

California Health Care Foundation

Room for Improvement: Consumers' Experience Enrolling Online with Covered California

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Acknowledgments

The research for this report was conducted by gotoresearch. Gotoresearch is a division of gotomedia, a strategic consultancy specializing in research, user experience, and mobile design.

Learn more at www.gotoresearch.com.

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About the Foundation

The California Health Care Foundation is dedicated to advancing meaningful, measurable improvements in the way the health care delivery system provides care to the people of California, particularly those with low incomes and those whose needs are not well served by the status quo. We work to ensure that people have access to the care they need, when they need it, at a price they can afford.

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overed California is the state's health insurance marketplace created under the Affordable Care Act. Widely acknowledged as one of the most successful state-based health insurance exchanges in the country, Covered California had facilitated over 1.3 million Californians in obtaining health insurance as of June 2015.

During each of the three Covered California open enrollment periods (OEPs), gotoresearch conducted real-time consumer user testing with individuals seeking to enroll or renew their health insurance online with Covered California. This research sought to better understand the online consumer experience and to provide detailed, actionable findings to help Covered California, and other insurance marketplaces, provide a first-class consumer experience online.

Research findings from OEP 1 (2013-14) were published by the California Health Care Foundation ("Assessing the Covered California Online User Experience," May 2014, www.chcf.org). Findings from OEP 2 (2014-15) were presented to Covered California and the California Department of Health Care Services (DHCS) in the spring of 2015. The OEP 3 (2015-16) research, conducted in November and December 2015, assessed how the user experience compared to the previous OEP. This report synthesizes key research findings from OEP 2 and 3, and presents conclusions and recommendations.

User experience research is detailed and time-intensive. It does not involve a large number of subjects, but offers meaningful insights into the consumer experience and problems that need to be addressed. Direct observation of consumers as they attempt online enrollment uncovers usability challenges that cannot be learned from other assessment methods such as website analytics, customer surveys, or call center data.

Applying for insurance is complex. Many consumers find comparing plans and understanding insurance terminology to be difficult. All online health insurance marketplaces are grappling with how to address these challenges. This report focuses on the application, website design, and navigation challenges faced by Covered California consumers — areas that can and should be improved.

Methods

User experience research is a method of studying people while they use a product, such as a website, an app, or a physical device, to uncover ways in which the product can be improved. It involves direct, unscripted, real-time observation of consumers — in this case, people applying for or renewing coverage through Covered California online — and captures sources of consumer satisfaction, knowledge, confusion, and frustration.

To conduct this study, gotoresearch:

- Recruited 30 participants for OEP 2 in November and December 2014.
 - Twelve were renewals interested in exploring new plan options for 2015.
 - Eighteen were enrolling in health insurance via Covered California for the first time.
- Recruited 12 participants for OEP 3 in October and December 2015.
 - Six were renewals interested in exploring new plan options for 2016.
 - Six were enrolling in health insurance for the first time.
- Watched and recorded live sessions via webcam with all participants. Participants were given 45 to 90 minutes if they were renewing coverage, and they were given 90 to 120 minutes if they were firsttime enrollees.

The participant pool was diverse in ethnicity, gender, family structure, and income. Participants were also from different geographic regions across the state. Most participants were under age 35 (two-thirds in OEP 2 and all in OEP 3). All were English speakers and had high-speed Internet access.

In OEP 2, researchers recruited people eligible for Medi-Cal to observe the hand-off to the county to complete Medi-Cal enrollment. In OEP 3, people eligible for Medi-Cal were excluded from the recruitment pool. Researchers wanted to observe changes to the online renewal and enrollment process between OEP 2 and OEP 3, including plan choice, and those eligible for Medi-Cal are not able to choose plans online via Covered California. Most consumers start their online Covered California experience through CoveredCA.com. On that site, they can "Explore" educational content and use a "Shop and Compare" tool to do anonymous window shopping for the health plans available through Covered California. Through CoveredCA.com, consumers can also access the state's eligibility and enrollment engine, California Healthcare Eligibility, Enrollment, and Retention System (CalHEERS), which is jointly managed by Covered California and DHCS. CalHEERS includes a different anonymous shopping feature called "Preview Health Plans" and allows consumers to create and sign into a personal account that they can use to apply for, enroll in, and renew coverage. Researchers observed participants engaging with both CoveredCA.com and CalHEERS.

