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## Rate Increase for Workers' Comp

The state Department of Insurance has approved a 9.1% rate increase for plans providing workers' compensation insurance, effective October 2011. DOI made the decision based on cost data submitted by the NY Compensation Insurance Rating Board. That body had originally requested a hike of 10.7% based on data showing that losses associated with such coverage had risen, in part because of an increase in the maximum weekly benefit. On July 1, that amount went up to \$772.96 from \$739.83. Medical costs also have risen, DOI noted in its decision.

## Data to the People

The state Department of Health launched a project to give the public easier access to health care data. Called the Maximizing Essential Tools for Research Innovation and eXcellence, or METRIX, project, it is DOH's "vision for increasing transparency of government and improving access to data," Health Commissioner Dr. Nirav Shah said in a statement. METRIX will help identify areas where analytics can support the state's health reform strategy, as well as create a process to make DOH data "available for innovation, economic development and research," he said. The data will be released in stages, including some data sets not previously available to the public, through DOH's website. These data sets will be released publicly in a new data catalog on the METRIX page; information is online at <https://apps.nyhealth.gov>.

## Big Companies Slow Premium Hikes

A survey of benefits managers at 126 companies in the Fortune 1000 list showed that rate increases in health plan premiums for 2011 are lower than expected. More good news for employees: Those rates hikes are likely to be no higher in 2012. The findings are in Barclays Capital's "2011 Mid-Year Managed Care Survey." The researchers found the average premium increase was about 6.7% this year, compared with 8.2% in 2010. More than 80% of the responding managers expected the costs of providing health benefits to rise when federal health reform provisions are fully implemented in 2014. Most managers (66.7%) said their companies were not likely to drop coverage, and only 6.7% said they were "somewhat likely" to do so. No one surveyed said their company would definitely drop coverage. The companies surveyed employ more than 2.8 million workers.

## Advocates, NYC fight false-claims lawsuit

Last week, public interest groups filed an amicus brief in support of personal care services offered under New York City's Medicaid program. Earlier this year, the U.S. Department of Justice charged the city Human Resources Administration with filing "false claims" for its approval of 24-hour personal care services paid by Medicaid.

The federal government alleged that the city fraudulently billed for personal care services by improperly overcharging Medicaid for 24-hour personal care services. In February, the city filed a motion to dismiss the False Claims Act lawsuit (*Pulse*, Feb. 15). On April 13, a federal court judge denied the city's motion to dismiss.

The city filed a motion for summary judgment on Aug. 1. As it argued once again for dismissal, the city wrote there was no evidence that the HRA "recklessly or knowingly submitted or caused to be submitted a claim for payment to the United States" that it knew to be false. "There is no basis to impose False Claims Act liability in this case," the document said.

On Aug. 12, Selfhelp Community Services, New York Lawyers for the Public Interest, Legal Services-NYC and Cardozo Bet Tzedek Legal Services were among 41 groups to file a "friend of the court" brief to support the city's latest motion. The brief, which is online at <http://wnylc.com>, argues that the city did not wrongly approve the 24-hour care services.

The city is represented by Simpson Thacher & Bartlett on a pro bono basis. Lawyers are tentatively due in federal court in Manhattan on Sept. 15 for oral arguments on the motions for summary judgment. If the judge does not grant a motion, the case could head to trial in October.

## At A Glance

**PAY DAY:** Compensation for nearly 70% of specialty doctors rose in 2010, according to the 2011 Medical Group Compensation and Financial Survey by the American Medical Group Association. The overall average increase was 2.4%, down from a 3.8% hike in 2009. Primary care doctors saw a 2.6% increase, while surgical specialties averaged 3.8%. The specialties experiencing the largest pay hikes were allergy (6.38%), emergency medicine (6.37%), and hospitalist/internal medicine (6.29%).

**EXTRA:** The compensation series continues.