



**SOCIETY OF
ACTUARIES®**

Article from

Health Watch

June 2018

Issue 86



**SOCIETY OF
ACTUARIES®**

Article from

Health Watch

June 2018

Issue 86

Letter From the Editor

By JoAnn Bogolin

My guiding thought when gathering articles for my first turn as editor of *Health Watch* was to convince some of the clever people in the health care community to write for our section newsletter, give them a deadline, then get out of the way. The results, I believe, are terrific, providing a diverse set of topics. The articles also seem like a direct response to Greg Fann's "what to write" guidance to our community in the February 2018 issue of *Health Watch*. In his final Letter From the Editor, Greg simply stated, "Write what actuaries don't know they should know."

Up first is Colby Shaeffer and Nicholas Gersh's examination of how proposed work requirements on beneficiaries will impact enrollment in Medicaid. Starting with an assumption of who these proposed requirements would include, Colby and Nicholas outline an approach to modeling this impact and provide suggested approaches to further the understanding of it.

Next, Ed Cymerys and Dawn Motovidlak both present fresh looks at members' experiences with seeking health care. Ed discusses concierge services/digital tools and their effect on medical costs. He asks whether making health care more convenient for members is the same as increasing the cost of care. Using a study that his company performed, Ed answers this question by addressing medical trend, member engagement and utilization changes.

Dawn tackles the availability of treatment for three impactful trends rooted in mental health care: the rise in chronic conditions, opioid addiction and mass shootings. At the core of the treatment of these issues is the provider network available to members. Dawn makes a strong case for actuaries and other risk assessment individuals not taking for granted that payers have adequate networks to address the needs of their members, despite having met all regulatory requirements for those networks.

John Adler provides guidance in evaluating the results of proposals from pharmacy benefits managers (PBMs). Taking the reader through the exact challenges of evaluating proposals from multiple PBMs, John addresses the entire process starting with

the initial claims request (e.g., when to allow National Drug Code substitutions) through overall net pricing (understanding the timing of savings).

Dave Dillon presents a summary of a white paper that was released as part of the Commercial Health Care: What's Next? strategic initiative. "Coverage for One and for All? The Impact of the Individual Mandate and Guaranteed Issue in the Individual Health Care Market" was written by Jackie Lee and Armen Akopyan.

This issue's interview with a leader in our community is with Paul Stordahl, senior vice president, actuarial pricing for United Healthcare commercial markets. Having known Paul for a number of years, it rings true that among the skills crucial to his development as an actuary are listening and communicating; from my experience working with him, that means listening to and communicating with clients as well as his colleagues and junior staff.

Bethany McAleer provides a broad overview of the roles and responsibilities of public health, pointing out that while most of the U.S. health care system is devoted to addressing existing health issues, public health seeks to protect the health of the population. Understanding this, the reader is taken through the span of services in the public health sector, how these services impact the population and the funding for this sector.

The last article in this issue is from Kelly Backes, Julia Friedman, Dustin Grzeskowiak, Elizabeth Phillips and Patricia Zenner. This team addresses Medicare Advantage star ratings, particularly as they pertain to new Medicare Advantage contracts. Given that star ratings determine the level of federal revenue a Medicare Advantage Organization (MAO) receives and the star rating new contracts are assigned, the authors address opportunities for improvement for new MAOs beyond the current rating levels.

Being overwhelmed by the generosity of the volunteer authors who made this issue of *Health Watch* so great and having just finished Oscar season, I offer the following quote from Winston Churchill as a thank-you to the contributors: "We make a living by what we get, but we make a life by what we give." Thank you! ■



JoAnn Bogolin, ASA, FCA, MAAA, is a member of the Health Section Council and managing director at Bolton Health Actuarial in Atlanta. She can be reached at jbogolin@boltonhealth.com.