Marketplace Enrollees

Results From a Survey of Individuals Who Purchased Health Plans Through the Health Insurance Marketplace.

October 2015
METHODS

• The survey fielded August 11-21, 2015

• National survey of N =1,012 adults 18 to 64

• All survey respondents had purchased a qualified health plan (QHP) through HealthCare.gov or their state marketplace.

• There are two key subgroups:
  o 831 adults who are currently enrolled in a marketplace QHP (margin of error ± 4.8 percentage points).
  o 181 adults who were formerly enrolled in a marketplace QHP but now have other coverage or are uninsured (margin of error ± 7.7 percentage points).

• The survey was conducted online, and fielded in both English and Spanish.

To make comparisons between current enrollees and the uninsured, we draw on the May 2015 Robert Wood Johnson Foundation survey, *Understanding the Uninsured Now*. We compare currently enrolled individuals with the uninsured in that survey who appear eligible for QHP plans—i.e., have incomes of 139% of the federal poverty level or above. Here is a link to that survey: [http://www.rwjf.org/en/library/research/2015/06/understanding-the-uninsured-now.html](http://www.rwjf.org/en/library/research/2015/06/understanding-the-uninsured-now.html).
THEY HAVE AN “INSURANCE MINDSET.”

Having insurance is very important to the currently enrolled—96% say having health insurance is either very important (73%) or somewhat important (23%).

In addition, more than 8 in 10 say insurance is a “must have” that they will figure out how to pay for (FIGURE 1).

Figure 1: For some people, health insurance is something they feel they just need to have and they will figure out a way to pay for it. For others, health insurance is something they will only pay for if they feel like they are doing okay financially. Which is closer to the way you think about insurance? N=831
MEDICAL BILLS AND THE FINE/LAW ARE TOP MOTIVATORS.

Figure 3: Please think back to when you first signed up for a health insurance plan through HealthCare.gov/State Marketplace. What was the main reason you wanted health insurance? N=831
MANY EXPERIENCED A HEALTH CARE NEED BEFORE ENROLLING.

Figure 4: Thinking back to the time before you signed up for a health insurance plan through HealthCare.gov/State Marketplace…As far as you can remember, had you or anyone close to you experienced any of the following?

<table>
<thead>
<tr>
<th>Event</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chronic medical condition</td>
<td>50%</td>
</tr>
<tr>
<td>An accident that led to the ER</td>
<td>29%</td>
</tr>
<tr>
<td>Diagnosis of serious illness</td>
<td>28%</td>
</tr>
<tr>
<td>Heart attack or stroke</td>
<td>18%</td>
</tr>
<tr>
<td>Some other important medical event</td>
<td>13%</td>
</tr>
</tbody>
</table>

N=831
MOST ENROLLED ONLINE AND MANY RECEIVED HELP.

The main way they enrolled: (n=831)
- Online: 69%
- Phone: 16%
- In-person: 9%
- Paper: 2%

When they enrolled for the first time: (n=831)
- Oct 2013 – Mar 2014: 38%
- Nov 2014 – Feb 2015: 28%
- Apr 2014 – Oct 2014: 12%
- After Feb 2015: 15%

Getting help:
More than half had enrollment help the first time they applied (54%). Those most likely to get help:
- 50-64 years old (66%);
- Latinos (66%);
- those with high school or less (63%);
- and women (62%).

Who gave them help: (N=457)
- Customer Rep from HC.gov/SM: 54%
- Agent/broker: 35%
- Friend/family member: 13%
- Trained community member: 11%
- Someone else: 3%
- Employer: 1%

Four in 10 (40%) used a tool/calculator online to help them figure out what their premium would be before enrolling. Of those who used a tool/calculator, 87% say it was helpful (43% very; 44% somewhat).
THEY WEIGHED MANY FACTORS WHEN DECIDING TO PURCHASE A PLAN.

FIGURE 5: Here is a list of things someone might consider when deciding whether to purchase a health insurance plan or to go without insurance. Thinking back to when you were deciding whether to sign up for a plan, which of the following things did you consider? N=831

- Premium: 73%
- Out-of-pocket costs: 57%
- Benefits: 57%
- Deductible: 56%
- Co-payments: 52%
- Drs in network: 42%
- Tax credit: 36%
- ER costs: 35%
- Penalty/fine: 26%
FINDING AN AFFORDABLE PLAN WAS HARD.

