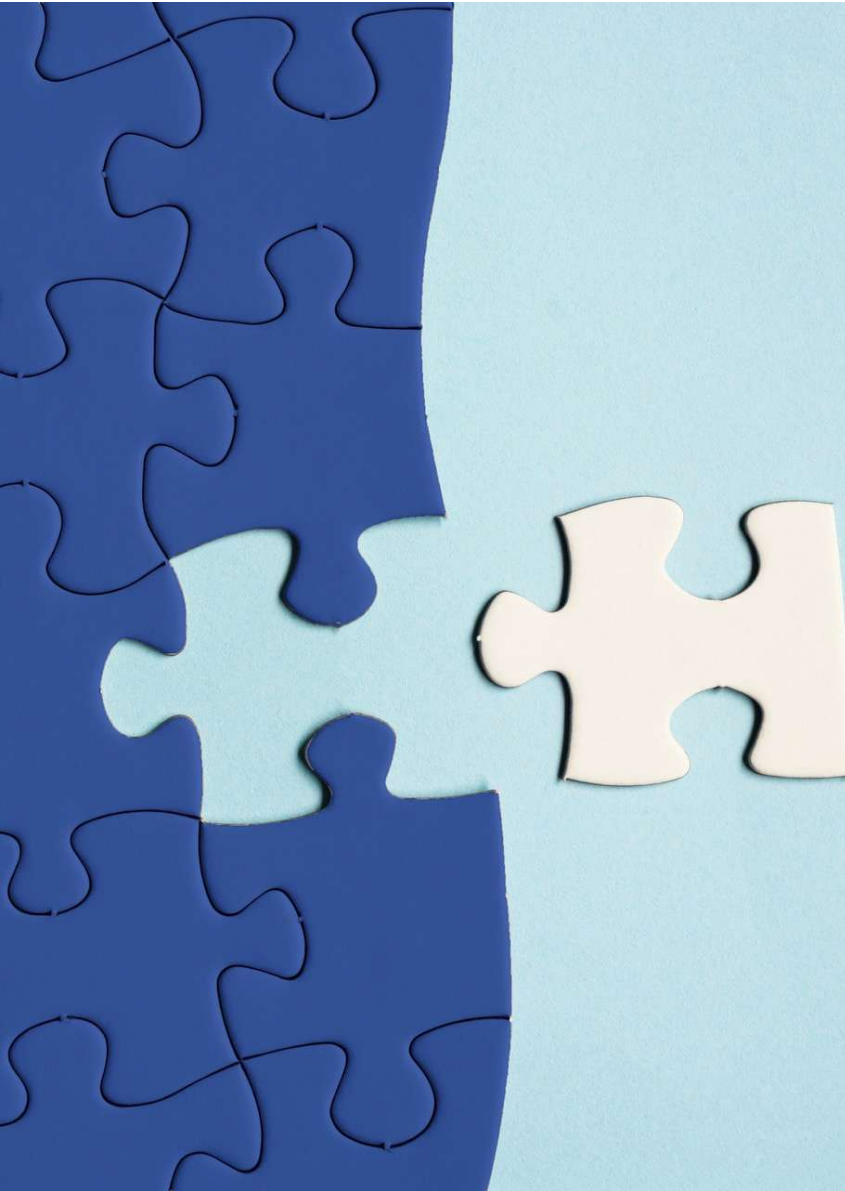


PREYED ON:

How Insurance Corporations
Are Bleeding Hospitals



Mark Craig



Learning Outcomes

1

Identify common insurer tactics that drive revenue loss

2

Get practical tools to fight back

3

Impact of payer abuse on our clinicians

4

Advocate for broader policy reforms by engaging lawmakers

Jon Green, CEO

Taylor Regional Medical Center



Patient care is the number one thing we do!

We pretty much lose money on every payer that we have right now.



The Cards Are Stacked Against Him

- Supply costs up 300%
- Labor costs up 40%
- Clinician recruitment
- Rising cost to collect
- Uncompensated care (OBBBA)



Nearly 50% of MA Claims Denied



Loss of Critical Services



Maternity Unit

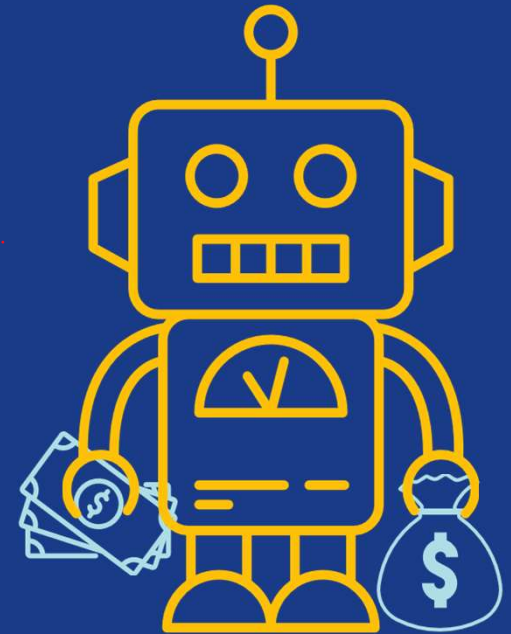


ICU

\$Billions Declined By Insurance AI

- 15% of commercial claims denied, including many pre-approved
- Medicare Advantage denies 17%;
 - 57% overturned

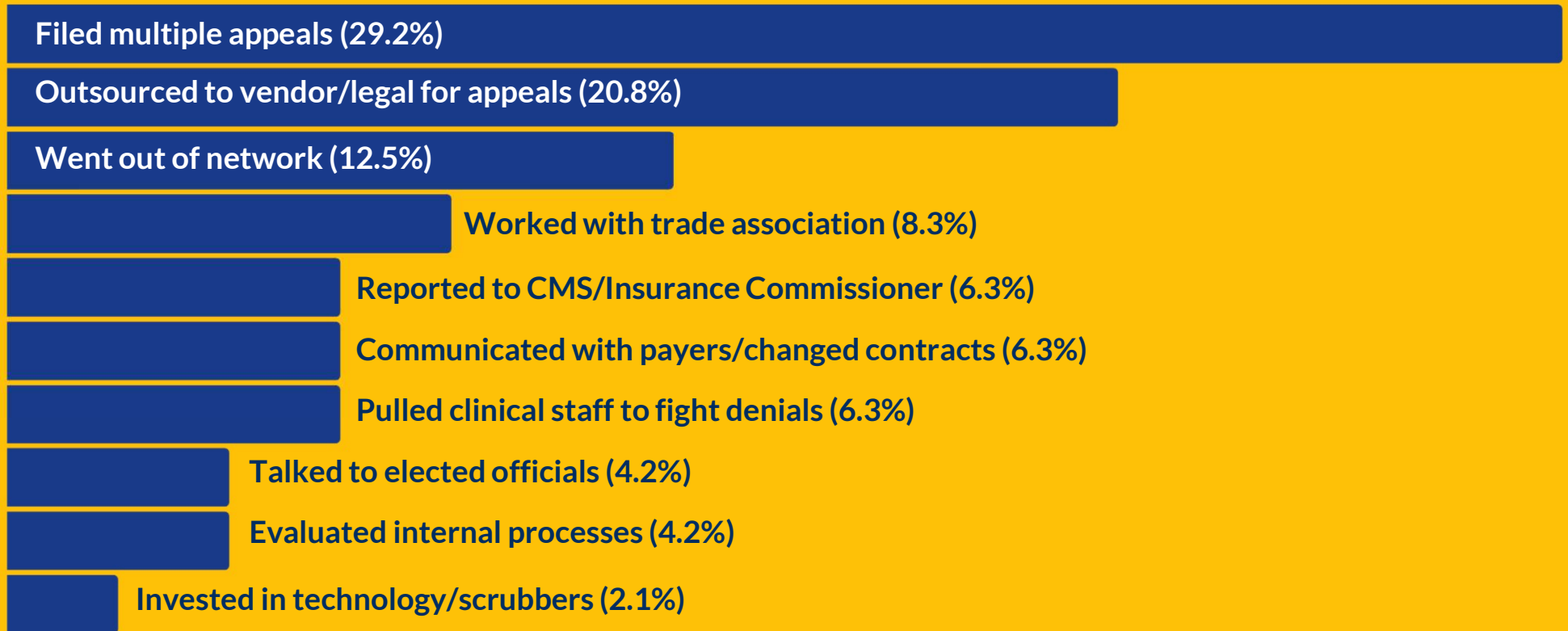
Annual cost of overturning = \$20 BILLION



