## International Price Variations: What the Data Shows National Summit on Health Care Price, Cost and Quality Transparency

**December 4, 2013** 

**George C. Halvorson** Chairman

Kaiser Permanente

**Tom Sackville**Chief Executive
International Federation of Health Plans



# Our prices are the highest in the world for almost all pieces of care.



1) Piecework
 payment incents
 volume – not quality.



2) Piecework payment cripples and penalizes process improvement.



3) Piecework
 payment encourages
 and enables fraud.



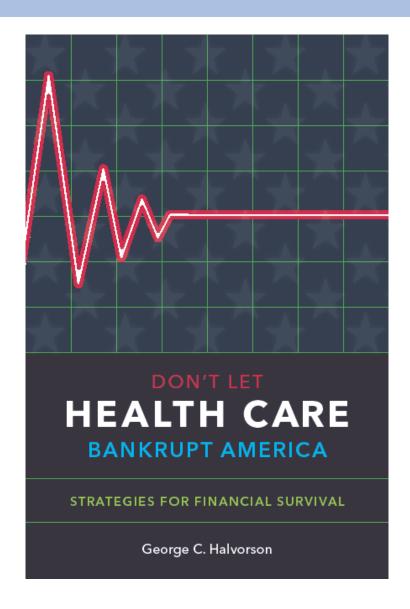
4) Piecework
 payment rewards
 bad care outcomes.



5) Piecework
 payment rewards
 care screw-ups.



- -- and obviously --
- •6) Piecework payment enables price inflation.





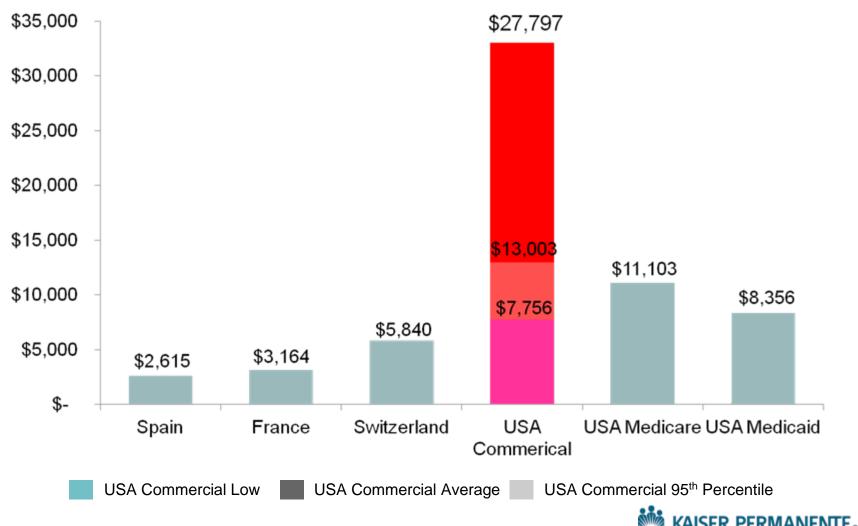
#### **Cost Book Chapter Titles**

- Ch. 1: The Mess We Are In
- Ch. 2: The Optimal Care System Should Be the Goal of the Business Model We Use To Buy Care
- Ch. 3: Prices Are Higher Here
- Ch. 4: Care Delivery Is a Business
- Ch. 5: Someone Needs To Be Accountable for Implementing the New Business Model for Care or It Will Not Happen
- Ch. 6: Using Private Health Plans To Cover Everyone Will Not Work If We Can't Make Coverage Affordable
- Ch. 7: We Can't Allow Government-Funded Health Care To Cripple Our Economy
- Ch. 8: We Need To Make Medicaid Better, Smarter, and More Affordable As Well
- Ch. 9: Let's Cut Costs By Improving Health



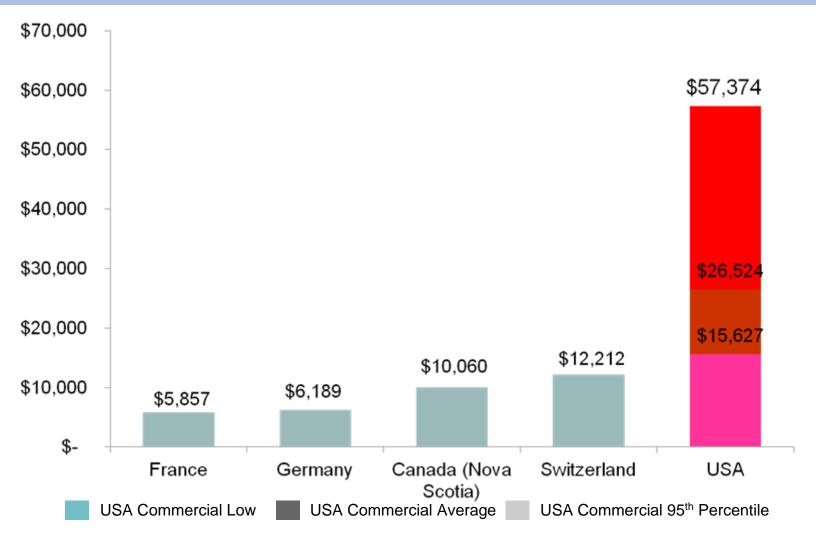
#### **Total Facility and Physician Costs Appendectomy (\$US)**





