



# HAS COMMUNITY RATING BEEN OPTIMAL?

Taurayi Chinowona

Momentum Group

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# What is Optimal?

- Classical Economic Efficiency
- Pareto Optimality
- Size of membership

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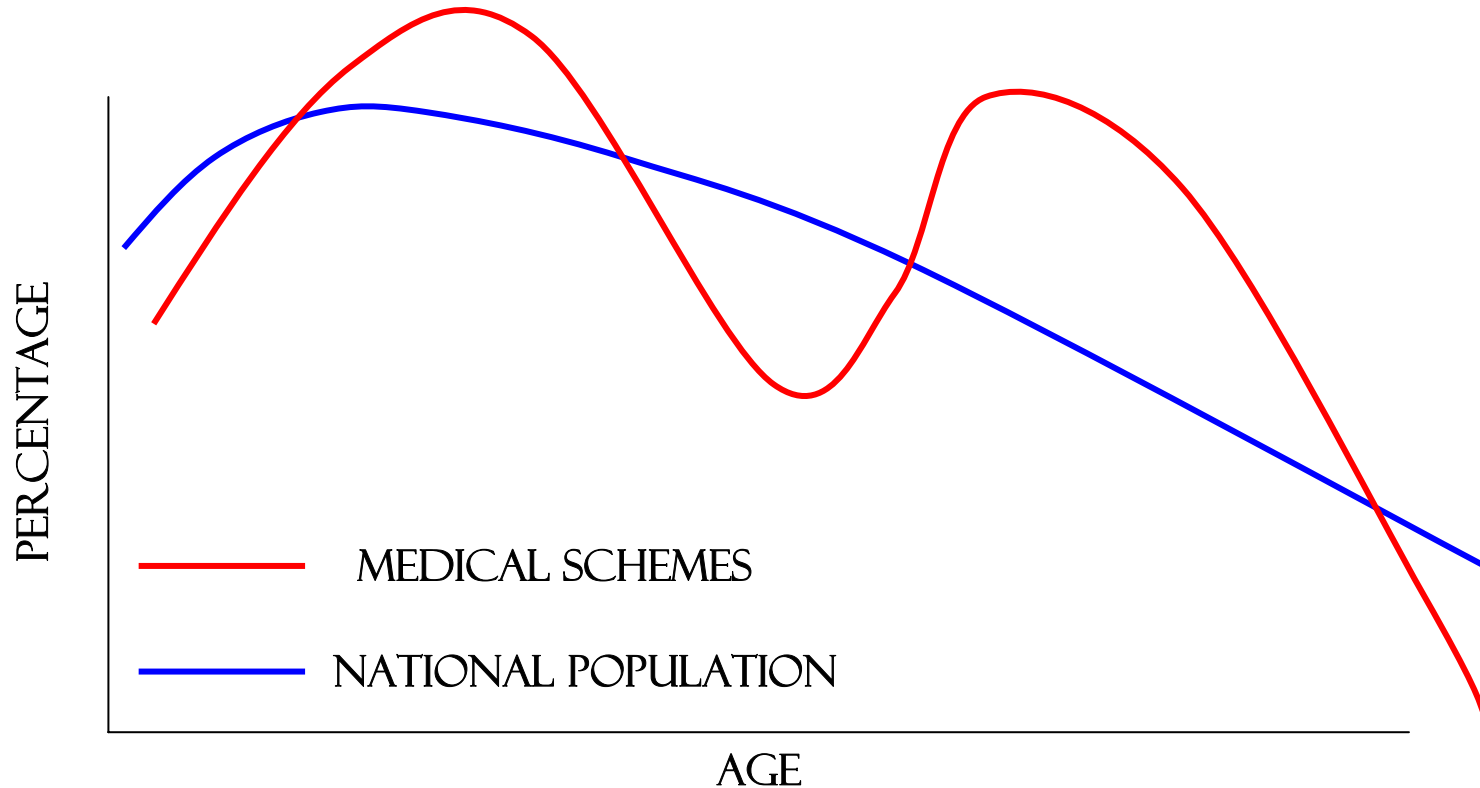
# Agenda slides look like this

