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Peter Damiano
University of Iowa

Suzanne Bentler
University of Iowa

Daniel Shane
University of Iowa

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The Health Insurance Marketplace in Iowa: The consumer perspective

Final report to the Iowa Dept. of Public Health

Peter Damiano*
Suzanne Bentler*
Daniel Shane*†

University of Iowa
Public Policy Center* and
College of Public Health†

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The Health Insurance Marketplace in Iowa: The consumer perspective

Background

Health Benefits Exchanges (HBE) were established by Title I of the Patient Protection and Affordable Care Act (ACA) (United States Senate, 2010). Under the ACA, each state must establish an exchange (now commonly referred to as Health Insurance Marketplaces-HIMs) where individuals can learn about and purchase health care coverage at affordable rates. HIMs will be websites where multiple qualifying health plans are listed. Consumers can compare coverage levels, learn about premium assistance to lower out of pocket costs, and purchase plans. Benefits are made available to all Americans whose income falls between 100% of the federal poverty limit (FPL), and 400% FPL with tax incentives to ensure that insurance is affordable to people shopping on HIMs.

There are three types of HIMs. States can establish and run the exchange by themselves and receive full funding from the Centers of Medicare and Medicaid Services (CMS). They can also run joint exchanges with other states and be considered state exchanges (CMS, 2013). States can also have the federal government establish and run their HIM for them, but the state will not receive any funds for that option. The third type is a partnership, where the federal government and the state will share responsibilities in the running of an exchange. In Iowa, there will be a partnership exchange, in which the state will be responsible for plan management and consumer assistance and the federal government will manage the web portal and the rest of the infrastructure (The Commonwealth Fund, 2013).

Iowa has developed a unique approach to the HIM. If an individual is medically frail and has an income up to 133% FPL, or if they are not medically frail and have an income up to 100% FPL, they will be covered by the Iowa Wellness Plan which will be run through Iowa’s Medicaid program. If an individual is not medically frail and their income is between 101% and 133% FPL, they will be covered by the Iowa Marketplace Choice Plan (Iowa Department of Human Services, 2013). The Iowa Marketplace Choice Plan is a premium assistance program that supports individuals in buying qualified health plans on the HIM. Both programs rely on section 1115 waivers for CMS funding.

1 Iowa Health and Wellness Plan Summary-Iowa Medicaid Enterprise: http://www.ime.state.ia.us/iowa-health-and-wellness-plan.html
In collaboration with the Iowa Department of Public Health and the Interagency Workgroup on Health Care Reform, we conducted two surveys of potential users of the HIM to evaluate their insurance purchasing needs and knowledge about HIMs in order to help the State design and structure the education and outreach programs for the HIM. We polled a sample of individual Iowa consumers of health insurance (focusing on uninsured and self-insured people) during the late spring/early summer of 2013.

Methods

We used a convenience sample of potential consumers of a health insurance marketplace to field our survey. Our convenience sample to poll potential individual consumers included members of the Iowa Caregivers Association, the Iowa Public Health Association, AARP Iowa, Iowa State Extension service, as well as patients from Primary Health Care (a Federally Qualified Health Center), local public health agencies and partners of the Iowa Department of Public Health. Potential respondents from each of these groups had the option of completing an online version of the survey. The Iowa Caregivers Association, Primary Health Care, and the Iowa State Extension offices were provided with hard copy versions to hand out to their members and patients.

The consumer survey had 43 questions with several questions having multiple sub-questions (See Appendix A). Four main conceptual topics were addressed by the survey including 1) respondent demographics such as age, gender, race/ethnicity, education, marital status, employment status, household size and income, and general health status, 2) respondent knowledge and attitudes about the Affordable Care Act, 3) current insurance coverage and respondent attitudes about insurance, and 4) respondent knowledge of and preferences about purchasing insurance from a health insurance marketplace. We received 498 responses from people who completed the consumer survey (367 completed the online survey and 131 completed a written, paper version of the survey).

In describing the results of this survey, we compare response proportions between two groups of consumers:

- those with employer-sponsored insurance and
- those who did not have employer-sponsored insurance (a combination of those having public insurance such as Medicaid, IowaCare, CHAMPUS, VA, or Military, those who were uninsured, and those who had been uninsured in the past year)

We consider the group without employer-sponsored insurance to be most likely to be eligible to use the Health Insurance Marketplace. In this report, the non-employer-sponsored insurance group will be referred to as the Marketplace group.
Results

Current Insurance Coverage

The majority of people surveyed (80%) had employer-sponsored insurance. The remaining 20% were a combination of those having public insurance (i.e., Medicaid, IowaCare, CHAMPUS, VA and Military-10%), those who were uninsured (5%) and those who had been uninsured in the past year (5%).

