

Reducing Costs, Increasing Access, Improving Health

NPDP Presentation June 2010

Organization of Presentation

Statement of Problem

The Action Program

Other Drug Plans Reviewed

Key Features of Plan

Contracts and Participating Pharmacies

Supply and Purchase of Drugs

Claims Processing /IT Systems

Payment Arrangements

Audits

Copayments and Coordination of Benefits in Other Phase(s)

Statement of Problem







Health burden of chronic diseases - 1 in 3 Bahamians

- Many days of illness, disability, hospitalization
- Reduced length and quality of life.

Inadequate access to prescription drugs and supplies

- Long waiting/uncertain supplies in public facilities
- Cost barriers in private pharmacies
- Many chronic patients do not seek treatment

Major financial burden

- High expenses by individuals, families, government
- Productivity losses by businesses

The Action Program

Treatment—Prescription Drug Program

- Enhance access to drugs in public and private pharmacies
 - Reduce patient burden of paying for drugs
 - Improve patient compliance in managing condition

Prevention—Healthy People Program

 Provide funds to support well-designed projects in health promotion, wellness and health education.

Other Drug Plans Reviewed

Barbados Drug Service (1980)

T'dad & T'bgo Chronic Disease Assistance Program (2003)

Jamaica National Health Fund (1996)

Australia Pharmaceutical Benefit Scheme (1948)

Drug Plans in Canadian Provinces eg British Columbia's Pharmacare and Ontario's Drug Benefit Program

UK NHS Pharmacy Services

US 340B Drug Program (1992)

PLAN FEATURES

COVERAGE - Phase 1

NIB Pensioners NIB Invalids Bahamian Citizens Over Age 65

Children

- Under age 18
- Under age 25 (if full-time students)

Members will incur no expenses as financing will come from the Medical Benefits Branch of NIB.

COVERAGE - Phase 2

NIB Contributors

- Employed
- Self-employed

Voluntarily Insured

Other Groups

- Indigent
- Institutions

Funding – mix of contributions, copayments, grants, coordination of benefits.

DEFINED LIST OF DISEASES

Criteria for Inclusion

- high prevalence
- financially burdensome to patient
- available drug treatment

11 Chronic Diseases (in first round)

List will be reviewed and amended over time.

Arthritis



Asthma



Breast Cancer



Diabetes



Glaucoma



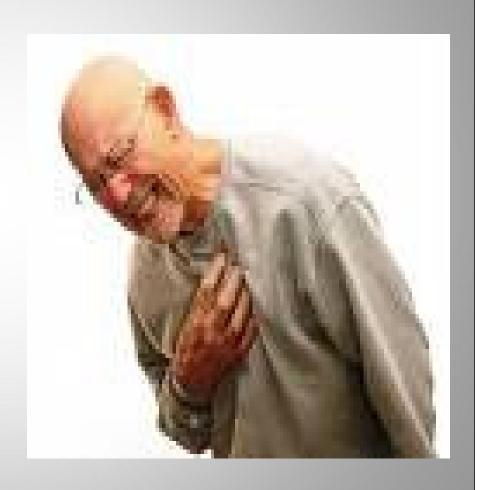
High Cholesterol



Hypertension



Ischaemic Heart Disease



Major Depression



Prostate Cancer



Psychosis



COVERED CONDITIONS FOR PHASE ONE

Asthma

Arthritis

Breast Cancer

Diabetes

Glaucoma

Hypertension

High Cholesterol Ischaemic Heart Disease

Major Depression

Prostate Cancer

Psychosis

DEFINED MEMBERSHIP

Must be

- NIB pensioner
- NIB invalid
- Bahamian citizen over 65
- child under 18 or under 25 (if full-time student)

