



# **Threats to Our Industry – The Economy “Where Do We Go from Here”**

**Jeff Alter  
CEO UnitedHealthcare  
Northeast Region**

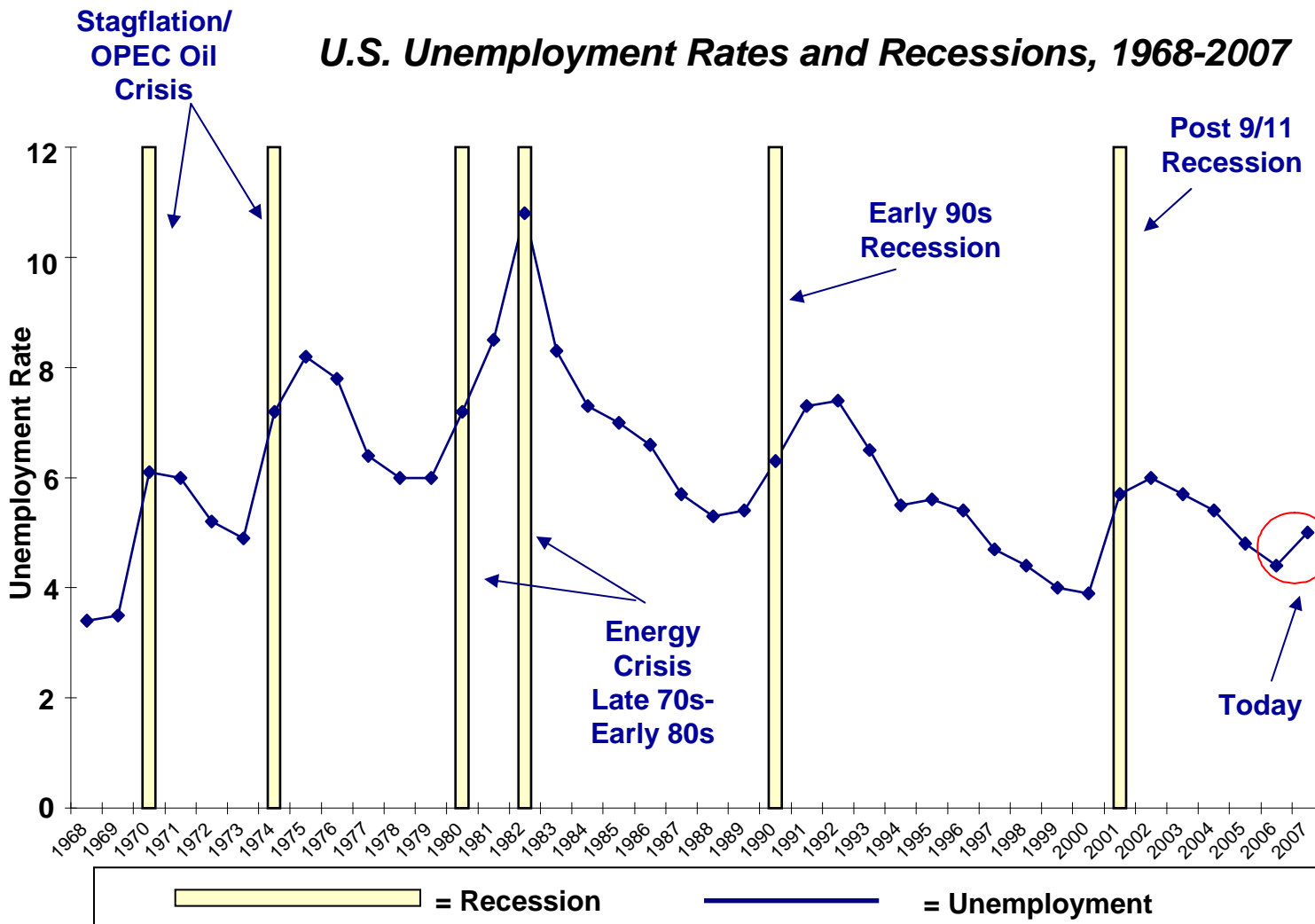
**October 20, 2008**

**This presentation reviews the economic landscape and past, current and potential future impact for the health insurance industry.**

- Economic Landscape
- Historical Guidance: A Look at Past Economic Downturns and their Effect on the Insurance Industry
- Implications for the Insurance Industry
- Conclusions

There is widespread belief that we are currently in a recession; unemployment will likely continue to rise for at least several more years.