Sources: AHA, Health Affairs, US Senate Subcommittee on Investigations

**What steps have you taken to
resolve insurance reimbursement
issues?**

WHAT STEPS HAVE YOU TAKEN TO RESOLVE REIMBURSEMENT ISSUES?



Payer Playbook #1

The Care Blockade

- Prior Authorization
- AI-Driven Utilization Management
- High Deductibles and Copays
- HMO Enrollment and Referral Requirements



Payer Playbook #2

DELAY AND DENY PAYMENT AFTER CARE IS DELIVERED

UNDERPAY

- Downcoding
- Observation Status Reclassification
- Contractual Adjustment Manipulation

DENY

- Claim Edits and Technical Denials

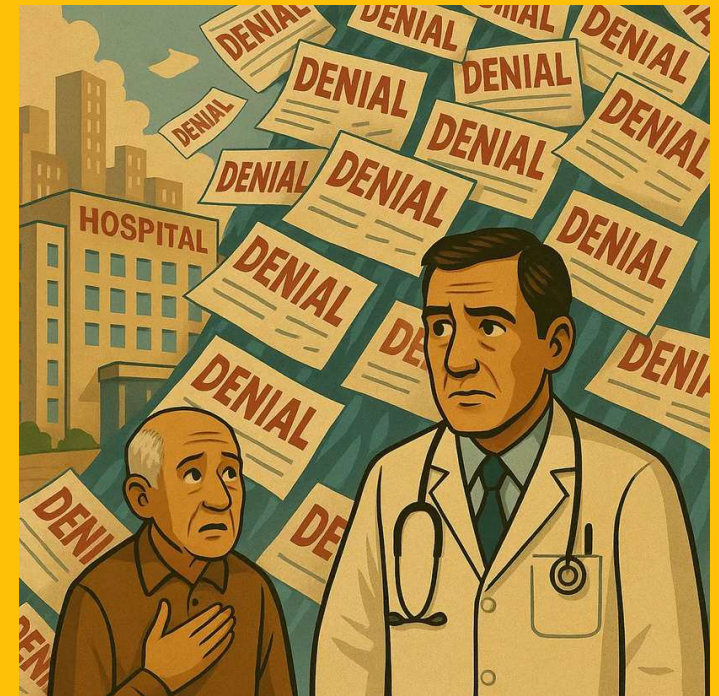
EXHAUST

- Clinical Denials
- Take-backs and Recoupments
- Credentialing Delays



It's Going To Get Worse

- Wall Street pressures
- Medicare Advantage growth
- Expansion of AI-driven claim review
- Increasing complexity of payer rules
- OBBBA - Medicaid redeterminations



What Can Be Done?

Fight Fire with Fire

- Using AI
 - Prevention
 - Underpayment evaluation
 - Automated appeals generation

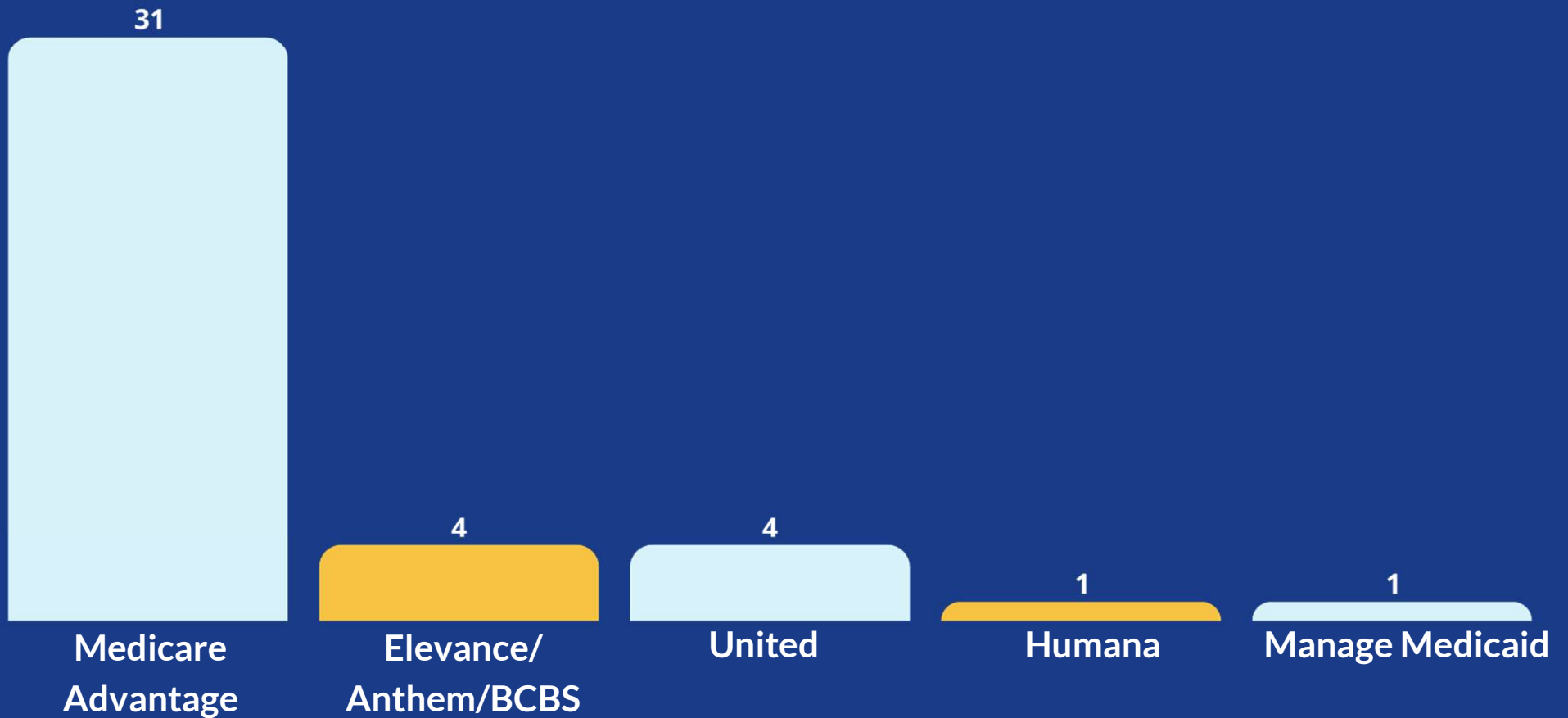
Every successful appeal helps save service lines and keep the doors open.





**Which payer classification gives
your organization the most
challenges?**

WHICH PAYER IS THE MOST CHALLENGING TO WORK WITH?



**What makes Medicare Advantage
so challenging?**

WHAT MAKES MEDICARE ADVANTAGE SO CHALLENGING?



