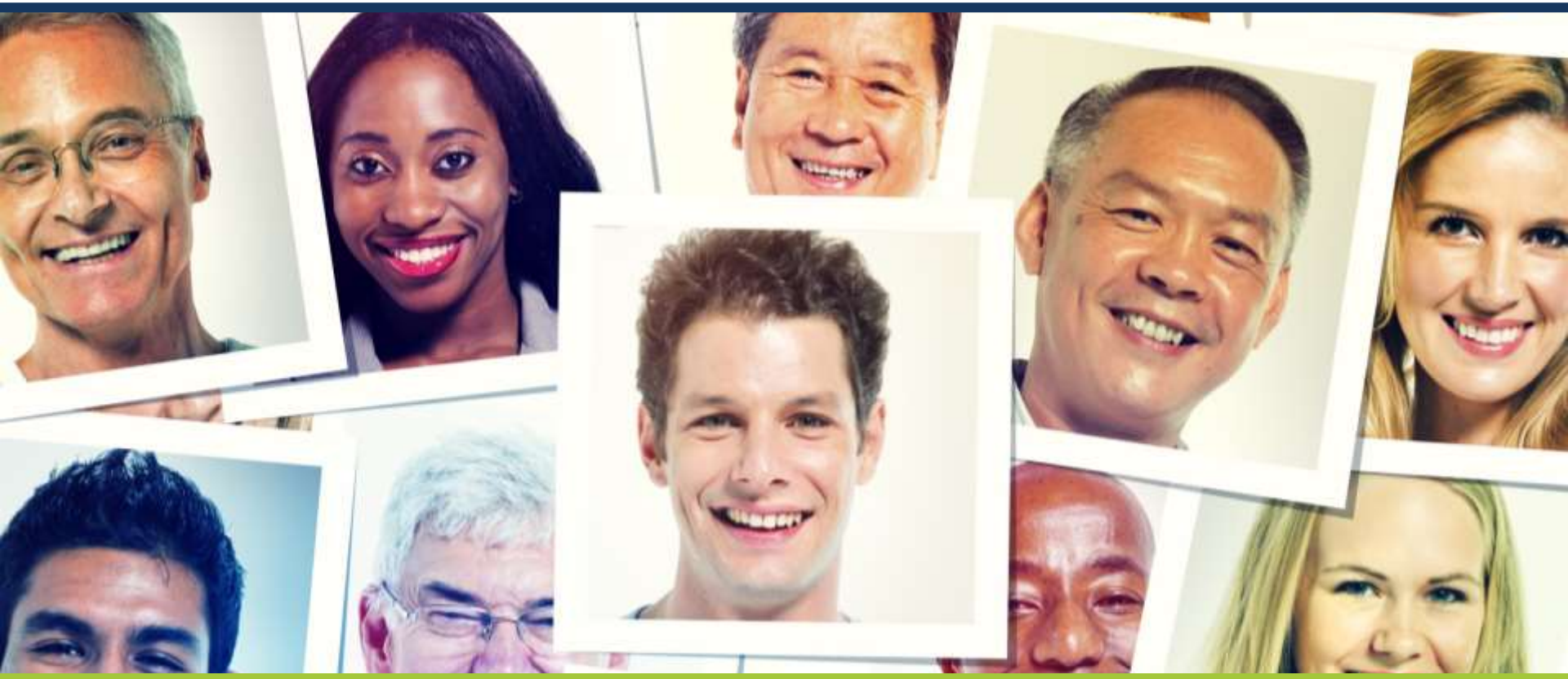
CARE COMPASS NETWORK

Care Compass Network Panel Engagement
Health Insurance Literacy Survey Results
March 6th, 2019 to June 21st, 2019

Rev. 100319



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Health Insurance Literacy
Patient Perspective
(Spring 2019)

Purpose: To better understand CCN panel members' understanding of health insurance and the process taken to learn about their coverage.

Top health insurance terms Medicaid/Uninsured and Community Resident patients are most familiar with:

- Primary Care Provider (PCP)
- A copayment
- Prescription (Medication) coverage

Most important factors when comparing health insurance plans

Medicaid/Uninsured

1. Understanding what I would have to pay for primary care visits
2. Understanding what I would have to pay for medications
3. Understanding what I would have to pay for specialist visits
4. Knowing if the plan covers costs such as inpatient hospital stays

Medicaid/Uninsured and Community Residents

1. Understanding what I would have to pay for primary care visits
2. Understanding what I would have to pay for specialist visits
3. Understanding what I would have to pay for medications

57% Would like a face-to-face interaction when obtaining health coverage assistance

56% Would like an over the phone interaction when obtaining health coverage assistance

83% Are confident contacting their health insurance company if they have a coverage problem or question

Opportunities for Consideration...

- Provide more resources to help educate patients/clients on their health insurance courage and understanding key health insurance terms.
- Provide a "live person" resource for patients/clients to reference in helping them with healthcare literacy issues.

Response Rate: 102 CCN panel members responded to the early-March 2019 to April 2019 online panel survey. Out of the 102 members, 40 (or 40%) members were Medicaid or Uninsured members. This panel survey only surveyed Medicaid/ Uninsured and Community Residents.

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Health Insurance Literacy Provider Perspective

(Spring 2019)

Purpose: To better understand the perspective of the healthcare providers and community organization members regarding their clients'/ patients' understanding of health insurance and their process taken to learn about coverage.

Providers and CBO members felt their patients/clients were least familiar with the following health insurance terms:

- Health insurance formulary
- Healthcare navigator
- Out-of-pocket maximum

Providers and CBO members felt their patients/clients were least knowledgeable about:

1. Finding out if they must meet a deductible for healthcare services
2. Understanding what they would have to pay for emergency room visits , and
3. Knowing which doctors and hospitals participate in their health plan

41% Believe that their patients/clients would have their insurance card with them using/visiting a primary care provider

76% Are not confident with their patients'/clients' figuring out what they would have to pay for their healthcare needs in the next year

80% Believe that their patients/clients are not aware of the process of appealing a denied insurance claim

Opportunities for Consideration...

- Provide more resources to help educate patients/clients on their health insurance coverage and understanding key health insurance terms.
- Providing a "live person" resource for patents/clients to reference in helping them with healthcare literacy issues.

Response Rate: 69 CCN panel members responded to the late-May 2019 to June 2019 online panel survey. This panel survey only surveyed Healthcare Providers and Community Organization Employees.

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Patient Perspective Survey Executive Summary (Panel Members from Group #1 and Group #4)

- An online survey was administered to the Care Compass Network (CCN) panel members from **March 6th, 2019 to April 24th, 2019.**
  - 12 questions
  - **102 surveys were returned (12% completion rate).** Average survey completion time 8 minutes.
  - **Community Residents had a** 60% [62 out of 102 for each] response rate.
  - **Medicaid or Uninsured had a** 40% [40 out of 102 for each] response rate {Pg. 12}.

- When obtaining health insurance patient perspective, respondents were most confident in their ability to know where to go for help if they're having trouble affording or finding health insurance. (Mean score of 4.03 - the mean score was calculated off a scale of 1 to 5) {Pg.14}.

  - When obtaining health insurance patient perspective, **Medicaid and Uninsured** respondents were also confident in their ability to know where to go for help if they're having trouble affording or finding health insurance. (Mean score of 4.10 - the mean score was calculated off a scale of 1 to 5) {Pg.14}.

The following 'top' responses were calculated by having the highest average score on a scale of 1-5.

- The top three health insurance terms for patient perspective respondents were most familiar with are:
  1. Primary Care Provider (PCP) (4.75) {Pg. 26}
  2. A copayment (4.68) {Pg. 19}
  3. Prescription (Medication) coverage (4.47) {Pg. 23}

  - The top three health insurance terms **Medicaid and Uninsured** respondents were most familiar with are:
    1. Primary Care Provider (PCP) (4.63) {Pg. 26}
    2. A copayment (4.42) {Pg. 19}
    3. Prescription (Medication) coverage (4.22) {Pg. 23}

❖This bullet style indicates an aggregate finding.
➢This bullet style indicates a finding from Medicaid and uninsured respondents.

Patient Perspective Survey Executive Summary

❖ The top three most important factors to respondents when considering health insurance plans are:

1. Understanding what I would have to pay for primary care visits (4.64) {Pg. 31}
2. Understanding what I would have to pay for specialist visits (4.54) {Pg. 32}
3. Understanding what I would have to pay for medications (4.51) {Pg. 33}

➢ The top most important factors **Medicaid and Uninsured** respondents consider when comparing health insurance plans are (by having the highest mean score on a scale of 1 to 5 scale):

1. Understanding what I would have to pay for primary care visits (4.38) {Pg. 31}
2. Understanding what I would have to pay for medications (4.38) {Pg. 33}
3. Understanding what I would have to pay for specialist visits (4.30) {Pg. 32}
4. Knowing if the plan covers costs such as inpatient hospital stays (4.30) {Pg. 29}

❖ When selecting their health insurance plan, respondents indicated keeping their current provider(s) is the most important {Pg.39}.

