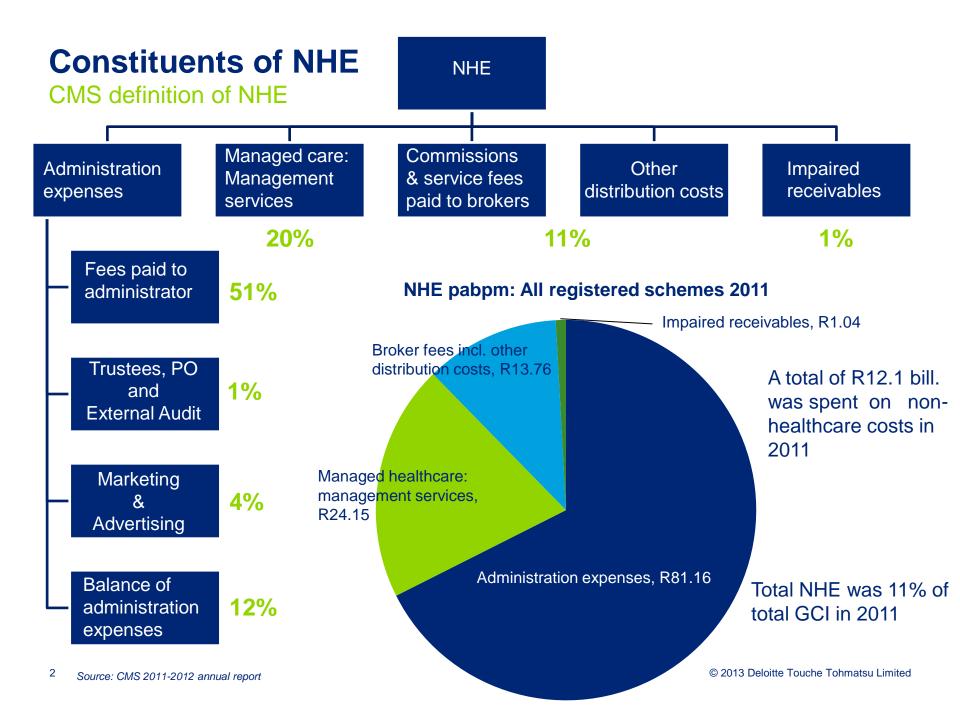
# Deloitte.

Analysis of Non-Healthcare Expenditure (NHE)

