

Family Health Insurance Assistance Program (FHIAP)

Leavers Survey Summary Report

Oregon Health Policy Institute
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Background

The State of Oregon received funding from the U.S. Health Resources and Services Administration (HRSA) in October 2000 for a year-long effort to collect and analyze data necessary to design a plan for universal access to health care in the state. The Family Health Insurance Program (FHIAP), a state-funded premium subsidy program, is likely to be a component of the plan. FHIAP was created by the Oregon Legislature in 1997, is funded through the state's tobacco settlement money and provides premium subsidies for uninsured residents of the state who have a gross income under 170% of federal poverty level (FPL)¹. In order to qualify, the individual or family must be uninsured for six months prior to enrolling in the FHIAP subsidy unless they are coming to FHIAP from the Oregon Health Plan (OHP). Families who meet the income requirements can receive sliding scale premium subsidies of 70%, 90% or 95%. As of September 2001, there were 4,648 people approved and enrolled in FHIAP, 608 approved to be enrolled, 61 applications under review and 18,542 people on the reservation list for applications.²

Because of FHIAP's likely role in any expansion of health care coverage in Oregon, the program has been the focus of two prior survey efforts. The first, developed by the Oregon Health Policy Institute (OHPI), FHIAP and HRSA staff as well as two residents from the Department of Family Medicine at the Oregon Health and Science University (OHSU), was a mail-return survey designed to assess various dimensions of health care access provided through FHIAP. That survey, fielded in March and April 2001, included FHIAP enrollees and individuals on the FHIAP reservation list. Results from those surveys were submitted to the Office of Oregon Health Policy and Research (OHPR) in May 2001 in a separate report.

Methodology

After completion of the May 2001 enrollee and reservation list survey, the reasons for leaving FHIAP and health care experience after leaving the subsidized program remained to be documented. As a result, a telephone survey was developed by OHPI and FHIAP staff, the HRSA State Planning Grant research team and Portland State University Survey Research Laboratory staff (See Appendix A). The survey was fielded in July and August 2001 by the Portland State University Survey Research Laboratory.

The sample population consisted of all individuals or families leaving the FHIAP program between November 2000 and June of 2001. Of the 696 who left the FHIAP program during that time frame, 518 were eligible to be interviewed; of those, 306 or

¹ For 2001, U.S. Department of Health and Human Services establishes 170% FPL for an individual at \$14,603; for a family of 4, \$30,005.

² FHIAP website, <http://www.ipgb.state.or.us/Docs/fhiap_9_24_01.pdf>, September 28, 2001.

55% completed surveys.³ The 55% survey response rate met the research team's acceptable target range, and key demographic indicators of the sample group closely match those of all leavers. However, the potential for bias resulting from 45% non-response must be addressed. For a full discussion of the sources of potential survey bias, please refer to Appendix B.

Survey Dimensions. Dimensions included in the survey instrument were⁴:

- Reasons for leaving
- Consumer satisfaction
- Health insurance status after leaving
- Source of current health insurance
- Current out-of-pocket expenses, including deductible, co-pays and premiums
- Primary drivers of uninsured status
- Financial impacts of health care
- Access to health care
- Usual source of care
- Health status

Table 1
Respondent Demographics

<i>(n=306)</i>		
Gender	76% female, 24% male	
Average age	46	
Employment	60% employed 40% not employed	
Education	Less than high school	16%
	High school or GED	31%
	More than high school	53%
Race	93% white	
Self-Reported Income as a Percent of Federal Poverty Limit (FPL)**:	< 100% FPL	31%
	≤ 185% FPL	52%
	> 185% FPL	17%

**HB2519, passed during the 2001 legislative session, proposes increasing eligibility limits for the Oregon Health Plan to 185% FPL. For this reason, 185% FPL is used as the categorical income break point within this report.

³ Ineligibles include deceased, moved out of state, missing telephone numbers, non-working numbers and numbers where the disenrollee is unknown at the number called. The formula for determining the response rate is: Completed Surveys/(Final Sample Size – Ineligibles).

⁴ Survey instrument included in Appendix A.

Key Findings

- ❖ Among FHIAP's principles is the desire to foster the independence and self-reliance of low income Oregonians. In this it has shown much success. But because enrollment is currently limited to 170% of FPL, many people who leave FHIAP appear to take a step backward--56% of those who leave report they have no insurance coverage at the time of disenrollment.
- ❖ A majority of those leaving FHIAP appear to be eligible for the proposed expansion of FHIAP eligibility: 83% of those leaving the FHIAP program report incomes under 185% FPL
- ❖ The greatest **single** reason, reported by 33% of survey respondents, for leaving the FHIAP program is income exceeding the 170% FPL eligibility limit.
- ❖ The FHIAP cost sharing requirement does not appear to be a key driver of disenrollment: only 6% reported a disenrollment resulting from a missed premium payment, another 12% cited economics: either high out-of-pocket costs or lost jobs.
- ❖ Income averaging rules for FHIAP eligibility may disadvantage individuals and families with seasonal work or uneven income: 21% of those losing their enrollment because of income over allowable limits also report annual incomes of less than 100% of federal poverty level.
- ❖ Primary sources of health insurance for those currently insured are:

▪ Employer-sponsored insurance:	35%
▪ Oregon Health Plan:	25%
▪ Medicare:	19%
▪ Privately Purchased (not COBRA)	10%
▪ Oregon High Risk Pool	6%
▪ Other	5%
- ❖ Program satisfaction was high for FHIAP leavers: 84% were satisfied with FHIAP. With regard to benefits, leavers mentioned dental, vision and pharmacy benefits as areas for improvement (either coverage was lacking or was too limited).
- ❖ For those who are uninsured, expense (81%) is cited as the primary reason for going without insurance.
- ❖ The majority of FHIAP leavers (63%) expect that they will need the FHIAP subsidy again at some time in the future.

Health Insurance Status After Leaving FHIAP

The majority of individuals and families leaving the Family Health Insurance Assistance Program (FHIAP) do not have health insurance coverage when they leave: overall, 56% report leaving with no coverage in place. The availability and type of health coverage is associated with income. For those with incomes below 100 percent of FPL, 60 percent leave FHIAP with no coverage; this declines to 50 percent for those earning over 185% FPL.

For leavers who have current health care coverage, 35% are covered by employer-sponsored insurance, either their own or that of a family member, 25% qualified for the Oregon Health Plan (OHP), 19% “aged out” to Medicare coverage, 10% purchased individual private policies and 6% access the Oregon Medical Insurance Pool (OMIP)⁵. The availability of employer-sponsored insurance increases with income. Seventy-one percent (71%) of those who are insured and who have family incomes above 185% of FPL have employer-sponsored insurance. For those who are insured and have incomes below 100% of FPL, only 10% have employer-sponsored insurance. One third (33%) of those with incomes up to 185% FPL (and who are insured) have employer-sponsored insurance.

FHIAP leavers also experience a significant loss of family coverage. Overall, a little more than half (52%) of those currently insured do not have policies that cover their dependents. When insurance is provided through employment, 68% are able to access coverage for their dependents as well.

For those with employer-sponsored health insurance, 31% reported that the employer paid the entire premium, 64% reported partial payment paid by the employer⁶, and 6% of employers paid none of the premium. Those with incomes above 185% FPL were much more likely to have an employer that paid the entire premium (40%).

Uninsured respondents were also asked to report the primary reason for going without insurance:

- 81% cited expense
- 5% reported an absence of employer-sponsored insurance
- 4% reported losing their employment
- 2% reported having been refused coverage
- 8% cited other reasons

⁵ OMIP is Oregon’s high risk pool. It provides medical insurance coverage to individuals who are unable to obtain medical insurance because of health conditions or who have exhausted their COBRA coverage.

⁶ If a respondent reported the employer paid for the employee premium but not for spouse or dependents, it was coded as paying for “part of the premium.”

Reasons for Leaving

The greatest single reason (33%) for leaving FHIAP is income in excess of the 170% FPL eligibility limit. Other reasons are:

Table 2
Reasons for Leaving FHIAP
(n=286)

Reasons for Leaving FHIAP (n=286)	
Income too high	33%
Medicare eligible	12%
Employer sponsored insurance available	11%
OHP eligible	11%
Out-of-pocket costs too high	11%
Missed a premium payment	6%
Late reapplication	6%
Quality or service	4%
Lost job and could no longer afford premium	1%
Did not use it	1%
Other	4%

It is interesting to note that 21% of those with self-reported income of less than 100% of the federal poverty level reported “too much income” as their reason for disenrolling from FHIAP. This was an unexpected result, and the survey instrument was not designed to drill down into this issue, but respondent comments shed some light: some indicate jobs lost since disenrolling or changes in family status, but others indicate that the method for income averaging applied by the FHIAP program may disadvantage those with seasonal work, uneven monthly incomes or even one-time distributions of money:

We are cancelled. Last Christmas my wife worked a few extra hours to have a good Christmas. We made \$88 too much for that month. They [FHIAP] asked for 3 months pay stubs. They said it was too much. We tried to fight it. We finally dropped it because we could not get anywhere with it. They said we were making too much...

I made too much money for three months.

I ended up making a couple dollars too much during the quarter.

My income level, which varies on a monthly basis, was so borderline and I made \$60 too much and I was discontinued.

FHIAP determined that I was making too much money. I got a \$10,000 award and no longer qualified.

After income and other sources of insurance, the most often cited reason for leaving FHIAP was “out-of-pocket expenses.” This was very often connected to the deductible amount associated with individual policies:

The deductible was too much to pay. It was \$300 for me and another \$300 for my husband. We are low income and cannot afford that much.

Sometimes it was the increasing premium payments:

They kept raising my end of the fee. From \$25 to \$100 in under a year.

Because I couldn't afford the monthly payments.

As the subsidy [premium] was raised too much and I couldn't pay it.

The insurance company rates went too high even with the FHIAP [subsidy], and we just could not afford it.

And sometimes it was the co-pay in combination with the premium:

I couldn't afford it and pay my co-pay that I pay my doctors.

I could not afford it. The monthly premiums and the \$15 every time I go to a doctor, I could not afford prescriptions that would cost \$95 out of pocket, even with what they covered.

Table 2 shows that only 4% of those leaving FHIAP cited quality or service reasons for leaving. In addition, 84% of those surveyed stated they were either “very satisfied” or “somewhat satisfied” with the FHIAP program. Respondent comments reflect confusion between the FHIAP program, which provides the subsidy, and the health insurance company or even the providers involved, so it is difficult to determine the source of satisfaction or dissatisfaction:

They never paid on any of my hospital emergency care I had. They did not pay for any of the care I received.

The x-ray experience: the doctor took the wrong x-ray and made us get more x-rays and pay more. I was mad. The hospital made me pay him [the provider] for x-rays not related to the health of my son.