➢ When using their health insurance plan, **Medicaid and Uninsured** respondents indicated keeping their current provider(s) with their plan is most important {Pg.39}.

❖ More than half of patient respondents prefer to speak with someone when seeking health benefit coverage assistance or help understanding benefits/their coverage. 57% [58 out of 102] would like a face-to-face interaction and 56% [57 out of 102] would like an over the phone interaction. {Pg. 49}.

➢ 60% [24 out of 40] of the **Medicaid and Uninsured** respondents would like to speak with someone face-to-face when selecting or inquiring about health insurance. {Pg. 49}.

❖This bullet style indicates an aggregate finding.
➢This bullet style indicates a finding from Medicaid and uninsured respondents.

Patient Perspective Survey Executive Summary

- ❖ When visiting a primary care provider almost all (95%) [97 out of 102] patient perspective respondents shared they have their insurance card with them. {Pg.54}.
  - ➢ 92% [37 out of 40] **Medicaid and Uninsured** respondents have their insurance card with them when they visit their provider. {Pg.54}.
- ❖ The majority (83%) [85 out of 102] of respondents feel most confident contacting their health insurance company if they have a coverage problem or question. {Pg.58}.
  - ➢ 80% [32 out of 40] of **Medicaid and Uninsured** respondents feel most confident contacting their health insurance company if they have a coverage problem or question. {Pg.58}.
- ❖ Less than half (45%) [47 out of 102] of patient perspective respondents are aware of the process of appealing a denied insurance claim. {Pg.61}.
  - ➢ Slightly more than half (58% or 23 out of 40) of **Medicaid and Uninsured** respondents are aware of the process of appealing a denied insurance claim. {Pg.61}.

❖This bullet style indicates an aggregate finding.
➢This bullet style indicates a finding from Medicaid and uninsured respondents.

Provider Perspective Survey Executive Summary (Group #2 and Group #3)

- An online survey was administered to the last two groups of Care Compass Network (CCN) panel members to gain a "Provider Perspective" from **May 31st, 2019 to June 21st, 2019.**
  - 7 questions
  - **69 surveys were returned (15% completion rate).** Average survey completion time 6.8 minutes.
    - **Community Organization Employees had a** 52% [36 out of 69 for each] response rate.
    - **Healthcare Providers had a** 48% [33 out of 69 for each] response rate {Pg. 12}.

- More than three-fourths (76%) [52 out of 69] of provider perspective respondents have the least confidence when it comes to their patient's/client's figuring out what they would have to pay for their healthcare needs in the next year when obtaining health insurance (by providing a score of 1 or 2, on a 1 to 5 scale). The provider respondents were instructed that emergencies were not to be taken into consideration when responding to this question. {Pg.68}.

- When provider perspective respondents were asked how confident they were with their patients'/clients' familiarity with health insurance terms, the terms they felt might be most difficult for patients/clients to understand were (by having the lowest mean score on a scale of 1 to 5 scale):
  1. Health insurance formulary (1.78) {Pg. 75}
  2. Healthcare navigator (2.04) {Pg. 78}
  3. Out-of-pocket maximum (2.14) {Pg. 74}
- More than half of the provider perspective respondents (57%) [39 out of 69] offices'/departments provide resources to help educate patients/clients on health insurance terms. {Pg. 81}.

- When provider perspective respondents were asked what level of knowledge their patients/clients have regarding their out-of-pocket costs, they felt patients/clients were least knowledgeable about (by providing a score of 1 or 2, on a 1 to 5 scale):
  1. Finding out if they must meet a deductible for healthcare services (71%) [49 out of 69] {Pg. 89}
  2. Understanding what they would have to pay for emergency room visits (64%) [44 out of 69] {Pg. 85}
  3. Knowing which doctors and hospitals participate in their health plan (57%) [39 out of 69] {Pg. 90}

❖This bullet style indicates an aggregate finding.
➢This bullet style indicates a finding from Medicaid and uninsured respondents.

Provider Perspective Survey Executive Summary

- Slightly more than half (52% or 17 out of 33) of provider perspective respondents felt confident that their patients/clients would have their insurance card with them when visiting a primary care provider (by providing a score of 4 or 5, on a 1 to 5 scale). {Pg.94}.

- The majority (80%) [28 out of 69] of clinical respondents believe that their patients/clients are not aware of the process of appealing a denied insurance claim. {Pg.96}.

❖This bullet style indicates an aggregate finding.
➢This bullet style indicates a finding from Medicaid and uninsured respondents.

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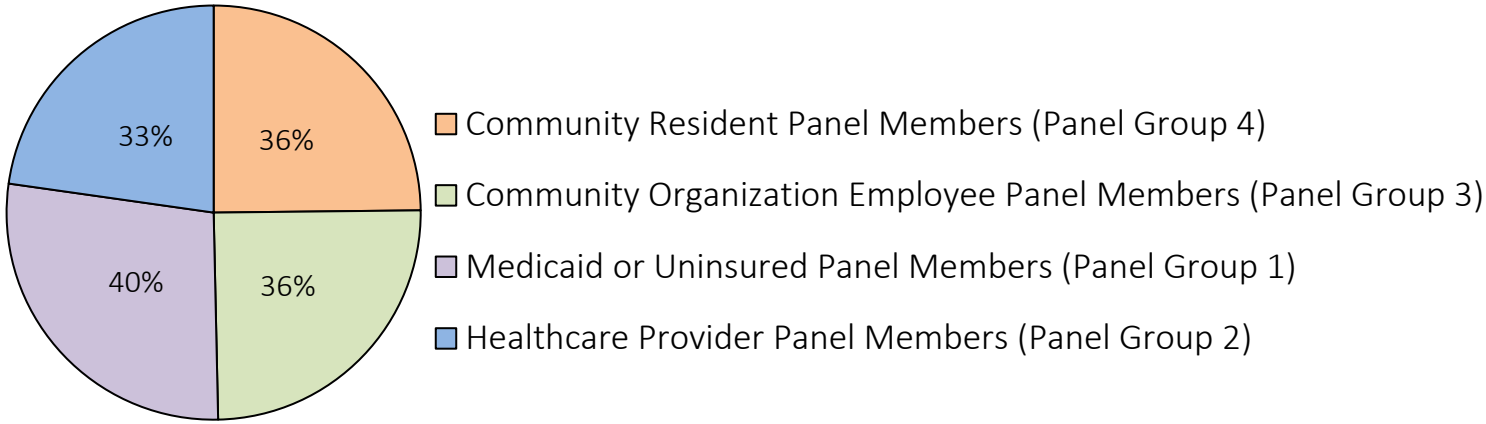
Survey Respondents: **Group Breakdown** n171		
Category:	n	%
Community Resident Panel Members (Panel Group 4)	62	36%
Medicaid or Uninsured Panel Members (Panel Group 1)	40	24%
Community Organization Employee Panel Members (Panel Group 3)	36	21%
Healthcare Provider Panel Members (Panel Group 2)	33	19%



Survey Respondents: **County Breakdown** n=171				
Category:	Live In		Work In	
	n	%	n	%
Broome	57	33%	58	34%
Tompkins	25	15%	23	13%
Cortland	23	12%	15	9%
Tioga	13	8%	6	4%
Chenango	10	6%	11	6%
Steuben	8	5%	9	5%
Chemung	6	4%	5	3%
Delaware	6	4%	5	3%
Schuyler	4	2%	6	4%
Other	20	11%	33	19%

❖ Note: Respondents can join the panel if they work or live in one of the counties listed above. Additionally, not all current panel members have provided county information.

	Q1a: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how confident*** are you with your ability to obtain health insurance: I know where to go for help if I'm having trouble affording or finding health insurance? n102; Single Response										
	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	6	6%	7	7%	13	13%	28	27%	48	47%	4.03
Medicaid or Uninsured Panel Members; n=40	4	10%	-	-	5	12%	10	25%	21	53%	4.10
Community Resident Panel Members; n=62	2	3%	7	11%	8	13%	18	29%	27	44%	3.98

Q1b: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how confident*** are you with your ability to obtain health insurance: I know how to figure out how I would pay for my health care needs in the next year, not including emergencies?
n102; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	8	8%	12	12%	16	16%	19	18%	47	46%	3.83
Medicaid or Uninsured Panel Members; n=40	7	18%	1	2%	8	20%	10	25%	14	35%	3.58
Community Resident Panel Members; n=62	1	2%	11	18%	8	13%	9	14%	33	53%	4.00

Q1c: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how confident*** are you with your ability to obtain health insurance: I know what questions to ask to choose the best health insurance plan for me?
n102; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	8	8%	10	10%	22	22%	31	30%	31	30%	3.66
Medicaid or Uninsured Panel Members; n=40	7	18%	1	2%	9	22%	10	25%	13	33%	3.52
Community Resident Panel Members; n=62	1	2%	9	14%	13	21%	21	34%	18	29%	3.74

