

H.795 and Health Care Price Transparency

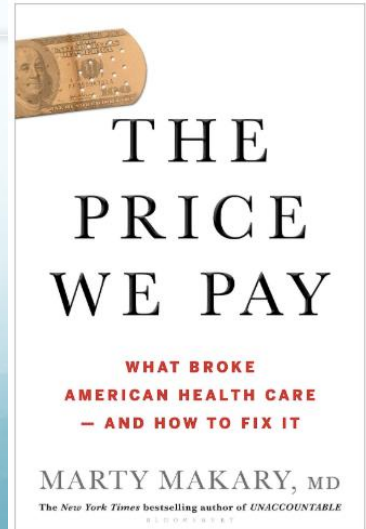
Rep. Lucy Rogers

Presentation to SHW Committee 5-20-2020



STATE OF VERMONT

Green Mountain Care Board



General Background

Health Care Price Transparency

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graph TD; A[Health Care Price Transparency] --> B[Hospitals / Providers**]; A --> C[Drugs / Pharmacy**];
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Hospitals / Providers**

Drugs /
Pharmacy**

**Interaction with insurance companies

Background:

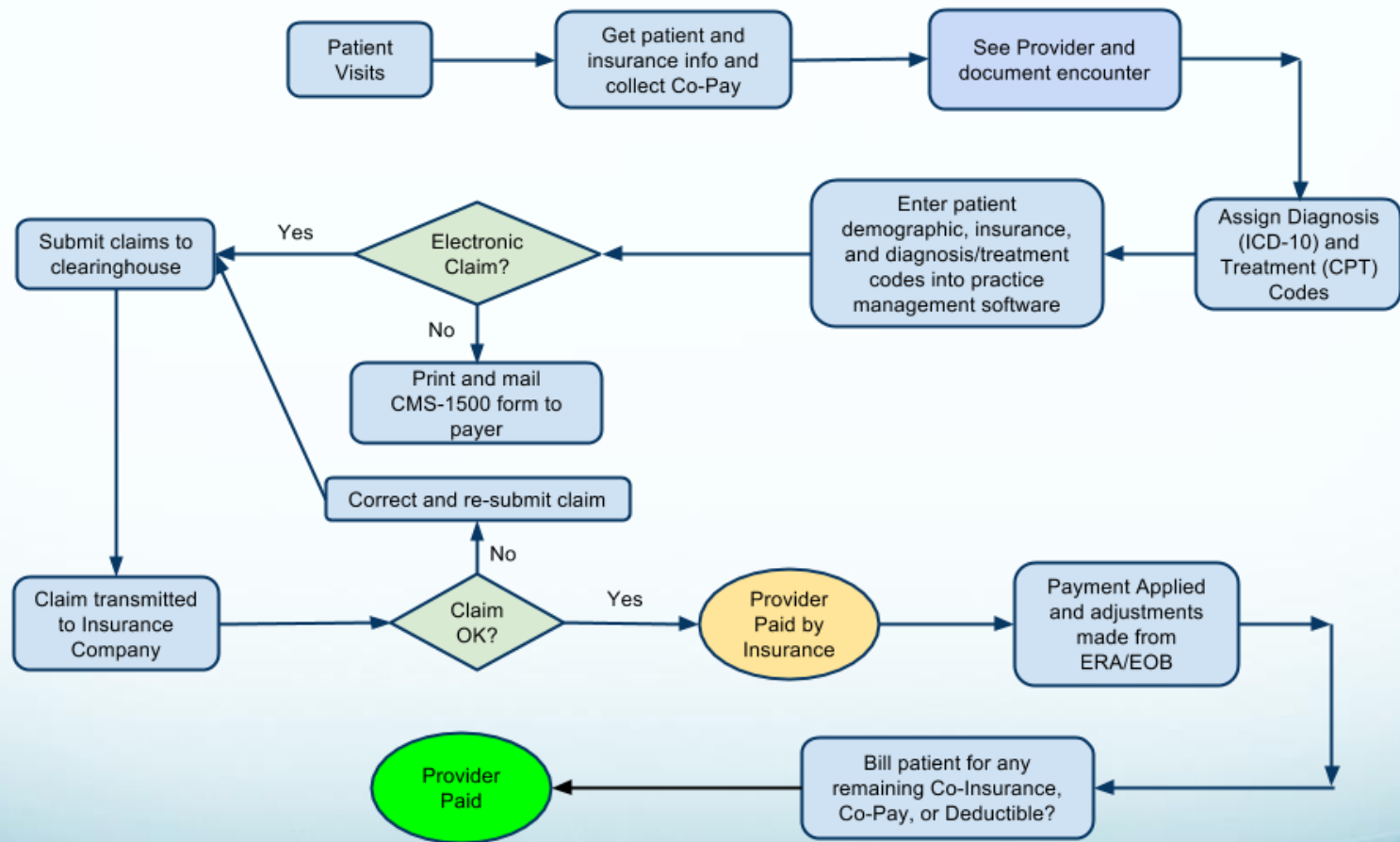
S.31 / Act 53 (2019)

