



First Nations Health Authority
Health through wellness

HEALTH BENEFITS TRANSFORMATION JOURNEY

Vancouver Island Caucus
Presented: 2018-11-06

Vanessa Charlong, FNHDA
Darren McKnight, Director, Benefit Management
Andrea Oberdieck, Manager, Community Relations
Aaron Brady, Director, Product Innovation (PBC)



Agenda

1. FNHDA & Health Benefits (*Vanessa Charlong*)
 - Engagement Planning
 - Health Director Survey

2. Health Benefits Update (*Darren McKnight*)
 - Pharmacy
 - Independent Evaluation of Transition from NIHB
 - Dental, Vision and Medical Supplies & Equipment

3. Introduction to Pacific Blue Cross (*Aaron Brady*)

4. Feedback (*Darren McKnight & Andrea Oberdieck*)
 - Poll Everywhere
 - Q and A

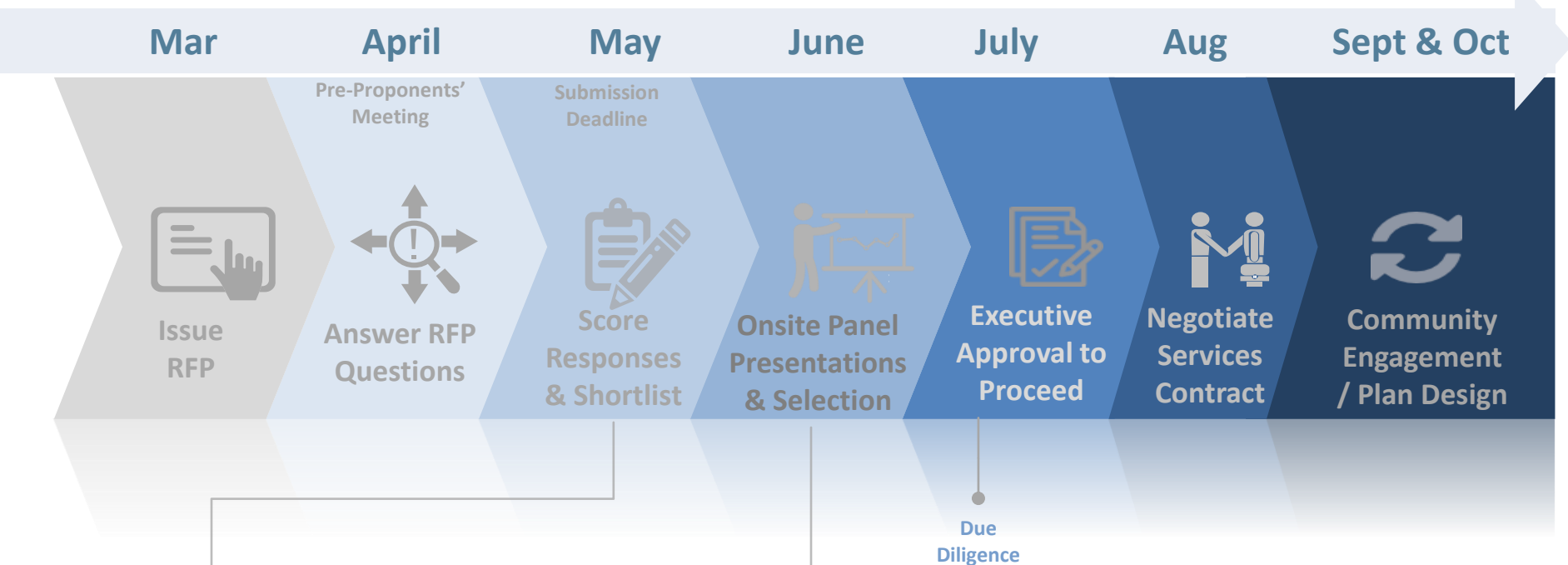


FNHDA and Health Benefits

- We are taking a partnered approach to engage FNHDA members on program planning
- We will be employing the FNHDA's Technical Advice Process (TAP) to:
 - meaningfully engage health directors and managers
 - build on learning from focus groups
- FNHDA Programs Committee is developing a survey with Health Benefits to collect feedback on the transfer of Dental, Vision and MS&E benefits. The survey will be deployed to FNHDA membership in January.



