

2017 Report on Interviews with Individuals Eligible but Unenrolled in the Healthy Michigan Plan

November 7, 2018

**University of Michigan
Institute for Healthcare Policy & Innovation**

Report Authors: Edith Kieffer, Erin Beathard, Erica Solway

Healthy Michigan Voices Evaluation Team: John Ayanian, Erin Beathard, Corey Bryant, Tammy Chang, Sarah Clark, Susan Dorr Goold, Adrienne Haggins, Edith Kieffer, Matthias Kirch, Jeffrey Kullgren, Sunghee Lee, Brian Madden, Rory Menzer, Minal Patel, Ann-Marie Rosland, Zachary Rowe, Erin Sears, Jennifer Skillicorn, Erica Solway, Lisa Szymecko, Renuka Tipirneni, Thomas Voorheis



INSTITUTE FOR
HEALTHCARE POLICY & INNOVATION
UNIVERSITY OF MICHIGAN

2017 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 the 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*. To complement the 2017 *Healthy Michigan Voices* survey of individuals who recently enrolled in HMP for the first time, this report presents findings from 22 in-depth qualitative interviews conducted from May to September 2017 with individuals who were likely eligible for, but unenrolled in, HMP. The purpose of this report is to describe the experiences and perceptions of those who are eligible but unenrolled. The results of these interviews shed light on individuals' awareness, perceptions and understanding of HMP, its features and costs, reasons for not enrolling in the program, and health care experiences, including access to and payment for care in the 12 months prior to the interview. The results of these interviews meet the requirements as specified in the [CMS Special Terms and Conditions](#).

This report includes a concise description of the methods, key results, limitations and conclusions, followed by supplemental material, including a more in-depth description of the methods, a table of interviewee characteristics and the qualitative data from which the results were derived.

Methods

The sampling goal was to recruit and interview 25 people who were likely eligible for HMP but who had never enrolled. Eligibility criteria were: currently uninsured Michigan resident, age 19-64, not pregnant, income \leq 133% FPL, and never enrolled in HMP. Recruitment letters and flyers were sent to community organizations and posted in regions across the state of Michigan. Ads in newspapers and Craigslist were also used. We aimed for a diverse sample with regard to age, race/ethnicity, gender and region. Eligibility was determined by self-report during telephone screening using a simplified form used to calculate modified adjusted gross income (MAGI) to assess income eligibility. HMP and Medicaid enrollment history were later cross-checked with the MDHHS Data Warehouse using interviewees' name and date of birth.

The semi-structured interview guide was developed by the Domain IV evaluation team, and approved by MDHHS. Interview domains included: (a) awareness, perceptions and understanding of HMP, its covered benefits and costs, and reasons for not enrolling in the program; (b) health care utilization in the last 12 months and forgone care; (c) impact of insurance status on finances; (d) perceptions of insurance status; (e) interest in signing up for HMP. Domain IV staff conducted 30 in-person, audio-recorded interviews that lasted 30-45 minutes on average.

Of the 30 completed interviews, data from the MDHHS Data Warehouse showed that 8 interviewees were not eligible to participate due to current or prior enrollment in HMP for longer than 3 months (n=4) or current enrollment in Medicaid (n=4). These 8 interviews were excluded from the sample, resulting in 22 interviews included in this analysis.

Audio recordings of 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.

Limitations

This population of uninsured people was hard to find. Recruitment took several months. While we cannot be certain that they are representative of the entire population of those eligible but unenrolled in HMP, we did recruit and interview a diverse set of interviewees with regard to region, age, race/ethnicity and gender.

All data were obtained by self-report, including income. We could not confirm that each interviewee was eligible for HMP. Responses may be affected by inaccurate recollection and by social desirability.

Because the interviews were only available to English speakers, the results are not generalizable to HMP-eligible but unenrolled people whose primary language is not English.

We learned that more people than anticipated had insurance for more than 6 months in the year prior to the interview. Eight interviewees reported having health insurance during some part of the last 12 months and two had VA care. This influenced their experiences and perspectives about care they received during this period and likely reduced their reports of forgone care due to cost. To address this limitation, the interviews conducted in 2018 will be limited to people who report that they have been uninsured for one year or more.

Finally, we did not verify HMP or Medicaid enrollment in the Data Warehouse until data collection was completed. Eight interviewees were ultimately excluded because they had been enrolled in HMP for three months or longer or were currently enrolled in Medicaid. To address this limitation, the interviews conducted in 2018 will verify HMP and Medicaid enrollment through the Data Warehouse prior to conducting the interviews, excluding those who were ever enrolled in HMP or are currently enrolled in Medicaid.

Results

All percentages in this report are based on the 22 interviews that remained after exclusions.

Interviewee characteristics and reasons for being uninsured

All interviewees were uninsured at the time of the interview, although two had VA care. Fifty-nine percent of those interviewed were under age 35, with the others roughly evenly distributed

between 35-50 and 51-64 years of age. Sixty-four percent of interviewees were men and 68% were white. Seventy-two percent of interviewees were employed. The sample was geographically diverse, representing all major regions of Michigan. Thirty-six percent of interviewees had been uninsured for less than 1 year (mostly between 6-11 months), 23% for approximately 1 year, and 36% for more than 1 year (mostly 2 or more years).

Intersection between employment and insurance status

- Most interviewees were either employed or self-employed, although some were employed in part-time or seasonal jobs, and many had been in their jobs less than a year. Interviewees often reported becoming uninsured because they lost, changed or left a job. Among employed interviewees, their employers either did not offer health insurance or they were not eligible because they were part-time or had not been in the position long enough. A few reported an inability to work due to health problems.

Non-employment-related reasons for being uninsured

- Most common non-employment-related reasons for being uninsured included dropping their Marketplace plan or private coverage due to cost or exploring health insurance options but not applying due to cost.

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

Knowledge and understanding of HMP covered benefits and costs

- Only half of interviewees reported that they had heard about HMP or that it sounded familiar to them. Even those interviewees who said they had heard of HMP knew very little, if anything, about eligibility, covered benefits or costs, including co-pays and contributions. Some misunderstood HMP features with those of other Medicaid programs or other types of insurance.

Reasons for not enrolling in HMP/Medicaid

- The most common reasons interviewees gave for not enrolling in HMP or Medicaid was that they thought they were not eligible, did not want to be on a government program/ prefer a sense of self-sufficiency, perceived themselves to be healthy or not in need of medical care, or had negative views about the application or paperwork processes. Some noted that they did not enroll because they did not know about the program.

Interest in HMP

- Many interviewees expressed interest in signing up for, or learning more about, HMP.

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

Perceptions of being uninsured

- Most interviewees were not satisfied with being uninsured and reported they would like to have health insurance. They expressed concerns about unmet health care needs, the costs of care and prescription medications they needed or received, or missing regular preventive care.

Impact of being uninsured on finances

- Many interviewees perceived health insurance to be too expensive, and therefore out-of-reach, based on perceptions or experiences with commercial health plans. Because of these perceptions, some thought being uninsured offered them more financial stability. Others felt their finances were negatively impacted by being uninsured because they were responsible for the full cost of the care they received, and some had medical debt.
- Many interviewees expressed interest in signing up for, or learning more about HMP. A few interviewees reported that they were not interested in signing up for HMP at the time of the interview. Some attributed their lack of interest to anticipated changes in their personal circumstances, including getting employer-sponsored insurance or plans to move out of Michigan.

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

Health care needs, utilization, and forgone care

- More than half of interviewees reported that they had one or more health problems. All interviewees who were 51-64 years of age reported one or more health problems. Although this group made up only a third of interviewees, they made up half of those with health problems.
- Interviewees' perspectives on the impact of being uninsured on their access to, and use of health care, were influenced by their perceived need for care. Interviewees' health problems had an impact on their perception of their need for care. Almost all interviewees perceived a need for dental care and the majority perceived a need for preventive services, vision care, specialty care and prescriptions. Few reported a need for care of mental health conditions or substance use disorders or for medical equipment and supplies.
- Just over half of interviewees reported having a regular source of care that was a doctor's office or clinic. Both interviewees with and without a regular source of care went without needed care at least some of the time.
- Only a few interviewees had not received any type of care in the past 12 months. Most reported forgoing at least one type of care due to being uninsured or concerns about the cost of care. More than half of interviewees with health problems reported that they were not getting treatment they needed, including preventive and specialty care and

prescriptions needed to improve or manage their conditions. Nearly all said this was due to cost and/or not having insurance.

Getting health care needs met

- Many interviewees were quite aware of the costs associated with co-pays, prescription and medical charges, and health insurance premiums. Many interviewees used a variety of strategies to reduce costs. They reported using store and online coupons and discounts and visiting clinics offering free or sliding-fee services. Some interviewees reported using lifestyle strategies to limit or avoid use of the health care system, including taking steps to avoid or minimize injury, adopting healthy diets and exercising, maintaining good oral hygiene, and using alternative medicines and remedies.

Conclusions

These interviews demonstrated that Michigan residents who were likely eligible for HMP but unenrolled were often unaware of the program or knew little or nothing about its eligibility criteria, covered benefits or costs, including co-pays and contributions. Many thought that they would not be eligible, had negative experiences or perceptions of the administrative processes of commercial or public health insurance, or perceived that they were healthy or did not need formal medical care. Some were philosophically opposed to enrollment because they valued self-sufficiency or did not associate themselves with the Medicaid population.

For many interviewees, the impact of being uninsured included delayed or forgone health care, including preventive care. Many lacked a regular source of care and some who had a doctor avoided or delayed care due to cost. Many, especially those with ongoing health problems also frequently did not receive needed specialty care and prescriptions. Some interviewees had unpaid medical bills. Many interviewees found ways to reduce the cost of needed care such as using clinics offering free, discounted or sliding fee scales, discount coupons, health fairs and lower cost prescriptions and services at stores such as Walmart and Costco. Some used alternative remedies and some reported trying to live healthfully and avoid injury to attempt to limit the need for formal health care services.

