

## The Standard to Acquire Allstate Employer Voluntary Benefits Business; Companies Announce Distribution Partnership - \$2 Billion

StanCorp Financial Group, Inc., (The Standard) and The Allstate Corporation announced August 13, 2024 a definitive agreement under which The Standard will acquire Allstate's Employer Voluntary Benefits business for approximately \$2 billion and enter into a product distribution partnership. The transaction is expected to close in the first half of 2025, subject to regulatory approvals and other customary closing conditions.

The Standard and Allstate are leading workplace benefits providers with deep expertise in benefits administration and a shared commitment to customer service. The Standard, a top group life, disability and ancillary benefit provider, was founded in 1906 and sold its first employee benefits policy in 1951, a case that remains in force today. Allstate's Employer Voluntary Benefits business is an industry leader in supplemental and voluntary workplace benefits including Whole Life, Universal Life, Accident, Hospital Indemnity, Cancer and Critical Illness coverage.

"Allstate's Employer Voluntary Benefits business is an excellent fit for The Standard's growing workplace benefits business. We see significant synergies between Allstate's industry-leading supplemental and voluntary life products and our group benefits business," said Dan McMillan, President and CEO of The Standard. "We look forward to welcoming the Allstate EVB employees to The Standard and to a mutually beneficial distribution partnership with Allstate as we move forward.

[Read More Here...](#)

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# The Future Of Medicare Advantage

The Medicare Advantage program is undergoing its biggest shifts in more than two decades. Payers can take steps now to mount a strategic, agile response as the changes unfold.

As Medicare Advantage (MA) payers continue to be buffeted by regulatory and market changes that could dampen margins, payer leaders should not lose sight of the importance of investing now to stabilize their businesses for the long run. A critical area of focus for leaders should be the Medicare Advantage Star Ratings program. While 4+ star performance is becoming table stakes, plans that emphasize achieving better Star-program performance tend to have an advantage.

The Centers for Medicare & Medicaid Services (CMS) introduced Star Ratings in 2007 to improve the quality of care for members, with the expectation that the ratings would evolve over time. To date, CMS continues to refine the program to encourage plans toward targeted new priorities. But MA payers often get caught up in the complexity and number of changes that have been made to the Star Ratings program through the years. Some have debated the program's value,<sup>1</sup> deeming the rating system challenging to implement well given the frequency of the changes, and questioning the effectiveness of the Star measures to improve clinical outcomes. [Read More Here...](#)



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# Trump, Harris Tread In ACA Ambiguity

Is the Affordable Care Act a central issue in the 2024 presidential election or not?

With fewer than 90 days until the election, the answer remains unclear as Democratic and Republican campaigns operate with ambiguity when it comes to healthcare plans, and particularly in the use of actions “repeal” and “replace.”

The Republican Party's official platform, presented at its convention in Milwaukee in July, includes no mention of the ACA and limited references to other healthcare reforms. Former President Donald Trump campaign's policy plan, Agenda 47, contains sparse healthcare policy proposals that are included in a chapter aimed at addressing affordability.

The Democratic National Convention began Aug. 19. Leading up to it, Vice President Kamala Harris has criticized the Republican stance on the ACA, portraying the Republican candidate as a threat to the law. At her Aug. 6 rally in Philadelphia to announce her pick for vice president, Ms. Harris said Mr. Trump would “end the Affordable Care Act and take us back to a time when insurance companies had the power to deny people with pre-existing conditions” if given the chance. [Read More Here...](#)



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**Bringing proactive, preventive health care to older adults.**  
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# Why Will Healthcare Be The Industry That Benefits The Most From AI?

The healthcare industry has been a severe laggard in the adoption of tech (software in particular): it has consistently spent less than half on IT/software spend as a percentage of revenue versus peer industries, and workflows are primarily dominated by manual processes and legacy tools like faxes and phone calls. You don't see anything close to the equivalent of the likes of Salesforce, Slack, JIRA, Notion dominating the app layer in the way workers do their jobs, as you do in other industries.

