Business Solutions

Businesses Seek Guidance On Health Plan 'Affordability' And 'Access'

(NAPSA)—When it comes to the national discourse on health insurance, politicians and the media frequently combine the terms "affordability" and "access" as if they naturally go together.

But across the U.S., employers and their workers are finding that a balanced combination of the two is more exception than rule. This is why so many are turning to benefit experts for help, particularly smaller businesses with 100 or fewer employees.

The Problem

With so much high-profile and public discussion around health care reform, the concepts of affordability and access are getting bandied about as never before. Yet market forces frequently conspire to keep these ideas misaligned or even at direct odds.

Common examples are new network configurations that offer a cost-access trade-off that's not always simple to decode. For instance, a plan might offer lower premiums for price-sensitive customers in exchange for access limits to certain care providers—limits that are not always clear to consumers.

This often leads to a very frustrating disconnect for businesses and employees seeking the best of both.

A Solution

One way to dial back frustration is to get connected to a good broker or benefit adviser, says Ron Goldstein, president and CEO of *CHOICE* Administrators, the nation's leader in developing and administering employee-choice health benefit programs and exchanges for employer groups. The company's exchanges include the country's first and only multicarrier private exchange, California-*Choice*.

"Today, there are a lot of new plan options with many variables that can be overwhelming to decipher," Goldstein said. "An agent can provide the necessary guidance and clarity to understand and navigate the trade-offs around cost, choice and availability." It's also where well-designed health care exchanges, private and public, can shine because they enable plan comparisons based on price along with many other choice factors.

Take affordability. For many, the word connotes "inexpensive," but the term is relative and depends on a myriad of factors such as household income, care needs, overall health and much more. At the core, affordability boils



Many companies have found professional advisers can be the healthy choice when it comes to finding the best health care plans for their employees.

down to price—for the plan premium, deductibles, co-pays, out-of-pocket costs and so forth.

Access, on the other hand, is an extremely complicated descriptor. At its baseline, "access" refers to whether physician, pharmacist, therapist, hospital and other provider services are available and, if so, if there is an adequate supply.

This definition, however, only scratches the surface. Factors such as location, quality, use and more are also important components in the overall equation.

Also, coverage levels can lead to unintentional distortions or misrepresentations of "accessibility." A person covered by a Bronze plan living in a more populated region may have much better access to care than someone with Platinum coverage in a rural area. Assessing these potential disparities requires a keen eye and the practiced hand that a health plan professional can effectively provide.

Clearly, the notion of health care accessibility is extremely complex. That said, most people tend to internalize and define "access" personally. They want to know that their doctor, specialist or hospital is available to them before making a plan selection. This is simple to say but not always easy to do. Benefit specialists play an integral role in helping small businesses shop and compare plans while working with employees to confirm that selected plans connect them to desired networks and care providers.

Conversations about affordability and access in the health care marketplace will likely continue to dominate headlines for months and years to come. Leaning heavily on the skills and insights of advisers will help businesses and their employees find the right equilibrium.

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