



HEALTH CARE OUT OF CONTROL: It Starts with Quality



**The Business Case for the C-Suite
Taking Control of Its Health Care Spend
to Make Health Care a Controllable Cost**

Health Care Quality

Health care quality in the U.S. is a hit and miss proposition. Excellent, top-rated doctors often work in the same practice with low-rated, potentially deadly doctors facing multiple malpractice suits.

High-quality and safe, top-ranked hospitals and surgery centers often are within a few miles of low-ranked facilities with high infection rates or little experience with your condition or surgery.

But how do you and your employees know the difference?

While quality and safety data are often difficult for consumers to find, it is readily available to the health insurance companies. **So why does your insurance company refuse to identify the best providers and warn against the dangerous ones?**



This booklet outlines some of the health care dangers that insurance companies refuse to prevent, BUT YOU, AS AN EXECUTIVE, CAN ELIMINATE!

TABLE OF CONTENTS

Misdiagnosis	4
Inappropriate Care	6
Hospital Safety & Quality	8
Physician Quality	10
It's All About Control	11

***Take Back Control of Your Health Care Quality
& Make Health Care a Controllable Cost***

MISDIAGNOSIS



When you are sick, nothing is more critical to your recovery than an accurate and timely diagnosis. The correct and effective treatment requires a correct diagnosis... and time often is a factor.

1 in 20

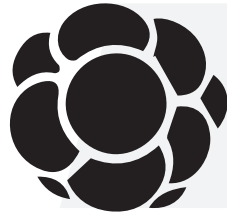


adult outpatients (12 million people) are misdiagnosed every year.

SOURCE
The Frequency of
Diagnostic Errors in
Outpatient Care,
BMJ Quality & Safety.

50%

of these errors could
be potentially harmful



30%
of cancer is
misdiagnosed

40%
of heart stents are
misdiagnosed



55%
of spine surgery is
misdiagnosed

SOURCE: EdisonHealthcare.com



1 in 5
20%

**original diagnoses
are totally WRONG**

SOURCE:

Mayo Clinic, reporting on the outcomes of their second opinions, "Extent of diagnostic agreement among medical referrals,"

Journal of Evaluation in Clinical Practice.

With misdiagnosis so common, an independent second opinion is an obvious fix. Why doesn't your insurance company require a second opinion for you and your employees on serious diagnoses and surgeries? **Why do they allow you and your employees to risk an incorrect and potentially harmful misdiagnosis?**

INAPPROPRIATE CARE

Misdiagnosis obviously can lead to inappropriate care but, too often, overtreatment or ill-advised treatment also results in costly and potentially harmful inappropriate care.

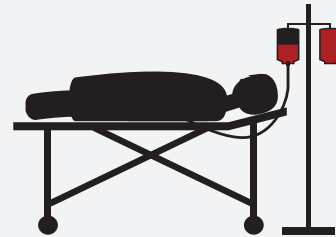




3.5M

hospital stays among adults in 2017 were potentially preventable

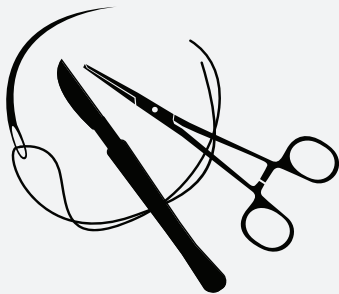
SOURCE: "AHRQ Stats,"
Agency for Healthcare Research and Quality



10%

of hospital admissions are inappropriate

SOURCE: "U.S. Health Care: Facts About Cost, Access, and Quality," *Rand Corporation*



33%

of surgical procedures are not supported by clinical research and may be harmful to patients

SOURCE: "U.S. Health Care: Facts About Cost, Access, and Quality," *Rand Corporation*



44%

of coronary artery bypass graft surgery is inappropriate

SOURCE: "U.S. Health Care: Facts About Cost, Access, and Quality," *Rand Corporation*

Your insurance company has highly trained clinicians – physicians and nurses – on staff to review and approve medical procedures and hospital admissions. **Why do they put you and your employees at risk by allowing this level of inappropriate and potentially harmful treatment?**

HOSPITAL SAFETY & QUALITY

Hospitals are supposed to be a place of treatment and healing that restores health. In far too many instances, patients who enter the hospital for a standard, even minor, procedure are harmed or even killed, victims of preventable errors, accidents, injuries, and infections.



