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Uninsured Face Difficulties Choosing Health Insurance

San Francisco, CA - The new federal health-care law will give 52 million more Americans access to medical insurance. However, choosing the right coverage – a daunting task for most people – could be even more difficult for those who have never had health insurance, new research suggests.

Hurdles include understanding unfamiliar terms that are necessary to compare and choose among the available plans, and a lack of clear, simple explanations from trusted sources.

Those are the initial findings of a study at Washington University School of Medicine in St. Louis. Highlights will be presented Thursday March 21, 2013 at the annual meeting of the Society of Behavioral Medicine in San Francisco, CA.

“Selecting the best health-insurance option can be confusing, even for people who have gone through the process for many years,” says Mary Politi, PhD, an assistant professor of surgery and the study’s leader. “We need to do a better job communicating information about health insurance to help people make the choices that work best for them.”

Dr. Politi will detail the findings as part of the “Paper Session 01: Cancer Communication” presentations that run from 3:45 to 5:15 pm Pacific Time.

The study is one of the first to examine how well people who have never had health insurance understand key terms, including coinsurance, deductible, out-of-pocket maximum, prior authorization and formulary, which is a list of medications. Those terms were among the most difficult for study participants, 51 Missourians from rural, urban and suburban parts of the state who have never had health insurance.

While many of the participants had never heard of key insurance terms, those who have had experience with auto insurance were more familiar with deductibles, and those who have had past experience with health insurance understood more terms than those who had never had health insurance. But even some who had previous experience with health insurance confused the meaning of similar terms, such as urgent care and emergency care or co-insurance and co-payment.

Next, researchers will apply the findings to test ways to improve communication about health insurance and the health insurance exchanges the federal government and states are establishing as part of the new health-care law. This communication will be especially

important for individuals with limited health literacy and math skills given the complex written and numerical information required to understand plan differences, Politi says.

This project is funded by a grant from The Agency for Healthcare Research & Quality (R21-HS020309-01).

The Society of Behavioral Medicine (www.sbm.org) is a multidisciplinary organization of clinicians, educators, and scientists dedicated to promoting the study of the interactions of behavior with biology and the environment and the application of that knowledge to improve the health and well being of individuals, families, communities, and populations.

This study was presented during the 2013 Annual Meeting and Scientific Session of the Society of Behavioral Medicine (SBM) from March 20-23 in San Francisco, CA. However, it does not reflect the policies or the opinion of the SBM.

[Washington University School of Medicine](#)'s 2,100 employed and volunteer faculty physicians also are the medical staff of [Barnes-Jewish](#) and [St. Louis Children's](#) hospitals. The School of Medicine is one of the leading medical research, teaching and patient care institutions in the nation, currently ranked sixth in the nation by U.S. News & World Report. Through its affiliations with Barnes-Jewish and St. Louis Children's hospitals, the School of Medicine is linked to [BJC HealthCare](#).

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