## U.S. Unemployment Rates and Recessions, 1968-2007

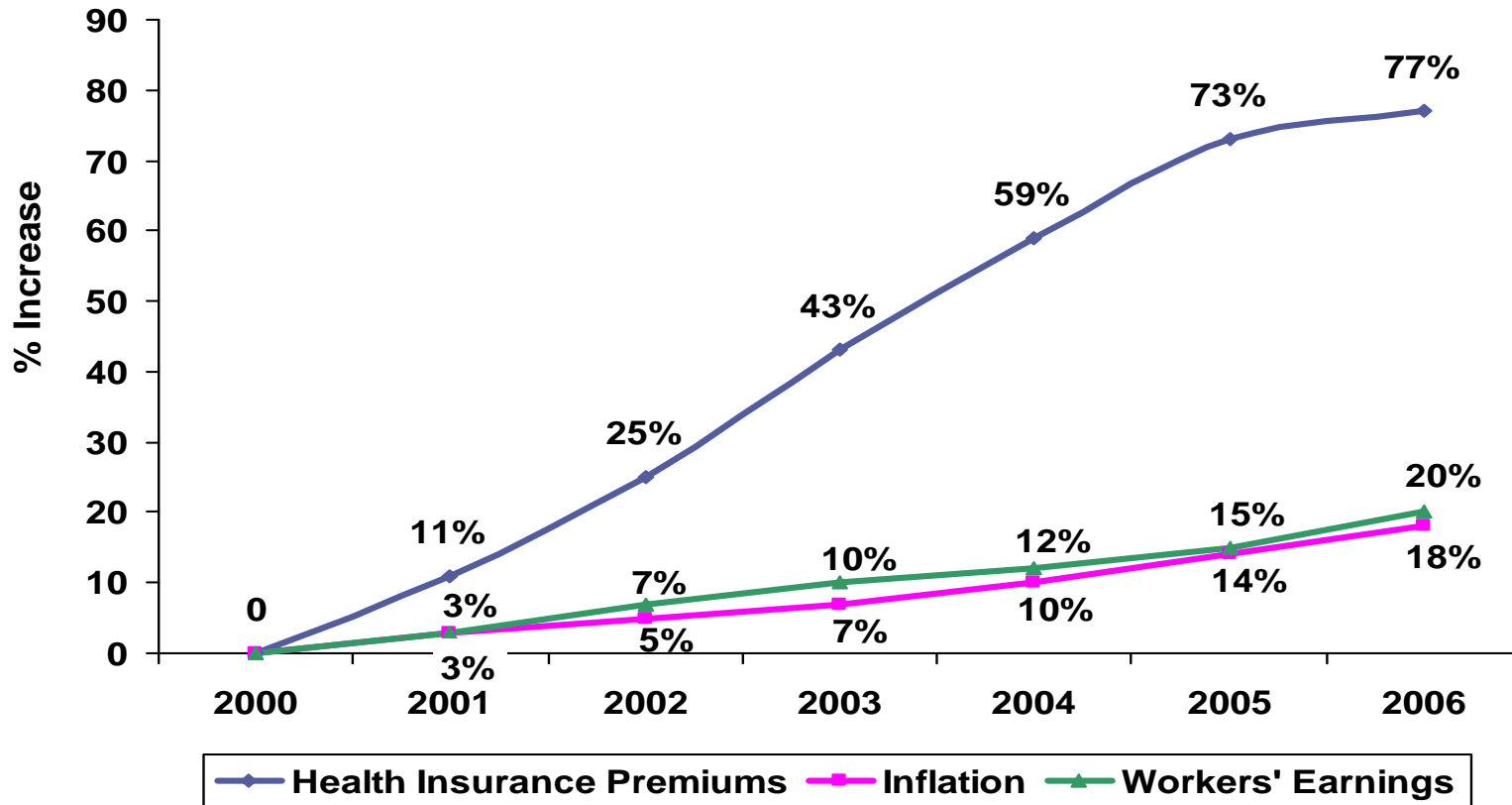


- Every recession during the past 40 years has been preceded by an increase in unemployment
- On average, unemployment rates remain high for two years following a recession

