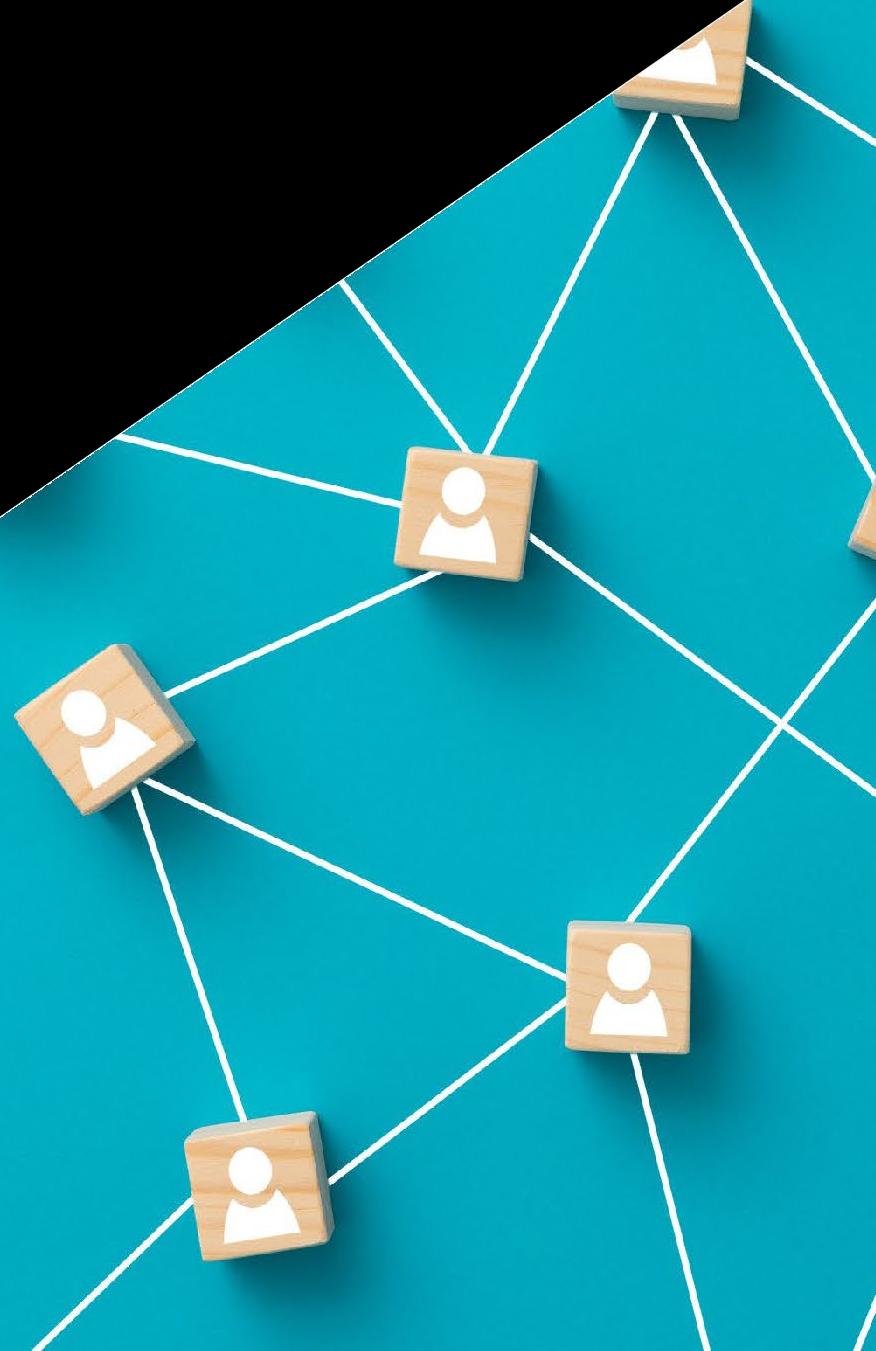




The State of our Health & Healthcare

2026 AOA Conference

1/12/26

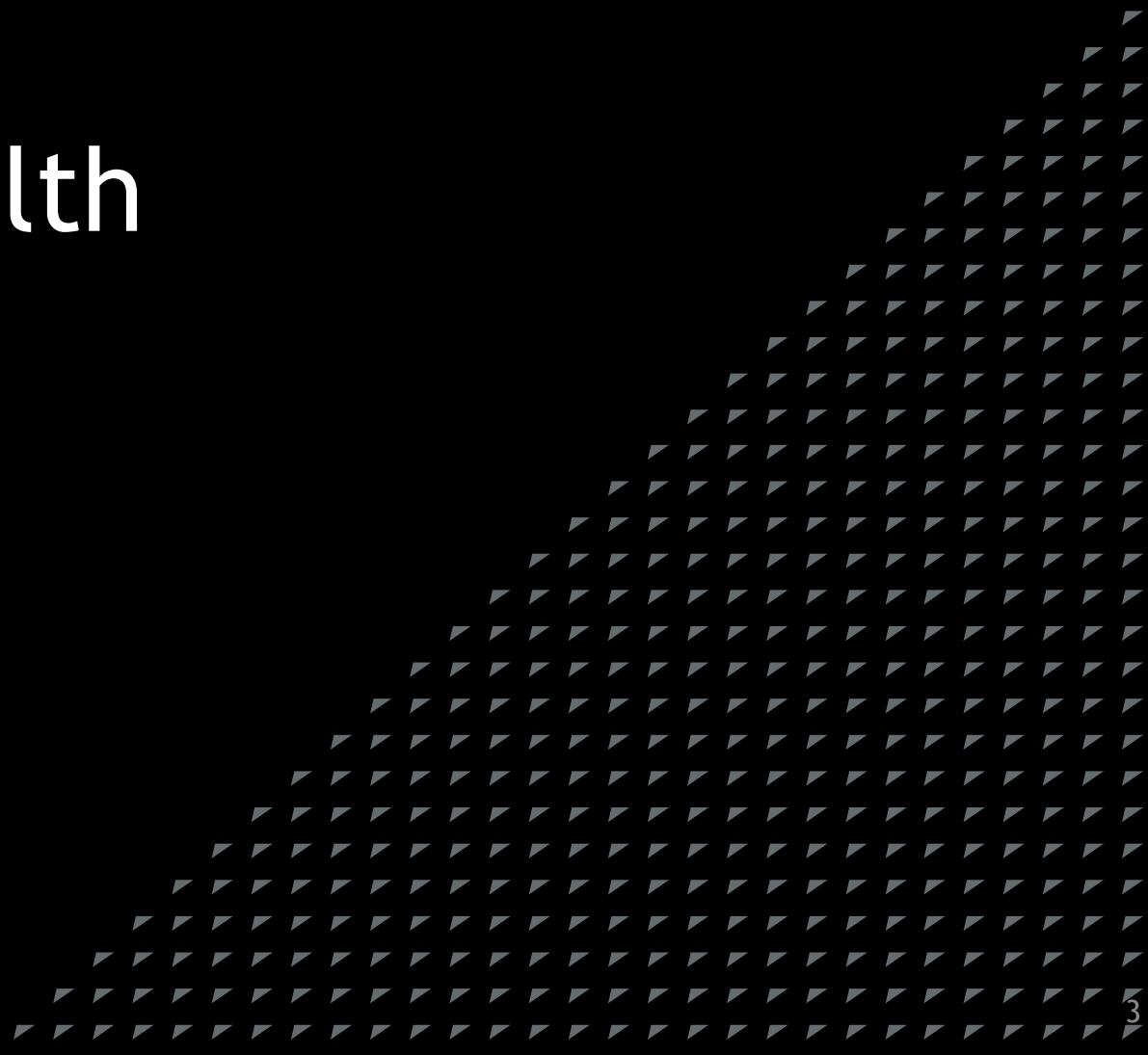


Agenda



- ▶ **The State of Our Health**
- ▶ **The State of Our Healthcare**
- ▶ **Future State Vision for CSURMA AORMA**
- ▶ **Why Change Will Happen**
- ▶ **How Healthcare Could Look in 2035**

