## Oregon Healthcare News

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### **Oregon Health Plans Report Higher** Profits in 2011 When Compared to 2010

**By David Peel** Publisher and Editor Oregon Healthcare News



Fourteen of the largest health insurance companies recently reported 2011 annual financial results and all but three were profitable. In fact, ten plans either reported a higher profit or a lower loss than the same period in 2010. The results are somewhat surprising given the uncertainties associated with the early years of healthcare reform.

Our report, shown on page four, shows total revenues, net underwriting gain (loss), investment gain (loss), other income and net income

(loss) for thirteen domestic health plans and one national health insurance company operating in Oregon for the periods ending December 31, 2011 and December 31, 2010. We also present member months, the combined total of month ending membership for each twelve month period. When the financial figures are divided by member months, a monthly average over the period is obtained that is valuable in comparing one plan to another. Financial statement users can then make apples to apples comparisons of health plans.

All information in this report was obtained through publicly available reports filed with the National Association of Insurance Commissioners (NAIC). Information not required to be filed with the NAIC (self-insured and some Oregon insured business from smaller, nondomestic carriers) is not included in this report nor is it referenced in this article.

### Comments from Industry Representatives

We asked representatives of the plans to confirm figures in the report and to provide insight into their financial results. Some plans chose not to reply to our request. However, others provided valuable comments and these follow, sorted by plan size in descending order.

Kaiser Foundation Health Plan of the Northwest

Kaiser reported healthy increases in member months and total revenues. However, investment gains and net income were significantly lower in 2011 when compared to 2010.

Chief Financial Officer Karen Schartman noted, "Our story is very simple - we are improving affordability as our revenues per member decline, and we are responding with efficiencies while delivering market leading quality. Our quality scores are the highest of all Oregon commercial and Medicare health plans, according to the National Center for Quality Assurance. Our Medicare plan ranks fourth among national plans on NCQA scores, and Kaiser Permanente earned a 5 Star designation from CMS, the only Medicare plan in Oregon to earn this ranking."

Like many companies, our net earn-

ings were negatively impacted be declining investment returns - this explains our year over year drop in net earnings."

Regence BlueCross BlueShield of Oregon

Regence had a difficult 2011 with decreases from 2010 in every category of our report. Spokesperson Scott Burton told us, "The enrollment change is specific to how we previously reported members covered by vision plans to the NAIC. Prior reporting numbers did not include those members covered by a vision plan, but the 2011 report does include vision plan members as requested by the NAIC. Overall, we saw a slight decline in enrollment primarily in the individual and small group markets. Our financial decrease was the result of decreasing premium revenue coupled with rising claims costs in early 2011."

### Providence Health Plans

Providence Health Plans reported significant increases in every category of our report except other income, where there was a \$137 thousand decrease from 2010.

Michael White, Chief Operating Officer for Providence Health Plans explained, "2011 was a very successful year for Providence Health Plans. We have been recognized as one of the 'Most Admired' companies in Oregon. We earned a 4.5 star rating (out of a possible 5) for our Medicare products – putting us among the leaders in the nation. We also are nationally recognized for our case and disease management programs, which help keep our

members healthier. These achievements helped us remain financially solid during an uncertain environment for health care organizations."

White continued, "Our membership increased by 3 percent from 2010 to 2011. That growth came in all three major lines of business: commercial, Medicare, and Oregon Health Plan (Medicaid). The increase in premium revenue on a PMPM basis is primarily due to a change in the mix of membership. We have been able to minimize price increases in our key commercial markets. Providence Health Plans has developed a very competitive medical claims expense trend percentage rate which is the centerpiece for premium pricing."

White concluded, "We experienced better-than-expected financial performance due to our membership gains and better than expected claim expenses, especially in our Medicare line of business. We also have a consistent track record of keeping our administrative costs low. One major reason for the NOI increase between 2010 and 2011 was claims expenses. Investment gains were similar between the two years."

PacificSource Health Plans and PacificSource Community Health Plans

Peter Davidson, Executive Vice President and Chief Financial Officer of PacificSource Health Plans and PacificSource Community Health Plans (formerly Clear Choice Health Plans) said, "There are a number of reasons for the increase in commercial business in Pacific-Source. These include: the transfer of commercial business from PacificSource Community Health Plans (PCHP) to PacificSource Health Plans and the growth in our Idaho business."

