

U.S. Health Reform—Monitoring and Impact

# Marketplace Premiums and Insurer Participation: 2017 – 2020

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With support from the Robert Wood Johnson Foundation (RWJF), the Urban Institute is undertaking a comprehensive monitoring and tracking project to examine the implementation and effects of health reform. The project began in May 2011 and will take place over several years. The Urban Institute will document changes to the implementation of national health reform to help states, researchers and policymakers learn from the process as it unfolds. Reports that have been prepared as part of this ongoing project can be found at [www.rwjf.org](http://www.rwjf.org) and [www.healthpolicycenter.org](http://www.healthpolicycenter.org).

## EXECUTIVE SUMMARY

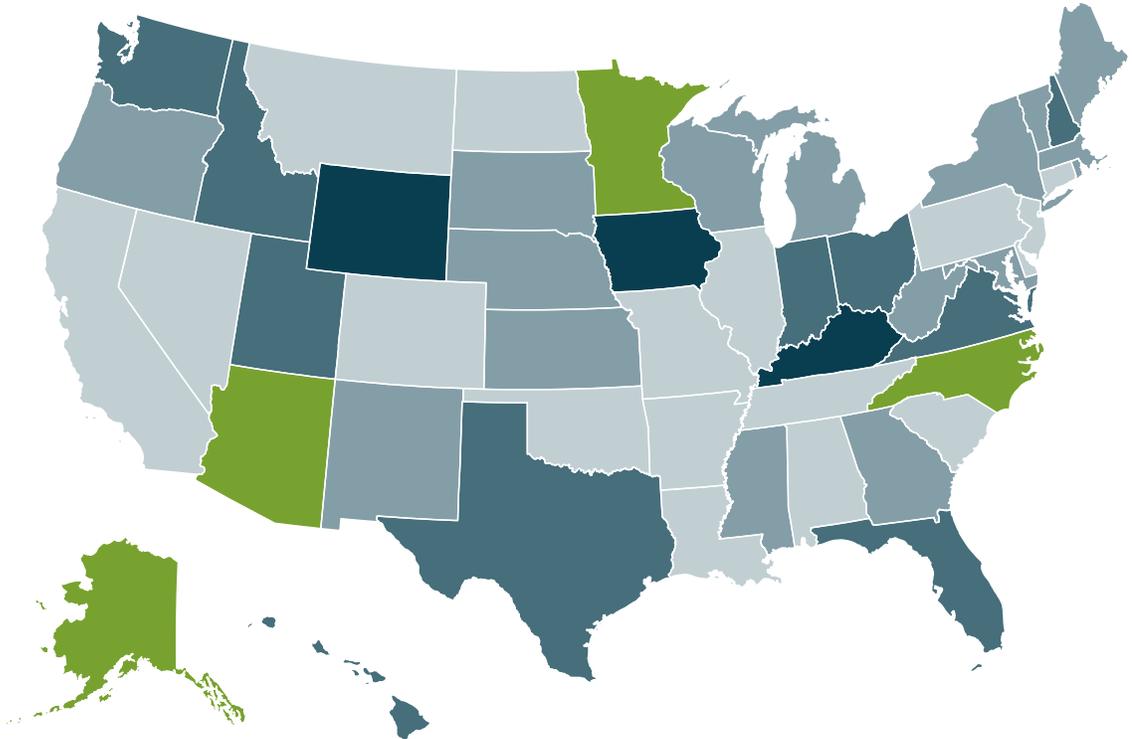
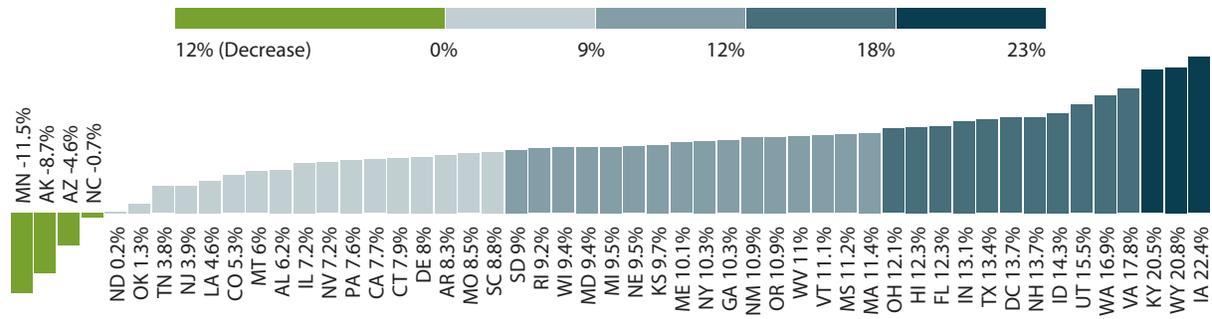
In 2018 and 2019, the Affordable Care Act's (ACA) marketplaces experienced considerable turmoil that resulted in huge swings in premiums. The first major change resulted from the administration's decision (announced October 2017) to stop directly reimbursing insurers for cost-sharing reductions. Because the ACA requires marketplace insurers to reduce out-of-pocket costs for people with incomes below 250 percent of the federal poverty level, insurers increased premiums (typically silver marketplace premiums<sup>1</sup>) to cover these costs beginning in the 2018 plan year. In addition, beginning in early 2017, there was widespread fear that the administration would not enforce the individual mandate, thus threatening the risk pool and forcing insurers to increase premiums to cover the additional risk. This turmoil led to concerns about the marketplaces' stability and long-term viability. Congress endeavored to pass various pieces of legislation that would repeal the ACA and replace it with alternatives that would reduce and alter insurance market regulation. Though none of these bills were passed, they created immense uncertainty for insurers while they determined and filed premiums for the 2018 plan year.

For these reasons, the lowest silver marketplace premium offered in each rating region increased sharply in 2018, by 29.7 percent on average.<sup>2</sup> Twenty-eight states had average lowest silver premium increases that exceeded 29 percent. By the end of 2017, Congress passed, and the president signed into law, tax legislation that eliminated the individual mandate penalties beginning in 2019.<sup>3</sup> However, when insurers set their nongroup market premiums for the 2019 plan year, it became clear that many of them had overreacted to the tumult and uncertainty surrounding the 2018 plan year. Consequently, increases for the lowest silver premiums

in 2019 averaged -0.4 percent nationwide, and in many states premiums decreased. This year, as a sign of continuing stability, premiums have fallen across all states by an average of 3.5 percent, with 31 states having lower premiums today than in 2019.

In this paper, we show the changes in average lowest silver premiums from 2017 to 2020 by state and in the lowest silver premiums offered by each insurer in selected markets (Figure ES.1). As in previous years, premium changes across states varied considerably in all plan years. The markets we examine also saw considerable insurer entries and exits. In 2018, many more insurers exited than entered the marketplaces, but this reversed in 2019. Even with increased insurer participation, by 2019, most markets had fewer marketplace insurers than they had a few years prior; in 2017, the national average number of insurers per region was 3.7, compared with 3.3 in 2019. During this period, the large national commercial insurers (e.g., Humana, Cigna, and Anthem) continued to leave the markets they had been in since the early years of the ACA. UnitedHealthcare and Aetna had left most markets before our study period. Medicaid managed care organizations (that had offered coverage through Medicaid programs before 2014 but had not sold insurance on the private markets until then) frequently offered the lowest-premium plans, and they have begun entering markets with a sole dominant insurer, often a Blue Cross Blue Shield affiliate. The trend of increased participation has continued in 2020, with insurers, particularly Bright Health and Oscar, entering new markets; the average number of insurers participating per rating region is now 3.9. The 2019 and 2020 increase in insurer participation suggests many insurers now believe these markets are stable, functional, and potentially profitable.

**Figure ES.1. Average Annual Change in Lowest-Cost Silver Plan Premium, 2017–20**

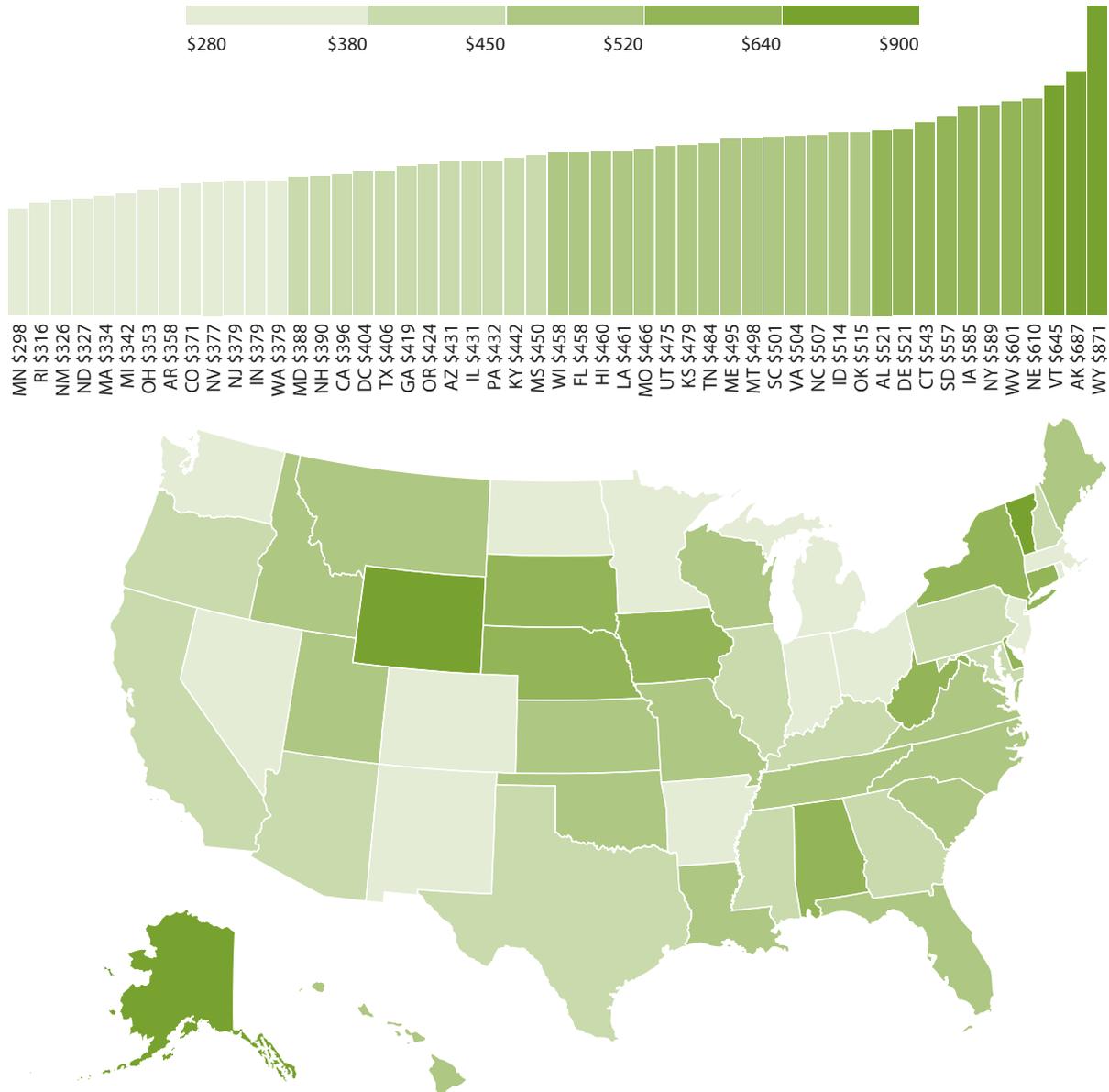


Source: Healthcare.gov and relevant state-based marketplace websites.  
 Note: Changes are calculated based on premiums for 40-year-old non-smokers.

Premium levels still vary considerably across states. The national average lowest silver marketplace premium for single coverage is currently \$426 per month (Figure ES.2). Still, six states (Alaska, Iowa, Nebraska, South Dakota, West Virginia, and Wyoming) had average lowest silver premiums exceeding \$550 per month, and eight states (Arkansas, Massachusetts, Michigan, Minnesota, New Mexico, North Dakota, Ohio, and Rhode Island) had average lowest-cost premiums below \$360

per month. In states with higher silver premiums, one insurer typically dominates the marketplace, preventing competition; New York and Vermont had average lowest silver premiums exceeding \$550, but this was because of community rating, meaning its premiums for a 40-year-old are not comparable with those of other states.<sup>4</sup> States with lower silver premiums generally have robust competition among several insurers, including a competing Medicaid insurer.

**Figure ES.2. State Average Lowest-Cost Silver Plan Premium, 2020**



Source: Healthcare.gov and relevant state-based marketplace websites.

Note: Premiums displayed are for 40-year-old non-smokers.

# INTRODUCTION

Following uncertainty and regulatory changes in 2017, Affordable Care Act (ACA) marketplace premiums jumped in 2018, accompanied by a net exit of insurers. Some observers expressed concern that 2018 premium increases would begin a slow decline of the marketplace because large premium increases would lower enrollment and increase the potential for adverse selection, leading to further premium increases and insurer exits. In this paper, we analyze the changes and the lowest silver marketplace premiums for a 40-year-old

non-smoker in 2017, 2018, and the two subsequent years, 2019 and 2020. We find that in most rating regions, premiums increased considerably between 2017 and 2018 and stabilized in 2019 and 2020. We also examine insurer entrances and exits in 39 selected markets and find increased insurer participation in 2019 and 2020, which suggests that many insurers now believe these markets are stable, functional, and potentially profitable. Finally, we show how premiums across markets are associated with insurer competition.

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## BACKGROUND: CHANGES IN THE POLICY ENVIRONMENT FROM 2017 TO 2020

Substantial policy uncertainty, and ultimately changes in policy, characterized the 2017 marketplace plan year. Just after the November 2016 election, Congress began discussing strategies to repeal the ACA through the budget reconciliation process after President Trump's January 2017 inauguration.<sup>5</sup> That discussion led to a prolonged legislative effort to repeal the ACA and replace it with other reforms that would reduce insurance market regulations and fundamentally alter the federal approach to subsidizing private health insurance in the nongroup markets.<sup>6,7,8,9</sup> The legislative activity around these varied efforts continued into early fall 2017, creating challenges for insurers that were required to file premiums for the 2018 plan year without knowing how those markets might function. In addition, media reports relayed consumer confusion as to whether the ACA had already been repealed, calling enrollment levels for the next year into question.<sup>10</sup> The consumer confusion increased insurers' difficulty setting premiums, because low enrollment rates could translate into adverse selection (i.e., enrollment being skewed toward people with high medical need), which would lead to higher average claims costs and higher premiums. Insurer participation fell from an average of 3.7 per region in 2017 to an average of 3.0 in 2018.

Though efforts to repeal and replace the ACA ultimately failed, in October 2017, just before the start of the marketplace's annual open enrollment period, the U.S. Department of Health and Human Services announced that it would stop directly reimbursing insurers for the cost-sharing reductions that marketplace insurers must provide to eligible enrollees with incomes below 250 percent of the federal poverty level.<sup>11</sup> Given the uncertainty about whether the administration would take such action, some states instructed their insurers to file 2018 plan year premiums in two ways: assuming cost-sharing reductions would be reimbursed and assuming they

would not be. In other states, insurers could make last-minute changes to the premium levels they had already submitted to accommodate the change.

