



REFORMS & BEST PRACTICES TO MAKE HEALTH CARE MORE AFFORDABLE

DECEMBER 2024

WISC\*NSIN2035







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### **AUTHOR'S NOTE**

WMC Foundation spent the better part of 2021 conducting research, meeting with stakeholders in both the private and public sectors, and visiting all corners of the state to understand the biggest economic challenges facing Wisconsin. The culmination of those efforts in December of that year was the release of **Wisconsin 2035**, which cast a vision for the state's economic future.

According to the interviews and research, the biggest challenge facing the economy was and remains finding a talented workforce. A slowing economy has lessened the short-term concern about workforce availability, but it remains a challenge for the coming decades. In fact, according to a follow-up report that was released in June 2023 — **Wisconsin's Demographic Dilemma** — the state has a simple math problem: the population is not growing at the rate needed to fuel expanded economic growth.

While population growth continues to be a key part of solving Wisconsin's persistent workforce shortage, other issues that directly impact the state's ability to grow our economy also exist. Education attainment and preparedness were reviewed last year in the Foundation's **Educating Our Future** report, which highlighted Wisconsin's subpar test scores and concerns from employers about young people's readiness for a career.

Another challenge facing the business community - and something that plays a part in the state's economic competitiveness - is the cost of health care.

Individuals, families and employers are all concerned about the ever-increasing cost of health care in Wisconsin. In fact, it is now the number one issue that business leaders think state lawmakers should be working to solve — and countless businesses are looking for a way to reduce costs without sacrificing quality care for their employees.

In an effort to improve health care affordability and quality for Wisconsinites, this report will unpack challenges facing the state's system and highlight reforms and best practices that can lead to better, more affordable care into 2035 and beyond.



#### INTRODUCTION

Over the past several years, the cost of health care has become a major pain point for employers — especially in Wisconsin. Not only is the cost of health care increasing year after year, but also the Badger State has some of the highest costs in the country.

Case in point, for years employers argued that the top issues for policymakers at the state level were taxes and regulations. Given the outsized impact both can have on an employer's bottom line, this seemed obvious.

However, more recently, a third issue has become top of mind. In fact, according to the *Wisconsin Employer Survey*, the cost of health care is now the top issue business leaders want lawmakers in Madison working on. The survey — which is conducted twice a year by Wisconsin Manufacturers & Commerce, an affiliate of WMC Foundation — asks two questions to best understand the priorities of its members:

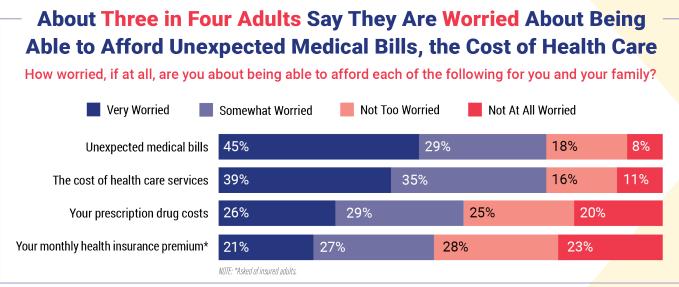
- 1. What is the one thing state government could do to help your business?
- 2. What is the one thing state government could do to improve Wisconsin's business climate?

In both cases, a plurality of respondents answered with, "make health care more affordable." 1

It is not just businesses that are concerned with the high cost of health, either. A 2024 report from the Kaiser Family Foundation shows that medical costs are a key driver of people's financial concerns.

Seventy-four percent of adults in the United States are somewhat or very worried about being able to afford unexpected medical bills and the cost of health care services.<sup>2</sup> In fact, a majority of adults have these concerns no matter their financial situation.

The study explains that, "among adults who report difficulty affording their monthly bills, more than eight in ten say they are worried about the cost of health care services (86%) or unexpected medical bills (83%)...And even among adults who say they can afford their bills with money left over, six in ten nonetheless say they are 'very' or 'somewhat worried' about being able to afford unexpected medical bills (62%) or the cost of health care services (60%) for themselves and their family."



