



Healthcare's Reaction to President Trump's Executive Order on Price Transparency

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Demographics

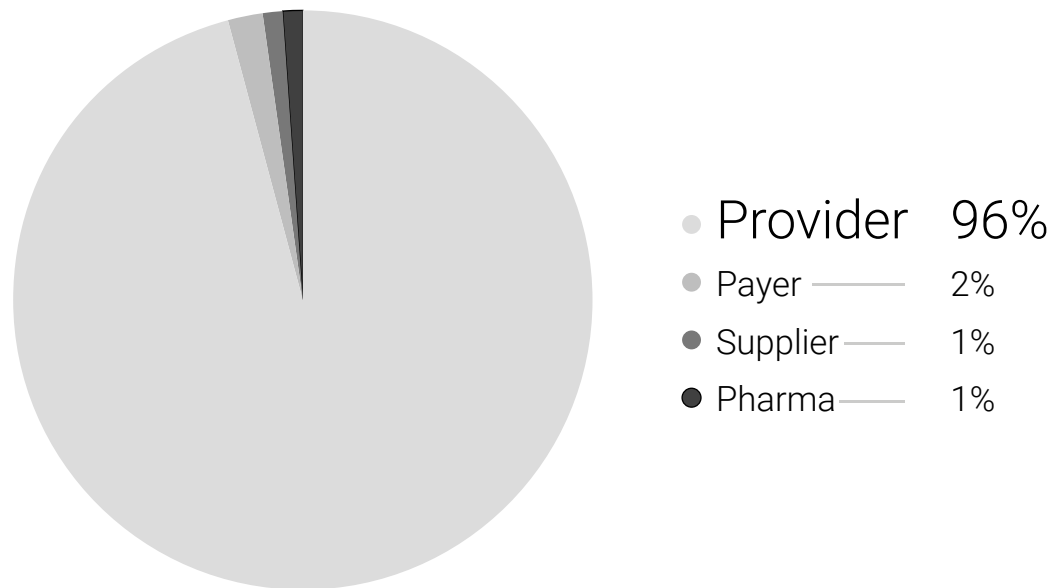


On June 24, 2019 President Trump issued an [Executive Order](#) that is meant to accelerate the emergence of price transparency for patients.

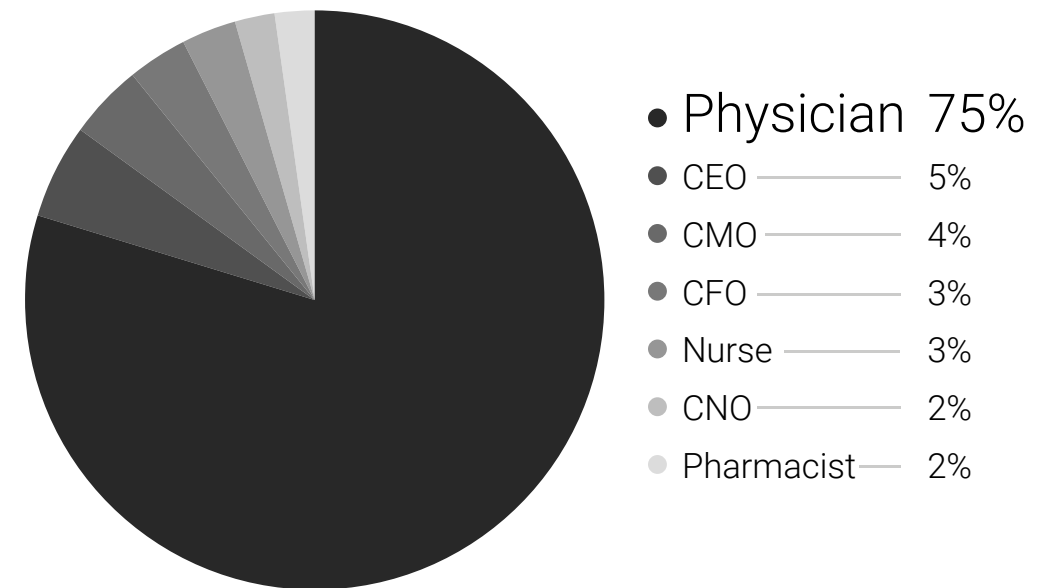
Through our research cloud, we gathered research from **286** healthcare leaders over a 7 day period. As is typical when we do

