



SOCIETY OF
ACTUARIES®

2019 **ANNUAL
MEETING**
& EXHIBIT

October 27-30
Toronto, Canada

Session 131: Commissioner's Roundtable

[SOA Antitrust Compliance Guidelines](#)

[SOA Presentation Disclaimer](#)

2019 SOA Annual Meeting

Session 131 – Commissioner’s Roundtable

Mr. Dean Cameron

Director – Idaho Department of Insurance

Ms. Michelle Osborne

Chief Deputy Commissioner – North Carolina Department of Insurance

Mr. Jim Ridling

Commissioner – Alabama Department of Insurance

Moderator:

David Dillon, Senior Vice President & Principal – Lewis & Ellis, Inc.



SOCIETY OF ACTUARIES

Antitrust Compliance Guidelines

Active participation in the Society of Actuaries is an important aspect of membership. While the positive contributions of professional societies and associations are well-recognized and encouraged, association activities are vulnerable to close antitrust scrutiny. By their very nature, associations bring together industry competitors and other market participants.

The United States antitrust laws aim to protect consumers by preserving the free economy and prohibiting anti-competitive business practices; they promote competition. There are both state and federal antitrust laws, although state antitrust laws closely follow federal law. The Sherman Act, is the primary U.S. antitrust law pertaining to association activities. The Sherman Act prohibits every contract, combination or conspiracy that places an unreasonable restraint on trade. There are, however, some activities that are illegal under all circumstances, such as price fixing, market allocation and collusive bidding.

There is no safe harbor under the antitrust law for professional association activities. Therefore, association meeting participants should refrain from discussing any activity that could potentially be construed as having an anti-competitive effect. Discussions relating to product or service pricing, market allocations, membership restrictions, product standardization or other conditions on trade could arguably be perceived as a restraint on trade and may expose the SOA and its members to antitrust enforcement procedures.

While participating in all SOA in person meetings, webinars, teleconferences or side discussions, you should avoid discussing competitively sensitive information with competitors and follow these guidelines:

- **Do not** discuss prices for services or products or anything else that might affect prices
- **Do not** discuss what you or other entities plan to do in a particular geographic or product markets or with particular customers.
- **Do not** speak on behalf of the SOA or any of its committees unless specifically authorized to do so.
- **Do** leave a meeting where any anticompetitive pricing or market allocation discussion occurs.
- **Do** alert SOA staff and/or legal counsel to any concerning discussions
- **Do** consult with legal counsel before raising any matter or making a statement that may involve competitively sensitive information.

Adherence to these guidelines involves not only avoidance of antitrust violations, but avoidance of behavior which might be so construed. These guidelines only provide an overview of prohibited activities. SOA legal counsel reviews meeting agenda and materials as deemed appropriate and any discussion that departs from the formal agenda should be scrutinized carefully. Antitrust compliance is everyone's responsibility; however, please seek legal counsel if you have any questions or concerns.

Presentation Disclaimer

Presentations are intended for educational purposes only and do not replace independent professional judgment. Statements of fact and opinions expressed are those of the participants individually and, unless expressly stated to the contrary, are not the opinion or position of the Society of Actuaries, its cosponsors or its committees. The Society of Actuaries does not endorse or approve, and assumes no responsibility for, the content, accuracy or completeness of the information presented. Attendees should note that the sessions are audio-recorded and may be published in various media, including print, audio and video formats without further notice.

Session Format

- 1) Panelists' Commentary
- 2) Moderated Panelist Discussion
- 3) Open Forum Q&A

Likely Session Topics

- 1) ACA Risk Adjustment Program
- 2) ACA Rate Increases
- 3) Association Health Plans/Short Term Plans
- 4) Long Term Care Rate Increases
- 5) Insurer Solvency & Examinations
- 6) Election Impact / Medicare-for-all, others
- 7) NAIC Initiatives
- 8) Alternative Network Models
- 9) Pharmacy Costs
- 10) Anything & Everything





