



District of Columbia Consumer Assistance with Health Insurance Survey

**Data Collected by Southeastern Institute of Research
Report Prepared by Rachelle Cummins**

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District of Columbia Consumer Assistance with Health Insurance Survey

Background

Health care delivery has changed greatly in recent years, leaving consumers confused about their coverage options and how to use their health plans. As in many communities and states, there is no well-known, single place in the District where consumers under the age of 65 can go to get reliable information about their health care options and their rights as consumers.

To address this problem, more than 12 states have implemented consumer assistance or ombudsman programs to help the health care consumer. These programs often provide a range of services, including help with understanding insurance options, consumer rights, and how to use a health plan. In addition, these programs normally provide the consumer with assistance with filing and pursuing health care grievances.

The Health Benefit Plan Member's Bill of Rights of 1998, which became effective in April of 1999, greatly improved the standards for managed care plans in the District. It also implemented an external review system that gives consumers the right to challenge a health benefit plan's decision to deny or limit covered services. However, it does not include any program to help consumers with their health insurance coverage and service problems, which AARP and other consumer organizations in the District believe is greatly needed.

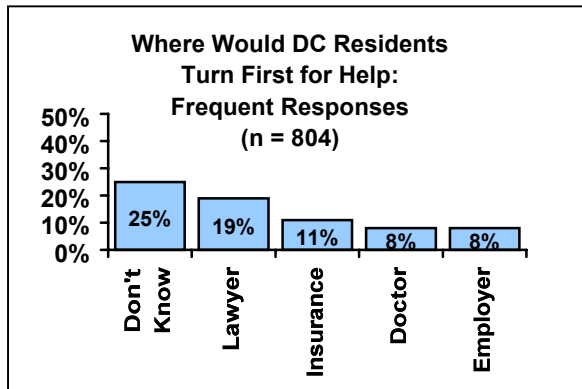
This study of DC residents who are age 18 and older and covered by public or private health plans was undertaken to assess public opinion about the need for a consumer assistance program in the District and to document the level of public support for such an initiative.

Highlights

- One in four adult District residents do not know where they would turn for help in resolving a problem with their health plan
- Only one in four adult District residents are fully aware of their health plan rights under District law
- Eighty-five percent of adult District residents want a neutral person not part of their health plan for assistance and information
- Roughly the same percent think that a District Agency (37%) or an independent program not part of a District Agency (41%) would efficiently and fairly resolve a problem
- Adult District residents with health coverage express overwhelming support (83%) for a consumer assistance program in the District even if public funds are needed to develop and sustain such a program

Findings

DC Residents Don't Know Where to Turn for Help in Resolving a Serious Problem with Their Health Plan

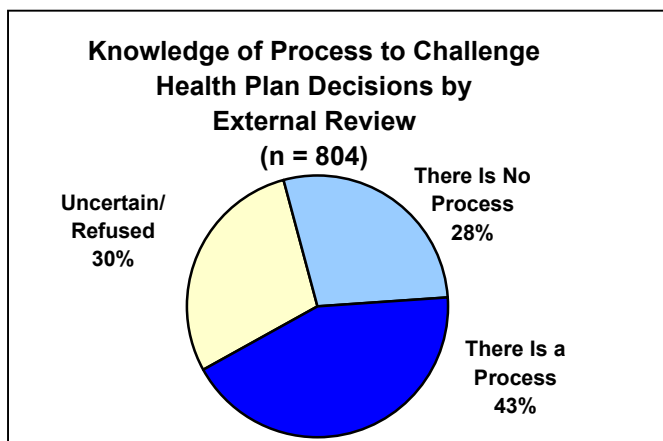


When asked to identify where they would turn first if faced with a serious problem that they were unable to resolve with their health plan, one in four (25%) District residents with public or private coverage don't know where they would turn. Residents with the Medicare, Medicaid, or Veteran's programs are more likely to say they don't know where to turn for help. About one in five covered District residents (19%) would turn to a lawyer first. Those with college education are

more likely to turn to a lawyer first. Other frequently mentioned places include insurance company or plan administrator (11%), doctor (8%), and employer (8%). Less than five percent mention any District government body. The remaining one in four respondents cite at least a dozen other options which may or may not have the ability to provide the desired assistance.