Health Insurance Coverage with the FHIAP Subsidy and Current Health Insurance Coverage

When asked to compare their current health insurance coverage with that they received with the FHIAP subsidy, 37% of the respondents reported that their current insurance was better, 41% about the same and 21% worse. For those who reported their current insurance as better or worse than what they obtained with the FHIAP subsidy, a follow-up question was posed: Why is your current insurance better or worse than what you had through FHIAP? The responses differed based on the source of current insurance: OHP, employer-sponsored insurance, or Medicare.⁷

With current health care coverage provided through an employer-sponsored insurance (ESI) (n=56):

There is no clear pattern in respondent's assessments of their current employer-sponsored insurance (ESI) when compared to coverage made available to them through the FHIAP subsidy: 36% felt their ESI insurance was better than insurance provided through FHIAP and 20% felt it was worse. The reasons given are as follows:

Reasons for Rating ESI as Better (n=18)	Reasons for Rating ESI as Worse (n=10)
Co-pays, deductibles, out-of-pocket expenses (n=8)	Co-pays, deductibles, out-of-pocket expenses (n=6)
Dental coverage (n=6)	Coverage in general (n=4)
Coverage in general (n=4)	Access (n=1)
Prescription coverage (n=3)	Waiting periods or exclusions (n=1)

With current health care coverage provided by the Oregon Health Plan (n=39):

For this group, only *one person rated their OHP coverage as worse* than what was available with the FHIAP subsidy. *For those rating OHP as better*, their reasons were as follows:

1. Coverage (n=18)
 - Dental (n=8)
 - General coverage (n=8)
 - Prescription (n=6)
 - Vision (n=1)
2. Cost (n=14)
 - Co-pays, premiums, deductibles, out-of-pocket costs

⁷ Because of small numbers in each group, the real number responding are reported rather than a percentage.

With current health care coverage provided by Medicare (n=23)

Three respondents rated their Medicare coverage as *better*. Of the respondents *rating Medicare as worse* (n=11), their reasons were as follows:

1. Costs (premium and out-of-pocket) n=6
2. No prescription coverage n=6
3. General coverage n=2

Financial Status and the Impact of Health Care Costs

This survey posed a series of questions to FHIAP leavers about health care costs since disenrollment, the financial impacts of those costs and about their financial capacity. A slight majority (57%) of respondents reported an income that stayed the same during the last 12 months of their FHIAP enrollment, while 29% reported an increase in income and 15% reported a decrease.

The majority (83%) of families and individuals leaving FHIAP were living at or below 185% FPL at the time of this survey. Research conducted in 2000 for the state of Colorado has shown that below 185% of federal poverty level, a family has no disposable income to pay for health insurance after paying for essentials such as housing, food and transportation⁸. Data from this survey supports this finding. Respondents were asked to assess their ability to make ends meet on their household income:

Table 3
Self-Assessed Adequacy of Household Income

Statement	Income ≤ 100% FPL	Income ≤185% FPL	Income >185% FPL	Total FHIAP Leavers
You can't make ends meet	27%*	18%	14%	20%
You have just enough, no more	59%	58%	34%**	53%
You have enough, with a little extra sometimes	14%	22%	46%**	24%
You always have money left over	-	3%	6%	3%
	n= 88	147	50	293

*Significantly different from other income groups, (p<.10).

**Significantly different from other income groups, (p<.05).

In addition, those with household incomes below 185% FPL report significantly more impact from medical bills than those above 185% FPL. This difference remains whether or not health insurance was in place after leaving FHIAP.

⁸ Glazner, Judith, Prices and Affordability of Health Insurance for Colorado's Uninsured Population, Colorado Coalition for the Medically Underserved <www.ccmu.org>. July 2000, p. 4. Available at <<http://www.statecoverage.net/statereports/co1.pdf>>.

Table 4
Financial Impacts of Medical Bills After Leaving FHIAP

	≤185% FPL		>185% FPL	
	<i>Uninsured</i>	<i>Insured</i>	<i>Uninsured</i>	<i>Insured</i>
Percent Reporting Problems Paying Medical Bills	50%	33%**	39%	16%**
Percent Skipping Medical Tests or Treatment to Avoid Expense	10%	6%	-	10%
Percent Reporting “Major Financial Impact” from Medical Bills	78%	72%**	43%*	20%**
n=	116	114	18	31

*Significantly different from other uninsured income group, (p<.10).

**Significantly different from other insured income groups, (p<.05).

In addition to medical bills for tests or treatments, the majority of insured FHIAP leavers have some form of cost share: either a premium share (82%), a deductible amount (42%) or co-pays (52%), and 18% carry all three cost sharing obligations.

Those with insurance were asked about their actual out-of-pocket costs for premiums, deductibles and co-pays. Tables 5 to 7 exhibit the survey results for insured respondents:

Table 5
Out-of-Pocket Premium Share
FHIAP Leavers - Insured

Level of Premium Share	Income ≤ 100% FPL	Income ≤185% FPL	Income >185% FPL	Total Insured FHIAP Leavers
No premium share	29%*	15%	5%	18%
Less than \$50	46%**	23%	19%	30%
\$50 to \$99	10%*	23%	19%	18%
\$100 to \$199	10%*	23%	33%	20%
\$200 to \$299	5%	8%	14%	8%
\$300 or more	-	9%	10%	6%
n=	41	66	21	137

*Significantly different from other income groups, (p<.10).

**Significantly different from other income groups, (p<.05).

Table 6
Individual Annual Deductible Amount
FHIAP Leavers – Insured

Annual Deductible	Income ≤ 100% FPL	Income ≤185% FPL	Income >185% FPL	Total Insured FHIAP Leavers
No deductible	81%**	46%	45%	58%
\$250 or less	5%**	32%	30%	24%
\$500	11%	17%	20%	15%
\$1000	-	-	5%	.8%
\$2000	-	2%	-	.8%
Other	3%	3%	-	2%
n=	37	59	20	123

**Significantly different from other income groups, (p<.05).

Table 7
Co-Pays for Primary Care
FHIAP Leavers – Insured

Primary Care Copays	Income ≤ 100% FPL	Income ≤185% FPL	Income >185% FPL	Total Insured FHIAP Leavers
No copay	79%**	42%**	21%	48%
\$2	-	-	3%	.7%
\$5	-	-	10%	2%
\$10	5%**	24%	24%	18%
\$15	5%**	24%	21%	19%
\$20	5%	8%	17%	9%
Other	5%	3%	3%	4%
n=	38	67	29	144

**Significantly different from other income groups, (p<.05).

Access to Health Care

As would be expected FHIAP leavers who have insurance through another source have much better access to care than those who are uninsured:

Table 8
Access to Health Care After Leaving FHIAP

Since leaving FHIAP...	Insured	Uninsured
No doctor, clinic or emergency room visit for illness or injury... (n=124)	30%	55%**
No doctor or clinic visit for routine or regular care... (n=141)	28%	70%**
No regular source of care... (n=47)	6%	27%**

**Significant between group difference, (p<.05).

The usual source of care shifts after leaving FHIAP as well. The loss, or change, of a “medical home” not only interrupts continuity of care, but also represents potentially significant cost shifts. The June 2000 Survey of FHIAP Enrollees reported that 82% of enrollees receive their medical care at a private doctor’s office or clinic.⁹ When individuals or families leave FHIAP, they report the following as their regular source of care:

Table 9
Regular Source of Care After Leaving FHIAP

Since leaving FHIAP...	Insured	Uninsured
Private doctor’s office or clinic	85%	66% **
County health department	1%	11% **
Hospital emergency room	3%	3%
Urgent care center	-	3%
Community or migrant clinic	-	6%
Family planning clinic	2%	6%
Other	9%	5%
n=	109	35

**Significant between group difference, (p<.05).

Table 9 shows an increased use of the public health care “safety net”: those individuals and families without insurance access county health departments or community clinics at a much higher rate than those with insurance.

Observations

The FHIAP program serves as a transitional program that bridges insurance gaps for individuals as they move from coverage available for those with very low incomes (the Oregon Health Plan) to those working in full-time covered employment. However, this survey shows that individuals do not generally leave the FHIAP subsidy program because they have gained employment where employer-sponsored insurance is offered. In fact, 56% are leaving into an uninsured status. For those leaving into an insured status, only 35% are covered through their employers. The most common reason for leaving is having earnings just slightly above the 170% eligibility limit: 83% of those leaving have incomes that remain under 185% of the federal poverty level, and they remain uninsured primarily because of cost.

Most FHIAP leavers were satisfied with the health care coverage and service received through the FHIAP subsidy: 84% reported being satisfied with the program. Only 4% cited quality or service as their primary reason for leaving. For those with suggestions for improvement of coverage options, the most commonly cited issues were lack of vision and dental care. For those with suggestions for administrative improvements, the most commonly cited issue was the income averaging method, which may disadvantage those with uneven income or seasonal work.

⁹ Oregon Health Policy Institute, Family Health Insurance Assistance Program: Survey of Enrollees and Survey of Individuals on the Reservation List, June 2001.

FHIAP leavers could generally be classified as the working poor: 60% were employed at the time of the survey.

About half of all leavers (48%) have children under the age of 18 living with them.

They worry about making ends meet.

Twenty percent report that they cannot make ends meet at their current income levels.

Another 53% report that they have just enough to live on with nothing extra.

At the same time, 38% have experienced problems paying some medical bill since leaving FHIAP: 71% stated these bills had a major impact on their families.

Finally, reflecting the uncertainty of having incomes close to poverty levels, 63% expect that they will need the subsidy again in the future.

Appendix A

FHIAP Leavers Telephone Survey

FHIAP Leavers Telephone Survey
(Fielded July/August 2001)

INTRO

Hello, my name is... , and I am calling from Portland State University. We are conducting a survey for the State of Oregon about the Family Health Insurance Assistance Program or FHIAP.

Participation is entirely voluntary and will not affect any of your current or future program benefits in any way. I promise I'm not selling anything, and all information will be kept strictly confidential.

This is a short survey and will take less than 10 minutes to complete.

NOTE, IF R DOESN'T KNOW ABOUT FHIAP: The Family Health Insurance Assistance Program (FHIAP) is a program that helps Oregonians afford health insurance by paying for part of their premiums.

Q1 May I please speak with \:CONTNAME?

Accept another family member if s/he is suggested as more knowledgeable about family's health insurance status Enter 2

- | | |
|---|-----------------------------------|
| 0 | No (SKIPTO CALLBCK) |
| 1 | Yes |
| 2 | Yes, with different family member |
| 3 | Language Problem |
| 8 | Don't know |
| 9 | Refused (SKIPTO REFUSAL) |

Are you the person who knows about the family's health insurance?

- | | | |
|---------|---|-----------------------------|
| (138.1) | 0 | No (SKIPTO CALLBCK) |
| | 1 | Yes |
| | 8 | Don't know (SKIPTO CALLBCK) |
| | 9 | Refused (SKIPTO CALLBCK) |

Q2 Our records show that you are no longer receiving a health insurance subsidy from the Family Health Insurance Assistance Program. Is this correct?

- | | |
|---|--------------------------|
| 0 | No (SKIPTO CSN) |
| 1 | Yes |
| 8 | Don't know (SKIPTO CSN) |
| 9 | Refused (SKIPTO REFUSED) |

Q3 First, could you please tell me how satisfied you were with the FHIAP subsidy program overall. Read responses 1 - 5

- | | | |
|---------|---|------------------------------------|
| (140.1) | 1 | Very Satisfied |
| | 2 | Somewhat Satisfied |
| | 3 | Neither Satisfied nor dissatisfied |
| | 4 | Somewhat Dissatisfied |
| | 5 | Very Dissatisfied |
| | 8 | Don't know |
| | 9 | Refused |

Q4 There are a lot of reasons why someone might leave the FHIAP program. Could you tell me the main reason you left?