The costs associated with HMP did not appear to be a specific reason for not enrolling since so few interviewees knew anything about its costs. However, many remained uninsured because of the perception of the high costs of insurance based on their previous experience or research into private, Marketplace or employer-based insurance. Many assumed they could not afford insurance and were unaware that they may qualify for a more affordable option for coverage. Although most interviewees were employed at least part-time, in one or more jobs, their employers either did not offer health insurance or they were ineligible because they were part-time or had not been in the position long-enough. Some interviewees, especially those who reported being healthy, thought that remaining uninsured improved their ability to pay for food, housing and other expenses. However, some felt their finances were negatively impacted by being uninsured and some reported juggling medical bills in addition to other necessary expenses.

Overall, nearly all interviewees said they would like to have health insurance. These interviews suggest that, for most, it is a lack of awareness of HMP, rather than negative attitudes or perceptions about it, that keeps those who are eligible from enrolling. The results of these interviews suggest that efforts to conduct outreach and educate the public about HMP coverage and costs continues to be important.

2017 Report on Interviews with Individuals Eligible but Unenrolled in the Healthy Michigan Plan: Supplemental Material

Methods

Sample

The sampling goal was to recruit and interview 25 people who were likely eligible for HMP but who had never enrolled. After reviewing information about the geographic distribution of low-income (<138% of the federal poverty level [FPL]), uninsured Michigan residents age 19-64, the evaluation team initially selected counties with relatively high percentages of uninsured people representing diverse geographic regions across Michigan for strategic outreach. We broadened our outreach efforts beyond the targeted counties to achieve geographic diversity, representing the southeast, southwest, west, central, “Thumb”, northwest, northeast and Upper Peninsula regions of Michigan. Eligibility criteria were ascertained by self-report: Michigan resident, age 19-64, not pregnant, and income \leq 133% FPL. Based on the very limited success in recruiting HMP-eligible monolingual Spanish speakers for earlier HMP evaluation interviews, the decision was made to limit recruitment to English speakers. Callers who inquired about participating in the interviews were asked whether they had health insurance, including Medicare or Medicaid, and if they had ever been enrolled in HMP.

HMP and Medicaid enrollment history were later cross-checked with the MDHHS Data Warehouse using interviewees’ name and date of birth. Of the 30 completed interviews, data from the MDHHS Data Warehouse showed that 8 interviewees were not eligible to participate due to current or prior enrollment in HMP for longer than 3 months (n=4) or current enrollment in Medicaid (n=4). These 8 interviews were excluded from the sample, resulting in 22 interviews included in this analysis.

Recruitment

Outreach and recruitment materials were created and initially distributed to community organizations for further distribution in the target Michigan counties (Sanilac, Macomb, Oakland, St. Joseph, Van Buren, Berrien, Claire, Lake, Benzie, Alcona, Oscoda, Baraga, Alger and Chippewa and the city of Detroit), and later to additional counties in the northwest Lower Peninsula and elsewhere. Recruitment letters included the purpose of the project, interviewee eligibility criteria and compensation. The letters with attached flyers were mailed or emailed to community partner organizations, the Michigan Primary Care Association, free clinics, federally qualified health centers, county health plans, and outreach and enrollment providers. Flyers were also posted in public locations that we anticipated would be used by our target population, e.g., community college campuses, restaurants, laundromats, free health clinics. Ads were also placed online through Craigslist and in local newspapers.

Screening

Recruitment materials requested that those interested call a toll-free recruitment telephone line. People who called the line were screened for eligibility by trained staff using a script and worksheet. Initial questions asked callers about their residence in Michigan, whether they had ever been enrolled in HMP, whether they were pregnant, enrollment in Medicaid or Medicare, and county of residence. Those deemed eligible were then screened for income eligibility based on household income and size, using a simplified form used to calculate modified adjusted gross income (MAGI). Callers who completed the income screening and were deemed ineligible to participate in the interview were mailed a \$15 gift card to compensate for their time.

Among screened callers, the most frequent reasons for being ineligible to participate were: previous or current HMP enrollment (n=70), income greater than 133% FPL (n=49), insurance coverage (unspecified) (n=35), Medicare coverage (n=9), age outside of 19-64 years of age (n=5), non-Michigan resident (n=3), refusal to participate (n=3), “mistook our project for health insurance assistance” (n=3), confusion (n=2), and pregnancy (n=1). As noted previously, screening failed to identify 8 interviewees who were currently or recently receiving HMP or Medicaid.

Interview guide and process

The semi-structured interview guide was developed by the Domain IV evaluation team and approved by MDHHS (see Appendix A for the interview guide). Interview domains included: (a) awareness, perceptions and understanding of HMP, its covered benefits and costs, and reasons for not enrolling in the program; (b) health care utilization in the last 12 months and forgone care; (c) impact of insurance status on finances; (d) satisfaction with insurance status; (e) interest in signing up for HMP. The interview guide was pilot tested with 2 individuals and finalized after minor edits to improve clarity. From May to September 2017, trained Domain IV staff conducted 30 in-person, audio-recorded interviews that lasted 30-45 minutes on average. A thank you letter and a \$25 Visa gift card were mailed to participants' homes after the interview to compensate for their time.

Analysis

Audio recordings of the interviews were transcribed verbatim and coded using Dedoose software. Thematic analysis was conducted by two qualitative data analysts. Questions and coding discrepancies were resolved by consensus discussion with the EBU evaluation team leader. 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”.

Results

Interviewee characteristics and reasons for being uninsured

Interviewee characteristics are summarized in Table 1. Fifty-nine percent of those interviewed were under age 35, with the others roughly evenly distributed between 35-50 and 51-64 years of age. The majority of the sample were men (64%) and the majority were white (68%). Most interviewees (72%) were employed; five were unemployed and one was retired. The sample was geographically diverse, representing all major regions of Michigan. When asked how long they have been uninsured, 36% said less than 1 year, 23% said approximately 1 year, 36% said more than 1 year, and 1 interviewee did not report duration of uninsurance. Most of those uninsured less than 1 year had been uninsured for at least 6 months.

Table 1. Interviewee characteristics

Characteristics	n
Age	
19-34	9
35-50	6
51-64	7
Gender	
Male	14
Female	8
Race	
White	15
Black or African American	6
Mixed race	1
Employment status	
Employed	16
Not employed	5
Retired	1
Region	
Thumb	1
Southeast	5
Southwest	1
West	3
Southeast	5
Northwest	1
Central	3
Northeast	2
Upper Peninsula	6
Uninsured duration	
< 1 year	8
Approximately 1 year	5
>1 year *	8
Missing	1

*2 people who had reported being uninsured for >1 year also had VA health care
 All interviewees were uninsured at the time of the interview. Two interviewees, both of whom had been uninsured for at least 2 years, had VA health benefits. Most interviewees reported that

they had been uninsured for one year or less. Most of the rest had been uninsured for more than 2 years.

*[I've had] no health insurance...[for] basically my entire life. (Female, Age 51-64, Marquette County, *VA Benefit)*

I've been uninsured for probably years...I was uninsured as of 2008. (Male, Age 35-50, Clare County)

Since I was 26...so 2 years [uninsured]. (Male, Age 19-34, Newaygo County)

Intersection between employment and insurance status

Interviewees often reported becoming uninsured because they lost, changed, or left a job.

Well, I was working where I could get [health insurance], but they let me go before I got it. (Male, Age 35-50, Detroit)

Well, I took a different job. I drove semi-trucks for a couple of years, and I went to a company that didn't carry insurance. They paid well, but they didn't carry insurance. (Male, Age 35-50, Clare County)

I was working, and then I wasn't working at that job anymore, and I haven't gotten insurance yet. (Female, Age 19-34, Marquette County)

The day I was hospitalized, I left work early. I worked out of the house. I was doing tech support. So I told my supervisor. Hey, I have a 103.5 fever. I'm going to go to the doctor. She said, "Okay. Just keep me updated." The next day, I had my lady friend contact work and explain to them, "He's hospitalized. He'll get a hold of you when he can." I contacted the following day but had to leave a message. I didn't get a hold of anyone, and I believe one more day did the same thing. When I was informed from them that I was going to be let go. So I called and got a hold of someone and explained to them what was going on. Like, "Yes, I understand it's mandatory attendance during training. Unfortunately, I'm hospitalized and hooked up to all sorts of machines and whatnot." They said they would pass all the information up to management, see how it goes. They did and still let me go. (Male, Age 35-50, Iron County)

Most interviewees reported that they were currently employed or self-employed. Roughly half of working interviewees reported part-time employment and half reported full-time employment. Some interviewees described working a combination of two or more part-time, seasonal, and/or full-time jobs. Many interviewees reported that they have been at their job(s) for less than a year.

I have two seasonal jobs and one full-time job. (Male, Age 19-34, Iron County)

I work a lot of part-time. So I guess it equals out to full-time right now. (Female, Age 35-50, Oakland County)

Many employed interviewees reported that their employers offered health insurance. However, most were not eligible for the insurance offered, either because of their part-time status or because they had a waiting period. An interviewee who was offered health insurance through his employer reported that it was too expensive.

I am not eligible...As, you know, someone who is not tenured in the organization and is not working full-time, I'm not eligible to get health insurance yet. (Male, Age 19-34, Detroit)

I wasn't working there enough or I'm not full-time, and they couldn't give me those benefits, I guess. (Male, Age 19-34, Newaygo County)

I have to work for so long to get it. (Male, Age 35-50, Detroit)

After 90 days [will be offered health insurance]. So in another month, I believe. (Female, Age 19-34, Marquette County)

*They did offer health insurance, but it's too expensive...if I...my money goes up, I'd probably look into it, but at this point it's still too expensive. I foresee it in the future ahead a bit. I think it's like \$200/pay right now, and so it would be \$400/month. (Male, Age 51-64, Midland County, *VA Benefit)*

Some interviewees reported that their employers did not offer health insurance, or they were not sure if they would be offered health insurance.

I had insurance through my company, but... We got bought out, and then the new people dropped our insurance. We no longer have it. (Male, Age 35-50, Alpena County)

I'm approximately 37 hours a week. So I think that's technically full-time...I don't know if I will be [offered health insurance]. I did see a piece of paper taped to the paper towel dispenser about some sort of insurance meeting. But that meeting never happened, the date has passed, and that's the only information I've seen or heard about insurance. (Male, Age 35-50, Iron County)

A few self-employed interviewees reported that they have not signed up for insurance due to the cost.

