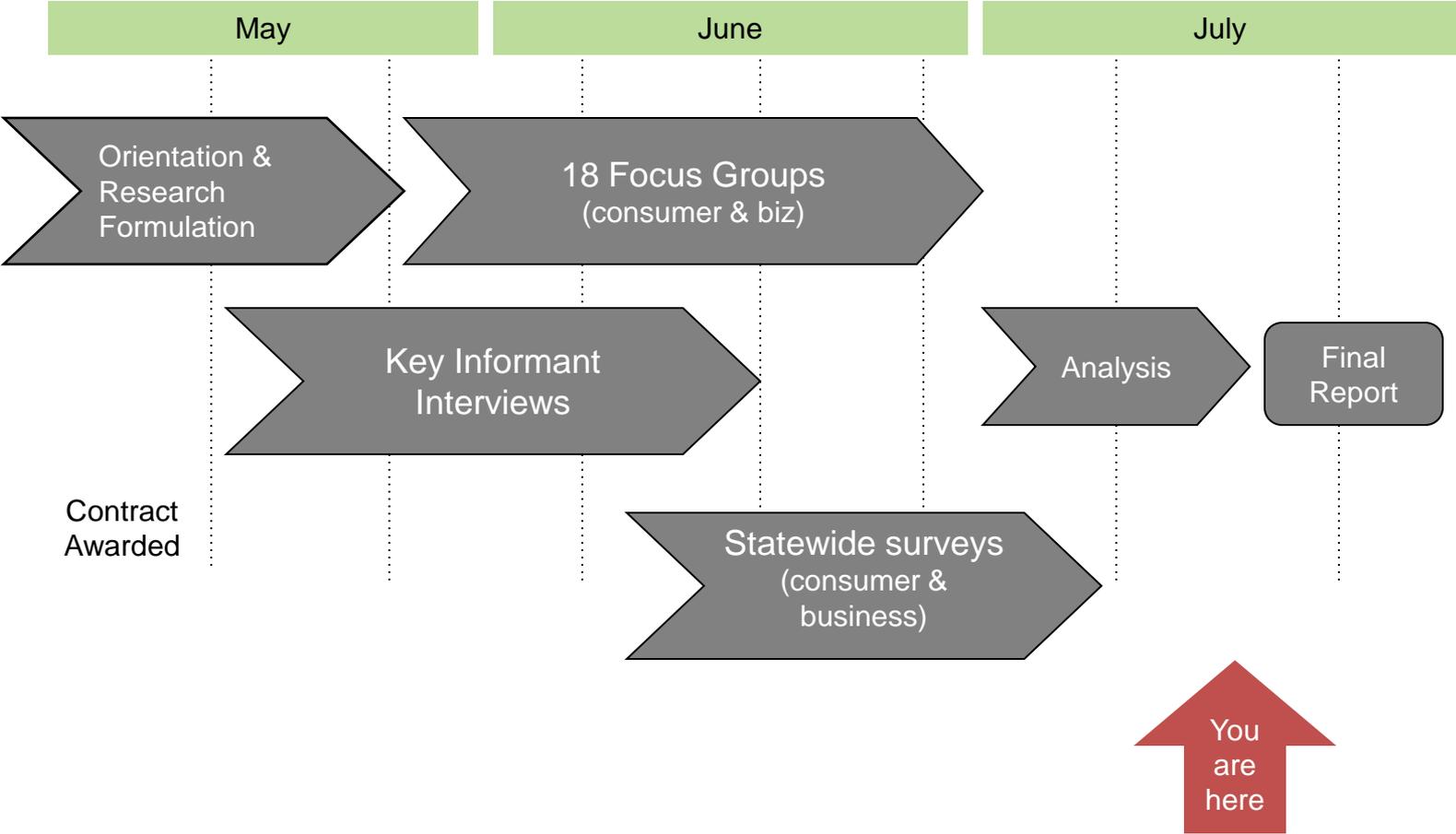


Public Education and Outreach: Market Research Findings

Presentation to:
*Health Insurance Exchange Advisory Task Force
Minnesota Health Insurance Exchange
July 26, 2012*

