



# TRACKING TRENDS IN HEALTH SYSTEM PERFORMANCE

JANUARY 2014

## Americans' Experiences in the Health Insurance Marketplaces: Results from the First Three Months

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**Abstract:** Conducted December 11–29, 2013, The Commonwealth Fund's second Affordable Care Act Tracking Survey interviewed a nationally representative sample of adults who are potentially eligible for the health reform law's new insurance options, whether private plans or Medicaid. Results show that by the end of December, 24 percent of potentially eligible adults had visited a marketplace to find a plan. The first survey, conducted in October, had found that 17 percent of people potentially eligible for coverage had visited the marketplaces during the first month of open enrollment. By the end of December, 41 percent of visitors were ages 19 to 34, and 77 percent reported being in good health. People's ability to compare benefits and premiums improved between October and December, but many reported challenges in plan selection. A majority of respondents say they are determined to gain coverage by the end of this year's open enrollment period.



### OVERVIEW OF SURVEY FINDINGS

The Affordable Care Act's health insurance marketplaces have been open for business since October 1, 2013. After a rocky rollout of the federal marketplaces operating in 36 states this year, repairs to the [HealthCare.gov](http://HealthCare.gov) website in November allowed more than 1 million people to sign up for private plans in those states by the end of December. About 1 million more people signed up in the 14 states that, along with the District of Columbia, run their own marketplaces, and an estimated 3.9 million adults have enrolled in Medicaid.

To learn what Americans experienced as they shopped for a health plan during the marketplaces' first three months of operation, The Commonwealth Fund's Affordable Care Act Tracking Survey interviewed a nationally representative sample of adults who are potentially eligible for the law's new coverage options. The sample included people who are either uninsured or purchasing individual coverage on their

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own.<sup>1</sup> Social Science Research Solutions (SSRS) conducted the telephone survey of 622 adults ages 19 to 64 from December 11 to 29, 2013. SSRS conducted a similar survey for The Commonwealth Fund from October 9 to 27, 2013.

Here is what the survey found:

- In December, 63 percent of adults potentially eligible for enrollment in new private plans or expanded Medicaid were aware of the new marketplaces as a place where they might shop for coverage. About the same percentage of those potentially eligible for the new coverage options were aware of the marketplaces in October.
- Twenty-four percent of those potentially eligible reported that they had visited the marketplaces to shop for a health plan by December, whether online, by phone, in person, or by mail. This is up from 17 percent in October.
- Young adults comprised a substantial share of visitors by December: 41 percent of marketplace visitors were ages 19 to 34; 31 percent were 35 to 49; and 28 percent were 50 to 64. This age distribution reflects the overall age distribution of the population that is potentially eligible for marketplace coverage.
- More than three-fourths (77%) of adults who visited the marketplaces reported being in excellent, very good, or good health.
- Nearly two of five (38%) adults who visited the marketplaces ended up applying for health insurance by the end of December.
- People's ability to compare health plans and premiums improved between October and December. Among adults who visited the marketplaces, 51 percent said it was somewhat or very easy to compare premium costs of plans available for sale on the marketplaces, compared with 37 percent in October.
- But many people still experienced problems selecting plans. Just over one-third (36%) of adults who visited the marketplaces said it was very or somewhat easy to find a plan with the type of coverage they needed, while 37 percent reported it was very or somewhat easy to find a plan they could afford.
- About 30 percent of marketplace visitors who have visited the marketplaces more than once said their experience improved between their first and last visits. But a majority (69%) of visitors continue to rate their experience as fair or poor.
- Among adults who had individual market coverage, 22 percent said they had received a letter from their insurance carrier in 2013 cancelling their health plan for 2014. Sixty percent of all adults with individual coverage said that their carrier had offered the option of renewing their plan through 2014; of those, 82 percent said they planned to keep their current plan.
- A majority of survey respondents appear determined to gain coverage over the next few months. Fifty-nine percent of adults who either had not yet gone to their marketplace, or had visited it but not yet applied for or enrolled in a plan, said they are very or somewhat likely to visit by the end of the enrollment period (March 31, 2014) and enroll in a plan or find out if they are eligible for financial help.

## SURVEY FINDINGS IN DETAIL

### A majority of adults who are potentially eligible for the health reform law's new insurance options are aware of the marketplaces and the availability of financial assistance to pay for health plans.

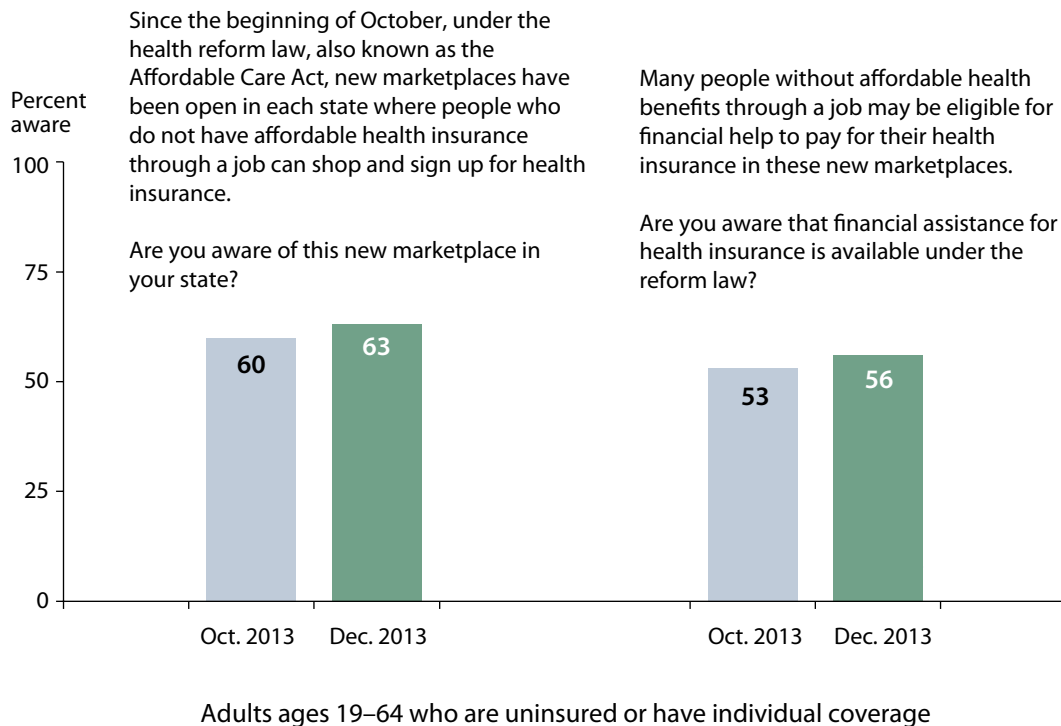
Sixteen states and the District of Columbia opted to run their own health insurance marketplaces, while 34 states decided to let the federal government take primary responsibility for operating the marketplace in their state. However, this year, residents of two states that are planning to operate their own marketplaces—Idaho and New Mexico—are enrolling in plans through the federal marketplace.<sup>2</sup> People can go to the marketplaces to select a private health plan, find out if they are eligible for financial help to pay for their coverage, or determine if they are eligible for Medicaid.

The Commonwealth Fund survey finds that 63 percent of adults who are potentially eligible for marketplace coverage are aware of the marketplace in their state. About the same percentage of those potentially eligible for the new coverage options were aware of the marketplaces in October (Exhibit 1).

