry. This year, Medica and HealthPartners were awarded eValue8 Innovation Awards for their improvements in the area of Diagnostic Imaging. The plans estimate that between 10-20% of high-tech scans do not adhere to current recommendations of the American College of Radiology and that these scans add between \$2 billion and \$16 billion of unnecessary cost to the health care system. Both Medica and HealthPartners created programs to reduce the number of unnecessary high-tech diagnostic scans, effectively bringing down costs and increasing patient safety.

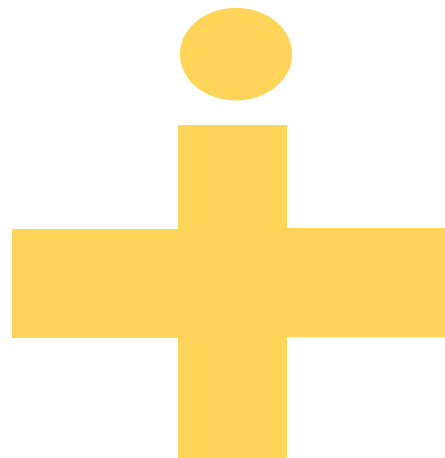
Medica HTI Initiative

Through the Medica program, providers consult with outside certified radiologists about the scans they order to ensure they have the most up-to-date clinical opinions. Medica's effort reduced high-tech imaging by 10-15% and saved an estimated \$5 million in a 7-month period.

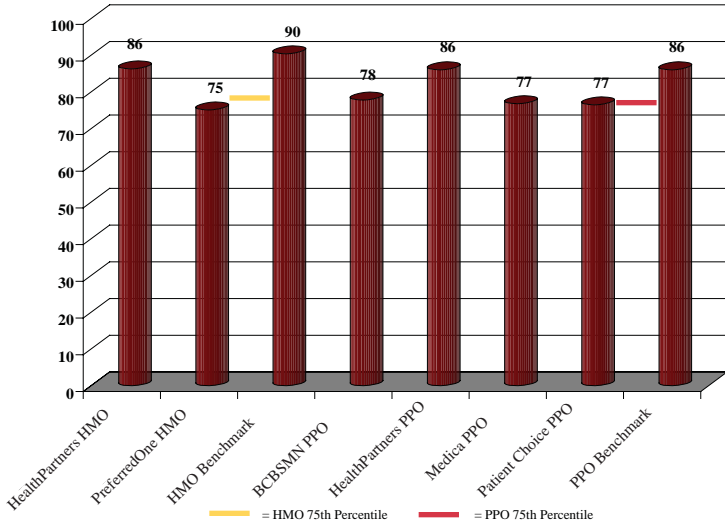
HealthPartners HTD Imaging Program

HealthPartners worked with vendors to embed decision support software into electronic medical records. When a physician requests a scan, electronic health records automatically compare clinical information to recommendations from the American College of Radiology and give the physician real-time feedback on the request. The central innovation of this program is that it brings decision support into the exam room, leading to higher quality and more cost effective decisions made by physicians and patients. The diagnostic imaging program helped reduce the number of unnecessary tests by 7,000 and decreased costs by \$6.6 million in 2007.

Congratulations to these health plans for creating innovative solutions that positively impact providers and members.



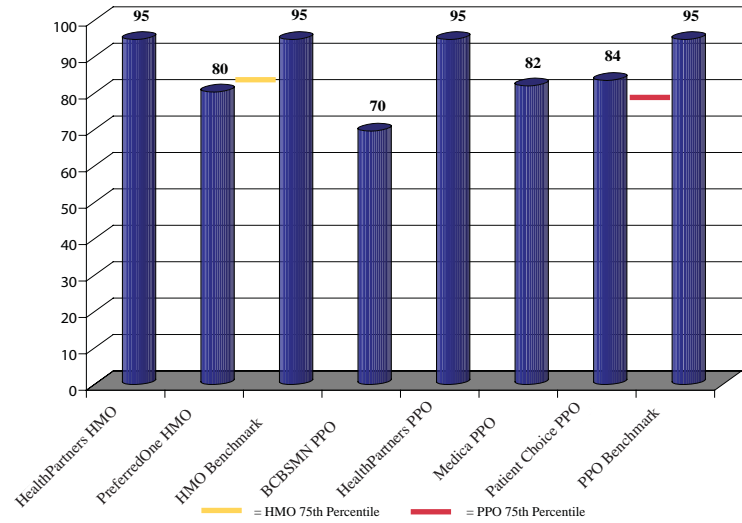
Plan Profile



Areas of Measurement:

- Accreditation and Review
- Health Information Technology
- Community Collaboration
- Removing Barriers to Care and Purchaser Support
- Provider Oversight and Contracting
- Addressing Disparities

