

IT TAKES VISION

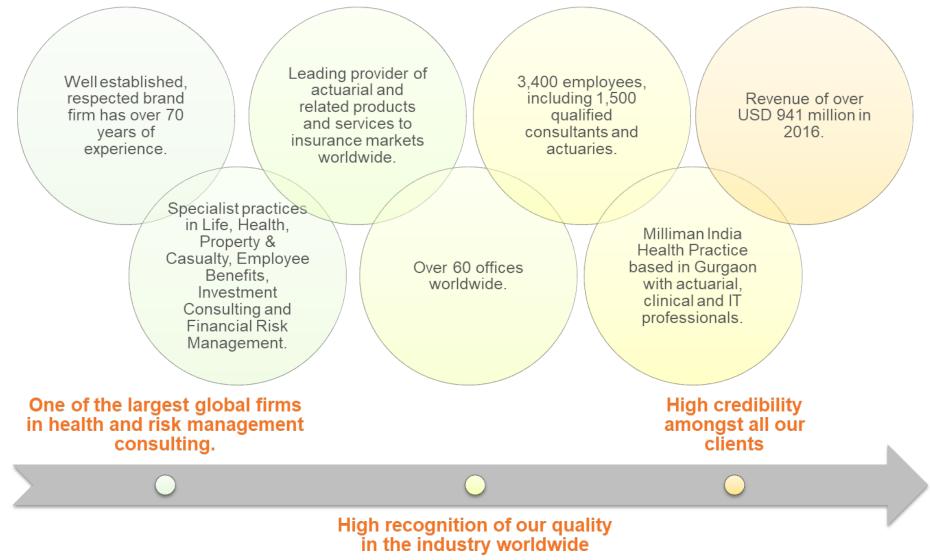
Retail Medical Underwriting

Concepts, Approach and Emerging Opportunities

Lalit Baveja, Principal & Sr Health Management Consultant IAI Conference, Gurugram 2017

Milliman Overview

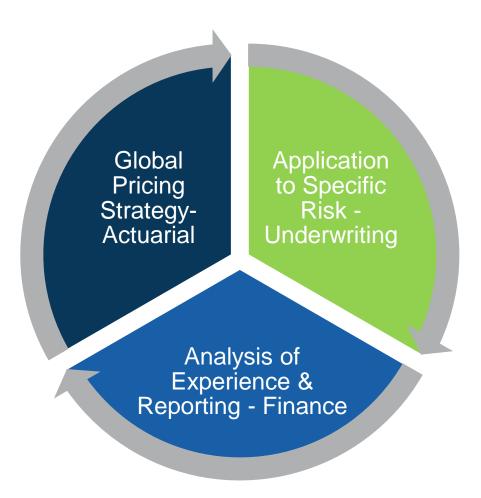
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Overview of medical underwriting

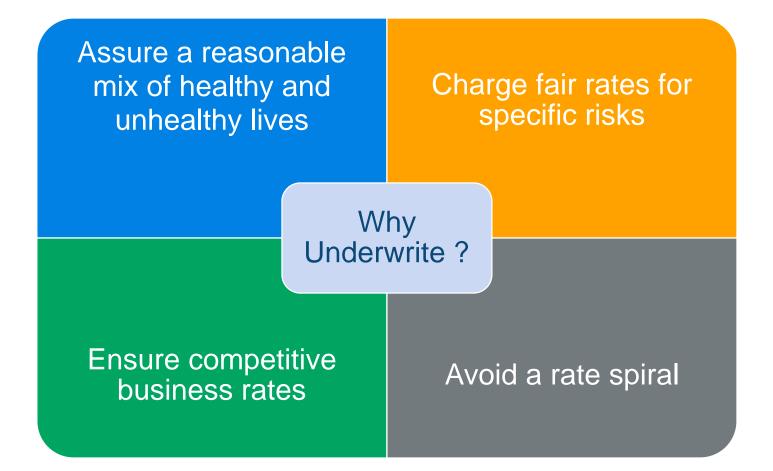
Integral part of actuarial control cycle





