Morth Garolina
State Health Plan
FOR TEACHERS AND STATE EMPLOYEES


Lowest Cost Plan/Optimized Enrollment Analysis
Board of Trustees Meeting
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A Division of the Department of State Treasurer

## Analysis of Lowest Cost Plan Option

- Conducted by The Segal Company to determine which plan design would have resulted in the lowest cost for each member in Calendar Year 2015 (i.e., optimal enrollment)
- Analyzed CY 2015 incurred claims
- Active Employees, Non-Medicare Retirees, and COBRA Members
- Members continuously enrolled during CY 2015
- Total of 358,500 subscribers in the analysis, including subscribers from all coverage tiers (employee/retiree only, employee/retiree and family, etc.)
- Results determined two ways:

1. With member contributions/premiums
2. Without member contributions/premiums

## Analysis of Lowest Cost Plan Option

## Initial Summary Points

- Absent employee premiums (looking solely at member cost sharing for services received/delivered), the CDHP (58\%) and Enhanced 80/20 (42\%) were the better plan options for members
- No member would have fared better in the Traditional 70/30
- Not surprising given benefit designs and consistent with CY 2014 results
- Consistent with the comparative analysis Segal conducted looking at the relative and actuarial values of the plan offerings
- With premiums factored in (looking at the total cost of coverage for members), the CDHP was the best option for the highest proportion of members (69\%) with the Traditional 70/30 being the second-best choice (20\%)
- Only $11 \%$ of members were better off in the Enhanced 80/20
- Excluding Medicare primary members, more than half of Plan members were in the Enhanced 80/20 Plan in CY 2015


## CY 2015 High Level Results of Analysis

## Actual CY 2015 Continuous 12-Month Subscribers



Active \& Non-Medicare Members


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## CY 2014 High Level Results of Analysis



## CY 2015 Lowest Cost Option by Selected Plan

## Optimal Enrollment Resulting in Lowest Cost to Members including Premiums



Lowest Cost Option for Traditional 70/30 Subscribers

$(\mathrm{n}=147,109)$

## CY 2014 Lowest Cost Option by Selected Plan

## Optimal Enrollment Resulting in Lowest Cost to Members including Premiums



Lowest Cost Option for Traditional 70/30 Subscribers

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(\mathrm{n}=158,617)
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$$
(\mathrm{n}=334,220)
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Lowest Cost Option for Enhanced 80/20 Subscribers

Lowest Cost Option for CDHP


## Comparison: CY 2014 vs. CY 2015 Percentage of Members Selecting Lowest Cost Plan



- Although less than one-quarter of members selected the lowest cost plan option in CY 2015, there was improvement in all plans from CY 2014


## CY 2015 Member Savings in Lowest Cost Option



## Key Takeaways from Analysis

- Members enrolled in the CDHP 85/15 did the best job of anticipating their health care expenses
- Members were least successful at appropriately valuing the Enhanced 80/20 Plan; 18\% of Enhanced 80/20 Plan members were in the lowestcost option
- $71 \%$ of members in the Traditional 70/30 Plan and 65\% of members in the Enhanced 80/20 Plan would have been in the lowest cost plan if they had instead selected the CDHP 85/15
- Of those who would have saved money in the CDHP 85/15, 30\% of members in the 70/30 Plan and $41 \%$ of members in the 80/20 Plan could have saved more than $\$ 1,000$
- If all members had selected the lowest cost plan option (and did not change their utilization patterns), the Plan would have spent nearly \$270 million more in CY 2015


## Key Takeaways from Analysis (con't)

- The CDHP was the lowest-cost option for $88 \%$ of the subscribers who carried dependents on the plan
- Low cost members (under \$1,000 in allowed charges) and high cost members (over \$10,000 in allowed charges) fare the best in the CDHP
- Due to variations in service mix, the advantages of a particular plan option are less clear in the middle ranges of paid claims (more than $\$ 1,000$ but less than $\$ 10,000$ ) but the CDHP sometimes results in higher member cost share in this range
- The pharmacy benefit, which was the same in CY 2015 for the Traditional 70/30 and Enhanced 80/20 plans, is driving a significant portion of the value and results between these two plans
- The two plans have since been further differentiated (effective January 1, 2016)
- In CY 2017, the two plans will have different specialty and nonpreferred drug benefits


[^0]:    Resulting in lowest member cost