Partnership - RFP Procurement Process



Multi-Disciplinary Scoring Team:

Neil McInnes (Corporate Initiatives)
Kevin Lowe (Strategic Policy, Planning & Transformation)
Darren McKnight (Health Benefits Management)
Andrew Pacey (Data Analytics, Reporting / Provider Mgt)
J. Lapierre (CPST Program Manager)

FNHA Panel Members:

Richard Jock, Chief Operating Officer
John Mah, VP, Health Benefits
Peter Eckert, Controller (for Mary Procter, Chief Financial Officer)

Community Panel Members:

Allan Louis, First Nations Health Council
Vanessa Charlong, First Nations Health Directors Association

Moderator: Tony Bamford, Procurement Director, FNHA
Result: Unanimous Decision
Fairness Advisor: Jenn Scofield, MNP LLP. (Unqualified Opinion)



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PHARMACY (PLAN W) UPDATE



Evolution of Drug Benefit Coverage

- Joint Ministry of Health/FNHA session on Plan Wellness completed
- Managing Plan Wellness formulary with our partner
 - PharmaCare Pharmacist co-located at FNHA to support
 - Identifying decision points within existing programming

Next Steps:

- Shingles Vaccination – process development underway
- Formulary updates under review to improve client access
 - Diabetes Medications
 - Over the Counter (OTC)



FNHA has committed to an independent review of the transition to Plan Wellness. An external consultant will conduct this review.

Evaluation core areas:



- Once the evaluation is complete, results will be made available to all First Nations communities in BC. (*Final report expected March 2019*)
- FNHA will act on the findings and recommendations of the evaluation, in particular ensuring these inform the next phase of the transfer from NIHB.
- FNHA will additionally complete an analysis of any new and additional out-of-pocket expenses resulting from the transition.



Participation in the Evaluation

If you would like to participate in the evaluation by sharing your experiences and perspectives on the Health Benefits Pharmacy Program, in particular the transition of pharmacy benefits from the Non-Insured Health Benefit Program to PharmaCare Plan W, please connect with **Candy-Lea Chickite** (Candy-Lea.Chickite@fnha.ca) to provide your contact information.

- A purposeful sampling approach will be undertaken to reach as many people as possible from varying perspectives, however we may not be able to contact everyone that is interested in participating.
- The health benefits survey is another way to share your perspective and experiences. The survey can be found on FNHA's website.



If you have any questions or would like more information about the evaluation please contact:

Ted Weicker at Goss Gilroy Incorporated (Tel: 778-379-5590 or Email: tweicker@ggi.ca) or **Dianne Lepa at FNHA** (Tel: 604-693-6854 or Email: Dianne.Lepa@fnha.ca)



Health Benefits Commitments

Independent Evaluation

- We will share the results of the independent evaluation with key stakeholders.
- We will use the results of the evaluation to guide the transition of dental, vision and medical supplies and equipment benefits, as part of our commitment to continued learning and improvement.

Ongoing Plan W Support

1. We will continue to support client concerns as they arise. Contact Health Benefits if you have a concern (1-855-550-5454)
2. We will continue to work with our partners on system-based solutions.
3. We will continue to support Provider Education and Communications.



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HEALTH BENEFITS TRANSFORMATION JOURNEY

