

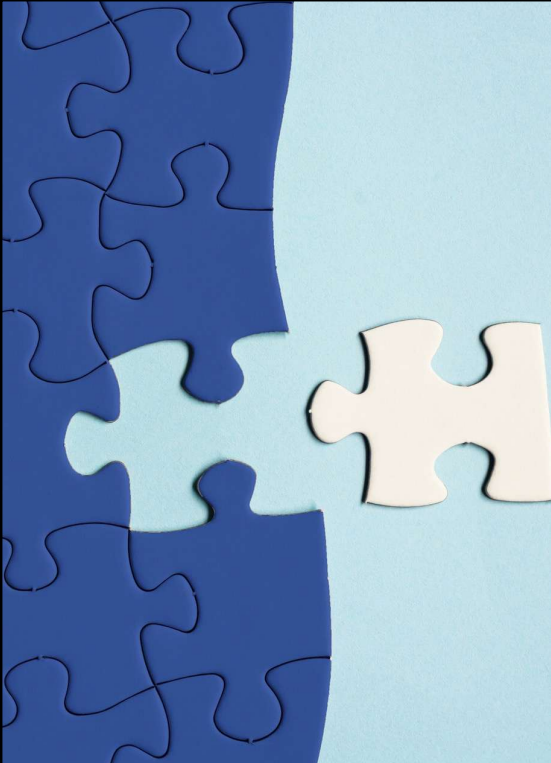
# PREYED ON:

## How Insurance Corporations Are Bleeding Hospitals



Mark Craig

1



### 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

2

## 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.



3

## The Cards Are Stacked Against Him

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



4

# Nearly 50% of MA Claims Denied



5

# Loss of Critical Services



Maternity Unit



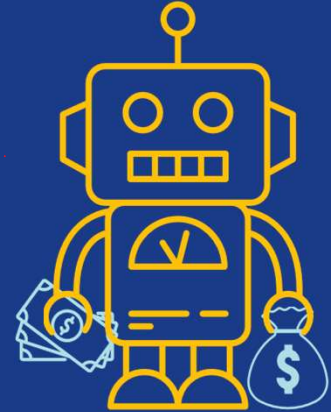
ICU

6

## \$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

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

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## Getting Started

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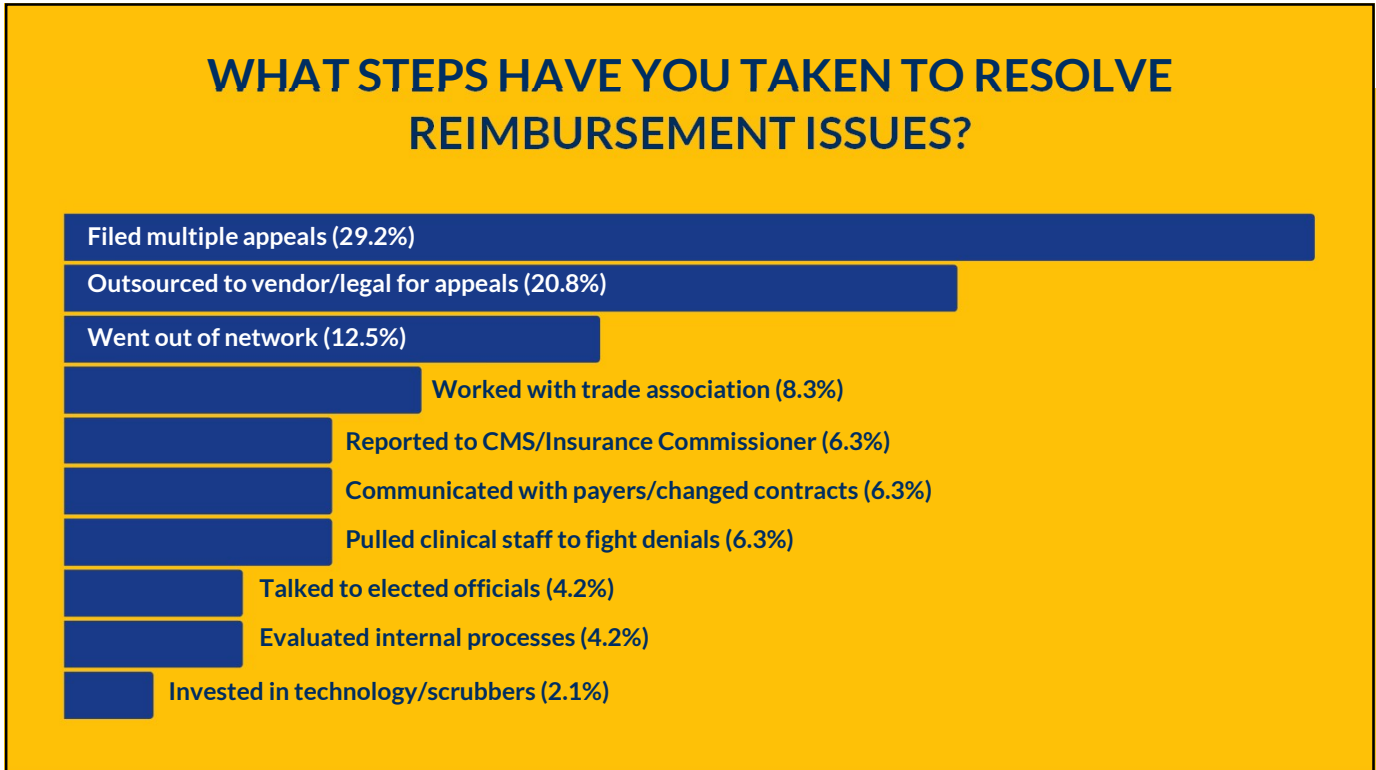