Only One in Four DC Residents Are Fully Aware of Their Health Plan Rights Under District Law

Only twenty-seven percent of DC residents covered by a public or private health plan correctly answered two questions about critical consumer protections. Looking at these questions separately, less than half of covered District residents know there is an external review process for challenging health plan decisions. Slightly more than half know that a plan must pay for emergency room visits.



Specifically, two in five (43%) District residents with coverage know that there is an external review process through which they can challenge their health plan's decisions by requesting that qualified doctors who are not part of their plan's network of doctors review and decide their case. Thirty percent are uncertain, and 28 percent think there is no process.

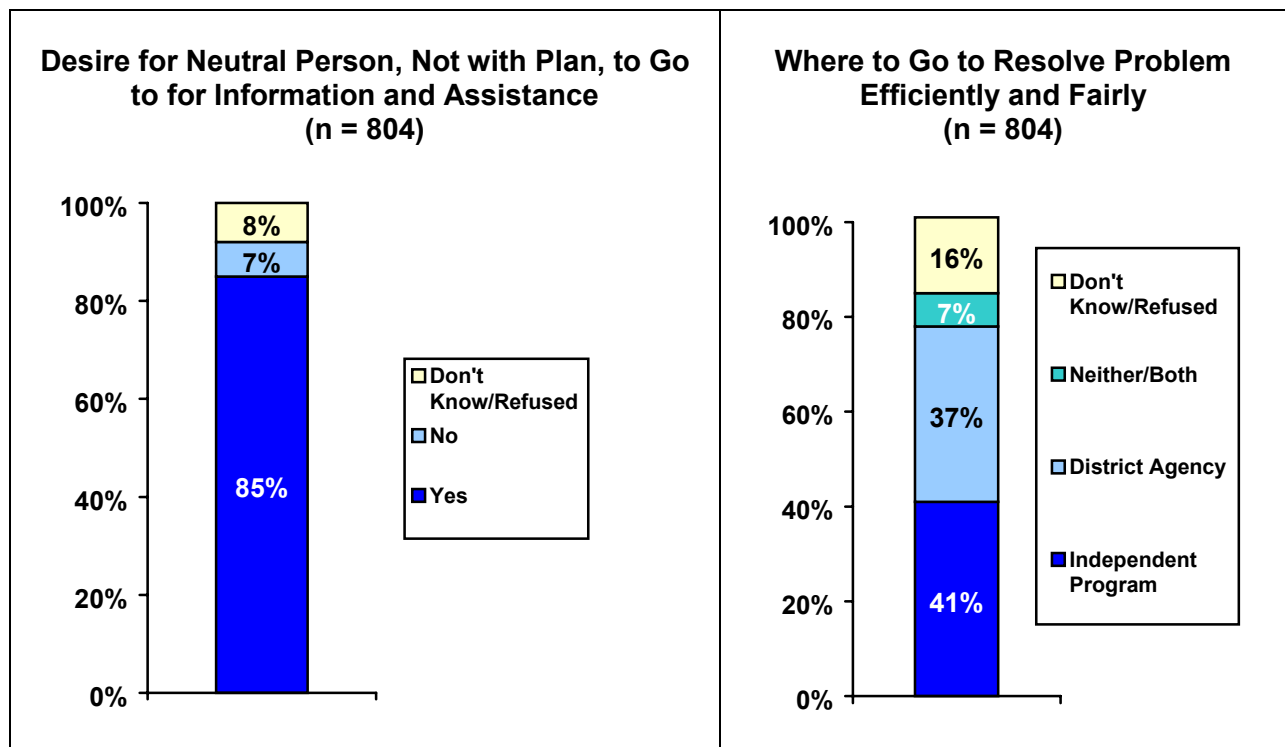
Three in five (61%) covered District residents know that if a person believes that they are experiencing an emergency that the health plan must pay for the emergency room visit. Less than one in three (28%) are not aware of this right. Eleven percent are uncertain.

DC Residents Covered by Public or Private Health Plans Want a Neutral Person, Not Affiliated with Their Plan, for Information and Assistance

More than eight in ten (85%) adult residents with health care coverage want a neutral person, not affiliated with their health plan, to go to for information and assistance if they or a family member had a serious problem with their plan. Income is the most important factor in wanting a neutral resource. As income drops below \$50,000, the desire for a neutral resource increases.

