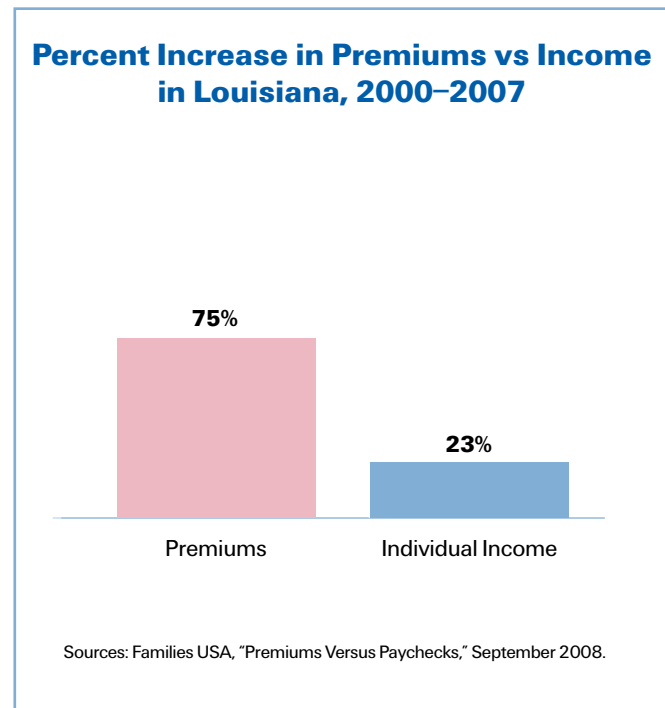
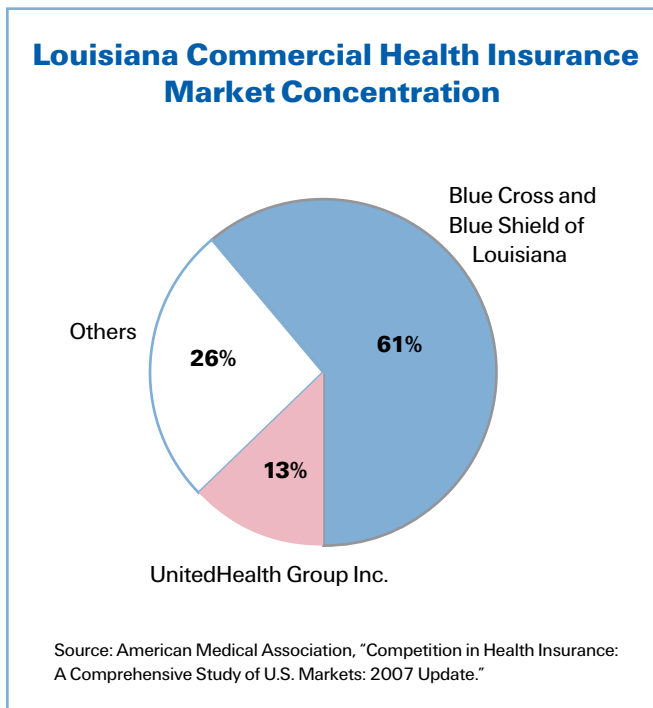


Louisiana Consumers Pay the Price For Health-Insurance Market Failure

- Blue Cross and Blue Shield of Louisiana, the state’s biggest health insurer, controls 61 percent of the state commercial market. Together with UnitedHealth Group Inc., the second largest Louisiana health insurer, they control 74 percent of the market.¹
- Local markets are more concentrated; in Lafayette, Blue Cross and Blue Shield of Louisiana and Humana Inc. together hold 93 percent of the commercial market.²
- Health insurance premiums for Louisiana working families have skyrocketed, increasing 75 percent from 2000 to 2007.³
- For family health coverage in Louisiana during that time, the average annual combined premium for employers and employees rose from \$6,536 to \$11,455.⁴
- For family health coverage in Louisiana from 2000 to 2007, the average employer’s portion of annual premiums rose 76 percent, while the average worker’s share increased 74 percent.⁵
- From 2000 to 2007, the median earnings of Louisiana workers increased 23 percent, from \$20,467 to \$25,147. During that time health insurance premiums for Louisiana working families rose 3.3 times faster than median earnings.⁶

If one company holds more than a 42 percent share of a market the U.S. Justice Department would consider that market “highly concentrated.”⁷ This means that an insurer, with impunity, could raise premiums and/or reduce the variety of plans or quality of services offered to customers.⁸



ENDNOTES

¹AMA 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>.

²Ibid.

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

⁴Ibid.

⁵Ibid.

⁶Ibid.

⁷US Department of Justice, "The Herfindahl-Hirschman Index." Accessed at http://www.usdoj.gov/atr/public/guidelines/horiz_book/15.html.

⁸American 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.