

# MHBE 2024 Consumer Decision Support (CDS) Workgroup

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Meeting 2 – August 14, 2024

# Members

Member	Affiliation
Lisa Barrows	CareFirst BlueCross BlueShield
Cara Chang	Optum/Dartmouth
Steven Doman	UnitedHealthcare
Shelly Eldridge	Shelly The Confidence Coach
Robyn Elliott *	Maryland Dental Action Coalition
Ruth Getachew	Maryland Insurance Administration
Erika Halsey **	Kaiser Permanente
Thomas Hamel	Aetna
Stephanie Klapper	Maryland Citizens' Health Initiative
Carmen Larsen	Hispanic Chamber of Commerce Montgomery County

Member	Affiliation
Allison Mangiaracino	Kaiser Permanente
Arianna Meehan **	Aetna
Joan Painter	Seedco
Shlomo Rosenstein	Premier Financial
Seth Sevenski-Popma **	UnitedHealthcare
Lisa Skipper *	Mountain Laurel Medical Center



Meeting will be recorded

# Agenda

12:30 - 12:40 | Welcome

*Amelia Marcus, MHBE Health Policy Analyst*

12:40 - 1:00 | Review of Background Information and Workgroup Purpose

*Amelia Marcus*

1:00 – 1:15 | Overview of 2023 MHC User Experience Testing - Key Findings

*Maggie Church, MHBE Deputy Director of Marketing*

1:15 - 1:40 | Discussion - Final Priority Setting

*All Members*

1:40 | Public Comment

1:45 | Adjournment

# Vote on Charter, Co-Chairs, and July 31 Minutes

- Vote to approve July 31, 2024 Consumer Decision Support Workgroup **Minutes**
- Vote to approve Consumer Decision Support Workgroup **Charter**
- Vote to approve Robyn Elliott and Lisa Skipper as Consumer Decision Support Workgroup **Co-Chairs**

# Content Review

The background of the slide features a solid blue color with a decorative pattern of four large, overlapping circles. These circles are arranged in a cross-like pattern, with their centers at the corners of the slide. The overlapping areas create a subtle, lighter blue floral or star-like shape in the center.

# Overview of 2024 MHC Marketplace Plan Offerings

- **Four** MHC carriers
- **44** individual market Qualified Health Plans (QHPs) offered in 2024

	Carrier	2022	2023	2024
Cat.	CareFirst - HMO	1	1	1
	CareFirst - PPO	-	-	-
	Kaiser Permanente	1	1	1
	United	-	-	-
	Aetna			-
Bronze	CareFirst - HMO	3	3	3
	CareFirst - PPO	1	1	1
	Kaiser Permanente	2	3	3
	United	3	4	4
	Aetna			3
Silver	CareFirst - HMO	1	1	1
	CareFirst - PPO	1	1	1
	Kaiser Permanente	4	4	4
	United	4	4	4
	Aetna			4
Gold	CareFirst - HMO	2	2	2
	CareFirst - PPO	1	1	1
	Kaiser Permanente	4	4	4
	United	4	4	4
	Aetna			2
Platinum	CareFirst - HMO	-	-	-
	CareFirst - PPO	-	-	-
	Kaiser Permanente	1	1	1
	United	-	-	-
	Aetna			-
Total		33	35	44

# Coverage Requirements for Marketplace Plans

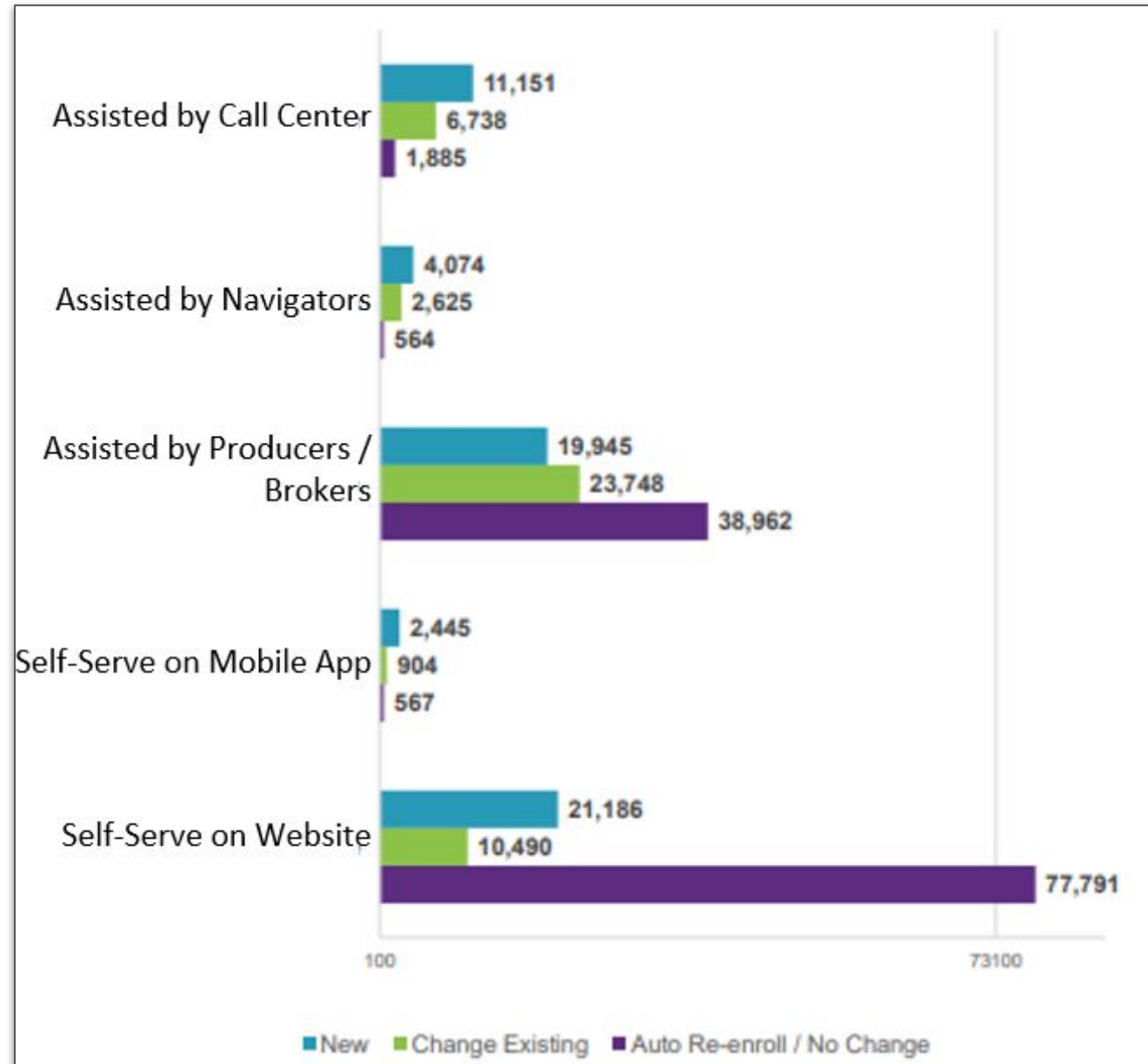
- Affordable Care Act (ACA) requirements for coverage of **Essential Health Benefits (EHB)**
  - EHBs include a set of **10** categories of minimum requirements for all Marketplace plans:
    - Hospitalization, Emergency care
    - Maternity and newborn care
    - Pediatric care, including dental and vision benefits
    - Prescription drugs
    - Laboratory tests
    - Mental health care and substance use disorder treatment
    - Ambulatory patient services
    - Rehabilitative and habilitative services and devices
    - Wellness, chronic disease management, and preventive services
  - These requirements apply to private plans in the individual and small group market



