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New Research from EBRI:
Who Has “Consumer-Driven” Health Plans?

WASHINGTON—Compared with those in traditional health plans, those in so-called “consumer-driven” health plans tend to have higher income, more education, and be in better health, according to a new analysis by the nonpartisan Employee Benefit Research Institute (EBRI).

Consumer-driven health plans (CDHPs) typically consist of health reimbursement arrangements (HRAs) or health savings accounts (HSAs). Today, about 26.1 million individuals with private insurance, representing 15 percent of the market, are either in a CDHP or an HSA-eligible plan.

Using data from EBRI surveys going back to 2005, a new EBRI report examines the population with a CDHP and how it differs from the population with traditional health coverage. Among its key findings:

- The population of adults within CDHPs, high-deductible health plans (HDHPs), and traditional health plans was split about 50–50 between men and women in 2013.
- In most years, CDHP enrollees were less likely than those with traditional coverage to be between the ages of 21 and 34.
- The CDHP population were more likely to be in households with $100,000–$149,999 in income in most years of the survey.
- CDHP enrollees were roughly twice as likely as individuals with traditional coverage to have college or post-graduate educations in nearly all years of the survey.
- CDHP enrollees have consistently reported better health status than traditional-plan enrollees, exhibiting better health behavior than traditional-plan enrollees with respect to smoking and (except for 2010 and 2011), exercise, and sometimes obesity rates.
- In the earlier years of the survey (2005–2009), the CDHP population was more likely than the population with traditional coverage to have that coverage through small employers (between two and 49 employees), though more recently (2010–2012), there were no statistically significant differences by employer size between the CDHP population and that of the population with traditional coverage.
- In 2013 the CDHP population was more likely than the population with traditional coverage to have coverage through an employer with 500 or more employees.
“While it is very difficult to generalize the differences in characteristics among CDHP enrollees, HDHP enrollees, and individuals with traditional coverage, a few differences stand out,” said Paul Fronstin, director of EBRI’s Health Research and Education Program and author of the report. “CDHP enrollees have consistently reported better health status than traditional-plan enrollees, and HDHP enrollees have also been consistently less likely than those with traditional coverage to report that they smoke, but no recent differences were found in exercise rates, and differences have never been found in rates of obesity. However, it cannot be determined from the survey whether plan design had an impact on health status, smoking, exercise, or obesity rates, or whether those attributes influenced plan choice.”


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