this kind of research, the most enthusiastic demographic continues to be those who work for provider organizations with physicians being the group principally interested in President Trump's Executive Order. The insights we garnered from payers, suppliers, and Big Pharma are interesting yet primarily anecdotal in nature.

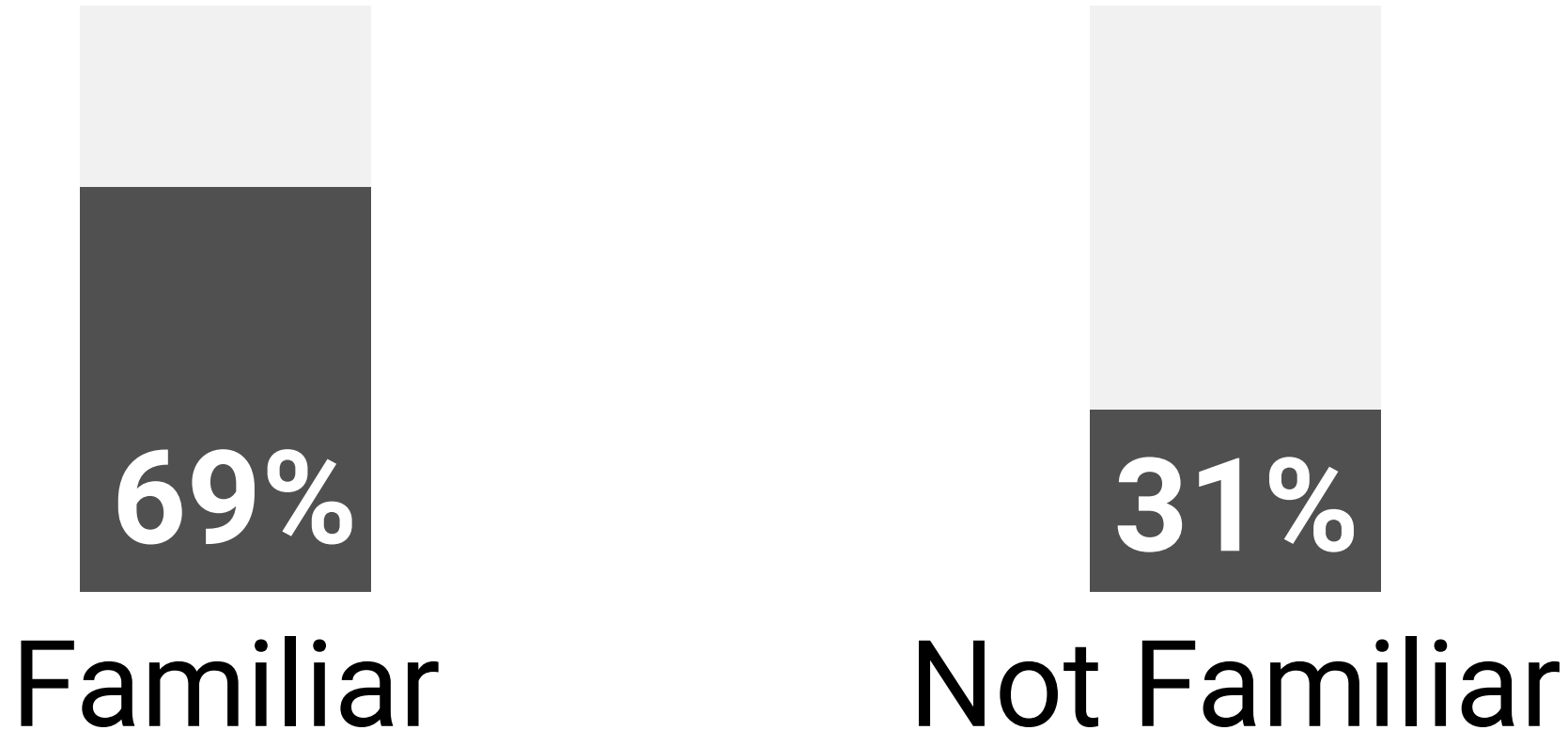
Organization Type



Title Type



Awareness of Trump's Executive Order



Generally speaking, when we do these types of studies around recent announcements, the majority of those engaging with us on the given topic are not aware of the announcement at hand. In this case however, nearly 70% of those giving their input are familiar

with the executive order. Whether it's been a topic many were already following, or the fact that any time The President opens his mouth it spreads like wildfire through all the media outlets, this is something people in the industry are fairly up-to-date on.