To pay for the claims associated with these cost-sharing reductions, insurers increased premiums. How insurers responded varied by state, because the federal government permitted state governments to instruct insurers how to recoup their costs, and states made different choices, sometimes offering no guidance to insurers at all.<sup>1</sup> State instructions ranged from the most narrow—loading these costs exclusively in silver marketplace premiums—to the most broad—spreading the costs across all plans sold both on and off the marketplace in all metal tiers. Corlette, Lucia, and Kona (2017) finds that for the 2018 plan year, 26 states had insurers allocate the cost-sharing reduction costs to silver marketplace premiums alone, 8 states had the costs allocated to silver plans on and off the marketplaces, 3 states had insurers spread the costs across all metal tiers in the marketplace, 3 had insurers spread the costs across all metal tiers on and off the marketplace, and in 3 states approaches varied across insurers.<sup>1</sup> Information on the remaining states was not available.

Premiums increased in 2018 for other reasons, beyond accounting for elimination of federal reimbursement for cost-sharing reductions. Throughout 2017, the administration indicated it might not enforce the individual mandate penalties,<sup>12</sup> and the Tax Cuts and Jobs Act of 2017, passed in December 2017, explicitly set the penalties to zero beginning in plan year 2019.<sup>4</sup> The threat of nonenforcement played the largest role in premium increases for the 2018 plan year because premiums were filed before the Tax Cuts and Jobs Act passed. The virtual elimination of federal advertising funds, the large reduction in federal enrollment assistance

funds, the shortened open enrollment period in federally facilitated and some state-based marketplaces, and reduced hours of access to the Healthcare.gov enrollment platform further increased uncertainty in these markets. Insurers feared that these changes would reduce enrollment, leave a less healthy risk pool, and increase enrollees' average claims. These potential changes gave insurers strong reasons for requesting large premium increases across all plans, both on and off the marketplace. Therefore, such incentives affected premiums both on and off the marketplaces, because insurers must pool risk across all their individual market products.

Finally, the 2018 premium increases reflect insurers' calculations of the adequacy of their 2017 premiums, their expectations about market competition in 2018, and assumptions about changes in underlying costs of care. First, mispriced 2017 premiums likely affected insurers' 2018 premium decisions. Second, lower premiums are associated with greater market competition, which implies that higher premiums may result from reduced competition when insurers exit the markets.<sup>11</sup> The ACA's medical-loss-ratio rules limit the share of premiums attributable to administrative costs, meaning insurers who set higher-than-necessary premiums must provide rebates to comply with these rules,

which most insurers wish to avoid.<sup>13</sup> If an insurer faces little or reduced competition (e.g., because of persistently low insurer competition or other insurers having exited the market), premium increases will tend to be higher, because the insurers have little incentive to keep administrative costs below the maximum or negotiate lower provider payment rates. Third, premiums are adjusted based on medical inflation or expected changes in health care use.

Likewise, changes to premiums in 2019 reflect insurers' perceptions of the adequacy of 2018 premiums, as well as perceptions about future competition and the costs of care. If insurers' 2018 premiums were more than adequate, or if the premiums placed the insurer at a competitive disadvantage, then premium increases for 2019 were likely modest. Similar considerations apply for 2020; if 2019 premiums were more than adequate, premium increases for 2019 were low, if not negative, despite increases in medical inflation. If insurers perceive marketplaces to be stabilizing, they are more likely to enter new markets and remain in those they are in. Overall, insurer participation in the marketplaces reversed its 2018 decline, increasing to an average of 3.3 per region in 2019. It climbed further to an average of 3.9 per region in 2020.

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## DATA/METHODS

In this paper, we analyze marketplace silver premium data and insurer marketplace participation data from 2017 through 2020. We present this data in two forms; first, in Table 1, we present state averages of the lowest silver premium available in every rating region in the country for each of our study years. These averages are weighted using the rating region population taken from the U.S. Census Bureau's county population estimates and aggregated to the rating region level. Figures 1 and 2, U.S. rating region maps, also show the changes in the lowest silver premium during our study

period. We also analyze insurer participation in 39 rating regions in 18 states, selecting a mix of federally facilitated and state-based marketplaces in varying locations to get a representative sample. We present each participating insurer's lowest silver offering across the four study years. When possible, we select both rural and urban regions within a state to examine how participation and pricing vary within states. The premium and insurer participation data were taken from Healthcare.gov landscape files and relevant state-based marketplace websites.

**Table 1. State Average Lowest Silver Premium for a 40-Year-Old Non-smoker and Percent Change, 2017–20**

	Lowest Silver Premium				Percent Change			
	2017	2018	2019	2020	2017–18	2018–19	2019–20	Average Annual Change, 2017–20
<b>US average</b>	<b>\$342</b>	<b>\$443</b>	<b>\$442</b>	<b>\$426</b>	<b>29.7%</b>	<b>-0.4%</b>	<b>-3.5%</b>	<b>7.6%</b>
Alabama	\$435	\$515	\$504	\$521	18.5%	-2.2%	3.3%	6.2%
Alaska	\$901	\$698	\$704	\$687	-22.5%	0.8%	-2.4%	-8.7%
Arizona	\$497	\$487	\$448	\$431	-2.0%	-8.0%	-3.8%	-4.6%
Arkansas	\$281	\$341	\$362	\$358	21.2%	6.1%	-1.1%	8.3%
California	\$317	\$394	\$413	\$396	24.1%	5.0%	-4.2%	7.7%
Colorado	\$317	\$420	\$487	\$371	32.4%	16.0%	-23.9%	5.3%
Connecticut	\$433	\$539	\$444	\$543	24.7%	-17.6%	22.2%	7.9%
DC	\$275	\$317	\$380	\$404	15.0%	19.9%	6.4%	13.7%
Delaware	\$414	\$573	\$660	\$521	38.3%	15.2%	-21.0%	8.0%
Florida	\$323	\$458	\$467	\$458	41.8%	2.1%	-2.1%	12.3%
Georgia	\$312	\$482	\$434	\$419	54.7%	-10.0%	-3.5%	10.3%
Hawaii	\$325	\$437	\$480	\$460	34.4%	9.8%	-4.1%	12.3%
Idaho	\$344	\$328	\$474	\$514	-4.8%	44.7%	8.3%	14.3%
Illinois	\$350	\$468	\$446	\$431	33.6%	-4.7%	-3.4%	7.2%
Indiana	\$261	\$332	\$333	\$379	26.9%	0.3%	13.8%	13.1%
Iowa	\$320	\$681	\$606	\$585	113.0%	-10.9%	-3.5%	22.4%
Kansas	\$362	\$481	\$516	\$479	32.8%	7.2%	-7.2%	9.7%
Kentucky	\$253	\$378	\$413	\$442	49.5%	9.3%	7.1%	20.5%
Louisiana	\$403	\$455	\$419	\$461	12.9%	-7.8%	9.9%	4.6%
Maine	\$371	\$551	\$512	\$495	48.6%	-7.1%	-3.4%	10.1%
Maryland	\$296	\$436	\$404	\$388	47.3%	-7.4%	-3.9%	9.4%
Massachusetts	\$241	\$306	\$321	\$334	26.8%	5.0%	3.9%	11.4%
Michigan	\$260	\$347	\$358	\$342	33.2%	3.3%	-4.6%	9.5%
Minnesota	\$429	\$363	\$313	\$298	-15.5%	-13.6%	-5.0%	-11.5%
Mississippi	\$327	\$478	\$457	\$450	46.5%	-4.5%	-1.6%	11.2%
Missouri	\$365	\$487	\$475	\$466	33.5%	-2.5%	-1.9%	8.5%
Montana	\$418	\$494	\$522	\$498	18.2%	5.6%	-4.7%	6.0%
Nebraska	\$464	\$689	\$706	\$610	48.6%	2.4%	-13.6%	9.5%
Nevada	\$306	\$445	\$398	\$377	45.6%	-10.5%	-5.4%	7.2%
New Hampshire	\$266	\$457	\$373	\$390	71.9%	-18.4%	4.8%	13.7%
New Jersey	\$338	\$399	\$342	\$379	18.1%	-14.3%	10.8%	3.9%
New Mexico	\$239	\$414	\$348	\$326	73.4%	-16.1%	-6.3%	10.9%
New York	\$439	\$486	\$559	\$589	10.9%	15.0%	5.2%	10.3%
North Carolina	\$517	\$601	\$563	\$507	16.3%	-6.3%	-10.1%	-0.7%

	Lowest Silver Premium				Percent Change			
	2017	2018	2019	2020	2017–18	2018–19	2019–20	Average Annual Change, 2017–20
North Dakota	\$325	\$293	\$376	\$327	-9.8%	28.1%	-12.9%	0.2%
Ohio	\$251	\$347	\$359	\$353	38.2%	3.3%	-1.4%	12.1%
Oklahoma	\$495	\$520	\$514	\$515	5.1%	-1.3%	0.3%	1.3%
Oregon	\$311	\$388	\$424	\$424	24.8%	9.1%	0.1%	10.9%
Pennsylvania	\$347	\$453	\$446	\$432	30.6%	-1.7%	-3.0%	7.6%
Rhode Island	\$243	\$287	\$315	\$316	18.4%	9.7%	0.3%	9.2%
South Carolina	\$389	\$524	\$554	\$501	34.4%	5.8%	-9.6%	8.8%
South Dakota	\$430	\$467	\$511	\$557	8.6%	9.4%	9.0%	9.0%
Tennessee	\$433	\$597	\$507	\$484	37.9%	-15.1%	-4.4%	3.8%
Texas	\$279	\$394	\$403	\$406	41.3%	2.5%	0.6%	13.4%
Utah	\$308	\$528	\$508	\$475	71.3%	-3.8%	-6.6%	15.5%
Vermont	\$470	\$474	\$493	\$645	0.8%	4.1%	30.7%	11.1%
Virginia	\$309	\$506	\$526	\$504	64.0%	3.9%	-4.2%	17.8%
Washington	\$238	\$326	\$368	\$379	37.0%	13.2%	3.0%	16.9%
West Virginia	\$440	\$514	\$562	\$601	16.9%	9.3%	6.9%	11.0%
Wisconsin	\$350	\$502	\$483	\$458	43.5%	-3.7%	-5.2%	9.4%
Wyoming	\$494	\$860	\$854	\$871	74.0%	-0.7%	2.0%	20.8%

## CHANGES IN THE LOWEST SILVER PREMIUMS

Tables 1 and 2 provide an overview of changes in the lowest silver premiums in 2018, 2019, and 2020. Table 1 shows that the national average increase in lowest silver premiums in 2018 was 29.7 percent, followed by an average 0.4 percent decrease in 2019 and another 3.5 percent reduction in 2020. However, these national averages mask considerable variation across states. Average premium increases exceeded 29.7 percent in 28 states in 2018. Most of the large increases in the average lowest silver premiums in 2018 were in smaller states that lacked competitive markets, including Iowa (113.0 percent), Maine (48.6 percent), Mississippi (46.5 percent), Nebraska (48.6 percent), New Mexico (73.4 percent), Utah (71.3 percent), and Wyoming (74.0 percent). However, average lowest silver premium increases were substantial even in some states with several insurers, like Georgia (54.7 percent), Ohio (38.2 percent), and Virginia (64.0 percent). Average lowest silver premiums in these nine states increased or decreased by 15.0 percent or less: Arizona (2.0 percent decrease), Idaho (4.8 percent decrease), Louisiana (12.9 percent increase), New York (10.9 percent increase), North Dakota (9.8 percent decrease), Oklahoma (5.1 percent increase), South Dakota (8.6 percent

increase), Vermont (0.8 percent increase), and Washington, D.C. (15.0 percent increase). The largest average decrease in the lowest silver plan was 22.5 percent in Alaska, which enacted a reinsurance program in the nongroup market in 2017 but has seen continued decreases in premiums since.

Contrary to 2018 trends and beliefs that the 2018 premium increases would unravel the nongroup market, large premium increases were rare in 2019, and premiums decreased in 23 states. Average lowest silver premiums increased by 15.0 percent or more in only six states: Colorado (16.0 percent), Delaware (15.2 percent), Idaho (44.7 percent), New York (15.0 percent), and Washington, D.C. (19.9 percent). The typically much lower premium increases and frequent decreases in 2019 appear to reflect corrections for some insurers' overreactions to the policy changes and uncertainty when 2018 premiums were set. Consequently, 2017 through 2019 saw considerable disequilibrium in marketplace premiums; 2018 premiums reflected policy changes and fears over the future of the risk pool, and 2019 premiums reflected corrections to 2018 premiums based on recent experience.

Many observers were surprised that enrollment did not drop as much as feared in the wake of the 2018 premium increases and other changes.<sup>14</sup> Most marketplace enrollees are shielded from the full weight of premium increases because their premium costs are limited to a percentage of family income. This suggests that the marketplace may be stable given the structure of the subsidies.

Insurers' awareness of and confidence in the stability of the market seems to have continued this year. In 2020, lowest silver premiums fell by an average of 3.5 percent across the United States, with lowest silver premiums decreasing in 32 states. Additionally, by 2020, 12 states (Alaska, Colorado, Delaware, Maine, Maryland, Minnesota, Montana, New Jersey, North Dakota, Oregon, Rhode Island, and Wisconsin) enacted reinsurance programs, contributing to reductions in the lowest silver premiums.<sup>15</sup>

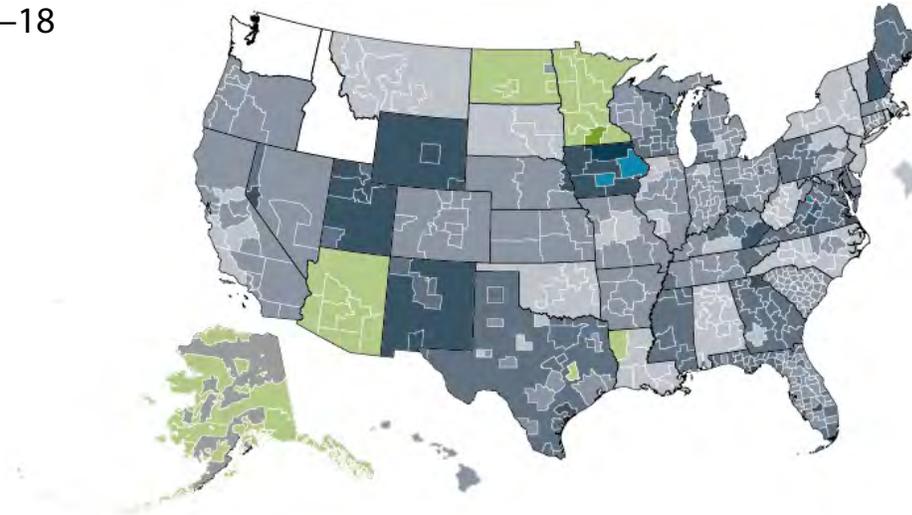
Table 1 also shows the continued variation in the *levels* of premiums as of this year. The national average lowest silver premium for a 40-year-old non-smoker is currently \$426 per month. States with the highest average silver premiums (above \$550) tend to be smaller and/or have less competitive insurance markets and include Alaska (\$687), Iowa (\$585),

Nebraska (\$610), South Dakota (\$557), West Virginia (\$601), and Wyoming (\$871). Other states had substantially lower premiums (below \$360), including Arkansas (\$358), Massachusetts (\$334), Michigan (\$342), Minnesota (\$298), New Mexico (\$326), North Dakota (\$327), Ohio (\$353), and Rhode Island (\$316). Most of the lower-cost states had at least one participating Medicaid insurer, a large number of competing insurers, or both. As we have shown elsewhere, lowest silver premiums in a rating region are associated with a large number of participating insurers, a participating Medicaid insurer, and urban areas.<sup>14</sup> Medicaid insurers tend to have narrower networks and contract with providers willing to accept lower payment rates.