Source: Bureau of Labor Statistics and National Bureau of Economic Research; December Seasonally Adjusted Unemployment Rates

Healthcare costs have been on a steeper rise than inflation or income; this trend is expected to continue.

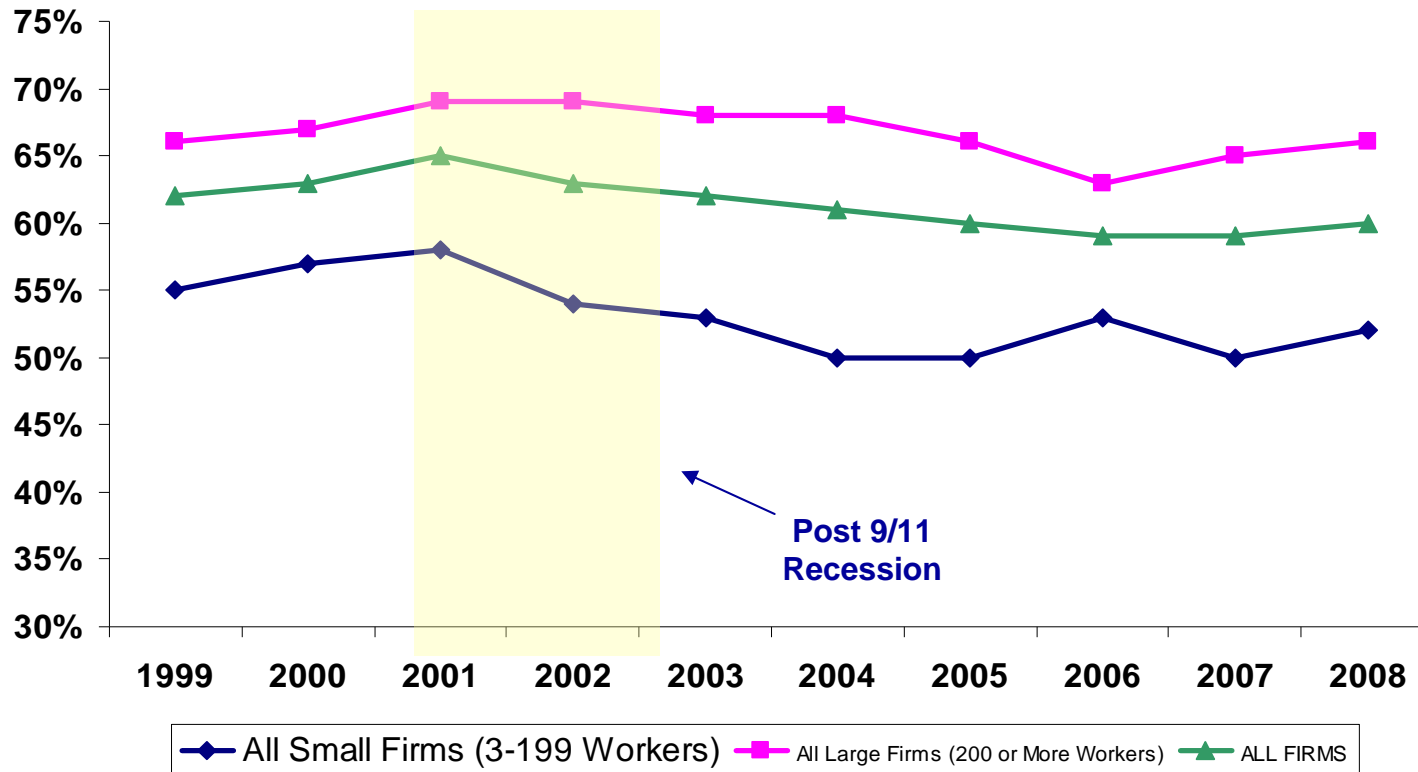
### Cumulative Changes in Health Insurance Premium, Inflation & Workers' Earnings



