



health + productivity at work



Meaningful Employer Information or Data Overload?

June 23, 2021 10:00 AM – 1:30 PM PT

Purchasers are inundated with data about their health care spending – from health plans, pharmacy benefit managers, behavioral health organizations, absence management and other suppliers. This meeting will tap into actionable information to inform benefit design decision-making, vendor selection and meaningful measures. COVID-19 has impacted both access and utilization, while contributing to greater focus on health equity.

Additional information, including the presentations, can be found at: https://www.ibiweb.org/information-or-overload-event/





10:00 – 10:05 AM PT	Welcome & Introduction	Kelly McDevitt, President, Integrated Benefits Institute	
10:00 – 10:40 AM PT What Purchasers Want to Know	 A Health Value Index for Performance reporting for accountability Improving data for benefit decisions Hiding in plain sight – fraud, waste and abuse Getting to actionable data to support health equity and reduce disparities in health care Moderator: Emma Hoo	Gerri Burruel, Senior Advisor Purchaser Business Group on Health George Murphy, former SVP, Total Rewards, HR Technology and Operations, Lincoln Financial Group Alice Chen, MD, MPH, Chief Medical Officer, Covered California	
10:40 – 11:20 AM PT Promoting Health Equity	 Leveraging race/ethnicity data to insights and action Using data to improve quality Partnering to improve outreach and engagement Moderator: Emma Hoo	Deb Friesen MD, MBA, FACP Physician Advisor, Customer Clinical Solutions Kathryn Elder, Senior Consultant, Customer Analytics & Reporting, Kaiser Permanente	
11:20 – 11:30 AM BREAK			
11:30 – 12:15 PM PT COVID Impact on Health Care Utilization and Cost	 National and state COVID trends COVID impact on utilization and preventive care Avoiding health care waste Is pent-up demand real? What purchasers can expect in 2021-2022 	Jennifer Fino, Director UnitedHealthcare Center for Advanced Analytics Niall Brennan, MPP, President & CEO, Health Care Cost Institute	

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Moderator: Kelly McDevitt



Susan Pantely, FSA, MAAA

Principal & Consulting Actuary, Milliman









12:15 - 12:50 PM PT

COVID's Silver Lining: Expanded Behavioral Health through Telehealth • Expanding access

• Measuring outcomes in telebehavioral health

• Impact on workplace productivity

• Optimizing patient experience

Heidi Greenberger PhD, MPH Vice President, Clinical Research AbleTo

12:50 – 1:25 PM PT

The Future of Health Care Analytics for Employers Using data to support decision-making and selection of behavioral health and wellness addon services

• Taking action to improve your data

• Leveraging non-traditional sources of data

Moderator: Kelly McDevitt

Moderator: Rachel Brodie

Grant Gordon, Co-Founder & CEO Artemis Health

Mike McNamara, Data Scientist Artemis Health

Patrick Wendel, Product Analytics Manager, Portico Benefit Services

1:25-1:30 pm Wrap-Up Kelly McDevitt

Speakers



Niall Brennan, BA, MPP President and CEO, Health Care Cost Institute

Niall Brennan is the President and CEO of the Health Care Cost Institute. In this role, he is responsible for overseeing HCCI's overall research agenda that seeks to highlight trends in US health care spending and the factors behind those trends. Niall also works to maximize the reach of HCCIs data by licensing directly to leading academic researchers and through HCCIs role as a Medicare certified Qualified Entity. Niall works closely with federal and state policymakers, including the US Congress on key health policy issues. He is a nationally recognized expert in health care policy, the use of health care data to enable and accelerate health system change, and data transparency. He has published widely in leading academic journals, including the Journal of the American Medical Association, the New England Journal of Medicine and Health Affairs. Prior to joining HCCI, Niall was Chief Data Officer at the Centers for Medicare and Medicaid Services (CMS). He has also worked at the Brookings Institution, the Medicare Payment Advisory Commission, the Congressional Budget Office, the Urban Institute, and PricewaterhouseCoopers.

Niall received his MPP from Georgetown University and his BA from University College Dublin, Ireland.