Record comments verbatim

Q5 Was there any other reason?

Record comments verbatim

Q6 Thinking about when you left FHIAP, did you have health insurance coverage?

0	No
1	Yes
8	Don't know
9	Refused

Q7 *IF: (Q6 is Yes or Don't know or Refused)*

Was there anytime when you did not have health insurance since you left FHIAP?

(144.1)	0	No
	1	Yes
	8	Don't know
	9	Refused

Q8 Are you currently insured?

(145.1)	0	No (SKIPTO Q17)
	1	Yes
	8	Don't know (SKIPTO Q17)
	9	Refused (SKIPTO Q17)

Q9 *IF: (Q8 is Yes)*

Is this the same health care coverage you had while you were receiving the FHIAP subsidy?

(146.1)	0	No
	1	Yes
	8	Don't know
	9	Refused

Q10 *IF: (Q8 is Yes)*

Does your current insurance cover your dependents as well?

(147.1)	0	No
	1	Yes
	8	Don't know
	9	Refused

Q11 IF: (Q8 is Yes)

Is your current health insurance: Read 01- 07
See COBRA definition.
See OMIP definition.

- (148.2)
- | | |
|----|--|
| 01 | Through your employer |
| 02 | Through a family member's employer |
| 03 | Through COBRA coverage |
| 04 | Through insurance you purchase privately (Not COBRA) |
| 05 | Through Oregon Health Plan or Medicaid |
| 06 | Through Oregon Medical Insurance Pool (OMIP) |
| 07 | Through Medicare |
| 08 | Other |
| 88 | Don't know |
| 99 | Refused |

Q11OE IF: (Q11 is Other)

(150.1) What is your health insurance?

Probe if necessary

Q12 IF: (Q11 is Through your employ or Through a family me)

Does the employer providing your health insurance coverage pay all of the premium, part of the premium or none of the premium?

*(Premium is the amount paid into the insurance, usually on a monthly basis to keep the insurance in effect.
If family is covered but the employer only pays for employee, then enter 2, Part...)*

- (151.1)
- | | |
|---|---------------------|
| 1 | All of the premium |
| 2 | Part of the premium |
| 3 | None of the premium |
| 8 | Don't know |
| 9 | Refused |

Q13 IF: (Q8 is Yes AND Q12 is not All of the premium)

What is your monthly out-of-pocket share for your health insurance premium?

- (152.2)
- | | |
|----|------------------|
| 01 | No premium share |
| 02 | Less than \$50 |
| 03 | \$50 to \$99 |
| 04 | \$100 to \$199 |
| 05 | \$200 to \$299 |
| 06 | \$300 to \$399 |
| 07 | \$400 to \$499 |
| 08 | \$500 or more |
| 88 | Don't know |
| 99 | Refused |

Q14 IF: (Q8 is Yes)

With your current health insurance, what is your individual annual deductible amount?

If needed: Deductible, the annual amount you are required to pay in medical bills before your health insurance coverage begins to pay.

- | | | |
|---------|----|-------------------|
| (154.2) | 01 | No deductible |
| | 02 | \$250 or less |
| | 03 | \$500 |
| | 04 | \$1,000 |
| | 05 | \$1,500 |
| | 06 | \$2,000 |
| | 07 | \$2,500 |
| | 08 | More than \$2,500 |
| | 09 | Other |
| | 88 | Don't know |
| | 99 | Refused |

Q15 IF: (Q8 is Yes)

What is your co-pay for a primary care (not specialist) physician visit?

If needed: A co-pay is the amount you are required to pay at the time of the doctor's visit. We are only interested in co-pays for Physician's visits, not other kinds of visits, such as physical therapy, etc.

- | | | |
|---------|----|---------------|
| (156.2) | 01 | 0 - No co-pay |
| | 02 | \$1 |
| | 03 | \$2 |
| | 04 | \$5 |
| | 05 | \$10 |
| | 06 | \$15 |
| | 07 | \$20 |
| | 08 | Other |
| | 88 | Don't know |
| | 99 | Refused |

Q16 IF: (Q8 is Yes)

Is your current health insurance better, about the same, or worse than what you had with your FHIAP subsidy?

- | | | |
|---------|---|----------------|
| (158.1) | 1 | Better |
| | 2 | About the same |
| | 3 | Worse |
| | 8 | Don't know |
| | 9 | Refused |

Q16A IF: (Q16 is Better or Worse)

(159.1) Why do you feel that your current health insurance is \:Q16 than what you had with your FHIAP subsidy?

Record comments verbatim

Q17 IF: (Q8 is No)

There are many reasons why people do not have health insurance. Could you tell me the main reason why you do not currently have health insurance? Do not read list. Probe and clarify. Allow one response.

- 01 Can't afford/Too expensive
- 02 Unemployed or between jobs
- 03 Employer doesn't offer health insurance to any employees
- 04 Not eligible through employer because of part-time work/too few hours
- 05 Can't get coverage or have been refused coverage because of poor health, illness or age
- 06 Too difficult or too much paperwork
- 07 Don't need it
- 08 Other
- 88 Don't know
- 99 Refused

Q17OE IF: (Q17 is Other)

What is the other reason?
Record comments verbatim

Q18 Do you think you are now FINANCIALLY better off, about the same or worse off than you were when you left FHIAP?

- (163.1)
- 1 Better off financially
 - 2 About the same financially
 - 3 Worse off financially
 - 8 Don't know
 - 9 Refused

Q19 Since you left the FHIAP program, have you had any problems paying medical bills, including bills for doctors, hospitals, or prescription drugs? Read categories not including 8 and 9:

- 1 Yes
- 2 No, but I had to skip some needed medical tests or treatments.
- 3 No
- 8 Don't know
- 9 Refused

Q20 IF: (Q19 is Yes)

How much of an impact did these bills have on you and your family
- a major impact, a minor impact, or no impact?

(165.1)	1	Major impact
	2	Minor impact
	3	No impact
	8	Don't know
	9	Refused

Q21 Since you've left FHIAP, have you gone to a doctor's office,
clinic, or emergency room to get care for an illness or injury?

(166.1)	0	No
	1	Yes
	8	Don't know
	9	Refused

Q22 Since you've left FHIAP, have you made any appointments for
yourself with a doctor or other health provider for routine or
regular care?

*Routine care includes annual check-ups and regular visits for
non-emergency conditions.*

(167.1)	0	No
	1	Yes
	8	Don't know
	9	Refused

Q23 Do you have a regular place you go when you are sick or want
medical advice?

(168.1)	0	No
	1	Yes
	8	Don't know
	9	Refused

Q24 IF: (Q22 is Yes or Don't know or Refused AND Q23 is Yes or Don't
know or Refused)

Since you left FHIAP, where do you usually receive your medical
care? [Read 1-5. Accept only one answer

Answer #1 would include Kaiser Clinics and OHSU non-hospital
clinics.

(169.1)	1	Private doctor's office or clinic
	2	County health department
	3	Urgent care center
	4	Hospital Emergency room
	5	Or some other clinic
	6	Other
	8	Don't know
	9	Refused

Q24A IF: (Q24 is Or some other clinic)

Is the other clinic ...

(170.1)	1	At a hospital?
	2	Free clinic?
	3	Community or migrant clinic?
	4	Family planning clinic
	5	Other
	8	Don't know
	9	Refused

Q24OE IF: (Q24 is Other OR Q24A is Other)

(171.1) Where do you receive treatment? Record comments verbatim

Q25 In general, would you say your health is:

Read categories not including 8 and 9:

(172.1)	1	Excellent
	2	Very Good
	3	Good
	4	Fair
	5	Poor
	8	Don't know
	9	Refused

Q26 How much do you agree or disagree with the following statement?

I expect that I will need the FHIAP subsidy again at some time in the future.

Do you: *Read categories not including 8 and 9:*

(173.1)	1	Strongly Agree
	2	Somewhat Agree
	3	Neither Agree Nor Disagree
	4	Somewhat Disagree
	5	Strongly Disagree
	8	Don't know
	9	Refused

We are almost done with the survey. The following few questions are to help us better understand our results.

Q27 How many family members, including yourself and counting all adults and children, are currently living in your home?

Enter a number from 1-80 or 88 for Don't know, 99 for Refused.

Q28 How many of those currently living with you are 18 years old or younger?

Enter a number from 0-80 or 88 for Don't know, 99 for Refused.

Q29 *IF: (Q28>0 AND Q28<88)*

Thinking only about the children in your household who are 18 or younger, do they currently have health insurance coverage?

(178.1)	0	No
	1	Yes
	2	Some do, some don't
	8	Don't know
	9	Refused

Q30 Are you currently employed, self-employed, or not employed?

(179.1)	1	Employed
	2	Self-employed
	3	Not employed
	8	Don't know
	9	Refused

Q31 What is your age?

Enter the age in whole numbers from 18-100, 888 for Don't know, 999 for refused.

Q32 What is your current marital status?

Are you: *Read categories not including 8 and 9:*

(183.1)	1	Married
	2	With a domestic partner or significant other
	3	Single, never married
	4	Divorced
	5	Widowed
	6	Separated
	8	Don't know
	9	Refused

Q33 What is the highest grade or level of school you have completed?

01	Less than 8 years
02	Some high school (9 to 12 years, without a diploma)
03	High school diploma or GED
04	Some college but no degree
05	Associates degree or completed vocational/technical training
06	Bachelor's degree
07	Some graduate or professional study, but no degree
08	Graduate or professional degree (Master's, Professional, PhD)
88	Don't know
99	Refused

Q34 Record R'S gender. Don't guess. If you can't tell, ask:
Because the quality of phone connections sometimes makes it
difficult to tell, I have to ask you your gender. Are you male or
female?

(186.1)	0	Male
	1	Female
	8	Don't know
	9	Refused

Q35 Which of the following best describes your race?

Read categories not including 8 and 9:

(187.1)	1	American Indian or Alaskan Native
	2	Asian
	3	Black or African-American
	4	Native Hawaiian or other Pacific Islander
	5	White
	6	Multi-racial
	7	Other
	8	Don't know
	9	Refused

Q36 Would you describe yourself as Spanish, Hispanic or Latino?

	0	No
	1	Yes
	8	Don't know
	9	Refused

Q37 During the most recent 12-month period in which you were enrolled
in FHIAP, did your income generally increase, stay the same or
decrease?

If R was on FHIAP less than 12 months, include the entire period.

(189.1)	1	Increased
	2	Stayed the same
	3	Decreased
	8	Don't know
	9	Refused

Q38 Which of the following four statements best describes your
ability to get along on your household income?

(190.1)	1	You can't make ends meet
	2	You have just enough, no more
	3	You have enough, with a little extra sometimes
	4	You always have money left over
	8	Don't know
	9	Refused

Q39 Is your total annual family income below \$30,000 or \$30,000 and above? This is gross income, that is, before taxes and deductions are taken out.

(191.1)	1	Below \$30,000
	2	\$30,000 and above
	8	Don't know
	9	Refused

Q40A *IF: (Q39 is Below \$30,000)*

I am going to read a series of categories. Could you please stop me when I get to the one that contains your total family income? Again, we want you to include your gross income before taxes and deductions are taken out.