### Total Facility and Physician Costs Angioplasty (\$US)

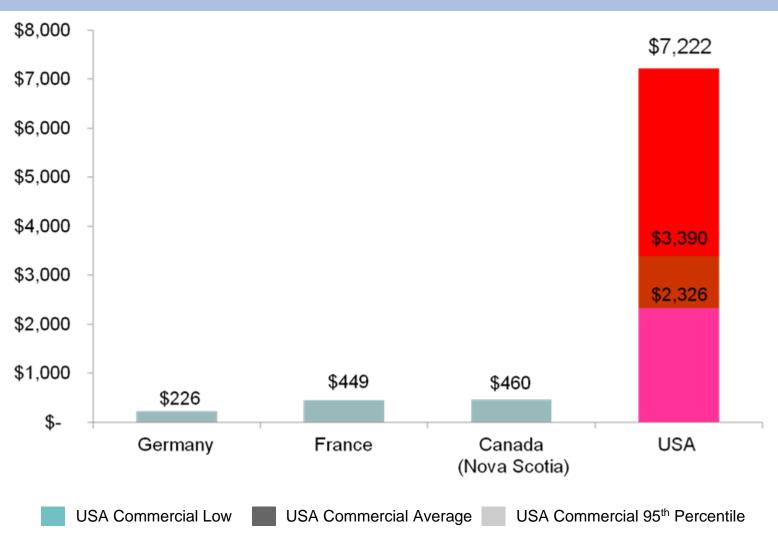






#### Physician Fees Normal Delivery (\$US)

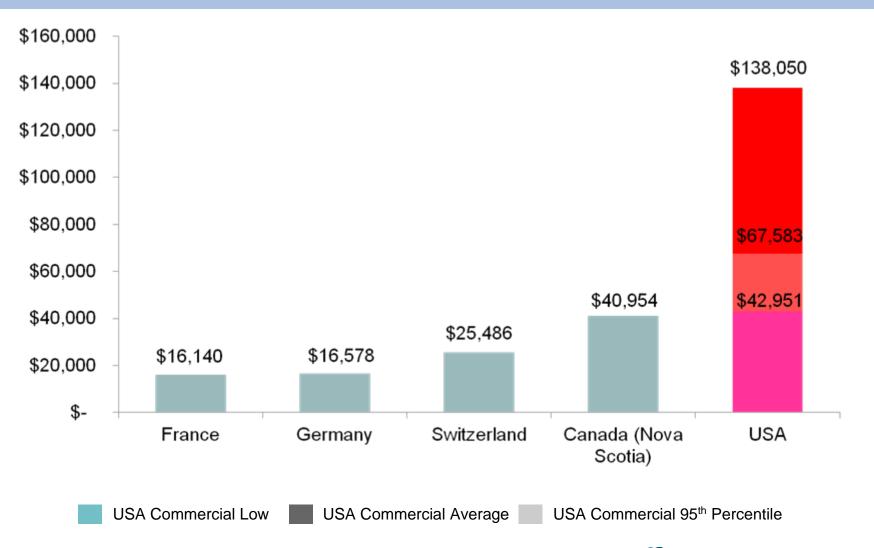






#### Total Hospital and Physician Costs Coronary Artery Bypass (\$US)

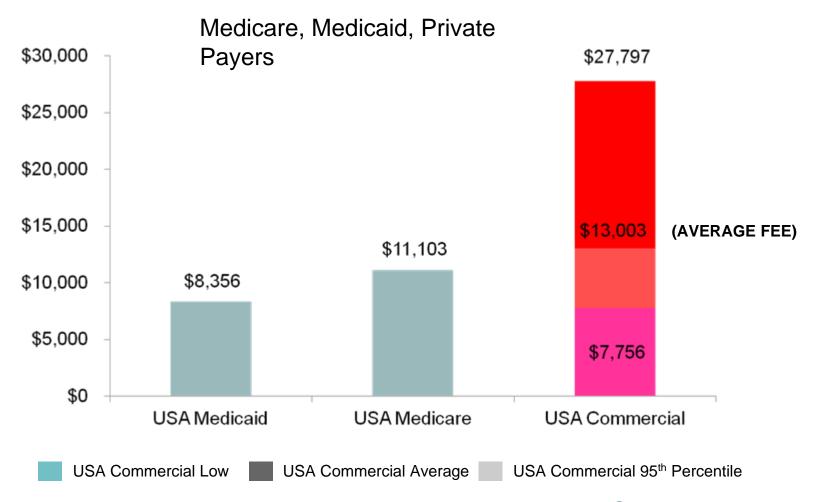






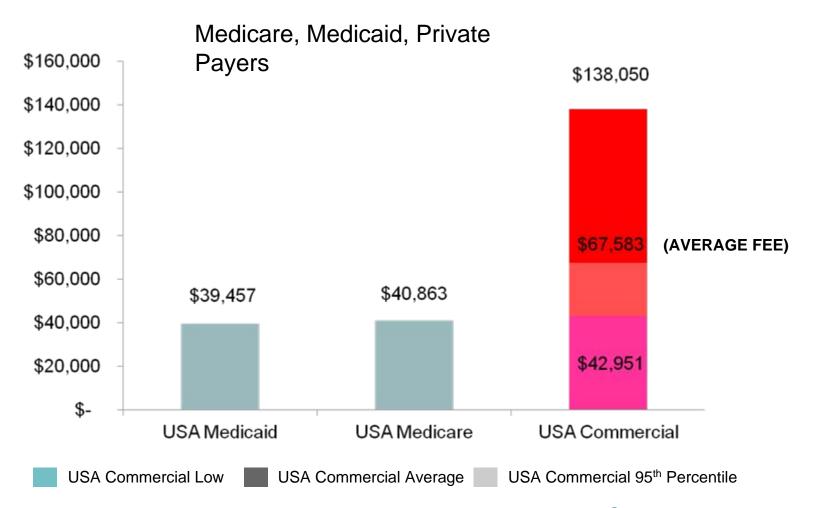
### Total Facility and Physician Costs Appendectomy (\$US)