Source: KFF Health Tracking Poll (Jan. 30-Feb. 7, 2024)

### What is the **ONE** thing state government could do to **help your business**?

MAKE HEALTH CARE MORE AFFORDABLE	30%
REDUCE / REFORM REGULATIONS	21%
REDUCE TAXES	21%
EDUCATION REFORM	11%
REDUCE SPENDING	9%
OTHER	7%
TORT / LEGAL REFORM	1%

Source: WMC Wisconsin Employer Survey - Summer 2024

### What is the **ONE** thing state government could do to **improve** Wisconsin's business climate?

MAKE HEALTH CARE MORE AFFORDABLE	29%
REDUCE TAXES	27%
REDUCE / REFORM REGULATIONS	20%
REDUCE SPENDING	8%
EDUCATION REFORM	8%
REFORM HR LAWS	3%
OTHER	2%
TORT / LEGAL REFORM	1%
* Totals may not add up to 100% due to rounding.	

Source: WMC Wisconsin Employer Survey - Summer 2024

Employers note the issue is more noticeable in Wisconsin. More than half (54%) of businesses with locations in other parts of the country say they have higher costs in Wisconsin versus the other states they operate in.<sup>3</sup> Worse yet, Wisconsin has the fifth highest hospital costs in the country and the second highest medical payments for workers compensation.

If Wisconsin aims to be economically competitive for both employers and workers, addressing rising health care costs must be a priority.

This report will outline where Wisconsin ranks for health care costs and emphasize the impact increasing costs are having on employers and workers. Additionally, it will provide best practices from other states and detail private sector solutions.

#### **HEALTH CARE COSTS MORE IN WISCONSIN**

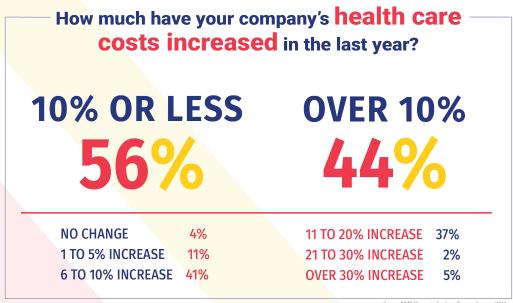
Previous **Wisconsin 2035** reports have uncovered the state's dirty little secret: Wisconsin is a high-tax state. Sadly, site selectors, business leaders and potential workers all know this, too. And it has held back robust and needed economic growth in recent years.

Unfortunately, Wisconsin's higher than average health care costs — specifically for hospitals and workers compensation — are also impacting economic growth.

In the last year, nearly half (44%) of Wisconsin businesses have seen health care costs go up by double digits — far exceeding the rate of inflation over the previous 12 months.<sup>4</sup> When it comes to economic competitiveness, this is a trendline that could end in disaster.

Worse yet, the problem is more intense in the Badger State. Fifty-four percent of employers say health care costs are higher in Wisconsin than other states they operate in, according to the *Wisconsin Employer Survey*, and seven out of 10 explain that they have been negatively affected by high health care costs. This has reduced profitability for businesses, but also resulted in higher costs for customers, reduced compensation for employees and less investment in new equipment.

A core driver of higher costs is the amount businesses and insurers are paying to hospitals. A recent report from RAND, a nonprofit and nonpartisan research organization, explains that Wisconsin has the fifth highest hospital costs in the country.<sup>5</sup>



Source: WMC Wisconsin Employer Survey - Summer 2024

Since hospitals account for 38 percent of health care spending by the privately insured population, hospital costs are a key contributor to rising health care costs in Wisconsin.

According to the study, Wisconsin hospitals charge 318 percent of Medicare rates — well above the national average and the highest in the Midwest. Hospitals have long argued that these higher costs correlate with better quality care, however the same report found no statistical significance between cost and quality. In fact, many hospitals with higher quality ratings had lower costs.

