



**2020 ACA
Individual Non-Medigap & Small Group Markets**

Public Rate Hearing

Tuesday, July 16, 2019

Presenter: Todd Switzer, Chief Actuary

2020 "Individual Non-Medigap" Filed Rates

	1	2	6	7	8	9	9	10	13	14
			Actual	Actual			Approved	Filed		Filed
			Members	Members			2019	05/01/19	2019	2020
			On & Off	On & Off	vs.	03/31/19	Average	Average	Illustrative*	Illustrative*
	Legal	Coverage	Exchange	Exchange	03/31/18	Market	Rate	Rate	Monthly	Monthly
	Entity	Type	03/31/18	03/31/19	Δ	Share	Increase	Increase	Premium	Premium
1	CareFirst BlueChoice, Inc.	HMO	115,584	111,706	-3.4%	56%	-17.0%	-8.9%	\$383	\$364
2	CF GHMSI	PPO	5,247	4,292	-18.2%	2%	-11.1%	9.1%	\$626	\$693
3	CF CFMI	PPO	8,646	7,393	-14.5%	4%	-11.1%	9.1%	\$626	\$693
4	Kaiser	HMO	70,827	77,689	9.7%	39%	-7.4%	3.9%	\$349	\$366
	TOTAL		200,304	201,080	0.4%	100%	-13.2%	-2.9%	\$384	\$384
	<u>SUBTOTAL (By Insurer)</u>									
1	CareFirst		129,477	123,391	-4.7%	61%	-16.4%	-7.2%	\$406	\$395
2	Kaiser		70,827	77,689	9.7%	39%	-7.4%	3.9%	\$349	\$366
	TOTAL		200,304	201,080	0.4%	100%	-13.2%	-2.9%	\$384	\$384
	<u>SUBTOTAL (By Coverage Type)</u>									
1	HMO		186,411	189,395	1.6%	94%	-13.4%	-3.6%	\$369	\$365
2	PPO		13,893	11,685	-15.9%	6%	-11.1%	9.1%	\$626	\$693
	TOTAL		200,304	201,080	0.4%	100%	-13.2%	-2.9%	\$384	\$384

* Before any "Advance Premium Tax Credit" (APTC) subsidy, lowest-cost Silver plan, Off-Exchange, 40-year-old. Will not match overall increase since increases vary by metal.

Individual Non-Medigap: Counties with the Most Enrollment Growth (On-Exchange)

Members as of 01/31/19 vs. 01/31/18

	<u>County</u>	<u>Region</u>	<u>% Net Growth</u>
1	Wicomico	Eastern Shore	27.8%
2	Caroline	Eastern Shore	26.5%
3	Somerset	Eastern Shore	26.3%
4	Washington	West	23.1%
5	Allegany	West	21.4%
6	Garrett	West	21.3%
7	St. Mary's	Southern MD	21.0%
8	Dorchester	Eastern Shore	20.8%
9	Kent	Eastern Shore	16.8%
10	Talbot	Eastern Shore	16.6%

SOURCE: Maryland Health Benefit Exchange, Press Release, 12/17/18.

2020 “Small Group” Filed Rates

	1	2	7	8	9	10	10	11	18	19	
			Actual	Actual			Approved	Filed			
			Members	Members			1Q19	1Q20	1Q19	1Q20	
		On & Off	On & Off	vs.	03/31/19	Average	Average	Illustrative*	Illustrative*		
	Legal Exchange	Coverage	Exchange	03/31/18	03/31/19	Market Share	Rate	Rate	Monthly Premium	Monthly Premium	
	Entity	Type	03/31/18	03/31/19	Δ	Share	Increase	Increase	Premium	Premium	
1	CareFirst BlueChoice, Inc.	HMO	158,001	167,582	6.1%	63%	4.7%	0.6%	\$337	\$328	
2	CF GHMSI	PPO	15,455	14,036	-9.2%	5%	-0.7%	8.4%	\$400	\$437	
3	CF CFMI	PPO	7,239	7,640	5.5%	3%	-0.7%	8.4%	\$400	\$437	
4	Kaiser	HMO	9,299	10,344	11.2%	4%	3.5%	10.0%	\$252	\$281	
5	Aetna Health, Inc.	HMO	3,034	211	-93.0%	0%	3.3%	15.5%	\$419	\$493	
6	Aetna Life Insurance Co.	PPO	3,417	677	-80.2%	0%	2.9%	14.5%	\$446	\$525	
7	United Healthcare of the Mid-Atlantic	HMO	5,490	5,250	-4.4%	2%	6.1%	6.9%	\$271	\$281	
8	United Healthcare (Optimum Choice)	HMO	18,407	17,085	-7.2%	6%	6.2%	12.3%	\$283	\$296	
9	United Healthcare (MAMSI)	EPO	22,736	21,140	-7.0%	8%	5.7%	12.4%	\$300	\$327	
10	United Healthcare Insurance Co.	PPO	22,655	23,885	5.4%	9%	10.7%	10.9%	\$334	\$345	
	TOTAL		265,733	267,850	0.8%	100%	4.9%	4.4%	\$331	\$334	
	<u>SUBTOTAL (By Insurer)</u>										
1	CareFirst		180,695	189,258	4.7%	71%	4.0%	1.5%	\$344	\$340	
2	Aetna		6,451	888	-86.2%	0%	3.1%	14.7%	\$440	\$517	
3	Kaiser		9,299	10,344	11.2%	4%	3.5%	10.0%	\$252	\$281	
4	UnitedHealthcare (UHC)		69,288	67,360	-2.8%	25%	7.5%	11.4%	\$306	\$322	
	TOTAL		265,733	267,850	0.8%	100%	4.9%	4.4%	\$331	\$334	
	<u>SUBTOTAL (By Coverage Type)</u>										
1	HMO		194,231	200,472	3.2%	75%	4.8%	2.3%	\$326	\$322	
2	EPO		22,736	21,140	-7.0%	8%	5.7%	12.4%	\$300	\$327	
3	PPO		48,766	46,238	-5.2%	17%	4.9%	9.8%	\$367	\$391	
	TOTAL		265,733	267,850	0.8%	100%	4.9%	4.4%	\$331	\$334	
	* Before any employer contributions, lowest-cost Silver plan, Off Exchange, 40-year-old, male. Will not match overall increase since increases vary by metal and benefit plan.										

