

Monitoring the Impact of Health Care Reforms on Americans 50–64: Awareness and Coverage Expectations

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An Urban Institute and AARP survey conducted in December 2013 found widespread awareness among Americans ages 50 to 64 about the new health insurance Marketplace that had been created by the Affordable Care Act (ACA). Those with the most to gain from the ACA—the uninsured and those with nongroup (individual) insurance—expressed the greatest interest in using the Marketplace to learn about new coverage options. Most of those already insured expected to keep their same source of coverage in 2014, whereas the uninsured had mixed expectations.

This paper is part of a series that looks at the experiences of 50- to 64-year-olds during the ACA’s first open enrollment period.

A key goal of the Affordable Care Act (ACA) is to reduce the number of uninsured Americans by expanding access to affordable health care coverage. This is particularly important for Americans who are ages 50 to 64, who do not have access to employment-based or Medicaid coverage, and who have preexisting conditions that prevented them from gaining coverage prior to the new law.

The ACA aims to make health insurance more accessible and affordable for this population and others through a variety of health insurance reforms, including guaranteed issue of insurance, limited age rating, Medicaid expansion, and subsidized coverage options. The ACA also created health insurance Marketplaces in each state to help consumers purchase insurance coverage and apply for subsidies.

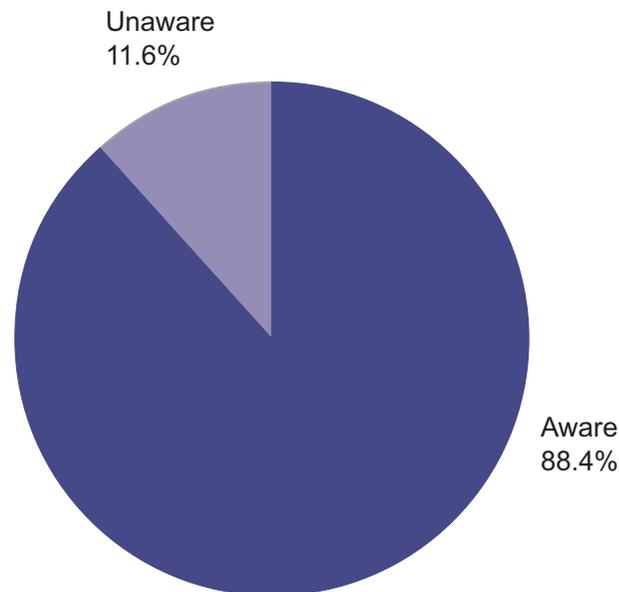
In December 2013, on the eve of ACA implementation, AARP and the Urban Institute surveyed Americans ages 50 to 64 about their awareness of the Marketplaces and their experiences during the initial phase of open enrollment. See the box at the end of this paper for more details.

Most Adults Ages 50 to 64 Were Aware of the Health Insurance Marketplaces

The survey showed that nearly 9 in 10 adults ages 50 to 64 were aware of the Marketplaces (figure 1). Awareness was lower among those who:

- Were uninsured or were on Medicaid, compared with those who had employer-sponsored coverage.

Figure 1
Nearly 9 in 10 Adults 50–64 Were Aware of the Marketplaces



Source: Authors' calculations using the HRMS-AARP Survey, December 2013.

- Had a low or middle income, compared with those who had higher incomes.
- Reported that cost was a barrier to care, compared with those not reporting cost barriers.

It is notable that the populations reporting lower awareness are also among those most likely to benefit from Medicaid expansion or from ACA Marketplace subsidies.

