Minnesota Exchange Communications: Full Market Research Findings

<u>Final Report</u>
August 10, 2012

Contents

Project Overview

The State of Minnesota needed to collect market research to help inform communication, public awareness and engagement strategies for the state health exchange. Salter>Mitchell joined as a partner to conduct a comprehensive study, leveraging qualitative and quantitative research and analysis to offer insight for the state's health exchange implementation.

May	June	July

Orientation & Research Formulation

18 Focus Groups (consumer & small employer)

Key Informant Interviews

Analysis

Final Report

Contract Awarded

Statewide surveys (consumer & business)
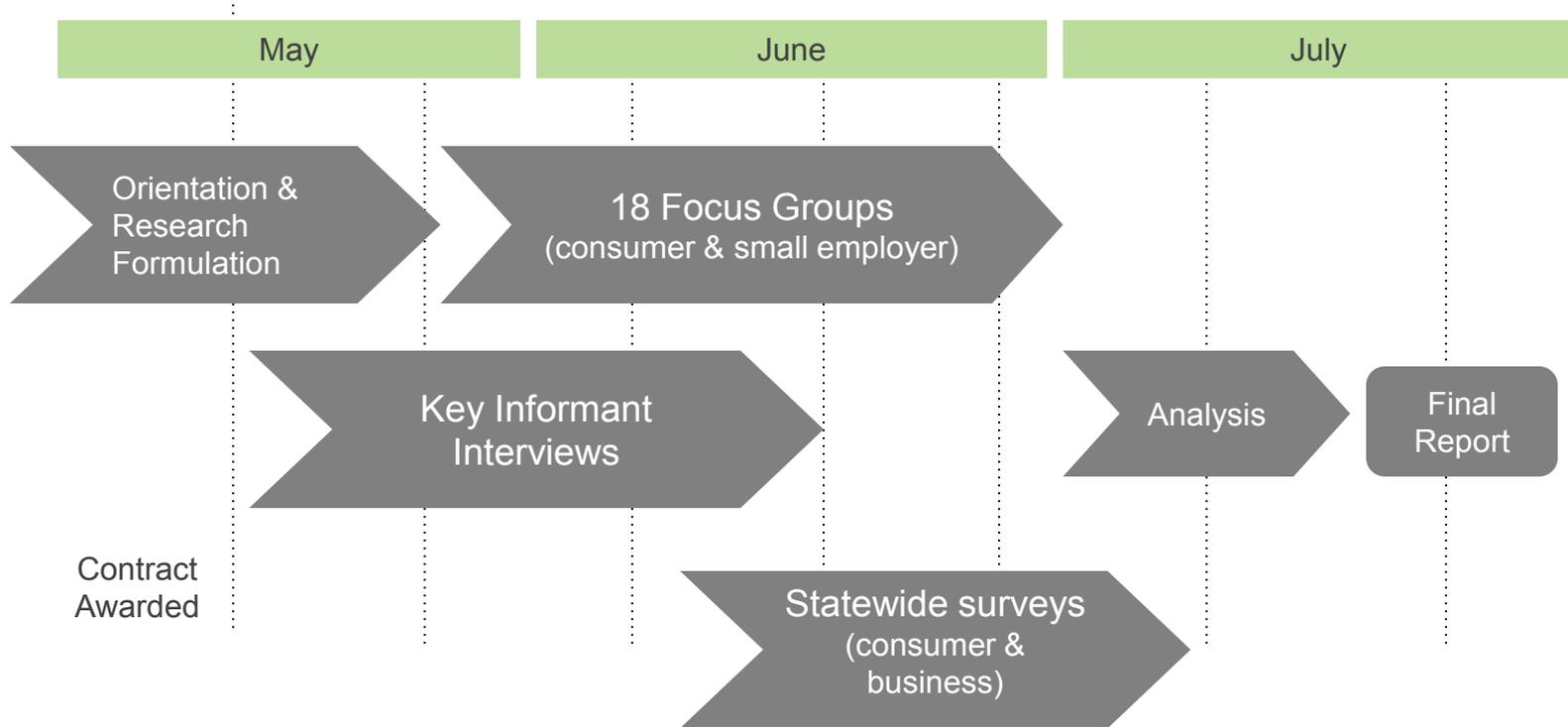
KEY INFORMANT INTERVIEWS

In-Depth Interview Executive Summary

Both challenges to implementation of the exchange and barriers to participation by potential users exist. Experts suggest developing a user-friendly design of the exchange, as well as focused outreach, communication strategies, and audience-specific messaging.

FINDINGS	IMPLICATION
Expectation and Fear. Respondents expressed positive hopes for the exchange, along with concern about the transparency of decision-making and the ultimate impact on their business or constituency.	Initiate outreach to share decisions that have been made, rationale and upcoming decisions. Stakeholders want to be involved, with a chance to understand decisions, analyze the impact, provide input and plan ahead.
Need for coordination and simplicity. Complexity of current system is in itself a barrier to enrollment in available health care coverage.	Exchange has the potential to address these barriers if it can indeed simplify and streamline the process.
Stigma and negative perception. There is a risk of underutilization if the exchange is seen primarily as a portal for accessing government benefits.	Branding of the exchange needs to identify it as something for all consumers of health care, emphasizing participation of private insurers and state (versus federal) initiative.
Knowledge and access barriers. Culture, education, web access and literacy, and risk perception will be barriers to individual enrollment.	Barriers can be addressed early in development. Outreach strategies should include targeted messages and training of intermediaries as trusted sources of information.
Person-to-person communication. Brokers will be instrumental to the success of the exchange, as will person-to-person outreach in general.	Need to determine the long-term role of brokers in the exchange and develop outreach that capitalize on existing relationships.

Goals and Methodology

The initial in-depth-interviews conducted for the Minnesota health exchange study were intended to provide insights used to inform the continued research among consumer and small business groups.

GOALS

As the initial data collection component of the larger research program, Salter>Mitchell conducted eleven (11) in-depth interviews with experts and key stakeholders across the state. The goal of these interviews was to provide context for the consumer and small business research also being conducted.

METHODOLOGY

• May 4 and May 17, 2012
• Telephone (one face-to-face)
• 40 to 55 minutes
• Semi-structured interview guide adapted slightly to subjects' expertise
• Experts included:
   • representatives of small businesses, health plans, brokers/agents and providers
   • stakeholders knowledgeable of various audiences (low-income, ethnic, immigrant, tribal and rural)

TOPICS DISCUSSED

• What experts are hearing from the groups they represent about the health exchange in Minnesota, and about health reform in general
• What they think will be the biggest barriers or challenges to setting up a health insurance exchange in Minnesota
• Key unanswered questions or concerns they have about this new era of health insurance, and how the state should address these questions now
• Best ways to reach out to the uninsured and small businesses about health insurance options
• Potential role of their organization in the exchange, and other organizations that should be involved to help make the exchange more successful
• Familiarity with online efforts to help people purchase health insurance, and what's worked and what hasn't in Minnesota
• Features of the health insurance exchange that they would promote

* The purpose of the Public Education and Outreach Market Research project was to understand the process that individuals go through when investigating and enrolling in health insurance so that the health insurance exchange can develop an effective statewide public awareness campaign.

Consistent with the obligations under applicable privacy laws, while our aim was to collect the perceptions of individuals on the buying process for health insurance, we took significant steps to avoid collecting any health information about the participants or their families.

Barriers and Challenges

Respondents were asked about the barriers they perceived to setting up and using a health care exchange in Minnesota. Responses fell into two categories: challenges for the design of the exchange and barriers to participation.

DESIGN CHALLENGES

Complexity of current benefit system and coordination of agencies. Several drawbacks to the current system for enrolling in health benefit programs will need to be addressed. Rapid rate eligibility and options are also crucial.

Structure and governance of exchange. Lack of clarity on these issues is preventing otherwise enthusiastic and strategic partners from fully engaging.

Cost and variety of plans. What will the packages include and will carriers be able to meet requirements at affordable prices?

Role of brokers. Consumer and community representatives saw brokers as crucial to helping consumers understand and enroll in the individual exchange.

PARTICIPATION BARRIERS

Complexity. People anticipate a hassle and stress the need for genuine simplicity of the process as well as assistance.

Online interface. Lack of access to computers and internet connections was a concern cited by people who work with low-income, immigrant, and rural communities.

Stigma. People may assume the exchange is primarily for users of public assistance.

Language and literacy. In addition to having materials available in the languages people speak, they need to be written at an appropriate level of comprehension.

Risk perception and value of insurance. Being insured is not a universal norm, for both cultural and economic reasons.

Complexity of laws, benefits, and options.

Outreach Messages

Respondents were asked which particular features of the exchange they would promote to encourage participation. Of course, any potential message is only as useful as it is true and accurate.

PROMOTIONAL FEATURES

Straightforward, easy and fast. Assuming the system can live up to the goal, reassuring people of the ease of use will be crucial.

Comparison shopping. The consumer can compare plans directly ("apples to apples") according to their priorities.

Affordable. This aspect needs to be balanced carefully. Consumers are definitely looking for economical options. At the same time, many people don't self-identify as needing financial assistance, or are opposed to the government having a role in health care

Choices and Portability. Emphasize the "free market" aspect of private carriers on the exchange competing for consumer's business.

"Local." Emphasize that this is a Minnesota-driven initiative.

UNINSURED MESSAGES

Reduce stress. Ground messages in the experience of functioning without insurance and how purchasing insurance can address this stressful condition.

Community benefit. Promote the idea that as the more individuals enroll, the greater the benefits for the whole community.

Clarity about coverage. Make clear what plans cover, particularly preventive services, that consumers may not have access to currently.

"Just check it out." Encourage people to visit the site and enter some basic information to see what might be available to them.

EMPLOYER MESSAGES

Defined contribution. This potential feature of the exchange would simplify employers' benefits administration responsibilities.

Cost transparency. This is an important feature for employers that allows for planning and budgeting without the fear of hidden costs.

Cost savings. For employers, most decisions come down to whether they'll be able to save a dollar or not.

Outreach Strategies

Nearly all respondents recommended leveraging existing relationships as a key outreach component. Word of mouth could be useful as long as people have good experiences. Respondents cautioned against relying heavily on written materials.

ORGANIZATION / ENTITY		OUTREACH ROLE
County offices	→	People are already seeking services there. Add a kiosk or desk where they can sign up and have in-person assistance available.
Community organizations	→	Organizations that provide any type of service in a community are already known and trusted, and they can provide insight into the community they serve. Many already provide assistance in accessing benefits.
Community businesses	→	Have information available in these commerce centers, or potentially even engage these types of businesses in outreach.
Schools	→	Include information about exchange in parent communications.
Libraries	→	Potential sites for enrollment, could make in-person assistance available
Churches	→	Make information available, host community meetings to learn about exchange
Providers and sites of care	→	Offer a moment to reach people when they are thinking about health care needs
Chambers of commerce	→	Channel to reach businesses to provide information and seek input about the exchange. Early outreach and engagements could help boost participation later.

Build Alliances

This is perhaps the most important and urgent recommendation to come from the key informant interviews. Respondents emphasized the need to reach out to stakeholder groups well before the exchange is ready to launch.

For groups with a professional stake in the exchange, such as brokers, small businesses, health plans and providers, the time frame should be immediate. ***Getting their input now can help maximize the functionality of the exchange, as well as strengthen their role as allies rather than opponents.*** These stakeholders had several outreach suggestions:

- Make business plan-like presentations around the state, explaining the options the state is considering as the exchange is designed. Be specific with options and an analysis of potential impact, not just general discussion about ambiguities.
- Create a website that shares options being considered and solicits input from stakeholders.
- Develop and make public a timeline for different decisions along with opportunities for input.
- Use webinars, earned media, editorials, and organizational newsletters to distribute information about the exchange as it develops.
- Solicit input from brokers about how they would like to see their role in the exchange structured.
- Engage with provider organizations about what kind of information should be included on the exchange and how to manage it.
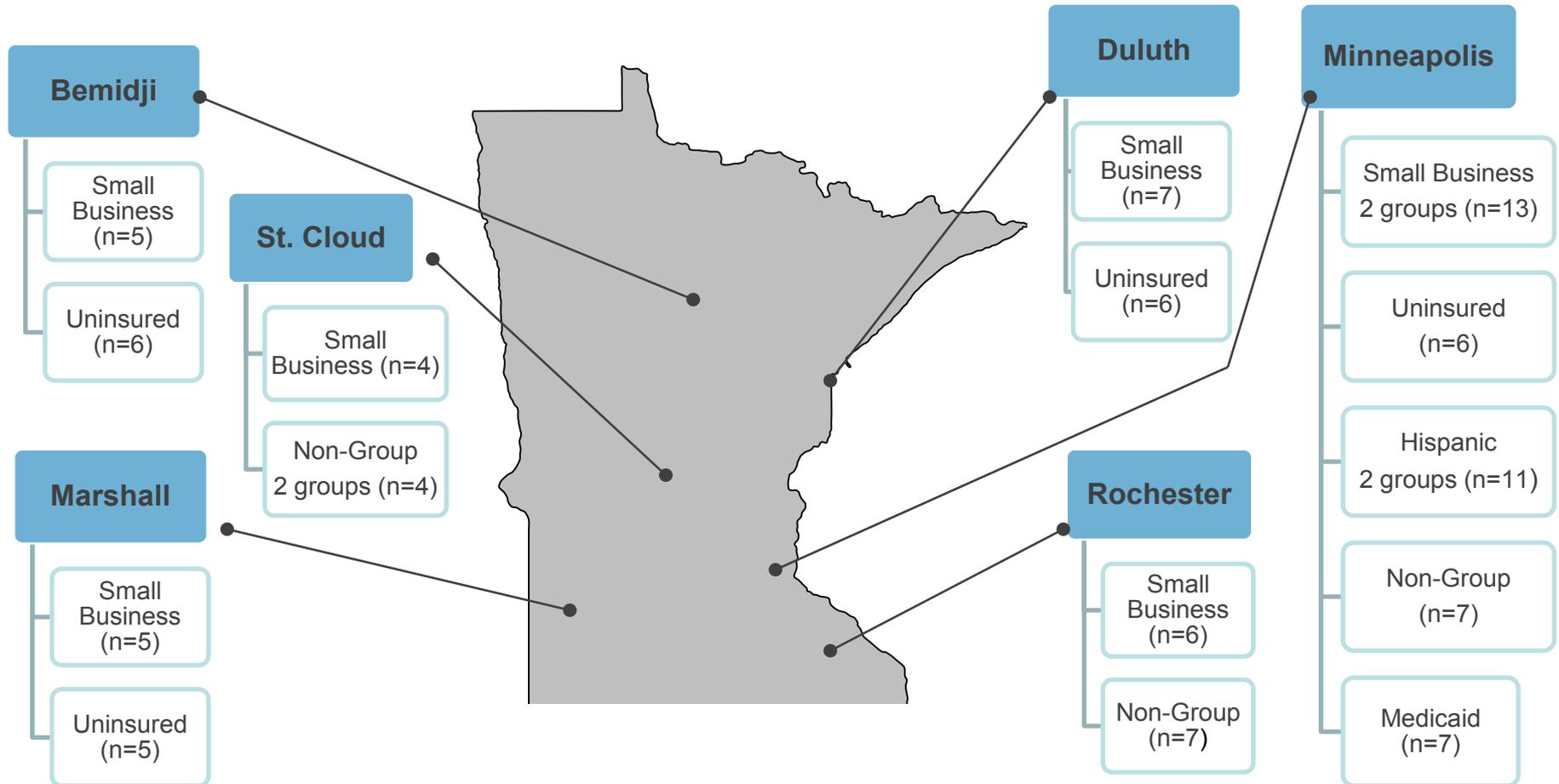
CONSUMER RESEARCH

Qualitative Research

Six cities. 18 focus groups. 99 participants. four days (May 22 to May 25)

Bemidji
- Small Business (n=5)
- Uninsured (n=6)

St. Cloud
- Small Business (n=4)
- Non-Group 2 groups (n=4)

Marshall
- Small Business (n=5)
- Uninsured (n=5)

Duluth
- Small Business (n=7)
- Uninsured (n=6)

Rochester
- Small Business (n=6)
- Non-Group (n=7)

Minneapolis
- Small Business 2 groups (n=13)
- Uninsured (n=6)
- Hispanic 2 groups (n=11)
- Non-Group (n=7)
- Medicaid (n=7)

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Qualitative Executive Summary

	KEY TAKE-AWAYS	IMPLICATIONS
CURRENT SITUATION	**Getting health insurance is an unpleasant experience**. Many people see seeking insurance as mired in paperwork and "fine print." The options are complex. Enrollment is complicated.	• The exchange can **redefine this experience** but that will mean distilling complex decisions
	Seeking health insurance is more of a journey than a one-time decision. Stages: trigger, pre-qualification, search and closure. Cost and coverage options for pre-existing conditions are often the first barriers in the journey.	• Need to address **each stage of journey in outreach and communications**
	Consumer interest is largely driven by their premium expectations, and their take on the value of insurance. Different people calculate this value differently.	• **Generic promises of "affordable" won't cut it**. Consumers are seeking a clear price tag.
	People have both rational and emotional goals, and it is the emotional goals (peace of mind, meeting norms, feeling secure) that make insurance worth the price.	• Product and outreach must be designed to **offer trust and peace of mind at every touchpoint**
	For small businesses, broker are critical intermediaries, treasured and trusted by business owners. Their clients highly value their expert analysis and efforts to simplify choices.	• The exchange must secure a **close relationship with brokers to** win the business audience.
EXCHANGE FINDINGS	**Most participants saw potential in the exchange concept**. Even outspoken opponents of the ACA found some aspects appealing.	• The fact that nearly everyone wants a better way to access insurance **creates an opening for the exchange concept.**
	In terms of branding, the words "Marketplace" and "Choices" resonated most with participants. Many found "Exchange" confusing.	• If validated by quantitative data, **Marketplace or Choices could be the more effective term** to use in naming the exchange.
	The concepts "Right Fit" and "Marketplace" were the most appealing to participants. They conveyed personalized choices and competition.	• These could offer the **best initial framework for developing broader campaign strategies**.

Quantitative Research

Consumer Survey

- Telephone survey of uninsured and individuals purchasing non-group health insurance
- June 15 – July 14
- Sample size: N=797
  - Uninsured N=377
  - Non-Group N=420

Business Owner Survey

- Telephone survey of owners/decision makers for businesses with fewer than 50 employees
- June 15 to June 29
- Sample size: N=250

Quantitative Executive Summary: Consumers

KEY TAKE-AWAYS	IMPLICATIONS
76% of the uninsured are dissatisfied with their current situation. On the other hand, 59% of non-group individuals are satisfied with their situation.	• The uninsured will be more open to the exchange than will the non-group audience.
Non-group respondents are much more likely to say that people like them have insurance, whereas the opposite is true for the uninsured.	• The norm among the uninsured is a barrier that will need to be addressed and reversed.
All respondents feel the process of looking for and choosing health insurance is difficult.	• Ease of use and simplicity messages will resonate.
Costs and difficulties assessing coverage and benefits details were the primary hurdles all respondents mentioned.	• All benefits are viewed through the lens of cost and coverage.
While over half of the uninsured (56%) have considered buying insurance, less than one-quarter (23%) have shopped online for it.	• Both online and offline outreach materials are important.
The main "triggers" that prompt someone to look into health insurance are changes in health or employment status.	• Communications can use these situations as context when reaching out to individuals.
Overall, 28% of respondents had heard about the exchange website, with roughly 6 out of 10 reporting interest in using it.	• Current awareness of the exchange is low, but openness to exploring is solid considering the lack of information.
Among five potential choices, *Minnesota Health Choices* was the preferred name for the exchange among study participants.	• Results inform branding efforts.
Segmenting the audience by openness to using the exchange provides an actionable way to prioritize communications for "core" and "swing" users.	• Offers a framework to build outreach efforts around.

Quantitative Executive Summary: Small Employer

KEY TAKE-AWAYS	IMPLICATIONS
The majority of businesses offering health insurance to employees rely on a broker for assistance. Of those companies, the majority have held relationships with their broker for 5 years or more.	• Brokers are extremely important to keep in mind when considering the small business segment.
Businesses trust their brokers a great deal and need their expertise in decision-making. However, just half of them would be willing to compensate them should their firm not provide a commission.	• The broker relationship cannot be discounted, but opportunity does exist if the exchange is able to relay the same level of service minus the cost.
With the emotion of family and health removed, cost may be an even bigger factor for businesses than consumers. Affordability is clearly the main reason insurance isn't offered. The cost uncertainty of rising premiums and the instability of such a small pool of individuals (under 10 for most) make it difficult for employers to be able to project when making decisions.	• The impact on a small employer's bottom line is the most important factor. It is essential for the exchange to demonstrate not only competitive rates but cost certainty.
Less than 20% of small businesses are aware of a site that allows for insurance comparison and purchase. That said, there is definite interest, even among those using brokers.	• Initial general awareness building should be received positively by businesses.
Only a quarter of small businesses were interested in providing contribution amounts for employees to apply themselves or a system where employees choose from a list of approved plans.	• Employers value control over costs in order to maintain a healthy bottom-line. Ditch defined contributions in favor of more comparison.
Just over half of businesses would need to know 75% of insurance plans on the market were featured in the exchange. Nearly a quarter would need 100% to be represented.	• The exchange will need to include the majority of plans in the marketplace, but not necessarily all.
The majority of small businesses believe that at least half of similar businesses offer health insurance to employees.	• The norm barrier is not a particular problem for small businesses.

Reviewing the consumer research

What are people are seeking?	What factors influence people?	How might we promote the HIX?

What are people are seeking?

Current Situation
(Current State)

VS

What consumers want
(Desired State)

- Name (pg. 51)
- Governing structure (pg. 53)
- Branding concepts (pg. 55)
- Interest Levels (pg. 57)
- Segmentation (pg. 59)
- Product Features (pg. 69)
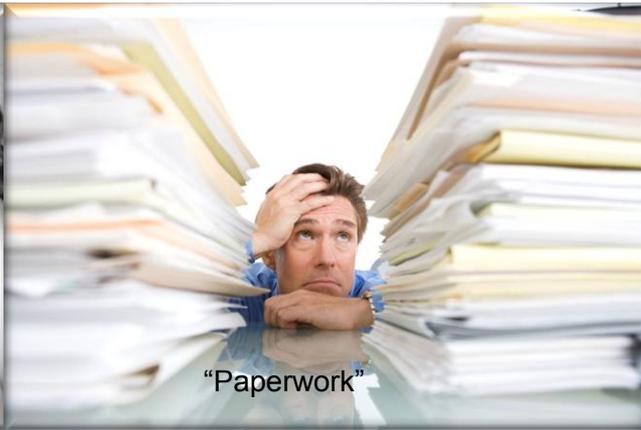
WHAT ARE PEOPLE SEEKING?

Current Customer Experience

We asked participants what images came to mind when they thought about seeking insurance. All were negative – crooks, paperwork, smoke coming out of ears, nausea, etc. This is an opening.

"Pulling my hair out"

"Paperwork"

"A little thief"

"A boa constrictor slowly squeezing us"

Shopping for health insurance is a **negative experience**. The insured are frustrated by the cost. The uninsured feel cheated and scared. Those buying health insurance on their own find the process overwhelming.

This provides an opening for the exchange: People want a better way. But it also reveals a challenge: People are skeptical. **The exchange must address this on both a rational and emotional level: People want an easier, more affordable process, but they also want to have a greater feeling of trust and security**

"I find buying insurance a pain in the ass. It's difficult, hard to keep track of, the law changes. It's a complex business."
— *Small business owner, Duluth*

"I want to run away. But I'm at the age that I can't run away."
— *Uninsured resident, Marshall.*

Satisfaction with current insurance status

The uninsured are the most dissatisfied … but nobody is really happy. Half the business owners described themselves as dissatisfied. Even 2 out of 5 people who buy insurance for themselves are dissatisfied with their situation.

