

2014 Annual Issues Symposium

Medicare Set-Asides and Workers Compensation

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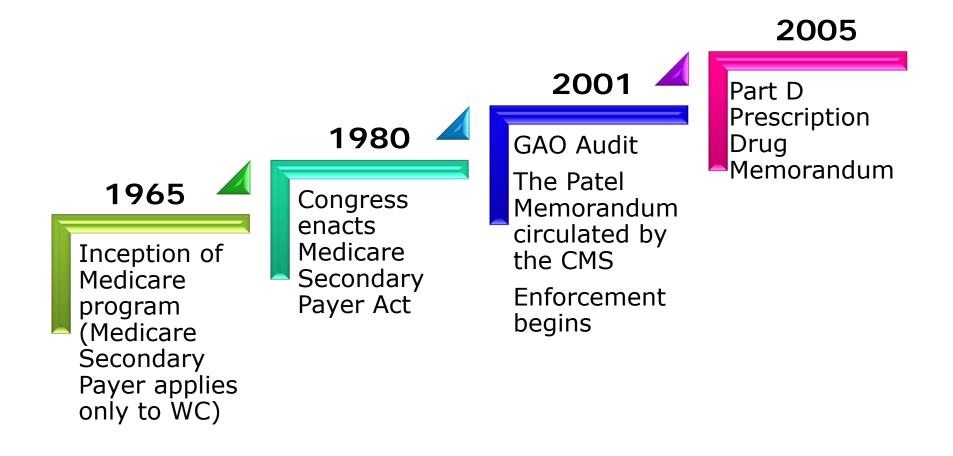


Background

- Medicare is a secondary payer for medical services for work-related injuries
- A Medicare Set-Aside (MSA) is a fund established to pay medical costs to treat a work-related injury that might otherwise be paid by Medicare
- For settlements meeting certain thresholds, the Centers for Medicare & Medicaid Services (CMS) will review the proposed MSA
- An MSA can be self-administered or professionally administered
- In FY 2011, CMS approved \$1.1 billion of workers compensation (WC) MSAs*



Medicare Is Secondary Payer to Workers Compensation





CMS's MSA Process Changes

The substantive memoranda issued by CMS are best classified as interpretive rule-making efforts. With an interpretive rule, there is no requirement to comply with the public notice and comment procedures outlined in the Administrative Procedures Act.

2013

2012



The SMART Act*

2006



Increased dollar threshold for Medicare beneficiaries from \$10K to \$25K 2009

CMS
prescription
drug update
and pricing
methodology

New provider to review and approve MSAs

Medicare Advantage Plans can recover

*The Strengthening Medicare and Repaying Taxpayers (SMART) Act simplifies processes for reimbursing CMS for conditional payments made by Medicare



Illustrative MSA Process Scenarios

Carrier contemplates settlement

CMS response

Makes offer, including future medical (may use a vendor to help develop offer)

Claimant tentatively accepts settlement

amount

• Includes state court approval, when applicable

MSA submission to CMS

- Includes provision for reimbursement of any conditional payments
- Carrier or representative (vendor, attorney) submits to CMS

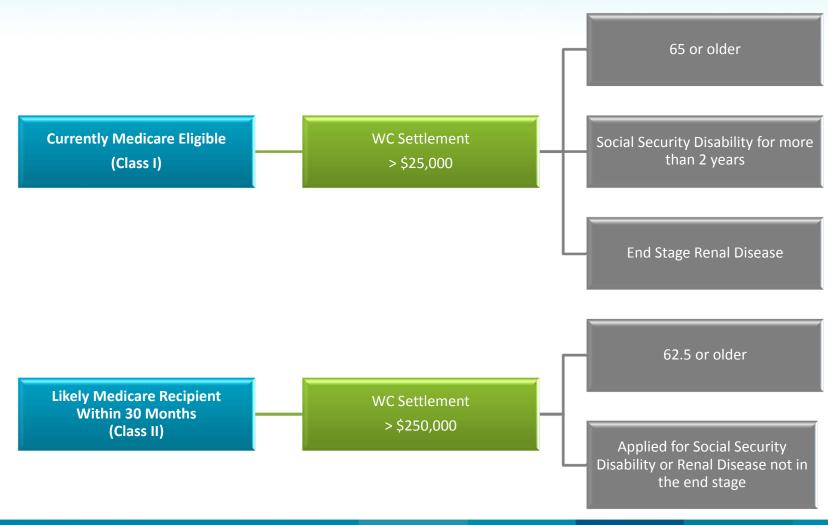
Contract with vendor to complete MSA

Some possible outcomes

- Acceptance of CMS MSA amount might result in settlement
- CMS's demand for greater medical might result in medical not being settled
- Initial settlement agreement may expire due to delays

