## COST PLUS PRICING "THE NEXT RIGHT THING FOR HEALTH PLANS."

KATHLEEN SULLIVAN, FIRST FLORIDA INSURANCE BROKERS
MICHAEL R. VAN GERPEN, ELAP SERVICES

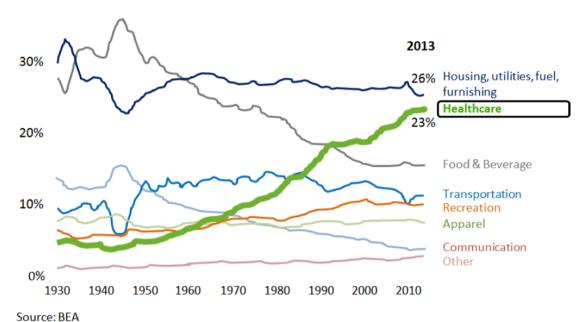




### WHAT WE KNOW?

Percent of Household Spending, 1930-2013

40%





elap

### PUBLIC ENTITIES BEAR AN EXTRA BURDEN

- FIDUCIARY ROLE TO TAX PAYERS
- FIDUCIARY ROLE TO EMPLOYEES





## SO, HOW DO WE PAY FOR HEALTHCARE TODAY...





### cost plus:



### **HEALTHCARE PURCHASING ENVIRONMENT**

- No prices provided when services rendered
- No confirmation if certain procedures or services will be covered
- VIRTUALLY NO SHOPPING AVAILABLE
- Your bill is mailed to you 30 days after service, often without the ability to audit.

COULD THIS EVER RESEMBLE A PUBLIC ENTITY PURCHASING POLICY?





## IS THE PPO NETWORK SERVING YOUR BEST INTEREST?

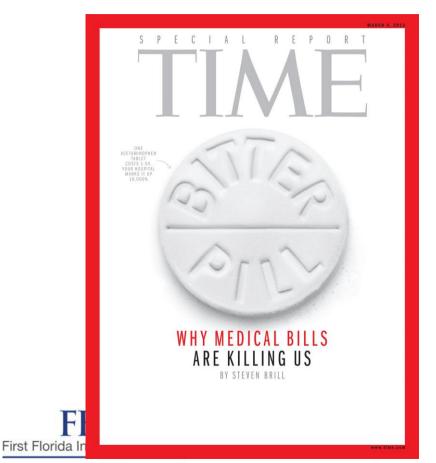




### IN SW FLORIDA, HOW MUCH DOES A... COMPUTED TOMOGRAPHY (CT) SCAN COST?

	Avg. Billed	Average Cost	Average Payment from Medicare	Cost Ratio (all CT Scans)
Lee Memorial	\$4,218	\$55	\$176	.0134
NCH Downtown Naples	\$3,235	\$118	\$154	.0365
Gulf Coast Medical Center	\$3,963	\$65	\$160	.0165





"GETTING A 50% OR EVEN 60% DISCOUNT OFF THE CHARGEMASTER PRICE OF AN ITEM THAT COST \$13 AND LISTS FOR \$199.50 IS STILL NO BARGAIN."

- EXCERPT FROM TIME MAGAZINE



### HOSPITAL MARK-UP 300-2,000%

HARD TO BELIEVE?