My building that I rent from has been sold. I have to keep my cash liquid and figure out where I'm going to live next...Moving is expensive, and then I'm gonna try and own versus rent. So insurance doesn't even begin to be part of the equation. (Female, Age 51-64, Kent County)

Among the interviewees who were not working, some had recently become unemployed. Most indicated that they were looking for work; one was retired. A few interviewees commented on what they saw as the limited availability of full-time jobs that would provide decent pay and benefits. Similarly, a few beneficiaries described how it was their impression that employers are only looking to hire part-time to avoid having to offer benefits to employees.

There's a lot of unemployment around here, or under-employment. A lot. I mean if you look into the economics of this area, they are not good...There's nobody that wants to hire anybody full-time around here. I mean everybody wants to hire part-time. They don't want to give you any benefits. They don't want to give you any health insurance...if they do offer it, it's so expensive that people, even when you're working, you can't afford it. (Female, Age 51-64, Alpena County)

*I know there are millions of other people in the same boat as I am as far as not having health insurance now; maybe not being covered with health insurance, dental insurance, vision insurance basically their entire life like me. I think a lot of it has to do with the fact that employers just do not want to pay the benefits out, and that's why they just hire part-time, at least around here...So how I'm going to resolve that, it has to be more than just offering healthcare. It has to be like vision, dental, you know, as well...The whole package thing that employers don't offer because they're out to save money, and it's the whole package deal that the person is going after when they're trying to secure a full-time job with full benefits. (Female, Age 51-64, Marquette County, *VA Benefit)*

A few interviewees described how health problems interfered with their ability to work.

I'm withdrawing [money] from my retirement, which, you know, unless I get something from my doctor about the problems that I have, I'm going to pay a penalty for that...for withdrawing it early. So I applied for Social Security Disability...I worked there [her former job] for 17 years and made my situation a lot worse by doing it...By taking care of people, you know, for a living...It was my choice, but around this town, there's very few jobs and it was a good paying job. So I pushed myself to stay there and to keep working, even though I knew I was doing damage, and now...here I am, no insurance. (Female, Age 51-64, Alpena County)

I have recurrent herniated discs, multiple, and that was one of the reasons why I retired... (Male, Age 51-64, Chippewa County)

Because of my health issues, I'm not able to work a full-time job. Even working a part-time job is a strain. (Female, Age 51-64, Kent County)

Non-employment-related reasons for being uninsured

Some interviewees reported non-employment-related reasons for becoming uninsured including dropping their Marketplace plan or other private coverage due to cost, aging out of coverage on a parent's insurance plan, not completing the redetermination process in a prior state of residence, or a change in residence/legal status.

I had just retired in January, and working out the budget... I was part of the Michigan Healthcare Exchange...Obamacare, and I had been on it ever since its inception. It [costs] started to increase every year more and more, and then I had to let them know that I went on Social Security, and they determined how much I would get and how much they would provide through the system, and it was just more than I could afford in my budget. It ate up a good...eighth of the budget. (Male, Age 51-64, Chippewa County)

[Insurance company] charged me twice in one month and because I'm on a fixed income, they tied up my money for the month...and worse, sent my bank account into an overdraft situation, and the girl said, "Well, we can fix it tomorrow." And I said, "That's an overdraft situation. Not only is there not enough money to cover two months' worth in the account that you're charging, there's not enough to pay the extra fees. I'm getting slammed with the overdraft fees. I'm paying for your mistake with the overdraft, and then I'm paying for it with overdraft fees. Ridiculous." So that's it. You can't do that to people...So I canceled it. (Female, Age 51-64, Kent County)

Some interviewees said they explored different options for health insurance but that what they found was too expensive.

I had looked into insurance before, and the price was outrageous. (Female, Age 35-50, Detroit)

The last I looked into any form of Medicaid was in January, and it was unavailable ...Through Healthcare.gov, I was offered different insurance plans, the least expensive of which was just about the same price as my COBRA option after leaving the job, which was around \$500/month...which at the time I couldn't afford. (Male, Age 35-50, Iron County)

It was the Marketplace stuff, and I like looked up what was covered and it didn't really cover anything that I was interested in... because I was interested in vision, dental and mental, and all this stuff didn't cover it enough to make it worth it for me. So I decided just to go without because I wouldn't be able to pay for it anyways. (Female, Age 19-34, Marquette County)

I've gone through a lot of different companies, even with the Affordable Care...It's too expensive through that, too. (Male, Age 35-50, Alpena County)

I've gone into the Marketplace...It was kind of expensive, in my opinion, for a month. (Male, Age 19-34, Kent County)

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

Finding out about the Healthy Michigan Plan

Half of interviewees reported that they had heard about HMP or that it sounded familiar. Some interviewees had not heard of HMP specifically, but they had heard about Medicaid expansion. Interviewees reported hearing about HMP or Medicaid expansion most commonly from friends/people they know and from the news/TV. While many interviewees had heard about HMP, several acknowledged that they didn't know much about it.

*I had heard of it [HMP]...I think it was an advertisement... Yes, it was on TV, local channels, Healthy Michigan. I think they talked about it on the news. (Male, Age 51-64, Midland County, *VA Benefit)*

The name's familiar. I don't know any details about it... (Male, Age 35-50, Iron County)

Yes, I've heard of it [HMP], but I'm not quite sure of... exactly what it is. I've heard of it though...Through friends, probably through the news and stuff. (Male, Age 19-34, Washtenaw County)

I might have heard it, but I never looked into it and know very little about it... (Male, Age 19-34, Tuscola County)

A few interviewees reported learning about HMP through an interaction with MDHHS (e.g., phone call or visit to office).

I was trying to go to the Social Security office and I accidentally went to the Health Human Services and, you know, I thought I read through a pamphlet while I was there, and it said something about a new Medicaid program. I... skimmed through it, and that's the last thing I remember about anything new in Michigan. (Male, Age 19-34, Detroit)

A few interviewees reported hearing about HMP or Medicaid expansion in a medical setting.

I worked in a dental office, and a lot of the people came in and they had the Healthy Michigan Delta Dental plan. So that's where I first started hearing about it. (Female, Age 35-50, Oakland County)

*I got a pamphlet on that [Medicaid expansion] in April when I was at a clinic in [City] to have my teeth cleaned. And I was told I would be eligible for Medicaid, but I haven't applied. (Female, Age 51-64, Marquette County, *VA Benefit)*

A few interviewees suggested making the Healthy Michigan Plan more well known.

I didn't know a whole lot about it before, and I'm not quite sure where to go to learn about it. I guess it just needs to be a more widely known thing is all I would have to say. I guess a lot of people don't know about it. I mean, I don't, and most people I know probably wouldn't know about it either. I know some uninsured people, too. (Male, Age 19-34, Washtenaw County)

For the people that need the Healthy Michigan program or anything, put it out there. Let them know. I can't say advertise, but put something out there... They need to make the program so they have more available and to let people know that they're there. I mean I dealt with health and human services for almost 30 years. I saw a caseworker, adult service aide caseworker for my mom twice a year, and we were on the phone I don't know how many times. She knew I didn't have any insurance. She knew my husband lost his job. She never mentioned it... (Female, Age 51-64, Clare County)

Among the few who were asked if they were interested in finding out more about HMP when they first heard about it, most interviewees reported that they were not interested in finding out more about HMP. Some said they were not interested because they did not need insurance at the time.

Before, I was employed, and so I didn't really have any use for it [HMP]. When I became unemployed, it became more of something to look into, but I never did look into it. (Male, Age 19-34, Washtenaw County)

At the time, no...I just didn't need insurance. (Male, Age 19-34, Iron County)

I had insurance [at the time]. So no. (Female, Age 51-64, Alpena County)

At the time, no. I mean, I am [uninsured] now. I would say I'm more interested now, especially since I'm working in dangerous areas. (Male, Age 35-50, Clare County)

Signing up for HMP

Some interviewees discussed the process of signing up for HMP. Of these, a few interviewees began the process, but ultimately did not sign up.

*It was a pain in the neck really...I called [County] up... They're pretty rude...The County level because I think you had to go through them, or even asking a question...At that point, I was just like "forget it." I mean I was turned off on different levels...My own views towards it also, but just different levels . . .From filling out paperwork to...I did go online. I think I even had something sent to the house. I had paperwork sent there... I must have made an account with them...All I remember is it wasn't a very good experience... (Male, Age 51-64, Midland County, *VA Benefit)*

I thought it was pretty easy online... I remember... It was either that or through the Health Department services that they took care of everything...because it was at a point where I was in between jobs and...When you're in college, you obviously can't get benefits, and I had finally just gotten out of college. So I was going to apply for it, but I ended up backing out, but they had spoken about that there. (Male, Age 19-34, Iron County)

A few interviewees described how they recently applied for HMP but found aspects of the application to be confusing.

I filled out the forms and mailed them in...I mean I had to call a couple of times and ask some questions because, you know, there were a few things I wasn't quite sure about...like I said, the deductions, what you could claim as a deduction. (Female, Age 51-64, Alpena County)

I think it's very confusing. I think they should simplify a lot of the questions. I think they're too vague on what they're asking, and a lot of people just don't know how to answer them. Because I get very frustrated on a lot of those applications... What they are asking because sometimes it just might not apply to you; but if it was worded different, it would apply to you. (Male, Age 35-50, Alpena County)

Knowledge and understanding of HMP covered benefits and costs

While several interviewees reported hearing about HMP, only a few expressed any knowledge of HMP covered benefits and costs.

I know that some people have these plans where they pay... a small amount of money a month for their plan. Like they're paying like \$10/month or something for plans...The people that have the Delta Dental...They're really happy because they can get all their work done, and they can pretty much go where they want to. I know the dental office I'm at now, they actually take it on their side...I heard a lady called yesterday, and she's like, "No, you don't have a co-pay or anything."....So people seem really happy. (Female, Age 35-50, Oakland County)

I think there was definitely a co-pay section in the literature that I picked up. (Male, Age 19-34, Detroit)

... if it's a government subsidized program, it would be a little bit cheaper, I would assume. (Male, Age 19-34, Washtenaw County)

Some interviewees expressed misunderstandings regarding costs, coverage, consequences for failure to pay, and the population eligible for coverage for HMP. Some of these people may have confused HMP with other Medicaid programs or other types of health insurance.

