

DATA REVIEW: BLUEPRINT vs NON-BLUEPRINT PRACTICES

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DATA SET OVERVIEW

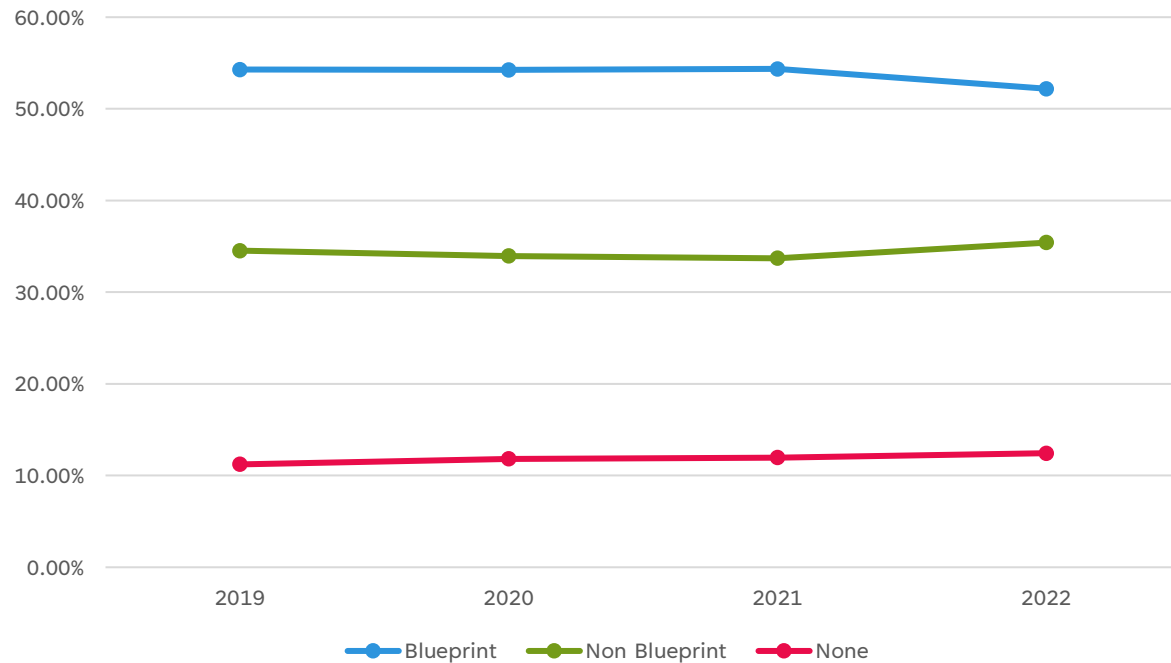
- Claims data extract covers fiscal years ending in June of 2019, 2020, 2021, 2022.
- Dataset represents claims filed during these fiscal years that were reported to the VHCURES all payer claims database.
- Individuals were classified into a MH/SUD category if they had at least 1 inpatient or at least 2 outpatient claims reported with any relevant (SAMHSA ICD-10-CM) diagnosis code during the current or prior year.
 - ICD-10-CM codes excluded from the MH/SUD categorization included those for dementia, delirium, other cognitive disorders, developmental disorders, and screening and history of MH/SUD codes.

