Webinar: Targeting Populations for VBID
– a HealthcareWebSummit Event, 1PM Eastern, Thursday, April 17th, 2014

Improving Medication Adherence and Reducing Costs
Targeting Populations for Value-Based Insurance Design

Thursday, April 17th, 2014
1:00 - 2:00 p.m. Eastern (10:00 a.m. to 11:00 a.m. Pacific)

- Presentation of Walgreens research findings
- Optimizing VBID by targeting the sickest, least adherent and most costly patients

- How to successfully identify and target optimal populations
- The impact of VBID on medication adherence and overall costs
- The techniques, strategies and implications identified in specific VBID initiatives
- Considerations and issues for future studies and strategic planning regarding VBID

Faculty:
Bobby L. Clark, PHD, MSPharm, MHA, MS, MA
Senior Director, Clinical Outcomes & Analytics
Walgreens

Registration

Individual Registration Fee: $195. Web Summit Flash Drive: $45 for attendees; $260 for non-attendees after the event.

Corporate Site licensing also available (see inside for details) Use the form on the back page to fax or mail your registration or call 209.577.4888

Online: To register or get detailed information on the web, go to:
http://www.healthwebsummit.com/vbid041714.htm
Overview

VBID programs are emerging as a new benefit design focused on aligning patients' out-of-pocket costs, such as copayments and deductibles, with the value of health services. The model reduces barriers to high-value services such as preventive and chronic care therapies through lower costs to patients, while discouraging unproven, misused or low-benefit care through higher costs, ultimately improving health outcomes. Studies have shown that copayment reductions are often associated with improvements in medication adherence.

As employers continue to look for innovative ways to manage health care costs while keeping employees healthy, VBID programs have emerged as a viable and effective solution. However, stakeholders have only just begun to look at whether these VBID programs are reaching the employees who can benefit the most from the programs.

Recent Walgreens research provides new insight into how to successfully reach these sickest and most costly patients. Walgreens examined an employer-based VBID program which eliminated the co-pay for generic anti-diabetic and anti-hyperlipidemic (cholesterol) medications. Eligible members (diabetic and/or high-cholesterol beneficiaries) were required to participate in a case management or wellness program to receive the zero co-pay benefit. Both the enrolled diabetic and high cholesterol populations had higher adherence.

A related Walgreens study examined medication adherence and the costs for generic diabetes and cholesterol medications resulting from participation in a zero copay VBID program that used the reduction in cost sharing to incentivize members to use more generic drugs and to enroll in a care management coaching program. The findings helped demonstrate that a value-based program can have a positive impact on adherence and cost outcomes among those who participate.

Please join Walgreens' Bobby Clark on Thursday, April 17th, 2014 at 1PM Eastern as he addresses these research findings, and implications for stakeholders seeking to improve patient medication adherence and reduce overall costs.

Learning Objectives

Participants will be able to:

1. Review research findings from applicable Walgreens studies.
2. Examine the overall impact of specific Value-Based Insurance Designs deployed in the studies.
3. Consider how to optimize VBID by identifying and targeting applicable patient populations.

4. Examine available techniques that can be combined with targeting and benefit design to maximize adherence.

5. Explore the implications of applying strategies utilized in the studies to other covered populations and specific prescription benefits.

6. Identify considerations and issues for future studies and strategic planning regarding VBID.

7. Engage in interactive learning through online question submission, attendee feedback and opportunity for follow-up questions, and networking with attendees, faculty and other professionals through a dedicated LinkedIn group.

### Who Should Attend

Interested attendees would include:

- C-Suite Executives
- Medical Directors
- Population Management Executives and Staff
- Care Management Executives
- Analytics and Informatics Executives and Staff
- Pharmaceutical Management Executives and Staff
- Strategy and Planning Executives and Staff
- Innovation and Transformation Executives
- Clinical and Business Intelligence Staff
- Employee Benefit Executives and Staff
- Product Development and Benefit Design Executives
- Other Interested Parties

Attendees would represent organizations including:

- Health Plans
- Employers
- Hospitals and Health Systems
- Provider Networks
- Accountable Care Organizations
- Pharmaceutical Organizations
- PBMs
- Other Healthcare Providers
- Care Management Organizations
- Population Health Organizations
- Third Party Administrators
- Solutions Providers
- State and Local Government Agencies
- Associations, Institutes and Research Organizations
- Media
- Other Interested Organizations
Dr. Clark is a Biostatistician and Epidemiologist by training and presently serves as a Senior Director in Walgreens Clinical Outcomes & Analytics department in Deerfield, IL. Formerly, he served as the President of Clark & Associates Statistical Consulting, LLC.

He also served as the Manager of Epidemiology for Covidien’s Pharmaceutical division in St Louis, MO, and earlier as a Biostatistician for Sarah Cannon Research Institute in Nashville, TN.

Bobby’s past experience also includes the Disease Management Industry where he served as the Senior Director for Healthways’ Center for Health Research. Prior to joining Healthways, he served as a Biostatistician and Epidemiologist for Cerner Corporation in Kansas City, MO, and jointly held an Adjunct appointment as an Assistant Professor of Preventive Medicine at Kansas City University of Medicine and Biosciences.

Prior to joining Cerner he was employed as an Assistant Professor of Medicine (Research) at the University of Mississippi Medical Center and jointly served as the Special Assistant to the Director, and co-investigator of the National Institutes of Health’s Jackson Heart Study.

His professional experience has been in the areas of Oncology, Cardiovascular Diseases, Stroke, Diabetes, Obesity, HIV/AIDS, Pain Management, and Specialty Pharmaceuticals.

Dr. Clark holds 6 graduate degrees, 3 from the University of Michigan, 1 from the University of North Carolina’s School of Public Health, 1 from the University of Florida’s College of Pharmacy, and 1 from the University of Mississippi. His graduate degrees are in the following areas, Clinical Research Design & Statistical Analysis, Applied Pharmacoeconomics, Healthcare Administration, Demography, and Sociology. His undergraduate degree is in Mathematics.
Corporate Pricing, Terms and Conditions

Individual vs. Corporate Site License Pricing

- Individual registrations cover a single phone line.
- Multiple persons may listen via speaker phone for the individual registration fee.
- Each individual receives a unique dial-in ID that is not re-useable.
- Corporate pricing is available when registrations are desired for more than one phone line.

Corporate Site License Attendee Registrations

- Organizations individually register all participants for web access and e-mail delivery unless arranged otherwise with MCOL, but corporate pricing will apply based on the number of employees registered.

Eligibility

- Corporate pricing is only available to single organizations, or parent organizations and their affiliates.
- Professional Associations or other groups of separate organizations may not combine for corporate pricing.

Pricing Schedule

Events Priced at $195 Individually: Site License pricing for one of any $195 individual events is based upon the number of covered phone lines, according to the following table.

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Equivalent Price per employee and total savings compared to individual $195.00 price*:

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* based upon the midpoint of employees in each range