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New Research from EBRI:
High-deductible, Consumer-Driven Health Plans Continue Growing

WASHINGTON—So-called “consumer-driven” health plans with high deductibles are continuing to gain market share in the United States, and are having the intended effect of making people more involved in their own health care, according to new findings by the nonpartisan Employee Benefit Research Institute (EBRI).

The latest Consumer Engagement in Health Care Survey (CEHCS) by EBRI and Greenwald & Associates finds that a steadily growing share of Americans with health coverage are in consumer-driven health plans (CDHPs), which are associated with a high-deductible health plan (HDHP), a health savings account (HSA), or health reimbursement arrangement (HRA).

And with more employers increasing their contributions to health savings accounts, more than half of CDHP enrollees have now opened an HSA. EBRI also finds people in these types of plans are significantly more likely than those in traditional managed-care health plans to show cost-conscious behavior, such as checking in advance the cost of a procedure and whether it’s covered by insurance, asking for generic (rather than brand-name) drugs, and participating in wellness programs.

“This survey found that high deductibles are associated with new behaviors often encouraged by employers and insurers,” said Paul Fronstin, director of EBRI’s Health Research and Education Program and co-author of the report. “CDHP enrollees and HDHP enrollees were more likely than traditional-plan enrollees to report that they tried to find cost information. They are also more likely to participate in wellness programs.”

Among the highlights of the 2016 CEHCS:

- **Health plans with high deductibles are increasingly common.** Fourteen percent of privately insured adults were enrolled in a CDHP—a health plan associated with a health savings account (HSA) or health reimbursement arrangement (HRA); 14 percent were also enrolled in a high-deductible health plan (HDHP)—a plan with a deductible of $1,300 or higher for single coverage; $2,600 for family coverage—not linked to an HSA or HRA; and 73 percent were enrolled in more traditional coverage. Among individuals with traditional coverage, a growing number have the option to choose a CDHP. Those who choose a CDHP are also remaining enrolled for a longer time.

- **More than half (56 percent) of CDHP enrollees opened an HSA, taking advantage of growing employer contributions.** Among individuals enrolled in CDHPs, 56 percent (16.3 million) opened
Consumer behaviors are linked to CDHP enrollment. Adults in a CDHP and those in an HDHP were more likely than those in a traditional plan to exhibit a number of cost-conscious behaviors. For example, those in a CDHP were more likely to say that they had checked whether the plan would cover care (54 percent CDHP vs. 44 percent traditional); asked for a generic drug instead of a brand name (48 percent CDHP vs. 37 percent traditional); and that they had used an online cost-tracking tool provided by the health plan (31 percent CDHP vs. 20 percent traditional). CDHP and HDHP enrollees were also more likely than traditional-plan enrollees to report that they tried to find cost information before getting care. Nearly one-half of HDHP enrollees, and 43 percent of CDHP enrollees searched for the cost information, compared with 32 percent among traditional-plan enrollees.

CDHP enrollees are part of a robust health program strategy. Individuals enrolled in CDHPs were more likely than those enrolled in HDHPs or with traditional coverage to report that they had a choice of health plans. Two-thirds of CDHP enrollees had a choice of health plan, compared with 59 percent among both HDHP enrollees and traditional plan enrollees. CDHP enrollees were more likely than traditional-plan enrollees to report that they participated in biometric screening programs when offered: Over 80 percent of CDHP enrollees participated, compared with 64 percent among traditional-plan enrollees.


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