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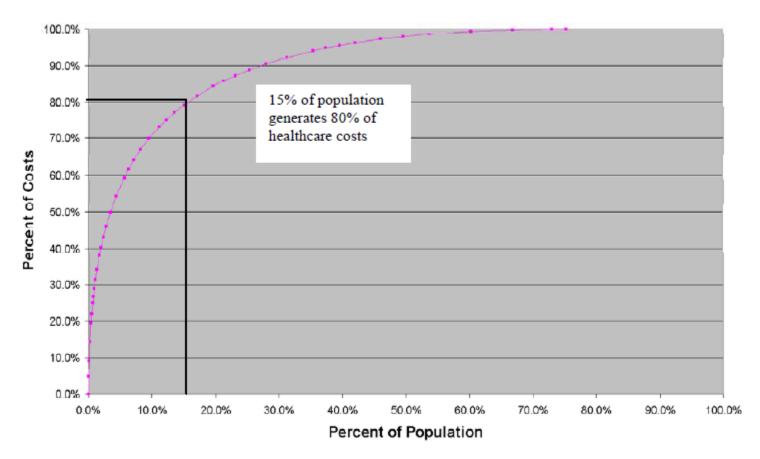
Overview of medical underwriting





Health costs vary within a population

Most costly 15% of individuals generate 80% of healthcare costs



Distribution of Healthcare Claims Costs

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Assure a reasonable mix of healthy and unhealthy lives

Standard distribution

850 low-cost members, 150 high-cost members

	Number	Cost - % of Average
Low – Cost	850	24%
High - Cost	150	533%
	1,000	100%



Assure a reasonable mix of healthy and unhealthy lives

Large proportion of high-cost members

700 low-cost members, 300 high-cost members

	Number	Cost - % of Average
Low – Cost	700	24%
High - Cost	300	533%
	1,000	156%



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Assure a reasonable mix of healthy and unhealthy lives

Small proportion of high-cost members

925 low-cost members, 75 high-cost members

	Number	Cost - % of Average
Low – Cost	925	24%
High - Cost	75	533%
	1,000	65%



Competitive need

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Health insurer have to use at least as sophisticated tools as their competitors Or You Could get disproportionate share of high-

cost individuals

Or "The Death spiral effect"



Tools and Techniques





Tools for Risk Assessment

Objective

 Measure and quantify health risk of applicant in line with organizations risk appetite

Information sources

- Demographic: Gender, location, marital status, family size
- Health status
- Lifestyle/ Habits
- Other insurance/ claims History
- Financial: Income

Approach

Proposal form

- Agents Report
- Attending Physician Report
- Full Medical Underwriting
 - Medical questionnaires
 - Teleunderwriting
 - Medical Tests

Underwriting process Decision Making

Objective

- Establishing selection standards in line with the insurer's underwriting philosophy
- Reduce potential adverse selection
- Uniformity in portfolio.

