

OVERVIEW OF THE UNINSURED SAN DIEGO COUNTY 2003

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COUNTY PROFILE¹

Population²

The 2000 population in San Diego County was approximately 2.9 million. The population increased by approximately 13% between 1990 and 2000.

Geography

San Diego County covers 4,261 square miles, and borders Orange, Riverside and Imperial Counties to the north and east, and Baja California to the south. The city of San Diego is the southern-most major metropolitan area in California.

Economy³

Agriculture, the U.S. Department of Defense, technology and manufacturing are each significant contributors to San Diego County's economy. San Diego ranks as the 10th largest agriculture producer in the nation and has the second largest number of farms. In 1997, San Diego received more than \$9 billion in expenditures from the U.S. Department of Defense. The County is also home to several Marine and Naval bases.

The service industry, dominated largely by business and health, accounts for 33% of the County's labor force. Retail trade, government and manufacturing are other significant employers accounting for 18%, 17% and 11%, respectively, of employment. The County's 2001 unemployment rate was 3.2%, significantly lower than the state 2001 rate of 5.3%.

DEMOGRAPHICS

Health Coverage Status:

- 15% are uninsured⁴
- 12% are covered by Medi-Cal⁵
- 2.3% are covered by Healthy Families^{6 7}
- 2.1% use County health programs⁸

¹ Numbers in this report without decimal points have been rounded to the nearest whole number.

² US Census Bureau. *Census 2000*, www.census.gov

³ State of California, *County Snapshots*, 2002, www.calmis.ca.gov/htmlfile/subject/cosnaps.htm

⁴ **Percentage taken of non-elderly population.** E.R. Brown, N. Ponce, T.Rice, S.A. Lavarreda. *The State of Health Insurance in California: Findings from the 2001 California Health Interview Survey (CHIS)*. UCLA Center of Health Policy Research, June 2002, www.healthpolicy.ucla.edu

⁵ Percentage taken of total population. Medi-Cal Policy Institute. *California County Data*, Jan. 2003, www.medi-cal.org

⁶ Percentage taken of non-elderly population. Managed Risk Medical Insurance Board. *Healthy Families Program Subscribers Enrolled By County*, June 2003, www.mrmib.ca.gov

⁷ In comparison, CHIS data reported 12.6% Medi-Cal/Healthy Families non-elderly enrollment.

⁸ Percentage taken of non-elderly population. Medically Indigent Care Reporting System (MICRS). *County Indigent Patient Counts and Utilization, FY 2000-01*.

Ethnicity:⁹

The population of San Diego County consists of:

- Non-Hispanic White – 55%
- Hispanic – 27%
- African-American – 6%
- Asian & Pacific Islander – 9%
- American Indian – 1%
- Other – 17.5%¹⁰

Income Breakdown:¹¹

In 2000, 30% of San Diego County residents had incomes below 200% of the Federal Poverty Level (FPL):

- 12% below 100% FPL
- 18% between 100 and 200% FPL

COMMUNITY CLINICS¹²

Community clinic information was reviewed for the 2002 calendar year. In that year, community clinics in San Diego County served approximately 450,000 unduplicated patients and provided 1.2 million visits. Total revenues and spending were \$144.3 million and \$130.8 million, respectively.

Uninsured patients accounted for the largest percentage of clinic visits (46%), though Medi-Cal provided the greatest share of patient revenue (46%). Uninsured patients accounted for 42% of patient revenue. Among the uninsured, Family PACT accounted for the greatest shares of visits (32%) and patient revenue (37%).

- San Diego community clinics provided 1.5 uninsured visits per uninsured county resident.

⁹ US Census Bureau. *Census 2000*, www.census.gov

¹⁰ "Other" is defined as person reporting race other than the above or multiple races. The total percentage can exceed 100% due to duplicate reporting.

¹¹ California Department of Finance, August 2002.

¹² Office of Statewide Health Planning and Development. *Annual Utilization Report of Primary Care Clinics*, 2002 www.oshpd.states.ca.gov. Dental clinics are not included.

