

UNDERSTANDING DISENROLLMENT FROM DIRIGOCHOICE

Results of a Survey and Telephone Interviews with Former Members of
Maine's State-Sponsored Health Insurance Program

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EXECUTIVE SUMMARY

In 2005, using funds from Maine's State Planning Grant, the Dirigo Health Agency contracted with the Muskie School of Public Service to study a relatively small group of Maine adults who either disenrolled from the DirigoChoice Program or elected not to participate after receiving an initial rate quote. The purpose of this work was (1) to better understand the reasons why people leave DirigoChoice and (2) to identify the specific barriers Maine employers encounter when they attempt to purchase and retain health insurance. A secondary goal was to gather consumer feedback to help inform future modifications to the program.

Two methodologies were used for this research.

A telephone survey of adult disenrollees

Key informant interviews with employers who disenrolled or withdrew their applications

Several major findings about the DirigoChoice program emerged from these two data collection efforts:

Overall, disenrollment from DirigoChoice was low in the first year of program operation. In 2005, out of 4,022 new subscribers, only 716 (18 percent) ended or did not renew their coverage through DirigoChoice – a rate that compares favorably with other programs of individual and small group coverage.

A substantial proportion of study respondents reported that they left DirigoChoice not by choice, but due to a change in life circumstances. Most of these former members reported having a positive experience when they were enrolled in the program.

About a third of the interviewed employers said that their primary reason for dropping DirigoChoice was a change in life circumstance. These informants differed from other groups of disenrollees in that they tended to express satisfaction with the plan and reflect positively on what the program had to offer – mentioning specifically that they thought the program can be a “good deal” for employees. Some employers even contemplated returning to the program if their situation changed.

In the survey, more than four in ten DirigoChoice members who disenrolled did not do so voluntarily, and withdrew because they left their job (24 percent), because their employer dropped DirigoChoice (16 percent) or because they were dropped by Dirigo (4 percent). When asked, all but 16% (n=13) indicated they would have preferred to remain enrolled in Dirigo if circumstances had allowed it.

These “involuntary” disenrollees reinforce the perception that maintaining health insurance coverage is difficult for segments of the small group market because of economic vulnerabilities.

Among voluntary disenrollees, by far the most common reason given for disenrollment from DirigoChoice was high cost.

In the employer interviews, high cost was the number one complaint cited by both disenrollees and employers who withdrew their applications. Informants expected greater cost savings than

they actually experienced or were quoted, and the majority of employers who mentioned cost as a problem were discouraged that Dirigo's discounts did not extend to small business employers.

In the disenrollee survey, subscribers who left DirigoChoice voluntarily cited cost issues (premiums too expensive, deductible too high) most frequently as being important in their decision to leave the program. This was true across almost all contract types and discount groups.

To a lesser extent, misinformation and lack of covered benefits were important reasons for disenrollment. Because most respondents were early adopters of DirigoChoice, concerns expressed about misinformation may reflect issues related to start-up of the program.

Some employers reported that they had difficulty in accessing information about DirigoChoice or received inaccurate or inconsistent information. Common problems were: (1) required rates of employee participation, (2) eligibility requirements for discounts and (3) services covered as part of the program's benefit package.

About one fourth of disenrolled small group owners and sole proprietors in the survey cited "administrative hassles" as being important in their decision to leave Dirigo, specifically mentioning difficulties with the reimbursement process, the amount of paperwork, the enrollment process, and confusion about coverage.

A few employers felt that DirigoChoice's benefits were not comprehensive enough or were disappointed that DirigoChoice did cover a specific service that they had covered under a previous plan. This concern was more prevalent among non-subsidized participants.

The majority of subscribers who disenrolled from DirigoChoice obtained other health coverage after leaving.

Almost three quarters of disenrollees in our sample did have other health coverage after leaving, including 58 percent with private coverage and 14 percent with public coverage. Only 28 percent were uninsured.

In addition to directly reducing the number of uninsured in Maine by providing affordable coverage to previously uninsured enrollees, our findings suggest that DirigoChoice is serving to connect some uninsured individuals to the private market, and bridging a potential gap in coverage for some small employers.

Among disenrollees who were uninsured prior to enrollment in DirigoChoice, almost half (47 percent) obtained private coverage after they left. For these previously uninsured subscribers, DirigoChoice appears to have served as a bridge into the private insurance market.

Similarly, for many employers who were interviewed, DirigoChoice served as a 'bridge' between two insurance products. Fifteen of nineteen employers who had insurance immediately prior to DirigoChoice either (a) switched to insurance through a spouse or public program and/or (b) found another insurance product which they considered to be of better value.

In 2005, young adults and those without dependents were the most likely to disenroll from DirigoChoice. The disproportionate loss of young enrollees might have negative financial implications for the program.

Analysis of all 2005 contracts indicated that 35 percent of subscribers between the ages of 18 and 24 terminated their contracts in 2005, versus only 22 percent among those age 25 – 44, and 13 percent among those age 45 or older.

A continued process of selective attrition in which young, healthy individuals leave the program in disproportionate numbers could raise average subscriber costs making the program less attractive to employers, and increasing public costs.

While a higher proportion of small group contract holders disenrolled in 2005 relative to individuals and sole proprietors, this difference can be attributed to the fact that enrollment did not open to individuals and sole proprietors until the second quarter.

21% of small groups terminated contracts in 2005, versus 17% of sole proprietors and 14% of individuals.

A multivariate analysis of all 2005 contracts showed that small group enrollees were no more likely to disenroll than sole proprietors or individuals, once their disproportionate enrollment in the first quarter was taken into account.

INTRODUCTION

In June 2002, Maine state government enacted the Dirigo Health Reform Act. This Act encompassed a broad range of health reform activities and authorized expansions of Maine's Medicaid HIFA waiver program and the creation of the DirigoChoice health plan. Now in its second year, DirigoChoice is a state-sponsored, voluntary program designed to offer affordable health insurance coverage to small businesses, self-employed persons and individuals. Employees and individuals who meet income guidelines receive financial discounts on program costs. Although targeted to businesses and persons without health insurance, persons and small businesses with prior insurance coverage may enroll. Enrollment in the program began on January 1, 2005 for small businesses and sole proprietors. Phase two enrollment of individuals, including parents of MaineCare children, began April 1, 2005.

In 2005, using funds from Maine's State Planning Grant, the Dirigo Health Agency contracted with the Muskie School of Public Service to study a relatively small group of Maine adults who either disenrolled from DirigoChoice or elected not to participate in the program after receiving an initial rate quote. The purpose of this work was (1) to better understand the reasons why people leave DirigoChoice and (2) to identify the specific barriers Maine employers encounter when they attempt to purchase and retain health insurance. A secondary goal was to gather consumer feedback to help inform future modifications to the program.

Two methodologies were used for this research.

A telephone survey of adult disenrollees: Between February and May 2006, trained interviewers at the Muskie School surveyed Maine adult who disenrolled from DirigoChoice. Surveyors asked respondents about their reasons for leaving the program, their insurance status before and after enrollment, and the perceived strengths and weakness of DirigoChoice.

Key informant interviews with employers who disenrolled or withdrew their applications: In March and April of 2006, Muskie School staff conducted a series of semi-structured telephone interviews with employers who either disenrolled from DirigoChoice or elected not to participate in the program. Employers who withdrew their application were asked to comment on their experiences during the application process, as well as their reasons for not purchasing the health plan. Disenrolled employers were asked to share their initial motivations for enrolling in DirigoChoice, along with their reasons for leaving the program.

The following report documents the findings from each of these efforts. Principal findings from the disenrollee surveys are presented in Part I and are followed by a discussion of feedback from the key informant interviews in Part II. A final section highlights the overarching themes from both the disenrollee survey and employers interviews.

PART I: DIRIGOCHOICE DISENROLLEE SURVEY RESULTS

I. PURPOSE

This chapter reports selective findings from the survey of adults who enrolled in DirigoChoice between January 1, 2005 and January 16, 2006, and who disenrolled from the program before January 16, 2006. The purpose of this study is to examine who the program disenrollees are, determine whether they differ from continuous enrollees, and to ascertain their stated reasons for disenrollment.

It is important to underscore the fact that these findings reflect only the responses of individuals who left the DirigoChoice program – a small group compared to those who remained enrolled and a group whose views of the program are likely to be less favorable than subscribers who remain on DirigoChoice. In addition, many of the areas of concern identified by disenrollees reflect start-up issues. Of the 716 subscribers who terminated contracts with DirigoChoice in 2005, half of them were first quarter enrollees who disenrolled, on average, within 5 months of enrolling, and 91% were enrollees from the first two quarters of 2005 (see Appendix A-1).¹

Although the first year disenrollment from DirigoChoice may represent a “shake out” period for the new program, it is still important to understand why people leave DirigoChoice. Selective attrition can affect the financial sustainability of the program. An analysis comparing characteristics of all DirigoChoice enrollees in 2005 to those who disenrolled by December 31, 2005 shows that disenrollees are more likely to be under 34 years of age and to have contracts that include no dependents (Appendix A-1). The disproportionate loss of young people carries negative financial implications for DirigoChoice. Younger enrollees generally tend to be healthier and use fewer health care resources, and are therefore less expensive to cover on a per member per month basis. A continued process of selective attrition in which young, healthy individuals leave the program in disproportionate numbers could raise program costs making the program less attractive to employers and compelling DirigoChoice administrators to either spend more on subsidies or implement cost-cutting measures such as limiting covered benefits.

Information from early disenrollees can be used to inform the process of modifying the DirigoChoice Program to enhance future growth. The barriers to continued enrollment experienced by this cohort may be similar to barriers experienced within the pool of potential program applicants who have not yet elected to participate. By providing insights into the concerns of disenrollees, this study hopes to inform DirigoChoice program administrators and Maine policymakers so that identified issues can be addressed, keeping DirigoChoice a viable, positive force in Maine’s insurance marketplace.

¹ The overall disenrollment rate for DirigoChoice compares well with other programs enrolling both small groups and individuals. The Healthy NY program which targets the same population had a turnover of greater than 50 percent of its enrollment in 2005, although it had a net increase of 40 percent.

II. METHODOLOGY

Target Population

The target population for the disenrollee survey included all DirigoChoice contract holders who were enrolled at any time between January 1 and December 31, 2005, and who had terminated their contract as of January 15, 2006 – the date the survey list was generated. There were a total of 746 former DirigoChoice contract holders in the target population, representing 1,241 covered persons and their dependents.

Survey Administration

Trained interviewers from the Muskie School Survey Research Center attempted to contact all members of the target population between February and May of 2006 using a Computer Assisted Telephone Interviewing (CATI) instrument. Of the original 746 contract holders in the target population, 61 were deemed ineligible for the disenrollee survey because when contacted they said they had never enrolled in DirigoChoice (n=21), were still enrolled (n=39), or were not sure if they had ever enrolled (n=1). The final eligible sample included 685 terminated subscribers. Interviewers completed a total of 343 interviews with eligible sample members, for a response rate of 50% (Table 1).

Table 1. DirigoChoice Disenrollee Survey Response Rate

<u>Target Population</u>	
All DirigoChoice contract holders enrolled between January 1 and December 31, 2005 and disenrolled as of January 15, 2006	746
<u>Members of the Target Population Deemed Ineligible</u>	- 61
- Never enrolled in DirigoChoice (n=21)	
- Still enrolled in DirigoChoice (n=39)	
- Not sure if they were ever enrolled (n=1)	
<u>Total Eligible for Disenrollee Survey</u>	685
<u>Completed Interviews</u>	343
<u>Response Rate</u> = Completed Interviews / Total Eligible =	50.1%

There were a total of 342 individuals in the target population who were non-respondents. Table 2 outlines the reasons for non-response. The most common reason was that the person could not be located – because the phone number was disconnected, the person could not be reached after 15 attempted calls, or the provided contact information was a wrong number.² Only one in five non-respondents—75 people--refused to participate after an interviewer reached them.

² These figures are typical among surveys of low-income populations, in which people tend to be more mobile and difficult to locate.

Table 2. Types of Non-Respondents (N=342)

Types of Non-Respondents	Freq	%
Number not in service	86	25.1
All 15 calls made	77	22.5
Wrong phone number	75	21.9
Refused	75	21.9
Deceased/Moved out of state*	16	4.7
Still in process when calling stopped	9	2.6
No listing/No phone	4	1.2
Total	342	100.0

*These 16 individuals are technically ineligible for the disenrollee survey because they are no longer members of the target population. They are included here and in the non-response analysis only because they were not identified as ineligible before the analysis was completed.

To determine if the final sample of 343 completed interviews is representative of the target population, respondents and non-respondents were compared by selected demographic and programmatic characteristics (Table 3, next page).

As shown in Table 3, there were several statistically significant differences between respondents and non-respondents across certain characteristics. Sole proprietors were more likely to respond than contract holders in small groups. Disenrollees over age 35 were more likely to respond than disenrollees between 18 and 34 years of age. Contract holders with dependents were much more likely to respond than those without dependents. Those with contracts that terminated in the second quarter of 2005 (April through June) were less likely to respond than subscribers who terminated in any other quarter in 2005 or the first quarter of 2006. And people who were enrolled for 10 or more months were more likely to respond than those who were enrolled for a shorter period of time. While these differences may introduce nonresponse bias into the results that follow, the fact that the overall distribution of characteristics among respondents (column C) is quite similar to that of the target population (column B) provides evidence that any such bias is likely to be small.

The survey instrument (included as Appendix B) was designed to capture the wide range of reasons why a person may have left the DirigoChoice program. Reasons for disenrollment may vary according to whether or not the respondent left DirigoChoice voluntarily or not, whether they own and/or make health care insurance decisions at the business where they work, and by the type of coverage they had (Small Group, Sole Proprietor, or Individual plans). Screening questions and skip patterns were used in the survey to identify voluntary and involuntary disenrollees, and to ask follow-up questions appropriate to the respondents' circumstances.

Table 3. Response Rate by Characteristic and Characteristics of All Eligible Contract Holders, Respondents, and Non-Respondents

	Response Rate ¹ Within Category	% of All Eligible Disenrollees (N=685)	Percent of Respondents (N=343)	Percent of Non-Respondents (N=342)
	[A]	[B]	[C]	[D]
Contract Type**				<u>%</u>
Individual	53%	24%	26%	23%
Small Group	44%	57%	51%	64%
Sole Proprietor	63%	19%	24%	14%
Member Gender				
Female	53%	47%	50%	45%
Male	48%	53%	50%	55%
Age at Enrollment**				
18 - 24	36%	14%	10%	18%
25 - 34	40%	20%	16%	24%
35 - 44	58%	24%	28%	20%
> 45	54%	41%	45%	38%
Discount Group				
A (< 100% FPL)	33%	2%	1%	2%
B (100 - 149% FPL)	52%	33%	34%	32%
C (150 - 199% FPL)	51%	18%	19%	18%
D (200 - 249% FPL)	52%	12%	13%	12%
E (250 - 299% FPL)	37%	9%	7%	11%
F (> 300% FPL)	52%	25%	27%	24%
Termination Date**				
Q1 2005	63%	4%	5%	3%
Q2 2005	39%	22%	17%	27%
Q3 2005	55%	35%	38%	32%
Q4 2005	51%	33%	33%	32%
After January 1, 2006	51%	6%	6%	6%
Months Enrolled**				
0 - 3	45%	41%	37%	45%
4 - 6	55%	27%	30%	24%
7 - 9	46%	19%	18%	21%
10 - 12	61%	12%	15%	9%
Number of Dependents**				
0 (Contract holder only)	43%	72%	62%	81%
1	73%	11%	15%	6%
2	55%	7%	8%	6%
3	62%	7%	9%	6%
4+	80%	4%	6%	2%

¹ Response rate = Number of respondents / Number of eligible individuals

** Response rate is not independent of this characteristic at p < .05

File Construction and Analysis

Survey responses were analyzed by the health research staff at the Muskie School. Administrative information on subscriber age, gender, county of residence, contract type, and effective and termination dates were provided by the Dirigo Health Agency and linked with survey responses so that these variables could be included in the analysis. In addition, the disenrollee survey included a set of questions about prior coverage at the time of enrollment in DirigoChoice; these questions were asked of 191 respondents who had provided this information in a previous survey of DirigoChoice enrollees, conducted in 2005.^{3,4} Instead, their answers to the prior coverage questions from the enrollee surveys were linked in with their disenrollee survey responses using a subscriber identification number.

The following section of the report details the findings of the analysis. It begins with the results from a comparison of the characteristics of all enrollees in the DirigoChoice program to those who disenrolled. Subsequent findings focus on the analysis of the combined survey response and administrative data file. These findings reflect respondents' self-reported information and represent primarily descriptive data. To check for statistically significant differences in responses across multiple groups we use chi-square tests of independence; these differences are noted when applicable.

III. FINDINGS

How Disenrollees Differ from All Enrollees in the DirigoChoice Program

As discussed briefly in the introduction to Part I, some DirigoChoice members were more heavily represented among disenrollees than others. Appendix A-1 shows the distributions of disenrollees by category, compared to all DirigoChoice subscribers. This table shows that small group enrollees, those with no dependents, young adults, those in discount group C, and those enrolled in the first two quarters of the plan's first fiscal year were over-represented among disenrollees.

However, the significance these variations may be distorted by the fact that enrollment did not open to individuals until the second quarter. Statistically this means that they had fewer opportunities to make the decision to disenroll when compared to small group enrollees. In addition, because enrollee characteristics such as discount group, type of contract and age overlap, it is difficult to determine which characteristics are the most important "drivers" or predictors of disenrollment.

To determine the relative importance of different enrollee characteristics in increasing the likelihood of disenrollment, we conducted a multivariate analysis of the administrative data provided by the Dirigo Health Agency. The multivariate model also controlled for the differences in length of enrollment. Using this analysis, we determined that small group enrollees were no more likely to disenroll than sole proprietors or individuals, once their disproportionate enrollment in the first quarter was taken into account.

Table 4 below, shows the relative contribution of different enrollee characteristics to the likelihood that an enrollee would disenroll. This table shows that age is the strongest predictor of disenrollment. An enrollee between the ages of 18 and 24 was more than three times as likely to disenroll as an enrollee of 45 or

³ Bowe, T. (2005, August). DirigoChoice member survey: A snapshot of the program's early adopters. Portland, ME: University of Southern Maine, Edmund S. Muskie School of Public Service, Institute for Health Policy.

⁴ Bowe, T. and Thayer, D. (Forthcoming). DirigoChoice member survey: A snapshot of the program's early adopters: April 1, 2005 – August 31, 2005. Portland, ME: University of Southern Maine, Edmund S. Muskie School of Public Service, Institute for Health Policy.

older, when all other characteristics are taken into account. Enrollees in discount group C were 42 percent more likely to disenroll than those in group B, holding other characteristics constant. Although the other groups also appeared somewhat more likely to disenroll than group B enrollees, these differences were not statistically significant. Enrollees without dependents were more than twice as likely to disenroll as enrollees with dependents. Finally, Androscoggin, Somerset and Kennebec counties had disproportionately high disenrollment compared to other geographic areas of the state, holding all else constant. (Full model shown in Appendix A-2.)

Table 4. Odds of Disenrolling from DirigoChoice by Enrollee Characteristic Among Subscribers with Effective Date in 2nd Quarter, 2005 (N=2,001)

<u>Enrollee Characteristic</u>	<u>Odds of Disenrolling</u>	<u>Enrollment Comparison Group</u>
Small Group Sole Proprietor	No Difference	Individual Enrollee
Female	No Difference	Male
Age		
18 – 24	3.2 greater chance of disenroll.	45 or older
25 – 34	1.9 greater chance of disenroll.	
35 – 44	1.9 greater chance of disenroll.	
Discount Group		
C	1.4 greater chance of disenroll.	Group B
D through F	No difference	
No Dependents	1.6 greater chance of disenroll	Subscriber with dependents
County of Residence		
Androscoggin	2.1 greater chance of disenroll.	All other counties in Maine
Cumberland	No difference	
Kennebec	1.7 greater chance of disenroll.	
Somerset	2.8 greater chance of disenroll.	

Note: Odds values are based on Cox regression results shown in Appendix A-2

The greater likelihood of disenrollment among young and single adults reflects general trends in the insurance market. These individuals are less likely to need health care services and therefore may place a lower value on coverage than older individuals or persons with dependents. As noted in the introduction, strategies to encourage sustained enrollment from young healthy individuals is important maintaining the affordability of the DirigoChoice product (as it is for other small group and individual market insurance products.)

The greater likelihood of disenrollment among enrollees in the C group suggests a possible need to review the current discount scale in the program. If the discount is structured so that individuals and families in the Group C category are asked to spend proportionately a much greater share of their household income toward program costs than persons in Group B, the cost sharing could be posing a significant barrier to initial and continuous enrollment for individuals and families in this income category. A reallocation of some subsidy dollars from Group B (or the higher income groups, D and E) might “smooth” the reduction in subsidy as income rises, in a manner that balances and sustains enrollment across more income groups.

Characteristics of Respondents

The characteristics of the 343 disenrollee survey respondents are included above in Table 3, column C (page 11). One quarter of the respondents had enrolled in DirigoChoice under an individual plan, another quarter were sole proprietors, and half were small groups. There was an even split between females and males. 45 percent of respondents were age 45 or older at enrollment, and three fourths were over age 35.