#### Total Hospital and Physician Costs Coronary Artery Bypass (\$US)

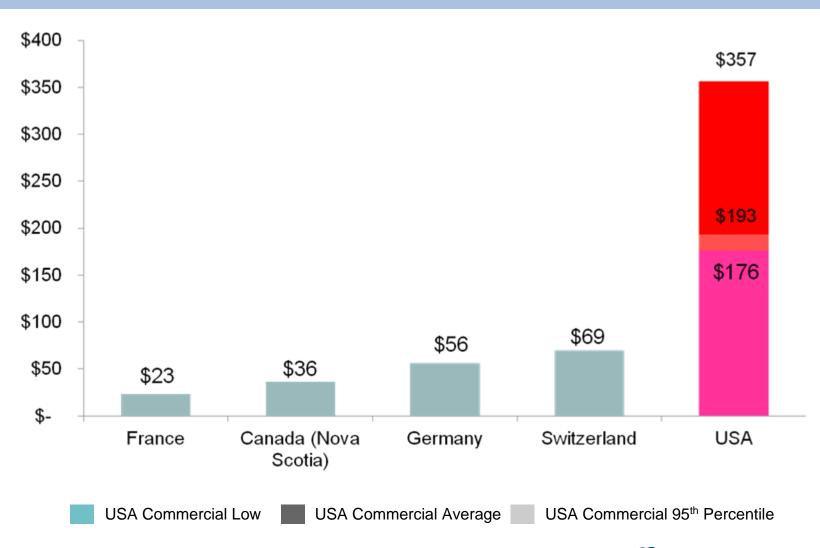






#### **Drug Prices Nexium (\$US)**

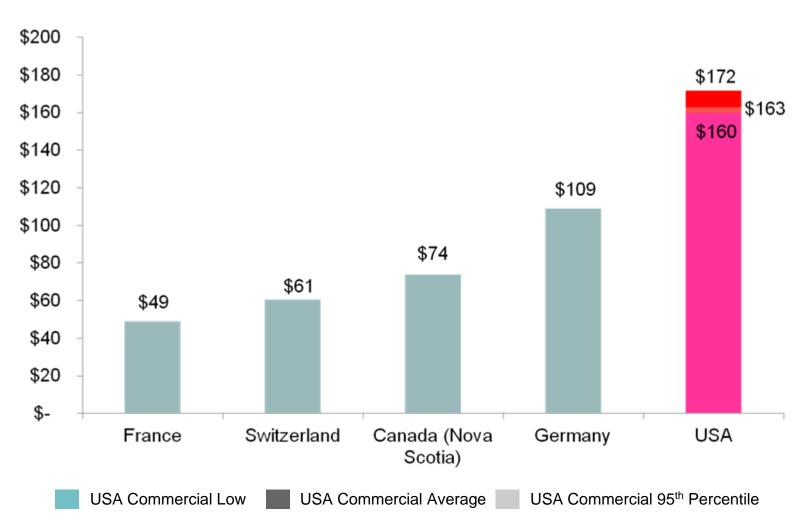






#### **Drug Prices Plavix (\$US)**

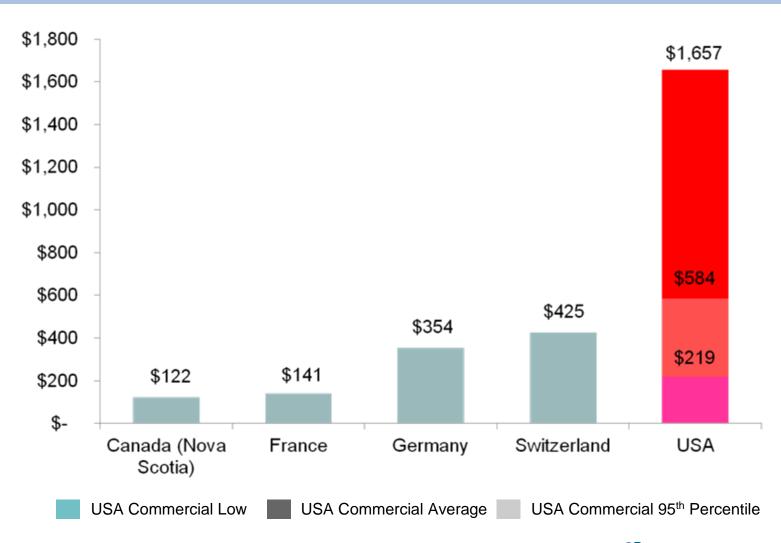






#### Scanning and Imaging Fees CT Scan: Abdomen (\$US)

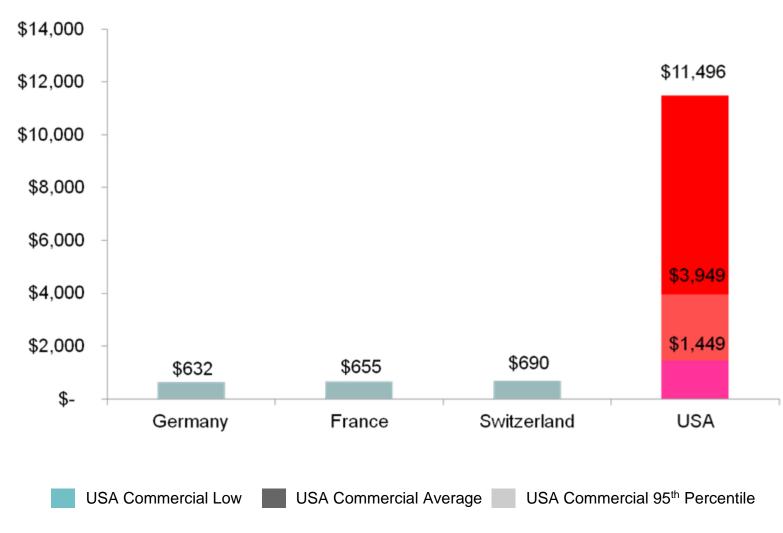