Rachel DuPré Brodie Senior Director of Measurement and Accountability, Purchaser Business Group on Health

Rachel DuPré Brodie is Senior Director of Measurement and Accountability at PBGH. Rachel manages PBGH's Patient-Reported Outcomes Measurement work, which seeks to incorporate patient-centered and patient-reported outcomes measures into care and payment. She also oversees the Patient Assessment Survey (PAS), which annually measures patient-reported experience at the medical group level. Both initiatives advance one of PBGH's key strategies to accelerate transparency by publicly reporting health care ratings, educating the public about health care value, supporting consumer choice and helping to drive improvement in health care.

Previously, Rachel managed the California Joint Replacement Registry, a statewide initiative to collect and report scientifically valid data on the results of hip and knee replacement surgeries, including device safety and effectiveness, postoperative complication and revision rates, and patient-reported outcomes. Rachel also worked with the California Office of the Patient Advocate to develop its consumer quality report card and contributed to the PBGH Consumer Tools Assessment, which reviewed web-based consumer decision support tools.

Rachel received her AB from Princeton University.



Gerri Burruel
Senior Advisor,
Purchaser Innovation
and Engagement,
Purchaser Business
Group on Health

Gerri Burruel is Senior Advisor, Purchaser Innovation and Engagement at the Purchaser Business Group on Health (PBGH). Using her broad benefits strategy and design experience, Gerri engages PBGH members on health transformation initiatives and efforts to advance value and accountability. Most recently, she was Vice President of Employee Benefits at McKesson Corp., where she also served as a member of PBGH's Board of Directors. Previously, she directed benefits at Longs Drugs, Stanford University and Safeway Inc.

Speakers



Alice Huan-mei Chen, MD, MPH, Chief Medical Officer, Covered California

Dr. Alice Hm Chen is chief medical officer at Covered California, the state's health insurance marketplace, which actively works to ensure that Californians can find affordable, high quality coverage. In this role she is responsible for health care strategy focused on quality, equity, and delivery system transformation with the goal of improving health services provided through Covered California's contracted health plans in service of improving access and outcomes for all Californians.

Prior to joining Covered California, Dr. Chen served as deputy secretary for policy and planning and chief of clinical affairs for the California Health and Human Services Agency (CHHS). She led many of the Agency's signature health policy initiatives on affordability and access, and played a leadership role in the state's response to the COVID-19 pandemic in the areas of strategic reopening, hospital surge planning, equity, data analytics and therapeutics.

She has a long history of leadership in enhancing access and quality of care for vulnerable communities through patient care, teaching, policy and advocacy, delivery system innovation, and administrative leadership across a variety of settings, including community health, philanthropy and academia. Dr. Chen spent 15 years on the faculty of the University of California San Francisco School of Medicine based at Zuckerberg San Francisco General Hospital, where she served as its chief integration officer and founding director of the eConsult program. She subsequently served as inaugural chief medical officer and deputy director for the San Francisco Health Network, where she was responsible for providing clinical and operational leadership, vision, and direction for the City's \$2 billion a year publicly funded delivery system encompassing primary, specialty, mental health, substance use, acute care, trauma, long term, jail health, and homeless health care services.

Dr. Chen has published over 50 book chapters, research and peer-reviewed articles, including in the New England Journal of Medicine, JAMA and Health Affairs. She has served on the board of several non-profits and foundations, and currently serves as board president of The Health Initiative. In 2019, she was elected to the Harvard University Board of Overseers. A graduate of Yale University, Stanford University Medical School, and the Harvard School of Public Health, Dr. Chen's training includes a primary care internal medicine residency and chief residency at Brigham and Women's Hospital. She is an alumna of the Commonwealth Fund Harvard University Fellowship in Minority Health Policy, the Soros Physician Advocacy Fellowship, the California Health Care Foundation Leadership Program and the Aspen Institute's Health Innovators Fellowship.

Proficient in Mandarin and Spanish, she maintains an active primary care practice at Zuckerberg San Francisco General Hospital and holds an appointment as clinical professor of medicine at UCSF.



Kathi Elder Senior Consultant, National Customer Analytics & Reporting Permanente

Kathi is a Senior Consultant in National Customer Analytics & Reporting area for Kaiser Permanente. Kathi has nearly 30 years experience in the health care industry, working with self funded and fully insured customers and brokers on Population Health Management solutions through Integrated Health Systems Wisconsin and California. Prior to joining Kaiser Permanente in 2011, she held the position of Health Care Manager for a large global organization, responsible for the health benefits of over 20,000 employers and their families, leveraging data and engagement strategies in an effort to reduce overall health care trends.