The State of our Health



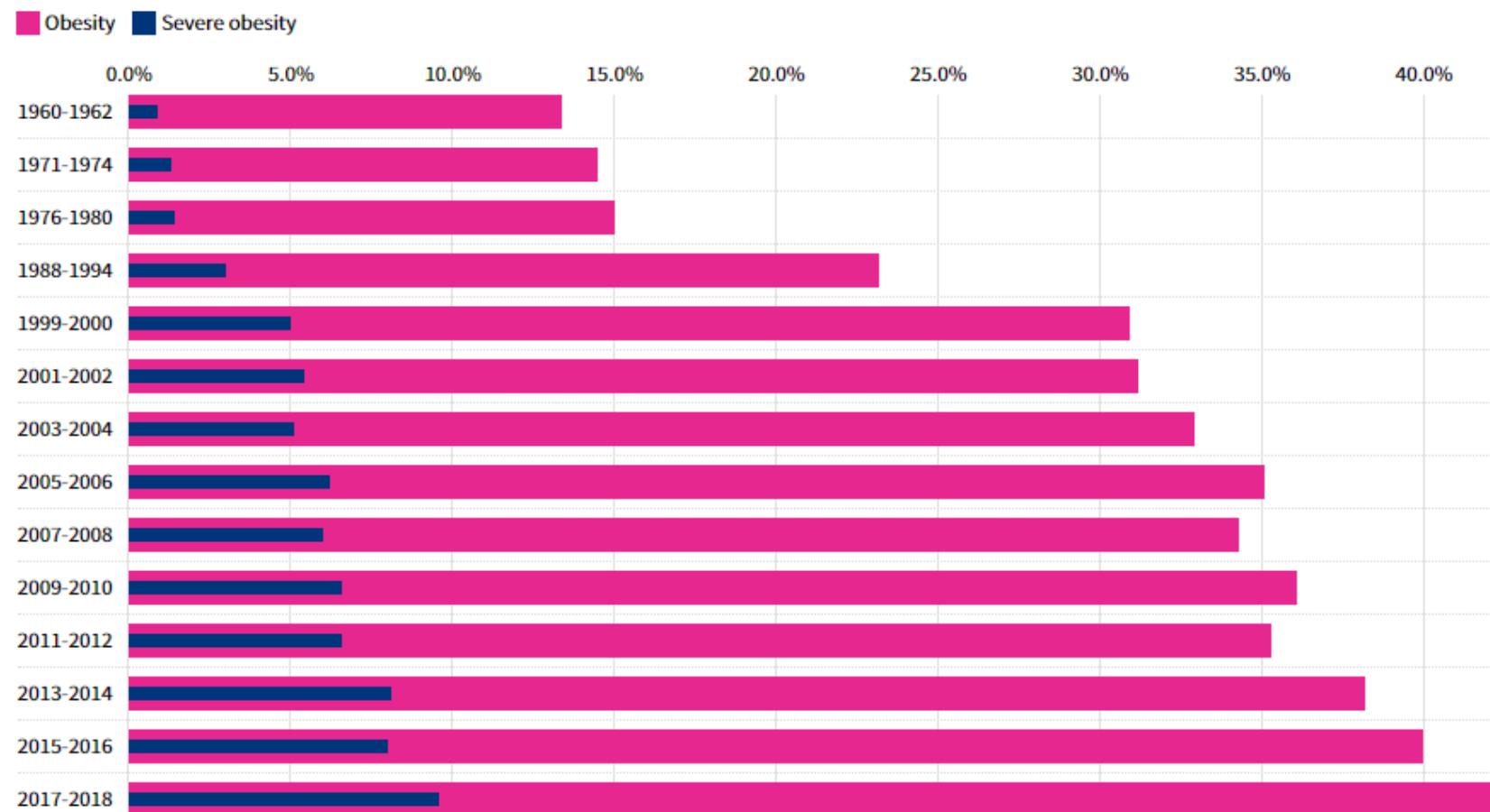
Americans Are Grossly Overweight

Alliant Insurance Services



Nationwide obesity rates have more than tripled since the 1960s.

Age-adjusted nationwide obesity and severe obesity rates according to National Health and Nutrition Examination Surveys



This accounts for the population between the ages of 20-74. The obesity category already includes severe obesity.

Source:

¹ <https://www.tfah.org/report-details/state-of-obesity-2022/> and <https://www.cdc.gov/obesity/data/childhood.html>

² <https://www.cdc.gov/nchs/data/hestat/obesity-adult-17-18/obesity-adult.htm#1>

Approx. 42.5% of adults in the U.S. have obesity.¹

31.1% of Americans are overweight

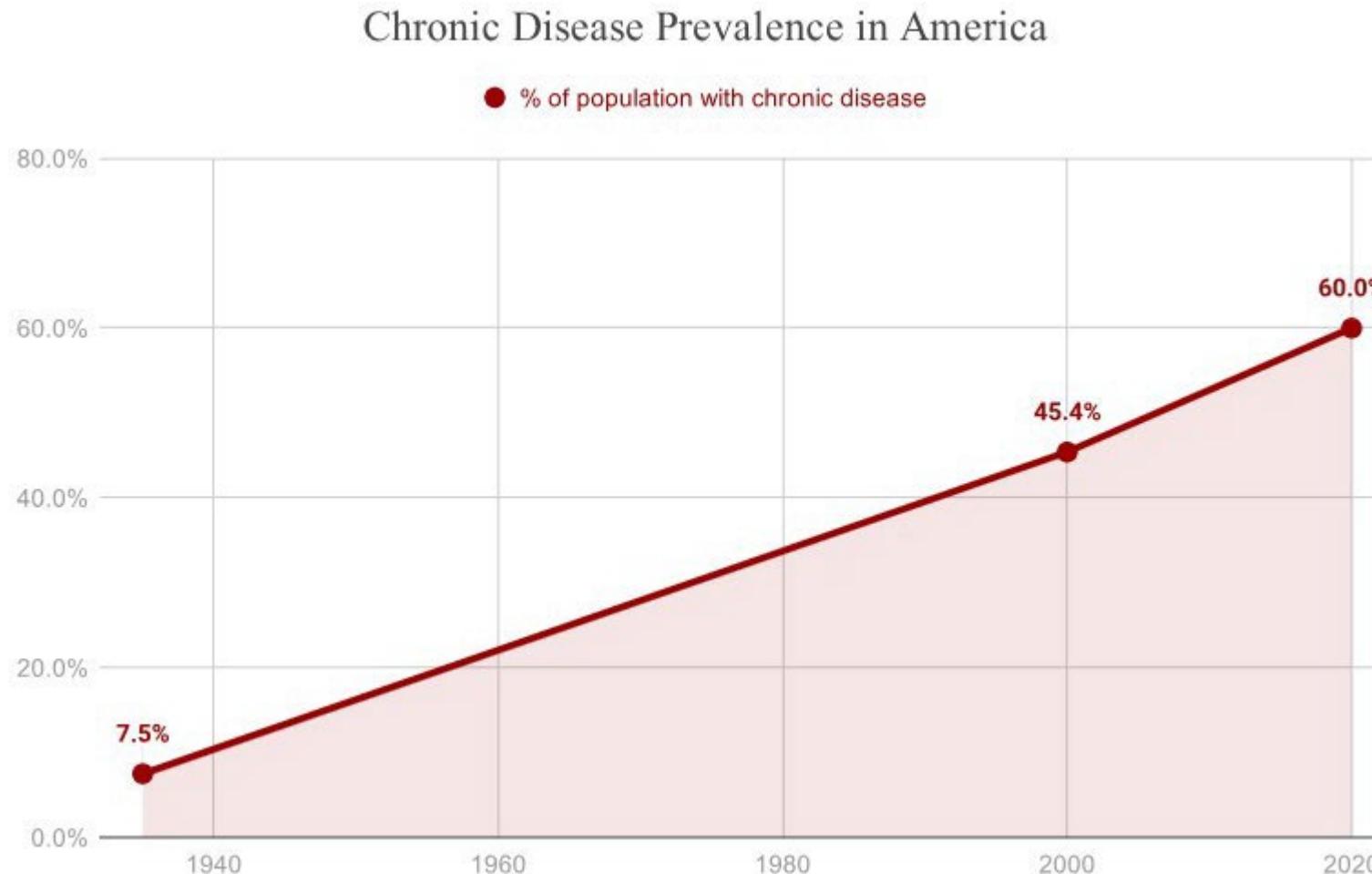
26.4% of people in this country are at a normal weight

Chronic Disease Growth

Alliant Insurance Services



Chronic Disease prevalence is increasing at a similar rate to Obesity prevalence



Heart
Disease

Stroke

Alzheimer's

Diabetes

Chronic
Kidney
Disease

Chronic
Lung Disease

A 1935 survey showed chronic disease and disability prevalence at 7.5% in American Adults. In 2000, 45% of Americans had at least one chronic disease and today it's 60%

Pre-Diabetes in Teenagers On The Rise

Alliant Insurance Services



Prevalence of Prediabetes Among U.S. Adolescents (Ages 12–19)