Q1d: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how confident*** are you with your ability to obtain health insurance: I know where to find the information needed to choose a health plan?
n102; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	6	6%	9	9%	17	17%	32	31%	38	37%	3.85
Medicaid or Uninsured Panel Members; n=40	5	13%	3	7%	7	17%	10	25%	15	38%	3.67
Community Resident Panel Members; n=62	1	2%	6	10%	10	16%	22	35%	23	37%	3.97

	Q2a: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," *how familiar* are you with the following health insurance terms: Health insurance premium? n102; Single Response										
	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	6	6%	4	4%	8	8%	12	12%	72	70%	4.37
Medicaid or Uninsured Panel Members; n=40	6	15%	1	2%	6	15%	6	15%	21	53%	3.88
Community Resident Panel Members; n=62	-	-	3	5%	2	3%	6	10%	51	82%	4.69

	Q2b: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," *how familiar* are you with the following health insurance terms: A copayment? n102; Single Response										
	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	2	2%	1	1%	5	5%	12	12%	82	80%	4.68
Medicaid or Uninsured Panel Members; n=40	2	5%	1	2%	4	10%	4	10%	29	73%	4.42
Community Resident Panel Members; n=62	-	-	-	-	1	2%	8	13%	53	85%	4.84

Q2c: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how familiar*** are you with the following health insurance terms: Annual health insurance deductible?
n102; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	5	5%	6	6%	10	10%	16	15%	65	64%	4.27
Medicaid or Uninsured Panel Members; n=40	5	12%	4	10%	4	10%	6	15%	21	53%	3.85
Community Resident Panel Members; n=62	-	-	2	3%	6	10%	10	16%	44	71%	4.55

	Q2d: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," *how familiar* are you with the following health insurance terms: Out-of-pocket maximum? n102; Single Response										
	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	7	7%	8	8%	10	10%	16	15%	61	60%	4.14
Medicaid or Uninsured Panel Members; n=40	7	18%	4	10%	3	7%	6	15%	20	50%	3.70
Community Resident Panel Members; n=62	-	-	4	7%	7	11%	10	16%	41	66%	4.42

Q2e: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how familiar*** are you with the following health insurance terms: Health insurance formulary?
n102; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	32	31%	14	14%	20	20%	9	9%	27	26%	2.85
Medicaid or Uninsured Panel Members; n=40	14	35%	7	18%	5	12%	4	10%	10	25%	2.73
Community Resident Panel Members; n=62	18	29%	7	11%	15	24%	5	8%	17	28%	2.94

Q2f: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," *how familiar* are you with the following health insurance terms: Prescription (Medication) coverage?
n102; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	3	3%	1	1%	11	11%	17	17%	70	68%	4.47
Medicaid or Uninsured Panel Members; n=40	3	8%	-	-	6	15%	7	17%	24	60%	4.22
Community Resident Panel Members; n=62	-	-	1	2%	5	8%	10	16%	46	74%	4.63

Q2g: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how familiar*** are you with the following health insurance terms: Provider network?
n102; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	7	7%	3	3%	6	6%	19	18%	67	66%	4.33
Medicaid or Uninsured Panel Members; n=40	5	13%	1	2%	3	7%	8	20%	23	58%	4.08
Community Resident Panel Members; n=62	2	3%	2	3%	3	5%	11	18%	44	71%	4.50

Q2h: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how familiar*** are you with the following health insurance terms: Healthcare navigator?
n102; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	11	11%	15	15%	17	16%	15	15%	44	43%	3.65
Medicaid or Uninsured Panel Members; n=40	6	15%	6	15%	5	12%	5	13%	18	45%	3.58
Community Resident Panel Members; n=62	5	8%	9	15%	12	19%	10	16%	26	42%	3.69

Q2i: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how familiar*** are you with the following health insurance terms: Primary Care Provider (PCP)?
n102; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	1	1%	1	1%	4	4%	11	11%	85	83%	4.75
Medicaid or Uninsured Panel Members; n=40	1	3%	-	-	3	7%	5	12%	31	78%	4.63
Community Resident Panel Members; n=62	-	-	1	2%	1	2%	6	9%	54	87%	4.82

Q2j: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how familiar*** are you with the following health insurance terms: Specialty Care Provider (SCP)?
n102; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	6	6%	4	4%	11	11%	12	12%	69	67%	4.31
Medicaid or Uninsured Panel Members; n=40	3	8%	2	5%	4	10%	6	15%	25	62%	4.20
Community Resident Panel Members; n=62	3	5%	2	3%	7	11%	6	10%	44	71%	4.39

	Q2k: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," *how familiar* are you with the following health insurance terms: In network? n102; Single Response										
	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	5	5%	2	2%	7	7%	16	16%	72	70%	4.45
Medicaid or Uninsured Panel Members; n=40	4	10%	1	3%	3	7%	7	17%	25	63%	4.20
Community Resident Panel Members; n=62	1	2%	1	2%	4	7%	9	15%	47	76%	4.61

Q3a: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how important*** are the following when comparing health insurance plans: Knowing if the plan covers costs such as inpatient hospital stays?
n102; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	3	3%	2	2%	7	7%	21	20%	69	68%	4.48
Medicaid or Uninsured Panel Members; n=40	3	8%	1	2%	2	5%	9	22%	25	63%	4.30
Community Resident Panel Members; n=62	-	-	1	2%	5	8%	12	19%	44	71%	4.60

Q3b: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how important*** are the following when comparing health insurance plans: Understanding what I would have to pay for emergency room visits? n102; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	5	5%	4	4%	6	6%	20	19%	67	66%	4.37
Medicaid or Uninsured Panel Members; n=40	4	10%	2	5%	-	-	12	30%	22	55%	4.15
Community Resident Panel Members; n=62	1	2%	2	3%	6	10%	8	13%	45	72%	4.52

Q3c: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how important*** are the following when comparing health insurance plans: Understanding what I would have to pay for primary care visits? n102; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	3	3%	1	1%	2	2%	18	18%	78	76%	4.64
Medicaid or Uninsured Panel Members; n=40	3	8%	1	2%	1	2%	8	20%	27	68%	4.38
Community Resident Panel Members; n=62	-	-	-	-	1	2%	10	16%	51	82%	4.81

Q3d: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how important*** are the following when comparing health insurance plans: Understanding what I would have to pay for specialist visits?
n102; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	4	4%	2	2%	3	3%	19	19%	74	72%	4.54
Medicaid or Uninsured Panel Members; n=40	3	8%	1	2%	2	5%	9	22%	25	63%	4.30
Community Resident Panel Members; n=62	1	2%	1	2%	1	1%	10	16%	49	79%	4.69

Q3e: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how important*** are the following when comparing health insurance plans: Understanding what I would have to pay for medications?
n102; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	5	5%	1	1%	5	5%	17	17%	74	72%	4.51
Medicaid or Uninsured Panel Members; n=40	4	10%	1	3%	-	-	6	15%	29	72%	4.38
Community Resident Panel Members; n=62	1	2%	-	-	5	8%	11	18%	45	72%	4.60

Q3f: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how important*** are the following when comparing health insurance plans: Understanding what I would have to pay for laboratory or radiology tests? n102; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	5	5%	3	3%	9	9%	19	18%	66	65%	4.35
Medicaid or Uninsured Panel Members; n=40	4	10%	1	2%	4	10%	6	15%	25	63%	4.17
Community Resident Panel Members; n=62	1	2%	2	3%	5	8%	13	21%	41	66%	4.47

Q3g: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how important*** are the following when comparing health insurance plans: Finding out if I must meet a deductible for health care services?
n102; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	4	4%	4	4%	6	6%	20	19%	68	67%	4.41
Medicaid or Uninsured Panel Members; n=40	4	10%	1	3%	2	5%	9	22%	24	60%	4.20
Community Resident Panel Members; n=62	-	-	3	5%	4	6%	11	18%	44	71%	4.55

Q3h: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how important*** are the following when comparing health insurance plans: Learning which doctors and hospitals participate in each health insurance plan?
n102; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	5	5%	4	4%	5	5%	14	14%	74	72%	4.45
Medicaid or Uninsured Panel Members; n=40	3	8%	2	5%	1	2%	9	22%	25	63%	4.28
Community Resident Panel Members; n=62	2	3%	2	3%	4	7%	5	8%	49	79%	4.56

Q4a: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how likely*** are you to do the following actions when using your health insurance plan: Look into what your health plan will and will not cover before you get health care services?
n102; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	8	8%	4	4%	16	16%	23	22%	51	50%	4.03
Medicaid or Uninsured Panel Members; n=40	2	5%	2	5%	6	15%	9	22%	21	53%	4.13
Community Resident Panel Members; n=62	6	10%	2	3%	10	16%	14	23%	30	48%	3.97

Q4b: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how likely*** are you to do the following actions when using your health insurance plan: Find out if a doctor is In-network (plan participating)? n102; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	5	5%	4	4%	6	6%	15	15%	72	70%	4.42
Medicaid or Uninsured Panel Members; n=40	2	5%	1	3%	4	10%	9	22%	24	60%	4.30
Community Resident Panel Members; n=62	3	5%	3	5%	2	3%	6	10%	48	77%	4.50

