



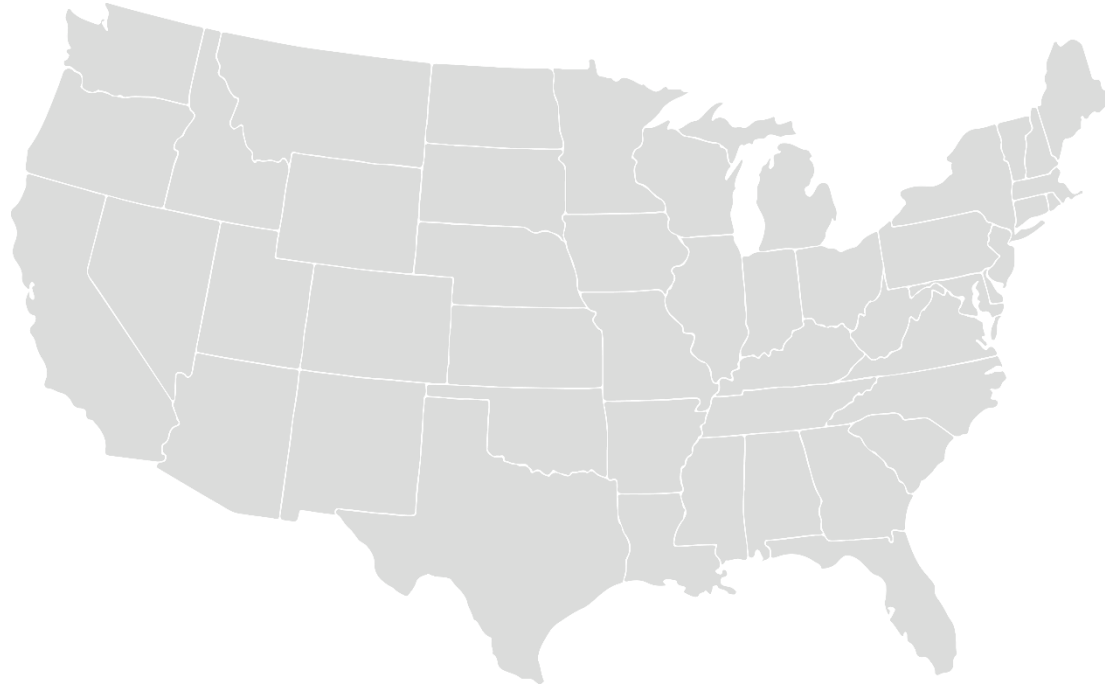
CARE2CARE

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MEDICAL TRAVEL

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## I. THE AMERICAN HEALTH CARE SYSTEM AND ITS ISSUES

# THE AMERICAN HEALTH CARE SYSTEM: A MATTER OF CONSTANT DISCUSSION



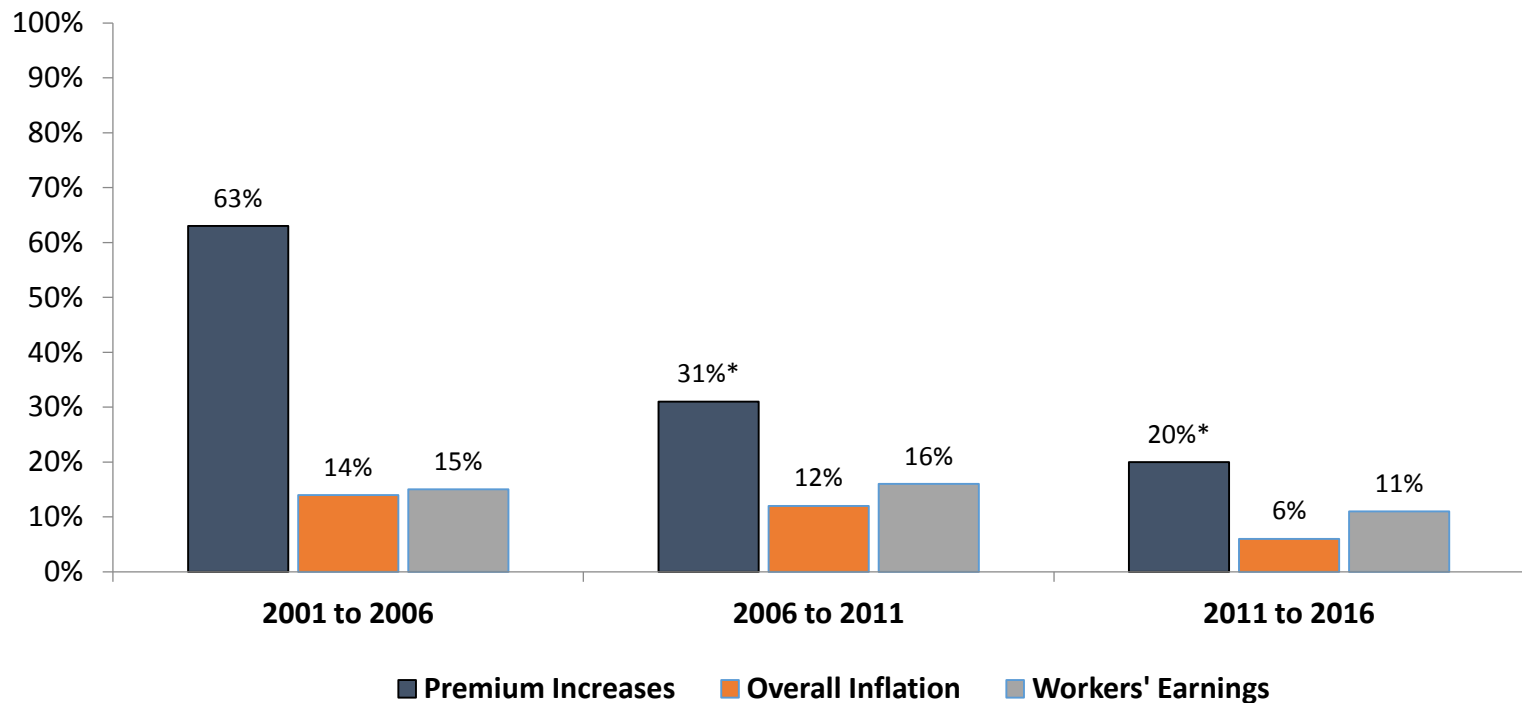
After 7 years of controversy, Obamacare appears to have created a broadly shared “right to health care” mindset.

