

## Connecticut Health Insurance Exchange Consumer Outreach Interview Provider Interview Summary

### Dates:

February 24, 2012

### Background:

Mintz & Hoke has been charged with developing the consumer outreach program for the Connecticut Health Insurance Exchange. A series of consumer outreach forums and individual interviews 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 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 individual interviews was based on a model of community leaders who were unable to participate in prior forum discussions. 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.**

### Interviewer:

Chris Knopf, Mintz & Hoke

### Interview Participant:

Ann Aresco, ND, ProNatural Physicians Group LLC

### Consumer Perception:

**As a healthcare provider, what are your current mindsets about the health insurance industry? What is affecting these attitudes?**

From a provider point of view, insurance is difficult to deal with, even more difficult on a small business basis. One or two claims can have a big impact on small business.

Getting on the provider list for naturopaths is difficult. In the state of CT, it is required by law to have licensed physicians on the provider list so all insurance companies should have these naturopaths on their provider list.

About 80% of Dr. Aresco's patients have insurance.

Naturopaths don't get referred to by medical doctors for the most part, there is a gradual move, but most medical doctors view naturopaths as competition and not doctors. Medical doctors do not know enough about naturopaths.

Naturopaths actually save insurance companies a lot of money, but are commonly not recognized by the insurance. Naturopaths help people get healthy and stay healthy. They spend at least 30 minutes with each patient to make sure they know to change their lifestyle to stay healthy, big on education. Whereas medical doctors might only spend 10 minutes with patients and not educate.

**How do patients access healthcare when they do not have coverage? How does this differ from how clients who have coverage access healthcare? How does this affect your organization?**

Through Medicaid, the claim process is the same, but Medicaid is slower to get paid and it's a lower rate.

People are looking for how to control their own healthcare issues, not looking for a prescription and be done with an issue. They are eager to learn about how to stay healthy.

**What are your perceptions about the forthcoming changes in healthcare insurance? How do you think these changes will affect your organization? How do you think they will affect your patients?**

Just found out Charter Oak does not include naturopathic physicians.

Trying to get a group of naturopaths together to educate more people.

**What kinds of questions do you have about how these changes affect your organization?**

Should definitely include naturopaths in program so they can help people avoid health issues by educating people rather than just treating a symptom.

**What is your current level of awareness of healthcare exchanges? What impact do you see this having on your organization?**

Excited to have a health exchange that would let more people have insurance because people that need help the most who cannot pay cash will be picked up by the Exchange.

People going to the Exchange will be a lot of small business people that are willing to pay for insurance.

### **Establishing a Dynamic:**

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

Making people with regular insurance aware that they will not be affected by it and make those same people to understand that the Exchange is more economical. Currently, people who can't afford insurance and go to the hospital and rack up a huge bill, they end up not being able to pay and the hospital gets stuck with the cost. In the end, it is the people who have insurance that end up paying for the loss. Now with the Exchange, you are putting these people on low cost programs so they can pitch in.

**What role do you think healthcare providers should play in the communications about the Exchange? How does this differ from the role healthcare providers play in communications about health insurance today?**

When people come in, they think doctors tell them what their insurance is, but it is individual based on their company deductible/coverage. There is a wide variation between different plans. The insurance policies are so complex and each is so different from the next that providers can't tell patients much about health insurance without risking giving incorrect information. At my office we will give very general information and tell the patient to call their company.

**How would you want your organization to be represented by the communications about the Exchange?**

Naturopaths are physicians, are covered by insurance, practice more preventative base medicine. Naturopaths get to the cause of the problem instead of just taking care of a symptom. "If you listen to a patient long enough you will find out what the problem is."

**What type of positioning do you expect your patients to be most responsive to?**

People will avoid going to the doctor at all costs if they have to pay cash, if they had insurance, they could just do copay. So people without insurance are afraid to seek medical help a lot of times.

People will pay more monthly for health insurance just to feel secure. Health insurance has people frightened so that people think they can't go to the doctor/hospital because they will go broke.

Fear factor connecting with healthcare must be financially devastating so people stay away from doctors/hospitals.

Eliminate the fear factor.

**Focusing the Message:**

**What elements of the Exchange do you think cause the most confusion or apprehension for you as a healthcare provider? For your patients?**

Many individuals will be trying to get insurance, so it is going to be very piecemeal on what's going on in the Exchange. Advocating for a clear definition on what the coverage is about.

**What is the most important information the Exchange needs to make available to consumers?**

Prevention! Prevention would lead to staying healthier so not as much intervention is needed.

Insurance companies are recognizing this so they are putting all this testing in place (mammogram, pap smear, etc.), but tests aren't prevention. If you don't tell patients what to do to pass that test, you will still have a bill when that person ends up in the hospital.

Tell people in CT that they can now have health insurance without breaking the bank.

### **What tone or personality do you think the Exchange should use in their messaging?**

Access to health insurance that the average person can afford. It's not a giveaway.

Financial story needs to be predominant. Average family right now for 4 people costs \$1500 a month for health insurance.

This program is for everyone stuck in the middle that needs health insurance and can now get it at a reasonable rate so that they are participating in paying for coverage.

### **Vision/Approach for Outreach:**

**Who or what are your patients' trusted source(s) for information? What is the best way to leverage these sources to reach this audience? What role should ambassadors play in communicating the Exchange?**

For small businesses, they look to business organizations, the chambers.

**As we consider ways to publicize the Exchange, how do we reach small businesses beyond traditional media?**

People tend to hear about Dr. Aresco's practice through patient referrals and word of mouth. Not sure Exchange would help with word of mouth communications. Their main goal is getting people covered that need it and getting those people a list of providers.

**What do you need to enable you to help consumers better understand the Exchange (i.e. communications, tools, education materials, etc)?**

Postcards that they can pick up and take with them that say "insurance for the average Joe."

Posters might work, but if people don't have insurance coverage, they want something quick they can take. More of a flyer so they can do more research themselves. Can't get all the details off a poster.

**What can we do to help how the Exchange impacts your organization in a positive manner?  
Your patients?**

One thing, it would have a lot of money coming in to premiums to show that people really need this insurance and that it became affordable enough for people to buy it. There would be a revenue stream.

**Describe what you would consider to be a successful outreach effort. What are the key elements that must be a part of the introductory outreach efforts?**

Once the Exchange is up and running, the general public will see that this did not affect their insurance.