#### Total Hospital Charges Cost Per Hospital Day (\$US)

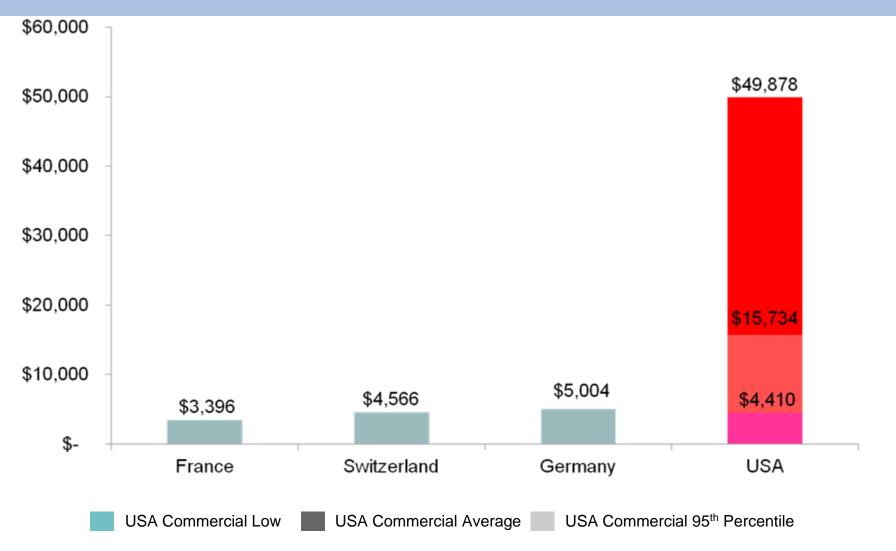






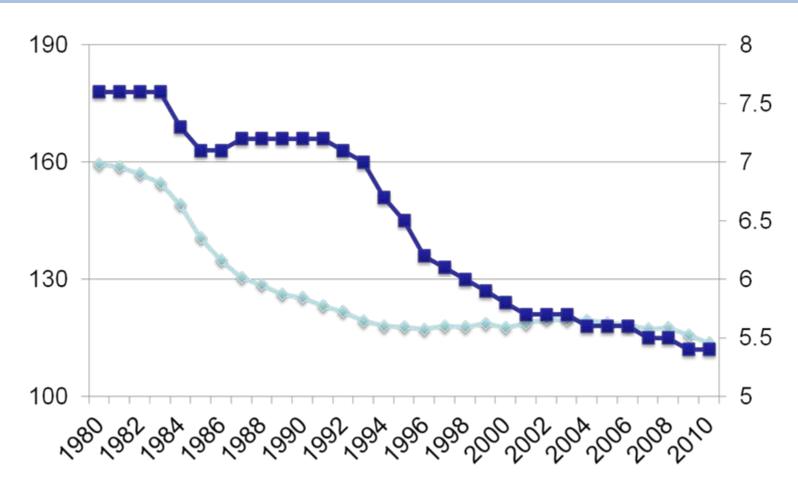
#### Hospital Charges Cost Per Hospital Stay (\$US)







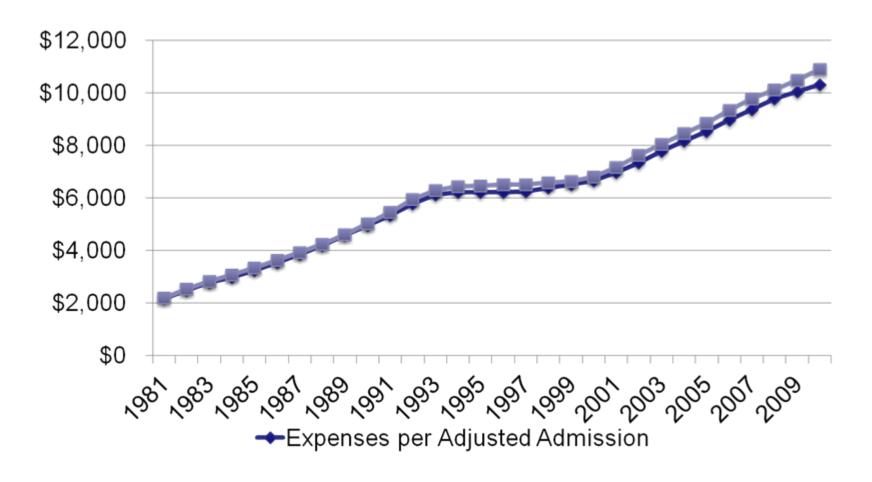
#### Inpatient Utilization (American Hospitals)



