

Health Literacy Month: What Consumers Should Keep Top of Mind About Their Health Coverage

Health Literacy Month is the perfect time for the many Americans who are increasingly alarmed about rising health costs to better understand insurance policies and billing procedures that can inflate costs – like surprise medical bills, coverage denials and reduced prescription cost sharing benefits – and identify a few ways to mitigate some of these issues.

Whether your health insurance is through your employer, Healthcare.gov, Medicare or another source, open enrollment season is right around the corner, marking the one opportunity you have each year to review and change your coverage. Here are three issues you should be on the lookout for now and throughout the year:

1. **Surprise Medical Bills:** Studies show that more than half of Americans say they have received a medical bill in the past year for a cost they thought was covered by their health insurance. Many of these surprise bills result from “balance billing” for treatment at in-network facilities by out-of-network providers, while others result from a lack of customer understanding of complex health benefits and opaque pricing.

What You Can Do: *Understand what your insurance will and will not cover, be diligent in reviewing bills and explanations of benefits for errors and report them, and support state and federal legislation aimed at helping consumers avoid surprise medical bills.*

2. **Emergency Department Policies:** Some insurers are instituting policies that would force policy-holders to pay for an emergency room visit if they later deem it a non-emergency, meaning patients will likely delay or go without emergency care rather than risk getting a surprise medical bill.

What You Can Do: *Note which insurance companies are implementing this policy and in which states. If you select a policy with this plan in place and encounter issues with emergency department coverage, many of the affected states have established hotlines through their insurance commissioners to file complaints.*

3. **Accumulator Adjustment Programs:** Patients are increasingly having a difficult time taking advantage of cost-sharing coupons that help them afford their prescription drugs. In some cases, plans are no longer counting the coupons towards patients’ deductible or cap on total out-of-pocket costs.

What You Can Do: *If you currently use a coupon to help pay for your prescription drugs and have a choice of insurance plans, you should contact your insurer or the human resources department at your employer to find out if you will face any restrictions.*

It is important to note that Healthcare.gov and the state marketplaces are open for enrollment from Nov. 1 to Dec. 15, 2018. No matter what type of insurance you have, make sure you shop around to find the best health plan for you and your family.

To learn more, visit www.consumers4qualitycare.org/healthliteracy