

2020 Consumer Engagement in Health Care Survey



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2020 CEHCS Overview

16th Annual Consumer Engagement in Health Care Survey

The Consumer Engagement in Health Care Survey (CEHCS) is a survey of privately insured adults conducted by the Employee Benefit Research Institute (EBRI) and Greenwald Research, an independent research firm. The survey has been conducted annually since 2005. The CEHCS provides reliable national data on the growth of consumer-driven health plans and high-deductible health plans and their impact on the behavior and attitudes of health care consumers.

The 2020 survey of 2,032 individuals was conducted using Dynata's online research panel between July 28th and September 11th, 2020. All respondents were between the ages of 21 and 64.

The national sample is weighted by gender, age, income, ethnicity, education, and region to reflect the actual proportions in the population. The consumer-directed health plan (CDHP) and high-deductible health plan (HDHP) samples are weighted by gender, age, income, and ethnicity.

2020 CEHCS Funders

Blue Cross and Blue Shield Association

Conduent HR

HealthEquity, Inc.

National Rural Electric Cooperative Association

Prudential Financial

Segal

TIAA

UMB Financial

Voya Financial

Key Findings

Despite the Risk of Exposure to COVID-19, Willingness to Receive Vaccination Rate Is Modest


Only 55 percent of adults with private health insurance were willing to receive a vaccine against COVID-19 when it is released. One-quarter were not willing to receive the vaccine, 9 percent report that “It Depends,” and 12 percent were not sure.

Most (89 percent) respondents thought that their insurance should cover the full cost of the vaccine. However, one-half were willing to pay \$100 or less to receive the vaccine, and 28 percent were willing to pay more than \$100.

Lower Use of Health Care Services

Use of health care services dropped considerably because of the pandemic, with 1 in 5 reporting that they or a family member delayed medical care as a result of COVID-19. Many individuals did expect delayed health care to be rescheduled in 2020 or 2021. Nearly one-half (48 percent) reported that care has been or will be rescheduled for 2020, and 31 percent reported that care has been or will be rescheduled for 2021. However, 19 percent reported that they will not reschedule the procedure, raising questions about whether that care was necessary or whether such lack of care might be harmful to individuals.

These findings may be due to the timing of the survey. In late July to early September 2020, COVID cases had just peaked and were in decline. With the surge in COVID cases in recent weeks, combined with the announcements from vaccine manufacturers that vaccines were highly effective, public opinion since the summer toward a vaccine may have changed.



**Only
One-Half**
of Population Willing to
Receive Vaccination

Most believe their
insurance should cover
the cost

Use of
health
care
services
dropped

1 in 5
reporting
delay in
medical
care as a
result of
COVID-19

Key Findings

Telemedicine Use Surges During the COVID-19 Pandemic and Associated Restrictions and Shutdowns

The percentage of adults with private health insurance reporting that telemedicine was an extremely important option for getting medical care nearly doubled between 2017 and 2020.

In 2020, 12 percent of adults reported that a telemedicine option was extremely important, up from 7 percent in 2017. Overall, however, those reporting that telemedicine was important to any degree remained steady between 2017 and 2020, with fewer reporting it was somewhat important in 2020 vs. 2017.

Actual use of telemedicine dramatically increased between 2017 and 2020. In 2020, 40 percent of adults reported that they or a family member had at least one telemedicine visit, up from 20 percent in 2017.

Telemedicine visits generally occurred with known providers outside of a telemedicine program. Two-thirds (67 percent) of adults reported that the telemedicine visit was with a health provider or doctor that they had seen before or had a relationship with already. This is up from 50 percent in 2017. Only 11 percent reported that the visit was with a new health provider recommended by the health plan through its telemedicine program/partners.

40 Percent of Adults

said they or a family member had at least 1 telemedicine visit

Up from 20 percent in 2017



12 Percent

said telemedicine was extremely important

Key Findings

Enrollment in HDHPs & CDHPs Continues to Rise

Enrollment in health savings account (HSA)-eligible health plans and health reimbursement arrangements reached a record high in 2020, with 19 percent enrolled in such a plan. Enrollment in health plans with high deductibles that were not eligible to be paired with an account continued its longer-term upward trend as well.

Familiarity with terms such as consumer-directed health care or consumer-driven health plans was much higher among HDHP enrollees than among traditional plan enrollees. Overall, one-half of HDHP enrollees were extremely or very familiar with consumer-directed health care or consumer-driven health plans. In contrast, only 22 percent of traditional plan enrollees were familiar with consumer-directed health care or consumer-driven health plans.



Half of HDHP Enrollees

were extremely or very familiar with consumer-directed health care or consumer-driven health plans

22 Percent

of traditional plan enrollees were familiar with such plans.

Key Findings

Many People Have a Choice of Health Plans

About two-thirds of individuals reported that they have a choice of at least two health plans. HDHP enrollees were more likely than traditional plan enrollees to report that they had a choice of health plan. Twenty-four percent of HDHP enrollees reported that they had two health plans to choose from, compared with 19 percent among traditional plan enrollees. And 24 percent of HDHP enrollees reported that they had three health plans to choose from, compared with 19 percent of traditional plan enrollees.

Certain Aspects of Health Plans Are More Important Than Others

When it comes to their health plan, most people thought that the following aspects were very or somewhat important: the network of health care providers, easy access to health care, prescription drug coverage, low out-of-pocket costs, low premiums, and simple to understand. Generally, traditional plan enrollees and HDHP enrollees ranked these aspects of health care in the same order, with one exception: Traditional plan enrollees reported that low out-of-pocket costs for doctor's visits were more important. Of lesser importance was low cost of premiums when selecting a plan. However, HDHP enrollees reported that low premiums were more important than low out-of-pocket costs when selecting a plan.

Overall, 36 percent of traditional plan enrollees reported that they were offered an HDHP, with or without an account. One-third of traditional plan enrollees reported that they were not offered an HDHP in 2020, up from 3 in 10 in 2017.

Important Aspects:



- ✓ The network of health care providers
- ✓ Easy access to health care
- ✓ Prescription drug coverage
- ✓ Low out-of-pocket costs
- ✓ Low premiums
- ✓ Simple to understand

Key Findings

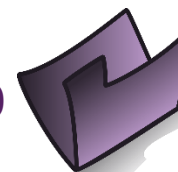
Health Savings Accounts (HSAs) Used in a Variety of Ways

Nearly 70 percent of individuals reported using their HSA to pay for current out-of-pocket expenses. Forty percent reported that they were using their HSA to save for health care expenses in retirement. Almost 40 percent were using them to minimize taxes. One-third were using HSAs to cover unexpected medical expenses. One-quarter were using them to pay for a mix of short-term and long-term health care expenses or to reimburse themselves for out-of-pocket expenses when they needed the money. Only 15 percent were using them to invest.

Despite the fact that only 15 percent used the accounts as investment accounts, 24 viewed the account as an investment account. Most (67 percent) viewed the HSA as a savings account.

Forty percent of accountholders would be more likely to accumulate and invest unused funds if they were provided an annual review of their HSA balance, and one-third would be more likely to accumulate and invest unused funds if they were able to access information about the account benefits and how it works online.

**Nearly 70
Percent**



Use their HSA to pay for current out-of-pocket expenses.

Only 15 percent use it to invest

Key Findings

HDHP Enrollees Exhibit More Cost-Conscious Behavior Than Traditional Plan Enrollees

Those in an HDHP were more likely than those with traditional coverage to say that they had:

- Checked whether the plan would cover care or medication (53 percent HDHP vs. 37 percent traditional).
- Checked the price of doctor's visits, medication, or other service before receiving care (42 percent HDHP vs. 34 percent traditional).
- Checked the quality rating of a doctor or hospital before receiving care (41 percent HDHP vs. 37 percent traditional).
- Talked to their doctors about other treatment options and costs (34 percent HDHP vs. 29 percent traditional).
- Used an online cost-tracking tool provided by the health plan (25 percent HDHP vs. 19 percent traditional).
- Developed a budget to manage health care expenses (19 percent HDHP vs. 16 percent traditional).
- Declined a medical procedure because of costs (19 percent HDHP vs. 16 percent traditional) (Figure 15).

When it came to prescription drug use, those in an HDHP were more likely than those with traditional coverage to have asked for a generic drug instead of a brand name (35 percent HDHP vs. 29 percent traditional).