Clinic Utilization and Patient Revenues

Insurance Status	Visits	Patient Revenues
Total	1.2M	\$100.3M
Uninsured	46%	42%
Medi-Cal	36%	46%
Healthy Families	4%	3%
Medicare	4%	4%
Private Insurance	4%	4%
Other Payer	6%	2%

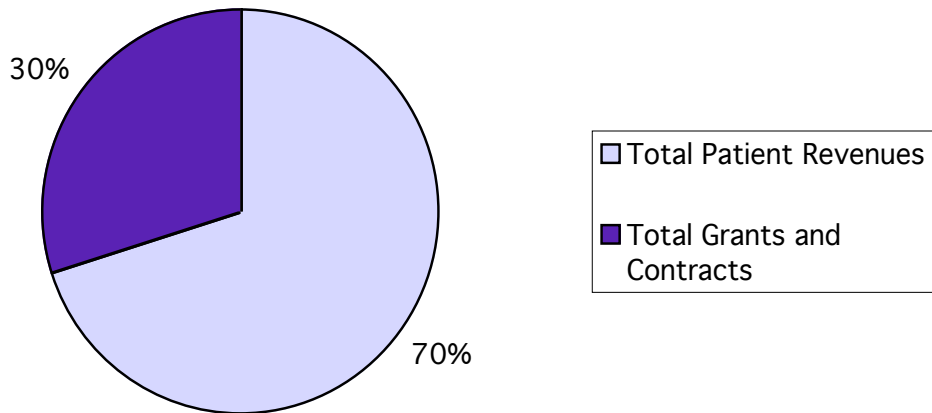
Uninsured Clinic Utilization and Patient Revenues

Payer	Visits	Patient Revenues
Total Uninsured	548,000	\$42.1M
County Programs	14%	19%
EAPC	13%	12%
CHDP	10%	9%
Breast Cancer Programs	2%	1%
Family PACT	32%	37%
Self-Pay	25%	22%
Non-Pay	3%	0%

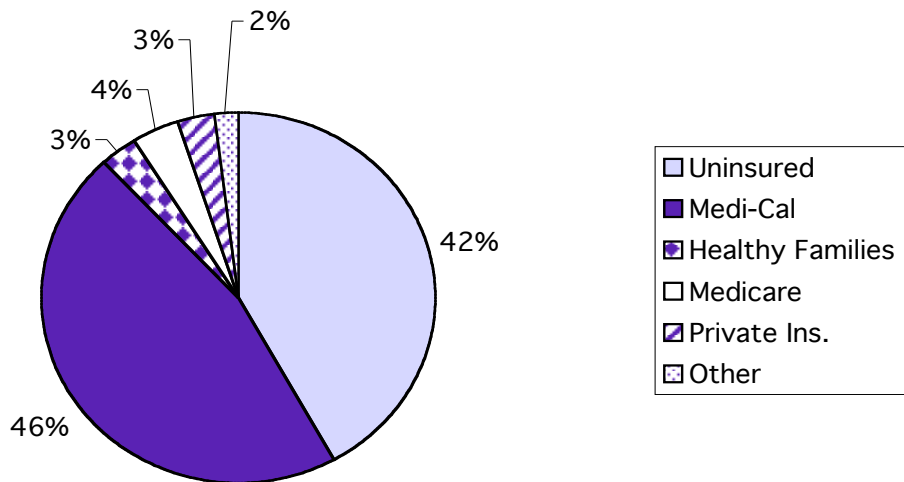
Clinic Revenue from Contracts and Grants

Federal Contracts and Grants	10% (\$14.9M)
State Contracts and Grants	4% (\$6.1M)
County & Local Contracts and Grants	6% (\$8.5M)
Other Contracts and Grants	2% (\$3.0M)
Private Grants	5% (\$7.4M)
Donations	3% (\$4.2M)

Total Community Clinic Revenue



Total Revenue by Payer



Delivery System

There are 70¹³ community clinic sites in San Diego County, including 13 Planned Parenthood centers and one Indian Health Services clinic.