Risk stratification

- Preferred Risk
- Healthy Risk
- Sub Standard Risk
- Poor risk
- Very Poor Risk

Decisions

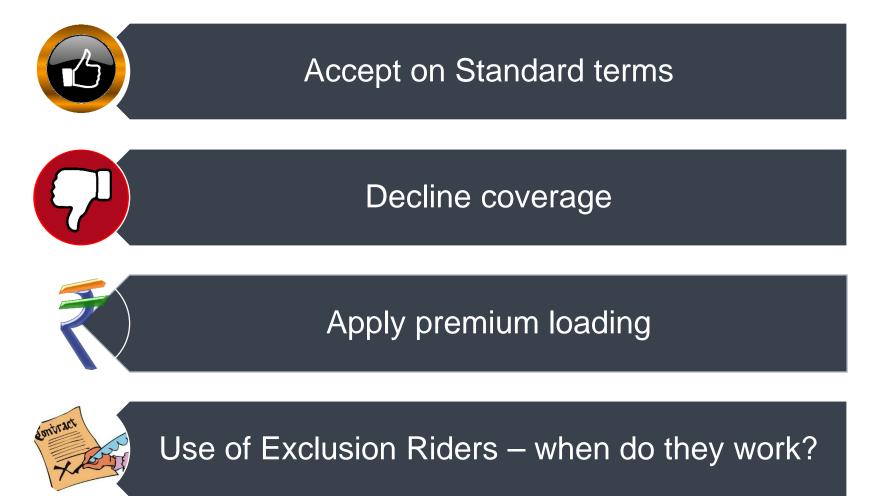
Standard terms

- Decline
- Exclusion riders
- Premium loading
- Defer



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Underwriting techniques

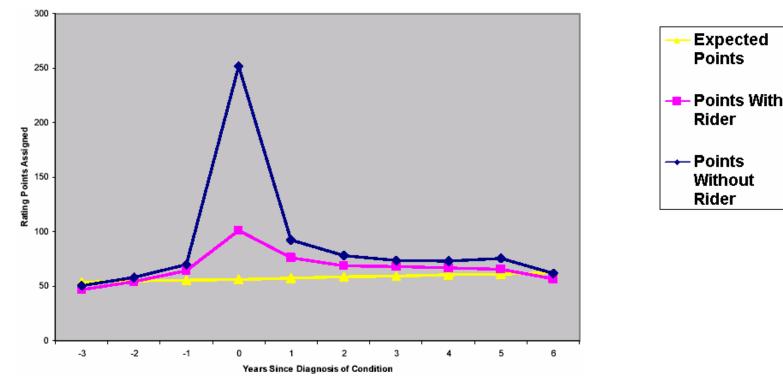




Technical (Decision Making)

Impact on decision making

Scenario 1 (Acute Condition): Cholelithiasis (The presence of stones in the gallbladder).





Technical (Decision Making)

Impact on decision making

Scenario 1: Acute Condition: Cholelithiasis (The presence of stones in the gallbladder).

Decision:

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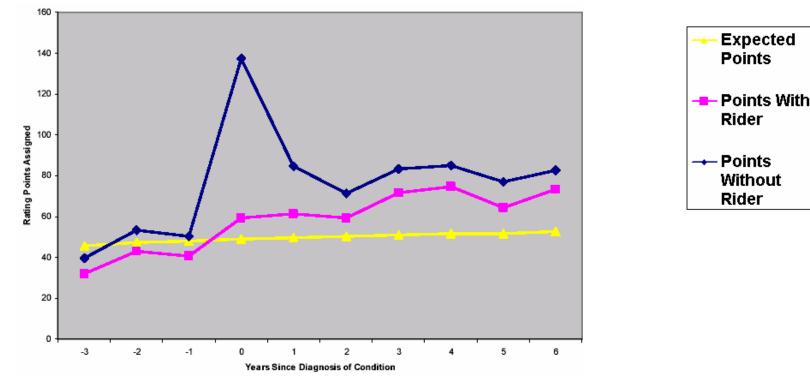
- Rider useful: if applied in year of diagnosis, risk is acceptable because increase in cost is limited
- Underwriting decision: application of rider would allow coverage to be written



Technical (Decision Making)

Impact on decision making

Scenario 2 (Acute Chronic Condition): Cystocele/Rectocele (Hernia of bladder or rectum)





Technical (Decision Making)

Impact on decision making

Scenario 2 (Acute Chronic Condition): Cystocele/Rectocele (Hernia of bladder or rectum)

Decision:

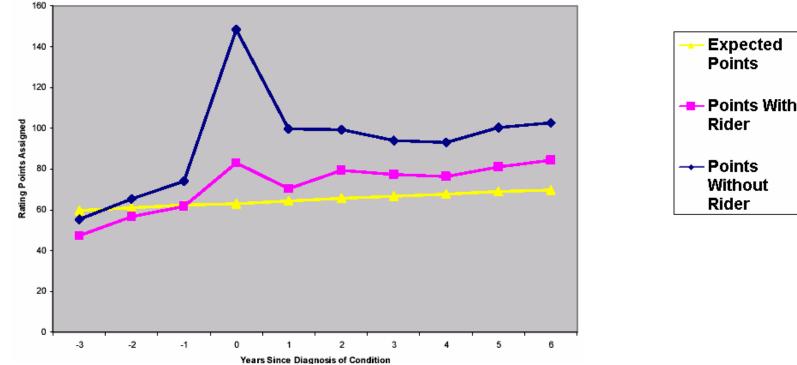
- High costs maintained over long period of time
- Rider not useful: does not significantly reduce costs
- Underwriting decision: would likely decline



Technical (Decision Making)

Impact on decision making

Scenario 3 (Chronic Condition): Spondylolisthesis (Forward slippage of a lumbar vertebra)





