

Overview of Marketplace Survey and QHP Enrollee Survey

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Purpose

This issue brief provides background information about two new consumer experience surveys authorized by the Affordable Care Act (ACA). The surveys measure consumer experience with the Health Insurance Marketplaces (Marketplaces) and Qualified Health Plans (QHPs). Both were developed by the Centers for Medicare & Medicaid Services (CMS) with support from American Institutes for Research (AIR).

Background

Health Insurance Marketplaces are available in every state to help qualified consumers shop for, select, and enroll in high-quality, affordable QHPs. One way to understand how well the Marketplaces and QHPs are meeting health care consumers' needs is to ask consumers directly about their experiences with the Marketplaces and QHPs in which they have enrolled.

To that end, the ACA authorized the development and administration of two consumer surveys:

- 1. Health Insurance Marketplace Survey (Marketplace Survey)**—A survey of individuals who use the Marketplaces to shop for health insurance.
- 2. Qualified Health Plan Enrollee Experience Survey (QHP Enrollee Survey)**—A survey of adult enrollees in QHPs.

Both surveys are scheduled for national implementation by CMS in 2016. Each will play an important role in monitoring the quality of consumers' experiences and encouraging efforts to make improvements. CMS also plans to develop longitudinal databases to support future research on consumers' experiences with the Marketplaces and QHPs.

Overview of the Two Surveys

	Marketplace Survey	QHP Enrollee Survey
Purpose	To obtain consumers' perspectives on the services provided by Marketplaces	To obtain enrollees' perspectives on the services provided by QHPs
Anticipated users and uses	Marketplaces: To identify and improve their performance CMS and state regulators: To oversee the Marketplaces	Consumers: To inform their choice of a QHP through the Marketplaces Marketplaces and QHPs: To identify and address performance issues Regulatory and accrediting organizations: To strengthen their ability to monitor QHPs
Preliminary findings available to the Marketplaces and QHPs	Field test: Fall 2014 (<i>national Federally-Facilitated Marketplace (FFM) and State Partnership Marketplace (SPM) results only</i>) Beta test: Summer/fall 2015	Field test: Spring 2015 (<i>national FFM and SPM results only</i>) Beta test: Summer/fall 2015
Legislative authority	Sections 1313 and 1321(A) of the ACA	Section 1311(c)(4) of the ACA



The Marketplace Survey

Purpose of the Survey. The Marketplace Survey will evaluate consumers' experiences with the Web site, telephone call centers, and in-person support.

Survey Topics. Marketplace Survey topics include:

- Application process
- Cultural competence
- Health plan enrollment process
- Information seeking (Web, phone, and in person)
- Premium tax credit eligibility
- Specialized services

Anticipated uses and users. The survey results will provide actionable information that Marketplaces can use to improve performance. CMS and state regulatory organizations can also use the survey results for oversight.

The QHP Enrollee Survey

Purpose of the Survey. The QHP Enrollee Survey will assess enrollees' experience with QHPs.

Survey Topics. The QHP Enrollee Survey expands on the CAHPS Health Plan Survey 5.0 by incorporating existing CAHPS supplemental items as well as new survey items. QHP Enrollee Survey topics include:

- Access to care
- Access to information
- Care coordination
- Cost
- Cultural competence
- Doctor communication
- Health promotion
- Plan administration
- Prevention
- Shared decision-making
- Specialized services

Survey Development

CMS is working with AIR to develop the consumer experience surveys in a manner that ensures the soundness and usefulness of the results. The surveys build on the Agency for Healthcare Research and Quality's Consumer Assessment of Healthcare Providers and Systems (CAHPS®) surveys and principles, which are the national standard for assessing patient and consumer experience.

The surveys are being developed and tested in three languages: English, Spanish, and Chinese. The development process for these surveys ensures that they are scientifically valid and that they address the information needs and concerns of consumers and key stakeholders. The process involves a comprehensive review of the literature and related surveys; focus groups with consumers; stakeholder interviews; cognitive testing of new survey questions in all three languages; input from a technical expert panel that included representatives from the State-Based Marketplaces, consumers, plans, state regulators, and providers; psychometric testing in 2014; and beta testing in 2015.

Anticipated uses and users. The results of this survey will be publicly reported as part of the quality rating system beginning with open enrollment in 2016 for 2017 coverage. Consumers will be able to use the published results when comparing and choosing among competing QHPs. Survey results will also enable Marketplaces and QHPs to identify strengths and weaknesses and improve the services available from QHPs. CMS, state regulators, and other organizations may also use the results for regulatory oversight.

Technical Assistance Regarding Preliminary Survey Findings

Through CMS funding, AIR is providing technical assistance to support Marketplaces in understanding, interpreting, and using the results of the surveys. This assistance includes:

- Reports containing results for each Marketplace and comparative benchmarks (*starting in 2015*).
- Identifying best practices to help Marketplaces further improve consumers' experiences.