

What We Learned from the First Open Enrollment Period, and What to Expect from the Second

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It seems like just yesterday we were celebrating the victories from the first open enrollment period under the Affordable Care Act. More than 8 million consumers signed up for coverage through state and federal marketplaces, and millions more enrolled in Medicaid. As the spring of success gave way to the summer of planning, we are once again in the autumn of enrollment. As work gets rolling for the second open enrollment period, it is an opportune time to reflect on lessons learned from the first open enrollment period, especially since the second one is shorter and there are fewer navigator resources available from the federal government.

IT IS NOT JUST ONE (TOUCH) AND DONE

We learned that many consumers needed multiple contacts and in-person help to get through the enrollment process. According to Enroll America's *State of Enrollment* report, "With each contact from an Enroll America volunteer or staffer, consumers became more likely to successfully enroll." They found this effect was particularly strong among African-American and Latino consumers. Results from a survey conducted by PerryUndem found that while 52 percent of consumers enrolled online on their own, 20 percent got help on the phone and 18 percent got help in person. It is also important to note that Latinos were much more likely to rely on in-person help. Among Latinos who enrolled, 34 percent got in-person help (PerryUndem 2014a). Every foundation will approach this work differently, but given the importance of multiple contacts with consumers, foundations may want to think about how to incorporate information about enrollment into multiple areas of work, so that they are consistently reinforcing the message.

"NEVER PUT OFF UNTIL TOMORROW WHAT MAY BE DONE DAY AFTER TOMORROW JUST AS WELL." – MARK TWAIN

All of us procrastinate. It is a natural tendency. Last year, we saw huge upticks in enrollment numbers during the final few weeks of enrollment. While this is not shocking, it did take

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many groups in the field by surprise. Going forward, it is imperative that assister and navigator organizations anticipate and prepare for a surge in demand around the end of the open enrollment period. Groups should also do what they can to head off or minimize procrastination. For example, they might get the word out to the eligible but unenrolled that if they wait too long, they might face longer wait times.

IT IS THE MESSENGER AS MUCH AS THE MESSAGE

One of our key assumptions in making grants to support outreach, enrollment, and consumer assistance was that the best way to reach people is to partner with groups that are trusted and credible sources of information within their communities and that develop tailored, relevant, and engaging messages, materials, and approaches for the groups they are serving. Ensuring that consumers are hearing from trusted messengers means working together. Across the country, we saw how successful enrollment efforts focused on collaboration among navigators; assister organizations; local grassroots organizations; and national groups like Enroll America, Community Catalyst, National Association for the Advancement of Colored People, National Council of La Raza, Families USA, the Asian Pacific Islander American Health Forum, and Young Invincibles, to name just a few. Furthermore, faith-based organizations, libraries, community colleges, sports teams, and retail stores were key partners. In New Jersey, the New Jersey Health Initiatives program of the Robert Wood Johnson Foundation supported veterans who were trained as assisters. We can go on in listing myriad types of groups, both expected and unexpected, that had a hand in contributing to the great success of the first open enrollment period; ultimately, the lesson is to have a diverse set of groups on board so that consumers can hear from trusted messengers.

COORDINATE, DO NOT DUPLICATE

Another important lesson is the critical role of a statewide coalition where enrollment activities are within the state, as

well as with national groups. Through our Consumer Voices for Coverage initiative, the Robert Wood Johnson Foundation was able to support these coalitions in a dozen states, and many other funders also contributed to these statewide coordination efforts in these and other states. Having this coordination function in place ensured that enrollment materials, best practices, and data were being shared, and also worked to make sure that gaps were filled. It also provided an important feedback loop between on-the-ground groups and policymakers. Coordinating bodies were able to collect information on how enrollment was going in their respective states and detect patterns of problems and then provide this information to policymakers to help resolve issues that were identified. They were also in a position to see where things seemed to be going smoothly and share that information. Finally, they were able to play the connector role with national enrollment efforts, such as Enroll America. Community Catalyst's report *Connecting Consumers to Coverage: Mobilizing for Enrollment* (2014) provides examples of how these coordinating tables operated in various states. States need to figure out what model will work best for them, but the key is to have a coordinating table.

**“WHAT GETS MEASURED GETS MANAGED.”
– PETER DRUCKER**

An important element of success was using data to target enrollment efforts and track results. In this case, many groups found that the most effective messages focused on individual financial concerns. For example, Enroll America found that consumers were more likely to click on getcoveredamerica.org when they were presented digital tools like calculators that helped them get individualized information about coverage versus personal stories, and they found consumers who used these tools were more likely to be motivated to enroll than consumers who saw other messages. This was important information for tailoring their work and helped them devote resources to the most effective tools and messages. Similarly, early research that PerryUndem conducted for the Robert Wood Johnson Foundation showed that the most effective message was that financial help was available—a message that became very important for groups working on enrollment (PerryUndem 2014b). The availability of financial help was the central theme of the Robert Wood Johnson Foundation's digital advertising, which steered targeted consumers to their marketplaces at an unusually high rate for a digital campaign. Without the research and monitoring to find this out, many groups may have wasted time and energy on messages and materials that were not very effective.

EXPECT TOUGH CUSTOMERS IN 2015

As this next open enrollment period begins, conventional wisdom is that 2015 may be more challenging than 2014 in some key ways. Those who were highly motivated to get health insurance (i.e., the low-hanging fruit) probably got it out of the gate in the first open enrollment period. Further,

assisters this year will need to have an eye on enrollment, as well as on re-enrollment. New research from PerryUndem shows that many of the remaining uninsured may have looked for insurance during the last open enrollment period but found it was unaffordable (PerryUndem 2014c). Convincing the remaining uninsured of the benefits of insurance compared to the penalty and risk of being uninsured may prove difficult.

FINAL THOUGHT

The Affordable Care Act presents a tremendous opportunity for the nation to move toward a society where everyone has access to affordable, stable insurance. At the Robert Wood Johnson Foundation, this is a longstanding goal and a key feature of what it means to build a culture of health in the United States. Last year we saw tremendous success in increasing the number of people in this country with health care coverage. Armed with the lessons from last year, we know that the broad enrollment community, including grantmakers, is up for what may be a challenging second enrollment period. We look forward to continuing to share lessons and information as we go through this next period of work.

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