

V-BID Plan Guiding Principles

1. V-BID options are clinically nuanced i.e. medical services differ in the benefit provided and that the clinical benefit derived from a specific service depends on the patient using it, as well as when, where, and by whom the service is provided.
2. V-BID options should be flexible, allowing for adoption of select provisions, or all provisions, in order to meet diverse employers' needs and readiness for adoption.
3. Allows for gradual implementation of options to gain employee buy-in on key aspects, and then builds upon these as employee acceptance grows.
4. V-BID is promoted as part of a comprehensive approach to benefit design that also includes provider side reforms (e.g. pay for performance, global budget, etc.).
5. V-BID options recognize that mental health parity is required in any plan design.
6. V-BID plan is implemented as part of a consumer-centric approach that incorporates:
 - a. A collaborative care model focused on quality and accessibility of the provider, effective patient communication, and shared decision making between the provider and patient;
 - b. Alignment of consumer benefits and incentives with provider incentives;
 - c. Health navigation services and coordination of community services across the care continuum; and
 - d. Consumer engagement strategies that provide patients with resources and education materials on V-BID, health monitoring tools, and flexible communication methods.
7. In this initial phase, high value providers are identified using transparent cost and quality of care metrics. Future iterations may measure other dimensions, such as provider accessibility, patient-centeredness, and care collaboration. In identifying high value providers:
 - a. Method is transparent
 - b. Data are shared with providers
 - c. Definition of high value includes both cost of care and quality of care
 - d. Cost should not be determined solely as price, but rather as a reflection of total cost of care (incorporating both price and utilization rates)
 - e. Quality measurement should use validated and accepted measures
 - f. Quality measures should address clinical quality and patient experience, as well as other domains that are accepted as valid and important.
8. V-BID recommended options are varied for different types of employers to help meet employers where they are at and promote specific V-BID benefits for various employer types and cultures.
 - a. V-BID options take into account various employer perspectives, including recognizing regulatory barriers for innovative plan design, and how V-BID designs may affect short and long-term cost savings and Return on Investment.
 - b. Examples of V-BID variations may include small group v. large group, self-insured v. fully insured, employers with Health Reimbursement Account or Health Savings Account-eligible High Deductible Health Plans v. traditional cost sharing models.