



TRACKING TRENDS IN HEALTH SYSTEM PERFORMANCE

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Americans' Experiences with ACA Marketplace and Medicaid Coverage: Access to Care and Satisfaction

Findings from the Commonwealth Fund Affordable
Care Act Tracking Survey, February–April 2016

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Abstract The fourth wave of the Commonwealth Fund Affordable Care Act Tracking Survey, February–April 2016, finds at the close of the third open enrollment period that the working-age adult uninsured rate stands at 12.7 percent, statistically unchanged from 2015 but significantly lower than 2014 and 2013. Uninsured rates in the past three years have fallen most steeply for low-income adults though remain higher compared to wealthier adults. ACA marketplace and Medicaid coverage is helping to end long bouts without insurance, bridge gaps when employer insurance is lost, and improve access to health care. Sixty-one percent of enrollees who had used their insurance to get care said they would not have been able to afford or access it prior to enrolling. Doctor availability and appointment wait times are similar to those reported by insured Americans overall. Majorities with marketplace or Medicaid coverage continue to be satisfied with their insurance.

BACKGROUND

Three years after the Affordable Care Act's major health insurance expansions went into effect, nearly 28 million people are estimated to have coverage either through the marketplaces or through Medicaid.¹ Yet there remains considerable controversy over how well these reforms are working for Americans.

The fourth Commonwealth Fund Affordable Care Act (ACA) Tracking Survey interviewed a nationally representative sample of 4,802 working-age adults, of whom 881 have new marketplace or Medicaid coverage under the health reform law, to find out how their insurance is affecting their lives (Table 1). The survey firm SSRS conducted the interviews between February 2 and April 5, 2016. In this issue brief, we examine

the law's effects on insurance coverage and how people are using their coverage to get health care. Upcoming briefs in this series will discuss the survey's findings on affordability and choice, as well as the reasons why millions of people remain uninsured.

SURVEY FINDINGS

12.7 Percent of U.S. Working-Age Adults Are Uninsured

The survey found that the percentage of adults who were uninsured as of February–April 2016 is significantly below 2013 and 2014 levels, though coverage gains were smaller. The uninsured rate for adults ages 19 to 64 was 12.7 percent in February–April 2016, compared with 13.3 percent in March–May 2015, 14.8 percent in April–June 2014, and 19.9 percent in July–September 2013 (Exhibit 1). The 2016 rate is not statistically different from the 2015 rate.² This represents an estimated decline of 13 million uninsured adults since the law's major coverage reforms have taken effect in 2013. These changes are within the range of estimates reported by other recent surveys (see [Appendix](#)).

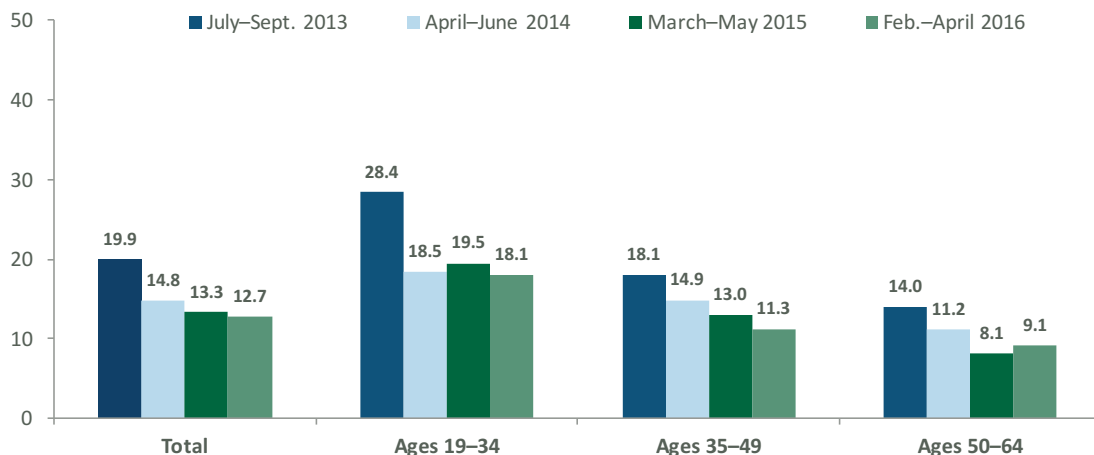
Gains in coverage differ across age and income groups. The steady decline in uninsured rates continues for adults ages 35 to 49.³ Meanwhile, the uninsured rate for adults 19 to 34 remains at about the same level it was after the sharp drop in 2014. Older adults ages 50 to 64 continue to have the lowest uninsured rates of any age group, but the rate for 2016 is statistically unchanged.

People with low and moderate incomes—the population targeted in particular by the ACA's reforms—had the highest uninsured rates prior to the law's enactment and subsequently have experienced the greatest gains in coverage by far (Exhibit 2). But after declining steeply in 2014, uninsured rates for adults with incomes below 138 percent of the federal poverty level (\$16,243 for an

Exhibit 1

After The End of the Affordable Care Act's Third Open Enrollment Period, the Percentage of Uninsured U.S. Adults Was 12.7 Percent

