

Results of Market Failure in Connecticut

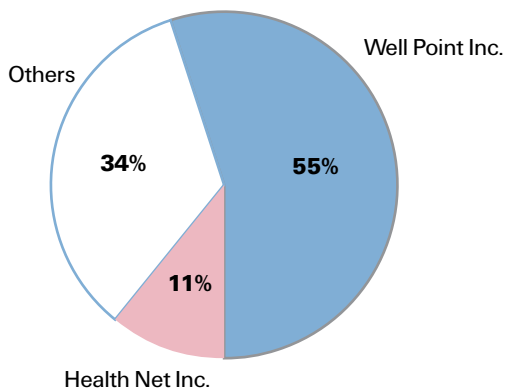
- According to a 2007 report by the American Medical Association, WellPoint Inc., Connecticut's biggest health insurer, holds 55 percent of the commercial market. Together with Health Net Inc., the second largest, they control 66 percent of the state market.¹
- Health insurance premiums for Connecticut working families have skyrocketed, increasing 81 percent from 2000 to 2007.²
- For family health coverage in Connecticut during that time, the average annual combined premium for employers and employees rose from \$7,292 to \$13,173.³
- From 2000 to 2007 the average employer's portion of annual premiums for family

coverage in Connecticut rose 75 percent, while the average worker's share grew by 104 percent.⁴

- From 2000 to 2007, the median earnings of Connecticut workers increased 10 percent, from \$32,106 to \$35,281. During that time health insurance premiums for Connecticut working families rose 8.2 times faster than median earnings.⁵

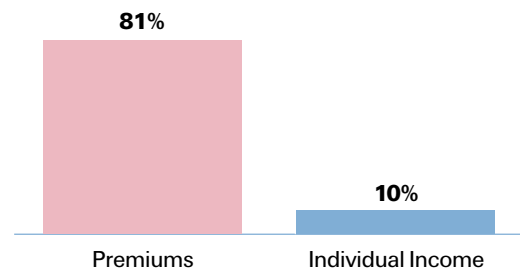
When a firm has more than a 42 percent share of a single market, the U.S. Justice Department considers that market to be "highly concentrated." This means that an insurer could raise premiums and/or reduce the variety of plans or quality of services offered to customers with impunity.⁶

Connecticut 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 Connecticut, 2000–2007



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

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>.

²Families USA, "Premiums versus Paychecks," September 2008. Accessed at <http://www.familiesusa.org/resources/publications/reports/premiums-vs-paychecks-2008.html>.

³Ibid.

⁴Ibid.

⁵Ibid.

⁶US Department of Justice, "The Herfindahl-Hirschman Index." Accessed at 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.