



2023 Report on Small Group HSA Plans' Incentives for Consumers to Comparison-shop for Certain Health Care Procedures

Prepared by the Maine Bureau of Insurance
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Background

In 2017, Maine enacted Public Law 2017, Chapter 232 (LD 445), “An Act to Encourage Consumers To Comparison-shop for Certain Health Care Procedures and To Lower Health Care Costs”¹. The law requires any carrier in Maine that offers a small group plan compatible with a Health Savings Account (HSA) to establish a plan design in which enrollees are directly incentivized to shop for low-cost, high-quality participating providers for certain categories of health services. The health services include non-emergency outpatient care in the following categories:

1. Physical and occupational therapy;
2. Radiology and imaging;
3. Laboratory; and
4. Infusion therapy.

Incentives under the health plan may include cash payments, gift cards or credits or reductions of premiums, copayments or deductibles. The plan design must remain available to enrollees for at least two consecutive years.

The incentive plans must be filed with the Superintendent for approval. Filings must include detailed descriptions of the incentives available to plan enrollees in the summary of benefits and explanations of coverage. The descriptions must include any limits on incentives, the actions that an enrollee must take in order to earn incentives, and a list of the types of services that qualify under the program. The law also requires that annually, at enrollment or renewal, a carrier provide notice about the availability of the program to its enrollees.

Beginning March 1, 2020, and annually thereafter, the Superintendent of Insurance (“Superintendent”) must evaluate the incentive programs created by carriers as required by the law and submit a report relating to the performance of the programs, the use of incentives, the incentives earned by enrollees, and the cumulative effect of the programs. The report is submitted to the joint standing committee of the Legislature having jurisdiction over health insurance matters by April 15th each year².

¹ [P.L. 2017, Chapter 232 \(LD 445\)](#).

² [P.L. 2023, Chapter 224 \(LD 1085\)](#) repealed the law’s January 1, 2024 sunset date.

Process

The Bureau of Insurance (“Bureau”) requested information from each carrier that offered a small group health plan in Maine that is compatible with an HSA. The Bureau requested the following information from each carrier:

1. A sample of the annual or at-renewal notice sent to enrollees.
2. The total number of enrollees in health plans who were eligible for the program at any point during the calendar year.
3. The number of enrollees who received incentives during the calendar year.
4. The number of separate times incentives were received during the calendar year.
5. For each type of service included in the incentive program, the number of times enrollees received that service during the calendar year and the number of times enrollees received incentives for those services during the calendar year.
6. For the specific types of health care services listed and the specific types of incentives listed, the dollar amount of incentives received by enrollees during the calendar year. If an incentive type was not specifically listed, the carriers were directed to identify the type of incentive provided.

The companies providing data for this report are³:

Aetna Health, Inc.
Aetna Life Insurance Company
Anthem Health Plans of Maine, Inc.
Harvard Pilgrim Health Care, Inc.
Harvard Pilgrim Health Care Insurance Company
United Healthcare Insurance Company

The sample form used for this report is attached to this report as Appendix 1.

³ Community Health Options, a carrier that also offers a small group health plan in Maine, did not provide data for this report. The company previously offered an incentive program for two consecutive years (as required by [Title 24-A, Chapter 56, §4318-A](#)) and elected to not continue this plan design.

Findings

The information provided below is based upon the aggregate responses from the six carriers that offered incentive programs to enrollees in 2023.

Enrollee and Incentive Information

Total Number of Enrollees for Calendar Year	119,339
Number of Enrollees Receiving Incentives	46
Number of Different Times Incentives Were Received	64

Enrollee Use of Health Services and Incentives Received

Type of Non-Emergency Outpatient Health Care Service	# of Times Enrollees Used Service	#of Times Enrollees Received Incentives for Using Service
Physical/Occupational Therapy	547	2
Radiology/Imaging	7,397	30
Laboratory	27,741	16
Infusion Therapy	1,831	9
Other Non-Emergency Outpatient Service	34,995	11
Total	72,511	68

