Volume 4, Issue 11

November 2011



Cora F. Drew, Esq., MPH - Director of Research • Jessica C. Burt - Editor

Forced Transparency for Health Insurers

The Patient Protection and Affordable Care Act (ACA) encourages transparency as a mechanism to achieve better healthcare quality, increased access to healthcare, and lower healthcare costs. In October 2011, the Department of Health and Human Services (HHS) launched a federally controlled website, www.companyprofiles.healthcare.gov, where consumers can discover whether an insurer has raised rates and for what reason. Several ACA provisions and the climbing cost of insurance premiums were the impetus for the website's design, which aims to increase transparency in healthcare.

The site does not provide an exhaustive list of all insurers and, to date, only includes those who have raised their rates. Under the ACA, beginning September 1, 2011, companies that increased rates ten percent or more for either individual or small group plans must provide customers with justifications for rate increases by posting explanations on the company website.⁴ The ACA also requires companies to justify rate increases to the federal government, and these justifications will be published on the healthcare.gov website.⁵ HHS Secretary Kathleen Sibelius stated that the data would serve to examine trends in companies' rationale for rate increases and to ensure such actions are both public and justifiable. Additionally, the information will enable consumers to make informed decisions about the acceptability of a rate increase.⁶

The Kaiser Family Foundation's 2011 Employer Health Benefits Survey found that premiums for employer-sponsored plans for a family of four increased nine percent and single-coverage increased eight percent since 2010. These increases are significant in comparison to 2010 prices, which only grew three percent since 2009. 2011 family premiums are 31 percent higher than in 2006 and 113 percent higher than 2001. Continued premium increases, compounded by insurance company average earnings, which surpassed projections by 46 percent, have raised even more concerns about the high price of healthcare throughout the United States.

Sibelius has stated that the new site is just the beginning, and even more information will be publicly available in the future. ¹⁰ Such information may include facts and figures about insurer rebates mandated by the ACA. Starting in 2012, insurers will owe rebates to consumers

for expenditures on non-health related services (i.e., administration or salary increases) that exceed 15 percent of total plan spending. The site may also eventually include a section that allows consumers to comment on various rate increases. Critics warn consumers that when deciding to buy or keep a particular plan, they should be aware that some rate increases are justifiable. Overall, however, many have shown support for the site, noting that the more consumers know about healthcare costs, the better. 12

- 1 "The Triple Aim: Care, Health, and Cost" By Donald M. Berwick, et al., Health Affairs, Vol. 27, No. 3, 2008, p.759.
- 2 "Your Insurance Company & Rate Increases" U.S. Department of Health and Human Services, http://companyprofiles. healthcare.gov (Accessed 10/20/2011).
- 3 "Patient Protection and Affordable Care Act" Public Law 111-148, Section 1323, 124 STAT 194 (March 23, 2010); "New Site Lets Consumers Monitor Health Insurance Rate Hikes" By Kelly Kennedy, USA Today, October 7, 2011, http://www.usatoday.com/money/perfi/insurance/story/2011-10-07/health-insurance-rate-hike-website/50682044/1 (Accessed 10/13/2011).
- 4 "Health Insurers Must Justify Rate Increase Under New Rules" HealthLeaders Media, September 2, 2011, http://www. healthleadersmedia.com/content/HEP-270459/Health-insurers-must-justify-rate-increases-under-new-rules.html##(Accessed 10/13/2011).
- 5 Ibid.
- 6 Kennedy, "New Site Lets Consumers Monitor Health Insurance Rate Hikes," 2011.
- 7 "Employer Health Benefits: 2011 Annual Survey" The Kaiser Family Foundation and Health Research and Educational Trust, Menlo Park, CA: September 2011, p. 10.
- 8 Ibid, 11.
- 9 Kennedy, "New Site Lets Consumers Monitor Health Insurance Rate Hikes," 2011.
- 10 Ibid
- 11 "Patient Protection and Affordable Care Act," 2010.
- 12 Kennedy, "New Site Lets Consumers Monitor Health Insurance Rate Hikes," 2011.



(800) FYI - VALU

Providing Solutions in the Era of Healthcare Reform

Founded in 1993, HCC is a nationally recognized healthcare economic financial consulting firm

- HCC Home
- Firm Profile
- HCC Services
- HCC Experts
- Clients Projects
- HCC News
- Upcoming Events
- Contact Us
- Email Us

HEALTH CAPITAL

CONSULTANTS (HCC) is an established, nationally recognized healthcare financial and economic consulting firm headquartered in St. Louis, Missouri, with regional personnel nationwide. Founded in 1993, HCC has served clients in over 45 states, in providing services including: valuation in all healthcare sectors; financial analysis, including the development of forecasts, budgets and income distribution plans; healthcare provider related intermediary services, including integration, affiliation, acquisition and divestiture; Certificate of Need (CON) and regulatory consulting; litigation support and expert witness services; and, industry research services for healthcare providers and their advisors. HCC's accredited professionals are supported by an experienced research and library support staff to maintain a thorough and extensive knowledge of the healthcare reimbursement, regulatory, technological and competitive environment.