Key Research Findings

Across both OEP 2 and OEP 3, only one of 31 people eligible to enroll in or renew a Covered California health plan did so during the observed research session. (A total of 42 individuals participated in user testing. Eleven were estimated to be eligible for Medi-Cal while applying online; these applications are handed off to county systems for final eligibility determination.) Participants consistently experienced significant difficulty with the Covered California website and online application. While there were some improvements between the two enrollment periods, many problems experienced in OEP 2 persisted into OEP 3.

Key research findings include:

1. Improvements to the CoveredCA.com home page between OEP 2 and OEP 3 resulted in less confusion for participants starting the application or renewal process.

During OEP 2, while many users commented favorably on the look of the CoveredCA.com home page, participants were frequently confused about how to begin the enrollment and renewal processes from this page (see Figure 1).

Refinements to the CoveredCA.com home page for OEP 3 provided clearer options — particularly in the top navigation bar (see Figure 2, page 5). Most participants felt the website looked straightforward, clean, and official. While the home page still did not provide a "renew" button, renewal participants navigated to the "Account Sign In" link. Most new users

Figure 1. CoveredCA.com Home Page During OEP 2

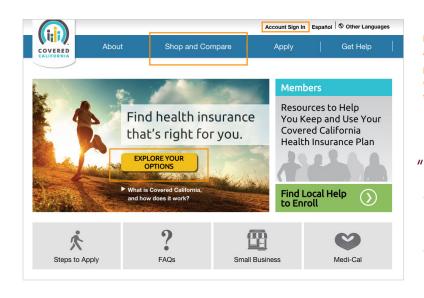
<page-header><page-header>

NEW ENROLLEES: Most participants were confused about the differences between these three sections and were unclear where to begin.

RENEWALS: "You're in" was not a clear indicator as a starting point, and the word "Renew" was absent from the home page.

"It's a little confusing because I want to look at new plans, and 'Explore,' 'Preview,' 'Apply' — these ones at the top, these all look the exact same . . . so I don't really know where to click first."

— Alonso, OEP 2



RENEWALS: All participants used "Account Sign In" as their point of entry.

NEW ENROLLEES: "Explore Your Options" was the favored starting point, with four selecting this and two selecting "Shop and Compare."

"Wished it would have made me create an account at the beginning. It seems like I'm doing the application process again, and I'd rather do it in one step." — Jacob, OEP 3

chose "Explore Your Options," which took them to the "Shop and Compare" tool.

2. In both OEP 2 and OEP 3, many participants spent a significant amount of time reviewing plan options in the "window shopping" parts of the website, not realizing that actual plan choice occurs only in the application itself. This confused participants and delayed progress in completing their application.

"I see different plans than what I was looking at before, so I am confused as to why I was looking at those [other] plans at first. This is more like what I was expecting in the beginning."

— Dan, OEP 3

Two tools — "Shop and Compare" on CoveredCA.com and "Preview Health Plans" within CalHEERS — are designed to provide consumers with a quick estimate of their eligibility and a view of the health plan options available to them. These are commonly known as "window shopping" tools. Consumers can access either of these tools before inputting all their application data. The final plan choices presented to consumers after completing their full application may be different from those shown in "Shop and Compare" or "Preview Health Plans" because the application draws upon more detailed data.