Kathi received her Bachelor of Science degree from Northern Michigan University in Business Management/Communications.



Jennifer Fino Director of Center for Advanced Analytics, UnitedHealthcare

Jennifer Fino is Director of UnitedHealthcare's Center for Advanced Analytics™. Jennifer launched her career in the health care industry with a focus on large employer pre-sale opportunities and competitive intelligence. Her career with UnitedHealthcare began in 2004 where she advanced her focus on health care cost trends, affordability and analytics for our clients. It was in this capacity that Jennifer's expanding expertise in analytics and passion for advancing progress toward better member health care decisions led her to UnitedHealthcare's Center for Advanced Analytics. Drawing on our big data, Jennifer collaborates with our clients to help them deliver custom analytics, interventions and a benefit strategy intended to maximize optimal health care outcomes for employees and their families.

Jennifer is a graduate of the University of Connecticut, where she received a Bachelor of Science Degree in Health Systems Management.

Speakers



Deb Friesen, MD, MBA, FACP Physician Advisor, Customer Clinical Solutions, National Sales and Account Management Kaiser Permanente

Dr. Deb Friesen is an Internal Medicine physician who trained at the University of Colorado, including a Chief Residency year. She was in private practice for 11 years before joining Kaiser Permanente 14 years ago. As part of the Colorado Permanente Medical Group she was on the Board of Directors for 5 years, and was Board Chair for two of those years.

She has partnered with National Accounts for twelve years, telling the story of Kaiser Permanente's integrated care and coverage model to C-suite executives, articulating the KP Value Proposition as demonstrated by utilization data, clinical data outcomes, and customer analytics. She also consults and presents on wellness and workplace health, chronic care management, preventive and maintenance care, medication adherence, and behavior change, to customers and in numerous conference settings.

Dr. Friesen recently joined us full-time in National Sales and Account Management. She is a Fellow of the American College of Physicians (the professional society of Internal Medicine) and recently graduated with honors with her MBA through the University of Denver



Grant GordonCEO & Co-Founder
Artemis Health

Grant Gordon is one of Artemis Health's founders, and he draws on deep experience in design, user research, software engineering, and data analysis. Prior to Artemis, he also co-founded EnticeLabs, an online advertising optimization company, and RationalIUX, a software user experience design firm. He is passionate about empowering employers to fix healthcare through data access and analytics. Artemis Health offers the tools employers, consultants, and brokers need to find insights and take action with their benefits data.



Heidi Mochari Greenberger, PhD, MPH Vice President, Clinical Research AbleTo

Heidi Mochari Greenberger, PhD, MPH leads Clinical Research at AbleTo. In this capacity, she guides program evaluation and development research with a focus on innovative and evidence-based methods with clinical and public health relevance. Dr. Greenberger has over 20 years of experience in the design, execution, and dissemination of clinical and epidemiological research in hospital, academic, and business settings; the heart of her work is dedicated to overcoming disparities in disease prevention through interventions at the intersection of behavioral and physical health.



Emma Hoo Director, Value Based Purchasing Purchaser Business Group on Health

Emma Hoo directs several initiatives for PBGH that promote effective health management, improved behavioral health care, and provider accountability. Emma has led joint purchasing initiatives and performance measurement initiatives for California HMO services, as well as retiree coverage, Pharmacy Benefit Management and disease management services. She has also evaluated and implemented data analytic solutions on behalf of large purchasers to improve health care performance reporting. Emma has authored papers on provider network management and design, payment reform, consumer-directed health plans, ACOs and quality reporting requirements for health insurance exchanges.

Emma received her AB from Harvard University.



Kelly McDevitt
President,
The Integrated
Benefits Institute

Kelly McDevitt is President of The Integrated Benefits Institute.

Prior to IBI, Kelly served as National Vice President, Enterprise Strategic Accounts, at United Healthcare leading the Center for Advanced Analytics- a specialized analytics team focused on deep research and innovation. In addition, she led the Collaborative Ventures Group which partnered with employer coalitions such as Health Action Council, Equity Healthcare, Employers Health and Berkshire Hathaway. Prior to United Healthcare, Kelly was with Aetna for 29 years where she served in various client management and strategic leadership roles.

