Health Insurance Index Report for the 2019 Open Enrollment Period

July 2019
Overview: A Focus on Unsubsidized Consumers

The nationwide open enrollment period for 2019 coverage under the Affordable Care Act (ACA) began November 1, 2018 and continued through December 15, 2018.

As reported by the Centers for Medicare and Medicare Services (CMS) for this period, $87 per month was the average individual premium after subsidies were applied for consumers enrolling through Healthcare.gov. Eighty-seven percent of Healthcare.gov customers received subsidies.

As demonstrated in this report, costs borne by the unsubsidized were significantly greater. At eHealth during the fourth quarter of 2018, which included the ACA's 2019 open enrollment period, 64% of applications were for consumers purchasing ACA-compliant plans not eligible for use with subsidies.

The present report provides a snapshot of costs and trends during the 2019 open enrollment period at eHealth among this population of unsubsidized health insurance consumers. eHealth is one of the few organizations to publish consumer costs and trends among ACA market consumers who earn too much per year to qualify for government subsidies to help cover the cost of their insurance premiums and out-of-pocket costs.
Executive Summary

Health insurance costs for unsubsidized families hit new milestones:

- Average premiums for two-person families broke $1,000 per month for the first time in 2019.
- Total combined annual premiums plus deductible for a four-person family now tops $25,000.

Deductibles marked their first significant decline since the ACA took effect:

- The average individual deductible decreased 6% for 2019.
- The average family deductible decreased 8% for 2019.

Plan selection trends for 2019 show:

- HMO plans continue to dominate the market, representing 56% of all plan selections, the same as in 2018.
- EPO plans reach 26% of all plan selections, up from 20% in 2018.
- Silver plans reach 35% of all plan selections, up from 30% in 2018.
Costs and Trends for

Individual Coverage
Premiums increased modestly between 2018 and 2019

- $448 was the average monthly premium for individual plans selected by eHealth customers for the 2019 plan year.
- Between 2018 and 2019, the average individual premium increased 2%.
- Since the ACA’s first open enrollment period (for 2014 coverage), the average individual premium has increased 65%.
Women pick plans with higher premiums than men*

• $431 was the average individual premium for 2019 for plans selected by men, an increase of 3% from the year before.

• $465 was the average individual premium for 2019 plans selected by women, an increase of 1 percent from the year before.

• Since 2014, premiums for plans selected by women have averaged 7 percent higher than those selected by men.

*Gender and premiums: The ACA prevents health insurance companies from charging women more than men for coverage under the same plan. The divergence in average premiums by gender shown above reflects a tendency among women to select plans with higher monthly premiums than men. This trend has been consistent since the 2014 open enrollment period.
Policy holders age 55-64 pay $520 more per month on average than people age 18-24

- $799 was the average monthly premium for individuals age 55 to 64.
- $279 was the average premium for individuals age 18 to 24.
- $404 was the average premium for individuals age 35 to 44.
- The average premium for individuals age 55 to 64 was 186% higher than the average premium for people age 18 to 24.

*Age and premiums: ACA rules allow rating based on age (and other factors) up to a 3:1 ratio, so that older consumers may be charged up to three times the amount younger consumers are charged for the same plan.
Premiums drop year over year for Platinum, Silver, and Catastrophic* plans

- The gap in average individual premiums for Bronze plans and Silver plans was 9% ($440 vs. $481) for 2019 coverage.
- The gap between Silver and Bronze plan premiums diminished in recent years:
  - Silver plans were 27% higher than Bronze plans in 2014, but only 9% higher in 2019.

*Catastrophic plans: Under ACA rules, catastrophic plans are typically only available to people under age 30.

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HMO plan premiums increased 3% for 2019

• $443 was the average individual monthly premium for HMOs in 2019, 3% higher than 2018.

• PPO premiums averaged $512 per month in 2019, 16% higher than HMOs

• EPO premiums averaged $412 per month in 2019, 7% lower than HMOs.
2019 marked the first significant drop in average individual premiums

- The average annual deductible for individual plans decreased 6% between the 2018 and 2019 open enrollment period.

- The average annual deductible for 2019 is only 4 percent higher than it was in 2014.
Costs and Trends for Family Coverage
Average family* premiums drop year over year but are still over $1,000 per month

- The average premium for family coverage decreased 1 percent between the 2018 and 2019 open enrollment periods (from $1,168 to $1,154).

- The average monthly premium for family coverage has increased 73 percent since the ACA’s first open enrollment period for 2014 ($667 vs. $1,154).

*On family coverage: Unless otherwise stated, “family coverage” in this report refers to policies covering two or more people.
Two-person family premiums exceed $1,000 for the first time

- The average monthly premium for two-person families was $1,002.
- Four-person families paid an average monthly premium of $1,403.
- Average annual premiums exceed $12,000 for families of two ($12,024); families of four pay an average annual premium of $16,836.

**Deductibles by family size:** The average annual deductible in 2019 was $7,925 for two-person families and $8,441 for four-person families.

**Total cost for 4-person families tops $25,000:** Over the course of a year, a four-person family that obtains medical care requiring them to meet their deductible will pay an average of $25,277 in combined premiums and deductible.
Average family coverage premiums decline for most metal levels

- Between 2018 and 2019:
  - Platinum plan premiums declined 14%.
  - Gold plan premiums declined 1%.
  - Silver plan premiums declined 6%.
  - Bronze plan premiums increased 2%.

