

Value-based Benefit Design Interventions

Worksite, Medical and Pharmaceutical

Recommended Actions for Employers

Cardiovascular diseases (heart disease and stroke) take a significant health and financial toll on Texas employers and their workforce. The estimated direct and indirect cost of CVD in the United States for 2009 is \$475.3 billion. But, employers can improve their workers' health and their company's bottom line.

The time to act is now. Specific actions you can take to reduce costs, absenteeism, presenteeism and improve morale are:

- Use value-based benefit design* to improve and/or reduce the risk of heart attacks and strokes by addressing key chronic conditions, including high blood pressure, high blood cholesterol, obesity, diabetes and smoking within the employee population.
- Actively promote and support use of these benefits to your employees and partner with them in improving their quality of life through better health.

This document provides a summary of recommended programs, medical procedures, pharmaceutical medications and value-based benefit design interventions that have been proven to control or reduce the health conditions and their associated costs.

***"Value-based Benefit Design" (VBBD) refers to improving employee health outcomes and productivity while better managing rising health care costs - - especially around high-cost, chronic diseases. Instead of trying to control and limit care, VBBD looks for ways to remove barriers to appropriate and effective care.**

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Worksite Programs and Value-based Benefit Design (VBBD) Interventions

When compiling the suggested worksite programs on physical activity, tobacco use, and worksite interventions, information was taken from “*The Guide to Community Preventive Services.*” *The Community Guide* can be located on the following website: www.thecommunityguide.org.

The recommendations made in *The Community Guide* are based on systematic reviews by the Task Force on Community Preventive Services.

	Programs	VBBD Interventions
High Blood Pressure	<p>Onsite biometric screening</p> <p>Health awareness and education programs</p> <p>Assessment of health risks with feedback to change employees health behaviors</p> <p>Self-management programs</p> <p>Physical activity:</p> <ul style="list-style-type: none"> • Point of decision prompts to encourage stair use • Creation of or enhanced access to places for physical activity combined with informational outreach activities • Individually-adapted health behavior change programs 	<p>Incent participation in assessment of health risks and participation in programs to control risk factors by:</p> <ul style="list-style-type: none"> • Reducing out-of pocket costs to participate in programs • Awarding leave • Awarding financial compensation • Providing recognition programs

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<p>High Blood Cholesterol</p>	<p>Onsite biometric screening</p> <p>Health awareness and education programs</p> <p>Assessment of health risks with feedback to change employees health behaviors</p> <p>Self-management programs</p> <p>Physical activity:</p> <ul style="list-style-type: none"> • Point of decision prompts to encourage stair use • Creation of or enhanced access to places for physical activity combined with informational outreach activities • Individually-adapted health behavior change programs 	<p>Incent participation in assessment of health risks and participation in programs to control risk factors by:</p> <ul style="list-style-type: none"> • Reducing out-of pocket costs to participate in programs • Awarding leave • Awarding financial compensation • Providing recognition programs
<p>Diabetes</p>	<p>Onsite biometric screening</p> <p>Health awareness and education programs</p> <p>Assessment of health risks with feedback to change employees health behaviors</p> <p>Self-management programs</p>	<p>Incent participation in assessment of health risks and participation in programs to control risk factors by:</p> <ul style="list-style-type: none"> • Reducing out-of pocket costs to participate in programs • Awarding leave • Awarding financial compensation • Providing recognition programs

	<p>Physical activity:</p> <ul style="list-style-type: none"> • Point of decision prompts to encourage stair use • Creation of or enhanced access to places for physical activity combined with informational outreach activities • Individually-adapted health behavior change programs 	
Smoking	<p>Health awareness and education programs</p> <p>Assessment of health risks with feedback to change employees health behaviors</p> <p>Self-management programs</p> <p>Onsite smoking cessation classes</p> <p>Promotion of state and national Quit Lines</p> <p>No-tobacco use policies and facilities</p>	<p>Incent participation in assessment of health risks and participation in programs to control risk factors by:</p> <ul style="list-style-type: none"> • Reducing out-of pocket costs to participate in programs • Awarding leave • Awarding financial compensation • Providing recognition programs • Promoting or supporting access to Quit Lines and development of quit plans
Obesity	<p>Health awareness and education programs</p>	<p>Incent participation in assessment of health risks and participation in programs to control risk factors by:</p>

	<p>Assessment of health risks with feedback to change employees health behaviors</p> <p>Self-management programs</p> <p>Onsite weight loss classes</p> <p>Nutrition policies for onsite vendors and company meetings</p>	<ul style="list-style-type: none"> • Reducing out-of pocket costs to participate in programs • Awarding leave • Awarding financial compensation • Providing recognition programs
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Medical Procedures and Value-based Benefit Design Interventions

The information on the clinical preventive services included in this document is adapted from the “*A Purchaser’s Guide to Clinical Preventive Services: Moving Science into Coverage.*” The *Purchaser’s Guide* can be located on the following websites:

www.businessgrouponhealth.org/prevention/purchasers/ and www.cdc.gov/business.