TABLE 1: CHOOSING A PLAN

Q. Think back to when you were comparing the health insurance plans available from HealthCare.gov/State Marketplace and you chose your plan. Please indicate whether you agree or disagree with each statement. Use a 1-10 scale. N=831

<table>
<thead>
<tr>
<th>Statement</th>
<th>Agree 6-10</th>
<th>Neutral 5</th>
<th>Disagree 0-4</th>
</tr>
</thead>
<tbody>
<tr>
<td>All of the plans’ costs were presented clearly and were easy to understand.</td>
<td>53%</td>
<td>15%</td>
<td>32%</td>
</tr>
<tr>
<td>It was easy to find a plan that had a provider network that worked for me.</td>
<td>51%</td>
<td>17%</td>
<td>31%</td>
</tr>
<tr>
<td>It was easy to choose which plan to sign up for.</td>
<td>46%</td>
<td>17%</td>
<td>37%</td>
</tr>
<tr>
<td>I could afford many of the plans.</td>
<td>36%</td>
<td>15%</td>
<td>49%</td>
</tr>
</tbody>
</table>
MOST FEEL THEY CHOSE THE BEST PLAN FOR THEM.

FIGURE 6: How confident were you that you chose the best plan for you at the time? N=831

- Very confident: 30%
- Somewhat confident: 49%
- Not too confident: 14%
- Not at all confident: 7%
- REF: 1%
MOST RECEIVED A TAX CREDIT.

FIGURE 8: Did you get any financial help or a tax credit towards purchasing a plan when you first signed up for a health insurance plan through HealthCare.gov/State Marketplace? N=831

TABLE 4: TAX CREDIT AMOUNT

Q. [If received a tax credit] How much did you get in financial help or tax credit to help pay for the insurance plan each month? N=555

<table>
<thead>
<tr>
<th>Amount</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>$10-$200</td>
<td>29%</td>
</tr>
<tr>
<td>$201-$400</td>
<td>21%</td>
</tr>
<tr>
<td>$401-$600</td>
<td>9%</td>
</tr>
<tr>
<td>$601-$1,000</td>
<td>8%</td>
</tr>
<tr>
<td>$1,000+</td>
<td>2%</td>
</tr>
<tr>
<td>Don't remember</td>
<td>29%</td>
</tr>
</tbody>
</table>

“got financial help”

64%

Yes

29%
No

8% Not Sure
MANY ARE KNOWLEDGEABLE ABOUT THEIR PLANS.

Most feel they understand how their plan works. After signing up, 82% say they understood for the most part (51%) or completely (31%) how to use their insurance to get the services they needed. However, some enrollees may have gaps in knowledge—e.g., 33% feel they know how their plan works “more or less” (a “5” on a 0-10 scale) while another 16% say they do not understand their plans (TABLE 2).

Latino enrollees are least likely to say they understand how their plan works (only 38% 6-10 score vs. 51% total). Those who seem to know the most about their plan are individuals who had no gap or only a short gap in insurance (0-2 years) before enrolling (58% 6-10 score).

TABLE 2: UNDERSTANDING THEIR INSURANCE

Q. How well do you understand the following things about your current health insurance? N=831

<table>
<thead>
<tr>
<th>Understand (6-10)</th>
<th>More or less (5)</th>
<th>Don’t understand (0-4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>How to choose a Dr in network</td>
<td>62%</td>
<td>23%</td>
</tr>
<tr>
<td>How the co-pay works</td>
<td>60%</td>
<td>24%</td>
</tr>
<tr>
<td>How the deductible works</td>
<td>57%</td>
<td>24%</td>
</tr>
<tr>
<td>What services are covered</td>
<td>54%</td>
<td>24%</td>
</tr>
<tr>
<td>What costs are out-of-pocket</td>
<td>53%</td>
<td>23%</td>
</tr>
<tr>
<td>What you pay after insurance pays</td>
<td>52%</td>
<td>24%</td>
</tr>
<tr>
<td>How the plan works in general</td>
<td>51%</td>
<td>33%</td>
</tr>
</tbody>
</table>
MANY WANT TO LEARN MORE.

The preferred source of this information is the marketplace itself (TABLE 3).

FIGURE 7: Overall, would you like to know more about how health insurance plans work? N=831

TABLE 3: BEST SOURCES OF INFORMATION

Q. [If want to know more about insurance] Who would you want to get this information from? N=370

- HealthCare.gov/State Marketplace: 73%
- Insurance companies: 48%
- Nonprofits that advocate for health care issues: 39%
- Your doctor/provider: 22%
- Insurance agent/broker: 17%
- State/local health department: 15%
- Patient organization like ACS and AHA: 14%
- Doctors association: 6%
THEY ARE USING THEIR COVERAGE.