And, even if a ‘repeal and replace’ bill was passed, **health coverage** in the United States would remain a real **matter of concern for all Americans**.

A large majority of US employers recently confirmed that even if ACA was repealed they would continue to fully pay for preventive services, exclude pre-existing conditions limitations or continue with no annual dollar limit.

(PwC, Medical cost trends 2018)

# INCOME HAS NOT BEEN KEEPING UP WITH THE SKYROCKETING COSTS OF HEALTH CARE

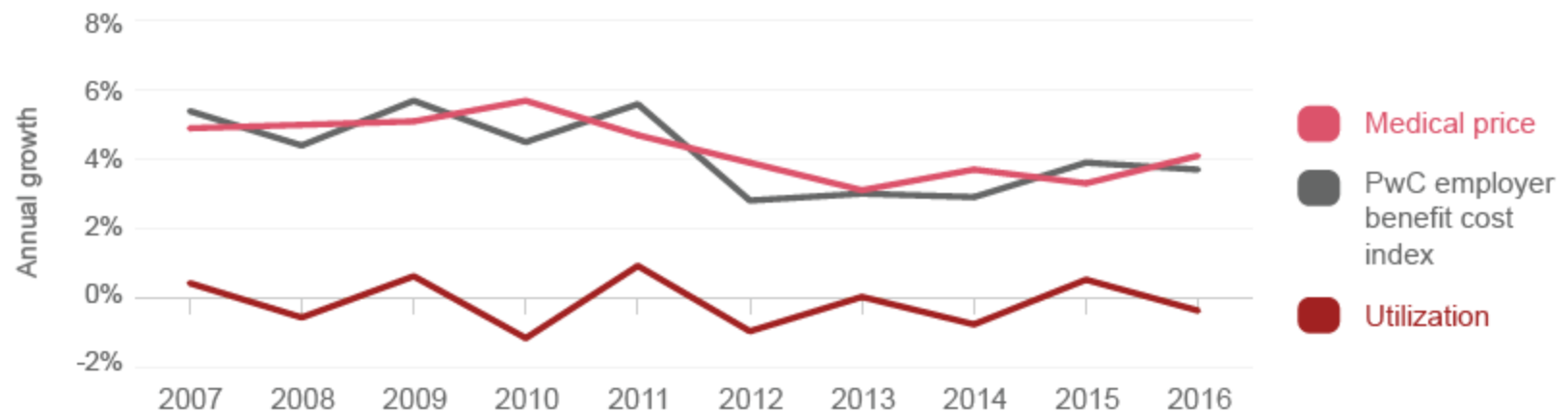


Source: Keiser/HRET Survey of Employer Sponsored Health Benefits 2001-2016

# RIISING PRICES AND STAGGERING UTILIZATION

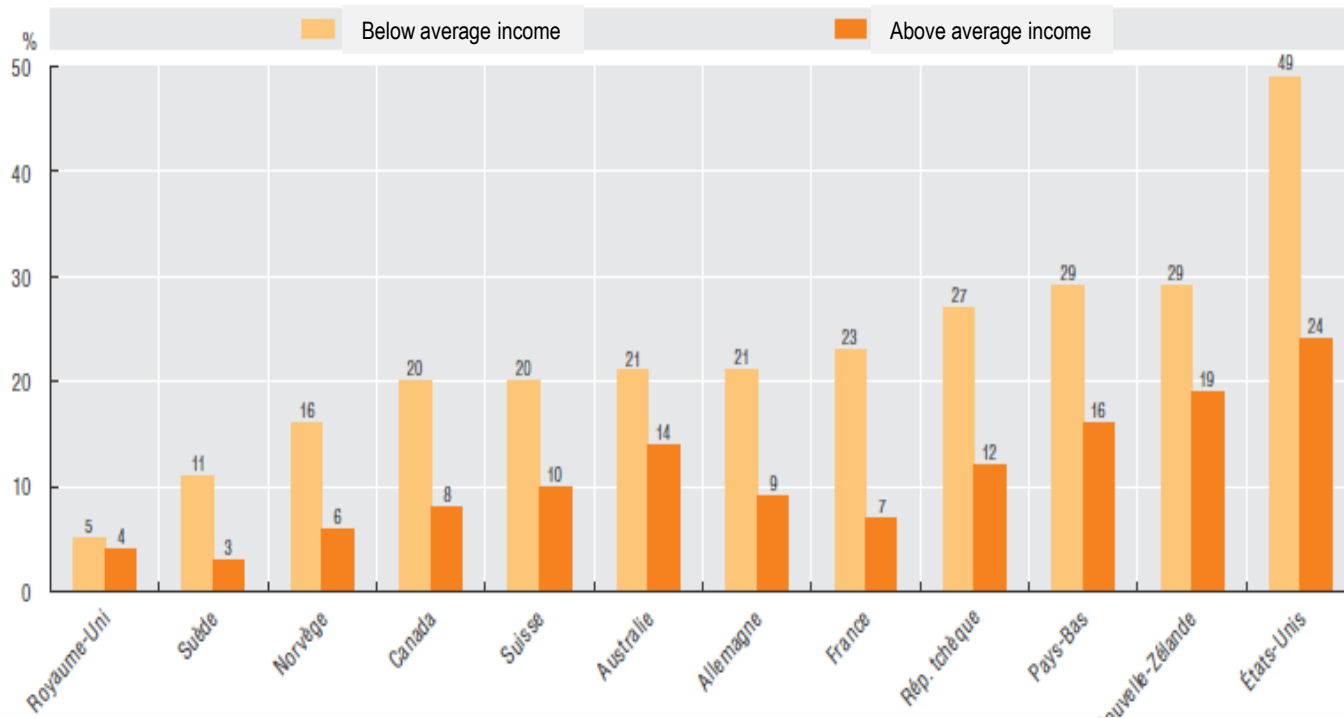
**Figure 4: Price continues to be a major driver of medical cost trend**