Source: KFF/HRET Survey of Employer Sponsored Health Benefits 2001 – 2006; Bureau of Labor Statistics  
Note: Data on premium increases reflect the cost of health insurance premiums for a family of four

The percentage of small group employers offering coverage have never returned to the pre-9/11 levels, despite prosperity since that time.

**Percentage of All Workers Covered by Employer-Sponsored Plans by Firm Size: 1999-2008**

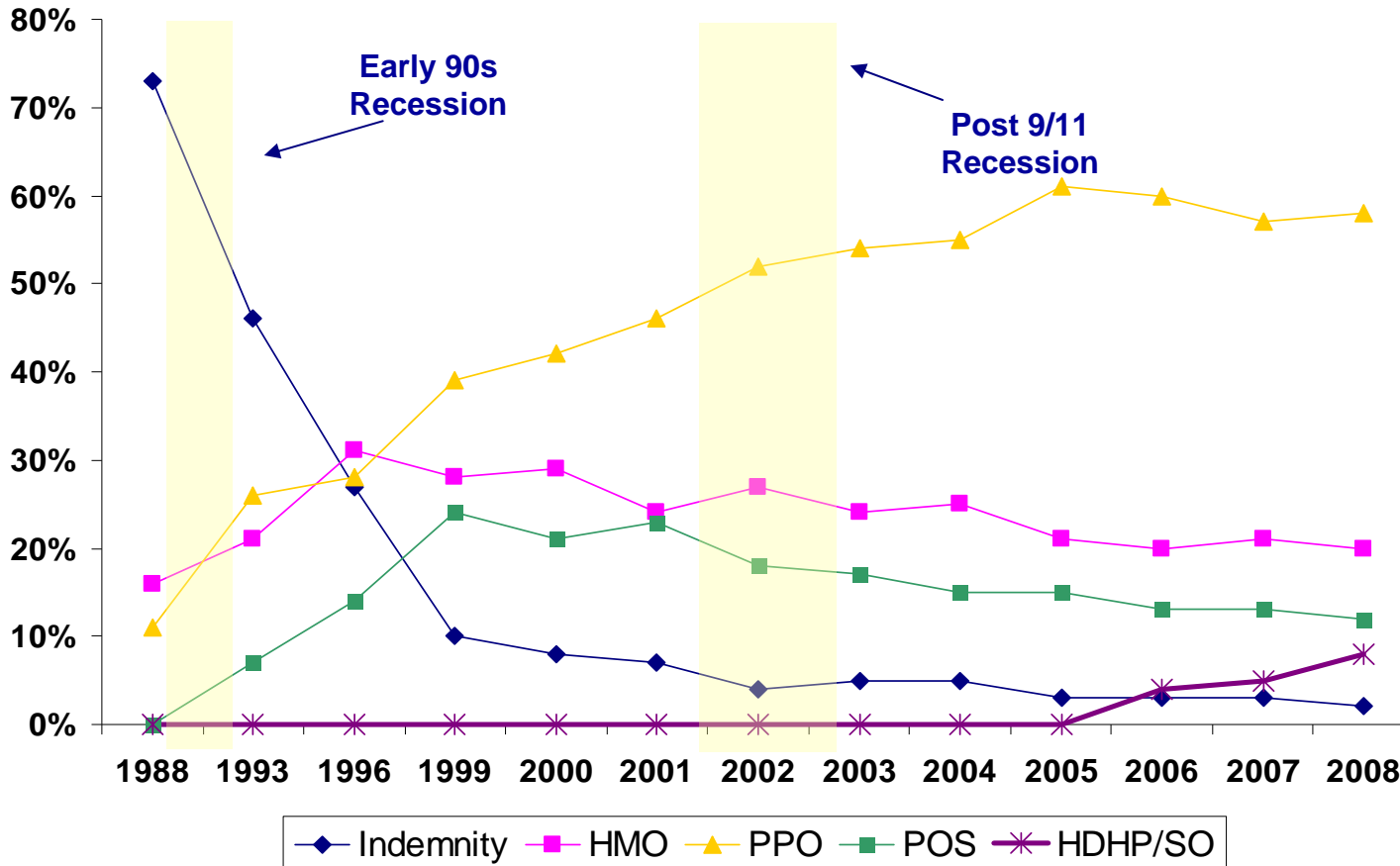


- Today only about half of all employers with less than 200 employees offer health insurance benefits
- The last recession negatively impacted the ability of small firms their ability to offer health insurance