ACA Gain/Loss History

1	2	10	11	10	12	11	12	13
		GAAP	GAAP	GAAP	GAAP	GAAP	GAAP	GAAP
		Average	Members	Loss		Operating	G/L	G/L
Market	Year	Members	12/31/xx	Ratio	Premium	Costs	\$s	%
Individual	2013	122,669	120,063	81.9%	337,931,662	77,832,954	(16,747,664)	-5.0%
IVL	2014	105,971	143,432	97.5%	\$344,050,859	\$79,394,909	(\$70,812,867)	-20.6%
	2015	233,120	231,710	92.3%	\$810,745,438	\$175,103,912	(\$112,653,442)	-13.9%
	2016	232,557	219,185	97.1%	\$902,123,906	\$200,227,890	(\$173,671,979)	-19.3%
	2017	224,787	206,710	97.9%	\$1,100,505,101	\$195,278,473	(\$171,727,888)	-15.6%
	2018	189,632	175,560	80.9%	\$1,338,484,453	\$199,727,988	\$55,581,357	4.2%
	2014-2018:	197,213	195,319	91.6%	\$4,495,909,757	\$849,734,175	(\$473,285,822)	-10.5%
Small Group	2013	349,677	342,757	55.8%	\$2,301,120,672	\$286,407,681	\$74,051,007	3.2%
SG	2014	118,385	228,526	69.6%	\$565,001,913	\$79,341,393	\$92,304,676	16.3%
	2015	205,309	204,825	73.4%	\$1,037,124,778	\$202,442,541	\$66,981,688	6.5%
	2016	229,691	232,198	71.4%	\$1,179,456,731	\$231,546,411	\$105,304,798	8.9%
	2017	241,775	255,778	74.8%	\$1,221,889,263	\$228,181,012	\$79,191,275	6.5%
	2018	259,780	270,967	78.3%	\$1,377,255,363	\$270,679,427	\$27,740,858	2.0%
	2014-2018:	210,988	238,459	74.2%	\$5,380,728,048	\$1,012,190,784	\$371,523,295	6.9%

NOTE: Only includes currently active carriers (e.g., excludes Evergreen, CIGNA).

ACA Individual Non-Medigap 2018 Gain/Loss

1	2	3	4	7	9	10	11	11	12	13	14	15
GAAP BASIS												
ACA												
				Average			Loss	Operating	Operating	Operating	Gain/	Gain/
				Members	Claims	Income	Ratio	Costs	Costs	Costs	Loss	Loss
Year	Carrier							\$	%	PMPM	\$s	%
2018	CF	BlueChoice	HMO	110,831	\$585,597,376	\$792,740,552	73.9%	\$148,091,775	18.7%	\$111	\$59,051,401	7.4%
	CF	GHMSI	PPO	5,010	\$77,460,232	\$86,297,302	89.8%	\$8,648,091	10.0%	\$144	\$188,979	0.2%
	CF	CFMI	PPO	8,361	\$115,828,104	\$139,158,471	83.2%	\$15,629,992	11.2%	\$156	\$7,700,375	5.5%
	KP		HMO	65,430	\$304,289,396	\$320,288,128	95.0%	\$27,358,130	8.5%	\$35	(\$11,359,398)	-3.5%
TOTAL				189,632	\$1,083,175,108	\$1,338,484,453	80.9%	\$199,727,988	14.9%	\$88	\$55,581,357	4.2%
<u>Subtotals</u>												
	CF		PPO	13,371	\$193,288,336	\$225,455,773	85.7%	\$24,278,083	10.8%	\$151	\$7,889,354	3.5%
	CFI			124,202	\$778,885,712	\$1,018,196,325	76.5%	\$172,369,858	16.9%	\$116	\$66,940,755	6.6%

