

## **Armed With Pricing Data, Employers May Confront New Legal Obligations When Selecting Health Plans**

National pricing data show the cost of healthcare services varies greatly by payer, geography, setting and facility, presenting new fiduciary considerations for employers.

Since 2022, health plans have been required to release machine-readable files disclosing negotiated rates of healthcare services with providers. Hospitals are also required to release the costs of shoppable services.

Data analytics firm Trilliant Health ingested UnitedHealthcare and Aetna transparency files from February to April 2025 to create a new report. Now, those massive swaths of information are slowly becoming more actionable for employers, they will need to plan accordingly, said Chief Research Officer Allison Oakes in an interview with Fierce Healthcare.

“Because this pricing information wasn’t historically available, employers weren’t necessarily responsible for picking the highest value health plan for their employees,” she said. “This also shifts the onus and responsibility to employers to use the leverage they have in the market to start changing some of this pricing as well.”

The Employer Retirement Income Security Act of 1974 requires employers to administer quality and cost-appropriate health benefits to workers, free from fraud and mismanagement. In the same vein, in recent years, [major corporations](#) have been sued for failing to protect workers from commercial arrangements with pharmacy benefit managers that plaintiffs said resulted in overly expensive prescription drugs.

Analyzing six inpatient procedures nationwide, negotiated rates differed by an average ratio of 9.1 across the country, the Trilliant report found. This means, for example, negotiated rates for one type of coronary bypass could range from \$27,000 to nearly \$250,000.

Different payers may even pay wildly different amounts for an identical procedure at the same location. The average difference in price between UHC and Aetna at the same hospital was more than \$15,000 across six procedures.

At Tufts Medical Center, the Aetna negotiated rate for a coronary bypass was \$95,989. The UHC rate was \$144,204.

The findings expand on a growing body of evidence showing extreme disparities in the cost of healthcare services. Unlike other studies, this report is one of the first to analyze real-time national data from health plan price transparency files.

Researchers said they didn't find a correlation between provider quality and price, despite some hospitals being named on prominent "best hospitals" lists. In many instances, there seemed to be no rhyme or reason to prices.

"I do think the more time you spend with the price transparency data, the more surprised you are by what you see and what you find," said Oakes.

One trend researchers did spot: The median rate for ambulatory surgery centers was always lower than in hospital outpatient departments across five surgeries. This includes colonoscopies, which can be 67% less expensive. They estimate that yearly savings exceed \$4.5 billion on this procedure alone.

More than 20 terabytes of data were downloaded and cleaned. Negotiated rates in the report come from more than 2,600 hospitals and nearly 3,500 ambulatory surgery centers. It is likely representative of 50 million commercial lives and 27% of the insurer market share.

The report marks a shift in transparency previously only seen behind closed doors.

Historically, federal law prevented pricing information from being public, under the assumption it would lead to higher prices and price collusion. Private contracts also included gag clauses, requiring the information to be kept confidential.

Oakes said new price transparency regulations will force healthcare to act more like other markets, since the report will allow people to "name names" and highlight the worst price offenders. Throughout the report, Hackensack University Medical Center often had the highest negotiated rates for certain services, she said of Trilliant Health's findings.

"People have the ability to set price alerts if an airplane flight changes by \$50, yet people don't have any idea that within their own market—and perhaps just depending on choosing a hospital that's a mile away or five miles away—the same procedure could cost very different amounts of money," she explained.

Healthcare for workers is expensive, and advocates hope price transparency can bring down costs in the long term. The average annual premium for an individual with employer-sponsored insurance was nearly \$9,000 last year.

[https://www.fiercehealthcare.com/payers/armed-pricing-data-employers-may-confront-new-legal-obligations?utm\\_medium=email&utm\\_source=rasa\\_io&utm\\_campaign=newsletter](https://www.fiercehealthcare.com/payers/armed-pricing-data-employers-may-confront-new-legal-obligations?utm_medium=email&utm_source=rasa_io&utm_campaign=newsletter)