Source: Kaiser/HRET Survey of Employer-Sponsored Health Benefits, 1999-2008;

In the past 20 years, economic downturns have spurred changes in the way companies buy health insurance.

**Health Insurance Product Mix: 1988-2008**

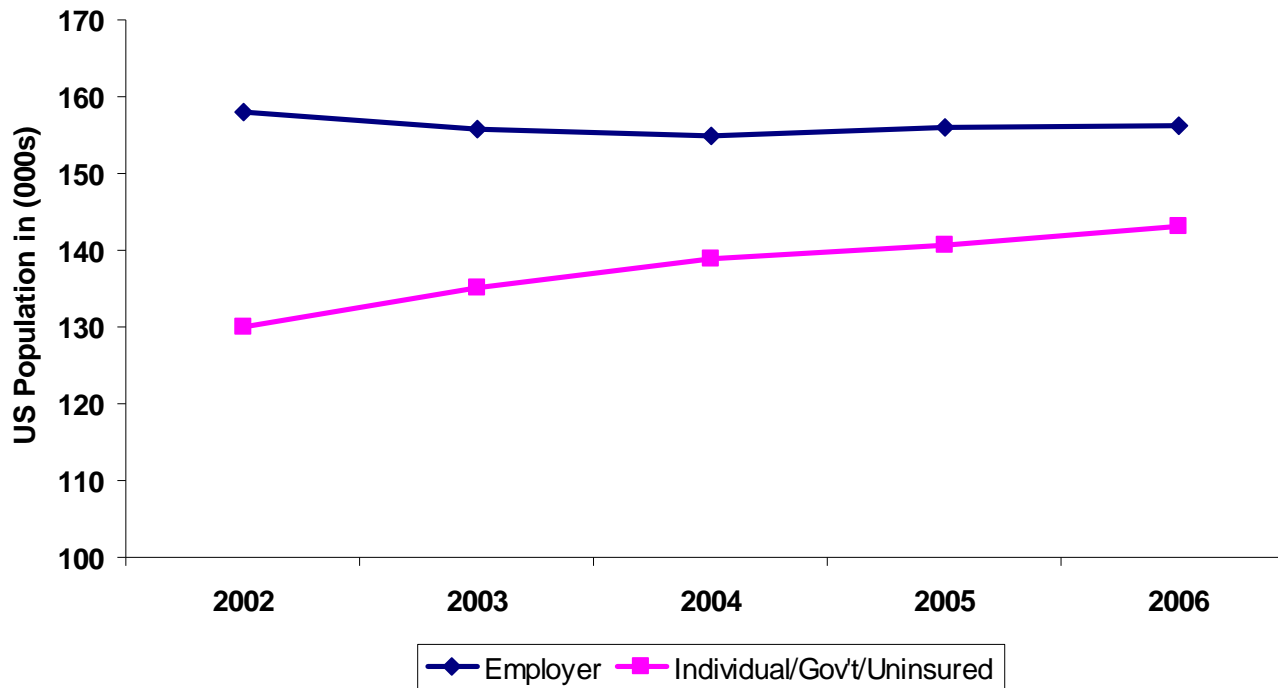


- The early 90s recession eliminated Indemnity Plans and ushered in the rise of managed care
- The Post 9/11 recession saw a leveling off of the decline in HMO products and the advent of CDHP

Source: Kaiser/HRET Survey of Employer-Sponsored Health Benefits, 1999-2008; KPMG Survey of Employer-Sponsored Health Benefits, 1993, 1996; The Health Insurance Association of America (HIAA), 1988.

