

The Cost and Benefits of Individual & Family Health Insurance Plans

November 2011

2011 policies surveyed were active in February 2011

Table of Contents

Introduction and Background	3
Methodology Summary	3
Report Highlights	4
Major Medical Plan Costs	
Profile of eHealthInsurance policy holders: 2009 to 2011	6
Monthly premiums for major medical plans: February 2011	7
Individual plan deductible levels: February 2011	8
Family plan deductible levels: February 2011	8
Individual plan premiums and deductibles by age: February 2011	9
Individual plan premiums by age: 2009-2011	9
Individual plan deductibles by age: 2009-2011	10
Individual plan premiums by gender and age: February 2011	10
Family plan premiums and deductibles by age: February 2011	11
Family plan premiums and deductibles by number of members per plan: February 2011	11
Family plan premiums by age: 2009-2011	12
Family plan deductibles by age: 2009-2011	12
Average and median premiums and deductibles for children's health insurance: February 2011	13
Individual plan premiums by state: February 2011	14
Individual plan premiums by state: February 2010	15
Average Individual plan deductibles by state: February 2011	16
Average Family plan premiums by state: February 2011	17
Average Family plan deductibles by state: February 2011	18
Major Medical Plan Benefits	
Type of health insurance products surveyed: February 2011	20
Dollar limit for the lifetime of plan policies: February 2011	20
Specific plan benefits and preventive care benefits: 2009-2011	21
Average annual premiums with and without specific benefits: February 2011	21
HSA-Eligible Plans	
Premiums and deductibles for individual and family HSA-eligible plans: February 2011	23
Age distribution of HSA-eligible plans: February 2011	23
Media Contacts	24
Methodology Supplement	25

Introduction and Background

- eHealth, Inc. has used its proprietary technology to enroll over 2 million Americans in health insurance through its online marketplace: eHealthInsurance.com.
- The objective of this report is to provide a nationwide perspective on cost and benefit trends in the individual health insurance market based on an analysis of a large, geographically distributed sample of eHealthInsurance purchasers and products.
- The first Cost and Benefits of Individual Health Insurance Plans report was issued by eHealthInsurance in 2001. eHealthInsurance is one of the few organizations with national source data that can best reflect consumer buying patterns and purchase prices.
- Founded in 1997, eHealthInsurance, a wholly-owned subsidiary of eHealth, Inc., is an online source of health insurance for individuals, families and small businesses.
- eHealthInsurance is licensed to sell health insurance in all 50 states and the District of Columbia. eHealthInsurance and eHealth are registered trademarks of eHealthInsurance Services, Inc.
- eHealthInsurance offers thousands of individual, family and small business health plans underwritten by more than 180 of the nation's leading health insurance companies, making it the ideal model of a successful, high-functioning health insurance exchange.

Methodology Summary

- The 2011 plan data referred to in this report is derived from approximately 384,000 individual and family (IFP) major medical policies purchased through eHealthInsurance that were active in February 2011.
- The 2010 plan data referred to in this report is derived from approximately 384,000 individual and family (IFP) major medical policies purchased through eHealthInsurance that were active in February 2010.
- The 2009 plan data referred to in this report is derived from approximately 317,000 individual and family (IFP) major medical policies purchased through eHealthInsurance that were active in August 2009.
- This report analyzes monthly premiums paid on individual and family major medical health insurance policies in 2009, 2010, and 2011 along with the benefits associated with those plans.
- The data contained in this report represents consumers who shop for and purchase health insurance through eHealthInsurance.com
- For more detail on the methodology for this report, see the Methodology Supplement section at the end of this report.

Report Highlights

Active Policies in February 2011

- The average monthly premium paid for individual policies was \$183, while the average premium paid for family policies was \$414.
- Between February 2010 and February 2011, the average premium increased 9.6% for individual policies and 5.6% for families.
- The average deductible for individual policies was \$2,935, and the average deductible for family policies was \$3,879.
- Between February 2010 and February 2011, the average deductible increased 11.5% for individual policies and 9.9% for families.
- Half of all individual policyholders paid \$149 or less per month in premiums, and half of all family policy holders paid \$353 or less for monthly premiums.
- The average plan lifetime limit per member was \$4.2 million. This average applies only to policies with specified limits. Though provisions of the Patient Protection and Affordable Care Act will phase out lifetime limits for most covered medical services, this report surveys policies in effect as of February 2011.
- The range of average monthly premiums paid for individual plans across the United States falls between \$119 in Iowa and \$382 in New York*.
- The range of average monthly premiums paid for family plans across the United States falls between \$261 in Iowa and \$932 in New York*.
- More than a third (37.9%) of individual plan policyholders had an annual deductible of \$2,000 or less.
- Between February 2010 and February 2011, the average age of policyholders increased by 1.9 years.
- Over seventeen percent (17.3%) of all plans were HSA-eligible.
- The average premiums paid for HSA-eligible plans was \$177 for individuals and \$389 for families.
- Almost 100% of individual or family plan policyholders selected plans that included lab x-ray (98.9%) and emergency room coverage (99.9%).
- The majority of individual and family plan policyholders purchased plans that covered prescription drugs (88.4%) and chiropractic coverage (72.4%).
- Policyholders also tended to select plans that offered preventive care benefits like OB/GYN (92.0%), periodic exams (89.3%) and well baby coverage (88.3%).