Davidson said the following about PacificSource Community Health Plans, "In 2011, we transferred the commercial business in PCHP to PacificSource in order for PCHP to focus on government lines of business. The reason for the decrease in membership is related to the transfer of the commercial business. This focus has led to Medicare membership growth in 2011 and 2012 of 12% and 50%, respectively."

### Health Net Health Plan of Oregon

Health Net Health Plan of Oregon reported lower member months and total revenues but higher net underwriting gains and net income. Amy L. Shever, Director of Corporate Communications for Health Net Health Plan of Oregon explained, "It is a combination of a decrease in the overall Oregon commercial market and a highly competitive environment. This has resulted in lower overall commercial membership at Health Net of Oregon in 2011. At the same time we've seen lower utilization of health care benefits than expected in 2011."

### ODS Health Plan

Dave Evans, Chief Financial Officer of ODS Health Plan, explained his company's improvement in net underwriting gain and net income, "On a year over year basis, the improvement in underwriting is the result of our ongoing focus on medical management and evidence-based healthcare. In addition, we continue to see an overall moderation in healthcare utilization."

### LifeWise Health Plan of Oregon

Despite a significant decline in total revenues, LifeWise Health Plan of Oregon went from a \$4.2 loss in 2010 to a \$4.3 million profit in 2011, a turnaround of \$8.4 million. Deana Strunk, Communications Manager of LifeWise Health Plan of Oregon said, "Despite anticipated membership levels, net income increased due to lower than expected claims costs and reductions in our per member administrative expense."

### Samaritan Health Plans

The loss at Samaritan Health Plans

went from \$767 thousand in 2010 to \$414 thousand in 2011, a \$353 thousand turnaround. Kelly C. Kaiser, MPH, Chief Executive Officer of Samaritan Health Plans, summarized the favorable change by noting, "Our utilization in 2011 was a bit better which made our loss less."

### Concluding Comments

Several of the plans noted lower than expected claims costs and their impact on financial results. In several cases, improved utilization management processes were certainly a contributing factor. However, since most plans reported much higher net income in 2011 than 2010, it's reasonable to conclude that 2011 premium increases were higher than needed to cover expected costs and a reasonable profit. It's likely that plan actuaries were cautious when calculating 2011 premium rates given the uncertainties associated with healthcare reform. Since there is no experience to base the costs of healthcare reform, plan actuaries end up making conservative estimates. Look for plan actuaries to continue this practice until it's absolutely clear the costs of healthcare reform are known and that will require years of predictable claims history.

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# Oregon Health Plan Financial Results1

# For the Twelve Months Ended 12/31/11 compared to the Twelve Months Ended 12/31/10

Full Service Medical Plans Only - Sorted by Total Revenues - 000's Omitted<sup>2</sup>