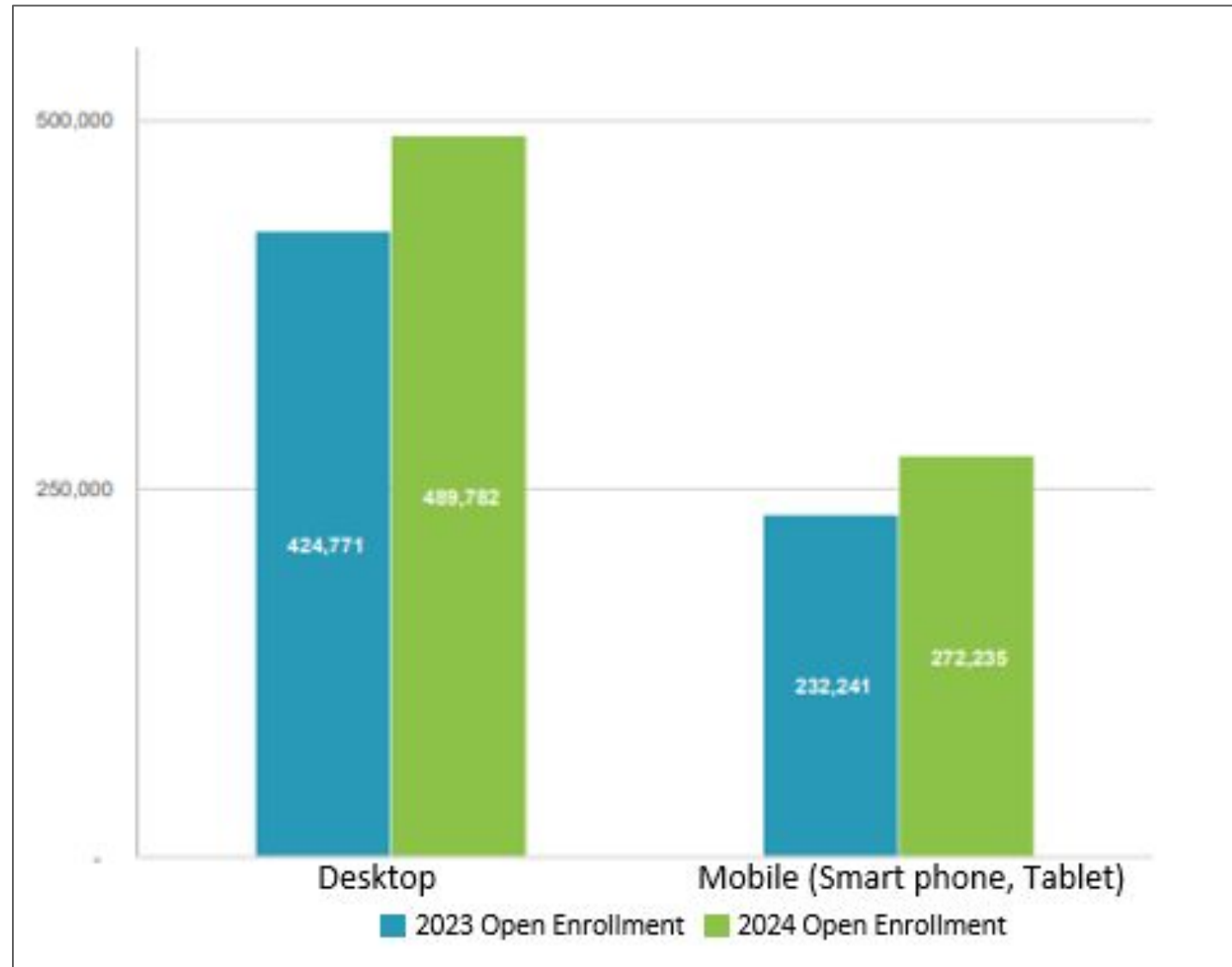
# Coverage Requirements for Marketplace Plans cont'd

- Affordable Care Act (ACA) requirements for coverage of **Preventive Services**
  - Private health plans must provide coverage for a range of recommended preventive services and may not impose cost-sharing (such as copayments, deductibles, or co-insurance) on patients receiving these services.
    - Full list of free preventive services [here](#)
  - These requirements apply more broadly to all private plans

# Private Plan Enrollments by Type of Consumer Assister



# MHC Website Visitors



# Review of Workgroup Purpose, why are we here?

- **Workgroup Purpose:** Discuss areas to improve consumer decision support during the plan shopping experience in the “**Get an Estimate**” **plan shopping tool** and within the MHC application
  - Many Marketplace consumers struggle to choose a plan that best fits their health and financial needs (health literacy, choice overload)
  - **Underinsurance** - Individuals with medical coverage who still face cost barriers in accessing care similar to those who are completely uninsured

