

Messaging Framework for the Second Open Enrollment Period

Going into the second open enrollment period for the health insurance marketplaces, the enrollment community must focus on both getting more uninsured consumers enrolled and also ensuring that those who are already enrolled retain coverage. Fortunately, HHS has taken steps to ensure that those who are enrolled but fail to take action during the open enrollment period do not lose coverage. However, it is crucial that the enrollment community organize around simple, unified messages for all consumers, both those enrolling for the first time and those who are renewing coverage. This memo presents Enroll America's suggestions for a simple consumer messaging framework in the months leading up to and during the second open enrollment period.

The challenge and the temptation

After successfully enrolling more than 8 million Americans in health insurance through health insurance marketplaces, the enrollment community must now determine the simplest way to make sure they stay enrolled. The auto-renewal policy announced by HHS earlier this summer provides a crucial safety net, but does not position consumers to actively engage with the marketplace or maximize the financial help that we know is crucial to getting—and keeping—consumers enrolled. At the same time, the enrollment community must also reach out to the remaining uninsured population and get them to take action for the first time.

The temptation is to create different messaging strategies for these different groups, since they have different characteristics and their enrollment experience will be different. However, Enroll America's research and experience suggests that these two groups have more in common than not, and a single, unified message will create an echo chamber that will reinforce key messages that both groups need to hear and understand.

A simple messaging opportunity

Fortunately, if consumers do nothing but continue to make their monthly payments, their coverage will continue. But engaging a consumer to take some simple steps to update their account information and, if desired, review other options available in the marketplace, could help achieve a number of important objectives:

- Increase consumer knowledge of the health care system
- Ensure consumers are enrolled in the plan that is best for them
- Avoid consumer "sticker shock" if plan pricing changes or marketplace shifts significantly change the amount of financial help a consumer is eligible to receive
- Reduce the likelihood consumers will face an unexpected tax repayment obligation in 2016
- Proactively address questions that will arise from renewal notifications sent by insurers

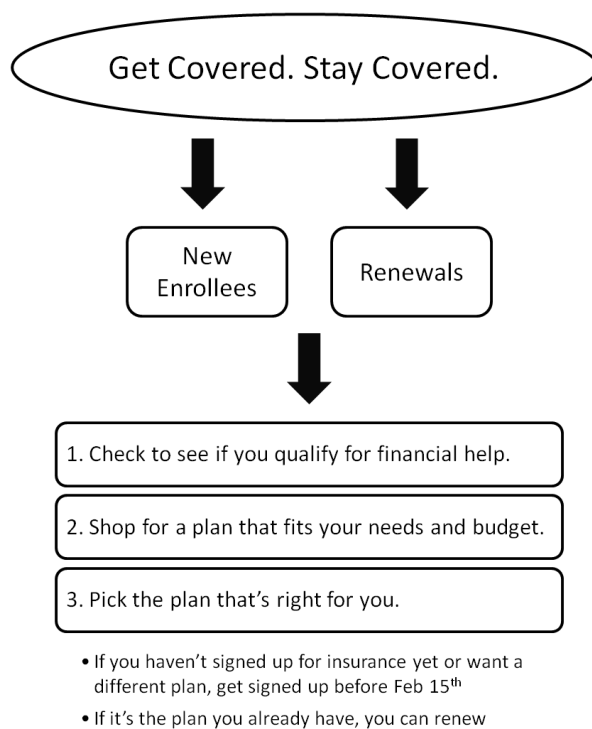
Consumer auto and home insurers have helped to cement the notion that consumers should regularly shop around to make sure they are getting the best deal, e.g. "15 minutes could save you 15 percent or more on car insurance."

Segmenting and targeting consumers that are eligible for renewal would be a difficult task. Attempting to explain to some consumers that they don't need to do anything, but to other consumers that they still need to take action or face paying a fine, is likely to create more confusion around a topic that research consistently shows is rife with misinformed consumers.¹

But a simple, unified message frame and action path is available. For both new enrollees and renewals, the message should:

1. **Simplify.** Assure consumers the process is easy.
2. **Emphasize opportunity for financial help.** Even if a consumer is already receiving financial help for their plan, everyone should “check to see how much financial help they can receive.”
3. **Emphasize “newness” of plans.** Both groups will be motivated by *new* opportunities, e.g. “this is a new way to find health insurance,” and “new plans may be available.”
4. **Remind them that help is available.** Both new enrollees and those renewing coverage may need help with the process.
5. **Mobilize to action.** Deadlines are motivating and will ensure people don't lose coverage.

The following framework would allow for this kind of simple message for all marketplace populations:



Recommendations

Enroll America recommends encouraging *all* consumers to “Get Covered. Stay Covered.” and directing them to tools to help them get started, such as a calculator to see how much financial help they might be eligible to

¹ PerryUndem Research & Communication and Enroll America, *Why Did Some People Enroll and Not Others?*, May 2014. Available online at: <https://s3.amazonaws.com/assets.enrollamerica.org/wp-content/uploads/2014/05/EA-PerryUndem-Survey-Report.pdf>.

receive in 2015 or “help locator” tools to find and schedule appointments with nearby assisters who can help with the full array of enrollment needs (both new applications and renewals). All consumers should be directed to the same, simple three-step process: check to see if you qualify for financial help, shop for a plan that fits your needs and budget, and finally, pick a plan (or keep the plan you’ve already got). “Checklist inspired” messages demystify the process for consumers, encourage action, and are preferable to segmented messages that may confuse and discourage consumers from engaging.

As was done throughout the first open enrollment period, ongoing testing can help refine the message, but presenting a simple, unified message to all potential Marketplace consumers will help to maximize enrollment in the best plans for consumers, while also limiting confusion. This will lead to optimal results for consumers, first and foremost:

- Higher consumer satisfaction with their marketplace coverage and overall experience
- Greater consumer engagement and understanding of the process (better-informed consumers expect to keep their coverage and renew coverage at higher rates²), and
- Greater continuity of coverage and care (which is associated with better health outcomes³).

Simple messages that drive consumers to engage with the process will also contribute to greater marketplace stability and sustainability over time, and pave the way early-on for smoother roll-out of the tax reconciliation process.

² Enroll America conducted a survey in June 2014 that found that individuals that had enough information about the law reported that they expected to keep insurance at a rate of 12 percentage points higher than individuals that reported not having enough information (86 percent vs. 74 percent), and those that had enough information about the law reported that they plan to renew coverage at a rate 17 percentage points higher than individuals that did not have enough information (73 percent vs. 56 percent).

³ Van Walraven, Carl, Natalie Oake, Alison Jennings and Alan J. Forster. “The association between continuity of care and outcomes: a systematic and critical review.” *Journal of Evaluation in Clinical Practice* 16.5 (2010): 947–956.