All of the recommendations made in the *Purchaser’s Guide* are based on science. Most of the recommendations in the *Purchaser’s Guide* were adapted from the U.S. Preventive Services Task Force, recognized as a gold standard in clinical preventive services recommendations.

The Health Issues identified are the top risk factors for and interventions to reduce heart disease and stroke.

Medical Procedures identified by an * were found to be cost-effective clinical preventive services by the National Commission on Prevention Priorities, a commission of the Partnership for Prevention. More information can be found at www.www.prevent.org.

Interventions are recommended to increase the use of cost effective services or practices. The term *First Dollar Coverage* is defined as insurance coverages or benefits that pay the entire covered amount without subtraction of or use of a deductible or co-payment for the following preventative care procedures. The intent of recommending *First Dollar Coverage* in this document is to incent that the patient and the provider are “made whole” for requesting and providing needed and cost-effective preventive services.

Health Issue	Current Procedural Terminology (CPT Code)@ 2009 American Medical Association	Medical Procedure Description	Value-based Benefit Design Intervention
*Aspirin for Primary Prevention of CVD Events (Counseling) – Counseling to discuss the benefits and harms of aspirin therapy.			
All beneficiaries aged 30 and older are eligible for one counseling session every five (5) years or whenever a cardiovascular risk factor is detected.			
	99401	Preventive medicine counseling/risk factor reduction, 15 minutes	<i>First Dollar Coverage</i> – e.g., reduced or no copay for patient, enhance fee for provider who provides counseling.
	99402	Preventive medicine counseling/risk factor reduction, 30 minutes	“

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	99403	Preventive medicine counseling/risk factor reduction, 45 minutes	“
	99404	Preventive medicine counseling/risk factor reduction, 60 minutes	“
<p>*Diabetes (Screening) – Fasting plasma glucose test (FBG); 2-hour post-load plasma glucose, oral glucose tolerance test (OGTT)</p> <p>Diabetes screening is a covered benefit for beneficiaries of any age with hypertension or hyperlipidemia (lipid disorders). Screening should be initiated whenever these conditions are diagnosed. Screening should be conducted, depending on risk, at least once every three (3) years, but not more than once during any calendar year.</p> <p>Coverage for diabetes screening among those at high risk for the disease is provided beginning at age 30, if medically indicated. Screening should be conducted at least once every two (2) years, but not more than once during any calendar year.</p> <p>Coverage for diabetes screening among individuals at normal risk for the disease is provided beginning at age 45, or earlier if medically indicated. Screening may be conducted once every three (3) years.</p> <p>Individuals with impaired glucose function diagnosed by any test listed in “covered screening methods” qualify for a second screen to verify disease status. The secondary screening should be conducted on another day in the same calendar month.</p>			
	82947	Glucose, blood (except reagent strip)	<i>First Dollar Coverage – e.g., reduced or no copay for patient, enhance fee for provider who provides targeted screening due to particular health risk factors (hypertension and hyperlipidemia)</i>
	82948	Glucose, blood, reagent strip	“
	82950	Glucose, post glucose dose	“
	82951	Glucose tolerance test, three (3) specimens	“
	82952	Glucose tolerance test, each additional specimen beyond three (3)	“
	82962	Glucose, blood, by monitoring device FDA-approved for home use	“
	99385	Initial preventive medicine evaluation and management, 18-39 years, new patient	“
	99386	Initial preventive medicine evaluation and management, 40-64 years, new patient	“