More Than Half

Of those in an HDHP checked whether the plan would cover care or medication



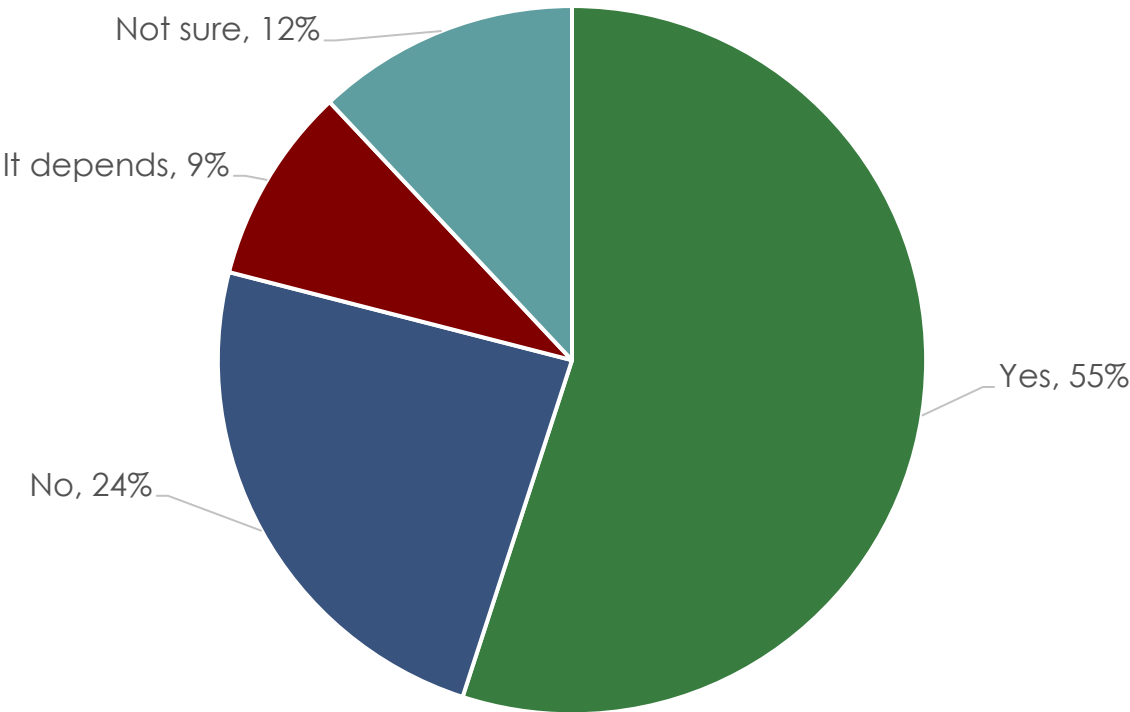
Vs. 37 percent with traditional coverage

The Impact of COVID-19

Figure 1

Only 55 percent of the adult population was willing to receive a COVID-19 vaccine.

Are you willing to receive a vaccine against COVID-19, when it is released?



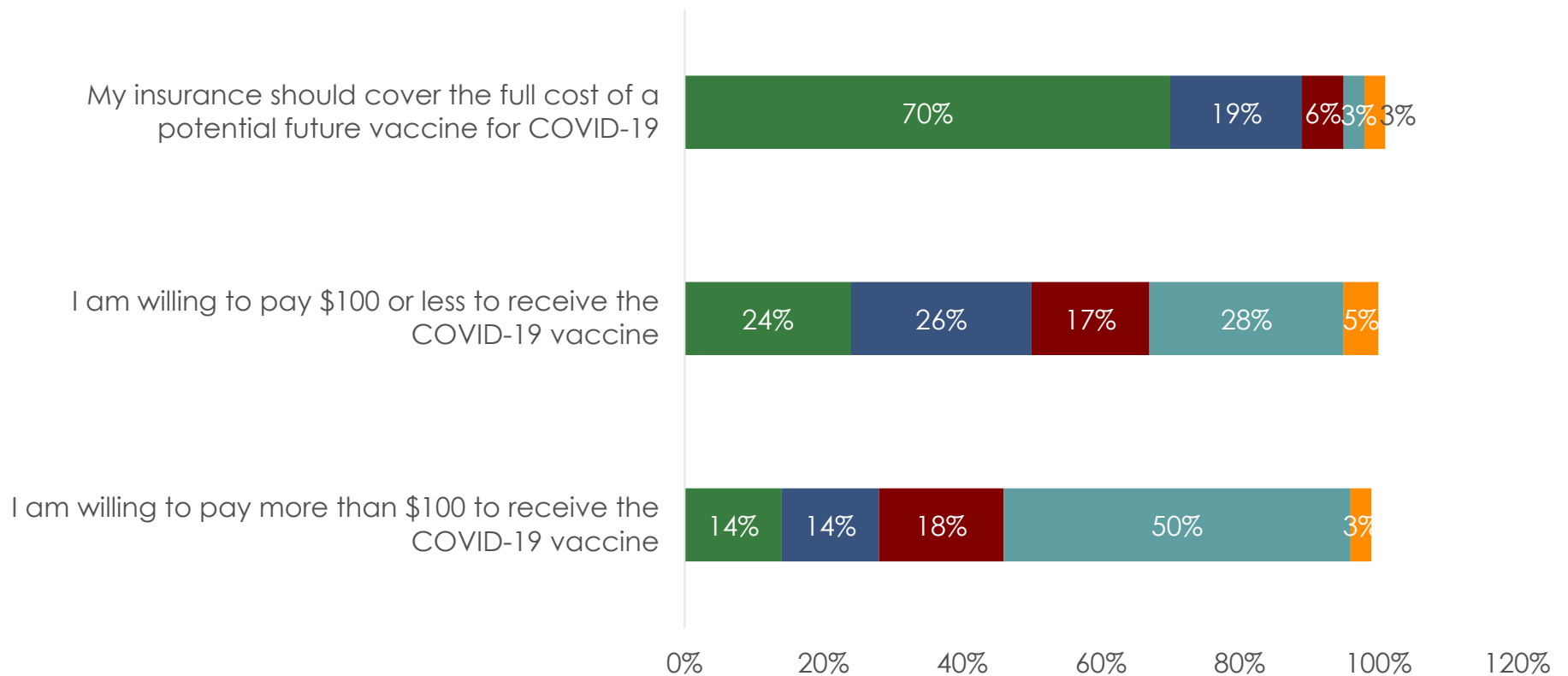
Source: Employee Benefit Research Institute and Greenwald Research, 2020 Consumer Engagement in Health Care Survey

Figure 2

Nine in ten believe their insurance should cover the full cost of a future vaccine for COVID-19.

How much do you agree with the following statements regarding a potential COVID-19 vaccine?

■ Strongly agree ■ Somewhat agree ■ Somewhat disagree ■ Strongly disagree ■ Not applicable



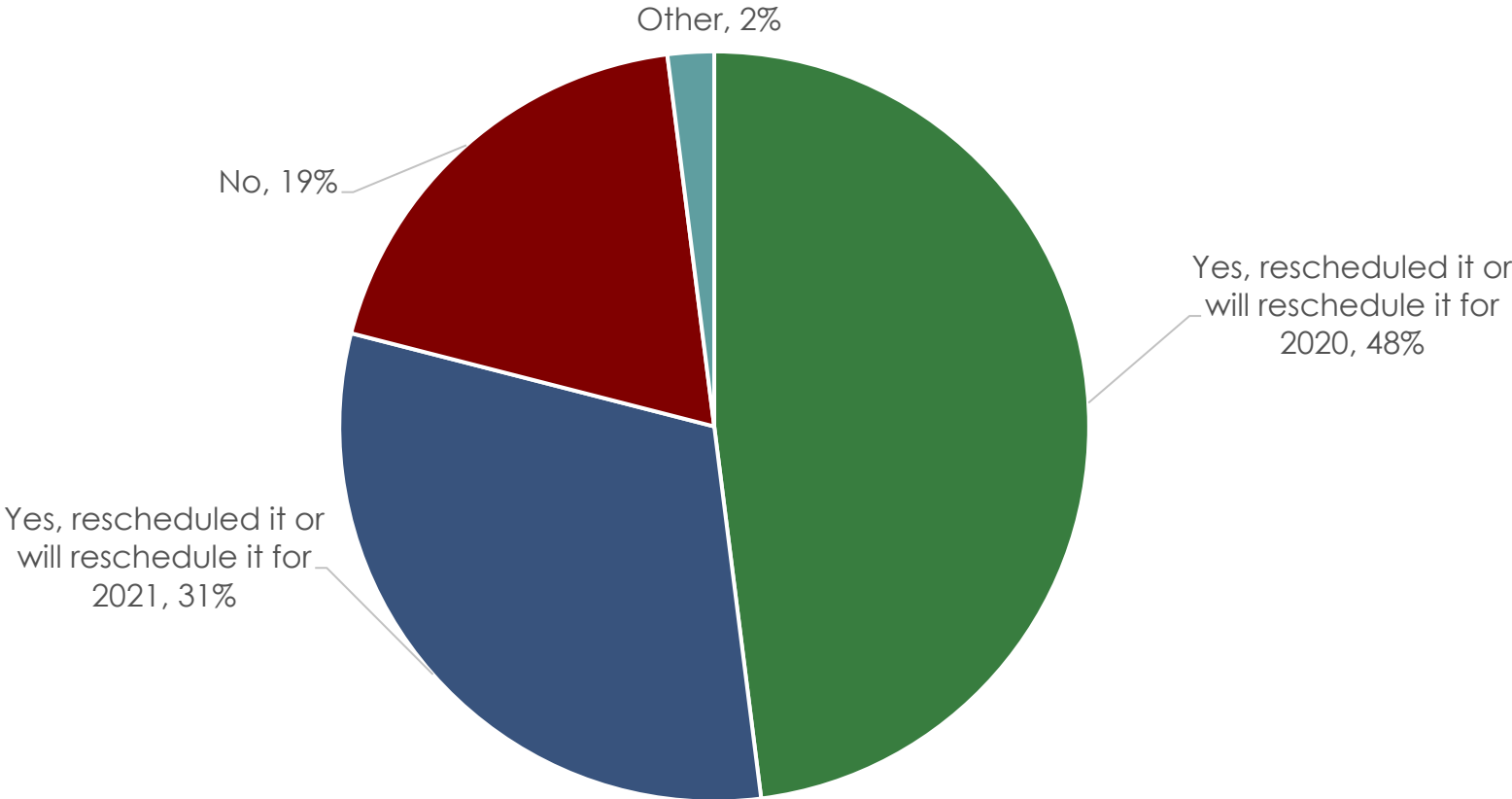
Source: Employee Benefit Research Institute and Greenwald Research, 2020 Consumer Engagement in Health Care Survey

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Figure 3

One in five delayed a medical procedure as a result of the COVID-19 pandemic. Many expect delayed health care to be rescheduled in 2020 or 2021.

