STATE OF WISCONSIN
Department of Employee Trust Funds
Robert J. Conlin
SECRETARY

Wisconsin Department
of Employee Trust Funds
PO Box 7931
Madison WI 53707-7931

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Fax 608-267-4549
etf.wi.gov

Correspondence Memorandum

Date: February 28, 2018

To: Group Insurance Board

From: Tara Pray, Member Engagement & Communications Lead
Office of Strategic Health Policy

Subject: Medicare Survey Results

This memo is for informational purposes only. No Board action is required.

Background
To engage members affected by the State Group Health Insurance Program's (GHIP) Medicare offerings, ETF surveyed participants last fall about what is important to them. In addition, ETF wanted this data to inform policy recommendations related to the Medicare program and any potential changes due to the recent Group Medicare Advantage procurement.

A random sample of 1,500 state and local group health insurance program subscribers age 62 and older were asked about their preferences related to Medicare-coordinated benefits administered by ETF.

The survey was developed with assistance from the University of Wisconsin Survey Center and WRS Retirees. The UW Survey Center administered the survey, compiled the responses and reported the combined results.

The key findings are summarized here; the Executive Summary and the full report are attached (Ref. GIB | 3.21.18 | 3 | Attachments C and D).

Key Findings
Detailed summary information can be found in the executive summary (Ref. GIB | 3.21.18 | 3 | Attachment C). The following is a high-level summary compiled by ETF. These are the items that stood out as key considerations for decisions related to the GHIP Medicare program.

Reviewed and approved by Eileen K Mallow, Deputy Director, Office of Strategic Health Policy

Eileen K Mallow *(signature)*   Electronically Signed 3/618

Board	Mtg Date	Item #
GIB	3.21.18	3

1. **Low costs are important**
   a. Most participants indicated a low monthly premium was important; however, those not yet 65 (Medicare eligible age) and those not yet retired responded with a stronger preference for a low premium than those already enrolled in Medicare.
   b. A low monthly premium is more important to those who either pay their premiums directly to a health plan or who are not sure how they will pay their premiums. About 58% said they use their accrued sick leave credits to pay for their health insurance.
   c. About 66% said it is very important that their costs are low when they need medical services and prescription drugs. Those not yet enrolled in Medicare were more likely to say this is extremely or very important.
   d. While about 72% of retired participants have not changed plans since retiring, of those who have considered changing their plan, the primary reason has been for a lower monthly premium.

2. **Open to a Medicare Advantage option**
   a. About 84% said they are willing to explore a Medicare Advantage plan if it had a lower premium than their current plan. Those not using accrued sick leave to pay their premiums are more willing to explore a Medicare Advantage option.
   b. About 78% said they are willing to explore a Medicare Advantage plan if it has nationwide coverage.

3. **Provider network is critical**
   a. More than 85% said it is very important that their current doctors be covered by their health insurance. Women and those living in northern and southern Wisconsin said this is extremely or very important.
   b. About 58% said it is very important that their health insurance includes nationwide coverage. Men and those living outside Wisconsin were more likely to say this is extremely or very important.

4. **Prefer familiar options**
   a. More than 69% said they wanted a health plan name that is familiar or that did not require a health plan change. This is more important to those living in northern and southern Wisconsin.
   b. At least 44% said it is at least somewhat acceptable if all the current health plans (mostly Health Maintenance Organizations or HMOs) were no longer available. Almost 39% said this was not acceptable.
   c. At least 45% said it is at least somewhat acceptable if the It's Your Choice Medicare Plus plan were no longer available. Almost 35% said this was not acceptable.

We were encouraged by the excellent response rate 61% –this demographic of participants is highly engaged and invested in their health benefits. Approximately 83% of the respondents are retired, with an average age of just under 71. Almost 91% live in Wisconsin and 9% live in another state. About 43% were female and about 57% were male.

Each surveyed participant received a packet in the mail. The packet contained a letter explaining the purpose of the survey, a survey (one of two versions, based on whether the participant was enrolled in Medicare) and an insert explaining Medicare general concepts and the differences between the options offered through ETF. Both versions are attached to this memo for reference. The packet for Medicare enrolled participants is Attachment A; the packet for not Medicare-enrolled is Attachment B.

Staff will be at the Board meeting to answer any questions.

Attachment A: Survey Packet for Medicare-Enrolled Participants
Attachment B: Survey Packet for Not Medicare-Enrolled Participants
Attachment C: UW Survey Center P1306: Executive Summary
Attachment D: UW Survey Center P1306: ETF Medicare Options Surveys
            Summary of the combined responses to the two surveys

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November 10, 2017

<Insert Address>
<Line 2>
<Line 3>
<Line 4>

Dear Member,

The Department of Employee Trust Funds and the Group Insurance Board are considering expanding health insurance options for Medicare enrollees in the state's group health insurance program (this also includes participants of the Wisconsin Public Employers (local) program). Do you have a few minutes to participate in this important study? We welcome your opinion and feedback on future choices and changes you would like to see under the program.

Please complete the enclosed survey and return it to the University of Wisconsin Survey Center using the postage-paid envelope provided as soon as possible.

What's this survey all about? We are exploring group Medicare Advantage plans to determine if there are lower-cost benefit options that would be attractive to ETF members. Retirees have told us they would like to have lower cost options available.

Enclosed you will find:
- the survey
- a postage-paid return envelope
- a brief explanation of Medicare and current Medicare plan options under the group health insurance program
- background information (on the back side of this letter)

Thank you very much for taking the time to complete the survey. Your responses to the survey will be kept confidential.

If you have questions, please contact ETF. Be sure to reference the Medicare options study when you call.

We appreciate your time and assistance!

Department of Employee Trust Funds
608-266-3285 • 1-877-533-5020 • etf.wi.gov

Background Information
ETF administers the health insurance plans for employees and retirees of the state of Wisconsin and participating local government employers. These health insurance plans are governed by the Group Insurance Board.

Important Considerations
1. We understand that our retirees value choices. The plan is to add at least one Medicare Advantage option along with other high quality health plan choices in the future to meet your health insurance needs.

2. January 1, 2019 is the soonest any *new* Medicare Advantage options would be available.

3. *Group* Medicare Advantage plans are much different from *individual* Medicare Advantage plans. Group insurance plans are purchased by an organization on behalf of a group, while individual plans are purchased by an individual for his or her self or family, either directly through the insurance company or a broker.

    The benefit of a group plan is that the state can negotiate group Medicare Advantage contracts that provide enhancements not available to enrollees of individual Medicare Advantage plans. For example, a group Medicare Advantage plan offered through the state would not be subject to the prescription drug coverage gap, otherwise known as the "donut hole."

4. Any new Medicare Advantage option will provide comprehensive medical and prescription drug coverage. The plan is to have all Medicare options offered through ETF cover the Medicare Part D coverage gap.

5. There will be no difference in how premiums for any new Medicare Advantage options can be paid. The same options, such as using accumulated sick leave credits, will apply.

6. ETF will use the results of this study to develop future recommendations for Group Insurance Board consideration.

Medicare Options Study

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1. **The first questions ask about your Medicare enrollment status and preferences. See the enclosed insert for descriptions of the different parts of Medicare.**

   Currently, are you enrolled in at least one part of Medicare, such as Medicare Part A?

   ○ Yes ⟶ **Go to question 2**
   ○ No

1a. **Do you plan to enroll in any part of Medicare in the next 3 to 5 years?**

   ○ Yes
   ○ No

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2. **When you became eligible for Medicare, how important were each of the following health plan features to you as you considered your options?**

   How important to you was it that the plan you chose…

	Not at all important	Slightly important	Somewhat important	Very important	Extremely important
a. … had the lowest monthly premium cost?	○	○	○	○	○
b. …covered the doctors you saw at the time?	○	○	○	○	○
c. …included out-of-state or nationwide coverage?	○	○	○	○	○
d. …had the lowest out-of-pocket costs when you need medical services or prescription drugs?	○	○	○	○	○
e. …was familiar, or did not require you to change health plans?	○	○	○	○	○

3. Medicare Advantage plans provide the same coverage as Medicare Parts A and B with some plans offering additional coverage, like vision and dental care. Some Medicare Advantage plans may also offer bundled prescription drug coverage.

Currently, are you enrolled in a Medicare Advantage plan?

○ Yes ⟶ **Go to question 4**
○ No

3a. How willing would you be to explore enrolling in a Medicare Advantage plan if…

	Not at all willing	Slightly willing	Somewhat willing	Very willing	Extremely willing
a. …it has a lower monthly premium than your current plan?	○	○	○	○	○
b. …it requires you to pay some money when you visit your doctor in the form of copayments, but has significantly lower monthly costs?	○	○	○	○	○
c. …it has nationwide coverage?	○	○	○	○	○
d. …it offers "Silver Sneakers," a free fitness program?	○	○	○	○	○
e. …it only requires you to use one card, that covers both your medical and prescription drug benefits?	○	○	○	○	○

4. Next we would like you to think about possible changes to **any** of the Medicare plan options.

If the monthly premiums for all the Medicare plan options were **lower** than they are right now, how acceptable would each of the following changes be to you?

How acceptable would it be if…

	Not at all	Slightly	Somewhat	Very	Extremely
a. …prescription drug coverage was wrapped into your plan, instead of through a pharmacy benefits manager (e.g., Navitus)?	○	○	○	○	○
b. …all the current plans offered under the It's Your Choice Health Plan Medicare were no longer available? For example, today Medicare participants can choose from a variety of Health Maintenance Organizations (HMOs) depending on where they live.	○	○	○	○	○
c. …the It's Your Choice Medicare Plus plan was no longer available?	○	○	○	○	○
d. …there was a possibility of having different Medicare options available than there are now? An example might be a plan option with lower monthly premiums but higher costs for certain services, such as a higher emergency room copayment.	○	○	○	○	○

5. Since you retired from your state or local government position have you ever <u>changed</u> your health plan?

○ Yes

○ No ➝ **Go to question 6**

5a. Which <u>one</u> of the following was your main reason for changing your health plan?

○ For a lower monthly premium

○ For lower costs when you use your insurance

○ For better benefits

○ For better hospital and physician options

○ Because you were dissatisfied with your former plan

○ Because your former plan was no longer available

○ For some other reason ➝ Please tell us: [_____]

If you ever changed your health plan, go to question 7.

6. Since you retired from your state or local government position, have you ever <u>considered</u> <u>changing</u> your health plan?

○ Yes

○ No ➝ **Go to question 7**

6a. Which <u>one</u> of the following was your main reason for considering changing your health plan?

○ For a lower monthly premium

○ For lower costs when you use your insurance

○ For better benefits

○ For better hospital and physician options

○ Because you were dissatisfied with your current plan

○ Because your current plan was no longer available

○ For some other reason ➝ Please tell us: [_____]

7. Which <u>one</u> of the following best describes how you pay for your monthly health insurance premium?

○ You use your accrued sick leave credit account

○ You use your Wisconsin Retirement System annuity payment

○ You pay the health plan directly

○ Some other way ➝ Please tell us: [_____]

○ Not sure

Thank you for completing this survey!
Please place it in the postage-paid envelope provided and return it today.

State of Wisconsin Group Health Insurance Program
Medicare Offerings

Overview

Medicare is the federal health insurance program for people who are age 65 or older, certain younger people with disabilities and people with End-Stage Renal Disease. The insurance is made up of a few parts:

Medicare
Part A
Hospital Care

Covers inpatient hospital stays, care in a skilled nursing facility, hospice care and some home health care.

Typically, you are automatically enrolled.

Medicare
Part B
Doctor Care

Covers routine health care such as medical visits, labs and tests.

You must enroll to obtain benefits. Medicare will mail you information on the process.

Medicare
Part C (Optional)
Medicare Advantage

A health plan that may be offered by a private company or through the group health insurance program. These plans combine Medicare Parts A and B and often include supplemental benefits.

If you choose a Medicare Advantage plan, you enroll in this option *in addition to* Medicare Parts A and B.

Medicare
Part D
Pharmacy Benefit

Pays for your prescription drugs.

Health plans through the group health insurance program include it, so you are automatically enrolled.

Medicare Plan Design Options

The group health insurance program has three It's Your Choice plan design options to supplement Medicare coverage: Health Plan Medicare, Medicare Advantage and Medicare Plus. All options have the same pharmacy benefit and nationwide coverage. Medical benefits are similar but vary by option. On the next page, there is a table to help you compare options. This table does not include all benefits; it shows the key differences between the plan design options.

State of Wisconsin Group Health Insurance Program
Medicare Offerings

	It's Your Choice **Health Plan Medicare**	It's Your Choice **Medicare Advantage**[*]	It's Your Choice **Medicare Plus**
Monthly Payment (Premium) *These are sample premiums for comparison purposes.*	$430 Individual $820 Family with all members enrolled in Medicare Prices may vary by up to $100 based on health plan selected.	$412 Individual $808 Family with all members enrolled in Medicare	$366 Individual $727 Family with all members enrolled in Medicare
Coverage Area *Emergency and urgent care are covered out-of-network for all plans.*	Local, county-based	Nationwide	Worldwide
Administered By	As of plan year 2018: 10 Health Plans	As of plan year 2017: 1 Health Plan, Humana	As of plan year 2018: 1 Health Plan, WEA Trust (formerly WPS)
Coverage Includes Items Not Covered by Medicare	✓ Hearing aids, routine hearing and vision exams, durable medical equipment	✓ Hearing aids, routine hearing and vision exams, durable medical equipment	✗ Only helps pay for items partially covered by Medicare
Skilled Nursing Facilities Covered length of stay	120 Days	120 Days	120 Days Medicare Approved Facility / 30 Days Non-Medicare Approved Facility

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Medicare Options Study

1. **The first questions ask about your thoughts regarding your future Medicare enrollment and preferences. See the enclosed insert for descriptions of the different parts of Medicare.**

   Do you plan to enroll in any part of Medicare in the next 3 to 5 years?

   ○ Yes
   ○ No

2. **When you become eligible for Medicare, how important do you think each of the following health plan features will be to you as you consider your options?**

   How important will it be to you that the plan you choose…

	Not at all important	Slightly important	Somewhat important	Very important	Extremely important
a. … has the lowest monthly premium cost?	○	○	○	○	○
b. …covers the doctors you see at the time?	○	○	○	○	○
c. …includes out-of-state or nationwide coverage?	○	○	○	○	○
d. …has the lowest out-of-pocket costs when you need medical services or prescription drugs?	○	○	○	○	○
e. …is familiar, or does not require you to change health plans?	○	○	○	○	○

3. **Medicare Advantage plans provide the same coverage as Medicare Parts A and B with some plans offering additional coverage, like vision and dental care. Some Medicare Advantage plans may also offer bundled prescription drug coverage.**

   When you begin exploring Medicare options, how willing do you think you would be to consider enrolling in a Medicare Advantage plan if…

	Not at all willing	Slightly willing	Somewhat willing	Very willing	Extremely willing
a. …it had a lower monthly premium than other plans?	○	○	○	○	○
b. …it required you to pay some money when you visit your doctor in the form of copayments, but had significantly lower monthly costs?	○	○	○	○	○
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4. Next we would like you to think about possible changes to <u>any</u> of the Medicare plan options.

If the monthly premiums for all the future Medicare plan options were going to be <u>lower</u> than they are at the time you enroll in Medicare, how acceptable do you think each of the following changes might be to you?

How <u>acceptable</u> would it be if…

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a. …prescription drug coverage was wrapped into your plan, instead of through a pharmacy benefits manager (e.g., Navitus)?	○	○	○	○	○
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5. Which <u>one</u> of the following best describes how you expect to pay for your monthly health insurance premium once you enroll in Medicare?

○ You will use your accrued sick leave credit account
○ You will use your Wisconsin Retirement System annuity payment
○ You will pay the health plan directly
○ Some other way ⟶ Please tell us: [   ]

○ Not sure

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Wisconsin Department of Employee Trust Funds (ETF)
ETF Medicare Surveys Fall 2017

Executive Summary (P1306)   **March 6, 2018**

Introduction

On November 10, 2017, the University of Wisconsin Survey Center began data collection via the mail for two paper surveys about Medicare Options for the Wisconsin Department of Employee Trust Funds (ETF). The sample was randomly selected from the ETF provided file of state and local group health insurance program participants who are age 62 or older (Medicare and non-Medicare eligible). The sample was stratified on whether or not the ETF subscribers where currently participating in Medicare. The goal of the survey was to learn more about participants' preferences related to Medicare-coordinated benefits administered by ETF.

Sample Design

The final sample file for this data collection project was 1,500 randomly selected state and local group health insurance participants (subscribers only, not covered dependents) who were age 62 or older. The sample was stratified on whether or not the participants were currently participating in Medicare. The original file from ETF contained 28,534 participants. This file was stratified into two groups based on whether or not the ETF subscribers where currently participating in Medicare (20,422 enrolled in Medicare and 8,112 who were not). For each stratum the UWSC randomly sampled the subscribers who would be asked to participate in the surveys. The UWSC sampled from each stratum proportionally, that means 1,074 out of 20,422 Medicare enrollees where sampled and 426 out of the 8,112 non-enrollees where sampled for a total of 1,500 sampled participants.

Surveys

Each group of sampled participants received a version of the survey that corresponded to their Medicare enrollment status. For those state and local group health insurance participants who were enrolled in Medicare the survey was a three-page paper survey (ET-4962M), while for those participants who were not yet enrolled in Medicare the survey was a two-page paper survey (ET-4962N). The three-page survey (ET-4962M) on Medicare options had a total of 22 questions.

However, there were skip patterns and so not all 22 questions were to be answered by all respondents. The shortest path through the survey was 14 questions and the longest path was 20 questions. The two-page survey (ET-4962N) had a total of 16 questions that were to be answered by all respondents (there were no skip patterns).

There were three series of questions that were included in both surveys with only very minor differences in wording. The three series of questions included in both surveys included:
- questions about the importance of five health plan features that participants might consider when reviewing their health plan options (questions 2a through 2e),
- questions about how willing participants would be to enrolling in Medicare Advantage plans if the plans included five possible benefits (questions 3a through 3e for ET-4962N and questions 3a_a through 3a_e for ET-4962M);
- and questions about how acceptable participants found four potential changes to the Medicare plan if the changes lead to lower monthly premiums (questions 4a through 4d).

Additionally, question 5 (ET-4926N) and question 7 (ET-4962M) are very similar with the only difference being the time frame – both asked participants how they currently pay for or how they plan to pay for their monthly health insurance premiums.

Contact and Mailing Protocols

The survey design consisted of up to two mailed contacts to ask each sampled participant to provide feedback. The first mailed contact included a cover letter explaining the purpose of the survey along with a copy of the survey corresponding to the Medicare enrollment status, a one page color insert on ETF administered Medicare options, and a postage-paid return envelope. The first contact was mailed to every sampled participant on November 10, 2017. The second contact was only sent to the non-responders to the first contact. It was mailed out on December 1, 2017 and included the same items as the first mailing.

The schedule for mailings was as follows:

Contact & Mailing Date	**Overall**	**Survey for Medicare-Enrolled** (ET-4962M)	**Survey for Not Medicare-Enrolled** (ET-4962N)
1st survey packet (mailed 11/10/17)	1,500	1,074	426
2nd survey packet (mailed 12/1/17)	881	616	265

Collection of completed surveys ended on January 3, 2018.

Response Rates

The response rate reported here is based on the number of completed or partially completed returned paper surveys divided by the total number of sampled participants (n=1,500), minus the number of cases determined to be "non-sample" (n=5). For the purpose of this project, cases were determined to be non-sample only if the sampled participant had died (n=4) or claimed to be ineligible (n=1).

The overall response rate for both surveys combined was 60.7%. The response rate only for those participants enrolled in Medicare (ET-4962M) was 62.0% and the response rate only for those participants not yet enrolled in Medicare (ET-4962N) was 57.4%. Response rates of 62% and 57% for the respective surveys are good high response rates, given the limited mailing of contacts (max of two contacts by mail) and the timing of the mailings (November and December).

The margin of error provides an estimate of how much the results of the sample may differ due to chance when compared to what would have been found if the entire population was interviewed. For the questions that were the same or very similar across both surveys the results below and in the report of survey findings are accurate at the 95% confidence level plus or minus 3.2 percentage points.

Who Responded

Of the 1,500 sampled state and local group health insurance program participants who were age 62 or older, 908 or just under 61% responded by returning their paper survey with at least a few questions answered. Overall, the 908 respondents who returned a paper survey like very much like the entire eligible population (N=28,534). There was a slight over representation of men among the respondents – 57% compared to 54% of all those eligible – but even this falls short of statistical significance.

The average age of the 908 participants who responded was 70.55 years old, compared to the average age of 70.99 for the 1,500 sampled and the average age of 70.79 for all those eligible. Just over 92% of the 908 respondents live in Wisconsin, compared to 92% of the sampled participants and just over 91% of all those eligible. Nearly 56% of respondents lived in the ETF defined South region of Wisconsin, compared to about 58% of all those sampled and 59% of all those eligible.

About 83% of respondents were retired, compared to the 79% of the sample that is retired and just over 80% of all those eligible who are retired. The eligible population was just over 93% employed of the State of Wisconsin and just under 7% being employed by local governments. The responding participants were just over 94% employed by the state and just under 6% by local

governments. For more details on the population, the sample, and the respondents see the Appendix at the end of this document.

Summary of Findings from the Surveys

The following results are from the combined data from both surveys for all sampled participants who completed at least some of the questions and returned their surveys with the case ID attached (n=908).

- 57% of all respondents said they either were using or planned to use their accrued sick leave to play for their monthly health insurance premium and just over 26% said they are using or plan to use their Wisconsin retirement system annuity.

  The only major difference across sub-groups of respondents on this item was between those participants employed by the state (nearly 61% will use accrued sick leave, 25% retirement annuity) and those employed by local governments (only 12% will use accrued sick leave, 50% retirement annuity). Additionally, respondents employed by local governments were nearly three times more likely to say they will pay monthly health insurance premiums directly (20% versus 7% for state employees) and they were roughly four times more likely to respond that they were "not sure" how they would pay for them (16% versus 4% for state employees.)

Below are the results from the questions that asked about the importance of five features that respondents might consider when they make their choices for Medicare options.

- 85% said it was either extremely or very important that the plan covers the doctors they see.
  - Overall 53% said this was extremely important.
  - Respondents who were women and respondents from the North and South ETF regions were more likely to rate this feature as either extremely or very important.

- 69% said it was either extremely or very important that the plan was familiar or did not require them to change health plans.
  - Respondents from the North and South ETF regions were more likely to rate this feature as either extremely or very important (77% and 74% respectively)

- 66% said it was either extremely or very important that the plan had the lowest out-of-pocket costs on needed medical services or prescription drugs
  - Respondents who are not yet enrolled in Medicare were more likely to rate this feature as either extremely or very important (78% versus 63% of those enrolled).

- 58% said it was either extremely or very important that the plan include out-of-state or nationwide coverage.
    - o Respondents who do <u>not</u> live in Wisconsin were significantly more likely to say this feature was extremely or very important (93%).
    - o Men were also more likely to say this feature was extremely or very important 62%, versus 54% for women.

- 48% said it was either extremely or very important that the plan have the lowest monthly premium cost.
    - o Respondents who have not yet enrolled in Medicare rated this feature as significantly more important then respondents currently enrolled in Medicare (60% versus 44%)
    - o Respondents who have not retired rated this feature as significantly more important then those respondents who are retired (57% versus 47%)
    - o Also, respondents who indicated that they would pay for their monthly health insurance premium directly (55%) or who were not sure how they would pay (63%) were significantly more likely to say this feature was extremely or very important.

