



# News Notes

• www.LVBCH.com •

## Quarterly News & Updates

During this extremely difficult situation with the coronavirus (COVID-19), nothing is more important to the Lehigh Valley Business Coalition on Healthcare than the health and safety of our members, your employees, your families, our community, and our Country.

Over the last several months, Coalition Operations and Purchasing Programs have remained committed to providing full services to members. Additionally, we continue to celebrate the Coalition's 40th Anniversary through online educational events.

Welcome to the first ever e-Version of the LVBCH Quarterly News Notes!

[Visit our Website](#)

## Welcome Message



**Joe Huxta**  
Retired, Volvo-Mack  
Former Chair, LVBCH Board of Directors

In honor of LVBCH's 40th Anniversary, we will be featuring Welcome Messages from past LVBCH Board Members.

This issue features a message from former LVBCH Board of Director Chair, Joe Huxta. Read our March 2020 interview with Joe to hear about his most memorable moments, his thoughts on today's health challenges and what would now concern him most as a benefits manager, as well as his initial thoughts on COVID-19 and how it compares to other healthcare crises we have faced in the past.

[Read the Full Interview](#)

## Welcome New Members

Please join us in extending a warm welcome to our new Coalition members - We encourage all members to get involved and participate in Coalition activities!

• **ArtsQuest**

• **Muve Health**

- Commonwealth Charter Academy
- Coordinated Health
- HENRY The Dentist

- Penn State Health St. Joseph
- Pennsylvania House of Representatives
- UPMC Health Plan

[View All LVBCH Members Here](#)

## LVBCH 40th Anniversary



To continue our celebration of the Coalition's 40th Anniversary, we will be presenting the following virtual webinar/speaker series:

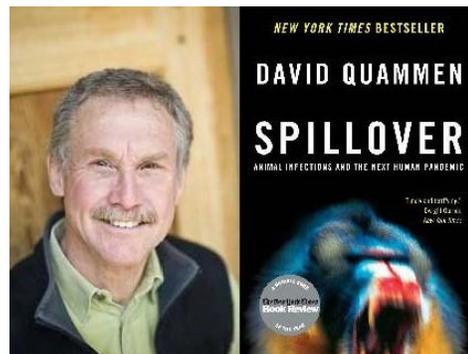
## LVBCH 40th Anniversary Webinar Series

### DAVID QUAMMEN

COVID-19 and the Next Pandemic  
Are We Ready?

Tuesday, July 21, 2020  
12:00 noon - 1:00 p.m

[REGISTER NOW](#)

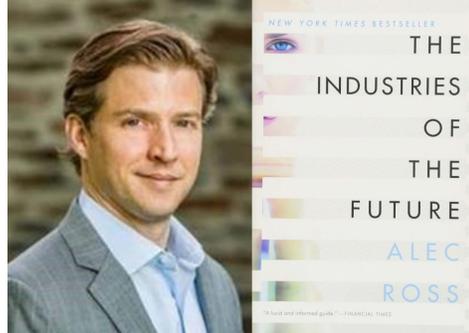


### ALEC ROSS

COVID-19 Employer Impact on the  
Industries of the Future

Tuesday, August 11, 2020  
12:00 noon - 1:00 p.m

REGISTER NOW



## REPRESENTATIVE CHARLIE DENT

Celebrating 40 Years of Employers  
for Leadership and Value in  
Healthcare

Tuesday, September 1, 2020  
12:00 noon - 1:00 p.m.



REGISTER NOW

## HEALTHCARE POLICY: PHARMACY, OPIOIDS & MARIJUANA

With James Gelfand, ERIC

Tuesday, September 15, 2020  
12:00 noon - 1:00 p.m.



REGISTER NOW

## BLEED OUT

Documentary Screening

With Steve Burrows, Director

Tuesday, October 6, 2020  
Time: To Be Announced



SAVE THE DATE

# HEALTHCARE POLICY: TO THE 2020 ELECTION & BEYOND

With Scott Wham, NAHU

Tuesday, October 13, 2020  
12:00 noon - 1:00 p.m.



[REGISTER NOW](#)

Thank You! LVBCH 40th Anniversary Sponsors

## *Premier Sponsors*



EXPRESS SCRIPTS®

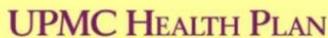
Geisinger  
Health Plan



## *Platinum Sponsors*



# Gold Sponsors



# Silver Sponsors

ASR Media, ELMC Rx, Sanofi

## Upcoming Events



**Webinar: Back to Business**

Monday, July 27, 2020  
12:00 noon - 1:00 p.m.

[REGISTER NOW](#)



**Webinar**

Tuesday, September 28, 2020  
12:00 noon - 1:00 p.m.

[SAVE THE DATE](#)

**LVBCH Updates**



# LVBCH 39th Annual Report (2019)

LVBCH published and released its 2019 Annual Report. This report outlines the significant Coalition activities and achievements of 2019.

To read the report, click the image to the left.

**Carl Seitz**  
PRESIDENT  
www.LVBCH.com

**Q: What are you excited about in 2020 and beyond?**

**A:** In 2020, the Lehigh Valley Business Coalition on Healthcare will be celebrating our 40th Anniversary of bringing Leadership and Value in Healthcare to Local Employers! As we enter our 40th decade, as a multi-state, not-for-profit, coalition of employers striving to provide access to quality, affordable healthcare for employees, we continue our mission to improve the delivery, cost, and quality of healthcare in our communities through collective employer action, quality and data initiatives, value-based purchasing, and providing forums for the exchange of information, ideas, and resources.

**We are also excited to share our 2020 educational program series!**  
Please save these dates and plan on joining us! Visit www.LVBCH.com for additional information and to register for programs as they become available.

