# Joint Medicaid Oversight Committee Testimony by Steve Province, FACHE Buckeye Health Plan December 15, 2022

Chairman Romanchuk, Ranking Member West, and members of the Joint Medicaid Oversight Committee, my name is Steve Province, and I am the President and CEO for Buckeye Health Plan (Buckeye). Buckeye is the second largest Medicaid health plan, with more than 460,000 members, 1,000 Ohio employees and 40,000 provider partners. Our primary responsibility is to develop and implement strategies to improve health outcomes for our members while managing costs for our customers. Innovative programs are essential to meeting these goals and finding new and exciting ways to improve the health of our members is a primary focus of our organization. I am here today to highlight just a few of the innovative programs that we have recently launched, specifically related to pharmacy and behavioral health. Most of the programs I will be highlighting are in their early stages; we are excited to monitor their success and expand on them in the future if outcomes call for it.

# **Behavioral Health**

#### Buckeye Thrive:

Individuals with chronic mental health and substance use disorders account for nearly 36 percent of Buckeye's membership. According to the National Alliance on Mental Illness, nearly 40 percent of the population that has a mental health or substance use disorder does not seek care due to fear, shame and stigma. To help combat this trend, Buckeye has partnered with Thrive Peer Recovery Services (Thrive) to better serve our most vulnerable members. The partnership utilizes mental health and substance use disorder peer-support specialists to function as care extenders and engage members in treatment. Peer supporters are individuals who have experienced success in their own recovery and serve to help others through "lived" experience. Peer supporters participate in activities designed to initiate and maintain recovery with our members, including advocacy, resource sharing, skill building, mentoring and engaging community partners.

Peer support specialists are connected to our members through referrals and real-time warm transfers from Buckeye's Care Management Team. This program has realized nearly three times the successful engagement rate with the population compared to traditional care management outreach efforts. Since the program launched this year, more than 300 members have been referred to Thrive with more than 500 face-to-face visits completed. Additionally, the program has closed over 300 critical social determinant of health gaps for our members, including helping with mental health services, financial instability, food insecurity, housing and employment. Buckeye plans to expand the Thrive program and partner with local emergency departments and psychiatric hospitals to establish onsite presence in their facilities.

## Member Testimonial from H.R.

"I am so happy that Buckeye connected me with you so I can have support from someone that has been there. I couldn't believe that you remembered to call me this week now that I am in treatment, thank you Debra, and Thrive and Buckeye. I need this right now."

## Quartet:

In September 2021, Buckeye partnered with Quartet to make it easier for our members to get the best behavioral health services and improve their overall health outcomes. The program provides a upsideonly, transparent payment structure that rewards providers for engaging high-risk members who have complex behavioral health conditions and are not currently engaged in outpatient services.

Quartet's model supports success through a multi-pronged approach which includes:

- Designing and implementing a pay-for-performance payment methodology.
- Providing data analytics and reporting infrastructure to track and measure outcomes.
- Supporting provider adoption through workflow solutions.

Currently, there are 11 provider organizations enrolled in Quartet's model and Buckeye continues to actively recruit additional providers. Through October 2022, the Quartet program demonstrated the following outcomes:

- 80 percent of the organizations earned a bonus, with \$208K in paid bonuses.
- 35 percent of the members identified (nearly 1200 members) were engaged in treatment.
- 87 percent of the members engaged in services experienced successful community tenure periods with zero hospitalizations or emergency department visits.

The program allows for high visibility into provider performance, with monthly dashboards and reports that help providers earn their full bonus opportunity. The program also incentivizes providers to deliver the highest quality behavioral health care and engage Buckeye's most complex members in treatment.

## **Pharmacy Interventions**

## Working with Pharmacies to Improve Health:

Buckeye has worked with Walgreens for several years to launch initiatives to meet members where they are—like Teddy Bear Clinics for pediatric immunizations—and to manage the dispensing of opioids and ensure Naloxone and Narcan are available when needed. We are leveraging the pharmacist's provider status to order, administer, assess and consult for COVID-19 and other conditions.

