



City of Springfield OR Case Study

Value-Based Plan Boosts Health and Reduces Sick Days

Dec 2007

“We needed to address the rising costs of diabetes,” says Ardis Belknap, Human Resource Manager for the City of Springfield, Oregon. “We knew the Asheville community model for diabetes improvement, and we worked hard to institute the model. But we wanted to do more—we wanted to provide business-based evidence that the model delivered. So we created a randomized study that could measure the results.”

with their doctor to consider alternatives to the tired approaches they had tried in the past,” says Belknap. “They were so excited about having affordable medications that leveled out their blood sugar and helped them maintain better health throughout the day.”

The plan:

1. Enroll eligible employees based on a diagnosis of Type I or Type II diabetes.
2. Randomize participants into two groups: control and intervention.
3. Collect clinical data at the onset of the study (Dec 2005-Feb 2006), repeat in early 2007.
4. Provide waiver of co-payments to all participants for prescription medications and medical visits related to diabetes control.
5. Provide educational materials to control group and face-to-face consultants with pharmacists to intervention group.
6. Track clinical and financial outcomes over time.

The study, called “EMPOWER,” also included Lane County and the City of Eugene, Oregon, and was conducted through the Oregon School of Pharmacy. Twenty-five percent of eligible employees enrolled in the program for people with Type I and Type II Diabetes. Study participants received waived out of pocket expenses for prescription medication and medical visits related to diabetes. In addition, the control group received educational materials, and the intervention group received consultations with a pharmacist consultant. Early results have been encouraging.

“Participants told me they were encouraged to work

The City of Springfield, Oregon has measured the improvement in diabetes management through a randomized study based upon the Asheville model.

1. Hemoglobin A1C dropped 30% in the control group (comparable to other studies) and 50% in the intervention group with pharmacy consultants.
2. Sick leave decreased by 30% for the intervention group.
3. Low-density lipoprotein (LDL) dropped more in the intervention group:
 - Goal: LDL concentration of less than 100 mg/dL.
 - Baseline: 107mg/dL for control group, 101mg/dL for intervention group.
 - Mean changes at study end: decrease of 1.6mg/dL in control group, decrease of 5.8mg/dL in intervention group.
4. Future plans: Build a wellness center with 2 onsite professionals; an exercise physiologist and a nurse practitioner
5. Future plans: Launch a value-based depression model to improve total health management.

For more information, visit our website at www.vbhealth.org, or email us at cyndy@vbhealth.org or gjudd@vbhealth.org

Quick glance: program’s business results

The Asheville Model of community-based diabetes control provided the platform to improve the health of the citizens of Springfield.

The Asheville model is an icon in health improvement regarding diabetes management. The City of Springfield, working with the Oregon School of Pharmacy, quickly understood the power of the model. But the City also wanted to be the leader in producing evidence that the model impacted businesses, so a randomized study was created in which enrollees would receive one of two interventions:

1. The control group received printed educational materials.
2. The intervention group received one-on-one counseling with pharmacist experts to encourage adherence with the total health management of diabetes, including physician and lab visits, retinal and foot exams, medication and testing, and exercise and nutrition.
3. Results: 30% decrease in sick days for the enrollees in the pharmacist-consultant group.

Ardis Belknap, a woman with extraordinary vision, inspires others to embrace the values of the City: Passion, Integrity, Results

Who is the City of Springfield, Oregon?

52,864 Residents

430 Employees
1100 Covered Lives
\$281,789,000 million fiscal

Fully-insured benefit plan through PacificSource

Plan Deductible: \$1500
3-tiered prescription drug benefit: generic, preferred brands, non-preferred brands