Medical Discount Programs and Cost of Care Transparency

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Objectives

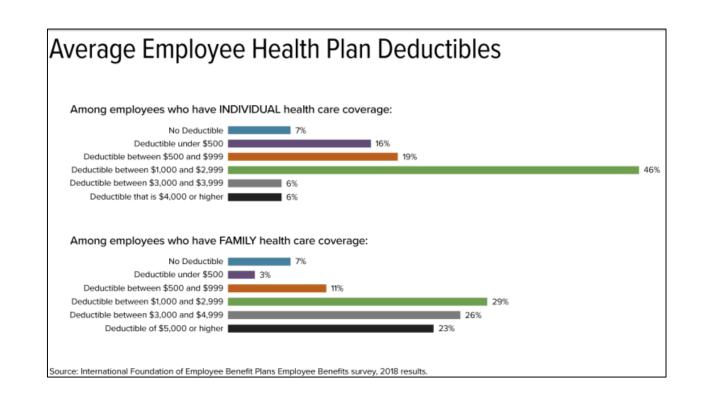
- Explain current trends in insurance reimbursement affecting urgent care operations and revenue.
- Identify consumer behavior and preferences in regards to paying for routine health care as well as the characteristics of the uninsured and underinsured.
- Consider "best-in-class" pricing and payment examples from urgent care and other industries.
- Develop a fair cash pay pricing model that does not jeopardize insurance contracts.
- Assess the pros and cons of medical membership and alternative payment mechanisms in urgent care.

Why Appeal to Self Pay Patients

- Prolifieration of high-deductible plans and price-savvy consumers.
- Appeal to niche markets (Hispanic, tourists).
- Closed or monopoly insurance networks.
- Insurance reimbursement below operating costs.
- Patients paying cash for privacy or convenience.

Profile of America's Underinsured

- Uninsured population is ~11% of adults and 5% of children
 - 45% choose to forego coverage due to high costs
 - Includes 11-22 million undocumented immigrants
- Vast majority (65% of adults; 55% of children) have employer-provided health insurance
 - Average premium on an employer paid plan is \$19,616 for families and \$6,896 for individuals
 - Employers cover 70% of the premium on average
 - 80% have a deductible (95% in private sector) averaging \$3,000 for families, \$1,500 for individuals
- 30% of adults are "underinsured"
 - Cannot afford co-pays, co-insurance or deductibles

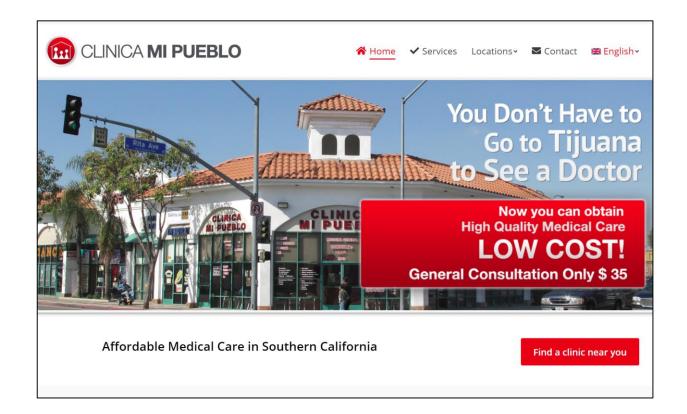


Advantages to Cash Pay

- Improved cash flow resulting in reduced working capital.
- Savings of \$10-15 per claim in billing, collections and posting costs.
- No accounts receivable carrying costs.
- No bad debt write-offs.
- Streamlined operations, faster service.

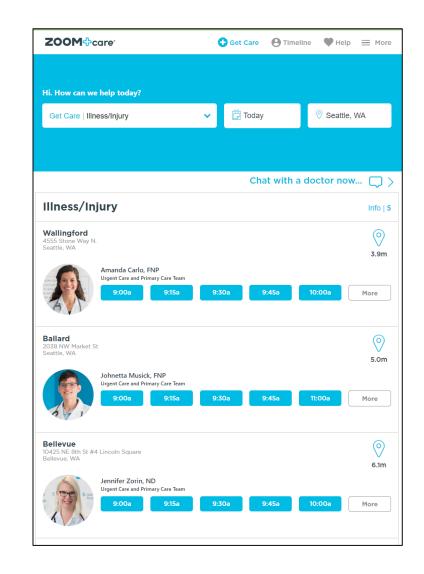
Is "Cash Only" Possible?

