

Long-term sustainability of medical schemes

Christoff Raath

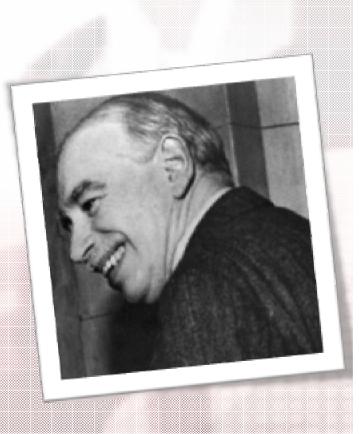
The Health Monitor Company

Background



"In the long term, we are all dead"

- John Maynard Keynes, 1923



Agenda



- 1. Background and context
- 2. Ageing inflation
- 3. Case studies
- 4. Long term valuation bases
- 5. Regulatory developments

Long-term related questions



- Is it appropriate for high-solvency schemes to temporarily dip into loss-making positions?
- Are PRMA valuation bases generally coherent with the realities of underlying schemes?
- What is an appropriate basis for the evaluation of a medical scheme amalgamation?
- What kind of (and how many) new entrants does a scheme need to ensure sustainability?
- Under which circumstances can a scheme fund future expenditure from of future contributions?



Long-term

- Traditional actuary
- 20 or more years
- Contribution increases lower than investment returns

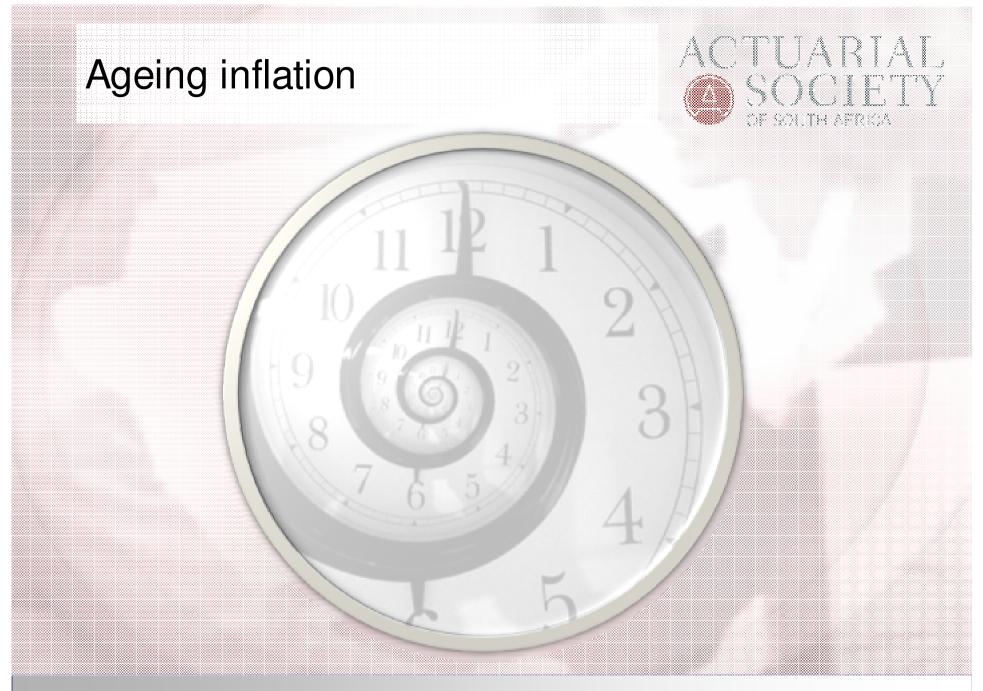
Short-term

- Regulatory emphasis
- Non-traditional actuary
- Medical scheme product design
- One to three years
- Contribution increases in excess of CPI(X)+3

Aim

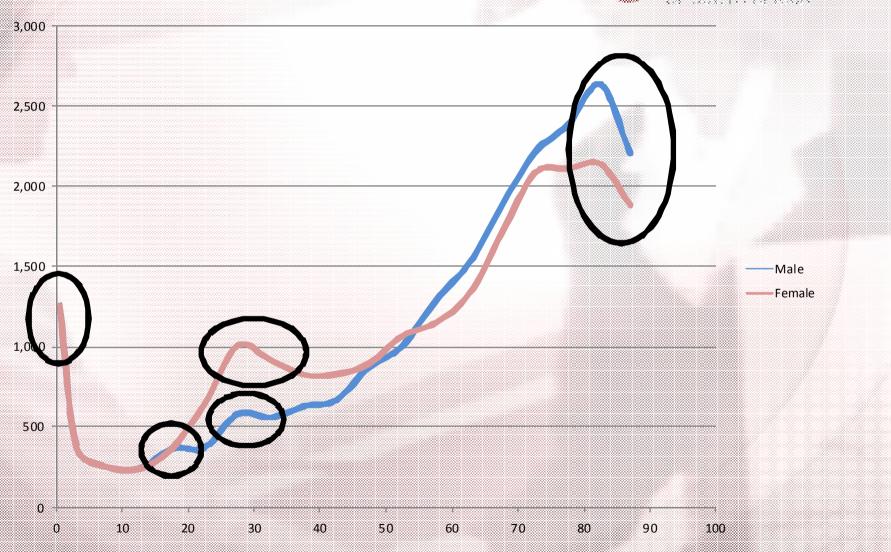


- Realistic present-day medical scheme case studies
- Determine circumstances under which sustainability is attained
 - Loss ratios
 - Contribution increases
 - Claims inflation
 - Investment return
 - New entrants
 - Mortality
 - Membership lapses



