

# The *INNOVATOR*

## Agency Advisory Council Forming!

In an effort to gain a clearer understanding of ways to improve and enhance services, WCS/MCI have invited 14 agency representatives to participate in an **agency advisory council**. Our goal is to have representation of an agency under each Cabinet Secretary. As you know, WCS issues a yearly customer satisfaction survey. While the survey gives us considerable insight, we feel that the council will help us gain a clearer understanding of the issues that you face and that together we can determine what works and what doesn't work.

Our first meetings are **February 2, 2016** and **March 10, 2016**. Your views and experiences are extremely valuable in helping WCS/MCI improve the workers' compensation experience for agencies and injured workers. We are excited about this collaborative council! If you have interest in participating in this council now or in the future, please feel free to contact Penny Gough at 804.775.0702 or by email [pgough@mcinnovations.com](mailto:pgough@mcinnovations.com). If you are unable to participate but would like to contribute feedback for this process, please contact Penny at the above phone number or email address.

## Getting to know your pharmacy program

In FY15 the workers' compensation (WC) program paid out over \$43M in medical expenses with a little under \$8M in pharmacy costs. NCCI studies suggest that within medical exposures, pharmaceutical expenses can be a significant driver of cost, especially when employed long term for the management of pain. Increased utilization vs. an increase in drug price per dosage is the primary cause. To combat this, workers' compensation programs need effective pharmacy benefit management programs (PBM).

Coventry First Script (FS) is the PBM partner for MCI's WC program. MC Innovations (MCI) provides eligibility data to FS through a fully automated process. The shared data includes an upload of new claim information, drug and physician restrictions and applicable claim status changes.

The FS pharmacy program includes over 61,000 major retail pharmacies and approximately 97% of independent pharmacies within the network and also has a dedicated mail order program for home delivery services. The retail program provides approximately 27% savings off of the usual & customary charges and the mail order program provides, on average, 40% savings off of the usual and customary pharmacy charges with an additional captured clinical management savings in fiscal year 2015 of \$2.1 million.

The First Script program has a First Fill process available to capture the prescriptions at the onset of the injury. You simply access [covwc.com](http://covwc.com) and click on the pharmacy tab and then pharmacy card to provide an injured worker with the First Script eligibility form or you can provide the injured worker with the First Script help desk number 1-800-791-2080 to provide the pharmacy. You can search for a pharmacy or pharmacies conveniently located for an injured worker via <http://www.covwc.com/>.

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### Special points of interest:

- > Agency advisory council meetings 2/2/16 and 3/10/16.
- > Pharmacy Benefit Management Programs help control medical spend.
- > Move Over or Slow Down!

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## The Innovator

As noted above, the mail order program offers significantly more savings to the program. It is a cost effective and convenient way to supply workers' compensation prescriptions for eligible work-related injuries. Eligible injured workers are automatically identified as candidates for the program and if agreeable are converted with no interruption to medications. Mail order is adjudicated with-in the same system as retail to ensure a consistent application of benefit management rules.

**Pharmacy cost accounted for almost \$8M in spend in FY15**

MCI is currently piloting a program aimed at promoting the use of mail order pharmacy services by sharing some of the savings with injured workers. This program allows the participating injured workers to share in the savings by receiving a percentage of the adjusted savings. The adjusted mail order savings will include all medications filled through mail order on a participating claim and the incentive check will be issued to the injured worker once every 6 months or once the claim is closed. There is a potential maximum bonus of \$150.00 earned every 6 months.

In addition to the introduction of this incentive payment to the injured worker, there are numerous benefits of receiving medications through First Script mail order. The benefits include up to 3 months (a 90 day supply) of medications vs. only 30 days at retail, easy refills on prescription(s) online or by phone and free delivery to their front door. Injured workers also receive important drug and safety information with every order, along with having 24/7 access to a Specialist Pharmacist who can answer questions regarding medications. Employees selected for the pilot include those identified by FS as having significant qualifying retail pharmacy spend.

**The First Fill Program provides pharmacy coverage from the onset of injury.**

Our PBM program has many edits and rules which increase potential savings to the workers' compensation program. Some of the edits/rules include:

- 30 Days' Supply
- Generic Substitution (in FY15 81% of the filled prescriptions were generic)
- Refill-too-soon
- Duplicate Rx
- Eligibility Determination
- Pharmacy Override Rules
- Client Specific Rules
- Injured Worker Formulary
- Clinical Database

**While the retail pharmacy program provides approximately 27% savings; shifting to mail order increases savings to 40%**

There are additional clinical programs to further assist our benefit coordinators in the management of the pharmacy component of a claim and that can also provide additional savings. These include:

- ◆ Physician outreach programs such as automated letter campaigns suggesting generic opportunities; letters noting narcotic usage and suggesting methods to reduce opioid dependence, addiction, and abuse as well as offering, therapeutic alternatives.
- ◆ Point-of-sale therapeutic alternative program that interrupts the dispensing of medications such as Cymbalta, Celebrex, Flector Patches and Lyrica for clinical review and possible medication alternatives.
- ◆ Retrospective Outreach by a FS Pharmacist to the prescriber following a second narcotic fill, with the intent of altering future prescribing patterns and driving healthier outcomes for injured workers using narcotics.
- ◆ Drug Utilization Assessment and associated Peer to Peer utilization which is a clinical review done by a pharmacist to identify risks, alternative treatment via modifications of the current drug regimen or more cost effective alternatives.

First Script has a dedicated service team, automated processes, clinical support and data connectivity, all of which support customer focused, cost effective solutions for injured workers and our workers' compensation program.