Components of growth in employer benefit costs, 2007-2016



# A RECORD LEVEL OF REFUSAL OF CARE

Needs for care that went unmet due to cost, by income level, 2013

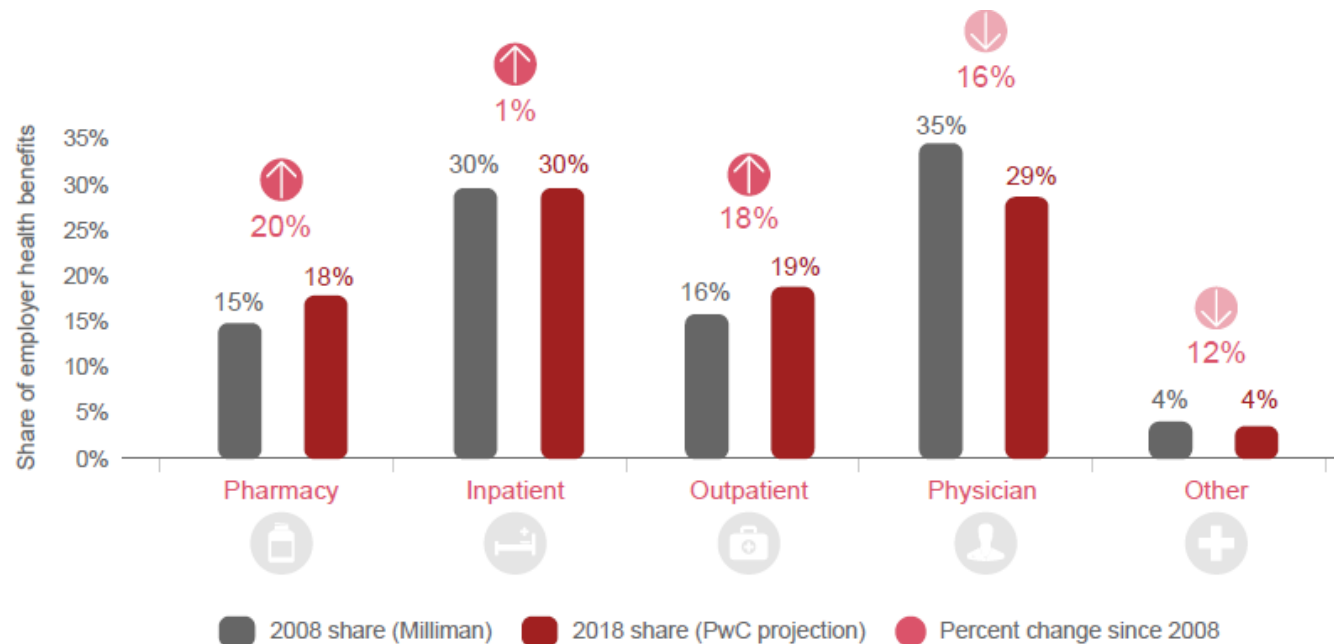


Note: Did not consult with a physician at the time of a medical problem, did not receive recommended care or did not follow up on a prescription.

Data source: OCDE Health at a glance 2015

StatLink <http://dx.doi.org/10.1787/888933281991>

# HOSPITAL IN-PATIENT COSTS CONTINUE TO REPRESENT A LARGE SHARE OF EMPLOYERS HEALTH COSTS...



Source: Milliman Medical Index for 2008 and PwC Health Research Institute projections of 2018 medical spending based on the 2017 Milliman Medical Index. <http://us.milliman.com/17>