The two most prevalent discount groups were groups B (34 percent) and F (27 percent), representing respondents with household income that was between 100 and 150 percent of the Federal Poverty Level, and household income above 300 percent of the FPL respectively. Group B is the lowest income and most deeply discounted group within the DirigoChoice program (except for persons eligible for MaineCare) and represents over 40% of DirigoChoice enrollment overall. Group F contains all enrollees whose income is above the threshold for discounts and who thus pay full premium costs for participation in the program. In general, respondents in the disenrollee survey represent a low-income group, with over half having household incomes between 100 and 200 percent of the FPL.

Forty-one percent of disenrollees remained in the program for three months or less. The majority (67 percent) of respondents had less than six months of enrollment experience in DirigoChoice. Seventy-two percent disenrollee respondents had no dependents. This compares to 66% among all DirigoChoice subscribers, indicating a higher rate of disenrollment among single contract holders compared to those with dependents.

Types of Disenrollees: Voluntary, Involuntary, and Coverage Type

In looking at reasons for disenrollment, we first divided respondents into voluntary disenrollees – those who actually made the decision to drop DirigoChoice coverage—and involuntary disenrollees – those who had no choice but to disenroll, as in the case of Small Group subscribers whose employer stopped offering coverage. Involuntary disenrollees were identified using the following questions:

Q21: Did you disenroll from Dirigo voluntarily, did your employer drop the plan, or were you dropped by Dirigo?

Q23: Is the reason you are no longer enrolled in Dirigo because you left the job that provided coverage?

Q25: Is the reason you are no longer enrolled in Dirigo because your employer dropped the plan?

As shown in Table 5, over forty percent of all disenrollees in the sample reported that they were terminated involuntarily -- either because their employer dropped Dirigo, because they left or were laid off from the job that provided coverage, or because Dirigo dropped them (presumably for non-payment of premiums).⁵ Very few of the involuntary disenrollees expressed dissatisfaction with the DirigoChoice program; when asked, all but 16% (n=13) said they would have remained on DirigoChoice if circumstances had allowed it.

Voluntary disenrollees make up 57 percent of our respondent sample. We identified voluntary disenrollees using information about type of coverage as well as responses to certain survey questions. Five percent of respondents (16) were small group business owners who confirmed, when asked, that they

⁵ Non payment of premium can reflect a voluntary disenrollment, if an individual decides to stop payment in anticipation of withdrawal from the program. However, because so many DirigoChoice disenrollees fall into low income categories where financial difficulties may make regular premium payment problematic, and because most of these individuals responded that they would have preferred to remain enrolled, we categorized those who were dropped for non-payment as involuntary disenrollees.

were the person in charge of making decisions about health insurance for the business. There were 78 sole proprietor voluntary disenrollees or about 23 percent of the sample. Like the small group business owners, these are people who confirmed that they were the person in charge of making health insurance decisions for the business. Sixty-two voluntary disenrolled respondents (18 percent) were enrolled in DirigoChoice under an Individual plan. Individuals differ from sole proprietors in that they are not self-employed, but may work for a business that does not offer health benefits or be ineligible for employer benefits. And finally, 39 small group employees are former contract holders were not in charge of making health insurance decisions for the company but who nonetheless voluntarily disenrolled.

In the next section, we look at reasons for disenrollment among voluntary disenrollees. In presenting these results, we group those whose decision to disenroll impacted the entire business (Small Group Owners and Sole Proprietors), and those whose decision impacted only themselves and their dependents (Individuals and Small Group Employees).

Table 5. Types of Disenrollees in the Survey Sample

	N	%	Definition
<u>Voluntary Disenrollees:</u>	195	56.9	
Small Group Business Owners	16	4.7	Subscribed to DirigoChoice in a Small Group plan Named as contact-person for the group Self-reported they were the person in charge of making decisions about the health insurance for the business when they were enrolled in Dirigo
Sole Proprietors	78	22.7	Subscribed to DirigoChoice in a Sole Proprietor plan Self-reported they were the person in charge of making decisions about the health insurance for the business when they were enrolled in Dirigo
Individuals	62	18.1	Subscribed to DirigoChoice in an Individual plan Self-reported that they voluntarily disenrolled from DirigoChoice
Small Group Employees	39	11.4	Subscribed to DirigoChoice in a Small Group plan If named as contact-person for the group: Self-reported that they were <u>not</u> the person in charge of making decisions about health insurance for the business where they work Self-reported that they voluntarily disenrolled from DirigoChoice
<u>Involuntary Disenrollees:</u>	148	43.1	
Left job that provided coverage or laid off	83	24.2	Reported being laid off or left the job that provided DirigoChoice coverage. (Almost three fourths of this group were Small Group subscribers; one fourth were Individual subscribers)
Employer Dropped Dirigo	53	15.5	Reported that employer dropped Dirigo. (96% of these individuals were Small Group subscribers)
Dropped by Dirigo	12	3.5	Reported being dropped by Dirigo. (Most members of this group were Small Group subscribers.)
TOTAL	343	100.0	

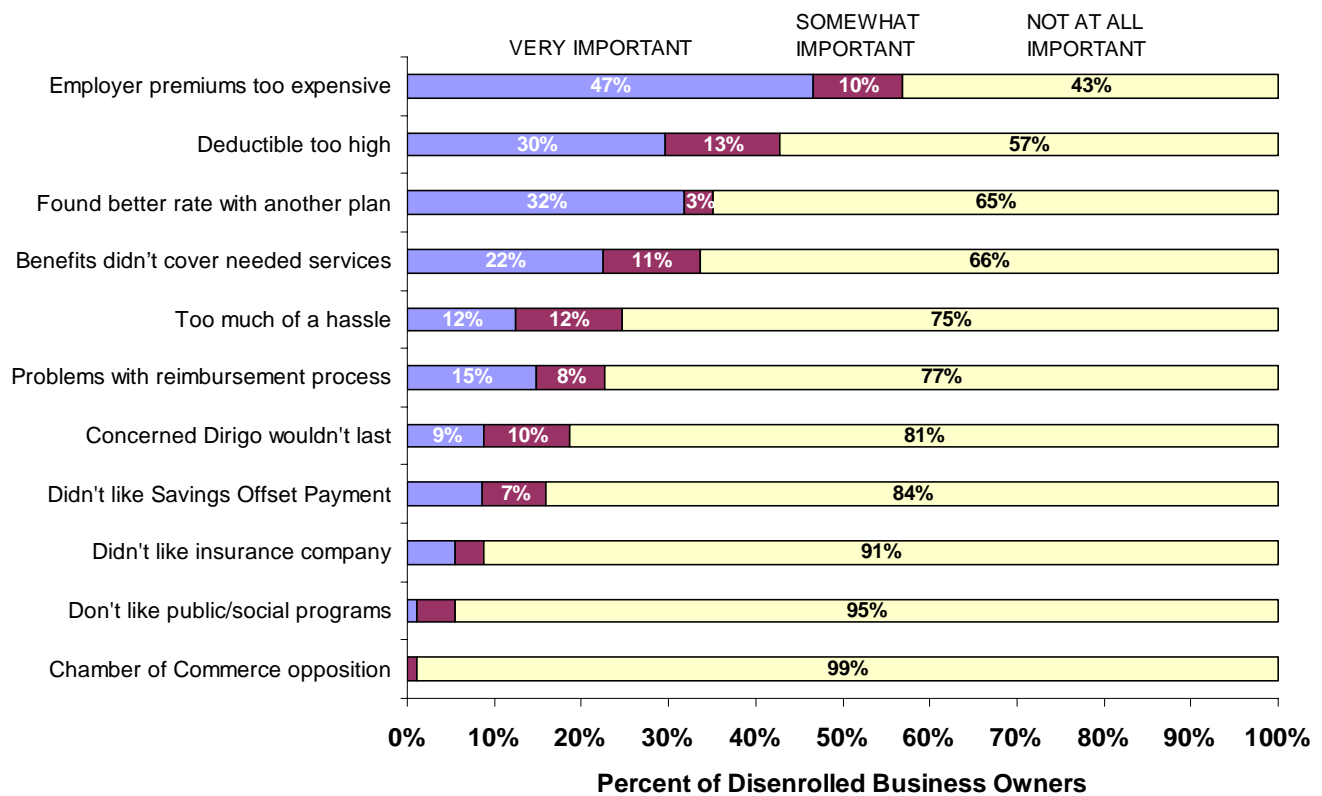
Reasons for Disenrollment from DirigoChoice among Voluntary Disenrollees: Small Group Business Owners & Sole Proprietors

Small group business owners and sole proprietors were asked about the importance of each of a variety of factors in their decision to drop DirigoChoice coverage (Fig. 1). Cost-related items were the most commonly cited disenrollment reasons. More than two thirds (n=64) of all small group owners and sole proprietors mentioned one or more of the three cost items (premiums too expensive, deductible too high, found a better rate) as being “Very” or “Somewhat important” in their decision to disenroll.

Dissatisfaction with covered services was mentioned by one third of business owners⁶, and administrative hassles and problems with the reimbursement process were each cited by one fourth of this group. In addition, almost one in five owners said that a concern about the longevity of the DirigoChoice program was important in their decision to disenroll.

Figure 1

How important was each of the following reasons in your decision to drop Dirigo... (Small Group Business Owners/Sole Proprietors only, N=91)



Note: Three of the Sole Proprietors said they were not in charge of making decisions of health insurance for the business and were not asked the questions above. They are not counted in the percentage calculations.

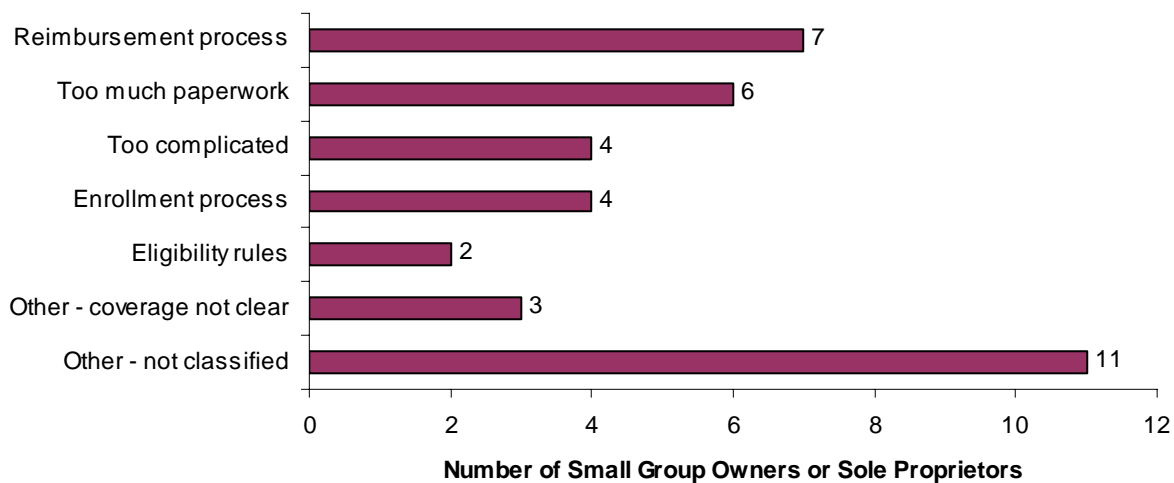
⁶ A few business owners and sole proprietors mentioned specific benefits they felt were inadequate in open ended follow-up questions – including dental, diagnostic testing and drug coverage. But because each response was mentioned by only one individual, they should not be interpreted as being representative of the entire group.

Twenty-two small group owners and sole proprietors who said that administrative hassles were “Very” or “Somewhat important” in their decision to disenroll were asked a set of follow-up questions about specific issues they may have experienced while enrolled in DirigoChoice (Fig. 2). One third mentioned that the reimbursement process in particular was a hassle, and one fourth said there was too much paperwork. The “other” responses included mentions of coverage issues, systems problems, and dissatisfaction with customer service.

Notably, half of this group of respondents who cited administrative hassles terminated between January and June 2005. Thus their comments probably reflect issues related to the start-up of the DirigoChoice program. In addition, the small number (22 out of more than 4,000 current and past subscribers) leaves unclear how widespread these problems were.

Figure 2

**Reported Hassles of DirigoChoice Among
Small Group Owners & Sole Proprietors (N=22)**

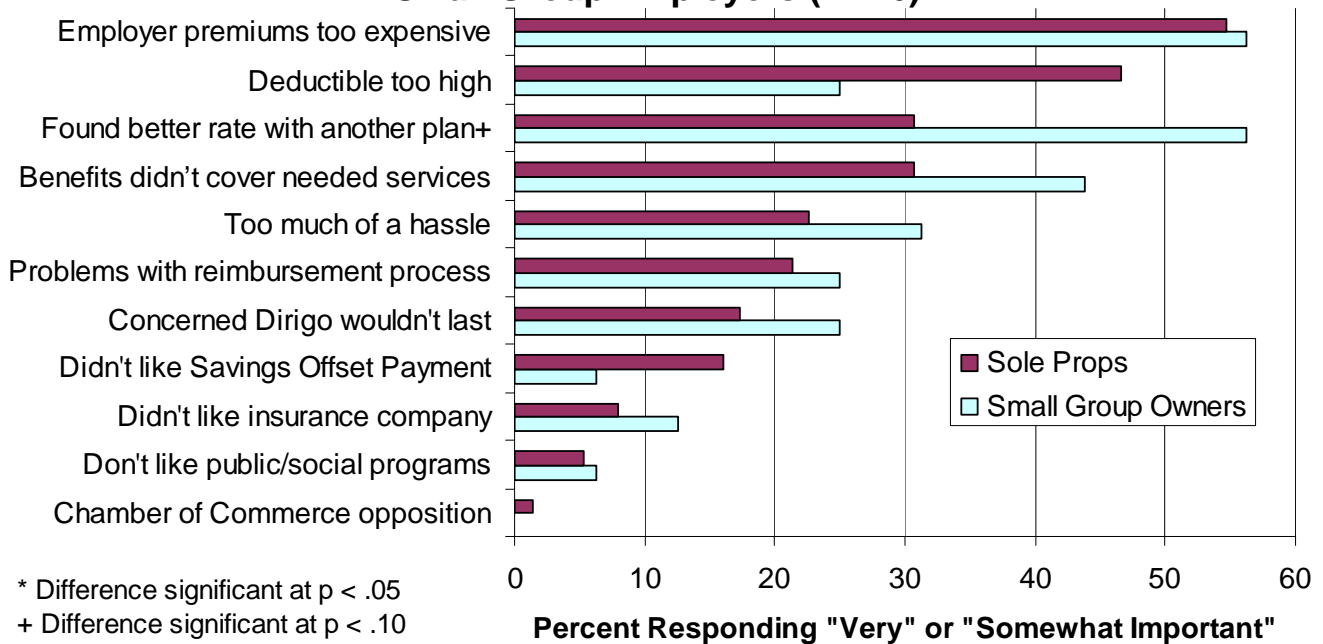


Differences in Disenrollment Reasons by Contract Type and Discount Group

When we broke out the disenrollment reasons of sole proprietors from those of small group owners, we found that sole proprietors were more likely to cite high deductibles and that small business owners were more likely to say they found a better rate with another plan⁷ and that benefits did not cover needed services (Fig. 3). The fact that small group owners were more likely to mention that they found a better rate with another plan reflects the more competitive insurance market for small groups compared to individuals in Maine. It may also suggest that some insurers in the small group market responded to the introduction of DirigoChoice program by adding or modifying products for small groups. The results for small group owners should, however, be interpreted cautiously because the sample size is small (n=16).

Figure 3

**Reasons for Disenrollment from DirigoChoice:
Sole Proprietors (N=75) versus
Small Group Employers (N=16)**



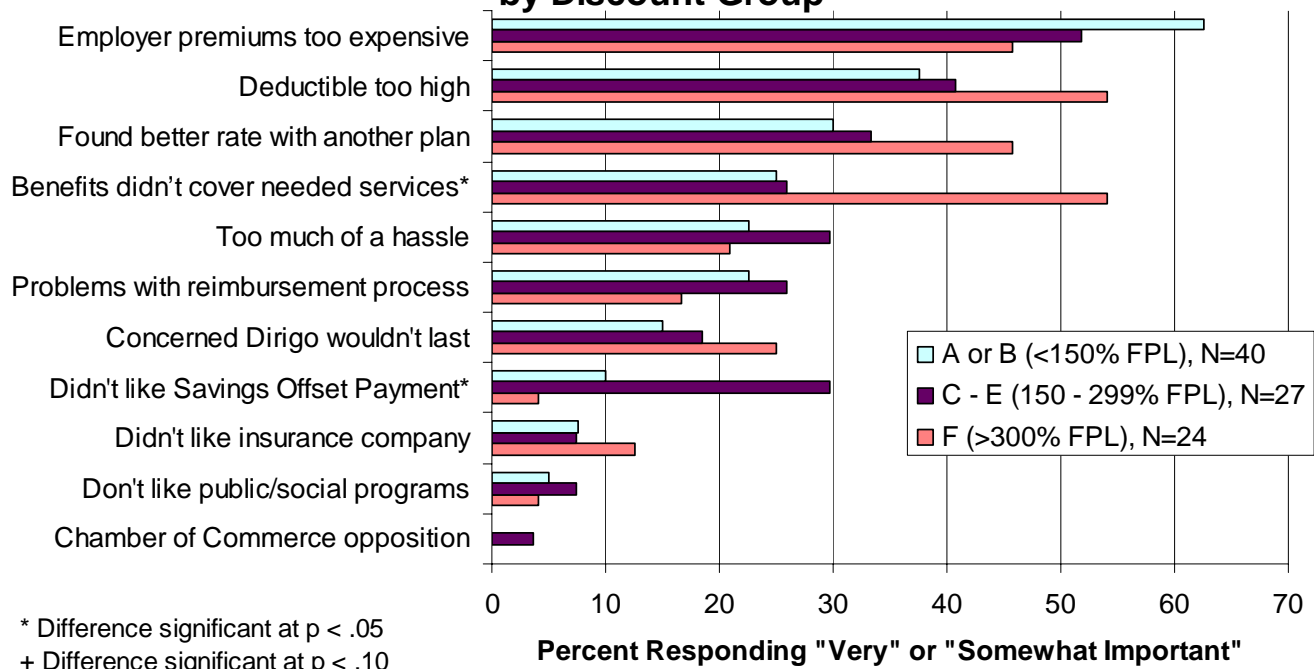
⁷ The difference between Sole Proprietors and Small Group Owners was statistically significant at the .10 level for this item only. None of the other differences noted here were statistically significant.

Disenrollment reasons also varied according to the discount group among small group owners and sole proprietor subscribers (Fig. 4). Those in group F, representing subscribers with incomes above the eligibility threshold for discounts, were much more likely to cite "Benefits didn't cover needed services" as being important in their decision to terminate coverage through DirigoChoice⁸. More than half of those in group F cited inadequate benefits as being "Somewhat" or "Very Important," versus only one fourth among all other discount groups. These results are consistent with the fact that this group was more likely to have had coverage prior to enrolling in DirigoChoice relative to other respondents (not shown), which would have given them a basis for comparing coverage. Group F subscribers were also more likely to mention that the deductible was too high and that they had found a better rate with another plan than were members of the discount groups, although neither of these differences was statistically significant.

Interestingly, members of discount groups C, D and E (the mid-range discount groups) were at least three times more likely to mention the Savings Offset Payment as an important reason for disenrollment from DirigoChoice, relative to those in groups A, B or F. Although this difference is pronounced and statistically significant, there is no immediately evident explanation for it. The Savings Offset Payment refers to the legislatively mandated funding mechanism for the DirigoChoice program. Since the term was not explained to survey respondents by the interviewers, it is possible that survey respondents mistook this term for a component of their payment into the program (perhaps the deductible) or the premium discount reimbursement mechanism. This hypothesis seems plausible since subscribers in groups C,D, and E faced higher deductibles than those in Group B.

Figure 4

**Disenrollment Reasons Among
Sole Proprietors & Small Group Owners (N=91)
by Discount Group**



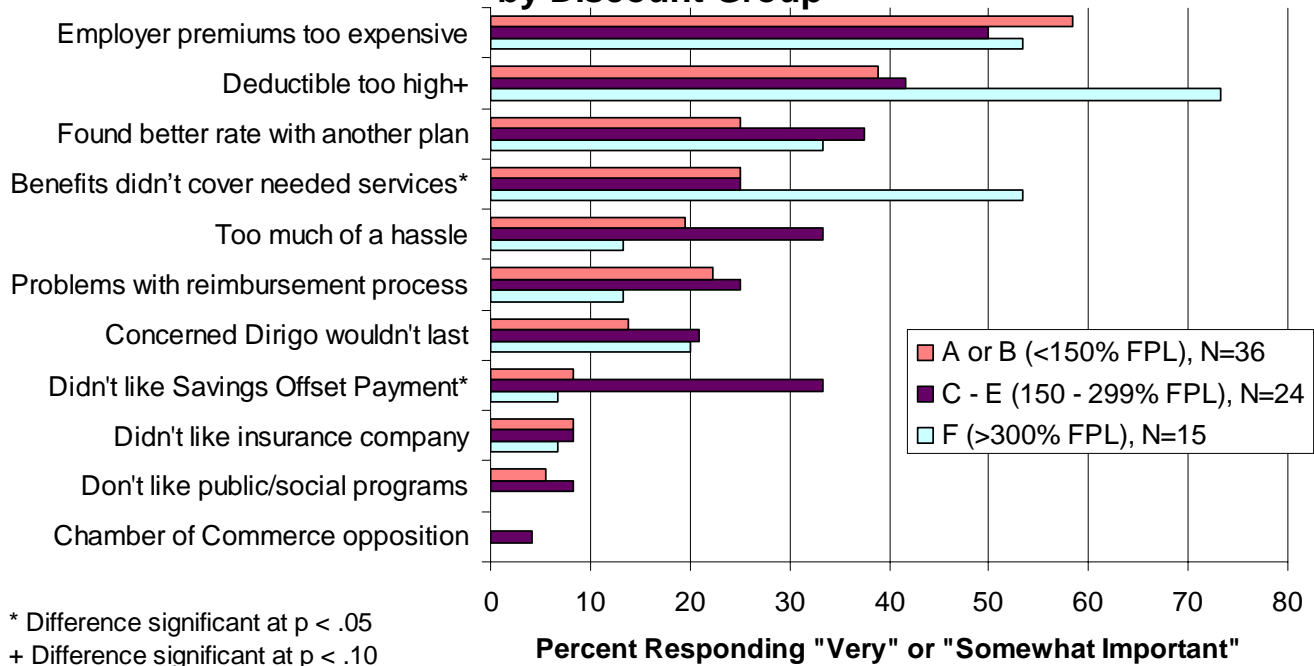
⁸ One person said that "a lot of little things that a typical plan would cover were not covered"; another mentioned a lack of diagnostic testing, and one mentioned inadequate drug coverage. But because each of these specific items were mentioned by only a single individual, they should not be interpreted as being representative of the entire group.