CONSUMERS

- Non-Group: Satisfied 61%, Dissatisfied 39%
- Uninsured: Satisfied 24%, Dissatisfied 76%

Legend: ■ Satisfied ■ Dissatisfied

SMALL EMPLOYER

- Small Employer: Satisfied 46%, Dissatisfied 54%

Legend: ■ Satisfied ■ Dissatisfied
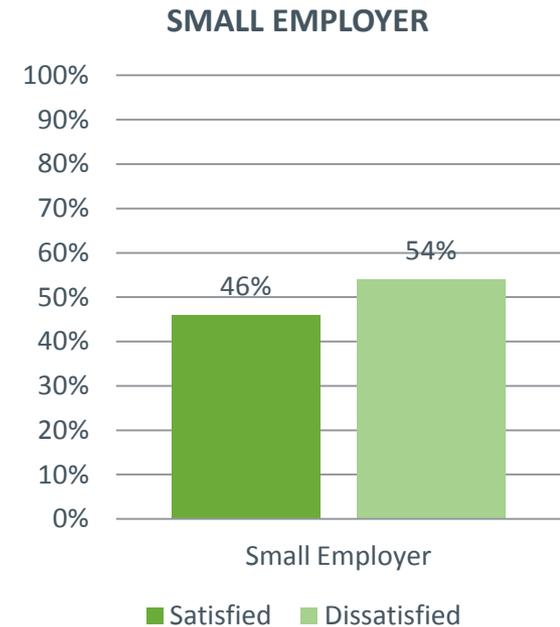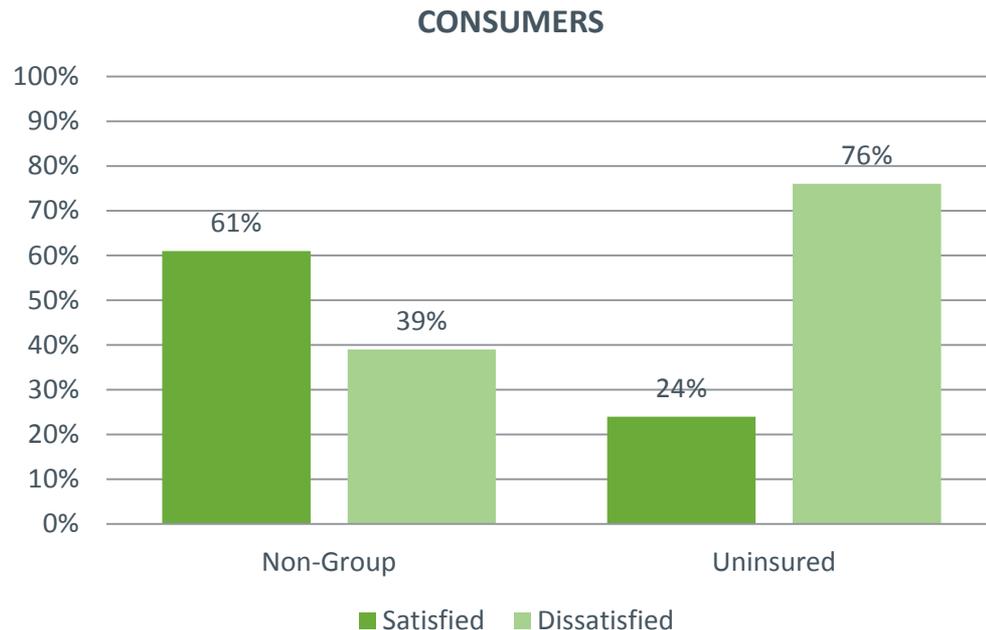
Base sizes: Uninsured=377; Non-group=420; Small employer=250

Current State: How <u>consumers</u> seek health insurance

We asked consumers about the last time they sought health insurance. The experience can be broken into four parts: the trigger, the pre-qualifying questions, the search, and closure.

| **Trigger**: What prompted the search for health insurance (their goal) | **Pre-qualifying**: Initial questions that can stop the process before it begins | **Search**: The process consumers use to search for and evaluate options | **Closure**: How the process is resolved, either with insurance or without. |

Trigger

Common reasons why participants sought insurance included:

- Self or spouse has lost a job (goal: to preserve current insured state)
- Can't afford policy offered through work (goal: find a cheaper policy)
- Costly medical issues (goal: reducing costs)
- Marriage or birth of a child (goals: being responsible, providing regular medical care for children)
- Find a better deal (goal: reducing costs and improving coverage)

Pre-qualifying

Certain barriers, such as the expectation of prohibitive costs and worries about pre-existing conditions, keep some people out of the market. For the exchange, these perceptions could act as "pre-qualifying" events where people opt out of consideration. This decision tended to center on three key "pre-qualifying" questions:

- Is this a cost I can afford?
- (For some) Am I the type of person who can get government help with this? (Some people eliminate government help as an option)
- Does my health condition disqualify me?

Search

Consumers tend to search the internet; business owners favored brokers. Some tried both.
Internet. Consumers used both search engines (typically google) and online comparison sites to locate and compare plans. One downside participants cited to the online comparison tools is spam email and sales calls. This is an opening for the exchange.
Brokers. Brokers simplify the process, providing side-by-side comparisons of "right-fit" plans. Most business owners felt a high degree of loyalty to their broker.
Both. Some consumers start with a broker and move to the web when they become more savvy. Others are frustrated by the web and seek a broker.

Closure

Broker purchase. These consumers tend to be the most satisfied; but some worry that commissions might influence brokers.
Direct purchase. Consumers use online comparison sites to shop but usually purchase directly with a carrier. This behavior (window shopping) could also take place with the exchange..
No purchase. Some consumers seek but do not find, because:

- Process is overwhelming / can't make a good decision
- Can't afford it / don't qualify for government help
- Pre-existing conditions

Current State: How <u>business owners</u> seek insurance

We asked small business owners about the last time they sought health insurance. Those who did secure insurance almost always had turned to the same place – an insurance broker.

Trigger: What prompted the search for health insurance (their goal)

The broker: Most small business owners use, and trust, their broker. There is some concern about whether commissioners influence offerings, but it is minimal.

Closure: How the process is resolved, either with insurance or without.

Common reasons why small business owners sought insurance included:
- Norms– competitors offer insurance so they do, too
- Reducing turnover – they know their employees want insurance, and think they will be able to hang onto good employees longer if they provide it.
- It's the right thing to do – owners feel responsible for their employees' welfare, and providing insurance is part of that

Small business owners typically turn to brokers to navigate the complexity of selecting health insurance. They value that brokers:
- Offer side-by-side comparisons of tailored, limited choices
- Help manage paperwork, forms
- Save time
- Provide trusted advice

"I would think twice about doing anything without my broker's opinion; he's been a trusted advisor for many years."
— Small business owner, Twin Cities

"The thing about brokers is they have their commission. So they are pushing who they get paid the best from."
— Small business owner, Marshall

"It was very easy with the broker, because he found what was good for me and I just signed the paper. With online, if it was that simple, I might not need him. I really don't want to spend all my time looking, so it's nice to have somebody I trust just say, 'That's the right one for you.' " *— Small business owner, Rochester*

Small business owners who buy through a broker are generally satisfied with the experience, although the rising costs of health insurance are a deep concern.

Those who can't afford health insurance feel badly that their employees go without; it's something they feel they should do. They also worry that when the economy recovers employees may jump ship to a job with benefits.

Employers who don't provide insurance are more open to the concept of a defined benefit that allows employees to choose their own health plan.

Getting health insurance isn't easy

Whether you're uninsured or paying for insurance on your own, the consensus is that the health insurance process is not at all easy. The process itself presents a large barrier to participation.
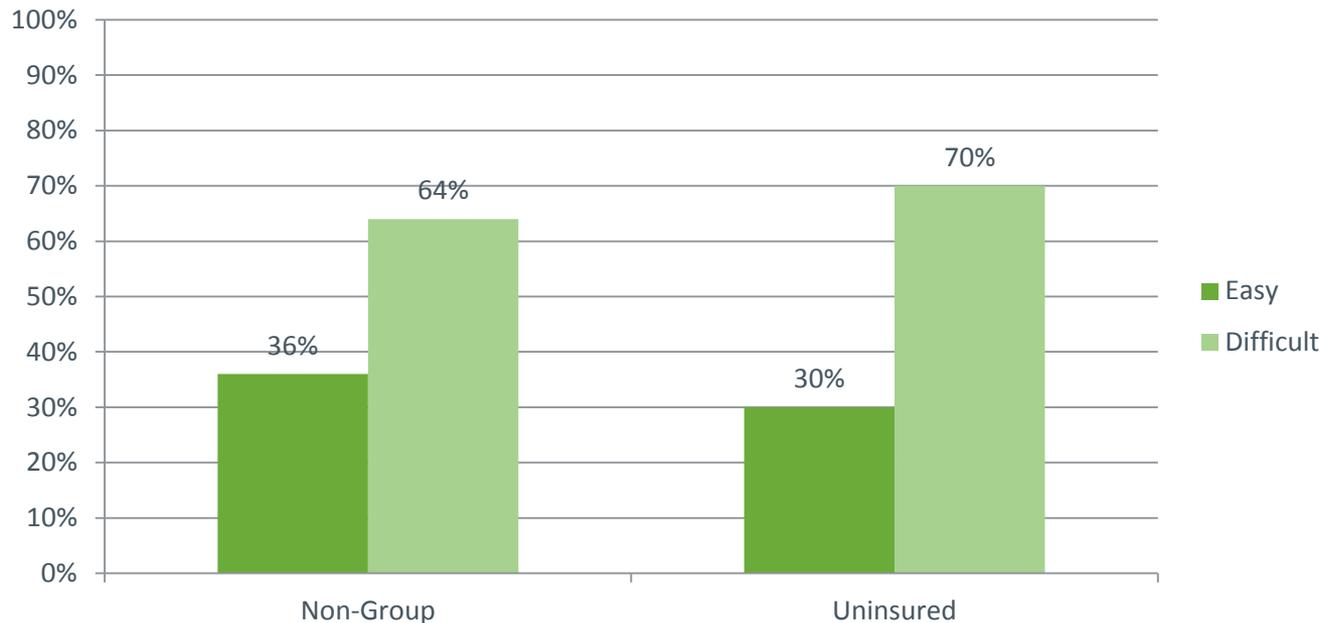
Base sizes: Uninsured=377; Non-group=420

Consumers: What makes the process difficult?

While a number of consumers complain about the complexity of finding an attaining insurance, the top reason, by far, that insurance is difficult to find is prohibitively high prices.

Open-end response (% mentioning)	Non-Group (n=420)	Uninsured (n=377)
Prices too high	**38%**	**54%**
Hard to tell what's covered, what's not	17%	9%
Difficult to compare benefits across plans	17%	7%
Nothing	9%	11%
Rejected due to pre-existing condition	14%	6%
It's very confusing	8%	7%
Difficult to compare prices	9%	6%
Difficult to research / No one-stop-shop	10%	7%

Business: What makes the process difficult?

High prices are an even greater barrier for small businesses, regardless of broker assistance or not.

	Total (n=250)	Broker (n=102)	No Broker (n=54)
Frequent premium increases	**72%**	**78%**	**61%**
Steep premium increase	**65%**	**70%**	**57%**
Age of my employees continues to increase	56%	57%	56%
The options I have become more and more limited	52%	53%	50%
Plans are too complex	51%	51%	50%
Difficult to compare benefits across plans	49%	49%	50%
Difficult to understand what is covered by the plans	47%	49%	44%
Medical underwriting (i.e., increased costs due to medical history of employees)	46%	50%	39%
Difficult to compare prices	46%	46%	44%
Plans do not meet the needs of my employees	31%	32%	30%
Plans are too limited in scope	26%	26%	26%

Four Types of Consumers

We spoke with four types of consumers, sharing a number of similar frustrations and expectations, but each representing its own challenges as well

UNINSURED

- Feel cheated and defeated: premiums are out of reach
- Many cite pre-existing conditions
- Face financial and emotional stress
- Dislike "handouts."

"It's sad that in my profession, if I get hurt, I hope that it's between punch in and punch out time."

NON-GROUP

- Highly value insurance coverage
- Want apples-to-apple comparisons
- Suspect others get better deal
- Got help from expert
- Hate sales calls and spam

"I don't know how much longer I will have health insurance."

HISPANICS

- Being insured is not the norm
- Concerns about legal status

"I had insurance for almost 16 years but I lost my job and haven't had insurance for 2 years. I don't have a job right now."

MEDICAID

- Dislike in-person app. process;
- Prefer help from real people
- Feel disrespected; seeking common courtesy and respect

"The state doesn't work for me [to run the exchange]. They are inefficient, disrespectful."

Perceived need for insurance varies

Unsurprisingly, non-group consumers value insurance more than the uninsured. The clear majority see it as a necessity they would never give up, as evidenced by their individual purchase of plans.
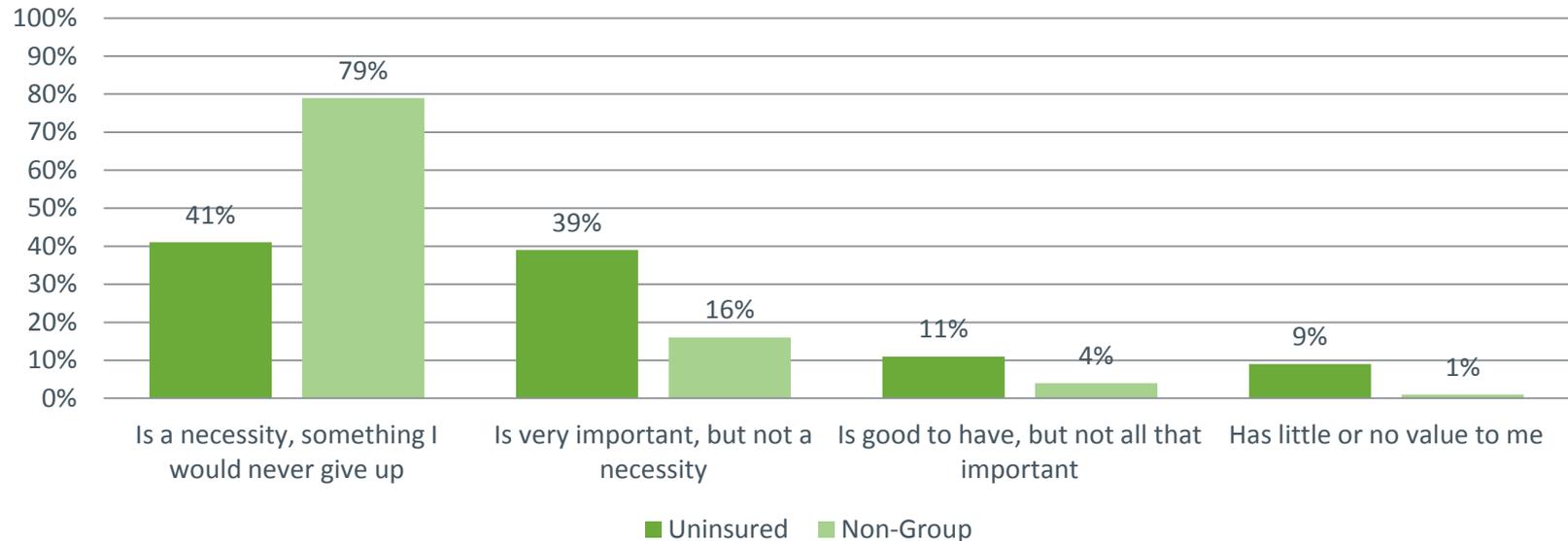
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What people want to know first

- **What's the cost?**

- **What's the coverage?**

- **Who is making the offer? Trustworthy?**

- **Can people with pre-existing conditions get covered?**

- **What doctors or insurance plans can I access?**

The typical starting points for both consumers and small business owners were cost and coverage.

Just over half the participants wanted to know first about cost, a subject nearly every participant mentioned in their top three questions. About half also asked about coverage, though typically as a second or third question. Other common questions focused on:

- Who was behind this new way to seek health insurance (who ran it or set it up)?
- How did it work and how easy would it be to use?
- What providers (doctors) or insurers might be accessed?
- Would it exclude people with pre-existing conditions?

What people are seeking

CURRENT STATE

- Overwhelms me
- Leaves me worried
- Lots of complexity and paperwork
- Need for expertise, help (often fulfilled by broker)
- Feeling sticker shock – high prices keep going up
- Uninsured unable to secure product

DESIRED STATE

- Peace of mind
- Trust, security
- Choices distilled to key decision points
- Expert guidance available when it's needed
- Clear prices offering the best deal
- Uninsured get affordable coverage

GAP

How can we help people move to the desired state?

WHAT FACTORS INFLUENCE PEOPLE

Seeking health insurance: A CONSUMER'S journey

Trigger: Prompting the search for health insurance (goal)

- Self or spouse has lost a job (goal: to preserve current insured state)
- Can't afford policy offered through work (goal: find a cheaper policy)
- Costly medical issues (goal: reducing costs)
- Marriage or birth of a child (goals: being responsible, providing regular medical care for children)
- Find a better deal (goal: reducing costs and improving covers

Pre-qualifying: Initial questions that can stop the process before it begins

- Is this a cost I can afford?
- (For some) Am I the type of person who can get government help with this? (Some people eliminate government help as an option)
- Does my health condition disqualify me?

Search: The process consumers use to search for and evaluate options

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Consumer Triggers

Event → Consideration

Expectation → Consideration
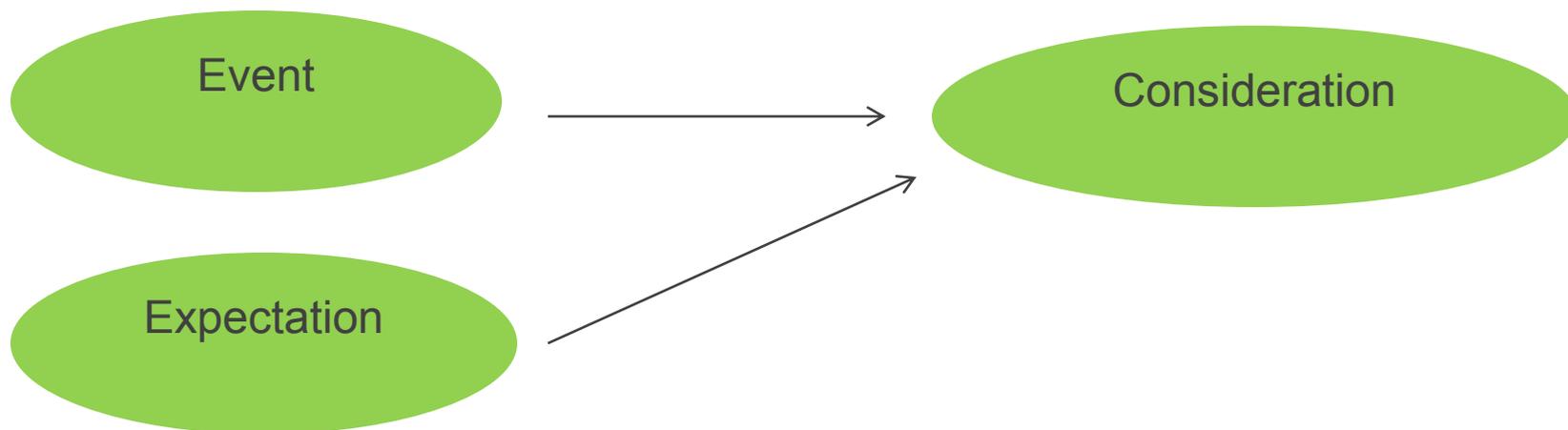
Events that can trigger consideration

The primary motivators consumers encountered when considering looking for insurance were major life events like a change in health or employment status. This relates directly to the real life benefit of health insurance: Not only does insurance provide access to medical care, it relieves worry about potential financial ruin due to a major medical event. The payoff is peace of mind.

Thinking about the last time you looked for health insurance, what prompted you to look for insurance?	Uninsured
Change in **health status** (got sick, new diagnosis, etc)	26%
Change in **employment status** (lost job, changed job, etc)	17%
Had a **child** or adopted a child	5%
Talked to someone about health insurance	5%

Norms: Being uninsured is … normal

People tend to think of themselves as part of the norm. For non-group participants, it means they expect most people to have coverage like they do. For the uninsured, though, it means they understand the health and financial risk they carry around daily to be a normal part of life. On the positive side, people's personal self-standard (e.g., "I am the family provider.") was often a motivation for seeking insurance.

	Almost everyone like me has health insurance	Most people like me have health insurance	About half of the people like me have health insurance	Less than half of the people like me have health insurance	Almost no one like me has health insurance
Uninsured	5%	21%	34%	22%	17%
Non-Group	16%	44%	26%	12%	2%
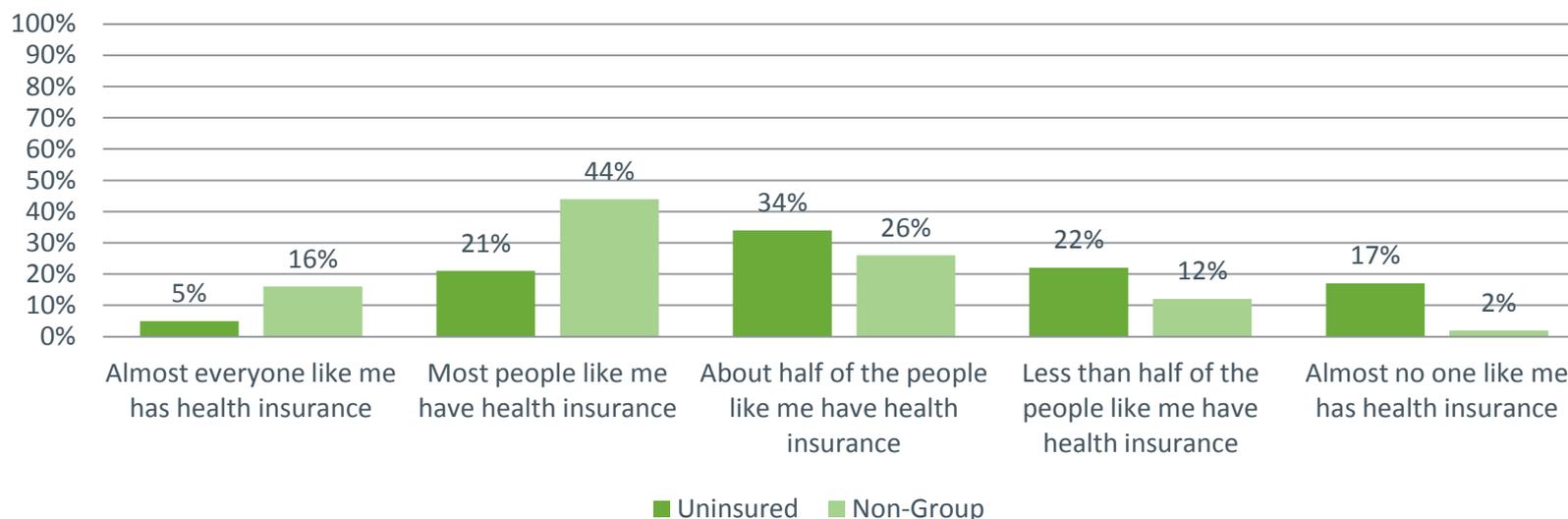
Base sizes: Uninsured=377; Non-group=420
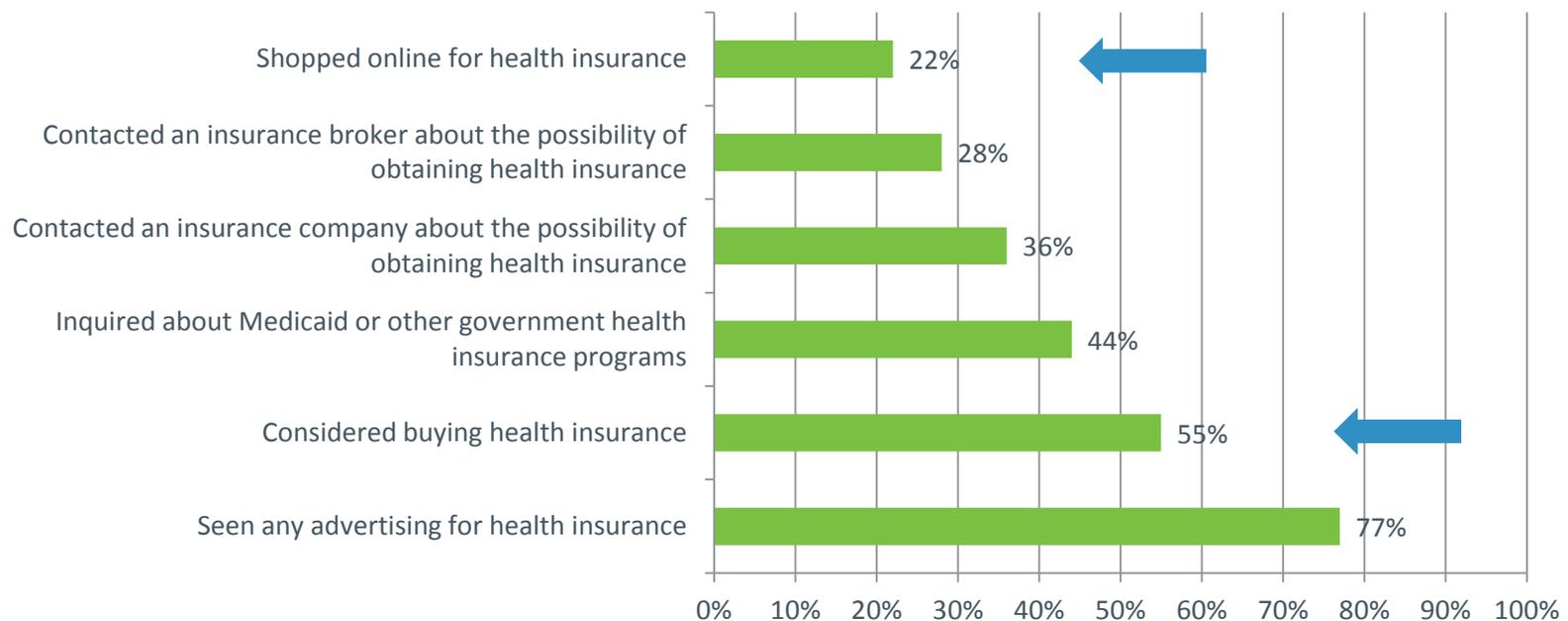
Uninsured: Priced out of the market

While some uninsured feel impervious to illness or don't worry about the costs of what they need, the vast majority feel priced-out from coverage. In fact, this belief is so deeply ingrained that many forgo further time in determining eligibility for assistance. A challenge – and an opportunity – for the exchange will be persuading these consumers that things have changed – in terms of both premiums (due to assistance) and the ease with which one can determine price.

