



IRONHEALTH®

Provider Excess Insurance



As the healthcare market continues to evolve, and as rewarding “value over volume” emerges as a centralized theme in the wake of the PPACA, providers are facing the reality that they will be asked to become more active participants in the risk-bearing equation. With the prospect of significant financial exposure looming, providers will need (or want) a financial “back-stop” - that back-stop is Provider Excess Insurance. Examples of emerging market conditions that will result in the need for a Provider Excess Insurance policy include:

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- Traditional capitation contracts with limited risk are now evolving into “global” risk contracts that often link provider payments to both quality and financial metrics.
  - Newly formed Medicare Accountable Care Organizations (ACOs) must demonstrate a method to repay CMS in the event of “shared losses.” CMS has recognized that the purchase of a Provider Excess Insurance policy effectively satisfies this requirement.
  - Both Medicare ACOs and Commercial ACOs will ultimately replace fee-for-service payments with prospective “capitation like” payments. Introduction of capitation payments will require that providers purchase a Provider Excess Insurance policy to mitigate the adverse impact of unforeseen, catastrophic claims.
  - The Bundled Payments for Care Improvement Initiative (BPCI) launched by CMS will place providers at risk for targeted episodes of care such as joint replacement followed by a period of post-operative care. A well-crafted Provider Excess Insurance policy will protect providers in the event the actual cost of care for such defined episodes exceeds the established benchmarks.

In response to these market conditions, IronHealth has developed a Provider Excess Insurance product that is specifically designed to smooth the adverse impact that unforeseen, catastrophic healthcare claims may have on a capitation budget or other form of risk-based contract.

## IronHealth's Provider Excess Insurance product highlights include:

- Commercial, Medicare and Medicaid membership classes
- Special expertise in start-up and emerging risks
- Specific retentions per Member ranging from \$25,000 up to \$1,500,000
- "Unlimited" Maximum Benefit Covered per Member option available
- Eligible service menu including any combination of Inpatient Hospital, Outpatient Hospital, Sub-Acute, Professional, Ancillary and Pharmaceutical services
- Unlimited claim valuations with "amount paid" language available for eligible risks
- Flexible claim reporting and submitting deadlines
- Minimum premiums as low as \$15,000
- Alternative risk transfer financing options including experience refunds, retained corridors, inner aggregates, and aggregating specific deductibles
- Aggregate stop loss solutions available for ACOs and select qualifying risks
- Access to IronHealth's IronCARESSM program. IronCARES works with select, preferred vendors offering the leading experts in catastrophic claim management and clinical consulting services. In many cases, fees associated with these services will be considered eligible



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