

## *When Will the Price Be Right?*



**Karen van Caulil, Ph.D.**  
**(Moderator)**  
*President & CEO*  
Florida Alliance for  
Healthcare Value

**Mike Adams**  
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7-Eleven



**Yvette M. Best, EdD, CCP,  
SPHR, SHRM-SCP**  
*Head of Human  
Resources*  
Orange County  
Government, Florida

**Christin Deacon, J.D.**  
*Principal Owner*  
VerSan Consulting



**Lester Morales**  
*Founder & CEO*  
Next Impact, LLC

# Recent and Ongoing Litigation

## Employer vs. TPA (vendor)

- Mass Laborers vs. BCBS Mass (dismissed)
- Bricklayers vs. Anthem/Elevance (dismissed, will refile)
- Kraft Heinz (settled/arbitration)

## Employee vs. Employer

- Lewandowski, et al., vs. J&J
- Employee vs. Mayo Clinic

## Department of Labor vs. TPA

- DOL vs. BCBS Minnesota
- DOL Amicus Briefs in Support of Employer

Generic  
 abacavir  
 abacavir-lami  
 abiraterone ac  
 atazanavir sul  
 azathioprine  
 capecitabine  
 cyclosporine  
 dalfampridine  
 deferasirox  
 dimethyl fum  
 droxidopa  
 efavirenz  
 efavirenz-emt  
 tenofovir diso  
 emtricitabine-  
 enoxaparin so  
 etravirine  
 everolimus  
 fingolimod  
 fondaparinux  
 glatiramer  
 ibandronate  
 imatinib mesy  
 lamivudine  
 lamivudine-zi  
 mycophenolat  
 mycophenolat  
 nevirapine  
 nevirapine X  
 octreotide ace  
 ribavirin table  
 ritonavir table  
 sildenafil citra  
 sirolimus  
 sofosbuvir/ve  
 tacrolimus  
 tadalafil table  
 temozolomide

# 1st Quarter 2024 Results<sup>1</sup>

<b>1st Quarter 2024 Sales</b>		Worldwide increased ▲	
<b>\$21.4B</b>	<b>2.3%</b>	Excluding acquisitions / divestitures on an operational basis	Worldwide increased ▲ <b>7.7%<sup>*,2</sup></b>
<b>Diluted earnings per share</b>		<b>Adjusted diluted earnings per share*</b>	
<b>\$2.20</b>		<b>\$2.71</b>	Increased ▲ <b>12.4%</b>



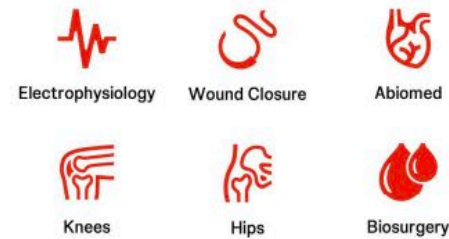
“ Johnson & Johnson’s solid first quarter performance reflects our sharpened focus and the progress in our portfolio and pipeline. Our impact across the full spectrum of healthcare is unique in our industry, and the milestones achieved this quarter reinforce our position as an innovation powerhouse. ”

**Joaquin Duato**  
 Chairman & Chief Executive Officer  
 Johnson & Johnson

**\$13.6 billion** **Worldwide Innovative Medicine sales**  
 Innovative Medicine worldwide reported sales increased 6.9%<sup>2</sup> or 8.3%<sup>2</sup> operationally<sup>3</sup>.  
 Primary operational drivers:



**\$7.8 billion** **Worldwide MedTech sales**  
 MedTech worldwide reported sales increased 4.5% or 6.3% operationally<sup>3</sup>.  
 Primary operational drivers:



**Johnson & Johnson**

For full financial data, and non-GAAP reconciliations, and cautionary statements, please refer to Johnson & Johnson’s earnings release issued April 16, 2024, available at <https://www.jnj.com/ir/financial-data/quarterly-results/2024/q1>.

\*Non-GAAP financial measure: non-GAAP financial measures should not be considered replacements for, and should be read together with, the most comparable GAAP financial measures.

<sup>1</sup> Results have been recast to reflect the continuing operations of Johnson & Johnson.

<sup>2</sup> Excluding COVID-19 Vaccine.

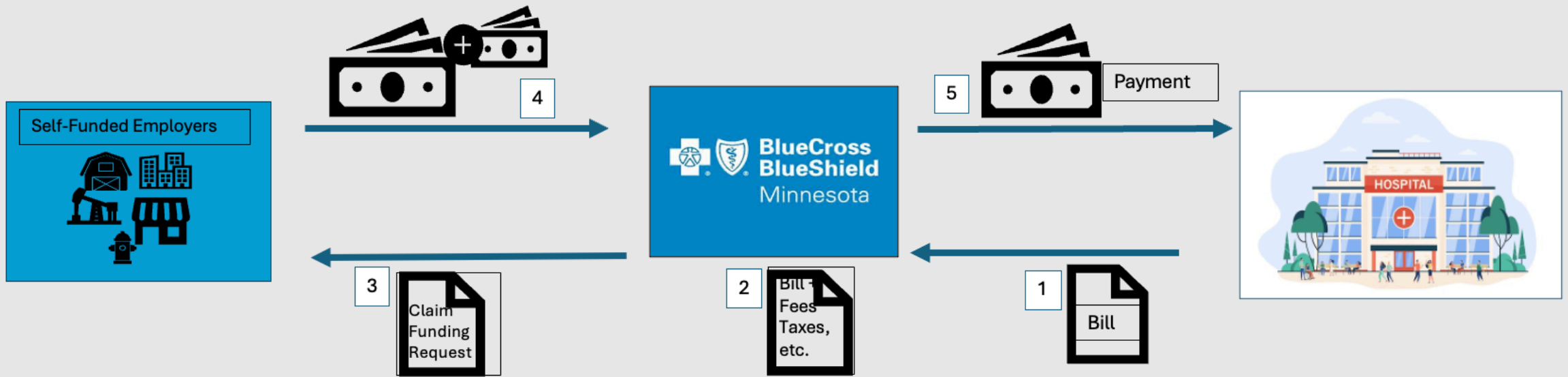
<sup>3</sup> Non-GAAP measure: excludes the impact of translational currency.

Caution Concerning Forward-Looking Statements: This document contains “forward-looking statements” as defined in the Private Securities Litigation Reform Act of 1995 regarding future operating and financial performance. You are cautioned not to rely on these forward-looking statements, which are based on current expectations of future events. For important information about the risks and uncertainties that could cause actual results to vary materially from the assumptions, expectations, and projections expressed in any forward-looking statements, review the “Note to Investors Concerning Forward-Looking Statements” included in the Johnson & Johnson earnings release issued on April 16, 2024, as well as the most recently filed Johnson & Johnson Reports on Forms 10-K and 10-Q. Johnson & Johnson does not undertake to update any forward-looking statements as a result of new information or future events or developments.

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1. Provider Submits Bill to BCBS Minnesota
2. BCBSM Adjudicates Claim According to "Network Agreements" and adds fees, taxes, and other charges = Claim\*
3. BCBSM Submits Claim\* to Self-Funded Employers
4. Employer Funds Claims
5. BCBS Pays Provider "Negotiated Rate" and retains fees