Will you/have you rescheduled the medical procedure?
Delayed a medical procedure because of COVID-19



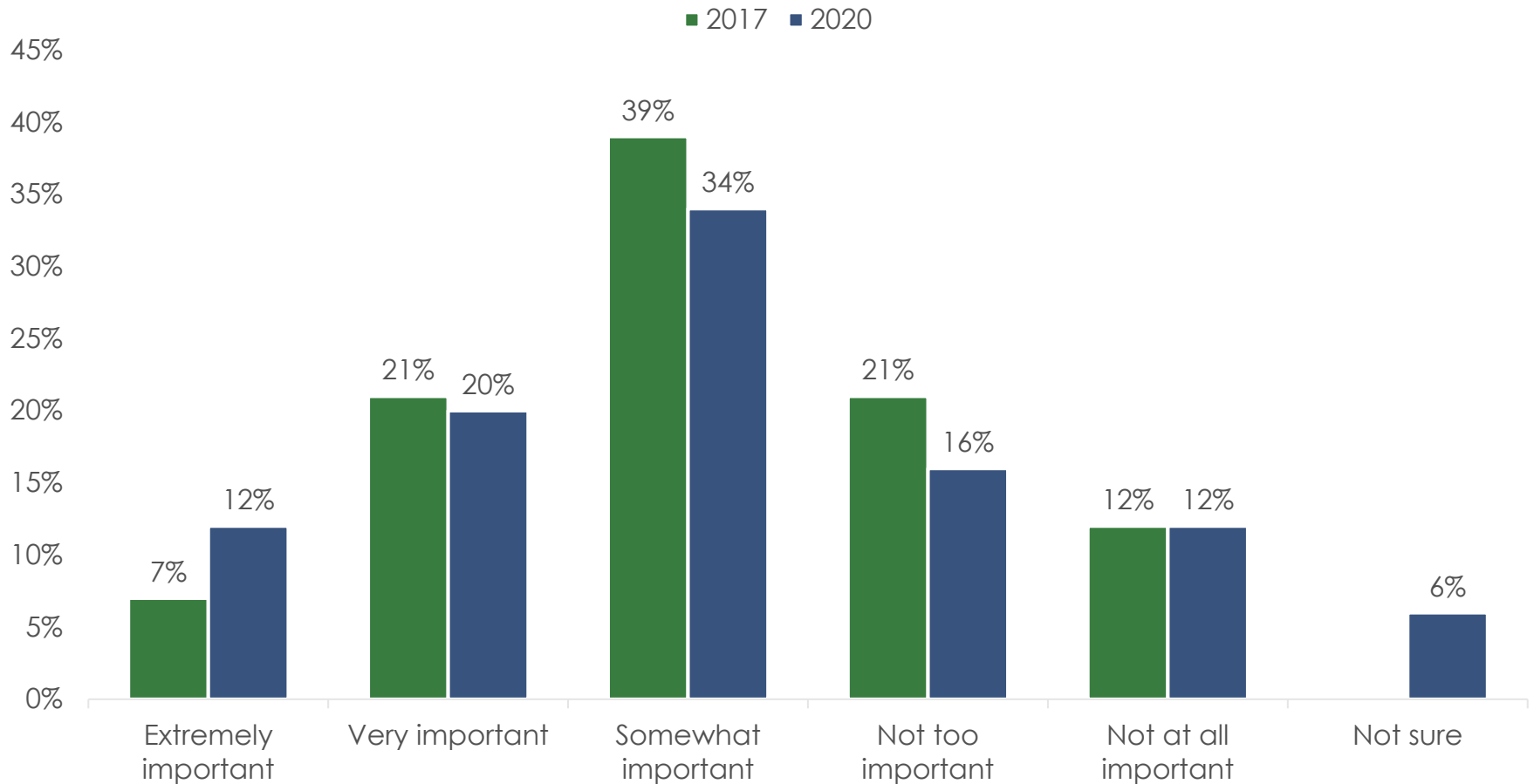
Source: Employee Benefit Research Institute and Greenwald Research, 2020 Consumer Engagement in Health Care Survey
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Changes in Telemedicine

Figure 4

Over 3 in 10 gave a high rating to the importance of having telemedicine as an option for getting medical care in certain situations.

How do you rate the importance of having telemedicine as an option for getting medical care in certain situations?



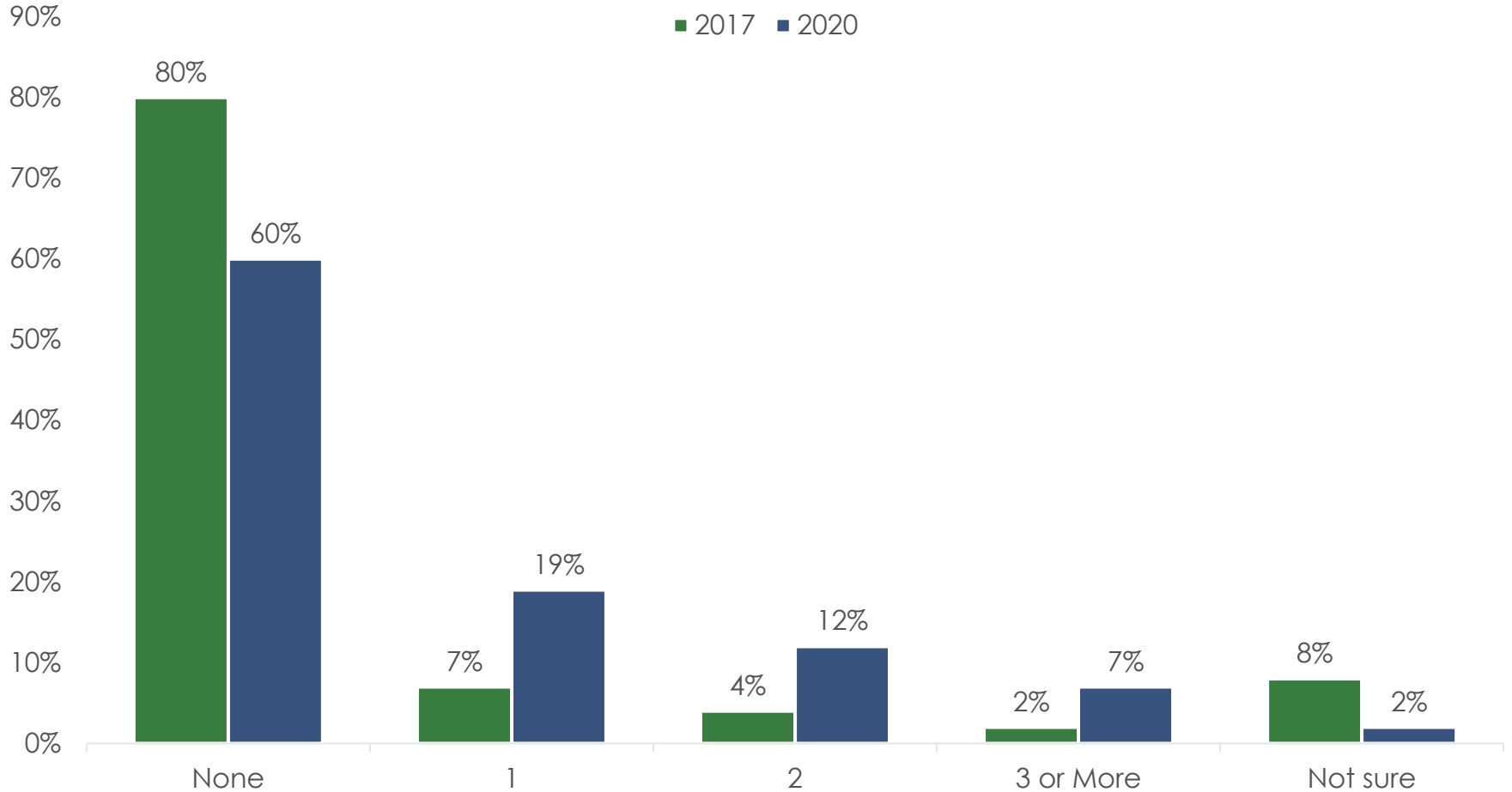
Source: Employee Benefit Research Institute and Greenwald Research, 2020 Consumer Engagement in Health Care Survey

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Figure 5

Six in ten have not had a telemedicine visit in 2020.

