

SUSTAINED ANNUAL WELLNESS VISIT ENGAGEMENT: IMPACTS IN THE BLUE CROSS AND BLUE SHIELD OF LOUISIANA MEDICARE ADVANTAGE POPULATION

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BACKGROUND

- Annual wellness visits have been shown to help to prevent and detect diseases early and support Medicare Advantage Star Rating measures.
- The study analyzed how Annual Wellness Visit (AWV) engagement affects healthcare utilization and costs in the Blue Cross and Blue Shield of Louisiana (BCBSLA) Medicare Advantage population.

STUDY DESIGN

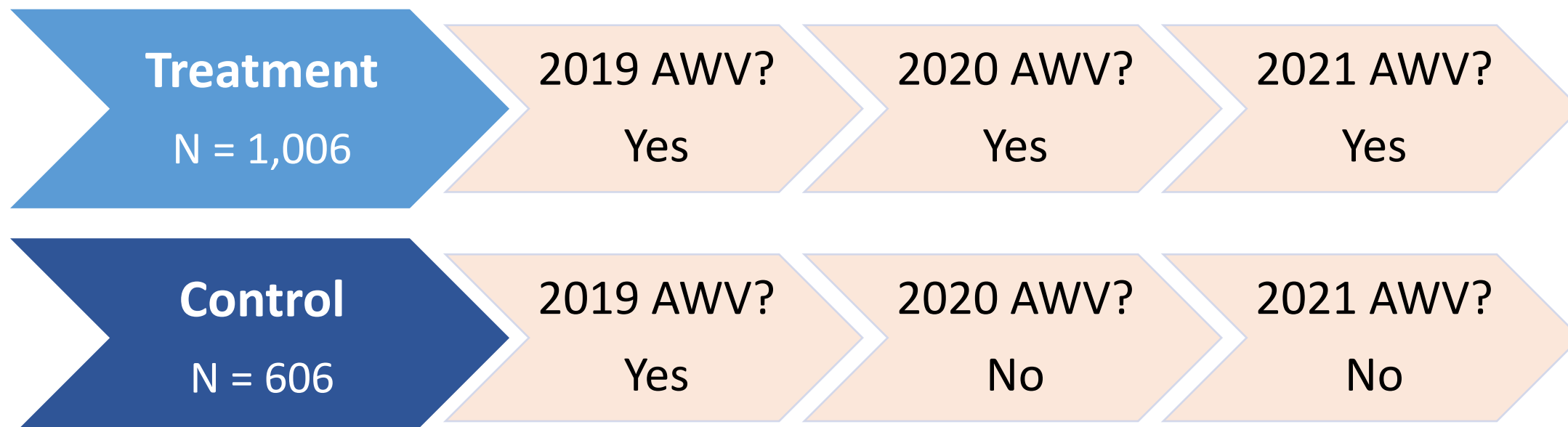
- BCBSLA assessed three years of medical claims for its Medicare Advantage members with varying levels of AWV engagement.
- The time frame for the medical claims is January 2019 to December 2021. The calendar year 2019 is the baseline, and the calendar years 2020 and 2021 are for observation.
- All members have at least six months of continuous medical coverage annually and have no history of hospice care or transplants.
- BCBSLA performed two retrospective longitudinal analyses.
- Members included in the first analysis have no AWV engagement in the baseline. Members who complete AWVs in both 2020 and 2021 become the treatment cohort. Members who have no AWV engagement in 2020 and 2021 become the control cohort.

Analysis 1 – AWV Engagement Improving over 3 Years



- Members included in the second analysis have AWV engagement in the baseline. Those who continue AWV engagement in 2020 and 2021 become the treatment cohort. Those who stop engagement in 2020 and 2021 became the control cohort.