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	99395	Periodic preventive medicine evaluation and management, adolescent, (18 to 39 years), established patient	“
	99396	Periodic preventive medicine evaluation and management, adolescent, (40 to 64 years), established patient	“
*Healthy Diet (Counseling) – Intensive behavioral dietary counseling is covered for adult beneficiaries with hyperlipidemia (lipid disorders) and other known risk factors for cardiovascular and diet-related chronic diseases.			
Beneficiaries who meet the criteria for counseling are eligible for three (3) intensive (30-45 minute) counseling sessions per calendar year.			
	99402	Preventive medicine counseling/risk factor reduction, individual, 30 minutes	<i>First Dollar Coverage</i> – e.g., reduced or no copay to patient, enhance fee to dietitian, nutritionist, or specially trained primary care physician or nurse practitioner.
	99403	Preventive medicine counseling/risk factor reduction, individual, 45 minutes	
	99411	Preventive medicine counseling/risk factor reduction, group, 30 minutes	“
	99412	Preventive medicine counseling/risk factor reduction, group, 60 minutes	“
	98960	Education and training for patient self-management by a qualified, nonphysician healthcare professional using a standardized curriculum, face-to-face with the patient (could include caregiver/family) each 30 minutes, individual patient	“
	S9470*	Nutritional counseling, dietician visit	“
*Hypertension (Screening) – Conventional measure using an arm cuff and an appropriately validated aneroid (containing no liquid) or digital sphygmomanometer (blood pressure meter).			
Screening is a covered benefit for all children, adolescents, and adults and may be conducted as medically indicated.			
	CPT code not available		
Hypertension (Counseling, Treatment) – Covered treatment for hypertension includes: counseling to promote therapeutic lifestyle changes, office visits to monitor hypertension and treatment efforts, and medications used to treat hypertension.			

Six (6) counseling, treatment and monitoring sessions are covered per calendar year. Additional counseling sessions are covered, as medically indicated.			
Beneficiaries undergoing treatment with hypertension-lowering medications qualify for additional medication management visits, as medically indicated.			
	99401	Preventive medicine counseling/risk factor reduction, 15 minutes	<i>First Dollar Coverage</i> – e.g., reduced or no copay for patient, enhance fee for provider who provides counseling.
	99402	Preventive medicine counseling/risk factor reduction, 30 minutes	“
	99403	Preventive medicine counseling/risk factor reduction, 45 minutes	“
	99404	Preventive medicine counseling/risk factor reduction, 60 minutes	“
*Lipid Disorders (Screening) – 9-12 hour fasting lipoprotein profile of total cholesterol, low-density lipoprotein cholesterol, high-density lipoprotein, and triglycerides.			
Screening is a covered benefit for all adults aged 20 and older and may be conducted once every five (5) years, or as medically indicated.			
	82465	Cholesterol, serum or whole blood, total	<i>First Dollar Coverage</i> – e.g., reduced or no copay for patient, enhance fee for provider who provides screening.
	83721	Lipoprotein, direct measurement, LDL cholesterol	“
	83719	Lipoprotein, direct measurement, VLDL cholesterol	“
	83718	Lipoprotein, direct measurement, high density cholesterol	“
	84478	Triglycerides	“
Lipid Disorders (Counseling and Treatment) – Covered treatment for a lipid disorder includes: counseling to promote therapeutic lifestyle changes, office visits to monitor lipid disorders and treatment efforts, medications used to treat lipid disorders.			
Six (6) counseling, treatment and monitoring sessions are covered per calendar year. Additional counseling sessions are covered, as medically indicated.			
Beneficiaries undergoing treatment with lipid-lowering medications qualify for additional medication management visits, as medically indicated.			
	99401	Preventive medicine counseling/risk factor reduction,	<i>First Dollar Coverage</i> – e.g., reduced or

		15 minutes	no copay for patient, enhance fee for provider who provides counseling.
	99402	Preventive medicine counseling/risk factor reduction, 30 minutes	“
	99403	Preventive medicine counseling/risk factor reduction, 45 minutes	“
	99404	Preventive medicine counseling/risk factor reduction, 60 minutes	“
	99385	Comprehensive preventive services, 18-39 years, new patient	“
	99386	Comprehensive preventive services, 40-64 years, new patient	“
	99387	Comprehensive preventive services, 65+ years, new patient	“
	99395	Comprehensive preventive services, 18-39 years, established patient	“
	99396	Comprehensive preventive services, 40-64 years, established patient	“
	99397	Comprehensive preventive services, 64+ years, established patient	“
			“
			“
			“
			“
*Obesity (Screening) – Screening for obesity is a covered benefit and may include measurements and calculations relating to body mass index (BMI) and waist circumference.			
Screening is a covered benefit for all beneficiaries aged 2 and above once per calendar year. More frequent screening is covered, if medically indicated.			