- Logan Heights Family Center and San Ysidro Health Center accounted for the largest share of net patient revenue; 10% each.
- Scripps Otay Family Health Center and North County Health Services – San Marcos had the most uninsured patients, each accounting for 11%.
- North County Health Services – San Marcos and Logan Heights Family Center saw the most Medi-Cal patients, each accounting for 8%.
- North County Health Services – San Marcos saw the most Healthy Families patients (16%), followed by Logan Heights Family Center (10%).
- San Ysidro Health Center saw the most Medicare patients (18%), followed by Escondido Community Health Center (9%).
- Planned Parenthood – Mission Valley Clinic saw the most privately insured patients (23%), followed by Planned Parenthood – Encinitas Center (8%).

HOSPITALS¹⁴

Hospital information was reviewed for fiscal year 2002. Hospitals in San Diego County provided approximately 1.4 million inpatient days, 3.1 million outpatient visits and 510,100 emergency room visits, at a cost of approximately \$2.5 billion.

The county indigent accounted for 2% of each hospital service, while Medi-Cal patients accounted for significantly higher portions of each service category, 15-26%. Medi-Cal patients also averaged the longest hospital stay of all payer categories, 7.9 days.

Insurance Status	Inpatient Days	Average Length of Stay	Outpatient Visits (Including ER)	ER Visits¹⁵
Total	1.4M	5.8	3.1M	510,100
County Indigent	2%	5.6	2%	2%
Medi-Cal	26%	7.9	15%	26%
Medicare	41%	6.4	36%	30%
Private Insurance	24%	3.9	39%	37%
Other Indigent	.5%	4.1	1%	1%
Other Payer	7%	7.3	7%	5%

¹³ Dental community clinics are not included in this summary.

¹⁴ Office of Statewide Health Planning and Development. *Selected Hospital Annual Financial Data, FY 2001-02* www.oshpd.ca.gov

¹⁵ER data reporting cycle may differ from other OSHPD hospital data categories.

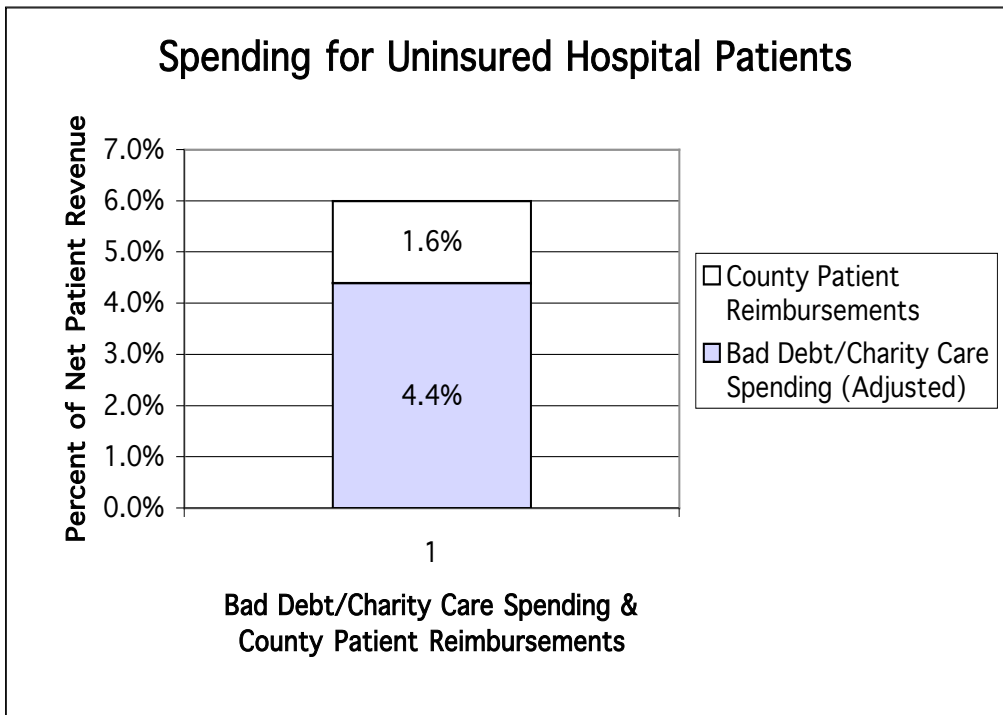
Delivery System

There are 29 hospitals in San Diego County, 23 of which are comparable and included in this summary.¹⁶

- UCSD Medical Center accounted for the largest share of net patient revenue (19%), followed by Sharp Memorial Hospital (9%).
- UCSD Medical Center provided the greatest proportion of bed days to county indigent patients (36%), followed by Scripps Mercy Hospital (16%).
- Children’s Hospital – San Diego provided the most bed days for Medi-Cal patients (13%), followed by UCSD Medical Center (12%).
- Sharp Memorial Hospital provided the most bed days for Medicare patients (11%), followed by Grossmont Hospital (10%).
- Sharp Memorial Hospital provided the most bed days for privately insured patients (13%), followed by UCSD Medical Center (11%).