What is the main reason you do not have insurance? (open-end)	Uninsured (n=377)
Cost AND more than I could possibly afford / I don't earn enough money	63%
Costs AND more than I am willing to pay / Not worth the cost	11%
I am healthy / don't get sick so I don't really need it	6%
I have a pre-existing condition so could not find a plan that would cover me	5%
I can afford to pay for the health care I need so I don't need health insurance	3%
I just pay as I go / Just cheaper to pay doctor	2%

Uninsured: Many not shopping

Survey results help illustrate the lack of motivation around the current system. Over half of uninsured respondents have considered buying health insurance. But when it comes to the brass tax of actually purchasing, less than a quarter have shopped online (the starting point for most people).

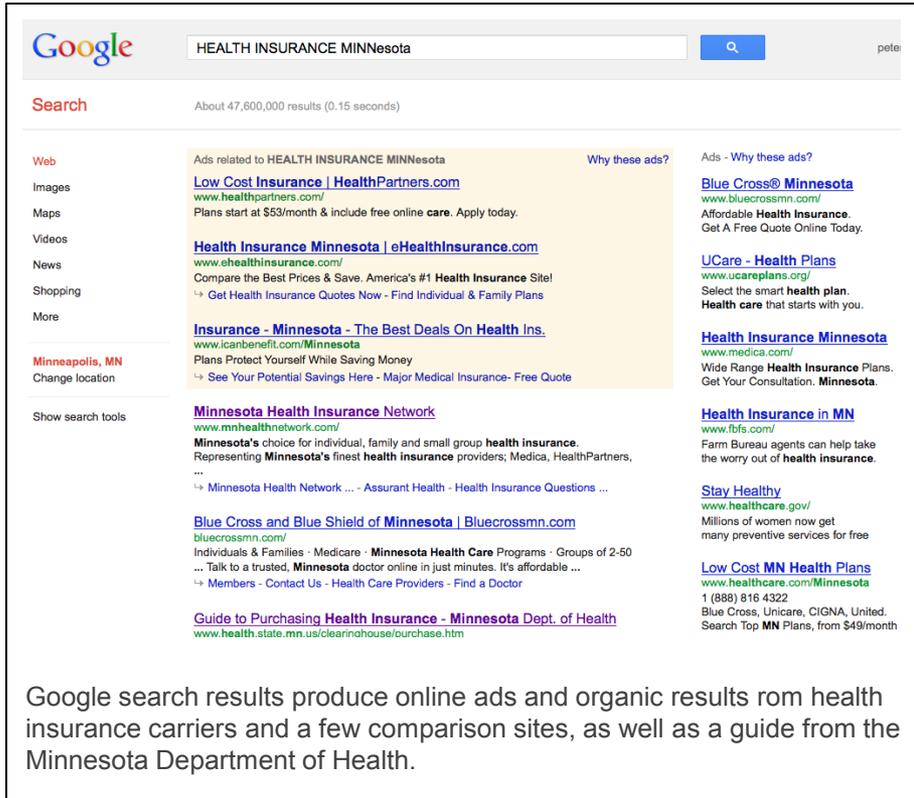| Category	Percentage
Shopped online for health insurance	22%
Contacted an insurance broker about the possibility of obtaining health insurance	28%
Contacted an insurance company about the possibility of obtaining health insurance	36%
Inquired about Medicaid or other government health insurance programs	44%
Considered buying health insurance	55%
Seen any advertising for health insurance	77%

Base sizes: Uninsured=377

Many who shop look online

The majority of participants who had shopped for health insurance started with an online search, with occasional outreach to trusted sources.

Google search results produce online ads and organic results rom health insurance carriers and a few comparison sites, as well as a guide from the Minnesota Department of Health.

Most participants who had shopped for health insurance – whether for their business or themselves – started with a general online search on their web browser. Another frequent source was to ask trusted sources – generally a friend or relative, other business owners, or a broker.

The exchange should invest significantly in search engine optimization, search engine marketing and social media to capture people who are beginning the process of shopping for health insurance.

[How do you shop for health insurance?] "Google or ask other small businesses in town." — Small business owner, Duluth

"I Google first." — Nongroup policyholder, Twin Cities

"The Internet. Just a Google search or check different links." — Uninsured resident, Marshall

"Can I see testimonials from people who already have it?" — Uninsured resident, Bemidji

Brokers: Engaging the audience

For many participants, brokers were trusted advisors who helped them navigate the confusing, anxiety-producing health insurance landscape. Many participants said they would only consider using the exchange if they could find an affiliated broker.
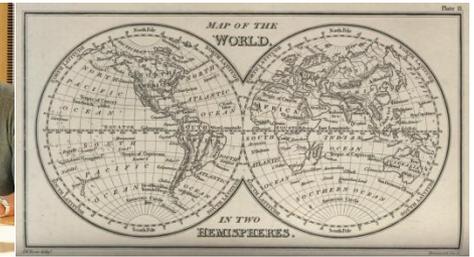
Participants who used brokers reported being presented with clearly presented side-by-side comparisons of pricing and coverage, all customized to the client's needs and budget. In other words, **brokers were seen as providing much of what the exchange is promising**. Many participants, especially small business owners, wanted to be able to talk to someone who they trusted before making a purchasing decisions. Brokers generally played this role as trusted advisor; however, participants also sometimes worried whether hidden sales agendas might be at play in their brokers' recommendations.

Finding a way to bring the broker-client relationship into the exchange will be key to targeting the small business and non-group markets.

"Instead of having to compare all this stuff online I'd rather have somebody just help me – it's way too time consuming. Sit down, tell me about it." — Small business owner, Marshall

"The thing about brokers is they have their commission. So they are pushing who they get paid the best from." — Small business owner, Marshall

"I would think twice about doing anything without my broker's opinion; he's been a trusted advisor for many years." — Small business owner, Twin Cities

"The first time I bought my own, I used a broker and found that helpful. Now that I know some things, I usually go online and do it myself." — Non-group policyholder, Twin Cities

How consumers price value

What's health insurance worth? Three models summarize how the uninsured and non-group participants calculated the dollar value of a potential insurance premium.

Transactional	**Pure Actuarial**	**Full Value**
Basis	Basis	Basis
Expected medical costs for the coming year based on experience	**Expected medical costs for the coming year based on projection**	**Expected medical costs for the coming year based on projection**
	+	+
	Value of being covered in the event of a catastrophic medical event	**Value of being covered in the event of a catastrophic medical event**
		+
		Normative, Self-Standards and/or Peace-of-Mind Value

*Some participants saw limited value in health insurance, which basically boiled down to the insurer's ability to negotiate discounts from health providers. For these participants, **insurance is a way to avoid likely cost**s. When faced with the true cost of insurance, these participants tended to question the economic sense of paying up-front to avoid what are potentially lower costs for medical care. These participants were often young and healthy.*

*Other participants also considered the value of being protected from financial calamity in the event of an unexpected medical problem. This group felt more confortable spending something on health insurance since **the value of covering an unexpected event seemed significant** and its precise value is difficult to calculate, but presumed to be very significant.*

*Still other participants, especially those with families and those who had been previously insured, saw **additional value in how being insured made them feel**. For these participants, health insurance offered a way to live up to social norms, meet self-standards or gain "peace of mind." These participants were the most likely to be interested in pursuing health insurance or already covered.*

Cost Expectations

In general, Non-Group members expect higher monthly premiums than the uninsured. On average, they both expect to pay between $300 and $500. Both groups tend to overestimate the contribution they would have to make: a positive opportunity for the exchange to disrupt misperceptions with positive news.

Income of Single Adults	Actual Monthly Premium Contribution	Minimum Expected Contribution	Maximum Expected Contribution	Average Expected Contribution
Up to $15,000 (n=58)	$18 to $36	$229	$245	$237^^^^^^^
$15,000 up to $25,000 (n=72)	$54 to $114	$323	$337	$330^^^
$25,000 up to $35,000 (n=73)	$183 to $259	$380	$397	$389^^
$35,000 up to $50,000 (n=107)	$345	$532	$559	$546^^
$50,000 up to $75,000 (n=76)	$345	$484	$503	$494^
$75,000 up to $100,000 (n=38)	$345	$509	$533	$521^^
$100,000+ (n=30)	$345	$609	$622	$616^^

^ = number of times greater than actual contribution

Key elements being sought

How to close the deal
(a communicator's and designer's checklist)

☐ Help consumer **recognize need**
- Rational – covering expected and unexpected medical costs
- Emotional – norms, peace of mind, security, self-standard

☐ Clear affordable **price tag** up front
- Specific cost versus generic promises of "affordable
- Offer financial assistance without framing as a "hand-out"

☐ Clearly **valuable coverage**

☐ An intuitive process that offers choices, but **distils the decision-making** to a few meaningful decisions.

☐ A product that **fulfills emotional needs** – a product that engenders trust and peace of mind at every touchpoint

The small business owners' journey

Trigger: Prompting the search for health insurance (goal)

Common reasons why small business owners sought insurance included:
- Norms– competitors offer insurance so they do, too
- Reducing turnover – they know their employees want insurance, and think they will be able to hang onto good employees longer if they provide it.
- It's the right thing to do – owners feel responsible for their employees' welfare, and providing insurance is part of that

The broker: Most small business owners use, and trust, their broker. There is some concern about whether commissioners influence offerings, but it is minimal.

Business owners typically turn to brokers to navigate the complexity of selecting health insurance. They value that brokers:
- Offer side-by-side comparisons of tailored, limited choices
- Help manage paperwork, forms
- Save time
- Provide trusted advice

Small business owners who buy through a broker are generally satisfied with the experience, although the rising costs of health insurance are a deep concern.

Closure: Brokers offer owners a clear choice based on custom business objectives

Those who can't afford health insurance feel badly that their employees go without; it's something they feel they should do. They also worry that when the economy recovers employees may jump ship to a job with benefits.

Employers who don't provide insurance are more open to the concept of a defined benefit that allows employees to choose their own health plan.

Small Business Triggers

The vast majority of small businesses that don't provide insurance to employees are hindered by cost. It is by far, the main reason that these businesses are unable to cover their employees.

Reason	Percentage
Could not afford it	77%
Not a good value	28%
Firm too small	26%
Medical underwriting	22%
Plans too limited	18%
Employees not interested	14%
Process confusing	14%
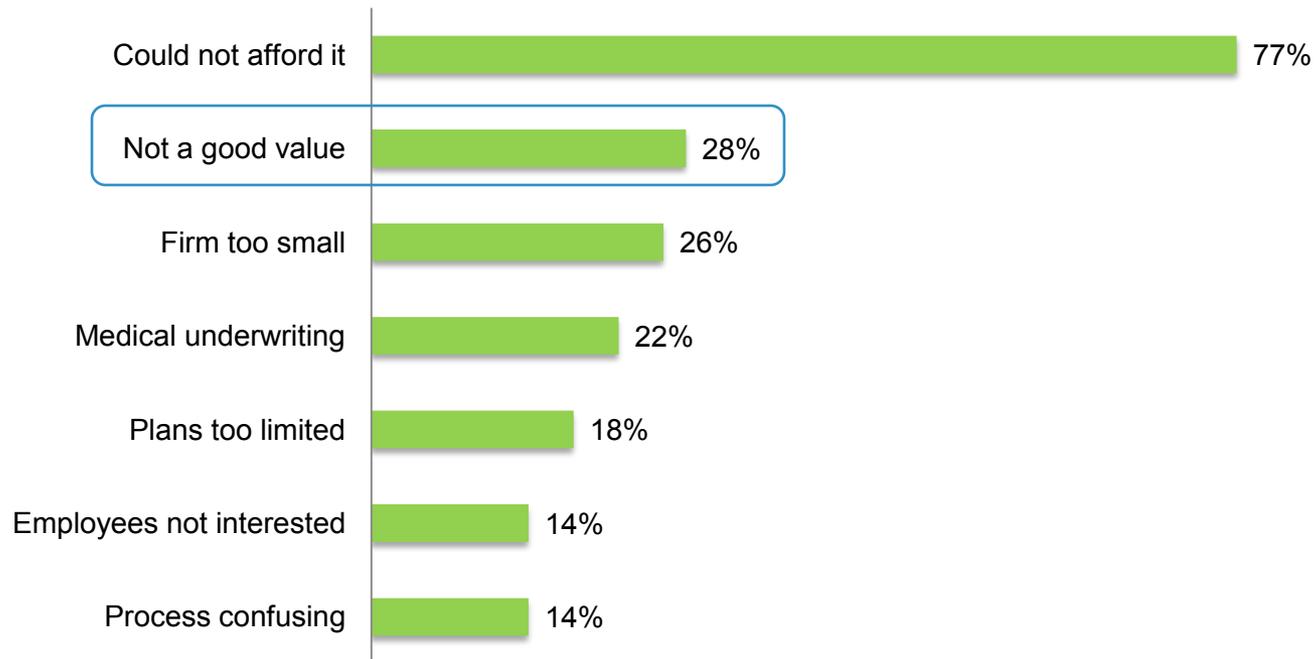
Base size, Not Offer=94

Small Business Triggers

Similar to consumers, small businesses tend to see themselves as the norm: those offering believing at least half of similar business offer insurance; those not offering believing more than half don't offer coverage

**Firms that offer
health insurance**

Less or None,
22%

All or Most,
44%

About Half,
34%
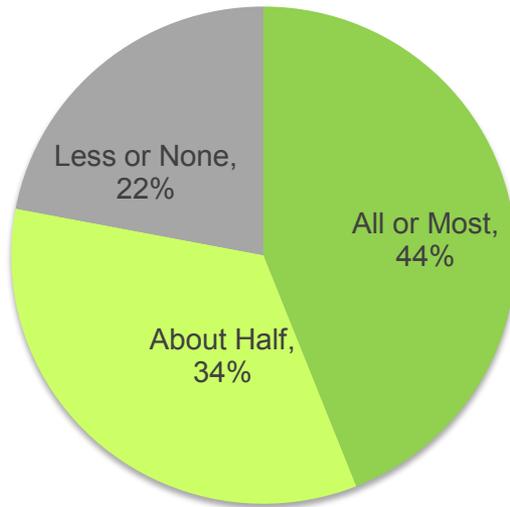
**Firms that do not offer
health insurance**

All or Most,
14%

Less or None,
59%

About Half,
27%

Base size, Offer=156
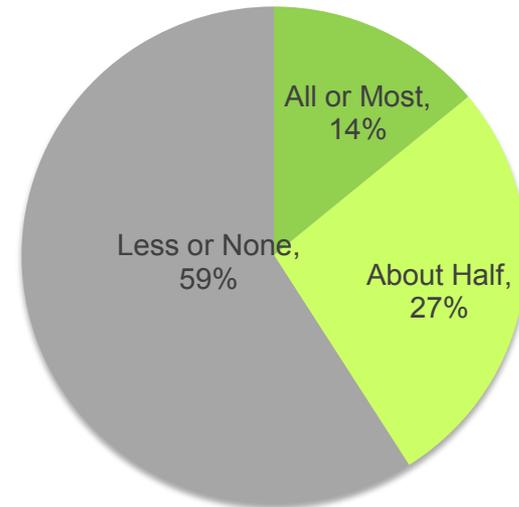
Base size, Not Offer=94

Small Employer & Brokers

Broker involvement is absolutely critical to the majority of small business owners. Typically, the broker represents the easiest, most reliable route to purchase, and for many, a close friend and associate.
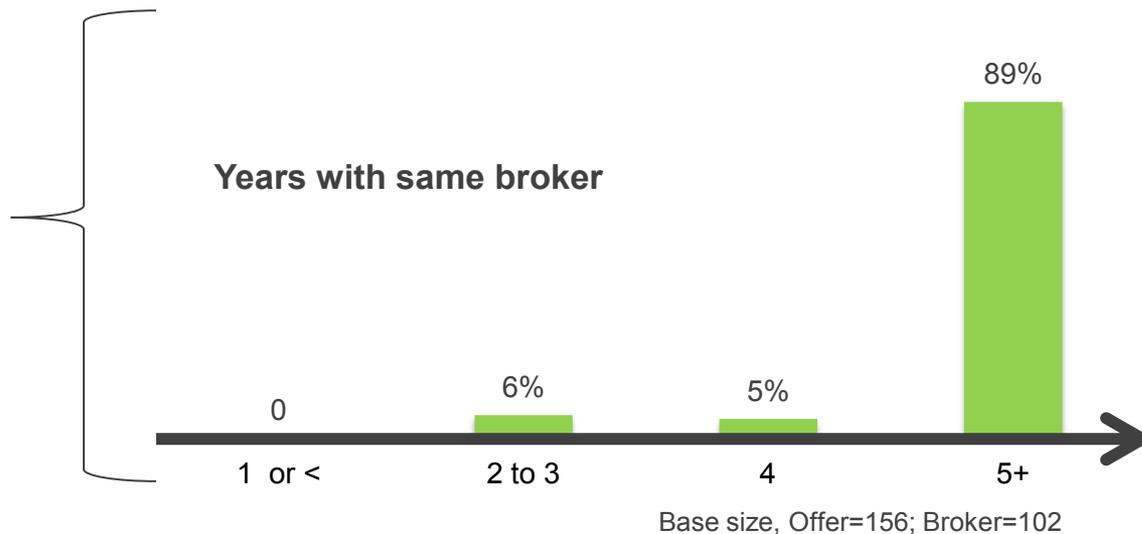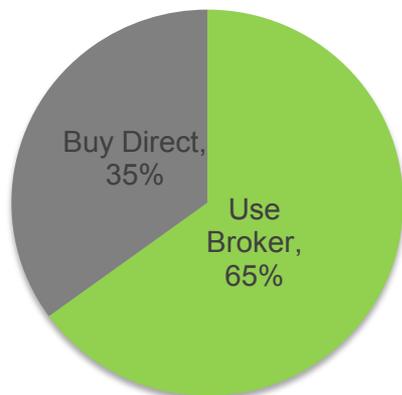
Pie chart: Buy Direct, 35%; Use Broker, 65%

Years with same broker

1 or <	2 to 3	4	5+
0	6%	5%	89%

Base size, Offer=156; Broker=102

"I would think twice about doing anything without my broker's opinion; he's been a trusted advisor for many years." — Small business owner, Twin Cities

Closing the Deal: Brokers

Likely because of their long-standing relationships, brokers are afforded a great amount of trust by small businesses, as the majority totally trust their broker despite commission. Over half said they'd be willing to pay their broker if they weren't receiving a separate commission.

"Instead of having to compare all this stuff online I'd rather have somebody just help me – it's way too time consuming. Sit down, tell me about it." — Small business owner, Marshall

	Stongly	Somewhat
Trust broker to select appropriate plan	55%	34%
Trust despite commission	46%	42%
I need broker to sort pros & cons	51%	36%
I'd be willing to pay broker	17%	40%

■ Stongly   ■ Somewhat
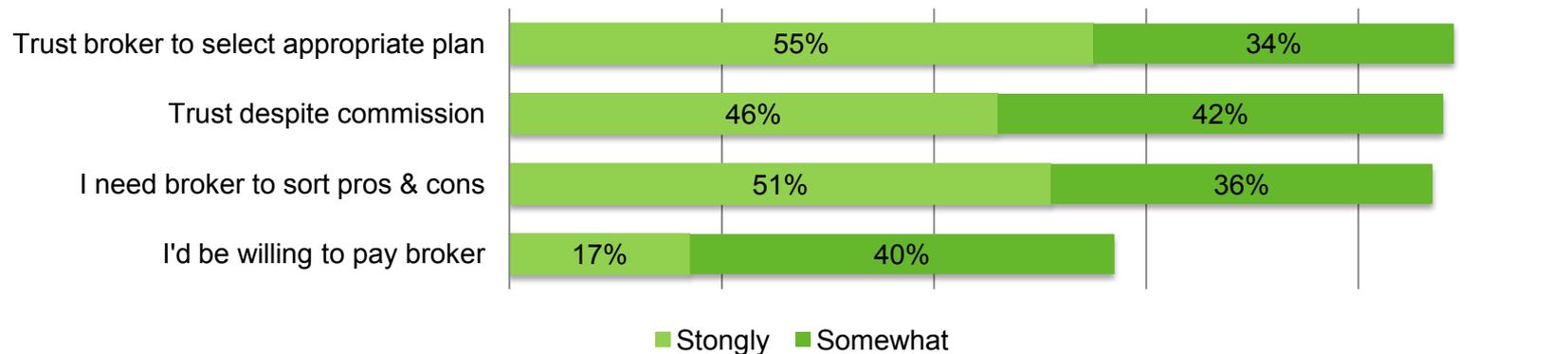
Base size, Broker=102

Key Behavior Factors: A Summary

- **Consequences**:
  - What's the cost of not having insurance (Loss aversion)
  - What medical costs are coming up?
  - Access to doctor of choice
- **Norms**: What are most people like me doing?
- **Costs**: Is this something I can afford?
- **Efficacy**: Can I boil those this decision to a manageable set of meaningful choices
- **Emotional value**: Peace of mind

Desired State: value chain explained

Essentially **people are seeking value**, the best coverage for the best price. But seeking insurance is also emotional and complex. Not only are there barriers to even beginning the process, **the complexity of the offering makes value difficult to determine.**

This often triggered an emotional response. Several participants fretted "fine print" would ultimately leave them vulnerable if they committed a significant portion of their income to health insurance. As has been seen in other research, consumers were seeking an emotional state. They want the "peace of mind" of having potential medical costs under control.