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	99420	Administration and interpretation of health risk assessment instrument	<i>First Dollar Coverage</i> – e.g., reduced or no copay for patient, enhance fee for provider who provides screening.
Obesity (Counseling) – Intensive counseling (Two (2) or more person-to-person individual or group sessions per month, for at least three (3) months) is a covered benefit for beneficiaries aged 18 and older who meet criteria for obesity (BMI>30).			
Six (6) counseling sessions are covered per calendar year. Additional sessions are covered, if medically indicated.			
	99401	Preventive medicine counseling/risk factor reduction, 15 minutes	<i>First Dollar Coverage</i> – e.g., reduced or no copay for patient, enhance fee for provider who provides counseling.
	99402	Preventive medicine counseling/risk factor reduction, 30 minutes	“
	99403	Preventive medicine counseling/risk factor reduction, 45 minutes	“
	99404	Preventive medicine counseling/risk factor reduction, 60 minutes	“
	99411	Preventive medicine counseling/risk factor reduction, group, 30 minutes	“
	99412	Preventive medicine counseling/risk factor reduction, group, 60 minutes	“
	98960	Education and training for patient self-management by a qualified, nonphysician health care professional using a standard curriculum, face to face with the patient (could include caregiver/faculty) each 30 minutes, individual patient	“
*Tobacco Use Treatment (Screening) – Healthy Pregnancy – Screening for tobacco use is a covered benefit for all pregnant women.			
There is no maximum limit on screening during pregnancy, provided that the care is medically indicated.			
	99420	Administration/interpretation health risk assessment instrument	“
Tobacco Use Treatment (Counseling) – Healthy Pregnancy – Smoking Cessation counseling (5 to 15 minute sessions) is a covered benefit for all pregnant women who smoke. Counseling may be conducted during individual face-to-face office visits, in a group setting, or by telephone.			
Pregnant women who screen positive for tobacco use should be advised to quit at every medical encounter. There is no maximum number of counseling sessions for eligible pregnant women.			
	99401	Preventive medicine counseling/risk factor reduction,	“

		15 minutes	
	99402	Preventive medicine counseling/risk factor reduction, 30 minutes	“
	99403	Preventive medicine counseling/risk factor reduction, 45 minutes	“
	99404	Preventive medicine counseling/risk factor reduction, 60 minutes	“
	99406	Smoking and tobacco use cessation counseling visit; intermediate, greater than 3 minutes up to 10 minutes	“
	99407	Smoking and tobacco use cessation counseling visit; intensive, greater than 10 minutes	“
	99078	Physician educational services in a group setting	“
	S9075*	Tobacco use treatment	“
	S9453*	Tobacco cessation classes; non-physician provider, per session	“
*Tobacco Use (Screening) - Screening for tobacco use is a covered benefit beginning at age 18. Coverage is provided for younger populations depending on risk and need.			
Screening may be conducted at every clinical encounter.			
	99420	Administration/interpretation health risk assessment instrument	<i>First Dollar Coverage – e.g., reduced or no copay for patient, enhance fee for provider who provides screening.</i>
Tobacco Use (Counseling) - Brief counseling (in-person) and intensive counseling (in-person or over the telephone) are covered benefits for tobacco use treatment.			
Beneficiaries who meet criteria are eligible for two (2) courses of six (6) counseling sessions per calendar year			
	99401	Preventive medicine counseling/risk factor reduction, 15 minutes	<i>First Dollar Coverage – e.g., reduced or no copay for patient, enhance fee for provider who provides counseling.</i>
	99402	Preventive medicine counseling/risk factor reduction, 30 minutes	“
	99403	Preventive medicine counseling/risk factor reduction, 45 minutes	“
	99404	Preventive medicine counseling/risk factor reduction, 60 minutes	“
	99406	Smoking and tobacco use cessation counseling visit;	“

