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New Research from EBRI:

Consumer-Driven Health Plans Show More Patient Involvement in Their Health Care

WASHINGTON—People enrolled in so-called “consumer-driven” health plans are more involved in their health care, according to a new report from the nonpartisan Employee Benefit Research Institute (EBRI).

According to the 2014 EBRI/Greenwald & Associates Consumer Engagement in Health Care Survey (CEHCS), about 15 percent of the U.S. population, representing 26 million individuals with private insurance, is currently enrolled in a consumer-driven health plan (CDHP). About 11 percent was enrolled in a high-deductible health plan (HDHP), and 74 percent was enrolled in more traditional health insurance coverage.

Consumer-driven health plans are a combination of health coverage with high deductibles (at least \$1,250 for individual coverage in 2014) and tax-preferred savings or spending accounts that workers and their families can use to pay their out-of-pocket health care expenses. A handful of employers first started offering CDHPs in 2001 with HRAs and in 2004 employers were able to start offering health plans with HSAs. In 2014, about 26 million individuals with private insurance were enrolled in a CDHP.

The 2014 CEHCS finds that CDHP enrollees were more cost conscious in their decision making than those in traditional plans. CDHP enrollees were more likely to use resources to pick their health plan and more likely to use cost information before getting health care services. CDHP enrollees were more likely than traditional-plan enrollees to take advantage of various wellness programs, such as health-risk assessments, health-promotion programs, and biometric screenings. In addition, financial incentives mattered more to CDHP enrollees than to traditional-plan enrollees.

“The data show that CDHP enrollees are more likely than traditional-plan enrollees to take advantage of various wellness programs, such as health-risk assessments, health-promotion programs, as well as biometric screenings,” said Paul Fronstin, director of EBRI’s Health Education and Research Program and co-author of the report. “It’s also clear that financial incentives matter more to CDHP enrollees than they do to traditional-plan enrollees.”

Other findings in the 2014 CEHCS:

- Among individuals enrolled in CDHPs, 57 percent had a health savings account (HSA) or health reimbursement arrangement (HRA), while 43 percent were enrolled in HSA-eligible health plans but had not opened an account.
- 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. Specifically, those in a CDHP were more likely than those with traditional coverage to say that they had checked whether the plan would cover care; asked for a generic drug instead of a brand name; talked to their doctors about prescription options and costs; checked the price of a service before getting care; asked a doctor to recommend less costly prescriptions; talked to their doctors about other treatment options and costs; developed a budget to manage health care expenses; and used an online cost-tracking tool provided by the health plan.
- There is also some evidence that adults in a CDHP were more likely than those in a traditional plan to be engaged in their choice of health plan. Specifically, those in a CDHP were more likely than those with traditional coverage to say that they had attended a meeting where health plan choices were explained; consulted with their employer's human resources (HR) staff about health plan choices; and were more likely to have consulted with an insurance broker to understand plan choices.

The full report, "Findings from the 2014 EBRI/Greenwald & Associates Consumer Engagement in Health Care Survey," is published in the December *EBRI Issue Brief* and is available online at www.ebri.org

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