Aetna HealthFund® consistently delivering meaningful savings and engaged members

Aetna HealthFund Study*

Sixth annual Aetna HealthFund Study

Key findings:

- Aetna HealthFund continues to realize long-term trend reductions and medical cost savings
- Aetna HealthFund members get the care they need
- Aetna HealthFund members are more informed and engaged health care consumers
- HSA members have the most dramatic results
- Execution on strategies impacts results

1. Continues to realize long-term trend reductions and medical cost savings

Comparison of medical costs

- Full replacement AHF HRA**/HSA** Customers who replaced their previous plan options with an Aetna HealthFund (AHF) Health Reimbursement Arrangement (HRA) or Health Savings Account (HSA***) experienced lower annual cost trends over five years, producing savings of nearly \$18 million per 10,000 members.[†]
- Option AHF HRA/HSA The average plan sponsor saved nearly \$9 million per 10,000 members when an AHF HRA or HSA was offered as a plan option. This finding is significant, since it is based on the *entire* Aetna membership in all of the plan sponsors in the study, not just those with an AHF.

Background

Who we studied

- 137 Aetna HealthFund customers
- 2.0 million Aetna members total^{††}
- 436,000 Aetna HealthFund members (HRA and HSA)
- 1.6 million PPO comparison members

Length of study

- Seven years of data (2002 2008)
- Seven years of HRA-specific data
- Five years of HSA-specific data
- Time period includes one year of data prior to enrollment in an AHF plan

Full replacement AHF HRA/HSA — \$18 million in savings per 10,000 members over 5 years[†]



Option AHF HRA/HSA — \$9 million in savings for entire case per 10,000 members over 5 years[†]



- *From an Aetna study of Aetna HealthFund HRA and HSA enrollment (2003–2008).
- **HRAs are currently not available to HMO members in IL and small group members in FL. HSAs are currently not available to HMO members in IL and CA.
- ***Plan sponsors who offered HSA as an option with greater than 10% penetration.
 - [†]Savings based on allowed claim trends.
 - ^{††}2.0 million studied = 436K AHF members + 1.6M non-AHF members (who enrolled in another Aetna plan).



2. Members receive increasing levels of care

Aetna HealthFund members spend more on preventive care when compared to a control-matched PPO population. Furthermore, the Aetna HealthFund member population showed 5-10 percent lower PCP and specialist utilization.

- Preventive care AHF members accessed the same or higher levels of care for the following services:
 - > 10 to 15 percent more spent on preventive care
 - > Breast and cervical cancer screenings for women
 - > Diabetes-related tests and screenings
- Chronic conditions Both HRA and HSA members with chronic conditions maintained the use of drug therapies for their conditions.
- Emergency room use Members in the study had 5 to 10 percent lower emergency room use than those in the control group.
- Generic drug use AHF members had a higher rate of generic drug use when compared to the control PPO group.

The study results suggest members are better informed on accessing appropriate care settings for medical needs.

3. Members are more informed and engaged health care consumers

■ Tools and information — Aetna HealthFund members were much more likely to use online consumer tools and information — a leading indicator of employee engagement. When compared to PPO members, AHF HRA and HSA members were twice as likely to:

- > Log in to the Aetna Navigator® member website
- > Search for cost of care
- > Search for health information
- > Search for benefits information
- > Take a health assessment

The study results suggest that significantly more AHF members are engaged compared to their PPO counterparts.

4. HSA members have the most dramatic results

- HSA members realized the greatest reduction of PCP non-routine care and reduction in non-urgent ER visits
 - > Medical costs for HSA members are more than 10 percent lower than for PPO members
 - > On full replacement basis, HSA delivers \$1 million more in savings over four years than HRAs
 - > Non-routine visits more than 15 percent lower than PPO
 - > Non-urgent care more than 20 percent lower than PPO
- HSA members are more engaged in their health
 - > Members use online tools 2.5 times more often than PPO members
 - > Members took health assessment 3.0 times more often than PPO members
- HSA members with chronic conditions are significantly more engaged, and their PPO counterparts are twice as likely NOT to be engaged.

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Policy forms issued in Oklahoma include: HMO OK COC-5 09/07, HMO/OK GA-3 11/01, HMO OK POS RIDER 08/07, GR-23, GR-29/GR-29N.

5. Execution on strategies impacts results

To sustain optimal savings, adherence to best-in-class strategies is critical

Behaviors continue to differ for HRA vs HSA

HSA (2007 vs 2008)

- Percent using funds increased from 68% to 78%
- Average available account funds increased from \$2,643 to \$3,792

HRA (2007 vs 2008)

- Complete use of fund increased from 48% to 53%
- Average available fund balance increased from \$1,336 to \$1,455

Percentage of employees using none, some of all either their HSA or HRA