Since the beginning of the year, how many telemedicine visits have you and/or your family had?

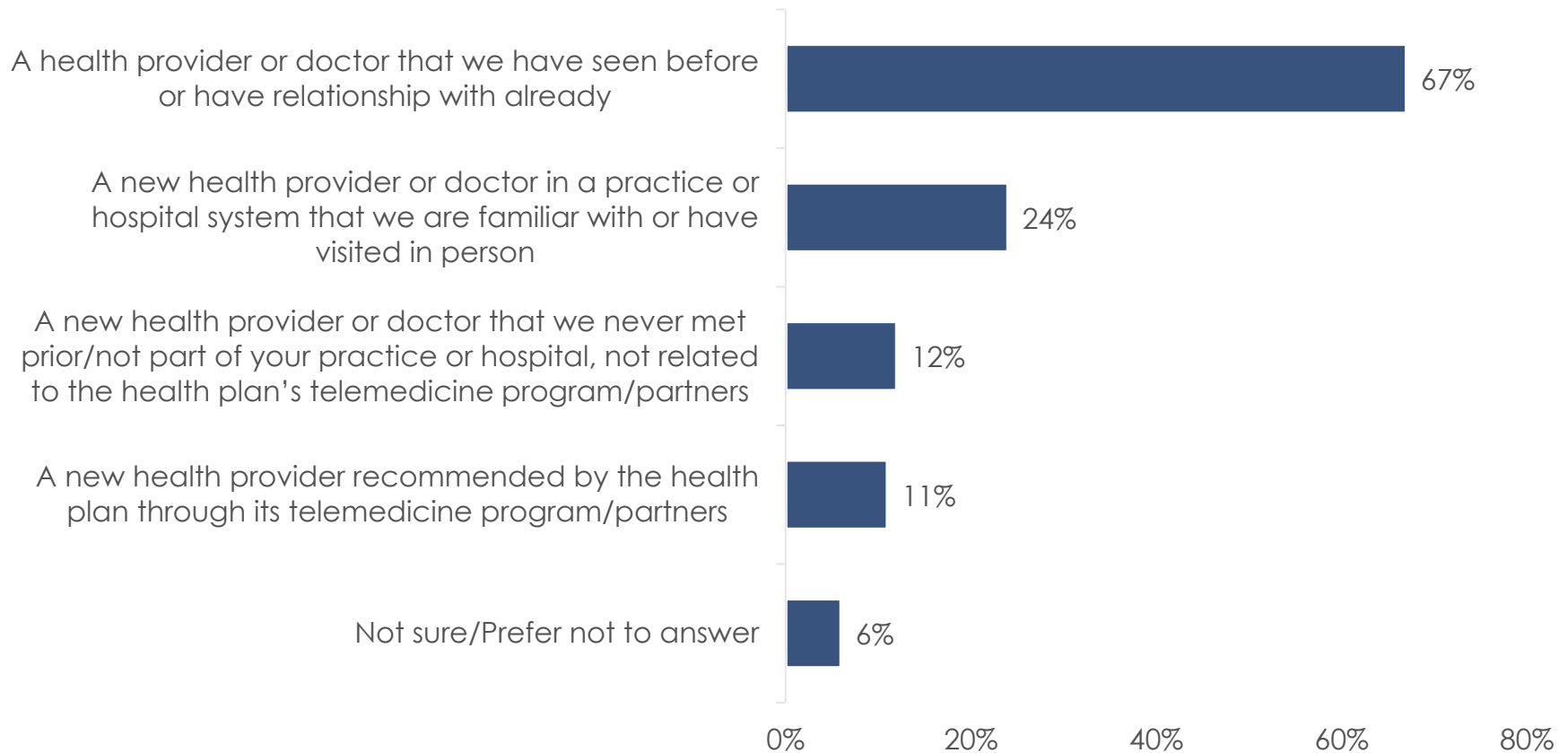


Source: Employee Benefit Research Institute and Greenwald Research, 2020 Consumer Engagement in Health Care Survey

Figure 6

A majority had a telemedicine visit with a doctor they have seen before.

Since the beginning of the year, were any of the visits with one of the following? *Had at least 1 telemedicine visit since the beginning of the year*



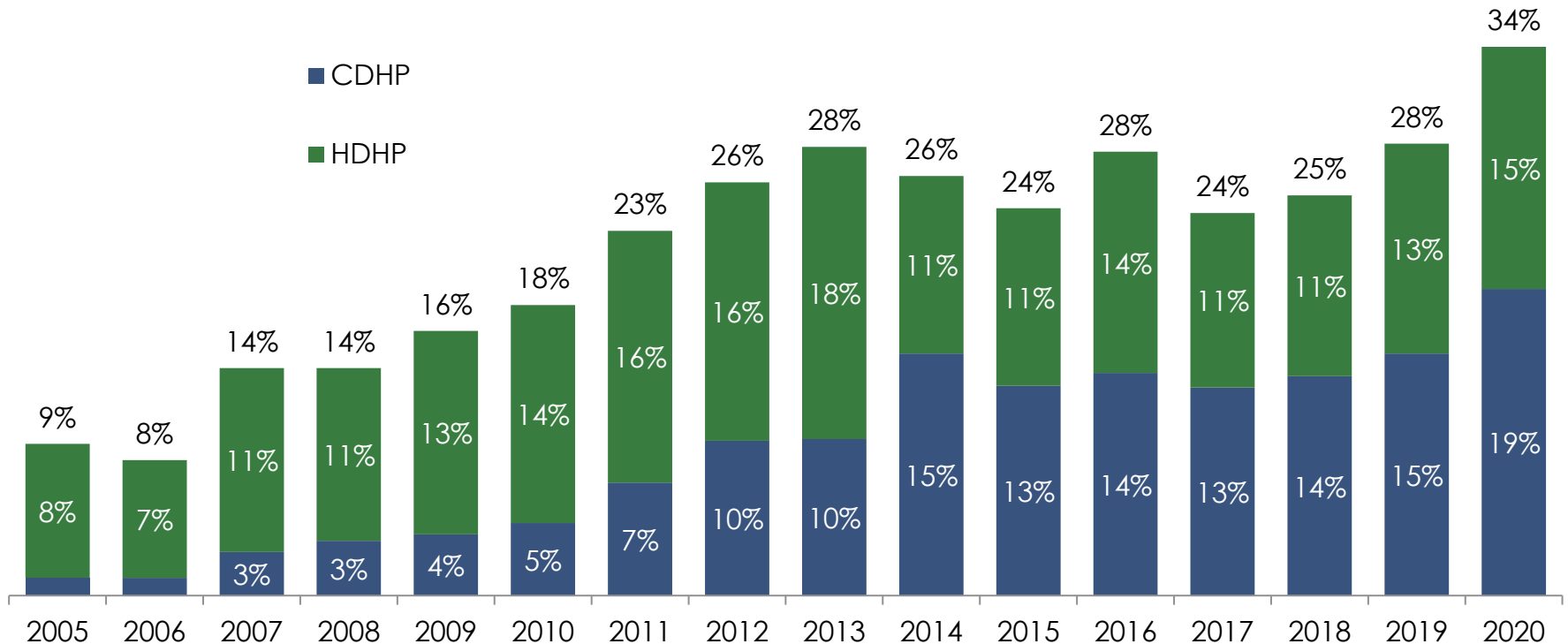
Source: Employee Benefit Research Institute and Greenwald Research, 2020 Consumer Engagement in Health Care Survey

High-Deductible Health Plan Enrollment

Figure 7

Enrollment in consumer-driven health plans (CDHPs) and high-deductible health plans (HDHPs) continued and accelerated in 2020.