- **VT's Patient Bill of Rights:** “The patient has the right to receive an itemized, detailed, and understandable explanation of charges regardless of the source of payment and to be provided with information about financial assistance and billing and collections practices.”
- **GMCB Price Transparency Report:** Similar in subject but smaller in scope than Act 54 of 2015

Effective Price Transparency...

- Provides patient with clear, straightforward information about healthcare pricing
 - Available to patient *before* receiving health care
 - Price information reflects *actual* expected cost

Billing processes are complicated



Importance:

- Purchasers, policymakers, and consumer advocates all believe that price-conscious consumers will seek out low-cost, high-quality health care options once they are able to identify them (AHRC)
- Non-urgent, routine healthcare needs give patients more of a chance to shop around for price and quality than emergency care (e.g. routine surgery, filling a prescription, annual check-up, preventative screening)

Current State of Health Care Price Transparency in VT

All-Payer Claims Databases

- Large database of all* claims from public and private payers
- At least 20 States have APCDs.
- APCDs are the backbone of most states' hospital / provider price transparency efforts, although there are large disparities in if/how this information is communicated to the public
- 3 routes: Price Comparison tools / databases, consumer friendly websites, shopping programs with financial incentives (to be explained later)

*Except the usual suspects, at least in VT

VHCURES

- Vermont Health Care Uniform Reporting and Evaluation System (VHCURES) is Vermont's APCD
- Contains claims from insurance companies, which is the “invoice” of the provider/insurance/consumer transaction
- VHCURES has data reaching back to 2007; GMCB assumed responsibility in 2013

Accessing VHCURES

Title 18, § 9410. Health care database (h)(3)(B):

“To the extent allowed by HIPAA, the data shall be available as a resource for insurers, employers, providers, purchasers of health care, and State agencies to continuously review health care utilization, expenditures, and performance in Vermont. In presenting data for public access, comparative considerations shall be made regarding geography, demographics, general economic factors, and institutional size.”

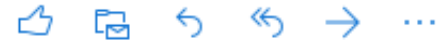
Accessing VHCURES



Lucy Rogers

Mon 1/20/2020 9:04 PM

gmcbl.data@vermont.gov <GMCB.DATA@vermont.gov> ∨



Hello,

I have found online that the first step to accessing VHCURES information is to file a "VHCURES Data Request Form." Where can I find that?

