2009 Innovations Awards Program
APPLICATION

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ID # (assigned by CSG): 09-S-39WV

Please provide the following information, adding space as necessary:

State: West Virginia

Assign Program Category (applicant): Health & Human Services (Use list at end of application)

1. Program Name

Improve Your Score (IYS)

2. Administering Agency

West Virginia Public Employees Insurance Agency (PEIA)

3. Contact Person (Name and Title)

Nidia Henderson, Health Promotions Director

4. Address

601-57th Street, SE, Suite 2 Charleston, WV 25304-2345

5. Telephone Number

(304) 558-7850 ext 52639

6. FAX Number

(304) 558-4969

7. E-mail Address

Nidia.L.Henderson@wv.gov

8. Web site Address

www.wypeia.com/www.peiapathways.com
9. Please provide a two-sentence description of the program.

Members are eligible to receive a cash reward of $50 or $25 based on results of their PEIA Pathways to Wellness screening. Total cholesterol, blood pressure, glucose, and body mass index (BMI) are measured and the numerical results are converted to a green or healthy range ($50), yellow or moderate risk range ($25), or red or high risk range (zero reward) reading.

10. How long has this program been operational (month and year)? Note: the program must be between 9 months and 5 years old on March 2, 2009 to be considered.

This program has been operational for eleven months since April 2008.

11. Why was the program created?

IYS was created to establish a member health report card. PEIA believes it will increase member participation in the health screens, increase member awareness of their risk factors for chronic diseases, demonstrate the member’s health trends over time, and reward members for good outcomes. What problem[s] or issue[s] was it designed to address? With West Virginia leading the nation in chronic diseases, such as diabetes, cardiovascular disease, obesity, etc., IYS was designed to encourage members to “know their numbers” as well as to encourage them to maintain or improve their health status. The average length of time members are covered under PEIA is nineteen years. PEIA insures one in eight West Virginians. Thus, PEIA can potentially be the insurer of state residents from “cradle to grave” or throughout a person’s lifetime.

12. Describe the specific activities and operations of the program in chronological order.

- PEIA wanted to implement a health report card to encourage members who were healthy to stay healthy or at a minimum prevent members with abnormal values from worsening.
- The Medical Director, members of the Clinical Unit, and PEIA Director determined the four measures that would be easiest to measure were: total cholesterol, blood pressure, glucose, and body mass index (BMI).
- PEIA already offered various lab screenings at worksites throughout the state via the PEIA Pathways to Wellness program and the Health Promotion Consultants.
- The Clinical Unit worked on the development of the forms, calculations for the results, and policy for the IYS program.
- The vendor (beBetter) for the PEIA Pathways to Wellness screenings was given the requirements for the program.
- The Clinical Unit and General Counsel researched whether a monetary reward was legal.
- The Health Promotions Director worked with the WeSave program and beBetter for a mechanism to provide the cash to the member.
- The first few months the cash reward was in the form of a VISA card produced by the WeSave program. However, members did not realize what the card was for and threw them away. Since there was not a way to track a card to a specific member,
PEIA changed the process to have beBetter send the member a check which would have a specific check number associated with a particular member.

13. Why is the program a new and creative approach or method?

To our knowledge PEIA is one of the first public payors to actually reward members with a cash incentive based on their health status. Through IYS members are eligible each year to collect either the same or increased monetary reward based on the results of their screenings. PEIA has had a premium differential for members who use tobacco since the year 2000. However, this is the first PEIA program to actually pay the member cash. PEIA is exploring the possibility of tying a premium differential or reduced deductible to participation with the IYS program.

14. What were the program’s start-up costs? (Provide details about specific purchases for this program, staffing needs and other financial expenditures, as well as existing materials, technology and staff already in place.)

The health screenings were already provided at the worksites at a cost of $30 per participant. Promotional materials were developed, printed, and circulated through the worksite program. The initial order of IYS materials were $1430 for 2000 posters and $3000 for 25,000 IYS cards. Oversight of the program is included in the duties of the PEIA Health Promotions Director which already existed and no new staff for the actual screenings was necessary.

15. What are the program’s annual operational costs?

$1250/month color printer for the IYS cards to members; total reward payout April to December 2008 was $315,774 or approximately $35,086/month. There were 12,563 members screened during this period. This amount is expected to increase as the program grows. This does not include the screening cost of $30 per participant.

- $1,250 x 12 = $15,000
- $35,086 x 12 = $421,032
- Estimated 16,751 participants x $30 = $502,530
- Estimated Annual Total = $938,562

16. How is the program funded?

The IYS program is funded through the PEIA Wellness budget. PEIA is a self-insured insurance plan funded by Special Revenue from the State of West Virginia budget which gets its money from both employee and employer premiums or contributions.

17. Did this program require the passage of legislation, executive order or regulations? If YES, please indicate the citation number.

There was no legislation, executive order, or regulation required to allow PEIA to administer the IYS program.