More than half (56%) of adults potentially eligible for coverage are aware that financial assistance for health insurance is available under the Affordable Care Act, about the same percentage reported in October (53%).

Among people with lower incomes, there is less awareness of the marketplaces and the financial assistance that is available, compared to people with higher incomes (Appendix Table 1). Three of five (61%) adults with incomes under 250 percent of the federal poverty level (\$28,725 for an individual and \$58,875 for a family of four)

**Exhibit 1. A Majority of Adults Who Are Potentially Eligible for the Affordable Care Act's Insurance Options Are Aware of the Marketplaces and Financial Help**



Source: The Commonwealth Fund Affordable Care Act Tracking Surveys, Oct. 2013 and Dec. 2013.

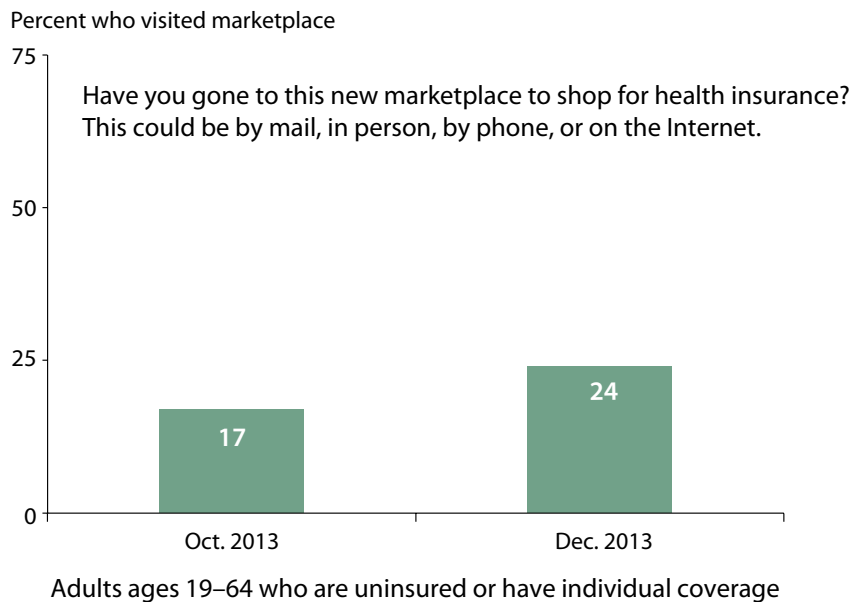
were aware of the marketplaces in December, compared to 77 percent of those with incomes of 250 percent of poverty or more. Only half (52%) of people with incomes under 250 percent of poverty were aware that financial help was available to pay for coverage, compared to 72 percent of those with incomes of 250 percent or more.

Awareness of the marketplaces was also lower in December among people who were uninsured compared to those who had insurance coverage purchased in the individual market. Only half (51%) of uninsured adults were aware that financial help is available for coverage, compared to three-quarters (76%) of people with individual market coverage.

**Nearly one-quarter (24%) of adults who are eligible for the Affordable Care Act’s new coverage options had visited a health insurance marketplace by the end of December, up from 17 percent in October.**

The percentage of adults who are potentially eligible for coverage and visited the marketplaces climbed from 17 percent in October to 24 percent by the end of December (Exhibit 2).

**Exhibit 2. Nearly One-Quarter of Adults Who Are Potentially Eligible for Coverage Have Visited the Marketplaces, Up from 17 Percent in October**



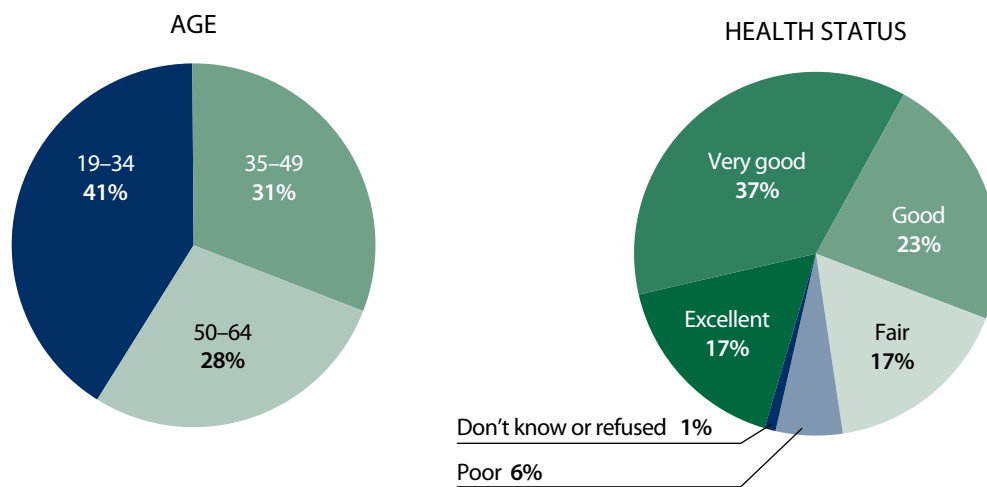
Source: The Commonwealth Fund Affordable Care Act Tracking Surveys, Oct. 2013 and Dec. 2013.

**Young adults comprise a substantial share of marketplace visitors and a majority of visitors report being in good health.**

Young adults are disproportionately likely to be uninsured, and their participation in the exchanges is critical for balancing risk and helping to stabilize growth in health plan premiums over time. By the end of December, 19-to-34-year-olds represented 41 percent of marketplace visitors. This percentage is equivalent to their share of the eligible population in the survey sample and is consistent with other estimates (Exhibit 3, Appendix Table 2).<sup>3</sup>

To ensure stable insurance premiums into the future, it is equally, if not more, important that enrollment in the marketplaces comprise a balance of healthy and less-healthy people. More than three-fourths (77%) of adults who visited the marketplaces reported being in excellent, very good, or good health. This is essentially unchanged from the October survey and reflects the eligible population nationally.

**Exhibit 3. Young Adults Comprise 41 Percent of Marketplace Visitors; More than Three-Fourths of Visitors Report Being in Excellent, Very Good, or Good Health**