**Which payer is the most
challenging to work with?**

Quote From Study



**UnitedHealthcare is
Satan,
and Humana is his
sister.**

Revenue Cycle Director, NE



Carol Paris, MD

“ We need freedom from the shackles of a corporate health insurance industry that constrains us from giving patients the treatment we took an oath to provide.”




Impact of Burnout and Moral Injury

- Physician shortage: 124,000 by 2034
- Primary care shortage: 40,400 by 2036
- Nearly 70% of doctors in their 40s want to retire in their 50s
- Cost to replace
 - Recruitment, credentialing, time loss
 - \$500,000 - \$1,000,000

Sources: AOA, Medscape, AAMC, Stanford Medicine

Louisiana

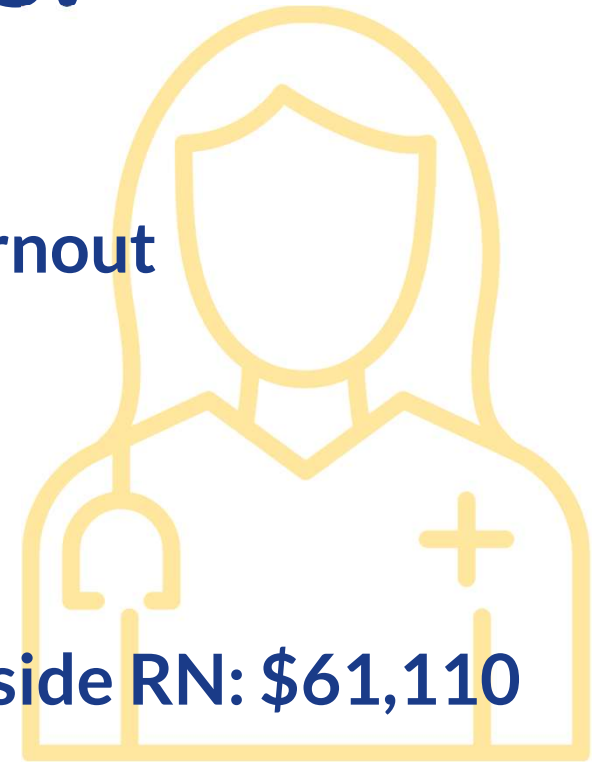
- **73% of residents live in an HPSA**
 - **60 out of 64 parishes are underserved**
 - **50% of residents will practice out of state**
 - **Projected to be 5,000 doctors short by 2030**
- 

Sources: Cicero Institute, WAFB, AIMPA, LA Dept. of Health

What About Nurses?

- **Nursing Shortage: 190,000 by 2032**
- **65% report high levels of stress and burnout**
- **600K+ intend to leave by 2027**

- **Cost to replace**
 - **Average turnover costs for one bedside RN: \$61,110**



Sources: Florida Atlantic University, NCSBN, Social Science Research Network, NSI Nursing Solutions

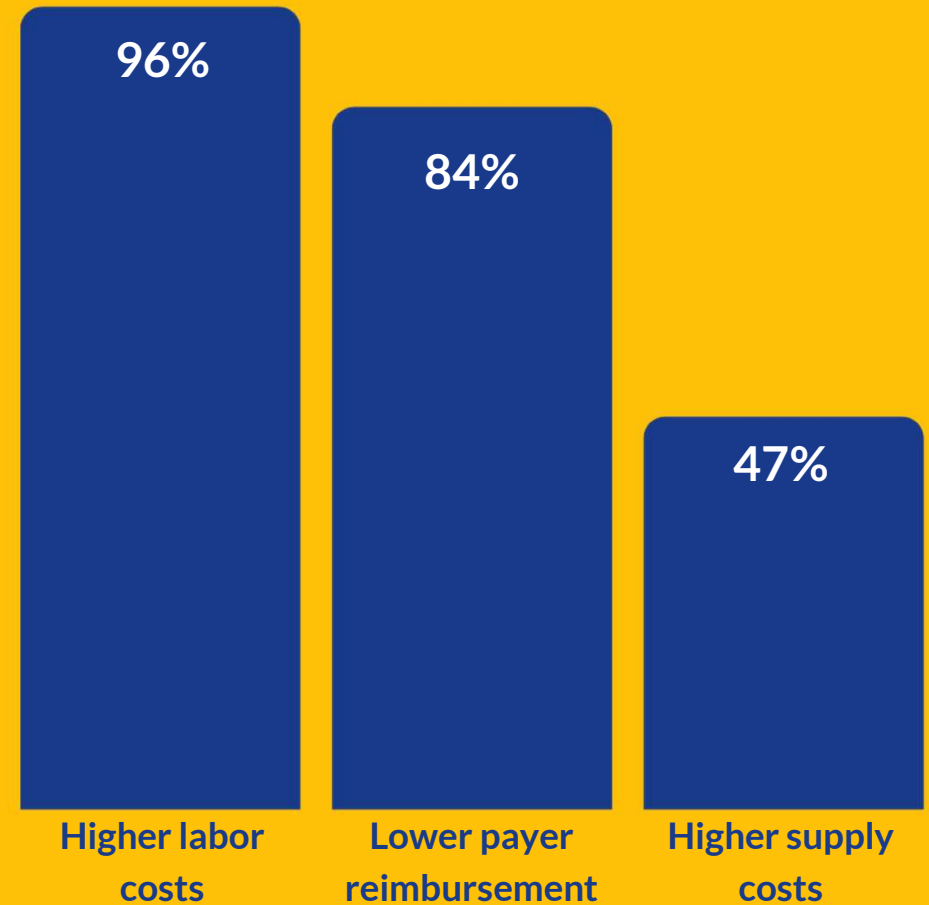
Louisiana Nurses

- 6,000 – 7,000 nurses short by 2030
- #7 nationally for largest projected nursing shortage
- 38% are age 50+
- 15% of all LA nurses currently planning to quit

Sources: Shreveport Times, nurse.org, LA Board of Regents, AACN, LA State Board of Nursing