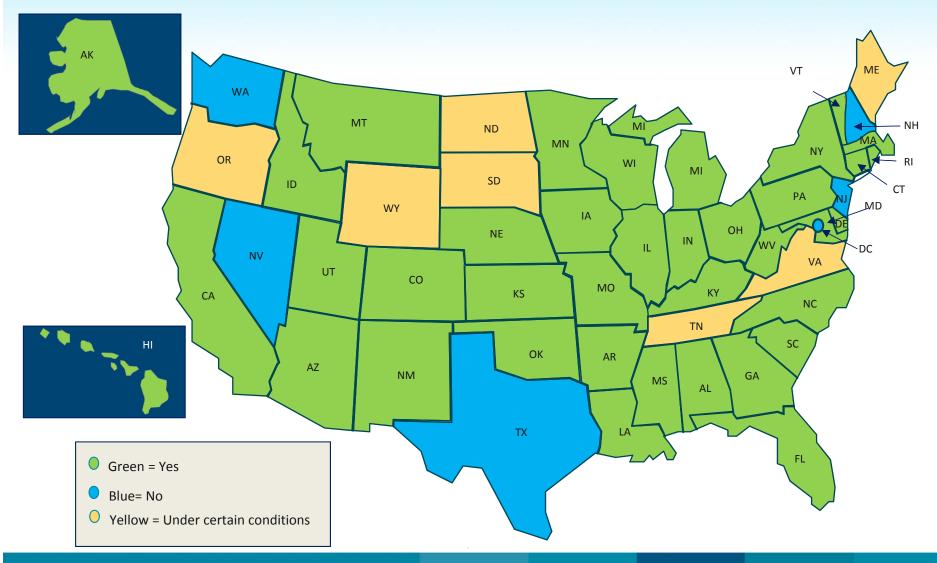


CMS Workers Compensation Review Thresholds





Most States Allow Settlement of WC Medical





Medicare Set-Aside Sample Data Provided by Gould & Lamb

- Gould & Lamb is an MSA service provider
- The sample provided to NCCI contains approximately 2,200 completed MSAs between January 2010 and November 2013
 - For CMS submissions between September 2009 and November 2013
- Sample includes
 - Proposed Total Settlement
 - Proposed MSA
 - Final MSA
- Proposed and Final MSAs include
 - Medicare Parts A and B—hospital, office visits, and related services
 - Medicare Part D—prescription drugs



NCCI Medical Data Call

- The NCCI Medical Data Call (MDC) captures transaction-level detail on medical bills processed on or after July 1, 2010, including dates of service, charges, payments, procedure codes, and diagnosis codes
- Carriers are not required to report transactions for services provided more than 30 years after the date of the injury
- NCCI collects the MDC for the 35 jurisdictions for which NCCI provides ratemaking services and for 8 additional states on behalf of the independent state rating organizations*



Key Findings

- Most MSAs are for claimants who are Medicare entitled at the time of settlement
 - Most of these claimants are Medicare entitled because they have been on Social Security Disability for at least two years
- MSAs make up about 40% of the share of total proposed settlement
 - Half of this 40% is due to prescription drugs
- After a period of dramatic lengthening, CMS's MSA processing time has recently declined
- The ratio of CMS-approved MSA amounts to submitted MSA amounts has declined over time
- The differences between proposed and approved MSA settlements are largely due to prescription drugs





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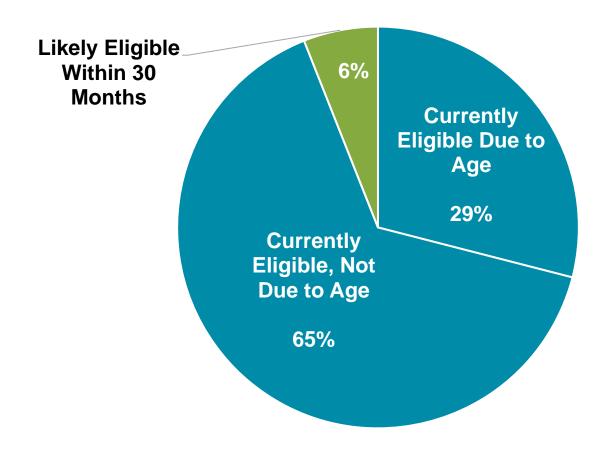
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MSA Demographics



Almost All MSAs Are for Claimants Who Are Medicare Entitled at the Time of Settlement

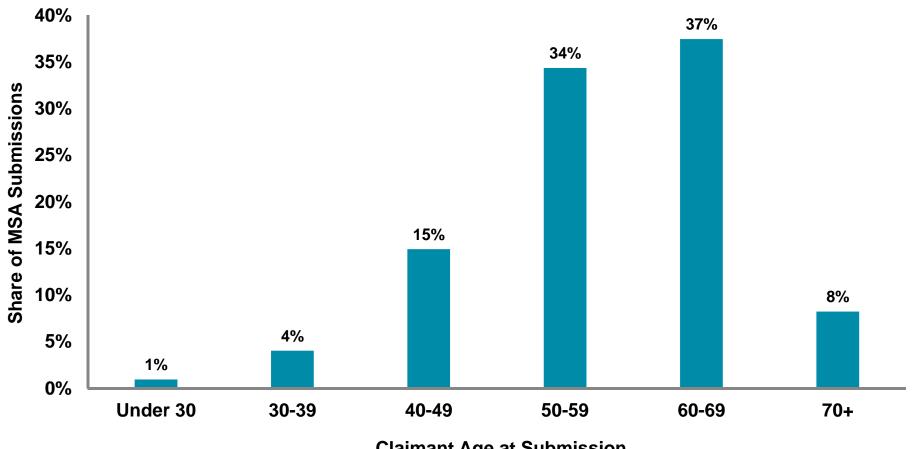
Distribution of MSA Submissions by Medicare Status