## What Steps Have You Taken to Resolve Reimbursement Issues? (Top 3 Ranked in Order)

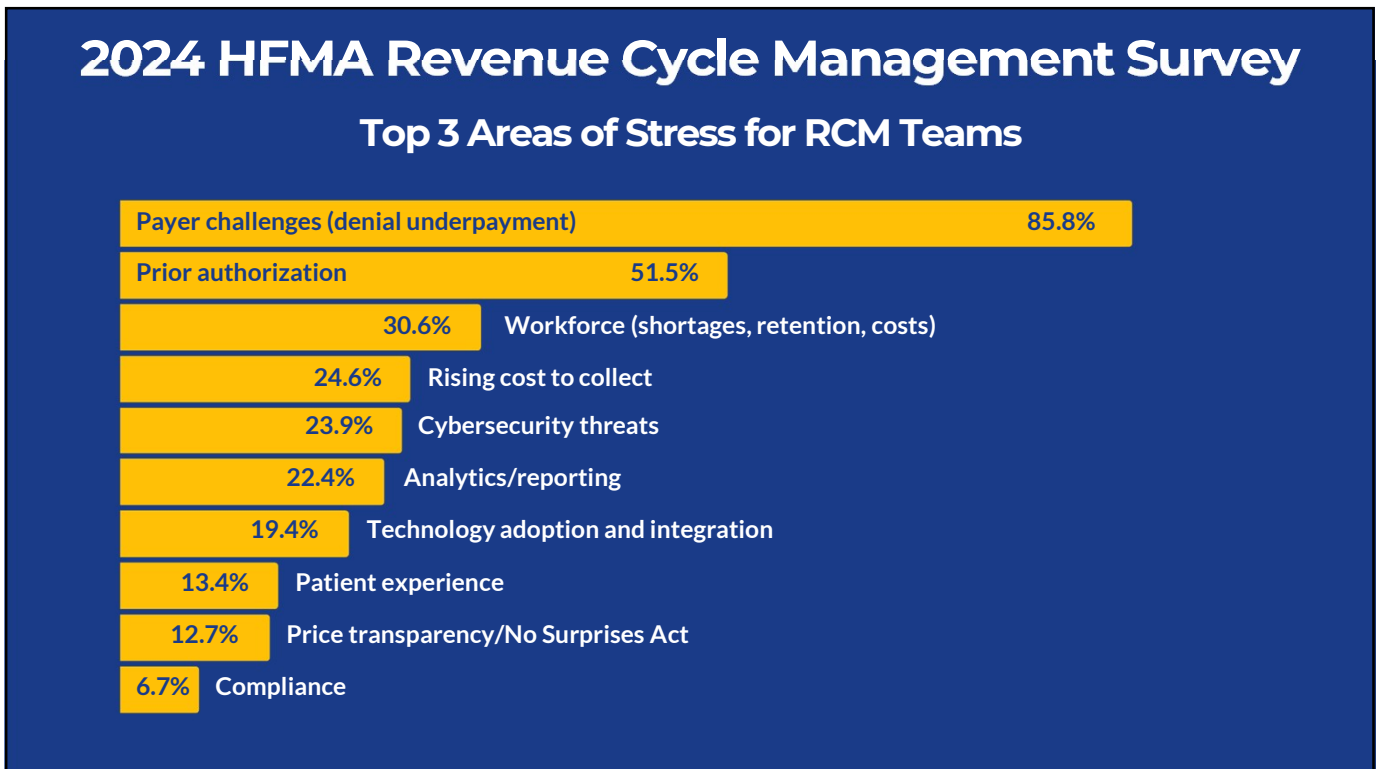
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# Payer Playbook #1