*I haven't heard anything. The only thing I ever remember is that one time, I think, Michigan had a spend-down plan. Anybody could get an insurance, but it was based on your yearly earnings. (Male, Age 51-64, Midland County, *VA Benefit)*

I think it was just some type of registration or, you know, initial paperwork or processing fee and then something annually, if I'm remembering the correct brochure. (Male, Age 19-34, Detroit)

I guess I get it confused a lot with Obamacare and a lot of that insurance... When I first signed up, my income was just high enough to pay way too much and that it wasn't low enough to get it for free. So it really wasn't worth it...It was still going to cost me monthly, an amount that I might as well just pay an emergency room fee if I needed it...It just didn't make sense, the amount of money I'd be paying just to...get the coverage of the insurance, you know...I think that's what the premium is, right? You have to pay so much in, and then they'll start covering? It was upwards of like 2 grand that I would have to pay, and I just don't go to the doctor enough where that didn't make any sense to me...[and, regarding consequences of failure to pay] I could assume it [unpaid bill] would still just hit your credit report every year. I could assume it's still a bill. (Male, Age 19-34, Iron County)

Well, I know some people...Like their coverage has been inactive for not paying. (Female, Age 35-50, Oakland County)

*Well, I know what happens to a person if they don't pay their bills. It's gonna go to collection. They're going to be harassed, and if they value their credit rating, they're gonna want to pay it. (Female, Age 51-64, Marquette County, *VA Benefit)*

The people that are cancer patients have needs beyond what that's set up for. For a young mother with little kids that needs to go to the doctor or see a physician's assistant for colds and fevers and little infections and little, you know, little stitch and knee scrapes...that kind of stuff . . . That kinda is ideal. But for someone who has extreme healthcare needs, it just isn't set up to accommodate that. (Female, Age 51-64, Kent County)

*It covers children. That's a good thing. (Male, Age 51-64, Midland County, *VA Benefit)*

Just that not too many people qualify for it...you have to be pretty much...I mean, those income levels are, to me, like poverty...like one step away from being homeless, it sounds like. (Female, Age 51-64, Alpena County)

When asked about what they heard about how easy or hard it is to get appointments with providers with HMP coverage, two interviewees said they had heard positive things and a couple said they had heard negative things. Again, some may have been referring to Medicaid, in general.

I have heard that a lot of doctors, and especially dentists don't accept it...Medicaid...Doctors just in general, but dentists especially around here...I think the Health Department is the only place around here...that takes that insurance. (Female, Age 51-64, Alpena County)

It'll help you get in a little faster, but I don't know how true that is...I didn't read it straight from the site or anything. It's just from what I heard. (Male, Age 35-50, Alpena County)

When asked about what they heard about HMP encouraging healthy behaviors, a few interviewees reported that they had heard something about it, although their descriptions related to health promotion did not have a clear link to HMP.

*I think I might have seen something on like maybe PBS or something like that that promotes that. I mean I don't know cost for any of them, and I'm sure . . . I would assume that they have all those, but I don't know anything about them or cost. I do remember seeing them promoting health, physical exercise and that...Commercials like that, like "get out there and do this." (Male, Age 51-64, Midland County, *VA Benefit)*

I've seen some of these ads right on the buses. The city buses have ads promoting this lifestyle. (Female, Age 51-64, Kent County)

Reasons for not enrolling in HMP/Medicaid

Interviewees were asked about possible reasons for not signing up for HMP or Medicaid and were able to report more than reason. The most common reasons interviewees gave for not enrolling in HMP or Medicaid were that they did not think they were eligible (in some cases because they had previously been denied Medicaid), they did not want to be on a government program (for some, preferred the sense of self-sufficiency), they perceived themselves to be healthy and/or not in need of medical care, they had negative perceptions about the paperwork or application process, they just did not get around to doing it, and some didn't know about the program or where/how to sign up. When interviewees were asked to identify which of the reasons they had mentioned were the main reason they did not sign up for HMP or Medicaid. The most frequently reported "main reason" was thinking that they were not eligible for the program. No interviewees reported that a specific feature of HMP was the reason they did not sign up.

Didn't think they would be eligible or didn't know about the program

I heard about it, but I didn't really do no research or go on it and stuff like that...Probably because I was denied [Medicaid] too many times. So I probably didn't think I was eligible to get it. So I really didn't do my research to see if I could get it. (Male, Age 35-50, Detroit)

I would say I didn't think I'd qualify. That's mainly the reason because I had been getting student loans, and I've been told that to receive student loan stipends and to take advantage of government help is double dipping...DHS told me it was double-dipping, and they were taking my food stamps because I got student loans. And then, something happened and they didn't, and I think she found out she was wrong. (Male, Age 35-50, Clare County)

I just wasn't aware of it and that I was eligible for it, I would say. I thought it would be for people below their . . . well below their means and struggling families, and I didn't see myself as struggling too much. (Male, Age 19-34, Washtenaw County)

If I would have known it would be available, I would have gotten it or I would have found a way to get something. But I didn't know. I didn't know it existed. (Female, Age 51-64, Clare County)

I just didn't realize that it was applicable or it existed. (Male, Age 51-64, Chippewa County)

I guess just where to sign up for it...that would be one. (Male, Age 19-34, Washtenaw County)

Didn't want to be on a government program / prefer sense of self-sufficiency

*...Part of it was I didn't want to be on Medicaid...I don't know what it would take for me really to go on Medicaid. It was bad enough going and signing up for the VA...It's not the same, but it is help until things settle out...Medicaid to me is...It's government...It's social and I'm not a socialist. I kind of struggle with it a little bit. I think, you know, it's the whole work ethic, it's that. I don't want a handout...I didn't want to be part of a system like that...So it did help me make my decision was what I believe in. I mean I can't blame anybody for that. (Male, Age 51-64, Midland County, *VA Benefit)*

Well, first of all, philosophically, I don't like being on government programs. And secondly, just because of my status...Like I also don't want to depend on the government programs just in case there's a blowback as an immigrant. (Male, Age 19-34, Kent County)

I really don't want to be on government aid. You know? I want to feel like I can depend on myself. Nothing against the government...but I don't need that. (Male, Age 19-34, Newaygo County)

I didn't want to be like a burden to the state... I'm capable of going out and getting it if I need it. You know what I mean? I didn't want to collect on a program that others might need a lot more than I do. (Male, Age 19-34, Iron County)

Perceived themselves to be healthy and/or not in need of medical care

It would probably be my current status of health. I'm pretty, you know, confident with...the precautions I'm taking with my current health, diet, exercise, etc. to kind of preventative... care myself to, you know, avoid any doctors, surgeries, offices, etc. (Male, Age 19-34, Detroit)

...Because I don't think I would need it...I hope I don't need it is the better answer... (Male, Age 19-34, Tuscola County)

*...When I am sick, I go to the VA Clinic in [City] and I see a provider there for free. Maybe that's a reason why I never checked into anything. Basically, I'm healthy. I don't get sick. (Female, Age 51-64, Marquette County, *VA Benefit)*

Negative perceptions about the paperwork or application process

It just seems like a hassle to try to sign up for it. I'm just not familiar with what the process is and all the paperwork and all the things associated with all that...Where to go, who does it, what are the programs, what's available...I don't want all my life under a microscope. That's another one. I don't want them asking me a gazillion friggin' questions...My income, my this, my that. Why do you own this? (Male, Age 51-64, Marquette County)

Did not get around to doing it

I think I just didn't get around to it. I had a lot going on. I lost my job, and I was at another job. And I actually was making enough money at that job, but it was like really, really stressful, and then I had to move. I had to start over. I had a whole change in income. I was in like survival mode. So thinking about looking into that and dealing with the Department of Human Services was the last thing on my mind. (Female, Age 35-50, Oakland County)

Interest in enrolling in HMP

Many interviewees expressed interest in signing up for or learning more about HMP. A few expressed uncertainty about signing up and said it would depend on factors such as their future health or employment status.

It depends. . . I guess I would have to know more about the program before I signed up for it, I guess. (Male, Age 19-34, Tuscola County)

Learning more about it perhaps. Signing up...Probably...Probably not...it may depend on, you know, my future health. (Male, Age 19-34, Detroit)

It's a good option. It depends on how this [job] works out, but it is an option. (Male, Age 19-34, Washtenaw County)

A few interviewees reported that they were not interested in signing up for HMP at the time of the interview. Some attributed their lack of interest to anticipated changes in their personal circumstances, including getting employer-sponsored insurance or plans to move out of Michigan.

Not at this time...Just because I know that I should be getting insurance through my employer soon. (Female, Age 19-34, Marquette County)

*And I'm not going to apply for any Medicaid insurance at the current time because I'm trying to get out of here [Michigan]. (Female, Age 51-64, Marquette County, *VA Benefit)*

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

Perceptions of being uninsured

Most interviewees reported that they were not satisfied with their current insurance status, noting concerns about not getting their health needs addressed, concerns about costs if they do need care, or their desire to get regular preventative care.

No [not satisfied]...Because there are some things I need to take care of. I know I need to, and the longer I wait the more...Maybe when I finally take care of it, it's worse off than what it should be. So, I'm not satisfied at all. (Male, Age 35-50, Detroit)

I'd say, "no, I'm not satisfied being uninsured." What if? If I were to need health services, they are not cheap. I don't have the funding to afford it right now. So, no, I'm not satisfied being uninsured, but I don't know how much I can do about it... (Male, Age 35-50, Iron County)

*I would say "no," because if anything did happen, there is no guarantee that the VA is going to pay if I did have any type of emergency. That's why I'm trying to get out of here, you know, where I can hopefully find a 40-hour a week, full-time job with good wages and full benefits because that's what I want so I can at least retire with a little bit of security knowing that when I'm older and I am retired that I'm gonna have the insurances that you need, in case like when I get older than I am now, in case any health issues arise . . . I won't have to go through, "Oh, well, I can't go to a doctor because I'm sick, but I don't have any insurance" ... (Female, Age 51-64, Marquette County, *VA Benefit)*

I'm not comfortable with not being insured. There's a lot of things I want to do like be able to go for routine checkups to make sure that I'm healthy....I want to enroll in something. (Male, Age 19-34, Kent County)

I was leery about keeping the appointment [with her usual doctor] because I don't have insurance. I don't know how much it's gonna cost to see the doctor. (Female, Age 51-64, Alpena County)

A few interviewees reported mixed feelings about their insurance status, with some noting the perceived financial benefit of not paying for insurance and some noting that they have been or are able to manage without it.

