

U.S. Health Reform—Monitoring and Impact

Changes in Marketplace Premiums, 2017 to 2018

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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 and www.healthpolicycenter.org.

There have been widespread reports of very large marketplace nongroup premium increases in most states in 2018.^{1,2} Below, we provide national estimates for changes in the lowest silver and gold plan premiums between 2017 and 2018. The national average increase was 32.0 percent for the lowest-priced silver plans and 19.1 percent for gold plans, but the increases varied by states. Several reasons are behind these large increases. The premium increases reflect significant policy changes and policy debates specifically affecting insurer decisions for the 2018 plan year as well as more typical annual considerations such as trend and healthcare costs. We delineate the factors that contributed to large 2018 marketplace premium increases, provide state-by-state estimates of average premium increases in silver (70 percent actuarial value) and gold (80 percent actuarial value) plans in the marketplaces and provide more detailed analysis of changes in select markets within 20 states.

Other findings include the following:

- Increases in the lowest silver plan premiums tended to be larger than the increases in the lowest gold premiums, but there were several exceptions.
- There was tremendous variation across states in rates of increase. Some of the smallest increases (including some decreases) were in states with high 2017 premiums.
- The average lowest silver premiums remained below the average lowest gold premiums in each state we studied, but the difference between the two ranged from 3.0 percent (District of Columbia suburbs in Maryland) to 77.4 percent (Augusta, Georgia), in the selected large markets analyzed.
- More insurers exited markets than entered new markets in 2018 in our study areas.
- States with Medicaid managed care organizations and/or many competing insurers offering marketplace coverage tended to have the lowest premiums.

BACKGROUND: FACTORS CONTRIBUTING TO PREMIUM INCREASES

Elimination of Federal Reimbursements of Cost-Sharing Reductions. The U.S. Department of Health and Human Services has stopped reimbursing insurers for the cost-sharing reductions (CSRs) that marketplace insurers are legally required to provide eligible enrollees with incomes below 250 percent of the federal poverty level (FPL). The Congressional Budget Office (CBO) estimates that this change will increase the federal deficit by \$194 billion over 10 years.³

Without the federal reimbursement for CSRs, CBO estimates that insurers would increase silver premiums by an estimated

20 percent in 2018; this increase would be over and above increases due to medical cost inflation or other reasons. The CBO assumption, consistent with other analyses,⁴⁻⁶ is that the insurers' costs for the CSRs would be incorporated entirely into the silver marketplace premiums because there was no economic reason to adjust premiums for gold, bronze, or nonmarketplace plans. As originally legislated, eligible individuals could receive CSRs only if they purchased silver marketplace premiums using a tax credit. An insurer that spread CSR costs into plans not eligible for CSRs would charge premiums higher than the value associated with that plan,

leaving them at a competitive pricing disadvantage relative to insurers who did not.

In the end, however, the federal government allowed states to decide how insurers could address this issue. States could require insurers to select from several approaches, from exclusive loading of costs into silver marketplace premiums to spreading the costs across plans in all metal tiers on and off the marketplace. Corlette, Lucia, and Kona found that 26 states had insurers allocate the CSR costs to silver marketplace premiums alone, 8 states had the costs allocated to silver plans on and off the marketplaces, three states had insurers spread the costs across all metal tiers in the marketplace, three had insurers spread the costs across all metal tiers on and off the marketplace, and in three states' approaches varied across insurers.⁷ Information on the remaining states was not available.

Policy Changes Anticipated to Reduce Enrollment in Private Nongroup Coverage. Beyond adjustments to account for elimination of federal reimbursement for CSRs, premiums increased for other reasons. Throughout 2017, the Trump administration indicated it might not enforce the individual mandate penalties, and the Tax Cuts and Jobs Act of 2017 explicitly set the penalties to zero beginning in 2019.⁸ The virtual elimination of advertising funds, the large reduction in enrollment assistance funds, the shortened open enrollment period in the federally facilitated marketplaces and some

state-based marketplaces, and reduced hours of access to the *healthcare.gov* enrollment platform, all further increased the uncertainty in the market. Insurers feared that these changes would reduce enrollment, leave a less healthy risk pool, increase average claims costs per enrollee, and provide insurers strong incentives to increase premiums at all coverage levels. Such incentives affect premiums both on and off the marketplaces because the entire nongroup insurance market is risk adjusted as a uniform pool.

Annual Adjustments Based on the Prior Year's Experience. Finally, the 2018 premium increases that we observe reflect how insurers felt about the adequacy of their 2017 premiums. First, if the risk pool was better or worse than had been anticipated in 2017, insurers likely adjusted their risk expectations (and their premiums) for 2018. Second, if there is significant market competition, insurers will not increase premiums more than necessary because large premium increases would risk losing market share. Larger-than-necessary premiums also mean insurers would be forced to provide rebates because of medical loss ratio regulations. However, if an insurer is facing little or reduced competition (perhaps due to other insurers exiting the market in 2018 or low prior insurer participation), premium increases tend to be higher.⁹ Third, premiums are adjusted based on medical inflation or expectations of changes in the intensity of health care service use.

DATA AND METHODS

We analyze nongroup marketplace premium and insurer participation data for the 2017 and 2018 plan years. These data were taken from the *healthcare.gov* public use files, state marketplace websites, and state department of insurance websites when necessary. We use the state department of insurance websites to access insurer rate filings to obtain data that were unavailable from state marketplace websites.

Our premium analyses focus on the lowest silver and lowest gold premiums for a 40-year-old nonsmoker. Because of the fixed age rating curves in each state, using premiums for a 40-year-old does not affect our findings. The lowest silver premium is the lowest-priced option available in the most popular actuarial value (metal) tier. We also analyzed percentage changes in the benchmark (second lowest cost silver) premiums in each rating region and found them similar to the percentage changes in the lowest silver premiums; these are shown in Appendix Table A-1. We also present data for the lowest gold premiums because 2018 silver premiums were more frequently affected by the cessation of federal CSR payments.

We present these data in three different ways. First, we compute state-specific weighted averages of the lowest silver premium available in each of the state's premium rating regions; we do the same for the lowest gold premium available in each of the state's regions. These averages are weighted by the population in each region and are presented in (Table 1). Second, we present rating region-level premium data for 32 large metropolitan areas in 20 states (Table 2). We present the lowest silver and gold premiums in each of these rating regions in 2017 and 2018. We then calculate the percentage change in the lowest premium within each region. Third, we show the lowest silver and gold premiums offered by *each insurer* participating in each rating region in 2017 and 2018 to show the competitive dynamics in these large population areas (Tables 3 through 22). The average percentage change across insurers, also shown in these tables, are calculated over the insurers participating in both years.

RESULTS

Table 1 provides statewide averages for the lowest silver and gold plan premiums and the relative change in the premiums between 2017 and 2018 in addition to population weighted national averages.¹⁰ These findings are consistent with those of the Kaiser Family Foundation.¹ These population-weighted average premiums for the lowest silver and lowest gold premiums (2017 and 2018) are for a 40-year-old nonsmoker. The national average increase in the lowest silver and lowest gold premiums between 2017 and 2018 are 32.0 percent and 19.1 percent, respectively, but the variation across states is substantial. State changes in average lowest-priced silver premiums ranged from a 22.5 percent reduction (Alaska) to a 117.5 percent increase (Iowa). Lowest gold plan premium changes ranged from a 27.9 percent reduction (Alaska) to a

62.1 percent increase (Kentucky). Fifteen states had increases in average lowest silver premiums of more than 40 percent. But four states had increases of 10 percent or less, and four others had reductions in average lowest silver premiums.

Silver premium increases were generally higher than gold premium increases, but this was not consistent across all states. For example, growth in gold premiums exceeded that in silver premiums in Connecticut and Maryland, even though insurers in both states were instructed to load all expected CSR costs into their silver marketplace premiums.⁷ Growth in average lowest silver and gold premiums were comparable in Colorado, Mississippi, and Oklahoma, but those states instructed insurers to spread their CSR costs across all actuarial value tiers.