## The Care Blockade

- Prior Authorization
- High Deductibles and Copays
- HMO Enrollment and Referral Requirements
- Network Narrowing




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**Payer Playbook #1: The Care Blockade. Which tactic hits your department hardest?**

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# Payer Playbook #2

DELAY AND DENY PAYMENT AFTER CARE IS DELIVERED

## DELAY AND UNDERPAY

- AI-Driven Utilization Management
- Downcoding
- Observation Status Reclassification
- Claim Edits and Technical Denials
- Contractual Adjustment Manipulation
- Take-backs and Recoupments




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Payer Playbook #2: Delay & Deny. Which post-care payment tactic drains your revenue cycle team the most? Pick the top 3

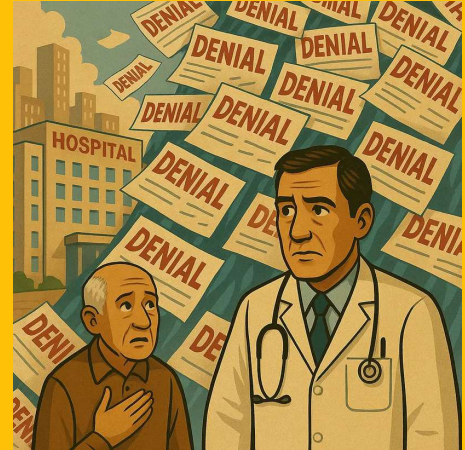
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## It's Going To Get Worse

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



17

## Fight Fire with Fire

- AI for prevention
- Underpayment evaluation
- Automated appeals generation
- Repeatable appeals playbook and processes

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



18

## Payer Score Card

- Payer Name
- Authorization Turnaround
- Denial Rate
- Days to Pay
- Appeal Overturn %
- Response Rate/Days
- Payment Accuracy
- Takeback Recoupment



19

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

20

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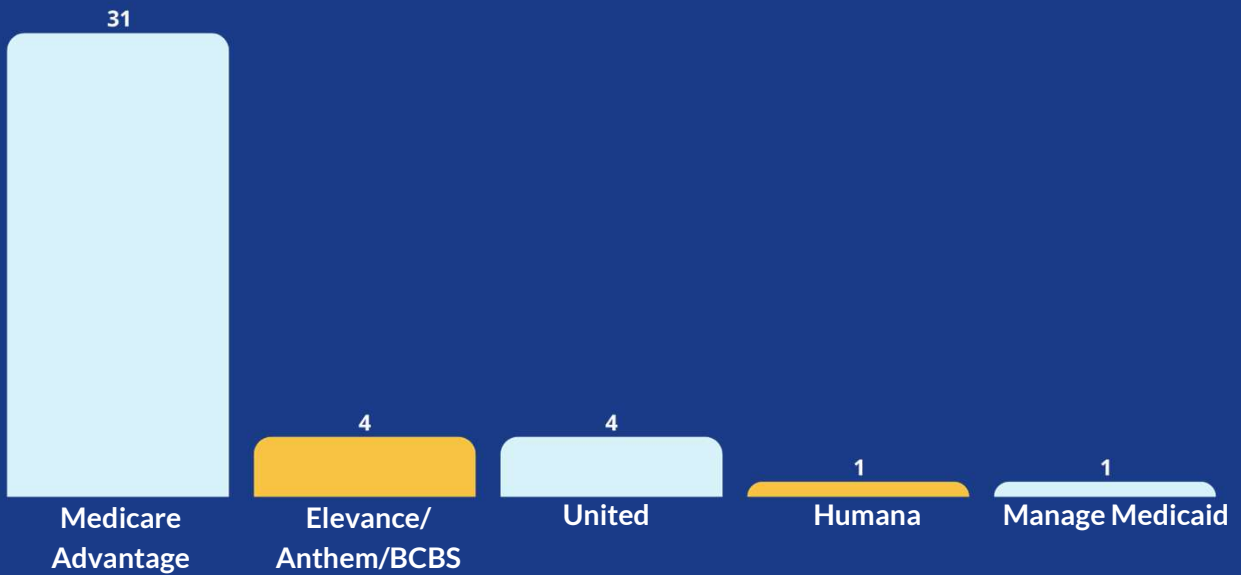
Which payer classification gives your organization the most challenges?

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### WHICH PAYER IS THE MOST CHALLENGING TO WORK WITH?



22

## What makes Medicare Advantage so challenging?

23

### WHAT MAKES MEDICARE ADVANTAGE SO CHALLENGING?



24


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

25



**If you could remove one payer tomorrow, who would it be?**

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## Quote From Study



UnitedHealthcare is Satan,  
and Humana is his sister.

