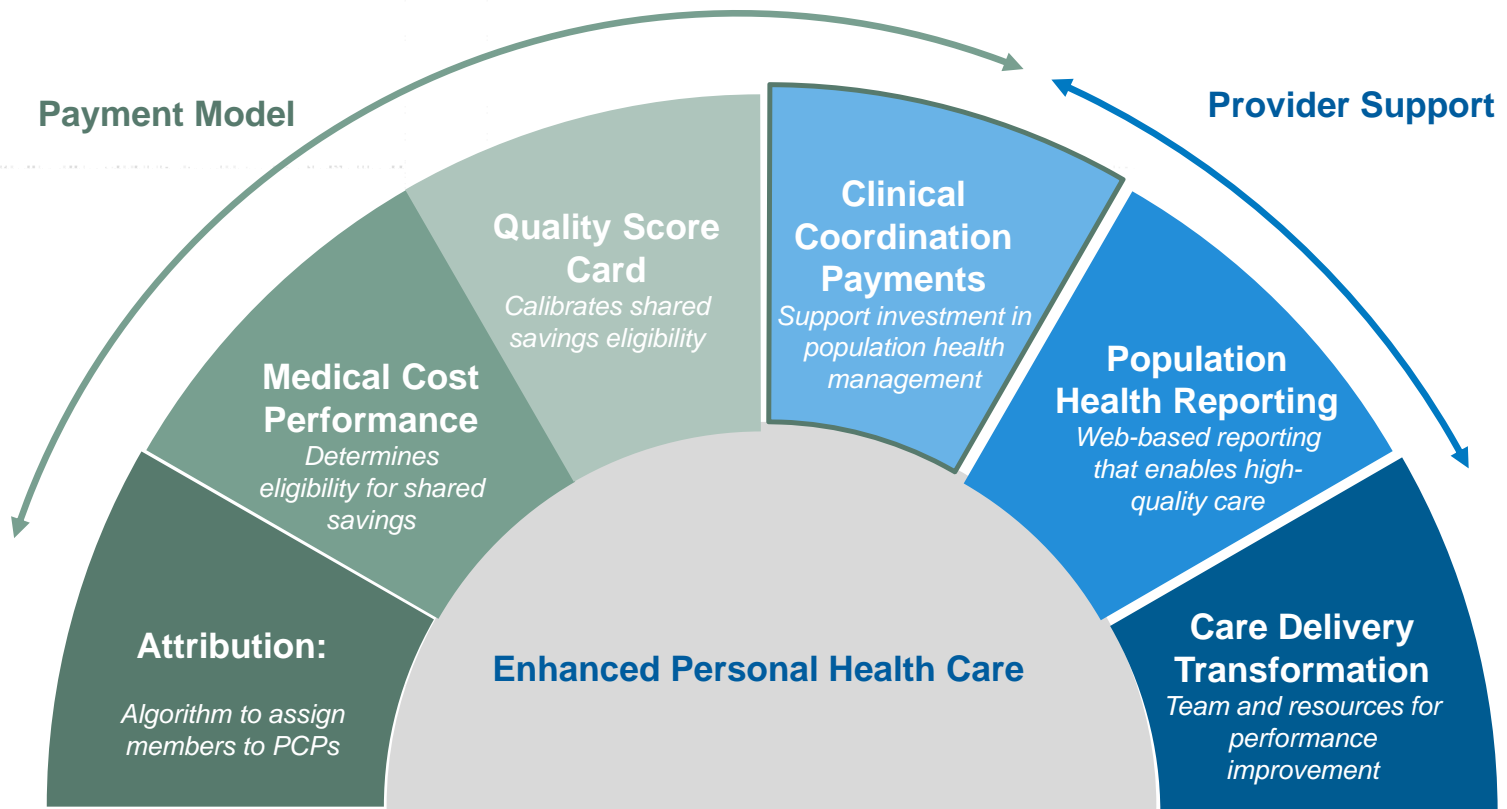


Anthem EPHC & PHP Prime

Working together to improve the lives of our patients through improved quality, improved patient/provider satisfaction, and reduced costs