### PROTECTING FLORIDIANS AGAINST HOSPITAL PRICE GOUGING

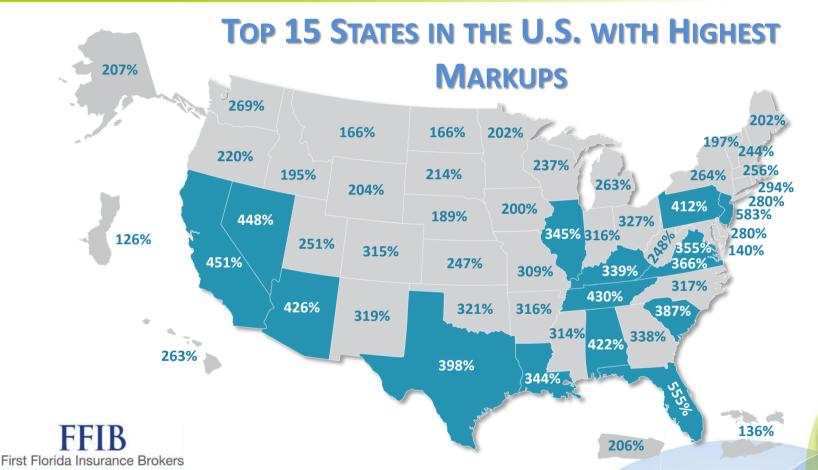


I know that you've got to watch how you spend all the dollars. That's not the easiest thing to do. That's not what people think is the most fun thing to do, but it's the right thing to do.

— Rick Scott —

AZ QUOTES







### GOVERNOR SIGNS LAW HB 221, APRIL 14, 2016

#### 1. LAW SHIELDS PATIENTS FROM SURPRISE MEDICAL BILLS

- APPLIES TO PPO PLANS
- PROTECTS MEMBER WHO GO TO HEALTHCARE FACILITY IN THEIR NETWORK AND INADVERTENTLY RECEIVE SERVICES FROM A NON-NETWORK PROVIDER
- Opposed by anesthesiology & radiology groups

#### 2. INCREASES PRICE TRANSPARENCY

1<sup>ST</sup> STEP TOWARDS PRICING TRANSPARENCY





### THE HOSPITAL CONTRACTS

- Relinquish your authority to a third party payor giving them control
- Negotiated a contract with a hospital that you will never see and turned over to a third party
- 55-60% of your annual claims volume is made of hospital claims.





### **SUMMARY BILLING**

## TRANSPARENCY? REASONABLE CHARGES? ACCURACY?

THERE ARE "LIMITED AUDIT" PROVISIONS IN PPO CONTRACTS!





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110	Room-Board/PVT							2		7000.00			
250	Pharmacy							42		2677.45			
272	Sterile Supply							27		2489.86			
272	Catheter, Drainage, and Bili	_		C1729				1		132.48			
2 <b>78</b> 301	Anchor/Screw for Opposing Basic Metabolic Panel	R		C1713 80048				16		97115.04 100.00			4
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305 305	Hematocrit	VVD		85025				1		28.00			
305 305	Hemoglobin			85018				1		28.00			
320	Fluoroscope Exam, Extensiv			76001				1		2200.00			
360	OR Services			70001				22		82000.00			
370	Anesthesia							22		27000.00			
421	Gait Training Therapy			97116:GP				3		282.00			+
121	Therapeutic Activities			97530:GP				1		112.00			
124	PT Evaluation			97001:GP				1		269.00			
460	<b>Breathing Capacity Test</b>			94010				9		1980.00			
160	Evaluate PT Use of Inhaler			94664				3		321.00			
460	Measure Blood Oxygen Lev	el		94760				3		170.25			
710	Recovery Room							3		4000.00			
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250 257	Pharmacy		7419.00				999 51		64240.75 508.50			
258 270	Drugs/Nonprecrpt IV Solutions Med-Sur Supplies						35 177		2595.00 14738.75			
2 <mark>72</mark> 278	Sterile Supply Supply/Implants						999		51735.06 8905.00			
301 302 305 307	Lab/Chemistry Lab/Immunology Lab/Hematology						417 2 79		57043.00 270.00 6929.00 16.00			
309 311 319 320	Lab/Urology Lab/Other Pathology/Cytology Pathology/Other DX X-Ray						27 1 1 39		3846.50 1855.00 1625.00 13489.00			
360 370 390 402 410 412	OR Services Anesthesia Blood/Stor-Proc Ultrasound Respiratory SVS Inhalation SVS						56 45 27 5 67 40		31780.00 17915.00 32605.00 2455.00 10165.00 20917.00			
134 141 144	Occup Therap/Eval Speech Path/Visit Speech Path/Eval						11		473.00 2348.00 746.00			
160 180 536 730	Pulmonary Function Cardiology Drugs/Detail Code EKG-ECG						15 16 999 2		13155.00 13775.00 24173.00 590.00			
942	Education/Training						16		1080.00			
001	Total Charges								548086.56			
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## HOW TO SEIZE CONTROL OF YOUR HEALTHCARE SPENDING?