	Q4c: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," *how likely* are you to do the following actions when using your health insurance plan: See if you can keep your current provider(s)? n102; Single Response										
	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	3	3%	4	4%	6	6%	18	17%	71	70%	4.47
Medicaid or Uninsured Panel Members; n=40	1	3%	2	5%	2	5%	9	22%	26	65%	4.42
Community Resident Panel Members; n=62	2	3%	2	3%	4	6%	9	15%	45	73%	4.50

Q4d: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how likely*** are you to do the following actions when using your health insurance plan: Contact your insurance company when looking for a particular participating provider (e.g. gender, speaks language, understands my abilities)?
n102; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	14	14%	9	9%	24	23%	22	22%	33	32%	3.50
Medicaid or Uninsured Panel Members; n=40	5	13%	3	7%	8	20%	11	27%	13	33%	3.60
Community Resident Panel Members; n=62	9	14%	6	10%	16	26%	11	18%	20	32%	3.44

	Q4e: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how likely*** are you to do the following actions when using your health insurance plan: Contact your insurance to learn what medical services your health plan covers? n102; Single Response										
	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	4	4%	7	7%	25	24%	26	26%	40	39%	3.89
Medicaid or Uninsured Panel Members; n=40	1	3%	3	7%	7	17%	12	30%	17	43%	4.03
Community Resident Panel Members; n=62	3	5%	4	6%	18	29%	14	23%	23	37%	3.81

Q4f: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how likely*** are you to do the following actions when using your health insurance plan: Visit an insurance company's website, to look for information prior to contacting them via phone or in-person (e.g. benefit coverage, provider participation)?
n102; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	5	5%	9	9%	15	15%	21	20%	52	51%	4.04
Medicaid or Uninsured Panel Members; n=40	2	5%	2	5%	8	20%	12	30%	16	40%	3.95
Community Resident Panel Members; n=62	3	5%	7	11%	7	11%	9	15%	36	58%	4.10

Q5: What would help you better understand your health insurance coverage?
n102; Open-Ended

Medicaid or Uninsured Panel Members:

- A pamphlet with categorized summary plan information and cost breakdown examples.
- A printed chart.
- Being able to go online for questions.
- Booklets laying it all out for me, something I can reference.
- Charts.
- Either a group management with insurance providers explaining.
- I call the number on the card and ask a representative. But I don't like constantly making calls and being placed on hold or transferred from one person to another constantly.
- I can't think of anything.
- I feel comfortable with my health insurance knowledge.
- I pretty much understand it.
- If it's written in plain English and not in medical terminology.
- Insurance company to better inform people.
- Insurance navigator.
- Just to have a knowledgeable person to answer questions.
- Making sure my doctor(s) told me up front what to expect as far as cost is concerned.
- Maybe a website that could answer any questions.
- MediGap what is it.
- More employer in-services (employers taking more initiative to inform their employees).
- Nothing.
- Nothing.
- Nothing I know how to research.

Q5: What would help you better understand your health insurance coverage?
n102; Open-Ended

Medicaid or Uninsured Panel Members:

- Nothing I understand my health insurance coverage.
- Personalized print out.
- Plain, simple language.
- Plans written in not so much unknown terms/words.
- Probably some classes educating in options for people with very low income.
- Quick sheet.
- Requirements that the plan information is provided in clear, layman's terms and easily accessible online.
- Simplified language simplifies how services and insurance work together. Simplify how to obtain these services.
- Simplified terms.
- Simplify.
- Someone knowing how it works.
- Step by step instructions, like in a flyer, in simple language.
- Talking with the provider.
- The formulary thing - simple language.
- Things written clearly in a language that all can understand.
- Universal healthcare.
- Web site.
- When getting a pre auth then getting said bill for day $135 grand why are they only paying say $1,200 and I am left trying to negotiate that bill with surgeons because it's a discounted price and my surgeon's office is now billing me. But it was approved ahead of time.
- Yes, I have straight Medicaid and Medicare, which sadly, few providers take.

Q5: What would help you better understand your health insurance coverage?
n102; Open-Ended

Community Resident Panel Members:

- A chart of terms in simple language.
- A formal list of faq.
- A more detailed booklet explaining policy coverage.
- A plan to use prescriptions that keep my husband out of the donut hole longer. He is in the donut hole by March every year.
- A small outline of coverage instead of a large plan book.
- A well-organized web site with a drop down for topics where I can get details.
- According to United Health Care Essential Plan and the New York State department of Health, prosthodontists and endodontist should be covered. However, after two hours of phone calls, there is no one in a 100-mile distance, "in network" that will assist me. I am looking at a $9,000 dental procedure that I cannot find help with. I broke my #7 tooth off at the gum line. The two cleanings a year and fillings will not be enough, and I do not know what to do next.
- Accurate information on the web site.
- Basic information about costs and what is covered.
- Basic information on what's covered and what's not.
- Being able to easily find certain procedures or services when looking at a plan's benefits.
- Better job of keeping up with changes.
- Better, slower video presentations online.
- Consistency amongst plans.
- Don't know.
- Don't know.
- Don't know.

Q5: What would help you better understand your health insurance coverage?
n102; Open-Ended

Community Resident Panel Members:

- Easier to navigate website.
- Easy to read pamphlet describing common terms.
- Easy to understand charts.
- Email information and news.
- Explanations of terms or writing in lay terms for patients. Scenarios that provide examples a patient can relate to.
- Helping to read and understand explanation of benefit statements, in particular complex ones that have many services.
- I am comfortable with what I need to know.
- I am very knowledgeable.
- I currently feel I have a good understanding.
- I do not know.
- I don't know how to use the online office visit, so it keeps me from doing it and also, I don't have internet in my area.
- I feel I have a very good understanding of it.
- I look through the plan documents first and call the provider if still not clear. Has always worked well for me.
- I need someone to explain to me; I am overwhelmed and confused with trying to understand any part of insurance in a thick packet of insurance "speak".
- I pretty much understand it.
- I think I understand it pretty good. I billed insurance for a hospital for close to 8 years and got a lot of my information there. It is very hard to navigate for people who do not have that experience though.
- I understand it pretty well.
- I understand my coverage through work now but if I retire before I turn 65 like I plan, I will find out what I need to know to understand getting coverage for a year before I can get Medicare.

Q5: What would help you better understand your health insurance coverage?
n102; Open-Ended

Community Resident Panel Members:

- If it was written in easy to read sentences and not as complicated.
- If it were simpler. If coverages, etc. weren't changing each year, if there were single-payer insurance.
- If plans didn't change every year.
- Information from network.
- Knowledgeable and accurate information given when questions are asked by me to the insurance company. Not getting different answers from different representatives.
- Laid out in plain English.
- Larger print in the booklets (and I'm not elderly!) - it is so condensed and hard to read the plan details. I feel like I select blindly and don't have a good sense of what I've signed up for until I go to use it.
- Make it simple.
- More detail, less legal.
- More information on out-of-pocket maximums and deductibles for surgeries and emergency care.
- Nothing.
- Nothing.
- Nothing.
- Nothing.
- Nothing.
- Nothing.
- Nothing.
- Nothing.
- Nothing. I know all that I need! Thanks!
- Shorter, more concise wording.
- Simple one-page chart.

Q5: What would help you better understand your health insurance coverage?
n102; Open-Ended

Community Resident Panel Members:

- Simpler language for us simple people.
- Single payer.
- Speaking to a real person, either at home with materials in front of me, giving an overview, or by phone at least.
- Statements seem to be meant to confuse you. Clear statements explaining what was covered, what was not, and why.
- The use of simple words when explaining.
- Upfront info on plan.
- Why they let young inexperienced determine if a claim is approved or denied.

Q6: How would you like to obtain health insurance benefit coverage assistance from someone, or get help understanding health insurance benefits or coverage? n102; Multiple Response						
Category:	Total %		Medicaid or Uninsured Panel Members n40		Community Resident Panel Members n62	
	n	%	n	%	n	%
Speaking with someone face-to-face	58	57%	24	60%	34	55%
Speaking with someone over the phone	57	56%	18	45%	39	63%
Using online “chat” function	42	41%	17	43%	25	40%
Other	10	10%	4	10%	6	10%

Q6 (CONTINUED): Other?
n10; Open-Ended

Medicaid or Uninsured Panel Members:

- Emails.
- Print format sent to my house.
- Through a text feature.
- Web based information.

Community Resident Panel Members:

- Give detail and clear online source for reading and understanding.
- Mailing.
- Online documents.
- Reading plan provisions.
- Web based.
- Written and website.

