We implemented two one-year educational awareness programs focused on the increased use of depression screening and chronic care management services. As a part of these programs, we developed an expansive outreach strategy to engage our provider community. We relied on direct outreach, live events, digital platforms, and hard-copy materials. By building direct connections with health care professionals, participating in live webinars and roundtables, launching digital education initiatives like podcasts and blogs, and sending hard-copy resources via mail, we established collaborative relationships and ensured comprehensive awareness of our program's benefits to Medicare beneficiaries.

Area Deprivation Index Map 1-30 31-40 41-50 **51-60** 61 71-80 81-90 91-100 suppressed Least disadvantaged We incorporated the SCAN THE CODE Area Deprivation Index to identify our most disadvantaged neighborhoods across social drivers of health variables which led to a 21% increase in claim Interactive utilization for our most ADI Map at-risk beneficiaries. University of Wisconsin School of Medicine and Public Health. 2021 Area Deprivation Index v4.0. Downloaded from https://www.neighborhoodatlas.medicine.wisc.edu/ April 18, 2024.

Chronic Care Management, Depression Screening and the Quintuple Aim of Medicine

CMS Health Equity Innovation Challenge Medicare Projects

Matt Davis and Joelle Vlahakis | WPS Government Health Administrators

Jurisdiction 5 (J5): Iowa, Missouri, Kansas, Nebraska + Jurisdiction 8 (J8): Michigan, Indiana

Depression Screening

Key Performance Indicators	Goal	J5	J8
Increase depression screening claims	+5%	+35%	+41%
Increase depression screening claims for disadvantaged beneficiaries	+2.5%	+26%	+31%
Reduce suicide attempt claims	-5%	-11%	-4%

J5 + J8 Key Impacts



\$52 MILLION

in estimated Medicare savings

1,100
more providers

utilizing service



68,000 more beneficiaries screened



Outpaced all other jurisdictions by 30%, 20%, and 1.5%

respectively

Chronic Care Management

Key Performance Indicators	Goal	J5	J8
Increase chronic care management claims	+5%	+20%	+39%
Increase chronic care management claims for disadvantaged beneficiaries	+2.5%	+6%	+43%
Reduce emergency department visit claims	-1%	-9%	-11%

J5 + J8 Key Impacts





in estimated Medicare savings



950
more providers
utilizing service

20,000 more beneficiaries enrolled



Outpaced all other jurisdictions by

8%, 13%, and 2.5% respectively

Quintuple Aim of Medicine

Improve health outcomes

Lower cost of health care

Enhance patient experience

Minimize burden on providers

Advance health equity

We outpaced results of non-treatment Medicare groups across the rest of the nation where our programs were not implemented by realizing an 18% larger increase in overall claim utilization, 19% larger increase in claims for at-risk beneficiaries, and 3% larger decrease in emergency treatment.



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