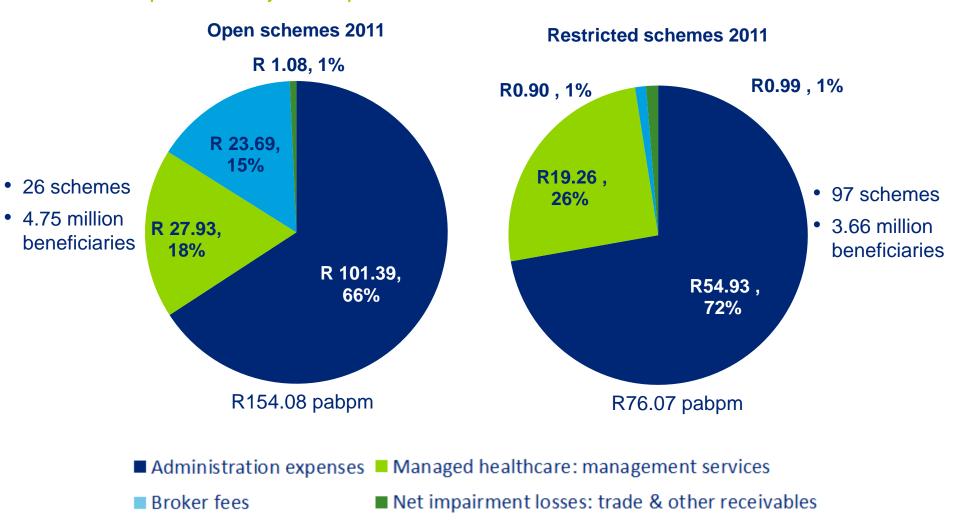
Ashleigh Theophanides





## Restricted vs. Open schemes

2011 Snapshot – Major components of NHE

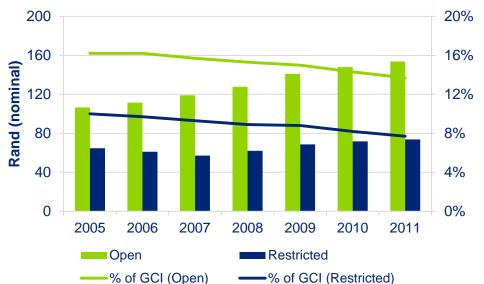


Source: CMS 2011-2012 annual report

## Restricted vs. Open Schemes

#### Over time - Nominal and inflation-adjusted values

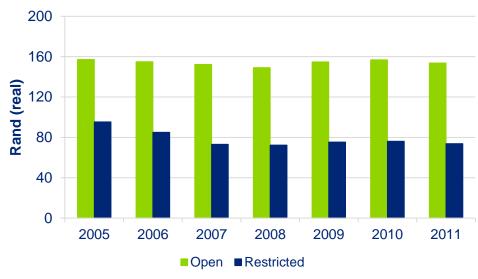
#### Nominal Average NHE pbpm



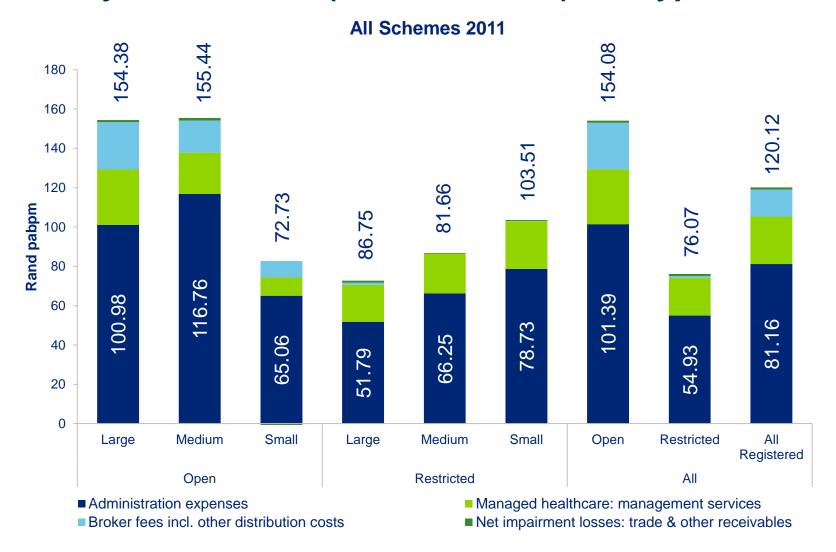
- Average real NHE has remained relatively stable in real terms over the last 6 to 7 years for open schemes
- Fall in real average NHE for restricted schemes can be partly attributed to the introduction of GEMS in 2006
- 2011 NHE is 2.2% lower than 2005 NHE in real terms for open schemes and 23% lower for restricted schemes

- The fall in nominal NHE as % of GCI is affected by different rates of inflation (Healthcare cost inflation vs. CPI)
- Nominal NHE as % of GCI approx. 6% higher for open schemes on average
- 2011 NHE 44% higher than 2005 NHE in nominal terms for open schemes and 14% higher for restricted schemes