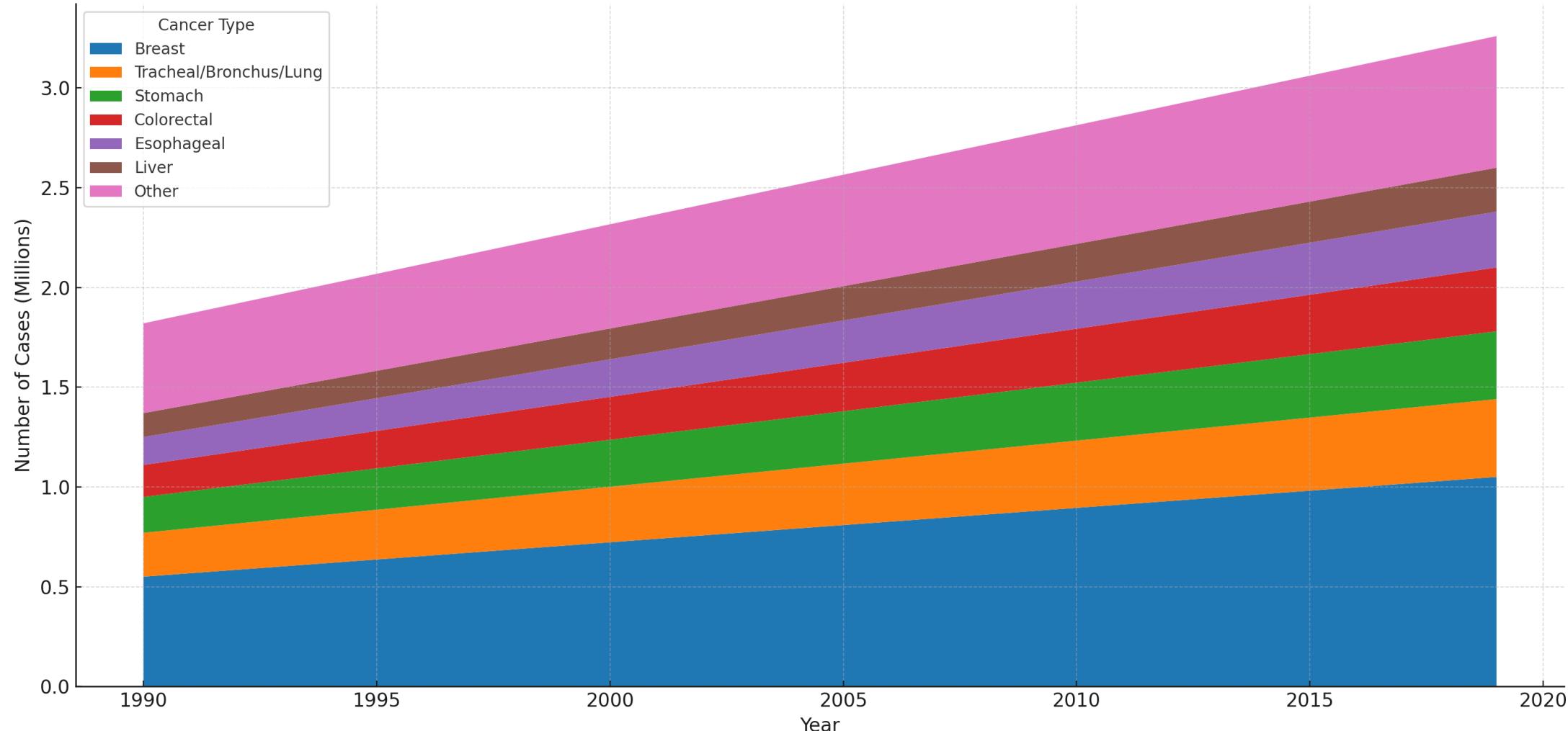
Time Period	Overall Prevalence	Male Adolescents	Female Adolescents
1999–2002	11.6%	15.8%	7.1%
2015–2018	28.2%	36.4%	19.6%

Increasing Cancer in Younger Adults



Over the last 30 years, we've seen a 79% increase cancer cases in individuals under the age of 50

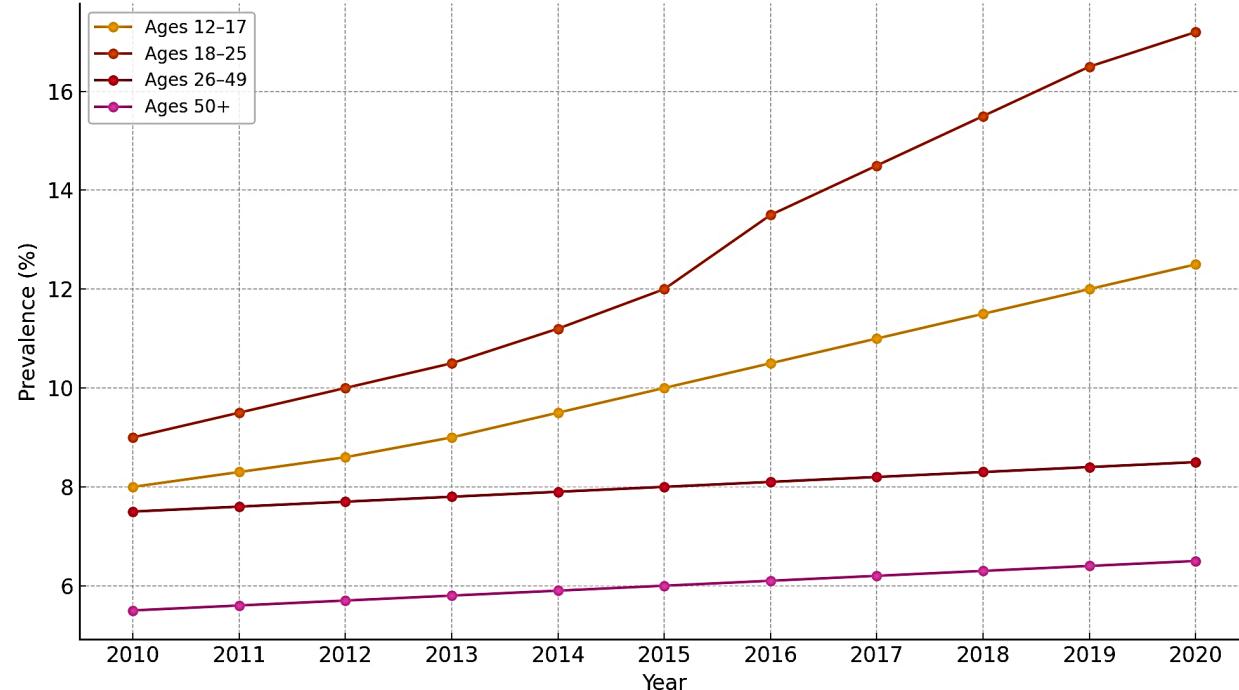
Trend in Cancer Incidence in Individuals Under Age 50



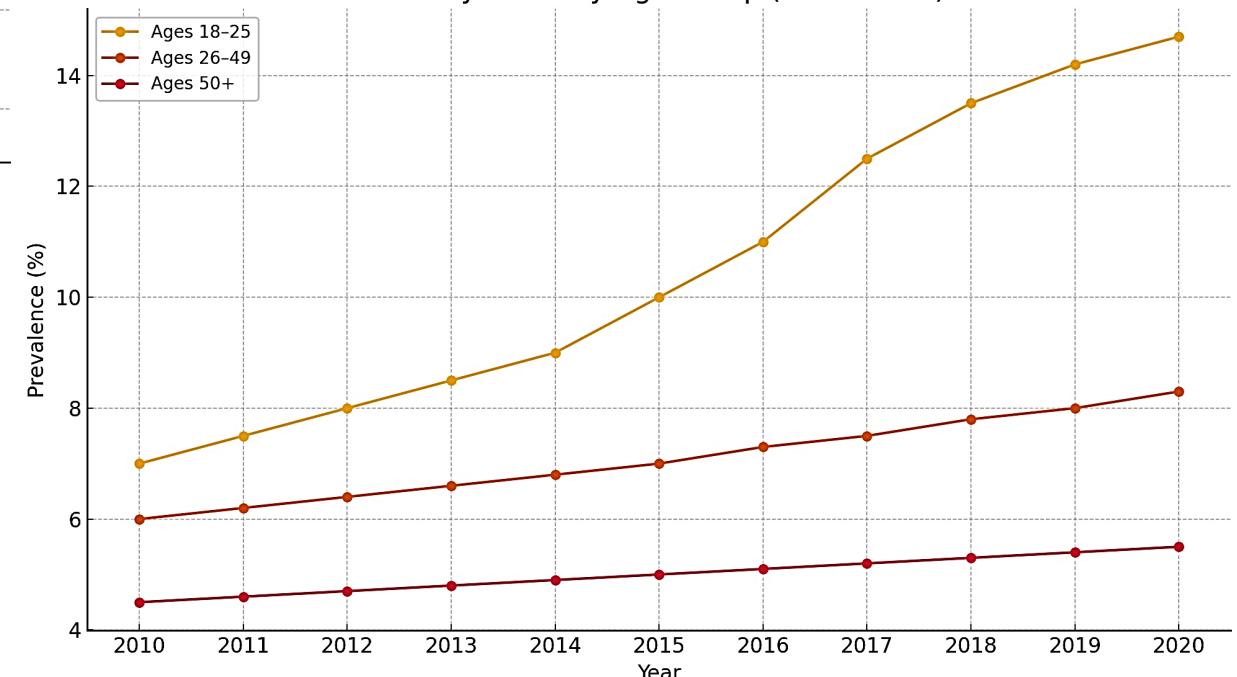
Rising Mental Health Issues



Depression Rates by Age Group (2010-2020)



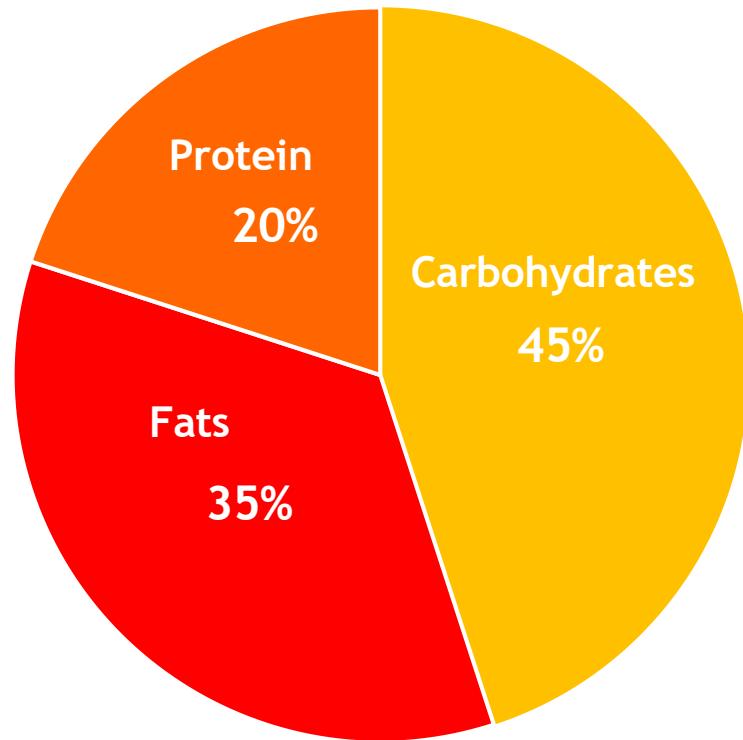
Anxiety Rates by Age Group (2010-2020)