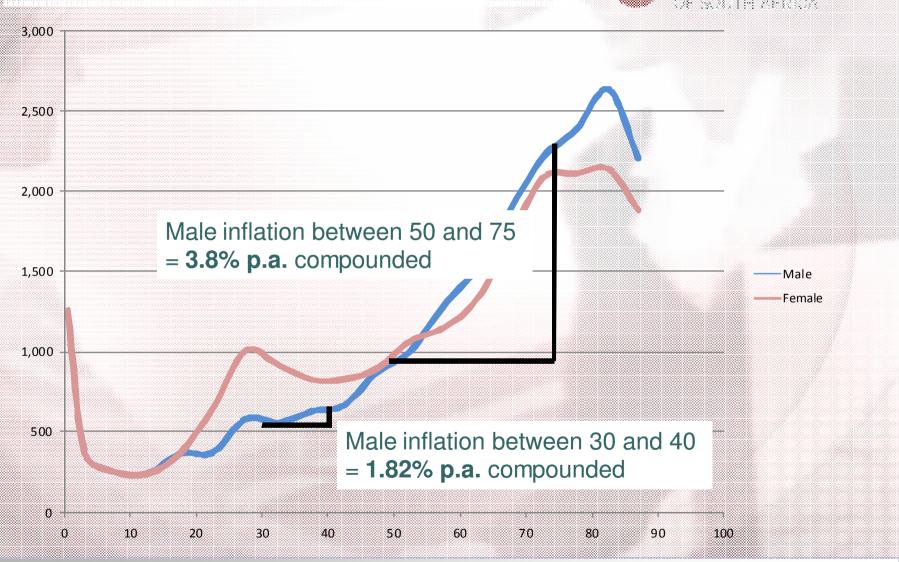
Claims curve





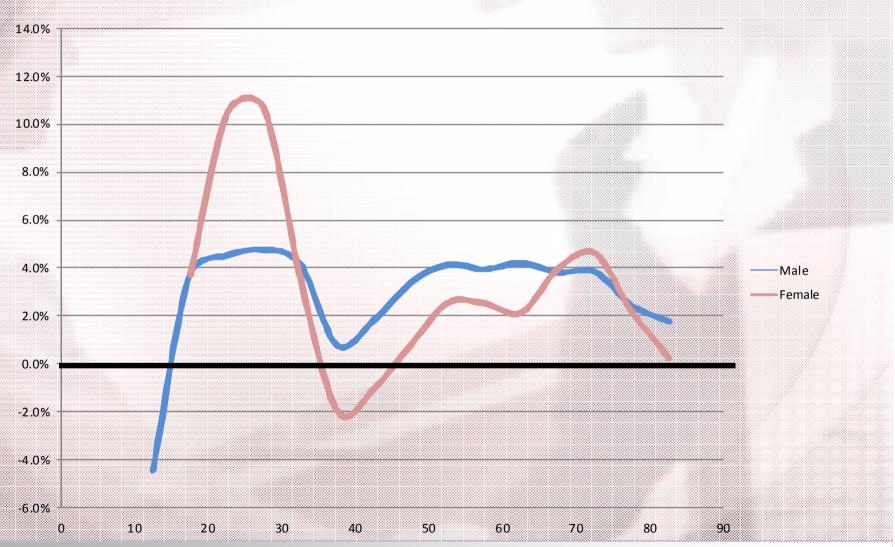






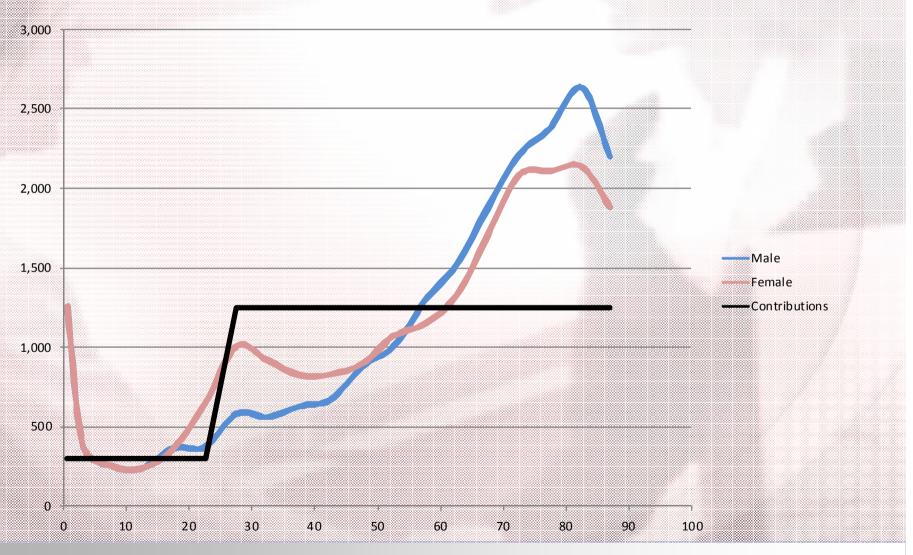
Ageing inflation





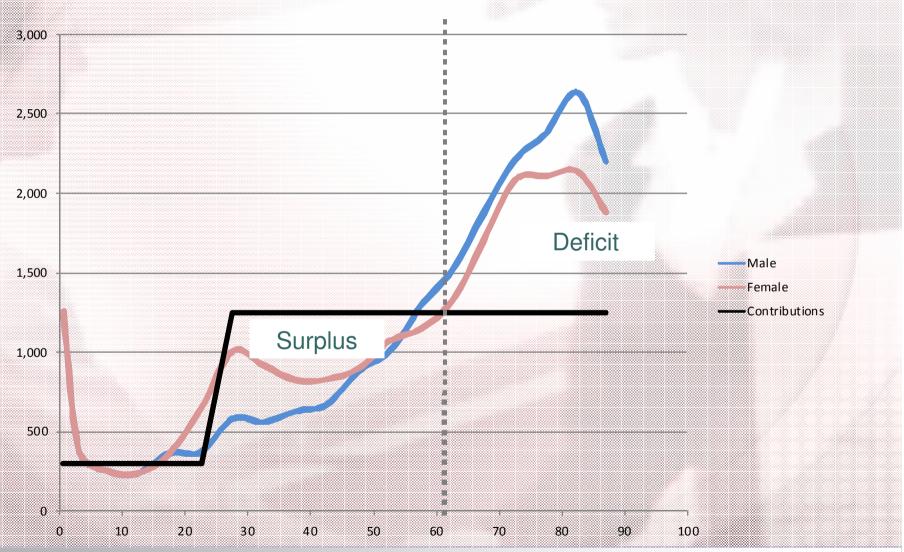
Claims vs contributions





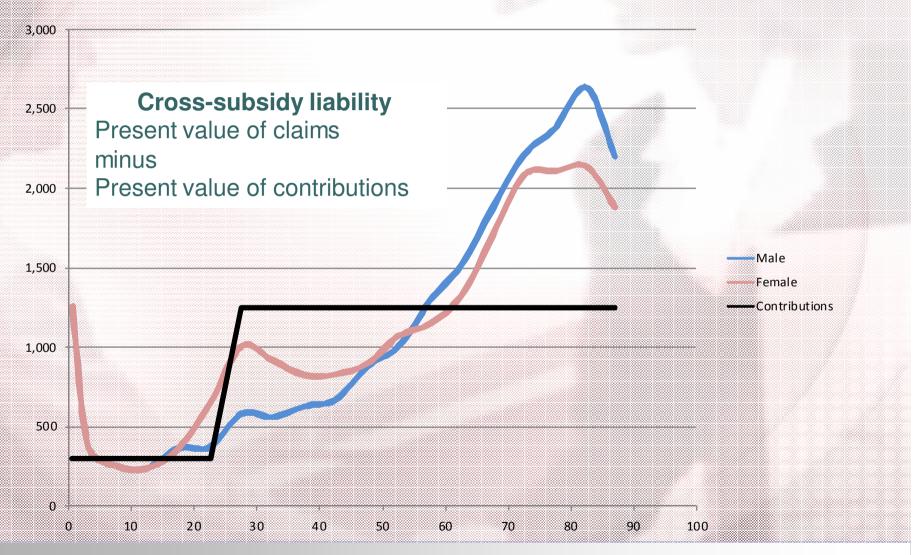






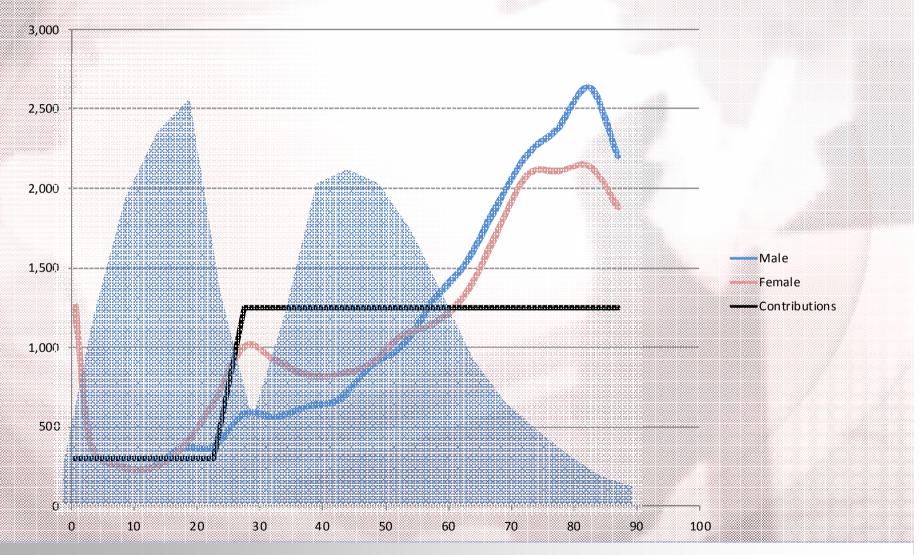
Claims vs contributions





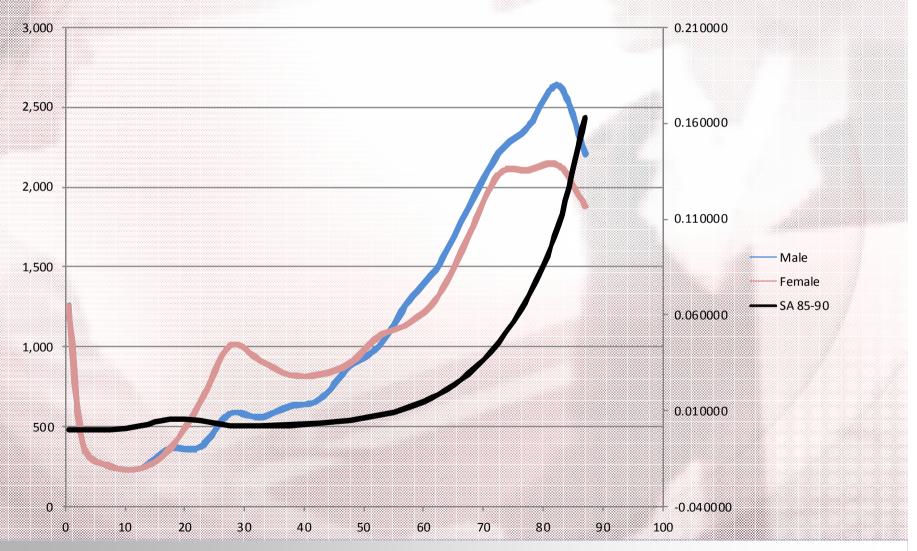
Claims vs contributions





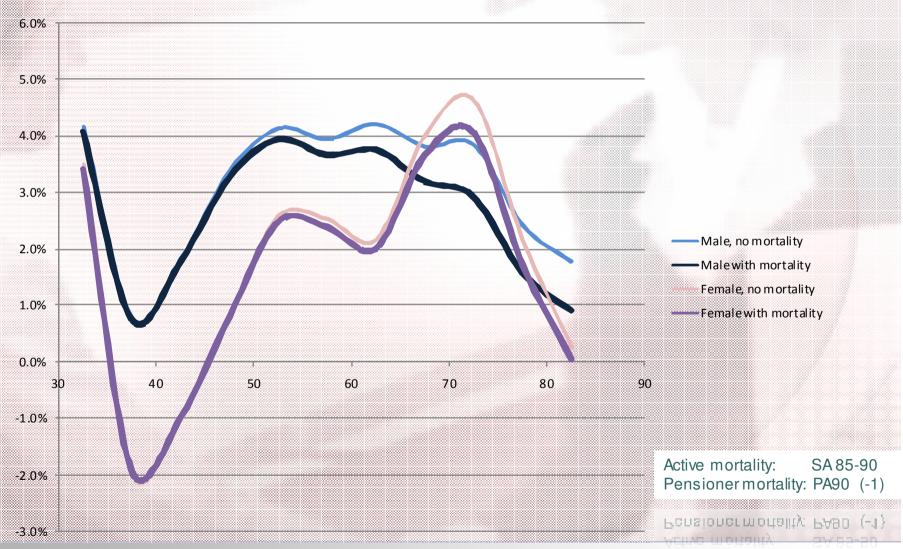
Claims curve and mortality





Mortality-adjusted ageing inflation





Model structure

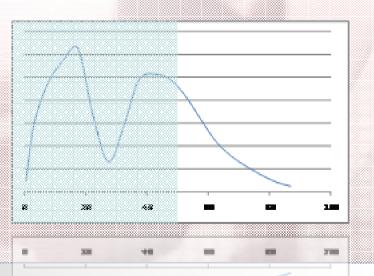
- Cash-flow projection
- Inflation
 - Contributions
 - Claims
 - Non-health
 - Investment return
- Child dependant withdrawal
 - Or conversion to principal member
- Mortality
- Lapses
- New entrants



New entrant model



- "Fold-back" of existing population onto itself
- Constant addition of new beneficiaries
- Scheme's starting profile subject to a maximum age
- Leads to a stationary population



Assumptions



Long-term inflation 6.0%

Investment return 8.5%

Claims inflation8.0%

(Inflation + margin for technology, HIV/AIDS, PMB-creep)

Non-health inflation6.0%

Contribution increases 8.0%

Allows us to assess whether *ageing* can be funded from future contributions

Assumptions



Active mortality
 SA 85-90 (-3 for females)

• Pensioner mortality PA 90 (-1)