# Expected Outcomes

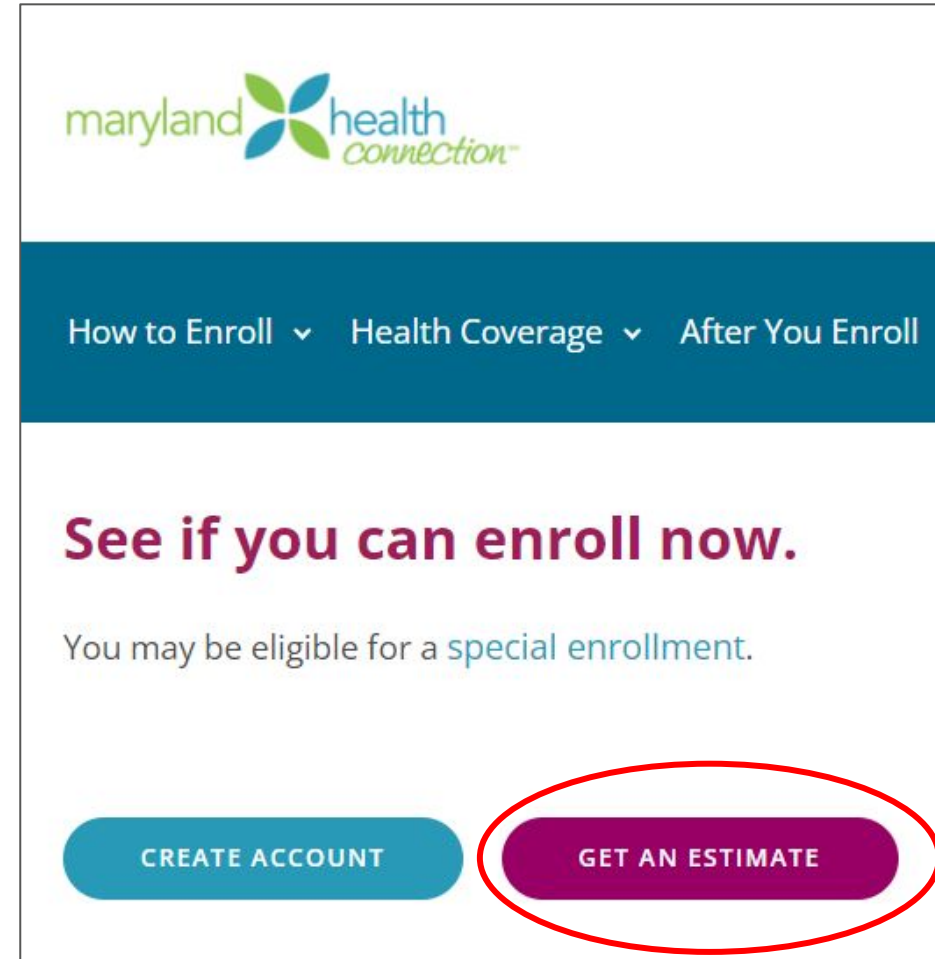
- **Recommendations for:**

- Identifying areas in plan shopping experience where consumer may benefit from more information or guidance
- Improving plan information display on the plan list page, and the side-by-side plan comparison layout
- Providing tailored plan recommendations to consumers

\*Discussions and recommendations will focus specifically on health insurance plan shopping in the individual market

# Walkthrough of MHC Plan Shopping Tool

- Walkthrough of MHC '[Get an Estimate](#)' plan shopping tool
- After walkthrough, review of decision tools in use by MHC, and evidence-supported decision aids **not** in use by MHC



# Evidence-Supported Decision Aids **Currently** in Use on MHC

- Decision aids currently in use by MHC and supported by evidence reviewed:
  - Sorting & filtering tools
  - Side-by-side comparison of plans
  - Auto-applying subsidies to premium & CSR estimates
  - Rollover definitions
  - Drug and provider directories
  - Filtering low-income consumers to Silver plans
  - Quality ratings
  - Providing (& sorting by) total estimated cost
    - Observed confusion when OOP cost estimate given without explanation of the factors that contributed to it

# Evidence-Supported Decision Aids **Not** in Use on MHC

- “Smart default” plans, or tailored plan recommendations, based on the consumer’s expected health care costs
- Personal preference questions asking what consumers look for in a plan (ex: premium costs, other costs, coverage of certain provider) to inform tailored plan recommendations (weighted with expected health care costs)
- Highlight the plan attributes that evidence shows consumers tend to care about
- Allow enrollees to sort and filter plans based on up-to-date info on whether plans cover a specific physician or hospital
- Filter option to view only Silver CSR plans



# Evidence-Supported Decision Aids **Not** in Use on MHC (Cont'd)

- Tools to help consumers understand plan pricing
  - *MHC has a pop-up disclaimer that consumers must click out of before plan shopping, which explains metal levels and premium vs. out-of-pocket costs.*

The screenshot shows the Maryland Health Connect website interface. A disclaimer pop-up is overlaid on the right side of the screen. In the background, a plan listing for United Healthcare is visible, showing an estimated monthly premium of \$236.51. The disclaimer text is as follows:

**Disclaimer:**

Before enrolling, confirm that your provider accepts the plan. Select Find a Health Care Provider to see if your provider is in-network or call your provider's office to verify participation with the plan.

Plan quality ratings and enrollee survey results are calculated by CMS using data provided by health plans in 2023. The ratings are being displayed for health plans for the 2024 plan year. [Learn more](#) about these ratings.

**Metal Level Description:**

Plan categories are based on how you and the plan share costs when you use medical services. All plans cover at least the same set of essential health benefits.

Bronze-Lower monthly premium than silver or gold, but you pay more out of pocket when you use medical care.

Silver-Moderate monthly premium. Compared to bronze, you usually pay less out of pocket when you use medical care. [i](#)

Gold-Moderate monthly premium. Compared to bronze and silver, the plans pay more of your medical costs and you pay less out of pocket when you use medical care.

[CLOSE](#)

# Evidence-Supported Decision Aids **Not** in Use on MHC (Cont'd)

- Front-and-center, clear information explaining:
  - preventive primary care must be covered at no additional cost under all plans
  - affordability provisions available for consumers who qualify, such as cost-sharing reductions.
  - Explaining the adult dental insurance marketplace
- Specially developed digital decision support tools that help educate consumers on health insurance concepts
- Prompts to remind consumers to:
  - use all decision support tools at their disposal
  - consider total estimated costs
- Narratives about health insurance situations and how others have made their plan choices
  - Other modes besides written info should be considered (Ex: video tutorials)

## Evidence-Supported Decision Aids **Not** in Use on MHC (Cont'd)

- Use of symbols rather than numbers to represent price level
  - A system of 1 to 4 dollar signs (\$ to \$\$\$\$) was the type of symbol tested in the evidence reviewed
    - *Currently, MHC uses a star symbol rating for quality ratings.*

The screenshot displays a plan card for 'UHC Bronze Value Plan' with ID '2024-72375MD0070028-01'. It features a 'Value Plan' badge with a dollar sign icon, the United Healthcare logo, and a 'METAL LEVEL: BRONZE' label. A red circle highlights the 'QUALITY RATING' section, which shows five yellow stars, one grey star, and an information icon (i).