### Average family premium by metal level

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2019 marked the first significant drop in average family deductibles

• Between 2018 and 2019, the average annual deductible for family plans dropped 8 percent (from $8,803 to $8,071).

• Average family plan annual deductibles for 2019 are 4 percent higher than in 2014 ($7,771).
Additional

Plan Selection Trends
Popularity of Silver plans continues to increase while Bronze declines

- Silver plans accounted for more than one third (35%) of all plans selected during the 2019 open enrollment period, a 5 point increase over 2018 and 14 point jump since 2014.

- Bronze plans accounted for more than 41% of all plans selected during the 2019 open enrollment period, compared to 43% for 2018 and 47% for 2014.

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Decline in the HSA-eligible health insurance plans: 23% of plans selected by eHealth shoppers during the 2019 open enrollment period were eligible for use with a Health Savings Account, compared to 27% the year prior.

Premiums are 6% higher for HSA-eligible plans: For 2019, individual HSA-eligible plans had an average monthly premium of $462 while plans not eligible for use with an HSA had an average premium of $434.
HMO plans continue to dominate the ACA market while EPO plans increase market share

- HMOs accounted for 56% of all plans selected during the 2019 open enrollment period, representing no change from 2018.
- PPOs accounted for 16% of all 2019 plans, compared to 22% the year before.
- EPO plans accounted for more than a quarter (26%) of all 2019 plans, compared to 20% the year before.

On plan type availability: It should be understood that changes in plan type selections between the 2014 and 2019 open enrollment periods were likely driven in part by changes in the prevalence of plan types offered by insurers. According to Avalere, HMOs accounted for 53% of all exchange plans in 2019, while PPO plans accounted for 21% and EPO plans accounted for 19%.
Methodology Note

eHealth’s Health Insurance Price Index Report for the 2019 Open Enrollment Period examines shopping trends and costs for plans selected by unsubsidized consumers visiting eHealth’s website between November 1, 2018 and December 15, 2018. eHealth is one of the few organizations with national health insurance data from multiple insurance carriers that broadly reflects consumer buying patterns and costs in the unsubsidized individual and family health insurance market.

Information presented in this report is based solely on rates quoted for health insurance applications submitted by unsubsidized consumers through the company’s website, eHealth.com, in the specified time period. It does not offer a comprehensive view of costs for all plans available, whether through eHealth, through government exchanges, through private exchanges other than eHealth, or directly from insurance carriers.

Data collected and presented in this report is based on over 7,000 unsubsidized individual and family health insurance applications submitted through eHealth.com between November 1, 2018 and December 15, 2018. Comparisons are drawn between consumer selections during prior open enrollment periods and plan years based on data previously published by eHealth.

Although eHealth was able to facilitate subsidy applications and enroll qualifying consumers in subsidy-eligible plans in many states during open enrollment periods between the 2014 and 2019 open enrollment periods, information from these customers is not included in this report.

Dollar figures in the report have been rounded to the nearest full dollar. Percentages have been rounded to the nearest full percentage point and may add to slightly less or more than 100% due to rounding. Premium and deductible and metal level data given in this report are based on information provided by the insurance carriers to eHealth.

Not all submitted applications result in an enrollment. It is possible for an applicant to withdraw his or her request for coverage after submitting an application, or for an application to be declined for certain reasons. In addition, some applicants may choose to cancel a plan even after their application has been approved and they have been enrolled. No financial data relevant to eHealth’s business should be drawn from this report.

The average national premiums and additional data included in this report are based on individual and family health insurance applications submitted through eHealth (and not involving government exchanges) for the period noted. Certain applications missing key data fields relevant to the report may have been removed from the sample.

Average costs published in this report present a snapshot of national average health insurance premiums based solely on the behavior of eHealth’s unsubsidized, off-exchange customers, and do not necessarily represent the average costs of all individual or family health insurance plans purchased across the country through all sources.

In order to provide a more representative snapshot of costs and trends, ACA plan data from the state of Ohio for the 2019 plan year have been excluded from this report due to the exceptional nature of products sold in that state by eHealth during the 2019 open enrollment period.

The analysis presented in this report is based solely on health insurance plans offered and applied for through eHealth.com. Results may not reflect the full scope of all individual and family health insurance products on a national basis or that are available within a given state. Each individual’s or family’s health insurance premium is based on many factors, including but not limited to geography, age, type of plan, individual plan benefits chosen, and others that may not be fully reflected in this report.
eHealth, Inc. (NASDAQ: EHTH) owns eHealth.com, a leading private online health insurance exchange where individuals, families and small businesses can compare health insurance products from brand-name insurers side by side and purchase and enroll in coverage online and over the phone. eHealth offers thousands of individual, family and small business health plans underwritten by many of the nation’s leading health insurance companies. eHealth (through its subsidiaries) is licensed to sell health insurance in all 50 states and the District of Columbia. eHealth also offers educational resources, exceptional telephonic support, and powerful online and pharmacy-based tools to help Medicare beneficiaries navigate Medicare health insurance options, choose the right plan and enroll in select plans online or over the phone through Medicare.com (www.Medicare.com), eHealthMedicare.com (www.eHealthMedicare.com), GoMedigap (www.goMedigap.com) and PlanPrescriber.com (www.PlanPrescriber.com).