Care to the County Indigent

Hospitals in San Diego County reported an aggregate loss of approximately \$108.8 million in bad debt and charity care (4.4% of net patient revenues). Reported reimbursements for county indigent patients totaled \$38.6 million (1.6% of net patient revenues).



¹⁶ Comparable hospitals are acute care hospitals and do not include psychiatric facilities, long-term care hospitals or prepaid health plan hospitals such as Kaiser Permanente hospitals.

Both OSHPD and MICRS/CMSP report utilization and financial data for care for the county indigent. Hospitals report the services and expenses reimbursed by the county to OSHPD. The county reports the services and payments to providers to MICRS/CMSP.¹⁷

	OSHPD Data	County Health Data¹⁸
# Inpatient days per 1000 uninsured	74	51
# Outpatient visits per 1000 uninsured	134	357
# ER visits per 1000 uninsured	29	100
Hospital Revenue from County¹⁹	\$38.6M	
County spending		\$52.7M
Gross DSH	\$87.1M	\$100.5M ²⁰

MISP Data²¹

County Spending for the Uninsured

	Number of Days or Visits	Expenditures in Dollars	Expenditure as Percentage of Total	Cost per Unit of Service
Inpatient Days	19,100	\$21.5M	41%	\$1,126
Outpatient Visits	134,800	\$24.4M	46%	\$181
ER Visits	37,600	\$5.8M	11%	\$154
Total²²		\$52.7M	98%	

Net Public Health Spending:²³ \$80.8M

¹⁷ Theoretically, these reports should be identical for hospital inpatient days and emergency room visits. However, there is often considerable variation between these sources' figures. County health data on outpatient visits include hospital outpatient visits and county & community clinic and private physician visits, whereas OSHPD outpatient data accounts for hospital outpatient visits only.

¹⁸ Medically Indigent Care Reporting System (MICRS). *County Indigent Patient Counts and Utilization FY 2000-01*.

¹⁹ This figure may include private donations for indigent care.

²⁰ Office of County Health Services. *SB 855 – Actual Payments and Transfers County and Non County Hospitals FY 2001-02*, April 2003.

²¹ Medically Indigent Care Reporting Systems (MICRS). *County Health Care Program Expenditures for FY 2000-01*.

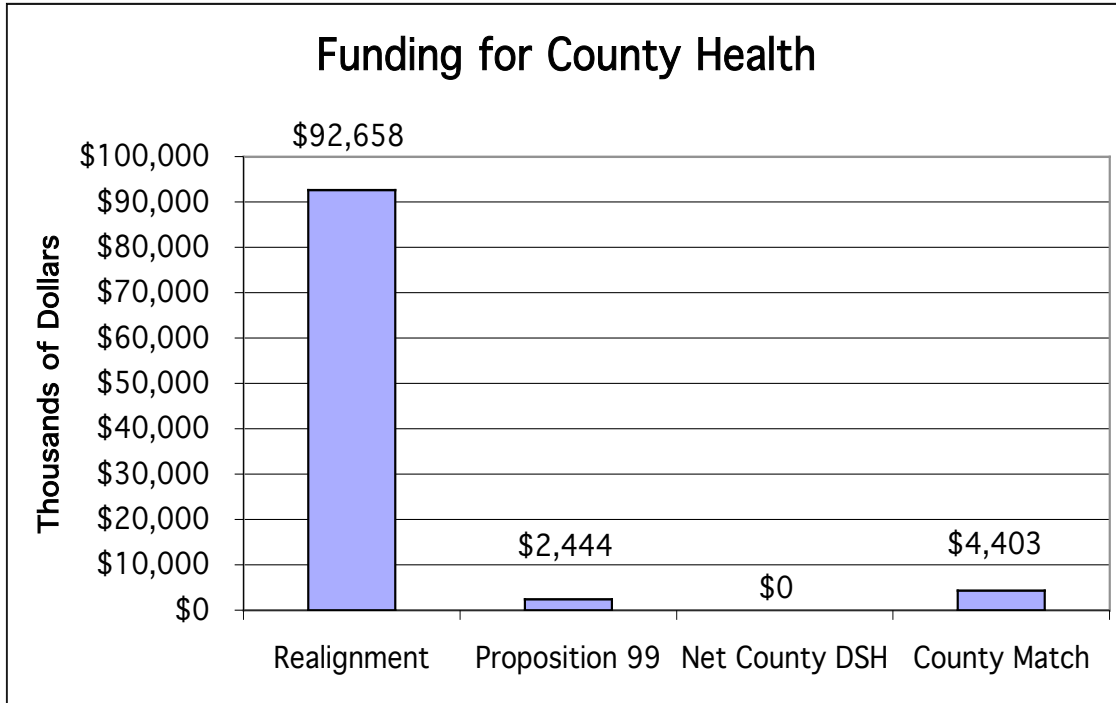
²² Total includes "other services" which are comparatively negligible and not included in this table.