Analysis 2 – AWV Engagement Continuing over 3 Years



STATISTICAL METHODOLOGY

- Each treatment cohort was matched to the control cohort via **propensity score matching (PSM)** on member demographics, risk scores, comorbidities and claim history.
- BCBSLA conducted **difference-in-difference analysis** using a regression model with gamma and Poisson distributions on cost and utilization, for each matched group.

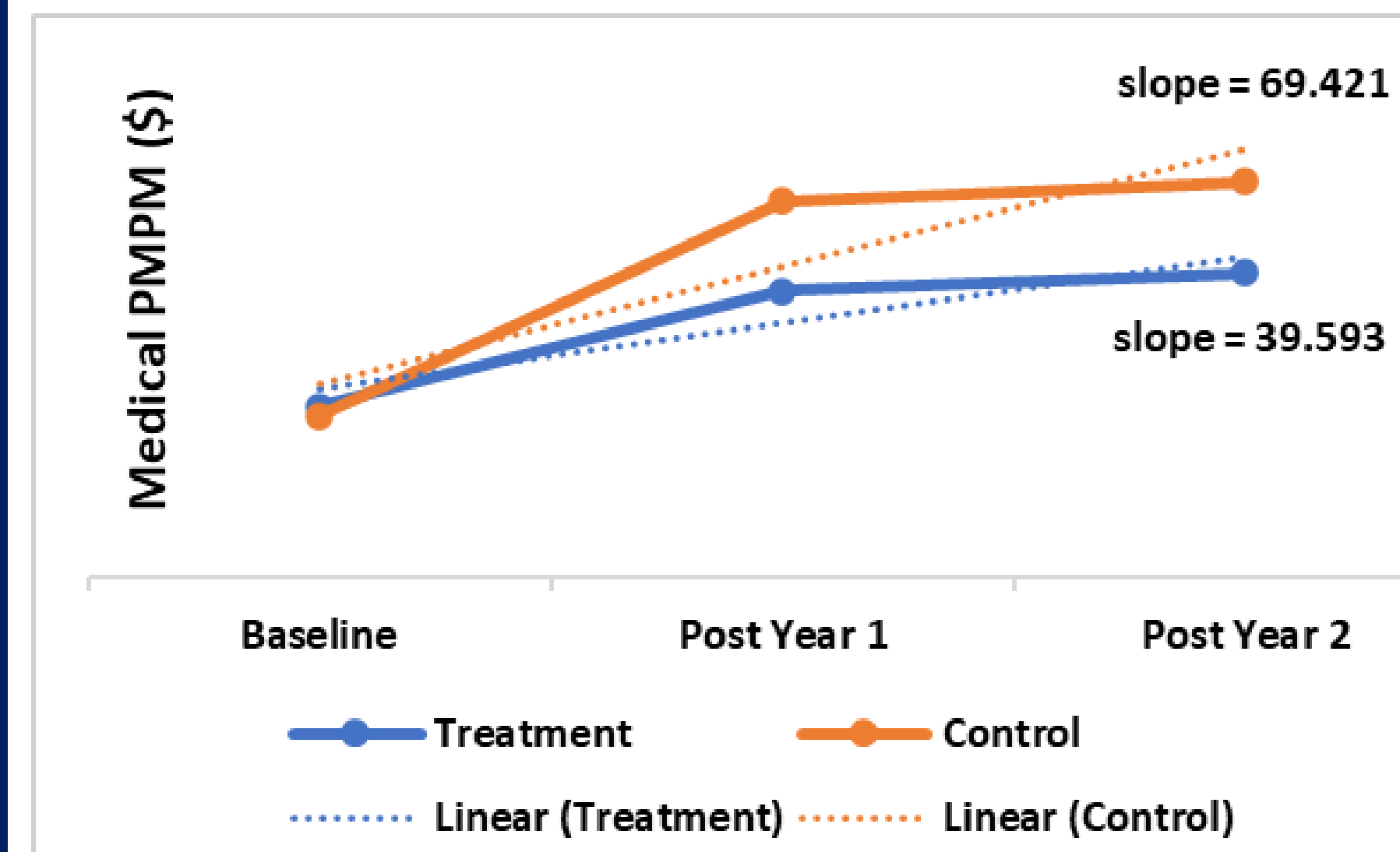


RESULTS

ANALYSIS 1

Members Improving AWV Engagement from 2019

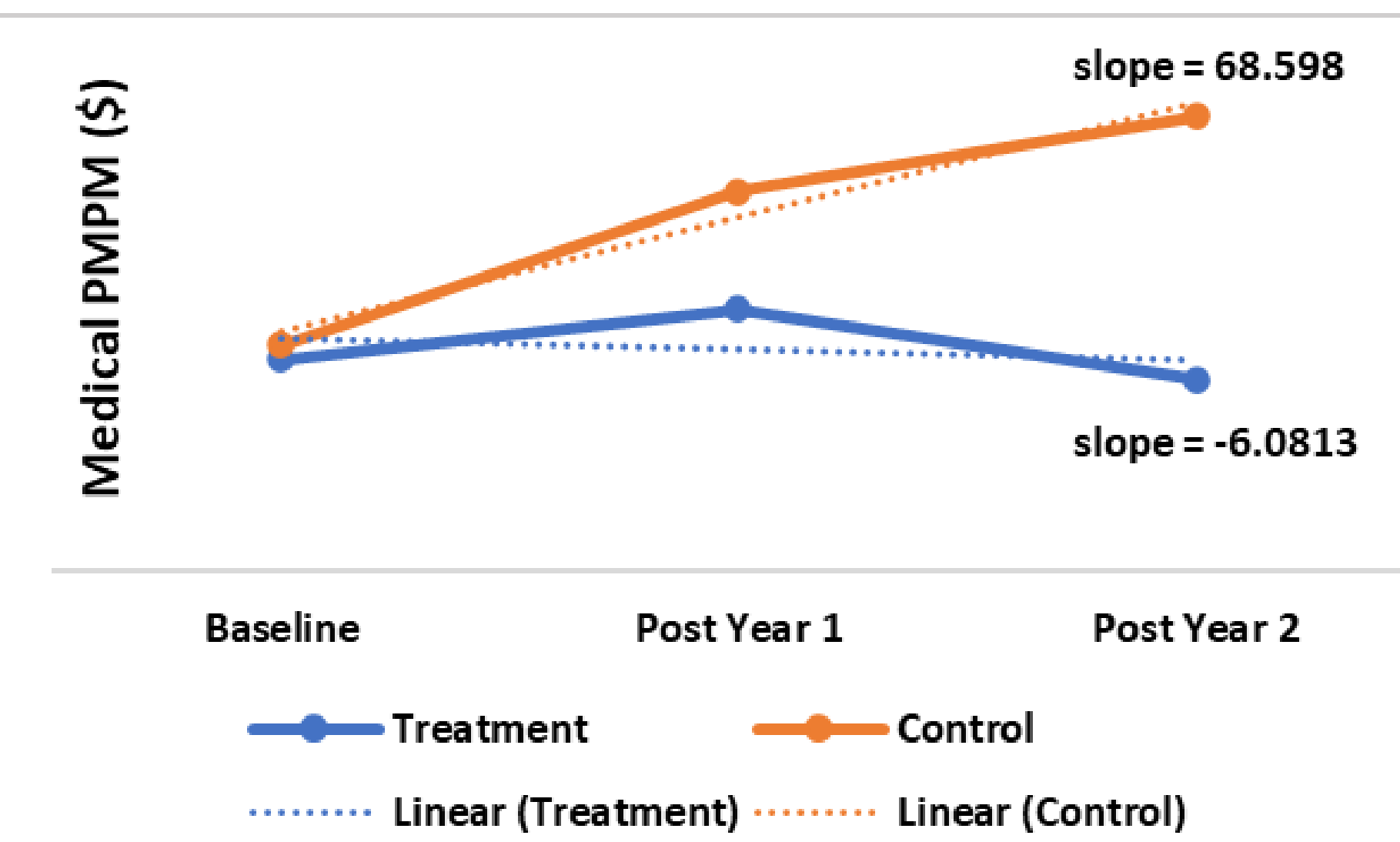
Figure 1. Medical Cost, Per Member Per Month (PMPM)



