

2018 Report on Interviews with Individuals Eligible but Unenrolled in the Healthy Michigan Plan

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Executive Summary

2018 Report on Interviews with Individuals Eligible but Unenrolled in the Healthy Michigan Plan

Introduction

This report presents findings from 16 qualitative interviews conducted by telephone from May to September 2018 with people who were eligible but unenrolled in the Healthy Michigan Plan (HMP). As outlined in the Centers for Medicare & Medicaid Services Special Terms and Conditions, the purpose of these interviews was to explore reasons why eligible individuals remained uninsured and unenrolled in HMP, including their awareness and perceptions of the program. We also explored their decision-making and experiences seeking insurance and health care while uninsured.

Methods

The target population was individuals who would be eligible for HMP (age 19-64, income \leq 133% FPL) and who had been uninsured for at least one year at the time of screening. We sought to recruit a diverse sample with regard to age, race/ethnicity, gender and region. Screeners used self-reported income and household size to calculate modified adjusted gross income (MAGI) to estimate income eligibility. HMP and Medicaid enrollment history were cross-checked with the MDHHS Data Warehouse. From May to September 2018, trained staff conducted the 16 English-language audio-recorded telephone interviews. The interviews were transcribed verbatim and coded using Dedoose software.

Results

Interviewee characteristics

All interviewees had been uninsured for at least 12 months at the time of screening. Of the 16 interviewees, 11 had no history of HMP enrollment and 5 had HMP prior to January 2017. Twelve interviewees were employed, including five full-time and seven part-time. All but one interviewee had achieved at least high school graduation, including seven high school graduates, three with an Associate's degree and five with a Bachelor's degree. Half of the interviewees were age 24-34, five were age 35-50 and three were age 51-64. Seven interviewees were men and nine were women. Seven self-identified as non-Hispanic white, seven as African American and two as Hispanic. Eight of Michigan's 10 prosperity regions were represented.

Aim A: To understand the extent of awareness, knowledge and understanding of HMP among those eligible but unenrolled

- Most interviewees had heard little or nothing about HMP.

- Misperceptions about costs and eligibility for HMP were common based on experiences with the costs of commercial insurance and asset tests in traditional Medicaid.
- Reasons for being uninsured included: (1) employers didn't offer health insurance or the individual was ineligible for insurance due to insufficient duration of employment or working too few hours and (2) belief that health insurance is unaffordable.
- About half of interviewees had explored health insurance coverage.
- Most interviewees were interested in learning more about HMP.

Aim B: To describe the experiences and perceptions of being uninsured among those eligible but unenrolled

- Most expressed concern about current or potential unmet care needs.
- Many expressed concern about financial consequences of being uninsured. Some described the financial impact of current medical bills.

Aim C: To understand decisions about when, where and how to seek care including decisions about emergency room utilization among those eligible but unenrolled

- Most avoided care due to cost unless seriously ill or injured. Some had utilized preventive care services and dental care. Most had not used the ER in the past 12 months but a few had used it frequently.
- Most had forgone at least some types of health care, with dental and preventive care most frequently mentioned.

Limitations

Recruitment of individuals who were uninsured and eligible for HMP required considerable time and effort. Self-reported annual income and household size reflected their status at the time of screening, not for the 12 months prior to screening. Thus, we cannot be certain that each interviewee was eligible for HMP during the entire year. Because interview data were based on self-report, inaccurate recollection and social desirability bias may have influenced the interview process and responses.

Conclusions

In 2018, interviewees who were eligible for HMP and uninsured for at least 12 months displayed a lack of awareness and knowledge about HMP. Misperceptions based on previous experiences with Medicaid contributed to assumptions about their lack of eligibility and dissuaded some from applying. Most interviewees had forgone health care because they said they could not afford to pay out-of-pocket or were afraid of incurring medical debt. Preventive care and dental care were most often forgone. Most limited health care use except in the most serious situations.

2018 Report on Interviews with Individuals Eligible but Unenrolled in the Healthy Michigan Plan

Introduction

The University of Michigan Institute for Healthcare Policy & Innovation (IHPI) is conducting an evaluation of the Healthy Michigan Plan (HMP) as required by the Centers for Medicare & Medicaid Services (CMS) through a contract with the Michigan Department of Health and Human Services (MDHHS). Domain IV of the evaluation includes a series of surveys called *Healthy Michigan Voices*. In 2017, to complement a survey of new HMP enrollees, we conducted 22 in-person qualitative interviews with people who were eligible for HMP but were unenrolled in the program (2017 Report on Interviews with Individuals Eligible but Unenrolled in the Healthy Michigan Plan). This 2018 report presents findings from 16 additional qualitative interviews conducted by telephone from May to September 2018 with people who met Healthy Michigan Plan eligibility criteria and had been uninsured for at least one year prior to the interview. As outlined in the CMS Special Terms and Conditions, the purpose of the interviews was to explore reasons why eligible individuals remained uninsured and unenrolled in HMP, including their awareness and perceptions of the program. We also explored their decision-making and experiences seeking insurance and seeking health care while uninsured.

Methods

The target population was individuals who would be eligible for HMP (age 19-64, income $\leq 133\%$ FPL) and who had been uninsured for at least one year at the time of screening. We sought to recruit a diverse sample with regard to age, race/ethnicity, gender and region. Recruitment flyers, letters and email were sent to community-based organizations and posted or distributed at public locations such as community college campuses and farmers' markets. Ads were placed in newspapers, on Craigslist and Facebook, and through the UMHealthResearch study recruitment website. Screeners used self-reported income and household size to calculate modified adjusted gross income (MAGI) to estimate income eligibility. HMP and Medicaid enrollment history were cross-checked with the MDHHS Data Warehouse. The structured interview guide included questions and probes that explored the following domains: (a) insurance status prior to becoming uninsured and reasons why that insurance ended; (b) current employment and student status; (c) reasons for not having health insurance; (d) awareness and knowledge of HMP and why coverage ended if previously enrolled in HMP; (e) health care utilization and forgone care; (f) outstanding medical bills, if any; (g) perceptions of being uninsured; (h) interest in learning more about or signing up for HMP; and (i) demographic information and health status. From May to September 2018, trained staff conducted the 16 English-language audio-recorded telephone interviews. The interviews were transcribed verbatim and coded using Dedoose software. Thematic analysis was conducted by two qualitative data analysts with discrepancies in coding resolved by consensus. In the results that follow, we use "few" to describe responses/experiences described by 1-3 interviewees, "some" for those shared by 4-6 interviewees, "many" to describe those experienced by 7-9 interviewees, and "most" when referring to at least 10 interviewees.

Results

Interviewee characteristics

- All interviewees had been uninsured for at least 12 months at the time of screening. Of the 16 interviewees, 11 had no history of HMP enrollment and 5 had HMP prior to January 2017. Four interviewees reported being uninsured for about a year, seven for 13 months to three years, three for four to six years, and two for at least seven years, including one who had never had insurance as an adult. Eleven previously received coverage through a job, including eight through their own job and three through a family member. Prior to becoming uninsured, two interviewees had purchased private insurance and two had been on Medicaid.
- Twelve interviewees were employed, including five full-time and seven part-time. All but one of the unemployed interviewees were seeking employment; one retired when her job was eliminated. Ten interviewees reported their health status to be either excellent or very good, four reported good health, and two reported fair health. Nine reported chronic conditions, the most common being depression.
- All but one interviewee had achieved at least high school graduation, including seven high school graduates, three with an Associate's degree and five with a Bachelor's degree. Half of the interviewees were age 24-34, five were age 35-50 and three were age 51-64. Seven interviewees were men and nine were women. Seven self-identified as non-Hispanic white, seven as African American and two as Hispanic. Eight interviewees had never married, four were married, and four were divorced. All 10 Michigan prosperity regions except 1 (Upper Peninsula) and 2 (Northwest) were represented.

Aim A: To understand the extent of awareness, knowledge and understanding of HMP among those eligible but unenrolled

Most interviewees had heard little or nothing about HMP

- Most interviewees had not heard of HMP. A few who had been enrolled in HMP before 2017 said they had not heard of HMP, including two whose family members, (i.e., mother, wife) handled their insurance coverage.

Misperceptions about HMP were common

- Most interviewees who thought they had heard about HMP, including some with prior HMP coverage, had misperceptions about program eligibility, coverage, costs and affordability. Some conflated HMP with traditional Medicaid eligibility criteria, including income levels and asset tests. Some based their perceptions of affordability of HMP on premiums and deductibles for Marketplace or other private insurance plans.

Most people were interested in learning more about HMP

- After hearing a brief description of HMP, most interviewees were interested in learning more about or applying for HMP. Of those who were not interested, most thought they would be ineligible due to expected income increases or misperceptions about HMP eligibility criteria.

Reasons for being uninsured

Employers didn't offer health insurance or individual was ineligible for insurance due to insufficient duration of employment or working too few hours

- Most interviewees were employed at least part-time but their jobs did not offer employer-based insurance or the interviewee had insufficient duration of employment or weekly hours of work to be covered. Several interviewees described losing insurance coverage due to their own or a family member's job loss or change.

Belief that health insurance is unaffordable

- Most interviewees said they were uninsured because insurance was unaffordable, based on their experiences with employer-based and other private insurance with high premiums and deductibles. Lack of knowledge and misperceptions about HMP eligibility and costs contributed to affordability-related reasons. Some interviewees said that the cost of insurance exceeded what they spent out-of-pocket for health care, so they chose to remain uninsured.

Exploring health insurance coverage

- About half of interviewees had explored insurance coverage, usually online. Most described finding information about private or Marketplace insurance but no one described knowing about subsidies for Marketplace plans. Most interviewees found that the insurance options they explored were unaffordable or believed they were ineligible.
- All of those who said they did not explore insurance options in the past 12 months were people who described themselves as in very good to excellent health. Some who did not explore had misperceptions about Medicaid or HMP.

Aim B: To describe the experiences and perceptions of being uninsured among those eligible but unenrolled

Concern about current or potential unmet care needs

- Most interviewees expressed concern that not having health insurance could result in unmet care needs and financial challenges. Many used strong and emotional language to convey their worry and concern about lack of coverage such as "I'm very upset" and "It's a burden". Many interviewees expressed discomfort with not being able to anticipate when they may need care. Some said that even in an emergency, they would

not seek care. Some were concerned about not being able to access routine care that is recommended to monitor health. A few interviewees said they were not concerned about being uninsured as they did not see insurance as a necessity.

Concern about financial consequences

- Many interviewees were concerned about a major or catastrophic health issue happening in the future that could result in bills they could not afford to pay and put them in substantial debt.

Financial impact of current medical bills

- Most interviewees said they did not have outstanding medical bills. Those interviewees with outstanding medical bills said the bills, which ranged from \$1,000 - \$30,000, resulted from emergency room visits or dental care. The financial impact of these medical bills included debt, credit problems, and not being able to pay other bills.

Aim C: To understand decisions about when, where and how to seek care including decisions about emergency room utilization among those eligible but unenrolled

Avoiding care due to cost unless seriously ill or injured

- For most interviewees, lack of insurance led them to not seek care due to cost, unless the condition was serious. They often decided not to seek preventive care or care for mild to moderate routine illnesses. Most avoided specialty and mental health services. Inability to pay for care was their primary concern. Only a few would seek needed care despite being uninsured, usually at an urgent care or walk-in clinic. Most reported they would seek emergency care if absolutely needed. A few said they would not seek emergency care or had actually avoided emergency care for serious situations.