The Majority of MSAs Reviewed by CMS Are for Claimants Between Ages 50 and 70

Distribution of Claimant Age at CMS Submission

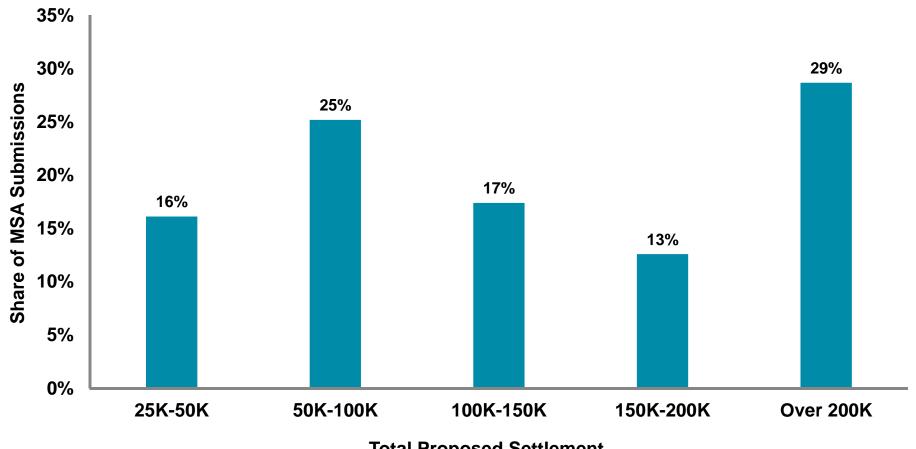


Claimant Age at Submission



More Than Half of MSAs Reviewed by CMS **Are for Settlements Over \$100K**

Distribution of Submissions by Total Proposed Settlement Size

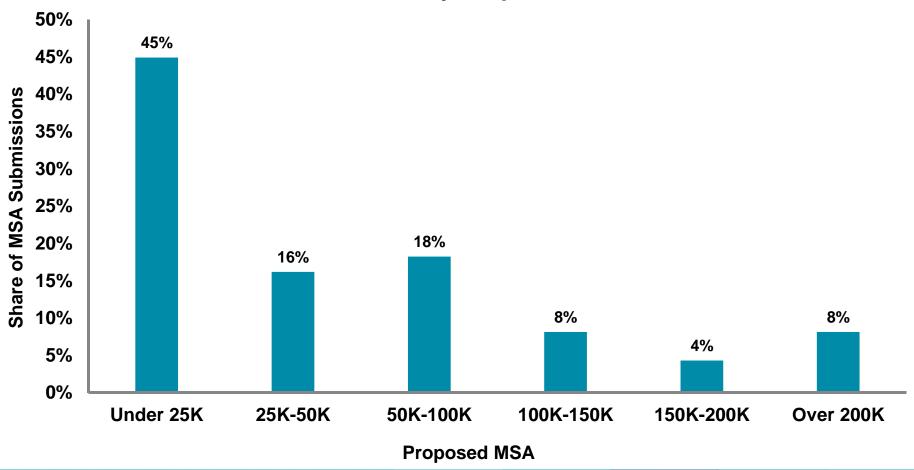


Total Proposed Settlement



Almost Half of MSAs Reviewed by CMS Have MSA Amounts Under \$25K

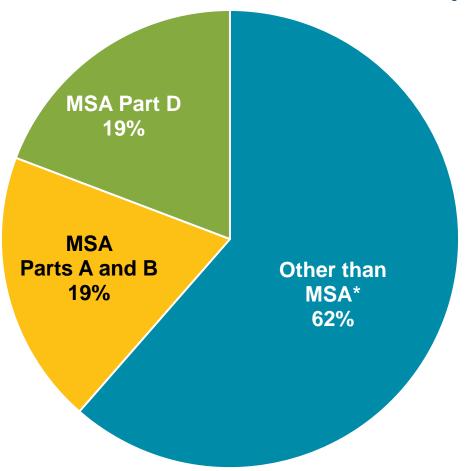
Distribution of Submissions by Proposed MSA Settlement Size





MSAs Are About 40% of Proposed Total Settlement Costs

Half of Proposed MSA Costs Are for Prescription Drugs

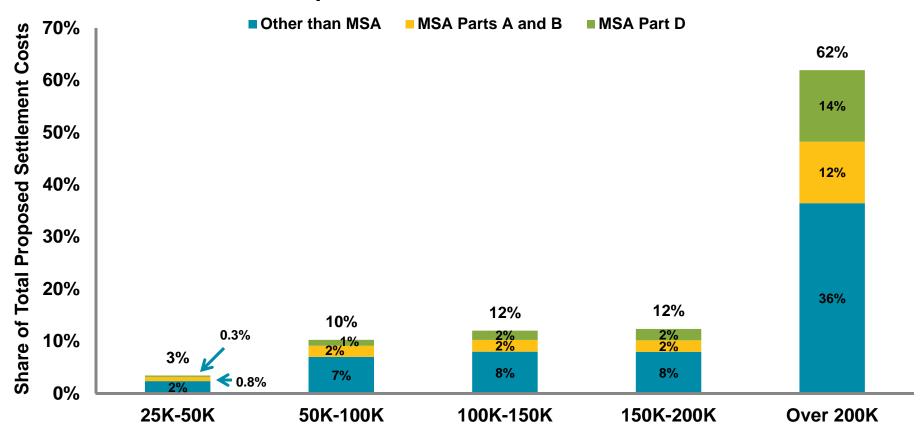


^{*&}quot;Other than MSA" includes indemnity, medical not covered by Medicare, and other expenses such as attorney fees Source: Gould & Lamb's Medicare Set-Aside Sample Data—MSAs completed between January 2010 and November 2013 for submissions to CMS between September 2009 and November 2013