Percentage of Enrollees in HDHP and CDHP



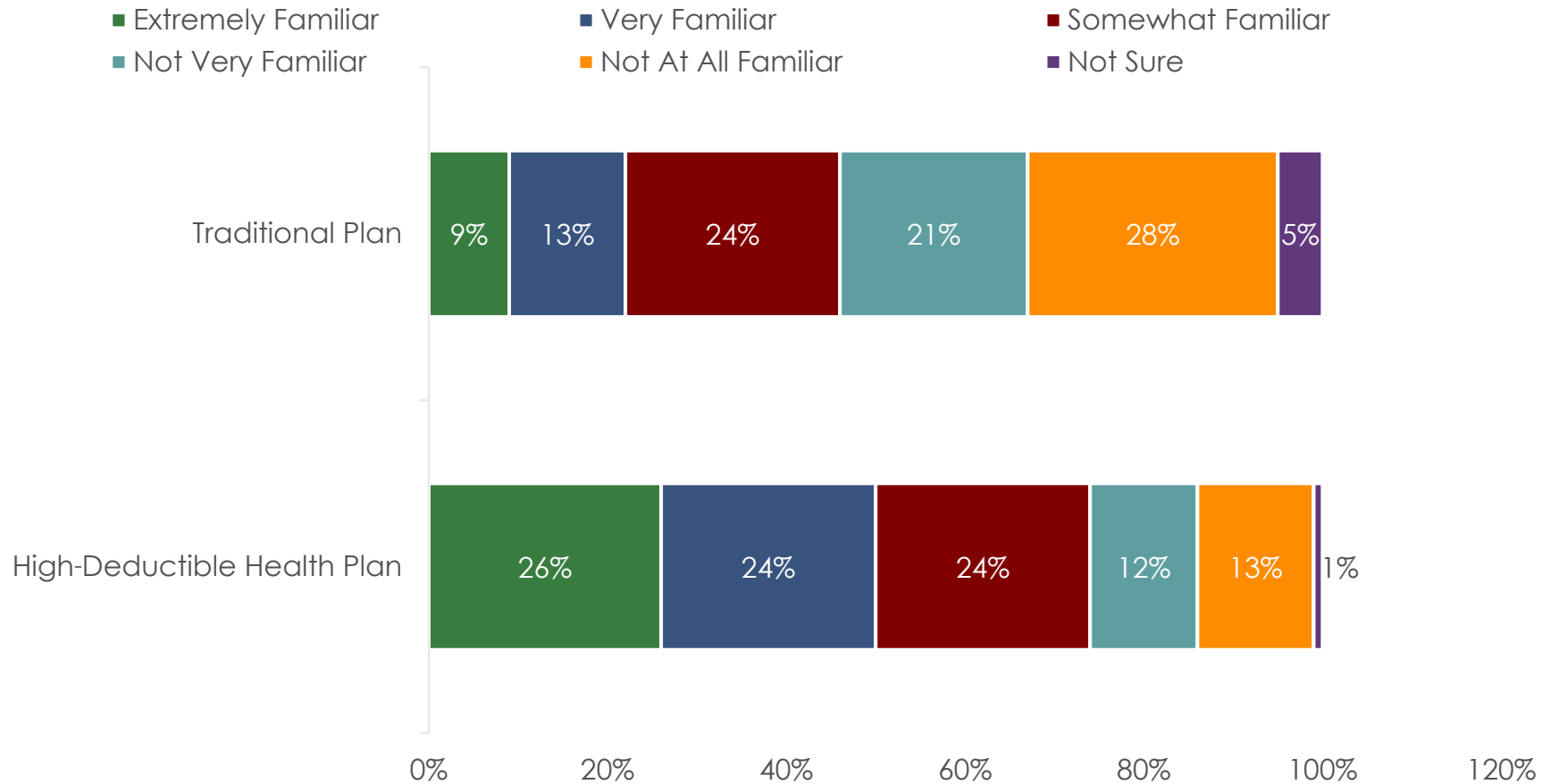
Starting in 2014, HSA-eligibles (with no account) were added to the CDHP group.
Starting in 2019, Dynata's panel was used for sample.

Source: Employee Benefit Research Institute/Greenwald Research, 2008–2020 Consumer Engagement in Health Care Survey & 2005–2007 EBRI/Commonwealth Fund Consumerism in Health Care Survey.

Figure 8

Traditional plan enrollees are much less likely to be familiar with consumer-driven health plans.

How familiar, if at all, are you with Consumer Directed Health Care or Consumer Driven Health Care plans?

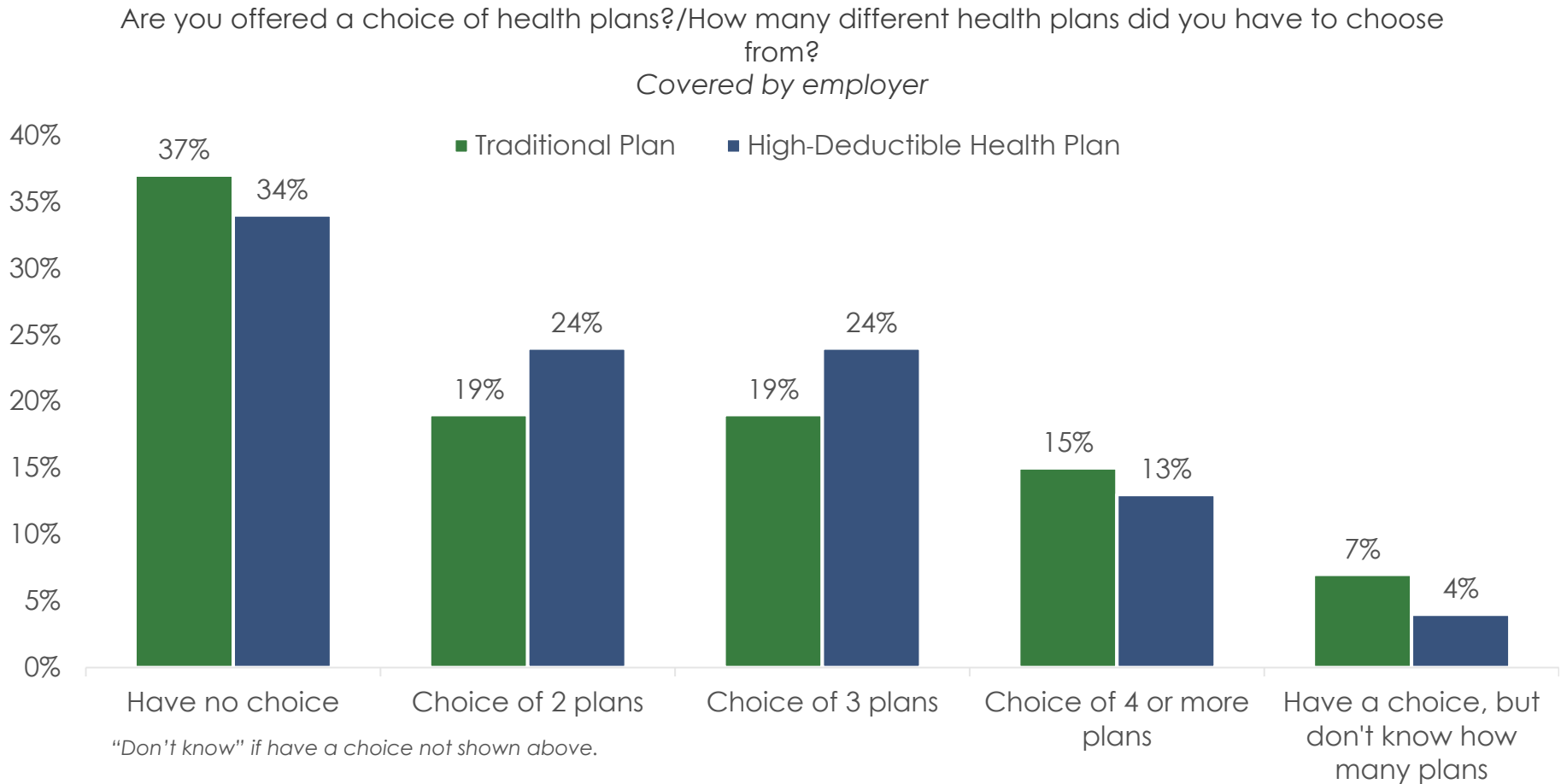


Source: Employee Benefit Research Institute and Greenwald Research, 2020 Consumer Engagement in Health Care Survey

Health Plan Choice

Figure 9

HDHP enrollees are significantly more likely than traditional plan enrollees to have a choice of 2 or 3 plans.



Source: Employee Benefit Research Institute and Greenwald Research, 2020 Consumer Engagement in Health Care Survey

Figure 10

Enrollees in traditional health plans value low out-of-pocket costs; HDHP enrollees value lower premiums.

How important were each of the following aspects of a health plan in your choice of your current plan?
Top six shown

Traditional Plan	Very Important	High-Deductible Health Plan	Very Important
Good network of physicians and hospitals	79%	Good network of physicians and hospitals	75%
Easy to access health care	77%	Easy to access health care	75%
Prescription drug coverage	71%	Prescription drug coverage	65%
Low out-of-pocket costs when you see the doctor	70%	Lower cost of premium	64%
Lower cost of premium	64%	Low out-of-pocket costs when you see the doctor	60%
Simple to understand	60%	Simple to understand	55%

