



At the intersection of business and health

REGISTER HERE

Join us in person for:

IS BMI A VITAL SIGN ?

SEPTEMBER 10, 2024
11:30-1:00PM

Helmerich Research Center
OSU Tulsa North Campus

Free To Attend - Box Lunch Provided

Obesity is one of our most urgent health concerns - and one of the most treatable. This event will provide valuable insights into the GLP-1 revolution and its impact on medical and pharmaceutical discussions, as well as its influence on long-term health plan costs associated with obesity and diabetes.

Co-Sponsored by: The Collective and Gallagher
Find the campus map when you SAVE TO YOUR CALENDAR

Mark Cuban - Disrupting Healthcare and Promoting Transparency

You've probably heard of Mark Cuban Cost Plus Drugs. Cost Plus was originally set up with the goal of making prescription medications cheaper by changing the middle-man delivery model (i.e. PBM). There are now 2500 different drugs available, including some brand names, and the price is transparent. Cost Plus also manufactures drugs and has expanded partnerships with many other health industry companies.

Cuban's next foray into transparency? Publishing the contracts his company makes with its customers - like hospital systems. That's new and different. Traditionally outsiders, (like employers), have not been privy to this type of pricing agreement. If this information does become public, it could benchmark drug pricing and make for some interesting conversations during health plan negotiations. Read the full article below.

Does Price Transparency Really Exist for Employers?

Approximately 160 million Americans receive health insurance coverage through an employer or a union. Self-funded employers typically rely on insurance carriers and third-party administrators to negotiate prices and manage their benefits but may have little insight into the prices negotiated on their behalf.

Employers have a fiduciary responsibility to administer benefits “solely in the interest of participants and beneficiaries.” (Reference the CAA). This is a difficult obligation to meet without transparent and usable data.

Join our sister coalitions, (Chicago/Florida), on September 12, 2024; 12:00-1:30pm CST (virtual). Register below to learn how to take back your power and protect your fiduciary responsibilities. Attend this FREE webinar to learn:

- Ways to access your own de-identified claims data
- How variations in contract language can change the game
- Practical steps to hold carriers, TPAs and providers accountable

'The Oklahoma Business Collective on Health' is your representative coalition.

CLICK HERE to register for 'Reclaiming Your Power: How to Access Your Claims Data & Hold Carriers Accountable'

Mark Cuban full article

News You Can Use

Is Compounding An FDA-Approved Drug Legal? How does that work?

Compounded drugs are [not FDA approved](#), and the FDA does not evaluate or verify safety, effectiveness or quality of compounded medications.

Compounding always begins with a prescription, but is it legal to compound copies of all drugs?

The FDA allows compounding when there are shortages in drug supply. The popular new weight-loss drugs have driven a compounding boom and that has raised questions about compounding drugs that are still protected by patents - and also how they are produced.

Compounding pharmacies may only prepare compounded versions of a patented drug if it's on the FDA's list indicating there is [a shortage](#) of that drug. Semaglutide (Wegovy) and Tirzepatide (Monjauro) are currently on the shortage list. When production at Eli Lilly and Novo Nordisk catches up with demand, and the FDA removes their drugs from the shortage list, it will effectively end the compounding of these weight loss drugs while they hold patents. **Employers - you may hear from employees who've started their weight loss journey with the help of a compounding pharmacy. If this supply chain is suddenly cut, how will they continue their GLP-1 treatments?**

Buying on-line presents its own hazards. The FDA provides [tips for buying medicine on-line](#), including warnings.

2024 Certified Healthy Oklahoma Applications Now Open

The Certified Healthy Oklahoma 2024 Application Cycle has officially opened! Applications will be accepted online through November 1, 2024.

The Certified Healthy Oklahoma Program is a free, voluntary statewide certification. The certification showcases businesses, campuses, communities, congregations, early childhood programs, and schools that are committed to supporting healthy choices and working to improve the health of Oklahomans through policies and programs that will help us eat better, move more, and be tobacco free.

