

## The Value of NEHI

We are proud to share our mission and accomplishments with you.

The Network for Excellence in Health Innovation (NEHI) contributes solutions to complex health care issues by promoting valuable innovations. NEHI has been doing this important work for over 20 years. We continue to build on a legacy of disciplined, analytical research, and multi-disciplinary discussions. Much of our work is focused on payment models, workflow changes, and policies that may inhibit access to pharmaceuticals, diagnostics, and care models that can make a significant difference in individuals' health and the health care delivery system.

NEHI's members come from across the health care landscape --payers, hospitals and health systems, pharmaceutical and biotech
organizations, service providers, and others --- and our work reflects
what is important to them. Our projects are funded by organizational
sponsors, often NEHI members. Individual members and nonmembers alike join our projects as subject matter experts, reviewers,
and participants in convenings and other meetings.

We are member-driven, but we bring an independent voice to untangle conflict and offer paths forward. Our projects clarify complex perspectives to produce recommendations in reports that reflect our research and the meaningful and open conversations we have facilitated among subject matter experts with divergent views. The experiences they have shared ground our recommendations in existing circumstances, but do not curtail the ambition of our vision. NEHI's ultimate value is found in our ability in turning inspired ideas into thoughtful, actionable recommendations, from both policy and implementation standpoints.

As explained further below, NEHI shares our work through published reports, webinars, and presentations to policymakers and practitioners, as well as via interviews with the media and third-party publications.

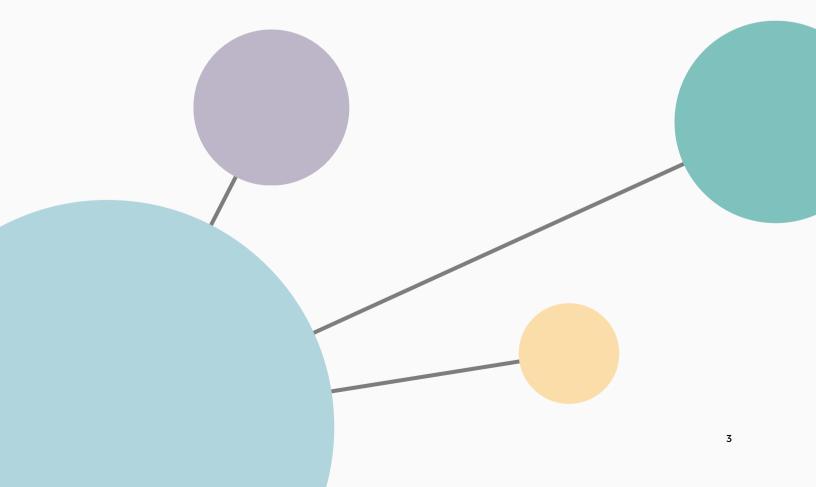
We invite you to explore our work in the pages to follow --- and please visit our website, www.nehi-us.org, to find out more about NEHI and our ongoing commitment to improving health care for everyone. If you would like to find out more about NEHI, how to become a member, or how to participate in or sponsor projects, please reach out to us via our website. We would love to hear from you.



## Our Work in 2023

In 2023, NEHI's work covered some of the most important health care issues in behavioral health, administrative waste, value-based contracting, equity in clinical trials, and cancer screening.

All told, in 2023, more than 84 organizations and 40 individuals participated in our work either as sponsors or subject matter experts, representing an investment of time and resources as well as invaluable perspectives from all health care stakeholders. We thank all our members, sponsors, and participants for driving this work.



## Diagnosing Hope: The New Era of Alzheimer's Disease Treatment Hinges on **Innovations in Diagnostics**





Funded by Genentech, Eisai Inc., and Eli Lilly & Company, this timely project assesses the status of current and emerging innovations for early assessment, diagnosis, and treatment of Alzheimer's disease, and identifies actionable and pragmatic recommendations for policy and practice.

With newly approved treatments for Alzheimer's disease coming to the market in 2023, and likely early 2024, it becomes more important than ever to settle on recommendations for diagnostic tools that can help identify the disease prior to its progression and among different populations.