Drilling down further, we looked at disenrollment reasons by discount group among sole proprietors only. Sole proprietors in group F have a different profile of reasons for disenrollment compared with those in lower-income discount groups. Over 70% of those in group F said that a high deductible in the DirigoChoice plan was “very” or “somewhat important” in their decision to terminate coverage. This group was also about twice as likely to mention that benefits did not cover services they needed.

The other notable finding is that sole proprietors in groups C, D and E were more than three times as likely to mention the Savings Offset Payment as a reason for disenrollment compared with those in groups A, B or F (see discussion, page 22).

Figure 5

**Disenrollment Reasons Among
Sole Proprietors Only (N=75)
by Discount Group**



Disenrollment Reasons among Small Group Owners and Sole Proprietors who did not cite Cost as a factor:

Almost one third of small group owners and sole proprietors (n=27) did *not* mention cost as a factor in their decision to disenroll from Dirigo. These are individuals who responded “not at all important” to items asking if employer premiums were too expensive, they found a better rate, and the deductible was too high.

Table 6 outlines the reasons for disenrollment that *were* mentioned by this group. By far the most common reason was that they or their spouse found another job that provided benefits. Several mentioned that they qualified for public coverage through MaineCare or Medicare. A few respondents cited administrative problems as their reason for disenrolling, including problems with the reimbursement process, being dropped because of a mix-up with their agent about premium payments, or “hassles” with the program in general.

Table 6. Disenrollment Reasons Given by Small Group Owners & Sole Proprietors Who Did Not Cite Cost (N=27)

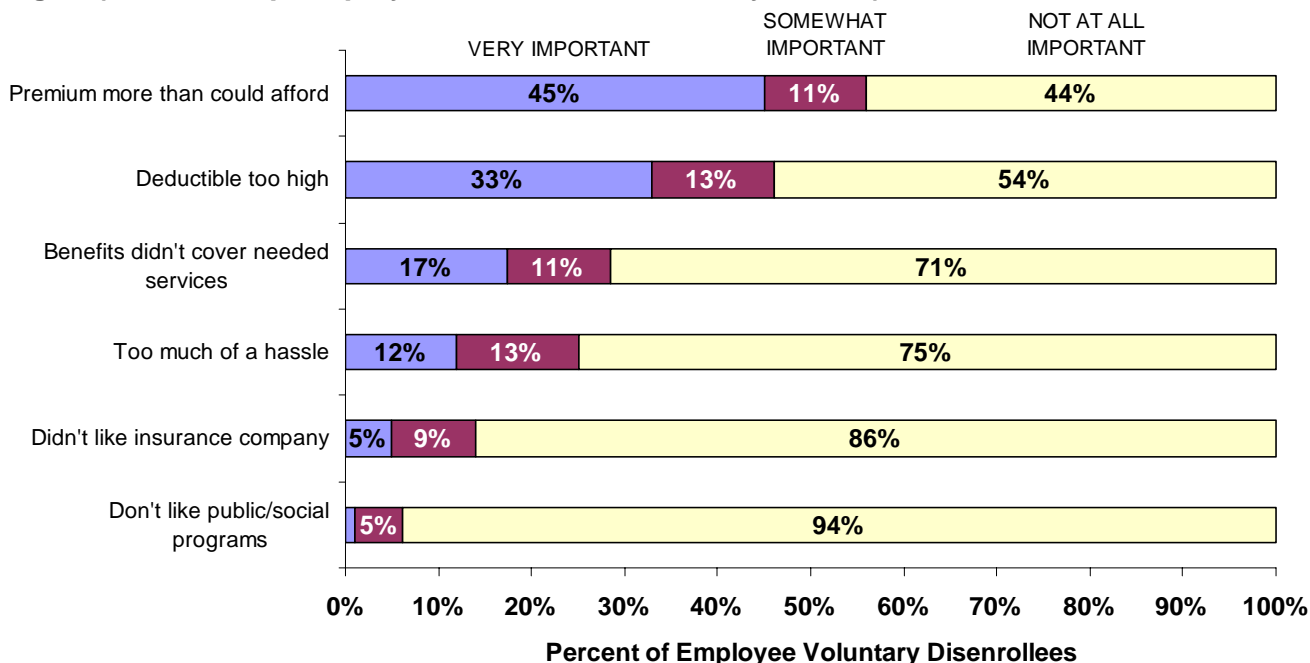
	<u>N</u>
Found another job providing benefits	11
Spouse got a job with benefits	3
Qualified for public insurance (Medicare/MaineCare)	3
Problems with the reimbursement process	3
Dropped by Dirigo (due to administrative problems)	2
Dirigo was too much of a hassle	2
Closed the business	1
No employees qualified for Dirigo discounts. Signed up for other Anthem plan which seemed marginally better.	1
Poor coordination between Anthem & Dirigo	1
Concerned that Dirigo would not last	1
Benefits didn't cover services I needed	1

Reasons for Disenrollment from DirigoChoice among Voluntary Disenrollees: *Individuals & Small Group Employees*

This section focuses on disenrollment reasons given by individuals and small group employees who made their own decision to drop DirigoChoice. These respondents were asked a similar set of questions as business owners about their reasons for disenrolling (Fig. 6).

Figure 6

How important was each of the following in your decision to drop Dirigo? (Small Group Employees and Individuals Only, n=101)



The distribution of disenrollment reasons given by individual contract holders and employees mirror the answers from business owners and sole proprietors. This is a somewhat surprising finding given that sole proprietors and small group owners have to pay a much larger share of the DirigoChoice program costs. Despite the subsidies available to individuals and small group employees through DirigoChoice, affordability of premiums or deductibles was cited by two-thirds as being important in their decision to disenroll. Lack of covered services was mentioned by just under one third, and one-fourth said that DirigoChoice was too much of a hassle.

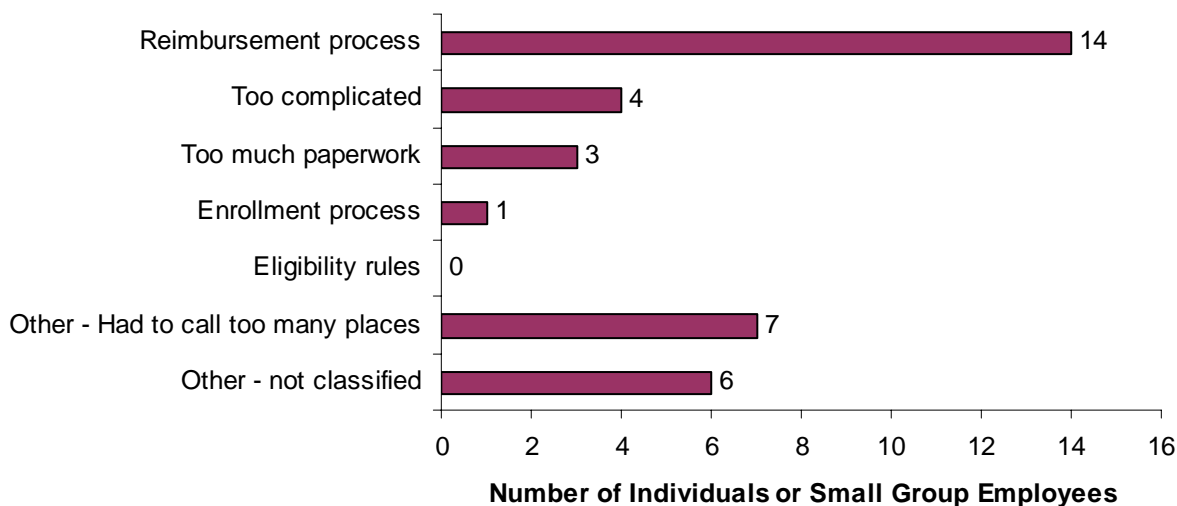
Among those who said the premium cost was “Very” or “Somewhat Important” in their decision to disenroll (n=56), 21% said that their subsidy decreased as a result of a change in their household income, and another 21% said their income fell and they could no longer afford the premium.

There were no statistically significant differences between small group employees and individual enrollees on any of the reasons for disenrollment (not shown).

Among the small minority of individuals and small group employees who said that administrative hassles were “Very” or “Somewhat Important” (n=26), over half mentioned the reimbursement process specifically, and over one fourth said they had to call several different places to get their questions answered (Fig. 7).

Figure 7

**Hassles Mentioned by
Individuals & Small Group Employees (N=26)**



Communication and coordination problems were prominent among individuals and small group employees who indicated that administrative hassles played a role in their decision to drop coverage (n=26). Some of their comments include:

“At Anthem the people who process applications don’t communicate well with the people who do the billing (not on the same page); lots of billing issues”

“Hard to get in touch with anyone. I got the runaround. Dirigo said I had to talk to the insurance company [Anthem], and [Anthem] said I had to talk to Dirigo”

“No single contact place to get answers. Had to call three places”

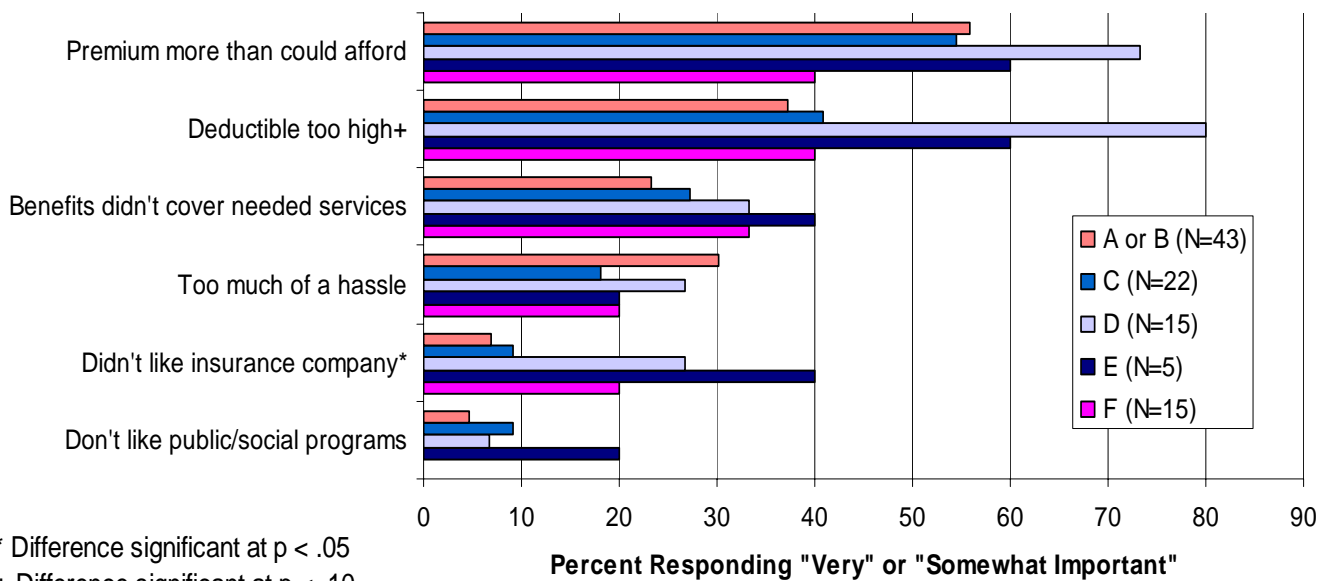
“A glitch in the system caused our policy to be cancelled”

As noted earlier, the very small number of respondents in this category in relation to overall program enrollment (26 among over 4,000 subscribers) makes it difficult to determine whether the problems encountered were aberrations or reflected more widespread start-up problems.

Affordability of DirigoChoice presented the most problems for individuals and small group employees in discount groups D and E -- those with incomes between 200% and 300% of the FPL (Fig. 8). Subscribers in Groups D and E were much more likely to cite high deductibles as an important reason for disenrollment. Three quarters (n=15 of 20) of those in discount groups D or E said high deductible was “Somewhat” or “Very important”, versus less than 40% of those in all other discount groups. Subscribers in discount group D were also the most likely to cite the premium as an important reason for disenrollment compared with subscribers in other discount groups, although this difference was not statistically significant.

Figure 8

**Disenrollment Reasons Among
Individuals and Small Group Employees (N=101)**



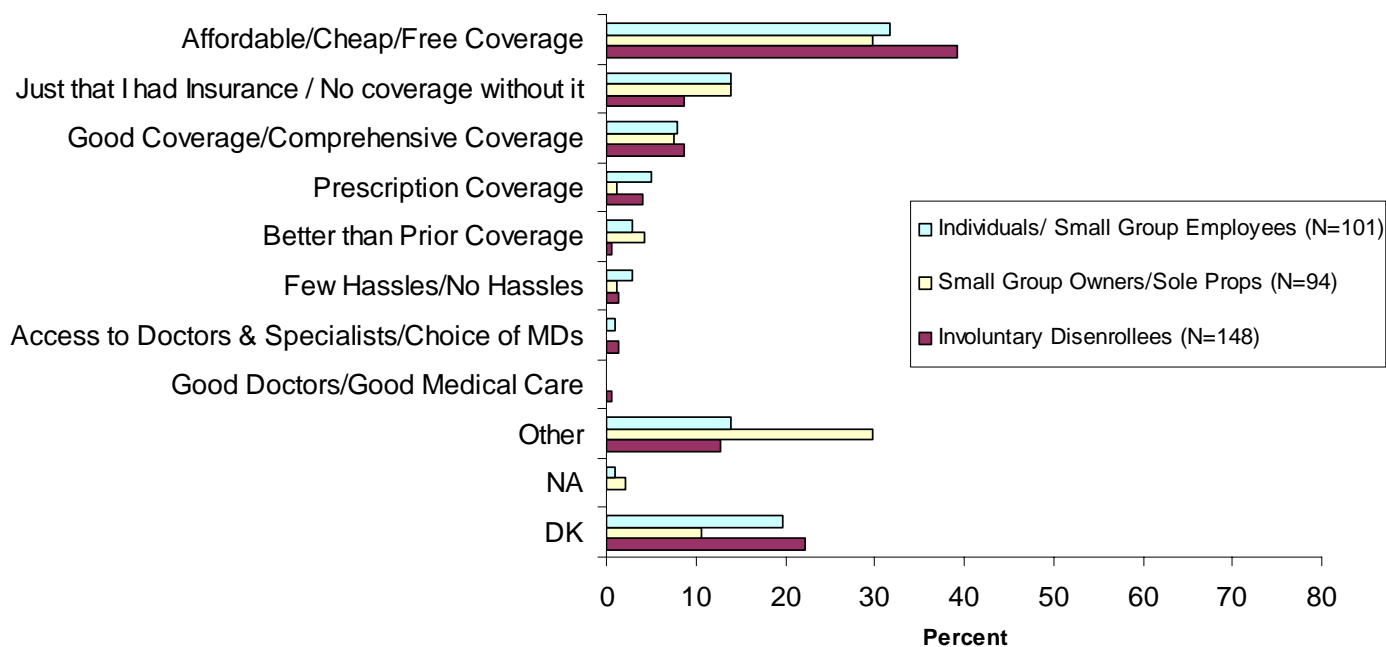
Best and Worst Thing About DirigoChoice

All respondents were asked what they thought was the best and worst thing about DirigoChoice. Fig. 9 outlines responses to what was “best” among three different groups: 1) voluntary disenrollees in individual plans or small group employees, 2) voluntary disenrollees who were small group owners or sole proprietors, and 3) involuntary disenrollees. This was an open-ended question so respondents picked their reason without prompting from a list.

The best things about DirigoChoice most frequently cited were that it provided an affordable coverage option (one third of all respondents) and that the respondent would not have had any coverage without it (ten percent of respondents). Involuntary disenrollees were more likely to mention the affordability of Dirigo as the best thing relative to the other two groups.

Figure 9

What would you say was the best thing about DirigoChoice?



There were 62 “other” responses which included:

Six people mentioned the rebates or EBT card⁹

Four people said the best thing about DirigoChoice was that it gave them another option for coverage. One said, “It was another option in a state where there are few options.”

Four respondents said they had never used their DirigoChoice coverage.

Several respondents said they like the concept or ideas behind DirigoChoice. For example, one person characterized Dirigo as, “An attempt to rationalize the system”. An employer said, “[The

⁹ In the DirigoChoice program, premium subsidies are distributed to enrollees through an electronic transfer system, using an Electronic Benefit Transfer (EBT) card.

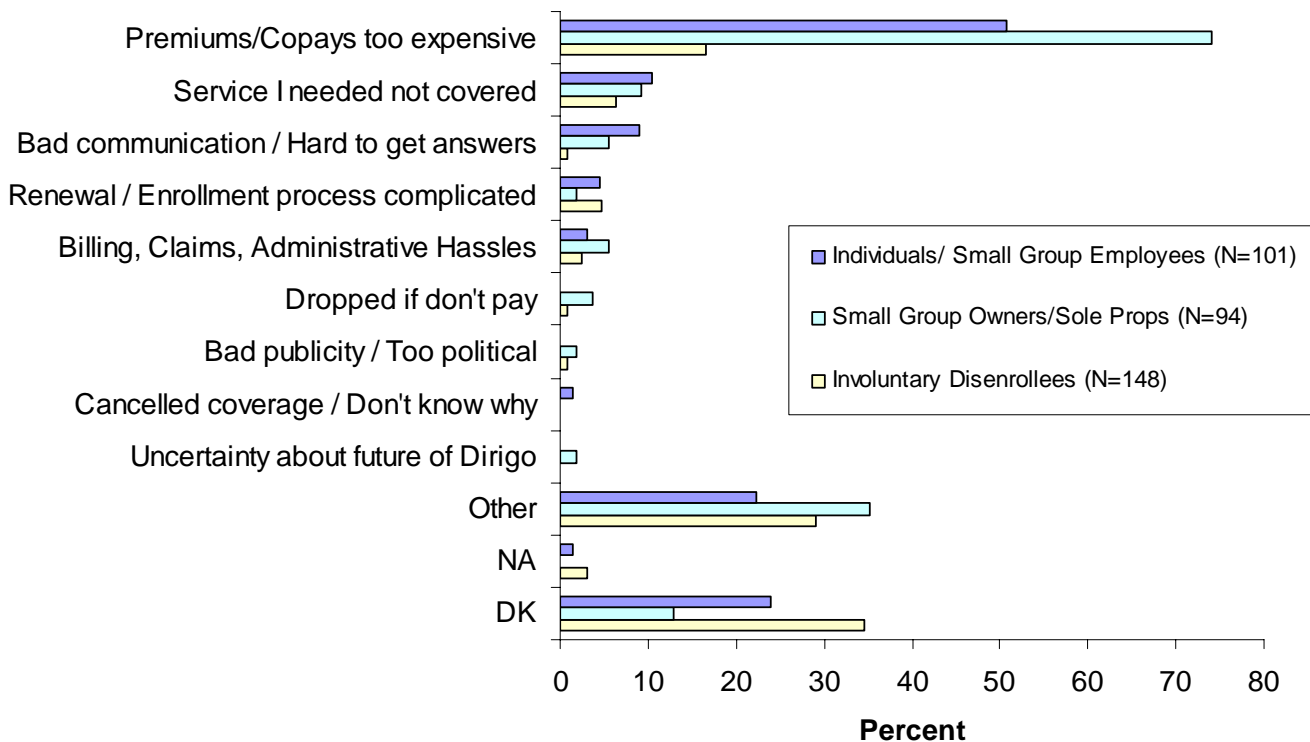
best thing about Dirigo is]...the overall ‘architecture’ of the plan and the coverage it would provide to my employees”. Other disenrollees agreed, although they thought there was room for improvement. One person commented, “the concept is a great concept, but they have a long way to go.” Another said, “I credit the State for making an honest effort, even though the result may be imperfect in some ways.”

For voluntary disenrollees, the cost of premiums and/or copays was by far the most commonly mentioned “worst thing” about DirigoChoice (Fig. 10). Over three quarters of small group owners and sole proprietors mentioned cost issues, and over half of individuals and small group employees said that premiums or copays were the worst thing about Dirigo. Involuntary disenrollees generally had few negative things to say about Dirigo, and often said “nothing” or “don’t know” when asked for the worst thing about Dirigo.

