

10 Questions Employees Should Ask Their Employers When Choosing a Health Plan

Employees must take into account several factors when they start considering what health plan best fits their needs. To help, we put together a list of questions they can ask their employer before making a final decision.

1. Has the employer's prescription drug coverage changed?

Changes could include new approved drug lists, a rise in cost, or new approval processes that could lead to certain drugs not covered.

2. What is the current health coverage status for my working spouse or children?

If you have coverage for a working spouse, find out if your employer is adding or increasing the amount of an existing surcharge.

3. Are my preferred doctors and other medical service providers still covered?

If your employer changes health insurance companies, plans, or networks, make sure your preferred doctor and hospitals are still accepted.

4. Has the employer taken steps to make health care costs more affordable for me?

Employers can take steps to help make healthcare more affordable for their employees, including offering high deductible plans, telehealth options, and more.

5. Has the employer changed administrators for medical benefits?

If yes, this could lead to a new telephone number to call or a new process to follow for filing claims or seeking information.

6. Is the employer offering new or expanded options for receiving care that might be beneficial to me?

New options, such as telemedicine consultations, can be considerably less expensive for employees.

7. Has the employer added new or expanded voluntary benefits I might find valuable?

These have the benefits of being relatively low cost for both employees and employers.

8. Does the employer's wellness plan have new features that can help me manage my health or save me money?

Some employers will offer financial incentives to employees who take advantage of such features, such as lifestyle coaching for fitness wearables.

9. Has the employer added or expanded coverage for complementary or alternative medical services?

This includes services such as physical therapy, chiropractic, acupuncture and massage, which many health plans offer minimal or no coverage at all.

10. Has the employer added or expanded the use of technology for delivering and managing my benefits?

Tech-savvy solutions are gaining traction in assisting you with assessing, choosing, enrolling in, and overseeing your employee benefits.