In addition to the report, NEHI convened a panel of policy makers and others in Washington DC, and remotely in early 2023.

To view the entire report, please link to: Diagnosing Hope: The New Era of Alzheimer's Disease Treatment Hinges on Innovations in Diagnostics (nehi-us.org)

## Addressing Persistent Disparities in Colorectal Cancer Screening Among Racially and Ethnically Diverse Populations

Published: August 8th, 2023

**Project Sponsor:** 



Through this work, funded by PhRMA, NEHI sought to propose recommendations that, if adopted, may help to better illuminate and subsequently close disparities in CRC screenings. This research concluded with specific proposals that could increase screening rates among people of color, who are disproportionately impacted by poor screening percentages (and, so, a higher percentage of disease and mortality).

Colorectal cancer (CRC) is the second leading cause of cancer death in the US. According to the American Cancer Society, in 2023, more than 50,000 people will die from the disease. This figure, while staggering, fails to recognize the continued differences in CRC incidence and mortality that certain populations face. For example, non-Hispanic Black individuals have higher CRC incidence (41.7 per 100,000) and mortality (17.6 per 100,000) than non-Hispanic White individuals (35.7 and 13.1 per 100,000, respectively). Moreover, it does little to elevate to what degree disparities in preventive screenings account for these differences.

Timely and consistent screenings are a proven method for lowering CRC incidence and mortality. Early screenings help identify CRC before it has progressed. Moreover, screenings can be preventive in nature: practitioners can remove potentially cancerous polyps found during colonoscopies. Racial disparities in access to CRC screening, however, have persisted for decades. While recent data suggests that gaps are closing, as we discuss in this report, the data do not present the full picture.

NEHI organized a webinar on this critical issue in October 2023. To read the full report, please visit: <u>Addressing Persistent Disparities in Colorectal Cancer Screening Among Racially and Ethnically Diverse Populations (nehi-us.org)</u>

# Medicare Vaccination Coverage After the Inflation Reduction Act: Action Still Needed to Enable High Vaccination Rates Among Medicare Beneficiaries

Published: May 8th, 2023

**Project Sponsors:** 



Is there a better way to consolidate vaccine coverage among Medicare beneficiaries? That was the key question this research (sponsored by Moderna, Johnson & Johnson, and GSK) asked.

Medicare's coverage of vaccinations recommended for adults is split between its Part B medical benefits and Part D prescription drug benefits, although coverage of vaccinations for two highly prevalent infectious respiratory diseases, influenza, and COVID-19, are both covered under Part B medical benefits. The split in coverage is ripe for reassessment. For example, Medicare coverage of new and oncoming vaccinations for the respiratory syncytial virus (RSV) has defaulted into Part D coverage, resulting in split coverage of the influenza-COVID 19-RSV triad that will reduce opportunities to promote, administer, and reimburse vaccinations for these recurring disease threats on a unified basis. Other factors, including increasing enrollments in Medicare Advantage-Prescription Drug Plans, also compel a new look at how Medicare's coverage of all recommended vaccinations could be more effective.

NEHI brought together key stakeholders in late 2022 and early 2023 to assess Medicare vaccination coverage. "Medicare Vaccination Coverage After the Inflation Reduction Act" summarizes the findings of NEHI staff on the future of Medicare vaccination policy.

To read the full report, please visit: <u>Medicare Vaccination Coverage After the Inflation Reduction Act: Action Still Needed to Enable High Vaccination Rates Among Medicare Beneficiaries (nehi-us.org)</u>

### Advancing Prior Authorization Automation Across Massachusetts

Published: April 25th, 2023

Co-Leader:



**Project Sponsor:** 



The time to automate is now. In a project sponsored by the Massachusetts Health Policy Commission, Change Healthcare, Cohere Health, HOOK MD, and ZeOmega, NEHI collaborated with the Massachusetts Health Data Consortium (MHDC) and a broad array of stakeholders to examine and propose recommendations regarding the adoption of automated prior authorization processes and how the automated process, when implemented according to a statewide roadmap and adhering to the same set of data exchange standards, has the ability to reduce administrative burden on providers and payers alike. The Massachusetts Health Policy Commission endorsed several of NEHI's recommendations to automate, including recommendations to follow a statewide roadmap and technical and financial assistance, in its 2023 Annual Health Care Cost Trends Report Policy Recommendations.

