

SIIA Future Leaders Webinar Series: High Dollar Diagnoses

Wednesday, May 7, 2025



Speakers



Erin Duffy
Director, Business
Development
Imagine360
(MODERATOR)



Lori Baker, RN, CCM
Director of Clinical
Risk Management
One80 Intermediaries



Steven Howard
Manager, Self &
Level Funded Plans
Qualexa Healthcare



Kurt Lutter
VP of Underwriting
One80 Intermediaries



Justin Cech, MBA
Sales Representative
One80 Intermediaries

Table of Contents

- End Stage Renal Disease
- Preemies- low birth weight
- Lumbar Spinal Stenosis



High Dollar Diagnoses

Background

When considering high-cost diagnoses, cancers, gene and cell therapies, and transplants often come to mind. However, many other conditions can also lead to substantial claims and ongoing expenses over the years.

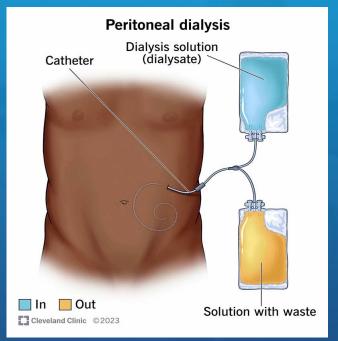
This presentation will explore several of these diagnoses, highlighting key considerations and important factors to keep in mind.

ESRD

- Before reaching ESRD, a person may have CKD stages 1-4 for years before progressing to stage 5. Common causes include diabetes and hypertension.
- At stage 5, progression to ESRD can happen quickly. A kidney transplant is the preferred first-line treatment before starting dialysis.
- Kidney transplant wait times are generally 3-5 years (approx. 8 months for children <17) for a cadaver kidney but can occur sooner if there is a living donor.
- If a living donor is not available, a person will progress to hemodialysis or peritoneal dialysis. The type of dialysis depends on multiple factors.

End Stage Renal Disease

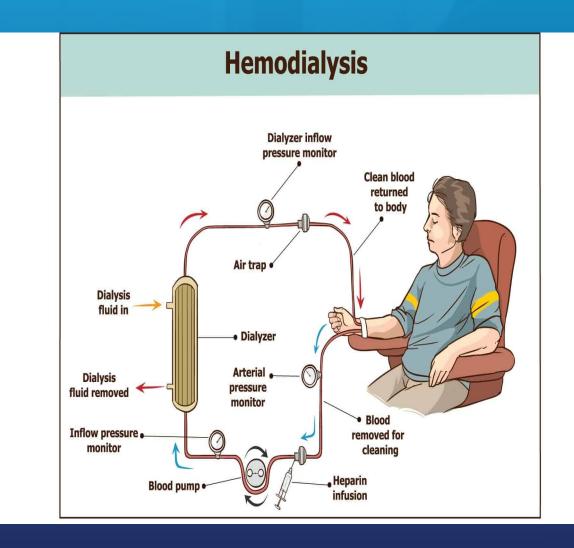
- Peritoneal dialysis
 - Abdominal access
 - Dialysis completed in overnight cycle through machine at home while the person sleeps on a daily basis
 - Cost is generally \$300-\$600/day or approx. \$200k/yr.
- Diagnosis Codes
 - Z99.2
 - Z49.02
- CPT codes
 - 90945
 - 90947
- Complications
 - Catheter infection/peritonitis
 - Forgetting to connect to machine at night
 - Fluid leaks
 - Intestinal perforation
 - Electrolyte imbalance





End Stage Renal Disease

- Hemodialysis
 - AV fistula access- connection between artery and vein, allowing for blood flow from artery to vein, bypassing capillaries- \$20k
 - AV fistula requires 3-6 wks. of healing prior to use but at times can be accessed within 24 hrs.
 - Hemodialysis generally conducted in a center 3-4 times a week
 - Cost can range from \$750-\$2k/session
 - High-cost centers include Fresenius and DaVita
 - Costs ranging from 16k-18k/week should raise a red flag and need for cost containment
 - Renalogic
 - Golden Triangle Specialty Network
 - Diagnosis Codes
 - N18.6
 - CPT codes
 - 90999
 - 90935



