

PERSONAS

of Covered California's Consumers to Inform Content Marketing

Final Deck | September 9, 2019



Background & Methods

Background

Objective: Develop personas to inform content marketing designed to drive consideration, enrollment, and affinity for the Covered California brand.

Challenge: Finding consumer data with measures on content-relevant attitudes and behaviors that are suitable for cluster analysis.

Opportunity: The 2019 California Health Coverage Survey (Covered California’s “Member Survey”) provides a wealth of relevant data on members and others who looked into Covered California during the most recent Open Enrollment Period.

Collaboration: Covered California’s Marketing and Policy divisions brought their respective vendors (Foundry 360 and NORC) together to leverage the Member Survey data for this need.

Results:

- Identification of four segments of OE shoppers defined by: (a) the questions they have during OE, (b) how they shop & compare, and (c) their health needs;
- Development of corresponding personas that bring these segments to life; and
- Insights to inform the topics, style, and targeting of Covered California’ content marketing campaign.

Survey Data

The California Health Coverage Survey (“Member Survey”)

- Fielded February to April 2019, in English and Spanish
- Mail-to-web design with prepaid and “early bird” incentives
- Probability-based sample of Covered California’s five consumer cohorts:

 Renewing members

 New members

 Funnel consumers

 Terminating members

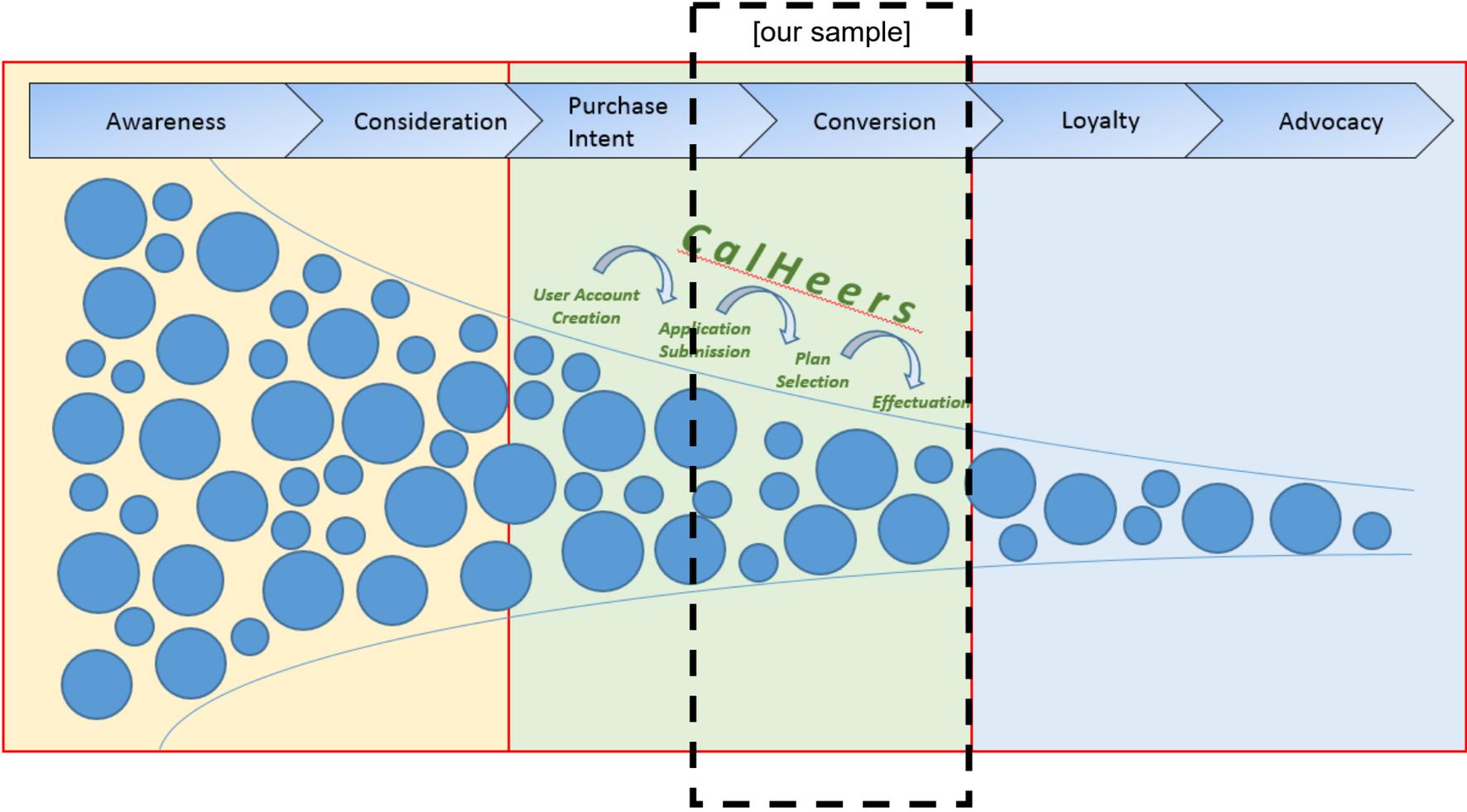
 Cancelled members

Sample Used for Segmentation

- To make the best use of the relevant survey items, we used the portion of the sample representing potential new take-ups that submitted applications and looked at plans*
- In practice, this includes:  All new members  Funnel consumers that shopped & compared plans
 All cancelled members
- Includes both consumers who ended up enrolling and those who did not – because they (a) went off-exchange, (b) went uninsured, or (c) got coverage through an employer or Medi-Cal
- n = ~1,700 respondents with self-reported enrollment status verified by administrative data

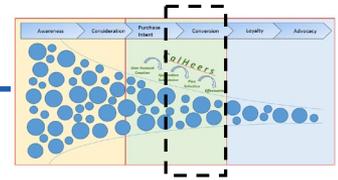
*Note that consumers without any “non-SAWS” eligibility runs in 2019 were excluded from the sample used for segmentation.