→Inpatient Admissions per 1,000

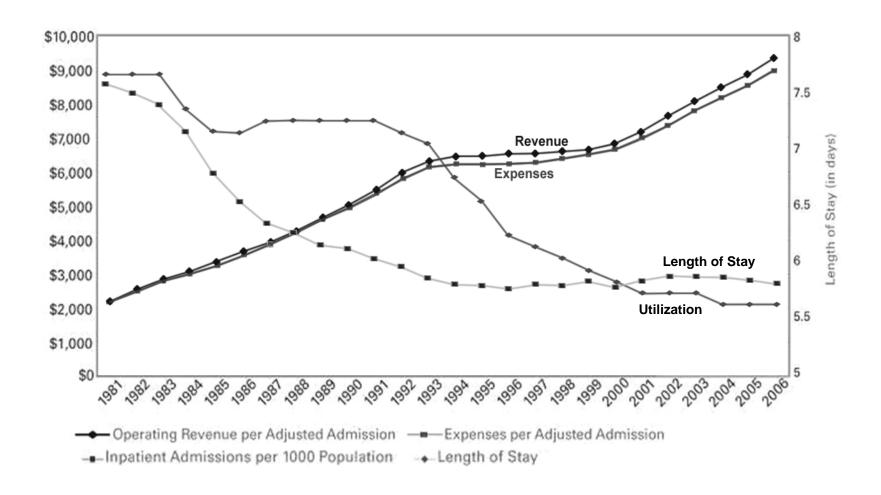


#### Hospital Revenue and Expenses per Admission (American Hospitals)



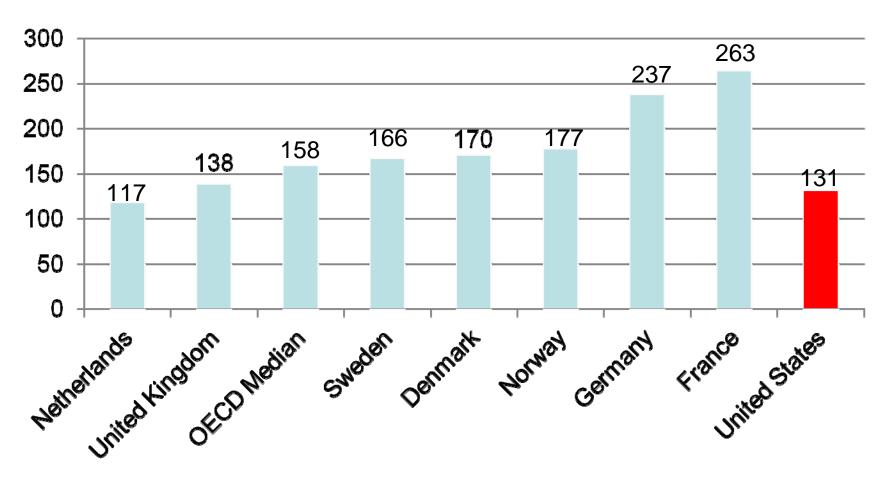


#### **United States Utilization Drops and Price Increases**





#### Utilization of Hospitals OECD Countries Hospital Discharges All Causes, Per 1000 Population, 2009



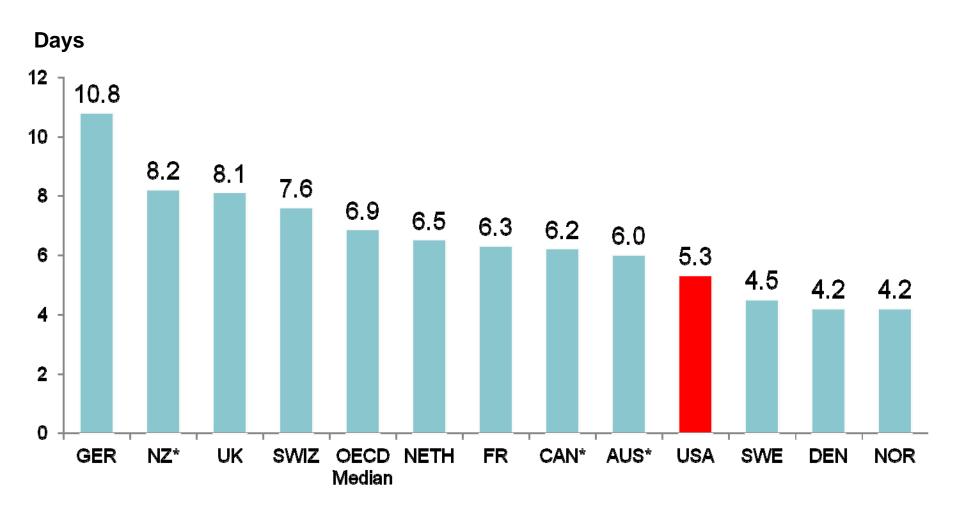
N: OECD 2008 numbers for Canada, United States, New Zealand, Australia.



<sup>1.</sup>Excludes discharges of healthy babies born in hospital (between 3-6% of all discharges).

<sup>2.</sup>Includes same-day separations.

#### **Average Length of Hospital Stay for Acute Myocardial Infarction, 2009**

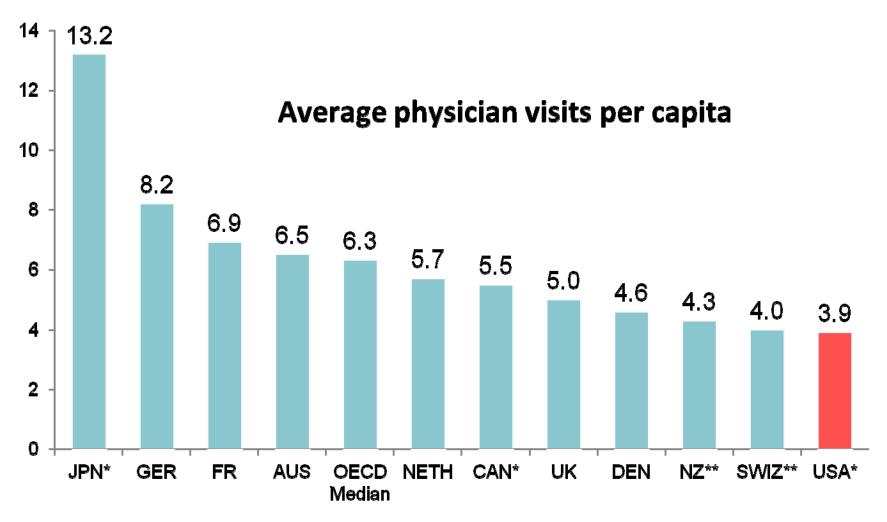




\* 2008.

Source: OECD Health Data 2011 (June 2011).

#### **Average Annual Number of Physician Visits per Capita, 2009**

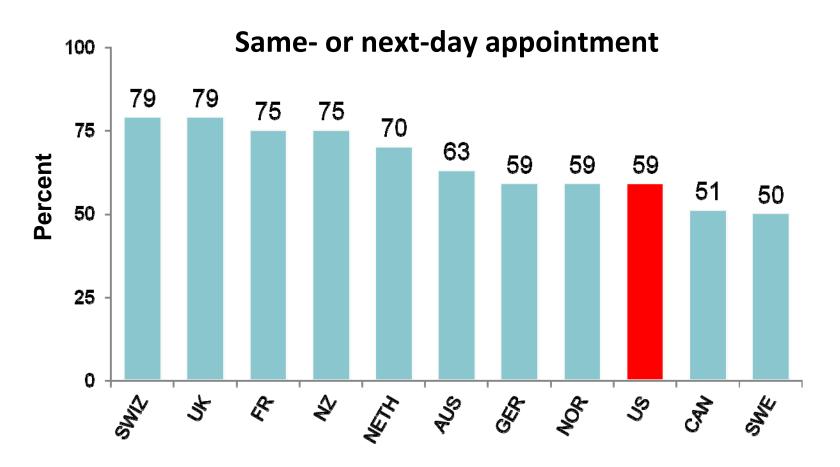


\* 2008.