2018 MD Financial Results - Active ACA Carriers – GAAP Basis

1 CALENDAR 2018			2	3	4	5	8	9	10	11	13	14
				Actual		ASC Fees	or	Loss	Operating	Operating	Gain/ Loss	Gain/ Loss
				Members	%	Premium		Ratio	Expense	Expense		
				12/31/XX					\$s	%	\$s	%
Individual Medigap	Pre-Standardized & Standardized	Fully Insured		168,151	4%	\$446,221,364		77.4%	\$68,373,852	15.3%	\$32,524,196	7.3%
Individual Non-Medigap	ACA	Fully Insured		175,560	4%	\$1,338,484,453		80.9%	\$199,727,988	14.9%	\$55,581,356	4.2%
Individual Non-Medigap	Grandfathered	Fully Insured		21,227	1%	\$105,084,403		83.1%	\$26,879,756	25.6%	(\$9,099,173)	-8.7%
Small Groups	ACA	Fully Insured		270,967	7%	\$1,377,255,363		78.3%	\$270,679,427	19.7%	\$27,740,858	2.0%
Small Groups	Grandfathered	Fully Insured		3,104	0%	\$52,895,489		77.6%	\$10,807,624	20.4%	\$1,042,827	2.0%
Large Groups	Non-Grandfathered	Fully Insured		392,618	9%	\$2,190,398,273		79.8%	\$292,869,283	13.4%	\$150,643,653	6.9%
Large Groups	Grandfathered	Fully Insured		21,462	1%	\$114,231,462		83.3%	\$11,362,077		\$7,665,298	6.7%
Large Groups		Self-Insured		948,453	23%	\$254,118,819		2.6%	\$289,665,204	114.0%	(\$42,113,555)	-16.6%
Large Groups	Specific StopLoss	Fully Insured		42,595	1%	\$57,522,389		68.8%	\$1,747,641	3.0%	\$16,174,747	28.1%
Large Groups	Aggregate StopLoss	Fully Insured		0	0%	\$1,567,869		0.0%	\$0	0.0%	\$1,567,869	100.0%
TPA	Third Party Administrator	Self-Insured		579,235	14%	\$57,914,611		0.0%	\$46,779,536	80.8%	\$11,135,075	19.2%
FEHBP: FEP (Blues), etc.	Indemnity, non-HMO	Fully Insured		359,061	9%	\$2,365,280,288		93.3%	\$146,291,550	6.2%	\$12,725,312	0.5%
FEHBP: OPM HMO	HMO	Fully Insured		193,314	5%	\$1,203,565,446		88.1%	\$76,993,127	6.4%	\$66,521,356	5.5%
FEDVIP	Federal Employees' Dental/Vision Program	Fully Insured		76,937	2%	\$13,900,371		91.2%	\$294,273	2.1%	\$933,765	6.7%
Medicare Advantage		Fully Insured		7,901	0%	\$115,027,841		86.6%	\$8,070,477	7.0%	\$7,297,545	6.3%
Medicare Part D		Fully Insured		103,863	3%	\$97,728,059		77.1%	\$18,822,357	19.3%	\$3,596,966	3.7%
Medicaid		Fully Insured		219,552	5%	\$976,719,302		90.2%	\$97,900,609	10.0%	(\$1,760,444)	-0.2%
Stand-Alone Dental		Fully Insured		307,579	7%	\$106,255,823		68.8%	\$28,873,223	27.2%	\$4,239,802	4.0%
Stand-Alone Vision		Fully Insured		191,021	5%	\$17,888,249		89.7%	\$1,682,144	9.4%	\$162,879	0.9%
Formerly "Civilian Health & Medical Program of the TriCare Uniformed Services" (CHAMPUS)		Fully Insured		0	0%	\$0			\$0		\$0	
Other1	(e.g., Public Programs)			5,989	0%	(\$8,944,796)		-188.3%	\$1,326,068	-14.8%	(\$27,115,316)	303.1%
Other2	Medicare Cost			46,851	1%	\$386,008,028		101.9%	\$37,979,242	9.8%	(\$45,148,963)	-11.7%
TOTAL				4,135,441	100%	\$11,269,123,108		83.0%	\$1,637,125,457	14.5%	\$274,316,055	2.4%

