

# 100% HEALTHCARE: ARE SCHEME WORDINGS GETTING MORE READABLE?

The readability of second-tier social insurance wordings has always been a moot point. Everyone has something to say but nothing more happens. The National Union of Complementary Healthcare Insurers - Unocam - has been working on this since the signing of the common declaration in October 2010 committing all industry players to improve the readability of their cover wordings. In 2014, the Hamon law set out to make it easier to compare offerings and help the consumer make an informed choice. Still nothing spectacular has happened as regards readability

## Policy readability and the 100% Healthcare reforms

Today, for an individual, deciphering a contract, understanding a list of covers or comparing several competing offers remains a difficult exercise. If what is on offer is not understandable and comparable, the policyholder is unable to make an informed choice. Readability of policy wordings is therefore, first and foremost, a question of consumer protection. In addition, when it comes to the 100% Healthcare reform, this takes on an even greater importance since lack of readability can hamper access to care. If the insured cannot know exactly how much will be reimbursed when settling his/her copay, how can that person be satisfied that the healthcare received is fully covered? Readability of covers is therefore an issue where the reform could risk becoming ineffective in terms of reducing abandonment of healthcare, and, even worse, become totally illegible.

## Unocam's commitments

The industry has accepted to take up the readability challenge. On 14 February, Unocam and the main federations of complementary healthcare insurers (FNMF, FFA and CTIP) signed a commitment as to readability of covers bringing together a series of rather precise measures that are quite close to what the public authorities were expecting. The document provides for the harmonisation of wordings and titles, and the organisation of covers into five compulsory categories - hospitalisation, dental, routine care, optics and hearing aids - which can be supplemented by a maximum of five other categories so as not to be too confusing.

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## A table setting out around fifteen standard examples

What could really facilitate the insured's understanding is the obligation to provide examples of treatment for around fifteen standard cases, ranging from flat hospital fees to class A optical equipment (100% Healthcare) i.e. uni-focal lenses, or another example: ceramic-metallic crowns on molar teeth. For each care item a breakdown in Euros will be shown: tariff rate, share covered by Social Security, reimbursement from complementary healthcare insurance and finally the patient's copay. The tariff rate shown will be, depending on the case, the regulated tariffs (regulatory tariff, conventional or capped tariff ) or else the average prices seen across the country. Each insured person will therefore be able to find this same table in different offerings, with maybe a few additional boxes incorporating other examples or else features specific to certain healthcare networks.

## Still some grey areas

A table of examples will not, with the wave of a magic wand, clarify what is not clear from the outset. For example, an insured person will be able to see the difference in cover for a surgeon inside or outside the DPTAM agreement, without having to figure out any further details. Prices in the table will be expressed in Euros but people who are curious for more detail will need to consult the new terminology (capped price and maximum billable fees, class 1 or 2, class A or B). The area of harmonisation of treatment names has not yet been clarified so it is still possible that in 2020 reimbursements of care will still be expressed in cover tables in terms of a percentage of BRSS (basis for Social Security reimbursement) Comprehension for the reader is, then, close to zero.

Maybe in the long run it is the simulators that the insurers have promised to develop that will throw some light on the subject. Smartphone applications may well be the tool that will help us familiarise ourselves with the insurance covers and make them readable, allowing us to see the details of reimbursements received from each insurer and any copay left for the user.

Gerep is currently developing an online simulator aimed at improving coverage readability and this will complete its 100% digital offering.

Damien Vieillard-Baron

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