**Yvette M. Best, EdD, CCP., SPHR, SHRM-SCP**  
Head of Human Resources  
Orange County Government, Florida



# What's in Your Claims Data?

Protecting Your Members, Saving Money & Meeting Your Fiduciary Responsibility

**Speaker: Mike Adams**



# About 7-ELEVEN

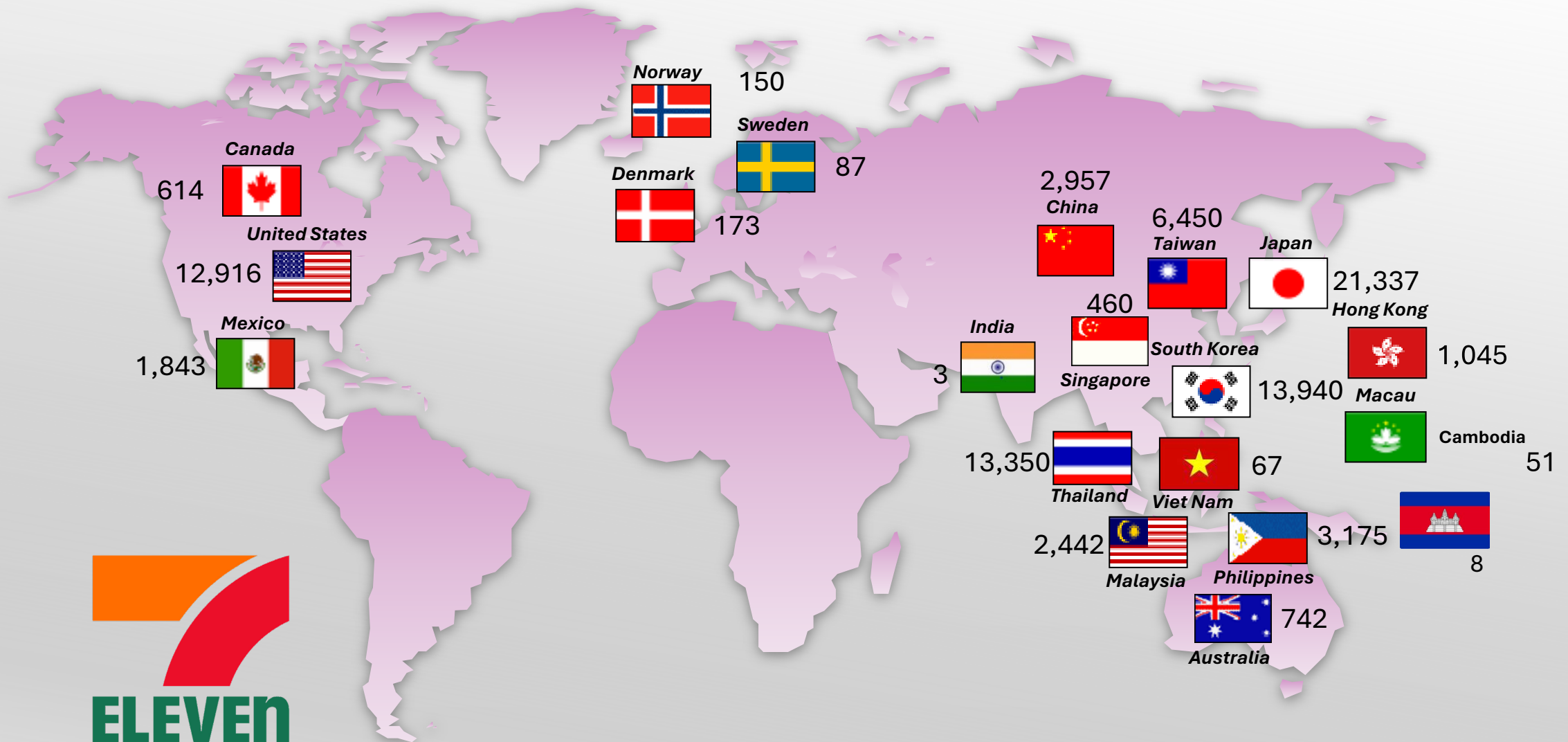
- 75,000 U.S. & Canada employees
- 14k + U.S. stores
- 1,135 stores in Florida
  - 835 Franchisee stores
  - 300 Corporate stores
  - 900 Florida employees



January 2024

7-Eleven, Inc. Proprietary & Confidential





# WORLD'S LARGEST RETAILER



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UNIVERSITY

\*Confirmed store counts as of 5/31/2022. US includes Hawaii.





Serving more than 59 million customers daily



81,000 + stores worldwide & a new store opening every 2.5 hours



\$113 billion dollars in sales\*

\*2019



**WORLD'S LARGEST RETAILER**

# WORLD'S LARGEST RETAILER

We are in a class of our own



81,810

in 18 countries



43,617

in 135 countries



41,512

in 100 countries



37,855

in 100 countries



28,218

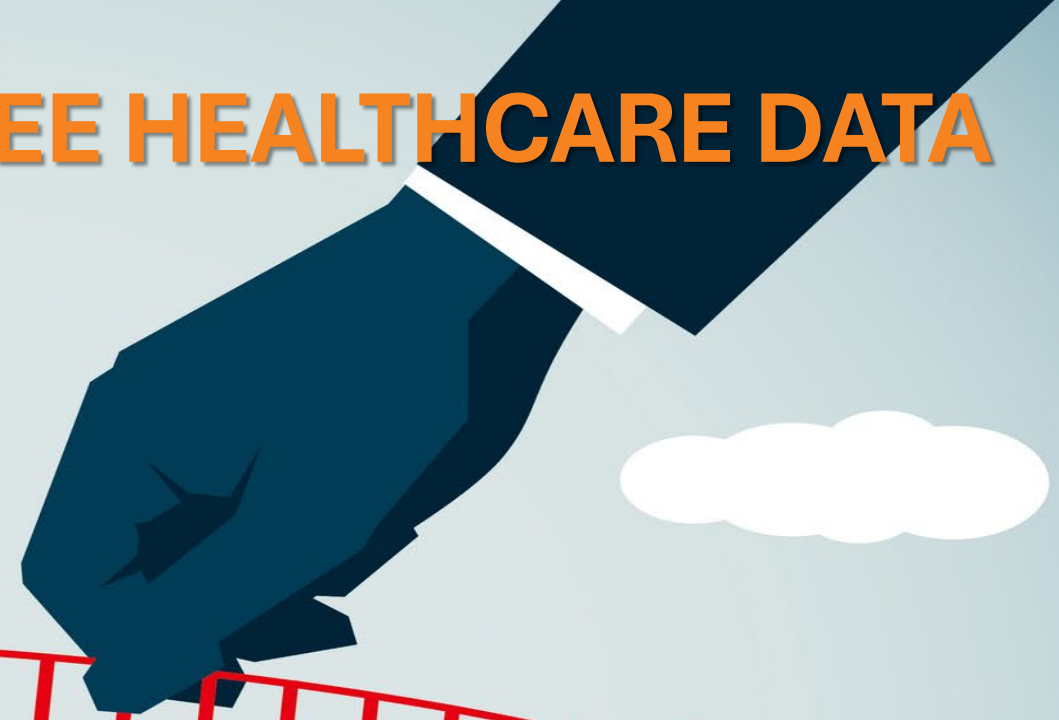
in 76 countries



(Store Count Source: Company Websites)

# PROTECTING OUR EMPLOYEE HEALTHCARE DATA

Bridging the gap with knowledge



Employer Cost & Responsibilities

Carrier Knowledge



To reduce cost, employers must bridge the gap

# WHAT'S IN YOUR DATA?

## Findings



**PLAN SAVINGS**  
**\$63,961**

### BILLING FOR NONCOVERED SERVICES

- Provider consistently billed for high-cost amniotic membrane allograft called Affinity (code Q4159)
  - CPT Q4159 NOT COVERED: experimental and investigational
  - **At time of SmartLight review, \$173,000 had been paid by the Plan**
  - SmartLight referred to TPA and payments ceased for three months
  - SmartLight identified that billing began again and SmartLight re-addressing this provider with TPA

Code Type	Code	Description
CPT	99213	Office visit for established patient, 20-29 minutes, low-level medical decision
HCPCS	Q4159	Affinity1 Square Cm

Organization	Date	Comment
SmartLight	3/23/2024	No billing past 1-15-2024 - Provider no longer billing the plan.
TPA	3/20/2024	Update received from TPA: Does an open case exist for this Provider?
SmartLight	2/20/2024	Review for preventative - post notification to SL provider referred for fraud review
TPA	1/11/2024	Network has advised reviews forwarded to fraud area. If provider is not already being investigated, records will be requested.
SmartLight	11/15/2023	TPA Policy: As of September 15th, 2023, TPA considers Affinity application beyond 12 weeks to be not medically necessary.

# WHAT'S IN YOUR DATA?

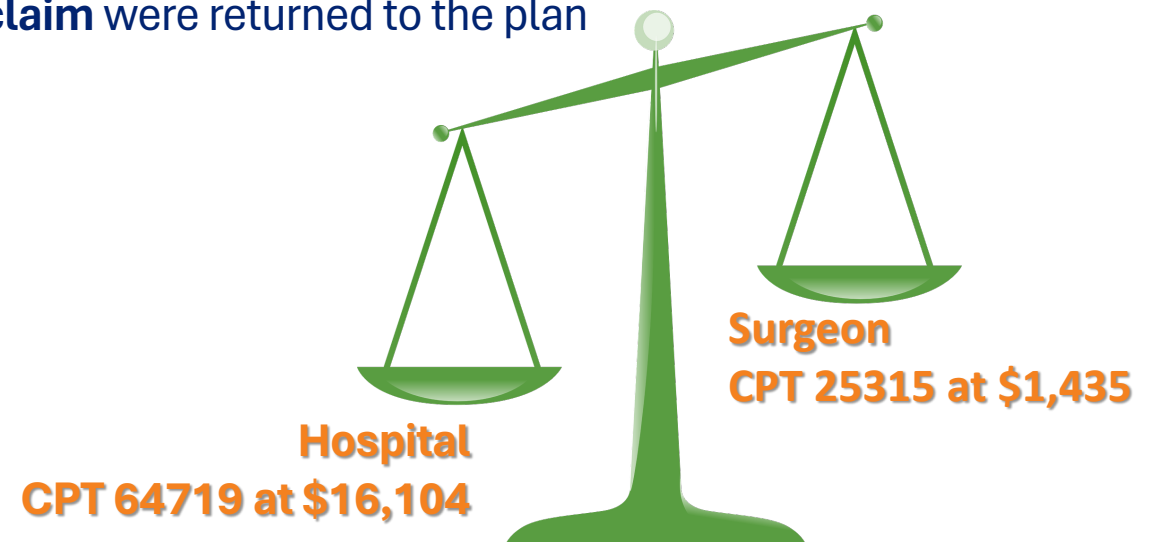
## Findings



PLAN SAVINGS  
\$28,673

## SURGERY MISMATCH

- Surgery for 16-year-old dependent to release tendon contraction
  - Surgeon billed CPT 25315 and was paid \$1,435
  - Hospital billed for more complex CPT code 64719 for elbow nerve surgery, never billed by the surgeon, and the plan paid \$16,104
- SmartLight successfully worked with carrier to look at medical records to confirm or deny the accuracy of codes billed and **facility charges related to the entire claim** were returned to the plan





