Health Literacy Month 2019: Consumer Health Care Horrors

This October, Consumers for Quality Care (CQC) is working to educate consumers about the Health Care Horrors they need to be on the lookout for throughout the year and particularly as open enrollment quickly approaches.

October is Health Literacy Month and CQC conducted a survey with Morning Consult to find out just how well consumers understand what their health insurance covers. What we found is frightening. Only 51% of respondents say they understand what their insurance covers for the most common of medical events – a routine doctor visit – very well. That number drops precipitously as we explore other types of insurance uses.

Whether your health insurance is through your employer, Healthcare.gov, Medicare or another source, open enrollment season is upon us, 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:** Hospital care is the single largest component of national health care spending. We expect that our health care premiums will cover most of our hospital costs, but according to the CQC/Morning Consult survey, at least 35% of Americans say they or a loved one has received a surprise medical bill.

What You Can Do: Medical bills often contain mistakes, so it's important to review bills closely. Also, watch out for out-of-network providers serving at in-network facilities. Finally, you're your lawmakers to support legislation to address surprise bills at the state and federal levels.

2. **Short-Term Limited Duration Health Insurance:** STLDI plans can exclude coverage for preexisting conditions, have dollar value limits on covered services, are not required to cover preventive services, and have a host of other substantial risks for consumers. Last year, the Trump administration issued a rule expanding the maximum period for which STLDI plans can be offered, causing these barebones plans to proliferate.

What You Can Do: While bare-bones STLDI plans may appear less expensive, we urge consumers to steer clear of these plans that can leave patients with large surprise bills for uncovered care. These policies can be complex, but it is important to read the fine print and consider your options carefully.

3. **Accumulator Adjustment Programs:** Many Americans, particularly those with chronic diseases, rely on medicines to manage their conditions. With copay adjustment – or accumulator adjustment – programs, insurers no longer allow drug cost sharing coupons to count towards patients' deductibles or caps 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. If your plan limits your ability to use a coupon to help pay for your prescription medications, you should file an appeal with your insurance company and speak up about how harmful accumulator adjustment programs can be by contacting your state insurance commissioner.

It's important to note that Healthcare.gov and the state marketplaces are open for enrollment from Nov. 1 to Dec. 15, 2019. No matter what type of insurance you have, make sure you shop around to find the best health plan for you and your family.

Americans are fed up with the lack of transparency and the lack of certainty around costs. The vast majority – 87% – agree that insurance should work like insurance again and actually cover people when they get sick. ***See the Morning Consult/CQC Survey*** *to learn more about what frustrates consumers about their health care and industry and legislative solutions they believe can help.*