



Access Health CT

Enrollee Census and Understanding Study

access health CT 

The logo graphic for Access Health CT consists of a cluster of orange dots of varying sizes arranged in a roughly triangular shape, with the text "access health CT" in orange lowercase letters to its left.

September 17th, 2014

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Methodology

A two-part telephone survey among primary enrollees of Access Health CT's available plans (either a QHP or Medicaid plan) was conducted:

- Part 1: A 5-minute survey among 6,015 primary enrollees
- Part 2: 1,363 primary enrollees stayed on the line to complete an additional 17-minutes of questioning
 - Dialing began July 17th, 2014 and ended September 7th, 2014
 - Interviews were conducted in English and Spanish
 - Customer sample records included landline and cell phone numbers
 - Completes were obtained in proportion to the known characteristics of Access Health CT's primary enrollee base, with the exception of a more equal distribution of completes across QHP and Medicaid enrollees
 - Data was weighted to better reflect the actual proportions of primary QHP enrollees vs. primary Medicaid enrollees

Detail of Survey Completes

A total of 6,015 completes were obtained, as follows:



	Short Survey	Long Survey
Total Completes	6,015	1,363
QHP	3,015	735
Medicaid	3,000	628
18-34	1,832	408
35-54	2,481	568
55-64	1,702	387
Male	2,766	608
Female	3,249	755
Fairfield County	1,533	353
Hartford County	1,613	351
Litchfield County	326	73
Middlesex County	245	59
New Haven County	1,432	329
New London County	434	89
Tolland County	230	50
Windham County	199	58
County Unknown	3	1
Anthem Blue Cross and Blue Shield	1,614	412
ConnectiCare Benefits Inc	1,282	292
HealthyCT Inc	119	31
Catastrophic	59	16
Bronze	436	113
Silver	2,034	484
Gold	486	122
Medicaid	3,000	628

Executive Summary

With at least 8 in 10 enrollees being satisfied, and three-quarters stating they've already used their insurance, Access Health CT can feel proud of the successful outcome of its engagement with enrollees.

- A full **54% of enrollees did not have insurance** in the year prior to enrolling with Access Health CT.
- Roughly **4 in 10 enrollees took a “DIY” approach to enrollment**, preferring to handle enrollment themselves online. Of the 2 in 10 who used the call center, the majority were satisfied with their experience – especially so among Medicaid enrollees.
- Given the demographic differences between QHP and Medicaid enrollees, **expectations prior to enrollment and satisfaction post-enrollment show some opportunities for targeted messaging**. QHP enrollees have slightly more modest expectations of Access Health CT compared to Medicaid enrollees, but are more price-sensitive and therefore more prone to disappointment surrounding cost and value.
- Generally speaking, QHP enrollees place **more value on “tried & true” information sources** (brokers, doctors) whereas **Medicaid enrollees value word-of-mouth and Access Health CT-based sources** (website, phone center, enrollment events).

Executive Summary, continued

Following the success of its initial enrollment period, Access Health CT should shift its attention to securing positive re-enrollment numbers.

- Messaging opportunities regarding re-enrollment among QHP enrollees are clear:
 - Make sure to get the word out early that **re-enrollment is necessary** in order to continue coverage. Most enrollees expect to hear from Access Health CT *and* their carrier at this critical time.
 - Accurately **set expectations regarding price and coverage**; differentiate “price” from “value”.
 - **Develop compelling user testimonials** to address the “people like me” and “value” issues.
 - Use the **mandate/fine** to your advantage, but with a **helpful, cost-saving tone**.
 - Avoid any “Big Brother” connotations; nobody likes a tattle-tale.
 - **Continue to establish clarity surrounding carrier identification** and **act as a liaison** between enrollees and their carrier.
 - This will help **avoid potential negative backlash** when “surprise” premium bills and cost-sharing fees pop up.
 - **Act as an advocate**. Demonstrate that **navigation extends beyond enrollment!**

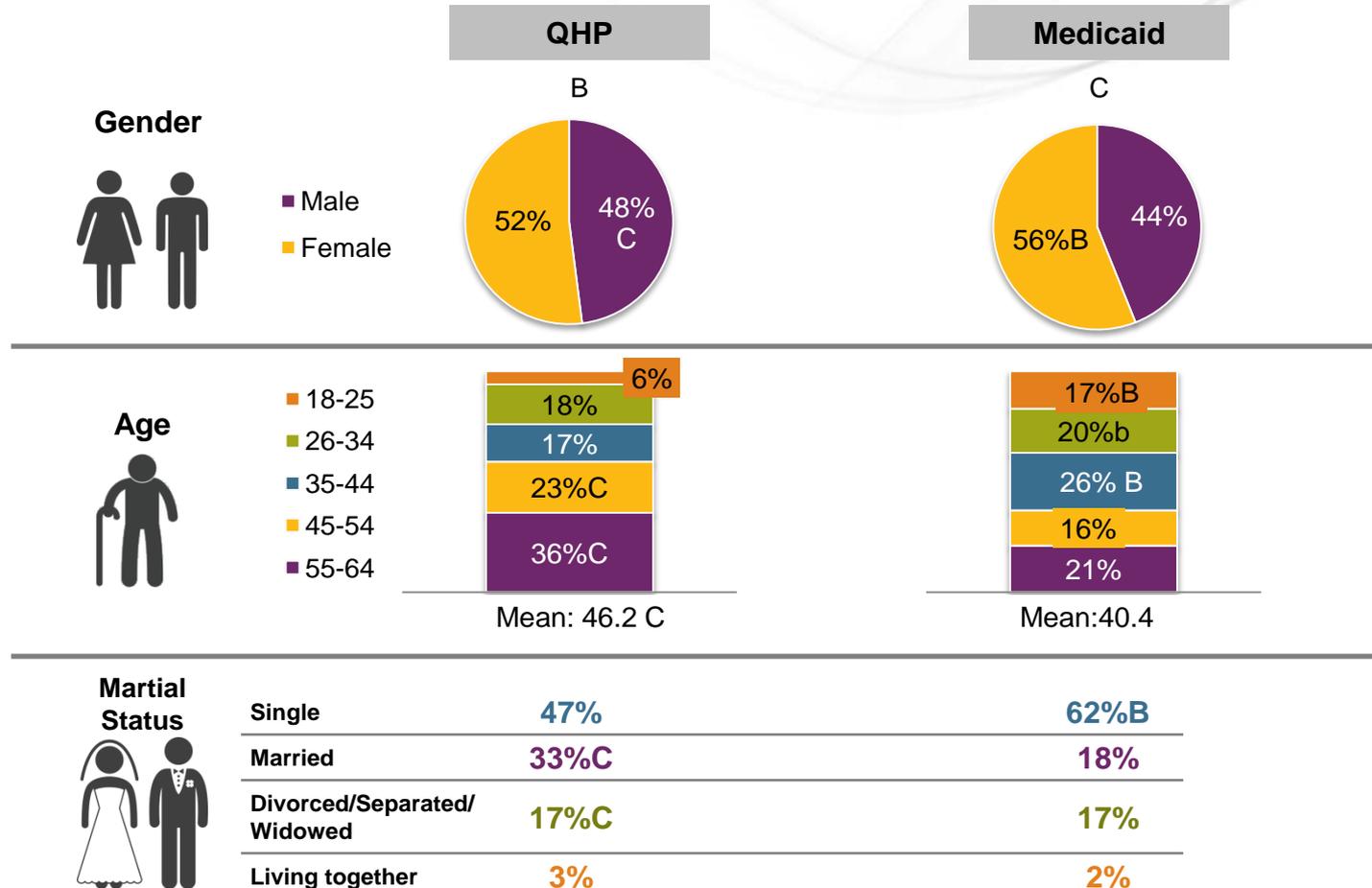


Topline Results from Short Census Survey



Enrollee Demographic Overview

QHP enrollees skew male, older, and married, whereas Medicaid enrollees tend to be female, younger or middle-aged, and single.



Base: QHP (3,015); Medicaid (3,000)
 Bb/Cc = Statistically significant at the 95%/90% Confidence Interval
 R5 Gender
 R1 Age Group
 Q5 What is your marital status?

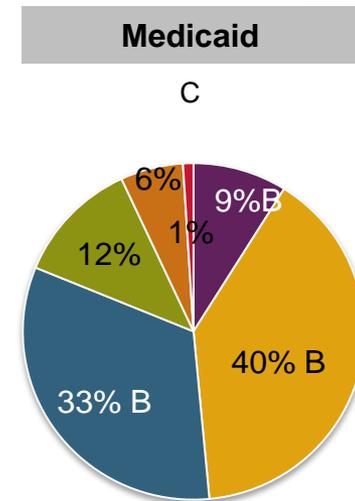
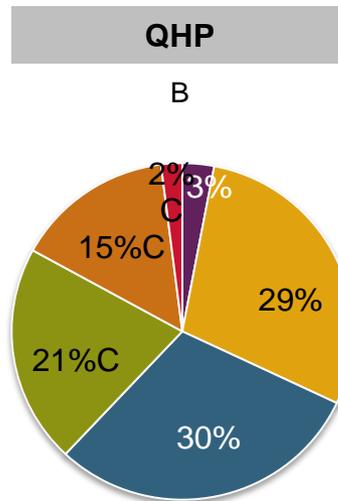
Enrollee Demographic Overview

QHP enrollees are more educated than Medicaid enrollees, with 36% having at least a bachelor's degree.