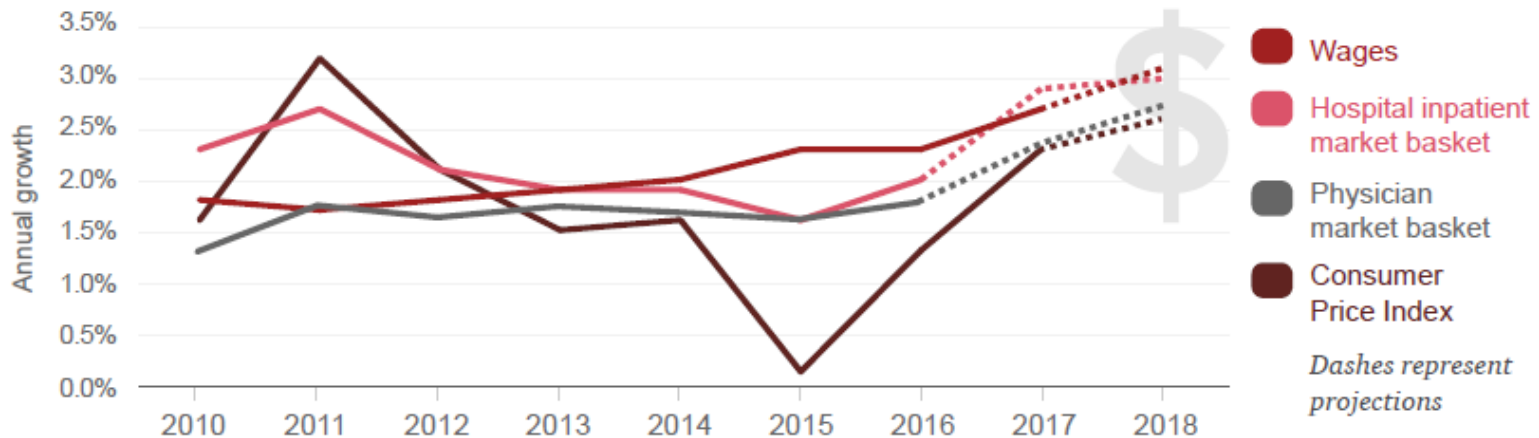
**Consolidation:** Providers, payers, and pharmaceutical and life sciences companies have engaged in a surge of merger and acquisition activity in recent years.<sup>29</sup> With organizations gaining greater market share and negotiating power, a consolidated healthcare market can drive prices up.<sup>30</sup>



# ...AND THEY ARE EXPECTED TO CONTINUE TO GROW FASTER THEN BOTH WAGES AND CPI

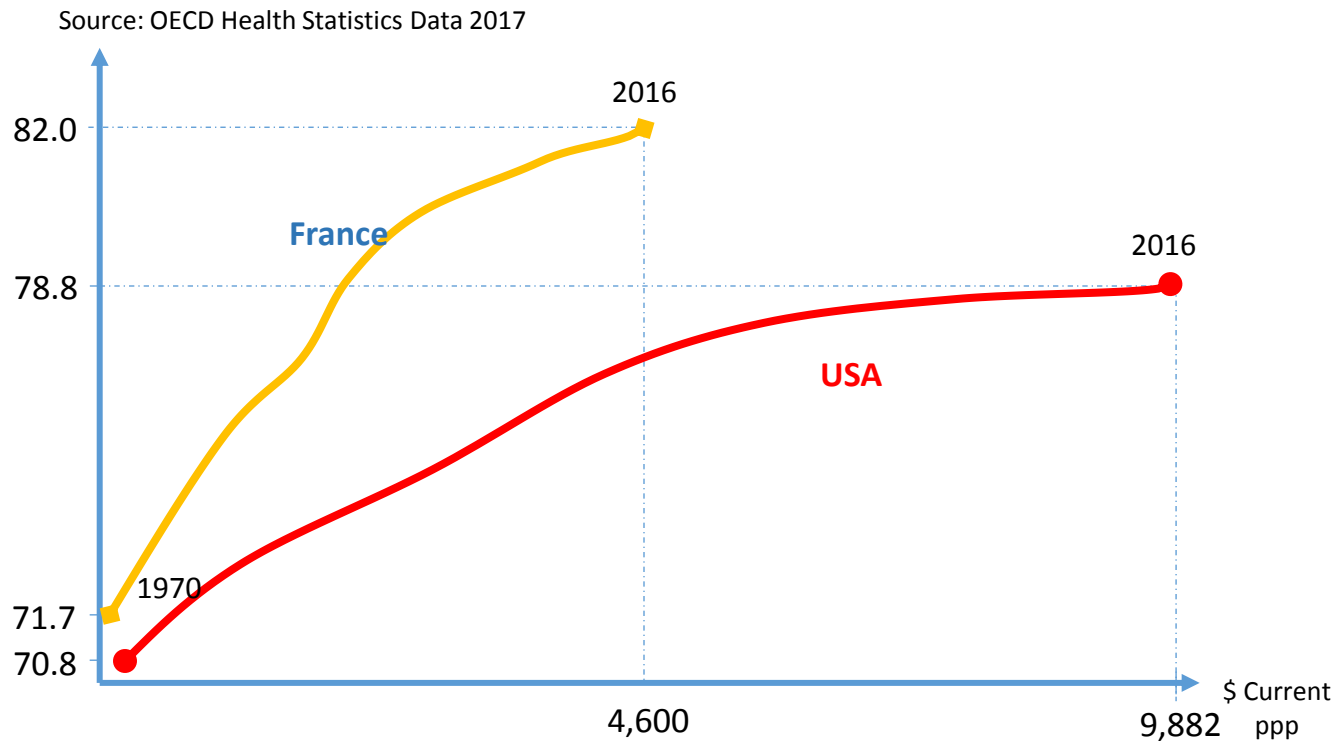
**Figure 7: The price of providing hospital and physician services has increased as the rate of general inflation growth has increased**