Read categories not including 8 and 9:

(192.2)	01	Less than \$9,000
	02	At least \$9,000 but less than \$12,000
	03	At least \$12,000, but less than \$14,000
	04	At least \$14,000, but less than \$16,000
	05	At least \$16,000, but less than \$18,000
	06	At least \$18,000, but less than \$20,000
	07	At least \$20,000, but less than \$22,000
	08	At least \$22,000, but less than \$24,000
	09	At least \$24,000, but less than \$26,000
	10	At least \$26,000, but less than \$28,000
	11	At least \$28,000, but less than \$30,000
	88	Don't know
	99	Refused

Q40B *IF: (Q39 is \$30,000 and above)*

I am going to read a series of categories. Could you please stop me when I get to the one that contains your total family income?

Again, we want you to include your gross income before taxes and deductions are taken out.

Read categories not including 8 and 9:

(194.2)	01	At least \$30,000, but less than \$32,000
	02	At least \$32,000, but less than \$34,000
	03	At least \$34,000, but less than \$36,000
	04	At least \$36,000, but less than \$38,000
	05	At least \$38,000, but less than \$40,000
	06	At least \$40,000, but less than \$42,000
	07	At least \$42,000, but less than \$44,000
	08	At least \$44,000, but less than \$46,000
	09	At least \$46,000, but less than \$48,000
	10	At least \$48,000, but less than \$50,000
	11	\$50,000 or more
	88	Don't know
	99	Refused

Q41 What else could you tell us about FHIAP that might help us to make the program better?
Record comments verbatim

THANKS

Those are all the questions we have today.

Thank you for your time!

APPENDIX B

Sources of Survey Bias

Sources of Potential Survey Bias

Method Bias. Survey research depends absolutely on an ability to reach and gain responses from the maximum number of individuals in the sample of interest. To the extent that people cannot be reached, bias is introduced, and the likelihood that results can be generalized to the general population is reduced. Each method of fielding surveys carries with it a form of bias. Telephone surveys are obviously limited by the availability of good phone numbers. Personal telephone numbers or a contact number were collected from most individuals enrolling in the FHIAP program, but this is a mobile population and many numbers were not current. Attempts were made to find current numbers through directory assistance and Internet directories, but 25% of the 696 “leavers” could not be located.

At least 10 attempts were made to reach each member of the sample in order to maximize the opportunity to complete an interview. Calls were evenly distributed across time of day, with at least half made during the weekend to ensure that employed and unemployed individuals had an equal opportunity to respond.

Non-Response Bias. While a 55% survey response rate is acceptable for analysis, the potential for bias in the results must be addressed. To assess the extent of the bias, the total group, “leavers,” was compared to the respondent group on key demographic variables: geography, age, subsidy level (as a proxy for income) and gender. With the exception of gender, the respondents and the total group are reflective of each other.

Geography. The respondent group is geographically very similar to the distribution of leavers during the research time frame. There are no marked differences between the total sample and respondents.

Table 1: Geographic Distribution: All Leavers vs. Respondents

Oregon Progress Board Economic Development Regions	All Leavers 11/00-6/01	% of Total	Completed Interviews	% of Total
Region 1 (Clatsop, Columbia, Lincoln and Tillamook)	30	4.3%	13	4.2%
Region 2 (Clackamas, Multnomah, Washington, Yamhill)	197	28.3%	78	25.5%
Region 3 (Benton, Lane, Linn, Marion, Polk)	197	28.3%	83	27.1%
Region 4 (Coos, Curry, Douglas, Jackson, Josephine)	174	25.0%	86	28.1%
Region 5 (Gilliam, Hood River, Morrow, Sherman, Umatilla, Wasco, Wheeler)	22	3.2%	10	3.3%
Region 6 (Crook, Deschutes, Jefferson)	30	4.3%	16	5.2%
Region 7 (Grant, Harney, Klamath, Lake)	21	3.0%	11	3.6%
Region 8 (Baker, Malheur, Union, Wallowa)	14	2.0%	5	1.6%
Unknown/Missing in FHIAP Data	11	1.6%	4	1.3%
Totals	696	100.0%	306	100.0%

Age. The respondent group under-represented in the 18 to 25 year old age category as well as the over 65 year old category. For all other categories, the two groups are alike. The average age for all “leavers” was 45, for the respondent group, it was 46.

**Table 2: Age Distribution
All Leavers vs. Respondents**

All Leavers 11/00-6/01			Respondents		
<i>Age Category</i>	<i>#</i>	<i>% of Total</i>	<i>Age Category</i>	<i>#</i>	<i>% of Total</i>
18-25	65	9.3%	18-25	15	4.9%
26-35	126	18.1%	26-35	57	18.6%
36-45	174	25.0%	36-45	73	23.9%
46-55	159	22.8%	46-55	77	25.2%
56-65	166	23.9%	56-65	84	27.5%
65+	6	0.9%	65+	0	0.0%
Total	696	100.0%	Total	306	100.0%
Mean Age	45		Mean age	46	

Gender. The original sample of FHIAP leavers was a group consisting of 67% females and 33% males. The respondent group is 76% female and 24% male. This is a result of three factors: respondents were given the opportunity to allow the person in the household “most knowledgeable about the family’s health insurance” to complete the survey interview, duplicate households included in the survey, and the fact that women disproportionately respond to surveys. The nature of the bias introduced by this disproportionate female response is not known.

Subsidy Level. The original sample of FHIAP leavers was also compared to the respondent group on the basis of their FHIAP subsidy level, which serves as a proxy measure of income. Again, the two groups are very similar.

**Table 3: Subsidy Level Distribution
All Leavers vs. Respondents**

<i>Subsidy Level</i>	All Leavers 11/00-6/01		Respondents	
	<i>#</i>	<i>% of Total</i>	<i>#</i>	<i>% of Total</i>
0.70	132	19.0%	64	20.9%
0.90	202	29.0%	91	29.7%
0.95	362	52.0%	151	49.3%
Total	696	100.0%	306	100.0%

Appendix C

Open-Ended Comments

What else could you tell us about FHIAP that might help us to make the program better?

Respondent Comments

What else could you tell us about FHIAP that might help us to make the program better?

Oregon Medical Insurance Pool also. It is a guaranteed coverage for people with poor health-about \$600 per month. But I had to drop it because I left FHIAP. I began getting insurance through my employer and it cost me money in the long run. I can now only afford to cover myself and not my family.

I found the program lousy. Having care for customers will help.

It worked out very well for me.

They should look at total income. FHIAP removed my family from the program since we had a house in Utah, which burned down, and we got some money out of it, but now there's nothing. So the people [FHIAP] need to look at income more than anything else

I was on it [FHIAP] at first and went through my husband's employer for insurance and it was a hassle to have it taken out of his paycheck and reimbursed. It would always come back to us really late. I would rather have it not taken out of the paycheck but pay the 5% instead.

I wish the program wouldn't let people go because of making a little more money, and I had to be let go because of \$8.00

Making more people aware of it.

Very satisfied

More coverage, dental and vision. The program seems to work fine.

It's good, but maybe [FHIAP should] find a way to help with the cost of prescriptions. I don't understand why they don't cover eye glasses anymore. They should help with eye glasses, because there are people out there who cannot afford it. I think it [FHIAP] helped me when I was in need of insurance. They say you can't have health insurance for 6 months before you get on FHIAP. That is wrong, they should change that, I could see them saying 1 month, but that [6 months] is too long. If my husband lost his job I would have to pay \$800 for our health care costs.

They should change the \$300 down payment.

Nothing....I thought it was great.

Maybe lower the deductible. Overall I thought it was pretty good. It's good to me.

I think that you should give the insurance for visual and dental. Especially dental. At least for the children.

It's a great program. They have always paid everything.

I had no grief with the program other than it's continually raising our rates. Providers were great. The rates really nailed me to a wall.

The deductible was too high. It was \$200. I wouldn't use the whole year's worth of \$200 and then wouldn't go to the doctor. But when you need a doctor, you end up

paying yourself. Prescriptions were too high. People don't take medication because they can't afford it. I liked the premium because it was based on income. Also, the FHIAP program was excellent for people ages 60-62 because we have to carry insurance ourselves and without FHIAP, I wouldn't have had any.

Give a grace period for the premium payments so that you are not discontinued if you are a few days late

Offer dental coverage.

Find a way to get dental included in program.

No comments, but I know that the program is useful for participants who fall under the income bracket.

Cut the waiting period on the waiting list.

Actually it worked pretty good once you're on it. There was a lack of funding of space available to serve people.

The program was a wonderful program, but when I had chosen the plan I could not get a provider. I chose the doctor who was under a different plan, and they said I could not choose the doctor because he was under a different plan. It may not be FHIAP's problem. I cannot think of anything else.

More consideration with people that have existing health problems. I have an infection.

More communication. Being explained something or why.

If you get delayed for a few days, they need to inform you but should not cancel just because of a delay.

Waiting period is longer. High co-pay and premiums. No dental included.

The program was great. The program needs to trust people who try to qualify. People at the program need to be more humane. If they can't help, they shouldn't offer help. The program should offer only low cost insurance. The program was a bit unfair and frustrating. The governor would be ashamed to know how this family was treated. They should provide legal services for people who are reapplying.

It is a really good program, I have nothing to add.

I don't think they should *[make us]* wait as long, because it took me over a year to get into FHIAP. Act faster than a year or more.

Application process was complicated when changing jobs

Put me back on it. It was a good program for people who didn't have coverage

Billing system should improve. There was too much confusion in billing. The program did not consider all issues that keep people out of the program.

Wish they could cover more things like eye, dental and hospital expenses.

Develop a program for people who make too much to qualify for FHIAP and just make them pay a co-payment.

Raise the amount of what you can earn per month for a four person family. If you are like us, and we are right on the edge for Christmas. Just raise it up a little, so that we could receive it. We have to wait 6 months before we can reapply.

I was happy with the program. but felt that policy holders should be given some warning before they are disqualified.

It's good for my son but not me. Make the co-payment cheaper. Expensive prescription. (price of drugs high).

I don't know how. It's like when I got all the co-pay. Then they increased my payment and that really sunk us. It's hard being referred from one doctor to another and/or to a specialist and it runs you a lot of money.

Paying \$300 requires deliverance of service.

There are a lot of people on the wait list, but no money for program. The wait to get in is too long (one year).

I would like the reapplication form to be sent through certified mail. FHIAP needs a way to notify their patients that a reapplication form is necessary for future coverage.

Provide insurance to people who make just a little more money

I think it was wonderful for the two or so years I was on it.

If you offer the program at \$12.75 a month, leave it at that. Don't raise it to \$37.75. I had to cancel it because I could no longer afford to pay any more than \$13 a month.

I'd like to see the guidelines increased because the insurance policies are too expensive for my program. I have a pre-existing condition and most insurance companies charge too much. The program doesn't take into account people who are self-employed and varying income levels.

I don't know, it was wonderful program and I wish I was still eligible. I was one of the early members of FHIAP, it was very helpful to me.

I had no problems, so no improvements

I think they should make payments for the whole family due at the same time and also make it one payment for the whole family.

No complaints at all. The program was really good to me and if I could go back I would. I had no problems with them.

There needs to be a person to touch base with. A personal agent that can be contacted and interacted with in case of unusual circumstances, [*someone*] who might be able to offer advice to the policy holder.

It is too confusing. It's too much paper work. It almost seems like they don't want you to have it now.