For those currently with insurance coverage, the assistance they received when choosing their plan was the following:

- Chose the plan themselves-39%
- Were assisted by their employer-37%
- Were assisted by friends/family-10%

Demographic characteristics

Marital status can be an important factor in predicting insurance coverage. Over ¾ of respondents were married or living in a married-like relationship. There were no differences between those with employer-sponsored insurance and the Marketplace group (Figure 1)

![Marital Status](image)

Figure 1. Marital status of consumers

70% of all respondents were married, improving their ability to receive employer-sponsored coverage.
Those with employer-sponsored insurance were significantly older (Figure 2) compared to Marketplace group. This could affect some of their responses to questions in the survey, particularly about where they get their information.

Consumers entering the marketplace are less healthy than those with employer-sponsored insurance but more healthy than adults in Medicaid\(^2\) or IowaCare\(^3\) (Figure 3).

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2 These data are from a studies of consumers in Medicaid available at: http://ppc.uiowa.edu/publications/evaluation-iowas-medicaid-managed-care-program-consumer-perspective-results-2011-survey

3 These data are from a studies of consumers in IowaCare available at: http://ppc.uiowa.edu/publications/evaluation-iowa-care-program-information-about-medical-home-expansion
Current coverage related questions

A series of questions were asked regarding the person’s current coverage including:

- How well their current coverage meets their needs
- Importance of plan costs particularly costs relating to or affecting:
  - Non-covered services
  - Delays in seeking needed care
  - Worry about care for themselves and their family
- Importance of having coverage for themselves and family

Those with employer-sponsored insurance rated their insurance coverage significantly higher than those likely to use the Marketplace (Figure 4).

![Current insurance coverage for the Marketplace group was less likely to meet their needs](image)

**Figure 4. Current coverage meets needs**
More than twice as many likely Marketplace users delayed care in the past year compared to those with employer-sponsored insurance (Figure 5). This is consistent with findings from the National Health Insurance Survey (NHIS) stating that 30% of uninsured people and 12% of people with Medicaid reported postponing seeking care due to cost. However, in the NHIS, only 7% of those with private insurance delayed care, significantly lower than the 30% reported here from those with employer-sponsored insurance.

![Figure 5. Delays in care due to cost](image)

Health care costs in the past year also caused significantly more worry for both the individual (Figure 6) and for their family among those more likely to enter the Marketplace.

![Figure 6. Worry due to health care costs](image)
The importance of having health insurance coverage was rated higher for those with employer-sponsored insurance as compared to those entering the Marketplace but the vast majority of both groups thought it was very important to have coverage (Figure 7). Almost all thought it was very important to have coverage for their families.

Almost all consumers thought having insurance was very important for their families-most for themselves, slightly less for the Marketplace group

**Figure 7. Importance of health insurance coverage for self and family**

**ACA related questions**

Consumers were asked a series of questions about the ACA, including their awareness, knowledge, and attitudes toward the new law and its key provisions, including how they learned about the ACA
Awareness, knowledge, attitudes

Consumers most likely to be eligible for the Marketplace were much less likely to have heard much about the ACA (Figure 8).

![Figure 8. How much consumers have heard about the ACA](image)

They were also much less likely to report knowing much about the ACA (Figure 9).

![Figure 9. How much consumers know about the ACA](image)
There was majority support for all aspects of the affordable care act presented to them (see Figure 10) including:

- Eliminating denial of coverage due to pre-existing conditions
- Expanded preventive coverage
- Small business tax credits
- Covering children up to age 26 on parents policies
- Establishing the Health Insurance Marketplaces
- Large business mandate
- Medicaid expansion
- Subsidy for individual purchase on Marketplace
- Individual mandate to have insurance coverage

Knowledge about all of the ACA provisions was significantly lower among those likely to be entering the Marketplace:

- No denial of coverage due to pre-existing conditions (64% vs 38%)
- Expanded preventive coverage (47% vs 29%)
- Small business tax credits (40% vs 20%)
- Covering children up to age 26 on parents policies (77% vs 59%)
- Establishing the Health Insurance Marketplaces (46% vs 21%)
- Large business mandate (44% vs 24%)
- Medicaid expansion (49% vs 26%)
- Subsidy for individual purchase on Marketplace (32% vs 16%)
- Individual mandate to have insurance coverage (56% vs 34%)

*Support=Strongly and support;  Know=strongly and know

**Figure 10. Knowledge and support for ACA provisions**
Support for the ACA provisions was similar with the following exceptions for potential Marketplace participants:

- Less supportive of covering children up to age 26 on parents policies (83% vs 69%)
- More supportive of individual subsidies on the Marketplace (65% vs 57%)

**How consumers learned about the ACA**

Television was the most popular medium for learning about the ACA for both those with employer-sponsored insurance and those likely to be eligible for the Marketplace (Table 1).