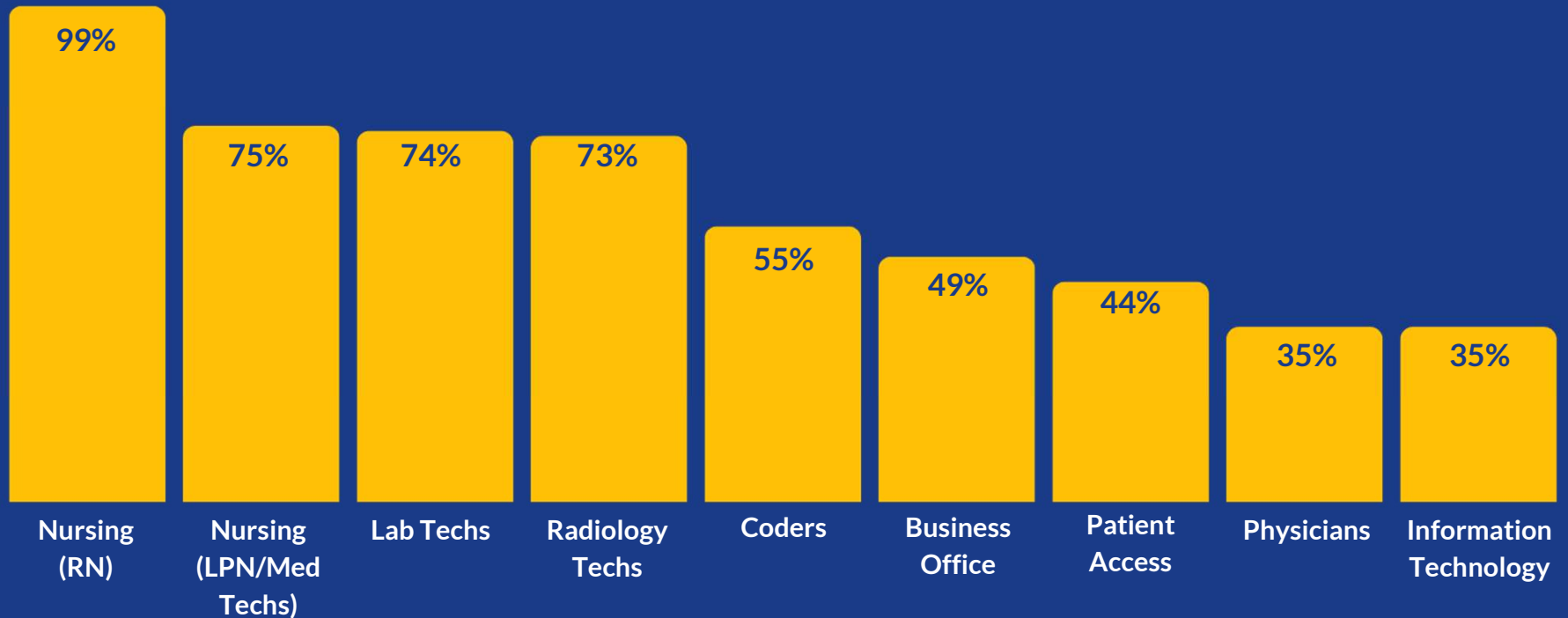
HFMA Health System CFO Pain Points 2024

Top Causes of Margin Pressure



HFMA Health System CFO Pain Points 2024

Labor Shortage by Role



Nursing shortages have a significant impact on health system margins.

How to Relieve Moral Injury and Burnout:

FIX PRIOR AUTHORIZATION

89%

of physicians say PA leads to:

- Missed medication doses
- Treatment interruptions
- Break in continuity of care

29%

say that PA has led to a serious adverse event including:

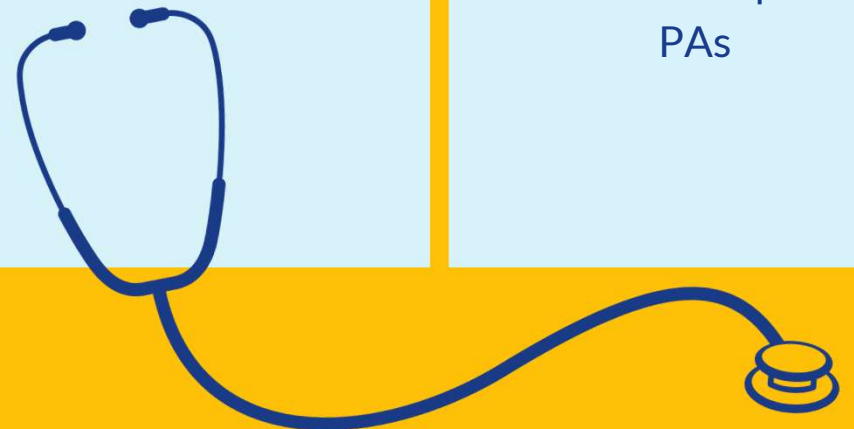
- Hospitalization
- Permanent injury
- Death

95%

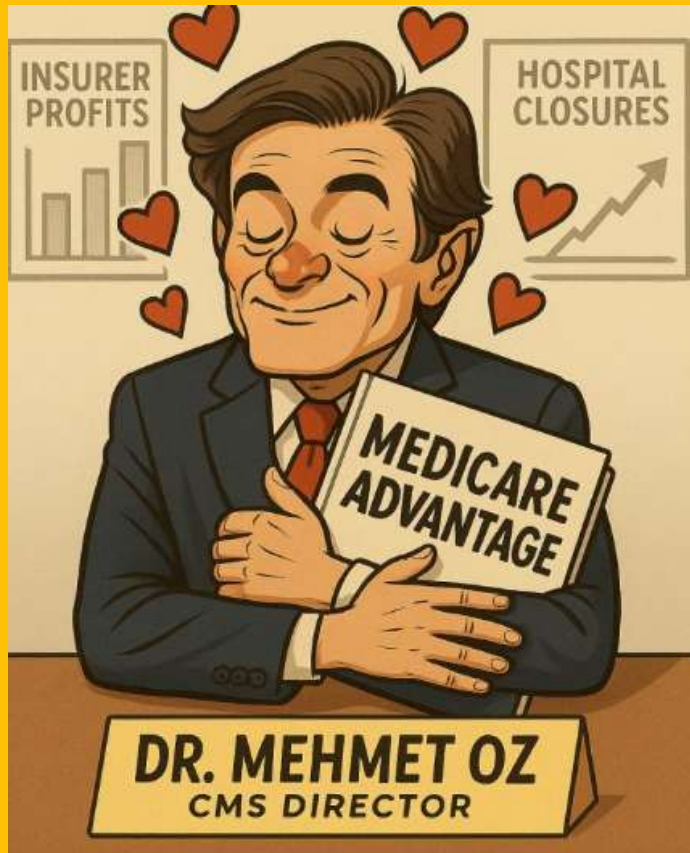
say that PA increases physician burnout

13 Hours per Week

spent by physicians and staff completing PAs



Dr. Oz, CMS Director



“Staging a Coup Against Traditional Medicare”

Health Insurance Profit

2003 - 2023



Insurance Payers: 2003 Medicare Modernization Act

COMPANY	2003 FORTUNE 500 #	2025 FORTUNE 500 #
UnitedHealthcare	63	3
Aetna/CVS	88/68	5
Cigna	87	13
Elevance/Anthem/WellPoint	146/381/103	20
Centene	NA	23
Humana	169	39

Targeting Seniors



October 1 - December 7, 2022:

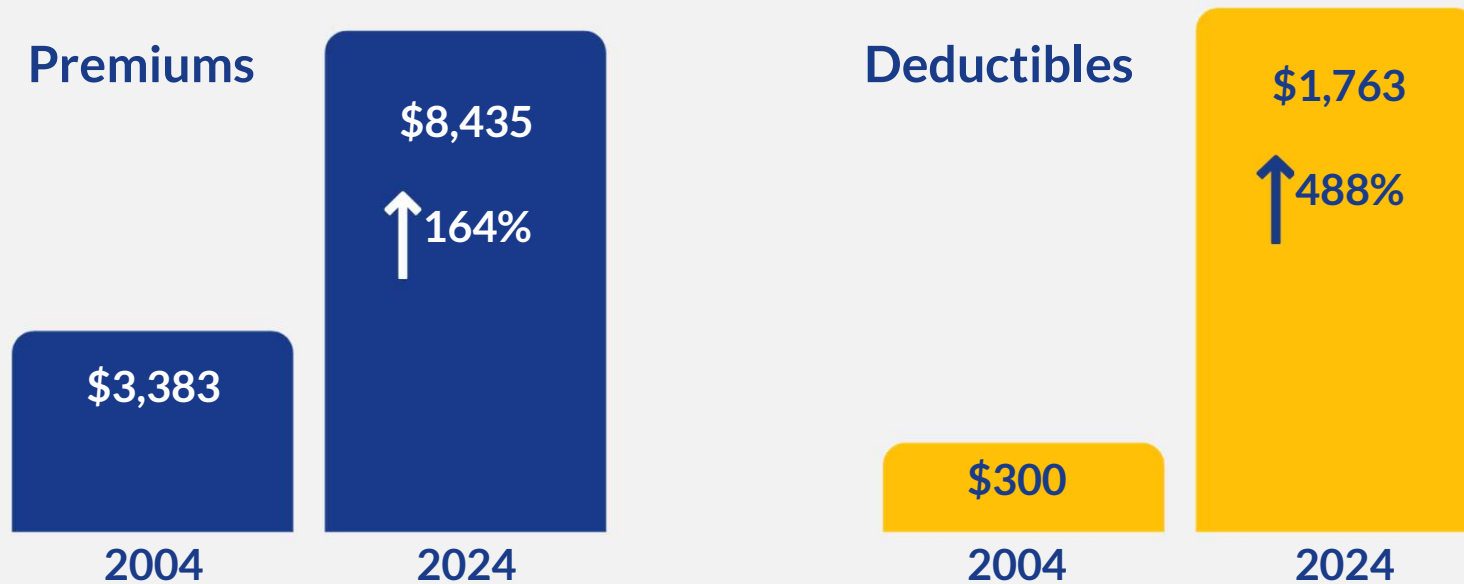
643,852 ads for Medicare
Advantage Plans

