

Lowering Co-Pays and Giving Patients More Healthcare Options

Healthcare reform at the national level was supposed to reduce healthcare costs and provide affordable health insurance. North Carolinians who had existing policies are now seeing a dramatic increase in premiums, co-payments and coinsurance while at the same time they no longer are guaranteed that they will be able to keep their doctor.

Within communities physician practices are being purchased by hospitals forcing existing patients to pay the higher hospital rates if they want to keep their doctor. If these same patients need outpatient surgery, then because North Carolina has almost 50% fewer ambulatory Surgery Centers (ASC's), they are being forced into higher cost facilities for surgery. This is even impacting many physicians who only have an option of performing surgery at hospital facilities and now insurance carriers are making them "Tier II" with higher co-pays for their patients.

What You Can Do To Help

- **Allow more ASC's to be built in non-rural counties by relaxing health service regulations and requiring charity care**

State Health Plan Patients 2012			
Avg. Per Case	Hospital		\$3,195.91
Avg. Per Case	ASC		<u>\$1,165.36</u>
<u>Cost Savings</u>			\$2,030.55
			63.54%

- **Bring North Carolina in line with 49 other states that do not require a diagnostic center CON for physician offices**

	Medicare Average		
	Hospital	Non-Hospital	<u>Savings</u>
CT Scan	\$626.66	\$245.83	\$379.83
Ultrasound	\$241.23	\$87.01	\$154.22
Chest X-Ray	\$45.04	\$14.89	\$30.15

Other ideas being discussed for reducing changing regulations include dialysis, psychiatric beds and continuing care community home health services

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