

QHP ENROLLMENT STUDY

RESULTS FROM A SURVEY OF COVER OREGON ENROLLEES

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TODAY'S PRESENTATION

Key Findings from a recent survey of Cover Oregon enrollees from the 2013-2014 open enrollment period.

KEY STUDY OBJECTIVES

OBJECTIVE #1: UNDERSTAND ENROLLMENT

Who enrolled in Cover Oregon, why did they enroll, and how did they choose which plan to enroll in?

OBJECTIVE #2: ASSESS CONNECTIONS TO CARE

How connected to care were people before and after enrolling in coverage?
How much trouble were they having accessing care before they enrolled?

OBJECTIVE #3: PROFILE THE HEALTH OF ENROLLEES

What are the likely health and health care needs of new enrollees? How do they compare to other insured or uninsured populations?

STUDY METHODS

MAIL SURVEY

9,945

Representative random Sample of Cover Oregon subscribers, taken just after open enrollment ended.



2,114

Responded to the survey, a **21%** response rate.

WHAT WE WANTED TO KNOW

1. Coverage status before enrolling
2. Why they left their old plan, if applicable
3. How they heard about Cover Oregon
4. How they picked their new plan
5. Access to and use of care before signing up
6. Whether signing up improved care connections
7. Health challenges faced by new enrollees
8. Demographic information about the enrollees

HOW WE ANALYZED THE DATA

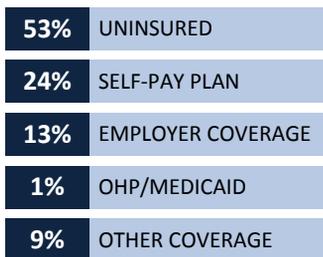
1. Overall snapshot of all enrollees
2. By geographic area of the state
3. By insurance status prior to signing up
4. By respondent demographics, including race & ethnicity, income, age, gender, & education.

Note: A 21% response rate is low enough that these results should be interpreted with some caution. Responders may not be completely representative of the entire enrollee population.

UNDERSTANDING ENROLLMENT

KEY FINDING: MOST NEW ENROLLEES WERE UNINSURED BEFORE SIGNING UP

What Kind of Coverage Did QHP Enrollees Have Before?

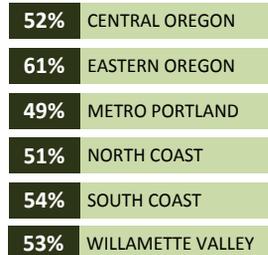


Computed using responses from Q1-Q3 on the enrollment survey (n = 2096).

38% were uninsured for 12 months prior to coming to Cover Oregon
15% had at least some coverage in the prior 12 months

PROPORTIONAL "COVERAGE GAINS" WERE LARGEST IN THE RURAL AREAS:

What Percent Were Uninsured at the Time of Enrollment?



Computed using responses from Q1-Q3 of survey. Statewide average= 53%. (n=2066).

UNDERSTANDING ENROLLMENT

KEY FINDING: COST WAS THE MOST IMPORTANT FACTOR IN CHOOSING

WHY DID PEOPLE SWITCH?

Affordability was a key reason people used Cover Oregon to switch plans.

88% of those who already had some other coverage were paying a monthly premium for it.

Of those, **77%** said the premium in their old plan was sometimes or often difficult to afford.

WHICH OF THE FOLLOWING WAS MOST IMPORTANT TO YOU WHEN YOU CHOSE A HEALTH PLAN THROUGH COVER OREGON?

All Enrollees (n=1926)		Insured at Baseline (n=991)
59%	Premium amount	54%
7%	Copayments	6%
6%	Quality ratings of the plans	8%
9%	Whether my doctor was in the plan	12%
9%	Whether certain types of care were covered	10%
10%	Something else	10%

The most common other responses were: Lower deductible or Total cost/out of pocket expenses.

As a group, cost and out-of-pocket financial risk were the most important drivers of plan choice.

UNDERSTANDING ENROLLMENT

KEY FINDING: COVER OREGON'S VARIED OUTREACH EFFORTS WORKED WELL

HOW DID YOU HEAR ABOUT COVER OREGON? MARK ALL THAT APPLY.

38%	TV Advertisement
38%	TV or Radio News
33%	Friends & Family
17%	Radio Ad
14%	Sign or Billboard
8%	Community Organization
7%	Employer
23%	Other

From survey Q8 (n=2114 respondents).

The most common other responses: Internet/Web/Online; Newspaper; Insurance Company/Agent.

ANY KEY DIFFERENCES?

Community partners, employers, and word of mouth were selected significantly more often by minority and low-income respondents.

