

U.S. News unveils ranking of health plans.

[U.S. News & World Report](#) (11/7) recently released its ranking of top health insurance plans in the U.S., splitting the judging into [commercial plans](#), [Medicare plans](#), and [Medicaid plans](#).

In an introductory article, [U.S. News & World Report](#) (10/7, Andrews) reports, "For years, workers have watched their healthcare outlays rise and benefits shrink, and for some, whether they will have benefits at all suddenly is in doubt." And as the economy weakens and more companies begin trimming staff, "your healthcare, along with your job and your 401(k), could suffer as well. Many employees may worry they're only a couple of bad balance sheets away from joining the ranks of the nearly 46 million Americans without health insurance. Unfortunately, they may be right." For those that do find themselves unemployed, U.S. News notes that "taking advantage of COBRA can be costly." However, "healthcare insurance providers themselves are unlikely to go under. State regulators keep close tabs on these companies." So for those that can find coverage, "that's one less thing to worry about."

In their ranking of health plans, [U.S. News & World Report](#) (11/7, Comarow) points out in another article that some plans did not turn over the data necessary for the magazine to rank them. "To appear in the annual U.S. News Best Health Plans rankings, managed-care providers have to turn over data describing their performance in a host of clinical and member-satisfaction measures to our rankings partner, the National Committee for Quality Assurance. They also must agree to make the information public." U.S. News offers a [table](#) of some of the larger plans that did not offer data.

[U.S. News & World Report](#) (11/7, Johnson) also offers advice on how to pick a health insurance plan. Of the ten tips, U.S. News advises readers to weigh flexibility and check the provider network of potential plans. Consumers can also "cut expenses with a tax-deductible FSA" and "check out wellness management incentives," which may lead to cost savings.

In a longer article, [U.S. News & World Report](#) (11/7, Raeburn) reports that medical billing advocates may offer patients an alternative to negotiating with health insurers who deny a patient's claim. "Billing advocates have several lines of attack they can follow. They often uncover errors such as services that were billed but never delivered and single procedures billed multiple times." Moreover, they "have tools to determine typical payments to hospitals and physicians by Medicare and private insurers, which are lower than the amounts charged to out-of-network patients and even lower than the charges levied on patients with little or no insurance."