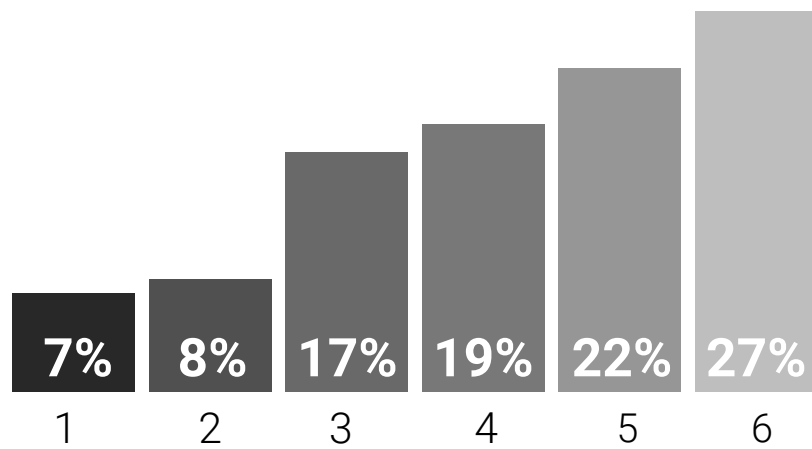
Opinion of Trump's Executive Order



The billion dollar question - what do those who will be affected think about this executive order to improve price transparency in healthcare? Well, unlike many other announcements that President Trump makes, this one actually seemed to garner quite a bit of positive feedback. 68% of the those in provider organizations fall

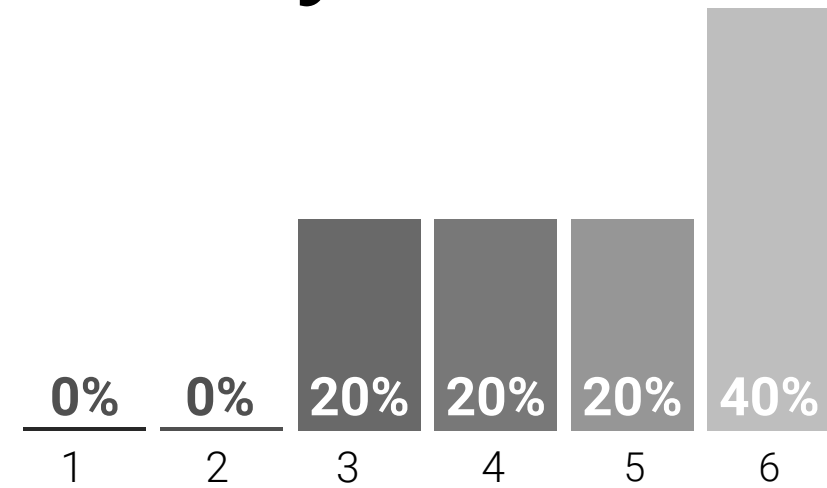
into the optimistic half of the scale when asked about their thoughts of the executive order. Though smaller numbers, the response from payers was weighted more positive as well. The pharma and supplier groups simply didn't have enough data to warrant their own break out.