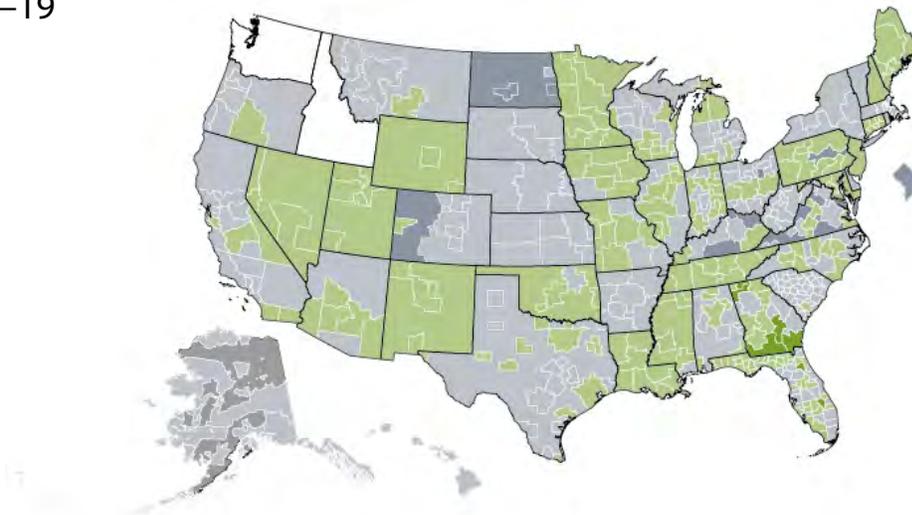
Figure 1 displays three maps of annual changes in the lowest silver plan available across the United States at the rating region level. It shows that most of the increases in the lowest silver premiums occurred for the 2018 plan year, mostly because of the various administrative changes discussed above. Figure 2 is a map of the average annual percent change in the lowest-cost silver plans available from 2017 to 2020 and shows large increases in almost every state, despite reduced premiums in 2019 and 2020.

**Figure 1. Annual Percent Change in Lowest-Cost Silver Plan at Rating Region Level, 2017–20**

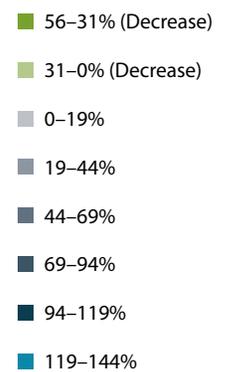
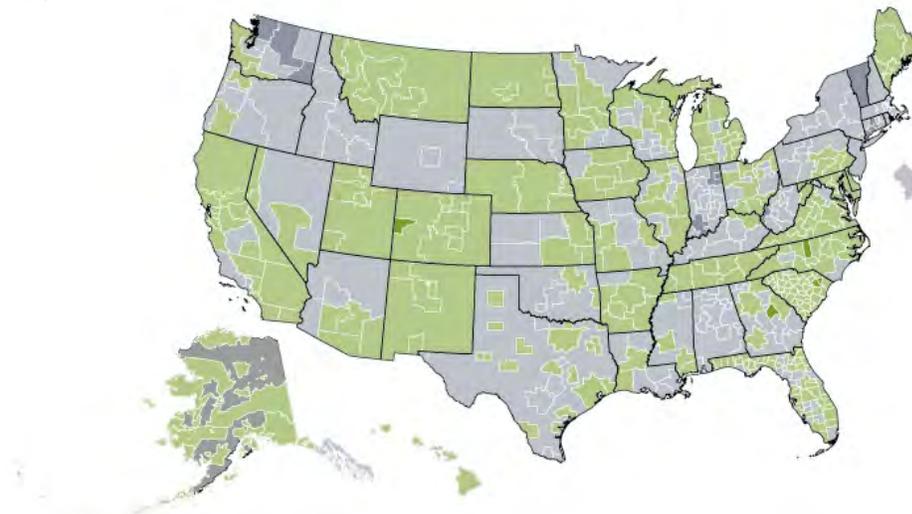
2017–18



2018–19

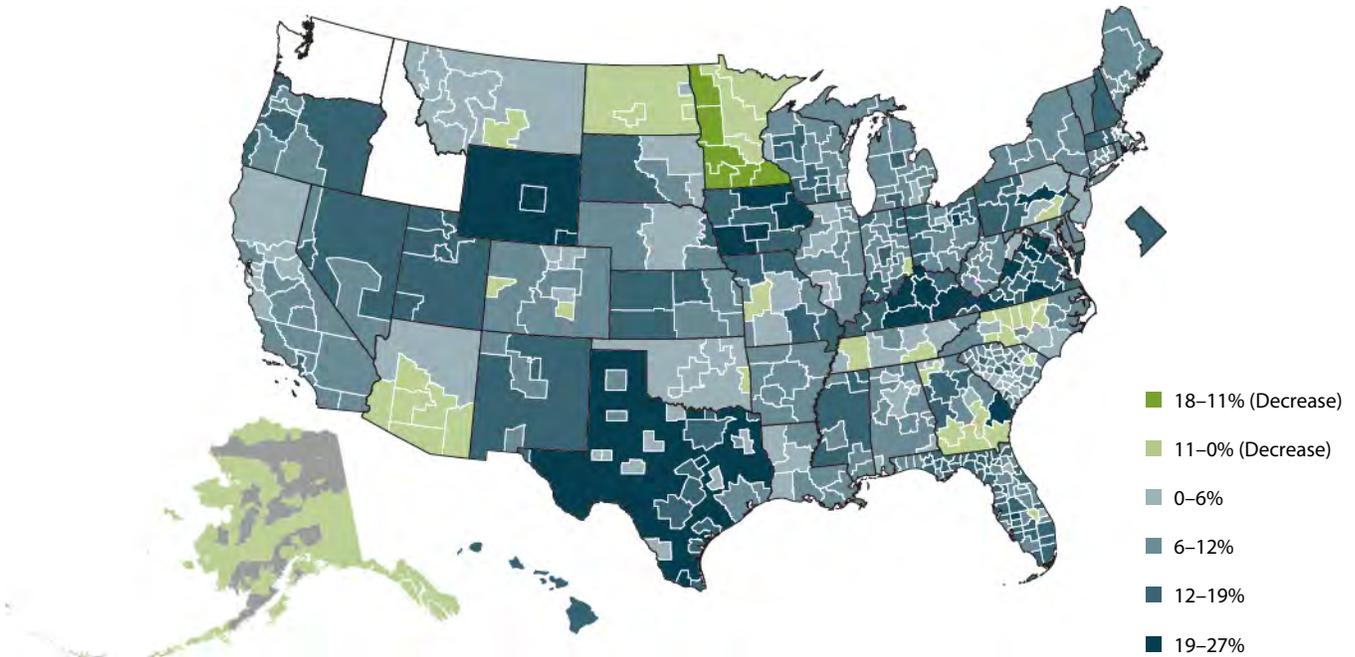


2019–20



Source: Healthcare.gov and relevant state-based marketplace websites.  
 Note: For 2017 through 2019, Idaho and Washington are excluded because they redrew their rating regions.

**Figure 2. Average Percent Change in Lowest-Cost Silver Plan at Rating Region Level, 2017–20**



Source: Healthcare.gov and relevant state-based marketplace websites.  
 Note: Idaho and Washington are excluded because they redrew their rating regions in 2019.

## SELECT SUBSTATE FINDINGS

Table 2 presents information on premiums in specific substate rating areas (geographic regions within which a plan’s premiums cannot vary) for selected states. In general, we selected a major urban area and, when possible, another region with mostly rural counties. Table 2 shows the lowest silver premium available for a 40-year-old single adult across all participating insurers in each rating region and the percent change in the lowest premium available in 2018, 2019, and 2020. Currently, premiums tend to be higher in rural areas

than in urban areas in Arizona, California, North Carolina, Ohio, and Oregon. In Arizona, the lowest silver premium in the selected rural area is \$656 per month, compared with \$394 in Phoenix. In Ohio, the lowest silver premium in the selected rural area is \$386, compared with \$366 in Columbus and \$322 in Cleveland. In Oregon, the lowest premium in the rural region is \$438, compared with \$397 in Portland. However, there are exceptions; rural premiums are somewhat lower than urban premiums in Alabama, Georgia, and Indiana.

**Table 2. State Average Lowest Silver Premium and Percent Change from 2017 to 2020, by Select Rating Regions in Study States**

State	Rating Area	State Average Lowest Silver Premium				Percent Change			
		2017	2018	2019	2020	2017–18	2018–19	2019–20	Average Annual Change, 2017–20
Alabama	State Average	\$435	\$515	\$504	\$521	18.5%	-2.2%	3.3%	6.2%
	Birmingham	\$457	\$544	\$512	\$525	18.9%	-5.8%	2.6%	4.7%
	Rural	\$416	\$493	\$494	\$507	18.5%	0.2%	2.7%	6.8%
Arizona	State Average	\$497	\$487	\$448	\$431	-2.0%	-8.0%	-3.8%	-4.6%
	Phoenix	\$475	\$471	\$415	\$394	-0.9%	-11.8%	-5.0%	-6.0%
	Rural	\$638	\$618	\$648	\$656	-3.1%	4.9%	1.1%	0.9%

State	Rating Area	State Average Lowest Silver Premium				Percent Change			
		2017	2018	2019	2020	2017–18	2018–19	2019–20	Average Annual Change, 2017-20
Arkansas	State Average	\$281	\$341	\$362	\$358	21.2%	6.1%	-1.1%	8.3%
	Little Rock	\$292	\$353	\$363	\$358	21.0%	2.7%	-1.4%	7.0%
	Rural	\$295	\$356	\$378	\$358	21.0%	6.0%	-5.3%	6.7%
California	State Average	\$317	\$394	\$413	\$396	24.1%	5.0%	-4.2%	7.7%
	Northern Counties	\$402	\$478	\$494	\$468	19.1%	3.4%	-5.4%	5.2%
	Sacramento	\$402	\$446	\$474	\$468	11.0%	6.3%	-1.3%	5.2%
	East Los Angeles	\$251	\$316	\$337	\$327	26.2%	6.5%	-3.0%	9.3%
	San Diego	\$297	\$392	\$391	\$359	32.1%	-0.1%	-8.2%	6.6%
Florida	State Average	\$323	\$458	\$467	\$458	41.8%	2.1%	-2.1%	12.3%
	Tampa	\$305	\$428	\$467	\$432	40.3%	9.2%	-7.5%	12.4%
	Miami	\$296	\$435	\$440	\$445	46.7%	1.2%	1.1%	14.5%
Georgia	State Average	\$312	\$482	\$434	\$419	54.7%	-10.0%	-3.5%	10.3%
	Atlanta	\$264	\$417	\$438	\$419	57.8%	5.1%	-4.5%	16.6%
	Augusta	\$322	\$464	\$490	\$401	44.3%	5.5%	-18.2%	7.6%
	Rural	\$430	\$629	\$324	\$367	46.1%	-48.5%	13.3%	-5.2%
Indiana	State Average	\$261	\$332	\$333	\$379	26.9%	0.3%	13.8%	13.1%
	Indianapolis	\$284	\$364	\$372	\$421	28.2%	2.0%	13.3%	14.0%
	Rural	\$201	\$268	\$257	\$330	33.1%	-4.0%	28.4%	17.9%
Maryland	State Average	\$296	\$436	\$404	\$388	47.3%	-7.4%	-3.9%	9.4%
	Baltimore	\$309	\$436	\$404	\$388	41.1%	-7.4%	-3.9%	7.9%
	Washington, D.C., Suburbs	\$309	\$436	\$404	\$388	41.1%	-7.4%	-3.9%	7.9%
Minnesota	State Average	\$429	\$363	\$313	\$298	-15.5%	-13.6%	-5.0%	-11.5%
	Minneapolis	\$363	\$315	\$282	\$261	-13.2%	-10.4%	-7.6%	-10.4%
New York	State Average	\$439	\$486	\$559	\$589	10.9%	15.0%	5.2%	10.3%
	New York City	\$454	\$504	\$581	\$619	11.2%	15.3%	6.5%	11.0%
	Long Island	\$446	\$480	\$562	\$585	7.5%	17.2%	4.0%	9.4%
North Carolina	State Average	\$517	\$601	\$563	\$507	16.3%	-6.3%	-10.1%	-0.7%
	Charlotte	\$565	\$659	\$503	\$405	16.7%	-23.7%	-19.4%	-10.5%
	Raleigh	\$468	\$556	\$487	\$410	18.7%	-12.3%	-15.8%	-2.8%
	Rural	\$537	\$610	\$664	\$661	13.5%	9.0%	-0.5%	7.2%
Ohio	State Average	\$251	\$347	\$359	\$353	38.2%	3.3%	-1.4%	12.1%
	Columbus	\$284	\$385	\$382	\$366	35.4%	-0.8%	-4.1%	8.8%
	Cleveland	\$224	\$307	\$323	\$322	36.8%	5.1%	-0.1%	12.8%
	Rural	\$290	\$415	\$469	\$386	43.2%	12.8%	-17.6%	10.0%
Oregon	State Average	\$311	\$388	\$424	\$424	24.8%	9.1%	0.1%	10.9%
	Portland	\$302	\$375	\$408	\$397	24.2%	8.8%	-2.7%	9.5%
	Rural	\$302	\$375	\$408	\$438	24.2%	8.8%	7.4%	13.2%

State	Rating Area	State Average Lowest Silver Premium				Percent Change			
		2017	2018	2019	2020	2017–18	2018–19	2019–20	Average Annual Change, 2017-20
Rhode Island	State Average	\$243	\$287	\$315	\$316	18.4%	9.7%	0.3%	9.2%
Texas	State Average	\$279	\$394	\$403	\$406	41.3%	2.5%	0.6%	13.4%
	Dallas	\$277	\$411	\$410	\$408	48.4%	-0.2%	-0.7%	13.7%
	Houston	\$283	\$390	\$385	\$381	37.9%	-1.1%	-1.1%	10.5%
Virginia	State Average	\$309	\$506	\$526	\$504	64.0%	3.9%	-4.2%	17.8%
	Richmond	\$289	\$439	\$490	\$489	51.6%	11.7%	-0.3%	19.1%
	Virginia Beach/Norfolk	\$350	\$641	\$572	\$478	83.1%	-10.7%	-16.5%	12.5%
	Washington, D.C., Suburbs	\$319	\$472	\$566	\$514	48.2%	19.9%	-9.2%	20.3%
Washington	State Average	\$238	\$326	\$368	\$379	37.0%	13.2%	3.0%	16.9%
	Seattle	\$235	\$328	\$368	\$379	39.6%	12.3%	2.9%	17.3%
West Virginia	State Average	\$440	\$514	\$562	\$601	16.9%	9.3%	6.9%	11.0%
	Charleston	\$505	\$555	\$611	\$653	9.8%	10.2%	6.8%	8.9%
	Rural	\$485	\$555	\$614	\$656	14.5%	10.7%	6.8%	10.6%

Source: Urban Institute analysis of data from Healthcare.gov and relevant state-based marketplace websites.

Note: State average is the population-weighted average of lowest silver premium offered in each rating region.

As we have done in previous studies, we also describe the competition within these substate areas, identifying the pricing dynamics over the period for each participating insurer's lowest silver premium offering, as well as insurer

entries and exits. We provide additional data on selected states in at least one major metropolitan area and one rural region where applicable.

# ALABAMA

Alabama has little competition in its marketplace. At \$521 per month, the state's average lowest silver premium for a 40-year-old non-smoker is currently well above the national average (\$426 per month). The lowest-cost silver premiums

increased by 18.5 percent in 2018, fell by 2.2 percent in 2019, and increased by 3.3 percent in 2020. Table 3 provides insurer-specific data for Birmingham and a rural rating region.