Questions

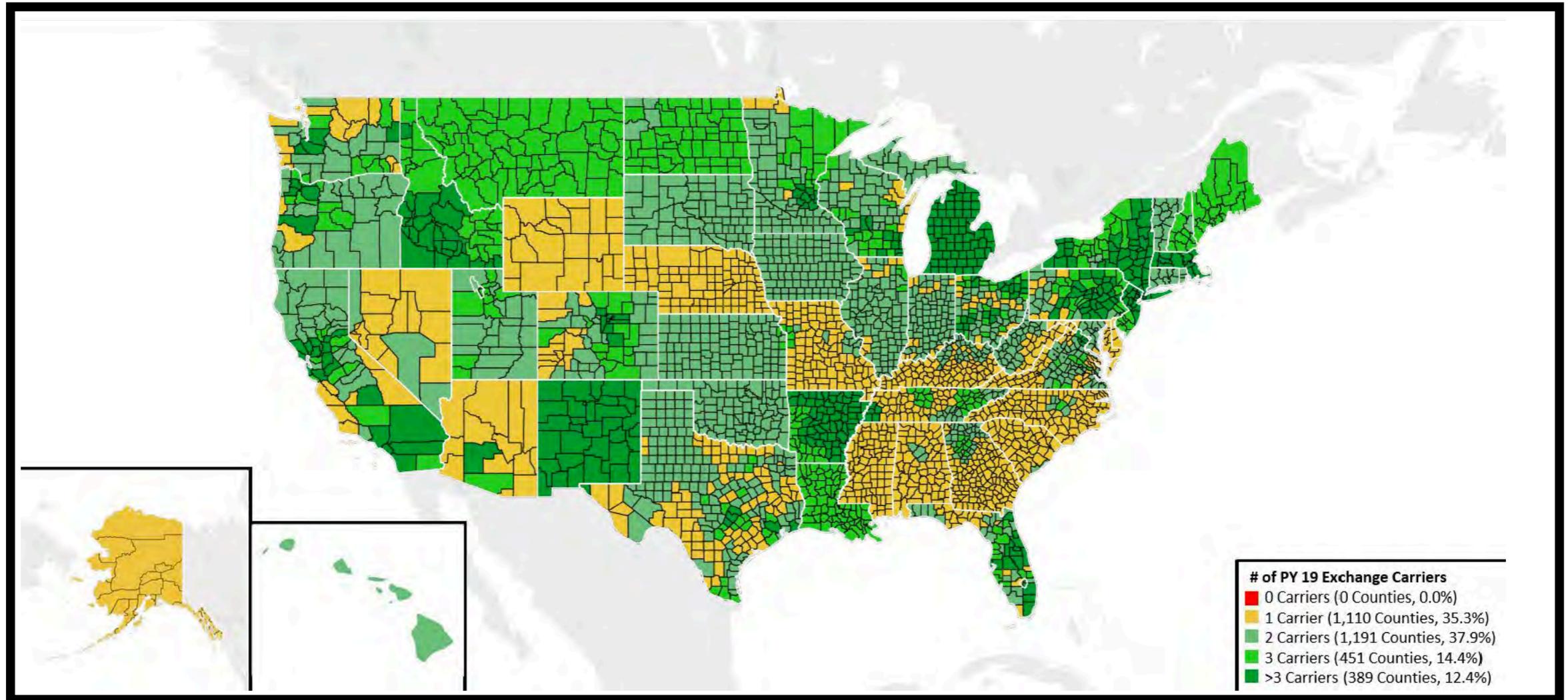


Idaho 2019

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Idaho Department of Insurance
www.DOI.Idaho.gov

County by County Plan Year 2019

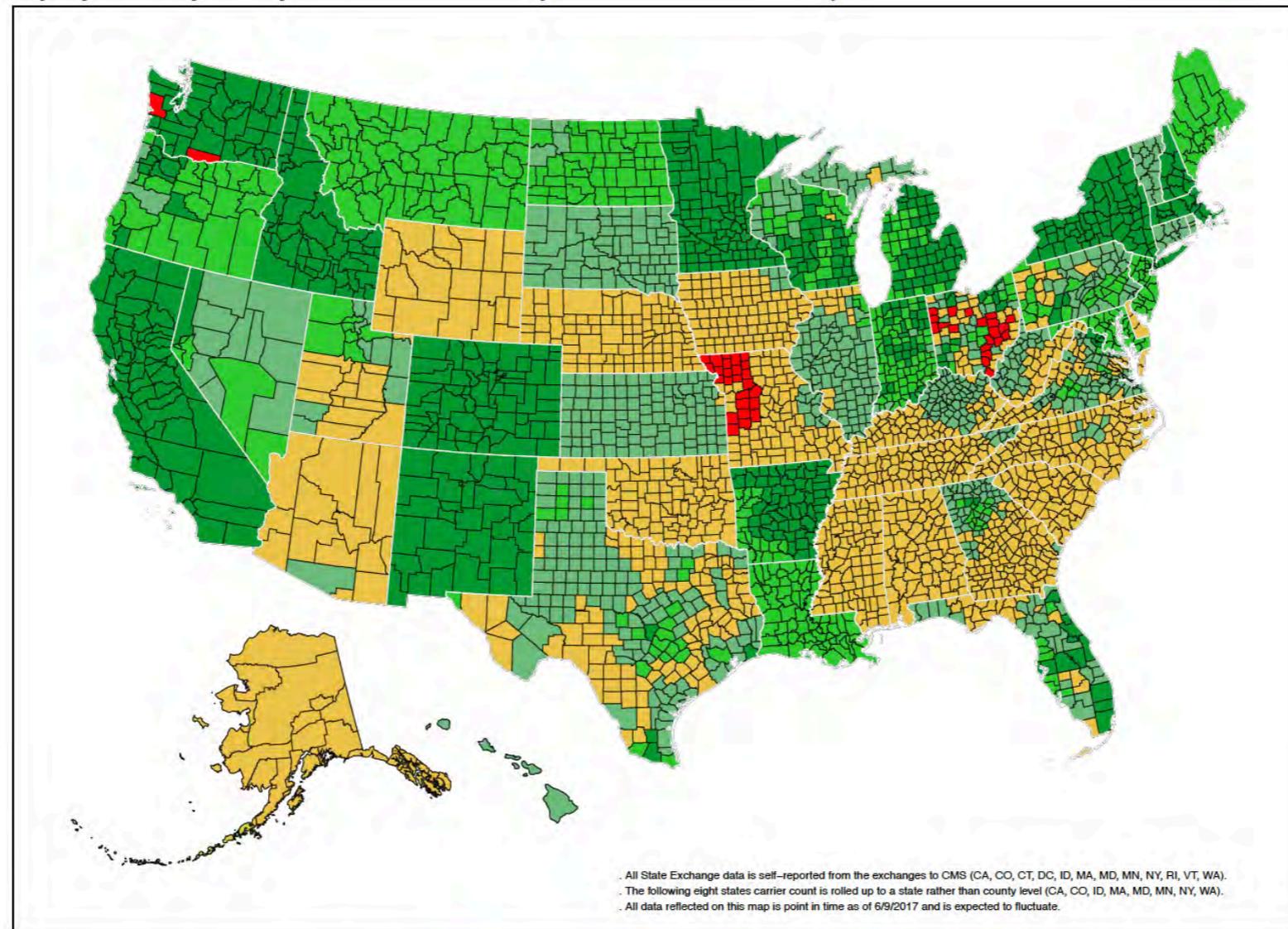
Insurer Participation in Health Insurance Exchanges



