

SURVEY RESULTS OF CONTEMPORARY US HEALTH PLAN POLICIES - AFFORDABLE CARE ACT (ACA), DIGITAL TECHNOLOGIES, VALUE BASED CONTRACTING (VBC) AND COMPARATIVE EFFECTIVENESS RESEARCH (CER)

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Better Health Worldwide partners with pharmaceutical and device manufacturers to develop and communicate research that will result in Better Health Worldwide.

BACKGROUND

- Health plan management is rapidly evolving and tools are being incorporated into practice management for administering health care. This poster covers 4 Critical areas of contemporary interest:
 - The ACA (affordable care act):
 - Has been under fire with payers making business decisions regarding continuation or elimination of ACA coverage
 - Deductibles and coverage vary by plan and payee
 - Has led payers to speculate about the Trump administration's impact on access, quality and costs
 - Digital technologies, including web and PDA (personal digital assistant) applications continue to grow within patient management, and various services. Budget impacts are expected as these technologies evolve and are adapted
 - Value Based Contracting (VBC) is evolving for various disease and service categories with growth predicted in this technique
 - Cost Effectiveness Research (CER) utilization has grown in volume and application as better evidence has evolved

OBJECTIVES

- To gain a better understanding of health plan management and contemporary tools

METHODS

- An online, interactive survey was developed with 69 questions and topics included:
 - Material or financial incentives were not offered for completion of the survey
 - Participation in affordable care act (ACA) plans and expected family deductibles
 - Predictions on the impact of the Trump administration regarding healthcare access, quality and costs
 - The growing use and availability of digital technologies and their budget impact
 - Use and expectations for Value Based Contracting (VBC)
 - Cost Effectiveness Research (CER) uptake and use
 - Access to information and use of Evidence Based Medicine (EBM)
- Invitations to participate were sent to Medical and Pharmacy Directors working with US health plans, PBMs, and insurers from the TPG-NPRT database in November 2017
 - Survey invitations were received and reviewed by 247 managed care decision makers

RESULTS

- Most advisors expect their plans to continue to offer ACA-based plans in the future (Figure 1) with family deductibles shown in Figure 2
- The majority of advisors believe Trump Administration policies (Figure 3) will:
 - Decrease healthcare access
 - Increase healthcare costs
 - Either decrease or have no change on healthcare quality or prescription drug access
- In addition to covering traditional medical care and prescription drugs, health plans cover a variety of non-medical therapies (Figure 4)

Figure 1: % Participation in ACA

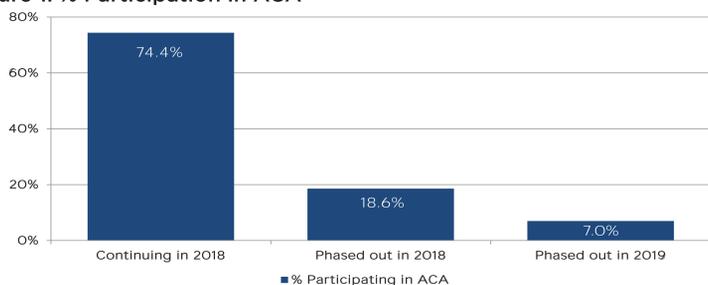


Figure 2: ACA Family Deductibles

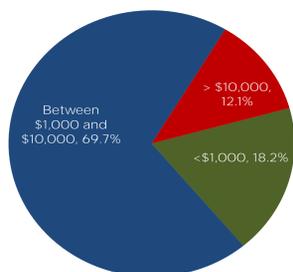


Figure 3: Predicted Impact of Trump Administration Policies

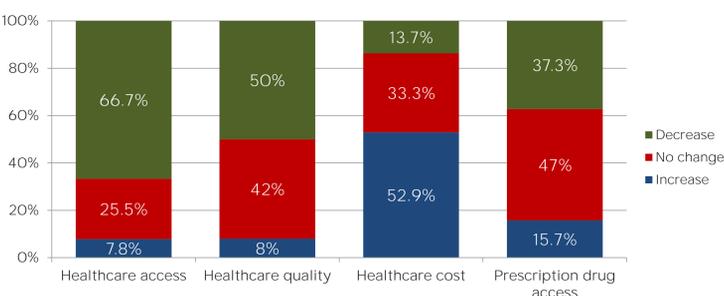
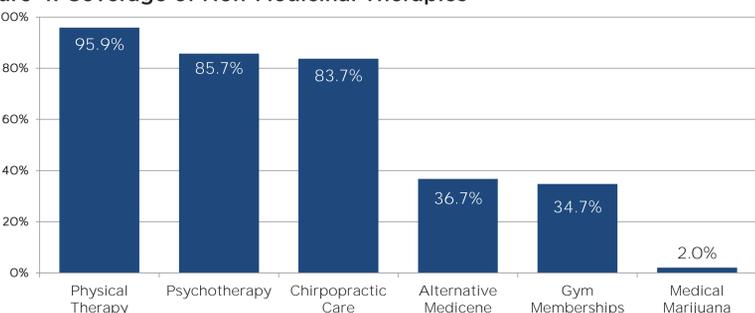


