

UCSF Health Pricing Transparency – Summary Points

New regulations from the Centers for Medicare and Medicaid Services (CMS) require all hospitals by January 1, 2019 to post online standard charges for their items and services, as well as inpatient diagnosis-related group (DRG) average charges.

- UCSF Health's pricing information has been available at our facilities and accessible online for more than a decade at the CA Office of Statewide Health Planning and Development (OSHPD).
- The new federal rules simply make it easier for people to find this information; it now has to be available on the Internet in a machine-readable format.

It's important to recognize that our listed prices are one piece of data in a complex health care billing and reimbursement system.

- The prices we're required to publish are not the amounts that patients or insurers actually pay.
- An individual's financial responsibility depends on his or her insurance plan, coverage, deductibles, co-insurance and other factors.
- An individual's reimbursement from insurance also is based on amounts established with private insurers or, for patients receiving government health care, by CMS.

UCSF Health provides highly specialized services. As such, our average DRG charges typically reflect more care, which leads to potentially more line items and higher average charges than other hospitals.

- Sharing meaningful pricing information is challenging because hospital care is tailored to each patient's needs.
- Average DRG total charges, for example, are impacted by the acuity of each patient's condition, length of stay, tests and medications, and other charges involved in the patient's care.
- Average DRG charges also don't reflect what an individual patient would pay. They are average total charges for all patients with a certain condition. Individual patients' out-of-pocket responsibilities would be based on their insurance coverage, deductibles, co-insurance and other factors.

For several years, UCSF Health has been committed to pricing transparency and helping patients and consumers make more informed decisions about the costs of care.

- As consumers shoulder more out-of-pocket costs, they rightly are asking for more information and to understand upfront what they will be expected to pay. Our resources include:
 - A tool called MyQuote that our financial advisors use to help patients estimate their potential out-of-pocket payments for scheduled services. We make every attempt to personalize these quotes so patients understand their potential financial liability before and after their care.
 - In April, we will replace MyQuote with the Epic Price Estimates tool, which will improve the accuracy of our quotes and our ability to more proactively inform patients of out-of-pocket costs for planned surgeries and other high-dollar services.
 - Offering financial assistance and discounts for patients who have no insurance or, for patients who qualify, helping them enroll in available government programs.
- We have a Pricing Transparency Committee to establish policy, provide governance and oversight regarding our patient-facing financial information.

In addition to helping patients and consumers make better decisions about their health care, UCSF is committed to improving health care value.

- Society is demanding better health care value: reduced costs and higher quality care.
- UCSF Health's value improvement program aims to streamline processes and help us become more effective in our jobs, while improving the value - the cost and quality - of the care we deliver. Through this work, we are learning how to redesign the delivery of care and at the same time, transforming the way we work.
- We are an academic medical center, and some of the country's top clinicians, scientists and educators work at UCSF. The UCSF Center for Healthcare Value is advancing rational, science-driven and clinician-tested health care solutions that reduce costs and improve quality.

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