

Trends In Today's World

Cycling, Yoga and More

In order to retain talent and entice workers slow to return to the office, some large financial firms are pulling out all the stops with amazing amenities. JPMorgan Chase is one example, incorporating indoor cycling rooms, yoga and meditation rooms, huge outdoor areas and a high-tech food hall in its new Park Avenue office tower scheduled to open in 2025. Chase was the first major U.S. bank to mandate a return to their offices when Covid-19 restrictions ended.

Helping Nurses Recharge

Even before the pandemic, studies warned about fatigue and burnout in the nursing profession. The last two years have enhanced this. In response, children's hospitals and others have designated spaces where nurses can cry, reflect or regroup after a particularly stressful event. Some spaces feature pastel paint colors, artwork, massage chairs and calming music. After asking staff how her hospital could help, one director of nursing even gave up her office to create a space where nurses could gather to unwind prior to serving their next patient.

continued on back page

Is Your Health Plan Testing Positive?



Much of this newsletter is dedicated to the pressures employers and health plans face as the work world continues to reset. While delivering robust health benefits is never easy, rising healthcare prices following the Covid-19 pandemic and record inflation are creating added pressures. Rather than searching for a magic bullet, our experience shows that focusing on the basics can keep healthcare more affordable for your organization and your employees.

Understand cost drivers – Cardiovascular disease, often connected to hypertension or obesity, musculoskeletal injuries to backs and knees and gastrointestinal conditions such as Crohn's and colitis are a few of today's most costly health concerns. Age and lifestyle are critical factors, but the availability and cost of treatment can vary widely, not only by geographic location but among providers within the same community. When chronic conditions and potential high dollar claims are involved, 90 Degree Benefits market

knowledge goes a long way in helping clients access high-quality, cost efficient treatment options, including Centers of Excellence.

Strive for affordability – Ongoing claims analysis and plan design expertise are extremely important as you look for ways to make out-of-pocket costs more manageable for your employees. Adding low or no cost coverage for certain benefits is something to consider along with increased levels of virtual care. We recommend that our clients consider virtual care solutions for both medical and behavioral health – a trend that could very well lower costs for all involved.

Communicate and Educate – In addition to recognizing that education must be a year-round practice, using a variety of channels to explain health benefits is very important. A digital hub where plan members can find all their health benefits information can be a great option, giving members easy access to network providers, coverage for all products and services including prescription drugs and hopefully, price transparency tools. The key is to make it as easy as possible for employees and dependents to find the information they need to understand and utilize their benefits.

Do the fundamentals well and your health plan will not only be viewed as a significant part of employee compensation, but also as a positive contribution to company culture and work-life balance – qualities that are valued highly in today's work world.



Health Plan Disclosure

While additional disclosure requirements will take effect in 2023, the deadline for disclosing health plan and prescription drug plan information has arrived. In accordance with Transparency in Coverage (TIC) rules, CMS was charged with enforcing applicable requirements beginning on July 1st. Most group health plans are now required to disclose pricing in machine readable formats (MRF) for at least 500 covered items and services between the plan and in-network providers.

These disclosures must include any negotiated rates, fee schedule rates used to determine cost-sharing or derived rates, whichever applies to the particular plan. For rates that are percentage-based, calculated dollar amounts must be provided as well.

For charges relating to out-of-network providers, allowed amounts or billed charges for covered items or services during the 90-day period starting 180 days prior to the MRF publication date need to be provided. If out-of-network provider data for a specific item or service is not available for at least 20 claims, it should be omitted. Plan sponsors need to update machine readable formats at least monthly and will be subject to enforcement actions including the need to take corrective actions and civil penalties of up to \$100 per day. Personalized pricing information will need to be made available for all covered items and services beginning in January, 2023.

Will your health plan ever meet expectations?

While everyone agrees that the cost of healthcare is too high and likely to go higher, employers and employees disagree on who should pay the larger share of future costs. This should come as no surprise after years of cost shifting. And as the 2022 Report on Health conducted by laboratory and biometric screening provider Quest Diagnostics points out, the divide has widened since Covid-19 sparked the “great resignation.” Today, with many more job openings than unemployed workers, employers are doing everything possible to retain and attract good people by strengthening their health plan.

No time for the status quo

Chronic conditions are a growing concern for employers and members alike. Treatment costs continue to rise and navigating the system has become increasingly difficult for patients. 90 Degree Benefits offer innovative solutions including high performance networks, reference based pricing, population health management and various forms of patient advocacy to help employees get the high-quality care they need. The point is that self-funding solutions from 90 Degree Benefits give your organization the flexibility to build on what is working and take steps that can ease the pressure everyone is feeling. Take a little time and listen to your members – listening is always a positive first step.

HSA, HDHP Limits to Rise

In response to continued inflation, the IRS will increase limits for contributions to health savings accounts and high deductible health plans in 2023. HSA contributions for individuals will increase by \$200 to \$3,850 with the limit for families going up \$400 to \$7,750. Qualifying minimum deductibles for HDHPs will increase to \$1,500 for individual deductibles and \$3,000 for family deductibles.

Maximum out-of-pocket limits for HDHPs will increase significantly to \$7,500 for individuals and \$15,000 for families. Finally, HSA catch-up contributions for adults 55 and older will remain at the \$1,000 maximum while the expected-benefit HRA contribution limit will increase by \$150 to \$1,950. These limits will guide employers as they begin to plan for open enrollment in the fall.

Avoiding Surprise Claims

A survey conducted in April by America's Health Insurance Plans (AHIP) and the Blue Cross Blue Shield Association projected that more than two million surprise billing claims may have been prevented by the No Surprises Act in just the first two months.