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County by County Plan Year 2017 Insurer Participation in Health Insurance Exchanges

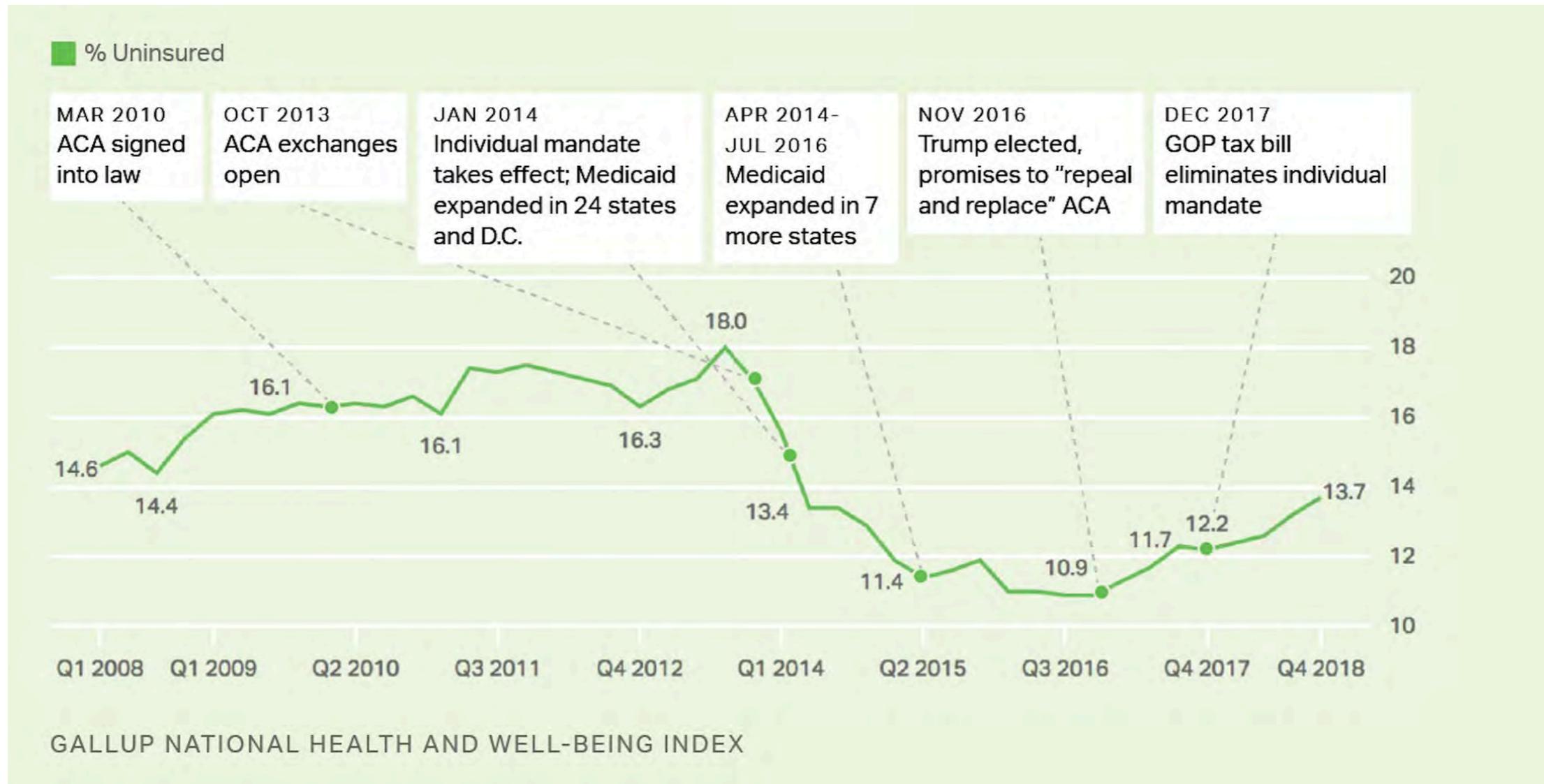


Exchange Carrier Number ■ 0 Carriers (47 Counties) ■ 1 Carrier ■ 2 Carriers ■ 3 Carriers ■ > 3 Carriers

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US Adults without Health Insurance 2008-2018



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How Idahoans are Insured

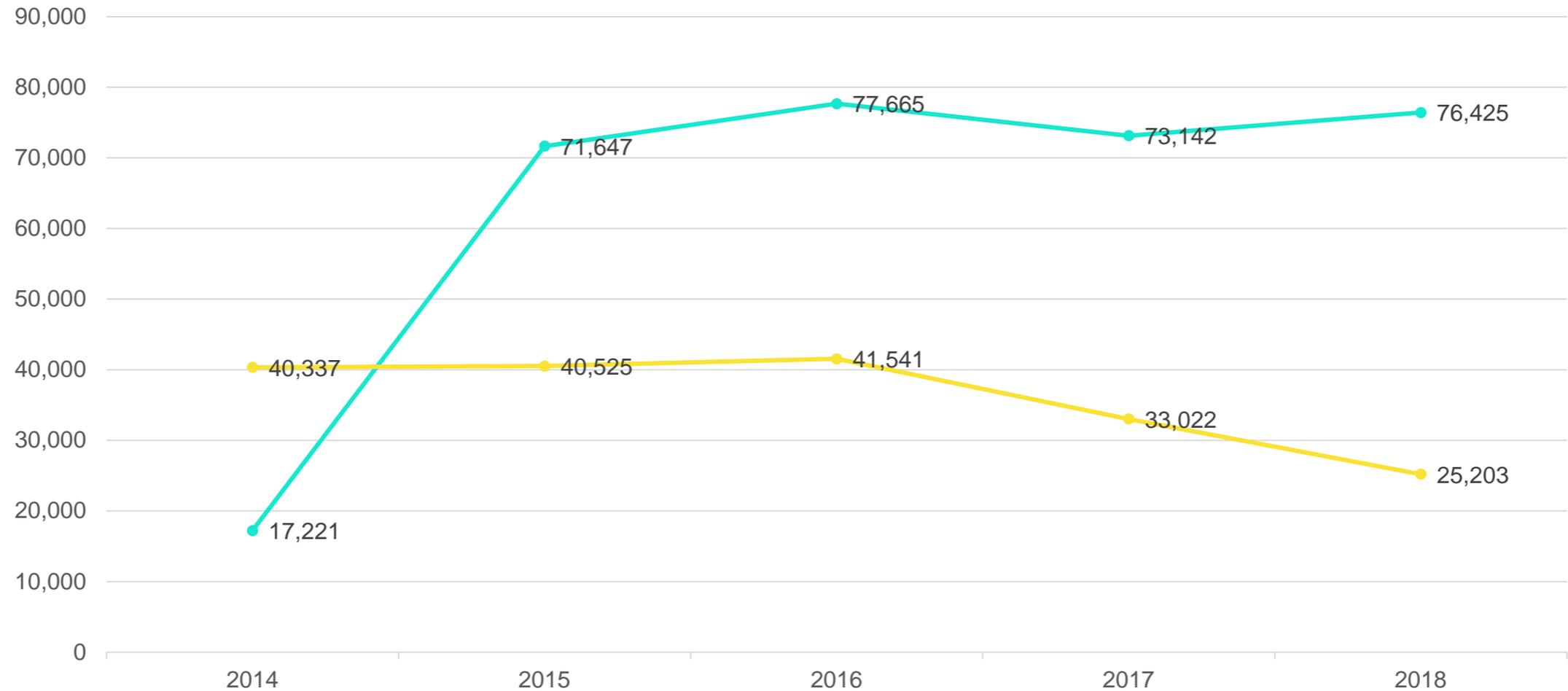
Coverage Type	2014	2015	2016	2017	2018
Individual	119,975	128,224	124,589	110,136	104,977
Small Group	80,270	78,906	75,977	80,382	86,132
Mid-Size Group	35,583	35,237	31,460	34,015	31,773
Large Group	165,179	141,859	130,856	134,386	151,760
Fed. Govt. Plans	41,374	42,024	41,456	42,990	42,562
MEWAs/Trusts	1,804	951	1,063	1,015	1,118
Short Term	4,071	4,305	3,769	2,976	3,860
Medicare Advantage	85,629	81,688	79,687	75,964	102,216
Self-Funded Plans	328,432	407,158	364,906	312,820	329,525
Total from DOI Data	862,317	920,352	853,763	794,684	853,923