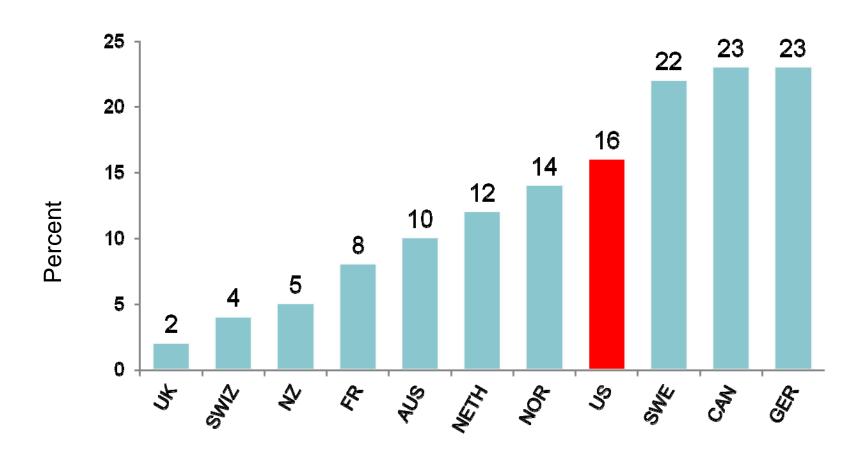
\*\* 2007.

MAISER PERMANENTE.

#### Access to Doctor or Nurse Last Time Sick or Needed Care

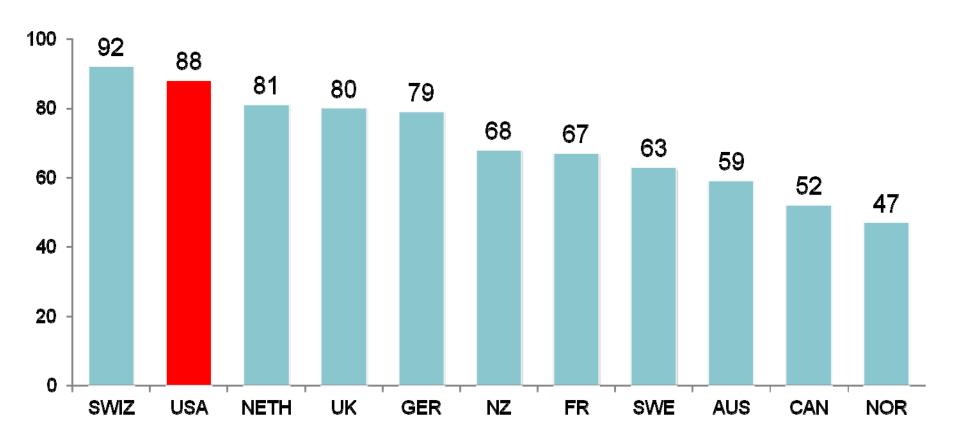


#### Waited six days or more for a doctor visit



#### Waited Less Than a Month to See Specialist

Percent

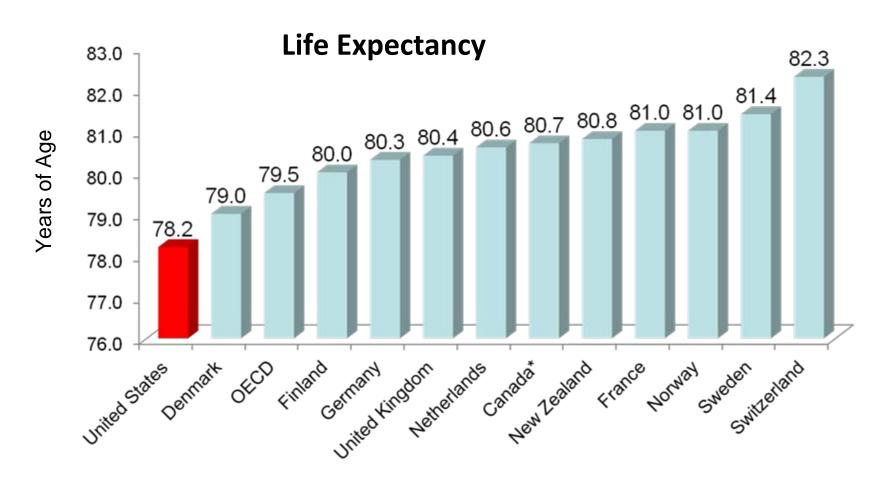




Base: Saw or needed to see a specialist in the past two years.

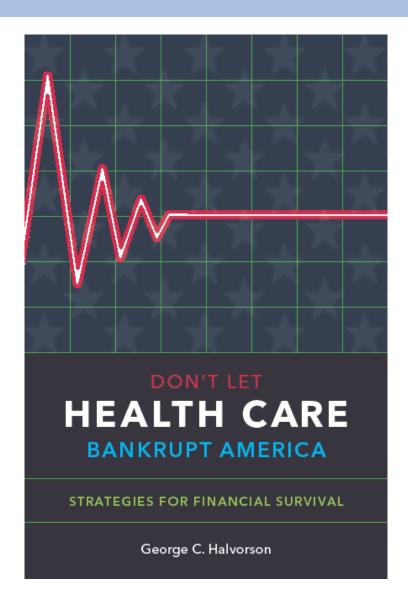
Source: 2011 Commonwealth Fund International Health Policy Survey of Sicker Adults in Eleven Countries.

#### Life Expectancy at Birth, 2009











## We pay more than any country for each piece of health care.



If we paid Canadian prices for each piece of care, and if we delivered every piece of care we deliver today – every surgery, prescription, test, and hospital admission – and if we paid Canadian prices for each piece of care, we would cut insurance premiums by nearly 40 percent, and we would spend roughly 12 percent of our GDP on care instead of 18 percent.



## Prices are the primary difference between us

and them.

# We pay more than any country for each piece of health care.



## Be well.



International Federation of Health Plans

# The leading global network of the health insurance industry

Tom Sackville

#### International Federation of Health Plans

The International Federation of Health Plans was founded in 1968 by a small group of health plan industry leaders. It is now the leading global network in the industry, with more than one hundred member companies from twenty-five countries.