**Table 1. How consumers learned about the ACA**

<table>
<thead>
<tr>
<th>Method</th>
<th>Employer</th>
<th>Marketplace</th>
</tr>
</thead>
<tbody>
<tr>
<td>Television</td>
<td>58%</td>
<td>46%</td>
</tr>
<tr>
<td>Newspaper</td>
<td>47%</td>
<td>23%</td>
</tr>
<tr>
<td>Family/friends</td>
<td>36%</td>
<td>30%</td>
</tr>
<tr>
<td>Internet</td>
<td>36%</td>
<td>28%</td>
</tr>
<tr>
<td>Public Health Agencies</td>
<td>34%</td>
<td>16%</td>
</tr>
<tr>
<td>Radio</td>
<td>29%</td>
<td>20%</td>
</tr>
<tr>
<td>Insurance agents</td>
<td>10%</td>
<td>11%</td>
</tr>
<tr>
<td>Direct Mail</td>
<td>5%</td>
<td>2%</td>
</tr>
<tr>
<td>Brochures at MDs</td>
<td>2%</td>
<td>3%</td>
</tr>
<tr>
<td>Meetings at Hospitals</td>
<td>11%</td>
<td>5%</td>
</tr>
<tr>
<td>Public forums</td>
<td>8%</td>
<td>5%</td>
</tr>
<tr>
<td>Social Media</td>
<td>11%</td>
<td>13%</td>
</tr>
</tbody>
</table>

*Question was choose all that apply

**Health Benefits Marketplace**

All consumers, regardless of current insurance status, were asked a series of questions about the potential choice of plans in the Marketplace. Broadly these questions were related to:

- The factors most important in their choice selection
- Ability to use an online system
- Receiving assistance with plan selection
- Receiving assistance once they have selected a plan

**Factors affecting plan selection**

Consumers were most concerned about the cost of care when selecting both their current health insurance plan (if they had one) and a plan in the Marketplace (if they were going to purchase one in the future) (Figure 11).
Figure 11. Importance of factor when selecting their current insurance plan and if they were to choose one in the Marketplace

The differences between the groups on the importance of different factors was:

- More in Marketplace group thought provider network was important
  - 67% vs 54%
- Fewer in Marketplace group thought monthly cost was very important
  - 80% vs 70%

Both groups wanted as much choice as possible regarding the number of plans from which they could choose in the Marketplace. Almost 4 in 10 people likely to be eligible for the Marketplace wanted as many choices as possible (Figure 12).

Figure 12. Preferred number of plan options if they were to choose one in the Marketplace

Cost was the most important factor affecting choice of a health plan.
Assistance with plan selection

Most consumers, especially those more likely to be eligible for the Marketplace, thought they would need assistance selecting a plan, with 4 out of 10 in the Marketplace group believing they would need “a lot” of assistance (Figure 13).

Figure 13. Amount of assistance needed by consumers for choosing a plan through the Marketplace

Figure 14 highlights the sources consumers showed the most confidence in when receiving information about the ACA. The majority of both groups had confidence with information from employer human resources office, printed materials, community-based resources and health care providers. Just over half of the Marketplace group also had confidence in the information they would receive from state employees (as did 48% of those with employer-sponsored insurance).
Regarding the manner in which they received assistance, almost all wanted some assistance with the choice directly through the on-line Marketplace system (i.e., a guided selection process as compared to just listing the plans available). The preference was similar for both groups (Figure 15).

*Percentage Responding Confident or Very Confident

**Figure 14. Preferred type of assistance for selecting a plan through the Marketplace**

A guided selection process was most preferred for choosing plans online from the Marketplace.
One-on-one help was the most preferred type of assistance either by phone or speaking directly with a person at a central location or someone coming to their home to assist. (Figure 16).

![Graph showing preferred type of assistance for selecting a plan through the Marketplace](image)

**Figure 16. Preferred type of assistance for selecting a plan through the Marketplace**

The plan factors that consumers thought they would need “a lot” of help with (Figure 17) were the same factors they thought were most important about the plans (see Figure 11): costs and the types of services covered.

