

Connecticut Health Insurance Exchange Consumer Outreach Forum Insurer Group Discussion Summary

Date:

March 7, 2012

Location:

Saint Joseph College, 1678 Asylum Avenue, West Hartford

Background:

Mintz & Hoke has been charged with developing the consumer outreach program for the Connecticut Health Insurance Exchange. A series of consumer outreach forums represent the initial steps in a multiple-phased information gathering process aimed at better understanding people's needs, desires and expectations relative to the Exchange. Input from participants in these group discussions, moderated by Mintz & Hoke, will have a direct impact on the development of messages and the tools used to introduce the Exchange and inform state residents about the options available to them. Recruitment for this forum consisted of an email invitation sent March 1, 2012 and a second email invitation sent March 7, 2012. This document is intended as a summarized snapshot of the initial perspectives shared by the individuals who participated. **This document is not intended to represent final thoughts or positions.**

Moderators:

Bill Field Mintz & Hoke

Su Strawderman, Mintz & Hoke

Kathy Morelli, Mintz & Hoke

Invited to Attend:

Consumer outreach forums were open to the public. Direct invitations went out to the following:

Aetna

Anthem Blue Cross Blue Shield

Cigna

Community Health Network of Connecticut

ConnectiCare, Inc.

Connecticut Association of Health Plans

UnitedHealth Group

Wellcare

Meeting Attendees:

Gail Kahl, UnitedHealth Group

Jason Martiesian, UnitedHealthcare

Randy Wojnarowicz, Wellcare

Consumer Perceptions:

What is the current consumer mood and mindset about healthcare? What is the level of understanding and knowledge of ACA and Health Exchanges?

There is general uncertainty about exactly what the Exchange is or about health reform in general.

Even the previous general counsel of a major insurer group can't follow it. Total misconception. All they know is that it is going to cost them a boatload of money.

There is a lot of trepidation at every level. The idea that Exchanges will bring affordable healthcare to the masses. Everyone knows those are loaded with mandates, especially in Connecticut, affordability goes out the window. People are nervous about it.

Every morning I read the newspaper and I don't see anything. The information is not there. Although a typical Exchange member is not going to read the paper.

I'm not sure the Exchange knows yet what it's going to be.

Definitions.

Insurers want to play in the small group market, and if they do they need to also cater to the individual market. Here is the carrot and here is the stick.

Some people are never going to buy insurance. They are just never going to do it because they consider themselves immortal. The people in need of subsidies will be the first in line. They want insurance.

Most people have their broker research plans for them – they won't just go to the website and make a decision.

Outside of the initial changes from PPAC small employers and others really do not know what's going on. Outside of the first changes that we saw happen.

What is the level of conversation and buzz about the Connecticut Health Insurance Exchange? (PROBE: What are consumers' expectations and anticipations about what the Exchange will provide for them? What are they seeing as the benefit to them?)

There is no clear definition yet what the Exchange is going to be. We want to see bullet points – simple things. What does it mean from a cost perspective? Is it a positive or negative to the customer? Simplify the message but define it first.

What is the consumer vision for what Exchanges will be and provide in healthcare services? How are insurance companies working to shape that vision? How will it change the composition of your book of business?

Right now we're working toward seeing what the Exchange will be in CT. We want it be another marketplace for coverage. It is hard to go out to the small employer community.

We see it as another distribution channel, incorporating brokers, small employers, etc. A new line of business.

Opportunity in small business and individual market.

Incremental.

Depends on the model you set up. We may be forced to participate. The Massachusetts model is not an attractive choice for our distribution channel, so if we are not forced we may choose not to participate.

Many are thinking it is not going to have an impact on the small employer. The impact on the individual market is going to be enormous. We are going to see enrollment like we have never had. Commercial Oxford, United, don't offer individual plans so that will be a huge change for them.

How do you see the Connecticut Health Insurance Exchange taking shape from a consumer outreach/brand development standpoint? How will consumers react to messaging?

We are required to do a certain amount of advertising, but how we do it is up to us. We do it without logos or names.

No point in providing a brand name or logo if people don't know what the product "The Exchange" is.

If you want the Exchange to work, you need to have a choice of products that individuals and small employers can purchase.

The marketing pitch is at the end of the game, after the product design. How we sell it depends on what we wind up with. Hard to say at this point how we would sell it.

What are the biggest consumer barriers and obstacles that the Connecticut Health Insurance Exchange will face in their communications and marketing efforts?

Mass confusion. Poor grasp on English language. Medically needy because they have never had coverage before.

