



Weekly Bulletin – April 19, 2024



WHAT'S NEW THIS WEEK?

ERIC's Spring Policy Conference in Washington, DC Focused on ERISA Preemption

Karen van Caulil, Florida Alliance CEO and President, flew to Washington, DC on Wednesday to take part in the ERISA Research Industry Committee (ERIC) Spring Policy Conference. The panel, "ERISA Preemption at 50: Evolving Threats to Health Benefits," also included panel moderator Alden Bianchi, Counsel, McDermott, Will & Emery LLP, Laura Hobbs, Director of Health Policy at the American Action Forum, and CJ Mahler, Professional Staff Member, House Education and the Workforce Committee.



*Alden Bianchi,
LLM, JD*



Laura Hobbs, MA



CJ Mahler



Karen van Caulil, PhD

ERIC is very concerned that state efforts, like Florida's Prescription Drug Reform Act signed into law last May, erodes ERISA preemption. Karen was asked to talk about what happened behind the scenes in Florida to move this bill into law, how employers are feeling about the law and its impact, and the status of the regulations that will fully regulate PBMs as insurance administrators. The PBM legislation mandates transparency and network adequacy, among other key elements, the details of which can be found [HERE](#).

As you may recall, Karen serves as the Chair of the State Consumer Health Information and Policy Advisory Council, appointed by the Agency for Health Care Administration Secretary. The Advisory Council will review and advise on the regulations once drafted, but one year later, the Office of Insurance Regulation (OIR) has not begun to develop the regulations and has not released a timeline for doing so. Word on the street is that OIR has been asked to take self-funded plans out of the definition of health benefits plans for the regulations, which would make ERIC and their members very happy.



Also at the event was Mark Cuban, entrepreneur, television “shark,” and former NBA owner. Mark spoke about his [Cost Plus Drugs Program](#), started because he believes every American should have access to safe, affordable medicines. The goal of the program is to dramatically reduce the cost of drugs and introduce transparency to the pricing of drugs, so patients know they are getting a fair price. Every product they sell is priced the same way: their cost plus 15%, plus the pharmacy fee, if any. For more information on the topic or the event, please contact Karen van Caulil at karen@flhealthvalue.org

New Study Finds Continuing Pervasive Disparities in Access to In-Network Mental Health and Substance Use Disorder Treatment

On Wednesday, a new study by health economists at nonprofit research institute RTI International adds to recent research demonstrating a lack of access to affordable mental health and substance use disorder treatment in the US. The study’s findings show that patients went out-of-network 3.5 times more often to see a behavioral health clinician than a medical/surgical clinician, 8.9 times more often to see a psychiatrist, 10.6 times more often to see a psychologist, 6.2 times more often for acute behavioral inpatient care, and 19.9 times more often for sub-acute behavioral inpatient care.

The full report which can be found [HERE](#), has more than 40 of the nation’s leading mental health and employer groups supporting its recommendations, including the Florida Alliance for Healthcare Value, many of whom have provided comments about the importance of the research and resulting recommendations. Karen van Caulil is quoted in the report’s press release:

“Florida employers know that access to behavioral health care is not adequate and detailed analytical tools such as those used in the RTI report allow them to measure access now and over time. It’s critical that purchasers use this data, support the report recommendations, and leverage their purchasing power to influence change with Florida’s health plans, medical and behavioral groups, consultants and brokers to transform the current system and achieve meaningful outcomes to ensure affordable and effective in-network access to care.”



To view the list of supporters and other comments, click [HERE](#). To view a slide deck highlighting key findings and recommendations, click [HERE](#).



EMPLOYER MEMBER EDUCATIONAL PROGRAMS, REPORTS, RESOURCES, AND EMPLOYER LEARNING COLLABORATIVES (ELC)

REMINDER: Employer Member Benefit: Invitation to Attend Webcast *Obesity: Why It Matters to Your Organization and How You Can Take Action* – Wednesday, April 24, 12:15PM – 1:15PM ET

Affiliate Member Novo Nordisk is hosting a webcast entitled *Obesity: Why It Matters to Your Organization and How You Can Take Action* on April 24 at 12:15PM with presenter Jenny Goins.



Jenny Goins

Jenny Goins is the President and CEO of the Kentuckiana Health Collaborative (KHC), a sister coalition, and is considered a national thought-leader on cutting-edge benefit strategies such as free coverage for Diabetes Prevention Programs and free or reduced co-insurance and co-pays for diabetes as well as COPD, and asthma benefits. Jenny presented on this topic at one of our Diabetes/Obesity Employer Learning Collaborative meetings last year.

Click [HERE](#) to register.

If you have any questions, please contact Dan McNulty at dmcn@novonordisk.com. For additional educational information, click [HERE](#).

Employer Member Benefit: Webinar – Behind the Lawsuits, Understanding Recent ERISA Fiduciary Litigation – Wednesday, May 1, 12:30PM ET

This timely webinar, hosted by Catalyst for Payment Reform, examines recent litigation regarding ERISA health benefit plans. Several recent lawsuits have alleged that employers breached their fiduciary duty for the administration of self-funded insurance plans. Employers need to be aware of and understand the implications of these lawsuits. As an FYI, there is no pending legal action regarding Florida's PBM law, but once the proposed regulations are released, there are several organizations ready to file lawsuits.