Figure 4: Coverage of Non-Medical Therapies



RESULTS CONTINUED

- The impact of Digital Health Technologies on health plan budget is expected to raise costs (22%), be budget neutral (60%) and decrease costs (18%), some categories where Digital Technologies will be used are shown in Figure 5 and some commonly used digital applications are shown in Figure 6

Figure 5: Digital Technology Use

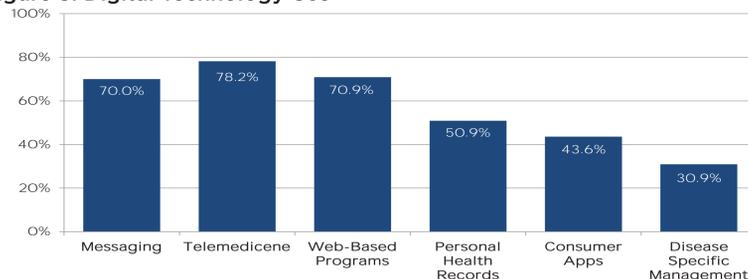
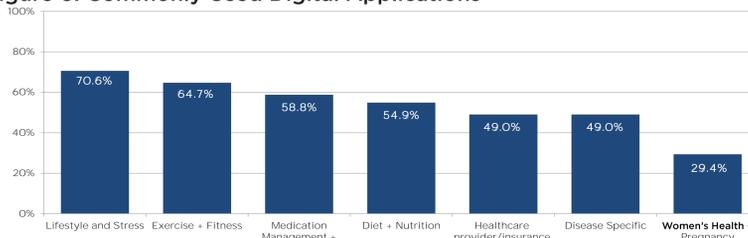
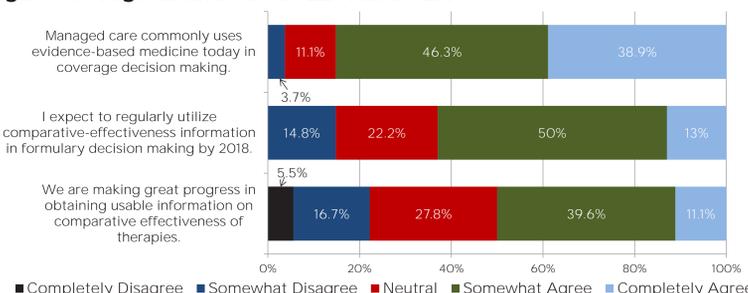


Figure 6: Commonly Used Digital Applications



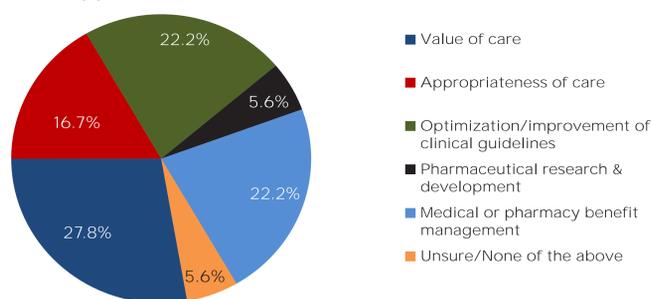
- Value Based Contracting is used by:
 - 45% of plans for services (14% across various services, and 31% in limited areas) and
 - 36.2% of plans for Pharmaceuticals
- The use of Value Based Contracting is expected to increase by 45% of plans, while 55% do not plan on using in 2018
- Disease areas that are using VBC for prescriptions include, but are not limited to, Oncology, Hepatitis-C, Multiple Sclerosis, Diabetes and Specialty Rx products
- Evidence Based Medicine (EBM) and Comparative Effectiveness Research (CER) progress is shown in Figure 7
 - 85% of respondent believe that Managed Care uses evidence based medicine (EBM) in coverage decision making
 - 63% expect to regularly use CER in formulary decision making this year
 - 50% believe we have usable information today for CER
 - CER is being applied to value of care decisions, clinical guidelines as well as medical and pharmacy benefit management

Figure 7: Progress and Use of EBM and CER



- The area of health care or health delivery expected to be most affected by emerging CER are shown in Figure 8

Figure 8: CER Applications



CONCLUSIONS

- With the rapidly shifting health care marketplace, politics and regulation are affecting payers' willingness to participate in the ACA
- Health plan coverage continues to cover most therapies. Medical Marijuana was mentioned as an alternative medicine consideration and will grow as FDA approved therapies enter the marketplace
- Digital Health tools offer more information and insights into care and are generally expected to be budget neutral
- Value based contracting is growing but slower than expected, 45% of respondents do expect this to increase
- CER and EBM continues as a promising tool but the quality of information still demands improvement

REFERENCES



Citation: Brook RA, Carlisle JA, Smeeding JE. Survey Results of Contemporary US Health Plan Policies - Affordable Care Act (ACA), Digital Technologies, Value Based Contracting (VBC) and Comparative Effectiveness Research (CER). *Value Health* 2018;21(Suppl1) Available at www.TPG-NPRT.com

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