# THE BIG PICTURE

- Compliance
- Fiduciary Responsibilities – scrutiny over every dollar spent
- Economic Pressures – rising inflation, rising costs, advances in science
- Legislative Landscape – transparency and data access
- Legal Landscape – member v employer, employer v TPA, DOL v TPA

A photograph of several rows of empty, modern black chairs with curved backs and thin metal legs, arranged on a light-colored tiled floor. The chairs are viewed from a slightly elevated angle, creating a sense of depth and repetition. The lighting is soft, highlighting the smooth texture of the chairs and the geometric patterns of the tiles.

# SHOW OF HANDS

# Consolidated Appropriations Act (CAA)



## Rx: Program Review- Contract Concerns

### Rx Program Review- Contract Concerns

#### ► CAA/ ERISA

- 21 Gag clauses found- \$94,000,000- potential annual risk
  - Limitations of use of data
  - Restrictions on audit
  - Restrictions on data retention post-termination
  - Restrictions on employer internal use

Tracking Number	Contract Title	Carrier or Service Provider	Potential Gag Clauses Found
001	Digital Intelligence Systems 2023 PGA.pdf	Caremark PCS Health, L.L.C.	0
002	Digital Intelligence Systems LLC. ASA Amend FRAT Other 1.1.2023 Final Signed.pdf	United HealthCare Services, Inc.	0
003	EHPC - Amd Rstd PBSA (01-01-23).pdf	Caremark PCS Health, L.L.C.	21
004	UHC ASA DYSIS (2016).pdf	United Healthcare Services, Inc	12

#	Type	Page & Section	Gag Clause Instance
1	Limits on data transfer to 3rd party	Page 11 Section 2.11 Reports, Claims Data and SAS 70	With the issuance of each invoice, Caremark shall provide Participating Group up to two (2) sets of complete Claims data in Caremark's standard format. At Participating Group's expense, request and direction, Caremark may provide detailed electronic files or Claims detail reports to Participating Group's designated third-party service provider subject to such third party's execution of Caremark's form confidentiality agreement. Participating Group may release or provide Claims data including pricing and other confidential information, to a mutually acceptable third-party provided such third party signs a confidentiality agreement with Caremark prior to such disclosure.
2	Limits on data transfer to 3rd party	Page 15 Section 5.2 (b) Rebate Audit	Any mutually agreed upon third party auditor engaged by Participating Group shall execute Caremark's form confidentiality agreement prior to conducting a Rebate audit ensuring that all information gathered during such audit and all details and terms of any pharmaceutical company contract reviewed will be treated as confidential and will not be revealed in any manner or form by or to any third party, including Participating Group.
3	Limits on data transfer to 3rd party	Page 15 Section 5.3 Audit of Retail Network Agreements	Such firm will sign a Caremark confidentiality agreement ensuring that all details and terms of pharmacy provider contracts with Caremark (except for the total aggregate amount due to Participating Group) will be treated as confidential to Caremark and will not be revealed in any manner or form by or to any person or entity.

#	Type	Page & Section	Gag Clause Instance
4	Limits on data transfer to 3rd party	Page 22 Section 10.6 Authorization to Release Data to EHPC's and Participating Group's Designated Third Party Service Providers	EHPC and Participating Group each acknowledge that any such disclosure shall be subject to either the execution of a separate confidentiality agreement by Caremark and Participating Group Service Provider or with respect to disclosure to EHPC, Section 10 of the Agreement, which shall govern the disclosure and use of such Confidential Information as between Caremark and Participating Group Service Provider.
5	Limits on data transfer to 3rd party	Page 25 Section 13.14 General Provisions	Such third-party data warehouse vendor shall execute a confidentiality agreement in a form and substance acceptable to Caremark prior to receiving such data.
6	Restrictions on Audit	Page 7 Paragraph (a) Participating Pharmacy Audit	Caremark will have the sole right to audit Participating Pharmacies.
7	Restrictions on Audit	Page 14 Section 5.1 Audit Rights (note Exhibit C)	Claims Audits. Participating Group, or a mutually acceptable independent third party retained by Participating Group, may conduct an annual Claims audit of Caremark data that directly relates to Claims billings for the prior Contract Year. The scope of the Claims audit shall be in accordance with the procedures set forth in Exhibit C of this Agreement. Participating Group acknowledges that it shall not be entitled to audit agreements with vendors, pharmaceutical companies, Participating Pharmacies or other providers of products or services to Caremark.
8	Restrictions on Audit	Page 15 Section 5.2 (a) (note Exhibit C)	Rebate Audits. (a) Participating Group, through a mutually agreeable independent third party retained by Participating Group, may conduct an annual Rebate audit for the prior Contract Year. Such audit shall be limited to a review of up to ten (10) pharmaceutical company contracts directly related to Participating Group's Rebates. Such review of pharmaceutical company contracts may include formulary and Rebate provisions to the extent permitted by such contracts and shall be limited to information necessary for validating the accuracy of the Rebate amounts distributed to Participating Group by Caremark. The scope of the Rebate audit shall be in accordance with the procedures set forth in Exhibit C of this Agreement.
9	Restrictions on Audit	Page 15 Section 5.2 (b)	(b) Any mutually agreed upon third party auditor engaged by Participating Group shall execute Caremark's form confidentiality agreement prior to conducting a Rebate audit ensuring that all information gathered during such audit and all details and terms of any pharmaceutical company contract reviewed will be treated as confidential and will not be revealed in any manner or form by or to any third party, including Participating Group.
10	Restrictions on Audit	Page 5 Section 5.3 (Note Exhibit C)	Audit of Retail Network Agreements. Participating Group may request to have audited up to five (5) retail pharmacy provider contracts once in each twelve (12) month period. Audit requests involving a review of retail pharmacy provider contracts must be performed by an independent accounting firm, agreeable to both parties. Such firm will sign a Caremark confidentiality agreement

#	Type	Page & Section	Gag Clause Instance
			ensuring that all details and terms of pharmacy provider contracts with Caremark (except for the total aggregate amount due to Participating Group) will be treated as confidential to Caremark and will not be revealed in any manner or form by or to any person or entity. Such records shall be limited to information necessary for validating the accuracy of the Claims billing. The scope of the audit shall be in accordance with the procedures set forth in Exhibit C of this Agreement.
11	Restrictions on Audit	Page 41 Paragraph 2 Use of 3rd Party Auditor Exhibit C Audit Procedures	Use of Third-Party Auditor In the event a third-party auditor is used, the auditor shall be a mutually acceptable independent third-party retained by Participating Group. The third-party auditor shall execute a confidentiality agreement with Caremark in a form and substance reasonably acceptable to Caremark prior to conducting an audit.
12	Restrictions on Audit	Page 41 Paragraph 3 Teleconference Exhibit C Audit Procedures	Requirement and purpose of an approved confidentiality agreement (for use with outside audit firms or other Participating Group representatives, as applicable).
13	Restrictions on Audit	Page 41 Paragraph 3 Teleconference Exhibit C Audit Procedures	Guidelines for acceptable verification of audit questions.
14	Restrictions on Audit	Page 41 Paragraph 3 Teleconference Exhibit C Audit Procedures	Caremark's right to respond within a reasonable time after questions arise and before audit results are disseminated by the auditor to Participating Group.
15	Restrictions on Audit	Page 41 Paragraph 4 Mutually Agreed Upon Timeline Exhibit C Audit Procedures	Participating Group and Caremark will mutually agree upon an audit timeline, taking into consideration individual circumstances and constraints. Claim tape request - two (2) weeks + Standard screen prints - two(2) weeks+Mail service prescription copies - six (6) weeks (cost is typically \$5.00 per script copy) + Audit Report Reply - one (1) month.
16	Restrictions on Audit	Page 42 Paragraph 5 Response to Sampling Questions Exhibit C Audit Procedures	Response to Sampling Questions The Participating Group can submit to Caremark questions related to provided claim samples. Answers to sampling questions are normally provided within two (2) weeks after the questions have been presented.
17	Restrictions on Audit	Page 42 Paragraph 6 Claims Tape Requests Exhibit C Audit Procedures	Claims tape specifications shall be clarified during the initial teleconference and processed in the order of receipt of a signed Confidentiality Agreement. Delivery to the specified party normally takes place within two (2) weeks.