Child dependents convert to principal members

Restricted schemes: 0%

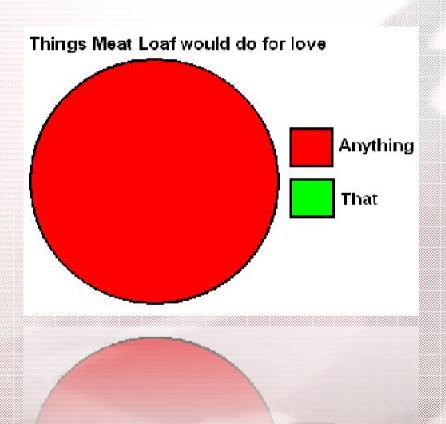
Commercial schemes: 10%

Lapse rate

0%



Case studies



Medical scheme scenarios



Scheme A

Ageing restricted scheme Loss-making
Traditional benefits

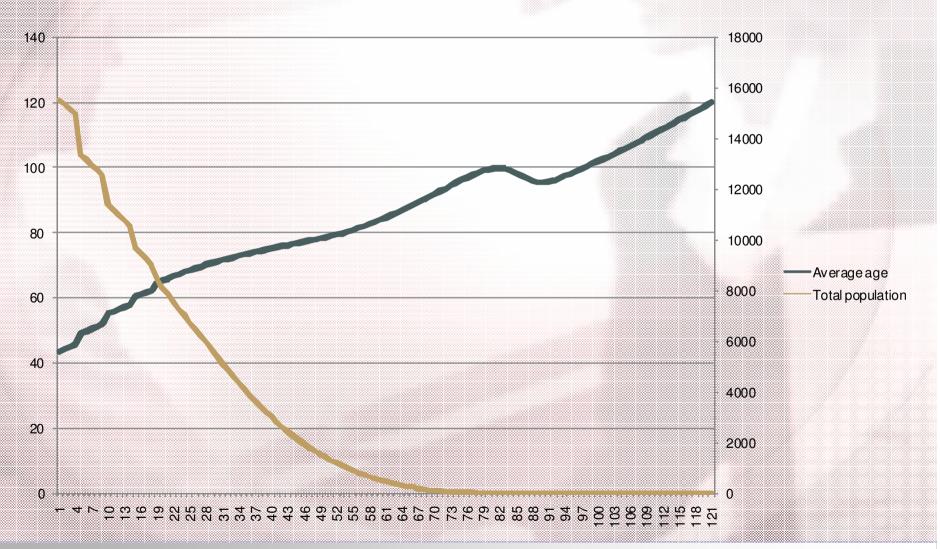
Beneficiaries	15,512
MSA%	0.0%
Start avg age	43.53
Pensionerratio	14.9%

Contribution table

Principal 1,729
Adult 1,399
Child 227

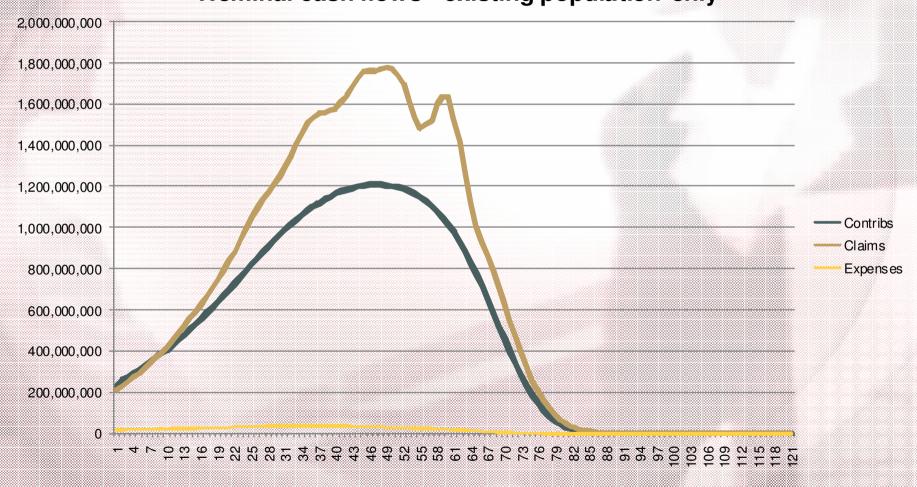
Income statement in yea	r 0	pbpm	‰tr
Gross contributions	223,153,510	1,198.82	
Net contributions	223,153,510	1,198.82	
Claims	213,692,361	1,147.99	95.8%
Gross result	9,461,149	50.83	4.2%
Expenses	19,133,367	102.79	8.6%
Net result	-9,672,219	-51.96	-4.3%





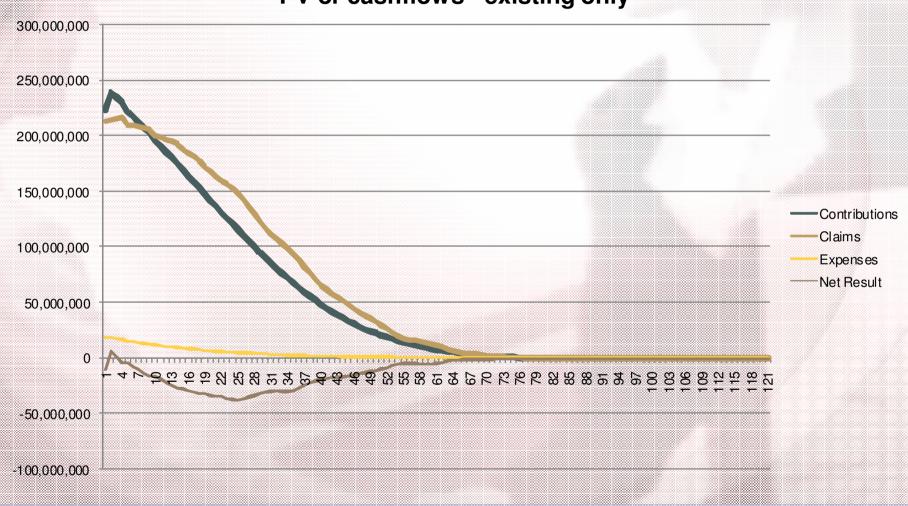


Nominal cash flows - existing population only











Existing I	mbrs
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 PV Contributions
 6,151,735,007

 PV Claims
 7,009,608,424

 PV Gross Result
 -857,873,417

 PV Expenses
 322,695,773

 PV Net Result
 -1,180,569,190

Per existing beneficiary

 PV Contributions
 396,579

 PV Claims
 451,883

 PV Gross Result
 -55,304

 PV Expenses
 20,803

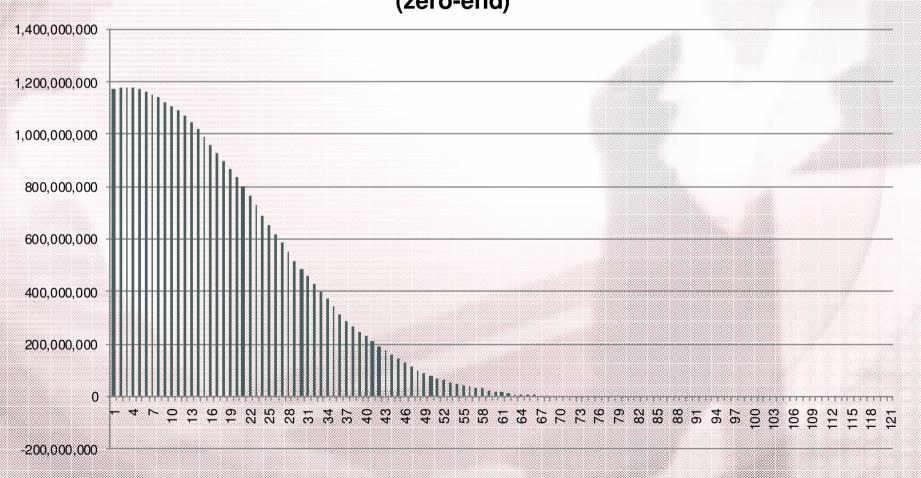
 PV Net Result
 -76,107

Reserve requirement

As a % gross ctr 529%



Reserve development in today's money terms (zero-end)





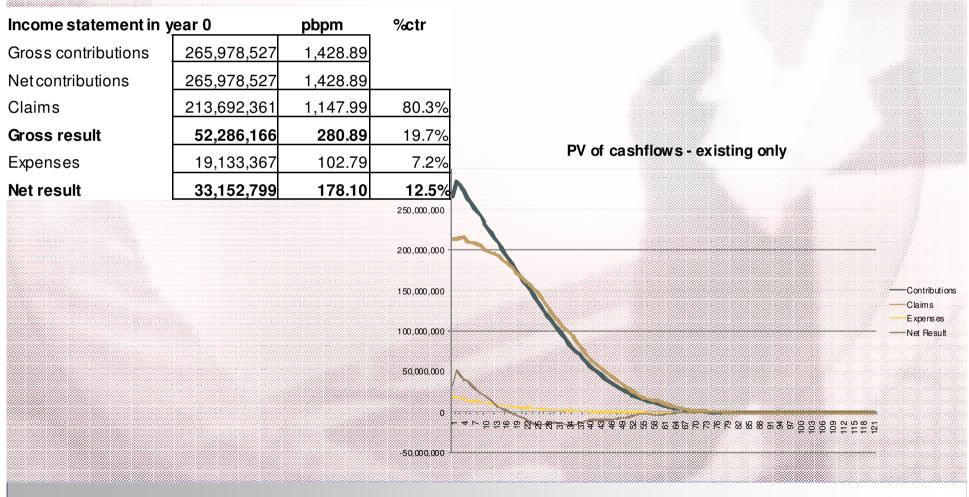
(How) can scheme A be made sustainable?



