

## Self-assessment of company health plan – 10 quick questions

### 1. Percent increase in health benefit spend/premium compared to national average

Year	Employer Contribution/Employee		Per Employee YOY Increase	
	National Avg	Yours	National Avg	Yours
2019	\$10,254	_____	9.3%	_____
2020	\$10,991	_____	7.2%	_____
2021	\$11,347	_____	3.2%	_____

Did you have a larger or smaller increase compared to national average?

Multiply the dollar difference per employee x total employees in plan. How did you do?

### 2. Health benefit plan performance analytics, detail claims review

- Do you have a detailed analysis of past years claims done? Yes No
- Do you use it identify areas where significant dollars can be saved? Yes No
- Do you compared you spending in key areas to national benchmarks? Yes No
- Do you have month claims compared with your KPI's? Yes No

### 3. Do you have a strategy to have someone personally involved with and guiding employees on their health plan, showing management concern and getting employee support for wellness and cost savings programs?

Yes No

### 4. Pharmacy Benefits Management. Pharmacy costs are the lowest hanging fruit in saving money for your health plan with a potential saving of \$800 per employee annually.

- Do you know how much your Pharmacy Benefits Manager is profiting from you claims? [Hint: most of PBM profit comes from undisclosed intermediary fees and kept discounts] Yes No
- Do you use specialist pharmacy managers for:
  - i. specialty RX,
  - ii. pricing optimization managers with Canadian/European drug procurement,
  - iii. formulary optimization managers.

Yes No

### 5. A primary care physician provides continuity, health guidance, and early detection avoiding large future health care expenditures. How many of your employees have a primary care physician and get an annual checkup?

Have PCP \_\_\_\_\_ Do not have PCP \_\_\_\_\_

6. The sickest 6 percent of an employer's population represents 47 percent of the total allowed medical and pharmacy spending. Do you have a strategy for monitoring and managing these super users many of whom have chronic care problems like diabetes and cardio metabolic problems?

Yes No

7. Direct Contracting is negotiating a service with a healthcare provider with a set price either for future use or for a one-time procedure. This is common with expensive surgeries, maternity bundles, urgent care, etc. Do you or do you have some that will set up direct contracts?

Yes No

8. Imaging and medical tests are expensive, have high out of pocket costs for employees and are frequently avoided when they are necessary. This causes bad diagnosis and high cost follow up. There are local service networks that are convenient, inexpensive and can part of your health plan. Do you have a local imaging and testing strategy?

Yes No

9. Doctors' opinions vary greatly. Observational studies have shown that a second opinion disagreed with the first one in a substantial proportion of patients. When the costs are high and the patient welfare is at greater risk, there are second opinion services that provide reliable second opinions. Do you have a second opinion strategy?

Yes No

10. A superior health benefit plan is a powerful a tool for employee retention, recruiting, and productivity. Do you know what health plans are being offered by companies that compete for your employees and if your health benefit plan is better than your competitors are offering"

Yes No

Yes answers \_\_\_\_\_ out of 12 total yes/no questions in this evaluation \_\_\_\_\_ %

"Companies do not get better by chance; they get better by change."

Henry E. Juskiewicz

Founder of CareMoat