

## DFWBGH Employer Roundtable on High-Cost Claims

November 16, 2022

### Overview of Roundtable Logistics

This interactive roundtable discussion was held on 11/16/22 from 9:30 am to 12:30 pm, facilitated by Christine Hale, MD, Clinical Consultant, Lockton Dunning Benefits.

Employer participants included representatives from the organizations listed below:

- DFW International Airport
- City of Fort Worth
- Sabre
- City of Plano
- Flowserve Corp.
- Fluor Corp.
- City of Euless
- Frisco ISD
- Jiffy Lube

### Program Agenda

- Welcome & Opening Remarks
- Round Robin & Open Discussion
- Topic Overview and Open Discussion
  - Cancer
  - Prenatal
  - Rare Disease
  - Specialty Drugs
  - Other
- Employer Round Robin
  - Highlights – key takeaways, areas of concern
  - Likely actions
  - How coalitions can help

### Program Summary

High-cost claims are a top concern of all Roundtable participants, according to a recent survey of our employer members.

Some participants felt that the number of high-cost claims seems to be increasing, perhaps due to the availability of more high-cost specialty drugs to treat a wider range of serious as well as inefficiencies in healthcare delivery systems.

The topics that we discussed were pertinent and timely, particularly Cancer, Specialty Drugs, and to a lesser degree, Prenatal and Gene Therapy for Rare Diseases (Focus was more on genetic testing for the right drug therapy). Prenatal costs were not as much of a concern, because claims evidently are not as prevalent as cancer, nor are rare diseases.

A key issue re the high-cost claims is affordability for both the employer and employees, especially with the number of claims and costs steadily rising.

There was a robust discussion of specialty drugs as a major cost-driver. Key-takeaways included a better understanding of the strategy of carving out specialty drugs from the medical spend, the role of biosimilars in controlling specialty drug costs, moving “site of care” to the physician office or home care. Other cost-management strategies that were discussed included offering centers of excellence or high-performance networks to improve access, lower costs and increase care quality. Another takeaway was a commitment to have a serious discussion with their TPAs and benefits consultants about high-cost claims strategies—and engage them in a concerted effort to help employers manage these costs.

Another key concern was the consolidation of health plans and PBMs, and the complicated pricing and supply chains, specially for drugs. Participants thought that this was worth talking about in a separate Roundtable.

There was limited discussion about stop-loss insurance, but interest in continuing this discussion in a future program.

Christine Hale’s in-person presence in this Roundtable was invaluable. She not only helped manage the flow of the discussion, but more importantly, provided her knowledge, expertise and very helpful insights on every topic that was discussed. We’re very grateful to have her there!

### **Value of Roundtable Session to Members**

All participants agreed that this was a very valuable Roundtable and were very appreciative that DFWBGH was selected to provide this high-value educational experience to our employer members.

We asked participants to prepare for the Roundtable by gathering the following information about their own high-cost claims:

- Top HHC conditions by #claimants
- Top HHC conditions (over \$75K or \$100k) by total spend
- Top HHC conditions by dollars per case to help determine whether it is the price or volume (or both) driving trends

- Top 5-10 drugs by total spend (If possible, break out by # cases and cost per case)
- Top 5-10 most costly individual cases, with diagnosis and dollar amount (break out medical vs. Rx if possible)

This seems to have been a valuable exercise, as most participants came better prepared for a productive discussion.

### **Areas of Focus Moving Forward**

Some of the actions moving forward that participants discussed include: a commitment to review high-cost claims data (as per the preparatory questions above) more frequently and discuss this with their benefits consultant and TPA on a regular basis, not just during the contracting cycle. They also will look at contracting with a center of excellence or laying a high-performance network on their current benefit design, especially for cancer treatment.

Another action is to focus more on preventive cancer screenings for early detection. Our recent employer case studies of the impact of delayed cancer screenings during CVOVID, showed that cancer screening rates are far below Healthy people 2020 recommend goals, so improving screening rates should be the first line of attack on high-cost cancer claims! Finally, participants agreed to learn more about precision medicine and Biosimilars as another strategy to combat high-cost claims.

DFWBGH plans to continue our focus on cancer and strategies to manage these high-cost claims as well as the “patient’s cancer care journey”. We will educate and emphasize importance of early detection via timely cancer screenings as a follow-up to our “Delayed Cancer Care Case Studies” and its companion piece: “DFWBGH Timely Cancer Care Toolkit”. We also will plan additional educational programs on High-Cost Claims, especially sharing of Best Practices by other local, regional, and national employers.

We expect that National Alliance tools and resources on high-cost claims management strategies to control costs and improve patient experiences will be a big help with our educational programs and communications materials.

Many thanks to National Alliance and the Sponsors of this High-Cost Claims Initiative for including DFWBGH in this high-value experience!

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