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Webinar: Narrow Network Impact on Premium Rates and ACA Marketplace
– a HealthcareWebSummit Event, 2PM Eastern, Tuesday, January 10th, 2017

New Research Findings:
Narrow Network Impact on Premium Rates and ACA Marketplace

 **Tuesday, January 10th, 2017**
2:00 - 3:00 p.m. Eastern (11:00 a.m. to 12:00 p.m. Pacific)

Register for \$195
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- Transition processes associated with clinical care, revenue and operational business models
- The changing provider business environment of "doing more with less"

- ▶ Managed care pricing environment & methodologies associated with degrees of risk sharing arrangements
- ▶ Process involved in building managed care pricing strategy at service line level and across aligned networks
- ▶ Impact of physician integration on different risk models and payer contracting strategy
- ▶ Core competency requirements for a value-based enterprises

Faculty:
Daniel Polsky, Ph.D.
Executive Director
Leonard Davis Institute of Health Economics



Registration

 **New ACA Marketplace Research Findings**
Narrow Network Impact on Premium Rates
Tuesday - 1/10/17 - 2pm Eastern

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Individual Registration Fee: \$195. Post-Event Materials: \$45 for attendees;
\$260 for non-attendees after the event.

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[Corporate Site licensing](#) also available (see inside for details) **Use the form on the back page to fax or mail your registration** or call 209.577.4888

Online: To register or get detailed information on the web, go to:

<http://www.healthwebsummit.com/narrow011017.htm>

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Overview

Narrow provider network strategies have been increasingly deployed by health plans seeking delivery systems with enhanced potential to provide optimum value based care with respect to cost and quality. Many provider sponsors have pursued development or evolution of narrow network capabilities in response to Medicare ACO and commercial ACO and value based demand.

An expectation exists that health plan narrow network offerings should yield a relatively lower premium cost. One of the flash points for narrow network offerings has been in the ACA public marketplace offerings, where health plans have embraced narrow networks in order to reduce their potential cost exposure and offer a more competitive premium in the price sensitive individual market. The introduction of health insurance Marketplaces under the Affordable Care Act has been associated with growth of these restricted provider networks. The question now at hand is to what extent have narrow networks delivered on lower premiums in the marketplace to date?

Previously, studies that have investigated the empirical relationship between narrow networks and premiums have used only a single state. A new study - funded by the Robert Wood Johnson Foundation "Measuring Provider Network Characteristics of Health Insurance Exchange," principal investigator, Daniel Polsky - examined data from all silver plans offered in the 2014 health insurance exchanges in the fifty states and the District of Columbia to estimate the association between the breadth of a provider network and plan premiums. The study found that within a market, for plans of otherwise equivalent design and controlling for issuer-specific pricing strategy, a plan with an extra-small network had a monthly premium that was 6.7 percent less expensive than that of a plan with a large network.

Please join us Tuesday January 10th, 2017 at 2 PM Eastern as Daniel Polsky, Executive Director of the Leonard Davis Institute of Health Economics, explains detailed research findings relating to the impact and implications of narrow networks on health plans premiums with respect to the public marketplaces in the HealthcareWebSummit event: *Narrow Network Impact on Premium Rates and ACA Marketplace: New Research Findings*.

Learning Objectives

After attending this webinar, attendees will be able to:

1. Review detailed research findings from the study: "Measuring Provider Network Characteristics of Health Insurance Exchange."
2. Explore estimated health insurance Marketplace premium changes for increases in network size.
3. Examine the groupings developed in categorizing the size and scope of provider networks.
4. Understand the importance of determining network size at the plan-rating area level, and how this data was derived.
5. Identify the associated models incorporated into the study, and their relevance in yielding the study findings.
6. Ascertain applicable limitations of the study in addressing related narrow network issues.
7. Consider public policy and marketplace implications of narrow network offering and pricing.
8. Plus engage in interactive learning through online question submission, attendee feedback and opportunity for follow up questions, and networking with attendees, faculty and other professionals through dedicated LinkedIn group.

Who Should Attend

Interested attendees would include:

- C-Suite Executives
- Healthcare Innovation, Transformation and Reform Executives
- Actuarial Executives and Staff
- Analytics Executives and Staff
- Individual Product Executives and Staff
- Legal, Regulatory and Policy Executives and Staff
- Provider Relations and Contracting Executives and Staff
- Provider Network Operations Executives and Staff
- Finance and Revenue Cycle Executives and Staff
- Managed Care Executives and Staff
- Planning and Strategic Executives and Staff
- Business Intelligence Staff
- Other Interested Parties

Attendees would represent organizations including:

- Health Plans
- Health Insurance Exchanges
- Hospitals and Health Systems
- Medical Groups
- Accountable Care Organizations
- Provider Networks
- Other Healthcare Providers
- Government
- Pharmaceutical Organizations
- Solutions Providers
- Associations, Institutes and Research Organizations
- Media
- Other Interested Organizations

Faculty



Daniel Polsky, Ph.D.
Executive Director
Leonard Davis Institute of
Health Economics

Daniel Polsky, Ph.D., Executive Director of the Leonard Davis Institute of Health Economics, is a Professor of Medicine in the Perelman School of Medicine and the Robert D. Eilers Professor of Health Care Management in the Wharton School.

He currently serves on the Congressional Budget Office's Panel of Health Advisers and the Institute of Medicine Board on Population Health and Public Health Practice. He was the Senior Economist on health issues at the President's Council of Economic Advisers in 2007-08. His research was awarded AcademyHealth's Article of the Year in 2014.

He received a Ph.D. in Economics from the University of Pennsylvania in May 1996 and a Master of Public Policy from the University of Michigan in 1989. His areas of interest include health care access, workforce, and economic evaluation of medical and behavioral health interventions. He is a coauthor of the book "Economic Evaluation in Clinical Trials" published by Oxford University Press.

Corporate Pricing, Terms and Conditions

Individual vs. Corporate Site License Pricing

- Individual registrations cover a single phone line.
- Multiple persons may listen via speaker phone for the individual registration fee.
- Each individual receives a unique dial-in ID that is not re-useable.
- Corporate pricing is available when registrations are desired for more than one phone line.

Corporate Site License Attendee Registrations

- Organizations individually register all participants for web access and e-mail delivery unless arranged otherwise with MCOL, but corporate pricing will apply based on the number of employees registered

Eligibility

- Corporate pricing is only available to single organizations, or parent organizations and their affiliates.
- Professional Associations or other groups of separate organizations may not combine for corporate pricing.

Pricing Schedule

Events Priced at \$195 Individually: Site License pricing for one of any \$195 individual events is based upon the number of covered phone lines, according to the following table

Price Schedule

Covered Phone Lines /Logins	Total Price
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10-29	\$2,005.00
30-74	\$4,425.00
75-174	\$9,230.00
175-249	\$12,525.00
250+	Call for quote

Equivalent Price per employee and total savings compared to individual \$195.00 price*:

Covered Phone Lines /Logins	Price per Line	Total Savings
Under 10	\$174.00	\$605.00
10-29	\$100.25	\$3,895.00
30-74	\$88.50	\$10,325.00
75-174	\$73.84	\$27,645.00
175-249	\$59.64	\$49,425.00

* based upon the midpoint of employees in each range