

Employers Centers of Excellence Network (ECEN) Frequently Asked Questions

[The Employers Centers of Excellence Network \(ECEN\)](#)

What is the ECEN?

The ECEN provides employees access to demonstrated, high-quality care for elective surgeries at meticulously selected Centers of Excellence (CoE) across the United States. Through the ECEN, patients receive care at little or no cost to them and employers achieve cost predictability and downstream savings.

What is a Center of Excellence?

Referred to as a CoE, the term center of excellence is used to describe a facility that is recognized for providing some of the highest levels of leadership, quality, service, and best practices in their field. Often a CoE for medical procedures is established by qualifying hospitals only, however the ECEN is groundbreaking in that it qualifies *both* the hospitals *and* individual surgeons based on quality and outcomes data. This ensures that patients receive the highest quality care throughout the entire episode of care.

When did the ECEN begin?

The ECEN was established based on and inspired by Pacific Business Group on Health (PBGH) Members' interest in supporting value-based purchasing. This program aligns with PBGH's ongoing mission to be a change agent creating increased value in the healthcare system through purchaser collaboration, innovation, and action, and through the spread of best practices. In early 2013, a group of eight forward-thinking self-insured employers came together to help PBGH design the ECEN program with the aim of selecting hospitals and surgeons throughout the nation for hip and knee replacements. Four centers were selected and the ECEN was launched in January 2014. The ECEN has since expanded to include spine surgery (2015), bariatric surgery (2016) and oncology (2019).

How are CoEs selected?

A PBGH-led team of experts developed assessment criteria and an evaluation process that includes a review of 30+ public data metrics, a Request for Information by invitation, interviews with the clinical team, an in-depth Request for Proposals application and an onsite visit to observe a patient's complete on-site experience. ECEN CoEs must demonstrate exceptional clinical outcomes and patient experience, including shared decision making. The ECEN qualifies *both* the hospitals *and* the surgeons, based on quality and outcomes data at the hospital and individual surgeon level. These data include volume and complication rates, surgeon training and experience and patient satisfaction.

Participating hospitals and surgeons must use a process known as "shared decision making," whereby patient preferences are incorporated into clinical care. CoEs submit regular performance reporting data to ECEN and undergo an in-depth review and assessment each year.

How did you choose the CoE locations?

CoEs are selected to minimize patient travel time by locating facilities in regions with a concentrated headcount of the participating ECEN employers. The ECEN is continuously expanding to meet the geographic demands of those employers.

What facilities currently participate and how does my facility apply to be an ECEN CoE?

Please contact ecen@pbgh.org to learn more about our current CoEs and the evaluation process.

What procedures are included in the ECEN?

Joint Replacements:

- Total hip replacement
- Total knee replacement

Spine Procedures:

- Spinal Fusion (cervical and lumbar)
- Total Disk Arthroplasty (Artificial Disk)
- Removal Vertebral Body
- Spine Surgery Revisions
- Scoliosis
- Laminectomy
- Discectomy
- Other inpatient complex spine procedures

Bariatric Surgery:

- Gastric Bypass
- Sleeve Gastrectomy

Oncology:

- Expert confirmation of diagnosis
- Development of recommended treatment plan in
- Collaboration with home oncologist and local care team including proactive longitudinal follow up

Additional conditions and procedures will be offered to employees through the ECEN based on participating employer demand.

Benefits to Employers

How will this impact overall healthcare quality and cost?

By encouraging employees to utilize carefully selected, high-quality hospitals and surgeons for these procedures, the ECEN reduces variation in quality and cost and increases the likelihood of optimal patient outcomes. Quality improvements and decreased costs result from improved professional care coordination, team attention to evidence-based guidelines, better discharge planning to avoid preventable readmissions, increased uniformity of practice, and measurement and feedback of patient outcomes.

How does the ECEN address cost variation?

Costs for these procedures can vary drastically from one location to another with no correlation between cost and quality. For example, there is wide cost variation for knee and hip replacement procedures within and between metropolitan areas. Blue Cross Blue Shield reports that within San Antonio, the highest price of a knee replacement is nearly three-times higher than that for the lowest priced procedure. Within Dallas, the highest price of a hip replacement is nearly four-times higher than that for the lowest priced procedure. Between Des Moines, Iowa, and New York, N.Y., knee and hip procedure prices vary more than three-fold¹.

Through the ECEN, a bundled payment is negotiated between employers and the CoE allowing for all components of the episode of care. This way, the ECEN provides demonstrated high-quality care at a predictable, reasonable cost.

Will employers pay less?

Bundled payments allow employers to pay a competitive, set price, removing the exposure to cost variation. ECEN pricing for gastric bypass and sleeve is 20-50% lower than average employer rates and surgical treatment of morbid obesity results in an individual worker productivity gain of \$2,765 per year for employers.² Lowe's' savings from avoiding unnecessary spine surgery alone was estimated at \$1.3 million. For the highest volume spine procedures, 52% of patients recommended for surgery by home providers are found by our COE

¹ <https://www.bcbs.com/sites/default/files/file-attachments/health-of-america-report/HoA-Orthopedic%2BCosts%20Report.pdf>

² <https://asmbs.org/resources/metabolic-and-bariatric-surgery>

providers to not be appropriate surgical candidates. More than 90% of those patients heed that recommendation and do not go on to have surgery at home through traditional insurance. Early estimates around the newer ECEN spine program have indicated savings of an additional \$1 million to \$2 million per year.³

Integrating with Health Plans

How is this different from health plan Center of Excellence programs?