Education

- Less than high school graduate
- High school graduate or G.E.D.
- Some college or an Associate's Degree
- Bachelor's degree
- Graduate or professional degree
- Refused

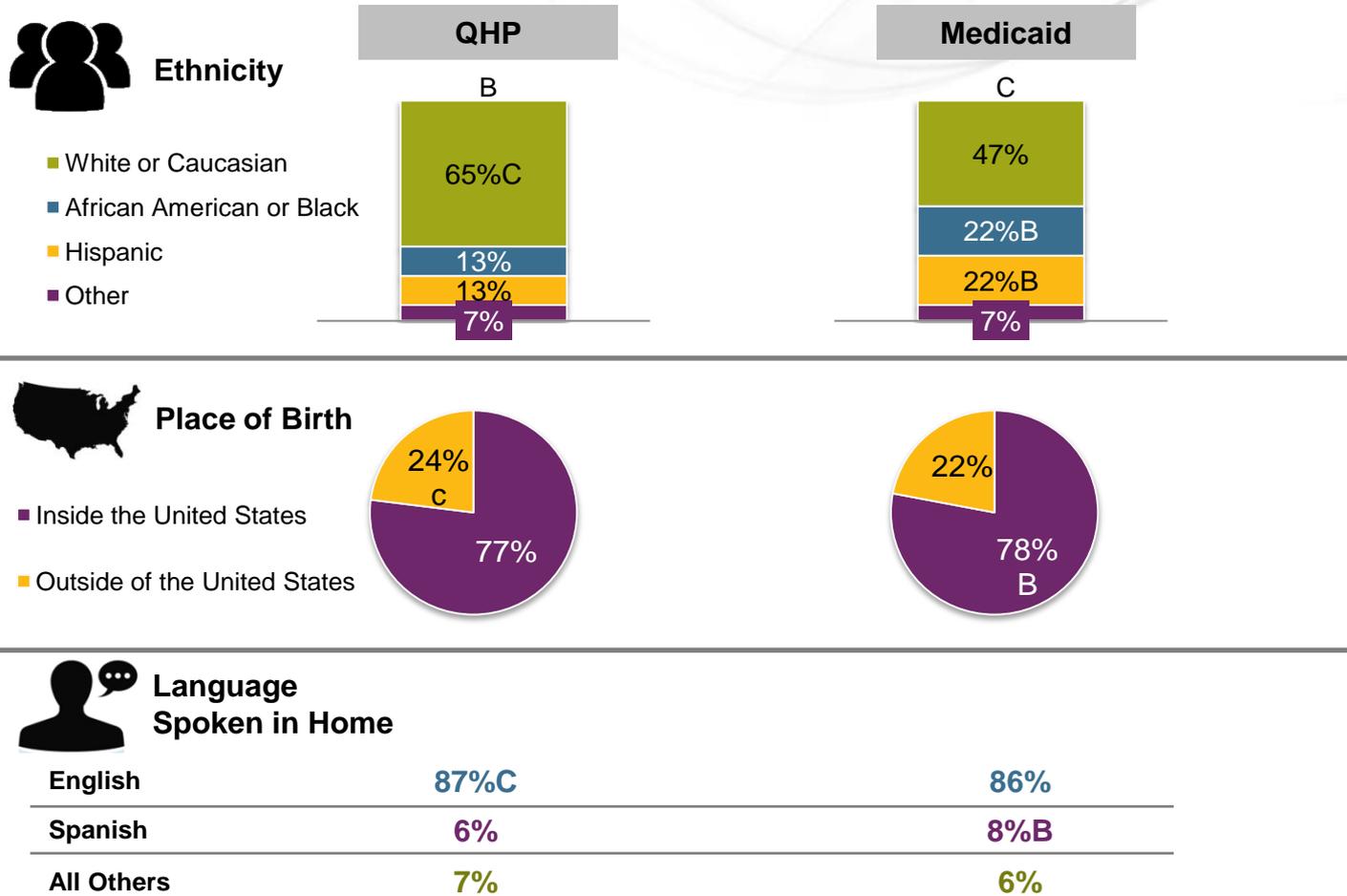


Base: QHP (3,015); Medicaid (3,000)
 Bb/Cc = Statistically significant at the 95%/90% Confidence Interval
 Q6. What is the highest level of education you have completed?

Enrollee Demographic Overview

Access Health CT has an ethnically diverse customer base. Medicaid enrollees in particular skew African American or Hispanic, and as such are more likely to speak Spanish in their home.

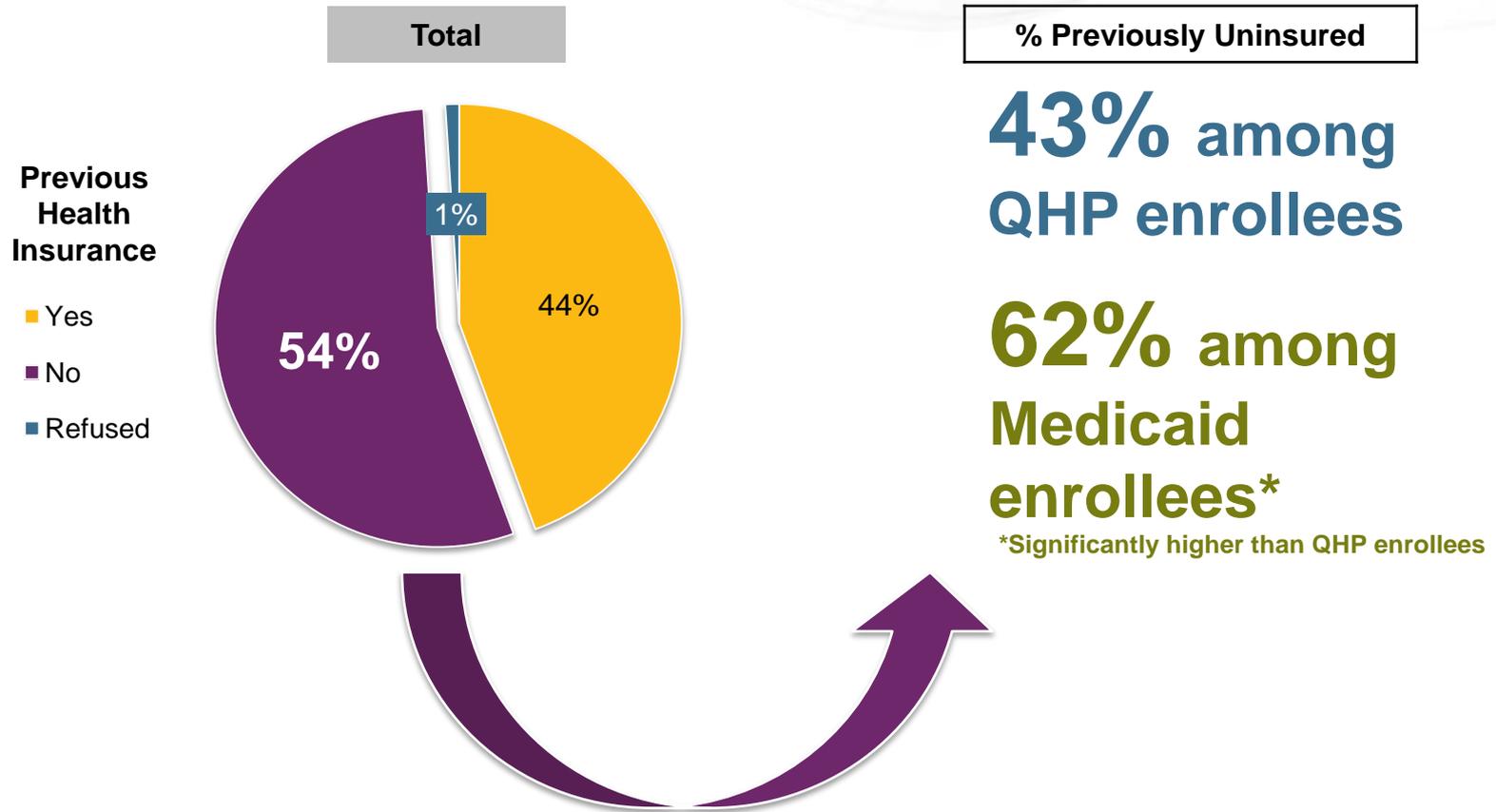
QHP enrollees are more likely to have been born outside of the United States.



Base: QHP (3,015); Medicaid (3,000)
 Bb/Cc = Statistically significant at the 95%/90% Confidence Interval
 Q8R2. Race/Ethnicity
 Q9. Where were you born?
 Q10. What is the primary language spoken in your home?

Prior Health Insurance Status

More than half (54%) of enrollee households did not have health insurance in the past year prior to signing up for a plan through Access Health CT. This is more pronounced among Medicaid enrollees.

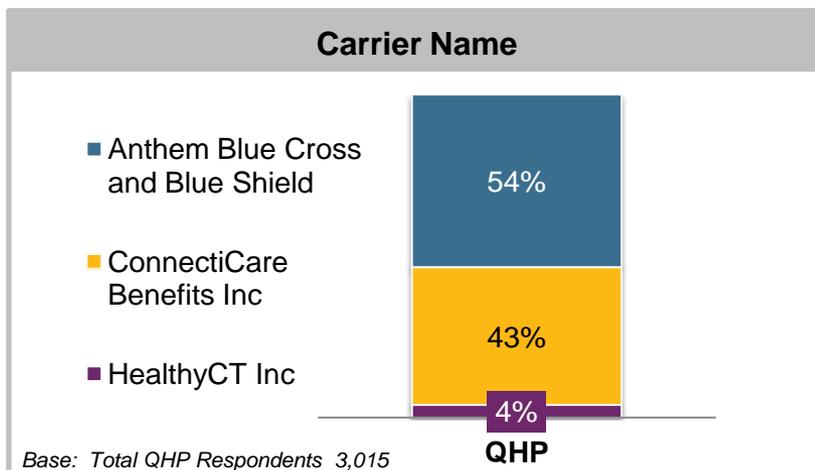
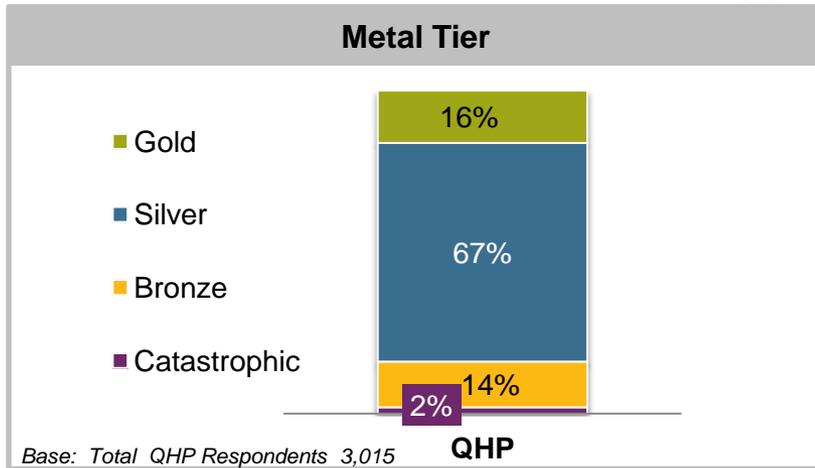


Base: Total (6,015); QHP (3,015); Medicaid (3,000)

Q11. Prior to signing up for health insurance through Access Health Connecticut, did you or anyone in your household have health insurance through another source in the past year such as your employer, your spouse's employer, a union, Medicaid, etc?