![Graph showing issues for which consumers would want “a lot of” assistance when selecting a plan through the Marketplace](image)

**Figure 17. Issues for which consumers would want “a lot of” assistance when selecting a plan through the Marketplace**

*Percentage Responding “A lot” of help*
Plan aspects needing post-purchase help

Consumers were asked about the type of assistance they might need as well as the source of information they would trust the most once they had made a selection of a health plan in the Marketplace.

Following the purchase, consumers thought that getting information about the services covered was now more important than cost information. However, cost information was still considered very important (Figure 18). Claims assistance also became more important as did the providers available to them.

There were some differences in the most trusted sources of information after the purchase of a plan from the Marketplace (Figure 19). The Marketplace group was most likely to view health care providers as trusted sources of information, whereas those with employer-sponsored insurance were most likely to look toward their employer’s human resources office. The Marketplace website was the second most frequent choice for both groups.
The Marketplace group was more likely to look for assistance from health care providers after they selected a plan.

Conclusions

Consumers most eligible for subsidies through the Health Insurance Marketplace face a series of challenges:

- Current health insurance coverage is either non-existing or not as good as those with employer-sponsored insurance. They were significantly more likely to have had delays in care in the last year and worried much more about the cost of health care for themselves and their families.
- Less aware and knowledgeable about the ACA generally and the specifics aspects of the changes soon to occur (though similarly supportive of most aspects of the ACA)
- Less comfortable with using an online system for selecting a health insurance plan and the vast majority thought they would need some or a lot of help
- One-on-one assistance was most desirable when selecting a plan
  - Preferred a guided online system with as many options as possible
Among all consumers:

• Cost was the most important issue when selecting a health plan
  o Both their current plan as well as a plan they might choose from the Marketplace
• Most likely to learn about the Marketplace from either TV or their employer
• They had most confidence in the information for Marketplace purchase assistance provided by
  o Employer’s human resource department
  o Printed materials
  o Community resources such as Public Health Agencies
  o Health care providers
• Most trusted sources for marketplace purchase help
  o Employer’s human resource department
  o Marketplace website,
  o Community resources such as Public Health Agencies
  o Health care providers

Thus there are significant challenges in getting this population enrolled into the Health Insurance Marketplace. Due to the concern about costs, these consumers eligible for the Marketplace may also be less familiar with utilizing the health care delivery system, another significant challenge post purchase of the insurance. This may be a reason that they indicated they would be looking to health care providers for assistance after they purchase insurance more than prior to purchase.
Appendix A: The Health Insurance Marketplace in Iowa Consumer Survey

The following questions are about how much you know about the health care reform law called the Affordable Care Act.

1. How much have you heard about the Affordable Care Act?
   - 01 □ Not much
   - 02 □ Some
   - 03 □ A lot
   - 88 □ Not sure
   - 99 □ Prefer not to answer

2. How have you learned about the Affordable Care Act? **(Please choose all that apply)**
   - 01 □ Family and/or friends
   - 02 □ Health insurance agents/brokers
   - 03 □ TV
   - 04 □ Radio
   - 05 □ Newspaper
   - 06 □ Internet sites
   - 07 □ Direct mail
   - 08 □ Informational meetings through the local hospital
   - 09 □ Brochures at your doctor’s office
   - 10 □ Public forums at places like libraries, senior centers, etc.
   - 11 □ Social media such as Facebook
   - 12 □ Public health agencies
   - 13 □ Other (please specify):

3. In general, how much do you know about this new health care program?
   - 01 □ I know a lot about the new program
   - 02 □ I know some things about the new program
   - 03 □ I’ve heard about it, but don’t know much about what it means
   - 04 □ I don’t know anything about the new program
   - 88 □ I’m not sure
   - 99 □ Prefer not to answer
The following items are parts of the Affordable Care Act.