Table 1: Increases in Lowest Marketplace Silver and Gold Premiums by State, 2017–2018
Monthly Premiums are for a 40-year-old nonsmoker

State	State Average Lowest Silver Premium			State Average Lowest Gold Premium		
	2017	2018	Percentage Change 2017–2018	2017	2018	Percentage Change 2017–2018
U.S. Average	\$342	\$444	32.0%	\$439	\$518	19.1%
Alabama	\$435	\$515	18.5%	\$571	\$582	2.0%
Alaska	\$901	\$698	-22.5%	\$1,080	\$778	-27.9%
Arizona	\$497	\$487	-2.0%	\$660	\$627	-4.9%
Arkansas	\$281	\$341	21.2%	\$365	\$410	12.3%
California	\$317	\$394	24.1%	\$360	\$411	14.3%
Colorado	\$317	\$413	30.2%	\$380	\$501	31.9%
Connecticut	\$433	\$539	24.7%	\$450	\$603	34.0%
D.C.	\$275	\$317	15.0%	\$353	\$385	9.3%
Delaware	\$414	\$573	38.3%	\$537	\$706	31.5%
Florida	\$323	\$458	41.8%	\$429	\$489	13.9%
Georgia	\$312	\$482	54.7%	\$439	\$617	40.7%
Hawaii	\$325	\$437	34.4%	\$379	\$449	18.3%
Idaho ¹	\$344	\$475	37.9%	\$446	\$485	8.6%
Illinois	\$350	\$474	35.3%	\$470	\$536	14.0%
Indiana	\$261	\$332	26.9%	\$345	\$456	32.2%
Iowa ²	\$320	\$695	117.5%	\$558	\$787	40.9%
Kansas	\$362	\$481	32.8%	\$402	\$446	11.0%
Kentucky	\$253	\$420	66.2%	\$334	\$541	62.1%
Louisiana	\$403	\$455	12.9%	\$519	\$562	8.3%
Maine	\$371	\$551	48.6%	\$526	\$636	20.9%
Maryland	\$324	\$436	34.7%	\$309	\$456	47.6%
Massachusetts	\$241	\$306	26.8%	\$329	\$375	14.1%
Michigan	\$260	\$349	34.0%	\$343	\$381	11.1%

Table 1 continued

State	State Average Lowest Silver Premium			State Average Lowest Gold Premium		
	2017	2018	Percentage Change 2017–2018	2017	2018	Percentage Change 2017–2018
Minnesota	\$429	\$365	-15.1%	\$496	\$458	-7.6%
Mississippi	\$327	\$478	46.5%	\$435	\$648	48.9%
Missouri ³	\$365	\$487	33.5%	\$490	\$715	45.7%
Montana	\$418	\$494	18.2%	\$560	\$582	3.8%
Nebraska ⁴	\$464	\$689	48.6%	\$518	\$753	45.5%
Nevada	\$306	\$445	45.6%	\$412	\$516	25.0%
New Hampshire	\$266	\$457	71.9%	\$345	\$524	51.5%
New Jersey	\$338	\$399	18.1%	\$606	\$646	6.7%
New Mexico	\$239	\$414	73.4%	\$279	\$347	24.5%
New York	\$439	\$484	10.3%	\$517	\$571	10.5%
North Carolina	\$517	\$601	16.3%	\$670	\$656	-2.1%
North Dakota	\$325	\$293	-9.8%	\$416	\$392	-5.7%
Ohio ⁵	\$251	\$347	38.2%	\$328	\$420	27.8%
Oklahoma	\$495	\$520	5.1%	\$623	\$662	6.4%
Oregon	\$311	\$410	31.9%	\$370	\$444	20.1%
Pennsylvania	\$347	\$453	30.6%	\$435	\$462	6.2%
Rhode Island	\$243	\$287	18.3%	\$307	\$300	-2.3%
South Carolina	\$389	\$524	34.4%	\$493	\$550	11.5%
South Dakota	\$430	\$467	8.6%	\$576	\$559	-2.9%
Tennessee ⁶	\$433	\$597	37.9%	\$673	\$910	35.2%
Texas	\$279	\$394	41.3%	\$349	\$435	24.6%
Utah	\$308	\$528	71.3%	\$466	\$615	32.1%
Vermont	\$470	\$474	0.8%	\$531	\$569	7.1%
Virginia	\$309	\$506	64.0%	\$426	\$631	48.1%
Washington	\$238	\$326	37.0%	\$318	\$399	25.3%
West Virginia	\$440	\$514	16.9%	\$552	\$686	24.3%
Wisconsin	\$350	\$502	43.5%	\$444	\$517	16.4%
Wyoming	\$494	\$860	74.0%	\$606	\$710	17.3%

Source: Healthcare.gov public use files and relevant state marketplace websites and rate filings

1: Idaho combined rating area 7 into rating area 5 for the 2018 plan year.

2: Rating regions 1–3 did not have a gold plan offered in 2017 and have been removed from the gold average.

3: Rating region 4 did not have a gold plan offered in 2017 and has been removed from the gold average.

4: Rating regions 2–4 did not have a gold plan offered in 2017 and have been removed from the gold average.

5: Rating region 6 did not have a gold plan offered in 2018 and has been removed from the gold average.

6: Rating region 2 did not have a gold plan offered in 2017 and has been removed from the gold average.

Table 2 shows the lowest silver and lowest gold premiums in 32 rating regions in 20 states in 2017 and 2018, the percentage change between years, and the percentage difference between silver and gold premiums in 2018. States are ordered from lowest 2017 silver premiums to highest 2017 silver premiums. Consistent with Table 1, 2018 increases in lowest silver premiums tend to be high in these markets, many around 40 percent, though there is considerable

variation. Lowest gold premium increases are usually smaller, but this is not always the case. Differences between 2017 and 2018 gold premiums in many markets are between 20 and 40 percent. Silver premiums in all but 6 of the 20 states (West Virginia, Oklahoma, Arizona, Georgia, Indiana, and Missouri) would have been expected to increase more than gold plan premiums because insurers were instructed to load their expected costs for providing CSRs into their silver plans only.¹¹

Table 2: Increases in Silver and Gold Marketplace Premiums in Selected Large Markets, 2017–2018

Monthly Premiums are for a 40-year-old nonsmoker

State	City	Lowest Silver Premium Offered			Lowest Gold Premium Offered			Percentage Difference between Silver and Gold Premiums 2018
		2017	2018	Percentage Change 2017–2018	2017	2018	Percentage Change 2017–2018	
Washington	Seattle (Region 1)	\$235	\$328	39.6%	\$317	\$414	30.7%	26.2%
Rhode Island	Entire state (Region 1)	\$247	\$287	16.2%	\$307	\$300	-2.6%	4.3%
Ohio	Columbus (Region 9)	\$284	\$385	35.4%	\$367	\$464	26.6%	20.6%
	Cleveland (Region 11)	\$224	\$307	36.8%	\$312	\$376	20.3%	22.3%
Michigan	Detroit (Region 1)	\$233	\$298	27.7%	\$306	\$341	9.0%	14.5%
Indiana	Indianapolis (Region 10)	\$284	\$364	28.2%	\$364	\$501	37.6%	37.5%
Texas	Dallas–Fort Worth (Region 8)	\$277	\$411	48.4%	\$334	\$438	31.2%	6.6%
	Houston (Region 10)	\$283	\$390	37.9%	\$341	\$426	25.0%	9.2%
Virginia	Richmond (Region 7)	\$289	\$439	51.6%	\$403	\$483	19.8%	10.2%
	Northern Virginia (Region 10)	\$296	\$447	51.4%	\$396	\$483	21.9%	8.0%
Georgia	Atlanta (Region 3)	\$264	\$417	57.8%	\$362	\$465	28.3%	11.5%
	Augusta (Region 5)	\$322	\$464	44.3%	\$495	\$824	66.5%	77.4%
California	West Los Angeles (Region 16)	\$256	\$339	32.4%	\$287	\$353	22.8%	3.9%
	San Diego (Region 19)	\$297	\$392	32.1%	\$332	\$416	25.1%	6.2%
	Sacramento (Region 3)	\$402	\$446	11.0%	\$445	\$460	3.5%	3.2%
Florida	Miami (Region 43)	\$296	\$435	46.7%	\$372	\$456	22.4%	4.9%
	Tampa (Region 28)	\$305	\$428	40.3%	\$395	\$460	16.4%	7.5%
Maryland	Baltimore (Region 1)	\$309	\$436	41.1%	\$401	\$450	12.1%	3.1%
	DC Suburbs (Region 3)	\$309	\$436	41.1%	\$401	\$450	12.1%	3.0%
Missouri	Kansas City (Region 3)	\$342	\$484	41.7%	\$448	\$709	58.4%	46.5%
	St. Louis (Region 6)	\$305	\$421	38.0%	\$400	\$636	59.2%	51.2%
Maine	Portland (Region 1)	\$334	\$489	46.2%	\$472	\$570	20.7%	16.6%
Tennessee	Nashville (Region 4)	\$400	\$550	37.7%	\$542	\$824	67.0%	49.8%
	Memphis (Region 6)	\$398	\$601	51.2%	\$539	\$989	83.6%	64.5%
Alabama	Birmingham (Region 3)	\$457	\$542	18.5%	\$600	\$612	2.0%	13.0%
New York ¹	New York City (Region 4)	\$454	\$504	11.2%	\$533	\$595	11.6%	17.9%
	Long Island (Region 8)	\$446	\$480	20.6%	\$525	\$567	8.1%	18.3%
West Virginia	Charleston (Region 2)	\$505	\$555	9.8%	\$638	\$747	17.0%	34.5%
Oklahoma	Oklahoma City (Region 3)	\$485	\$507	4.5%	\$610	\$690	13.1%	36.0%
Arizona	Phoenix (Region 4)	\$475	\$471	-0.9%	\$661	\$621	-6.0%	31.9%
	Tucson (Region 6)	\$349	\$332	-4.9%	\$455	\$438	-3.8%	31.9%
North Carolina	Charlotte (Region 4)	\$565	\$659	16.7%	\$716	\$703	-1.8%	6.7%

Source: Healthcare.gov public use files and relevant state marketplace websites and rate filings

1: New York has pure community rating and as such this premium is not necessarily representative of a 40-year-old.