1. Economic Efficiency of Community-rated Market
2. Pareto efficiency
3. Results from simulations
4. Estimates of medical insurance price elasticity
5. Merits of normative case for community rating

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# Age Distributions



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# Price Structure and Economic Efficiency

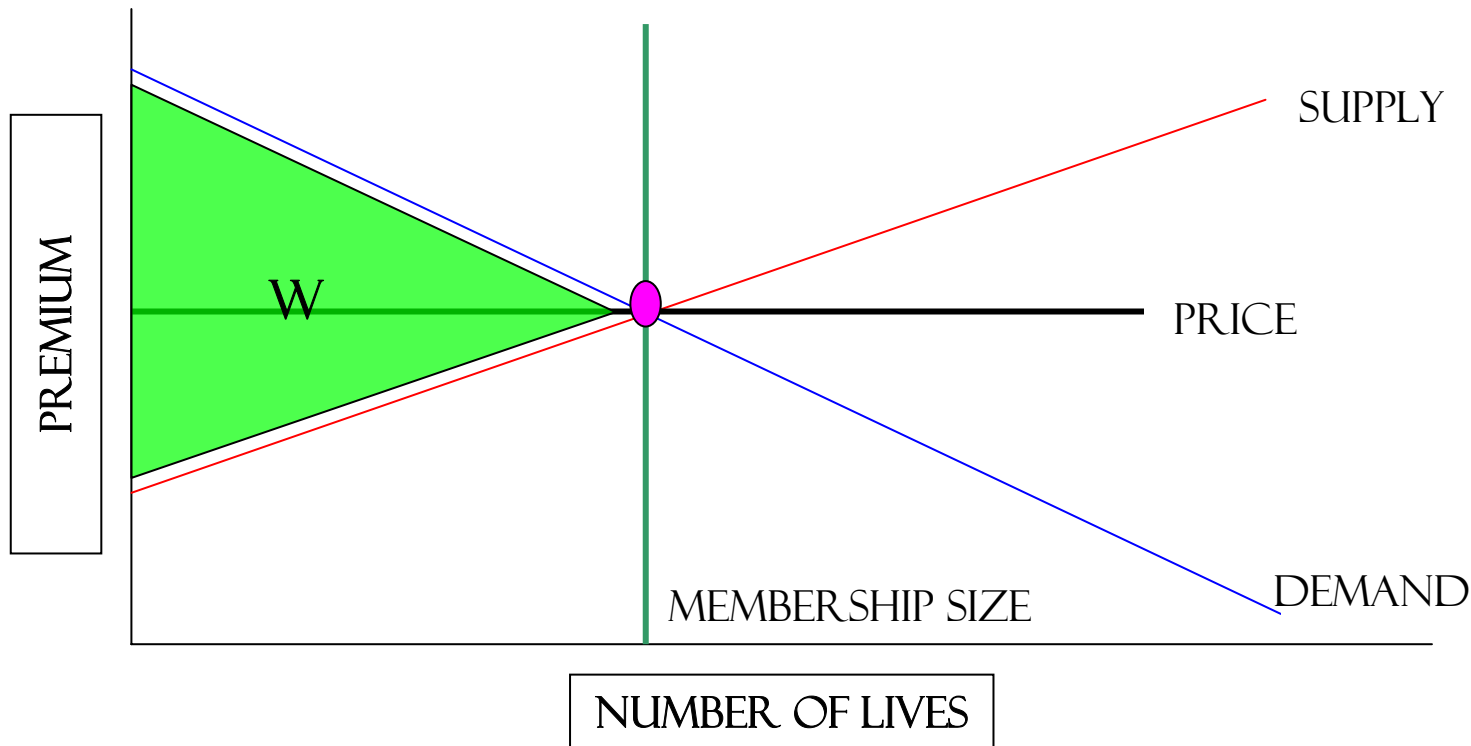
- Price discrimination vs Uniform prices
  - Uniform prices are not efficient unless individuals' preferences are identical
  - Especially if cost of supply is non-uniform
  - Welfare is optimised when prices are discriminatory
  - Generally such markets cannot be in equilibrium due to secondary market arbitrage
  - Goods that do not have secondary markets can be in equilibrium under price discrimination