After surveying 31 commercial and group health plans covering more than 115 million lives, researchers used pre-pandemic U.S. Census Bureau data to determine that 600,000 claims would have resulted in surprise bills involving emergency services by out-of-network providers and non-emergency products and services offered by out-of-network providers at in-network facilities. While it will take time to determine the actual impact of the law that went into effect last December, researchers believe the number of surprise bills avoided could reach 12 million this year.

Faster Prior Authorizations

Starting next June, health plans in Michigan will need to act on non-urgent prior authorization requests within 9 calendar days and within 72 hours for urgent requests. According to the American Medical Association, several other states have already acted on similar reforms which have long been sought by many physicians.

Self-funded health plans, exempt from such state laws by ERISA, have incorporated prior authorization requirements for many years. While some physicians say such provisions often delay patient care while doing little to avoid wasteful spending, our experience shows that the process protects the patient and often contributes to the highest quality patient outcomes.

Making Feelings Matter



Golfers may remember the 2008 Ryder Cup when U.S. captain Paul Azinger created “pods” consisting of 3 golfers and an assistant captain who served as a mentor to get to know each player inside and out. The purpose was to pair players with others having a complementary personality and style. The result was unrivaled team unity and a winning performance by all.

While business is a long-term endeavor, taking a genuine interest in co-worker’s lives and discovering what really makes them tick can make a positive difference, especially when many of us are still recovering from the stress of the pandemic. Some managers caution that putting feelings first can be counter productive as there will always be those who prefer to leave their emotions at home. But overall, appreciating co-workers’ thoughts and ideas and understanding their needs can do a lot for each individual and lead to a happier, more productive staff as well.

New Patients Welcome

According to researchers at the Kaiser Family Foundation, the vast majority of non-pediatric, office-based physicians continue to accept new patients. The lowest rate of physicians accepting new patients was found among psychiatrists with just 60% accepting new Medicare patients and 59% accepting new patients with private insurance. While networks may restrict or limit access for certain patients, it appears that primary care physicians and many specialists may be more accessible than otherwise thought.



Revisiting Hospital Cost Transparency

It’s been 18 months since hospital price transparency rules took effect and while they were a step in the right direction, there hasn’t been much meaningful progress. About half of hospitals have not complied with the federal rule and while warnings have been issued for noncompliance, monetary penalty enforcement only recently began.

Even though enforcing monetary penalties has started, it will take more than fines to drive price transparency forward in a meaningful way. Because true hospital cost transparency really involves a shift from fee for service to value-based medicine, active participation by primary care physicians is important. People who have had a serious health issue involving surgery or a hospital stay know how helpful a primary care physician can be when you need help deciding how and where to access care.

With price information at the foundation of this movement, the quality of the information hospitals provide is critical. Whether it takes a carrot or stick to drive hospital participation, progress will only be meaningful if the price of services is made available in a format consumers can easily understand.

Paid Family Leave Evolves



With literally hundreds of different state and local leave laws in place throughout the country, it is extremely difficult to know how to proceed, especially with the need to maintain a family-friendly culture intensifying. Experts say it is likely that a federal paid leave law will eventually surface. When it does, integrating it with existing state and local laws will make coordination even more difficult for employers, especially those with a multi-state presence.

While the purpose of paid family leave laws is to enable an employer to support their employees in a time of crisis or during a major life event, managing the benefit should not carry such a huge burden. Hopefully, as family leave laws continue to evolve, so will the technology available to integrate applicable laws with policies in ways that will not only ease regulatory compliance but also make paid family leave provide for the well-being of all involved.

Did You Know? New Ideas for Healthy Consumers

Coffee Can Solve Problems



While most coffee drinkers know that one cup can increase focus, a 2020 double-blind study appearing in "Consciousness and Cognition" found that the caffeine equivalent of one cup of coffee improves problem-solving abilities. Researchers were surprised to find that a cup made problem solving by insight faster but did little to aid step-by-step analysis. Overall, while a 12-ounce cup of coffee may not make you more creative, research showed that it can help you and your team work more efficiently and effectively.

The End of Daylight Saving Time

It's not a done deal yet but if the Sunshine Protection Act, a bill passed by the U.S. Senate in March becomes law, daylight saving time would become permanent starting in November of 2023. This would mean that the time set in spring of 2023 would be here to stay and most Americans would have more daylight all year long.

Workforce consultants say that having two time changes can have serious mental and physical effects on people. When our internal clocks change, our sleep routines can be upset and a loss of focus throughout the day is not uncommon. There's no way to gauge how this bill will move through the house given the number of more serious matters needing attention. The change continues to become permanent in more states as 19 have passed legislation or resolutions in just the past four years.

Protecting Your Skin

According to new research, the two most common types of skin cancer are on the rise. And while these two forms of carcinoma were most commonly found on the head and neck, they seem to be moving to the arms, legs and mid-section. Wide-brimmed hats and clothing made with SPF fabric are important and of course, sunscreen with SPF 30 or higher is critical. Lotion with micronized zinc oxide is recommended and believe it or not, dermatologists say a shot glass full should be applied every few hours.

Give extra attention to lips, scalp, the tips of your ears and the back of your legs as these spots are easy to neglect. Vegetables and fruits can also lower the risk of sun damage so bright colored produce like peppers, squash, tomatoes and kale may be as good for your skin as they are for your heart and weight.



Note: This newsletter is not intended as a substitute for personal medical or employee benefits advice. Please consult your physician before making decisions that may impact your personal health. Talk to your benefits administrator before implementing strategies that may impact your organization's employee benefit objectives.



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Let's Talk