In each market, the lowest gold premium remains higher than the lowest silver premium in 2018 despite the differences in growth across the tiers, but in many markets, the relative difference between the silver and gold premiums has decreased considerably. In a few markets, premium increases are low or even negative, likely reflecting adjustments from large premium increases in the previous year and the desire to avoid paying rebates in 2018.

The increase in the lowest silver and gold premiums available in each area varies considerably. Many markets with low premiums in 2017 have large increases in 2018. This includes the Seattle, Washington market, with a 39.6 percent increase in its lowest silver premium and 30.7 percent increase in its lowest gold premium. In Richmond, Virginia, the lowest silver premium increased by 51.6 percent, and the lowest gold premium increased by 19.8 percent. In Northern Virginia, the lowest silver premium increased by 51.4 percent, and the lowest gold premium increased by 21.9 percent. In Miami, Florida, the lowest silver premium increased by 46.7 percent, and the lowest gold premium increased by 22.4 percent. In Tampa, Florida, the lowest silver premium increased by 40.3 percent, and the lowest gold premium increased by 16.4 percent.

At the other extreme, premium increases were small in several markets, though generally smaller for gold than for silver, given the necessary adjustments for CSRs. These small increases were typically in states with 2017 premiums higher than the national average. For example, in Charlotte, North Carolina, the lowest silver premium increased by 16.7 percent, and the lowest gold premium declined by 1.8 percent. In Birmingham, Alabama, the lowest silver premium increased by 18.5 percent, and the lowest gold premium increased by 2.0 percent. In Phoenix, Arizona, the lowest silver premium declined by 0.9 percent, and the lowest gold premium declined by 6.0 percent. In Tucson, the lowest silver plan premium decreased by 4.9 percent, and the lowest gold premium declined by 3.8 percent.

The last column of Table 2 shows that the lowest silver and gold premiums in many of these markets were similar by

2018, even though the actuarial value of the gold plans are 14 percent ($80/70=1.14$) higher than that of the silver plans. Generally, before 2018, gold premiums exceeded silver premiums by more than 14 percent, owing to insurers pricing in higher utilization for gold plans because of their lower cost-sharing requirements and other factors. To a substantial degree, the reduction in premium differences between gold and silver plans in 2018 is because most insurers adjusted their silver premiums up to account for the federal government eliminating reimbursement for CSRs. In 15 of the 32 markets studied, the difference between silver and gold premiums is now less than 14 percent. In Baltimore; the D.C. suburbs of Maryland; Sacramento and West Los Angeles, California; and Rhode Island, the premium differences are 4 percent or less. But large relative premium differences between silver and gold plans persist where the CSR adjustments were made more broadly (e.g., Indianapolis and Oklahoma City), and even in Nashville (49.8 percent difference) and Memphis (64.5 percent difference), Tennessee, where CSR adjustments were all made to silver plan premiums.

A Closer Look at Changes in 32 Large Markets in 20 States

Table 2 shows the increases in premiums for the lowest-priced silver and gold plans in large markets in 20 states. Below, we look at the increases in the lowest-priced plans offered by each insurer in these markets. We also note the insurers who enter and exit each market and which insurers remain and offer the lowest premium option. In the 32 rating regions we study, 21 regions saw exits, and 7 regions had an additional insurer enter the market for 2018. Anthem and Humana left 8 and 7 regions, respectively. In 17 of the 32 regions, the lowest-priced silver plan was offered by an insurer that previously operated only in the Medicaid market but entered the private market because of the Affordable Care Act (ACA). We present the states in the same order as they appear in Table 2, from the lowest 2017 silver premiums to the highest.

Table 3: Lowest Silver and Gold Monthly Premiums for a 40-Year-Old, by Insurer, Selected Rating Areas, 2017–2018

Washington

Insurer	Lowest Silver Premium			Lowest Gold Premium		
	2017	2018	Percent Change 2017–2018	2017	2018	Percent Change 2017–2018
Rating Region 1: Seattle, Bellevue						
Coordinated Care	\$235	\$328	39.6%	\$317	\$419	32.3%
Molina HealthCare	\$257	\$385	49.7%	\$320	\$476	48.9%
Group Health (Kaiser)	\$280	\$404	44.2%	\$344	\$414	20.2%
BridgeSpan	\$315	NA	NA	\$409	NA	NA
Lifewise	\$324	NA	NA	\$417	NA	NA
Regence	\$326	NA	NA	\$433	NA	NA
Premera	\$404	\$517	27.9%	\$501	\$617	23.4%
Average Percentage Change Across Insurers			40.3%			31.2%
Percentage Change in Region's Lowest-Premium Option			39.6%			30.7%

Source: Washington Healthplan Finder

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

Washington (Table 3). In the Seattle region, three Blue Cross Blue Shield insurers left the marketplace after 2017: Lifewise, BridgeSpan, and Regence. The lowest silver premium increased by 39.6 percent between 2017 and 2018, and the lowest gold premium increased by 30.7 percent. Coordinated Care, a product of the national Medicaid chain Centene Corporation, offers the region's lowest silver

premium. Molina, another national Medicaid chain, is the second lowest cost insurer. Coordinated Care and Group Health (now owned by Kaiser) have the lowest 2018 gold premiums. Each insurer's lowest gold premium exceeds its lowest silver premium, although Group Health's lowest gold premium is only \$10 per month higher than its lowest silver premium.

Table 4: Lowest Silver and Gold Monthly Premiums for a 40-Year-Old, by Insurer, Selected Rating Areas, 2017–2018

Rhode Island

Insurer	Lowest Silver Premium			Lowest Gold Premium		
	2017	2018	Percent Change 2017–2018	2017	2018	Percent Change 2017–2018
Rating Region 1: Entire State						
Neighborhood Health Plan	\$247	\$287	16.2%	\$307	\$300	-2.6%
Blue Cross Blue Shield of Rhode Island	\$270	\$385	42.7%	\$360	\$327	-9.1%
Average Change Across All Insurers			29.5%			-5.9%
Percentage Change in Lowest-Premium Option			16.2%			-2.6%

Source: Healthsource RI

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

Rhode Island (Table 4). Rhode Island has a single statewide rating region, and the lowest silver premium increased by 16.2 percent between 2017 and 2018, while the lowest gold premium decreased by -2.6 percent. The insurer with the lowest 2017 premium, Neighborhood Health Plan, increased its premium the least, by 16.2 percent, and reduced its gold premium by 2.6 percent. In contrast, Blue Cross Blue Shield increased its silver

premium by 42.7 percent, presumably because of adjustments due to elimination of CSR reimbursements but also perhaps out of fear of the implications of reduced enforcement of the individual mandate and other sources of uncertainty about the 2018 insurance risk pool. Blue Cross Blue Shield lowered its lowest gold premium by more than 9 percent relative to 2017, and it is now below its lowest silver premium.