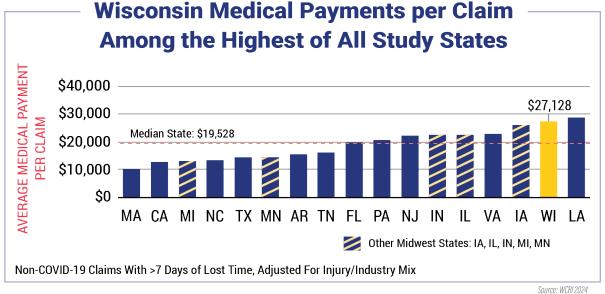


Source: 2024 RAND Report

RAND further explains that a contributing factor to the higher costs is an increasing number of hospital mergers. which results in diminished competition. For example, Advocate Health's relative cost to Medicare increased from 409 percent in 2020 to 530 percent in 2022 — the same year that Advocate Aurora and Atrium Health merged to become Advocate Health.6

Employers not only face some of the highest hospital costs in the country, but Wisconsin's workers compensation medical payments per claim are also among the highest in the country. Among 36 states that were included in a study by the Workers Compensation Research Institute (WCRI), Wisconsin had the second highest costs.<sup>7</sup>

The WCRI data suggests that the average medical payment per claim for workers compensation in Wisconsin is \$27,128 - or 39 percent higher than the median state cost of 19,528.





The report also explains that prices paid for nonhospital professional services in 2023 were the highest of all the states included in the report — more than two-and-a-half times the median cost. A reason for higher costs in Wisconsin is because the state does not have a medical fee schedule for workers compensation. Of the six states in the study that do not have a medical fee schedule, all six are in the top seven states for the cost of nonhospital professional services.

Another reason for higher workers compensation costs in Wisconsin is that proportionally more claims had services in a hospital setting versus the other study states. WCRI explains that, "this is due to hospital ownership. In some states outpatient services tend to be billed by hospitals and hospital-affiliated clinics (including Wisconsin), while in other states they tend to be billed by nonhospital facilities (for instance, private physician practices and single/multispecialty clinics)."



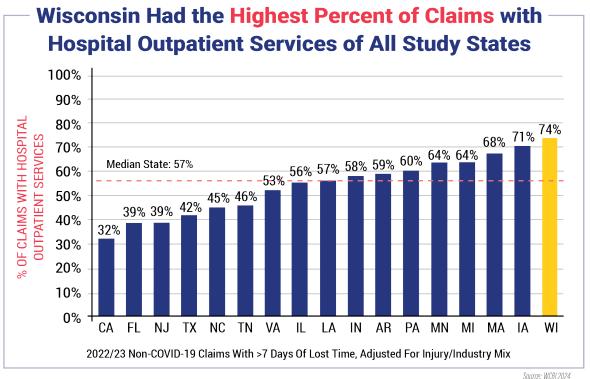
Source: WCRI 2024

The report further stated that "consolidations of hospitals and hospitals buying physicians' practices likely contributed to these results."

The data affirms this statement. Of the study states, Wisconsin had the highest percentage of claims with hospital outpatient services and Wisconsin routinely had the highest amount of hospital-based outpatient services for differing claims. All of this is leading to higher costs for employers and patients.

Unfortunately, this problem has created a crisis for Wisconsin businesses.

According to the *Wisconsin Employer Survey*,<sup>8</sup> nearly half of businesses in the state saw health care costs go up by 10 percent or more in the last year — exponentially exceeding the rate of inflation. The same survey explains that Wisconsin is an outlier on cost, as well. Fifty-four percent of businesses pay more for health care in Wisconsin versus others states they operate in.