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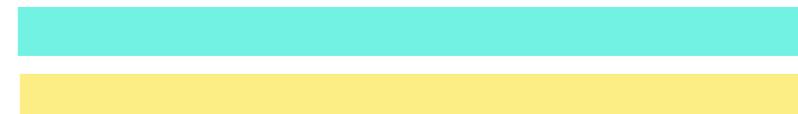


Subsidized & Unsubsidized

Individual Health Insurance Market APTC Average Monthly Enrollment



Subsidized
Unsubsidized



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Individual Market at a Glance

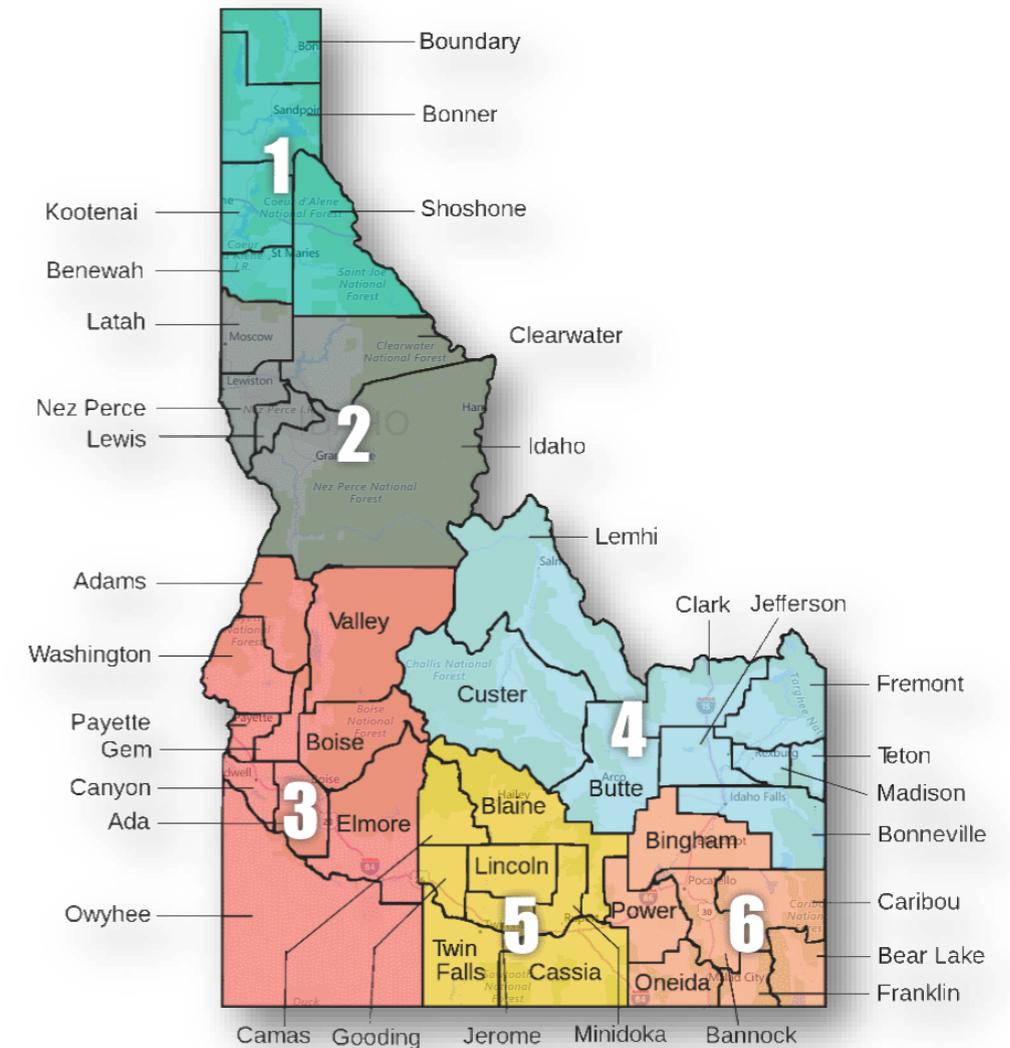
Year	Covered Lives	Claims Paid	Average Monthly Premium Per Insured
2009	91,119	\$140,873,957	\$159.59
2010	102,978	\$164,404,145	\$154.46
2011	98,190	\$191,765,397	\$174.17
2012	94,493	\$173,809,774	\$190.94
2013	85,060	\$167,271,538	\$215.77
2014	119,293	\$306,941,188	\$229.60
2015	128,185	\$535,270,995	\$282.07
2016	124,571	\$601,728,947	\$363.04
2017	110,136	\$517,851,023	\$438.98
2018	104,977	\$523,175,576	\$520.85