Table 5: Lowest Silver and Gold Monthly Premiums for a 40-Year-Old, by Insurer, Selected Rating Areas, 2017–2018

Ohio

Insurer	Lowest Silver Premium			Lowest Gold Premium		
	2017	2018	Percent Change 2017–2018	2017	2018	Percent Change 2017–2018
Rating Region 9: Columbus						
CareSource	\$284	\$385	35.4%	\$367	\$464	26.6%
Molina Marketplace	\$301	\$461	53.5%	\$383	\$501	30.8%
MedMutual	\$326	\$423	29.9%	\$402	\$515	28.0%
Anthem Blue Cross and Blue Shield	\$342	NA	NA	\$467	NA	NA
Ambetter from Buckeye Health Plan	NA	\$417	NA	NA	\$531	NA
Average Percentage Change Across Insurers			39.6%			28.5%
Percentage Change in Region's Lowest-Premium Option			35.4%			26.6%
Rating Region 11: Cleveland						
Ambetter from Buckeye Health Plan	\$224	\$307	36.8%	\$312	\$391	25.3%
Molina Marketplace	\$252	\$346	37.2%	\$321	\$376	16.9%
CareSource	\$253	\$319	26.2%	\$326	\$385	18.0%
Anthem Blue Cross and Blue Shield	\$363	NA	NA	\$496	NA	NA
MedMutual	\$376	\$364	-3.1%	\$470	\$440	-6.3%
Oscar	NA	\$434	NA	NA	\$509	NA
Average Percentage Change Across Insurers			24.3%			13.5%
Percentage Change in Region's Lowest-Premium Option			36.8%			20.3%

Source: Healthcare.gov Public Use File

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

Ohio (Table 5). Ohio has had low premiums because of marketplace competition from Medicaid managed care organizations. Anthem left the Columbus and Cleveland marketplaces after 2017, while Oscar entered the Cleveland marketplace for 2018. CareSource, the lowest silver premium option in Columbus in 2017, increased its premium by 35.4 percent in 2018 but remained the lowest-priced option. CareSource increased its lowest gold premium by 26.6 percent. Molina, another Medicaid managed care organization, was the second-lowest-cost insurer in 2017, but its 53.5 percent silver

premium increase makes it the highest-priced insurer in 2018. Molina had a smaller but still large increase in their lowest gold premium (30.8 percent).

In Cleveland, the lowest silver premium increased by 36.8 percent, and the lowest gold premium increased by 20.3 percent. MedMutual, Cleveland's highest-priced insurer in 2017, lowered the premiums for its lowest-priced silver and gold options, yet its 2018 premiums remain high relative to most of its competitors there.

Table 6: Lowest Silver and Gold Monthly Premiums for a 40-Year-Old, by Insurer, Selected Rating Areas, 2017–2018

Michigan

Insurer	Lowest Silver Premium			Lowest Gold Premium		
	2017	2018	Percent Change 2017–2018	2017	2018	Percent Change 2017–2018
Rating Region 1: Detroit						
Meridian Health Plan	\$233	\$360	54.4%	\$313	\$345	10.0%
Molina	\$237	\$358	51.4%	\$306	\$361	18.2%
Total Health Care USA, Inc.	\$244	\$298	22.0%	\$311	\$341	9.7%
Blue Care Network of Michigan	\$261	\$332	27.2%	\$416	\$486	16.9%
Health Alliance Plan (HAP)	\$299	NA	NA	\$364	NA	NA
McLaren Health Plan, Inc.	\$308	\$411	33.2%	\$398	\$448	12.4%
Priority Health	\$312	\$375	20.0%	NA	\$525	NA
Humana Medical Plan of Michigan Inc.	\$315	NA	NA	NA	NA	NA
Blue Cross Blue Shield of Michigan (MSP)	\$371	\$519	40.1%	\$581	\$702	20.8%
Average Percentage Change Across Insurers			35.5%			14.7%
Percentage Change in Region's Lowest-Premium Option			27.7%			11.6%

Source: Healthcare.gov Public Use File

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

Although required by law under the Affordable Care Act, neither Humana nor Priority Health appeared to offer gold-level plans in 2017, and Humana does not seem to be offering one in 2018 either.

Michigan (Table 6). Michigan required insurers to allocate CSR expenses in full to silver marketplace plans. The Detroit market had nine insurers in 2017, and premiums were low. Humana and Health Alliance Plan left the marketplace before 2018. The lowest silver premium increased by 27.7 percent, and the lowest gold premium increased by 11.6 percent. Molina and Meridian Health Plan offered the lowest silver premiums in

2017, but they both increased those premiums by more than 50 percent for 2018, making Total Healthcare USA and the BlueCare Network's silver offerings the lowest priced in Detroit for 2018. Meridian's lowest gold premium is \$15 per month below its lowest silver premium in 2018, and Molina's lowest gold premium is only \$3 higher than its lowest silver premium.

Table 7: Lowest Silver and Gold Monthly Premiums for a 40-Year-Old, by Insurer, Selected Rating Areas, 2017–2018

Indiana

Insurer	Lowest Silver Premium			Lowest Gold Premium		
	2017	2018	Percent Change 2017–2018	2017	2018	Percent Change 2017–2018
Rating Region 10: Indianapolis						
Ambetter	\$284	\$364	28.2%	\$391	\$514	31.2%
Caresource	\$286	\$366	28.1%	\$364	\$501	37.6%
MDwise	\$317	NA	NA	\$424	NA	NA
Anthem	\$414	NA	NA	\$647	NA	NA
Average Percentage Change Across Insurers			28.2%			34.4%
Percentage Change in Region's Lowest-Premium Option			28.2%			37.6%

Source: Healthcare.gov Public Use File

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

Indiana (Table 7). In Indiana, insurers were required to spread premium increases for CSRs across all metal tiers in the marketplace. The increases in silver premiums are more comparable with increases in gold premiums. Anthem and MDwise, left the Indianapolis marketplace after 2017. The remaining insurers are the national Medicaid chains

Ambetter and CareSource. Their lowest silver and gold premiums are similar to each other, as were their 2017 premiums. Ambetter increased its lowest silver premium by 28.2 percent and its lowest gold premium by 31.2 percent. CareSource increased its lowest silver premium by 28.1 percent and its lowest gold premium by 37.6 percent.

Table 8: Lowest Silver and Gold Monthly Premiums for a 40-Year-Old, by Insurer, Selected Rating Areas, 2017–2018

Texas

Insurer	Lowest Silver Premium			Lowest Gold Premium		
	2017	2018	Percent Change 2017–2018	2017	2018	Percent Change 2017–2018
Rating Region 8: Dallas/Fort Worth						
Molina Healthcare of Texas	\$277	\$411	48.4%	\$334	\$438	31.2%
Ambetter	\$322	\$415	29.0%	\$450	\$481	6.9%
Blue Cross Blue Shield of Texas	\$449	\$570	27.0%	\$563	\$559	-0.7%
Average Percentage Change Across Insurers			34.8%			12.5%
Percentage Change in Region's Lowest-Premium Option			48.4%			31.2%
Rating Region 10: Houston						
Molina Healthcare of Texas	\$283	\$399	41.3%	\$341	\$426	25.0%
Community Health Choice, Inc.	\$311	\$460	48.0%	\$364	\$503	38.1%
Blue Cross Blue Shield of Texas	\$431	\$545	26.5%	\$540	\$534	-1.1%
Ambetter	NA	\$390	NA	NA	\$452	NA
Average Percentage Change Across Insurers			38.6%			20.7%
Percentage Change in Region's Lowest-Premium Option			37.9%			25.0%

Source: Healthcare.gov Public Use File

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

Texas (Table 8). Texas also required insurers to allocate the cost of CSRs to marketplace silver plans. The lowest silver premiums in Dallas–Fort Worth increased by 48.4 percent and the lowest gold premium increased by 31.2 percent. The increase in the lowest silver premium in Houston was 37.9 percent, and the increase for the lowest gold premium was 25.0 percent. Molina and Ambetter, both national Medicaid chains, have the

lowest premium silver plans in both markets in 2018, as well as the lowest gold premiums. Ambetter entered the Houston marketplace in 2018. For Ambetter, Molina, and Community Health Choice, their respective lowest gold premium in 2018 is higher than the lowest silver premium. Blue Cross Blue Shield's lowest gold premium is now \$11 per month lower than its lowest silver premium for a 40-year-old nonsmoker.

Table 9: Lowest Silver and Gold Monthly Premiums for a 40-Year-Old, by Insurer, Selected Rating Areas, 2017–2018

Virginia

Insurer	Lowest Silver Premium			Lowest Gold Premium		
	2017	2018	Percent Change 2017–2018	2017	2018	Percent Change 2017–2018
Rating Region 7: Richmond						
Aetna	\$289	NA	NA	NA	NA	NA
Cigna	\$296	\$439	48.0%	\$403	\$719	78.2%
Anthem HealthKeepers	\$303	\$497	64.2%	\$435	\$740	70.1%
Kaiser Permanente	\$329	\$447	36.0%	\$457	\$483	5.7%
United Healthcare	\$333	NA	NA	\$482	NA	NA
Anthem (MSP)	\$341	NA	NA	NA	NA	NA
Piedmont Community Health Care	\$357	\$572	60.0%	\$437	\$696	59.3%
Optima Health	NA	\$900	NA	NA	\$1,343	NA
Average Percentage Change Across Insurers			52.0%			53.3%
Percentage Change in Region's Lowest-Premium Option			51.6%			19.8%
Rating Region 10: Washington D.C. suburbs						
Innovation Health Insurance Company	\$296	NA	NA	\$396	NA	NA
Cigna	\$313	\$458	46.1%	\$426	\$750	75.8%
United Healthcare ¹	\$319	NA	NA	NA	NA	NA
Kaiser Permanente	\$329	\$447	36.0%	\$457	\$483	5.7%
Anthem HealthKeepers	\$336	\$511	52.3%	\$482	\$770	59.7%
Anthem (MSP)	\$378	NA	NA	NA	NA	NA
CareFirst BlueChoice, Inc.	\$432	\$720	66.7%	\$498	\$653	31.1%
Group Hospitalization and Medical Services (Carefirst)	\$466	\$928	98.9%	\$556	\$807	45.1%
Average Percentage Change Across Insurers			60.0%			43.5%
Percentage Change in Region's Lowest-Premium Option			51.4%			21.9%

Source: Healthcare.gov Public Use File

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

1: Although required by law under the Affordable Care Act, United did not offer a gold plan during the 2017 plan year.