Metal Tier and Carrier

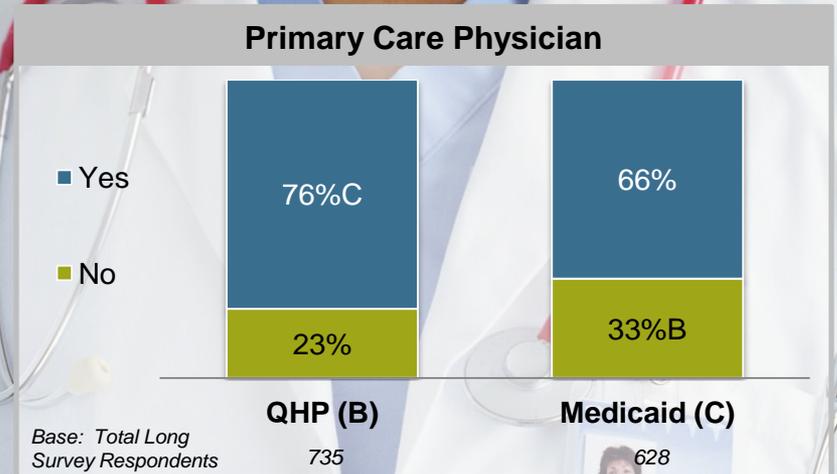
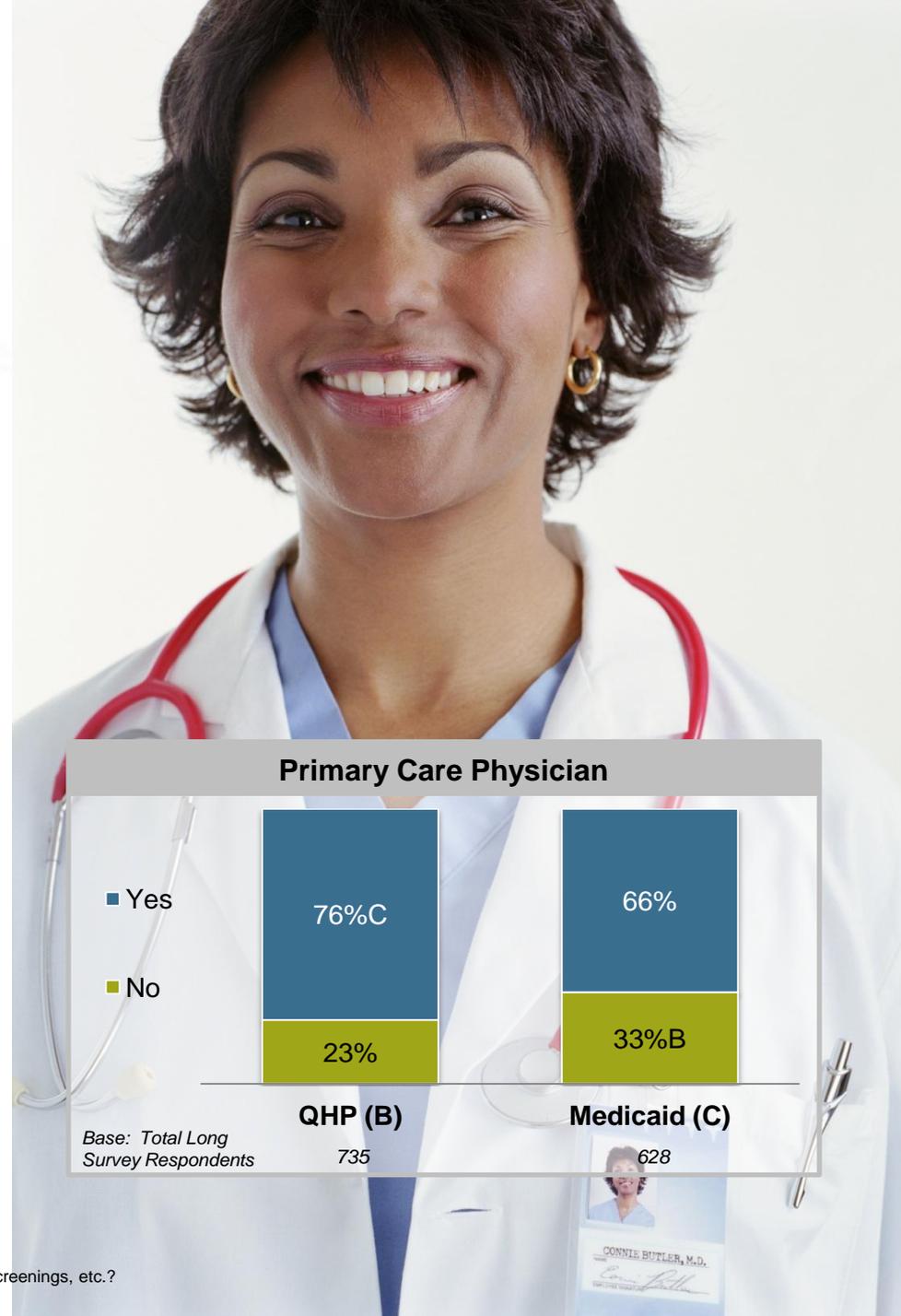
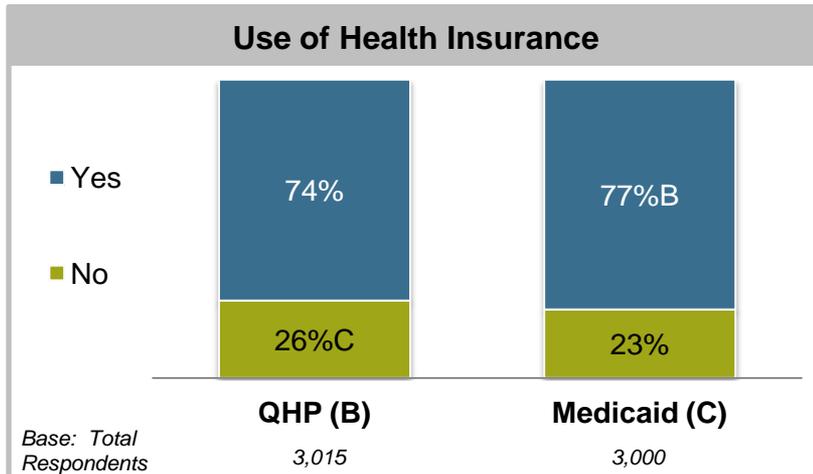
Most QHP enrollees signed up for a Silver plan, with Anthem being the most popular carrier at 54%.



Health Insurance Usage

About three-quarters of all enrollees have used their insurance since signing up, with roughly 7 in 10 stating they have a primary care physician.

QHP enrollees are significantly more likely than Medicaid enrollees to have a primary care physician.