Thanks,

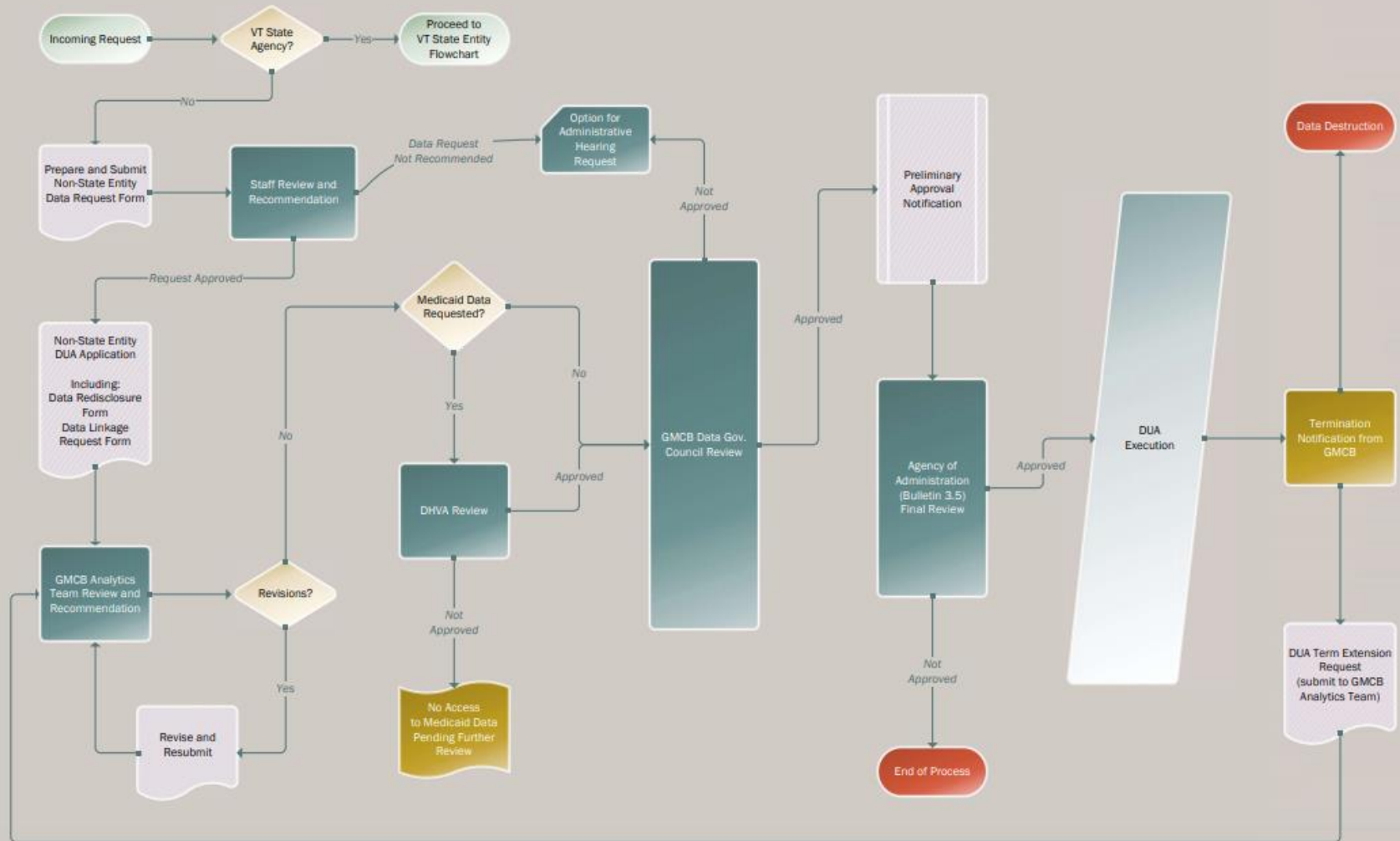
Lucy

Response: "... The form you are referencing actually is necessary only for non-Vermont state government requestors as an added step in the process for our determination for appropriateness of a request for VHCURES data. But still, even for requestors of VHCURES data within Vermont state government, it's a detailed process that begins with an application and culminates with a contract with the State of Vermont, in the form of a Data Use Agreement..."

Accessing VHCURES

June 19, 2018

Non-State Entity VHCURES DUA Application Process



What are the barriers?

- Dataset is big. Like, doesn't-fit-on-your-computer big.
- HIPPA and patient privacy considerations. (VT is a small state)
- Concerns about commercialization of data, profiting off of public information.
- You couldn't make sense of it anyway.

What about individual
insurers' websites?

Individual insurance information matters for this:

Vaginal Delivery, MVP silver plan



CLIFFORD, PATRICK, MD

Ob/Gyn

Location

**NORTHWESTERN PARTNERS
IN HOPE AND RECOVERY**
133 FAIRFIELD ST
SAINT ALBANS, VT 05478
16.3 Miles | [Map/Directions](#)

✓ In-network

**NORTHWESTERN MEDICAL CENTER
INC**

**NORTHWESTERN PARTNERS IN
HOPE AND RECOVERY**
133 FAIRFIELD ST
ST ALBANS, VT 05478
16.3 Miles | [Map/Directions](#)

Out-of-Pocket Estimate:

→ **\$547**
Estimated Total Cost: \$5,477

☐ [Compare](#)



**NICKERSON, KRISTA R.,
APRN**

Ob/Gyn

Location

**UNIVERSITY OF VERMONT
MEDICAL CENTER INC**
ACC MAIN PAVILLION 4 111
COLCHESTER AVE
BURLINGTON, VT 05401
30.2 Miles | [Map/Directions](#)