Sample's Correspondence to Funnel



By focusing on this sample, we have the unique opportunity to consider how consumers differ in the ways they engage Covered California and shop for insurance – in addition to their general attitudes and needs regarding health insurance.

What About the Rest of the Funnel?



The Unknown: We do not currently have data points on how well the segments we have identified correspond to other parts of the funnel

Informed Guess: Based on our experience researching the broader funnel and membership, we believe the identified segments and corresponding personas are likely representative of the *types* of consumers in other parts of the funnel – though the *relative proportions* of the segments likely vary across different parts of the funnel (more on this later...)

Opportunity to Explore: In future segmentation work, we could explore how these segments and personas map to other parts of the funnel using several data sources, including the following:

- Other samples from Member Survey (e.g., renewing members, terminating members, and funnel consumers that applied but did not shop & compare)
- NORC’s “Tracker Survey” of various segments of uninsured consumers
- The California Health Interview Survey (CHIS)

Low-hanging Fruit: It is important to note that this sample of consumers represents a key market segment of “low-hanging fruit” that would be a productive focal point for the first phase of the content marketing campaign (independent of how the personas map to the broader funnel)

Identifying Segments & Developing Personas

Segmentation

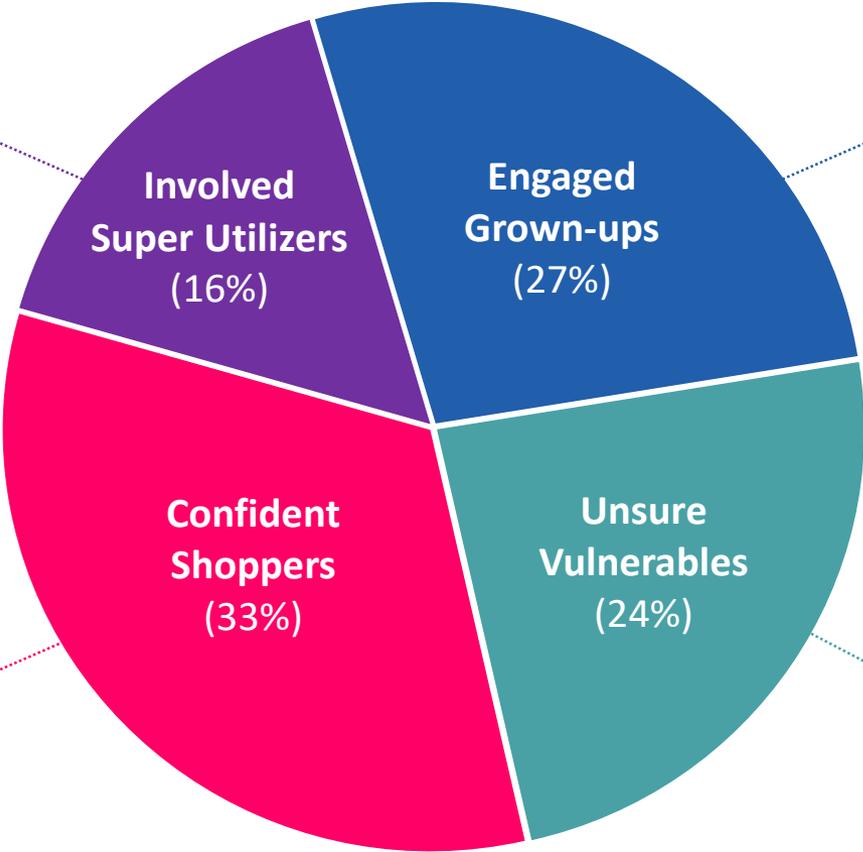
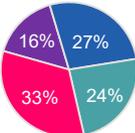
- Conducted several rounds of cluster analysis until a satisfactory solution was identified
- Identified four segments defined by the following:
 - a) Volume and types of questions they had during Open Enrollment
 - b) Extent to which they compared various aspects of plans when shopping & comparing
 - c) Their current health needs

Developing Personas

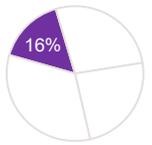
- Recreated segments using MRI data to identify preferences and behaviors related to lifestyle and media for each segment
- Leveraged MRI data and survey data to build fuller pictures of segments and identify implications for content marketing
- Using same data, developed personas to bring each segment to life and provide prototype stories for content developers to keep in mind

Consumer Segments & Personas

Segments & Personas



Involved Super Utilizers



Susan



52 years old

Works full-time

Recently divorced

2 adult children

\$35k annual income
(~200% of FPL)

Previously covered
through ex-husband's
employer

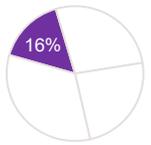
BACKGROUND | Susan recently divorced and is struggling financially now that she's on her own. She has a new job working for a local non-profit that doesn't offer health insurance. She has two adult kids, one of whom lives with her. She sees her doctor frequently and takes medication for high blood pressure. She had skin cancer last year, so she also sees her dermatologist regularly. Given the history of breast cancer in her family, she stays on top of her wellness checks and screenings with her OB/GYN.