Revenue Cycle Director, NE



27



28

## 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.



29

## 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

30

## Kansas

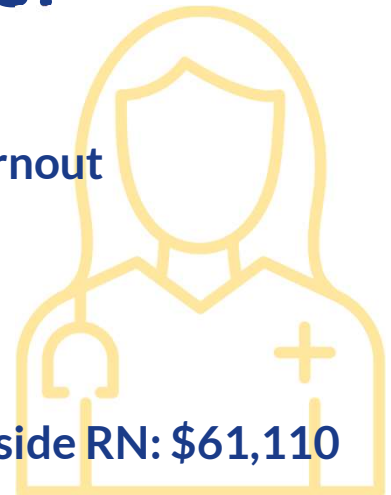
- 71 out of 105 counties are underserved
- One provider for 3500+ people in HPSAs
- 48% of residents will practice out of state
- Projected to be 2,102 doctors short by 2030
- 13th-worst nationally in shortages

Sources: Cicero Institute, AAMC, Health Resources and Services Administration

31

## 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

32

## Kansas Nurses

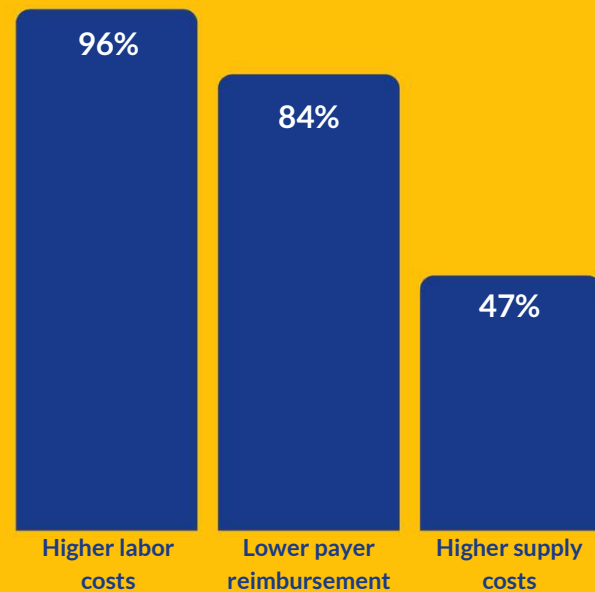
- Currently 18,000 RNs and 28,000 CNAs short
- 31% of RNs work over 40 hours/week
- #47 nationally in nursing pay
- 26% of RNs and 23% of LPNs plan to retire in the next five years

Sources: KU Medical Center, nurse.org

33

## HFMA Health System CFO Pain Points 2024

Top Causes of Margin Pressure




34

**Which position is the most challenging to fill?**

35

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**Which position is the most challenging to fill?**

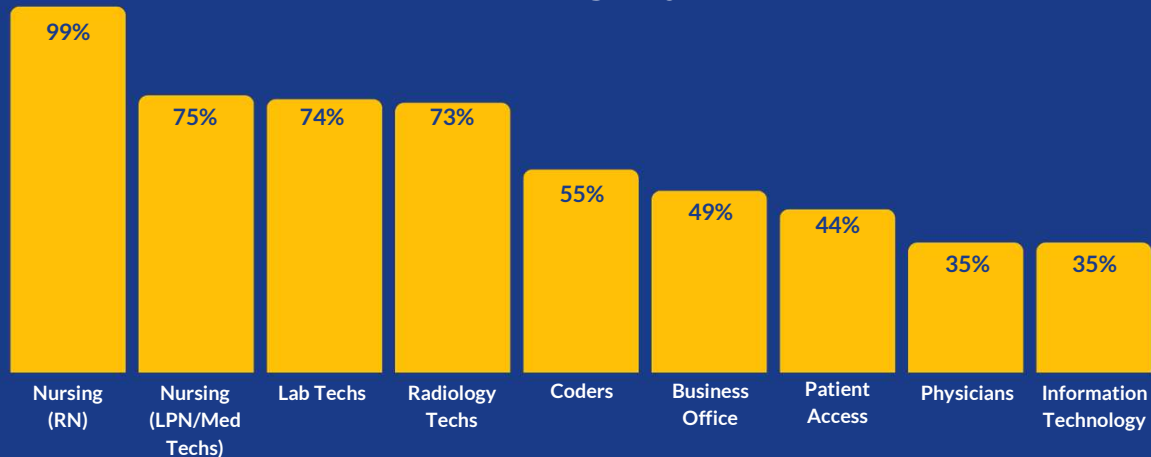
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## HFMA Health System CFO Pain Points 2024