*DENTAL, VISION, MEDICAL SUPPLIES &
EQUIPMENT (MS&E)*



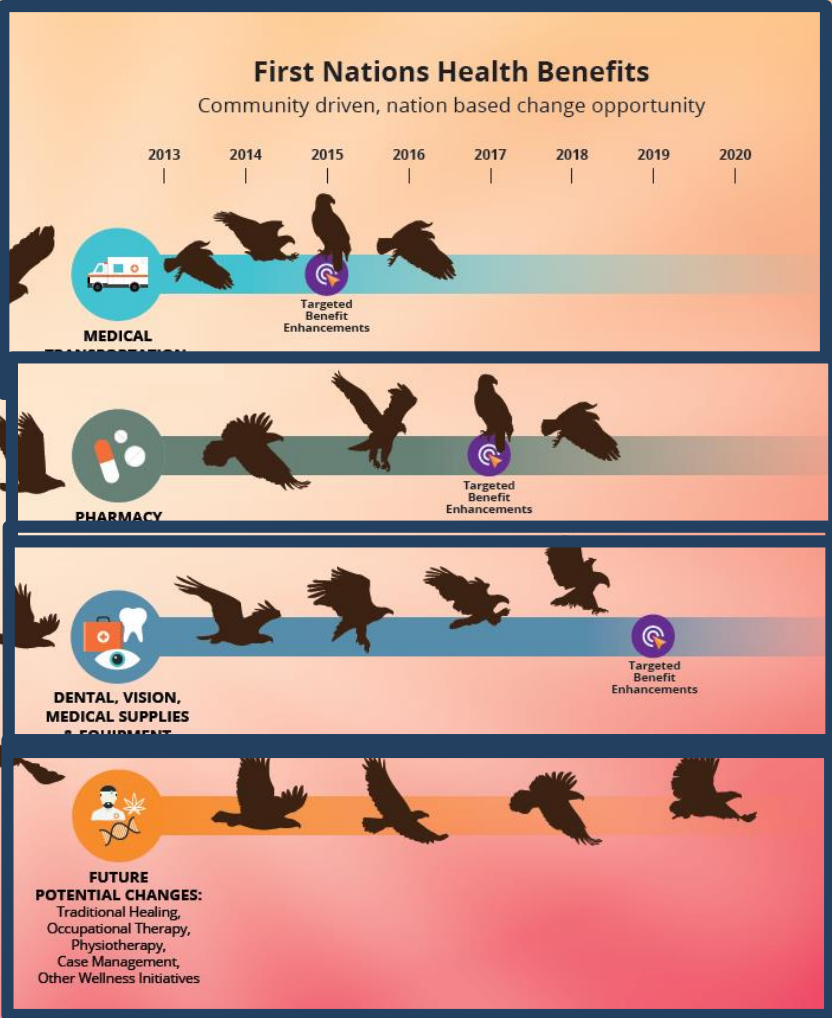
Health Benefits Transformation Journey

Comprehensive review of Health Benefits with community input to determine the path forward



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*We work together,
not apart, to lead
transformation.*





Health Benefits Transformation Journey

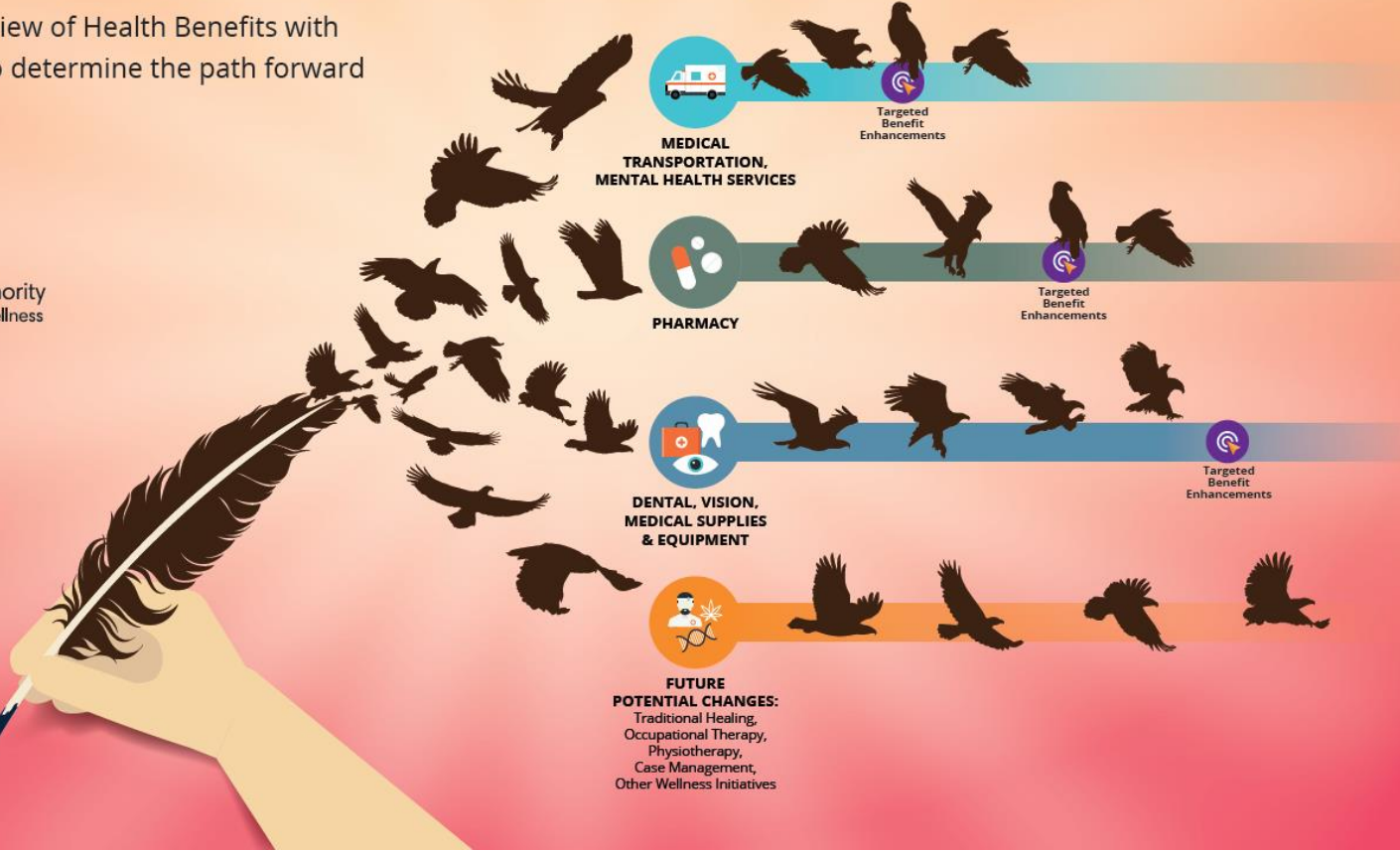
Comprehensive review of Health Benefits with community input to determine the path forward