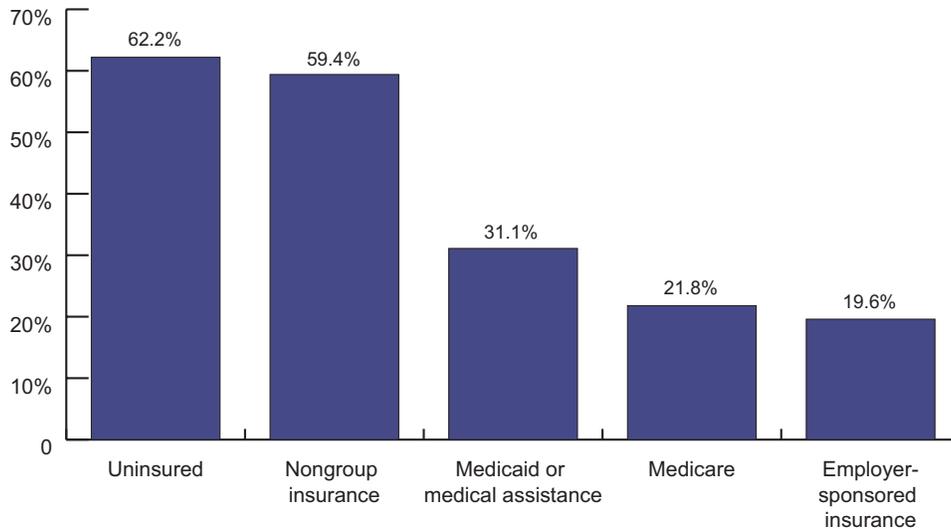
Interest in Using the Marketplaces Varied among 50- to 64-Year-Olds

High levels of Marketplace awareness among 50- to 64-year-olds did not necessarily translate into interest and use. The survey found wide variation in those reporting that they used or planned to use the Marketplace. Current insurance

status and income showed variation, as in the following:

- The uninsured and those insured in the nongroup market were much more likely to be interested in looking for information about insurance in the Marketplace than were those insured through employers (figure 2).
- Adults who had incomes below 400 percent of the federal poverty level and who could qualify for Medicaid or subsidies were more likely than were those with high incomes to have used or planned to use the Marketplace (appendix table 2).
- Adults who had reported having problems paying medical bills in the past year or unmet medical needs caused by costs were also more likely to express interest in using the

Figure 2
Interest in Using the Marketplace Varied by Insurance Status among Adults Ages 50–64



Source: Authors' calculations using the HRMS-AARP Survey, December 2013.

Marketplace than were those who had not experienced those problems (appendix table 2).

These findings indicate that adults ages 50 to 64 who could benefit most from accessing coverage through the Marketplace showed the greatest interest in using it.

Most Insured Expected Their Source of Coverage to Remain Unchanged in 2014

In general, the new health law is expected to affect only a small share of adults ages 50 to 64, because many in this age group already have health insurance coverage and would not qualify for subsidized coverage through the Marketplaces or Medicaid. The survey confirms that the vast majority of those who had health care coverage in 2013

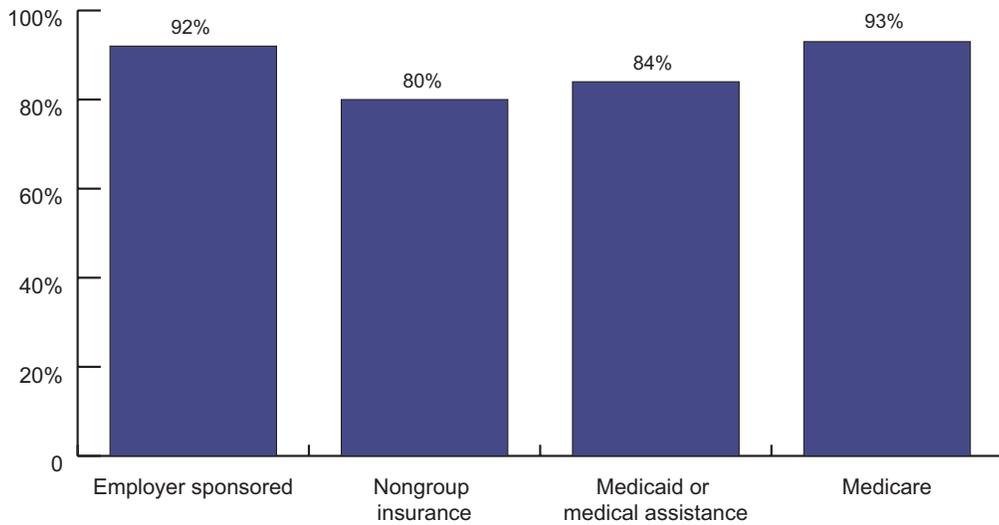
expected to continue to have coverage from the same source in 2014, although responses varied by type of coverage (figure 3).