# Evidence-Supported Decision Aids **Not** in Use on MHC (Cont'd)

- When providing total out-of-pocket cost estimates, clearly explain the factors contributing to the estimates
  - *California is a good example of how they explain total cost estimates for each plan —>*
- Providing total cost estimates for several possible outcomes, such as a typical usage scenario and a worst-case scenario, rather than for just one.
- Graphical depictions of total estimated cost for plan

## Estimated Total Cost

This is an estimate of the total yearly cost of this health plan. We based the estimate on how much health care you plan to use in 2024. Your actual health care use and costs may be different.

You can change your expected health care use in your Preferences. These are your preferences now:

- Health plan use: **Medium**
- Prescription drug use: **Medium**

12 monthly premiums (\$55.76 /month)	\$669.12
Costs for health plan use	\$775.21
3 Primary care visits	
2 Specialist visits	
5 Lab tests	
1 Outpatient visits	
20 Generic prescription drugs	

**Your estimated total cost \$1,444.33**

The background features a solid teal color with a pattern of four large, overlapping circles in a lighter shade of teal. These circles are arranged in a cross-like pattern, with their centers at the corners of the frame, creating a flower-like or pinwheel effect in the center.

# MHC User Experience Testing

# UX Research Key Findings

## Plan Shopping

Maggie Church  
Deputy Director Marketing

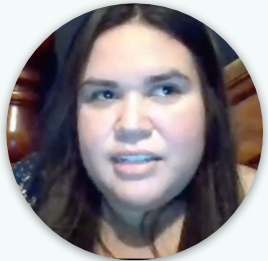
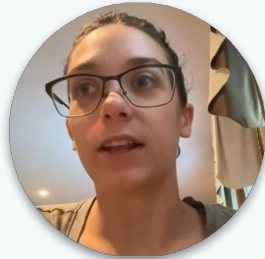
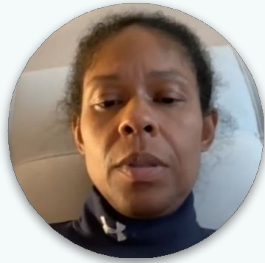
**Research conducted Nov. 2023**



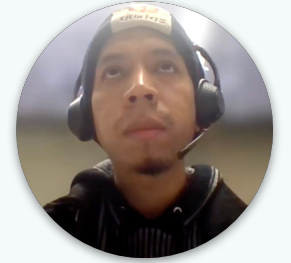
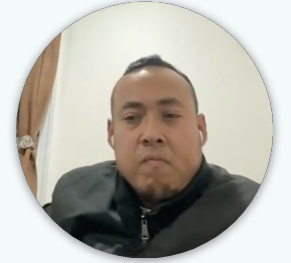
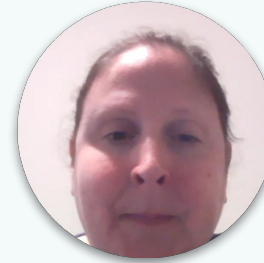
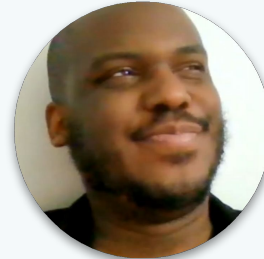


# Who We Spoke With

## Current Enrollees



## New Enrollees



# Participant Segmentation

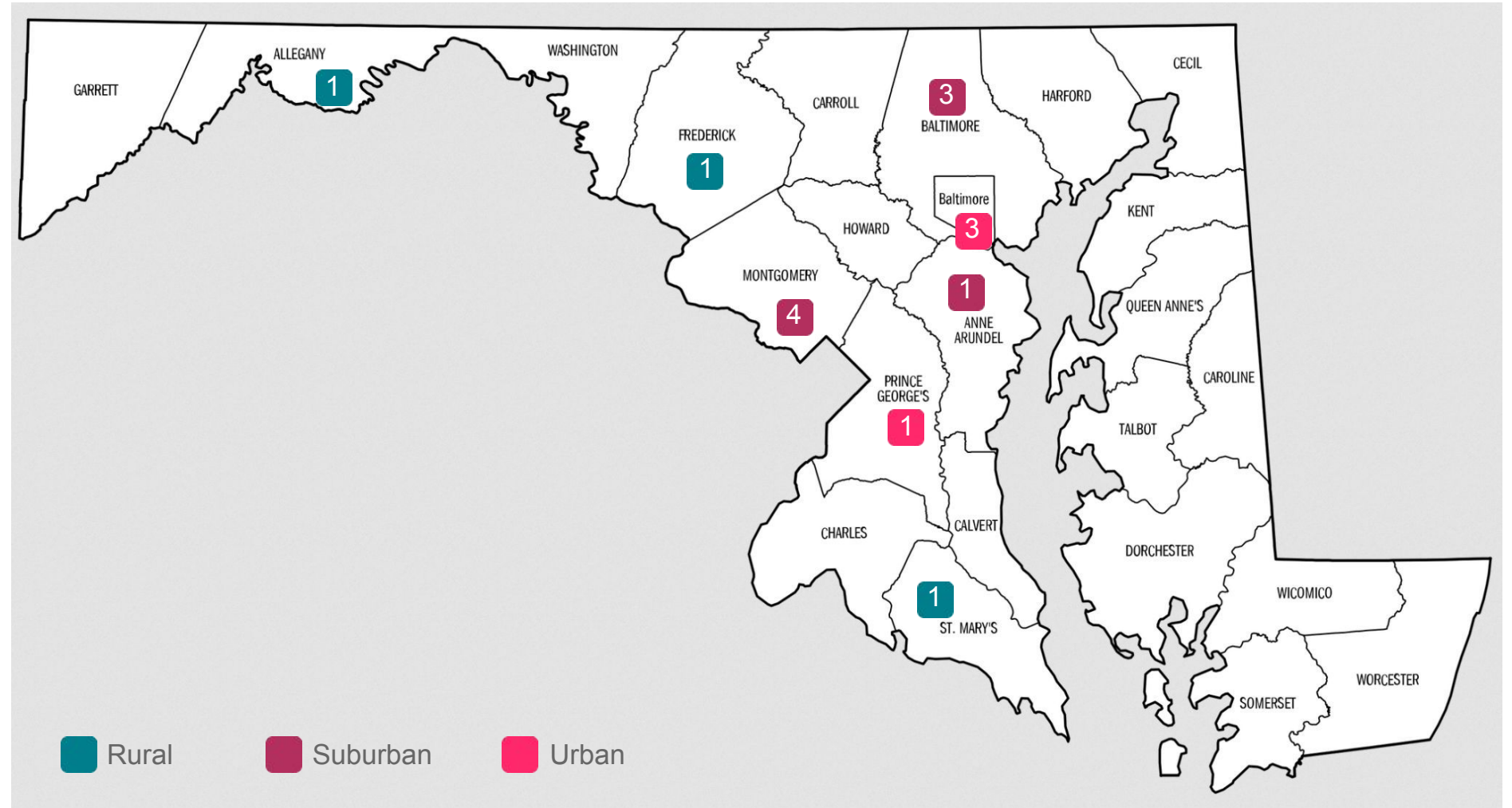
We had an even split  
between suburban and  
urban counties and half  
as many rural counties.