- Only when serving a "niche" or "captive" market:
 - Hispanic Community
 - Tourists
- Services must be unique, have a strong competitive advantage, or have no competition.
- Otherwise, insurance plans will drive patients to competing practices.



Zoom+ Care

- 800+ same day appointments
- Credit card required to book.
- Does not accept cash or checks.
- \$99 cancellation fee if no-show.
- Receipt at time of visit is an estimate; final receipt and credit card charge upon charge entry and/or insurance adjudication.
- Does not accept Medicare, Medicaid or Tricare.

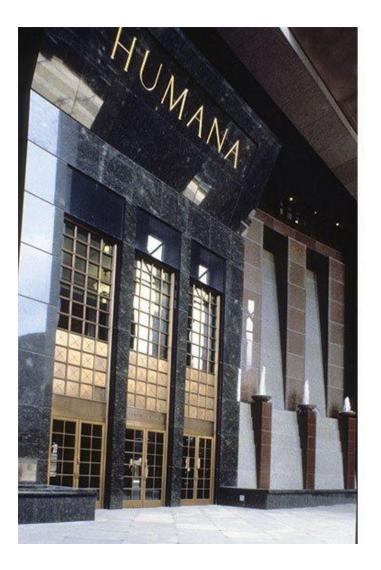


Cash Pay and Medicare

- Medicare's "most favored nations clause" applies to "billed charges" and not "cash collections."
- Medicare allows cash discounts proportional to savings in claims processing.
- Participating and non-participating Medicare providers are required to treat Medicare patients at Medicare rates and submit a claim to Medicare for services.
- Complications surround:
 - Medicare patients desiring to enter into a cash transaction.
 - Providers who have "opted out" of Medicare.

Urgent Care Billing Issues

- Pricing is set to maximize insurance reimbursement
 - Insurance pays lower of "contracted rate" or "billed charges."
 - Fee schedule is typically 150-300% of Medicare, adjusting 25-75% off as "contractual allowance."
 - Pricing bears little connection to the "value" of services delivered.
- "Discounts" are provided to billion-dollar insurance corporations yet the patients who can least afford it are charged full-price.



"How much does an urgent care visit cost?"

- "It depends on what the doctor finds..."
- "Visits start at \$125 and go up to \$350..."
- "We don't know until it goes to billing..."

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Tactics: %-Off Discount

- Percent discount (10-35%) off insurance fee schedule.
- Calculate charges and apply discount after services are provided.

Pros	Cons
Cash discounts more closely resembled insurance adjustments.	Lack of price transparency—cannot quote price until after visit when all charges are entered.
Prices are easy to calculate off charge ticket.	No advertising advantage—10 to 35% off of <i>what?</i>
Consistent margin—payment aligns with services provided.	Providers code to bill rather than code to services—often results in <u>downcoding</u> .

%-Off Discount, cont'd.

Charge	Explanation	Cost w/ 30%
		discount*
provider and is based on the	e an associated office visit charge. The level of visit will be detern diagnosis and complexity of care required to treat the condition o I of care until you've been examined by a provider and an approp	r illness. We are
Level 4 Office Visit (New Patient)	2 of the following: • history • examination • high complexity	\$194.00
Level 4 Office Visit (Established Patient)	2 of the following: • history • examination • high complexity	\$168.00
Level 3 Office Visit (New Patient)	2 of the following: • history • examination • moderate complexity	\$126.00
Level 3 Office Visit (Established Patient)	2 of the following: • history • examination • moderate complexity	\$125.00
Testing: The following tests m	nay be ordered and are charged in addition to the office visit.	
Pregnancy	Pregnancy testing	\$12.00
Mononucleosis	Rapid mono testing	\$10.00
Urinalysis	Urinalysis performed in clinic	\$5.00
Streptococcus	Rapid strep testing	\$21.00
Influenza	Rapid flu testing	\$21.00
Glucose	Blood glucose level	\$5.00
EKG	Electrocardiogram: 12 leads, interpretation and report	\$33.00
Radiology: The following x-ra	ys may be ordered and are charged in addition to the office visit.	
Ankle	X-ray ankle: Two views	\$35.00
Wrist	X-ray wrist: Three views	\$45.00
Knee	X-ray knee: Three views	\$45.00
Shoulder	X-ray shoulder: Two views	\$38.00
Lower back	X-ray back: Two or three views	\$45.00
Chest	X-ray chest: Two views	\$37.00
Hand	X-ray hand: Three views	\$39.00