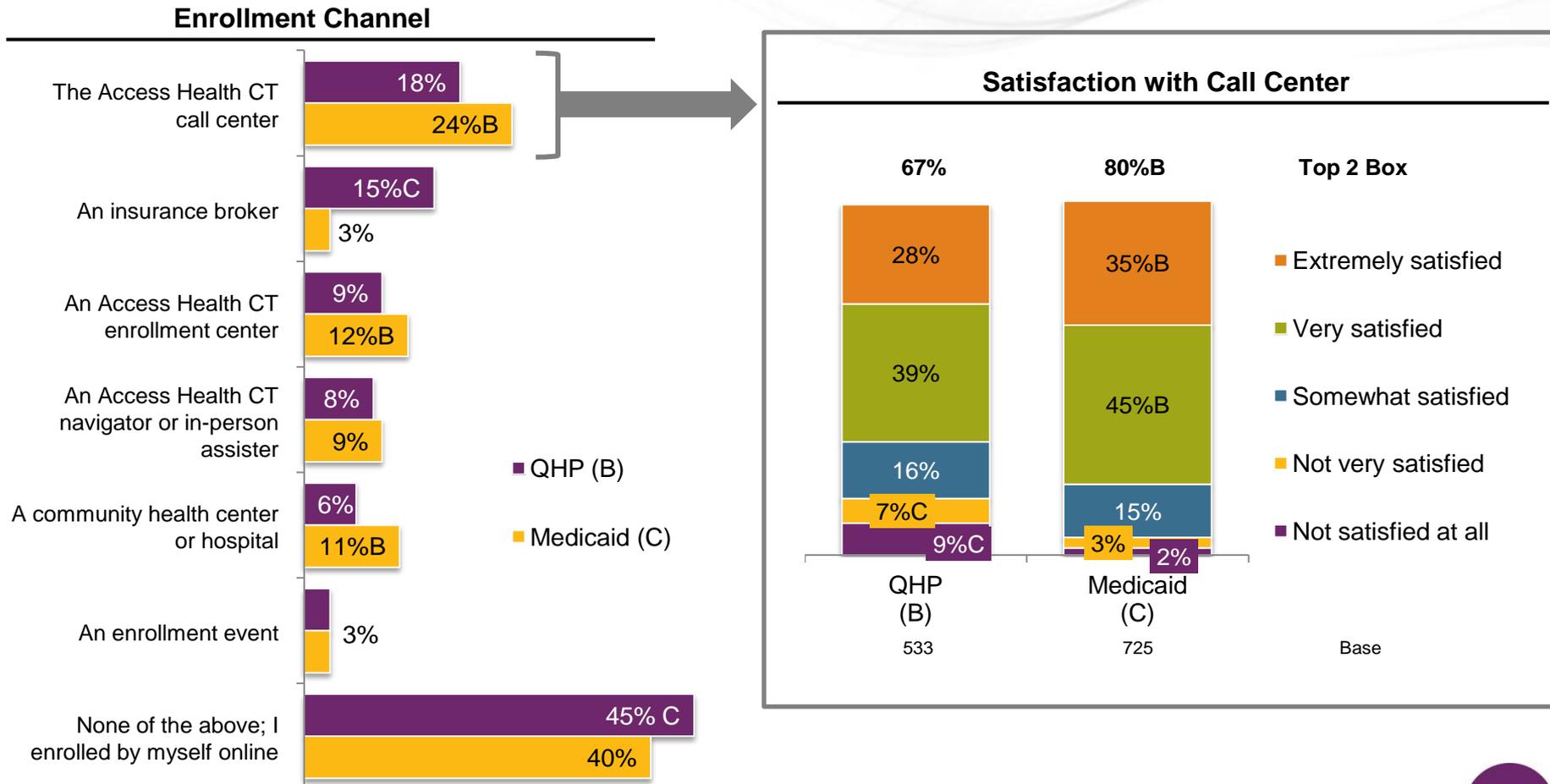


Bb/Cc = Statistically significant at the 95%/90% Confidence Interval
 Q4. Have you used your health insurance yet – such as for doctors visits, hospitalizations, health screenings, etc.?
 QD2. Do you currently have a primary care physician?

Enrollment Channel

QHP enrollees were more likely to enroll by themselves online or via a broker, whereas the call center, enrollment centers, health centers/hospitals were more popular channels among Medicaid enrollees.

Of the enrollees who used the call center, Medicaid enrollees were significantly more satisfied with their experience (80% Medicaid vs. 67% QHP).



Base: QHP (3,015); Medicaid (3,000)

Bb/Cc = Statistically significant at the 95%/90% Confidence Interval

Q2 Through which of the following ways did you enroll for health insurance through Access Health Connecticut?

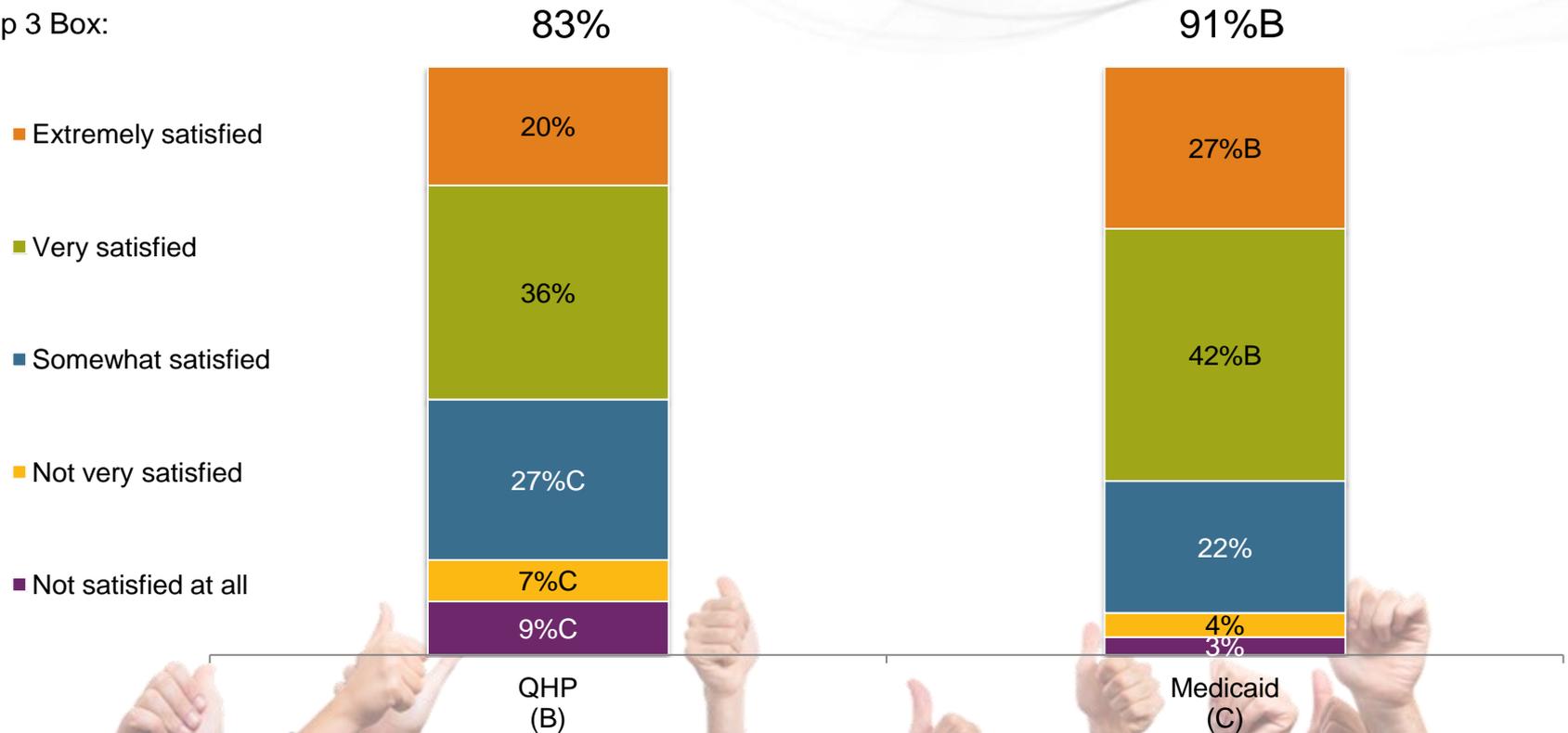
Q3 How satisfied were you with the help you received through the call center? Would you say you were...?



Overall Satisfaction with Enrollment Process

Medicaid enrollees were significantly more satisfied with the enrollment process compared to QHP enrollees.

Top 3 Box:



Base: QHP (3,015); Medicaid (3,000)

Bb/Cc = Statistically significant at the 95%/90% Confidence Interval

Q1 How satisfied were you with the sign up process? Would you say you were...?



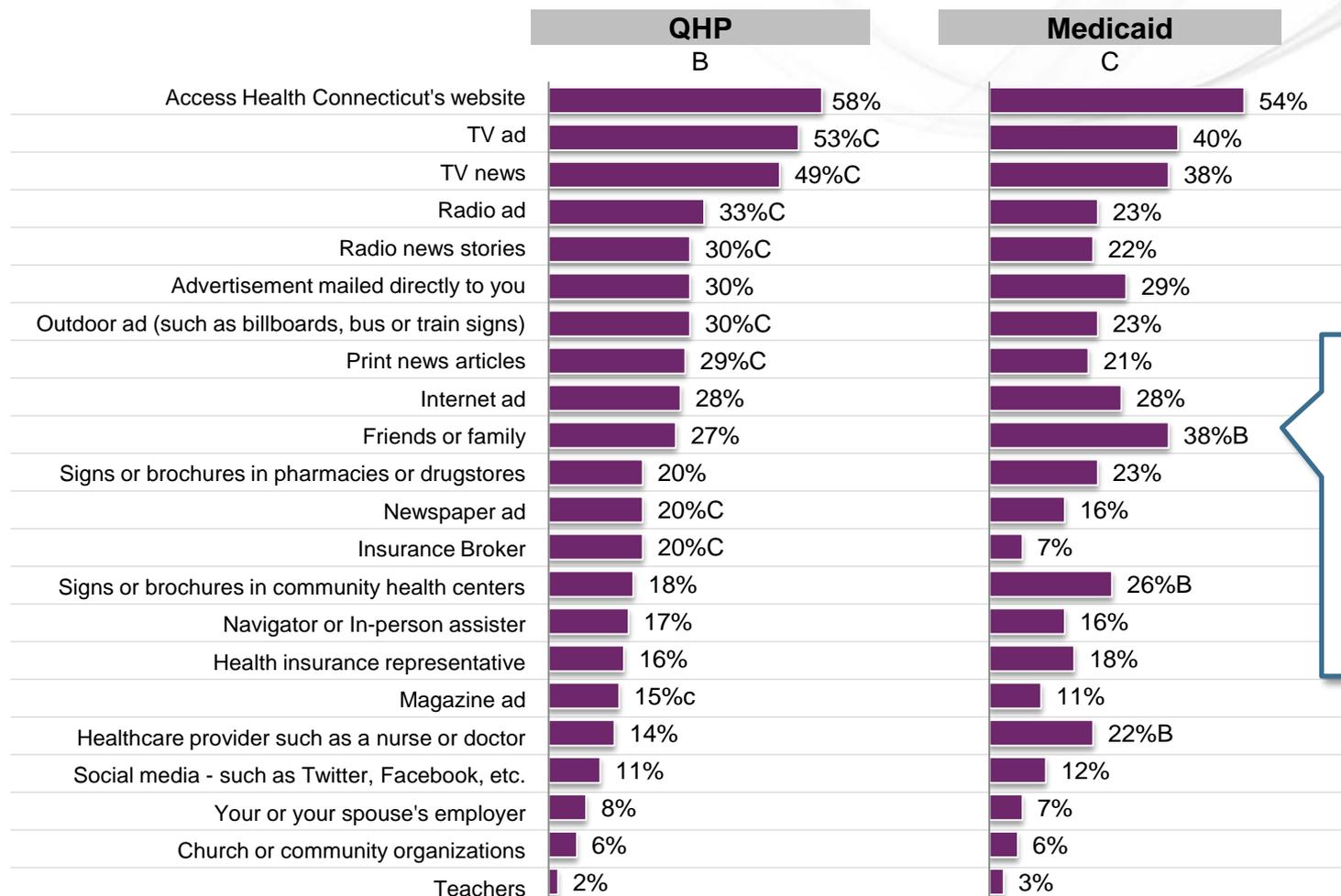


Topline Results from Long, Detailed Survey



Sources of Awareness of Access Health CT

Access Health CT's website, TV (ads and news), and radio (ads and news) are the most popular sources of awareness of Access Health CT among QHP enrollees.