Technical (Decision Making)

Impact on decision making

Scenario 3 (Chronic Condition): Spondylolisthesis (Forward slippage of a lumbar vertebra)

Decision:

- Rider useful: removes a meaningful portion of excess claim costs
- Underwriting decision: application of a rider would allow coverage to be written

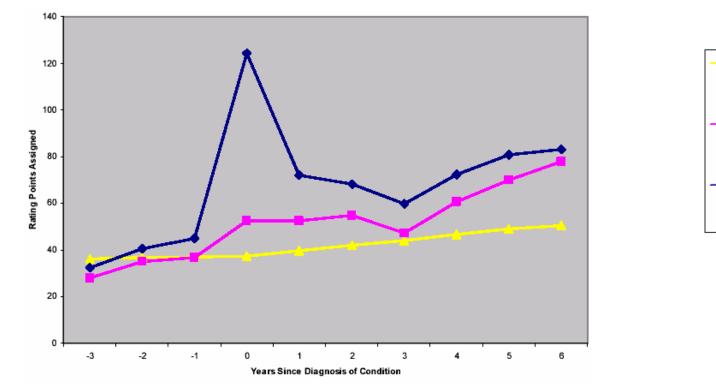


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Technical (Decision Making)

Impact on decision making

Scenario 4 (Relapsing Condition): Alcoholism



Expected

Points With

Points

Rider

– Points Without

Rider

Technical (Decision Making)

Impact on decision making

Scenario 4 (Relapsing Condition): Alcoholism Decision:

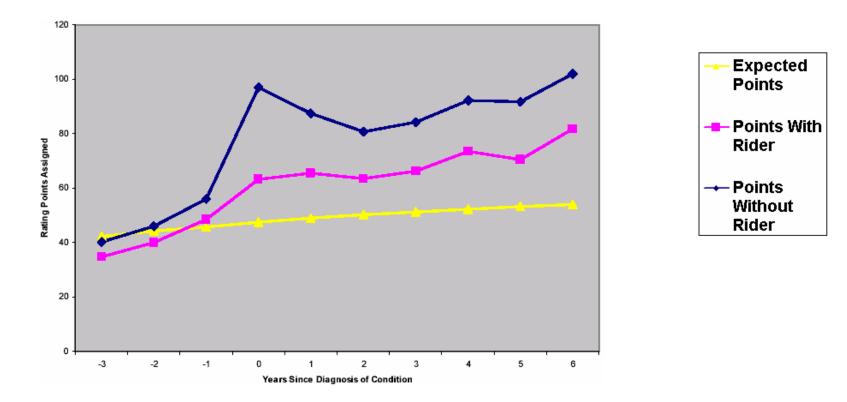
- Costs increase after an apparent recovery
- Rider useful: only in early years, not during relapse
- Underwriting decision: pay special attention to these conditions



Technical (Decision Making)

Impact on decision making

Scenario 5 (Progressive Condition): Osteoarthritis





Technical (Decision Making)

Impact on decision making

Scenario 5 (Progressive Condition): Osteoarthritis

Decision:

- Small cost decrease for a couple of years after diagnosis, then begins to increase steadily
- Rider: does remove a portion of costs
- Underwriting decision: long-term effects due to the steady increase may cause decline instead



Other underwriting challenges

Regulations, Sales and Efficiency

Regulations



Mandated compliance and member safeguards

Sales

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Volume priority Vs UW diligence

Cost



Cost and efficiency of UW process



Impact of regulation

- Guranteed renewability
- No maximum age
- Limitations on permanent exclusions
- Lack of consensus on pre existing disease interpretation
- Portability

