Barriers to Enrollment for the Uninsured: A Single-Site Survey at an Urban Free Clinic in Milwaukee

Drumil Bhatt, BS; Ken Schellhase, MD, MPH

ABSTRACT

Background: Wisconsin currently has a 6.4% uninsured rate. In Milwaukee, it is not known what proportion of the currently uninsured may be eligible for health insurance and why those eligible have not enrolled.

Methods: Anonymous surveys were distributed at a free/low-cost health clinic in Milwaukee to ask their attendees why they remain uninsured.

Results: Fifty-one percent of respondents cited insurance being "too expensive" as the primary reason for lacking health insurance. Additionally, 56% of respondents appeared to misunderstand their Medicaid eligibility, while 69% appeared to misunderstand their Affordable Care Act (ACA) Marketplace eligibility.

Discussion: A majority of respondents misunderstood their eligibility for ACA subsidies, indicating that additional efforts are needed to educate uninsured Milwaukee residents to maximize health insurance coverage.

INTRODUCTION

In 2017, although the United States had one of the lowest rates of uninsured in over 50 years, there were still close to 29.3 million people who remained uninsured.^{1,2} The Affordable Care Act (ACA) aimed to reduce the uninsured rate by expanding Medicaid eligibility and offering subsidies to make premiums and cost-sharing more affordable for commercial health insurance purchased through the ACA Marketplace. Wisconsin did not participate in the full Medicaid expansion under the ACA, but did expand Medicaid eligibility for individuals and families making up to 100% of the Federal Poverty

Author Affiliations: Medical College of Wisconsin (MCW), Milwaukee, Wis (Bhatt); MCW, Department of Family Medicine, Milwaukee, Wis (Schellhase).

Corresponding Author: Drumil Bhatt, BS, Medical College of Wisconsin, 8701 W Watertown Plank Road, Milwaukee, WI 53226; phone 714.616.0506; email dbhatt@mcw.edu.

Line (FPL) (up to \$12,140 per year for an individual in 2018), while offering subsidized health plans through the Marketplace for people earning between 100% and 400% of FPL (between \$12,140 and \$48,560 per year for an individual in 2018).³ Despite this, according to US census data, the uninsured rate in 2017 was 6.4% in Wisconsin and 13.2% in Milwaukee.⁴

To increase enrollment, Wisconsin allows individuals to apply for both Medicaid and Marketplace plans in person, by mail, over the phone, and online. Moreover, the US Department of Health and Human Services awarded close to \$300,000 to federally qualified health

centers in Milwaukee in 2014 to assist with outreach and enrollment under the ACA, and the Centers for Medicare & Medicaid Services awarded \$1.3 million in grants to Navigator organizations during the 2015-2016 open enrollment period for Wisconsin.^{5,6} While the uninsured rate has dropped from 9.1% in 2013 to 6.4% in 2017, it is not known why some individuals remain uninsured despite these efforts.

Thus, the goal of this project is to characterize this remaining uninsured population by understanding their eligibility status and reasons for being uninsured. Though this is a pilot study with a nonrepresentative sample of the uninsured, results from this study can provide an additional resource to shape local policy and outreach to the uninsured population, in addition to groundwork for future studies.

METHODS

Surveys were conducted at the Outreach Community Health Center (OCHC) in Milwaukee, a community center that provides low-cost to no-cost primary care to the uninsured, in addition to social services and case management. During these case management appointments, staff solicited interest from clients to participate in the study. Surveys were presented in paper form and English only. (Survey can be found at https://www. wisconsinmedicalsociety.org/ WMS/publications/wmj/pdf/118/1/Appendix-Bhatt. pdf). They were presented as voluntary and anonymous, and no incentives were offered. In case respondents had questions, the project purpose, details, and contact information were included in an informational letter that accompanied the survey. OCHC staff disseminated the surveys but were not part of the research team and did not record the number of surveys offered; therefore, no response rate was calculated. The questions consisted of a combination of free text and multiple choice. All responses were self-reported and each question was optional, thus, there is a different number of responses for each question. Data entry was performed by the primary author.

Institutional Review Board approval was obtained by the Medical College of Wisconsin Institutional Review Board #5 for study ID PRO00027333.

RESULTS Demographics

Results were tabulated to include age, sex, ethnicity, family size, and eligibility (Table). Eligibility for Medicaid vs Marketplace plans was based on respondents' self-reported income and family size, which was compared to the eligibility charts on the ACA's official website. Of note, the majority (61%) of the respon-

dents were above 100% of the FPL and would have some outof-pocket expense to purchase plans through the Marketplace.