Friends/family, signs/ brochures in health centers, and healthcare providers were more popularly used sources among Medicaid enrollees

Base Total Long Survey Respondents: QHP (735); Medicaid (628)
 Bb/Cc = Statistically significant at the 95%/90% Confidence Interval
 Q26. Have you seen, heard or read anything about Access Health Connecticut in/on/from...?



Expectations Prior to and After Enrollment

Most enrollees expected to find a plan to meet their needs, to feel confident in their plan choice and informed in their decision, and that the cost of coverage would be fair. QHP enrollees expected to qualify for tax credits, which perhaps explains their lagging ratings on having expectations met. Managing expectations among QHP enrollees will be critical for future re-enrollment and success.

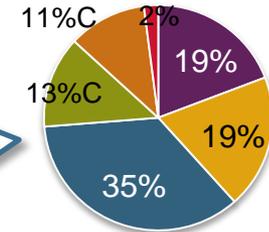
Enrollment Expectations – Strongly/Somewhat Agree

Access Health Connecticut Expectations Met

QHP

73%

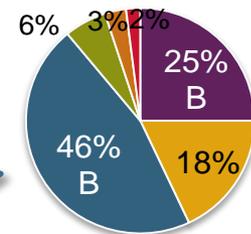
Said their expectations were met or exceeded



Medicaid

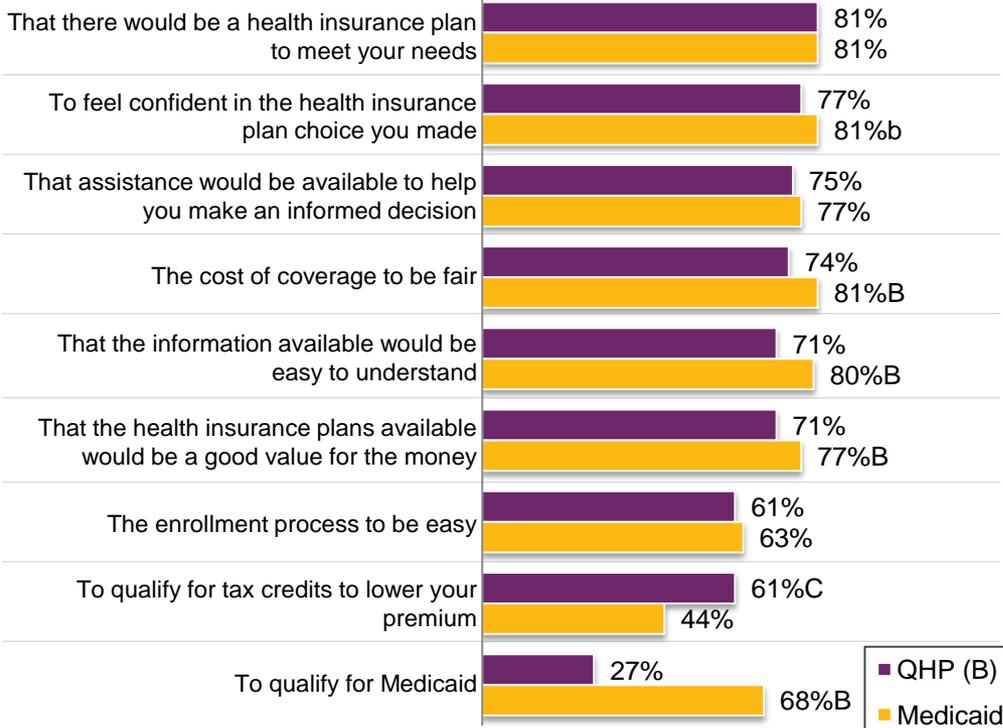
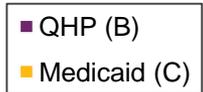
89%*

Said their expectations were met or exceeded



*Significantly higher than QHP enrollees

- Far exceeded your expectations
- Somewhat exceeded your expectations
- Met your expectations
- Fell somewhat short of your expectations
- Did not meet your expectations at all
- Don't know



Base Total Long Survey Respondents: QHP (735); Medicaid (628)
Bb/Cc = Statistically significant at the 95%/90% Confidence Interval

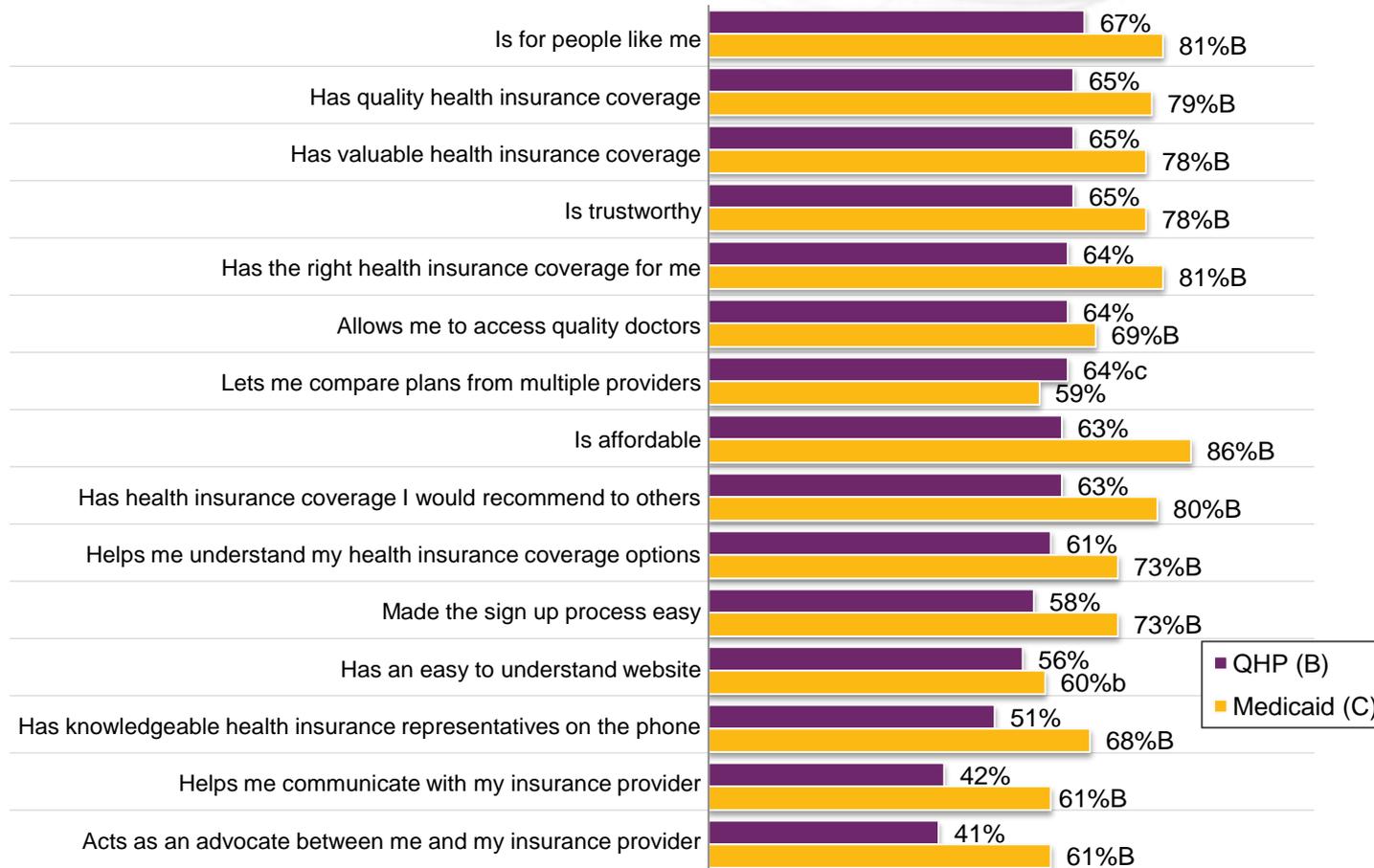
Q15. Prior to recently enrolling for health insurance through Access Health Connecticut, what expectations did you have about the process? Using a scale of 1 to 5, where "1" means you "Strongly Disagree" and "5" means you "Strongly Agree", how much do you agree or disagree with each of the following statements? Did you expect...

Q28. How well has Access Health Connecticut met your expectations? Would you say Access Health Connecticut...



Perceptions of Access Health CT

Overall, Medicaid enrollees have much more positive perceptions of Access Health CT than QHP enrollees. Specifically, perceptions of affordability, offering the right coverage that they would recommend, and having knowledgeable associates are areas of focus when messaging to QHP enrollees.



