PERSONAL INJURY PROTECTION:

A Review of the Medical Billing Process Under the KY PIP System

Hospital Data Update

Kentucky Department of Insurance

November 27, 2018

Aggregate Data

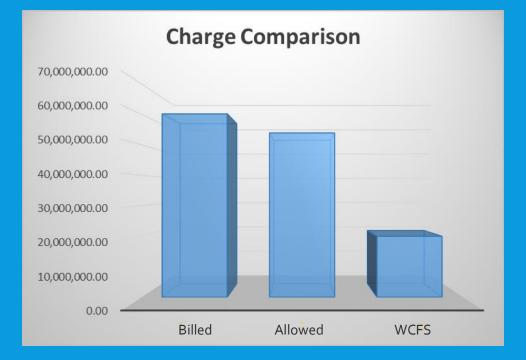
- 3 Insurance Companies Reported
- All transactions marked as "hospital" internally or the provider is a hospital paid in 2017
- 98,962 transactions in total
 - Billed Amount: \$78,214,568
 - Allowed Amount: \$54,846,225
- Reductions
 - 48% of total transactions paid billed charges.
 - Substantial amount of \$0.00 paid:
 - Exhaustion of PIP benefits; and
 - Redirection of expenses at individual's request

Comparison

- In order to compare with WCFS, hospital data had to be refined:
 - Eliminate all hospitals not included in the WCFS cost to charge ratio.
 - Eliminate all hospitals with a zero percent WCFS ratio.
 - Eliminate all hospitals that could not be matched or confirmed.
 - Eliminate all claims with allowed amount of zero.
- WCFS
 - Unlike non-hospital, the WCFS uses a "cost to charge" ratio to reimburse hospitals.
 - Hospitals submit entire bills, and receive a pre-determined percentage of billed charges.
 - Percentages range from ≈10% to 60%
 - Average percent is 35.66%
 - Example:
 - Kings Daughters Medical Center receives 33.58% of billed charges.

Data Refinement

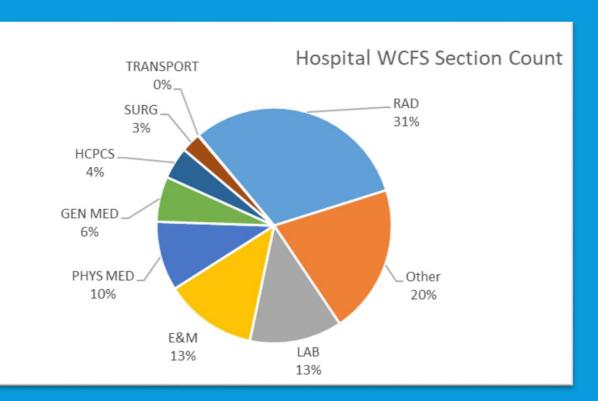
- 98,962 claims reduced to 78,411 claims
 - Total Billed Charges: \$60,114,298
 - Total Allowed Charges: \$53,856,081
 - Total Under WCFS: \$19,973,808
- Averages
 - WCFS Amount to Billed Amount: 33%
 - WCFS Amount to Allowed Amount: 37%



Commonly Billed Procedures

Comparison of the most commonly billed hospital procedures

TYPE	Count
RAD	24,520
Other	16,020
LAB	9,987
E&M	9,953
PHYS MED	7,446
GEN MED	4,878
HCPCS	3,429
SURG	2,117
TRANSPORT	61



Conclusion

- Hospital re-pricing does occur, but much less frequently than non-hospital bills.
- Most hospital bills are paid using billed charges or subject to exhaustion of PIP benefits or re-direction.
- The usage of the WCFS cost to charge ratio would result in substantial reduction of amount paid to hospitals.
- DOI re-processing indicates the average amounts coincide with the overall cost to charge ratio average.
- WCFS would result in higher reimbursements than other fee schedules (i.e., Medicaid).