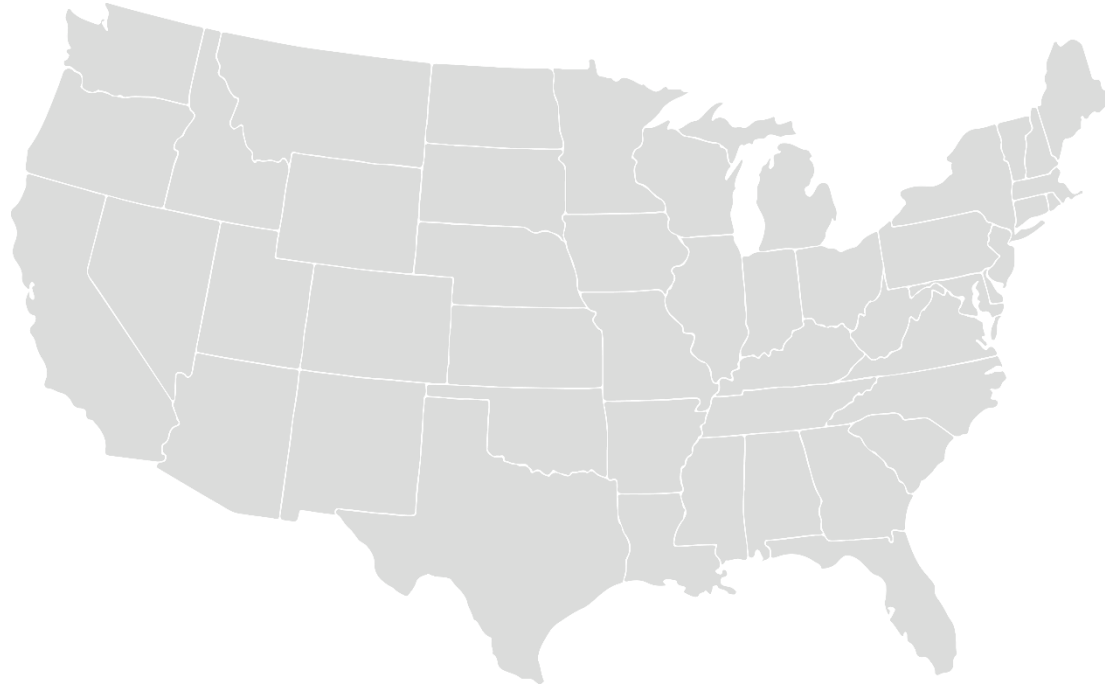
Growth in wages and healthcare “market baskets”



Source: PwC Health Research Institute analysis of CMS Market Basket, CMS National Health Expenditure Accounts, CBO Economic and Budget

# 1970-2016 LIFE EXPECTANCY AT BIRTH VS. EXPENDITURE ON HEALTH PER CAPITA



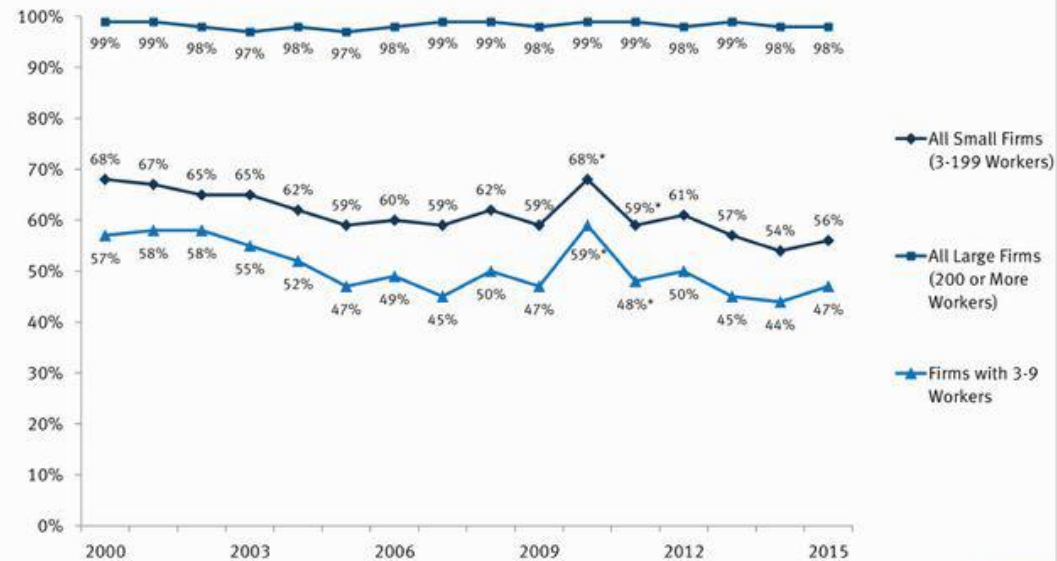


## II. HEALTH CARE COVERAGE: A KEY FACTOR OF EMPLOYER ATTRACTIVENESS

# A CHALLENGE FOR YOUR OPERATIONS IN THE UNITED STATES

- While it is clear that most companies will continue offering costly “**Healthcare Benefits**” to full-time employees, their family members and dependents...
- ... In a competitive labor market, employers are looking for new cost containment strategies beyond shifting more costs to employees.

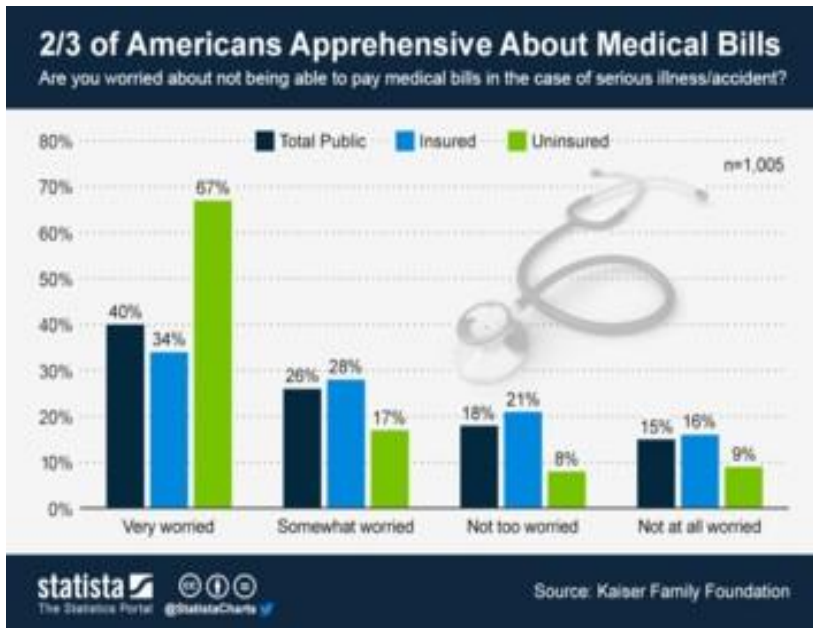
**Figure 1**  
**Percentage of Firms Offering Health Benefits, by Firm Size, 2000-2015**