Percent of adults ages 19–64 uninsured

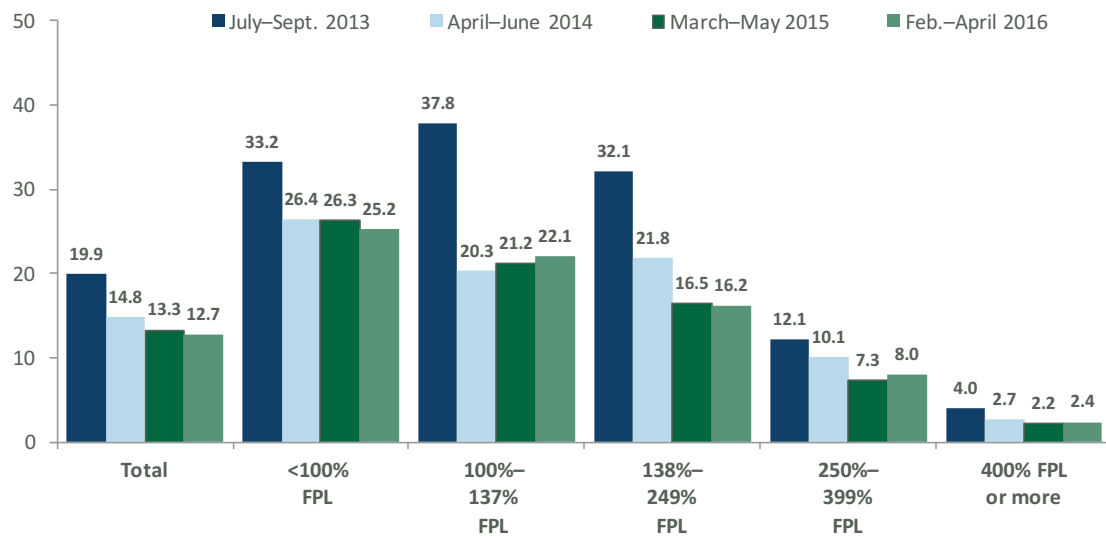


Source: The Commonwealth Fund Affordable Care Act Tracking Surveys, July–Sept. 2013, April–June 2014, March–May 2015, and Feb.–April 2016.

Exhibit 2

Uninsured Rates Among Low-Income Adults Have Fallen the Most But Remain Substantially Higher Than Those for Adults with Higher Incomes

Percent of adults ages 19–64 uninsured



Note: FPL refers to federal poverty level.

Source: The Commonwealth Fund Affordable Care Act Tracking Surveys, July–Sept. 2013, April–June 2014, March–May 2015, and Feb.–April 2016.

individual and \$33,465 for a family of four) have remained about the same. Similarly, uninsured rates for those with incomes between 138 percent and 249 percent of poverty (\$29,425 for an individual and \$60,625 for a family of four) had fallen by half by 2015 but remain nearly the same this year. Consequently, low- and moderate-income adults are uninsured at rates as much as 10 times higher as those for adults with higher incomes.

Marketplace Plans and Medicaid Are Ending Long Bouts Without Insurance and Bridging Gaps

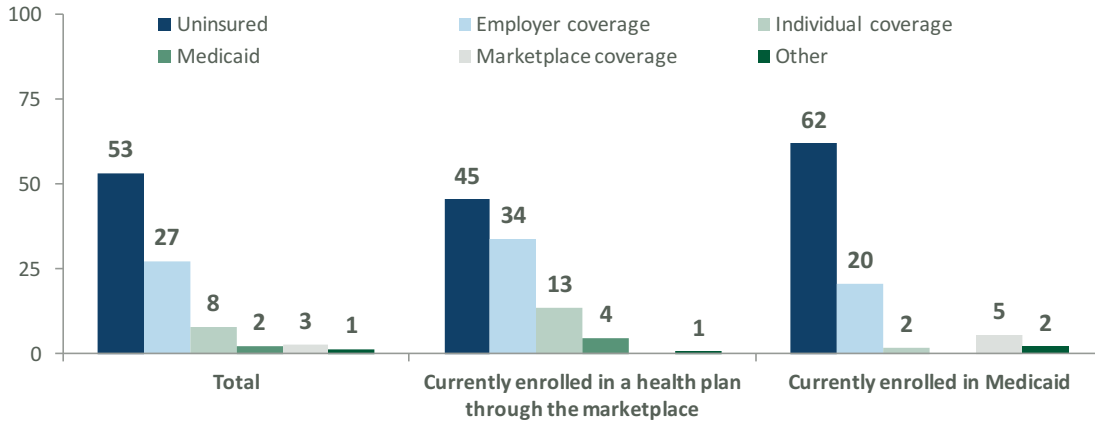
Our survey findings suggest that the overall growth in marketplace and Medicaid coverage has not resulted from Americans leaving their employer-based plans but from people who previously lacked health insurance now able to get coverage. The share of adults enrolled in employer plans has remained relatively stable, falling from 56 percent in 2013 to 53 percent in 2016 (data not shown). Consistent with this, we find that 45 percent of adults enrolled in marketplace plans and 62 percent of adults newly covered by Medicaid were uninsured before they enrolled (Exhibit 3). Of this group, 59 percent with a marketplace plan and 49 percent with Medicaid had been without insurance for a more than two years (Exhibit 4).

But the survey findings also suggest that the marketplaces and Medicaid may be helping to bridge coverage gaps when people lose employer-based health insurance. One-third (34%) of marketplace enrollees said they had had employer coverage prior to getting their current coverage. Among surveyed adults with employer coverage for less than a year, 7 percent reported that they had marketplace coverage prior to enrolling in their employer plan and 11 percent had been enrolled in Medicaid (Exhibit 5).⁴

Exhibit 3

Nearly Half of Adults in Marketplace Plans and Three of Five Adults Enrolled in Medicaid Were Uninsured Before Getting Their New Insurance

? What type of health insurance did you have prior to getting your marketplace or Medicaid coverage?



