

# Uninsured Adults' Marketplace Knowledge Gaps Persisted in April 2021

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Subsidized health insurance available through federal or state-based Marketplaces can provide an affordable coverage option, including for those who have lost employer-sponsored insurance due to the pandemic. The 2021 American Rescue Plan (ARP) increased Marketplace tax credits for people with incomes below 400 percent of the federal poverty level to cover a larger share of premiums than before and expanded tax credit eligibility to higher-income people. In addition, the Biden administration and many state-based Marketplaces opened pandemic-related special enrollment periods.<sup>1</sup> Although plan selections between February and July 2021 topped 2.5 million, an encouraging development, many who qualify for subsidized coverage could remain uninsured.<sup>2</sup> Research has found uninsured adults are often unaware of Marketplaces and subsidies that make coverage and care more affordable.<sup>3</sup> Difficulties reaching populations with information about the ARP's new affordability provisions could limit their effectiveness. Here, we use data from the Urban Institute's Health Reform Monitoring Survey to assess knowledge gaps among uninsured adults in April 2021 to better identify the subgroups who may benefit from additional enrollment efforts as new funding for outreach is distributed and ARP implementation continues.<sup>4</sup>

## Findings

Fewer than half (48.2 percent) of nonelderly adults uninsured in April 2021 reported having heard a lot or some about the Marketplaces (figure 1), and fewer than a third (32.2 percent) reported having heard a lot or some about subsidies; the remainder of both groups had heard only a little or nothing at all. These shares do not differ significantly from those reported in an earlier Urban Institute survey fielded in September 2020, suggesting that as of April 2021, many uninsured adults still lacked awareness of Marketplaces and especially of available subsidies. In addition, among uninsured adults who were at least somewhat familiar with Marketplaces but had not sought or enrolled in a plan, most reported that the main reason was cost (data not shown), indicating need for broader outreach about affordability provisions even among people aware of Marketplaces.

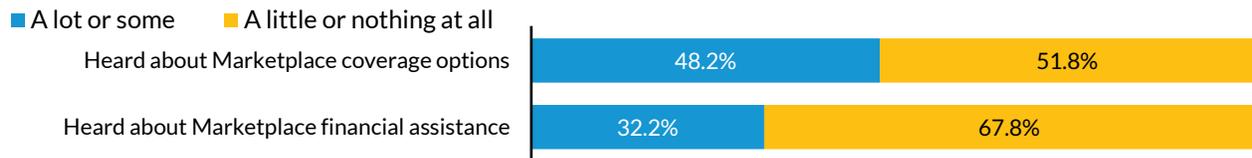
Among uninsured adults who had heard only a little or nothing about Marketplace plans or subsidies, more than half were younger than 35 and nearly half were not working (table 1). More than a quarter were bilingual or Spanish-speaking, more than one in five lacked a high school degree, and more than one in seven lacked home internet access.

## Policy Implications

Without well-targeted outreach and enrollment assistance efforts, uninsured adults' knowledge gaps could keep some from taking advantage of newly expanded enrollment opportunities and subsidies under the ARP. Outreach will need to be multilingual and accessible for people with different levels of education, be available across various platforms (online and offline), and use trusted community members (e.g., community health centers, community colleges, legal aid workers, and employers). Outreach and enrollment efforts should especially be tailored to young adults, who constitute most of the uninsured who have knowledge gaps. Moreover, since many who had little or no awareness were not working at the time of the survey, targeted outreach through unemployment offices could be useful. As federal and state governments prepare for the next open enrollment period, beginning November 1 for the federal Marketplace, it will be important to assess the adequacy and effectiveness of outreach efforts and enrollment support from navigators to help uninsured adults learn about and obtain the coverage they need.

FIGURE 1

**Awareness of Marketplace Health Plans and Financial Assistance among Uninsured Adults Ages 18 to 64, April 2021**



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Source: Health Reform Monitoring Survey, April 2021.

Note: Respondents who were not asked or refused to answer how much they had heard about Marketplace coverage are excluded.

TABLE 1

**Characteristics of Uninsured Adults Ages 18 to 64 Who Had Low Levels of Awareness of Marketplace Health Plans and Financial Assistance, April 2021**

	Adults who had heard “only a little” or “nothing at all” about Marketplace coverage options	Adults who had heard “only a little” or “nothing at all” about Marketplace financial assistance
<b>Age</b>		
18–34	55.1%	53.4%
35–49	28.2%	29.4%
50–64	16.7%	17.2%
<b>Employment status at time of survey</b>		
Not working	49.2%	47.8%
Working	50.7%	52.0%
<b>Educational attainment</b>		
Less than high school degree	21.9%	20.6%
High school degree	43.1%	41.7%
Some college or more	35.0%	37.8%
<b>Language spoken</b>		
Bilingual or Spanish-speaking	29.7%	27.7%
English-speaking only	70.3%	72.3%
<b>Internet access at home</b>		
Yes	83.1%	84.5%
No	16.9%	15.5%
<b>Sample size</b>	<b>385</b>	<b>536</b>

Source: Health Reform Monitoring Survey, April 2021.

Note: Respondents who were not asked or did not report how much they had heard about the Marketplaces are excluded.

<sup>1</sup> Katie Keith, “Healthcare.gov Enrollment Continues to Rise During Special Enrollment Period,” *Health Affairs* blog, <https://www.healthaffairs.org/doi/10.1377/hblog20210407.344843/full/>.

<sup>2</sup> Jessica Banthin, Matthew Buettgens, Michael Simpson, and Robin Wang, “What if the American Rescue Plan’s Enhanced Marketplace Subsidies Were Made Permanent? Estimates for 2022” (Washington, DC: Urban Institute, 2021); *2021 Marketplace Special Enrollment Period Report* (Baltimore: Centers for Medicare & Medicaid Services, 2021).

<sup>3</sup> Jennifer M. Haley and Erik Wengle, “Many Uninsured Adults Have Not Tried to Enroll in Medicaid or Marketplace Coverage” (Washington, DC: Urban Institute, 2021).

<sup>4</sup> Not all uninsured adults qualify for Marketplace subsidies, including those who are ineligible due to immigration status, qualify for Medicaid, have an employer-sponsored insurance offer that is deemed “affordable,” or have incomes above state Medicaid thresholds but below the federal poverty level (the “coverage gap”). Excluding adults who appear to be in the coverage gap would change estimates in figure 1 by about 1 percentage point or less, and estimates in table 1 by about 3 percentage points or less.