

Driving Quality: Rewarding Performance

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The Big Picture

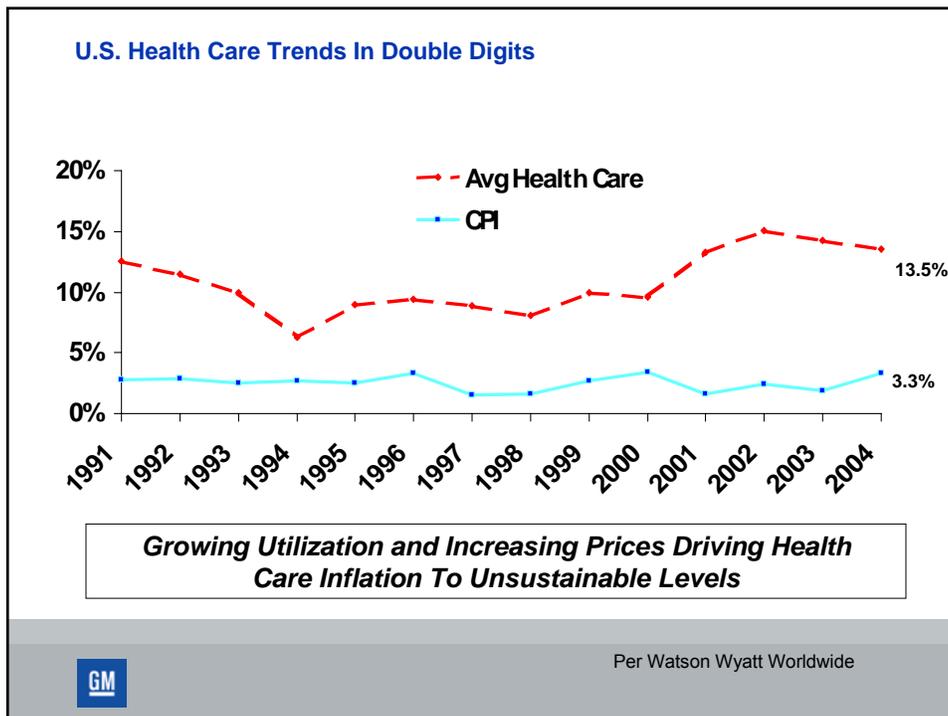
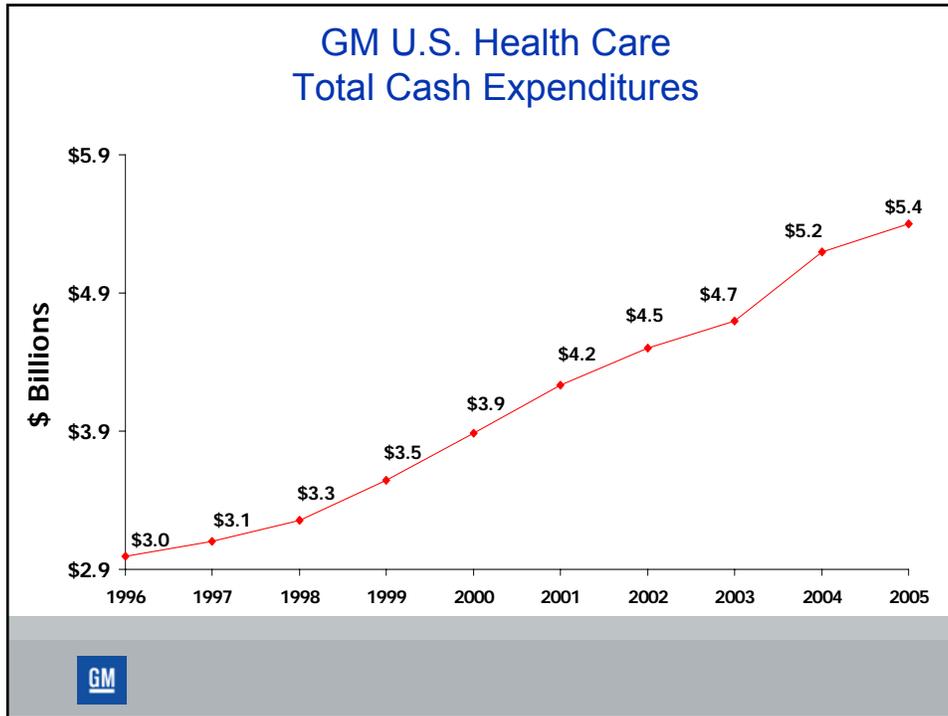
General Motors is the largest private purchaser of health care in the United States