### Labor Shortage by Role



*Nursing shortages have a significant impact on health system margins.*

37

## 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

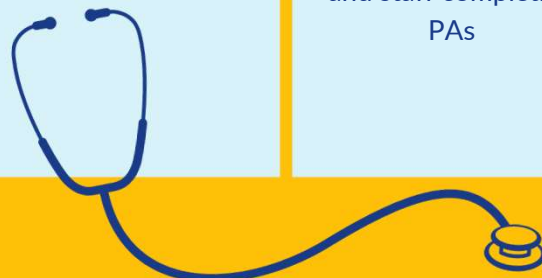
**95%**

say that PA increases physician burnout

**13 Hours per Week**

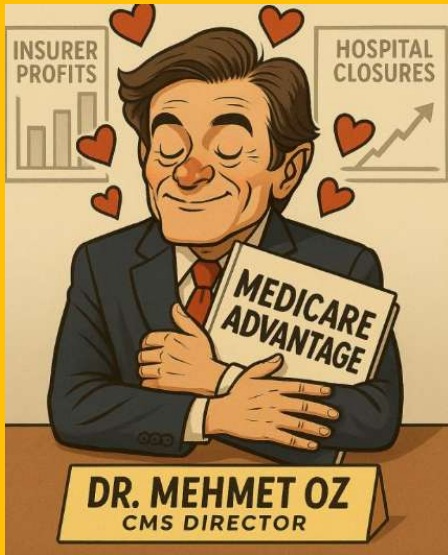
spent by physicians and staff completing PAs

Source: AMA



38

## Dr. Oz, CMS Director



“Staging a Coup Against Traditional Medicare”

39

## Health Insurance Profit 2003 - 2023



40

## 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

41

## Targeting Seniors



October 1 - December 7, 2022:

643,852 ads for Medicare Advantage Plans

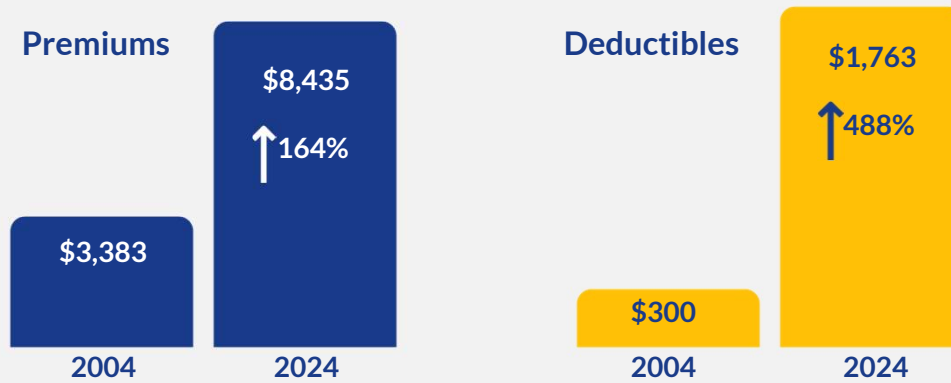
9,500 ads per day

**AARP**  
 Medicare Advantage  
 from  **UnitedHealthcare**

Source: KFF

42

## A System Built for Insurance Profit



Source: KFF

43

## 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**

Source: National Bureau of Economic Research

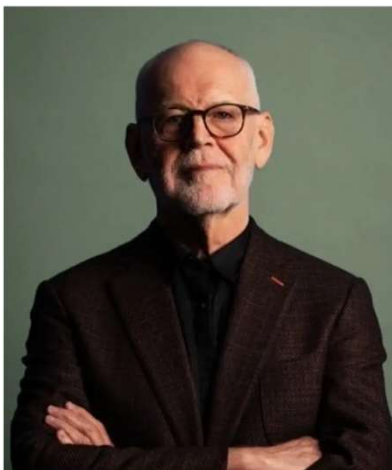
44

# Medicare Advantage

## “The Greatest Corporate Steal in American History”

45

### Wendell Potter



46

# Impact on Taxpayers

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

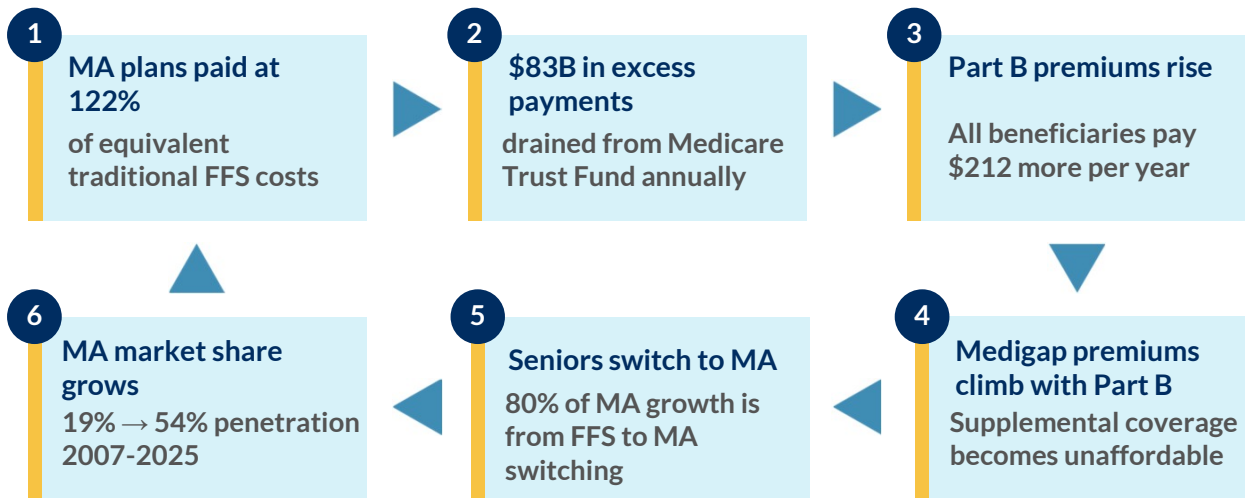
...costing an additional \$83 billion per year



47

## The Medicare Advantage Loop

WE PAY, INSURERS PROFIT



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

48

# Medicare Advantage

## Impact of Medicare Trust



49

**HOW IS THIS  
POSSIBLE?**

50

## Dark Money

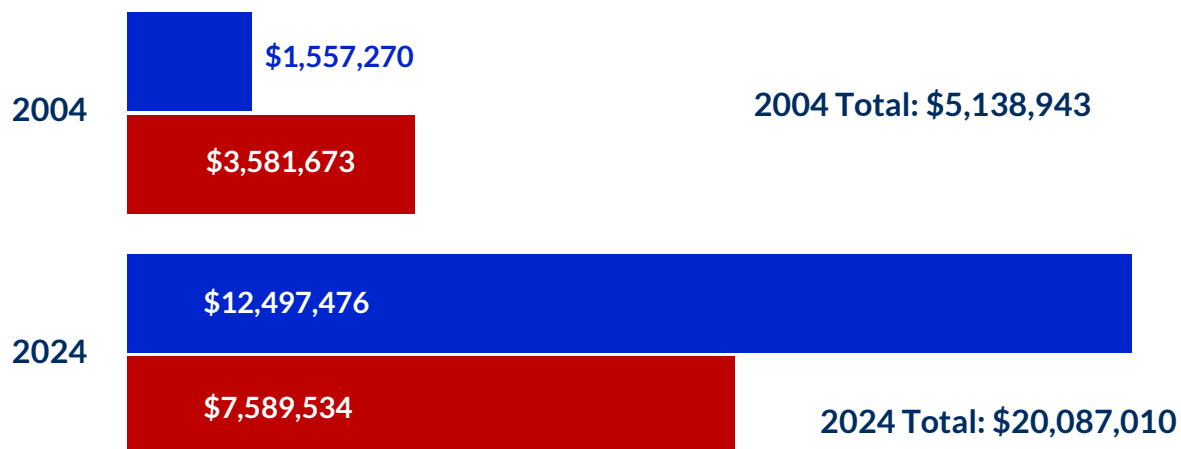
- Untraceable and impossible to quantify
- Insurer-funded front groups posing as patient advocates
- AI-assisted astroturfing and misinformation



