27th International Congress of Actuaries

The Main Features of German Private Health Insurance

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German Health Insurance

• Statutory	• Private	
Health insurance	Health Insurance	
 87% of the population benefits in 2000:	 9% of the population benefits in 2000:	
EUR 126 billion	EUR 13 billion	

• Insured persons:

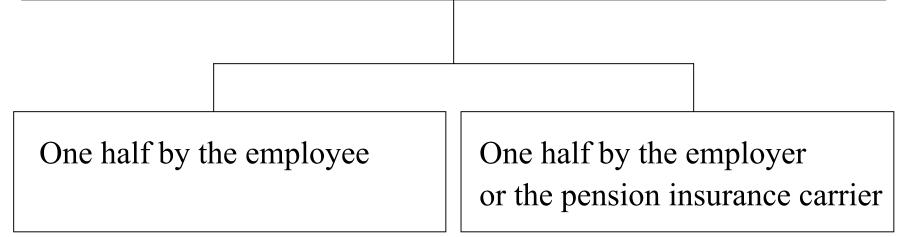
 compulsory: employees with a salary under the ,,contribution assessment ceiling"

- their spouses and children

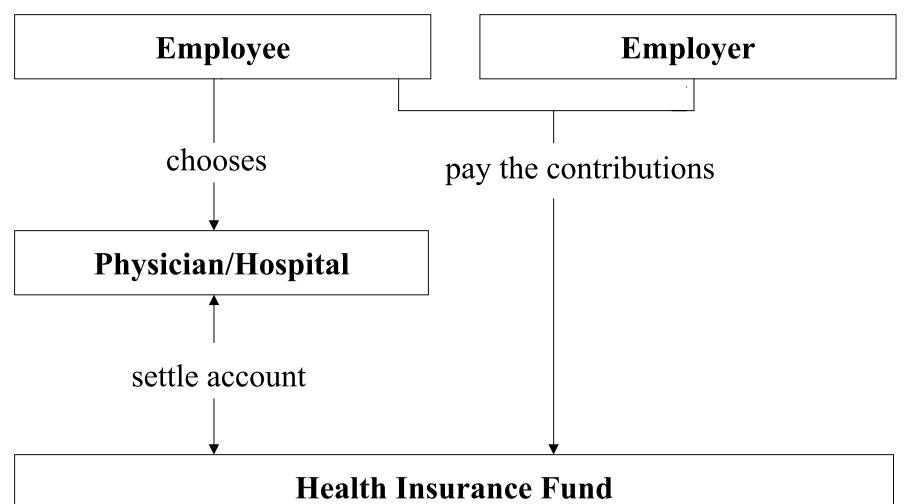
– voluntary members

- Main benefits:
 - out- and inpatient medical treatment
 - dental care
 - drugs and appliances
 - sickness benefit

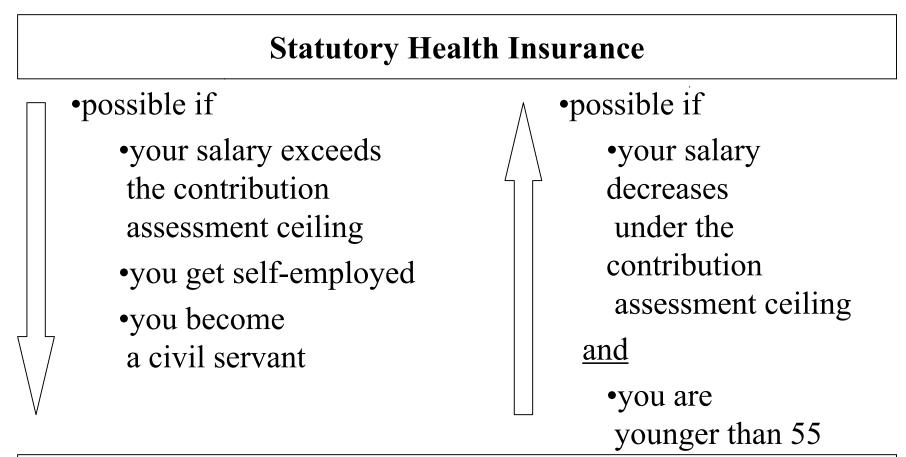
- Contributions:
 - a percentage of the salary or the social insurance pension (up to the contribution assessment ceiling)
 - contribution-free: spouse and children with negligible income