Q7a: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how likely*** are you to do the following actions when using/selecting a primary care provider: <u>If assigned a new provider, research the provider in advance of an office visit</u>?
n102; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	2	2%	6	6%	14	14%	20	19%	60	59%	4.27
Medicaid or Uninsured Panel Members; n=40	1	3%	2	5%	3	7%	9	22%	25	63%	4.38
Community Resident Panel Members; n=62	1	2%	4	6%	11	18%	11	18%	35	56%	4.21

Q7b: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how likely*** are you to do the following actions when using/selecting a primary care provider: <u>If new PCP, call or meet the provider beforehand to decide that provider is the "right fit"</u>?
n102; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	15	15%	15	15%	27	26%	18	18%	27	26%	3.26
Medicaid or Uninsured Panel Members; n=40	5	13%	3	8%	7	17%	9	22%	16	40%	3.70
Community Resident Panel Members; n=62	10	16%	12	19%	20	32%	9	15%	11	18%	2.98

	Q7c: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how likely*** are you to do the following actions when using/selecting a primary care provider: <u>Complete all requested forms in advance of the provider visit</u>? n102; Single Response										
	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	2	2%	6	6%	7	7%	18	17%	69	68%	4.43
Medicaid or Uninsured Panel Members; n=40	1	2%	1	2%	4	10%	5	13%	29	73%	4.50
Community Resident Panel Members; n=62	1	2%	5	8%	3	5%	13	21%	40	64%	4.39

	Q7d: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," *how likely* are you to do the following actions when using/selecting a primary care provider: Have my insurance card with me for a provider visit? n102; Single Response										
	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	1	1%	1	1%	3	3%	7	7%	90	88%	4.80
Medicaid or Uninsured Panel Members; n=40	1	3%	-	-	2	5%	5	12%	32	80%	4.67
Community Resident Panel Members; n=62	-	-	1	2%	1	2%	2	3%	58	93%	4.89

	Q7e: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how likely*** are you to do the following actions when using/selecting a primary care provider: <u>Arrive at the visit with a list of questions to ask my provider</u>? n102; Single Response										
	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	2	2%	4	4%	10	10%	32	31%	54	53%	4.29
Medicaid or Uninsured Panel Members; n=40	1	3%	2	5%	4	10%	12	30%	21	52%	4.25
Community Resident Panel Members; n=62	1	2%	2	3%	6	10%	20	32%	33	53%	4.32

Q7f: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how likely*** are you to do the following actions when using/selecting a primary care provider: <u>Bring my medications or a list of them with me to the office</u>?
n102; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	3	3%	2	2%	9	9%	18	17%	70	69%	4.47
Medicaid or Uninsured Panel Members; n=40	2	5%	-	-	3	7%	7	18%	28	70%	4.47
Community Resident Panel Members; n=62	1	2%	2	3%	6	9%	11	18%	42	68%	4.47

Q8a: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how confident*** are you to do the following actions related to your health insurance: Contacting your health insurance company to change providers? n102; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	9	9%	15	15%	10	10%	25	24%	43	42%	3.76
Medicaid or Uninsured Panel Members; n=40	3	8%	4	10%	2	5%	13	32%	18	45%	3.98
Community Resident Panel Members; n=62	6	10%	11	18%	8	13%	12	19%	25	40%	3.63

	Q8b: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," *how confident* are you to do the following actions related to your health insurance: Contacting your health insurance company if you have a coverage problem or question? n102; Single Response										
	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	6	6%	4	4%	7	7%	26	25%	59	58%	4.25
Medicaid or Uninsured Panel Members; n=40	3	8%	2	5%	3	7%	8	20%	24	60%	4.20
Community Resident Panel Members; n=62	3	5%	2	3%	4	6%	18	29%	35	57%	4.29

Q8c: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how confident*** are you to do the following actions related to your health insurance: Reviewing the statement (called an explanation of benefits or EOB) you receive from your health insurance company?
n102; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	9	9%	9	9%	6	6%	25	24%	53	52%	4,02
Medicaid or Uninsured Panel Members; n=40	4	10%	8	20%	2	5%	8	20%	18	45%	3.70
Community Resident Panel Members; n=62	5	8%	1	2%	4	6%	17	27%	35	57%	4.23

Q8d: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how confident*** are you to do the following actions related to your health insurance: Figuring out your share of the cost for care after your health insurance pays its share?
n102; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	7	7%	16	16%	16	16%	19	18%	44	43%	3.75
Medicaid or Uninsured Panel Members; n=40	6	15%	7	17%	5	13%	7	17%	15	38%	3.45
Community Resident Panel Members; n=62	1	2%	9	14%	11	18%	12	19%	29	47%	3.95

	Q9: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," *how aware* are you with the process of appealing the denied insurance claim when your health insurance plan refuses or denies to pay for a service? n102; Single Response										
	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	21	21%	17	17%	17	17%	22	21%	25	24%	3.13
Medicaid or Uninsured Panel Members; n=40	8	20%	5	12%	4	10%	10	25%	13	33%	3.38
Community Resident Panel Members; n=62	13	21%	12	20%	13	21%	12	19%	12	19%	2.97

Q10: If your doctor says you need a service and your health insurance says it doesn't cover it, what would you do?
n102; Open-Ended

Medicaid or Uninsured Panel Members:

- Advocate for that to change.
- Appeal or change providers.
- Ask doctor to appeal my case.
- Ask for a service that takes my insurance.
- Ask for something else.
- Ask if there is any financial assistance program to help me
- Ask the doctor if there's any method of getting assistance for the service, like Charity care or any programs that can help me.
- Ask them to cover it.
- Ask what my options are.
- Call insurance company or reach out to organization for help.
- Call insurer and also ask doctor to advocate for me.
- Call to see why, then appeal.
- Call in and ask why.
- Consider paying out of pocket, possibly taking out a personal loan or paying with a credit card.
- Discuss alternatives with doctor.
- Figure out why it doesn't cover it.
- Find out if there are other options for the service and find out how to cover the service if it's my only option.
- Find out if their financial assistance of some sort.
- Get it anyway because I have financial assistance through my hospital.
- Get my doctor to appeal it.
- Go back to my PCP for other options if it's a medical necessity issue.
- Go without.

Q10: If your doctor says you need a service and your health insurance says it doesn't cover it, what would you do?
n102; Open-Ended

Medicaid or Uninsured Panel Members:

- I ask if the doctor office can help me get it covered.
- I fight. I have a child who has had 97 brain surgeries and we fight all the time. I'm still fighting for bills not paid by insurance from 2013 that had pre auths.
- I would appeal it and have my provider call and explain why the service is needed.
- I would ask the doctor to send in an appeal.
- I'd find out the cost and consult with the insurance.
- It depends on whether I think the service is a must have or a "maybe" - if must, I'd figure out a way to pay for it. If possible, to not have, I wouldn't do it.
- My parents are supportive, and they would help me.
- Not sure.
- Nothing.
- Nothing but try to talk to someone.
- Probably get the service anyway and go into debt.
- Question the provider what else can be done to get the claim paid.
- Search for alternative.
- Search for an insurance that does then switch, I am presently dealing with that regarding dentistry.
- See if there are other options.
- Speak with my health insurance company.
- Talk to the doctor about my options and talk to a hospital representative about what I can do.
- You're screwed.

Q10: If your doctor says you need a service and your health insurance says it doesn't cover it, what would you do?
n102; Open-Ended

Community Resident Panel Members:

- (Rant and rave.) Call the insurance company to find out how to appeal, unless the doctor's staff can do it for me.
- Appeal and hope.
- Appeal the claim.
- Appeal the ins. co. Which I have done in the past! and won.
- Appeal the process and find out why.
- Appeal to health ins company.
- Appeal to the health insurance company and ask if there is something they would cover. I would ask the doctor if there was an alternative service that might be covered, and finally I would find out what my cost would be and decide if I felt the service was really necessary and if I could afford it.
- Appeal, and/or look for alternate payment support or treatment options.
- Ask again!
- Ask doctor's office for guidance.
- Ask my healthcare provider to contact insurance agency to explain why they feel I need it.
- Ask the MD to submit documentation and intervene on my behalf.
- Call insurance provider and doctor until matter is decided to me satisfaction.
- Contact the insurance company to find out why they don't cover it.
- Contact the insurance company to see what maybe an option.
- Contact the provider and then the doctor.
- Cry a lot. New York state department of health in Tioga County I have one "choice" of insurance, take it or leave it.
- Delay or put off the service unless absolutely necessary.
- Depends on the service and why it isn't covered, what justification I have to appeal.
- Discuss and research other options.
- Don't get the service.

Q10: If your doctor says you need a service and your health insurance says it doesn't cover it, what would you do?
n102; Open-Ended

Community Resident Panel Members:

- Explore options/costs of getting service.
- Find out how to appeal it.
- Get statements from both doctor and Ins and contact an attorney.
- Go back to the doctor to find another solution.
- I call my caseworker and ask for help.
- I would ask the insurance company for an exception. By calling and talking to the insurance company. If they don't cover it then. Look for an alternative treatment perhaps a medical college where it may cost less for treatment.
- I would contact insurance company and discuss my coverage, then possibly look for an alternative way if not covered.
- I would do further insurance research and then work with my doctor to find out how to get it approved.
- I'd be on the phone with the insurance company.
- I'd investigate further to find out the cost to continue or get a 2nd opinion.
- I'd try to skip the service. Health procedures are expensive, and I don't think providers know all the costs. Providers charge what they want, and insurers pay as little as they can leaving the patient to pay a lot.
- If it's very important I contact my health insurance provider and plead my case.
- It depends on what it is for.
- May give up the service.
- Not do it or try to figure out how to pay for it.
- Not do it.
- Pay for it out of pocket if it's necessary for my health.
- Pay out of pocket or go without.
- Probably go without it.
- Probably not get it.