Nothing specific, but all around it was a good program.

They should have reviews every year, not every six months,

That's all I have. Everything I told you already.

Just wish I still had it now that I'm on Medicare. FHIAP was really good to me, and I cannot say anything bad about them.

It's a good program, I just couldn't afford to keep on it. I've got three teenagers and that's just an extra payment I couldn't afford.

It pays eighty percent of everything, and my family only has to pay 20%.

My family makes more money some times of the year than others. However, if the annual income increases, my family no longer can be under FHIAP. This is unfair and the system should be more fair.

Instead of taking me off the program, I would have preferred if they would raise the premiums slowly because I really enjoyed being on it, and right now my medication is very expensive and the premiums are high.

No comments, but it was good.

The paperwork is difficult to understand as to what they want regarding income. For example, they want to know what I made in October. So do they want what I made in October at the end of or starting?

I was on hold for a long time when I needed some help.

Never had any problems, don't know

It's already ready good, thank you. Although the wait is too long to get it. Other than that, it is good!

Problems arose when subsidy rose. I had to call my own provider, and I didn't know this. FHIAP doesn't have a connection with the health provider and that's a problem. FHIAP tells me to call the provider and the provider tells me to call FHIAP. This should change.

It was a year ago, but it was hassle free. Can't think of anything now/

No, it's good right now.

I wish that FHIAP was more well known. I don't know many people who know about the program. I feel it should be better publicized.

After the application the waiting process was between 8-10 months.

I had all the information I needed and it was pretty self explanatory, the whole thing. I don't see anything to make it better. I never really used it but I had it in case, so I never really saw it in use.

Don't charge so much to customers.

If people who barely qualify could just pay enough so they can be on it.

They should let the person stay on the program and have a higher rate--a rate that is affordable but not as same as private. When the person has her income increase a little bit higher, the person could be able to keep FHIAP because the new insurance is too high. The small increase in people's income should not deprive them of FHIAP.

Make it affordable for everybody, [make] the premiums affordable. It's good when the premium is lower, but when it's \$300, it makes it impossible.

Don't know, never took advantage of it, but thought it was an alright thing.

I don't have an answer because I didn't use it.

This program is good help for us, but the doctor refused to do a regular check for us even though we had this program. Appointment [wait] with doctor is too long, almost had to wait for two months.

Should take into account things like child support being taken out. Need to have a more realistic view of what actual income is. Things like childcare, etc. I think the idea that having to be uninsured for 6 months is ridiculous. Being in OHP for six months should qualify me for FHIAP. I still think that the program is excellent but I think the qualifications need to be looser.

It was a good program and I enjoyed being on it. I wish I could still be on it. I can't afford any other insurance. I am not insured.

They should be more lenient with the total income level. I am not eligible for FHIAP and I can't afford my own.

Have people not have such high deductibles, especially for people like my wife-she has cancer, she has to go 6 months before FHIAP will pay anything on it. People with low income and high costs of deductible-- I have to make a choice to see a doctor or pay for my medications that I need this month, medications that I have already been prescribed.

They need to take into consideration that some people run a home. I run a care home for the elderly and this should be taken into consideration when placing me in an income category.

Nothing, because it's already great.

Nothing, it's alright.

I thought it was good. I had no problems with it. It worked out fine for me. It took me a while to find my one insurance, that was complicated but it was fine. I just wish I had not canceled it, and I was still on it.

Nothing, it was great

They need to explain the medical benefits in depth, in writing or in person. FHIAP never did inform me of a waiting period for major medical procedures. I was never informed of a 6 months waiting period, so I left to BCBS.

Nothing to make it better, but had a good experience.

I think their income cut-off limit is unreasonable. I think all children should be covered.

Be able to set up program for pregnancy.

Open FHIAP up to more people who also have Medicare and still be able to have FHIAP.

I was completely satisfied.

Have more things available. Not give up your doctor. Dental and vision coverage.

Nothing, just keep the funding going

It was fair but got a little too high. Should be able to go by the individual.

Nothing that I know of.

Large deductible. Not sick right away and you pay for it.

I use the Oregon Health Plan because it actually insures me medically. I was with FHIAP because they helped pay for the insurance coverage provided by my work. The coverage provided by my work was not as good as OHP, so I changed policies. I was happy with FHIAP and has no complaints.

Add dental and vision.

They should judge people on a yearly income basis and not on what they made the month they applied.

Self-employment forms did not fit a realtor's *[my]* financial status accurately.

Really hard to re-apply when you are self-employed, but other than that FHIAP did really good.

I was happy they offered it to me, but I still couldn't afford it with the cost of insurance companies going up.

Charge in 3 month stages and...other than that it's really good.

Can't think of anything

They keep trying to charge for the children.

More verbal contact, customer service follow-ups. Making sure that policy holders really understand what their obligations and benefits are.

Letters are okay but personal interaction is more effective. For example when I got behind in November, I felt that I had no options and did not know what to do. Instead of discussing options, I ignored it instead of being able to discuss it with an agent.

Better communication with the client, administrative rules are pretty... not sympathetic.

I don't really know cause I was only with them a year.

I'm disappointed that I'm not eligible because I'm 65.

FHIAP should charge people according to their income. I could not afford to pay the percentage FHIAP was asking.

If income guideline is higher for an income of a single person.

Program is ok

Adjust the saving limit and combine it with the cost of living. I got bumped because I had too much money in the bank.

Would've liked it to have included dental care.

Decrease the amount of deductible.

Quit making people jump through hoops to meet their qualifications.

Nothing, it was wonderful

Best use of money was not done. Paid for tests when should have made insurance pay. Did not want to fight the battle. Told that could be in program and on Medicare but got dropped.

Do not take people of the program when they turn 65 years of age.

I think that the people were wonderful, but keep communication as good in future, including follow through.

Back office paper work needs to be sorted more efficiently and accurately. Angry that after having cancer 15 years ago and being cleared of it by a doctor that I was forced to go on a separate policy and had to pay a higher premium. I feel that the amount of paper work was unreasonable

Make it easier to get on, if you did not have to wait so long to get on the program. They made me wait 12 months. I had to be without insurance for 6 months. I called when the 6 months was up, and then it took 16 months before I actually got on it. It took that amount of waiting. They won't send the application until the waiting list time comes to my turn. There should not be such a long time of having to wait to get on it. The premiums should not be high for people who don't get sick all the time. With FHIAP they have a representative to help people to get on it, and they don't tell people about that. Should tell all people about that.

One time they cancelled me on FHIAP because of a mistake they made. Fix it so the premium payments don't have to be there on the 1st of the month. It's rough for people who are on social security. They don't get their check that soon.

I want the program to increase the qualified limit, such as from \$900 to \$1000. So I will be qualified even though I make \$1000.

It should be more structured where there would be people on your level to help you understand what you are getting with FHIAP. I would never have gone to the doctor so soon when I first got on it and have to pay high costs. They say it was in the papers they gave me. FHIAP should cover eye care. They don't tell us that eye care is not available. For the year I got it, I paid too much money on it. I would never want to be on it like it is now. They charge too much for the prescriptions. I could not afford the prescriptions. Lower the costs of prescriptions. I am living without prescriptions. Do something to make it work for people

If the individual carriers and FHIAP worked together so they knew what was going on. FHIAP needs to know what the insurance people are doing, so they could answer our questions when we call them. They tell us different things. They need to be informed about what is available in our individual areas, as far as the health care providers.

Better communication. I felt that the demand is so outweighed by what's available that the agency treats it like unemployment- where if you miss a deadline by a day then you lose your insurance. That happened to me twice. I paid for a year all at one time and the rates increased. At this time I was out of town and I did not get my renewal notice so I got taken out of the program.

Cheaper premium.

Price is high. If they would have paid for prescriptions better.

Get it out of the hands of the government.

Great program. Worked well. No problems.

Designed to be safety net but not serving its purpose , basically.

Cut back the paperwork/increase age eligibility/Raise income eligibility

Not a lot of people know about FHIAP, because it really is a nice thing. Should have dental benefits. I liked it very much but had to leave it and I am grateful I had it.

Shortening the time it takes to get on.

Enrolling is nightmare

A better way to renew the program. How does FHIAP know that I received the letter. FHIAP needs a better renewal process, before they kick people out. Maybe they should call their clients over the phone or something so that the clients know when to reapply.

Income changes. Given the opportunity, will go back

That it was easier to get on the program for someone who has an ongoing illness. I am reapplying. I have been on the waiting list for 12 months.

Have people that can answer questions about what the program is about because people always give the wrong info. They shouldn't change the rules in the middle of the treatment.

Have insurance companies that pay for health care when you enroll in them.

I was very happy with the service, but I would like some dental services added to it.

It would be nice if there was a group plan through FHIAP instead of going out and purchasing insurance myself. If FHIAP got a group plan where there were lots of people on the plan, it would be cheaper for everyone.

Possible increase the coverage like eye and dental.

They really need to work on making consecutive billing. Because they made a lot of errors on my billing. It happened 3 times to me!

Send bill on time.

More lead way as far as the sliding income scale. I would like to see a program for people who do qualify for FHIAP and still don't make very much money.

Raise the income limit. Attention to need. Lower premiums.

They should not put us out of the program which could be done by increasing the limit, so you will be qualified.

I don't know. It serves my purpose. That's all I know.

Very happy with it; glad to not need it at this time, so that someone else can take my place with FHIAP coverage. Grateful for it when I did have the FHIAP.

Change the qualification requirement

[Eligibility's] based on gross income; that's not what you live on. I would prefer the qualification to be based on net income.

More publicity because a lot of people do not know about FHIAP. Most people only know about OHP.

When I got widow's benefit, it put me \$500 above the qualifications, but after taxes I had almost the same amount left. Change the qualifications so that people with little extra income can still afford FHIAP.

It is a good program.

I was treated differently by people because I was enrolled in FHIAP. I was treated as a second class citizen as soon as I showed the card saying that I was a FHIAP member.

I did not have any experience with the program because 2 days after I was approved I got a letter from Medicare saying that I was approved as well, so I picked Medicare instead and left FHIAP for poorer people.

They should be sending paper on time. They need 24 hours service, because they always put me on hold. I was taken out from the program because they didn't receive my application form on time. However that was due to the delay in receiving the reapplication form from them.

Change the percentage that FHIAP subsidizes for premiums, instead of 70%, make it 60% or 50% if the family makes about \$500 dollars more above the qualification.

Reporting time for change of income is less, so paper work update is difficult.

Instead of dropping people increase the premium and make more number of holders.

The waiting list is too long

Personally I feel that I need that subsidy and I think, due to an auto accident settlement, I had too much money in the bank. That money disqualifies me for the subsidy. I feel that if at all possible, there should be subsidies available, and I would say, I would be happy to pay a portion of the premium, but I'm getting divorced, paying 2 rents. Financially, health insurance is so expensive. I feel like the program should be opened up, more of a sliding scale, not just cut people off. In general, income-wise I would still qualify, for the 70% percent bracket or whatever.

Nothing, it is fine the way it is

Make it widely known, more people would apply. Nobody knows about it.

In my situation it would be good if it could be available for my dependent, (son) because he has a hard time getting affordable insurance. It helped when he was here because it gave me piece of mind.