- 1.1 million employees, retirees & dependents
 - 30 percent in fully insured HMOs
 - Older population with two retirees for each active worker
- Total 2005 health care expenditure - \$5.4 billion
 - ~\$1.2 billion in HMOs

HMO Portfolio

- Over 120 Plans administered by ~35 carriers nationwide
- Variation in cost not accounted for by differences in measurable quality or population characteristics





Value Based Purchasing

$$\frac{\text{QUALITY}}{\text{COST}} = \text{VALUE}$$



General Motors Value Purchasing Strategy

GM's 3-Pronged Strategy

- Health Plan Accountability
 - Annual quality assessment through eValue8 RFI, NCQA accreditation and HEDIS/CAHPS scores (CARS Project)
- Motivate migration of enrollees to higher value health plans
 - Compare quality and cost of HMOs
 - 4 performance bands
 - Salaried monthly contribution is tied to HMO performance
 - *Requires significant communication with employees*
- Aggressive Supplier Development
 - Best practice sharing among Plans



Accountability: Coordinated Autos Reporting System (CARS)

- Partnership with DaimlerChrysler, Ford, GM, Delphi and the State of Michigan
- NCQA uses **CAHPS** and HEDIS performance to assign 1-5 stars in four categories:
 - Getting Better/Living with Illness
 - Staying Healthy
 - **Access and Service**
 - *Getting Needed Care, Getting Care Quickly, Customer Service and Overall Rating of Health Plan*
 - **Doctor Communication and Service**
 - *How Well Doctors Communicate, Courteous and Helpfulness of Office Staff, Overall Rating of Personal Doctor or Nurse, Overall Rating of Specialist, Overall Rating of Health Care*



Accountability: National Business Coalition on Health eValue8 RFI

- Common RFI sets expectations and assesses performance of HMOs and PPOs
 - Plan Profile
 - Health Information Technology
 - **Consumer Engagement**
 - *15% based on CAHPS scores*
 - *Additional credit for sharing physician or hospital specific CAHPS scores with consumers*
 - **Provider Measurement, Incentives and Rewards**
 - *Credit associated with measuring physician- or hospital-specific CAHPS scores and implementing incentives to improve performance*
 - Primary Prevention and Health Promotion
 - Chronic Disease Management
 - Behavioral Health
 - Pharmaceutical Management

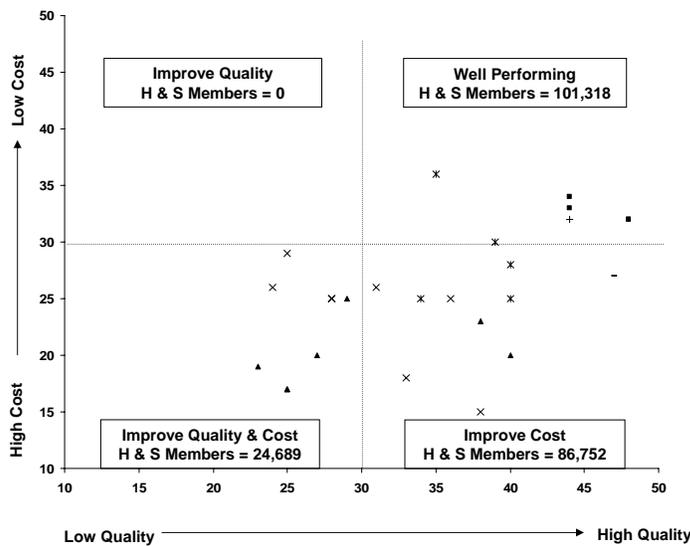


Motivate Migration: Salaried Flex Pricing Health Plan Scoring Table

		HMO A	HMO B	HMO C	HMO D
eValue8 RFI Results	Raw Score Flex Score (25)	129 5	221 25	211 24	176 16
HEDIS / CAHPS (CARS evaluation)	Raw Score Flex Score (20)	7 7	14 14	13 13	13 13
NCQA Accreditation	Raw Score Flex Score (5)	Commendable 2	Excellent 5	Excellent 5	Accredited 1
Total Quality Score (50)		14	44	42	30
National Rate Rankings		24	20	19	22
Relationships of rates to Local Indemnity		23	13	12	14
Total Cost Score (50)		47	33	31	36
Total Quality + Cost (100)		61	77	73	66
Rating		Avg	Benchmark	Strong	Good
Sample Employee Contribution		\$200	\$100	\$150	\$180