Dollar Amount of Incentive Received by Incentive Type and Type of Health Service

Type of Health Service	Cash Payment	Gift Card	Credit or Reduced Premium	Reduced Co-Pays	Other Incentives	Total Paid
PT/OT	\$150.00	\$10.00	\$0.00	\$0.00	\$0.00	\$160.00
Radiology/Imaging	\$250.00	\$840.00	\$0.00	\$0.00	\$0.00	\$1,090.00
Laboratory	\$50.00	\$245.00	\$0.00	\$0.00	\$0.00	\$295.00
Infusion Therapy	\$0.00	\$90.00	\$0.00	\$0.00	\$0.00	\$90.00
Other**	\$450.00	\$275.00	\$0.00	\$0.00	\$0.00	\$725.00
Total	\$900.00	\$1,460.00	\$0.00	\$0.00	\$0.00	\$2,360.00

** Other non-emergency outpatient health services included screening colonoscopy, colonoscopy, echocardiogram, extremity study, biopsy, fertility, chiropractic, and upper GI endoscopy.

Conclusion

Based on the information obtained, carriers gave cash payments and gift cards to enrollees. It appears that the majority of enrollees did not take advantage of the incentives. It is unknown whether the enrollees disregarded the incentives, did not understand them, or did not know about them.

APPENDIX 1 – Health Incentives Reporting Instructions

Maine Comparable Health Care Service Incentive Program Report Instructions

Pursuant to 24-A M.R.S. § 4318-A(6), the Bureau of Insurance is required to report to the Maine Legislature’s Committee on Insurance and Financial Services on carriers’ implementation of comparable health care service incentive programs. To facilitate this reporting, the Bureau is requesting reporting on incentive program enrollment and the use of incentives earned by enrollees.

Due Date: March 1

Report Location:

<https://www.maine.gov/pfr/insurance/licensees/insurance-companies/insurers/data-reporting-requirements>

Scroll down to Comparable Health Care Service Incentive Program Report. There are two tabs at the bottom of the form. Sections I-III are on one tab and Sections IV-V are on the other tab.

Any Questions? Contact Pamela.Stutch@maine.gov.

Return Report to: Send your completed report as an e-mail attachment to Keith.A.Fougere@maine.gov.

Information You Need to Complete the Report: All carriers offering small group plans compatible with a health savings account are required to report. All fields are required. Your report is due on or before March 1. Include data for non-emergency, outpatient health care services and any other services included in the incentive program.

Section I. Company Information – Information to identify your company.

Section II. Contact Information – Information about the person completing the report.

Section III. Enrollee & Incentive Information o Per 24-A M.R.S. § 4318-A(3), annually at enrollment or renewal, a carrier shall provide notice about the availability of the incentive program to an enrollee who is enrolled in a health plan eligible for the program. Did your company provide notice? Provide as an attachment a sample of this notice with your response.

- The total number of enrollees are all individuals who were enrolled in health plans eligible for the program at any point during the calendar year.

- Number of enrollees who received incentives during the calendar year.
- Number of separate times incentives were received during the calendar year.

Note: an enrollee may receive more than one incentive for one or more health care services.

Section IV. For each type of non-emergency, outpatient health care service or any other service included in the incentive program, enter the number of times enrollees received that service during the calendar year and the number of times that those enrollees received incentives for those services during the calendar year.

Note: If enrollees received incentives for another type of health care service not specifically listed, enter the name of that health care service in the yellow area under “Specify Other Non- Emergency Outpatient Health Services” and enter the corresponding number of times enrollees received that health care service during the calendar year and the number of times that those enrollees received incentives for those other health care services during the calendar year.

Section V. For the Specific Types of Health Care Services listed and the Specific Types of Incentives Listed, provide the dollar amount of incentives received by enrollees during the calendar year.

Note: If an incentive type is not specifically listed, place the amount under “Other Incentives” and then list the other type of incentive in the yellow comment box below Section V (i.e., see “If Applicable, Specify the Other Types of Incentives that Were Provided”).