



Health Literacy – What to Look for When Selecting a Health Insurance Plan

COVID-19 has had a significant impact on our health care system, and as we begin to move beyond the pandemic, many insurers are changing their coverage options. October is Health Literacy Month, and Consumers for Quality Care wants to educate Americans about what to look for when selecting coverage ahead of Open Enrollment.

COVID-19 Coverage Changes

For more than a year, consumers have come to rely on their insurance covering COVID-19 testing and treatment at no cost. Now, however, nearly three quarters of the largest health plans across the country are ending their COVID-19 waivers and even more are set to end imminently. Telehealth has also become a lifeline for many Americans during the pandemic, with 70% saying they are likely to continue using it after the pandemic ends, but insurers are making it harder to access this increasingly important service by rolling back coverage even as COVID cases are back on the rise.

High deductibles, rising out-of-pocket costs, and unpaid medical bills are plaguing health care consumers and 20% of Americans have medical debt in collections. Ending these COVID-19 coverage protections at a time when the nation continues to reel from the pandemic and health care costs are already increasing is misguided and will only make these burdens worse.

What You Can Do: When selecting the insurance that is right for them and their families, consumers should watch out for any changes to COVID-19 coverage, including telehealth. You can also urge your legislators to ensure COVID testing and treatment continues to be covered.

Pre-Existing Conditions

Short-Term Limited-Duration 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. With an estimated one-third of COVID survivors identified as having lasting effects from the virus, even more consumers choosing these junk plans could find themselves without insurance coverage when they most need it. As millions of Americans are searching for low-cost coverage options amid unprecedented income losses, these dangerous plans are becoming even more popular.

What You Can Do: While barebones 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. Until lawmakers eliminate these plans from the market, consumers should be very cautious and read the fine print before purchasing a STLDI, which typically have lower premiums, especially if they had COVID-19.

Surprise Bills

Surprise billing is a major problem impacting consumers. Even when they do their due diligence and choose hospitals and providers that are in-network, getting treatment often comes with the risk of getting a large unexpected bill. Legislation passed in December 2020 will protect Americans from surprise billing beginning January 2022, and with at least 35% of voters saying they or a loved one has received a surprise medical bill, this relief couldn't come soon enough. However, details of how this law will be implemented are still in progress.

What You Can Do: As details of the surprise billing legislation are worked out, consumers should be wary and check bills closely to ensure that you are not being charged for out-of-network providers at in-network facilities. If you receive a surprise medical bill, you can contact your state insurance commissioner.