## English

5 - Urban  
2 - Rural  
3 - Suburban

## Spanish

1 - Urban  
1 - Rural  
3 - Suburban





# Plan Shopping

## Positive improvements

- ❖ The healthcare usage levels seem to resonate with users.
- ❖ The disclaimer was short enough that some users took the time to read it. Those who read it felt it was helpful.
- ❖ The coverage examples were practical.
- ❖ The tooltips were helpful as well as the glossary (when found).
- ❖ The following features were useful: compare, filter, doctor search, drug search, and total yearly cost estimate.
- ❖ Explaining how to apply the financial tax credit on the shopping screen helps users understand that they can use it monthly or at the end of the year.

# Plan Shopping

Some areas could still use some improvement.

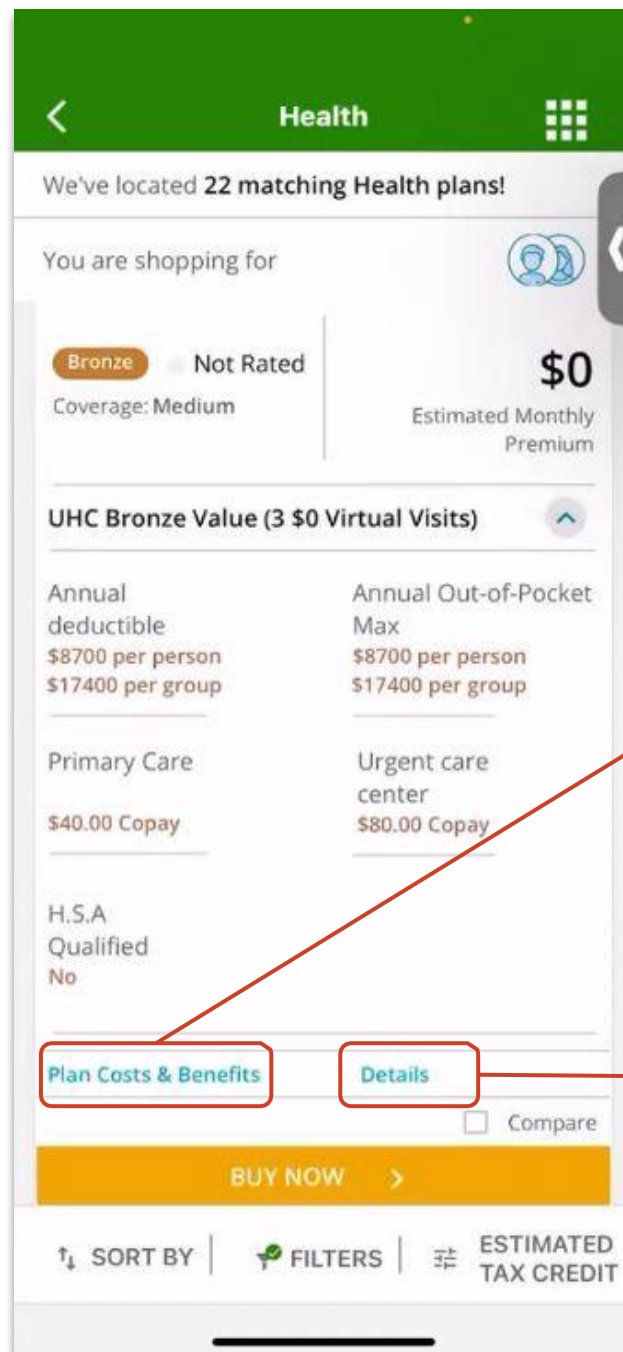
IMPACT ON USER EXPERIENCE:

MODERATE

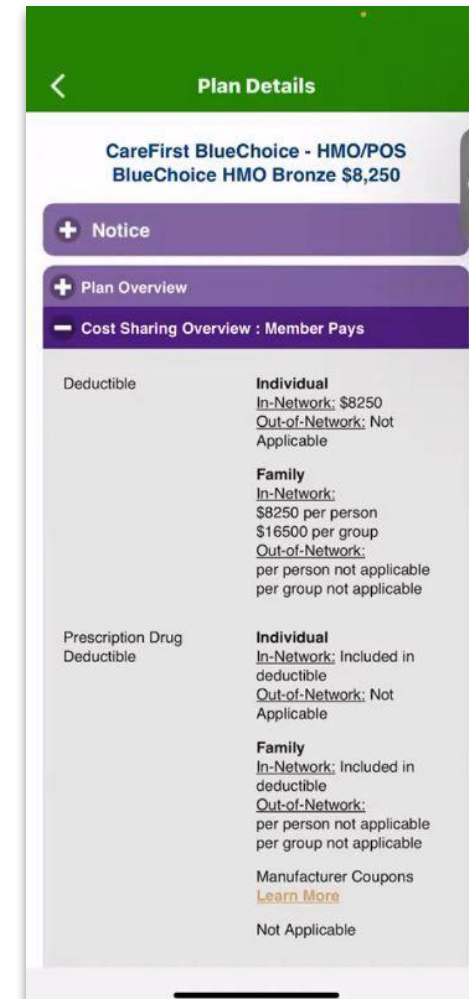
- ❖ Yearly estimate and monthly estimate mobile vs. desktop experience
- ❖ The ability to save a plan while on the compare screen would be helpful.
- ❖ Users spend a lot of time reviewing all the plans before considering using the filter.
- ❖ A few users did not notice the mobile app's filter options, compare options, and plan dropdown.

***“I’ve only had Medicaid. I don’t exactly know what I’m shopping for when it comes to [QHPs].”***

P3 - Renew Enrollee



The "Plan Cost & Benefits" shows general information about the type of plans CareFirst offers, which is not what users expect or need at this stage.