* Excluding the states of Hawaii, Maine, Rhode Island and Vermont

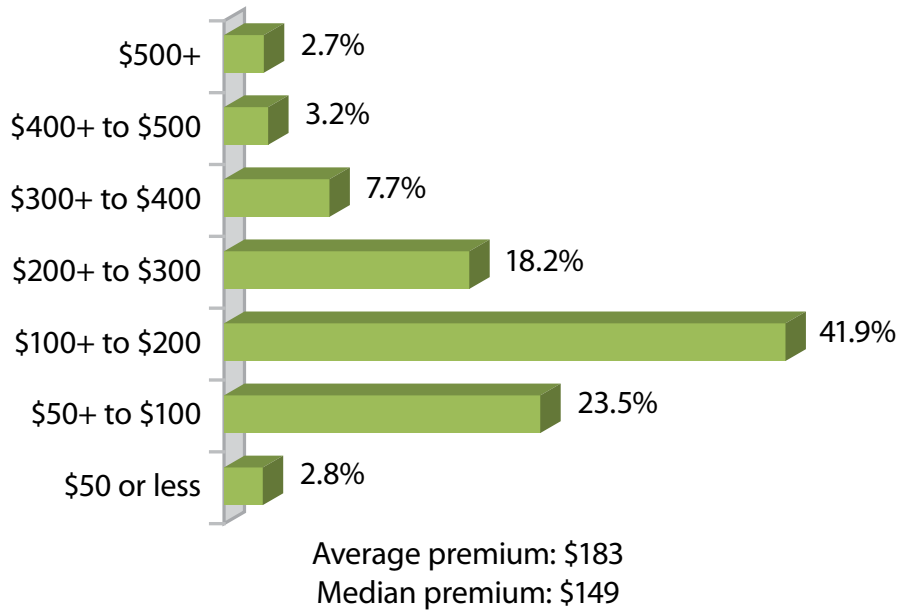
Major Medical Plan Costs

Profile of eHealthInsurance policy holders: 2009 to 2011

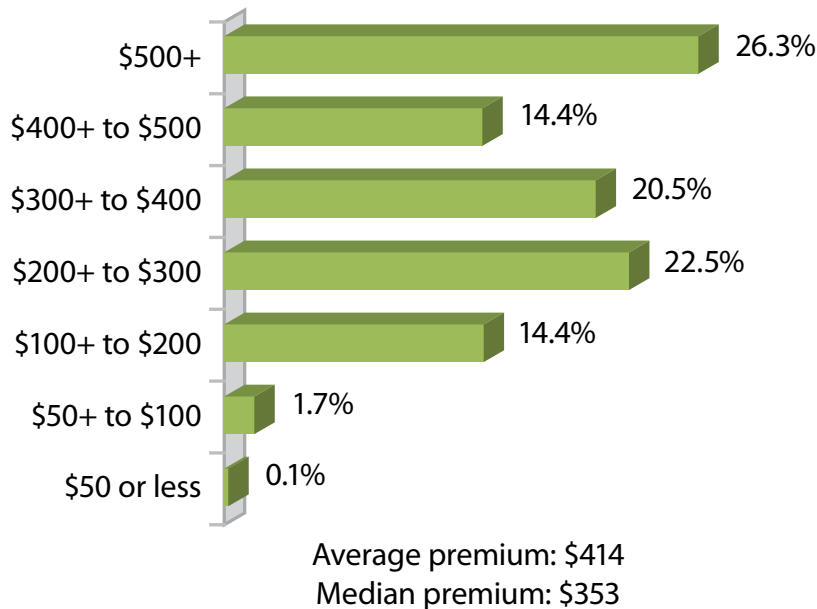
	2009	2010	2011
% Male	53.4%	53.9%	53.7%
Average age	35.6 years old	35.7 years old	37.6 years old
% Single	63.6%	64.9%	60.7%
Average monthly premium for individual plans	\$161	\$167	\$183
Median monthly premium for individual plans	\$132	\$136	\$149
Average deductible for individual plans	\$2,325	\$2,632	\$2,935
Average monthly premium for family plans	\$383	\$392	\$414
Median monthly premium for family plans	\$329	\$336	\$353
Average deductible for family plans	\$3,128	\$3,531	\$3,879
% HSA-eligible (individual and family)	16.0%	16.3%	17.3%
Average monthly premium for individual HSA-eligible plans	\$143	\$155	\$177
Average monthly premium for family HSA-eligible plans	\$331	\$352	\$389