9,500 ads per day



Source: KFF

A System Built for Insurance Profit



Source: KFF

Hospital Closures



- 8.7% overall increase in mortality rate
- Medicaid patients: 11.3% increase
- Racial minorities: 12.6% increase

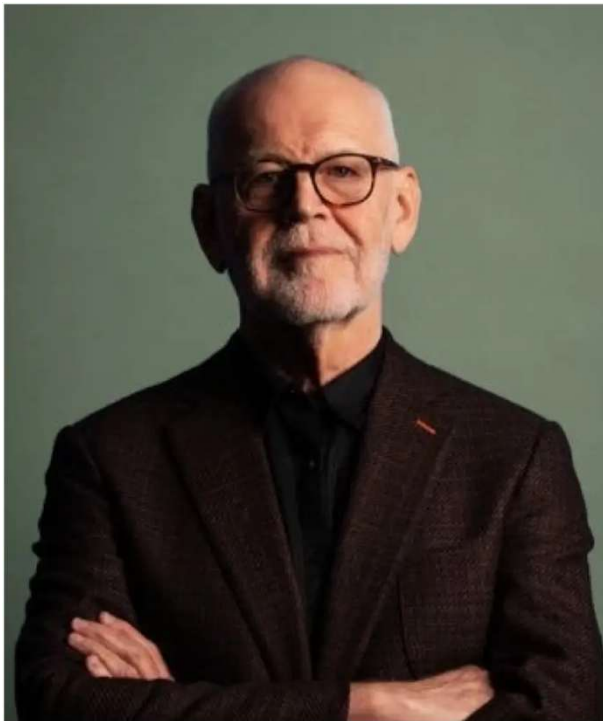
**10 additional deaths out of every
1000 people who need care**

The background of the slide is a dark blue color with a repeating pattern of lighter blue dollar bills. The bills are scattered across the entire area, some overlapping, and each features a white dollar sign in the center.

Medicare Advantage

“The Greatest Corporate Steal in
American History”

Wendell Potter



Give your throat a vacation...

Smoke a FRESH cigarette

If the cigarette you have been smoking stings or burns your throat, switch to Camels and see the difference. It's the peppery dust left in tobacco by inefficient cleaning methods that makes you cough. It's the awkwardly hot smoke of harsh, dried-out tobacco that burns and irritates your throat. There is no peppery dust in Camels—that's whisked away by a special vacuum-cleaning process. There are no stale, crumbly, parched tobacco—the fine Turkish and mild Dominican tobaccos of which Camels are blended come to you in prime, factory-fresh condition. Thanks to the Humidor Pack. This scientific germ-killing wrapping—not plain ordinary Cellophane, but moisture-

proof Cellophane which costs nearly twice as much—keeps all the natural aroma and freshness, makes it so tight that wet weather cannot make Camels damp, nor drought weather make them dry. Camels are milder and more throat-friendly because they are Just-Free and Fresh. Give your throat a vacation, switch to Camels for just one day. Then have them—if you can. There is a CAMEL OF GREATNESS IN EVERY THROAT. Humidor Pack and Humidor Pack Cigarettes. © 1997 Camel Cigarettes. Humidor Pack Cigarettes. Humidor Pack Cigarettes. Humidor Pack Cigarettes. Humidor Pack Cigarettes.

CAMELS
Mild... NO CIGARETTE AFTER-TASTE

Humidor Pack

It's unique, the revolutionary wrapping from your pack of Camels after you open it. The Humidor Pack is germ-killing, keeps them fresh and moist, and keeps them in the dry atmosphere of artificial heat. The Humidor Pack allows fresh Camels and keeps them soft until the last one has been smoked.

MEDICARE COVERAGE HELPLINE

Benefits Include
Prescriptions
Transportation
Meals

Plans and benefits vary and premiums, co-pays, and deductibles may apply. Plans that have no premiums, no co-pays, and no deductibles may require qualifying for low-income subsidies or SHOP plans. Benefits may differ from those offered under your current plan.

CALL THE
MEDICARE COVERAGE HELPLINE
1-800-961-9785
www.MedicareCoverageHelpline.com

TTY: 711
Call To Speak To
A Licensed
Insurance Agent

iSpot tv

Impact on Taxpayers

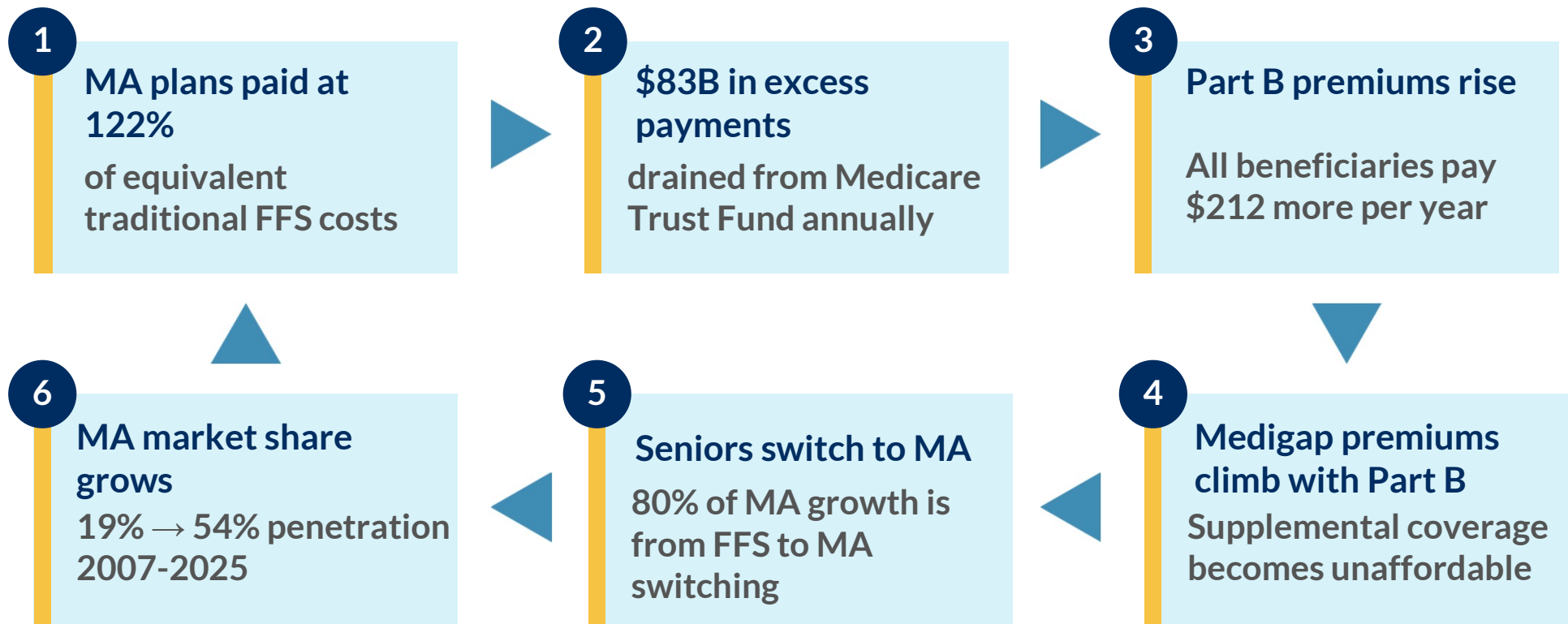
In 2025: A 22% spending increase in
Medicare Advantage plans over
Traditional Medicare...