**Table 3. Lowest Silver Monthly Premiums for a 40-Year-Old and Percent Change from 2017 to 2020, by Insurer in Selected Alabama Markets**

Insurer	Lowest Silver Premium				Percent Change			
	2017	2018	2019	2020	2017–18	2018–19	2019–20	Average Annual Change, 2017–20
<b>Birmingham</b>								
Blue Cross and Blue Shield of Alabama	\$457	\$542	\$525	\$539	18.5%	-3.0%	2.7%	5.7%
Bright Health	N/A	\$546	\$499	\$525	N/A	-8.6%	5.4%	N/A
<b>Percent Change in Lowest Option Available</b>					<b>18.5%</b>	<b>-8.0%</b>	<b>5.4%</b>	<b>4.7%</b>
<b>Selected Rural Region</b>								
Blue Cross and Blue Shield of Alabama	\$416	\$493	\$494	\$507	18.5%	0.2%	2.7%	6.8%
<b>Percent Change in Lowest Option Available</b>					<b>18.5%</b>	<b>0.2%</b>	<b>2.7%</b>	<b>6.8%</b>
<b>State Average (All Regions)</b>	<b>\$435</b>	<b>\$515</b>	<b>\$504</b>	<b>\$521</b>	<b>18.5%</b>	<b>-2.2%</b>	<b>3.3%</b>	<b>6.2%</b>

Source: Healthcare.gov, <https://www.healthcare.gov/health-and-dental-plan-datasets-for-researchers-and-issuers/>

Note: N/A: Insurer was not participating in the marketplace this year

In Birmingham, the lowest silver premium between the two participating insurers increased by 18.5 percent in 2018, fell by 8.0 percent in 2019, and increased by 5.4 percent in 2020. The entry of a new insurer into a previously monopolistic market appears to have catalyzed competition there. Blue Cross and Blue Shield of Alabama has dominated the state's individual market for many years; it was the only marketplace insurer in Birmingham in 2017, and it remained the lowest-cost insurer in 2018 by a small margin (\$4 per month), despite Bright Health's entry into the market with competitive premiums. However, Bright Health became the lowest-priced insurer in

the rating region in 2019 when it reduced its lowest silver offering by almost 9 percent, while Blue Cross and Blue Shield only lowered its offering by 3.0 percent. Bright Health remains the lowest-cost insurer in this market despite a small premium increase (5.4 percent).

Blue Cross and Blue Shield remains the only insurer in Alabama's rural rating region, and its lowest premium there remained essentially flat following an 18.5 percent increase in 2018. Blue Cross and Blue Shield of Alabama raised its lowest-cost silver premium by only 2.7 percent this year.

# ARIZONA

Arizona had few competing insurers in 2017, and its lowest silver marketplace premiums were higher than the national average (Table 4). However, its average lowest silver premiums fell in all three study years as more insurers entered the

market. Consequently, Arizona's lowest silver premiums are currently just barely above the national average. Table 4 shows insurer-specific data for Phoenix and a rural rating region.

**Table 4. Lowest Silver Monthly Premiums for a 40-Year-Old and Percent Change from 2016 to 2020, by Insurer in Selected Arizona Markets**

Insurer	Lowest Silver Premium				Percent Change			
	2017	2018	2019	2020	2017–18	2018–19	2019–20	Average Annual Change, 2017–20
<b>Phoenix</b>								
Blue Cross Blue Shield of Arizona	N/A	N/A	N/A	\$423	N/A	N/A	N/A	N/A
Bright Health	N/A	N/A	\$427	\$394	N/A	N/A	-7.5%	N/A
Cigna	N/A	N/A	\$426	\$423	N/A	N/A	-0.8%	N/A
Health Net	\$475	\$471	\$415	\$411	-0.9%	-11.8%	-1.1%	-4.7%
Oscar	N/A	N/A	\$479	\$426	N/A	N/A	-10.9%	N/A
<b>Percent Change in Lowest Option Available</b>					<b>-0.9%</b>	<b>-11.8%</b>	<b>-5.0%</b>	<b>-6.0%</b>
<b>Selected Rural Region</b>								
Blue Cross and Blue Shield of Arizona	\$638	\$618	\$648	\$656	-3.1%	4.9%	1.1%	0.9%
<b>Percent Change in Lowest Option Available</b>					<b>-3.1%</b>	<b>4.9%</b>	<b>1.1%</b>	<b>0.9%</b>
<b>State Average (All Regions)</b>	<b>\$497</b>	<b>\$487</b>	<b>\$448</b>	<b>\$431</b>	<b>-2.0%</b>	<b>-8.0%</b>	<b>-3.8%</b>	<b>-4.6%</b>

Source: Healthcare.gov, <https://www.healthcare.gov/health-and-dental-plan-datasets-for-researchers-and-issuers/>

Note: N/A: Insurer was not participating in the marketplace this year

In 2017 and 2018, only one insurer, Health Net, a former Medicaid-only insurer, participated in the Phoenix marketplace. Health Net reduced its lowest silver premium by 0.9 percent in 2018, perhaps because it paid enrollees rebates for the 2017 plan year.<sup>16</sup> Oscar, Bright Health, and Cigna joined Health Net in this market beginning in the 2019 plan year. Blue Cross Blue Shield of Arizona entered the Phoenix marketplace this year. Perhaps because of the added competition, Health Net lowered its 2019 silver premium by 11.8 percent, giving it the lowest silver premium in the state in 2019. Bright Health became the lowest-cost insurer this year, despite Health Net reducing its premiums by another 1.1 percent. All five insurers' silver premiums are similar.

Blue Cross Blue Shield of Arizona has been the only insurer offering marketplace coverage in rural northern Arizona since 2017. The lowest silver premium in this region has remained relatively constant for the past three years, decreasing by 3.1 percent in 2018 and increasing by 4.9 and 1.1 percent in 2019 and 2020. However, premiums are significantly higher in this rural region than in Phoenix; the lowest silver premium for a 40-year-old in 2019 was \$656 per month, compared with \$394 in Phoenix.

# ARKANSAS

Arkansas has few participating insurers, but two of them are Medicaid only. Average lowest silver marketplace premiums in Arkansas have been well below the national average in the last four years (\$358 versus \$426 in 2020). The state's average lowest silver premiums increased by 21.2 and 6.1 percent in 2018 and 2019, before falling by 1.1 percent in 2020 (Table 5). In Little Rock and the rural southwestern rating region, no

insurers have entered or exited the markets since 2017 (Table 5). Three insurers participate in both rating regions: Ambetter (a subsidiary of the Centene Corporation), QualChoice Health Insurance, and USABLE Mutual Insurance (Blue Cross Blue Shield of Arkansas). However, Centene purchased QualChoice Health Insurance in January 2019, reducing the number of competing insurers in the state.<sup>17</sup>

**Table 5. Lowest Silver Monthly Premiums for a 40-Year-Old and Percent Change from 2017 to 2020, by Insurer in Selected Arkansas Markets**

Insurer	Lowest Silver Premium				Percent Change			
	2017	2018	2019	2020	2017–18	2018–19	2019–20	Average Annual Change, 2017–20
<b>Little Rock</b>								
Ambetter	\$292	\$353	\$363	\$358	21.0%	2.7%	-1.4%	7.0%
QualChoice Health Insurance (also Ambetter) <sup>1</sup>	\$359	\$429	\$423	\$414	19.4%	-1.4%	-2.1%	4.9%
USABLE Mutual Insurance	\$330	\$392	\$381	\$390	19.0%	-2.9%	2.3%	5.7%
<b>Percent Change in Lowest Option Available</b>					<b>21.0%</b>	<b>2.7%</b>	<b>-1.4%</b>	<b>7.0%</b>
<b>Selected Rural Region</b>								
Ambetter	\$295	\$356	\$378	\$358	21.0%	6.0%	-5.3%	6.7%
QualChoice Health Insurance (also Ambetter) <sup>1</sup>	\$379	\$476	\$447	\$414	25.4%	-6.1%	-7.3%	3.0%
USABLE Mutual Insurance	\$323	\$384	\$381	\$390	18.7%	-0.8%	2.3%	6.4%
<b>Percent Change in Lowest Option Available</b>					<b>21.0%</b>	<b>6.0%</b>	<b>-5.3%</b>	<b>6.7%</b>
<b>State Average (All Regions)</b>	<b>\$281</b>	<b>\$341</b>	<b>\$362</b>	<b>\$358</b>	<b>21.2%</b>	<b>6.1%</b>	<b>-1.1%</b>	<b>8.3%</b>

Source: Healthcare.gov, <https://www.healthcare.gov/health-and-dental-plan-datasets-for-researchers-and-issuers/>

In Little Rock, the average lowest silver premiums across all three insurers increased by 21.0 and 2.7 percent in 2018 and 2019. The lowest silver premium available fell by 1.4 percent this year. Ambetter has had the lowest silver premium in Little Rock in all four years. All three insurers increased their lowest silver premium offerings by at least 19.0 percent in 2018.

From 2017 to 2019, the lowest silver premiums across insurers in the rural rating region were similar to those in Little Rock,

increasing by 21.0 percent on average in 2018 and 6.0 percent in 2019, before falling by 5.3 percent in 2020. Each insurer's premium changes varied slightly from those in Little Rock. As in Little Rock, Ambetter offered the lowest silver premium plan in the rural region. USABLE Mutual Insurance was very competitive, particularly in 2019, following a small reduction in its lowest silver premium. Currently, premiums in the rural area and Little Rock for all three insurers are the same.

# CALIFORNIA

California’s marketplaces tend to have several participating insurers, including commercial and former Medicaid-only insurers. The average lowest silver premium in California has been consistently below the national average (\$396 versus \$426). Premiums increased by 24.1 and 5.0 percent in 2018 and 2019 but declined by 4.2 percent in 2020. Table 6 provides insurer-level data for four California rating regions, three in major metropolitan areas (East Los Angeles, Sacramento, and San Diego) and one in a rural area (northern counties).

In the four study years, insurer participation in each of these areas remained steady. In each area, the average increase in the lowest silver premiums in 2018 was large (ranging from 11.0 percent in Sacramento to 32.1 percent in San Diego). These were followed by moderate single-digit increases for 2019 (ranging from virtually no change in San Diego to 6.5 percent in East Los Angeles). Each region has seen single-digit reductions in the lowest silver premiums this year.

**Table 6. Lowest Silver Monthly Premiums for a 40-Year-Old and Percent Change from 2017 to 2020, by Insurer in Selected California Markets**

Insurer	Lowest Silver Premium				Percent Change			
	2017	2018	2019	2020	2017–18	2018–19	2019–20	Average Annual Change, 2017–20
<b>East Los Angeles (Rating Region 15)</b>								
Anthem	\$287	N/A	N/A	\$380	N/A	N/A	N/A	N/A
Blue Shield of California	\$284	\$325	\$346	\$352	14.6%	6.3%	1.7%	7.4%
Health Net	\$269	\$325	\$337	\$327	20.8%	3.7%	-3.0%	6.7%
Kaiser Permanente	\$320	\$391	\$404	\$390	22.1%	3.4%	-3.6%	6.8%
L.A. Care Health Plan	\$258	\$316	\$338	\$342	22.5%	6.8%	1.3%	9.9%
Molina Healthcare	\$251	\$406	\$391	\$377	62.1%	-3.7%	-3.6%	14.6%
Oscar	N/A	\$408	\$443	\$357	N/A	8.5%	-19.4%	N/A
<b>Percent Change in Lowest Option Available</b>					<b>26.2%</b>	<b>6.5%</b>	<b>-3.0%</b>	<b>9.3%</b>
<b>San Diego</b>								
Anthem	\$444	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Blue Shield of California	\$406	\$394	\$419	\$427	-2.9%	6.3%	1.7%	1.7%
Health Net	\$307	\$392	\$395	\$359	27.6%	0.8%	-9.0%	5.4%
Kaiser Permanente	\$354	\$432	\$447	\$431	22.1%	3.4%	-3.6%	6.8%
Molina Healthcare	\$297	\$418	\$391	\$370	41.1%	-6.4%	-5.5%	7.6%
Sharp Health Plan	\$356	\$479	\$457	\$385	34.8%	-4.7%	-15.6%	2.7%
<b>Percent Change in Lowest Option Available</b>					<b>32.1%</b>	<b>-0.1%</b>	<b>-8.2%</b>	<b>6.6%</b>
<b>Sacramento</b>								
Blue Shield of California	\$479	\$446	\$474	\$482	-6.9%	6.3%	1.7%	0.2%
Health Net	\$501	\$584	\$620	\$648	16.5%	6.1%	4.5%	8.9%
Kaiser Permanente	\$402	\$478	\$494	\$468	19.1%	3.4%	-5.4%	5.2%
Western Health Advantage	\$426	\$557	\$596	\$573	30.7%	7.0%	-3.8%	10.4%
<b>Percent Change in Lowest Option Available</b>					<b>11.0%</b>	<b>6.3%</b>	<b>-1.3%</b>	<b>5.2%</b>

Insurer	Lowest Silver Premium				Percent Change			
	2017	2018	2019	2020	2017–18	2018–19	2019–20	Average Annual Change, 2017–20
<b>Northern Counties, Rural</b>								
Anthem	\$408	\$602	\$623	\$542	47.5%	3.6%	-13.1%	9.9%
Blue Shield of California	\$450	\$578	\$644	\$633	28.4%	11.3%	-1.7%	12.0%
Health Net	\$519	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Kaiser Permanente	\$402	\$478	\$494	\$468	19.1%	3.4%	-5.4%	5.2%
<b>Percent Change in Lowest Option Available</b>					<b>19.1%</b>	<b>3.4%</b>	<b>-5.4%</b>	<b>5.2%</b>
<b>State Average (All Regions)</b>	<b>\$317</b>	<b>\$394</b>	<b>\$413</b>	<b>\$396</b>	<b>24.1%</b>	<b>5.0%</b>	<b>-4.2%</b>	<b>7.7%</b>

Source: CoveredCalifornia, <https://www.coveredca.com/>

Note: Insurers instructed to load the cost of cost-sharing reductions into silver marketplace premiums only.

Note: N/A: Insurer was not participating in the marketplace this year

In East Los Angeles, the lowest silver premiums across the participating insurers increased by 26.2 and 6.5 percent in 2018 and 2019, before falling by 3.0 percent in 2020. Six insurers participated in the marketplace for each of the first three study years; Anthem left the market in 2018 but returned this year, and Oscar entered the market in the 2018 plan year and has remained. East Los Angeles has three Medicaid insurers offering plans in the marketplace, including L.A. Care Health Plan and Health Net, which have been among the three lowest-premium insurers for all four years. Molina Healthcare, the third Medicaid insurer, offered the plan with the lowest silver premium in 2017, but it had the largest premium increase in 2018, and its modest premium decrease in 2019 was too small for Molina to regain its previous lowest-cost position. With only small premium increases since 2017, Blue Shield of California has become more price competitive, possibly indicating success in negotiating provider rates within its network. The lowest silver premium offered by Oscar, the newest entrant, was higher than all of its competitors' premiums in both 2018 and 2019; however, it reduced its premiums by 19.4 percent this year, bringing Oscar's lowest silver premium closer to those of lower-cost plans.

The lowest silver marketplace premiums in San Diego stayed nearly constant in 2019, following a large increase in 2018, and fell by 8.2 percent this year. Two Medicaid insurers compete in the San Diego marketplace (Molina and Health Net), along with two provider-sponsored insurers (Kaiser Permanente and Sharp Health Plan) and a Blue Cross-affiliated insurer (Blue Shield of California). Anthem left the market in 2018. Our previous work has shown that competition from Medicaid insurers tends to be associated with lower premiums and smaller premium increases.<sup>14</sup> Health Net was the lowest cost insurer in 2018 and 2020, while Molina was the lowest cost insurer in 2019. Molina priced aggressively, lowering its lowest silver premium by 6.4 percent in 2019 and by another 5.5 percent this year; it currently offers the second-lowest silver premium, behind Health Net.

