

**To: Vincent DeMarco, President
Maryland Citizens' Health Initiative Education Fund, Inc.**

**From: Steve Raabe, President
OpinionWorks LLC**

Date: January 2, 2021

Subject: Evaluation of the Easy Enrollment Program by Uninsured Marylanders

PROJECT OVERVIEW

This memorandum details the findings of four focus groups held among low-income uninsured Marylanders who file taxes, who are candidates for Maryland's new Easy Enrollment Health Insurance Program.

The project was designed to explore why people remain uninsured and what motivators would encourage them to enroll in coverage, and what adjustments are needed in Easy Enrollment messaging, forms, and follow-up to better engage the audience.

In consideration of health concerns prompted by the COVID-19 pandemic, these focus groups were conducted virtually using the Zoom platform between October 18 and November 1, 2020, among these audience segments:

1. African-American residents of Baltimore City
2. Suburban residents
3. Rural residents
4. Latina/o residents, conducted in Spanish

Our moderator, Shirley Martí, facilitated these groups using the discussion guide attached to this memorandum. Participants were asked about their general experience with healthcare coverage, their awareness of and initial reactions to the Easy Enrollment program, and their specific evaluation of the Easy Enrollment process based on a review of the Maryland Health Connection's landing page describing the program, the Maryland income tax return and possible alternative language, and the follow-up letter and postcard. They also commented on various ads that have been used for outreach, and the best methods of reaching them with information about this program.

SUMMARY OF KEY FINDINGS

As a new program, we found awareness of the Easy Enrollment Program to be low, though two focus group participants could remember encountering the checkbox on the income tax form last year. But once presented with the concept in detail, participants responded very positively. They found the

Evaluation of the Easy Enrollment Program by Uninsured Marylanders

January 2, 2021

Page 2

concept logical, sensible, and appealing. Knowing the State of Maryland is sponsoring the program made it feel trustworthy.

Healthcare is an emotional topic for people today. Anxiety about COVID-19 as a health concern was palpable among the people we interviewed, and that is compounded by the economic strain that the pandemic has added to the lives of so many of the people we interviewed. These groups were populated by two types of people:

- Those who have been unemployed or economically vulnerable for a significant period of time and are accustomed to going without health coverage intermittently or permanently, and
- Others who recently became unemployed – often related to the pandemic – and lost employer-provided health coverage or the economic means to pay for their own insurance. The latter segment was often still shellshocked by the recent change in their status, grieving about what they have lost, worried, and largely unaware that free or low-cost insurance is available to them. They thought they would not qualify for assistance under this program if it relied on last year's tax return, when their economic status was so different.

The implications go to messaging. The former group will likely respond to traditional appeals to “free and low-cost” coverage, and a process that is easy. The latter group need to know that this unique program is even available, that they will likely qualify, and that eligibility is based on their current status.

We also observed a second dividing line in these focus groups that animated people's reactions to the program and its follow-up mechanisms:

1. Those who want health coverage immediately, with the least delay and shortest process, causing them to look for the ability to apply right away online or to reach out proactively to a navigator. People in this group tended to argue for electronic means of follow-up, whether email or text messages. While they would welcome mail, they did not want to wait for it, especially in this era of delays at the US Postal Service. They also worried about whether the State has the capacity to administer this program and process enrollment applications given staffing shortages brought on by the pandemic.
2. A second cohort see health insurance coverage as a big decision, and feel that they need time to evaluate their options. They are not in a hurry, and think instead that building a little time and space into the process is a good thing so they can do their homework. This group wanted to separate the enrollment process from their tax filing, though they were happy to check the box to get things rolling. They were also likely to ask for the ability to speak with someone to help them sort out their best option. They welcome all the help they can get and do not want to navigate this process alone.

Both of these mindsets need to be accommodated by the Easy Enrollment Program and its follow-up.

Regardless of where individuals fell in the categories just outlined, these overarching themes resonated throughout the research:

1. Validation: People worry about the security of their personal information and want to be sure this is not a veiled attempt to take advantage of them. Consequently, they like knowing that the State of Maryland is behind this program, and they want explicit reassurances in writing that their information will not be shared beyond the immediate purpose of enrolling in health coverage.

With that in mind, the identity of Maryland Health Connection could be connected even more closely to the State than it appears today on the web landing page and other materials reviewed in the focus groups. The friendly and casual tone of several of the communications we tested may be better served with a crisper, more urgent, more official-sounding tone. Many people view this as an important decision, a “life decision,” and they would feel reassured if communications treated it that way.

2. Predictability: Time and again, these audiences asked for specifics. Will I qualify? How much will this cost? How long does this process take? When will my coverage actually begin? Communications and outreach should be focused on giving people the clarity and specifics they are seeking. In almost every case, focus group participants gravitated toward communications that gave them this type of specific, direct, and relevant information over softer, more general information. In this regard, the follow-up letter stood out among all the communications we tested for its clarity and specificity, and the multiple contact options it offered.
3. Immediacy: As outlined above, many focus group participants want to shortcut the application process, either because they urgently need coverage, or they fear that they may lose their motivation or ability to focus on a lengthy process. That leads them to ask for a link they can visit right now to enroll in coverage, as well as text messages and other electronic forms of follow-up. They also worry about delays introduced by the Postal Service, or by the State’s lack of capacity during COVID times to process their application, so they want to do what they can to move the process along faster. Additional follow-up methods, focused on electronic means such as text messages, links, and pop-ups, should be built into the process
4. Personal Agency: People like declarative language that keeps them in control of this process. That causes them to opt for the “I authorize...” language that is currently connected to the tax form checkbox over the more casual “Please ask...” language that we asked them to consider. This also extends to the decision-making process, with a number of respondents asking for the ability to talk this over with a person who can help them consider their options, so that they can make a well-informed final decision.
5. Accessibility: Latinx residents want communications in Spanish, even if they are English-proficient, to help ensure they understand the program and are not misunderstanding any key information. Younger residents want visible spokespeople who reflect their age and demographic to let them know this program is aimed at them. And people want multiple means of responding to this program, whether right in the tax form, by phone, or online.

RECOMMENDATIONS

These focus group discussions have produced a list of specific recommendations we offer for messaging and follow-up for the Easy Enrollment Health Insurance Program:

1. Retain the existing tax form checkbox language, with its official tone and sense of personal agency. But refine the phrase “for the purpose of determining pre-eligibility” to be more approachable and understandable.
2. More explicitly provide written assurances about the security and confidentiality of personal financial information in the checkbox language, on the landing page, and elsewhere.