Q10: If your doctor says you need a service and your health insurance says it doesn't cover it, what would you do?
n102; Open-Ended

Community Resident Panel Members:

- Provide document to explain why procedure requested.
- Research alternatives.
- Research other options.
- Research other options.
- Second opinion.
- Second opinion.
- See if I can afford it on my own.
- Seek alternative.
- Speak to my provider if more information can be submitted to change the decision or see if there are different options.
- Talk to both of them to try to figure out my options.
- Talk to doctor again.
- Talk to my doctor.
- Talk to someone to find out why not covered and what I can do to get coverage.
- Talk to the doctor to see if he can suggest another service that is covered.
- Try negotiating with insurance company.
- Try to appeal the denial with facts and information to back up why it is needed.
- Try to contact the insurance company to get them to cover it.
- Try to find a provider to cover it.
- Understand why it is necessary and call the insurance company.
- Use the appeals process.
- Worry.

	Q1a: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how confident*** you are with your patient's/client's ability to obtain health insurance? Patients/clients know where to go for help if having trouble affording health insurance. n69; Single Response												
	Not at all 1		2		3		4		Very 5		Don't know		Mean Score
	n	%	n	%	n	%	n	%	n	%	n	%	n
Aggregate	8	12%	33	48%	17	24%	7	10%	2	3%	2	3%	2.54
Healthcare Provider Panel Members; n=33	6	18%	15	46%	8	24%	3	9%	-	-	1	3%	2.36
Community Organization Employee Panel Members; n=36	2	6%	18	50%	9	25%	4	11%	2	6%	1	2%	2.69

Q1b: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how confident*** you are with your patient's/client's ability to obtain health insurance? Patients/clients know how to figure out what they would pay for their health care needs in the next year, not including emergencies.
n69; Single Response

	Not at all 1		2		3		4		Very 5		Don't know		Mean Score
	n	%	n	%	n	%	n	%	n	%	n	%	n
Aggregate	26	38%	26	38%	12	18%	3	4%	1	1%	1	1%	1.99
Healthcare Provider Panel Members; n=33	13	39%	12	37%	6	18%	-	-	1	3%	1	3%	2.00
Community Organization Employee Panel Members; n=36	13	36%	14	39%	6	17%	3	8%	-	-	-	-	1.97

Q1c: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how confident*** you are with your patient's/client's ability to obtain health insurance? Patients/clients know what questions to ask to choose the best health plan for them.
n69; Single Response

	Not at all 1		2		3		4		Very 5		Don't know		Mean Score
	n	%	n	%	n	%	n	%	n	%	n	%	n
Aggregate	17	25%	37	54%	8	12%	3	4%	2	3%	2	3%	2.16
Healthcare Provider Panel Members; n=33	10	30%	16	49%	3	9%	-	-	2	6%	2	6%	2.21
Community Organization Employee Panel Members; n=36	7	19%	21	58%	5	14%	3	8%	-	-	-	-	2.11

Q1d: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how confident*** you are with your patient's/client's ability to obtain health insurance? Patients/clients know where to find the information needed to choose a health plan.
n69; Single Response

	Not at all 1		2		3		4		Very 5		Don't know		Mean Score
	n	%	n	%	n	%	n	%	n	%	n	%	n
Aggregate	12	18%	42	61%	10	15%	3	4%	1	1%	1	1%	2.16
Healthcare Provider Panel Members; n=33	6	18%	20	61%	5	15%	1	3%	-	-	1	3%	2.15
Community Organization Employee Panel Members; n=36	6	17%	22	61%	5	14%	2	5%	1	3%	-	-	2.17

	Q2a: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," please indicate *your confidence* that your patients/clients are familiar with the following health insurance terms: Health insurance premium? n69; Single Response										
	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	7	10%	18	26%	26	38%	12	17%	6	9%	2.88
Healthcare Provider Panel Members; n=33	4	12%	11	34%	8	24%	6	18%	4	12%	2.85
Community Organization Employee Panel Members; n=36	3	8%	7	19%	18	50%	6	17%	2	6%	2.92

	Q2b: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," please indicate *your confidence* that your patients/clients are familiar with the following health insurance terms: A copayment? n69; Single Response										
	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	4	6%	11	16%	22	32%	20	29%	12	17%	3.36
Healthcare Provider Panel Members; n=33	2	6%	7	21%	7	21%	12	37%	5	15%	3.33
Community Organization Employee Panel Members; n=36	2	6%	4	11%	15	42%	8	22%	7	19%	3.39

	Q2c: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," please indicate *your confidence* that your patients/clients are familiar with the following health insurance terms: Annual health insurance deductible? n69; Single Response										
	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	11	16%	24	35%	24	35%	7	10%	3	4%	2.52
Healthcare Provider Panel Members; n=33	6	18%	11	33%	10	30%	5	15%	1	3%	2.52
Community Organization Employee Panel Members; n=36	5	14%	13	36%	14	39%	2	6%	2	6%	2.53

	Q2d: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," please indicate *your confidence* that your patients/clients are familiar with the following health insurance terms: Out-of-pocket maximum? n69; Single Response										
	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	21	30%	25	36%	17	25%	4	6%	2	3%	2.14
Healthcare Provider Panel Members; n=33	6	27%	13	40%	6	18%	4	12%	1	3%	2.24
Community Organization Employee Panel Members; n=36	12	33%	12	33%	11	31%	-	-	1	3%	2.06

Q2e: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," please indicate ***your confidence*** that your patients/clients are familiar with the following health insurance terms: Health insurance formulary?
n69; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	32	46%	24	35%	10	15%	2	3%	1	1%	1.78
Healthcare Provider Panel Members; n=33	14	42%	13	40%	4	12%	1	3%	1	3%	1.85
Community Organization Employee Panel Members; n=36	18	50%	11	30%	6	17%	1	3%	-	-	1.72

	Q2f: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," please indicate ***your confidence*** that your patients/clients are familiar with the following health insurance terms: Prescription (Medication) coverage? n69; Single Response										
	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	7	10%	16	23%	27	39%	13	19%	6	9%	2.93
Healthcare Provider Panel Members; n=33	3	9%	8	24%	14	43%	5	15%	3	9%	2.91
Community Organization Employee Panel Members; n=36	4	11%	8	22%	13	36%	8	22%	3	9%	2.94

Q2g: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," please indicate ***your confidence*** that your patients/clients are familiar with the following health insurance terms: Provider network?
n69; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	10	15%	27	39%	22	32%	7	10%	3	4%	2.51
Healthcare Provider Panel Members; n=33	5	15%	14	42%	11	34%	2	6%	1	3%	2.39
Community Organization Employee Panel Members; n=36	5	14%	13	36%	11	30%	5	14%	2	6%	2.61

	Q2h: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," please indicate ***your confidence*** that your patients/clients are familiar with the following health insurance terms: Healthcare navigator? n69; Single Response										
	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	21	30%	30	44%	13	19%	4	6%	1	1%	2.04
Healthcare Provider Panel Members; n=33	12	36%	15	46%	5	15%	1	3%	-	-	1.85
Community Organization Employee Panel Members; n=36	9	25%	15	42%	8	22%	3	8%	1	3%	2.22

	Q2i: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," please indicate ***your confidence*** that your patients/clients are familiar with the following health insurance terms: Primary Care Provider (PCP)? n69; Single Response										
	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	3	4%	9	13%	18	26%	25	36%	14	21%	3.55
Healthcare Provider Panel Members; n=33	-	-	5	15%	9	27%	10	31%	9	27%	3.70
Community Organization Employee Panel Members; n=36	3	8%	4	11%	9	25%	15	42%	5	14%	3.42

	Q2j: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," please indicate ***your confidence*** that your patients/clients are familiar with the following health insurance terms: Specialty Care Provider (SCP)? n69; Single Response										
	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	9	13%	15	21%	13	19%	26	38%	6	9%	3.07
Healthcare Provider Panel Members; n=33	3	9%	9	27%	4	12%	14	43%	3	9%	3.15
Community Organization Employee Panel Members; n=36	6	17%	6	17%	9	25%	12	33%	3	8%	3.00

Q3: Does your office/department provide any resources to help educate patients/clients on health insurance terms? n69; Single Response						
Category:	Total %		Healthcare Provider Panel Members n33		Community Organization Employee Panel Members n36	
	n	%	n	%	n	%
Yes	39	57%	17	52%	22	61%
No	30	43%	16	48%	14	39%

Q3a (If YES): Please describe:
n39; Open-Ended

Healthcare Provider Panel Members:

- Care managers provide assistance, refer to OFA if applicable, refer to Lourdes financial assistance.
- Case management.
- Depending on health insurance carrier we give them the correct contact phone number and help with codes/procedure codes they may need for their coverage conversation.
- Health Home navigator.
- MCO Navigator is available in the Office waiting areas once a week to provide information; Finance Department staff provide information during intake process; clinical and care management staff provide information about health insurance.
- Nurse Navigator.
- Nurse navigator.
- Our billing department team are very able and willing to assist.
- Patient services specialist.
- RN Care manager talks with patients about insurance terms.
- Social worker.
- The hospital I work at has office to educate patients on health insurance terms.
- We educate them on individual coverage terms as they relate to the services, we provide.
- We have a team through our business office that try to help people acquire insurance as well as pay their bills.
- We have health care facilitators on site to help our uninsured population identify and enroll in health insurance that they can afford and will meet their needs.
- We have Social Workers that educate Patient's on where to sign up for insurance as well as Action for Older Persons to review insurance options prior to choosing a plan.
- Work with clients to make sure they understand what is available primarily through Medicaid.