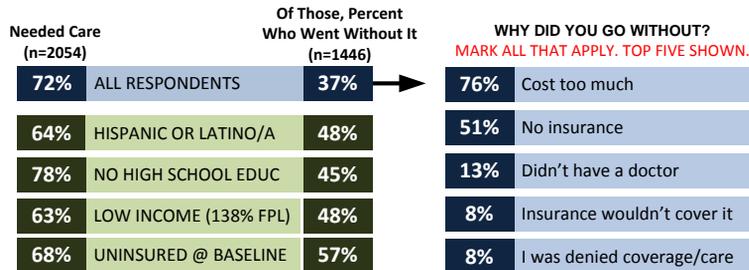
TV ads and TV news were selected less often by these same groups.

Continuing to work through outreach channels other than mass media saturation will be important to reaching these communities.

CONNECTIONS TO CARE

KEY FINDING: COST WAS A MAJOR BARRIER TO CARE BEFORE ENROLLING

NEED FOR & ABILITY TO GET MEDICAL CARE IN THE SIX MONTHS PRIOR TO ENROLLING

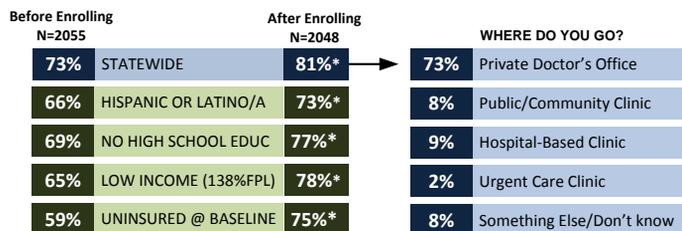


Computed using responses from Q16-Q18 on the enrollment survey. See detailed data tables in the Appendix for more results on these questions.

Prior to enrolling, cost/affordability was a major barrier to getting health care, especially among low-income, minority, and previously uninsured enrollees.

CONNECTIONS TO CARE

KEY FINDING: ENROLLING ENHANCED CONNECTIONS TO CARE



Computed using responses from Q11-Q13 on the enrollment survey. See detailed data tables in the Appendix for more results on these questions. *Percent increase is statistically significant (p<.05).

After enrolling, people were more likely to say they now had a "usual place to go" to receive health care. These connections were mostly to clinics and outpatient settings, not the ER, and improvements were particularly significant among traditionally vulnerable or underserved populations.

HEALTH PROFILES

KEY FINDING: ENROLLEES WERE FAIRLY HEALTHY OVERALL

Percent Who Have Been Told by a Doctor They Currently Have....

QHP Enrollees	Comparison Group (see note)
7% DIABETES	10%
7% ASTHMA	17%
20% HYPERTENSION	28%
18% HIGH CHOLESTEROL	20%
13% DEPRESSION	42%
12% ANXIETY DISORDER	36%
3% PTSD	n/a
32% 1 OR MORE PHYSICAL	53%
16% 1 OR MORE MENTAL	42%
10% 1 OR MORE OF EACH	28%

Computed using responses from Q29-30 on the enrollment survey. Total n=2114 respondents. Comparison results are from the Oregon Health Study's 2011 survey of a panel of 17,677 low-income Oregonians on Medicaid or uninsured.

OVERALL HEALTH DESCRIBED AS GOOD, VERY GOOD, OR EXCELLENT

QHP Enrollees	Comparison Group
85%	55%

SELF-REPORTED SMOKING RATE

QHP Enrollees	Comparison Group
9%	40%

New QHP enrollees were generally healthier than those on Medicaid or uninsured, according to similar surveys of Oregonians conducted recently in those populations.

HEALTH PROFILES

KEY FINDING: THOSE WITH CHRONIC CONDITIONS ARE MOSTLY TAKING MEDS FOR THEM

CONTROL OF CHRONIC CONDITIONS AMONG RECENT QHP ENROLLEES

Percent Who Have It	Percent Taking Meds for It
7% DIABETES	6%
7% ASTHMA	5%
20% HYPERTENSION	18%
18% HIGH CHOLESTEROL	14%
13% DEPRESSION	11%
12% ANXIETY DISORDER	10%

Computed using responses from Q29-30 on the enrollment survey. Total n=2114 respondents.

New QHP enrollees who do have chronic conditions are mostly already well connected to appropriate medications, so likely aren't coming in with conditions that are out of control.

SUMMARY OF KEY FINDINGS

OBJECTIVE #1: UNDERSTAND ENROLLMENT

Most enrollees were uninsured before signing up. Those who already had coverage most came to Cover Oregon looking for more affordable choices. Price and out-of-pocket risks were the biggest drivers of plan choice.

OBJECTIVE #2: ASSESS CONNECTIONS TO CARE

Unmet health care need due to costs were a problem prior to enrolling, especially for minority and low income populations. Signing up helped improve connections to a usual place for care.

OBJECTIVE #3: PROFILE THE HEALTH OF ENROLLEES

Overall, new QHP enrollees looked healthier than populations who participated in recent studies of Medicaid or uninsured people in Oregon.