Virginia (Table 9). In Richmond, Aetna, Anthem (Multistate Plan, a Preferred Provider Organization), and United Healthcare left the marketplace after 2017, and Optima Health entered for 2018. In Northern Virginia, Anthem (Multistate Plan), Innovation, and United Healthcare left the marketplace. The lowest silver premium increased by 51.6 percent in Richmond and by 51.4 percent in the Washington, D.C. suburbs. The lowest gold premium increased by 19.8 percent in Richmond and 21.9 percent in the Washington, D.C. suburbs. Almost all insurers (Kaiser is the exception) have large premium increases in both metal tiers, despite the state requirement that CSR costs be loaded onto silver marketplace premiums alone. Anthem HealthKeepers and Cigna increased their lowest gold premiums more than 70 percent in Richmond and 60 and 76

percent, respectively, in the Washington, D.C. suburbs. These are larger increases than those made for their lowest silver premiums in both rating areas.

Although not the lowest-priced insurer in 2017, Kaiser offers the lowest silver and gold premiums in the DC suburbs. In Richmond, Kaiser has by far the lowest gold premium and is just slightly above Cigna's lowest priced silver option. Kaiser's lowest silver premium increased 36.0 percent in each market, and its gold premium increased only 5.7 percent in 2018. These were the smallest increases of any insurer in these marketplaces. Kaiser's lowest gold premium is only \$36 per month higher than its lowest silver premium in both markets for a 40-year-old nonsmoker.

Table 10: Lowest Silver and Gold Monthly Premiums for a 40-Year-Old, by Insurer, Selected Rating Areas, 2017–2018

Georgia

Insurer	Lowest Silver Premium			Lowest Gold Premium		
	2017	2018	Percent Change 2017–2018	2017	2018	Percent Change 2017–2018
Rating Region 3: Atlanta						
Ambetter	\$264	\$417	57.8%	\$362	\$465	28.3%
Blue Cross Blue Shield of Georgia (Anthem)	\$324	\$581	79.2%	\$499	\$1,030	106.5%
Kaiser	\$372	\$421	13.3%	\$444	\$552	24.3%
Humana	\$538	NA	NA	NA	NA	NA
Average Percentage Change Across Insurers			50.1%			53.1%
Percentage Change in Region's Lowest-Premium Option			57.8%			28.3%
Rating Region 5: Augusta						
Blue Cross Blue Shield of Georgia (Anthem)	\$322	\$464	44.3%	\$495	\$824	66.5%
Average Percentage Change Across Insurers			44.3%			66.5%
Percentage Change in Region's Lowest-Premium Option			44.3%			66.5%

Source: Healthcare.gov Public Use File

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

1: Although required by law under the Affordable Care Act, Humana did not offer a gold plan during the 2017 plan year.

Georgia (Table 10). In Georgia, insurers were allowed to decide whether to adjust for CSRs but were required to make any adjustments to all silver plans both on and off the marketplace. In Atlanta, the lowest silver premium increased by 57.8 percent, and the lowest gold premium increased by 28.3 percent. Ambetter remained the lowest-priced insurer at the gold and silver tiers. Kaiser had a 13.3 percent increase for its lowest silver premium and a 24.3 percent increase for its lowest gold premium. Blue Cross Blue Shield of Georgia had significant increases in both its lowest silver premium (79.2 percent) and lowest gold premium (106.5 percent). Humana left the Atlanta marketplace in 2018.

Only Blue Cross Blue Shield of Georgia participates in the Augusta marketplace. Its lowest silver premium increased by 44.3 percent, and its lowest gold premium increased by 66.5 percent in 2018. Why premium increases would be larger for Kaiser gold plans in Atlanta and Blue Cross Blue Shield in Augusta is unclear. Insurers are required to treat all enrollees in all tiers of coverage as one risk pool, but they are permitted to adjust for higher utilization in gold plans because of lower cost-sharing requirements. Such changes might reflect concerns insurers have over the relative health care risks of enrollees in higher actuarial value coverage.

Table 11: Lowest Silver and Gold Monthly Premiums for a 40-Year-Old, by Insurer, Selected Rating Areas, 2017–2018

California

Insurer	Lowest Silver Premium			Lowest Gold Premium		
	2017	2018	Percent Change 2017–2018	2017	2018	Percent Change 2017–2018
Rating Region 16: West Los Angeles						
Molina Healthcare	\$256	\$390	52.4%	\$287	\$406	41.4%
L.A. Care	\$270	\$339	25.4%	\$319	\$353	10.7%
Health Net	\$289	\$344	19.0%	\$364	\$386	5.8%
Anthem	\$302	NA	NA	\$370	NA	NA
Oscar	\$332	\$417	25.5%	\$385	\$460	19.4%
Kaiser Permanente	\$335	\$409	22.1%	\$371	\$394	6.1%
Blue Shield	\$358	\$418	16.7%	\$434	\$494	13.7%
Average Percentage Change Across Insurers			26.9%			16.2%
Percentage Change in Region's Lowest-Premium Option			32.4%			22.8%
Rating Region 19: San Diego						
Molina Healthcare	\$297	\$418	41.1%	\$332	\$435	30.9%
Health Net	\$307	\$392	27.6%	\$387	\$439	13.5%
Kaiser Permanente	\$354	\$432	22.1%	\$392	\$416	6.1%
Sharp	\$356	\$479	34.8%	\$419	\$461	10.1%
Blue Shield	\$406	\$394	-2.9%	\$504	\$466	-7.5%
Anthem	\$444	NA	NA	\$543	NA	NA
Average Percentage Change Across Insurers			24.5%			10.6%
Percentage Change in Region's Lowest-Premium Option			32.1%			25.1%
Rating Region 3: Sacramento						
Kaiser Permanente	\$402	\$478	19.1%	\$445	\$460	3.5%
Western Health Advantage	\$426	\$557	30.7%	\$512	\$568	11.0%
Anthem	\$471	NA	NA	\$595	NA	NA
Blue Shield	\$479	\$446	-6.9%	\$595	\$527	-11.4%
Health Net	\$501	\$584	16.5%	\$625	\$673	7.7%
Average Percentage Change Across Insurers			14.8%			2.7%
Percentage Change in Region's Lowest-Premium Option			11.0%			3.5%

Source: Cover California

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

California (Table 11). West Los Angeles, San Diego, and Sacramento are competitive marketplace insurer markets, with six, five, and four participating insurers, respectively, in 2018. California required plans to add the costs associated with CSRs onto premiums for its silver marketplace plans. In the West Los Angeles market, the lowest silver premium

increased by 32.4 percent, while the lowest gold premium increased by 22.8 percent. In San Diego, the lowest silver premium increased by 32.1 percent, and the lowest gold premium increased by 25.1 percent. In Sacramento, the lowest silver premium increased by 11.0 percent, and the lowest gold premium increased by 3.5 percent.

The lowest 2018 silver premiums are offered by Health Net and LA Care in West Los Angeles, Blue Shield and Health Net in San Diego, and Blue Shield and Kaiser Permanente in Sacramento. Blue Shield reduced the premium of its lowest-priced silver and gold offerings in San Diego and Sacramento, making it more competitive. Molina offered the lowest-priced silver plan in West Los Angeles and San Diego in 2017, but its high premium increases (52.4 percent and 41.1 percent, respectively) for 2018

changed their relative standing in these markets. Anthem, a mid-to-high-priced insurer in each of these markets in 2017, stopped selling marketplace coverage in all three regions in 2018.

Despite the larger increases in silver premiums relative to gold for 2018, gold premiums remained higher than silver premiums for all insurers except for Kaiser Permanente in each of the rating areas and Sharp in San Diego.