Q3a (If YES) (CONTINUED): Please describe:
n39; Open-Ended

Community Organization Employee Panel Members:

- Care Coordination, assistance with applying and understanding nuances.
- Federal & NYS materials, in person or phone assistance.
- Financial Counselors that are CAC's with NYSOH Marketplace.
- Health Insurance Navigators and Community Health Advocates.
- Healthcare navigators.
- Navigators on site.
- Our healthcare navigators are located within the hospital facility near our ED department.
- Our program does an assessment of current needs, providing any community resource contacts necessary.
- Pamphlets on plans and enrollment places.
- PFAP Counselor Referral.
- Roadmap to Care booklet published by federal govt, MCO websites & provider booklets.
- We do insurance navigations with the clients to choose the best insurance plan for their needs.
- We give out the CMS Roadmap to Better Care booklets, which has a glossary.
- We have a health insurance enrollment program with certified navigators.
- We have Certified Application Counselors.
- We have Insurance Navigators who enroll thru NYSOH Marketplace.
- We have navigators that assist with health literacy and care access.
- We have social workers.
- We make referrals to HI enrollers.
- We participate in patient education and health advocacy.
- We provide space at our health center sites for Navigator agencies to be located, as well as medical receptionists assist patients in using insurance.
- We refer people to a health insurance navigator if they need help.

Q4a: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," please indicate ***the knowledge level*** of your patients/clients regarding their out-of-pocket costs related to: Knowing if the plan cover costs such as hospital stays?
n69; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	17	25%	19	27%	24	35%	8	12%	1	1%	2.38
Healthcare Provider Panel Members; n=33	8	25%	10	30%	10	30%	4	12%	1	3%	2.39
Community Organization Employee Panel Members; n=36	9	25%	9	25%	14	39%	4	11%	-	-	2.36

Q4b: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," please indicate ***the knowledge level*** of your patients/clients regarding their out-of-pocket costs related to: Understanding what they would have to pay for emergency room visits?
n69; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	16	23%	28	41%	14	20%	10	15%	1	1%	2.30
Healthcare Provider Panel Members; n=33	6	18%	16	49%	3	9%	7	21%	1	3%	2.42
Community Organization Employee Panel Members; n=36	10	28%	12	33%	11	31%	3	8%	-	-	2.19

Q4c: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," please indicate ***the knowledge level*** of your patients/clients regarding their out-of-pocket costs related to: Understanding what they would have to pay for primary care visits?
n69; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	11	16%	17	25%	19	27%	19	28%	3	4%	2.80
Healthcare Provider Panel Members; n=33	5	15%	6	18%	10	31%	11	33%	1	3%	2.91
Community Organization Employee Panel Members; n=36	6	17%	11	30%	9	25%	8	22%	2	6%	2.69

Q4d: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," please indicate ***the knowledge level*** of your patients/clients regarding their out-of-pocket costs related to: Understanding what they would have to pay for specialist visits?
n69; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	16	23%	22	32%	17	25%	13	19%	1	1%	2.43
Healthcare Provider Panel Members; n=33	7	21%	11	33%	10	31%	5	15%	-	-	2.39
Community Organization Employee Panel Members; n=36	9	25%	11	31%	7	19%	8	22%	1	3%	2.47

Q4e: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," please indicate ***the knowledge level*** of your patients/clients regarding their out-of-pocket costs related to: Understanding what they would have to pay for medications?
n69; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	9	13%	23	33%	22	32%	13	19%	2	3%	2.65
Healthcare Provider Panel Members; n=33	3	9%	12	37%	10	30%	7	21%	1	3%	2.73
Community Organization Employee Panel Members; n=36	6	17%	11	30%	12	33%	6	17%	1	3%	2.58

Q4f: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," please indicate ***the knowledge level*** of your patients/clients regarding their out-of-pocket costs related to: Finding out if they must meet a deductible for health care services?
n69; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	20	29%	29	42%	14	20%	5	7%	1	2%	2.10
Healthcare Provider Panel Members; n=33	9	27%	13	40%	8	24%	2	6%	1	3%	2.18
Community Organization Employee Panel Members; n=36	11	31%	16	44%	6	17%	3	8%	-	-	2.03

Q4g: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," please indicate ***the knowledge level*** of your patients/clients regarding their out-of-pocket costs related to: Knowing which doctors and hospitals participate in their health plan?
n69; Single Response

	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	19	28%	20	29%	20	29%	7	10%	3	4%	2.35
Healthcare Provider Panel Members; n=33	9	27%	8	24%	11	34%	4	12%	1	3%	2.39
Community Organization Employee Panel Members; n=36	10	28%	12	33%	9	25%	3	8%	2	6%	2.31

Q5a: Using a scale of 1 to 5 with 1 being, "Not at all" and 5 being, "Very", how likely are your patients/clients to do the following actions when using a primary care provider? If assigned a new provider, research the provider in advance of an office visit.
n69; Single Response

	Not at all 1		2		3		4		Very 5		Don't know		Mean Score
	n	%	n	%	n	%	n	%	n	%	n	%	n
Aggregate	24	35%	28	41%	12	17%	1	1%	2	3%	2	3%	2.06
Healthcare Provider Panel Members; n=33	13	39%	12	37%	7	21%	-	-	-	-	1	3%	1.94
Community Organization Employee Panel Members; n=36	11	31%	16	43%	5	14%	1	3%	2	6%	1	3%	2.17

Q5b: Using a scale of 1 to 5 with 1 being, "Not at all" and 5 being, "Very", how likely are your patients/clients to do the following actions when using a primary care provider? If new PCP, call the provider beforehand to decide that provider is the "right fit."
n69; Single Response

	Not at all 1		2		3		4		Very 5		Don't know		Mean Score
	n	%	n	%	n	%	n	%	n	%	n	%	n
Aggregate	40	58%	21	31%	6	9%	-	-	1	1%	1	1%	1.61
Healthcare Provider Panel Members; n=33	18	55%	13	39%	2	6%	-	-	-	-	-	-	1.52
Community Organization Employee Panel Members; n=36	22	61%	8	22%	4	11%	-	-	1	3%	1	3%	1.69

Q5c: Using a scale of 1 to 5 with 1 being, "Not at all" and 5 being, "Very", how likely are your patients/clients to do the following actions when using a primary care provider? Complete all requested forms in advance of the provider visit.
n69; Single Response

	Not at all 1		2		3		4		Very 5		Don't know		Mean Score
	n	%	n	%	n	%	n	%	n	%	n	%	n
Aggregate	18	26%	30	44%	15	22%	4	6%	1	1%	1	1%	2.17
Healthcare Provider Panel Members; n=33	6	18%	16	49%	8	24%	3	9%	-	-	-	-	2.24
Community Organization Employee Panel Members; n=36	12	33%	14	39%	7	19%	1	3%	1	3%	1	3%	2.11

Q5d: Using a scale of 1 to 5 with 1 being, "Not at all" and 5 being, "Very", how likely are your patients/clients to do the following actions when using a primary care provider?
Have their insurance card with them for a provider visit.
n69; Single Response

	Not at all 1		2		3		4		Very 5		Don't know		Mean Score
	n	%	n	%	n	%	n	%	n	%	n	%	n
Aggregate	6	9%	9	13%	25	36%	19	28%	9	13%	1	1%	3.28
Healthcare Provider Panel Members; n=33	1	3%	3	9%	12	36%	12	36%	5	16%	-	-	3.52
Community Organization Employee Panel Members; n=36	5	14%	6	17%	13	36%	7	19%	4	11%	1	3%	3.06

Q5e: Using a scale of 1 to 5 with 1 being, "Not at all" and 5 being, "Very", how likely are your patients/clients to do the following actions when using a primary care provider?
Arrive at the visit with a list of questions to ask their provider.
n69; Single Response

	Not at all 1		2		3		4		Very 5		Don't know		Mean Score
	n	%	n	%	n	%	n	%	n	%	n	%	n
Aggregate	14	20%	30	44%	16	23%	6	9%	2	3%	1	1%	2.35
Healthcare Provider Panel Members; n=33	4	12%	15	46%	10	30%	3	9%	1	3%	-	-	2.45
Community Organization Employee Panel Members; n=36	10	28%	15	42%	6	17%	3	8%	1	3%	1	3%	2.25