When employer-based insurance decreases, public programs, individual insurance and the uninsured tend to rise.

*US Sources of Health Insurance Coverage, 2002-2006*



- Employer-based membership has declined over the past five years - loss of 1.7 million lives
- While enrollment has increased in:
  - Public programs (6.8 mil)
  - Individual market (1.1 mil)
  - Uninsured (5.1 mil)
- Roughly 60% of the uninsured work for small employers

In the past month we have experienced a severe shock to the US economy with takeovers, government bailouts, bankruptcy filings, CEO ousters and interest rate cuts.

## Timeline

### August 2007

Fed sounds Alarm

### Oct 2007

CEO Casualties Begin  
(Merrill Lynch, Citigroup, Wachovia)

### March 2008

Bear Sterns Collapse

### July 2008

IndyMac Failure

### Sept 2008

- Fannie, Freddie Seized
- Lehman Collapse
- Merrill Lynch Bought by BofA
- AIG bailout

### Oct 2008

- Morgan Stanley/Mitsubishi Talks
- Extreme Market Volatility

- 15 bank failures in 2008 (e.g., Bears Sterns, Lehman Brothers, WAMU) – many with significant employee populations in NYC
- Subprime mortgage crisis
- Credit crunch
- Extreme market volatility
- \$700B bailout
- Ballooning federal, state and municipal deficits
- Sharp rise in personal debt and bankruptcy filings

**The New York City economy has been hit hard with the true impact yet to come.**

After the 1987 turmoil, managed care became heavily entrenched.

## Macro Economic Trends

- 1987 Stock Market Crash
  - Large Federal Deficits
    - Housing bubble
  - Jobs moving offshore
- Moving from a manufacturing to service economy
- Savings & Loan Collapse

## Insurance: Before 1987

Indemnity heavily entrenched

Resistance to managed care

Physicians not eager to join networks

Brokers only dabbling in health insurance

Open regulatory environment



## Insurance: Market Response After 1987

Development of POS products with OON benefits

Lower-priced managed care plans grow rapidly

Physicians more open joining networks

Brokers more engaged in health insurance

HMO laws/regulations developed in many states

After the early 2000s, choice became more prevalent but so did cost-control mechanisms.

## Macro Economic Trends

- Dot com bubble bursts
- Stock Market instability
- Recent banking de-regulation
  - Low inflation
  - Y2K Hangover
- Sarbanes-Oxley – Enron Scandal

## Insurance: 2001

Managed care firmly in place with gatekeepers the norm

Inpatient costs under control

Rx skyrockets

Fully-insured HMO/POS plans popular

Employers favor rich benefits as recruitment/retention tool



## Insurance: Market Response 2001 - 2003

Rise of PPOs/open access products

Costs start to rise – focus on managing chronic & sickest populations (DM, care mgmt)

Tighter formularies

Growth in self-funding

New lower-priced product ideas (e.g., CDH) emerge

The economic crisis, as it has historically, will cause a shift in the insurance industry.

## Macro Economic Trends

- High commodities prices
- Subprime mortgage crisis
  - Credit crunch
- Extreme market volatility
  - \$700B bailout
- Ballooning federal, state and municipal deficits
- Sharp rise in personal debt and bankruptcy filings

## Insurance: 2003 – 2008

Managed care dominates but CDH gaining ground in some geographies



Employers buying down benefits, moving back to closed network plans, or dropping insurance



Double digit cost increases return



Soaring inpatient trends



Regulatory pressure increasing



## Insurance: Market Response 2009 -

Tighter network products? Growth of CDH?

