Do Consumer-Driven Health Plans Drive Behavior Change?

Employers have also long been interested in bringing aspects of consumer engagement into health plans as a means to help control health care spending and costs. But the question remains – do these plans actually change behaviors?

The 2013 EBRI/Greenwald & Associates Consumer Engagement in Health Care Survey (CEHCS), finds evidence that adults in a those programs were, in fact, more likely than those in a traditional health plan to exhibit a number of cost-conscious behaviors.

The theory behind account-based plans and plans with higher deductibles is that the cost-sharing structure will be more likely to engage individuals in their health care spending and selection, compared with those enrolled in more traditional coverage. The survey found that among privately-insured adults ages 21–64 who received health care in the past 12 months, those in a consumer-driven health plan (CDHP) and those in a high-deductible health plan (HDHP) were more likely than those with traditional coverage to say that they had (among other things):

- Checked whether the plan would cover care (57 percent CDHP and 49 percent HDHP vs. 39 percent traditional).
- Asked for a generic drug instead of a brand name (50 percent CDHP and 47 percent HDHP vs. 37 percent traditional).
- Talked to their doctors about other treatment options and costs (36 percent CDHP and 33 percent HDHP vs. 26 percent traditional).
- Asked a doctor to recommend less costly prescriptions (38 percent CDHP and 36 percent HDHP vs. 27 percent traditional).
- Checked the price of a service before getting care (39 percent CDHP and 33 percent HDHP vs. 26 percent traditional).

“Findings from the 2013 EBRI/Greenwald & Associates Consumer Engagement in Health Care Survey” can be found in the December 2013 EBRI Issue Brief online here.

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