Monthly Premiums for Major Medical Plans: February 2011

Individual



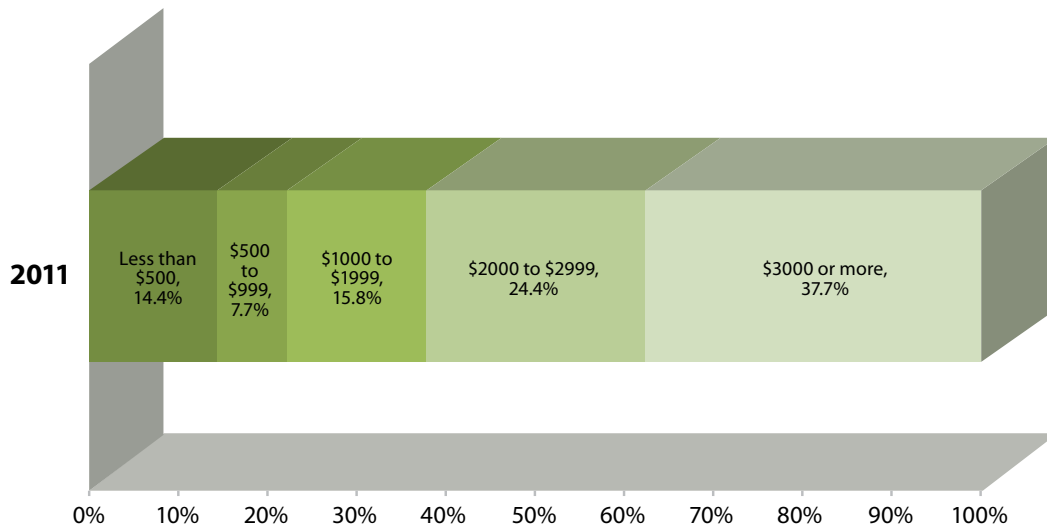
Family



- Half of all individual policyholders paid premiums of \$149 or less per month
- Half of all family policyholders paid premiums of \$353 or less per month

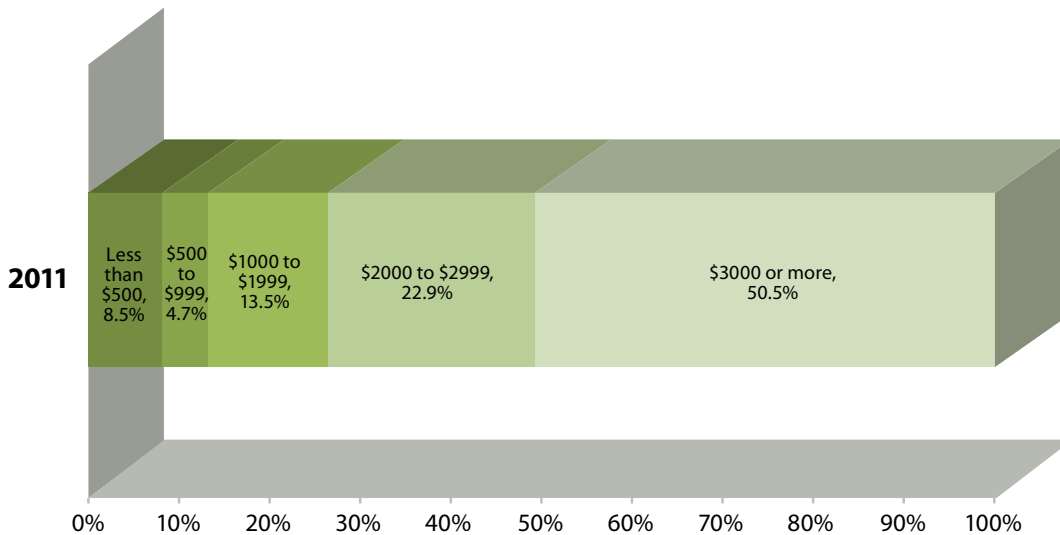
An average is the sum of all the data in the distribution divided by the sample size. The median is the middle value in a set of numbers arranged in increasing order. If there is an even number of values, the median is the average of the middle two numbers.

Individual Plan Deductible Levels: February 2011



- More than a third (37.9%) of individual plan policyholders had an annual deductible of less than \$2,000
- Nearly a quarter (24.4%) of individual plan policyholders had an annual deductible of between \$2,000 and \$3,000
- 37.7% of individual plan policyholders had an annual deductible of \$3,000 or more

Family Plan Deductible Levels: February 2011



- More than a quarter (26.7%) of family plan policyholders had an annual deductible of less than \$2,000
- 22.9% of family plan policyholders had an annual deductible of between \$2,000 and \$2,999
- 50.5% of family plan policyholders had an annual deductible of \$3,000 or more

Individual Plan Premiums and Deductibles by Age: February 2011

Age of primary policy holder	Avg. monthly premium	Avg. deductible	% of individual policies sampled	% of uninsured population*	% of US population*
Less than 18	\$102	\$2,546	5.7%	14.6%	24.5%
18-24	\$110	\$3,083	12.3%	16.2%	9.7%
25-34	\$139	\$2,765	37.8%	23.7%	13.6%
35-44	\$192	\$2,866	16.9%	17.4%	13.0%
45-54	\$251	\$3,122	14.6%	15.9%	14.4%
55-64	\$333	\$3,348	12.7%	10.6%	12.1%
Overall	\$183	\$2,935	100.0%	98.4%	87.3%

- 71.9% of America's uninsured are under the age of 45*
- 72.7% of eHealthInsurance individual policyholders are under the age of 45 and they pay less than \$200 per month on average for their health insurance premiums
- The average individual plan premium paid by persons between the ages of 19-25 in 2011 was \$114; the average deductible for the same age group was \$3,020. As the result of health care reform, persons in this age range may now be eligible to retain coverage under a parent's health insurance plan.

*Source: "U.S. Census Bureau, Current Population Survey, 2011 Annual Social and Economic Supplement," released in September 2011. This Census report reflects 2010 year data and is the most recent available from the Census Bureau describing the demographics of the uninsured.