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# Price Structure and Economic Efficiency

- YOUNGER MEMBERS

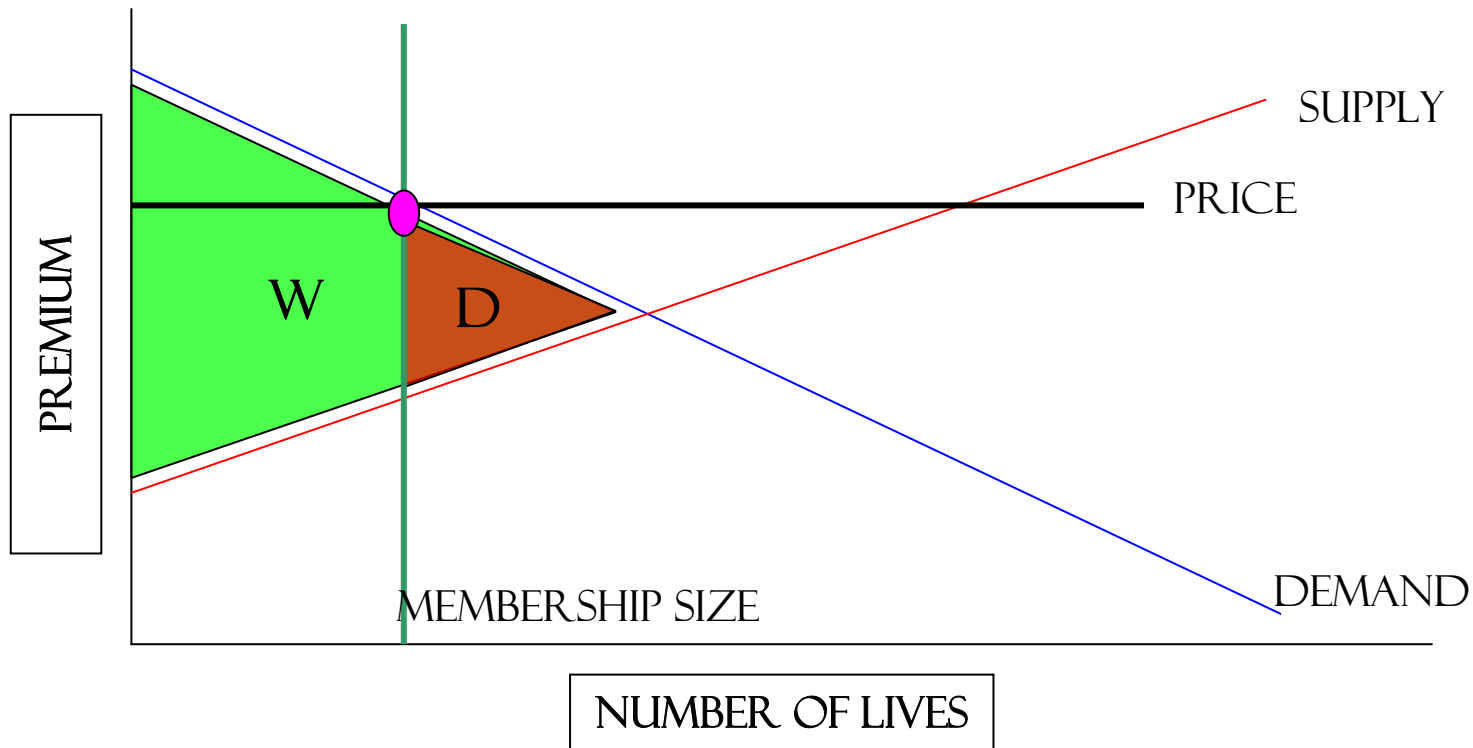


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# Price Structure and Economic Efficiency