The Sacramento market insurers' lowest silver premiums increased by an average of 11.0 percent in 2018, the smallest average increase in all the California markets we studied. In 2019, the average premium increase was 6.3 percent, followed by a 1.3 percent decline this year. The same four insurers, Health Net, Kaiser Permanente, Western Health Advantage, and Blue Shield of California, have competed in the Sacramento marketplace for all four years. Competition from two provider-sponsored insurers (Kaiser Permanente and Western Health Advantage) seems to have motivated Blue Shield to price competitively, keeping the area's 2018 premium increases relatively low in a year characterized by large, double-digit increases in many other areas. In 2018, Blue Shield decreased its lowest silver premium by 6.9 percent, while its competitors in the area increased their premiums by 16.5 to 30.7 percent. (This was the year in which insurers were first instructed to load the costs associated with cost-sharing subsidies into the silver premiums.) Kaiser Permanente and Blue Shield now have the lowest premiums in this market. Surprisingly, Health Net, often one of the lower-priced insurers in other urban areas of the state, had the highest premiums in each of the four years.

In the Northern California region composed of rural counties, each insurers' lowest silver premiums increased greatly in 2018. The lowest silver premium increased by 19.1 and 3.4 percent in 2018 and 2019, before falling by 5.4 percent in 2020. In 2019, only three insurers participated in this region; Health Net, the highest-premium insurer, left after the 2017 plan year. This is the smallest number of participating insurers among the California markets we examined, but it is still more than most rural regions in our other study states. Following Health Net's exit, no Medicaid insurers participate in Northern California's marketplace. Kaiser Permanente currently offers the lowest silver premium in this market (\$468).

# FLORIDA

Several insurers, including two national Medicaid insurers, participate in the marketplaces we studied in Florida. The average lowest silver premium was below the national average in 2017. In 2018, premiums were about 5 percent higher than the national average, owing to a 41.8 percent

state average increase in lowest silver premiums. Currently, the average of the lowest silver premiums in the state is \$458, compared with \$426 nationally. Following the large increase in 2018, premiums remained fairly flat in 2019 and 2020. Table 7 shows data on the Miami and Tampa rating regions.

**Table 7. Lowest Silver Monthly Premiums for a 40-Year-Old and Percent Change from 2017 to 2020, by Insurer in Selected Florida Markets**

Insurer	Lowest Silver Premium				Percent Change			
	2017	2018	2019	2020	2017–18	2018–19	2019–20	Average Annual Change, 2017–20
<b>Miami</b>								
Ambetter	\$296	\$435	\$440	\$452	46.7%	1.2%	2.7%	15.1%
Florida Blue (Blue Cross Blue Shield of Florida)	\$422	\$583	\$543	\$524	37.9%	-6.9%	-3.4%	7.5%
Health Options	\$318	\$442	\$458	\$450	39.0%	3.5%	-1.6%	12.3%
Humana	\$477	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Molina Healthcare	\$320	\$567	\$568	\$551	77.5%	0.1%	-2.9%	19.9%
Oscar	N/A	N/A	N/A	\$445	N/A	N/A	N/A	N/A
<b>Percent Change in Lowest Option Available</b>					<b>46.7%</b>	<b>1.2%</b>	<b>1.1%</b>	<b>14.5%</b>
<b>Tampa</b>								
Ambetter	\$305	\$428	\$467	\$437	40.3%	9.2%	-6.4%	12.8%
Florida Blue (Blue Cross Blue Shield of Florida)	\$341	\$496	\$489	\$475	45.5%	-1.4%	-2.7%	11.7%
Bright Health	N/A	N/A	N/A	\$432	N/A	N/A	N/A	N/A
Health Options	\$325	\$481	\$491	\$446	48.1%	2.1%	-9.2%	11.1%
Humana	\$428	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Molina Healthcare	\$339	\$567	\$585	\$552	67.3%	3.1%	-5.6%	17.6%
Oscar	N/A	N/A	N/A	\$447	N/A	N/A	N/A	N/A
<b>Percent Change in Lowest Option Available</b>					<b>40.3%</b>	<b>9.2%</b>	<b>-7.5%</b>	<b>12.4%</b>
<b>State Average (All Regions)</b>	<b>\$323</b>	<b>\$458</b>	<b>\$467</b>	<b>\$458</b>	<b>41.8%</b>	<b>2.1%</b>	<b>-2.1%</b>	<b>12.3%</b>

Source: Healthcare.gov, <https://www.healthcare.gov/health-and-dental-plan-datasets-for-researchers-and-issuers/>

Note: Insurers instructed to load the cost of cost-sharing reductions into silver marketplace premiums only.

Note: N/A: Insurer was not participating in the marketplace this year

In 2018, the lowest silver premium in Miami increased by 46.7 percent and was followed by small increases in 2019 (1.2 percent) and 2020 (1.1 percent). Miami had five participating insurers in 2017: Ambetter, Health Options, Molina, Florida Blue, and Humana. Humana exited the marketplace before the 2018 plan year and has not returned. Oscar entered the Miami market this year with the lowest silver premium. Ambetter was the lowest-priced insurer in Miami from 2017 to 2019,

before being slightly undercut by Oscar this year. Unlike in many states where it participates, Molina was the highest-priced silver insurer in Miami (and Tampa) in 2019 and remains so today. The lowest silver premium in Miami stayed almost constant in 2019 and 2020 (increasing by 1.2 and 1.1 percent) suggests that insurers participating in this market overpriced their 2018 premiums at least somewhat relative to increasing medical costs.

Tampa's lowest premium increased by 40.3 and 9.2 percent in 2018 and 2019 and fell by 7.5 percent in 2020. The same insurers participated in the Tampa and Miami marketplaces in 2017. As in Miami, Humana exited the Tampa marketplace before the 2018 plan year. Before its exit, Humana was the highest-priced insurer. Oscar and Bright Health both entered

the Tampa market this year. In 2019 and 2020, Florida Blue was far more competitively priced in Tampa than in Miami. Ambetter has been the lowest-premium insurer in Tampa until this year, when it was slightly underbid by Bright Health. As in Miami, Oscar entered this market very competitively, and is one of the lower cost competitors in this market.

# GEORGIA

In Georgia, the Atlanta market had several insurers, and the other two regions we examined had two insurers, one of which was a Medicaid insurer. Georgia’s average lowest silver premiums are slightly lower than the national average for 2020 (\$419 versus \$426), following a 54.7 percent increase in 2018 and 10.0 and 3.5 percent decreases in 2019 and 2020. Table 8 provides data for three rating regions in Georgia: Atlanta, Augusta, and a rural region in the southeastern portion of the state. As noted, Atlanta has the most insurer participation of our selected regions in the state; three insurers (Anthem, Ambetter, and Kaiser Permanente) offered coverage in 2019 and five offer coverage today, because Oscar and CareSource, a former Medicaid-only insurer from the Midwest, entered the marketplace this year. Humana participated in the Atlanta marketplace in 2017 but exited

before 2018, like it did in the Florida markets we studied. Ambetter was the lowest-priced insurer in Atlanta for 2017 and 2018, before being displaced in 2019 by Anthem, who severely decreased its lowest silver premium for 2019. The year before that, Anthem had increased its lowest silver premium by 79.2 percent, making them the most expensive insurer by a large margin. However, as noted, Anthem greatly reduced its premiums for 2019, by 24.5 percent, bringing their least expensive option just slightly below Ambetter’s lowest premium. Ambetter increased its lowest silver offering by 57.8 and 5.4 percent in 2018 and 2019. After being undercut by Anthem in 2019, Ambetter reduced its lowest silver offering by 4.8 percent, making it the lowest-priced silver insurer in Atlanta again.

**Table 8. Lowest Silver Monthly Premiums for a 40-Year-Old and Percent Change from 2017 to 2020, by Insurer in Selected Georgia Markets**

Insurer	Lowest Silver Premium				Percent Change			
	2017	2018	2019	2020	2017–18	2018–19	2019–20	Average Annual Change, 2017–20
<b>Atlanta</b>								
Ambetter	\$264	\$417	\$440	\$419	57.8%	5.4%	-4.8%	16.6%
Anthem (Blue Cross Blue Shield of Georgia)	\$324	\$581	\$438	\$440	79.2%	-24.5%	0.4%	10.7%
CareSource	N/A	N/A	N/A	\$473	N/A	N/A	N/A	N/A
Humana	\$538	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Kaiser Permanente	\$372	\$421	\$529	\$545	13.3%	25.5%	3.1%	13.6%
Oscar	N/A	N/A	N/A	\$557	N/A	N/A	N/A	N/A
<b>Percent Change in Lowest Option Available</b>					<b>57.8%</b>	<b>5.1%</b>	<b>-4.5%</b>	<b>16.6%</b>
<b>Augusta</b>								
Ambetter	N/A	N/A	N/A	\$401	N/A	N/A	N/A	N/A
Anthem (Blue Cross Blue Shield of Georgia)	\$322	\$464	\$490	\$473	44.3%	5.5%	-3.5%	13.7%
<b>Percent Change in Lowest Option Available</b>					<b>44.3%</b>	<b>5.5%</b>	<b>-18.2%</b>	<b>7.6%</b>
<b>Selected Rural Region</b>								
Ambetter	N/A	N/A	\$324	\$367	N/A	N/A	13.3%	N/A
Anthem (Blue Cross Blue Shield of Georgia)	\$430	\$629	\$666	\$684	46.1%	6.0%	2.7%	16.7%
<b>Percent Change in Lowest Option Available</b>					<b>46.1%</b>	<b>-48.5%</b>	<b>13.3%</b>	<b>-5.2%</b>
<b>State Average (All Regions)</b>	<b>\$312</b>	<b>\$482</b>	<b>\$434</b>	<b>\$419</b>	<b>54.7%</b>	<b>-10.0%</b>	<b>-3.5%</b>	<b>10.3%</b>

Source: Healthcare.gov, <https://www.healthcare.gov/health-and-dental-plan-datasets-for-researchers-and-issuers/>

Note: Insurers instructed to load the cost of cost-sharing reductions into all silver plans, both on marketplace and off.

Note: N/A: Insurer was not participating in the marketplace this year

Anthem was the only insurer offering coverage in the Augusta marketplace until this year. It increased its lowest silver premiums in the rating region dramatically from 2017 to 2019; most of the increase occurred in the 2018 plan year, when Anthem increased its lowest silver premium by 44.3 percent. In 2019, Anthem increased its lowest premium again, by 5.5 percent, but then reduced its lowest premiums by 3.5 percent this year. Ambetter entered the Augusta market this year with premiums well below Anthem's (by \$72 per month for a 40-year-old), making it the lowest-cost insurer in the region, despite Anthem's 3.5 percent reduction.

Anthem was the only insurer in the southeastern rural rating region in 2017 and 2018, and the insurer raised its lowest silver premium by 46.1 percent in 2018, leaving the area's lowest-priced option well above the state average (\$629 compared with \$482 per month for a 40-year-old). However, Ambetter entered this market to compete with Anthem in the 2019 plan year. Entering with extremely aggressive pricing, Ambetter offered its lowest silver option for under half of Anthem's price (\$324 compared with \$666 for a 40-year-old). Currently, Ambetter's lowest premium is still well below Anthem's (\$367 versus \$684), even with a relatively large increase of 13.3 percent.

# INDIANA

Several insurers participated in Indiana’s market before 2017, but the state now has only two insurers, both of which are Medicaid insurers. Indiana’s lowest-priced silver premiums have been consistently below the national average (\$379 versus \$426 in 2020), even after 28.2 and 13.8 percent statewide average increases in 2018 and 2020. Table 9 shows data specific to Indianapolis and a rural region in the southern portion of the state. As noted, insurer participation decreased in Indianapolis after 2017, when Anthem and MDwise exited. Only the two Medicaid plans, Ambetter and CareSource, remain. The region’s lowest silver premium increased by 28.2

percent in 2018, 2.0 percent in 2019, and 13.3 percent in 2020. Both Ambetter and CareSource increased their premiums by about 28 percent in 2018. In 2019, Ambetter increased its lowest silver premium by another 2 percent, while CareSource increased its lowest-priced option by 7.9 percent. This allowed Ambetter to increase the small price advantage it had over CareSource in the preceding years. However, this reversed this year, because Ambetter increased its lowest silver premium by 18.6 percent and CareSource increased its lowest silver premium by 6.5 percent, making CareSource the lowest-cost insurer in the region.

**Table 9. Lowest Silver Monthly Premiums for a 40-Year-Old and Percent Change from 2017 to 2020, by Insurer in Selected Indiana Markets**

Insurer	Lowest Silver Premium				Percent Change			
	2017	2018	2019	2020	2017–18	2018–19	2019–20	Average Annual Change, 2017–20
<b>Indianapolis</b>								
Ambetter	\$284	\$364	\$372	\$441	28.2%	2.0%	18.6%	15.8%
Anthem	\$414	N/A	N/A	N/A	N/A	N/A	N/A	N/A
CareSource	\$286	\$366	\$396	\$421	28.1%	7.9%	6.5%	13.8%
MDwise	\$317	N/A	N/A	N/A	N/A	N/A	N/A	N/A
<b>Percent Change in Lowest Option Available</b>					<b>28.2%</b>	<b>2.0%</b>	<b>13.3%</b>	<b>14.0%</b>
<b>Selected Rural Region</b>								
Ambetter	\$201	\$268	\$257	\$330	33.1%	-4.0%	28.4%	17.9%
CareSource	\$258	\$295	\$312	\$332	14.2%	5.9%	6.5%	8.8%
<b>Percent Change in Lowest Option Available</b>					<b>33.1%</b>	<b>-4.0%</b>	<b>28.4%</b>	<b>17.9%</b>
<b>State Average (All Regions)</b>	<b>\$261</b>	<b>\$332</b>	<b>\$333</b>	<b>\$379</b>	<b>26.9%</b>	<b>0.3%</b>	<b>13.8%</b>	<b>13.1%</b>

Source: Healthcare.gov, <https://www.healthcare.gov/health-and-dental-plan-datasets-for-researchers-and-issuers/>

Note: Insurers instructed to load the cost of cost-sharing reductions into all marketplace metal tiers.

Note: N/A: Insurer was not participating in the marketplace this year

Ambetter and CareSource have been the only insurers offering coverage in the rural area in southern Indiana since 2017. The lowest silver premium increased by 33.1 percent in 2018 but fell by 4.0 percent in 2019. Ambetter has offered the lowest silver premium in the region across all four years. CareSource had a much smaller relative premium increase in 2018 (14.2 percent versus Ambetter’s 33.1 percent), but it was not low enough to undercut Ambetter’s pricing because

of the large 2017 pricing differential. In addition, Ambetter cut its lowest silver premium by 4.0 percent in 2019, while CareSource increased its premiums by 5.9 percent, setting its pricing further beyond that of Ambetter. However, Ambetter increased its premiums by 28.4 percent this year, compared with CareSource’s 6.5 percent increase. The two insurers’ lowest silver premiums are now virtually identical, with only \$2 per month (for a 40-year-old) separating the two.