There are several aspects that set the ECEN apart from health plan and other CoE programs.

- Participating ECEN CoEs collaborate with each other, sharing best practices to ensure consistency of care received by patients across the program. Mandatory collaborative calls and an annual in-person summit enable development of consistent guidelines and discussing best practices supports continuous improvement.
- The ECEN qualifies *both* the hospitals *and* the specific surgeons based on volume, quality and outcomes data at the hospital and individual surgeon level.
- Focus is made on the complete patient experience, providing continuous support from the initial evaluation through the return home post-operatively, working collaboratively with the patient's local providers.

How are health plans involved?

The ECEN benefit is carved out of health plans and does not interfere with existing health plan relationships or benefit designs. Health plan involvement is limited to interactions that ensure the program is seamless for patients.

The Procedures

How will covering these procedures benefit patients and employers?

Eligible employees and covered dependents who choose a CoE will receive consultations and care covered at 100% without deductible or coinsurance. Depending on the procedure being performed, travel, lodging and living expenses in the CoE city for the patient and a caregiver are covered 100%. And, better outcomes as a result of improved quality of care can increase patients' quality of life and decrease the cost and intensity of aftercare.

ECEN brings long-term value to employers by lowering the downstream costs of high-volume procedures. Poor quality care can have significant long-term consequences. CoE utilization can result in reduced rates of preventable complications, faster return to work and fewer incidents of costly surgical revisions.

Patient Care

Who can participate?

Employees and their covered dependents can receive care at a CoE based on specific eligibility criteria determined by each employer. The program is voluntary and employees or their covered dependents can elect to receive care from local providers and incur routine costs (depending on the condition benefit per employer).

Who handles travel and care management?

Health Design Plus (HDP), a healthcare management company with expertise in administering travel surgery programs, handles all travel logistics and care management. HDP has a team of nurse managers and member advocates who work with the CoEs to guarantee that exceptional care is provided for each patient.

How is patient follow up care handled?

With patient input, a team of clinicians works together to determine the appropriate course of treatment. Consistent communication and standardized handoffs ensure that each patient's home provider is prepared to

³ <https://hbr.org/2017/06/why-ge-boeing-lowes-and-walmart-are-directly-buying-health-care-for-employees>

manage post-operative care. A CoE patient navigator provides patients and their caregivers 24/7 support to help guide them through this process.

Is it safe for these patients to travel?

The CoE evaluates each patient before they are accepted into the program. This review includes overall physical health and fitness for travel. Once the procedure is completed, patients stay in the hospital and then transfer to nearby accommodations where they will receive outpatient physical therapy and post-op clinical care. All patients must be cleared to travel by the CoE before departing for home. Additionally, the CoE provides a handoff to the patient's local providers for follow up care management.

Patients are required to have a caregiver accompany them to the CoE. Caregivers must meet physical health standards and sign a form committing to their care obligations as they play a critical role in assisting patients physically and emotionally throughout the process and as they travel back home.

What if a CoE says that a patient should not have the procedure?

CoEs are established, accredited programs and the participating physicians are incentivized based upon patient outcomes rather than the number of procedures performed. They make recommendations that are in the best interest of the patient and establish plans for alternative treatment options if surgery is not appropriate.

If a CoE provider recommends against surgery, an alternative treatment plan will be communicated to the patient and the patient's home physician. If a CoE recommends against surgery and a patient decides to follow another physician's surgery treatment plan, they will have to pre-certify the procedure with their medical administrator and may be responsible for 100% of that surgery cost (depending on the employer's benefit design for that procedure).

The ECEN vs Similar Programs

How is this different from medical tourism?

Medical tourism often refers to patients traveling long distances, either domestically or internationally, and spending thousands of dollars to have surgeries performed. Through the ECEN, employers are providing a benefit that allows eligible employees and their covered dependents to access selected CoEs across the country in order to receive high quality of care, at no cost to them.

Are there any similar programs?

Other employers have engaged in direct contracts with high quality providers, but the ECEN is unique in that it is the first time a group of employers have joined together to ensure access to high-quality care at reduced cost for employees. The ECEN also facilitates collaboration across the participating centers and provides concierge level support for patients and their caregivers.

Additional Information

What type of employers can participate?

Participating employers represent a wide range of industries. There are no restrictions related to industry focus or company size.

What is PBGH?

The Pacific Business Group on Health is a not-for-profit business coalition that leads efforts to transform U.S. healthcare by using the combined influence of some of the largest public and private purchasers of healthcare in the United States.

Where can I get more information on the ECEN?

By visiting www.pbgh.org/ecen or email ecen@pbgh.org.