Eighty percent of current enrollees have used a health service since they signed up. Only small percentages of enrollees report problems accessing these services (TABLE 10).

FIGURE 10: Have you had any of the following services since you signed up for health insurance through HealthCare.gov/State Marketplace? Have you had any problems getting any of the following services? N=831
THEY ARE SATISFIED WITH THEIR MARKETPLACE PLANS.

They are also satisfied with the doctors and services covered by their plan (FIGURE 12).

FIGURE 11: Overall, how satisfied are you with your current plan through HealthCare.gov/State Marketplace? N=831

- Very satisfied: 29%
- Somewhat satisfied: 45%
- Not too satisfied: 17%
- Not at all satisfied: 9%

FIGURE 12: How satisfied are you with the doctors and services your current plan covers? N=831

- Very satisfied: 38%
- Somewhat satisfied: 43%
- Not too satisfied: 7%
- Not at all satisfied: 11%
AFFORDING THEIR PREMIUM IS HARD FOR MANY.

When asked about their specific premium amount, half (50%) say they pay $200 or less each month (TABLE 5).

FIGURE 13: Given your budget, how easy or difficult is it for you to pay the monthly premium for your current health insurance plan N=831

TABLE 5: PREMIUM AMOUNT

Q. How much is the monthly premium you pay for the plan you have through HealthCare.gov/State Marketplace? Your best guess is fine. N=831

<table>
<thead>
<tr>
<th>Premium Amount</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>$0-$50</td>
<td>14%</td>
</tr>
<tr>
<td>$51-$100</td>
<td>15%</td>
</tr>
<tr>
<td>$101-$200</td>
<td>21%</td>
</tr>
<tr>
<td>$201-$400</td>
<td>27%</td>
</tr>
<tr>
<td>&gt;$400</td>
<td>22%</td>
</tr>
<tr>
<td>REF</td>
<td>2%</td>
</tr>
</tbody>
</table>
THEY ARE SENSITIVE TO PREMIUM INCREASES.

Many say they might drop coverage if their premium increases (FIGURE 14).

Enrollees who might consider dropping coverage (N=432) were asked about specific dollar amount increases. The results indicate that 20% might consider dropping coverage if there is a $10 increase per month and 61% might consider dropping if the increase goes up to $50 more per month.

FIGURE 14: As you may know, the monthly premium amount for insurance plans can change from one year to the next. If your monthly premium increased during the next open enrollment period, would you consider dropping your plan and living without insurance instead of paying the increased premium? N=831

18% Yes
38% Maybe
44% No
MANY CHANGED PLANS DURING RENEWAL.

Of those current enrollees who renewed, 43% say their plan renewed automatically while 37% say their plan did not renew automatically and 20% are unsure.

Slightly more than half kept their original plan when they renewed, but more than 4 in 10 said they changed plans (FIGURE 15).

FIGURE 15: [If renewed] Is your current plan the same as the one you had when you first signed up through HealthCare.gov/State Marketplace or did you change plans? N=455
MANY CHANGED PLANS TO PAY A LOWER PREMIUM.

FIGURE 16: [If changed plans] Why did you change plans? Choose all that apply. 
N=191

- Pay lower premium: 48%
- Old plan not offered: 22%
- Wanted more services + Drs: 16%
- Pay lower deductible: 14%
- No longer qualified for the plan: 8%
- Wanted to change insur. co.: 6%
- Didn't like old plan: 6%
- Found more affordable plan: 3%
- Wanted to change Dr network: 2%
- Other: 2%
MOST WILL COMPARE PLANS NEXT OPEN ENROLLMENT.

FIGURE 17: Some people use open enrollment to compare all of their insurance options and make sure they are getting the best plan available for them. They could decide to change plans or renew their current plan depending on what they learn. Other people renew their current plan without looking into all their options again because they do not have time, they are satisfied with their current plan and want to keep it, or for all kinds of other reasons. During next the open enrollment period, how likely are you to compare all of your insurance options before making a decision about whether to renew your plan? N=831
THEY PLAN TO STAY INSURED THROUGH THE MARKETPLACE.

Also, more than 8 in 10 of those who plan to stay insured say they are likely to continue getting their insurance through the marketplace (FIGURE 19).