Modes of Applying for Coverage

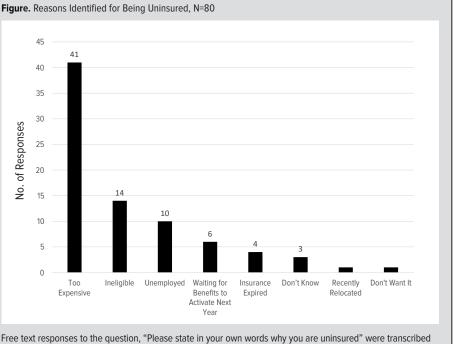
Respondents were asked if they planned to obtain health insurance and, if so, what modality they were going to use to apply for coverage. Most respondents (68%, n = 96) looked for coverage in 2017-2018 and the most popular mode of applying for coverage was online (34%).

Employer-Sponsored Insurance

Sixty-seven percent of respondents said they were employed. Of these employed, 71% qualified for Marketplace plans while 29% qualified for Medicaid plans. Regarding access to employer-

Demographic	Total					
Age in years		19-25	26-34	35-44	45-64	
	100	15 (15%)	25 (25%)	20 (20%)	40 (40%)	
Sex		Male	Female			
	80	44 (55%)	36 (45%)			
Ethnicity		Caucasian	African American	Hispanic	Asian	Other
	98	31 (32%)	59 (60%)	5 (5%)	1 (1%)	2 (2%)
Family size		1	2	3	4	
	90	71 (79%)	9 (10%)	5 (6%)	5 (6%)	
Eligibility*		Medicaid Eligible	Marketplace Eligible			
	77	30 (39%)	47 (61%)			

*Medicaid and Marketplace eligibility were not self-reported by respondents but calculated by the authors based on self-reported income in comparison to the most recently defined poverty levels.



into displayed categorical responses by study staff.

sponsored insurance, 50% of individuals were not offered insurance through their employer while 21% were offered insurance but said it was too expensive.

Reasons for Being Uninsured

Respondents were asked, in a free text format, why they remain uninsured. Responses were then transcribed into displayed categorical responses by study staff (Figure). Most individuals (41/80 responses, 52%) cited insurance being "too expensive." Other answers included being unemployed or ineligible for insurance. There were also logistical reasons cited, such as having a waiting period before an employer could offer insurance or being recently uninsured due to expiration of benefits from relocating or having a new job.

Knowledge of Eligibility

Respondents also were asked whether they know if they are eligible for Medicaid with response options of "Yes," "No," and "I don't know." Of the 72 individuals who self-reported an income and answered this question, 55.5% responded "I don't know" or answered incorrectly about their Medicaid eligibility. The same question was posed for respondents about Marketplace eligibility. Of the 73 individuals who self-reported an income and answered this question, 68.5% responded either "I don't know" or answered incorrectly about their Marketplace eligibility.

DISCUSSION

In terms of knowledge of benefits and eligibility, the majority of respondents (55.5% for Medicaid, 68.5% for Marketplace) had some misunderstanding or misinformation about their eligibility. Thus, many respondents may not be taking full advantage of the benefits available to them. These findings are consistent with national surveys done by Kaiser of over 1,200 respondents that showed how many individuals had some misunderstanding of the ACA and its benefits and requirements.^{7,8} Therefore, it appears that additional education and outreach must be part of efforts to improve uninsured rates.

While misinformation or misunderstanding may explain why some individuals do not sign up for insurance, it is important to note that most respondents (61%) appeared to be Marketplace eligible and would have some premium, copay, and/or deductible associated with their insurance plans. Thus, while an individual's premium varies based on numerous particulars, it is not surprising that many respondents cite insurance being too expensive as the primary reason they lack insurance. These individuals may be aware of benefits available to them but may have chosen to visit a free clinic instead.

Conversely, 39% of respondents qualify for Medicaid/Badgercare insurance, which involves minimal, if any, out-of-pocket expense. In addition to future research that explores why this cohort may remain uninsured despite financial assistance, more efforts need to be made to sign up this population for insurance.

This pilot study suggests that respondents may misunderstand the programs available to them and their costs and benefits, which is consistent with results from national surveys.^{1,9} However, it is important to note that due to the limitations of this study, these findings may not be generalizable. Since this study was done at a single site with a voluntary, Englishspeaking population only, variables such as response rate, immigration status, and other barriers to enrollment, such as language, were not studied. Moreover, the respondent demographics are not generalizable to Milwaukee's entire uninsured population. Future studies must include sites at other locations to represent a different demographic and should include surveys transcribed in Spanish and Hmong to access significant portions of the non-English speaking population. Furthermore, studies could expand on the qualitative data shown in the Figure. For instance, surveys could explore the cost of a Marketplace premium in comparison to a sliding scale fee at a community health center. Respondents also could be surveyed before and after an educational session on Marketplace and Medicaid plans to assess the impact of these types of sessions on health care literacy.

CONCLUSIONS

Cost appears to remain the biggest barrier to obtaining insurance, especially since a majority of survey respondents were Marketplace eligible and would have some out-of-pocket expense associated with their health care plans. However, it is unknown whether those eligible for Marketplace insurance have an accurate understanding of their actual out-of-pocket costs. Efforts need to be made to increase health care literacy, targeted at both Medicaidand Marketplace-eligible individuals, to reduce uninsured rates and inform consumers about their eligibilities and benefits. Future studies can focus on the impact of education on health care literacy and how that education can help decrease uninsured rates.