Respondents were asked about how willing they would be to explore enrolling in a Medicare Advantage plan if that plan had five different features or benefits, if they were not already enrolled in a Medicare Advantage plan. The following shows the percentage of respondents who said they were either extremely or very willing to explore Medicare Advantage plans if the plan…

- 57% …had a lower monthly premium.
    - o Respondents not yet enrolled in Medicare significantly more willing to consider (73% said extremely or very willing), as well as those not retired (65%).
    - o Respondents who do not plan or are <u>not</u> using accrued sick leave or the retirement annuity to pay for monthly health insurance premium were also significantly more willing to explore this option (over 70% extremely or very willing).

- 56% …had nationwide coverage.
    - o Respondents not yet enrolled in Medicare significantly more willing to consider (74% said extremely or very willing), as well as those who do not live in Wisconsin (82%).

- 47% …only requires them to use one card for both medical and prescription drug benefits.
    - o Respondents not yet enrolled in Medicare significantly more willing to consider (61% said extremely or very willing), as well as those not retired (55%).

- 32% …requires copayments, but has significantly lower monthly costs.

- o Respondents not yet enrolled in Medicare significantly more willing to consider (53% said extremely or very willing), as well as those not retired (56%).
  - o Respondents who do not plan or are <u>not</u> using accrued sick leave or the retirement annuity to pay for monthly health insurance premium were also significantly more willing to explore this option (47% or more said extremely or very willing).

- 28% …offered Silver Sneakers, a free fitness program.
  - o The only statistically significant difference between sub-groups of respondents for this item was that between those currently enrolled in Medicare (24%) versus respondents not yet enrolled in Medicare (36%) were more willing to consider if Silver Sneakers is included.

Below are the results from the questions that asked participants about possible change to any of the Medicare plan options. Respondents were asked if the monthly premiums for all Medicare plan options were lower than they are right now, how acceptable each of the four changes would be to them. The changes asked about included; wrapping prescription drug coverage into Medicare plan, if all the current plans under It's Your Choice Health Plan Medicare were no longer available, if the It's Your Choice Medicare Plus plan was no longer available, and having different Medicare options available that there are now (such as lower premiums but higher costs for services and copays).

- 57% of respondents said it was extremely or very acceptable to wrap prescription drug coverage into their Medicare plan.
  - o Respondents who are not currently enrolled in Medicare were significantly more likely to say this was extremely or very acceptable (72%), as well as those respondents who are not retired (70%).
  - o Also, respondents from the North and South ETF regions were more likely to say this was either extremely or very acceptable (65% and 60% respectively).

- 23% of respondents said it was extremely or very acceptable if there was a possibility of having different Medicare options that there are now, such as lower monthly premium but higher costs for services and copays
  - o Just under 23% of all respondents said such a change is not at all acceptable.
  - o There were statistically significant differences between sub-groups for those currently enrolled in Medicare, 26% said this change was not at all acceptable, while only 13% of those not yet enrolled in Medicare said this change was not at all acceptable. The same pattern was found when looking at retirement status -- 25% of retired respondents said this change was not at all acceptable, while 12% of still working respondents said this change was not at all acceptable.

- o Respondents who indicated they use their retirement annuity to pay for monthly health insurance premiums were significantly more likely to say that this change was not at all acceptable (35%)

- 19% of respondents said it was extremely or very acceptable if the It's Your Choice Medicare Plus plan was no longer available.
  - o Just over 36% of all respondents said such a change is not at all acceptable.
  - o The only statistically significant differences across any of the sub-groups of respondents reviewed was that respondents who are retired were split, 20% said this change was either extremely or very acceptable, while just over 37% said this was not at all acceptable. Those respondents who are not retired were more likely to say this change was either slightly (26%) or somewhat acceptable (32%).

- 18% of respondents said it was extremely or very acceptable if all the current plans offered under the It's Your Choice Health Plan Medicare were no longer available.
  - o Just under 39% of all respondents said such a change is not at all acceptable.
  - o There were not statistically significant differences across any of the sub-groups of respondents reviewed for how acceptable this change might be.

Appendix

Comparison of Eligible Subscribers (Population), Randomly Sampled Subscribers (Sample), and Respondents to the Surveys (Respondents)

	Population		Sample		Respondents	
	N	%	N	%	N	%
State of mailing address						
Wisconsin	26,097	91.5%	1,381	92.1%	838	92.3%
Another State	2,421	8.5%	119	7.9%	70	7.7%
International	16	<0.01%	0	0%	n/a	n/a
If in Wisconsin, ETF Region						
North	1,478	5.7%	87	6.3%	52	6.2%
South	15,393	59.0%	805	58.3%	468	55.8%
West	2,913	11.2%	154	11.2%	95	11.3%
East	6,313	24.2%	335	24.3%	223	26.6%
Gender						
Female	13,200	46.3%	670	44.7%	391	43.1%
Male	15,334	53.7%	830	55.3%	517	56.9%
Employment Status						
Employee	5,658	19.8%	318	21.2%	152	16.7%
Retiree	22,876	80.2%	1182	78.8%	756	83.3%
Employer						
State	26,569	93.1%	1,399	93.3%	855	94.2%
Local	1,965	6.9%	101	6.7%	53	5.8%
Medicare indicator						
Yes	20,422	71.6%	1,074	71.6%	664	73.1%
No	8,112	28.4%	426	28.4%	244	26.9%
Age						
Range		62 to 106		62 to 102		62 to 96
Mean		70.79		70.99		70.55
Median		69		69		69

UWSC

UNIVERSITY of WISCONSIN

SURVEY CENTER

**P1306: ETF Medicare Options Surveys
Summary of the combined responses to the two surveys
March 6, 2018**

**Prepared by:
Chad Kniss, Senior Project Director UWSC**

The following are the results from the combined data set for both ETF Medicare Options Surveys – ET-4962M and ET-4962N.   Where the same or very similar questions where on both surveys that is noted.   It is also noted when a question only appeared on one of the surveys.   All the responses to all the questions are included. Additionally for the three question series – Q2a through Q2e, Q3a.a/Q3a through Q3a.e/Q3e, and Q4a through Q4d – the UWSC ran cross tabs to see if there were any statistically significant difference in the answers between various sub-groups of respondents (those are noted in the following pages).

The table below provides a very basic snap shot of the demographics of those ETF subscribers who responded to the survey request (see the column Respondents). The table also shows how the respondents compare to all 1,500 randomly sampled subscribers and to the entire population of subscribers from which the sample was drawn.

Comparison of Eligible Subscribers (Population), Randomly Sampled Subscribers (Sample), and Respondents to the Surveys (Respondents)

	Population		Sample		Respondents	
	N	%	N	%	N	%
State of mailing address						
Wisconsin	26,097	91.5%	1,381	92.1%	838	92.3%
Another State	2,421	8.5%	119	7.9%	70	7.7%
International	16	<0.01%	0	0%	n/a	n/a
If in Wisconsin, ETF Region						
North	1,478	5.7%	87	6.3%	52	6.2%
South	15,393	59.0%	805	58.3%	468	55.8%
West	2,913	11.2%	154	11.2%	95	11.3%
East	6,313	24.2%	335	24.3%	223	26.6%
Gender						
Female	13,200	46.3%	670	44.7%	391	43.1%
Male	15,334	53.7%	830	55.3%	517	56.9%
Employment Status						
Employee	5,658	19.8%	318	21.2%	152	16.7%
Retiree	22,876	80.2%	1182	78.8%	756	83.3%
Employer						
State	26,569	93.1%	1,399	93.3%	855	94.2%
Local	1,965	6.9%	101	6.7%	53	5.8%
Medicare indicator						
Yes	20,422	71.6%	1,074	71.6%	664	73.1%
No	8,112	28.4%	426	28.4%	244	26.9%
Age						
Range		62 to 106		62 to 102		62 to 96
Mean		70.79		70.99		70.55
Median		69		69		69

The results below are only from the respondents to the questionnaire (ET-4962M) sent to those subscribers listed as enrolled in Medicare from the ETF sample file.

(ET-4962M only) Currently enrolled in at least one part of Medicare

0.30% No

2.25% BLANK

97.45% Yes
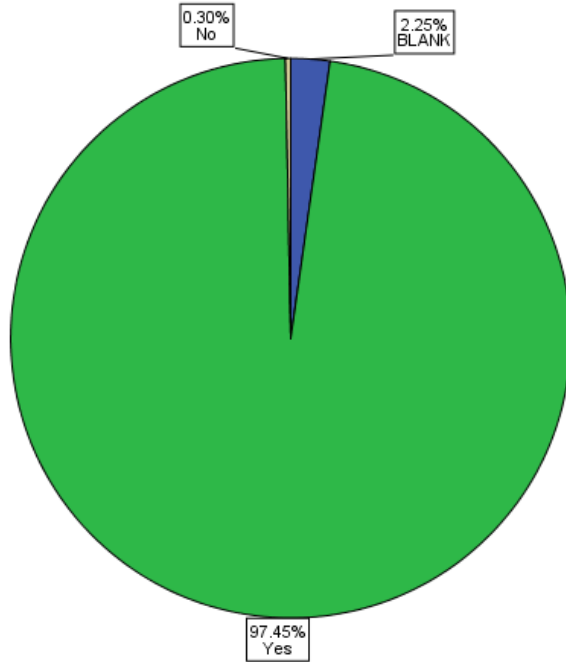
Q1 (ET-4962M) currently enrolled in at least one part of Medicare

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	BLANK	15	1.7	2.3	2.3
	Yes	647	71.3	97.4	99.7
	No	2	.2	.3	100.0
	Total	664	73.1	100.0	
Missing	System	244	26.9		
Total		908	100.0		

The results below are from the respondents to both questionnaires.   For subscribers who sent the longer survey (ET-4962M) only those who answered "no" to Q1 above should have answered Q1a below. All of the respondents who received the shorter survey (ET-4962N) should have answered Q1a below.

(ET-4962M only) Plan to enroll in any part of Medicare in the next 3 to 5 years, if not already

| 1.91% No |
| 7.63% BLANK |
| 90.46% Yes |
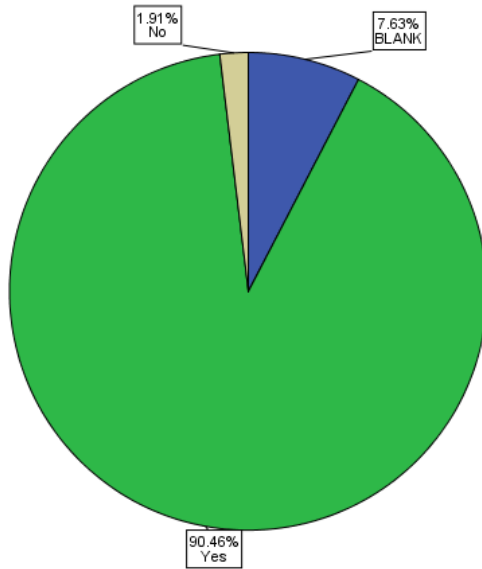
Q1a (ET-4962M) / Q1 (ET-4962N) plan to enroll in any part of Medicare in the next 3 to 5 years

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	BLANK	20	2.2	7.7	7.7
	Yes	236	26.0	90.4	98.1
	No	5	.6	1.9	100.0
	Total	261	28.7	100.0	
Missing	System	647	71.3		
Total		908	100.0		

Below are the overall results from respondents to both surveys to question 2a.

Importance that plan has the lowest monthly premium cost

5.36%
Not at all important

20.56%
Extremely important

13.30%
Slightly important

27.93%
Very Important

32.85%
Somewhat important
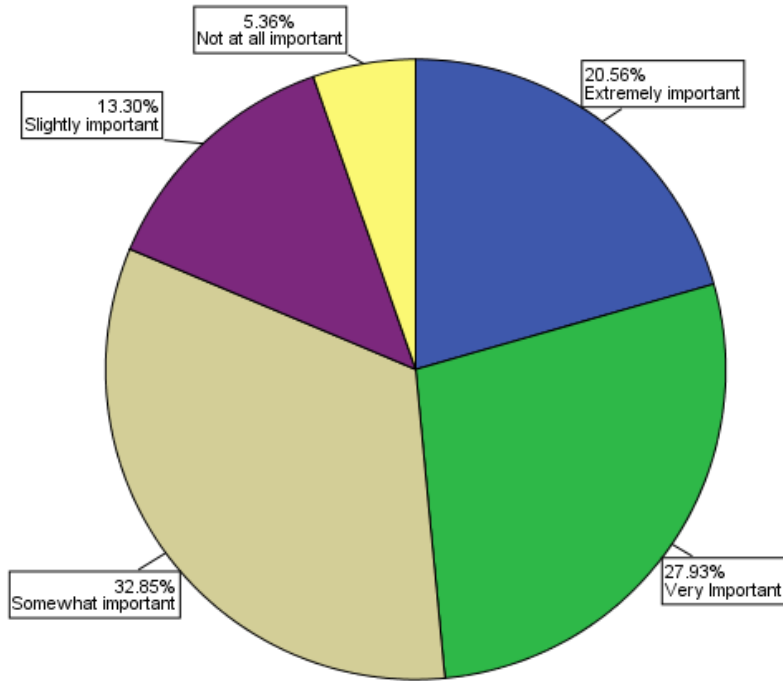
Q2a. importance that plan has the lowest monthly premium cost

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Extremely important	183	20.2	20.5	20.5
	Very Important	248	27.3	27.8	48.4
	Somewhat important	294	32.4	33.0	81.4
	Slightly important	118	13.0	13.2	94.6
	Not at all important	48	5.3	5.4	100.0
	Total	891	98.1	100.0	
Missing	DON'T KNOW	1	.1		
	BLANK	16	1.8		
	Total	17	1.9		
Total		908	100.0		

The UWSC ran crosstabs on Q2a by the following sub-groupings of respondents; Medicare enrollment status, retirement status, state or local employer, respondent's sex, the ETF defined regions of WI (including those living outside of WI), and by the respondents answers to how they either are paying or plan to play for the monthly health insurance premiums.

There were statistically significant differences across sub-groups based on the respondent's Medicare enrollment status, their retirement status, and the ETF defined regions of WI. There were not any statistically significant differences across sub-groups based on the respondent's sex, their employer (state versus local), and how they are or intend to pay for their health insurance premiums. The results of those cross-tabulations are on the following pages.

For the information provided in the following tables the UWSC presents both the Pearson's Chi-square and the p value. Most survey analysis uses the standard measure of statistical significance of any p value between 0.05 and 0.00. The closer to 0.00 the more likely it is that the reported results are not due to chance alone. A p value of 0.05 means that there is a 5% chance that the difference is due to change and a p value of 0.01 means that there is a 1% chance that the difference reported is due to chance.

Below are the response to Q2a by whether or not the respondent is enrolled in Medicare by the ETF sample file designation. The difference between the two sub-groups is statistically significant $p < 0.01$ (Pearson Chi-Square is 22.895).
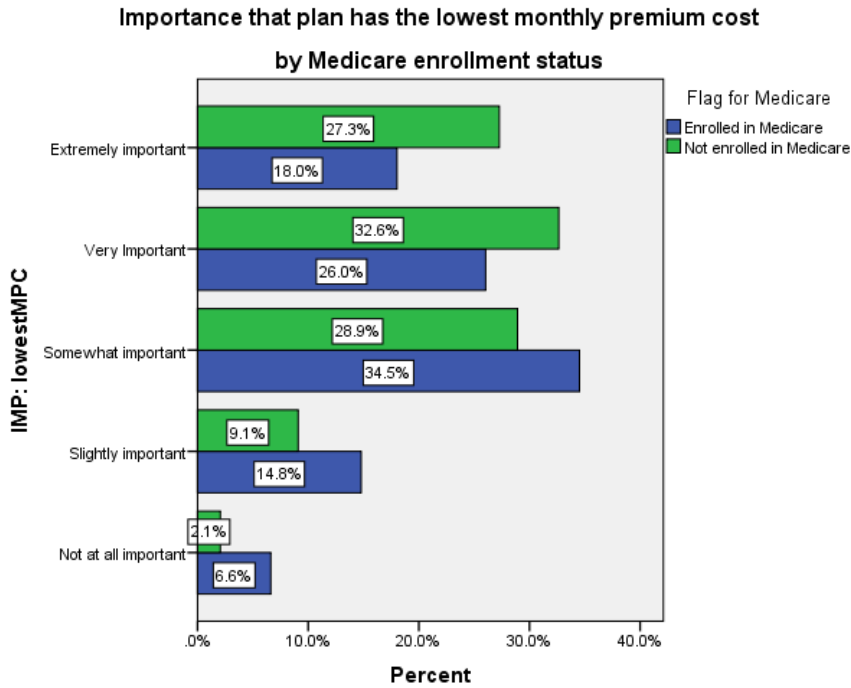
Importance that plan has the lowest monthly premium cost by Medicare enrollment status

			Flag for Medicare		
			Enrolled in Medicare	Not enrolled in Medicare	Total
IMP: lowestMPC	Extremely important	Count	117	66	183
		% within Flag for Medicare	18.0%	27.3%	20.5%
	Very Important	Count	169	79	248
		% within Flag for Medicare	26.0%	32.6%	27.8%
	Somewhat important	Count	224	70	294
		% within Flag for Medicare	34.5%	28.9%	33.0%
	Slightly important	Count	96	22	118
		% within Flag for Medicare	14.8%	9.1%	13.2%
	Not at all important	Count	43	5	48
		% within Flag for Medicare	6.6%	2.1%	5.4%
Total		Count	649	242	891
		% within Flag for Medicare	100.0%	100.0%	100.0%

Below are the response to Q2a by whether or not the respondent is retired based on the ETF sample file designation.   The difference between the two sub-groups is statistically significant $p = 0.017$ (Pearson Chi-Square is 12.102).

Importance that plan has the lowest monthly premium cost by retirement status
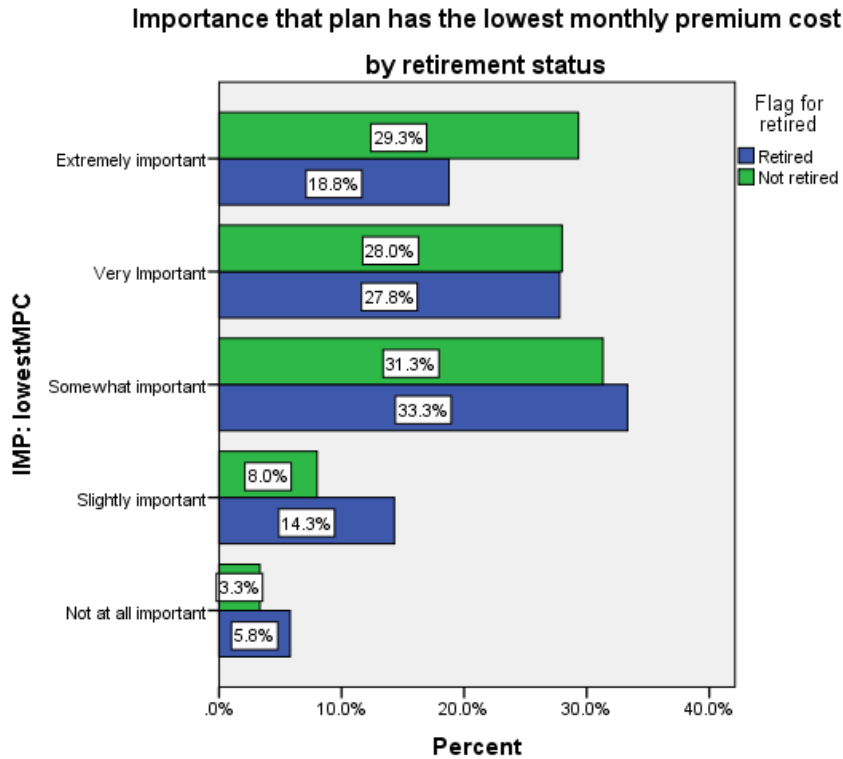
			Flag for retired		
			Retired	Not retired	Total
IMP: lowestMPC	Extremely important	Count	139	44	183
		% within Flag for retired	18.8%	29.3%	20.5%
	Very Important	Count	206	42	248
		% within Flag for retired	27.8%	28.0%	27.8%
	Somewhat important	Count	247	47	294
		% within Flag for retired	33.3%	31.3%	33.0%
	Slightly important	Count	106	12	118
		% within Flag for retired	14.3%	8.0%	13.2%
	Not at all important	Count	43	5	48
		% within Flag for retired	5.8%	3.3%	5.4%
Total		Count	741	150	891
		% within Flag for retired	100.0%	100.0%	100.0%

Below are the response to Q2a by the whether the respondent is/was an employee of state or local government based on the ETF sample file designation.   The difference between the two sub-groups is <u>not</u> statistically significant $p > 0.05$ (Pearson Chi-Square is 8.172).

Importance that plan has the lowest monthly premium cost
by respondent's employer
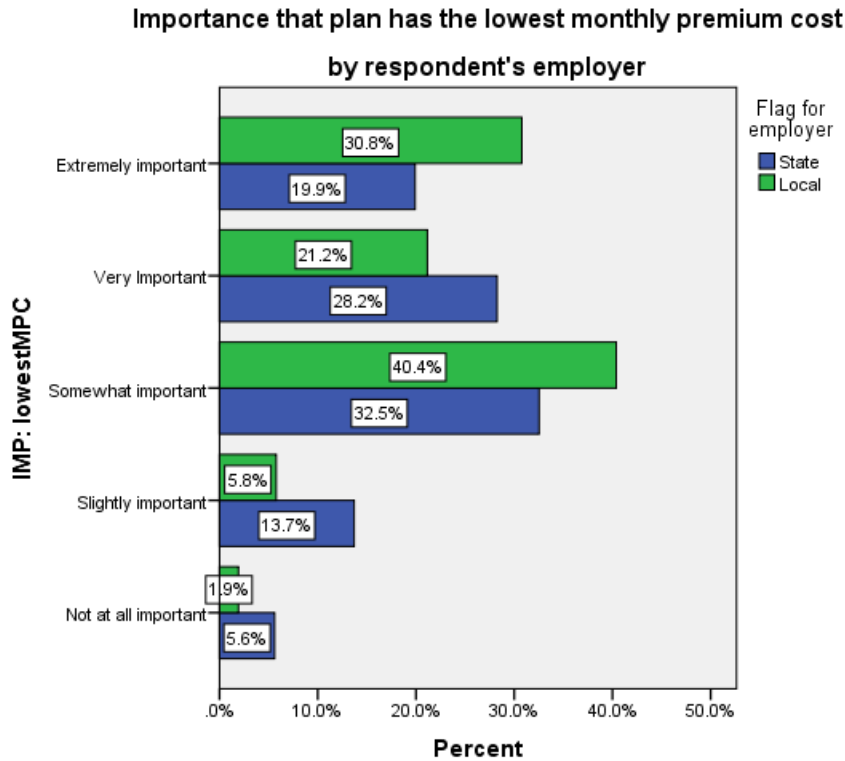
			Flag for employer		
			State	Local	Total
IMP: lowestMPC	Extremely important	Count	167	16	183
		% within Flag for employer	19.9%	30.8%	20.5%
	Very Important	Count	237	11	248
		% within Flag for employer	28.2%	21.2%	27.8%
	Somewhat important	Count	273	21	294
		% within Flag for employer	32.5%	40.4%	33.0%
	Slightly important	Count	115	3	118
		% within Flag for employer	13.7%	5.8%	13.2%
	Not at all important	Count	47	1	48
		% within Flag for employer	5.6%	1.9%	5.4%
Total		Count	839	52	891
		% within Flag for employer	100.0%	100.0%	100.0%

Below are the response to Q2a by the respondent's sex based on the ETF sample file designation. The difference between the two sub-groups is not statistically significant $p > 0.05$ (Pearson Chi-Square is 1.217).

