PROJECT ABSTRACT

Federal Health Insurance Marketplace Enrollment

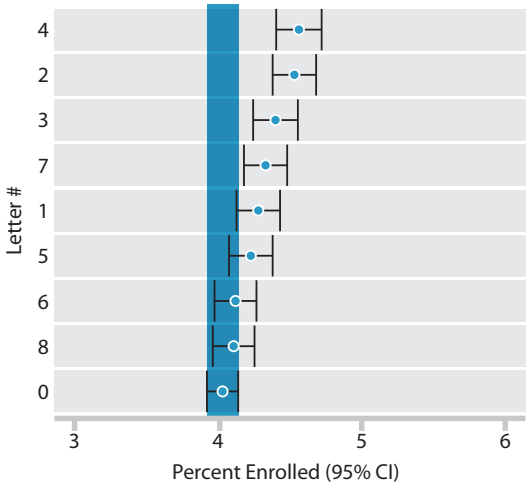
Action language, planning prompts, and personalization promote follow-through on health insurance enrollment

Agency Objective. Assist uninsured Americans with completing their health insurance application in time by sending behaviorally designed letters prior to the deadline for open enrollment.

Background. During the Open Enrollment Period, qualifying individuals and families can purchase health insurance plans through the Federal Health Insurance Marketplace (FHIM).[61] For the 2015 enrollment season, the close of open enrollment was February 15, 2015. As of early February 2015, many people had visited HealthCare.gov and started an online account, but not yet selected a plan. The Department of Health and Human Services (HHS), in collaboration with the Office of Evaluation Sciences (OES), developed and sent letters to assist these individuals with completing their insurance application in time.

Methods. From February 2 to 4, 2015, individuals who had registered for a HealthCare.gov user account but not yet enrolled in an insurance plan (n = 811,795) were randomly assigned to be sent one of eight letter variants or no letter at all (the "hold-out" group). The eight letters varied behavioral dynamics including action language, an implementation intention prompt, a picture, social norm messaging, a pledge, and loss aversion.[62] The core content of the letter about how to enroll (information about the benefits of enrolling, the deadline, the website link, and a phone number) was held constant across each of the eight letters.

Results. By the February 15 deadline, enrollments were 4.03 percent in the hold-out group and 4.32 percent across letter variants—a 7.15 percent increase ($p < 0.001$, 95% CI [5.89, 8.42]) amounting to 1,924 marginal enrollments. Not all letters had equal effects (see figure): the highest performing letter (#4, designed with behavioral dynamics of action language, an implementation intention, and a picture) boosted enrollments by 13.17 percent compared with only 1.84 percent for letter #8 (a "kitchen sink" variant including all dynamics minus the pledge). A social norm message (about the "millions of Americans" enrolled) in #8, 6, and 5 was ineffective.



Enrollment rates of the eight letter variants, sorted by effectiveness. The light blue bar indicates the 95% confidence interval of the group that was sent no letter.

Conclusions. Letter campaigns are effective at prompting completion of health insurance applications for those who have demonstrated interest and initiated the process. This is especially the case when effort is invested in behavioral design and randomized testing to measure relative performance.

[61] For more information on the FHIM, including the Open Enrollment Period, see www.healthcare.gov.

[62] Katherine L. Milkman, John Beshears, James J. Choi, David Laibson, and Brigitte C. Madrian, "Using Implementation Intentions Prompts to Enhance Influenza Vaccination Rates," *Proceedings of the National Academy of Sciences* 108 (2011): 10415–10420. Marianne Bertrand, Sendhil Mullainathan, Eldar Shafir, and Jonathan Zinman, "What's Advertising Content Worth? Evidence from a Consumer Credit Marketing Field Experiment," *Quarterly Journal of Economics* 125 (2010): 263–306. Hunt Allcott, "Social Norms and Energy Conservation," Journal of Public Economics 95 (2011): 1082–1095. Daniel Kahneman and Amos Tversky, "Prospect Theory: An Analysis of Decision Under Risk," *Econometrica* 47 (1979): 263–291.

OES
Office of Evaluation Sciences