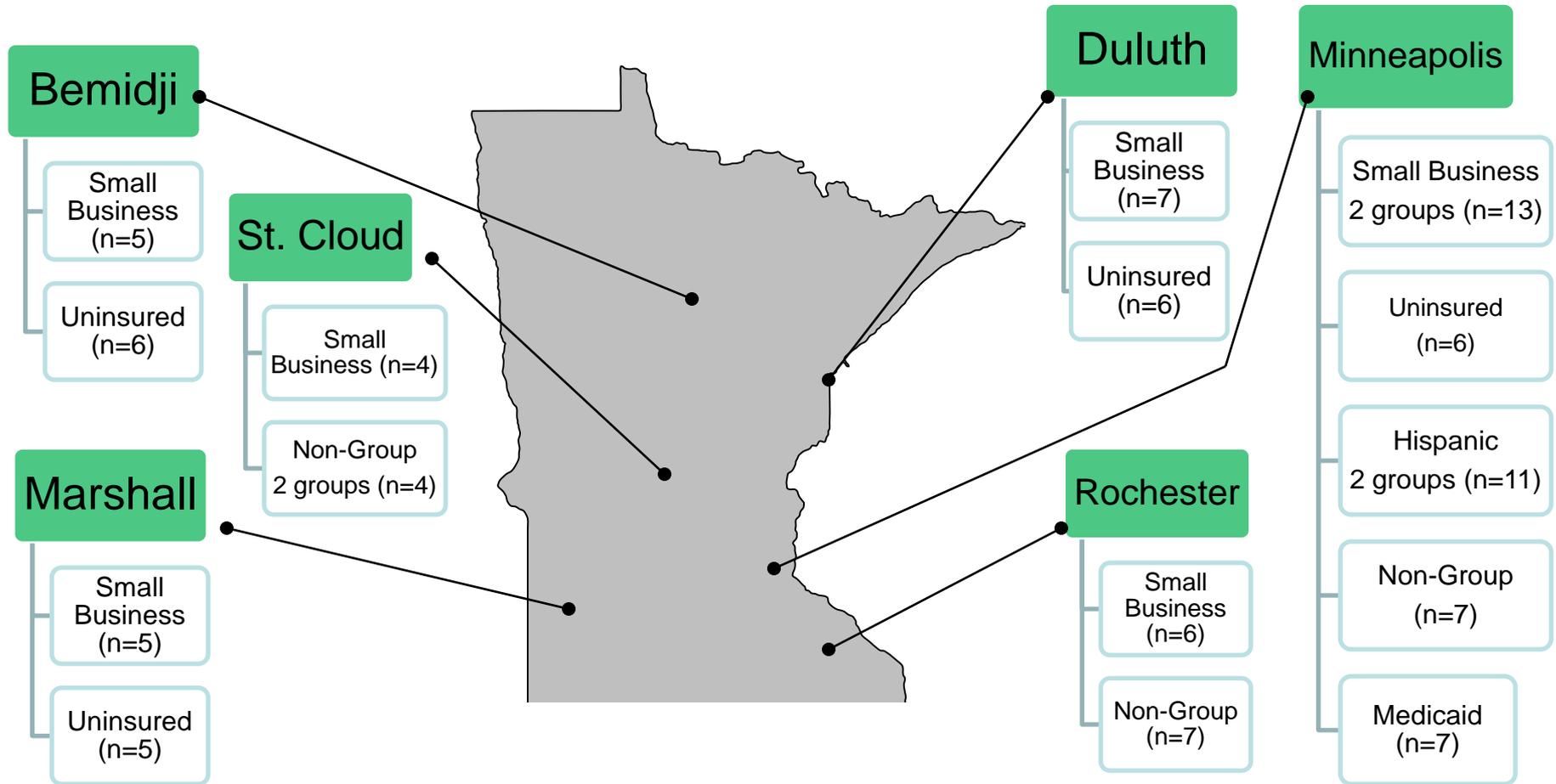


What we have been doing



Qualitative Research

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



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

TOP 10 THINGS TO KNOW

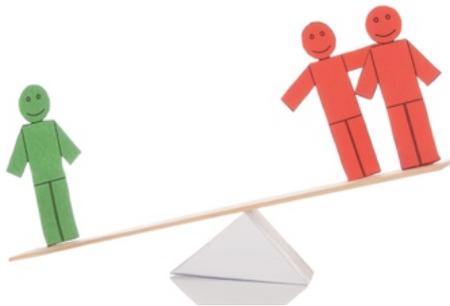


#10 Partners are eager to be involved now

Four major take-aways from 11 In-depth Individual Interviews with key informants in business, health care, community outreach and insurance.



Emphasize access to private insurers as well as government



Leverage intermediaries



Determine a meaningful long-term role for brokers

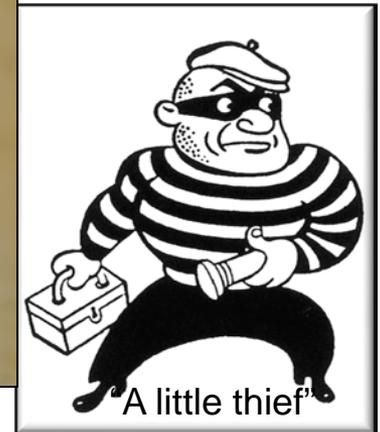
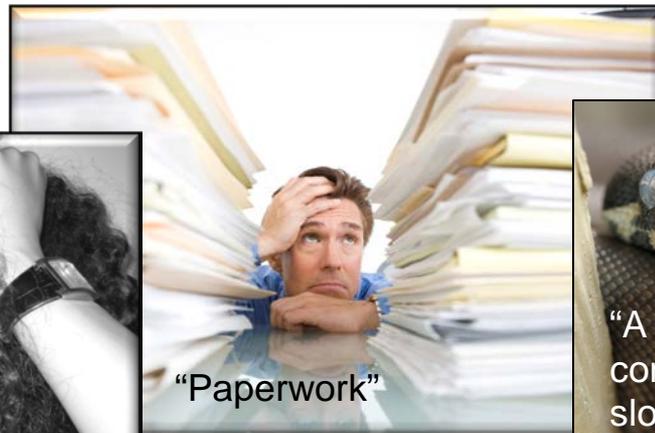


#9. People don't like today's experience

Current Situation

*"I find buying insurance a pain in the a**. It's difficult, hard to keep track of, the law changes"*

- Duluth Business Owner



Too expensive and confusing ...

Top 6 complaints from CONSUMERS (What makes buying health insurance difficult?)	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%
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%



... for everyone

Top 9 Complaints from BUSINESS OWNERS (What makes buying health insurance difficult?)	Total
Frequent premium increases	72%
Steep premium increase	65%
Age of my employees continues to increase	56%
The options I have become more and more limited	52%
Plans are too complex	51%
Difficult to compare benefits across plans	49%
Difficult to understand what is covered by the plans	47%
Medical underwriting (i.e., increased costs due to medical history)	46%
Difficult to compare prices	46%



Our opportunity: Give people a better experience



CURRENT STATE

- Prices rising, too high
- Overwhelms me
- Leaves me worried
- Lots of complexity, paperwork and fine print
- Need for expertise, help (often fulfilled by broker)
- Uninsured unable to secure product