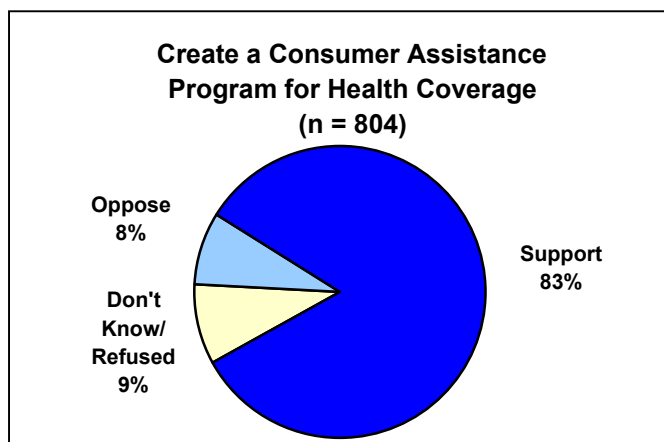
DC Residents Covered by Public or Private Health Plans Are Split on Who Can Act More Efficiently and Fairly to Resolve Problem with Health Plan

Two in five District residents with coverage (41%) believe that an independent consumer program not part of a District Agency would be more likely to resolve a problem efficiently and fairly. More than one-third (37%) of residents think that District Agencies such as the Insurance or Health Departments would act efficiently and fairly. Another 15 percent don't know.



Gender is the key factor in explaining where District residents with health coverage would go to deal with their problems. Women and men think differently about where problems can be resolved fairly and efficiently. Women are more likely to choose an independent program not part of a District Agency while men are more likely to choose a District Agency.

DC Residents with Public or Private Health Care Coverage Support a Consumer Assistance Program



Even if public funds are needed to develop and sustain an ombudsman program, 83 percent of District residents with health care coverage support creating a consumer assistance program. Of those who support it, 67 percent strongly support and 30 percent somewhat support it. Age is the most important driver of choice. Younger covered residents are more likely to support the creation of a consumer assistance program.

Conclusions

District residents who have public or private health care coverage demonstrate a need for a consumer assistance program. Generally, consumers do not know where to turn with problems. Even Medicare beneficiaries, who currently have access to a counseling service, are not aware of current resources and do not know where to turn for help. Educated consumers are more likely to choose a lawyer first to resolve their problems, possibly escalating the level of conflict between participant and plan. Covered District residents also do not know their rights. Most consumers are unaware of their current rights to an external grievance process and emergency room coverage. These findings suggest that District residents would benefit from a consumer assistance program.

A very large proportion of consumers of health care coverage in the District support the creation of a consumer assistance program, and they want a neutral party unaffiliated with their health plans to help in resolving their problems. Eight in ten District residents who have health coverage want the District to create a program that can help people understand their rights, use their plans effectively, and challenge plan decisions. Support is strong across subgroups with younger consumers especially likely to support a consumer assistance program. Consumers are clear that they strongly prefer a neutral consumer assistance program. Eight in ten desire a neutral person, not affiliated with their plans, to help resolve problems. District residents with health coverage who are economically vulnerable are more likely to choose a neutral resource.

Methodology

AARP commissioned Southeastern Institute of Research to conduct a random digit dial (RDD) telephone survey of adults in the District of Columbia age 18 and older who have health insurance coverage. Thus, the survey covers roughly 85 percent of the 18+ population. From a random sample of 8,200 telephone numbers, 800 interviews were completed from April 4 - April 25, 2001, yielding a 19 percent response rate and 42 percent cooperation rate. The survey has a sampling error of plus or minus 3.5 percent. Survey responses were weighted to reflect the insured population's gender, race, and education.¹ Responses to all survey questions are in the attached annotated questionnaire.

We examined differences across many subgroups using chi square tests of significance. Although there were many significant differences, no pattern emerged. We turned to logistic regression to discern which variables predict a respondent's answers to key questions on creating a consumer assistance program. The variables included in the regression were age, gender, race, income, education, marital status, personal health status, source and type of plan, time in plan, use of plan, and knowledge of health plan rights. For a more detailed discussion of logistic regression, consult *Applied Logistic Regression Analysis* by Scott Menard (1995).

For more information about this study, contact Rachelle Cummins, AARP Knowledge Management, (202) 434-6297.

