

Engaging Consumers with Health Care Price Information

Wednesday, December 4, 2013

1:00p.m. – 2:30p.m. ET / 12:00p.m. – 1:30p.m. CT / 11:00a.m. – 12:30p.m. MT / 10:00a.m. – 11:30a.m. PT

Voice Dial-in Information:

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Objectives:

- Hear an overview of the state of the science in presenting price information to consumers, sharing specific examples of the most innovative approaches to reporting this information and the expected response from consumers to these different approaches.
- Learn about health care price estimators used by several large payers and the benefits and potential pitfalls for CVE members interested in using these types of estimators.
- Understand the tiered network design and the implications for CVEs that either have tiered network designs in their markets, or on the way.
- Hear what an evaluation of a reference pricing program in California reveals about the effectiveness of reference pricing as a CVE strategy that some view as a variant of tiered networks.
- Gain key 'take aways' to bear in mind when considering these various approaches.

Agenda

1:00 p.m. – 1:05 p.m.	Welcome and Opening Remarks Larry Bartlett, PhD Webinar Facilitator Jan De La Mare Deputy Project Officer, AHRQ CVE Learning Network
1:05 p.m. – 1:20 p.m.	Context: Presenting Price Information to Consumers, Innovative Approaches to Reporting this Information, and Expected Response from Consumers Meredith Rosenthal, PhD Harvard School of Public Health
1:20 p.m. – 1:25 p.m.	CVE Discussion: Share Your Questions and Comments Open Forum All
1:25 p.m. – 1:40 p.m.	Health Care Price Estimators and Benefits and Potential Pitfalls for CVEs Ted von Glahn, MS Independent consultant, formerly with the Pacific Business Group on Health
1:40 p.m. – 1:45 p.m.	CVE Discussion: Share Your Questions and Comments Open Forum All
1:45 p.m. – 2:00 p.m.	Tiered Network Designs: Implications for CVEs

Anna Sinaiko, PhD
Harvard School of Public Health

2:00 p.m. – 2:05 p.m.

CVE Discussion: Share Your Questions and Comments
Open Forum
All

2:05 p.m. – 2:20 p.m.

Evaluation of California Reference Pricing Program and What it Reveals about Effectiveness of Reference Pricing as CVE Strategy
Timothy Brown, PhD
UC Berkeley School of Public Health

2:20 p.m. – 2:25 p.m.

CVE Discussion: Share Your Questions and Comments
Open Forum
All

2:25 p.m. – 2:30 p.m.

Participants to Complete 2-minute Online Survey/Close

Speaker Biographies

Meredith Rosenthal

Meredith B. Rosenthal, Ph.D. is Professor of Health Economics and Policy and Associated Dean for Diversity at the Harvard School of Public Health. Dr. Rosenthal received her Ph.D. in health policy at Harvard University in 1998. Her research examines the design and impact of market-oriented health policy mechanisms, with a particular focus on the use of financial incentives to alter consumer and provider behavior. Dr. Rosenthal's work has been published in the *New England Journal of Medicine*, the *Journal of the American Medical Association*, *Health Affairs*, and numerous other peer-reviewed journals. Based on her work, Dr. Rosenthal has been called to testify before the U.S. Congress and the California and Massachusetts legislatures. In 2006, Dr. Rosenthal was awarded an Alfred P. Sloan Industry Studies Fellowship in recognition of her field-based research on physician incentives. Dr. Rosenthal is member of the Massachusetts Public Health Council and Board Chair of Massachusetts Health Quality Partners, a multi-stakeholder quality improvement organization.

Ted von Glahn

Ted von Glahn, a consultant to Covered California, the health exchange, has worked extensively in the development of healthcare consumer decision support and performance measurement and reporting services. His recent work includes leading a research effort to develop decision support rules to guide consumer health plan choices in the state and federal marketplaces. He has evaluated health plan and vendor consumer decision support tools to shop for medical care services and providers. In 2003, he launched a health plan choice decision support application that has been used by a number of large purchasers to assist enrollees in choosing a plan. von Glahn's healthcare performance information work includes leading programs to collect, score and use physician, medical group and health plan performance information. This past year, he led the performance information methods development for the federal marketplace. He also led the work to launch California's multi-payer health information system -- the California Healthcare Performance Information System. For a decade, he was responsible for the annual California Patient Experience with Doctor Survey project to measure patient experiences with their physician and medical group. His current advisory roles include technical expert panel activities to support the development of performance measurement and consumer information services. Prior to his role at PBGH, Mr. von Glahn was Senior Vice President of Business Applications at FACCT, the Foundation for Accountability in Portland, OR. There he directed the development of health care information tools for consumer decision-making used by business coalitions, the federal Office of Personnel Management and several states for their employees. His work experience also includes his role as chief operating officer for Providence Health Plans and director of the CareMark Health Plan, both in Portland. He was a healthcare management consultant at William M. Mercer, Inc. in Chicago and worked as a legislative aide in the U.S. Congress. Mr. von Glahn received his bachelor's degree from Connecticut College and his master's degree in health policy and management from Harvard University's School of Public Health.

Anna Sinaiko

Anna D. Sinaiko, PhD, is a research scientist in the Department of Health Policy and Management at the Harvard School of Public Health. Dr. Sinaiko received her PhD degree in health policy with a concentration in economics from Harvard University in 2010. Her research examines consumer decision-making in health care settings, with a focus on the use of information and financial incentives to alter consumer behavior. Specific empirical projects include an examination of consumer response to tiered physician networks, of consumer experience in the Massachusetts health insurance exchange, and of consumer choice of private Medicare plans.

Timothy Brown

Timothy Brown, PhD, is the Associate Director for Research at the Berkeley Center for Health Technology (BCHT) and an Adjunct Assistant Professor of Health Economics at the University of California, Berkeley. He

received his doctorate in Health Services and Policy Analysis, with a specialization in health economics, from the University of California at Berkeley. At Berkeley, Dr. Brown teaches analytic methods for health policy and management focusing on econometrics, experimental and quasi-experimental design, surveys, and meta-analysis, and has published over 30 papers in scientific and policy journals. Dr. Brown's current research at BCHT focuses on reference pricing, hospital efficiency, and high-cost drugs and medical devices. Dr. Brown manages the research staff and day-to-day research work at the BCHT.