Organisation



German Health Insurance



Private Health Insurance

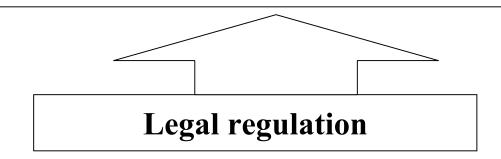
"Once private, ever private"

Substitutive Health Insurance

Private health insurance

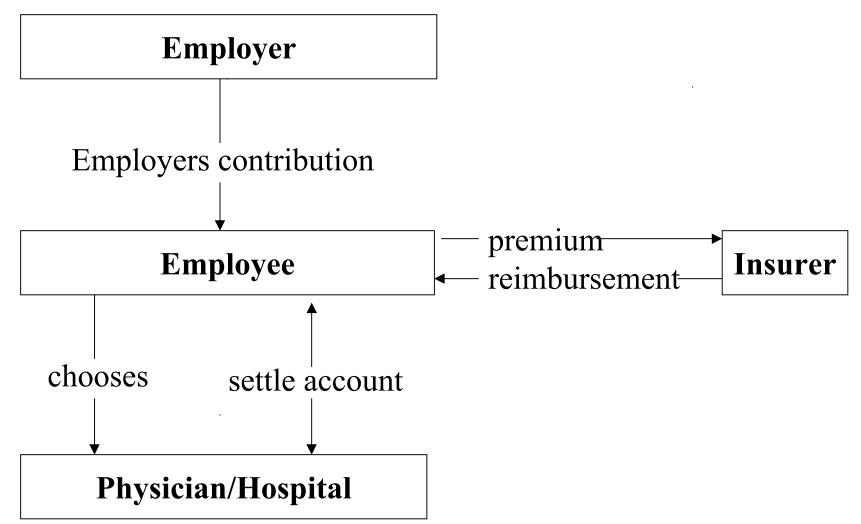
which may serve as a partial or complete alternative

to health cover provided by the statutory social security system



7,5 million insured persons

Organisation



Regulation of health care market

Government fee scale **Physicians** 2400 positions, multiplier 1-2.3-3.5 •Committees under **Operating cost rates** government regulation for hospitals •limited extra costs for better accommodation •Retail price maintenance •limited reimbursement for Drugs important kinds of drugs in the statutory insurance

German Health Insurance Market

Persons (Population: 82 million)

87% public insured persons		9 % private insured persons (substitutive)	
73% compulsory	14% voluntary	5% normal	4 % civil servants
88% without private supplementary cover	9% with private supplementary cover		

Premiums

Statutory Insurance: EUR 130 billion

Private Insurance: EUR 19 billion

- •Main requirements:
 - •Lifelong insurance guarantee
 - •Similarity to statutory insurance but
 - •a wide range of different tariffs
 - •additional benefits
 - •deductibles
 - •a just premium for each insured
 - •Level premium
 - leading to
 - •a technical basis similar to life insurance
 - •a reserve for increasing age