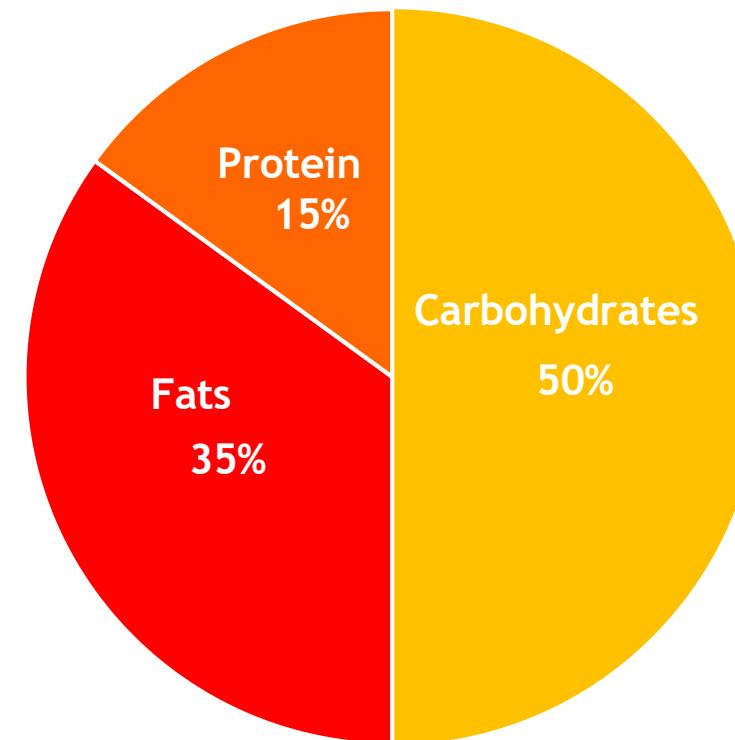
Why Is This Happening? What has Changed?



Macronutrient Consumption in the U.S. in 1960



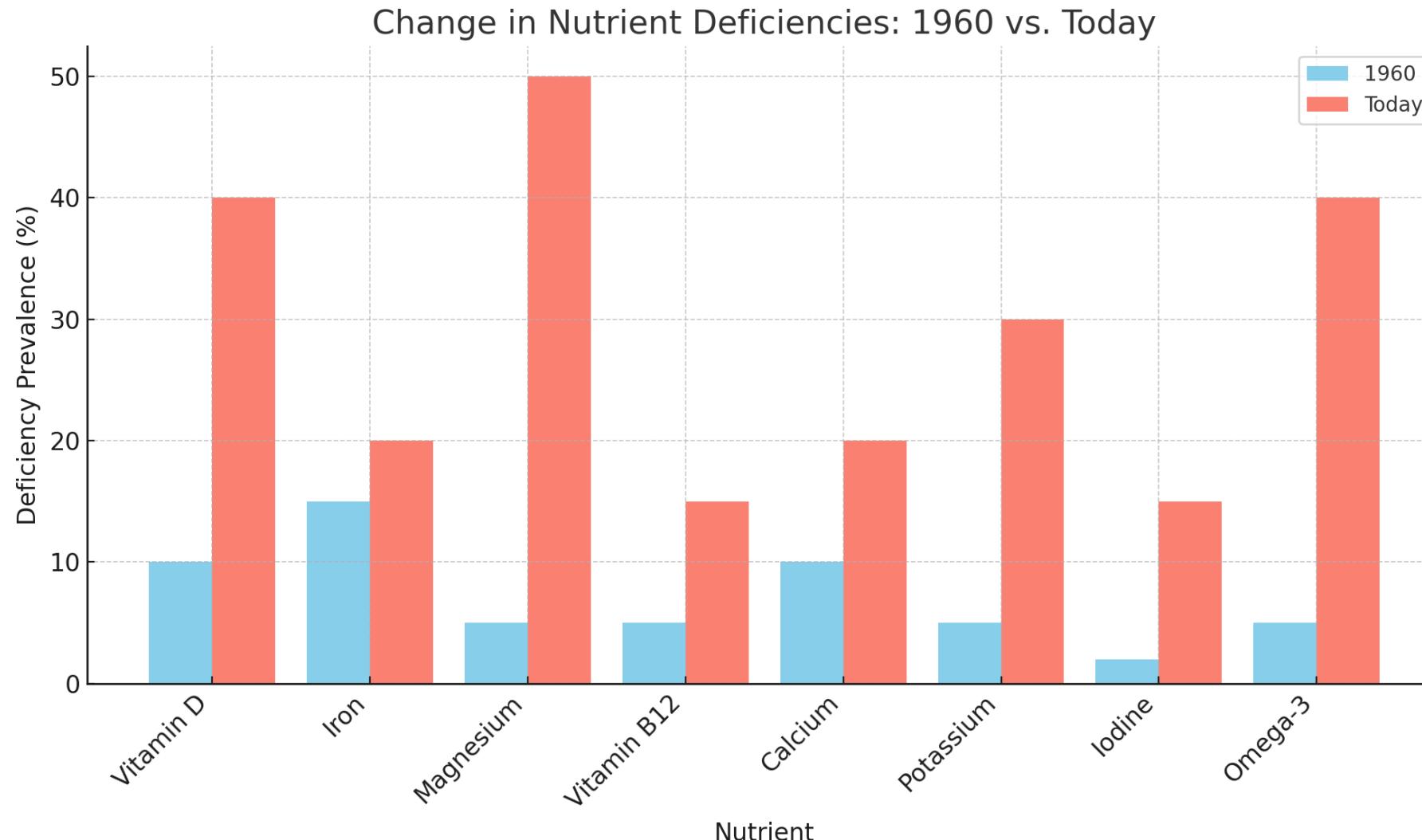
Macronutrient Consumption in the U.S. Today



Why Is This Happening? What has Changed?



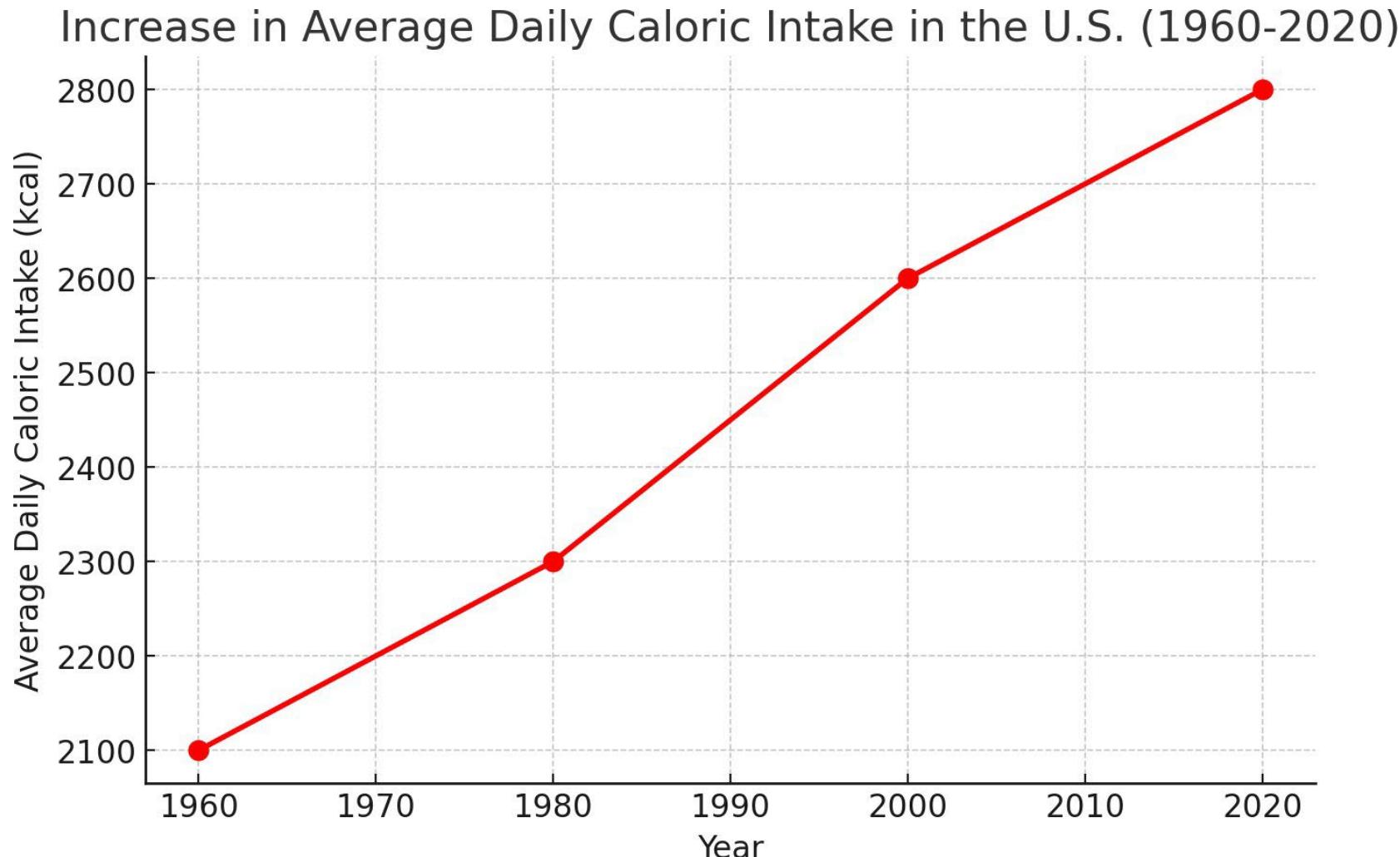
Nutrient Deficiency has exploded in the last 60+ years



Why Is This Happening? What has Changed?