# MARYLAND

Maryland has only two marketplace insurers but adopted a reinsurance program, which significantly affected its lowest silver premiums. The state’s average lowest silver premiums are below the national average (\$388 versus \$426 in 2020). Maryland’s average lowest silver premiums increased by 47.3 percent in 2018 but fell by 7.4 and 3.9 percent in 2019 and 2020 (Table 10). Cigna left the market in 2017, and no new insurers have entered since, leaving only CareFirst and Kaiser Permanente. Maryland introduced a reinsurance program in 2018 (for the 2019 plan year), and, consequently, insurers were able to lower their silver premiums in 2019. Each insurers’ lowest silver premiums are the same in both the Baltimore and Washington, D.C., suburbs. CareFirst had the largest increase in 2018 and then the largest reductions in 2019 and

2020, at 12.5 and 18.0 percent. Throughout the period, Kaiser Permanente had lower premiums than CareFirst in both markets. Because of the substantial reduction in CareFirst’s lowest silver premiums in 2019 and 2020, the difference between Kaiser Permanente’s and CareFirst’s premiums is now relatively small (\$388 versus \$401) in both markets. Following the creation of the reinsurance program, Kaiser Permanente’s premiums fell from \$436 in 2018 to \$388 today and CareFirst’s fell from \$559 in 2018 to \$401 today. The state also has a hospital rate-setting system, in which insurers cannot benefit from negotiating better rates than a competitor. The rate-setting system may also be helping keep premiums low relative to national standards.

**Table 10. Lowest Silver Monthly Premiums for a 40-Year-Old and Percent Change from 2017 to 2020, by Insurer in Selected Maryland-Area Markets**

Insurer	Lowest Silver Premium				Percent Change			
	2017	2018	2019	2020	2017–18	2018–19	2019–20	Average Annual Change, 2017–20
<b>Rating Region 1: Baltimore</b>								
CareFirst	\$355	\$559	\$489	\$401	57.5%	-12.5%	-18.0%	4.2%
Cigna	\$415	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Kaiser Permanente	\$309	\$436	\$404	\$388	41.1%	-7.4%	-3.9%	7.9%
<b>Percent Change in Lowest Option Available</b>					<b>41.1%</b>	<b>-7.4%</b>	<b>-3.9%</b>	<b>7.9%</b>
<b>Rating Region 3: Washington, D.C., Suburbs</b>								
CareFirst	\$355	\$559	\$489	\$401	57.5%	-12.5%	-18.0%	4.2%
Cigna	\$409	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Kaiser Permanente	\$309	\$436	\$404	\$388	41.1%	-7.4%	-3.9%	7.9%
<b>Percent Change in Lowest Option Available</b>					<b>41.1%</b>	<b>-7.4%</b>	<b>-3.9%</b>	<b>7.9%</b>
<b>State Average (All Regions)</b>	<b>\$296</b>	<b>\$436</b>	<b>\$404</b>	<b>\$388</b>	<b>47.3%</b>	<b>-7.4%</b>	<b>-3.9%</b>	<b>9.4%</b>

Source: Maryland Health Connection.

Note: Insurers instructed to load the cost of cost-sharing reductions into silver marketplace premiums only.

Note: N/A: Insurer was not participating in the marketplace this year

# MINNESOTA

Several insurers participate in Minneapolis' marketplace, and, like Maryland, Minnesota created a statewide reinsurance program. Minnesota's lowest silver premiums fell further below the national average this year because of three consecutive years of reduced average premiums. Table 11 only includes substate data for the Minneapolis region, because we do not have data on any of the state's rural areas for prior years. As noted, Minnesota instituted a statewide reinsurance program for its nongroup market in 2017, lowering premiums significantly. Between 2017 and 2018,

the lowest silver premium in Minneapolis fell by 13.2 percent. In the next two years, the lowest silver premium fell by 10.4 and 7.6 percent. Additionally, four insurers have consistently offered coverage in Minneapolis for the past four years: Blue Plus, HealthPartners, Medica, and Ucare. Ucare, a local Medicaid insurer, has consistently been among the lowest-priced insurers over these four years, and it again offers the lowest premium today. However, as of now, the competition and reinsurance program have driven all four participating insurers' lowest silver premiums fairly close together.

**Table 11. Lowest Silver Monthly Premiums for a 40-Year-Old and Percent Change from 2017 to 2020, by Insurer in Minneapolis, Minnesota**

Insurer	Lowest Silver Premium				Percent Change			
	2017	2018	2019	2020	2017–18	2018–19	2019–20	Average Annual Change, 2017–20
<b>Minneapolis</b>								
Blue Plus	\$419	\$425	\$309	\$294	1.7%	-27.5%	-4.7%	-11.1%
HealthPartners	\$363	\$327	\$304	\$295	-9.9%	-7.1%	-2.9%	-6.7%
Medica	\$395	\$352	\$300	\$306	-10.9%	-14.7%	2.1%	-8.1%
UCare	\$366	\$315	\$282	\$261	-13.8%	-10.4%	-7.6%	-10.6%
<b>Percent Change in Lowest Option Available</b>					<b>-13.2%</b>	<b>-10.4%</b>	<b>-7.6%</b>	<b>-10.4%</b>
<b>State Average (All Regions)</b>	<b>\$429</b>	<b>\$363</b>	<b>\$313</b>	<b>\$298</b>	<b>-15.5%</b>	<b>-13.6%</b>	<b>-5.0%</b>	<b>-11.5%</b>

Sources: 2017 data taken from the Robert Wood Johnson Foundation's HIX Compare dataset. 2018, 2019, and 2020 data were gathered from MNsure.

# NEW YORK

The regions we examined in New York had several participating insurers, both Medicaid and commercial. Because of community rating, New York’s premiums are not directly comparable with the U.S. average. New York’s lowest-cost silver premiums saw average increases of 10.9 percent in 2018, 15.0 percent in 2019, and 5.2 percent in 2020 (Table 12). The two regions we examined were New York City and Long

Island, which both saw exits from North Shore LIJ (now known as Northwell Health) and Affinity Health Plan. North Shore LIJ is a provider-sponsored insurer that had a very competitive lowest-cost silver premium in 2017. Affinity is a Medicaid insurer that had higher silver premiums than competing Medicaid insurers and left the market in 2018. In both markets, three Medicaid insurers have the lowest premiums.

**Table 12. Lowest Silver Monthly Premiums for a 40-Year-Old and Percent Change from 2017 to 2020, by Insurer in Selected New York Markets**

Insurer	Lowest Silver Premium				Percent Change			
	2017	2018	2019	2020	2017–18	2018–19	2019–20	Average Annual Change, 2017–20
<b>New York City</b>								
Affinity Health Plan	\$483	N/A	N/A	N/A	N/A	N/A	N/A	N/A
EmblemHealth	\$518	\$652	\$791	\$898	25.7%	21.4%	13.5%	20.1%
Empire Blue Cross Blue Shield	\$575	\$883	\$905	\$874	53.5%	2.6%	-3.5%	15.0%
Fidelis Care	\$456	\$510	\$598	\$622	11.7%	17.2%	4.0%	10.9%
Healthfirst	\$454	\$531	\$581	\$623	17.1%	9.5%	7.1%	11.2%
MetroPlus	\$468	\$504	\$591	\$619	7.7%	17.2%	4.8%	9.8%
NorthShore LIJ	\$487	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Oscar	\$483	\$538	\$590	\$657	11.3%	9.7%	11.3%	10.8%
UnitedHealthcare	\$714	\$825	\$803	\$888	15.5%	-2.7%	10.5%	7.5%
<b>Percent Change in Lowest Option Available</b>					<b>11.2%</b>	<b>15.3%</b>	<b>6.5%</b>	<b>11.0%</b>
<b>Long Island</b>								
Affinity	\$494	N/A	N/A	N/A	N/A	N/A	N/A	N/A
EmblemHealth	\$590	\$741	\$900	\$1,021	25.7%	21.4%	13.5%	20.1%
Empire Blue Cross Blue Shield	\$510	\$783	\$725	\$769	53.4%	-7.5%	6.1%	14.6%
Fidelis Care	\$446	\$480	\$562	\$585	7.5%	17.2%	4.0%	9.4%
Healthfirst	\$454	\$564	\$617	\$642	24.4%	9.5%	3.9%	12.3%
NorthShore LIJ	\$487	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Oscar	\$483	\$538	\$590	\$646	11.3%	9.7%	9.5%	10.2%
UnitedHealthcare	\$714	\$825	\$803	\$888	15.5%	-2.7%	10.5%	7.5%
<b>Percent Change in Lowest Option Available</b>					<b>7.5%</b>	<b>17.2%</b>	<b>4.0%</b>	<b>9.4%</b>
<b>State Average (All Regions)</b>	<b>\$439</b>	<b>\$486</b>	<b>\$559</b>	<b>\$589</b>	<b>10.9%</b>	<b>15.0%</b>	<b>5.2%</b>	<b>10.3%</b>

Source: New York State of Health

Note: N/A: Insurer was not participating in the marketplace this year

In New York City, Oscar has lowest silver premiums somewhat above the Medicaid insurers' premiums (\$657 per month compared with \$619 for the lowest-cost Medicaid insurer offering). The two commercial insurers, EmblemHealth and Empire Blue Cross Blue Shield and one of the state's Blue Cross Blue Shield insurers, United Healthcare, have substantially higher premiums. Currently, their premiums are \$898, \$874, and \$888, compared with Medicaid insurers' premiums that range from \$619 to \$623. It seems that these commercial insurance plans do not attempt to compete with the Medicaid insurers on price but rather on access to broader networks.

The Long Island marketplace is very similar to that of New York City; the lowest silver premium increased by 7.5 percent in 2018, 17.2 percent in 2019, and 4.0 percent in 2020. The lowest silver premiums were offered by the two Medicaid insurers, Fidelis Care and Healthfirst, followed closely by Oscar. Like in New York City, the three traditionally broad network plans, EmblemHealth, Empire Blue Cross Blue Shield, and United Healthcare, have far higher premiums (e.g., Emblem's lowest premium is currently \$1,021).

# NORTH CAROLINA

One insurer dominated the North Carolina rating regions we studied. However, two additional insurers have recently started participating in two of the urban markets we studied. Since 2017, the state’s average lowest silver premiums have been much higher than the national average, though premium reductions for this year bring the state closer to the national average (Table 13). Today the average lowest silver premium is \$507, versus \$426 per month nationally for a 40-year-old. The North Carolina average lowest silver premium increased by 16.3 percent in 2018 but decreased by

6.3 and 10.1 percent in 2019 and 2020. Blue Cross Blue Shield of North Carolina has a major presence in the state; it was the only insurer in Charlotte until this year (when Bright Health entered the market), is one of three insurers in the Raleigh-Durham market, and is the only insurer in the rural western region we examined. In Charlotte, the lowest silver premium increased by 16.7 percent in 2018 and fell by 23.7 percent in 2019. Because Bright Health entered the market with a very competitive price, the lowest silver premium declined by 19.4 percent this year.

**Table 13. Lowest Silver Monthly Premiums for a 40-Year-Old and Percent Change from 2017 to 2020, by Insurer in Selected North Carolina Markets**

Insurer	Lowest Silver Premium				Percent Change			
	2017	2018	2019	2020	2017–18	2018–19	2019–20	Average Annual Change, 2017–20
<b>Charlotte</b>								
Blue Cross Blue Shield of North Carolina	\$565	\$659	\$503	\$428	16.7%	-23.7%	-15.0%	-8.9%
Bright Health	N/A	N/A	N/A	\$405	N/A	N/A	N/A	N/A
<b>Percent Change in Lowest Option Available</b>					<b>16.7%</b>	<b>-23.7%</b>	<b>-19.4%</b>	<b>-10.5%</b>
<b>Raleigh-Durham</b>								
Ambetter	N/A	N/A	\$470	\$410	N/A	N/A	-12.6%	N/A
Blue Cross Blue Shield of North Carolina	\$489	\$571	\$452	\$437	16.7%	-20.9%	-3.2%	-3.7%
Cigna	\$447	\$541	\$541	\$522	20.8%	0.0%	-3.5%	5.3%
<b>Percent Change in Lowest Option Available</b>					<b>20.8%</b>	<b>-16.5%</b>	<b>-9.1%</b>	<b>-2.8%</b>
<b>Selected Rural Region</b>								
Blue Cross Blue Shield of North Carolina	\$537	\$610	\$664	\$661	13.5%	9.0%	-0.5%	7.2%
<b>Percent Change in Lowest Option Available</b>					<b>13.5%</b>	<b>9.0%</b>	<b>-0.5%</b>	<b>7.2%</b>
<b>State Average (All Regions)</b>	<b>\$517</b>	<b>\$601</b>	<b>\$563</b>	<b>\$507</b>	<b>16.3%</b>	<b>-6.3%</b>	<b>-10.1%</b>	<b>-0.7%</b>

Source: Healthcare.gov, <https://www.healthcare.gov/health-and-dental-plan-datasets-for-researchers-and-issuers/>

Note: Insurers instructed to load the cost of cost-sharing reductions into silver marketplace premiums only.

Note: N/A: Insurer was not participating in the marketplace this year

In Raleigh-Durham, Blue Cross Blue Shield of North Carolina competed with Cigna in 2017 and 2018, and Ambetter entered the market in 2019. Cigna had lower silver premiums than Blue Cross Blue Shield in 2018 and 2019, but Blue Cross Blue Shield reduced its lowest silver premium by 20.9 percent in 2019, becoming the lowest-priced insurer, despite Cigna having kept its 2018 pricing for 2019. Ambetter entered the Raleigh-Durham market competitively, with premiums close to Blue Cross Blue Shield’s lowest silver premium that year. Both Blue Cross Blue Shield and Cigna decreased their lowest

silver premiums for 2020 but not as much as Ambetter, which became the lowest-cost insurer.

In the rural region, where Blue Cross Blue Shield monopolizes the market, lowest silver premiums increased by 13.5 and 9.0 percent in 2018 and 2019. Premiums fell by 0.5 percent this year. The 2018 and 2019 lowest silver premium increases in this area led to a lowest premium of \$661 in 2020, well above the silver premiums in the urban markets and the national average.

# OHIO

The rating regions we examined in Ohio have had several insurers, including three large national or multistate Medicaid insurers. Ohio's average lowest silver premiums remain well below the national average (\$353 versus \$426 in 2020), despite 38.2 and 3.3 percent increases in 2018 and 2019. Table 14 provides data for three Ohio rating regions: Columbus, Cleveland, and a rural rating region in the state's

southeast. Historically, the metropolitan markets in Ohio have had significant insurer participation. From 2017 to 2019, Columbus and Cleveland each had between four and five competing marketplace insurers. Anthem left both metropolitan markets in 2018. Ambetter from Buckeye Health Plan entered Columbus in 2018, and Oscar entered Cleveland's marketplace in 2018 and Columbus' in 2019.