Evaluation of the Easy Enrollment Program by Uninsured Marylanders

January 2, 2021

Page 4

3. In addition to requesting an email address on the tax form, include a request for a mobile phone number for text message follow-up.
4. Employ text message reminders along with the mailed postcard. Include a link and a phone number in these texted communications. Issue these follow-ups as quickly as possible so interested people do not lose focus or interest.
5. Build a greater sense of urgency in the postcard and focus on the deadline, rather than employing a softer “Congratulations” theme.
6. In all communications, employ the factual and direct approach found in the letter, rather than the more casual and conversational tone that is embodied in some other communications.
7. In response to the leading question on the minds of most uninsured people, put the issue of cost and affordability front and center, with a prominent button on the landing page directing people to the “Get an Estimate” page or a similar calculator.
8. Give a better sense of timing on the landing page and in basic communications, not just under FAQ, of how quickly people can expect their coverage to begin. In connection with that, clarify what is meant by “you only have 35 days to enroll.”
9. For people who are nervous about the gravity of this decision and want assistance, make the availability of live navigators more prominent, and better feature the phone number to reach them.
10. Similarly, include short explanatory video(s) on the landing page.
11. If a worksheet is included with the tax form, make it as streamlined as possible and focused on determining eligibility. If possible, do not include a request for future income, which is difficult and off-putting. Do not provide a worksheet as an alternative to requesting an email address (and/or mobile number), but *in addition* to that request.
12. Better emphasize the Maryland Health Connection’s affiliation with the State of Maryland to reinforce a sense of legitimacy around this program. Better describe the relationship between the Comptroller and the Maryland Health Connection on the landing page, and clean up the brand confusion found there and elsewhere (Maryland Health Connection, Maryland Health Benefit Exchange, MHBE).
13. Address the impact of the COVID-19 pandemic in creating a new segment of uninsured people who are not used to lacking health insurance or accepting public assistance. Messaging for them may need to be more focused on discovering that these resources are available, and emphasizing that eligibility is based on your current situation, not past income.
14. Engage the newly uninsured population through the State’s Unemployment system.
15. In promotions, include personalities and appeals that reach multiple ages and ethnic backgrounds.
16. Provide key documents in Spanish.

Detailed observations follow.

DETAILED OBSERVATIONS

About the Audience

This project was focused on the segment of Marylanders who do not have health insurance coverage, who earn below a threshold that would qualify them for reduced-cost or no-cost health coverage, and who file taxes in Maryland. Focus group participants were placed in one of four groups: urban residents focused on Baltimore City, suburban residents, rural residents, and Spanish-dominant residents. (Note that the Latinx focus group was conducted in Spanish, and verbatim quotes have been translated.)

Given the COVID-19 pandemic and the health risk that introduced for gathering people together, these focus groups were conducted virtually, using the Zoom platform. Though there is some loss of group dynamic when people are not in a room together freely interacting, that is balanced by the window we open through the digital platform into people's authentic lives and situations, as we see them in their homes or other real-life surroundings, sometimes with family members in the background. These groups were no exception in the authenticity they delivered.

The Impact of the COVID-19 Pandemic: Unemployment, Loss of Health Insurance, and Overwhelming Anxiety

Some participants in the focus groups were long-term uninsured, saying they felt too healthy to need coverage, or more commonly doing a cost-benefit calculation, weighing a possible health insurance premium against the risk of getting sick. Several people, including four of the seven Latinx participants, described dropping coverage because they felt the premium was just too expensive. Others said they were conscientious about eating well and exercising to keep themselves healthy and stave off the need for health insurance coverage. Most of the long-term uninsured were at least worried about their situation, if not outright dissatisfied. From gambling nervously that they would stay healthy to feeling mistreated by the healthcare system, motivation to seek coverage was ample. Here is one woman reflecting on her situation:

"It's easy to find coverage for the children, but for me as an adult, it's not easy to find coverage. And definitely not easy to find quality coverage. And I feel like I'm just treated a little differently. As soon as someone (a healthcare provider) hears that I don't have health insurance, like, 'Oh, okay. Well.' And then it just feels like I'm just treated differently. Not as well." – Baltimore Participant

In addition to the perennially uninsured, these focus groups were also populated by people who were used to having a job with employer-provided health coverage, but lost their jobs early in 2020 due to the pandemic. In the context of these focus groups, the impact of COVID-19 was striking and sometimes overwhelming. The pandemic was a pressing concern for everyone, causing anxiety and impacting many aspects of daily life. But for some focus group participants, their recent loss of employment due to the pandemic was a direct and relevant factor in the discussion of the Easy Enrollment Program:

- A young man in his late 20s who had been laid off from his only job since college and was facing unemployment for the first time,
- A Latina mom who felt she needed to quit her job to stay home with her small children so they could navigate virtual schooling,
- A chef who found herself with no income when her restaurant closed down,
- and many more examples.

Some of these people appeared shell-shocked at the change in their financial status and new lack of financial security. They openly expressed their grief and anxiety. They worried about their new lack of health coverage, a worry that was exacerbated by the health risks associated with the pandemic.

For the recently uninsured, there was a fervently expressed desire for health coverage to replace what they had lost. Within their traditional mindset of being employed and financially stable, it did not seem to occur to many of them that they could qualify for low-cost coverage. For the longer-term uninsured, there were several who were newly focused on seeking coverage due to the pandemic, or changes in their life circumstances. These desires bumped up against the specter of what they perceived would be a high cost for coverage.

"Thankfully I've always been healthy. I've never really gotten sick and my son is covered. But since this pandemic started, it's like, if you get sick right now, besides getting sick, now you also have to find out if you have COVID and that could be even worse. And also because nobody's hiring right now and without work, we can't really have health insurance. So what I'm looking for right now, instead of just looking for a job, I'm also looking for a job that provides all benefits, all included." – Latina Participant

Some have made the calculation that the cost of being covered, given the financial strain they are under today, is just not worth it. They would rather risk it and make every attempt to stay healthy. This is how one participant described his calculation:

"With everything else going on in your life and not having a regular paycheck and doing some consulting projects, which don't pay anywhere near what you were used to making from my job, I just didn't want to spend the money. So I did briefly, kind of glanced at it, but I just wasn't ready because I've never paid out of pocket for healthcare. I've always had it provided by an employer, paid a small percentage like, I don't know, like 10%...payroll deduction. So I mean, as soon as I saw costs, I was like, 'No, I don't have that kind of money to spend.' I'd rather just take a chance." – Suburban Participant

Focus group participants across-the-board said the biggest thing COVID has taught them is resilience and resourcefulness. These are some of their observations:

"I would say resiliency. This whole pandemic has put a lot of people through a lot and all different walks of life, ages, creeds, backgrounds, and so forth. So I think a lot of us have, and myself I'll speak for myself, have had to learn to work with less, work with more creativity and look for happiness in different places other than what we may have thought happiness was found in previously. ...That's what I've had to do." – Rural Participant

"I've been forced to become a little versatile." – Baltimore Participant

"I think one of the biggest things is learning how we ourselves can adapt, how we can be flexible and change with it." – Suburban Participant

"Thankfully, I have nothing preexisting, and...I pay attention to what I eat, and...be resourceful. So it's less meat, more vegetables, what's on sale, maximize what I've got. And the food bank is my friend." – Rural Participant

"What I learned about myself in COVID is, my patience is very thin. It really is, because of my kids are at home and I'm really working on it, right?" – Rural Participant

Though all of us hope and expect that the pandemic is a temporary condition that will soon be behind us in a public health sense, it is likely that the dislocation it has caused in people's lives will be with them for a long time, as will many of the anxieties and motivations that are animating people during this pandemic. That reality should be in mind for the foreseeable future as the Maryland Health Connection and its partners plan their messaging and outreach.