#### Real (2011 values) Average NHE pbpm

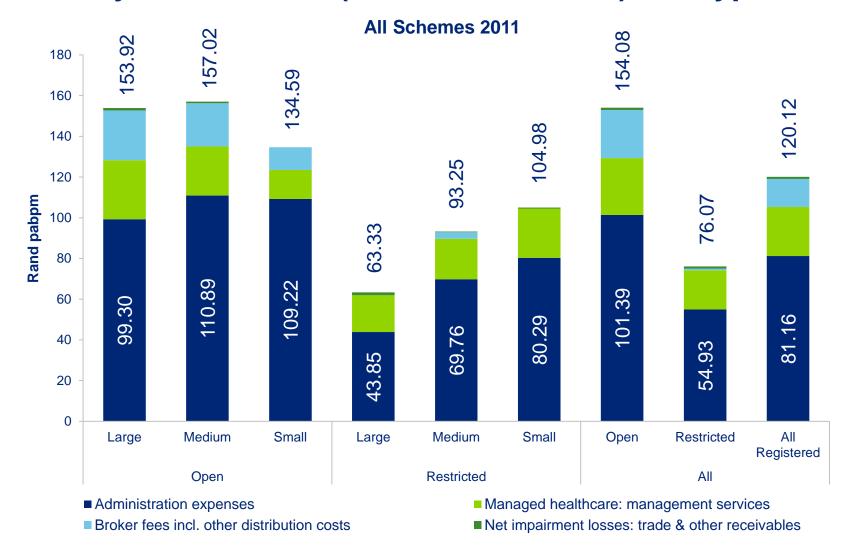


## NHE by scheme size (CMS definition) and type



Source: CMS 2011-2012 annual report

## NHE by scheme size (Deloitte definition) and type

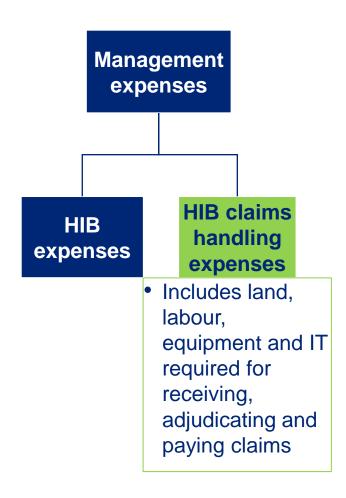


Source: CMS 2011-2012 annual report.

## International experience - Australia

#### Non-healthcare expenditure

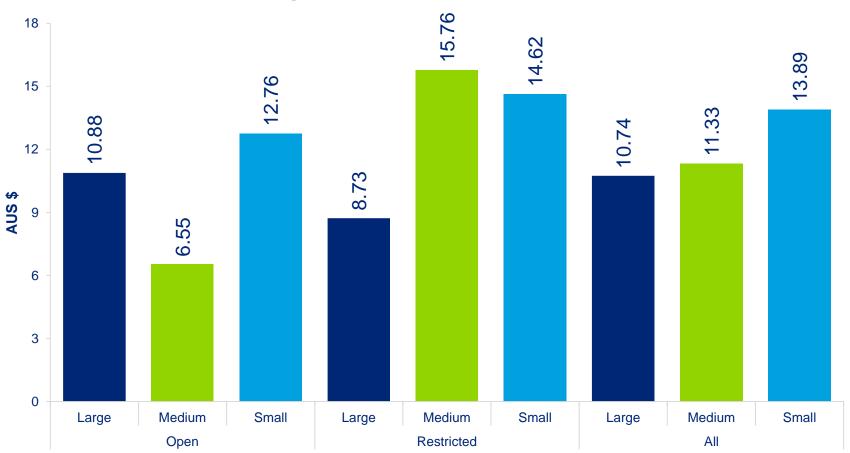
- "Management expenses" analogous to NHE in SA
  - defined as "The operating expenses incurred in the normal fund operations (i.e. salaries, commission, rent, etc.)".
- Management expenses = HIB expenses + HIB claims handling expenses
- Management expense ratio commonly used to measure administrative efficiency
  - Accepted industry norm: 8% 9% of premium. Actual is at 9.08%.



## International experience - Australia

Management expenses by fund size (CMS definition) and type

#### **Management Expenses pabpm 2011**

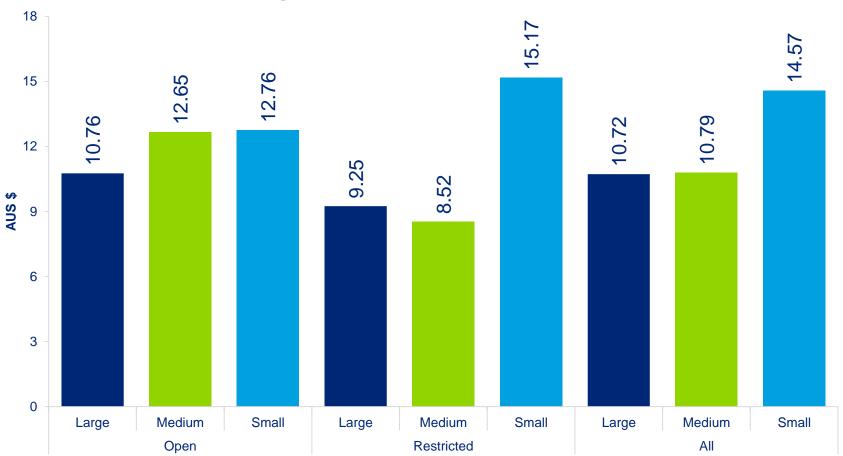


PHIAC: The operations of Private Health Insurers annual report 2011-2012. Deloitte analysis

## International experience - Australia

Management expenses by fund size (Deloitte definition) and type

#### **Management Expenses pabpm 2011**



PHIAC: The operations of Private Health Insurers annual report 2011-2012. Deloitte analysis

## **International experience - USA**

#### **Economies of scale**

Results of study performed by Milliman in 2010 on administrative expenses of commercial health insurers in the U.S.