Mental capacity issues. Language will be a barrier. Lack of knowledge on how insurance works. Explaining something as complicated as a subsidy. Our focus is on dual eligibles. Explaining what people qualify for is very difficult.

Since so many existing plans don't meet the required minimum standard of benefits, your small business audience is facing increases in premiums across the board. That will be a huge marketing issue.

Adverse selection will be a problem as well.

Subsidies for individuals are pretty good. For small business it is not as good. Don't know what you're going to do to entice small employers as opposed to what they are buying now.

You must be sensitive to the fact that there are small employers out there who are happy with the coverage and the pricing that they currently have. They're only going to pay for that if they need it.

What have you learned from your business relationships with other Exchanges, most notably the Commonwealth Connector? How will this learning shape your relationships and business practices going forward?

One of the downsides of the Massachusetts model, they fought the distribution model which led to smaller penetration. If you want an Exchange, you have a competitive market in Connecticut. If you fight the distribution channel, you're going to struggle in the Connecticut market.

We are one of the carriers in CBIA and think they do a good job doing what they do.

CBIA is one of the few private sector exchange sort of options. Their products are unique to them. We file things for CBIA that we don't sell otherwise. They have the trust of the business community. When they say something it is respected.

There are a lot of lessons to be learned from Massachusetts. All states are different but it is a valuable view to see what works and what didn't. Cost and affordability will always be an issue. If you want a successful Exchange, you need to leverage the distribution channel. Massachusetts fought it and it was problematic for them.

Consumer Outreach Communications Dynamics:

What do you think are the greatest challenges the Connecticut Health Insurance Exchange faces in consumer outreach efforts?

Predominantly Spanish, Polish, Albanian, Portuguese. We have multilingual employees are stationed at these places because otherwise they won't talk to you. In the Spanish community for example, you need someone who has an established relationship with the community. Local barber shop for example.

The challenge you are going to have is ensuring the consumers are significantly play a role in understanding on the part of the consumer who's doing what role. The ambassador or navigator spends time with the person and then hands them off for the purchase? That is going to be confusing to the consumer.

Without having an established reputation or relationship in a community, you'll be told to take a walk when you try to go through the process of setting up a distribution channel there.

It is going to be a time consuming effort, and you'll be dependent on who happens to walk by. There needs to be awareness to get them engaged to begin with.

The benefit level is going to drive the premium. The Exchange may be too rich.

There will be stigma that comes out of all the negativity especially in an election year. Adverse selection. Need to combat the idea that this provides care for people who don't deserve it, don't take care of themselves.

The Basic Health Plan is another potential component. Most people looking at that won't even know whether they are eligible.

From an insurance company perspective, how should the Connecticut Health Insurance Exchange brand be communicated? What would be the ideal conduit to make a connection with the strength and equity of your individual insurance brands? How can those attributes be capitalized on?

Who is going to be the first line of interface? Who's going to be talking to them? Trust choices counselor, broker, the person who explains it in words people understand. Those on the front line need to know this stuff cold.

You need to have more options than just the web. Not necessarily brick and mortar. Someplace where you can go in with your mother and have someone explain elements to fit to you.

Hope that navigator would understand the program inside and out. Understand the underlying federal regulations and whether they change during the year and what you'd be responsible for if you lose a subsidy. The navigator must be neutral. Who does he report to, direct to? Some of the differences in detail will go down to the policy level. Navigator must have the patience of a saint. They plot the course they don't decide necessarily where it's going.

Some states don't want brokers. I think it's a little nuts that some states want to require that you do not have an industry background.

Massachusetts utilized hospitals where people without coverage. If you can get them right where they are at the exact time, you will probably see a lot of success with that.

Every doctor's office I walk into has their television in their waiting room. If they were willing to have that run in a loop you'd have a captive audience.

What should the positioning be for the Connecticut Health Insurance Exchange? How can it sync with the positioning of all the insurance companies that will have product/service offerings on the Exchange?

Rhode Island will look different from Connecticut, all states will be different.

See any consistencies across states? States are all at different points. I don't think there's any one plan.

Hope that Connecticut will provide a marketplace for individuals and small employers.

How would you develop and design a communications program to launch the Connecticut Health Insurance Exchange brand? What communications elements (TV, radio, newspaper, Internet) would be part of the overall communications and marketing mix?

The mall. Everybody goes to the mall.

Roving teams of exhibitors who go to where people are from all walks of life. Hold a Health Fair Day at Buckland Hills Mall, for instance.