Assumptions

	1	2	3	4
		INDIVIDUAL NON-MEDIGAP		
		FILED 05/01/19		
	<u>Assumptions</u>	<u>Average</u>	<u>Low</u>	<u>High</u>
1	Morbidity - 2018 to 2020	1.094	1.006	1.420
2	Risk Adjustment Paid PMPM	(\$8)	(\$133)	\$645
3	Annual Trend	6.9%	4.3%	9.5%
4	Contribution to Reserve/Profit	2.4%	2.0%	3.0%
5	Administrative Costs PMPM	\$60	\$33	\$111
6	Broker Costs PMPM	\$4	\$2	\$5
7	Projected Traditional Loss Ratio	79.2%	75.7%	84.1%
8	Projected NAIC Minimum Loss Ratio	83.7%	80.2%	88.5%
11				
12		SMALL GROUPS		
13		FILED 05/01/19		
14				
15	<u>Assumptions</u>	<u>Average</u>	<u>Low</u>	<u>High</u>
16	Morbidity - 2018 to 2020	0.994	0.989	1.129
17	Risk Adjustment PMPM	\$8	(\$73)	\$118
18	Annual Trend	7.4%	3.9%	11.2%
19	Contribution to Reserve/Profit	2.0%	0.0%	4.3%
20	Administrative Costs PMPM	\$51	\$35	\$53
21	Broker Costs PMPM	\$23	\$3	\$25
22	Projected Traditional Loss Ratio	76.0%	74.4%	81.1%
23	Projected NAIC Minimum Loss Ratio	80.8%	80.2%	86.7%

High Claims – 2018 Individual Market

2018 Top 10 Paid Claims - Individual ACA Market

COMPANY:	<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>
1	\$1,320,445	\$818,496	\$1,286,876	\$1,519,307
2	\$964,144	\$798,098	\$1,101,855	\$939,155
3	\$913,416	\$786,070	\$822,477	\$762,191
4	\$819,068	\$688,147	\$757,742	\$761,101
5	\$817,024	\$646,905	\$711,702	\$752,822
6	\$800,651	\$574,383	\$672,052	\$530,990
7	\$732,413	\$552,119	\$575,345	\$528,720
8	\$710,309	\$536,688	\$516,948	\$493,509
9	\$649,520	\$504,273	\$510,433	\$407,003
10	\$636,273	\$490,248	\$472,953	\$400,332

Top 10 Claimants' Total:	\$8,363,263	\$6,395,427	\$7,428,383	\$7,095,129
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Portion That Would Be Covered by Reinsurance:	\$1,840,000	\$1,840,000	\$1,840,000	\$1,840,000
	22%	29%	25%	26%

Portion Remaining as The Company's Liability:	\$6,523,263	\$4,555,427	\$5,588,383	\$5,255,129
	78%	71%	75%	74%

1. Not “out of the ordinary” (e.g., no \$5M claims).
2. Care management still impactful since carriers still pay ~3/4ths of high claims.

HSCRC – Hospital Global Revenues

	1	2	3	4	5	6	7	8
				Per Capita Hospital Global Revenue				
			<u>Year</u>	<u>Growth</u>	<u>Δ</u>	<u>Private</u>	<u>Public</u>	<u>Δ</u>
1								
2								
26	8	FY	2016	2.61%	2.6%			
27	9	FY	2017	1.63%	-1.0%			
28	10	FY	2018	2.77%	1.1%			
29	11	FY	2019	1.37%	-1.4%	1.37%	1.37%	0.00%
30	12	FY	2020	3.28%	1.9%	4.79%	3.09%	-1.70%
31								
32	Annualized - 2018 to 2020:					3.07%		

34 **SOURCE: HSCRC, Final Recommendation for the Update Factors for RY 2020, 06/12/19.**

1. For the 2020 there is a spread between private and public leading to an annualized increase for private coverage of 3.07%. Private payers will pay 7.7% more than public payers effective 07/01/19 replacing the former 6.0% differential.
2. Some reasons that actual experience may deviate from this figure include 1) changes in mix of hospitals utilized, 2) changes in mix of procedures, 3) moving services out of a hospital setting, and 4) out-of-state care.
3. Approximately 39% of total claims costs are hospital costs (inpatient & outpatient), 24% for Kaiser.