Prescription Drugs Are Half of MSAs Across Most Proposed Settlement Sizes

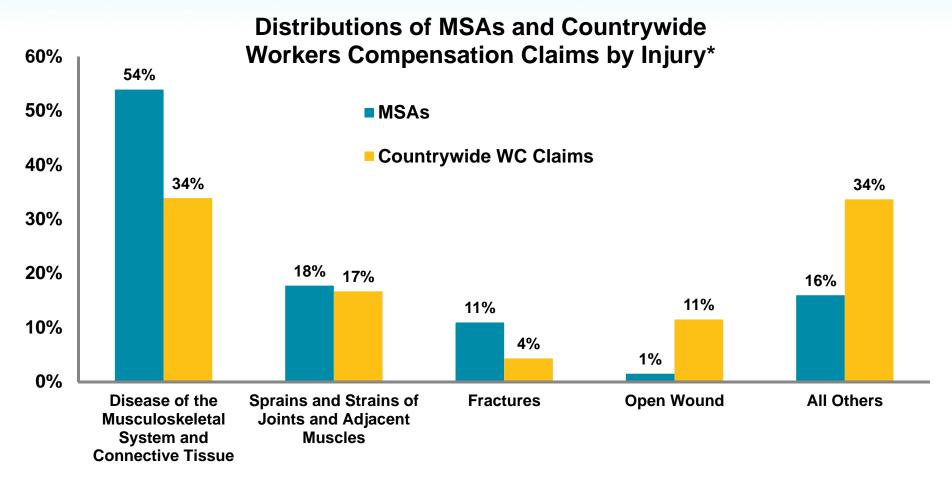
Total Proposed Settlement Cost Distribution



Total Proposed Settlement



Half of MSAs Reviewed by CMS Involve Musculoskeletal Impairments



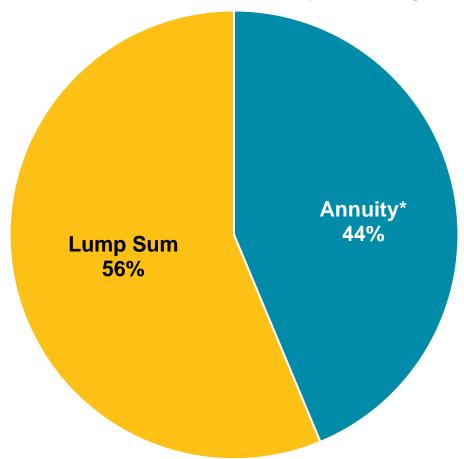
Injury—Based on Primary ICD9 Diagnosis Code

*Comparison restricted to states in common between NCCI's Medical Call Data and the MSA sample Sources: NCCI Medical Data Call and Gould & Lamb's Medicare Set-Aside Sample Data—MSAs completed between January 2010 and November 2013 for submissions to CMS between September 2009 and November 2013



Most MSA Settlements Are Paid as a Lump Sum

Distribution of MSA Submissions by Funding Mechanism



^{*}Settlement includes at least one annuity, in addition to any lump sum payments
Source: Gould & Lamb's Medicare Set-Aside Sample Data—MSAs completed between January 2010 and November 2013
for submissions to CMS between September 2009 and November 2013



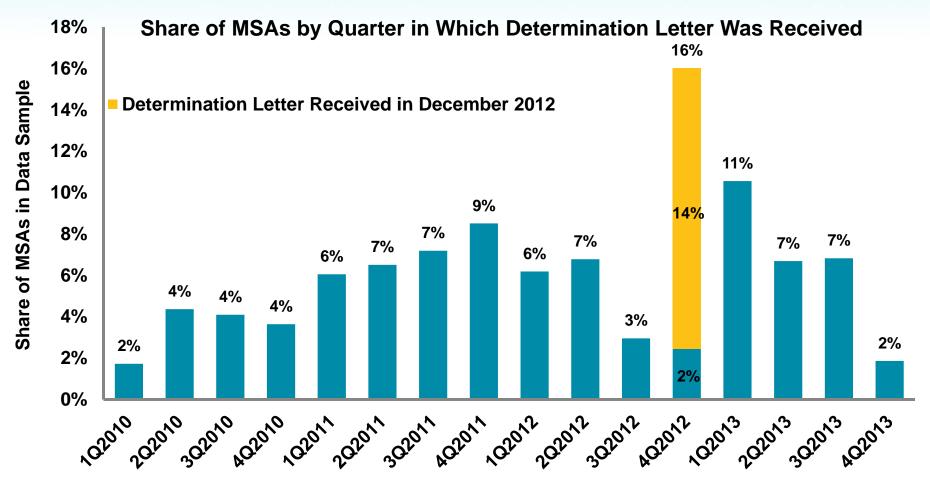


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Recent MSA Trends



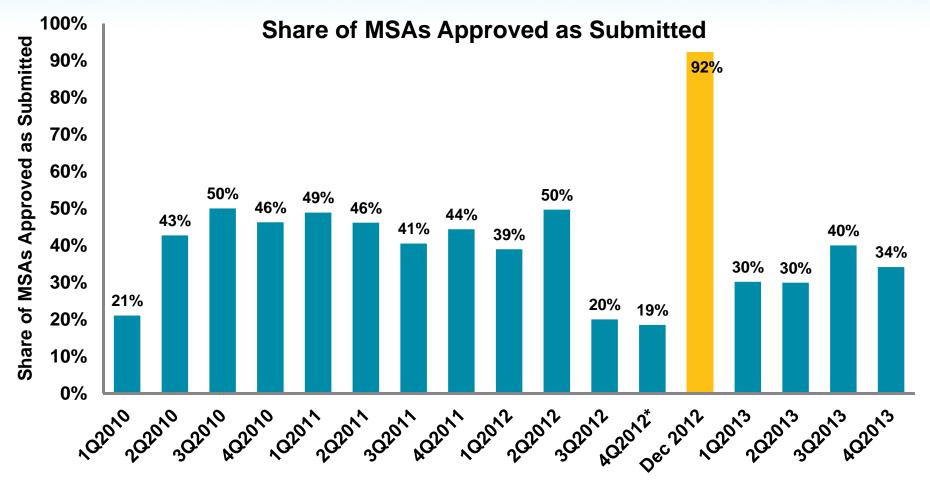
CMS Letters of Determination Surged in December 2012