Average American Caloric Intake is up 33% since 1960

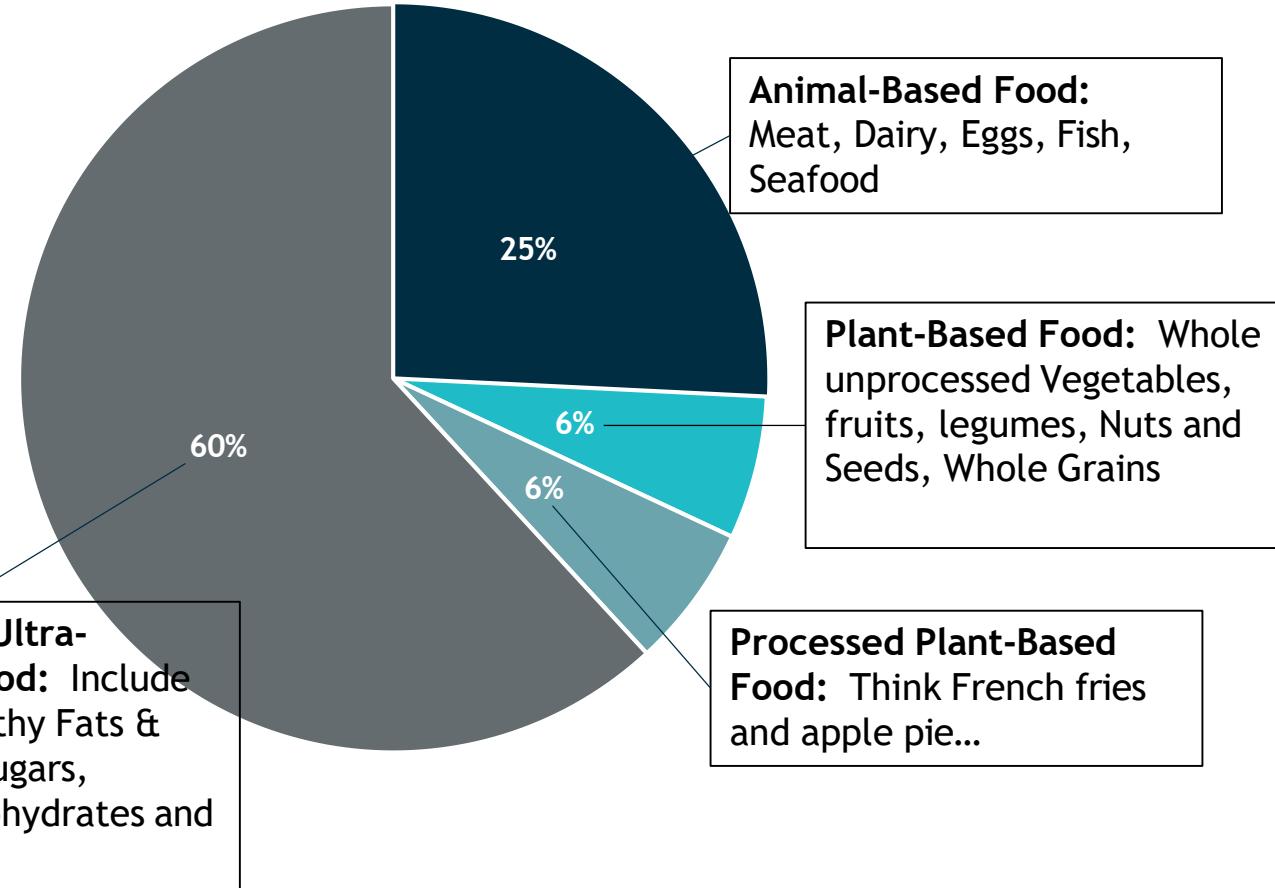


Why Is This Happening? What has Changed?



The Standard American Diet (S.A.D.) has changed significantly

US Food Consumption as a % of Calories



Key Changes:

- Ultra-processed foods dominate our diets
- Added sugar in processed foods and beverages has exploded
- The use of industrial seed oils has replaced natural animal fats and is ubiquitous in ultra-processed food and restaurants
- Synthetic chemicals are common in our food (often times banned by other countries)
- Toxins (glyphosate) permeate our food supply and consumer products (BPA)
- Consumption of whole foods has declined



How Did We Get Here?

Corporate Industrialization of the Food Supply

- Food Industry began marketing the idea of “convenience” in the 70’s
- Profit driven food companies design and engineer ultra-processed food to be addictive
 - Artificial Additives (Sweeteners, Colors, Flavors, Preservatives, Stabilizers, Emulsifiers) are added to make food more appealing
 - Massive amounts of money are spent on marketing to influence how we eat and what foods we choose with a focus on “convenience”

The Impact

- Ultra-processed food and sugar sweetened beverages don’t promote satiety, so we eat/drink more (this is by design)
- Ultra-processed foods are higher in calories, lower in nutrients than whole foods



Weak Government Regulation

- Government Failure (FDA) to regulate Food & Agriculture industry
- The nutrition “guidelines” on what is “healthy” from the government and Academic Authorities are highly influenced by the food industry



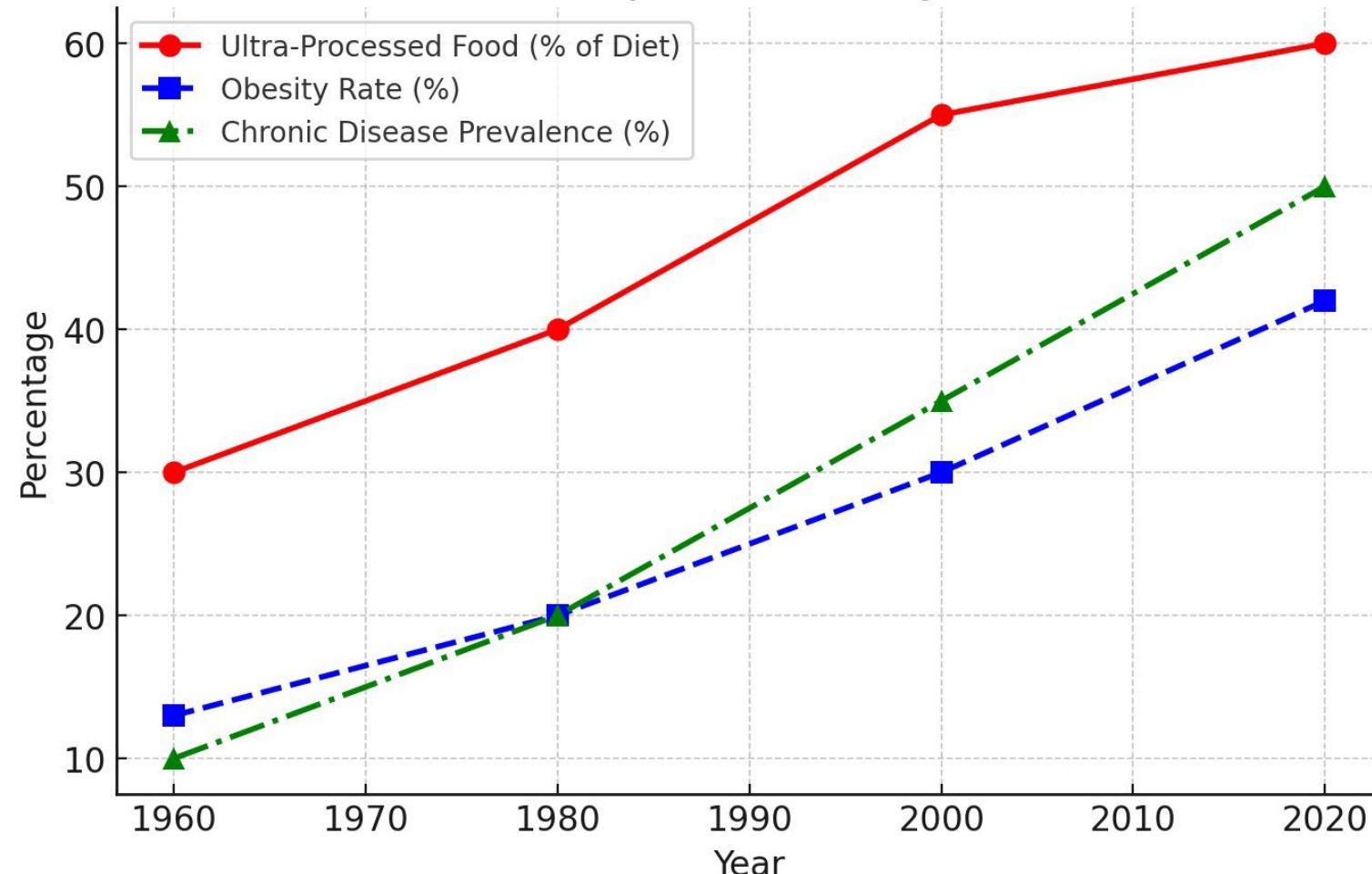
Corporate Funded Fake Research

- The food industry spends more than \$11 billion a year funding nutrition studies compared to \$1 billion from the NIH
- Ex. From 2008 to 2016 Coca-Cola funded 389 articles in 169 research journals concluding physical activity was more important than diet, and soft drinks and sugar are essentially harmless.