Featured speakers include:



Christin Deacon, JD., Principal Owner of VerSan Consulting. Chris is a panelist at our May 6 Annual Conference and was part of our All-Star Panel on Transparency and Accountability at last year's Conference.



Jon Corey, JD, a principal in McKool Smith's Los Angeles office who represents plaintiffs in the healthcare industry including self-funded plans, plan sponsors, and healthcare providers.

To register, click [HERE](#).

Annual Conference – 40 Years of Impact: Pioneering Progress in Health Care – Addressing Challenges, Shaping the Future – Monday, May 6, 8:00AM – 5:00PM

The Conference is just a couple of weeks away! If you have not registered yet, we encourage you to do so as soon as possible to be assured of a seat!

Our full-day conference is packed with informative sessions:

- How COVID Crashed the System: A Guide to Fixing American Health Care – Keynote Address
- When Will the Price Be Right?
- Advanced Primary Care is Everything
- How to Use Data to Drive High Quality Outcomes in Mental Health
- Innovator Showcase

Click on the image below to hear panelist Lester Morales provide information about what you learn during the session *When Will the Price Be Right?*



Lester Morales

To view the agenda, please click [HERE](#).

Remember, all Employer Members can attend the Annual Conference for **FREE** by using promo code **EMPLOYER40** when registering. **There is no limit on the number of people from your organization who can use this code.** To learn more about the Annual Conference including a link to registration, please visit our website by clicking [HERE](#).

To use the promo code:

1. Click on ADD PROMO CODE to open the promo code window.
2. After entering the promo code EMPLOYER40, click APPLY.
3. When your code has successfully been applied, ADD 1 EMPLOYER TICKET.
4. Click CONTINUE to open the page to fill in your Contact Information.

Employers Members who wish to invite potential Employer or Affiliate Members, feel free to offer complimentary registration by sharing the code **EMPLOYERGUEST40**, ticket type: **Non-Member**, with your contacts.

REGISTER TODAY TO RESERVE YOUR SEAT AND RECEIVE A COPY OF OUR KEYNOTE SPEAKER'S BESTSELLING BOOK! THE FIRST 100 EMPLOYERS TO REGISTER RECEIVE DR. NASH'S BOOK!

If you need more information, or help with registration, please contact Lisa Hain at lisa@flhealthvalue.org.

Employer Member Benefit: Webinar – Employer Tools for Managing Hypertension in the Workforce – Thursday, May 23, 2:00PM – 3:00PM

Our sister coalition, Greater Philadelphia Business Coalition on Health, has generously offered a free webinar on Employer Tools for Managing Hypertension in the Workforce to our Employer Members as part of the CDC Foundation's ongoing dissemination efforts to raise employer awareness and stimulate action.



During this one-hour webinar, attendees will learn:

- **Prevalence and costs of hypertension in employed populations**
- **Why addressing hypertension is essential to population health improvement and cost control**
- **How to access and use tools that are available to employers for estimating the economic impact of hypertension for their population**
- **How to address hypertension prevention and management through health and well-being programming and benefit design**

If you did not receive the calendar invitation sent this morning, or need it re-sent, please contact Lisa Hain at lisa@flhealthvalue.org



IN CASE YOU MISSED IT

Mayo Clinic Employees File Class Action Lawsuit Over High Healthcare Costs – article from *Minnesota Reformer*

A proposed class action lawsuit alleges that some employees, while working for one of the world’s most prestigious healthcare organizations, are saddled with enormous healthcare bills due to their poor health insurance which has forced them to seek expensive out-of-network providers for essential care.



It is alleged that Mayo Clinic employees racked up more than \$10,000 in healthcare costs a year while others said they avoided going to the doctor for fear of what it would cost. The lawsuit accuses Medica, the insurer that administers Mayo Clinic’s self-insured plan, of “using ‘deceptive, misleading, arbitrary’ pricing methods that leave plan members in the dark about health costs and allow for inconsistent reimbursement rates, in violation of federal law and Medica’s fiduciary responsibilities.”

To read the full article, click [HERE](#).

Impact of HSAs on Service Utilization and Spending

An [EBRI study](#) has found that health savings account (HSA) eligible health plans have mixed effects on the use of healthcare services with no impact on overall spending. HSA plans led to higher inpatient admissions, fewer prescriptions filled, and a shift from specialist to primary care provider visits. While spending remained unaffected, spending for enrollees with two or more conditions was 6% higher than those in PPOs, driven by increased inpatient visits. These findings, shared as an *EBRI Issue Brief*, were co-authored by Paul Fronstin, PhD.



Paul Fronstin, PhD

Dr. Fronstin has presented his research to the Florida Alliance in the past including his Keynote Address, “Employment-Based Health Benefits: Where Do We Go From Here,” at our 2017 Annual Meeting and the webinar, [Expanding the Generosity of HSA-Eligible Health Plans](#), in December 2022. Karen van Caulil, Florida Alliance President and CEO, also co-presented with Dr. Fronstin at the Health Benefits Conference & Expo (HBCE) on the premium impact of expanding pre-deductible coverage in HSA-eligible health plans.

For more information on this issue brief, please contact Karen van Caulil at karen@flhealthvalue.org