



EMPLOYERS SEEK GUIDANCE TO STRATEGICALLY MANAGE HEALTH INSURANCE COSTS

Data in the 2014 UBA Health Plan Survey are based on responses from 9,950 employers sponsoring 16,467 health plans nationwide.

This unparalleled number of reported plans in the 2014 UBA Health Plan Survey is nearly **3x LARGER** than the next two of the nation's largest health plan benchmarking surveys combined.



The size of the 2014 UBA Health Plan Survey provides employers with the data they need to benchmark their plans more accurately based on plan type, region, employee size, and industry category.



Data from the UBA Health Plan Survey provides employers of all sizes more detailed—and therefore more meaningful—benchmarks and trends than any other source. The following are selected highlights and key findings from the 2014 survey responses:



Eligibility for Coverage

A significant number of plans have yet to be amended to cover all employees working 30 hours per week or more. Therefore, employers offering these plans have yet to face the full costs of coming into compliance with PPACA.

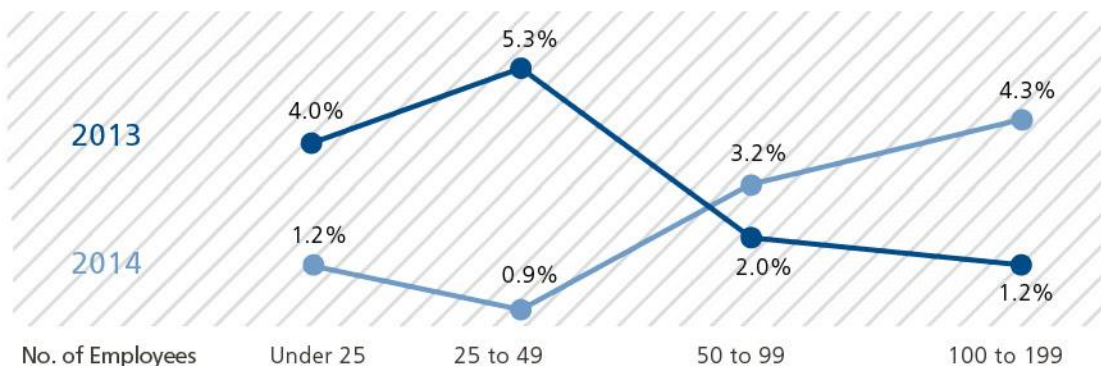
The Rise of HSAs and HRAs

33.6% of all plans offered an HSA or HRA. The number of individuals enrolled in HSAs increased 38.6%, likely due to the increase in CDHP enrollment.



Small Employer Groups Cost per Employee Flip-Flops

Historically, employers with 1 to 49 employees felt the brunt of increases, which ranged from 4% to 5% or more. However, in this year's survey results, these groups saw more modest increases of approximately 1%. Conversely, employers with 50 to 199 employees have historically had more modest increases of 1% to 2%, while this year they saw increases of approximately 3% to 4%. The ability for small groups to "renew as is" (by grandmothing or by delaying renewals) is having a huge impact on keeping their rates level, at least at this point.

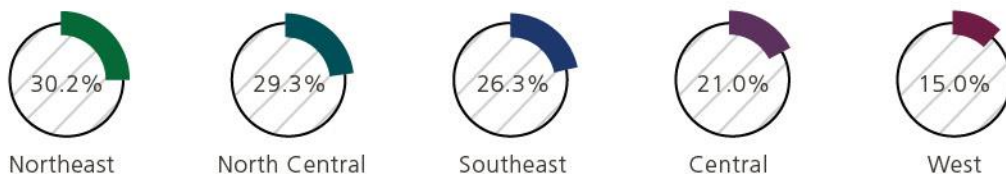


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CDHPs Continue to Grow

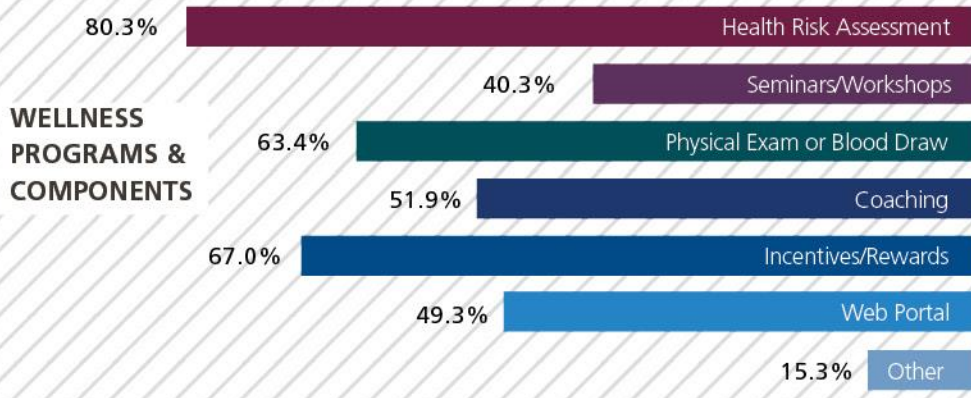
CDHPs continue to grow—up 8% from 2012 through 2014. Regionally, consumer-driven health plans account for the following percentage of plans offered:



The number of employers offering CDHPs didn't always correlate to the number of employees who chose to enroll in them. These plans are seeing enrollment increases of more than 30% in the last two years (15.6% to 20.6%), despite decreases in employer contributions to HSAs; which has historically been a common way to entice more participation.

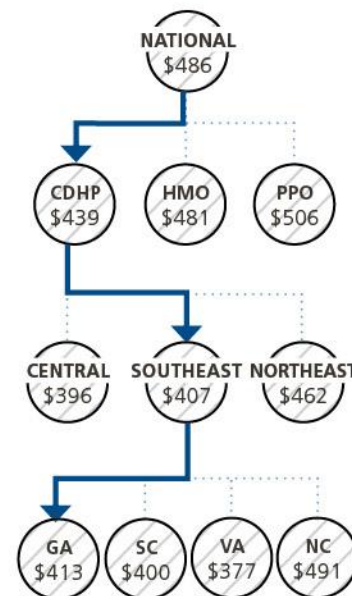
Wellness Programs See Modest Decreases

Wellness programs are down, on average, by 1.3% in almost all categories from last year. The decrease in the adoption of wellness programs may be a result of the regulatory environment, the employee population rating factor change, and employer focus on health care reform. Of those employers offering wellness programs, the overwhelming majority of plans offer health risk assessments. Programs with health coaching decreased more than 7%, while programs with health incentives and rewards increased 7%.



Why Employers Should Demand Tailored Health Plan Benchmarking

Consider a design firm in Georgia that offers a CDHP. Their premium cost for single coverage is \$409 per month, or \$77 per month less than the national average. When compared with other CDHPs in the Southeast region, their cost is actually \$2 per month more expensive and appears to be higher or lower compared with national and regional benchmarks. Yet, this employer's cost is actually lower than its closest peers' costs when using the state-specific benchmark, which in Georgia is \$413. This means that this employer's monthly single premium is actually \$4 less than its state competitors.



Contact us today for a copy of the 2014 Health Plan Survey Executive Summary or to request a custom benchmarking study of your health plan.