- Higher initial contributions
 - (i.e. Start off in a surplus-making position)
- Higher annual contribution increase
- New entrants



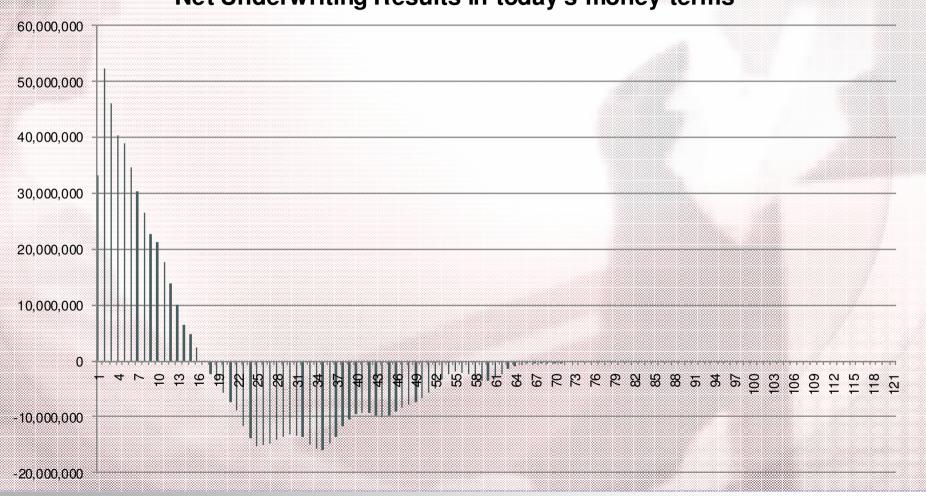
Increase initial contributions by 20%



Scheme A Initial contributions increased by 20%



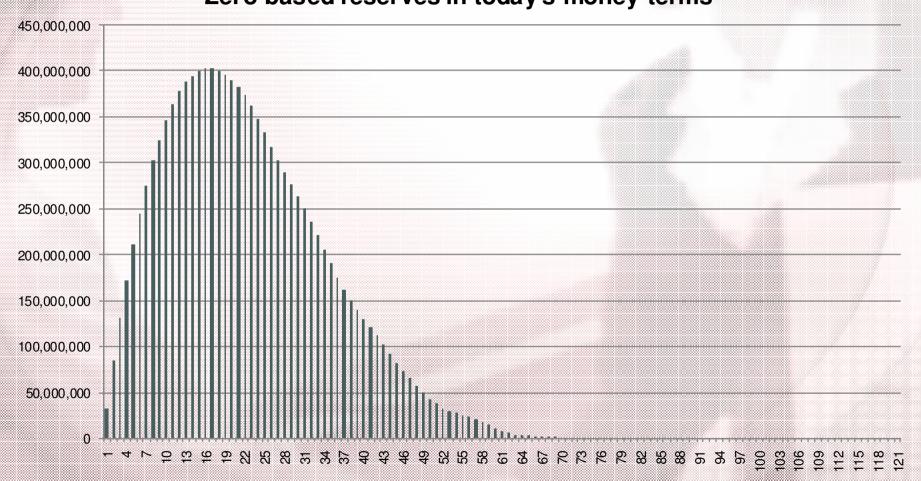
Net Underwriting Results in today's money terms



Initial contributions increased by 20%



Zero-based reserves in today's money terms





Higher initial contributions

(i.e. Start off in a surplus-making position)

- o Higher annual contribution increase
- New entrants

Higher annual contribution increase



Investment return	8.5%
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Claims inflation8.0%

Non-health inflation 6.0%

Contribution increases

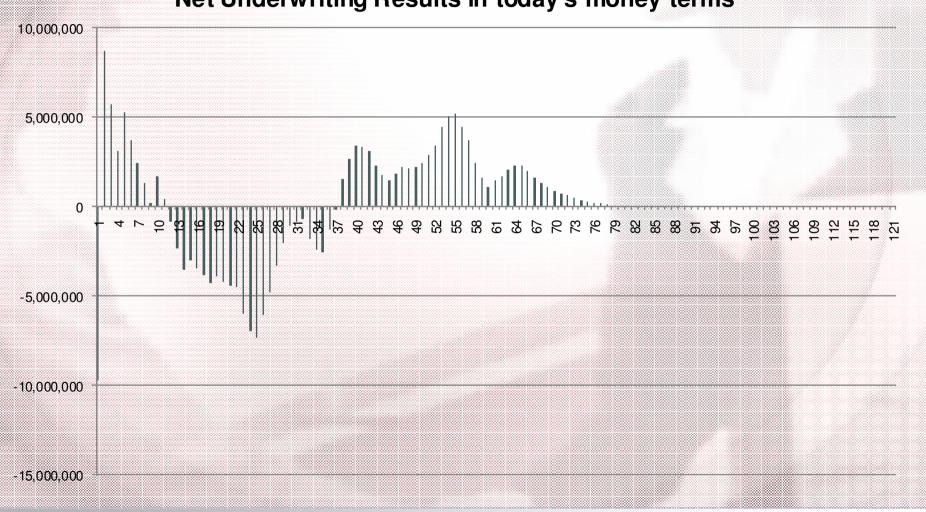
Cross-subsidiy liability
per beneficiary
Solvency ratio reg'd

8.00%	8.50%	9.00%
-1,180,569,190	-649,041,291	-42,891,229
-76,107	-41,841	-2,765
529%	291%	19%