### **Higher-than-Typical Percent of Claims with Hospital Outpatient Services Likely Reflects Hospital-Affiliated Clinics in Wisconsin**

Percentage	HOSPITAL OUTPATIENT SERVICES			
of Claims By Type of Service	Wisconsin	Median State	Wisconsin Compared With Median	
Evaluation & Management	23%	12%	HIGHER	
Supplies & Equipment	24%	13%	HIGHER	
Facility Services	25%	18%	HIGHEST	
Major Radiology	32%	18%	HIGHEST	
Physical Medicine	32%	13%	HIGHEST	
Minor Radiology	45%	32%	2 <sup>ND</sup> HIGHEST	

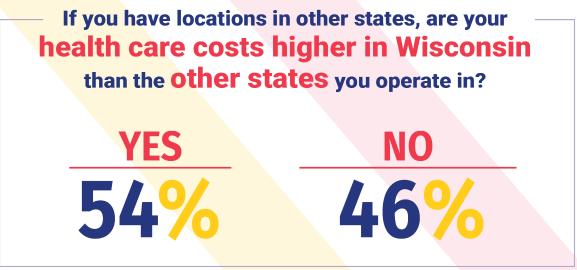
2022/23 Non-COVID-19 Claims With >7 Days Of Lost Time, Adjusted For Injury/Industry Mix

Source: WCRI 2024



If Wisconsin does not solve this problem soon, it could have dire consequences for the state's economy. Not only have business leaders said higher health care prices have resulted in higher costs for their customers and reduced compensation for employees, but also one in 10 have considered relocating or expanding outside of Wisconsin entirely because of high health care costs.

To remain competitive and fuel economic growth, business leaders and policymakers should put the issue of high health care costs on the front burner.



Source: WMC Wisconsin Employer Survey - Summer 2024

### **BEST PRACTICES & POLICIES THAT WORK**

### **Price Transparency & Access to Data**

In every other industry, when you make a purchase, you know the cost of the good or service before making that purchase. However, that is not the case when it comes to health care. In fact, even after receiving a service at a clinic or hospital, the likelihood is that one patient's cost could differ dramatically from another patient's cost, even if it is for the same exact procedure.

This secrecy puts employers and patients at a disadvantage when trying to make an informed decision about medical care. Often, it can lead to unnecessary and unexpected costs for both parties. The uncertainty is one of the driving reasons why three-quarters of Americans are worried about affording unexpected medical bills and the cost of other medical services.

Fortunately, federal hospital prices transparency rules were enacted in 2021 with the aim to lower health care costs across the board. These rules, promulgated under President Trump and continued under President Biden, require hospitals to provide cost information for certain services to patients and the public.

However, the federal requirements have not been as successful as advocates had hoped. A recent review found that only 30 percent of sampled Wisconsin hospitals are fully compliant with the federal rules. In fact, the Department of Health and Human Services (HHS) Office of Inspector General (OIG) recently audited hospitals nationwide on their compliance with the hospital price transparency regulations. The OIG found that 46 percent of hospitals did not comply with the rule to make information available to the public. Due to the lack of compliance, several states including Colorado and Texas have taken bipartisan action to codify price transparency requirements into state law.

Colorado — led by Democrat Gov. Jared Polis — recently enacted a state law that strengthens hospital price transparency rules and provides for greater accountability. The new law requires hospitals to publicly post gross charges, discounted cash prices, de-identified minimum and maximum rates and payer-specific negotiated rates. Colorado even took the additional step to create a free Hospital Price Transparency Tool which displays 2.5 million commercially negotiated prices for over 5,000 procedures at 82 Colorado hospitals. This allows employers, consumers, and others to use data for extensive cost comparisons, identify cash prices and analyze variations in hospital-posted prices.<sup>11</sup>

"[Hospitals] are charging 18 different paying parties 18 different rates for the exact same procedure," Gov. Polis said at a July 2024 event hosted by the American Legislative Exchange Council. 12 "Until now, that has all been in a lock box in the CFO's office...we opened up that lock box to make sure that we have one of the first and one of the strongest hospital pricing transparency laws."

A similar push is being made in Wisconsin. A bill introduced during the previous legislative session would require hospitals to make a machine-readable digital file publicly available that contains a list of standard charges for certain items and services provided by the hospital, as well a consumer-friendly list of "standard charges" for certain shoppable services. These "standard charges" must always be available to the public and must be displayed in a prominent location on the home page of the hospital's website, according to the legislation.