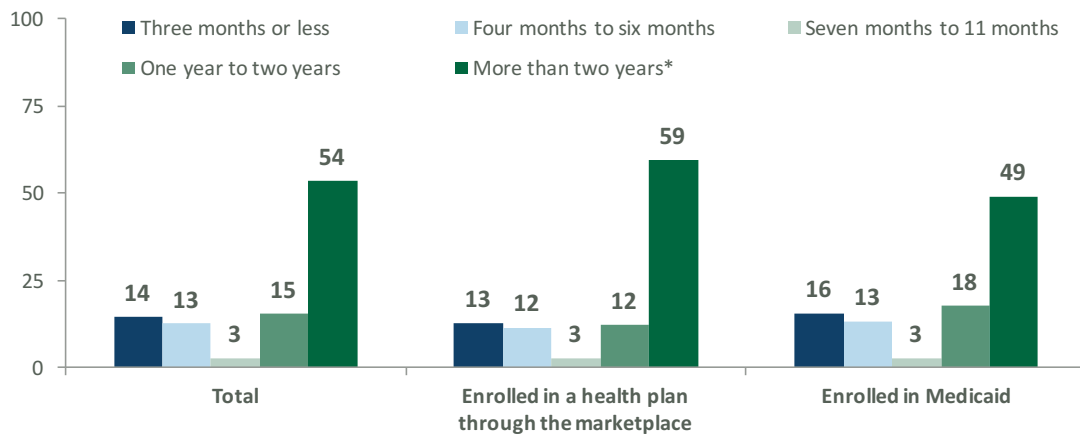
Percent of adults ages 19–64 who are currently enrolled in marketplace coverage or have had Medicaid for less than three years

Source: The Commonwealth Fund Affordable Care Act Tracking Survey, Feb.–April 2016.

Exhibit 4

Over Half of Adults Who Were Uninsured Before Getting Their New Coverage Had Been Uninsured for More Than Two Years

? At the time you got your marketplace or Medicaid coverage, how long had you been uninsured?



Percent of adults ages 19–64 who were uninsured before gaining their Medicaid or marketplace coverage

* Includes those who reported never having had insurance.

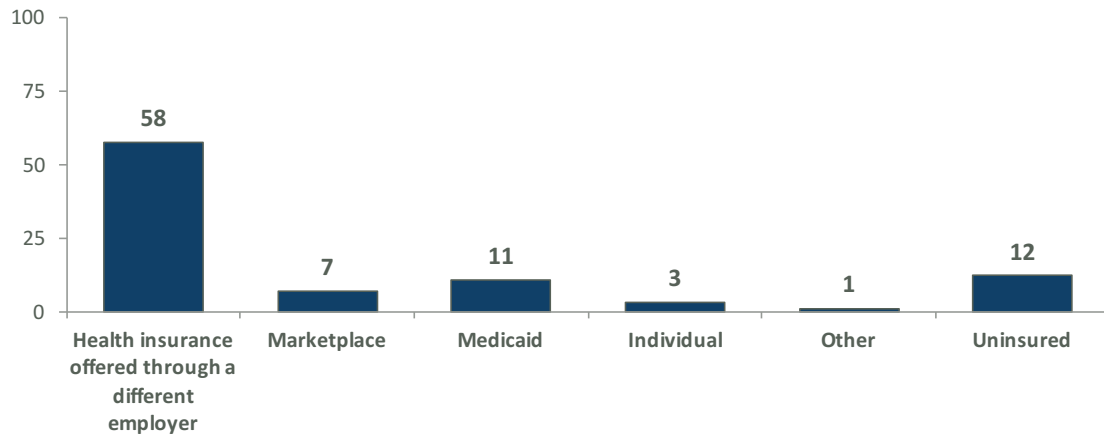
Source: The Commonwealth Fund Affordable Care Act Tracking Survey, Feb.–April 2016.

Exhibit 5

Seven Percent of Adults Who Had Employer Insurance for Less Than a Year Previously Had Insurance Through the Marketplaces



Why type of health insurance did you have prior to getting health insurance through your current employer?



Percent of adults ages 19–64 who have had employer insurance for less than a year

Source: The Commonwealth Fund Affordable Care Act Tracking Survey, Feb.–April 2016.

Most Marketplace and Medicaid Enrollees Continue to Be Satisfied with Their Coverage

In each of the three years since the ACA's major coverage expansions, majorities of marketplace and new Medicaid enrollees have reported that they are satisfied with their new health insurance overall. In 2016, 77 percent of adults with marketplace plans and 88 percent of those newly enrolled in Medicaid were very or somewhat satisfied with their health insurance (Exhibit 6). And when asked to rate their insurance, 66 percent of marketplace enrollees and 77 percent of new Medicaid enrollees said their coverage was good, very good, or excellent (Exhibit 7).

Marketplace Plans and Medicaid Are Enabling People to Get Health Care

To provide people with the means to get the health care they need, insurance must come with reasonable levels of cost-sharing and adequate provider networks. The survey findings suggest that for the majority of those insured through the marketplaces or Medicaid, their new coverage appears to be facilitating access to care.

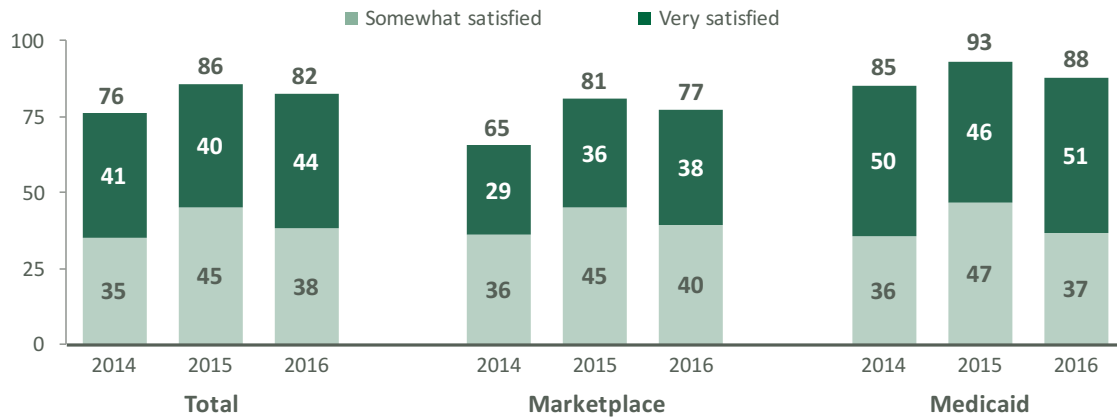
Seven of 10 adults (72%) enrolled in a marketplace plan or newly enrolled in Medicaid said they had used their coverage to go to a doctor, hospital, or other health care provider or to fill a prescription (data not shown). Of this group, 61 percent said they would not have been able to access or afford this care prior to getting their new coverage (Exhibit 8). People enrolled in Medicaid, those previously uninsured, and those with low incomes were the most likely to say they could not have accessed or afforded this care before.

