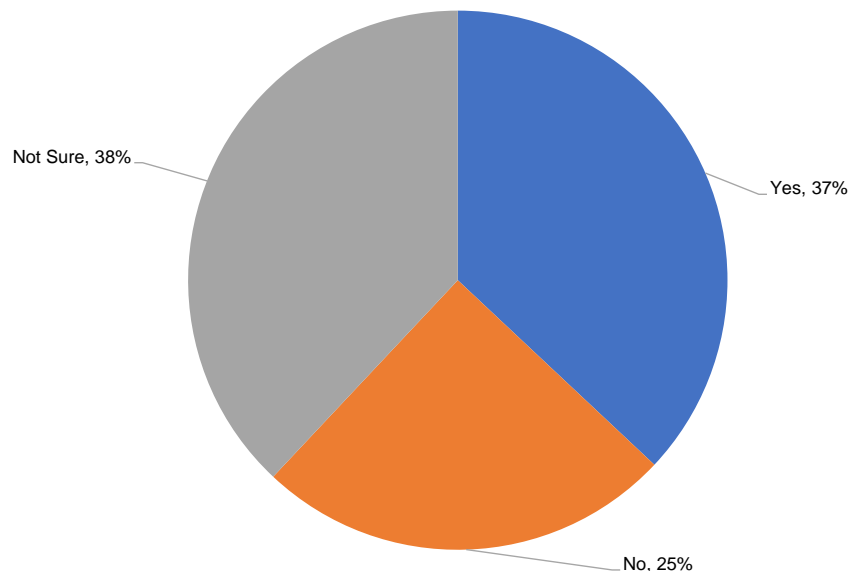


Pre-Deductible Coverage for Chronic Conditions Is an Enrollment Incentive

The Employee Benefit Research Institute (EBRI) and Greenwald Research [Consumer Engagement in Health Care Survey](#) found that 37 percent of high-deductible health plan (HDHP) enrollees report that their health plan covers preventive care for at least one of 14 services as allowed under IRS Notice 2019-45 before the deductible is met (Figure 1).

Figure 1
Health Plan Covers Preventive Care for Certain Chronic Conditions Before Reaching Deductible
(Among HDHP Enrollees)



Source: EBRI/Greenwald Research Consumer Engagement in Health Care Survey, 2022.

IRS Notice 2019-45

IRS Notice 2019-45 allows health savings account (HSA)-eligible health plans the flexibility to cover 14 medications and services used to prevent the exacerbation of chronic conditions prior to meeting the plan deductible. The U.S. Department of Treasury issued the guidance on July 17, 2019, to further increase the flexibility of HSA-eligible health plans to cover specific low-cost preventive services to prevent the exacerbation of chronic conditions on a pre-deductible basis.¹

Figure 2
Chronic Disease Management Services in the Expanded Safe Harbor

Preventive Care Service	For Individuals Diagnosed With
Angiotensin-converting enzyme (ACE) inhibitors	Congestive heart failure, diabetes, and/or coronary artery disease
Antiresorptive therapy	Osteoporosis and/or osteopenia
Beta blockers	Congestive heart failure and/or coronary artery disease
Blood pressure monitor	Hypertension
Inhaled corticosteroids	Asthma
Insulin and other glucose-lowering agents	Diabetes
Retinopathy screening	Diabetes
Peak flow meter	Asthma
Glucometer	Diabetes
Hemoglobin A1c testing	Diabetes
International normalized ratio (INR) testing	Liver disease and/or bleeding disorders
Low-density lipoprotein (LDL) testing	Heart disease
Selective serotonin reuptake inhibitors (SSRIs)	Depression
Statins	Heart disease and/or diabetes

Source: <https://vbidcenter.org/initiatives/hsa-high-deductible-health-plans-2/>

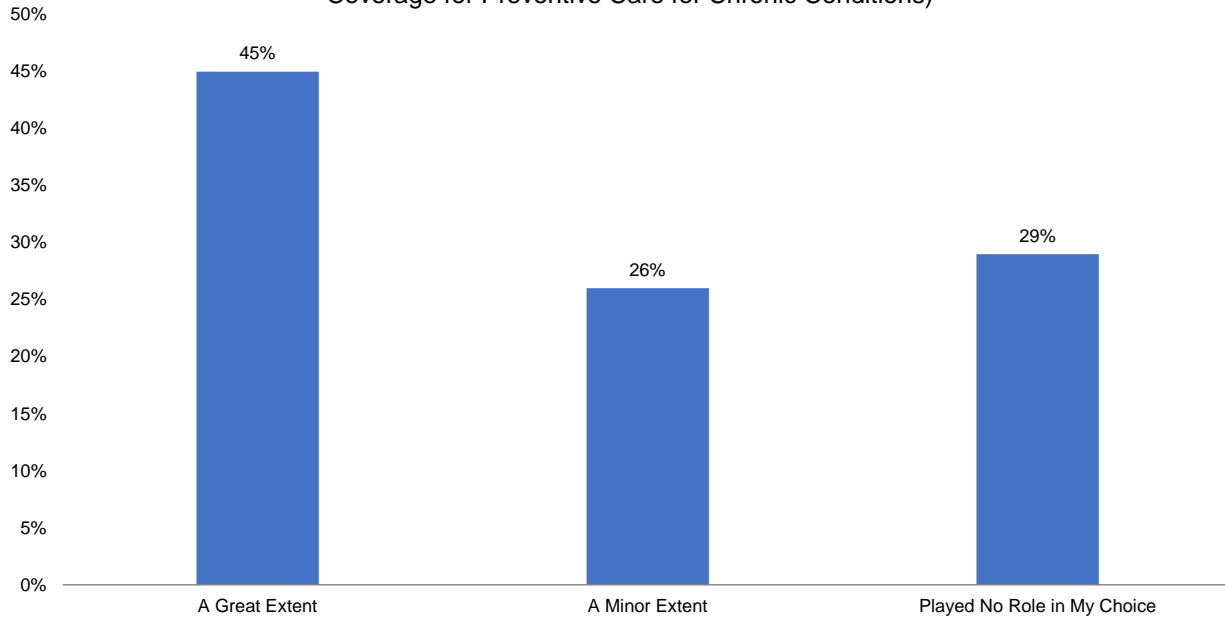
With IRS Notice 2019-45 in place, all HSA-eligible health plans are now able to adopt a more flexible benefit design offering more protection for certain medical services through a value-based insurance design (V-BID) plan structure.