✓ In-network

**UNIVERSITY OF VERMONT
MEDICAL CENTER**

**UNIVERSITY OF VERMONT
MEDICAL CENTER INC**
111 COLCHESTER AVE
BURLINGTON, VT 05401
29.3 Miles | [Map/Directions](#)

Out-of-Pocket Estimate:

→ **\$1,672**
Estimated Total Cost: \$16,714

☐ [Compare](#)

But, overall price transparency matters for this:

IUD insertion, MVP silver plan



BLAKE, KIMBERLY, MD

✓ In-network

Physician's Office

Ob/Gyn

Location

**AFFILIATES IN OB GYN CARE
INC**

96 COLCHESTER AVE
BURLINGTON, VT 05401
29.3 Miles | [Map/Directions](#)

Outpatient Hospital

Out-of-Pocket Estimate:

\$300

Estimated Total Cost: \$370

☐ [Compare](#)

Out-of-Pocket Estimate:

Estimate not available

Low volume of claims data

☐ [Compare](#)



MAURER, TRACEY S., MD

✓ In-network

Physician's Office

Ob/Gyn

Location

**UNIVERSITY OF VERMONT
MEDICAL CENTER INC**

MEDICAL OFFICE BLDG STE
101 792 COLLEGE PKWY
COLCHESTER, VT 05446
27.2 Miles | [Map/Directions](#)

MAURER, TRACEY S., MD

Out-of-Pocket Estimate:

\$300

Estimated Total Cost: \$741

☐ [Compare](#)



GLAESS, SHEILA, MD

✓ In-network

Physician's Office

Ob/Gyn

Location

**CVMC MEDICAL GROUP
PRACTICES**

130 FISHER RD MOB-A STE 1-
4
BERLIN, VT 05602
38.5 Miles | [Map/Directions](#)

Out-of-Pocket Estimate:

\$300

Estimated Total Cost: \$1,086

☐ [Compare](#)

Limitations of Insurance

Dashboard

- Not accessible in any way to uninsured individuals, as well as to many insured individuals; with VHCURES, these individuals can still gain some general trend info
- Limited in its ability to serve healthcare regulators and state government agencies
 - Ex: NH → “In addition to private use, state officials have been able to use the APCD in a number of ways—including understanding how Medicaid reimbursement rates compare to commercial insurers, commercial marketplace dynamics, and several public health analyses.”
<https://www.astho.org/Health-Systems-Transformation/Medicaid-and-Public-Health-Partnerships/Case-Studies/New-Hampshire-All-Payer-Claims-Database/>
- Does not include smaller practices

Recommendation

H.795: Increasing hospital price transparency

- By February 1, 2021: GMCB reports to us regarding its progress in developing and implementing a public price transparency dashboard, including the results of the Board's efforts to validate VHCURES data through comparison with hospital discharge data and with information from the health insurers.
- By February 1, 2022: GMCB demonstrates the public, interactive, Internet-based price transparency dashboard that allows consumers to compare health care prices for certain health care services across the State. Using data from VHCURES, the dashboard shall provide the range of actual allowed amounts for selected health care services, showing both the amount paid by the health insurer or other payer and the amount of the member's responsibility, and shall allow the consumer to sort the information by geographic location, by health care provider, by payer type, and by the specific health care procedure or health care service.

Does this matter during COVID-19?

- The enormous budget pressures created by COVID have underscored the already present need to address the growing cost of health care, which affects everything from school budgets to small business viability.
- Without allowing policy-makers and purchasers of health care to understand cost distribution throughout the health care system, it is nearly impossible to address health care costs.
- Price transparency is crucial to incorporate into payment reform efforts going forward

Cost is not distributed equally throughout our system

IUD insertion, MVP silver plan



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Out-of-Pocket Estimate:

\$300

Estimated Total Cost: \$370

☐ [Compare](#)

Out-of-Pocket Estimate:

Estimate not available

Low volume of claims data

☐ [Compare](#)



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Out-of-Pocket Estimate:

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Estimated Total Cost: \$1,086

☐ [Compare](#)

Considerations for Payment Reform

- Price transparency should be incorporated into payment reform efforts going forward
- OneCare's formula for determining PMPM payments for different hospitals relies at least in part on past FFS payments
- We do not want to create a “**legacy system**” that implicitly endorses the current areas of waste in our system

Fifty years after the Fair Housing Act was signed, America is nearly as segregated as when President Lyndon Johnson signed the law.