#	Type	Page & Section	Gag Clause Instance
18	Restrictions on Audit	Page 42 Paragraph 7 Audit Report Exhibit C Audit Procedures	Audit Report In the event of an audit by a third party, Caremark and Participating Group will be provided a copy of any proposed audit report and Caremark will have a reasonable opportunity to comment on any such report before it is finalized.
19	Restrictions on Audit	Page 42 Paragraph 10 Audit Document Limitations Exhibit C Audit Procedures	Audit Document Limitations Participating Group acknowledges that it shall not be entitled to audit documents that Caremark is barred from disclosing by applicable law or pursuant to an obligation of confidentiality to a third party.
20	Restrictions on data retention post-termination	Page 21 Section 9.5 (d) Obligations Upon Termination	(d) Upon termination of this Agreement by EHPC, Caremark will transition claims files and/or history that do not contain Caremark's cost and pricing information for all Participating Groups to EHPC's new pharmacy benefit manager
21	Restrictions on employer internal use	Page 21 Section 10.2 Confidential and Proprietary Information.	Each party will disclose Confidential Information of the other parties only to its officers or employees who have a need to know the Confidential Information in order to accomplish the purpose of this Agreement and who (i) have been informed of the confidential and proprietary nature of the Confidential Information, and (ii) have agreed not to disclose it to others and to treat it in accordance with the requirements of this Section.




# What we've learned

1. CAA = Opportunity for Change
2. Fiduciary = YOUR Role
3. The "status quo" doesn't want it
4. Data is YOURS and KEY to success
5. Better benefits/ Lower cost IS possible

**NEW LOWER COSTS FOR HEALTH INSURANCE**  
**COSTOS NUEVOS MAS BAJOS PARA SEGURO MEDICO**

**Enroll November 1 - January 15 on Healthcare.gov**  
**Inscribase del 1 de Noviembre al 15 de Enero en cuidadores.gov**



**Navigators are here to help**  
**Nuestros Navegadores están aquí para ayudar**

**CBFRC CENTRAL TAMPA**, 1002 East Palm Avenue, Tampa, FL 33605, (813) 204-1741

**CBFRC South County**, 3030 East College Avenue, Ruskin, FL 33570, (813) 558-1877

**CBFRC PLANT CITY**, 301 North Palmer Street, Plant City, FL 33563, (813) 752-8700

**CBFRC TOWN N COUNTRY**, 7520 West Waters Ave, Town N Country, FL 33615, (813) 356-1703

**CBFRC TEMPLE TERRACE**, 5892 East Fowler Ave., Temple Terrace, FL 33617, (813) 435-3032

**CBFRC NORTH TAMPA**, 116 West Fletcher Avenue, North Tampa, FL 33612, (813) 558-1877

**CBFRC BRANDON**, 1271 Kingsway Road, Brandon, FL 33511, (813) 740-4834

November 5, 2021, 1:00 P  
5 de Noviembre del 2021 de 1:00 p

November 12, 2021, 1:00 P  
12 de Noviembre del 2021 de 1:00 p

November 19, 2021, 1:00 P  
19 de Noviembre del 2021 de 1:00 p

December 3, 2021, 1:00 P  
3 de Diciembre del 2021 de 1:00 p

December 10, 2021, 1:00 P  
10 de Diciembre del 2021 de 1:00 p

January 7, 2022, 1:00 P  
7 de Enero del 2022 de 1:00 p



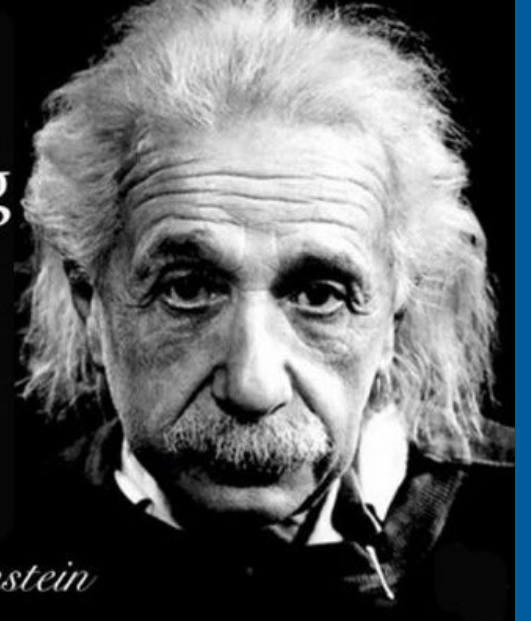
# Why the Why Matters



# WHAT HAPPENS TODAY

**Insanity:**  
doing the same thing  
over and over again  
and expecting  
different results.

*- Albert Einstein*



THE CURRENT MODEL

# DESIGNED WRONG





# The Current Model

MISALIGNED  
INCENTIVES

QUALITY  
VS.  
COST

NO STEERAGE/  
ADVOCACY

NO WAY FOR  
ANYONE TO  
WIN

## TOP 25 BENEFITS BROKERS BY GROWTH

Ranked by rate of growth in 2022 employee benefits revenue\*

Rank	Company	2022 employee benefits revenue	% increase	% of total revenue
1	Keystone Agency Partners LLC	\$18,121,341	151.4% <sup>1</sup>	12.0%
2	Sunstar Insurance Group	\$22,900,000	90.0%	18.7%
3	Digital Insurance Inc., dba OneDigital	\$502,575,098	87.0%	55.4%
4	Alkeme Inc.	\$18,000,000	80.0%	18.4%
5	PCF Insurance Services	\$126,000,000	68.0%	17.3%
6	C3 Risk & Insurance Services	\$2,158,507	63.3% <sup>1</sup>	10.3%
7	Patriot Growth Insurance Services LLC	\$127,070,000	43.3%	32.7%
8	Inszone Insurance Services	\$6,907,664	40.3%	10.0%
9	IMA Financial Group Inc.	\$123,147,348	33.5%	22.0%
10	Choice Insurance Services LLC	\$2,270,557	32.9%	8.8%
11	Swingle, Collins & Associates	\$2,081,535	30.3%	6.3%
12	Oakbridge Insurance Agency LLC	\$8,207,000	26.1%	12.8%
13 (tie)	Alera Group	\$568,000,000	25.9%	46.0%
13 (tie)	RSC Insurance Brokerage Inc., dba Risk Strategies Co.	\$247,239,235	25.9%	20.7%
15	The Plexus Groupe LLC	\$20,154,209	25.7%	54.5%
16	CAC Group <sup>2</sup>	\$16,821,284	23.4%	8.9%
17	Higginbotham	\$195,454,000	22.7%	33.8%
18	BroadStreet Partners Inc.	\$270,855,000	21.2%	20.7%
19	Foundation Risk Partners Corp.	\$132,126,000	21.1% <sup>1</sup>	26.6%
20	World Insurance Associates LLC	\$44,192,182	20.6%	11.9%
21	Gibson Insurance Agency Inc., dba Gibson	\$12,608,000	20.5%	40.7%
22	Starkweather & Shepley Insurance Brokerage Inc.	\$4,888,618	20.4%	6.2%
23 (tie)	USI Insurance Services LLC	\$1,083,487,775	20.0%	43.6%
23 (tie)	DSG Benefits Group LLC	\$900,250	20.0%	85.7%
25	Automatic Data Processing Insurance Agency Inc.	\$55,140,362	19.6%	17.4%

\*To be ranked brokers must have generated \$500,000 or more in employee benefits revenue in 2022. Companies deriving more than 49% of their gross revenue from personal lines are not ranked. <sup>1</sup>Restated 2021 revenue. <sup>2</sup>Formerly Cobb Allen/CAC Specialty.