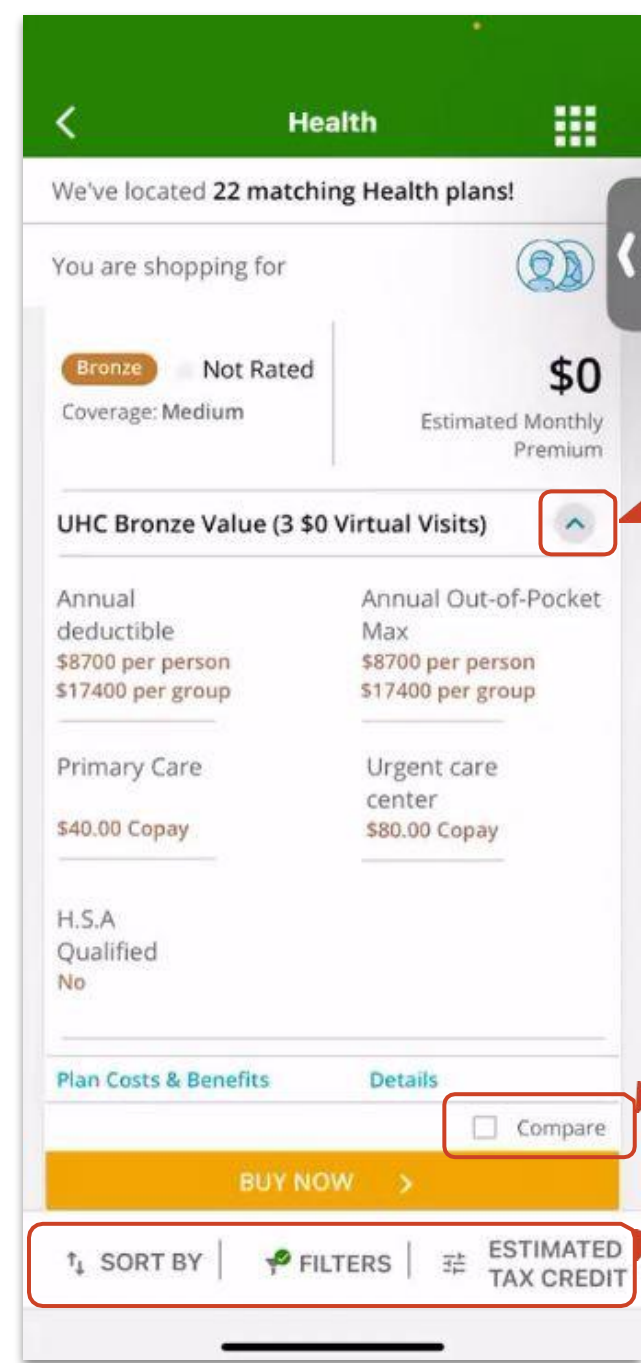




The PDF opened in the background, and the participant did not realize it.

The PDF was not translated into Spanish.

Additionally, after the participant returned to the app after reviewing the PDF, the system lost his info and he had to go back through the get estimate tool.



These areas need more contrast to help draw users' attention.

The screenshot shows the 'Dental' plan details in the United Healthcare app. The interface is in Spanish. Key elements include:

- Header:** A green bar with a back arrow, 'Salud' (Health) button, and 'Dental' button. A red box highlights the 'Dental' button, with an arrow pointing to it from the text: 'Having the toggle here was confusing for a couple of Spanish participants; even with the toggle, they were unsure if the plans included dental.'
- Plan Details:** 'UHC Bronze Virtual Access (Unlimited \$0 Virtual)'. A red box highlights the '(Unlimited \$0 Virtual)' text, with an arrow pointing to it from the text: 'A virtual doctor visit was unfamiliar to one of the Spanish participants, so the plan's title was confusing.'
- Table:** A table with two columns. The first column lists services and costs, and the second column lists maximum reimbursement and copay amounts. A red box highlights the first row of the table, with an arrow pointing to it from the text: 'The headings are cropped off,'.
- Telemedicina:** A section titled 'Telemedicina:' with a table. A red box highlights the 'Centro de atención de urg...' heading, with an arrow pointing to it from the text: 'The cost headings are also cut off'.
- Footer:** A bar with 'CLASIFICAR POR', 'FILTROS', and 'CRÉDITO FISCAL ESTIMADA'.

Atención prim...	Centro de atención de urg...
Sin cargo	Copago de \$120.00
H.S.A. elegible No	Su costo total anual estimado \$24 por hogar

Atención prim...	Centro de atención de urg...
Sin cargo	\$120 Copago de

Having the toggle here was confusing for a couple of Spanish participants; even with the toggle, they were unsure if the plans included dental.

A virtual doctor visit was unfamiliar to one of the Spanish participants, so the plan's title was confusing.

The headings are cropped off,

The cost headings are also cut off

# Plan Shopping

**The filter options applied did not accurately reflect the correct plans.**

“Using Filter Removes Tax Credit”

- ❖ In some cases, users had applied filter options, but the plans reflected were not based on the filters applied. To fix the issue, users had to clear all filters and minimize the number of filters used.
- ❖ The tax credits and the monthly plan premiums were also inaccurate once the filters were applied. In some cases, the tax credit was removed completely after applying the filters.

# Plan Shopping

Regardless of the shopping layout, choosing plans is time-consuming and complex.

- ❖ All users seem to share some common mindsets. For example:
  - Selecting insurance is a task that will take a lot of time, and they do not look forward to having to do it.
  - Ultimately, they won't feel 100% satisfied that they selected the right plan because they do not know what could happen to their health in the future.
  - Insurance in the U.S. can be complicated and challenging to understand for less experienced people.
- ❖ Highlighting the difference between plans in the comparison would make the process easier for users to determine what's the same and what's different.

***"I'm not sure if I should go with a higher deductible or lower premium because I'm guessing how I'm going to use [my insurance plan]."***

P7 - New Enrollee



# Discussion



# Highlights from Meeting 1 Discussion

Interest in discussing:

- Smart default or plan recommendations (hesitance to only show recommended plans vs. sorting according to preferences)
- Tools that ask questions about what's most important to a consumer (premium, network, specific service costs?)
- Symbols vs. numbers/pricing when displaying plan information
- Online training or tutorial for consumers using the plan shopping tool  
Immigrant consumers specifically, and how they access information
- Improving how we communicate the value of silver CSR and gold plans for consumers choosing bronze
- Ways to simplify the plan tile, and ensure the appropriate amount of information for each plan is displayed and is easy to understand for the average consumer

# Discussion

- What are your perspectives on consumer plan shopping challenges in the Marketplace?
- Are there any other areas or issues you think the workgroup should discuss?
- Additional questions?