2005 Top HMOs Cost/Quality Comparison



Based on Salaried Banding Study - 2005

Motivate Migration: Salaried Health Care Monthly Contributions

Monthly Employee Contribution (Family)

	HSA PPO	Benchmark HMO/ ActiveCare	EMP PPO	Strong HMO	Good HMO	Average HMO
2006	\$ 0	\$100	\$125	\$150	\$180	\$200
2005	\$ 0	\$45	\$70-\$85	\$85	\$110	\$145-\$190



Motivate Migration

Employees/
Retirees can compare Plan options on aggregate quality performance

Plan Comparison - Step 2 of 2 - Microsoft Internet Explorer

Plan Comparison - Step 2 of 2 [Print This Page](#) | [Close](#)

Choose the plans and the features you want to compare.

For display purposes we recommend that you limit your comparisons to three plans at a time. Depending on how many items you are comparing, it may take a few moments for your choices to display.

Medical Plan Options

1. Select two or more plans to compare.

- Health Savings Account PPO - Plan A
- Health Savings Account PPO - Plan B
- Enhanced (BCBS- MI)
- HMO Care Choices - MI (S)
- HMO Health Alliance Plan - MI (S)
- HMO M-Care - MI (S)

2. Select each item to compare.

- Plan Provisions
 - Medical Coinsurance/Copay/Deductibles/Benefit Maximum
 - Inpatient Services
 - Mental Health / Substance Abuse
 - Quality Information
 - Employee Costs

- Prescription Drugs
- Outpatient Services
- Other Services

Previous
Compare Plans

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Motivate Migration

Results of annual CARS analysis: Values represent the number of "Stars" earned

Quality Information	HMO Care Choices - MI (S)	HMO Health Alliance Plan - MI (S)	HMO M-Care - MI (S)
Accreditation Status	Excellent	Excellent	Excellent
Benchmark HMO	Yes	Yes	No
Getting Better	5.0	3.0	4.0
Staying Healthy	5.0	3.0	4.0
Access and Service	4.0	3.0	3.0
Doctor Communication	4.0	3.0	2.0

Done

Start | Document1 - MI... | gmbenefits.co... | Fidelity NetBen... | Plan Compari... | Document

Motivate Migration

Employees/Retirees can also use the Asparity Plan Finder tool to compare performance on individual measures of interest to them.

PLANFINDER

Decision Center - Performance Module

Performance Module

EXIT

Overview | Select State | Select Plans | Select Measures | Results

Performance Module Overview

You can use this site feature to compare how well each of the plans available to you compares on plan performance for specific medical conditions (such as Behavioral Health Care or Cardiac Care), health care issues (Getting Better or Living with Illness), and member satisfaction. The feature is organized around nine categories of care, such as Access, Behavioral Health, Cardiac, Child and Adolescent, etc. Since a single measure is not a good indicator of plan performance, these categories allow you to compare how different health plans provide care across a group of related measures. A description of each category and term in this feature is available by clicking on the term.

See [About the Performance Module](#) for more details about this feature.

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GM PLANFINDER

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Satisfaction measures from CAHPS Health Plan Survey

- Member Satisfaction
 - Claims Processing
 - Courteous and Helpful Office Staff
 - Customer Service
 - Getting Care Quickly
 - Getting Needed Care
 - How Well Doctors Communicate
 - Rating Of All Health Care
 - Rating Of Health Plan
 - Rating Of Personal Doctor
 - Rating Of Specialist Seen Most Often
- Qualified Providers
 - Percentage of Primary Care Physicians Who Are Board Certified
 - Percentage of OB/GYNs Who Are Board Certified
 - Percentage of Pediatricians Who Are Board Certified
 - Percentage of Geriatricians Who Are Board Certified
 - Percentage of Other Specialists Who Are Board Certified
- Women's Health and Maternity Care
 - Breast Cancer Screening
 - Cervical Cancer Screening
 - Chlamydia Screening in Women (Combined Rate)
 - Prenatal and Postpartum Care
 - Timeliness of Prenatal Care
 - Postpartum Care

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Motivate Migration

GM PLANFINDER

Decision Center > Performance Module

Performance Module

Overview | Select State | Select Plans | Select Measures | **View Results**

Performance Module Results

Below is a comparison of each plan's performance based on the quality measures you have selected.