Base Total Long Survey Respondents: QHP (735); Medicaid (628)
 Bb/Cc = Statistically significant at the 95%/90% Confidence Interval

Q27. Please tell me how much you agree that the following statements describe Access Health Connecticut, by using a scale of 1 to 5, with "1" meaning "Does not describe at all" and "5" meaning "Describes extremely well". The higher the number, the more the statement describes Access Health Connecticut.

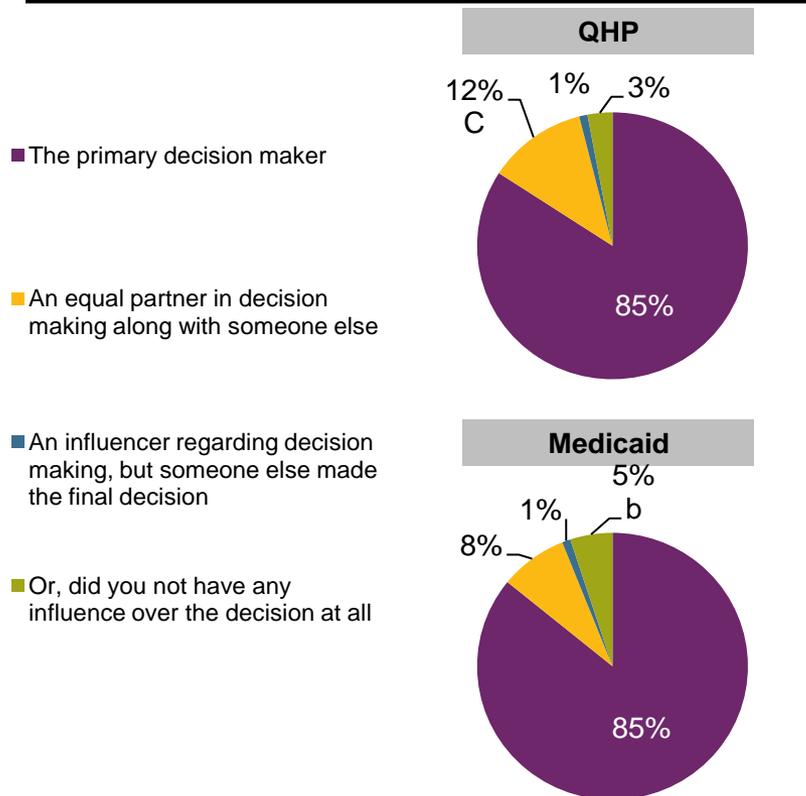


Decision-Making and Influence

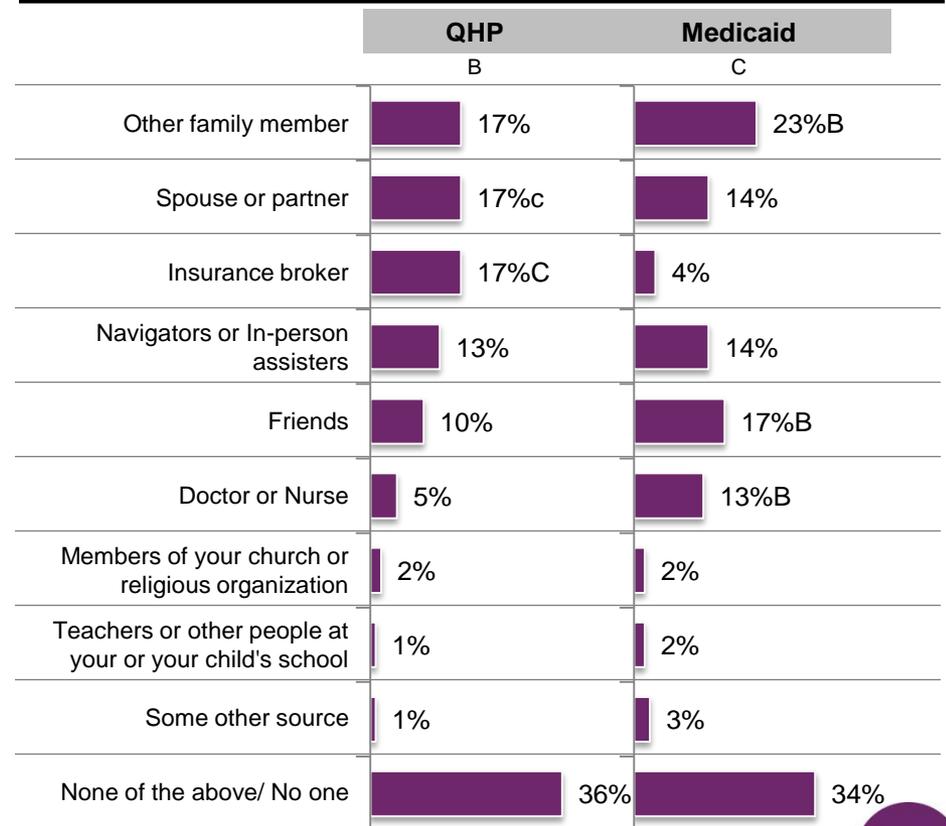
Over 8 in 10 enrollees say they were the primary decision maker when selecting their/their family's health insurance plan, with about 1/3rd not consulting with anyone else when choosing their plan.

Medicaid enrollees were more likely than QHP enrollees to consult with other family members, friends, doctors or nurses. QHP enrollees were more likely to be influenced by their spouse or insurance broker.

Decision-Maker Role



Other Influencers



Base Total Long Survey Respondents: QHP (735); Medicaid (628)

Bb/Cc = Statistically significant at the 95%/90% Confidence Interval

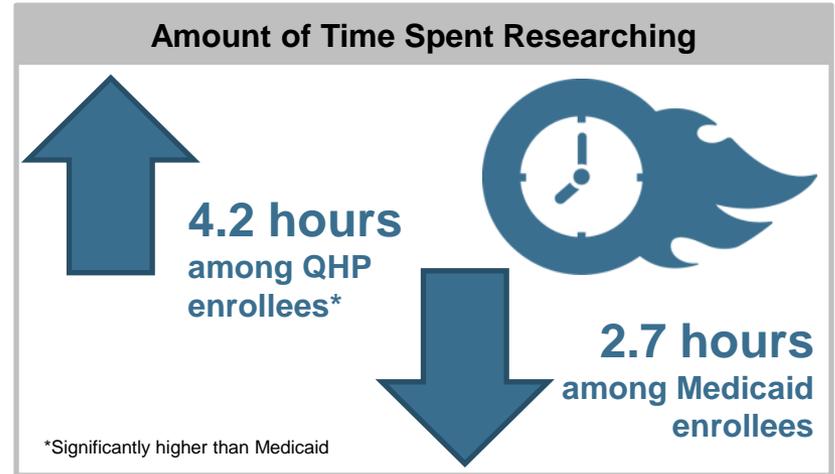
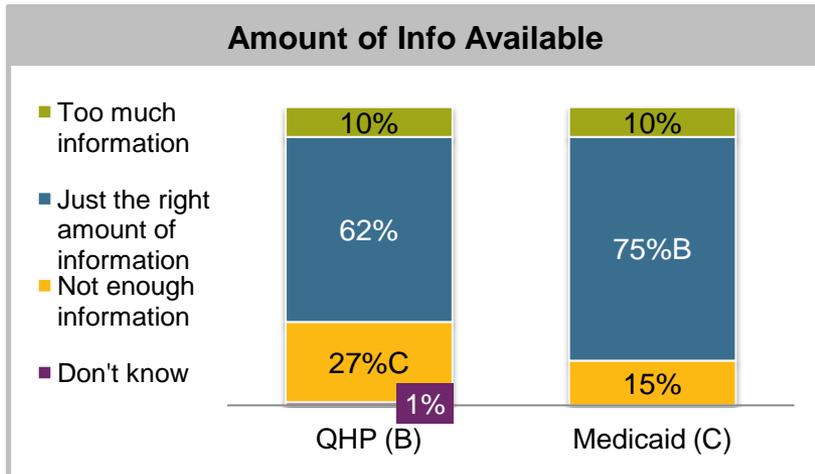
Q20. When selecting the health insurance plan for you and/or your family, were you...?

Q21. Which of the following people, if any, influenced your decision when selecting the health insurance plan you chose through Access Health Connecticut?

Information and Research

The majority of enrollees (62% QHP, 75% Medicaid) felt they had just the right amount of information during the sign up process. However, 3 out of 10 QHP enrollees report not having enough.

On average, QHP enrollees spent 4.2 hours researching, and Medicaid enrollees spent 2.7 hours – which is critical to keep in mind when developing future enrollment materials. What information can consumers easily digest in that time frame? Is it the *right* information?



Base Total Long Survey Respondents: QHP (735); Medicaid (628)
 Bb/Cc = Statistically significant at the 95%/90% Confidence Interval

Q18. Thinking about all the information available to you during your sign up process, would you say it was...?

Q19. Approximately how much time did you spend researching health insurance plans available through Access Health Connecticut?



Sources of Information Used

Access Health CT's website and the internet in general were the most widely used sources of information when enrollees considered Access Health CT, followed by the call center.

Providers' websites, online cost calculators, navigators/assisters, and brokers were more widely used by QHP enrollees than Medicaid enrollees.