- January 20th: "Employee Initiatives Targeting Diabetes and Obesity"
- February 4th: "The Annual Lehigh Healthcare Systems Engineering Symposium "What Employers are Doing to Move the Needle on Healthcare"
- March 10th & 11th: Healthcare Policy "Medicare-for-All and Other Proposals"
- May 6th: 40th Anniversary Annual Meeting "Celebrating 40 Years of Employers for Leadership and Value in Healthcare"
- June 17th: Healthcare Policy "Pharmacy, Opticals & Mail-Order"
- September 1st: Healthcare Policy "Heading into the 2020 Election and Beyond"
- October 6th: 3rd Annual Documentary Screening

**We are most excited to see and hear from you!**  
Reaching an anniversary like this is a great achievement and we are grateful to all who helped us reach this milestone. In 1980, a few forward-thinking local business leaders met to discuss the actions they could take to address rapidly rising medical costs and the impact on their businesses and their employees. Since then, LVBCH has evolved into one of the most successful healthcare focused employer coalitions in the nation, all thanks to the local business community. In 2020, be sure to consider the purchasing programs available to your organization for medical, pharmacy, dental, vision, and much more. Also, get involved with one of the Coalition's committees that help us achieve our goals of bringing value to you!

## 20 In 20

LVBCH was featured in a special publication by Lehigh Valley Business titled "20 in 20"

To read the article, click the image to the right.

**40 Years LEHIGH VALLEY BUSINESS COALITION ON HEALTHCARE**

60 W Broad St, Suite 206, Bethlehem, PA 18018  
610.213.4120  
lvbch.com

**HELPING BUSINESSES NAVIGATE HEALTHCARE CHALLENGES**

**LEHIGH VALLEY BUSINESS COALITION ON HEALTHCARE (LVBCH) HAS REMAINED COMMITTED** in a way of unprecedented change helping employees navigate costs, changes to improve the delivery, cost and quality of healthcare in our communities.

Founded Dec. 1, 1980, LVBCH is the brainchild of a group of 44 employers who came together to address the rising costs of providing health care to employees, with a founding goal of employees to be more involved in how they could affect the healthcare system.

These same core issues are even more relevant today. Employers continue to rise, and employees are continually asked to shoulder more of the expense related to premiums, deductibles, and co-pays.

"Expenses as well as consolidation in the region is also unprecedented - in hospitals, healthcare mergers and acquisitions and in rapid care centers," said LVBCH President Carl Seitz. "LVBCH helps employers come together to pool and leverage their combined purchasing power and is a recognized leader in efforts to provide access to quality and cost-effective health care."

"Among the panel advances and changes controlling prices for quality health care services, pharmacy benefits to employees continue to evolve."

Pending health care insurance coverage is typically the second most costly expense to a business budget after salaries, and understanding the options requires knowledge of the resources. "The Coalition identifies preferred purchasing partners for medical, pharmacy, dental, vision, and other health care related benefits for employees," Seitz said.

While there is a push to group purchasing power for health care benefit plans, the focus of LVBCH remains to provide an avenue to impact the system through quality education and advice.

LVBCH offers educational sessions throughout the year on timely health care topics and brings together speakers to provide local as well as regional and national perspectives. The 40th Anniversary brings together the following programs:

- The "39th Annual Symposium "Moving the Needle on Costs: What Employers are Doing to Fix Healthcare" explores value-based healthcare benefits, direct contracting models and initiatives targeting pharmacy cost control.
- The 40th Anniversary Annual Conference "Celebrating 40 Years of Employers for Leadership and Value in Healthcare" includes a keynote presentation from Gov. Nicky Malachuk, the first woman Thruway toll pilot, as well as author Martin Makary, M.D., and Hag Chaika Diner.
- LVBCH led Annual Documentary screening of "Blood Out" explores the human and financial costs associated with medical errors.
- The 40th Anniversary Educational Roundtable Series "What Employers Need to Know About Health Care Policy" includes sessions on proposed policies including Medicare for All, updates related to pharmaceuticals, opioids and marijuana, and 2020 election scenarios.
- "We focused on what employers need to know about health care policy to coverage change, employee enrollment to lower member contributions and to be proactively prepared, so we can weather the transition," Seitz said.
- From HRSA's new Affordable Care Act (ObamaCare), the American Health Care Act (Trump Care), and proposals like Medicare for All, health care policy remains an important factor in benefit costs and the ability of employees to provide them, Seitz said.
- The most thing change, the most things stay the same. Carefully representing over 240 members LVBCH's 40 years of advocacy represents on behalf of employees and employers has helped the Coalition achieve a reputation as one of the most successful health care focused employer coalitions in the nation.

**2020** | **1980**

Year	Event	Location	Topic
1980	Volunteers	Palmer Inn, Executive Director & Edward Dineley, Sr. President	None
1981	1st Annual Meeting	Lehigh Valley Mall	None
1982	2nd Annual Meeting	Lehigh Valley Mall	None
1983	3rd Annual Meeting	Lehigh Valley Mall	None
1984	4th Annual Meeting	Lehigh Valley Mall	None
1985	5th Annual Meeting	Lehigh Valley Mall	None
1986	6th Annual Meeting	Lehigh Valley Mall	None
1987	7th Annual Meeting	Lehigh Valley Mall	None
1988	8th Annual Meeting	Lehigh Valley Mall	None
1989	9th Annual Meeting	Lehigh Valley Mall	None
1990	10th Annual Meeting	Lehigh Valley Mall	None
1991	11th Annual Meeting	Lehigh Valley Mall	None
1992	12th Annual Meeting	Lehigh Valley Mall	None
1993	13th Annual Meeting	Lehigh Valley Mall	None
1994	14th Annual Meeting	Lehigh Valley Mall	None
1995	15th Annual Meeting	Lehigh Valley Mall	None
1996	16th Annual Meeting	Lehigh Valley Mall	None
1997	17th Annual Meeting	Lehigh Valley Mall	None
1998	18th Annual Meeting	Lehigh Valley Mall	None
1999	19th Annual Meeting	Lehigh Valley Mall	None
2000	20th Annual Meeting	Lehigh Valley Mall	None
2001	21st Annual Meeting	Lehigh Valley Mall	None
2002	22nd Annual Meeting	Lehigh Valley Mall	None
2003	23rd Annual Meeting	Lehigh Valley Mall	None
2004	24th Annual Meeting	Lehigh Valley Mall	None
2005	25th Annual Meeting	Lehigh Valley Mall	None
2006	26th Annual Meeting	Lehigh Valley Mall	None
2007	27th Annual Meeting	Lehigh Valley Mall	None
2008	28th Annual Meeting	Lehigh Valley Mall	None
2009	29th Annual Meeting	Lehigh Valley Mall	None
2010	30th Annual Meeting	Lehigh Valley Mall	None
2011	31st Annual Meeting	Lehigh Valley Mall	None
2012	32nd Annual Meeting	Lehigh Valley Mall	None
2013	33rd Annual Meeting	Lehigh Valley Mall	None
2014	34th Annual Meeting	Lehigh Valley Mall	None
2015	35th Annual Meeting	Lehigh Valley Mall	None
2016	36th Annual Meeting	Lehigh Valley Mall	None
2017	37th Annual Meeting	Lehigh Valley Mall	None
2018	38th Annual Meeting	Lehigh Valley Mall	None
2019	39th Annual Meeting	Lehigh Valley Mall	None

