News From The Employee Benefit Research Institute

New Health Care Report of 2,000 Privately Insured Adults Surveyed in the United States Finds Confusion Regarding Basic Aspects of Health Plan Design

- Majority of Enrollees Use "Smart" Health Technology, but Desire Data Sharing with Doctors and Health Insurers –

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(Washington, D.C.) – The Employee Benefit Research Institute (EBRI) and Greenwald Research published top findings today from the 2024 Consumer Engagement in Health Care Survey (CEHCS). The new research report found that most health insurance enrollees do understand premium and deductible options but not prescription drug copays or maximum out-of-pocket limits. The survey also found that more than six in 10 enrollees either were currently using smart health technology or had used it in the past. However, two-thirds of the enrollees wished the data generated by this technology could be shared with their doctor and six in 10 with their health insurance company.

The CEHCS is a survey of privately insured adults that has been conducted annually since 2005. The survey provides reliable national data on the growth of high-deductible health plans (HDHP), consumer-driven health plans (CDHP) and health savings accounts (HSAs) — and the impact on the behavior and attitudes of health care consumers. The 2024 survey of 2,011 individuals was conducted from Oct. 24 to Nov. 25, 2024, and included respondents from ages 21 to 64 years old.

"Simply, I believe we see, via the new survey results, that health insurance enrollees are taking the minimum time to make their health plan decisions. More education is needed. While they are definitely taking advantage of new tech opportunities to make informed decisions, they also seem to need additional input from their health care providing team," explained Paul Fronstin, Ph.D., director, Health Benefits Research, EBRI.

Key findings in the 2024 survey include:

• Health Plan Knowledge Is Often Lacking — Most enrollees understand premiums and deductibles but not prescription drug copays or maximum out-of-pocket limits. Eighty-six percent understood that premiums are the amount paid for health insurance, regardless of using care, and 82% understood that the deductible is the amount you have to pay out-of-pocket before your plan begins to pay for care. HDHP enrollees were more likely than traditional plan enrollees to answer these questions correctly.

Confusion was noted among most surveyed regarding prescription copays. Only about one in four enrollees knew that the amount is not the same for all groups of prescriptions. There also was confusion about out-of-pocket maximums. When it comes to knowledge about HSAs and HDHPs, enrollees were more likely to understand HSAs, though overall knowledge remained low (32% correctly answered at least three out of four statements vs. 22% of traditional plan enrollees).

- Satisfaction with Various Aspects of Health Care Is High, Out-of-Pocket Costs Drives Satisfaction Down While nearly two-thirds of the enrollees were extremely or very satisfied with their health care, only 10% were not too or not at all satisfied. Satisfaction with the choice of doctors and the quality of health care received were also high, with seven in 10 being extremely or very satisfied. To the degree that enrollees were not satisfied with their health plan, it appeared to be driven by costs. Fourteen percent of the enrollees were not too or not at all satisfied with the cost paid out of pocket for prescription drugs, and 21% were not satisfied with the cost paid out of pocket for other health care.
- Smart Health Tech Is Popular, but Enrollees Want Data Sharing with Health Providers Sixty-two percent of enrollees have used smart health technology, such as an application for the phone, wearable device or other technology that includes the ability to sense or track activity for the purposes of managing health, either currently or in the past. Over four in 10 enrollees reported currently using smart health technology, and HDHP enrollees were more likely to be using it than traditional plan enrollees. Just over one-third of enrollees had never used smart health technology. Three-quarters agreed that smart health

technology has made it easier to access care, but two-thirds wished their data could be shared with their doctor and six in 10 with their health insurance company.

- Health Savings Accounts Used in a Variety of Ways Over one-half (56%) of individuals reported opening their HSA to save on taxes. Similarly, 53% opened their HSA to save for future health care expenses and 52% to take advantage of employer contributions. While 36% viewed the account as an investment account, 19% viewed the account as a checking account. Most (66%) viewed the HSA as a savings account. Two-thirds reported using the account to pay out-of-pocket expenses incurred this year or in the near term. Only 39% said they are using it to save for health care expenses in retirement and 38% reported using it to minimize taxes or to reduce taxable income.
- Open Enrollment Most enrollees spent less than two hours deciding on their health plan during open enrollment. One-half spent less than one hour and three in 10 spent less than 30 minutes. One-half of enrollees reported using annual employee benefits guides to help them decide. Just over one-half of HDHP enrollees used the same resource (down from nearly two in three last year). HDHP enrollees were more likely to use their employee benefits online portal than traditional plan owners. Enrollees were also highly satisfied with various aspects of the open enrollment process. About 90% were satisfied with the overall process the time they had to select a plan, materials provided, paperwork, and the person presenting the information during open enrollment.
- Sources of Health Coverage Most people with private health insurance reported getting their coverage through their own job (61%) or through a spouse's job (20%). Only 19% said they get it directly either from a health insurance carrier (11%) or from a government exchange (8%). Few individuals with private health insurance said they have had their plan for less than one year (10%). One-half reported having had it for one to two years (23%) or three to four years (28%).

Enrollment in HSA-eligible health plans and health reimbursement arrangements appears to have leveled off. Enrollment in health plans with high deductibles that were not eligible to be paired with an HSA continued to fall, reaching 8% in 2024, after having reached 15% in 2020. One-half (53%) of traditional plan enrollees were offered an HDHP in 2024.

"Though satisfaction with open enrollment is high, there is an opportunity for employers to better educate their employees on their plan choices. The bottom line here is that health plan knowledge is generally low and employees do not spend much time making these decisions," said Sara Rubinstein, director, Healthcare, Greenwald Research.

To view the 2024 CEHCS summary report, visit https://www.ebri.org/health/ebri-greenwald-consumer-engagement-health-care-survey.

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(Media Note: To receive the complete summary survey report, email Ron Dresner at dresner@ebri.org)