Certified Healthy recipients often use their recognition as a recruitment strategy or to advertise their dedication to a healthy lifestyle. Check out the application online - you may already meet the requirements. Each type of entity/sector will have its own application link. You'll find yours on the homepage or under each sector's tab.

[More on Compounding from MedPage Today](#)

[Certified Healthy Oklahoma Application](#)

Medical Minute

Sepsis - The Number ONE Killer of Hospital Inpatients

What is Sepsis? Sepsis is a life-threatening emergency. Sometimes incorrectly called blood poisoning, it's the body's own overactive and toxic response to an infection. It damages vital organs and, often, causes death. For reasons researchers don't understand, sometimes the immune system stops fighting the "invaders," and begins to turn on itself. Like strokes or heart attacks, sepsis requires rapid diagnosis and treatment. Delays can lead to severe sepsis and septic shock. 30-50% of septic patients die - that's about 270,000 every year for a treatable condition (if diagnosed early).

The symptoms of sepsis are not specific. Patients are diagnosed when they develop a set of [signs and symptoms](#) related to sepsis. It is not diagnosed based on the infection itself. Some people are at a higher risk for developing sepsis because they are at a higher risk of developing an infection - *any infection can lead to sepsis*. [Septic shock](#) is the most severe stage and is diagnosed when blood pressure drops to dangerous levels. These patients are treated in the ICU and many physicians refer to them as the "sickest people in the hospital."

Sepsis can quickly become a high-cost claim. Educate your employees and their families - awareness can save lives. And, 1) ensure access to care, 2) remove prohibitive legacy language from your plan, 3) check out the Sepsis Alliance website (below). This organization provides many resources and educational materials (multi language).

Most people have heard of sepsis, but they don't really know what it is or its symptoms. There is no diagnostic tool available to help with early detection, so inform and encourage employees to see their health care provider if they have an infection or wound that is getting worse by the day. Now is a good time - *September is sepsis awareness month!*

Sepsis Alliance

Advocacy

Oklahoma wants to lower drug prices. A federal law stands in the way.

ERISA Plans v State of Oklahoma

In recent years, [all 50 states](#) have enacted laws designed to lower prescription drug costs by curbing the power of Pharmacy Benefit Managers (PBMs). Because of a 50-year-old federal law called the Employee Retirement Income Security Act, (better known as ERISA), almost none of these measures apply to the [65% of Americans](#) who work for large employers that cover their workers through self-funded health care plans.

Five years ago, Oklahoma tried to rein in PBMs by approving a [measure](#) barring them from forcing pharmacies to pay certain fees or requiring patients to use PBM-owned or affiliated pharmacies. It was the most aggressive, broadest PBM enforcement legislation in the country, and it was immediately challenged.

The Pharmaceutical Care Management Association, (PCMA), sued to invalidate the law. In August of 2023, the 10th U.S. Circuit Court of Appeals [ruled](#) that ERISA, the federal law, prevented Oklahoma from applying much of its law to self-funded health care plans, saying, "Oklahoma's law would devastate employer, union, and Medicare plan sponsors as well as hundreds of thousands of their beneficiaries, who would experience higher costs and reduced benefits,"

In May 2024, [the state pushed back](#): Oklahoma appealed to the U.S. Supreme Court to reverse the decision. In June, [32 state attorneys general](#) and five [pharmacist trade groups](#) joined the lawsuit. The Supreme Court hasn't yet decided whether to take the case. If it does, the decision will be precedent setting and could have far-reaching implications to many employer health plans.

* * * * *

Industry news: Another class action lawsuit of employee v employer has been filed: [Wells Fargo sued over employee prescription drug costs](#).

OK v ERISA Plans Article from 'Oklahoma Voice'



Our mailing address is:

The Oklahoma Business Collective on Health
c/o OSU Center for Health Systems Innovation
1111 W 17th Street
Tulsa, OK 74104

Website: drivinghealthvalue.org

thecollective@okstate.edu

Want to change how you receive these emails?
You can [update your preferences](#) or [unsubscribe from this list](#).