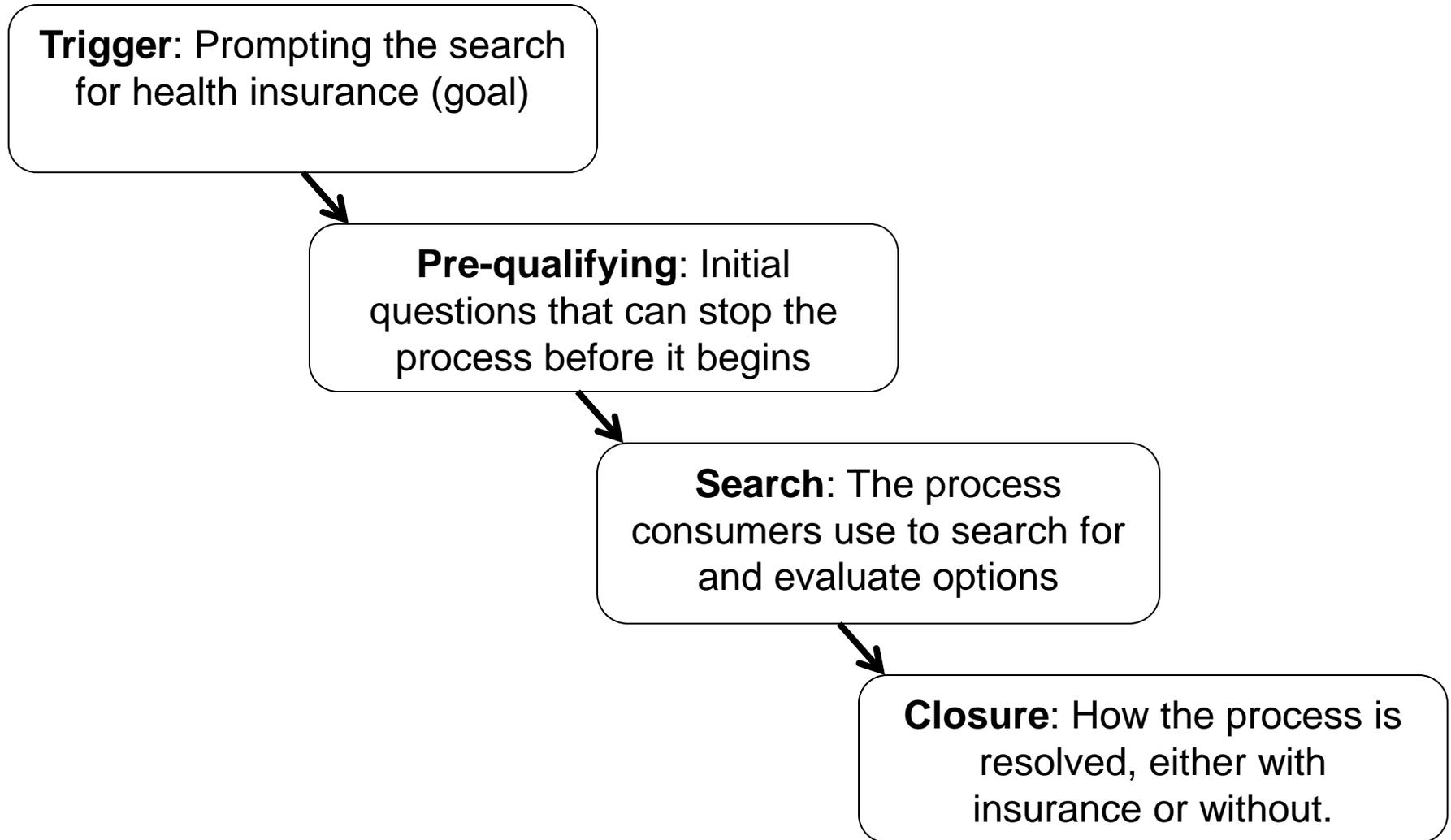
DESIRED STATE

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

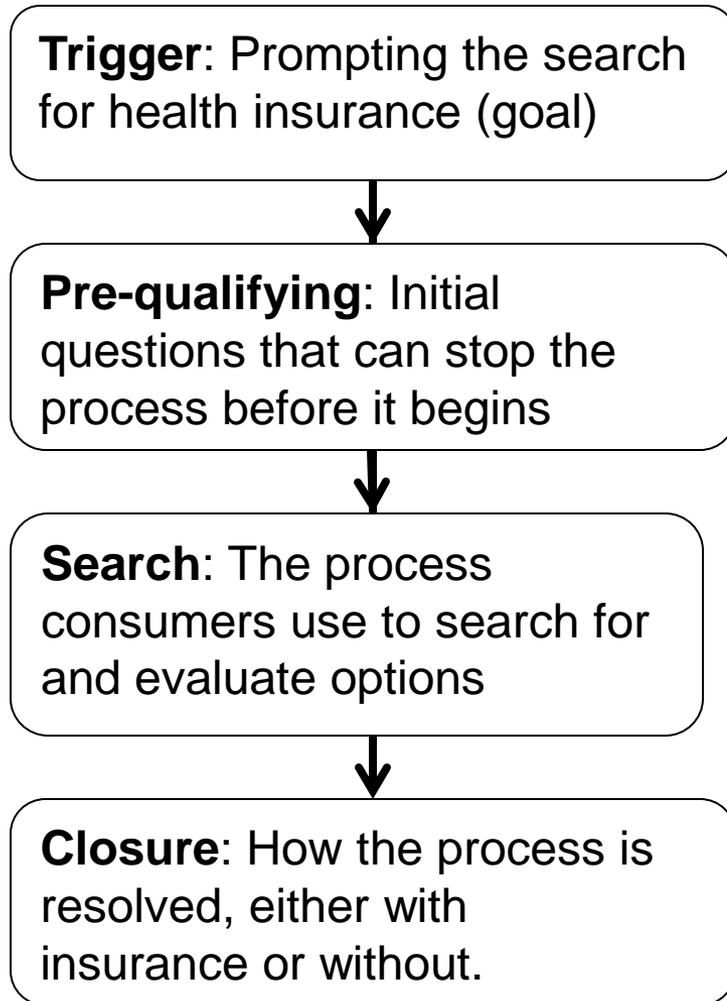
GAP



#8 Seeking insurance is a journey



Events and expectations trigger shopping



Events (for uninsured)

- Change in health status (26%)
- Change in employment (17%)
- Had or adopted child (5%)
- Talked to someone (5%)