FIGURE 18: Thinking about 12 months from now, do you expect to continue having health insurance? N=831

- Will definitely have insurance: 56%
- Will probably have insurance: 35%
- Will probably not have insurance: 2%
- Not sure: 7%

FIGURE 19: Still thinking about 12 months from now, how likely are you to continue getting your health insurance through HealthCare.gov/State Marketplace? N=824

- Very likely: 44%
- Somewhat likely: 40%
- Not too likely: 8%
- Not at all likely: 7%
THE TAX CREDIT IS THE MAIN DRIVER TO STAY WITH THE MARKETPLACE.

FIGURE 20: [If plan to stay with Marketplace coverage] Why do you think you will continue getting your health insurance through Healthcare.Gov/State Marketplace 12 months from now? Choose all that apply. N=709

- Tax credit: 46%
- Can't find better price anywhere else: 34%
- Works for me now: 29%
- Convenient: 26%
- Want to stay in my plan: 25%
- Not sure: 5%
- Other: 8%
THEY DO NOT KNOW THE NEXT OPEN ENROLLMENT DATES.

FIGURE 21: Open enrollment is a time of year when you can look into all of your health insurance options and either renew your current plan or choose a new one. It is generally difficult to sign up for a new plan or change your plan outside of the open enrollment period. Do you know when open enrollment is for your current health insurance plan? N=831
TOP IMPLICATIONS FOR COMMUNICATIONS: COST-SAVVY CONSUMERS WANT THE FACTS.

1. Prioritize the top two motivators—protection from bills and the fine/complying with law. Add a mention of the tax credit to encourage people to stick with the marketplace plan.

2. Consumers are extremely price sensitive and will continue to shop and compare. Most enrollees plan to come back in to renew and will look around for the best deal. Talk about tools that can help make comparison shopping easier.

3. Keep consumers engaged and coming back. More than 4 in 10 said they would like more information on how their plan works and the majority (78%) want to hear from the marketplace on this matter. Use ongoing communications as a way to educate and stay engaged leading up to the next open enrollment period.
FORMERLY ENROLLED
MOST HAVE INSURANCE CURRENTLY.

FIGURE 22: Do you currently have health insurance through another source?
N=181
MAIN REASON NO LONGER ENROLLED: GOT COVERAGE THROUGH ANOTHER SOURCE.

FIGURE 24: What’s the main reason you no longer have a health insurance plan through HealthCare.gov/State Marketplace? N=181
MANY WERE ENROLLED ONLY A FEW MONTHS.

More than one-third were enrolled in a marketplace plan for less than two months. Another 18% were enrolled three to six months (FIGURE 23).

FIGURE 23: How long did you have a health insurance plan through HealthCare.gov/State Marketplace? Your best guess is fine. N=181

- < 1 month: 16%
- 1 year+: 15%
- 1-2 months: 21%
- 3-6 months: 18%
- 6-12 months: 29%
- REF: 2%
MAJORITY WOULD GO BACK TO THE MARKETPLACE.

FIGURE 25: How likely would you be to look into the health care plans through HealthCare.gov/State Marketplace in the future if you needed insurance?
N=181
THEY ARE LESS LIKELY TO HAVE RECEIVED A TAX CREDIT.

They are also slightly less likely to say they understood a lot/some about the tax credit (66% formerly enrolled vs. 74% currently enrolled).

FIGURE 26: Did you get any financial help or a tax credit towards purchasing a plan when you first signed up for a health insurance plan through HealthCare.gov/State Marketplace?
THEY STRUGGLED MORE IN CHOOSING A PLAN.

TABLE 8: CHOOSING A PLAN

Q. Think back to when you were comparing the health insurance plans available from HealthCare.gov/State Marketplace and you chose your plan. Please indicate whether you agree or disagree with each statement. Use a 1-10 scale.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Formerly Enrolled</th>
<th>Currently Enrolled</th>
</tr>
</thead>
<tbody>
<tr>
<td>All of the plans’ costs were presented clearly and were easy to understand.</td>
<td>42%</td>
<td>53%</td>
</tr>
<tr>
<td>It was easy to find a plan that had a provider network that worked for me.</td>
<td>41%</td>
<td>51%</td>
</tr>
<tr>
<td>It was easy to choose which plan to sign up for.</td>
<td>33%</td>
<td>46%</td>
</tr>
<tr>
<td>I could afford many of the plans.</td>
<td>24%</td>
<td>36%</td>
</tr>
</tbody>
</table>
THEY ARE LESS LIKELY TO MAKE ROOM IN THEIR BUDGET FOR INSURANCE.

