

City of New Haven Health Incentive Plan (HIP)

Objective:

The City Of New Haven has developed an employee health incentive program that encourages their medical benefit participants to obtain appropriate preventive care screenings, recommended by age and gender, in an effort to promote healthier lifestyles and enable employees and health care providers to identify potential health issues that may impact the quality of life for the employee and require immediate treatment planning.

Overview:

A. Primary Care Physician (PCP) Designation

Members must designate a PCP for themselves and their spouse

- a. Enhanced Personal Health Care (EPHC) PCPs provide member with lower office visit copay
- b. Non-EPHC PCPs: Standard member copay amount

B. Preventive Health Measures

Members are encouraged to comply with specific preventive health measures:

Preventive Screening / Service	Age / Gender	Frequency Required
Preventive Screening	18 +; Male & Female	Annual
Glucose Screening	18 +; Male & Female	Annual
Cervical Cancer Screening	21 +; Female	Every 3 years
Dental Cleaning	All ages; Male & Female	Annual
Breast Cancer Screening	40 +; Female	Baseline at age 40
Colorectal Cancer Screening	50 +; Male & Female	Baseline at age 50
Prostate Cancer (PSA)	50 +; Male	Baseline at age 50

C. Chronic Health Conditions Compliance

Members with the following chronic health conditions who are identified to participate in Anthem's ConditionCare disease management program must actively participate in program:

- Asthma
- Diabetes
- COPD
- CAD
- Heart Failure

D. Penalty Assessed

Employees who do not participate in the program, or who participate and fail to comply with the requirements of the plan, will be required to contribute an additional monthly fee as follows:

Single coverage	\$50 per month
Two-person coverage	\$75 per month
Family coverage	\$100 per month

Additional Program Details are on following page.

HEALTH INCENTIVE PLAN PROGRAM DETAILS

Under the Health Incentive Plan (HIP) the member will be required to:

1. **Designate a PCP.**

Each covered individual will have to identify a doctor as their personal physician with Anthem. You may find the PCP Provider number by contacting your physician, or by looking it up online at Anthem.com.

2. **Have the recommended preventative screenings** and/or physical examination with a physician as is age and gender appropriate, including:

- Annual Biometric screenings, BMI, glucose, blood pressure & cholesterol (for most members this is part of the annual physical)
- Cervical cancer screening for females over 21 every 3 years
- Baseline mammogram for females over 40
- Baseline colonoscopy for all after 50
- Prostate screening for males over 50
- At least one routine dental checkup and cleaning annually

3. **Chronic Health Compliance**

Members who have been identified with certain chronic health conditions must participate in the ConditionCare Disease Management program. Compliance is based solely on participation, for example, does the member take the phone call from the nurse case manager who will monitor medication usage and the like. It is **not** based on any clinical outcome.

More particularly, members are identified based on clinical data by Anthem, and then they are contacted by a case manager from Anthem, who reviews their treatment and medication, etc. to help insure they are managing their condition properly. Please note that ConditionCare is already part of your plan today. Members with these diseases are already being contacted. All the HIP does is require them to take the phone call and interact with the case manager and not ignore the call as sometimes happens today.

4. **Penalty if Non-Compliant**

Compliance will be tracked on a calendar year basis, then it will take several months to contact those not in compliance before instituting the penalty payment the following July 1st. It will work as follows:

The City will begin tracking HIP compliance beginning with the start of the next calendar year. The City will receive data from Anthem in February for the previous calendar year and contact all those not in compliance. They would then have until June to get in compliance or furnish documentation that they were already in compliance. Those that do not, would begin paying the additional monthly medical deduction in July. They will pay that additional fee for each month they remain non-compliant; as soon as they are in compliance, however, the additional fee will be removed.

The penalty will be an additional monthly charge for medical of Single coverage: \$50 / Two Person coverage: \$75 / Family coverage: \$100. It does not matter how many items you are in non-compliance on, one or more, the penalty is the same. The member can appeal the penalty. More importantly, they will have been notified several times in writing prior to any penalty being implemented. The City will review for compliance annually on a calendar year basis. Any penalties will not be assessed until the following July 1st.

No member will ever be fined for following the advice of their doctor. The ConditionCare program and the nurse case manager are only involved to reinforce what the doctor is advising, not replace it.