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Correspondence Memorandum

Date: August 22, 2019
To: Group Insurance Board
From: Renee Walk, Strategic Health Policy Advisor
Office of Strategic Health Policy
Subject: Summary of August Long-Term Strategy Discussion and Next Steps

This memo is for informational purposes only. No Group Insurance Board (Board) action is required.

This memo summarizes a planning and information-gathering discussion held by ETF on August 21, 2019. No action was taken.

Background

Following the culmination of the self-insurance request for proposal activities and events, implementation of the Segal Report recommendations, a substantially new Board and a prior office-level business improvement plan, the Department of Employee Trust Funds (ETF) determined a need to revisit the overall strategy of the benefit programs overseen by the Group Insurance Board (Board). ETF convened an informal discussion with the Board's table officers (the chair, vice chair, and secretary), regarding a vision for the programs, current gaps and how to measure goal achievement, and the Board's role in moving the programs it oversees forward. The goal of this discussion was to help determine an appropriate approach for a fuller discussion at the November Board meeting.

The Healthcare Triple Aim

The August 21 discussion began with a review of a document compiled by ETF that summarized the concept of the Healthcare Triple Aim, as developed by the Institute for Healthcare Improvement (IHI). The group noted that the Triple Aim is about balancing three aspects—cost, quality/experience, and health—in all programs, rather than focusing on only one aspect, like cost. ETF noted that affordability of benefits was an appropriate concern for the state as the plan sponsor and that the adoption of the Triple Aim as a framework did not mean that cost concerns are ignored. Rather, the Triple Aim can be used as a rubric by which to judge new proposals and strategies holistically, and that cost will always be a consideration. There seemed to be consensus from attendees

Reviewed and approved by Eileen K Mallow, Director, Office of
Strategic Health Policy

Electronically Signed 11/1/19

Board	Mtg Date	Item #
GIB	11.13.19	5A

in the idea that the Healthcare Triple Aim, as modified by ETF, is a proper direction for the Board's programs to move in.

Gaps in Current Approach and Measurement

Participants acknowledged that, while the Healthcare Triple Aim is a good approach, ETF will need to explain how this is different than the approach of prior boards. ETF staff noted that in prior years, the Triple Aim was more aspirational and that the Board was more often focused primarily -- or even solely -- on short-term cost. Proposals like the one to add bariatric surgery were difficult to assess holistically because of the immediate cost concerns. Officers and ETF staff agreed that a long-term strategy should also consider quality and health because these factors will drive costs in years to come. Officers said that the Triple Aim is a good "North Star," and could help this Board in making decisions on program changes.

Officers also raised the issue of defining and measuring the Triple Aim. ETF will bring draft definitions to the November GIB meeting, along with best practices for developing measures. ETF also offered that health plans and other vendors might begin their proposals for pilots and benefit changes with the Triple Aim as the framework. If non-mandatory changes do not address all three aspects of the Triple Aim, they may not be considered. Mandatory changes such as budget or legislative requirements that may be heavily weighted towards cost could benefit from an impact analysis that includes the other prongs of the Triple Aim and how ETF and the Board might act to ensure quality and health are also addressed.

GIB's Role in Pursuing the Triple Aim

The group also discussed how the Board might want to engage in the decision-making process going forward. Officers said they must be mindful of the fact that they only meet quarterly, and so a project management or micro-management approach would not be feasible. They are comfortable in the role of approver/denier and wish to rely on ETF and staff as subject matter experts and are mostly comfortable doing so now. They suggest that proposals going forward include a clear analysis of how the Triple Aim impacts program changes and strategies. They also suggested the Board needs better understanding of the context of the programs, what has been proposed prior, what has and hasn't moved forward, and why decisions were made. The officers expressed comfort with the idea that this Board should be proactive in helping members to manage health conditions, as well as in the overall approach to program improvement.

Next Steps.

ETF will bring a similar presentation and discussion for the full Board's consideration at its November meeting. This discussion will provide background information and education on the programs to date, the landscape in which they operate, and the tools that ETF uses to evaluate programs. ETF will request the Group Insurance Board's endorsement of the Healthcare Triple Aim as a model to which the program can be evaluated going forward, and, if approved, will integrate the Triple Aim into future work products.

Tentative Items for November Discussion:

- Program history and context
 - Board education/program history
 - How ETF operates
 - Pilot programs explanation/policy
- HealthCare Triple Aim and application to GIB programs
 - How are each of the three concepts defined by ETF?
 - How is the Triple Aim different than what GIB has pursued before?
 - What does adopting the Triple Aim mean for the Board?
- Available data, resources, and tools
- ETF project list (past/current/future)
- GIB priority projects
- GIB role in program development
- ETF information sharing

Staff will be available at the meeting to answer questions.