I would prefer to be insured if I had the choice, but when it comes to choosing over economics of not having to pay for it and the ease of not having to worry about it, I choose that since I've been in healthy condition. (Male, Age 19-34, Tuscola County)

I'm somewhere in the middle. You know, having insurance has a certain level of security, but...The cons are, you know, ties up some of the funds. You also have to pay a co-pay. You also are not accepted everywhere. (Male, Age 19-34, Detroit)

I mean I'm doing alright without insurance, but I think it would improve the quality of life if I did have it. (Male, Age 19-34, Grand Traverse County)

Yes and no. Because I do want to get these metal fillings out of my mouth, and that's a big thing. So, I would like to get insurance to do that. I know a lot of places probably won't even do it with Medicaid coverage. So that's an issue...I would just say in conclusion that I . . . It's not a priority to me to get health insurance simply because I know what affects my health, and I know what things I can take naturally to help with that. If there is any elements or any disease, I know what to do for it. (Female, Age 19-34, Berrien County)

A few interviewees reported that they were satisfied with their current insurance status.

I haven't been affected. So, I would just say "yes," [I'm satisfied] only because I haven't had to have anything emergency. So, I would say "yes." I don't think it's smart, but it is what it is. It's not a big deal to me...As long as [I get] my annual checkup . . . I'm not a person that runs to the doctor's office. (Female, Age 35-50, Detroit)

Absolutely [satisfied]...I guess the biggest argument would be, again, the Eastern versus Western culture of medicine...I don't believe in the treatment options getting through hospitals. So, if I had insurance, whether it be used to go to an Eastern medical doctor, that would be a different subject, I guess. If I had it and I could use it in that sense, I probably would, but to me and the options we have set forth now, it just wouldn't get used. (Male, Age 19-34, Iron County)

A few interviewees reported that they would not like to have health insurance.

I might consider it, but I'm a bit skeptical. I'm probably better off the way I am. (Male, Age 19-34, Detroit)

No, not now...I just feel like it's a waste of not just money but peoples' time. I really think it's just a crutch to lean on...I think a lot of people go to doctors just to get scripts anyway...I don't find what the doctors are doing is beneficial. So I don't mind it...Not having insurance at all...As of right now and where it's at, I'm not worried about it...I'm 27, and I know that with my pancreas issue, diabetes is something that comes into effect, you know, in the late forties, but, again, if you keep your health good...As long as you're eating the right things, you're fine. I don't feel like I need it as long as I keep my diet in check. (Male, Age 19-34, Iron County)

Nearly all interviewees, regardless of satisfaction with their insurance status, reported that they would like to have health insurance. A few interviewees noted how having insurance, compared to being uninured, impacts the quality of care that is received.

I do need insurance though. I know I'm getting older. So risk is far greater as you age. So I need to get something definitely... (Male, Age 35-50, Clare County)

I'm trying to get insurance in case . . . Because I've already had issues, and I don't want to have another major catastrophic thing happen to me again and I don't have insurance....I would prefer to actually have it. . . When I whipped out that [insurance company] card when I went to go see [a doctor], it was like carte blanche. It's like having the Gold American Express card . . . It's just they treat you like totally different. (Male, Age 51-64, Marquette County)

I'm gonna say "yes."...Because I know if you have health insurance and something happens to you and you do have to be admitted to the hospital, they gave you a different type of care...Let me give you an example. If I had an emergency and I went to a hospital, I think they're just supposed to put a Band-Aid over it and stabilize you...An uninsured person just has to be stabilized opposed to if I went in and I was insured, I'm gonna tell you exactly what they're gonna do. They're gonna give you every test they can give you. (Female, Age 35-50, Detroit)

A few interviewees described the stigma associated with being uninsured or on Medicaid.

...being down in Detroit...because you don't have insurance or something, you're kind of like...frowned upon... you're the bad guy because you can't afford it. Where up here, it's more like, "Oh, you don't have insurance? Okay." (Male, Age 35-50, Alpena County)

I just know personal people that I dealt with that had health issues, and they didn't have insurance, and I didn't like the treatment that they received. Especially for...single people with no children. They're frowned upon in my opinion... (Female, Age 35-50, Detroit)

I think it has a negative connotation to it...Like, "Oh, you got Medicaid?"...I think they get billed differently...The doctors...They are business people. "Oh, Blue Cross pays more." "Oh, okay, boom." It's like an automatic. "Oh, the government pays less." (Male, Age 51-64, Marquette County)

Not at all [interested in Medicaid]...I've watched people. They go to the chart to determine how much care they're giving that person. Not legal. They don't care...because it told how much they weren't going to get paid. (Female, Age 51-64, Kent County)

Many interviewees expressed that having health insurance was important to them, but they could not find a way to afford it.

I can't fit it [health insurance] into the budget. I've tried. I've worked it out. There's just no money. (Male, Age 51-64, Chippewa County)

I actually wish I could afford like \$400/month premium and this dental plan that I had set up for myself. I wish I could of...I was just like, "Oh, my gosh. I cannot pay for this. I can't afford this." You know, what was I doing? So I canceled all of it. (Male, Age 19-34, Newaygo County)

I just want to be able to afford it [health insurance], either through work or, you know, personally. (Male, Age 19-34, Kent County)

Some interviewees expressed confusion about aspects of health insurance and/or described challenges they had in trying to explore various options for health insurance and the difficulty they had getting information.

I worry about that [costs] for all insurance...I just don't understand the co-pay and all that really. (Male, Age 19-34, Washtenaw County)

I just want it to be as easy as possible to go through the plans and I don't like going on the...When I went to the healthcare savings website, those deductibles...Like if you do have to go to the hospital are so crazy. I mean, I did look at them at one point, and I just...It was like wow...and then, you know, you're like if I did because I did have surgery in the past, and I even called. I had United Healthcare and they said, "Well, you met your deductible," which was like \$1500. So when I...tried to get even a personal plan, it was like, "Well, I had you guys," and they're like, "Well, no, your deductible starts all over again since you're under a whole new plan." I was like, "okay." (Female, Age 35-50, Oakland County)

It just seems like a big pain to try to find out where the source is to find where to buy health insurance. But if someone can explain, "These are the good ones where you can pay," "These are the government ones,"...and then someone can explain to me like the deductibles and all this and that. (Male, Age 51-64, Marquette County)

I know that even before when I was insured, there was some weird things with the insurance, and it was very difficult to try to figure out, and the insurance company was super unhelpful. So it was strange where I was like covered for a month, and then the next month I wasn't covered, but I was technically covered by state taxes sort of thing, but they wouldn't pay for the doctor visits or anything like that...So that was very difficult and trying to call people about insurance has been very difficult for someone that doesn't really know what to do. Because I know that the few times I've tried calling about insurance, it kinda seems like they think that I should know already what I need to do, but I don't know it all and it's kinda difficult to try to express what I need, and I feel like over the phone I especially don't convey what I need, and I kinda forget what questions I need to ask. (Female, Age 19-34, Marquette County)

Impact of being uninsured on finances

Many interviewees discussed the impact of being uninsured on their finances from the perspective that any health insurance was expensive, based on perceptions or experiences with

Marketplace or other commercial plans. Some interviewees thought that being uninsured had a positive impact on their finances. They explained that because they went to the doctor rarely, or only when they really needed to, it was more affordable to pay for care out-of-pocket instead of buying health insurance with its premiums, co-pays and deductibles. Some reported that, with their tight budget, it came down to a decision about paying for health insurance or paying for other necessary expenses, like food.

Being uninsured? It increases my finances. I have more money available for food or anything around the house...Two doctor's visits is far cheaper than paying insurance deductibles and everything. (Male, Age 35-50, Clare County)

If I had insurance and I was paying out of pocket, I wouldn't be able to afford anything else. It definitely wouldn't be able to afford food, I can tell you that... (Male, Age 35-50, Alpena County)

The oddest part about the whole thing is I can negotiate better prices when I don't have money...And I have paid the insurance before. It just left me with nothing, and, you know, one of the things about surviving cancer is that your health is in your gut. Eating clean is so, so, so critical. Eating healthy cancer-friendly foods can run you about \$300/month. And if you're paying the insurance, well, guess what? ...you've gotta kinda rob Peter to pay Paul in a little bit of both. (Female, Age 51-64, Kent County)

*I mean I looked at the Marketplace. I just can't afford it. A \$6,000 deductible plus at that time it was like \$400/month. I'm like, "Well, like \$6 grand I've got to cover plus \$4,800." I'd have to have \$10,000 at the end of the year if I got hurt, I would have had into it. So just roll the dice and be careful, and then anything I can afford, I pay for...[Commenting on the cost of paying out-of-pocket] I had something in my eye. It was like \$85, \$150, another \$85. But that still is less than I would have to pay in monthly premiums. (Male, Age 51-64, Midland County, *VA Benefit)*

It gives me more finances, if anything. I don't pay a monthly fee. I don't have to worry about co-pays. I know I pay \$100 every time I go to an emergency room, and that's that.... I'd rather just keep \$100 in my wallet for that. (Male, Age 19-34, Iron County)

I feel that my insurance status kinda frees up some of my finances, definitely tremendously cuts out the expenses that I would have paid in premiums. (Male, Age 19-34, Detroit)

Some interviewees thought that being uninsured had a negative impact on their finances in addition to affecting their health.