But even individuals who were previously insured noted improvement: 48 percent of these adults said they would not have been able to access or afford this care before getting their new insurance.

Exhibit 6

Most Adults with Marketplace or Medicaid Coverage Continue to Be Satisfied with It

? Overall, how satisfied are you with your health insurance?



Percent of adults ages 19–64 who are currently enrolled in marketplace coverage or have had Medicaid since expansion*

* For 2014 we included adults who had Medicaid for less than one year, for 2015 we included adults who had Medicaid for less than two years, and for 2016 we include adults who have had Medicaid for less than three years.

Note: Segments may not sum to indicated total because of rounding.

Source: The Commonwealth Fund Affordable Care Act Tracking Surveys, April–June 2014, March–May 2015, and Feb.–April 2016.

Exhibit 7

Most Adults with Marketplace or Medicaid Coverage Continue to Rate It Highly

? Now thinking about your health insurance coverage, how would you rate it?



Percent of adults ages 19–64 who are currently enrolled in marketplace coverage or have had Medicaid since expansion*

* For 2014 we included adults who had Medicaid for less than one year, for 2015 we included adults who had Medicaid for less than two years, and for 2016 we include adults who have had Medicaid for less than three years.

Note: Segments may not sum to indicated total because of rounding.

Source: The Commonwealth Fund Affordable Care Act Tracking Surveys, April–June 2014, March–May 2015, and Feb.–April 2016.

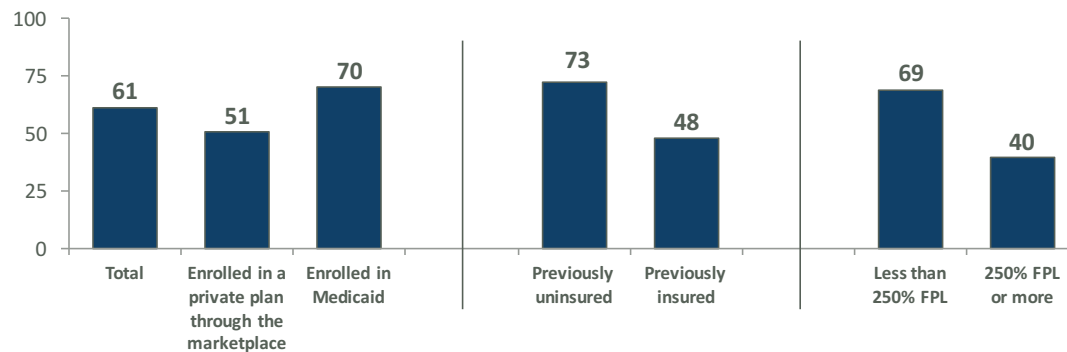
Exhibit 8

Three of Five Adults with Marketplace or Medicaid Coverage Who Had Used Their Plan Said They Would Not Have Been Able to Access or Afford This Care Before



Prior to getting your Medicaid or health coverage through the marketplace, would you have been able to access and/or afford this care?

Percent who answered “no”



*Adults ages 19–64 who are currently enrolled in marketplace coverage or have had Medicaid for less than three years and have used their new health insurance plan**

* 72% of adults ages 19 to 64 who are currently enrolled in marketplace coverage or with Medicaid for less than three years reported they had used their coverage to visit a doctor, hospital, or other health care provider, or to pay for prescription drugs.

Source: The Commonwealth Fund Affordable Care Act Tracking Survey, Feb.–April 2016.

According to the survey, three-quarters (73%) of marketplace enrollees and 93 percent of Medicaid enrollees who have had coverage for two months or less said their ability to get health care had improved or stayed the same since getting their insurance (Exhibit 9). However, about 11 percent of those with new marketplace coverage and 4 percent of those with new Medicaid coverage said their ability to obtain care had gotten worse.

Experiences Finding Doctors and Getting Appointments Similar to Those of Insured Americans as a Whole

From the outset, certain characteristics intrinsic to the ACA's coverage options have increased the likelihood that enrollees would have trouble finding doctors and getting appointments in a timely fashion. The law's designation of the second-lowest-cost silver plan in the marketplaces as the benchmark for determining premium subsidies, and limits on cost-sharing, have incentivized insurers to use narrow provider networks to drive down premiums.⁵ In addition, Medicaid's historically low provider reimbursement rates compared with commercial plans' limit provider participation in the program.

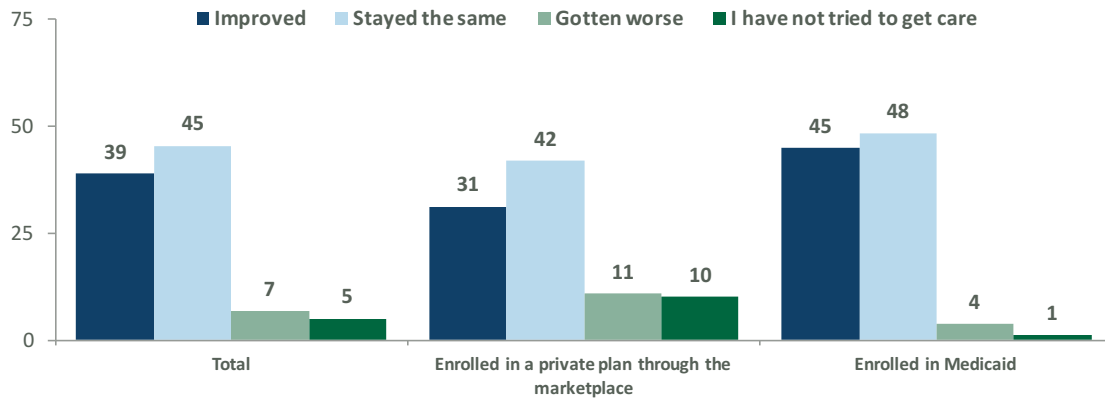
Yet over the three years of the insurance expansions, our ACA Tracking Survey has found that the experience of marketplace and Medicaid enrollees in finding doctors and getting appointments is similar to that reported by insured Americans as a whole.