Source: *BI* survey

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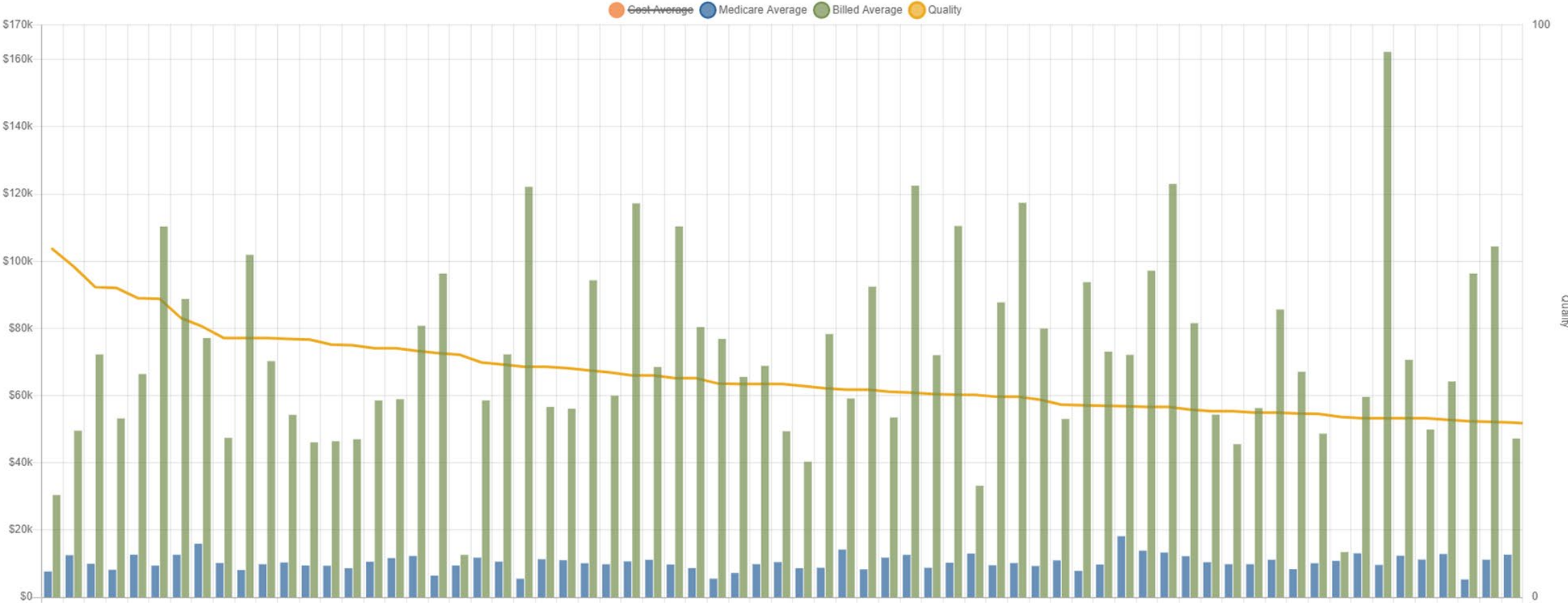
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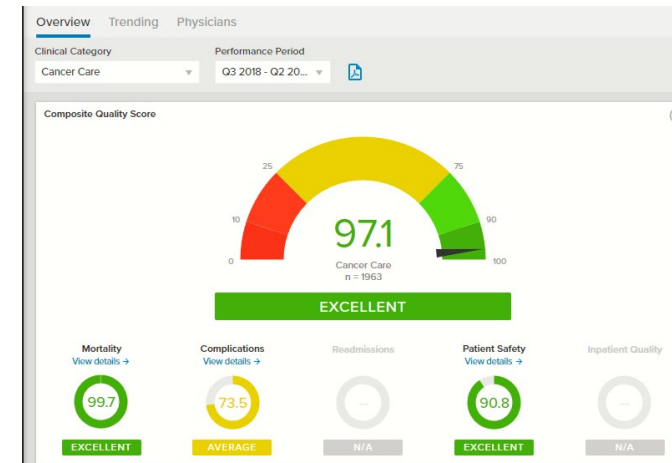
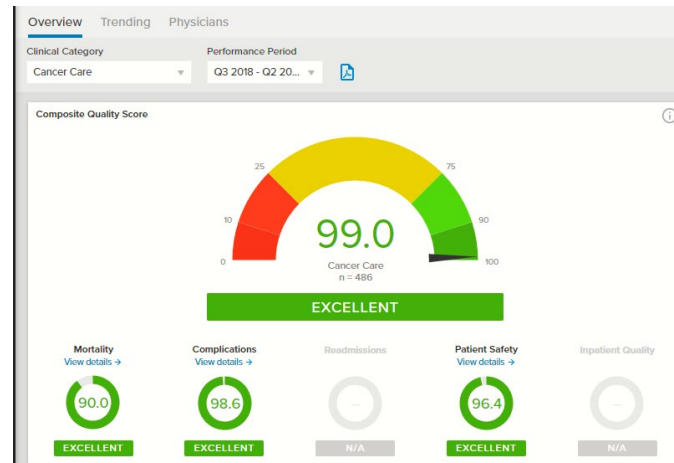
# WHO IS WINNING?

# QUALITY vs. COST

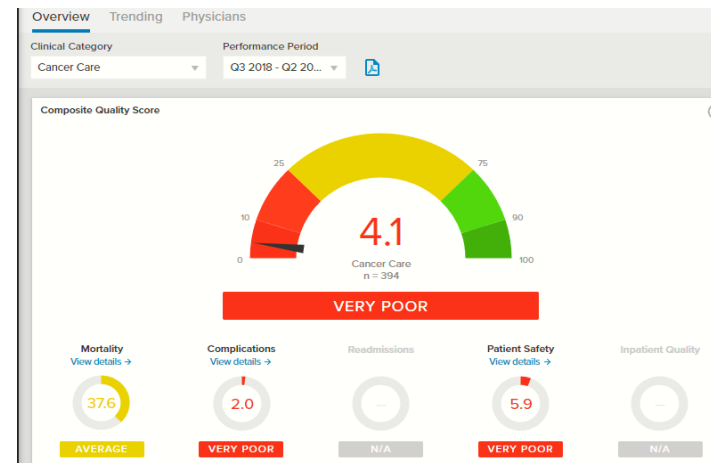


# WHERE WOULD YOU GO FOR YOUR CANCER TREATMENT?

Go Here...



Not Here...





# WHERE WOULD YOU GO FOR YOUR CANCER TREATMENT?

General Information	Cost to Charge Ratios	Cost centers	Transplant information
<b>Overview</b>	<b>Total (all departments)</b> 18%	<b>Routine Inpatient</b>	<b>Kidney</b>
	OR Room 18%	<b>Charges</b> \$672,101,084	<b>Acquisition Cost</b> \$68,666
	Recovery Room 32%	<b>Costs</b> \$254,950,764	<b>Acquisition Charge</b> \$159,669
	Delivery Room 47%	<b>Days</b> 148,429	<b>Living Count</b> 26
	Anesthesiology 6%	<b>Charge/Day</b> \$4,528	<b>Cadaveric Count</b> 132
	Radiol. Diag. 17%	<b>Cost/Day</b> \$1,718	<b>Total Cost</b> \$10,849,295
<b>Type</b> Acute Care Hospitals	Radiol. Therap. 13%		<b>Total Charges</b> \$25,227,649
<b>Billed to Medicare Ratios</b>	Radioisotope 24%	<b>Intensive Care</b>	<b>Heart</b>
Inpatient 7.44	CT Scan 3%	<b>Charges</b> \$264,513,222	<b>Acquisition Cost</b> \$75,537
Outpatient 10.27	MRI 7%	<b>Costs</b> \$68,290,271	<b>Acquisition Charge</b> \$59,987
	Cardiac Cath -	<b>Days</b> 21,418	<b>Living Count</b> -
<b>Data Source Dates</b>	Laboratory 7%	<b>Charge/Day</b> \$12,350	<b>Cadaveric Count</b> 49
Inpatient Jun 2020	PBP Clinical Lab -	<b>Cost/Day</b> \$3,188	<b>Total Cost</b> \$3,701,308
Outpatient Jun 2020	Blood/Packed Blood -	<b>Coronary Care</b>	<b>Total Charges</b> \$2,939,384
Cost Report FY 2019	Blood Store 17%	<b>Charges</b> \$116,529,905	<b>Liver</b>
	IV Therapy -	<b>Costs</b> \$25,794,911	<b>Acquisition Cost</b> \$72,136
<b>Financials</b>	Resp. Thera 18%	<b>Days</b> 10,889	<b>Acquisition Charge</b> \$93,359
<b>Total charges</b> \$8,560,366,122	Phys. Thera 28%	<b>Charge/Day</b> \$10,702	<b>Living Count</b> 2
<b>Total costs</b> \$1,504,365,698	Occ. Thera -	<b>Cost/Day</b> \$2,369	<b>Cadaveric Count</b> 87
<b>Net income</b> \$26,579,000	Speech Path -		<b>Total Cost</b> \$6,420,121
	EKG 10%	<b>Burn Care</b>	<b>Total Charges</b> \$8,308,989
<b>Patient revenue</b> \$8,841,690,588	Electroencephalography 21%	No data available	<b>Pancreas</b>
<b>Patient discounts</b> \$7,099,371,588	Medical Supplies 27%	<b>Surgical Care</b>	<b>Acquisition Cost</b> \$51,734
<b>Operating expenses</b> \$2,086,609,966	Implant 20%	No data available	<b>Acquisition Charge</b> \$30,451
<b>Percent of billed after discounts</b> 19.71%	Drugs 13%	<b>Nursery Care</b>	<b>Living Count</b> -
	Renal 19%	<b>Charges</b> \$37,863,788	<b>Cadaveric Count</b> 17
<b>Quality</b>	Home Dialysis -	<b>Costs</b> \$11,532,409	<b>Total Cost</b> \$879,478
<b>Total quality</b> 21.75	Ambulance 14448%	<b>Days</b> 8,138	<b>Total Charges</b> \$517,667
<b>Clinical</b> 35.00	DME Rent -	<b>Charge/Day</b> \$4,653	<b>Lung</b>
<b>Care coordination / experience</b> 32.00	DME Sold -	<b>Cost/Day</b> \$1,417	<b>Acquisition Cost</b> \$80,877
<b>Safety</b> 20.00			<b>Acquisition Charge</b> \$145,013
<b>Efficiency</b> -			<b>Living Count</b> -
			<b>Cadaveric Count</b> 34
			<b>Total Cost</b> \$2,749,814
			<b>Total Charges</b> \$4,930,447
			<b>Intestine</b>
			No data available