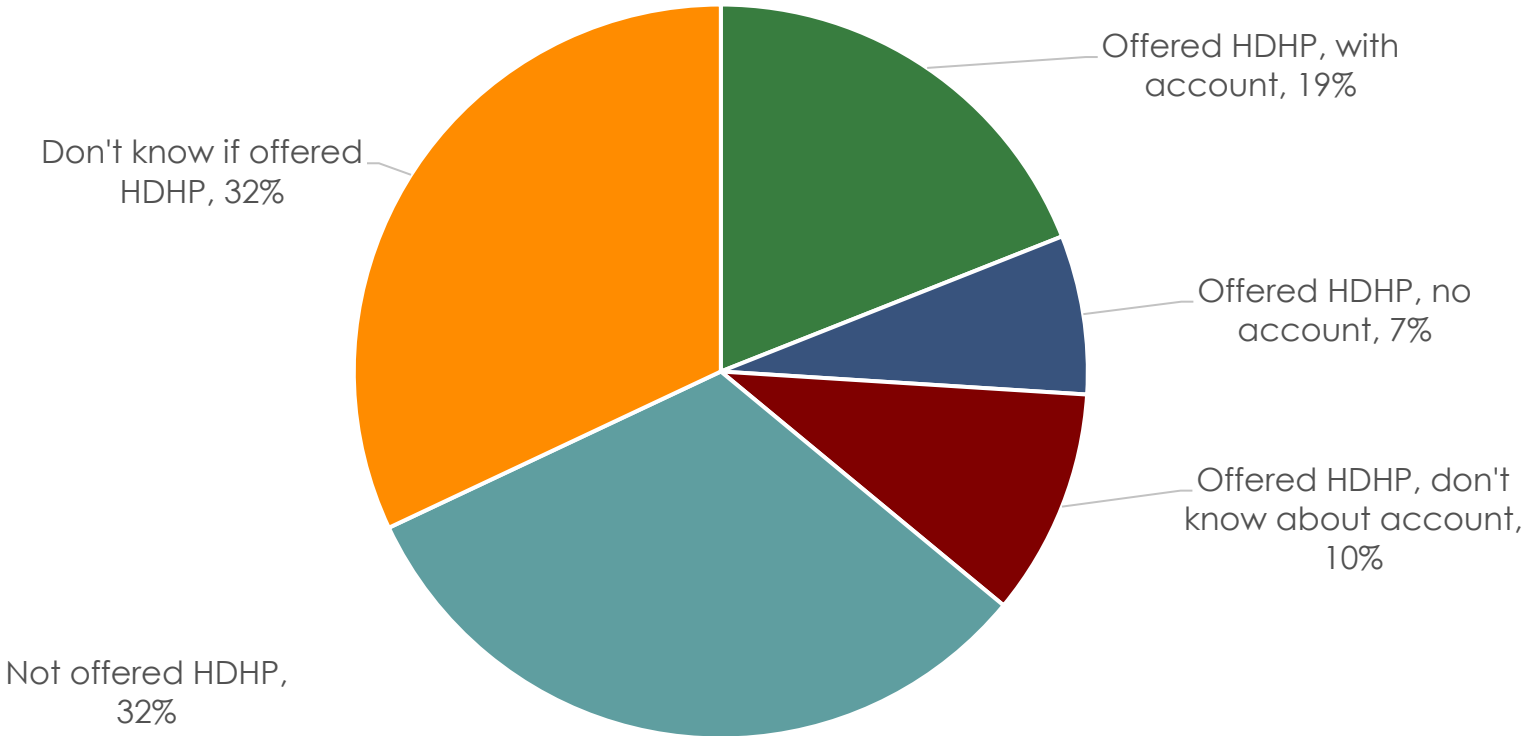
Source: Employee Benefit Research Institute and Greenwald Research, 2020 Consumer Engagement in Health Care Survey

Figure 11

One in five traditional plan owners with a choice of plans have the option for an HDHP/CDHP.

To the best of your knowledge, was one of the plans you were offered, but did not take, a plan with a high deductible?/Did the high deductible plan that you were offered but did not take also include a savings account or fund that you could use to pay your health care expenses?

Traditional plan with choice of plans

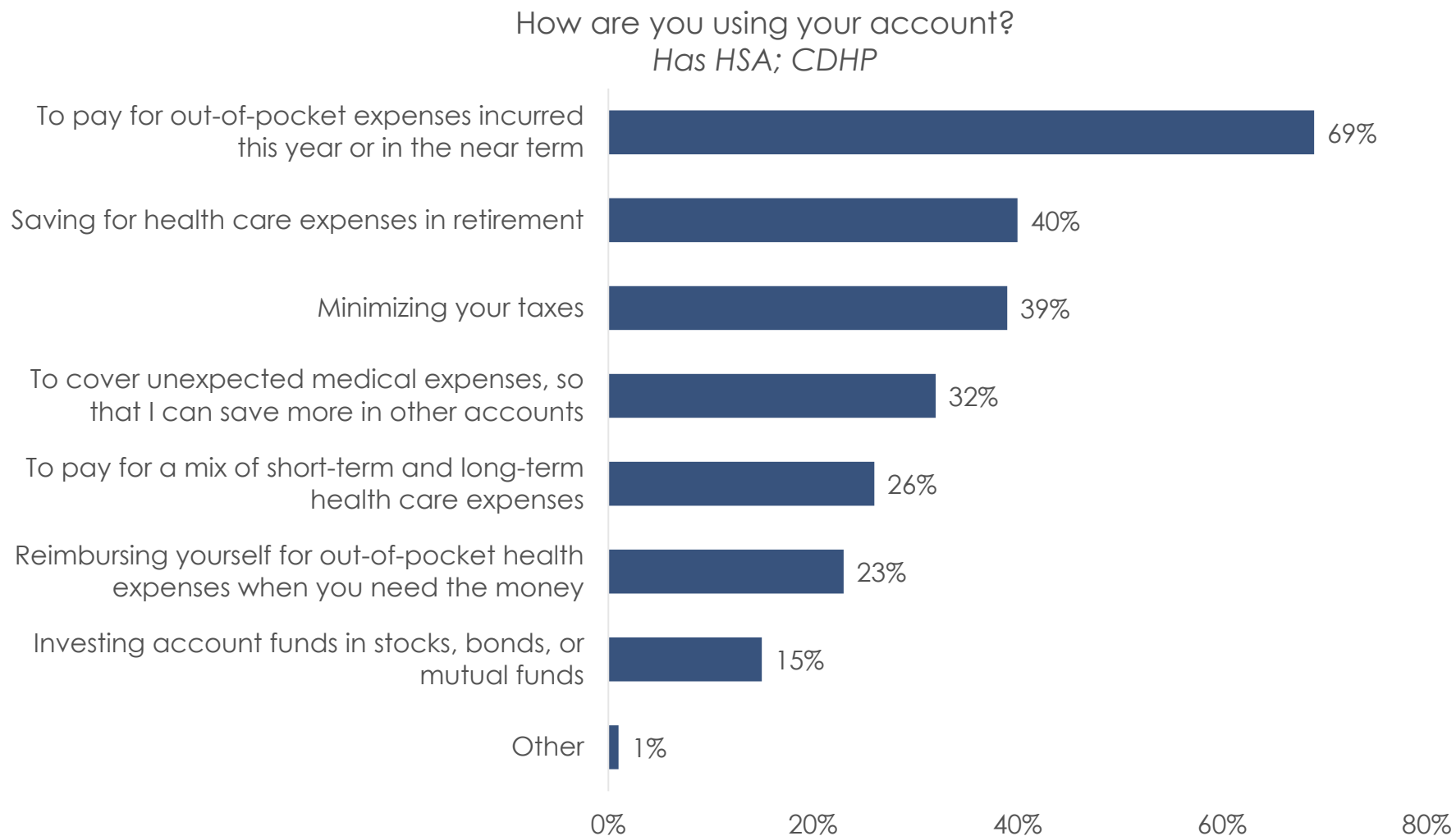


Source: Employee Benefit Research Institute and Greenwald Research, 2020 Consumer Engagement in Health Care Survey

Use of Health Savings Accounts

Figure 12

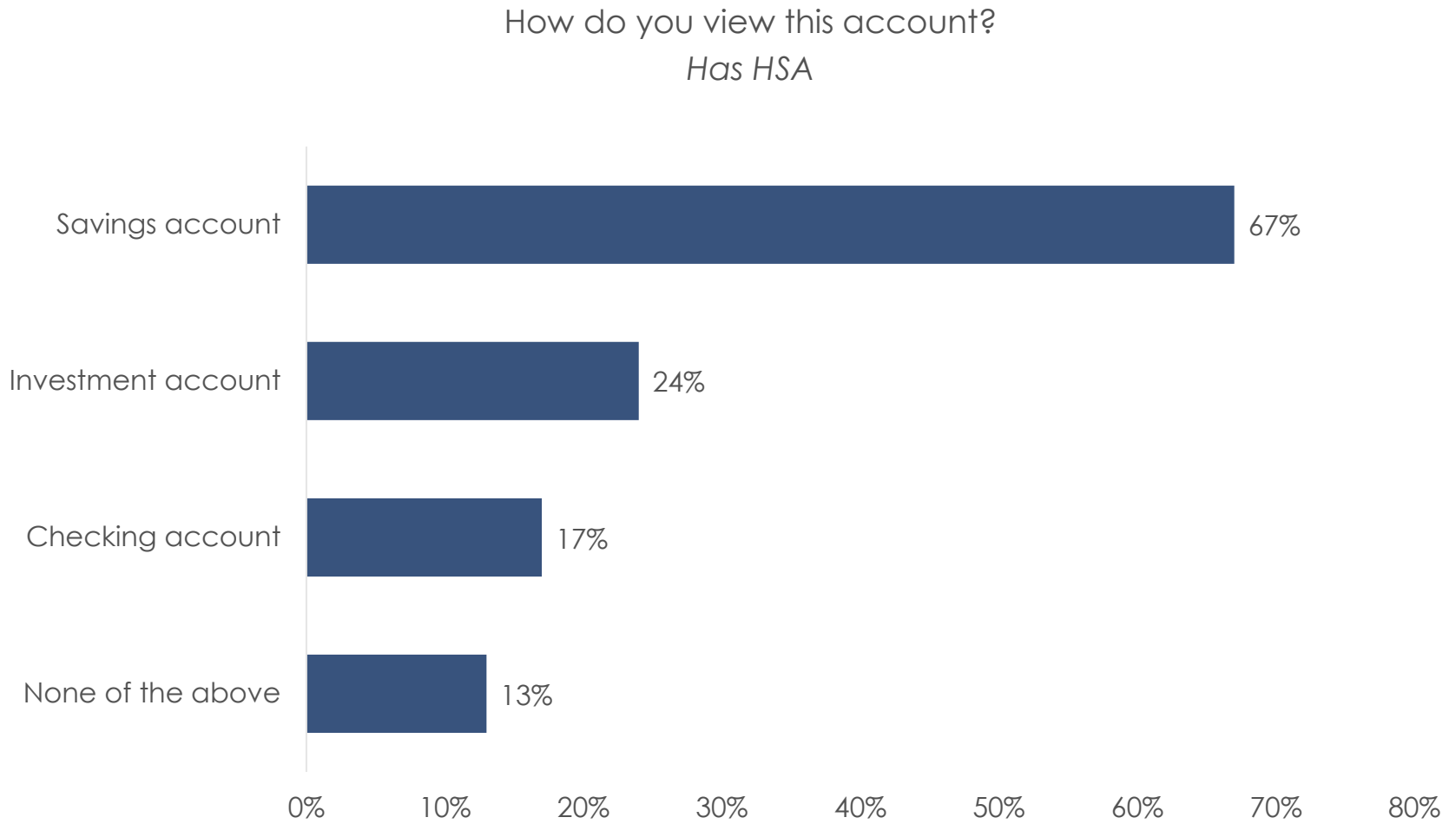
Consumers use their HSAs to pay for current expenses.



