Workers May Need Employer Help With “Consumer-Driven” Decisions

Consumer-directed health plans (CDHP) are designed to help employees make more cost- and health-conscious decisions, but they may need more help from employers to do so.

New research by the nonpartisan Employee Benefit Research Institute (EBRI) found that while there were fewer office visits and prescriptions filled by employees covered by a CDHP, cancer screening also declined in the first year of the CDHP introduction—and emergency room usage eventually increased.

The report suggests that employers should consider providing periodic, ongoing communications to enrollees regarding services that are exempted from the deductible, as well as monitoring the use of recommended preventive services in order to address nonuse that is not attributable to factors such as changes in eligibility.

The research, which was published in June 2013 issue of Health Affairs, used data from two large employers—one that adopted a health savings account (HSA) plan for all of its employees in 2007, and another that didn’t.

The theory behind CDHPs is that as participants are exposed to a high deductible before insurance benefits are triggered, enrollees will be induced to make better health care use decisions, such as not going to an emergency department when a visit to a physician would suffice. Although usually offered alongside more traditional health plan designs, CDHPs are slowly increasing as employers’ only health insurance offering.

The research findings are published in the June 2013 issue of Health Affairs, and can be accessed online here.

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