Robert James Cimasi, MHA, ASA, FRICS, MCBA, AVA, CM&AA, serves as President of HEALTH CAPITAL CONSULTANTS (HCC), a nationally recognized healthcare financial and economic consulting firm headquartered in St. Louis, MO, serving clients in 49 states since 1993. Mr. Cimasi has over thirty years of experience in serving clients, with a professional focus on the financial and economic aspects of healthcare service sector entities including: valuation consulting and capital formation services; healthcare industry transactions including joint ventures, mergers, acquisitions, and divestitures; litigation support & expert testimony; and, certificate-of-need and other regulatory and policy planning consulting.

Mr. Cimasi holds a Masters in Health Administration from the University of Maryland, as well as several professional designations: Accredited Senior Appraiser (ASA – American Society of Appraisers); Fellow Royal Intuition of Chartered Surveyors (FRICS – Royal Institute of Chartered Surveyors); Master Certified Business Appraiser (MCBA – Institute of Business Appraisers); Accredited Valuation Analyst (AVA – National Association of Certified Valuators and Analysts); and, Certified Merger & Acquisition Advisor (CM&AA – Alliance of Merger & Acquisition Advisors). He has served as an expert witness on cases in numerous courts, and has provided testimony before federal and state legislative committees. He is a nationally known speaker on healthcare industry topics, the author of several books, the latest of which include: "The U.S. Healthcare Certificate of Need Sourcebook" [2005 - Beard Books], "An Exciting Insight into the Healthcare Industry and Medical Practice Valuation" [2002 – AICPA], and "A Guide to Consulting Services for Emerging Healthcare Organizations" [1999 John Wiley and Sons].

Mr. Cimasi is the author of numerous additional chapters in anthologies; books, and legal treatises; published articles in peer reviewed and industry trade journals; research papers and case studies; and, is often quoted by healthcare industry press. In 2006, Mr. Cimasi was honored with the prestigious "Shannon Pratt Award in Business Valuation" conferred by the Institute of Business Appraisers. Mr. Cimasi serves on the Editorial Board of the Business Appraisals Practice of the Institute of Business Appraisers, of which he is a member of the College of Fellows.



Todd A. Zigrang, MBA, MHA, ASA, FACHE, is the Senior Vice President of HEALTH CAPITAL CONSULTANTS (HCC), where he focuses on the areas valuation and financial analysis for hospitals and other healthcare enterprises. Mr. Zigrang has significant physician integration and financial analysis experience, and has participated in the development of a physician-owned multi-specialty MSO and networks involving a wide range of specialties; physician-owned hospitals, as well as several limited liability companies for the purpose of acquiring acute care and specialty hospitals, ASCs and other ancillary facilities; participated in the evaluation and negotiation of managed care contracts, performed and assisted in the valuation of various healthcare

entities and related litigation support engagements; created pro-forma financials; written business plans; conducted a range of industry research; completed due diligence practice analysis; overseen the selection process for vendors, contractors, and architects; and, worked on the arrangement of financing.

Mr. Zigrang holds a Master of Science in Health Administration and a Masters in Business Administration from the University of Missouri at Columbia, and is a Fellow of the American College of Healthcare Executives. He has co-authored "Research and Financial Benchmarking in the Healthcare Industry" (STP Financial Management) and "Healthcare Industry Research and its Application in Financial Consulting" (Aspen Publishers). He has additionally taught before the Institute of Business Appraisers and CPA Leadership Institute, and has presented healthcare industry valuation related research papers before the Healthcare Financial Management Association; the National CPA Health Care Adviser's Association; Association for Corporate Growth; Infocast Executive Education Series; the St. Louis Business Valuation Roundtable; and, Physician Hospitals of America.



Anne P. Sharamitaro, Esq., is the Vice President of HEALTH CAPITAL CONSULTANTS (HCC), where she focuses on the areas of Certificate of Need (CON); regulatory compliance, managed care, and antitrust consulting. Ms. Sharamitaro is a member of the Missouri Bar and holds a J.D. and Health Law Certificate from Saint Louis University School of Law, where she served as an editor for the Journal of Health Law, published by the American Health Lawyers Association. She has presented healthcare industry related research papers before Physician Hospitals of America and the National Association of Certified Valuation Analysts and co-authored chapters in "Healthcare Organizations: Financial Management Strategies," published in 2008.