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

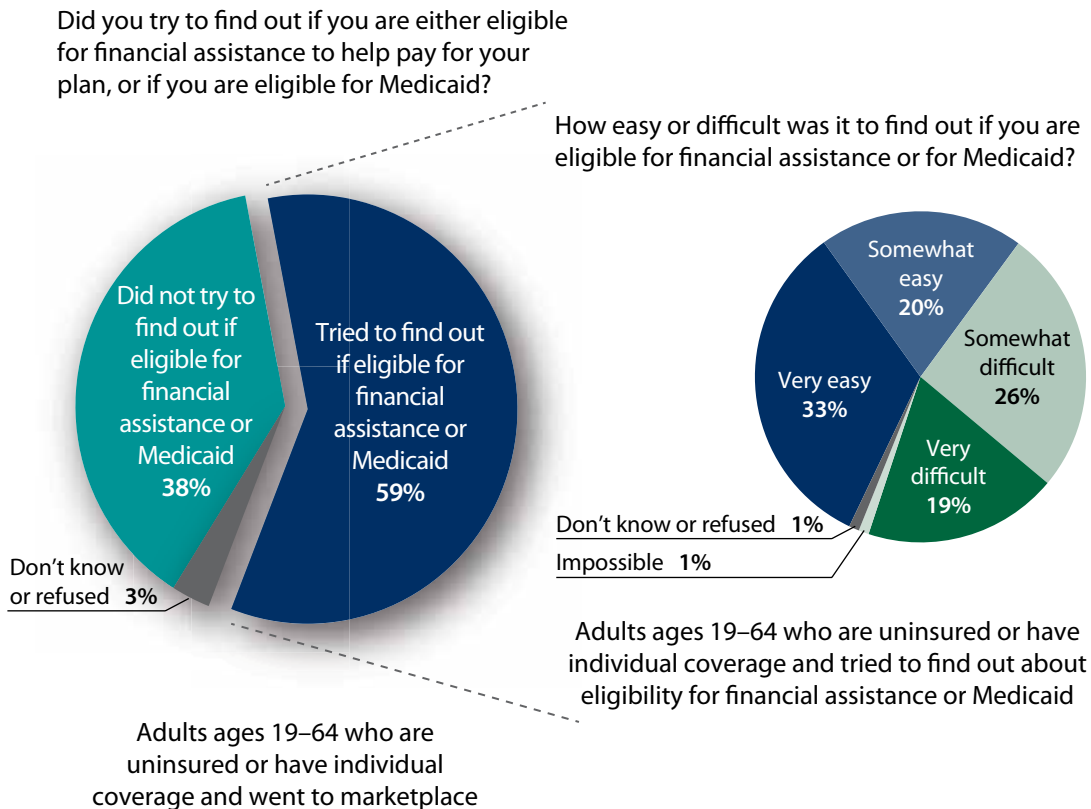
Note: Segments may not sum to 100 percent because of rounding.  
 Source: The Commonwealth Fund Affordable Care Act Tracking Survey, Dec. 2013.

**Three of five adults who visited the marketplaces tried to find out if they were eligible for financial help to pay for their health plans or Medicaid; half said it was somewhat or very easy to find out if they were eligible.**

To help them pay for their coverage, people with incomes under 400 percent of the federal poverty level (\$45,960 for an individual and \$94,200 for a family of four) who do not have an employer-based health plan that is affordable or provides adequate coverage are eligible for a federal subsidy.<sup>4</sup> Those with incomes under 138 percent of poverty (\$15,856 for an individual or \$32,499 for a family of four) are eligible for Medicaid in states that are expanding eligibility for their Medicaid programs.

Three of five adults (59%) who visited the marketplaces tried to find out about getting financial help to buy coverage or about their eligibility for Medicaid. About half (53%) of those who tried said it was somewhat or very easy to find out if they were eligible (Exhibit 4).

**Exhibit 4. Three of Five Adults Who Visited the Marketplaces Tried to Find Out About Financial Help to Pay for Their Health Plans; Half Said It Was Somewhat or Very Easy to Find Out if They Were Eligible**



Source: The Commonwealth Fund Affordable Care Act Tracking Survey, Dec. 2013.

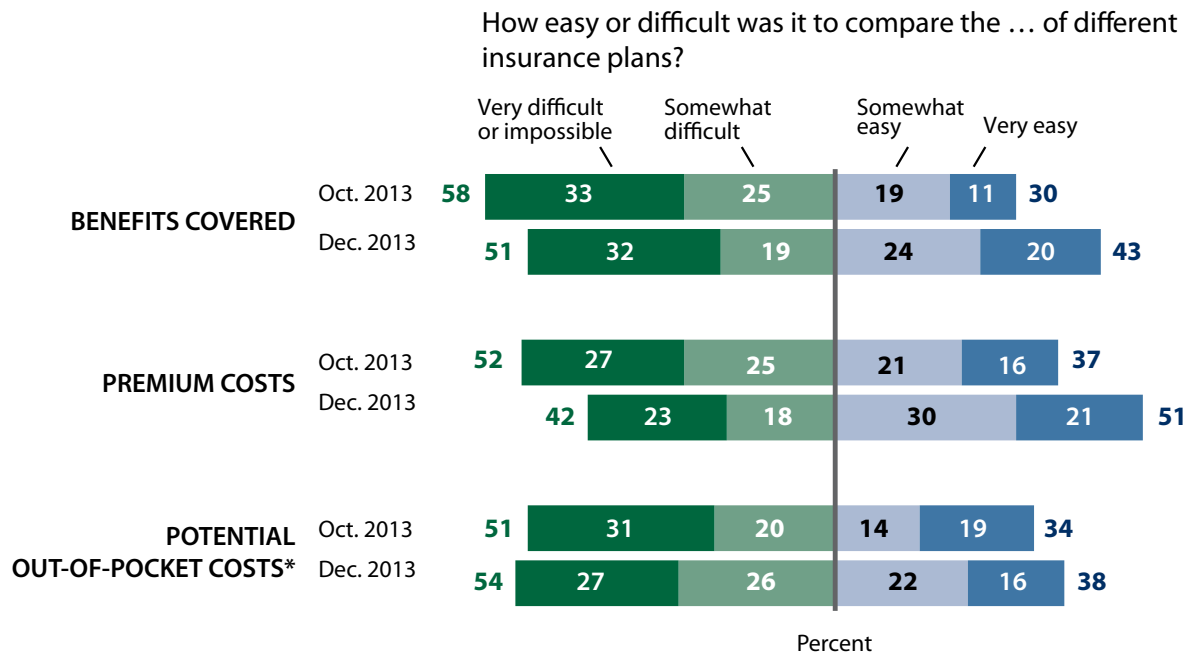
### People’s ability to compare health plan benefits and premiums improved between October and December.

The health plans that insurance companies sell in the marketplaces must cover a comprehensive set of health benefits. Consumers can select plans at four standardized levels of benefits: bronze, silver, gold, and platinum. Bronze plans have lower premiums but generally higher out-of-pocket costs than plans at higher levels. Platinum plans, meanwhile, have higher premiums than other plans but generally lower out-of-pocket costs. All plans at all levels must cover the same package of services, with little variation in benefits.

People’s ability to compare health plan benefits and premiums improved between October and December. Among adults who visited the marketplaces by the end of December, 51 percent said that it was somewhat or very easy to compare premium costs of plans available for sale in the marketplaces, compared with 37 percent in October. By December, 43 percent said that it was somewhat or very easy to compare benefits covered, up from 30 percent in October (Exhibit 5).

However, there was no change in people’s ability to compare plans by their potential out-of-pocket costs from deductibles and copayments: 38 percent said that it was somewhat or very easy to do this.