We work together, not apart, to lead transformation.

First Nations Health Benefits Community driven, nation based change opportunity

2013 | 2014 | 2015 | 2016 | 2017 | 2018 | 2019 | 2020





Dental, Vision, Medical Supplies & Equipment

Our Mandate



Bring health benefits and services to BC increasing First Nations decision making and control



Design and implement a benefits and services plan for Dental, Vision, MS&E, and drugs not covered by PharmaCare to meet the needs of FNHA clients



Build a health benefits plan using a community driven, nation based process



Build a new partnership to support FNHA in service delivery





Lessons Learned - We are Committed to Doing Better

Better engagement with *Clients* and *Communities* prior to transition

- Have more knowledgeable Health Benefits team members closer to community
- Engage to obtain input from community members to develop the benefits plan
- Communicate sooner and for a longer period of time

More focused communication to *Providers* because they are frontline to clients





What we know so far

What we have heard...



- “Paying first is a barrier”
- “Program options are too limited”
- “Clients don’t know what’s covered or not covered”
- “There are issues with health care providers”

We intend to build a program that will...

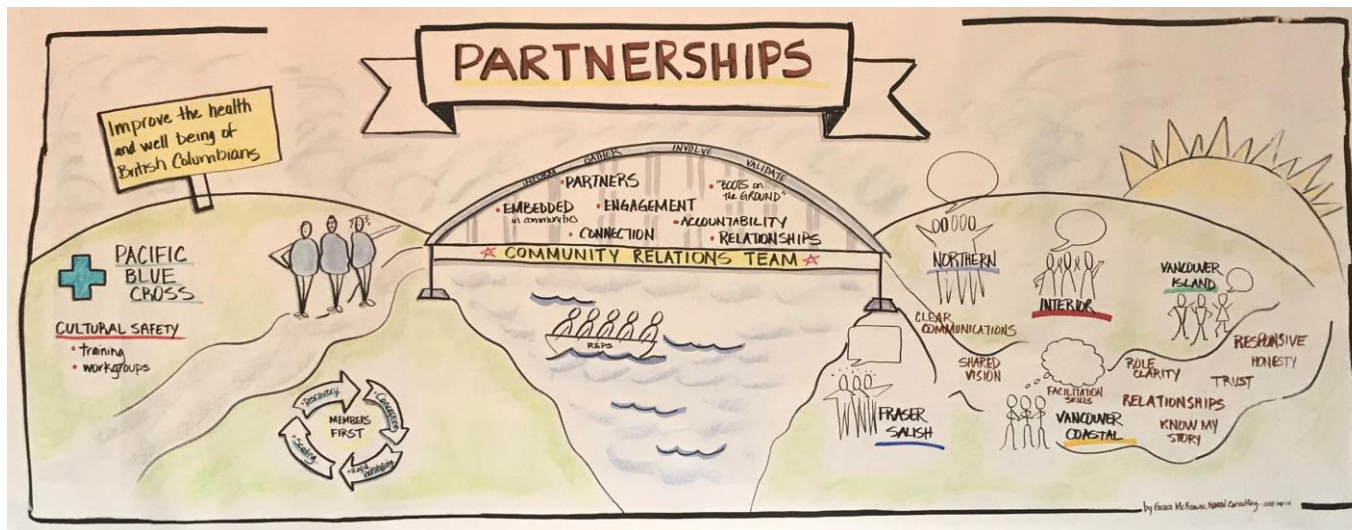


- ✓ Reduce out of pocket costs
- ✓ Provide some flexibility
- ✓ Provide First Nations clients with more information about services available to them
- ✓ Support better relationships between clients and health care providers



We looked for a partner that:

- ✓ Can improve services (quicker reimbursements; reduce out-of-pocket costs)
- ✓ Is committed to Cultural Safety & Humility
- ✓ Is committed to and demonstrates willingness to be a collaborative partner
- ✓ Has deep health benefits administration expertise
- ✓ Has a strong relationship and network with providers





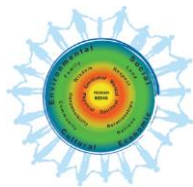
Work to Date - Highlights

- Community Relations Team in place
- Completed RFP and consulting agreement with a Partner
- Community Engagement
 - Refined and socialized the Regional Engagement Guide
Online at <http://www.fnha.ca/benefits>
 - Launched in-community focus groups November 1
- Health Director Engagement
 - Planning with FNHDA Board Programs Committee
 - Survey to be developed for FNHDA Engagement
- Provider Engagement
 - Introductory presentations Health Regulators and Professional Associations
 - Interviews with initiated; Sessions continue through January



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PACIFIC BLUE CROSS

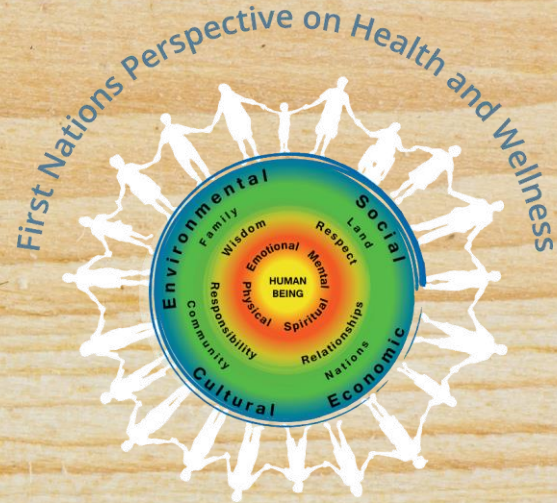


A Partnership Journey

First Nations Health Authority
November 2018



A Vision for Partnership



A Vision for Partnership | Why Pacific Blue Cross?



**BC-Based
Experience &
Partnerships**

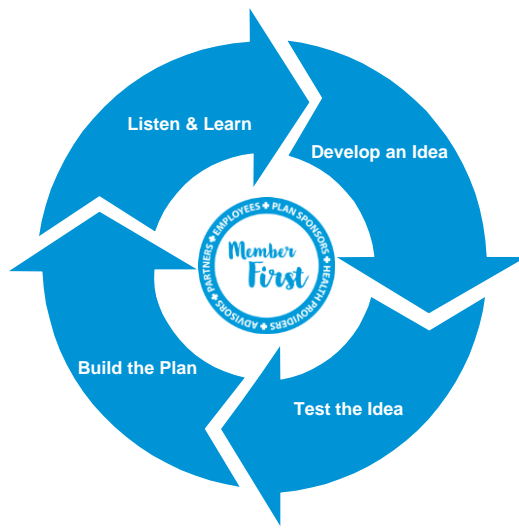


**Enabling
Technology**



**Member First &
Customized Design**

Collaborative Plan Design | Process



“Nothing about us
without us.”



