

**State and Public School Life and Health Insurance
Board Quality of Care Sub-Committee
Minutes
January 13, 2010**

The State and Public Life and Health Insurance Board, Quality of Care Committee met on January 13, 2010 at 1:00 p.m. in the EBD Board Room, 501 Woodlane, Little Rock, Arkansas.

Members Present

Shelby McCook
Ray Montgomery
Carol Shockley
Dr. Michael Moody
Scott Pace
Frazier Edwards
Renee Mallory
Steve Madigan
Caryol Hendricks

Members Absent

Dr. Joseph Thompson
Dr. William Golden

Jason Lee, Executive Director, Employee Benefits Division, DFA

Others Present

George Platt, Amy Tustison, Doug Shackelford, Sherri Saxby, Florence Marvin, Tracy Collins, Latryce Taylor, Florence Marvin, Lori Eden, Cathy Harris, EBD; Bryan Meldrum, Nova Sys; Sarah Sanders, Wayne Whitley, AHTD; Jeff Britt, Pfizer; Lance Stewart, Merck

Call to Order

The meeting was called to order by Scott Pace, Chairman.

Approval of Minutes

The request was made by Pace to approve minutes from the November 9, 2009 meeting. Montgomery made the motion to approve minutes. Dr. Moody seconded. Minutes approved.

Mission and Purpose of the Committee *by Scott Pace, Chairman*

Chairman Pace provided an overview of the mission statement.

The Quality of Care Subcommittee may review and recommend quality performance indicators for use, recommend baseline performance goals, recommend alignment of financial incentives to improve performance, and track improvements in delivery of care.

Chairman Pace said he has meet with the EBD Director to discuss a few ways to optimize and further the mission purpose through enhancement of some benefits. Pace said hopefully this will improve quality and save the plan costs over the long run; but with the primary emphasis focused on improving outcomes for the members.

Lee informed the committee they have tried over the last few years to get a handle on the quality that's being delivered to the members through various different means. Lee said they have vast amounts of data and information at their finger tips that will help them fully understand the membership.

Lee asked the committee for directions as to which areas they believe could have the biggest impact on the quality of healthcare for the members. Lee then talked about the following preventative services:

- Routine Mammogram (limit 1 per Plan Year at no cost)
- Colorectal Cancer Screening beginning at age 50 (once every 10 years)

Lee said they seem to missing a part of the plan population that is at risk for developing colorectal cancer because of the financial cost to the member for follow-up care.

Lee said they have an opportunity to adjust the plan design so they can remove the barriers for members to seek care.

Madigan reference the part of the mission statement that reads: *"The Quality of Care Subcommittee may review and recommend quality performance indicators for use"* Madigan said preventative screenings are not necessarily performance indicators.

Madigan said one of the problems the committee has had is the frequency of the meetings, and so they have had to rely on memory about what they did six months ago. Madigan suggested it might be helpful to have a written report of the performance indicators. The report should be made available at every meeting and should also include information explaining why the committee chose not to pursue something and the outcomes and challenges they encountered. Lee said they will collect the data they received in the past and provide it at the next meeting.

Dr. Moody informed the committee the AFMC has already compared the state employee program with the Medicaid measures, and so that information is available to the committee. A moody added health premium is a quality indicator. There should not be any difference between the Hemoglobin A1C percentage and the Mammogram percentage because both of these are performance indicators; one is preventative health and the other is used to determine how well your diabetes is being controlled.

Hendricks requested that the schedule of benefits be provided in the report as well. Hendricks said she understood the mission statement to mean they are to track quality indicators for providers and not the upkeep of the benefits.

Lee said they will provide the 2010 schedule of benefits and the preventative care wellness benefits at the next meeting.

Chairman Pace explained providers are the one who give the quality of care and educate to the patients. Patients listen to physicians and so if they track the physicians it will enhance the quality of care.

McCook explained several ways to measure the incidents of the membership by taking advantage of the preventative care services. McCook said finding out how many members took advantage of the preventative services, and the end result, is a really good measure.