**Exhibit 5. By December 2013, More Adults Who Visited the Marketplaces Found It Easy to Compare Plan Benefits and Premiums**



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

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

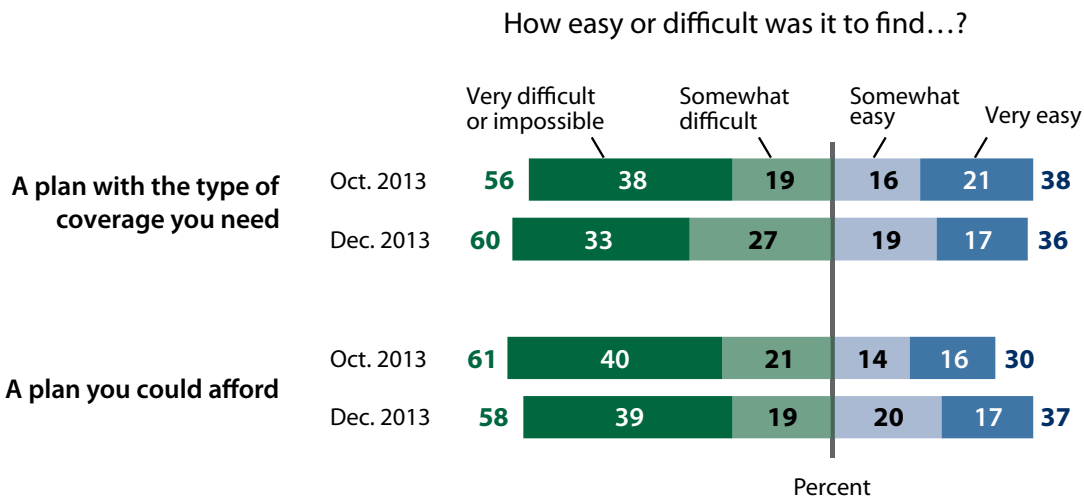
\* Potential out-of-pocket costs from deductibles and copayments.

Source: The Commonwealth Fund Affordable Care Act Tracking Surveys, Oct. 2013 and Dec. 2013.

**Many people still experience problems finding an affordable plan that provides the coverage they need.**

Finding an affordable plan that meets their needs continued to be a challenge for many people who visited the marketplaces in December. Just over one-third (36%) of adults who visited the marketplaces said it was very or somewhat easy to find a plan with the type of coverage they need; 37 percent reported it was somewhat or very easy to find a plan they could afford (Exhibit 6).

**Exhibit 6. Adults Who Visited the Marketplaces Continued to Report Difficulties Finding a Plan with the Type of Coverage They Needed**



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

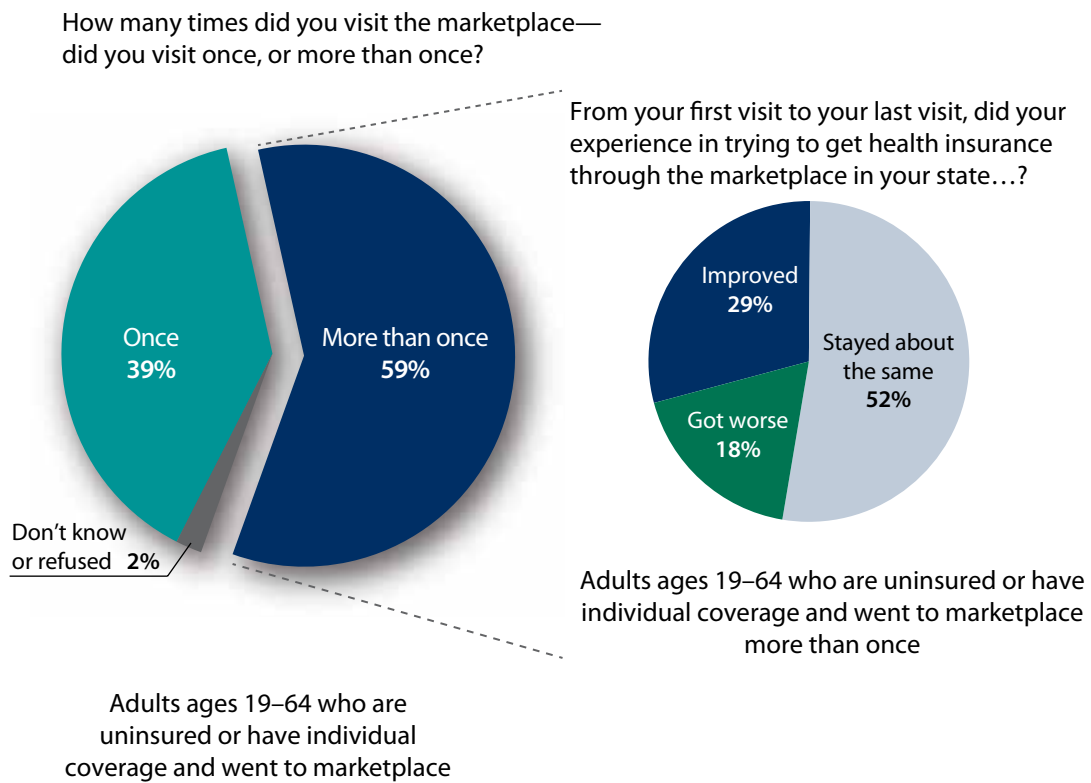
Note: Bars may not sum to 100 percent because of “don’t know” responses or refusal to respond; segments may not sum to subtotals because of rounding.  
 \* Potential out-of-pocket costs from deductibles and copayments.  
 Source: The Commonwealth Fund Affordable Care Act Tracking Surveys, Oct. 2013 and Dec. 2013.



**A majority of adults who visited the marketplaces did so more than once; three of 10 said their experience improved between their first and last visits.**

Among adults who visited the marketplaces since they opened in October, 59 percent said they went to the marketplaces more than once. Of those who visited more than one time, 29 percent said their experience in trying to get health insurance improved between their first and last visits, 52 percent said it stayed about the same, and 18 percent said it got worse (Exhibit 7).

**Exhibit 7. A Majority of Adults Who Visited the Marketplaces Went More Than Once; Three of 10 Said Their Experience Improved Over the Course of Their Visits**

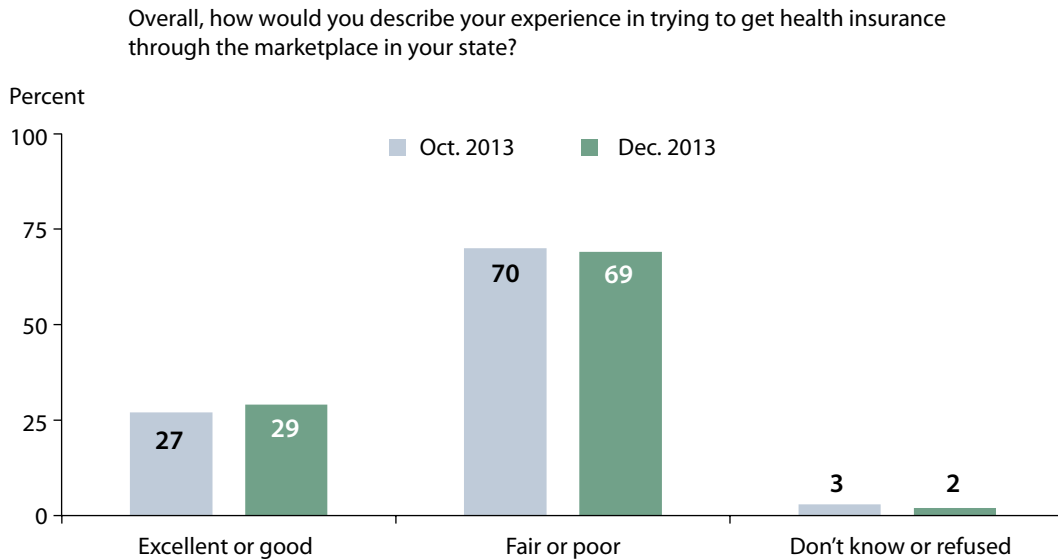


Source: The Commonwealth Fund Affordable Care Act Tracking Survey, Dec. 2013.