They should have a new system of evaluating the three month income. Because the monthly income tends to fluctuate and over a span of three months, it tends to fluctuate over a certain range. But that shouldn't effect the categorization into the FIAHP program. My opinion is that they should have a better look at people whose income fluctuates over the short span of 3 months. An earning excess in one month, a little lesser

the next month, should not affect their status ,as being a FHIAP qualifier or not. The procedure, of hearing and petitions is tiresome and also time consuming.

Lower the income qualification so that I can qualify again and have my insurance back.

Don't raise the premiums. Doctor's payments don't go towards the deductible, and the medications don't get reimbursed.

They should cover more, for instance, regular check ups and annual exams, more preventive medicine instead of going only where you are sick. I would like to be able to visit a doctor even though I am not sick. They can increase the annual income in order to be eligible for FHIAP so more people can get it.

If they could increase the minimum annual income in order to qualify, it will be just perfect.

To improve the program? To have less time to wait. No waiting list. It would be better if the program doesn't require a six month gap.

If it had broad coverage, a higher co-pay would be better.

Get some dental coverage

Insurance companies should better coordinate with FHIAP

Make it more eligible for regular people.

Things with FHIAP seemed disorganized: I notified them that we would no longer need the subsidy, and FHIAP continued to bill us to the extent that we received a "cancellation notice", etc.

It would be nice if it had dental and vision.

FHIAP could be more flexible for the individual who is filing. I work part time therefore my income increases and decreases. With a fluctuating income, one might be eligible for FHIAP one month, and not the next month.

Increase the qualifying amount to enable more people to get the FHIAP program

Need to communicate with people about the different policies available to them. Advice on getting other insurance that they can afford when they let a person go. Helping people with special needs

Cover more bills

Lower the premium.

Don't cancel a person right away if they have a good income for a couple months.

Make it more accessible to people in low income brackets.

Include dental and vision.

The limits on income are very low.

Need better prescription program

Don't cancel a person out because they make a little more money one month, and also they need better personnel.

I don't know. I thought it was a great program.

My major complaint is about the high risk pool. It is strange that my kids have a few minor problems but that nothing can be done about it. Still I had \$300 deductible a year. We would not even use that much insurance to pay a \$300 deductible when they are not really a high risk, such as my sons feet just turn in a little, but he can still wear regular shoes. Evaluate each situation a bit more on whether the people would be high risk or not.

To apply for the program it took forever to be approved, and they lost all my paper work. I did not use it very much. I was on it for a year. When I reapplied they said I was just over a few dollars. To apply for the program it took 7 months, and now they told me to re-apply for FHIAP. At this time I would be on a waiting list for one year. I can't afford \$500 a month for 3 kids for health insurance. They should look at case by case. I have 2 jobs and my jobs do not offer health insurance.

Monthly billing instead of bi-monthly.

Need to make the amount you can make a higher amount to be able to continue the program

Offer prescription plan, dental, and lower monthly payments

Very pleased with the program. Nothing.

Need another grouping for people who make just a little more money than usual

The deductible should not be so high.

Nothing. The people that we call for information at FHIAP should be a hell of a lot better, and they left me on hold for a half an hour. They need to change the way they treat people.

They had problems with their computer system, the monthly payment was an automatic deduction, and they wrote me and said it was no longer available. I think that should be available.

The billing system wasn't correct. I was receiving bills I wasn't supposed to. Take a closer look on the bills.

Make the waiting list better or have the worse people be able to get on faster

Medications that were prescribed weren't affordable because you had to reach a \$300 deductible in medications. Should lower the deductible before the year is up. That would help get the needed medication.

They need to look closer to individuals income, and the ages at which people receive help. I am only slightly over the income cutoff. I cannot afford insurance on my own.

Lower the deductible and premiums,

I wish I could stay on it, I asked if I could pay \$100 a month to stay on and they said no.

Take into consideration each individual. They threw me out of the program so we did not have insurance. They should raise the amount for a family of four, on how much their income would be so that we could qualify.

It is hard for self-employed people, because they go with your income in the last six months. I am a constructor and the last six months I made a good money because I had a project, but the six months later I did not have a project as well, and then I did not qualify and had to leave the program and if I wanted to get in FHIAP again, I will have to be on the waiting list and start all over again.

Offer vision and dental benefits.

Including dental and vision benefits would be extremely helpful.

Can they raise the income level a little higher so that families can have insurance? Just because we have an income increase that's wrong. I live on commission pay only. But this way I have to fill out more paper work to reapply for the program again. It is a big headache. For every three months, I would have to send the pay stubs again. Why can't they fix it so that people who have children have a program or health care? I don't know what to do, especially since I am from Iran, I don't understand all these rules. I have to make house payments, and I pay taxes. Health is very important.

Nothing to complain about

A little more flexible towards minor income increases

The program is not well organized. Poor inter-office communication.

I did not like to be HMO, and every doctor refused to honor HMO and I had to go far away to visit a doctor and I did not like it at all, because it is quite disturbing because I had to find a new doctor. Extend the amount of people they serve, because a lot of people are in waiting list because I got money as a gift and it is not fair that they removed the FHIAP just because of that.

When going off the program voluntarily, there should be more direction on how to terminate the subsidy.

Reduce the waiting time to get it. Health coverage more extended like eyes or dental issues.

They need to allow for child support payments that are taken off my gross income-they take into account taxes but not the child support. I get half of my check between taxes and child support. You have to be without health care before you get on this FHIAP I don't think this helps us.

Dental and visual included, everything else was fine

Nothing to complain about

Take better care of the patients, cover more of practical illnesses, basic checkup coverage. FHIAP didn't cover lung checkup, the kids weren't covered for regular checkups. The program isn't monitored wisely, no number to call and complain about it. When there are problems there wasn't a person to talk to.

FHIAP needs to get more organized.

I really don't know. It's a good program. It helped me.

They need to call people back. They said they were going to call me and they never did.

I really couldn't tell you anything, I was very impressed with it

I can't think of anything. I was very satisfied with it.

I think it did very well, the fact that the insurance company didn't pay my bills is one of the reasons that I can't afford insurance now. I'm inundated with medical bills. If something goes wrong, I'm not going anywhere near a hospital or doctor.

My employer doesn't cover vision care. FHIAP could offer subsidy just for vision care.

I was very happy with it, my contribution was only \$4. One thing--flexibility on the time frame of the renewal. I was stuck with no insurance for 6 months because my job insurance didn't work out and I was unemployed, but I couldn't renew the FHIAP subsidy because they said I missed the deadline.

Requested automatic payment of bills. FHIAP billed her for 2 or 3 months at once. It happened more than once even though we mailed letters to them.

More funds in it, so more people could participate in it. Very excellent program.

FHIAP could be more lenient of individual's circumstances. My subsidy was cancelled because I didn't re-apply. I did not re-apply because I was too sick.

My fiancé was on the waiting list for FHIAP for 14 months, and his job didn't offer insurance. He also doesn't qualify for Oregon Health Plan.

We can't afford private insurance for him because he makes \$1,500 a month but after taxes it's around \$1,000, which is not enough to pay for it. I could include him on my insurance but it would cost \$200, which is expensive too. This is a perfect example of a person who made a few extra dollars working overtime and didn't qualify, so my suggestion is to add categories such as 50% or 60% subsidy and not only 90, 80, and 70. And since we are not married he had to put down a single income.

Excellent program

The way the doctors bill the insurance companies. The specialist would total up all the visits and charge the insurance, and they would pay only a percentage, and the rest we would have to pay. Instead, FHIAP should make the forms clear and understandable, so we won't feel that FHIAP over bills to make up the difference. Also, come up with a different rate for specialists because certain procedures weren't covered at all.

\$300 deductible on drugs was hard for us. The automatic payment was stopped, and we would want it back. If you don't pay your payment on time, you don't have to be worried about being cancelled. It would help a lot. But FHIAP at least covered some of our drugs, whereas Medicare and Regence do not cover any of our medications, which makes it even more difficult.

The prescription deductible is high; it is \$300 per year.

Reduce it, depending on income.

I have no complaints. My husband just obtained a job therefore we were ineligible for the subsidy. His job is only temporary so I think they will need the subsidy again in the near future.

Lower the deductible.

I never used the program because we haven't had problems then, but dental would be good to have there.

Once your income goes up, they really increase the insurance payment.

Appendix D

Data Tables

		Current Percent FPL			Current Insurance Status		Employment Status		Total
		Up to 100% FPL	Up to 185% FPL	Over 185% FPL	Uninsured	Insured	Employed	Unemployed	Valid
How satisfied were you with the FHIAP program overall?	Very Satisfied	54.1%	63.9%	74.0%	55.5%	69.2%	62.6%	62.3%	62.3%
	Somewhat Satisfied	28.2%	20.1%	14.0%	21.9%	21.2%	20.7%	22.8%	21.5%
	Neither Satisfied nor dissatisfied	2.4%	3.5%	2.0%	4.4%	1.3%	3.9%	.9%	2.7%
	Somewhat Dissatisfied	10.6%	7.6%	2.0%	9.5%	6.4%	6.7%	9.6%	7.7%
	Very Dissatisfied	4.7%	4.9%	8.0%	8.8%	1.9%	6.1%	4.4%	5.7%
Total		N=85	N=144	N=50	N=137	N=156	N=179	N=114	N=297
Primary Reason for Leaving FHIAP	Income too high	20.5%	34.0%	53.2%	41.2%	26.5%	42.4%	18.8%	33.2%
	ESI	6.0%	9.2%	23.4%	4.6%	15.9%	12.8%	7.1%	10.8%
	OHP eligible	16.9%	10.6%		3.8%	17.2%	9.9%	12.5%	10.8%
	Medicare eligible	13.3%	15.6%	4.3%	3.1%	20.5%	1.7%	28.6%	12.2%
	Out-of-pocket too high	16.9%	9.9%	2.1%	15.3%	6.6%	8.1%	15.2%	10.8%
	Lost job and could no longer afford	3.6%	.7%		1.5%	1.3%	2.3%		1.4%
	Missed a premium payment	6.0%	5.7%	4.3%	10.7%	1.3%	4.1%	8.0%	5.6%
	Reapplication late	7.2%	5.0%	6.4%	7.6%	4.0%	8.7%	.9%	5.6%
	Moved out of state			2.1%	.8%	.7%	.6%	.9%	.7%
	FHIAP's mistake	1.2%		2.1%	.8%		1.2%		.7%
	Quality or service	4.8%	3.5%		4.6%	2.6%	3.5%	3.6%	3.5%
	Changed jobs, didn't connect back	1.2%				.7%		.9%	.3%
	Veteran's coverage		.7%			.7%		.9%	.3%
	Physician not available with FHIAP plans	1.2%	.7%		1.5%		.6%	.9%	.7%
	Miscellaneous	1.2%	2.1%	2.1%	2.3%	1.3%	1.7%	1.8%	1.7%
Never used it		2.1%		2.3%	.7%	2.3%		1.4%	
Total		N=83	N=141	N=47	N=131	N=151	N=172	N=112	N=286