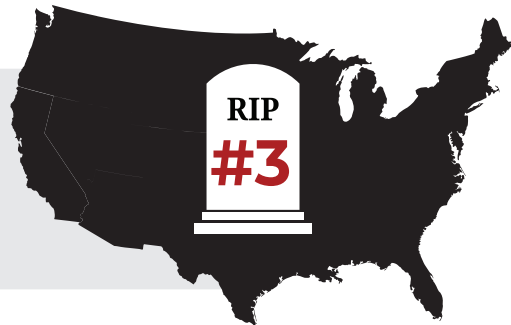
400,000

Americans die annually from preventable medical errors

SOURCE:

"A New, Evidence-based Estimate of Patient Harms Associated with Hospital Care,"
Journal of Patient Safety

leading cause of death in the U.S. after heart disease and cancer is preventable medical errors



SOURCE:

"Medical Error -- The Third Leading Cause of Death in the U.S.,"
The BMJ

42%

of general acute-care hospitals in the U.S. graded a "C" or below for preventable errors, accidents, injuries, and infections

GRADE

C

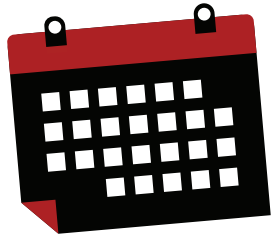
SOURCE:

2020 Leapfrog Hospital Safety Grades,
The Leapfrog Group

In hospitals, a high volume of any particular surgical procedure equates to high quality. Patients undergoing high-risk surgeries are more likely to suffer complications, harm, or even death when the surgeon and/or hospital are inexperienced at that procedure. In one low-volume hospital, an analysis by *U.S. News & World Report* showed that patients were **24 times** more likely to die from a knee replacement surgery than in the highest-volume facilities.

87.8%

of hospitals perform open aortic (heart) procedures too infrequently to ensure patient safety and high-quality medical outcomes.

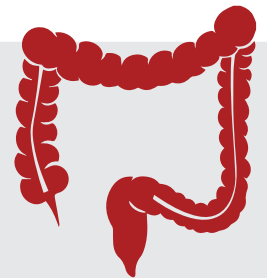


SOURCE:

Safety in Numbers: Hospital Performance on Leapfrog's Surgical Volume Standard
The Leapfrog Group

90.9%

of hospitals perform rectal cancer surgery too infrequently to ensure patient safety and high-quality medical outcomes.



SOURCE:

Safety in Numbers: Hospital Performance on Leapfrog's Surgical Volume Standard
The Leapfrog Group

Your insurance company knows which are the safest and most effective hospitals and which are the most dangerous in your area. Why don't they refer you and your employees to the safest hospitals? **Why do they let you and your employees risk selecting a low-quality or unsafe hospital?**

PHYSICIAN QUALITY

All physicians are not created equal. While that seems obvious, patients tend to treat every doctor with complete deference, without any thought to the fact that their doctor could have a low quality score or even have lost multiple malpractice suits. When needing serious medical care or surgery, who doesn't want a top-rated doctor?



of all surgeons produce below average surgical results

SOURCE:
"Half of All Doctors Are Below Average,"
The BMJ



of outpatient surgery centers use surgeons who are NOT board certified

SOURCE:
Safety in Numbers: Hospital Performance on Leapfrog's Surgical Volume Standard,
The Leapfrog Group



of all surgeons are NOT board certified, the premier designation that confirms doctors are experts in their chosen specialty

SOURCE:
"Half of All Doctors Are Below Average,"
The BMJ



of physicians are responsible for 39% of medical malpractice claims in the U.S

SOURCE:
"Changes in Practice among Physicians with Malpractice Claims,"
New England Journal of Medicine

Your insurance company knows who are the top-rated, highest quality physicians and who are the low-rated doctors in your area. Why don't they refer you and your employees to the top doctors? **Why do the insurance companies let you and your employees risk selecting a bad, potentially dangerous physician?**

INSURANCE COMPANIES FORCE YOUR EMPLOYEES TO PLAY **RUSSIAN ROULETTE** WITH THEIR HEALTH



Along with many of the world's finest and most gifted doctors and the most advanced health care facilities and technology, the U.S. health care system also has hospitals, surgeons, and other physicians that pose a very real risk to the health and lives of patients.

Despite knowing which doctors and facilities are a threat to patient health and safety, the insurance companies refuse to provide you, your family, and your employees with any guidance or warning to ensure they select only the best and safest health care providers. Your employees may choose a highly competent or even superior doctor or health care facility... or their choice may put their life and health at serious risk.

By keeping critical quality information from patients and refusing to require second opinions, **insurance companies are forcing your employees who need health care to play Russian Roulette with their and their family's health.**

IT'S ABOUT CONTROL

TAKE BACK CONTROL OF YOUR HEALTH CARE SPEND

**Make Your Health Care
a Controllable Cost**

**Control the Quality
of Your Health Care**

Executives across the U.S. are working with NextGen Benefits Advisers to reclaim control of their health care spend from the insurance company. Using proven alternative financing strategies with health care supply chain management, these employers are improving the quality of care for their employees while putting at least \$1,000 per employee back on their balance sheet as Free Cash Flow or EBITDA.

“
**There is no good price
for bad health care.**
—*Leah Binder, Leapfrog Group*”



101 Creekside Crossing, Ste. 1700 | Brentwood, TN 37027
615.369.0618 | grow@nextgenadviser.com

www.NextGenBenefits.Network

To discover how to make your health care a manageable cost,
contact us...