Federation member plans meet regularly to share information about health care financing and health care delivery in their home countries.





#### **List of Federation Member Plans**

Argentina

Omint Sa De Servicios

Australia

Australian Health Service Alliance

Australian Health Insurance Association Limited

Australian Unity Health Limited

**BUPA Australia Limited** 

**GMHBA** Limited

HBF Health Funds Inc

Hospitals Contribution Fund of Australia, Limited

Health-Partners

Medibank Private

Navy Health Limited

NIB Health Funds Limited

Police Health

RT Health Fund

Teachers' Federation Health Limited

Teachers' Union Health

Belgium

Medicover

Nationaal Verbond van Socialistiche Mutualiteiten Union Nationale des Mutualities Libres (MLOZ)

Canada

Alberta Blue Cross Plan

Canassurance Hospital Service Association

**Group Medical Services** 

Manitoba Blue Cross

Medavie Blue Cross

Pacific Blue Cross

Saskatchewan Blue Cross

Chile

Banmedica

China

**BUPA China Representative Office** 

Denmark

Danmark Sygeforsikring

Danica Pension Forretningsudvikling

Forenede Gruppeliv A/S

**Dominican Republic** 

Ars Humano

France

Malakoff Mederic

Germany

AXA Krankenversicherung AG

Munich Health

Greece

Interamerican Life Insurance Company

Hong Kong

AXA General Insurance Hong Kong Limited

BUPA (Asia) Limited

MAX BUPA Health Insurance Limited

Ireland

VHI Healthcare Limited

Italy

Unisalute

Mexico

AXA Seguros SA de CV

Netherlands

Achmea Health

New Zealand

Health Funds Association of New Zealand

Southern Cross Healthcare

Union Medical Benefits Society, Limited

Total Health Trust Limited

Poland

Signal Iduna Polska Tusa

Saudi Arabia

**BUPA Middle East** 

South Africa

Board of Healthcare Funders of Southern Africa

Bonitas Medical Fund

Chartered Accountants (SA) Medical Aid Fund

Discovery Health Medical Scheme

La-Health Medical Scheme

Medihelp

Medscheme Holdings

Metropolitan Health Group

Polmed

Transmed

Spain

Compañia de Seguros Adeslas SA

Sanitas SA

Switzerland

Helsana Versicherungen AG Sanitas Krankenversicherung

BUPA Health Insurance (Thailand) Limited

United Kingdom

Aria Assistance Group

AXA PPP Healthcare

**BUPA** 

InterGlobal Insurance Company

Simplyhealth Group

Western Provident Association Limited

Westfield Contributory Health Scheme

USA

Aetna Inc

America's Health Insurance Plans

Blue Cross & Blue Shield Association

Emblem Foundation Health Plan

Kaiser Foundation Health Plan Inc

**RW2** Enterprise

The Trizetto Group

Tufts Health Plan

UnitedHealth Group

Association of the Healthcare Funders of Zimbabwe

Cimas Medical Aid Society

The Medical Aid Society of Central Africa

Premier Service Medical Aid Society





## Payment Delays by Public Hospitals to the Medical Technology Sector (as of October 2013)

	GREECE (as of 30/09/2013)	ITALY (as of 31/08/2013)	PORTUGAL (as of 30/09/2013)	SPAIN (as of 31/08/2013)		
Total Public Health Debt *	1.8-2.1 bn €	36 bn €	2,3 bn € (est.)	Not available		
Amount of public debts to Medical Technology Suppliers (incl. VAT)						
Debts until end of 2011 in €	120 mio €	5.4 bn €	390 mio €	15 mio €		
Debts in 2013 in € (including debts in 2012)	800 mio €	4.5 bn €	841 mio €	2.48 bn €		
Payment delays of public hospitals to Medical Technology Suppliers (in DSO **)						
Average payment delay	410	256	456	323		
Region with shortest delay	Not applicable	Valle D'Aosta: 73	Entre Douro e Vouga: 54	Navarra: 67		
Region with longest delay	Not applicable	Calabria: 970	Madeira: 1740	Valencia: 604		

<sup>\*</sup> incl. debts for e.g. MedTech, pharmaceuticals, food, energy supplies

<sup>\*\*</sup> DSO - Days of sales outstanding

Overall rank [4]	Country	Overall life expectancy	Male life expectancy	Female life expectancy
1	<u>Japan</u>	83	79	86
1	Switzerland	83	80	85
1	San Marino	83	82	83
4	Italy	82	80	85
4	Singapore	82	80	85
4	Iceland	82	81	84
4	Andorra	82	79	85
4	Australia	82	80	84
4	Spain	82	79	85
4	Qatar	82	83	81
4	Israel	82	80	84
4	Monaco	82	79	85
4	<u>France</u>	82	78	85
4	Sweden	82	80	84
4	<u>Canada</u>	82	80	84
4	Luxembourg	82	79	84
17	Cyprus	81	79	84
17	Norway	81	79	83
17	New Zealand	81	79	83
17	<u>Netherlands</u>	81	79	83
17	<u>Austria</u>	81	78	84
17	Greece	81	78	84
17	Ireland	81	79	83
17	South Korea	81	77	84
17	<u>Finland</u>	81	78	84
17	Germany	81	78	83
27	United Kingdom	80	79	82
27	<u>Belgium</u>	80	78	83
27	<u>Malta</u>	80	79	82
27	Slovenia	80	77	83
27	<u>Portugal</u>	80	77	83
27	<u>Kuwait</u>	80	80	80
33	<u>Denmark</u>	79	77	82
33	<u>Chile</u>	79	76	82
33	Costa Rica	79	77	81
33	<u>Bahrain</u>	79	78	80
33	<u>United States</u>	79	76	81
38	<u>Cuba</u>	78	76	80
38	Czech Republic	78	75	81