## Milestones - 40th Anniversary

Reaching a company anniversary is a great achievement for any business. We are excited to report that the Lehigh Valley Business Coalition on Healthcare (LVBCH) is celebrating our 40th Anniversary in 2020.

It all began in 1980, when a few forward-thinking local business leaders met to discuss the actions they could take to address rapidly rising medical costs and the impact on their businesses and their employees. From these humble beginnings, LVBCH has evolved into one of the most successful healthcare focused employer coalitions in the nation.

In recognition of this noteworthy anniversary LVBCH was featured in a special publication by Lehigh Valley Business titled "Milestones"

To read the article, click the image to the left.



## Employer Forum

All LVBCH Employer Members are invited to participate in this ongoing peer-to-peer discussion between local employers on the topics most important to you!

Thank you to all Employer Members who have participated in these calls to date – and for sharing your organizations' experiences with COVID-19, the impact on your organizations, planning for return to work, issues related to testing and CARES Act implementation. As these session progress, they will continue to focus on issues employers are facing related to the coronavirus pandemic, and provide assistance and resources to help you navigate your organizations questions and concerns.

Thank you also to our special guest experts:

- Loren Speziale, Gross McGinley
- Joe Bosche, IBH
- Linda Devlin & Valerie Fleming, United Concordia Dental
- Kelly Pritchard & Charlie Eberling, Good Shepherd

The next employer forum is scheduled for August 20, 2020; 8:00 a.m. - 9:00 a.m. Registration information will be sent to all Employer Members in the next few weeks. Please contact Donna Corsi, at [dmcorsi@lvbch.com](mailto:dmcorsi@lvbch.com) for additional information.

[Read GSRH Home Ergonomics](#)

## Recent Events

### COVID-19 Employer Perspective

Webinar with Dr. Scott Gottlieb

June 23, 2020

[Read the Summary](#)

**Dr. Scott Gottlieb**  
COVID-19 Employer Perspective  
Tuesday, June 23, 2020

[www.LVBCH.com](http://www.LVBCH.com)

**Pulse of the Purchaser  
Survey Results  
COVID-19 Employer Return to  
Work Strategies**

**Webinar with Michael Thompson  
National Alliance of Healthcare**

June 9, 2020



**Pulse of the Purchaser – Survey Results**  
**COVID-19 Employer Return to Work Strategies**  
Tuesday, June 9, 2020



[www.LVBCH.com](http://www.LVBCH.com)

[Read the Summary](#)

[Watch the Recording](#)

[View Presentation Slides](#)

**COVID-19 Clinical Update**  
**What Business Leaders Need to Know**

Webinar with Dr. Ken Bertka

May 20, 2020



[Read the Summary](#)



**COVID-19 Clinical Update**  
**What Business Leaders Need to Know**  
Wednesday, May 20, 2020

**St Luke's Care Network**



[www.LVBCH.com](http://www.LVBCH.com)

[Watch the Recording](#)

[View Presentation Slides](#)

**COVID-19 Update for Employers**  
**Understanding the Epidemic**  
**and Practical Recommendations**

Webinar with Dr. Ray Fabius

April 20, 2020

[Read the Summary](#)



**COVID-19 Update for Employers with Dr. Ray Fabius**  
**Understanding the Epidemic & Practical Recommendations**  
Monday, April 20, 2020



[www.LVBCH.com](http://www.LVBCH.com)

[Watch the Recording](#)

[View Presentation Slides](#)

## Medicare-for-All and More

Tuesday, March 10, 2020  
at DeSales University

March 11, 2020  
at PSU- Berks Campus

[Read the Summary](#)

## Health Care Policy in 2020

What Employers Need to Know

Lehigh Valley Business Coalition on Health  
March 2020



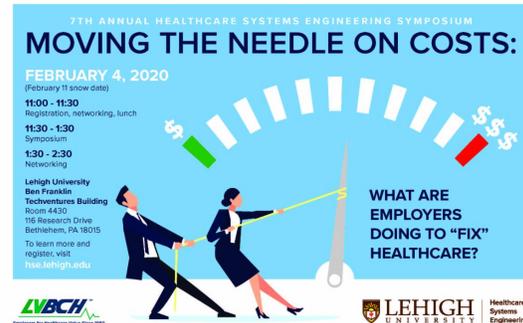
[View Presentation Slides](#)

## 7th Annual Lehigh Healthcare Systems Engineering Symposium

Moving the Needle on Costs:  
What Employers are Doing to  
"Fix" Healthcare

February 4, 2020  
at Ben Franklin Techventures

[Presentation Slides: Memorial Sloan Kettering](#)



[Presentation Slides: Council for Accountable Physician Practices](#)

[Presentation Slides: Pacific Business Group on Health](#)

## 40th Anniversary Open Houses

**Employer Appreciation**  
January 10, 2020

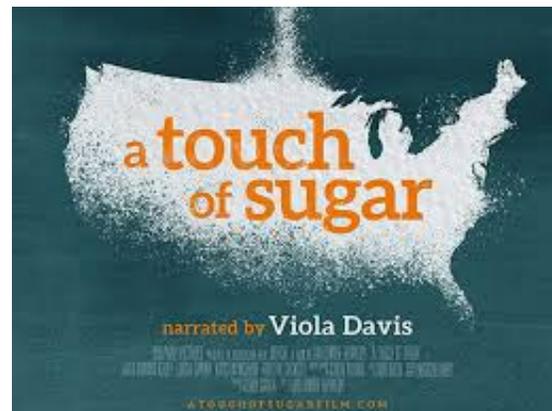
**Associate Appreciation**  
January 24, 2020

## Employer Initiatives Targeting Diabetes and Obesity

January 22, 2020  
at Doubletree Hotel, Reading, PA

[More Information: A Touch of Sugar](#)

[2019 Type 2 Diabetes Report](#)



CDC WEBINAR  
MARCH 19, 2020

NORTHAMPTON TOWN HALL  
APRIL 2, 2020

[Read the Summary](#)

[Read the Summary](#)

## Employer Meetings



March 3 & 4, 2020

[Read the Summary](#)



March 3 & 4, 2020

[Read the Summary](#)



March 18, 2020

Annual Report Webinar

LVBCH PBM group members received their annual reports from Express Scripts.