Higher annual contribution increase



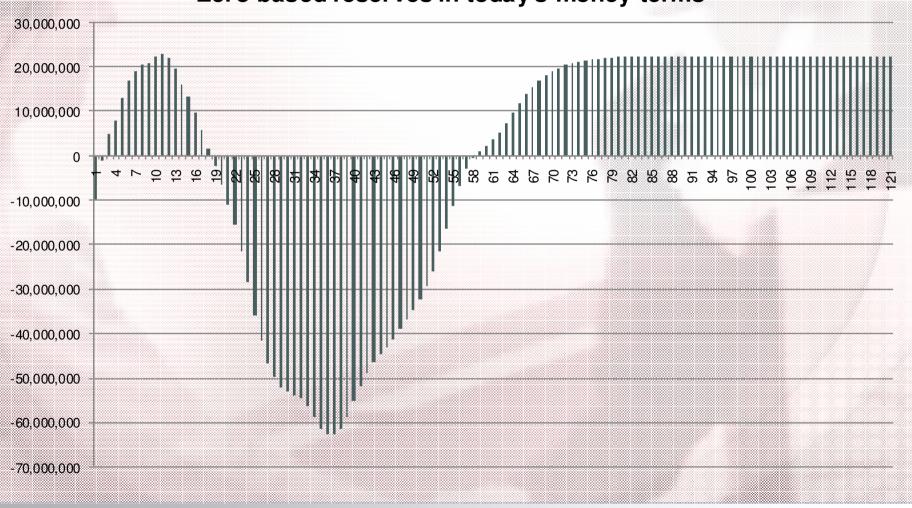
Net Underwriting Results in today's money terms



Higher annual contribution increase



Zero-based reserves in today's money terms





Higher initial contributions

(i.e. Start off in a surplus-making position)

- Higher annual contribution increase
- o New entrants

Add new entrants



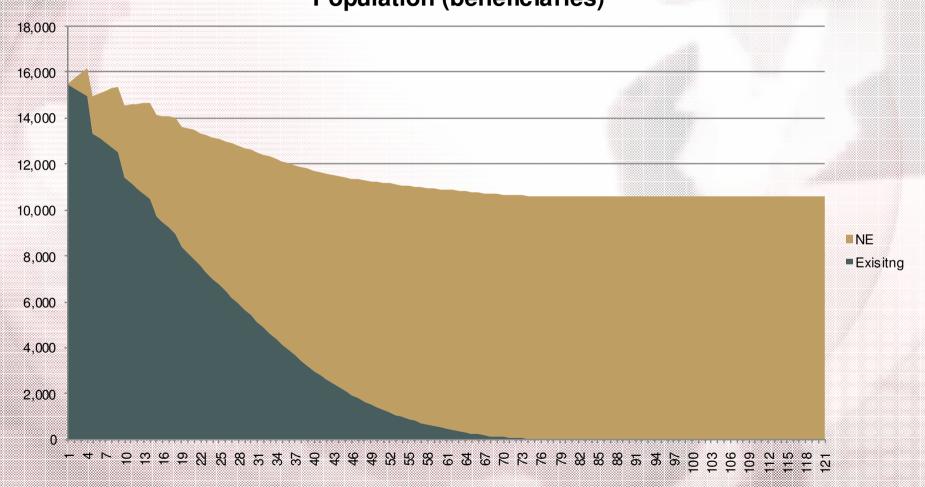
- Requires simple growth rate of 2.6%
 (402 beneficiaries per year)
- With a NE average age of 22.4 years

	Existing	New Entrants	Total
PV Contributions	6,151,735,007	12,272,135,423	18,423,870,430
PV Claims	7,009,608,424	10,760,611,072	17,770,219,496
PV Gross Result	-857,873,417	1,511,524,351	653,650,934
PV Expenses	322,695,773	328,591,239	651,287,012
PV Net Result	-1,180,569,190	1,182,933,112	2,363,922

Scheme A Add new entrants



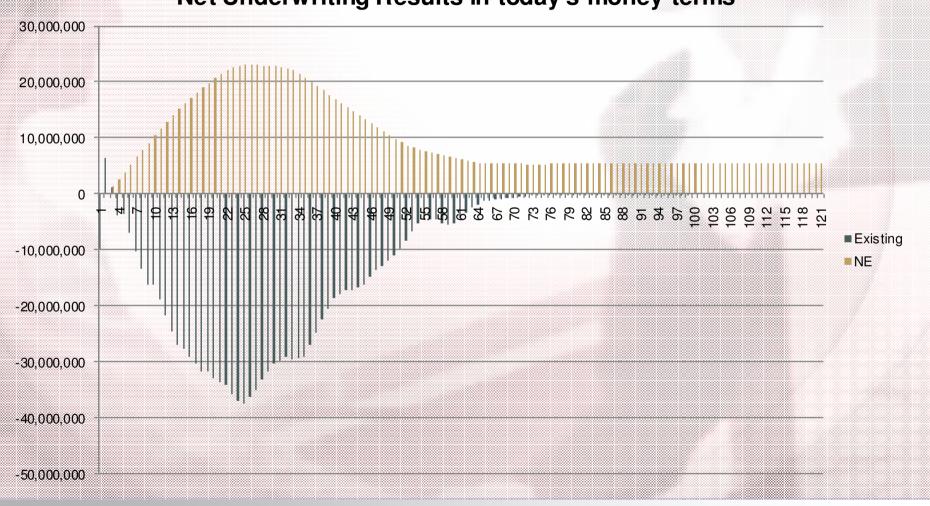
Population (beneficiaries)



Scheme A Add new entrants



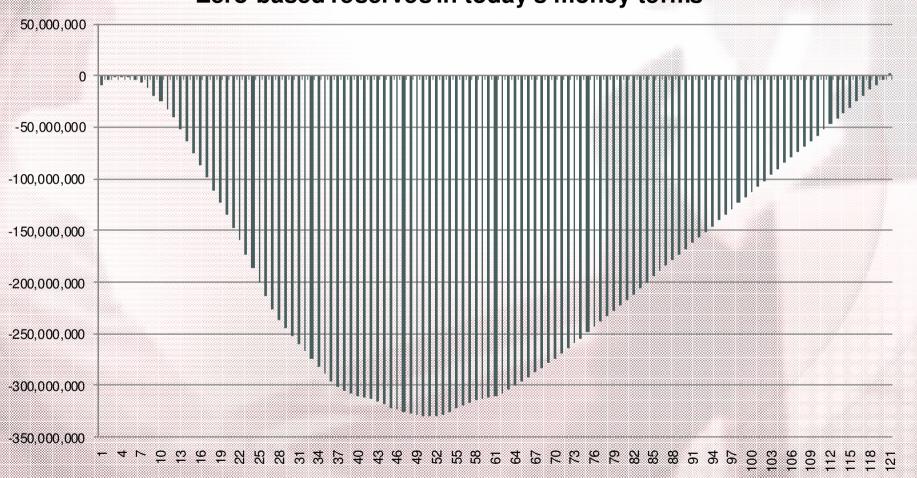




Add new entrants



Zero-based reserves in today's money terms



Add (more) new entrants



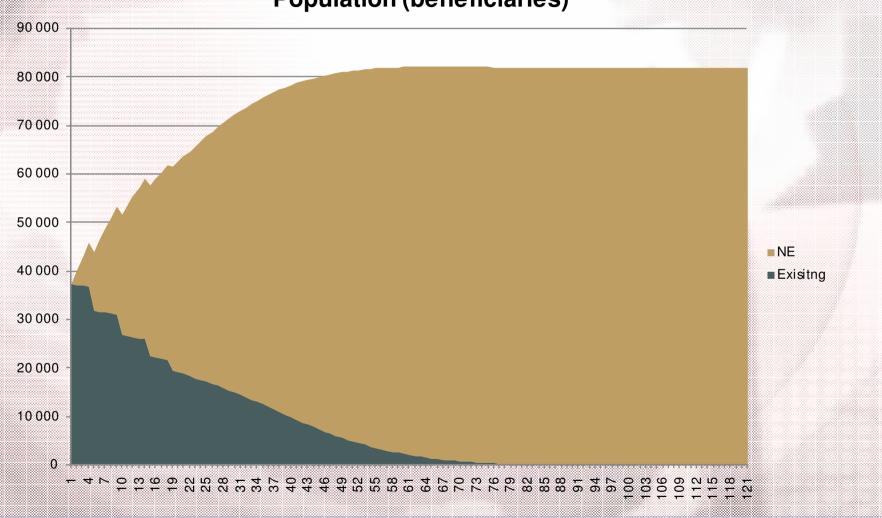
- Increase simple growth rate from 2.6% to 4.3%
 (671 beneficiaries per year)
- With a NE average age of 22.4 years