Health care utilization

- Some interviewees had received a few preventive care services. Some reported receiving dental care. About half of interviewees discussed using free or low cost clinics, dental schools or discount coupons to obtain needed care. Most paid for the care they received, using cash or credit cards.
- Most interviewees had not used the ER in the past 12 months. Among the four who reported they had, three had gone at least four times in the past year. Those who used the ER went for injuries or health problems that they described as severe or painful. A few interviewees described receiving urgent care for emergency issues and injuries. A few said they used urgent care settings when ill rather than primary care settings.

- The four interviewees who described visits to the ER reported that hospital staff had not discussed their eligibility for HMP or options for enrollment with them (one reported discussing Medicaid).

Forgone Care

- Most interviewees had forgone one or more types of health care because they could not afford to pay out-of-pocket or were afraid of incurring medical debt. Sometimes they looked into getting care and found that care was out of their price range; sometimes they assumed that they would not be able to pay.
- Forgone dental care and preventive care were mentioned most frequently. Interviewees described consequences of forgone care including pain, deteriorating health, or not getting preventive care that would help detect or monitor health conditions.

Limitations

Although we successfully recruited individuals diverse in age, gender, region and race/ethnicity, recruitment of individuals who were uninsured and eligible for HMP required considerable time and effort. The views of people who are eligible but unenrolled in HMP and reluctant to provide personal data needed for participation in the interview may be underrepresented in the results. Interviews were only available to English speakers, so the results may not apply to HMP-eligible but unenrolled individuals whose primary language is not English. Self-reported annual income and household size reflected their status at the time of screening, not for the 12 months prior to screening. Thus, we cannot be certain that each interviewee was eligible for HMP during the entire year. Because interview data were based on self-report, inaccurate recollection and social desirability bias may have influenced the interview process and responses.

Conclusions

In 2018, interviewees who were eligible for HMP and uninsured for at least 12 months displayed a lack of awareness and knowledge about HMP. Misperceptions based on previous experiences with Medicaid contributed to assumptions about their lack of eligibility and dissuaded some from applying. Interviewees with income close to the threshold sometimes did not perceive themselves to be eligible or were worried that changes in their income would render them ineligible. Lack of employer-based insurance and the perceived high cost of private insurance were the primary reasons for being uninsured. Many interviewees had explored insurance options in the last 12 months, mostly online, but they did not learn about HMP or Marketplace subsidies. Those interviewees who received care in an ER or hospital said that HMP had not been discussed with them (although one said Medicaid was discussed). Most interviewees had forgone health care because they said they could not afford to pay out-of-pocket or were afraid of incurring medical debt. Preventive care and dental care were most often forgone. Most limited health care use except in the most serious situations.

Comparison of 2017 and 2018 themes

There were a few differences in eligibility criteria for interviews between 2017 and 2018 that could have affected some of the results. In 2018, interviewees had to be uninsured for at least 12 months, those with VA health care were excluded and 5 interviewees had had HMP prior to 2016. In 2017, interviewees had to be uninsured for at least 6 months, could be receiving VA care and were excluded if they had ever been covered by HMP. The conclusions derived from the 2017 and 2018 interviews with individuals who were eligible for HMP but unenrolled were largely consistent. In both years, most interviewees were unaware and lacked knowledge about HMP. In both years, most interviewees were working but did not have employer-based insurance and perceived that they could not afford the high cost of the deductibles and premiums associated with commercial insurance. In both years, they were unaware that they might qualify for HMP or, when their income rose above HMP eligibility levels, for Marketplace subsidies. In both years, some interviewees believed that it was financially advantageous to pay out-of-pocket for care than to purchase insurance, especially if they were healthy. Misperceptions about HMP eligibility criteria based on prior experience with Medicaid income and asset requirements were more common in 2018. Negative experiences or perceptions of the administrative burdens of public insurance was a theme in both years, while philosophical opposition to public programs was only a theme in 2017. Forgoing needed primary and preventive care and dental care was a very common theme in both years. Most only used health care when problems were very serious. Most interviewees in both years expressed a preference for being insured and almost all were interested in learning more about or applying for HMP.

Recommendations for Outreach to Those Eligible but Unenrolled

It may be useful for HMP outreach efforts to highlight the differences between eligibility criteria for HMP and Medicaid, including the expanded income limits and lack of asset tests for HMP. This may be particularly helpful for individuals who have previously applied for or received Medicaid. Clarification of differences between HMP and Marketplace plans and other private insurance plans would also be helpful. Although outreach efforts have already been extensive and diverse, it is possible that many people who are newly eligible for HMP may not have been aware of or seen information on the program during earlier education and outreach efforts. Waiting room materials (posters, brochures) may be useful in settings where uninsured people may seek care such as dental schools, discount store optical shops and pharmacies, charity/free clinics, urgent care, emergency departments, and health screening events; and farmers' markets, food pantries and community events. Hospital and other provider billing personnel could also be encouraged through policy guidance to provide information about HMP to those who pay for their care out-of-pocket and/or struggle to pay regularly. Because those who are eligible but not enrolled tend to avoid seeking care unless they face a serious health issue, outreach involving health care sites is important but insufficient to reach them. Similarly, for those not enrolled because they assume their income makes them ineligible, outreach through social service agencies that serve those with very low incomes may not be effective either. Schools and workplaces that do not provide health insurance coverage, and organizations that employ largely part-time, seasonal, or temporary workers may be particularly important locations to target with information about HMP.

Supplemental Material

2018 Report on Interviews with Individuals Eligible but Unenrolled in the Healthy Michigan Plan

Methods

Sample

The target population was individuals who would be eligible for HMP (age 19-64, income \leq 133% FPL) and who had been uninsured for at least one year at the time of screening. We sought to recruit a diverse sample with regard to age, race/ethnicity, gender and region. We limited sampling to those who could be interviewed in English due to very limited success in recruiting HMP-eligible monolingual Spanish speakers during earlier HMP evaluation interviews.

To understand the perspectives of those individuals eligible to re-enroll in HMP, we expanded the target population to include five individuals who were eligible for HMP, had a period of HMP enrollment before January 2017, and had been uninsured for at least 12 months.

Recruitment

Recruitment was conducted through mail and email outreach. We disseminated letters and flyers to community-based organizations including federally qualified health centers, free clinics, community action agencies, outreach and enrollment providers, and public locations such as community college campuses and farmers' markets. We placed ads in newspapers, on Craigslist and Facebook, and through the UMHealthResearch study recruitment website. To assure geographic diversity and to expand our reach in counties that had few participants in 2017, we initially targeted ads to Michigan Prosperity Regions 2 (Northwest), 4 (West), 6 (East/Thumb), and 8 (Southwest). Later, Craigslist ads were placed statewide. Facebook ads were targeted to people ages 40-62, because of initial low recruitment in this age group. Recruitment materials were adapted from the 2017 "eligible but unenrolled" (EBU) materials based on feedback from the Domain IV community steering committee and staff. Materials provided a variety of means for contact, i.e., a toll-free recruitment telephone line, text number, email address, and an "I'm interested" button on the UMHealthResearch website.

Screening

After potential interviewees contacted project staff to express interest in participating, staff responded via email, text, or phone to arrange a screening call. Respondents were contacted up to eight times. If they were consistently unreachable or never responded, they were considered lost to follow-up. All respondents went through two levels of screening. First, trained screeners used a script and worksheet to ask callers about their current insurance status, enrollment in Medicaid, Medicare or VA care, county of residence in Michigan, full address, demographic information including age, gender, race/ethnicity, duration of being uninsured, and history of

prior HMP enrollment. Staff also administered questions about household size and income to calculate modified adjusted gross income (MAGI) to assess income eligibility for HMP. Those deemed eligible for the interview were referred to the second level of screening conducted by the University of Michigan Child Health Evaluation and Research Center (CHEAR) staff, who verified Medicaid and HMP enrollment history in the MDHHS Data Warehouse.

Between May to September 2018, 184 people contacted the study team indicating their interest in participating in an interview. Of these, 47 were unreachable after a maximum of eight attempts, and 137 were successfully reached. After the first level of screening, 96 were deemed ineligible leaving 41 who were presumed eligible to participate and referred for Medicaid/HMP enrollment verification. Of these 41 individuals, 25 were deemed ineligible due to having Medicaid or HMP coverage in the last 12 months. Overall, the most common reasons for being ineligible to participate were: uninsured less than 12 months (n=40); income above 133% FPL accounting for 5% income disregard (n=20); currently insured (n=31, of whom 25 were currently enrolled in Medicaid or HMP); previous enrollment in HMP since December 2016 (n=12), participant did not answer screening questions or withdrew prior to the interview (n=9); or not a Michigan resident (n=1). The final interview sample included 16 people, including 11 with no prior HMP coverage and five who had been enrolled in HMP prior to December 2016.

Interview guide and process

The 2017 interview guide was revised to gain additional insights on themes that arose in the 2017 interviews, including the impact of employment on insurance status in greater depth. The 2018 structured interview guide included questions and probes that explored the following domains: (a) insurance status prior to becoming uninsured and reasons why that insurance ended; (b) current employment and student status and, if not working, duration and reasons for unemployment; perceived income stability; (c) reasons for not having health insurance, including exploration of options; (d) knowledge of HMP, including application experience if indicated, reasons for not applying if indicated, why coverage ended if previously enrolled in HMP, and perceptions of concerns, coverage and affordability; (e) health care utilization and forgone care, including perceived need, care received and forgone, reasons for not getting care and consequences, emergency room and hospitalization; and impact of being uninsured on health care decision-making; strategies for getting care, formally and informally; (f) outstanding medical bills, if any; (g) perceptions of being uninsured; (h) interest in learning more about or signing up for HMP; and (i) demographic information and health status. A modified version of the guide was developed for the subsample of people who had had HMP prior to 2017 to explore why their HMP coverage ended, whether they had reapplied, the outcome of that application, and any subsequent reason for ineligibility. See Appendices A and B for the interview guides.

The interview guide was pilot tested with two individuals and finalized after minor edits to improve clarity. From May to September 2018, trained CHEAR staff conducted the 16 structured English-language telephone interviews. Interviews were recorded with interviewee permission. Interviews averaged 22 minutes in duration (range 14 to 35 minutes). After the interview, information about HMP (if requested during the interview), a thank-you letter, and a \$25 Visa gift card were mailed to interviewees to compensate them for their time.

Data analysis

Audio recordings of the interviews were transcribed verbatim and double-coded using Dedoose version 8.18 software. A draft code book was developed after team members read the transcripts. Three team members used the code book to code two transcripts. Following discussion to refine definitions and resolve discrepancies, the team finalized the code book which was then used by two qualitative data analysts to double code all transcripts. Consensus discussions were held with the EBU team leader to resolve questions or coding discrepancies. Excerpts of coded material were reviewed by three pairs of evaluation team members to develop draft themes that were presented for discussion and consensus at team meetings. Summaries of major themes with illustrative quotations were developed for integration into the final report. In presenting results, we refer to individuals who were eligible but unenrolled as “interviewees”.

In the results that follow, we use “few” to describe responses/experiences described by 1-3 interviewees, “some” for those shared by 4-6 interviewees, “many” to describe those experienced by 7-9 interviewees, and “most” when referring to at least 10 interviewees.

Results

Interviewee characteristics

Interviewee characteristics are summarized in Table 1.