	Q6: Using a scale of 1 to 5 with 1 being, "Not at all," and 5 being, "Very," ***how aware*** are your patients/clients with the process of appealing a denied insurance claim when their health insurance plan refuses to pay for a service? n69; Single Response										
	Not at all 1		2		3		4		Very 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	27	39%	28	41%	12	18%	1	1%	1	1%	1.86
Healthcare Provider Panel Members; n=33	7	21%	18	55%	7	21%	-	-	1	3%	2.09
Community Organization Employee Panel Members; n=36	20	55%	10	28%	5	14%	1	3%	-	-	1.64

Q7: What could/should be done to help your patients/clients increase their health insurance literacy so that they can better utilize their health insurance benefits?
n69; Open-Ended

Healthcare Provider Panel Members:

- Assign everyone a healthcare facilitator/educator to check in with clients around time of insurance decision-making/renewal. Ultimately, the healthcare delivery system needs simplification (if not unification under a single-payer program).
- Better communication and education with members about their insurance coverage instead of providers having to explain. Patients are unaware of the "details" about coverage. Insurance companies tell them things are covered, but do not specify how it can be covered and what medical necessity is.
- Community education seminars, providing tools to Care Management Agencies to educate clients.
- Contact their provider.
- Directory of insurance terms- listing of resources of help (OFA, RHNSCNY).
- Education.
- Especially my elderly patients and my low-income patients could benefit from an education session on terms and meanings. Awareness of local resources that can help people when they have questions or concerns would also be helpful.
- Handouts, patient meetings, financial advocates at offices.
- Have a person who works for the insurance they can call directly with questions instead of automated system or being transferred multiple times.
- Have a position within the practice to help people with insurance issues.
- Have additional agencies such as Action for Older Persons in other parts of the County so more people could access this excellent resource.
- Have all care givers including front desk and clinical staff be conversant in insurance issues.
- Have an insurance advisor visit with them when they are coming for outpatient or are admitted.
- Have health care places be able to help patients with questions or direct them to someone who can.

Q7: What could/should be done to help your patients/clients increase their health insurance literacy so that they can better utilize their health insurance benefits?
n69; Open-Ended

Healthcare Provider Panel Members:

- Have the patient's insurance carrier require they sign they have read the coverage portion of their contract thus may encourage patients to read benefits.
- I have no idea.
- I'm not sure this is possible. Maybe if it was some sort of pre-requisite to getting food stamps. I'm just always glad if they come to an appointment. They seem to think everything is just going to be covered by Medicaid.
- Info sessions.
- It would be great if there were a pamphlet to provide to them regarding this topic.
- Navigator to educate.
- Need better literacy in the first place. So schools need more behavioral health services that are trauma focused. You're not going to change this without a much wider and deeper systemic change.
- No simple solution. It is such a global problem, but the topic is boring unless you are being affected by the problem. Then it is critical.
- Not sure, most people do not know coverage.
- Provide Health Literacy workshops, offering light refreshments, raffles, etc. to encourage attendance; increase use of educational material via social media; ask insurance companies for simple rack cards with benefit information in easy to understand language.
- Provide information from neutral party in regards to terms and what those terms mean to the patients' in their health care treatments.
- Provide the information in writing to them.
- Simplify terms and conditions.
- Single payer.
- TV ads? Ads on buses on where to go or whom to call?

Q7: What could/should be done to help your patients/clients increase their health insurance literacy so that they can better utilize their health insurance benefits?
n69; Open-Ended

Healthcare Provider Panel Members:

- Unsure.
- Use a navigator to provide health insurance education.
- Videos that we could direct them to that explain along with written information.
- We service exclusively uninsured. They lack basic knowledge of considerations for purchasing health insurance (cost - premiums, deductibles, coverage, physician network, etc.) Once they have health insurance, we no longer see them, but we know (primarily anecdotally) that they really do not know how to use the insurance. But at that point they are no longer our patient for us to be able to help educate them. Health literacy classes through churches or community centers or other places uninsured (or people who have never had health insurance and are now newly insured) frequent is possibly a better outreach approach to help improve health literacy.

Community Organization Employee Panel Members:

- 1) Have the health insurance navigators educate clients when they enroll as this is part of their job; 2) Advocate for health insurance companies to simplify their benefit structure; 3) Support employers in providing basic health insurance literacy to their employees. I believe that larger employers do this already.
- Add this to a class in high school that is required learning for graduation; after that, add to community classes offered to help folks increase financial literacy.
- Advise them to ask questions regarding their health plans when in the office.
- All terms used are industry terms focused on the insurance providers language and not layman speak. Instead of developing a layman's terminology they only try to force a definition of the industry term which does not stick. Dumb it down.
- Better support for contesting denied insurance claims - many are intimidated or just pay out of exhaustion.

Q7: What could/should be done to help your patients/clients increase their health insurance literacy so that they can better utilize their health insurance benefits?
n69; Open-Ended

Community Organization Employee Panel Members:

- Clearer language used in the material they receive. Having an "in person" appointment with an expert when selecting insurance plans.
- Continual education; refer to a community resource that can help.
- Doctors talking in plain language and doing teach back techniques instead of asking if they understand.
- Each person has different needs and different understanding of what is offered. There is no simple "fix" to make health insurance easier to understand.
- Education in all settings related to health.
- Education or learning sessions before they settle on a health care insurance provider.
- Employ staff that will provide education and guidance at PCP office as needs arise. PCP should never refer a patient to a specialist unless the patient is fully aware of the cost, discusses the ability to pay for the service, and consults with a PFAP counselor to review qualifying data.
- Have designated staff trained to answer insurance related questions in lay-terms.
- Having a staff member that understands options review them with resident/family.
- Health insurance companies should be transparent, have easily contactable staff, and simplify process.
- Heath Plan "FAQ"; availability of a navigator to answer individualized questions.
- Helplines.
- I don't know.
- I think better vocabulary can be used per knowledge.
- Information is helpful but they must "want" to know which in most cases they do not care.
- Insurance company should explain in easy language and bullet points.
- Make the insurance language simpler for people to understand.

Q7: What could/should be done to help your patients/clients increase their health insurance literacy so that they can better utilize their health insurance benefits?
n69; Open-Ended

Community Organization Employee Panel Members:

- Materials used to educate consumers need to be written and designed at a literacy level clients can understand, at around a 4th grade reading level with many pictographs that convey messages. Staff need to learn to develop communication skills for dealing with clients with low literacy and ensuring understanding. They need to spend more time on this process.
- More education and outreach. Unfortunately, most don't educate themselves unless they run into a situation.
- Most patients are older without computer knowledge so it would have to be handouts and talking to them.
- New Medicaid Member Orientation in person or online to activate benefits.
- Online tools, classes, simplified language, MCO refer new enrollees to Community Health Workers.
- Paper does not work; a lot of my clients do not read at a level to understand. Having a navigator to help is much better, they mostly need a person to explain options in a simple, understandable manner.
- Peer counselors or groups dedicated to this.
- Provide basic information in a manner that patients can read. Provide insurance support and navigation. Insurers could stop denying claims and making it so very difficult for people to access something they pay so much money for.
- Reps needs to meet with clients in person.
- Require doctors/doctor staff to take more time in explaining to their patients what is important for them to understand about their individual circumstances.
- Scrap the entire system and opt for a single payer system.
- Teach personal accountability and how to understand insurance.
- Teach; educate; advocate.
- We educate our clients regarding the plan that they choose and review what is allowed as well as providing them with a copy of the benefits. This method seems to work well for our clients.

Background and Methodology
Appendix

CARE COMPASS NETWORK

- This report details the findings from the Health Insurance Literacy Survey conducted and administered electronically to Care Compass Network (CCN) panel members in February 2019. The objective of this research was to **better understand panel members' understanding of health insurance and the process taken to learn about their coverage.**

- This study consisted of an online survey that was administered to CCN panel members. The surveys included 7 questions and took respondents approximately 5-7 minutes to complete. A total of **171 surveys were completed representing a response rate of 12%.** Fieldwork lasted from **March 6th, 2019 to June 21st, 2019.**

- CCN partnered with Research & Marketing Strategies, Inc. (RMS) in the Spring of 2015 to create an online panel to engage in a series of research studies. This panel is comprised of four key stakeholder groups: (1) those individuals on Medicaid or uninsured; (2) clinical and non-clinical providers who see Medicaid and uninsured patients; (3) community groups, and (4) the population-at-large. The key role of the panel is to review and respond to material shared regarding improving area healthcare delivery and access.

- Any questions or comments regarding this market research study can be directed to Zach Shaw, Panel Associate at Research & Marketing Strategies, Inc. (RMS) at 1-866-567-5422 or email at ZachS@RMSresults.com.

Appendix

The information contained in this study has been obtained from primary sources and/or was furnished directly from the clients listed in this report. All source materials and information so gathered and presented herein are assumed to be accurate, but no implicit or expressed guarantee of data reliability can be assumed. This study has been prepared in the interest of a fair and accurate report, and therefore all of the information contained herein, and upon which opinions have been based, have been gathered from sources that Research & Marketing Strategies, Inc. (RMS) considers reliable.

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Certified by:  Date: July 26th, 2019

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