

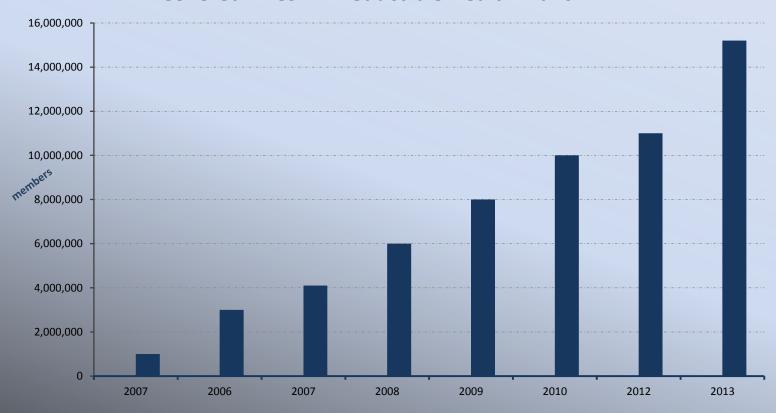
High Deductible Insurance Plans

There are two forces at work of which health care entities should be acutely aware: the increase of high deductible health plans ("HDHP") and price stickiness of health care goods. HDHPs, accompanied by a tax-advantaged health savings account, typically require the policy holders to cover 100% of the cost of medical expenses prior to meeting a predefined deductible, save certain preventative measures. **HDHPs necessarily increase the transparency of the cost** of consuming health care related goods and services

As more and more Americans bear a greater burden of their health care costs, they will undoubtedly pay more attention to what they are consuming, possibly delaying non-essential procedures or treatments. A counter-argument often made is that health care services are inelastic, and consumers will simply reduce expenditures of other goods to accommodate the increased costs of medication or treatments. This is true to an extent, however, anecdotally speaking as an HDHP consumer, I often find myself being far more inquisitive of physicians in understanding the absolute necessity of a certain test or procedure before incurring the cost. This was not the case when simply paying a co-pay upon arrival at the doctor's office. Investment Burker

Manifestations

Covered Lives: Hi Deductible Health Plans

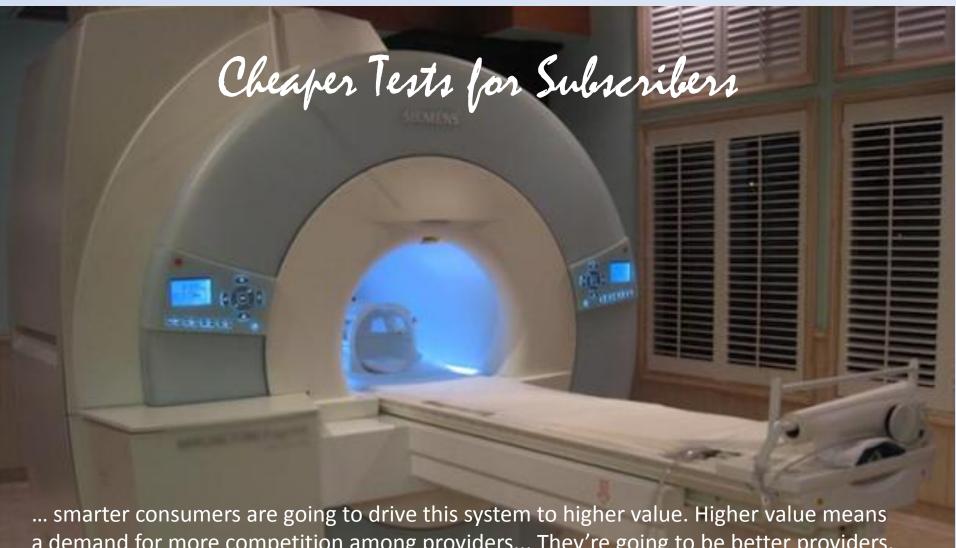


Growth of HDHPs in the United States based on a census conducted by the American Health Insurance Plans, a national trade association.



Rude Truths

- insurance coverage at the job or procured on the law's insurance exchanges will leave Americans more exposed to out-of-pocket spending. That raises interest in greater transparency on the prices charged for health care and its quality. **Oue Reinhardt**
- healthcare consumers are becoming more observant about healthcare financing and pricing as they spend more and more of their own dollars on their care. CEO-HFMA
- people do what they are incentivized to do David Faber



... smarter consumers are going to drive this system to higher value. Higher value means a demand for more competition among providers... They're going to be better providers. That doesn't mean they'll make more money, but they're going to be better. And the patients will get more value by getting an MRI for \$300 vs. \$2,000. That's huge value and huge savings. Bill Frist

12:16 PM Summary 14-Day Glucose Report 76% 4% 1. DW 20% Average Last Sync 129 # 1 Result 1.8 Results/Day No New Patterns 25 Total Results Dec 5, 2013, 12:05 PM Pasult + Carbs Today 12:05 DM

Get a blood sugar count via a cell phone app





Plan of Action

- Look for new patterns new behaviors
- Analytics Response create computer algorithms that locate insurer behaviors
 - Total Payments per case cross tabbed vs insurance carrier plan type;
 particularly high deductible health plans
 - Charge code drill downs by insurer carrier
 - Charge code drill downs by physician

	Hi-Deductible Plans							
	carrier plan	name	DRG	expected pay	Tot Pay Amt	paymt-1	paymt-2	paymt-3
	200320	UHC	195	\$18,500	\$13,500	\$13,000		\$500
	200380	UHC	195	\$35,660	\$35,660	\$18,700	\$14,960	\$2,000
ı	650070	Aetna	313		\$45,780	\$24,600	\$19,680	\$1,500
ı	432210	BCBS		\$22,400	\$13,800		\$13,800	
ı	622750	Cigna	302		\$0			
ı	500540	Humana	195	\$17,800	\$17,800	\$14,500		\$3,300

- Monitor-restructure Insurer Contracts
 - Demonstrate reimbursement stressors to provider



Brian Rucco collaborates with providers, insurers and industry watchdog organizations to produce organizational insights in rapidly changing local healthcare environments. Fact based analyses have helped clients comprehend *root cause* issues, understand *disruptive innovation* and be better positioned in a changing industry.