BCBSMI Hospital Analysis Addendum

Generated: September 08, 2025 Analysis Type: Hospital-Level Pharmaceutical Influence Assessment

Executive Summary

Critical Findings for Payor Consideration

Analysis of Michigan hospital systems reveals concentrated pharmaceutical influence patterns that warrant immediate attention from a cost containment perspective. Among 1422 analyzed facilities serving BCB-SMI members, we identified **0 critical-risk** and **7 high-risk hospitals** based on payment concentration, prescribing patterns, and provider coverage.

Key metrics demanding payor attention: - \$281,032,784 in pharmaceutical payments to providers at Michigan hospitals - \$9,779,108,088 in high-cost drug prescriptions from these facilities - 18.6% average payment penetration across hospital systems - 220,638 BCBSMI-affiliated providers included in analysis

The concentration of pharmaceutical relationships within specific hospital systems creates potential cost drivers that directly impact BCBSMI's medical loss ratio and member premiums.

Hospital Risk Ranking

Methodology

Hospitals are scored on a 100-point scale incorporating: - Payment Intensity (30 points): Average payment per provider - Payment Penetration (30 points): Percentage of providers receiving payments - Prescription Volume (20 points): Total cost of high-risk drug prescriptions - Provider Concentration (20 points): BCBSMI provider coverage at facility

Top 10 High-Risk Hospitals for Investigation

Rank	Hospital	City	Risk Score	Category	Total Payments	BCBSMI Providers	Payment Penetration
1	Bronson South Haven Hospital (FKA South Haven Community Hospital)	South Haven	74.9	High	\$4,426,160	430	86.8%

Rank	Hospital	City	Risk Score	Category	Total Payments	BCBSMI Providers	Payment Penetration
2	Corewell Health Beau- mont Grosse Pointe Hospital (AKA Beau- mont Hospital - Grosse Pointe)	Grosse Pointe	66.3	High	\$18,991,566	2716	83.1%
3		Berkley	y 64.6	High	\$25,855,356	556	88.7%
4	Inc) Marlette	Marlet	t 6 4.5	High	\$1,233,479	173	94.1%
5	Regional Hospital Beaumont Home	Troy	62.4	High	\$7,002,007	1258	83.3%
6	Health Services ABF Home Health	Mount Clemer		High	\$1,972,542	34	94.1%
7	Services Center for Physical Rehabilitation	Grand Rapids		High	\$15,121,467	517	75.7%
8	Inc Associated Retinal Consultants PC	Southg	a 59 .9	Medium	\$1,415,947	25	92.0%
9	Associated Derma- tologists	West Bloom- field	58.7	Medium	\$424,427	11	100.0%

Rank	Hospital	City	Risk Score	Category	Total Payments	BCBSMI Providers	Payment Penetration
10	Elara Caring Home Health - Jackson (FKA Great Lakes Caring Home Health - Jackson)	Jackso	on 57.9	Medium	\$3,658,749	1544	77.4%

Payment Concentration Analysis

Hospitals with Highest Pharmaceutical Payment Volume

These facilities represent the greatest concentration of pharmaceutical industry financial relationships:

Advanced Physical Therapy (FKA Hands on Physical Therapy Inc), Berkley

- Total Payments: \$25,855,356
- Providers with Payments: 471 of 531 (88.7%)
- Average Payment per Provider: \$54,895
- Maximum Single Provider Payment: \$4,442,861
- Total Transactions: 61,133
- Average Manufacturers per Provider: 14.4

Corewell Health Beaumont Troy Hospital (AKA Beaumont Hospital - Troy), Troy

- Total Payments: \$20,178,880
- Providers with Payments: 1439 of 1809 (79.5%)
- Average Payment per Provider: \$14,023
- Maximum Single Provider Payment: \$2,695,647
- Total Transactions: 111,362
- Average Manufacturers per Provider: 9.5

Corewell Health Beaumont Grosse Pointe Hospital (AKA Beaumont Hospital - Grosse Pointe), Grosse Pointe

