



Health Insurance Exchanges: The Patient Experience

NHC Measured the Patient Experience for Exchange Enrollees with Chronic Conditions

Focus Groups

- 6 groups in 3 cities (CHI, LA, ATL)
- All exchange enrollees, or parent of an exchange enrollee, with chronic condition
- Mixed gender, race, education, income

Online Survey

- 412 respondents
- All exchange enrollees, or parent of an exchange enrollee, with chronic condition
- Conducted November 17 – 24, 2014

Research combines qualitative findings with quantitative evidence.

Research Findings Will be Used to Support NHC's Advocacy Principles

Ensure cost-sharing structures and other plan design elements **do not discriminate** against people with chronic conditions and impede access to care.

Create **transparency standards** to ensure patients have access to complete details about coverage and cost of health insurance exchange plans.

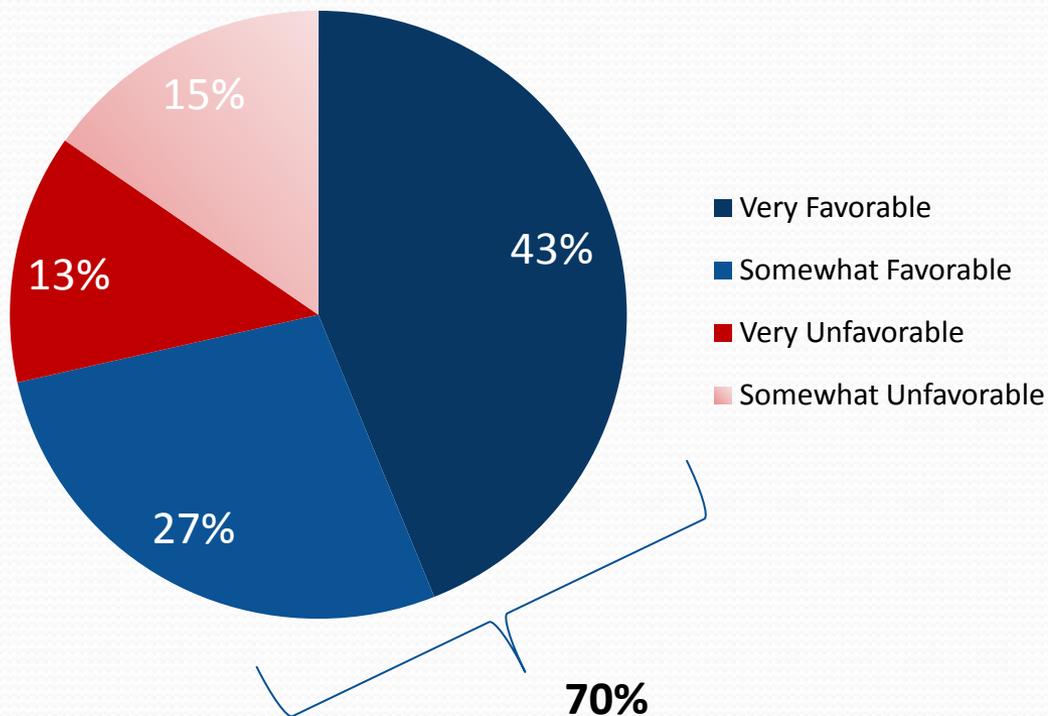
Make insurance exchange plan materials **easier for patients to understand** by creating uniformity of content and design

Establish **continuity of care** requirements that protect patients transitioning into new coverage.

Ensure that all health insurance exchange plans **meet federal requirements**.