Certified by registered medical practitioner with 1 or more of listed diseases

Issued with unique drug plan membership card

REGISTRATION PROCESS

Pensioner, Invalid,
Child/Student,
Bah over 65



Visit NIB Office



Complete DP-1
Form at any NIB
Office



Completed forms returned to NIB by physician



Each condition certified by registered medical practitioner



Forms sent to physician/clinic for diagnosis



Approved forms processed for membership cards



Collect membership card

NPDP MEMBERSHIP CARD



NATIONAL PRESCRIPTION DRUG PLAN



NIB NUMBER: XXXXXXXX VER: 0XX

FIRST NAME: XXXXXXXX ISLAND CODE: XXXX

SURNAME: XXXXXXXX

DATE OF BIRTH: XX/XX/XX GENDER: XX

Signature:

The cardholder is a registered member of the National Prescription Drug Plan.

This card is the property of the National Insurance Board, Commonwealth of the Bahamas

TEL: [242]-502-1500

Web address:www.nibdrugplan.com

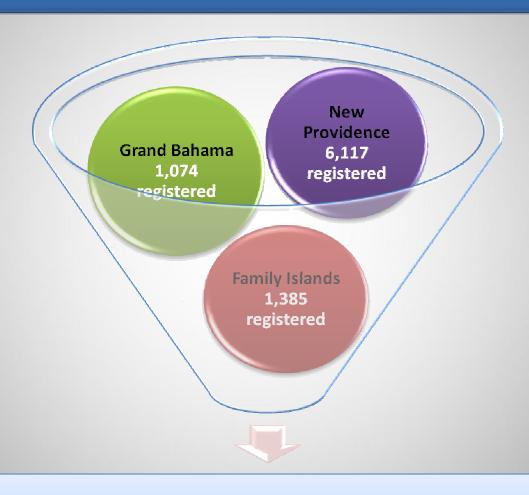
If found please return to the nearest National Insurance Board Office.

FRONT OF CARD

BACK OF CARD

NOTE: CARDS AVAILABLE FOR COLLECTION FROM MID-JULY

REGISTRATION PROGRESS



8,576 Registrants as at May 27, 2010

ADMINISTRATION

Administered by The National Insurance Board



Support from *Strategic Planning Committee*

• Assess performance and recommend action measures.

Annual and other reports to NIB Board, Minister, Parliament

BUSINESS MANAGEMENT

Computerized applications for efficient management of:

- Enrollment Registration of members
- On-line claims adjudication (validation) and processing
- Drug stock flow monitoring and auditing
- Data on drug interaction
- Prescribing and dispensing reviews
- Detecting fraud and abuse
- Performance monitoring and assessment

BUSINESS MANAGEMENT

Emphasis on customer-centered services:

- Help Desk for software and claims processing matters
- Call Center for customers (members, others)
- Pharmacist for pharmaceutical matters

PHARMACIES

Public and private pharmacies are invited to participate.

Pharmacy must:

- Have valid business license
- Meet requirements of Pharmacy Act
- Be up to date with payments to NIB
- Accept and sign provider contract.

PARTICIPATING PHARMACIES



Lowe's Pharmacy

Walk-In Medical Clinic Pharmacies

Centreville Pharmacy

Betande Pharmacy

The People's Pharmacy

Wilmac's Pharmacy

DRUG BENEFITS

Over 160 approved drugs and medical supplies

A monthly maximum assigned to each drug.

Some drugs to be prescribed by specific physicians.

List of drugs will be reviewed and amended.

Drugs available to public and private patients.

SPECIAL ARRANGEMENTS

Homebound persons. Dispensing in remote Family Islands

Dispensing in specialized treatment centers.

SUPPLY AND PURCHASE OF DRUGS

Pre-Tender

• Pharmacies send expected sales/requirements to Drug Plan for feeding into tender process.

Tender

 Drug Plan collaborates with BNDA in tender process and contracts for supplies with wholesalersdistributors.