Experience with Health Insurance Coverage and Reasons for Not Signing up Now

Beyond perceived cost, focus group participants offered a number of reasons for lacking coverage. These are the most common reasons they mentioned.

Fear of an Onerous Process: A number of people said the process of shopping for coverage is onerous, and they did not think they could follow through. This artist in Baltimore said he knows he should get coverage, but he just puts it off because he is “focused on his art,” even though an aunt is often encouraging him to sign up. Though his comments are more colorful than some others’, his attitude is not unique.

“Normally whenever I try to arrange (healthcare coverage) or try to shop around, sometimes I feel like I get overwhelmed and then I’m like, ‘Hey, I’m not sick right now, anyway.’ It’s super stupid, super stupid. It’s actually super stupid. But...I am definitely one of those people when something seems like it is taking a little bit too long, or I hit a speed bump...sometimes I get a little discouraged and I might just go into a totally different direction.” – Baltimore Participant

Need for Personal Guidance and Support: Many people feel the process of evaluating health plans is too complicated for them, and they do not feel equipped to do it effectively. They want someone to walk them through the application process personally.

“I don’t like automated, just fill out an application for something. I like the actual human beings to help me walk through the application process. So I don’t make any mistakes.” – Baltimore Participant

“I think that the more assistance...that you have, from a consumer standpoint, it makes it easy...to make a decision. When you’re left independently, of course, you might have the ability to discern how to navigate or how to make a particular decision yourself, but it always helps when you have a learned person, that is a master in that field, so you can ask any particular question.” – Baltimore Participant

Lucky or Invincible with Their Health: A Latino focus group participant said health insurance might be for other people, but it is not for him because he is healthy, and maybe lucky:

“Have you taken care of yourself and you don’t...have an illness or anything like that? I believe that you would be okay without insurance. But if you are somebody who gets sick often, that is always getting hurt or something happens, then maybe it’s better to have insurance. But for me, I’m really lucky. Nothing has happened to me to this point in my life. So I think that sometimes we have it because we have to have it, but I don’t think it’s important.” – Latino Participant

Worried about COVID: It is well-known that fear of COVID-19 may be discouraging some people from seeking care for other health concerns because they do not want to expose themselves to the virus in a healthcare facility. But COVID concern may even be discouraging some people from seeking health coverage at all, an idea expressed by this suburban resident:

“(There is) so much that we haven’t learned about this virus and we still don’t know. And that was the main factor with me without having healthcare. I was like, ‘Do I need it right now? Because I’m scared to go to the hospital even.’ You know what I mean? Because I can catch it there. So it was more in the lines of me having that fear of even going into a place where I know people have COVID. Should I have the healthcare to use it and not even go? You know what I mean? It was crazy.” – Suburban Participant

Disappointing or Inadequate Coverage in the Past: Experience with a prior health plan with poor coverage and many out-of-pocket costs can leave a lasting impression, causing a consumer to doubt whether it is worth it to have health insurance at all, as this Latina participant explained – but then added a little element of doubt at the end of her statement.

“And I knew that with (my insurer), I had to make some copays and they would tell me, ‘Oh, you’re not covered for this, you’re not covered for that.’ And they were always charging me. That’s when I decided not to have health insurance and pay for the fine instead. ...And it was rare, the times that I went to the doctor, because most of the time I did it mostly as precaution because we are all young and we try to eat healthy and take care of ourselves. ...my mentality is, I’m paying for insurance and it’s just a waste of money because I never... I hardly ever go. I hardly ever get sick. But the reality of life is that we never know when we are going to get sick. And when we don’t have insurance, we get sick.” – Latina Participant

No Plan of Attack: A suburban resident said he is “trying not to worry” about lacking coverage after losing his job earlier in the year. At the time of the focus group, he remained on COBRA, which proved invaluable to him given an August hospital stay. But the end of his COBRA period was looming, and he felt worried, and did not have a plan of attack for finding new coverage.

“I was lucky enough to not have to worry about any of my hospital bills or anything like that. ...(But) it is temporary, so I’m scared once it runs out what I’m going to do next. And I’m trying to look into the programs or hopefully find another job that will afford me the coverage. But it is also like, I’m just lucky enough to have it right now and so I don’t have astronomical bills from that hospital stay, or if I happen to get sick. So it’s like, I’m winning in one sense, but also it’s like, I have this ax hanging over my head because when it ends I don’t know what I’m going to do.” – Suburban Participant

Don’t Know the Process: A young Latina explained that although health coverage had never been important to her in the past, it had become very important to her lately because, “Now I want to start creating a family and have children (but) having a child is not affordable.” She feels frustrated because, though she is aware that low-cost coverage is available through Obamacare, no one has explained to her how to sign up.

“The truth is that... I heard about Obamacare. I knew that Obamacare exists, but I don’t know if you need to apply or what are the requirements to apply. When I didn’t have insurance, I wanted to apply and I should have done research to find out more about it. But I really don’t know if we have to apply or you have to meet certain requirements. I really don’t know that part.” – Latina Participant

Note that throughout these focus group discussions we detected no negative feelings towards Obamacare among the people we interviewed, and no stigma associated with Medicaid or accepting subsidized coverage. Several people in the focus groups had been on Medicaid and other forms of public assistance in the past, and many had been through the process of filing for unemployment assistance over the past year.

The Easy Enrollment Program

A Positive Reaction to the Easy Enrollment Program

When introduced to the concept of the Easy Enrollment Health Insurance Program, the reaction was positive. Participants took it in stride. The program seems logical for people who have a strong desire for health coverage, as well as for others who are less motivated and just want the process to be easy.

Awareness of the Easy Enrollment Program was very low. One person in one group who prepares her own taxes said she could remember the question on the tax form about health coverage, but she had not heard of the Easy Enrollment Program. Another had a vague memory. Several participants were aware of Maryland Health Connection and two even called it out by name, but the Easy Enrollment Program was not yet known to them.

The moderator introduced them to the Easy Enrollment Program by putting the Maryland Health Connection's landing page for the program on screen and reading through it with them. (See image of the landing page on the following page.)

Upon learning about the program, reactions were very positive. A rural participant who was recently unemployed and lost his employer-provided health insurance was bowled over, putting it this way:

"I think it's brilliant, quite frankly. I like it. I wish I knew about this before. I had no idea it existed."

– Rural Participant

Though more emphatic than some other people's, his positive reaction was typical. These are other first impressions expressed by participants:

"It's very easy." – Latina Participant

"I think it looks great. I mean, I would do it." – Suburban Participant

"I like the fact that...that's how you show your residency by your taxes. ...I don't have to pull out a lease, I don't have to pull out a driver's license. It's just right there, it's legit. No questions asked."

– Baltimore Participant

Understanding the Easy Enrollment Program

The Easy Enrollment Program landing page was clear and well-presented. Participants felt they could readily understand the steps in the process. The language felt accessible to them. Though they followed up with many specific questions as outlined below, based on a fairly quick review of the landing page the basic purpose and structure of the Easy Enrollment Program was clear to them.

