

2009 Employee Benefits Survey **MACE - January 21, 2010**

Presented By Tim Luedtke, FSA of **Navigator Benefit Solutions LLC**

Curses or Blessings



"May you live in interesting times" Health Care Reform

"May you come to the attention of those in authority"

Public Option "May you find what you are looking for" Better Health, Security, & Freedom

Health Care Cost Who's to Blame?



	Consumer Reports ¹	Google Search ²
Insurer	1	2
Government	2	1
Doctor	3	4
Hospital	4	3
Consumer	5	5

Consumer Reports Telephone Interview - Reported March 2008

Google Search - "Health Care" Blame ????' Where ???? Is Insurer, Government, Doctor, Hospital, or Consum

Today's Discussion



- Health Care Today
- Survey Results An Actuarial Perspective
- What Works How An Employer Should Respond?

Cost



What Should We Measure?

Product / Service or **Financing**

Your Home



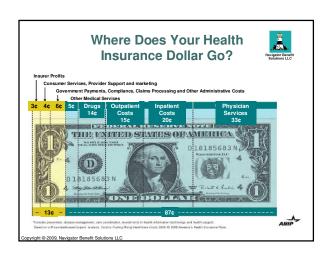


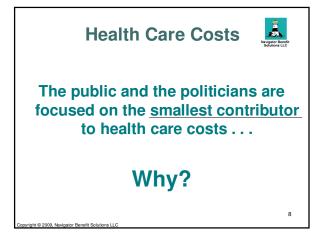




House

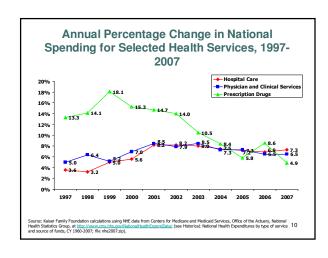
Financing .

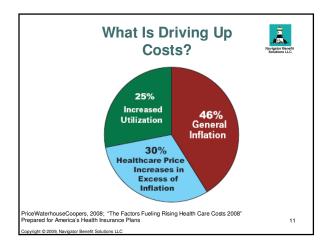




Health Care Costs

Let's Look At
The Product / Service

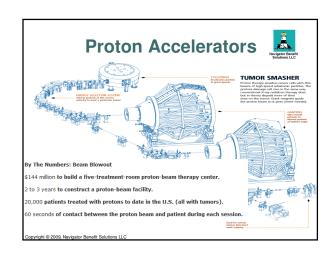


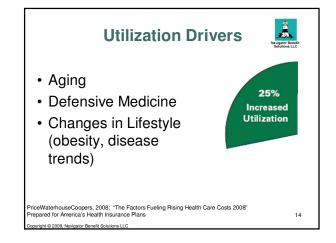


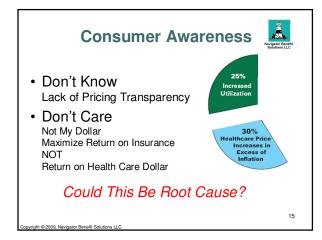
Excess Inflation
Drivers

• Reduced provider
competition
• Cost-shifting from Gov't
and uninsured to private
payors
• Higher-priced technologies (MRI,
Proton accelerators)

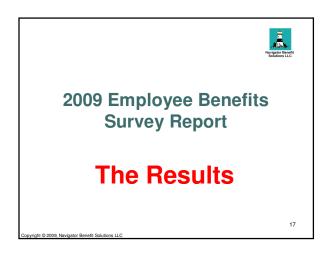
PriceWaterhouseCoopers, 2008; "The Factors Fueling Rising Health Care Costs 2008"
Prepared from America's Health Insurance Plans

