HOW DO CONSUMERS CHOOSE HEALTH PLANS? IMPLICATIONS FOR EXCHANGES

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Logic for competition in health insurance markets

- Offer a menu of plan choices, benefit designs and pricing
- Consumers choose the health plan in their best interest
- Plans compete on cost and quality

What matters to consumers?

- Benefit generosity
 - Especially to sicker patients
 - Adverse selection
- Access to providers
- Cost-sharing and expectations about spending
- Quality

Evidence of difficulties in other settings

- Fail to choose a plan
- Choose poorly
 - Choose an unambiguously worse plan than another available option
 - Fail to choose cost-minimizing plan
- Fail to switch plans, even when other options appear to be better

Consumer experience in the Connector

- Commonwealth Choice program
 - Unsubsidized
 - Gold, silver, bronze, young adult plans
 - Offered via web-based portal
 - Targeted towards enrollees at 300% FPL or higher
- Early experiences with plan enrollment and outcomes
- Additional important limitations

Sources of information on plans

	% Reporting Use		
The Internet	82%		
Connector phone line	18%		
Friend/Family member	13%		
Print materials	10%		
Employer	5%		
Broker/Agent	5%		

Majority of enrollees (66%) used one source of information

Plan choice process

One-third (32%) had help narrowing choices

Sources of help:

Friend/Family	64%
Employer	16%
Connector phone line	14%
Broker/Agent	11%
Physician	3%

Unmet need for help with plan choice

- 28% of respondents who didn't have help narrowing plan choices wished they had
 - 18% of respondents overall
- Those with least experience have greatest need

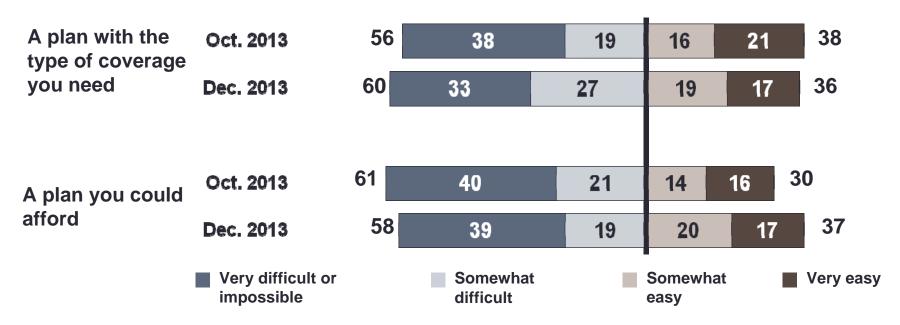
Outcomes associated with wishing for help narrowing plan choices

	All	Wishing had help	All others
Think choice would've been			
easier with fewer plans	28%	32%	21%
Unsatisfied with			
affordability of plans	57%	81%	54%*
Unsatisfied with plan			
coverage	28%	42%	24%*
OOP costs higher than			
expected	45%	59%	45%+
Find plan hard to understand	23%	42%	20%*

⁺p<0.10; *p<0.05

Some similar experiences today





Adults ages 19–64 who are uninsured or have individual coverage and went to marketplace

Note: Bars may not sum to 100 percent because of "don't know" responses or refusal to respond; segments may not sum to subtotals because of rounding.

Source: The Commonwealth Fund Affordable Care Act Tracking Surveys, Oct. 2013 and Dec. 2013. http://www.commonwealthfund.org/Surveys/2014/Second-Affordable-Care-Act-Tracking-Survey.aspx

Implications for Exchanges today

- Emerging evidence of consumer groups with difficulty "shopping" in an exchange
- Associated with negative experiences in plans
- ACA subsidies are more complicated
- Decision-support will be important

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