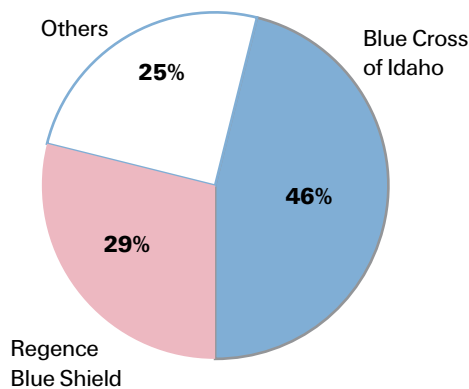


# Idaho Consumers Pay the Price For Health-Insurance Market Failure

- Blue Cross of Idaho, the state's top health insurer, holds 46 percent of the state market. Its closest competitor, Regence BlueShield of Idaho, has 29 percent.<sup>1</sup>
- Health insurance premiums for Idaho working families have skyrocketed, increasing 122 percent from 2000 to 2007.<sup>2</sup>
- For family health coverage in Idaho during that time, the average annual combined premium for employers and employees rose from \$5,160 to \$11,432.<sup>3</sup>
- For family health coverage in Idaho, the average employer's portion of annual premiums rose 160 percent, while the average worker's share grew 40 percent.<sup>4</sup>
- Between 2000 and 2007, the median earnings of Idaho workers increased 31 percent, from \$19,004 to \$24,798. During that time health insurance premiums for Idaho working families rose four times faster than median earnings.<sup>5</sup>

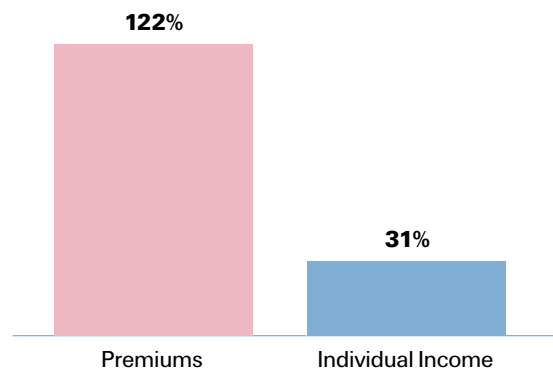
When a firm has more than a 42 percent share of a single market, the U.S. Justice Department considers that market to be "highly concentrated." This means that an insurer could raise premiums and/or reduce the variety of plans or quality of services offered to customers with impunity.<sup>6</sup>

### Idaho Commercial Health Insurance Market Concentration



Source: American Medical Association, "Competition in Health Insurance: A Comprehensive Study of U.S. Markets: 2007 Update."

### Percent Increase in Premiums vs Income in Idaho, 2000–2007



Sources: Families USA, "Premiums Versus Paychecks," September 2008.

## ENDNOTES

<sup>1</sup>Stephen Foreman, "Proposed Consolidation of Highmark and Independence Blue Cross," July 2008. Accessed at <http://www.ins.state.pa.us/ins/lib/ins/highmark-ibc/0943.pdf>.

<sup>1</sup>AMA data in this report are based on combined enrollment in preferred provider organizations (PPOs) and health maintenance organizations (HMOs) in states and metropolitan statistical areas (MSAs) as defined by the U.S. Census Bureau. The AMA calculates market share by dividing an insurer's enrollment in a given product by the total enrollment across all insurers in a market multiplied by 100. Total enrollment is for commercial products only, including self-insured employer-sponsored PPO plans and individual coverage, and does not include Medicare, Medicaid, or Children's Health Insurance Program enrollments. Self-insured employer plans refer to PPOs only. Accessed at <http://www.ama-assn.org/go/competition2007>.

<sup>3</sup>Families USA, "Premiums versus Paychecks," September 2008. Accessed at <http://www.familiesusa.org/resources/publications/reports/premiums-vs-paychecks-2008.html>.

<sup>4</sup>Ibid.

<sup>5</sup>Ibid.

<sup>6</sup>Ibid.

<sup>13</sup>US Department of Justice, "The Herfindahl-Hirschman Index." Accessed at [http://www.usdoj.gov/atr/public/guidelines/horiz\\_book/15.html](http://www.usdoj.gov/atr/public/guidelines/horiz_book/15.html); American Hospital Association, "The Case for Reinvigorating Antitrust Enforcement for Health Plan Mergers and Anticompetitive Conduct to Protect Consumers and Providers and Support Meaningful Reform," May 11, 2009. Accessed at <http://www.aha.org/aha/content/2009/pdf/09-05-11-antitrust-rep.pdf>.

This report makes use of data published by the American Medical Association (AMA), which is not a member of the Health Care for America Now coalition. The AMA did not collaborate with HCAN on this report.