- Total Payments: \$18,991,566
- Providers with Payments: 1363 of 1641 (83.1%)
- Average Payment per Provider: \$13,934
- Maximum Single Provider Payment: \$4,882,593
- Total Transactions: 126,868
- Average Manufacturers per Provider: 11.8

Center for Physical Rehabilitation Inc, Grand Rapids

- Total Payments: \$15,121,467
- Providers with Payments: 206 of 272 (75.7%)
- Average Payment per Provider: \$73,405
- Maximum Single Provider Payment: \$13,932,683

• Total Transactions: 6,841

• Average Manufacturers per Provider: 4.4

Trinity Health (FKA CHE Trinity Health), Livonia

• Total Payments: \$11,728,854

Providers with Payments: 422 of 449 (94.0%)
Average Payment per Provider: \$27,793

• Maximum Single Provider Payment: \$5,491,989

• Total Transactions: 57,922

• Average Manufacturers per Provider: 17.2

High-Cost Prescription Patterns

Hospitals Driving Expensive Drug Utilization

Analysis of prescribing patterns for high-cost medications (ELIQUIS, HUMIRA, OZEMPIC, TRULICITY, JARDIANCE, XARELTO, ENBREL, STELARA) reveals concentrated utilization patterns:

Hospital	City	Total Rx Cost	Total Prescriptions	Top Drugs
Corewell Health Beaumont Grosse Pointe Hospital (AKA Beaumont Hospital - Grosse Pointe)	Grosse Pointe	\$560,612,736	617,370	TRULICITY: \$125.5M, ELIQUIS: \$114.6M, OZEMPIC: \$111.2M
Corewell Health Butterworth Hospital (FKA Spectrum Health Butterworth	Grand Rapids	\$430,715,118	507,661	TRULICITY: \$113.2M, ELIQUIS: \$97.8M, OZEMPIC: \$63.5M
Hospital) Beaumont Home Health Services	Troy	\$424,663,860	555,495	TRULICITY: \$104.2M, ELIQUIS: \$98.9M, JARDIANCE: \$86.1M
Elara Caring Home Health - Jackson (FKA Great Lakes Caring Home Health - Jackson)	Jackson	\$371,180,788	468,163	TRULICITY: \$107M, OZEMPIC: \$83.1M, ELIQUIS: \$71.6M

Hospital	City	Total Rx Cost	Total Prescriptions	Top Drugs
Henry Ford Health (FKA Henry Ford Health System)	Detroit	\$344,469,600	362,231	ELIQUIS: \$78.9M, OZEMPIC: \$69.4M, JARDIANCE: \$52.8M
Corewell Health Big Rapids Hospital (FKA Spectrum Health Big Rapids	Big Rapids	\$329,994,302	338,853	ELIQUIS: \$104.7M, STELARA: \$71.4M, TRULICITY: \$54.7M
Hospital) Corewell Health Beaumont Troy Hospital (AKA Beaumont Hospital -	Troy	\$304,242,500	336,830	ELIQUIS: \$70.5M, STELARA: \$50.7M, TRULICITY: \$49.7M
Troy) Corewell Health Dearborn Hospital (AKA Beaumont Hospital - Dearborn)	Dearborn	\$249,916,492	303,246	TRULICITY: \$59.7M, ELIQUIS: \$54.3M, OZEMPIC: \$44.6M
Aspirus Health Physicians (FKA Aspirus Clinics)	Houghton	\$247,518,040	292,931	ELIQUIS: \$64.3M, TRULICITY: \$55M, JARDIANCE: \$45.5M
Ascension Borgess Allegan Hospital (FKA Allegan General Hospital)	Allegan	\$228,212,295	234,590	\$45.5M ELIQUIS: \$60.8M, STELARA: \$50M, TRULICITY: \$30.9M

City-Level Analysis

Geographic Distribution of Pharmaceutical Influence

Analysis of pharmaceutical payment patterns across Michigan cities reveals significant geographic concentration of industry relationships, with notable differences between urban centers and rural communities.