These reports included detailed information on the group and individuals 2019 Rx Utilization - trend comparison, top line performance metrics, specialty, top 10 indicators, top 25 drugs; 2020 Health Care Trends - being watched for plans and members and the potential from clinical savings and impact; as well as top opportunities moving forward. This includes a goal of a future with zero new HIV diagnoses, a new world of total health management, and improving clinical and financial outcomes.



January 28, 2020

[View Presentation](#)



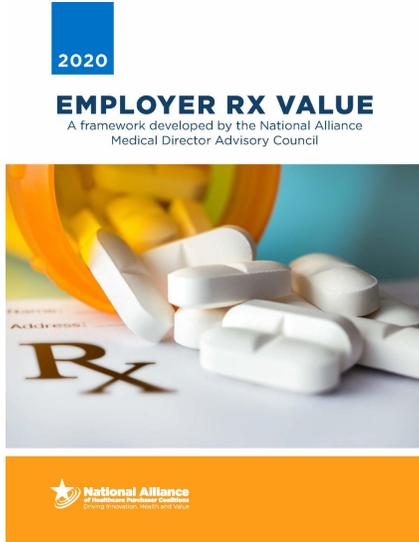
June 2, 2020

[Read the Summary](#)

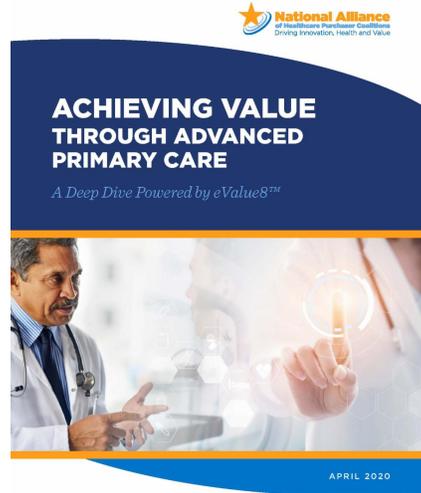
## National Alliance of Healthcare Purchaser Coalitions (NAHPC) Updates

*LVBCH partners with the National Alliance of Healthcare Purchaser Coalitions to drive innovation, health, and value through the collective action of public and private purchasers. Together, both organizations seek to accelerate the nation's*

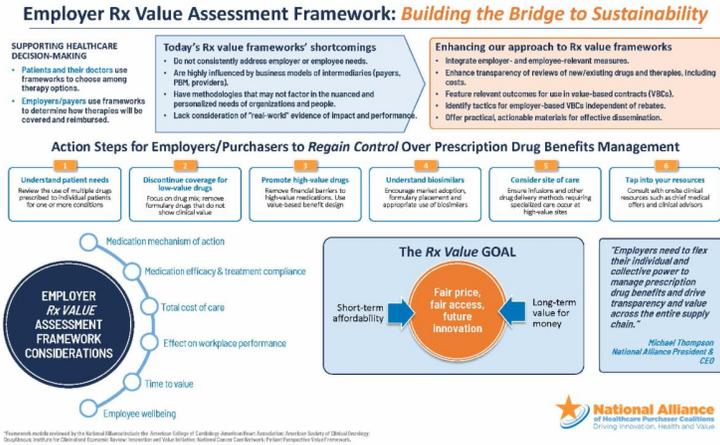
## Employer Rx Value (2020)



## Achieving Value: Advanced Primary Care (Apr 2020)



## Infographic: Employer Rx Value Assessment Framework: Building the Bridge to Sustainability (Apr 2020)



## Action Briefs

### Hospital Payment Strategies (Jan 2020)

### Opioid Alternatives (Jan 2020)

## HOSPITAL PAYMENT STRATEGIES

SETTING PRICE AND QUALITY EXPECTATIONS



### ACTION STEPS FOR EMPLOYERS

1. Understand price relative to the local market and benchmarked against Medicare.
2. Learn what "paying for value" means.
3. Pool purchasing power.
4. Demand reasonable pricing and alternative payment models.
5. Educate and involve employees.

A \$1.65 trillion for a one-second procedure to check a dialyzer flow from a dialyzer circuit. A \$1,000 lab of data able to show a result in 15 minutes. A \$1,000 value prevention treatment following a slip on the floor by a patient. There's no shortage of reports of outrageous, unpredictable US hospital costs. From spike visits to the emergency department to extended stays involving complex care. Too often, employees are notified by hospital prices and spend billions of dollars unnecessarily, while patients face the stress of bill collectors, wage deductions, lowered lives, and personal bankruptcy when they cannot possibly pay astronomical hospital prices.

The Employer Forum of Health Care Association and the Joint H&M Corporation study of US hospital prices in 20 states. The study revealed that in 2016, the prices paid to hospitals for privately insured patients averaged a whopping 25% of what Medicare would have paid, with wide variation in prices across (and even within) states. If rates were uniform, hospitals participating in the study paid hospitals total payments over the 2015-2017 period would be less reduced by 87

*"When you talk to people about their experiences with the healthcare system, it's clear to me that the modern-day money games of price gouging and predatory billing now threaten the great public trust in the medical profession."*

—Marty Malary, MD  
Surgeon, Jackson Professor at Johns Hopkins University

### RAND STUDY RESEARCH QUESTIONS

- How can we create a market that can pay reasonable market prices for the services we need?
- How can we create a market that can pay reasonable market prices for the services we need?
- How can we create a market that can pay reasonable market prices for the services we need?