"I think it's presented well, it's understandable. They take out a lot of the legalese that I feel sometimes you fairly frequently see with different medical options or different healthcare options. So I would be for it." – Suburban Participant

"It has a clean interface. It's pretty colorful. The icons are pretty large. ...It looks good."

– Baltimore Participant

The landing page is very focused on process, rather than the rationale or purpose of the program, or motivations for checking the box. Therefore, people's thoughts and the focus group discussion immediately went down a process path. Most people found the process straightforward and easy. This Latino participant illustrated that school of thought:

"I think it's really easy. If you read and you do what the website says, I think it's easy. ...(A)ll you have to do is check the box. Put a check mark in the box and that's it." – Latino Participant

But a subset of the focus group participants, particularly those who expressed an urgent desire for health coverage right away, worried that the process would take too long and introduce too much uncertainty. The comment of a Latina participant illustrated this divide:

"I think that process is very long, long for someone who, let's say needs health insurance, like ASAP."

– Latina Participant

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How to Enroll Health Coverage After You Enroll Find Help FAQs Create Account SIGN IN

Maryland Easy Enrollment Health Insurance Program

Home > Maryland Easy Enrollment Health Insurance Program

This tax season, you will be able to sign up for health coverage through an innovative new pilot program.

Beginning in 2020, you can indicate on your tax return if you would like the Maryland Health Benefit Exchange, the state agency that runs Maryland Health Connection, to estimate your eligibility for coverage. If you file your taxes by July 15, this selection launches an easy process that will help you enroll.

How it works:

- 1. Check the Box:** If you've filed taxes before, you may remember a question that asks if you have health insurance. This year, you'll see a new question on your state tax forms (502 and 502B). This question will ask if you want to share some of your information, like your household size and income. By checking the box on the tax return, you are giving permission for the Comptroller to share information with Maryland Health Connection.

- 2. File your taxes.** If you check the box, after you file your taxes, the Comptroller of Maryland will share the information you provided with Maryland Health Benefit Exchange, the agency that runs Maryland Health Connection. We will check to see if you may be eligible for free or low-cost health coverage.
- 3. Receive a letter.** Shortly after you file your taxes, we will mail you a letter explaining your eligibility for free or low-cost health coverage. Many Marylanders qualify for savings. In fact, 9 in 10 Marylanders who enrolled through Maryland Health Connection last year got savings. **You will have 35 days from the date on your letter to sign up for a health plan and access these savings.**
- 4. Enroll through Maryland Health Connection:** Once you receive your letter you can login into your account or create an account to explore your health plan options and enroll. When you begin your application, a new Special Enrollment question will ask if you or a household member received a "Tax Time SEP" notice. If anyone in your household is already enrolled, you can still add uninsured household members under "Reason for Change." You can also apply by phone by calling 1-855-642-8572 or get free, in-person assistance from a certified navigator. Contact information for navigators is included in your letter. **Remember, you only have 35 days to enroll!**

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Residents like this Latina would like to know that they can enroll quickly, without a long waiting period. Communications about the Easy Enrollment Program may want to include the idea that “if you act quickly, you can enroll and be covered quickly.” That is the bottom line for many people. Uncertainty, and concern about a long and difficult process, could hold them back from applying, they indicated.

“...even though the platform allows you to kind of request the information from your taxes, which is good, I think all it's just doing is sending a prompt, sending some information to you like a request for information. I guess it's good if you want to start the process, but I wouldn't necessarily look for this. I (would rather speak) directly with a person.” – Baltimore Participant

Throughout the focus group discussion, participants like the one just quoted – those with a more urgent desire for health coverage – indicated that they would show initiative if communications around the Easy Enrollment Program always featured the ability to shortcut the process and go straight to an application right now, whether through a phone number or a link. About half of the Baltimore City group and half of the rural group wanted to apply for health coverage immediately, within the tax form itself, or through instant follow-up.

“It's like putting the product already in our hands. So that way we don't go off and get distracted or forget about it.”

*“You can maybe be given a link afterwards? Once you check that box, you get a link sent to your phone or something where you can then go off and decide what you want to do.”
– Baltimore Participants*

The landing page did a great job letting people know how the program works. Focus group participants appreciated the clarity about the steps in the process. But the landing page lacked some information they were looking for. These were the questions that focus group participants raised as they read through the landing page:

- **What is the cost?** This is the first question that is on almost everyone's mind. Though the answer is complicated and will vary based on many factors, the participants wanted to get a general sense of cost. In reviewing the landing page, by the way, none of the four groups discovered the “Get an estimate” page that can be accessed by asking the virtual assistant a question about cost. This feature should be made more readily accessible through a direct button on the program's landing page.

“They say low-cost health coverage. I just want to know, what did they consider to be low-cost? Because what they consider to be low-cost, might not fit my budget.” – Baltimore Participant

“It says you're going to save, but it didn't say how much are you going to save.” – Rural Participant

*“Are they going to give you the plans that you've been approved for based on your income taxes?”
– Latina Participant*

- **When does my coverage begin?** People want an expectation. If they meet the 35-day deadline to enroll, how much longer does it take for their coverage to be in force? If they have an urgent need for coverage, what is the soonest their new health plan could take effect?

“Now what it doesn't say, it doesn't say when my coverage will begin. I have 35 days to respond, to get the health insurance. But then...?” – Suburban Participant

- **Will my information be secure?** In almost every group, people expressed a profound worry about the security of their personal financial information, when that information is shared. They wanted it explicitly stated that their information will be handled securely, and not shared further.
- **Can someone explain it to me?** People were both looking for a video introduction to the Easy Enrollment Program on the landing page, and also a clearer pathway to speaking with a live navigator. Currently, the phone number is buried in the text under Step 4, and many people missed that.

“I wish they had a virtual lady or man explaining how everything worked. Read the paragraph, but if you want further information, click here and then a little virtual person talking would break it down even more.” – Rural Participant

Several participants said they want to have a person explain their options for coverage, as well as the process of applying for coverage. Some asked for explanatory videos on the website, and others were eager for the phone number to be front and center, with a call center that is sufficiently staffed that someone will be available when they call.

“I don't mind doing stuff online, but sometimes I will love just to be able to call someone while I'm doing it because sometimes I can overlook things.” – Rural Participant

- **What documents do I need?** Some people expressed wariness that they could go through a long process and then be denied. They wanted a better sense of expectation up front, including a specific sense of what documents they would need to provide to validate their information.

“I was wanting to know what their proof of your address in Maryland would be. I stay with my family, so I don't have a lease.” – Baltimore Participant

- **Will the tax people be knowledgeable about health insurance?** Because this process initiates on their tax return, some participants were not confident that the sponsors of this program would be knowledgeable about the health coverage that is available. Some did not understand the handoff from the Comptroller to the Maryland Health Connection.