Top 10 Cities by Pharmaceutical Payment Volume

Rank	City	Total Payments	BCBSMI Providers	Payment Penetration	Hospitals	Avg Payment/Provider
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1	Grand	. , ,	4,921	74.0%	86	\$9,973
	Rapids	;				
2	Troy	\$32,414,517	$3,\!146$	79.4%	46	\$12,981
3	Berkle	y \$25,993,903	558	89.1%	7	\$52,302
4	Detroit	\$24,933,838	4,568	66.3%	64	\$8,226
5	Ann	\$20,405,378	3,581	46.7%	53	\$12,197
	Ar-	, ,	,			,
	bor					
6	Grosse	\$19,258,033	1,643	83.1%	3	\$14,108
	Pointe	, ,	,			,
7	Livonia	a \$12,181,723	609	88.3%	50	\$22,643
8	Dearbo	or£9,306,553	1,845	81.2%	49	\$6,209
9	Saint	\$8,655,367	951	84.2%	10	\$10,806
	Joseph	, ,				,
10	Sagina	w\$8,513,337	1,396	75.8%	50	\$8,047

Key City-Level Insights

Cities with Highest Payment Penetration (>70%): - Grand Rapids: 74.0% of providers receiving payments, totaling \$36,293,317 - Troy: 79.4% of providers receiving payments, totaling \$32,414,517 - Berkley: 89.1% of providers receiving payments, totaling \$25,993,903 - Grosse Pointe: 83.1% of providers receiving payments, totaling \$19,258,033 - Livonia: 88.3% of providers receiving payments, totaling \$12,181,723

Cities Driving High-Cost Prescriptions: - Grand Rapids: \$920,021,681 in targeted drug costs - Troy: \$902,669,495 in targeted drug costs - Grosse Pointe: \$560,612,736 in targeted drug costs - Saginaw: \$537,685,573 in targeted drug costs - Detroit: \$491,736,872 in targeted drug costs

Rural vs Urban Comparison

Healthcare Access and Pharmaceutical Influence Disparities

The analysis reveals significant disparities in pharmaceutical industry engagement between urban and rural Michigan communities, with implications for healthcare access, cost, and quality.

Comparative Metrics

Metric	Urban Areas	Rural Areas	Disparity
Number of Cities	28	137	109 more rural
Total Providers	100,980	99,833	Urban has 1,147 more
Total Payments	\$172,407,196	\$127,578,176	Urban 1.4x higher
Payment Penetration	20.4%	14.7%	5.7pp higher in urban
Avg Payment/Provider	\$8,354	\$8,685	Urban 4% lower
Avg Rx Cost/Provider	\$179,768	\$268,935	Urban 33% lower
Total Hospitals	885	1069	Rural has 184 more

Key Disparities and Implications

Payment Concentration

• **Urban centers** show significantly higher pharmaceutical payment concentration, suggesting stronger industry relationships

- Rural areas demonstrate lower payment penetration but may face different access challenges
- The disparity indicates potential differences in prescribing patterns and formulary adherence

Prescription Patterns

- Urban providers generate higher prescription costs per capita for targeted high-cost medications
- Rural providers may have limited access to specialty medications or different patient demographics
- Cost disparities suggest opportunities for targeted interventions based on geographic location

Network Implications for BCBSMI

- 1. Urban Strategy: Focus on high-volume facilities with concentrated payments
- 2. Rural Strategy: Address access issues while managing appropriate utilization
- 3. Differential Pricing: Consider geographic variations in reimbursement models

Detailed Hospital Profiles

In-Depth Analysis of Highest Risk Facilities

1. Bronson South Haven Hospital (FKA South Haven Community Hospital)

Location: South Haven, Michigan

Risk Category: High

Composite Risk Score: 74.9/100

Provider Network

• Total Providers: 480

• BCBSMI Providers: 430 (89.6% coverage)

• Providers with Payments: 33 (86.8% penetration)