Cultural Safety & Humility | Why it's important to PBC

Cultural Safety → Improved access to and quality of care → Improved Health & Wellness

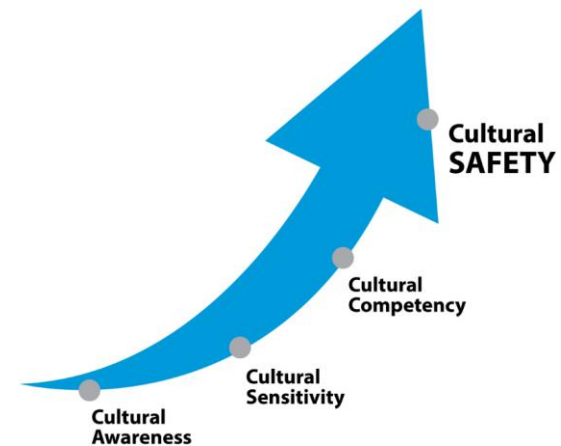


to Improve
Health
and
Wellbeing
for British
Columbians

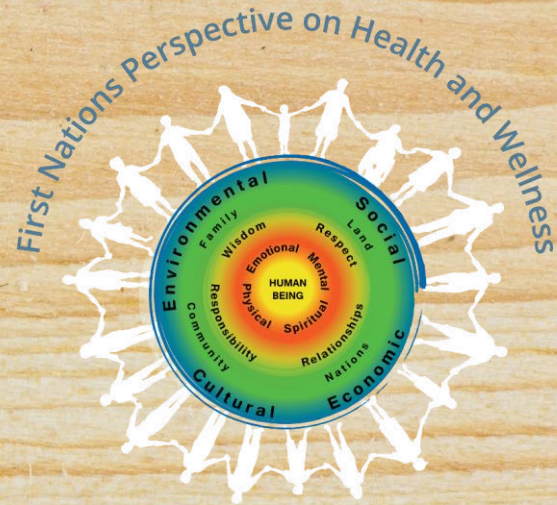


Cultural Safety & Humility | Our Commitments

- Cultural Safety & Humility Workshops
- PHSA's Core ICS Health Course (Cultural Safety & Humility)
- In-house Cultural Safety & Humility Training Module
- Workplace education & events
- Reduce barriers to access culturally safe service
- Continuous learning from FNHA and First Nations communities