4. How much do you think you know about each of these new policies?

<table>
<thead>
<tr>
<th>Item</th>
<th>I know a lot</th>
<th>I know some things</th>
<th>I have heard about it</th>
<th>I don’t know anything</th>
<th>Not sure</th>
<th>Prefer not to answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>a.</td>
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<tr>
<td></td>
<td>Insurance companies can no longer deny health coverage because of a person’s medical history or health condition.</td>
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<td>b.</td>
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<td></td>
<td>Tax credits will be given to small businesses that offer health coverage to their employees.</td>
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<td>Large employers with 50 or more employees will incur tax penalties if the insurance offered is not considered affordable to employees.</td>
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<td>States can expand their existing Medicaid program to cover low income, uninsured adults even if they don’t have children or are not disabled.</td>
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<td></td>
<td>Children and young adults can stay on their parents’ insurance plan until age 26.</td>
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<td>f.</td>
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<td></td>
<td>The creation of an insurance “exchange” or “marketplace” to make it easier for people to buy insurance.</td>
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<td>g.</td>
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<td></td>
<td>By 2014, most people must have health insurance or pay a penalty (known as the ‘individual mandate’).</td>
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<td></td>
<td>People with lower to middle class incomes, will get money from the government to help pay for the cost of insurance bought through the Marketplace.</td>
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<td>i.</td>
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<td></td>
<td>Insurance companies must cover certain preventive services with no out of pocket cost to you.</td>
<td></td>
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</tr>
</tbody>
</table>
5. What do you think about each of these parts of the Affordable Care Act?

<table>
<thead>
<tr>
<th>Part</th>
<th>Strongly oppose</th>
<th>Oppose</th>
<th>No opinion</th>
<th>Support</th>
<th>Strongly Support</th>
<th>Prefer not to answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Insurance companies can no longer deny health coverage because of a person’s medical history or health condition.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>99</td>
</tr>
<tr>
<td>b. Tax credits will be given to small businesses that offer health coverage to their employees.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>99</td>
</tr>
<tr>
<td>c. Large employers with 50 or more employees will incur tax penalties if the insurance offered is not considered affordable to employees.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>99</td>
</tr>
<tr>
<td>d. States can expand their existing Medicaid program to cover low income, uninsured adults even if they don’t have children or are not disabled.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>99</td>
</tr>
<tr>
<td>e. Children and young adults can stay on their parents’ insurance plan until age 26.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>99</td>
</tr>
<tr>
<td>f. The creation of an insurance “exchange” or “marketplace” to make it easier for people to buy insurance.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>99</td>
</tr>
<tr>
<td>g. By 2014, most people must have health insurance or pay a penalty (known as the ‘individual mandate’).</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>99</td>
</tr>
<tr>
<td>h. People with lower to middle class incomes, will get money from the government to help pay for the cost of insurance bought through the Marketplace.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>99</td>
</tr>
<tr>
<td>i. Insurance companies must cover certain preventive services with no out of pocket cost to you.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>99</td>
</tr>
</tbody>
</table>
The next questions are about your current health insurance coverage.

6. Do you currently have any of the following types of health insurance or health coverage plans? (Please choose all that apply)

   01 ☐ Insurance through your (or another family member’s) current or former employer
   02 ☐ Insurance you (or another family member) purchased directly from an insurance company
   03 ☐ Medicare, for people 65 and over, or people with certain disabilities
   04 ☐ Medicaid, Title 19, or any kind of government-assistance plan for those with low incomes or a disability
   05 ☐ IowaCare
   06 ☐ The Military, Champus, or the Veterans’ Administration (VA)
   07 ☐ HIPIOWA
   08 ☐ The Indian Health Service
   09 ☐ Other (specify): ______________
   10 ☐ I currently do not have health insurance coverage. → Go to Question 12

7. Who helped you enroll/choose your current health insurance? (Please choose all that apply)

   01 ☐ I chose it by myself
   02 ☐ Friends/Family
   03 ☐ Doctor/Hospital/Other Health Care Provider
   04 ☐ Insurance Agent/Broker
   05 ☐ Human Resources or other person at work
   06 ☐ Community Resources (such as local public health agencies, a non-profit, librarian, etc.)
   07 ☐ A website
   08 ☐ A State of Iowa employee such as a Department of Human Services caseworker
   09 ☐ Other (specify): ______________
8. How important were each of the following when you were enrolling in/choosing your current insurance plan?

<table>
<thead>
<tr>
<th></th>
<th>Very Important</th>
<th>Important</th>
<th>Somewhat Important</th>
<th>Not at all Important</th>
<th>Not sure</th>
<th>Prefer not to answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. The doctors and hospitals I could see</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
<tr>
<td>b. The types of services/benefits I could receive (e.g. prescriptions, dental, etc.)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
<tr>
<td>c. The monthly costs (i.e., the premium)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
<tr>
<td>d. The out-of-pocket costs (e.g. deductibles, prescription costs, doctor visit copays)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
<tr>
<td>e. Reputation of the insurance plan</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
<tr>
<td>f. The recommendation of the insurance plan by others</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
<tr>
<td>g. Quality rating of the health plan</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
<tr>
<td>h. Other:</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
</tbody>
</table>

If other, please specify:

9. Thinking about how well your health insurance coverage meets your needs, how would you rate this health insurance?

- [ ] Excellent
- [ ] Very good
- [ ] Good
- [ ] Fair
- [ ] Poor
- [ ] Not sure
- [ ] Prefer not to answer

10. Most people’s health insurance does not pay for all health care costs. During the last 12 months, how serious has the problem of non-covered costs been for you?

