

A network diagram with a central heart icon containing an ECG line. This central node is connected by dotted lines to several other circular nodes, each containing a white healthcare-related icon. The icons include: a first aid kit, a stethoscope, two pills, an ambulance, a laboratory flask, a person with a stethoscope, test tubes, a virus/cell, a heart, a bed with a cross, a globe, a no-smoking sign, a water drop, a city skyline, a telephone with a cross, and an eye. The background is a dark blue gradient with faint, larger-scale ECG lines and circular patterns.

A High-Performance Health Plan Solution



THE POWER OF PARTNERSHIP. **HEALTH CARE REIMAGINED.**

Did you
know?

Every dollar spent on primary care services saves three dollars on downstream care on average

CASE STUDY:

Moving to High-Performance

BACKGROUND:

Employer saves health care plan

A 1,200-employee Wisconsin-based employer was facing a 40% increase in costs from their existing health plan.

Employer introduced the BHCG-Centivo affordable, high-performance, primary care-driven plan on January 1, 2022 for all employees in eastern Wisconsin. For employees outside of eastern Wisconsin, coverage was offered through Centivo-administered use of Cigna network providers.

RESULTS:

83%

83% of employees enrolled in the \$0 deductible value network

\$3+ million

\$3+ million in targeted savings guaranteed through favorable stop loss insurance rates

30%

Employer paid Medical + Rx PMPM is 30% below industry benchmark

58%

58% more preventive visits for members in the BHCG-Centivo plan compared to members in the broad network plan



Health insurance coverage preserved and employees given strong benefits options



REIMAGINING HEALTH CARE

Health care has become unaffordable for employers, employees and their families. Significant differences exist in cost-effectiveness among health care providers – often without any correlation to quality.

Too many health plan members are medically homeless – without a primary care provider to help them navigate the health care system and make better health care decisions. Current provider payment models do not reward physicians and health care systems for higher quality care or lower costs. The status quo is simply unsustainable.



Driving Positive Change

To address these significant issues in our health care system, BHCG and Centivo have developed the first high-performance, primary care-centered health plan solution throughout Wisconsin.

At last, a solution that offers employer-aligned health plan administrative services and network contracting focused on:

- Increased health care value – both quality and cost efficiency
- Better consumer/provider health care decisions
- Full transparency

BHCG/ CENTIVO PARTNERSHIP BENEFITS



- A stronger, more direct employer voice with health systems and provider groups

- Access to high quality health care and administrative services at predictable costs

- BHCG pre-negotiated, highly competitive and fully transparent administrative fees

- Flexibility to offer different health plan options and networks alongside a statewide high-performance network

"We are excited BHCG and Centivo partnered to bring about positive health care changes in Wisconsin. Centivo's commitment to finding the best and most efficient care through Wisconsin's first high-performance health plan solution aligns with our strategic goals to impact the unaffordability of health care."

– Dan Velicer, Vice President,
Global Benefits, Kohler Co.

HOW DOES IT WORK?

- 1 | Members choose a high-performing PCP through an easy-to-use mobile app, member portal or phone call
- 2 | Specialist referrals are guided by the PCP who is armed with data to direct patients to high-performing specialists
- 3 | Members get a much better health plan experience with predictable costs and a trusted PCP guide to help them navigate through the complex health care world



A Unique High-Performance Option

Deliver high quality, affordable health care to employees and their families

- **Foster more effective relationships between patients and providers** by directing patients to high value providers
- **Foster more effective relationships between patients and providers** by directing patients to demonstrated high value primary care physicians and their teams to maximize good patient management (performance identified through robust analyses of statewide provider claims data)
- **Participate in a far more sustainable cost picture** through direct partnership with providers that yields a more effective use of financial resources – a win-win for employers, plan members, health systems and providers

"I think our employees are attracted to having a primary care physician directing their care. That is something that's important, having someone that really knows you and your history, and has a better understanding of you holistically."

– Lisa Mrozinski, Director of Total Rewards, Baird



Accountability for All

Offer a cost effective, competitive benefits program with high levels of patient satisfaction

- **Member/primary care engagement** – members select a high-performing in-person or virtual physician and receive a trusted guide through the system, a better benefits program and predictable costs
- **Provider accountability** – primary care physicians take responsibility for optimal patient care management – and are rewarded for their performance
- **Health systems are incentivized to encourage cost efficiency** in exchange for larger volume



Support From the Ground Up

Replace the functions of a traditional carrier with a solution that fully supports employers

- **Outstanding member experience** with an app and portal, hands-on member service and year-round communications
- **Robust network options and employer-chosen benefit design** including broad-based and high-performance network solutions, additional statewide (Health Payment Systems) and national (Cigna) networks for multi-site employers and the flexibility to structure benefits to encourage PCP access and health management
- **Best in class TPA services** with sophisticated claims management, utilization and case management, integrated pharmacy with PBM programs and discounted stop loss rates and a level-funded option
- **Employer support** including data analytics, implementation and account management
- **Identification of high value physicians** for employers with onsite or near-site clinic provider staff to refer patients in need of additional services

"The high-performance health plan solution was developed to bring lower cost, high quality health care to working Americans who still struggle to pay their health care bills."

– Ashok Subramanian,
Founder & CEO, Centivo



Proven Savings Through High Value Care

Changes in how members seek out and access medical services result in significant savings for employers and their teams.*

35% increase in primary care visits

8% decrease in inpatient admits

17% decrease in ER visits

23-36% average savings in total cost of care

*Comparing Centivo Wisconsin clients' 2022 health care spend analysis to Artemis Health's nationally recognized industry benchmark

BHCG Mission Statement:

The Business Health Care Group leverages member employer purchasing power and knowledge to lead change. We create value through innovative shared strategies to improve health care quality and cost efficiency for employers, employees and the community.

BHCG-Centivo Mission Statement:

The Business Health Care Group and Centivo use the power of partnership to reimagine health care. They offer employers and employees a sustainable cost model and more effective patient-provider relationships.

THE POWER OF PARTNERSHIP.
HEALTH CARE REIMAGINED.



CENTIVO.

Want to learn more?

Contact Jeffrey Kluever,
Business Health Care Group

262.875.3312

jkluever@BHCGWI.org

Visit **www.BHCGWI.org**