¹ We used the U.S. Census Bureau's March Current Population Survey to estimate gender, education, and race for District residents who are age 18 and older with public or private health coverage. We combined the 1999 and 2000 data for District residents to stabilize the estimates.

Appendix
Annotated Questionnaire

**SIR #5868 (JCF)
SOUTHEASTERN INSTITUTE OF RESEARCH, INC.**

District of Columbia Consumer Assistance Survey
(Unweighted n = 804, Weighted n = 804, Sampling Error = \pm 3.5 percent)
Responses weighted by gender, race, and education.
Percentages may not add to 100 percent due to rounding

Introduction

Hello, this is _____ calling from Southeastern Institute of Research, a national opinion research firm. We're conducting a research study among DC residents about their health care and ways it might be improved. We would really like to include your opinions in our study and assure you that all of your answers would remain completely confidential. **(IF NECESSARY: I assure you this is not a sales call and you will not be asked to buy anything either now or later.) (IF NECESSARY: The survey should take only about 7 or 8 minutes to complete.)**

I1. RECORD GENDER OF PERSON WHO ANSWERED PHONE:

- 1) Male
- 2) Female

I2. To make our study more representative of those living in the D.C. area, I need to speak with the youngest male who is at home right now and is at least 18 years old.

- 1) Person on phone is youngest male → **[SKIP TO S1]**
- 2) Other person is youngest male and is coming to phone → **[SKIP TO I4]**
- 3) Person is not available
- 4) REFUSED → **[SKIP TO R1]**

I3. Then may I speak to the oldest female who is at home right now and is at least 18 years old?

- 1) Person on phone is oldest female → **[SKIP TO S1]**
- 2) Other person on phone is oldest female and is coming to the phone → **[SKIP TO I4]**
- 3) Person is not available → **[TERMINATE]**
- 4) REFUSED → **[SKIP TO R1]**

I4. Hello, this is _____ calling from Southeastern Institute of Research, a national opinion research firm. We're conducting a research study among DC residents about their health care. We would really like to include your opinions in our study and assure you that all of your answers would remain completely confidential. **(IF NECESSARY: I assure you this is not a sales call and you will not be asked to buy anything either now or later.) (IF NECESSARY: The survey should take only about 7 or 8 minutes to complete.)**

- 1) CONTINUE
- 2) REFUSED → **[SKIP TO R1]**

Screening

S1. Do you now have health insurance from any source such as your employer, spouse's employer, insurance you purchased on your own, Medicare, or Medicaid?

%

84 Yes

16 No/DON'T KNOW → [SKIP TO SCREENOUT]

* REFUSED → [SKIP TO R1]

S2. What is the source of your health insurance coverage? [READ LIST]

%

67 You or someone else's employer or union

7 You bought it directly

15 Medicare

13 Medicaid

1 Veteran's Administration

-- CHAMPUS

<.5 COBRA

5 Or is the source of your health insurance something else? [SPECIFY: _____]

1 DON'T KNOW/REFUSED

Description of Current Plan

Q1. Which of the following most clearly describes the type of health care plan you have? [ROTATE ORDER OF FIRST THREE PLAN DESCRIPTIONS.]

%

33 A plan where you can only use doctors or hospitals who are part of the plan,

26 A plan where you pay less if the doctor or hospital is on an approved list, but where you can choose to see a doctor outside of the plan and pay more,

36 [or,] a plan where you can use any doctor or hospital you choose,

1 OTHER (Specify: _____)

4 DON'T KNOW

<.5 REFUSED

Q2. How long have you been covered by your current health plan? [Read Options]

%
10 Less than 6 months,
9 6 months to less than 1 year,
11 Less than 2 years,
17 Less than 5 years,
53 or have you been covered by your current health plan for 5 years or more?
<.5 DON'T KNOW
<.5 REFUSED

Q3. In general, how would you rate your own health right now? Would you say you are in....

%
27 Excellent health,
30 Very Good health,
27 Good health,
12 Fair health,
3 Or would you say that right now you are in Poor health?
<.5 DON'T KNOW
<.5 REFUSED

Q4. In the last year, how much have you or your family used your health plan? Would you say you have used your health plan....