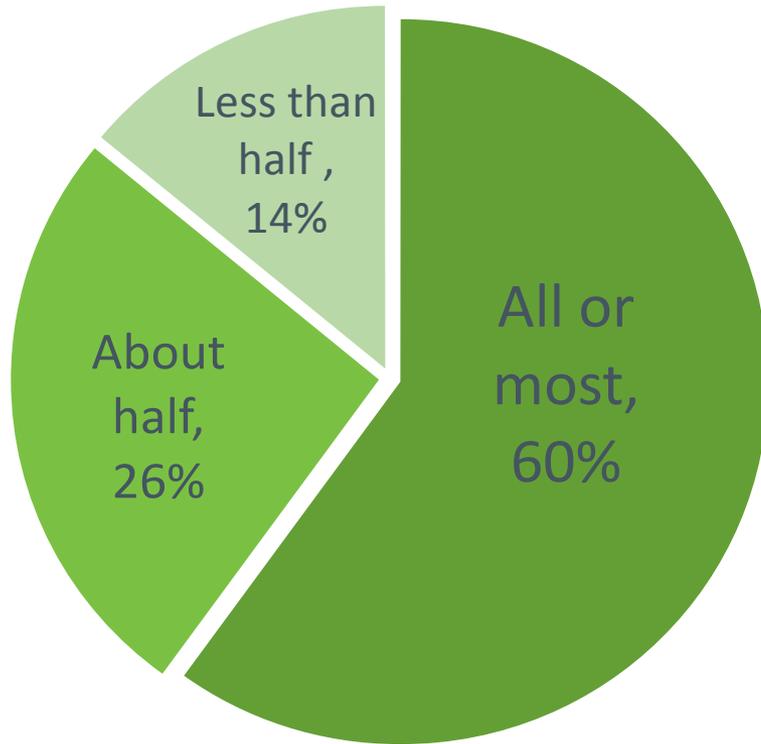
Expectations

- Norms predict insurance status

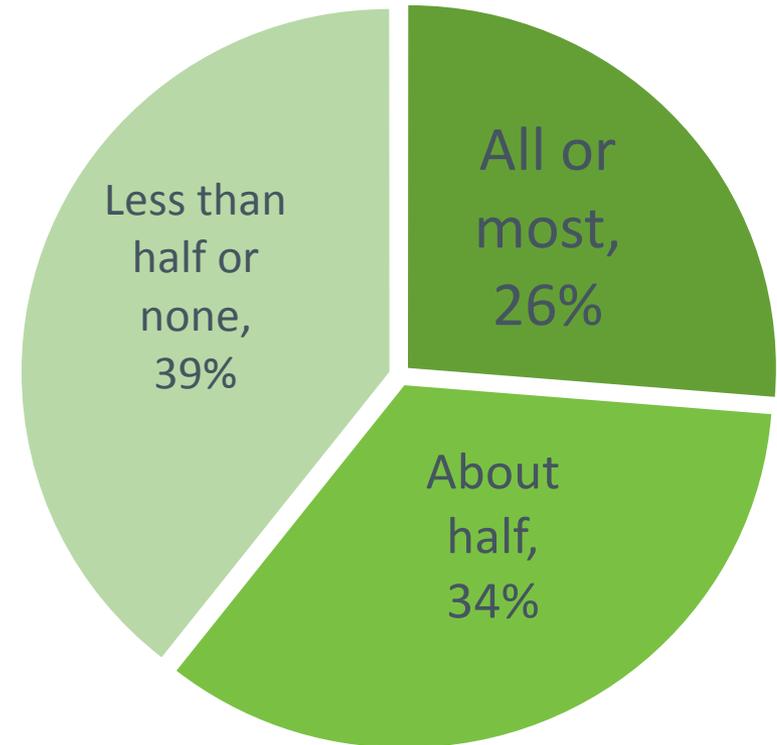


For uninsured, being uninsured is normal

Projected Portion of “people like me” with health insurance



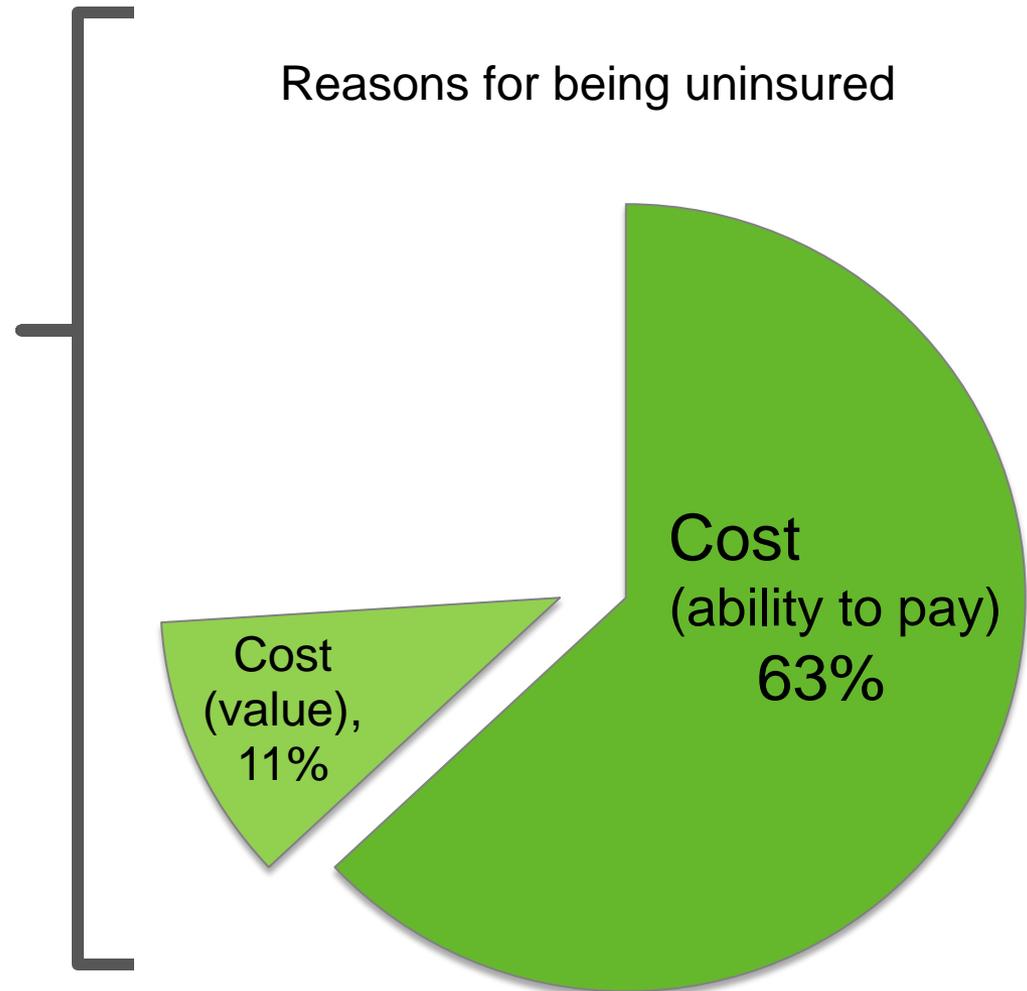
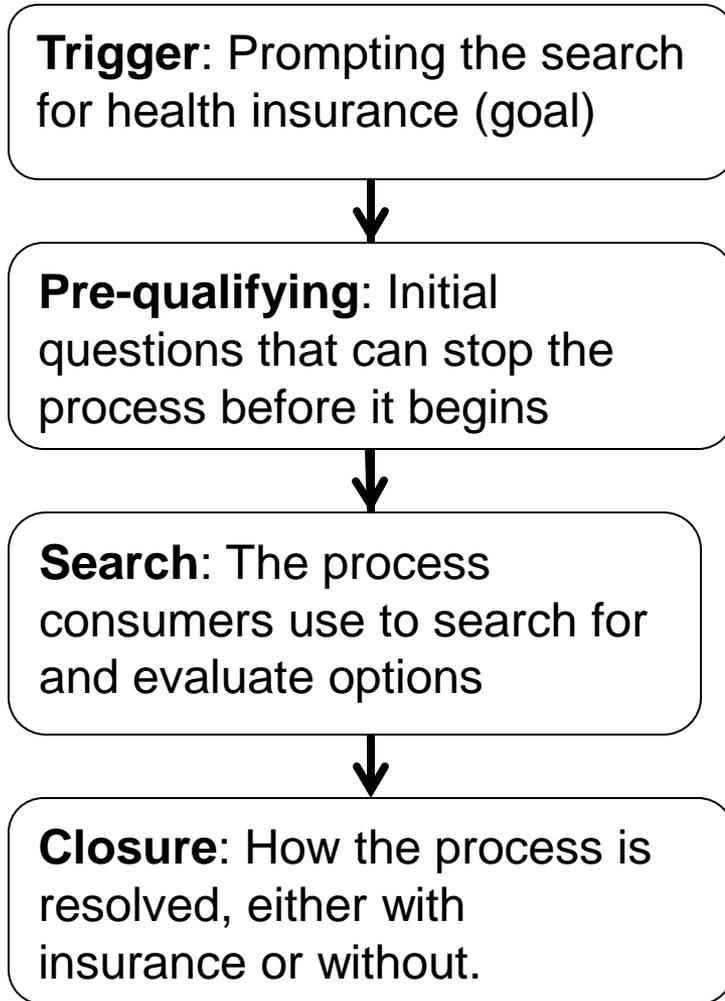
People who buy insurance
(non-group)