Table 12: Lowest Silver and Gold Monthly Premiums for a 40-Year-Old, by Insurer, Selected Rating Areas, 2017–2018

Florida

Insurer	Lowest Silver Premium			Lowest Gold Premium		
	2017	2018	Percent Change 2017–2018	2017	2018	Percent Change 2017–2018
Rating Region 43: Miami						
Ambetter	\$296	\$435	46.7%	\$407	\$467	14.9%
Health Options	\$318	\$442	39.0%	\$412	\$456	10.6%
Molina	\$320	\$567	77.5%	\$372	\$537	44.2%
Florida Blue (Blue Cross Blue Shield of Florida)	\$422	\$583	37.9%	\$623	\$640	2.7%
Humana	\$477	NA	NA	\$559	NA	NA
Average Percentage Change Across Insurers			50.3%			18.1%
Percentage Change in Region's Lowest-Premium Option			46.7%			22.4%
Rating Region 28: Tampa						
Ambetter	\$305	\$428	40.3%	\$418	\$460	9.9%
Health Options	\$325	\$481	48.1%	\$421	\$495	17.8%
Molina	\$339	\$567	67.3%	\$395	\$537	35.9%
Florida Blue (Blue Cross Blue Shield of Florida)	\$341	\$496	45.5%	\$502	\$544	8.3%
Humana ¹	\$428	NA	NA	NA	NA	NA
Average Percentage Change Across Insurers			50.3%			18.0%
Percentage Change in Region's Lowest-Premium Option			40.3%			16.4%

Source: Healthcare.gov Public Use File

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

1: Although required by law under the Affordable Care Act, Humana did not offer a gold plan during the 2017 plan year.

Florida (Table 12). Florida required insurers to load the cost of cost sharing reductions onto silver marketplace plans. As a result, the premium of the lowest priced silver plan increased by 46.7 percent in Miami, and the premium of the lowest priced gold plan increased by 22.4 percent. In Tampa, the lowest silver premium increased by 40.3 percent, and the lowest gold premium increased by 16.4 percent. There was considerable variation across insurers in the premium

increases at both metal levels. Molina's lowest silver premium increased by 77.5 percent in Miami and by 67.3 percent in Tampa, increases that exceeded its competitors' increases of 38 to 48 percent. Molina also had the highest increases in its lowest gold premiums, with 44.2 percent in Miami and 35.9 percent in Tampa. Ambetter and Health Options offer the lowest silver and gold premiums in Miami and Tampa in 2018. Humana left both marketplaces in 2018.

Table 13: Lowest Silver and Gold Monthly Premiums for a 40-Year-Old, by Insurer, Selected Rating Areas, 2017–2018

Maryland

Insurer	Lowest Silver Premium			Lowest Gold Premium		
	2017	2018	Percent Change 2017–2018	2017	2018	Percent Change 2017–2018
Rating Region 1: Baltimore						
Kaiser	\$309	\$436	41.1%	\$401	\$450	12.1%
Carefirst	\$355	\$559	57.5%	\$416	\$516	24.0%
Cigna	\$415	NA	NA	\$548	NA	NA
Average Percentage Change Across Insurers			49.3%			18.1%
Percentage Change in Region's Lowest-Premium Option			41.1%			12.1%
Rating Region 3: D.C. Suburbs						
Kaiser	\$309	\$436	41.1%	\$401	\$450	12.1%
Carefirst	\$355	\$559	57.5%	\$416	\$516	24.0%
Cigna	\$409	NA	NA	\$540	NA	NA
Average Percentage Change Across Insurers			49.3%			18.1%
Percentage Change in Region's Lowest-Premium Option			41.1%			12.1%

Source: Maryland Health Connection

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

Maryland (Table 13). In Baltimore and the D.C. suburbs, only CareFirst and Kaiser Permanente offer marketplace coverage in 2018. Cigna left both markets. Kaiser offers the lowest silver and gold premiums in both regions. Kaiser's lowest silver premium increased 41.1 percent in both markets, and its lowest gold premiums increased 12.1 percent. Carefirst

increased its lowest silver premium in each region by 57.5 percent and its lowest gold premium in each by 24.0 percent. Carefirst participates in the marketplace throughout the state, but Kaiser does not. Kaiser also has provider capacity constraints, which limits its ability to add market share and thus limits effective competition in the state.

Table 14: Lowest Silver and Gold Monthly Premiums for a 40-Year-Old, by Insurer, Selected Rating Areas, 2017–2018

Missouri

Insurer	Lowest Silver Premium			Lowest Gold Premium		
	2017	2018	Percent Change 2017–2018	2017	2018	Percent Change 2017–2018
Rating Region 3: Kansas City						
Cigna	\$342	\$484	41.7%	\$448	\$744	66.0%
Blue Cross Blue Shield of Kansas City ¹	\$420	NA	NA	NA	NA	NA
Humana ¹	\$430	NA	NA	NA	NA	NA
Ambetter	NA	\$518	NA	NA	\$709	NA
Average Percentage Change Across Insurers			41.7%			66.0%
Percentage Change in Region's Lowest-Premium Option			41.7%			58.4%
Rating Region 6: St. Louis						
Cigna	\$305	\$421	38.0%	\$400	\$647	61.7%
Healthy Alliance Life	\$352	NA	NA	\$509	NA	NA
Ambetter	NA	\$465	NA	NA	\$636	NA
Average Percentage Change Across Insurers			38.0%			61.7%
Percentage Change in Region's Lowest-Premium Option			38.0%			59.2%

Source: Healthcare.gov Public Use File

Note: It is unknown what the state DOI required insurers to do regarding the cost-sharing reductions.

1. Although required by law under the Affordable Care Act, neither Humana nor Blue Cross Blue Shield of Kansas City appeared to offer gold-level plans in 2017.

Missouri (Table 14). In Missouri, Humana and Blue Cross Blue Shield left the Kansas City marketplace after the 2017 plan year, and Healthy Alliance Life left the St. Louis marketplace. Ambetter entered both markets in 2018, pricing competitively with the only other insurer, Cigna. Cigna was the lowest-premium insurer in 2017 in both markets and remains so for silver coverage. Ambetter’s gold

premiums are lower than Cigna’s in 2018. In Kansas City, the lowest available silver premium increased by 41.7 percent, and the lowest available gold premium increased by 58.4 percent. In St. Louis, the lowest silver premium increased by 38.0 percent, and the lowest gold premium increased by 59.2 percent. Information on Missouri’s instructions regarding the costs associated with CSRs was not available.

Table 15: Lowest Silver and Gold Monthly Premiums for a 40-Year-Old, by Insurer, Selected Rating Areas, 2017–2018

Maine

Insurer	Lowest Silver Premium			Lowest Gold Premium		
	2017	2018	Percent Change 2017–2018	2017	2018	Percent Change 2017–2018
Rating Region 1: Portland						
Anthem	\$334	NA	NA	\$498	NA	NA
Harvard Pilgrim	\$345	\$489	41.7%	\$472	\$608	28.8%
Maine Community Health Options	\$354	\$536	51.3%	\$480	\$570	18.9%
Average Percentage Change Across Insurers			46.5%			23.8%
Percentage Change in Region's Lowest-Premium Option			46.2%			20.7%

Source: Healthcare.gov Public Use File

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

Maine (Table 15). In Portland, Anthem, the insurer with the lowest silver premium, left the marketplace after 2017. Maine Community Health Options and Harvard Pilgrim are the only 2018 marketplace participants. The lowest silver premium increased by 46.2 percent, and the lowest gold premium increased by 20.7 percent in 2018. Maine Community Health Options increased its lowest silver premium by 51.3 percent,

and Harvard Pilgrim increased its lowest silver premium by 41.7 percent. The lowest gold premiums for the two insurers increased by 18.9 percent and 28.8 percent, respectively, the growth rates reflecting the instructions to incorporate CSR costs into silver marketplace premiums only. Harvard Pilgrim has the lowest silver premium, but Maine Community Health Options has the lowest gold premium in 2018.

Table 16: Lowest Silver and Gold Monthly Premiums for a 40-Year-Old, by Insurer, Selected Rating Areas, 2017–2018

Tennessee

Insurer	Lowest Silver Premium			Lowest Gold Premium		
	2017	2018	Percent Change 2017–2018	2017	2018	Percent Change 2017–2018
Rating Region 4: Nashville, Clarksville						
Cigna Health and Life Insurance Company	\$400	\$550	37.7%	\$542	\$905	67.0%
Humana Insurance Company	\$500	NA	NA	\$635	NA	NA
Oscar	NA	\$585	NA	NA	\$824	NA
Average Percentage Change Across Insurers			37.7%			67.0%
Percentage Change in Region's Lowest-Premium Option			37.7%			52.0%
Rating Region 6: Memphis						
Cigna Health and Life Insurance Company	\$398	\$601	51.2%	\$539	\$989	83.6%
Humana Insurance Company ¹	\$426	NA	NA	NA	NA	NA
Average Percentage Change Across Insurers			51.2%			83.6%
Percentage Change in Region's Lowest-Premium Option			51.2%			83.6%

Source: Healthcare.gov Public Use File

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

1: Although required by law under the Affordable Care Act, Humana did not offer a gold-level plan during the 2017 plan year.