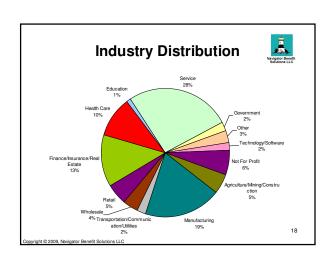


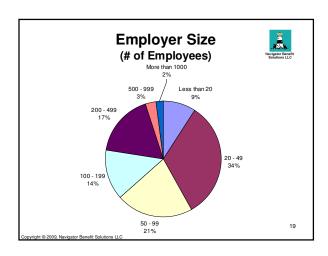


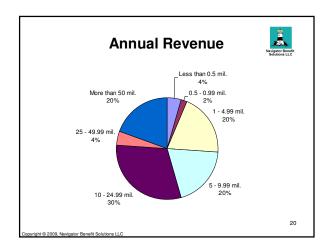


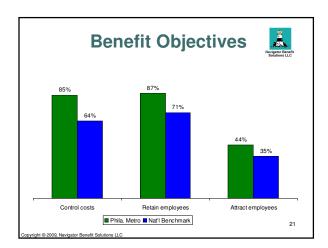












Key Findings



- Local plan designs are richer than national
- Local premiums are higher than national
- Local employee contributions higher than national
- PPO plans most popular followed by HMOs
- CDHPs currently offered by 15% of local employers, with another 16% considering offering one next year

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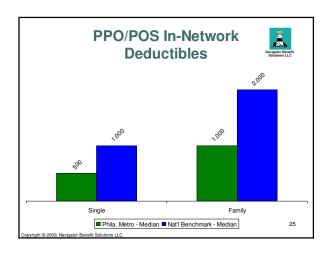
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PPO/POS Deductibles



Percent having no in-network deductible:

- Phila. Metro Book of Business 49%
- National Benchmark 21%

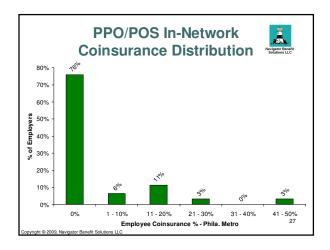


Median Coinsurance for PPO/POS Plans



In-Network:

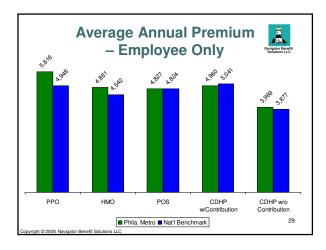
- Phila. Metro Book of Business 0%
- National Benchmark 20%

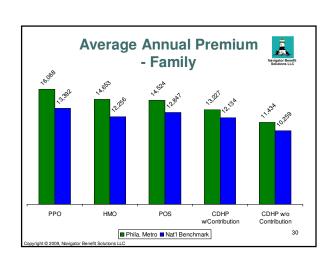


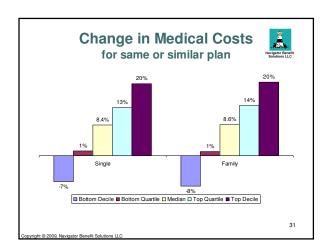
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Average Employee Contribution Rate

39%

19%

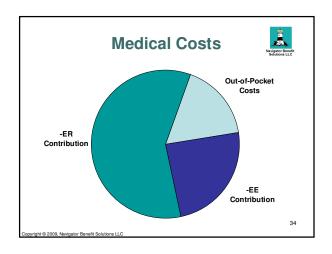
13%

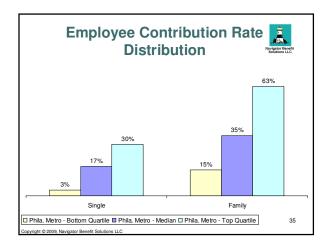
Single Family

Phila Metro - Average Nat'l Benchmark - Average

33

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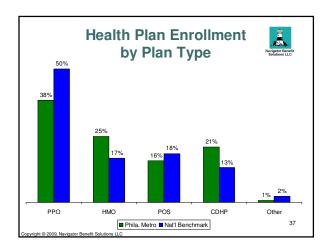




Key Findings



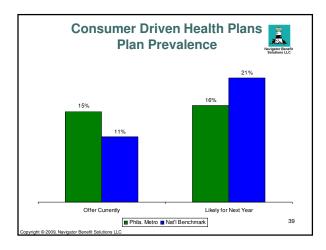
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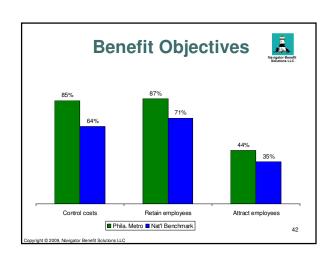