²³ Office of County Health Services. *County Health Services Budget/Actual Data, FY 2001-02*

FUNDING FOR COUNTY HEALTH^{24 25}

Total: \$99.5 million

Spending for the Uninsured: 53%²⁶



Funding Per Capita²⁷

	Realignment	Proposition 99	Net County DSH	County Match
Per County Resident	\$37	\$1	\$0	\$2
Per Uninsured County Resident	\$246	\$7	\$0	\$12

DSH Distribution²⁸

Total Net DSH	Net DSH for County Hospitals	Net DSH for Non-County Hospitals
\$57.3M	\$0	\$57.3M

²⁴ Office of County Health Services. *Final Maintenance of Effort Calculation, Fiscal Year 2001-02; Rural Health Services Program Allocations, FY 2002-03; California Healthcare for Indigents Program Allocations, FY 2002-03.*

²⁵ Net County DSH Source: Office of County Health Services, April 2003.

²⁶ Based on MISP spending data, \$52.7 million (p.7).

²⁷ Non-elderly population

²⁸ Office of County Health Services, April 2003.

HEALTH COVERAGE AND HEALTH SERVICES UTILIZATION BY ETHNICITY

Ethnicity	Percent of Uninsured²⁹	Percent of Medi-Cal Enrollment³⁰	Percent of Healthy Families Enrollment³¹	Percent of County Indigent Patients³²
Non-Hispanic White	30%	36%	15%	27%
Hispanic	50%	40%	63%	43%
African-American	NA*	15%	3%	7%
Asian & Pacific Islander	17%	5%	8%	5%
American Indian	NA*	NA	.3%	.3%
Other³³	NA*	NA	11%	18%

Ethnicity of Community Clinics Patients

Ethnicity	Percent of Community Clinic Patients³⁴
White	61%
African-American	5%
Asian & Pacific Islander	4%
American Indian	1%
Other	29%

Ethnicity	Percent of Community Clinic Patients
Hispanic	58%
Non-Hispanic	36%
Unknown	6%

²⁹ Age 0-64. California Health Interview Survey, 2001.

³⁰ Medi-Cal Policy Institute. *Medi-Cal County Data Book*, Jan. 2003.

³¹ Managed Risk Medical Insurance Board, June 2003, www.mrmib.ca.gov

³² Medically Indigent Care Reporting System (MICRS). *Unduplicated Count of County Indigent Patients By Race and Ethnicity, FY 2000-2001*.

*Insufficient sample size does not allow for statistically significant results.

³³"Other" is defined differently in each data source, such as "unreported," "multiple ethnicities" or "other than listed options." See respective sources for further information.