Access to primary care doctors. In 2016, one-quarter of marketplace or new Medicaid enrollees had tried to find a new primary care or general doctor since getting their insurance (data not shown). Of those, 58 percent said it was somewhat or very easy to find one (Exhibit 10). That is similar to the rate for insured adults overall reported in other surveys.⁶

Exhibit 9

Eight of Ten Adults with New Coverage Said Their Ability to Get Health Care Has Improved or Stayed the Same

? Since obtaining Medicaid or health coverage through the marketplace, would you say your ability to get the health care that you need has improved, stayed the same, or gotten worse?



Percent of adults ages 19–64 who have had a private plan through the marketplace or Medicaid for two months or less

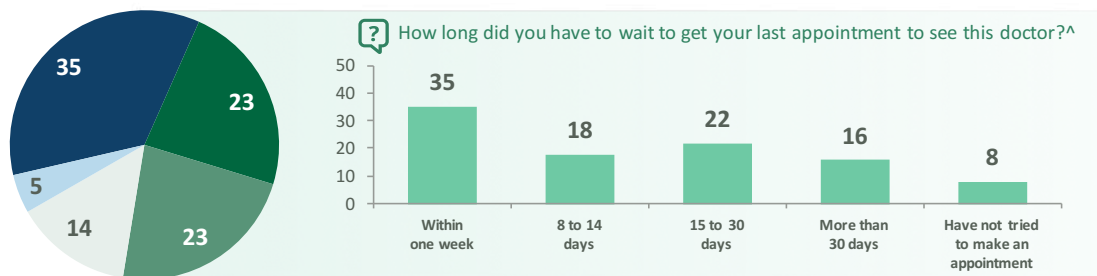
Source: The Commonwealth Fund Affordable Care Act Tracking Survey, February–April 2016.

Exhibit 10

Three of Five Adults with Medicaid or Marketplace Coverage Who Tried to Find a New Primary Care Doctor Found It Very or Somewhat Easy to Do So and More Than Half Waited Two Weeks or Less to See Them

? How easy or difficult was it for you to find a new primary care doctor or general doctor?

■ Very easy ■ Somewhat easy
■ Somewhat difficult ■ Very difficult
■ Could not find a doctor



Percent of adults ages 19–64 who are currently enrolled in marketplace coverage or have had Medicaid for less than three years and tried to find a primary care doctor or general doctor since getting new coverage*

* 25% of adults ages 19 to 64 who are currently enrolled in marketplace coverage or with Medicaid for less than three years tried to find a primary care or general doctor. ^ Among those who found a primary care doctor.

Source: The Commonwealth Fund Affordable Care Act Tracking Survey, Feb.–April 2016.

Likewise, 53 percent of the combined sample of marketplace and new Medicaid enrollees who found a new primary care doctor were able to get an appointment with that doctor within two weeks the last time they tried (Exhibit 10).⁷ Again, this is similar to wait times reported by insured adults overall.⁸

Access to specialists. Wait times for specialists were also similar to rates found for other insured adults.⁹ Two of five (41%) marketplace and new Medicaid enrollees needed to see a specialist during the time they had had their coverage (data not shown). Of those, 60 percent were able to secure an appointment within two weeks (Exhibit 11).¹⁰

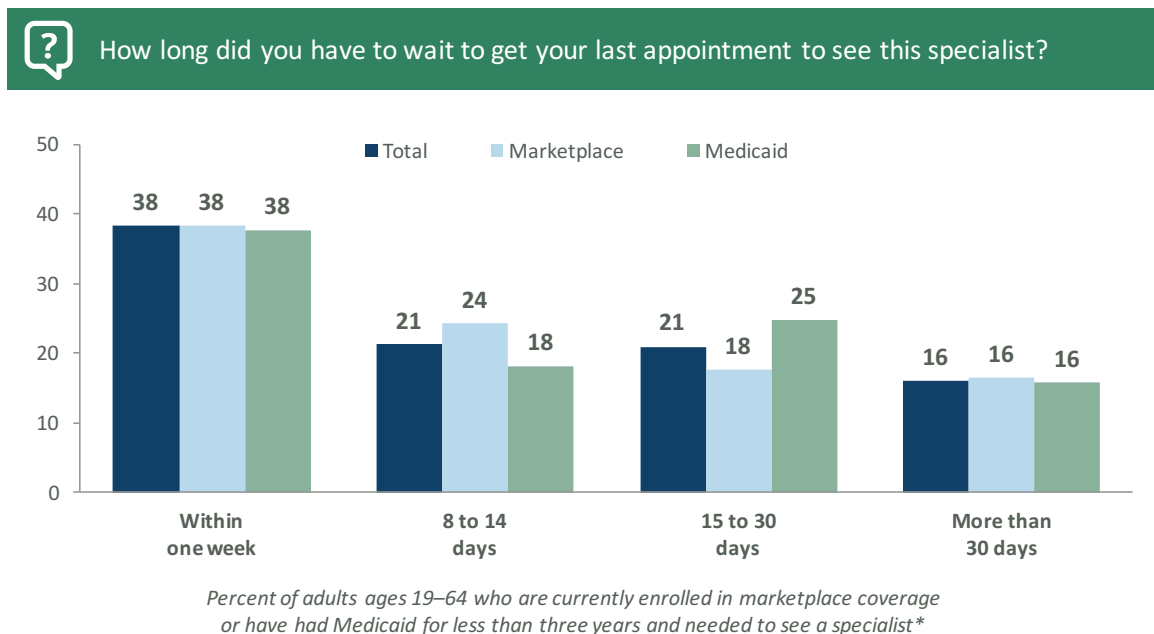
CONCLUSION AND POLICY IMPLICATIONS

After falling sharply in 2014 upon rollout of the ACA's major coverage expansions, the uninsured rate for U.S. working-age adults has been declining at a slower pace. The chasm in insurance coverage between lower- and higher-income adults remains troubling. We will explore the possible reasons for this in a forthcoming brief.