PERSPECTIVE ON HEALTH INSURANCE | Susan previously had coverage through her ex-husband's job. She has never been uninsured and wouldn't consider it. Having health insurance is extremely important to her so she can get the care she needs. Finding the right plan feels like high stakes for her – she wants to make sure she has enough coverage, but also doesn't want to pay more than she has to.

ENGAGING COVERED CALIFORNIA | Susan looked into Covered CA on her own. She applied through the website and started looking at plans. She looked at all aspects of plans, but three things mattered most: (1) making sure her doctors were in network (she even called their offices to ask which carriers they accept); (2) minimizing out-of-pocket expenses; and (3) staying in her budget. She was overwhelmed with all of the information and scared she would make the wrong choice. She called the Service Center for help but was frustrated they wouldn't help her choose a plan. She ended up completing her enrollment through an agent. She enrolled in a Silver 73 plan with Blue Shield of CA for about \$300/month.

LIFESTYLE & MEDIA | Susan reads health news and often finds the conflicting advice overwhelming. She likes to share recipes with her friends and bookmarks recipes online. She still lives in the house from her marriage and recently used budget-friendly tips from women's magazines to convert her son's room into a guest room. She watches prime time programs on her TV every night. When she needs to figure something out, Susan gets overwhelmed by too much information from too many sources. She prefers to pick up her home phone and talk to a knowledgeable person about it.

Involved Super Utilizers



CHARACTERISTICS RELATED TO HEALTH INSURANCE:

- Most “enthusiastic” about health insurance; it is *extremely* important because they need it to get care.
- All take Rx; vast majority have an ongoing health condition.
- Most expect to see a doctor several times this year.
- Most have a doctor and want them to be in network.
- Relatively high insurance literacy and know how to shop for plans, but still want help or additional info.
- Actively compare various aspects of plans and know what’s important to them, but need reassurance on plan selection.
- Lowest risk of going uninsured.

HOW THEY ENGAGE COVERED CALIFORNIA:

- Most already know about Covered CA and look into enrolling on their own; some are prompted by agents.
- Have questions about eligibility, enrollment process, and choosing plans.
- When they need help, they reach out to an agent or the Service Center by phone or online chat.
- Among those that enroll: 1 in 2 use an agent, 1 in 3 enroll unassisted, and others use the Service Center.

CONTENT IMPLICATIONS TO CONSIDER:

- Need to know that help is available and how to get it.
- Provider search capabilities are likely appealing.
- Don’t need convincing about importance of being covered; want clear info/advice to help them get good coverage.
- Include the 800 number in addition to website.
- Place content in well-known, trustworthy media brands to reach and reassure this segment.
- Content in English only is likely OK.

AGE RANGE: 35 to 60 years old

RACE/ETHNICITY: Less diverse: 3 in 5 are non-Hispanic Whites

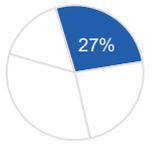
LANGUAGE: Vast majority speaks only English at home

EDUCATION: Most have a college degree (or more)

FPL RANGE: 200% to 400% of FPL

INCOME RANGE (single): \$25k to \$50k per year

INCOME RANGE (family of 3): \$42k to \$83k per year



Danny



32 years old

Works full-time
(freelancer)

Single

No children

\$35k annual income
(~300% of FPL)

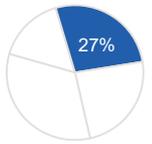
Currently uninsured;
previously had
employer-based
coverage

BACKGROUND | Danny is a graphic designer who started doing freelance work full-time a year ago. He has been uninsured since then. Even though he doesn't really *need* insurance, he knows he should have it. He doesn't have any health issues and hasn't seen a doctor in a while. He is single and doesn't have kids, but he plans to get married soon.

PERSPECTIVE ON HEALTH INSURANCE | Before going freelance, Danny had coverage through his job. Having health insurance is important to him mainly because it's just what grown-ups do. Now that he's thinking about getting married, he feels like he definitely needs insurance. Plus, he wonders if he's breaking the law, but he's unsure whether it's required this year. He didn't know much about insurance but learned what he needed to from Google searches on things like deductibles and provider networks.

ENGAGING COVERED CALIFORNIA | Danny was prompted to look into Covered CA because a colleague at his co-working space told him they have good deals. After creating an account online, he immediately had questions. He wasn't sure how to answer the questions about his income because it fluctuates a lot. He mainly just wanted to know what he was eligible for. He got help through online chat and figured it out. When looking at plans, his goal was simple: find a respectable plan that he could afford. He compared plans on a lot of things but wasn't sure what to pick and decided to look again later. His co-working colleague told him about another website (which is actually a broker's site). It recommended a Silver 70 plan with Kaiser Permanente for about \$230/month. Danny went with it and enrolled.

LIFESTYLE & MEDIA | Danny is a cord-cutter but he keeps up with trends and visits websites targeting Millennials with top 10 lists and bite-sized stories. He's not much into news or traditional media because it's depressing; he prefers fun and lighthearted media. If an article or video is too long, he'll skip it or abandon it midway. When learning about serious topics, Danny would rather jump right to the answer so he can get on with his life.