Tennessee (Table 16). Two insurers offer marketplace coverage in the Nashville-Clarksville market, and one insurer offers coverage in the Memphis market. In Nashville-Clarksville, Oscar entered the market in 2018. Humana left both markets, and Cigna was the only insurer participating in both 2017 and 2018. Cigna's lowest silver premium in Nashville-Clarksville increased by 37.7 percent in 2018, from \$400 to \$550 for a 40-year-old. Cigna increased its lowest gold premium by 67.0

percent, taking its lowest gold premium from \$542 to \$905 for a 40-year-old. Why Cigna's increase for gold premiums was higher than for silver premiums is unclear, particularly because the state required that the cost of CSRs be loaded onto all silver plans (both on and off the marketplace). As was the case with insurers in Augusta, Georgia, concerns about risk selection into gold plans may be affecting relative premium pricing across tiers, although the law intends to prohibit this.

Table 17: Lowest Silver and Gold Monthly Premiums for a 40-Year-Old, by Insurer, Selected Rating Areas, 2017–2018

Alabama

Insurer	Lowest Silver Premium			Lowest Gold Premium		
	2017	2018	Percent Change 2017–2018	2017	2018	Percent Change 2017–2018
Rating Region 3: Birmingham						
Blue Cross Blue Shield of Alabama	\$457	\$542	18.5%	\$600	\$612	2.0%
Bright Health Plan	NA	\$546	NA	NA	\$672	NA
Average Percentage Change Across Insurers			18.5%			2.0%
Percentage Change in Region's Lowest-Premium Option			18.5%			2.0%

Source: Healthcare.gov Public Use File

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

Alabama (Table 17). Bright Health Plan entered the Birmingham marketplace for 2018, joining Blue Cross Blue Shield of Alabama as the only insurers offering marketplace coverage in Birmingham. Blue Cross Blue Shield increased its lowest silver premium by 18.5 percent and its lowest gold premium

by 2.0 percent in 2018. The different increases between the tiers reflects the state requirement that the cost of CSRs be incorporated into silver marketplace premiums alone. Blue Cross Blue Shield's lowest gold premium is still higher than its lowest silver premium (\$612 versus \$542 per month for a 40-year-old).

Table 18: Lowest Silver and Gold Monthly Premiums for a 40-Year-Old, by Insurer, Selected Rating Areas, 2017–2018

New York

Insurer	Lowest Silver Premium			Lowest Gold Premium		
	2017	2018	Percent Change 2017–2018	2017	2018	Percent Change 2017–2018
Rating Area 4: New York City						
Healthfirst	\$454	\$531	17.1%	\$533	\$612	14.8%
New York Fidelis	\$456	\$510	11.7%	\$537	\$603	12.3%
Metro Plus	\$468	\$504	7.7%	\$550	\$595	8.0%
Oscar	\$483	\$538	11.3%	\$635	\$640	0.8%
Affinity - All Standard Benefits	\$483	NA	NA	\$576	NA	NA
Northshore LIJ ¹	\$487	NA	NA	NA	NA	NA
Emblem	\$518	\$652	25.7%	\$628	\$794	26.4%
Empire Blue Cross Blue Shield	\$575	\$883	53.5%	\$700	\$1,058	51.2%
United Healthcare of N.Y.	\$714	\$825	15.5%	\$844	\$1,009	19.6%
Average Percentage Change Across Insurers			20.4%			19.0%
Percentage Change in Region's Lowest-Premium Option			11.2%			11.6%
Rating Area 8: Long Island						
Fidelis	\$446	\$480	7.5%	\$525	\$567	8.1%
Health First	\$454	\$564	24.4%	\$533	\$650	21.9%
Oscar	\$483	\$538	11.3%	\$635	\$640	0.8%
North Shore LIJ	\$487	NA	NA	NA	NA	NA
Affinity	\$494	NA	NA	\$589	NA	NA
Empire HMO	\$510	\$783	53.4%	\$621	\$939	51.1%
Emblem HIP	\$590	\$741	25.7%	\$715	\$904	26.4%
United Healthcare of N.Y.	\$714	\$825	15.5%	\$844	\$1,009	19.6%
Average Percentage Change Across Insurers			23.0%			21.3%
Percentage Change in Region's Lowest-Premium Option			7.5%			8.1%

Source: New York State of Health

Cost-sharing reduction effect minimal given Basic Health Plan.

1: Although required by law under the Affordable Care Act, Northshore LIJ did not offer a gold-level plan during the 2017 plan year.

New York (Table 18). New York is an unusual state because it developed a Basic Health Plan, known as the Essential Plan, that provides coverage for low premiums and with low cost-sharing requirements for enrollees otherwise eligible for marketplace tax credits who have incomes below 200 percent of the FPL.¹² Thus, adjustments to incorporate costs associated with CSRs were smaller than was the case in non-Basic Health Plan states, because only marketplace enrollees with incomes between 200 and 250 percent of the FPL receive the reductions, and their reductions are smaller than what the law provides for those with incomes below 200 percent of

the FPL. New York has several competing insurers, although Northshore LIJ and Affinity left the New York City and Long Island marketplaces in 2018. Seven insurers compete in New York City and six insurers compete in Long Island in 2018.

In New York City, the lowest silver premium increased by 11.2 percent, and the lowest gold premium increased by 11.6 percent in 2018. On Long Island, the lowest silver premium increased by 7.5 percent, and the lowest gold premium increased by 8.1 percent. In 2018, the Medicaid managed care organizations Metro Plus and Fidelis offered New York

City's lowest-priced plans. On Long Island, Fidelis offers the lowest premium options, followed by Oscar.

The 2018 premium increases do not reflect a significant increase because of the elimination of federal CSRs reimbursement, so the increases must reflect concerns over anticipated changes in the risk pools and other policy uncertainty. There were large differences in premium increases across insurers. Empire Blue Shield, for example,

increased both its lowest silver and gold premiums by over 50 percent in New York City and Long Island. At the other extreme, Metro Plus, Fidelis, and Oscar had small premium increases for their lowest-priced silver and lowest-priced gold plans, about 8 percent for Metro Plus and about 12 percent for Fidelis in New York City and about 8 percent in Long Island for Fidelis. Oscar increased its lowest silver premium by about 11 percent, and its lowest gold premium increased by less than 1 percent in 2018.

Table 19: Lowest Silver and Gold Monthly Premiums for a 40-Year-Old, by Insurer, Selected Rating Areas, 2017–2018

West Virginia

Insurer	Lowest Silver Premium			Lowest Gold Premium		
	2017	2018	Percent Change 2017–2018	2017	2018	Percent Change 2017–2018
Rating Region 2: Charleston						
CareSource	\$505	\$555	9.8%	\$638	\$747	17.0%
Highmark Blue Cross Blue Shield West Virginia	\$541	\$653	20.7%	\$664	\$834	25.6%
Average Percentage Change Across Insurers			15.3%			21.3%
Percentage Change in Region's Lowest-Premium Option			9.8%			17.0%

Source: Healthcare.gov Public Use File

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

West Virginia (Table 19). Highmark Blue Cross Blue Shield West Virginia and CareSource offer plans on the Charleston marketplace. Highmark has been the state's dominant insurer. West Virginia required marketplace insurers to spread their costs associated with CSRs across all metal tiers for plans offered both on and off the marketplace. The lowest silver premium

increased by 9.8 percent, and the lowest gold premium increased by 17.0 percent. CareSource remained the lowest-priced insurer, increasing its premiums by smaller margins than Highmark. The widening difference in premiums between CareSource and Highmark should, however, make CareSource more competitive in the Charleston marketplace in 2018.

Table 20: Lowest Silver and Gold Monthly Premiums for a 40-Year-Old, by Insurer, Selected Rating Areas, 2017–2018

Oklahoma

Insurer	Lowest Silver Premium			Lowest Gold Premium		
	2017	2018	Percent Change 2017–2018	2017	2018	Percent Change 2017–2018
Rating Region 3: Oklahoma City						
Blue Cross Blue Shield of Oklahoma	\$485	\$507	4.5%	\$610	\$690	13.1%
Average Percentage Change Across Insurers			4.5%			13.1%
Percentage Change in Region's Lowest-Premium Option			4.5%			13.1%

Source: Healthcare.gov Public Use File

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

Oklahoma (Table 20). Oklahoma required that the 2018 cost of CSRs be spread across all metal tiers and across plans both on and off the marketplace. Only Blue Cross Blue Shield of Oklahoma continues to operate on the Oklahoma City marketplace. The

lowest silver premium increased by 4.5 percent, and the lowest gold premium increased by 13.1 percent in 2018. The lowest gold premium remains higher than the lowest silver premium (\$690 versus \$507 per month for a 40-year-old).