	QHP B	Medicaid C
Access Health CT website	76% ^C	61%
The internet	72% ^C	59%
Access Health CT call center	46%	49%
Health insurance providers' websites	40% ^C	27%
Online cost calculators	34% ^C	13%
Access Health CT enrollment centers	29%	32
Navigators or In-person assisters	28% ^C	21%
Friends and family members	25%	33% ^B
Health insurance providers' telephone information lines	25%	24%
Television ads	25%	23%
An insurance broker	25% ^C	6%
Brochures or pamphlets	15%	17%
Enrollment events	13%	13%
Email newsletters	12% ^c	9%
Doctors or nurses	11%	18% ^B
Radio ads	10%	9%
Department of Social Servic	9%	41% ^B
Customer testimonials	8%	10%
Libraries	6%	7%
Access Health CT's presence on social media, such as Twitter or Facebook	5%	6%
Benefit managers at your or your spouse's work	4%	4%
Town hall meetings	4% ^C	2%

Base Total Long Survey Respondents: QHP (735); Medicaid (628)
 Bb/Cc = Statistically significant at the 95%/90% Confidence Interval
 Q16A. Which of the following sources of information did you use when considering health insurance plans through Access Health Connecticut? Did you use...

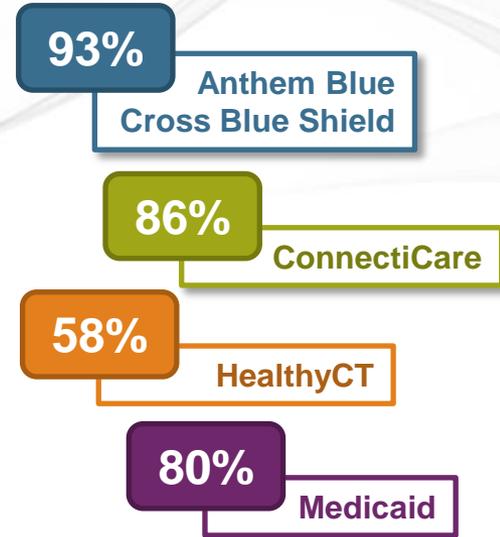
Carrier Identification



Most enrollees were able to accurately identify their carrier – both on their own (unaided) and when given a list (aided). The state’s newest provider, HealthyCT, showed the weakest aided recall at 65%, suggesting low overall brand awareness.

Despite the overall positive recall, consider developing a mandatory post-enrollment check-in phase. Touching base with enrollees, particularly QHP enrollees, regarding communication with their carrier can help reinforce carrier and plan awareness and foster a positive, liaison relationship for Access Health CT between enrollees and their carriers.

% Correctly Identified Carrier, Unaided:



Aided Awareness

	Anthem Blue Cross and Blue Shield	ConnectiCare	HealthyCT	Medicaid
	K	L	M	N
Medicaid... sometimes called the HUSKY plan	2	4	10	89KL
Anthem Blue Cross Blue Shield	95N	1	6	3
ConnectiCare	1	91N	13	3
HealthyCT	0	1	65	1
Don't know	2	2	6	5KI

Correctly Identified Carrier, Aided

Base Total Long Survey Respondents: QHP (735); Medicaid (628)
 Kk/LI/Mm/Nn = Statistically significant at the 95%/90% Confidence Interval
 Q22. Who is your health insurance carrier?
 Q22A. You may have already mentioned it, but which of the following insurance carriers did you sign up for an insurance plan with?



Carrier Satisfaction, Interaction, Touchpoints, Likelihood to Switch

With 6 in 10 QHP enrollees saying they are extremely/very satisfied with their carrier, it makes sense that only 3 in 10 indicate they may switch carriers upon re-enrollment.

Though QHP enrollees report having more contact with their carrier, acting as a liaison between enrollees and carriers may increase the frequency and awareness of carrier touchpoints among the QHP population, which in turn could raise satisfaction.

	QHP	Medicaid
	B	C
Carrier Satisfaction (base: named insurance carrier)	719	594
Extremely/Very Satisfied	58	76B
Carrier Interaction (base: named insurance carrier)	719	594
Yes	84C	67
No	15	32B
Carrier Touchpoints (base: had contact with carrier)	607	399
Received my health insurance card in the mail	75C	67
Received general plan information in the mail	69	65
Received a bill for premiums. Premiums are the cost of the plan itself	69C	8
Received an explanation of benefits statement in the mail	65C	45
Spoke with a customer service representative	50C	39
Received general plan information through email	44C	18
Don't Know/refused	1	2
Likelihood To Switch Carriers (base: QHP)	606	
Very/Somewhat Likely	33	-

Bb/Cc = Statistically significant at the 95%/90% Confidence Interval

Q25. How satisfied are you with the carrier you selected for your insurance plan? Would you say you are...?

Q23. Since signing up for an insurance plan with [INSERT RESPONSE FROM Q22A], have you had any contact with or received any information from the carrier?

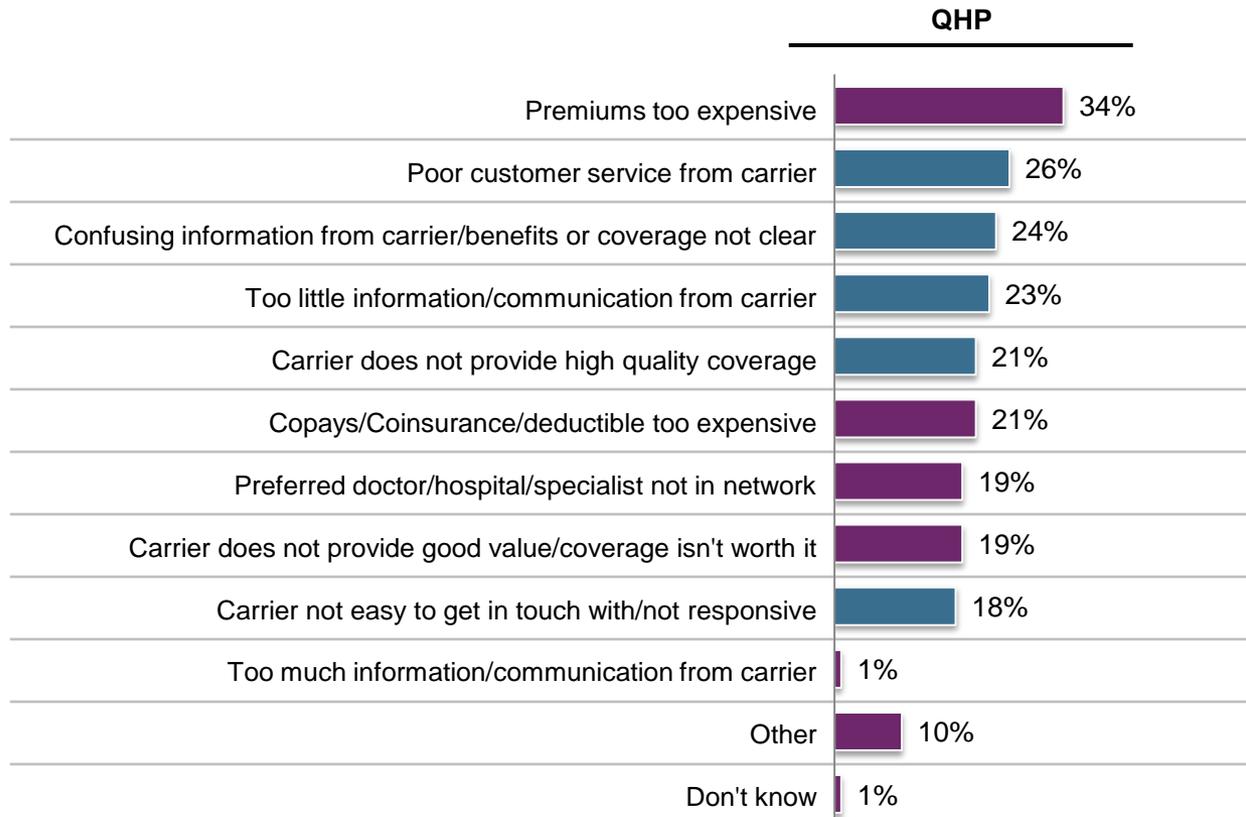
Q24. You mentioned you've had contact with or received information from your insurance carrier since signing up. Which of the following types of communication have you had with your insurance carrier?

Q31. If you do re-enroll, how likely are you to switch carriers when re-enrolling for health insurance through Access Health Connecticut?

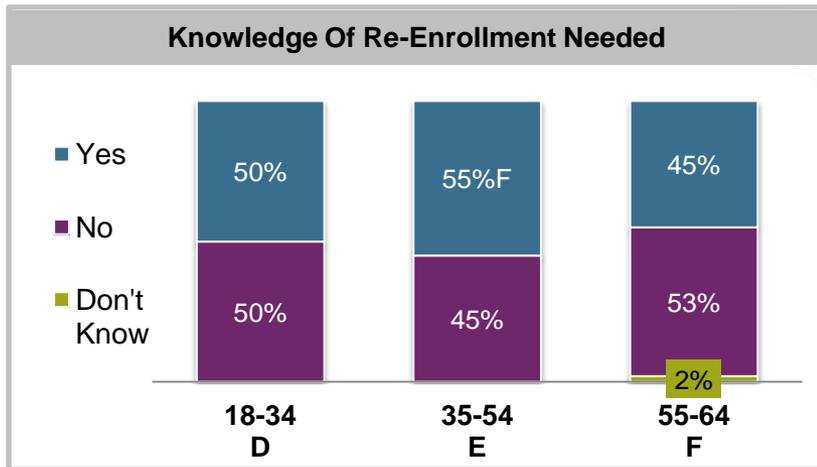
Reasons for Carrier Dissatisfaction

Among the small subset of QHP enrollees who indicate they are not very/not at all satisfied with their carrier (about 14%), the top reasons cited are “expensive premiums”, “poor customer service” and “confusing information”.