Expanses Catagory	Insured Market			
Expenses Category	Large Group	Small Group	Individual	
<b>Expenses for improving healthcare quality</b>	\$ 2.36	\$ 2.35	\$ 1.40	
Claims adjustment expenses	\$ 7.88	\$ 8.76	\$ 8.26	
Agents and brokers fees and commissions	\$ 6.13	\$ 15.34	\$ 12.05	
Direct sales salaries and benefits expenses	\$ 1.69	\$ 2.13	\$ 2.16	
Other general and administrative expenses	\$ 12.78	\$ 15.25	\$ 16.44	
Total administrative expenses	\$ 30.84	\$ 43.83	\$ 40.31	

- Smaller insurers have on average up to 42% higher administrative costs
- Main drivers of NHE in US market is broker fees and commissions which are regulated in SA market
- Administrative expenses averaged 19% for the individual market, 13% of premium in the small group market, and 9% of premium in the large group market.

## **International experience - USA**

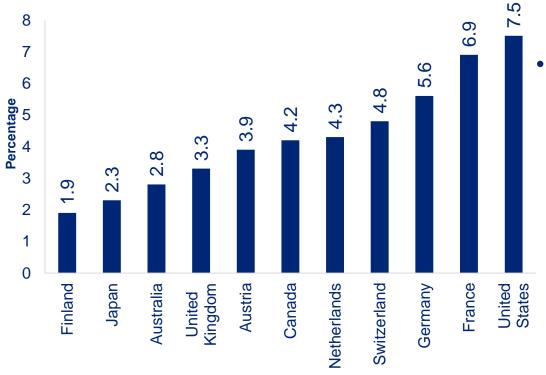
Comparison of components of NHE

	Insured Market (USA)			South African Market	
Expense category	Large group	Small group	Individual	Expense category	All schemes
Expenses for improving healthcare quality	8%	5%	3%	Managed care: Management services	20%
Agents, Broker fees & commissions	20%	35%	30%	Broker fees incl. other distribution costs	11%
Claims adjustment expenses	26%	20%	20%		
Other general & administrative expenses	41%	35%	41%		
Direct sales salaries and benefits expenses	5%	5%	5%		
Administration expenses	72%	60%	66%	Administration expenses	68%
				Net impaired receivables	1%
Total administrative expenses	100%	100%	100%	Total NHE	100%

## International experience

NHE – Administration expenses

## Administration expenses as % of National Health Expenditure

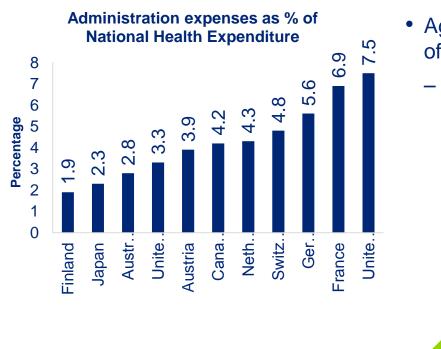


- Administrative expenditure varies significantly across the globe
- The figure illustrates the impact of insurance design on administrative costs
  - e.g. Single payer vs. multi-payer system

OECD Health Data 2007, Version 10/2007

#### International experience

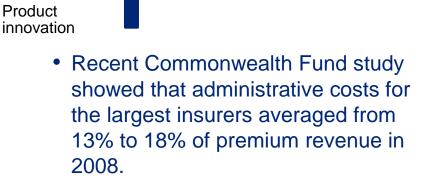
NHE – Administration expenses cont.



Marketing

Billing

- Aggregate measures are confounded by the mix of costs in public and private systems:
  - e.g. In the U.S., Health administration expenses amount to approx. 21.2% of private health insurance expenditures vs. 6.1% of public health insurance expenditure



Commission &

Broker fees

**Policy** 

management

& underwriting

Higher Administrative

costs

## Impact of NHI on NHE

#### It depends

- Administrative cost for NHI systems internationally tend to be low (approx. 3 % of the total cost)
  - Will this be the case for SA?
  - Role of NHIA (National Health Insurance Authority)?
  - What IT infrastructure will be in place?
  - Multiple payer or single payer?
  - Etc...

# Thank you

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