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REFERENCES

1. Key facts about the uninsured population. Henry J. Kaiser Family Foundation. https:// www.kff.org/uninsured/fact-sheet/key-facts-about-the-uninsured-population/. Published December 7, 2018. Accessed April 9, 2019.

2. Cohen RA, Zammitti EP, Martinez ME. Health insurance coverage: early release of estimates from the National Health Interview Survey, 2017. Center for Disease Control and Prevention. https://www.cdc.gov/nchs/data/nhis/earlyrelease/insur201805.pdf. Published May 2018. Accessed November 3, 2018.

3. QuickFacts: Milwaukee City, Wisconsin. United States Census Bureau website. https://www.census.gov/quickfacts/milwaukeecitywisconsin. Accessed March 6, 2018.

4. The Wisconsin health care landscape. Henry J. Kaiser Family Foundation. https:// www.kff.org/health-reform/fact-sheet/the-wisconsin-health-care-landscape/. Published October 7, 2015. Accessed March 5, 2018.

5. Wisconsin: health center outreach and enrollment assistance. Health Resources and Services Administration website. https://www.hrsa.gov/about/news/2013-tables/outreach-and-enrollment/wi.html. Renewed April 2017. Accessed March 10, 2018.

6. Long M, Rae M, Claxton G, Damico A. Trends in employer-sponsored insurance offer and coverage rates, 1999-2014. Henry J. Kaiser Family Foundation. https://www.kff. org/private-insurance/issue-brief/trends-in-employer-sponsored-insurance-offer-and-coverage-rates-1999-2014/. Published March 21, 2016. Accessed March 18, 2018.

7. 2013 employer health benefits survey. Henry J. Kaiser Family Foundation. https:// www.kff.org/private-insurance/report/2013-employer-health-benefits/. Published August 20, 2013. Accessed March 13, 2018.

8. DiJulio B, Firth J, Brodie M. Kaiser health tracking poll: December 2015. Henry J. Kaiser Family Foundation. https://www.kff.org/health-costs/poll-finding/kaiser-health-tracking-poll-december-2015/. Published December 17, 2015. Accessed March 18, 2018.

9. Garfield R, Orgera K, Damico A. The uninsured and the ACA: a primer – key facts about health insurance and the uninsured amidst changes to the Affordable Care Act. Henry J. Kaiser Family Foundation. https://www.kff.org/report-section/the-uninsured-and-the-aca-a-primer-key-facts-about-health-insurance-and-the-uninsured-amidst-changes-to-the-affordable-care-act-introduction/. Published January 25, 2019. Accessed April 9, 2019.

Survey Questions

Have you taken this survey before? (Yes/No) – If Yes, please do not complete the survey.

Age:

Sex (circle): Male / Female

Are you currently insured? (circle one) Yes / No

If you circled yes, you do not need to complete the rest of the survey.

Ethnicity (circle): Caucasian / African American / Hispanic / Asian / Other (Please state_____)

Please list how many people are in your family as you would on a tax return form (*count yourself*, *spouse if married, any <u>dependents</u>, any <u>parents</u> if they are dependent on you):*

What was your family's estimated income level in 2017? (count <u>your salary</u> and everyone in your family's total salary, include all income such as <u>wages</u>, tips, <u>earnings</u>, etc.) *\$*

Do you think you are eligible for Medicaid (BadgerCare)? (circle one): Yes / No / I don't know

Do you think you are eligible for a health plan through the "Marketplace" (some people call it Obamacare)? (circle one: yes / no / I don't know).

Please state your employment status (circle one): Employed / Unemployed / Looking for employment

If employed: Does your employer offer insurance? Yes / No

If answered yes and you do not have health insurance, please choose why:

- A. Not eligible for coverage because I work part-time
- **B.** It is too expensive
- C. Other (explain)

If your employer does not offer health insurance, do you know why:

- A. Self-Employed
- **B.** Employer does not offer coverage
- C. Other (explain)

Please state in your own words why you are uninsured:

Did you have health insurance in 2017? Yes / No

Did you look for health insurance in 2017? Yes / No

If you looked for health insurance, where did you look for coverage? (circle as many as applicable)

- A. Online
- B. Toll-free or 1-800 number

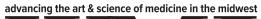
- *C.* Went to a state Medicaid (badgercare) agency
- **D.** Went to a hospital, clinic, or provider office
- **E.** Contacted health insurance broker
- *F.* Went to a community center, school, church, or library
- G. Other (please state)

Did you have any difficulty looking for health insurance coverage? Yes / No

If yes, please explain what difficulties you had: _____

Are you planning on getting health insurance in 2018?

- A. Not planning on getting coverage
- **B.** Don't know yet
- C. Not sure where to get coverage
- **D.** Planning on getting coverage through employer
- E. Planning on getting Medicaid (badgercare) or Marketplace coverage





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