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Individual Medical Plans by Carrier and Area

	1	2	3	4	5	6
Blue Cross of Idaho	23	23	31	30	23	23
Mountain Health CO-OP	7	7	7	7	7	7
PacificSource Health Plan	2	2	9	11	9	2
SelectHealth	12	0	12	12	12	12
Grand Total	44	32	59	60	51	44

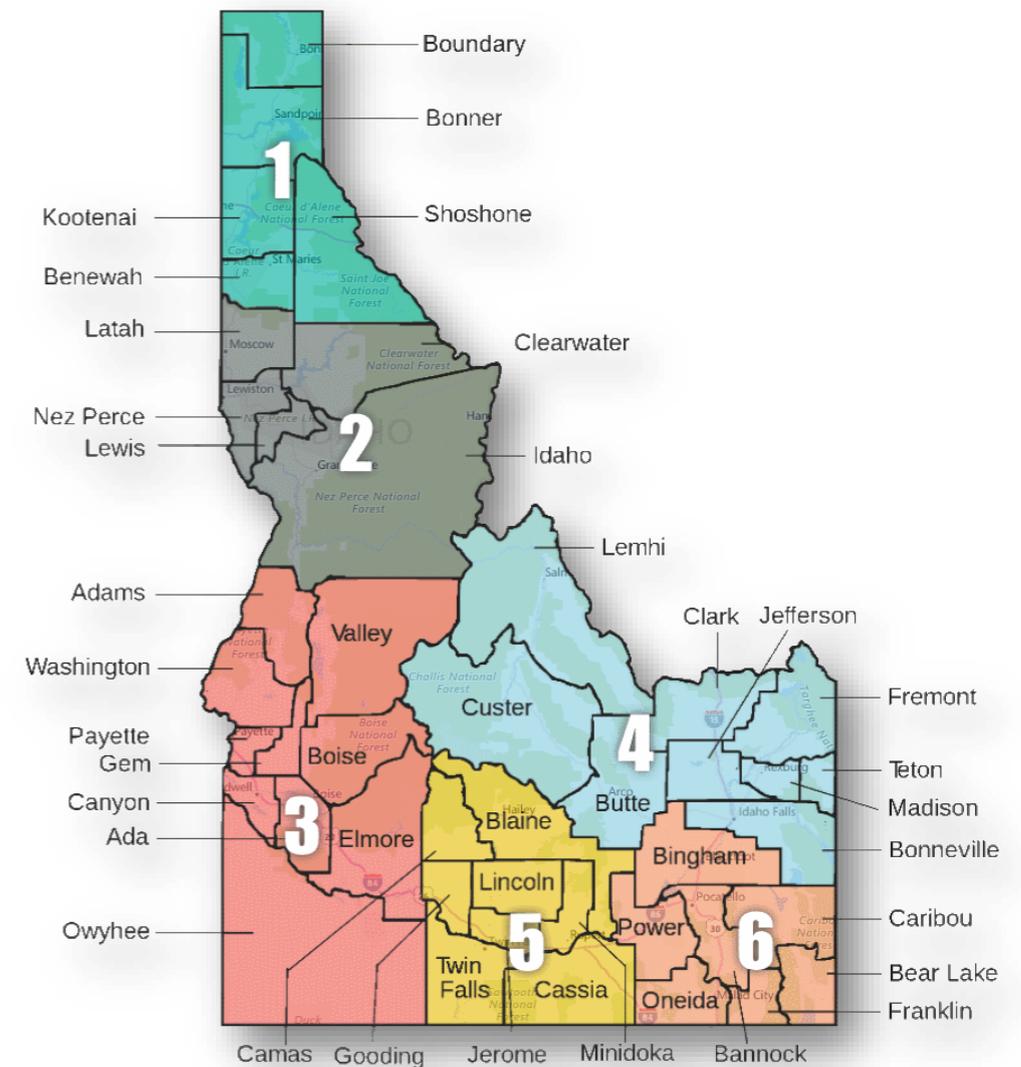


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Individual Medical Plans by Metal and Area

	1	2	3	4	5	6
Catastrophic	5	4	7	7	6	5
Bronze	18	12	24	24	21	18
Silver	16	12	21	22	18	16
Gold	5	4	7	7	6	5
Platinum	0	0	0	0	0	0
Grand Total	44	32	59	60	51	44