### "Employer and patient advocates have argued that additional hospital price transparency would increase competition and lower costs."

While the bill aligns Wisconsin with the federal rules, it also provides additional accountability for non-compliant hospitals and provides a process for them to go through a corrective action plan. If corrections are not made, monetary penalties can be imposed.

Employer and patient advocates have argued that additional hospital price transparency would increase competition and lower costs.

Another aspect of transparency is the establishment of an all-payers claims database (APCD). This is the norm in most states, and it provides employers and insurers with transparent data to drive higher quality, lower cost care.

Wisconsin established the Wisconsin Health Information Organization (WHIO) as an APCD in 2008. It was founded to improve quality and cost efficiency of health care in Wisconsin. Currently WHIO data is submitted by some insurance companies, Wisconsin agencies and self-funded employers. <sup>13</sup> Unfortunately, in 2016, state funding to WHIO was discontinued. This has made it difficult for WHIO to innovate and provide accessible data to consumers.

Nationwide, 25 states have mandatory APCDs or are in implementation of a mandatory APCD. Virginia has a APCD called Virginia Health Information. Recently, this database was utilized by the employer community to identify low value care that was being administered in Virginia health systems. This data was utilized to create a dashboard to identify different types of low value care and where it was being administered. The APCD was able to reveal more than \$586 million in unnecessary and potentially harmful services throughout Virginia. 15

Restoring state funding for WHIO, along with a requirement to disclose health cost information to this database, would allow Wisconsin's APCD to create employer and consumer dashboards to allow easily digestible information on pricing and quality.



### **Case Study: Gamber-Johnson**

There may be no better evidence that transparency lowers costs than looking at companies already using the data they have at their disposal. Gamber-Johnson is a leading supplier of rugged mounting systems that safely secure mobile communication systems, computers and other electronic equipment in fleet vehicles, public safety vehicles, forklifts and other mobility applications. The company of just over 300 employees, based in Stevens Point, prioritizes the use of data to lower health care costs for team members while improving overall care.

Gamber-Johnson has improved its health care experience for employees in a variety of ways. First, it has created a three-tier system to help find the best care for its workers. Second, it uses data to ensure that care is being provided at an affordable price.

The three-tier system for employee health insurance includes two options that are quite familiar: In-Network and Out-of-Network. These serve as the second and third tiers of the program and act as traditional health insurance would. However, the first tier is where Gamber-Johnson has provided employees with an innovative approach to care.

Through preferred providers — mostly independent clinics and other partners not associated with a hospital system — employees can receive care for no cost in most cases. Additionally, for some types of care or procedures, employees can receive incentives for utilizing the preferred providers because the costs are so much lower than traditional clinics and the hospital systems.

## Independent Providers Offer Major Savings Over Hospital Systems

Care Provided	Independent Provider Cost	Hospital System Cost	Employer Savings
MRI	\$650.00	\$3,590.00	\$2,940.00
CT	\$395.00	\$2,532.00	\$2,137.00
Knee Arthroscopy	\$4,940.00	\$12,000.97	\$7,060.97
Total Knee Arthroplasty (Knee Replacement)	\$19,990.00	\$39,313.98	\$19,323.98
Shoulder Arthroscopy	\$7,490.00	\$16,988.86	\$9,498.86
Colonoscopy & EGD	\$2,599.00	\$7,837.79	\$5,238.79
Open Inguinal Hernia Repair, Bilateral	\$6,410.00	\$22,702.93	\$16,292.93
Tonsillectomy	\$4,260.00	\$7,897.17	\$3,637.17

One example of this is for a hernia surgery. In a hospital setting in Stevens Point, this could cost between \$20,000 and \$25,000. However, by using an independent preferred provider in a different market, they can lower the cost by potentially \$15,000 or more. In this case, Gamber-Johnson would reimburse an employee for mileage and lodging expenses and potentially provide a cash incentive. Of note, while the surgery may take place in another part of Wisconsin, all aftercare is provided by local providers to ensure employees have a positive and simple experience.