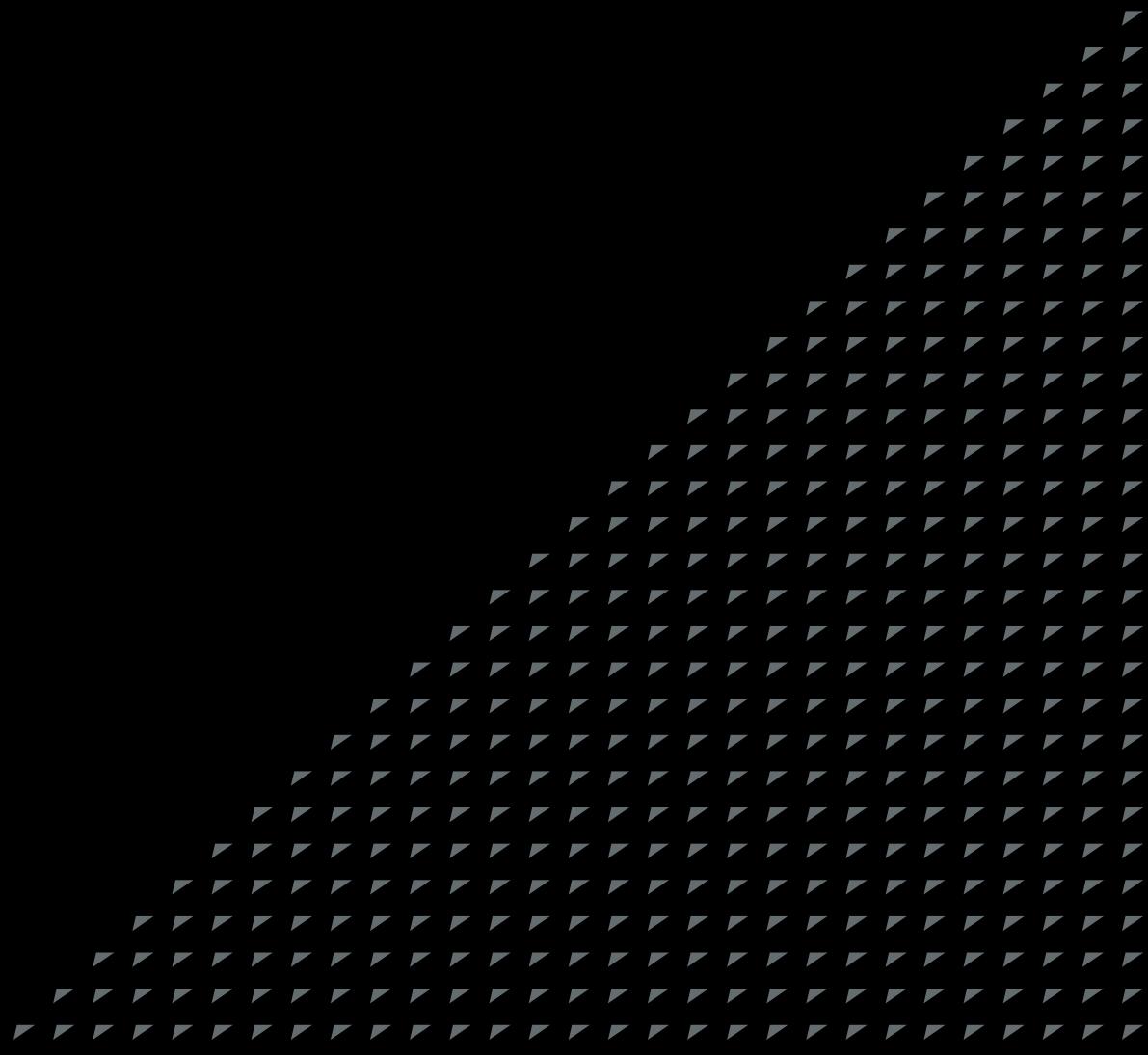


What We Eat Matters

Increase in Processed Food Consumption, Obesity, & Chronic Disease (1960-2020)



The State of our Healthcare

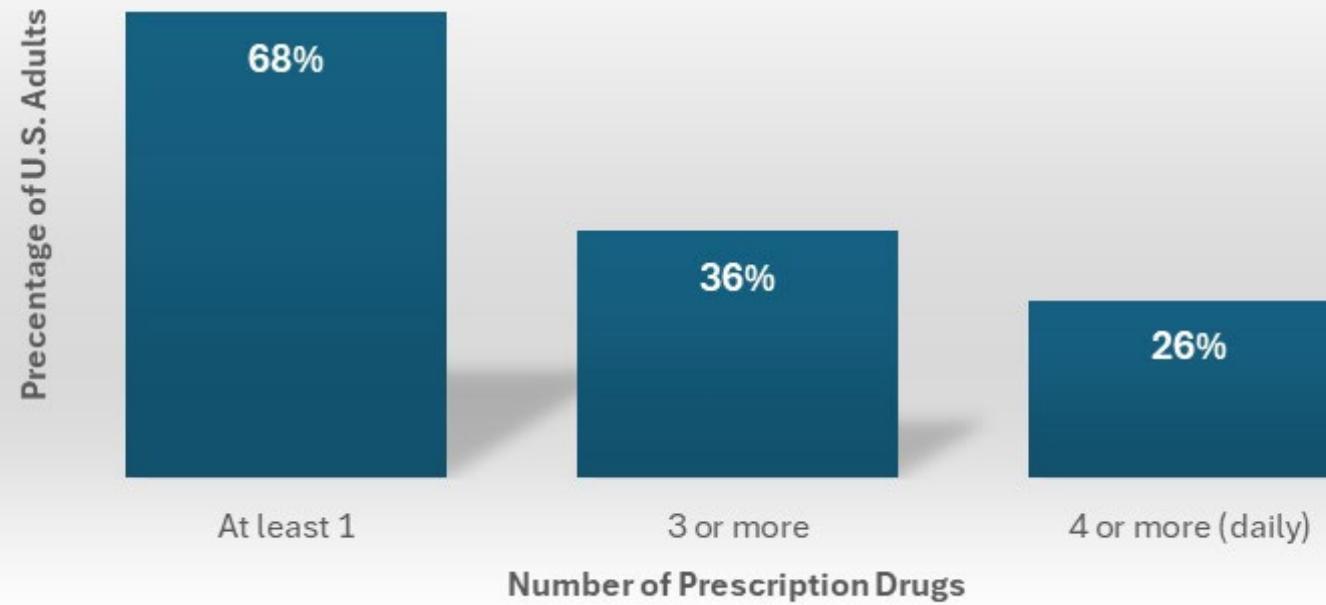




Modern Medicine: There's a Pill For That

Year	Total U.S. Spending on Prescription Drugs	Per Capita Spending
1960	\$2.7 billion	~\$101
2023	\$722.5 billion	~\$2,200 +

Prescription Drug Utilization in the U.S.



Poor Health = Lower Life Expectancy



The U.S. has the lowest life expectancy among large, wealthy countries while outspending its peers on healthcare

Life expectancy and per capita healthcare spending (PPP adjusted), 2023

Country	Life expectancy ▲	Health spending, per capita
🇺🇸 United States	78.4	\$13,432
🇩🇪 Germany	80.6	\$8,441
🇬🇧 United Kingdom	81.1	\$6,023
🇦🇹 Austria	81.6	\$7,811
🇨🇦 Canada	81.7	\$7,013
🇳🇱 Netherlands	82.0	\$7,737
🇧🇪 Belgium	82.5	\$7,380
Comparable Country Average	82.5	\$7,393
🇦🇺 Australia	83.1	\$6,931
🇫🇷 France	83.1	\$7,136
🇸🇪 Sweden	83.4	\$7,522
🇯🇵 Japan	84.1	\$5,640
🇨🇭 Switzerland	84.2	\$9,688

Notes: Health spending per capita data represent health consumption spending per capita. Comparable countries include: Australia, Austria, Belgium, Canada, France, Germany, Japan, the Netherlands, Sweden, Switzerland, and the U.K. 2023 U.K. life expectancy data is only for England and Wales. See Methods [section](#) of "How does U.S. life expectancy compare to other countries?"



West Health-Gallup Healthcare in America Report Card

Name: U.S. Healthcare System

Year: 2022

Surveyed: The American Public

Survey Period: June 21-30, 2022

Survey Question: What grade would you give the U.S. healthcare system?

	A Excellent	B Good	C Satisfactory	D Poor	F Fail	D+F Combined	Average Grade
U.S. healthcare system overall	4%	17%	34%	30%	14%	44%	C-
 Cost of care	1%	6%	19%	41%	33%	75%	D-
 Equitable care	8%	14%	23%	29%	27%	56%	D+
 Access to care	9%	22%	31%	26%	12%	38%	C
 Quality of care	12%	35%	36%	12%	5%	17%	C+

Our Healthcare System is Failing Us



Modern Medicine Treats Symptoms, Not Disease

The treatment/drugs we are being prescribed are designed to treat symptoms and not the underlying root cause of the diseases that affect us



Future State Vision for CSURMA AORMA





Background of CSURMA AORMA Program

- 2019 AOA Bug (Benefits User Group) formed the CSURMA AORMA Benefits Program and is now part of a much larger purchasing pool: PRISM

About CSURMA AORMA Program today

- 13 Auxiliaries participating in the Medical Program
- 27 Auxiliaries participating in Ancillary program
- A la carte offering, Auxiliaries can join one or more program
- Auxiliaries can join anytime
 - January 1 - December 31 plan year
 - Simple quoting process

CSURMA AORMA Benefits Program

Alliant Insurance Services



The CSURMA-AORMA Benefits Program joined a larger purchasing pool, PRISM, via the CSURMA JPA in 2019 to provide more flexibility and greater cost stability for our members.