³⁴Office of Statewide Health Planning and Development, 2002, www.oshpd.states.ca.gov

PUBLIC MANAGED CARE

Medi-Cal Managed Care³⁵

- Geographic Managed Care Total Enrollment: 175,882
- Community Health Plan: Community Health Group: (38%)
- 2nd Largest Plan: Sharp Health Plan (28%)

Healthy Families Managed Care³⁶

- Total Enrollment: 57,386
- Community Provider Plan: Community Health Group (34%)
- Largest Plan: Sharp Health Plan (35%)

JOB-BASED INSURANCE³⁷

	San Diego County	California
Non-Elderly Adults	67%	65%
Children	62%	59%

HEALTH PLANS FOR SMALL EMPLOYERS

PacAdvantage – Purchasing Pool³⁸

PacAdvantage contracts with Blue Shield, Health Net, Kaiser Permanente, Sharp Health Plan and Universal Care in San Diego County. Each of these carriers offers three HMO plans through PacAdvantage. Health Net also offers three PPOs. Benefits for the standard PacAdvantage HMO and two Health Net PPOs are listed below.

³⁵ Medi-Cal Policy Institute. *California County Data*, Jan. 2003, www.medi-cal.org.

³⁶ Managed Risk Medical Insurance Board. *Healthy Families Program Subscribers Enrolled in Community Provider Plan by County*, June. 2003, www.mrmib.ca.gov

³⁷ Brown et al, 2002.

³⁸ PacAdvantage. *2003 Rate Information*, July 2003, www.pacadvantage.org. These figures represent group sizes of 15+ eligible employees. The cost for a group size of 2-5 employees is approximately 10% more than the cost listed above.

PacAdvantage Standard HMO and PPO Benefits

Health Plan	Patient Out-of-Pocket						
	Deductible	Office Visits	Inpatient Admission	Outpatient Services	ER Visits	Brand-Name Drugs	Generic Drugs
Standard HMO	\$0	\$30 co-pay	\$1,000	\$300 surgery	\$100	\$30 co-pay	\$15 co-pay
Health Net PPO Saver	\$500 per individual/ 2 per family	\$20 co-pay, limited visits	20% after deduct.	20% after deduct. for surgery	20% after \$100 deduct.	20% co-pay	20% co-pay
Health Net PPO 30	\$1000 per individual/ 2 per family	\$30 co-pay	20% after \$250 deduct.	20% after deduct. for surgery	20% after \$100 deduct.	\$30 co-pay	\$20 co-pay

PacAdvantage Monthly Premiums for Standard HMOs and PPOs

Premiums vary by the type of plan and employee's age and family size.

Health Plan	35 yrs, Single	50 yrs, Single	35 yrs, with Spouse and Dependent Children	50 yrs, with Spouse and Dependent Children	Percent Change 2002-2003
Blue Shield HMO	\$234	\$347	\$876	\$1,112	+42%
Health Net HMO	\$191	\$320	\$703	\$837	+5%
Kaiser HMO	\$194	\$290	\$680	\$743	Range: +(26-36)% ³⁹
Sharp Health Plan	\$194	\$274	\$635	\$806	Range: +(25-29)% ⁴⁰
Universal Health Plan	\$175	\$284	\$614	\$732	Range: +(12-18)% ⁴¹
Health Net PPO Saver	\$133	\$227	\$451	\$560	+24%
Health Net PPO 30	\$210	\$360	\$715	\$887	+28%

³⁹ The largest increases in Kaiser standard HMO premiums were in plans for 35 year-old adults, both with and without a family.

⁴⁰ The largest increases in Sharp standard HMO premiums were in plans for 35 year-old adults, both with and without a family.

⁴¹ The largest increases in Universal Care standard HMO premiums rose 18% for single adults and 12% for families.

Other Health Insurance for Small Employers⁴²

Aetna, Blue Cross, Blue Shield, Health Net, Kaiser Permanente, PacifiCare and Sharp Health Plan* offer coverage plans for small employers who do not participate in PacAdvantage in San Diego County. Standard HMO options and PPOs with comparable benefits and low deductibles are listed below.