Thank You





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FEEDBACK

*DENTAL, VISION, MEDICAL SUPPLIES &
EQUIPMENT (MS&E)*

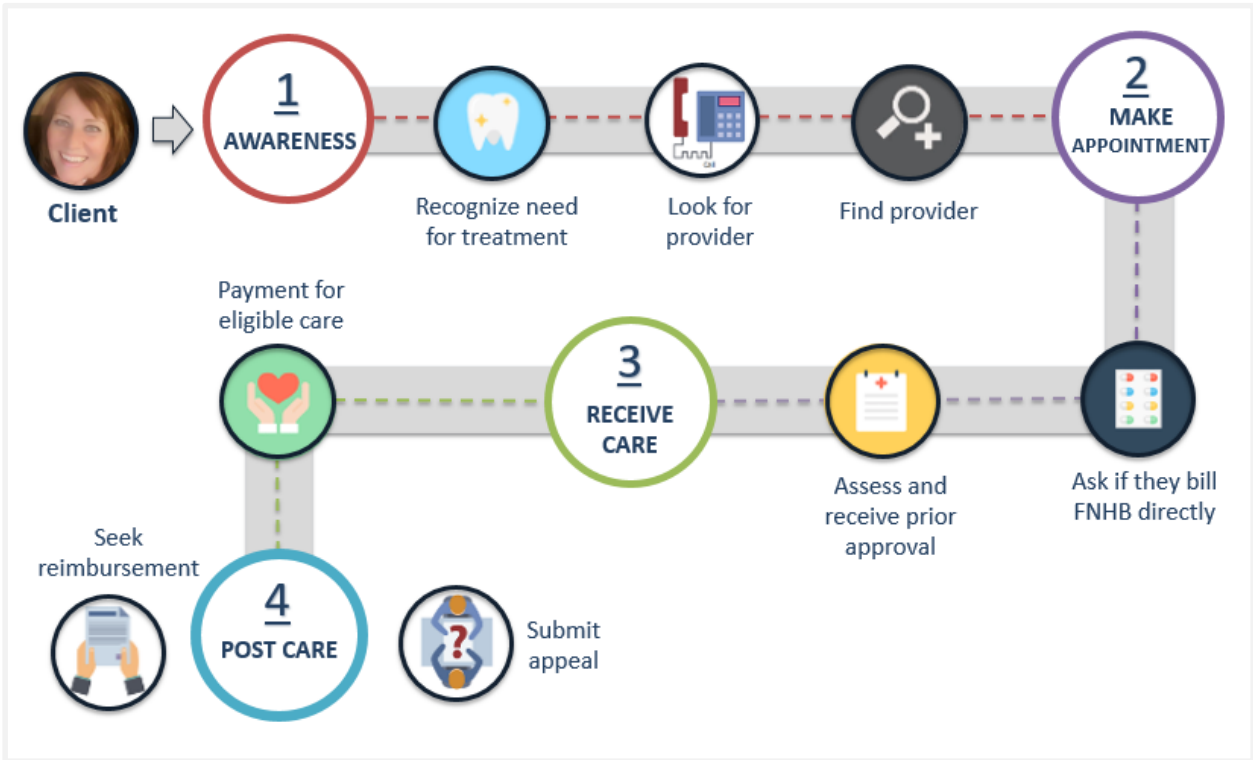


SAMPLE Focus Group Discussion:

Share both positive and negative experiences and **your advice in accessing Dental, Vision and MS&E** benefits and services. Think of the whole client journey when providing feedback.

Along the client journey....

1. What is your experience **finding** a health care provider?
2. What is your experience in **accessing and receiving** benefits and services?
3. What has been your experience with any **follow-up** you needed to make in receiving benefits and/or services?