CHARACTERISTICS RELATED TO HEALTH INSURANCE:

- Having insurance is important – but not for any specific needs; it's more about being responsible.
- None take Rx; few have ongoing health conditions.
- See themselves as having very good or excellent health.
- Mid-level insurance literacy; mostly know how to shop for plans, but still want help or additional info.
- Actively compare various aspects of plans, but they have lots of questions and want help/answers.

HOW THEY ENGAGE COVERED CALIFORNIA:

- Most look into it on their own; some are prompted by agents.
- Have questions about eligibility, enrollment process, and choosing plans.
- Most likely segment to have questions about the health care law and how it affects them.
- When they need help, they reach out to an agent or the Service Center by phone or chat; they also rely on friends/family for help and advice.
- Among those that enroll: 1 in 2 uses an agent, 1 in 3 enrolls unassisted, and others use the Service Center.

CONTENT IMPLICATIONS TO CONSIDER:

- Need to know that help is available to answer their questions & help them enroll easily.
- Want to know about the health care law and implications.
- Don't need convincing about importance of insurance – but might need a push to take action.
- Likely to find how-to articles, listicles, and shorter pieces appealing.
- Social media is likely an effective way to reach them (they don't seek out health news or information).
- Content in English only is likely OK.

AGE RANGE: 29 to 45 years old

RACE/ETHNICITY: Diverse: 33% white, 28% Hispanic, 23% API

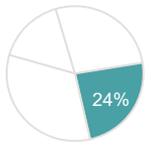
LANGUAGE: Diverse, but nearly all speak English very well

EDUCATION: Vast majority have at least some college

FPL RANGE: 175% to 325% of FPL

INCOME RANGE (single): \$22k to \$41k per year

INCOME RANGE (family of 3): \$37k to \$70k per year



Rosa



44 years old

Works part-time

Married

3 school-aged children

\$31k annual income
(~150% of FPL)

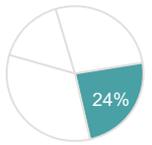
Previously covered
through Medi-Cal

BACKGROUND | Rosa lives with her husband, three school-aged kids, and mother. She's the heart of the family and takes care of everyone. Her husband works full-time but gets no benefits. She picks up odd jobs whenever she can to help make ends meet. She speaks English reasonably well but prefers Spanish. She's dealing with some health issues, but nothing major. She can usually get any care she needs from the local clinic and she gets her prescriptions from Walmart for just a few dollars.

PERSPECTIVE ON HEALTH INSURANCE | Rosa's children are enrolled in Medi-Cal and she makes sure that's always in place. She and her husband have been enrolled in Medi-Cal on and off for years. As long as her kids are covered, she's at peace. She feels better when she has Medi-Cal, but doesn't panic when she loses it; she knows she'll get it again soon and she can go to the clinic if she gets sick in the meantime. Private health insurance feels foreign and out of reach for her – that's for people with jobs in big companies or with a lot of money.

ENGAGING COVERED CALIFORNIA | Rosa is familiar with Covered CA's name because she sees the ads at the bus stop, but she never thought of it as something that's relevant to her. She first found out she might be eligible from her Medi-Cal termination letter. She asked about it at the County office, and they confirmed that she was eligible. They directed her to the website, but she quickly got overwhelmed and called the 800 number for help. She mainly just wanted to know if she could afford one of these plans. The representative told her that she could get a basic plan for \$1 or a better plan for less than \$30/month. She was surprised and skeptical; it seemed too good to be true. She ended up calling several times to get help and eventually enrolled in Silver 94 with Health Net, doing the entire process by phone.

LIFESTYLE & MEDIA | Rosa usually accesses the internet on her smartphone and uses mostly Spanish-language media. She often watches videos on her phone, but she worries about using too much data. Rosa doesn't mind being taught new things; she tends to follow advice from people or institutions she respects and trusts.



CHARACTERISTICS RELATED TO HEALTH INSURANCE:

- Having health insurance is important – but for many, it’s likely more “nice to have” vs. “must have.”
- Most don’t have a health condition or take Rx, but 2 in 5 do.
- Most don’t have a regular doctor; more likely than others to go to clinics (vs. doctor offices).
- Lower insurance literacy and have a lot of questions.
- Focused on the monthly premium and whether they can afford it; don’t look at much else.
- More likely to think about coverage through Covered CA as temporary (<1 yr).
- Least likely to know APTC eligibility or about penalty law.
- Likely to have been enrolled in Medi-Cal recently.
- At highest risk of going uninsured.

HOW THEY ENGAGE COVERED CALIFORNIA:

- Not likely to look into Covered CA without being prompted to do so by an official source.
- When they need help, they reach out to a variety of official sources; not likely to self-help online.
- Among those that enroll: the vast majority do so assisted, using a variety of service channels.

CONTENT IMPLICATIONS TO CONSIDER:

- Need help seeing Covered CA as something that’s relevant for “people like them” (through messaging, stories, imagery).
- Need assurance that they can figure this out and there are people who can help them
- Emphasize financial help and affordability.
- Tell them how and where to get help enrolling.
- Explain that plans can serve as needed temporary coverage.
- Include quotes/endorsements from community leaders and official sources to establish credibility and trust.
- Content should be in both English and Spanish.
- Include Spanish-language websites in media placement mix.

AGE RANGE: 30 to 51 years old

RACE/ETHNICITY: Diverse, but 2 in 5 are Hispanic.