**A majority of adults who have visited the marketplaces continue to rate their experience as fair or poor.**

In December, 69 percent of adults who had visited the marketplaces described their experience as fair or poor. Nearly three of 10 (29%) reported that it was excellent or good. There was little change since October in this overall assessment (Exhibit 8).

**Exhibit 8. Despite Improvements, a Majority of Adults Who Have Visited the Marketplaces Rate Their Experience as Fair or Poor**



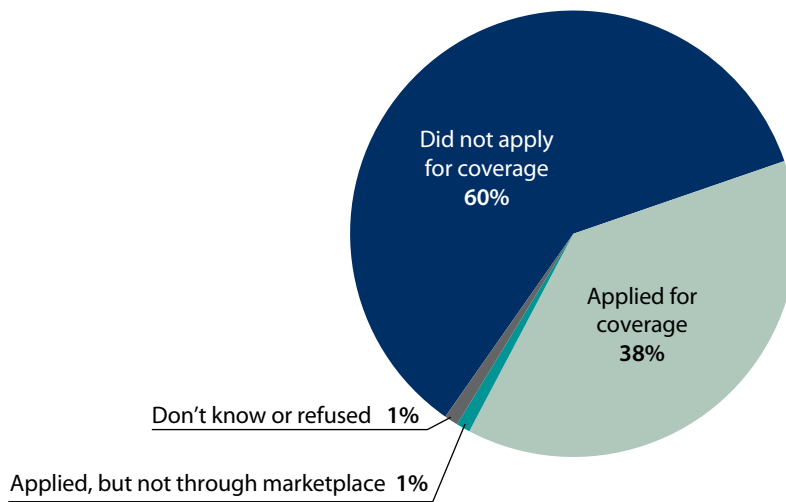
Adults ages 19–64 who are uninsured or have individual coverage and went to marketplace

Source: The Commonwealth Fund Affordable Care Act Tracking Surveys, Oct. 2013 and Dec. 2013.

**Nearly two of five adults who visited the marketplaces said they applied for health insurance.** Among the individuals who had visited the marketplaces by December, 38 percent said that they applied for enrollment in a health plan (Exhibit 9).

**Exhibit 9. Nearly Two of Five Adults Who Visited the Marketplaces Ended Up Applying for Health Insurance**

Did you end up applying for health insurance through the marketplace?



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

Source: The Commonwealth Fund Affordable Care Act Tracking Survey, Dec. 2013.

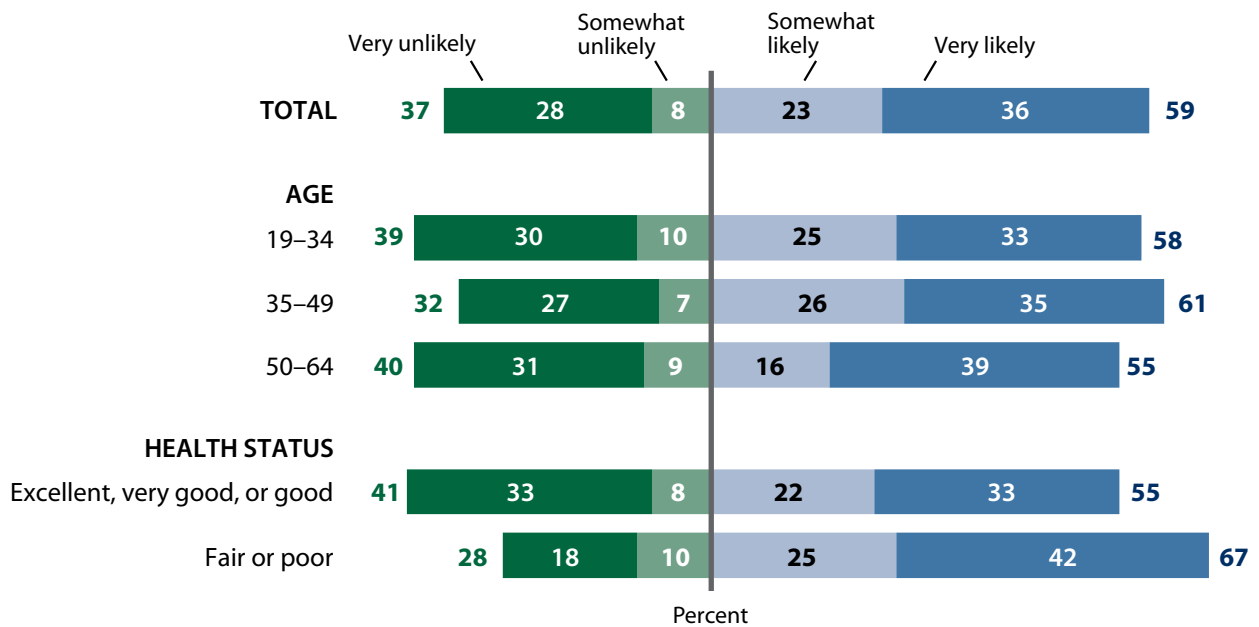
**A majority of adults who are potentially eligible for the new coverage options but have not yet enrolled said they will likely try to do so.**

People who want health insurance through the marketplaces next year have until March 31, 2014, to enroll in a plan. Fifty-nine percent of potentially eligible adults who either had not yet visited the marketplaces or had visited but not applied for or enrolled in a health plan said they were very or somewhat likely to go to the marketplace by the end of March to enroll in a plan or find out if they are eligible for financial help (Exhibit 10).<sup>5</sup> About 58 percent of young adults ages 19 to 34 said they were likely to go to or return to the marketplaces by March 31, compared with 61 percent of 35-to-49-year-olds and 55 percent of 50-to-64-year-olds.

Survey respondents in fair or poor health reported they were very or somewhat likely to shop for health insurance by the March 31 deadline at a higher rate than healthier respondents (67% vs. 55%).

**Exhibit 10. A Majority of Adults Potentially Eligible for Coverage Who Have Not Yet Enrolled Say They Are Likely to Shop for Coverage by March 31, 2014**

The enrollment period for health insurance in the marketplaces ends on March 31, 2014.  
 How likely are you to go to/go back to the marketplace by March 31, 2014, to enroll in a health plan or find out if you are eligible for financial help to pay for your plan or for Medicaid?



Adults ages 19-64 who are uninsured or have individual coverage\* and who have not gone to marketplace, or went to marketplace but did not apply or did not enroll

Notes: Bars may not sum to 100 percent because of "don't know" responses or refusal to respond; segments may not sum to subtotals because of rounding.  
 \* Respondents with individual market coverage who said they had received an offer from their insurance carrier to renew their plan for 2014 and said they planned to keep their policies were excluded from this analysis.  
 Source: The Commonwealth Fund Affordable Care Act Tracking Survey, Dec. 2013.