### SIMPLY STATED...

# TREAT YOUR MEDICAL COSTS IN THE SAME MANNER THAT YOU WOULD ANY OTHER BUSINESS COST





### **EMPLOYER SMART CONSUMERISM TOOLS**

### **TECHNOLOGY TOOLS**

- CASTLIGHT, HEALTHCARE BLUE BOOK, COMPASS, CHANGE HEALTHCARE, HEALTHSPARQ, DELPI ...
- MCO's Aetna, Cigna, Fl Blue, UHC, AvMed ...

### **PLAN INCENTIVES**

- SHARING IN FINANCIAL SAVINGS BACK TO EMPLOYEE
- ELIMINATE CO-PAYS ON RX AND OFFER AT %
   UP TO A MAX OUT OF POCKET COSTS
- ALL ELECTIVE PROCEDURES REQUIRED TO CONSULT OR SUBJECT TO PRE-CERT PENALTY





### IMPLEMENTING A COST PLUS PLAN DESIGN — SELF-FUNDED EMPLOYERS

- OFFER PHYSICIAN ONLY NETWORK.
- No Network for Hospital's employees can go to any hospital!
- Develop plan language that contains clearly stated and rational limits of reimbursement based on the providers actual cost of delivering a service...*NOT* THE INFLATED BILLED CHARGES
- INSTALL A PROCESS TO ENSURE CLAIMS ARE AUDITED FOR ACCURACY
- Measure performance, detect trends and identify opportunities



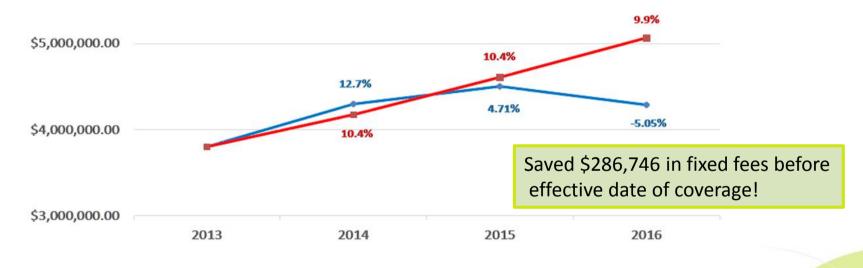


### COST PLUS CASE STUDY - CITY OF MARION, INDIANA

- 2012, \$5.2 MILLION DEFICIT
- STANDARD & POOR BOND RATING DROPPED TO BBB-
- 2013 IMPLEMENTED THE COST PLUS STRATEGY WITH ELAP SERVICES.
- "Overall, we were able to save \$2.7 million last year through the program ELAP helped us build." Wayne Seybold, Mayor
- REBUILD DEPLETED CASH RESERVES AND RE-INVEST SOME MONEY BACK INTO THEIR EMPLOYEES
- After just one year on the program, Standard & Poor upgraded the cities bond rating from BBB- to A-



### TREND STUDY MOVING TO COST PLUS - FL NON-PROFIT



		2013	2014	2015	2016
Sunrise Actual (\$)	-	\$ 3,803,905	\$ 4,296,711	\$ 4,501,305	\$ 4,284,965
Segal Trend Survey (\$)	-	\$ 3,803,905	\$ 4,172,884	\$ 4,606,864	\$ 5,062,943





### IN SUMMARY... TOP COST CONTAINMENT STRATEGIES BASED ON SIZE

### Fully-Insured (2-250 EE's)

- Expand use of user friendly transparency tools
- Incentivize!
- Implement pre-certification penalty
- Add Narrow or Restricted Networks

### Self-Funded (250+)

- Consider all items listed under Fully-Insured...
- Amend SPD to include Cost Plus Pricing



### Snapshots at jasonlove.com



"One minute she was eyeing her hospital bill, and the next minute..."