This is an opening for the exchange, a filter around which to design all aspects of the product, assuring people feel reassured and peace of mind at every touch point.

Peace of Mind, Security

Loss aversion

Can meet expectations

Less anxiety

Better health care

Fair Deal

Protected

Value

Access

Good Coverage

Allows pre-existing conditions

Easy to use

Low-Cost Plans
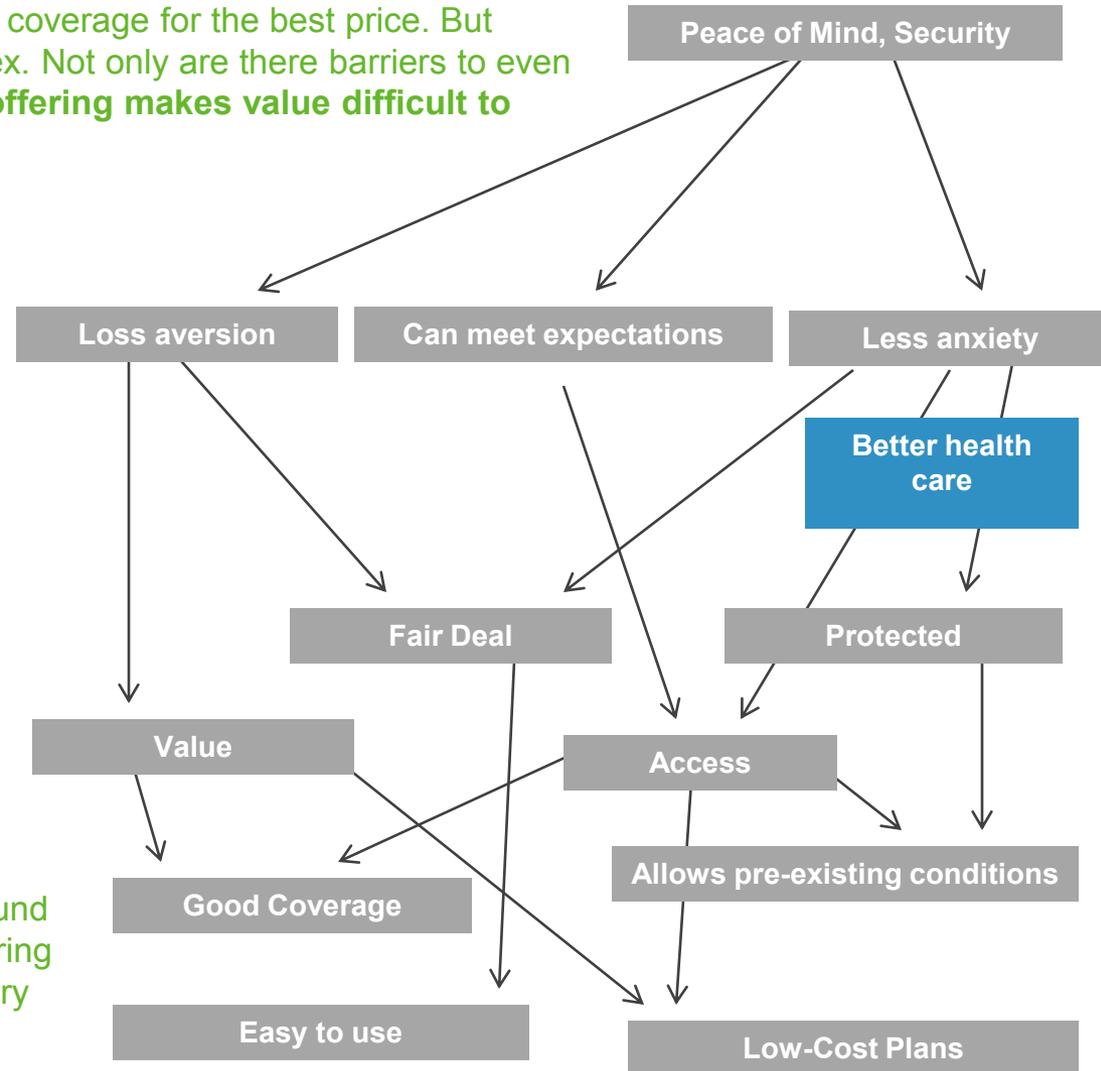
WHAT MIGHT WE DO TO HELP?

Opportunity: Openness to exchange concept

Most participants (though not all) saw potential in an exchange. Even outspoken opponents to "Obamacare" found aspects of the exchange concept appealing.

Nearly everyone wants a better way to shop for health insurance, creating an opening for the exchange concept. In general, people are looking for a better deal, and will view the exchange based on its ability to deliver that.

However, this hope is overshadowed by deep feelings of doubt about a system that leaves nearly everyone – whether they have health insurance or not – feeling cheated.

Widespread skepticism and negative feelings about the health insurance shopping experience means promises that the exchange will make insurance "easy" or "affordable" are likely to be dismissed out of hand.

1/2
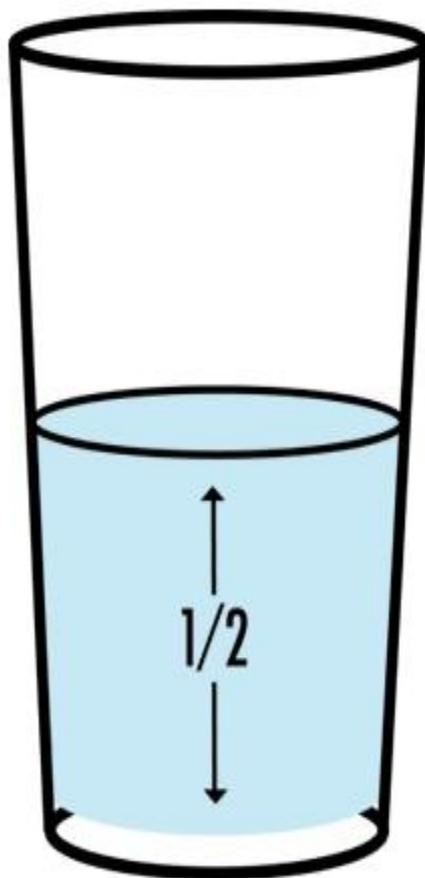
"If saw something that gave me assurance that it is legitimate, I may check it out."
— Non-group policyholder, St. Cloud

"It [the exchange] is a ray of light coming through dark clouds; hope with skepticism."— Small business owner, Twin Cities

"Seems too good to be true. Can you really deliver all that?" — Small business owner, Twin Cities

"I was totally against this when we came in here, but I'm warming up to this idea of employees taking more responsibility in choosing a plan." — Small business owner, Twin Cities

"My gut feeling is that it [the exchange] is another layer of bureaucracy that we don't need. I'd like to see it [the website] because maybe I'm dead-ass wrong." — Small business owner, Duluth

What do we call the exchange?

Participants had a difficult time understanding the connection between "exchange" and health care. Many said it brought to mind images of the New York or Chicago exchanges, which "doesn't get the point across" for health insurance.

Minnesota Health Insurance Exchange	Minnesota Health Choices	Minnesota Health Insurance Marketplace	Health Plans Minnesota	Minnesota Health Connection
PRO *"Things are just bought and sold, more innocent"*	**PRO** *"That's what it is"*	**PRO** *"Direct, simple and to the point. Sounds more professional"*	(Not tested qualitatively)	(Not tested qualitatively)
CON *"Sounds like stocks, which are confusing"*	**CON** *"Wishy washy, not as classy"*	**CON** *"Doesn't sounds like government at all"*		
SE*: **14%**	**32%**	**16%**	**23%**	**14%**
C**: **9%**	**36%**	**17%**	**17%**	**21%**

Consumers preferred this name, but in focus groups, some said it was bland and generic. Few thought it was unclear. Only "Exchange" was seen as confusing.

*Small Employer; **Consumer

What do we call the exchange – in Spanish?

None of the names appeared to translate well into Spanish. "Marketplace" and "Exchange" were rejected by Hispanic respondents as too commercial, which was seen as a bad thing. "Choices" fared better, but was not particularly persuasive either. Their preference: a focus on health.

Marketplace did not translate well for the Hispanic participants, all of whom were currently uninsured but many of whom had previously had insurance through a job. The name "Marketplace" translates as "mercado," which brought to mind a Minneapolis shopping center frequented by Hispanics. This lacks an association with health care and thus sounds a bit silly – it provoked laughter in one group. Participants also disliked "Exchange" which they said sounded like trading.

Hispanic participants also differed from other groups in their strongly adverse reaction to treating health care as a commercial product. These participants intensely disliked the same terms that were so popular in English to the small business owners, words like "shopping" and "compete."

"I think the word 'buy' (comprar) always has a connotation that it's going to be really expensive."

"Saying 'market' sounds like dollar, and that's scary."

"Mercado sounds like Mercado Central [a shopping center in Minneapolis frequented by Hispanics]. Mercado Central for health insurance? No."

Governance

The hybrid option was preferred by most participants the focus groups and large portion of survey respondents.

State Agency

ADVANTAGES

• *State perceived as a having a deeper interest in public welfare*
• *Better coordination with existing state health insurance programs*

"Taking care of people is their job." -- Uninsured resident, Marshall

PROBLEMS

• *Government in general is widely viewed as inefficient*
• *Worries about corruption*

"Anytime a state gets involved, something gets messed up." -- Small business owner, Bemidji

Non-Profit

ADVANTAGES

• *Seen as potentially more neutral. Consumer Reports was widely cited as a model.*

"I think non-profit would create a balance between the state and non-profit agencies." – Uninsured resident, Duluth

PROBLEMS

• *Could have vested interests*
• *"Potential bone-headed board members."*
• *Might lack a "business perspective"*

"How would we know how to trust them?" -- Uninsured resident, Twin Cities

Hybrid

ADVANTAGES

• *Provides checks and balances – state's interest in welfare of the people balanced by neutral party.*

"You can't have it run completely private or completely public or else the chicken's running out of the house." Small business owner, Marshall.

PROBLEMS

• *Concerns about efficiency*

"Subcontractors, etc…Doesn't sounds good." Nongroup insured, St. Cloud

Bar chart:
- State Agency: Consumers 17%, Business 13%
- Hybrid: Consumers 42%, Business 43%
- Non-Profit: Consumers 41%, Business 44%

Legend: ■ Consumers ■ Business
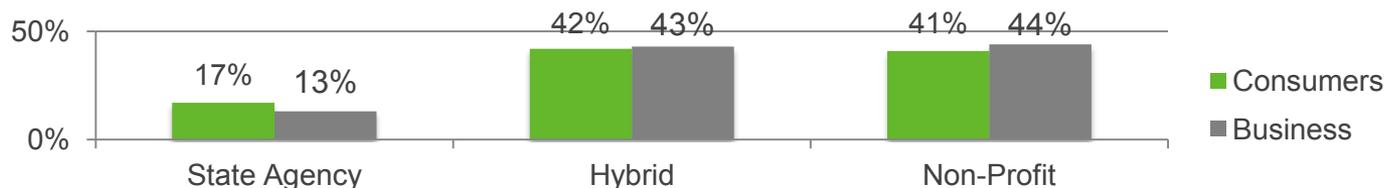
Who should run the exchange?

The state is widely trusted (to an extent) and perceived to be concerned for residents' well-being; it's also seen as inefficient and bungling. A non-profit also raises concerns. Most participants argued for the best of both worlds: a hybrid agency.

PRO
They take care of people as their job

CON
Could become political issue, worry about corruption

State   **Hybrid**   **Non-Profit**

PRO
If a non-profit would function like Consumer Reports it would be great

CON
Potential "bonehead" employees; who's on the board?
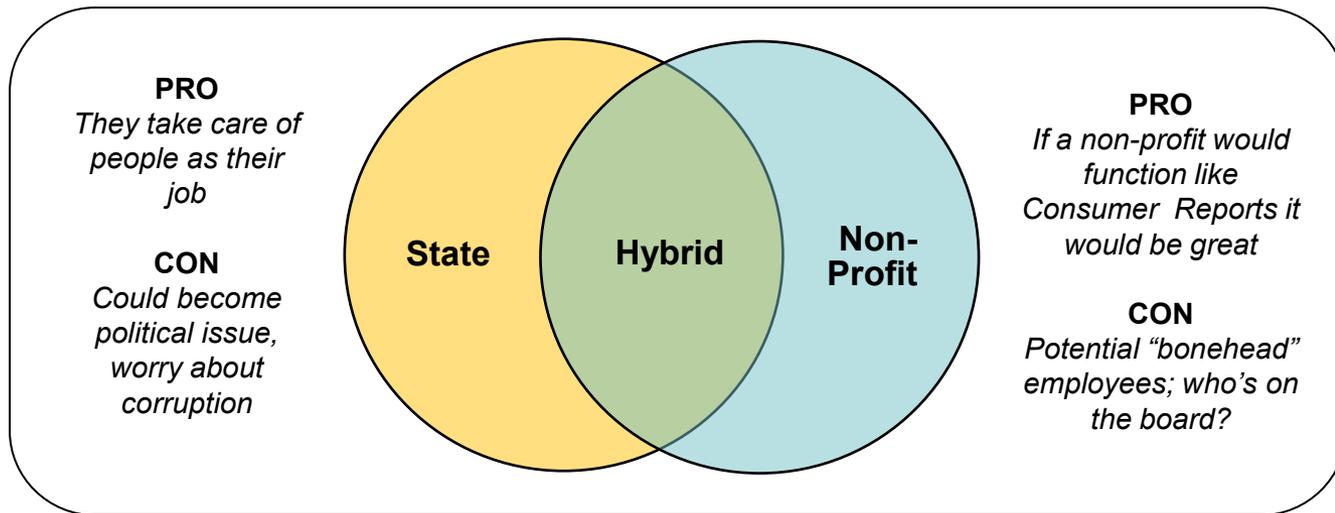
Participants raised issues about housing the exchange in either a state agency or a non-profit. They tended to back a vague hybrid model, one defined as much by what it shouldn't as what it should be. There may not be a perfect structure. The key, regardless of how the exchange is designed, will be addressing the major concerns and emphasizing benefits of the structure chosen.

BENEFITS TO EMPHASIZE

- Accountability
- Minnesota run – close to home
- On the side of consumers

WORRIES TO ADDRESS

- Red tape
- Poor customer service
- Undue influence by insurance industry

Six branding approaches were tested

NO branding or communication firm had been secured at the time of the field work, so we developed six rudimentary branding frames and shared them with consumers for their feedback, Consumers where shown these concepts (order was randomized) and then asked how well each one addressed their needs and concerns.

"RIGHT FIT"

Minnesota wants to help you **find the right health insurance plan for you**. The state is creating a website where you can compare costs and what care is covered. You can explore both private insurance plans and public programs then select the best fit for you. The state is also setting up a toll-free help number and paying "navigators" to help people find the right health insurance plan for them.

"MARKETPLACE"

Minnesota is creating a **new health insurance marketplace**. It is a website where you can compare different health insurance plans and choose the one you like. Private health insurers compete to win your business. Lower-income people can also enroll in public health insurance programs.

"AFFORDABLE"

Minnesota is creating a way to **help people afford health insurance**. It is a website where middle-income people can reduce premiums with tax credits and where lower-income people can secure the insurance they need for free.

"EASY"

Minnesota is creating **an easier way to shop for health insurance**. It is a website that classifies private health insurance plans by how much they cover and lets you compare prices among similar plans. You just select the plan you like best.

"COMPARE"

Minnesota is creating **a better way to compare health insurance options**. It is a website where you can shop and buy health insurance. Plans are put into four levels – bronze, silver, gold and platinum – based on how much they cover. You can compare the monthly costs of similar plans, as well as co-pays and deductibles, and select the plan you like best.

"ONLINE SHOPPING"

Minnesota is creating **an online shopping site for health insurance**. It is a website that provides instant comparisons and allows you to buy a plan at any time. You can purchase insurance directly – no need to sit down with an agent, broker or anyone else.

Key Brand Elements: Competition and "Fit"

Participants liked the "fit for you" core message and appreciated the assistance of the "navigators"; however, they remained suspicious of who was behind the exchange. The "marketplace" core message brought images of actual in-store shopping which felt cheap to some, but also effectively relayed affordability thanks to competition between businesses.

"RIGHT FIT"

Minnesota wants to help you **find the right health insurance plan for you**. The state is creating a website where you can compare costs and what care is covered. You can explore both private insurance plans and public programs then select the best fit for you. The state is also setting up a toll-free help number and paying "navigators" to help people find the right health insurance plan for them.

"Navigators seem like real live people you can talk to."
        — Uninsured resident, Duluth

"MARKETPLACE"

Minnesota is creating a **new health insurance marketplace**. It is a website where you can compare different health insurance plans and choose the one you like. Private health insurers compete to win your business. Lower-income people can also enroll in public health insurance programs.

"Private companies competing for business is good."
        — Uninsured resident, Bemidji

Targeting the "Low-Hanging Fruit"

As the saying goes: "Reinforce base; Persuade Swing." You're not going to get everybody to vote for you. Don't want to waste your time and resources trying to change the minds of the ANTI group. Rather, reinforce your loyal BASE group first, then your next priority is to work on those most likely to be persuaded to vote for your candidate, and that's these folks in the SWING group.

BASE

SWING

ANTI

Very likely to use exchange
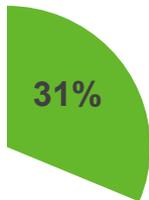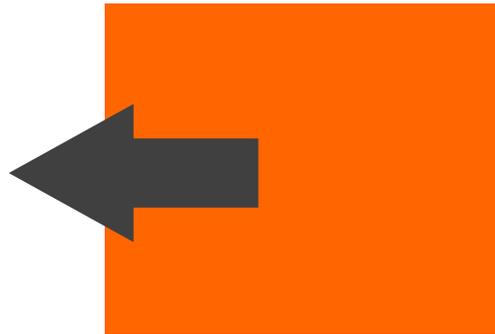
Middle two boxes
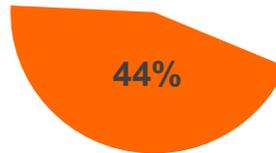
Very unlikely to use exchange

31%

44%
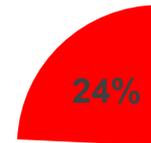
24%

Profile by Level of Interest

Base
- Middle-aged
- Unemployed
- Most educated and online
- Recently uninsured.

Swing
- Younger
- Often employed part-time
- College graduates

Anti
- Tends to be older
- lesser educated,
- Longer-term uninsured
- Online less

	Base	Swing	Anti
Age 25-34	17%	**19%**	11%
Age 35-44	12%	15%	11%
Age 45-54	**35%**	32%	32%
Age 55-64	36%	34%	**45%**
Married	63%	66%	58%
Never married/single	20%	24%	23%
Employed full-time	**39%**	**40%**	33%
Employed part-time	19%	**28%**	18%
Unemployed	17%	11%	19%
High school graduate	18%	23%	**28%**
Some college	27%	30%	**36%**
College graduate	**38%**	**32%**	21%
Uninsured less than 6 months	**25%**	20%	11%
Uninsured 6 months to 2 years	28%	**28%**	16%
Uninsured 2+ years	45%	45%	**57%**
Never had insurance	3%	6%	**17%**
Use internet daily/almost daily	**84%**	71%	43%
Have kids under 18	**38%**	**37%**	23%

Audience Segments

Based on demographics, attitude and behavior, the marketplace can be broken into four distinct segments: Sick and Seeking Help; Not Interested, Not Online; Healthy, But Concerned; Young, Healthy and Confident.

Young, Healthy and Confident, 20%

Tends to be younger, healthier, better educated, employed full-time

Sick and Seeking Help, 19%

Tends to be older, in poor health, unemployed

Healthy, But Concerned, 27%

Tends to be younger, healthier, married with kids, employed part-time

Not Interested, Not Online, 34%

Tends to be older, low income, less educated, retired
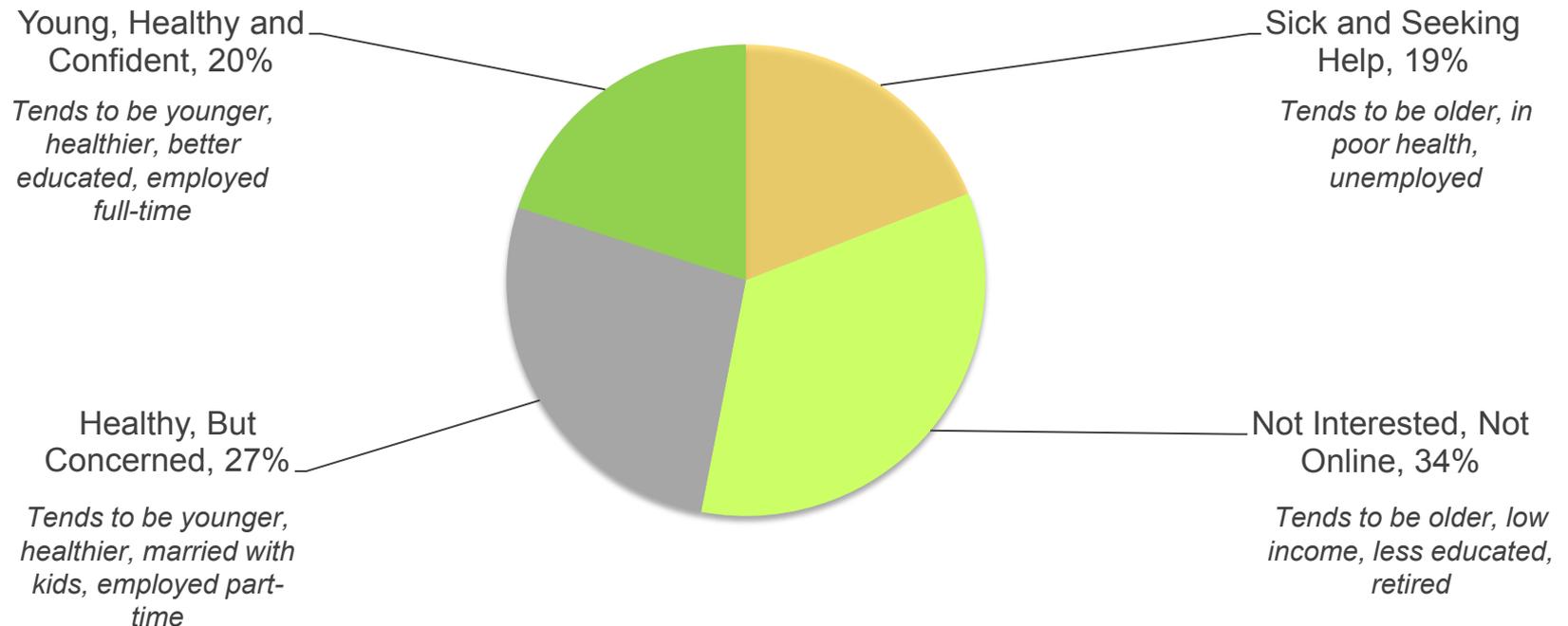
Audience Segments

Unsurprisingly, the segments most in need and interested also make up large portions of the base and swing groups.

- **Sick and Seeking Help (19%)**
  - 98% have chronic condition
  - 71% very dissatisfied

→ **38% Base**   **37% Swing**

- **Not Interested, Not Online (34%)**
  - 74% uninsured for 2+ years
  - 10% use internet daily or almost daily
  - 44% earn $25k or less

→ **47% Anti**

- **Healthy, But Concerned (27%)**
  - 66% considered buying insurance
  - 0% have chronic conditions

→ **33% Base**   **51% Swing**

- **Young, Healthy and Confident (20%)**
  - 46% under 35; 86% under 55
  - 100% think insurance is important, but not necessity

→ **64% Swing**

Audience Segments

As expected, the younger segments tend to very their health status positively among peers. All segments overestimate their uninsured peer population.