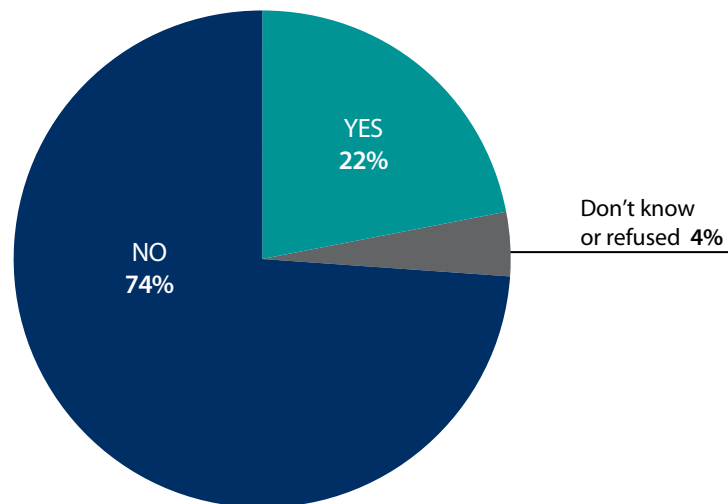
**Of those adults with individual market coverage, 22 percent said they had received a cancellation letter from their insurance carrier this year.**

In 2013, many people with individual market coverage and many small businesses were informed by their insurance carriers that their health plans did not meet the more comprehensive benefit requirements that go into effect this year under the Affordable Care Act. Consequently, they had to select a new health plan, whether through the insurer or through the marketplaces. Jon Gabel and colleagues have estimated that more than half of plans sold in the individual insurance market prior to 2014 would not have met the law's minimum coverage standards, either because they did not offer a comprehensive set of benefits or their cost-sharing requirements were too high.<sup>6</sup>

Among adults in the survey who had health insurance that they purchased in the individual insurance market, 22 percent said they had received a cancellation letter from their insurance company informing them that their health plan would not continue in 2014 (Exhibit 11).

**Exhibit 11. One of Five Adults with Individual Market Coverage in 2013 Said They Received Cancellation Letters from Their Insurers**

Did you receive a letter from your insurance company earlier this year telling you that they would be cancelling your health plan in 2014?



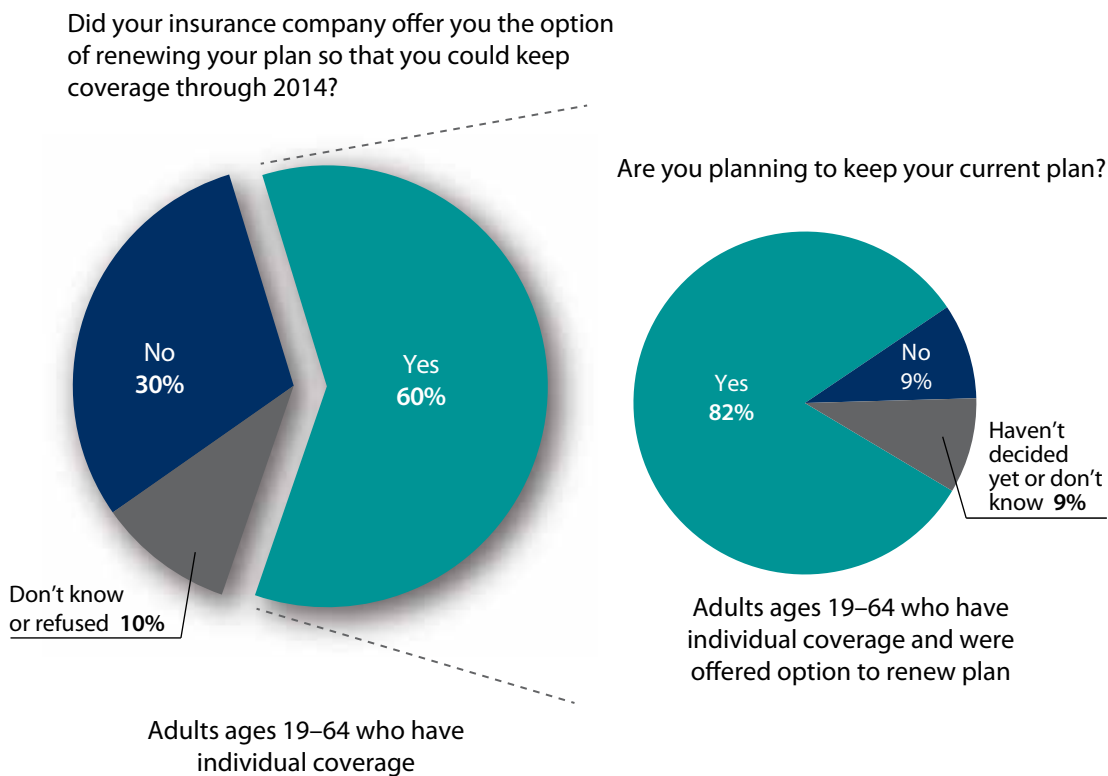
Adults ages 19–64 who have individual coverage

**A majority of adults with individual coverage said that their insurance carriers had offered them the option of renewing their plans through 2014.**

A few states decided early on to allow insurance companies to let people with individual market coverage renew their health plans in 2013, ahead of the new insurance market reforms, even if the plans were not compliant with the law’s new standards.<sup>7</sup> The difficult rollout of the federal marketplaces also prompted the Obama administration to make a similar allowance, out of concern that some people with cancelled policies might not be able to find a new plan in time for coverage beginning in January. In November, the administration issued a notice that encouraged, but did not require, all state insurance departments to allow noncompliant insurance policies that had been cancelled, or were slated for cancellation, to be renewed for plan years starting any time between January 1 and October 1, 2014.<sup>8</sup> More than half the states are currently allowing renewals.<sup>9</sup>

In the survey, 60 percent of adults with individual coverage said that their insurance carriers had offered them the option of renewing their plans through 2014. Of those who were offered the opportunity to renew their policies, 82 percent said they planned to keep their current plan (Exhibit 12).

**Exhibit 12. Sixty Percent of Adults with Individual Coverage Were Offered the Option to Renew Their Plans for 2014**



Source: The Commonwealth Fund Affordable Care Act Tracking Survey, Dec. 2013.

## CONCLUSION

Our survey findings reveal that, from the consumer perspective, there have been improvements in the federal and state-run health insurance marketplaces since the end of November, after a significant effort by government agencies to repair the websites. The findings point both to the public's patience with the repair efforts and to determination on the part of many people—including young adults—to obtain health insurance. At the same time, it is clear there are ongoing challenges in ensuring that the people most in need are able to purchase coverage they can afford. The data also reveal that the federal and state marketplaces will need to continue to enhance consumer usability.

The Commonwealth Fund's first survey in October found that nearly three of five adults who had not yet visited the marketplaces or enrolled in coverage said they were likely to return by the end of the open enrollment period in March. The December survey finds that the share of people eligible for the health reform law's coverage options who visited the marketplaces climbed to nearly a quarter (24%) by the end of December, up from 17 percent in October. And this month a similar share of those eligible appear to be determined to gain coverage next year.

The large share of visits by young adults ages 19 to 34 is particularly striking, and may ease concerns that this segment of the population will not seek marketplace coverage in adequate numbers. Moreover, the percentages of healthy and less-healthy individuals visiting the marketplaces are reflective of the potentially eligible population. While it is not yet possible to determine whether the same holds true for those who actually enroll in health plans, these findings suggest that many of the marketplaces may turn out to have fairly well-balanced risk pools in the first year. Preliminary enrollment estimates from some state marketplaces also point to this possibility.<sup>10</sup>

The problems with comparing health plans and premiums have diminished somewhat since October. This improvement likely stems from the better functionality of the marketplace websites and more information available to consumers on the sites. Still, people continue to be stymied in their efforts to compare plans according to their potential out-of-pocket costs, and a majority report difficulty in finding the right plan at the right price. In both the federal and state marketplaces, consumers will continue to need assistance with selecting plans.