The most common “other” response to this question across all subgroups was that there was “nothing” wrong with Dirigo. However, several respondents said they found the program to be very confusing. As one person put it: “I think the way Dirigo is presented to both employers and employees [is] not very accessible.”

Figure 10

What was the worst thing about DirigoChoice?



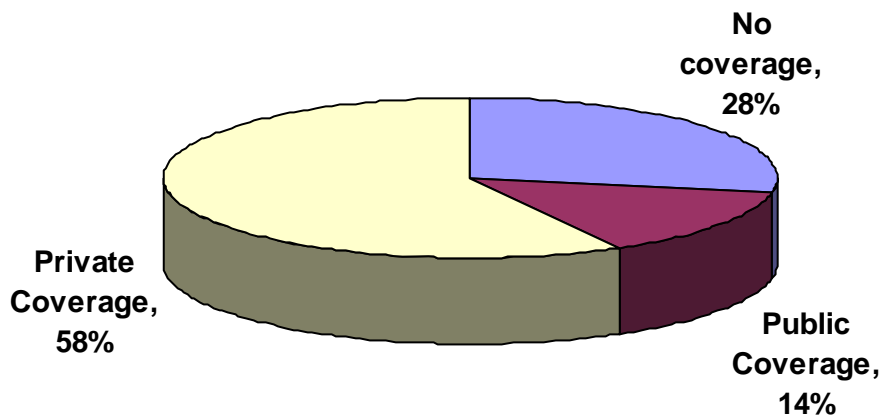
Coverage After Disenrollment From DirigoChoice

One key goal of the DirigoChoice program is to improve access to coverage for all Maine citizens and reduce the number of uninsured. Knowing what happens to the insurance coverage of people after they leave DirigoChoice is therefore a vital question. This section of the report examines whether or not disenrollees had coverage after they left the program, what type of coverage they had, and whether coverage varied according to the respondent's coverage type while on Dirigo, health status, or prior coverage status.

All disenrolled respondents were asked if they were covered by any replacement health insurance plan at the time of the interview, and if so, what type of coverage they had (Fig. 11). Almost three quarters of disenrollees in our sample did have new health coverage after leaving DirigoChoice, including 58 percent with private coverage, and 14 percent with public coverage¹⁰. Only 28 percent were uninsured.

Figure 11

Subscriber Coverage after Disenrolling from DirigoChoice (N=337)

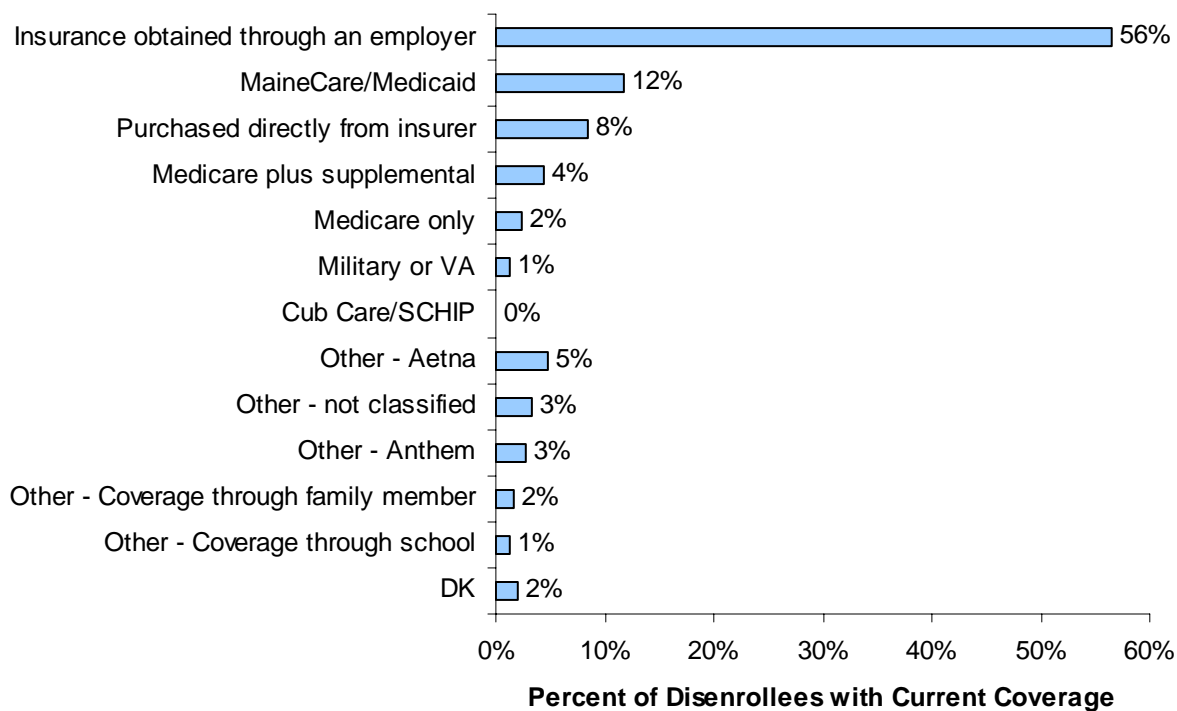


¹⁰ We classified respondents who reported having coverage through their employer, purchase coverage directly from an insurer, or having military or VA coverage as having private coverage. And those with Medicare, Medicaid, or SCHIP are classified as having public coverage.

Among disenrollees who had coverage, by far the most common type reported was private coverage obtained through their employer, at 56 percent of all covered respondents (Fig. 12). Fewer than one in ten reported that they purchased non-group coverage directly from an insurer. The survey instrument did not ask specifically for the insurance company providing current coverage, but several respondents volunteered this information and it was captured as an open-ended “other” response. Five percent of covered disenrollees (n=12) reported that they had enrolled in an Aetna plan, and three percent (n=7) were enrolled in a different plan (other than DirigoChoice) offered by Anthem. This suggests that private insurance companies in Maine may have responded to the introduction of DirigoChoice with new products of their own that are designed to compete for the same potential subscribers.

Figure 12

Type of Coverage Among DirigoChoice Disenrollees with Coverage (N=248)



Differences in Current Coverage by Disenrollment Group and Subscriber Characteristics

To see if certain groups of disenrollees were more likely to be uninsured after leaving DirigoChoice, we looked at whether or not respondents reported having any type of coverage by:

Disenrollment group (small group owners and sole proprietors, small group employees and individuals, and involuntary disenrollees)

Age (18 to 24, 25 to 34, 35 to 44, and 45 or older)

Subscriber self-reported health status (Excellent/Very Good versus Fair/Poor)

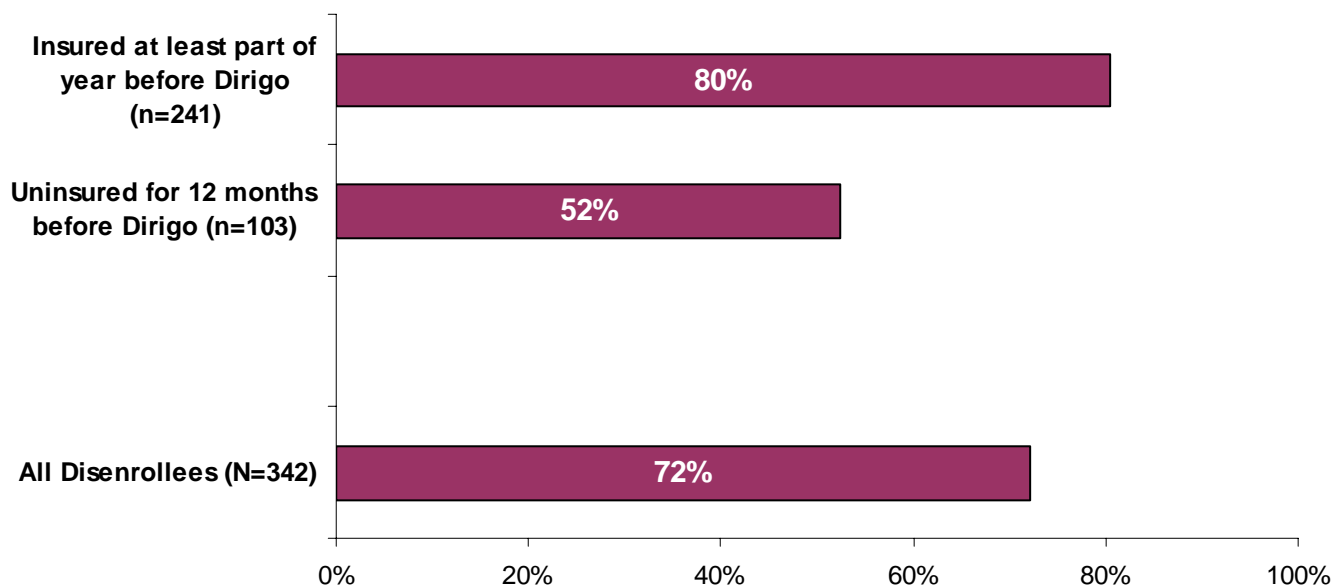
Presence of a household member with a chronic condition, and

Coverage status prior to enrolling in DirigoChoice

With the exception of prior coverage status, we found no statistically significant differences in the rate of coverage after disenrollment across any of these groups (not shown). Those who had coverage before enrolling in DirigoChoice were much more likely to regain coverage after leaving (Fig. 13) in comparison to disenrollees who had been uninsured at the time they enrolled in DirigoChoice. Eighty percent of those who had coverage for at least part of the year prior to enrolling in DirigoChoice also had some sort of coverage after they disenrolled from the program. Conversely, those who were uninsured before enrollment were more likely to return to the ranks of the uninsured after disenrolling from Dirigo.

Figure 13

Coverage Status at Disenrollment from DirigoChoice by 12-month Coverage Status Prior to Enrollment



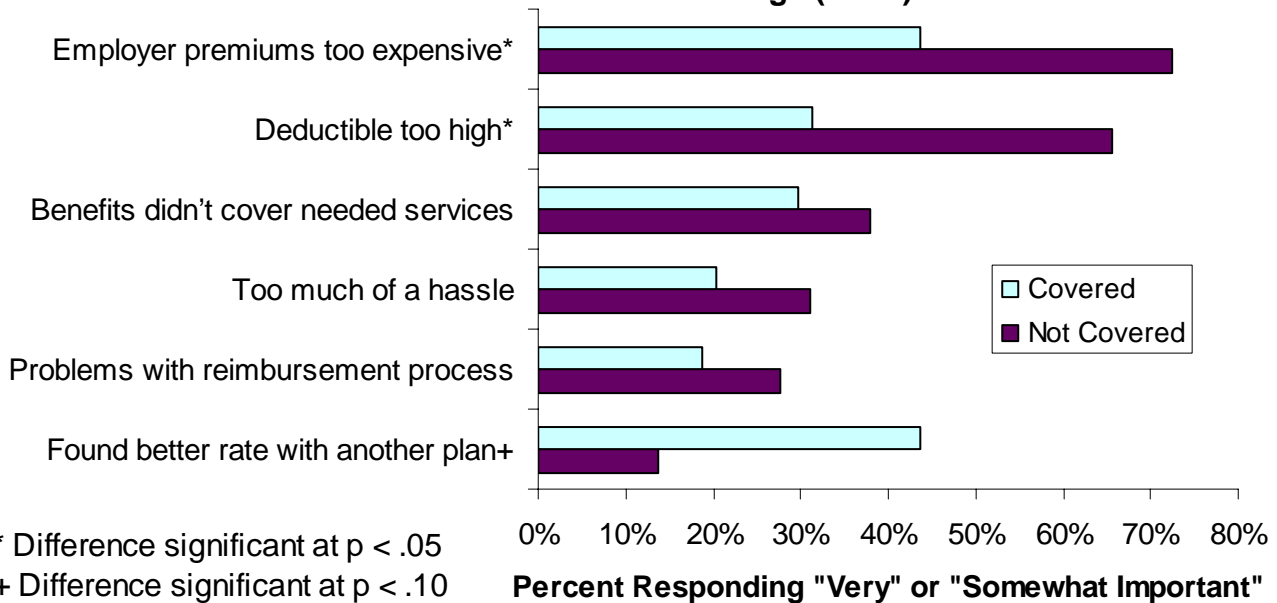
Note: Differences in coverage rates between those with and without prior coverage are statistically significant at $p < .01$

Percent with Coverage at Disenrollment

We also found that several of the reasons given for disenrollment among small group owners and sole proprietors differed for those who regained alternative coverage in comparison to those who become uninsured after DirigoChoice (Fig. 14). Specifically, those who were uninsured (not covered) after leaving Dirigo were much more likely to have reported that the Dirigo employer premiums were too expensive and that the deductible was too high, relative to those who transferred to alternative coverage after Dirigo. The subsequently uninsured disenrollees likely represent small business owners and sole proprietors for whom DirigoChoice, even though it offered discounts, turned out to be too much of a financial stretch.

Figure 14

Major Disenrollment Reason Among Small Group Owners & Sole Proprietors with Coverage After Disenrollment (N=64) and those with No Coverage (N=29)



Prior Coverage Status

The survey also included several retrospective questions about whether respondents had any coverage during the year prior to the time they enrolled in DirigoChoice, and about the type of coverage they had (Fig. 15).¹¹ Forty eight percent of all respondents were uninsured at the time they enrolled in DirigoChoice; over half of the respondents had private coverage, and a small fraction had public coverage. Figure 15 illustrates that DirigoChoice enrollment drew both from the uninsured population as well as from the small group and individual market. However, tracking the coverage status of disenrollees after they leave DirigoChoice shows that the program may be affecting the long-term coverage choices or options of participants (Fig's 16-A ,B).

¹¹ As noted above, there were 191 respondents in the disenrollee survey who participated in a previously administered enrollee survey and answered the prior coverage questions at that time. Their responses were linked in to the disenrollee data and are included in these results.

Figure 15

**Type of Coverage at Enrollment
in DirigoChoice (N=317)**

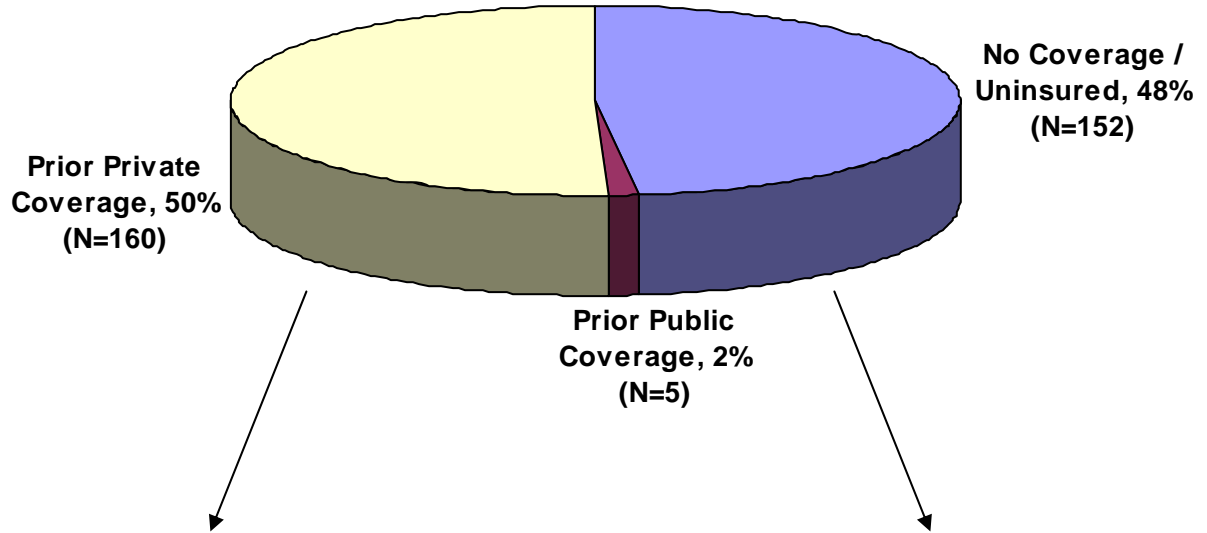


Figure. 16-A

**Type of Coverage at Disenrollment,
Among Subscribers with Private
Coverage at Enrollment (N=160)**

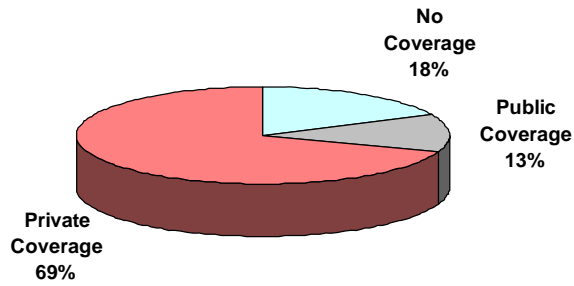
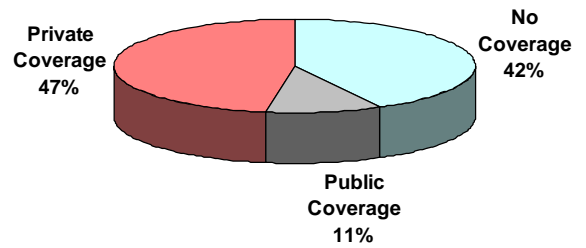


Figure. 16-B

**Type of Coverage at Disenrollment,
Among Subscribers Uninsured at
Enrollment (N=152)**



Among those with private coverage prior to enrollment in DirigoChoice, more than two-thirds (69 percent) regained private insurance after they left DirigoChoice, only one in ten (13%) went into public coverage (Medicare or Medicaid), and fewer than two in ten entered the ranks of the uninsured (Fig. 16-A). Moreover, among respondents who were *uninsured* at enrollment in DirigoChoice, almost half (47 percent) obtained private coverage after leaving DirigoChoice (Fig. 16-B). For these previously uninsured subscribers, DirigoChoice served as gap coverage for those with sporadic attachment to the insurance market or served as a bridge into the private insurance market for those who may have been chronically uninsured. In addition to directly reducing the number of uninsured in Maine by providing affordable coverage to previously uninsured enrollees, DirigoChoice appears also to be contributing indirectly by connecting some uninsured individuals to the private market. Given the volatility of coverage in the non-group and small group markets, generally, it is possible that DirigoChoice also served as gap coverage for some of those who had prior coverage but who, in the absence of the program might have spent a period of time uninsured. The possibility of this dynamic is supported by the number of disenrollees who responded that they dropped DirigoChoice because of obtaining coverage through a spouse or through newly available employment based coverage.

Prior Health Insurance Type

Respondents who were insured at the time they enrolled in DirigoChoice were also asked to specify the type of coverage they had. These results from the disenrollee survey are presented below in Table 6, along with the corresponding results from a set of interviews with DirigoChoice members who enrolled between April 1 and August 1, 2005. The comparison allows us to see whether enrollees who came into DirigoChoice from specific other plans were more likely to disenroll. Participants who had enrolled in DirigoChoice from another Anthem plan or who had prior COBRA coverage were less likely than other Dirigo enrollees to disenroll. Former Aetna subscribers were disproportionately represented among disenrollees. When we took a closer look at the 31 former Aetna subscribers who disenrolled from DirigoChoice, we found that two of them went back to Aetna after disenrollment, four purchased insurance directly from an unspecified provider (which may or may not have been Aetna), and 18 obtained coverage through an employer.

Table 7. Prior Insurance Type of Enrollees and Disenrollees Insured at the Time of DirigoChoice Enrollment

Insurance Type	Enrollees* N=1107		Disenrollees N=178	
	Freq.	Percent	Freq.	Percent
Anthem Blue Cross/Blue Shield	664	60.0	94	52.8
Aetna	85	7.7	31	17.4
MegaLife	49	4.4	6	3.4
Cigna	24	2.2	4	2.2
Cobra	125	11.3	13	7.3
MaineCare/Medicaid	34	3.1	5	2.8
Medicare Only	6	0.5	0	0
Medicare Plus Supplement	2	0.2	0	0
Military or VA	6	0.5	1	0.6
Other coverage	102	9.2	20	11.2
Don't know	28	2.5	7	3.9

Notes:

* Enrollee information is from a previous survey of DirigoChoice enrollees who first enrolled between April 1 and August 31, 2005.

- Percentages do not add up to 100 percent due to the fact that respondents were allowed to give more than one answer.

IV. MAJOR FINDINGS OF THE DISENROLLEE SURVEY

Some of the key findings of the disenrollee survey are summarized below:

Overall, in the first year of the DirigoChoice Program, 746 of more than 4,000 subscribers disenrolled from the program. This rate is not dissimilar to the turnover rate seen generally in the individual and small group insurance markets and compares favorably with the experience of other programs targeted to low income individuals and small groups.

More than four in ten DirigoChoice members who disenrolled did not do so voluntarily. They disenrolled because they left their job (24 percent), because their employer dropped DirigoChoice (16 percent) or because they were dropped by Dirigo¹² (4 percent).

Very few of the involuntary disenrollees expressed dissatisfaction with the DirigoChoice program; when asked, only 16% (n=13) said they would *not* have remained enrolled in Dirigo if circumstances had allowed it.

Subscribers who left DirigoChoice voluntarily cited cost issues (premiums too expensive, deductible too high) most frequently as being important in their decision to leave the program. This was true across almost all contract types and discount groups.

¹² Subscribers are most often dropped by DirigoChoice due to non-payment of the premium. We categorize these 12 individuals as involuntary disenrollees because most (75%) said they would have remained enrolled if Dirigo had not dropped them.