Demographic characteristics

Half of the interviewees were age 24-34, five were age 35-50 and three were 51-64 years of age. No interviewees were between 19 and 23 years old. Seven interviewees were men and nine were women. Seven self-identified as non-Hispanic white, seven as African American and two as Hispanic. Eight interviewees had never married, four were married, and four were divorced. All but one interviewee had achieved at least high school graduation, including seven high school graduates, three with an Associate’s degree and five with a Bachelor’s degree. All 10 Michigan prosperity regions except Regions 1 and 2 (Upper Peninsula and Northwest) were represented among the interviewees.

Employment and student status

Twelve of sixteen interviewees were employed, including five with full-time and seven with part-time employment at the time of the interview. Three interviewees were unemployed, one was retired, one was a full-time student (who was also working part-time). Most of those with jobs described having fairly consistent incomes. Four interviewees, three of whom worked part-time and one who had recently lost a job, described weekly or seasonal changes in income. Of the unemployed interviewees, one had recently lost seasonal employment but expected a new job soon, one was still seeking employment, and one was in school part-time but said he

was having a hard time finding a job after his previous job ended two months ago. The retired employee had opted for early Social Security when her job was eliminated.

Duration uninsured and prior insurance

Of the 16 interviewees, 11 had no history of HMP enrollment and 5 had HMP prior to January 2017. All interviewees had been uninsured for at least 12 months at the time of screening. Four interviewees reported being uninsured for about a year, seven for 13 months to three years, three for four to six years, and two for at least seven years, including one who had never had insurance as an adult. Eleven previously received coverage through a job, including eight through their own job and three through a family member (two by parents and one by a spouse). Two interviewees had purchased private insurance and two had been on Medicaid prior to becoming uninsured.

Health status

Ten interviewees reported their health status to be either excellent or very good, four reported good health, and two reported fair health. Seven reported no chronic conditions. Seven reported a mood disorder (most often depression); three a chronic lung condition (two chronic bronchitis, one COPD). Additional conditions reported by one person each were chronic hypertension, arthritis, fibromyalgia, anemia, and a rare genetic dermatological condition.

Table 1: Interviewee Characteristics

Characteristics	n
Age	
19-23	0
24-34	8
35-50	5
51-64	3
Gender	
Male	7
Female	9
Race/Ethnicity	
White	7
Black or African American	7
Hispanic/Latinx	2
Marital Status	
Never married	8
Married	4
Divorced	4
Education	
Less than high school	1
High school degree	7
Associate's degree	3
Bachelor's degree	5

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Employment	
Employed full-time	5
Employed part-time	7
Not employed (not a student)	2
Not employed (part-time student)	1
Retired	1
Region	
Upper Peninsula	0
Northwest	0
Northeast	1
West	2
East Central	1
Thumb	2
South Central	2
Southwest	1
Southeast	3
Detroit Metro	4
Healthy Michigan Plan Coverage	
Prior HMP coverage	5
No prior HMP coverage	11
Prior Insurance Coverage	
Through own job	8
Through a family member's job	3
Medicaid	2
Private insurance	2
None ⁺	1
Duration of Uninsurance	
1 year	4
>1-3 years	7
4-6 years	3
7+ years	2
Health Status (self-report)	
Poor	0
Fair	2
Good	4
Very good	7
Excellent	3

⁺ One interviewee, age 34, reported no insurance as an adult

Aim A: To understand the extent of awareness, knowledge and understanding of HMP among those eligible but unenrolled

Awareness and knowledge of HMP

Most interviewees had heard little or nothing about HMP

Most interviewees had not heard of HMP. Of the few who said that they had heard of it, most confused it with Medicaid or Marketplace plans, whether or not they had had HMP coverage before 2017. Because most knew little or nothing about HMP, interview questions about concerns about the program, whether HMP would cover their health care needs, and whether it was affordable were unanswered or participants said they were uncertain.

No. Not Healthy Michigan. I've heard of, I think it was called, "Healthy Child...I've never heard of Healthy Michigan. I don't even know what you're telling me is really an option.... (female, 51-64, Ingham, no prior HMP)

A few people with prior HMP said they had not heard of HMP, including two whose family members, (i.e., mother, wife) handled their insurance coverage.

Because my wife usually had dealt with that stuff [insurance]. I really didn't necessarily deal with that. She usually take care of that stuff for me. (male, 19-34, Wayne, prior HMP)

[Referencing previous HMP coverage] That may just be. That might be help from my mother or something, put me on when I lost coverage through her...I rarely go up to the doctor. So I really wouldn't be 100% certain. (male, 19-34, Clare, prior HMP)

Most people were not concerned about HMP features because most were unaware of the program. One person expressed concern about being able to keep her providers if she applied for HMP.

Maybe just the providers, because I had other insurance, you know, that I had where the providers were covered. I don't know if everybody would be with this [HMP] plan...The potential for having to switch [providers]...I didn't really understand if I were to try to...if that would be restricted to a certain like geographical area or how my providers would be limited, and I didn't have good resources for figuring that out....there being a lot of confounding factors in terms of eligibility and criteria and stuff (female, age 19-34, Kent, prior HMP)

Only a few had some knowledge of HMP

I just think about working and getting better health for Michigan. I know they cover, I would say, ER visits, office visits. I think they have dental and vision visits maybe. I think at some point they might have had an age limit on it. I know they cover vision visits....To my knowledge, there's no cost. You may have copays, office visit copays, pharmacy is covered, and then they have copays with pharmacy, things like that. (female, age 51-64, Wayne, no HMP)

Misperceptions about HMP were common

When asked about HMP, most interviewees who thought they had heard about HMP, including two with prior HMP, had misperceptions about HMP based on prior experiences with Medicaid or private insurance, including Marketplace plans. Some interviewees conflated HMP with traditional Medicaid, including asset determination and other requirements, and restrictions based on age and parental status that they believed disqualified them.

Most of it that I know about it is that it's free for kids...I guess I'm just under the understanding, you know, because 30 years ago I was on help when I was a single mom, and if you owned a car that was worth anything over \$1,000, they like deducted that funding and said, "you have things of value." So you couldn't get help. You had to sell your things of value, which I couldn't sell my car. I had to take my daughter to doctors and stuff, you know? (female, age 45-50, Eaton, no prior HMP)

[I wouldn't like] the really high monthly deductible for a spenddown. That would be one. Like I said before, the invasiveness of when it comes to the State, at least any type of public assistance, it's "How many vehicles," "how much money is in your bank account," "how much this," which is great except that they don't look at, you know, two...two 15+ year old vehicles that are worth next to nothing...And then at one point, I don't know with some of their stuff, there was a work requirement, even if you were going to school. (female, age 35-44, Tuscola, prior HMP)

With the Medicaid plan...There are different aspects of it like the plan and, I guess, the WIC program and programs for mothers with children or mothers with infants. (female, age 51-64, Wayne, prior HMP)

When I made that transition [to new job]...For some reason, I just stopped reading, I guess, because the government was saying I was making too much and I could afford to pay for it [insurance]. So they just let me keep mine at my job and they just kind of terminated that one [HMP], but they kept it through my son because my son still receives it, but I just don't receive it and my wife, she doesn't receive it...Like I couldn't even give an honest explanation of why. (male, 19-34, Wayne, prior HMP)

Some interviewees who had HMP before 2017 had misperceptions about program coverage, costs and affordability.

[HMP is] probably not [affordable]...Because I'm 40 years old. My husband, myself and my daughter still live with my parents because we can't afford to live on our own. That's honestly more important...There's other things that are more important...Plus it doesn't cover dental, at least last I knew. (female, age 35-44, Tuscola, prior HMP)

Well, it would [cover his health care needs] if I don't catch any major chronic illnesses. I mean, stuff that I had had issues with, the insurance plan definitely covered, definitely came in when I didn't have any money. It definitely came in handy to cover costs of medication. My copay was very reasonable....I think I can afford it...Now I'm more able to because, like I said, my income

changed. So they'll be able to give me a more affordable rate. (male, age 19-34, Wayne, prior HMP)

Several interviewees assumed that HMP would be unaffordable for them, based on experiences with high private insurance premiums and deductibles or exploration of the Marketplace plans.

The last time I remember looking at it, there was different tiers...It goes by your income, the levels....If we did qualify, I still wouldn't be able to....Just with deductibles and everything...We still would have had to pay for our doctor visits anyway until that deductible was reached...So it didn't really make a lot of sense for us...I mean, we're not sick. You know, I mean we don't have any health issues. We're pretty healthy. So it would probably cover what we need, but we don't really need it....I just knew it was above us...what we could budget...All my other bills and...I'm barely getting, you know, my day-to-day bills paid for....housing, truck payment, insurance, you know, auto insurance, home insurance, big utilities and all the day-to-day bills we have to pay. (female, age 45-50, Montmorency, no prior HMP)

Interest in HMP

Most were interested in learning more about HMP

Midway through the interview, the interviewer briefly described HMP and asked about interviewees' reactions in terms of perceived eligibility, affordability and coverage. At the end of the interview, interviewees were asked about their interest in learning more about or applying for HMP and most interviewees expressed interest. Of those, some thought they would be eligible, some did not, and a few were uncertain.

Yes (I'm interested in HMP)...I'll look into it when we get off the phone...I mean it won't hurt to look into it. It sounds like it would be beneficial, like something I can become a...you know, recipient of....Based on what you're telling me, yes (I think I'm eligible for HMP)...As long as there are no other qualifications. I don't have any children or anything... (female, 19-34, Macomb, prior HMP)

Yes...If I could get any sort of help with paying for medical, there wouldn't be anything I wouldn't like about it, even if it was just, you know, "we can only reduce it half off to see a doctor." (female, 51-64, Ingham, no prior HMP)

Yeah. I would definitely be more interested in that (HMP). I mean, definitely now, as soon as I get off this conversation or whatever, I definitely will take advantage of it if they will give it to me now....Like I said, I'm not making as much money as I was a year ago. (male, 19-34, Wayne, prior HMP)

It (HMP) seems like something that would be helpful because that's how poor I am....Probably, yeah (think I am eligible)....I make less than the amount of money [income limit]. (male, 19-34, Washtenaw, no prior HMP)

Yes, I would. I would actually be really interested in it [HMP]....I would have to look more into it just to make sure. But if it just has to do with income and, you know, that kind of thing, then I think I would be....Just kinda thinking about what my income now is and if it stays the same in the next year, then, yes, I would qualify. (female, 35-44, Washtenaw, no prior HMP)

Yes (interested)....Probably not (eligible), if we make just a little over \$32,000 anyway...I think we made last year it [income] was right around...It was right above...I mean it was borderline [the income limit]. (female, 45-50, Montmorency, no prior HMP)

I don't know [if interested]...It's one of those things that just gets your hopes up, you fill everything out, and then something stupid why they can't give it to you....Yeah. I don't think I would...I don't think I'd qualify for it, I guess. (female, 45-50, Eaton, no prior HMP)

Some were not interested or were unsure of their interest in applying for HMP, especially if their income was close to the eligibility level or they were in transition between jobs

Like I would have been (interested), but until I...Like it was solidified that I will have insurance through my employer within the next two months, now I'm not....I'm unclear right now because of the fact that I'm in like this kind of probationary period for my employer health insurance. So I honestly don't know. Given my income technically right now, I don't know. It's hard to say. (female, 19-34, Kent, prior HMP)

I actually have some paperwork on it [HMP] that I've been going over. I start a new job on Monday...this coming Monday, which would put me out of the price bracket again. (male, 19-34, prior HMP)

Reasons for being uninsured

Most interviewees described several reasons for not having health insurance, the most common being having a job that did not offer insurance or being unemployed, and not being able to afford to purchase insurance. Although most interviewees were employed at least part-time, most of their jobs did not offer employer-based insurance or the interviewee had insufficient duration of employment or weekly hours of work to be covered. Several interviewees described losing insurance coverage due to their own or a family member's job loss or change. Several job losses were due to employers going out of business. Most interviewees said they were uninsured because insurance was unaffordable, based on their experiences with employer-based and other private insurance with high premiums and deductibles. Some interviewees said that the cost of insurance exceeded what they spent out-of-pocket for health care so they chose to remain uninsured. Lack of knowledge and misperceptions about HMP eligibility and costs contributed to these affordability-related reasons. Some interviewees did not pursue coverage because of experiences with state bureaucracy, usually with traditional Medicaid in the past and, more recently, two who hadn't been able to complete required paperwork in time.