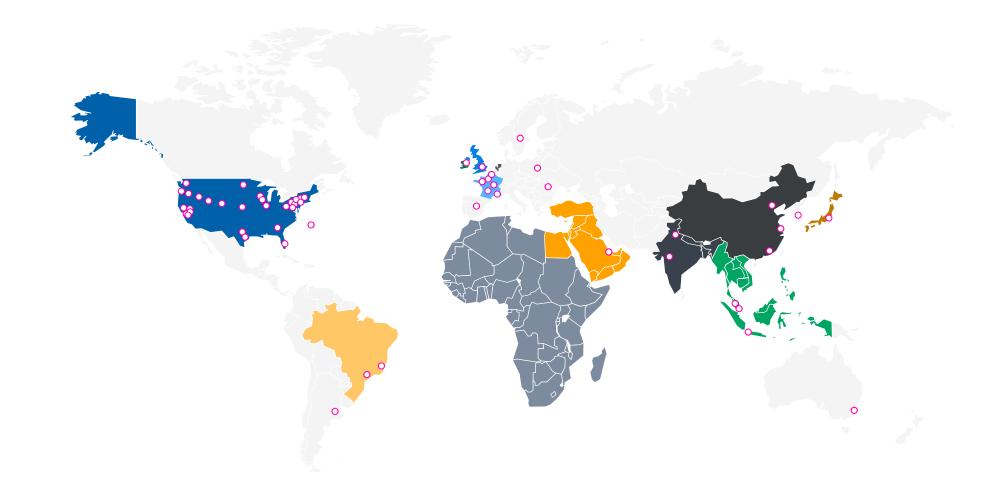


Tension between avoiding undesirable risk and maximising enrolment without spending too much money or time

- Loosen underwriting to maximise volume...at what risk?
- Cost of UW process and implications of delays or long processes
- Retail applications have more administration costs
 - Teleunderwriting
 - Medical tests
 - UW assessment process costs and time
- Low member tolerance for decision delays lapsed proposals
- Critical to monitor and manage efficiency opportunities in the process



Emerging underwriting practices and opportunities





Emerging opportunities

Smart real time dynamic workflows important to avoid process holdups

Dashboard Guidelines UW Queue Closed Queue Common Queue Common Queue															
All Proposal 🔻 Search															
Queue															ort to Excel
Policy No	Proposer Name	Inward Type	Policy	Date 🔶	Channel	Business	Product Code	Plan Code 🔶	SubPlan Name	Sum Insured	Decision	Status	Priority	Portable Case	Members
PHEL0000001	RAKESH ARORA	Sales (New Business)	Individual	09/03/2015	Direct	Urban	HEALTH	HPR01	Health Preferred	15.00 Lacs		Add Info Pending	High	Yes	•
PHEL0000006	MUNISH R	Sales (New Business)	Family Floater	09/03/2015	Direct	Urban	HEALTH	HPR01	Health Preferred	15.00 Lacs		UW Pending	Normal	No	æ
PHEL0000007	ROY S	Sales (New Business)	Family Floater	09/03/2015	Direct	Urban	HEALTH	HPR01	Health Preferred	15.00 Lacs		UW Pending	Normal	No	•
	SAMITA SHARMA	Sales (New Business)	Family Floater	09/03/2015	Direct	Urban	HEALTH	HPM01	Health Premier	1.00 Cr		UW Pending	Normal	No	•
PHEL0000009	GANESH K	Sales (New Business)	Family Floater	09/03/2015	Direct	Urban	HEALTH	HPR01	Health Preferred	15.00 Lacs		UW Pending	Normal	No	E
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Underwriting process Emerging opportunities

Structured Teleunderwriting process for a standard objective approach

F Questions Medical Questions	Medical Test Medical Test Summary IRA UW Decision History		
Questions	Add Condition		
S.No Question	Condition:		<u>^</u>
1. High or Low Blood Pressure / Ches	Hyperthyroidism		
2. do you have gastro pain ?			
3. Diabetes or Pre-diabetes condition		-	_
4. peerreview	Question Have you taken any surgical or radioactive iodine treatment for your condition?	Response	
5. Arthritis/Gout, Spondylosis, Joint I		Yes	·
6. Cardiology Question	Are your thyroid test results WNL? Please send results of your TSH level test.	Controlled	T
7. Tuberculosis, Asthma, Bronchitis o	Do you suffer from hypertension/ high blood pressure ?	None	•
8. Kidney Failure, Dialysis, Stones in reproductive organs	Is this under control (on regular medication/ under medical review and normal test results) ?	NA	T
9. Liver Disease/Ulcers/Gall bladder			
10. Thyroid/Pituitary Disorder or any o	Additional Medical Information:		

