

Title

Outreach for Equity: Learning from enrollees on California's state-based exchange

Abstract

Background

Covered California, the state's health benefits exchange, supports nearly 1.8M enrollees in accessing affordable, quality commercial insurance. After ten years, there is limited research on the clinical and health-related social needs (HRSNs) of marketplace enrollees, partly due to the short duration of coverage.^{1,2,3} Recognizing this gap, Covered California surveyed enrollees to learn about HRSNs and barriers to care.

Objectives

- Understand the HRSNs and care barriers faced by enrollees,
- Inform Covered California program development and population health investments

Methods

We used a multi-modal approach, deploying an email survey and conducting phone interviews with current enrollees. The survey was sent to 107,440 enrollees with chronic conditions (99,313 in English and 8,127 in Spanish). A subset was targeted for phone interviews. Response rates aligned with those of similar surveys and campaigns. Chi-Square tests and p-values (<0.0001) were used to identify statistically significant relationships between food insecurity and benefit preferences among respondents with chronic conditions.

Results

Survey Response Rates

Table 1: Email Survey Response Rates

Language Preference	Enrollees Emailed	Number (%) Surveys Completed
English	99,313	761 (0.8%)
Spanish	8,127	103 (1.3%)
Total	107,440	864 (0.8%)

Table 2: Phone Interview Completion Rates

Language Preference	Unique Enrollees Called	Number (%) Answered	Number (%) Interviews Completed
English	332	104	17
Spanish	481	149	50
Total	813	253 (30%)	67 (8%)

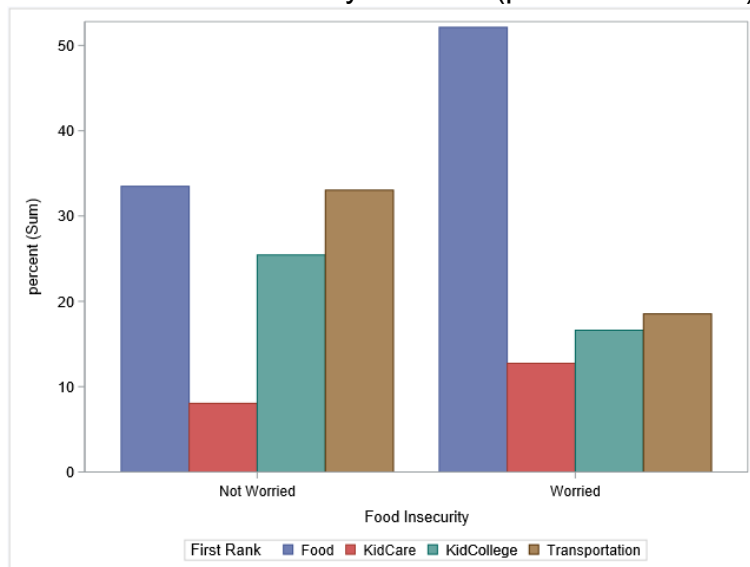
Email Survey Results

Table 3: Prevalence of Food and Transportation Insecurity Among Enrollees with Chronic Conditions

Language Preference	Prevalence of Food Insecurity (Hunger Vital Sign™ 4)	Prevalence of Transportation Insecurity (using PRAPARE® 5 question on transportation)
English	38.5%	14.6%
Spanish	62.8%	24.0%
Total	41.1%	15.7%

Our analysis revealed a significant correlation between enrollees experiencing food insecurity and the prioritization of monetary benefits for food, transportation, or children's college fund, using Chi-Square tests and p-values (< 0.0001).

Figure 1: Prevalence of Food Insecurity Among Enrollees with Chronic Conditions and Prioritization of Monetary Benefits (p-value < 0.0001)



Phone Interview Themes:

- Challenges with maintaining employment in current economy
- Cyclical stressor of managing food and savings on weekly basis
- Cost of gas and distance to grocery store impact food security
- Additional \$100-200 / month would alleviate financial strain

Conclusions

HRSNs for marketplace enrollees may be more similar to rates found in Medicaid than employer sponsored insurance. 19% of Commercial enrollees face challenges with access to healthy food⁶ yet 39% of Medicare and Medicaid enrollees report food insecurity⁷. Our findings reveal that nearly 40% of enrollees surveyed endorsed food insecurity. The impact of HRSNs in the exchange population warrants additional investigation and exploration of policy changes and investments to provide additional support to enrollees.

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