Individual Plan Premiums by Age: 2009-2011

Age of policy holder	Avg. premium 2009	Avg. premium 2010	Avg. premium 2011	% Increase 2010-2011
Less than 18	\$94	\$97	\$102	5.2%
18-24	\$106	\$109	\$110	0.9%
25-34	\$130	\$133	\$139	4.5%
35-44	\$178	\$185	\$192	3.8%
45-54	\$233	\$243	\$251	3.3%
55-64	\$314	\$321	\$333	3.7%
Overall	\$161	\$167	\$183	9.6%

- Between February 2010 and February 2011, weighted average premiums for individual policies increased 9.6%
- Due to a shift in mix of policyholders toward older age groups with higher premiums, the increase in the overall average is higher than the increase in any individual age group; on average, the increase in premiums in each age group is 3.6%

Individual Plan Deductibles by Age: 2009-2011

Age of policy holder	Avg. deductible 2009	Avg. deductible 2010	Avg. deductible 2011
Less than 18	\$2,102	\$2,446	\$2,546
18-24	\$2,322	\$2,651	\$3,083
25-34	\$2,195	\$2,496	\$2,765
35-44	\$2,296	\$2,595	\$2,866
45-54	\$2,562	\$2,819	\$3,122
55-64	\$2,686	\$3,004	\$3,348
Overall	\$2,325	\$2,632	\$2,935

- The average individual plan deductible increased 11.5% between February 2010 and February 2011
- Individual between the ages of 25 and 34 had the lowest deductibles among adults

Individual Plan Premiums by Gender and Age: February 2011

Women	Less than 18	18-24	25-34	35-44	45-54	55-64	Overall
Avg. monthly premium	\$100	\$118	\$152	\$207	\$257	\$333	\$199
% of individual policies sampled	5.7%	12.4%	34.7%	15.5%	15.5%	16.1%	100.0%

Men	Less than 18	18-24	25-34	35-44	45-54	55-64	Overall
Avg. monthly premium	\$103	\$103	\$128	\$180	\$245	\$333	\$169
% of individual policies sampled	5.6%	12.2%	40.7%	18.1%	13.7%	9.6%	100.0%

Difference (Female - Male)	Less than 18	18-24	25-34	35-44	45-54	55-64	Overall
	-\$3	\$15	\$24	\$26	\$12	\$0	\$30

- A larger percentage of female policyholders were in the 45 to 65 age group than men (31.6% female vs. 23.3% male). The higher percentage of women in the 45-64 age group increases the average overall premiums women paid to \$30 more per month compared to men, though no single age group paid an average of \$30 more per policy.

Family Plan Premiums and Deductibles by Age: February 2011

Age of primary policy holder	Avg. monthly premium	Avg. deductible	% of family policies sampled
Less than 18	\$177	\$3,720	1.7%
18-24	\$218	\$3,990	2.3%
25-34	\$309	\$3,618	22.2%
35-44	\$400	\$3,843	34.3%
45-54	\$474	\$4,012	27.1%
55-64	\$576	\$4,161	12.4%
Overall	\$414	\$3,879	100.0%

- Average monthly premiums for family policies surveyed in each age group ranged from \$177 to \$576

Family Plan Premiums and Deductibles by Number of Members on Each Plan: February 2011

Members on policy	Avg. monthly premium	Median monthly premium	Avg. cost per member	Avg. deductible	Median deductible	% of family policies sampled
2	\$351	\$291	\$175	\$3,755	\$2,500	44.9%
3	\$412	\$349	\$137	\$3,838	\$2,600	23.9%
4	\$487	\$402	\$122	\$4,048	\$3,000	21.0%
5	\$533	\$455	\$107	\$4,116	\$3,500	7.5%
6+	\$577	\$500	\$92	\$4,299	\$3,850	2.7%
Overall	\$414	\$353	\$138	\$3,879	\$2,750	100%

- Note: a family plan with two members could include a couple, a parent and child, or two children on their own plan

Family Plan Premiums by Age: February 2009-2011

Age of primary policy holder	Avg. premium 2009	Avg. premium 2010	Avg. premium 2011
Less than 18	\$168	\$169	\$177
18-24	\$212	\$212	\$218
25-34	\$305	\$301	\$309
35-44	\$381	\$386	\$400
45-54	\$439	\$452	\$474
55-64	\$540	\$556	\$576
Overall	\$383	\$392	\$414

- Note: a family plan with two members could include a couple, a parent and child, or two children on their own plan
- Between February 2010 and February 2011, average premiums paid for family policies increased 5.6%

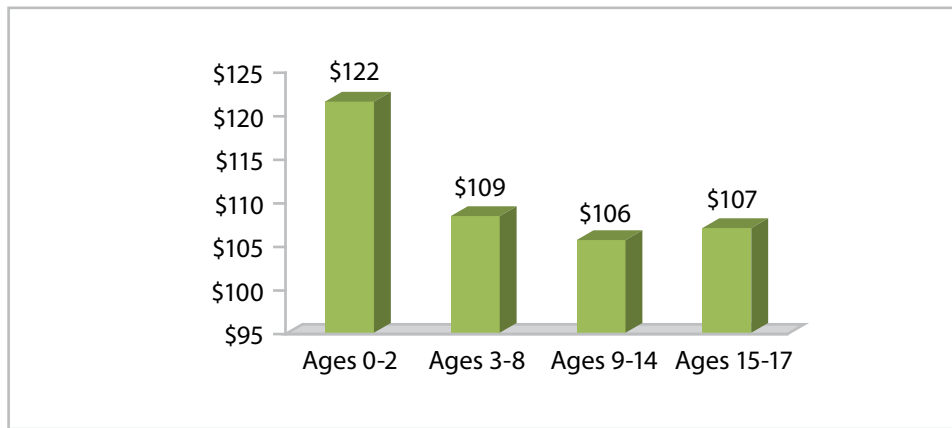
Family Plan Deductibles by Age: February 2009-2011