Table 21: Lowest Silver and Gold Monthly Premiums for a 40-Year-Old, by Insurer, Selected Rating Areas, 2017–2018

Arizona

Insurer	Lowest Silver Premium			Lowest Gold Premium		
	2017	2018	Percent Change 2017–2018	2017	2018	Percent Change 2017–2018
Rating Region 4: Phoenix						
Health Net of Arizona, Inc.	\$475	\$471	-0.9%	\$661	\$621	-6.0%
Average Percentage Change Across Insurers			-0.9%			-6.0%
Percentage Change in Region's Lowest-Premium Option			-0.9%			-6.0%
Rating Region 6: Tucson						
Health Net of Arizona, Inc.	\$349	\$332	-4.9%	\$455	\$438	-3.8%
Blue Cross Blue Shield of Arizona, Inc.	\$502	\$487	-3.1%	\$614	\$595	-3.0%
Average Percentage Change Across Insurers			-4.0%			-3.4%
Percentage Change in Region's Lowest-Premium Option			-4.9%			-3.8%

Source: Healthcare.gov Public Use File

Note: One insurer assumed cost-sharing reduction payments would not continue and made cost-sharing reduction adjustments across all metal tiers for both on- and off-marketplace plans.

Arizona (Table 21). Two insurers participate in Arizona’s marketplace. One insurer assumed CSR payments would not continue and adjusted premiums across all metal tiers both on and off the marketplace. HealthNet is the only insurer participating in the Phoenix market, and Blue Cross Blue Shield of Arizona and HealthNet both offer marketplace plans in the Tucson market. In both markets, the insurers lowered their lowest-priced gold and silver options in 2018. In Phoenix, HealthNet’s lowest silver premium decreased by 0.9 percent,

and its lowest gold premium decreased by 6.0 percent. Its lowest Tucson silver premium decreased by 4.9 percent, and its lowest gold premium decreased by 3.8 percent. Blue Cross Blue Shield’s lowest premiums in Tucson decreased by about 3 percent in both tiers. These decreases reflect the high 2017 premiums that were more than adequate to meet expected claims in 2018 and the insurers’ desire to avoid paying rebates. Both insurers’ lowest gold premiums were higher than their lowest silver premiums.

Table 22: Lowest Silver and Gold Monthly Premiums for a 40-Year-Old, by Insurer, Selected Rating Areas, 2017–2018

North Carolina

Insurer	Lowest Silver Premium			Lowest Gold Premium		
	2017	2018	Percent Change 2017–2018	2017	2018	Percent Change 2017–2018
Rating Region 4: Charlotte						
Blue Cross and Blue Shield of North Carolina	\$565	\$659	16.7%	\$716	\$703	-1.8%
Average Percentage Change Across Insurers			16.7%			-1.8%
Percentage Change in Region's Lowest-Premium Option			16.7%			-1.8%

Source: Healthcare.gov Public Use File

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

North Carolina (Table 22). As was the case in 2017, only Blue Cross Blue Shield of North Carolina offers marketplace insurance in the Charlotte market. In 2018, the lowest silver premium increased by 16.7 percent, and the lowest gold premium declined by 1.8 percent. The differential reflects

CSR-related premium adjustments being made to silver plan premiums only. Despite the difference in premium growth across the tiers, the premium of the lowest-priced gold plan remains higher than the premium of the lowest-priced silver plan (\$703 versus \$659 per month for a 40-year-old).

DISCUSSION

It is difficult to find consistent patterns in marketplace premium changes between 2017 and 2018. Variation in premium growth characterized these markets in previous years,^{9,13,14} but there were strong correlations between market characteristics and prior pricing and growth rates. The uncertainty about future enrollment, risk pools, and numbers of competitors has been exacerbated because of ongoing debates over the Affordable Care Act, enforcement of the law's components, cessation of federal reimbursement for CSRs, and administrative policy changes expected to reduce enrollment in the nation's private nongroup insurance markets both on and off the marketplaces. In setting their 2018 premiums, insurers appear to have incorporated varying degrees of uncertainty and different judgments (e.g., how big or small the effect of CSRs would have on premium increases) as to the implications of policy changes with which they have no experience. Some might also be incorporating differential risk expectations in gold versus silver plans, although the law prohibits such differences.

In states that instructed insurers to load costs associated with CSRs into their silver plans alone, silver premiums generally increased faster than gold plans, but this was not always the case. The impact of CSR adjustments appear to have varied among insurers across and within states. In few instances, the lowest gold premiums fell below the lowest silver premiums, but this outcome was not consistent even among insurers in a given state. Consistent with prior experience, however, areas with high previous-year premiums tended to have smaller premium increases than areas with low previous-year premiums.

More insurers left marketplaces than entered them this year in our study areas, reflecting uncertainty over previous and future policy changes. Without a renewed focus on promoting stability and for insurers and consumers, this dynamic will persist in the coming year.

NOTES

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10. The percentage changes between 2017 and 2018 for lowest-cost and second-lowest-cost silver plans are similar. Data for the second-lowest-cost silver plans (the premium tax credit benchmark plan) are shown in the appendix.
11. West Virginia, Oklahoma, and Indiana were instructed to spread CSR costs across all actuarial value tiers, insurers in Arizona and Georgia took varied approaches to addressing the CSR issue, and information was not available for Missouri. See note 7.
12. The only other state with a Basic Health Plan is Minnesota. In addition, the District of Columbia maintains an insurance program that was in place before the ACA that also covers those with incomes below 200 percent of the FPL outside the marketplace structure.
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Table A-1: Increases in Second Lowest Priced Marketplace Silver Premiums by State, 2017-2018

Monthly Premiums are for a 40-year-old nonsmoker

State	2017 Average Benchmark Premium	2018 Average Benchmark Premium	Percentage Change in Average Benchmark Premiums 2017 to 2018
U.S. Average	\$356	\$470	34.3%
Alabama	\$468	\$555	18.7%
Alaska	\$927	\$727	-21.6%
Arizona	\$540	\$517	-4.3%
Arkansas	\$303	\$365	20.6%
California	\$335	\$424	26.6%
Colorado	\$341	\$432	26.7%
Connecticut	\$436	\$541	24.1%
D.C.	\$298	\$324	8.7%
Delaware	\$423	\$591	39.5%
Florida	\$337	\$477	41.9%
Georgia	\$325	\$496	52.6%
Hawaii	\$347	\$456	31.6%
Idaho ¹	\$353	\$483	36.8%
Illinois	\$360	\$497	38.0%
Indiana	\$273	\$343	25.5%
Iowa	\$333	\$695	108.7%
Kansas	\$363	\$486	33.9%
Kentucky	\$267	\$443	65.6%
Louisiana	\$421	\$497	18.2%
Maine	\$378	\$577	52.4%
Maryland	\$296	\$456	54.0%
Massachusetts	\$252	\$316	25.4%
Michigan	\$266	\$372	39.8%
Minnesota	\$442	\$382	-13.7%
Mississippi	\$332	\$519	56.3%
Missouri	\$369	\$521	41.2%
Montana	\$450	\$522	16.0%
Nebraska	\$476	\$757	59.0%
Nevada	\$314	\$466	48.3%
New Hampshire	\$267	\$475	77.8%
New Jersey	\$339	\$411	21.3%
New Mexico	\$254	\$431	69.5%
New York	\$454	\$498	9.7%
North Carolina	\$540	\$619	14.6%
North Dakota	\$334	\$310	-7.3%
Ohio	\$262	\$364	38.8%
Oklahoma	\$503	\$658	30.7%
Oregon	\$321	\$423	31.6%
Pennsylvania	\$367	\$524	42.5%
Rhode Island	\$261	\$311	19.0%
South Carolina	\$390	\$524	34.3%
South Dakota	\$457	\$497	8.7%
Tennessee	\$471	\$743	57.8%
Texas	\$287	\$404	41.0%
Utah	\$311	\$550	77.1%
Vermont	\$492	\$505	2.8%
Virginia	\$319	\$525	64.8%
Washington	\$247	\$335	35.6%
West Virginia	\$461	\$532	15.4%
Wisconsin	\$360	\$524	45.5%
Wyoming	\$502	\$861	71.7%

Source: Healthcare.gov public use files and relevant state marketplace websites and rate filings

1: Idaho combined rating area 7 into rating area 5 for the 2018 plan year.

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