More than two thirds of all small group owners and sole proprietors mentioned one or more of the three cost items (premiums too expensive, deductible too high, found a better rate) as being “Very” or “Somewhat important” in their decision to disenroll. The same was true of individuals and small group employees.

One of the few groups for whom cost was not the most prevalent issue was small group owners and sole proprietors in group F (those with no discount); these respondents cited inadequate benefits as being important in their decision to disenroll most often (at more than 50 percent). These findings represent something of a dilemma for the DirigoChoice Board. Reducing the cost of premium payments is most readily accomplished through cutting back on benefits. Conversely, adding benefits increases the cost of the program. Both sources of complaint cannot be addressed simultaneously without finding an alternative means of reducing the cost of health care services. For about one third of small group owners and sole proprietors, cost issues were not mentioned at all. Among this small group, for whom cost was not the driving force, by far the most common disenrollment reason they gave was that they or their spouse found another job providing benefits.

Political issues related to negative press about the Savings Offset Payment or opposition from the Chamber of Commerce had minimal impact on decisions made by DirigoChoice subscribers to disenroll. However, concern about the program’s future was important to a significant minority of subscribers.

One in five voluntary disenrollees said that concern about the future of DirigoChoice was important in their decision to leave.

Fewer than 10 percent mentioned the Savings Offset Payment as being important, and less than 5 percent mentioned opposition from the Chamber of Commerce.

The “best things” about DirigoChoice most frequently cited were that it provided an affordable coverage option (one third of all respondents) and that the respondent would not have had any coverage without it (ten percent of respondents).

For voluntary disenrollees, the cost of premiums and/or copays was by far the most commonly mentioned “worst thing” about DirigoChoice. Involuntary disenrollees generally had few negative things to say about Dirigo.

Over three quarters of small group owners and sole proprietor disenrollees mentioned cost issues, and over half of individuals and small group disenrollees said that premiums or copays were the worst thing about Dirigo.

Involuntary disenrollees often said “nothing” or “don’t know” when asked for the worst thing about Dirigo.

The majority of subscribers who disenrolled from DirigoChoice obtained other health coverage after leaving.

Almost three quarters of disenrollees in our sample did have other health coverage after leaving, including 58 percent with private coverage and 14 percent with public coverage. Only 28 percent were uninsured.

In addition to directly reducing the number of uninsured in Maine by providing affordable coverage to previously uninsured enrollees, results from the disenrollee survey suggest that DirigoChoice is serving to connect some uninsured individuals to the private market.

Among disenrollees who were uninsured prior to enrollment in DirigoChoice, almost half (47 percent) obtained private coverage after they left. For these previously uninsured subscribers, DirigoChoice appears to have served as a bridge into the private insurance market.

In 2005, young adults and those without dependents were the most likely to disenroll from DirigoChoice. The disproportionate loss of young enrollees has negative financial implications for the program.

Analysis of all 2005 contracts indicated that 35 percent of subscribers between the ages of 18 and 24 terminated their contracts in 2005, versus only 22 percent among those age 25 – 44, and 13 percent among those age 45 or older.

Younger enrollees generally tend to be healthier and use fewer health care resources, and are therefore less expensive to cover on a per member per month basis. A continued process of selective attrition in which young, healthy individuals leave the program in disproportionate numbers could raise program costs making the program less attractive to employers, compelling DirigoChoice administrators to either increase subsidies or implement cost-cutting measures such as limiting covered benefits.

While a higher proportion of small group contract holders disenrolled in 2005 relative to individuals and sole proprietors, this difference can be attributed to the fact that enrollment did not open to individuals and sole proprietors until the second quarter.

21% of small groups terminated contracts in 2005, versus 17% of sole proprietors and 14% of individuals.

A multivariate analysis of all 2005 contracts showed that small group enrollees were no more likely to disenroll than sole proprietors or individuals, once their disproportionate enrollment in the first quarter was taken into account.

PART II: KEY INFORMANT INTERVIEWS WITH MAINE EMPLOYERS WHO DISENROLLED OR WITHDREW FROM DIRIGOCHOICE

I. PURPOSE

This component of our study used in-depth interviews with a small group of Maine employers some of whom had disenrolled from DirigoChoice and others who had started applications but elected not to participate prior to enrollment. The primary goal of this analysis was to inform the Dirigo Health Agency on barriers Maine employers encountered when they attempted to purchase and retain DirigoChoice health coverage. A secondary goal of this study was to gather feedback to help inform future modifications to the plan. Staff at the Muskie School of Public Service conducted semi-structured telephone interviews with selected employers designed to elicit information on:

1. The decision-making processes and sources of information used by employers as they select and de-select health insurance;
2. The features of DirigoChoice that are attractive to small business;
3. The features of the health plan that may deter employers from purchasing or retaining coverage; and
4. The benefits and program features are particularly important to employers and their employees.

The following report documents the major themes and findings of interviews with this small subset of employers. It identifies barriers to participation in DirigoChoice and summarizes employers' recommendations for future program improvements.

II. METHODS

In Fall 2005, the Dirigo Health Agency provided Muskie School staff with a list of Maine employers that fell into the following two groups: 1.) Withdrawals, including small business owners and sole proprietors who filed initial application papers for the DirigoChoice Plan but chose not to enroll after receiving a rate quote or at some other stage of the application process; and 2.) Disenrollees, employers who enrolled in DirigoChoice, but subsequently dropped their coverage or decided not to re-enroll at their anniversary date..

Different sampling strategies were used for each population. Research staff attempted to contact all disenrolled employers (N=59) with the understanding that many of them would be unreachable or would not be interested in being interviewed. Since the number of withdrawals was substantially larger, staff developed a protocol for sample selection that stratified the group by geographic region, business size and date of application. Employers with four or more workers were over-sampled, and only a handful of sole proprietors were included. The final sample of withdrawals included 25 small business owners and 5 sole proprietors.

Interviews were semi-structured and were conducted in March and April of 2006. Employers who withdrew their application from the program were asked to comment on their experiences gathering information on DirigoChoice, as well as their reasons for not purchasing the plan. Disenrolled employers were asked to share their initial motivations for enrolling in DirigoChoice, along with their reasons for

leaving the program. All informants were asked to comment on their past and current health insurance status and offer suggestions as to how the program could be improved to better meet their needs. Copies of interview protocols can be found in the Appendix.

Participants

In total, 29 interviews were completed; 11 with employers who withdrew their applications and 18 with employers who disenrolled from the plan. A number of employers were unreachable because their numbers were disconnected or no one picked up the phone (11 employers). In several instances, business ownership had changed hands and/or the original contact was no longer with the company, and a number of times the knowledgeable contact was not available or did not return phone calls. Very few employers refused to participate in the research once the study had been explained to them and they were already on the line.

Table 8 provides a breakdown of informants by location, business size and industry. Study participants were evenly distributed throughout the regions of the state and represented many different industries, with the largest representation coming from the construction/trades (8) and health/social services (5). The majority of participants (17) came from very small, often family-owned, business, with less than 5 full-time employees. Only four informants represented business with 10 or more employees.

Table 8. Characteristics of Employers Interviewed

	<u>Number</u>	<u>Percent</u>
Location within the state of Maine		
North	6	21%
Downeast	8	28%
West and central	8	28%
South	7	24%
Business Size*		
Less than 5	17	59%
5-9	5	17%
10-14	1	3%
15 or more	3	10%
Not reported	3	10%
Industry		
Agriculture	1	3%
Automotive	3	10%
Construction/trades	8	28%
Health/social services	5	17%
IT/computers	2	7%
Restaurant/lodging	1	3%
Retail goods/sales	4	14%
Other	3	10%
Not reported	2	7%

Note:

* Based on the number of full-time workers.

In addition to the individual characteristics mentioned above, it is worth noting that most of the employers contacted for this study operate within a sector of business that is especially vulnerable to the fluctuating costs of oil, health care and other taxes and insurance. This vulnerability was evidenced by the high number of attempted contacts whose businesses were no longer locatable and the relatively large share of disenrolled informants who cited a change in life circumstance, such as a decreased business profits or new business ownership, as their primary reason for dropping DirigoChoice.

Limitations of Findings

This study had several limitations that should be considered when interpreting the findings. While every effort was made to contact a diverse group of employers representing different business types, sizes and geographic regions, the sample was not necessarily representative and results can not be generalized to the larger population. Informants spoke of their own personal experiences which may or may not have been consistent with what other employers experienced. Furthermore, all participants in this study had either disenrolled from DirigoChoice or chosen not to enroll after applying for the program and receiving a rate quote. Thus, all study participants were individuals for whom DirigoChoice, for one reason or another, did not work out. Findings most likely would have been different if enrolled employers were interviewed.

Despite the study's limitations, results offer a detailed, personalized portrait of some employers' attitudes and barriers to enrollment in DirigoChoice. Employers were given the opportunity to speak on issues that they might not have felt comfortable discussing with health care providers or DirigoChoice staff and were given the opportunity to share suggestions for program modifications and improvements.

III. FINDINGS

Reasons Why Employers Drop or Do Not Select DirigoChoice

Cost: High cost was the number one complaint cited by both disenrollees and employers who were initially interested in the program, but decided not to enroll. Informants expressed concern about the rising, "out of control" cost of health care in general, particularly when combined with the rising price of fuel and other taxes and insurance costs that businesses have to pay. Many contacts who had health insurance before enrolling in DirigoChoice had subsequently switched to high deductibles plans, or had down-sized their coverage significantly in order to afford coverage at all. Many commented that they used to be able to afford insurance, but now could not, or could only purchase catastrophic plans. The hope of more affordable health care was largely cited as the primary reason for inquiring about DirigoChoice in the first place.

Nevertheless, many of those who did enroll or went so far as to receive a quote said that they expected greater cost savings than they actually experienced or were quoted. Employers repeatedly echoed the sentiment that they were under the impression that DirigoChoice would be less expensive than it was. For some employers, Dirigo's premiums were higher than anticipated and/or higher than what they had previously paid for private insurance. For others, it was the way the deductible was structured to exclude routine care or the twenty-percent copay, which several contacts felt was too high. A few employers mentioned that their staff did not qualify for financial discounts and that this made DirigoChoice less appealing.

The majority of employers who mentioned cost as a problem, however, were most discouraged that Dirigo's discounts did not extend to small business *employers*. One employer who had offered health insurance in the past, but who had not paid a share of his employees' premiums said that he had believed that business owners were also going to get some help, but added that maybe it was his fault for not paying better attention. Several others agreed that the plan did not live up to its original billing and that future advertising needs to be more realistic about how discounts are applied and what employers can expect to save. One woman who is part of a family owned and operated business felt that the plan was not as "friendly to small businesses" as it was marketed to be, and another said that she believed the product was "misrepresented" and said she felt "disheartened" by how much the plan cost employers.

A handful of employers specifically mentioned the required 60 percent employer contribution towards employees' premiums as one of the reasons they chose not to stay with the program.¹³ All of these business owners said it was more expensive than they could afford, and one man felt that it was unfair that it was mandatory and that he was being asked to pay a portion of his employee's coverage when he made only \$25,000 a year.

¹³ DirigoChoice requires employers are required to pay 60 percent of their employees' premium cost – but does not require an employer contribution toward dependent coverage.

Misinformation: Some employers were discouraged by the difficulty they encountered when they sought information about the program. Early interactions with Anthem and the Dirigo Agency were described as “uncoordinated” and “disjointed.” One woman explained that she felt like she was getting the run around between Dirigo and Anthem while another, who did not believe that the Anthem salespeople were well informed, said that she had to make numerous phone calls in order to get all her questions answered.

Other employers were able to access information, but found it to be insufficient, inaccurate or inconsistent with information they had already received. Areas where employers were particularly confused and where misinformation seems to have been common include (1) required rates of employee participation, (2) eligibility requirements for discounts and (3) services covered as part of the program’s benefit package.

Seasonal employers were particularly confused on how required rates of employee participation applied to their businesses, particularly when staff size and composition vary throughout the year. One owner of a seasonal construction business was well-along in the enrollment process when winter arrived and she had to lay off her crew. The representative she was working with (at either Anthem or Dirigo, she could not remember which) told her that her business was no longer eligible for the program and that if she wanted to enroll she would have to start the application from scratch. Other non-seasonal employers were also unclear on the minimum participation requirement. One business owner completed the DirigoChoice application and believed that his business had enrolled in the plan. He received program binders in the mail, cancelled his company’s prior insurance policy only to learn that his business was not in fact eligible for the plan because he had not met the employee participation targets.

Additionally, as mentioned above, small business owners did not always understand that their business was not eligible for deeper discounts. Most informants learned this detail as they gathered information on the plan, and many expressed anger and frustration that they had not been informed of this earlier.

Several informants reported difficulty getting information about the program’s benefit package, or cited instances in which they were provided with incorrect information about which services are and are not covered. In these latter instances, informants expressed disappointment that some of the services that they had expected to be covered were not. One man reported that he ended up paying for a physician-recommended colonoscopy that he had not thought he would have to pay for. Another employer cited the lack of prescription drug coverage as one of DirigoChoice’s shortcomings without realizing that this benefit is currently offered by the program.

Benefits: Aside from misinformation about benefits (discussed above), a few employers, particularly those who disenrolled from the program, felt that DirigoChoice’s benefits were not comprehensive enough, or they were disappointed that DirigoChoice did cover a specific service that had been covered under a previous plan. Lactation classes, chiropractic services and allergy shots were some of the specific benefits that informants had hoped would be covered under DirigoChoice. A couple of informants mentioned that they did not like the way the deductible was structured to include lab services and routine care. One woman said that if routine care had only required copayments she probably would have stuck with the plan. For her, having to pay for these services in full detracted from the program’s overall value.

Change in circumstance: About a third of the interviewed disenrolled employers said that their primary reason for dropping DirigoChoice was a change in life circumstance. Several informants mentioned that a spouse had recently started a new job and that they had switched to their spouse’s coverage because it was more affordable and/or more comprehensive. Another woman had just turned 65 and enrolled in Medicare. Besides the availability of new health insurance options, other circumstances that prompted

employers to disenroll from the program included changes in business ownership and decreased business profits and/or earnings.

In general, employers who disenrolled from DirigoChoice because of a change in circumstance differed from other interviewed disenrollees in that they tended to express satisfaction with the plan and reflect positively on what the program had to offer. Some even contemplated returning to the program if their situation changed. One man, now experiencing higher premiums and cost-sharing under his wife's health insurance plan, mentioned that he hoped Dirigo would continue to be available if his new benefits did not work out. Another business owner indicated that she planned on contacting Dirigo to reenroll as soon as her business picked up.

Competition: A handful of employers who dropped DirigoChoice did so because they found what they believed to be a "better, cheaper" product. These products varied in how they compared to DirigoChoice. Two employers switched to an Aetna product that had slightly higher premiums, but a lower deductible. Two others changed to an Anthem product that they described as being very similar to DirigoChoice except for a lower cap on out-of-pocket costs. An owner of a computer software company, who reported that his business could afford to provide employees with any of the standard private products, said that DirigoChoice did not stand out among other insurance products for businesses of his type. In general, informants who left the program for another health plan suggested that if DirigoChoice could better align itself with other products in the insurance market it would make it more competitive and also more appealing.

EBT card: A few former enrollees were unhappy with the way financial discounts are administered and wondered if there were other less cumbersome means of reimbursing enrollees. One person had to drive several communities away to find a credit union where he could get cash from his EBT card, and another thought it would be simpler if the discount was applied up front and subtracted from the original premium payment. One informant who considered the program, but did not enroll was upset by the stigma attached to the card. Initially, she did not see the program as a type of welfare, but the EBT card made it "hit home." She cited the card as a "deal breaker" and said it was the principal reason she did not enroll in the program.

Other: Other reasons mentioned by one or two employers included the following:

Physician participation and perception of the program: Although this was mentioned infrequently, it is worth noting that two informants were dissuaded from participating in the program because of the reception it received from doctors in their communities. In one instance, a doctor called DirigoChoice "glorified Medicaid" and, in another, an informant was told that her surgeon refused to work with Dirigo, even though he had a contract with Anthem. It does not seem that providers consistently reacted negatively to the program, however. At least one contact was attracted to the program because of the positive reception it received from doctors in the area.

Discount determination: Two people expressed concern over the discount determination process and its perceived lack of quality controls. As small business owners, neither of these individuals qualified for the discount program, and both were unclear as to the criteria for eligibility. One informant was under the impression that people were taking advantage of the financial discounts by not being forthright about their actual income. The other informant repeated this concern and relayed her surprise when she heard of certain people in her community who had met the eligibility requirements for a discount. "Some of them have new trucks and other assets," she said. "They must be hiding something because it doesn't make sense that they would qualify."

One informant believed that the government should not get involved in the private health insurance market and was unhappy with the program for this reason.

One informant disenrolled from the program as a sole proprietor, but had re-enrolled as an individual and was happy with the plan.

One woman disenrolled from the program when her husband got a new job. She was pleased with the health plan, but thought it had limited enrollment for small businesses and wanted to open slots to others who could benefit.

Table 9 summarizes these findings.

Table 9. Reasons Why Employers Drop or Do Not Select DirigoChoice

Reasons*	Total Number of Employers (N=29)
Cost	18
Misinformation	11
Benefits	8
Change in circumstance	6
Competition	6
EBT card	3
Other	7

Note:

* Includes all reasons mentioned. Informants often cited multiple reasons for disenrolling from DirigoChoice, or not purchasing the health plan after submitting an application.

Features of DirigoChoice that Remain Appealing to Employers

DirigoChoice can be a good deal for employees.

Even some of the employers who were discouraged by their own personal experience with DirigoChoice recognized that the product was a good value for their employees. Several informants commented on how pleased their workers were with the subsidies they were receiving, and a number of employers reported that they took some heat from their workforce when they decided to drop the plan.

Employers appreciate the government’s efforts to provide affordable healthcare to small businesses and individuals.

A number of disenrollees said that they continue to support the state’s attempt to change the health insurance system and are in favor of the idea of DirigoChoice even though they are no longer enrolled in the program. One woman who switched to an Anthem product because of its slightly lower out-of-pocket costs remarked that she felt badly about having “to bail on Dirigo”, particularly because she believes that DirigoChoice is a move in the right direction.

Insurance status of employers who disenroll or withdraw their application from DirigoChoice

Employers are struggling to maintain continuous coverage.

Nearly all employers spoke of the increasing costs of health insurance, and many who continue to provide coverage to their families and/or businesses report that they are constantly scrambling to find coverage they can afford. A number of employers who had health insurance before enrolling in DirigoChoice had recently switched to high deductibles plans or had down-sized their coverage significantly. Several other employers reported that they dropped coverage in recent years because the cost was too great to absorb. Interestingly, two informants (one who withdrew from DirigoChoice, the other who disenrolled) said that they currently receive coverage through an out-of-state option based in New York.

For many employers, DirigoChoice served as a ‘bridge’ between two insurance products.

Fifteen of nineteen employers who had insurance immediately prior to DirigoChoice continued to have insurance after they withdrew or disenrolled from the program. This finding is consistent with the notion that employers’ who have made a commitment to offering health insurance want to stand by that commitment, but must frequently switch plans in order to find coverage that is affordable. For the 15 employers for whom DirigoChoice served as a ‘bridge’ between two insurance products, DirigoChoice provided a coverage option until they either (a) picked up insurance through a spouse or public program and/or (b) found another insurance product which they considered to be of better value.

Employers who went without insurance before DirigoChoice were more likely to go without insurance after they disenrolled from or stopped considering the program.

Five of eight employers who were uninsured at the time they considered DirigoChoice remained uninsured after they disenrolled or withdrew from the program. This finding is consistent with previous research that suggests that employers who do not regularly offer health insurance coverage are less likely to offer it in the future, even with state support. In general, employers who went without insurance after DirigoChoice tended to own small family businesses (five of nine informants) or have workforces in which employees were part-time, insured through their spouses and/or young, primarily between the ages of eighteen and twenty-five. These findings are presented in Table 10.

Table 10. Insurance Status of Employers Who Disenroll or Withdraw from DirigoChoice (N=27)*

Prior Health Insurance Status	Current Health Insurance Status	
	Insured	Uninsured
<u>Insured</u> – at the time informant enrolled or gathered information on DirigoChoice	15	4
<u>Uninsured</u> – at the time informant enrolled or gathered information on DirigoChoice	3	5

Note:

* Two employers did not report their insurance status.

Employers' Suggestions for Program Improvement

In addition to sharing their perceptions of DirigoChoice, informants offered a number of suggestions on how the program could be improved to better meet the needs of Maine's small businesses. Suggestions included the following:

Explore the feasibility of offering incentives to employers.

Ensure that information provided by Anthem and the Dirigo Health Agency is consistent and well-coordinated, both regarding the program's benefit plan and its application process and eligibility rules.

Clarify the subsidy determination process.

Clarify eligibility requirements and application processes for seasonal business and other small businesses with high rates of employee turnover. In particular, more information is needed regarding how employee participation rates apply.

Explore new ways of administering the discount. The EBT card can be 'awkward' and inconvenient. Some people associate it with welfare.

Exclude routine care from the plan's deductible.

Reduce the costs of premiums and/or make it easier to qualify for discounts.

Rethink how advertising can better communicate what employers can expect to gain from DirigoChoice.

Make sure the plan is competitive with other products in the private insurance market. Several employers dropped DirigoChoice and switched to other commercial health plans which they described as only 'marginally' better.