	Existing	New Entrants	Total
PV Contributions	6,151,735,007	20,453,559,039	26,605,294,046
PV Claims	7,009,608,424	17,934,351,787	24,943,960,211
PV Gross Result	-857,873,417	2,519,207,252	1,661,333,835
PV Expenses	322,695,773	547,652,065	870,347,838
PV Net Result	-1,180,569,190	1,971,555,187	790,985,997

Add (more) new entrants



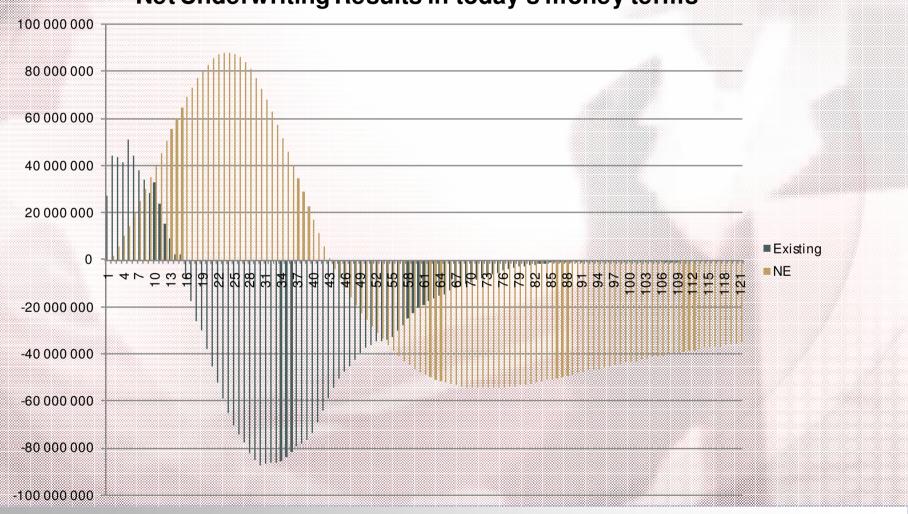
Population (beneficiaries)



Add (more) new entrants









Can be made sustainable if

- Starting contributions are increased by 20%
- AND contributions are increased by claims inflation (excl ageing) every year thereafter, despite the generation of significant surpluses

OR

- If annual contribution increases exceed claims inflation (exclageing) by 0.5%
- ...which implies a net discount rate of 0%

OR

 Adding new 4.3% new entrants with an average age of 22.4 years every year

Scheme B



Scheme B

Young commercial option Surplus-making Hospital plan with a small MSA

Beneficiaries	4,361
MSA%	10.0%
Start avg age	28.02
Pensioner ratio	1.6%

Contribution table

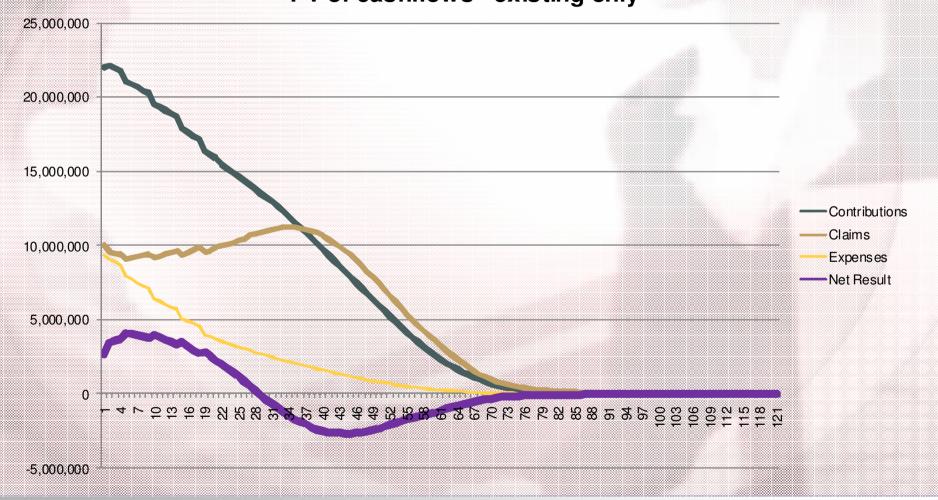
Principal 558
Adult 434
Child 209

Income statement in year 0		pbpm	%ctr
Gross contributions	24,484,375	467.87	
Net contributions	22,035,938	421.08	
Claims	10,050,569	192.05	45.6%
Gross result	11,985,369	229.03	54.4%
Expenses	9,373,453	179.12	42.5%
Net result	2.611.916	49.91	11.9%

Scheme B







Scheme B



PV Contributions	784,373,715
PV Claims	573,454,373
PV Gross Result	210,919,342
PV Expenses	200,645,424
PV Net Result	10,273,918
Per existing beneficiary	
PV Contributions	179,861
PV Claims	131,496
PV Gross Result	48,365
PV Expenses	46,009
PV Net Result	2,356
Reserve requirement	

-42%

As a % gross ctr

Scheme C



Scheme C

Commercial scheme Older profile Hospital plan

Beneficiaries	12,853
MSA%	0.0%
Start avg age	41.90
Pensioner ratio	16.6%

Contribution table

Principal 706 Adult 606 Child 389

Income statement in year 0		<u>pbpm</u>	%ctr
Gross contributions	92,676,913	600.88	
Net contributions	92,676,913	600.88	
Claims	88,984,888	576.94	96.0%
Gross result	3,692,026	23.94	4.0%
Expenses	18,848,880	122.21	20.3%
Net result	-15,156,854	-98.27	-16.4%

Scheme C



Existing

Scheme C

Commercial scheme

Older profile

Hospital plan

Beneficiaries 12,853
MSA% 0.0%
Start avg age 41.90
Pensioner ratio 16.6%

Contribution table

Principal 706 Adult 606 Child 389

Income statement in	<u>year 0</u>	pbpm	%ctr
Gross contributions	92,676,913	600.88	
Net contributions	92,676,913	600.88	
Claims	88,984,888	576.94	96.0%
Gross result	3,692,026	23.94	4.0%
Expenses	18,848,880	122.21	20.3%
Net result	-15,156,854	-98.27	-16.4%

PV Contributions	2,449,995,944
PV Claims	3,594,260,477
PV Gross Result	-1,144,264,533
PV Expenses	346 345 505

PV Net Result -1,490,610,038

Per existing beneficiary
PV Contributions
190,617
PV Claims
279,644
PV Gross Result
PV Expenses
26,947
PV Net Result
-115,974