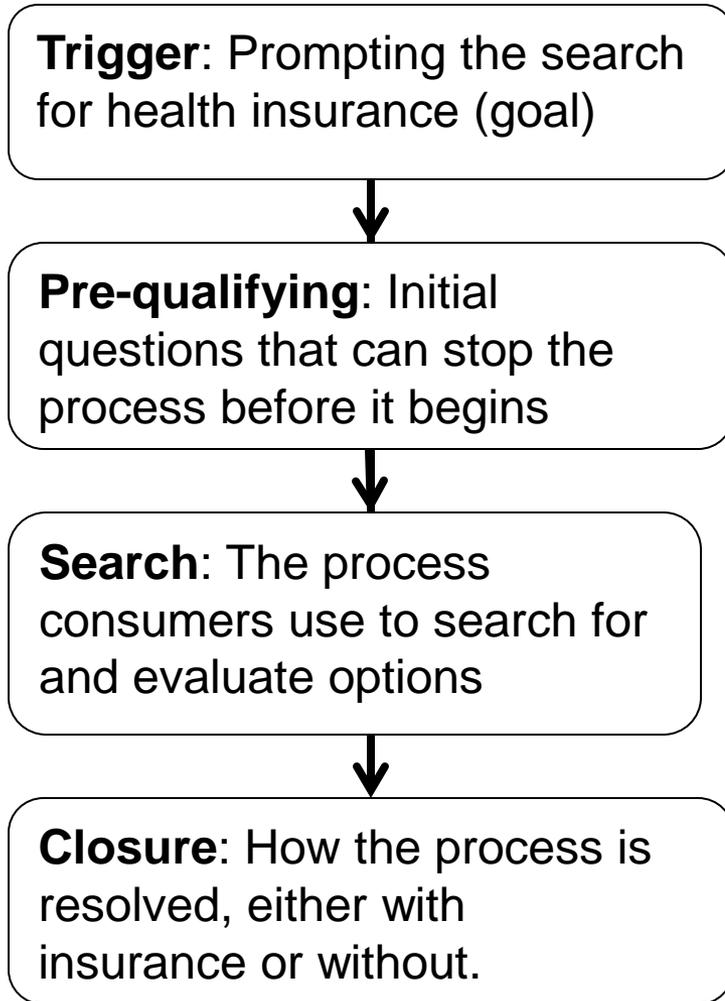
People who don't
(uninsured)



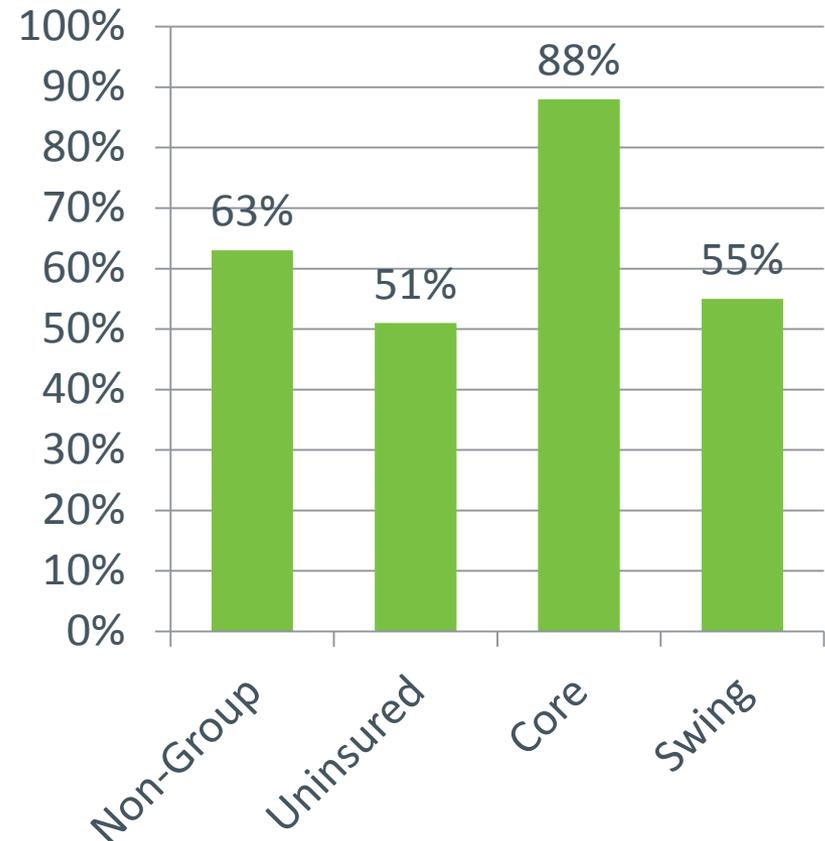
Uninsured price themselves out of the market