In each year since the coverage expansions, our survey findings have indicated that overall enrollment has been propelled by people who were previously uninsured—a year or longer for the vast majority. Consistent with other national surveys and Congressional Budget Office analyses, enrollment has not been driven by people shifting out of employer coverage: the share of adults insured through an employer has declined only slightly since 2013.¹¹ The survey findings do suggest that for people who lose their job-based health benefits, the expanded insurance options may be helping to bridge the coverage gap.

Exhibit 11

Three of Five Adults with Medicaid or Marketplace Coverage Who Needed to See a Specialist Waited Two Weeks or Less



* 41% of adults ages 19 to 64 who are currently enrolled in marketplace coverage or with Medicaid for less than three years needed to see a specialist doctor. Source: The Commonwealth Fund Affordable Care Act Tracking Survey, Feb.–April 2016.

The improvements in access to care found in the survey demonstrate that the ACA's coverage options have filled gaps in coverage and care for millions of adults (Table 1). Majorities of enrollees are using their plans to get care they could not have afforded before. And a majority of recent enrollees indicate their ability to get care since obtaining their coverage has improved or stayed the same. Moreover, their ability to find doctors and get appointments is similar to that of insured Americans overall.

All these findings may explain why majorities of enrollees give their health plans high ratings. If the fundamental purpose of health insurance is to provide people with adequate access to needed health care, then it would seem that, on balance, the Affordable Care Act's coverage expansions are working well for most of the people who have enrolled in them.

Table 1. Demographics of Overall Sample, Uninsured Adults, and Marketplace and Medicaid Enrollees

	Total adults (% ages 19–64)	Uninsured adults (%)	Total current marketplace and Medicaid enrollees* (% ages 19–64)	Enrolled in a private health plan through the marketplace (%)	Enrolled in Medicaid (%)
Unweighted n	4,802	642	881	432	446
Prior coverage status					
Uninsured	–	–	53	45	62
Insured	–	–	45	54	36
Age					
19–34	34	48	39	32	46
35–49	32	28	30	28	32
50–64	32	23	30	37	22
Race/Ethnicity					
Non-Hispanic White	61	41	55	60	50
Black	13	12	15	14	16
Latino	17	40	23	21	25
Asian/Pacific Islander	5	3	3	2	4
Other/Mixed	2	2	3	1	4
Poverty status					
Below 138% poverty	30	57	48	27	69
138%–249% poverty	20	26	25	32	18
250%–399% poverty	18	11	15	22	8
400% poverty or more	32	6	12	19	5

	Total adults (% ages 19–64)	Uninsured adults (%)	Total current marketplace and Medicaid enrollees* (% ages 19–64)	Enrolled in a private health plan through the marketplace (%)	Enrolled in Medicaid (%)
Health status					
Fair/Poor health status, or any chronic condition or disability [^]	52	53	54	48	60
No health problem	48	47	46	52	40
Political affiliation					
Democrat	29	23	33	34	31
Republican	19	12	16	20	13
Independent	24	22	23	23	24
Something else	17	22	16	14	17
State Medicaid expansion decision^{**}					
Expanded Medicaid	59	48	65	52	80
Did not expand Medicaid	41	51	35	48	20
Marketplace type^{***}					
State-based marketplace	33	27	42	31	53
Federally facilitated marketplace	67	72	58	69	47
Adult work status					
Full-time	53	37	36	43	29
Part-time	14	19	24	25	23
Not working	33	43	39	32	47
Employer size^{^^}					
1–24 employees	26	57	40	49	29
25–99 employees	14	18	18	18	17
100–499 employees	14	8	12	11	13
500 or more employees	43	14	25	18	33

* Includes those currently enrolled in marketplace coverage, those who signed up for Medicaid through the marketplace, those who signed up for coverage through the marketplace but are not sure if it is Medicaid or private coverage, and those who have been enrolled in Medicaid for less than three years.

** The following states expanding their Medicaid program and began enrolling individuals in February 2016 or earlier: AK, AR, AZ, CA, CO, CT, DE, HI, IA, IN, IL, KY, MA, MD, MI, MN, MT, ND, NH, NJ, NM, NV, NY, OH, OR, PA, RI, VT, WA, WV, and the District of Columbia. All other states were considered to have not expanded.

*** The following states have state-based marketplaces: CA, CO, CT, ID, KY, MA, MD, MN, NY, RI, VT, WA, and the District of Columbia. All other states—including HI, NM, NV, and OR, which operate their own marketplaces but use HealthCare.gov for enrollment—are considered to have federally facilitated marketplaces.

[^] At least one of the following chronic conditions: hypertension or high blood pressure; heart disease; diabetes; asthma, emphysema, or lung disease; or high cholesterol.

^{^^} Base: full- and part-time employed adults ages 19–64.

– Not applicable.

Source: The Commonwealth Fund Affordable Care Act Tracking Survey, February–April 2016.

APPENDIX. COMPARISON OF UNINSURED ESTIMATES FROM RECENT SURVEYS

Several health policy research organizations and federal agencies have conducted surveys to capture the change in coverage since implementation of the Affordable Care Act. Each of these surveys uses slightly different methods, but they all were conducted over similar periods, with a baseline survey measuring the uninsured rate prior to implementation of the health reform law's major coverage provisions and follow-up surveys once implementation began. Although the surveys have produced slightly different estimates, they are directionally the same, showing a significant decline in the rate and number of uninsured adults in the United States.