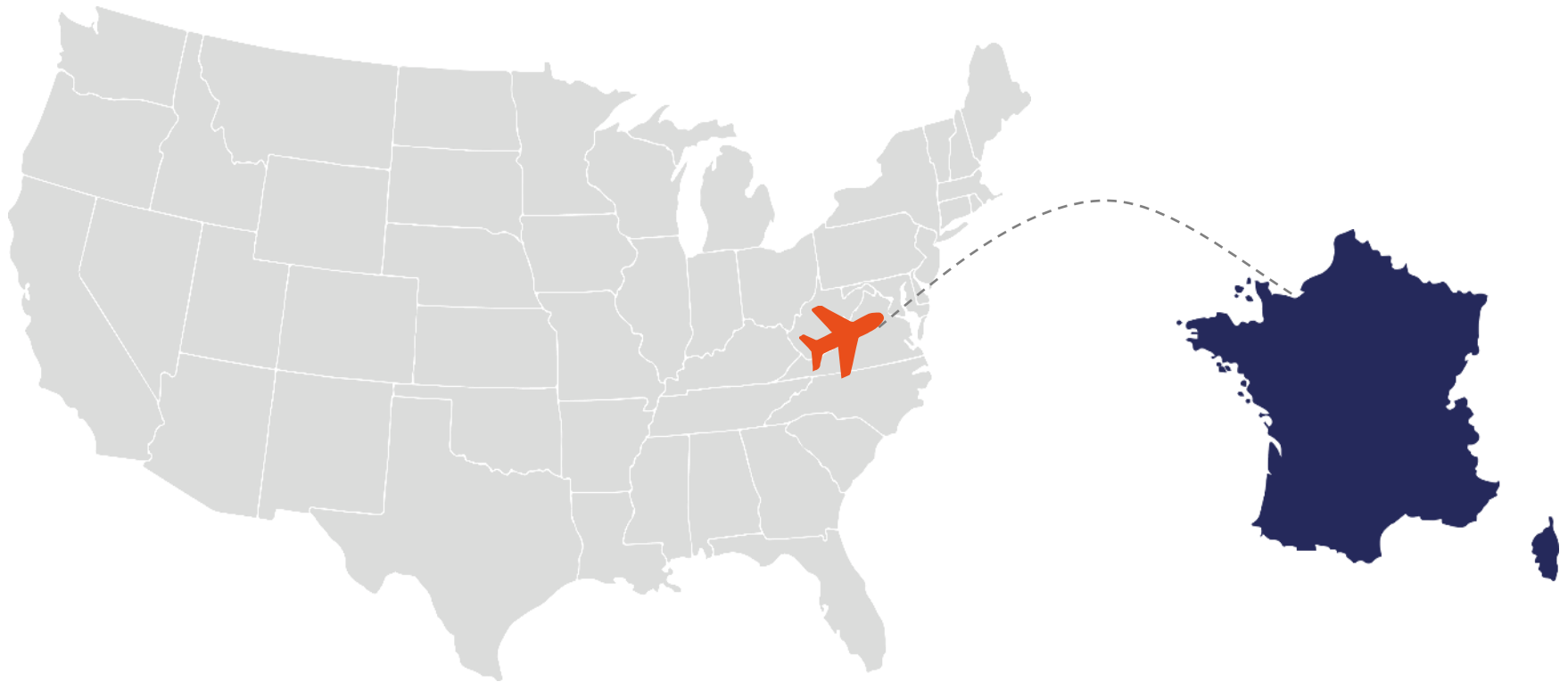
# EMPLOYEES ARE OFTEN WORRIED....

...about **their medical bills**, even when they are covered by their employer;

Their greatest concern is **hospital costs**.



ENTERS CARE2CARE...



### III. TAKE ADVANTAGE OF THE FRENCH HEALTH CARE SYSTEM: SAFETY, PERFORMANCE, COST

# 1. FRANCE IS YOUR DESTINATION FOR SAFE MEDICAL CARE

- France's national health care system ranks among the best in the world
- Medical schools have global reputation for being highly selective
- French medical teams come in close second worldwide behind the United States.\* This is especially true for orthopedics, cancer care and heart surgery



A presentation of this study, in English, by Professor Victor RODWIN, professor at New York University and specialist in comparative health care systems, can be viewed on our website here:

<http://blog.care2care.fr/index.php/2016/10/26/medical-tourism-why-france-could-become-a-priority-destination/>

Victor RODWIN is also co-author of a recent study, conducted by a Franco-American team, that demonstrated that **hospital readmission rates after 30 days were 70% higher in the USA compared to their level in France.**

\* Somedical.com, 2013 study, conducted with the assistance of 250 experts, including Nobel Prize winners

# FRANCE IS YOUR DESTINATION FOR SAFE MEDICAL CARE (CTD.)

- The French hospital system is competitive
- The healthcare industry is highly regulated
- The system is **transparent**, thanks to a structured and detailed information system
- This **information is publicly available on official websites**
- It is also available through news media (e.g. “Le Point”, “L'Express”), which publish rankings regularly