Employers didn't offer health insurance or individual was ineligible for insurance due to insufficient duration of employment or working too few hours

Job did not offer insurance

Well it [insurance] costs a lot, and my job doesn't offer it. (male, 19-34, Kent, no prior HMP)

Either making too much or the company doesn't offer it, and I'm not making enough to buy it personally. (male, 35-44, Wayne, no prior HMP)

My employer doesn't offer it right now....I don't think I can afford it on my income. (male, 19-34, Kalamazoo, no prior HMP)

Insufficient duration of employment or working too few hours

I'm not eligible because I've been switching quite a few jobs, so I haven't had...Like I haven't been at a job long enough to get health insurance. (male, 19-24, Kent, no prior HMP)

I would have to be full-time, and right now I'm part-time and the hours fluctuate because of changes in upper management. (female, 19-34, Macomb, prior HMP)

I didn't have enough time or hours in on their requirements or whatever. I was only there for like 90 days, and I needed to be there for 120 or something stupid. (male, 35-44, Wayne, no prior HMP)

Job loss by interviewee or family member led to loss of coverage

I was going to get it through work, and now I'm currently unemployed. So there's that reasoning....financially I can't afford to get it on my own. (male, 19-34, Clare, prior HMP)

[Previous insurance ended when] I lost my job with that particular company. They went out of business. (female, 19-34, Macomb, prior HMP)

[Health insurance ended because] They initially were eliminating my job, but before the elimination date, they offered an early retirement. (female, 51-64, Wayne, no prior HMP)

I got terminated from my job in June of last year....All my insurance and everything stopped like 20 days after that....I couldn't keep the same thing with the premiums they were asking for. (male, 19-34, Wayne, prior HMP)

[Previously I had] my husband's insurance through work. [It ended because of] divorce. (female, 45-50, Eaton, no prior HMP)

It was health insurance under my parents. Through their job. [It ended because] they're no longer at the job. (male, 19-34, Washtenaw, no prior HMP)

Belief that health insurance is unaffordable, including some who had misperceptions about HMP eligibility and costs

The high cost of it...It's just the money-wise. You know, paying like \$400 is like twice my car payment. (female, 35-44, Washtenaw, no prior HMP)

The cost. The price. I can't afford what they've been asking. Although especially, like I have a family, and so I'm trying to do all my family. The price has been out of reach somewhat. (male, 19-34, Wayne, prior HMP)

I know that I'm poor enough to get health insurance, but then they won't let me because I own my own little boutique. I own my own business...I know I'm poor enough that they would give me medical assistance, but yet they don't because I own my own businesses. So the businesses make money, the financials do all the write-offs and pay all the bills, I barely make nothing...I couldn't afford it. (female, 45-50, Eaton, no prior HMP)

I think our income is a little too much for what they'll approve...If we did qualify, I still wouldn't be able to...like the deductible stuff... (female, 45-50, Montmorency, no prior HMP)

Some said health insurance costs more than paying out-of-pocket for care or did not think it was necessary because they were generally healthy

I can't afford it and, actually, when I did have health insurance, I paid more for health insurance than when I go to the doctor. It would just be cheaper for me to pay the up-front cost since I go so little....the monthly payment and then whatever the deductible was. I think I spent more paying for health insurance than I used in 2 or 3 years [for care]. (female, 35-44, Tuscola, prior HMP)

The rates just went up too much...It was kind of like a \$5,000 premium, and it basically just covered if I had cancer or something and, you know, I'm healthy, I don't smoke. I work out a lot, and it was just kind of ridiculous paying, you know, \$350-\$400/month for...You know, who knows if I'll get cancer or not? (female, 35-44, Washtenaw, no prior HMP)

Whenever I got sick, I just go to the urgent care and pay them \$40 to check me out...It really didn't strike me if I needed to get checked out or not....I still kind of took care of business and pay my doctor bills if I needed to see a doctor...or maybe because I might not...I might not have used it. I mean I'm paying on it weekly and I wasn't using it. Maybe that will be the case. Yeah, that's what I thought. I just wasn't using it as frequently. (male, 19-34, Wayne, prior HMP)

It just costs too much. Even if we got like the lowest cost plan available, we think it just... seems to be cheaper just to go to the local clinic where we can walk in and pay. We get a reduced, like a sliding scale fee or price, and it's easier for us to pay that because with the deductibles and everything...It's just not applicable to us....It's more affordable for us just to go in when we need to go in...Our local clinic only charges us \$10 to \$40. (female, 45-50, Montmorency, no prior HMP)

A few participants, especially those who said they were healthy, said that they did not have insurance because they did not think it was a necessity or a priority.

I don't see [health insurance] as a necessity. (male, 19-34, Washtenaw, no prior HMP)

I just don't have money...It wasn't a priority...I don't know. I didn't look into it really. (male, 19-34, Washtenaw, no prior HMP)

Experiences with state bureaucracy: “Jumping through hoops”

I did look into the Obamacare. At the time...I guess I would not call it “ranges,” but I put down what I was getting from my severance package, because they were still paying my salary. So that kind of made it very expensive to get. So from there, it actually gave you the option to apply for a Medicaid plan, which I did. I applied, but the documentation they wanted as far as my income...It took me a little while to get, and so I didn't get it within the timeframe that they wanted, but I did send it in, you know, when I did get it, which was after the timeframe, but I never heard anything back. So I'm reapplying for Medicaid...I did get the documentation in behind the deadline, but I sent it in anyway, thinking, you know, if I qualify, I qualify. (female, 51-64, Wayne, no prior HMP)

I apparently didn't get paperwork back quick enough. And then it's been nothing but a game trying to get ahold of somebody to get it reinstated again. Everybody keeps passing me around. (male, 35-44, Wayne, no prior HMP)

I didn't think I would get help. The state's system is kind of messed up...Because my income isn't anything. Rarely it pays the bills, but yet they don't usually want you owning anything of value. So I just don't see them ever really working with people like me...I think those programs are just messed up. (female, 45-50, Eaton, no prior HMP)

At one point, I was working and I had the option of health insurance. Like I said before, I mean if it's a \$2,500 deductible, what's...There's no point. If I spend \$100 bucks to go to the doctor every maybe 6 months, it's not worth the invasiveness of the State and all their questions. (female, 35-44, Tuscola, prior HMP)

I just didn't feel like going down to...dealing with ADC...You know, the state. I just didn't feel like going down there. I just didn't have time to go down there. I'm in good health. So I just didn't need it right now...[It's] jumping through hoops. (female, 51-64, Genesee, no prior HMP)

Exploring health insurance coverage

In the past 12 months, nine interviewees had explored insurance coverage and seven had not. Most of those who explored did so online. Only two described finding out about HMP or Medicaid, one of whom applied. Most described finding information about private or possibly Marketplace insurance but no one described knowing about subsidies for Marketplace plans. Most interviewees found that the insurance options they explored were unaffordable. Some described looking at specific health plans, especially Blue Cross Blue Shield. All of those who

said they did not explore insurance options in the past 12 months were individuals who described themselves as in very good to excellent health. Some who did not explore insurance options had misperceptions about Medicaid or HMP.

Many interviewees explored insurance options but found them unaffordable or believed they were ineligible

I did look online, and I was quoted a price that was...It was ridiculous. It was not affordable. (female, 19-34, Macomb, prior HMP)

I was looking through a few Michigan websites, Michigan health care websites. Gosh, I can't even...I know I went through and tried like Blue Cross...I think the one I went on...I know I couldn't afford that. It would have been a private insurance plan I was looking at. (male, 19-34, Clare, prior HMP)

I kind of went online and looked around a little bit, but...It's way out of my price range. It's one of those I hope like hell I don't get hurt....I would like to figure out what that would cost me just trying to get my Blue Cross back, even if it was on a personal level, but...I failed miserably doing that. (male, 35-44, Wayne, no prior HMP)

Just some friends that have some of them plans through how much they make. Just talking to people...[I learned] that I'm poor enough the state would cover me if I didn't own a business....I'm in a Catch 22...the state wants to know...if you own anything that's worth any money, then they think you should like sell it, so you have money....My assets are worth something, even though I have no money and I have bills I have to pay to keep that asset. They consider it of value. (female, 45-50, Eaton, no prior HMP)

I went online...It was a curiosity search. I didn't learn much. There are options like Medicare/Medicaid....That's what I looked at. I can't remember what I saw. (male, 19-34, Washtenaw, no prior HMP)

I talked to my boss. They don't offer insurance there, but I talked to him because he's...self-insured. You know, he pays for his own insurance, and he ended up giving me some recommendations on somebody I could talk to, to go through the...the health commissioner or whatever, but I never did pursue it. I figured we can't afford it anyway. (female, 45-50, Montmorency, no prior HMP)

Aim B: To describe the experiences and perceptions of being uninsured among those eligible but unenrolled

Most interviewees expressed concern that being uninsured could result in unmet care needs and financial challenges. Many used strong and emotional language to convey their worry and concern about lack of coverage. Many interviewees were concerned about something major or catastrophic happening in the future that could result in bills they could not afford to pay and put them in substantial debt. Many interviewees expressed discomfort with not being able to

anticipate when they may need care. Some said that even in an emergency, they would not seek care. Some were concerned about not being able to access routine care that is recommended to monitor health. A few said they were not concerned about being uninsured as they did not see insurance as a necessity.