[With insurance] it was always a co-pay of \$5. [Referring to prescriptions] Now I have one that costs \$60/month, one that costs \$40/month...I don't feel I can go without them. I mean I know what happens to me when I go without medication. That's not good....But it's my prescriptions or eat. I just have prescriptions. I come here to get food. That's all there is to it. I have to have them to stay alive. But it's . . . Financially it's killing us. And

my husband...He's even worse. He will not go to a doctor. (Female, Age 51-64, Clare County)

I don't look at it as like saving me money. (Female, Age 35-50, Oakland County)

It's not the best way to go about things. It's better to have insurance...especially in my situation. I would rather have insurance so that if something like this happens...I don't have to pay out of pocket, like a big chunk...I'd rather pay monthly towards my future healthcare so that when the time arises, you know, I'd have a smaller co-pay, like a smaller expenditure at a time. (Male, Age 19-34, Kent County)

Affecting my finances? No, it doesn't affect my finances. It affects my health. (Female, Age 51-64, Kent County)

Some people described medical bills or debt due to health care they received while uninsured. At least one person's debt was incurred while they were insured. Many described avoiding further health care because of concern about their debt.

It's not easy. Even with insurance, you know, \$9,000 is a hefty sum to ask someone to pay, especially considering the fact that my highest year of income was \$28,000, and that's gross, not net. \$9,000 worth of medical debt after insurance, you know, was still almost half of my income, the greatest year of income I've had. (Male, Age 35-50, Iron County)

*There's days my sugar is 400. I should be in the hospital, but I won't go because I don't have any insurance....I won't go. Unless they took me in an ambulance and I was unconscious. With no insurance, I will not go to the hospital. I just can't...I have to make house payments and pay bills and a medical bill which is killing me. So I won't do it. (Female, Age 51-64, Clare County, *ER visit in past 12 months)*

I'm not going to go to the doctor if I have no insurance because I can't afford the bills that they send me. I already have enough medical bills from my past...I think I've racked over like \$35,000 or \$40,000...I can't rack more....Especially now like the hospitals can come after you for the money now, whereas before medical bills didn't go against your credit and everything else....I do have collections after me on stuff....It's really hard. (Male, Age 35-50, Alpena County)

Some noted that they would not be denied care for being uninsured and were not overly concerned about the bills they would receive, at least in the immediate term.

It's a no-win situation with insurance. So that's why people just say, "Piss on it. I'll just go to the ER and be indigent... If they take me, fine, and I'll deal with it when and however it happens. The only thing that I'm worried about is as I get older, I don't want to be a burden to my kids. I don't know what happens with estate things. My sister had to deal with my mom and my dad. The past due bills. I mean, do the kids inherit all that? I don't want my kids inheriting my problems. (Male, Age 51-64, Marquette County)

I know I can still get service. From what I've seen, being uninsured, you don't get denied. You just get billed....So like if I were, say, in an accident, I don't think they'd just wheel me outside and say "too bad" I think they'd still take care of me and then just send me a bill. (Male, Age 35-50, Iron County)

Some interviewees described feeling uncertainty and stress while uninsured because they would not be able to afford care if they were to really need it.

If something health-wise unexpected happens, I might have to shell out a lot of money. And so, it kind of puts me on edge financially." (Male, Age 19-34, Kent County)

Being insured before, you'd have to pay monthly or weekly or whatever payroll was, but it was a small amount. The safety net that it provided was well worth the paying for it. Now you don't have to pay for it, but...It means you're opened up to maybe a possible problem happening, which would be financially devastating if it was a big thing. I don't pay for anything now, but it doesn't mean that down the road it won't come back to bite me. (Male, Age 19-34, Washtenaw County)

Like I said, just another stress that . . . How are you going to get your prescriptions? How are you going to see the doctor? (Female, Age 51-64, Alpena County)

It affects you mentally too. It's like, "Wow. I don't have any insurance. What happens if something happens?" You have car insurance. You have home insurance. Come on. You have to have it. (Male, Age 51-64, Chippewa County)

It's ridiculous, you know, making minimum wage and trying to have a house and a vehicle and maintain. Luckily, I don't need any health services immediately, but the fact that I don't have insurance makes when I do need, or if I do need, you know, that much more stressful. (Male, Age 35-50, Iron County)

Some people mentioned the Affordable Care Act's tax penalty. Some people felt they were forced to pay without getting anything in return; others were unsure if/how the mandate would impact them.

I have to pay the penalty and get nothing. It just doesn't make any sense. (Male, Age 51-64, Marquette County)

I know many people in my circle who are in dire straits as well. A lot of them ignored the healthcare option, and they went ahead and paid the penalty rather than buying insurance because they just couldn't afford it. They couldn't even afford a bronze premium, let alone a silver. (Male, Age 51-64, Chippewa County)

I will say it only affects when I file taxes because of the penalty, but I think I'm under the income limits so that I don't have to pay the penalty. (Female, Age 19-34, Berrien County)

Being uninsured at least gives me a sense of economic stability because it's lowering my monthly bills, but obviously I still have to pay a penalty at the end of the year. So realistically it's not really gaining me much probably, but it's not something that I'm too concerned with at the moment....I'm hoping that eventually I will have a job where there will be a benefit for health insurance so I won't have to pay for it. (Male, Age 19-34, Tuscola County)

*Basically, with the VA when I went in there...I was getting dinged for the penalty on my income because I didn't have health insurance...I was getting dinged on the taxes, and I'm like, "I've got to do [something]..." When I went to the VA, I read that that would cover so you wouldn't get penalized. (Male, Age 51-64, Midland County, *VA Benefit)*

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

Health care needs, utilization, and forgone care

Perceived need for care

Interviewees' perspectives on the impact of being uninsured on their health care was influenced by their perceived need for care. Many reported not needing various types of care, though all interviewees perceived a need for at least one type of care among the eight types of care that we asked them about.

Some interviewees reported not having a need for preventive services in the past 12 months. A few of these interviewees said they did not need preventive services because they were healthy. A few interviewees with health conditions said they did not need preventive services because they knew how to manage their conditions.

I didn't need it. It's that simple. I mean I still feel like I'm 27. There's not much preventing that needs to be done yet, you know? The future scale will come, and I know I'll get insurance eventually, but I'm healthy so...It's just kind of where it's at. (Male, Age 19-34, Iron County)

If I have any issues, I know it's all diet related, especially with my breathing issues. I tend only to have breathing issues when I eat things like gluten or dairy...things like that. So I just try to stay health conscious as far as what I eat, and that makes my health to be a lot better. (Female, Age 19-34, Berrien County)

Nearly half of interviewees reported not having a need for any vision care services in the past 12 months, but a few suggested that cost/lack of insurance would be a barrier to getting these services if they did need them.

I guess right now if I needed vision care, it would be the money...I just wouldn't want to spend the money to see the optometrist, and I wouldn't want to spend money on glasses. (Male, Age 35-50, Clare County)

Many interviewees also reported not needing other types of care in the past 12 months. Most reported not needing substance use services, mental health care services, and medical equipment or supplies. Nearly half reported not needing specialty care and some reported not needing prescriptions medications. Only one interviewee reported that they did not need dental care in the past 12 months.

Health problems

Perceived need for care often was influenced by whether the person had health problems (see Care received section). More than half of interviewees reported that they had one or more health problems. All interviewees who were 51-64 years of age reported one or more health problems. Although only a third of interviewees were in this age group, they made up half of those with health problems.

Among all interviewees with health problems, more than half reported that they were not getting treatment they needed, including preventive and specialty care and prescriptions needed to improve or manage their conditions; nearly all said this was due to cost and/or not having insurance (see Forgone care section).

Regular source of care

Just over half of interviewees reported having a regular source of care (a doctor's office or clinic). Both interviewees with and without a regular source of care went without care at least some of the time (see Forgone care section).

Several people with a regular source of care reported that their doctor's office or clinic provides services for a sliding scale fee.

It's a clinic in [town]...I pay a reduced amount, but I have to prove that I'm on Social Security and give them a copy of the report that they send me that confirms my eligibility, and then I was able to get it at a reduced price. (Male, Age 51-64, Chippewa County)

A few interviewees with a regular source of care also reported visiting an urgent care in the past 12 months.

I had symptoms of a previous infection returning. So, I kinda freaked out and as opposed to calling my old doctor and making an appointment, I went direct to urgent care to get antibiotics. I was in a hurry...I mean, in hindsight, it probably would have been better to wait a few days and go see the doctor. I haven't gotten the bill yet, but I'm assuming that would have been less. (Male, Age 35-50, Iron County)

No regular source of care

Nearly half of interviewees reported not having a regular source of care. A few interviewees without a regular source of care reported visiting an urgent care or emergency room to receive care for an acute condition in the past 12 months.

If I had insurance, I'd probably go get a checkup once in awhile. (Male, Age 19-34, Grand Traverse County)

I've been to the emergency room once. But that's about it [in terms of getting care]. (Male, Age 19-34, Kent County)

A few interviewees without a regular source of care, all between 19-34 years of age, reported that they use the internet to get advice about their health.

I mean, any advice about my health I would just Google stuff. So I don't think that's the best, but that's what I did...I haven't seen a doctor in quite some time. (Male, Age 19-34, Washtenaw County)

No, unless Google counts...Web M.D. has been the number one. (Male, Age 19-34, Iron County)

Forgone care

Most interviewees reported forgoing at least one type of health care service. Nearly all said this was due to cost and/or not having insurance.

Some interviewees reported not getting needed preventive services in the past 12 months.

I went in April [to her usual doctor's office] with no health insurance, and I got a bill for \$523... I'm a brittle diabetic...I should have been to the doctor three times in the last three months to have an A1c done, to have blood work done, but with no health insurance I'm afraid to go anywhere after getting that bill, seeing I can't pay for it so. (Female, Age 51-64, Clare County)

Because I don't have insurance...it's like, "Oh, should I go see my doctor? That's 200 bucks." I go, "Oh, I've got to pay this bill. Should I pay my doctor or should I pay this?" You know, you get stuck in that mindset. (Male, Age 51-64, Marquette County)

Some interviewees expressed concern about not getting preventive services or expressed a desire to receive this type of care.

