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Health Insurance Marketplace Open Enrollment Snapshot - Week 1 November 1 – November 7, 2015

In the first week of Open Enrollment for 2016 Health Insurance Marketplace coverage, millions of people found in-person assistance in their local community, spoke with a call center representative or visited HealthCare.gov or CuidadoDeSalud.gov to review their coverage options, learn about what financial assistance is available, or to sign up or re-enroll in a plan that best meets their needs.

"Whether shopping for health insurance for the very first time or re-enrolling in their Marketplace coverage, people are ready to get covered," Department of Health and Human Services (HHS) Secretary Sylvia Burwell said. "Consumers are coming to HealthCare.gov, having a smoother experience, and finding plans they can afford. That's the Marketplace at work."

Similar to last year, each week, the Centers for Medicare and Medicaid Services (CMS) will release weekly Open Enrollment snapshots for the HealthCare.gov platform, which is used by the Federally-facilitated Marketplaces and State Partnership Marketplaces, as well as some State-based Marketplaces. These snapshots provide point-in-time estimates of weekly plan selections, call center activity and visits to HealthCare.gov and CuidadoDeSalud.gov. The final number of plan selections associated with enrollment activity to date could fluctuate as plan changes or cancellations occur, such as in response to life changes like starting a new job or getting married. In addition, the weekly snapshot only looks at new plan selections, active plan renewals and, starting at the end of December, auto-renewals and does not include the number of consumers who paid their premiums to effectuate their enrollment.

HHS will produce more detailed reports that look at plan selections across the Federally-facilitated Marketplace and State-based Marketplaces later in the Open Enrollment period.

Definitions and details on the data are included in the glossary.

Federal Marketplace Snapshot

Federal Marketplace Snapshot	Week 1 – OE3
Plan Selections	543,098
<i>New Consumers</i>	34 percent
<i>Consumers Renewing Coverage</i>	66 percent
Applications Submitted (Number of Consumers)	1,153,270
Call Center Volume	741,112
Average Call Center Wait Time	4 minutes 38 seconds
Calls with Spanish Speaking Representative	52,023
Average Wait for Spanish Speaking Rep	11 seconds
HealthCare.gov Users	3,180,777
CuidadoDeSalud.gov Users	66,051
Window Shopping HealthCare.gov Users	1,142,164
Window Shopping CuidadoDeSalud.gov Users	22,731

Glossary

Plan Selections: The weekly metrics provide a preliminary total of those who have submitted an application and selected a plan. Each week's plan selections reflect the total number of plan selections from the beginning of Open Enrollment to the end of the reporting period, net of any cancellations from a consumer or cancellations from an insurer.

Because of further automation in communication with issuers, the number of net plan selections reported this year account for issuer-initiated plan cancellations that occur before the end of Open Enrollment for reasons such as non-payment of premiums. This change will result in a larger number of cancellations being accounted for during Open Enrollment than last year. Last year, these cancellations were reflected only in reports on effectuated enrollment after

the end of Open Enrollment. As a result, there may also be a smaller difference this year between plan selections at the end of Open Enrollment and subsequent effectuated enrollment, although some difference will remain because plan cancellations related to non-payment will frequently occur after the end of Open Enrollment.

Plan selections include those consumers who are automatically re-enrolled into their current plan or another plan with similar benefits, which occurs at the end of December.

To have their coverage effectuated, consumers generally need to pay their first month's health plan premium. This release does not include totals for effectuated enrollments.

New Consumers: A consumer is considered to be a new consumer if they did not have Marketplace coverage at the start of Open Enrollment.

Renewing Consumers: A consumer is considered to be a renewing consumer if they had 2015 Marketplace coverage at the start of Open Enrollment and either actively select the same plan or a new plan for 2016 or are automatically re-enrolled into their current plan or another plan, which occurs at the end of December.

Marketplace: Generally, references to the Health Insurance Marketplace in this report refer to 38 states that use the HealthCare.gov platform. The states using the HealthCare.gov platform are Alabama, Alaska, Arizona, Arkansas, Delaware, Florida, Georgia, Hawaii, Illinois, Indiana, Iowa, Kansas, Louisiana, Maine, Michigan, Mississippi, Missouri, Montana, Nebraska, New Hampshire, New Jersey, Nevada, New Mexico, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, South Carolina, South Dakota, Tennessee, Texas, Utah, Virginia, West Virginia, Wisconsin, and Wyoming.

HealthCare.gov States: The 38 states that use the HealthCare.gov platform for the 2016 benefit year, including the Federally-facilitated Marketplace, State Partnership Marketplaces and State-based Marketplaces.

Applications Submitted: This includes a consumer who is on a completed and submitted application or who, through the automatic re-enrollment process, had an application submitted to a Marketplace using the HealthCare.gov platform. If determined eligible for Marketplace coverage, a new consumer still needs to pick a health plan (i.e., plan selection) and pay their premium to get covered (i.e., effectuated enrollment). Because families can submit a single application, this figure tallies the total number of people on a submitted application (rather than the total number of submitted applications).

Call Center Volume: The total number of calls received by the Federally-facilitated Marketplace call center over the course of the week covered by the snapshot.

Calls with Spanish Speaking Representative: The total number of calls received by the Federally-facilitated Marketplace call center where consumers chose to speak with a Spanish-speaking representative. These calls are not included within the Call Center Volume metric.

Average Call Center Wait Time: The average amount of time a consumer waited before reaching a customer service representative.

HealthCare.gov Users or CuidadoDeSalud.gov Users: These user metrics total how many unique users viewed or interacted with HealthCare.gov or CuidadoDeSalud.gov, respectively, over the course of a specific date range. For cumulative totals, a separate report is run for the entire Open Enrollment period to minimize users being counted more than once during that longer range of time and to provide a more accurate estimate of unique users. Depending on an individual's browser settings and browsing habits, a visitor may be counted as a unique user more than once.

Window Shopping HealthCare.gov Users or CuidadoDeSalud.gov Users: These user metrics total how many unique users interacted with the window-shopping tool at HealthCare.gov or CuidadoDeSalud.gov, respectively, over the course of a specific date range. For cumulative totals, a separate report is run for the entire Open Enrollment period to minimize users being counted more than once during that longer range of time and to provide a more accurate estimate of unique users. Depending on an individual's browser settings and browsing habits, a visitor may be counted as a unique user more than once. Users who window-shopped are also included in the total HealthCare.gov or CuidadoDeSalud.gov user total.



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