High deductible plans? More direct pay and uninsured solutions?

Compliance-based medicine and products?

Tighter medical and bed day management?

Greater regulatory involvement?

**Both small and large employers are and will continue to be impacted by the current economic crisis, affecting health insurers' membership base across the board.**

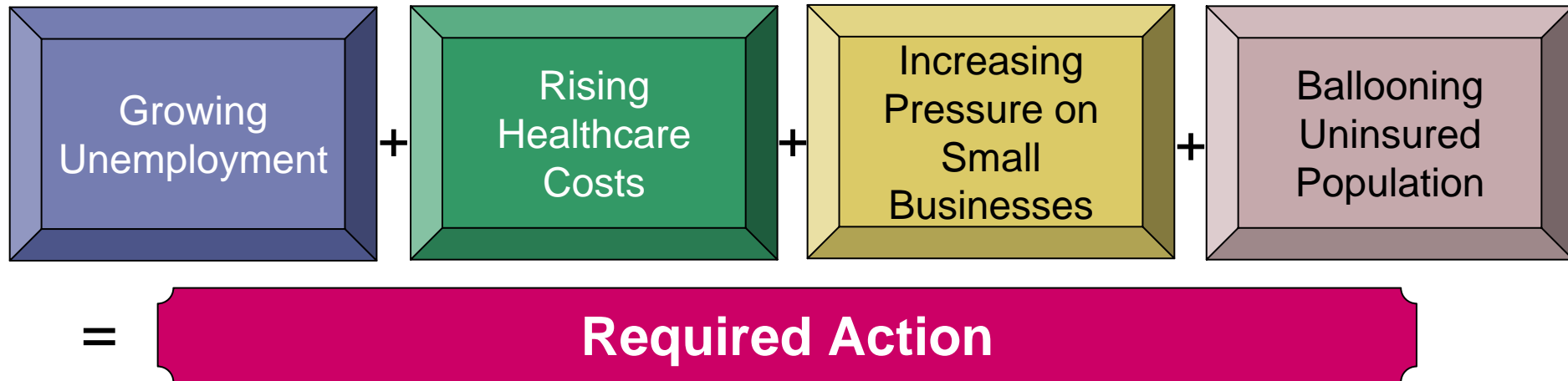
## Small Employers

- More likely to go out of business
- Less likely to start up a business
- Less likely to hire employees
- More likely to drop health insurance coverage altogether
  - Main reason small employers offer coverage is to attract skilled workers in a tight labor market
- If continue to offer coverage, will be shopping for cheaper coverage
- Looking for ways to cut health insurance costs by cutting benefits

## Large Employers

- Mass layoffs more likely
- All types of employees will be laid off
- More likely to increase overtime or hire temporary or part-time workers instead of hiring full-time permanent employees
- Will be looking at reducing benefits and health insurance as a way to cut costs
- Employers will likely reduce eligibility for coverage, cut back benefits, or increase employee cost sharing
- Fully insured employers will be shopping for less expensive coverage

**Our industry is at an inflection point and change is certain. We, as an industry, need to be actively involved in those discussions.**



- Work with lobbying groups
- Have proactive outreach to legislators and policy makers
- Increase involvement with health foundations, medical societies, AMA
- Participate on panel discussions to share our industry's point of view
- Devise creative strategies (e.g., lower priced products, cost control solutions, consumer engagement tools) to address crises
- Collaborate with producers, customers and providers to understand their needs and address our practices to meet those needs

## **Change creates challenges but also opportunities.**

- The economic environment will continue to shape the health insurance industry and result in change
- Lessons from past downturns demonstrate we need to continue to think of solutions and not be satisfied with the status quo
- The economic crisis will likely delay any meaningful comprehensive market reform
- There is a place for the industry to comfortably exist in either an Obama or McCain regime
- We, as key constituents in the healthcare industry, must work together to devise pertinent market solutions
- Our goal is, and will continue to be, to work with members, employers, and providers to deliver high quality, cost-effective care

**Change is certain. It is how we address it that will determine our short and long-term positions**