51

## Health Insurance Campaign Spending

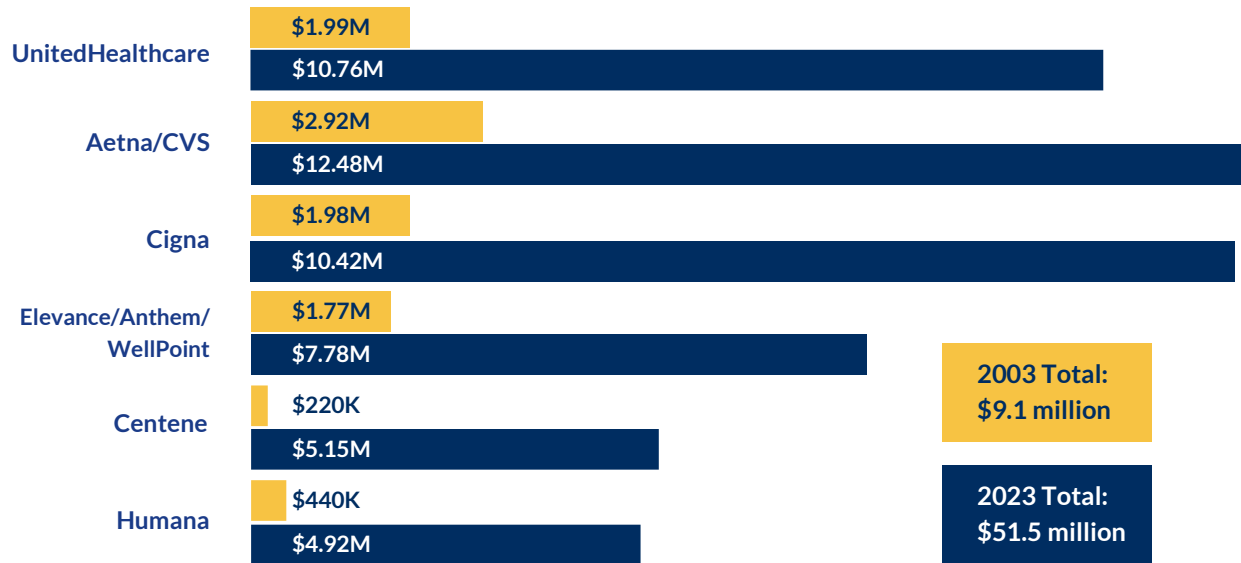
TOTAL DONATIONS BY PARTY, 2004 vs 2024



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

52

# Health Insurance Lobbying ■ 2003 vs. 2023 ■



Note: Centene's lobbying began in 2007

53

## The Draculas of Healthcare



54

## 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)

55

## 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)*



56

## 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)*



57

## 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)*



58

## 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



59

## A Revenue Cycle Solution

Hold Medicare  
Advantage to the same  
standards as  
Traditional Medicare



60

## 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



61

## Senator Chuck Grassley

### Participants

- Iowa physicians
- Hospital CEOs and CFOs

### Topics

- Clinical decision
- Reduced authorizations
- Denials and reimbursement



62

# Increase Lobbying Efforts

## Tell your story

- Media: Local paper, TV, radio
- Representatives

## Work together

- Coalition-building
- Resource sharing

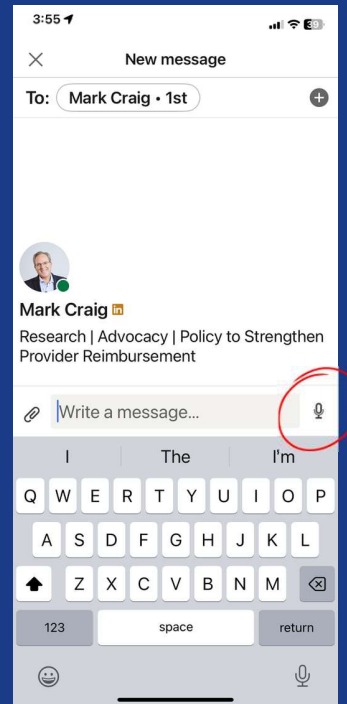


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# Connect



mark@writeoffwarrior.com



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

65



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

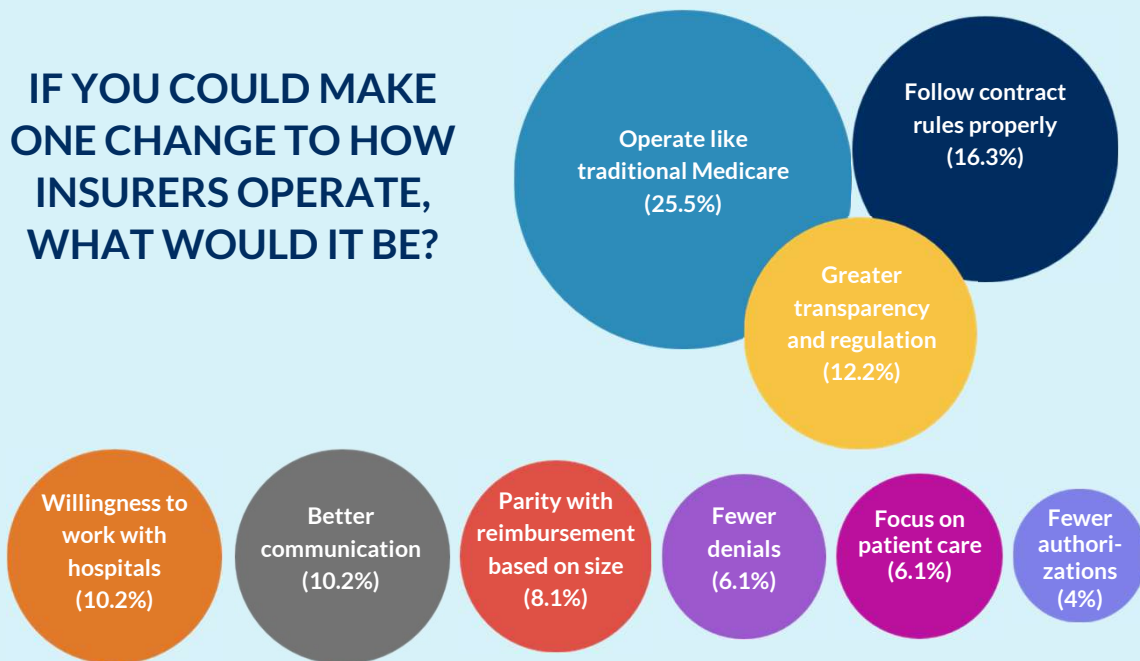
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## IF YOU COULD MAKE ONE CHANGE TO HOW INSURERS OPERATE, WHAT WOULD IT BE?