Source: Employee Benefit Research Institute and Greenwald Research, 2020 Consumer Engagement in Health Care Survey

Figure 13

Two in three view their HSA as a savings account.



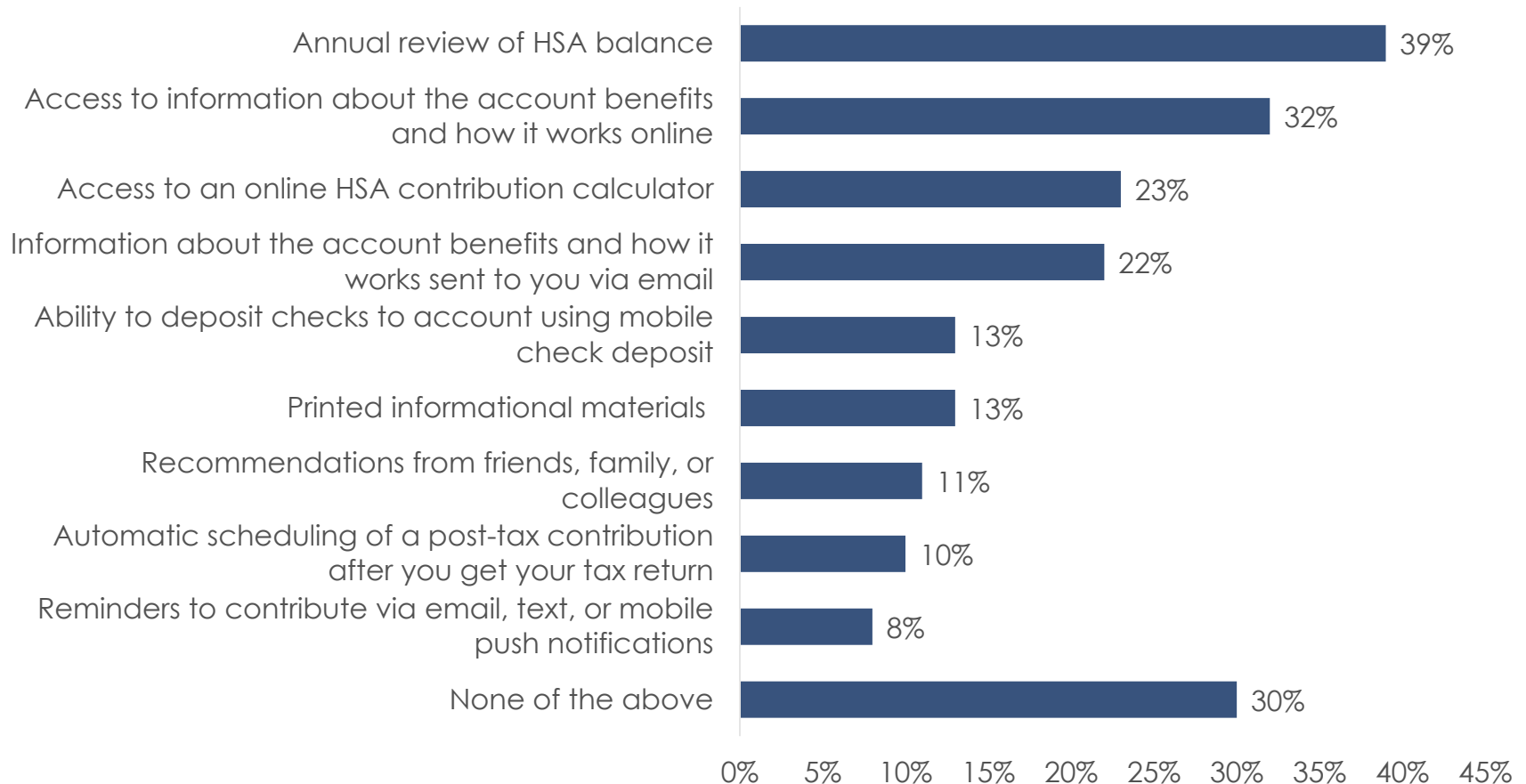
Source: Employee Benefit Research Institute and Greenwald Research, 2020 Consumer Engagement in Health Care Survey

Figure 14

Four in ten would be more likely to accumulate and invest unused funds if they were provided an annual review of their HSA balance.

Which of the following would make you more likely to accumulate and invest unused funds in your account?

Has HSA; CDHP



Source: Employee Benefit Research Institute and Greenwald Research, 2020 Consumer Engagement in Health Care Survey

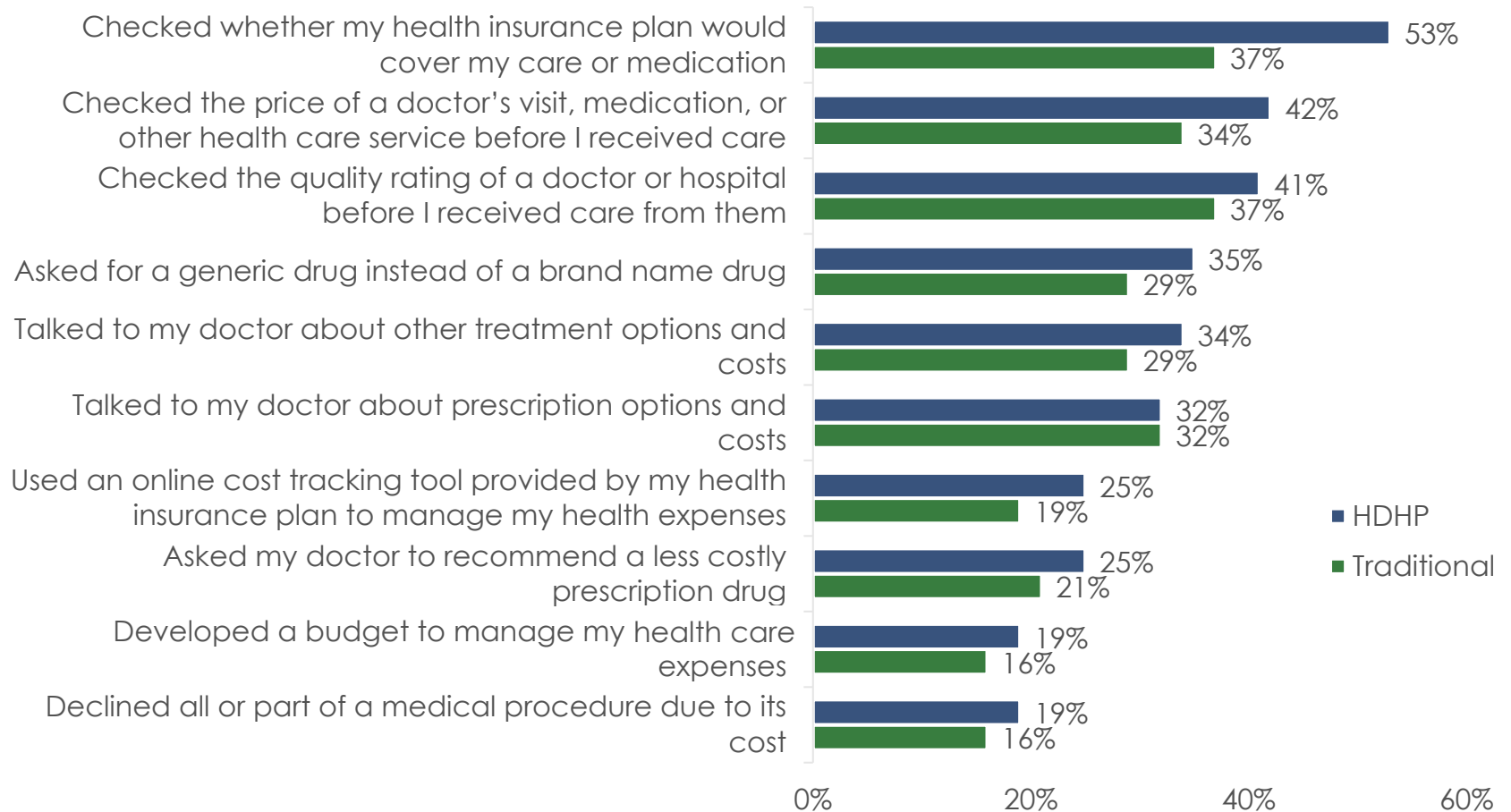
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Cost-Conscious Decision Making

Figure 15

High-deductible health plan (HDHP) enrollees are more likely than traditional plan enrollees to report making cost-conscious decisions.

