

Healthcare advocacy experts aid workers

Healthcare advocacy groups gain acceptance among employers — and can reduce payments for employees.

By John Dorschner

When Nelly Gonzalez's primary doctor referred her to a specialist, she figured he too would be part of the same Cigna network and require only a small co-payment.

But the bill was a shock: \$3,000. She complained and found the specialist was in a Cigna network, but not for her particular insurance plan.

Most times, that's how the story ends:

The patient stuck with a huge, unexpected medical bill. But Gonzalez, an employee at Gulliver Schools, had access to Health Advocate, a Pennsylvania company that specializes in helping people deal with complex healthcare problems. Health Advocate interceded with Cigna. The result: Gonzalez was responsible only for a \$30 co-payment.

Such advocacy programs are gaining momentum as a valuable but underused benefit at a time when many employers are shifting more healthcare costs onto workers, according to Mercer, a nationwide benefits advisor.

A RISING TREND

Mercer's 2009 survey found 53 percent of employers with more than 500 workers provided health advocacy services, up from 47 percent in 2008.

The service appears not to be widespread in South Florida, which has few large businesses, said Bruce Shanefield of Aon Consulting, but employers that use it, like Gulliver Schools, "have found it a very good solution."

James Santoro, senior director of human resources at Gulliver, said his group has been using Health Advocate for about four years, and they've been "very, very effective" in, among other things, reducing the times employees come to the human resources department needing help dealing with an insurer.

OFFERING THE SERVICE

Earlier this year, Health Advocate received a major boost in South Florida when Ryder, the global logistics company based in Miami, started offering the service to its 15,000 employees and their families.

"We just recognized that negotiating the healthcare system is difficult for everyone," said Pamela Rothstein, Ryder's senior director of employee benefits.

The benefit — provided to employees at no charge — extends to the employees' families, including parents not on the company-sponsored insurance. Parents in particular can take up huge

amounts of employees' time as they get older and sicker, with searches for specialists and getting approval from insurers.

“It's not only a time drain, it's an emotional drain,” Rothstein said. “One of the big pluses of Health Advocate is favorably impacting productivity in our organization.”

Rothstein said it's too early to measure effectiveness of the program through statistics, but in the first five months of the program, Ryder employees had 4,200 interactions with Health Advocate.

Sometimes the problems are fairly simple. Timothy Parsons, a Ryder truck driver based in Virginia, said he called Health Advocate because his dentist wasn't in the insurance network and he felt he was paying far too much. The company found another dentist he likes.

“It was just the neatest thing since popcorn,” Parsons said, adding that he had always found healthcare navigation troublesome. “They saved me quite a bit of money. And they called me three times to make sure everything went all right.”

Martin Rosen, a co-founder of Health Advocate, based in Plymouth Meeting, Pa., said the company has more than 6,000 clients and serves 18 million individuals, offering services including a nurse hot line so that a worried parent, say, can call at 2 a.m. and ask what to do about a son's 105-degree fever.

He said Health Advocate also helps people get appointments “with hard-to-reach specialists” and coordinate care.

ARRAY OF SERVICES

While other companies perform some of the services offered by Health Advocate, Rosen said his company offers a broader array of services.

Mercer, which offers its own advocacy service, emphasizes how it lightens the load on human resource departments. Such a benefit is particularly important because Mercer surveys show companies continue shifting more responsibility onto employees -- higher co-pays and more emphasis on high-deductible plans with medical savings accounts in which patients are expected to use their money wisely.