

## News Notes

**VOLUME 16** | ISSUE 1 | SPRING/SUMMER 2020 | EMPLOYER MEETING



## LVBCH Employer Group Meeting (March 3 & 4, 2020)

In March, the Geneia team – Laura Syron, manager, client executive team, Ronda Rogers, RN, BNS, director, population health & consumer engagement, Mary Elizabeth Myers, RN BSN, population health consultant – met with LVBCH employers to discuss mental health services and specialty drugs.

Among the insights gleaned from the Theon® platform and shared with the group were:

## **Mental Health Services:**

- In general, employees at high risk of depression had the highest healthcare costs during the three years after an initial health risk assessment.
- For every \$1 put into scaled up treatment for common mental disorders that is, mental health interventions that are delivered as part of an integrated health and well-being strategy, there is a return of \$4 in improved health and productivity.
- Within the LVBCH Data Group, 50+ percent of mental health costs are driven by people ages 10-29.
- The top five categories were mood disorders, anxiety disorder, adjustment disorders, schizophrenia and other psychotic disorders, and attention-deficit conduct and disruptive behavior disorders.

## **Specialty Drugs:**

- In general, specialty drugs represent a large share of drug costs. Employers should expect a 20
  percent annual spend increase in specialty drugs over the next several years.
- Specialty drugs can be covered under the pharmacy benefit, the medical benefit or both.
- Medical benefit drugs are billed using J-codes.
- Due to billing limitations and challenges, all employers have limited visibility into drug spend and lack the information to manage from a clinical and cost perspective.
- For the LVBCH Data Group, of the top 25 J-code drugs, the top five drove more than \$6 million in claims and the remaining twenty account for \$6.73 million

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