III. Statistical Analysis

1. Enrollment and Underwriting

National Health Insurance (NHI) provides all nationals with compulsory coverage. The purpose is to ensure that individuals receive adequate healthcare through the arrangement of a cooperative scheme. Under the NHI scheme, beneficiaries are divided into six categories; each differs in their insured payroll-related amount, premium contribution rate, and premium calculation method. Application(s) are to be made at the agency, school, enterprise, institution, employer, group, or designated departments to which the insured belongs.

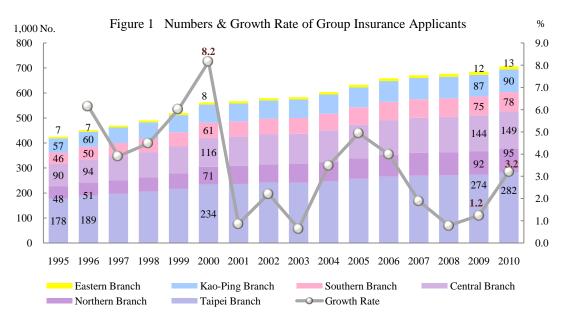
(1) Group Insurance Applicants

There was a maximum average annual increase of 4.1% in 2000–2010 from the Eastern Branch and a minimum of 1.9% from the Taipei Branch.

As of the end of 2010, the number of group insurance applicants was 706,599 in total, an increase of 21,922 from the previous year. There has been an average annual increase of 2.3% since 2000.

When broken down by beneficiary, there were 701,150 group insurance applicants in Category 1 (99.2%), 3,511 group insurance applicants in Category 2, 345 group insurance applicants in Category 3, 9 group insurance applicants in Category 4, 620 group insurance applicants in Category 5, and 964 group insurance applicants in Category 6.

When broken down by the BNHI, the Taipei Branch accounted for the greatest number at 39.9%, followed by the Central Branch at 21.0%, the Northern Branch at 13.5%, the Kao-Ping Branch at 12.8%, the Southern Branch at 11.0% and the Eastern Branch at 1.8%.



When broken down by the BNHI, the number of group insurance applicants showed positive growth for all branches over the past ten years; the Northern Branch, at 0.9 percentage points, had the highest increase in share of group insurance applicants. The Taipei Branch exhibited a negative trend and the highest decrease at 1.7 percentage points.

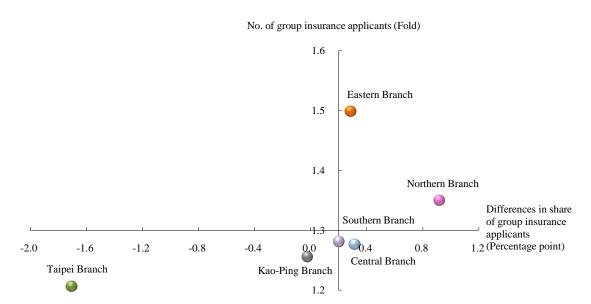


Figure 2 Group Insurance Applicants 2010 vs. 2000

(2) Beneficiaries

Over the past ten years, in terms of structural ratio, Categories 1, 2, and 3 have gone down, while Categories 5 and 6 have gone up, indicating that there has been an increase in disadvantaged groups.

The purpose of NHI is to enhance the health of all nationals and provide fair access to medical treatment. At present, with the exception of those in corrective institutions, all nationals are covered under the insurance scheme.

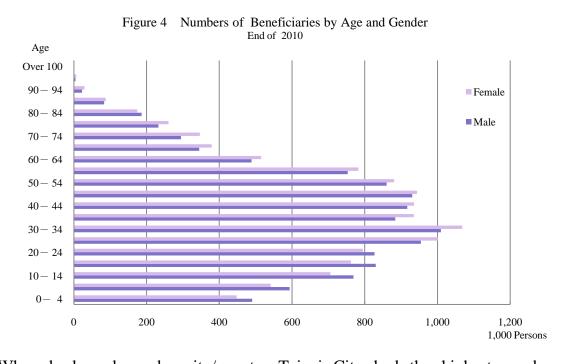
By the end of 2010, the number of NHI beneficiaries increased by 48,714 from the end of the previous year. There was an increase of 1,673,661 individuals from 2000 with an average annual increase of 0.8%, of which the insured increased by 2,410,580 individuals (19.5%) with an average annual increase of 1.8%; dependents decreased by 736,919 with an average annual decrease rate 0.9%. At the end of 2010, the insured accounted for 63.2% of beneficiaries, an increase of 6.3% from the end of 2000; the average number of dependents decreased by 0.2 individuals.