The Majority of Patients Surveyed Were Favorable Toward Their New Coverage

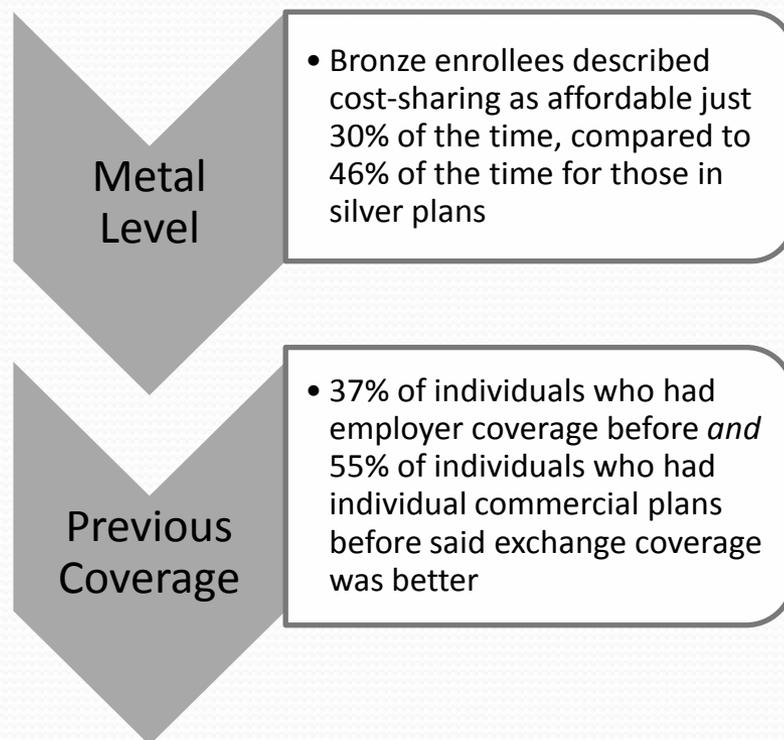
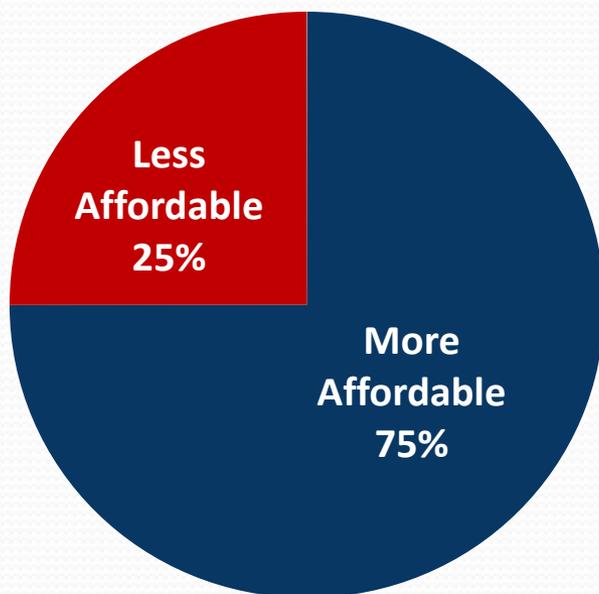
HOW FAVORABLE DO YOU FEEL ABOUT THE INSURANCE YOU HAVE THROUGH THE ACA?



“I’ve got cancer, and without it I was not guaranteed to be able to buy insurance with a pre-existing condition, so, that’s very good. And when I go to the doctor now, the annual physical is free, colonoscopy is free, certain other things are free, so that’s all good.”
– Atlanta male

Most Patients Find Their New Coverage Affordable, But Metal Level and Previous Source of Coverage Matter

ARE YOUR COSTS MORE OR LESS AFFORDABLE IN EXCHANGE COVERAGE?



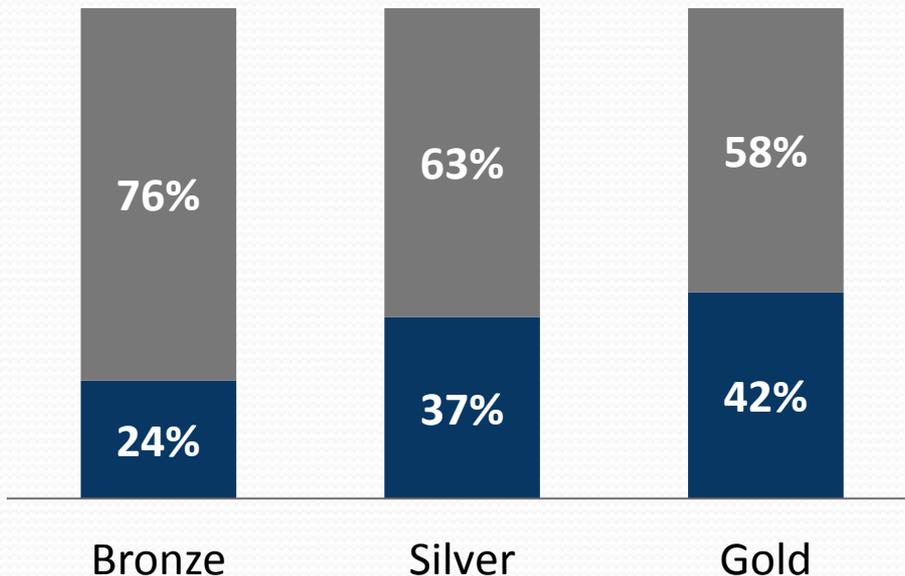
"I was purchasing [my insurance] privately before. And my coverage now is less expensive and because of the way the Affordable Care Act was written, more things are free."