BLUEPRINT AND NON-BLUEPRINT CATEGORIZATION

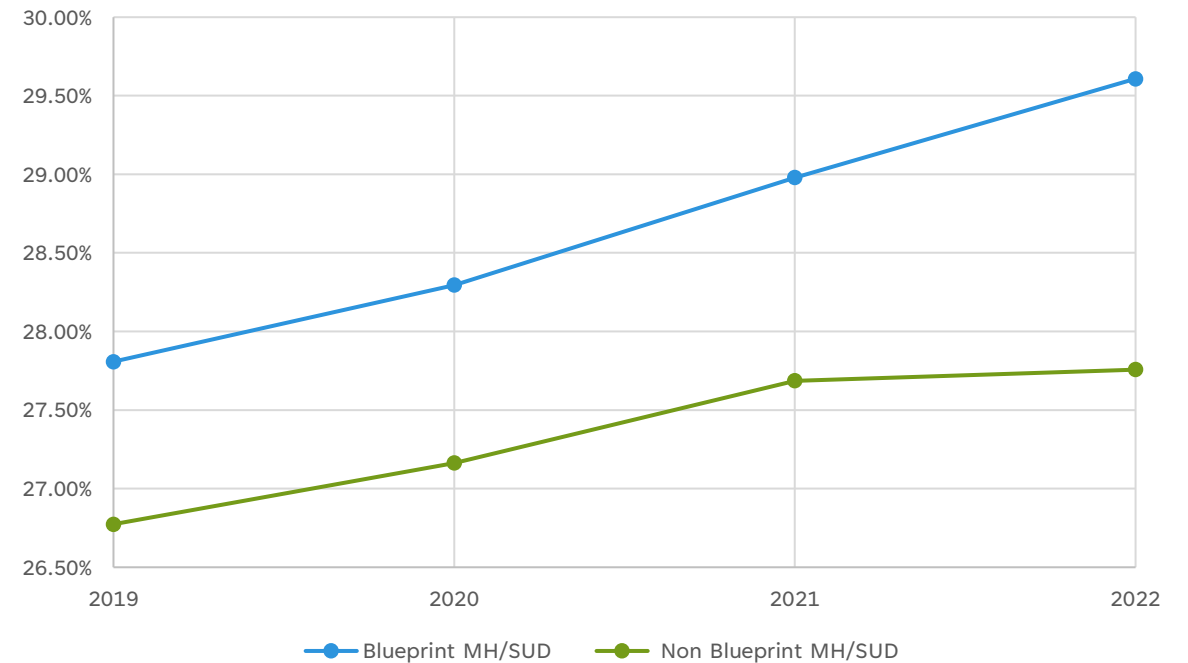
- Individuals were categorized as attributed to a Blueprint Primary Care practice, attributed to a Non-Blueprint Primary Care practice, or as having no attributable primary care practitioner (None) based on claims data.
- Counts of various utilization measures were then computed based on the Blueprint and non-Blueprint categorizations.
- This allows for a preliminary look at some measures in Blueprint versus non-Blueprint practices.

OVERALL INDIVIDUAL TRENDS

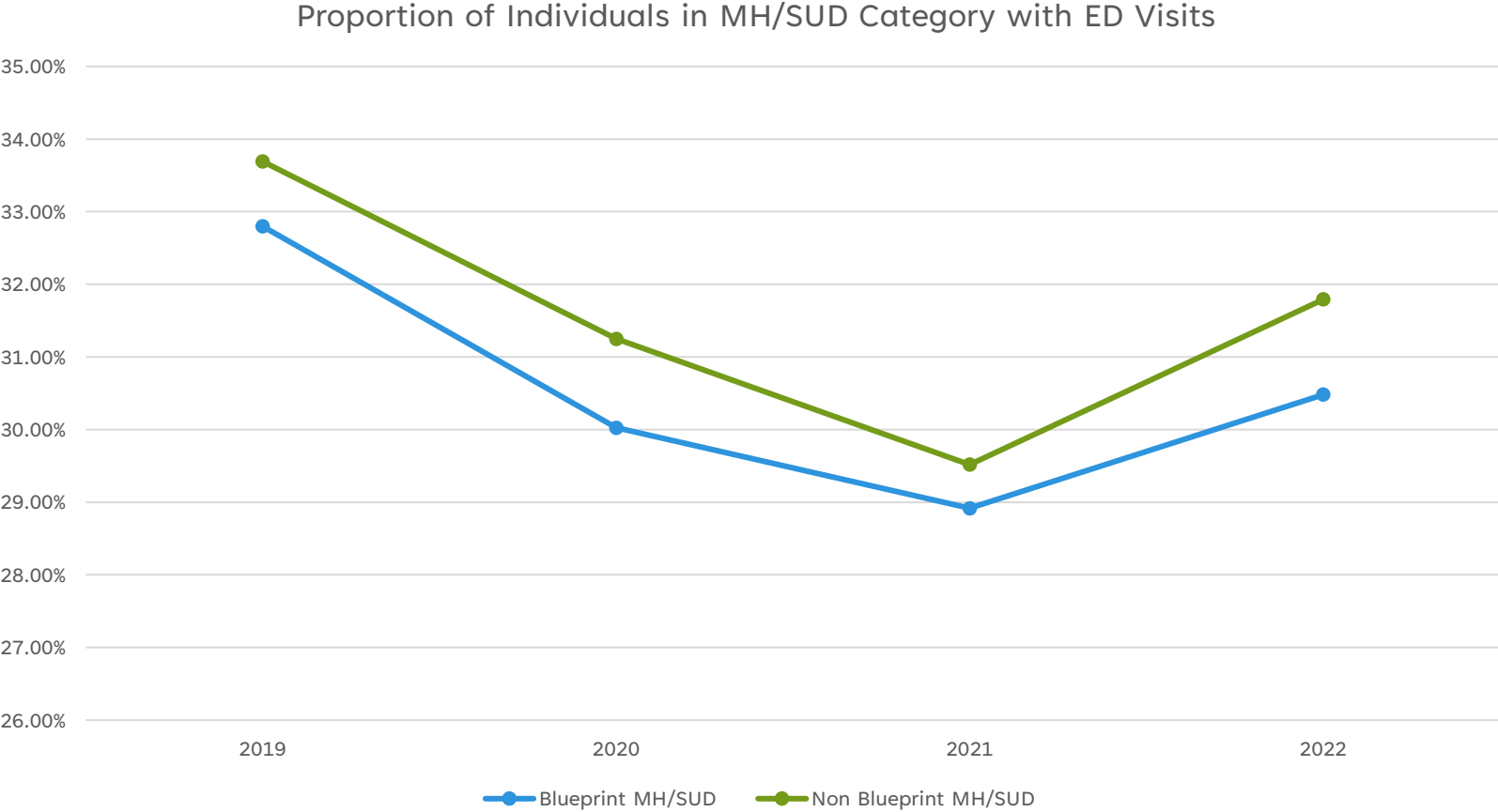
Proportion of Individuals with Primary Care Practice types