Survey Estimates of Changes in U.S. Uninsured Rates Since 2013

Survey	Pre-implementation uninsured rate (%) [95% CI]	Post-implementation uninsured rate (%) [95% CI]	Change in millions [95% CI]
The Commonwealth Fund Affordable Care Act Tracking Survey	19.9% [18.5%–21.4%]	12.7% [11.5%–14.0%]	13.0 million [7.8 million–18.3 million]
Gallup Healthways Well-Being Index ^{1,2}	20.7%	13.1%	–
ASPE Analysis of Gallup–Healthways Well-Being Index ³	20.3%	11.5%	20 million
Urban Institute Health Reform Monitoring Survey ⁴	17.6%	10.4% [5.4, 8.91]	14.3 million [10.8 million, 17.8 million]
RAND Health Reform Opinion Survey ⁵	–	–	16.6 million
National Health Interview Survey ⁶	20.4%	12.8%	14.5 million

Notes: Confidence intervals are shown where they were reported out by the organization; ASPE estimates adjust for age, race, ethnic group, sex, employment status, state of residence, and time trends.

– Percent estimates were not reported.

¹ K. Finegold and M. Z. Gunja, *Survey Data on Health Insurance Coverage for 2013 and 2014*, ASPE issue brief (Office of the Assistant Secretary for Planning and Evaluation, Oct. 31, 2014).

² N. Uberoi, K. Finegold, and E. Gee, *Health Insurance Coverage and the Affordable Care Act, 2010–2016* (Office of the Assistant Secretary for Planning and Evaluation, March 3, 2016).

³ Ibid.

⁴ M. Karpman and S. K. Long, “QuickTake–Taking Stock: Gains in Health Insurance Coverage Under the ACA Continue as of September 2015, But Many Remain Uninsured” (Urban Institute Health Policy Center, Nov. 4, 2015).

⁵ K. G. Carman and C. Eibner, “Insurance Enrollment Holds Steady in Advance of the 2016 Open Enrollment Period,” *The RAND Blog*, Nov. 12, 2015.

⁶ M. E. Martinez, R. A. Cohen, and E. P. Zammitti, *Health Insurance Coverage: Early Release of Estimates from the National Health Interview Survey, January–September 2015* (National Center for Health Statistics, Feb. 2016).

Methodological Differences Between Private Surveys

Survey	Population	Time frame	Sample frame	Response rate
The Commonwealth Fund Affordable Care Act Tracking Survey	U.S. adults ages 19–64	July–Sept. 2013 to February–April 2016	Dual-frame, RDD telephone survey	2013: 20.1% 2016: 13.9%
Gallup–Healthways Well-Being Index ^{1,2}	U.S. adults ages 18–64	2013 to January–March 2016	Dual-frame, RDD telephone survey	5%–10%
ASPE Analysis of Gallup–Healthways Well-Being Index ³	U.S. adults ages 18–64	January 2012–Oct. 2013 to January–March 2016	Dual-frame, RDD telephone survey	5%–10%
Urban Institute Health Reform Monitoring Survey ⁴	U.S. adults ages 18–64	Sept. 2013 to Sept. 2015	KnowledgePanel-probability-based internet panel of 55,000 households	Approximately 5% each quarter
RAND Health Reform Opinion Survey ⁵	U.S. adults ages 18–64	Sept. 2013 to August 2015	American Life Panel-internet panel of 5,500 adults	9%
National Health Interview Survey ⁶	U.S. adults ages 18–64	2013 to 2015	Multistage area probability design	80%

Notes: Information for this table was gathered from survey data releases and from an Urban Institute report comparing surveys; see: M. Karpman, S. K. Long, and M. Huntress, *Nonfederal Surveys Fill a Gap in Data on ACA* (Urban Institute, March 13, 2015).

¹ K. Finegold and M. Z. Gunja, *Survey Data on Health Insurance Coverage for 2013 and 2014*, ASPE issue brief (Office of the Assistant Secretary for Planning and Evaluation, Oct. 31, 2014).

² N. Uberoi, K. Finegold, and E. Gee, *Health Insurance Coverage and the Affordable Care Act, 2010–2016* (Office of the Assistant Secretary for Planning and Evaluation, March 3, 2016).

³ Ibid. All models adjust for age, sex, race, ethnicity, employment, state of residence, marital status, rural location, and a linear time trend.

⁴ M. Karpman and S. K. Long, “QuickTake–Taking Stock: Gains in Health Insurance Coverage Under the ACA Continue as of September 2015, But Many Remain Uninsured” (Urban Institute Health Policy Center, Nov. 4, 2015).

⁵ K. G. Carman and C. Eibner, “Insurance Enrollment Holds Steady in Advance of the 2016 Open Enrollment Period,” *The RAND Blog*, Nov. 12, 2015.

⁶ M. E. Martinez, R. A. Cohen, and E. P. Zammitti, *Health Insurance Coverage: Early Release of Estimates from the National Health Interview Survey, January–September 2015* (National Center for Health Statistics, Feb. 2016).

HOW THIS SURVEY WAS CONDUCTED

The Commonwealth Fund Affordable Care Act (ACA) Tracking Survey, February–April 2016, was conducted by SSRS from February 2 to April 5, 2016. The survey consisted of 15-minute telephone interviews in English or Spanish, conducted among a random, nationally representative sample of 4,802 adults ages 19 to 64 living in the United States. Overall, 1,496 interviews were conducted on landline telephones and 3,306 interviews on cell phones.

This survey is the fourth in a series of Commonwealth Fund surveys to track the implementation and impact of the ACA. The first was conducted by SSRS from July 15 to September 8, 2013, by telephone among a random, nationally representative U.S. sample of 6,132 adults ages 19 to 64. The survey had an overall margin of sampling error of ± 1.8 percentage points at the 95 percent confidence level.