Health Status Perceived Norm

	Excellent	Very Good	Good	Fair	Poor
Sick and Seeking Help	3%	23%	28%	28%	18%
Not Interested, Not online	16%	25%	32%	21%	5%
Healthy, But Concerned	20%	35%	32%	9%	4%
Young, Healthy and Confident	23%	42%	23%	11%	1%
Total	16%	31%	29%	17%	7%
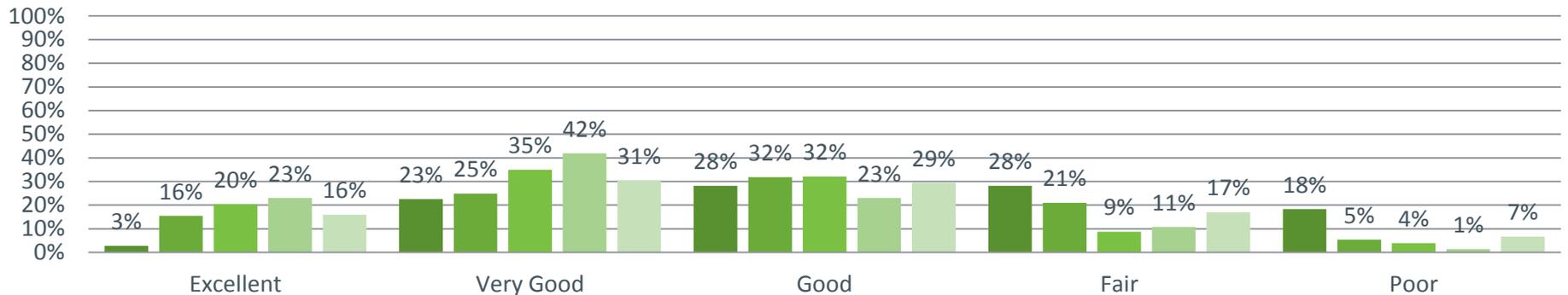
Insurance Status Perceived Norm
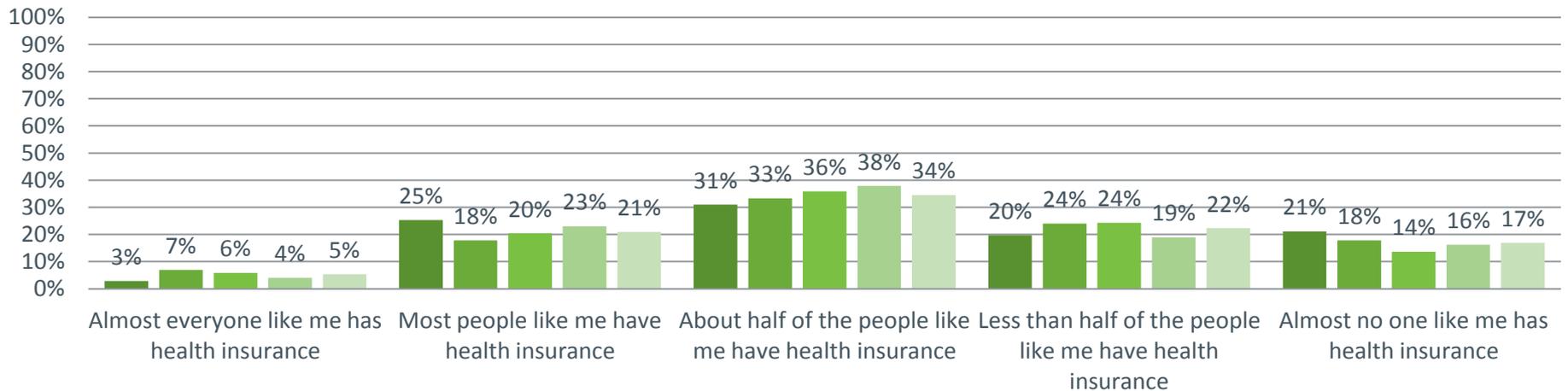
	Almost everyone like me has health insurance	Most people like me have health insurance	About half of the people like me have health insurance	Less than half of the people like me have health insurance	Almost no one like me has health insurance
Sick and Seeking Help	3%	25%	31%	20%	21%
Not Interested, Not online	7%	18%	33%	24%	18%
Healthy, But Concerned	6%	20%	36%	24%	14%
Young, Healthy and Confident	4%	23%	38%	19%	16%
Total	5%	21%	34%	22%	17%

Legend: ■ Sick and Seeking Help ■ Not Interested, Not online ■ Healthy, But Concerned ■ Young, Healthy and Confident ■ Total

Audience Segments

The Sick and Seeking Help are the most dissatisfied with their current situation. Regardless of satisfaction, though, all segments see obtaining insurance as an arduous process.

Satisfaction with Current Insurance Situation

	Very satisfied	Somewhat satisfied	Somewhat dissatisfied	Very dissatisfied
Sick and Seeking Help	8%	3%	17%	72%
Not Interested, Not online	16%	19%	20%	44%
Healthy, But Concerned	4%	15%	17%	64%
Young, Healthy and Confident	7%	16%	22%	55%
Total	10%	14%	19%	57%

Difficulty in Obtaining Insurance

	Very easy	Somewhat easy	Somewhat difficult	Very difficult
Sick and Seeking Help	7%	15%	24%	54%
Not Interested, Not online	16%	13%	23%	48%
Healthy, But Concerned	7%	25%	26%	42%
Young, Healthy and Confident	18%	20%	27%	35%
Total	12%	18%	25%	45%

■ Sick and Seeking Help   ■ Not Interested, Not online   ■ Healthy, But Concerned   ■ Young, Healthy and Confident   ■ Total

Audience Segments

Awareness of the exchange is low across all segments. The Sick and Seeking Help are the most likely to use the exchange, while young people and the uninterested will be the hardest to convince.

Aware of Exchange

	Yes	No
Sick and Seeking Help	20%	80%
Not Interested, Not online	18%	82%
Healthy, But Concerned	30%	70%
Young, Healthy and Confident	27%	73%
Total	23%	77%

Likelihood to Use Exchange

	Very likely	Somewhat likely	Somewhat unlikely	Very unlikely
Sick and Seeking Help	38%	20%	17%	25%
Not Interested, Not online	17%	26%	10%	47%
Healthy, But Concerned	33%	41%	11%	16%
Young, Healthy and Confident	26%	43%	20%	11%
Total	27%	32%	14%	27%

■ Sick and Seeking Help   ■ Not Interested, Not online   ■ Healthy, But Concerned   ■ Young, Healthy and Confident   ■ Total

Audience Segments

Detailed Profile

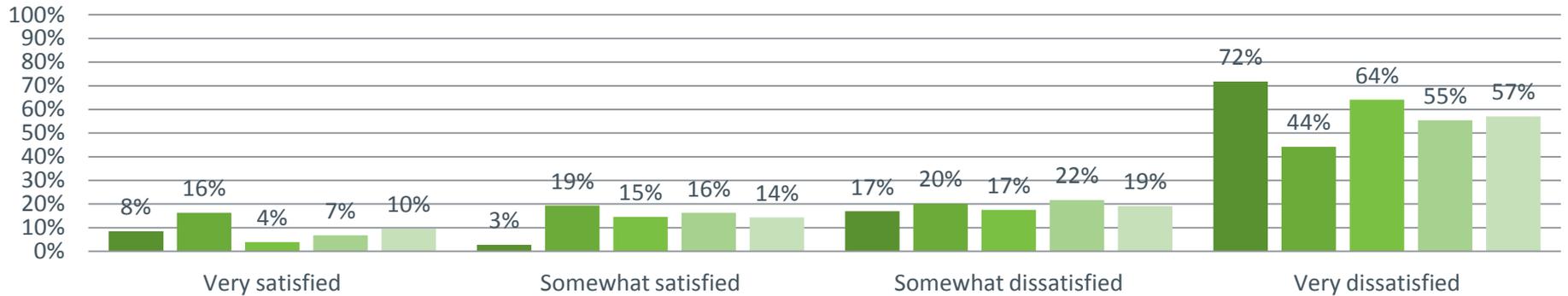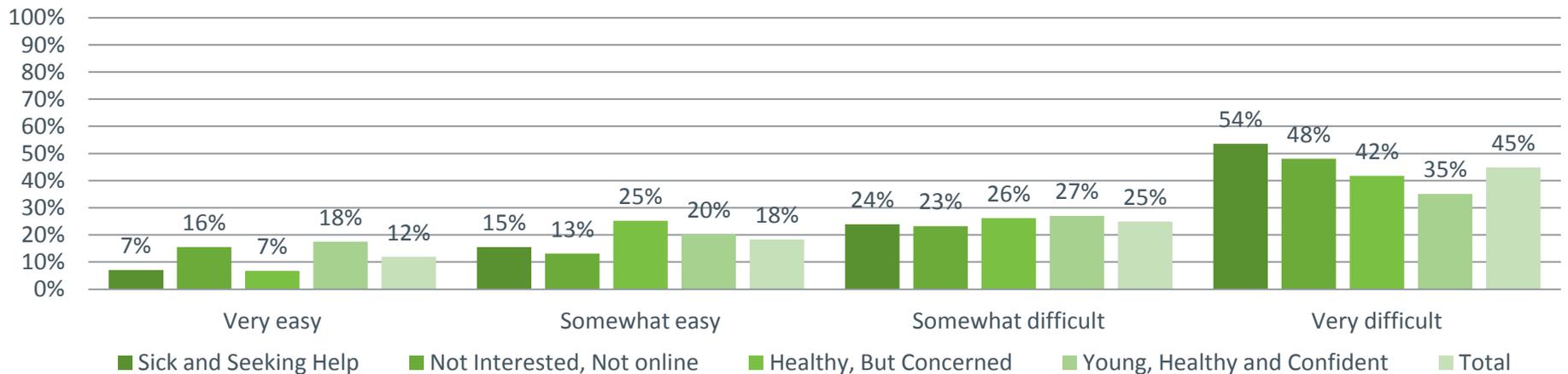|	SSH	NIO	HBC	YHC	Total
18 to 25	--	2%	--	4%	1%
26 to 34	10%	11%	32%	26%	19%
45 to 54	41%	38%	30%	41%	37%
55 to 65	35%	38%	20%	14%	28%
Twin City	46%	33%	34%	43%	38%
Rest of Minnesota	54%	67%	66%	57%	62%
Male	42%	51%	36%	47%	45%
Female	58%	49%	64%	53%	55%
High school graduate	28%	36%	19%	19%	27%
College graduate	25%	16%	34%	39%	27%
African American, Black	8%	5%	4%	3%	5%
White, Caucasian	77%	82%	86%	91%	84%
Hispanic, Latino, Mexican	7%	2%	3%	4%	4%
Up to $15,000	17%	22%	10%	11%	15%
$15,000 up to $25,000	20%	22%	17%	18%	19%
$25,000 up to $35,000	18%	15%	22%	15%	18%
$35,000 up to $50,000	18%	16%	34%	23%	23%
Employed full-time	32%	35%	39%	41%	37%
Employed part-time	20%	23%	33%	26%	26%
Retired	3%	9%	3%	3%	5%
Married	56%	41%	58%	50%	50%
Never married/single	24%	37%	31%	27%	31%
Dependent Children	32%	21%	50%	39%	34%

	SSH	NIO	HBC	YHC	Total
Considered Health Insurance	54%	47%	66%	57%	55%
Shopped Online for Health Insurance	23%	11%	36%	20%	22%
Access Internet Daily or Almost Daily	73%	10%	86%	100%	60%
Have Chronic Health Conditions	99%	23%	--	--	27%
Less than 6 months without insurance	28%	12%	21%	18%	19%
6 months to less than one year	4%	6%	16%	9%	9%
One year to less than two years	18%	8%	19%	22%	16%
More than two years	44%	62%	37%	46%	49%
Never had health insurance	6%	12%	7%	5%	8%
Is a necessity, something I would never give up	69%	30%	65%	--	41%
Is very important, but not a necessity	23%	43%	--	100%	39%
Is good to have, but not all that important	8%	--	35%	--	11%
Has little or no value to me	--	26%	--	--	9%

SSH (Sick and Seeking Help), NIO (Not Interested, Not Online), HBC (Healthy, But Concerned), YHC (Young, Healthy and Confident)

Non-Group Age Differences

Perceptions

	25-34	35-54	55-64
How Difficult to Obtain			
Difficult	46%	63%	70%
Reasons why			
Prices too high	27%	40%	39%
I've been turned down due to a pre-existing condition	4%	10%	20%
It's very confusing	2%	11%	8%
Importance of Insurance			
Is a necessity, something I would never give up	69%	74%	85%
Interest			
CORE	42%	35%	34%
ANTI	15%	19%	24%
Desired Features			
Provides experts to help	37%	46%	53%
A toll-free number	35%	50%	55%
Search tax credits and government assistance	40%	48%	59%
Preferred Call Center Hours			
Monday to Friday morning, between 5 am and 9 am	8%	7%	14%
Monday to Friday evening, between 5 pm and 9 pm	44%	38%	26%

Non-Group Base size: 25-34=52; 35-54=175; 55-64=195

Uninsured Age Differences

Profiles

	25-34	35-54	55-64
Time Uninsured			
Less than 6 months	24%	21%	10%
6 months to less than one year	14%	9%	5%
Internet Use			
Daily or almost daily	79%	61%	45%
To search for information about health and wellness	62%	51%	48%
To manage credit cards, banking, or saving accounts	69%	56%	45%
To connect with people on social networking	74%	52%	37%
LinkedIn	12%	27%	34%
Pinterest	22%	9%	16%
At work	35%	22%	17%
On a mobile device	59%	21%	15%
A smart cell phone, like an iPhone or Blackberry	55%	23%	12%
Demographic			
College graduate	24%	31%	22%
Never married/single	44%	30%	24%
Dependents	58%	40%	8%
Employed full-time	50%	38%	25%
Retired	- -	2%	14%

Uninsured Base size: 25-34=78; 35-54=194; 55-64=105

Non-Group Age Differences

Profiles

	25-34	35-54	55-64
Internet Use			
Daily or almost daily	83%	81%	68%
To search for information about health and wellness	78%	66%	62%
To manage credit cards, banking, or saving accounts	65%	65%	55%
To connect with people on social networking sites	73%	63%	47%
LinkedIn	27%	34%	21%
Pinterest	35%	18%	14%
At work	53%	46%	26%
On a mobile device	45%	33%	20%
A smart cell phone, like an iPhone or Blackberry	49%	30%	12%
Demographic			
College graduate	42%	46%	24%
Never married/single	33%	14%	12%
Dependents	73%	53%	6%
Employed full-time	56%	51%	24%
Retired	2%	4%	35%

Non-Group Base size: 25-34=52; 35-54=175; 55-64=195

Uninsured Age Differences

Perceptions

	25-34	35-54	55-64
Actions Taken			
Seen any advertising for health insurance	74%	72%	89%
Inquired about Medicaid	58%	39%	43%
Contacted an insurance company	33%	34%	44%
Contacted an insurance broker	24%	25%	35%
How Difficult to Obtain			
Difficult	68%	70%	70%
Reasons why			
Prices too high	56%	49%	61%
Difficult to compare benefits across plans	13%	5%	7%
It's very confusing	14%	6%	5%
Interest			
CORE	26%	29%	25%
ANTI	17%	26%	38%
Desired Features			
Compare health insurance plans	46%	58%	43%
Online premium calculator	42%	47%	32%
Preferred Call Center Hours			
Monday to Friday morning, between 5 am and 9 am	5%	7%	15%
Monday to Friday evening, between 5 pm and 9 pm	36%	37%	18%

Uninsured Base size: 25-34=78; 35-54=194; 55-64=105

Uninsured, but Medicaid Qualified

The main barriers for the Uninsured who qualify for Medicaid are lack of information and cost. Acquiring insurance is difficult for them, but they are not proactive. Removing barriers to knowledge and education will be key.

- While a fair share (29%) of respondents have been without insurance for more than 2 years, nearly half lost coverage less than a year ago (45%).
- Three quarters (77%) of respondents remember seeing advertising for health care, but few attempted to acquire insurance or seek information. Ironically, half of respondents inquired about Medicaid (52%).
- Three out of four (74%) respondents are dissatisfied with the current lack of insurance, and a large majority (84%) think acquiring insurance is difficult.
- Eighty percent think health insurance is important, but nearly half (42%) believe the majority of their peers go without it.
- Over half (61%) would be interested in the exchange website, with plan comparison (61%) and tax assistance (55%) as the most important features. These features also reflect the top reasons respondents find the process difficult (high prices and difficult comparison).
- Over half (58%) cite affordability as they're main barrier to coverage.
- Less than a quarter (23%) have chronic conditions requiring coverage.
- Few (10%) feel positive about the future of health care.

Uninsured, but Medicaid Qualified based on children and income=31

Twin Cities vs Rest of State

In many ways, residents of the Twin Cities are very much in-line with the Rest of the State. They each rate features in the same order of importance (to varying degrees). There seems to be more skepticism outside of the Twin Cities, however.

	Twin Cities	Rest of State
During the time you have been uninsured, have you …		
Considered buying health insurance	51%	58%
Inquired about Medicaid	40%	46%
Contacted an insurance company	28%	41%
Contacted an insurance broker	23%	31%
Awareness		
Heard about website that will allows comparison	32%	23%
Interest		
CORE Users	36%	29%
ANTI Users	20%	27%
Governance		
State agency	21%	15%
Non-profit	37%	43%
Online Activities		
To search for information about health and wellness	64%	58%
To manage health insurance	27%	18%

Base sizes: Twin Cities=294;Rest of State=503

Key product features

Participants liked a lot of the features that an exchange might have, but just a a few were very important. Cost, doctor networks, and coverage were deal breakers.

More Important   Less Important

← ———→

DEAL BREAKERS
- Compare co-pays and other charges
- See which doctors and hospitals are in each plan's network
- Compare what is covered by different health plans

MUST HAVES
- Compare premiums
- Sort health plans by cost and coverage.
- Compare health insurance plans based on your personal situation and likely needs
- Pay your premium by credit or debit card
- Progress bar that shows you where you are in the enrollment process
- Useful information about health insurance
- Information about the value and quality of the plans available

NICE TO HAVES
- Web tool that would tell you your likely costs up front – before you apply or register for anything
- Section that explains how health insurance works and how to compare one health plan to another
- Buy health insurance as an entire household, a family, part of a family or just as an individual
- Tool that finds all the payment assistance and tax credits you qualify for and then uses them to instantly reduce your health insurance premium
- Apply for public health insurance programs, such as Medicaid
- Pay your premium with a bank transfer
- Pay your premium by check
- Ranking system for health insurance coverage, splitting all the plans into four levels from highest to lowest.
- Instantly enroll in a health insurance plan without leaving the website

LESS IMPORTANT
- Place to pay your health insurance premium online, through the website, so you do not pay the insurance company directly
- Use whatever tax credits you can to reduce you premium up front, so rather than being reimbursed as part of the tax process you pay a lower premium all year long
- How possible plans compare to the choice others made (e.g. 70% of people like you picked Plan A)
- Limiting the health insurance plans available on the website only to those that meet some minimal standard of coverage
- Get your premium reduced using the advance premium tax credit
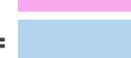- Pay your premium with cash

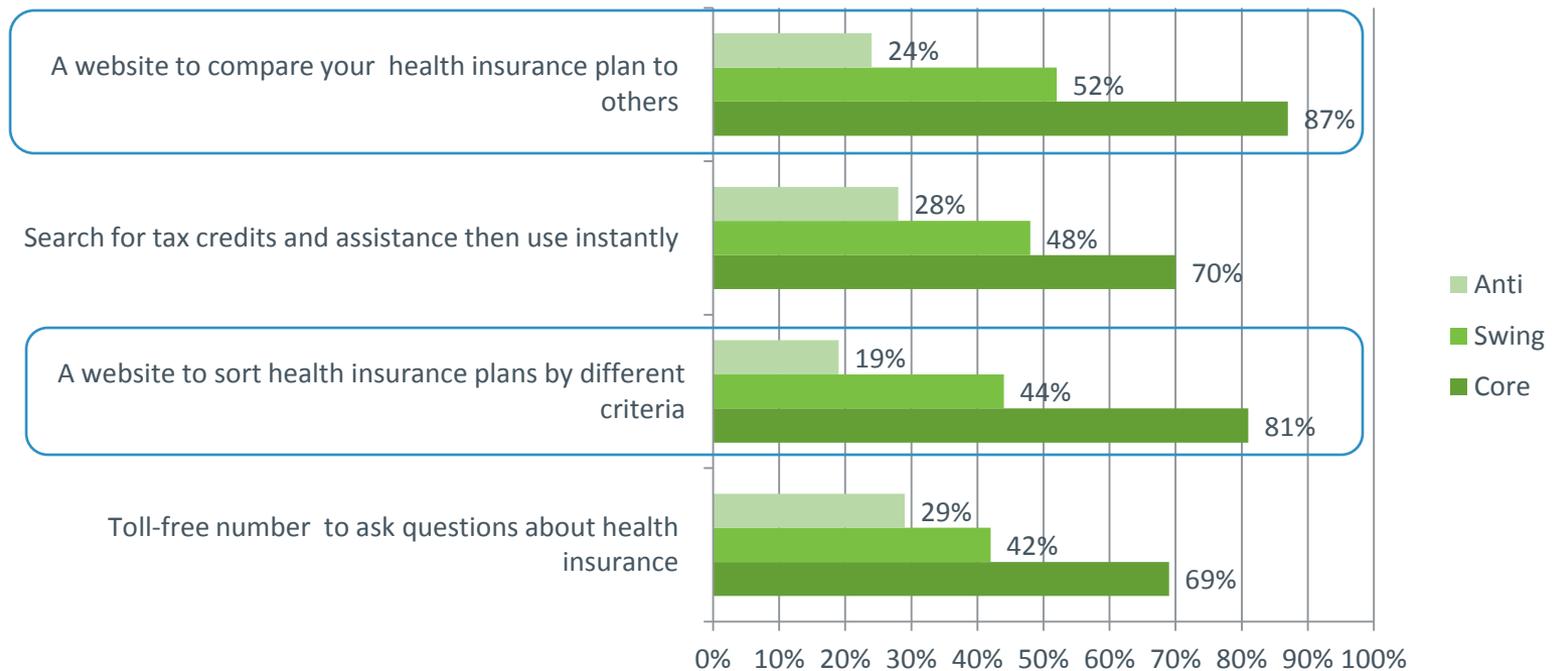**Comparison =** [yellow]

Information = [pink]
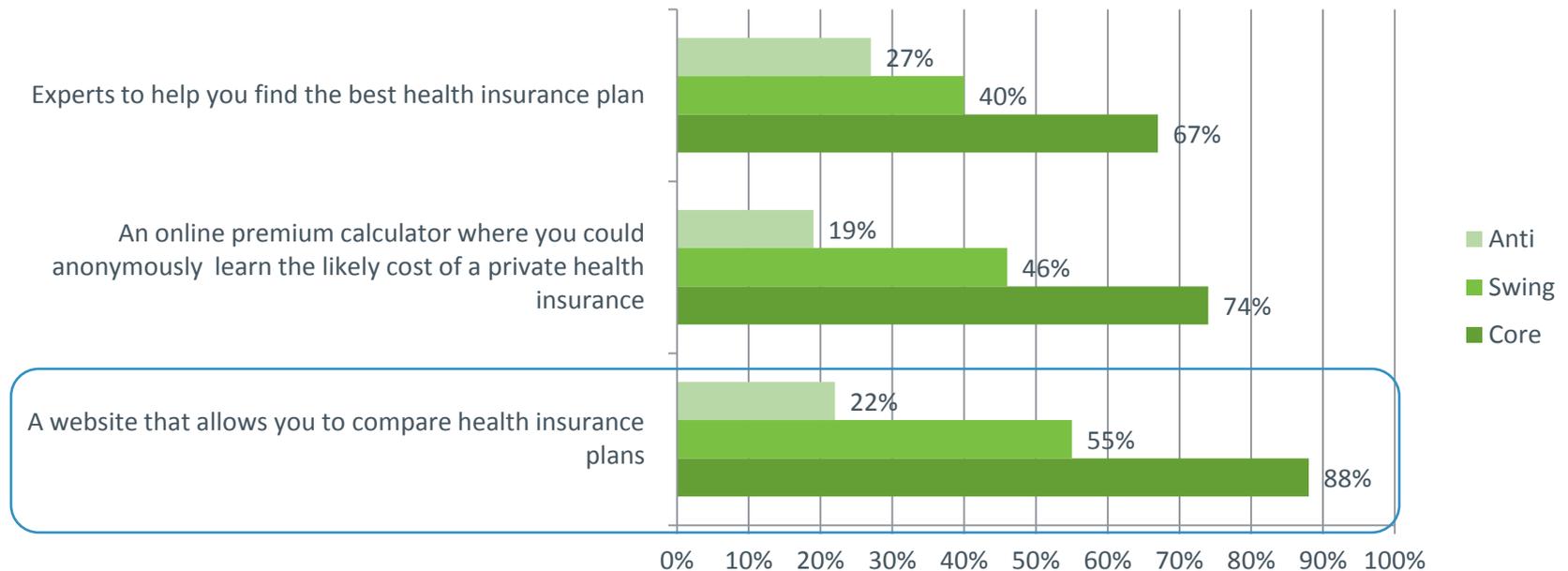
Functionality = [blue]

Appeal of features by segment

A key feature for the core audience segment is being able to compare their current plan to others on the market. Additionally, they're looking for easier ways to organize and examine their options.