Understanding the EPHC Model



Our success continues to deliver value

Colorado aggregate program results



Fewer members admitted to the hospital

- Lower inpatient cost
- **0.9%** fewer inpatient admits



Providers choosing preferred sites radiology

- Lower costs on radiology services
- **2.8%** lower utilization



Declining cost and utilization of inpatient surgical services

- Lower inpatient surgical costs
- **8.9%** fewer inpatient surgeries
- **9.3%** fewer surgical inpatient days



\$10.33 PaMPM (4.3%)
Gross savings through June 2016
\$8.64 net savings



Savings are the result of **changes in provider practice patterns** that significantly impact cost and utilization

Exchange of Information

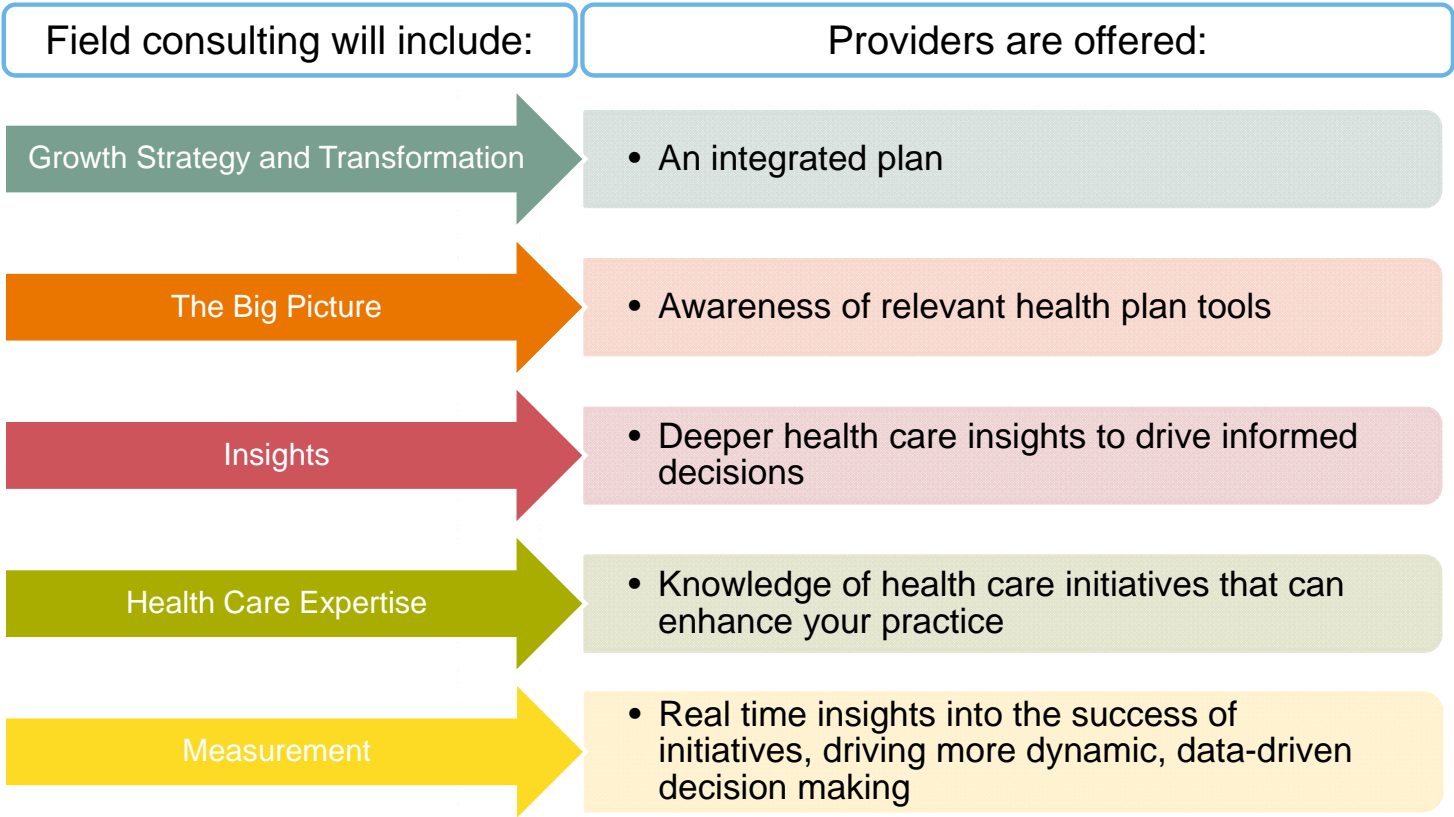
We will provide actionable analytic reports on:

- Avoidable ER use
- Gaps in care
- Attributed high-risk/high-cost members
- Lab Utilization
- Inpatient Utilization
- Ambulatory Surgery Site of Service

We will provide interpretive guidance

- The data and the tools you need to intervene, improving the health status of patients and reducing costs associated with avoidable ER visits, readmissions and other cost drivers.

Enhanced Personal Health Care Support Role: Care Consultant, Sr.



Training and Education



2017 Enhanced Personal Health Care Practice Transformation Learning Opportunities e-Catalog

The spirit of learning and collaboration is the spark that can ignite powerful change. To help you adopt patient-centered care model and fulfill participation requirements under Enhanced Personal Health we offer a wide range of learning opportunities that are designed to inform, inspire and support you. Your Transformation team can tell you more about any of the events described here and can help you get started with attending LIVE webinar events or viewing recorded ones.

recording	Medicare Risk Adjustment Documentation & Coding: Acute, Chronic and Status Conditions	CME credits: 1.0
February 7, 2018	Resource Allocation Strategies for Potentially Preventable ER Visits	
February 14, 2018	Primary Care Practice Roundtable: Completing Annual Visits to Closing Gaps in Care	
March 21, 2018	Medicare Risk Adjustment Documentation & Coding: Cardiovascular Conditions	CME credits: 1.0
March 29, 2018	Adult ADHD: Current Trends and Best Practice Treatment	CME credits: 1.0
April 18, 2018	Care Coordination Strategies to Support Effective Transitions of Care	CME credits: 1.0
May 9, 2018	Enhanced Personal Health Care Strategies for Reducing Cost of Care	
May 16, 2018	Medicare Risk Adjustment Documentation & Coding: Vascular Disease	CME credits: 1.0
June 13, 2018	Advance Care Planning and End of Life Care Discussions	CME credits: 1.0
June 27, 2018	Improving the Patient Experience using the QUEST Model	CME credits: 1.0
July 11, 2018	Motivational Interviewing in Primary Care	CME credits: 1.0
July 18, 2018	Medicare Risk Adjustment Documentation & Coding: Respiratory Disease	CME credits: 1.0
August 8, 2018	Primary Care Practice Roundtable: Utilizing Team-Based Care to Close Care Gaps	
September 13, 2018	Solid Buildings Need Strong Foundations: Setting-up Practice Infrastructure under Value-Based Contracting	CME credits: 1.0
September 19, 2018	Medicare Risk Adjustment Documentation & Coding: Diabetes	CME credits: 1.0
October 11, 2018	Integrating Clinical Pharmacists to Provide Medication Therapy Management	Approval Pending
November 8, 2018	Cognitive Behavioral Therapy for the Treatment of Chronic Pain	CME credits: 1.0
November 14, 2018	Medicare Risk Adjustment Documentation & Coding: Dependency	CME credits: 1.0