%
34 A Lot,
54 A Little,
11 Or have you and your family not used your health plan at all?
1 DON'T KNOW
<.5 REFUSED

Q5. Nowadays it can be both important and difficult for consumers to keep track of the laws and restrictions on how health plans operate. The next few questions have to do with your knowledge about a couple of issues. Please tell me whether the following statements are true, false, if you are uncertain. First,

[RANDOMLY ROTATE ORDER OF STATEMENTS]

“If a person believes they are experiencing an emergency, the health plan must pay for the emergency room visit.”

%
61 TRUE
28 FALSE
11 UNCERTAIN/DON'T KNOW / NOT SURE
<.5 REFUSED

The next statement is,

“A person can challenge health...plan... decisions...about their medical care...by requesting that qualified doctors...who are not part of their plan's network of doctors...review and decide the case.”

Do you believe this statement is true or false?

%
43 TRUE
28 FALSE
30 UNCERTAIN / DON'T KNOW / NOT SURE
<.5 REFUSED

Q6. People sometimes have serious problems with their health plan. For example, a health care plan might deny a particular treatment or medication recommended by that person's doctor....If you or a family member were faced with such a problem and you could not resolve the situation with your health plan, what resource or person would you turn to first for help in resolving the problem? **[DO NOT READ LIST]**

%
19 Lawyer
11 Insurance
 7 Call insurance company
 4 Head of plan/plan administrator
8 Doctor
8 Employer
 4 Human resources/insurance department
 4 Employer
6 Pay out-of-pocket/resolve self
4 Family/friends

<u>%</u>	
3	Change doctor/get a second opinion
2	Federal government agency
2	Change insurance plan
1	State/local agency
1	DC Insurance Department
1	DC Health Department
1	Medicare
1	Member Service
1	City Council Member
1	Medicaid
1	File an appeal
1	Better Business Bureau
<.5	HCFA
<.5	ANC Commissioner
<.5	DC Office on Aging
<.5	AARP
11	Other
1	Nobody
25	Don't Know

Q7. Again, if you or a family member had a serious problem with your health plan right now and could not resolve the problem to your satisfaction, who would be more likely to resolve your problem efficiently and fairly? Would you say.... **[ROTATE ORDER OF STATEMENTS]**is more likely to resolve your problem efficiently and fairly?

<u>%</u>	
37	A District Agency such as the Insurance Department or Health Department, Or
41	An independent consumer program not part of a District Agency?
6	Neither [VOLUNTEERED]
1	Both [VOLUNTEERED]
15	DON'T KNOW
1	REFUSED

Q8. If you or your family had a serious problem with your health plan right now, such as denial of health care you thought you needed, would you want there to be a neutral person, not affiliated with the plan, where you could go for information and assistance?

<u>%</u>	
85	Yes
7	No
8	DON'T KNOW
<.5	REFUSED

Q9. A consumer assistance program, sometimes called an “Ombudsmen” [OM–BUDZ–MEN] program, can educate people about their health insurance and their health insurance needs. It can also help people understand their rights as consumers, how to use their plan effectively, or how to challenge their plan’s decisions. Would you support or oppose creating such a program in DC, even if public funds are needed to develop and sustain such a program?

%
83 Support → [SKIP TO Q10]
8 Oppose → [SKIP TO Q11]
9 DON’T KNOW / NOT SURE → [SKIP TO D1]
<.5 REFUSED → [SKIP TO D1]

Q10. And is that “strongly support” or “somewhat support?” [ROTATE ORDER OF “SUPPORT” PHRASES]

Weighted Base = 667

%
67 Strongly support
30 Somewhat support
3 DON’T KNOW / NOT SURE
-- REFUSED

[SKIP TO D1]

Q11. And would you say you “strongly oppose” or “somewhat oppose” creating this kind of program? [ROTATE ORDER OF “OPPOSE” PHRASES]

Weighted Base = 63
%
55 Strongly oppose
43 Somewhat oppose
1 DON’T KNOW / NOT SURE
-- REFUSED

Demographics

My last few questions are for classification purposes only!

D1. What is your marital status? Are you currently.....

%
29 Married,
10 Divorced,
4 Separated,
13 Widowed,
41 Or have you never been married?
2 Living with partner [VOLUNTEERED]
<.5 DON'T KNOW
1 REFUSED

D2. What is your age as of your last birthday? **[RECORD IN YEARS]**

Mean	Median
47 years	45 years

%
27 18-34
28 35-49
22 50-64
19 65-91
4 Refused

D3. Are you or is your spouse a member of A-A-R-P? **[IF NOT "MARRIED" ASK, "Are you a member..."]**

%
26 Yes
72 No
2 DON'T KNOW / NOT SURE
<.5 REFUSED

D4. What is your zip code?