Benefits Offered by Standard HMOs and PPOs under Other Small Employer Plans

Health Plan	Patient Out-of-Pocket						
	Deductible	Office Visits	Inpatient Admission	Outpatient Services	ER Visits	Brand-Name Drugs	Generic Drugs
Aetna HMO 2	\$0	\$15	\$350	\$150 for surgery	\$100	\$25 after \$150 deduct.	\$10
Blue Cross HMO 100%	\$0	\$10	No charge	No charge	NA□	\$20 after \$150 deduct	\$10
Blue Shield Access + HMO 15	\$0	\$15	No charge	\$300 for surgery, \$0 other visits	\$100	\$25 after \$250 deduct.	\$15
Health Net HMO 15	\$0	\$15	No charge	No charge	\$75	\$25	\$15
Kaiser Permanente HMO 15-S	\$0	\$15	\$100 per day, max \$500 per admission	\$50 surgery	\$100	\$25	\$10
PacifiCare HMO 15-30	\$0	\$15	\$250	\$250 for surgery, \$0-\$125 other visits	\$50	\$25	\$10
Aetna PPO 3	\$1000 per member/ 2 per family	\$30	30%	30% after deduct.	\$100 + 30%	\$25 after \$150 deduct	\$15
Blue Cross Saver PPO	\$500 per member/2 per family	\$20, 2 adult/4 child visit limit	20% after deduct.	20% after deduct.	NA*	\$25 after	\$10
Blue Shield PPO 1000	\$1000 per member/ 2 per family	\$45	20% after deduct.	NA*	\$75 + 20%	\$25 after \$250 deduct.	\$10
Health Net PPO First Advantage	\$750 per member	20%	20% after \$250 deduct.	20% after \$250 deduct.	\$100	\$30	\$15
PacifiCare PPO 35/70	\$1000 per member/ 2 per family	\$35	30% after deduct.	30% after deduct.	\$100	\$35	\$10

⁴² Aetna. *Small Business Solutions*, April 2003; Blue Cross of California. *Small Group Sales and Enrollment Guide*, April 2003; Blue Cross of California. *Monthly Rates for Small Group Medical, Dental and Basic Term Life Plans*, March 2003; Blue Shield of California. *Group Health Plans - Summary of Benefits and Provisions*, April 2002; Blue Shield of California. *Group Health Plans - Monthly Rates*, May 2003; Health Net. *Plans and Rates - Small Business Group Plans*, July 2003; Health Net. *Plans and Rates-Small Business Group Rates*, July 2003; Kaiser Permanente. *Traditional Plan for Small Business - Southern California*, Jan. 2003; Kaiser Permanente. *Traditional Plan for Small Business Rates- Southern California*, Jan. 2003; PacifiCare. *Small Business Summary Matrix*, October 2003; PacifiCare. *Small Business Rate Guide*, August 2003.

□ Information is not currently available.

Monthly Premiums of Standard HMOs and PPOs for Other Small Employer Plans

Premiums vary by the type of plan and employee's age and family size. Rate information is not available for Aetna plans.

Health Plan	35 yrs, Single	50 yrs, Single	35 yrs, with Spouse and Dependent Children	50 yrs, with Spouse and Dependent Children	Percent Change 2002-2003
Blue Cross HMO 100%	\$234	\$324	\$703	\$848	+20%
Blue Shield Access + HMO 15	\$169	\$250	\$632	\$802	+18%
Health Net HMO 15	\$171	\$286	\$628	\$748	+16%
Kaiser Permanente HMO 15-S	\$186	\$278	\$651	\$712	Range: +(13-23)% ⁴³
PacifiCare HMO 15-30	\$194	\$291	\$669	\$818	NA
 					
Blue Cross Saver PPO	\$129	\$243	\$415	\$543	+23%
Blue Shield PPO 1000	\$166	\$326	\$579	\$838	+15%
Health Net PPO First Advantage	\$186	\$324	\$575	\$727	NA
PacifiCare PPO 35/70	\$107	\$190	\$333	\$433	NA

⁴³ The largest percentage increases in Kaiser HMO rates were in plans for 35 year-olds with and without families.

INDIVIDUAL HEALTH PLANS⁴⁴

Blue Cross, Blue Shield, Health Net, Kaiser Permanente and PacifiCare offer health plans for individuals and families in San Diego County. Standard HMO options and PPOs with comparable benefits and low deductibles are listed below.