Risk-Based Capital (RBC) & Net Income

1	2	3	4	16	17	18	20	21	22
STATUTORY BASIS									
ACA +GF									
Year	Carrier			Total Adjusted Capital (TAC)	Authorized Control Level (ACL)	Risk- Based Capital (RBC)	Net Income	%	Total Revenue
2018	CF	BlueChoice	HMO	\$721,055,178	\$113,560,766	635%	\$63,916,927	1.8%	\$3,620,481,865
	CF		GHMSI	\$1,200,102,655	\$130,040,942	923%	\$100,247,719	2.9%	\$3,463,078,384
	CF		CFMI	\$724,475,046	\$110,144,095	658%	\$110,061,321	5.6%	\$1,966,402,934
	KP		HMO	\$436,957,951	\$82,624,411	529%	\$23,848,771	0.6%	\$4,196,867,845
	Aetna		HMO	\$489,511,836	\$84,779,297	577%	\$96,319,039	3.1%	\$3,153,452,606
	Aetna		PPO	\$3,818,010,799	\$870,039,336	439%	\$1,933,016,972	9.7%	\$19,837,649,241
	UHC	Mid-Atlantic	HMO	\$155,676,875	\$29,986,897	519%	\$47,154,871	4.8%	\$980,774,442
	UHC	Optimum Choice	HMO	\$33,897,415	\$3,665,796	925%	\$21,053,057	7.7%	\$272,256,411
	UHC	MAMSI	EPO	\$22,982,490	\$4,208,615	546%	\$8,933,875	6.8%	\$131,425,679
	UHC		PPO	\$8,574,087,987	\$1,600,314,403	536%	\$3,080,480,574	5.7%	\$54,441,961,742
TOTAL			\$16,176,758,232	\$3,029,364,558	534%	\$5,485,033,126	6.0%	\$92,064,351,149	
							Net		
Year	Carrier			TAC	ACL	RBC	Income	%	Revenue
2017	CF	BlueChoice	HMO	\$672,613,635	\$93,326,144	721%	(\$27,820,788)	-0.9%	\$3,248,537,769
	CF		GHMSI	\$1,161,213,975	\$114,888,928	1011%	\$34,497,590	1.0%	\$3,351,957,583
	CF		CFMI	\$642,785,371	\$95,060,352	676%	(\$28,858,993)	-1.5%	\$1,889,765,579
	KP		HMO	\$160,228,051	\$69,285,129	231%	(\$85,020,295)	-2.4%	\$3,556,492,140
	Aetna		HMO	\$525,277,678	\$93,011,175	565%	\$129,475,325	3.7%	\$3,521,156,191
	Aetna		PPO	\$2,991,103,987	\$732,307,689	408%	\$1,339,391,155	7.4%	\$17,984,670,019
	UHC	Mid-Atlantic	HMO	\$104,478,161	\$28,083,666	372%	\$39,162,340	4.5%	\$861,544,138
	UHC	Optimum Choice	HMO	\$22,379,138	\$4,070,738	550%	\$10,844,824	4.9%	\$221,648,917
	UHC	MAMSI	EPO	\$14,116,344	\$2,717,032	520%	\$5,421,271	6.5%	\$83,046,388
	UHC		PPO	\$6,784,990,282	\$1,436,352,532	472%	\$2,599,588,016	5.1%	\$50,538,608,765
TOTAL			\$13,079,186,622	\$2,669,103,385	490%	\$4,016,680,445	4.7%	\$85,257,427,489	

1332 Reinsurance Waiver

	1	2	3	7	8	9	10	12	13	14	15	16
11												
12		WAKELY									FUNDING	
13		05/29/18			Federal	Federal			Annual			
14					Net (HIF) APTC	Pass-Thru	Wakely	1332	Maryland	Balance	State	Balance
15					Savings/	% of RI	RI	Premium	State	As of	Expenditure/	As of
16	<u>Year</u>	<u>Members</u>	<u>Δ</u>	<u>APTC</u>	<u>Pass-Thru \$s</u>	<u>Cost</u>	<u>Cost</u>	<u>Δ</u>	<u>Funding</u>	<u>01/01/xx</u>	<u>Depletion</u>	<u>12/31/xx</u>
17	2019	181,522	5.8%	\$550,954,999	\$303,561,633	65.7%	\$462,000,000	-30.9%	\$365,000,000	\$365,000,000	(\$158,438,367)	\$206,561,633
18	2020	179,439	5.7%	\$601,644,964	\$318,784,587	69.5%	\$459,000,000	-29.0%	\$0	\$206,561,633	(\$140,215,413)	\$66,346,220
19	2021	172,468	2.3%	\$821,807,384	\$156,679,990	70.3%	\$223,000,000	-13.5%	\$0	\$66,346,220	(\$66,320,010)	\$26,210
20	2022	167,273	0.0%	\$1,040,247,966	\$0	0.0%	\$0	0.0%	\$0	\$26,210		
21	TOTAL	700,702	3.5%	\$3,014,655,313	\$779,026,210	68.1%	\$1,144,000,000	-18.8%	\$365,000,000		(\$364,973,790)	

SB 239 / HB 258, “Health Insurance Market Stabilization – Provider Fee” is estimated to generate an additional \$600M over four years (2020 -2023) from 1% (\$140M for 2020).