When broken down by gender, 11,476,860 individuals (49.7%) were male and 11,597,627 (50.3%) were female. The sex ratio of beneficiaries was 99.0; it was 100.2 ten years ago.

1,000 Persons % Insureds Dependents Growth Rate 25,000 5.0 8,538 8,317 4.5 9,054 20,000 -7,911 4.0 3.5 15,000 3.0 14,487 14,757 2.5 11,213 11,464 10,000 2.0 1.5 5,000 1.0 0.5 0.0 1995 1996 1997 1998 1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010

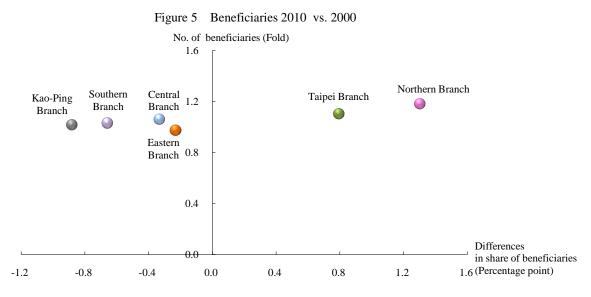
Figure 3 Numbers & Growth Rate of Beneficiaries

When broken down by age, there were more male beneficiaries than females in the <25 age group, whereas females outnumbered males for age 25 and over. At the end of 2010, the average age of beneficiaries was 37.5, an increase of 4.3 from 2000; the average age of the insured who paid the premium was 43.4, an increase of 1.7 years from 2000. In addition, the number of beneficiaries above 65 had reached 2.45 million, an increase of 555,560 from 2000, of which 383,012 were female.

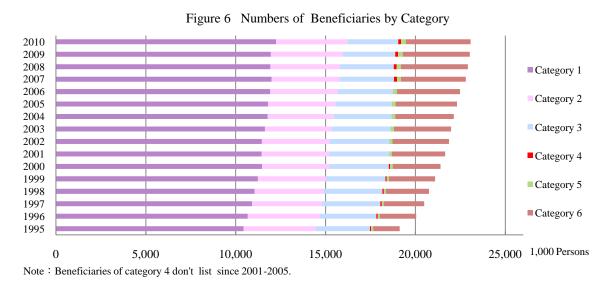


When broken down by city/county, Taipei City had the highest number of beneficiaries at 4,564,722 (19.8%), followed by New Taipei City at 3,173,472 (13.8%), while Lienjiang County had the smallest number at 6,960 (0.0%). Excluding the outer islands, Taitung County had the smallest number of beneficiaries at 195,492 (0.9%), followed by Chiayi City at 274,562 (1.2%).

When broken down by BNHI, the Taipei Branch accounted for the greatest number of beneficiaries at 8,507,019 (36.9%), followed by the Central Branch at 4,175,760 (18.1%) while the Eastern Branch accounted for the smallest number at 493,835 (2.1%). Compared to the end of 2000, the Taipei and Northern Branches showed positive trends in both number of beneficiaries and share of beneficiaries; the Northern Branch had the highest increase in share of beneficiaries at 1.3 percentage points. On the other hand, the Eastern, Central, Southern, and Kao-Ping Branches showed negative trends in share of beneficiaries; the Kao-Ping Branch had the highest decrease at 0.9 percentage points.



The national economy was adversely affected by the international financial crisis. In 2010, while Category 1 had the highest number of beneficiaries (53.1%), the proportion of Category 1 decreased by 0.5 percentage points compared to 2000, Category 2 decreased by 0.3 percentage points, and Category 3 decreased by 3.2 percentage points. On the other hand, Categories 5 and 6 increased by 0.5 and 3.1 percentage points, respectively. The proportion of disadvantaged minority groups also significantly increased.



(3) The Insured Payroll-Related Amount

At the end of 2010, the average insured payroll-related amount was NT\$32,544; the average increase of the insured payroll-related amount from 2000–2010 was 2.6%

In 2009, in order to strengthen the premium collection base, the BNHI guided people to insure in correct insurance status. In addition, the BNHI also held reviews regarding the insured payroll-related amount. For those with lower than the correct insured amount, the BNHI notified group insurance applicants to adjust premiums directly to increase premium revenues.

At the end of 2010, the average insured payroll-related amount was NT\$32,544. The average insured payroll-related amounts for Categories 1 to 3 were NT\$37,596, NT\$25,813, and NT\$21,000, respectively, with the highest for professional and technical personnel at NT\$70,404, followed by teaching personnel from public and private institutions and government employees at NT\$55,684. The premiums for Category 4 and 5 were the same, at NT\$1,367, and was NT\$1,249 for Category 6.