A website to compare your health insurance plan to others
- Anti: 24%
- Swing: 52%
- Core: 87%

Search for tax credits and assistance then use instantly
- Anti: 28%
- Swing: 48%
- Core: 70%

A website to sort health insurance plans by different criteria
- Anti: 19%
- Swing: 44%
- Core: 81%

Toll-free number to ask questions about health insurance
- Anti: 29%
- Swing: 42%
- Core: 69%

Legend:
- Anti
- Swing
- Core

X-axis: 0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

Appeal of features by segment

Easily the most popular feature is the ability to compare easily between plans. The swing segment also has some interest in cost saving and analysis tools, like an online premium calculator.

Experts to help you find the best health insurance plan
- Anti: 27%
- Swing: 40%
- Core: 67%

An online premium calculator where you could anonymously learn the likely cost of a private health insurance
- Anti: 19%
- Swing: 46%
- Core: 74%

A website that allows you to compare health insurance plans
- Anti: 22%
- Swing: 55%
- Core: 88%

Legend: Anti, Swing, Core

Another key feature: Service

Customer service will be critical. Health insurance is seen as overwhelmingly complex and intensely personal, with high financial stakes. Participants wanted the option of talking to a human being before making this important and costly decision.

Nearly all of the participants doubted the exchange would be easy to navigate on their own, and although many liked the ability to be able to research plans online, **most participants wanted to be able to be able to talk to someone in person or by phone who could answer individual questions**. However this desire for service was tempered by an understanding of the costs involved. Participants generally did not see the need for 24/7 telephone service, although many expressed a desire for call-center hours that extended beyond the regular business day to include after-dinner hours when many entrepreneurs and others put in extra work time.

"I'd like to sit one-on-one and make sure I didn't miss anything and have answered everything correctly." — Uninsured resident, Duluth

"I would research insurance on the Internet, but I don't think I'd feel comfortable buying it on the Internet. There's something to be said for meeting face-to-face and knowing that someone is accountable for your plan." — Small business owner, Bemidji

"Face-to-face and personal contact is most helpful."
— Small business owner, Twin Cities

"It's a big expense, the premiums are high. You want to speak with someone you know you trust." — Small business owner, Duluth

Final key feature: Quality

At its core, health insurance is a financial services product. As such, most participants largely associate quality with out-of-pocket expenses. Opportunity cost is also related, connecting services covered and plan acceptance with quality.

Cited more as Quality Measure
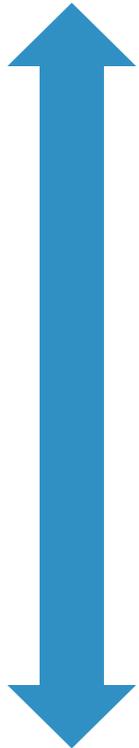
- co-pay costs
- hospitals in network
- diagnostic service costs
- maximum amount covered
- deductible
- services covered
- preferred doctor in plan
- best doctors for the lowest cost
- mental health coverage
- state quality rating of doctors in plan
- pre-existing conditions coverage
- chronic disease management
- prescription drug coverage
- wait time for procedures
- hospital stay costs
- preventative care coverage
- out-of-network costs
- customer service
- efficiency of claims process
- if referrals required
- reputation
- customer reviews of plans

Cited Less

"Hard to know until you actually have it. When you get the bill and find out how much." — Non-group policyholder, Rochester

"Customer service is very important." — Small business owner, Bemidji

"They should have benefits for staying healthy. That would make people change." — Small business owner, St. Cloud

"Does it offer a fair deductible based on the premium?" — Non-group policyholder, St. Cloud

"An 'open plan,' meaning employees can "go anywhere" and choose their own doctor." — Small business owner, Twin Cities

Recommendations

Outreach efforts and communications for the exchange should…

- **Do some outreach NOW.** Goodwill exists if people are brought into process, experts say.
- **Acknowledge the arduous experience** consumers and small businesses go through when seeking insurance to establish empathy.
- **Frame the exchange as a tool that can help bridge a gap for everyone**, but do so in a way that doesn't "over-sell" the benefits and set unrealistic expectations.
- **Recognize the path to being insured is a journey for most people**, so materials should be tailored to address barriers at each stage of the journey.
- **Deal with the issue of cost and trust early in the process**. Consumers are adept at quickly discerning whether something is trustworthy and within their means; if that's not quickly established, we'll lose them. Related, generic terms such as 'affordable' and 'low-cost' are less effective than specific figures.
- **Engage brokers as intermediaries**, as small businesses still want their expertise and advice.
- **Emphasize** two broad aspects of the exchange concept: **personalized (or "right") choices** for consumers and **competition among carriers** (which consumers see as potentially lowering costs).
- Plan to incorporate some variation of **'Marketplace' and/or 'Choices' language** in the exchange name.

APPENDIX

Interview Guide: Small Employers and Brokers

IDI GUIDE: Business groups and Brokers

What are you hearing now, if anything, from small business owners in Minnesota about the new health exchanges? How about health insurance in general?

[If necessary, offer explanation of exchange concept]

What might make it difficult to get small businesses to participate in Minnesota's health exchange once it opens?
PROBE [for each barrier] > Why do you think that?
PROBE [for each barrier] > What might make it easier?
PROBE > What should the state be doing NOW that would lay the groundwork for a successful small business exchange?

What role do you think brokers should have in the Minnesota health exchange?

How might Minnesota engage brokers in promoting both the small business and the individual health insurance exchange?

Thinking specifically about Minnesota, what unanswered questions or concerns about the health exchanges should the state be addressing now, even before the health insurance exchanges begin operating?
　　Are there messages Minnesota should promote now around this concept?

What might be the best way to reach out to small business owners and get them to participate in the health insurance exchange for small business?

Now I want to ask you specifically about online efforts you have seen that tried to help people purchase health insurance. What's worked and what hasn't in Minnesota?
PROBE > Are there lessons that should be applied to the exchanges?

If you were to design an outreach effort for the small business health insurance exchange, what are some of the features you would promote to make it as attractive as possible?
PROBE [for each feature] > Why?
PROBES [to get more features] > What about content on the site? Its format? Its accessibility? The subsidies and tax incentives available? The assistance available?

Do you know of any audience research we could get in Minnesota that might be helpful in our efforts to design and market the new health insurance exchanges? [Secure any data/reports possible]

Interview Guide: Consumers

IDI GUIDE: Consumers / Medicaid / Tribal / Rural/ Diversity

What are you hearing now, if anything, from [consumers / tribal communities / your community] about the new health exchanges Minnesota will open in 2014? How about health reform in general?

[If necessary, offer explanation of exchange concept]

What do you think will be the biggest barriers or challenges to getting [lower-income / African American / Latino] consumers [in rural areas / in tribal communities] to buy or seek out health insurance through an Exchange?
PROBE [for each barrier] > Why do you think that?
PROBE [for each barrier] > How might the state address that challenge? Who might help?
PROBE [for each barrier] > What, if anything, might be communicated about the health exchange to help overcome that challenge? How would you go about communicating that?

What role do you think your organization or organizations like it should have in the Minnesota health exchange? How could organizations like yours make the exchange more successful?

What other organizations or stakeholders will be critical to the success of the Exchange? PROBE [for each organization]: Why do you think that?

Thinking specifically about Minnesota, what unanswered questions or concerns about the health exchanges should the state be addressing now, even before the health insurance exchanges begin operating?
Are there messages Minnesota should promote now around this concept?

What might be the best way to reach out to people who are now uninsured and get as many uninsured people as possible to use the exchange?

Now I want to ask you specifically about online efforts you have seen that tried to help people purchase health insurance. What's worked and what hasn't in Minnesota? PROBE > Are there lessons that should be applied to the exchanges?

If you were to design an outreach effort for either a health insurance exchange, what are some of the features you would promote to make it as attractive as possible? PROBE [for each feature] > Why?
PROBES [to get more features] > What about content on the site? Its format? Its accessibility? The subsidies and tax incentives available? The assistance available?

Do you know of any audience research we could get in Minnesota that might be helpful in our efforts to design and market the new health insurance exchanges? [Secure any data/reports possible]

Interview Guide: Diverse Consumers

IDI GUIDE: Consumers / Diversity

What are you hearing now, if anything, from your community about the new health exchanges Minnesota will open in 2014? How about health reform in general?

What do you think will be the biggest barriers or challenges to getting [African American / Latino/ Asian American/ Native American] consumers to buy or seek out health insurance through an Exchange?
PROBE [for each barrier] > Why do you think that?
PROBE [for each barrier] > How might the state address that challenge? Who might help?
PROBE [for each barrier] > What, if anything, might be communicated about the health exchange to help overcome that challenge? How would you go about communicating that?

What role do you think your organization or organizations like it should have in the Minnesota health exchange? How could organizations like yours make the exchange more successful?

What other organizations or stakeholders will be critical to the success of the Exchange? PROBE [for each organization]: Why do you think that?

Thinking specifically about Minnesota, what unanswered questions or concerns about the health exchanges should the state be addressing now, even before the health insurance exchanges begin operating?
    Are there messages Minnesota should promote now around this concept?

What might be the best way to reach out to people who are now uninsured and get as many uninsured people as possible to use the exchange?

Now I want to ask you specifically about online efforts you have seen that tried to help people purchase health insurance. What's worked and what hasn't in Minnesota?
PROBE > Are there lessons that should be applied to the exchanges?

If you were to design an outreach effort for either a health insurance exchange, what are some of the features you would promote to make it as attractive as possible?
PROBE [for each feature] > Why?
PROBES [to get more features] > What about content on the site? Its format? Its accessibility? The subsidies and tax incentives available? The assistance available?

Do you know of any audience research or other resources specifically relevant to Minnesota's minority populations that might be helpful in our efforts to design and market the new health insurance exchanges? [[List resources, if any]

Interview Guide: Health Plans and Providers

IDI GUIDE: Health Plans and Providers

What are you hearing now, if anything, from providers and insurers about the new state's health exchange? How about health reform in general? [Limit time spent on this question: Just get a list of the top issues related to exchanges].

What do you think will be the biggest barriers or challenges to setting up a health insurance exchanges in Minnesota?
PROBE [for each barrier] > Why do you think that?
PROBE [for each barrier] > Who might help the state address that challenge? Who might help the state do that?
PROBE [for each barrier] > What specifically does the state need to communicate? How would you go about communicating that?

[For health plans only:] Insurers are likely to each approach the new exchanges differently. Can you describe some of the most likely approaches insurers are likely to take? [Probe for different strategies insurers might take. For example: Not participating; using the exchange to break into new markets; etc.]
	Probe > Which of these approaches do you think will be the most popular, and why?

What are the key unanswered questions or concerns [health insurers / providers] have about this new era of health insurance? How should the state be addressing these questions now?

Based on your experience, what are some of the best ways to reach out to the uninsured about health insurance options?

Based on your experience, what are some of the best ways to reach out to small business people about health insurance options?

Now I want to ask you specifically about online efforts you have seen that tried to help people purchase health insurance. What's worked and what hasn't in Minnesota?
PROBE > Are there lessons that should be applied to the exchanges?

If you were to design an outreach effort for the health insurance exchange, what are some of the features you would promote to make it as attractive as possible?
PROBE [for each feature] > Why?
PROBES [to get more features] > What about content on the site? Its format? Its accessibility? The subsidies and tax incentives available? The assistance available?

Do you know of any audience research we could get in Minnesota that might be helpful in our efforts to design and market the new health insurance exchanges? [Get available data / reports]

Focus Group Guide: Small Employer

MODERATOR INTRODUCTION AND EXPLANATION (2 minutes)

    Hi, my name is _____ and I'll be leading this discussion today.

    What we're doing here today is called a focus group – it's a way for researchers to hear your thoughts. My only goal is to get your honest opinions.

    There are no right or wrong answers, and it's really important that I hear what everyone thinks, so please don't be afraid to speak up, even if you disagree with someone else.

Procedure

    Our talk today will be videotaped so that we can hear what everyone says. We'll use the tapes to write a report and to show some other people what you said. But this tape is not being made for broadcast and your name won't be used in the report. Let's wave at the camera/mirror right now and say hi to the people watching.

    Also, while we do want to hear from everyone, please speak one at a time. Otherwise, it's impossible to follow on the tape.

    I have a lot of questions and a very limited amount of time, so sometimes I might have to change the subject or move ahead. I'll come back to earlier points if there's time.

    Also, if you can hand me the page you filled out while waiting, that'd be great.

    Does anyone have any questions?

SELF-INTRODUCTIONS AND WARM-UP (5 minutes)

We'll be talking today about health insurance. Let's start by introducing ourselves. You already know who I am. Everyone here owns a business, so let's go around the table now and have everyone give their name and briefly describe their business. [Name of person to right], you go first.

How many of you offer health insurance to your employees? How many don't offer health insurance?

    [To those who do] Why do you do it?

    [To those who don't] Why are you not offering health insurance?

Have any of you shopped for health insurance in the past five years?

    [If yes] What was that like?

    What made it difficult?

    What could have made it easier?

Do you think most businesses like yours buy health insurance?

        Why do you think that?

CONSIDERATION OF THE CONCEPT (35 minutes)

    Think about your typical day at work. If you were online and you saw there was a new way to shop for health insurance for your employees, how interested would you be in finding out more – very interested, somewhat interested, or not interested at all? [*Get responses from everyone*]

[For those not interested], [NAMES], you said you wouldn't be interested at all. Why do you say that?

>> [Probe to identify high-level barrier]

[For those somewhat or very interested]. For the rest of you, why would you be interested?

>> [Probe to identify high-level goal]

Now, when you think about trying to get health insurance, what image comes to mind? [Get as many descriptions as possible]

Okay, now I want you to write something down. Imagine you heard there was this new way to look for health insurance, but you didn't know anything else. Underline What are the first three questions you would have?

[*Wait, while they write their questions down. Go around the table and have them share their answers. Write down questions on flip chart. Put a check next to what's mentioned more than once. Determine the most popular question*]

It seems most/several of you are interested in _____. Why would that be the first thing you'd want to know?

Okay, let me read you a brief statement as a way to answer your question. [SELECT BEST-FIT CONCEPT STATEMENT.]

Does this statement answer your question – just give me a thumbs-up for yes and thumbs-down for no?

[If no] Why not? What's missing?

What about this statement, if anything, made this new way to shop for health insurance more attractive to you?

Was there anything in the statement that made you think twice about using this service? [If so] What?

[Look back on list to pick next most popular question].

It seems most/several of you are also interested in _____. Let me read you a brief statement as a way to answer your question. [SELECT BEST-FIT STATEMENT.]

Does this statement answer your question – just give me a thumbs-up for yes and thumbs-down for no?

[If no] Why not? What's missing?

[If so] What was it that caught your interest?

What about this statement, if anything, made this new way to shop for health insurance more attractive to you?

Was there anything that made you think twice about using this service? [If so] What?

Given what you've heard so far, underline what else would you want to know? [*Make list of questions on flip chart. Keep pushing for questions until top-of-mind questions are exhausted.*]

I'm going to go around to each of you now and ask which three of these would be most important to you? [*Quickly get this from each participant, asking next two questions before moving to next person. Skip is pushed for time*].

Which of the three would be the single most important question?

Why? [*Skip if pushed for time*]

Okay, now I want to read you some other statements about this new way to shop for health insurance. I'm going to read each one then I'm going to ask you about it.

[READ STATEMENT]

What in this statement makes you more interested in this product? Why?

What makes you think twice about using it? Why?

REPEAT

Of all six of these statements, which would be most likely to get you interested in this product? Why?

Who should organize and operate this new way to shop for health insurance? [Get ideas from everyone].

If it came down to these three options, which would you pick: (1) A state agency, (2) a non-profit or (3) some sort of mix -- A stand-alone organization that combines features of a state agency and a non-profit?

Why?

Would you be okay if this product was also a way for individuals to get health insurance on their own or would you want a separate business-only product? Why?

POSSIBLE NAMES (15 minutes)

In a short phrase or sentence, how would you describe this product to a friend?

Based on what you've heard about this new product – this way to shop for health insurance – what would you call it? *[Wait about 15 seconds for answers. Move past this quickly if no one has bright ideas.]*

[Reveal potential names] Which of these names best describes this product we have been talking about? [*Make sure everyone weighs in.*]

Why do you say that? [for each person]

[Picking the most popular one or two names] What does this name say to you? What does it convey?

Is there any way this name is confusing? How?

PRODUCT FEATURES (10 minutes)

[Reveal scale on flip chart.] Now, I'm going to read you a long list of features. This is a game of sorts: I'll read the name of the feature and you quickly tell me how important it is – is this is must-have feature, a nice-to-have feature or not important at all. [*Use large index cards with features written on them. As each feature is categorized, put it in a pile.*]

Now, let's look at some of these. [*Focus especially on the "must-must" haves – the ones which evoked a strong response – as well as those that sparked disagreement of which category it belonged in*].

Which of these might get you to use this new website?

Why?

Any others that would get you to use the website? Why?

CONVEYING PRICE AND QUALITY (15 minutes)

Do you think, once health reform fully kicks in, that health insurance premiums will be higher, lower or stay about the same?

Why do you think that? [*The key here is to get the source of their information. Please quickly more on and discourage political debate]*

Now let's talk about how to tell if you've got a good quality health insurance plan. What measures do you use to judge the quality of a health plan. [*Try to get steer them away from price. Write them on the flipchart, then add some from the list if necessary*.].

OK now we're going to choose which ones you think are most important. You each have five stickers in front of you. I'm going to leave the room now, and I want you to pick the five measures of quality that are most important to you. Put a sticker next to each one that's most important to you. Does everyone understand the assignment? [Check for agreement, then leave the room to check-in with client].

[*Moderator can leave room to check with client on additional questions while these choices are being made*].

[Upon returning] It looks like _____ , _____ and _____ were very important to many of you. Let's talk about _____.
[Skip the obvious ones ('Plan includes my doctor'] and focus on issues where probes make sense].
    Why was this choice important to your choice of health plan?
    [If this question makes sense]: How would you use this information in your decision-making?
[Repeat for top three or four choices where probes make sense].

TRUSTED SOURCES (5 minutes)
    We're almost done. Now, I want to go around the table again and ask each of you two questions:
        Have any of you used a broker when shopping for health insurance?
            For those of you who have, what role – if any – would you want your broker to play in this process once this insurance-shopping site exists?
            Would you consider paying a broker directly to help you with this or would you prefer the broker rely on a commission? Why?
        What are your favorite ways to get information about issues like health insurance? Are there certain people, organizations or publications that you turn to?
            PROBE >> Anyone else?

CLOSING (3 minutes)
    Are there any other questions you have about this product?
    Okay a few last questions for each of you: After hearing all you've heard today/tonight, what image comes to mind when you think about using this new way to shop for health insurance?
    How likely would you be to use this website?
        Why or Why not?
        What one thing would get you to use it?

THANK AND DISMISS

Focus Group Guide: Medicaid

MODERATOR INTRODUCTION AND EXPLANATION (2 minutes)

Hi, my name is _____ and I'll be leading this discussion today.

What we're doing here today is called a focus group – it's a way for researchers to hear your thoughts. My only goal is to get your honest opinions.

There are no right or wrong answers, and it's really important that I hear what everyone thinks, so please don't be afraid to speak up, even if you disagree with someone else.

Procedure

Our talk today will be videotaped so that we can hear what everyone says. We'll use the tapes to write a report and to show some other people what you said. But this tape is not being made for broadcast and your name won't be used in the report.

Also, while we do want to hear from everyone, please speak one at a time. Otherwise, it's impossible to follow on the tape.

I have a lot of questions and a very limited amount of time, so sometimes I might have to change the subject or move ahead. I'll come back to earlier points if there's time.

Also, if you can hand me the page you filled out while waiting, that'd be great.

Does anyone have any questions?

SELF-INTRODUCTIONS AND WARM-UP (5 minutes)

We'll be talking today about health insurance and Medicaid. Let's start by introducing ourselves. You already know who I am. Let's go around the table now and meet everyone. Just tell me your first name, what you do for fun, and what's the first thing that comes to your mind when you think about Medicaid. [*Name of person to right*], you go first.

Have any of you looked into getting health insurance besides Medicaid in the past five years?

[If yes] What was that like?

What made it difficult?

What could have made it easier?

Why did you end up not getting insurance?

Do you think most people like you have health insurance, through Medicaid or some other way?

What makes you think that?

CONSIDERATION OF THE CONCEPT (35 minutes)

How many of you have a computer and can go online at home?

[*For those without home Internet access*] Do you have access to the Internet at work?

[*If no access at work*] Where do you go to get access to the Internet?

How many of you have shopped online? [*Note who has and who had not shopped online. Skip is pressed for time*].

Think about your day-to-day life. If you were online and you saw there was a new way to look into enrolling in Medicaid, how interested would you

be in finding out more – very interested, somewhat interested, or not interested at all? [*Get responses from everyone*]

[For those not interested], [NAMES], you said you wouldn't be interested at all. Why do you say that?

>> [Probe to identify high-level barrier.]

[For those somewhat or very interested]. For the rest of you, why would you be interested?

>> [Probe to identify high-level goal.]

Now, when you think about trying to enroll in Medicaid, what image comes to mind? [Get as many descriptions as possible]

Okay, now I want you to write something down. Imagine you heard there was this new way to shop for insurance plans including Medicaid, but you didn't know anything else. What are the first three questions you would have?

[*Wait, while they write their questions down. Go around the table and have them share their answers. Write down questions on flip chart. Put a check next to what's mentioned more than once. Determine the most popular question*]

It seems most/several of you are interested in _____. Why would that be the first thing you'd want to know?

Okay, let me read you a brief statement as a way to answer your question. [SELECT BEST_FIT CONCEPT STATEMENT.]

Does this statement answer your question – just give me a thumbs-up for yes and thumbs-down for no?

[If no] Why not? What's missing?

What about this statement, if anything, made this new way to shop for health insurance more attractive to you?

Was there anything in the statement that made you think twice about using this service? [If so] What?

[Look back on list to pick next most popular question].

It seems most/several of you are also interested in _____. Let me read you a brief statement as a way to answer your question. [SELECT BEST_FIT CONCEPT STATEMENT.]

Does this statement answer your question – just give me a thumbs-up for yes and thumbs-down for no?

[If no] Why not? What's missing?

What about this statement, if anything, made this new way to shop for health insurance and Medicaid more attractive to you?

Was there anything that made you think twice about using this service? [If so] What?