The second survey in the series was conducted by SSRS from April 9 to June 2, 2014, by telephone among a random, nationally representative U.S. sample of 4,425 adults ages 19 to 64. The survey had an overall margin of sampling error of ± 2.1 percentage points at the 95 percent confidence level. The sample for the April–June 2014 survey was designed to increase the likelihood of surveying respondents who were most likely eligible for new coverage options under the ACA. As such, respondents in the July–September 2013 survey who said they were uninsured or had individual coverage were asked if they could be recontacted for the April–June 2014 survey. SSRS also recontacted households reached through their omnibus survey of adults who were uninsured or had individual coverage prior to the first open enrollment period for 2014 marketplace coverage.

This third survey in the series was conducted by SSRS from March 9 to May 3, 2015, by telephone among a random, nationally representative U.S. sample of 4,881 adults ages 19 to 64. The March–May 2015 sample also was designed to increase the likelihood of surveying respondents who had gained coverage under the ACA. SSRS recontacted households reached through their omnibus survey of adults between November 5, 2014, and February 1, 2015, who were uninsured, had individual coverage, had a marketplace plan, or had public insurance. The survey had an overall margin of sampling error of ± 2.1 percentage points at the 95 percent confidence level.

The February–April 2016 sample also was designed to increase the likelihood of surveying respondents who had gained coverage under the ACA. Interviews in wave 4 were obtained through two sources: stratified random-digit-dialing sample, using the same methodology as in waves 1, 2 and 3; and households reached through the SSRS omnibus survey, where interviews were previously completed with respondents ages 19 to 64 who were uninsured, had individual coverage, had a marketplace plan, or had public insurance.

As in all waves of the survey, SSRS oversampled adults with incomes under 250 percent of poverty to further increase the likelihood of surveying respondents eligible for the coverage options as well as allow separate analyses of responses of low-income households.

The data are weighted to correct for the stratified sample design, the use of recontacted respondents from the omnibus survey, the overlapping landline and cell phone sample frames, and disproportionate nonresponse that might bias results. The data are weighted to the U.S. 19-to-64 adult population by age, gender, race/ethnicity, education, household size, geographic division, and population density using the U.S. Census Bureau's 2014 American Community Survey, and weighted by household telephone use using the U.S. Centers for Disease Control and Prevention's 2014 National Health Interview Survey.

The resulting weighted sample is representative of the approximately 189 million U.S. adults ages 19 to 64. Data for income, and subsequently for federal poverty level, were imputed for cases with missing data, utilizing a standard regression imputation procedure. The survey has an overall margin of sampling error of ± 2.0 percentage points at the 95 percent confidence level. The land-line portion of the main-sample survey achieved a 22.6 percent response rate and the cellular phone main-sample component achieved a 13.9 percent response rate. The overall response rate, including the prescreened sample, was 13.9 percent.

NOTES

- ¹ By the end of The Affordable Care Act's third open enrollment period, marketplace plan selections had climbed to 12.7 million people and 15 million more people were enrolled in Medicaid compared to three years earlier. Assistant Secretary for Planning and Evaluation, *Health Insurance Marketplaces 2016 Open Enrollment Period: Final Enrollment Report, For the Period: November 1, 2015–February 1, 2016*, ASPE Issue Brief (U.S. Department of Health and Human Services, March 11, 2016); Centers for Medicare and Medicaid Services, *Medicaid & CHIP: February 2016 Monthly Applications Eligibility Determinations and Enrollment Report* (CMS, April 29, 2016).
- ² The 2016 estimate is statistically different from both the 2014 and 2013 estimates.
- ³ The uninsured rate of 11.3% for adults between the ages of 35 and 49 years in 2016 is statistically different from the uninsured rate of 14.9% for the same group in 2014 and 18.1% in 2013. The 2016 uninsured rate is not statistically different from the uninsured rate of 13.0% in 2015.
- ⁴ We do not know, however, whether those adults who had Medicaid prior to gaining employer coverage were enrolled through the ACA coverage expansions.
- ⁵ As Jon Gabel and colleagues point out, the law's metal tiers defined by actuarial value do not exist in the employer market and protect consumers from ever-higher cost-sharing that would inevitably result from greater price competition. See J. Gabel, M. Green, A. Hall et al., *Changes in Consumer Cost-Sharing for Health Plans Sold in the ACA's Insurance Marketplaces, 2015 to 2016* (The Commonwealth Fund, May 2016).
- ⁶ In the Commonwealth Fund Biennial Health Insurance Survey, 2014: among adults who were insured all year and had tried to find a primary care provider, 57 percent said it was somewhat or very easy to find one (unpublished data).
- ⁷ Sample size limitations prevented the reporting of results by coverage source.
- ⁸ In the Commonwealth Fund Biennial Health Insurance Survey, 2014: among adults who were insured all year, 56 percent of those who found a new primary care doctor got an appointment within two weeks (unpublished data). Similarly, a 2011 Commonwealth Fund survey of 19-to-64-year-old adults found that among those insured all year who had tried to find a primary care physician in the past three years (either respondent or spouse/partner), 57 percent got an appointment within two weeks, including 35 percent who got an appointment within 1 week and 22 percent within one to two weeks. See S. R. Collins, R. Robertson, T. Garber, and M. M. Doty, *The Income Divide in Health Care: How the Affordable Care Act Will Help Restore Fairness to the U.S. Health System* (The Commonwealth Fund, Feb. 2012).
- ⁹ According to the 2013 Commonwealth Fund International Health Policy Survey, among continuously insured adults ages 18 to 64, 42 percent of U.S. adults who needed to see a specialist reported that they were able to get an appointment in one week or less (unpublished data).
- ¹⁰ Differences in reported wait times between marketplace and new Medicaid enrollees are not significant.
- ¹¹ Congressional Budget Office, *Federal Subsidies for Health Insurance Coverage for People Under Age 65: 2016 to 2026* (Washington, D.C.: CBO, March 2016).

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