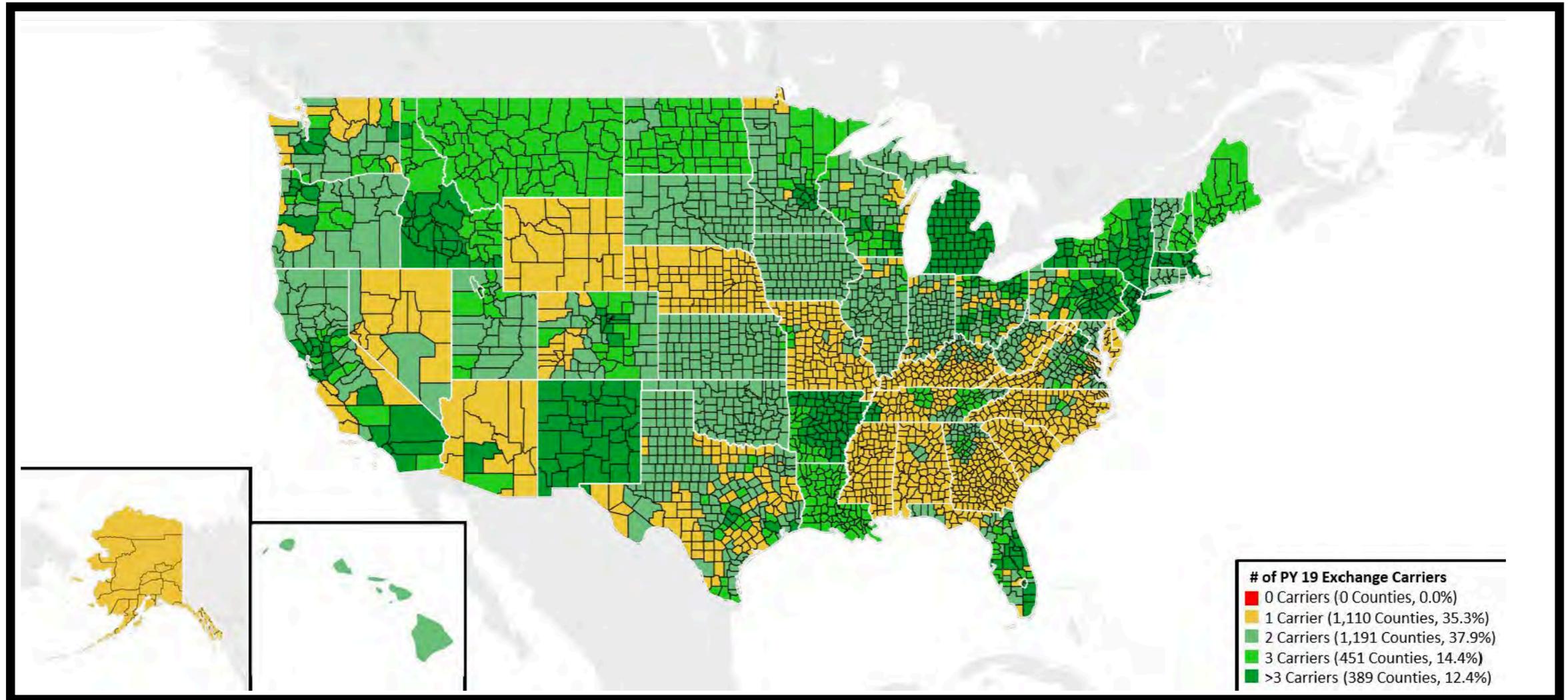


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County by County Plan Year 2019