		intermediate, greater than 3 minutes up to 10 minutes	
	99407	Smoking and tobacco use cessation counseling visit; intensive, greater than 10 minutes	“
	99078	Physician educational services in a group setting	“
	S9075*	Smoking cessation treatment	“
	S9453*	Tobacco cessation classes; non-physician provider, per session	“
Tobacco Use (Treatment) – All FDA-approved nicotine replacement products and tobacco cessation medications are covered.			
Medications are covered as prescribed by a clinician.			
	CPT code not applicable		<i>First Dollar Coverage</i> – e.g., reduced or no copay for patient, enhance fee for provider who provides prescription.
* Colorectal Cancer (Screening) – Colorectal cancer screening is a covered benefit for men and women aged 50 and older. Screening may be initiated at an earlier age if the beneficiary has certain risk factors and a clinician determines that the individual requires early screening.			
	45378	Colonoscopy	<i>First Dollar Coverage</i> - ex.- reduced or no copay for patient.
	45330	Sigmoidoscopy, flexible	“
	82270	Fecal occult blood for colorectal neoplasm screening, by peroxidase activity, consecutive collected specimens with single determination	“
	82274	Blood, occult, by fecal hemoglobin determination by immunoassay, qualitative, 1-3 simultaneous determinations	“
Contraceptive Use (Counseling)			
	99384	Initial preventive medicine evaluation and management, adolescent (12-17 years), new patient	Offer employees no out-of pocket expenses for long-acting reversible contraception products.
	99385	Initial preventive medicine evaluation and management, 18-39 years, new patient	“
	99386	Initial preventive medicine evaluation and management, 40-64 years, new patient	“
	99394	Periodic preventive medicine evaluation and management, adolescent, (12 to 17 years), established	“

		patient	
	99395	Periodic preventive medicine evaluation and management, adolescent, (18 to 39 years), established patient	“
	99396	Periodic preventive medicine evaluation and management, adolescent, (40 to 64 years), established patient	“

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Pharmaceutical Medications and Value-based Benefit Design Interventions

The information on the pharmaceuticals included in this document is adapted from the “*A Purchaser’s Guide to Clinical Preventive Services: Moving Science into Coverage.*” The *Purchaser’s Guide* can be located on the following websites: www.businessgrouponhealth.org/prevention/purchasers/ and www.cdc.gov/business.

Interventions are recommended to increase the use of cost effective services or practices. The term *First Dollar Coverage* is defined as insurance coverages or benefits that pay the entire covered amount without subtraction of or use of a deductible or co-payment for the following preventative medications. The intent of recommending *First Dollar Coverage* in this document is to incent that the patient and the provider are “made whole” for requesting and providing needed and cost- effective preventative services.

The “\$4 per month” plans for chronic disease medications offered by large chain pharmacies offer an opportunity for cost-savings to the employer and the employee. An analysis of past year expenditures for the chronic disease (e.g., cholesterol, hypertension, dyspepsia) drug classes by specific drug will describe opportunities for cost-savings. Working with a medical/clinical health professional will help employers to review each high-cost drug and determine if there are effective generics available in that class. The employer can determine if providing employee incentives for the “\$4 per month” drugs could enhance value while maintaining the same effectiveness. The decision whether to switch drugs is entirely between the employee and their provider. Incentives earned through HRA or other wellness activities can be used to reduce the out-of-pocket costs to the employee.

	Medications	VBBD Interventions
High Blood Pressure	Thiazide-type diuretics Angiotension-converting enzyme inhibitors Angiotension-receptor blockers Beta blockers Calcium channel blockers	<i>First Dollar Coverage</i> Tiering Inform employees to talk with their doctor about their pharmaceutical needs. Offer employees no out-of pocket expenses for chronic condition medications covered under the \$4 per month programs.
High Blood Cholesterol	Statins	<i>First Dollar Coverage</i> Tiering Inform employees to talk with their doctor about their pharmaceutical needs. Offer

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		employees no out-of pocket expenses for chronic condition medications covered under the \$4 per month programs.
Diabetes	Anti-Hypertensives Lipid-lowering therapy Metformin Glycemic control	<i>First Dollar Coverage</i> Tiering Inform employees to talk with their doctor about their pharmaceutical needs. Offer employees no out-of pocket expenses for chronic condition medications covered under the \$4 per month programs.
Smoking	FDA-approved over the counter and prescription nicotine replacement products (e.g., gums, patches, lozenges, inhalers, nasal sprays) FDA-approved tobacco cessation prescription medications (e.g., bupropion and varenicline)	<i>First Dollar Coverage</i> Tiering Offer employees no out-of pocket expenses for tobacco cessation (both OTC and prescription) products.
Obesity	FDA-approved medications (e.g., Orlistat Sibutramine)	<i>First Dollar Coverage</i> Tiering
Other: Contraception Use	The full range of Food and Drug Administration (FDA) approved contraceptive are covered including: <ul style="list-style-type: none"> • All hormonal medications (e.g., pills and patches) including emergency contraceptives • All contraceptive devised (e.g., IUD, 	Offer employees no out-of pocket expenses for long-acting reversible contraception products.

	diaphragm, Vaginal ring) <ul style="list-style-type: none">• Voluntary sterilization (e.g. vasectomy, tubal ligation)	
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