- Members who completed AWVs in 2020 and 2021 had lower medical costs by about \$60 PMPM per year.
- This is a 15% decrease in medical costs per year, when compared to those who did not complete AWVs in those years.

ANALYSIS 2

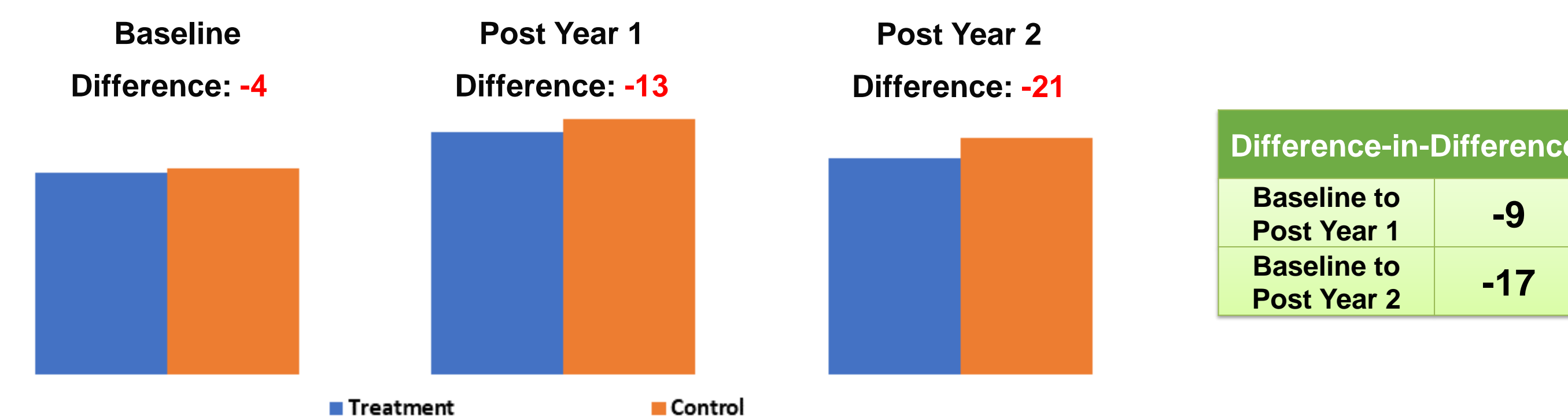
Members Continuing AWV Engagement from 2019



- Members who completed AWVs in 2020 and 2021 had significantly lower medical costs by the second year.
- This is a medical cost decrease of 10% in year 1, and of 35% in year 2, when compared to those who did not complete AWVs.

