Joint Commission on Health Care October 2017 Meeting

Steve Herrick, PhD – Director of Health Services



Reports to the General Assembly

Require the Department of Corrections to prepare and submit an annual report to the Governor and the General Assembly detailing the operations and expenditures for the entire state prison system's health care system. The report should include trend analysis of expenditures, trend analysis of the prison population including disease and illness profiles, new programs and services implemented and future plans.

- Review of High Medical Cost Offender; due October 1, 2017
- Health Care Cost Assessment Report; a review of Best Practices and Cost Containment Methods; submitted July 1, 2016
- Summary of Health Care Models; submitted September 30, 2015



Presentations

Require the Department of Corrections to prepare and submit an annual report to the Governor and the General Assembly detailing the operations and expenditures for the entire state prison system's health care system. The report should include trend analysis of expenditures, trend analysis of the prison population including disease and illness profiles, new programs and services implemented and future plans.

- August 17, 2017 Presentation to Senate Finance & House Appropriation Staff Analysts (Offender Healthcare)
- June 15, 2017 Presentation to Senate Finance Committee (Opioid Impact to Healthcare & Department)
- January 27, 2016 Presentation to House Appropriations Committee (included Offender Healthcare)
- January 28, 2015 Presentation to House Appropriations Committee (included Offender Healthcare)
- January 12, 2015 Presentation to Senate Finance Committee (included Offender Healthcare)
- September 8, 2014 Presentation to Senate Finance & House Appropriation Staff Analysts (included Offender Healthcare)



Peer-to-Peer Program

Require the Department of Corrections to implement disease management programs within all of the department's facilities for diseases where there are established best practice models available. The department should explore the opportunity of establishing a comprehensive peer-to-peer program for incarcerated offenders where offenders can assist each other in managing their illnesses.

- Virginia Budget Bill HB 1500 Item 393 #1c
 - Report due on high cost offenders to recommend
 - Peer to peer programs
 - Grant requests for programs like ECHO
- VADOC currently has chronic care clinics to manage diseases and have physician peer to peer reviews to monitor care



Actuary

Require the Department of Corrections to hire an independent actuary to annually establish per-memberper-month benchmark reimbursement rates for inmates where the health care is provided by a vendor.

- VADOC contract with Anthem Blue Cross and Blue Shield as a third party administrator of medical claims. The contract provides data in an annual report showing:
 - Per member per month (PMPM) cost and usage trends against Anthem's commercial accounts
 - Analysis of high cost claimant medical usage
 - Actuarial projections of future expenditures



Pharmaceuticals

Explore all opportunities to partner with the Department of Behavioral Health and Development Services and VCUHS for the purchasing of pharmaceutical products through the multi-state purchasing agreements already in place and/or through the use and expansion of the 340B program.

• VCUHS

- Previously obtaining HIV medications
- Added Hepatitis C, Hemophilia & Specialty/Biologic medications
- Cost avoidance of over 7 million
- MMCAP
 - VADOC previously an MMCAP member and purchasing vaccines & OTC products from MMCAP
 - Fully executed agreement signed on September 7, 2017 between MMCAP and VADOC to purchase prescription filling services from Diamond Pharmacy.
 - This contract change will allow DOC to access drugs at acquisition cost, as was done previously, with a reduced filling fee avoiding around \$200,000 in spend per year.