D5. Which of the following categories includes the last year or grade of school you have completed? **(READ)**

%

- 15 Some high school or less
- 22 High school graduate
- 19 Some college or technical school
- 21 College graduate
- 20 or, Post-graduate studies or degree
- 2 (DK/Refused)

D6. Are you Hispanic, Spanish, or Latino?

%

- 2 Yes
- 96 No
- 1 DON'T KNOW
- 1 REFUSED

D7. What race or ethnic group do you consider yourself?

%

- 59 Black
- 38 White
- 1 Asian
- <.5 Native American or Alaskan Native
- <.5 Hawaiian or Pacific Islander
- 1 Other race/ethnic group
- <.5 DON'T KNOW
- 1 REFUSED

D8. And are you currently.....

%

- 55 Employed full-time
- 8 Employed part-time
- 26 Retired and not working
- 3 Homemaker
- 3 Unemployed and looking for work
- 1 Disabled
- 2 Self-employed
- 2 Student
- 1 Other
- 1 REFUSED

D9. For statistical purposes only, what was your annual household income before taxes in 2000? Was it.... **(READ)**

- %
- 11 Less than \$10,000
 - 7 \$10,000 to \$19,999
 - 11 \$20,000 to \$29,999
 - 10 \$30,000 to \$39,999
 - 6 \$40,000 to \$49,999
 - 14 \$50,000 to \$74,999
 - 20 or was your income \$75,000 or more
 - 10 DON'T KNOW
 - 11 REFUSED

D10. And, finally, may I verify that I reached you at:
(____)_____

Thank you for participating! Your Opinion Counts.

Respondent gender:

- %
- 46 Male
 - 54 Female

[SKIP TO INTERVIEWER NAME]

Refusal Sequence

R1. Thank you for your time anyway. Have a good night.
RECORD GENDER OF PERSON WHO REFUSED

- 1) Male
- 2) Female
- 3) Do Not Know

R2. WHEN DID PERSON REFUSE:

- 1) DURING INTRODUCTION
- 2) DURING SELECTION OF RESPONDENT (YOUNGEST MALE/OLDEST FEMALE)
- 3) AFTER HAND-OFF WAS MADE
- 4) OTHER [SPECIFY: _____]

R3. RECORD UP TO THREE REASONS FOR REFUSAL

- 1) Doesn't Do Surveys
- 2) Eating/ Having Dinner
- 3) Doesn't Have Time/Too Busy
- 4) Concerned About Privacy
- 5) Telemarketing or Other Laws Against Surveys
- 6) No Opinion About Survey Topic
- 7) Not Interested in Survey Topic
- 8) Hearing
- 9) Person Refused for Someone Else
- 10) Other [Specify: _____]

R4. WAS THIS A "HARD" REFUSAL?

- 1) YES
- 2) NO

HARD REFUSAL =

- ➔ PERSON HUNG-UP IMMEDIATELY
- ➔ PERSON WAS ANGRY
- ➔ PERSON WAS INSULTING OR VERBALLY ABUSIVE
- ➔ PERSON HUNG-UP WHILE YOU WERE SPEAKING

R5. HOW COMFORTABLE WOULD YOU BE CALLING THIS PERSON BACK?

- 1) VERY COMFORTABLE
- 2) SOMEWHAT COMFORTABLE
- 3) NOT VERY COMFORTABLE
- 4) WOULD NOT CALL BACK

[SKIP TO INTERVIEWER NAME]

Terminate

Thank you for your time anyway. Have a good night. [HANG-UP]

- 1) CONTINUE ➔ [SKIP TO INTERVIEWER NAME]

Screen-Out

I'm sorry, but tonight we are only looking for people who are currently insured.

Thank you for your time anyway. Have a good night. [HANG-UP]

- 1) CONTINUE ➔ [SKIP TO INTERVIEWER NAME]

Interviewer name: _____

Date: _____

Time end: _____

Length of interview: _____

Interviewer ID # _____

AARP
Knowledge Management
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