*“If I asked them about any of the health coverages, will they be knowledgeable about it?”
– Baltimore Participant*

Such participants may not have been clear about the role of the Maryland Health Connection, or its relationship with the Comptroller. Though clearly branded with the Maryland Health Connection logo, the landing page refers to Comptroller of Maryland, Maryland Health Connection, Maryland Health Benefit Exchange, and MHBE, while using the first-person pronoun “We.” It is not clear who is speaking. Greater clarity could be provided visually and/or in the content on the landing page to affirm the relative roles of the two entities that are collaborating, so applicants have greater confidence in the process.

Other Questions about the Program That Arose in Discussion

35 Days: The concept of having “35 days to enroll” was confusing to some. They did not necessarily understand that the 35 days is a deadline for them to act. They did not know if the 35 days included a waiting period once they submitted their application. They worried about delays introduced by the Postal Service and wondered how that factored in. Overall, they just wanted to know what to expect.

*“Is it 35 days from, you have 35 days from that the dated letter, or from the day you receive the letter?”
– Suburban Participant*

“Is it 35 days before I get my answer back?” – Baltimore Participant

“I just need to know, because now I'm getting a postcard, and (it says) you have 35 days. Like I said before, I don't want something that's going to take forever. So just a little disclaimer at the bottom, ‘Typically enrollment... the process from start to finish is 35 days.’” – Baltimore Participant

Eligibility: Several people wanted to know what period of income is used to determine eligibility. For example, two suburban residents who had experienced job loss in 2020 expressed a concern that the prior year's income, as reflected in the most recent tax return, is much higher than it is today, likely making them ineligible for free or low-cost coverage. The landing page did not explain that eligibility is based on current income, and they keyed in on that omission.

“My whole year of income may not be a good determination of whether or not at this moment in time I'm eligible for low-cost (insurance). I'd rather have maybe instead of using my last year's tax return, which is to me not a current indicator of where I'm at financially, I'd rather be able to go onto a website and say, ‘What is your current income? How much are you currently making per hour? What's your current salary? What's the income coming into your household?’” – Suburban Participant

“...what happens if I had a really good year, I had a really good job, paid well, and then the next two years, I'm not doing very well? They're going to use that against me. ‘Well, gee, sir, you were making all sorts of money. You're not eligible for this low cost. We're not going to look at you.’ I think it should be today only, not based on a year and a half ago where things may have changed. You may not even have had the same spouse if you got a divorce or you got a marriage. So many things change each year. So just to base it on one actual tax statement, to me, I just have a little difficulty. I'd rather go online and get an immediate answer right at the second, kind of like almost like applying for a loan.” – Suburban Participant

This misunderstanding would be reason enough for these residents not to participate in the Easy Enrollment Program. Given this concern, one participant described his attitude towards the program as “apprehensive.”

A Positive Response to Knowing the State of Maryland is Sponsoring This Program

The landing page did not clearly communicate to some people that Maryland Health Connection is a State of Maryland entity, even though there is a “Maryland” icon at the bottom of the page. Knowing or learning that the State is behind the Easy Enrollment Program makes the program seem legitimate and helps alleviate concerns about sharing personal information. It also seems to remove most concerns about a program sponsor who might have profit motives or other unknown intentions, and places the program more on the side of the consumer, in the minds of focus group participants.

*“To me, it shows that it's reputable. ...To me, if this is through the State of Maryland, not that everything that the government does is perfect, but this tells me that this is something that's legit.”
– Baltimore Participant*

*“It seems like they care. They (are) making sure people have insurance. So that's a good thing.”
– Rural Participant*

During these COVID times, though, there is a concern about the effectiveness of state government that overhangs the discussion. Some participants expressed concern that the State apparatus was overwhelmed right now and lacked the capacity to respond to residents' needs. They worried that this process could be bogged down, and there could be a long waiting period for coverage. Two participants in the suburban group used their experience and what they had heard about other people filing for unemployment as an example.

Evaluation of the Easy Enrollment Program by Uninsured Marylanders

January 2, 2021

Page 14

"Everything with the State right now seems to be a mess. Everything from unemployment to... (you) can't go in and meet with someone, no one seeming to get back (in touch with you)." – Suburban Participant

"...because of Maryland's slowness in processing unemployment, one wonders, one wonders, is this going to be processed as slowly?" – Suburban Participant

In response to that comment, the moderator observed, "I see a lot of heads nodding." Despite those concerns about the State's capacity to efficiently administer health insurance applications, people uniformly said they liked the idea of applying for health coverage when they filed for unemployment benefits.

"I like that, I like that, I like that." – Suburban Participant

"...as soon as you walk in Unemployment, as you do paperwork... Have the flyers right there that you can take, or even like rip a piece off. And that to me is pretty powerful way to hit the people. I guess the State needs to look at where are people that need health insurance. Where are they hanging out? They're hanging out at the Unemployment office." – Suburban Participant

Reactions to the Tax Form Checkbox

Participants reviewed the tax form checkbox. The first blush reaction was positive. It looked official and no-nonsense to them, and people found that comforting.

"Health Insurance is very important to me. If this is going to get everybody in the family covered and I see it's going through Maryland... I'll check what I have to check."

"Yeah, it seems very official. It has the unique bar code... And the font and everything is (official), and if I can read it and not be confused, then yeah. It's pretty easy and user-friendly."

– Baltimore Participants

The image shows a portion of the Maryland Form 502 Resident Income Tax Return for 2019. The header includes the form number '502', the title 'RESIDENT INCOME TAX RETURN', a barcode with the number '195020150', and the year '2019 Page 2'. Below the header, there are fields for 'NAME' and 'SSN'. The main section is titled 'MARYLAND HEALTH CARE COVERAGE' and includes three checkboxes with corresponding text: 'Check here [] If you do not have health care coverage', 'Check here [] If your spouse does not have health care coverage', and 'Check here [] I authorize the Comptroller of Maryland to share information from this tax return with the Maryland Health Benefit Exchange for the purpose of determining pre-eligibility for no-cost or low-cost health care coverage.' There are also fields for 'DOB (mm/dd/yyyy)' and 'E-mail address'.

People had few reservations about checking the box authorizing the Comptroller to share their information with MHBE. This participant, though, expressing the concerns of several others, wanted a more overt certification that the Comptroller and MHBE would be careful with his information.

"It doesn't mention whether or not they dump your information, whether or not that information has the ability to be shared with a third party. ...I want a clear breakdown of exactly how the information is used."

– Baltimore Participant

A Need for Clarity of Language and an Expression of Personal Agency

Focus group participants were asked to compare the current tax form language with a possible alternative. The rationale for the alternative language was to offer simpler language that was easier to understand, and to better highlight the appealing feature of “free or low-cost health insurance.”

This is the current tax form language:

I authorize the Comptroller of Maryland to share information from this tax return with the Maryland Health Benefit Exchange for the purpose of determining pre-eligibility for no-cost or low-cost health care coverage.

This was the proposed alternative language tested in the focus groups:

Please ask Maryland Health Connection to see if we can get free or low-cost health insurance. The Comptroller of Maryland may share information from this tax return for that purpose.

For most participants, the more formal and authoritative language on the current tax form felt more legitimate and reassuring. As stated, they wanted to know that their personal information would not be shared or sold for other purposes. The slightly more stilted, official-sounded language seemed to give people with privacy concerns more comfort.