Whereas we historically have viewed the low adoption of software as a liability, we now view that as an asset—we don't face the same sunk cost bias that might be slowing other industries down from taking full advantage of the latest AI innovations. Other industries have spent hundreds of billions on enterprise software apps and are now faced with the decision of whether to rip those last-gen tools out and effectively spend additional billions on the modern AI tools that are now emerging.

In healthcare, the question is simply—should I throw more bodies and fax machines at the problem, or should I jump to adopt AI without the baggage of last-generation workflow apps getting in my way?  
Read More Here...



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## US Uninsured Rate Rises To 8.2%

The number of people in the US without health insurance has been steadily rising since the official end of the Covid-19 public health emergency was declared in May 2023.

The uninsured rate rose to 8.2% (or roughly 27 million people) in Q1 2024 after falling to a record low of 7.2% in Q2 2023, CDC data shows. That low was largely thanks to the Medicaid continuous enrollment policy that allowed all beneficiaries to keep their coverage until May 2023, according to Daniel Polsky, a health economist and professor at Johns Hopkins Carey Business School.

Without the continuous enrollment policy, roughly 25 million people have lost Medicaid coverage, according to data from health policy research firm KFF.  
Read More Here...

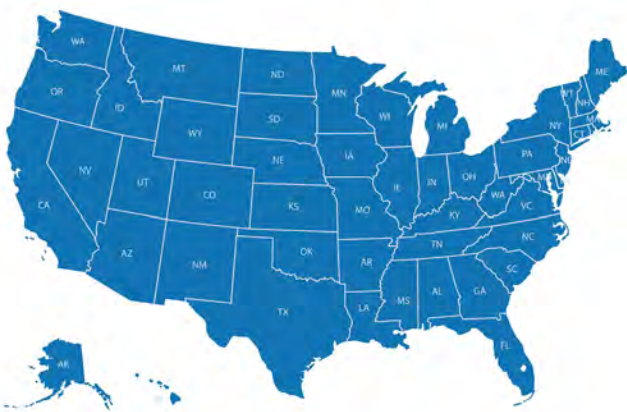
# States Ranked By Total Residents With Employer-Sponsored Health Coverage

Eight states have at least five million residents that receive health coverage from their employer, according to AHIP's 2024 "Coverage at Work" report published in July.

States ranked by total residents with employer-sponsored health coverage:

California: 17.95 million  
Texas: 13.85 million  
New York: 9.05 million  
Florida: 8.74 million  
Illinois: 6.53 million  
Pennsylvania: 6.39 million  
Ohio: 5.89 million  
Georgia: 5.12 million  
New Jersey: 4.96 million  
Michigan: 4.94 million  
North Carolina: 4.81 million  
Virginia: 4.42 million  
Washington: 3.99 million  
Massachusetts: 3.67 million  
Indiana: 3.46 million  
Tennessee: 3.31 million  
Arizona: 3.27 million  
Maryland: 3.24 million  
Minnesota: 3.13 million  
Wisconsin: 3.13 million  
Missouri: 3.10 million  
Colorado: 3 million

South Carolina: 2.30 million  
Alabama: 2.27 million  
Kentucky: 2 million  
Oregon: 1.99 million  
Utah: 1.99 million  
Connecticut: 1.84 million  
Louisiana: 1.81 million  
Oklahoma: 1.68 million  
Iowa: 1.66 million  
Kansas: 1.52 million  
Nevada: 1.46 million  
Arkansas: 1.21 million  
Mississippi: 1.2 million  
Nebraska: 1.03 million  
Idaho: 896,000  
New Hampshire: 759,000  
New Mexico: 742,000  
West Virginia: 741,000  
Hawaii: 679,000  
Maine: 633,000  
Rhode Island: 538,000  
Delaware: 498,000  
Montana: 475,000  
Washington, D.C: 368,000  
South Dakota: 452,000  
North Dakota: 421,000  
Alaska: 325,000  
Vermont: 300,000  
Wyoming: 284,000  
[Read List Here...](#)



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# Would Presidential Hopeful Harris Replace FTC Chair Khan? The Implications For PBM Reform

Wealthy Democratic donors, seemingly reinvigorated by the new-look presidential race, are publicly expressing contempt for Federal Trade Commission (FTC) Chair Lina Khan, one of the nation's key antitrust watchdogs.