## OPIOID ALTERNATIVES

PREVENTING OPIOID DEPENDENCE WITH PAIN MANAGEMENT ALTERNATIVES

### ACTION STEPS FOR EMPLOYERS

1. Review multiple data sources to understand trends, million trends, and specific case sources (OUD) risks.
2. Set expectations with health plans and pharmacy benefit managers (PBMs) about non-opioid treatment systems, especially for "gateway" events.
3. Check provider directories to see that those offering opioid alternatives are highlighted.
4. Develop specific policies to address post-herald pain management, including dental procedures (e.g., extraction, implants).
5. Educate and involve employees in making cost-effective pain management decisions.

The number of overdose deaths involving opioids in the United States quadrupled since 2000 and in 2016 accounted for every day from an overdose. The US Centers for Disease Control and Prevention (CDC) identified the rate of prescriptions for high-dose opioids as a leading cause of the epidemic, often associated with an "opioid gateway" event like surgery, dental procedure, injury, and other common events and conditions.

Patients who are given opioids in response to a surgical procedure or injury are more likely to be prescribed through chronic pain and addiction care programs than those who are not.



The total economic cost of the opioid crisis, declared a federal public health emergency in 2017, reached at least \$63 billion from 2015 to 2018. That is more than the gross domestic product of countries such as Belgium, Sweden and Taiwan.<sup>1</sup>

and discuss pain treatment while reducing the number of people who misuse or overdose from these drugs. The CDC published the CDC Guideline for Prescribing Opioids for Chronic Pain to provide common guidance for the prescribing of opioid pain medications in primary care settings.

Efforts are being made to include the opioid crisis in general events by ensuring proper, long-lasting, low-cost, non-opioid, surgical pain management alternatives are widely available. The following is an age for employees are designed to enable quick and safe and appropriate and a return to work by engaging the professional of opioid prescribing.

## COVID-19: The Importance of Shared Decisions (Apr 2020)

### COVID-19 THE IMPORTANCE OF SHARED DECISION-MAKING

#### ACTION STEPS FOR EMPLOYERS

1. Promote shared decision-making and patient-centered care, especially in relation to COVID-19 testing and treatment.
2. Promote use of the Choosing Wisely<sup>SM</sup> Questions to Ask your Doctor.<sup>SM</sup>
3. Understand and communicate about the spread of coronavirus.



*"Patients have a big role to play in turning an ordinary healthcare experience into patient-centered care."*

—Richard Hays, MD, FACP  
CEO, WHOQOL, The Northwestern University Center for Healthcare Innovation

#### Easing Stress on Patients, Providers and the Healthcare System

Helping employees make informed decisions about their children and responsibilities in a growing trend that is especially important in light of COVID-19. Having a tool to guide shared decision-making conversations enables employees to think through their options and ensure in absence of an office or a visit to convenience with healthcare providers an efficient and effective.

**1. Promote shared decision making and patient-centered care.**

Shared decision-making is a model of patient-centered care that enables people to play an active role in the medical decisions that affect their health. It operates under two principles:

**First,** patients enter with evidence-based care knowledge that empowers them to participate in care decisions.

**Second,** clinicians use patient preferences to guide recommendations.

**Why is Shared Decision-Making more important than ever being COVID-19?**

- Good information helps people make informed care decisions and manage their anxiety.
- The impact of COVID-19 has greatly broadened patient age, risk factors, and personal circumstances.



1. Promote use of the Choosing Wisely<sup>SM</sup> Questions to Ask your Doctor.<sup>SM</sup>
  2. Encourage use of the Choosing Wisely<sup>SM</sup> Questions to Ask your Doctor.<sup>SM</sup>
- Encouraging employees to use the information developed by the Choosing Wisely campaign to help patients to have meaningful conversations about evidence-based medicine of care and their decision-making opportunities.
- Prevent use of care and resources is essential with a system under extreme stress.
  - There is no known transmission or treatment available.
  - Possible treatments featured in the media are based on poor-quality studies.
  - Everyone must take action to limit virus spread.

## Biosimilars in the Pharmacy Benefit (June 2020)

### BIOSIMILARS IN THE PHARMACY BENEFIT EMPLOYERS DRIVING APPROPRIATE USE AND TRANSPARENCY

#### ACTION STEPS FOR EMPLOYERS

1. Apply value-based purchasing strategies that encourage market competition, formulary placement, and appropriate use of biosimilars.
2. Use practical strategies to view and interpret biosimilar benefits.
3. Learn how biosimilars can help employees save money without compromising quality.
4. Know the right questions to ask health plans, PBMs, specialty pharmacies, consultants and other partners.
5. Educate employees about the value of biosimilars.

Despite the fact that less than 2% of the US population uses biologics, drug spend for 20% of national prescription drug spending. Biosimilars can expand options, enhance affordability, and increase access to therapy. It has been estimated that biosimilars could save patients and the healthcare system from \$4 to \$20 billion over the next 10 years in the market without compromising outcomes.

But while biosimilars hold great promise to alter the price paid for specialty pharmaceuticals, it's a confusing and murky marketplace. 1. Prior to many biosimilars have been in part because employees are often unsure about how to take appropriate action to encourage more- and more affordable- pharmaceutical options for employees and their dependents.



1. Apply value-based purchasing strategies that encourage market competition, formulary placement, and appropriate use of biosimilars.
  2. Support and promote appropriate use of biosimilars.
- The National Alliance Medical Director Advisory Council has developed an "Employee's Value Assessment Framework" with six key employee action steps to build the bridge to sustainability. The framework is highly relevant to purchasing strategies for biosimilars.
- Support and promote appropriate use of biosimilars.** In the European Union (EU), 18 biosimilars have been approved. In the US, as of May 2019, 24 biosimilars have been approved by the FDA, only 17 have been launched, and another 10 are in low. Employees can advocate for biosimilar use with health plans, pharmacy benefit managers (PBMs), specialty pharmacies, consultants and other stakeholders.