Quarter in Which Determination Letter Was Received



More Than 90% of MSAs Completed During December 2012 Were Approved as Submitted

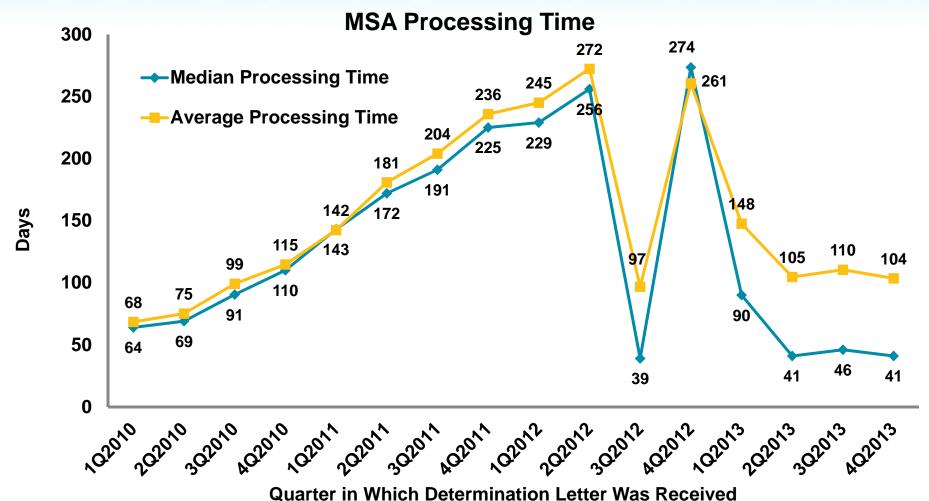


Quarter in Which Determination Letter Was Received

*Excluding December 2012; 4Q2012 approved as submitted share including December 2012 is 84% Source: Gould & Lamb's Medicare Set-Aside Sample Data—MSAs completed between January 2010 and November 2013 for submissions to CMS between September 2009 and November 2013



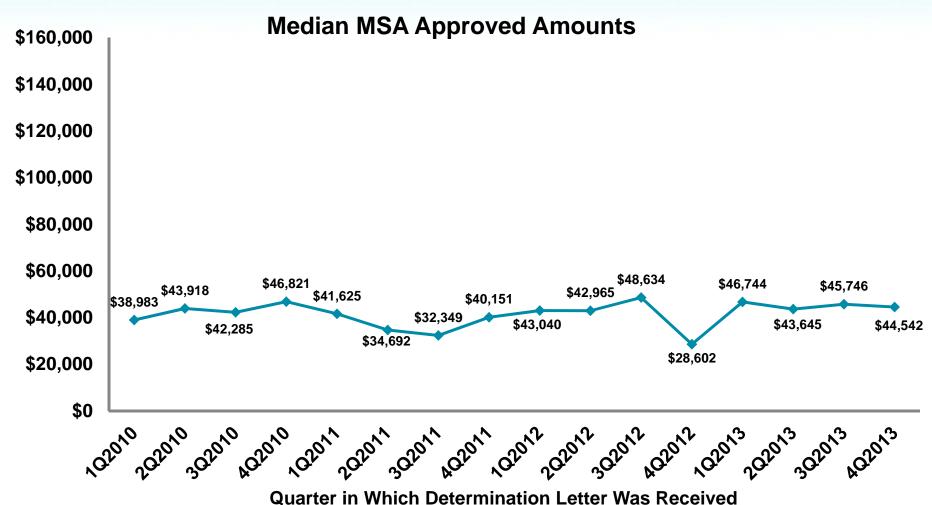
After a Period of Dramatic Lengthening, CMS's MSA Processing Time Has Recently Dropped



Processing time is days from submission of MSA to CMS to receipt of determination letter Source: Gould & Lamb's Medicare Set-Aside Sample Data—MSAs completed between January 2010 and November 2013 for submissions to CMS between September 2009 and November 2013