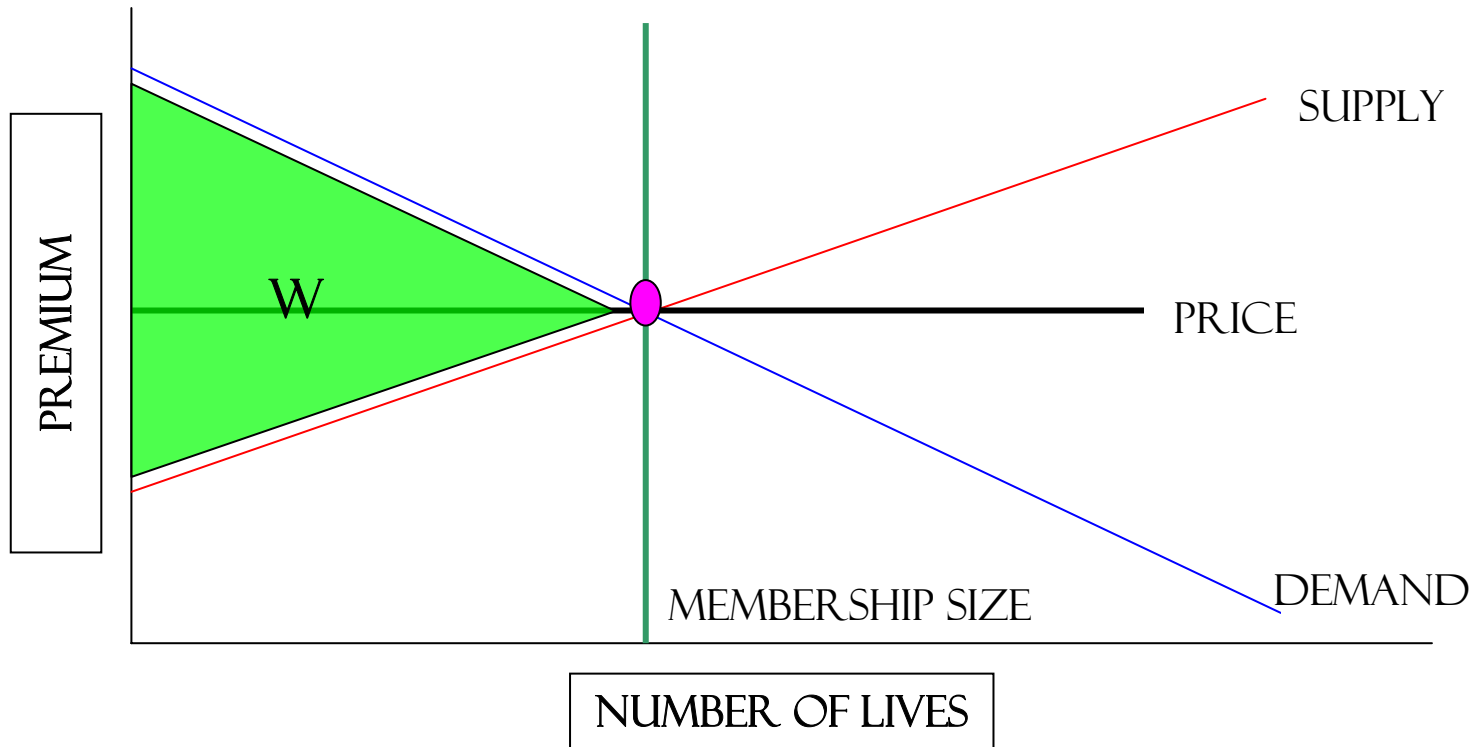
- YOUNGER MEMBERS



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# Price Structure and Economic Efficiency