Age of primary policy holder	Avg. deductible 2009	Avg. deductible 2010	Avg. deductible 2011
Less than 18	\$2,930	\$3,534	\$3,720
18-24	\$2,872	\$3,462	\$3,990
25-34	\$2,797	\$3,243	\$3,618
35-44	\$3,103	\$3,494	\$3,843
45-54	\$3,380	\$3,733	\$4,012
55-64	\$3,519	\$3,801	\$4,161
Overall	\$3,129	\$3,531	\$3,879

- Between February 2010 and February 2011, the average deductible for family policies increased 9.9%

Average and Median Premiums and Deductibles for Children's Health Insurance: February 2011

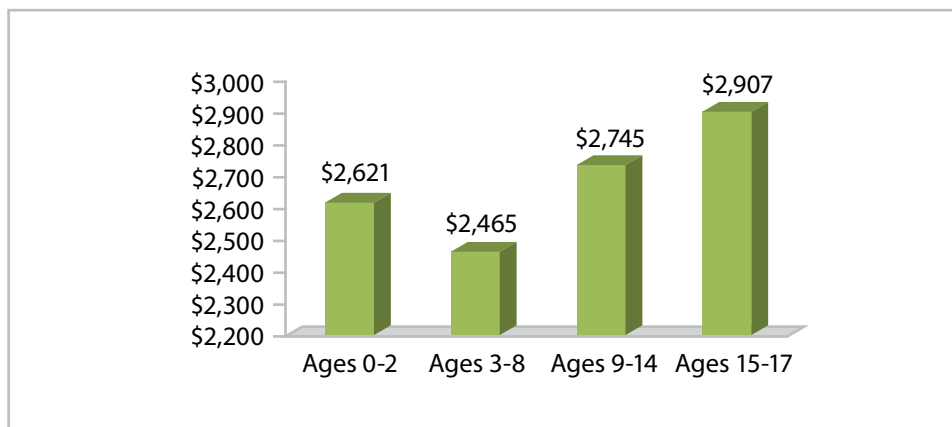
Average monthly premiums



Median premium

\$110	\$97	\$92	\$95
-------	------	------	------

Average deductibles



Median deductible

\$2,500	\$2,000	\$2,500	\$2,500
---------	---------	---------	---------

- Half of all premiums for children between the ages of 3 and 17 were \$97 or less per month
- Children under the age of 18 were listed as primary policyholders for 5.7% of all policies in effect as of February 2011

Individual Plan Premiums by State: February 2011

State	Average Monthly Premium	% Chg in Premium from 2010	State	Average Monthly Premium	% Chg in Premium from 2010
AK	\$221	15%	MT	\$179	7%
AL	\$136	8%	NC	\$155	9%
AR	\$136	10%	ND	\$122	-13%
AZ	\$158	11%	NE	\$139	-1%
CA	\$173	11%	NH	\$216	15%
CO	\$166	14%	NJ	\$292	9%
CT	\$210	6%	NM	\$181	18%
DC	\$156	7%	NV	\$173	8%
DE	\$175	10%	NY	\$382	12%
FL	\$175	6%	OH	\$142	11%
GA	\$169	4%	OK	\$159	10%
*HI	NA	NA	OR	\$177	7%
IA	\$119	8%	PA	\$170	9%
ID	\$152	8%	*RI	NA	NA
IL	\$174	8%	SC	\$171	10%
IN	\$163	13%	SD	\$131	-3%
KS	\$138	15%	TN	\$162	7%
KY	\$133	13%	TX	\$189	8%
LA	\$159	9%	UT	\$138	8%
MA	\$351	16%	VA	\$175	8%
MD	\$155	6%	*VT	NA	NA
MI	\$147	15%	WA	\$221	14%
MN	\$149	9%	WI	\$154	14%
MO	\$137	9%	WV	\$200	9%
MS	\$177	8%	WY	\$179	11%

*The states of Hawaii, Maine, Rhode Island and Vermont were excluded due to sample sizes of fewer than 100 policies

Individual Plan Premiums by State: February 2010

State	Average Monthly Premium	State	Average Monthly Premium
AK	\$192	MT	\$168
AL	\$126	NC	\$143
AR	\$123	ND	\$140
AZ	\$142	NE	\$140
CA	\$156	NH	\$188
CO	\$146	NJ	\$268
CT	\$197	NM	\$153
DC	\$145	NV	\$160
DE	\$159	NY	\$340
FL	\$166	OH	\$127
GA	\$163	OK	\$144
HI	\$159	OR	\$166
IA	\$110	PA	\$157
ID	\$141	*RI	NA
IL	\$161	SC	\$155
IN	\$145	SD	\$136
KS	\$120	TN	\$151
KY	\$118	TX	\$175
LA	\$146	UT	\$129
MA	\$303	VA	\$162
MD	\$146	*VT	NA
MI	\$127	WA	\$195
MN	\$136	WI	\$135
MO	\$126	WV	\$183
MS	\$164	WY	\$161

*The states of Hawaii, Maine, Rhode Island and Vermont were excluded due to sample sizes of fewer than 100 policies