Reserve requirement
As a % gross ctr 1608%

Scheme D

Historically targeted at government employees



Scheme D

Commercial scheme Historically targeted at GEMS members

Beneficiaries	37,270
MSA%	22.0%
Start avg age	30.13
Pensioner ratio	1.3%

Contribution table

Principal 1,004 Adult 707 Child 212

Income statement in	<u>year 0</u>	pbpm	%ctr
Gross contributions	326,518,114	730.07	
Net contributions	254,684,129	569.46	
Claims	163,942,181	366.56	64.4%
Gross result	90,741,948	202.89	35.6%
Expenses	63,467,712	141.91	24.9%
Net result	27.274.236	60.98	10.7%

Scheme D

Historically targeted at government employees



Scheme D

Commercial scheme Historically targeted at GEMS members

Beneficiaries	37,270
MSA%	22.0%
Start avg age	30.13
Pensioner ratio	1.3%

Contribution table

Principal 1,004 Adult 707 Child 212

Income statement in	ı year 0	pbpm	%ctr
Gross contributions	326,518,114	730.07	
Net contributions	254,684,129	569.46	
Claims	163,942,181	366.56	64.4%
Gross result	90,741,948	202.89	35.6%
Expenses	63,467,712	141.91	24.9%
Net result	27,274,236	60.98	10.7%

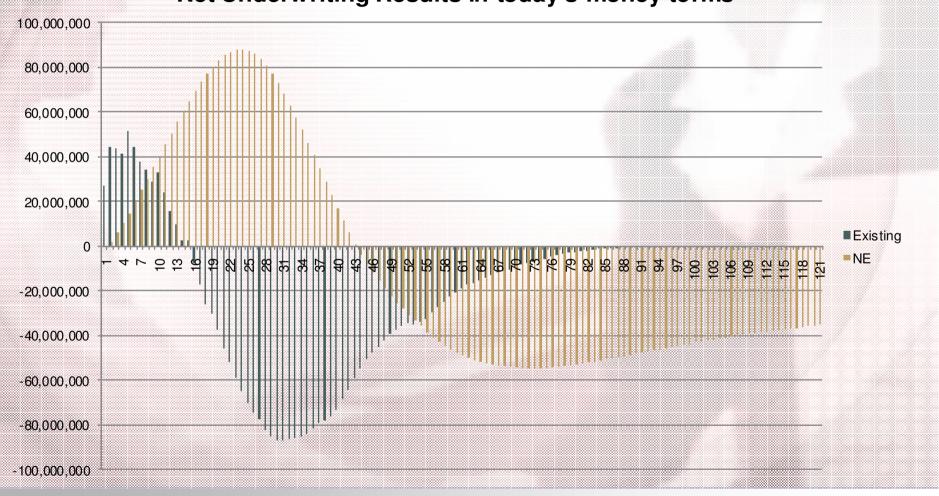
PV Contributions	8,607,399,489
PV Claims	9,667,644,063
PV Gross Result	-1,060,244,574
PV Expenses	1,126,683,417
PV Net Result	-2,186,927,992
Per existing beneficiary	
PV Contributions	230,947
PV Claims	259,395
PV Gross Result	-28,448
PV Expenses	30,230
PV Net Result	-58,678
Reserve requirement	
As a % gross ctr	670%

Scheme D

Historically targeted at government employees



Net Underwriting Results in today's money terms



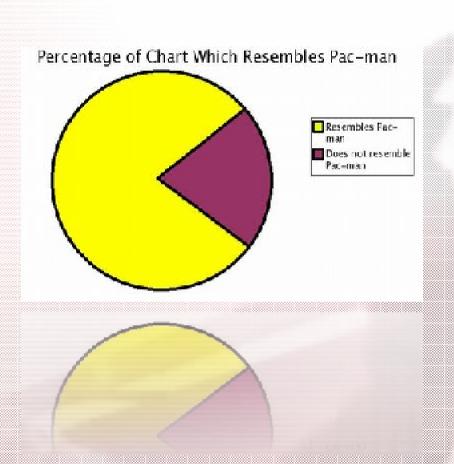
Scheme E The industry



- Cross-subsidy liability of the entire industry?
- Crudely modelled on CMS 2007-2008 annual report
- No new entrants
- Self-funding requirement: annual contribution increases of 8.8%
 - o i.e. 0.8% higher than claims inflation (net of ageing)
 - o or 0.3% higher than investment return

Case-study observations





Key observations



- Some schemes can (theoretically) be self-funding in the long term
- Schemes presently making surpluses of 10-15% of contributions can selffund with (relative) ease
- 3. Sensitive to differential between contribution increases and claims inflation
- 4. Several break-even schemes' cross-subsidy liabilities exceed R50000 to R100000 per beneficiary

Translating into current solvency margin requirements in excess of 500%

- 5. Child dependant conversion into principal member can have a significant impact, depending on contribution structure
- 6. The number of young and healthy new entrants required to turn lossmaking schemes around is usually unrealistic

Re-introducing the "missing" 20-30 year-old demographic could change this

Young new entrants is a viable strategy for sustainability ...but is unlikely to effect a turnaround for an already-failing scheme

Inflationary assumptions



Long-term inflation 6.0%

Investment return 8.5%

Claims inflation8.0%

(Inflation + margin for technology, HIV/AIDS, PMB-creep)

Non-health inflation6.0%

Contribution increases
 8.0%, 8.5%, 9.0%

o Implied net risk discount rate 0.5%, 0.0%, -0.5%

Valuation bases



 The level of the net discount rate assumed in a valuation implies whether new entrants are expected to enter the system going forward

• Contribution increases 8.0%, 8.5%, 9.0%

o Implied net risk discount rate 0.5%, 0.0%, -0.5%

Valuation bases



What is an appropriate net discount rate to use for a scheme that does not expect new entrants?

Valuation bases



- Risk discount rates typically positive
 - With 2% being regarded as aggressive
 - And 0% as being conservative
- Restricted schemes with little or no new entrants may require lower (even negative) net discount rates
- Realistic to assume annual increases in excess of (salary) inflation in the long term?

Regulatory intervention



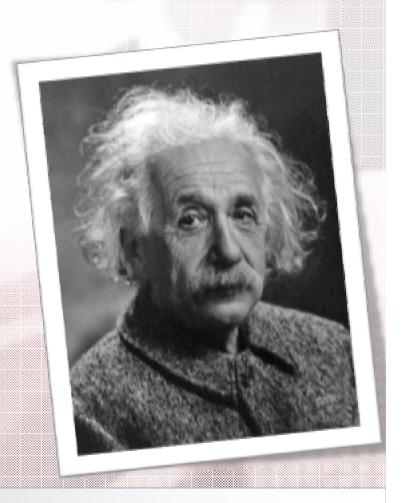
- Risk equalisation
 - Flattens the claims curve
 - Reduces the absolute value of cross-subsidy liabilities
 - At the cost of contribution increases to some lowerincome schemes

- Income cross-subsidies
- Mandatory participation



"A happy man is too satisfied with the present to dwell too much on the future"

- Albert Einstein, 1896





2009 Convention Lite and the Pensions, Health and Life Seminars
19-20 May 2009

Sandton Convention Centre Johannesburg, South Africa