Concern about current or potential unmet care needs: “I get tired of just praying that nothing goes wrong”

I feel like it's a burden...I mean I don't like it, just knowing it, knowing that you don't have health insurance.... knowing that I can't go to the hospital if I need to. (male, 19-34, Kent, no prior HMP)

I do not feel good about [being uninsured]...because I'm used to having health insurance and being able to go to the doctor when I need to for appointments and things that should be done regularly and/or following up with the doctor when I need to about something that may have previously went on. (female, 19-34, Macomb, prior HMP)

I can't stand the thought of not having [insurance] because you never know when you're going to need it. (male, 35-44, Wayne, no prior HMP)

It's extremely stressful...The fact that I have like active needs right now and things that have gone unaddressed for like over half a year. There's some compounding problems that like in the first few months of not having insurance, it wasn't as bad, but now that things have gone on longer, it has become increasingly stressful. (female, 19-34, Kent, prior HMP)

I think it's terrible. It worries me....If something happens, and I won't be able to get help. (female, 45-50, Eaton, no prior HMP)

Not knowing what could happen because I'm older. I'm 62. I'm overweight. I mean anything could happen. You have to worry about how you're going to pay for it or...I don't like it. I don't like to live without health insurance, but I guess I just...So far, I've been lucky. (female, 51-64, Wayne, no prior HMP)

I feel a little uneasy about it because I know, you know, even healthy people, you could have a heart attack the next day, and I just kind of feel like if I had the signs for it, I wouldn't act on it and I would just kind of tough it out, only because I don't have health insurance. So it makes me a little uneasy just knowing I don't have it, just in case some emergencies happen and I know I wouldn't do anything about it. (female, 35-44, Washtenaw, no prior HMP)

Ain't nothing I can do about it right now. So I won't let it worry me...I was [on insurance] until 3 years ago when I lost my job, I was getting my annual physical and everything. I miss it. I get tired of just praying that nothing go wrong. (female, 51-64, Genesee, no prior HMP)

I'm a little worried just that if something...If something catastrophic did happen, we wouldn't be covered. (female, 45-50, Montmorency, no prior HMP)

Concern about financial consequences: “I could potentially be in crippling debt for a long time”

Just the financial part of it and just, you know, the uneasiness because I don't want to have to go to the hospital and then, you know, you find out you have to get surgery done real quick, and then you get a bill for \$10,000 and you don't have insurance. You've got to pay for it. (female, 35-44, Washtenaw, no prior HMP)

Just the kind of threat of if something...if there were to be an emergency or something that happened in this window between my coverage, that I could potentially be in crippling debt for a long time. (female, 19-34, Kent, prior HMP)

I don't like it...It doesn't make me comfortable....Something medically major happens to me, then I'm screwed and I've got a huge bill I'll have to pay, too. (male, 19-34, Kalamazoo, no prior HMP)

It's not great, but it's not horrible...It's something I should probably work on....Just in case, I do get really sick or something. I wouldn't want to be in a lot of debt. (male, 19-34, Washtenaw, no prior HMP)

Not concerned about not having health insurance: “It's not really that big of an issue”

A few interviewees did not express concern about not having insurance. They expressed feeling “neutral” or “indifferent” about it. They did not see it as a necessity. One said that he would still go to the doctor if needed. When probed for more information, a few said that having insurance might be a good thing. For one, the type of coverage, including its cost and what it covered, would be an important consideration.

I'm kind of indifferent...I mean it would be nice if something major happened to have it, but it really doesn't affect a whole lot of things...It doesn't scare me or worry me that I don't have it...If it was good insurance that had a low deductible and covered everything I needed that's covered, that might be a little different. I might actually be happy to have it...If they had like a pick and choose. Like it covers this, but you don't need it to cover that. (female, 35-44, Tuscola, prior HMP)

It's not really that big of an issue. I mean, now since you've brought it back out, I said “I'll think about it, it'll be beneficial to get it because of my low income situation and my low income status, but...It's not really a big factor, you know, if I have it or not because like I'll still go to the doctor if need be. (male, 19-34, Wayne, prior HMP)

Financial impact of current medical bills: “My credit is even destroyed”

Most interviewees said they did not have outstanding medical bills. Those interviewees with outstanding medical bills said the bills, which ranged from \$1,000 - \$30,000, resulted from

emergency room visits or dental care. The financial impact of these medical bills included debt, credit problems, and not being able to pay other bills.

The health care I received was not the greatest, and I am currently sitting at probably \$30,000 to \$40,000 in medical care debt...I'm trying to make arrangements and have been figuring out things, and it just became more and more of an issue. My credit is even destroyed because of it...From the last 12 months, I'd say it's probably around \$10,000...\$10,000 to \$15,000 range. About 50% of my total medical bills. (male, 19-34, Clare, prior HMP)

I owe on it [emergency room bill]. I was billed for it myself. It's over \$1,000 ...I was billed, and I'm gonna have to pay it. (female, 51-64, Ingham, no prior HMP)

[I] pulled my rent money and other bill money and paid for it [health care], and some stuff is just piling up until I can get money to pay for it. (male, 35-44, Wayne, no prior HMP)

The dental [bill] I paid for it through the dental credit card....It's just a general credit that's geared towards health or dental. (female, 45-50, Montmorency, no prior HMP)

Aim C: To understand decisions about when, where and how to seek care including decisions about emergency room utilization among those eligible but unenrolled

Decision-making about seeking care

For most interviewees, lack of insurance led them to not seek care unless the condition was serious. They often decided not to seek preventive care, or care for mild to moderate routine illnesses, and avoided specialty and mental health care. Inability to pay for care was their primary concern. Only a few would seek needed care despite being uninsured, usually at an urgent care or walk-in clinic. Most would seek emergency care if absolutely needed but a few said they would not, or that they had actually avoided emergency care for serious situations.

Avoiding care due to cost unless seriously ill or injured

Because I don't have health insurance...I'm not going to the hospital unless I get sick or something....I mean I can't really afford to pay medical bills right now. (male, 19-34, Kent, no prior HMP)

It makes me a little hesitant because I have to figure out how I'm going to pay for it, not wanting to get bills that I can't pay, and then it, you know, gets sent to collections or paying extra money because I can't pay the bill in full when I receive it, and then they charge a late fee for sending out additional bills....I don't go to the doctor because I have a cold....I have to be extremely sick to go to the doctor....I end up not seeking health care at all. (female, 19-34, Macomb, prior HMP)

To me it's a risky choice to not seek anything at all, but I've had people tell me, you know, "you need to go to the doctor," "you need to go to the hospital," and it's like, "no. I don't have the

money...I can't afford to end up at a hospital or a doctor bill that I'm not going to be able to pay. (female, 51-64, Ingham, no prior HMP)

Well, it's [getting health care] usually in a dire need, like 'I can't take it no more'-type problem. I pretty much deal with a lot of [expletive], or the wife does and then she's like "Enough's enough. (male, 35-44, Wayne, no prior HMP).

It would depend on the situation. I mean like obviously if it's in the middle of the night and it's a broken leg or something like that, then yeah I'm going, but if it's something I think I can ride out until the next day or to go see a doctor where it would be cheaper, then I probably would not [go to the ER]. (male, age 19-34, Kalamazoo, no prior HMP)

It definitely means that I don't really seek solutions to the problems that I have. I'm severely limited in what I feel like I can take action on for my health....[regarding emergency care] I would like to think that I wouldn't [avoid going] if something was enough of an emergency, but I'd probably think first about if there were any other resources I could employ before that. (female, 19-34, Kent, prior HMP)

[Being uninsured] prevents me from going to, you know, get checkups and stuff...because, you know, I'd have to put it on my credit card, and I'd owe, you know, a couple of thousand dollars. (female, 35-44, Washtenaw, no prior HMP)

A few said that they would seek needed care despite being uninsured: "I have to save my life"

If I need it, I'm going to get it, but whether I have insurance or not, I only go when I absolutely have to....If I can't go to my doctor and it's an emergency, I'll go to the ER. If not, I'll go to the walk-in clinic...You know, insurance or not wouldn't affect it. If I need it, I'll go. (female, 35-44, Tuscola, prior HMP)

I'm not too worried about not having it [insurance] but I know I'm taking a chance and a risk of not having it, but luckily I've always been pretty healthy...I'm thinking that if something comes up, I'll just go to an urgent care and pay for that, you know, if I come down with flu or something like that...but if it comes down to I need hospitalization or ER, I'll just go...if I'm insured or not....I hope it doesn't come down to needing any kind of health care until I get insured....If I have a heart attack or if I'm having a stroke, I can't think or worry about not having any health insurance because I have to save my life. So I would definitely go and somehow, you know, pay the bill. Like I said, it's a risk being out here without insurance. (female, 51-64, Wayne, no prior HMP)

Whenever I got sick, I just go to urgent care and pay them \$40 to check me out...It really didn't strike me if I needed to get checked out or not...I still kind of took care of business and pay my doctor bills if I needed to see a doctor. (male, 19-34, Wayne, prior HMP)

A few avoided, or sought to avoid, emergency room care even for serious conditions due to cost: “I would never go to the emergency room because I know I can’t afford it”

[I’m] very reluctant to take care of a serious injury. (male, 19-34, Clare, prior HMP)

I mean I was adamant about not going to the hospital because I wouldn’t be able to afford a hospital bill because it was a fall....I end up struggling with whether or not to go [to the ER], and more than likely I’m not going to go. I haven’t gone. Actually I haven’t gone. You know, in the one situation, I knew that I had to go. I mean it wasn’t an option. I was in a full-blown panic attack. With the foot, you know, I decided not to go. So I struggle with, you know, the decision whether or not to go, and the result ends up being that I end up with a very large bill that I’m not going to be able to afford to pay immediately. (female, 51-64, Ingham, no prior HMP)

“I would never go to the emergency room because I know I can’t afford it” (female, 45-50, Eaton, no prior HMP)

Some interviewees did not consider medical care necessary because they were healthy: “I’m healthy as a horse”

Some interviewees expressed neither needing nor getting care because they were healthy.

[I didn’t need health care because] I’m healthy as a horse. I mean I guess I kind of need like a physical. I’m probably due for a physical, but other than that, no...I mean, that would probably be the only thing I ever need to go to the hospital for. Other than that, I’ve never been...I haven’t been to the hospital. (male, 19-34, no prior HMP)

I also don’t consider health care to be a necessity...At least not at this stage...It may down the line...Hypothetically I don’t see me going to the hospital, and all the health care services. (male, 19-34, Washtenaw, no prior HMP)

I’ve been lucky enough...I don’t have any health conditions that, you know, require monitoring. I’m not on any medication or anything. (female, 51-64, Wayne, no prior HMP)

We’re not sick. You know, I mean we don’t have any health issues. We’re pretty healthy. So [HMP] would probably cover what we need, but we don’t really need it...We don’t have any major illnesses or anything. (female, 45-50, Montmorency, no prior HMP)

Health care utilization

Some interviewees had received a few preventive care services. Some reported receiving dental care. About half of interviewees discussed using free or low-cost clinics, dental schools, and discount coupons to obtain needed care. A few said they used urgent care settings when ill rather than a primary care setting. A few used personal relationships with doctors or friends to receive discounted services or free supplies. Most paid for care using cash or credit cards.