Proportion of Individuals in MH/SUD Category



BLUEPRINT VS. NON-BLUEPRINT ED VISITS



BLUEPRINT VS NON-BLUEPRINT CLAIMS COSTS

Per Member Per Year Medical And Pharmacy Claims for All Individuals			
Year Ending	Blueprint Attributed	Non-Blueprint Attributed	Difference
2019	\$8,059.97	\$10,435.74	\$2,376.17
2020	\$7,711.31	\$10,298.18	\$2,586.86
2021	\$8,254.25	\$11,005.17	\$2,750.91
2022	\$8,580.73	\$11,253.14	\$2,672.41

BLUEPRINT VS NON-BLUEPRINT CLAIMS COSTS

Per Member Per Year Medical And Pharmacy Claims for MH/SUD Categorized Individuals			
Year Ending	Blueprint Attributed	Non-Blueprint Attributed	Difference
2019	\$12,265.25	\$14,694.60	\$2,429.35
2020	\$11,501.17	\$14,302.17	\$2,800.99
2021	\$11,924.43	\$14,960.52	\$3,036.09
2022	\$11,986.57	\$14,975.32	\$2,988.75

KEY FINDINGS: VISITS & POPULATION

- Blueprint practices have a higher proportion of individuals with claims in the MH/SUD category.
- A lower proportion of individuals with claims in the MH/SUD category attributed to Blueprint primary care practices have ED claims than of such individuals attributed to non-Blueprint primary care practices.
- A higher proportion of Blueprint attributed individuals visited their primary care practitioner each year.

Key Findings statistically significant at the 0.01 level using two proportion t-tests.

KEY FINDINGS: CLAIMS COSTS

- Blueprint attributed individuals have an overall lower per-member per-year claims amount; this trend is consistent and nontrivial.
- Annualized rate of increase of overall claims is 1.6% for Blueprint attributed individuals compared to 1.9% for non-Blueprint attributed individuals (not adjusted for inflation).
- Blueprint attributed individuals had an annualized rate of increase in Pharmacy claims of 5.2% , while non-Blueprint attributed individuals had an annualized rate of increase in Pharmacy claims of 6.2% (not adjusted for inflation).

QUESTIONS

Blueprint for Health Central Office

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