I'm from West Africa...There was a research, for example, that I read about possibly people from my area being more prone to heart attacks. You know, just like...African-Americans in general. So, you know, I hear various things like that, and I want to be more proactive with my health and try and have checkups, but because I don't have

health insurance, I can't really... Like I feel like it would be too expensive to...do any kind of preventative care. (Male, Age 19-34, Kent County)

*For those 2-1/2 to 3 years that I didn't have health insurance, there's no, "Hey, what's going on," inside me type thing. So, I'm at an age where I'm real concerned. I feel like I'm healthy, but you never know. (Male, Age 51-64, Midland County, *VA Benefit)*

I went faithfully [to the doctor, when insured]. I had a regular doctor that had probably been my doctor 10 years, and I was on a schedule and never varied... I just had a lot of personal issues over the last year, and then I was working so much prior to that that I kinda neglected all those things. But I'm in the process of moving and some financial changes so that I can focus on getting back on track. (Female, Age 35-50, Oakland County)

Nearly half of interviewees described not getting specialty care they needed in the past 12 months.

I have recurrent herniated discs, multiple, and that was one of the reasons why I retired, okay? So that is the biggest issue, and I can't afford a doctor's visit or a shot. That would put me in debt...I would like to be able to call my doctor in [City] and set up an appointment and go in the next series of help that I need for helping the back, but what's putting me off is the money. Alright, it would be \$3,000 or \$4,000 to take care of this problem...now we're past the shots. Now we actually have to have an operation to work on the inside of the vertebrae and get it back. I don't know exactly what needs to be done, but even an MRI is \$1,200 or more. (Male, Age 51-64, Chippewa County)

I have to go to [Cancer Clinic] because there's something wrong with my blood, but I don't have insurance. So I couldn't go. (Female, Age 51-64, Clare County)

When I went to the ER, it was a respiratory issue, some kind of respiratory infection, and I was asked by the doctor to see another doctor, like a specialist, just for checkups and to make sure that it's not worse than he thinks it is, but I ended up not following through because I didn't have health insurance. (Male, Age 19-34, Kent County)

I don't make appointments for routine checkups or anything. All my specialty doctors I haven't followed up with...I probably should. You know, like I have conditions that are going to be with me for life. (Male, Age 35-50, Iron County)

Some interviewees said they had forgone prescription drugs. Some had received the medications when insured but could not afford them without insurance.

I'm not on the prescribed medications, of which one I definitely should be on...And that is all due to not having insurance or the funding....There are two medications I should technically still be on daily that I have not been on in months.... When I was insured, I just had a co-pay. For the both, I believe it was approximately \$45/month. Now full price for the both, it would be over \$200/month. (Male, Age 35-50, Iron County)

The Hep C that I was born with... It's over \$1,000/week for the medication. So, that's all I'm trying to do is get insurance so that I can get that taken care of because...I've been accepted.... with the new treatment, and they said that the genotype that I have allows the new treatment and I should be cured, done and over with, never having it ever again...If I can get insurance to cover it... supraventricular tachycardia. So I've had heart surgery already when I was like 28. So it's like I just really need to get insurance...so I can get this stuff taken care of. If not, I don't feel like I'm going to be living that long. (Male, Age 35-50, Alpena County)

I would say right now I probably do need another inhaler, and the only reason why I haven't gone to get it is because I don't have insurance....And I know it's going to cost \$130." (Female, Age 19-34, Berrien County)

One of them [prescriptions] I can't buy. It's \$486/month. (Female, Age 51-64, Clare County)

There is a huge difference between when I was insured; it was about \$3. When I was insured, it was \$3 to get my script filled. When I was uninsured, it was over \$185....So I quit taking the meds because of the price difference. (Male, Age 19-34, Washtenaw County)

The majority of interviewees reported needing dental care but not getting it in the past 12 months. Some interviewees had looked into the cost of care while others just assumed that it would be too expensive.

If I had that insurance, I would take it off the back burner and do something with it right away. (Female, Age 51-64, Kent County)

No insurance. I mean, that's pretty much my main reason why I haven't done anything is no insurance. I'm not going to go in and pay full price for something I know I can't afford....I mean, if I was to go and get like a cleaning or something, that's only 100 bucks. I'll go and get that done, but as far as like actual dental work and having exams and x-rays and this and that, I can't afford all that. So I just never ask for that service. So most of the time, I just won't even go in and do it. (Male, Age 35-50, Alpena County)

I love my teeth. I love going to the dentist. I had a real good relationship with the dentist. I think it was like prior to not having any healthcare, I was always at the dentist's office. (Male, Age 19-34, Newaygo County)

Some interviewees noted they have untreated dental problems but could not afford the care they needed.

I think I might have a cavity. There's a pain in one tooth when I eat sweets...But without insurance, I won't even walk into a dentist's office...Unless I get a tooth infection or something, I won't bother...[It's] cost, plain and simple....Years ago, I had an infected

tooth and was in extreme pain, didn't have insurance at the time, could afford it anyway...So I went and had that extracted and paid cash...As of now, if that were to happen, I'm not certain what I'd do. I'd probably have to sell a guitar to get it done. (Male, Age 35-50, Iron County)

That tooth broke, but I didn't have any insurance and so I couldn't go. (Female, Age 51-64, Clare County)

I have some cavities that need to be filled, and I don't really want to drop \$700 for a cavity. (Male, Age 19-34, Washtenaw County)

I have neglected my teeth and mouth for various reasons. If I needed a tooth pulled or something like that, you know, it's cheaper to do it yourself...But if I had dental insurance, like I did when I worked at the factory downstate, yeah, I probably would have went and saw a dentist. (Male, Age 35-50, Clare County)

Some expressed concern that even with dental insurance or dental coverage through HMP, they would not be able to access or afford the care they need.

When I was quoted from the treatment the local dentist wants to do, even with insurance I'm not certain I could afford it. (Male, Age 35-50, Iron County)

Being uninsured and cost, while important factors, were not the only reason people did not go to the dentist. Some people mentioned not having time, that it was inconvenient to go, or that they were concerned that it might be painful.

Time. Because actually I would like to get all of the silver fillings out of my mouth . . . all the mercury fillings, but I was pregnant in 2016....So I wanted to wait until I had my baby, and then I was nursing and so I had to wait another 6-8 months, and then just kind of...I didn't even think about it anymore. (Female, Age 19-34, Berrien County)

Money, of course, is the first issue, but the other issue is pain. It's a back tooth. I've had a root canal on this back thing before, and that was more pain than anything I ever could imagine despite being anesthetized.... I know what that pain was, and when the nerve ending tells me I absolutely have to do something about it, I'll do something about it. It's both money and the pain factor. (Female, Age 51-64, Kent County)

Some interviewees did not get needed vision care services. Some reported that cost and/or not having insurance was a barrier to getting these services and a few said they just had not gotten around to it.

Because you would have to pay for the examination, pay for the glasses...You just have to pay out of pocket. If you don't have the money, you can't do it. (Male, Age 51-64, Marquette County)

It [vision care] was pretty expensive without insurance...I looked into everything, and...it was too expensive for me at that point. (Female, Age 19-34, Marquette County)

A few interviewees reported not getting needed mental health care services because they did not have insurance. One interviewee also described how they had difficulty trying to find a mental health care provider. One interviewee reported that cost was a barrier to getting substance use services.

I needed mental health services. If I had had insurance, I would have went...I still do. It's very hard. (Female, Age 51-64, Clare County)

Not having insurance and, around here, not really knowing where I can go...I tried looking it up and figuring things out, but I wasn't really able to. I sent out a few emails to providers, and I never got a response back...I kinda looked up doctors and tried to figure out who might have like a payment program or something, and I kinda just looked a lot into that and picked a few people that I liked, and then I tried emailing their websites and that's about where it ended...I just kinda didn't take care of it and just kinda lived with it sort of thing. (Female, Age 19-34, Marquette County)

Getting health care needs met

Most interviewees had received some type of health care in the past 12 months. Some interviewees said they received preventive services in the past 12 months. A few received these services free or for a small fee. A few interviewees had the services covered by the insurance they had at the time, and two interviewees received the services through their VA health benefit.

For the vitals at the clinic, that was free of cost. But the blood test, I paid a little fee to get that done since I...requested that. (Male, Age 19-34, Detroit)

*Any routine tests...Like I have mammograms and that...and the VA pays. (Female, Age 51-64, Marquette County, *VA Benefit)*

Some people said they received specialty care in the past 12 months, but in most cases, they received this care while insured during that period.

Interviewees who received their prescriptions while uninsured described finding discounts online through websites like GoodRx, Blink Health, or other savings programs offered through pharmacies to reduce their costs while uninsured. Some people said they were able to get free antibiotics or discounts for the drugs they needed from some stores.

You can go to Meijer's and they'll give you your antibiotics...amoxicillin is free. (Female, Age 35-50, Oakland County)

Meijer used to carry this generic program. You buy 30 days' worth of your generic medicine for 10 bucks. They no longer have that. Wal-Mart is the only one in the city that has that program. I go to Wal-Mart, and I get the generic, and I actually get 6

months' worth. I got 180 days' worth because I double up so I don't have to keep going every 3 months. (Female, Age 51-64, Kent County)

Most of the co-pays under my insurance policy allowed me for a \$15 or \$5 co-pay, and so that was never a problem. When I lost my insurance and had to go back, I found that that \$15 one was now \$180, or that \$13 one was now \$243 for the same bill....I went online and [found a program where you prepay for your prescriptions online]...They are a middle man, and so a \$130 prescription out of pocket would only be \$13 or \$14 with this program.I just had four prescriptions filled yesterday. And I saved over \$700 because I added them all up at the end, the drugs that I take, and how much I paid yesterday was \$79. (Male, Age 51-64, Chippewa County)

Some people prioritized getting their prescriptions and paid for them, even when it was unaffordable for them.

I go without just about everything to have my prescriptions. Even when he [her husband] got his unemployment, he said, "Tell her to give you a 3-month supply." I said, "But that's gonna cost \$500." He said, "I don't care." He said, "Get a 3-month supply." (Female, Age 51-64, Clare County)

Some interviewees had received dental care in the past 12 months. Many of those who received dental care described receiving care at a more affordable price or at reduced rates through dental schools, pro bono dental care events, community health centers, free clinics, coupon vouchers (like Groupon) or reductions offered by their dentist.