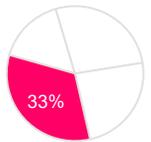
LANGUAGE: 2 in 5 speak Spanish; 1 in 4 has difficulty w/English

EDUCATION: Less education; 2 in 5 has HS diploma or less

FPL RANGE: 150% to 250% of FPL

INCOME RANGE (single): \$18k to \$30k per year

INCOME RANGE (family of 3): \$31k to \$52k per year



Michael



38 years old

Works full-time
(self-employed)

Single

1 child

\$65k annual income
(~375% of FPL)

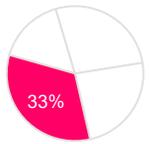
Previously
off-exchange

BACKGROUND | Michael used to work for a small business, but he started his own business a few years ago. He has never married but has a school-aged daughter and joint custody with his former girlfriend. He doesn't have any current health issues, but he sees his doctor for regular check-ups and he sees specialists for sports injuries every once in a while.

PERSPECTIVE ON HEALTH INSURANCE | Michael had coverage through his employer for many years. Since starting his own business, he has had coverage through Covered CA and off-exchange. Last year, he bought coverage directly from a carrier, but he looked at Covered CA this year because business was down and he thought he might be eligible for a tax credit. Having health insurance is important to him mainly to minimize his financial risk in case he gets really hurt or sick. He is very confident he knows what he needs to know about how health insurance works and how to pick the right plan.

ENGAGING COVERED CALIFORNIA | Michael can't remember how he first heard of Covered CA; he frequently sees ads online and knows a lot of people who have it. He could enroll "DIY" but he is used to working with a broker who helps him identify his best options across off-exchange and Covered CA options given his fluctuating income. He knows he'll have a deductible around \$6k and copays around \$75. He also knows that his annual checkup is fully covered, which is all he expects to need. He compares plans on many aspects, but pays special attention to whether his doctor is covered. He ends up getting a Bronze plan with Blue Shield of CA for \$175/month.

LIFESTYLE & MEDIA | Michael researches everything online before making a decision. He even researches things for his friends and family and leaves his opinion in blog comments for others to read. Michael reads travel magazines and considers himself knowledgeable about the world. Michael's budget may be tight right now, but he aspires to have the successful lifestyle he sees represented in media. He reads keeps up on financial news on his tablet. When Michael has a question about something, he first looks it up on his laptop. In general, he wants to learn about things by understanding his options rather than being told what to do.



CHARACTERISTICS RELATED TO HEALTH INSURANCE:

- Having health insurance is important – but for most, it’s likely about responsibility and minimizing risk (not health needs).
- Most don’t have health issues or take Rx, but 2 in 5 do.
- Many have a regular doctor and want them in network.
- Active, engaged shoppers that don’t have many questions or need much help enrolling.
- High subjective and objective health insurance literacy.
- Most likely to know status of penalty law in 2018, but as confused as others about 2019.

HOW THEY ENGAGE COVERED CALIFORNIA:

- Most likely to look into Covered CA without any prompting by official sources.
- Among those with higher incomes, they are likely comparing Covered CA plans with off-exchange options.
- When they need help, they reach out to agents or call the Service Center.
- Among those that enroll: more than half do so unassisted; if assisted, agents are the only service channel they use.

CONTENT IMPLICATIONS TO CONSIDER:

- Rational shoppers; want facts and numbers so they can weigh options.
- Likely to find appeal in provider search functions, total expense estimates, and calculators (or similar tools).
- Emphasize subsidy expansion to nudge those with higher incomes to reconsider even if they weren’t eligible before.
- Give them meaty content with lots of details.
- Attentive to health care advertising and likely responsive to messages in financial, news, and business environments.
- Content in English only is likely OK.