NEHI and MHDC spoke together at a panel discussion organized by the Massachusetts Association of Health Plans (MAHP) at a well-attended forum in mid-2023 to further the conversation and answer questions from payers, providers, governmental stakeholders, policy makers, and pharmaceutical organizations on the implications of the automation recommendations.

This important work, started in Massachusetts, has been picked up in California and NEHI is currently working with the California Health Care Foundation (CHCF) to bring multi-stakeholders together to discuss the issues related to prior authorization and identify potential reforms that make sense for California.

It's important to note that, like much of NEHI's work, this project was built on previous research. In 2021, NEHI released the results of research on streamlining the prior authorization process (please see: <u>Streamlining Prior Authorization (nehi-us.org</u>)).

To read our current full report, please visit: <u>Advancing Prior Authorization Automation Across Massachusetts (nehi-us.org)</u>

## Scaling Behavioral Health Integration in Primary Care: Wading through the Complexity to Tackle a Decades-Old Challenge

Published: March 22nd. 2023

**Project Sponsors:** 



Underwritten by Aetna/CVS, with contributions from Blue Cross Blue Shield of North Carolina, Concert Health, and NeuroFlow, NEHI investigated how to expand the integration of behavioral health in primary care.

Working with a national panel of subject matter experts and organizations at the forefront of the issue, NEHI examines the current state of behavioral health integration and provides a comprehensive look at the evolution of approaches and initiatives with a call for flexibility and greater collaboration between providers and payers to approach expansion more urgently.

In addition to mentions in the media, NEHI wrote an essay that appeared in Health Affairs' blog.

To see the full report and the Health Affairs piece, please connect via this link: <u>Scaling Behavioral Health Integration in Primary Care: Wading through the Complexity to Tackle a Decades-Old Challenge (nehi-us.org)</u>

## **Envisioning Value-based** Provider Payment for Obesity Treatment and Support

Published: March 6th, 2023







This critical research, sponsored by Eli Lilly, Form Health, and the Obesity Medicine Association, examines obesity treatment and support -- growing unmet patient needs, better tools, and an opportunity for value-based payment.

Ten years after the American Medical Association declared obesity a chronic disease, unmet patient medical needs associated with obesity are growing. Yet obesity treatment and support are not a focus of the ongoing movement towards value-based care. NEHI's report maps the clinical journey of patients with obesity through their encounters with the health care system and applies well-accepted principles of value-based payment that could support a transition to safe, clinically appropriate, and cost-effective obesity care, delivered at scale.

This project featured a far-reaching webinar with national subject matter experts, video 1:1 interviews with obesity medicine specialists, and several pieces in the press --- including Bloomberg and an essay in Health Affairs' blog. To see all the complete publications, videos, and webinars, please visit: Envisioning Value-based Provider Payment for Obesity Treatment and Support (nehi-us.org)



## CFRO Indianapolis: Community Focused Research Organization

In this ongoing project, we are testing whether forming a group of organizations with varied stakes in clinical research trials is effective in developing strategies to improve the participation of underrepresented groups in clinical research trials. We are partnering with Eli Lilly (project sponsor) to constitute a pilot board of our "community-focused research organization" and drawing from the academic, health system, and community-based organizations in Indianapolis, including those representing persons of color.

The project involves helping to create a process that builds bridges within a community to ensure that its needs are understood and addressed in clinical trial development and recruitment. NEHI is looking to translate this work and carry its key learnings into other communities across the nation.

## Developing Clinician Training and Technological Supports for Tele-Mental Health

Working with funding from Point32 Health, NEHI is identifying standards for the skills and training that providers and patients require to make the most effective use of tele-mental health.