An additional ongoing challenge to policymakers at all levels of government will be making sure that people who are potentially eligible for coverage under the health reform law know about the new coverage options. The level of awareness of the marketplaces and the financial assistance for coverage that is available was stubbornly stable across the two surveys: three of five potentially eligible adults were aware of the marketplaces and 56 percent were aware of financial help. Awareness is lowest among those people who stand to benefit the most. Just over half of Americans eligible for the law's most significant subsidies—those with incomes under 250 percent of poverty—are aware of this financial assistance, compared to 72 percent of those with higher incomes.

Despite a deeply disappointing initial rollout and the ongoing problems with websites' usability, the new federal and state programs had succeeded in enrolling at least 6 million people in either a private health plan or Medicaid by January 1. With more than 3 million previously uninsured young adults gaining coverage through their parents' policies since 2010, the potential is there for the Affordable Care Act to fully realize its coverage goals.

## METHODOLOGY AND TOPLINE

Social Science Research Solutions' (SSRS) nationally representative omnibus telephone survey was conducted from December 11 through December 29, 2013. Of the 3,805 interviews completed during this timeframe, 2,592 were completed with respondents ages 19 to 64. A total of 622 of these respondents reported that they were uninsured or that they had purchased health insurance through the individual market or through the new marketplaces created by the Affordable Care Act (ACA).

This sample of 622 adults potentially eligible for coverage under the ACA took The Commonwealth Fund's Affordable Care Act Tracking Survey. The survey was conducted in English and in Spanish. Landline interviews were conducted with 292 respondents, while cellular phone interviews were conducted with 330 respondents, including 217 in households with no landline telephone access. All 19-to-64-year-old respondents, including those not qualifying for the full survey, were weighted to the population of U.S. adults ages 19 to 64, based on recent U.S. census estimates. The survey has an overall margin of sampling error of  $\pm 4.56$  percent at the 95 percent confidence level. The landline portion of the survey achieved an 18.3 percent response rate and the cellular phone component achieved a 6.3 percent response rate.

A similar survey was conducted by SSRS from October 9 to 27, 2013. The October survey had a total sample of 682 respondents and an overall margin of sampling error of  $\pm 4.3$  percent at the 95 percent confidence level. For more information on the October survey, please refer to: [www.commonwealthfund.org/Publications/Data-Briefs/2013/Nov/Americans-Experiences-Marketplaces.aspx](http://www.commonwealthfund.org/Publications/Data-Briefs/2013/Nov/Americans-Experiences-Marketplaces.aspx).



## NOTES

- <sup>1</sup> A small group of people in the sample (n=25) who said they had health insurance said they had signed up for health insurance in a health insurance marketplace. This coverage would not have been in effect at the time of the survey. These respondents were then asked a follow-up question about the coverage they had prior to signing up in the marketplace and their insurance type was categorized based on their prior coverage source.
- <sup>2</sup> For more detail on the state insurance marketplaces, see The Commonwealth Fund's interactive [state marketplace map](#).
- <sup>3</sup> The Kaiser Family Foundation, for example, estimates that nationwide about 40 percent of Americans who are potentially eligible for individual market coverage are between the ages of 18 and 34. See <http://kff.org/health-reform/perspective/the-numbers-behind-young-invincibles-and-the-affordable-care-act/>.
- <sup>4</sup> An employer plan is considered affordable if the premium costs less than 9.5 percent of an employee's income for a self-only plan. It also must cover 60 percent of a group's medical costs.
- <sup>5</sup> Respondents with individual market coverage who said they had received an offer from their insurance carrier to renew their plan for 2014 and said they planned to keep their policies were excluded from this analysis.
- <sup>6</sup> J. R. Gabel, R. Lore, R. D. McDevitt et al., "More Than Half of Individual Health Plans Offer Coverage That Falls Short of What Can Be Sold Through Exchanges as of 2014," *Health Affairs Web First*, May 23, 2012.
- <sup>7</sup> C. Monahan and S. Corlette, "The Affordable Care Act's Early Renewal Loophole: What's at Stake and What States Are Doing to Close It," *The Commonwealth Fund Blog*, Aug. 22, 2013.
- <sup>8</sup> S. R. Collins, "Pros and Cons of the President's Policy Fix for Health Plan Cancellations," *The Commonwealth Fund Blog*, Nov. 18, 2013.
- <sup>9</sup> K. Lucia, K. Keith, and S. Corlette, "State Decisions on the Health Insurance Policy Cancellations Fix," *The Commonwealth Fund Blog*, Nov. 27, 2013, updated Jan. 8, 2014.
- <sup>10</sup> S. R. Collins and T. Garber, "Enrollment Climbs in the Affordable Care Act's Health Insurance Options," *The Commonwealth Fund Blog*, Dec. 20, 2013.

**Appendix Table 1. Awareness of Marketplaces and Financial Assistance by Demographics**

	Awareness of marketplaces		Awareness of financial assistance	
	October 2013	December 2013	October 2013	December 2013
<b>TOTAL</b>	<b>60%</b>	<b>63%</b>	<b>53%</b>	<b>56%</b>
Age				
19–29	49%	58%	48%	58%
19–34	52%	58%	48%	56%
30–49	63%	61%	54%	50%
50–64	67%	71%	56%	63%
Federal poverty level				
Under 250% FPL	n/a	61%	n/a	52%
250% FPL or more	n/a	77%	n/a	72%
Insurance type				
Uninsured	56%	59%	47%	51%
Individual	74%	77%	70%	76%
Political affiliation				
Democrat	64%	66%	55%	57%
Republican	66%	65%	57%	63%
Independent	60%	65%	54%	58%
Marketplace type				
State-run marketplace	64%	63%	55%	60%
Federal marketplace	59%	63%	52%	53%

Source: The Commonwealth Fund Affordable Care Act Tracking Surveys, Oct. 2013 and Dec. 2013.

**Appendix Table 2. Demographics of Survey Sample and Those Who Visited Marketplaces**

	Total		Adults ages 19–64 who are uninsured or have individual coverage and who went to marketplace	
	Oct. 2013	Dec. 2013	Oct. 2013	Dec. 2013
Unweighted n	682	622	118	157
Percent distribution	100%	100%	17%	24%
<b>Age</b>				
19–34	40%	41%	32%	41%
35–49	34%	30%	42%	31%
50–64	26%	28%	26%	28%
<b>Health status</b>				
Excellent, very good, or good	75%	70%	73%	77%
Fair or poor	24%	29%	25%	23%
<b>Federal poverty level</b>				
Less than 250% FPL	n/a	67%	n/a	68%
250% FPL or more	n/a	20%	n/a	24%
<b>Insurance type</b>				
Uninsured	76%	80%	70%	75%
Individual	20%	18%	22%	19%
<b>Political affiliation</b>				
Democrat	31%	31%	36%	35%
Republican	14%	13%	15%	11%
Independent	45%	40%	41%	45%
<b>Marketplace type</b>				
State-run marketplace	34%	38%	36%	38%
Federal marketplace	66%	62%	64%	62%

Source: The Commonwealth Fund Affordable Care Act Tracking Surveys, Oct. 2013 and Dec. 2013.