Average Individual Plan Deductibles by State: February 2011

State	Average Deductible	State	Average Deductible
AK	\$3,900	MT	\$4,074
AL	\$4,656	NC	\$4,250
AR	\$2,730	ND	\$4,039
AZ	\$3,985	NE	\$2,935
CA	\$2,366	NH	\$3,274
CO	\$3,774	NJ	\$199
CT	\$3,227	NM	\$2,492
DC	\$2,157	NV	\$2,802
DE	\$3,302	NY	\$306
FL	\$4,347	OH	\$3,380
GA	\$4,487	OK	\$3,215
HI	NA	OR	\$4,431
IA	\$3,675	PA	\$2,305
ID	\$3,265	*RI	NA
IL	\$2,950	SC	\$3,742
IN	\$3,840	SD	\$3,802
KS	\$3,100	TN	\$4,132
KY	\$3,074	TX	\$3,547
LA	\$3,437	UT	\$3,057
MA	\$1,472	VA	\$2,493
MD	\$2,111	*VT	NA
MI	\$3,109	WA	\$2,857
MN	\$4,651	WI	\$3,353
MO	\$3,245	WV	\$3,260
MS	\$4,290	WY	\$3,318

*The states of Hawaii, Maine, Rhode Island and Vermont were excluded due to sample sizes of fewer than 100 policies

Average Family Plan Premiums by State: February 2011

State	Average monthly premium	State	Average monthly premium
AK	\$535	MT	\$379
AL	\$305	NC	\$340
AR	\$302	ND	\$375
AZ	\$316	NE	\$327
CA	\$416	NH	\$629
CO	\$374	NJ	\$788
CT	\$501	NM	\$383
DC	\$417	NV	\$363
DE	\$385	NY	\$932
FL	\$358	OH	\$316
GA	\$386	OK	\$338
HI	NA	OR	\$393
IA	\$261	PA	\$432
ID	\$350	*RI	NA
IL	\$413	SC	\$364
IN	\$343	SD	\$286
KS	\$341	TN	\$366
KY	\$314	TX	\$421
LA	\$346	UT	\$328
MA	\$922	VA	\$408
MD	\$371	*VT	NA
MI	\$324	WA	\$503
MN	\$364	WI	\$352
MO	\$301	WV	\$394
MS	\$347	WY	\$380

*The states of Hawaii, Maine, Rhode Island and Vermont were excluded due to sample sizes of fewer than 100 policies

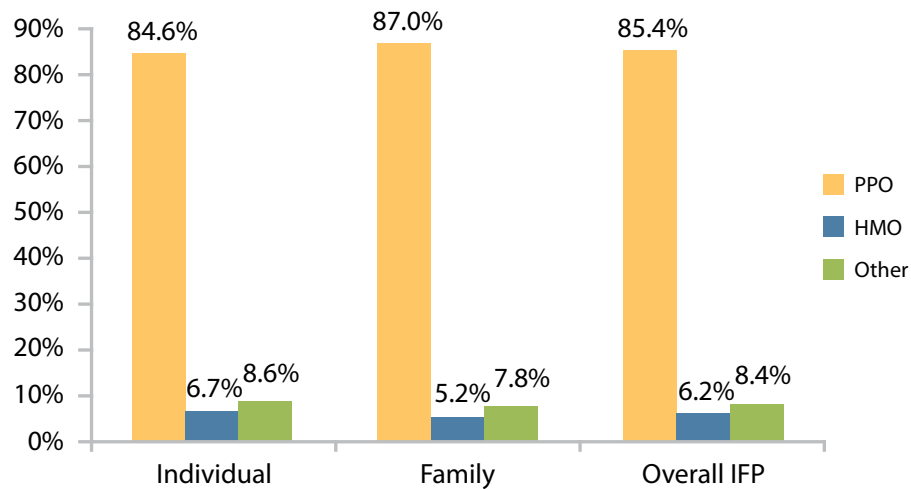
Average Family Plan Deductibles by State: February 2011

State	Average Deductible	State	Average Deductible
AK	\$4,457	MT	\$4,967
AL	\$5,579	NC	\$5,485
AR	\$3,324	ND	\$5,591
AZ	\$4,899	NE	\$4,618
CA	\$3,321	NH	\$5,312
CO	\$4,609	NJ	\$261
CT	\$3,971	NM	\$3,017
DC	\$2,449	NV	\$3,732
DE	\$4,088	NY	\$560
FL	\$5,103	OH	\$4,256
GA	\$5,110	OK	\$4,023
HI	NA	OR	\$4,424
IA	\$4,856	PA	\$2,657
ID	\$3,310	*RI	NA
IL	\$3,875	SC	\$5,467
IN	\$5,233	SD	\$4,356
KS	\$3,782	TN	\$4,748
KY	\$3,890	TX	\$4,513
LA	\$4,224	UT	\$4,218
MA	\$1,465	VA	\$3,174
MD	\$2,565	*VT	NA
MI	\$4,453	WA	\$3,446
MN	\$6,048	WI	\$4,517
MO	\$3,928	WV	\$4,620
MS	\$5,227	WY	\$4,997

*The states of Hawaii, Maine, Rhode Island and Vermont were excluded due to sample sizes of fewer than 100 policies