Once cost is a reality, comparisons are important



Health Plan Comparison: top-rated potential exchange feature



#7 People want more than medical payments

Transactional

Basis

Expected medical costs for the coming year based on experience

Pure Actuarial

Basis

Expected medical costs

+

Value of being covered in the event of a catastrophic medical event

Biggest spenders

Full Value

Basis

Expected medical costs

+

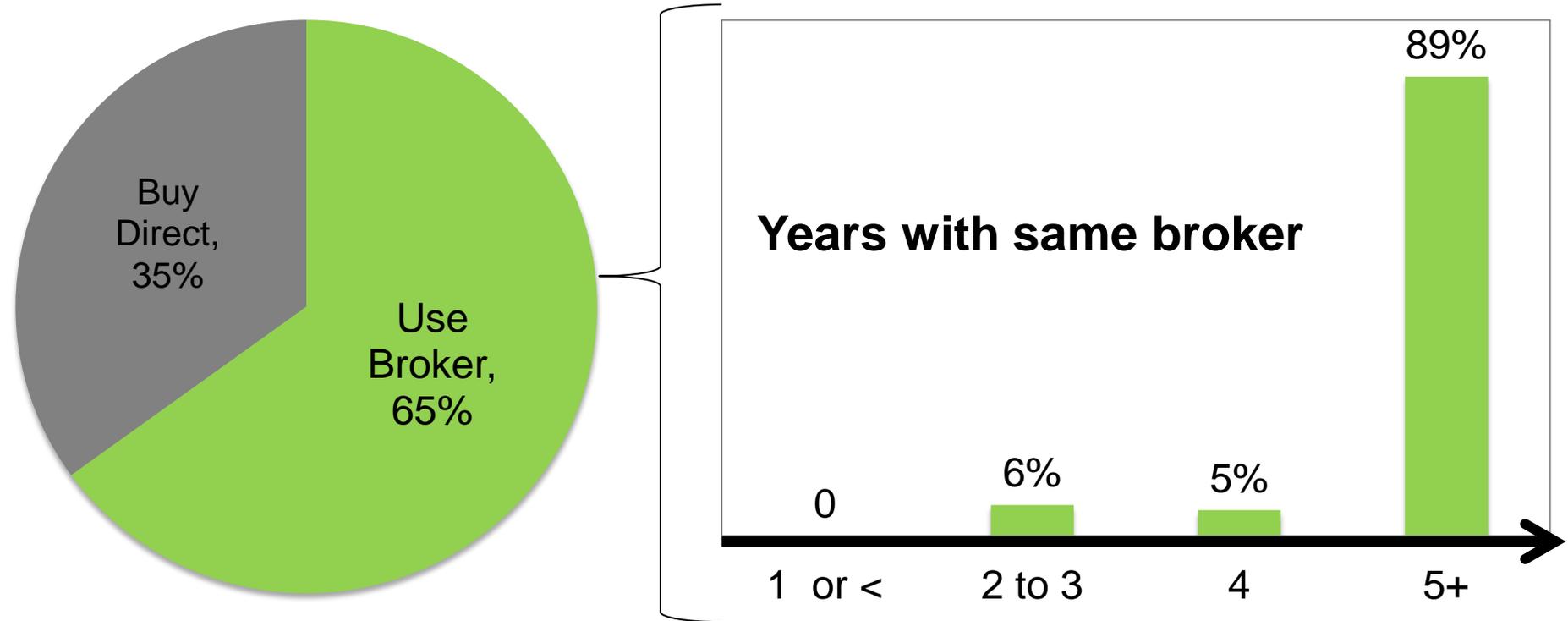
Value of being covered

+

Normative, Self-Standards and/or Peace-of-Mind Value



#6 Brokers are key



Sample 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



Price and norms pull business in ...

Trigger: Prompting the search for health insurance

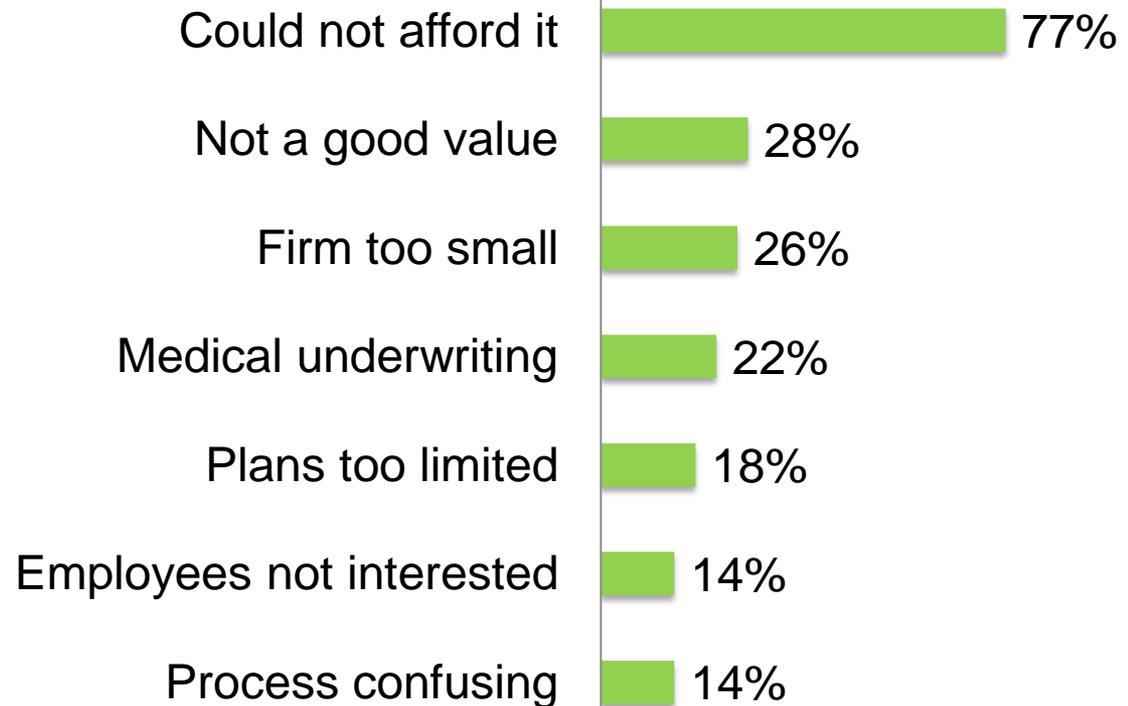


The broker: Most small business owners use, and trust, their broker.



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

Top Reasons Not to Offer Health Insurance



Price and norms pull business in

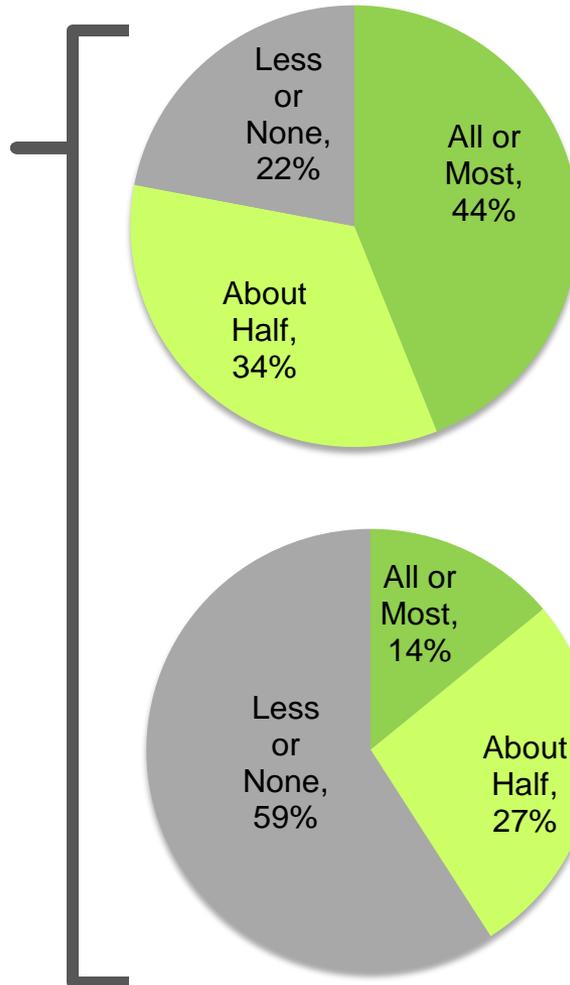
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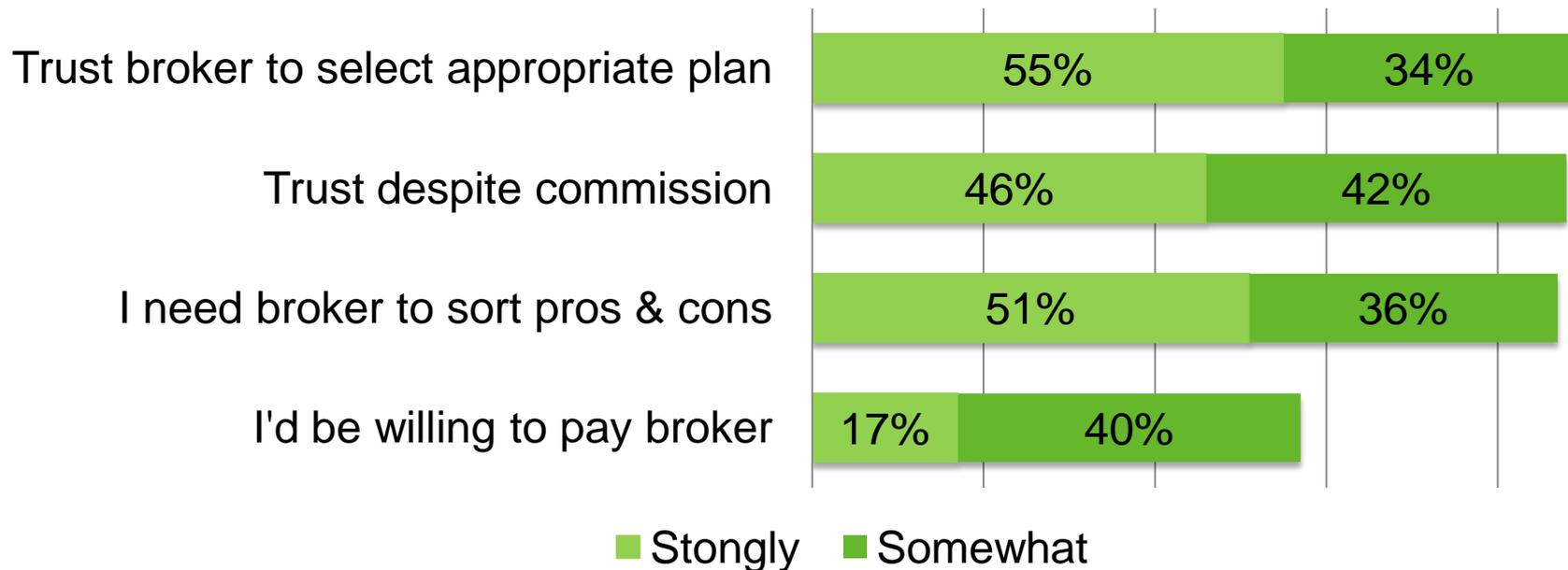
Firms that offer health insurance says peers do the same