Providers



1 = I think it's a horrible idea - 6 = I think it's a great idea

Payers



1 = I think it's a horrible idea - 6 = I think it's a great idea

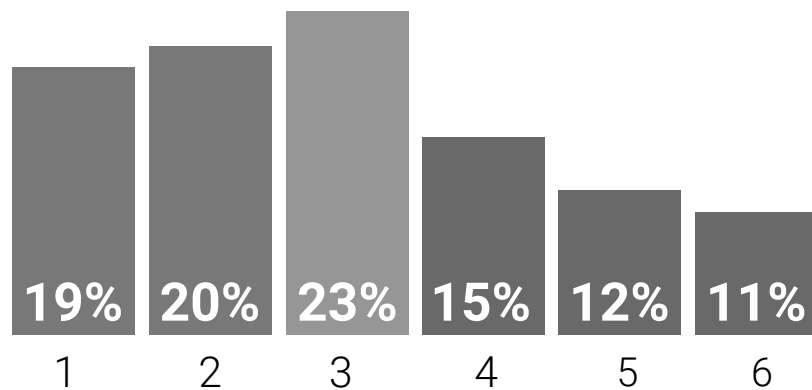
Effectiveness of Trump's Executive Order



It's interesting that while opinions are largely favorable, participants don't have much faith in the changes being implemented effectively, which points to the ongoing skepticism most people in leadership positions have about this kind of

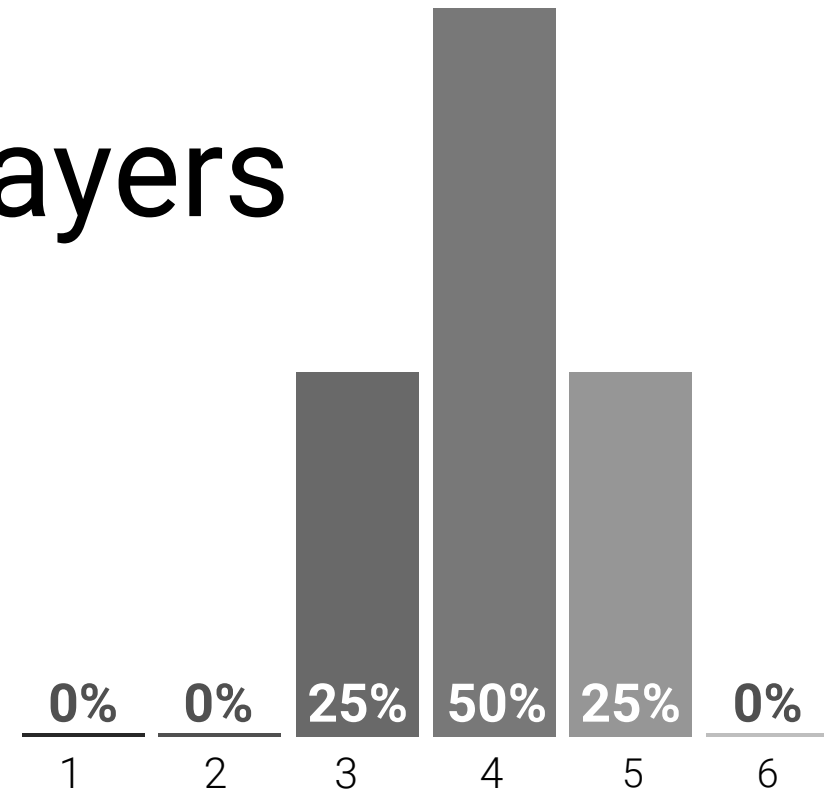
government intervention. While the small number of payers are weighted fairly neutral, the providers lean more negatively on the effectiveness scale.