There were very defined rules with Medicaid when we advertised. Flyers can only be located within a certain amount of yards from your location.

Grassroots, some advertising broadcast during enrollment periods, but mostly continuous direct mail.

All mediums – you're going to have such a diverse group of people to reach. In Massachusetts they used the Red Sox – recognizable people, did things at sporting events. Maybe you could have a couple recognizable people here pitching it.

Free phone app. Text campaigns. Everyone's got a cell phone now.

The phone number/website of the Exchange is the connection to it.

People are facing a requirement to get coverage, so the Exchange can be their vehicle. It's an awareness campaign.

Billboards and buses, we haven't seen much return on that.

Television would be your best avenue to measure return on investment.

Focus your dollars on awareness.

Billboards on major highways.

What elements would you replicate that have been successful in the promotion of your respective brands?

All our marketing is community based. We cater to lower income audiences. Stop and Shop, Price Chopper, FQHCs, community centers, senior centers.

What role do you see insurance companies playing in the consumer outreach communications and marketing of the Connecticut Health Insurance Exchange? How would your firm's individual communications and marketing programs align with those of the Connecticut Health Insurance Exchange?

Both New York and New Jersey have had guarantee issue products for the market with no special names, and they are doing just fine. They are run by boards. In terms of advertising, there's little or nothing. They have a website with great information, bullet points, etc.

How would you want your company/ brand represented on the Exchange?

In Connecticut you have more competitors. Five are pretty competitive in the small group space. There is competition somewhat in the individual space.

Focusing Consumer Outreach Messages:

What types of message appeals do you think will be the most effective in reaching the audience segments that the Connecticut Health Insurance Exchange is aimed at? What messages should we stay away from? How would you address the need for reaching different cultural and geographically diverse audiences?

The best message for me is built around awareness. Awareness of options. Not just the Exchange. Mention the individual mandate but it is not the main focus. Better health, better options, the Exchange.

There are many people who would love to buy insurance but it is not affordable.

Check us out, get a checkup, and see what you can afford. It doesn't cost you anything to look.

Ideally, assure them it is affordable, you'll have choice, and it'll be easy and we'll walk you through it.

How are you currently preparing for all the individual states' Exchange brand communications programs? Will you handle each individually? What will be the strategy that you'll employ as being a business partner with the Exchanges?

Exchange planning is my second job. 40 hours a week. We are putting a ton of time and money into this. Other states are getting down to the nuts and bolts of this thing already. There is a lot of think about.

The common thing for all states is panic. They know they don't have enough time. When you back out from Jan 2014, there's not much time. We're working on products now for 2014. State approval. Do you lie that on your existing provider network or do you create something separate? Do you take the Medicaid rates or do you recontract? Do your existing contracts support a new product on there? There's a lot of logistics. You need to get to a definition and position very quickly.

What tone and personality should the Connecticut Health Insurance Exchange exude in communications? How does the Connecticut Health Insurance Exchange need to connect with consumers on an emotional level?

We think you can do both choice and ease (consumer can make their own choices online and have a couple different options to choose from), although consumers can get overwhelmed with too much choice.

Assistance

Don't oversell, but you have to have something to show there's a benefit. Certain states in my opinion are overselling. Implying that the Exchange is going to fix all there is.

Ease of access

Subsidies

What reaction would you want consumers to come away with after being exposed to Connecticut Health Insurance Exchange consumer outreach messages?

"That made it easy."

Not sure about affordable, because unless you get a subsidy that doesn't seem realistic.

Resources would have to be there to make it "easy."

If you have a bad experience and you're an individual and you don't know anything about it, you need to make it easy.

Relief

Thank goodness! I can buy now.

What is the one single-minded message that needs to be articulated about the Connecticut Health Insurance Exchange? What would you want the halo to be for your business? How can you benefit from Connecticut Health Insurance Exchange consumer outreach? In your mind, what are the applicabilities and the connections?

For the first time people are going to have OPPORTUNITY. They've been closed out.

Outcomes/Metrics:

How would you define the success of a Connecticut Health Insurance Exchange consumer outreach program? What would it look like for you – from both a business and communications perspective?

We believe there should be a role for navigators, and we point to Massachusetts as an example of why you need that distribution channel.

What metrics are most beneficial to your firm? How do you envision the Connecticut Health Insurance Exchange benefiting your company and brand?

You need to have a call to action in your awareness campaign. You want to be able to see your return. Response rate. Are you getting the right people to call you from it?