

San Francisco Health Service System Health Service Board

Rates & Benefits

Best Doctors Expert Opinion Recommendation

May 9, 2019

Prepared by:
Health Solutions

Aon
Empower Results®

Recommendation Summary

- The San Francisco Health Service System (SFHSS) has offered expert medical case review (e.g., “expert medical opinion”) services through Best Doctors since January 1, 2017 for all members enrolled in SFHSS medical plans—via a three-year service agreement ending on December 31, 2019.
- After careful consideration of the services rendered under this agreement and an examination of the services the SFHSS health plans provide to members that seek expert medical opinions, the **recommendation today to the Health Service Board (HSB) is that SFHSS not proceed with third-party expert medical opinion services into the 2020 plan year.**

Recommendation Summary

- It is recommended that the focus be placed on increasing knowledge and promotion of how members can seek expert medical opinions through each health plan.
 - The information that follows provides that information for each SFHSS health plan.
 - This recommendation leads to non-renewal of the Best Doctors service after expiration of the present agreement as of December 31, 2019.
 - This recommendation includes a provision to include evaluation of expert opinion services in future vendor marketing activities.

Contributing Factor—Low Best Doctors Utilization

A contributing factor in today's recommendation is low utilization of the Best Doctors expert medical opinion service during each of the past two years (2017 and 2018).

Less than 0.5% of SFHSS membership has engaged the Best Doctors service each year since its inception for SFHSS on January 1, 2017 (number of members utilizing—format below: 2017 data / 2018 data).

Type of Service Utilized by Members	Active Members	Retiree Members	Total Members
InterConsultation	43 / 75	99 / 119	142 / 194
Find Best Doctor	97 / 119	294 / 233	391 / 352
Ask the Expert	2 / 1	2 / 2	4 / 3
eSummary	3 / 1	7 / 1	10 / 3
Total Combined Services	145 / 196	402 / 355	547 / 552

Though Best Doctors has proposed a reduction of per employee/retiree per month fees for 2019 (see Appendix for details), there is an underlying question of whether paying for a third party to deliver expert medical opinion services that are NOT integrated with the health care provider or plan is prudent, relative to what the health plans are equipped to deliver for members.

Promoting Expert Medical Opinions Through Health Plans

- Each SFHSS health plan has mechanisms in place to allow members to seek expert opinions for recommended courses of treatment.
- However, there is recognition that awareness of these processes can be increased by improved communications about each plan's approach, including posting these procedures on the sfhss.org website.
- Following is an overview of how members can seek expert medical opinions within the framework of their health plans.

Promoting Expert Medical Opinions Through Health Plans

	UHC City Plan	UHC MA PPO	BSC	Kaiser
How does a member obtain a 2nd opinion?	Members can contact any doctor without notifying primary provider as long as the second opinion provider is in-network and can bill UHC	Members must request through their primary care physician (PCP) otherwise it is not covered	Member must request through PCP, specialist, or Member Services, otherwise it is not covered.	
What is the member cost-share?	Deductible + Coinsurance	\$15 specialist copay	\$25 office visit copay	\$20 office visit copay
Does the member need pre-authorization?	No	No	Yes	Yes
Can a member go outside of the network?	Yes*	Yes*	No	Yes, when a medically necessary service is not available within KP (after prior authorization).

* May incur an out of network charge

Promoting Expert Medical Opinions Through Health Plans

	UHC City Plan	UHC MA PPO	BSC	Kaiser
How do these claims get processed?	Claims are auto-adjudicated and process like any other claim	These claims are not identified with a specific billing code and will adjudicate based on the billing code(s) that are submitted	Claims are auto-adjudicated as an office visit	Claims for services within Kaiser are auto-adjudicated; Kaiser will pay for authorized services outside Kaiser, even if they do not auto-adjudicate.
Available Third-Party External Review Services	Can work with a client's external third-party review service partner	BSC does not refer members of delegated model HMO's to external services as care is to be driven by the physician	Kaiser does not provide external third party review services, but members are welcome to discuss external third party reviews with their physician.	

Promoting Expert Medical Opinions Through Health Plans

- At this time, we ask that representation from each SFHSS health plan comment on their mechanisms that allow members to seek expert opinions for recommended courses of treatment.
 - Blue Shield of California (for Access+ and Trio)
 - Kaiser Permanente (for Kaiser non-Medicare HMO and KPSA Medicare plan)
 - UnitedHealthcare (for non-Medicare PPO and UHC Medicare Advantage PPO)

Recommended Action

Recommendation for Expert Medical Opinion Services

- The recommendation is that the HSB approve allowing SFHSS's existing service agreement with Best Doctors to expire as scheduled on December 31, 2019—with discontinuation of third-party expert medical opinion services for the 2020 plan year.

This recommendation comes with the understanding that SFHSS and its health plans will increase awareness of how members can seek expert medical opinions within the framework of their health plans, including posting information on the sfhss.org website.

Additionally, evaluation of expert opinion services will be evaluated as part of any future vendor marketing activities.

Appendix—2017-2020 Best Doctors Fees

The current fee is \$1.15 per employee/retiree per month (PEPM)—this represents an estimated 2019 spend of \$968,000. This reduced from the \$1.40 PEPM level in each of 2017 and 2018.

Best Doctors has proposed a \$0.99 PEPM fee in 2020 if SFHSS were to retain Best Doctors—or a fee of \$1.15 PEPM if Best Doctors were to be retained for UHC and BSC plan members only.

	Historical PEPM Rates			CY2020 Proposed Rates	
	CY2017	CY 2018	CY 2019	All Plans	UHC/BSC Only
PEPM Rates	\$1.40	\$1.40	\$1.15	\$0.99	\$1.15
Total Employees/Retirees	67,550	68,976	70,134	70,134	31,572
Annual Premium	\$1,134,840	\$1,158,797	\$967,849	\$833,192	\$435,694