By utilizing data from its own claims and other information provided by partners, Gamber-Johnson has been able to review common procedures and find providers that offer quality care at more affordable rates. Examples include saving nearly \$3,000 on MRIs, \$7,000 on a knee arthroscopy and over \$9,000 on a shoulder arthroscopy.

The team at Gamber-Johnson says disruption to the current healthcare system is necessary to improve care and bring down costs. That is why they have worked to educate their employees about how the system works. It has helped to encourage them

to be proactive when it comes to care. By being more aware of costs and how it can impact them as individuals, the Gamber-Johnson team has been able to significantly lower its overall health care costs while ensuring employees are well taken care of.

All of this is because they have been strategic about utilizing the data they have access to. Without it, they would not be able to provide the same level of care for their workers or find the same level of cost savings.

### **On-Site Clinics & Direct Primary Care**

The use of data has driven several businesses — of all sizes — to look at innovative ways to provide care to its employees. Instead of the typical insurance program that aligns with a local hospital or clinic system, many employers are finding a variety of providers who can serve employees.

On-site clinics are becoming quite popular. These clinics can be operated by a third party or run as a part of the company they are serving, but all are aimed at bringing health care closer to the employees and lowering costs. In some cases, these clinics focus on preventive care to help avoid injuries on the job or other ailments. Others provide a full-service clinic to both employees and their families.

An added bonus of on-site clinics is the rapid response that is possible for small injuries incurred on the job. If someone gets something in their eye or has a small cut, it can be treated immediately before additional problems like infection can occur—saving money in the long run and helping improve quality of life for workers.

While on-site clinics have been quite popular with larger companies, many smaller companies are starting to team up with each other to offer their employees the same type of care afforded elsewhere. Even though it can seem cost-prohibitive, the truth is that many independent providers are able to lower costs significantly compared to what a hospital or clinic system may offer.

Near-site options, including direct primary care, are also becoming more popular and available throughout Wisconsin. These types of providers can cover a large majority of health care needs — from annual checkups to fully customized care solutions — for employers of almost any size. Most offer subscription-based models to match the size of the employer and end up being more cost effective than utilizing the larger hospital and clinic systems.

### **Case Study: Paper Machinery Corporation**

Similar to Gamber-Johnson, Paper Machinery Corporation (PMC) has made an effort to improve care for its employees while reducing costs for everyone. The roughly 200-person company based in Milwaukee is self-insured and manufactures machines that form paperboard cups, containers and custom packaging.

PMC offers employees an innovative solution to care, as well. The plan offers an independent provider network that provides medical services that range from MRIs to full hip replacements and everything in between, all at no cost to their employees. Compared to local hospital systems, the savings are so significant that PMC can cover the cost of the procedures without the employee incurring any out of pocket cost for co-pays, deductibles or co-insurance.

The company has also taken advantage of a direct primary care provider. Employees can choose to use a traditional insurance option with a monthly premium, copays and out-of-pocket maximums, or they can choose the direct primary care provider and independent network with essentially no cost. The company pays a monthly subscription for each of their employees that utilize this option.

The near-site direct primary care provider has not only saved on costs, but it also spends more time with employees to fully understand their health care needs. Their direct primary care provider not only provides primary care, but also is able to do lab work and dispense commonly prescribed generic prescriptions onsite. PMC fully admits it is a big change for employees who choose it, but so far it has been highly rated and has allowed employees to see that making informed health care decisions will help save money for all employees long term.

