Value Based Insurance Design in the Fully-Insured Market

VBID can be implemented in both the fully-insured and self-insured markets. The fully-insured employer templates and manual were developed specifically to address the unique considerations of fully-insured employers.

Developing a Plan

The VBID Template for the fully-insured market identifies **3 recommended Core Components** to be included in VBID plans, and a range of suggested services that can be targeted:

Recommended Core Component	Example Services/Drugs	Example Incentives
Change Incentives for Certain Services	Blood Pressure Screening (based on age/gender) Breast Cancer Screening (women based on age)	 Waived copay Reduced Copay Bonus Payment HRA/HAS Contribution Reduced Premium for complying with recommended services Exclusion of recommended drugs from deductible
Change Cost Sharing for Certain Drugs Change Incentives for Certain Providers	Beta Blockers, Insulins, Anti- hypertensives Network of providers identified as high value based on performance on cost and quality metrics	

Changes in incentives and cost sharing can be addressed in **various plan types**, including HRAs, HSAs, or plans with copayments or coinsurance. Incentives described in the table above can apply to **all members or targeted members**, and compliance can be measured based on **participation or outcomes**.

***** Implementation

The Employer Manual includes materials to assist fullyinsured employers in VBID implementation, including: Implementation Strategies, Communications Guidance, FAQs and Best Practices, and a VBID Template Worksheet.

Steps to Implement a VBID Plan

Assess Employee Needs Research and Select V-BID Plan Discuss Compliance Measures Develop a Communication Strategy

Initiate V-BID Plan

These steps, detailed in the Manual, serve as a guide for fully-insured employers seeking to implement VBID. To learn more, view the full Manual or contact the Connecticut SIM Program Management Office, sim@ct.gov.