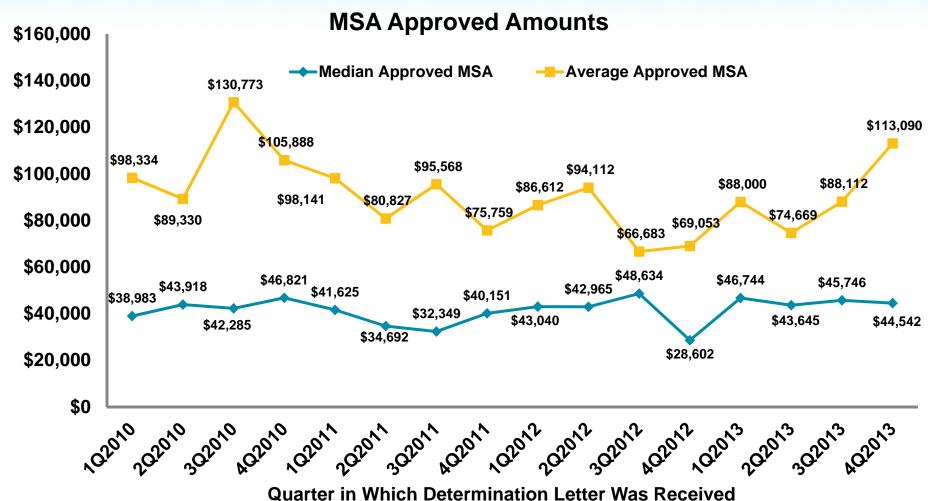


Median MSA Approved Amounts Have Been Stable Since 2010



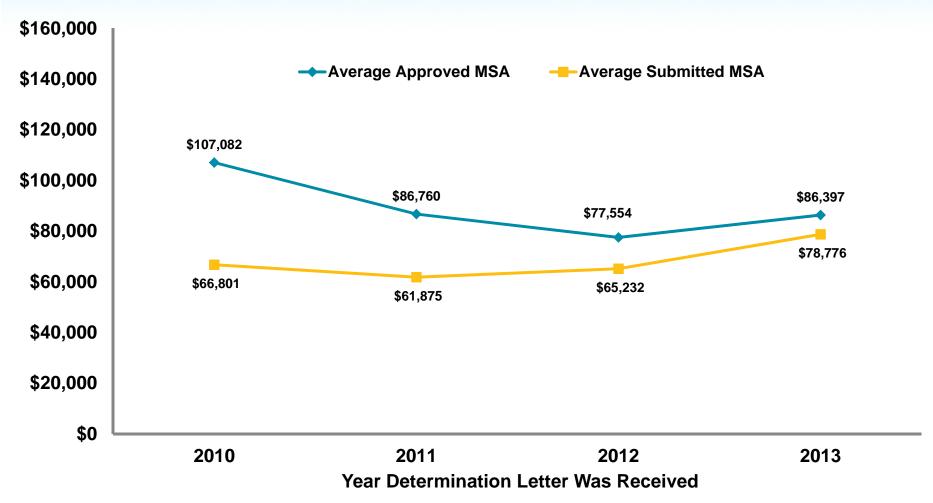


There Is No Apparent Trend in Average Approved MSAs





Gap Between Submitted and Approved MSAs Is Shrinking





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The Gap Between Approved and Submitted MSAs for Parts A and B Has Been Fairly Stable





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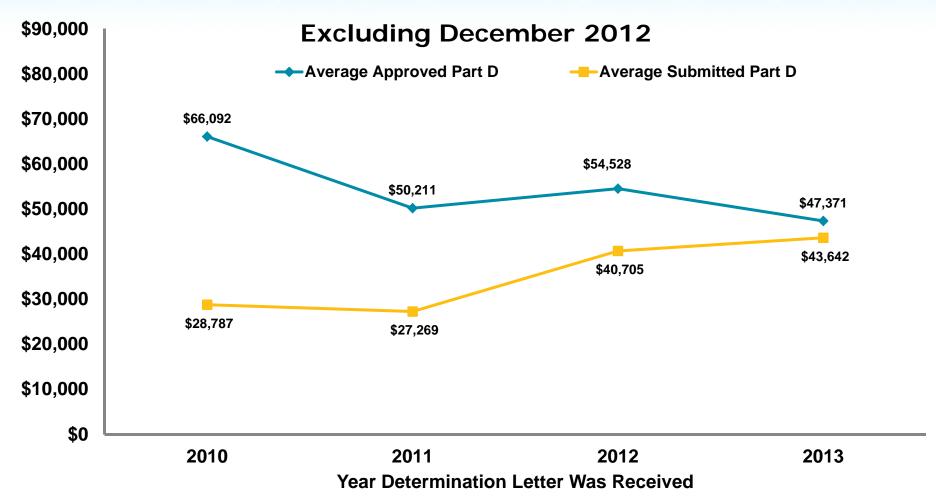