Foot	X-ray foot: Three views	\$38.00
Elbow	X-ray elbow: Three views	\$41.00
Procedures: The following proc	cedures may be ordered and are charged in addition to the office	visit.
Laceration simple repair (less than 2.5 cm)	 scalp, neck, axillae, external genitalia, trunk, hands, feet face, ears, eyelids, nose, lips, and/or mucous membranes 	\$112.00
		\$134.00
Laceration simple repair (2.6 to 7.5 cm)	 s/n/a/g/t/h/f f/e/e/n/l/mm 	\$133.00 \$147.00
Breathing Treatment *Multiple breathing treatments may be necessary	Inhalation treatment for acute airway obstruction Supplies Medications, price per dose. <i>*dosage varies by patient</i>	\$21.00 \$4.00 \$2.00
Durable Medical Equipment	t	1
Crutches		\$25.00
Arm sling		\$10.00
Ace wrap		\$3.00
Finger splint		\$10.00
Post op shoe		\$20.00
Ankle brace		\$35.00
Pneumatic walker		\$50.00

****PLEASE NOTE**** All labs will be billed separately by Quest Diagnostics. We are unable to estimate costs for labs.

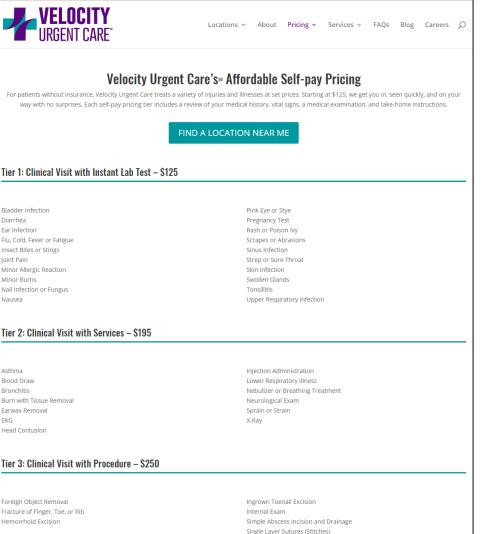
Tactics: Flat Price per Visit

- Posted flat price (or tiered flat price) per visit.
- Adjust "billed" charges to cash price
- Strategy of many retail host model clinics.

Pros	Cons
Resembles insurance global fees—prices include all services.	Pricing does not align with charge ticket— adjustments will vary by patients.
Pricing transparency—easy for consumers to understand.	Calculated based on average charges—like any global fee the center will lose money on some visits.
Emphasizes urgent care value proposition of access and affordability.	Requires ongoing analysis of utilization and reimbursement by charge tier.

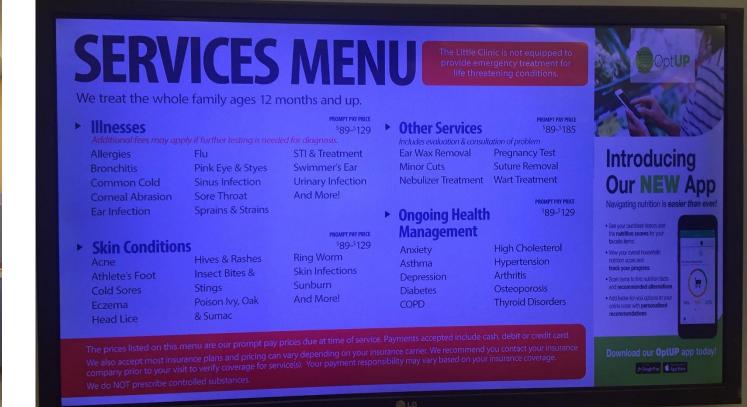
Flat Price per Visit, cont'd.





Posted Menu Board





Tactics: Membership Program

- Flat price or a percentage discount requires patient to purchase a "membership."
- Must be a "discount program" with no actuarial risk (i.e. not a regulated "insurance product").

Pros	Cons
Cash discounts are offset by membership fee revenue, resulting in higher average revenue per visit.	High utilization patients could undermine margins.
Reliable monthly cash flow from membership dues.	Complexity in administration (credit card expirations, bank charge-backs, staff sales incentives).
Loyalty effect resulting in increased visit frequency.	Membership churn—patients join to get a discount on today's visit and then cancel.

