HB1416 – Any Willing Provider: Overriding Consumer Choice for Affordable Health Care

House Human Services Committee Dylan Wheeler 2/6/2023



What is a network?

General Definition:

• The makeup of facilities, providers and suppliers which a health insurer or plan has contracted to provide health care services.

Types of Networks - Examples:

- **Broad:** a broad network typically consists of a majority if not all of the providers within the service area and beyond.
- Focused: focused networks consist of fewer providers. Providers in a focused network agree to a reduced contracted rate in exchange for the anticipated increased volume.
- **Tiered:** tiered networks consists of just that tiers. Contracted providers and member benefits correspond with the different tiers

NETWORKS

Why do health insurance companies use networks?

- Consumer Choice: Broad and focused Networks <u>empower</u> consumers with different options and allow the consumer to <u>choose</u> a health plan that meets their needs.
- Cost Control: A focused network includes fewer health care providers at a lower cost to the consumer. Broad networks — which include more health care providers increase costs for consumers.
- Encourage a competitive market



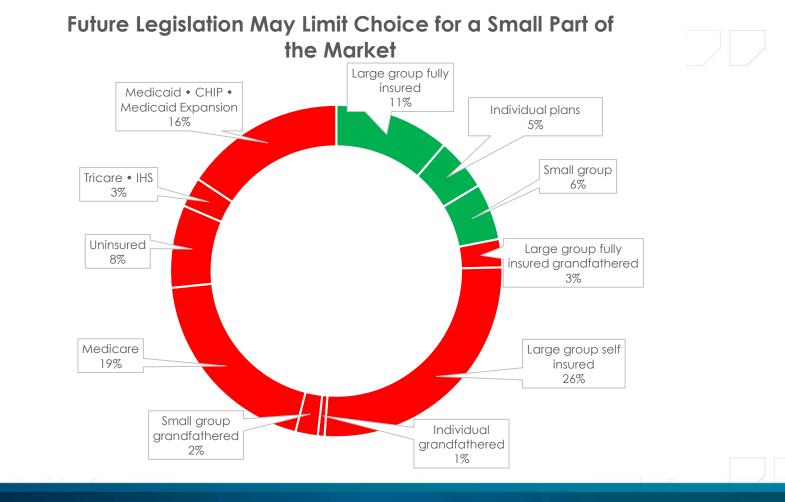
BROAD NETWORKS

FOCUSED NETWORKS

Sanford Health Plan Focused Network availability

Health Insurance Networks and Integrated Care Delivery

- Broad and Focused networks are not unique to integrated care delivery systems plan options are prevalent in markets nationwide.
- Almost all of North Dakota providers are included in Sanford Health Plan's Broad network current day – consumers have the choice to select that plan.
- Focused networks, on average, save a consumer 20% in premium as compared to the broad network.



Consumer Choice and Health Insurance Networks

- Consumers are empowered today to make informed decisions as to what health insurance plan meets their needs – including individuals, families and businesses.
- Choice exists on the ACA Marketplace, as well as with commercial employer coverage.
- Sanford Health Plan <u>requires</u> that employers who offer TRUE (focused network) to its employees <u>MUST</u> offer a broad network product as well.
 - An employer cannot offer just a focused network*
- The #1 complaint that is received is that the focused network product is **not offered through the whole state** members lack that choice today outside of otherwise eligible counties.

Consumer Choice in Action – Example 1:

- ND Employer
- Group has 98% eligible for TRUE (focused network)
- Group has 67% enroll in TRUE; other 33% chose Signature Series (Broad Network)

Plan Tiers	Signature (Broad)	True (Focused)
Employee	\$ 564.39	\$ 452.55
Employee + Spouse	•	\$ 950.36
Employee + Child(ren)	\$ 1,015.90	\$ 814.60
Family Coverage	\$ 1,693.17	\$ 1,357.86



Consumer Choice in Action – Example 2

- ND Employer
- Group has 100% eligible for TRUE (focused network)
- Group has 28% enrolled in TRUE; remaining 72% chose Signature Series (Broad Network)

Plan Tiers	Signature (Broad)	True (Focused)
Employee	\$652.70	\$523.36
Employee + Spouse	\$1,370.66	\$1,099.05
Employee + Child(ren)	\$1,174.86	\$942.04
Family Coverage	\$1,958.09	\$1,570.08

Consumer Choice in Action – Example 3

- ND Employer
- Group has 99% of its employees eligible for TRUE
- Group elected not to offer TRUE to its employees

FICTION

- Sanford only has Sanford providers in the focused network.
- Sanford only pays Sanford providers in the focused network.
- There are no local providers in a focused network.

FACT

- 45% of providers in the focused network are non-Sanford
- On average, 40%-50% of claims paid in focused network go to non-Sanford providers.
- Network adequacy standards require local access.



The **bottom line** is...

- HB1416 will remove the ability for health plans to deliver affordable coverage options.
- HB1416 will remove existing consumer choice from the market.
- HB1416 is a government mandate that supersedes an adaptable market.
- Oppose HB1416 and vote <u>"Do Not</u> <u>Pass"</u>