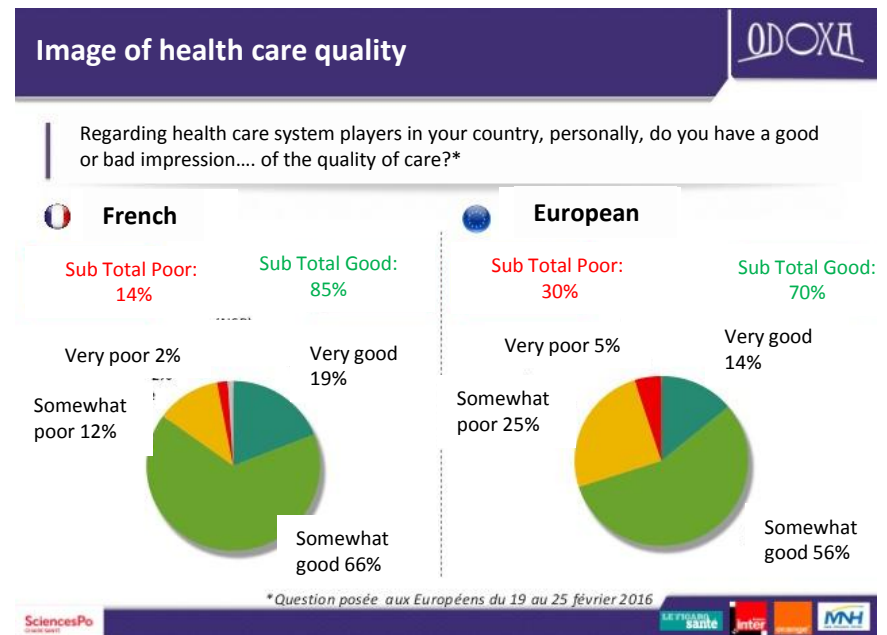
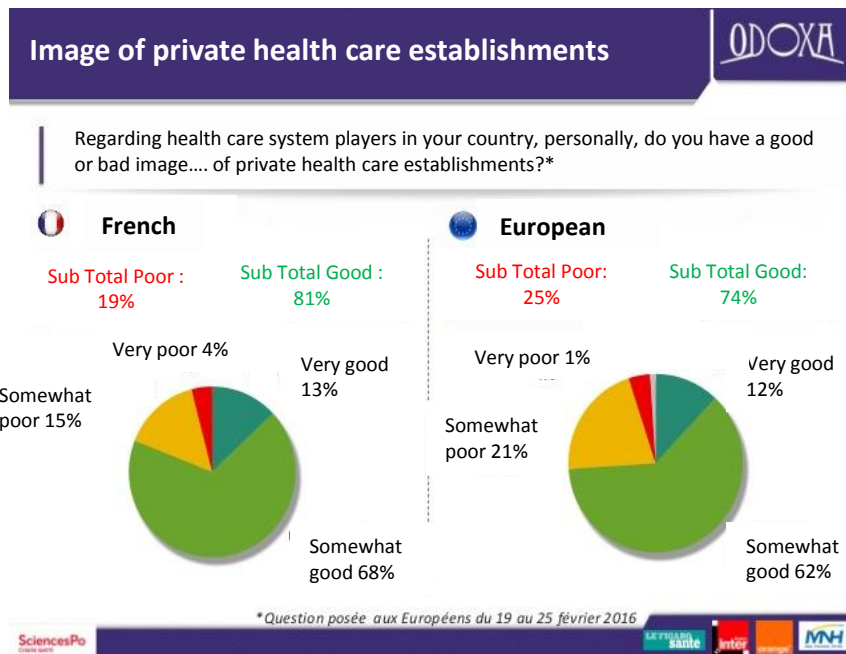


## 2. A METRIC YOU CAN RELY ON: FRENCH CUSTOMERS ARE SATISFIED

A 2016 survey shows that the French, much more than other Europeans:

Love their health care establishments,  
especially the private ones...

...and that they have a much better image  
of the quality of care in their system



### 3. FRANCE IS A COST EFFECTIVE MEDICAL DESTINATION

- Surgery prices in France are much lower than on average<sup>(1)</sup> in America
- They are in fact 2 to 5 times less than prices charged in the United States

#### Procedures involved:

Average cost per procedure	United States	France
■ Coronary bypass	113 000	23 700
■ Heart valve replacement	150 000	31 700
■ Hip replacement	47 000	10 700
■ Gastric bypass	35 000	9 900
■ Mastectomy	17 000	5 600

Elective surgery: orthopedics, cardiovascular, digestive, certain cancers, and more...

A vast and growing field with the development of outpatient and/or minimally invasive **procedures**.

- Can be used purely for health care cost savings reasons
- Can also be used as an incentive to your employees,

Source: : France stratégie – March 2015. Prices in France increased by 30% for non-resident patients per customary practice.

(1) Why an “average American price”? Because these prices vary greatly from one hospital to another, depending on the insurer's bid and capacity for negotiation. Available data are for that matter constantly evolving since the creation, by private insurers, of the HCCI (Health Care Costs Institute)