PRISM Medical Program

41,500
participants

PRISM Dental Program

98,000
participants

PRISM Vision Program

55,000
participants

CSURMA AORMA Rate History - Medical

Alliant Insurance Services



Medical	2022	2023	2024	2025	2026	5-Year Average
CSURMA	-8.8%	9.7%	13.0%	5.7%	14.8%	6.9%
<i>Kaiser</i>	-8.8%	9.7%	13.0%	5.7%	14.8%	6.9%
<i>Anthem</i>	-8.8%	9.7%	13.0%	5.7%	14.8%	6.9%
PRISM Health	-1.7%	8.9%	12.3%	4.7%	14.2%	7.7%
California PPO (Trend)	7.0%	8.0%	8.0%	8.0%	8.0%	7.8%
PERS Choice/Platinum PPO^{1,2}	11.5%	14.5%	12.2%	9.8%	13.2%	12.2%

¹ 2022 PERS Choice plan PPO terminated in 2022 and members moved to PERS Platinum (formerly called PERS Care), thus 2022 rate change represents movement from PERS Choice to the higher cost, richer benefit PERS Platinum plan, statewide rates.

CSURMA AORMA Rate History - Ancillary

Alliant Insurance Services



VSP (PRISM)	2022	2023	2024	2025	2026	5-Year Average
Vision	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

Dental (PRISM)	2022	2023	2024	2025	2026	5-Year Average
DHMO	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
DPPO	-3.8%	-1.7%	-1.8%	3.9%	-0.4%	-0.8%

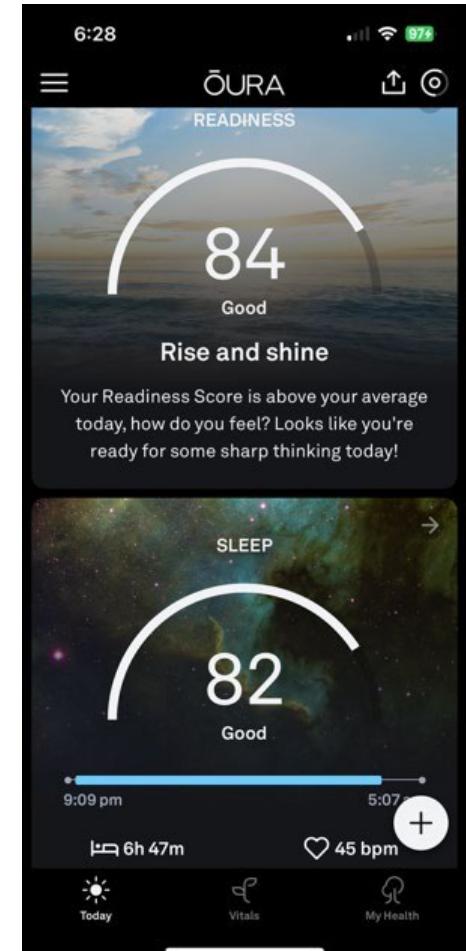
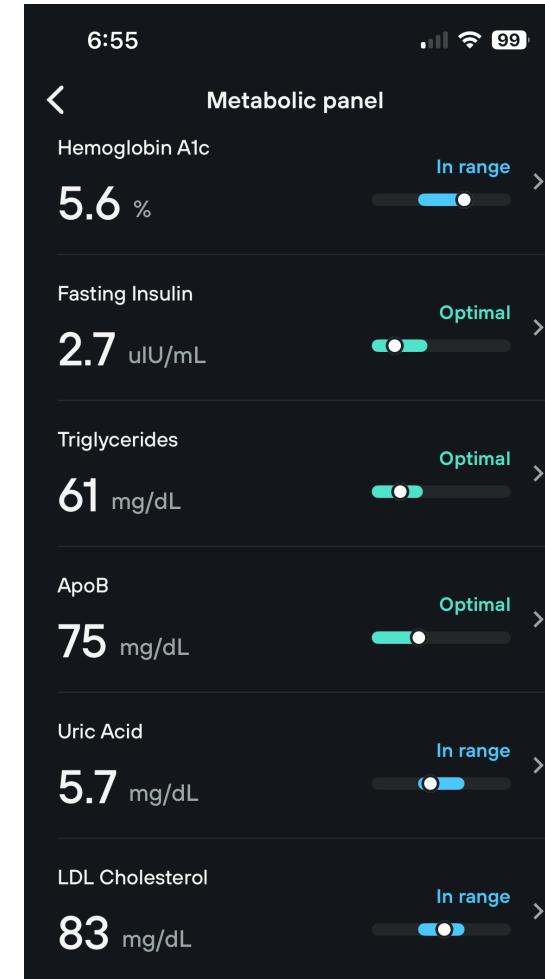
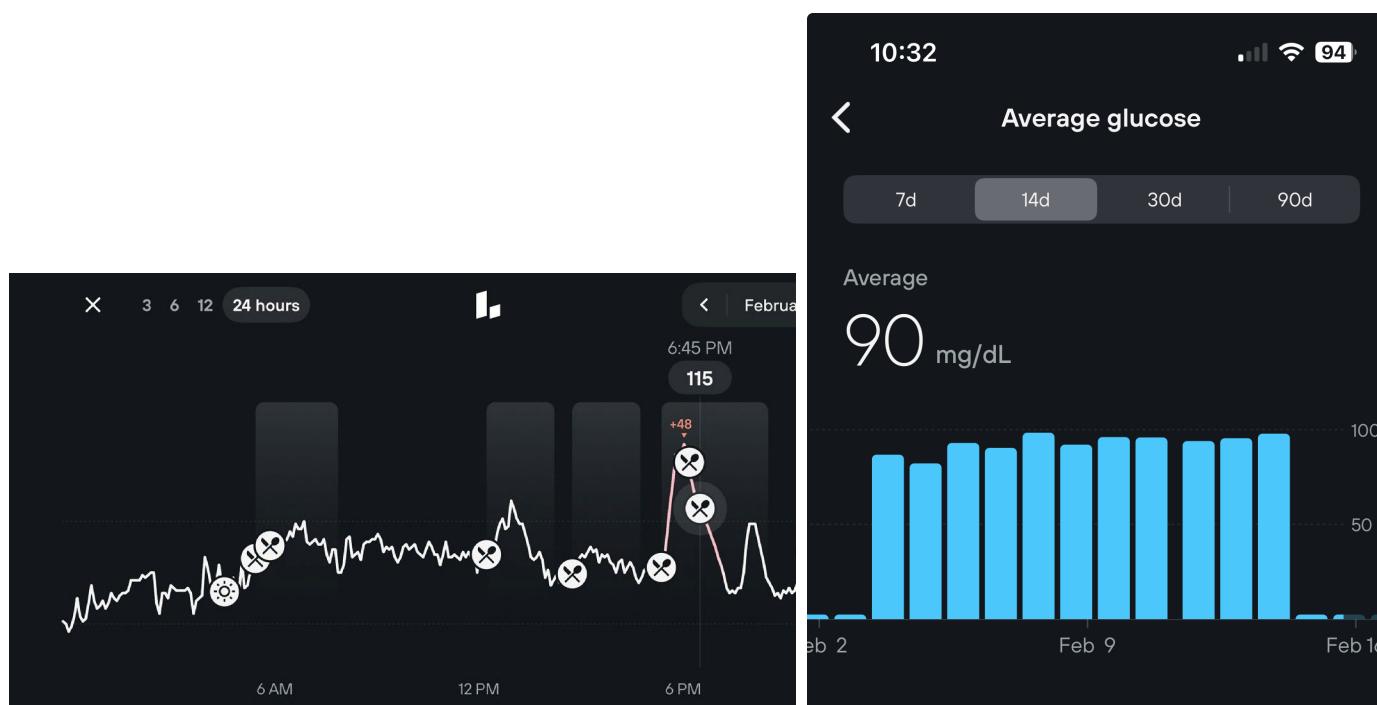
Hartford (Direct)	2022	2023	2024	2025	2026	5-Year Average
Life and Disability	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

Redefining “Healthy”



Determining whether someone is “Healthy” needs to be a data driven equation:

- Bio markers within an optimal range.
- Cellular and metabolic processes functioning normally
- Healthy microbiome
- The ability to get restful sleep on a regular basis
- Appropriate levels of energy





A Different Way Forward

Ignoring the inputs that drive disease and downstream costs has proven to be an ineffective strategy