		Current Percent FPL			Current Insurance Status		Employment Status		Total
		Up to 100% FPL	Up to 185% FPL	Over 185% FPL	Uninsured	Insured	Employed	Unemployed	Valid
Thinking about when you left FHIAP, did you have health insurance coverage?	No	59.8%	58.6%	50.0%	85.5%	29.3%	56.4%	54.8%	55.6%
	Yes	40.2%	41.4%	50.0%	14.5%	70.7%	43.6%	45.2%	44.4%
Total		N=87	N=145	N=48	N=138	N=157	N=179	N=115	N=295
Was there anytime when you did not have health insurance coverage since you left FHIAP?	No	71.4%	74.2%	88.0%	23.8%	86.7%	70.9%	85.2%	76.9%
	Yes	28.6%	25.8%	12.0%	76.2%	13.3%	29.1%	14.8%	23.1%
Total		N=35	N=62	N=25	N=21	N=113	N=79	N=54	N=134
Are you currently insured?	No	51.7%	49.0%	36.7%	100.0%		55.0%	34.2%	46.6%
	Yes	48.3%	51.0%	63.3%		100.0%	45.0%	65.8%	53.4%
Total		N=87	N=147	N=49	N=139	N=159	N=180	N=117	N=298
Is this the same health care coverage you had while you were receiving the FHIAP subsidy?	No	84.6%	68.0%	55.2%		71.9%	65.4%	78.4%	71.9%
	Yes	15.4%	32.0%	44.8%		28.1%	34.6%	21.6%	28.1%
Total		N=39	N=75	N=29		N=153	N=78	N=74	N=153
Does your current insurance cover your dependents as well?	No	57.9%	51.4%	40.0%		52.0%	39.7%	66.7%	52.0%
	Yes	42.1%	48.6%	60.0%		48.0%	60.3%	33.3%	48.0%
Total		N=38	N=72	N=30		N=148	N=78	N=69	N=148

		Current Percent FPL			Current Insurance Status		Employment Status		Total
		Up to 100% FPL	Up to 185% FPL	Over 185% FPL	Uninsured	Insured	Employed	Unemployed	Valid
Is your current health insurance:	Through your employer	7.3%	25.3%	35.5%		23.6%	45.7%		23.6%
	Through a family member's employer	2.4%	8.0%	35.5%		11.5%	9.9%	13.3%	11.5%
	Through COBRA coverage		1.3%			.6%	1.2%		.6%
	Through insurance you purchase privately (Not COBRA)	4.9%	8.0%	22.6%		10.2%	9.9%	10.7%	10.2%
	Through Oregon Health Plan or Medicaid	51.2%	20.0%			24.8%	24.7%	25.3%	24.8%
	Through Oregon Medical Insurance Pool (OMIP)	9.8%	5.3%	3.2%		6.4%	3.7%	8.0%	6.4%
	Through Medicare	22.0%	25.3%	3.2%		18.5%	1.2%	37.3%	18.5%
	Other	2.4%	6.7%			4.5%	3.7%	5.3%	4.5%
Total		N=41	N=75	N=31		N=157	N=81	N=75	N=157
Does the employer providing your health insurance coverage pay all of the premium, part of the premium or none of the premium?	All of the premium		29.2%	40.0%		30.8%	25.6%	55.6%	30.8%
	Part of the premium	75.0%	66.7%	55.0%		63.5%	69.8%	33.3%	63.5%
	None of the premium	25.0%	4.2%	5.0%		5.8%	4.7%	11.1%	5.8%
Total		N=4	N=24	N=20		N=52	N=43	N=9	N=52
What is your monthly out-of-pocket share for your health insurance premium?	No premium share	29.3%	15.2%	4.8%		19.0%	11.9%	24.6%	19.0%
	Less than \$50	46.3%	22.7%	19.0%		30.7%	40.3%	21.7%	30.7%
	\$50 to \$99	9.8%	22.7%	19.0%		16.8%	10.4%	23.2%	16.8%
	\$100 to \$199	9.8%	22.7%	33.3%		19.0%	19.4%	18.8%	19.0%
	\$200 to \$299	4.9%	7.6%	14.3%		8.0%	10.4%	5.8%	8.0%
	\$300 to \$399		4.5%	9.5%		4.4%	6.0%	2.9%	4.4%
	\$400 to \$499		3.0%			1.5%	1.5%	1.4%	1.5%
	\$500 or more		1.5%			.7%		1.4%	.7%
Total		N=41	N=66	N=21		N=137	N=67	N=69	N=137

		Current Percent FPL			Current Insurance Status		Employment Status		Total
		Up to 100% FPL	Up to 185% FPL	Over 185% FPL	Uninsured	Insured	Employed	Unemployed	Valid
With your current health insurance, what is your individual annual deductible amount?	No deductible	81.1%	45.8%	45.0%		57.7%	49.2%	65.6%	57.7%
	\$250 or less	5.4%	32.2%	30.0%		23.6%	24.6%	23.0%	23.6%
	\$500	10.8%	16.9%	20.0%		14.6%	21.3%	8.2%	14.6%
	\$1,000			5.0%		.8%	1.6%		.8%
	\$2,000		1.7%			.8%		1.6%	.8%
	Other	2.7%	3.4%			2.4%	3.3%	1.6%	2.4%
Total		N=37	N=59	N=20		N=123	N=61	N=61	N=123
What is your co-pay for a primary care (not specialist) physician visit?	0 - No co-pay	78.9%	41.8%	20.7%		47.9%	34.2%	62.7%	47.9%
	\$2			3.4%		.7%		1.5%	.7%
	\$5			10.3%		2.1%	2.6%	1.5%	2.1%
	\$10	5.3%	23.9%	24.1%		18.1%	21.1%	14.9%	18.1%
	\$15	5.3%	23.9%	20.7%		18.8%	26.3%	10.4%	18.8%
	\$20	5.3%	7.5%	17.2%		9.0%	13.2%	4.5%	9.0%
	Other	5.3%	3.0%	3.4%		3.5%	2.6%	4.5%	3.5%
Total		N=38	N=67	N=29		N=144	N=76	N=67	N=144
Is your current health insurance better, about the same, or worse than what you had with your FHIAP subsidy?	Better	59.5%	25.4%	32.1%		37.2%	35.1%	39.7%	37.2%
	About the same	21.6%	49.3%	57.1%		41.4%	46.8%	35.3%	41.4%
	Worse	18.9%	25.4%	10.7%		21.4%	18.2%	25.0%	21.4%
Total		N=37	N=71	N=28		N=145	N=77	N=68	N=145

		Current Percent FPL			Current Insurance Status		Employment Status		Total
		Up to 100% FPL	Up to 185% FPL	Over 185% FPL	Uninsured	Insured	Employed	Unemployed	Valid
Why is your current coverage better or worse than FHIAP?	Premiums	14.3%	11.1%	16.7%		13.1%	9.8%	16.3%	13.1%
	Co-Pays	10.7%	5.6%	8.3%		8.3%	9.8%	7.0%	8.3%
	Deductible	7.1%	11.1%	8.3%		8.3%	7.3%	9.3%	8.3%
	Out-of-pocket expenses		5.6%	16.7%		7.1%	4.9%	9.3%	7.1%
	Prescription coverage	10.7%	11.1%	8.3%		9.5%	2.4%	16.3%	9.5%
	Dental coverage	3.6%	8.3%	25.0%		11.9%	22.0%	2.3%	11.9%
	Coverage generally	21.4%	19.4%	8.3%		16.7%	22.0%	11.6%	16.7%
	Choice of physicians	7.1%	2.8%	8.3%		4.8%	4.9%	4.7%	4.8%
	No cost	7.1%	2.8%			3.6%		7.0%	3.6%
	Customer service	3.6%	5.6%			3.6%		7.0%	3.6%
	No waiting period/No exclusions					1.2%	2.4%		1.2%
	Not a state agency		2.8%			1.2%	2.4%		1.2%
	Alternative care covered		2.8%			1.2%	2.4%		1.2%
	Access		5.6%			2.4%	4.9%		2.4%
	Other	14.3%	5.6%			7.1%	4.9%	9.3%	7.1%
Total		N=28	N=36	N=12		N=84	N=41	N=43	N=84

		Current Percent FPL			Current Insurance Status		Employment Status		Total
		Up to 100% FPL	Up to 185% FPL	Over 185% FPL	Uninsured	Insured	Employed	Unemployed	Valid
Why is your current coverage better or worse than FHIAP?	Premiums		17.6%			8.6%	10.5%	6.3%	8.6%
	Co-Pays		11.8%			8.6%	10.5%	6.3%	8.6%
	Deductible		5.9%	20.0%		5.7%	10.5%		5.7%
	Out-of-pocket expenses	18.2%	11.8%	20.0%		14.3%	5.3%	25.0%	14.3%
	Prescription coverage	18.2%	17.6%	20.0%		17.1%	5.3%	31.3%	17.1%
	Dental coverage	18.2%	11.8%			11.4%	10.5%	12.5%	11.4%
	Vision coverage	9.1%	5.9%	40.0%		14.3%	21.1%	6.3%	14.3%
	Coverage generally	9.1%	11.8%			8.6%	10.5%	6.3%	8.6%
	Customer service		5.9%			2.9%	5.3%		2.9%
	No waiting period/No exclusions	9.1%				2.9%	5.3%		2.9%
	Other	18.2%				5.7%	5.3%	6.3%	5.7%
Total		N=11	N=17	N=5		N=35	N=19	N=16	N=35
What is the main reason you do not currently have health insurance?	Can't afford/Too expensive	84.4%	83.3%	72.2%	80.6%		78.8%	85.0%	80.6%
	Unemployed or between jobs	2.2%	1.4%		3.6%		3.0%	5.0%	3.6%
	Employer doesn't offer health insurance to any employees	2.2%	8.3%		5.0%		5.1%	5.0%	5.0%
	Can't get coverage or have been refused coverage because....		2.8%	5.6%	2.2%		2.0%	2.5%	2.2%
	Other	11.1%	4.2%	22.2%	8.6%		11.1%	2.5%	8.6%
Total		N=45	N=72	N=18	N=139		N=99	N=40	N=139
Do you think you are now FINANCIALLY better off, about the same or worse off than you were when you left FHIAP?	Better off financially	20.9%	16.0%	47.9%	10.9%	35.3%	24.7%	21.9%	23.6%
	About the same financially	39.5%	42.4%	27.1%	49.3%	28.8%	43.8%	30.7%	38.7%
	Worse off financially	39.5%	41.7%	25.0%	39.9%	35.9%	31.5%	47.4%	37.7%
Total		N=86	N=144	N=48	N=138	N=153	N=178	N=114	N=292