Next Steps

# Next Steps

- **Next meeting: Changed to Tuesday, August 27, 12:30 - 1:45 PM**
  - Tentative Agenda:
    - Panel discussion with MHBE Consumer Assistance team
    - Workgroup discussion session #3: Focused discussion on first part of plan shopping tool, consumer inputs and information display prior to plan shopping page
- July - October: Seven regular meetings
  - 6<sup>th</sup> meeting: draft report of workgroup recommendations for review and discussion
  - 7<sup>th</sup> and final meeting: Vote to finalize workgroup recommendations
- November 14<sup>th</sup>: MHBE staff present workgroup recommendations to MHBE Standing Advisory Committee



# Public Comment

# Appendix



# References - Hilltop Literature Review

- American Institutes for Research. (2015). Consumer usability testing in five state-based marketplaces: Key challenges and best practice recommendations. The Centers for Medicare and Medicaid Services.  
<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/QualityInitiativesGenInfo/Downloads/Consumer-Usability-Testing-in-Five-State-based-Marketplaces.pdf>
- Barnes, A. J., Karpman, M., Long, S. K., Hanoch, Y., & Rice, T. (2021). More intelligent designs: Comparing the effectiveness of choice architectures in US health insurance marketplaces. *Organizational Behavior and Human Decision Processes*, 163, 142-164. <https://doi.org/10.1016/j.obhdp.2019.02.002>
- Barnes, A. J., Hanoch, Y., Rice, T., & Long, S. K. (2017). Moving beyond blind men and elephants: Providing total estimated annual costs improves health insurance decision making. *Data and Trends*, 74(5), 625-635.  
<https://doi.org/10.1177/1077558716669210>
- Barnes, A. J., Hanoch, Y., & Rice, T. (2016). Can plan recommendations improve the coverage decisions of vulnerable populations in health insurance marketplaces? *PLOS ONE*, 11(3).  
<https://doi.org/10.1371/journal.pone.0151095>

# References (Continued)

- Barnes, A. J., Hanoch, Y., & Rice, T. (2015). Determinants of Coverage Decisions in Health Insurance Marketplaces: Consumers' Decision-Making Abilities and the Amount of Information in Their Choice Environment. *Health Services Research*, 50, 58-80. <https://doi.org/10.1111/1475-6773.12181>
- Bhargava, S., Loewenstein, G., & Sydnor, J. (2017). Choose to lose: Health plan choices from a menu with dominated option. *The Quarterly Journal of Economics*, 132(3), 1319-1372. <https://doi.org/10.1093/qje/qjx011>
- Blavin, F., Karpman, M., & Zuckerman, S. (2016). Understanding characteristics of likely marketplace enrollees and how they choose plans. *Health Affairs*, 35(3), 535-539. <https://doi.org/10.1377/hlthaff.2015.0867>
- Bundorf, M. K., Polyakova, M., Stults, C., Meehan, A., Klimke, R., Pun, T., Chan, A. S., & Tai-Seale, M. (2019). *Health Affairs*, 38(3), 482-490. <https://doi.org/10.1377/hlthaff.2018.05017>
- Chu, R. C., Rudich, J., Lee, A., Peters, C., De Lew, N., & Sommers, B. D. (2021). Facilitating consumer choice: Standardized plans in health insurance marketplaces. Assistant Secretary for Planning and Evaluation Issue Brief. <https://www.aspe.hhs.gov/sites/default/files/documents/222751d8ae7f56738f2f4128d819846b/Standardized-Plans-in-Health-Insurance-Marketplaces.pdf>
- Cox, N., Handel, B., Kolstad, J., & Mahoney, N. Messaging and the mandate: The Impact of consumer experience on health insurance enrollment through exchanges. (2015). *American Economic Review*, 105(5), [https://eml.berkeley.edu/~bhandel/wp/Messaging\\_Mandate.pdf](https://eml.berkeley.edu/~bhandel/wp/Messaging_Mandate.pdf)



# References (Continued)

- Cusanno, B., Furtado, K., Kaphingst, K., Kebodeaux, C., McBride, T., & Politi, Mary. (2016). The Use of narratives in a decision support tool for individuals enrolling in health insurance. Society of Behavioral Medicine Annual Meeting Conference Poster. [https://www.researchgate.net/publication/322477818\\_The\\_Use\\_of\\_Narratives\\_in\\_a\\_Decision\\_Support\\_Tool\\_for\\_Individuals\\_Enrolling\\_in\\_Health\\_Insurance](https://www.researchgate.net/publication/322477818_The_Use_of_Narratives_in_a_Decision_Support_Tool_for_Individuals_Enrolling_in_Health_Insurance)
- DeLeire, T., Chappel, A., Finegold, K., & Gee, E. (2017). Do individuals respond to cost-sharing subsidies in their selections of marketplace health insurance plans? *Journal of Health Economics*, 56, 71-86. <https://doi.org/10.1016/j.jhealeco.2017.09.008>
- Dellaert, B. G. C., Johnson, E. J., Duncan, S., & Baker, T. (2024). Choice architecture for healthier insurance decisions: Ordering and partitioning together can improve consumer choice. *Journal of Marketing*, 88(1), 15-30. <https://doi.org/10.1177/00222429221119086>
- Elwyn, G., Frosch, D., Volandes, A. E., Edwards, A., & Montori, V. M. (2010). Investing in deliberation: A Definition and classification of decision support interventions for people facing difficult health decisions. *Medical Decision Making*, 30(6), 701-11. <https://doi.org/10.1177/0272989X10386231>
- Ericson K. M. M., & Starc, A. (2016). How product standardization affects choice: Evidence from the Massachusetts Health Insurance Exchange. *Journal of Health Economics*, 50. 71-85. <https://doi.org/10.1016/j.jhealeco.2016.09.005>

# References (Continued)

- Ericson, K. M. M., & Starc, A. (2012). Findings from Massachusetts Health Reform: Lessons for other states. *Inquiry*, 49, 327-338. [https://doi.org/10.5034/inquiryjrnl\\_49.04.04](https://doi.org/10.5034/inquiryjrnl_49.04.04)
- Faugno, E., Gilkey, M. B., Cripps, L. A., Sinaiko, A., Peltz, A., Kingsdale, J., & Galbraith, A. A. (2023). “Pick a plan and roll the dice”: A Qualitative study of consumer experiences selecting a health plan in the non-group market. *Health Policy OPEN*, 5. <https://doi.org/10.1016/j.hpopen.2023.100112>
- Findley, P. A., Wiener, R. C., Shen, C., Dwibedi, N., & Sambamoorthi, U. (2019). Health reform under the patient protection and Affordable Care Act: Characteristics of exchange-based health insurance enrollees. *Social Work in Health Care*, 58(7), 685–702. <https://doi.org/10.1080/00981389.2019.1619116>
- Gable, C. L., Taylor, D. H., & Zafar, Y. (2016). Health plan selection and out-of-pocket costs for cancer patients in the health insurance exchange. *Journal of Clinical Oncology*, 34(15, Suppl.). [https://doi.org/10.1200/JCO.2016.34.15\\_suppl.6504](https://doi.org/10.1200/JCO.2016.34.15_suppl.6504)
- Giang, W. C. W., Bland, E., Chen, J., Colón-Morales, C. M., & Alvarado, M. M. (2021). User interactions with health insurance decision aids: User study with retrospective think-aloud interviews. *JMIR Hum Factors*, 8(4). <https://doi.org/10.2196/27628>