End Stage Renal Disease

- Complications of Hemodialysis
 - Cardiac Arrythmias
 - Electrolyte Imbalances
 - Hypotension/hypertension
 - Cardiac arrest
 - Seizures
 - AV fistula access complications
 - Stenosis
 - Maturation failure
 - Poor patency
 - Infection
- Transplant
 - Living donor or cadaver
 - Cost- \$150k-450k+
- Medicare Prime- once person is considered Medicare Prime, dialysis and any transplant costs will be covered under MP until 36 months after TP.
 - MP starts the 1st day of the 4th month of continuous dialysis.
 - 30 month coordination period.



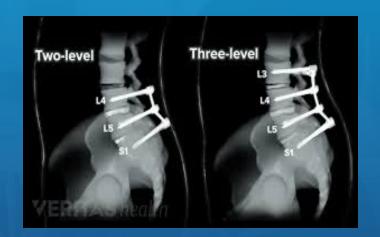
Preemies

- Low birth weight/extreme prematurity- the earlier and lower the birth weight, the more support the infant will require at a higher rate of NICU level care until they reach an acceptable weight and/or the original delivery date or close to it.
 - Complications include the following-
 - Lung support/respiratory distress- oxygen, CPAP, mechanical vent, surfactant or Synargis
 - ECMO/trach
 - Apnea due to bradycardia/hypoxemia
 - Cardiovascular complications/congenital anomalies
 - Intraventricular hemorrhage
 - Necrotizing enterocolitis- premature GI tract
 - Retinopathy of prematurity
 - Feeding support- NG tube, parenteral nutrition
- Diagnosis code- P07.0 w/many subcodes
- Cost
 - <26-29 weeks \$640k-1.2M+
 - 30-36 weeks \$240k-640k



Lumbar Stenosis & Scoliosis

- Surgery does not occur right away unless it is emergent
- Conservative therapies- PT/pain mgt, alternative therapies- massage, yoga, TENS, chiro, brace, Rx \$5k-10k
- Interventional Therapies- Epidural injections, Nerve blocks \$17k-22k
- Surgery
 - Laminectomy- most frequent, single or multi-level disc removing bone spurs, portion of vertebrae, w/ or w/o a fusion \$40k-70k
 - Spinal fusion-with or w/o hardware (cages, rods, screws, plates)
 - Bone grafting- over 200 options available including allografting from a bone bank or auto from patient's hip, \$3k-6k
 - Discectomy- used for herniated discs, degenerative disease, disc compression on nerve/spinal cord, \$40k-70K
 - Spinal cord stimulator- used for those w/chronic pain or failed back surgery- initial surgery \$62k-75k, annual maintenance \$5-23k
 - Kyphoplasty/vertebroplasty (scoliosis)- \$40k-50k
- Diagnosis codes
 - M48.06, M48.07
 - M47.16
 - M54.16
 - M43.06





Things to remember

• ESRD

- Medicare Prime date- once MP in place, costs should decrease significantly
- Type of dialysis
- Facility where dialysis is occurring
- Weekly costs
- Evaluation/listing for transplant

Preemies

- Can be in the NICU for months
- Claims typically exceed \$1M

Lumbar stenosis

- Conservative therapies first then surgery
- Surgery does not necessarily fix the issue and can cause more problems

Thank You

Erin Duffy

Imagine 360 | eduffy@imagine 360.com

Lori Baker, RN, CCM

One80 Intermediaries | lbaker@one80.com

Justin Cech, MBA

One80 Intermediaries | jcech@one80.com

Steven Howard

Qualexa Healthcare | showard@qualexahealthcare.com

Kurt Lutter

One80 Intermediaries | klutter@one80.com