In the last year/Since you joined your current health plan, did you do any of the following?
Percentage Yes



Source: Employee Benefit Research Institute and Greenwald Research, 2020 Consumer Engagement in Health Care Survey

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Respondent Profile

Respondent Profile

	National (n=1,230)	Traditional (n=784)	High Deductible (n=1,248)
Gender			
Male	49%	51%	47%
Female	51	49	53
Age			
21 to 29	10%	11%	7%
30 to 44	43	43	38
45 to 54	24	23	27
55 to 64	23	23	29
Children in Household			
None	57%	56%	59%
One	18	20	18
Two	17	17	17
Three	4	4	4
Four or more	2	2	2
Adults (ages 26 or older) in Household			
None	<0.5%	--	<0.5%
One	25	24%	20
Two	62	61	70
Three	8	9	7
Four or more	3	4	3

	National (n=1,230)	Traditional (n=784)	High Deductible (n=1,248)
Ethnic Background			
White/ Caucasian	62%	57%	72%
Hispanic	17	19	11
African American/ Black	11	14	4
Asian/Pacific Islander	8	7	11
Other	2	3	2
Hispanic			
Yes	17%	19%	11%
No	82	81	89
Refused	1	1	<0.5
Region			
South	39%	38%	37%
West	24	26	21
Midwest	20	17	26
Northeast	17	18	16

Respondent Profile

	National (n=1,230)	Traditional (n=784)	High Deductible (n=1,248)
Employment Status			
Employed full time	77%	75%	81%
Employed part time	8	9	5
Not employed, looking for work	2	2	2
Homemaker	5	5	4
Retired	7	8	6
Furloughed	1	1	2
Other	<0.5	<0.5	1
	(n=1,024)	(n=645)	(n=1,043)
Self-Employed (among those employed full or part time)			
Yes	5%	6%	5%
No	95	94	95
	(n=1,230)	(n=784)	(n=1,248)
Retirement Account or IRA			
Yes	54%	54%	69%
No	46	46	31

	National (n=1,024)	Traditional (n=645)	High Deductible (n=1,043)
Employer Size (among those employed full or part time)			
Self-employed with no employees	2%	3%	2%
2 to 9	5	5	5
10 to 49	7	7	9
50 to 499	24	23	24
500 to 1,999	13	13	13
2,000 to 4,999	7	7	9
5,000 to 9,999	9	10	7
10,000 or more	23	24	26
Don't know	9	8	6
	(n=1,005)	(n=630)	(n=1,026)
Retirement or Savings Plan Through Employer (among those that have at least 2 employees working for their employer)			
Yes	84%	83%	89%
No	16	18	11

Source: Employee Benefit Research Institute and Greenwald Research, 2020 Consumer Engagement in Health Care Survey

Respondent Profile

	National (n=1,230)	Traditional (n=784)	High Deductible (n=1,248)		National (n=1,230)	Traditional (n=784)	High Deductible (n=1,248)
Education				Marital Status			
Some high school or less	<0.5%	--	<0.5%	Married	57%	57%	66%
High school graduate	26	27%	6	Not married, living with partner	8	8	8
Some college	22	23	11	Divorced or separated	9	7	7
Trade or business school	7	8	5	Widowed	1	1	1
College graduate	25	23	42	Single, never married	25	27	18
Some post-graduate work	4	4	4	Household Income			
Graduate degree	16	16	32	Less than \$20,000	3%	3%	1%
	(n=1,209)	(n=768)	(n=1,227)	\$20,000 to \$29,999	6	5	3
Insurance Through Job (among those who receive their insurance through their/spouse's employer)				\$30,000 to \$39,999	7	8	1
Enrolled through current employer	91%	90%	92%	\$40,000 to \$49,999	7	6	4
Enrolled through past employer	8	9	7	\$50,000 to \$69,999	14	14	12
Decline to respond	1	1	<0.5	\$70,000 to \$99,999	20	19	21
	(n=116)	(n=81)	(n=106)	\$100,000 to \$149,999	20	19	28
Type of Insurance Through Former Employer (among those enrolled through past employer)				\$150,000 or more	22	24	31
Enrolled in COBRA	11%	9%	17%	Declined to answer	1	1	1
Enrolled in retirement plan	86	90	76				
Decline to respond	3	2	7				

Source: Employee Benefit Research Institute and Greenwald Research, 2020 Consumer Engagement in Health Care Survey

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Respondent Profile

	National (n=1,230)	Traditional (n=784)	High Deductible (n=1,248)		National (n=1,230)	Traditional (n=784)	High Deductible (n=1,248)
Conditions Diagnosed or Treated For				Emotional Health Issues Diagnosed or Treated For			
High blood pressure	19%	19%	17%	Anxiety	14%	12%	14%
High cholesterol	17%	17%	19%	Depression, bipolar, or other mood issues	13%	13%	10%
Overweight/obesity	10%	9%	12%	Post-traumatic stress	3%	3%	3%
Diabetes	6%	6%	6%	ADD, ADHS, attention deficit disorder	2%	3%	2%
Cancer/cancer survivor	4%	4%	4%	Eating disorder	1%	1%	1%
Gastrointestinal disorders	4%	4%	8%	Other	<0.5%	<0.5%	<0.5%
Autoimmune disease	3%	3%	4%	None of the above	79%	79%	79%
Heart disease	1%	1%	2%	Prefer not to say	1%	2%	1%
Muscle strength/mobility	1%	1%	1%				
Other	2%	3%	3%				
None of the above	59%	61%	53%				
Prefer not to say	2%	2%	2%				

Source: Employee Benefit Research Institute and Greenwald Research, 2020 Consumer Engagement in Health Care Survey

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Respondent Profile

	National (n=1,014)	Traditional (n=639)	High Deductible (n=1,040)		National (n=1,014)	Traditional (n=639)	High Deductible (n=1,040)
Industry (among employed)				Industry (among employed), Continued			
Health care or social assistance	13%	13%	12%	Restaurants	2	2	2
Educational services	12	14	11	Arts, entertainment	2	2	2
Professional, scientific, or technical services	9	8	11	Administrative or support services	2	2	2
Manufacturing	8	6	11	Real estate	2	2	1
Retail trade	6	6	4	Waste management or remediation services	2	3	<0.5
Finances or insurance	6	5	10	Utilities	1	1	1
Wholesale trade, transportation, or warehousing	5	6	3	Management of companies and enterprises	1	1	<0.5
Public administration	4	4	3	Agriculture, forestry, fishing, hunting, or mining	<0.5	<0.5	<0.5
Information	3	3	5	Other	11	10	11
Construction	3	3	2	Not sure	2	3	1
Hospitality	3	3	2	Prefer not to say	1	1	1
Health insurance	2	2	3				

Source: Employee Benefit Research Institute and Greenwald Research, 2020 Consumer Engagement in Health Care Survey

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Discussion of Methodology

The findings presented in the attached chart pack were derived from the 2020 EBRI/Greenwald Research Consumer Engagement in Health Care Survey (CEHCS), an online survey that examines issues surrounding consumer-driven health care, including the cost of insurance, the cost of care, satisfaction with health care, satisfaction with health care plans, reasons for choosing a plan, and sources of health information. The 2020 CEHCS was conducted within the United States between July 28 and Sept. 11, 2020, through a 21-minute internet survey. The national or base sample was drawn from Dynata's online panel of internet users who have agreed to participate in research surveys. Adults ages 21–64 who had health insurance through an employer, purchased directly from a carrier, or purchased through a government exchange were drawn randomly from the Dynata sample for this base sample. This sample was stratified by gender, age, region, income, and race. In previous years, the survey was fielded using Ipsos' panel. There were over 1,200 national sample completes, 786 CDHP completes (264– national; 522– oversample), and 462 HDHP completes (182– national; 280– oversample). The national sample is weighted by gender, age, income, ethnicity, education, and region to reflect the actual proportions in the population.