Measure	Plan	Score
Member Satisfaction Customer Service	Benchmark	Average Score: 71.64% 75th Percentile Score: 67.27% 79th Percentile Score: 78.13%
	HMO Priority Health - MI (S) (MI)	75.35%
	HMO Care Choices - MI (S) (MI)	77.35%
	HMO Health Plus of MI - Flint (S) (MI)	77.10%
	HMO Health Alliance Plan - MI (S) (MI)	72.53%
HMO BCH Flint - MI (S) (MI)	67.90%	
Qualified Providers Percentage of Primary Care Physicians Who Are Board Certified	Benchmark	Average Score: 84.82% 75th Percentile Score: 79.52% 79th Percentile Score: 92.82%
	HMO Priority Health - MI (S) (MI)	89.50%
	HMO Care Choices - MI (S) (MI)	82.13%
	HMO Health Plus of MI - Flint (S) (MI)	86.49%
	HMO Health Alliance Plan - MI (S) (MI)	90.44%
	HMO BCH Flint - MI (S) (MI)	91.47%

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PLANFINDER

Decision Center > Comparison Module Modeled Coverage Level: Self + Family + Spouse(s) | Log Out | EXIT

Comparison Module

Overview | Select Coverage Level | Select Plans | Select Attributes | **View Results**

Comparison Results

Below is a table of plan details based on your request. Plan information is presented by category: Costs, Access, Benefits and Satisfaction. If you want to see all benefits, select "Show All Categories" under the results table.

Attributes followed by a red ** represent those attributes that you indicated as important during the Preference Module.

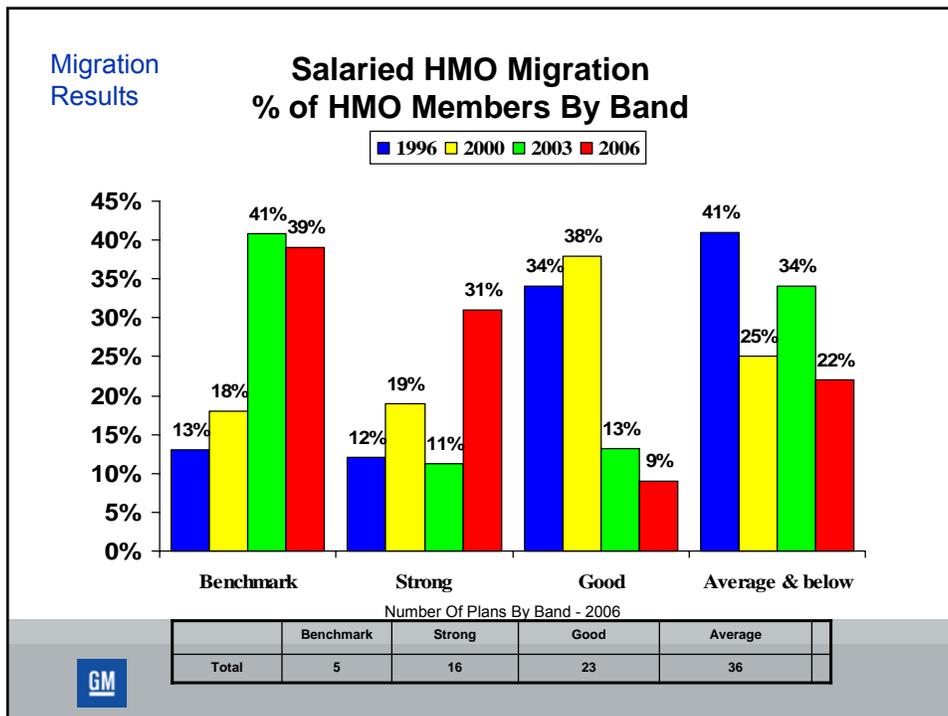
	Remove HMO BCH Lansing - MI (5)	Remove HMO Care Choices - MI (5)	Remove HMO Health Plus of MI - Flint (5)	Remove HMO M-Care - MI (5)
Category: Quality Information				
Overall satisfaction with the plan	61.5%	81.5%	75.1%	60.3%
Satisfaction with claims processing	84.4%	89.6%	92.8%	87.5%
Satisfaction with customer service	67.9%	77.4%	77.1%	72%

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Aggressive Supplier Development



- Quarterly Meetings with High Volume HMOs
- Monitor Work Plans in areas of poor performance
- Monthly Conference Calls (Accelerating Improvement in Managed Care)



Summary

- Accountability for Quality motivates improvement
- Premium adjustment and performance transparency effectively migrates members to higher performing health plans
- GM believes the way to reduce health care cost is to improve quality...and provide people with the information to make smart health care decisions