*"Drug costs in the US have increased 41% in the last 10 years from \$28 billion to \$39 billion. The biggest contributor to this growth is the rising cost of brand-name drugs and biologics. In fact, the top 10 highest cost drug products were biologics, with employees spending more than \$7.5 billion on those top 10 treatments alone."*

—Philip J. O'Neil, PhD  
President, WHOQOL, The Northwestern University Center for Healthcare Innovation

## Cannabis Products on the Formulary (June 2020)

### CANNABIS PRODUCTS ON THE FORMULARY ADHERING TO EVIDENCE- AND VALUE-BASED STANDARDS

#### ACTION STEPS FOR EMPLOYERS

1. Apply the same evidence-based and value-based standards to cannabis-derived products that are applied to all other drugs on your company's formulary.
2. Scrutinize the manufacturing and quality control standards that apply to non-FDA-approved cannabis products sold in your state.
3. Engage legal counsel when considering coverage for non-FDA-approved cannabis products.
4. Consider the implications of cannabis coverage policies that encourage greater cannabis use by employees, especially those in safety-sensitive positions.

As access to cannabis expands via state-level legislation, employers must address a variety of challenges resulting from employee cannabis use. Most notably, employers need to confront workplace accommodation issues, workplace safety challenges, and coverage decisions. These issues are complicated by the fact that possessing cannabis and using and altering the possession of cannabis remain illegal under federal law.

This *Action Brief* focuses on issues raised by health insurance coverage for employees use of non-FDA-approved cannabis products and offers action items employees can implement to achieve the most medically effective and cost-effective coverage for their workers.

**1. Apply the same evidence-based and value-based standards to cannabis-derived products that are applied to all other drugs on your company's formulary.**

A benefit risk assessment is the foundation of our system for approving medications and gives the patient safety before a therapy can be delivered to patients, a comprehensive, rigorous review of the drug must be performed by the U.S. Food and Drug Administration (FDA) to determine if the drug is effective in treating, preventing, or mitigating disease and that the drug's



**What is Cannabis?**

Cannabis is a plant that has been used for thousands of years. It is a member of the hemp family and is used to produce a variety of products, including food, medicine, and textiles. Cannabis is also used to produce a variety of recreational products, including marijuana and hashish.

Over the years, the American College of Obstetrics and Gynecology (ACOG) has published a variety of guidelines regarding the use of cannabis in pregnancy and lactation.

*"We have given marijuana the status of medicine with none of the standards."*

—Mark Thompson, professor of Psychiatry and Behavioral Science, Emory University

expected benefits outweigh its potential risks to patients.

Despite the various adverse health effects associated with cannabis use (e.g., changes in brain structure and development of psychosis, increased risk of heart attack and impaired heart

# 2020 Legislative Watch: What Employers Need to Know (Jan 16, 2020)

January 16, 2020

**2020 Legislative Watch: What Employers Need to Know**  
2019 health policy highlights and what to look for in 2020

**A look back at 2019**  
On December 16, 2019, both chambers of Congress passed a spending bill that included a series of changes to healthcare policy. That bill was passed by the House by a vote of 297 to 120, and the Senate by a vote of 71 to 23. The budget deal will fund the government through September 30, 2020, although several healthcare programs will expire near the end of May 2020. The wide-ranging spending deal funds or otherwise addresses many important health-related policies and programs.

The spending deal will fully repeal three of the ACA's most significant taxes: the health insurance tax, the Cadillac tax, and the medical device tax. Repeal of the health insurance tax would not take effect until 2021, meaning the tax—which has already been built into many premiums for the 2020 plan year—will remain in effect for 2020. The Cadillac tax and medical device tax are repealed beginning in 2020. These taxes were designed to help pay for the ACA's coverage expansion. Collectively, repeal of the three taxes would result in the loss of \$373.3 billion in projected revenue over 10 years. The most significant revenue loss will come from repeal of the Cadillac tax (\$179 billion) followed by the health insurance tax (\$196.8 billion) and the medical device tax (\$77.5 billion). These provisions were passed without "pay for" or offsets in other spending, so the nearly \$400 billion cost for repeal of these taxes was added to the federal deficit.

Also of interest to the National Alliance, and many of its members, the bill includes about \$3.3 billion in funding for PCORI through fiscal year 2029.

**Continuing efforts in 2020**  
Despite the four-week delay, the Coalition Against Surprise Medical Billing (of which the National Alliance, along with many member coalitions, is a member) legislation to address surprise medical bills was not included in the final spending bill, nor was it passed as a part of any other legislation in 2019. We want to continue advocating for legislation that addresses surprise medical bills in a way that is fair and transparent to patients and payers, including employers. And while the version(s) of legislation that received most promising for inclusion in a spending bill at the end of 2019 included the use of arbitration in some limited circumstances, our position remains strong that arbitration should not be part of the solution to this issue.

**Prescription drug pricing bills.** Including provisions related to drug price transparency, are also under consideration for legislative action in the first half of 2020. Like the surprise billing issue, prescription drug bills were introduced and discussed in Congress during 2019, but nothing was included in the end-of-year spending bill. These various proposals include topics such as drug price negotiation, and benefit design in the Medicare program. The National Alliance, through [Leapfrog](#), has been advocating that employer-sponsored plans are not excluded from any reform efforts here.

Early indications are that both surprise medical billing and prescription drug pricing provisions are being considered for inclusion in the spending bill that addresses funding expirations for certain healthcare programs in May 2020 (see above). Unfortunately, our colleagues who are more experienced in lobbying report that if these topics aren't addressed in that bill, there is very little chance of anything else happening the rest of this year, so attention will be re-directed toward the presidential election.

The National Alliance will continue to monitor for updates on these topics and alert members to important developments.

**Health Policy in Transit**  
**A Purchaser Viewpoint**

National Alliance of Healthcare Purchaser Coalitions | 1000 Pennsylvania Avenue, N.W., Washington, D.C. 20004 | 202-462-1000 | [www.nahpc.org](http://www.nahpc.org)

# Coronavirus Aid, Relief, and Economic Security (CARES) Act: What Employers Need to Know (Mar 31, 2020)

March 31, 2020

**Coronavirus Aid, Relief, and Economic Security (CARES) Act: What Employers Need to Know**

On Friday, March 27, the Coronavirus Aid, Relief, and Economic Security (CARES) Act was signed by President Trump after passing both the House and Senate earlier in the week. The \$2.2 trillion stimulus package is wide-reaching and intended to provide economic relief for the individual and businesses hit hardest by the coronavirus pandemic and the resulting financial downturn. This Health Policy in Transit explains the main provisions most likely to affect employers, including what is required in terms of coverage of COVID-19 testing and treatment.

