Abstract

Objective. To estimate reimbursement rate differences between Mexico and US based physicians reimbursed by a binational health insurance (BHI) plan and US payers, respectively; and show the relationship between plan benefit designs and health care utilization in Mexico. Materials and methods. Data include 33,841 and 53,909 HMO enrollees in California from Sistemas Médicos Nacionales (SIMNSA) and Salud con Health Net, respectively. We use descriptive statistical methods. Results. SIMNSA’s physician reimbursement rates averaged 50.7% (95% CI: 34.5%-67.0%) of Medi-Cal’s, 28.3% (95% CI: 19.6%-37.0%) of Medicare’s, and 22% of US private plans’. Each year, 99.4% of SIMNSA enrollees but only 0.1% of Salud con Health Net enrollees obtained care in Mexico. Conclusion. SIMNSA only covers emergency and urgent care in the US, while Salud con Health Net covers comprehensive care with higher patient cost sharing than in Mexico. To realize potential savings, plans need strong incentives to increase utilization in Mexico.

Keywords

Binational health insurance; US-Mexico border; emigrants and immigrants; health care costs; cross-border health care utilization; medically uninsured.