We continue to build on these solutions. We are piloting a tech-enabled space within Walgreens stores (called "Health Corners") in which our members have access to pharmacists or registered nurses (called "health advisors") with no "behind-the-counter" responsibilities. The health advisor is wholly focused on helping our members get access to the tools and services that they need to better manage their chronic conditions by providing a range of health and clinical services that supplement care received from primary care physicians and specialists. For example, diabetic members will work with health advisors to uncover and resolve barriers, address gaps in care and to set goals that complement their provider's existing care plan (e.g., adding annual eye exams). Patient care services and associated outcomes are shared with Buckeye and the member's other providers to support individualized, holistic care.

Services offered at the Health Corner locations range from preventive care and wellness checks to assistance with managing chronic conditions. Examples include health screenings, such as blood pressure checks, BMI assessments and HbA1c tests; scheduling mammography appointments; assistance with technology needs, including digital health applications and monitoring devices; administering flu

and other vaccinations; and much more. These services are available at no additional cost to Buckeye members in northeast Ohio. The Health Corners program was just recently launched, but we are already seeing positive outcomes, including an 80x increase in Clinical Quality Improvement completion.

Walgreens also recently launched a pilot program with Buckeye to support asthma and COPD patients. Through this pilot, Walgreens' pharmacists counsel patients on how to use their inhalers, provide proactive outreach to non-adherent patients and use predictive modeling to reach out to people at high risk for becoming non adherent. Buckeye is one of the first payors to reimburse pharmacists for these services in Ohio, made possible through recent state legislative changes. This is the first expanded disease state management pilot for Asthma/COPD in partnership with a payer to include pediatric and adult managed Medicaid, Medicare and Health Insurance Exchange patients.

#### COVID Vaccines:

In the spring of 2021, Ohio faced a public health challenge: Despite the wide availability of free vaccines, Ohioans served by Medicaid were not getting vaccinated against COVID-19 at nearly the rate of Ohioans in general. In May, 45 percent of Ohioans overall were vaccinated but among Medicaid members, the rate was 22 percent—less than half. That was unacceptable, not only for the risk to public health, but because the stark difference was yet more evidence of the inequities that limit some Ohioans' access to health care services. Governor Mike DeWine turned to Ohio's Medicaid managed care plans with a clear charge: "Do more." Just 350,000 Medicaid members had been vaccinated at that point. The governor set a goal of 900,000 Medicaid vaccinations within 90 days.

Buckeye worked collectively with the other MCOs and the Department of Medicaid to meet Governor DeWine's goal. Our initiative, called "Vax on the Spot," included providing convenient locations and hours for vaccine appointments; assisting members in getting to vaccine appointments with expanded transportation benefits; creating and disseminating messaging to members to build trust in the vaccine's efficacy and safety; member incentives; and creating and hosting community events. We didn't do this work alone. We worked closely with pharmacies through initiatives that included grassroots/door hanger campaigns; enhanced vaccine reimbursement for pharmacies; in-store events; Rx bonus structure for pharmacies that met certain targets; and much more. Analytics enabled us to target our outreach to specific populations and ZIP codes that had the highest need.

By the end of December 2021, the MCOs had exceeded the primary goal set forth by the Governor. Based on this success, the program was extended another six months with a focus on harder-to-reach populations and younger members who had become eligible for the vaccine late in 2022. Buckeye and our MCO partners employed school-based events and additional social media campaigns to reach the younger demographic. At the conclusion of the campaign, Vax on the Spot was successful in vaccinating more than one million Medicaid members in Ohio, doubling vaccination rates for Medicaid members to roughly 43 percent and closing the gap on the rate for all Ohioans. The Center for Community Solutions estimated that in just its first few months (as of August 2021), the program prevented 1,696 Medicaid hospitalizations, saving taxpayers \$23.2 million. This collaborative effort of all plans showed our ability to improve the health of our communities is enhanced when we work together, something that will be a larger priority in our new Next Gen contracts.