Given what you've heard so far, what else would you want to know? [*Make list of questions on flip chart. Keep pushing for questions until top-of-mind questions are exhausted.*]

I'm going to go around to each of you now and ask which three of these would be most important to you? *[Quickly get this from each participant, asking next two questions before moving to next person. Skip is pushed for time]*.

Which of the three would be the single most important question?

Why? [*Skip if pushed for time*]

Okay, now I want to show you some other statements about this new way to shop for health insurance, including Medicaid. [Pass them out one at a time]. I'm going to read each one then I'm going to ask you about it.

[READ STATEMENT]

What in this statement makes you more interested in this product? Why?

What makes you think twice about using it? Why?

REPEAT

Of all six of these statements, which would be most likely to get you interested in this product? Why?

Who should organize and operate this new way to shop for health insurance and Medicaid? [Get ideas from everyone].

If it came down to these three options, which would you pick: (1) A state agency, (2) a non-profit or (3) some sort of mix -- A stand-alone organization that combines features of a state agency and a non-profit?

Why?

POSSIBLE NAMES (15 minutes)

In a short phrase or sentence, how would you describe this product to a friend?

Based on what you've heard about this new product – this way to shop for health insurance – what would you call it? *[Wait about 15 seconds for answers. Move past this quickly if no one has bright ideas.]*

[Reveal potential names] Which of these names best describes this product we have been talking about? [*Make sure everyone weighs in.*]

Why do you say that? [for each person]

[Picking the most popular one or two names] What does this name say to you? What does it convey?

Is there any way this name is confusing? How?

PRODUCT FEATURES (10 minutes) start with benefits then go to associated features

[Reveal scale on flip chart.] Now, I'm going to read you a long list of features. This is a game of sorts: I'll read the name of the feature and you quickly tell me how important it is – is this is must-have feature, a nice-to-have feature or not important at all. [*Use large index cards with features written on them. As each feature is categorized, put it in a pile.*]

Now, let's look at what you put in the must-have pile. [Read each one]. Which of these might get you to use this new website?

Why?

Any others that would get you to use the website? Why?

CONVEYING PRICE AND QUALITY (15 minutes)

Do you think once health reform fully kicks in, that most health insurance premiums will be higher, lower or stay about the same? How do you think it will affect Medicaid?

Why do you think that?

[*Pass out home page examples. The page includes several paths to learn more about price and value.*] Imagine this is the new website. We know this page is too crowded with options. What we want to know is which option is the most useful to you. So, if you visited this page, which button you would push first and why?

Where would that button lead?

What is not here that you would like to see? [Skip if pressed for time]

[Reveal list of different measure of plan quality (e.g., 'includes your doctor,' 'lower co-pays,' etc.).]. You each have five stickers in front of you and on the wall here is a list of 15 ways you might judge the quality of a health insurance plan. I'm going to leave the room now, and I want you to pick

the five measures of quality that are most important to you. Put a sticker next to each one that's most important to you. Does everyone understand the assignment? [Check for agreement, then leave the room to check-in with client].

[*Moderator can leave room to check with client on additional questions while these choices are being made*].

[Upon returning] It looks like _____ , _____ and _____ were very important to many of you. Let's talk about _____.
[Skip the obvious ones ('Plan includes my doctor'] and focus on issues where probes make sense].
    Why was this choice important to your choice of health plan?
    [If this question makes sense]: How would you use this information in your decision-making?
[Repeat for top three or four choices where probes make sense].
Is there another important quality measure that should be here?.

TRUSTED SOURCES (5 minutes)
    We're almost done. Now, I want to go around the table again and ask each of you two questions:
        What is your favorite way to get information about issues like health insurance? Are there certain people, organizations or publications that you turn to?
            PROBE >> Anyone else?
        What organizations or businesses would you trust to help you enroll in something like this?
            PROBE >> Any others?

CLOSING (3 minutes)
    Are there any other questions you have about this product?
    Okay one last question for each of you: After hearing all you've heard today/tonight, how likely would you be to use this website?
        Why or Why not?
        What one thing would get you to use it?

THANK AND DISMISS

Focus Group Guide: Non-Group

INTRODUCTION AND EXPLANATION (2 minutes)

    Hi, my name is _____ and I'll be leading this discussion today.

    What we're doing here today is called a focus group – it's a way for researchers to hear your thoughts. My only goal is to get your honest opinions.

    There are no right or wrong answers, and it's really important that I hear what everyone thinks, so please don't be afraid to speak up, even if you disagree with someone else.

Procedure

    Our talk today will be videotaped so that we can hear what everyone says. We'll use the tapes to write a report and to show some other people what you said. But this tape is not being made for broadcast and your name won't be used in the report.

    Also, while we do want to hear from everyone, please speak one at a time. Otherwise, it's impossible to follow on the tape.

    I have a lot of questions and a very limited amount of time, so sometimes I might have to change the subject or move ahead. I'll come back to earlier points if there's time.

    Also, if you can all hand me the page you filled out while waiting, that'd be great.

    Does anyone have any questions?

SELF-INTRODUCTIONS AND WARM-UP (5 minutes)

We're going to be talking today about shopping for health insurance. Let's start by introducing ourselves. You already know who I am. Now, I'd like to go around the table and have each of you tell me your first name, what you do for fun and when was the last time you shopped for health insurance. [*Name of person to right*], you go first.

    What makes shopping for health insurance difficult?

    What could make it easier?

    Why buy health insurance at all?

    Do you think most people like you buy health insurance? What makes you think that?

CONSIDERATION OF THE CONCEPT (35 minutes)

How many of you have a computer and can go online at home?

    [*For those without home Internet access*] Do you have access to the Internet at work?

    [*If no access at work*] Where do you go to get access to the Internet?

How many of you have shopped online? [*Note who has and who had not shopped online. Skip is pressed for time*].

Here's a list of things you can buy online. Just with a show of hands, can you tell me if you would buy this online? [Skip if pressed for time]

    [If not] why not?

Think about your day-to-day life. If you were online and you saw there was a new way to look into getting health insurance, <u>how interested would you be in finding out more</u> – very interested, somewhat interested, or not interested at all? [*Get responses from everyone*]

Focus Group Guide: Non-Group

[For those not interested], [NAMES], you said you wouldn't be interested at all. Why do you say that?

>> [Probe to identify high-level barrier.]

[For those somewhat or very interested]. For the rest of you, why would you be interested?

>> [Probe to identify high-level goal.]

Now, when you think about trying to get health insurance, what comes to mind? [Get as many descriptions as possible]

Okay, now I want you to write something down. Imagine you heard there was this new way to look for health insurance, but you didn't know anything else. <u>What are the first three questions you would have</u>?

[*Wait, while they write their questions down. Go around the table and have them share their answers. Write down questions on flip chart. Put a check next to what's mentioned more than once. Determine the most popular question*]

It seems most/several of you are interested in _____. Why would that be the first thing you'd want to know?

Okay, let me read you a brief statement as a way to answer your question. [SELECT BEST-FIT CONCEPT STATEMENT.]

Does this statement answer your question – just give me a thumbs-up for yes and thumbs-down for no?

[If no] Why not? What's missing?

What about this statement, if anything, made this new way to shop for health insurance more attractive to you?

Was there anything in the statement that made you think twice about using this service? [If so] What?

[Look back on list to pick next most popular question].

It seems most/several of you are also interested in _____. Let me read you a brief statement as a way to answer your question. [SELECT BEST-FIT CONCEPT STATEMENT.]

Does this statement answer your question – just give me a thumbs-up for yes and thumbs-down for no?

[If no] Why not? What's missing?

What about this statement, if anything, made this new way to shop for health insurance more attractive to you?

Was there anything that made you think twice about using this service? [If so] What?

Given what you've heard so far, <u>what else would you want to know</u>? [*Make list of questions on flip chart. Keep pushing for questions until top-of-mind questions are exhausted.]*

I'm going to go around to each of you now and ask which three of these would be most important to you? *[Quickly get this from each participant, asking next two questions before moving to next person. Skip is pushed for time]*.

Which of the three would be the single most important question?

Why? [*Skip if pushed for time*]

Okay, now I want to read you some other statements about this new way to shop for health insurance and then I'm going to ask you about it.

[READ STATEMENT]

What in this statement makes you more interested in this product? Why?

What makes you think twice about using it? Why?

REPEAT

Of all six of these statements, which would be most likely to get you interested in this product? Why?

Who should organize and operate this new way to shop for health insurance? [Get ideas from everyone].

If it came down to these three options, which would you pick: (1) A state agency, (2) a non-profit or (3) some sort of mix -- A stand-alone organization that combines features of a state agency and a non-profit?
Why?

POSSIBLE NAMES (15 minutes)

In a short phrase or sentence, how would you describe this product to a friend?
Based on what you've heard about this new product – this way to shop for health insurance – what would you call it? *[Wait about 15 seconds for answers. Move past this quickly if no one has bright ideas.]*

[Reveal potential names] Which of these names best describes this product we have been talking about? [*Make sure everyone weighs in.*]
Why do you say that? [for each person]
[Picking the most popular one or two names] What does this name say to you? What does it convey?
Is there any way this name is confusing? How?

PRODUCT FEATURES (10 minutes) start with benefits then go to associated features

[Reveal scale on flip chart.] Now, I'm going to read you a long list of features. This is a game of sorts: I'll read the name of the feature and you quickly tell me how important it is – is this is must-have feature, a nice-to-have feature or not important at all. [*Use large index cards with features written on them. As each feature is categorized, put it in a pile.*]
Now, let's look at some of these. [*Focus especially on the "must-must" haves – the ones which evoked a strong response – as well as those that sparked disagreement of which category it belonged in*].
Which of these might get you to use this new website?
Why?
Any others that would get you to use the website? Why?

CONVEYING PRICE AND QUALITY (15 minutes)

Do you think once health reform fully kicks in, that health insurance premiums will be higher, lower or stay about the same?
Why do you think that?
[*Pass out home page examples. The page includes several paths to learn more about price and value.]* Imagine this is the new website. We know this page is too crowded with options. What we want to know is which option is the most useful to you. So, if you visited this page, which button you would push first and why?
Where would that button lead?
What is not here that you would like to see? [Skip if pressed for time]
Now let's talk about how to tell if you've got a good quality health insurance plan. What measures do you use to judge the quality of a health plan?
[*Try to get steer them away from price. Write them on the flipchart, then add some from the list if necessary*.].
OK now we're going to choose which ones you think are most important. You each have five stickers in front of you. I'm going to leave the room

Focus Group Guide: Non-Group

now, and I want you to pick the five measures of quality that are most important to you. Put a sticker next to each one that's most important to you. Does everyone understand the assignment? [Check for agreement, then leave the room to check-in with client].

[*Moderator can leave room to check with client on additional questions while these choices are being made*].

[Upon returning] It looks like _____ , _____ and _____ were very important to many of you. Let's talk about _____.
[Skip the obvious ones ('Plan includes my doctor'] and focus on issues where probes make sense].
    Why was this choice important to your choice of health plan?
    [If this question makes sense]: How would you use this information in your decision-making?
[Repeat for top three or four choices where probes make sense].
Is there another important quality measure that should be here?.

TRUSTED SOURCES (5 minutes)
We're almost done. Now, I want to go around the table again and ask each of you two questions:
    What is your favorite way to get information about issues like health insurance? Are there certain people, organizations or publications that you turn to?
        PROBE >> Anyone else?
    What organizations or businesses would you trust to help you enroll in something like this?
        PROBE >> Any others?

CLOSING (3 minutes)
Are there any other questions you have about this product?
Okay a few last questions for each of you: After hearing all you've heard today/tonight, what image comes to mind when you think about using this new way to shop for health insurance?
How likely would you be to use this website?
    Why or Why not?
    What one thing would get you to use it?

THANK AND DISMISS

Focus Group Guide: Uninsured

MODERATOR INTRODUCTION AND EXPLANATION (2 minutes)

Hi, my name is _____ and I'll be leading this discussion today.

What we're doing here today is called a focus group – it's a way for researchers to hear your thoughts. My only goal is to get your honest opinions.

There are no right or wrong answers, and it's really important that I hear what everyone thinks, so please don't be afraid to speak up, even if you disagree with someone else.

Procedure

Our talk today will be videotaped so that we can hear what everyone says. We'll use the tapes to write a report and to show some other people what you said. But this tape is not being made for broadcast and your name won't be used in the report.

Also, while we do want to hear from everyone, please speak one at a time. Otherwise, it's impossible to follow on the tape.

I have a lot of questions and a very limited amount of time, so sometimes I might have to change the subject or move ahead. I'll come back to earlier points if there's time.

Also, if you can hand me the page you filled out while waiting, that'd be great.

Does anyone have any questions?

SELF-INTRODUCTIONS AND WARM-UP (5 minutes)

We'll be talking today about health insurance. Let's start by introducing ourselves. You already know who I am. Let's go around the table now and meet everyone. Just tell me your first name, what you do for fun and when – if ever – you last had health insurance. [*Name of person to right*], you go first.

Have any of you looked into getting for health insurance in the past five years?

[If yes] What was that like?

What made it difficult?

What could have made it easier?

Why did you end up not getting insurance?

Do you think most people like you buy health insurance?

What makes you think that?

CONSIDERATION OF THE CONCEPT (35 minutes)

How many of you have a computer and can go online at home?

[*For those without home Internet access*] Do you have access to the Internet at work?

[*If no access at work*] Where do you go to get access to the Internet?

How many of you have shopped online? [*Note who has and who had not shopped online. Skip is pressed for time*].

Here's a list of things you can buy online. Just with a show of hands, can you tell me if you would buy this online? [Skip if pressed for time]

[If not] why not?

Think about your day-to-day life. If you were online and you saw there was a new way to look into getting health insurance, how interested would you be in finding out more – very interested, somewhat interested, or not interested at all? [*Get responses from everyone*]

[For those not interested], [NAMES], you said you wouldn't be interested at all. Why do you say that?

>> [Probe to identify high-level barrier.]

[For those somewhat or very interested]. For the rest of you, why would you be interested?

>> [Probe to identify high-level goal.]

Now, when you think about trying to get health insurance, what comes to mind? [Get as many descriptions as possible]

Okay, now I want you to write something down. Imagine you heard there was this new way to look for health insurance, but you didn't know anything else. What are the first three questions you would have?

[*Wait, while they write their questions down. Go around the table and have them share their answers. Write down questions on flip chart. Put a check next to what's mentioned more than once. Determine the most popular question*]

It seems most/several of you are interested in _____. Why would that be the first thing you'd want to know?

Okay, let me read you a brief statement as a way to answer your question. [SELECT BEST-FIT CONCEPT STATEMENT.]

Does this statement answer your question – just give me a thumbs-up for yes and thumbs-down for no?

[If no] Why not? What's missing?

What about this statement, if anything, made this new way to shop for health insurance more attractive to you?

Was there anything in the statement that made you think twice about using this service? [If so] What?

[Look back on list to pick next most popular question].

It seems most/several of you are also interested in _____. Let me read you a brief statement as a way to answer your question. [SELECT BEST-FIT CONCEPT STATEMENT.]

Does this statement answer your question – just give me a thumbs-up for yes and thumbs-down for no?

[If no] Why not? What's missing?

What about this statement, if anything, made this new way to shop for health insurance more attractive to you?

Was there anything that made you think twice about using this service? [If so] What?

Given what you've heard so far, what else would you want to know? [*Make list of questions on flip chart. Keep pushing for questions until top-of-mind questions are exhausted.*]

I'm going to go around to each of you now and ask which three of these would be most important to you? [*Quickly get this from each participant, asking next two questions before moving to next person. Skip is pushed for time*].

Which of the three would be the single most important question?

Why? [*Skip if pushed for time*]

Okay, now I want to read you some other statements about this new way to shop for health insurance and then I'm going to ask you about it.

[READ STATEMENT]

What in this statement makes you more interested in this product? Why?

What makes you think twice about using it? Why?

REPEAT

Of all six of these statements, which would be most likely to get you interested in this product? Why?

Who should organize and operate this new way to shop for health insurance? [Get ideas from everyone].

If it came down to these three options, which would you pick: (1) A state agency, (2) a non-profit or (3) some sort of mix -- A stand-alone organization that combines features of a state agency and a non-profit?

Why?

POSSIBLE NAMES (15 minutes)

In a short phrase or sentence, how would you describe this product to a friend?

Based on what you've heard about this new product – this way to shop for health insurance – what would you call it? *[Wait about 15 seconds for answers. Move past this quickly if no one has bright ideas.]*

[Reveal potential names] Which of these names best describes this product we have been talking about? [*Make sure everyone weighs in.*]

Why do you say that? [for each person]

[Picking the most popular one or two names] What does this name say to you? What does it convey?

Is there any way this name is confusing? How?

PRODUCT FEATURES (10 minutes) start with benefits then go to associated features

[Reveal scale on flip chart.] Now, I'm going to read you a long list of features. This is a game of sorts: I'll read the name of the feature and you quickly tell me how important it is – is this is must-have feature, a nice-to-have feature or not important at all. [*Use large index cards with features written on them. As each feature is categorized, put it in a pile.*]

Now, let's look at some of these. [*Focus especially on the "must-must" haves – the ones which evoked a strong response – as well as those that sparked disagreement of which category it belonged in*].

Which of these might get you to use this new website?

Why?

Any others that would get you to use the website? Why?

CONVEYING PRICE AND QUALITY (15 minutes)

Do you think once health reform fully kicks in, that health insurance premiums will be higher, lower or stay about the same?

Why do you think that?

[*Pass out home page examples. The page includes several paths to learn more about price and value.*] Imagine this is the new website. We know this page is too crowded with options. What we want to know is which option is the most useful to you. So, if you visited this page, which button you would push first and why?

Where would that button lead?

What is not here that you would like to see? [Skip if pressed for time]

Now let's talk about how to tell if you've got a good quality health insurance plan. What measures do you use to judge the quality of a health plan. [*Try to get steer them away from price. Write them on the flipchart, then add some from the list if necessary*.].
OK now we're going to choose which ones you think are most important. You each have five stickers in front of you. I'm going to leave the room now, and I want you to pick the five measures of quality that are most important to you. Put a sticker next to each one that's most important to you. Does everyone understand the assignment? [Check for agreement, then leave the room to check-in with client].

[*Moderator can leave room to check with client on additional questions while these choices are being made*].

[Upon returning] It looks like _____ , _____ and _____ were very important to many of you. Let's talk about _____.
[Skip the obvious ones ('Plan includes my doctor') and focus on issues where probes make sense].
    Why was this choice important to your choice of health plan?
    [If this question makes sense]: How would you use this information in your decision-making?
[Repeat for top three or four choices where probes make sense].
Is there another important quality measure that should be here?.

TRUSTED SOURCES (5 minutes)
    We're almost done. Now, I want to go around the table again and ask each of you two questions:
        What is your favorite way to get information about issues like health insurance? Are there certain people, organizations or publications that you turn to?
            PROBE >> Anyone else?
        What organizations or businesses would you trust to help you enroll in something like this?
            PROBE >> Any others?

CLOSING (3 minutes)
    Are there any other questions you have about this product?
    Okay a few last questions for each of you: After hearing all you've heard today/tonight, what image comes to mind when you think about using this new way to shop for health insurance?
    How likely would you be to use this website?
        Why or Why not?
        What one thing would get you to use it?

THANK AND DISMISS

Quantitative Survey: Consumer

Hello, my name is _____ and I'm with Directions in Research [name of the phone center]. We are a professional research firm conducting a poll about health insurance in Minnesota. We are looking for local residents to give their opinions about an important public health issue in a 15-minute survey. We are not selling anything and will not ask you to buy or sign up for anything.

Yes (THANK AND CONTINUE)

Screening Questions

S1.   What is your current age?

{TERMINATE IF S1< 18 or > 65)

S2.   Are you one of the healthcare decision makers for your household? For example, do you help decide which doctor to use, when to see a doctor, where to go?

1   Yes
2   No {ASK TO SPEAK TO HOUSEHOLD HEALTHCARE DECISION MAKER}
98   DK
99   REF

{TERMINATE IF S2=2, DK/REF}

S3.   Do you currently have health insurance for yourself?

Yes
No
DK
REF

{TERMINATE IF S3=DK/REF}

S3A.   [If S3=1] How you get health insurance for yourself. Do you get it through… [READ LIST]

Your current or former employer
Your spouse or partner's current or former employer

Quantitative Survey: Consumer

{ASK IF AGE<=26} Through your parent's current or former employer
A plan you purchase on your own directly from a health insurance company
A COBRA health insurance plan
Medicare for people 65 and older, or people with certain disabilities
Medicaid or State Assistance
TRICARE or VA
Other (please specify) [OTHER: S]
DK
REF

{CONTINUE IF S3A= 4 OR 5 OR, IF S3A = 3 and AGE >25}

{TERMINATE IF S3A=1-3, 6-8, DK/REF OR, IF S3A = 3 and AGE < 26}

NOTE: Overall Health Insurance Perceptions/Attitudes/Experiences

To get started, I would like to ask you a few things about health insurance.

H1   [If S3=2, otherwise skip to H4] For how long have you been without health insurance? Would you say… [READ LIST]

Less than 6 months
6 months to less than one year
One year to less than two years
More than two years
Never had health insurance

H2.   [If S3=2, otherwise skip to H4] During the time you have been uninsured, have you … [RANDOMIZE A-F]

Seen any advertising for health insurance
Yes
No

Considered buying health insurance
Yes
No

Quantitative Survey: Consumer

Inquired about Medicaid or other government health insurance programs

Yes
No

Contacted an insurance company about the possibility of obtaining health insurance

Yes
No

Contacted an insurance broker about the possibility of obtaining health insurance

Yes
No

Shopped online for health insurance

Yes
No

H3   [If H2b, H2c, H2d, H2e or H2f = 1 (yes), otherwise skip to H4] Thinking about the last time you looked for health insurance, what prompted you to look for insurance? (ASK AS OPEN END)

Change in health status (got sick, new diagnosis, etc)
Change in employment status (lost job, changed job, etc)
Change in spouse's employment status
Got married
Got divorced or separated
Had a child or adopted a child
Saw an advertisement about health insurance
Saw a news item about health insurance
Talked to someone about health insurance
Other. Please specify: _____

H3a.   [If #7 is selected for H3] Where did you see this advertisement? [READ LIST]

In the newspaper
In a magazine
On television
On radio
Online
On a billboard
Other. Please specify: _____

H3b   [If #7 is selected for H3] If you remember, could you tell us who ran the advertisement and roughly when you saw it? [OPEN END. PLEASE NOTE NAME OF THE ADVERTISER AND THE MONTH AND YEAR IT RAN. IF AN INSURANCE CARRIER IS MENTIONED, PLEASE NOTE BRAND]

H3c.   [If #8 is selected for H3] Where did you see this news item? [READ LIST]
In the newspaper
In a magazine
On television
On radio
Online
Other. Please specify: _____

H3d.   [If #9 is selected for H3] Who did you talk with? [READ LIST]
A friend or family member
An insurance broker or insurance agent
A social worker or someone from the state health department
A person doing outreach for a public insurance program
A doctor or nurse
Other. Please specify:_____

H4   How satisfied would you say you are with your current health insurance situation? [ROTATE TOP-TO-BOTTOM, BOTTOM-TO-TOP AND READ LIST] IF NEEDED FOR CLARIFICATION: If you're uninsured, how satisfied are you with that?