...costing an additional \$83 billion
per year



The Medicare Advantage Loop

WE PAY, INSURERS PROFIT



Sources: MedPAC (2024), Joint Economic Committee/WSJ (2026), KFF (2025), Health Affairs (2024)

Medicare Advantage

Impact of Medicare Trust



**HOW IS THIS
POSSIBLE?**

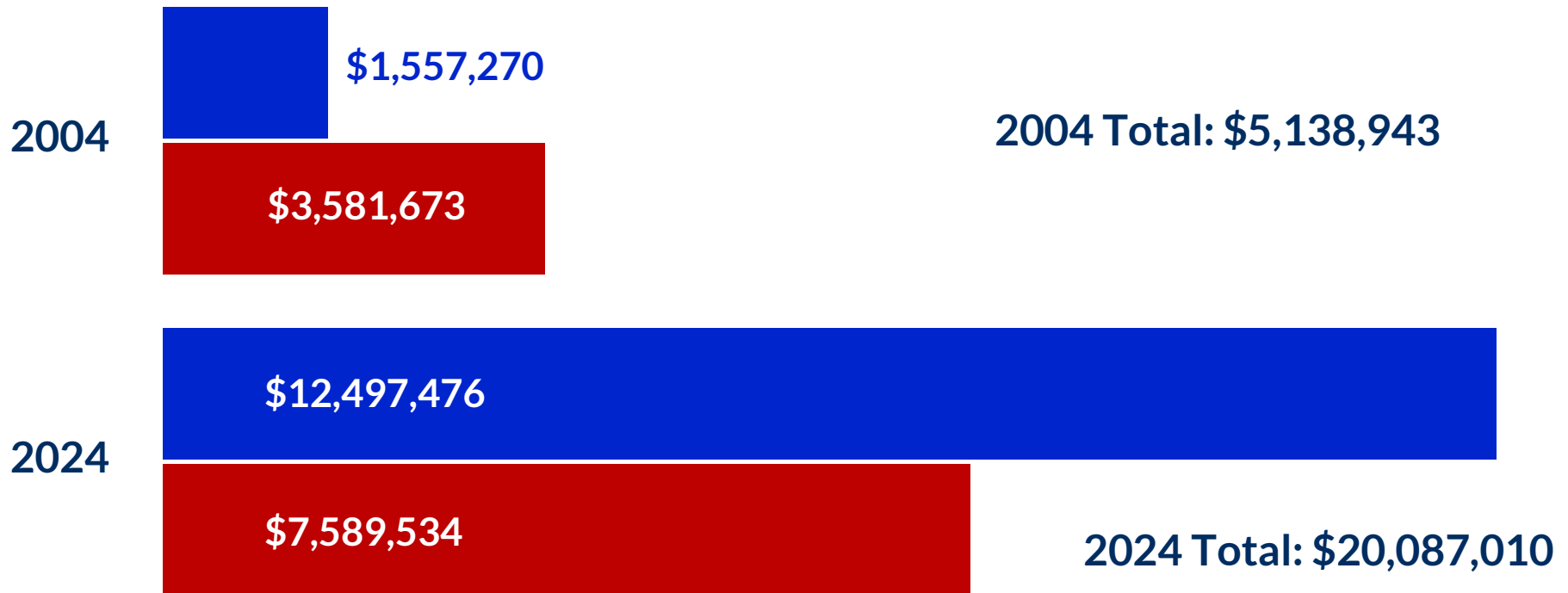
Front Groups

- Insurer-funded front groups posing as patient advocates
- AI-assisted astroturfing and misinformation



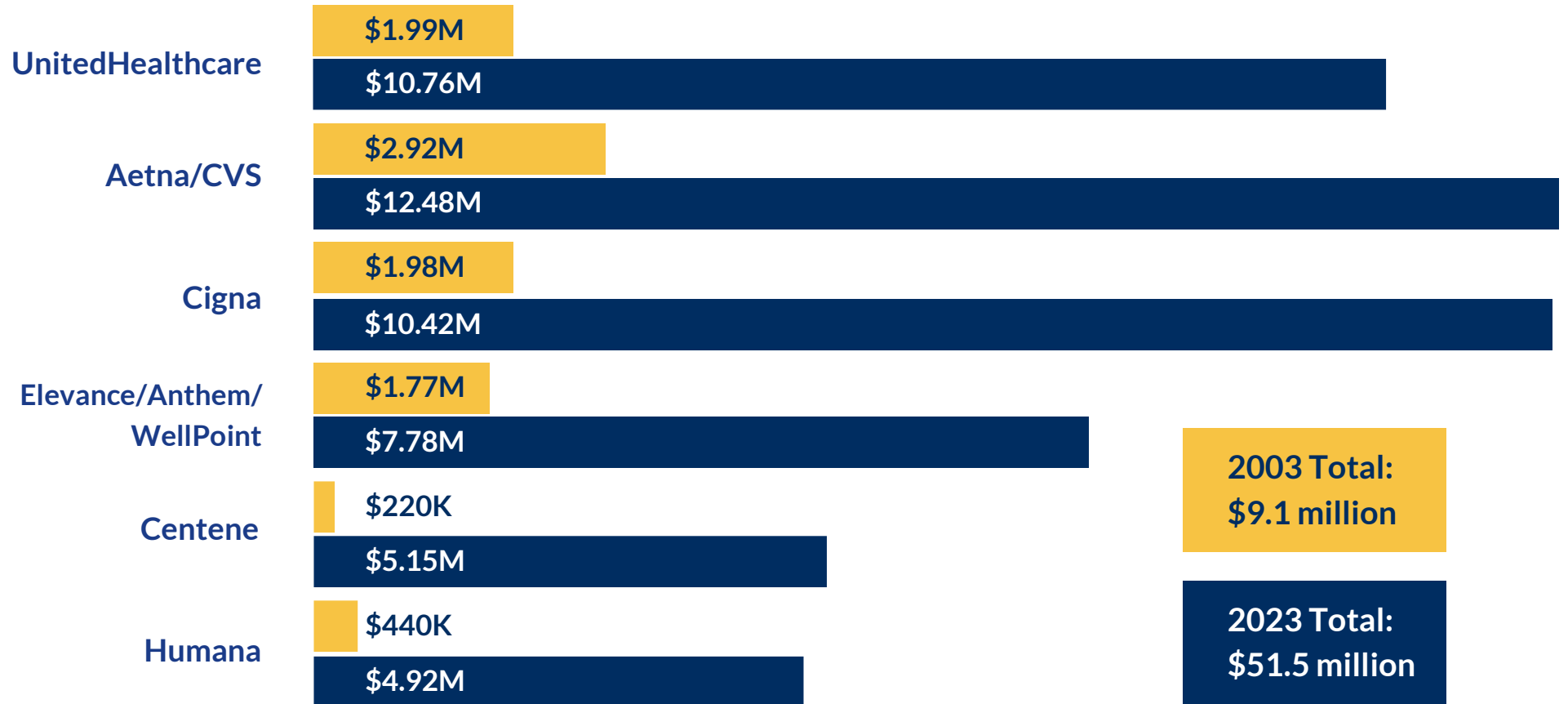
Health Insurance Campaign Spending

TOTAL DONATIONS BY PARTY, 2004 vs 2024



Spending by BCBS, Centene, Cigna, CVS/Aetna, Humana, and United. Source: OpenSecrets.org

Health Insurance Lobbying ■ 2003 vs. 2023 ■



Note: Centene's lobbying began in 2007

The Draculas of Healthcare



A Growing Bipartisan Issue



“One of the 4-5 things I wish to get accomplished in Congress is to put Medicare Advantage back into the space where it was supposed to be.