The goal, it appears, is to flex financial power and persuade Vice President Kamala Harris to remove Khan from her post if elected to office and to move Harris away from a Biden agenda they see as sour toward business-friendly deals.

Ousting Khan could have significant implications on the future of antitrust. In healthcare, that could mean a strategic shift in how pharmacy benefit manager (PBM) investigations are approached by the country's premier competition protection agency.

It is also sparking a contentious, public debate on Khan's effectiveness as chair.

"It's been revolutionary what Khan has done on PBMs," said Matt Stoller, director of research for the American Economic Liberties, an anti-monopoly think tank.

"I can say that to me, I think the commissioner has been right on PBMs [but] wrong on tech mergers," said Cost Plus Drugs' billionaire founder Mark Cuban, a vocal critic of PBMs and proponent of Harris' campaign for president, in a statement to Fierce Healthcare. [Read More Here...](#)

## Medicare Advantage Insurers Ranked By Prior Authorization Denial Rates

Medicare Advantage insurers denied 7.4% of prior authorization requests in 2022, according to data published by KFF.

In a report published Aug. 5, KFF examined data submitted to CMS by Medicare Advantage insurers in 2022.

The number of denials increased slightly from 6% in 2021. CVS Health denied the highest percentage of prior authorization requests in 2021 and 2022. The company denied 13% of prior authorization requests it received in 2022, up from 12% in 2021.

Humana had the highest number of prior authorization requests per member in 2022, at 2.9.

Here's how major MA insurers compare on the number of prior authorizations and denial rates:

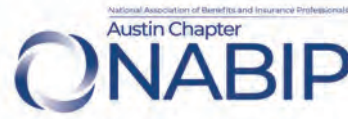
### Average number of prior authorization requests per member (2022)

- Humana: 2.9
  - Elevance Health (Anthem): 2.6
  - Anthem BCBS plans: 2.3
  - Centene: 2.2
  - Other BCBS plans: 2.0
  - All other plans: 2.0
  - CVS Health: 1.1
  - Cigna: 0.9
  - UnitedHealthcare: 0.9
  - Kaiser Permanente: 0.5
- [Read More Here...](#)



# April Chapter Agendas

**AUSTIN**



[www.austinahu.org](http://www.austinahu.org)

## NABIP Austin Annual Golf Tournament



September 16, 2024  
9:00 AM - 5:00 PM  
[Add to Calendar](#)



BALCONES COUNTRY CLUB  
8600 Balcones Club Drive  
Austin, TX 78750  
[Venue website](#)  
[Directions](#)

**REGISTER NOW**

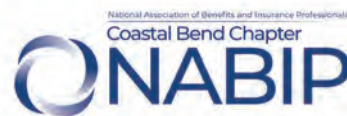


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[www.lonestarahu.org](http://www.lonestarahu.org)



[www.nabipcoastalbendtx.org](http://www.nabipcoastalbendtx.org)

## Volunteer Building “I See You Boxes” – Self-Care for Domestic Violence Survivors – Hagar’s Heart

September 10 @ 9:00 am - 12:00 pm



Join your fellow NABIP-FW members for a meaningful volunteer activity. **REGISTER NOW** to help assemble self-care toolkits for domestic violence survivors supported by Hagar’s Heart. This is a wonderful opportunity to give back to the community and help those in need.

### About Hagar’s Heart:

Hagar’s Heart is dedicated to caring for survivors of domestic violence during recovery. We aim to give back what was taken from them by their abusers – their self-worth and trust.

### Event Details:

- **Activity:** Assembling self-care toolkits
- **Purpose:** Supporting domestic violence survivors through Hagar’s Heart

### RSVP:

**Please RSVP** for this event to ensure we have enough materials for everyone. Your participation will make a significant difference in the lives of those we aim to support.

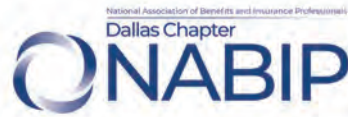
We look forward to seeing you there and working together to make a positive impact!

## Virtual CE – The Eclipse of Medicare and Social Security

September 12 @ 11:30 am - 12:30 pm

# DALLAS

[www.dahu.org](http://www.dahu.org)



NABIP-Dallas (DAHU) Monthly Luncheons and special events will be held at VouV Dallas!