When broken down by the insured payroll-related amount, the number of insured was largest at NT\$21,000, with 3,401,702 individuals (23.1%), followed by NT\$17,280, with 1,413,481 individuals (9.6%).

When broken down by the average insured payroll-related amount and taking into consideration the effects of the global economic recession, the average insured payroll-related amount for Category 1 increased by only 1.6% over the previous year, of which Item 1 of Category 1 had the highest average annual increase (6.7%) over the past ten years; Category 2 increased by 2.9%, with an average annual increase of 2.7%. The average insured payroll-related amount for Category 3 increased from NT\$16,501 by the end of 1995 to NT\$19,200 by the end of 1998, and was adjusted again to NT\$21,000 by the end of 2007.

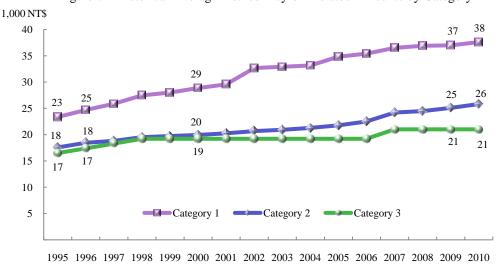
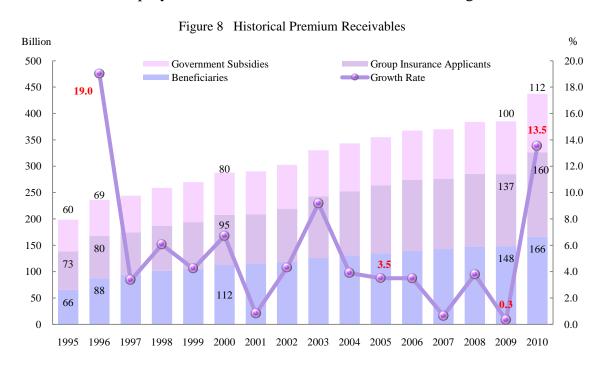


Figure 7 Historical Average Insured Payroll-Related Amounts by Category

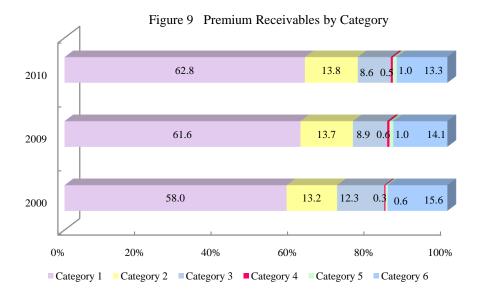
(4) Premium Receivables

The average annual increase of premium contributions in 2000–2010 was 4.0% for beneficiaries, 5.3% for group insurance applicants, and 3.3% for government subsidies.

Premium revenues are the main source of funds for NHI. The rates of premium contributions vary by the type of insured. Category 4 beneficiaries, low-income households, and unemployed veterans receive full subsidies from the government.



Premium receivables were NT\$437 billion in 2010, an increase of NT\$52,183 million from the previous year and an increase of NT\$150 billion from 2000, with an average annual increase of 4.0%; of which, Category 1 showed an increase of NT\$37,299 million from the previous year and an increase of NT\$108 billion from 2000, with an average annual increase of 5.1%. Category 2 showed an increase of NT\$7,541 million from the previous year and an increase of NT\$22 billion from 2000, with an average annual increase of 4.8%. Category 3 showed an increase of NT\$3,318 million from the previous year and an increase of NT\$2,294 million from 2000, with an average annual increase rate 0.6%. Category 4 showed a decrease of NT\$10 million from the previous year and an increase of NT\$1,463 million from 2000, with an average annual increase of 10.1%. Category 5 showed an increase of NT\$476 million from the previous year and an increase of NT\$2,590 million from 2000, with an average annual increase of 9.7%. Category 6 showed an increase of NT\$3,559 million from the previous year and an increase of NT\$13 billion from 2000, with an average annual increase of 2.6%.



When broken down by source, the amount of premium receivables in 2010 was NT\$166 billion (38.0%) from the insured, an increase of 17,953 million from the previous year and an increase of NT\$54 billion from 2000, with an average annual increase of 4.0%, NT\$160 billion (36.5%) from the group insurance applicants, an increase of NT\$22,849 million from the previous year, and an increase of 65 billion from 2000 with an average annual increase of 5.3% and NT\$112 billion (25.5%) from government subsidies (NT\$88 billion (20.0%) from the central government, NT\$19 billion (4.3%) from the provincial/municipal governments, and NT\$5 billion (1.2%) from the county/city governments), an increase of NT\$11,381 million from the previous year and NT\$31 billion from 2000, with an average annual increase of 3.3%.