Insurers like United have fraudulently played a system that reaps profits for them but screws over those who actually deliver the care. The executives of the company know this, especially the ones with medical degrees.”

REP. GREG MURPHY, MD (R-NC)

Current Medicare Advantage Legislation

S.1816 - Improving Seniors' Timely Access to Care Act

Sen. Marshall (R-KS), with 61 bipartisan co-sponsors

S.2879 - Medicare Advantage Prompt Pay Act

Sens. Cortez Masto (D-NV) and Blackburn (R-TN)

H.R.4559 – Prompt and Fair Pay Act

Reps. Doggett (D-TX) and Murphy (R-NC)

S.1105 – No UPCODE Act

Sens. Cassidy (R-LA) and Merkley (D-OR)



Current Physician Shortage Legislation

S.2954 Health Care Workforce Expansion Act

Sens. Sanders (D-VT) and Merkley (D-OR)

S.1380 - Specialty Physicians Advancing Rural Care Act

Sens. Rosen (D-NV) and Wicker (R-MS)

H.R.3890 - Resident Physician Shortage Reduction Act

Reps. Sewell (D-AL) and Fitzpatrick (R-PA)



Current Nursing Shortage Legislation

S.1874 - Title VIII Nursing Workforce Reauthorization Act

Sens. Merkley (D-OR) and 12 bipartisan cosponsors

S.2759 - Healthcare Workforce Resilience Act

Sens. Durbin (D-IL) and 11 bipartisan cosponsors

H.R.3333 - MORE Nurses Act

Reps. Costa (D-CA) and Kiggans (R-VA)



Break Up Big Medicine Act

Sens. Warren (D-MA) and Hawley (R-MO)

Aims to:

- Break up large, vertically integrated insurance conglomerates
- Make it illegal to own both a medical provider and an insurer, PBM, or drug wholesaler
- Increase transparency, protect independent pharmacies and practices, and reduce costs



A Revenue Cycle Solution

Hold Medicare
Advantage to the same
standards as
Traditional Medicare



A MA MAC Would:

- **Standardize prior authorization processes**
- **Eliminate bad faith denials**
- **Reduce admin burden for providers**
- **Enforce timely, fair payments**
- **Provide Congressional oversight**
- **Rein in insurer abuse**