Importance that plan has the lowest monthly premium cost by respondent's sex
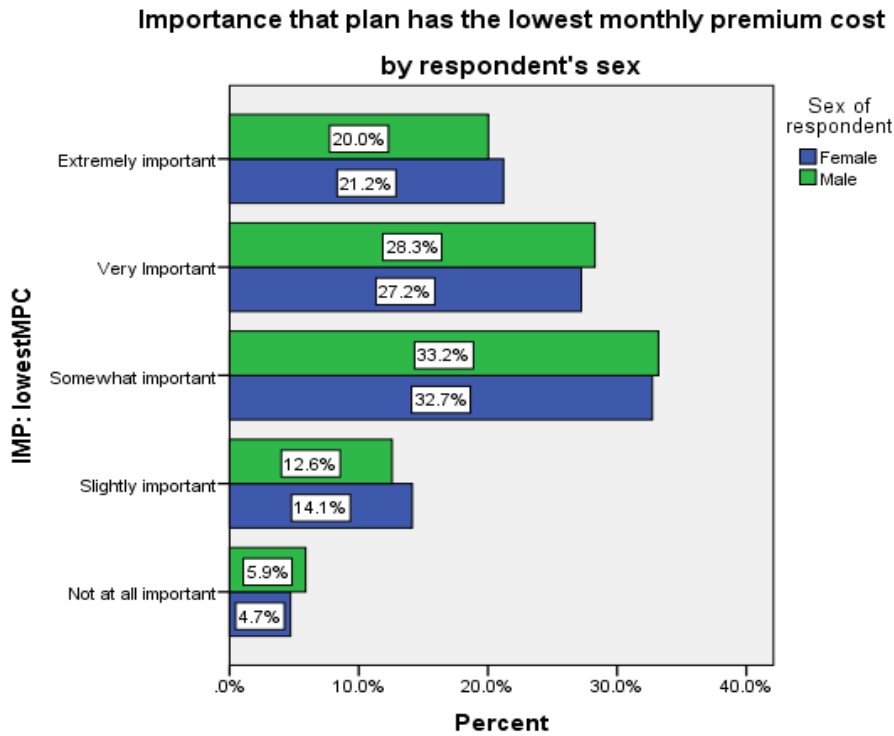
			Sex of respondent		Total
			Female	Male	
IMP: lowestMPC	Extremely important	Count	81	102	183
		% within Sex of respondent	21.2%	20.0%	20.5%
	Very Important	Count	104	144	248
		% within Sex of respondent	27.2%	28.3%	27.8%
	Somewhat important	Count	125	169	294
		% within Sex of respondent	32.7%	33.2%	33.0%
	Slightly important	Count	54	64	118
		% within Sex of respondent	14.1%	12.6%	13.2%
	Not at all important	Count	18	30	48
		% within Sex of respondent	4.7%	5.9%	5.4%
Total		Count	382	509	891
		% within Sex of respondent	100.0%	100.0%	100.0%

Below are the response to Q2a by grouping respondents based on the region of the state they live in based on the address in ETF sample file designation.   The difference between the sub-groups is statistically significant $p = 0.047$ (Pearson Chi-Square is 26.554).

Importance that plan has the lowest monthly premium cost
by ETF defined regions of Wisconsin
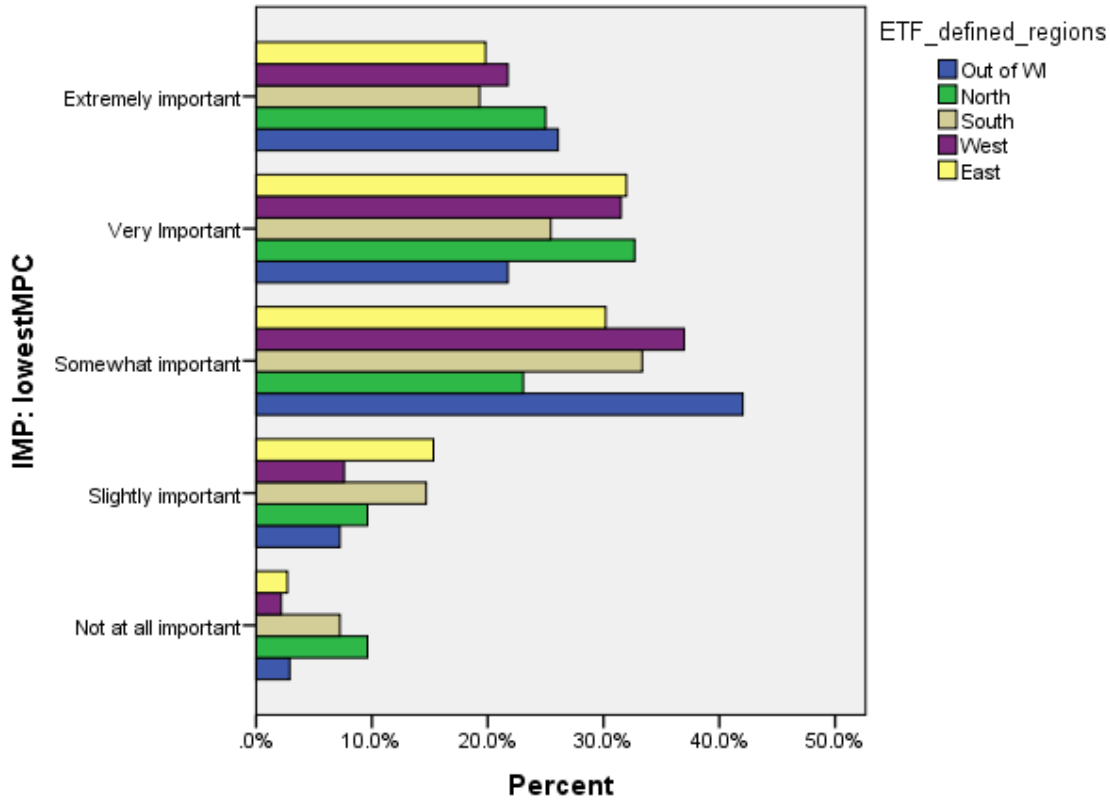
Crosstab

			ETF_defined_regions					
			Out of WI	North	South	West	East	Total
IMP: lowestMPC	Extremely important	Count	18	13	88	20	44	183
		% within ETF_defined_regions	26.1%	25.0%	19.3%	21.7%	19.8%	20.5%
	Very Important	Count	15	17	116	29	71	248
		% within ETF_defined_regions	21.7%	32.7%	25.4%	31.5%	32.0%	27.8%
	Somewhat important	Count	29	12	152	34	67	294
		% within ETF_defined_regions	42.0%	23.1%	33.3%	37.0%	30.2%	33.0%
	Slightly important	Count	5	5	67	7	34	118
		% within ETF_defined_regions	7.2%	9.6%	14.7%	7.6%	15.3%	13.2%
	Not at all important	Count	2	5	33	2	6	48
		% within ETF_defined_regions	2.9%	9.6%	7.2%	2.2%	2.7%	5.4%
Total		Count	69	52	456	92	222	891
		% within ETF_defined_regions	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Below are the response to Q2a by how the respondents reported that they either are currently paying for or plan on paying for their monthly health insurance premiums (Q7/Q5).
The differences between the sub-groups are <u>not</u> statistically significant $p > 0.05$ (Pearson Chi-Square is 13.000).

Importance that plan has the lowest monthly premium cost by payment method

Crosstab

			payforMHIP					
			You will use your accrued sick leave credit account	You will use your Wisconsin retirement system annuity payment	You will pay the health plan directly	Some other way. Please tell us:	Not sure	Total
IMP: lowestMPC	Extremely important	Count	95	48	16	8	11	178
		% within payforMHIP	18.6%	20.6%	23.9%	29.6%	26.8%	20.3%
	Very Important	Count	133	70	21	8	15	247
		% within payforMHIP	26.0%	30.0%	31.3%	29.6%	36.6%	28.1%
	Somewhat important	Count	181	72	17	9	11	290
		% within payforMHIP	35.4%	30.9%	25.4%	33.3%	26.8%	33.0%
	Slightly important	Count	73	30	10	1	3	117
		% within payforMHIP	14.3%	12.9%	14.9%	3.7%	7.3%	13.3%
	Not at all important	Count	29	13	3	1	1	47
		% within payforMHIP	5.7%	5.6%	4.5%	3.7%	2.4%	5.3%
Total		Count	511	233	67	27	41	879
		% within payforMHIP	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Below are the overall results from respondents to both surveys for question 2b.

Importance that plan covers the doctors you see

1.77%
Not at all important

2.32%
Slightly important

10.29%
Somewhat important

53.65%
Extremely important

31.97%
Very Important
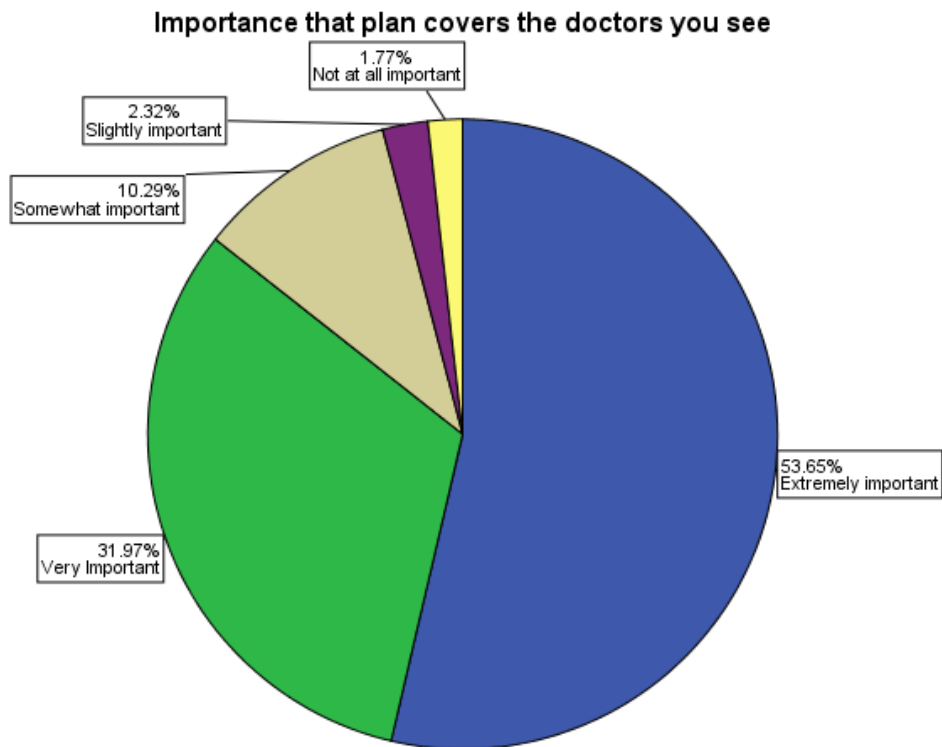
Q2b. importance that plan covers the doctors you see

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Extremely important	482	53.1	53.6	53.6
	Very Important	288	31.7	32.0	85.6
	Somewhat important	93	10.2	10.3	95.9
	Slightly important	21	2.3	2.3	98.2
	Not at all important	16	1.8	1.8	100.0
	Total	900	99.1	100.0	
Missing	DON'T KNOW	1	.1		
	BLANK	7	.8		
	Total	8	.9		
Total		908	100.0		

The UWSC ran crosstabs on Q2b by the following sub-groupings of respondents; Medicare

enrollment status, retirement status, state or local employer, respondent's sex, and the ETF defined regions of WI (including those living outside of WI).

There were statistically significant differences across sub-groups for each of the following sub-groups respondent's sex and the ETF defined regions of WI. The results of those cross-tabulations are on the following pages.

Below are the response to Q2b by whether or not the respondent is enrolled in Medicare by the ETF sample file designation. The difference between the two sub-groups is not statistically significant $p > 0.05$ (Pearson Chi-Square is 7.888).

Importance that plan covers the doctors you see
by Medicare enrollment status

			Flag for Medicare		
			Enrolled in Medicare	Not enrolled in Medicare	Total
IMP: coversdocs	Extremely important	Count	355	127	482
		% within Flag for Medicare	54.0%	52.3%	53.6%
	Very Important	Count	202	86	288
		% within Flag for Medicare	30.7%	35.4%	32.0%
	Somewhat important	Count	70	23	93
		% within Flag for Medicare	10.7%	9.5%	10.3%
	Slightly important	Count	14	7	21
		% within Flag for Medicare	2.1%	2.9%	2.3%
	Not at all important	Count	16	0	16
		% within Flag for Medicare	2.4%	0.0%	1.8%
Total		Count	657	243	900
		% within Flag for Medicare	100.0%	100.0%	100.0%

Below are the responses to Q2b by whether or not the respondent is retired based on the ETF sample file designation.   The difference between the two sub-groups is <u>not</u> statistically significant $p > 0.05$ (Pearson Chi-Square is 5.603).

Importance that plan covers the doctors you see
by retirement status
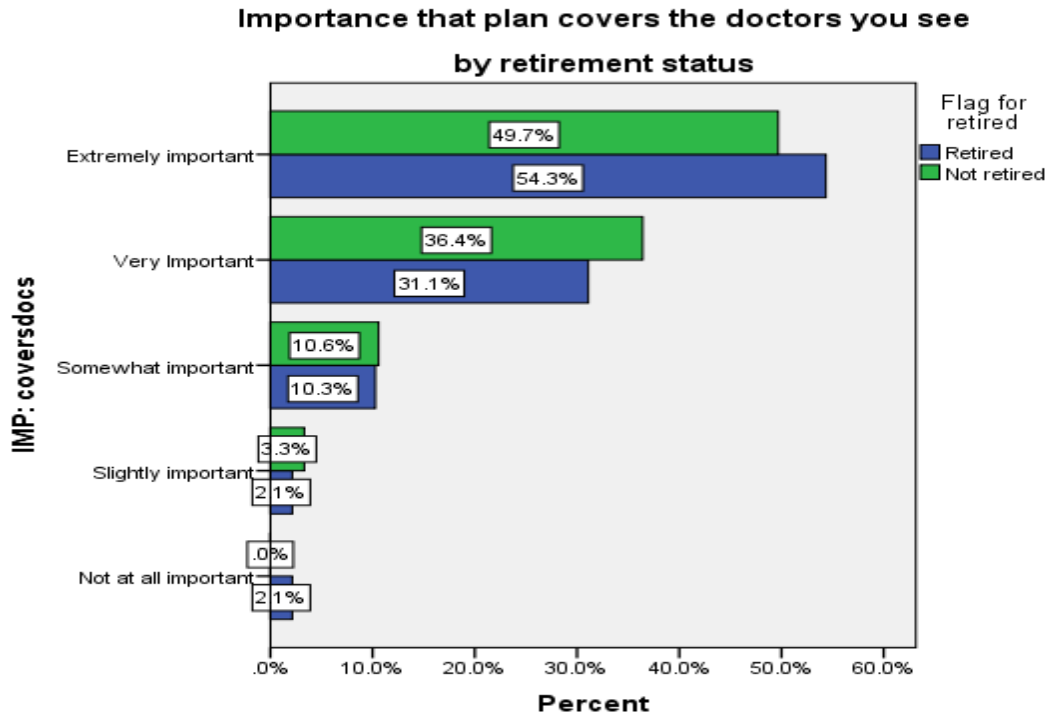
			Flag for retired		
			Retired	Not retired	Total
IMP: coversdocs	Extremely important	Count	407	75	482
		% within Flag for retired	54.3%	49.7%	53.6%
	Very Important	Count	233	55	288
		% within Flag for retired	31.1%	36.4%	32.0%
	Somewhat important	Count	77	16	93
		% within Flag for retired	10.3%	10.6%	10.3%
	Slightly important	Count	16	5	21
		% within Flag for retired	2.1%	3.3%	2.3%
	Not at all important	Count	16	0	16
		% within Flag for retired	2.1%	0.0%	1.8%
Total		Count	749	151	900
		% within Flag for retired	100.0%	100.0%	100.0%

Below are the responses to Q2b by whether or not the respondent is/was a state or local government employee retired based on the ETF sample file designation.   The difference between the two sub-groups is not statistically significant *p* > 0.05 (Pearson Chi-Square is 1.973).

Importance that plan covers the doctors you see

by respondent's employer type
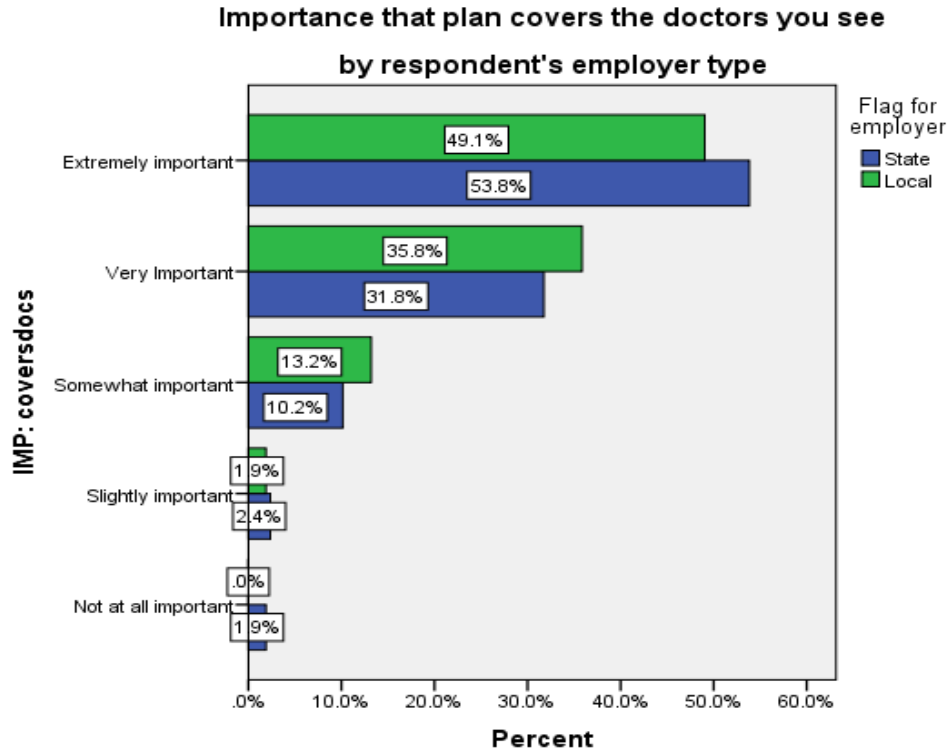
			Flag for employer		
			State	Local	Total
IMP: coversdocs	Extremely important	Count	456	26	482
		% within Flag for employer	53.8%	49.1%	53.6%
	Very Important	Count	269	19	288
		% within Flag for employer	31.8%	35.8%	32.0%
	Somewhat important	Count	86	7	93
		% within Flag for employer	10.2%	13.2%	10.3%
	Slightly important	Count	20	1	21
		% within Flag for employer	2.4%	1.9%	2.3%
	Not at all important	Count	16	0	16
		% within Flag for employer	1.9%	0.0%	1.8%
Total		Count	847	53	900
		% within Flag for employer	100.0%	100.0%	100.0%

Below are the responses to Q2b by the respondent's based on the ETF sample file designation. The difference between the two sub-groups is statistically significant $p < 0.01$ (Pearson Chi-Square is 16.531).

Importance that plan covers the doctors you see
by respondent's sex
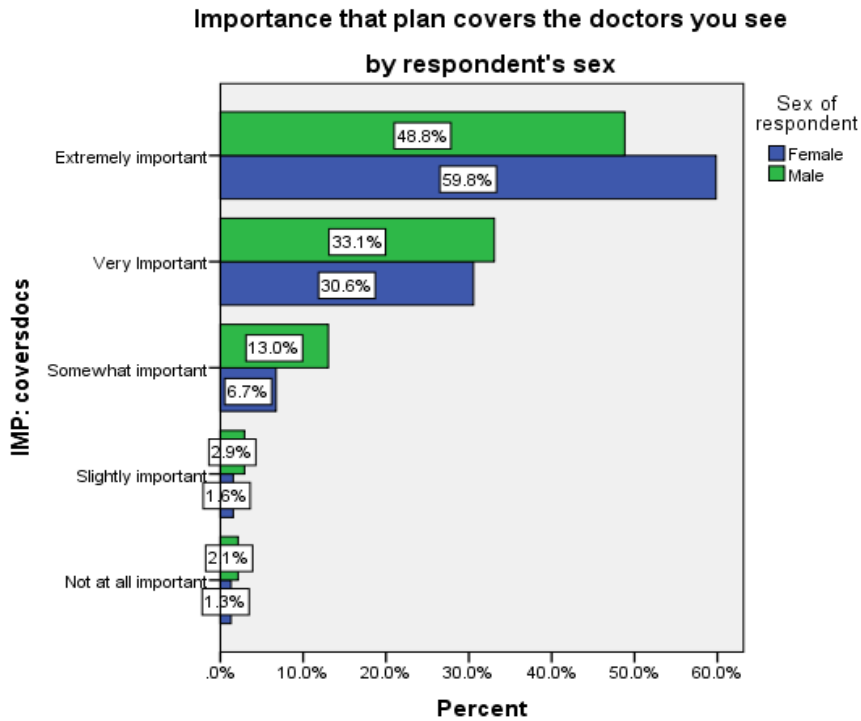
	Sex of respondent		
	Female	Male	Total
IMP: coversdocs Extremely important — Count	231	251	482
% within Sex of respondent	59.8%	48.8%	53.6%
Very Important — Count	118	170	288
% within Sex of respondent	30.6%	33.1%	32.0%
Somewhat important — Count	26	67	93
% within Sex of respondent	6.7%	13.0%	10.3%
Slightly important — Count	6	15	21
% within Sex of respondent	1.6%	2.9%	2.3%
Not at all important — Count	5	11	16
% within Sex of respondent	1.3%	2.1%	1.8%
Total — Count	386	514	900
% within Sex of respondent	100.0%	100.0%	100.0%

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Below are the responses to Q2b by grouping respondents based on the region of the state they live in based on the address in ETF sample file designation. The difference between the sub-groups is statistically significant $p < 0.01$ (Pearson Chi-Square is 36.560).

