

State Employees Health Plan Task Force – Meeting #4 Follow-ups as of 11/04/15:

Follow-up Item/Topic	Request	Status
<p>Highmark Payment Reform Presentation</p>	<p>Mr. Taschner requested the following via email on 10/23/15:</p> <p>First, on page 4 of the presentation. Can we get an indication of what % (and actual \$ amount) of the overall hospital costs or inpatient claims are represented by each of the hospitals represented (A through F).</p> <p>Also for those hospitals that have negotiated DRG (Diagnosis Related Grouping) - based agreements (I understand this to be Hospitals B,C, E and F), can we get an indication of the impact of the DRG-based agreement, specifically what was their % relationship to the Highmark Central PA average prior to the negotiation and implementation of the DRG-based agreement.</p> <p>Second, on page 7, which I understand to represent Delaware data, can we get a similar</p>	<p>Status: IN PROGRESS</p> <p>Highmark is working to prepare the same graph/chart but only utilize SOD inpatient claims. It will represent the percentages/dollars for SOD by hospital.</p> <p>Highmark is working to provide information regarding the change between years for those hospitals that have been on a DRG agreement for at least two years. They are further attempting to illustrate what was paid in aggregate with DRG's vs. what would have paid under the prior fee-for-service arrangement. Alternatively, they are working to explore what information might be available from Central PA or West Virginia as to the impact of converting to DRGs in those markets.</p> <p>Maryland is an all-payor State for Hospitals. Hospitals receive the same amount from all payors, including</p>

	<p>representation based on Maryland and West Virginia data?</p> <p>Additionally, if we could get a similar representation for Pennsylvania data, presumably from the southeast region, that would be great.</p> <p>Third, I believe we also discussed getting the breakdown of medical expenses between hospitals and other medical provider and by specific hospitals at the start of the Highmark presentation.</p>	<p>Medicaid and Medicare. Highmark will attempt to track down similar information from West Virginia.</p> <p>Highmark is unable to provide this information as they are not offering a Medicaid product in Southeastern PA.</p> <p>Highmark is working to provide this data.</p>
Breakdown of Medical & Prescription Costs	<p>Jeff Taschner requested the following on 11/3/15:</p> <p>A breakdown of what was paid in the last plan year on medical and prescription by service categories and a detailed breakdown of spending by vendors receiving payments from the Group Health fund.</p>	<p>Status: IN PROGRESS for medical. Prescription drug cost breakdown to be included in the Express Scripts presentation at the 11/5/15 Task Force Meeting #5.</p>
Group Health Costs	<p>Senator McDowell requested the following on 11/3/15:</p> <p>A spreadsheet that provides the following information: a list of every vendor that SEBC has, what</p>	<p>Status: IN PROGRESS</p>

	<p>the vendor does, the contract period, when the next RFP for services will be, how much the state pays them annually and how much the employees pay them annually</p> <p>Also looking to understand what the cost would be to get coverage fully insured vs. self-insured.</p>	
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