“I'm not going to lie, you were better off kind of using some of the professional jargon, because... just hearing that in...a different wording, it does come to raise some red flags.” – Baltimore Participant

In the Latinx group, where participants had a wide range of English language proficiency, the preference was unanimous for the existing tax form language, rather than the proposed alternative. It felt to those participants that the State was taking responsibility for looking into their eligibility and making a determination – even looking out for them – while the alternative language suggested there was more responsibility on *them* to look into it and figure it out.

Like the other focus groups, a majority in the Suburban focus group preferred the current wording. Two of those participants explained that they appreciated the tone of the current wording as more personal, more active, and asserting their own control.

“I prefer the ‘I authorize’ first person. I think it's easier, more easily understandable. I believe it puts more of the onus on myself. I feel like I'm in control of it. It's not passive.”

“I agree 100%. I like that. It's very authoritative. I authorize somebody to share my tax return. I'm giving the authorization, and that's really the purpose. The second one to me just seems a little wishy-washy where you're saying, ‘Please ask.’ That's like me saying, ‘Please ask Shirley (the moderator) if I can go to the bathroom for a minute and take a break.’ But I'm not asking.”

– Suburban Participants

The “Please ask” language sounds very “casual” to some ears. A third Suburban participant summed it up this way:

“The ‘I authorize’ is very black and white, ...where ‘Please ask’ is just like throwing it out there. I feel like if I stated, ‘Please ask,’ I wouldn't get a response back from anybody in a specific set of time.”

– Suburban Participant

Another participant, who slightly preferred the alternative wording, said she would have chosen the current wording if it was clearer that her information would not be shared beyond MHBE. Her thought was to add the words “and for that purpose only” to the end of the statement.

People who preferred the alternative language mainly seemed to find it more approachable. It was a bit easier for some to understand, or felt friendlier to them. But they were more ambivalent, and their reasoning was not as clear as those who preferred the current wording.

Bottom line: The official-sounding tone and assertion of personal agency and control embedded in the current wording helps allay concerns many have about the legitimacy of this request, and the security of their private information. That said, there is merit in adjusting the phrase “for the purpose of determining pre-eligibility” to make the language more approachable.

Some Notes of Sensitivity about Latinx Residents

As a special point of sensitivity among the Latina/o residents, it was noted that many immigrants, and even second-generation residents, feel they need to be on the lookout for hidden meanings or tricky implications in things they sign, particularly if they are written in English. A Latina paused the group at one point to make the point explicit:

“It’s very important that you check every single document that you sign. It’s very important that you check it. It includes very detailed information and we have to be very careful. You know what they’ve been saying, that there are things that are hidden. So everything is important to be reviewed. That’s all I wanted to say.” – Latina Participant

In summing up at the end of the group, a Latino made the obvious point that materials need to be in Spanish, even for people with fairly good English proficiency:

“I would tell them to do it in a different language, obviously Spanish, as well to make it more accessible and not only for Americans, or people from this country. Because the second language in this country is the Spanish.” – Latino Participant

And this additional reminder about the imperative to be proactive in outreach. Here, Latinx participants are speaking about themselves and their fellow community members, but this same imperative could be extended to many segments of the uninsured in our state:

“Our Latino people are very proud. Yes. And they’re not going to reach out for help.”

“Yes. I understand. They are very proud and they prefer not to ask for help, because if they ask for help, they feel shy and they feel uncomfortable. And one more thing, in case that you don’t qualify to tell you why is it that you don’t qualify.” – Latinx Participants

Testing Email Follow-up vs. a Health Questionnaire Submitted with the Tax Form

Currently the tax form requests an email address for follow-up. The focus group tested participants’ preference for that approach and compared it with their interest in filling out a questionnaire and submitting it with their tax form to speed their health insurance application process.

There were mixed reactions. Some people wanted to jump right on this task and would be happy to fill out a worksheet. They were in the category of people who felt an urgent need to get coverage, who wanted to know right now if they would qualify, or who worried that they might be distracted or

Evaluation of the Easy Enrollment Program by Uninsured Marylanders

January 2, 2021

Page 17

diverted from the process if time passed. They are happy to provide an email address, but several indicated they would like to give their phone number and receive a text with a link, instead of or in addition to their email address.

“You can maybe be given a link afterwards? Once you check that box, you get a link sent to your phone or something where you can then go off and decide what you want to do. I feel like it should definitely be a follow-up.” – Baltimore Participant

Though space is limited on the tax form, people also suggested a phone number could be listed so they could reach out immediately to speak with someone.

Others did not want to be diverted in the midst of tax preparation, and just wanted to get done with their taxes. They expressed a desire to separate these tasks, returning to the health insurance topic later.

“For me, no, I would disagree with that. I'm here to do my taxes. Taxes are already kind of stressful and there's a lot going on with it. I like it just as it's set up so that I can check the box. I know that I'll get information eventually. I'll have a 35-day window now that you've told me.” – Rural Participant

“Me, personally, I do my taxes through TurboTax. I don't have anybody else do them, so I wouldn't want to do a worksheet separately from doing my taxes. So I would want to just put in my email if I wanted to submit my information because I wouldn't want to do any more with the taxes than I would have to.” – Suburban Participant

For some people in this second cohort, they wanted time to do their homework, ask their questions, and make a considered selection of coverage. These comments were typical of people who felt that choosing health coverage is a big decision and should not be done impulsively:

“It's health insurance, it's serious, I want it to be a separate thing (from my taxes). So I want to get the big packet in the mail and have the option of looking through it or going on the website, having the person walk me through the steps, the coverages, and let's even see if I'm eligible before I even check the boxes. So I definitely would like some assistance and more information.” – Baltimore Participant

“I don't want to make any rash decisions.” – Rural Participant

“...doing both of those really big life important things, you really want to take the time to really think about (them). ...Because if I'm just doing my taxes and I'm trying to find...all types of credits and I'm trying to really pick, I've already exerted a lot of energy. I just feel like going right into trying to find a health... it's not necessarily for me.” – Baltimore Participant

Offering the worksheet through a pop-up window is comfortable for some, but raises concerns about legitimacy and privacy for others. This could be the compromise, one participant thought.

“I think the idea of a pop-up simply with the question, ‘Would you like to explore this?’ is a great idea. Because it doesn't flash a whole new screen of numbers and questions at you. A pop-up to transfer you is a good start.” – Rural Participant

A particular detail on the worksheet concerned some people. Several participants reacted negatively to the request to predict next year's income. A number of them were gig workers with variable income, or were experiencing significant job uncertainty, or were currently experiencing unemployment that they hoped would not continue. These participants did not want to predict their income, and sometimes did not know *how* to do that. They were uncomfortable about the request and did not want to be held to their prediction, especially knowing that this information would be shared with a government agency. Coupled with their concerns that last year's income may look much *better* than their current situation,

participants were most interested in a request for their current income, and hoped their eligibility would be based on *that*.