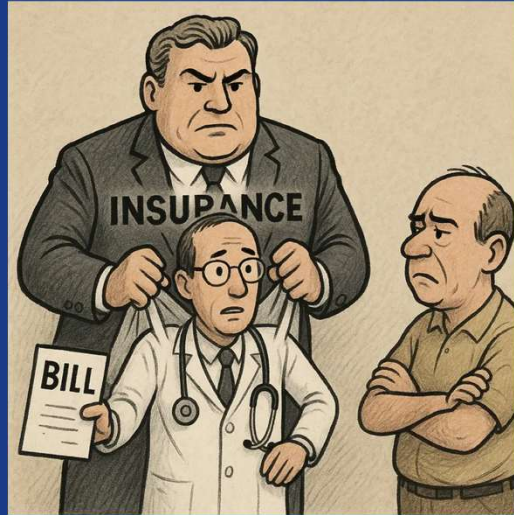
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## What is Revenue Cycle Management?



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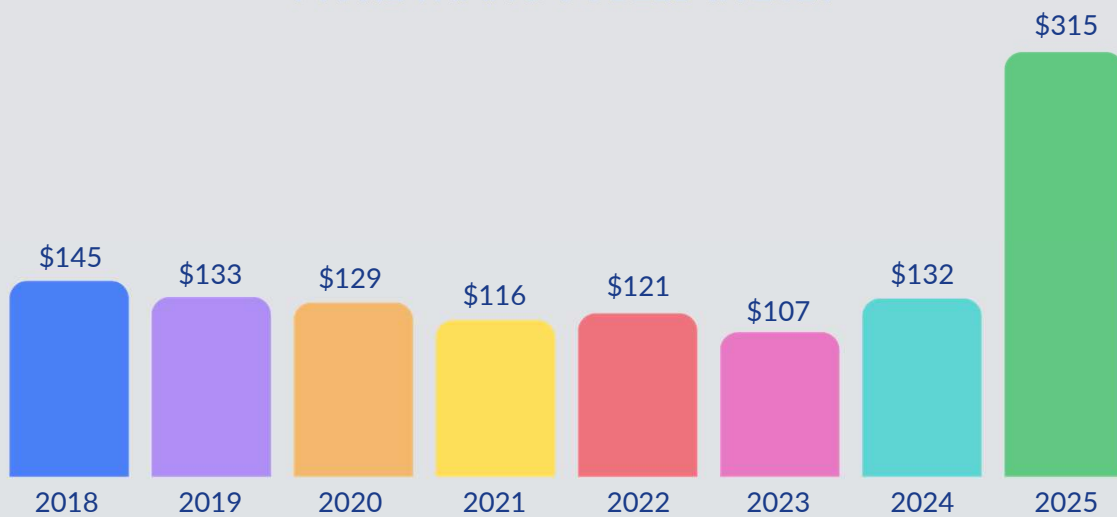
## Greatest Scam in Healthcare



69

## Medicare Advantage Deductibles

MORE THAN DOUBLED IN 2025



Source: EHealth

70

## 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

71

## The Challenge

72



**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.**

73

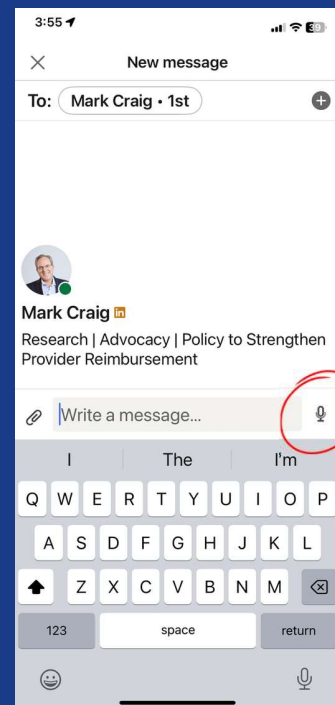
# Connect



## Follow-up Resources:

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

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74