McCook suggested some of the committee members remain for a special meeting after the quality meeting so they can let the EBD Director and the Board Secretary know what materials they want included in the handbooks. McCook said the handbooks can stay in the EBD Office and be provided to the members at every meeting or members can chose to be responsible for their own booklets. McCook said this would be an inexpensive and effective way of keeping those informed.

The committee agreed by consensus to request the EBD Staff to put together a booklet for the quality committee.

Chairman Pace commented this would be helpful to all of the members and to future committee members as well. Pace said they don't want the committee to make recommendations that are not based on useful data. They want to have definite points of measurements and be able to track what happened as a result of the committee recommendation.

A discussion ensued about: What are the goals? What are those objectives? How will they be measured? What is the committee going to do with the information?

McCook informed the committee EBD already has a lot of information they have been collecting over the course of three years. McCook suggested BSPW Chairman, George Platt tell the committee what they have in that data bank so the committee will know what they are capable of producing about the membership, and so they don't try to measure something without data.

Lee said the information is at their fingertips and they have a lot of room for improvement. Lee said one of the issues is not having the direct contracts with the provider and not being able to set and establish or monitor the

reimbursement rate. Lee said a lot of the traditional performance standards would be difficult for them to implement and enforce, but they do have a lot of flexibility when it comes to creating incentive programs.

Lee talked about the pharmacy incentive reward program.

A discussion ensued about annual physicals, screenings and immunizations.

After which, Lee referenced the quality committee action plan where it states the committee can utilize the Benefits Strategic Planning Workgroup (BSPW) and the EBD Analytic team. Lee said he will make sure the action plan is included in the quality member handbook and then talked about the makeup of the BSPW. Lee suggested they utilize the BSPW to do research for the committee about the annual physical exams.

Edwards suggested they contact a family physician or other providers as well. Edwards said they can contact a physician or provider in little rock and another from a rural area.

Chairman Pace said it would also be nice to have information about the physician payment schedule for wellness screenings.

Dr. Moody said wellness benefit exceeds the acute care benefits from a reimbursement standpoint, and so there's not a financial disincentive for doing wellness. Moody said Medicaid and most private insurances pay well for preventative services.

Hendricks commented Dr. Golden helps to set standards and initiatives and so the committee should ask him for recommendations as to what preventative services should include. Lee agreed to contact Dr. Golden.

Lee asked the committee if they would cancel the March meeting so they will have time to do the data analysis and pull the archived HEDIS measures. Lee then referenced the decision by the committee to meet every 2 months.

A discussion ensued.

Chairman Pace explained there was lack of quorum in the last four consecutive meetings. Pace said he believes the attendance issue was due partly to the purpose and the productivity of the committee. .

Madigan said its working process and then suggested they don't delay the meeting. Madigan said whatever the staff can assemble in the next 6 weeks will be appropriate; and maybe Dr. Golden will attend and can provide in written form the appropriate preventative care services because there is a wide disparity.

More conversation ensued.

The committee decided by consensus not to cancel the March meeting.

Hendricks requested information on the diabetes service.

Edwards informed the committee that as Director of the Arkansas Osteopathic Medical Association (AOMA) he has access to a strong team of professionals and perhaps they can offer some suggestions on the incentive programs or direction for the committee.

Lee said their ultimate goal is to improve the quality of healthcare for the members, because if the members have better quality care, the plan is going to spend less and the members will pay less in premiums. Lee said they don't provide care and they do not contract with providers and so there is a lot of a thing that they are not directly involved in.

Clinical Trail Coverage *by Jason Lee*

Lee explained the plan provides limited coverage to the members that are going through clinical trail because of their internal exclusions for investigation or experimental procedures. Clinical trials by their definitions will have experimental components to it. The healthcare reform bill (senate version) has provisions that would require the coverage of clinical trails. Lee said this is a new category for their coverage environment; but is this quality of care?

A discussion ensued.

The committee decided by consensus to forward the clinical trial coverage issue to the Benefits Subcommittee as part of the benefit design.

Meeting Adjourned.