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Employee Acceptance			
	# of Employers	Aggregate Enrollment %	
PPO	54	63%	
POS	27	68%	
нмо	35	47%	
CDHP	15	92%	
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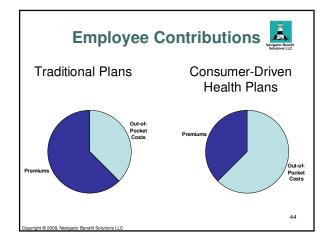


Planned Actions



- 60% of Phila. Metro employers are likely to increase the amount of premiums paid by employees next year
- 56% of Phila. Metro employers are likely to increase deductibles, co-pays or coinsurance
- Few are considering eligibility restrictions
- · None plan to eliminate coverage entirely

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Consumer-Driven Health Care Savings



Actuaries Found . . .

- 12 20% 1st Year Savings Over Traditional Plans
- Savings Continued In 2nd Year 3-5% versus PPO Plans
- · Significant Increase in Preventative Services
- Cost Savings NOT Result of Avoiding Appropriate Care

American Academy of Actuaries / Consumer-Driven Health Plans Work Group, May 2009; "Emerging Data on Consumer-Driven Health Plans"

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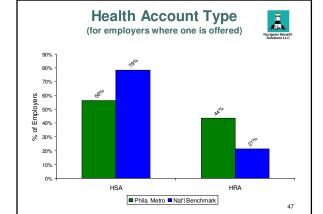
What Do We Need?



Advocates That LEAD,

Not Soldiers That FOLLOW

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HRAs vs. HSAs



Health Reimbursement Arrangements

- Employer Money Self-insured Plan
- No Vesting Not Portable
- · Higher Benefits for Less Cost

Health Savings Accounts

- · Employee Money
- · Immediate Vesting
- · Lower Cash Benefit
- · Requires More Restrictive Insurance Designs

Health Account Annual Median Contribution



	-ER Contribution (Single)	-ER Contribution (Family)
HSA	550	1,049
HRA	1,000	2,000

Phila. Metro Experience

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HRA Balance Carryover



of Employers That Allow:

NONE

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Retain & Attract Employees



Like Unvested Retirement Plans – Carryover HRAs

Encourage Retention

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Challenges Remain



- Cost Transparency
- Quality Information

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Cost Comparisons



Cardiac Catheterization

Medicare	\$ 2,103
Typical Carrier Fee	\$ 7,358
R&C Rate (90th percentile)	\$ 16,350
Uninsured	\$ 29,430

Hernia Repair

 Medicare
 \$ 551

 Typical Carrier Fee
 \$ 975

 R&C Rate (90th percentile)
 \$ 3,172

 Uninsured
 \$ 5,710

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Price Variation for Alternative Treatments (Proton Accelerators)



Protons offer advantages in certain rare spine, brain and eye tumors, as well as with kids, whose tissue is highly sensitive to stray radiation. Yet scientists have never proved in controlled clinical trials that protons work better or more safely than conventional therapies on common tumors.

Treating most prostate patients with protons "probably is not worth it," says Massachusetts General Hospital radiation oncologist Anthony Zietman. "There are perfectly good, much less expensive alternatives," such as surgery, X-rays and implanted radioactive seeds.

Medicare Pays:

Proton Accelerator Therapy \$ 34,000 Traditional Therapy \$ 16,000

Comparative Effectiveness Research

Strategy



"Some of our employers did not move to CDHPs primarily to save money in the immediate term, either for themselves or their employees. Rather, they offered CDHPs to change how employees thought about their healthcare and how they would behave when their money was at stake."

. . . Helen Darling, National Business Group on Health

Use Consumer-Driven Plans

to Control Costs, Retain **Employees, and Attract Talent**

Medical Cost (% of Salary) 20.1% or Average cost as % ■ Phila. Metro

What's Next?



- Ask Your Broker/Agent to Look At Consumer **Driven Options**
- Encourage Employees to be Aware, Engaged Consumers in Control of their Health
- · Learn More @ www.navben.us/Discover.php
- · Get Involved in Health Care Reform -Encourage Politicians to Pursue What Works

Impact of MA Senate Election



Time To – Listen To The People!



Curses or Blessings



"May you live in interesting times"

"It was the best of times, it was the worst of times; it was the age of wisdom, it was the age of foolishness; . . . we were all going to heaven, we were all going the other way."

... Charles Dickens, 1859