Very satisfied
Somewhat satisfied
Somewhat dissatisfied
Very dissatisfied

Quantitative Survey: Consumer

H5.   How difficult do you think it is (or would be) to find and choose a health insurance plan? [ROTATE TOP-TO-BOTTOM, BOTTOM-TO-TOP AND READ LIST]

Very easy
Somewhat easy
Somewhat difficult
Very difficult

H7.   [If S3=No] What is the main reason you do not have insurance? *(ASK AS OPEN END)*

(*NOTE: IF COST IS MENTIONED, PROBE FOR REASONS WHY COST IS TOO HIGH*)

Cost AND more than I could possibly afford / I don't earn enough money
Costs AND more than I am willing to pay / Not worth the cost
I just pay as I go / Just cheaper to pay doctor
I can afford to pay for the health care I need so I don't need health insurance
I am healthy / don't get sick so I don't really need it
I have a pre-existing condition so could not find a plan that would cover me
Other (Please specify): _____
98   DK
99   REF

H6:   What, if anything, makes the process of finding and choosing health insurance difficult? *(ASK AS OPEN END)*

Nothing
It's very confusing
Difficult to compare benefits across plans
Difficult to compare prices
Prices too high
Don't know enough about health insurance
Hard to tell what's covered and what's not
Too difficult to research / No one-stop-shop
Too many changes each year
The options are limited

I've been turned down due to a pre-existing condition
Other (Please specify): _____
DK
REF

H8.   If you were to buy health insurance just for yourself today, what do you think the monthly premium would be? [IF REPONDENT HAS TROUBLE, OR ASKS WHAT KIND OF POLICY OR WHAT LEVEL OF COVERAGE, RESPOND; We're just looking for your best guess: What do you think the monthly premium would be on the level of health insurance you would be most likely to buy? YOU CAN ACCEPT A SPECIFIC DOLLAR FIGURE OR A RANGE.]

[Dollar figure OR Range "Between (dollar figure) and (dollar figure)"]
DK
REF

H9:   Which of the following statements best describes how you feel about health insurance? Health insurance… [ROTATE TOP-TO-BOTTOM, BOTTOM-TO-TOP AND READ LIST]

Is a necessity, something I would never give up
Is very important, but not a necessity
Is good to have, but not all that important
Has little or no value to me.

H10:   In Minnesota, how common is it for people like you to have health insurance coverage? Would you say…[ROTATE TOP-TO-BOTTOM, BOTTOM-TO-TOP AND READ LIST]

Almost everyone like me has health insurance
Most people like me have health insurance
About half of the people like me have health insurance
Less than half of the people like me have health insurance
Almost no one like me has health insurance

AWARENESS

A1.   Have you heard about a website -- either one already around or one being developed now -- that will allow you to compare and purchase health insurance plans from different insurance carriers?

Yes
No

A2.   What is that website called? [OPEN ENDED. IF ANSWERED, PROBE ONCE: "Have you heard of any other similar websites?"]

A3   Regardless of whether you have or haven't heard about the website, how likely would you be to use it? Would you be… [ROTATE TOP-TO-BOTTOM, BOTTOM-TO-TOP AND READ LIST]

Very likely
Somewhat likely
Somewhat unlikely
Very unlikely

FEATURES

F1.   The state of Minnesota is creating a new way to get health insurance from both private insurers and public programs. I am going to read you a list of services that might be offered. Please tell me how interested you would be in using each one.

           [RANDOMIZE ORDER OF F1A-F1G]

F1A.   A website that allows you to compare health insurance plans from different companies all in one place. Would you be… [ROTATE TOP-TO-BOTTOM, BOTTOM-TO-TOP AND READ LIST]

Extremely interested
Very interested
Somewhat interested
A little bit interested
Not interested at all

F1B.   An online premium calculator where you could anonymously enter some basic information about yourself to learn the likely cost of a private health insurance plan for you or your family. Would you be… [ROTATE TOP-TO-BOTTOM, BOTTOM-TO-TOP AND READ LIST]

Extremely interested
Very interested
Somewhat interested

A little bit interested
Not interested at all

F1C.   A program that provides experts to help you find and enroll in the best health insurance plan for your situation. Would you be… [ROTATE TOP-TO-BOTTOM, BOTTOM-TO-TOP AND READ LIST]

Extremely interested
Very interested
Somewhat interested
A little bit interested
Not interested at all

F1D   A program that provides a toll-free number you can call to ask questions about your health insurance options. Would you be… [ROTATE TOP-TO-BOTTOM, BOTTOM-TO-TOP AND READ LIST]

Extremely interested
Very interested
Somewhat interested
A little bit interested
Not interested at all

F1E   A website that lets you sort health insurance plans by different criteria, such as whether the plan includes certain providers or according to cost and quality of the plan, and then purchase the one you like best. Would you be… [ROTATE TOP-TO-BOTTOM, BOTTOM-TO-TOP AND READ LIST]

Extremely interested
Very interested
Somewhat interested
A little bit interested

Not interested at all

F1F   A way to search all the tax credits and government assistance available and use those that work for you to instantly reduce your health insurance premium. Would you be… [ROTATE TOP-TO-BOTTOM, BOTTOM-TO-TOP AND READ LIST]

Extremely interested
Very interested
Somewhat interested
A little bit interested
Not interested at all

F1G   [FOR SELF-PAY ONLY {S3=1}] A website that allows you to compare your existing health insurance plan to others available in your area. Would you be… [ROTATE TOP-TO-BOTTOM, BOTTOM-TO-TOP AND READ LIST]

Extremely interested
Very interested
Somewhat interested
A little bit interested
Not interested at all

F2   If this program offered a toll-free line for you to get assistance with health insurance, during which of these time periods would you be most likely to call for help? [READ LIST]

Monday to Friday morning, between 5 am and 9 am
Monday to Friday business hours, between 9 am and 5 pm
Monday to Friday evening, between 5 pm and 9 pm
Saturday, between 9 am and noon
Saturday, between 1 pm and 4 pm
I wouldn't call

NOTE: Test Name

N1.   Now imagine there was a program that had all these services we've been discussing. I'm going to read three potential names. Please tell me which would be the best name for this new way to buy health insurance? [READ and ROTATE NAMES. ALLOW ONE CHOICE]

The Minnesota Health Insurance Marketplace
The Minnesota Health Insurance Exchange
Minnesota Health Choices
Health Plans Minnesota
Minnesota Health Connections

Quantitative Survey: Consumer

NOTE: Program Governance

G1.   Which of the following entities would be best to administer or manage this new way to get health insurance?
             [ROTATE]

A state agency
A non-profit
A stand-alone organization that combines features of a state agency and a non-profit

NOTE: Internet Use and Demographics

D2.   How often do you access the Internet on your own or with someone else's help? [READ LIST.]

Daily or almost daily
Once or twice a week
Once or twice a month
Only a few times a year
Don't have internet access/don't use the internet [SKIP D3-D7]
DK
REF

D3.   [IF D2=1-4]: How do you use the Internet? Select all that apply. [READ AND ROTATE 1-9 TOP TO BOTTOM AND BOTTOM TO TOP. RECORD ALL YES RESPONSES.]

To send and receive email
To search for information in general
To search for information about health and wellness
To shop
To manage credit cards, banking, or saving accounts
To manage investments
To manage health insurance
To watch videos or play games
To connect with people on social networking sites like Facebook and LinkedIn
Other (specify):_____

D4.   [IF D2=1-4]: Where do you typically access the Internet? Select all that apply. [~~READ AND ROTATE 1-5 TOP TO BOTTOM AND BOTTOM TO TOP.~~ RECORD ALL YES RESPONSES.]

At home
At work
On a mobile device
At a public library
At the home of a friend or relative
Someplace else. [Please specify:]_____

D5.   [IF D3=9]: Which, if any, of the following social networking websites do you use? Do you use… [RANDOMIZE; RECORD ALL YES RESPONSES.]

Facebook
Twitter
LinkedIn
Pinterest
Google Plus
Other [please specify):_____

D6.   [IF D2=1-4]: When you use the Internet, do you use …… [RANDOMIZE, READ, RECORD ALL YES RESPONSES.]

A personal desktop or laptop computer
An iPad or other tablet computer
A smart cell phone, like an iPhone or Blackberry
Other [please specify):_____

D7.   [IF D6=3]: Do you use text messaging?

Yes
No
DK
REF (VOL)

D8.   Do you have any chronic health conditions that require ongoing care, such as arthritis, chronic pain, high blood pressure, or heart disease?

Yes
No
DK
REF

D9.   Thinking about the future of healthcare, do you think things are becoming more positive, negative, or do you think things will stay about the same?

More positive
More negative
About the same
DK
REF

The next few questions are for classification purposes only.

D10.   [ASK IF NECESSARY] Please indicate your gender.

Male
Female
REF

D11.   What is the highest level of education you have completed?
               (Select one.)

Some high school
High school graduate
Some college
College graduate
Post graduate
REF

D12.   What is your marital status?
               (Select one.)

Married
Never married/single
Separated
Divorced
Widowed
REF

D13.   Do you have any dependent children 18 years of age or younger living in your household?

Yes
No
REF

{If D13 = 1, ask D13a, otherwise go to D14}

D13a.   How many dependent children 18 years of age or younger live in your household?

                    _____ (Accept 1-20)

D14.   What is your current employment status? (Select one.)

Employed full-time
Employed part-time
Retired
Homemaker, student, or otherwise not in the labor force
Unemployed
Other
REF

D15.   What was your household's total annual income before taxes? Please stop me when I read the correct category. Was it…? *(READ CODES 1-8; ACCEPT ONE MENTION. PROBE REF WITH RANGES)*
Up to $15,000 ($0-$14,999)
$15,000 up to $25,000 ($24,999)
$25,000 up to $35,000 ($34,999)

$35,000 up to $50,000 ($49,999)
$50,000 up to $75,000 ($74,999)
$75,000 up to $100,000 ($99,999)
$100,000 up to $150,000 ($149,999)
$150,000 or more
DK
REF

D16.   Compared to other people who are the same age as you, do you consider your health to be … [READ LIST. ROTATE START WITH POSITIVE AND NEGATIVE END OF SCALE].

Excellent
Very Good
Good
Fair
Poor
DK
REF

D17.   Do you consider yourself to be of Hispanic, Latino or Spanish origin?

Yes
No
DK
REF

D18.   Which of the following describes your racial or ethnic background?
            (Select one.)

African American, Black
American Indian, Eskimo, Aleut
Asian or Pacific Islander
White, Caucasian
Hispanic, Latino, Mexican
Other, please specify

Quantitative Survey: Consumer

REF

D19.   What is the primary language spoken in your household?
            (Select one.)

English
Spanish
Other, please specify
REF

Thank you for your participation in this important research.

Quantitative Survey: Small Employer

Hello, my name is _____ and I'm with Directions in Research [name of the phone center]. We are a professional research firm conducting a poll about health insurance in Minnesota. We are looking for local businesses to give their opinions about an important public health issue in a 15-minute survey. We are not selling anything and will not ask you to buy or sign up for anything.

Yes (THANK AND CONTINUE)

Screening Questions

CALL INTO SMALL BUSINESSES (DEFINED AS HAVING 2-50 EMPLOYEES)

ASK TO SPEAK TO THE PERSON RESPONSIBLE FOR DECISIONS REGARDING THE HEALTH INSURANCE BENEFITS OFFERED TO EMPLOYEES

SHOULD BE OWNER, PARTNER, BUSINESS MANAGER, HUMAN RESOURCES DIRECTOR, ETC.

S1. How many individuals does your company/organization employ on a full-time basis? Educated guesses are fine if you don't know the exact number.

[RECORD NUMBER 0–99999]

{IF S1 >1 and <=50, CONTINUE; OTHERWISE TERMINATE}

S2. Does your company/organization offer health insurance coverage to its employees?

Yes
No
DK
REF

{IF S2=1, SKIP TO S4}

S3. Have you ever seriously considered contacting anyone about getting health insurance for your employees or shopped on the internet for ways to provide health insurance for your employees?

Yes

No
DK
REF

{IF S3=1, CONTINUE; OTHERWISE TERMINATE}
S4.   What is your level of involvement in the decision-making process about the health insurance coverage offered to your company's employees? [READ LIST]

I am the decision maker
I have some input in the decision, but I am not the decision maker
I do not have any input in the decision
DK
REF

{IF S4=1 or 2 CONTINUE; OTHERWISE TERMINATE}
S4a. How long have you been working in your current position [or if owner/partner: how long have you owned your company?] [READ LIST]

Less than 2 years
2 or more years

{IF S4a=2 CONTINE; OTHERWISE TERMINATE}
S5.   In what zip code is your business/organization located?

[RECORD NUMBER 00000-99999]

HEALTHCARE INSURANCE DECISION-MAKING PROCESS

[IF S2=1, CONTINUE; OTHERWISE SKIP TO H12]

H1   You indicated that **you provide insurance coverage to your company's employees.** What are the main reasons you offer insurance to your employees? [OPEN END. PROBE ONCE:]   "Anything else?"

H1a   Thinking just about your single employees (not those with families), what is the average monthly health insurance premium paid per employee? Include the full premium, both the part you pay and what the employee pays, if anything. If you don't know the precise number, just give your best guess.

Amount: _____
No single employees with health insurance

H1b   Thinking just about your employees with family coverage, what is the average monthly health insurance premium paid per employee? Include the full premium, both the part you pay and what the employee pays, if anything. If you don't know the precise number, just give your best guess.

Amount: _____
No employees with family health insurance

H2   What percentage of health care costs do you pay for your employees? If you don't know the precise number, give us your best guess. [OPEN END]

H3   Do you currently use an insurance broker to assist you in the selection of a health insurance plan for your employees?

Yes
No

{IF H3=1, ASK H4; OTHERWISE SKIP TO H10}

H4   How long have you been using an insurance broker to select health insurance plans? [READ LIST]

For less than a year
For the past year
For the past 2 years
For the past 3 years
For the past 4 years
5 years or more

H5   How long have you been using the same insurance broker to select health insurance plans? [READ LIST]

For less than a year
For the past year
For the past 2 years
For the past 3 years
For the past 4 years

Quantitative Survey: Small Employer

For 5 years or more

 [NOTE: RANDOMIZE QUESTIONS H6-H9]

I am going to read you a series of statements. For each one, please tell me whether you strongly agree, somewhat agree, somewhat disagree or strongly disagree.

H6   I trust my insurance broker to select the appropriate plan for my business. Do you… [ROTATE TOP-TO-BOTTOM, BOTTOM-TO-TOP AND READ LIST]

Strongly agree
Somewhat agree
Soimewhat disagree
Strongly disagree

H7   Even though the insurance carrier pays my broker, I completely trust his opinion when it comes to picking the right health insurance plan for my business. Do you… [ROTATE TOP-TO-BOTTOM, BOTTOM-TO-TOP AND READ LIST]

Strongly agree
Somewhat agree
Soimewhat disagree
Strongly disagree

H8   I need a broker to help me sort through the pros and cons of what different health insurance plans offer. Do you… [ROTATE TOP-TO-BOTTOM, BOTTOM-TO-TOP AND READ LIST]

Strongly agree
Somewhat agree
Soimewhat disagree
Strongly disagree

H9   If my broker was not paid a commission by the insurance carrier, I would be willing to compensate him for his expertise. Do you… [ROTATE TOP-TO-BOTTOM, BOTTOM-TO-TOP AND READ LIST]

Strongly agree

Somewhat agree
Soimewhat disagree
Strongly disagree

H11　　　　Which of the following factors is **most important** to you when deciding on the health insurance plan to offer your employees? [*READ LIST. ~~ROTATE TOP-TO-BOTTOM THEN BOTTOM-TO-TOP.~~ ALLOW MULTIPLE RESPONSES. RECORD ALL YES RESPONSES]*
Total cost to me, the employer
Total cost to my employees
Rates that are competitive with other insurance plans
Access to doctors my employees want to use
Flexibility in plan design (e.g., deductibles, co-pays, etc.)
Strategies to keep costs down (e.g., disease management, step therapy for Rx)
Administrative support and ease (ease of use for me as the employer)
Accuracy and promptness of claims payments
Customer service (ease of use for me as the employer)
Location – customer service is local
Positive customer reviews

H10　　　　What, if anything, makes it difficult for you to select a health insurance plan for your employees each year? *[DO NOT READ LIST. ALLOW MULTIPLE RESPONSES. RECORD ALL YES RESPONSES]*

Frequent premium increases
Steep premium increase
Difficult to compare benefits across plans
Difficult to compare prices
The options I have become more and more limited
Plans are too complex
Difficult to understand what is covered by the plans
Plans do not meet the needs of my employees
Plans are too limited in scope
Medical underwriting (i.e., increased costs due to medical history of employees)
Age of my employees continues to increase
Nothing
Other (Please specify):

[IF S2-1, SKIP TO H15]

H12   What were the main reasons you considered providing health insurance to your employees? [OPEN END. PROBE ONCE:] "Anything else?"

H13   What is the main reason you have not provided insurance to your employees so far? [*DO NOT READ LIST. ALLOW MULTIPLE RESPONSES. RECORD YES RESPONSES*]

Firm is too small / Too few employees to justify buying health insurance
We could not afford it
Not a good value: Premiums are too high for what you get
Employees were not interested in health benefits
Competing firms don't provide health insurance either
The process is confusing / complex
Plans do not meet the needs of my employees
Plans are too limited in scope
Medical underwriting (i.e., increased costs due to medical history of employees)
Other (Please specify): _____

H14   If you began providing insurance to your employees, what do you think the average monthly premium would be for your typical single employee? [IF REPONDENT HAS TROUBLE OR ASKS WHAT KIND OF POLICY OR WHAT LEVEL OF COVERAGE, RESPOND: We're just looking for your best guess: What do you think the monthly premium would be on a single employee for the level of health insurance you would be most likely to buy? NUMERIC OPEN END YOU CAN ACCEPT A SPECIFIC DOLLAR FIGURE OR A RANGE.]

[Dollar figure OR Range "Between (dollar figure) and (dollar figure)"]
DK
REF

H15   What percentage of firms in your industry do you think offer health insurance to their employees? Would you say … [ROTATE TOP-TO-BOTTOM, BOTTOM-TO-TOP AND READ LIST]

Almost all of them
Most of them
About half of them
Less than half of them

Almost none of them

AWARENESS

A1.	Have you heard about a website -- either one already around or one being developed now -- that will allow you to compare and purchase employee health insurance plans from different insurance carriers?

Yes
No

A2.	What is that website called? [OPEN ENDED. IF ANSWERED, PROBE ONCE: "Have you heard of any other similar websites?"]

A3	Regardless of whether you have or haven't heard about the website, how likely would you be to use it? Would you be… [ROTATE TOP-TO-BOTTOM, BOTTOM-TO-TOP AND READ LIST]

Very likely
Somewhat likely
Somewhat unlikely
Very unlikely

FEATURES / BENEFITS OF THE EXCHANGE

F1	The state of Minnesota is creating a new way to purchase health insurance from private insurers for your employees. I am going to read you a list of services that might be offered. Please tell me how interested you would be in using each one.

	[RANDOMIZE ORDER OF F1A-F1J]

F1A.	A website that allows you to compare health insurance plans from different companies all in one place. Would you be… [ROTATE TOP-TO-BOTTOM, BOTTOM-TO-TOP AND READ LIST]

Extremely interested
Very interested
Somewhat interested
A little bit interested
Not interested at all

F1B.　　　　An online premium calculator where you could anonymously enter some basic information about your employees – age, gender, job and health status – to get a cost estimate for providing them health insurance coverage. Would you be… [ROTATE TOP-TO-BOTTOM, BOTTOM-TO-TOP AND READ LIST]

Extremely interested
Very interested
Somewhat interested
A little bit interested
Not interested at all

F1C.　　　　A program that would provide you experts who could help you find the best health insurance plan for your business. Would you be… [ROTATE TOP-TO-BOTTOM, BOTTOM-TO-TOP AND READ LIST]

Extremely interested
Very interested
Somewhat interested
A little bit interested
Not interested at all

F1D　　　　A program that provides a toll-free number you can call to ask questions about your health insurance options. Would you be… [ROTATE TOP-TO-BOTTOM, BOTTOM-TO-TOP AND READ LIST]

Extremely interested
Very interested
Somewhat interested
A little bit interested
Not interested at all

F1E　　　　A website that lets you sort health insurance plans by different criteria, such as whether the plan includes certain providers or according to cost and quality of the plan, and then purchase the one you like best. Would you be… [ROTATE TOP-TO-BOTTOM, BOTTOM-TO-TOP AND READ LIST]

Extremely interested
Very interested
Somewhat interested
A little bit interested

Not interested at all

F1F	A way to search all the tax credits and government assistance available to your business and your employees and then use those to instantly reduce the health insurance premiums for your employees. Would you be… [ROTATE TOP-TO-BOTTOM, BOTTOM-TO-TOP AND READ LIST]

Extremely interested
Very interested
Somewhat interested
A little bit interested
Not interested at all

F1G	A website where you could compare your existing health insurance plan to others available in your area. Would you be… [ROTATE TOP-TO-BOTTOM, BOTTOM-TO-TOP AND READ LIST]

Extremely interested
Very interested
Somewhat interested
A little bit interested
Not interested at all

F1H	A way for small businesses to have access to more similar health insurance plans and premiums offered to larger businesses. Would you be… [ROTATE TOP-TO-BOTTOM, BOTTOM-TO-TOP AND READ LIST]

Extremely interested
Very interested
Somewhat interested
A little bit interested
Not interested at all

F1I	A website where employees can choose a health insurance plan out of employee-approved options. Would you be… [ROTATE TOP-TO-BOTTOM, BOTTOM-TO-TOP AND READ LIST]

Extremely interested
Very interested
Somewhat interested

A little bit interested
Not interested at all

F1J   A website where employers can provide defined contributions for employees to select a health insurance plan. Would you be… [ROTATE TOP-TO-BOTTOM, BOTTOM-TO-TOP AND READ LIST]

Extremely interested
Very interested
Somewhat interested
A little bit interested
Not interested at all

F2   If this program offered a toll-free line for you to get assistance with health insurance, during which of the follow time slots would you be most likely to call for help? [READ LIST]

Monday to Friday morning, between 5 am and 9 am
Monday to Friday business hours, between 9 am and 5 pm
Monday to Friday evening, between 5 pm and 9 pm
Saturday morning, between 9 am and noon
Saturday afternoon, between 1 pm and 4 pm
I would not call

F3   What portion of the insurance plans in the market would need to be represented in this program to interest you in using it? [READ LIST]

10%
25%
50%
75%
90%
100%
DK
REF

Test Name

N1.   Now imagine a website was created in Minnesota where small businesses could shop for employee health insurance from private insurance carriers. It would allow business owners to compare premiums, out-of-pocket costs and coverage options side by side, and then buy the plan they like best. I'm going to read three potential names. Please tell me which would be the best name for this new way to buy health insurance? [READ and ROTATE NAMES. ALLOW ONE CHOICE]

The Minnesota Health Insurance Marketplace
The Minnesota Health Insurance Exchange
Minnesota Health Choices
Health Plans Minnesota
Minnesota Health Connections

NOTE: Program Governance

G1.   Which of the following entities would be best to administer this new way to get health insurance?
            [READ LIST AND ROTATE]

A state agency
A non-profit
A stand-alone organization that combines features of a state agency and a non-profit

DEMOGRAPHICS

In closing, we'd like to ask you a few questions for classification purposes.

D1.   What is your job title?

D2.   In which of the following industry groups would your company/organization be classified? [READ LIST]

Agriculture
Mining
Utilities
Construction
Manufacturing
Wholesale Trade
Retail Trade

Transportation and Warehousing
Information, Telecommunication, and Data Processing
Finance and Insurance
Real Estate
Professional, Scientific and Technical Services
Administrative and Support Services
Educational Services
Health Care
Social Services
Arts, Entertainment, and Recreation
Accommodation and Food Services
Government and Public Administration
Other (specify) [OTHER: S]
DK
REF

D3.   How many years has your company/organization been in existence?

[RECORD NUMBER 1–999]
DK
REF

D4.   What is the average annual salary per employee (NOT COUNTING THE EXECUTIVES)? [ASK OPEN, DO NOT READ LIST. RECORD ANSWER WITHIN RANGE]

Less than $10,000
$10,000 - $19,999
$20,000 - $29,999
$30,000 - $39,999
$40,000 - $49,999
$50,000 - $59,999
$60,000 - $69,999
$70,000 - $79,999
$80,000 - $89,999
$90,000 - $99,999

$100,000 - $124,999
$125,000 - $149,999
$150,000 - $174,999
$175,000 - $199,999
$200,000 - $224,999
$225,000 - $249,999
$250,000 or more
DK
REF

Thank you! We appreciate your time and value your responses. Have a nice day