Importance that plan covers the doctors you see
by ETF defined regions of Wisconsin
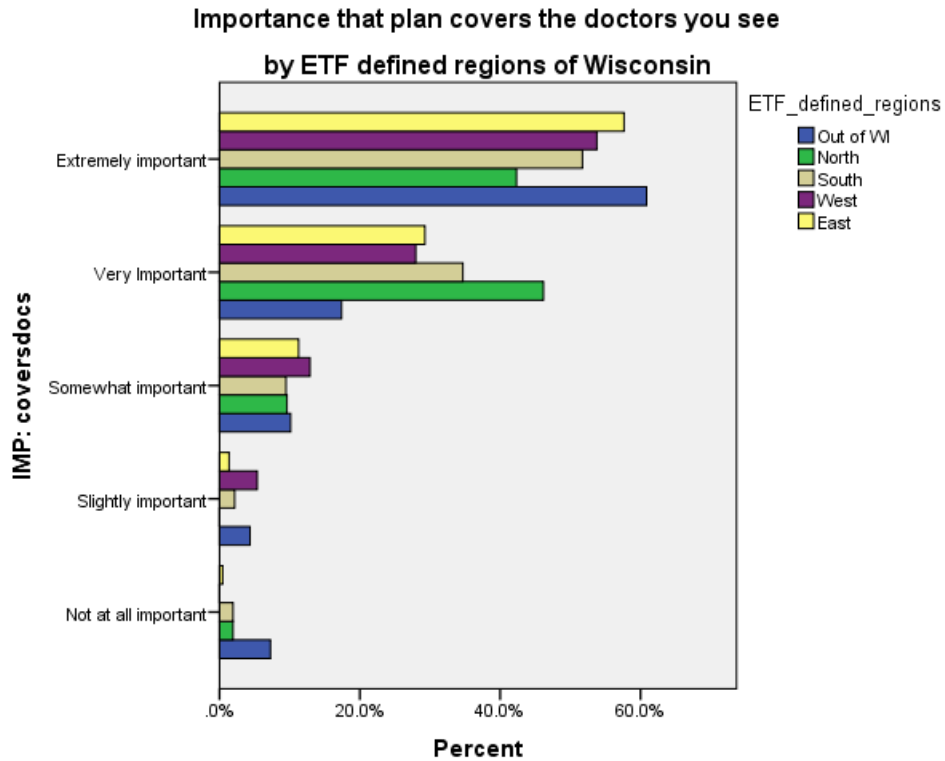
Crosstab

			ETF_defined_regions					
			Out of WI	North	South	West	East	Total
IMP: coversdocs	Extremely important	Count	42	22	240	50	128	482
		% within ETF_defined_regions	60.9%	42.3%	51.7%	53.8%	57.7%	53.6%
	Very Important	Count	12	24	161	26	65	288
		% within ETF_defined_regions	17.4%	46.2%	34.7%	28.0%	29.3%	32.0%
	Somewhat important	Count	7	5	44	12	25	93
		% within ETF_defined_regions	10.1%	9.6%	9.5%	12.9%	11.3%	10.3%
	Slightly important	Count	3	0	10	5	3	21
		% within ETF_defined_regions	4.3%	0.0%	2.2%	5.4%	1.4%	2.3%
	Not at all important	Count	5	1	9	0	1	16
		% within ETF_defined_regions	7.2%	1.9%	1.9%	0.0%	0.5%	1.8%
Total		Count	69	52	464	93	222	900
		% within ETF_defined_regions	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Below are the overall results from respondents to both surveys for question 2c.

Importance that plan includes out-of-state or nationwide coverage
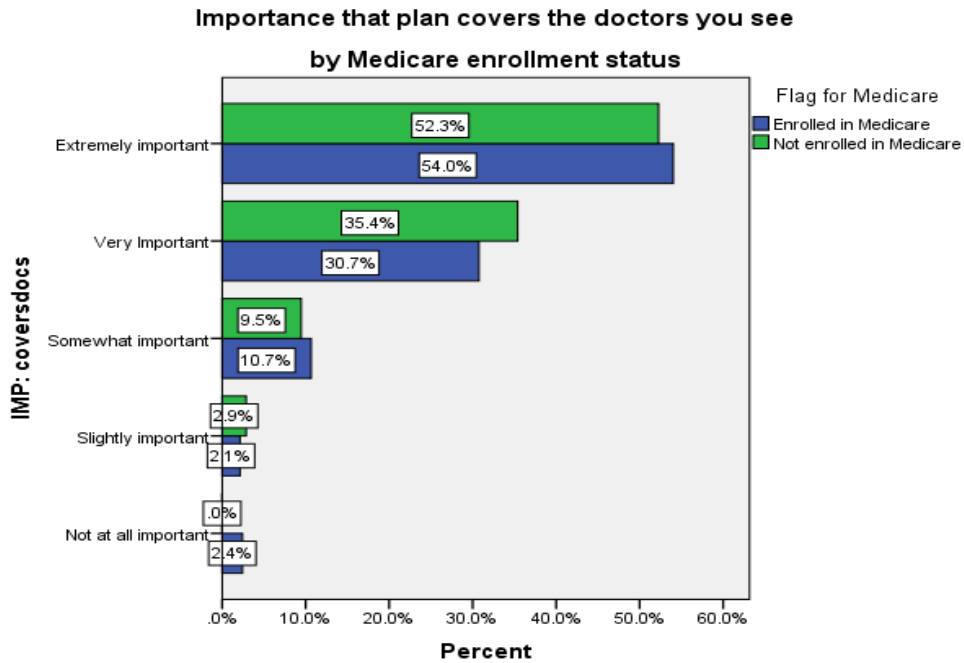

8.44%
Not at all important

14.00%
Slightly important

32.44%
Extremely important

18.89%
Somewhat important

26.22%
Very Important

Q2c. importance that plan includes out-of-state or nationwide coverage

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Extremely important	291	32.0	32.5	32.5
	Very Important	234	25.8	26.1	58.6
	Somewhat important	169	18.6	18.9	77.5
	Slightly important	126	13.9	14.1	91.5
	Not at all important	76	8.4	8.5	100.0
	Total	896	98.7	100.0	
Missing	DON'T KNOW	1	.1		
	BLANK	11	1.2		
	Total	12	1.3		
Total		908	100.0		

The UWSC ran crosstabs on Q2c by the following sub-groupings of respondents; Medicare enrollment status, retirement status, state or local employer, respondent's sex, and the ETF defined regions of WI (including those living outside of WI).

There were statistically significant differences across sub-groups for each of the following sub-groups; the respondent's sex, and the ETF defined regions of WI. The results of those cross-tabulations are on the following pages.

Below are the responses to Q2c by whether or not the respondent is enrolled in Medicare by the ETF sample file designation. The difference between the two sub-groups is not statistically significant $p > 0.05$ (Pearson Chi-Square is 4.114).
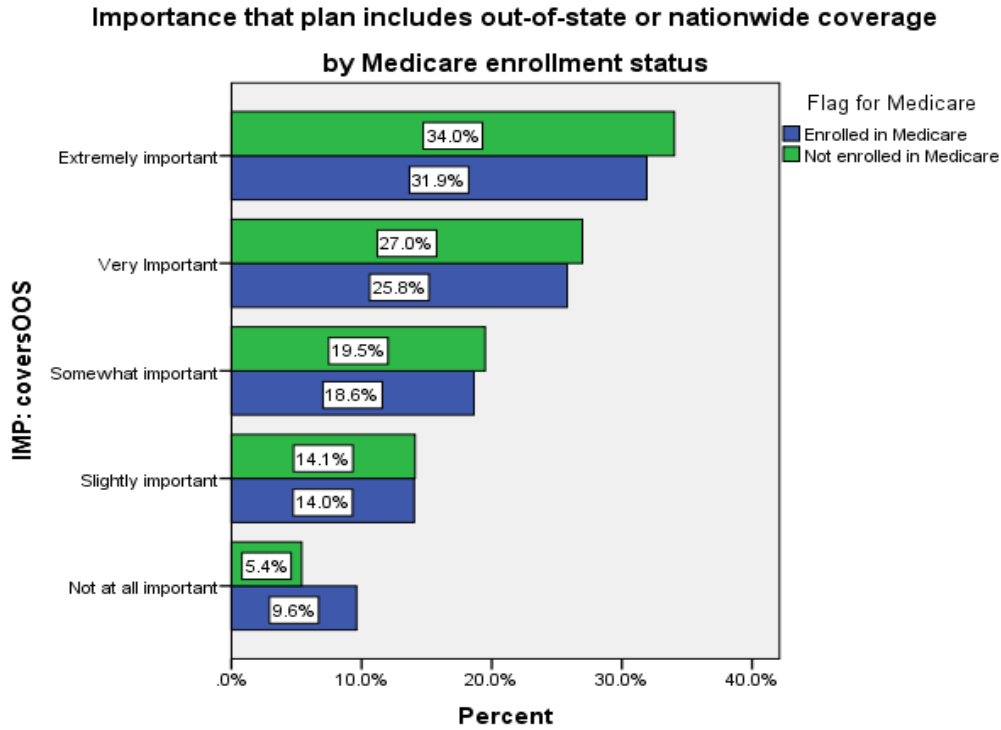
Importance that plan includes out-of-state or nationwide coverage by Medicare enrollment status

|			Flag for Medicare		
			Enrolled in Medicare	Not enrolled in Medicare	Total
IMP: coversOOS	Extremely important	Count	209	82	291
		% within Flag for Medicare	31.9%	34.0%	32.5%
	Very Important	Count	169	65	234
		% within Flag for Medicare	25.8%	27.0%	26.1%
	Somewhat important	Count	122	47	169
		% within Flag for Medicare	18.6%	19.5%	18.9%
	Slightly important	Count	92	34	126
		% within Flag for Medicare	14.0%	14.1%	14.1%
	Not at all important	Count	63	13	76
		% within Flag for Medicare	9.6%	5.4%	8.5%
Total		Count	655	241	896
		% within Flag for Medicare	100.0%	100.0%	100.0%

Below are the responses to Q2c by whether or not the respondent is retired based on the ETF sample file designation.   The difference between the two sub-groups is not statistically significant *p* > 0.05 (Pearson Chi-Square is 7.323).

Importance that plan includes out-of-state or nationwide coverage by retirement status
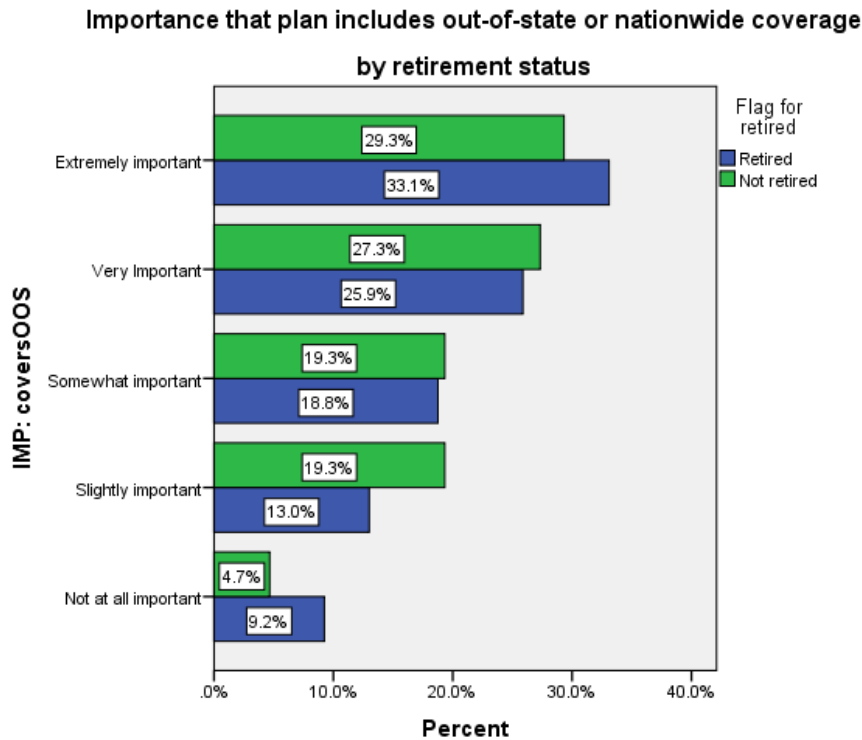
|			Flag for retired		Total
			Retired	Not retired	
IMP: coversOOS	Extremely important	Count	247	44	291
		% within Flag for retired	33.1%	29.3%	32.5%
	Very Important	Count	193	41	234
		% within Flag for retired	25.9%	27.3%	26.1%
	Somewhat important	Count	140	29	169
		% within Flag for retired	18.8%	19.3%	18.9%
	Slightly important	Count	97	29	126
		% within Flag for retired	13.0%	19.3%	14.1%
	Not at all important	Count	69	7	76
		% within Flag for retired	9.2%	4.7%	8.5%
Total		Count	746	150	896
		% within Flag for retired	100.0%	100.0%	100.0%

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Below are the responses to Q2c by whether or not the respondent is/was employed by the state or a local government based on the ETF sample file designation.   The difference between the two sub-groups is <u>not</u> statistically significant *p* > 0.05 (Pearson Chi-Square is 7.564).


Importance that plan includes out-of-state or nationwide coverage by respondent's employer type
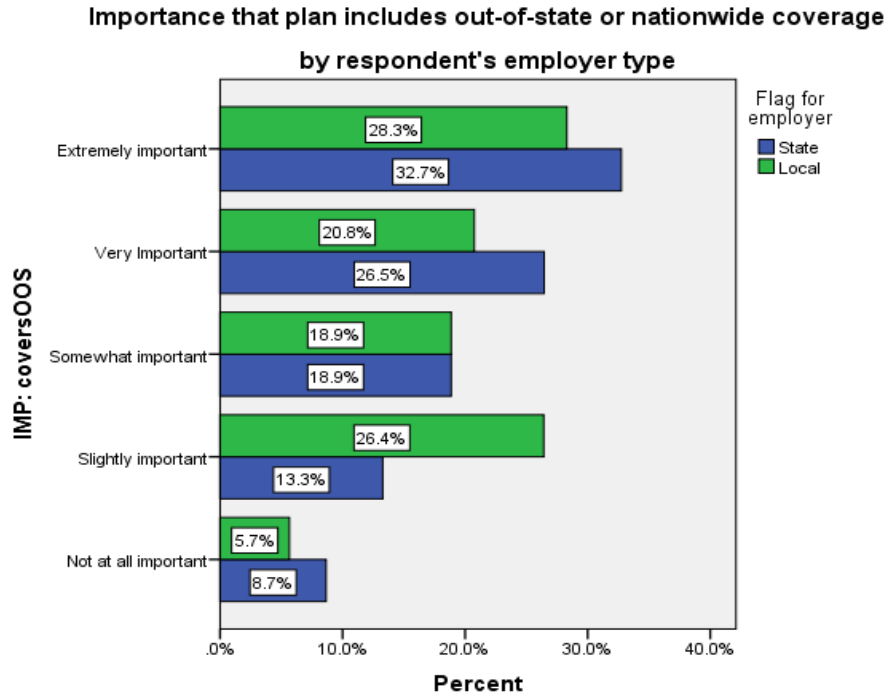
			Flag for employer		Total
			State	Local	
IMP: coversOOS	Extremely important	Count	276	15	291
		% within Flag for employer	32.7%	28.3%	32.5%
	Very Important	Count	223	11	234
		% within Flag for employer	26.5%	20.8%	26.1%
	Somewhat important	Count	159	10	169
		% within Flag for employer	18.9%	18.9%	18.9%
	Slightly important	Count	112	14	126
		% within Flag for employer	13.3%	26.4%	14.1%
	Not at all important	Count	73	3	76
		% within Flag for employer	8.7%	5.7%	8.5%
Total		Count	843	53	896
		% within Flag for employer	100.0%	100.0%	100.0%

24

Below are the responses to Q2c by the respondent's sex based on the ETF sample file designation.   The difference between the two sub-groups is statistically significant $p = 0.017$ (Pearson Chi-Square is 12.103).

Importance that plan includes out-of-state or nationwide coverage by respondent's sex
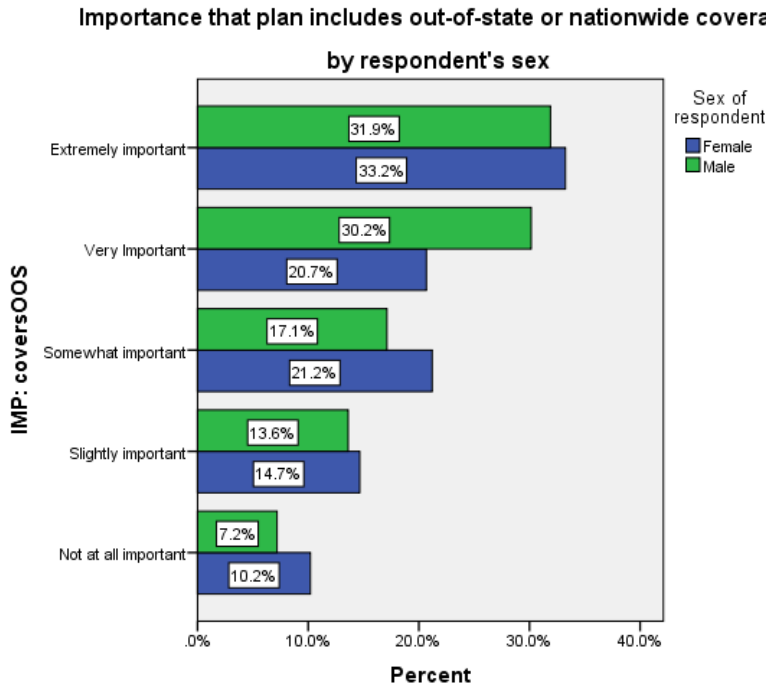
			Sex of respondent		Total
			Female	Male	
IMP: coversOOS	Extremely important	Count	127	164	291
		% within Sex of respondent	33.2%	31.9%	32.5%
	Very Important	Count	79	155	234
		% within Sex of respondent	20.7%	30.2%	26.1%
	Somewhat important	Count	81	88	169
		% within Sex of respondent	21.2%	17.1%	18.9%
	Slightly important	Count	56	70	126
		% within Sex of respondent	14.7%	13.6%	14.1%
	Not at all important	Count	39	37	76
		% within Sex of respondent	10.2%	7.2%	8.5%
Total		Count	382	514	896
		% within Sex of respondent	100.0%	100.0%	100.0%

Below are the responses to Q2c by grouping respondents based on the region of the state they live in based on the address in ETF sample file designation. The difference between the sub-groups is statistically significant $p < 0.01$ (Pearson Chi-Square is 87.542).
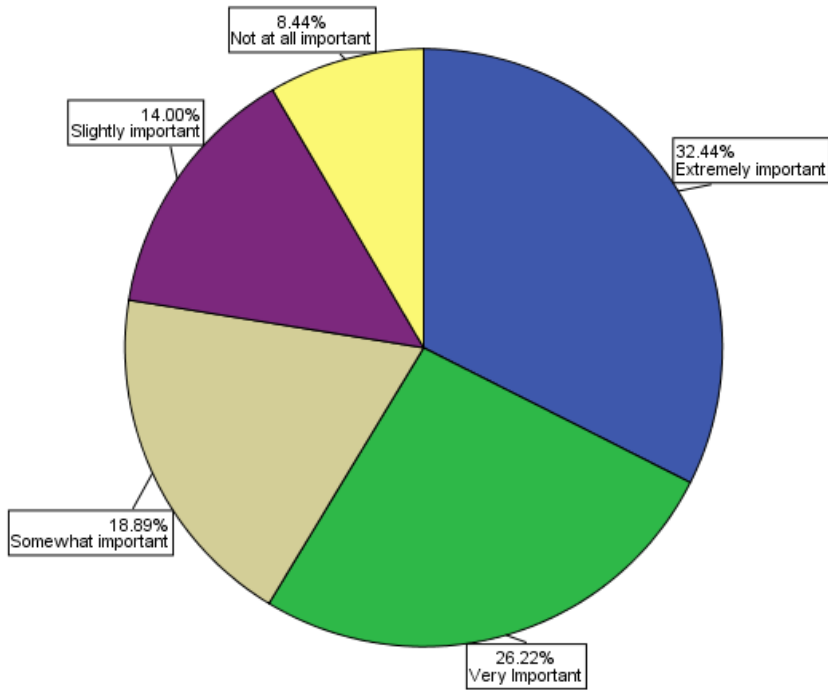
Importance that plan includes out-of-state or nationwide coverage
by ETF defined regions of Wisconsin
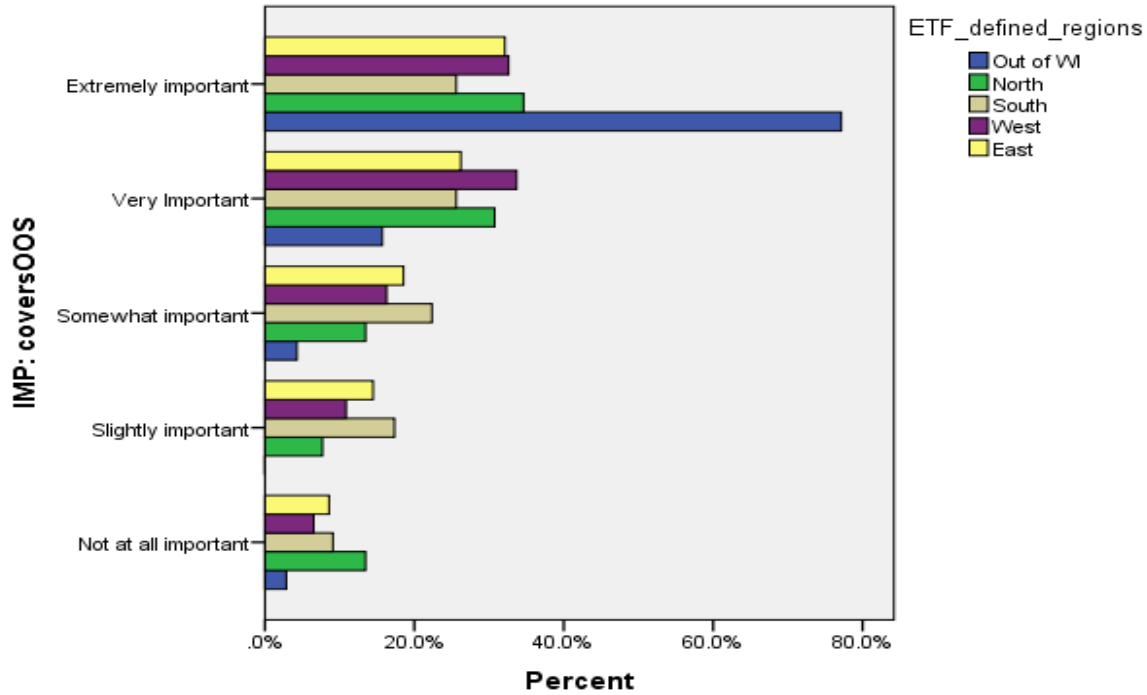
Crosstab

| | | | ETF_defined_regions | | | | | |
			Out of WI	North	South	West	East	Total
IMP: coversOOS	Extremely important	Count	54	18	118	30	71	291
		% within ETF_defined_regions	77.1%	34.6%	25.6%	32.6%	32.1%	32.5%
	Very Important	Count	11	16	118	31	58	234
		% within ETF_defined_regions	15.7%	30.8%	25.6%	33.7%	26.2%	26.1%
	Somewhat important	Count	3	7	103	15	41	169
		% within ETF_defined_regions	4.3%	13.5%	22.3%	16.3%	18.6%	18.9%
	Slightly important	Count	0	4	80	10	32	126
		% within ETF_defined_regions	0.0%	7.7%	17.4%	10.9%	14.5%	14.1%
	Not at all important	Count	2	7	42	6	19	76
		% within ETF_defined_regions	2.9%	13.5%	9.1%	6.5%	8.6%	8.5%
Total		Count	70	52	461	92	221	896
		% within ETF_defined_regions	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Below are the overall results from respondents to both surveys for question 2d.