Vouv Event Space, 4445 Sigma Road,  
Dallas, TX 75244  
<https://vouvDallas.com>



August 21, 2024 | ROCKSTAR SALES SUMMIT (Previously Medicare Summit)

[REGISTER HERE](#)



NABIP-Dallas (DAHU) Upcoming Dates - Details to follow

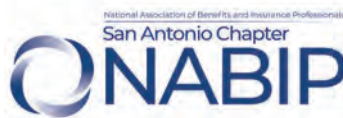
September 18 2024 | MONTHLY LUNCHEON 11:30 - 1:00

October 16 2024 | MONTHLY LUNCHEON 11:30 - 1:00

November 20 2024 | MONTHLY LUNCHEON 11:30 - 1:00

# SAN ANTONIO

[www.sanantonioahu.org](http://www.sanantonioahu.org)



## SAAHU MEDICARE MENTORS WORKSHOP

August 27, 2024  
11:30 AM - 5:15 PM  
[Add to Calendar](#)

Aggie Park  
6205 West Avenue  
San Antonio, TX 78213  
[Venue website](#)  
[Directions](#)

[REGISTER NOW](#)

2024 SAAHU Medicare Mentors Workshop

**"The San Antonio Association of Health Underwriters is pleased to announce a Medicare Mentors Workshop!"**  
**Course Title: 2024 SAAHU Medicare Mentors Workshop**

### Tickets

\$30.00 Member Registration  
\$50.00 Non-Member ticket  
\$45.00 Early Bird Registration


# HOUSTON

[www.nabip-htx.org](http://www.nabip-htx.org)



## NABIP Houston August Luncheon



 August 20, 2024 | 12:00 PM - 1:30 PM  
[Add to Calendar](#)

 Post Oak Grill | 1415 S Post Oak Ln  
Houston, TX 77056  
<https://www.postoakgrill.com/Directions>

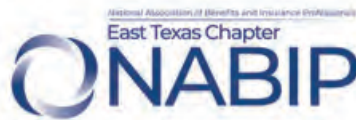
  

**REGISTER NOW**

Tickets

# EAST TEXAS

[www.NABIP-ETX.org](http://www.NABIP-ETX.org)



## NABIP-ETX September Monthly Luncheon - Boomer Benefits

**When** *September 20, 2024*  
11:30 AM - 1:00 PM (CST)

**Location** Heartland Security Insurance Group, 501 Shelley Drive, Tyler, TX 75701 - Main Floor Conference Room



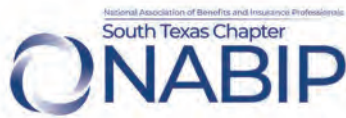
**Boomer Benefits**  
CMS Proposed Rules for Medicare Advantage/PDP  
1-Hour CE  
Presented by  
Danielle Kunkle Roberts

### Registration

- **Member Monthly Luncheon - \$20.00**  
Lunch begins at 11:30 - Session starts at 12pm
- **Multiple Members Monthly Luncheon - \$20.00**  
For use when registering multiple members
- **Non-Member Monthly Luncheon - \$25.00**  
11:30 lunch - Sessions begins at 12pm
- **Non-Member, No lunch - \$5.00**  
Session begins at 12pm

**SOUTH TEXAS**

**SUMMIT - 5HR CE  
SEPTEMBER 5/6, 2024**



[www.nabipsotx.org](http://www.nabipsotx.org)



**2024 NABIPSOTX Medicare Workshop is pleased to announce our annual workshop at South Padre Island on September 5/6, 2024. 5**

**Hours of CE Credit Include:**

- **Understanding the Future of Medicare**
- **Medicare and CMS Don't Get Sidelined by Regulation Roadblocks**
- **ETHICS - The NABIP Way (2hours)**
- **Why Benefits are Right when Money is Tight**
- **ICHTA: Is It A Good Fit For My Clients**

**Top-rated carriers will be on hand to help answer questions and registration including the South Padre Island Bay Cruise on 9/5/ 6:00 PM aboard the Black Diamond Pirate Ship.**