AGE RANGE: 30 to 54 years old

RACE/ETHNICITY: Diverse, similar to broader membership

LANGUAGE: Mostly speak English only

EDUCATION: Vast majority have at least some college

FPL RANGE: 200% to 500% of FPL

INCOME RANGE (single): \$25k to \$65k per year

INCOME RANGE (family of 3): \$42k to \$100k per year

Discussion

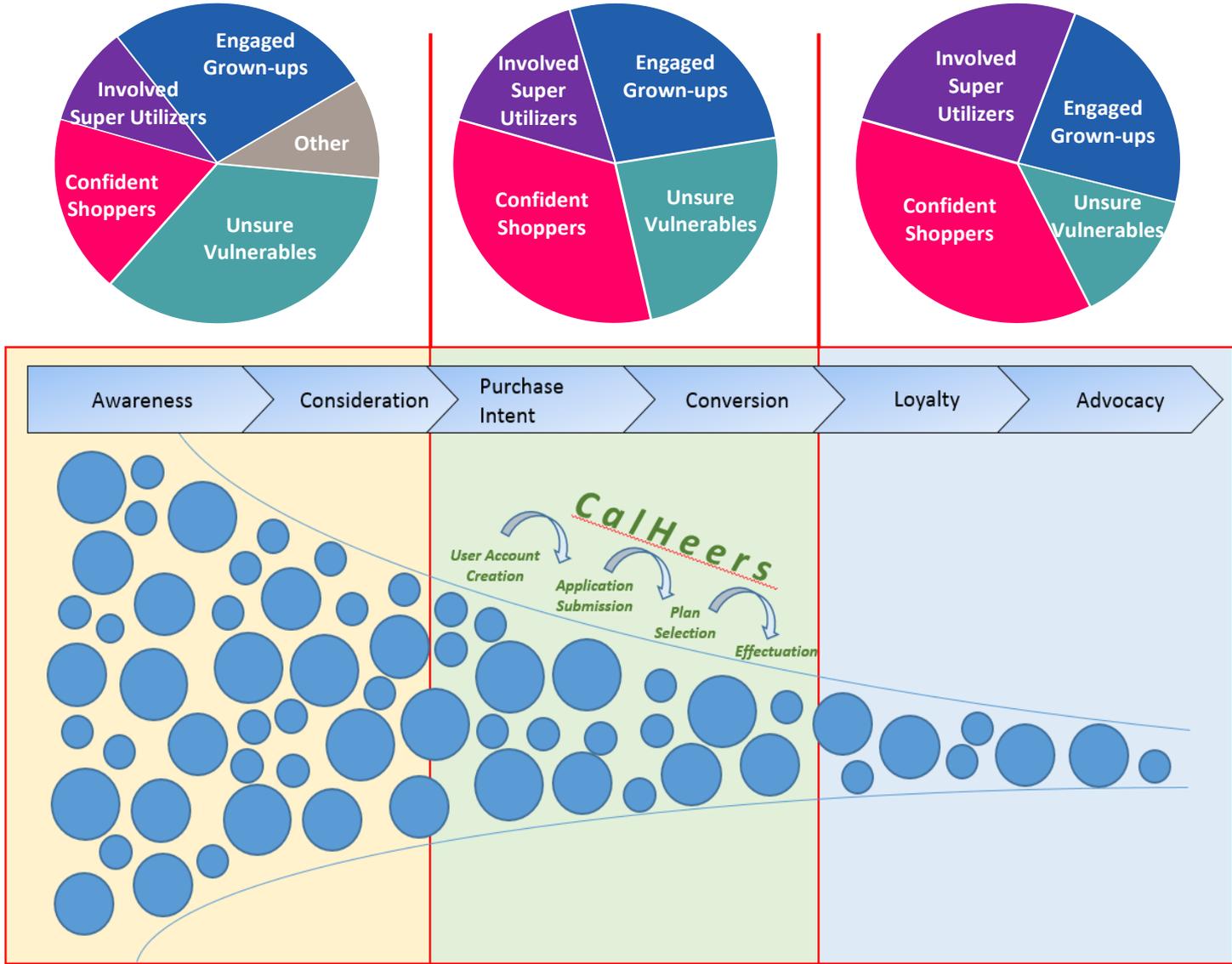
Thinking About Recent Policy Changes...

- Consumers in subsidy expansion population (400-600% of FPL) likely reflect a mix of Engaged Grown-ups (Danny), Confident Shoppers (Michael), and Involved Super Utilizers (Susan).
- Engaged Grown-ups (Danny) are probably the most important audience for messages about the state-based penalty, but people in other segments might also respond to this extra nudge to get insured (perhaps Super Utilizers less so – as they will likely get insurance anyhow).

Thinking About Broader Funnel...

- Consumers higher up in funnel likely reflect a mix with:
 - a) A higher incidence of Unsure Vulnerables (Rosa) and Engaged Grown-ups (Danny);
 - b) A lower incidence of Super Utilizers (Susan) and Confident Shoppers (Michael); and
 - c) Another segment of uninsured that are less interested in having health insurance.
- Consumers lower down in funnel likely reflect a mix with:
 - a) A higher incidence of Confident Shoppers (Michael) and Involved Super Utilizers (Susan); and
 - b) A lower incidence of Unsure Vulnerables (Rosa) and Engaged Grown-ups (Danny).
- See the next slide for a ballpark guess for how these personas might be distributed in three different parts of the funnel.

Informed Guess: Distribution of Segments in Broader Funnel*



* This is based on the existing market, focusing on those with incomes between 138% and 400% of FPL.

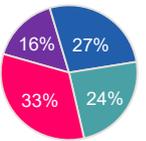
Appendix

MRI Definitions

These definitions were used as proxies to link the segments created from the Member Survey to GfK MRI's Survey of the American Consumer® to develop richer personas and identify media habits for content placement planning.

| Segment | Coding Definition |
|--------------------------|--|
| Universe (all segments) | Age 18-64 AND HHI \$20K+ AND (NOT Personally covered by medical/hospital/accident insurance OR How obtained Medical Insurance: State or national healthcare exchange or Other government source or Through an agent representing one company or Agent (broker) representing more than one company or Mail advertising or Phone contact (no agent) or Through the Internet) |
| Confident Shoppers | Influentials: I have a great deal of knowledge/experience in this topic; Healthcare or Insurance or My family/friends often ask for and trust my advice on this topic; Healthcare or Insurance OR Activities done using Tablet/E-reader last 30 days; Obtained medical information AND ANY AGREE Before I begin taking any drug, I look for as much information about it as possible |
| Unsure Vulnerables | Hispanic OR Type of Policy: Medicaid AND NOT Confident Shoppers |
| Involved Super Utilizers | 3+ DOCTOR VISITS in last 12 Months AND NOT Confident Shoppers AND NOT Unsure Vulnerables |
| Engaged Grown-ups | Remainder of Universe who is NOT in the other three segments |