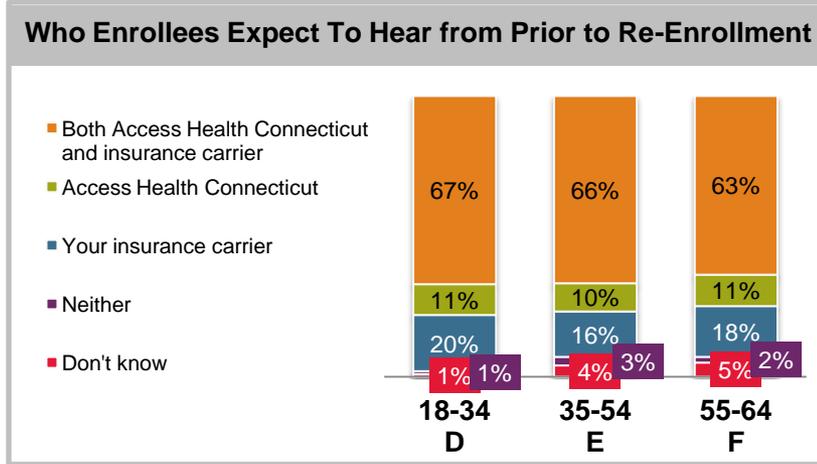
While price sensitivity can be challenging to overcome, roughly a quarter of dissatisfied enrollees indicate customer service and/or communication issues with their carrier – which presents a key opportunity for Access Health CT.



Re-Enrollment Awareness and Communication (QHP only)



QHP enrollees in the middle age bracket (35-54) are the most aware that they need to re-enroll to keep their coverage.



The majority (more than 6 in 10) of QHP enrollees, regardless of age, expect to hear from both Access Health CT and their carrier prior to re-enrollment. Open enrollment creates an important touchpoint and another opportunity to act on behalf of enrollees by making sure carriers are effectively communicating with enrollees.

Base: QHP Only: 18-34 (141); 35-54 (246); 55-64 (219)

Dd/Ee/Ff = Statistically significant at the 95%/90% Confidence Interval

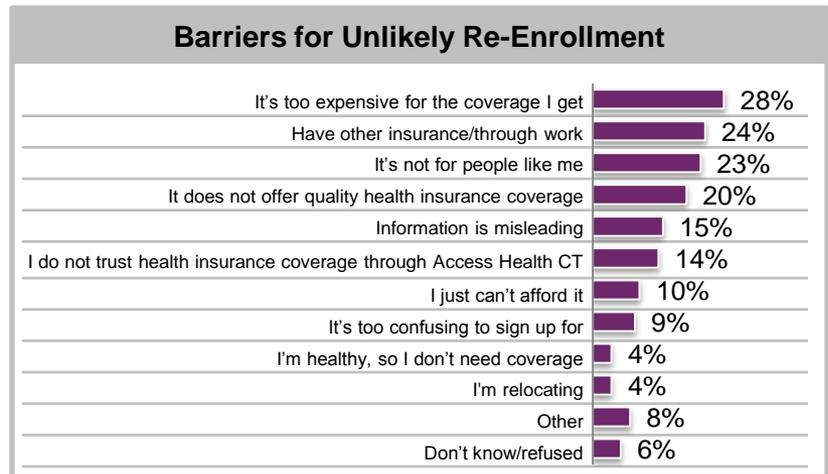
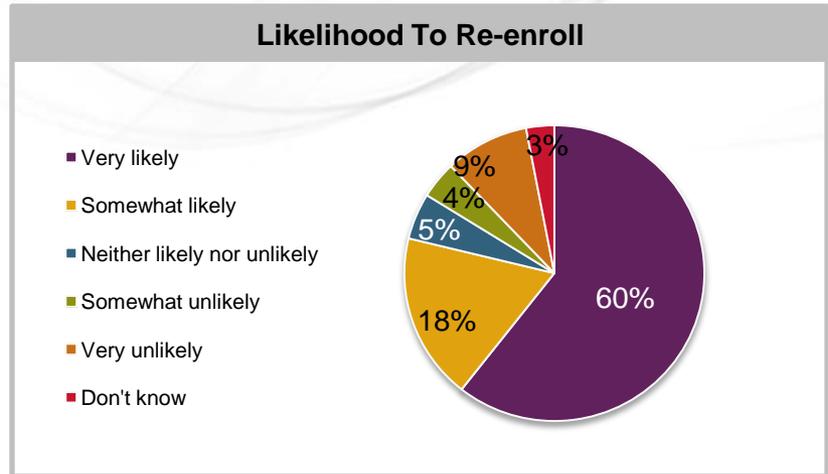
Q29. Are you aware that you need to re-enroll for health insurance through Access Health Connecticut at the end of the year in order to keep your health insurance coverage?

Q29A. Who would you expect to hear from when it comes time to re-enroll for health insurance?

Re-Enrollment Likelihood and Barriers (QHP only)

78% of QHP enrollees say they are very or somewhat likely to re-enroll for health insurance through Access Health CT at the end of the year.

Among the small subset (approximately 13%) of QHP enrollees who say they are somewhat or very unlikely to re-enroll, the most frequently cited reason is expense-related. Helping this group understand the value they get from their coverage may address the “not for people like me”, “quality”, and “misleading information” barriers as well.



Base: QHP enrollees who are somewhat/very unlikely to re-enroll (80)

Base: QHP Only: (606)

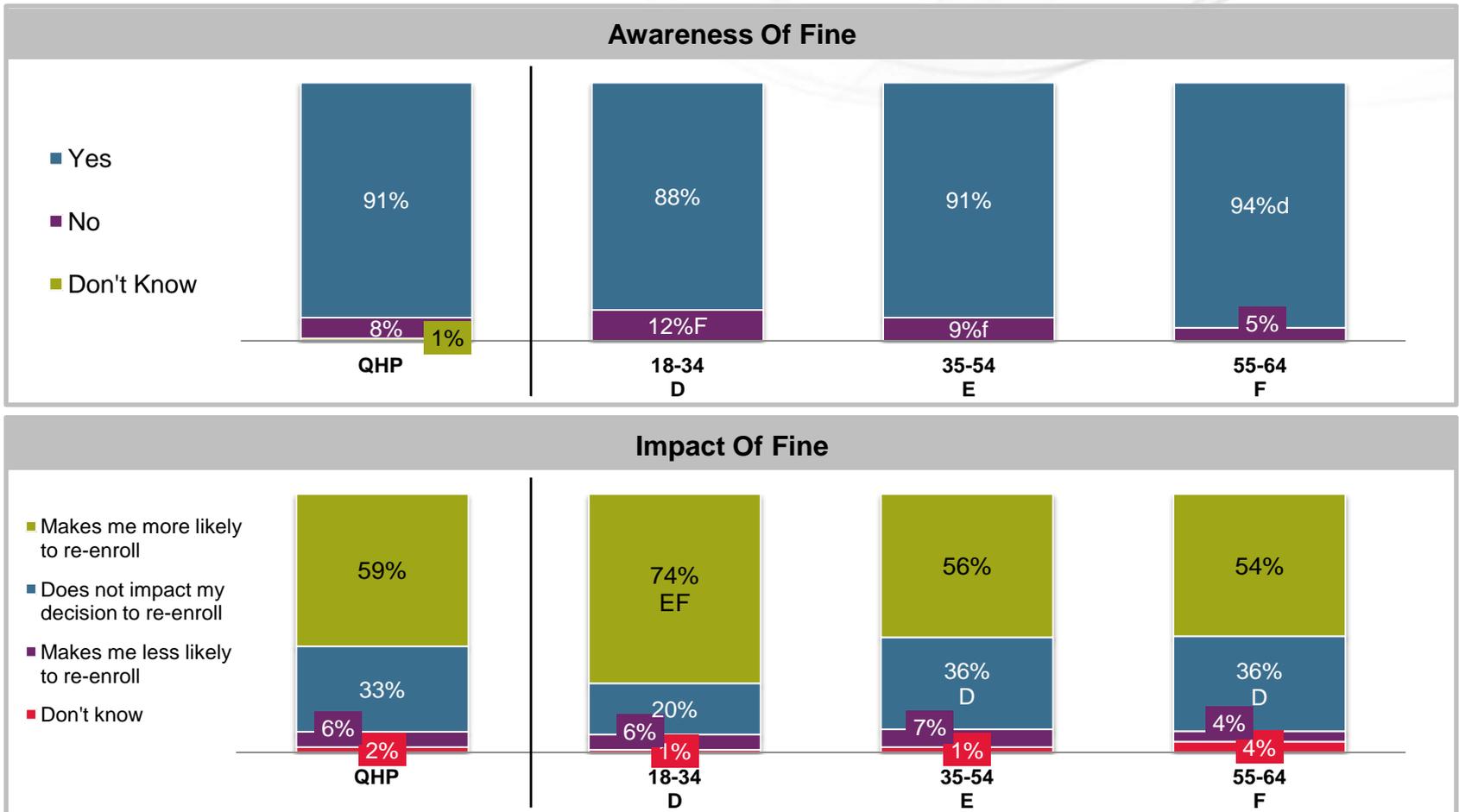
Q30. How likely are you to re-enroll for health insurance through Access Health Connecticut at the end of the year?

Q30A. Which of the following, if any, are reasons why you are [INSERT RESPONSE FROM Q30] with Access Health Connecticut in the future for health insurance coverage?



Awareness and Impact of Fine

Younger enrollees are slightly less likely to be aware of the fine for not having health insurance, but are significantly more likely to re-enroll as a result of the fine. When messaging to younger age groups, the mandate and fine will be impactful. However, avoid an authoritarian tone.



QHP Long Survey Respondents: QHP (735); 18-34 (176); 35-54 (298); 55-64 (261)

Dd/Ee/Ff = Statistically significant at the 95%/90% Confidence Interval

QD3. Are you aware there is a fine for not having health insurance?

QD4. You may or may not know this, but there is a fine for those who do not have health insurance. [READ FOR ALL] Knowing this fine exists, does it make you more or less likely to re-enroll for health insurance?