Health Insurance
(Sick Care) Plan

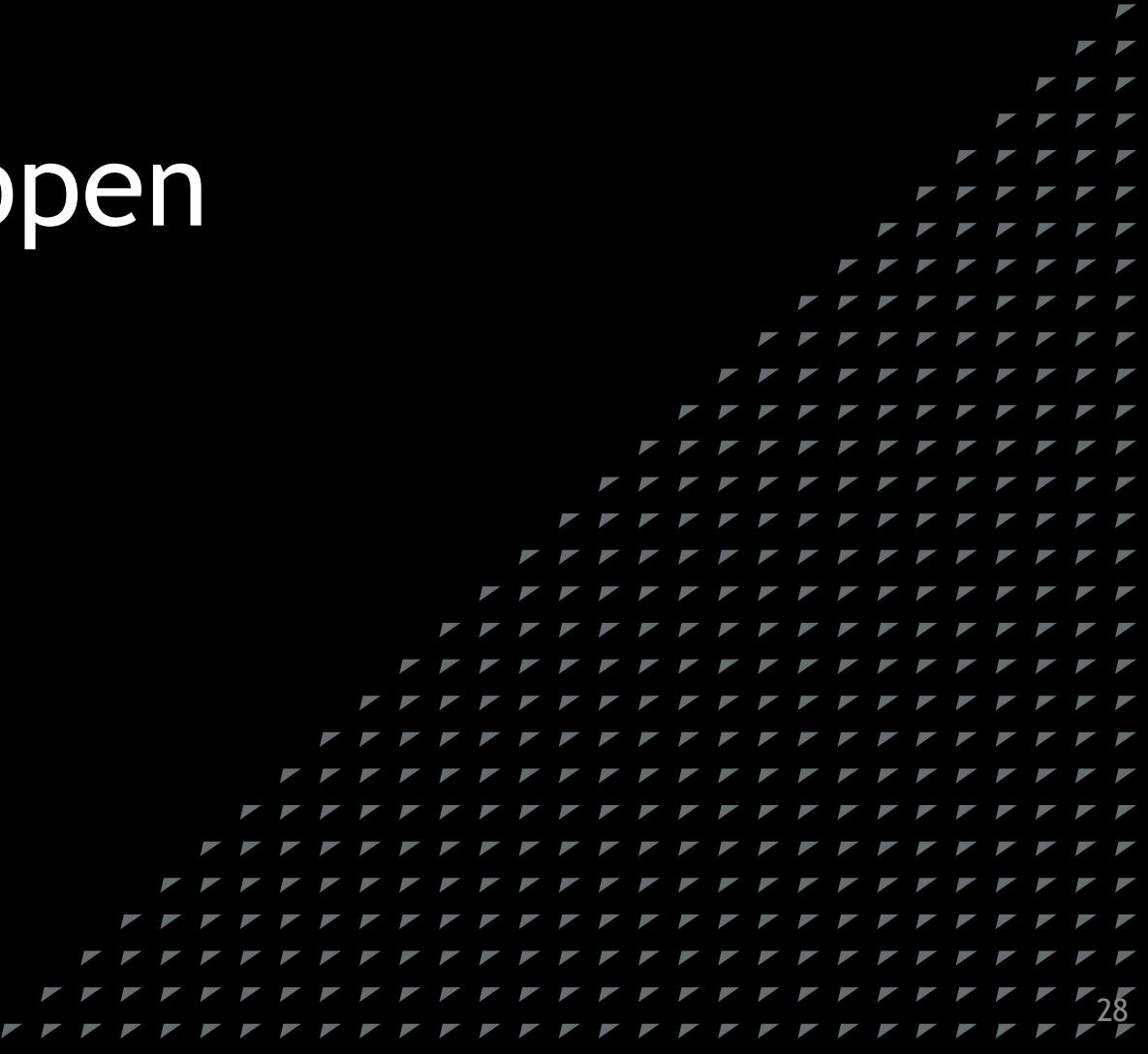


Health & Well-Being
Insurance Plan

PRISMHealth Future State Vision: Improve Population Health in order to lower costs and improve affordability

1. Get more data into people's hands so they can understand their biomarkers and be more informed, educated and empowered to take action to heal themselves and optimize their health
2. Give people resources to better understand their microbiome and unique biology and access to coaches/nutritionists to use a food as medicine approach to healing their bodies and reversing disease
3. Integrate functional medicine resources into the health plan to give employees access to providers who help identify root causes of disease and can provide tactics and support to reverse disease without lifetime medications

Why Change Will Happen



Why Change Will Happen

Alliant Insurance Services



Consumers are Listening and Adopting New Technology

Examples from Social Media

- Reconstructing Healthcare
- Peter Attia MD
- Andrew Huberman PhD
- Rhonda Patrick PhD



Examples of Wearable Technology

- Oura Ring
- Apple Watch
- Whoop
- Fitbit
- CGM



Why Change Will Happen: PRISM Personal Care Solutions

Alliant Insurance Services



Navigation			
Total Health Select			
Advocacy that creates a simple, intuitive, guided, and personalized experience for your employees			
			
Metabolic Conditions	Physical Therapy and Pain Management	Centers of Excellence	No cost medications - Voluntary Mail Order Program
Personalized care pathways tailored for each individual	Digital Health program for musculoskeletal injuries and pain management	Regional Centers of Excellence throughout the state	Over 1,300 Medications, no copays, no deductibles
Digbi provides data and resources to empower people to make meaningful changes in their lifestyle and diet regarding obesity, diabetes, digestive and autoimmune disorders - Coaches, Nutritionists, Digital Tools (photo uploads of meals with scoring, recipes, weight tracking, exercise tracking, educational content)	Care Teams get real time data from wearable sensors and computer vision that allow for insight into patient progress and need for coaching/support	Hip and Knee Replacement Spinal Fusion Surgery Multiple Spine Procedures Coronary Bypass Surgery Bariatric (Weight Loss) Surgery 80 Orthopedic Procedures Cancer Treatment	Members on a standard health plan will have access to over 1,300 maintenance and preventive medications. Members on an HSA/QHDHP plan may have access to 850 plus preventive medications



Last Words



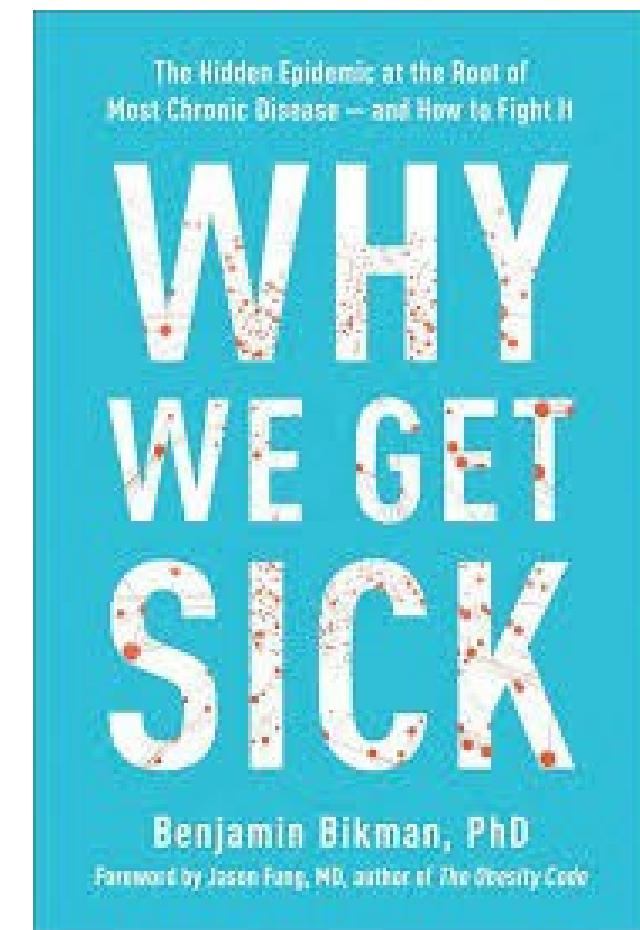
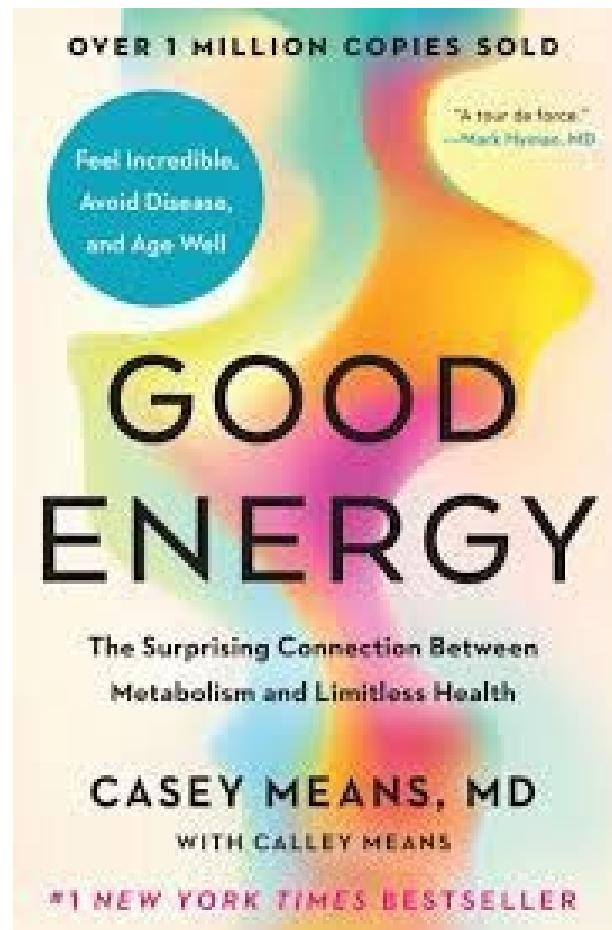
**Treating illness is expensive
Preventing it is priceless.**

**Your future health isn't about chance.
It's about choice.**



Additional Learning

Standard American Diet = Insulin Resistance which drives most of the illness and chronic disease in our country



Questions?

Alliant Insurance Services



**Interested in learning more?
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Thank You

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