Caucus Feedback

1. At your tables consider these guiding questions (10 -15mins each)
 - **Finding** a health care provider?
 - **Accessing and receiving** benefits and services?
 - **Follow-up** needed for services?
2. Have one person at your table text the word 'caucus' to number 37607 to join.
3. We will open the Poll Everywhere text response for each question to gain every tables favorite responses
4. We will conclude with a question open to everyone on your advice for next steps.

What is your experience finding a (health benefits) health care provider?

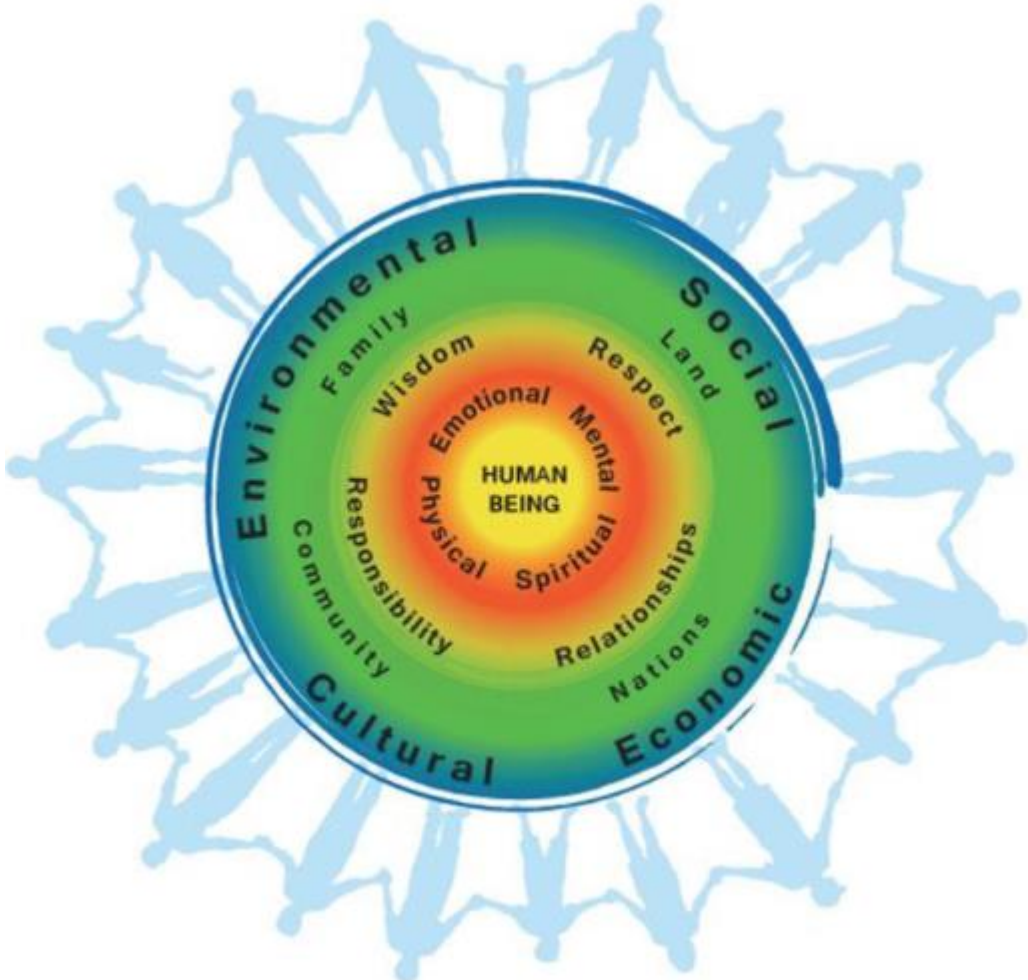
What is your experience in accessing and receiving benefits and services?

