

# Explanation of Benefits and Confidentiality in Massachusetts

## The Importance of Confidentiality

Patient confidentiality is an essential aspect of the patient-provider relationship. When confidentiality is not assured, patients are understandably reluctant to communicate openly with their health care providers, and may delay or even forgo accessing needed care, especially if they fear being stigmatized or harmed as a result. Patients insured under a family member or spouse's policy report similar confidentiality concerns, as insurance companies routinely divulge information about the care received by dependents to policyholders via billing related communications. Therefore, insurers must be engaged to help prioritize and protect patient privacy for confidential health care services to be confidently accessed by all.

## The Privacy Problem

Currently, a communication called an Explanation of Benefits (EOB) that details the type and cost of medical services received is routinely sent to the primary policyholder each time an enrollee on the plan accesses care. While a policyholder could not learn what type of care (non-minor) dependents received by calling the health care provider, sensitive health information is frequently disclosed in an EOB, violating the basic right to privacy for anyone enrolled as a dependent on another's policy, such as a minor, adult child or spouse.

Lack of confidentiality negatively impacts individuals of **all** genders and life circumstances, but especially affects:

- **Adult spouses** covered as dependents on a partner's plan, especially when the partner is abusive
- **Young adults (ages 18-26)** insured as dependents on their parents' health plan
- **Minors** trying to exercise their right to access certain healthcare services without parental consent



## The Repercussions of not being able to Access Confidential Health Care:

- Minors and young adults are particularly **likely to be deterred from seeking care for sexual or reproductive health** if they are worried that their parents will find out.
- Disclosure to an abusive partner or family member can **make the violence or abuse worse**.
- Delayed or foregone treatment **results in health problems and higher costs** down the road.
- Individuals often utilize free community clinics instead of their insurance because **they are afraid that care obtained under their insurance policy will not be confidential**. This **burdens community clinics** that are already facing a shortage of funding.

### **A health care provider reports:**

*"A 20 year old college student on her mom's plan wants to use the more highly effective oral contraceptive pills as opposed to condoms for birth control, but doesn't out of fear that her mom will receive notification of the prescription. Young patients with private insurance who are too scared to take advantage of their benefits is a much more common problem than uninsured youth."*

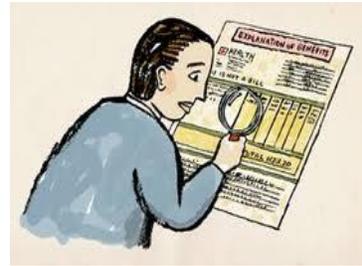
## Potential Solutions

- ✓ A standardized process to opt-out of receiving EOBs must be developed across insurers and communicated to all MA residents and health care providers.
- ✓ Dependents must be able to easily suppress EOBs and other confidential information about their health care visit from being disclosed to the policyholder.
- ✓ Insurers should send 'member-level' EOBs to each individual insured dependent, rather than to the primary policyholder.
- ✓ EOBs should not be issued when disclosure could compromise safety or continued access to health services.
- ✓ EOBs should not be issued when no remaining balance exists on a claim, and therefore should never be sent for preventive health services with no cost sharing (e.g. a birth control refill visit or STI test).
- ✓ EOBs should provide generic information only, such as "office visit" or "medical care" rather than more explicit descriptions.
- ✓ EOBs for young adults should not be sent to the policyholders unless the young adult affirmatively consents to this disclosure.
- ✓ EOBs should not be sent to the parents of a minor for those services that the minor is able to access without parental consent, unless the minor affirmatively consents to disclosure.
- ✓ Oversight and compliance mechanisms must be developed to ensure that insurers do not compromise access to confidential health services.

## An Opportunity for Change

The Division of Insurance has asked for stakeholder input in developing a "common summary of payments form." This presents an opportunity to change the current insurer EOB practices in Massachusetts and **help ensure that all individuals are able to access health care confidentially.** Please join our efforts to ensure that health care services remain as private as possible so everyone can access the services they need.

*For More Information, contact Alyssa Vangeli at [avangeli@hcfama.org](mailto:avangeli@hcfama.org)*



### Insured clients in MA report:

*"Explanation of benefits summaries are routinely sent to my husband, instead of to me directly."*

*"Yes, I have been physically threatened and verbally abused because my abuser discovered I was seeking counseling."*

*"I am still covered under my parents' insurance. However I did not want them to be aware that I made a series of mental health/ counseling appointments. Although insurance covered them, it still showed up on my parents' bill. My mother called to question me and was distraught which is exactly what I wanted to avoid."*

## Our Supporters:

**Action for Boston Community Development**

**Boston Area Rape Crisis Center**

**Health Care For All**

**Health Quarters**

**Massachusetts Alliance on Teen Pregnancy**

**Massachusetts Family Planning Association**

**NARAL Pro-Choice Massachusetts**

**Tapestry Health**

**Victim Rights Law Center**