PERMANENTE<sub>®</sub>

## **NHS (England)**

MINISTER

STAFF 1.4m

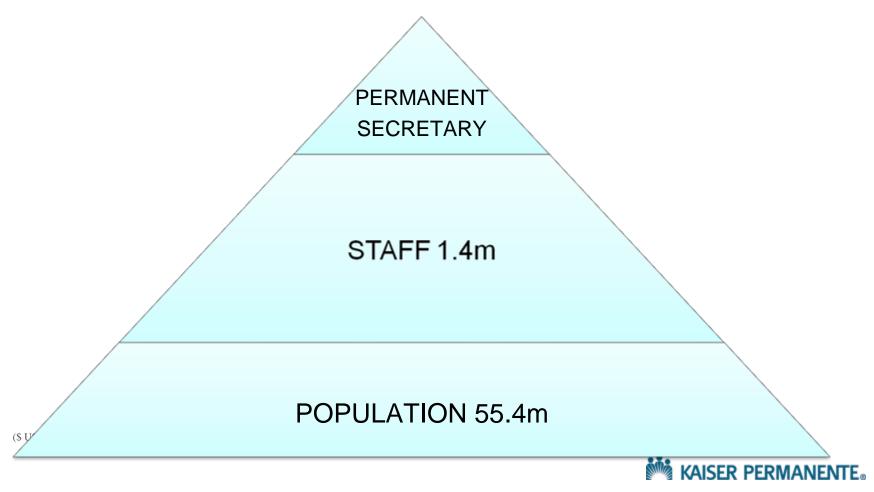
POPULATION 55.4m







## **NHS (England)**



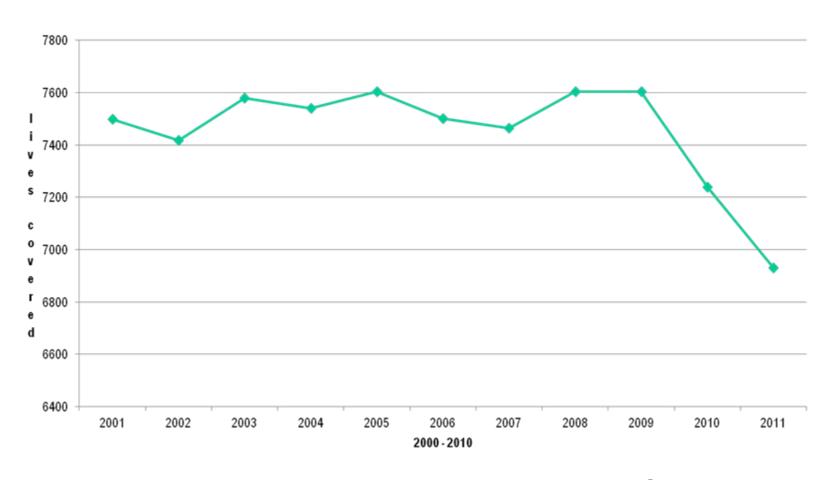
NHS doctors and nurses spend up to 10 hours a week on bureaucracy – a third of which is unnecessary, a Government review has found.



Photo: ALAMY

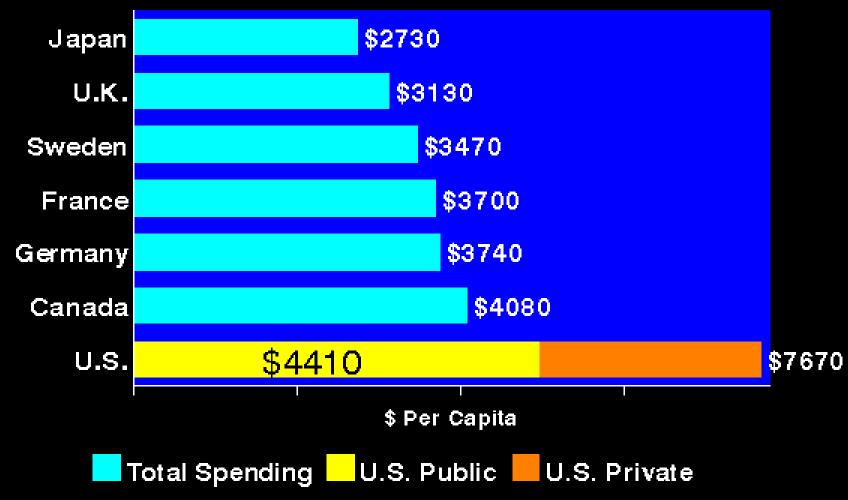


#### **UK PMI Market 2000 -2010**





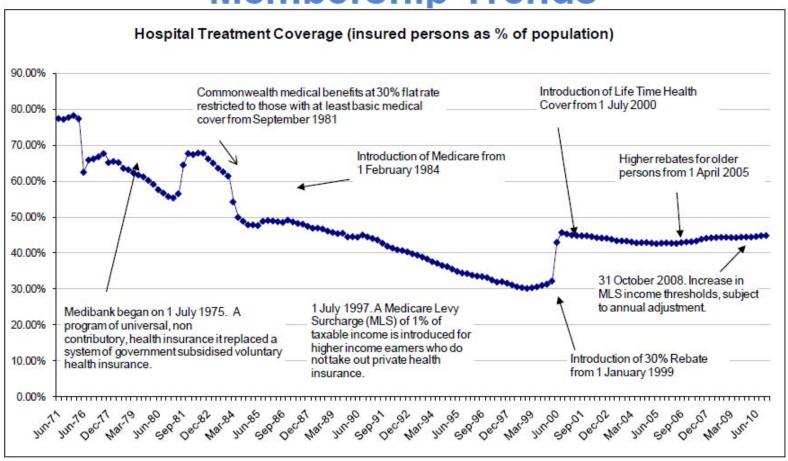
## U.S. PUBLIC Spending Per Capita for Health is Greater than TOTAL Spending in Other Nations



Note: Public includes benefit costs for govt. employees & tax subsidy for private insurance

Source: OECD 2010; Health Aff 2002; 21(4):88 - Data are for 2008

### **Membership Trends**







# The leading global network of the health insurance industry