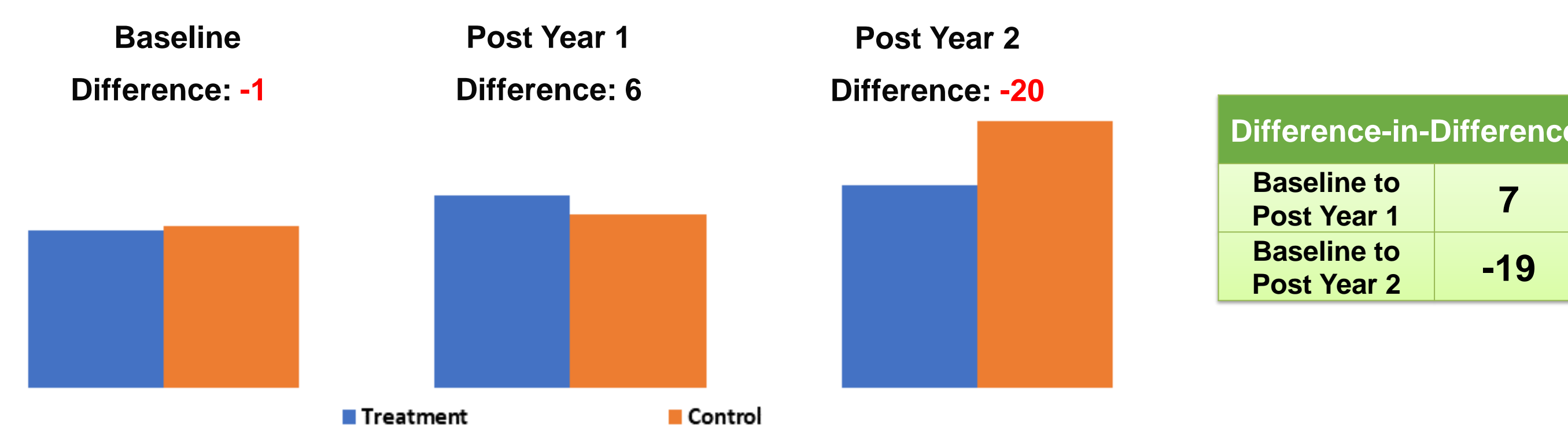
Figure 2. Utilization Outcomes, Per 1,000 Per Year (PKPY)