Importance that plan has the lowest out-of-pocket costs when you need medical services or prescription drugs

2.34%
Not at all important

6.67%
Slightly important

30.37%
Extremely important

24.14%
Somewhat important

36.48%
Very Important
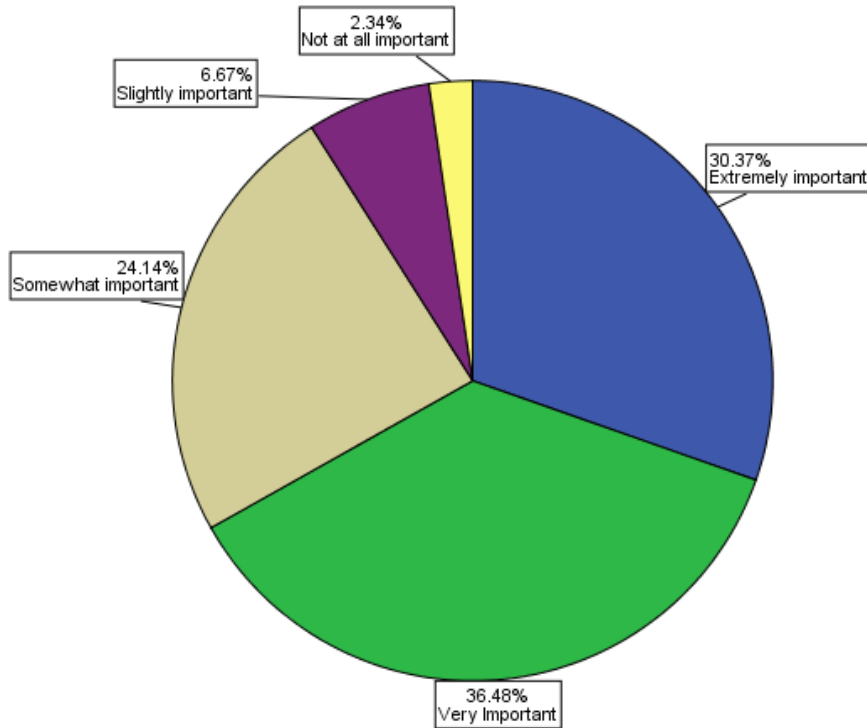
Q2d. importance that plan has the lowest out-of-pocket costs when you need medical services or prescription drugs

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Extremely important	272	30.0	30.4	30.4
	Very Important	325	35.8	36.3	66.7
	Somewhat important	217	23.9	24.2	90.9
	Slightly important	60	6.6	6.7	97.7
	Not at all important	21	2.3	2.3	100.0
	Total	895	98.6	100.0	
Missing	DON'T KNOW	1	.1		
	BLANK	12	1.3		
	Total	13	1.4		
Total		908	100.0		

The UWSC ran crosstabs on Q2d by the following sub-groupings of respondents; Medicare enrollment status, retirement status, state or local employer, respondent's sex, and the ETF defined regions of WI (including those living outside of WI).

There were only statistically significant differences across sub-groups for Medicare enrollment status. The results of those cross-tabulations are on the following pages.

Below are the responses to Q2d by whether or not the respondent is enrolled in Medicare by the ETF sample file designation. The difference between the two sub-groups is statistically significant $p < 0.01$ (Pearson Chi-Square is 23.073).

Importance that plan has the lowest out-of-pocket costs when you need medical services or prescription drugs by Medicare enrollment status
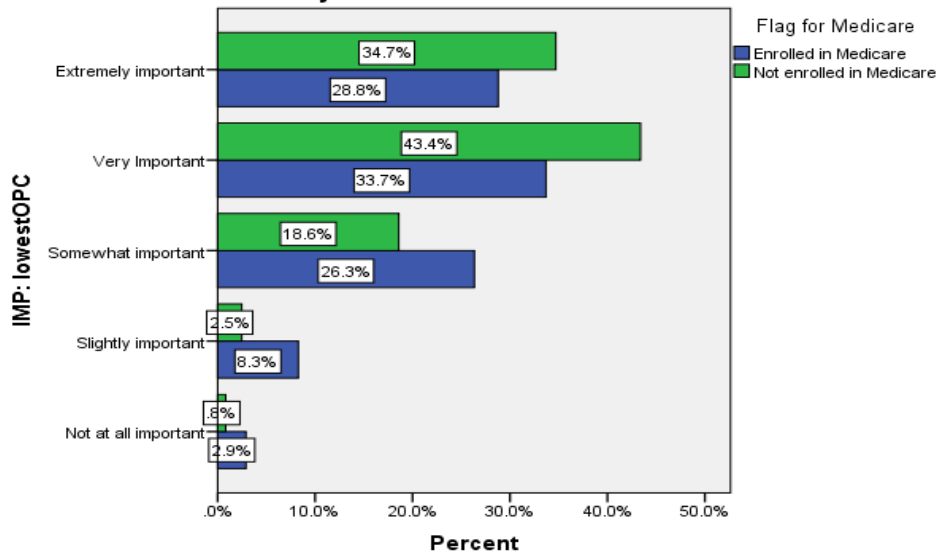
			Flag for Medicare		
			Enrolled in Medicare	Not enrolled in Medicare	Total
IMP: lowestOPC	Extremely important	Count	188	84	272
		% within Flag for Medicare	28.8%	34.7%	30.4%
	Very Important	Count	220	105	325
		% within Flag for Medicare	33.7%	43.4%	36.3%
	Somewhat important	Count	172	45	217
		% within Flag for Medicare	26.3%	18.6%	24.2%
	Slightly important	Count	54	6	60
		% within Flag for Medicare	8.3%	2.5%	6.7%
	Not at all important	Count	19	2	21
		% within Flag for Medicare	2.9%	0.8%	2.3%
Total		Count	653	242	895
		% within Flag for Medicare	100.0%	100.0%	100.0%

Below are the responses to Q2d by whether or not the respondent is retired based on the ETF sample file designation.   The difference between the two sub-groups is <u>not</u> statistically significant $p > 0.05$ (Pearson Chi-Square is 8.715).

Importance that plan has the lowest out-of-pocket costs when you need medical services or prescription drugs
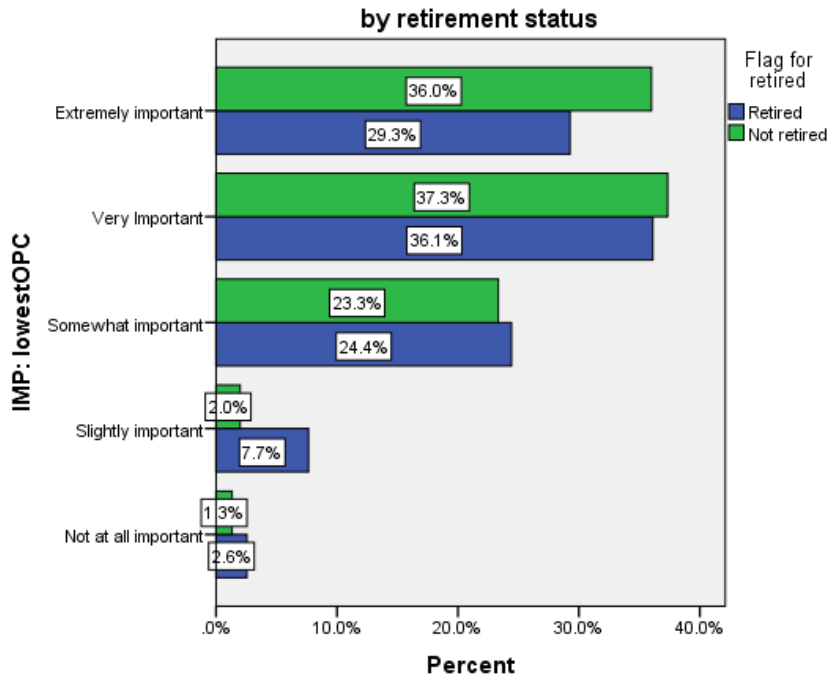
			Flag for retired		
			Retired	Not retired	Total
IMP: lowestOPC	Extremely important	Count	218	54	272
		% within Flag for retired	29.3%	36.0%	30.4%
	Very Important	Count	269	56	325
		% within Flag for retired	36.1%	37.3%	36.3%
	Somewhat important	Count	182	35	217
		% within Flag for retired	24.4%	23.3%	24.2%
	Slightly important	Count	57	3	60
		% within Flag for retired	7.7%	2.0%	6.7%
	Not at all important	Count	19	2	21
		% within Flag for retired	2.6%	1.3%	2.3%
Total		Count	745	150	895
		% within Flag for retired	100.0%	100.0%	100.0%

Below are the responses to Q2d by whether or not the respondent is/was a state or local government employee based on the ETF sample file designation.   The difference between the two sub-groups is not statistically significant *p* > 0.05 (Pearson Chi-Square is 3.370).

Importance that plan has the lowest out-of-pocket costs when you need medical services or prescription drugs

by respondent's employer type
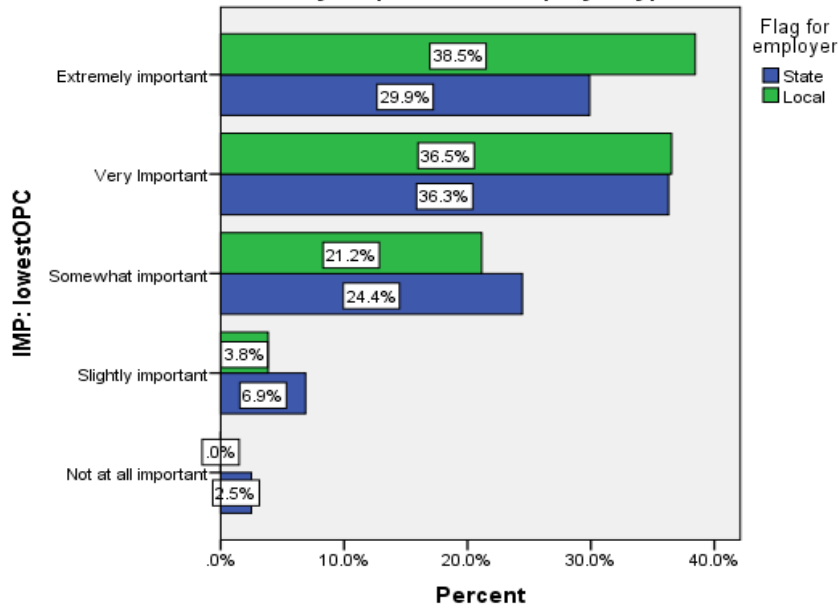
			Flag for employer		
			State	Local	Total
IMP: lowestOPC	Extremely important	Count	252	20	272
		% within Flag for employer	29.9%	38.5%	30.4%
	Very Important	Count	306	19	325
		% within Flag for employer	36.3%	36.5%	36.3%
	Somewhat important	Count	206	11	217
		% within Flag for employer	24.4%	21.2%	24.2%
	Slightly important	Count	58	2	60
		% within Flag for employer	6.9%	3.8%	6.7%
	Not at all important	Count	21	0	21
		% within Flag for employer	2.5%	0.0%	2.3%
Total		Count	843	52	895
		% within Flag for employer	100.0%	100.0%	100.0%

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Below are the responses to Q2d by the respondent's sex based on the ETF sample file designation.   The difference between the two sub-groups is not statistically significant *p* > 0.05 (Pearson Chi-Square is 2.777).

Importance that plan has the lowest out-of-pocket costs when you need medical services or prescription drugs

by respondent's sex
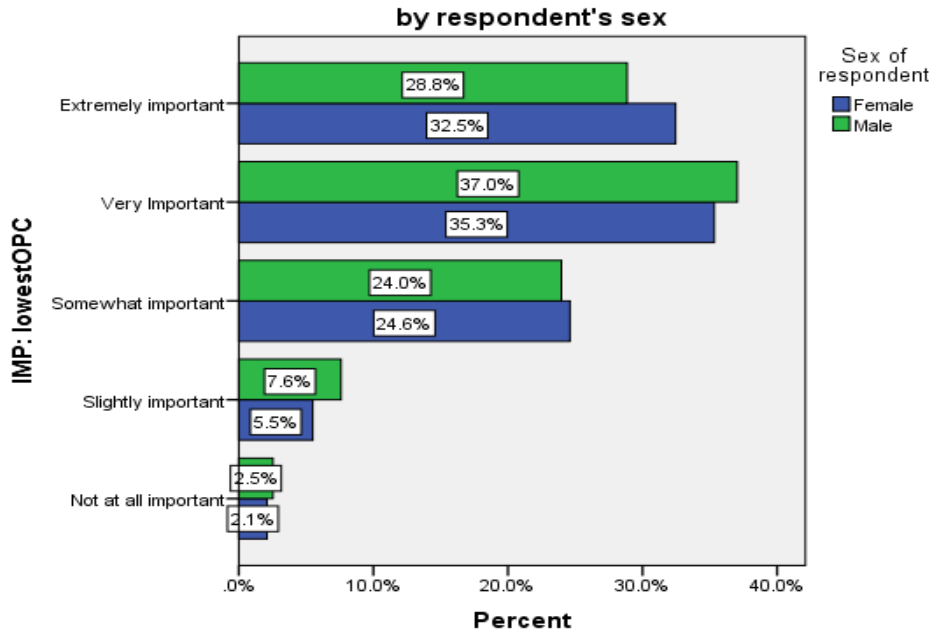
			Sex of respondent		Total
			Female	Male	
IMP: lowestOPC	Extremely important	Count	124	148	272
		% within Sex of respondent	32.5%	28.8%	30.4%
	Very Important	Count	135	190	325
		% within Sex of respondent	35.3%	37.0%	36.3%
	Somewhat important	Count	94	123	217
		% within Sex of respondent	24.6%	24.0%	24.2%
	Slightly important	Count	21	39	60
		% within Sex of respondent	5.5%	7.6%	6.7%
	Not at all important	Count	8	13	21
		% within Sex of respondent	2.1%	2.5%	2.3%
Total		Count	382	513	895
		% within Sex of respondent	100.0%	100.0%	100.0%

Below are the responses to Q2d by grouping respondents based on the region of the state they live in based on the address in ETF sample file designation. The difference between the sub-groups is not statistically significant *p* > 0.01 (Pearson Chi-Square is 19.561).

Importance that plan has the lowest out-of-pocket costs when you need medical services or prescription drugs by ETF defined regions of Wisconsin
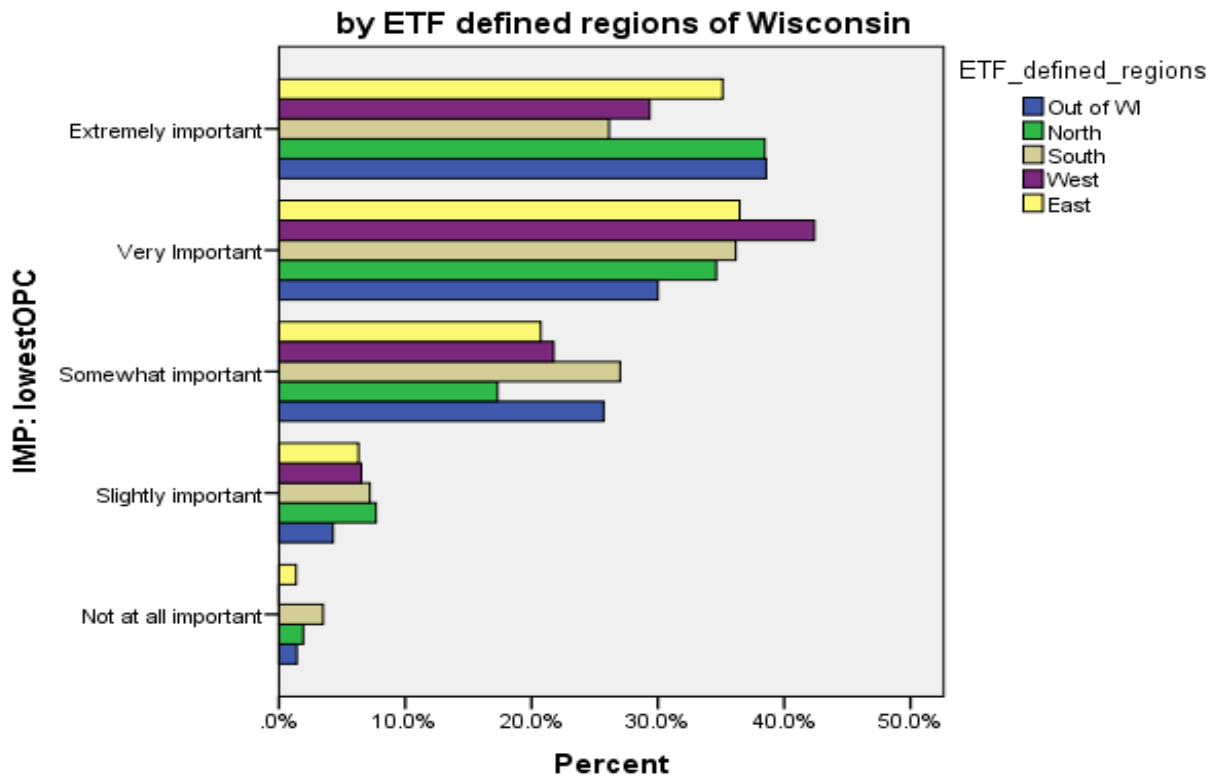
Crosstab

| | | | ETF_defined_regions | | | | | |
			Out of WI	North	South	West	East	Total
IMP: lowestOPC	Extremely important	Count	27	20	120	27	78	272
		% within ETF_defined_regions	38.6%	38.5%	26.1%	29.3%	35.1%	30.4%
	Very Important	Count	21	18	166	39	81	325
		% within ETF_defined_regions	30.0%	34.6%	36.2%	42.4%	36.5%	36.3%
	Somewhat important	Count	18	9	124	20	46	217
		% within ETF_defined_regions	25.7%	17.3%	27.0%	21.7%	20.7%	24.2%
	Slightly important	Count	3	4	33	6	14	60
		% within ETF_defined_regions	4.3%	7.7%	7.2%	6.5%	6.3%	6.7%
	Not at all important	Count	1	1	16	0	3	21
		% within ETF_defined_regions	1.4%	1.9%	3.5%	0.0%	1.4%	2.3%
Total		Count	70	52	459	92	222	895
		% within ETF_defined_regions	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Below are the overall results from respondents to both surveys for question 2e.

Importance that plan is familiar or did not require you to change health plans

4.89%
Not at all important

6.45%
Slightly important

32.59%
Extremely important

19.02%
Somewhat important

37.04%
Very Important
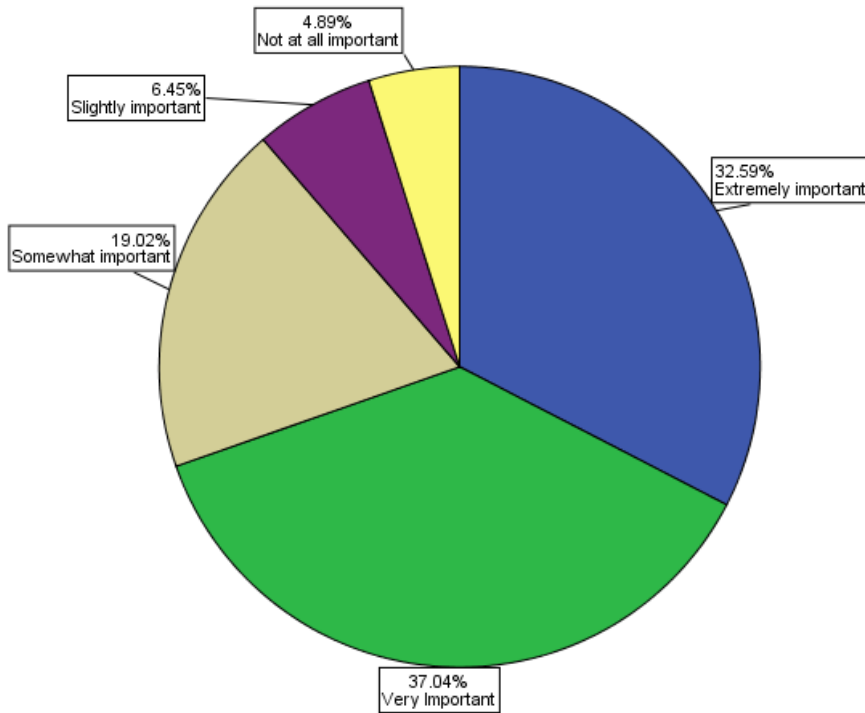
Q2e. importance that plan is familiar or did not require you to change health plans

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Extremely important	290	31.9	32.4	32.4
	Very Important	332	36.6	37.1	69.5
	Somewhat important	171	18.8	19.1	88.6
	Slightly important	58	6.4	6.5	95.1
	Not at all important	44	4.8	4.9	100.0
	Total	895	98.6	100.0	
Missing	DON'T KNOW	1	.1		
	BLANK	12	1.3		
	Total	13	1.4		
Total		908	100.0		

The UWSC ran crosstabs on Q2e by the following sub-groupings of respondents; Medicare enrollment status, retirement status, state or local employer, respondent's sex, and the ETF defined regions of WI (including those living outside of WI).

There were statistically significant differences across sub-groups for and the ETF defined regions of WI. The results of those cross-tabulations are on the following pages.

Below are the responses to Q2e by whether or not the respondent is enrolled in Medicare based on the ETF sample file designation. The difference between the two sub-groups is not statistically significant $p > 0.05$ (Pearson Chi-Square is 3.620).

Importance that plan is familiar or did not require you to change health plans by Medicare enrollment status
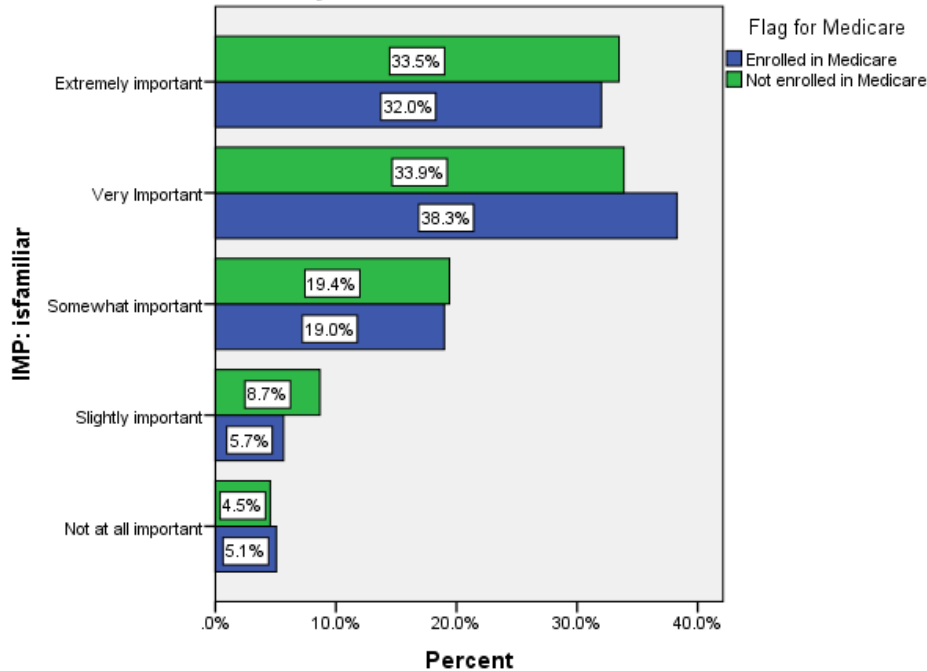
			Flag for Medicare		
			Enrolled in Medicare	Not enrolled in Medicare	Total
IMP: isfamiliar	Extremely important	Count	209	81	290
		% within Flag for Medicare	32.0%	33.5%	32.4%
	Very Important	Count	250	82	332
		% within Flag for Medicare	38.3%	33.9%	37.1%
	Somewhat important	Count	124	47	171
		% within Flag for Medicare	19.0%	19.4%	19.1%
	Slightly important	Count	37	21	58
		% within Flag for Medicare	5.7%	8.7%	6.5%
	Not at all important	Count	33	11	44
		% within Flag for Medicare	5.1%	4.5%	4.9%
Total		Count	653	242	895
		% within Flag for Medicare	100.0%	100.0%	100.0%

Below are the responses to Q2e by whether or not the respondent is retired based on the ETF sample file designation.   The difference between the two sub-groups is <u>not</u> statistically significant $p > 0.05$ (Pearson Chi-Square is 2.234).