#### Health Technology Assessment

In this project, we investigated the ways in which new drugs and other health care technologies are currently evaluated and explored the pros and cons of establishing a publicly funded HTA organization in Massachusetts. Working with key stakeholders across the Commonwealth, NEHI took a non-biased look at this complex issue, with the ultimate outcome still to be determined. NEHI anticipates HTA-related projects to come in 2024.

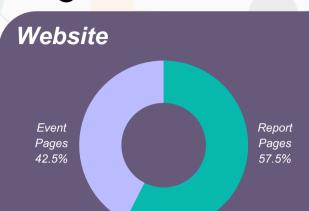
## Capacity Building for Patient Engagement in Research on the Effectiveness of Telehealth in SUD Treatment

Building from its work on the use of telehealth to treat behavioral and mental health disorders, NEHI is identifying pathways for patients of color in the Appalachia region to contribute to research on the effectiveness of digital modalities in treating substance use disorders. With funding from the Patient-Centered Outcomes Research Institute (PCORI), and the participation of several community organizations, the project will include patient focus groups and advisory councils to create sustainable structures for patient-research collaboration.

## Paths Forward on Prior Authorization: Examining California's Priorities

This project builds on work NEHI and MHDC led in Massachusetts and is designed to examine issues with prior authorization in California. Supported by the California Health Care Foundation, NEHI will work with an Advisory Committee, representing a broad range of providers, payers, and consumer advocates, to describe the scope of prior authorization in California and potential ways to reduce burdens associated with its application, while still retaining the benefits it provides. The work is highly relevant as California continues to address health data interoperability and advance legislative proposals that address providers' frustrations. NEHI will produce recommendations in a final report in early 2024.

## **Key Metrics in 2023**



28,238 Total Visits to Website 4,445 Total Visits to Reports 3,286 Total Visits to Events

#### Webinars



6 Webinars



639 Webinar Registrants



418 Webinar Attendees

#### Videos



408 Video Views

#### Newsletters



9 Newsletters Sent

#### Social



102 Social Posts



2,580 Page Visits



510 Engagements



436 New Followers

#### **NEHI Members**

(as of January 2024)

\*Members of NEHI's Board of Directors

#### **Associations/Advocacy**

- Alliance of Community Health Plans
- American Cancer Society New England
- American Diabetes Association
- · American Heart Association
- American Psychological Association (APA)
- Better Medicare Alliance
- Biotechnology Innovation Organization (BIO)
- Cancer Support Community
- CancerCare
- Cardiovascular Research Foundation
- · Caregiver Action Network
- HIMSS
- Innovation and Value Initiative
- Massachusetts Association of Health Plans (MAHP)
- Massachusetts Biotechnology Council
- Massachusetts Health and Hospital Association
- Massachusetts Health Data Consortium
- Massachusetts Medical Society (MMS)
- · National Consumers League
- · New England Council
- Project HOPE
- · UsAgainstAlzheimer's

#### **Providers**

- · Boston Children's Hospital\*
- Cedars-Sinai
- Concert Health
- Mass General Brigham\*
- Steward Health Care System, LLC\*
- UMass Memorial

#### **Payers**

- Blue Cross Blue Shield of Massachusetts\*
- C3 (Community Care Cooperative)\*
- CVS Health\*
- Point32Health\*

#### **Pharmaceuticals**

- AstraZeneca
- Biotechnology Innovation Organization (BIO)
- · Eli Lilly and Company
- Genentech
- Johnson & Johnson
- Massachusetts Life Sciences Center
- Merck\*
- Moderna
- Novo Nordisk
- PhRMA
- Rhythm Pharmaceuticals\*

#### **Services**

- Chartis
- Epstein Becker & Green, P.C.\*
- · Foley Hoag, LLP
- Greater Boston Chamber of Commerce
- Manatt\*
- Pimlico Pond Investments\*
- URAC\*
- Withum

#### **Health Management and Technology**

- Grail
- NeuroFlow
- ZeOmega

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**Cristy Taylor** Chief of Staff



**Wendy Warring**President and CEO

## Thank you!

Thank you for taking the time to read this report. If you

Thank you for taking the time to read this report. If you have any questions or would like to discuss our findings further, please don't hesitate to reach out to us.

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