## References (Continued)

- Gruber, J., Handel, B. R., Kina, S. H., & Kolstad, J. T. (2020). Managing intelligence: Skilled experts and AI in markets for complex products. National Bureau of Economic Research Working Paper. <https://doi.org/10.3386/w27038>
- Hero, J. O., Sinaiko, A. D., Kingsdale, J. Gruver, R. S., & Galbraith, A. A. (2019). Decision-making experiences of consumers choosing individual-market health insurance plans. *Health Affairs*, 38(3), 464-472. <https://doi.org/10.1377/hlthaff.2018.05036>
- Houston, A. J., Furtado, K., Kaphingst, K. A., Kebodeaux, C., McBride, T., Cusanno, M., & Politi, M. C. (2016). Stakeholders' perceptions of ways to support decisions about health insurance marketplace enrollment: a qualitative study. *BMC Health Serv Res*, 16, 634 <https://doi.org/10.1186/s12913-016-1890-8>
- Johnson, E. J., Hassin, R., Baker, T., Bajger, A. T., Treuer, G. (2013). Can consumers make affordable care affordable? The Value of choice architecture. *PLOS ONE*. <https://doi.org/10.1371/journal.pone.0081521>
- Joseph-Williams, N., Newcombe, R., Politi, M., et al. (2014). Toward minimum standards for certifying patient decision aids: A Modified Delphi consensus process. *Medical Decision Making*, 34(6), 699-710. <https://doi.org/10.1177/0272989X13501721>

# References (Continued)

Kim, U., Rose, J., & Koroukian, S. (2019). Access and affordability in low- to middle-income individuals insured through health insurance exchange plans: Analysis of statewide data. *J GEN INTERN MED*, 34, 792–795.

<https://doi.org/10.1007/s11606-019-04826-w>

Long, S. K., Shartz, A., & Politi, M. (2014). Low levels of self-reported literacy and numeracy create barriers to obtaining and using health insurance coverage. *Health Reform Monitoring Survey*.

<https://www.urban.org/sites/default/files/publication/49821/low-levels-of-self-reported-literacy-and-numeracy.pdf>

McWilliams, J. M., Afendulis, C. C., McGuire, T. G., & Landon, B. E. (2011). Complex medicare advantage choices may overwhelm seniors—Especially those with impaired decision making. *Health Affairs*, 30(9), 1786-1794.

<https://doi.org/10.1377/hlthaff.2011.0132>

Politi, M. C., Kuzemchak, M. D., Liu, J., Barker, A. R., Peters, E., Ubel, P. A., Kaphingst, K. A., McBride, T., Kreuter, M. W., Shacham, E., & Philpott, S. E. (2016). Show me my health plans: Using a decision aid to improve decisions in the federal health insurance marketplace. *MDM Policy & Practice*, 1. <https://doi.org/10.1177/2381468316679998>

Quincy, L. (2012). What's behind the door: Consumers' difficulties selecting health plans. ConsumersUnion Health Policy Brief. [https://advocacy.consumerreports.org/wp-content/uploads/2013/03/Consumer\\_Difficulties\\_Selecting\\_Health\\_Plans\\_Jan2012.pdf](https://advocacy.consumerreports.org/wp-content/uploads/2013/03/Consumer_Difficulties_Selecting_Health_Plans_Jan2012.pdf)

# References (Continued)

- Quiroga Gutierrez, A. C., & Boes, S. (2024). Bridging the gap: Experimental evidence on information provision and health insurance choices. *Health Economics*, 33(6), 1368–1386. <https://doi.org/10.1002/hec.4820>
- Quiroga Gutierrez, A. C. (2024). Picture this: Making health insurance choices easier for those who need it. *Journal of Behavioral and Experimental Economics*, 111. <https://doi.org/10.1016/j.socec.2024.102223>
- Sinaiko, A. D., Kingsdale, J., & Galbraith, A. A. (2019). Consumer health insurance shopping behavior and challenges: Lessons from two state-based marketplaces. *Medical Care Research and Review*, 76(4), 403–424. <https://doi.org/10.1177/1077558717718625>
- Stein, R. M. (2016). Real decision support for health insurance policy selection. *BIG DATA*, 4(1), 14–24. <https://doi.org/10.1089/big.2016.0012>
- Taylor, E. A., Carman, K. G., Lopez, A., Muchow, A., Roshan, P., & Eibner, C. (2016). Consumer decision-making in the health care marketplace. RAND. [https://www.rand.org/content/dam/rand/pubs/research\\_reports/RR1500/RR1567/RAND\\_RR1567.pdf](https://www.rand.org/content/dam/rand/pubs/research_reports/RR1500/RR1567/RAND_RR1567.pdf)
- Wang, A. Z., Scherr, K. A., Wong, C. A., & Ubel, P. A. (2017). Poor consumer comprehension and plan selection inconsistencies under the 2016 HealthCare.gov choice architecture. *MDM Policy & Practice*, 2(1). <https://doi.org/10.1177/2381468317716441>

## References (Continued)

- Wong, C. A., Kulhari, S., McGeoch, E. J., Jones, A. T., Weiner, J., Polsky, D., & Baker, T. (2018). Shopping on the public and private health insurance marketplaces: Consumer decision aids and plan presentation. *Journal of General Internal Medicine*, 33(8), 1400–1410. <https://doi.org/10.1007/s11606-018-4483-x>
- Wong, C. A., Polsky, D. E., Jones, A. T., Weiner, J., Town, R. J., & Baker, T. (2016). For Third enrollment period, marketplaces expand decision support tools to assist consumers. *Health Affairs*, 35(4), 680-687. <https://doi.org/10.1377/hlthaff.2015.163>
- Wong, C. A., Asch, D. A., Vinoya, C. M., Ford, C. A., Baker, T., Town, R., & Merchant, R. M. (2014). The Experience of young adults on HealthCare.gov: suggestions for improvement. *Annals of Internal Medicine*, 161(3), 231–232. <https://doi.org/10.7326/L14-0287>