Primary and preventive care, prescription medications, and medical supplies

So during the time that I did not have insurance, my primary care physician works out of an urgent care facility affiliated with [hospital]. Because I had been a patient there so long and I no longer have health insurance, I was able to be seen and I just paid \$75 out of pocket. (female, 19-34, Macomb, prior HMP but original guide)

I had to spend my rent money to get prescriptions. (male, 35-44, Wayne, no prior HMP)

It was a physician's visit, a doctor's visit...It was just at the local general practice in my area. (male, 19-34, Kalamazoo, no prior HMP)

I wanted to quit smoking and get help with that, but I did it on my own...My friend got me patches because I couldn't...I didn't have insurance to get that Chantix...They purchased them for me. (female, 45-50, Eaton, no prior HMP)

[I got] weight management I guess you'd call it...the weight management was at my doctor. (female, 35-44, Tuscola, prior HMP)

I did pay for a flu shot...I make sure I do that every October. So I did have a flu shot...That was my last one in October. (female, 51-64, Wayne, no prior HMP)

The only thing I usually do is go get...the free mammogram they do once a year in October...I did that last October, and then I'm waiting to do it this October...It was [at] the cancer institute. They do a free screening every year. (female, 51-64, Genesee, no prior HMP)

I needed some medication or antibiotics, and I was able to get it...through like the local offices here, urgent care and stuff like that...I know I got the flu and stuff like that, you know? I was able to get treated and get seen. (male, 19-34, Wayne, prior HMP)

I talked to a counselor a couple of times.... (female, 45-50, Montmorency, no prior HMP)

Dental care

I did get dental. I got a crown put on one of my teeth....[I paid] cash. (male, 19-34, Kent, no prior HMP)

I've been to the dentist, and it wasn't my normal dentist that I had been a patient of because I don't have health insurance, and the prices were not affordable. So I went to the [dental school], you know, for a cleaning and x-ray. (female, 19-34, Macomb, prior HMP but original guide)

[I got] dental care, basic cleanings, tooth extraction...at my dentist and an oral surgeon....[I paid] cash. (female, 35-44, Tuscola, prior HMP)

I did go to the dentist, but it was something that I prepaid a year ago....It was just for a teeth cleaning, x-rays. Just to make sure I didn't have...It wasn't for any particular reason. It was just

a checkup to make sure my teeth were okay....I had paid it on my credit card. (female, 35-44, Washtenaw, no prior HMP)

Dental care was an issue. I was not able to get my root canal. And I ended up having to pay for that out of pocket....Instead of the physician that I wanted to go to, I had to go to one that took the cost that...was more appropriate to my price range. I basically went to a dentistry school, and they had one of their students do it...I wasn't happy to get it done...I'm not gonna say by a professional, but, you know, somebody with more experience. You know, I had to take a cheaper route. (male, 19-34, Wayne, prior HMP)

At a dentist in [town]....I paid for it through the dental credit card. Yeah, Care Credit is what it's called...It's just a general credit that's geared towards health or dental....I'm still paying on the credit. (female, 45-50, Montmorency, no prior HMP)

Vision care

For my eyeglasses, I went onto Groupon and I found a doctor's office...an optometrist that was on there, and I paid \$25 out of pocket, you know, for Groupon for an eye exam....And then I found another Groupon for a discounted eyeglass place, and I was able to get my eyeglasses, and then I just had to pay an additional like \$56 to cover the difference that wasn't included. (female, 19-34, Macomb, prior HMP but original guide)

Emergency and urgent care service use

Most interviewees had not used the ER in the past 12 months. Among the four who reported they had, three had gone at least four times in the past year. Those who used the ER went for injuries or health problems that they described as severe or painful. A few interviewees described receiving urgent care for emergency issues and injuries.

Most recent would be the pelvic injury. I was in severe pain, and I had actually fractured my pelvic bone. I took a nice metal lug wrench to the groin while I was working on a vehicle. (male, 19-34, Clare, prior HMP)

A car hit me...Boom. This man just comes up and just runs right into me, and so I go into my panic attack, of course. So there's no stopping that. (female, 51-64, Ingham, no prior HMP)

I had ear and tooth problems. My ear and face was all swelled up one day...Yeah, a bad ear infection. (male, 35-44, Wayne, no prior HMP)

My vision. I was having vision issues. My eyes were...My vision was going in and out. I couldn't see. (male, 19-34, Wayne, prior HMP)

I had like emergency...Not totally emergency, but like urgent care medical attention. I got sexual assault services. (female, 19-34, Kent, prior HMP)

The four interviewees who described visits to the ER reported that hospital staff had not discussed their eligibility for HMP or options for enrollment with them (one reported discussing Medicaid).

Forgone care

Most interviewees had forgone one or more types of health care because they could not afford to pay out-of-pocket or were afraid of incurring medical debt. Sometimes they looked into getting care and found that care was out of their price range; sometimes they assumed that they would not be able to pay. Forgone dental care and preventive care were mentioned most frequently. Interviewees described consequences of forgone care, including pain, deteriorating health related to specific conditions or not getting preventive care that would help detect or monitor health conditions.

Forgone primary and preventive care: “I don’t even look for it because I know I can’t afford it”

I’m into preventative appointments and going to the doctor to make sure that everything is okay. Because I don’t have health insurance, it makes me not really want to go unless there’s an urgency....I’m actually due for a mammogram and a Pap smear, and so I’m looking into some resources to get that at a discounted rate because it’s a little expensive. Nothing [has happened] yet. It’s just, you know...It’s time, and I want to make sure that everything is fine. (female, 19-34, Macomb, prior HMP)

I’d like to get preventive health care and screening stuff so that something doesn’t go on with me, but I don’t even look for it because I know I can’t afford it. (female, 45-50, Eaton, no prior HMP)

I mean I guess I kind of need like a physical. I’m probably due for a physical, but other than that, no. (male, 19-34, Kent, no prior HMP)

I don’t have any health conditions that might need monitoring like high blood pressure or anything. The only thing that I’m sure I needed, but don’t have the insurance to have is like annual mammograms because, you know, when I was insured, I always kept up with that. Annual gynecology visits and annual vision check. So, I mean, those are things that I did keep up with when I had insurance. (female, 51-64, Wayne, no prior HMP)

I would have liked to get a yearly physical, but...it’s nothing that like says “I needed to go to a doctor for a specific reason,” but it’s just...My sister has breast cancer. So, you know, it’s important for me to go eventually. You know, get blood tests done and all that stuff. (female, 35-44, Washtenaw, no prior HMP)

Forgone specialist and mental health care, prescriptions and medical supplies: “I don’t know if those things that have gone unchecked are probably worsening. Things have gone unmedicated and undiagnosed.”

Prior to being without health insurance, I would see my podiatrist regularly because of some issues with my lymphatic system, and I haven’t been able to see the doctor because of pricing...I

have excessive swelling in my feet, ankles and legs from the knees down...and I was prescribed compression stockings to control the swelling. When I had health insurance, I think the copay was like \$52/pair. I went to a [store name] you know, like a medical supply store to see how much they would be without, you know, because I don't have health insurance, and they're like \$300. I checked online, and I found them for \$218. That's not reasonable. (female, 19-34, Wayne, prior HMP)

I do have an existing skin issue that I've had for many, many years since I was 7 years old. [Before becoming uninsured] I went to a specialist to analyze it and figure out what's going on with it. I know the specialist would not see me without insurance. (male, 19-34, Clare, prior HMP)

They called it a "non-benign" tumor, and so I've never followed up or, you know, polyps from a colonoscopy or whatever. You know it's just I know that there's things...that the doctors highly recommend me do, but I haven't done because I'm like I'm not insured....I had seen a psychologist and a psychiatrist in the past for PTSD, and I was on a good regimen finally that was a non-narcotic regimen, and eventually I had to stop taking the medication...after closing up my [business], I've been fairly depressed, and you know I can't afford to seek, you know, sitting down with a psychiatrist or psychologist. Anyone. (female, 51-64, Ingham, no prior HMP)

I need dental care. I need to see a urologist. I need my rheumatologist. I need to figure out what the hell is going on with...gastroenterology. I just need to get it so I can get back to figuring out what the hell is going on and continue treating the illnesses that I have. I've even got mental illness problems that I can't seem to get figured out because I can't. Nine times out of ten, these people don't want to see you if you don't got insurance. (male, 35-44, Wayne, no prior HMP)

Vision, dental, mental health, OB-GYN screenings....I guess, also, dermatology....prescriptions, screenings like vision correction....I don't know if those things that have gone unchecked are probably worsening. Things have gone un-medicated and undiagnosed." (female, 19-34, Kent, prior HMP)

Forgone dental care: "I'd like to keep my teeth when I get older"

Dental care I need really bad, and have not been able to receive that...I tried to find other means for dental care, and it was out of the ballpark for my means. (male, 19-34, Clare, prior HMP)

I would have went every three months for a teeth cleaning if I could have...I didn't get any cavities or anything but, you know, like I said, it was just kind of like preventive care because I'd like to keep my teeth when I get older. And one of the worst pains you can have is, you know, tooth ache. So I just try to prevent that. (female, 35-44, Washtenaw, no prior HMP)

I need dental care, but I didn't have the money to go...Right now I have a chipped tooth, but I haven't gotten it fixed. (female, 51-64, Genesee, no prior HMP)

I have, you know, a toothache every now and then...I still didn't get care for any of that. (female, 51-64, Ingham, no prior HMP)

You're supposed to go to the dentist biyearly. So I didn't do that...my teeth don't bother me. (male, 19-34, Kalamazoo, no prior HMP)

Forgone vision care: "I just don't see well. I don't drive anymore."

I wear the same glasses prescription since I was 30. So 20 years now. They don't work very good, but...It would have been nice. I need to get new ones, but it's not something that's going to happen. I just don't see well. I don't drive anymore. (female, 45-50, Eaton, no prior HMP)

I hope to get a job eventually within the next year that has health insurance and everything and then go to the doctor and see. Vision wise, I don't know if it could just be because I'm getting older, you know, if it could be something that's going to be more expensive...I mean I do need to go to the eye doctor. I wear glasses and everything and I can still see, but I need to update my glasses eventually. I just notice at nighttime I have partial vision loss. (female, 35-44, Washtenaw, no prior HMP)

I need to get new prescription glasses, but I can't afford it. So I'm using the ones I got. (female, 51-64, Genesee, no prior HMP)

Cost was the primary reason for forgone care: "I didn't have insurance. So I never tried to go. I can't afford the bills, man."

Because I have no insurance, and I really don't want to pay any hospital bills or any medical bills. (male, 19-34, Kent, no prior HMP)

I did not have any kind of dental insurance. There's a place in Clare County, but the affordability is still out of my price range. (male, 19-34, Clare, prior HMP)

[I needed] a little bit of everything. A doctor's care, specialist care...I didn't have insurance. So I never tried to go. I can't afford the bills, man. (male, 35-44, Wayne, no prior HMP)

[I didn't get care] because I knew the out-of-pocket costs were too high. (female, 19-34, Kent, prior HMP)

[In the past 12 months] I needed to get my teeth cleaned. About 6 years ago, I went up to a dental place up here that you pay \$150 with uninsured and they clean your teeth. I paid \$150. I went to clean my teeth because they said I needed a periodontal cleaning, which is more of gum health. So [in the past 12 months] I could either go to one of the dental malls in four different trips or it would cost me like \$600 or \$800 for them to do it, which I can't afford that. So I didn't get it. (female, 45-50, Eaton, no prior HMP)

[Dental care] was just additional money. I think to go twice in a year for x-rays and stuff was \$300, and to go any more additional, I think, it was like \$92 or something like that. I just didn't have the income for it. (female, 35-44, Washtenaw, no prior HMP)

Consequences of forgone care

Experiencing pain and suffering: “I have excruciating pain right now”

I actually need to have my wisdom teeth pulled. And it's too expensive without dental insurance. So that I have not gotten. I had excruciating pain. I have excruciating pain right now. (female, 19-34, Macomb, prior HMP old guide)

A lot of suffering, pain, use of Tylenol and ibuprofen. I was actually prescribed Toradol for a pain issue, but I had to figure something else out. (male, 19-34, Clare, prior HMP)

I still have pain in a foot that was badly injured. I had a fall. I must have broken the foot. I mean I was in a lot of pain. My son happened to be home at the time, you know, and he was just like, “Let me take you to the hospital. Let me try to help you.” I was just in tears crying just because it hurt so bad. I was just like, “No, no, I'm not going.” I mean I was that adamant about not going to the hospital because I wouldn't be able to afford a hospital bill because it was a fall...there's times I think to myself, “You know, it's probably going to hurt for the rest of my life now because I didn't get to go see a doctor.” (female, 51-64, Ingham, no prior HMP)

I'm suffering. Trying to deal with it. It's an everyday battle. (male, 35-44, Wayne, no prior HMP)

Illnesses becoming more severe: “My gums bleed, you know? Without preventive health, it's just going downhill.”

