

HEALTH AND LONG-TERM CARE

HEALTH RESEARCH REPORTS AND SOFTWARE

Analysis of Individual Disability Income (IDI) Tables consists of two reports analyzing industry IDI claim incidence and termination experience trends relative to the 2013 IDI Valuation Table base incidence and termination rates.

Examining Predictive Modeling-Based Approaches in Health Care Fraud provides a systematic evaluation of the modeling methodologies and data samples used to characterize health care fraud.

Model of Long-Term Health Care Trends in Canada is a resource model that provides long-run forecasts of health care spending in Canada.

Provider Networks – Actuarial Perspective on Performance In and Out of Exchanges describes aspects of provider network performance in health care settings with particular focus on experiences with exchanges.

Actuarial Review of Insurer Insolvencies, Future Preventions looks at causes of insolvency and decisions made by management, regulators and policyholders over the life cycle of insolvency.

Insurance Risk and Its Impact on Provider Shared Risk Payment Models examines the risk associated with the unpredictable variation in utilization and cost of services.

Medicaid Managed Care Organizations: Considerations in Calculating Margin in Rate Setting describes the components of margin for calculating capitation rates in a Medicaid context along with a description of practical issues that may be encountered by MCOs.

Opioid Overdose Deaths in the United States is an article describing the demographics and geography of the increasing number of opioid deaths in the U.S.

Accuracy of Claims-Based Risk Scoring Models presents the results of a study comparing health risk scoring models, building on prior SOA studies.

Massachusetts Health Insurance Reform describes and analyzes healthcare reform in Massachusetts between 2006 and the passage of the ACA in 2010.

Risk Scoring in Health Insurance: A Primer provides a detailed explanation of the first stage of a risk adjustment program: the risk score model, also referred to as "risk scoring." Included in the report is a discussion of the history and considerations related to risk scoring beyond its application in the ACA context.

A Practical Approach to Assigning Credibility to Group Medical Insurance Pricing focuses on credibility when used in the underwriting and pricing of group medical insurance.

Provider Payment Arrangements, Provider Risks, and their Relationship with the Cost of Health Care provides a thorough educational resource that can be used by health actuaries and others to explain various types of provider payment and risk arrangements.

Indications of Pent-Up Demand examines the use of services that are likely to be deferred or avoided due to financial constraints as a result of lack of health insurance in the context of the ACA.

Evaluating Approaches for Adoption of Medical Technologies evaluates medical technologies from an actuarial perspective and includes a tool that allows actuaries to evaluate evidence related to the use of medical technologies provided through health plans.

Actuarial Model for Wellness explores the current wellness environment in a three phase project: a literature search, a survey of the actuarial and vendor community and interviews with researchers in the field.

Health Care Costs—From Birth to Death provides analysis and graphical representation of the changes in health care costs as individuals age.

Cost of the Newly Insured Under the Affordable Care Act examines the health care cost impact to the individual market as a result of the ACA.

Measurement of Health Care Quality and Efficiency: Resources for Health Care Professionals is a comprehensive review of programs and published sources related to this topic. It includes updated materials to reflect PPACA and other environment changes.

Economic Measures of Medical Errors estimates the direct and indirect costs of medical errors to the system itself and the overall U.S. economy.

Modeling Long-Term Health Care Cost Trends projects per-person health care cost expenditures and growth rates through 2099.

Statistical Methods for Health Actuaries – IBNR Estimates: An Introduction is the first in a series of guides on the use of statistical techniques that are geared toward the work of a practicing health actuary.

Evaluating the Results of Care Management Interventions: Comparative Analysis of Different Outcomes Measures Claims is a series of papers assessing the methodologies and application of care management interventions.

LONG-TERM CARE RESEARCH REPORTS AND SOFTWARE

Long-Term Care and the Middle Market: Sizing the Opportunity for New Ways to Finance Long-Term Care explores two longterm care insurance product concepts that were developed as part of an effort to create innovative new LTC insurance products.

Understanding the Volatility of Experience and Pricing Assumptions in Long-Term Care Insurance aims at advancing knowledge in LTC pricing.

Land This Plane: A Delphi Research Study of Long-Term Care Financing Solutions explores the opinions of various LTC experts and stakeholders on a wide range of financing issues and potential solutions.

Quantification of the Natural Hedge Characteristics of Combination Life or Annuity Products Linked to Long-Term Care Insurance examines the factors that reduce risks for insurers issuing these products. Long-Term Care Morbidity Improvement Study examines trends in HIPAA ADL disability and cognitive impairment between 1984 and 2004 using the National Long-Term Care Survey.

Managing the Impact of Long-Term Care Needs and Expense on Retirement Security Monograph expands thinking on how LTC events impact retirement security and approaches to mitigating the impact of these events.

The Society of Actuaries continually publishes new Health and Long-Term Care research reports and software. All material is available at *SOA.org/Research*.