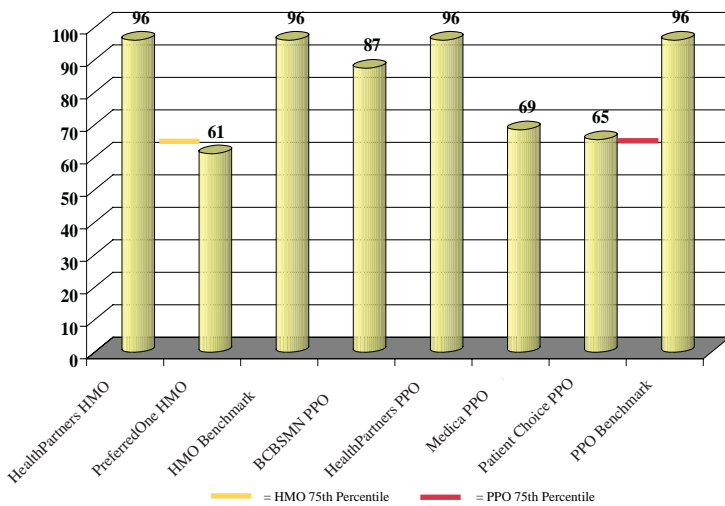
Consumer Engagement



Areas of Measurement:

- Physician Choice Support
- Hospital Choice Support
- Shared Decision Support
- Personal Health Record
- Pharmaceutical Management and Price Transparency
- Performance Measurement

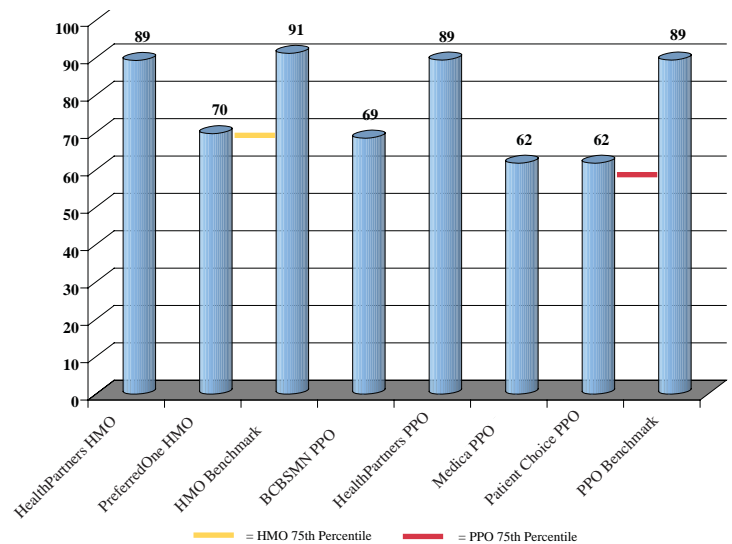
Provider Measurement



Areas of Measurement:

- Physician Performance Measurement
- Hospital Performance Measurement
- Community Collaboration

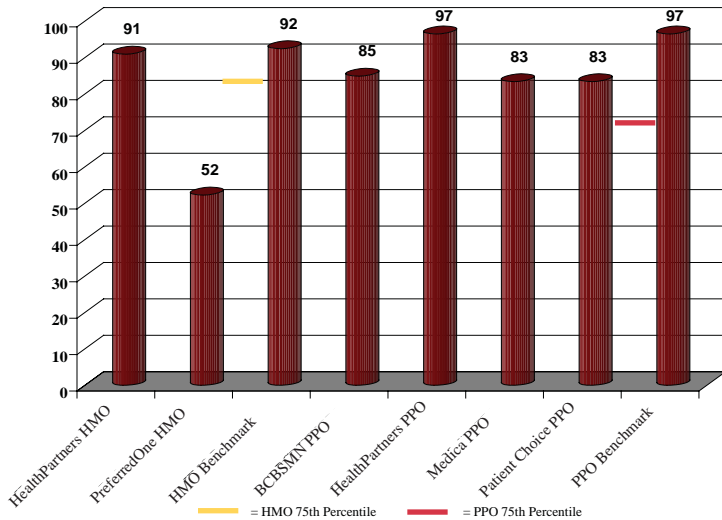
Pharmacy Management



Areas of Measurement:

- Efficient Use of Pharmaceuticals
- Quality and Safety
- e-Prescribing

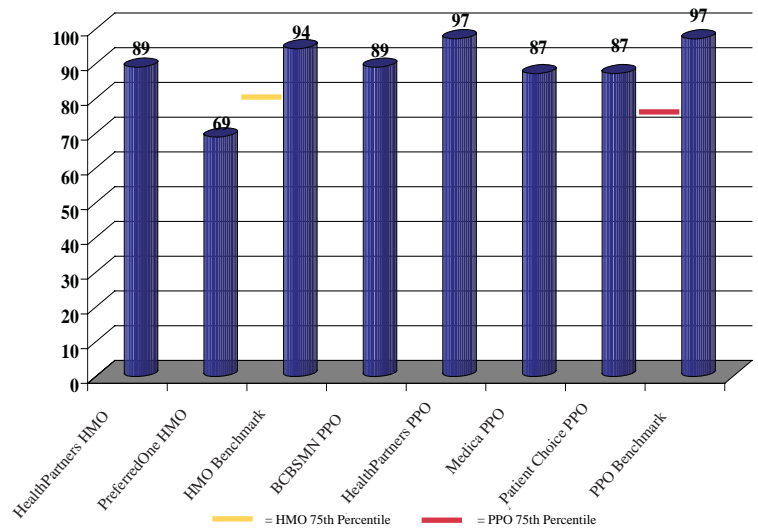
Prevention and Health Promotion



Areas of Measurement:

- Education and Risk Factors
- Cancer Screenings
- Immunization Programs
- Health Risk Appraisals
- Tobacco Use
- Weight Management
- Maternity

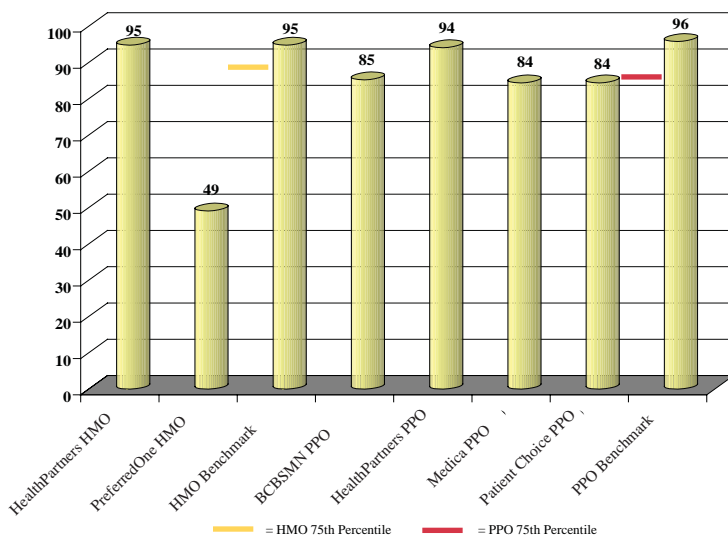
Chronic Disease Management



Areas of Measurement:

- Member Support
- Practitioner Support
- Diabetes, CAD and Back Pain Outcomes

Behavioral Health



Areas of Measurement:

- Program Organization
- Member Support
- Practitioner Support
- Performance Results

Tracking Performance Trends

Minnesota health plans are making positive progress in several categories. Of the plans participating in both the 2007 and 2008 eValue8 surveys, most plans improved their scores in the following areas:

- Plan Profile
- Consumer Engagement
- Provider Measurement
- Prevention and Health Promotion
- Behavioral Health

All participating plans scored lower in the areas of Pharmacy Management and Chronic Disease Management relative to their 2007 scores. This indicates that more work is required to improve efficiency, safety and quality in prescribing, as well as increase member involvement in disease management programs.

About NBCH and



The National Business Coalition on Health (NBCH) is the formal sponsor of the eValue8 tool. eValue8 is the result of coalition and purchaser member efforts to standardize specification and performance criteria for health care plans. These specifications can be applied across all communities. They allow purchasers to make informed decisions and encourage quality improvements.

eValue8 enjoys a great level of support throughout the medical community. The tool is endorsed by the following organizations:

- National Committee on Quality Assurance
- Centers for Disease Control
- Substance Abuse and Mental Health Services Administration
- Centers for Medicare and Medicaid
- George Washington University
- Penn State University

2008 Minnesota Participants

- HMO: HealthPartners, PreferredOne
- PPO: Blue Cross Blue Shield of Minnesota, HealthPartners, Medica, Patient Choice

eValue8 Goals

- Establish common information requests to health plans from purchasers and, to the degree possible, reduce the number of varied requests that consume health plan resources
- Improve the level of comparative information (i.e. costs, quality and value) available to purchasers
- Reduce unnecessary costs, improve access to appropriate services and measurably improve the quality/outcomes of health care services
- Establish information, benchmarks and other quality improvement sharing activities that will improve the delivery of health services for enrollees and the entire community
- Develop performance and accountability standards in health vendor agreements with coalition purchasers
- Use measures and data collection means that already enjoy high level consensus and process by quality oversight organizations (e.g. NCQA, JCAHO, URAC, etc.)
- Draw upon and disseminate the expertise, innovations and “best practices” represented by health vendors
- Provide consumers with performance information which will aid them in selecting health plans, practitioners and treatment



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