Most participants didn't understand this distinction. In both years, participants spent a lot of time, sometimes their entire session, in "Shop and Compare" and "Preview Health Plans" thinking this was the pathway to choosing a final plan and enrolling. This was observed even though language on the "Shop and Compare" page notes that the results are "an estimate only" and that consumers will "need to re-enter ... information during the enrollment process." Some participants abandoned the enrollment process or had already reached the end of the testing session by the time they arrived at a second (or even third) set of plan choices in their application and realized that they were not the same choices they had been evaluating in "Shop and Compare" or "Preview Health Plans."

In OEP 2, the "Preview Health Plans" link was featured prominently on the top navigation bar of the CoveredCA.com home page, drawing the attention of users. (See Figure 1, page 4.) In OEP 3, the "Preview Health Plans" link was removed from the top navigation bar, so research participants did not access that tool at the outset of their session. However, some still accessed "Preview Health Plans" later in the process, while filling out the application or renewal, not understanding that it did not present final plan choices. 3. Unclear guidance and questions related to income and size of household resulted in errors in critical sections of the application.

Household income and the number of members in the household are two critical pieces of information in the insurance application and renewal process. These data determine eligibility for Medi-Cal or for the level of subsidy consumers can access. In OEP 2 and 3, many participants were confused about how to answer questions related to income and household size, and the website was often of little help.

For income, common sources of confusion included:

- > Whether to include an unmarried partner's income.
- How or if to enter student loans.
- What to enter if they were currently unemployed but expected to start working in the coming year.
- How to complete the "Last Date Paid" field in the "Income" section of the application for current jobs. (Some participants missed the instructions to leave the field blank for current employment because of the placement of these instructions.)

Household income. In particular, the instructions in "Shop and Compare" for household income were unclear to users and seemed inconsistent. The instructions read: "Enter your projected income for the year in which this health plan will be effective. Self-employed individuals should include all taxable income and subtract any allowable self-employed expenses that they plan to deduct from their taxes."

One participant explained his confusion:

"Household income — so that means everyone in my family, everyone I live with, I assume. I'm not sure if it means just me or everyone. It says enter your predicted income. To me that's a little confusing because it says 'household income,' but then it says 'your projected income.'"

— Jacob, OEP 3

Another participant had questions about student loans:

"Given that I'm a student, I don't work full-time. The rest of the money comes from student loans, but that doesn't seem to apply here because student loans aren't taxable income. But that's just my assumption because I haven't had to declare my student loans . . . if I included my student loans . . . so perhaps I do need to include my loans in there. I might Google that."

— Dan, OEP 3

Household size. Participants were also confused about how to represent the size of their households. To properly fill out the application, users must include anyone in their "tax household," which means all those included on their tax return. However, unclear questions and help text left some wondering whether to include roommates, significant others, or parents.

In "Shop and Compare," the form instructions for entering household members do not mention tax household. The instructions read: "Enter the AGE of each person, whether they are enrolling or not. Uncheck the ENROLLING box next to the age for those household members not enrolling. Note: Premium estimates assume same age for each member as of coverage effective date."

"If I live with roommates . . . does this think that these are my family members? The head of the household . . . I guess I'm the oldest, but it's tricky because we're not really a family."

— Susan, OEP 2

The "Shop and Compare" help text for the question "number of people in the household" is more accurate and specific. This text read: "Include anyone you include on your tax return, including yourself, children who live with you, and any other tax dependents. Include household members here even if they do not need health coverage." However, not all participants clicked on the help text, and some counted people they live with but who are not on their tax return.

This confusion about how to answer income and household questions not only took up time but sometimes may have led to errors in eligibility determination.

4. Poorly designed online forms and processes frustrated participants and diminished their confidence in the site.

Signature for renewal page. In OEP 3, consumers renewing health coverage were required to complete a "Signature for Renewal" form, which asked them to confirm changes they had made to their application information and provide an electronic signature. All participants who encountered this form were confused by several elements:

- Instructions on the page did not provide adequate information for participants to understand what was being asked of them.
- Participants could not read the "types of change" they were being asked to confirm because the field box did not extend the full length of the text. Participants had to use a scroll bar to read the full text in the small text box, but some did not know to do this. (See Figure 3.)
- The page listed fields that participants said they had not made changes to.