*Actually, my doctor/dentist knew that I was working 32 hours a week and not making a lot of money. So he gave me reduced rates....Like if it was 100 bucks to have my teeth cleaned. Sometimes I would be charged \$75, and then I was allowed to make payments on it until it was paid off. The same interviewee also noted: They would have free dental there for vet and community-wide for anyone who needed it, and they came from as far as Wisconsin because it would be advertised on TV...They had dentists that came up from Chicago, the southern part of Wisconsin, the lower peninsula. They have it every year. (Female, Age 51-64, Marquette County, *VA Benefit)*

So, I've, you know, just got vouchers [for dental care] every maybe year or 6 months [from] social discount clubs like maybe Amazon Local, Groupon. When there's a special....It tends to be someone always has one every maybe 2 months, and...I look into that. (Male, Age 19-34, Detroit)

Some interviewees described why going to the dentist, even on a fixed budget, was a high priority.

I can't even go to the doctor without like thinking about my budget or whatever. The one thing I religiously do is I go to the dentist and I just pay [the sliding scale fee at the community health center]. (Male, Age 51-64, Marquette County)

I try to stay on top of my dental work...That's how you get sick, if you're not keeping up your dental, you know. (Male, Age 51-64, Marquette County)

Some interviewees who needed vision care services were able to get them by paying out of pocket. A few described ways that they were able to reduce the cost of these services, including using Groupon, waiting until special deals were offered, and ordering glasses online.

*I went and paid for myself. I had my own vision done through Wal-Mart. It was a very good exam...One of the best...I think I walked out of there with an exam. Everything was like \$200...a new set of glasses, no bifocals...with the frames...I was happy. I just need them to see, you know, distance really. (Male, Age 51-64, Midland County, *VA Benefit)*

I go to See Optical when they have specials for a Groupon. They give great deals. (Female, Age 35-50, Detroit)

Most of those who reported needing mental health care services in the past 12 months, were able to get them through a sliding scale fee that they paid out of pocket or insurance they had at the time.

I've had like some counseling service...That was out of pocket. I think I was basically charged based on my income. So I'd pay like \$15 per session. (Male, Age 19-34, Kent County)

My therapist is \$65 a session. So, I mean, it . . . Yeah, I guess it was affordable. She kind of slid her scale...to my budget...She's really good. She charges anywhere between \$60 and \$120. So depending on if you can pay it or not, she works with you very well. (Male, Age 35-50, Alpena County)

A few people described personal connections to medical professionals that provided needed care or that they could call on for advice or help accessing needed services.

I have friends in the medical community that make sure I get certain exams and certain blood tests. (Female, Age 51-64, Kent County)

I just went to my boss and then, like I said, he did it [dental services]. It was something that needed to be done, and we're friends. (Female, Age 35-50, Oakland County)

I have enough people in my family that have medical knowledge. I know people I could easily consult. I have a cousin that's an optometrist. I have an aunt that's a doctor...So the information is available. It's just a matter of reaching out. If it's needed, that's probably what I would do. (Male, Age 35-50, Clare County)

Interviewees described the strategies they use to avoid using or needing health care services. Interviewees most commonly described preventive measures such as exercising, eating

healthy, “being careful/taking it easy”; brushing and flossing teeth; and using home remedies and other alternative care.

I'm not trying to do anything stupid. Not trying to make the back an issue. I do stretching exercises. I take walks with the dog; the dog walks me. Yeah, just try to take it easy and not push the back. Not do any heavy lifting. Protecting it. That's all I can do. (Male, Age 51-64, Chippewa County)

*[Getting dental care] could have been better, but nothing has fallen out, nothing's rotten. I've been flossing. Actually, I started paying more attention...doing more of preventative myself. (Male, Age 51-64, Midland County, *VA Benefit)*

I mean between my wife and I...We look at it more of like...an eastern medicine type of practice...we'll go online to see what we can do naturally first before we go to a pharmacy or a pharmaceutical rep or doctor I guess you'd call them. (Male, Age 19-34, Iron County)

I mean usually if I can't afford something that the doctor, I'll try to figure out another way that I can get it. If it's not the actual brand or item that they particularly use, I maybe try to find something that's an off-brand or something that's cheaper, even something that I can make myself that will fit with it... (Male, Age 35-50, Alpena County)

Emergency room use and decision making

Emergency room use

Some interviewees reported having at least one ER visit in the past 12 months. A few interviewees described how they tried to avoid going to the ER, including by using over-the-counter medication or by seeking care elsewhere first.

It felt really funny and painful in my throat area, and so I had to go check it out. I was trying to deal with it like, you know, just as someone who doesn't have insurance and doesn't want to go to the ER. I think the first few days I tried to use Tylenol...to deal with it, but it felt like it was getting worse, you know, and I felt like my throat was...I could barely talk one morning, and so that was when I knew I had to have somebody look at it. (Male, Age 19-34, Kent County)

Two interviewees, including one who first sought care somewhere other than an ER, were instructed to go to the emergency room by a health care provider due to the severity of their conditions and both were subsequently admitted to the hospital.

A couple months back, I had an infection that I thought was just a small topical...I'll take care of it with antibiotic creams. It turned into sepsis. I was hospitalized, and it was septic MRSA. I almost died. I was on intravenous antibiotics for a month....Originally, I went to the nearest CVS Minute Clinic because I was uninsured and I didn't want a large bill. After about a 45-minute wait, I finally saw the doctor...and explained to her what

was going on...with my fever and the physical feelings and whatnot, and she said, "Get the hell out of here and go to the ER right now. You need IV antibiotics, or you're going to die." Plain and simple. She said, "I'm not going to bill you. I'll put in the system that you had questions."... "But go right now to the ER. I don't care if you have insurance. You're going to die if you don't." (Male, Age 35-50, Iron County)

Though most interviewees were uninsured at the time of their ER visit, only one reported that someone at the hospital spoke with them about signing up for Medicaid. A few interviewees reported that the bill for the services they received was reduced or completely covered (written off) by the hospital, though a couple interviewees expressed some uncertainty about why they did not have to pay, or about what the status of their bill was.

My final bill, because I was uninsured, was \$15,000, and the hospital wrote that off...That was a 9-day stay...Plus all the tests, all the specialists, two follow-up appointments, and that 3 weeks' worth of IV medication and a home health nurse once a week. (Male, Age 35-50, Iron County)

*Not for the service [ambulance] where they came to my house...I didn't have to pay for that for some reason. I think it was just waived or something...I know I didn't have insurance. (Male, Age 19-34, Newaygo County, *ER visit in past 12 months)*

But then they sent me this thing there at the hospital that like . . . "Now because you can't pay this, we can scale it to something else to try to get some money out of you."...Instead of \$25,000, "because you're indigent or whatever, now we want \$5,000."...I don't know if they wrote it off or what. I don't know...It's an outstanding bill, I guess. (Male, Age 51-64, Marquette County)

A few interviewees reported paying for the services they received in the emergency room out-of-pocket and noted that they were still working on paying them off.

It was just a high bill. All those times I went...I didn't pay on the bill, and then I ended up having to just get ahold of the companies myself, and...The bills ended up just going into...default, and that's why I'm paying on them now. (Male, Age 19-34, Newaygo County)

I have like a derogatory mark on my credit because I stepped on a nail when I didn't have any insurance and went to like [Hospital] in [City]...And I got treated for it. Well, I almost died I guess because it was a tract going up into my vein... Well, they saved me, but anyway I had this high bill...Now it's like at \$304. Now I've got it to \$204, but I'm trying to get this down. (Male, Age 19-34, Newaygo County)

Impact of insurance status on ER decision making

Nearly half of interviewees reported that their insurance status does not impact their decisions about going to the emergency room. Of those who said that their insurance status does not impact their decision making, several said they would go, if they needed it, regardless of

whether they were insured or not. A few interviewees said that their decision-making would be based on the severity of their health problem regardless of whether they were insured or not.

I guess my health is the first thing that's important. So, I would have to say that I wouldn't let it affect me at all. I would go to the emergency room to have what needs to be done, and then deal with it afterwards...I'd deal with the repayment and the monies after that. Perhaps talk to the doctors at the hospital and see if they have a plan for people like me; sometimes they do. (Male, Age 51-64, Chippewa County)

If I need to go to the emergency room, I think money is going to be about the last thing on my mind. (Male, Age 19-34, Tuscola County)

*I mean it depends. I don't go for anything, a cough or that...If I had insurance or didn't have insurance, it would be the same. Yeah, if I broke my leg, I'm going, regardless...So whether or not I had insurance doesn't base whether I go. It depends on the situation. (Male, Age 51-64, Midland County, *VA Benefit)*

It depends on the degree of how bad something hurts. That's my main reason of . . . the degree. You know, when they tell you like, "From 0 to 10, how bad do you feel?" The same way if I decide to go or not. (Male, Age 35-50, Detroit)

Some interviewees reported that their insurance status does impact their decisions about going to the emergency room. Of those individuals, some said they would not go to the ER while uninsured and others said that it would depend on the severity of their health problem.

I tend to hesitate if I do need to go. I try to hold off as long as possible if I don't have insurance because I know that's a \$300-\$900 bill that I don't want. It's usually that if I don't have insurance, I won't go. (Female, Age 19-34, Berrien County)

Well, if you have no insurance, you know, you're just creating another bill. I mean unless I was dying, I wouldn't go. (Female, Age 51-64, Alpena County)

In the context of discussing ER use, a few interviewees without a usual source of care described how primary care they avoided due to cost might reduce the need to go to the emergency room.

*If I had insurance, I would probably do more checkups. With the issue that I had with my respiratory, I probably would have gone in earlier, you know, to a doctor and hopefully, you know, I could have avoided the emergency room. (Male, Age 19-34, Kent County, *ER visit in past 12 months, No RSOC)*

Being uninsured, you would only do the things when it was an emergency . . . an absolute emergency... You put it off as long as possible... [If insured] You would be preventative more than...after the problem happened. (Male, Age 19-34, Washtenaw County, No RSOC)