



Strategies to Address High Healthcare Unit Prices

Strategy		Implementor		EFFECTIVE WHEN PROVIDER/
		States	Private Payers	PRODUCT COMPETITION IS SCARCE?
Lowering unit prices	Peer comparisons	X (e.g., Virginia Center for Health Innovation)	Х	Rarely
	Reference pricing	X (e.g., California Public Employees' Retirement System)	Х	Rarely
	Tie provider payments to Medicare rates	X (e.g., Montana's Employee and Retiree Benefit System)		Yes, if payer is powerful
	Hospital/physician rate setting	X (e.g., Maryland's all-payer rate-setting system)		Yes, if payer is powerful
	Anti-price gouging legislation	х		Yes
Capping the price of a bundle of services	Global budget	X (e.g., Maryland's all-payer rate-setting system)	X (e.g., Blue Cross Blue Shield of Massachusetts' Alternative Cost and Quality Contract)	Yes
Capping price growth	Caps on price growth as a condition of healthcare mergers	X (e.g., State Attorney General's Office)		Yes
	Impose price controls on contracts between commercial insurers and providers	X (e.g., Rhode Island's Office of the Insurance Commissioner)		Yes
	Establish a healthcare cost growth benchmark	X (e.g., Massachusetts' health care cost growth benchmark)		Yes

More on this topic at: www.healthcarevaluehub.com/High-Unit-Prices