- OLDER MEMBERS

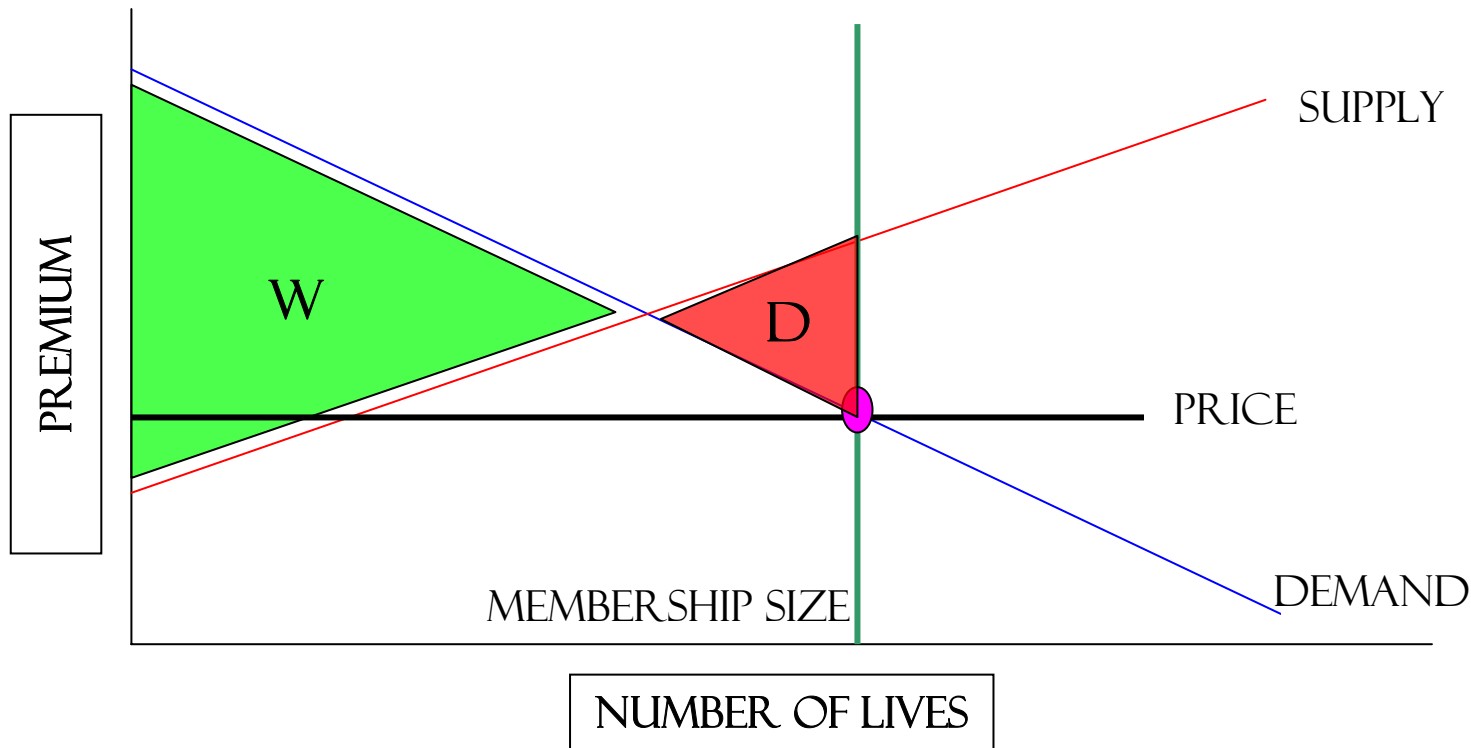


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# Price Structure and Economic Efficiency

