

Humana members to pay more for University of Utah Health Care services starting Thursday

By ALEX STUCKEY | The Salt Lake Tribune

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Utahns with Humana insurance will have to pay more for health care at the University of Utah starting Thursday.

Officials with the U. have decided not to renew their agreement with the carrier, meaning their plans and services will be considered out-of-network for Humana members.

Notices were sent the first week of August to Humana-insured patients who had seen the U.'s health care providers in the past year — about 3,000 individuals .

Mark Zenger, the U.'s senior director of payer relations and contracting, said in an email Wednesday that Humana members will pay higher amounts if they receive services at the U., but how much higher depends on what plan they have.

Now that the U. is considered out-of-network for Humana, "we have no agreement at defined rates and terms," Zenger said. "The individual or group plan may or may not have out-of-network benefits. So the members may have certain coverage that Humana will still provide payment for."

Some exceptions may be made if the services are unique, such as the U.'s burn unit, he said.

Jason Stevenson, Utah Health Policy Project's education and communications director, said the change could be a "considerable disruption" to some individuals' access to health care.

"For people who can't justify an exception and are seeing a doctor at the University of Utah, they'll have to find someone new and that's tricky," Stevenson said.

The change is just the most recent hit to Utahns with health insurance through Humana.

The carrier recently confirmed it will not be available for Utahns purchasing next year's health insurance on the individual marketplace, leaving the state with just three carriers on the exchange in 2017: SelectHealth, University of Utah Health Plans and Molina.

Right now, Humana covers fewer than 10,000 of the about 164,000 Utahns who purchased insurance on the exchange.

The Affordable Care Act created online insurance marketplaces that allow consumers to find the best plan to fit their needs by comparing prices and networks. They also can qualify for federal tax credits that reduce the overall cost of coverage.

Officials with the U. did not know Humana would no longer offer coverage on the exchange until after they decided not to renew the agreement. So, even if the U. had renewed, Zenger said, the "individual commercial insured members would still have to switch plans effective" Jan. 1.

Right now, the U. is not part of the carrier's marketplace plan network so the change will not effect those members, said Marina Renneke, a Humana spokeswoman.

The U.'s decision not to renew its agreement with Humana was made, largely, because the U.'s hospitals and providers already were considered out-of-network for a number of individuals insured by Humana, he added.

"A very large percentage of existing Humana members already were getting steered away from University of Utah Health Care," Zenger said.

Renneke said in an email the company is prepared to work out a new contract with the U., but "so far we've been unable to come to terms on a new arrangement that is fair and reasonable for our health plan members and customers."

Humana also notified its members of the "potential discontinuation" a month in advance, Renneke said, adding that the carrier has "comprehensive processes in place to ensure a smooth transition of care for our affected members. The University of Utah has agreed to continue to accept Humana members on an as-needed and out-of-network basis."

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