Social Media Habits



| | Unsure Vulnerables | Involved Super Utilizers | Engaged Grown-ups | Confident Shoppers |
|---|--------------------|--------------------------|-------------------|--------------------|
| Social Media Platforms | | | | |
| Facebook | 68% | 71% | 69% | 72% |
| Instagram | 40% | 37% | 39% | 39% |
| LinkedIn | 7% | 10% | 13% | 12% |
| Pinterest | 19% | 28% | 19% | 22% |
| Twitter | 14% | 16% | 18% | 15% |
| YouTube | 63% | 55% | 60% | 60% |
| Blogs | | | | |
| Visited online blogs | 10% | 16% | 15% | 14% |
| Post a comment on blog/forum/BB | 9% | 15% | 11% | 15% |
| Activities Done Using Social Media | | | | |
| Posted a website link | 13% | 18% | 14% | 18% |
| Rated or reviewed a product or service | 10% | 14% | 10% | 13% |
| Clicked on an advertisement | 18% | 24% | 18% | 21% |
| Watch a video | 66% | 61% | 61% | 62% |
| Re-post or share a post created by others | 21% | 32% | 26% | 25% |

Survey Concepts & Measures Considered for Segmentation

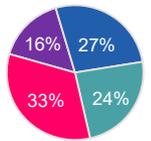
These are the concepts and types of measures we explored as potential defining dimensions when conducting iterative cluster analysis to identify segments.

| Concept Area | Types of Measures |
|--|--|
| Attitudes about Health Insurance | <ul style="list-style-type: none"> ▪ Personal importance of having insurance ▪ Various attitudinal barriers/motivations for having insurance |
| Awareness/Knowledge | <ul style="list-style-type: none"> ▪ Awareness of penalty law in 2018 and 2019 ▪ Awareness of subsidy eligibility status |
| Health Insurance Literacy | <ul style="list-style-type: none"> ▪ Self-reported health insurance literacy* ▪ “Healthy” insurance shopping behaviors* |
| Health Insurance Shopping Behaviors/Priorities | <ul style="list-style-type: none"> ▪ Aspects of plans consumers compared** ▪ Most important factors when choosing/considering plans ▪ Importance of finding a plan that covers personal doctor* |
| Assistance Needed during Open Enrollment | <ul style="list-style-type: none"> ▪ Whether needed help or additional information* ▪ Types of help or information needed** ▪ Sources of help |
| Current Sources of Care | <ul style="list-style-type: none"> ▪ Had personal doctor before looking for insurance* ▪ Has a usual source of care ▪ Type of place most often visited for care |
| Indicators of Health Needs | <ul style="list-style-type: none"> ▪ Self-reported health status ▪ Expected number of doctor visits this year* ▪ Whether taking Rx or has a health condition** |

* Associated measures are closely associated with defining dimensions

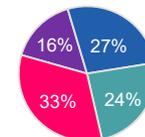
** Associated measures are defining dimensions for the segments

Aspects of Plans Compared



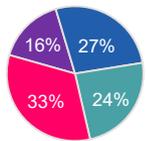
| | Unsure Vulnerables | Involved Super Utilizers | Engaged Grown-ups | Confident Shoppers |
|--|--------------------|--------------------------|-------------------|--------------------|
| Aspects of Plans Compared | | | | |
| Compared monthly premium amounts | 30% | 99% | 98% | 98% |
| Compared annual deductible amounts | 6% | 88% | 90% | 93% |
| Compared copay amounts | 7% | 96% | 93% | 91% |
| Compared quality ratings | 3% | 58% | 61% | 55% |
| Compared total expense estimates | 5% | 87% | 89% | 92% |
| Compared services in/out of deductible | 2% | 83% | 77% | 79% |
| Compared providers in network | 7% | 71% | 62% | 68% |
| Number of Aspects Compared (other than premium) | | | | |
| None | 70% | 0% | 0% | 0% |
| 1 to 2 aspects | 30% | 8% | 5% | 8% |
| 3 to 4 aspects | 0% | 22% | 32% | 31% |
| 5 to 6 aspects | 0% | 70% | 63% | 61% |

"Healthy" Insurance Shopping Behaviors



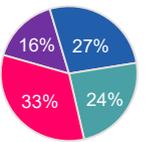
| | Unsure Vulnerables | Involved Super Utilizers | Engaged Grown-ups | Confident Shoppers |
|---|--------------------|--------------------------|-------------------|--------------------|
| "Healthy" shopping behaviors (objective indicators of health insurance literacy) | | | | |
| Understood what would have to pay for specialist visits under different plans | 36% | 75% | 70% | 80% |
| Understood what would have to pay for prescription drugs under different plans | 40% | 66% | 62% | 79% |
| Found out if would have to meet a deductible for health care services under different plans | 28% | 79% | 63% | 77% |
| Looked to see which doctors and hospitals would be covered in different plans | 28% | 72% | 52% | 69% |
| Number of "healthy" shopping behaviors reported | | | | |
| None | 44% | 8% | 11% | 5% |
| 1 to 3 behaviors | 42% | 46% | 56% | 48% |
| All 4 behaviors | 14% | 46% | 33% | 47% |