Importance that plan is familiar or did not require you to change health plans by retirement status
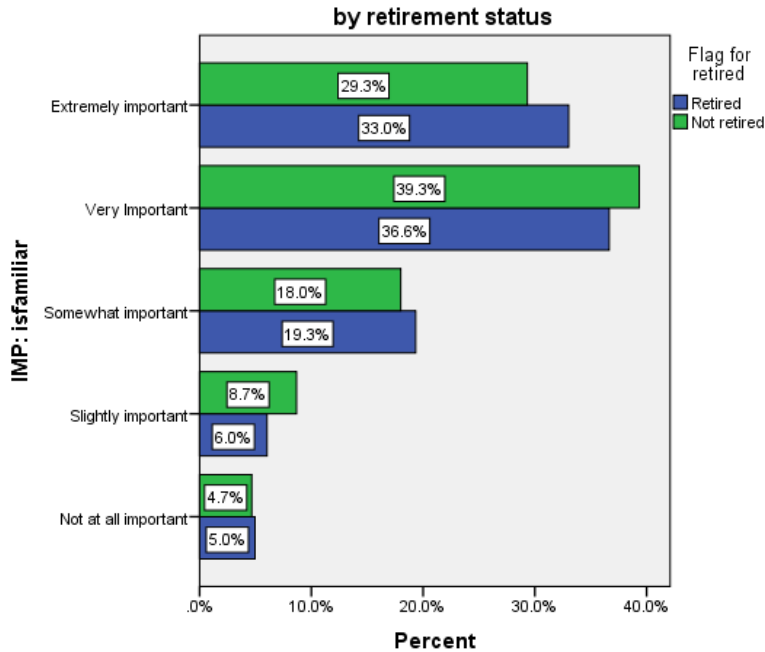
			Flag for retired		
			Retired	Not retired	Total
IMP: isfamiliar	Extremely important	Count	246	44	290
		% within Flag for retired	33.0%	29.3%	32.4%
	Very Important	Count	273	59	332
		% within Flag for retired	36.6%	39.3%	37.1%
	Somewhat important	Count	144	27	171
		% within Flag for retired	19.3%	18.0%	19.1%
	Slightly important	Count	45	13	58
		% within Flag for retired	6.0%	8.7%	6.5%
	Not at all important	Count	37	7	44
		% within Flag for retired	5.0%	4.7%	4.9%
Total		Count	745	150	895
		% within Flag for retired	100.0%	100.0%	100.0%

Below are the responses to Q2e by the respondent is/was employed by the state or a local government based on the ETF sample file designation. The difference between the two sub-groups is not statistically significant $p > 0.05$ (Pearson Chi-Square is 7.863).

Importance that plan is familiar or did not require you to change health plans
by respondent's employer type
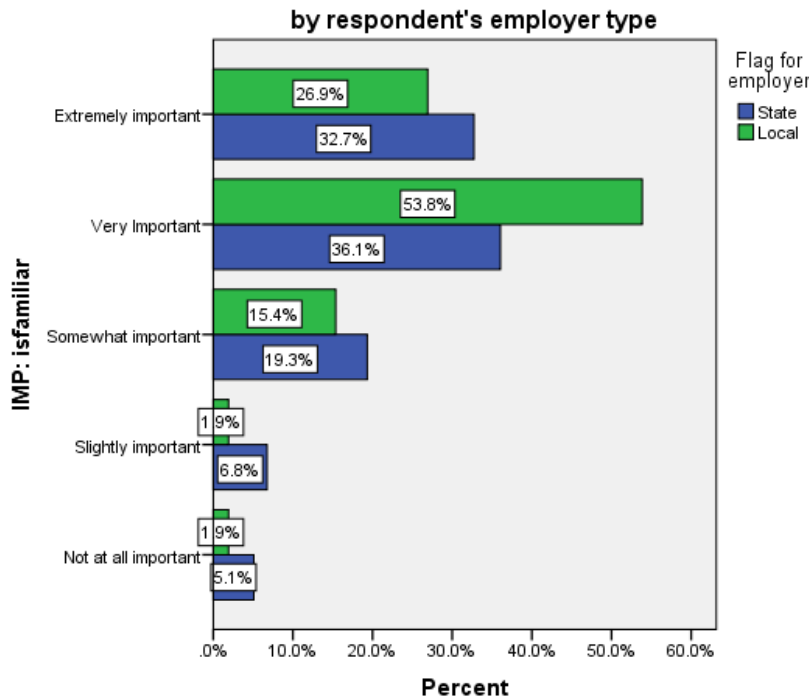
			Flag for employer		
			State	Local	Total
IMP: isfamiliar	Extremely important	Count	276	14	290
		% within Flag for employer	32.7%	26.9%	32.4%
	Very Important	Count	304	28	332
		% within Flag for employer	36.1%	53.8%	37.1%
	Somewhat important	Count	163	8	171
		% within Flag for employer	19.3%	15.4%	19.1%
	Slightly important	Count	57	1	58
		% within Flag for employer	6.8%	1.9%	6.5%
	Not at all important	Count	43	1	44
		% within Flag for employer	5.1%	1.9%	4.9%
Total		Count	843	52	895
		% within Flag for employer	100.0%	100.0%	100.0%

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Below are the responses to Q2e by the respondent's sex based on the ETF sample file designation.   The difference between the two sub-groups is <u>not</u> statistically significant $p > 0.05$ (Pearson Chi-Square is 6.970).

Importance that plan is familiar or did not require you to change health plans
by respondent's sex
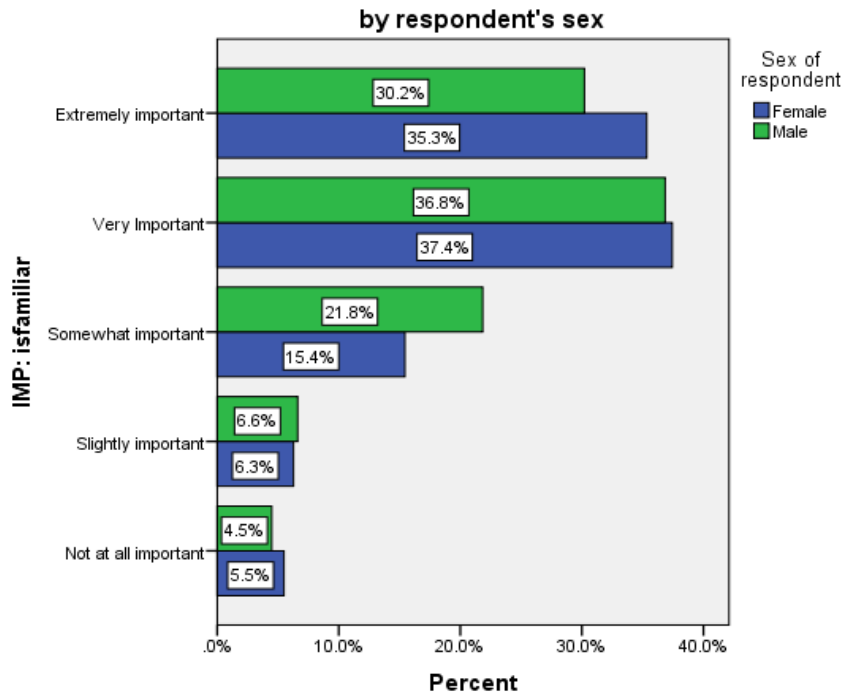
			Sex of respondent		
			Female	Male	Total
IMP: isfamiliar	Extremely important	Count	135	155	290
		% within Sex of respondent	35.3%	30.2%	32.4%
	Very Important	Count	143	189	332
		% within Sex of respondent	37.4%	36.8%	37.1%
	Somewhat important	Count	59	112	171
		% within Sex of respondent	15.4%	21.8%	19.1%
	Slightly important	Count	24	34	58
		% within Sex of respondent	6.3%	6.6%	6.5%
	Not at all important	Count	21	23	44
		% within Sex of respondent	5.5%	4.5%	4.9%
Total		Count	382	513	895
		% within Sex of respondent	100.0%	100.0%	100.0%

Below are the responses to Q2e by grouping respondents based on the region of the state they live in based on the address in ETF sample file designation. The difference between the sub-groups is statistically significant $p = 0.014$ (Pearson Chi-Square is 30.977).

Importance that plan is familiar or did not require you to change health plans
by ETF defined regions of Wisconsin
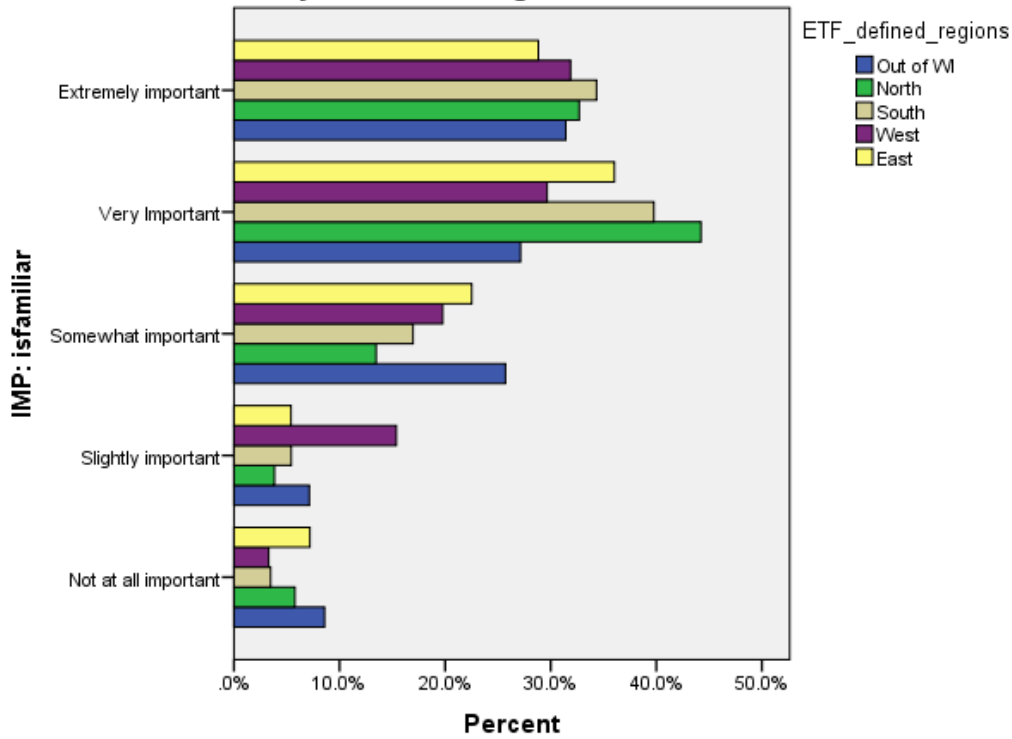
**Crosstab**

			ETF_defined_regions					
			Out of WI	North	South	West	East	Total
IMP: isfamiliar	Extremely important	Count	22	17	158	29	64	290
		% within ETF_defined_regions	31.4%	32.7%	34.3%	31.9%	28.8%	32.4%
	Very Important	Count	19	23	183	27	80	332
		% within ETF_defined_regions	27.1%	44.2%	39.8%	29.7%	36.0%	37.1%
	Somewhat important	Count	18	7	78	18	50	171
		% within ETF_defined_regions	25.7%	13.5%	17.0%	19.8%	22.5%	19.1%
	Slightly important	Count	5	2	25	14	12	58
		% within ETF_defined_regions	7.1%	3.8%	5.4%	15.4%	5.4%	6.5%
	Not at all important	Count	6	3	16	3	16	44
		% within ETF_defined_regions	8.6%	5.8%	3.5%	3.3%	7.2%	4.9%
Total		Count	70	52	460	91	222	895
		% within ETF_defined_regions	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

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Below are the results only from the survey of those subscribers listed as enrolled in Medicare based on the ETF sample. This item was not asked on the other survey to subscribers not enrolled in Medicare (ET-4962N).   This question is used as a skip setter, so that the question series 3a.a through 3a.e should have only been answered if the respondents answered "no" to Q3 below.

Q3 (ET-4962M). currently enrolled in a Medicare Advantage plan

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	154	17.0	24.2	24.2
	No	483	53.2	75.8	100.0
	Total	637	70.2	100.0	
Missing	BLANK	24	2.6		
	DON'T KNOW	3	.3		
	System	244	26.9		
	Total	271	29.8		
Total		908	100.0		

Below are the overall results from respondents to both surveys for question 3a.a/3a, but only for those respondents who are not currently enrolled in a Medicare Advantage plan.

Willingness to explore a Medicare Advantage plan if it has a lower monthly premium

- 5.29% Not at all willing
- 10.29% Slightly willing
- 22.67% Extremely willing
- 28.23% Somewhat willing
- 33.52% Very willing
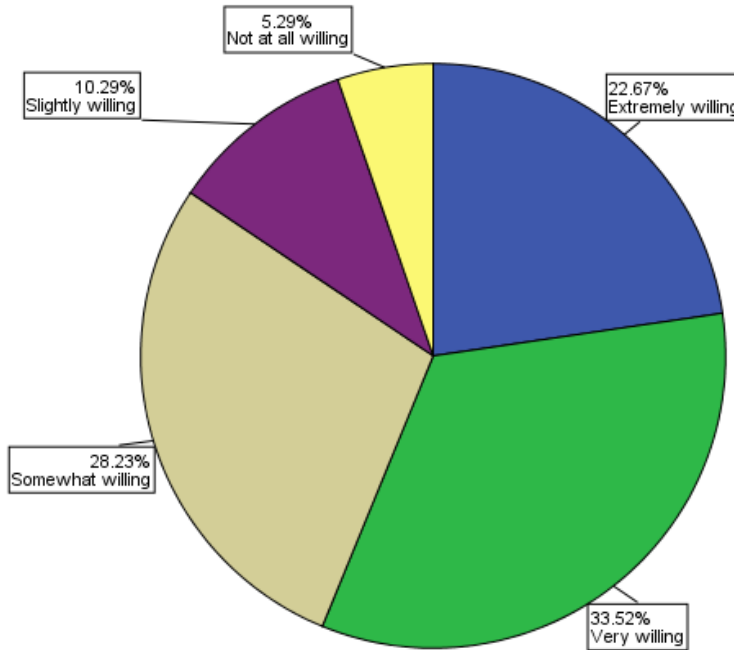
Q3a.a / Q3a. willingness to explore a Medicare Advantage plan if…it has a lower monthly premium

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Extremely willing	163	18.0	22.8	22.8
	Very willing	241	26.5	33.7	56.4
	Somewhat willing	200	22.0	27.9	84.4
	Slightly willing	74	8.1	10.3	94.7
	Not at all willing	38	4.2	5.3	100.0
	Total	716	78.9	100.0	
Missing	BLANK	38	4.2		
	System	154	17.0		
	Total	192	21.1		
Total		908	100.0		

The UWSC ran crosstabs on Q3a.a/Q3a by the following sub-groupings of respondents; Medicare enrollment status, retirement status, state or local employer, respondent's sex, the ETF defined regions of WI (including those living outside of WI), and by the respondents' answers to how they either are paying or plan to play for the monthly health insurance premiums.

There were statistically significant differences across sub-groups for the following sub-groups; Medicare enrollment status, retirement status, and how they either are paying or plan to play for the monthly health insurance premiums.   The results of those cross-tabulations are on the following pages.

Below are the responses to Q3a.a/Q3a by whether or not the respondent is enrolled in Medicare based on the ETF sample file designation. The difference between the two sub-groups is statistically significant $p < 0.01$ (Pearson Chi-Square is 43.832).


Willingness to explore a Medicare Advantage plan if it has a lower monthly premium by Medicare enrollment status

			Flag for Medicare		
			Enrolled in Medicare	Not enrolled in Medicare	Total
WIL: lowerMP	Extremely willing	Count	86	77	163
		% within Flag for Medicare	18.1%	32.1%	22.8%
	Very willing	Count	147	94	241
		% within Flag for Medicare	30.9%	39.2%	33.7%
	Somewhat willing	Count	145	55	200
		% within Flag for Medicare	30.5%	22.9%	27.9%
	Slightly willing	Count	62	12	74
		% within Flag for Medicare	13.0%	5.0%	10.3%
	Not at all willing	Count	36	2	38
		% within Flag for Medicare	7.6%	0.8%	5.3%
Total		Count	476	240	716
		% within Flag for Medicare	100.0%	100.0%	100.0%

Below are the responses to Q3a.a/Q3a by whether or not the respondent is retired based on the ETF sample file designation.   The difference between the two sub-groups is statistically significant $p < 0.01$ (Pearson Chi-Square is 15.940).

Willingness to explore a Medicare Advantage plan if it has a lower monthly premium

by retirement status
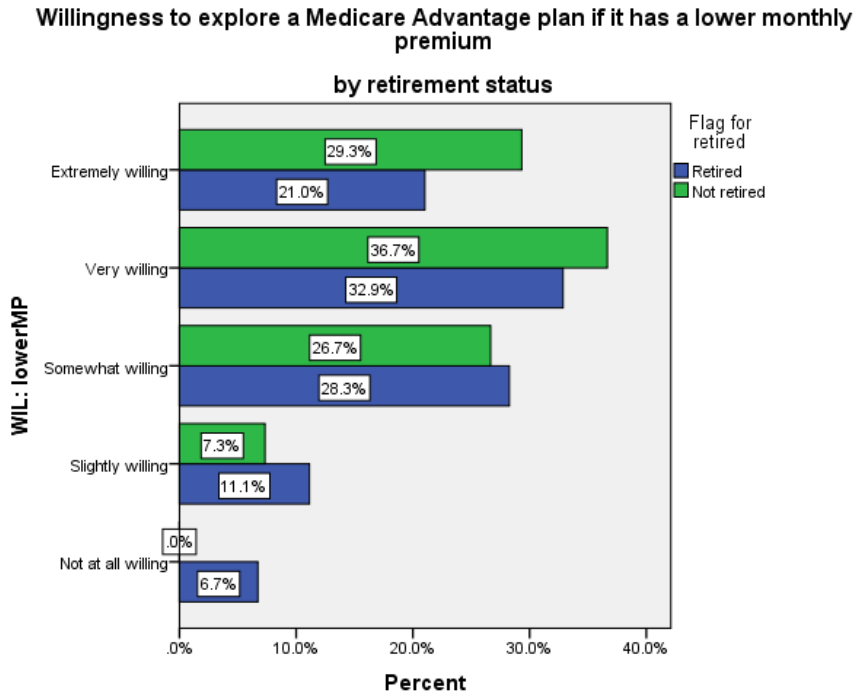
			Flag for retired		Total
			Retired	Not retired	
WIL: lowerMP	Extremely willing	Count	119	44	163
		% within Flag for retired	21.0%	29.3%	22.8%
	Very willing	Count	186	55	241
		% within Flag for retired	32.9%	36.7%	33.7%
	Somewhat willing	Count	160	40	200
		% within Flag for retired	28.3%	26.7%	27.9%
	Slightly willing	Count	63	11	74
		% within Flag for retired	11.1%	7.3%	10.3%
	Not at all willing	Count	38	0	38
		% within Flag for retired	6.7%	0.0%	5.3%
Total		Count	566	150	716
		% within Flag for retired	100.0%	100.0%	100.0%

Below are the responses to Q3a.a/Q3a by whether the respondent is/was employed by state or local government based on the ETF sample file designation. The difference between the two sub-groups is <u>not</u> statistically significant $p > 0.05$ (Pearson Chi-Square is 0.392).

Willingness to explore a Medicare Advantage plan if it has a lower monthly premium

by respondent's employer type

			Flag for employer		
			State	Local	Total
WIL: lowerMP	Extremely willing	Count	154	9	163
		% within Flag for employer	23.0%	19.6%	22.8%
	Very willing	Count	225	16	241
		% within Flag for employer	33.6%	34.8%	33.7%
	Somewhat willing	Count	187	13	200
		% within Flag for employer	27.9%	28.3%	27.9%
	Slightly willing	Count	69	5	74
		% within Flag for employer	10.3%	10.9%	10.3%
	Not at all willing	Count	35	3	38
		% within Flag for employer	5.2%	6.5%	5.3%
Total		Count	670	46	716
		% within Flag for employer	100.0%	100.0%	100.0%

Below are the responses to Q3a.a/Q3a by the respondent's sex based on the ETF sample file designation.   The difference between the two sub-groups is <u>not</u> statistically significant $p > 0.05$ (Pearson Chi-Square is 4.006).

Willingness to explore a Medicare Advantage plan if it has a lower monthly premium

by respondent's sex
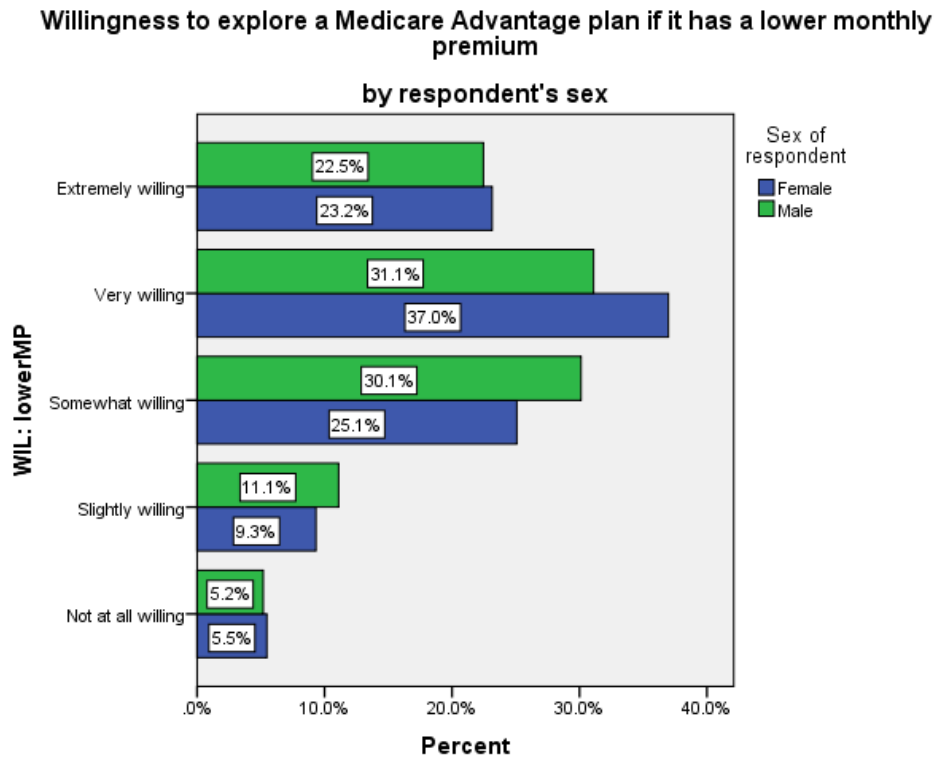
			Sex of respondent		
			Female	Male	Total
WIL: lowerMP	Extremely willing	Count	72	91	163
		% within Sex of respondent	23.2%	22.5%	22.8%
	Very willing	Count	115	126	241
		% within Sex of respondent	37.0%	31.1%	33.7%
	Somewhat willing	Count	78	122	200
		% within Sex of respondent	25.1%	30.1%	27.9%
	Slightly willing	Count	29	45	74
		% within Sex of respondent	9.3%	11.1%	10.3%
	Not at all willing	Count	17	21	38
		% within Sex of respondent	5.5%	5.2%	5.3%
Total		Count	311	405	716
		% within Sex of respondent	100.0%	100.0%	100.0%

