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## Consumer confidence in health plans wanes

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Despite all the grumbling over America's health-care system, polls have long shown consumers are satisfied with their own insurance and care.

But in Utah there are signs that consumer confidence is fading.

Approval ratings for the largest segment of Utah's commercial health insurance market — health maintenance organizations, or HMOs — slipped this year, according to a Utah Health Department survey released on Tuesday.

Asked to rate plans on a scale of zero to 10, with zero being the worst, 56 percent of Utahns gave the state's HMOs a score of 8 to 10.

That's down from an average approval rating of 64 percent in 2008, and well below the national benchmark.

Consumers are also less satisfied with the health care delivered under those plans; those ratings fell 12 points.

"It's a well-charted trend, and something we'll want to monitor," said Sam Vanous, who manages data collection for the Consumer Satisfaction Report, now in its 15th year.

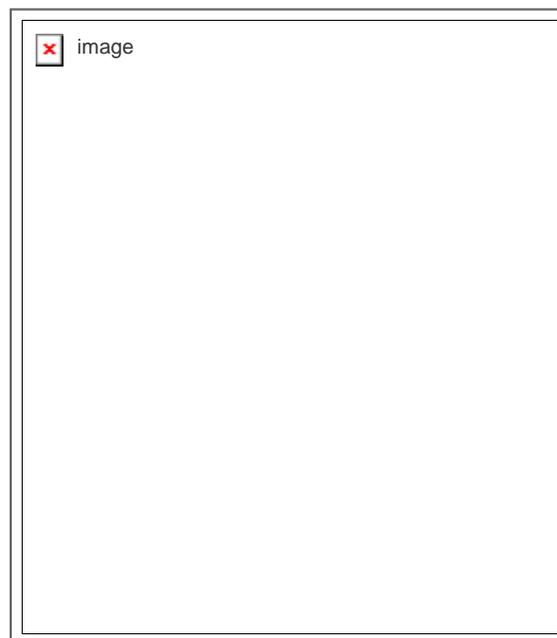
Every spring, state health officials ask Utahns to rate the quality and performance of various health policies. This year's poll spanned nearly 8,000 consumers representing 1.5 million insured.

On even years, the report highlights the experiences of children.

"We ask parents how their children are treated by doctors and specialists," said Vanous. "We highlight kids because they're a vulnerable population, but the findings are applicable to the population at large."

The report shows Utahns are generally happy with their doctors if not their health coverage.

It's a paradox akin to "people saying they dislike government while approving of their elected officials," said state Health Department Executive Director David Sundwall.



blue stethoscope on white vertical orientation

Whatever the merits of national reform, the law has focused attention on the insurance industry and empowered consumers, which, Sundwall says, is a good thing. The point of the survey is to help people make informed health decisions, he said.

Utahns continue to be pleased with low-income health programs such as Medicaid and the Children's Health Insurance Program, the report shows.

It's the private plans that are losing favor; some more than others. Humana and United are the least popular.

Preferred provider organizations, or PPOs, fare the best, led by Deseret Mutual. The insurance plan for LDS Church employees boasts an 85-percent approval rating.

Also earning high marks are Educators Mutual for school teachers and the state's Public Employee Health Plan.

Topping the field of HMOs is Intermountain Healthcare's Selecthealth.

The report's goal of guiding consumer choices assumes people have a choice when it comes to picking a health plan, when in reality, that decision most often falls to employers.

And even those who purchase coverage on the open market complain of being locked into policies.

Susan Ossola and her husband Michael, a real estate agent, self-insure their family. The Riverton couple purchased a high deductible plan from Regence BlueCross BlueShield based on familiarity with the brand.

"Was it the best for us? I don't know. We're kind of stuck with it now, because our son has Lyme disease," said Ossola.

It's a predominant sentiment.

"Research shows consumers make health purchasing decisions based on word-of-mouth or personal experience," said Judi Hilman, executive director of the Utah Health Policy Project. Information on cost and quality isn't always readily available and when it is, consumers don't rely on it, she said.

But Hilman said that could change starting in 2014 with the creation of health insurance exchanges. These online retail insurance outlets are supposed to concentrate the purchasing power of individuals and small businesses.

The Congressional Budget Office predicts that by 2019, about 24 million people will get coverage this way, fueled by federal subsidies averaging \$6,000 a year per person. People with incomes up to four times the poverty level (about \$88,000 a year for a family of four) will be eligible for subsidies — about 70 percent of all Utah households — but only inside an exchange.

This, coupled with tax incentives that could cause employers to withdraw health benefits, could bring new pressures, transparency and accountability to bear on health insurance market, said Hilman. "At least that's the hope."

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For the full report, visit:

<http://health.utah.gov/myhealthcare/reports/cahps/2010/>

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