– Atlanta male

Enrollees Want More Information About Their Benefits When Selecting Exchange Coverage

SHARE OF RESPONDENTS WHO REPORTED HAVING
“ALL THE INFORMATION THEY NEEDED”
WHEN CHOOSING A PLAN

■ Had Needed Info ■ Did Not Have Needed Info



Enrollees in gold plans reported that they had needed information **more often than** patients in bronze and silver plans.

Regardless of the metal level they chose, the majority of enrollees expressed interest in more clear and easy-to-access information about their plans, including provider networks and prescription drugs.

Additional Tools and Transparency Standards Will Ensure Patients Choose a Plan that Includes Their Providers

PATIENTS CONSIDERING PROVIDER NETWORK WHEN PICKING A PLAN

79%

- Almost 80% of patients checked their provider network before picking a plan

47%

- Nearly half of patients reported they picked their plan because they thought the coverage offered by the carrier would be the same inside / outside the exchange

36%

- More than one-third of patients thought it was difficult to find a list of providers

24%

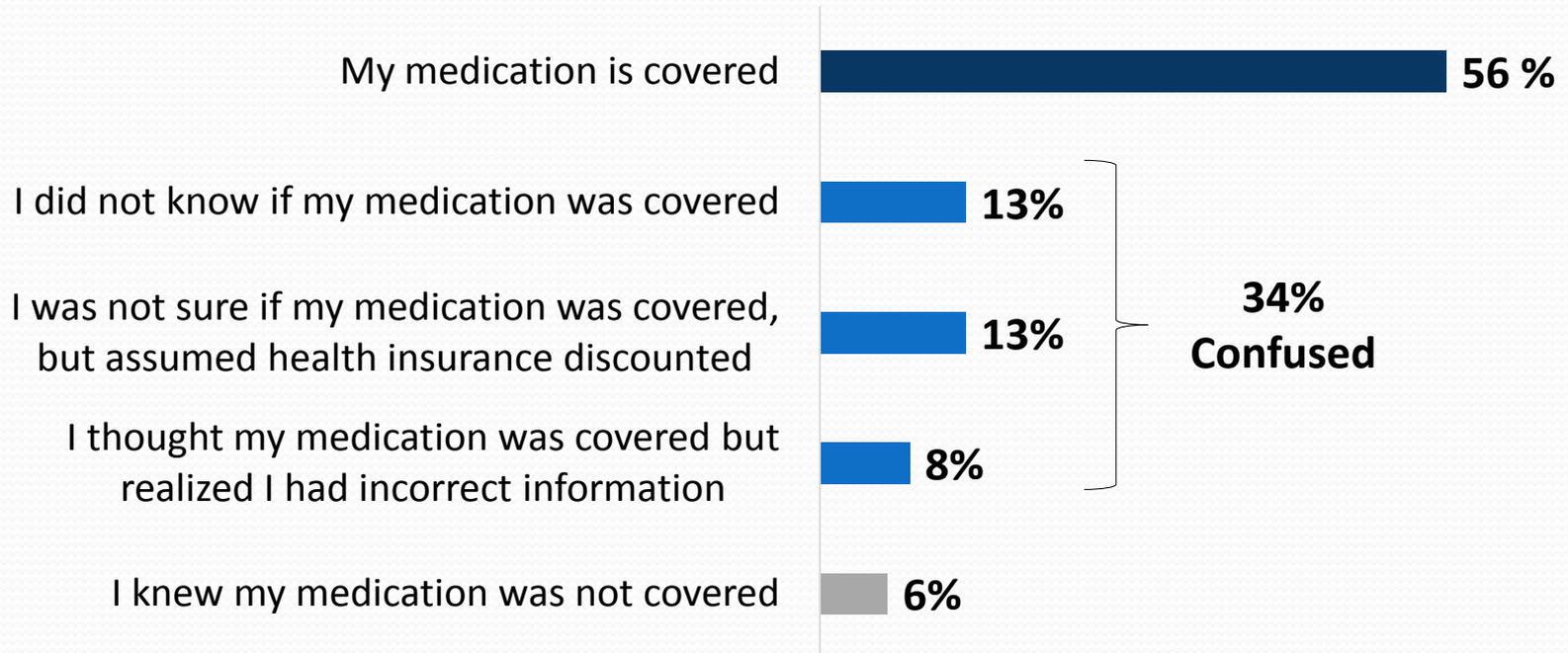
- One-quarter of patients did not know their doctor was covered or thought their doctor was covered, but then realized they had incorrect information