18. What equipment, technology and software are used to operate and administer this program?
The Health Promotion Consultants have a scale, tape measure, blood pressure cuff, and phlebotomists to perform venipunctures at the PEIA Pathways to Wellness screenings. There is a color-coded report mailed to the member and their designated physician of their results. (enclosed) BeBetter produces the checks that are mailed to the members. Results are passed to PEIA through the vendor, beBetter, which will form the basis for the forthcoming intervention strategy.

19. To the best of your knowledge, did this program originate in your state?

This program, as PEIA administers it, originated in West Virginia. If YES, please indicate the innovator’s name, present address, telephone number and e-mail address. Members of the development team are: Ted Cheatham (PEIA Director) extension 52625, ted.m.cheatham@wv.gov; Shelda Martin, MD (PEIA Medical Director) extension 52604, shelda.a.martin@wv.gov; Nidia Henderson (PEIA Health Promotions Director) extension 52639, nidia.i.henderson@wv.gov; Felice Joseph (PEIA Pharmacy Director) extension 52643, felice.b.joseph@wv.gov; Gloria Long (PEIA Deputy Director of Member Services) extension 52647, gloria.j.long@wv.gov; Tanya Cyrus (PEIA Manager of Healthcare Compliance and Quality Assurance) extension 52670, tanya.c.cyrus@wv.gov. The mailing address is 601 – 57th Street, SE, Suite 2, Charleston, WV 25304-2345.

20. Are you aware of similar programs in other states? If YES, which ones and how does this program differ?

Shortly after PEIA began this program we became aware of a similar program administered by the State Employees Insurance Board of Alabama (Alabama public employees). Our understanding of the Alabama program is it is a multi-year program. The first year employees are required to participate in a worksite screening in order to not receive a premium increase. The second year employees are required to enroll in a program or visit their primary care physician to assist them with any deficiencies in their screening results in order to not receive a premium increase. Coincidentally, both state programs selected the same four measures to collect.

21. Has the program been fully implemented?

It is PEIA’s intention to offer a subset of members receiving yellow and red scores both verbal and written intervention from a nurse or life-style behavior coach. PEIA will compare the one-year follow up screenings of the members who received the intervention to members who did not receive any intervention in order to determine if the intervention has an impact on outcomes. If NO, what actions remain to be taken? The intervention piece remains. PEIA will select random intervention and cohort arms in order to compare the results at end of the first year.

22. Briefly evaluate (pro and con) the program’s effectiveness in addressing the defined problem[s] or issue[s]. Provide tangible examples. CON:

(1) PEIA has received some criticism on using the total cholesterol level rather than the LDL (low density lipoprotein) levels as a measurement since some argue LDL is a better predictor of cardiovascular disease than total cholesterol. PEIA is considering a revision of this parameter; (2) Actively working policyholders are primarily the
participants at the PEIA Pathways to Wellness screenings. Thus, PEIA does not get significant participation from dependents and retired employees and their dependents; (3) Potential lawsuits regarding this program are always a possibility. PRO: (1) The cash incentive has definitely increased the participation in the PEIA Pathways to Wellness screenings. There were an additional 2,292 members that participated in the PEIA Pathways to Wellness screenings in the months of April to December 2008 compared to April to December 2007; (2) IYS has increased the number of worksites participating in the PEIA Pathways to Wellness screens by over one-hundred new worksites. This is probably driven by requests from employees.

23. How has the program grown and/or changed since its inception?

There were an additional 2,292 PEIA members participating in the PEIA Pathways to Wellness screenings from the previous year since the cash reward has been in place. Also, the mechanism for payment of the cash reward has changed from a VISA card to a check as described above.

24. What limitations or obstacles might other states expect to encounter if they attempt to adopt this program?

As previously mentioned, there is potential for lawsuits from advocacy groups. States may have difficulty getting a screening mechanism in place with sufficient capacity if they do not already have a Wellness program or vendor. Another potential challenge is the often distorted or inaccurate perception of the program as it is reported in the media.
2009 Innovations Awards Program
Program Categories and Subcategories

Use these as guidelines to determine the appropriate Program Category for your state’s submission and list that program category on page one of this application. Choose only one.

*Infrastructure and Economic Development*
- Business/Commerce
- Economic Development
- Transportation

*Government Operations*
- Administration
- Elections
- Public Information
- Revenue

*Health & Human Services*
- Aging
- Children & Families
- Health Services
- Housing
- Human Services

*Human Resources/Education*
- Education
- Labor
- Management
- Personnel
- Training and Development
- Workforce Development

*Natural Resources*
- Agriculture
- Energy
- Environment
- Environmental Protection
- Natural Resources
- Parks & Recreation
- Water Resources

*Public Safety/Corrections*
- Corrections
- Courts
- Criminal Justice
- Drugs
- Emergency Management
- Public Safety

Save in .doc or rtf. Return completed application electronically to innovations@csg.org or mail to:

CSG Innovations Awards 2009
The Council of State Governments
2760 Research Park Drive, P.O. Box 11910
Lexington, KY 40578-1910

Contact:
Nancy J. Vickers, National Program Administrator
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This application is also available at www.csg.org, in the Programs section.

**Deadline: March 2, 2009**