**Coverage of COVID-19 Testing and Treatment**

- Section 3205 requires group health plans to cover COVID-19 screening and the related office visit without cost sharing, which includes COVID-19 tests that may not have been approved by the U.S. Food and Drug Administration. We understand this provision to be effective upon enactment of the CARES Act.
- Section 3207 requires that group health plans providing COVID-19 testing must reimburse the provider in the amount of (1) the negotiated rate, if it reflects before the public health emergency begins, or (2) a fixed amount that equals the rate which is listed by the provider on a public internet website, or a negotiated rate with the provider for less than the cash price. We understand this to be effective upon enactment of the CARES Act, and not retroactive.
- Section 3208 requires group health plans to cover, without cost sharing, "qualifying coronavirus preventive services," which are items, services and innovations intended to prevent or mitigate COVID-19 that receive a rating of "A" or "B" from the U.S. Preventive Services Task Force (USPSTF) or a recommendation from the CDC Advisory Committee on Immunization Practices (ACIP) with respect to the individual included. This requirement will apply 15 business days after the recommendation is made by the USPSTF or ACIP.

**Telehealth**

- Section 3701 allows a high-deductible health plan (HDHP) with a health savings account (HSA) to cover telehealth services prior to a patient meeting the deductible, without regard to whether the telehealth service relates to COVID-19. This provision is effective upon enactment and runs through plan years beginning in 2021.

**Over-the-Counter Medical Products without a Prescription**

- Section 3702 allows for reimbursement plans, including HSA, FSA and HRSA, to reimburse individuals for the purchase of over-the-counter medical products without a prescription from a physician, regardless whether the product is related to treatment of COVID-19. This reverses a restriction imposed by the Affordable Care Act. These changes are effective for amounts paid/reimbursed incurred after 2018 and seem to apply retroactively.

**Expansion of DOL Authority to Payleave Certain Deadlines**

- Section 3807 amends Section 518 of ERISA to provide DOL the ability to postpone certain ERISA filing deadlines and provide other relief for a period of up to one year in the case of a public health emergency.

See [Recent National Alliance Surveys on COVID-19 Benefits & Policy Decisions](#).

**What's not included?**  
A few things notably left out of the CARES Act include:

- Besides the HSA, FSA, and HRSA, there is nothing in the package to address the larger issue of surprise billing. Section 3225's requirement that providers publish "cash prices" for COVID screening is a very small step toward increased transparency.
- The good news is that the Act seems to have brought more time to these issues, since the health care "extenders" set to expire May 22 were extended into November on this bill. The bad news is that more drug pricing and/or surprise billing legislation will need to be addressed in a lame duck session of Congress.
- It is difficult, though not impossible, to pass major labor law legislation during a lame duck session. We and our partner organizations are rebuking all of both of these and will share more information as it becomes available.

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**A Purchaser Viewpoint**

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## COVID-19 Resources

### Infographic: COVID-19 Understanding the Spread Signs & Symptoms (Apr 2020)



### Survey Results: COVID-19 Employer Return to Work Strategies (May 18, 2020)

**COVID-19 Employer Return to Work Strategies**  
Survey Results  
May 18, 2020

**National Alliance of Healthcare Purchaser Coalitions**  
Driving Innovation, Health and Value

## Leapfrog Updates



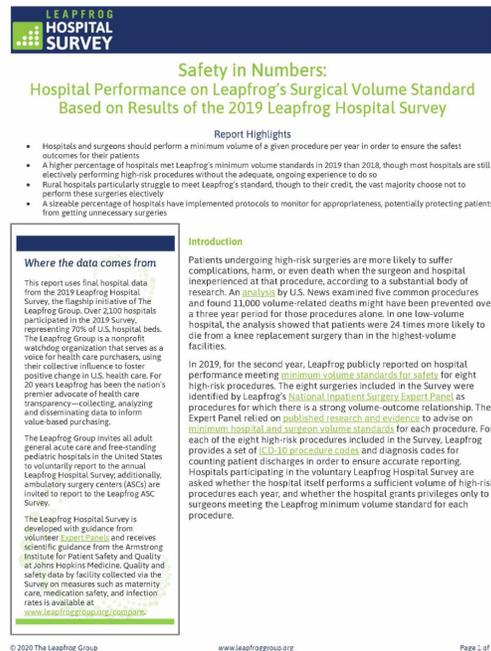
*LVBCH continues to develop its relationship with the Leapfrog Group, serving as a Regional Leader. In this role, LVBCH invites and encourages hospitals across Pennsylvania to complete the annual Hospital Survey that assesses hospital safety, quality, and efficiency based on national performance measures.*

## Safety in Numbers

Hospital Performance on Leapfrog's Surgical Volume Standard Based on Results of the 2019 Leapfrog Hospital Survey

## Highlights

- Hospitals and surgeons should perform a minimum volume of a given procedure per year in order to ensure the safest outcomes for their patients
- Most hospitals are electively performing high-risk procedures without the adequate, ongoing experience to do so



**LEAPFROG HOSPITAL SURVEY**

### Safety in Numbers: Hospital Performance on Leapfrog's Surgical Volume Standard Based on Results of the 2019 Leapfrog Hospital Survey

**Report Highlights**

- Hospitals and surgeons should perform a minimum volume of a given procedure per year in order to ensure the safest outcomes for their patients
- A higher percentage of hospitals met Leapfrog's minimum volume standards in 2019 than 2018, though most hospitals are still electively performing high-risk procedures without the adequate, ongoing experience to do so
- Rural hospitals particularly struggle to meet Leapfrog's standard, though to their credit, the vast majority choose not to perform these surgeries electively
- A sizeable percentage of hospitals have implemented protocols to monitor for appropriateness, potentially protecting patients from getting unnecessary surgeries

**Where the data comes from**

This report uses final hospital data from the 2019 Leapfrog Hospital Survey, the flagship initiative of The Leapfrog Group. Over 2,100 hospitals participated in the 2019 Survey, representing 70% of U.S. hospital beds. The Leapfrog Group is a nonprofit watchdog organization that serves as a voice for health care purchasers, using their collective influence to foster positive change in U.S. health care. For 20 years Leapfrog has been the nation's premier advocate of health care transparency—collecting, analyzing and disseminating data to inform value-based purchasing.