Is the Waiver Working?

1	2	3	4	5	6	7	8	9	10	11	12	13	14
	2017 Single	Risk Pool	NEW as of 06/30/18 (From Outside Company)					2018 Single	Risk Pool	NEW as of 02/28/19 (From Outside Company)			
		Average			Average			Average			Average		
INM MKT	<u>Members</u>	<u>Age</u>	<u>Members</u>	<u>Δ</u>	<u>Age</u>	<u>Δ</u>	INM MKT	<u>Members</u>	<u>Age</u>	<u>Members</u>	<u>Δ</u>	<u>Age</u>	<u>Δ</u>
Young Adult/Catastrophic	8,405	25.7					Young Adult/Catastrophic	7,104	25.1				
Bronze	54,922	40.7					Bronze	47,270	41.0				
Silver	137,810	40.3					Silver	92,641	41.1				
Gold	25,894	35.9					Gold	45,088	40.1				
Platinum	1,533	34.3					Platinum	1,678	37.3				
TOTAL	228,562	39.7	32,733	14%	38.9	(0.8)	TOTAL	193,781	40.6	48,468	25%	37.1	(3.4)

Individual Non-Medigap: Subsidies

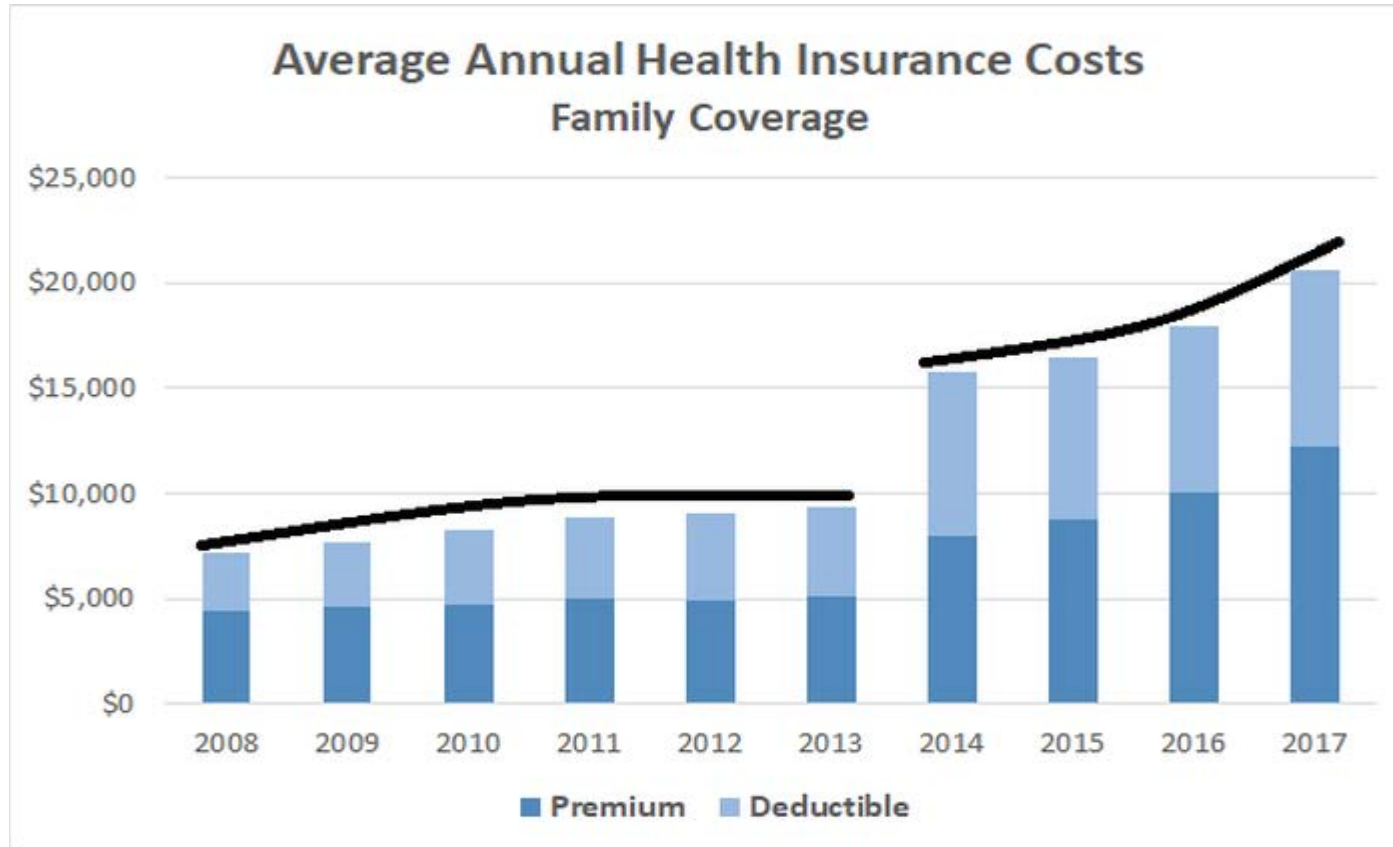
	1	2	3	4	5	6	7	8	9	10	17	18	19	20	21	22	23	24	
15	ACA						ACA				ACA		ACA		ACA				
16											Pre-APTC		Post-APTC		Amongst Only APTCers				
17	Data	On-	Off-							Ave.	Ave.		Ave.		Ave.				
18	Year	As Of...	Exchange	%	Exchange	TOTAL	APTC	%	CSR	%	Prem.	Δ	Prem.	Δ	APTC	Δ	Prem.	Δ	
19	2012	12/31/12		0.0%		52,421		0%		0%									
20	2013	12/31/13		0.0%		65,109		0%		0%									
21	2014	12/31/14	81,091	48.1%	87,599	168,690		0%		0%									
22	2015	12/31/15	122,778	51.2%	117,062	239,840	85,345	36%		0%									
23	2016	12/31/16	162,177	70.5%	67,772	229,949	113,223	49%		0%									
24	2017	12/31/17	157,832	75.5%	51,306	209,138	118,928	57%	85,475	41%	\$431		\$214		\$404		\$147		
25	2018	06/30/18	146,014	75.9%	46,265	192,279	121,284	63%	70,206	37%	\$629	45.9%	\$226	5.6%	\$545	34.9%	\$131	-10.9%	
26	2019	07/09/19	156,963	76.3%	48,774	205,737	124,541	61%	63,883	31%	\$552	-12.2%	\$191	-15.5%	\$477	-12.5%	\$110	-16.0%	
SOURCE: 2019 CMS Open Enrollment Period (OEP) State-Level Public Use Files.																			