Lifelong insurance guarantee

•No end of insurance

if a certain age is reachedif a certain sickness occursif high costs emerge

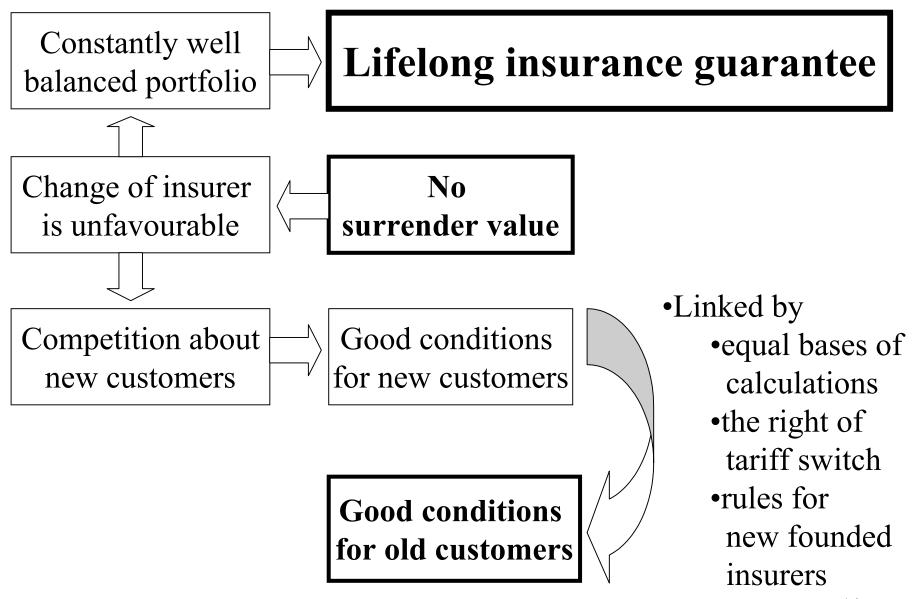
•No right of the insurer

- •to cancel the contract provided the premium is paid
- •to reduce the coverage



•Premium adjustments according to the general increase of health expenses

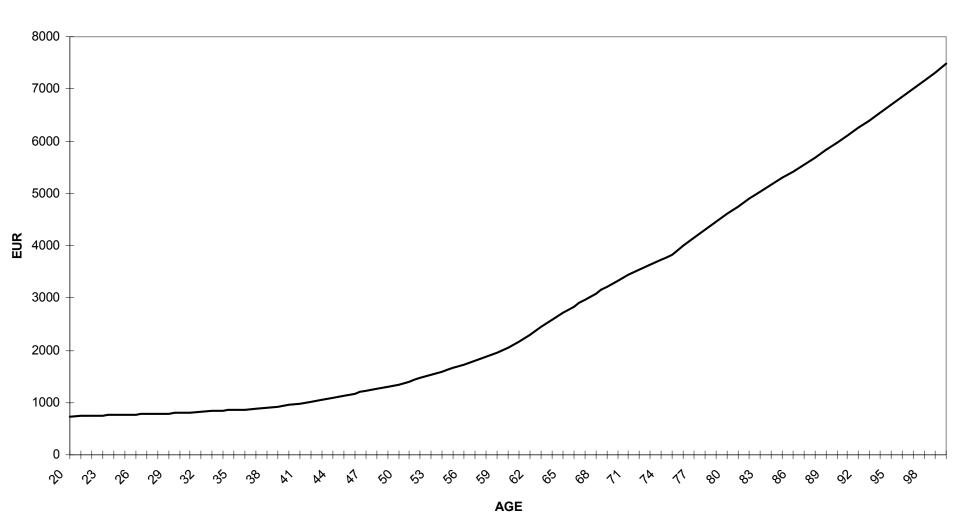
- Cautious calculation assumptionsConstantly
- well balanced portfolio



Bases of calculations

- •Expected yearly benefits
- •Mortality rates
- •Lapse rates
- •Interest rate
- •Initial expenses
- •Administration expenses
- Contingency margin

YEARLY EXPENSES FOR OUTPATIENT TREATMENT MALES



Calculation of new business premiums

$$\begin{split} P_x &= A_x / \ddot{a}_x \text{ net premium} \\ A_x &= \sum_{t=0}^{\omega - x} K_{x+t} * D_{x+t} / D_x \text{ present value of benefits} \\ K_{x+t} &= \text{expected yearly benefit at age } x+t \\ l_{x+1} &= l_x * (1 - q_x - s_x) \\ s_x &= \text{lapse rate at age } x \end{split}$$

Based on business in force
Cautious assumptions

at most 3.5 % interest
at least 5% contingency margin

The Claims reserve

"The insured event is the necessary medical treatment"

Assignment of dates

Claim payment



Premium of a year

Claims reserve



Date of treatment

Treatments of that year

Treatments in the accounting year leading to payments in the following year

The reserve for increasing age

 $_{m}V_{x} = A_{x+m} - P * \ddot{a}_{x+m}$

with the same bases as in the new businessused for

- •valuation
- •tariff switch
- •premium adjustment

Bases of valuation = bases of calculationNo consideration of the individual state of health

The general increase of health expenses

No consideration of the individual state of health

Premium rise on the basis of the reserve under rate q of inflation

$$^{new}P$$
 - $^{old}P = q * ^{old}P_{x+m}$

The premium rise is relatively higher than the rate of inflation

The premium discharge in old age

- •10% loading
- •use of profits
 - •at least 80% as dividends to policyholders
 - •90% of the interest profits for discharge in old age
- •fix administration expense loading per insured
- •switch hint
- •standard tariff

premium limit according to the statutory systempool of private health insurers

Miscellaneous

- •premiums for children
- •underwriting for new born children
- •underwriting for civil servants
- •non substitutive health insurance
- •long-term care insurance

introduction in 1995 for the whole substitutive portfolio
premium limit according to the statutory system
pool of private health insurers

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Lifelong insurance guarantee to a bearable price Competition in the health insurance market

Legal regulations

- referring to
- •the prices on the health care market
- •underwriting, tariff switch and termination
- •the calculation of premiums and reserves
- •the adjustment of premiums
- •the use of profits

Social market economy in health insurance