The page requested dates and information for a specific change multiple times.

Renewal participants were required to specify dates (selecting from a calendar popup) and "reason for change" (selecting from a dropdown menu) for every change made to the application, and in some cases changes that were not made, making the process even more confusing. Choosing a date and reason could not be skipped, yet frequently, the choices provided did not apply to the consumer's specific circumstances. Some participants made up answers or chose an irrelevant option to satisfy these requirements. For example, one participant, who had no change in health status, was required to select a "reason for change" from options including "became pregnant," and "became disabled." In the end, she chose "became abled," which was not relevant to her situation, but she felt it was better than any of her other choices.

"None of these apply to me, but I have to put in something, or it won't let me go on. I'm not really giving correct information because they aren't allowing me to move to the next step without doing this."

— Anthony, OEP 3

ype of Change	Member	Reason		Event Date	"Type of Change" field does not display all text.
Household Member Home A		Other	•		
Primary Contact Home Addr		Other	•		

Figure 3. "Types of Change" Text Box

"I can't really see what I'm supposed to have changed. I don't really know what I'm signing right now because I can't read it. I wish they would have what the application question was so I would know what the point of reference was for this change."

— Liz, OEP 3

Creating passwords. Password creation was onerous and confusing. New enrollees received multiple error messages because they had not followed the eight requirements for creating a valid password — even though the rules are not provided at the outset of the process. All five participants who created accounts during the OEP 3 research became frustrated by the effort needed to create such a complex password. For one participant, it took ten minutes and seven attempts to create an acceptable password.

"This one is pretty annoying. They are making it difficult. It keeps saying it must not be a dictionary word. I'm not too sure what they mean by that. I honestly don't give websites that much time; I would almost be willing to give up and call it [quits] at this point."

— Ethan, OEP 3

Recommendations

Over the last three years, the gotoresearch user experience findings have provided insight into the practical, cognitive, and emotional challenges that consumers face in applying for or renewing their health insurance online with Covered California. The following overarching recommendations are based on these research findings:

- Covered California should conduct consumer usability testing regularly for continuous quality improvement.
- Covered California should monitor and report on website analytics that, in conjunction with consumer testing and other sources of data, can identify where in the online enrollment process applicants experience delays and errors.

The following changes are recommended to address this report's specific findings:

Further emphasize to consumers that the "Shop and Compare" and "Preview Health Plans" tools are not final plan selection.

- Consider adding a feature that allows users to save favorite plans identified in "Shop and Compare" to easily review them at the point of actual plan selection.
- Define terms such as "household member" explicitly and consistently in the text of questions and in all help text. Eliminate confusing terminology to the extent possible. Where required questions still might not be easily understood, such as the "Last Date Paid" field for employment, make explanations prominent and easy to find.
- Correct the design of the "Signature for Renewal" page so that users can read all text and duplicate confirmations are not required.
- Clearly list all password creation requirements in advance.

Conclusion

User experience research findings suggest that many consumers seeking to enroll or renew their coverage online with Covered California may have experienced similar problems. In general, study participants were experienced website users and did not have complex enrollment or renewal circumstances. The study outcomes were, in large part, the result of problems with the website and online application. Many of the difficulties that participants experienced have fairly straightforward and simple solutions.

While consumers can enroll in Covered California offline, in person, by phone, or by mail, providing consumers with a user-friendly and efficient online experience should be a top priority. In fact, for millenials, one of Covered California's key target populations, it is crucial.

However, after three years, consumer user testing continues to show that consumers are experiencing significant difficulty enrolling or renewing Covered California health insurance online. This report points to improvements Covered California should make so that consumers can have the first-rate online experience they expect and deserve when purchasing health insurance.