**Table 14. Lowest Silver Monthly Premiums for a 40-Year-Old and Percent Change from 2017 to 2020, by Insurer in Selected Ohio Markets**

Insurer	Lowest Silver Premium				Percent Change			
	2017	2018	2019	2020	2017–18	2018–19	2019–20	Average Annual Change, 2017–20
<b>Columbus</b>								
Ambetter from Buckeye Health Plan	N/A	\$417	\$401	\$366	N/A	-3.7%	-8.8%	-6.3%
Anthem	\$342	N/A	N/A	N/A	N/A	N/A	N/A	N/A
CareSource	\$284	\$385	\$474	\$460	35.4%	23.3%	-3.0%	17.4%
Medical Mutual of Ohio	\$326	\$423	\$437	\$493	29.9%	3.4%	12.7%	14.8%
Molina Healthcare	\$301	\$461	\$444	\$391	53.5%	-3.7%	-12.1%	9.1%
Oscar	N/A	N/A	\$382	\$407	N/A	N/A	6.7%	N/A
<b>Percent Change in Lowest Option Available</b>					<b>35.4%</b>	<b>-0.8%</b>	<b>-4.1%</b>	<b>8.8%</b>
<b>Cleveland</b>								
Ambetter from Buckeye Health Plan	\$224	\$307	\$323	\$322	36.8%	5.1%	-0.1%	12.8%
Anthem	\$363	N/A	N/A	N/A	N/A	N/A	N/A	N/A
CareSource	\$253	\$319	\$371	\$360	26.2%	16.1%	-2.9%	12.5%
Medical Mutual of Ohio	\$376	\$364	\$360	\$407	-3.1%	-1.2%	13.2%	2.7%
Molina Healthcare	\$252	\$346	\$366	\$330	37.2%	5.7%	-9.8%	9.3%
Oscar	N/A	\$434	\$466	\$453	N/A	7.4%	-2.6%	N/A
<b>Percent Change in Lowest Option Available</b>					<b>36.8%</b>	<b>5.1%</b>	<b>-0.1%</b>	<b>12.8%</b>
<b>Selected Rural Region</b>								
Anthem	\$413	N/A	\$555	\$619	N/A	N/A	11.7%	N/A
CareSource	\$347	\$579	\$708	\$618	66.8%	22.2%	-12.7%	21.2%
Medical Mutual of Ohio	N/A	N/A	N/A	\$579	N/A	N/A	N/A	N/A
Molina Healthcare	\$290	\$415	\$469	\$386	43.2%	12.8%	-17.6%	10.0%
<b>Percent Change in Lowest Option Available</b>					<b>43.2%</b>	<b>12.8%</b>	<b>-17.6%</b>	<b>10.0%</b>
<b>State Average (All Regions)</b>	<b>\$251</b>	<b>\$347</b>	<b>\$359</b>	<b>\$353</b>	<b>38.2%</b>	<b>3.3%</b>	<b>-1.4%</b>	<b>12.1%</b>

Source: Healthcare.gov, <https://www.healthcare.gov/health-and-dental-plan-datasets-for-researchers-and-issuers/>

Note: Insurers instructed to load the cost of cost-sharing reductions into silver marketplace premiums only.

Note: N/A: Insurer was not participating in the marketplace this year

The lowest silver premium in Columbus, like much of the United States, increased significantly in the 2018 plan year, by 35.4 percent. However, the lowest silver premium decreased by 0.8 percent in 2019 and by another 4.1 percent this year. CareSource has offered marketplace coverage in all four years and offered the lowest-priced option in 2017 and 2018. However, inconsistent with the market in 2019 generally, CareSource increased its lowest-priced silver option considerably, by 23.3 percent, thus becoming the highest-priced insurer in this market. Among other insurers in the Columbus marketplace, changes to lowest silver premiums ranged from a 3.7 percent decrease to a 23.3 percent increase. In Columbus, Oscar offered the lowest premium silver option for 2019, lower than the that for the three Medicaid insurers and Medical Mutual of Ohio. Both Ambetter and Molina currently have the two lowest premiums.

The lowest silver premium in Cleveland increased by 36.8 and 5.1 percent in 2018 and 2019. The Cleveland rating region's marketplace has had three Medicaid plans throughout the study period. Ambetter has offered the lowest silver premium plan since 2018, despite the aforementioned 36.8 and 5.1

percent increases in 2018 and 2019. Molina and CareSource also increased their lowest premium offerings considerably in 2018 (by 37.2 and 26.2 percent). Their increases continued in 2019, but CareSource increased its lowest premium by 16.1 percent, making it the only insurer in that market with a double-digit percent increase that year. Unlike in Columbus, Oscar was the highest-priced insurer in Cleveland in 2018 and 2019 and remains so today. Ambetter still has the lowest silver premiums.

The lowest silver premiums in our selected rural region increased by 43.2 and 12.8 percent in 2018 and 2019, considerably larger increases than those in Cleveland and Columbus. Three insurers participated in this area in 2019, up from two in 2018. Anthem participated in 2017, left the market for the 2018 plan year, and returned for 2019. Medical Mutual of Ohio entered this year. Molina has been the lowest premium insurer in this region across the four study years; its lowest premium for a 40-year-old is currently \$386 per month. Between 2017 and 2019, CareSource more than doubled its lowest-priced silver premiums. Though Anthem returned to this market in 2019, it still has relatively high premiums.

# OREGON

Several insurers participated in both the rural and urban markets in the Oregon rating regions we analyzed. Oregon’s lowest silver premiums are about the same as the national average (\$424 versus \$426 in 2020), following 24.8 and 9.1 percent increases in 2018 and 2019. Table 15 provides data on marketplace-participating insurers in Portland and a rural region in eastern Oregon. The lowest silver premium in Portland increased by 24.2 and 8.8 percent in 2018 and 2019, before falling by 2.7 percent in 2020. Insurer participation has been consistently high in Portland throughout the study period, with the same five insurers competing. Kaiser

Permanente offered the lowest silver premium option in the region through 2019. Currently, four competitors have lower silver premiums than Kaiser, though the premiums are all similar. There are no Medicaid insurers in the Portland marketplace, but the high and consistent insurer participation has helped hold premium levels down. Several provider-sponsored insurers (Providence Health Plan, Kaiser) participate in Portland’s marketplace, and these insurers tend to have narrow networks that give their own providers preferential pricing.

**Table 15. Lowest Silver Monthly Premiums for a 40-Year-Old and Percent Change from 2017 to 2020, by Insurer in Selected Oregon Markets**

Insurer	Lowest Silver Premium				Percent Change			
	2017	2018	2019	2020	2017–18	2018–19	2019–20	Average Annual Change, 2017–20
<b>Portland</b>								
BridgeSpan Health Company	\$361	\$391	\$420	\$421	8.2%	7.3%	0.3%	5.2%
Kaiser Permanente	\$302	\$375	\$408	\$438	24.2%	8.8%	7.4%	13.2%
Moda Health	\$386	\$405	\$433	\$414	4.9%	6.9%	-4.4%	2.4%
PacificSource Health Plans	\$442	\$484	\$425	\$436	9.5%	-12.2%	2.6%	-0.5%
Providence Health Plan	\$326	\$380	\$414	\$397	16.6%	8.9%	-4.1%	6.8%
<b>Percent Change in Lowest Option Available</b>					<b>24.2%</b>	<b>8.8%</b>	<b>-2.7%</b>	<b>9.5%</b>
<b>Selected Rural Region</b>								
Kaiser Permanente	\$302	\$375	\$408	\$438	24.2%	8.8%	7.4%	13.2%
Moda Health	\$397	\$436	\$478	\$455	9.8%	9.6%	-4.8%	4.7%
PacificSource Health Plans	\$446	\$488	\$445	\$455	9.4%	-8.8%	2.2%	0.7%
Providence Health Plan	\$490	\$456	\$517	\$496	-6.9%	13.4%	-4.1%	0.4%
<b>Percent Change in Lowest Option Available</b>					<b>24.2%</b>	<b>8.8%</b>	<b>7.4%</b>	<b>13.2%</b>
<b>State Average (All Regions)</b>	<b>\$311</b>	<b>\$388</b>	<b>\$424</b>	<b>\$424</b>	<b>24.8%</b>	<b>9.1%</b>	<b>0.1%</b>	<b>10.9%</b>

Source: Healthcare.gov, <https://www.healthcare.gov/health-and-dental-plan-datasets-for-researchers-and-issuers/>

Note: Insurers instructed to load the cost of cost-sharing reductions into silver plans, both on and off marketplace.

Note: N/A: Insurer was not participating in the marketplace this year

Premiums increased at about the same rates in the rural Oregon region and Portland. In the rural region, the lowest silver premiums increased by 24.2 percent for the 2018 plan year, 8.8 percent for 2019, and 7.4 percent for 2020. Again, Kaiser Permanente was the lowest-priced insurer in all four

years and offered the same premiums available in Portland. Though Kaiser’s premiums increased faster than other insurers’ premiums, Kaiser remained the lowest-priced insurer in 2020 because it priced well below the other insurers in 2017.

# RHODE ISLAND

Only two insurers participated in Rhode Island’s marketplace during the study period, but one was a Medicaid insurer. Rhode Island’s lowest silver premiums were quite low compared with national standards, and the entire state comprises only one rating region (Table 16). The state’s participating insurers were Neighborhood Health Plan and Blue Cross Blue Shield of Rhode Island. Neighborhood Health Plan is a local Medicaid insurer that has successfully kept its premium increases low, going up 18.4 percent in 2018, 9.7 percent in 2019, and 0.3 percent in 2020. The pricing

gap between Blue Cross Blue Shield and Neighborhood has grown in recent years, with a large difference remaining (\$316 versus \$372). Blue Cross Blue Shield increased its lowest silver premium by 45.2 percent in 2018, lowering it by only 1.0 percent in 2019 and 2.4 percent in 2020. In addition to the competition between these two insurers, the state’s Division of Insurance regulation reviews insurer contracts with hospitals; this process helps keep hospital costs low, which helps keep premiums lower than they otherwise would be.

**Table 16. Lowest Silver Monthly Premiums for a 40-Year-Old and Percent Change from 2017 to 2020, by Insurer in Rhode Island**

Insurer	Lowest Silver Premium				Percent Change			
	2017	2018	2019	2020	2017–18	2018–19	2019–20	Average Annual Change, 2017–20
<b>Entire State</b>								
Blue Cross Blue Shield of Rhode Island	\$265	\$385	\$381	\$372	45.2%	-1.0%	-2.4%	12.0%
Neighborhood Health Plan of Rhode Island	\$243	\$287	\$315	\$316	18.4%	9.7%	0.3%	9.2%
<b>State Average Change in Lowest Option Available</b>	<b>\$243</b>	<b>\$287</b>	<b>\$315</b>	<b>\$316</b>	<b>18.4%</b>	<b>9.7%</b>	<b>0.3%</b>	<b>9.2%</b>

Source: Healthsource RI.

Note: Insurers instructed to load the cost of cost-sharing reductions into silver marketplace premiums only.

Note: N/A: Insurer was not participating in the marketplace this year

# TEXAS

Several insurers, including two national Medicaid insurers, participated in the urban Texas markets we studied. Texas' lowest silver premiums have consistently been below the national average, though the state average lowest silver premiums increased by 41.3 percent in 2018, 2.5 percent in 2019, and 0.6 percent in 2020. Table 17 provides data on two major Texas metropolitan regions, Dallas and Houston. We did not study a rural area because the state grouped nearly every rural county into a single rating region, resulting in different insurers participating in different counties with different lowest silver premiums. The lowest silver premiums

in the Dallas market increased by 48.4 percent in 2018 and fell by 0.2 and 0.7 percent in 2019 and 2020. The same three insurers have participated in this market since the 2017 plan year: Molina, Ambetter, and Blue Cross and Blue Shield of Texas. Oscar entered the Dallas market this year. Ambetter and Molina have been in tight competition over this period, particularly in 2018 and 2019. Currently, all four insurers have similar premiums, and Blue Cross Blue Shield continues to be the most expensive insurer in the region despite offering an HMO product.

**Table 17. Lowest Silver Monthly Premiums for a 40-Year-Old and Percent Change from 2017 to 2020, by Insurer in Selected Texas Markets**

Insurer	Lowest Silver Premium				Percent Change			
	2017	2018	2019	2020	2017–18	2018–19	2019–20	Average Annual Change, 2017–20
<b>Dallas/Fort Worth</b>								
Ambetter	\$322	\$415	\$410	\$410	29.0%	-1.1%	-0.2%	8.4%
Blue Cross and Blue Shield of Texas	\$449	\$570	\$555	\$428	27.0%	-2.6%	-23.0%	-1.6%
Molina Healthcare	\$277	\$411	\$431	\$408	48.4%	4.7%	-5.3%	13.7%
Oscar	N/A	N/A	N/A	\$411	N/A	N/A	N/A	N/A
<b>Percent Change in Lowest Option Available</b>					<b>48.4%</b>	<b>-0.2%</b>	<b>-0.7%</b>	<b>13.7%</b>
<b>Houston</b>								
Ambetter	NA	\$390	\$385	\$381	NA	-1.1%	-1.1%	-1.1%
Blue Cross and Blue Shield of Texas	\$431	\$545	\$508	\$422	26.5%	-6.8%	-16.9%	-0.7%
Community Health Choice	\$311	\$460	\$464	\$464	48.0%	1.0%	0.0%	14.3%
Molina Healthcare	\$283	\$399	\$418	\$395	41.3%	4.6%	-5.4%	11.9%
Oscar	N/A	N/A	N/A	\$416	N/A	N/A	N/A	N/A
<b>Percent Change in Lowest Option Available</b>					<b>37.9%</b>	<b>-1.1%</b>	<b>-1.1%</b>	<b>10.5%</b>
<b>State Average (All Regions)</b>	<b>\$279</b>	<b>\$394</b>	<b>\$403</b>	<b>\$406</b>	<b>41.3%</b>	<b>2.5%</b>	<b>0.6%</b>	<b>13.4%</b>

Source: Healthcare.gov, <https://www.healthcare.gov/health-and-dental-plan-datasets-for-researchers-and-issuers/>

Note: Insurers instructed to load the cost of cost-sharing reductions into silver marketplace premiums only.

Note: N/A: Insurer was not participating in the marketplace this year

The lowest silver premiums in Houston increased by 37.9 percent in 2018 but fell by 1.1 percent in both 2019 and 2020. Molina, Community Health Choice (a local Medicaid insurer), and Blue Cross Blue Shield of Texas offered coverage throughout the study period in Houston. They were joined by Ambetter in 2018 and Oscar this year. Molina offered the lowest silver premium option in 2017, but Ambetter became

the lowest-cost silver insurer when it entered the market. Like in Dallas, Blue Cross Blue Shield was the highest-priced insurer from 2017 to 2019, despite a lower-than-average premium increase in 2018 and a 6.8 percent decrease to the lowest silver premium in 2019. With another 16.9 percent premium reduction this year, Blue Cross Blue Shield's silver premiums are no longer the highest.

# VIRGINIA

Several insurers have participated in the Virginia markets we studied, and the number varies by rating region. Additionally, several insurers entered and exited the market during the study period. Virginia's average lowest silver premium was below the national average in 2017, but 64.0 and 3.9 percent increases in 2018 and 2019 have driven current premiums well above the national average (\$504 versus \$426). Table 18 shows data on three markets in Virginia: Richmond, Virginia Beach/Norfolk, and the Washington, D.C., suburbs. Several insurers have entered and exited the Richmond market since 2017. Aetna and UnitedHealthcare both left before the 2018 plan year, and Optima Health, a provider-sponsored insurer, entered in 2018. Virginia Premier Health Plan, a local Medicaid insurer, entered for the 2019 plan year. Three insurers participated in all four years: Cigna, Anthem HealthKeepers, and Kaiser Permanente. In 2018, Cigna,

Anthem HealthKeepers, and Kaiser Permanente increased their lowest silver premiums considerably, with a 51.6 percent increase in the lowest-cost offering. Aetna offered the lowest silver premium in 2017 but left most of the ACA marketplaces after that plan year. Following Aetna's exit, Cigna became the lowest silver premium insurer in 2018 and remained so for the 2019 plan year. Virginia Premier entered the market in 2019 and was one of the lowest-priced silver insurers then and remains so today. Optima Health entered the marketplace in 2018 with extraordinarily higher premiums than those of other participating insurers, and even an 11 percent premium decrease in their lowest silver offering in 2019 could not bring their premiums close to those of other insurers in the Richmond area. However, Optima became one of the lowest-priced insurers this year. Anthem HealthKeepers, an HMO product, is currently the lowest-cost silver plan.