“Change Question 3 (on the worksheet) to, ‘What is your current monthly verifiable income?’ Period. So don't ask me to anticipate or estimate. I don't know if I want to give that to a government, particularly if you're going to be giving it to other departments. I noticed that the IRS was under the bottom credit reporting agencies. I'm kind of wondering who's getting all this information. If I want to know if I'm qualified, I want to qualify based on today. I'm currently unemployed.” – Suburban Participant

*“Don't ask people to prognosticate. Asking them what they suspect or what they imagine their income will be at some point in the future, I don't know that that's fair. I think that's more of an opinion and it reflects a bias as opposed to enter the amount from federal form 1040 on line 5A, which is direct and verifiable.”
– Rural Participant*

Bottom line: Some people want immediacy and others would prefer to have time to think about their options. Offering *both* the options of a worksheet now or follow-up later through email or text would satisfy most people we interviewed. Offering only one of those options leaves out a significant segment.

A Very Positive Response to the Follow-up Letter

As the third step in the process, after checking the box on the tax form and filing their taxes, applicants receive a follow-up letter from the Maryland Health Connection outlining next steps, providing contact details, and identifying the applicant's enrollment deadline.

April 1, 2021

JOHN SMITH
1600 PENNSYLVANIA AVE
BALTIMORE MD, 21202

Questions or need help?
Call us at 1-855-642-8572 (Deaf and hard of
hearing use Relay service)

**Based on your state tax return,
you may qualify for free or low-cost health insurance.
It's easy to enroll!**

**Visit MarylandHealthConnection.gov/EasyEnrollment
or call 1-855-642-8572
But you must do so by MAY 6, 2021**

Dear JOHN SMITH,

As you requested when you filed your Maryland state income tax return, we have reviewed the information provided in your tax return and found you or members of your household may qualify for health insurance for free or at a low cost during this Tax Time Special Enrollment Period. **This special enrollment period ends MAY 6, 2021**

If you or members of your household are eligible for private insurance through Maryland Health Connection and/or financial help to pay for it, **you must apply and enroll within 35 days of the date of this letter.** If you or members of your household qualify for free or low-cost coverage through Medicaid or the Maryland Children's Health Program (MCHP), you may enroll at any time of the year.

Visit marylandhealthconnection.gov/easvenrollment or call 1-855-642-8572 for more information and for help applying. Maryland Health Connection can provide free help over the phone or refer you to free in-person help in your area. You can also download the "Enroll MHC" app to find assistance or apply and enroll on your phone.

Focus group participants reviewed the letter. They said it was detailed, “chock-full of information,” “pointed,” and “official,” all of which were positive statements. People found the letter accessible and easy to understand. They liked the straight-forward tone of the letter. Participants liked that it featured the appealing concept of “free or low-cost health insurance,” that it offered a sense of urgency with a specific deadline (not just a mention of “35 days”), emphasized “it’s easy to enroll!” and offered multiple points of contact for follow-up.

“That’s it. That answers everything. I think it has everything in it then. I can’t think of anything that they wouldn’t have in it.” – Suburban Participant

“I like how they got the phone number right there and the sense of urgency as well. So, I wouldn’t just throw it away. I would like pin it to the refrigerator because I know it has to be a certain date. So, the sense of urgency is there.” – Rural Participant

That said, a suburban participant reiterated that he would prefer to go online and apply right now. He did not want to be “waiting by the mailbox for a letter to come.” Concern was expressed in the rural group that slow mail service would shorten the 35-day window and put their ability to meet the deadline at risk. The suggestion was made to send out an electronic notification that the letter is on its way, and/or to send the letter electronically. As stated above, there is also concern that the State may not have the capacity during COVID times to process enrollment applications quickly. Focus group participants wondered if that could cause them to miss the 35-day window.

“I mean, so far I’m in agreement (with this program). The only thing is the way the mail has been recently, I had to reapply for food stamps because the letters telling me that there were issues were two weeks late. I don’t mind reapplying. I mind the fact that there was a two-week lag. And I know that’s just the temperature of the room right now. I get it. I’m not salty about it, that’s not an issue. (But) is there a possibility for there to be like a flex (in the 35-day) window?” – Rural Participant

Reactions to the Reminder Postcard

After the letter, a reminder postcard is scheduled to arrive. People were glad to know they would get a reminder postcard. “It’s short, straight to the point.” They found it visually appealing, easy to understand, and most importantly, would reinforce the upcoming enrollment deadline.



While the “Congratulations” theme is appealing, a respondent in the Suburban group suggested the message might be too casual. He would recommend a greater sense of urgency, saying something like, “Urgent, your ability to obtain this coverage is ready to expire.” This same comment was echoed in the rural focus group.

“...there'll be a segment of the population that once they see ‘congratulations’ they may instantly think that this is something like a raffle that I applied for, or possibly a scam or something like that.”

– Rural Participant

In addition to or instead of a postcard, some respondents said they would appreciate the immediacy of text message reminders. That of course offers the ability to insert a custom date and a link – (though at least one respondent indicated concerns about the security of such a link sent by text). Furthermore, it would be easy to send multiple text message reminders, which some people said they would need to follow through and submit their enrollment application.

Outreach and Promotion

Three outreach vehicles were tested.

Eddie Murray Radio Spot

This radio ad featuring former Baltimore Oriole and Hall of Famer Eddie Murray was played for participants.

For the Orioles, the designated hitter number 33, Eddie Murray.

Welcome to Sports Central. Our guest is Hall of Famer Eddie Murray.

Glad to be here.

You're one of Maryland's all-time favorite athletes. How would you like your fans to remember you?

Well, right this moment, I'd like them to remember when they called me Easy Eddie.

Why is that?

Starting this year there's an easy enrollment for healthcare if you're not already insured.

I know about that. Marylanders can apply for health coverage by checking a box on their state income tax return. The state will begin the process to offer free or low-cost insurance to anyone who qualifies.

Yeah. On your tax form just say yes to healthcare. It's that easy.

Thanks Eddie. If you need health insurance, say yes on your Maryland tax return. It's a home run.

Oh, there it is. Number 500. How many more?

For more information see marylandhealthconnection.gov. Sponsored by the Maryland Citizens Health Initiative Education Fund.

The ad was well-received. Especially people who remembered Eddie Murray's career found the ad engaging. He enjoyed the best recognition in the focus group of Suburban residents. In that group, his radio spot was well-liked and motivating.

“Well, I think it would drive me personally because he linked his name, ‘Easy Eddie,’ made it seem pretty easy to just go there and click a box. So it would drive me to look more and I think it would, I would read that it would be low-cost or no-cost.” – Suburban Participant

More commonly, though, people felt the radio ad was aimed at older people. Sadly, most focus group participants did not know who Eddie Murray is, so their main takeaway was that he sounds older. That made most younger participants (under age 40 or so) feel excluded, except younger men who were familiar with Murray.

“(T)he commercials that they were showing, there was an older celebrity and we don't know who that is. And it was directed to older generations. Maybe make it a younger thing or something like that. Because you also have to remember that there's a lot of young people that don't have insurance and that parents

Evaluation of the Easy Enrollment Program by Uninsured Marylanders

January 2, 2021

Page 21

cannot keep them under their insurance and the jobs they have don't offer insurance either. So a lot of times they suffer a lot too.” – Latina Participant

A female participant said women would tune it out because he is a sports figure.