Below are the responses to Q3a.a/Q3a by grouping respondents based on the region of the state they live in based on the address in ETF sample file designation. The difference between the sub-groups is not statistically significant $p > 0.05$ (Pearson Chi-Square is 14.668).
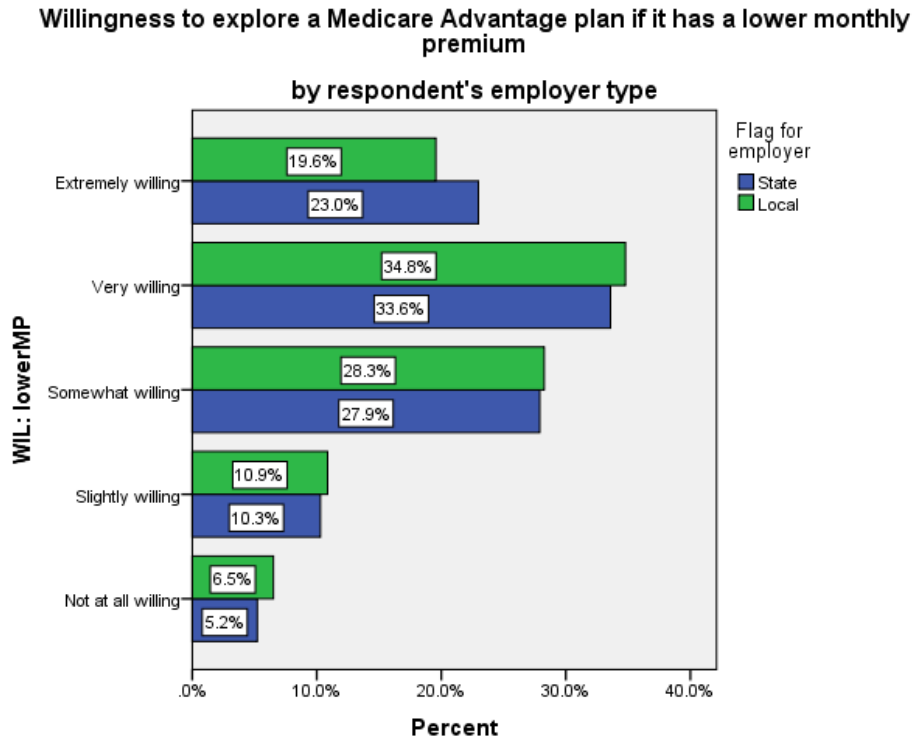

Willingness to explore a Medicare Advantage plan if it has a lower monthly premium
by ETF defined regions of Wisconsin
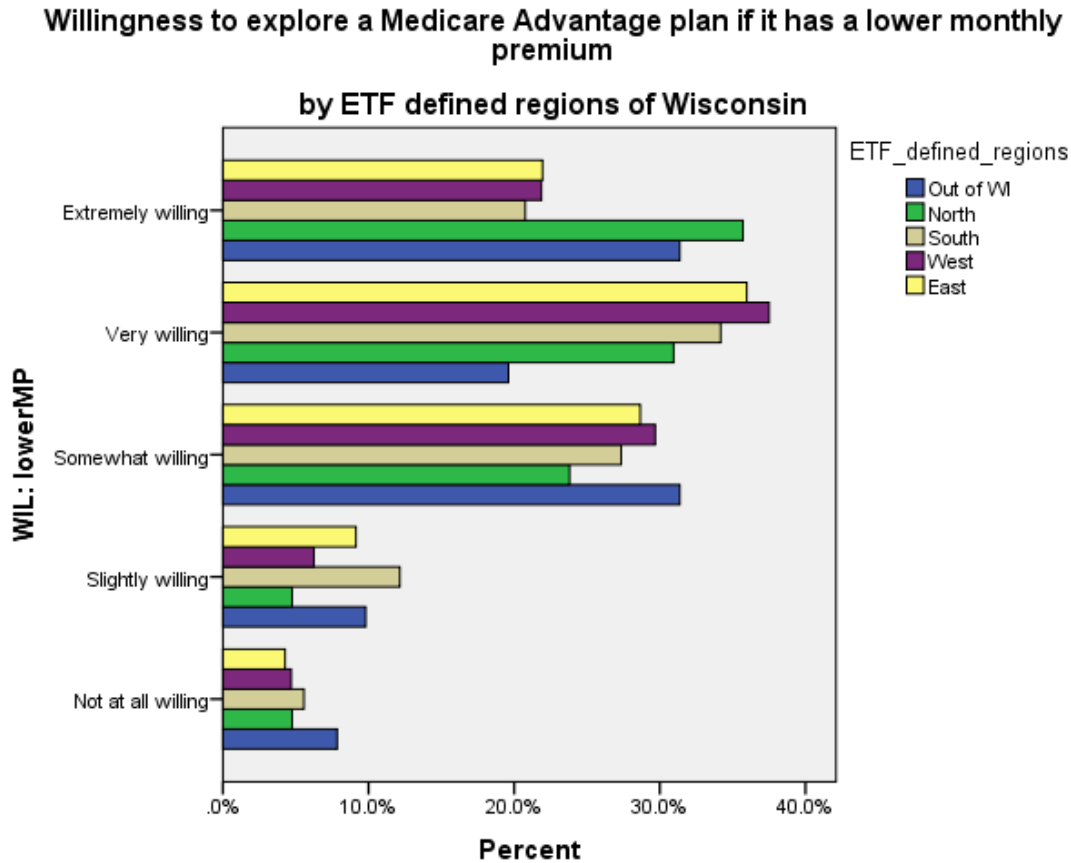
Crosstab

			ETF_defined_regions					
			Out of WI	North	South	West	East	Total
WIL: lowerMP	Extremely willing	Count	16	15	82	14	36	163
		% within ETF_defined_regions	31.4%	35.7%	20.8%	21.9%	22.0%	22.8%
	Very willing	Count	10	13	135	24	59	241
		% within ETF_defined_regions	19.6%	31.0%	34.2%	37.5%	36.0%	33.7%
	Somewhat willing	Count	16	10	108	19	47	200
		% within ETF_defined_regions	31.4%	23.8%	27.3%	29.7%	28.7%	27.9%
	Slightly willing	Count	5	2	48	4	15	74
		% within ETF_defined_regions	9.8%	4.8%	12.2%	6.3%	9.1%	10.3%
	Not at all willing	Count	4	2	22	3	7	38
		% within ETF_defined_regions	7.8%	4.8%	5.6%	4.7%	4.3%	5.3%
Total		Count	51	42	395	64	164	716
		% within ETF_defined_regions	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Below are the responses to Q3a.a/Q3a by how the respondents reported that they either are currently paying for or plan on paying for their monthly health insurance premiums (Q7/Q5). The differences between the sub-groups are statistically significant $p < 0.01$ (Pearson Chi-Square is 48.583).

Willingness to explore a Medicare Advantage plan if it has a lower monthly premium

by payment method

Crosstab

			payforMHIP					
			You will use your accrued sick leave credit account	You will use your Wisconsin retirement system annuity payment	You will pay the health plan directly	Some other way. Please tell us:	Not sure	Total
WIL: lowerMP	Extremely willing	Count	91	30	18	8	11	158
		% within payforMHIP	22.0%	17.0%	32.7%	34.8%	30.6%	22.4%
	Very willing	Count	145	45	21	12	17	240
		% within payforMHIP	35.0%	25.6%	38.2%	52.2%	47.2%	34.1%
	Somewhat willing	Count	124	53	9	1	7	194
		% within payforMHIP	30.0%	30.1%	16.4%	4.3%	19.4%	27.6%
	Slightly willing	Count	39	29	4	1	1	74
		% within payforMHIP	9.4%	16.5%	7.3%	4.3%	2.8%	10.5%
	Not at all willing	Count	15	19	3	1	0	38
		% within payforMHIP	3.6%	10.8%	5.5%	4.3%	0.0%	5.4%
Total		Count	414	176	55	23	36	704
		% within payforMHIP	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

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Below are the overall results from respondents to both surveys for question 3a.b/3b, but only for those respondents who are not currently enrolled in a Medicare Advantage plan.

Willingness to explore a Medicare Advantage plan if it requires copayments but has lower monthly costs

| 9.02% Extremely willing |
| 16.92% Not at all willing |
| 23.02% Very willing |
| 15.40% Slightly willing |
| 35.64% Somewhat willing |

Q3a.b / Q3b. willingness to explore a Medicare Advantage plan if…it requires copayments but has lower monthly costs

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Extremely willing	65	7.2	9.1	9.1
	Very willing	166	18.3	23.1	32.2
	Somewhat willing	256	28.2	35.7	67.8
	Slightly willing	111	12.2	15.5	83.3
	Not at all willing	120	13.2	16.7	100.0
	Total	718	79.1	100.0	
Missing	BLANK	36	4.0		
	System	154	17.0		
	Total	190	20.9		
Total		908	100.0		

The UWSC ran crosstabs on Q3a.b/Q3b by the following sub-groupings of respondents; Medicare enrollment status, retirement status, state or local employer, respondent's sex, the ETF defined regions of WI (including those living outside of WI), and by the respondents' answers to how they either are paying or plan to play for the monthly health insurance premiums.

There were statistically significant differences across sub-groups for the following sub-groups; Medicare enrollment status, retirement status, and how they either are paying or plan to play for the monthly health insurance premiums.   The results of those cross-tabulations are on the following pages.

Below are the responses to Q3a.b/Q3b by whether or not the respondent is enrolled in Medicare based on the ETF sample file designation.   The difference between the two sub-groups is statistically significant $p < 0.01$ (Pearson Chi-Square is 102.982).
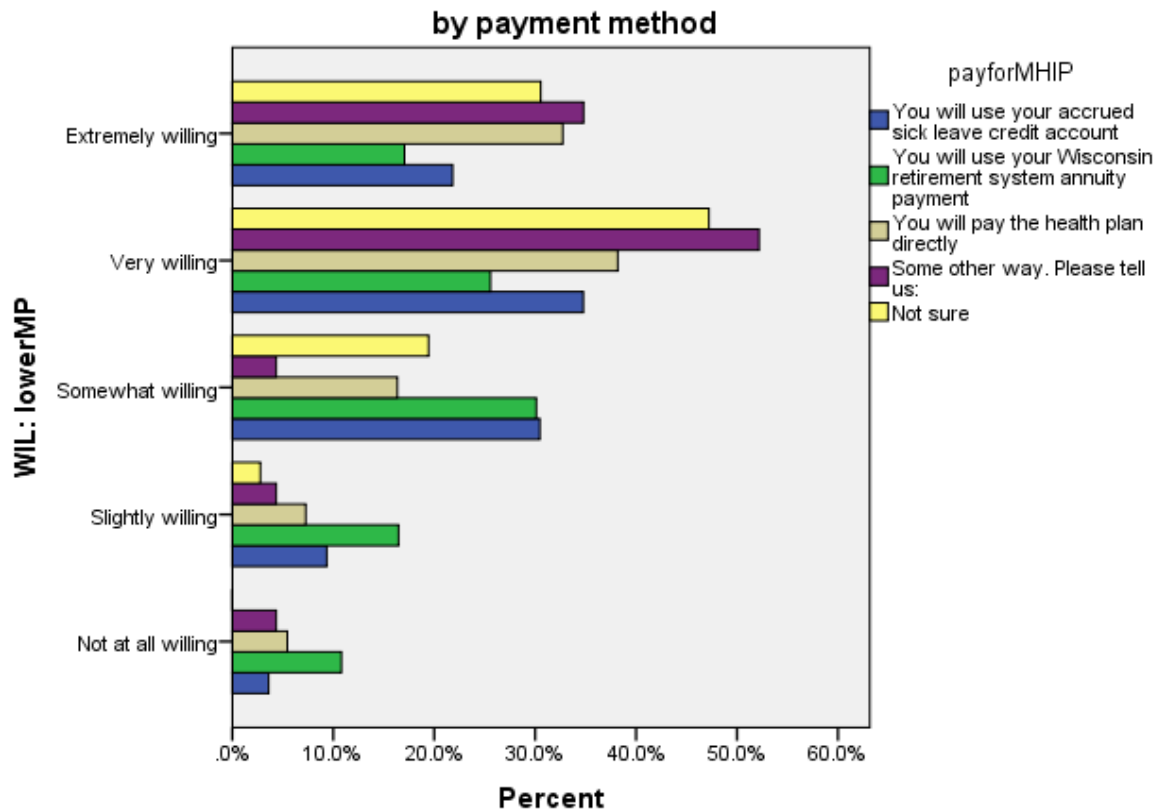
Willingness to explore a Medicare Advantage plan if it requires copayments but has lower monthly costs

by Medicare enrollment status
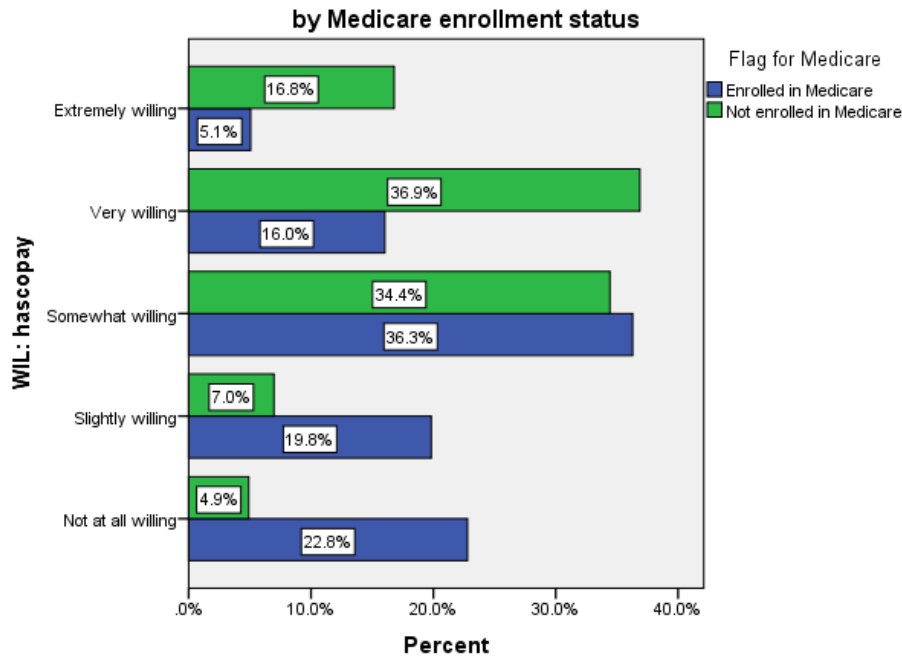
			Flag for Medicare		
			Enrolled in Medicare	Not enrolled in Medicare	Total
WIL: hascopay	Extremely willing	Count	24	41	65
		% within Flag for Medicare	5.1%	16.8%	9.1%
	Very willing	Count	76	90	166
		% within Flag for Medicare	16.0%	36.9%	23.1%
	Somewhat willing	Count	172	84	256
		% within Flag for Medicare	36.3%	34.4%	35.7%
	Slightly willing	Count	94	17	111
		% within Flag for Medicare	19.8%	7.0%	15.5%
	Not at all willing	Count	108	12	120
		% within Flag for Medicare	22.8%	4.9%	16.7%
Total		Count	474	244	718
		% within Flag for Medicare	100.0%	100.0%	100.0%

Below are the responses to Q3a.b/Q3b by whether or not the respondent is retired based on the ETF sample file designation. The difference between the two sub-groups is statistically significant $p < 0.01$ (Pearson Chi-Square is 61.322).

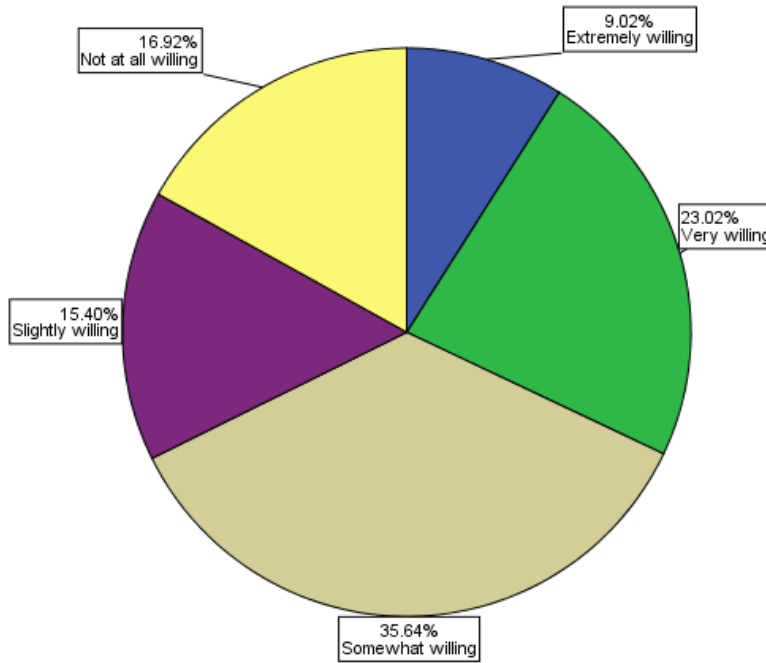**Willingness to explore a Medicare Advantage plan if it requires copayments but has lower monthly costs**

by retirement status
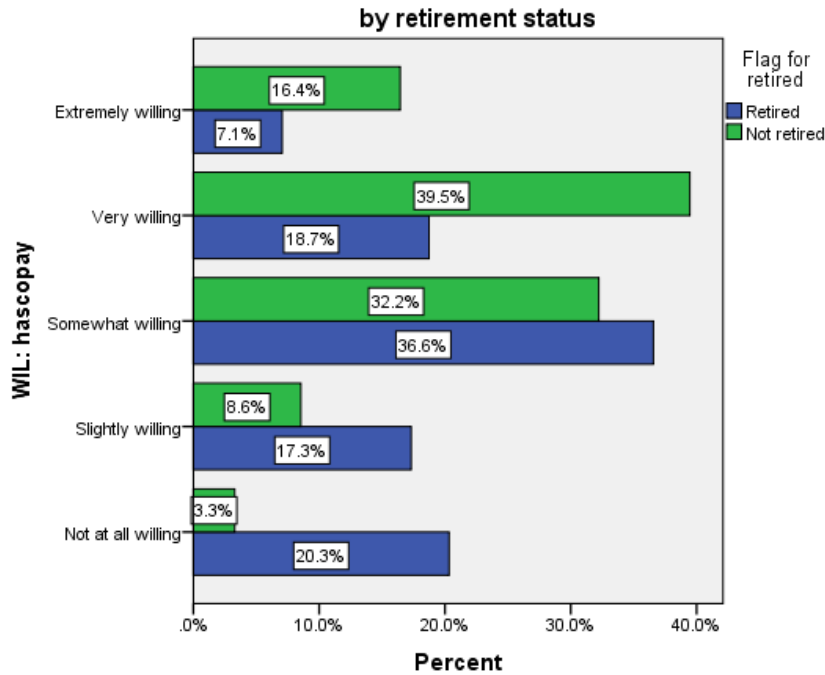
			Flag for retired		
			Retired	Not retired	Total
WIL: hascopay	Extremely willing	Count	40	25	65
		% within Flag for retired	7.1%	16.4%	9.1%
	Very willing	Count	106	60	166
		% within Flag for retired	18.7%	39.5%	23.1%
	Somewhat willing	Count	207	49	256
		% within Flag for retired	36.6%	32.2%	35.7%
	Slightly willing	Count	98	13	111
		% within Flag for retired	17.3%	8.6%	15.5%
	Not at all willing	Count	115	5	120
		% within Flag for retired	20.3%	3.3%	16.7%
Total		Count	566	152	718
		% within Flag for retired	100.0%	100.0%	100.0%

Below are the responses to Q3a.b/Q3b by whether the respondent is/was employed by state or local government based on the ETF sample file designation. The difference between the two sub-groups is not statistically significant $p > 0.05$ (Pearson Chi-Square is 0.719).

Willingness to explore a Medicare Advantage plan if it requires copayments but has lower monthly costs
by respondent's employer type
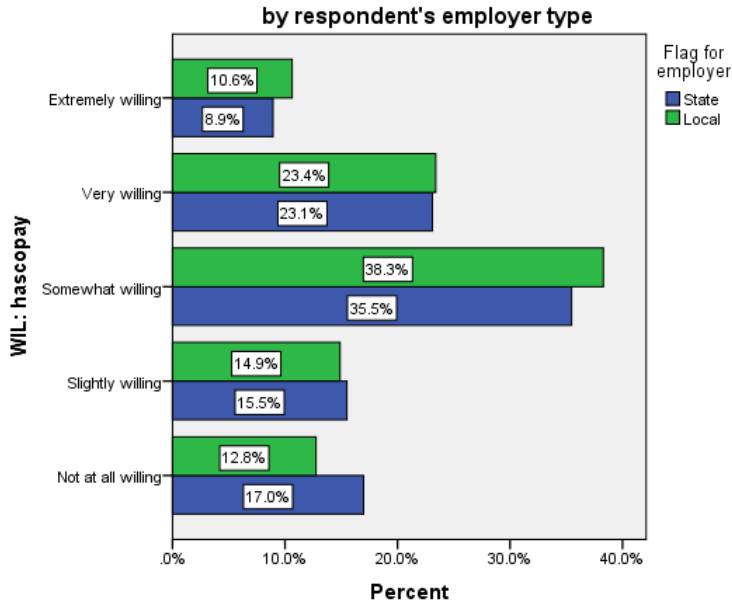
			Flag for employer		Total
			State	Local	
WIL: hascopay	Extremely willing	Count	60	5	65
		% within Flag for employer	8.9%	10.6%	9.1%
	Very willing	Count	155	11	166
		% within Flag for employer	23.1%	23.4%	23.1%
	Somewhat willing	Count	238	18	256
		% within Flag for employer	35.5%	38.3%	35.7%
	Slightly willing	Count	104	7	111
		% within Flag for employer	15.5%	14.9%	15.5%
	Not at all willing	Count	114	6	120
		% within Flag for employer	17.0%	12.8%	16.7%
Total		Count	671	47	718
		% within Flag for employer	100.0%	100.0%	100.0%

Below are the responses to Q3a.b/Q3b by the respondent's sex based on the ETF sample file designation.   The difference between the two sub-groups is <u>not</u> statistically significant *p* > 0.05 (Pearson Chi-Square is 3.259).

Willingness to explore a Medicare Advantage plan if it requires copayments but has lower monthly costs

by respondent's sex
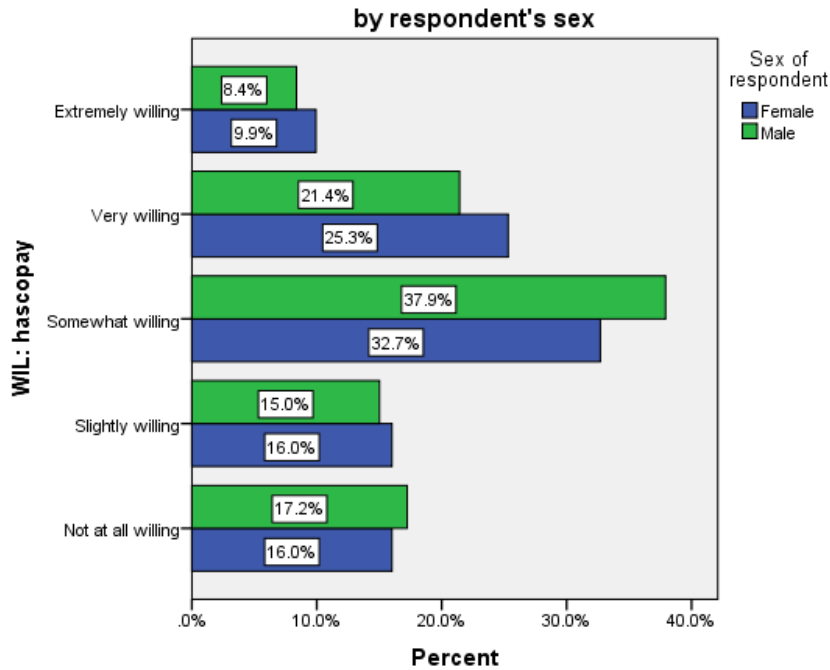
			Sex of respondent		Total
			Female	Male	
WIL: hascopay	Extremely willing	Count	31	34	65
		% within Sex of respondent	9.9%	8.4%	9.1%
	Very willing	Count	79	87	166
		% within Sex of respondent	25.3%	21.4%	23.1%
	Somewhat willing	Count	102	154	256
		% within Sex of respondent	32.7%	37.9%	35.7%
	Slightly willing	Count	50	61	111
		% within Sex of respondent	16.0%	15.0%	15.5%
	Not at all willing	Count	50	70	120
		% within Sex of respondent	16.0%	17.2%	16.7%
Total		Count	312	406	718
		% within Sex of respondent	100.0%	100.0%	100.0%

Below are the responses to Q3a.b/Q3b by grouping respondents based on the region of the state they live in based on the address in ETF sample file designation.   The difference between the sub-groups is not statistically significant $p > 0.05$ (Pearson Chi-Square is 13.294).