By Joseph P. Williams Senior Editor April 20, 2018, at 6:00 a.m.

What are our goals for the future of health care costs?







- To bring down annual cost growth to be closer to inflation?
- Or, to limit annual growth WHILE ALSO addressing the systemic issues that made our health care so expensive to begin with?



How have other states
handled their APCDs?

Maine

- CompareMaine launched in 2015. Uses APCD cost data to show average cost of common procedures at different facilities throughout Maine, broken down by insurer. <https://www.comparemaine.org/>
- Engaged stakeholders in development 
- Received funding from CMS 
- Enough procedures (240) 
- Included quality metrics 

Florida

- In Nov. 2019, FL expanded www.floridahealthfinder.gov to include facility-level price estimates on common, non-emergency procedures (previously, only had regional data)

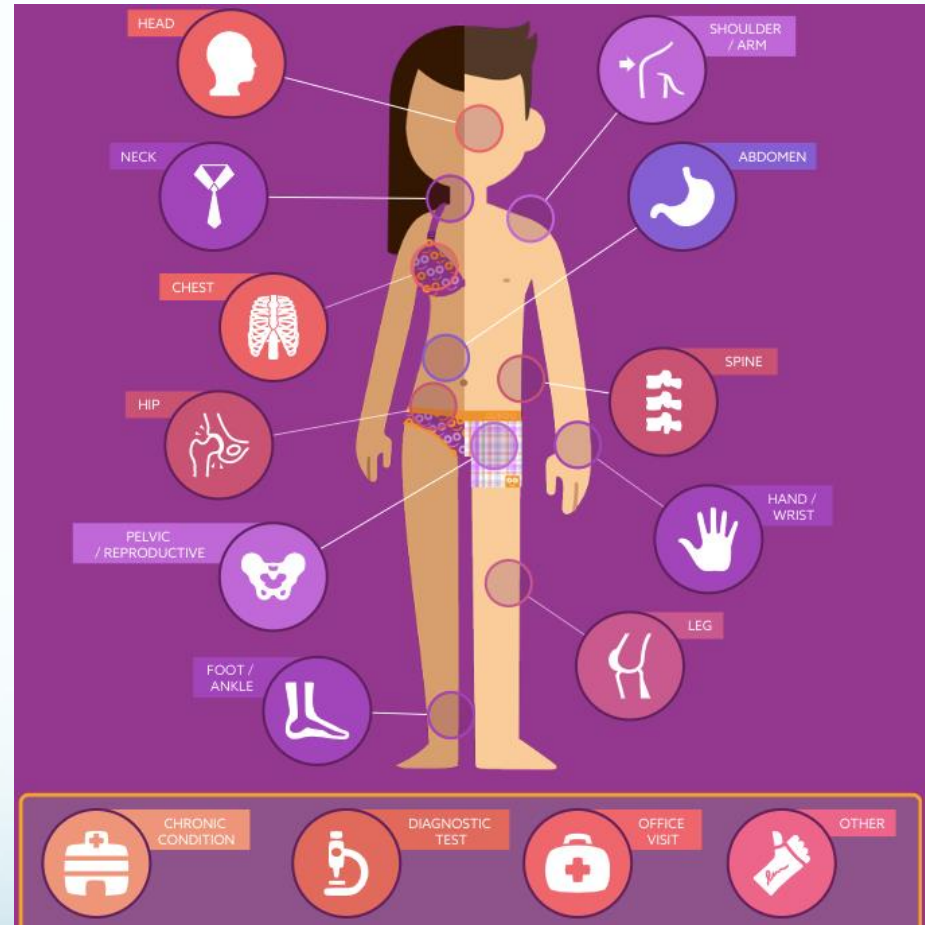


- Great graphics

- Comparison to national prices




- Pissed off hospitals by not allowing them to review data before publishing





- Not enough procedures (>40)