PART III: SUMMARY OF MAJOR FINDINGS FROM DISENROLLEE SURVEYS AND EMPLOYER INTERVIEWS

Several major findings about the DirigoChoice program emerged from both the disenrollee survey and from the interviews with employers who withdrew applications or disenrolled from DirigoChoice.

Overall, disenrollment from DirigoChoice was low in the first year of program operation. In 2005, out of 4,022 new subscribers, only 746 (18 percent) ended or did not renew their coverage through DirigoChoice. This turnover rate is similar to that experienced in the individual and small group market, generally, and compares well to the experience of other programs targeted to low income individuals and small businesses.

A substantial proportion of study respondents reported that they left DirigoChoice not by choice, but due to a change in life circumstances. Most of these former members reported having a positive experience when they were enrolled in the program.

About a third of the interviewed employers said that their primary reason for dropping DirigoChoice was a change in life circumstance. These informants differed from other groups of disenrollees in that they tended to express satisfaction with the plan and reflect positively on what the program had to offer – mentioning specifically that they thought the program can be a good deal for employees and that they appreciate the government’s efforts to provide affordable healthcare. Some employers contemplated returning to the program if their situation changed.

In the survey, more than four in ten DirigoChoice members who disenrolled did not do so voluntarily, and left only because they left their job (24 percent), because their employer dropped DirigoChoice (16 percent) or because they were dropped by Dirigo (4 percent). Very few of the involuntary disenrollees expressed dissatisfaction with the DirigoChoice program; when asked, only 16% (n=13) said they would not have remained enrolled in Dirigo if circumstances had allowed it.

These “involuntary” disenrollees reinforce the perception that maintaining health insurance coverage is difficult for major segments of the small group market because of economic vulnerabilities and the disproportionate impact of small changes in employment in a small business.

By far, the most common reason given for disenrollment from DirigoChoice was high cost.

In the employer interviews, high cost was the number one complaint cited by both disenrollees and employers who withdrew their applications. Informants expected greater cost savings than they actually experienced or were quoted, and for the majority of employers who mentioned cost as a problem, their primary complaint was that Dirigo’s discounts did not extend to small business employers.

In the disenrollee survey, subscribers who left DirigoChoice voluntarily cited cost issues (premiums too expensive, deductible too high) most frequently as being important in their decision to leave the program. This was true across almost all contract types and discount groups. More than two thirds of all small group owners and sole proprietors mentioned one or more of the

three cost items (premiums too expensive, deductible too high, found a better rate) as being “Very” or “Somewhat important” in their decision to disenroll. The same was true of individuals and small group employees.

To a lesser extent, misinformation and lack of covered benefits were cited as important reasons for disenrollment. Because most respondents were early adopters of DirigoChoice, concerns expressed about misinformation may reflect issues related to start-up of the program.

Some employers reported in the interviews that they were discouraged by the difficulty they encountered when they sought information about DirigoChoice. Others were able to access information, but found it to be insufficient, inaccurate or inconsistent with information they had already received. Areas where misinformation seems to have been common include (1) required rates of employee participation, (2) eligibility requirements for discounts and (3) services covered as part of the program’s benefit package.

The same concerns about misinformation were echoed by some small group owners and sole proprietors in the disenrollee survey, where about one fourth cited “administrative hassles” as being important in their decision to leave Dirigo. These respondents specifically mentioned having difficulties with the reimbursement process, the amount of paperwork, the enrollment process, and confusion about coverage.

Aside from misinformation about benefits, a few employers felt that DirigoChoice’s benefits were not comprehensive enough, or were disappointed that DirigoChoice did cover a specific service that had been covered under a previous plan. A couple of informants did not like the way the deductible was structured to include lab services and routine care.

One subgroup in the survey for whom benefits were the most prevalent reason given for disenrollment was small group owners and sole proprietors in group F—those with no discount. More than half of the owners in Group F cited inadequate benefits as being important in their decision to disenroll.

Political issues related to negative press about the Savings Offset Payment or opposition from the Chamber of Commerce had minimal impact on decisions made by DirigoChoice subscribers to disenroll. However, concern about the program’s future was important to a significant minority of subscribers.

One in five voluntary disenrollees said that concern about the future of DirigoChoice was important in their decision to leave.

Fewer than 10 percent mentioned the Savings Offset Payment as being important, and less than 5 percent mentioned opposition from the Chamber of Commerce.

The majority of subscribers who disenrolled from DirigoChoice obtained other health coverage after leaving.

Almost three quarters of disenrollees in our sample obtained other health coverage after leaving, including 58 percent with private coverage and 14 percent with public coverage. Only 28 percent were uninsured.

In addition to directly reducing the number of uninsured in Maine by providing affordable coverage to previously uninsured enrollees, our findings suggest that DirigoChoice is serving to connect some uninsured individuals to the private market, and bridging a potential gap in coverage for some small employers.

Among disenrollees who were uninsured prior to enrollment in DirigoChoice, almost half (47 percent) obtained private coverage after they left. For these previously uninsured subscribers, DirigoChoice appears to have served as a bridge into the private insurance market.

For many employers who were interviewed, DirigoChoice served as a 'bridge' between two insurance products. Fifteen of nineteen employers who had insurance immediately prior to DirigoChoice continued to have insurance after they withdrew or disenrolled from the program. DirigoChoice provided a coverage option until they either (a) picked up insurance through a spouse or public program and/or (b) found another insurance product which they considered to be of better value.

In 2005, young adults and those without dependents were the most likely to disenroll from DirigoChoice. The disproportionate loss of young enrollees has negative financial implications for the program.

Analysis of all 2005 contracts indicated that 35 percent of subscribers between the ages of 18 and 24 terminated their contracts in 2005, versus only 22 percent among those age 25 – 44, and 13 percent among those age 45 or older.

Younger enrollees generally tend to be healthier and use fewer health care resources, and are therefore less expensive to cover on a per member per month basis. A continued process of selective attrition in which young, healthy individuals leave the program in disproportionate numbers could raise program costs making the program less attractive to employers, compelling DirigoChoice administrators to either increase subsidies or implement cost-cutting measures such as limiting covered benefits.

While a higher proportion of small group contract holders disenrolled in 2005 relative to individuals and sole proprietors, this difference can be attributed to the fact that enrollment did not open to individuals and sole proprietors until the second quarter.

21% of small groups terminated contracts in 2005, versus 17% of sole proprietors and 14% of individuals.

A multivariate analysis of all 2005 contracts showed that small group enrollees were no more likely to disenroll than sole proprietors or individuals, once their disproportionate enrollment in the first quarter was taken into account.

APPENDIX A-1: TERMINATION RATE AMONG ALL 2005 DIRIGOCHOICE ENROLLEES, BY TYPE AND SUBSCRIBER CHARACTERISTICS

	Termination Rate ¹ Within Category	All 2005 Subscribers (N=4,022)	Terminated Contracts in 2005 (N=716)
Contract Type**		%	%
Individual	14%	30%	23%
Small Group	21%	50%	58%
Sole Proprietor	17%	20%	19%
Member Gender			
Female	17%	48%	47%
Male	18%	52%	53%
Age at Enrollment**			
18 - 24	35%	7%	14%
25 - 34	23%	15%	20%
35 - 44	21%	21%	24%
> 45	13%	57%	41%
Discount Group**			
A (< 100% FPL)	48%	1%	2%
B (100 - 149% FPL)	14%	41%	33%
C (150 - 199% FPL)	21%	15%	18%
D (200 - 249% FPL)	21%	11%	12%
E (250 - 299% FPL)	23%	7%	9%
F (> 300% FPL)	18%	26%	26%
Effective Date**			
Q1 2005	30%	31%	51%
Q2 2005	14%	50%	40%
Q3 2005	10%	12%	7%
Q4 2005	4%	7%	2%
Number of Dependents**			
0 (Contract holder only)	19%	66%	71%
1	13%	19%	14%
2	19%	6%	7%
3	18%	5%	5%
4+	20%	3%	3%
County of Residence**			
Androscoggin	25%	6%	8%
Aroostook	15%	5%	4%
Cumberland	22%	20%	24%
Franklin	5%	3%	1%
Hancock	18%	5%	5%
Kennebec	22%	6%	8%
Knox	13%	5%	3%
Lincoln	15%	5%	4%
Oxford	20%	6%	7%
Penobscot	18%	9%	9%
Piscataquis	14%	1%	1%
Sagadahoc	15%	3%	3%
Somerset	28%	4%	6%
Waldo	17%	5%	4%
Washington	16%	2%	2%
York	12%	15%	10%

¹ Termination rate = Number of 2005 enrollees / Number of enrollees who terminated contracts in 2005

** Termination rate is not independent of this characteristic at p < .01

APPENDIX A-2: COX REGRESSION RESULTS MODELING HAZARD OF TERMINATING FROM DIRIGOCHOICE IN CALENDAR YEAR 2005 FOR ALL SUBSCRIBERS WITH EFFECTIVE DATE IN 2ND QUARTER, 2005 (N=2,001)

	Estimate	SE	Hazard Ratio ¹
Type			
Small Group	0.10146	0.15831	1.11
Sole Proprietor	-0.27222	0.22451	0.76
Individual			1.00
Gender			
Female	-0.09355	0.12771	0.91
Male			1.00
Age			
18 - 24	1.16452	0.18448	3.20 ***
25 - 34	0.61302	0.17937	1.85 ***
35 - 44	0.67648	0.16527	1.97 ***
45 and older			1.00
Discount Group			
B			1.00
C	0.35669	0.17347	1.43 *
D	0.29044	0.21453	1.34
E	0.22027	0.27829	1.25
F	0.1936	0.18432	1.21
Dependents			
None	0.48055	0.15377	1.62 ***
1 or more			1.00
County of Residence			
Androscoggin	0.75579	0.22521	2.13 ***
Cumberland	0.18727	0.15182	1.21
Kennebec	0.54104	0.22827	1.72 *
Somerset	1.04776	0.24538	2.85 ***
All others			1.00
N	2001		
-2 Log Likelihood	2729.02		
df	15		

*** p < .001 ; ** p < .01 ; * p < .05 ; + p < .10

Notes:

¹ The Hazard Ratio represents the risk of terminating from DirigoChoice relative to the reference category. For example, subscribers who were age 18-24 had 320% more risk of terminating in 2005 than those who were over age 45.

- Subscribers in discount group A (MaineCare eligible) were excluded from the sample.

- Only subscribers who enrolled in the 2nd quarter of 2005 were included because this was the only quarter when enrollment was open to all three coverage types (individual, sole prop & small group)

APPENDIX B: DIRIGOCHOICE DISENROLLEE SURVEY INSTRUMENT

Q1 Option

According to our records, you used to be enrolled in the Dirigo Choice plan, but you aren't any more, is this correct?

Q1	1 YES	Q4
Q1	2 NO	NEXT
Q1	8 DK	NEXT
Q1	9 NA	NEXT

Q2 Option

Do you mean you never enrolled, or do you mean you're still enrolled now?

Q2	1 NEVER ENROLLED	NEXT
Q2	2 STILL ENROLLED	END
Q2	8 DK	NEXT
Q2	9 NA	NEXT

Q3 Multiple Check

Why didn't you enroll in Dirigo?
(CHECK ALL THAT APPLY)

Q3a	1 COST TOO MUCH	LONGQ119
Q3b	2 EMPLOYER DIDN'T SIGN UP	LONGQ119
Q3c	3 NEW PRODUCT	LONGQ119
Q3d	4 UNSURE ABOUT FUTURE OF THE PLAN	LONGQ119
Q3e	5 EXCESSIVE PAPERWORK	LONGQ119
Q3f	6 ADMINISTRATIVE HASSLES	LONGQ119
Q3g	7 PROCESS TOOK TOO LONG	LONGQ119
Q3h	8 STIGMA	LONGQ119
Q3i	9 OTHER REASON(S)	LONGQ119
Q3j	10 Other (Specify)	LONGQ119
Q3k	11 DK	LONGQ119
Q3l	12 NA	LONGQ119

**** Selective skip on Q4- Q20: Ask only if R is a business owner or sole prop (\17=0)**

Q4 Option

Are you the person in charge of making decisions about health insurance for the business where you were working when you enrolled in Dirigo?

IWER: IF "NO", ASK: What's the name of the person who makes decisions about health insurance for that business?" AND WRITE THE NAME ON THE COVERSHEET.

- | | | |
|----|-------|------|
| Q4 | 1 YES | NEXT |
| Q4 | 2 NO | Q21 |
| Q4 | 8 DK | Q21 |
| Q4 | 9 NA | Q21 |

Q5 Option

Now I'll read a list of possible reasons why you may have dropped the Dirigo health plan. Please tell me how important each one was in your decision to drop Dirigo. First- the employer share of the premiums was too expensive. How important was this in your decision to drop Dirigo? Was it . . .

- | | | |
|----|--------------------------|------|
| Q5 | 1 very important | NEXT |
| Q5 | 2 somewhat important, or | NEXT |
| Q5 | 3 not at all important | NEXT |
| Q5 | 8 DK | NEXT |
| Q5 | 9 NA | NEXT |

Q6 Option

Next- you found a better rate with another insurance plan. How important was this in your decision to drop Dirigo? Was it . . .

- | | | |
|----|--------------------------|------|
| Q6 | 1 very important | NEXT |
| Q6 | 2 somewhat important, or | NEXT |
| Q6 | 3 not at all important | NEXT |
| Q6 | 8 DK | NEXT |
| Q6 | 9 NA | NEXT |

Q7 **SKIP IF SOLE PROP (\16=0)** Option

There were not enough employees who signed up for Dirigo. How important was this in your decision to drop Dirigo? Was it . . .

- | | | |
|----|--------------------------|------|
| Q7 | 1 very important | NEXT |
| Q7 | 2 somewhat important, or | NEXT |
| Q7 | 3 not at all important | NEXT |
| Q7 | 8 DK | NEXT |
| Q7 | 9 NA | NEXT |

Q8 SKIP IF SOLE PROP (I16=0)

Option

Your employees complained or said they didn't like Dirigo. How important was this in your decision to drop Dirigo? Was it . . .

Q8	1 very important	NEXT
Q8	2 somewhat important, or	NEXT
Q8	3 not at all important	NEXT
Q8	8 DK	NEXT
Q8	9 NA	NEXT

Q9

Option

You were concerned that Dirigo wouldn't last very long. How important was this in your decision to drop Dirigo? Was it . . .

Q9	1 very important	NEXT
Q9	2 somewhat important, or	NEXT
Q9	3 not at all important	NEXT
Q9	8 DK	NEXT
Q9	9 NA	NEXT

Q10

Option

You didn't like the savings offset payment. How important was this in your decision to drop Dirigo? Was it . . .

Q10	1 very important	NEXT
Q10	2 somewhat important, or	NEXT
Q10	3 not at all important	NEXT
Q10	8 DK	NEXT
Q10	9 NA	NEXT

Q11

Option

The Chamber of Commerce opposed the plan. How important was this in your decision to drop Dirigo? Was it . . .

Q11	1 very important	NEXT
Q11	2 somewhat important, or	NEXT
Q11	3 not at all important	NEXT
Q11	8 DK	NEXT
Q11	9 NA	NEXT

Q12

Option

Problems with the reimbursement process. How important was this in your decision to drop Dirigo?
Was it . . .

- Q12 1 very important NEXT
- Q12 2 somewhat important, or NEXT
- Q12 3 not at all important NEXT
- Q12 8 DK NEXT
- Q12 9 NA NEXT

Q13

Option

Dirigo was too much of a hassle. How important was this in your decision to drop Dirigo?
Was it . . .

- Q13 1 very important NEXT
- Q13 2 somewhat important, or NEXT
- Q13 3 not at all important Q15
- Q13 8 DK Q15
- Q13 9 NA Q15

Q14

Multiple Check

What was too much of a hassle?

- Q14a 1 THE ENROLLMENT PROCESS NEXT
- Q14b 2 THE ELIGIBILITY RULES NEXT
- Q14c 3 TOO COMPLICATED NEXT
- Q14d 4 TOO MUCH PAPERWORK NEXT
- Q14e 5 THE REIMBURSEMENT PROCESS NEXT
- Q14f 6 SOMETHING ELSE - OTHER NEXT
- Q14g 7 Other NEXT
- Q14h 8 DK NEXT
- Q14i 9 NA NEXT

Q15

Option

{Q13=1 OR Q13=2}{And how important were these reasons. First, you don't like public programs or social programs. Was that . . . }{You don't like public programs or social programs. How important was this in your decision to drop Dirigo?
Was it . . . }

- Q15 1 very important NEXT
- Q15 2 somewhat important, or NEXT
- Q15 3 not at all important NEXT
- Q15 8 DK NEXT
- Q15 9 NA NEXT

Q16

Option

You didn't like the insurance company. How important was this in your decision to drop Dirigo?
Was it . . .

- Q16 1 very important NEXT
- Q16 2 somewhat important, or NEXT
- Q16 3 not at all important NEXT
- Q16 8 DK NEXT
- Q16 9 NA NEXT

Q17

Option

The deductible was too high. How important was this in your decision to drop Dirigo?
Was it . . .

- Q17 1 very important NEXT
- Q17 2 somewhat important, or NEXT
- Q17 3 not at all important NEXT
- Q17 8 DK NEXT
- Q17 9 NA NEXT

Q18

Option

The benefits didn't cover the services that you needed. How important was this in your decision to drop Dirigo? Was it . . .

- Q18 1 very important NEXT
- Q18 2 somewhat important, or NEXT
- Q18 3 not at all important NEXT
- Q18 8 DK NEXT
- Q18 9 NA NEXT

Q19

Option

Was there anything else about Dirigo BENEFITS AND COVERAGE that you were unhappy with?

- Q19 1 YES NEXT
- Q19 2 NO Q40
- Q19 8 DK Q40
- Q19 9 NA Q40

Q20

Text Entry

What were you unhappy with?

- Q20 0 RESPONSE (8=DK, 9=NA) Q40

Q21 Option

First we have a few questions about the Dirigo plan that you used to have.

Did you disenroll from Dirigo voluntarily, did your employer drop the plan, or were you dropped by Dirigo?

Q21	1	DISENROLLED VOLUNTARILY	Q23
Q21	2	EMPLOYER DROPPED DIRIGO	Q26
Q21	3	DROPPED BY DIRIGO	NEXT
Q21	8	DK	NEXT
Q21	9	NA	NEXT

Q22 Option

If Dirigo had not dropped you, would you have remained on Dirigo?

Q22	1	YES	Q42
Q22	2	NO	Q27
Q22	8	DK	Q27
Q22	9	NA	Q42
Q22	3	MAYBE/DEPENDS	Q27

Q23 Option

Is the reason you are no longer enrolled in Dirigo because you left the job that provided the coverage?

Q23	1	YES	NEXT
Q23	2	NO	Q25
Q23	8	DK	Q25
Q23	9	NA	Q25

Q24 Option

If you had not left that job, would you have remained on Dirigo?

Q24	3	MAYBE/DEPENDS	Q27
Q24	1	YES	Q42
Q24	2	NO	Q27
Q24	8	DK	Q27
Q24	9	NA	Q42

Q25 Option

Is the reason you are no longer enrolled in Dirigo because your employer dropped the plan?

Q25	1	YES	NEXT
Q25	2	NO	Q28
Q25	8	DK	Q42
Q25	9	NA	Q42

Q26 Option

If your employer had not dropped the plan, would you have remained on Dirigo?

Q26	1 YES	Q42
Q26	2 NO	NEXT
Q26	8 DK	NEXT
Q26	9 NA	Q42
Q26	3 MAYBE/DEPENDS	NEXT

Q27 Multiple Check

So, you were thinking about leaving Dirigo. Please tell me why you were thinking about leaving Dirigo.
(CHECK ALL THAT APPLY)

Q27a	1 UNCERTAINTY ABOUT THE FUTURE OF DIRIGO	Q42
Q27b	2 PREMIUMS OR COPAYS TOO EXPENSIVE	Q42
Q27c	3 DEDUCTIBLE TOO HIGH	Q42
Q27d	4 BILLING, CLAIMS OR ADMINISTRATIVE HASSLES	Q42
Q27e	5 REIMBURSEMENT PROCESS / EBT CARD PROBLEMS	Q42
Q27f	6 BAD COVERAGE / SERVICE I NEED NOT COVERED	Q42
Q27g	7 RENEWAL, ENROLLMENT PROCESS TOO COMPLICATED / BUREAUCRATIC	Q42
Q27h	8 BAD COMMUNICATION /HARD TO GET ANSWERS /POOR CUSTOMER SERVICE	Q42
Q27i	9 CANCELLED IF LATE PREMIUM /DROP PEOPLE WHO DON'T PAY	Q42
Q27j	10 CANCELLED COVERAGE WITHOUT BEING TOLD WHY	Q42
Q27k	11 BAD PUBLICITY /TOO POLITICAL	Q42
Q27l	12 OTHER (SPECIFY)	Q42
Q27m	13 Other	Q42
Q27n	98 DK	Q42
Q27o	99 NA	Q42

Q28 Option

Now I'll read a list of possible reasons why you may have dropped the Dirigo health plan.

Please tell me how important each one was in your decision to drop Dirigo. First- the amount you paid for the premium was more then you could afford. How important was this in your decision to drop Dirigo?

Was it . . .