Individual Non-Medigap Market: Enrollment Detail

1		2	3	4	5	6	7	8	9	10	11	12	13
ACTUAL MEMBERS 03/31/19			Federal	FPL	2019	APTC	CSR	On	On	Off	On & Off		
<u>Metal</u>		<u>AV</u>	<u>Threshold</u>	<u>FPL</u>	<u>Eligibility</u>	<u>Eligibility</u>		<u>APTC</u>	<u>Non-APTC</u>	<u>Non-APTC</u>	<u>TOTAL</u>	<u>%</u>	<u>CSR</u>
Catastrophic/Young Adult		57%						0	2,777	4,207	6,984	3%	
Bronze		60%						22,278	6,899	14,695	43,872	22%	
Silver*	Base Plan	70%	401%+	\$48,560	No APTC			554	934	16,743	18,231	9%	
		70%	251-400%	\$30,350	APTC			3,828	0	0	3,828	2%	
		73%	201-250%	\$24,280	APTC	CSR		6,161	15	0	6,176	3%	6,176
		87%	151-200%	\$18,210	APTC	CSR		25,300	29	0	25,329	13%	25,329
		94%	100-150%	\$12,140	APTC	CSR		31,360	8	0	31,368	16%	31,368
Silver	Subtotal							67,203	986	16,743	84,932	42%	
Gold		80%						33,727	7,341	22,653	63,721	32%	
Platinum		90%						1,178	393	738	2,309	1%	
TOTAL								124,386	18,396	59,036	201,818	100%	62,873
								62%	9%	29%	100%		31%

1. Appears that ~11% or 22,278 members bought a “free” Bronze plan; about equal to last year.
2. Appears that ~17% or 34,905 members “bought up” to Gold or Platinum; an increase of ~11,000 members vs. last year (12%).