Types of Help/Info Needed During OE



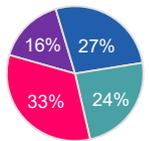
| | Unsure Vulnerables | Involved Super Utilizers | Engaged Grown-ups | Confident Shoppers |
|---|--------------------|--------------------------|-------------------|--------------------|
| Areas for which they needed help or additional information | | | | |
| Understanding: eligible for Medi-Cal | 42% | 37% | 54% | 8% |
| Understanding: eligible for CC | 56% | 76% | 83% | 16% |
| Understanding: how much would pay | 59% | 92% | 92% | 3% |
| Understanding: which providers covered | 53% | 76% | 65% | 15% |
| Understanding: deductibles or copays | 61% | 72% | 80% | 17% |
| Filling out application | 34% | 55% | 54% | 10% |
| Choosing plan | 56% | 66% | 74% | 22% |
| Understanding: how law affects me | 36% | 51% | 70% | 16% |
| Logging in / resetting password | 20% | 28% | 37% | 11% |
| Rollup: Areas needing help/info | | | | |
| Eligibility questions (CC, Medi-Cal) | 67% | 79% | 87% | 20% |
| Understanding / choosing plans | 74% | 91% | 94% | 32% |
| Understanding premium | 59% | 92% | 92% | 3% |
| Process-related | 40% | 62% | 65% | 17% |
| Implications of law | 36% | 51% | 70% | 16% |

Health Needs and Age



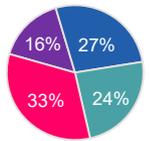
| | Unsure Vulnerables | Involved Super Utilizers | Engaged Grown-ups | Confident Shoppers |
|--|--------------------|--------------------------|-------------------|--------------------|
| Health Needs | | | | |
| Has current health condition lasting more than 1 year | 41% | 76% | 15% | 37% |
| Currently taking Rx (other than birth control) | 40% | 100% | 0% | 38% |
| Expects 5 or more doctor visits in 2019 | 21% | 41% | 8% | 13% |
| “Excellent” or “very good” self-reported health status | 44% | 43% | 67% | 70% |
| Age | | | | |
| 18-29 years old | 28% | 18% | 36% | 31% |
| 30-44 years old | 28% | 26% | 38% | 33% |
| 45-64 years old | 44% | 56% | 26% | 36% |
| Mean birth year | 1977 | 1972 | 1980 | 1978 |

Important Factors in Plan Choice/Consideration



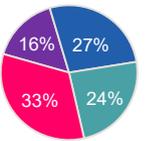
| | Unsure Vulnerables | Involved Super Utilizers | Engaged Grown-ups | Confident Shoppers |
|---|--------------------|--------------------------|-------------------|--------------------|
| Most important factors (other than premium) | | | | |
| Annual deductible | 12% | 9% | 16% | 18% |
| Copays for services | 12% | 27% | 35% | 20% |
| Copays for Rx | 11% | 14% | 8% | 8% |
| Choice of providers | 10% | 20% | 13% | 21% |
| Benefits covered | 21% | 14% | 17% | 17% |
| Keeping same plan as before | 10% | 5% | 2% | 8% |
| Having a plan w/specific company | 21% | 14% | 17% | 17% |
| Rollup: Most important factors (other than premium) | | | | |
| Out-of-pocket expenses (copays, deductible) | 35% | 50% | 59% | 46% |
| Coverage (providers, benefits) | 31% | 34% | 30% | 37% |
| Familiarity (company, same plan) | 23% | 11% | 8% | 14% |
| Importance of finding plan that covers their personal doctor | | | | |
| Very important | 33% | 48% | 27% | 41% |
| Not at all important or does not have one | 47% | 25% | 56% | 40% |

Additional Patterns: Points of Contact



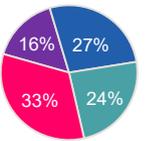
| | Unsure Vulnerables | Involved Super Utilizers | Engaged Grown-ups | Confident Shoppers |
|--|--|----------------------------------|---|---|
| How learned about eligibility | Less likely to look without official prompt | Likely to look / find out on own | Likely to look / find out on own | Likely to look / find out on own |
| Official sources of help (self-report) | Various | SCRs & agents | SCRs & agents | SCRs & agents |
| Unofficial sources of help | Much less likely to self-help through internet | Main ones talking to providers | Most likely to talk to friends & family | Various |
| Service channel of record (among new members only) | 85% assisted | 63% assisted | 65% assisted | 45% assisted (basically only by agents) |

Additional Patterns: Literacy, Awareness, & Education



| | Unsure Vulnerables | Involved Super Utilizers | Engaged Grown-ups | Confident Shoppers |
|--------------------------------------|--|--------------------------|-------------------|--|
| Awareness of penalty laws | Least likely to know | Average | Average | Nearly all knew about 2018; average for 2019 |
| APTC eligibility awareness | Least likely to know correct status | Average | Average | Average |
| Subjective health insurance literacy | Lowest | High | Mid/High | Highest |
| Education | Less educated (37% HS or less vs. 13%) | Average | Average | Average |

Additional Patterns: Other



| | Unsure Vulnerables | Involved Super Utilizers | Engaged Grown-ups | Confident Shoppers |
|---|---|--|-------------------|--------------------|
| Attitudes about health insurance | Average | Most enthusiastic | Average | Average |
| Race/ethnicity | Heavy concentration of Hispanics | Dominated by NH Whites | Mix | Mix |
| Language | High concentration of Spanish | Dominated by English-only | Mix | Mix |
| Employment | Less likely to be self-employed | More likely to be not working | Average | Average |
| Expected length of coverage (among new members) | More likely to see as a temporary need | Mix | Mix | Mix |
| Current health care | More likely to use clinic than others | Most likely to have personal doctor | Average | Average |
| Risk of becoming uninsured | Highest | Lowest | Average | Average |
| Medi-Cal recently | More than half | About a quarter | About a quarter | About a quarter |