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	Mer	Member Months <sup>3</sup>	onths³	P	Total Revenues	S	Net	Net Underwriting Gain (Loss) <sup>4</sup>	ing	Investm	Investment Gain (Loss)	(Loss)	Oth	Other Income <sup>5</sup>	9	Net	Net Income (Loss)	(sso
Health Plan Name	12/11	12/10	12/10 Change	12/11	12/10	Change	12/11	12/10	Change	12/11	12/10	Change	12/11	12/10	Change	12/11	12/10	Change
Dollars																		
Kaiser Found HP of the NW <sup>9</sup>	5,681	5,516	165	2,698,751	2,528,787	169,964	11,313	16,224	-4,911	18,575	25,786	-7,211	3117	-2523	5,640	33,004	39,487	-6,483
Regence BCBS of OR®	5,695	6,687	-992	1,865,875	1,892,922	-27,047	-17,312	36,115	-53,427	36,310	56,378	-20,068	-5375	4,438	-937	6,932	75,159	-68,227
Providence Health Plans <sup>9</sup>	2,264	2,198	99	1,035,640	980,489	55,151	42,217	29,084	13,133	26,592	25,289	1,303	148	285	-137	68,956	54,659	14,297
PacificSource Health Plans <sup>9</sup>	2,326	2,199	127	644,237	582,966	61,271	9,308	4,888	4,420	5,431	5,966	-535	-1,129	-2334	1,205	10,920	8,135	2,785
UnitedHealthcare Ins. Co. <sup>6</sup>	1,715	1,421	294	365,775	327,603	38,172	17,777	16,907	870	3,549	1,797	1,752	0	0	0	20,402	17,747	2,655
Health Net HP of OR <sup>®</sup>	1025	1113	88	354,471	363,731	-9,260	27,376	21,764	5,612	4,282	3,213	1,069	φ	4	7	21,486	16,607	4,879
ODS Health Plan <sup>9</sup>	745	760	-15	217,441	216,413	1,028	2,130	99	2,065	5,880	4,819	1,061	-86	-75	1	5,862	3,580	2,282
UnitedHealthcare of OR	227	247	-20	207,054	221,860	-14,806	23,288	19,642	3,646	1011	1042	-31	-10	9-	4	15,870	13,776	2,094
LifeWise HP of OR <sup>9</sup>	694	718	-24	171,244	190,280	-19,036	1920	-11,290	13,210	4,338	5,073	-735	37	-175	212	4,262	-4,185	8,447
PacificSource Comm HP8.9	153	220	-67	121,838	134,272	-12,434	-2,665	-3,719	1,054	519	1,678	-1,159	0	0	0	-1,453	-1,285	-168
Health Plan of CareOregon	87	9/	1	95,219	78,655	16,564	8,365	1,377	6,988	1,254	1,515	-261	0	0	0	6,412	2,267	4,145
Samaritan Health Plans <sup>9</sup>	65	65	0	57,077	56,305	772	-875	-1303	428	182	125	22	0	0	0	-414	-767	353
Trillium Community HP	40	38	2	43,401	42,495	906	494	160	-654	28	06	-62	7	ငှ	4	-227	-122	-105
FamilyCare Health Plans	36	34	2	31,786	30,940	846	132	-3015	3,147	140	-22	162	-87	0	-87	185	-3,036	3,221
Per Member Per Month <sup>7</sup>																		
Kaiser Found HP of the NW <sup>9</sup>	5,681	5,516	165	475	458	17	2	က	7	က	ည	7	_	0	_	9	7	7
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Providence Health Plans <sup>9</sup>	2,264	2,198	99	457	446	1	19	13	2	12	12	0	0	0	0	30	25	9
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UnitedHealthcare Ins. Co.6	1,715	1,421	294	213	231	-17	10	12	-2	7	~	_	0	0	0	12	12	<u>\</u>
Health Net HP of OR®	1,025	1,113	-88	346	327	19	27	20	7	4	က	_	0	0	0	21	15	9
ODS Health Plan <sup>9</sup>	745	760	-15	292	285	7	3	0	က	00	9	2	0	0	0	80	2	က
UnitedHealthcare of OR	227	247	-20	912	868	14	103	80	23	4	4	0	0	0	0	70	99	14
LifeWise HP of OR <sup>9</sup>	694	718	-24	247	265	-18	8	-16	18	9	7	7	0	0	0	9	9	12
PacificSource Comm HP8.9	153	220	-67	962	610	186	-17	-17	7	က	∞	4-	0	0	0	ဝှ	9-	4-
Health Plan of CareOregon	87	9/	11	1,094	1,035	09	96	18	78	4	20	9	0	0	0	74	30	44
Samaritan Health Plans <sup>9</sup>	65	65	0	878	866	12	-13	-20	7	က	2	~	0	0	0	φ	-12	2
Trillium Community HP	40	38	2	1,085	1,118	-33	-12	4	-17	_	2	-5	0	0	0	φ	ဇှ	-2
FamilyCare Health Plans	36	34	2	883	910	-27	4	-89	92	4	<u>\</u>	2	-5	0	-5	5	-89	94

### Notes:

- All information from the National Association of Insurance Commissioners web site.
- 000's omitted means the last three digits of each figure is removed. For example, the number 1,000 becomes 1.

  Member Months is the combined total of each month's ending membership. For example, to get Member Months through 12/11, monthly membership for January through December is added together to get a combined total.

  Net Underwriting Gain (Loss) is Net Income prior to Income taxes, Investment Gains and Losses and Miscellaneous revenues and expenses. It is a thought to be an accurate measure of the adequacy of premium revenue and can be a good predictor of future premium increases or decreases.

  A negative Other Income number means it was an expense. t. 9. 6. 4.
- Figures from the Supplemental Health Care Exhibit Part 1 of the carrier's annual statement.

  Per Member Per Month is any of the financial figures divided by Member Months for the particular plan.

  Formerly Clear One Health Plans. This company was acquired in May 2010 by PacificSource Health Plans.

  Figures confirmed by healthplan management.