Financial Relationships

• Total Pharmaceutical Payments: \$4,426,160

• Average Payment per Provider: \$134,126

• Maximum Provider Payment: \$4,317,705

• Total Transactions: 2,186

Prescription Impact

• Total Prescription Cost: \$26,418,601

• Total Prescriptions: 29,229

• Key Drugs: TRULICITY: \$7M, OZEMPIC: \$5.8M, ELIQUIS: \$5.6M

Risk Assessment

• Payment Intensity Score: 30.0/30

• Payment Penetration Score: 26.1/30

 Prescription Volume Score: 0.9/20

• Provider Concentration Score: 17.9/20

2. Corewell Health Beaumont Grosse Pointe Hospital (AKA Beaumont Hospital - Grosse Pointe)

Location: Grosse Pointe, Michigan

Risk Category: High

Composite Risk Score: 66.3/100

Provider Network

• Total Providers: 2967

• BCBSMI Providers: 2716 (91.5% coverage)

• Providers with Payments: 1363 (83.1% penetration)

Financial Relationships

• Total Pharmaceutical Payments: \$18,991,566

- Average Payment per Provider: \$13,934
- Maximum Provider Payment: \$4,882,593

• Total Transactions: 126,868

Prescription Impact

• Total Prescription Cost: \$560,612,736

• Total Prescriptions: 617,370

• Key Drugs: TRULICITY: \$125.5M, ELIQUIS: \$114.6M, OZEMPIC: \$111.2M

Risk Assessment

Payment Intensity Score: 3.1/30
Payment Penetration Score: 24.9/30
Prescription Volume Score: 20.0/20

• Provider Concentration Score: 18.3/20

3. Advanced Physical Therapy (FKA Hands on Physical Therapy Inc)

Location: Berkley, Michigan Risk Category: High

Composite Risk Score: 64.6/100

Provider Network

• Total Providers: 586

• BCBSMI Providers: 556 (94.9% coverage)

• Providers with Payments: 471 (88.7% penetration)

Financial Relationships

• Total Pharmaceutical Payments: \$25,855,356

- Average Payment per Provider: \$54,895
- Maximum Provider Payment: \$4,442,861

• Total Transactions: 61,133

Prescription Impact

• Total Prescription Cost: \$189,761,803

• Total Prescriptions: 243,173

• Key Drugs: OZEMPIC: \$49.3M, TRULICITY: \$45.1M, JARDIANCE: \$38.4M

Risk Assessment

Payment Intensity Score: 12.3/30
Payment Penetration Score: 26.6/30
Prescription Volume Score: 6.8/20
Provider Concentration Score: 19.0/20

4. Marlette Regional Hospital

Location: Marlette, Michigan

Risk Category: High

Composite Risk Score: 64.5/100

Provider Network

• Total Providers: 184

• BCBSMI Providers: 173 (94.0% coverage)

• Providers with Payments: 16 (94.1% penetration)

Financial Relationships

• Total Pharmaceutical Payments: \$1,233,479

• Average Payment per Provider: \$77,092

• Maximum Provider Payment: \$1,175,226

• Total Transactions: 2,481

Prescription Impact

• Total Prescription Cost: \$6,424,145

• Total Prescriptions: 7,987

• Key Drugs: TRULICITY: \$2.8M, ELIQUIS: \$1.3M, JARDIANCE: \$1.1M

Risk Assessment

Payment Intensity Score: 17.2/30
Payment Penetration Score: 28.2/30
Prescription Volume Score: 0.2/20
Provider Concentration Score: 18.8/20

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5. Beaumont Home Health Services

Location: Troy, Michigan Risk Category: High

Composite Risk Score: 62.4/100

Provider Network

• Total Providers: 1261

• BCBSMI Providers: 1258 (99.8% coverage)

• Providers with Payments: 686 (83.3% penetration)

Financial Relationships

Total Pharmaceutical Payments: \$7,002,007
Average Payment per Provider: \$10,207
Maximum Provider Payment: \$1,050,434

• Total Transactions: 61,495

Prescription Impact

• Total Prescription Cost: \$424,663,860

• Total Prescriptions: 555,495

• Key Drugs: TRULICITY: \$104.2M, ELIQUIS: \$98.9M, JARDIANCE: \$86.1M

Risk Assessment

Payment Intensity Score: 2.3/30
Payment Penetration Score: 25.0/30
Prescription Volume Score: 15.1/20
Provider Concentration Score: 20.0/20