Uninsured 50- to 64-Year-Olds Had Mixed Coverage Expectations

A majority (57 percent) of uninsured adults ages 50 to 64 reported that they thought they would have insurance in 2014 (figure 4). Of this group, most expected to be covered by Medicaid or through the nongroup insurance market (see appendix table 3). Smaller shares expected to obtain coverage through an employer, Medicare, or another source. Close to half did not expect to gain coverage.

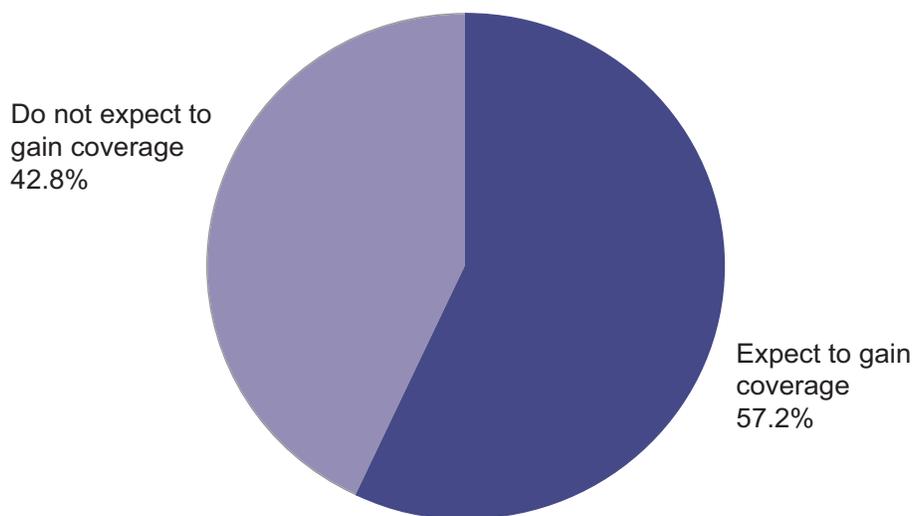
Low-income uninsured adults ages 50 to 64 living in states that chose to expand Medicaid were twice as likely

Figure 3
Most Insured Adults Ages 50–64 Expected to Continue to Have the Same Type of Health Coverage in 2013 and 2014



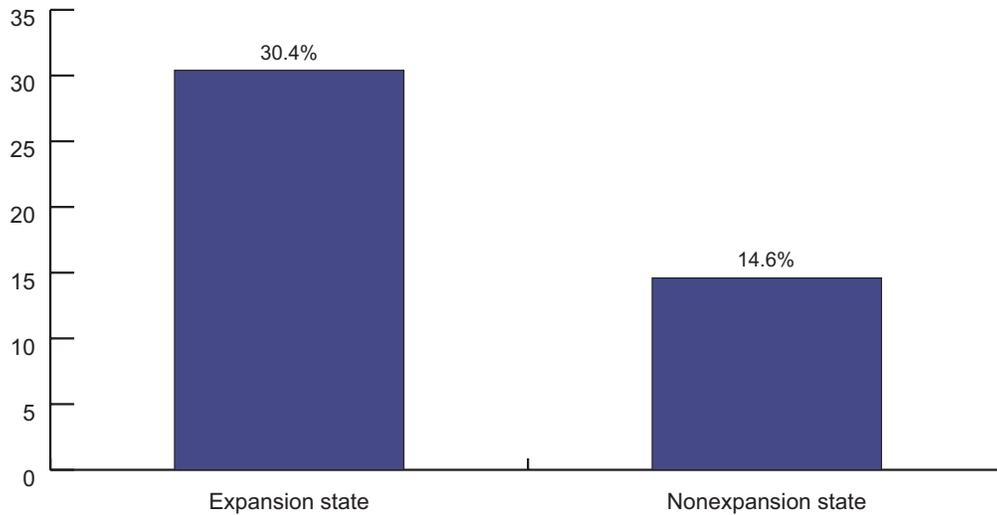
Source: Authors' calculations using the HRMS-AARP Survey, December 2013.

Figure 4
A Majority of Uninsured Adults Ages 50–64 Expected to Gain Coverage in 2014



Source: Authors' calculations using the HRMS-AARP Survey, December 2013.

Figure 5
Low-Income Uninsured Adults Living in Expansion States Were More Likely to Expect to Receive Medicaid in 2014



Source: Authors' calculations using the HRMS-AARP Survey, December 2013.

to say they expected to be covered by Medicaid in 2014 than were those living in non-Medicaid expansion states (30 percent and 15 percent, respectively; see figure 5).