Among HDHP enrollees with coverage for preventive care for chronic conditions prior to meeting the plan deductible, a significant number reported that it impacted their decision to choose the HDHP. Nearly one-half (45 percent) reported that coverage for preventive care for chronic conditions impacted their decision to select the HDHP to a great extent, while another one-quarter (26 percent) reported that it impacted their decision to a minor extent (Figure 3).

Among traditional plan enrollees, there is notable interest in HDHPs that cover preventive care for chronic conditions before the deductible was reached. One-quarter reported that they would be extremely or very likely to select an HDHP if it covered preventive services for chronic conditions. Another 39 percent reported that they are somewhat likely to choose such a plan (Figure 4).

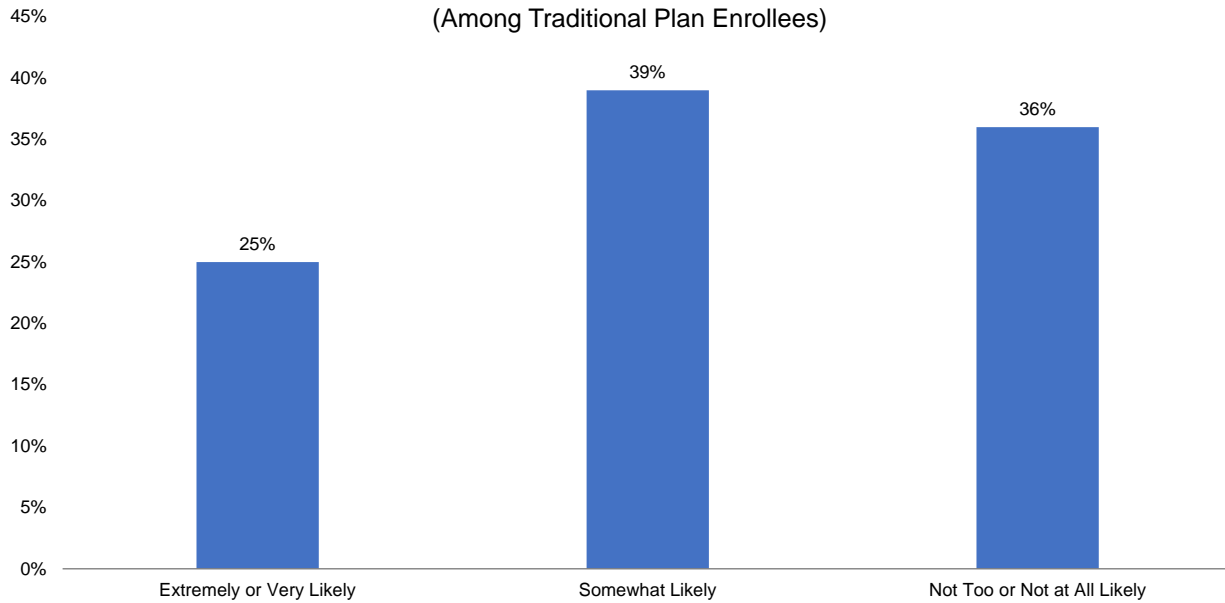
¹ See <https://www.irs.gov/pub/irs-drop/n-19-45.pdf>.

Figure 3
Extent to Which Coverage of Preventive Care for Chronic
Conditions Impacted Decision to Select Chosen Health Plan
 (Among High-Deductible Health Plan (HDHP) Enrollees With
 Coverage for Preventive Care for Chronic Conditions)



Source: EBRI/Greenwald Research Consumer Engagement in Health Care Survey, 2022.

Figure 4
Likelihood of Selecting High-Deductible Health Plan (HDHP)
If It Covered Preventive Care for Chronic Conditions
Before Deductible Was Reached
 (Among Traditional Plan Enrollees)



Source: EBRI/Greenwald Research Consumer Engagement in Health Care Survey, 2022.

More information about the EBRI/Greenwald Research Consumer Engagement in Health Care Survey can be found [online](#).

The 2022 Consumer Engagement in Health Care Survey was an online survey of 2,015 Americans ages 21–64 with private health insurance coverage. It was fielded in October and November of 2022. The survey is made possible with funding support from the following organizations: Blue Cross Blue Shield Association, HealthEquity, Millennium Trust Company, Segal, TIAA, UMB Financial, and Voya Financial.

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