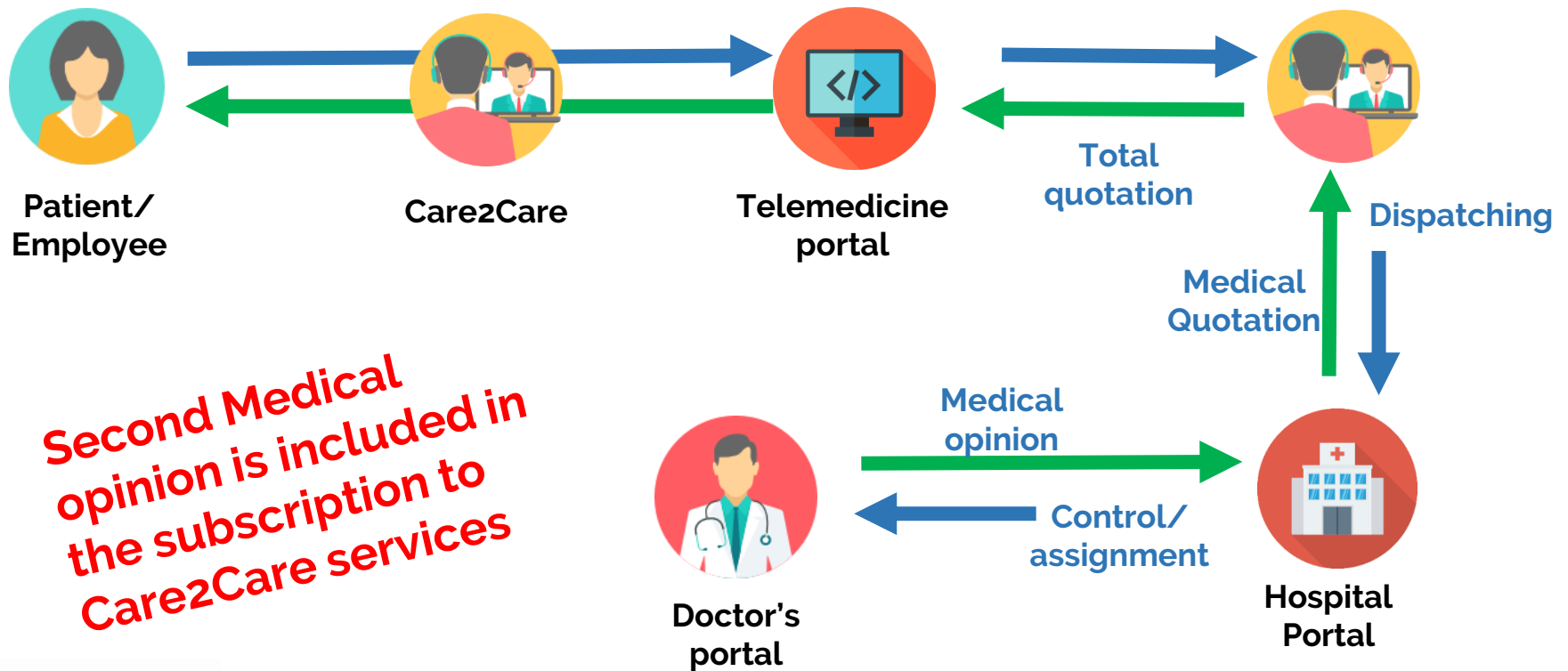


#### IV. OUR OFFERING IN FRANCE

# 1. SELECTING CARE FACILITIES IN FRANCE

- **CARE2CARE** is an independent organization that selected clinics and hospitals in France, using a systematic and transparent approach with following considerations:
  - Rankings published in various media,
  - Results of HAS certification and regular updates,
  - Specific safety metrics, particularly KPIs in place to prevent hospital-acquired infections,
  - Their practices in matters of outpatient surgery (rate of readmission), minimally invasive techniques, assistance with quick rehabilitation, etc.,
  - In each discipline, we have selected 3 to 4 public and/or private health care facilities among the best in the 1370 medicine/surgery/obstetrics (MCO) in France.

## 2. HOW DO WE PROCESS A PATIENT REQUEST?



### 3. FULL CHAPERONING AND CONCIERGERIE SERVICES

- Travel and patient chaperoning
  - Assisting the travel agent to prepare the trip: flight, hotel/lodging, transportation, touring as needed
  - Reception at the airport
  - Transportation to the hotel, clinic or hospital
  - Staff present throughout their stay
  - Preparation for returning home
- Medical services (as needed):
  - Coordination of pre- and post-operative testing and visits
  - Administrative organization of hospitalization (admission, hospital stay, discharge,...)
  - “Follow up” to discharge from hospital facility in association with the patient’s medical environment of origin
- Patient file management
  - secured patient portal for medical data to confidentially flow back and forth between patient and care specialist

# CO-FOUNDERS AND PARTNERS OF CARE2CARE



**André WENCKER** HEC 74, member of the Institute of Actuaries (1995), holder of an Executive Health MBA EHESP and ESCP Europe – 2013 (Comparative study and analysis of primary health systems in the developed world), is a specialist in health insurance.

After starting out in the Deposit and Consignment Fund, he worked in the insurance field, both basic and supplemental, and was a director at Gras Savoye, Maaf-Santé and CEO of the MGC Mutual. In these last two entities, in particular, he drove significant development.

He is on the Board of the French foundation "FORCE", dedicated at the financing of health research.



**Jean-François VERMONT** HEC 78, DEA in Public Economy, Associate CEO of the CRM PFLS Group and President of the Board of Directors of the Franco-Canadian Joint Venture Beconnect.

Since 1986, Jean-François Vermont has directed more than 200 projects in the field of developing quality client relations, involving all aspects of reception and service provided to clients, users, subscribers, members, users of public and private services. PFLS counts some major private or public entities among its clients: Orange, Pôle Emploi, etc....



**Pascal ORLIAC**, is a Lecturer at the University of New Hampshire's Peter T. Paul College of Business and Economics, and a member of the board of Advisors of Pragmatic Consulting Inc.

As Global VPHR of Goss International, Pascal directed the design and implementation of HR strategies and practices in the Americas, Europe and Asia-Pacific. He started his career as an entrepreneur and was co-founder of two start-up companies in the Tourism industry in France. Pascal holds a MBA from HEC Paris, France, and a Bachelor degree in Management Sciences with concentrations in Marketing and Finance from Paris University.



# THANK YOU



## CARE2CARE

MEDICAL TRAVEL

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