



SALGBA Challenge Winning Programs Highlights

Sarasota County, FL

Sarasota County's idea for change was to transform our health and wellness program from a traditional model where core benefits are offered without regard to the specific needs of the employee population to one that utilizes health data to create a customized program aimed at addressing the highest cost drivers while empowering employees and dependents to take personal responsibility for their health and lifestyles. The premise is that by tailoring the program to meet the current needs of the population, the overall well-being of members would be enhanced and costs would be mitigated.

One of our major rationales for a targeted program is related to the demographics of the area. Sarasota is well known as the cultural capital of Florida. Home to numerous theatres and museums, Sarasota is also the location of some of the top beaches in the country. It is frequently named as one of the top places to retire in the country. Not surprisingly, therefore, the median age of Sarasota County's population is 53.3, twelve years higher than the state's population and almost sixteen years higher than the national median age. Sixty percent of the County's population is over the age of 45 ((SCOPE), 2015).

Sarasota County Government's workforce is comprised of approximately 3,500 full-time employees. Like the community it serves, the workforce is a more mature population. The current average age of employees participating in the County's two medical plans is 47.6-year-old. Therefore, the member population has a higher incidence of chronic conditions and age related diseases.

City of Austin, TX

The City of Austin wanted to increase adherence to employee walking programs and help the multitude of dogs at its no-kill shelters. The City of Austin employee wellness program, HealthyConnections, hosts a variety of free fitness classes to all City employees including several walking classes. A study by R.A. Johnson and R.A. Meadows (2010) found that walking a "loaner" dog increased adherence to walking programs. HealthyConnections wished to create a win-win situation by increasing adherence to employee walking programs and getting shelter dogs outside and exercising. By walking the dogs weekly, the shelters hope to acclimate the animals to people and help them become more adoptable. The solution was to create the Trail Dogs PE class.

Employees Retirement System of TX

HealthSelect, like most employer-based plans across the nation, has historically paid claims under a traditional “fee-for-service” (FFS) reimbursement strategy. Growing evidence has shown that paying providers “per service” creates incentives for them to over-prescribe. FFS in general rewards specialists, who prescribe more diagnostic tests and perform more procedures, rather than primary care doctors, who focus more on patient wellness and low-cost preventive care. In 2008, the average HealthSelect member was 51 years old, retiree enrollment was growing exponentially, and the annual health care cost trend was 9.1%. Half of HealthSelect participants over the age of 50 had high blood pressure, and half of participants with diabetes were not taking their medication as prescribed. ERS began to explore ways to leverage its power in the marketplace to transform not only how HealthSelect providers were paid, but also how their patients experienced health care. We believed that rewarding provider groups for improving upon how they coordinated care for their patients would ultimately result in better health outcomes and lower health care costs. Political support for the concept grew, and in 2009, the Texas Legislature authorized ERS to establish alternative health care payment programs in the GBP based on quality-of-care standards and evidence-based best practices. By 2013, ERS had negotiated performance-based payments with four large, clinically-integrated multi-specialty practice groups that agreed to operate as Patient-Centered Medical Homes (PCMH) for their HealthSelect patient populations. We paid the PCMH projects an upfront care coordination fee to invest in supportive infrastructure (like electronic health records), in addition to its regular FFS payments. And, if the PCMH practice could cut the health care cost trend in half for the population it served, while meeting agreed-upon clinical performance measures, it could receive shared-savings payments. Now nearly 10% of the HealthSelect population is benefiting from the enhanced coordinated care available at HealthSelect PCMH projects across the state.