Post-Tender

- Pharmacies make own arrangements to purchase drugs from contracted suppliers at agreed prices.
- Pharmacies send copy of orders for supplies to Drug Plan; Suppliers send copy of invoices to Drug Plan.

CLAIMS PROCESSING/IT SYSTEMS

Electronic claims processing with software, upgrades and training provided by the Plan.

Members must present card when filling prescriptions.

Swiping card activates the on-line claims adjudication system (business rules for eligibility/validity, drug supplies)

Instant Processing

Accepted claims will be logged for payment. Rejected claims will receive an explanatory statement.

Drug Plan's Customer Services, Help Desk and Pharmacist may be called as necessary.

PAYMENTS – FORMULA & TIMING

Drug Plan will pay on a cost plus mark-up basis.

Cost prices of drugs will be placed in 3 bands and percentage mark-up will vary inversely to cost (i.e. lower cost, higher percentage mark-up and vice versa).

All accepted claims for payments will be paid once per week through transfers to pharmacy bank account.

Pharmacy can request update on its claims activity to verify payments.

PAYMENT SCHEDULE & FORMULA

Band	Cost of Drug	% Mark-up	Fixed Fee
1	0 - \$5.00	45%	\$3.00
2	\$5.01 - \$25.00	35%	\$3.00
3	> \$25.00	25%	\$3.00

Mark-up Formula =

Drug Cost + (Drug Cost × %MU) + FF

COPAYMENTS & COORDINATION OF BENEFITS

In the next phase(s), provisions will be made for

- copayments by some categories of members
- coordination of payments for benefits with private insurance carriers

The IT claims processing system will provide on-line applications for managing these payments.

AUDITS

Drug Plan audits will be conducted periodically to match supplies received (invoice) with claims activity/dispensed items.

Audits will also match payments received against signed receipts for items dispensed.

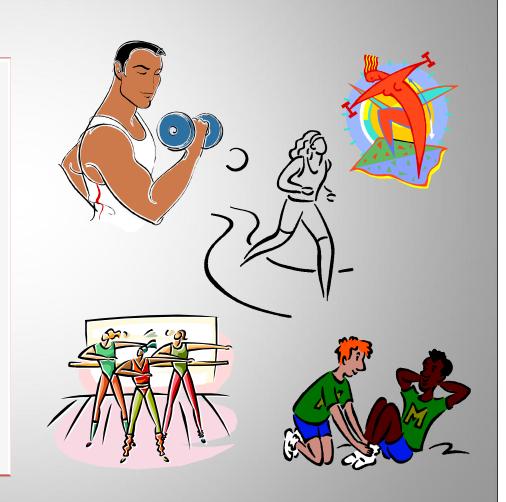
When will I get my medication?

AUGUST 2010

HEALTHY PEOPLE PROGRAM

Objective

 To provide grant funds to local organizations for well-designed community projects fostering healthy lifestyles and wellness



HEALTHY PEOPLE PROGRAM

Proposed Priority Project Areas

- Diet, nutrition and obesity control
- Self-management training and toolkits for chronic diseases
- Screening for cancer, diabetes, hypertension
- Health education
- Research

SUMMARY OF KEY POINTS

Objectives:

• Reduce costs, increase access, improve health.

Diseases covered:

11 Chronic conditions

Defined list of drugs and supplies

Over 160 items

Defined membership:

Condition certified by physician

Phase 1:

 NIB pensioners, NIB invalids, Bahamians over 65, Children/Students

Next Phase(s):

Workers, Wards of state, Other indigents, Voluntarily insured

SUMMARY OF KEY POINTS

Providers:

Contracted public and private pharmacies

Supply of drugs:

Negotiated (through BNDA) with wholesalers.

Claims processing and Payments:

 On-line claims adjudication with payments based on cost-plus formula and made once per week.

Administration:

NIB

Key efficiency measures:

• IT-driven applications; performance targets

Comparable plans:

• Jamaica, Trinidad & Tobago, Barbados

Q & A

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