The Gap Between Approved and Submitted MSAs for Drugs Has Declined Significantly



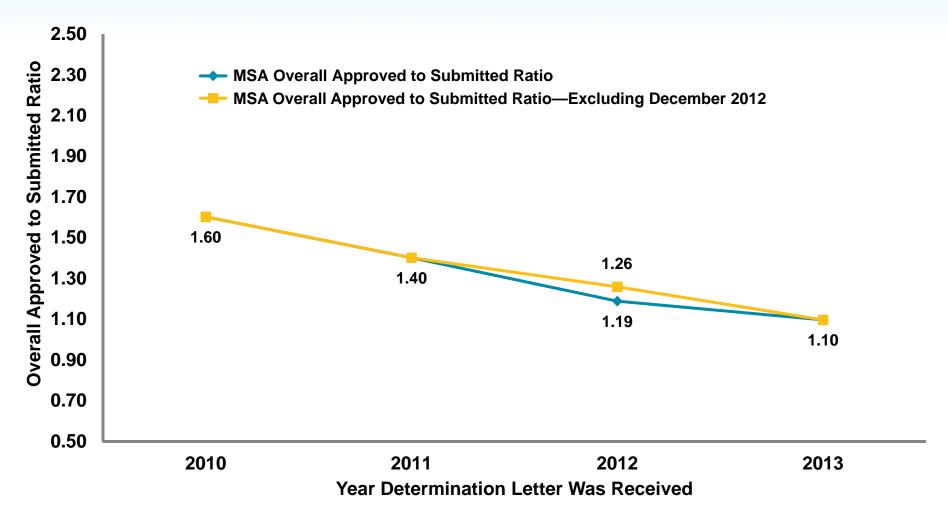


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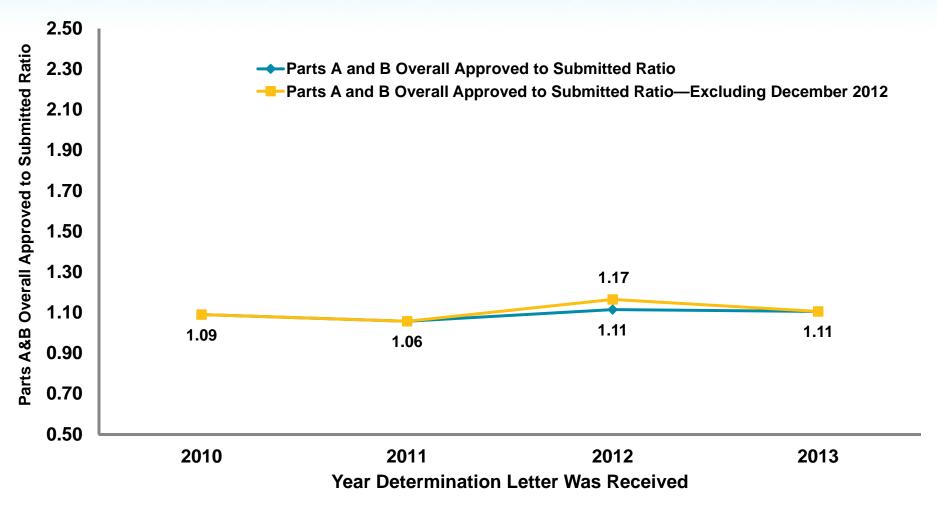


The Ratio of Overall Approved to Submitted MSAs Has Declined Over Time



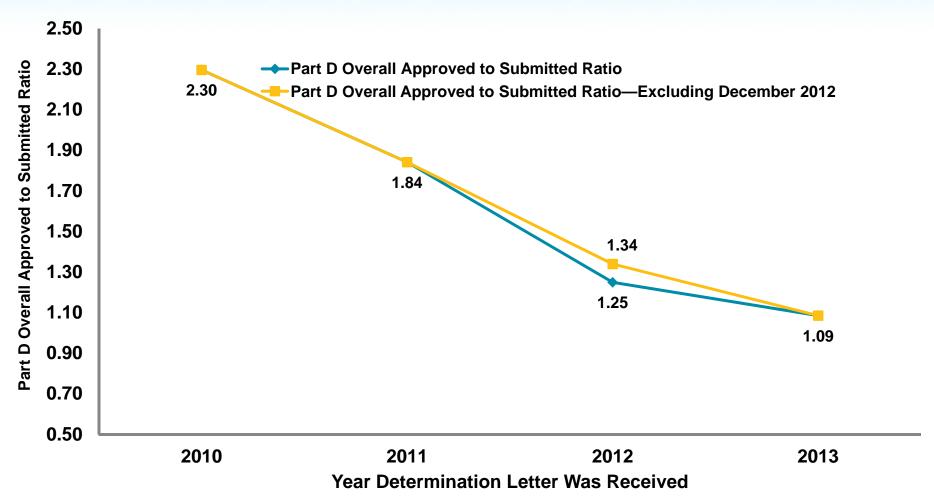


Ratio of Overall Approved to Submitted MSAs for Parts A and B Has Been Fairly Stable