Actionable Recommendations for BCBSMI

Immediate Actions (0-30 days)

1. Enhanced Prior Authorization Review

- Implement stricter prior authorization requirements for high-cost medications at the 0 critical-risk hospitals
- Focus on: HUMIRA, OZEMPIC, TRULICITY, and other identified high-correlation drugs
- Expected impact: 10-15% reduction in unnecessary prescriptions

2. Provider Engagement Program

- Initiate dialogue with medical directors at top 5 highest-risk facilities
- Share comparative prescribing data and cost implications
- Develop facility-specific cost reduction targets

3. Network Evaluation

- Review network contracts with critical-risk hospitals
- Consider performance-based incentives tied to generic utilization rates
- Evaluate narrow network options excluding highest-cost facilities

Short-term Initiatives (30-90 days)

4. Formulary Management

- Develop hospital-specific formulary restrictions based on payment patterns
- Implement step therapy requirements for providers with high payment concentrations
- Create preferred drug lists emphasizing lower-cost therapeutic alternatives

5. Provider Education Campaign

- Launch targeted education on cost-effective prescribing
- Distribute comparative effectiveness data for high-cost vs. alternative medications
- Highlight potential conflicts of interest to promote awareness

6. Claims Analytics Enhancement

• Implement real-time monitoring of prescription patterns from high-risk facilities

- Create alerts for unusual prescribing spikes or pattern changes
- Develop predictive models to identify emerging cost drivers

Long-term Strategies (90+ days)

7. Value-Based Contracting

- Negotiate outcome-based agreements with pharmaceutical manufacturers
- Develop shared savings programs with hospitals showing improvement
- Create quality metrics that balance clinical outcomes with cost efficiency

8. Transparency Initiative

- Publish hospital-level cost and quality scorecards for members
- Create provider-specific prescribing profiles accessible to patients
- Advocate for stronger sunshine law requirements at state level

9. Alternative Payment Models

- Pilot bundled payment programs that include medication costs
- Develop capitated models that incentivize cost-effective prescribing
- Create gain-sharing arrangements for hospitals that reduce pharmaceutical costs

Expected Impact

Implementation of these recommendations could yield: - 15-20% reduction in high-cost drug utilization at targeted facilities - \$50-75 million in annual savings based on current prescription volumes - Improved member satisfaction through reduced out-of-pocket costs - Enhanced network quality through evidence-based prescribing practices

Monitoring and Evaluation

Establish quarterly reviews to track: - Changes in payment patterns at monitored hospitals - Prescription cost trends by facility and provider - Prior authorization approval/denial rates - Member complaints and appeals related to formulary changes - Overall medical loss ratio impact

Methodology and Data Sources

Data Sources

- Provider Affiliations: PHYSICIANS FACILITY AFFILIATIONS CURRENT optimized
- Payment Data: op_general_all_aggregate_static_optimized (2020-2024)
- Prescription Data: PHYSICIAN_RX_2020_2024_optimized
- Provider List: BCBSMI provider network (49,576 NPIs)

Analysis Period

Payment data: 2020-2024 (5 years)Prescription data: 2020-2024 (5 years)

• Analysis date: Current

Risk Scoring Methodology

Composite risk scores calculated using weighted factors: 1. **Payment Intensity (30%)**: Average payment amount per provider receiving payments 2. **Payment Penetration (30%)**: Percentage of affiliated providers receiving payments 3. **Prescription Volume (20%)**: Total cost of high-risk drug prescriptions 4. **Provider Concentration (20%)**: Percentage of hospital providers in BCBSMI network

Inclusion Criteria

• Michigan hospitals with 10 affiliated providers

- Facilities with BCBSMI provider coverage
- Prescription volume >\$1 million for targeted drugs

Statistical Approach

- Aggregation at hospital-facility level
- Risk percentile ranking across all analyzed facilities
- Categorical risk assignment based on composite scores

Limitations

- Analysis limited to Medicare Part D prescription data
- Payment data reflects reported Open Payments transactions only
- Hospital affiliations based on primary facility designation
- Temporal associations do not establish causation

Report Metadata

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