General Information	Cost to Charge Ratios	Cost centers	Transplant information
<b>Overview</b>	<b>Total (all departments)</b> 29%	<b>Routine Inpatient</b>	<b>Kidney</b>
	OR Room 31%	<b>Charges</b> \$72,627,216	No data available
	Recovery Room 9%	<b>Costs</b> \$71,875,389	<b>Heart</b>
	Delivery Room 75%	<b>Days</b> 61,219	No data available
	Anesthesiology -	<b>Charge/Day</b> \$1,186	<b>Liver</b>
	Radiol. Diag. 14%	<b>Cost/Day</b> \$1,174	No data available
<b>Type</b> Acute Care Hospitals	Radiol. Therap. -		<b>Pancreas</b>
<b>Billed to Medicare Ratios</b>	Radioisotope -	<b>Intensive Care</b>	No data available
Inpatient 2.78	CT Scan 4%	<b>Charges</b> \$24,376,986	<b>Lung</b>
Outpatient 5.72	MRI 7%	<b>Costs</b> \$17,864,911	No data available
<b>Data Source Dates</b>	Cardiac Cath -	<b>Days</b> 8,850	<b>Intestine</b>
Inpatient Sep 2019	Laboratory 10%	<b>Charge/Day</b> \$2,754	No data available
Outpatient Sep 2019	PBP Clinical Lab -	<b>Cost/Day</b> \$2,019	
Cost Report FY 2020	Blood/Packed Blood -	<b>Coronary Care</b>	
	Blood Store 21%	No data available	<b>Burn Care</b>
<b>Financials</b>	IV Therapy -	No data available	No data available
<b>Total charges</b> \$1,229,834,831	Resp. Thera 30%	<b>Surgical Care</b>	No data available
<b>Total costs</b> \$353,323,910	Phys. Thera 24%	No data available	<b>Nursery Care</b>
<b>Net income</b> \$51,982,553	Occ. Thera 29%		<b>Charges</b> \$10,137,507
	Speech Path -	<b>Burn Care</b>	<b>Costs</b> \$9,546,586
<b>Patient revenue</b> \$1,252,063,410	EKG 11%	No data available	<b>Days</b> 7,289
<b>Patient discounts</b> \$821,811,164	Electroencephalography 16%	<b>Surgical Care</b>	<b>Charge/Day</b> \$1,391
<b>Operating expenses</b> \$398,747,652	Medical Supplies 51%	No data available	<b>Cost/Day</b> \$1,310
<b>Percent of billed after discounts</b> 34.36%	Implant 61%	<b>Skilled Nursing</b>	No data available
	Drugs 34%	No data available	<b>Nursing Facility</b>
<b>Quality</b>	Renal 25%	No data available	No data available
<b>Total quality</b> 41.42	Home Dialysis -		
<b>Clinical</b> 75.00	Ambulance -		
<b>Care coordination / experience</b> 49.00	DME Rent -		
<b>Safety</b> 41.67	DME Sold -		
<b>Efficiency</b> -			

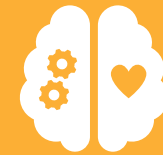
**HOW ARE YOU  
HELPING  
EMPLOYEES  
TODAY?**

# FOCUS ON

QUALITY



PROACTIVE



INCENTIVES



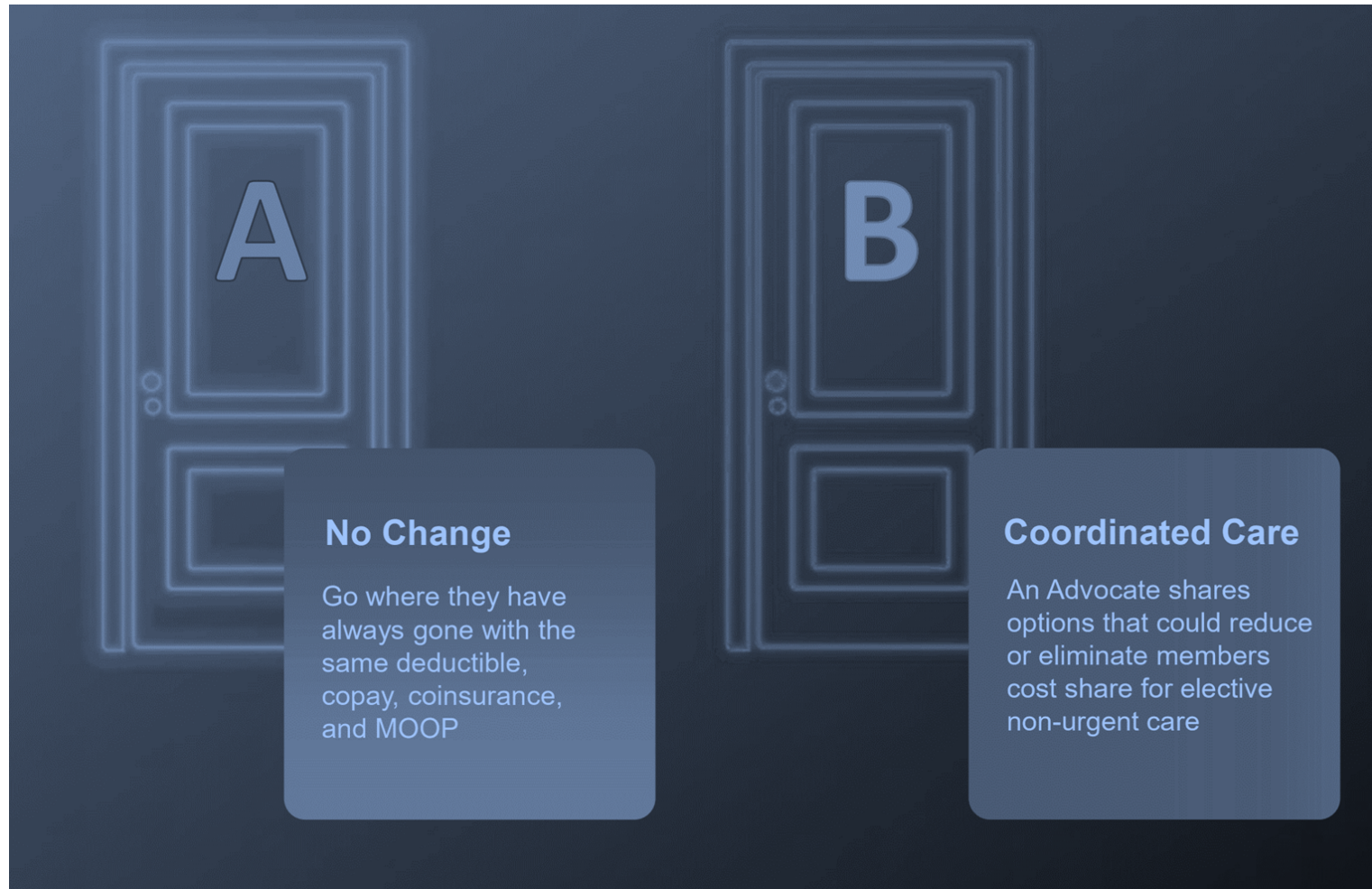
ADVOCACY



# WHY IT WORKS

	Florida Facility 1	Florida Facility 2
Knee Replacement	\$35,000	\$15,000
Spinal Fusion	\$25,000	\$10,000
Colonoscopy	\$2,500	\$1,500
MRI/CT	\$3,000	\$600

# HOW IT WORKS



# EVERYONE WINS

Type of Service	Tier 1 - Navigation	Tier 2-PPO (In-Network)	Tier-3 (Out-of-Network)
Annual Deductible (Individual / Family)	\$0 / \$0	\$5,000 / \$10,000	\$10,000 / \$20,000
Annual Out-of-Pocket <b>Max</b> (Individual / Family)	\$0 / \$0	\$5,000 / \$10,000	No Limit / No Limit
Primary Care / Specialty Care / Urgent Care	Not Applicable	\$20 / \$50 / \$70	Deductible then 50%
Emergency Room	Not Applicable	Deductible then 20%	Deductible then 50%
Inpatient - Hospital & Facility Annual OOP Max	\$0 Copay	Deductible then 20%	Deductible then 50%
Outpatient Facility / Ambulatory Surgery	\$0 Copay	Deductible then 20%	Deductible then 50%
Scans - CT / MRI / MRA / Pet Scan	\$0 Copay	Deductible then 20%	Deductible then 50%
Dialysis / Home Health / PT / DME / Oncology / Infusion	\$0 Copay	Deductible then 20%	Deductible then 50%
Lab & Radiology Services	Not Applicable	Deductible then 20%	Deductible then 50%
Pharmacy Benefits		\$0/\$15/\$40/\$70/20% to \$250	

A collection of various pills and capsules scattered on a surface with US dollar bills, symbolizing the cost of medication. The pills are in various colors (pink, white, yellow, red) and shapes (round, oval, capsule). The dollar bills are partially visible, showing the portrait of George Washington and the number '100'.