Q28	1 very important	NEXT
Q28	2 somewhat important, or	NEXT
Q28	3 not at all important	Q32
Q28	8 DK	Q32
Q28	9 NA	Q32

Q29

Option

Next- your income went up and your share of the premium went up. How important was this in your decision to drop Dirigo? Was it . . .

Q29	1 very important	Q31
Q29	2 somewhat important, or	Q31
Q29	3 not at all important	NEXT
Q29	8 DK	NEXT
Q29	9 NA	NEXT

Q30

Option

Your income went down and you could no longer afford to remain on the plan. How important was this in your decision to drop Dirigo? Was it . . .

Q30	1 very important	NEXT
Q30	2 somewhat important, or	NEXT
Q30	8 DK	Q32
Q30	9 NA	Q32
Q30	3 not at all important	NEXT

Q31

Option

How often was paying the premium difficult for you financially? Was it . . .

Q31	1 almost always	NEXT
Q31	2 fairly often, or	NEXT
Q31	3 only occasionally?	NEXT
Q31	8 DK	NEXT
Q31	9 NA	NEXT

Q32

Option

It was too much of a hassle. How important was this in your decision to drop Dirigo? Was it . . .

Q32	1 very important	NEXT
Q32	2 somewhat important, or	NEXT
Q32	8 DK	Q34
Q32	9 NA	Q34
Q32	3 not at all important	Q34

Q33

Multiple Check

What was too much of a hassle?
(CHECK ALL THAT APPLY)

Q33a	1 THE ENROLLMENT PROCESS	NEXT
Q33b	2 THE ELIGIBILITY RULES	NEXT
Q33c	3 TOO COMPLICATED	NEXT
Q33d	4 TOO MUCH PAPERWORK	NEXT
Q33e	5 THE REIMBURSEMENT PROCESS	NEXT
Q33f	6 SOMETHING ELSE- OTHER (SPECIFY)	NEXT
Q33g	7 Other	NEXT
Q33h	8 DK	NEXT
Q33i	9 NA	NEXT

Q34

Option

{Q32=1 OR Q32=2}{And how important were these reasons. First, you don't like public programs or social programs. Was that . . . }{You don't like public programs or social programs. How important was this in your decision to drop Dirigo? Was it . . . }

Q34	1 very important	NEXT
Q34	2 somewhat important, or	NEXT
Q34	8 DK	NEXT
Q34	9 NA	NEXT
Q34	3 not at all important	NEXT

Q35

Option

You didn't like the insurance company. How important was this in your decision to drop Dirigo?
Was it . . .

Q35	1 very important	NEXT
Q35	2 somewhat important, or	NEXT
Q35	8 DK	NEXT
Q35	9 NA	NEXT
Q35	3 not at all important	NEXT

Q36

Option

The deductible was too high. How important was this in your decision to drop Dirigo?
Was it . . .

Q36	1 very important	NEXT
Q36	2 somewhat important, or	NEXT
Q36	8 DK	NEXT
Q36	9 NA	NEXT
Q36	3 not at all important	NEXT

Q37

Option

The benefits didn't cover the services you needed. How important was this in your decision to drop Dirigo?
Was it . . .

Q37 1 very important NEXT

Q37 2 somewhat important, or NEXT

Q37 8 DK NEXT

Q37 9 NA NEXT

Q37 3 not at all important NEXT

Q38

Option

Was there anything else about Dirigo BENEFITS AND COVERAGE that you were unhappy with?

Q38 1 YES NEXT

Q38 2 NO Q40

Q38 8 DK Q40

Q38 9 NA Q40

Q39

Text Entry

What were you unhappy with?

Q39 0 RESPONSE (8=DK, 9=NA) Q40

Q40

Option

Was there any other reason why you left the Dirigo plan?

Q40 1 YES NEXT

Q40 2 NO Q42

Q40 8 DK Q42

Q40 9 NA Q42

Q41

Text Entry

What was that reason?

Q41 0 REASON (8=DK, 9=NA) NEXT

Q42

Option

Briefly, what would you say was the best thing about Dirigo Choice?

- | | | |
|-----|-----------------------------------------------------------------|------|
| Q42 | 5 ACCESS TO DOCTORS AND SPECIALISTS/CHOICE OF DOCTORS | Q44 |
| Q42 | 6 GOOD DOCTORS/GOOD MEDICAL CARE | Q44 |
| Q42 | 7 PRESCRIPTION COVERAGE | Q44 |
| Q42 | 8 FEW HASSLES/NO HASSLES | Q44 |
| Q42 | 9 BETTER THAN MAINECARE/MEDICAID | Q44 |
| Q42 | 10 OTHER | NEXT |
| Q42 | 98 DK | Q44 |
| Q42 | 99 NA | Q44 |
| Q42 | 2 AFFORDABLE/CHEAP/FREE/COVERAGE FOR PEOPLE WHO CAN'T AFFORD IT | Q44 |
| Q42 | 3 GOOD COVERAGE/COMPREHENSIVE COVERAGE | Q44 |
| Q42 | 4 BETTER THAN PRIOR COVERAGE | Q44 |
| Q42 | 1 JUST THAT I HAD INS/WOULDN'T HAVE INS WITHOUT IT | Q44 |

Q43

Text Entry

What was the best thing about Dirigo Choice?

- | | | |
|-----|---------------------|------|
| Q43 | 0 BEST (8=DK, 9=NA) | NEXT |
|-----|---------------------|------|

Q44 Option

And briefly, what was the worst thing about Dirigo Choice?

Q44	1 UNCERTAINTY ABOUT THE FUTURE OF DIRIGO	Q46
Q44	2 PREMIUMS OR COPAYS TOO EXPENSIVE	Q46
Q44	3 DEDUCTIBLE TOO HIGH	Q46
Q44	4 BILLING, CLAIMS OR ADMINISTRATIVE HASSLES	Q46
Q44	5 REIMBURSEMENT PROCESS /EBT CARD PROBLEMS	Q46
Q44	6 BAD COVERAGE /SERVICE I NEED NOT COVERED	Q46
Q44	7 RENEWAL, ENROLLMENT PROCESS TOO COMPLICATED /BUREAUCRATIC	Q46
Q44	8 BAD COMMUNICATION /HARD TO GET ANSWERS /POOR CUSTOMER SERVICE	Q46
Q44	9 CANCELLED IF LATE PREMIUM /DROP PEOPLE WHO DONT PAY	Q46
Q44	10 CANCELLED COVERAGE WITHOUT BEING TOLD WHY	Q46
Q44	11 BAD PUBLICITY / TOO POLITICAL	Q46
Q44	12 OTHER	NEXT
Q44	98 DK	Q46
Q44	99 NA	Q46

Q45 Text Entry

What was the worst thing about Dirigo?

Q45	0 WORST (8=DK, 9=NA)	NEXT
-----	----------------------	------

Q46 Option

Are you currently covered by any other health insurance plan, including HMOs, government plans, MaineCare and so on?

Q46	1 YES	NEXT
Q46	2 NO	Q48
Q46	8 DK	Q48
Q46	9 NA	Q48

Q47

Multiple Check

What is that coverage?
(CHECK ALL THAT APPLY)

- Q47a 1 MEDICARE ONLY NEXT
- Q47b 2 MEDICARE PLUS SUPPLEMENTAL NEXT
- Q47c 3 MAINECARE/MEDICAID NEXT
- Q47d 4 CUB CARE NEXT
- Q47e 5 MILITARY OR VA NEXT
- Q47f 6 INSURANCE OBTAINED THRU AN EMPLOYER NEXT
- Q47g 7 PURCHASED DIRECTLY FROM INSURER NEXT
- Q47h 8 OTHER (SPECIFY) NEXT
- Q47i 9 Other COVERAGE NEXT
- Q47j 98 DK NEXT
- Q47k 99 NA NEXT

****Skip Q48 and Q49 if no spouse/partner (13=None)**

Q48

Option

According to our records, when you enrolled in Dirigo, you also enrolled \3.
Is s/he currently covered by any other health insurance plan, including HMOs, government plans, MaineCare and so on?

- Q48 1 YES NEXT
- Q48 2 NO Q50
- Q48 8 DK Q50
- Q48 9 NA Q50
- Q48 3 S/HE WASN'T ENROLLED Q50

Q49

Multiple Check

What is that coverage?
(CHECK ALL THAT APPLY)

- Q49a 1 MEDICARE ONLY NEXT
- Q49b 2 MEDICARE PLUS SUPPLEMENTAL NEXT
- Q49c 3 MAINECARE/MEDICAID NEXT
- Q49d 4 CUB CARE NEXT
- Q49e 5 DIRIGO NEXT
- Q49f 6 MILITARY OR VA NEXT
- Q49g 7 INSURANCE OBTAINED THRU AN EMPLOYER NEXT
- Q49h 8 PURCHASED DIRECTLY FROM INSURER NEXT
- Q49i 9 OTHER (SPECIFY) NEXT
- Q49j 10 Other COVERAGE NEXT
- Q49k 98 DK NEXT
- Q49l 99 NA NEXT

****Skip Q50 and Q51 if no child/dependent #1 (I5=none)**

Q50 Option

And how about I5, is s/he currently covered by any other health insurance plan, including HMOs, government plans, MaineCare and so on?

Q50	1 YES	NEXT
Q50	2 NO	Q52
Q50	8 DK	Q52
Q50	9 NA	Q52
Q50	3 S/HE WASN'T ENROLLED	Q52

Q51 Multiple Check

What is that coverage?
(CHECK ALL THAT APPLY)

Q51a	1 MEDICARE ONLY	NEXT
Q51b	2 MEDICARE PLUS SUPPLEMENTAL	NEXT
Q51c	3 MAINECARE/MEDICAID	NEXT
Q51d	4 CUB CARE	NEXT
Q51e	5 DIRIGO	NEXT
Q51f	6 MILITARY OR VA	NEXT
Q51g	7 INSURANCE OBTAINED THRU AN EMPLOYER	NEXT
Q51h	8 PURCHASED DIRECTLY FROM INSURER	NEXT
Q51i	9 OTHER (SPECIFY)	NEXT
Q51j	10 Other COVERAGE	NEXT
Q51k	98 DK	NEXT
Q51l	99 NA	NEXT

****Skip Q52 and Q53 if no child/dependent #2 (I7=none)**

Q52 Option

And how about I7, is s/he currently covered by any other health insurance plan . . . ?

Q52	1 YES	NEXT
Q52	2 NO	Q54
Q52	8 DK	Q54
Q52	9 NA	Q54
Q52	3 S/HE WASN'T ENROLLED	Q54

Q53

Multiple Check

What is that coverage?
(CHECK ALL THAT APPLY)

- Q53a 1 MEDICARE ONLY NEXT
- Q53b 2 MEDICARE PLUS SUPPLEMENTAL NEXT
- Q53c 3 MAINECARE/MEDICAID NEXT
- Q53d 4 CUB CARE NEXT
- Q53e 5 DIRIGO NEXT
- Q53f 6 MILITARY OR VA NEXT
- Q53g 7 INSURANCE OBTAINED THRU AN EMPLOYER NEXT
- Q53h 8 PURCHASED DIRECTLY FROM INSURER NEXT
- Q53i 9 OTHER (SPECIFY) NEXT
- Q53j 10 Other COVERAGE NEXT
- Q53k 98 DK NEXT
- Q53l 99 NA NEXT

****Skip Q54 and Q55 if no child/dependent #3 (19=none)**

Q54

Option

And 19, is s/he currently covered by any other health insurance plan . . . ?

- Q54 1 YES NEXT
- Q54 2 NO Q56
- Q54 8 DK Q56
- Q54 9 NA Q56
- Q54 3 S/HE WASN'T ENROLLED Q56

Q55

Multiple Check

What is that coverage?
(CHECK ALL THAT APPLY)

- Q55a 1 MEDICARE ONLY NEXT
- Q55b 2 MEDICARE PLUS SUPPLEMENTAL NEXT
- Q55c 3 MAINECARE/MEDICAID NEXT
- Q55d 4 CUB CARE NEXT
- Q55e 5 DIRIGO NEXT
- Q55f 6 MILITARY OR VA NEXT
- Q55g 7 INSURANCE OBTAINED THRU AN EMPLOYER NEXT
- Q55h 8 PURCHASED DIRECTLY FROM INSURER NEXT
- Q55i 9 OTHER (SPECIFY) NEXT
- Q55j 10 Other COVERAGE NEXT
- Q55k 98 DK NEXT
- Q55l 99 NA NEXT

****Skip Q56 and Q57 if no child/dependent #4 (\11=none)**

Q56

Option

And \11, is s/he currently covered by any other health insurance plan . . . ?

Q56	1 YES	NEXT
Q56	2 NO	Q58
Q56	8 DK	Q58
Q56	9 NA	Q58
Q56	3 S/HE WASN'T ENROLLED	Q58

Q57

Multiple Check

What is that coverage?
(CHECK ALL THAT APPLY)

Q57a	1 MEDICARE ONLY	NEXT
Q57b	2 MEDICARE PLUS SUPPLEMENTAL	NEXT
Q57c	3 MAINECARE/MEDICAID	NEXT
Q57d	4 CUB CARE	NEXT
Q57e	5 DIRIGO	NEXT
Q57f	6 MILITARY OR VA	NEXT
Q57g	7 INSURANCE OBTAINED THRU AN EMPLOYER	NEXT
Q57h	8 PURCHASED DIRECTLY FROM INSURER	NEXT
Q57i	9 OTHER (SPECIFY)	NEXT
Q57j	10 Other COVERAGE	NEXT
Q57k	98 DK	NEXT
Q57l	99 NA	NEXT

****Skip Q58 and Q59 if no child/dependent #5 (\13=none)**

Q58

Option

And \13, is s/he currently covered by any other health insurance plan . . . ?

Q58	1 YES	NEXT
Q58	2 NO	Q60
Q58	8 DK	Q60
Q58	9 NA	Q60
Q58	3 S/HE WASN'T ENROLLED	Q60

Q59

Multiple Check

What is that coverage?
(CHECK ALL THAT APPLY)

- Q59a 1 MEDICARE ONLY NEXT
- Q59b 2 MEDICARE PLUS SUPPLEMENTAL NEXT
- Q59c 3 MAINECARE/MEDICAID NEXT
- Q59d 4 CUB CARE NEXT
- Q59e 5 DIRIGO NEXT
- Q59f 6 MILITARY OR VA NEXT
- Q59g 7 INSURANCE OBTAINED THRU AN EMPLOYER NEXT
- Q59h 8 PURCHASED DIRECTLY FROM INSURER NEXT
- Q59i 9 OTHER (SPECIFY) NEXT
- Q59j 10 Other COVERAGE NEXT
- Q59k 98 DK NEXT
- Q59l 99 NA NEXT

Q60

Option

**** ONLY ASK IF R CURRENTLY HAS INSURANCE: (Selective skip Q46>1)**

Overall, how does the COST for your CURRENT health insurance plan compare to the cost of Dirigo?
Would you say it costs . . .

- Q60 1 much less than Dirigo NEXT
- Q60 2 somewhat less than Dirigo NEXT
- Q60 3 about the same NEXT
- Q60 4 somewhat more, or NEXT
- Q60 5 much more than Dirigo? NEXT
- Q60 8 DK NEXT
- Q60 9 NA NEXT

Q61

Option

**** ONLY ASK IF R CURRENTLY HAS INSURANCE: (Selective skip Q46>1)**

And overall, how does the COVERAGE under your CURRENT health insurance plan compare to the coverage you had under Dirigo? Would you say it is . . .

- Q61 1 much better than Dirigo NEXT
- Q61 2 somewhat better than Dirigo NEXT
- Q61 3 about the same NEXT
- Q61 4 somewhat worse, or NEXT
- Q61 5 much worse than Dirigo NEXT
- Q61 8 DK NEXT
- Q61 9 NA NEXT

Q62 Option

Now I have a few questions about you and your family.
In general, would you say your health is . . .

Q62	1 excellent	NEXT
Q62	2 good	NEXT
Q62	3 fair, or	NEXT
Q62	4 poor	NEXT
Q62	8 DK	NEXT
Q62	9 NA	NEXT

Q63 Option

Does anyone in your household have a chronic health condition?

Q63	1 YES	NEXT
Q63	2 NO	NEXT
Q63	8 DK	NEXT
Q63	9 NA	NEXT

Q64 Option

Do you currently have a spouse or partner living with you?

Q64	1 YES	NEXT
Q64	2 NO	NEXT
Q64	8 DK	NEXT
Q64	9 NA	NEXT

Q65 Option

Do you currently have any children living in your home?

Q65	1 YES	NEXT
Q65	2 NO	NEXT
Q65	8 DK	NEXT
Q65	9 NA	NEXT

Q66 Option

Is there anyone living in your household who IS CURRENTLY covered by Dirigo?

Q66	1 YES	NEXT
Q66	2 NO	Q68
Q66	8 DK	Q68
Q66	9 NA	Q68

Q67

Multiple Check

Who is currently covered by Dirigo?
(CHECK ALL THAT APPLY)

Q67a	1 SPOUSE/PARTNER	NEXT
Q67b	2 CHILD	NEXT
Q67c	3 PARENT	NEXT
Q67d	4 OTHER	NEXT
Q67e	8 DK	NEXT
Q67f	9 NA	NEXT

Q68

Option

How did you first hear about Dirigo Choice?

Q68	1 INSURANCE BROKER	Q70
Q68	2 MY EMPLOYER	Q70
Q68	3 DHHS OFFICE	Q70
Q68	4 HEALTH CARE PROVIDER	Q70
Q68	5 NEWSPAPER/RADIO/TV	Q70
Q68	6 LEAFLET SENT HOME FROM SCHOOL	Q70
Q68	7 OTHER	NEXT
Q68	8 DK	Q70
Q68	9 NA	Q70

Q69

Text Entry

What was that other place?

Q69	0 SOURCE (8=DK, 9=NA)	NEXT
-----	-----------------------	------

Q70

Option

What was the main reason you enrolled in Dirigo Choice?

Q70	1 IT WAS THE ONLY OPTION MY EMPLOYER OFFERED	Q72
Q70	2 THE COST OF THE PLAN	Q72
Q70	3 THE COVERAGE PROVIDED	Q72
Q70	4 IT WAS BETTER THAN THE PLAN I WAS ON	Q72
Q70	5 A FAMILY MEMBER NEEDED HEALTH CARE	Q72
Q70	6 FEEL MORE SECURE HAVING COVERAGE	Q72
Q70	7 OTHER REASON	NEXT
Q70	8 DK	Q72
Q70	9 NA	Q72

Q71 Text Entry

What is that other reason?

Q71 0 REASON (8=DK, 9=NA) NEXT

Q72 Option

{19=1}{WE INTERVIEWED THIS PERSON BEFORE- - CHECK 1}{WE HAVE NOT INTERVIEWED THIS PERSON BEFORE- - CHECK 2}

Q72 1 INTERVIEWED BEFORE LONGQ119
Q72 2 NOT INTERVIEWED BEFORE NEXT

Q73 Option

Now, thinking back to when you enrolled in Dirigo, were you covered by any other health insurance plan, including HMOs, government plans, MaineCare and so on?

Q73 1 YES NEXT
Q73 2 NO Q79
Q73 8 DK Q82
Q73 9 NA Q82

Q74 Multiple Check

What was that coverage?
IWER NOTE! IF R DOESN'T MENTION COBRA, ALWAYS ASK "Did you have COBRA?"
(CHECK ALL THAT APPLY)

Q74a 1 ANTHEM BC/BS NEXT
Q74b 2 AETNA NEXT
Q74c 3 NASE (NATL ASSOC OF SELF EMPL.) NEXT
Q74d 4 MEGALIFE NEXT
Q74e 5 CIGNA NEXT
Q74f 6 COBRA Q77
Q74g 7 MAINECARE/MEDICAID Q78
Q74h 8 MEDICARE ONLY Q78
Q74i 9 MEDICARE PLUS SUPPLEMENTAL Q78
Q74j 10 MILITARY OR VA Q78
Q74k 11 CUB CARE Q78
Q74l 12 OTHER COVERAGE NEXT
Q74m 13 other COVERAGE (Specify) NEXT
Q74n 98 DK NEXT
Q74o 99 NA NEXT

****Do not ask Q75 & Q76 if R is Sole Prop (I20=sole prop)**

Q75 Option

Was that coverage obtained through an employer?

Q75	1 YES	NEXT
Q75	2 NO	Q78
Q75	8 DK	Q78
Q75	9 NA	Q78

Q76 Option

Was that employer the same as your current employer?

Q76	1 YES	NEXT
Q76	2 NO	Q78
Q76	8 DK	Q78
Q76	9 NA	Q78

Q77 Option

Did you choose Dirigo Choice because your COBRA coverage would end soon?

Q77	1 YES	NEXT
Q77	2 NO	NEXT
Q77	8 DK	NEXT
Q77	9 NA	NEXT
Q77	3 DIDN'T HAVE COBRA	NEXT

Q78 Option

Thinking about the year before you enrolled in Dirigo, was there any time during that year that you were NOT covered by any health insurance plan?

Q78	1 YES	Q81
Q78	2 NO	Q81
Q78	8 DK	Q81
Q78	9 NA	Q81

Q79 Option

How long were you uninsured? Would you say . . .