EMERGENCY DEPARTMENT VISITS



Difference-in-Difference	
Baseline to Post Year 1	-9
Baseline to Post Year 2	-17

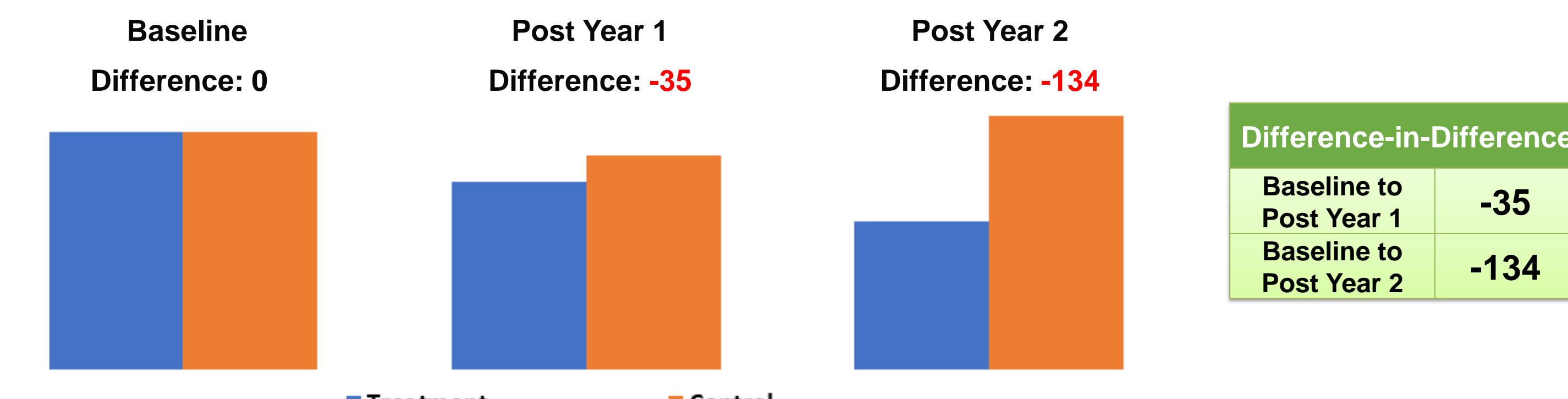
ACUTE ADMISSIONS



Difference-in-Difference	
Baseline to Post Year 1	7
Baseline to Post Year 2	-19

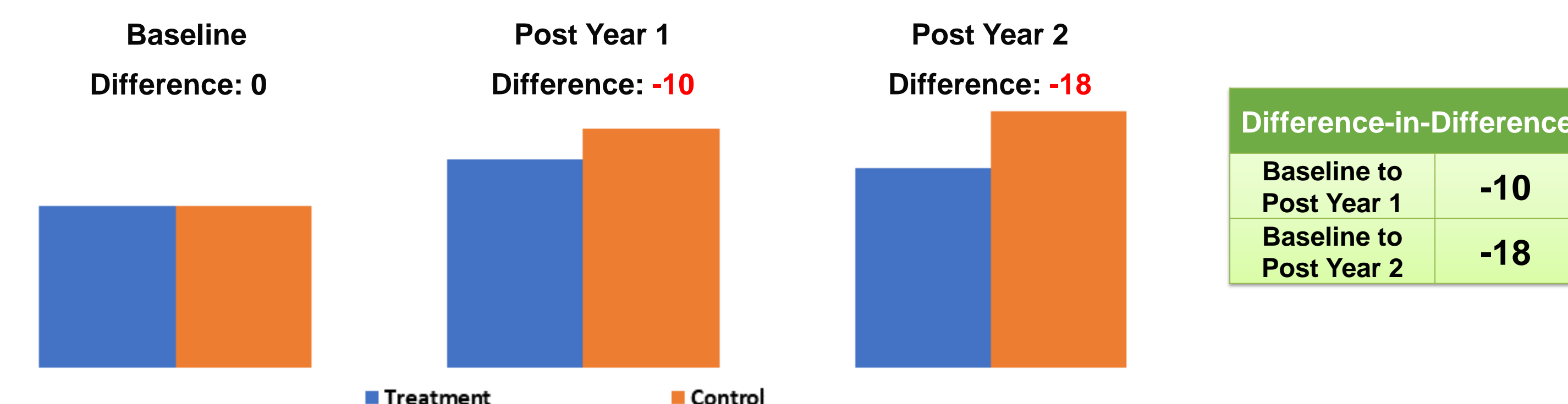
For members who completed AWVs in 2020 and 2021, there was an associated decrease in adverse events, such as ED visits and acute admissions. This is in comparison to those who didn't complete AWVs in that time frame.

EMERGENCY DEPARTMENT VISITS



Difference-in-Difference	
Baseline to Post Year 1	-35
Baseline to Post Year 2	-134

ACUTE ADMISSIONS



Difference-in-Difference	
Baseline to Post Year 1	-10
Baseline to Post Year 2	-18

For members who completed AWVs in 2020 and 2021, there was an associated decrease in adverse events, such as ED visits and acute admissions. This is in comparison to those who didn't complete AWVs in that time frame.

CONSIDERATION

Why are members discontinuing AWV engagement?

Table 1. Differences in New Incidences of Conditions

Condition	% Higher in Control Cohort
Respiratory Failure	200%
Liver Disease	25%
Chronic Back Pain	8%
Cancer	4%

- Considering Analysis 2, the control cohort comprises members who discontinue AWV engagement after 2019.
- It is likely that members discontinued AWV engagement due to new incidences of certain conditions that also may have instead led those members to engage with specialists.
- COVID-19 and high-cost acute admissions also were considered but ruled out.

CONCLUSIONS

- BCBSLA Medicare Advantage members with sustained AWV engagement exhibited decreases in emergency department (ED) visits, acute inpatient admissions, and medical costs.
- Evaluating engagement improvement, there was an associated decrease in medical costs of 15% in both the first and second years of AWV completion.
- Evaluating continued engagement, there was an associated decrease in medical costs of 10% in the second year of AWV completion and of 35% (statistically significant) in the third year.

REFERENCES

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