Massachusetts

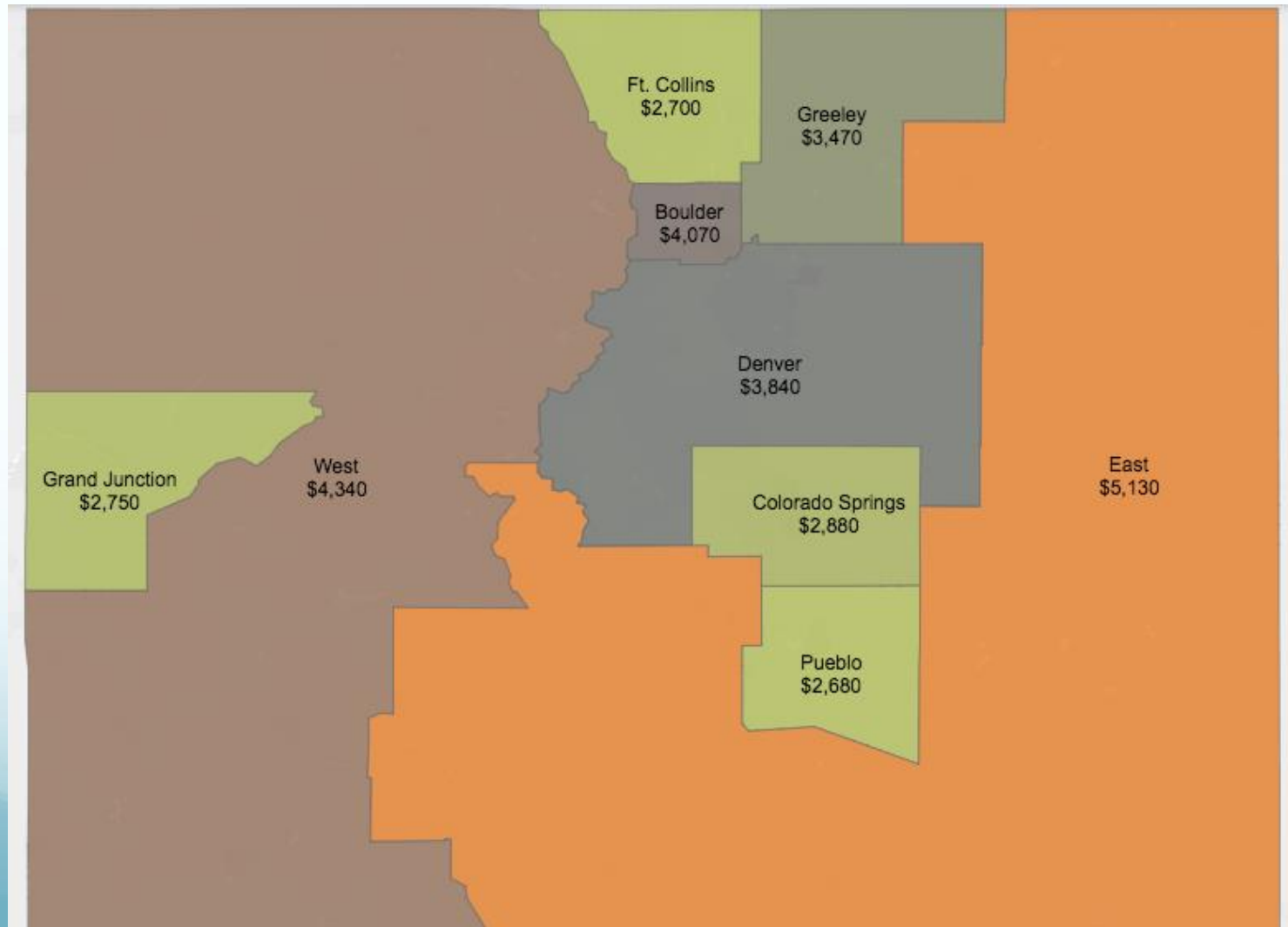
- Center for Health Information and Analysis was launched in Chapter 224 of the Acts of 2012.
- In 2018, CHIA launched Compare Care, a price transparency tool comparing certain procedures in different facilities and cities, using APCD to estimate costs. Contracted for design of website.
- Clear disclaimer that actual cost varies by insurance provider 
- www.masscomparecare.gov

Colorado

- 2008 executive order created the Center for Improving Value in Health Care as a public-private partnership within the Department of Health Care Policy and Financing to maintain state's APCD
- 2018: released tool for checking average prices for certain procedures in certain regions
- Really cool maps 
- Limitation: only a few procedures on the tool 
- www.civhc.org/shop-for-care