Insurer Participation in Health Insurance Exchanges



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Executive Order



The plan to get the “young and healthy” to buy insurance in Idaho

Photo courtesy of the IdahoStatesman.com

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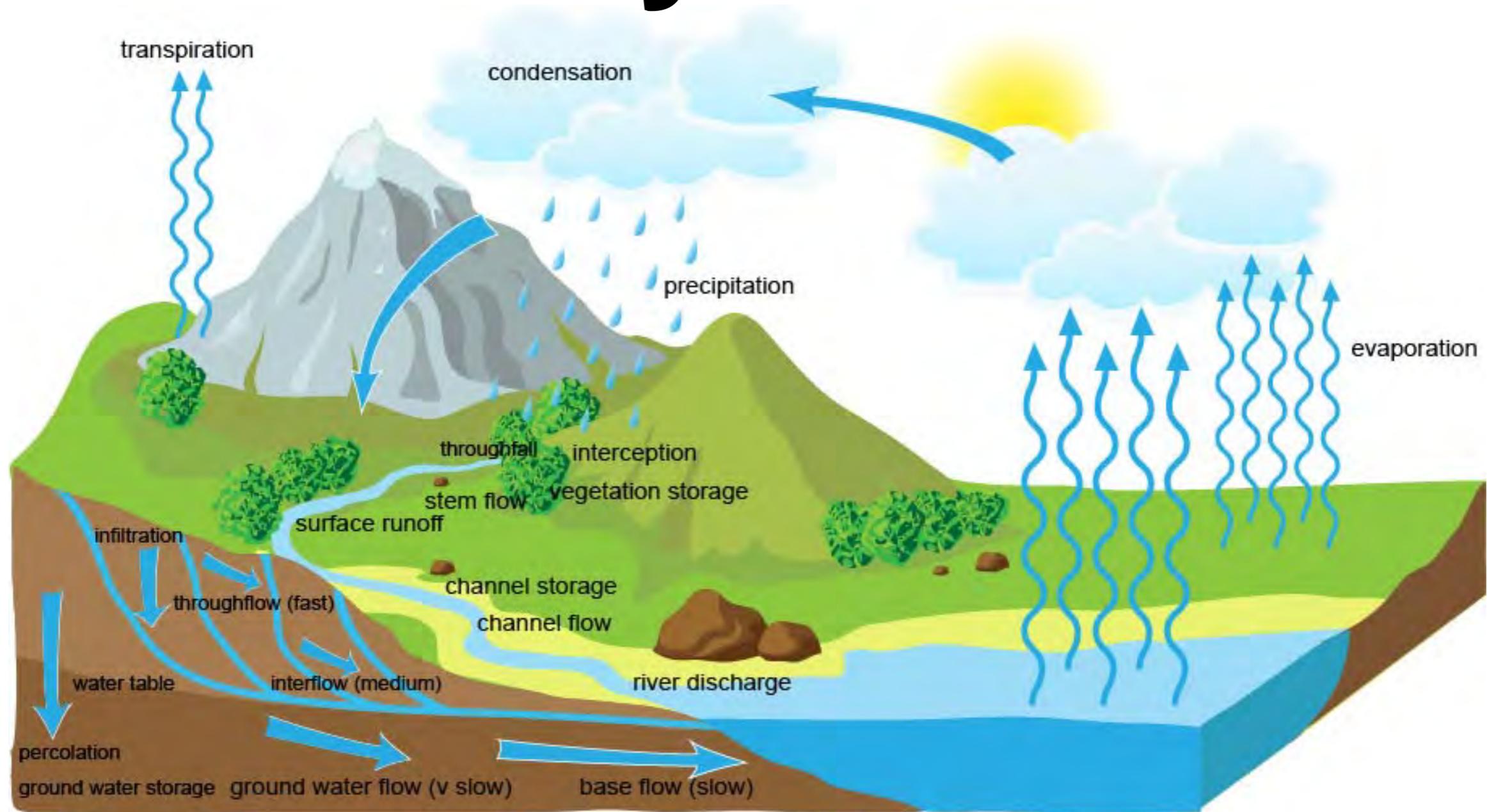


**“Substantially
enforced”**

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A Healthy Risk Pool



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State-based Health Plans

- Idaho's State-based plans, non-ACA compliant plans, are less expensive plans.
- They provide options to incentivize the young and healthy to return to the insurance market.
- They provide flexibility in our healthcare policies.
- Idaho State-based plans stabilize our markets.

State-based Health Plans



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Short-term

Health Plans

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Traditional

Short-term Plans

- Not guaranteed issue
- Non-renewable - cannot be reissued within 63 days of effective date.
- Total duration may not exceed 12 months
- No requirement for carrier to offer Exchange Plans
- Offered year round
- More limited benefits and consumer protection requirements

Enhanced vs Traditional Short-term Coverage

Enhanced

- Guaranteed Issue
- Guaranteed renewable & converting to ACA plans
- Total duration (with renewals) may not exceed 36 months
- Carrier must also offer Exchange Plans
- May be offered year round or through an Open Enrollment Period
- Protection against preexisting condition exclusion periods under certain circumstances
- More robust benefits and consumer protection requirements

Traditional

- Not guaranteed issue
- Non-renewable; cannot be reissued within 63 days of effective date
- Total duration may not exceed 12 months
- No requirement for carrier to offer Exchange Plans
- Offered year round
- More limited benefits and consumer protection requirements

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Faith-based Plans (Health Care Sharing Ministries)



“A health care sharing ministry shall not be considered to be engaging in the business of insurance for purposes of this title.”

Faith-based Plans (Health Care Sharing Ministries)

In **2017**, Idaho members
totaled 15,874.

In **2018**, Idaho members increased
to 24,282.

Faith-based Plans



'Sham' Sharing Ministries Test Faith Of Patients And Insurance Regulators

By JoNel Aleccia
MAY 17, 2019

[REPUBLISH THIS STORY](#)



Sheri Lewis of Seattle, who was enrolled in a health care sharing ministry, found out that the hip transplant she desperately needed was not covered. She got the procedure in Tijuana, Mexico, with the help of a GoFundMe account (Dan DeLong for KHN)

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