Continued Education and Outreach Is Needed

Millions of adults ages 50 to 64 could benefit from using the Marketplace to find out if they qualify for coverage and subsidies to help reduce their health care costs. The survey showed widespread awareness of the new health insurance Marketplace among 50- to 64-year-olds who had nongroup coverage or were uninsured—the groups most likely to benefit from the 2014 health reforms.

This conclusion indicates that public education and outreach efforts during the 2013–14 open enrollment period were generally effective. However, some 50- to 64-year-olds who should be able to

benefit from the reforms were not aware of the Marketplace. This finding points to the importance of strengthening resources and support for education and outreach. For the reforms to reach the intended populations missed by earlier outreach and enrollment efforts, state and federal policy makers need to focus on the following:

- Identify, target, and reach groups that remain unaware of the new opportunities for coverage.
- Encourage those who are aware of the Marketplace and who may qualify for coverage or subsidies to explore their options through the Marketplace.
- Help people who enrolled in new health care coverage in 2014 to maintain coverage in 2015, update their information to determine eligibility

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for assistance, and review their plan choices during open enrollment.

- Extend coverage to low-income adults in states that have not yet expanded Medicaid.

Results from the March 2014 survey showed that the number of uninsured

people fell during the first few months of ACA enrollment. Nevertheless, the fact that a large share of uninsured older adults (42 percent) expected to remain uninsured in 2014 suggests that getting more uninsured people to sign up for health care coverage may require greater effort over the long term.

This work is based on the Health Reform Monitoring Survey’s oversample of individuals ages 50 to 64 (referred to as the HRMS-AARP) and was from December 2013 and March 2014. The Health Reform Monitoring Survey (HRMS) is a quarterly Internet survey of individuals ages 18 to 64 that is designed to produce rapid feedback on ACA implementation before the federal government’s survey data are available (Long et al. 2013). It was developed by the Urban Institute (hrms.urban.org); fielded by GfK (www.gfk.com); and jointly funded by the Robert Wood Johnson Foundation (www.rwjf.org), the Ford Foundation (www.fordfound.org), and the Urban Institute (www.urban.org). AARP funded the 50- to 64-year-old oversample, which is designed to produce nationally representative statistics of individuals ages 50 to 64. The December 2013 survey includes approximately 8,200 respondents, most of whom completed the survey in the first three weeks of December 2013. For more information on the HRMS survey instrument, go to <http://hrms.urban.org/survey-instrument/index.html>. See appendix table 1 for a summary of the HRMS-AARP sample for December 2013.

Reference

- Long, Sharon K., Genevieve M. Kenney, Stephen Zuckerman, Dana E. Goin, Douglas Wissoker, Fredric Blavin, Linda J. Blumberg, Lisa Clemans-Cope, John Holahan, and Katherine Hempstead. 2013. “The Health Reform Monitoring Survey: Addressing Data Gaps to Provide Timely Insights into the Affordable Care Act.” *Health Affairs* 3 (1), 161–67.

Appendix

Table 1
Summary of HRMS-AARP Sample, December 2013

	% of respondents with characteristic
Family income	
400% of the federal poverty level (FPL) or greater	48.0
139% to less than 400% FPL	33.7
At or below 138% FPL	18.3
Insurance status at the time of the survey	
Employer-sponsored insurance	66.3
Nongroup coverage	7.2
Medicaid or medical assistance	6.1
Medicare	7.2
Other	1.6
Uninsured	11.6
Unmet medical need or problems paying medical bills	
Any unmet medical need due to costs in past 12 months ^a	22.6
No unmet medical need	77.4
Missing data on unmet medical need	0.1
Problems paying or unable to pay medical bills in past 12 months	19.6
No problems paying medical bills	80.0
Missing data on problems paying medical bills	0.4
Health status	
Very good or excellent	47.5
Good	34.6
Fair or poor	17.6
Not reported	0.3
Age	
50–54	36.5
55–59	34.4
60–64	29.1
Gender	
Male	48.1
Female	51.9
Race or ethnicity	
White, non-Hispanic	72.2
Black or other race or ethnicity, non-Hispanic	17.3
Hispanic	10.5