Speakers		
	Mike McNamara Data Scientist Artemis Health	As a Data Scientist, Mike McNamara is responsible for delivering advanced modeling, statistics, and analytics to solve pressing benefits problems and uncover the answers to major questions that help organizations make sound decisions. He has over 10 years of healthcare experience in health systems and leading analytics efforts in population health, care management, and accountable care organizations.
	George Murphy Founder Murphy Strategy Group	George A. Murphy is the founder of the Murphy Strategy Group. The firm helps executives develop or refine their strategic vision in benefits and compensation with a focus on healthcare. Murphy brings a wealth of business experience and a successful track record of designing and leading benefit and compensation systems that drive business results, which is critical to companies long-term success. Prior to founding Murphy Strategy Group he served as the Senior Vice President of Total Rewards, HR Technology and Operations for Lincoln Financial Group. He was an Executive Committee Board Member, Co-Lead of the Strategic Advisor Group and Co-lead of the Data Committee for the Health Transformation Alliance. He is an Advisor to the American Health Policy Institute. Prior to joining Lincoln Financial Group, Murphy was the Chief Human Resource Officer and SVP at Ametek. Earlier in his career, he held increasingly responsible leadership roles with AstraZeneca Pharmaceuticals, The Scotts Miracle-Gro Company, Lanxess, Georgia-Pacific Corporation, BHP Copper, PECO Energy, Travelers Mortgage Services, and Glaxo SmithKline Corporation. He holds BS and MBA degrees from Thomas Jefferson University and a Masters of Science degree in Human Resources Leadership from Rutgers University. He has also completed the Strategic Human Resources Program
	Susan Pantely, FSA, MAAA Principal & Consulting Actuary Milliman	at Harvard University. Susan Pantely is a principal and consulting actuary in the San Francisco office of Milliman. Susan provides actuarial and consulting services to a broad range of clients including Blue Cross/Blue Shield plans, HMOs, commercial insurers, government agencies and healthcare providers. Her work includes rate development, provider contract review, reserve certification, capitation development, Medicare risk feasibility studies, HMO start-ups, HMO due diligence, and development of risk sharing and reimbursement arrangements for physician groups, PHOs, ACOs, and other integrated delivery systems. In addition, Susan has extensive experience with valuation, financial analysis, and projection of healthcare services for several state public health insurance (Medicaid) programs.



several state public health insurance (Medicaid) programs.

Prior to rejoining Milliman in 2002, Susan worked at Andersen LLP and Ernst & Young, LLP.



Patrick Wendel **Product Analytics** Manager Portico Benefit Services

Patrick Wendel is the Product Analytics Manager at Portico Benefits Services. Patrick manages the healthcare claims data warehouse for Portico. He serves and an analytic expert to provide data analysis and program assessments using eligibility, medical and pharmacy data, trends, utilization, and population risk. In addition, he is responsible for healthcare data modeling to anticipate and or meet the needs of the Portico benefits team.

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ABOUT PURCHASER BUSINESS GROUP ON HEALTH

PBGH's <u>Member organizations</u> – private employers and public agencies – are the most powerful voice for consumers and patients in the U.S. PBGH's approach is to use the clout and concentrated power of our Member organizations to test innovative healthcare methods in specific markets, and then to take successful approaches to scale across the U.S. PBGH also uses educational forums, user groups, and networking events to maximize our Members' impact.

Today, PBGH's <u>28 professional staff members</u> are dedicated to the success of <u>major PBGH programs</u>, each of which promises to further PBGH's important mission and vision. For additional information, please visit <u>pbgh.org</u> and follow us on <u>Twitter and LinkedIn</u>.



ABOUT INTEGRATED BENEFITS INSTITUTE

The Integrated Benefit Institute's independent research, industry-leading tools and data resources help companies link health-related programs to the outcomes that maximize the contributions of people to productivity and business performance. Founded in 1995, IBI is a national nonprofit research organization and business association serving 1,200 employer and supplier members and their 22 million employees. For additional information, please visit ibiweb.org and follow us on Twitter and LinkedIn.



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