Seventy percent of former enrollees say having health insurance is very important compared to 73% of current enrollees. However, they are less likely than current enrollees to agree that insurance is a “must-have” that they will figure out a way to pay for (FIGURE 28).

**FIGURE 28:** For some people, health insurance is something they feel they just need to have and they will figure out a way to pay for it. For others, health insurance is something they will only pay for if they feel like they are doing okay financially. Which is closer to the way you think about insurance?

**Formerly Enrolled**

- **N= 181**
- **69%**
  - Insurance is something I need/will figure out how to pay
- **30%**
  - Only pay for if doing OK financially
- **2% REF**

**Currently Enrolled**

- **N= 831**
- **83%**
  - Insurance is something I need/will figure out how to pay
- **17%**
  - Only pay for if doing OK financially
- **1% REF**
TOP IMPLICATIONS FOR COMMUNICATIONS: CHANGE, CHANGE, CHANGE.

1. People will change their insurance plans, and for good reasons. Some consumers will continue to experience changes in their health insurance as their life evolves. Outreach should continue to engage those who have left the marketplace.

2. Some need a temporary solution. New jobs, big moves, and changes in income bring new challenges and new options. Lives are dynamic. So is their experience with insurance. Our language and tone should recognize that.

3. Cost is always priority #1. Let’s continue to demonstrate that low-cost plans are available and remind consumers that plans and rates change every year.
This section compares survey results across two Robert Wood Johnson Foundation studies – The Enrollee Survey (Sep 2015) and Understanding the Uninsured Now (May 2015). The goal is to note differences and similarities between individuals who are currently enrolled in Marketplace health plans (n=831) and individuals who remained uninsured (n=1,270). We compare attitudes on key aspects of their life, their finances, and enrolling in health insurance.
LIFE IS GOING BETTER FOR CURRENT ENROLLEES.

FIGURE 29: Thinking about your life in general, how would you say things are going? Scale: 0 (life is really difficult) to 10 (life is going really well)

- Life going well (6-10):
  - Currently Enrolled N=831: 57%
  - Uninsured QHP Eligibles N=548: 43%

- Life just so-so (5):
  - Currently Enrolled N=831: 28%
  - Uninsured QHP Eligibles N=548: 38%

- Life is difficult (0-4):
  - Currently Enrolled N=831: 15%
  - Uninsured QHP Eligibles N=548: 19%
CURRENT ENROLLEES HAVE LESS INSTABILITY.

FIGURE 30: Have you experienced any of the following in the past 12 months?

- Changed jobs: 13% (Enrolled), 11% (Uninsured)
- Became unemployed: 18% (Enrolled), 11% (Uninsured)
- Moved: 18% (Enrolled), 10% (Uninsured)
- Death of a loved one: 13% (Enrolled), 9% (Uninsured)
- Started school: 5% (Enrolled), 2% (Uninsured)
- Birth of a child: 5% (Enrolled), 1% (Uninsured)
- Started a business: 4% (Enrolled), 5% (Uninsured)
- None of the above: 60% (Enrolled), 48% (Uninsured)
CURRENT ENROLLEES ARE DOING BETTER FINANCIALLY.

FIGURE 32: Thinking about your finances, how would you say things are going for you these days? Scale: 0-10

Going well (6-10)

Currently Enrolled N=831
Uninsured QHP Eligibles N=548

- 45%
- 35%

Going so-so (5)

- 29%
- 31%

Not going well (0-4)

- 26%
- 32%
THEY HAVE SIMILAR LEVELS OF DEBT.

Half of those with debt in each group also report having medical debt (49% enrolled vs. 48% uninsured).

FIGURE 33: [If have debt] How much financial debt do you have in total?
BOTH THINK THEIR FINANCES WILL IMPROVE.

FIGURE 34: When you think about your finances a year from now, do you expect to be doing about the same, better, or worse than you are now? Use a -5 to +5 scale.

Currently Enrolled N=831
Uninsured QHP Eligibles N=548
CURRENT ENROLLEES KNOW MUCH MORE ABOUT THE TAX CREDIT.

TABLE 9: TAX CREDIT AWARENESS

Q. As you may know, many people are able to get a tax credit to help purchase an insurance plan through HealthCare.gov/State Marketplace. How much do you understand about how these tax credits work? Or, have you not heard about these tax credits before?