“I signed up for a Blue Cross plan over the phone (when healthcare.gov was down), assuming it would have the same network as my prior Blue Cross coverage. I later found out that my son couldn’t get a scheduled surgery under our new coverage because the hospital was not in my new plan’s network. Although I got a lower premium, I lost peace of mind.”

– Chicago Female

Likewise, Patient Education and Easy-to-Use Tools Can Help Patients Know If Their Medication Is Covered

DID YOU CHECK YOUR PRESCRIPTION DRUG BENEFITS BEFORE ENROLLING?



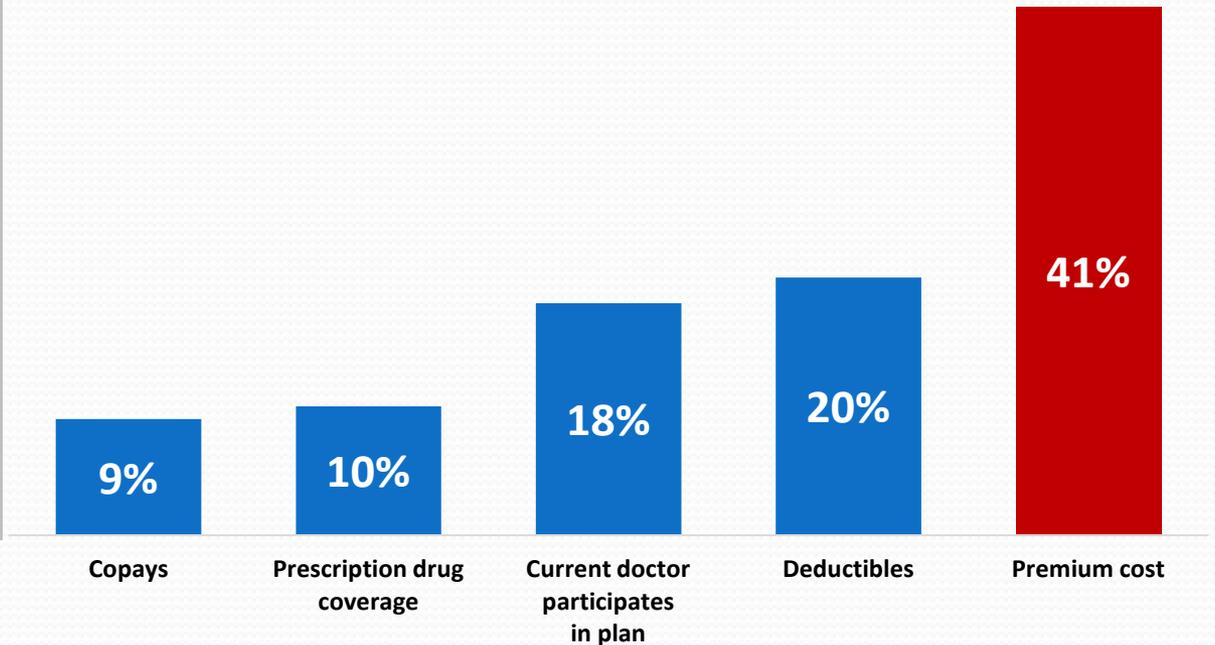
“I checked copays for drugs but not whether or not they were covered. I guess I assumed that all of my drugs would be covered, or that insurance would at least give me a discount.”

– Chicago female

However, Additional Education Likely Necessary to Ensure Patients Take All Plan Features into Account

WHICH IS MOST IMPORTANT WHEN DECIDING IN WHICH PLAN TO ENROLL?