- [ ] Very serious
- [ ] Serious
- [ ] Somewhat serious
- [ ] Not Serious
- [ ] Not sure
- [ ] Prefer not to answer

11. During the last 12 months, was there any time when you did not have any health insurance?

- [ ] Yes
- [ ] No
- [ ] Not sure
- [ ] Prefer not to answer
12. During the last 12 months, has there been any time when you delayed getting needed health care for yourself because of the cost? This could include things like waiting to go to the doctor or filling a prescription.

01 Yes
02 No
88 Not sure
99 Prefer not to answer

13. During the last 12 months, how worried were you about your ability to pay for health care for yourself?

01 Very worried
02 Worried
03 Somewhat worried
04 Not worried
88 Not sure
99 Prefer not to answer

14. How important is it for you to have health insurance coverage for yourself?

01 Very important
02 Important
03 Somewhat important
04 Not important
88 Not sure
99 Prefer not to answer

15. What is your current marital status?

01 Married
02 Living in a marriage-like relationship
03 Widowed
04 Divorced or separated
05 Never married
99 Prefer not to answer

16. Do you have any children/dependents in your household?

01 Yes
02 No → Go to Question 20
99 Prefer not to answer → Go Q.20

17. Does your spouse or any of your children/dependents under age 27 NOT have any kind of health insurance, including private plans or government plans such as Medicaid or Title 19? (Please choose all that apply)

01 Yes, my spouse
02 Yes, one or more of my children/dependents
03 No
99 Prefer not to answer

18. How important is it for you to have health insurance coverage for the other members of your family/household?

01 Very important
02 Important
03 Somewhat important
04 Not important
88 Not sure
99 Prefer not to answer

19. During the last 12 months, how worried were you about your ability to pay for health care for other members of your family/household?

01 Very worried
02 Worried
03 Somewhat worried
04 Not worried
88 Not worried
99 Prefer not to answer
As part of the Affordable Care Act, most people will be required to have health insurance starting in 2014. This can either be your current private or public (e.g., Medicare, Medicaid) health insurance or a new private or public insurance policy obtained through the regulated insurance “Marketplace.”

The next questions ask about some of your preferences if you were to choose to buy private insurance through this new “Marketplace.”

20. When thinking about choosing a new health insurance plan, how important are each of the following to your choice of a plan?

<table>
<thead>
<tr>
<th></th>
<th>Very Important</th>
<th>Important</th>
<th>Somewhat Important</th>
<th>Not at All Important</th>
<th>Not Sure</th>
<th>Prefer not to answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. The doctors and hospitals I could see</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
<tr>
<td>b. The types of services/benefits I could receive (e.g. prescriptions, dental, etc.)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
<tr>
<td>c. The monthly costs (i.e., the premium)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
<tr>
<td>d. The out-of-pocket costs (e.g. deductibles, prescription costs, doctor visit copays)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
<tr>
<td>e. Reputation of the insurance plan</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
<tr>
<td>f. The recommendation of the insurance plan by others</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
<tr>
<td>g. Quality rating of the health plan</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
<tr>
<td>h. Other:</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
<tr>
<td>If other, please specify:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

21. If you decided to choose a new health insurance plan through the “Marketplace”, how comfortable would you be choosing this health insurance plan through an on-line system?

01 □ Very comfortable  
02 □ Comfortable  
03 □ Somewhat comfortable  
04 □ Not comfortable  
88 □ Not sure  
99 □ Prefer not to answer

22. If you were to choose health insurance online through this “Marketplace”, how much help do you think you would want when making this decision?

01 □ A lot of help  
02 □ Some help  
03 □ Very little help  
04 □ No help  
88 □ Not sure  
99 □ Prefer not to answer
23. If you were going to choose a health insurance plan through this online “Marketplace” and had questions, how would you prefer to obtain help? (Please choose all that apply)

- □ Face-to-face (in-person) at your home or location of your choice
- □ Face-to-face (in-person) at a community resource office (such as a local public health agency, a non-profit, library, etc.)
- □ Using an insurance agent/broker
- □ By telephone with a live person
- □ Online instant “chat” – real-time communication online
- □ Other online help such as pop-up windows and/or links to detailed information
- □ I do not feel that I would need help.
- □ Other (please specify): _________________________

24. If you were going to choose a health insurance plan from this online “Marketplace”, how much help would you want with each of the following types of information about particular health plans?