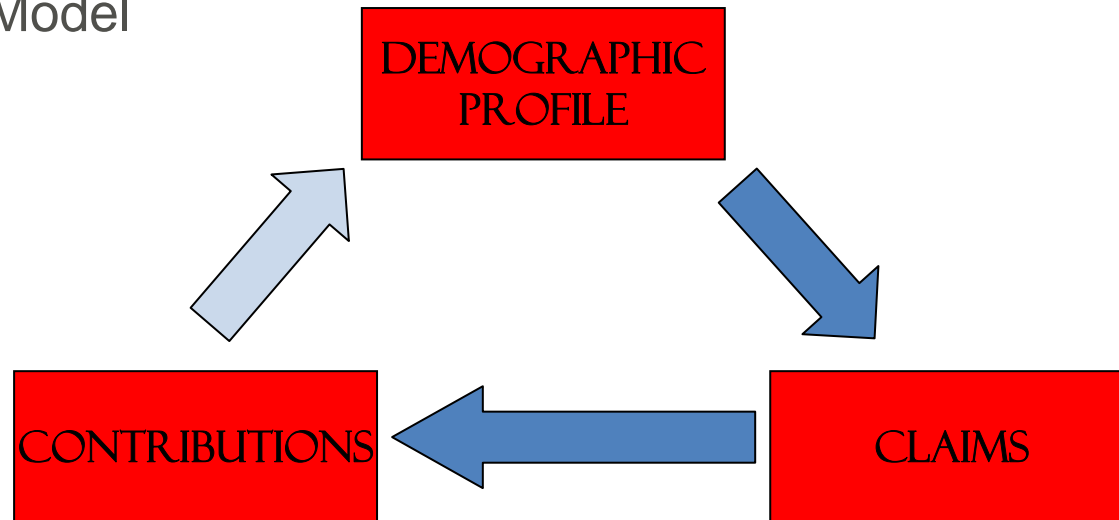
- OLDER MEMBERS



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# Simulating the market

- The Model

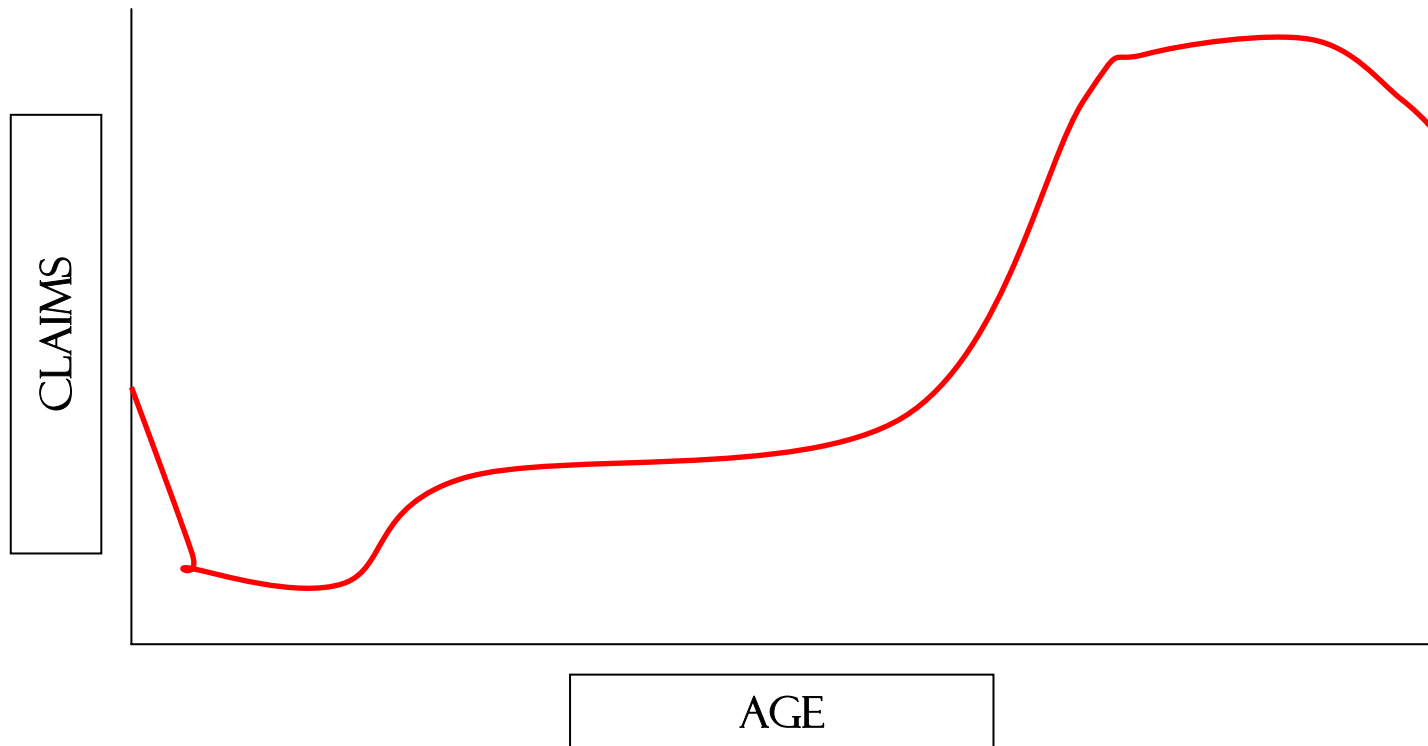


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# Simulating The Market

- Claims vs Age



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# Simulating the market

- The Model
  - The only unknown in the model is the price elasticity of demand, upon which the relationship between contributions and demographic profile depends



# Simulating the market

- The Tests
  - Hypothetical medical scheme was constructed
  - Demographic profile identical to that of industry
  - Community rated premium based on average claims
  - Average claims function of demographic profile and variation of claims with age
  - Alternative contribution levels and structure applied to this model to see effect on membership and underwriting performance



# Simulating the market

- The Results
  - All uniform contribution reductions tested resulted in worse underwriting results
  - Some uniform contribution reductions at lower ages reduced average claims by more than reduction in average contributions
  - Therefore underwriting result improved
  - Can use resultant surplus to reduce contributions at higher ages
  - So status quo not Kaldor-Hicks efficient & therefore not Pareto efficient either
  - Also membership size not optimal



# Elasticity Estimates

- Methodology
  - Estimated variations in demand with price using regression analysis
  - Total contribution is proxy for quantity demanded
  - Price is contribution minus employer subsidy
  - Different employers offer different subsidy levels



# Elasticity Estimates

- Methodology
  - Controlled for age
  - Ideally should control for income
  - Controlled for medical scheme
  - Considered single lives only

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# Elasticity Estimates