Medicare Risk Adjustment and Documentation Guidance

Monthly Provider Onboarding Training occurs once every month - CME credits: 1.0
 January 3, 2018 – February 7, 2018 – March 7, 2018 – April 4, 2018 – May 2, 2018 – June 6, 2018 – July 5, 2018
 August 1, 2018 – September 5, 2018 – October 3, 2018 – November 7, 2018 – December 5, 2018



Elements of success

Essential for success:

Active participation from physician groups

Take responsibility for transforming towards patient-centered care and achieving quality and utilization metrics

Utilize the reporting that is made available, such as the ER Report, Hot Spotter and Gaps in Care, etc...

PCP to act as the “quarterback” of the care management team and influence the downstream referrals

Attend learning collaboratives that are designed to help your practice succeed in the program

PHP and Anthem

Partner in the EPHC program since 2013

- Earned a shared savings 3 out of the 4 years
- Last year – 2016/2017 year earned over \$400k in shared savings
- Strong efforts underway for the year #5 –
 - Usual efforts in ER/IP; Behavioral Health, Quality, etc...
 - Creative partnerships in pilots to support our high cost/high needs patients

Collaboration leading to – win-win-win-win

- Better care for members and reduced cost of care for the patient
- Better financial and improved processes for the provider to deliver better care
- Positive impact to the Employer bottom line
- Positive impact to Anthem with improved care and lower cost

PHP & PHPprime

- Physician Health Partners (PHP)
 - Management Services Organization
 - Manages PHPprime and their contracts



- PHPprime

- Large Independent Practice Association with 69 primary care practice locations across the Denver metro area
- ~300 primary care providers (physician and mid-level)
- Serves roughly 380,000 patients in the metro area
- Covers ~24,000 Anthem Enhanced Personal Health Care Program members



Clinical Activities – Added Value



Care Coordination Team

- 1 RN Care Coordinator assigned to Anthem members
- 26 Care Coordinators to support practices
- 8 Care Coordination Specialists to help coordinate member care

- Newly discharged outreach to ensure member has no immediate care needs and has follow-up appointment with their PCP
 - Decreases the risk of re-admission
- High/avoidable ER utilizer counseling for alternative, lower cost sites and disease mgmt.
 - Outreach decreases repeat, avoidable visits
 - Discussions help member develop a plan of care with PCP
- Other high risk outreach examples: diabetes & behavioral health gaps in care closure
 - Ensures members have worked with their PCP and in-network specialist if required
 - Gaps in care closure improves overall wellness of members by promoting preventative measures known to improve quality
 - Referral back to Anthem Specialty Care Management for highest risk members (e.g. transplant, high risk maternity, etc.)

Ways to Promote Health to Employees

- Promote the importance of selecting a primary care physician during the open enrollment period
- Create a health care section in your company intranet where members can easily access available incentives, programs and basic benefit information
- Encourage prevention like mammograms, colorectal screening, annual wellness exams, immunizations, etc.
- Promote your Employee Assistance Program (EAP) for behavioral health wellness
- Educate employees on enhanced benefits driven by programs like EPHC
 - Enhanced care coordination availability
 - Physical & behavioral health
 - Efforts to improve overall wellness

Role of the Employer – Suggestions

- Educate employees to be empowered consumers of their own health – promote their role in their health care
- Educate employees of the enhanced services offered through choosing providers that are part of the EPHC program – such as care management, care coordination...
- Build benefit plans that promote low cost-high quality specialty providers and outpatient services such as outpatient surgery options; appropriate use of ER...
- Bring representatives from provider groups/Anthem during enrollment or other times of the year to support understanding the role of providers as their care team/"medical home" and promote PCP selection
- Create benefits/incentives for the employees that allows them to take a certain amount of paid time off to do preventive visits for themselves and their children – promote a work-life balance. This will support good mental/behavioral health which can lead to lower overall cost of care and improved quality

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