<table>
<thead>
<tr>
<th>Type of Information</th>
<th>A lot of help</th>
<th>Some help</th>
<th>Very little help</th>
<th>No help</th>
<th>Not sure</th>
<th>Prefer not to answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. The doctors and hospitals included in the plan</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
<tr>
<td>b. The services/benefits covered by the plan (e.g. prescriptions, dental, etc.)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
<tr>
<td>c. The monthly cost of the plan (i.e., the premium)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
<tr>
<td>d. Other out-of-pocket costs (e.g. deductibles, prescription costs, doctor visit copays)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
<tr>
<td>e. Reputation of the insurance company</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
<tr>
<td>f. Quality rating of the health plan</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
<tr>
<td>g. Other:</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
</tbody>
</table>

If other, please specify:
25. When trying to get information about the different health insurance plans you could choose, how much confidence would you have in each of the following being able to give you helpful information?

<table>
<thead>
<tr>
<th>Option</th>
<th>Very confident</th>
<th>Confident</th>
<th>Somewhat confident</th>
<th>Not confident</th>
<th>Not Sure</th>
<th>Prefer not to answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. A website established by the insurance “Marketplace”</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
<tr>
<td>b. Other Internet resources</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
<tr>
<td>c. A telephone line established by the insurance “Marketplace”</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
<tr>
<td>d. Printed materials from the “Marketplace”</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
<tr>
<td>e. Community resources (such as local public health agencies, a non-profit, librarian, etc.)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
<tr>
<td>f. Friends/Family</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
<tr>
<td>g. Doctor/Hospital/Other provider</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
<tr>
<td>h. Insurance Agent/Broker</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
<tr>
<td>i. Human Resources person at your work</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
<tr>
<td>j. A State of Iowa employee (such as a Dept of Human Services caseworker)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
<tr>
<td>k. Other:</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>88</td>
<td>99</td>
</tr>
</tbody>
</table>

If other, please specify:

26. If you were choosing a health insurance plan from this online “Marketplace”, how many health insurance options would you prefer to consider?

01 □ As many as possible
02 □ A moderate number
03 □ Just a few
88 □ Not sure
99 □ Prefer not to answer

The “Marketplace” could be set up so that it would simply list the choices a person could choose and the associated price OR it could be set up to help guide a person toward plans that might better fit their needs based on answering questions such as age, health status, particular needs and where you live.

27. Which type of system do you think you would prefer?

01 □ Simply show me all the possible options
02 □ Help guide me to a smaller number of options based on answering some preliminary questions
03 □ A combination of (1) & (2)
88 □ Not sure
99 □ Prefer not to answer
As mentioned, part of the Affordable Care Act includes a new way to buy private health insurance plans through an internet-based, online health insurance “Marketplace” that is a partnership between the state of Iowa and the federal government. Beginning in October 2013, you will be able to access this online “Marketplace” with a one-time application that will allow you to explore qualified health insurance plans in your area.

The following questions are about how the “Marketplace” will be introduced to Iowans.

28. We would like your input on what to call the health insurance “Marketplace”. In your opinion, which of the following names would help you understand and trust it the most for buying health insurance? (Please choose only one)

01 □ Iowa Health Benefit Marketplace
02 □ Iowa Health Benefit Resource
03 □ IOWA-n-Sure
04 □ InSure
05 □ Iowa Health Choices
06 □ Iowa Health Connector
07 □ Iowa Health Insurance Marketplace
08 □ Iowa Health Insurance Exchange
11 □ Other
(specify): ______________________

29. From which of the following sources would you be most likely to hear about the health insurance “Marketplace” when the program starts? (Please choose all that apply)

01 □ Friends and/or family
02 □ A health insurance agent/broker
03 □ TV
04 □ Radio
05 □ Newspaper
06 □ Employer
07 □ The Internet
08 □ Direct mail
09 □ Informational meetings through the local hospital
10 □ Brochures at your doctor’s office
11 □ Public events at places like libraries, senior centers, health fairs etc.
12 □ Social media such as Facebook, YouTube, Twitter, Instagram
13 □ Public health agencies
14 □ Non-profit groups such as AARP
15 □ Other
(specify): ______________________
30. From which of the following sources would you be most likely to trust the information you hear about the “Marketplace”? (Please choose all that apply)