**Table 18. Lowest Silver Monthly Premiums for a 40-Year-Old and Percent Change from 2017 to 2020, by Insurer in Selected Virginia Markets**

Insurer	Lowest Silver Premium				Percent Change			
	2017	2018	2019	2020	2017–18	2018–19	2019–20	Average Annual Change, 2017–20
<b>Richmond</b>								
Aetna	\$289	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Anthem HealthKeepers	\$303	\$497	\$531	\$489	64.2%	6.7%	-8.0%	17.3%
Cigna	\$296	\$439	\$490	\$502	48.0%	11.7%	2.5%	19.3%
Kaiser Permanente	\$329	\$447	\$638	\$592	36.0%	42.7%	-7.3%	21.6%
Piedmont Community Health Plan	\$357	\$572	\$674	N/A	60.0%	17.9%	N/A	N/A
Optima Health	N/A	\$900	\$801	\$528	N/A	-11.0%	-34.1%	N/A
Oscar	N/A	N/A	N/A	\$520	N/A	N/A	N/A	N/A
UnitedHealthcare	\$333	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Virginia Premier Health Plan	N/A	N/A	\$504	\$514	N/A	N/A	2.1%	N/A
<b>Percent Change in Lowest Option Available</b>					<b>51.6%</b>	<b>11.7%</b>	<b>-0.3%</b>	<b>19.1%</b>
<b>Virginia Beach/Norfolk</b>								
Aetna	\$336	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Anthem HealthKeepers	\$338	N/A	\$542	\$515	N/A	N/A	-5.0%	N/A
Optima Health	\$376	\$641	\$602	\$478	70.5%	-6.1%	-20.6%	8.3%
<b>Percent Change in Lowest Option Available</b>					<b>90.8%</b>	<b>-15.4%</b>	<b>-11.9%</b>	<b>12.5%</b>

Insurer	Lowest Silver Premium				Percent Change			
	2017	2018	2019	2020	2017–18	2018–19	2019–20	Average Annual Change, 2017–20
<b>Washington D.C. Suburbs <sup>1</sup></b>								
Anthem HealthKeepers	\$336	\$511	\$552	\$514	52.3%	8.0%	-6.9%	15.3%
Cigna	\$313	\$458	\$508	\$527	46.1%	11.0%	3.8%	18.9%
Innovation Health	\$296	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Kaiser Permanente	\$329	\$447	\$638	\$592	36.0%	42.7%	-7.3%	21.6%
UnitedHealthcare	\$319	N/A	N/A	N/A	N/A	N/A	N/A	N/A
<b>Percent Change in Lowest Option Available</b>					<b>51.4%</b>	<b>13.5%</b>	<b>1.2%</b>	<b>20.3%</b>
<b>State Average (All Regions)</b>	<b>\$309</b>	<b>\$506</b>	<b>\$526</b>	<b>\$504</b>	<b>64.0%</b>	<b>3.9%</b>	<b>-4.2%</b>	<b>17.8%</b>

Source: Healthcare.gov, <https://www.healthcare.gov/health-and-dental-plan-datasets-for-researchers-and-issuers/>

Notes: Insurers instructed to load the cost of cost-sharing reductions into silver marketplace premiums only.

1. We exclude CareFirst from this analysis since it only serves a small portion of the entire region.

Note: N/A: Insurer was not participating in the marketplace this year

The lowest silver premiums in Virginia Beach/Norfolk increased by 90.8 percent in 2018 but fell by 15.4 and 11.9 percent in 2019 and 2020. Optima Health, linked to their own hospital system in Virginia Beach and Norfolk, is the only insurer participating in this market in all four years. Aetna left the marketplace after 2017, like they did in many marketplaces around the country. Similarly, Anthem HealthKeepers left the marketplace in 2018 but returned in 2019, as it did elsewhere in the state. Optima increased its lowest silver premium by 70.5 percent after 2017, making it an extremely high-priced insurer in 2018. Optima reduced its premiums by 6.1 and 20.6 percent in 2019 and 2020 to become the lowest-cost insurer this year. Anthem reentered the marketplace in 2019 with a lowest silver premium considerably below that offered by Optima Health in 2019 but not in 2020.

The lowest silver premiums in the Washington, D.C., suburbs increased by 51.4 and 13.5 percent in 2018 and 2019, and only slightly increased by 1.2 percent in 2020. Five insurers

competed in this market in 2017, but this number dropped to three for 2018, 2019, and 2020. Carefirst, another licensee of the Blue Cross Blue Shield Association, offers marketplace coverage only in the area of this rating region where Anthem does not participate. (For comparison, we concentrate our analysis only on the part of the D.C. suburbs not served by CareFirst.) Innovation Health, a provider-sponsored insurer linked to the dominant hospital system in Northern Virginia, left the marketplace after the 2017 plan year despite being the lowest-priced insurer. Innovation was a collaboration between the Inova health system and Aetna. However, when Aetna left the marketplaces nationwide, this product was no longer offered in the Virginia marketplace. United Healthcare left that year as well. Cigna was the lowest-priced insurer in 2019, and it was the second-lowest-priced insurer in 2017 and 2018. Anthem's HMO product, HealthKeepers, was the second-lowest-priced insurer in this market by 2019 and is the lowest-priced insurer today. Kaiser offered the lowest silver premium in 2018, but its 42.7 percent increase for 2019 made it the highest-priced insurer in both 2019 and 2020.

# WASHINGTON

Several insurers participate in Washington's marketplace, including two national Medicaid insurers. Washington's average lowest silver premiums have been consistently below the national average over this period; currently, their state average lowest silver premium for a 40-year-old is \$379, compared with \$426 nationally. The average premiums increased by 37.0 percent in 2018, 13.2 percent in 2019, and 3.0 percent in 2020. Table 19 provides data for the Seattle rating region. In response to insurers' requests, Washington redrew its premium rating regions beginning in the 2019 plan year, but the Seattle rating region remained the same. The state's marketplace insurers wanted to expand the number of regions to more easily comply with regulations limiting the premium difference between the cheapest and most expensive rating regions.<sup>18</sup> Seven insurers sold coverage in Seattle through the marketplace in 2017, including several Medicaid, Blue Cross-affiliated, and regional insurers. After

2017, however, three insurers (BridgeSpan Health Company, LifeWise, and Regence) left the marketplace. Both BridgeSpan and LifeWise returned this year. LifeWise is owned by Premera Blue Cross, and both offer two of the three most expensive lowest silver premiums in this region this year. Premera has maintained a presence in this market during all four years. Despite Bridgespan's exit and reentry, this marketplace has remained relatively competitive, with fairly low premiums among the Medicaid insurers and Kaiser Permanente. Coordinated Care, a subsidiary of the Centene Corporation, offered the lowest-premium silver option from 2017 to 2019. Molina, another national Medicaid insurer, had the second lowest silver premiums from 2017 to 2019, and offered the lowest-premium silver option in 2020. Kaiser Permanente (formerly Group Health) remains in the market as well, and its lowest silver option continues to be priced reasonably competitively with those of the Medicaid insurers.

**Table 19. Lowest Silver Monthly Premiums for a 40-Year-Old and Percent Change from 2017 to 2020, by Insurer in Seattle, Washington**

Insurer	Lowest Silver Premium				Percent Change			
	2017	2018	2019	2020	2017–18	2018–19	2019–20	Average Annual Change 2017–20
<b>Seattle</b>								
BridgeSpan Health Company	\$315	N/A	N/A	\$447	N/A	N/A	N/A	N/A
Coordinated Care	\$235	\$328	\$368	\$380	39.6%	12.3%	3.2%	17.4%
Group Health (Kaiser Permanente)	\$280	\$404	\$439	\$405	44.2%	8.7%	-7.7%	13.1%
LifeWise	\$324	N/A	N/A	\$419	N/A	N/A	N/A	N/A
Molina HealthCare	\$257	\$385	\$412	\$379	49.7%	6.9%	-8.1%	13.7%
Premera Blue Cross	\$404	\$517	\$520	\$515	27.9%	0.7%	-0.9%	8.5%
Regence	\$326	N/A	N/A	N/A	N/A	N/A	N/A	N/A
<b>Percent Change in Lowest Option Available</b>					<b>39.6%</b>	<b>12.3%</b>	<b>2.9%</b>	<b>17.3%</b>
<b>State Average (All Regions)</b>	<b>\$238</b>	<b>\$326</b>	<b>\$368</b>	<b>\$379</b>	<b>37.0%</b>	<b>13.2%</b>	<b>3.0%</b>	<b>16.9%</b>

Source: Washington Healthplan Finder.

Note: Insurers instructed to load the cost of cost-sharing reductions into silver marketplace premiums only.

Note: Group Health is now owned by Kaiser Permanente. It is now marketed as Kaiser Permanente but was marketed as Group Health during this time period.

Note: N/A: Insurer was not participating in the marketplace this year

# WEST VIRGINIA

West Virginia has had little marketplace competition, though a Medicaid insurer now participates in each of our study regions. Currently, West Virginia's average lowest silver premiums remain well above the 2020 national average (\$601 versus \$426 for a 40-year-old). Table 20 provides data for two rating regions: Charleston and a rural region in northeastern West Virginia. The same two insurers have participated in both regions in all four study years: CareSource, a regional Medicaid insurer, and Highmark Blue Cross Blue Shield. Highmark is a Blue Cross affiliate and has historically dominated the West Virginia nongroup insurance market. CareSource began offering nongroup marketplace coverage in the state in 2017 and has offered the lowest-priced silver plans in both

regions in each of the four years. The average increase in the lowest silver premiums in these markets was well below the national average in 2018, likely because the state instructed insurers to load the cost of the cost-sharing reductions into the premiums of all metal tiers both on and off marketplace, instead of in the silver premiums alone. However, the 2019 lowest silver premium increases were well above the national average, keeping the state's silver premiums high during our study period. Still, CareSource provides a lower-priced silver option for consumers in the state, with the differential between its most affordable plan and that of Highmark being particularly significant in the Charleston area.

**Table 20. Lowest Silver Monthly Premiums for a 40-Year-Old and Percent Change from 2017 to 2020, by Insurer in Selected West Virginia Markets**

Insurer	Lowest Silver Premium				Percent Change			
	2017	2018	2019	2020	2017–18	2018–19	2019–20	Average Annual Change, 2017–20
<b>Charleston</b>								
CareSource	\$505	\$555	\$611	\$653	9.8%	10.2%	6.8%	8.9%
Highmark Blue Cross Blue Shield	\$541	\$653	\$713	\$747	20.7%	9.1%	4.8%	11.3%
<b>Percent Change in Lowest Option Available</b>					<b>9.8%</b>	<b>10.2%</b>	<b>6.8%</b>	<b>8.9%</b>
<b>Selected Rural Region</b>								
CareSource	\$485	\$555	\$614	\$656	14.5%	10.7%	6.8%	10.6%
Highmark Blue Cross Blue Shield	\$493	\$595	\$649	\$680	20.7%	9.1%	4.8%	11.3%
<b>Percent Change in Lowest Option Available</b>					<b>14.5%</b>	<b>10.7%</b>	<b>6.8%</b>	<b>10.6%</b>
<b>State Average (All Regions)</b>	<b>\$440</b>	<b>\$514</b>	<b>\$562</b>	<b>\$601</b>	<b>16.9%</b>	<b>9.3%</b>	<b>6.9%</b>	<b>11.0%</b>

Source: Healthcare.gov, <https://www.healthcare.gov/health-and-dental-plan-datasets-for-researchers-and-issuers/>

Note: Insurers instructed to load the cost of cost-sharing reductions into all metal tiers, both on marketplace and off.

# CONCLUSION

The ACA's nongroup insurance marketplaces experienced considerable turmoil between 2017 and 2019. Threats to the ACA, from the elimination of direct funding of cost-sharing reductions to not enforcing the individual mandate, along with an array of other regulatory changes caused insurers to increase premiums dramatically in 2018; the national average increase in insurers' lowest silver premium in 2018 was 29.7 percent, and twenty-eight states had average increases that exceeded that level. In 2019, national average lowest silver premiums were stable; many states' average premiums fell while most others' premiums increased only modestly. Lowest silver premiums have fallen by 3.5 percent this year, suggesting that the market is stabilizing following the shocks of 2017 and 2018. In addition, states took action to stabilize their marketplaces with reinsurance programs, which are clearly associated with lower reported premiums.<sup>19</sup>

The specific markets we examined experienced a considerable number of insurer entries and exits. In 2018, far more insurers left marketplaces than entered them, and insurers and policymakers shared skepticism about the stability of the marketplaces. In 2019, the reverse was true, suggesting that insurers came to see the marketplaces as more stable, even with the repeal of the individual mandate penalty starting in 2019. In several instances, insurers that exited the marketplaces after 2017 reentered for the 2019 plan year. Many more insurers, like Bright Health and Oscar, have entered than exited markets in 2020. In fact, more insurers participate per region now than in 2017 (3.9 compared with 3.8).

Continued variation in premiums across states, within states, and across metropolitan and rural areas is associated with market competition and other factors (Figure 1). Currently, the national average lowest silver premium for a 40-year-old is \$426, but six states have average lowest silver premiums exceeding \$550 per month. In each of these states, one insurer dominated, leaving little market competition. Additionally, all these states maintain relatively lax regulatory environments, permitting grandfathered plans; allowing the sale of full-year, short-term limited duration plans; and not regulating health care-sharing ministries. At the other end of the spectrum, eight states currently have average lowest silver premiums below \$360 per month. Each of these states' marketplaces include multiple competing insurers and at least one participating Medicaid insurer.

Marketplaces continued to evolve from 2017 to 2019; much of the change appears attributable to the policy upheaval

and uncertainty beginning in early 2017, with some of the change owed to other factors. Comparing Figures 1 and 2 reinforces this, as shown by the large increases in premiums in 2018, the two subsequent years of decreased national average premiums, and the overall increase in premiums from 2017 to today. The large national commercial insurers, Humana, United, Aetna, and Anthem, continued to leave marketplaces they had operated in since the early years of the ACA. Medicaid insurers now frequently offer the lowest silver premiums in the marketplaces. We also see some Medicaid insurers entering new markets previously dominated by a single insurer (e.g., Alabama, North Carolina, and West Virginia). More insurers entering markets in 2019 and 2020, following the 2018 drop-off in participation, shows that some insurers believe that the marketplaces are stabilizing, functional, and potentially profitable, even with all the administrative and legislative changes to the ACA in recent years.

The future pricing stability in the ACA marketplaces rests on several unanswered questions, however. Do consumers find marketplace provider networks adequate? If the increase in narrow-network plans leads to access concerns, higher provider payment rates (and thus higher premiums) may be required to broaden networks. How many healthier-than-average enrollees have left the ACA-compliant nongroup market to purchase short-term, limited-duration plans or other noncompliant policies? Such exits will hurt the ACA's risk pool (and push average premiums higher) in the near term. Has the effect of the elimination of the individual mandate penalties been fully felt in these markets? If some people were unaware of the elimination of the penalties as of the 2020 plan year, more people (and those who are healthier than average) may choose to drop coverage in the coming years, increasing the average health care costs of the remaining insurance pool and pushing premiums upward. Maintaining stable nongroup insurance markets may require additional regulatory or legislative action.

However, reducing premiums in markets without insurer and/or provider competition requires more significant changes than reversing or enhancing recent legislative or regulatory changes. Due to the significant barriers to entry for both insurers and providers in these markets, it is unlikely that competitive pressures will improve the situations. Reducing premiums in noncompetitive markets will likely require introducing a public option and/or capping provider payment rates at levels below those resulting from monopolistic pricing.

# ENDNOTES

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## About the Authors and Acknowledgments

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