- Results
  - Range of values from  $-.05$  to  $-2.5$  depending on age
  - Also dependant on coverage level
  - Elasticity highest in the 'middle-market'
  - Elasticity decreases with age



# Credibility of Elasticity Estimates

- Methodological weaknesses
  - These are estimates of price elasticity of demand with respect to level of cover, not w.r.t. decision to enrol
  - Preferences not necessarily rigid so that latter is not necessarily the limit of the former
  - Representativity of sample questionable
  - Considered single lives only, so in that respect not representative, but these lives are significant part of market
  - Income not controlled for

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# Credibility of Elasticity Estimates

- Related Literature

- Most research deals with individual firm price elasticity
- Buchmueller found elasticity estimates of around i.r.o. retirees in California who worked for the same employer in range of -0.21 to -0.37
- Other studies amongst Harvard and UC plans found higher elasticities after changes in subsidies over time
- Van Dijk et al reported individual firm elasticities of -0.1 to -0.38 in Holland
- Significantly elasticity was also higher at the lower ages
- Abraham and Voigt also found estimates in the United State in the range -0.1 to -1.54

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# Normative case for community rating

- Satisfies widely-held notions of 'social justice'
- However, at expense of certain individuals
- E.g. some low income young people subsidise wealth pensioners
- Currently lots of pensioners receive employer subsidies
- So community rating in some cases benefits employers
- In any case social programs ought to be funded from the fiscus





## FINAL WORD

*“If you think healthcare is expensive now, wait until you see what it costs when it’s free”.* P.J. O’Rourke

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