Benefits Offered by Standard HMOs and PPOs of Individual Health Plans

Health Plan	Patient Out-of-Pocket						
	Deductible	Office Visits	Inpatient Admission	Outpatient Services	ER Visits	Brand-Name Drugs	Generic Drugs
Blue Cross Individual HMO	\$0	\$10	No charge	20%	\$50 + 20%	\$30 after \$250 deduct.	\$10
Blue Shield Access + HMO	\$1500 per member/ \$3000 per family	\$10	No charge	\$150 for surgery, \$25-\$35 other visits	\$50	\$30	\$10
Health Net HMO 15	\$0	\$15	\$1,000 deduct.	\$250 for surgery, \$0 other visits	\$75	\$25 after \$100 deduct.	\$15 after \$100 deduct.
Kaiser Permanente Personal Advantage	\$0	\$20	\$200	\$100 for surgery, \$0-\$20 other visits	\$100	\$35	\$10
PacifiCare HMO 10	\$0	\$10	\$250	\$250 for surgery, \$10-\$30 other visits	\$100	\$35	\$20
Blue Cross PPO Share 1000	\$1000 per member/ \$2000 per family	30%	30% after deduct.	30% after deduct.	\$30 + 30%	\$30 after \$250 deduct.	\$10
Blue Shield PPO 750	\$750 per member/ \$1500 per family	\$35	30% after deduct.	30% after deduct.	30% after deduct.	\$30 after \$250 deduct.	\$10
Health Net PPO Value 25	\$1000 per member/ \$2000 per family	\$25	\$250 admission + 25% after deduct	\$250 + 25% after deduct	\$75 + 20%	\$35 after \$100 deduct.	\$10 after \$100 deduct.
PacifiCare PPO 30/70	\$1000 per member/ \$2000 per family	\$30	30% after deduct.	30% after deduct.	\$100	\$35 after \$100 deduct.	\$10

⁴⁴ Blue Cross of California. *Individual and Family Health Programs*, February 2003; Blue Cross of California. *Monthly Rates for Individual and Family Medical and Life Plans*, April 2003; Blue Shield of California. *Health Plans for Individuals and Families-Summary of Benefits and Provisions*, July 2003; Blue Shield of California. *Monthly Rates for Individuals and Families*, July 2003; Health Net. *Individual and Family Coverage - Summary of Benefits and Provisions of Coverage*, July 2003; Health Net. *Monthly Rate Guide - Individual and Family Plans*, August 2003; Kaiser Permanente. *Personal Advantage 2003*, Jan. 2003; PacifiCare. *Benefits Summary – Individual HMO Plans*, July 2003; PacifiCare. *Monthly Premiums for Individual Plans*, July 2003.

Monthly Premiums of Standard HMOs and PPOs for Individual Health Plans

Premiums vary by the type of plan and individual's age and family size.

Health Plan	35 yrs, Single	50 yrs, Single	35 yrs, with Spouse and Dependent Children	50 yrs, with Spouse and Dependent Children	Percent Change 2002-2003
Blue Cross Individual HMO	\$327	\$377	\$933	\$1,028	Range: (-3)%-(+25)% ⁴⁵
Blue Shield Access + HMO	\$226	\$293	\$673	\$744	+14%
Health Net HMO 15	\$310	\$384	\$877	\$1,032	+20%
Kaiser Permanente Personal Advantage	\$186	\$266	\$552	\$660	Range: +(10-16)% ⁴⁶
PacifiCare HMO 10	\$206	\$363	\$617	\$914	20%
Blue Cross PPO Share 1000	\$185	\$318	\$488	\$741	Range: (-3)%-(+20)% ⁴⁷
Blue Shield PPO 750	\$161	\$321	\$485	\$753	+15%
Health Net PPO Value 25	\$314	\$384	\$893	\$1,038	NA
PacifiCare PPO 30/70	\$147	\$279	\$411	\$697	NA

⁴⁵ Blue Cross Individual HMO plan premiums for 50 year-old single adults decreased by 3%. The greatest increases were in premiums for 35 year-old and 50 year-old adults with families.

⁴⁶ Kaiser plan premiums for 35 year-old single adults and those with families increased more than plans for 50 year-olds.

⁴⁷ Blue Cross PPO Share 1000 plan premiums for 50 year-old single adults decreased by 3%. The greatest increases were in premiums for 35 year-old adults, with and without families.