**START  
WITH RX**

# WHAT HAPPENS TODAY





# WHAT HAPPENS TODAY

Drug Name	Drug Type	Bio Found	Claim Count	Avg Claim Amt	PBM Avg Claim Amt	Total Claim Amt	PBM Total Claim Amt	PBM Savings	Best Total Claim Amt	PBM Best Savings
Atorvastatin Calcium	G		7,419	\$34.47	\$3.05	\$255,761.46	\$22,600.07	\$233,161.39	\$22,600.07	\$233,161.39
Rosuvastatin Calcium	G		2,281	\$73.27	\$3.47	\$167,133.58	\$7,924.03	\$159,209.55	\$7,924.03	\$159,209.55
Simvastatin	G		3,110	\$20.16	\$1.95	\$62,702.24	\$6,073.81	\$56,628.43	\$6,073.81	\$56,628.43
valACYclovir HCl	G		289	\$106.58	\$13.75	\$30,801.58	\$3,973.38	\$26,828.20	\$3,973.38	\$26,828.20
Pravastatin Sodium	G		2,161	\$15.83	\$4.01	\$34,217.27	\$8,662.55	\$25,554.72	\$8,662.55	\$25,554.72
Methylphenidate HCl ER	G		137	\$218.74	\$68.66	\$29,967.33	\$9,406.62	\$20,560.71	\$9,406.62	\$20,560.71
Shingrix	B		622	\$176.28	\$144.48	\$109,647.94	\$89,865.35	\$19,782.59	\$89,865.35	\$19,782.59
Montelukast Sodium	G		393	\$42.69	\$3.25	\$16,775.88	\$1,278.20	\$15,497.68	\$1,278.20	\$15,497.68
Oseltamivir Phosphate	G		203	\$112.49	\$37.03	\$22,834.99	\$7,516.74	\$15,318.25	\$7,516.74	\$15,318.25
Trulicity	B		86	\$925.81	\$755.64	\$79,619.70	\$64,984.88	\$14,634.82	\$64,984.88	\$14,634.82
Amphetamine-Dextroamphetamine ER	G		172	\$122.56	\$41.97	\$21,080.78	\$7,218.63	\$13,862.15	\$7,218.63	\$13,862.15
DULoxetine HCl	G		219	\$68.43	\$7.72	\$14,985.22	\$1,691.73	\$13,293.49	\$1,691.73	\$13,293.49
Escitalopram Oxalate	G		428	\$32.99	\$3.11	\$14,121.24	\$1,330.48	\$12,790.76	\$1,330.48	\$12,790.76
Etonogestrel-Ethinyl Estradiol	G		112	\$150.16	\$36.06	\$16,817.61	\$4,038.91	\$12,778.70	\$4,038.91	\$12,778.70
Estradiol	G		232	\$82.02	\$28.08	\$19,029.63	\$6,513.83	\$12,515.80	\$6,513.83	\$12,515.80
Drospirenone-Ethinyl Estradiol	G		418	\$42.38	\$12.48	\$17,716.25	\$5,217.03	\$12,499.22	\$5,217.03	\$12,499.22
Doxycycline Hyclate	G		199	\$70.09	\$9.72	\$13,948.44	\$1,933.57	\$12,014.87	\$1,933.57	\$12,014.87
Omeprazole	G		549	\$23.69	\$2.58	\$13,007.47	\$1,415.56	\$11,591.91	\$1,415.56	\$11,591.91
Amoxicillin-Pot Clavulanate	G		391	\$37.00	\$8.65	\$14,467.69	\$3,380.77	\$11,086.92	\$3,380.77	\$11,086.92
Clobetasol Propionate	G		82	\$173.16	\$38.27	\$14,198.99	\$3,138.37	\$11,060.62	\$3,138.37	\$11,060.62
Pantoprazole Sodium	G		429	\$27.84	\$3.03	\$11,942.28	\$1,299.79	\$10,642.49	\$1,299.79	\$10,642.49
Sertraline HCl	G		464	\$25.50	\$2.81	\$11,830.42	\$1,303.59	\$10,526.83	\$1,303.59	\$10,526.83
Ondansetron	G		136	\$81.40	\$6.18	\$11,070.70	\$840.83	\$10,229.87	\$840.83	\$10,229.87
Mesalamine	G		32	\$500.87	\$187.70	\$16,027.90	\$6,006.34	\$10,021.56	\$6,006.34	\$10,021.56
Wixela Inhub	G	*	68	\$257.88	\$109.52	\$17,536.01	\$7,523.91	\$10,012.10	\$7,447.32	\$10,088.69
Lo Loestrin Fe	B		312	\$172.94	\$141.88	\$53,955.81	\$44,267.75	\$9,688.06	\$44,267.75	\$9,688.06
Losartan Potassium	G		610	\$19.81	\$4.10	\$12,083.95	\$2,499.70	\$9,584.25	\$2,499.70	\$9,584.25
Jardiance	B		83	\$611.84	\$500.13	\$50,782.50	\$41,510.85	\$9,271.65	\$41,510.85	\$9,271.65
Tri-Lo-Sprintec	G		264	\$40.63	\$6.72	\$10,726.18	\$1,775.18	\$8,951.00	\$1,775.18	\$8,951.00
Latuda	B		37	\$1,475.92	\$1,234.14	\$54,609.13	\$45,663.00	\$8,946.13	\$45,663.00	\$8,946.13
Venlafaxine HCl ER	G		236	\$44.36	\$8.46	\$10,468.93	\$1,995.64	\$8,473.29	\$1,995.64	\$8,473.29
amLODIPine Besylate	G		616	\$15.02	\$1.49	\$9,251.65	\$916.42	\$8,335.23	\$916.42	\$8,335.23
buPROPion HCl ER (XL)	G		318	\$34.17	\$8.98	\$10,864.70	\$2,855.34	\$8,009.36	\$2,855.34	\$8,009.36
Gabapentin	G		322	\$31.74	\$7.05	\$10,221.78	\$2,269.62	\$7,952.16	\$2,269.62	\$7,952.16

# FOCUS ON SPECIALTY

## Manufacturer Assistance Program (MAP)



To find out more, call your Celgene Patient Support® Specialist at 1-800-931-8691, Monday – Friday, 8 AM – 8 PM ET (translation services available).

REVLIMID is only available through a restricted distribution program. Please see accompanying full Prescribing Information, including Boxed WARNINGS.



## International Pharmacy Program (IPP)



In the United States, name brand medications are typically  
**2-10 times**  
more expensive than in other countries.

# FOCUS ON SPECIALTY

Med Name	Spend	MAP	IPP
XYREM	\$207,328	Yes	
STELARA	\$169,434	Yes	Yes
OZEMPIC	\$159,172		Yes
CIMZIA	\$149,390	Yes	Yes
ENBREL	\$147,241	Yes	Yes
TALTZ	\$109,647		Yes
XOLAIR	\$102,938		Yes
OTEZLA	\$94,536	Yes	Yes
TRULICITY	\$92,842		Yes
JARDIANCE	\$83,347		Yes
TREMFYA	\$82,230	Yes	Yes
RINVOQ	\$69,659		Yes
RYBELSUS	\$64,801		Yes
ELIQUIS	\$58,358		Yes
UBRELVY	\$52,508		Yes
DUPIXENT	\$39,803	Yes	Yes
DOVATO	\$37,914	Yes	Yes
HUMIRA	\$36,551		Yes
<b>Total</b>	<b>\$1,757,699</b>	<b>\$927,876</b>	<b>\$1,550,371</b>

# DON'T CHASE REBATES

A photograph of a CVS pharmacy building. The sign features the word "CVS" in large, bold, maroon letters with a black outline, and the word "pharmacy" in smaller, bold, maroon letters below it. To the right of the "CVS" sign, the number "17831781974" is handwritten in red marker. In the background, a parking lot with several cars is visible under a clear blue sky.