For this [chronic skin] condition, ...it has progressively...the location has spread, and it has gotten much, much more severe. (male, 19-34, Clare, prior HMP)

I was talking with the dentist probably 3 or 4 times a year and always had them cleaned really good. So, I'm sure that the periodontal started getting worse. My gums bleed, you know? Without preventive health, it's just going downhill. (female, 45-50, Eaton, no prior HMP)

Being sicker longer: “I was probably sick for longer than I could have been and missed more time off of work”

Really bad stomach problems, dehydration, I'm thinking. I kept getting like dizzy, fainting, headache spells, and I just tried to power through the stuff....Stayed sick for a few days. One was for 2 weeks, just tried to fight through it, do whatever I can do. (male, 35-44, Wayne, no prior HMP)

You know just medicine to help it go away soon or shorten it up or something....I was probably sick for longer than I could have been and missed more time off of work. I just felt miserable longer. (male, 19-34, Kalamazoo, no prior HMP)

Screening and Recruitment Lessons Learned

The evaluation team used multiple strategies to recruit participants and tracked how those who contacted us had heard about the interviews. The most successful strategies were posts on Craigslist, Facebook, and the UMHealthResearch study recruitment website. The latter included questions about current insurance status and previous HMP coverage that facilitated eligibility screening. Facebook was more successful than Craigslist at reaching potential interviewees who were middle age and older. While some FQHCs and other community organizations attempted to identify participants, few interviewees came from these sources. Calls to community colleges and public libraries yielded minimal results, although a few callers noticed our flyer on a community college campus. Using text and email was more successful than voicemail to connect with those who contacted us.

Appendix A: Interview Guide for Those with No Prior HMP Enrollment

[MAKING CONTACT] Hi, can I speak with [RESP firstname]? This is [interviewer **firstname**] with the Healthy Michigan Voices project at the University of Michigan.

Introduction:

Healthy Michigan Voices is a project at the University of Michigan – you might remember talking with someone about the project recently.

- We're speaking with people around the state who have not had health insurance for at least the last 12 months, and have not been enrolled in a state program called the Healthy Michigan Plan. The Healthy Michigan Plan provides health care coverage for people in a certain age range and income range. The goal of the project is to help state officials understand how to reach people who might benefit from this program.
- The interview takes about 30 minutes, and includes questions about you, your ability to get health care, and your knowledge and views about the Healthy Michigan Plan. Participating in the interview is voluntary. You can skip any questions you don't want to answer.
- Your answers will be confidential. Your information will be stored at the University of Michigan in a computer file that does not include your name. We will not tell the state or your doctor any of the answers you give.
- For completing the interview, you will get a \$25 gift card that can be used anywhere that accepts MasterCard. And I'll tell you more about that at the end.

Do you have any questions before we begin?

RECORD_CALL: In order for me to move quickly through the interview, and not spend a lot of time taking notes, can we record this call? Yes/No [If respondent says no] *I'm sorry, you are not eligible for this interview. Thank you so much for your time and willingness to help in this project. [end call]*

ELIGIBILITY CONFIRMATION

AGE ELIGIBILITY: Just to confirm that I'm talking with the right person, we show that you were born in <MONTH> <YEAROFB>. Is that correct? Yes/No

HEALTH INSURANCE / HEALTH NEEDS IN PAST YEAR

Are you currently covered by any kind of health insurance or health care plan? [If they are currently insured] *I'm sorry, you are not eligible for this interview. Thank you so much for your time and willingness to help in this project. [end call]*

How long have you been uninsured? [If uninsured for <12 months] *I'm sorry, you are not eligible for this interview. Thank you so much for your time and willingness to help in this project. [end call]*

Before you became uninsured, what type of health insurance did you have? If needed, prompt with: What was the last type of health insurance you had?

- Have never had insurance as an adult
- Insurance provided through a job or union
- Insurance purchased by you or someone else
- Veterans Administration or VA care
- CHAMPUS, TRICARE
- County health plan
- Medicaid / MiChild / other state program
- Other [TEXT BOX]

[If they had any type of health insurance] Why did that health insurance end? (open-ended)

- Change in job
- Couldn't afford premiums
- Change in eligibility (got too old, moved, divorce)
- Didn't complete paperwork
- Didn't need it
- Other [TEXT BOX]

EMPLOYMENT AND STUDENT STATUS

Are you currently in school? (Y/N)

[If YES] Are you a full-time or part-time student? (Full-time/Part-time)

Are you currently employed or self-employed? (Y/N)

[If YES] Are you working full time or part time? (Full-time/Part-time)

[If NO] Are you out of work, unable to work, retired, or not looking for work at this time?

- Out of work
- Unable to work
- Retired
- Not looking for work at this time

How long have you been [out of work/unable to work/retired]?

Less than one year / One year or more

What are the reasons you are [out of work/unable to work/retired]

- Health reasons
- Caregiving responsibilities
- School
- Other [TEXT BOX]

In the past 12 months, how would you describe your income? Would you say: [read choices]

- It is pretty much the same throughout the year
- It changes by season
- It changes from week to week



REASONS FOR NOT HAVING HEALTH INSURANCE

What are the reasons you don't have health insurance?

In the last 12 months, did you explore options for health insurance? For example, by talking with someone or going online. If so, what did you learn?

[if in school:] In the past 12 months, were you offered or did you explore options for getting health insurance through your school? (Y/N/DK)

[If YES] And what is the reason that you didn't sign up for insurance through your school? *open*

[if working:] In the past 12 months, were you offered or did you explore options for getting health insurance through your job?

[If YES] And what is the reason that you didn't sign up for insurance through your job?
open

- I don't work enough hours for coverage
Probes: How many hours do you need to work to qualify for coverage? Would you work more hours if your employer would let you? If not, why not?
- I have to wait [until a certain time] to be eligible for coverage
Probes: How long do you have to work there to qualify for coverage?
- I am eligible for coverage but it is too expensive
- Other [TEXT BOX]

KNOWLEDGE OF HMP

Before this interview, had you heard of the Healthy Michigan Plan?

[If YES] What do you know about it?

[If not addressed in response] Who is it for?

[If not addressed in response] What is covered?

[If not addressed in response] How much does it cost?

[If they know something about HMP] Have you ever applied for Healthy Michigan Plan coverage? (Y/N)

[If YES] What happened when you applied?

[If NO] What are the reasons you did not apply?

[open ended; code all mentioned]

- Didn't want to be on a government program
- Didn't think I was eligible
- Didn't need medical care
- Paperwork/application process is too burdensome
- My doctors don't take Medicaid
- Thought it would cost too much

- Didn't like a certain feature of HMP (e.g., behavior change, can't pick your doctor)
- Just didn't get around to doing it
- Other [TEXT BOX]

[If NO – Had NOT heard of HMP] or [Heard of HMP, but do not know anything about it]

The Healthy Michigan Plan is a Medicaid program that started in April 2014 that provides health care coverage for adults ages 19-64 with incomes below 133% of the Federal Poverty Level the state of Michigan. This is \$16,000/year for a single person or \$33,000 for a family of four).

What are your initial reactions now that you have heard a little bit about the Healthy Michigan Plan? *open*

[If not addressed in response] Do you think you are eligible? Why or why not?

[If not addressed in response] Are there things that concern you, or things you wouldn't like about it? What are those?

[If not addressed in response] Do you think it would cover the health care you need? Why or why not?

[If not addressed in response] Do you think you could afford it? Why or why not?

HEALTH CARE NEEDS

I'd now like to talk with you about your experiences getting or not getting different types of care you might have needed these past 12 months when you were uninsured. This includes care for minor illnesses and injuries, dental care, vision care, specialist care, surgical care, mental health care, substance use treatment, medical supplies, prescription medications, help with quitting smoking, health screenings and other preventive services.

In the past 12 months when you were uninsured, were there times when you needed health care and got it?

[If YES] What type of care was this? Where did you get it?

Probes: Were there other types of health care you received while uninsured? (Remind of list of types of care). Where did you get it?

In the past 12 months when you were uninsured, were there times when you needed health care but did NOT get it?

[If YES] What type of care was it? Why didn't you get it? What happened because you didn't get the care you needed?

Probes: Were there other types of health care you needed but didn't receive while uninsured? What type of care was it? Why didn't you get it? What happened because you didn't get the care you needed?

In the past 12 months, did you go to a hospital emergency room about your own health?

[If YES]

- In the past 12 months, how many times did you go to the ER? [1-2, 2-4, 5 or more]
- Thinking about your most recent ER visit, why did you go to the ER?
- Thinking about your most recent ER visit, did any hospital staff person discuss your eligibility for health insurance?
 - [If YES, Did they discuss enrolling in the Healthy Michigan Plan with you?
 - [If YES] Is there a reason why you did not enroll at that time?

In the past 12 months, were you admitted to the hospital?

- [If YES] At that time, did any hospital staff person discuss your eligibility for health insurance?
 - [If YES, Did they discuss enrolling in the Healthy Michigan Plan with you?
 - [If YES] Is there a reason why you did not enroll at that time?

Thinking about all types of health care you have received in the last 12 months while uninsured, how did you pay for it?

Do you have any outstanding medical bills from health care you've received in the past 12 months while uninsured?

How does not having health insurance affect your decisions about seeking health care?

How does not having health insurance affect your decisions about whether or not to go to the emergency room?

Generally, how do you feel about not having health insurance at the present time?

Would you be interested in learning more about or signing up for the Healthy Michigan Plan?

Why or why not?

[If YES, interviewer provide **The number to call is the Michigan Health Care Helpline at 1-855-789-5610.** We'll include some information in the envelope with your gift card.]

CLOSING

We're almost done; I just have a few questions about you:

In general, would you say your health is: (Excellent/Very Good/Good/Fair/Poor)

Has a doctor or other health professional ever told you that you had any of the following?

- a) Hypertension, also called high blood pressure? (Y/N)

- b) A heart condition or heart disease? (Y/N)
- c) Diabetes or sugar diabetes (other than during pregnancy)? (Y/N)
- d) Cancer, other than skin cancer? (Y/N)
- e) A mood disorder, (For example, depression, anxiety, bipolar disorder)? (Y/N)
- f) A stroke? (Y/N)
- g) Asthma? (Y/N)
- h) Chronic lung disease, such as chronic bronchitis, COPD or emphysema? (Y/N)
- i) A substance use disorder? (Y/N)
- j) Any other ongoing health condition? (Y/N)

What is the highest grade of school you have completed, or the highest degree you have received? [open-ended / mark correct category]

- Less than high school
- High school graduate (or equivalent)
- Some college (1-4 years, no degree)
- Associate's degree (including occupational or academic degrees)
- Bachelor's degree (BA, BS, AB, etc.)
- A post graduate degree (MS, MSW, MPH, MD, JD, etc.)

How often do you need to have someone help you read instructions, pamphlets, or other written material from a doctor, pharmacy or health plan? (Never/Rarely/Sometimes/Often/Always)

What race or races do you consider yourself to be? [open question, check all that they mention]

- White
- Black or African American
- American Indian or Alaska Native
- Asian: Asian Indian, Chinese, Filipino, Japanese, Korean, Vietnamese, Other Asian
- Pacific Islander: Native Hawaiian, Guamanian or Chamorro, Samoan, Other Pacific Islander
- Hispanic/Latino
- Arab/Chaldean

Are you:

- Married
- Divorced
- Widowed
- Separated
- Partnered
- Never Married

TURN OFF RECORDER

End of Interview/Contact Information:

That's the end of the interview. Now I need to get the information for the gift card.