38% of patients who are shopping for a new plan in 2015 are doing so because the premium is too high, compared to **18%** because of high deductibles and copays, and **3%** because of prescription drug coverage.



Consumers Would Welcome Additional Tools to Help Them Choose a Plan

WOULD YOU FIND THESE TOOLS HELPFUL WHEN CHOOSING AN EXCHANGE PLAN?

88%

Standardized list of covered providers

87%

Provider search tool

85%

Standardized list of covered drugs

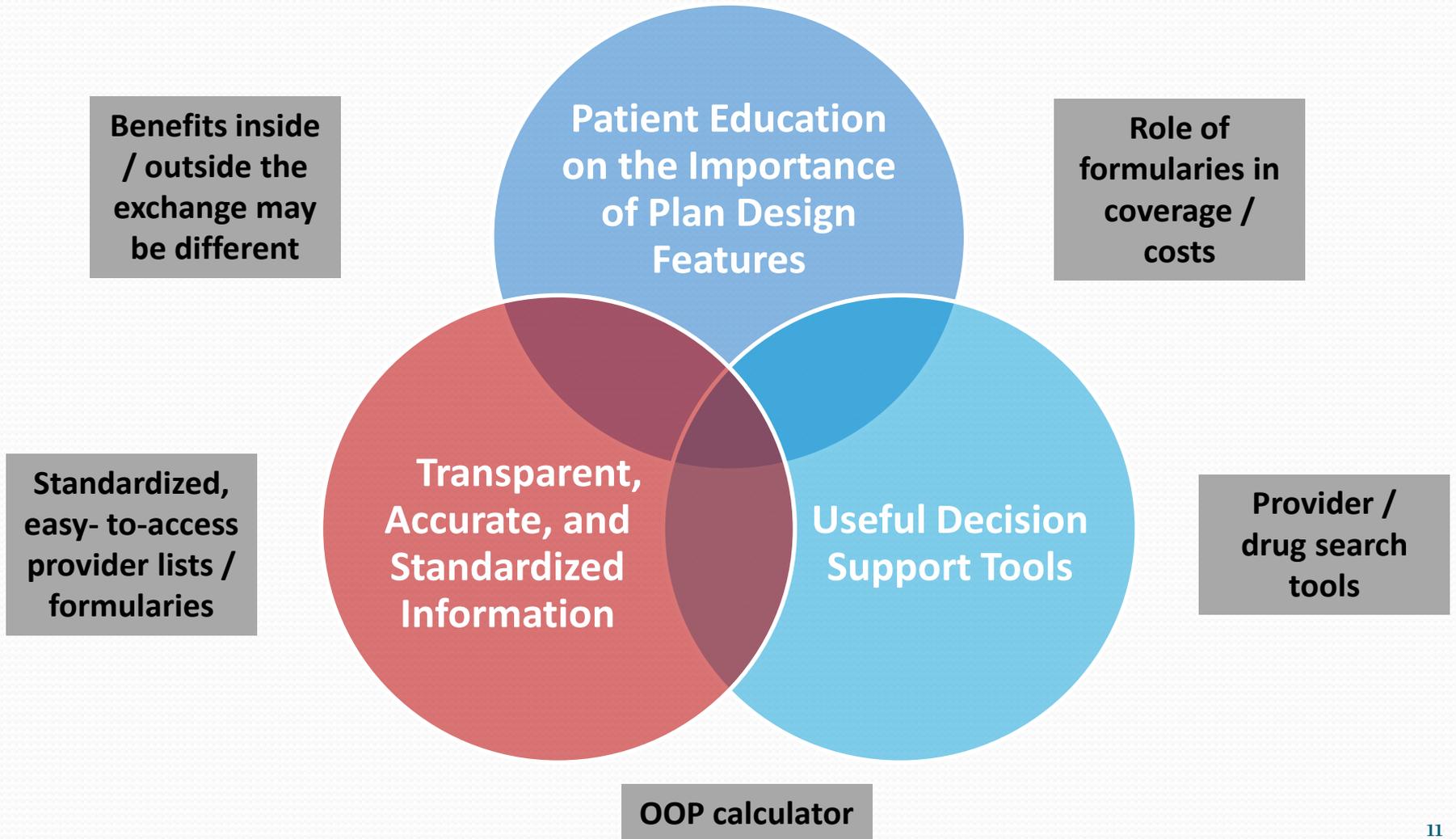
85%

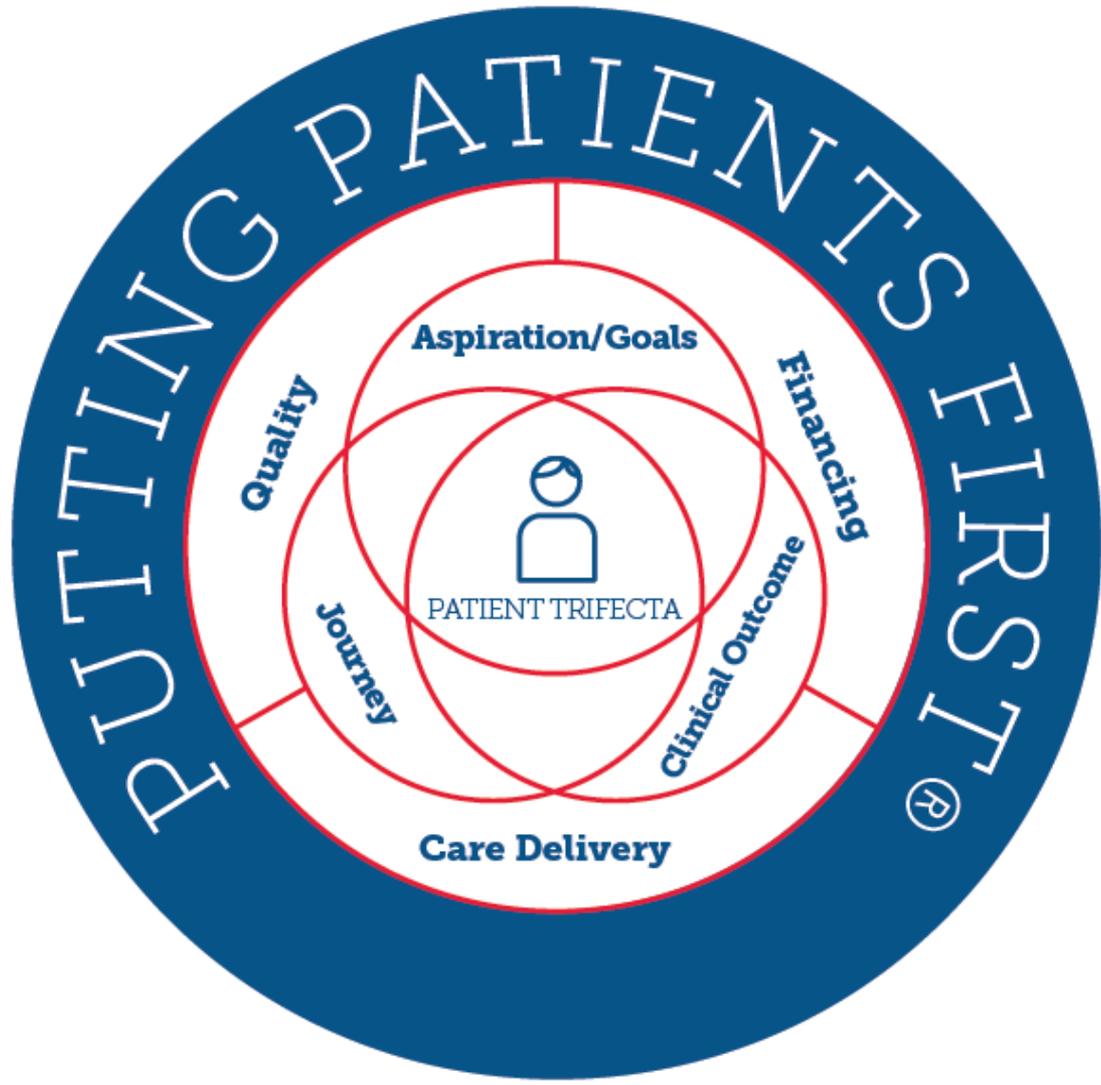
Prescription drug search tool

83%

A calculator to estimate OOP expenses

Research Findings Support NHC's Advocacy Principles







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Focus groups and survey conducted by Lake Research Partners in consultation with the National Health Council.