Membership Program, cont'd.

Healthy Savings Plans in Texas

Residents of Texas are eligible to receive \$68 sick visits at CareNow and 10% to 60% discounts on a variety of other healthcare services when you use the CareNow® Healthy Savings Card™. This card does not serve as an insurance card and cannot be used with insurance, it is simply a **discount card that can be used for CareNow®** medical, other doctor, specialist and hospital visits, plus dental, pharmacy, hearing and vision services.

🕼 Sign Up For Your Healthy Savings Card

With your CareNow® Healthy Savings Card™ available

only in Texas, you receive the following discounts for yourself, a spouse and all legal dependents:

- \$20/month fee
- \$68 sick visit* at CareNow®
- 35%-40% On services such as lab, x-ray, suture care and supplies
- \$15 School or sports physical
- Discounted flu shots
- 15%-50% savings on dental
- 10%-60% savings on vision, hearing and pharmacy prescriptions
- 10%-40% savings on other doctor, specialist and hospital visits

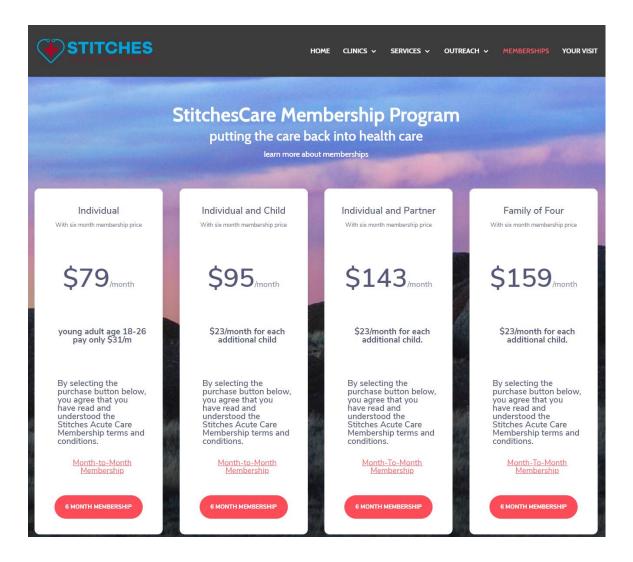
To purchase a CareNow® Healthy Savings Card[™], <u>fill out our application online</u> or at your nearest <u>CareNow® location in Texas</u>.

For more information or questions regarding these benefits, please call (800) 800-7616 or email <u>info@newbenefits.com</u>.



- \$20 per month fee
- \$20 one-time registration fee
- \$68 sick visits at CareNow (\$108 first visit)
- 35-40% discount on ancillary services
- Additional benefits attached to the card

Membership Program, cont'd.



- \$99 initiation fee (\$199 families/couples)
- Monthly ACH or credit card charge
- Unlimited urgent care visits
- Ancillary services at clinic's cost
- 20% discount on membership if >6 months
- \$31/month for members age 18-25
- 1-month cancellation notice required



Membership Program, cont'd.

- Patient motivation is a discount on today's visit.
- Issue is frequency of use—"average" urgent care patient visits 1.7x/yr.
- Sales opportunity to local employers with high deductible plans.
- May be developed internally or externally, with vendor assistance.
- "Add-on benefits" such as pharmacy discounts or PPO network access support sales and reduce churn.

Operational Considerations

- Train staff as to what types of services constitute what charges develop conversion tables or job aids as appropriate.
- E/M coding should be independent of charges—code to documentation, not to achieve a price.
- Consider exclusions for lab, vaccines, medications, x-ray over-read and ancillary services.
- Collect some cash (or authorize credit card) in advance of the visit (prevents walk-offs).
- Patient receipt should show "billed charges" and discount off fee schedule to prevent insurance windfall on out-of-network claim.

Maximizing Front Office Collections

- Insurance verified through Real Time Eligibility
- If insurance cannot be verified, the visit is treated as "uninsured."
 - Collect self-pay and forego use of insurance.
 - Bill insurance but require \$250 credit card pre-authorization or \$100 cash at time of service
- Collect any deductible at time of service
 - Issues are accurately collecting fees and insurance processing.
 - \$250 credit card pre-authorization or \$100 cash at time of service.
- Applies to private, managed Medicare and Medicaid plans
- Medicare 20% co-insurance
- Exceptions to deposit requirements:
 - Straight Medicaid
 - Tricare



For More Information...

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