What has been your experience with any follow-up you needed to make in receiving benefits and/or services?

What is your advice for next steps?



Thank you





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SUPPLEMENTAL SLIDES



Update on Plan W Transition Issues & Mitigation

We continue to address issues as they arise.

Theme	Issue	Mitigation
Paying out of pocket	Clients asked to pay out of pocket at the Pharmacy	<ul style="list-style-type: none"> - Educate providers Plan W is a fully paid plan. - Encourage clients to contact FNHA Pharmacy Support Line if they are asked to pay.
	Co-payment for certain medications (e.g. insulins).	<ul style="list-style-type: none"> - Ongoing communications and training for providers, prescribers and clients. - Working with MOH for long-term solutions. - Internal process in place to resolve case-by-case issues.
Provider Information Gaps	Misinformation exists such as "Blood Glucose Test Strips are not covered under Plan W."	<ul style="list-style-type: none"> - Test Strips are covered under Plan W - Coverage for all FNHA clients using Test Strips prior to Oct 1, 2017, was grandparented. - New process was put in place for newly diagnosed clients resulting in information gaps. - <i>Provider communications to address through FNHA, MoH and BCPhA</i>



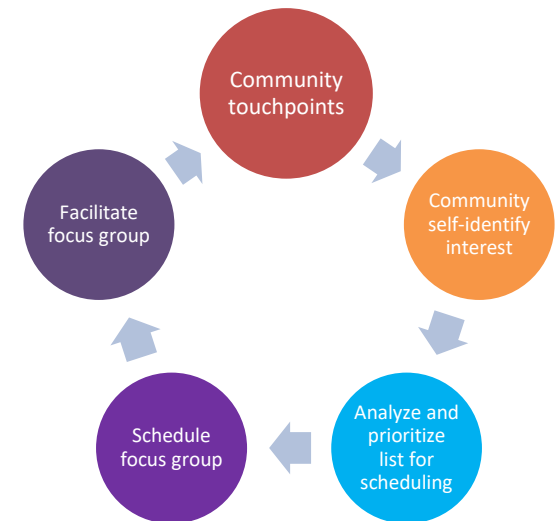
Transition Issues & Mitigation Update cont'd.

Theme	Issue	Mitigation
Formulary	Diabetes Medication – some specialized diabetes treatments unavailable under Plan W.	<ul style="list-style-type: none"> - Based on community feedback, FNHA is working with the MOH to review coverage of the Diabetes treatments available under Plan W. - New access under Plan W for SGTL2 Inhibitors to be available for new starts (July 2018) - Additional formulary changes under review
Engagement	Community has told us the level of engagement 'on the ground' prior to transition was not sufficient.	<ul style="list-style-type: none"> - VI Region Community Relations Representative Candy Lea Chikite hired to facilitate dialogue with communities - Community Focus groups planned for Interior to support on Plan W and on next phase
	Specific Community 'hot spots' identified, with requirements for targeted PharmaCare sessions.	<ul style="list-style-type: none"> - In community sessions supported by FNHA Pharmacist, Community Relations and BCPhA



Community Focus Group Planning

- Community Relations Team has been engaging to gauge and collect interest in participation.
- Focus group locations are determined from a variety of different means, for example:
 - level of expressed interest through engagement touchpoints
 - questionnaire results from the Regional Engagement Guide
 - priority areas from FNHA regional teams
- For more information:



Engagement Approach online at <http://www.fnha.ca/benefits>



Provider Engagement

- We recognize health care providers are the first touchpoint for most clients.
- We want to walk in partnership with providers to close service gaps and make the health system safer for our clients.
- We are engaging providers early and will work together with our Third Party Partner for key communications and engagement.



Cultural Safety & Humility | Thought Starter