Q79	1 less than 6 months	NEXT
Q79	2 6 months to 1 year, or	NEXT
Q79	3 more than 1 year	Q82
Q79	8 DK	Q82
Q79	9 NA	Q82

Q80

Multiple Check

When you WERE insured, what was that coverage?
(CHECK ALL THAT APPLY)

- Q80a 1 ANTHEM BC/BS NEXT
- Q80b 2 AETNA NEXT
- Q80c 3 NASE (NATL ASSOC OF SELF EMPL.) NEXT
- Q80d 4 MEGALIFE NEXT
- Q80e 5 CIGNA NEXT
- Q80f 6 COBRA NEXT
- Q80g 7 MAINECARE/MEDICAID NEXT
- Q80h 8 MEDICARE ONLY NEXT
- Q80i 9 MEDICARE PLUS SUPPLEMENTAL NEXT
- Q80j 10 MILITARY OR VA NEXT
- Q80k 11 CUB CARE NEXT
- Q80l 12 OTHER COVERAGE NEXT
- Q80m 13 other COVERAGE (Specify) NEXT
- Q80n 98 DK NEXT
- Q80o 99 NA NEXT

Q81

Option

Was your previous health insurance coverage just for you, or were other people covered on the same plan?

- Q81 1 INDIVIDUAL NEXT
- Q81 2 FAMILY NEXT
- Q81 8 DK NEXT
- Q81 9 NA NEXT

****Skip Q82- Q85 if no spouse/partner (\3=None)**

Q82

Option

When you enrolled in Dirigo, was \3 covered by any other health insurance plan, including HMOs, government plans, MaineCare, Medicare and so on?

- Q82 1 YES NEXT
- Q82 2 NO Q85
- Q82 8 DK Q86
- Q82 9 NA Q86

Q83

Multiple Check

What was that coverage?
(CHECK ALL THAT APPLY)

Q83a	1 ANTHEM BC/BS	NEXT
Q83b	2 AETNA	NEXT
Q83c	3 NASE (NATL ASSOC OF SELF EMPL.)	NEXT
Q83d	4 MEGALIFE	NEXT
Q83e	5 CIGNA	NEXT
Q83f	6 COBRA	NEXT
Q83g	7 MAINECARE/MEDICAID	NEXT
Q83h	8 MEDICARE ONLY	NEXT
Q83i	9 MEDICARE PLUS SUPPLEMENTAL	NEXT
Q83j	10 MILITARY OR VA	NEXT
Q83k	11 CUB CARE	NEXT
Q83l	12 OTHER COVERAGE	NEXT
Q83m	13 other COVERAGE	NEXT
Q83n	98 DK	NEXT
Q83o	99 NA	NEXT

Q84

Option

Thinking about the year before you enrolled in Dirigo, was there any time during that year that \3 was NOT covered by any health insurance plan?

Q84	1 YES	Q86
Q84	2 NO	Q86
Q84	8 DK	Q86
Q84	9 NA	Q86

Q85

Option

How long was \3 uninsured? Would you say . . .

Q85	1 less than 6 months	NEXT
Q85	2 6 months to 1 year, or	NEXT
Q85	3 more than 1 year	NEXT
Q85	8 DK	NEXT
Q85	9 NA	NEXT

****Skip Q86 - Q89 if no child/dependent #1 (I5=none)**

Q86 Option

When you enrolled in Dirigo, was I5 covered by any other health insurance plan, including HMOs, government plans, MaineCare, Medicare and so on?

Q86	1 YES	NEXT
Q86	2 NO	Q89
Q86	8 DK	Q90
Q86	9 NA	Q90

Q87 Multiple Check

What was that coverage?
(CHECK ALL THAT APPLY)

Q87a	1 ANTHEM BC/BS	NEXT
Q87b	2 AETNA	NEXT
Q87c	3 NASE (NATL ASSOC OF SELF EMPL.)	NEXT
Q87d	4 MEGALIFE	NEXT
Q87e	5 CIGNA	NEXT
Q87f	6 COBRA	NEXT
Q87g	7 MAINECARE/MEDICAID	NEXT
Q87h	8 MEDICARE ONLY	NEXT
Q87i	9 MEDICARE PLUS SUPPLEMENTAL	NEXT
Q87j	10 MILITARY OR VA	NEXT
Q87k	11 CUB CARE	NEXT
Q87l	12 OTHER COVERAGE	NEXT
Q87m	13 other COVERAGE	NEXT
Q87n	98 DK	NEXT
Q87o	99 NA	NEXT

Q88 Option

Thinking about the year before you enrolled in Dirigo, was there any time during that year that I5 was NOT covered by any health insurance plan?

Q88	1 YES	Q90
Q88	2 NO	Q90
Q88	8 DK	Q90
Q88	9 NA	Q90

Q89 Option

How long was \5 uninsured? Would you say . . .

- Q89 1 less than 6 months NEXT
- Q89 2 6 months to 1 year, or NEXT
- Q89 3 more than 1year NEXT
- Q89 8 DK NEXT
- Q89 9 NA NEXT

****Skip Q90 – Q93 if no child/dependent #2 (\7=none)**

Q90 Option

When you enrolled in Dirigo, was \7 covered by any other health insurance plan, including HMOs, government plans, MaineCare, Medicare and so on?

- Q90 1 YES NEXT
- Q90 2 NO Q93
- Q90 8 DK Q94
- Q90 9 NA Q94

Q91 Multiple Check

What was that coverage?
(CHECK ALL THAT APPLY)

- Q91a 1 ANTHEM BC/BS NEXT
- Q91b 2 AETNA NEXT
- Q91c 3 NASE (NATL ASSOC OF SELF EMPL.) NEXT
- Q91d 4 MEGALIFE NEXT
- Q91e 5 CIGNA NEXT
- Q91f 6 COBRA NEXT
- Q91g 7 MAINECARE/MEDICAID NEXT
- Q91h 8 MEDICARE ONLY NEXT
- Q91i 9 MEDICARE PLUS SUPPLEMENTAL NEXT
- Q91j 10 MILITARY OR VA NEXT
- Q91k 11 CUB CARE NEXT
- Q91l 12 OTHER COVERAGE NEXT
- Q91m 13 other COVERAGE (Specify) NEXT
- Q91n 98 DK NEXT
- Q91o 99 NA NEXT

Q92

Option

Thinking about the year before you enrolled in Dirigo, was there any time during that year that \7 was NOT covered by any health insurance plan?

Q92	1 YES	Q94
Q92	2 NO	Q94
Q92	8 DK	Q94
Q92	9 NA	Q94

Q93

Option

How long was \7 uninsured? Would you say . . .

Q93	1 less than 6 months	NEXT
Q93	2 6 months to 1 year, or	NEXT
Q93	3 more than 1 year	NEXT
Q93	8 DK	NEXT
Q93	9 NA	NEXT

****Skip Q94 – Q97 if no child/dependent #3 (\9=none)**

Q94

Option

When you enrolled in Dirigo, was \9 covered by any other health insurance plan, including HMOs, government plans, MaineCare, Medicare and so on?

Q94	1 YES	NEXT
Q94	2 NO	Q97
Q94	8 DK	Q98
Q94	9 NA	Q98

Q95

Multiple Check

What was that coverage?
(CHECK ALL THAT APPLY)

- Q95a 1 ANTHEM BC/BS NEXT
- Q95b 2 AETNA NEXT
- Q95c 3 NASE (NATL ASSOC OF SELF EMPL.) NEXT
- Q95d 4 MEGALIFE NEXT
- Q95e 5 CIGNA NEXT
- Q95f 6 COBRA NEXT
- Q95g 7 MAINECARE/MEDICAID NEXT
- Q95h 8 MEDICARE ONLY NEXT
- Q95i 9 MEDICARE PLUS SUPPLEMENTAL NEXT
- Q95j 10 MILITARY OR VA NEXT
- Q95k 11 CUB CARE NEXT
- Q95l 12 OTHER COVERAGE NEXT
- Q95m 13 other COVERAGE (Specify) NEXT
- Q95n 98 DK NEXT
- Q95o 99 NA NEXT

Q96

Option

Thinking about the year before you enrolled in Dirigo, was there any time during that year that \9 was NOT covered by any health insurance plan?

- Q96 1 YES Q98
- Q96 2 NO Q98
- Q96 8 DK Q98
- Q96 9 NA Q98

Q97

Option

How long was \9 uninsured? Would you say . . .

- Q97 1 less than 6 months NEXT
- Q97 2 6 months to 1 year, or NEXT
- Q97 3 more than 1 year NEXT
- Q97 8 DK NEXT
- Q97 9 NA NEXT

****Skip Q98 – Q101 if no child/dependent #4 (11=none)**

Q98 Option

When you enrolled in Dirigo, was \11 covered by any other health insurance plan, including HMOs, government plans, MaineCare, Medicare and so on?

- | | | |
|-----|-------|------|
| Q98 | 1 YES | NEXT |
| Q98 | 2 NO | Q101 |
| Q98 | 8 DK | Q102 |
| Q98 | 9 NA | Q102 |

Q99 Multiple Check

What was that coverage?
(CHECK ALL THAT APPLY)

- | | | |
|------|-----------------------------------|------|
| Q99a | 1 ANTHEM BC/BS | NEXT |
| Q99b | 2 AETNA | NEXT |
| Q99c | 3 NASE (NATL ASSOC OF SELF EMPL.) | NEXT |
| Q99d | 4 MEGALIFE | NEXT |
| Q99e | 5 CIGNA | NEXT |
| Q99f | 6 COBRA | NEXT |
| Q99g | 7 MAINECARE/MEDICAID | NEXT |
| Q99h | 8 MEDICARE ONLY | NEXT |
| Q99i | 9 MEDICARE PLUS SUPPLEMENTAL | NEXT |
| Q99j | 10 MILITARY OR VA | NEXT |
| Q99k | 11 CUB CARE | NEXT |
| Q99l | 12 OTHER COVERAGE | NEXT |
| Q99m | 13 other COVERAGE (Specify) | NEXT |
| Q99n | 98 DK | NEXT |
| Q99o | 99 NA | NEXT |

Q100 Option

Thinking about the year before you enrolled in Dirigo, was there any time during that year that \11 was NOT covered by any health insurance plan?

- | | | |
|------|-------|------|
| Q100 | 1 YES | Q102 |
| Q100 | 2 NO | Q102 |
| Q100 | 8 DK | Q102 |
| Q100 | 9 NA | Q102 |

Q101

Option

How long was \11 uninsured? Would you say . . .

Q101	1 less than 6 months	NEXT
Q101	2 6 months to 1 year, or	NEXT
Q101	3 more than 1 year	NEXT
Q101	8 DK	NEXT
Q101	9 NA	NEXT

****Skip Q102 – Q105 if no child/dependent #5 (\13=none)**

Q102

Option

When you enrolled in Dirigo, was \13 covered by any other health insurance plan, including HMOs, government plans, MaineCare, Medicare and so on?

Q102	1 YES	NEXT
Q102	2 NO	Q105
Q102	8 DK	Q106
Q102	9 NA	Q106

Q103

Multiple Check

What was that coverage?
(CHECK ALL THAT APPLY)

Q103a	1 ANTHEM BC/BS	NEXT
Q103b	2 AETNA	NEXT
Q103c	3 NASE (NATL ASSOC OF SELF EMPL.)	NEXT
Q103d	4 MEGALIFE	NEXT
Q103e	5 CIGNA	NEXT
Q103f	6 COBRA	NEXT
Q103g	7 MAINECARE/MEDICAID	NEXT
Q103h	8 MEDICARE ONLY	NEXT
Q103i	9 MEDICARE PLUS SUPPLEMENTAL	NEXT
Q103j	10 MILITARY OR VA	NEXT
Q103k	11 CUB CARE	NEXT
Q103l	12 OTHER COVERAGE	NEXT
Q103m	13 other COVERAGE (Specify)	NEXT
Q103n	98 DK	NEXT
Q103o	99 NA	NEXT

Q104 Option

Thinking about the year before you enrolled in Dirigo, was there any time during that year that \13 was NOT covered by any health insurance plan?

Q104	1 YES	Q106
Q104	2 NO	Q106
Q104	8 DK	Q106
Q104	9 NA	Q106

Q105 Option

How long was \13 uninsured? Would you say . . .

Q105	1 less than 6 months	NEXT
Q105	2 6 months to 1 year, or	NEXT
Q105	3 more than 1 year	NEXT
Q105	8 DK	NEXT
Q105	9 NA	NEXT

Q106 Option

Are there any members of your household who did NOT enroll on your Dirigo plan at that time?

Q106	1 YES	NEXT
Q106	2 NO	Q119
Q106	8 DK	Q119
Q106	9 NA	Q119

Q107 Option

Who was NOT enrolled on your Dirigo plan?

ENTER HH MEMBER 1:

Q107	1 CHILD UNDER 18	NEXT
Q107	3 SPOUSE/PARTNER	NEXT
Q107	4 PARENT	NEXT
Q107	5 OTHER RELATIVE	NEXT
Q107	8 DK	NEXT
Q107	9 NA	NEXT
Q107	2 CHILD OVER 18	NEXT
Q107	6 ROOMMATE	NEXT

Q108 Option

Was s/he covered by any other health insurance plan, including HMOs, government plans, MaineCare, and so on?

Q108	1 YES	NEXT
Q108	2 NO	Q111
Q108	8 DK	Q111
Q108	9 NA	Q111

Q109 Multiple Check

What was that coverage?
(CHECK ALL THAT APPLY)

Q109a	1 ANTHEM BC/BS	NEXT
Q109b	2 AETNA	NEXT
Q109c	3 NASE (NATL ASSOC OF SELF EMPL.)	NEXT
Q109d	4 MEGALIFE	NEXT
Q109e	5 CIGNA	NEXT
Q109f	6 COBRA	NEXT
Q109g	7 MAINECARE/MEDICAID	NEXT
Q109h	8 MEDICARE ONLY	NEXT
Q109i	9 MEDICARE PLUS SUPPLEMENTAL	NEXT
Q109j	10 MILITARY OR VA	NEXT
Q109k	11 CUB CARE	NEXT
Q109l	12 OTHER COVERAGE	NEXT
Q109m	13 other COVERAGE	NEXT
Q109n	98 DK	NEXT
Q109o	99 NA	NEXT

Q110 Option

Does s/he still have that coverage?

Q110	1 YES	NEXT
Q110	2 NO	NEXT
Q110	8 DK	NEXT
Q110	9 NA	NEXT

Q111

Option

Who else was NOT enrolled on your Dirigo plan?
ENTER HH MEMBER 2:

Q111	1 NONE	Q119
Q111	2 CHILD UNDER 18	NEXT
Q111	4 SPOUSE/PARTNER	NEXT
Q111	5 PARENT	NEXT
Q111	6 OTHER RELATIVE	NEXT
Q111	8 DK	Q119
Q111	9 NA	Q119
Q111	3 CHILD OVER 18	NEXT

Q112

Option

Was s/he covered by any other health insurance plan, including HMOs, government plans, MaineCare, and so on?

Q112	1 YES	NEXT
Q112	2 NO	Q115
Q112	8 DK	Q115
Q112	9 NA	Q115

Q113

Multiple Check

What was that coverage?
(CHECK ALL THAT APPLY)

Q113a	1 ANTHEM BC/BS	NEXT
Q113b	2 AETNA	NEXT
Q113c	3 NASE (NATL ASSOC OF SELF EMPL.)	NEXT
Q113d	4 MEGALIFE	NEXT
Q113e	5 CIGNA	NEXT
Q113f	6 COBRA	NEXT
Q113g	7 MAINECARE/MEDICAID	NEXT
Q113h	8 MEDICARE ONLY	NEXT
Q113i	9 MEDICARE PLUS SUPPLEMENTAL	NEXT
Q113j	10 MILITARY OR VA	NEXT
Q113k	11 CUB CARE	NEXT
Q113l	12 OTHER COVERAGE	NEXT
Q113m	13 other COVERAGE	NEXT
Q113n	98 DK	NEXT
Q113o	99 NA	NEXT

Q114 Option

Does s/he still have that coverage?

Q114	1 YES	NEXT
Q114	2 NO	NEXT
Q114	8 DK	NEXT
Q114	9 NA	NEXT

Q115 Option

Who else was NOT enrolled on your Dirigo plan?
ENTER HH MEMBER 3:

Q115	1 NONE	Q119
Q115	2 CHILD	NEXT
Q115	3 SPOUSE/PARTNER	NEXT
Q115	4 PARENT	NEXT
Q115	5 OTHER RELATIVE	NEXT
Q115	8 DK	Q119
Q115	9 NA	Q119

Q116 Option

Was s/he covered by any other health insurance plan, including HMOs, government plans, MaineCare, and so on?

Q116	1 YES	NEXT
Q116	2 NO	Q119
Q116	8 DK	Q119
Q116	9 NA	Q119

Q117

Multiple Check

What was that coverage?
(CHECK ALL THAT APPLY)

- Q117a 1 ANTHEM BC/BS NEXT
- Q117b 2 AETNA NEXT
- Q117c 3 NASE (NATL ASSOC OF SELF EMPL.) NEXT
- Q117d 4 MEGALIFE NEXT
- Q117e 5 CIGNA NEXT
- Q117f 6 COBRA NEXT
- Q117g 7 MAINECARE/MEDICAID NEXT
- Q117h 8 MEDICARE ONLY NEXT
- Q117i 9 MEDICARE PLUS SUPPLEMENTAL NEXT
- Q117j 10 MILITARY OR VA NEXT
- Q117k 11 CUB CARE NEXT
- Q117l 12 OTHER COVERAGE NEXT
- Q117m 13 other COVERAGE NEXT
- Q117n 98 DK NEXT
- Q117o 99 NA NEXT

Q118

Option

Does s/he still have that coverage?

- Q118 1 YES NEXT
- Q118 2 NO NEXT
- Q118 8 DK NEXT
- Q118 9 NA NEXT

Q119

Option

Those are all the questions I have. Thank you very much for your time.
ALWAYS CHECK 1 HERE

- Q119 1 END END

APPENDIX C: INTERVIEW PROTOCOL FOR DISENROLLED EMPLOYERS

1. Introduction

Hello, my name is _____ and I'm calling from the Muskie School at the University of Southern Maine. I'm part of a research team that has been asked by the Dirigo Health Agency to talk to people who considered DirigoChoice, so that we can better understand the insurance needs of Maine's small businesses. According to our records, you were enrolled in DirigoChoice but did not continue your coverage. Is this correct?

If YES: Would you be willing to discuss your impressions of DirigoChoice with me? This is completely voluntary, you don't have to speak with us if you don't want to, but your answers will be very helpful in making DirigoChoice a better product for Maine.

If YES: Great. Before we begin, I just want to let you know that your answers will be kept strictly confidential and your name will not be used in any way.

2. Gather Background Information on Businesses

Insurance status of business before Dirigo - if coverage was offered, what type?
Success of business in past year – gains and losses typical/atypical?

3. Experience with Enrollment and Coverage

How did employers hear about the plan?
Who was primary source of information when enrolling? – agent, Anthem representative, the Dirigo Health agency
Reasons for enrollment
Expectations

4. Reasons for Disenrollment

Probes may include cost, couldn't get sufficient employee participation; disappointed with coverage; unsure about future of plan; political or peer pressure; stigma; excessive paperwork; administrative hassles, etc. *Should probe for level of awareness of discounts among employees; What role, if any, employees had in decision to drop?*

5. Current Insurance Status

Is business currently offering coverage?
If so, what plan is being offered? What made this plan more attractive than Dirigo?
If not, what have employees done? Have they remained w/o coverage? Picked up something new?

6. Ideas for Program Improvement

What would have made a difference? – Probes may include cost to employer, cost to employees, different benefit design, different reimbursement/administrative processes, etc. Drill down on specifics of cost, benefits, etc.

APPENDIX D: INTERVIEW PROTOCOL FOR EMPLOYERS WHO WITHDREW THEIR APPLICATION

Hello, my name is _____ and I'm calling from the Muskie School at the University of Southern Maine. I'm part of a research team that has been hired by the Dirigo Health Agency to talk to people who considered DirigoChoice, so that we can better understand the insurance needs of Maine's small businesses. According to our records, you got information about DirigoChoice but did not enroll in the plan. Is this correct?

If yes: Would you be willing to discuss the process and your impressions of DirigoChoice with me?

- 1) How did you first hear about the DirigoChoice Plan?
- 2) Who was your primary source of information while you were in the process of deciding about whether or not to enroll in DirigoChoice? Was it an insurance broker, someone at Anthem, the Dirigo Health Agency?
 - a. How knowledgeable did this person seem about DirigoChoice?
 - b. Did you get all the information you needed?
- 3) What were your initial impressions of DirigoChoice? Did your opinion of DirigoChoice change after you learned more about the plan?
 - a. Probe (if changed): in what way did they change?
- 4) Before looking into DirigoChoice, did you have health insurance coverage at your business?
 - a. Probe (if covered): Who was covered by this health insurance plan? You, family, employees, employee dependents?
- 5) What features of the DirigoChoice plan made you consider purchasing it for yourself and/or your employees?
- 6) What was the primary reason you chose not to sign up for the DirigoChoice product? Were there other reasons?
 - a. Probe: new product; unsure about future of the plan; excessive paperwork; administrative hassles; process took too long; unfriendly/unhelpful staff; found a cheaper plan; stigma
- 7) What benefits are particularly important to you and/or your employees when you are looking at health insurance coverage?
 - a. Probe: preventive screenings; prescription drugs; mental health; dental; etc.
- 8) What was your impression about the DirigoChoice subsidy for lower income employees? Probe: Level of subsidy? Process? Source?
- 9) Do you and your employees have health insurance coverage now?
 - a. If so, what type of coverage is it? What made you select this plan over DirigoChoice?