The Leapfrog Group invites all adult general acute care and free-standing pediatric hospitals in the United States to voluntarily report to the annual Leapfrog Hospital Survey. Additionally, ambulatory surgery centers (ASCs) are invited to report to the Leapfrog ASC Survey.

The Leapfrog Hospital Survey is developed with guidance from volunteer **Expert Panels** and receives scientific guidance from the Armstrong Institute for Patient Safety and Quality at Johns Hopkins Medicine. Quality and safety data by facility collected via the Survey on measures such as maternity care, medication safety, and infection rates is available at [www.leapfroggroup.org/research](http://www.leapfroggroup.org/research)

**Introduction**

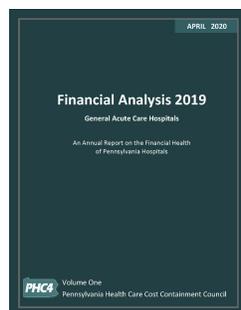
Patients undergoing high-risk surgeries are more likely to suffer complications, harm, or even death when the surgeon and hospital inexperienced at that procedure, according to a substantial body of research. An *analysis* by U.S. News examined five common procedures and found 11,000 volume-related deaths might have been prevented over a three year period for those procedures alone. In one low-volume hospital, the analysis showed that patients were 24 times more likely to die from a knee replacement surgery than in the highest-volume facilities.

In 2019, for the second year, Leapfrog publicly reported on hospital performance meeting **minimum volume standards for safety** for eight high-risk procedures. The eight surgeries included in the Survey were identified by Leapfrog's **National Inpatient Surgery Expert Panel** as procedures for which there is a strong volume-outcome relationship. The Expert Panel relied on **published research and evidence** to advise on **minimum hospital and surgeon volume standards** for each procedure. For each of the eight high-risk procedures included in the Survey, Leapfrog provides a set of **ICD-10 procedure codes** and diagnosis codes for counting patient discharges in order to ensure accurate reporting. Hospitals participating in the voluntary Leapfrog Hospital Survey are asked whether the hospital itself performs a sufficient volume of high-risk procedures each year, and whether the hospital grants privileges only to surgeons meeting the Leapfrog minimum volume standard for each procedure.

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## Pennsylvania Health Care Cost Containment Council (PHC4) Updates

### Financial Analysis 2019: General Acute Care Hospitals (April 2020)



### PHC4 Annual Report 2019 (July 2020)



## Council for Accountable Physician Practices (CAPP) Updates

### CAPP & National Alliance Listening Sessions Preliminary Topline Findings (Jan 2020)

LVBCH was one of five National Alliance of Healthcare Purchaser Coalitions selected as a recipient of the Council for Accountable Physician Practices (CAPP) "Forging Collaboration Between Employer Purchaser and High-Performing Medical Groups". As part of the opportunity, LVBCH facilitated an invite-only roundtable of local

employers discussing how physicians can better communicate and work with employers to improve healthcare outcomes for patients. The preliminary results are included here.

### CAPP & National Alliance Listening Sessions Preliminary Topline Findings

The Council of Accountable Physician Practices (CAPP) partnered with the National Alliance and a few of their coalition members across the country to host "listening sessions" with employers. The objective was for CAPP to better understand what employers want from their local care delivery systems and providers and learn how to best work with employers. The overall goals of these sessions included: (1) learn how they evaluate performance of delivery systems and provider networks in making purchasing decisions; (2) understand how current trends in care delivery reform are perceived; (3) understand employers' goals for their employees in terms of care delivery; (4) identify the gaps in care delivery between what the employer wants and what they're getting; and (5) understand the barriers and constraints in actively shaping provider networks to solving problems.

The following five National Alliance coalitions hosted sessions with their members: Dallas/Fort Worth Business Group on Health, Lehigh Valley Business Coalition on Healthcare (near Philadelphia), Midwest Business Group on Health (Chicago), Washington Health Alliance (Seattle) and the North Carolina Business Group on Health. Participants included public and private employers from 100 employees to 100,000+. Themes that emerged from all the listening sessions included:

#### Care coordination

- In general, as people experience challenges with managing their own care and navigating the health care system, employers are having to step in as care navigators. Care coordination resonates as a "must have" but rarely delivered service, despite efforts in parts of the care delivery system to be more integrated and coordinated. Some employers are interested in centers of excellence as a step toward higher value networks.

#### Gaps in patient experience

- Most employers lack time/resources to solve unique local market opportunities and problems. They are looking for simplified billing, with understandable upfront estimates of out-of-pocket costs for recommended care. They want ease of appointments and wait times and one stop for multiple services (i.e., lab, imaging, specialists). They would like the care provider to take on more responsibility for helping patients manage financial needs as well as care.
- Employers do not have the tools to evaluate the performance of network providers individually or as a network. Quality metrics/data are not advanced enough to evaluate provider cost/quality.

## Guest Articles



**EXPRESS SCRIPTS®**

Ask the Pharmacist: Summer Rx Health

**UNITED CONCORDIA®  
DENTAL**

Navigating the New Normal: Tips for Heading Back to the Dentist (June 2020)

Gingivitis: 5 Tips to Reverse It Early (Feb 2020)



Coronavirus: Health Coverage and Employer Leaves of Absence (March 2020)

 **geneia®**

Success Story: Turning Analytic Insights Into Actoin (Feb 2020)

BeneQUIT: Moving the Needle with Tobacco Cessation (March 2020)

Staying Healthy During and After

### COVID-19 Partner Resources

Select each partners link below to visit their websites'  
COVID-19 & coronavirus related resources.



POPULATION HEALTH SOLUTIONS



60 West Broad St. • Suite 306 • Bethlehem, PA 18018 • P: 610-317-0130

Our affiliation with these national organizations is a value-added benefit for our members.