Firms that don't say peers don't either

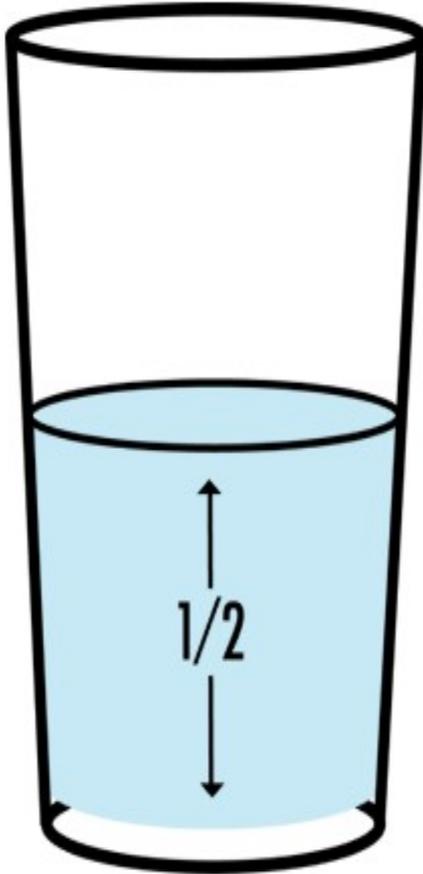
... then brokers close the deal

“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



#6 People are wary, but like the concept



“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

We tested six branding approaches

“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.



#4. People like competition and “fit”

“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”



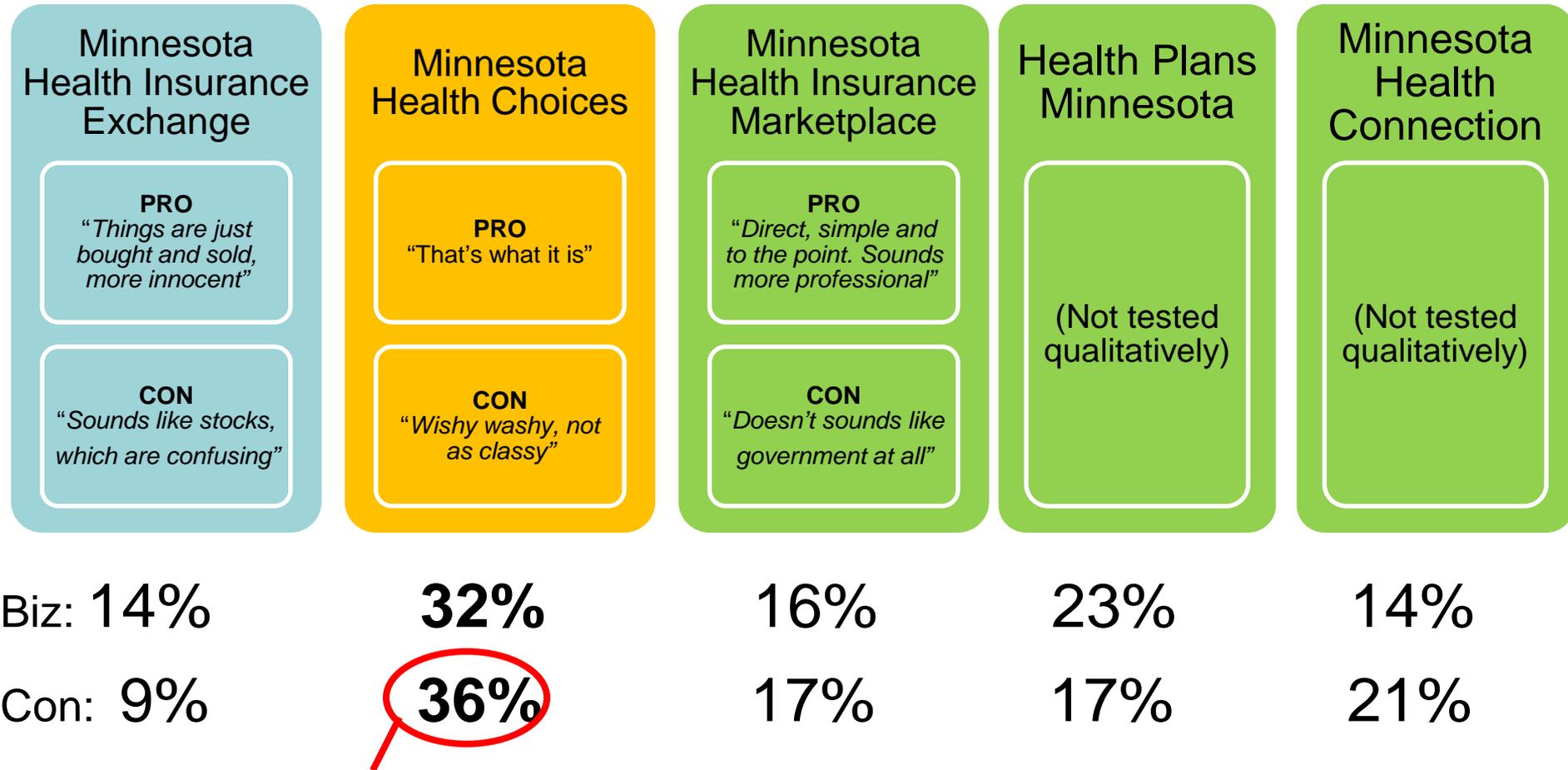
Minnesota is creating a **new health insurance marketplace**. It is a website where you can compare different health insurance plans and choose the one you like. Private health insurers compete to win your business. Lower-income people can also enroll in public health insurance programs.