<table>
<thead>
<tr>
<th>I understand a lot</th>
<th>Current Enrollees N=831</th>
<th>25%</th>
<th>Uninsured QHP Eligible N=548</th>
<th>17%</th>
</tr>
</thead>
<tbody>
<tr>
<td>I understand some</td>
<td>49%</td>
<td></td>
<td>26%</td>
<td></td>
</tr>
<tr>
<td>I do not understand much</td>
<td>19%</td>
<td></td>
<td>21%</td>
<td></td>
</tr>
<tr>
<td>I do not understand anything</td>
<td>5%</td>
<td></td>
<td>11%</td>
<td></td>
</tr>
<tr>
<td>I haven't heard about this before</td>
<td>2%</td>
<td></td>
<td>21%</td>
<td></td>
</tr>
<tr>
<td>REF</td>
<td>1%</td>
<td></td>
<td>3%</td>
<td></td>
</tr>
</tbody>
</table>
THEY WEIGH THE SAME FACTORS WHEN DECIDING TO PURCHASE A PLAN.

TABLE 10: FACTORS CONSIDERED IN ENROLLING

Q: Here is a list of things someone might consider when deciding whether to purchase a health insurance plan or to go without insurance. Thinking back to when you were deciding whether to sign up for a plan, which of the following things did you consider? Pick the two most important factors.

<table>
<thead>
<tr>
<th>Factor</th>
<th>Current QHP Enrollees N=831</th>
<th>Uninsured QHP Eligible Who Looked for Insurance N=388</th>
</tr>
</thead>
<tbody>
<tr>
<td>Premium</td>
<td>62%</td>
<td>61%</td>
</tr>
<tr>
<td>Benefits covered</td>
<td>22%</td>
<td>10%</td>
</tr>
<tr>
<td>Out-of-pocket if sick</td>
<td>21%</td>
<td>19%</td>
</tr>
<tr>
<td>Deductible</td>
<td>21%</td>
<td>32%</td>
</tr>
<tr>
<td>Co-payment</td>
<td>13%</td>
<td>12%</td>
</tr>
<tr>
<td>Doctors in network</td>
<td>15%</td>
<td>5%</td>
</tr>
<tr>
<td>Tax credit</td>
<td>13%</td>
<td>6%</td>
</tr>
<tr>
<td>Penalty/fine</td>
<td>12%</td>
<td>13%</td>
</tr>
<tr>
<td>ER costs</td>
<td>6%</td>
<td>6%</td>
</tr>
<tr>
<td>None of the above</td>
<td>3%</td>
<td>9%</td>
</tr>
</tbody>
</table>
CURRENT ENROLLEES VALUE INSURANCE MUCH MORE.

FIGURE 35: Given everything in your life these days, how important is it to you to have health insurance?

<table>
<thead>
<tr>
<th>Importance</th>
<th>Currently Enrolled N=831</th>
<th>Uninsured QHP Eligibles N=548</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very important</td>
<td>73%</td>
<td>35%</td>
</tr>
<tr>
<td>Somewhat important</td>
<td>23%</td>
<td>36%</td>
</tr>
<tr>
<td>Not too important</td>
<td>3%</td>
<td>19%</td>
</tr>
<tr>
<td>Not at all Important</td>
<td>0%</td>
<td>9%</td>
</tr>
<tr>
<td>REF</td>
<td>1%</td>
<td>2%</td>
</tr>
</tbody>
</table>
TOP IMPLICATIONS FOR COMMUNICATIONS: LEAD MESSAGES WORK ACROSS AUDIENCES.

Three themes resonate with both enrollees and the uninsured. Pushing out these messages will benefit both groups.

- **Protection from big medical bills**
  - Reminds them of the value of health insurance and that you never know when you might need it.

- **Financial help/ Tax credit**
  - Affordability and cost are top concerns for enrollees and the uninsured. Be very clear about tax credit eligibility, amounts, and what it means for each individual.

- **Avoid the fine/ Comply with the law**
  - Tone is important. Educate them on the cost of the fine in a matter of fact, straightforward way.
This section compares survey results across two Robert Wood Johnson Foundation studies – The Enrollee Survey (Sep 2015) and Understanding the Uninsured Now (May 2015). The goal is to note differences and similarities between individuals who are currently enrolled in Marketplace health plans (n=831) and individuals who remained uninsured (n=1,270). We compare attitudes on key aspects of their life, their finances, and enrolling in health insurance.
Survey Findings and Message Guide

Full survey findings available at:

Message Guide for Outreach and Enrollment also available:
  • Quick overview of uninsured and newly enrolled study
  • Suggested approach to outreach
  • Message guidance
  • Quick tips for outreach
  • Sample social media posts
Questions?

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