

RAND analysis shows more work needed to engage consumers after enrolling in health insurance plans

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Enrolling in an insurance plan under the Affordable Care Act is only the first step for consumers to be actively engaged in their health care, according to a new analysis from RAND Corporation researchers.

To understand the issues facing consumers as well as the payers, providers and support organizations who work directly with them, RAND researchers conducted phone-based interviews with [insurance companies](#), physician groups and community support nonprofit organizations. The analysis of the interviews shows more work is necessary to support consumers past the point of enrollment.

"We know millions of previously uninsured people have been enrolled into insurance plans," said Laurie Martin, lead author of the report and a senior policy researcher at RAND, a nonprofit research organization. "Achieving the long-term goals of the Affordable Care Act related to improved population health and lower [health care](#) costs are going to require more work."

The phone interviews were conducted with stakeholders in four states: Connecticut, Kentucky, Texas and Washington. The states chosen had diverse populations, geographies and policies with respect to [health insurance reform](#).

The conversations revealed four steps consumers must go through to

fully participate in their own health care, including: apply for coverage and select a plan that is right for them; gain coverage and understand the plan benefits; find a provider and access care; and engage in care over time.

The study found that low health literacy continues to be a barrier. Many consumers still struggle with the complexity of [health insurance](#) terminology, which results in confusion regarding the difference between the subsidy/tax credit, the monthly premium, copays, coinsurance, deductibles, in-network and out-of-network, and what this means for consumers' out-of-pocket costs, according to the analysis.

With potentially long lag times between applying for coverage and receiving an insurance card, consumers are not sure when their coverage takes effect or what to do if they need medical attention before receiving proof of insurance.

Once insured, consumers face challenges in finding a primary care doctor because of shortages of both primary care and specialty physicians, as well as providers not accepting new patients.

Martin and co-author Jill E. Luoto note it is not enough to simply identify a primary care doctor. Consumers must actually go to the doctor for primary and preventive care services in order to reap the benefits of timely care. But, there are fewer activities to support consumers at this step and the interview responses indicate there is also not a strong appreciation for the value of regular check-ups for staying healthy and preventing more serious illnesses.

"Many newly insured consumers have a long history of seeking medical care at emergency departments or [urgent care centers](#)," Martin said. "We know it will require a collaborative and multi-faceted approach to ensure that [consumers](#) are able to seek needed care in a setting that is most

appropriate for their medical needs."

More information: www.rand.org/pubs/perspectives/PE158.html

Provided by RAND Corporation

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