Senator Chuck Grassley

Participants

- Iowa physicians
- Hospital CEOs and CFOs

Topics

- Clinical decision
- Reduced authorizations
- Denials and reimbursement



Increase Lobbying Efforts

Tell your story

- Media: Local paper, TV, radio
- Representatives

Work together

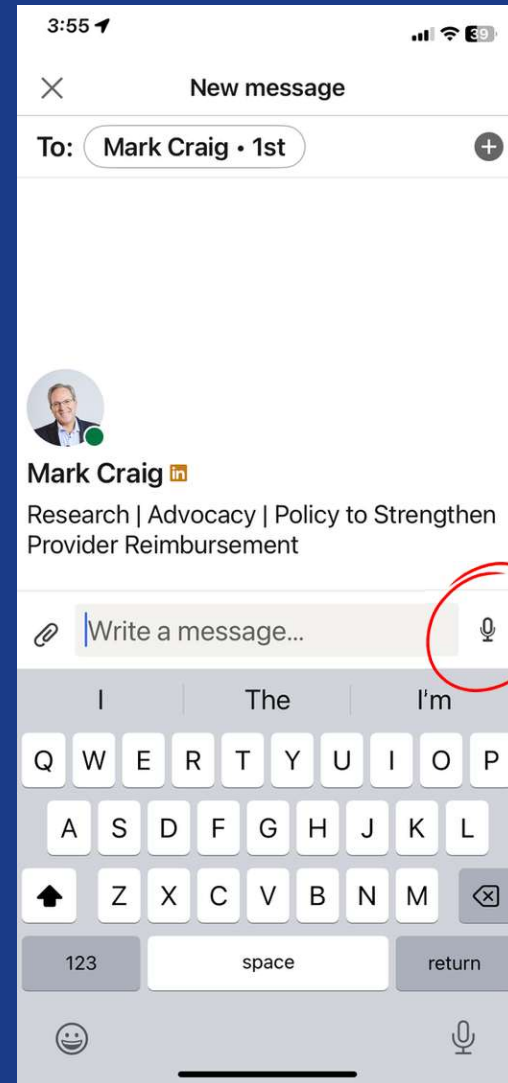
- Coalition-building
- Resource sharing



Connect

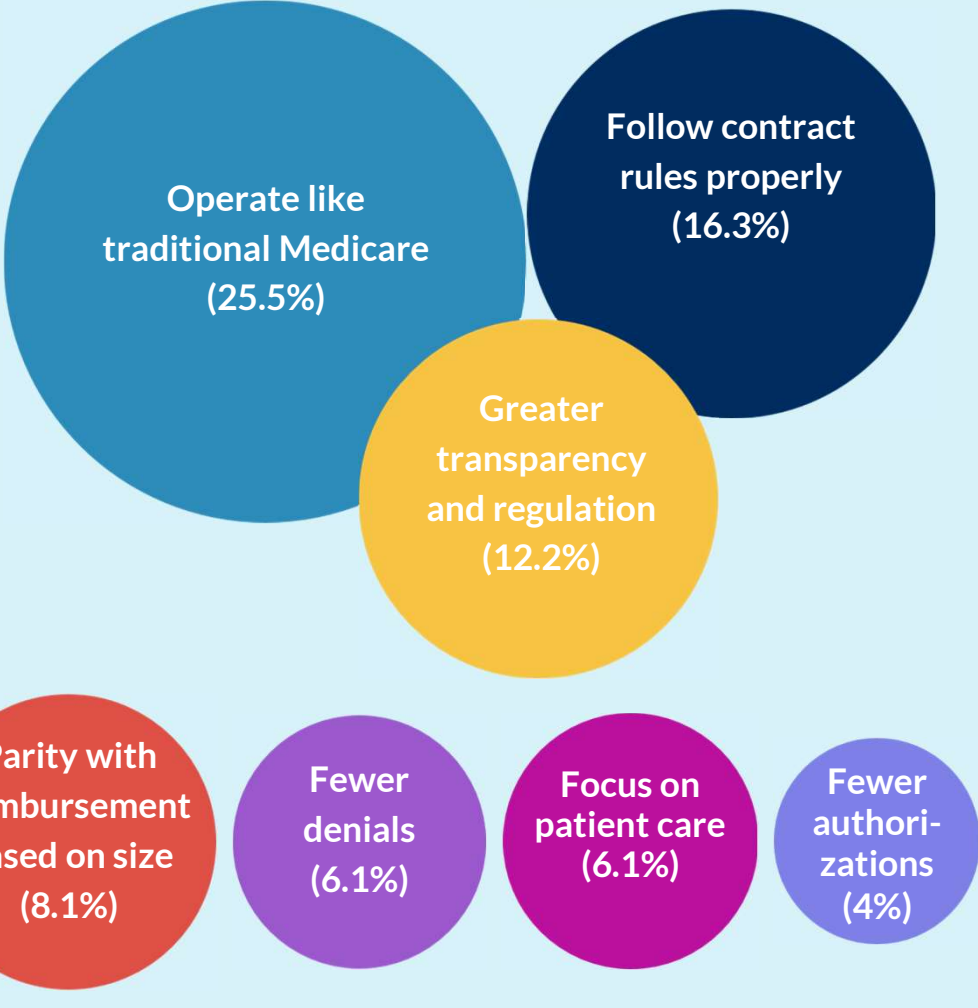


mark@writeoffwarrior.com



**If you could make one change to
how insurers operate, what would
it be?**

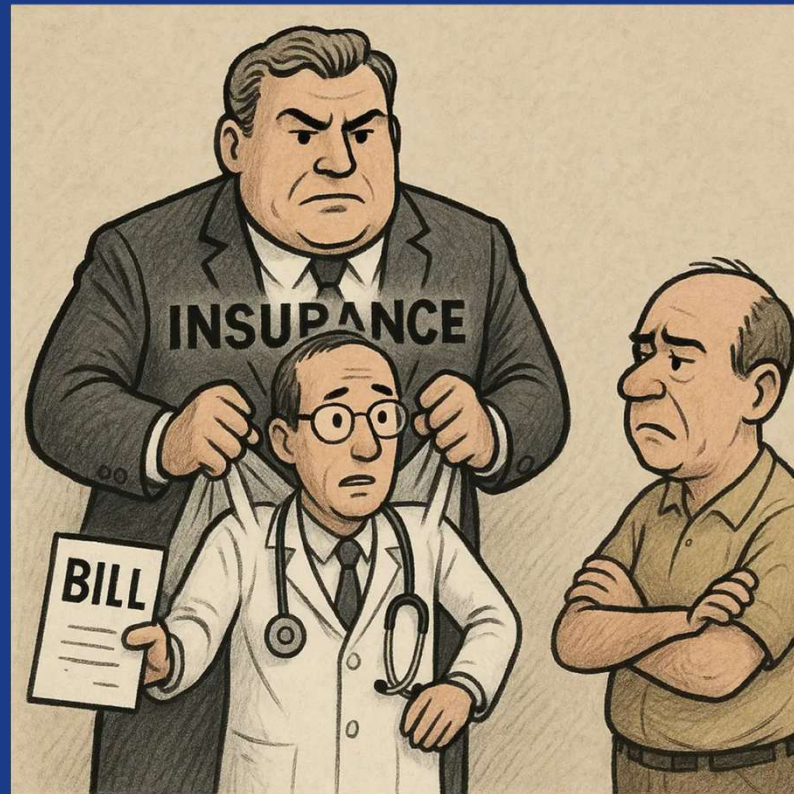
IF YOU COULD MAKE ONE CHANGE TO HOW INSURERS OPERATE, WHAT WOULD IT BE?



What is Revenue Cycle Management?

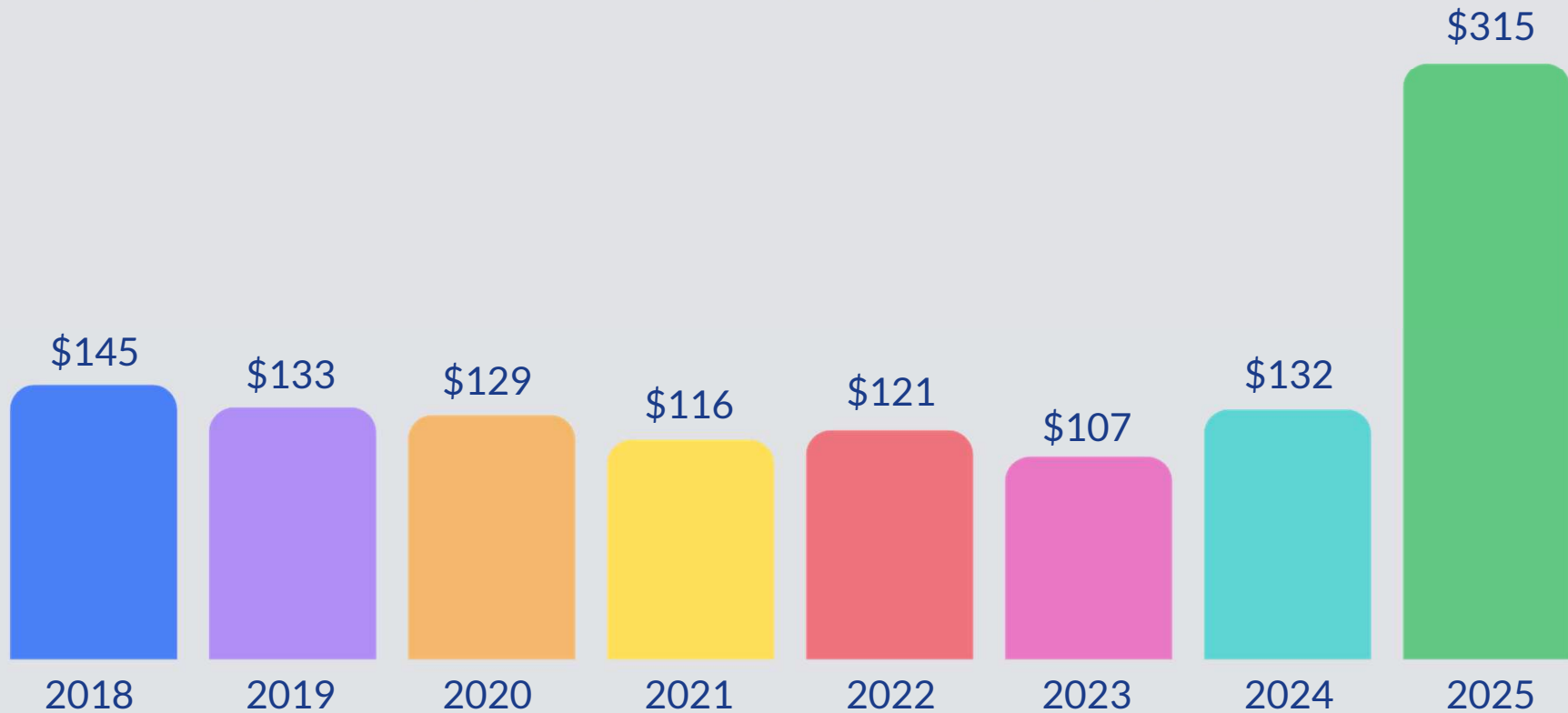


Greatest Scam in Healthcare



Medicare Advantage Deductibles

MORE THAN DOUBLED IN 2025



Source: EHealth

Communicating with Patients

- Focus on the relationship, not the transaction
- Collection Scripts:
 - Lead with empathy
 - Explain the value
 - Educate who is the real villain
- SHIP: State Health Insurance Program
 - Evaluate insurance plan

The Challenge



Honestly, I'm grateful. We talk about physician burnout, but without revenue cycle teams fighting through this maze, we wouldn't be able to provide patient care.

Connect



Follow-up Resources:

- AI in Revenue Cycle Management
- The New Science of Patient Collections
- Slide Deck PDF

mark@writeoffwarrior.com | 678-699-7262