Can you please confirm your address so we can send your gift card?
[record and confirm address]

You should receive the gift card in 1-3 weeks at that address. The envelope will have some instructions on how to use the gift card – please read those so you don't have any problems. But if something comes up, you can call us here and we'll try to help.

We may be conducting a follow-up interview. Would you be willing to have us recontact you for that? We're just asking for contact information – you can decide at that time if you'd like to participate. (Y/N)

[If YES] What is the best phone number to reach you? Use current number on file/Better number: _____

Is there an email address we can use to contact you? [record]
Thanks so much for talking with me today! Look for your gift card in 1-3 weeks.

Appendix B: Interview Guide for Those with Prior HMP Enrollment

[MAKING CONTACT] Hi, can I speak with [RESP firstname]? This is [interviewer **firstname**] with the Healthy Michigan Voices project at the University of Michigan.

Introduction:

Healthy Michigan Voices is a project at the University of Michigan – you might remember talking with someone about the project recently.

- We're speaking with people around the state who have not had health insurance for at least the last 12 months, and have not been enrolled in a state program called the Healthy Michigan Plan. The Healthy Michigan Plan provides health care coverage for people in a certain age range and income range. The goal of the project is to help state officials understand how to reach people who might benefit from this program.
- The interview takes about 30 minutes, and includes questions about you, your ability to get health care, and your knowledge and views about the Healthy Michigan Plan. Participating in the interview is voluntary. You can skip any questions you don't want to answer.
- Your answers will be confidential. Your information will be stored at the University of Michigan in a computer file that does not include your name. We will not tell the state or your doctor any of the answers you give.
- For completing the interview, you will get a \$25 gift card that can be used anywhere that accepts MasterCard. And I'll tell you more about that at the end.

Do you have any questions before we begin?

RECORD_CALL: In order for me to move quickly through the interview, and not spend a lot of time taking notes, can we record this call? Yes/No [If respondent says no] *I'm sorry, you are not eligible for this interview. Thank you so much for your time and willingness to help in this project. [end call]*

ELIGIBILITY CONFIRMATION

AGE ELIGIBILITY: Just to confirm that I'm talking with the right person, we show that you were born in <MONTH> <YEAROFB>. Is that correct? Yes/No

HEALTH INSURANCE / HEALTH NEEDS IN PAST YEAR

Are you currently covered by any kind of health insurance or health care plan? [If they are currently insured] *I'm sorry, you are not eligible for this interview. Thank you so much for your time and willingness to help in this project. [end call]*

How long have you been uninsured? [If uninsured for <12 months] *I'm sorry, you are not eligible for this interview. Thank you so much for your time and willingness to help in this project. [end call]*

Before you became uninsured, what type of health insurance did you have? If needed, prompt with: What was the last type of health insurance you had?

- Have never had insurance as an adult
- Insurance provided through a job or union
- Insurance purchased by you or someone else
- Veterans Administration or VA care
- CHAMPUS, TRICARE
- County health plan
- Medicaid / MiChild / other state program
- Other [TEXT BOX]

[If they had any type of health insurance] Why did that health insurance end? (open-ended)

- Change in job
- Couldn't afford premiums
- Change in eligibility (got too old, moved, divorce)
- Didn't complete paperwork
- Didn't need it
- Other [TEXT BOX]

EMPLOYMENT AND STUDENT STATUS

Are you currently in school? (Y/N)

[If YES] Are you a full-time or part-time student? (Full-time/Part-time)

Are you currently employed or self-employed? (Y/N)

[If YES] Are you working full time or part time? (Full-time/Part-time)

[If NO] Are you out of work, unable to work, retired, or not looking for work at this time?

- Out of work
- Unable to work
- Retired
- Not looking for work at this time

How long have you been [out of work/unable to work/retired]?

Less than one year / One year or more

What are the reasons you are [out of work/unable to work/retired]

- Health reasons
- Caregiving responsibilities
- School
- Other [TEXT BOX]

In the past 12 months, how would you describe your income? Would you say: [read choices]

- It is pretty much the same throughout the year
- It changes by season
- It changes from week to week

REASONS FOR NOT HAVING HEALTH INSURANCE

What are the reasons you don't have health insurance?

In the last 12 months, did you explore options for health insurance? For example, by talking with someone or going online. If so, what did you learn?

[if in school:] In the past 12 months, were you offered did you explore options for getting health insurance through your school? (Y/N/DK)

[If YES] And what is the reason that you didn't sign up for insurance through your school? *open*

[if working:] In the past 12 months, were your offered or did you explore options for getting health insurance through your job?

[If YES] And what is the reason that you didn't sign up for insurance through your job?
open

I don't work enough hours for coverage

Probes: How many hours do you need to work to qualify for coverage? Would you work more hours if your employer would let you? If not, why not?

I have to wait [until a certain time] to be eligible for coverage

Probes: How long do you have to work there to qualify for coverage?

I am eligible for coverage but it is too expensive

Other [TEXT BOX]

KNOWLEDGE OF HMP

[FOR PEOPLE WHO TOLD US DURING SCREENING THEY HAD PRIOR HMP (<2017 ONLY):

Our records show that you told us that you had Healthy Michigan Plan coverage before 2017. Does that sound right to you?"

[FOR PEOPLE WHO CHEAR DISCOVERS HAD PRIOR HMP (<2017):

After speaking with you, we checked the enrollment records which indicated that you had Healthy Michigan Plan coverage from [date] to [date]. Does that sound right to you?

[If they agree that they had HMP coverage]:

"It sounds like you have some experience with HMP a few years ago. We're interested to learn more about your experiences and why you're currently not enrolled."

[If they don't recall that they had HMP coverage, skip to What are the reasons you did not apply?]

Why did your Healthy Michigan Plan insurance end?

While you were uninsured, did you ever try to reapply for the Healthy Michigan Plan?

[If YES] What happened when you applied?

[If they were told they were ineligible]

- When did this happen?
- Do you know the reason why you were ineligible?
 - [If YES]
 - Has the reason that you were ineligible changed since then? If so, how?

[If NO] What are the reasons you did not apply?

[open ended; code all mentioned]

- Didn't want to be on a government program
- Didn't think I was eligible
- Didn't need medical care
- Paperwork/application process is too burdensome
- My doctors don't take Medicaid
- Thought it would cost too much
- Didn't like a certain feature of HMP (e.g., behavior change, can't pick your doctor)
- Just didn't get around to doing it
- Other [TEXT BOX]

[If not addressed in reasons you did not apply]:

Do you think you are eligible? Why or why not?

Are there things that concern you, or things you wouldn't like about it? What are those?

Do you think it would cover the health care you need? Why or why not?

Do you think you could afford it? Why or why not?

HEALTH CARE NEEDS

I'd now like to talk with you about your experiences getting or not getting different types of care you might have needed these past 12 months when you were uninsured. This includes care for minor illnesses and injuries, dental care, vision care, specialist care, surgical care, mental health care, substance use treatment, medical supplies, prescription medications, help with quitting smoking, health screenings and other preventive services.

In the past 12 months when you were uninsured, were there times when you needed health care and got it?

[If YES] What type of care was this? Where did you get it?

Probes: Were there other types of health care you received while uninsured? (Remind of list of types of care). Where did you get it?

In the past 12 months when you were uninsured, were there times when you needed health care but did NOT get it?

[If YES] What type of care was it? Why didn't you get it? What happened because you didn't get the care you needed?

Probes: Were there other types of health care you needed but didn't receive while uninsured? What type of care was it? Why didn't you get it? What happened because you didn't get the care you needed?

In the past 12 months, did you go to a hospital emergency room about your own health?

[If YES]

- In the past 12 months, how many times did you go to the ER? [1-2, 2-4, 5 or more]
- Thinking about your most recent ER visit, why did you go to the ER?
- Thinking about your most recent ER visit, did any hospital staff person discuss your eligibility for health insurance?
 - [If YES, Did they discuss enrolling in the Healthy Michigan Plan with you?
 - [If YES] Is there a reason why you did not enroll at that time?

In the past 12 months, were you admitted to the hospital?

- [If YES] At that time, did any hospital staff person discuss your eligibility for health insurance?
 - [If YES, Did they discuss enrolling in the Healthy Michigan Plan with you?
 - [If YES] Is there a reason why you did not enroll at that time?

Thinking about all types of health care you have received in the last 12 months while uninsured, how did you pay for it?

Do you have any outstanding medical bills from health care you've received in the past 12 months while uninsured?

How does not having health insurance affect your decisions about seeking health care?

How does not having health insurance affect your decisions about whether or not to go to the emergency room?

Generally, how do you feel about not having health insurance at the present time?

Would you be interested in learning more about or signing up for the Healthy Michigan Plan? Why or why not?

[If YES, interviewer provide **The number to call is the Michigan Health Care Helpline at 1-855-789-5610**. We'll include some information in the envelope with your gift card.]

CLOSING

We're almost done; I just have a few questions about you:

In general, would you say your health is: (Excellent/Very Good/Good/Fair/Poor)

Has a doctor or other health professional ever told you that you had any of the following?

- k) Hypertension, also called high blood pressure? (Y/N)
- l) A heart condition or heart disease? (Y/N)
- m) Diabetes or sugar diabetes (other than during pregnancy)? (Y/N)
- n) Cancer, other than skin cancer? (Y/N)
- o) A mood disorder, (For example, depression, anxiety, bipolar disorder)? (Y/N)
- p) A stroke? (Y/N)
- q) Asthma? (Y/N)
- r) Chronic lung disease, such as chronic bronchitis, COPD or emphysema? (Y/N)
- s) A substance use disorder? (Y/N)
- t) Any other ongoing health condition? (Y/N)

What is the highest grade of school you have completed, or the highest degree you have received? [open-ended / mark correct category]

- Less than high school
- High school graduate (or equivalent)
- Some college (1-4 years, no degree)
- Associate's degree (including occupational or academic degrees)
- Bachelor's degree (BA, BS, AB, etc.)
- A post graduate degree (MS, MSW, MPH, MD, JD, etc.)

How often do you need to have someone help you read instructions, pamphlets, or other written material from a doctor, pharmacy or health plan? (Never/Rarely/Sometimes/Often/Always)

What race or races do you consider yourself to be? [open question, check all that they mention]

- White
- Black or African American
- American Indian or Alaska Native
- Asian: Asian Indian, Chinese, Filipino, Japanese, Korean, Vietnamese, Other Asian
- Pacific Islander: Native Hawaiian, Guamanian or Chamorro, Samoan, Other Pacific Islander
- Hispanic/Latino
- Arab/Chaldean

Are you:

- Married
- Divorced
- Widowed
- Separated
- Partnered
- Never Married

TURN OFF RECORDER

End of Interview/Contact Information:

That's the end of the interview. Now I need to get the information for the gift card.

Can you please confirm your address so we can send your gift card?

[record and confirm address]

You should receive the gift card in 1-3 weeks at that address. The envelope will have some instructions on how to use the gift card – please read those so you don't have any problems. But if something comes up, you can call us here and we'll try to help.

We may be conducting a follow-up interview. Would you be willing to have us recontact you for that? We're just asking for contact information – you can decide at that time if you'd like to participate. (Y/N)

[If YES] What is the best phone number to reach you? Use current number on file/Better number: _____

Is there an email address we can use to contact you? [record]

Thanks so much for talking with me today! Look for your gift card in 1-3 weeks.