## Appendix. Survey Questions

Among all surveyed adults (n= 622):

1. Since the beginning of October, under the health reform law, also known as the Affordable Care Act, new marketplaces have been open in each state where people who do not have affordable health insurance through a job, can shop and sign up for health insurance. Are you aware of this new marketplace in your state?

Yes, I am aware – 63%

No, I am not aware – 36%

Don't know enough to say or refused – 1%

Among all surveyed adults (n=622):

2. Many people without affordable health insurance through a job may be eligible for financial help to pay for their health insurance in these new marketplaces. Are you aware that financial assistance for health insurance is available under the reform law?

Yes, I am aware – 56%

No, I am not aware – 43%

Don't know enough to say or refused – 1%

Among all surveyed adults (n=622):

3. People who go to the marketplaces may also find out that their income makes them eligible for Medicaid under the reform law. Are you aware that the health care reform law makes Medicaid available to more Americans?

Yes, I am aware – 54%

No, I am not aware – 45%

Don't know enough to say or refused – 1%

Among all surveyed adults (n=622):

4. Have you gone to this new marketplace to shop for health insurance? This could be by mail, in person, by phone, or on the Internet.

Yes – 24%

No – 74%

Someone else went to marketplace to shop for respondent's/family's health insurance, don't know enough to say, or refused – 2%

Among surveyed adults who went to marketplace (n=157):

5. How many times did you visit the marketplace— did you visit once, or did you visit more than once?

Once – 39%

More than once – 59%

Don't know or refused – 2%

Among surveyed adults who went to marketplace (n=157):

6. Did you visit the marketplace...?

*On the Internet*

Yes – 83%

No – 16%

Don't know or refused – 0

*By phone*

Yes – 30%

No – 69%

Don't know or refused – 1%

*In person*

Yes – 19%

No – 81%

Don't know or refused – 0

*By mail*

Yes – 12%

No – 88%

Don't know or refused – 0

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Among surveyed adults who went to marketplace  
(n=157):

**7. When you visited the marketplace, did you get personal assistance?**

- Yes, got personal assistance – 38%
  - No, did not get personal assistance – 62%
  - Don't know or refused – 0
- 

Among surveyed adults who went to marketplace  
(n=157):

**8. How easy or difficult was it to find a plan with the type of coverage you need? Would you say it was...?**

- Very easy – 17%
  - Somewhat easy – 19%
  - Somewhat difficult – 27%
  - Very difficult – 29%
  - Impossible – 4%
  - Don't know or refused – 4%
- 

Among surveyed adults who went to marketplace  
(n=157):

**9. How easy or difficult was it to find a plan you could afford? Would you say it was...?**

- Very easy – 17%
  - Somewhat easy – 20%
  - Somewhat difficult – 19%
  - Very difficult – 35%
  - Impossible – 4%
  - Don't know or refused – 5%
- 

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Among surveyed adults who went to marketplace  
(n=157):

**10. How easy or difficult was it to compare the benefits covered of different insurance plans? Would you say it was...?**

- Very easy – 20%
  - Somewhat easy – 24%
  - Somewhat difficult – 19%
  - Very difficult – 28%
  - Impossible – 5%
  - Don't know or refused – 6%
- 

Among surveyed adults who went to marketplace  
(n=157):

**11. How easy or difficult was it to compare the premium costs of different insurance plans? Would you say it was...?**

- Very easy – 21%
  - Somewhat easy – 30%
  - Somewhat difficult – 18%
  - Very difficult – 19%
  - Impossible – 5%
  - Don't know or refused – 7%
- 

Among surveyed adults who went to marketplace  
(n=157):

**12. How easy or difficult was it to compare the potential out-of-pocket costs from deductibles and co-payments of different insurance plans? Would you say it was...?**

- Very easy – 16%
- Somewhat easy – 22%
- Somewhat difficult – 26%
- Very difficult – 23%
- Impossible – 4%
- Don't know or refused – 8%

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Among surveyed adults who went to marketplace (n=157):

13. Did you try to find out if you are either eligible for financial assistance to help pay for your plan, or if you are eligible for Medicaid?

Yes – 59%  
 No – 38%  
 Don't know or refused – 3%

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Among surveyed adults who tried to find out if eligible for financial assistance in marketplace (n=95):

14. How easy or difficult was it to find out if you were eligible for financial assistance or for Medicaid? Would you say it was...?

Very easy – 33%  
 Somewhat easy – 20%  
 Somewhat difficult – 26%  
 Very difficult – 19%  
 Impossible – 1%  
 Don't know or refused – 1%

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Among surveyed adults who went to marketplace (n=157):

15. Overall, how would you describe your experience in trying to get health insurance through the marketplace in your state? Would you say that your experience was...?

Excellent – 12%  
 Good – 17%  
 Fair – 31%  
 Poor – 38%  
 Don't know or refused – 2%

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Among surveyed adults who went to marketplace more than once (n=91):

16. You said that you visited the marketplace more than once. From your first visit to you second/last visit, did your experience in trying to get health insurance through the marketplace...?

Improve – 29%  
 Stay about the same – 52%  
 Get worse – 18%  
 Don't know or refused – 0

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Among surveyed adults who went to or had someone else go to the marketplace for them (n=160):

*[Note: 3 people in the survey said that someone else went to the marketplace on their behalf]*

17. Did you end up applying for health insurance through the marketplace?

Yes, applied – 38%  
 No, did not apply – 60%  
 I applied for health insurance but not through the marketplace – 1%  
 Don't know or refused – 1%

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Among surveyed adults who went to marketplace but did not enroll, adults who have not gone to the marketplace, or adults who are not aware of the marketplaces (n=573):

18. The enrollment period for health insurance in the marketplaces ends on March 31, 2014. How likely are you to go to (go back to) the marketplace by March 31, 2014, to enroll in a health plan or find out if you are eligible for financial help to pay for your plan or for Medicaid? Would you say you are...?

Very likely – 36%  
 Somewhat likely – 23%  
 Somewhat unlikely – 8%  
 Very unlikely – 28%  
 Already enrolled in health plan, Medicaid, or other health insurance – 1%  
 Haven't decided yet – 1%  
 Don't know or refused – 2%

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Among surveyed adults with individual market coverage (n=156):

**19. Did you receive a letter from your insurance company earlier this year telling you that they would be cancelling your health plan in 2014?**

- Yes, received a letter – 22%
- No, did not receive a letter – 74%
- Don't know or refused – 4%

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Among surveyed adults with individual market coverage (n= 156):

**20. Did your insurance company offer you the option of renewing your plan so that you could keep your coverage through 2014?**

- Yes, was offered the option to renew – 60%
- No, was not offered the option to renew – 30%
- Don't know or refused – 10%

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Among surveyed adults with individual market coverage who were offered the option to renew (n=90):

**21. Are you planning to keep your current plan?**

- Yes – 82%
- No – 9%
- Haven't decided yet – 8%
- Don't know or refused – 1%

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Among all surveyed adults (n=622):

**22. In general, how would you describe your own health? Would you say it is...?**

- Excellent – 20%
- Very good – 28%
- Good – 22%
- Fair – 21%
- Poor – 8%
- Don't know or refused – 0%

### ABOUT THE AUTHORS

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