“Number one, it's sports. Number two, it's not current. So, just no.” – Rural Participant

A woman suggested a football player might be more transcendent, especially one with a more current career. But for an older Latina, the age focus was a positive and engaged her:

“I see that the person in the commercial is an older gentleman and I'm guessing the government is trying to help more people. That got my attention. In other words, it wasn't a young man who made the commercial, but an older person, and I think that's interesting.” – Latina Participant

Bottom line: There is no celebrity or spokesperson that will connect with the full population. Future outreach may want to engage multiple personalities to reach various ages and racial or ethnic segments within the general population.

Facebook ad

A Facebook ad featuring Eddie Murray garnered a similar reaction. This is the text of the ad:

If you need health insurance say yes by checking a box on your Maryland tax return.

I think it's just awesome for people to know that it's that easy.

For more information see marylandhealthconnection.gov. Sponsored by the Maryland Citizens Health Initiative Education Fund.

The image is a screenshot of a Facebook post from 'Maryland Health Care for All!' dated June 10, 2020. The post text reads: 'Don't have health insurance? You will be able to sign up for health coverage through an Easy Enrollment program until July 15.' Below the text is a composite image. On the left, there are several Maryland tax return forms (Form 502) with a red banner that says 'CHECK THE BOX ON YOUR MD TAX RETURN'. On the right, there is a photo of Eddie Murray, a former Orioles player, with a red circle containing the number '33' overlaid on it. Below the photo, it says 'EDDIE MURRAY ORIOLES HALL OF FAMER'. At the bottom of the ad, there is a link to 'MARYLANDHEALTHCONNECTION.GOV' and the text 'Free or low cost health insurance', along with a 'Sign Up' button.

The Facebook ad made more of a connection than the radio ad, in part because people could see Eddie Murray and better connect with him. That said, a Baltimore participant observed that this ad was

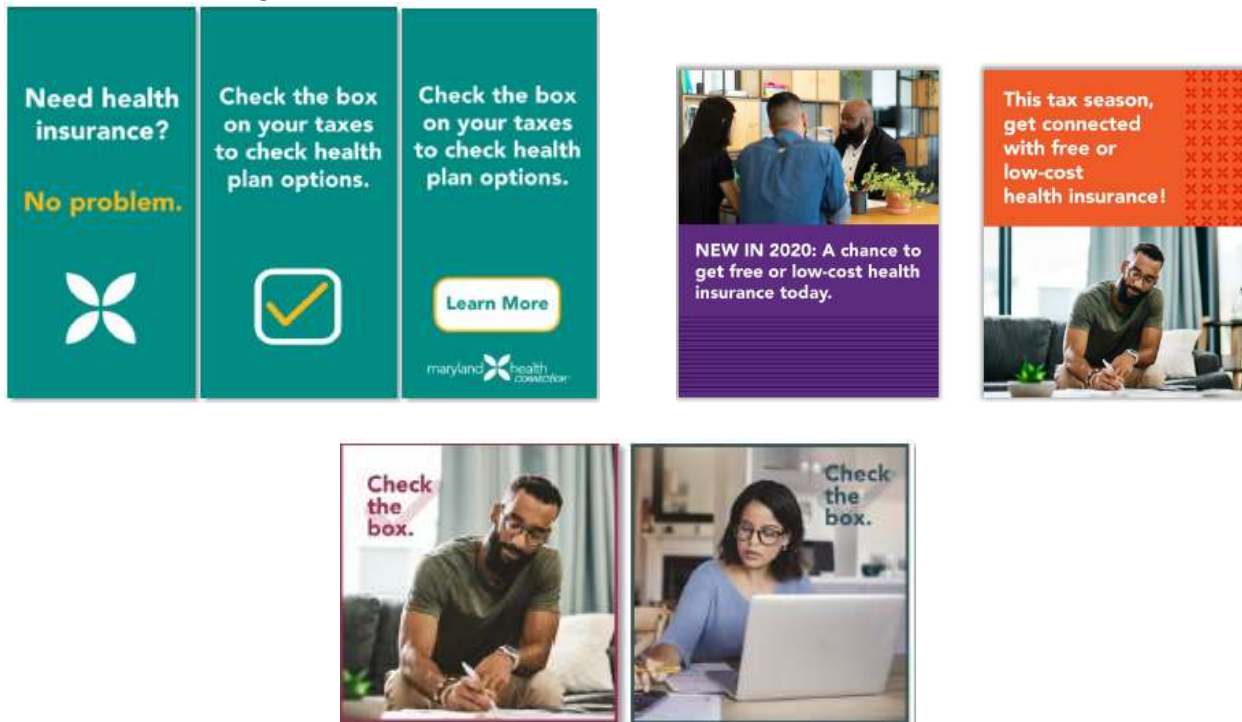
missing something memorable. It needs a tagline or a more coalesced central message, she felt. Others seemed to agree

"It's missing like something memorable... Just some type of phrase. I'm not an advertiser. Just some type of a catchy phrase." – Baltimore Participant

These focus groups and many others recently among similar audiences would confirm that Facebook remains the most important social medium, with broad reach among all but the youngest respondents. Instagram also reaches many corners of the public and has a younger age profile than Facebook.

Digital Ads

Three variations of digital banner ads were shown.



A number of people suggested they might click for more information. Among the alternative ads tested, there was no clear leader in connecting with participants. A Baltimore respondent reacted most positively to the orange background ad with the text, "This tax season, get connected with free of low-cost health insurance!" She said it told her what she needed to know and "laid it out exactly." The only change she would recommend is adding the word "Maryland" to localize it and make it more relevant.

A Suburban resident thought that the digital ads featuring people were more engaging.

The rural group, inspired by one participant with stronger feelings, gravitated towards the teal-colored ad that was more text-heavy because "It tells me exactly what I need to know."

Final Thoughts

Participants argued that the priority of health insurance coverage is important, and would make a big difference for people. They urged Maryland Health Connection and its partners to spread the message far and wide, and were puzzled why they had not heard of such a great program.

“They have to go big with this, because people need this.” – Baltimore Participant

“2020 has taken a lot from all of us. I think the messaging with this program needs to be how Maryland, this Maryland department, is giving something back. We are going to get something that a lot of people have lost this year... in addition to the low-cost or the no-cost, the getting something back that was taken from you for your COVID or this pandemic is something that I think people would connect with.”

– Suburban Participant

A Latina simply expressed gratitude that this program is available, and that being a resident of Maryland gives her access to so many resources.

“I want to say is that I am very happy. I think that we are very lucky to live here in this State of Maryland. I think that I am blessed for all the benefits. I am really happy to know that there is this type of help. The fact that it's accessible in different languages and that people have the information handy to promote health and that prices are more accessible.” – Latina Participant

It has been a privilege conducting this research for you. Please do not hesitate to call on us as needed as you seek to implement these findings.

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