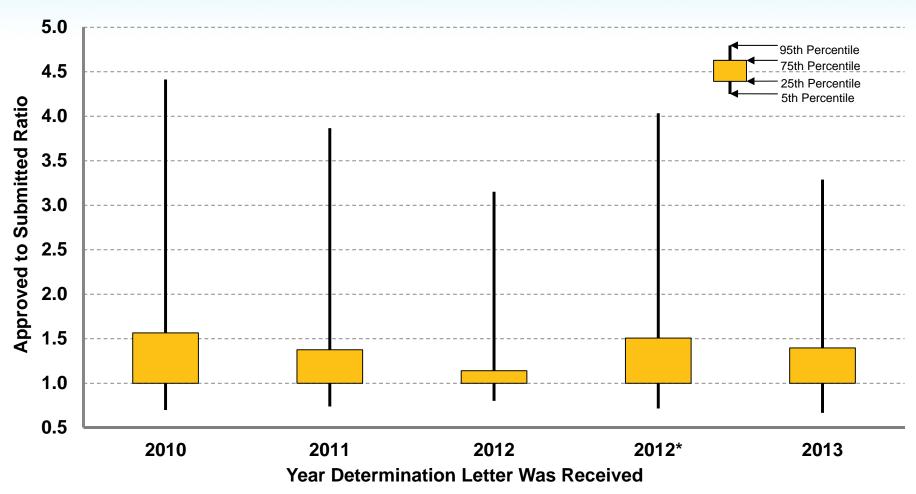


Ratio of Overall Approved to Submitted MSAs for Drugs Has Declined Sharply





The Spread of MSA Approved to Submitted Ratios Has Been Consistent

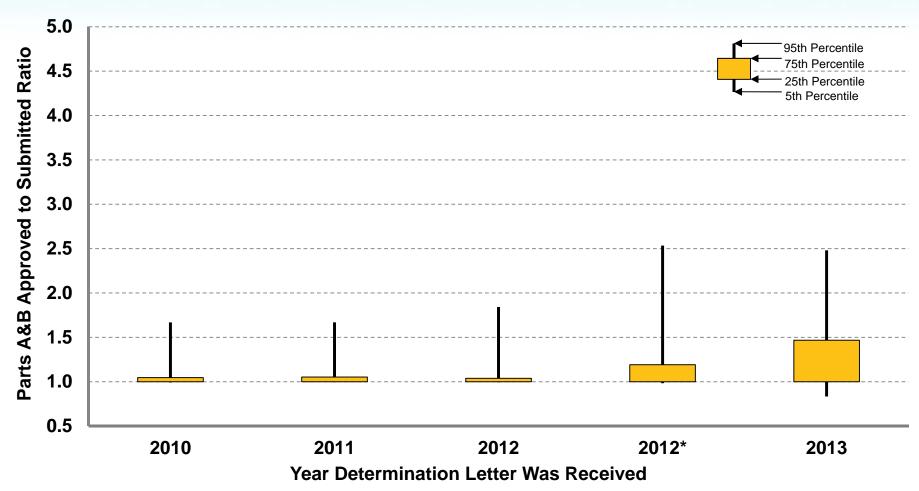


Median is 1.00 for all years

*Excluding December 2012



The Spread of Approved to Submitted Ratios for Parts A and B Has Grown

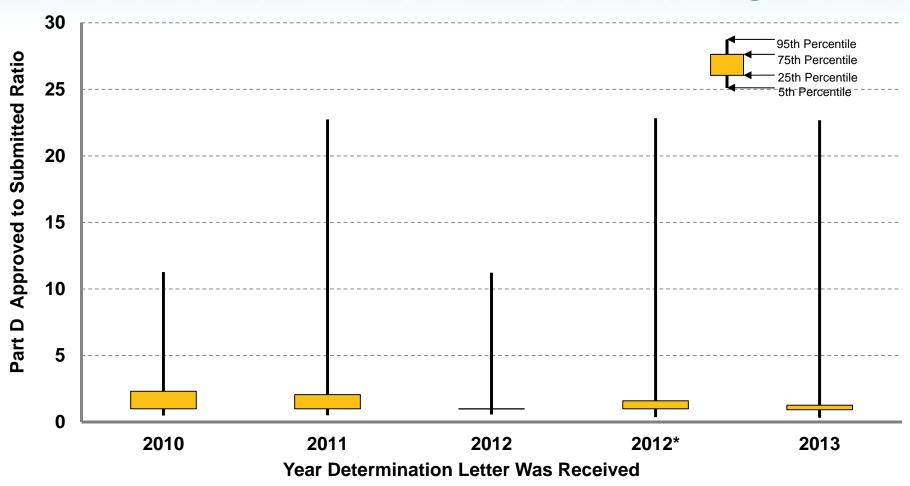


Median is 1.00 for all years except 2013, for which it is 1.07

*Excluding December 2012



Most of the Spread of MSA Approved to Submitted Ratios Is Due to Drugs



Median is 1.00 for all years

*Excluding December 2012



Closing Remarks

- The majority of MSAs are for claimants who are Medicare entitled due to disability
- MSAs are a large share of total proposed settlements
- Prescription drugs are a large share of MSAs
- CMS's MSA processing time has recently declined
- The differences between proposed and approved MSAs have declined over time
- Most differences between proposed and approved MSAs have been due to prescription drugs





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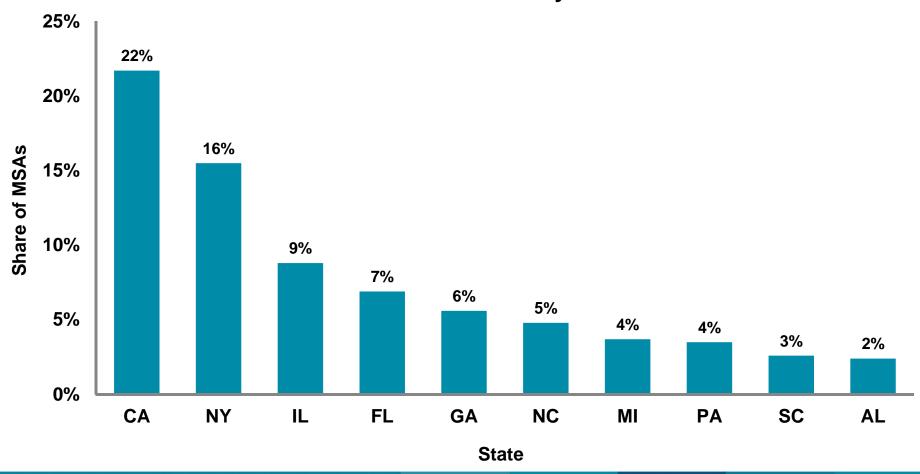
Thank You





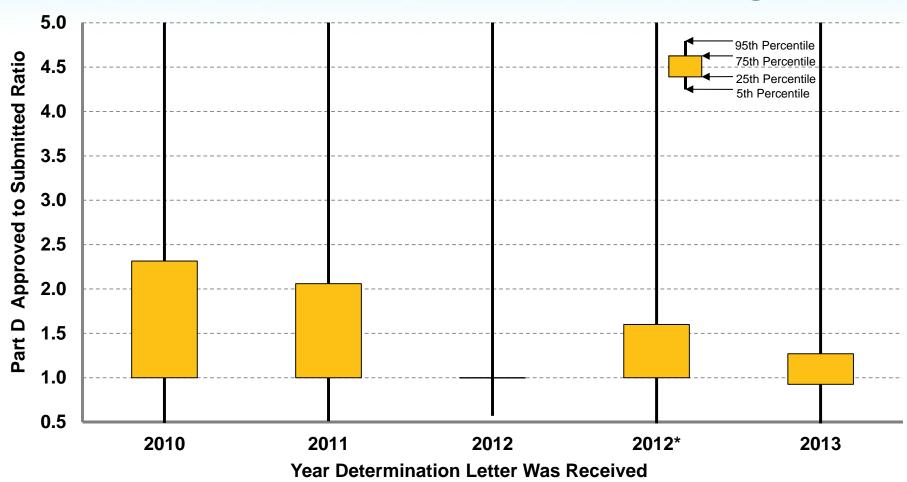
Top Ten MSA Volume States in Sample

Distribution of MSAs by State





Most of the Spread of MSA Approved to Submitted Ratios Is Due to Drugs



Median is 1.00 for all years

*Excluding December 2012



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