State of Arkansas

### **BLR Review**

### **Introductory Meeting and Project Review**

June 2021 / Patrick Klein and Matthew Kersting





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**Data Request** 

**Cost Components** 

**Segal's Planned Approach/Timeline** 

**2022 Proposed Changes** 

Questions

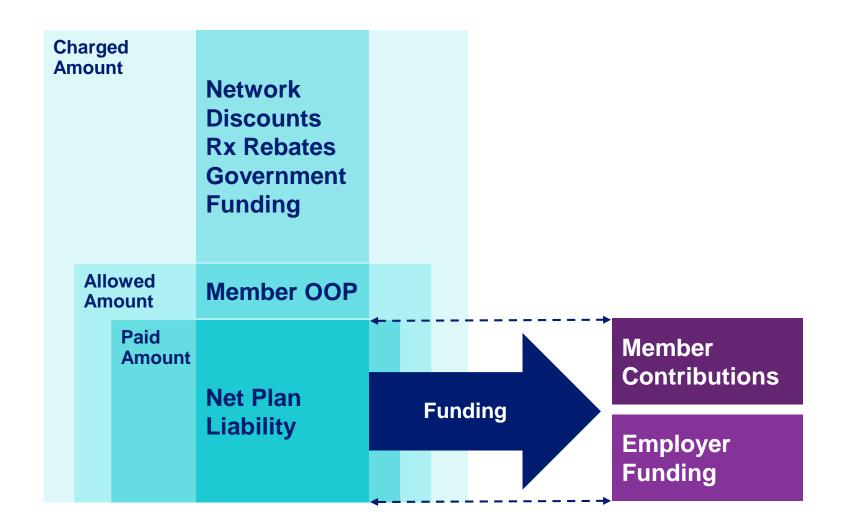
## Data Request

Segal has been working with BLR and EBD to secure necessary data in order to perform the analysis, including:

	Status		
Data	Pending	Received	Partially Received
Detailed individual claims information	✓		
Individual eligibility files	✓		
Network information			
Pharmacy		$\checkmark$	
Medical		$\checkmark$	
Financial Information			
Vendor utilization reports	✓		
Historical contributions and premium rates		$\checkmark$	
Historical claims/enrollment reports by plan/tier			$\checkmark$
Cash flow details for 2018, 2020, YTD 2021			✓
Retiree medical actuarial valuation report	$\checkmark$		
Miscellaneous			
Medical/Pharmacy contracts	$\checkmark$		
Plan communications		$\checkmark$	
Local laws impacting benefits		$\checkmark$	
Details on point solutions		$\checkmark$	
Prior consultant reports		$\checkmark$	

## **Cost Savings Levers**

- Charged Amount Reduced by improved health, utilization mix
- Allowed Amount Reduced by maximizing vendor efficiencies
- Paid Amount Reduced by lowering reducing value of plan design



## Timeline

Segal plans to analyze information and work with BLR to review findings over the coming months as we develop final report/recommendations

We anticipate the following roadmap contingent upon data:



In certain months, multiple meetings may be needed.



# July Meeting

July will focus on history of the program and savings opportunities related to vendors

#### **Historical Review**

- Benchmarking
- Plan history
- Review of past deficits and causes

#### **Savings Opportunities**

- Network savings analysis does the current vendor drive the best overall discounts in the area
- Contract review are there opportunities related to contract terms that can lower overall costs
- Retiree opportunities is the plan taking advantage of money government subsidies (e.g., EGWP, Medicare Advantage)



Vendor savings will focus on controlling top line costs, rather than shifting costs to participants.

# August Meeting

August will take a deeper dive into the claims and enrollment data to review strategies related to plan design, contributions, and clinical programs

#### Plan design/contributions

- Review of actuarial value
- Plan selection/loss ratios
- Alternative plan/contribution approaches
- Multi-year projection with prescribed funding triggers

#### **Clinical Review**

- Cost drivers and point solutions
- Network approaches
- Social determinants



## Focus will turn within the plan to strategies to improve utilization of the program and overall health of the population.



# September/October Meeting

In September, we plan to review/revise any prior considerations and work toward the development of final recommendations

#### September

- Review/update considerations based on feedback
- Explore any new options requested by BLR
- Work toward development of final recommendations

#### October

 Segal will present final recommendations to BLR based on feedback throughout the summer



### Will extend beyond October if requested by BLR

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## 2022 Proposed Changes

#### At the June 1 Board Meeting, the following changes were approved for State Employees

These changes are projected to reduce close the funding gap by \$33.9M, resulting in a small projected surplus for FY2022

Active contributions increased by 5%	Pre-65 contributions increased by 5%	Wellness credit reduced from \$50 to \$25 per month
Non-wellness credit of <b>\$25</b> added for actives	Required wellness visit through physician to earn <b>Credit</b>	Monthly State Funding increased from \$450 to \$500 (August 2021)

While savings projected seem reasonable, they are short term fixes in nature. Larger changes will be required in order to create a sustainable program.

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