



Protecting our members from unnecessary treatments and costs

Musculoskeletal (MSK) conditions and related spine, joint and pain-management surgeries are the number one cost driver of healthcare costs for many companies in Idaho and throughout the U.S.

Idaho

- Blue Cross of Idaho's Idaho employer groups spend 15 percent more per MSK episode compared to the national benchmark¹
- Idaho had 50 percent more hip surgeries and 100 percent more knee surgeries compared to other western states²

Nationwide³

- Rates of knee surgery, one of the most common MSK procedures, doubled between 1999 and 2008
- One-third of recipients continue to have chronic pain
- 20 percent of knee surgery recipients regret surgery

Reducing costs associated with these conditions is a primary focus for Blue Cross of Idaho. We are working to reduce these costs with our new enhanced prior authorization (PA) program for MSK conditions. This program ensures that the most appropriate service is delivered in the most cost-effective setting and manner.

¹Based on December 2017-November 2018 analysis of MSK episodes using Truven episode groupers.

²Based on 2017 Blue Cross of Idaho data and 2015 Truven MarketScan benchmarks.

³Szabo, L. (2018, December 25). Up To A Third Of Knee Replacements Pack Pain And Regret. Kaiser Health News. Retrieved from <https://khn.org/news/up-to-a-third-of-knee-replacements-pack-pain-and-regret/>

The enhanced PA solution

Reviews in 3 business days or less, with opportunity for 80% cost-share savings

Experienced, board-certified orthopedic surgeons, neurosurgeons, or pain specialists are available for peer-to-peer discussions and review MSK procedure requests that cannot be approved by other clinical staff. When requested, specialists will connect with the member's provider to discuss conservative treatment, like physical therapy, medical necessity of a service, or the rationale behind a denial of service. Conservative treatment options are less invasive, have a lower cost, and present less risk for the member than MSK surgical procedures.

The process:

- A requested MSK treatment service that requires a PA is first reviewed to make sure there is adequate coverage.
- A team, including registered nurses, conduct the initial screening of the request.
- If the criteria are not met, the request is sent to a specialty physician for review.