CVS  
pharmacy  
17831781974

*CVS Caremark, one of the so-called Big 3 pharmacy benefit managers, is accused of engaging in pay-to-play tactics with pharmaceutical managers. (Associated Press/Marcio Jose Sanchez)*




A chalkboard with a wooden frame is the central focus, resting on a wooden surface. The text "TAKE ACTION NOW!" is written in white chalk, with "NOW!" being significantly larger and bolder than the other words. To the left of the chalkboard, a white coffee cup is partially visible, along with a few sugar cubes and a wooden spoon. A piece of white chalk lies on the bottom edge of the chalkboard.

**TAKE ACTION  
NOW!**

**CHANGE  
STARTS  
WITH  
YOU**

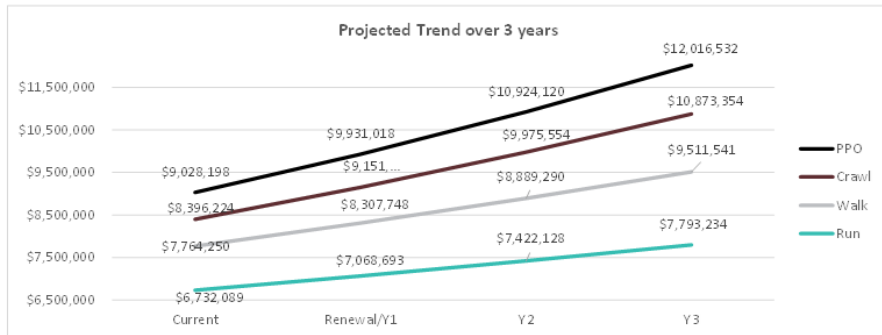
## PROJECTED IMPACT

Cost Analysis Prepared 11/13/2023  
 Group Name:  
 Claims Evaluated: Paid Medical and Rx Claims from 01/2023 through 09/2023

Total Billed Claims:			
\$16,385,620	\$16,385,620	\$16,385,620	
Total PPO Covered Claims:	\$9,028,198	\$9,028,198	\$9,028,198
Impact of +thb:	\$8,396,224	\$7,764,250	\$6,732,089

The graph below is designed to illustrate the accumulated impact over a 4 year period created by the difference in annual price increases, or “trend”, between commercial PPO’s and Transparent Health Benefits (+thb). For this illustration, we have assumed a 10% year over year increase for the traditional PPO plan cost. Since +thb uses several transparent reimbursement models, we have applied a 5% year over year increase due to the fact that totals are meant to be illustrative and are not meant to represent actuarial values. Medicare reimbursements have trended at 1.3% over the last 6 years.

Projected plan costs and accumulated saving:



This equates to an estimated

**\$12,883,722**

in savings over 4 years  
for the Run Scenario.

For illustrative purposes only. This analysis is not intended to be a binding proposal. Actual results may vary and are subject to insurance company, stoploss and underwriting.

Estimated trend is based on a blended CDHP trend\* for PPO, Crawl and Walk scenarios and adjusted based on the penetration of Transparent Health Benefit usage, Run trend based on full +thb\*\*. For illustration purposes; PPO trend is 10% , Crawl trend has been lowered to 9% and Walk has been adjusted to 7% with full +thb trend at 5%

\*CDHP trend at 8.6%, pharmacy trend at 13.9% and specialty pharmacy trend in excess of 20%  
 (Source: USI Insurance 2017 Spring Healthcare Claim Trend Survey) Illustration above uses a blended 10% trend.

\*\* Medicare trend from 2010 to 2016 was 1.3% (Source: Kaiser Family Foundation)

# RAISE YOUR HAND

## Call to Action:

- Quality Metrics
- Rx Review
- Impact Analysis

LE GACY

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## *When Will the Price Be Right?*



**Karen van Caulil, Ph.D.**  
**(Moderator)**  
*President & CEO*  
Florida Alliance for  
Healthcare Value

**Mike Adams**  
*Head of Benefits*  
7-Eleven



**Yvette M. Best, EdD, CCP,  
SPHR, SHRM-SCP**  
*Head of Human  
Resources*  
Orange County  
Government, Florida

**Christin Deacon, J.D.**  
*Principal Owner*  
VerSan Consulting



**Lester Morales**  
*Founder & CEO*  
Next Impact, LLC



Take Action

# Fees and Add-on Charges Hidden in Your Claims

- In light of the recent lawsuit, Department of Labor (DOL) vs. BCBS Minnesota (BCBSM), we are requesting clarification regarding the manner in which certain claims may be being billed to plan.
- Specifically, we would like to confirm whether any Florida Medicaid taxes or other provider taxes are being added to claims by [insert name of TPA], which may be permitted in your existing provider contracts that may include provisions for adding Florida Medicaid provider taxes to the claims.
- Please confirm whether such taxes are being added to claims and if so, confirm whether provider contracts form the basis upon which these taxes are being added to claims. Please provide a detailed description of the calculation methodologies used for integrating these taxes into our claims. This information is essential for ensuring our compliance with regulatory standards and maintaining fiscal transparency.

## Hidden and Potentially Egregious Recovery Services or OON Vendor Fees

- Are we currently engaging any recovery services vendors? If so, could you provide the organization(s)' names and any information that may be helpful in understanding their processes?
- What is the current fee structure for the “savings” realized through these services? Is it a percentage-based, flat rate, or a hybrid model? If percentage based, what is the current percentage?
- In instances where a third-party vendor is involved, how is the savings fee distributed between [TPA], our plan and the vendor? What percentage of the fee is retained by [insert name of TPA]?
- Could you provide a comprehensive analysis of the savings generated through these vendors over the past fiscal year?
  - For example, what methodology and criteria are used to calculate these savings?
  - What benchmarks or performance indicators are utilized to assess vendor effectiveness?
  - Is vendor and/or [TPA] able to receive savings fees that are in excess of the ultimate negotiated rate paid to the provider? If so, please provide a complete list of all instances where this has occurred over the last 18 months.

# What am I paying for this list of drugs?

<u>Generic Drug Name</u>	<u>Quantity</u>	<u>Pharmacy Acquisition Cost</u>	<u>Price J&amp;J Agreed To Pay</u>	<u>Markup %</u>
abacavir	180	\$111.60	\$322.36	188.85%
abacavir-lamivudine	90	\$180.90	\$1,629.40	800.72%
abiraterone acetate	90	\$82.80	\$5,375.26	6,391.86%
atazanavir sulfate	90	\$313.20	\$613.10	95.56%
azathioprine	90	\$16.20	\$27.42	69.26%
capecitabine	90	\$47.70	\$2,099.91	4,302.33%
cyclosporine	90	\$774.90	\$732.39	-5.49%
dalfampridine	90	\$45.90	\$2,197.71	4,688.04%
deferasirox	90	\$177.30	\$8,199.75	4,524.79%
dimethyl fumarate DR capsule	180	\$120.60	\$16,070.94	13,225.82%
droxidopa	90	\$230.40	\$5,340.66	2,217.99%
efavirenz	90	\$277.20	\$2,016.99	627.63%
efavirenz-emtricitabine-tenofovir disoproxil fumarate	90	\$115.20	\$7,097.43	6,060.96%
emtricitabine-tenofovir	90	\$49.50	\$1,260.12	2,445.70%
enoxaparin sodium	1	\$13.72	\$18.71	36.37%
etravirine	180	\$2,889.00	\$2,172.29	-24.81%
everolimus	90	\$545.40	\$1,351.43	147.79%
fingolimod	90	\$876.60	\$13,325.83	1395.60%
fondaparinux sodium	72	\$3,854.88	\$8,796.92	128.20%
glatiramer	36	\$4,738.68	\$13,778.52	190.77%
ibandronate	3	\$11.34	\$32.56	187.13%
imatinib mesylate	90	\$160.20	\$16,398.17	10,136.06%
lamivudine	90	\$76.50	\$114.80	50.07%
lamivudine-zidovudine	90	\$72.00	\$223.52	210.44%
mycophenolate mofetil tablet	90	\$25.20	\$18.00	-28.57%
mycophenolate sodium tablet	90	\$16.20	\$145.06	795.43%
nevirapine	90	\$12.60	\$8.50	-32.54%
nevirapine XR tablet	90	\$386.10	\$530.63	37.44%
octreotide acetate	15	\$138	\$178.21	29.14%
ribavirin tablet	90	\$61.20	\$78.57	28.38%
ritonavir tablet	90	\$89.10	\$465.62	422.59%
sildenafil citrate	18	\$3.78	\$20.96	454.50%
sirolimus	90	\$209.70	\$704.56	235.98%
sofosbuvir/velpatasvir	28	\$7,793.52	\$8,160.00	4.70%
tacrolimus	90	\$13.50	\$17.77	31.63%
tadalafil tablet	18	\$2.88	\$64.11	2,126.04%
temozolomide	90	\$1,242.00	\$15,332.32	1,134.49%