		Current Percent FPL			Current Insurance Status		Employment Status		Total
		Up to 100% FPL	Up to 185% FPL	Over 185% FPL	Uninsured	Insured	Employed	Unemployed	Valid
Since you left the FHIAP program, have you had any problems paying medical bills, including bills for doctors, hospitals or prescription drugs?	Yes	34.9%	45.5%	24.0%	48.6%	28.4%	34.8%	43.0%	38.0%
	No, but I had to skip some needed medical tests or treat....	10.5%	6.9%	6.0%	8.7%	6.5%	6.6%	8.8%	7.5%
	No	54.7%	47.6%	70.0%	42.8%	65.2%	58.6%	48.2%	54.6%
Total		N=86	N=145	N=50	N=138	N=155	N=181	N=114	N=295
How much of an impact did these bills have on you and your family?	Major impact	83.3%	72.3%	33.3%	74.6%	65.1%	71.0%	71.4%	71.2%
	Minor impact	16.7%	26.2%	66.7%	23.9%	34.9%	27.4%	28.6%	27.9%
	No impact		1.5%		1.5%		1.6%		.9%
Total		N=30	N=65	N=12	N=67	N=43	N=62	N=49	N=111
Since you've left FHIAP, have you gone to a doctor's office, clinic, or emergency room to get care for an illness or injury?	No	46.6%	39.5%	44.0%	55.4%	29.9%	46.7%	35.6%	42.3%
	Yes	53.4%	60.5%	56.0%	44.6%	70.1%	53.3%	64.4%	57.7%
Total		N=88	N=147	N=50	N=139	N=157	N=180	N=118	N=298
Since you've left FHIAP, have you made any appointments for yourself with a doctor or other health provider for routine or regular care?	No	46.6%	51.0%	44.0%	69.8%	27.8%	54.7%	35.6%	47.2%
	Yes	53.4%	49.0%	56.0%	30.2%	72.2%	45.3%	64.4%	52.8%
Total		N=88	N=147	N=50	N=139	N=158	N=181	N=118	N=299
Do you have a regular place you go when you are sick or or want medical advice?	No	14.9%	17.0%	16.0%	27.3%	5.8%	20.6%	9.4%	16.2%
	Yes	85.1%	83.0%	84.0%	72.7%	94.2%	79.4%	90.6%	83.8%
Total			N=147	N=50	N=139	N=156	N=180	N=117	N=297

		Current Percent FPL			Current Insurance Status		Employment Status		Total
		Up to 100% FPL	Up to 185% FPL	Over 185% FPL	Uninsured	Insured	Employed	Unemployed	Valid
Since you left FHIAP, where do you usually receive your medical care?	Private doctor's office or clinic	75.0%	80.3%	92.3%	65.7%	85.3%	83.8%	77.5%	80.7%
	County health department	4.5%	3.0%	3.8%	11.4%	.9%	4.1%	2.8%	3.4%
	Urgent care center	2.3%			2.9%			1.4%	.7%
	Hospital Emergency room	2.3%	1.5%	3.8%	2.9%	2.8%	4.1%	1.4%	2.8%
	Or some other clinic	13.6%	7.6%		14.3%	6.4%	5.4%	11.3%	8.3%
	Other	2.3%	7.6%		2.9%	4.6%	2.7%	5.6%	4.1%
Total		N=44	N=66	N=26	N=35	N=109	N=74	N=71	N=145
Is the other clinic ...	At a hospital?	20.0%				16.7%		12.5%	9.1%
	Community or migrant clinic?	40.0%			40.0%		33.3%	12.5%	18.2%
	Family planning clinic	40.0%	40.0%		40.0%	50.0%	33.3%	50.0%	45.5%
	Other		60.0%		20.0%	33.3%	33.3%	25.0%	27.3%
Total		N=5	N=5		N=5	N=6	N=3	N=8	N=11
In general, would you say your health is:	Excellent	10.5%	10.2%	26.0%	9.4%	15.8%	15.0%	9.4%	12.8%
	Very Good	24.4%	29.9%	38.0%	29.7%	27.8%	32.8%	23.1%	29.0%
	Good	30.2%	29.3%	18.0%	34.8%	25.3%	33.9%	23.1%	29.6%
	Fair	19.8%	22.4%	10.0%	19.6%	17.7%	13.9%	25.6%	18.5%
	Poor	15.1%	8.2%	8.0%	6.5%	13.3%	4.4%	18.8%	10.1%
Total		N=86	N=147	N=50	N=138	N=158	N=180	N=117	N=297

		Current Percent FPL			Current Insurance Status		Employment Status		Total
		Up to 100% FPL	Up to 185% FPL	Over 185% FPL	Uninsured	Insured	Employed	Unemployed	Valid
I expect that I will need the FHIAP subsidy again at some time in the future.	Strongly Agree	48.8%	45.7%	25.5%	54.9%	30.4%	45.9%	35.4%	41.7%
	Somewhat Agree	21.4%	18.8%	25.5%	23.3%	18.9%	23.5%	18.6%	21.6%
	Neither Agree Nor Disagree	9.5%	13.8%	12.8%	5.3%	18.2%	11.8%	12.4%	12.0%
	Somewhat Disagree	9.5%	6.5%	10.6%	7.5%	9.5%	8.2%	8.8%	8.5%
	Strongly Disagree	10.7%	15.2%	25.5%	9.0%	23.0%	10.6%	24.8%	16.3%
Total		N=84	N=138	N=47	N=133	N=148	N=170	N=113	N=283
How many family members, including yourself and counting all adults and children are currently living in your home?	1	15.9%	22.4%	16.0%	15.1%	24.1%	14.4%	28.0%	19.7%
	2	35.2%	34.7%	48.0%	37.4%	36.1%	34.3%	40.7%	36.8%
	3	14.8%	10.9%	12.0%	14.4%	10.1%	11.6%	13.6%	12.4%
	4	19.3%	17.7%	18.0%	19.4%	17.7%	24.9%	8.5%	18.4%
	5	9.1%	12.9%	4.0%	10.1%	9.5%	11.0%	7.6%	9.7%
	6	4.5%		2.0%	2.2%	1.9%	2.2%	1.7%	2.0%
	7		.7%		.7%		.6%		.3%
	8	1.1%				.6%	.6%		.3%
	9		.7%		.7%		.6%		.3%
Total		N=88	N=147	N=50	N=139	N=158	N=181	N=118	N=299
Mean Family Size		2.9	2.7	2.5	2.9	2.6	3.0	2.3	2.7
How many of those currently living with you are 18 years or younger?	0	56.3%	46.3%	60.0%	51.1%	52.2%	42.5%	66.7%	52.0%
	1	12.6%	21.1%	18.0%	19.4%	17.2%	22.1%	12.0%	18.1%
	2	20.7%	17.7%	16.0%	18.0%	19.1%	22.1%	12.8%	18.5%
	3	6.9%	14.3%	6.0%	10.8%	9.6%	11.6%	7.7%	10.1%
	4	3.4%	.7%		.7%	1.9%	1.7%	.9%	1.3%
Total		N=87	N=147	N=50	N=139	N=157	N=181	N=117	N=298

		Current Percent FPL			Current Insurance Status		Employment Status		Total
		Up to 100% FPL	Up to 185% FPL	Over 185% FPL	Uninsured	Insured	Employed	Unemployed	Valid
Thinking only about the children in your household who are 18 or younger, do they currently have health insurance coverage?	No	18.4%	39.7%	15.0%	47.1%	14.9%	35.0%	17.9%	30.3%
	Yes	78.9%	55.1%	85.0%	48.5%	82.4%	62.1%	76.9%	66.2%
	Some do, some don't	2.6%	5.1%		4.4%	2.7%	2.9%	5.1%	3.5%
Total		N=38	N=78	N=20	N=68	N=74	N=103	N=39	N=142
Are you currently employed, self-employed, or not employed?	Employed	42.0%	52.4%	54.0%	54.7%	44.9%	81.2%		49.2%
	Self-employed	12.5%	6.8%	22.0%	16.5%	6.3%	18.8%		11.4%
	Not employed	45.5%	40.8%	24.0%	28.8%	48.7%		100.0%	39.5%
Total		N=88	N=147	N=50	N=139	N=158	N=181	N=118	N=299
Mean Age		48.5	47.5	40.1	46.2	46.6	43.5	50.7	46.4
What is your current marital status?	Married	50.0%	53.7%	60.0%	54.7%	50.3%	50.8%	55.9%	52.5%
	With a domestic partner or significant other	3.4%	1.4%	6.0%	2.9%	2.5%	2.8%	2.5%	2.7%
	Single, never married	10.2%	11.6%	22.0%	12.9%	13.2%	16.6%	7.6%	13.0%
	Divorced	22.7%	23.1%	8.0%	20.1%	22.6%	22.7%	18.6%	21.3%
	Widowed	11.4%	8.8%	2.0%	7.9%	9.4%	5.0%	14.4%	8.6%
	Separated	2.3%	1.4%	2.0%	1.4%	1.9%	2.2%	.8%	2.0%
Total		N=88	N=147	N=50	N=139	N=159	N=181	N=118	N=301
Gender	Male	17.0%	31.3%	22.0%	21.6%	27.2%	28.7%	17.8%	24.3%
	Female	83.0%	68.7%	78.0%	78.4%	72.8%	71.3%	82.2%	75.7%
Total		N=88	N=147	N=50	N=139	N=158	N=181	N=118	N=300

		Current Percent FPL			Current Insurance Status		Employment Status		Total
		Up to 100% FPL	Up to 185% FPL	Over 185% FPL	Uninsured	Insured	Employed	Unemployed	Valid
Which of the following best describes your race?	American Indian or Alaskan Native	1.1%	2.7%		2.2%	1.3%	1.1%	2.5%	1.7%
	Asian	2.3%	2.7%	2.0%	3.6%	2.5%	3.3%	2.5%	3.0%
	Black or African-American	1.1%	.7%			1.3%	1.1%		.7%
	White	93.2%	81.6%	91.8%	85.6%	86.1%	85.0%	87.3%	86.0%
	Multi-racial	1.1%	3.4%	4.1%	3.6%	1.9%	2.2%	3.4%	2.7%
	Other	1.1%	8.8%	2.0%	5.0%	7.0%	7.2%	4.2%	6.0%
Total		N=88	N=147	N=49	N=139	N=158	N=180	N=118	N=299
Would you describe yourself as Spanish, Hispanic or Latino?	No	98.9%	91.8%	95.9%	95.0%	93.6%	95.0%	93.2%	94.3%
	Yes	1.1%	8.2%	4.1%	5.0%	6.4%	5.0%	6.8%	5.7%
Total		N=88	N=147	N=49	N=139	N=157	N=180	N=118	N=298
During the most recent 12-month period in which you were enrolled in FHIAP, did your income generally increase, stay the same or decrease?	Increased	19.5%	30.3%	40.8%	31.2%	25.8%	33.0%	21.6%	28.5%
	Stayed the same	62.1%	55.2%	53.1%	60.1%	54.2%	53.6%	62.1%	56.9%
	Decreased	18.4%	14.5%	6.1%	8.7%	20.0%	13.4%	16.4%	14.6%
Total		N=87	N=145	N=49	N=138	N=155	N=179	N=116	N=295
Which of the following four statements best describes your ability to get along on your household income?	You can't make ends meet	27.3%	17.7%	14.0%	17.4%	22.8%	14.4%	28.8%	20.1%
	You have just enough, no more	59.1%	57.8%	34.0%	60.1%	46.8%	54.4%	50.8%	53.0%
	You have enough, with a little extra sometimes	13.6%	21.8%	46.0%	21.7%	25.3%	26.7%	19.5%	23.8%
	You always have money left over		2.7%	6.0%	.7%	5.1%	4.4%	.8%	3.0%
Total		N=88	N=147	N=50	N=138	N=158	N=180	N=118	N=298
Is your total annual family gross income below \$30,000 or \$30,000 and above?	Below \$30,000	100.0%	93.9%	40.0%	89.0%	83.9%	80.9%	94.8%	86.3%
	\$30,000 and above		6.1%	60.0%	11.0%	16.1%	19.1%	5.2%	13.7%
Total		N=88	N=147	N=50	N=136	N=155	N=178	N=115	N=293