Table 1 (continued)
Summary of HRMS-AARP Sample, December 2013

	% of respondents with characteristic
Education	
College graduate	31.4
High school graduate or some college	60.9
Less than high school	7.7
Marital status	
Married	63.4
Not married	36.6
Employment status	
Employed	53.5
Self-employed	8.5
Not working, retired	15.2
Not working, other	22.8
Region	
Northeast	19.2
Midwest	25.0
South	34.1
West	21.8
Urban	
In metropolitan area	82.6
Not in metropolitan area	17.4
Missing data on metropolitan area	0.1
Medicaid expansion state of residence	
Expansion state	51.4
Nonexpansion state	48.6
Exchange type	
Federal	66.1
State	33.9
Sample size (respondents)	8,208

Source: Authors' calculations using the HRMS-AARP, December 2013.

a. Unmet medical needs include any of the following categories: prescription drugs, medical care, general physician care, specialist care, medical tests or follow-up care, and mental health care.

Table 2
Awareness of ACA Marketplace among Adults 50–64, December 2013 (percent)

	Has heard about Marketplace and looked or planned to look for information on insurance in Marketplace	Has heard about Marketplace and did not plan to look for information on insurance in Marketplace	Has not heard about Marketplace
All adults, 50–64	28.4	60.0	11.6
At or below 138% FPL	33.8**	54.2**	11.9**
139% to less than 400% FPL	38.2**	41.8**	20.0**
400% FPL or greater (R)	20.9	71.0	8.1
Uninsured	62.2**	22.9**	14.9**
Nongroup	59.4**	29.6**	11.0
Medicaid or medical assistance	31.1**	41.7**	27.2**
Medicare	21.8	62.9**	15.3**
Employer-sponsored insurance (R)	19.6	71.4	9.0
Had problems paying medical bills	42.9**	44.0**	13.1
No problems paying medical bills (R)	24.8	64.0	11.2
Any unmet need caused by costs	46.3**	38.9**	14.9**
No unmet medical need caused by costs (R)	23.2	66.2	10.6

Source: Authors' calculations using HRMS-AARP, December 2013.

Note: Respondents that did not answer the survey questions relevant to the statistics above were excluded (total of 32), resulting in an overall sample of 8,176 respondents. Health insurance categories are mutually exclusive, and those who indicated they had insurance, but not a discernible type, are not reported (1.6 percent of the entire sample). Estimate is statistically different from the reference group marked with "R" using a two-tailed test. Significance level: * = 5 percent, ** = 1 percent.

Table 3
Expected Health Insurance Coverage in 2014 among Adults Ages 50–64,
December 2013 (percent)

		Employer-sponsored insurance	Nongroup	Medicaid or medical assistance	Medicare	Uninsured	Other
Family income	At or below 138% FPL	15.0**	5.5**	31.0**	23.6**	15.9**	6.6**
	139 to less than 400% FPL	58.5**	13.4**	5.1**	10.4**	6.8**	4.7**
	400% FPL or greater (R)	82.9	8.7	0.7	3.0	1.3	2.2
Health insurance status	Employer-sponsored insurance (R)	91.5	2.3	0.7	2.1	0.9	1.7
	Nongroup	7.0**	80.2**	2.1**	3.9**	1.2	4.2**
	Medicaid or medical assistance	0.8**	2.8	84.4**	4.9*	1.6	3.8
	Medicare	0.6**	0.7**	4.7**	93.0**	0.0**	0.5**
	Uninsured	5.8**	16.5**	14.2**	5.0**	42.8**	11.0**
Medicaid expansion state of residence, income up to 138% of FPL and uninsured	Expansion state (R) and income at or below 138% FPL and uninsured	3.5	8.4	30.4	5.7	39.6	8.1
	Non-expansion state and income at or below 138% FPL and uninsured	4.4	6.4	14.6**	3.5	50.1	14.8*

Source: Authors' calculations using the HRMS-AARP, December 2013.

Note: Expected health insurance categories are mutually exclusive, and those who reported "other" coverage at the time of the survey are not reported among the health insurance status groups above (1.6 percent of entire sample). Respondents who did not respond to the survey question on expected health insurance in 2014 are included in the statistics above yet not reported, and equal the residual for each row. Estimate is statistically different from the reference group marked with "R" using a two-tailed test. Significance level: * = 5 percent, ** = 1 percent.

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