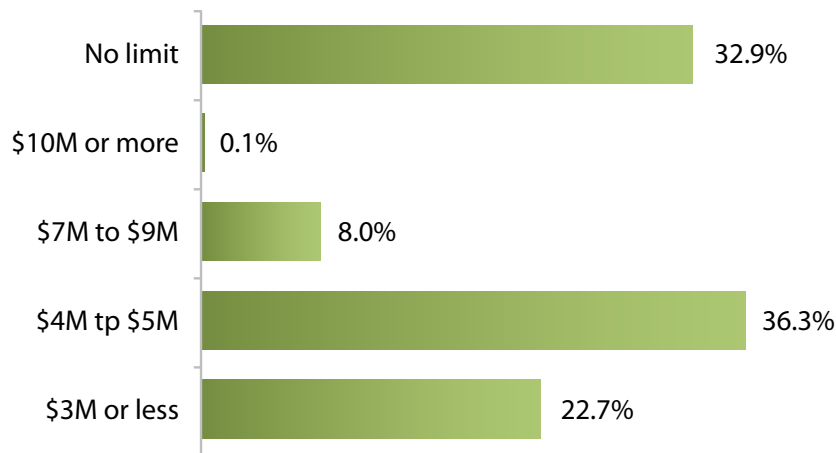
Major Medical Plan Benefits

Type of Product: February 2011



- PPO: Preferred Provider Organization
- HMO Health Maintenance Organization
- Other: May include Indemnity, POS (Point of Service) and EPO (Exclusive Provider Organization) plans
- Product type estimates are based on a sample of approximately 32,500 policies in effect as of February 2011, a subset of the total policies used in generating this report

Dollar Limit for the Lifetime of Individual and Family Plans: February 2011



- In 2009 plans with no lifetime limit accounted for only 13.0%
- Provisions of the Patient Protection and Affordable Care Act that went into effect in September 2010 have phased out lifetime dollar caps for most covered medical services under most plans. This provision was to be phased in over the course of the next year at each policies annual renewal date. The data collected for this survey reflects policies purchased through eHealthInsurance.com and with coverage in effect as of February 2010 2011 only.

Specific Plan Benefits and Preventive Care Benefits: 2009-2011

Plan Benefits	Individual plans 2009	Individual plans 2010	Individual plans 2011	Family plans 2009	Family plans 2010	Family plans 2011	Overall IFP plans 2009	Overall IFP plans 2010	Overall IFP plans 2011
Lab X-Ray	99.0%	99.0%	98.9%	99.1%	99.1%	98.9%	99.0%	99.0%	98.9%
ER	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%
Prescription	89.6%	88.2%	88.9%	86.9%	86.0%	87.0%	88.9%	87.7%	88.4%
Chiropractic	74.2%	72.8%	71.6%	75.0%	75.3%	74.7%	74.4%	73.4%	72.4%
Maternity	22.1%	20.8%	19.6%	22.1%	20.4%	18.7%	22.1%	20.7%	19.3%
Preventive care	Individual plans 2009	Individual plans 2010	Individual plans 2011	Family plans 2009	Family plans 2010	Family plans 2011	Overall IFP plans 2009	Overall IFP plans 2010	Overall IFP plans 2011
OB/GYN	93.0%	92.0%	91.3%	95.6%	95.1%	93.8%	93.7%	92.7%	92.0%
Periodic Exam	89.5%	89.2%	89.1%	90.0%	90.3%	89.8%	89.6%	89.5%	89.3%
Well Baby	87.7%	87.6%	88.1%	87.7%	88.6%	88.8%	87.7%	87.9%	88.3%

- A majority of February 2011 policyholders selected plans that included coverage for lab/x-ray services (98.9%), emergency room services (99.9%), prescription drugs (88.4% overall) and chiropractic care (72.4% overall)
- A majority of February 2011 policyholders selected plans offering preventive care services such as OB/GYN care, periodic exams, and well-baby care
- Between February 2009 and February 2011 there has been a slight decrease in the percentage of selected plans providing maternity benefits

Annual Premiums with and without Specific Benefits: February 2011

Benefit	Avg. monthly premium	% of policies sampled
With maternity coverage	\$253	19.6%
Without maternity coverage	\$161	80.4%
With Prescription Drug Coverage	\$181	88.9%
Without Prescription Drug Coverage	\$162	11.1%

- Monthly premiums for plans offering maternity coverage were \$92 more expensive on average compared to plans not offering maternity coverage
- Monthly premiums for plans offering prescription drug coverage were \$19 more expensive on average compared to plans not offering prescription drug coverage
- In some states and localities individual and family plans offering maternity coverage may not be available to all individuals who want to purchase it
- In certain states maternity coverage is mandated for all individually-purchased major medical plan

Premiums and Deductibles for Individual and Family HSA-eligible Plans: February 2011

Individual Plans			Family Plans		
	Avg. monthly premium	Avg. deductible	Avg. monthly premium	Avg. deductible	Average members per plan
HSA-eligible	\$177	\$3,567	\$389	\$5,685	3.21
Non-HSA	\$185	\$2,810	\$420	\$3,398	2.95
Overall	\$183	\$2,935	\$414	\$3,879	3.00

- HSA-eligible plan policyholders in February 2011 paid an average of \$8 less in monthly premiums for individuals, or \$31 less per month for families
- Annual deductibles for HSA-eligible plans in February 2011 were \$757 more expensive on average compared to non-HSA plans for individuals; and \$2,287 more expensive on average compared to non-HSA plans for families
- Between February 2010 (see eHealthInsurance's 2010 Fall Cost Update) and February 2011 the average premium for HSA-eligible plans increased 14.2% for individuals and 10.5% for families
- Between February 2010 and February 2011, the average premium for non-HSA plans increased 8.9% for individuals and 4.2% for families

