

Fall 2019

# State Health Plan benchmarks



# State Health Plan enrollment<sup>1</sup>

As of November 2019

Participants		
<b>Subscribers</b>		289,379
<b>Actives</b>	195,031	
<b>Retirees</b>	90,893	
<b>Others</b>	3,455	
<b>Spouses</b>		84,509
<b>Children</b>		137,150
<b>Total covered lives</b>	<b>511,038</b>	

<sup>1</sup>Represents enrollment in the State Health Plan, the MUSC Health Plan and TRICARE.

Active subscribers	
<b>State agencies</b>	35,036
<b>Higher education</b>	26,379
<b>School districts</b>	85,783
<b>Optional employers</b>	35,564
<b>Other</b>	12,269
<b>Total active subscribers</b>	<b>195,031</b>

Retirees	
<b>Medicare</b>	70,855
<b>Non-Medicare</b>	20,038
<b>Total retirees</b>	<b>90,893</b>

# State Health Plan participating employers

As of November 2019

Employers	
<b>State agencies</b>	86
<b>Higher education</b>	27
<b>School districts</b>	90
<b>Optional employers</b>	491
<b>Other</b>	70
<b>Total employers</b>	<b>764</b>

## State Health Plan vs. national trends

Target is to maintain net expenditure growth at least two points below benchmark.

	Benchmark	State Health Plan
2015	7.2%	7.9%
2016	6.9%	0.2%
2017	6.6%	2.4%
2018	6.6%	3.4%
2019	6.6%	2.3% <sup>1</sup>
<b>5-year average (2015-2019)</b>	6.8%	3.2%

<sup>3</sup>Incurred in nine months; paid in nine months

## State Health Plan contribution rate increases versus CPI growth for medical care

Target is to control annual contribution increase to no more than CPI for medical care plus 3 percent. Two-year lag in CPI data used for measure because of timing of the State Health Plan rate setting process.

	State Health Plan total rate increase		Medical care CPI increase
2016	3.4%	2014	3.0%
2017	0.6%	2015	2.6%
2018	2.5%	2016	4.1%
2019	5.7%	2017	1.8%
2020	0.0%	2018	2.0%
<b>5-year average (2016-2020)</b>	2.4%	<b>5-year average (2014-2018)</b>	2.7%

## 2019 Average monthly total premiums<sup>1</sup>

Totals include employee and employer contributions

	Single	Family
<b>State Health Plan</b>	\$500	\$1,305
<b>Large public and private sector employers<sup>2</sup></b>	\$640	\$1,807
<b>Public and private sector in South<sup>3</sup></b>	\$620	\$1,758
<b>Public employers</b>	\$711	\$1,880
<b>Private - manufacturing</b>	\$592	\$1,725
<b>Private - financial services</b>	\$651	\$1,884

<sup>1</sup>Average monthly total premiums in PPO (Preferred Provider Organization) plans

<sup>2</sup>Large public and private sector employers: ≥ 200 employees in public and private sector

<sup>3</sup>Public and private sector employers in South includes Alabama, Arkansas, Delaware, District of Columbia, Florida, Georgia, Kentucky, Louisiana, Maryland, Mississippi, North Carolina, Oklahoma, South Carolina, Tennessee, Texas, Virginia and West Virginia

Data from the Kaiser Family Foundation Employer Health Benefits 2019 Annual Survey

## 2019 Average annual deductible<sup>1</sup>

	Amount
<b>State Health Plan</b>	\$490
<b>Large public and private sector employers<sup>2</sup></b>	\$986
<b>All employers</b>	\$1,206

<sup>1</sup>Average annual deductible in PPO (Preferred Provider Organization) plans

<sup>2</sup>Large public and private sector employers: ≥ 200 employees in public and private sectors

Data from the Kaiser Family Foundation Employer Health Benefits 2019 Annual Survey

## 2020 Composite monthly premiums<sup>1</sup>

	Employer	Employee	Total
<b>State Health Plan</b>	\$572.64	\$159.42	\$732.06
<b>South<sup>2</sup></b>	\$759.01	\$184.97	\$943.98
<b>United States</b>	\$890.87	\$182.02	\$1,072.89

Survey uses most prevalent plan among state employee options for analysis.

<sup>1</sup>Composite monthly premiums: Weighted average of all PEBA health subscribers enrolled in each coverage level

<sup>2</sup>South includes Alabama, Arkansas, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, Oklahoma, South Carolina, Tennessee, Texas, Virginia and West Virginia

Data from the 2020 PEBA 50-State Survey of State Employee Health Plans

## 2018 Average annual gross plan cost per active employee<sup>1</sup>

	Amount <sup>2</sup>
State Health Plan	\$10,528
Public employers	\$12,384
Private - manufacturing	\$13,751
Private - financial services	\$13,607
All employers	\$12,486
Employers - 500+	\$13,178
Employers - 20k+	\$12,245
South <sup>3</sup>	\$11,257

<sup>1</sup>Average cost in PPO (Preferred Provider Organization) and POS (Point of Service) plans

<sup>2</sup>Average annual gross plan cost per employee (medical and pharmacy only for active employees and their dependents) = (Claims cost for employee and dependents + administrative costs + employee contributions)/number of active employees

<sup>3</sup>South includes Alabama, Arkansas, Delaware, Florida, Georgia, Kentucky, Louisiana, Maryland, Mississippi, North Carolina, Oklahoma, South Carolina, Tennessee, Texas, Virginia and West Virginia

Data from 2018 Mercer National Survey of Employer-sponsored Health Plans

## Historical State Health Plan increases and funding

Plan year	Employee increase	Employer increase	Overall increase	Plan design changes
2009	0.0%	0.0%	0.0%	
2010	0.0%	0.0%	0.0%	
2011	0.0%	10.3%	7.2%	
2012	4.5%	4.5%	4.5%	
2013	0.0%	6.37%	4.7%	
2014	0.0%	6.8%	5.1%	Increased deductible and coinsurance maximum
2015	0.0%	3.9%	2.9%	Increased deductible and coinsurance maximum
2016	0.0%	4.5%	3.4%	
2017	0.0%	0.8%	0.6%	
2018	0.0%	3.3%	2.5%	
2019	0.0%	7.4%	5.7%	Increased copayments, deductible and coinsurance maximum
2020	0.0%	0.0%	0.0%	

## South Carolina Public Employee Benefit Authority

202 Arbor Lake Drive

Columbia, SC 29223

803.737.6800 | 888.260.9430

[www.peba.sc.gov](http://www.peba.sc.gov)



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