Providers



1 = I don't think it will be effective - 6 = I think it will be very effective

Payers



1 = I don't think it will be effective - 6 = I think it will be very effective

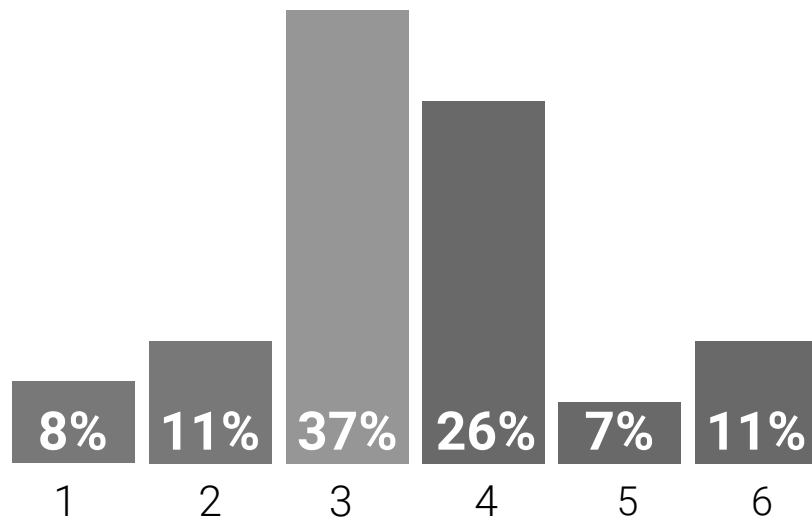
How Will This Impact Your Organization



Until everything is officially set in motion and all policies/regulations are in place, no one feels too sure about what impact it will have on their organization. Unsurprisingly, both groups hover in neutral ground when asked how they feel the executive order will impact their organization. Though responses

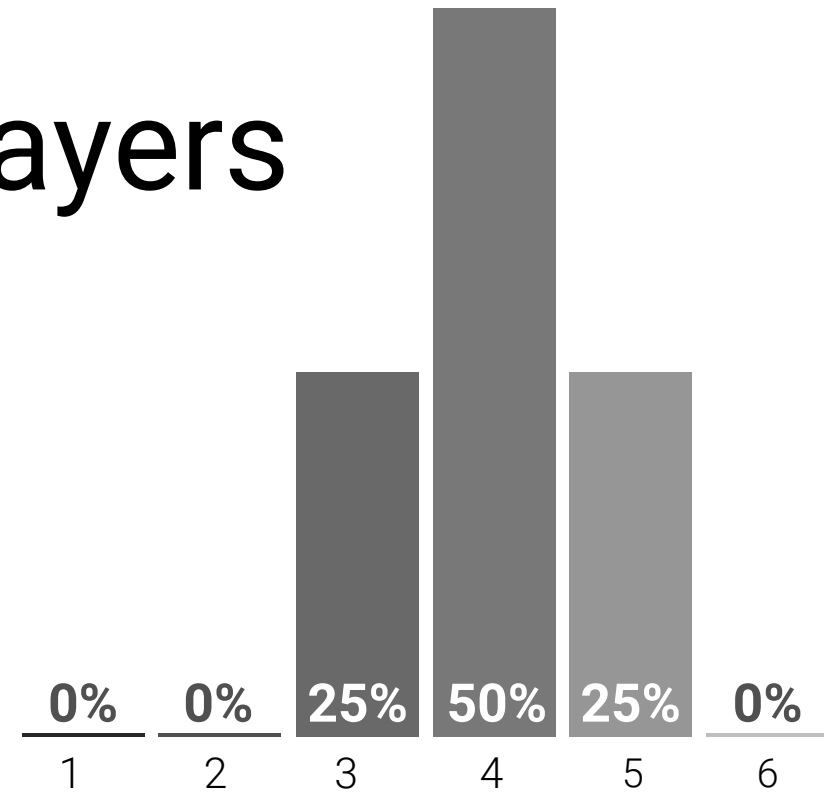
on this scale were neutral, we received hundreds of very direct, focused, and candid comments and suggestions from participants. A few of those are highlighted on the following pages.