### **WORKERS COMPENSATION MEDICAL FEE SCHEDULE**

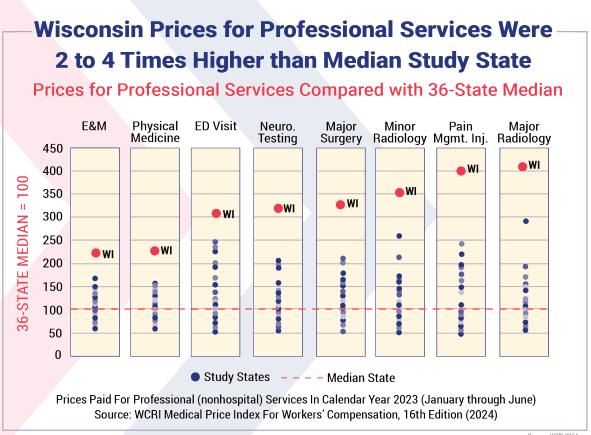
The workers compensation system in Wisconsin has been described by many as a major competitive disadvantage because of high medical costs and no opportunity for employers to rein them in. Under the current system, the government regulates almost every aspect of workers compensation.

The government requires employers to carry workers compensation insurance. Government sets the insurance prices. Government sets a statutory benefit level for the value of lost or injured limbs. Government sets a value on weekly benefit payments to injured workers. And the government prohibits employers from utilizing preferred doctor networks like they do with regular health insurance.

The one thing that is not regulated by government? The price paid to health care providers — mainly hospitals. Essentially, employers are stuck paying whatever the providers decide the cost is, and routinely, it could be far more than what the same procedure would cost outside of the workers compensation system.

In Wisconsin, the biggest cost driver in the workers compensation system is health care. Health care consumes 61 percent of total cost in the system – the highest in the country. This is compared to 24.8 percent in North Carolina – one of the lowest in the country – and is significantly higher than all of Wisconsin's Midwest neighbors. <sup>16</sup>

In addition to health care being a larger portion of the total cost, the actual cost is much higher. As was highlighted earlier in this report, Wisconsin has the second highest medical payments per claim among industrialized states studied by WCRI. And, the state has the highest prices paid for professional services associated with workers compensation.



Source: WCRI 2024

According to WCRI, some professional services paid through the workers compensation system can be two to four times the median study state. For example, major radiology procedures are typically four times more expensive and emergency department visits are roughly three times more expensive. These exponentially higher costs are a key contributor to why Wisconsin is so uncompetitive on this issue.

The reason health care costs are so much higher in Wisconsin than any other state is because almost every other state imposes limits on what providers can charge to treat injured workers. Most states — 45 to be exact — have strict fee schedules tied to Medicare reimbursement rates. These are increased by a factor to ensure they are comparable to what private health insurers pay for the same services. Legislation to require the state to develop a medical fee schedule to keep costs below the national average has been proposed in numerous sessions, but has never been enacted.

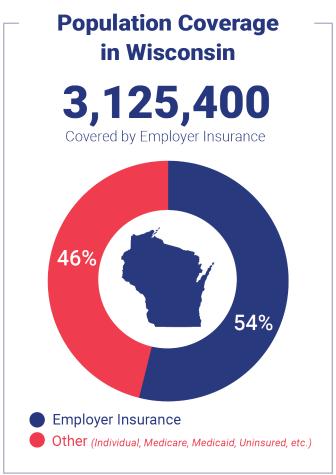
The data is clear, however, states with medical fee schedules have lower workers compensation costs, which is probably why 45 other states have implemented such a system.

#### CONCLUSION

There is no doubt that Wisconsin has high health care costs, and employers and employees are feeling the brunt of it. Since more than half of those insured in Wisconsin are covered by an employer plan, it is critical that policymakers and others focus on ways to improve affordability for Wisconsin's businesses and their workers.

As this report lays out, there are numerous policy solutions that could help bring down costs for Wisconsinites while ensuring quality care. Further transparency in pricing would give patients better information when making medical decisions and a medical fee schedule could help to rein in costs for workers compensation claims. Beyond public policy, businesses can work to replicate innovative ideas that others are already trying.

In order for Wisconsin to stay competitive through 2035 and beyond, the cost of health care must remain at the forefront of the conversation. This report aims to start that conversation and hopefully become a catalyst to spur new and inventive ideas with policymakers and business leaders alike.



Source: AHIP.org 2024



### SOURCE MATERIAL

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