Emerging opportunities

Intelligent claims data analysis based risk scoring / assessment engines

JMS								C Mill
ard Guidelines UW Queue Cl	osed Queue Con	nmon Queue					🌡 Test	1 Go to Renewa
Member: MR ARMAN SHARM	1A • Upload	I Document 🔲 : High F	Priority				Possib	ole Duplicates
PF Questions Medical Quest	ions Medical Te	est Medical Test Sum	mary IRA UW I	Decision History				
Pre-Existing Conditions								
Condition	Additional Inf	ormation	Base Risk Score	Risk Score	Risk category	Details	Delete	
Cervical Spine Fracture			1.16	1.2	LI	Details	1	
Acute Bronchitis			1	1	L1	Details	1	
Hyperthyroidism			1.3	1.39	L1	Details	1	
					Base Risk Score	1.62	Final Risk Score	1.75
Exclusions								
Condition	ICD Code	Description					Exclusion Period	Select
Cervical Spine Fracture	M50	Cervical disc disorders					1 •	
Cervical Spine Fracture	M96	Postprocedural muscu	loskeletal disorders, no	t elsewhere classified			1 •	
Cervical Spine Fracture	S14	Injury of nerves and sp	oinal cord at neck level				1 •	
Cervical Spine Fracture	\$1.9	Other and unspecified	iniuries of neck				1 •	



Underwriting process Emerging opportunities

Data analytics for informed decision making using your own experience

Top 10 conditions

CCHG category	Unique members	% Distribution chronic disease	Inpatient admits/ 1000	Day case admits/ 1000	Average cost per year	Average premium per year	Loss ratio	Average age
Active cancer	76	6%	12.1	6.7	18,950	22,500	84%	57
Both CAD and diabetes	69	6%	4.3	2.5	16,580	26,200	63%	69
CAD without diabetes	278	22%	3.0	1.6	19,800	19,800	100%	63
Diabetes without CAD	179	14%	0.2	0.0	14,800	15,600	95%	53
Hypertension (incl. stroke and peripheral vascular disease	61	5%	0.4	0.2	13,650	14,800	92%	63
COPD	54	4%	0.2	0.0	18,700	28,200	66%	75
Asthma	132	11%	0.1	0.1	14,680	10,200	144%	42
Chronic musculoskeletal	165	13%	1.1	0.4	12,680	14,600	87%	53
Other chronic diseases (aggregated)	232	19%	1.4	0.5	8,650	9,680	89%	46
Health male (16-40)	5,730		3.3	1.4	1,468	6,100	24%	28

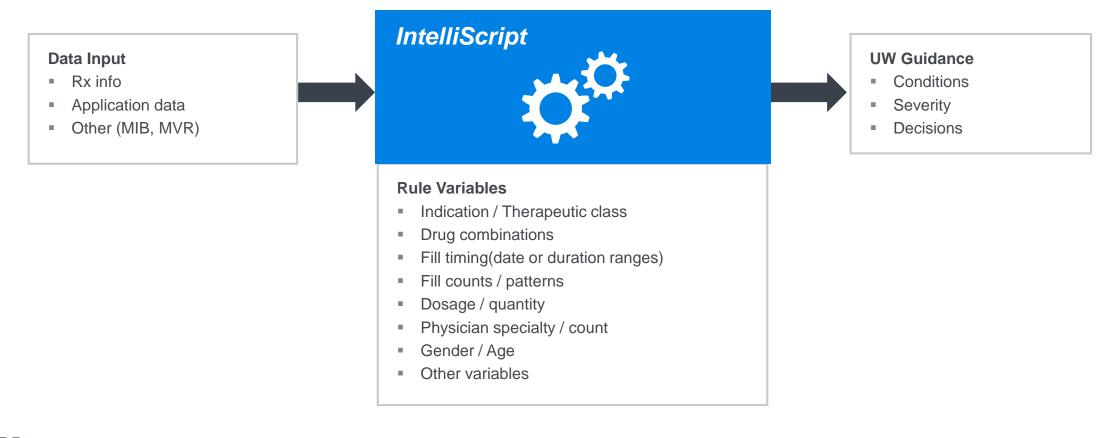


Underwriting process Emerging opportunities

Integrating multiple data sources for informed decision making

Prescription driven UW risk assessment

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Emerging opportunities

Ongoing close collaborations between core operations







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Thank you

Lalit Baveja, Principal & Sr Healthcare Management Consultant December 4, 2017