Providers



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Payers



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Steps Organizations Will Take in Light of the Executive Order



"The quality measures can be misleading. People who are not providing good quality care can make the numbers look good. Transparency and cost on the other hand makes sense to me." - **OB/GYN**

"Hopefully this will make pharmaceutical prices available so patients don't get sticker shock at check out. Our office should receive fewer calls of complaints that a medication is too expensive and inquiring about alternatives." - **Dermatologist**

"As a Private Home Care Provider, our rates are already transparent as we initiate a Service Agreement at the time of admission that state all of applicable pricing. As a consumer, I like the idea that pricing transparency is being extended to hospitals." - **CFO**

"Comply, but charge masters are so distorted by the influence of Medicare historically paying a "% of usual and customary", I have no idea what any of this "transparency" will actually accomplish. My hope is that it will help to enlighten the fact that private pay and high deductible patients are getting the shaft, and that needs to change." - **Chief of Staff**

"Analyze cost of medical services within our packages." - **Family Physician**

"Hard to know since we have no medical leadership in our administratively over bloated health care system." - **Internist**

"Hire more people and pay for a system to implement it. More none medical costs." - **CEO**

"I do not know. But I am sure that it will increase our (physicians) workload and computer screentime." - **Otolaryngology**

"Hospitals will have to increase the manpower to generate the statements which have been quite clear and transparent. The executive order would not add any thing new to the current system." - **Neurologist**

"Wait, because everything trump touches dies." - **Family Physician**

"Not realistically achievable for HOSPITALS to provide the actual cost. Will require payers to provide the actual cost. Ridiculous to try and put the burden on hospitals." - **General Surgeon**

This is just a tiny fraction of the direct quotes we received from industry leaders. If you'd like access to the complete data set, please email Jeremy Bikman at jeremy.bikman@reactiondata.com

Suggestions Industry Leaders Have on the Executive Order



"Procedures need to be clearly identified for consumers. - Published prices need to reflect the actual (ending cost) that will be charged to consumers; Net of insurance/provider discount arrangements. (i.e., net rates for each network agreement). - Qualitative output scores (rate of complications, readmittance, etc.) by procedure need to be disclosed. (There is very little correlation between "price" and "quality" in healthcare. A consumer needs to be able to weigh decisions based on cost along with quality of care." - **Vice President**

"Get rid of it. Once again they are attacking providers, when they should be attacking insurance companies. What insurance companies charge for premiums and what they pay for services should be transparent. What hospital systems and medical establishments charge is largely irrelevant." - **Otolaryngologist**

"Concentrate more on drug prices and insurance companies reimbursements because the doctor's pay has remained the same or has decreased for about 30 years." - **OB/GYN**

"Don't do this. This will only create more paperwork and hassles for providers. Patients often will not have a choice of multiple insurers even if they don't like their contracted prices." - **Ophthalmologist**

"Ensure all options of care are fairly evaluated and "cheaper" care never becomes the quality standard. Do not use onerous pre authorizations to discourage true quality care" - **Psychiatry**

"Ensure that costs are not inflated by middle men." - **Cardiologist**

"I own my own business. I can charge whatever I want. If I wish to engage in a contract with insurance companies that's my choice. But regardless I run my business and can charge whatever I wish. If people don't like it they certainly have the freedom and choice to go elsewhere." - **Chiropractor**

"Good luck. The other programs which require oversight all struggle and are largely ineffective. I don't see any reason for this to be different." - **Director of Pharmacy**

"I would stress that cost savings by itself is a thoughtful and reasonable goal but quality and cost savings do not as easily go hand in hand. It is very hard to evaluate quality across all things medical and sometimes things cost more because they are better quality." - **Otolaryngologist**

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