Promoting consumerism in health care is the latest big idea in health insurance in the United States. One of the leading manifestations of this is the Consumer-Driven Health Plan (CDHP), now being made available by most health insurers. Most employers are interested in the long-term prospects for improved cost control that CDHP might provide, but they await evidence that the plan will succeed in controlling costs, and they are concerned about potential adverse effects on the use of preventive care and other health care services. They also fear that employees will consider a move to CDHP as a cut in benefits, resulting in increased turnover or low morale.

Despite a high level of media coverage for this new product family, which includes Health Savings Accounts (HSAs) or Health Reimbursement Arrangements (HRAs) paired with a high deductible insurance plan, national incidence of individuals who have opted for CDHP remains low.

The results from the second annual national survey on the growth of CDHP and its impact on the behavior and attitudes of health care consumers will be released at this policy forum. Reaction to the survey findings will be provided by plan sponsors, insurers, providers, and others.

I. Welcome
   - Dallas Salisbury, Employee Benefit Research Institute
   - Karen Davis, The Commonwealth Fund

II. Findings from the Second Annual Consumerism in Health Care Survey
   - Paul Fronstin, Employee Benefit Research Institute
   - Sara Collins, The Commonwealth Fund

III. Reaction from Insurers and Providers
   - James Bentley, American Hospital Association
   - Karen Atwood, Blue Cross Blue Shield Illinois

IV. Reaction from Employers, Consultants, and Taft-Hartley Plans
   - Jeff Munn, Hewitt Associates
   - Barbara Gniewek, Deloitte Consulting
   - Steve Barger, Kentucky State District Council of Carpenters Health & Welfare, Pension and Annuity Trust Funds

V. Summary and Final Reaction Panel
   - Joe Antos, American Enterprise Institute
   - Jon Gabel, Center for Studying Health System Change