## Business Travel - Move Over or Slow Down!

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All of us at some point in time have found ourselves sitting in traffic and not moving. If the delay happens on Main Street in downtown it might be an inconvenience but usually there are alternate routes that can be used to clear out the traffic jam. If that moment happens on an interstate highway it can mean sitting in the middle of nowhere for hours with no services like food, water or restrooms readily available. It can be especially frustrating when you are traveling for business reasons and have appointment times to meet. Your safety and the safety of other motorists is more important than your appointment time. You can always re-schedule if you're delayed. Many Commonwealth of Virginia employees travel extensively for business and some are injured on the job every year in motor vehicle crashes. Here are some things to remember when you are traveling around Virginia.

Congestion on our highways and byways is a growing issue and non-recurring incidents contribute to that congestion. A non-recurring incident is a motor vehicle crash, vehicle fire, medical emergency, mechanical breakdown, police activity (i.e. traffic stop for a speeding ticket), sinkhole, flooding, winter weather or any other activity that is unplanned and unexpected along the highway. In this day and age of instant gratification many people don't understand why these events can't just be resolved quickly and moved off the road so we can proceed along our way.

A non-recurring event usually requires a response from State or Local Police, Fire, EMS, VA Dept. of Transportation and/or a towing & recovery operators. In some cases all of these agencies might respond to the same incident. A motor vehicle crash with injuries and entrapment and involving a big rig will usually get a lot of attention and a significant backlog of traffic. All of the agencies mentioned above will respond and then travel conditions in the immediate vicinity deteriorate rapidly.

Emergency responders don't like to work roadway incidents. It's a dangerous work location that too often ends up being the site of an emergency responder and/or their vehicle being struck by a distracted driver. Emergency responder deaths and injuries occur with surprising frequency. Emergency vehicle damage from being hit by a passing vehicle is widespread. Believe it or not, there are reasons for the way emergency vehicles park at incident scenes. That fire truck parked at an angle is there to protect responders and indicate to you that they are stopped, parked and not moving. Those high-visibility chevrons on the back of fire trucks are florescent and reflective so you can see them from a distance in both daytime and nighttime conditions. The emergency responders themselves are wearing high-visibility garments for the same reason. They want you to be able to see them in low visibility conditions, daytime and nighttime. Advance warning signs, cones, flares and arrow boards are all used to help warn and direct traffic safely around an incident. The activities are well coordinated and choreographed between agencies even though it might not seem that way to the untrained eye.



Check out public service announcements:

<http://www.respondersafety.com/SDMO.aspx>

<http://www.respondersafety.com/Videos/Move-It.aspx>



Here are some things you can do when traveling to help ease congestion and keep you and the emergency responders safe around traffic incident scenes. Every state has a “Move Over” law. Very simply, that law says that when you approach an emergency vehicle parked on a roadway with their emergency lights activated you should move over one lane to pass them if it is safe to do so. If for any reason you can’t move over one lane safely, then you must slow down as you pass the emergency vehicle being careful to watch for people at the scene.

The Move Over law **does not say** that you should stop in the travel lane and use your smart phone to take photos or video! It **does not say** you should roll down your window and ask about what happened. And the law certainly does not say you should stop to watch the activity for an extended period of time. Move Over one lane if possible and keep moving. Watch the traffic in front of and around you and not the incident scene. Follow the directions of emergency responders. Be prepared for drivers to slow down or make sudden moves and don’t tailgate. Allow drivers to merge if you happen to be in the lane that is moving. Blocking people from merging accomplishes nothing and will not get you to your destination any faster. In fact it might cause further delays for you and other travelers due to secondary crashes. Use a little “common courtesy” which doesn’t appear to be too common these days. Check out this public service announcement about “Move Over/Slow Down” and please share with others: <http://www.respondersafety.com/SDMO.aspx>

There is also a “Move It” law in Virginia that says if you are involved in a minor accident with no injuries that you can and should move your vehicles out of the travel lanes if at all possible. Move to a safe location like a parking lot, rest area, or wide shoulder and get as far away from passing traffic as possible. Check out this public service announcement about “Move It” - <http://www.respondersafety.com/Videos/Move-It.aspx>

Traveling on state roads and highways is a daily task for many state employees. Be prepared for roadway incidents and watch out for emergency personnel working along roadways. Avoid distractions while driving and Move Over or Slow Down when approaching emergency lights along the way. Pack your patience when traveling and leave yourself plenty of time to get to your destination allowing for some extra time in case you encounter traffic congestion. Your safety is more important than your appointment.

### **Tips for Teamwork**

- ◆ Want to recognize someone for the service you just received? Please be sure to click on the link included in the MCI team’s e-mail signature.
- ◆ When faxing or sending emails regarding workers’ compensation claims to MCI team members, please be sure to copy: [COVimaging@yorkrsg.com](mailto:COVimaging@yorkrsg.com). This ensures that our electronic file is properly documented with all relevant information.
- ◆ We receive over 300 record only claims each month. Some of these will change to medical only or lost time claims. Please notify the MCI staff as soon as you have knowledge that treatment and/or lost time is involved. The sooner we have information the sooner we can investigate.



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Be sure to  
copy  
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when sending  
faxes and  
emails.

### **SAVE THE DATES! Regional Roadshows**

**5/10/16—Roanoke**  
**6/1/16—Hampton**  
**6/6/16—Richmond**  
**6/9/16—Staunton**

# MCI Claim Team Organization Chart

Congratulations to Ian Clare, Linda Hsu, Ivy Tsang, Kim Byers and Ashley Bessie on promotions! See current organizational chart below.