Individual Non-Medigap Market: Consumer Perspective



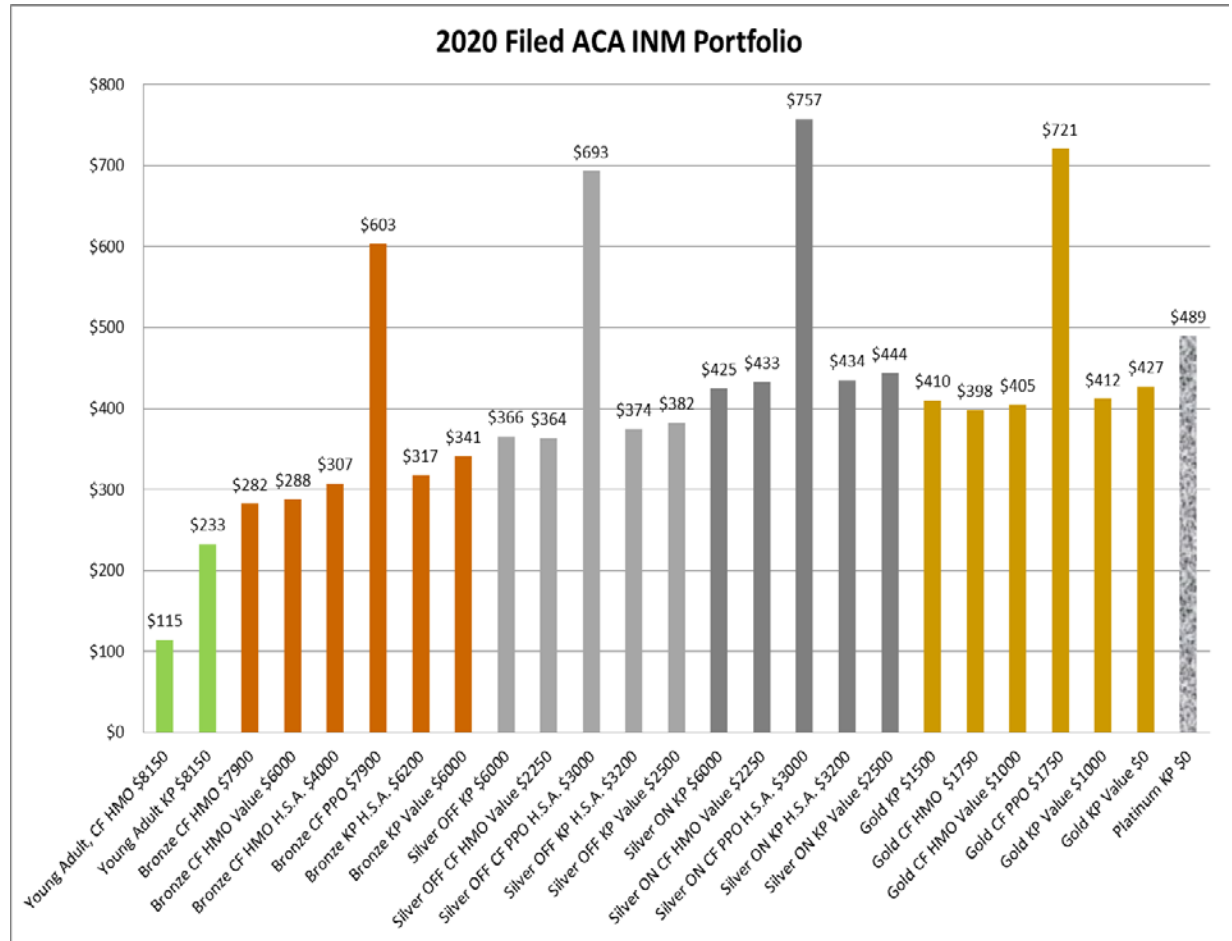
SOURCE: "The Most Important Health Insurance Chart You'll Ever See," The Motley Fool, Keith Spreights, 09/05/17.

1. Individual members “bought up” in 2019 such that the average deductible and out-of-pocket max were \$4122 & \$7123. Before “buy-ups” these 2 figures are estimated at \$3995 and \$7381 for 2020.

2. For the first time since the start of the ACA, the benefit plans had some stability. Only 5 out of 20 plans were changed.

3. “Value” plans provide meaningful coverage before the deductible (subject to copay).

For Bronze, the deductible limit is \$6000 & at least 3 PCP visits must be before the deductible. For Silver the deductible limit is \$2500 and all PCP & Specialist & urgent care office visits & X-rays & labs must be before the deductible. Additionally for Gold the deductible limit is \$1000 and generic drugs must be before the deductible.



ACA Small Group Enrollment Detail

	1	3	9	10	11	12
1	ACTUAL MEMBERS 03/31/19					
2		Federal	On	Off	On & Off	
3	<u>Metal</u>	<u>AV</u>	<u>Non-APTC</u>	<u>Non-APTC</u>	<u>TOTAL</u>	<u>%</u>
4	Catastrophic/Young Adult	57%	0	0	0	0%
5	Bronze	60%	87	18,466	18,553	7%
11	Silver		309	140,817	141,126	53%
12	Gold	80%	240	69,063	69,303	26%
13	Platinum	90%	98	38,770	38,868	15%
14	TOTAL		734	267,116	267,850	100%
15			0.3%	99.7%	100.0%	

1. Only 734 members (0.3%) are in the Exchange, SHOP.
2. By comparison, 22% of Individual enrollment is Bronze vs. 7%.
3. By comparison, 1% of Individual enrollment is Platinum vs. 15%.

Wellness, Prevention, Efficient Care

Many Americans Delay Medical Care As They Can't Afford It

Share of Americans delaying medical care by household income in 2019