Age Distribution of HSA-eligible Plans: February 2011

Age of primary policy holder	% of overall HSA-eligible plans
Less than 18	0%
18-24	6%
25-34	27%
35-44	25%
45-54	24%
55-64	19%

- The average age of an HSA-eligible plan policyholder was 42 years old

Media Contacts

For information, analysis, or commentary on this report, please contact eHealthInsurance Media and Government Relations

Media Inquiries:

Brian Mast, Vice President of Communications
(650) 210-3149
brian.mast@ehealth.com

Nate Purpura, Director of PR and Communications
(650) 210-3115
nate.purpura@ehealth.com

Gov't/Policy-related Inquiries:

John Desser, VP Public Policy and Government Affairs
(202) 626-8573

Methodology Supplement

The 2011 plan data referred to in this report is derived from a sample that includes the following number of individual and family major medical policies purchased through eHealthInsurance that were active in February 2011:

- Individual plans: approximately 280,000
- Family plans: approximately 104,000
- Children's Plans: approximately 18,000 (the number of children's plans surveyed is a subset of the number of individual plans surveyed)
- Lifetime limit: approximately 360,000 (plans that did not indicate a lifetime limit were excluded from this sample)

The 2010 plan data referred to in this report is derived from a sample that includes the following number of individual and family major medical policies purchased through eHealthInsurance that were active in February 2010:

- Individual plans: approximately 288,000
- Family plans: approximately 96,000

2009 plan data referred to in this report is derived from a sample which includes the following number of individual and family major medical policies purchased through eHealthInsurance that were active in February 2009:

- Individual plans: approximately 233,000
- Family plans: approximately 84,000

The premium data in this report is derived from information received from health insurance carriers relating to the actual premiums being paid by policyholders in the months of February 2009, February 2010, and February 2011. Actual premiums may differ from premiums quoted on the eHealthInsurance website because they represent the premium being paid after underwriting, and for policies that were purchased prior to the date of analysis.

The number of policies listed above does not represent all of the individual and family major medical policies purchased through eHealthInsurance that were active during the stated time period. For example, some policies for which eHealthInsurance did not have sufficient benefit or premium data were excluded from the survey. Plan data listed in this report might change based on additional data received from health insurance carriers at a date later than the active date of the data or later than the published date of this report.

2011 costs referred toState by state data in this report exclude data from the states of Hawaii, Maine, Rhode Island and Vermont. These states were excluded from the data reported because eHealthInsurance had fewer than 100 active policies in effect in these states in as of February 2011.

2010 costs referred to in this report excluded data from the states of Maine, Rhode Island and Vermont because eHealthInsurance had fewer than 100 active policies in effect in these states as of February 2010.

2009 costs referred to in this report excluded data from the states of Hawaii, Maine, Massachusetts, North Dakota, Rhode Island and Vermont because eHealthInsurance has fewer than 100 active policies in effect in these states as of February 2009.

Deductibles were determined by reviewing the health insurance carrier's brochure and related plan documents for each plan included in the survey.

The data referred to in this report is an aggregation of data reported to eHealthInsurance by health insurance carriers with which eHealthInsurance has an agency relationship. Inaccurate data reported by these health insurance carriers might affect the accuracy of this report.

In calculating February 2011 benefit data for this report, approximately 25,000 of the total 384,000 Individual and Family plans reviewed in this report were excluded due to lack of benefit data available.

Product type estimates are based on a sample of approximately 32,500 policies in effect as of February 2011, a subset of the total policies used in generating this report.

Definitions:

An “active” policy is a policy for which eHealthInsurance received a commission payment from the insurance carrier for the relevant month.

An “individual plan” is an individual and family major medical policy that has one member.

A “family plan” is an individual and family major medical policy that has two or more members.

A “children’s plan” is an individual and family major medical policy where the primary policyholder is younger than 18.

“Lab X-ray coverage” typically refers to any diagnostic lab test or diagnostic/therapeutic x-ray performed in support of basic health services

“Emergency room coverage” includes all services provided when a patient visits an emergency room for an emergency condition.

“Prescription coverage” varies by carrier and plan type. Typically, prescription drugs are covered in one of the two ways below:

- Insurance covers a percentage after plan deductible is met.
- Insurance covers cost of the drug but a copay is required with prescription.

“Chiropractic coverage” includes services provided by a licensed chiropractor. Definitions of certain terms may vary across insurance companies.

“Maternity coverage” means the insurance covers part or all of the medical cost during a woman’s pregnancy.

“OB/GYN coverage” means that the policy covers an outpatient visit to a physician’s office for an Obstetrics/ Gynecology exam such as a PAP or mammogram.

“Periodic exam coverage” means that the policy covers an outpatient visit to a physician’s office for an annual physical.

“Well baby coverage” means that the policy covers regularly scheduled, preventive care services, including immunizations, provided to children up to an age specified by a health insurance company or mandated by a government agency.

In calculating February 2011 benefit data for this report, approximately 25,000 of the total 384,000 Individual and Family plans reviewed in this report were excluded due to lack of benefit data available.

Product type estimates are based on a sample of approximately 32,500 policies in effect as of February 2011, a subset of the total policies used in generating this report.