Colorado

Cost of cataract surgery, by region in CO



New Hampshire

- Created one of the first APCD's in the country in 2005, managed within their administration
- Created the New Hampshire Health Cost online tool in 2007
- www.nhhealthcost.nh.gov
- Lots of missing data 
- “In addition to private use, state officials have been able to use the APCD in a number of ways—including understanding how Medicaid reimbursement rates compare to commercial insurers, commercial marketplace dynamics, and several public health analyses.” <https://www.astho.org/Health-Systems-Transformation/Medicaid-and-Public-Health-Partnerships/Case-Studies/New-Hampshire-All-Payer-Claims-Database/> 

Biopsy - Breast	Mary Hitchcock Memorial Hospital Provider Info ✕ Remove	Concord Imaging Center Provider Info ✕ Remove	Elliot Hospital Provider Info ✕ Remove
Patient Centered Care			
Overall Patient Experience	3 ★	N/A	3 ★
Hospital Recommended State Average: 73%	80% ▲ ABOVE AVERAGE	N/A	77% ▲ ABOVE AVERAGE
Best Hospital Experience State Average: 72%	75% ● NEAR AVERAGE	N/A	72% ● NEAR AVERAGE
Area Around Room Was Always Quiet at Night State Average: 55%	39% ▼ BELOW AVERAGE	N/A	47% ▼ BELOW AVERAGE
Nurses Always Communicated Well State Average: 82%	80% ● NEAR AVERAGE	N/A	81% ● NEAR AVERAGE
Doctors Always Communicated Well State Average: 82%	80% ● NEAR AVERAGE	N/A	81% ● NEAR AVERAGE
Room Was Always Clean State Average: 78%	66% ▼ BELOW AVERAGE	N/A	71% ▼ BELOW AVERAGE
Help Was Always Received State Average: 71%	70% ● NEAR AVERAGE	N/A	67% ▼ BELOW AVERAGE
Hospital Staff Provided Discharge Information State Average: 89%	90% ● NEAR AVERAGE	N/A	90% ● NEAR AVERAGE

New York (forthcoming)

- On Dec. 27, 2019, Gov. Cuomo revealed his plan to create NYHealthcareCompare, a consumer-friendly website launched by a collaboration of state agencies.
- Dual goal of educating NY healthcare users
- Anticipated launch in 2020

Oregon

- Oregon Legislature passed Senate Bill 900 (2015), which requires the state to post median hospital prices on a consumer-friendly website (www.OregonHospitalGuide.org), maintained by Oregon Assoc. of Hospitals and Health Systems
- Contains 50 most common inpatient and 100 most common outpatient procedures
- Updated quarterly



IMAGING AND DIAGNOSTICS

Bone Study ?	\$399	\$355	\$188
Cardiovascular: Echocardiography ?	\$1,594	\$2,077	\$1,354
Cardiovascular: Electrocardiography ?	\$231	\$76	\$170
Cardiovascular: Electrocardiography Stress Test ?	\$812	N/A	\$359

Washington (state)

- Launched www.wahealthcarecompare.com in 2018. Housed in Office of Financial Management, but with contracts for creating and managing the site.

Find the best care, at the best price.

**Find local prices of a
treatment or visit**

Find doctor group
or office

Name of procedure or treatment (required)

Your ZIP Code (required)

SEARCH

Examples: "knee" "pregnant" "weight loss" "urgent care"

[Why do we ask for ZIP Code?](#)

[Can't find what you're looking for?](#)

This search will help you find prices for medical procedures and other health care services or therapies.

A special case...

Kentucky

- In 2013/2014 piloted an innovative cost reduction strategy for state employees. Expanded to full state on January 1, 2015.
- Kentucky uses Vitals SmartShopper, a 3rd party service, to allow state employees to shop around for savings.
- State employees received incentives based on the savings generated by their choices, generally \$25 - \$500. These incentives were significantly lower cost than the savings generated
- Savings spread across many levels: individual, insurance premium, all taxpayers



What states should we NOT
replicate?

New Jersey

- In 2007, launched www.NJHospitalPriceCompare.com for acute care hospitals
- Shows hospital charges (ie “sticker prices”), so contains very little information about actual amounts paid by insurance companies and/or out of pocket.
- The front page of their website essentially states that the information is without value
- Waste of money



Ohio (not implemented)

- Enacted a medical services price transparency law—Ohio Rev. Code Ann. § 51-5162.80—in 2016, which passed with bipartisan support and the government signed.
- Asked health providers to give patients an upfront, good-faith estimate of charges and ultimate cost to the individual for non-emergency situations.
- Put the onus on hospitals – administratively impossible 
- Legally dubious 
- Did not actually help patients 