“Private companies competing for business is good.”

— Uninsured resident, Bemidji



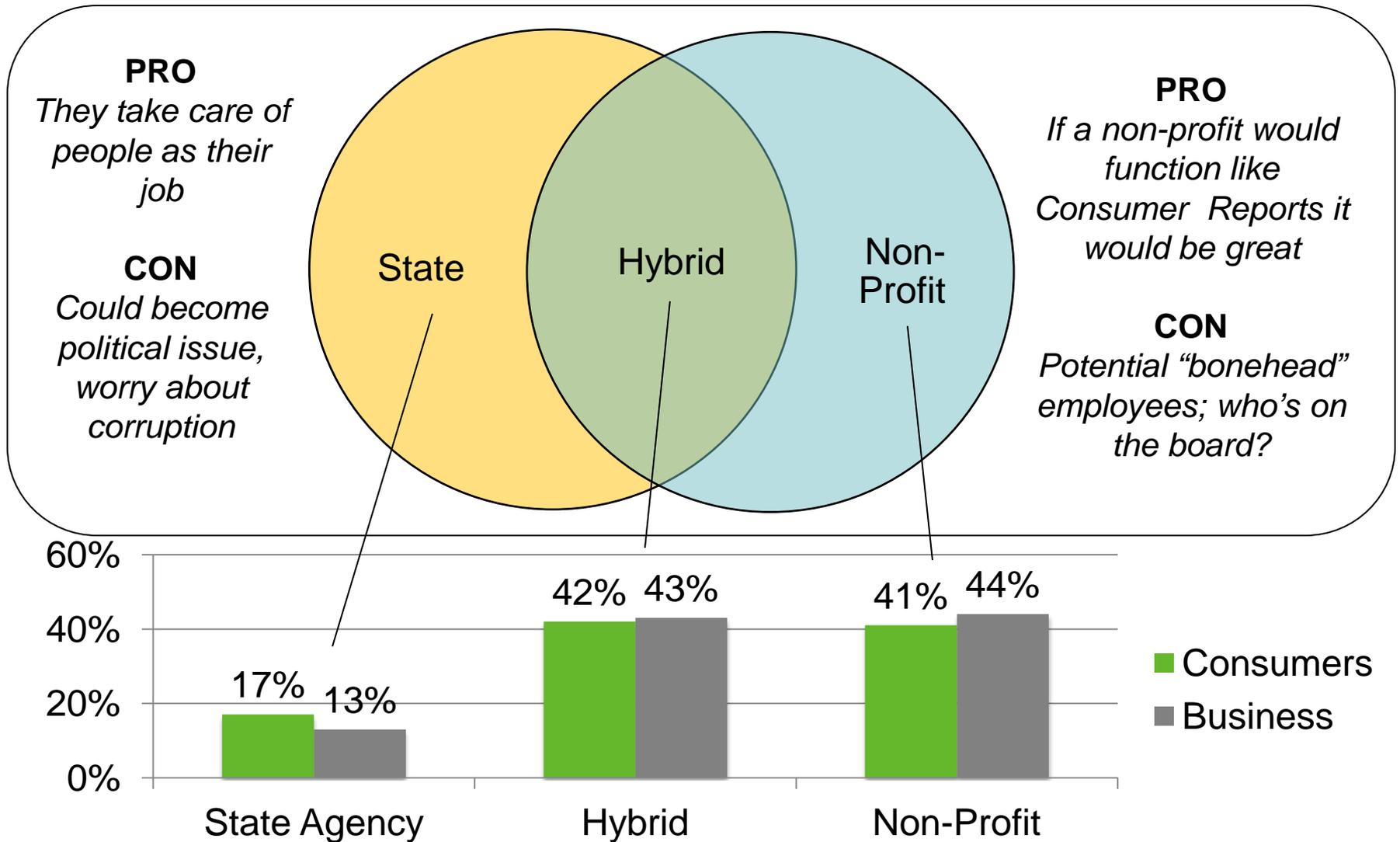
#3 The word “exchange” can be confusing



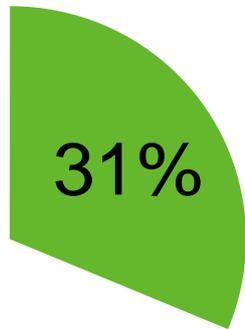
Consumers preferred this name, but in focus groups, some said it was bland and generic. Few thought it was unclear. Only “Exchange” was seen as confusing.



#2 There is a love/hate relationship with govt



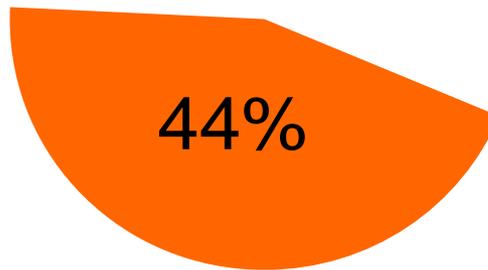
#1 You already have a base of support



31%

BASE

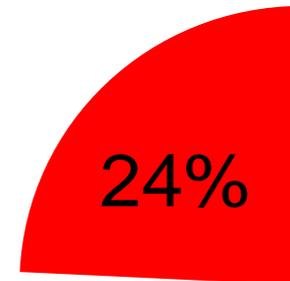
Very likely to use
exchange



44%

SWING

Middle two boxes



24%

ANTI

Very unlikely to use
exchange



Segment profiles

Core Segment

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

Swing segment

- _Younger
- Often employed part-time
- College graduates

Anti segment

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

	Core	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%



Thank You

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the people the place the work

DO GOOD BETTER

WHAT KIND OF CHANGE ARE YOU LOOKING FOR?

CHANGE BEHAVIOR

marketing for change

One of the nation's strongest social marketing firms. Delivering audiences a better offer and creating ideas that sell themselves.

BEHAVIOR CHANGE / SOCIAL MARKETING	CONSUMER RESEARCH
CULTURE CHANGE	CREATIVE

CHANGE PUBLIC OPINION

change communication

A gateway to Florida for organizations seeking to change public opinion in the nation's fourth largest state.

PUBLIC RELATIONS	ISSUE ADVOCACY
CRISIS COMMUNICATION	SOCIAL MEDIA



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