01 □ Family and/or friends
02 □ A health insurance agent/broker
03 □ TV
04 □ Radio
05 □ Newspaper
06 □ Employer
07 □ The Internet
08 □ Direct mail
09 □ Informational meetings through the local hospital
10 □ Brochures at your doctor’s office
11 □ Public events at places like libraries, senior centers, health fairs etc.
12 □ Social media such as Facebook, YouTube, Twitter, Instagram
13 □ Public health agencies
14 □ Non-profit groups such as AARP
15 □ Other (please specify):

______________________________

31. If you were to buy a health insurance plan through the “Marketplace”, which of the following services do you think you might want help with after making the purchase? (Please choose all that apply)

01 □ Finding the doctors and hospitals included in the plan
02 □ Understanding services/benefits covered by the plan (e.g. prescriptions, dental, etc.)
03 □ Estimating he monthly cost of the plan (i.e., the premium)
04 □ Estimating other out-of-pocket costs (e.g. deductibles, prescription costs, doctor visit copays.)
05 □ Planning adjustments due to life changes (e.g. births, divorce, job loss)
06 □ Claims payment
07 □ Billing problems
08 □ Filing complaints and appeals
09 □ Others (please specify): ____________________________
32. If you were to buy a health insurance plan through the “Marketplace” and needed to get help with any of the services listed in the previous question, which source of help would you trust the most? (Please choose all that apply)

01 □ A website established by the insurance “Marketplace”
02 □ Community Resources (such as local public health agencies, a non-profit, librarian, etc.)
03 □ Friends/Family
04 □ Doctor/Hospital/Other Health Care Provider
05 □ Insurance Agent/Broker
06 □ Human Resources person at your employer
07 □ A State of Iowa employee such as a Department of Human Services caseworker
08 □ Other
   (specify): ____________________________

33. What is your county of residence?
   ______________________________

34. What is the Zip code of your residence?
   _______ _______ _______ _______

35. What is your age (in years)?
   01 □ 18 to 29
   02 □ 30 to 39
   03 □ 40 to 49
   04 □ 50 to 64
   05 □ 65 or older
   99 □ Prefer not to answer

36. Are you male or female?
   01 □ Male
   02 □ Female
   99 □ Prefer not to answer

37. What is your race or ethnicity?
   01 □ White
   02 □ Black or African-American
   03 □ Latino or Hispanic
   04 □ Asian
   05 □ Native Hawaiian or Pacific Islander
   06 □ American Indian or Alaska Native
   07 □ Other
   99 □ Prefer not to answer

38. What is the highest grade or level of school that you have completed?
   01 □ 8th grade or less
   02 □ Some high school, but did not graduate
   03 □ High school graduate or GED
   04 □ Some college or 2-year degree
   05 □ 4-year college graduate
   06 □ More than 4-year college degree
   99 □ Prefer not to answer

39. In general, how would you rate your overall health?
   01 □ Excellent
   02 □ Very good
   03 □ Good
   04 □ Fair
   05 □ Poor
   88 □ Not sure
   99 □ Prefer not to answer
40. How many people live in your household?
   01 □ 1 (just myself)
   02 □ 2
   03 □ 3
   04 □ 4
   05 □ 5 or more
   99 □ Prefer not to answer

41. What is your current employment status?
   01 □ I am not employed right now
   02 □ Self-employed, full-time
   03 □ Self-employed, part-time
   04 □ Employed by other, full-time
   05 □ Employed by other, part-time
   06 □ Homemaker
   07 □ Retired
   08 □ Disabled, unable to work
   09 □ Don’t know
   99 □ Prefer not to answer

42. What was your total household income, before taxes, from all sources during the past year?
   01 □ Less than $12,000
   02 □ $12,001 - $20,000
   03 □ $20,001 - $30,000
   04 □ $30,001 - $40,000
   05 □ $40,001 - $50,000
   06 □ $50,001 - $60,000
   07 □ $60,001 - $70,000
   08 □ $70,001 - $80,000
   09 □ Greater than $80,000
   99 □ Prefer not to answer

43. Where do you get the majority of your televised news?
   01 □ One of the major networks (ABC, CBS or NBC)
   02 □ CNN
   03 □ Fox News
   04 □ PBS
   05 □ MSNBC
   06 □ The Daily Show
   07 □ I don’t watch televised news.
   08 □ I don’t pay attention to the news