UNDERSTANDING THE UNINSURED NOW
June 2015

The Robert Wood Johnson Foundation recently commissioned qualitative and quantitative research to explore the lives of the uninsured and their perceptions about enrolling in health insurance. The research focused on adults who are currently uninsured and included in-depth interviews (36), a national survey (N=1270) and focus groups (6). This document outlines key insights from all phases of this research and provides suggested outreach strategies and messaging to reach uninsured audiences. Full survey findings can be viewed at: www.rwjf.org/en/library/research/2015/06/understanding-the-uninsured-now.html.

WHERE THE UNINSURED ARE NOW

Most of the uninsured value health insurance and are generally aware of how it works. The uninsured seem to break down into two groups—those who have looked for health insurance and those who have not. For those who have looked, they seem to be making informed, calculated decisions about whether or not to get coverage. Those who haven’t looked are less aware of their options as well as the availability of financial help to cover the cost.

Many of the uninsured are experiencing some transition such as fluctuating income, new job situations, a move or other transitions in their personal lives. These changes are their daily priority and health insurance remains on the “back burner.” Most are just trying to get by day to day, but are cautiously optimistic about the future. Health insurance is something many are putting off until life feels more stable.

It’s important to keep in mind, both for messaging and outreach purposes, that millions of uninsured remain in the “coverage gap” as they live in states that have not expanded Medicaid.

KEY MESSAGE INSIGHTS

✓ Meet people where they are to engage in a dialogue. Recognize where people are in their own lives and engage in a conversation that reflects their experiences. Many of the uninsured are experiencing some kind of transition that makes them less likely to think about looking for health insurance. Keep these transitions in mind when determining strategies to find and reach the uninsured.

✓ Fill knowledge gaps, credibly. For those who have not looked, there is an opportunity for education to fill knowledge gaps around the marketplace, financial help and eligibility.

✓ Just the facts, please! The uninsured are more skeptical, often as a result of personal experiences. Don’t overpromise and stay away from “sales-y” language. They also want and need straightforward information, particularly about tax credits, the fine and special enrollment periods/life changes.

✓ Be direct, but respect decisions. Provide information on factors that may impact their decision to get coverage, such as the increasing fine, but stay away from shaming consumers for not having health insurance or not following the law. This is ultimately their personal decision.
MESSAGES THAT RESONATE

While health insurance messaging to the uninsured has evolved during the past two open enrollment periods, similar themes continue to rise to the top as motivators to look into coverage options and take steps toward enrollment.

**Protects you from the unexpected.** The notion that health insurance protects them and their families from the unexpected continues to resonate. Most of the uninsured value insurance, and this message simply reminds them that you never know when you might need it. The idea of protecting their families from financial hardship was especially compelling for parents.

> "An accident or injury can happen any day. When it does, the last thing you should worry about is how to pay for your health care. Find a health insurance plan that keeps you covered no matter what life throws at you."

**The marketplace has new plans, prices.** Reminding consumers that there are annual changes to plan offerings and prices encouraged them to go to the marketplace to see if there were new options for them. This gives individuals who looked during the previous open enrollment period a reason to go back and helps reinforce the concept of checking out your plan options every year.

> "Even if you’ve looked before, health insurance plans and premiums change every year. And you could get a tax credit that can help you afford the costs. See if you can find a plan today."

**Financial help is available.** Affordability remains the top barrier to enrollment, and many uninsured are still unaware of financial help. Be very clear about eligibility thresholds so that people can understand them in their own financial context. Consider providing more examples of tax credit eligibility on websites and in materials.

> "Last year, millions of Americans got financial help to lower the cost of health insurance. You could too. A single person earning $45,906 or less, or a family of four earning $94,200 or less can qualify. Check out your options today."

**Get one-on-one help.** Consumers want someone to help them understand their options and guide them through the enrollment process. It’s important to note that those who have looked into the marketplace may have had an experience with one-on-one assistance that they didn’t feel was helpful, so don’t overpromise on the “expert” quality of assistance.

> "There are people trained to help you understand your options. Meet with someone in your area or call to get help enrolling. Check out your options today."
**Another Message To Keep in Mind**

It’s ok to talk about the fine. More than 25 percent of the uninsured said they were motivated to look for coverage when they were told about the increasing fine for not having health insurance. It is important to state this in a matter of fact, straightforward way so it informs the consumer’s cost calculation.

“All Americans are required to have health insurance or pay $695 per person or up to 2.5% of your income. Get covered to avoid a fine at tax time.”

**Potential Outreach Strategies**

Drill down on where the uninsured are now. Many of the uninsured are working for small employers and within five main sectors: retail, construction, food/accommodation, manufacturing and health care/social service. In addition, many have experience interacting with a range of safety net services, health clinics and unemployment and food stamp offices. These locations present an opportunity to reach this audience and are good places to prioritize outreach.

Go deeper than demographics. It’s no longer enough to target by demographics alone. As the pool of uninsured continues to get smaller, it remains very diverse. It is increasingly necessary to understand their behaviors and, most importantly, their personal experiences with insurance.

Inform the calculation. Give consumers detailed information to inform their cost/benefit analyses. Concrete examples of how the tax credit works are important—make sure they see premiums that reflect their tax credit whenever possible as well as how co-pays and deductibles impact out-of-pocket costs for prescription drugs and health care services.

Stay accessible. Offer trained customer support options in-person and via telephone that recognize and respond to common consumer questions and complex family situations. Consider retraining outreach staff to better support these conversations and understand the changing circumstances of these individuals.