Willingness to explore a Medicare Advantage plan if it requires copayments but has lower monthly costs

by ETF defined regions of Wisconsin
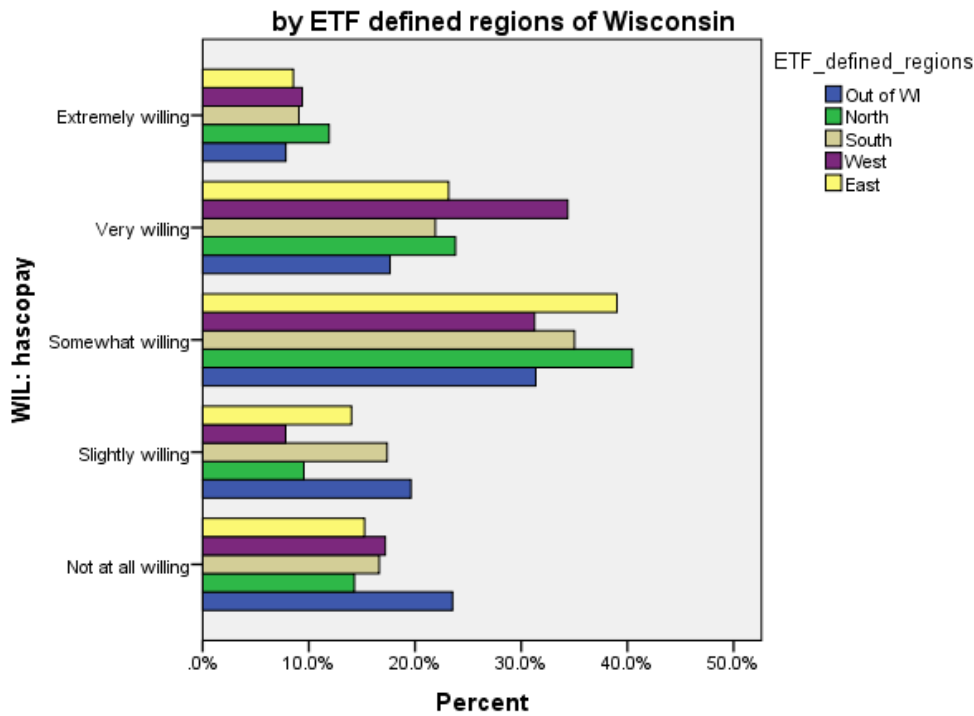
Crosstab

| | | | ETF_defined_regions | | | | | |
			Out of WI	North	South	West	East	Total
WIL: hascopay	Extremely willing	Count	4	5	36	6	14	65
		% within ETF_defined_regions	7.8%	11.9%	9.1%	9.4%	8.5%	9.1%
	Very willing	Count	9	10	87	22	38	166
		% within ETF_defined_regions	17.6%	23.8%	21.9%	34.4%	23.2%	23.1%
	Somewhat willing	Count	16	17	139	20	64	256
		% within ETF_defined_regions	31.4%	40.5%	35.0%	31.3%	39.0%	35.7%
	Slightly willing	Count	10	4	69	5	23	111
		% within ETF_defined_regions	19.6%	9.5%	17.4%	7.8%	14.0%	15.5%
	Not at all willing	Count	12	6	66	11	25	120
		% within ETF_defined_regions	23.5%	14.3%	16.6%	17.2%	15.2%	16.7%
Total		Count	51	42	397	64	164	718
		% within ETF_defined_regions	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

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Below are the responses to Q3a.b/Q3b by how the respondents reported that they either are currently paying for or plan on paying for their monthly health insurance premiums (Q7/Q5). The differences between the sub-groups are statistically significant $p > 0.01$ (Pearson Chi-Square is 60.370).

Willingness to explore a Medicare Advantage plan if it requires copayments but has lower monthly costs

by payment method

Crosstab

			You will use your accrued sick leave credit account	You will use your Wisconsin retirement system annuity payment	You will pay the health plan directly	Some other way. Please tell us:	Not sure	Total
					payforMHIP			
WIL: hascopay	Extremely willing	Count	38	9	5	4	6	62
		% within payforMHIP	9.2%	5.1%	9.1%	17.4%	16.2%	8.8%
	Very willing	Count	95	26	21	9	14	165
		% within payforMHIP	22.9%	14.8%	38.2%	39.1%	37.8%	23.4%
	Somewhat willing	Count	164	54	15	5	13	251
		% within payforMHIP	39.5%	30.7%	27.3%	21.7%	35.1%	35.6%
	Slightly willing	Count	63	34	8	3	3	111
		% within payforMHIP	15.2%	19.3%	14.5%	13.0%	8.1%	15.7%
	Not at all willing	Count	55	53	6	2	1	117
		% within payforMHIP	13.3%	30.1%	10.9%	8.7%	2.7%	16.6%
Total		Count	415	176	55	23	37	706
		% within payforMHIP	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

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Below are the overall results from respondents to both surveys for question 3a.c/3c, but only for those respondents who are <u>not</u> currently enrolled in a Medicare Advantage plan.

Willingness to explore a Medicare Advantage plan if it has nationwide coverage
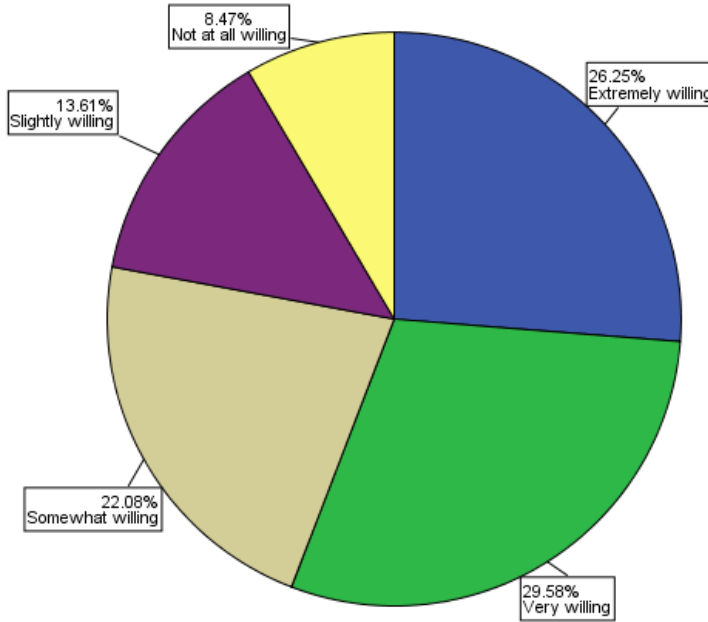
Q3a.c / Q3c. willingness to explore a Medicare Advantage plan if…it has nationwide coverage

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Extremely willing	187	20.6	26.1	26.1
	Very willing	213	23.5	29.7	55.8
	Somewhat willing	158	17.4	22.0	77.8
	Slightly willing	98	10.8	13.7	91.5
	Not at all willing	61	6.7	8.5	100.0
	Total	717	79.0	100.0	
Missing	BLANK	37	4.1		
	System	154	17.0		
	Total	191	21.0		
Total		908	100.0		

The UWSC ran crosstabs on Q3a.c/Q3c by the following sub-groupings of respondents; Medicare enrollment status, retirement status, state or local employer, respondent's sex, and the ETF defined regions of WI (including those living outside of WI).

There were statistically significant differences across sub-groups for the following sub-groups; Medicare enrollment status, whether the respondent was a state or local employee, and the ETF defined regions of WI. The results of those cross-tabulations are on the following pages.

Below are the responses to Q3a.c/Q3c by whether or not the respondent is enrolled in Medicare based on the ETF sample file designation. The difference between the two sub-groups is statistically significant $p < 0.01$ (Pearson Chi-Square is 13.721).

Willingness to explore a Medicare Advantage plan if it has nationwide coverage
by Medicare enrollment status
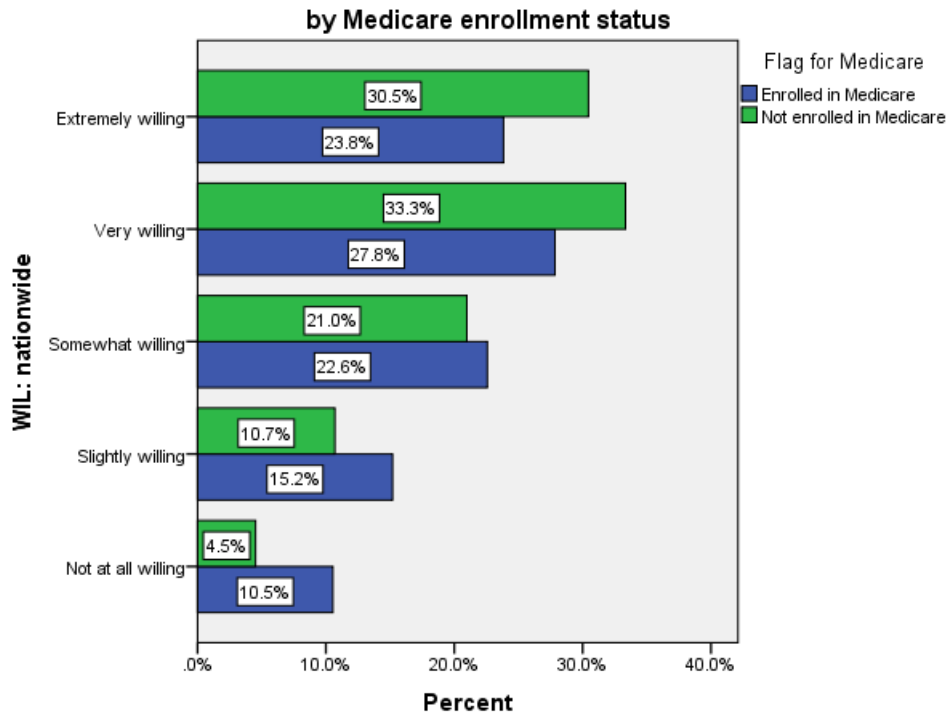
| | | | Flag for Medicare | | |
			Enrolled in Medicare	Not enrolled in Medicare	Total
WIL: nationwide	Extremely willing	Count	113	74	187
		% within Flag for Medicare	23.8%	30.5%	26.1%
	Very willing	Count	132	81	213
		% within Flag for Medicare	27.8%	33.3%	29.7%
	Somewhat willing	Count	107	51	158
		% within Flag for Medicare	22.6%	21.0%	22.0%
	Slightly willing	Count	72	26	98
		% within Flag for Medicare	15.2%	10.7%	13.7%
	Not at all willing	Count	50	11	61
		% within Flag for Medicare	10.5%	4.5%	8.5%
Total		Count	474	243	717
		% within Flag for Medicare	100.0%	100.0%	100.0%

Below are the responses to Q3a.c/Q3c by whether or not the respondent is retired based on the ETF sample file designation. The difference between the two sub-groups is not statistically significant $p > 0.05$ (Pearson Chi-Square is 6.445).

Willingness to explore a Medicare Advantage plan if it has nationwide coverage
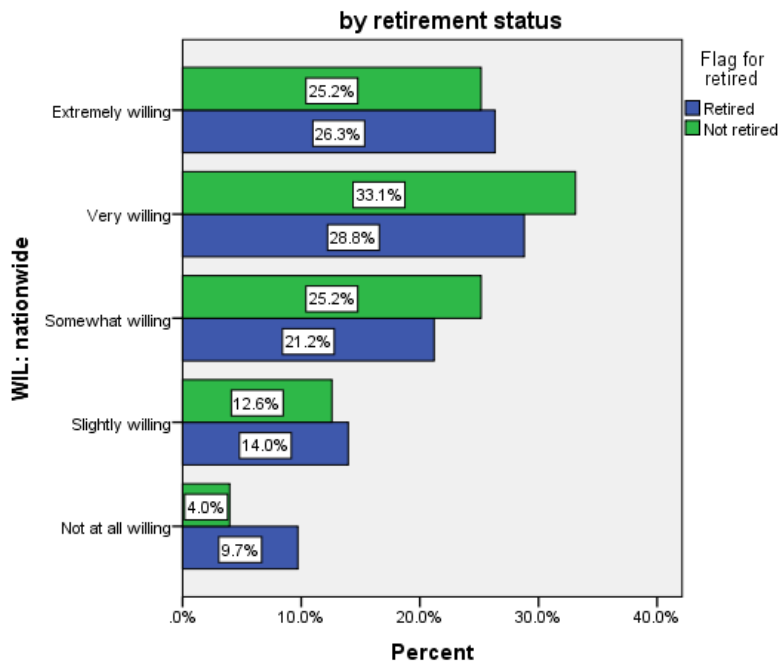
			Flag for retired		
			Retired	Not retired	Total
WIL: nationwide	Extremely willing	Count	149	38	187
		% within Flag for retired	26.3%	25.2%	26.1%
	Very willing	Count	163	50	213
		% within Flag for retired	28.8%	33.1%	29.7%
	Somewhat willing	Count	120	38	158
		% within Flag for retired	21.2%	25.2%	22.0%
	Slightly willing	Count	79	19	98
		% within Flag for retired	14.0%	12.6%	13.7%
	Not at all willing	Count	55	6	61
		% within Flag for retired	9.7%	4.0%	8.5%
Total		Count	566	151	717
		% within Flag for retired	100.0%	100.0%	100.0%

Below are the responses to Q3a.c/Q3c by whether the respondent is/was employed by state or local government based on the ETF sample file designation. The difference between the two sub-groups is not statistically significant $p > 0.05$ (Pearson Chi-Square is 8.859).

Willingness to explore a Medicare Advantage plan if it has nationwide coverage by respondent's employer type
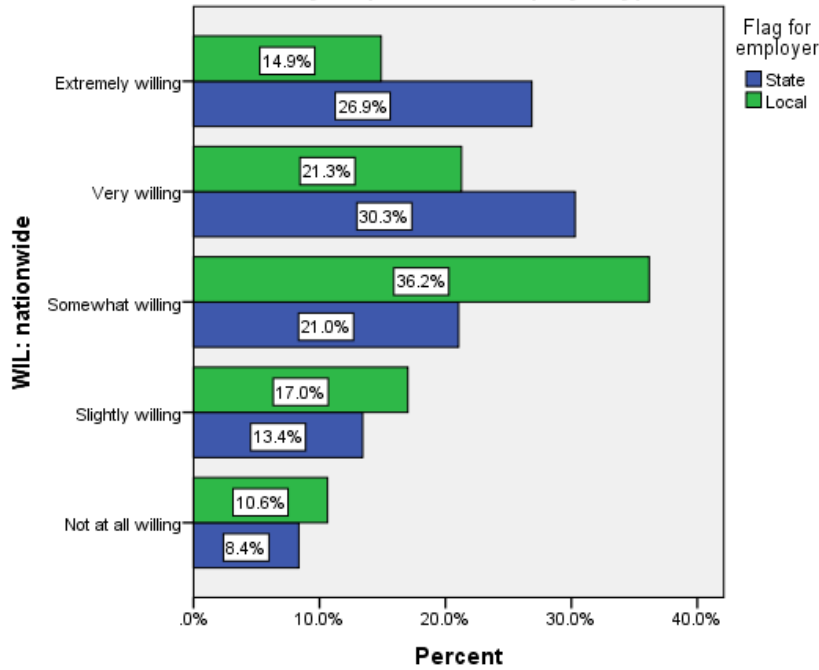
			Flag for employer		Total
			State	Local	
WIL: nationwide	Extremely willing	Count	180	7	187
		% within Flag for employer	26.9%	14.9%	26.1%
	Very willing	Count	203	10	213
		% within Flag for employer	30.3%	21.3%	29.7%
	Somewhat willing	Count	141	17	158
		% within Flag for employer	21.0%	36.2%	22.0%
	Slightly willing	Count	90	8	98
		% within Flag for employer	13.4%	17.0%	13.7%
	Not at all willing	Count	56	5	61
		% within Flag for employer	8.4%	10.6%	8.5%
Total		Count	670	47	717
		% within Flag for employer	100.0%	100.0%	100.0%

Below are the responses to Q3a.c/Q3c by the respondent's sex based on the ETF sample file designation. The difference between the two sub-groups is <u>not</u> statistically significant $p > 0.05$ (Pearson Chi-Square is 1.705).

Willingness to explore a Medicare Advantage plan if it has nationwide coverage

by respondent's sex
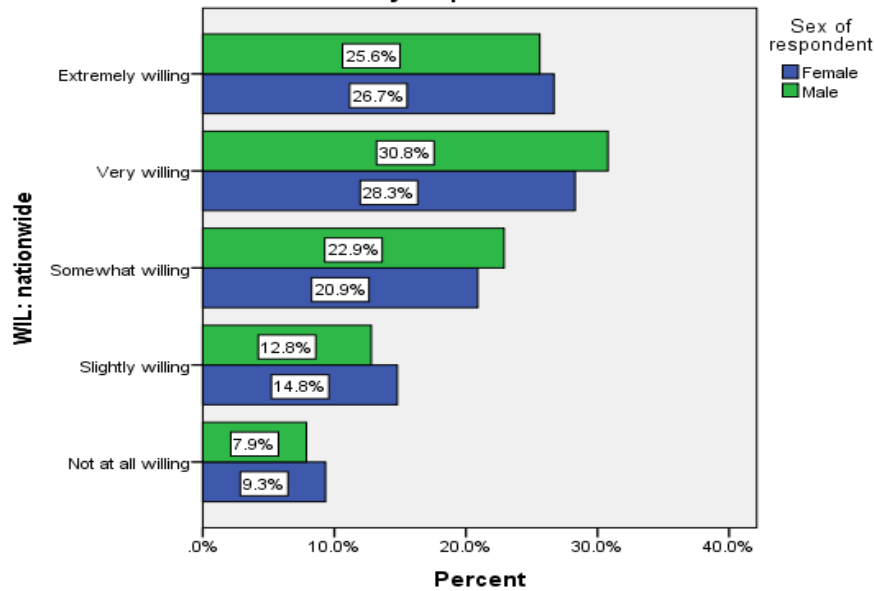
			Sex of respondent		Total
			Female	Male	
WIL: nationwide	Extremely willing	Count	83	104	187
		% within Sex of respondent	26.7%	25.6%	26.1%
	Very willing	Count	88	125	213
		% within Sex of respondent	28.3%	30.8%	29.7%
	Somewhat willing	Count	65	93	158
		% within Sex of respondent	20.9%	22.9%	22.0%
	Slightly willing	Count	46	52	98
		% within Sex of respondent	14.8%	12.8%	13.7%
	Not at all willing	Count	29	32	61
		% within Sex of respondent	9.3%	7.9%	8.5%
Total		Count	311	406	717
		% within Sex of respondent	100.0%	100.0%	100.0%

Below are the responses to Q3a.c/Q3c by grouping respondents based on the region of the state they live in based on the address in ETF sample file designation. The difference between the sub-groups is statistically significant $p < 0.01$ (Pearson Chi-Square is 56.168).


Willingness to explore a Medicare Advantage plan if it has nationwide coverage by ETF defined regions of Wisconsin
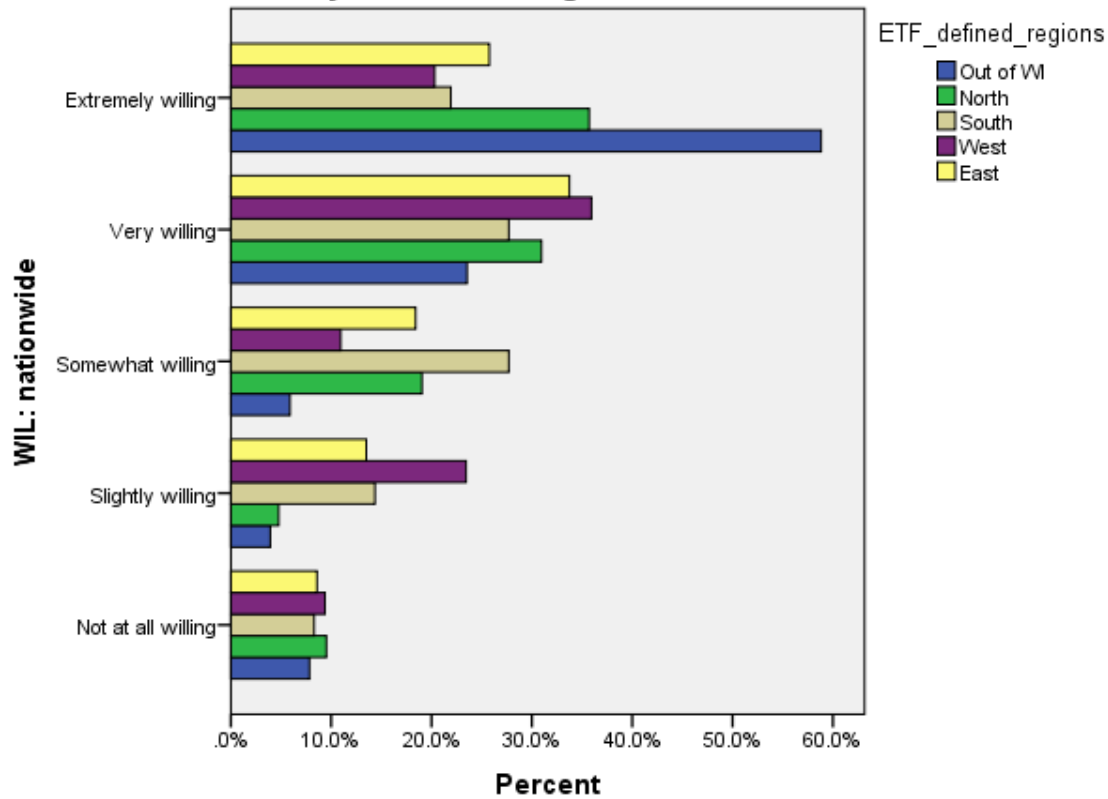
Crosstab

			ETF_defined_regions					
			Out of WI	North	South	West	East	Total
WIL: nationwide	Extremely willing	Count	30	15	87	13	42	187
		% within ETF_defined_regions	58.8%	35.7%	21.9%	20.3%	25.8%	26.1%
	Very willing	Count	12	13	110	23	55	213
		% within ETF_defined_regions	23.5%	31.0%	27.7%	35.9%	33.7%	29.7%
	Somewhat willing	Count	3	8	110	7	30	158
		% within ETF_defined_regions	5.9%	19.0%	27.7%	10.9%	18.4%	22.0%
	Slightly willing	Count	2	2	57	15	22	98
		% within ETF_defined_regions	3.9%	4.8%	14.4%	23.4%	13.5%	13.7%
	Not at all willing	Count	4	4	33	6	14	61
		% within ETF_defined_regions	7.8%	9.5%	8.3%	9.4%	8.6%	8.5%
Total		Count	51	42	397	64	163	717
		% within ETF_defined_regions	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Below are the overall results from respondents to both surveys question 3a.d/3d, but only for those respondents who are <u>not</u> currently enrolled in a Medicare Advantage plan.

Willingness to explore a Medicare Advantage plan if it offers Silver Sneakers
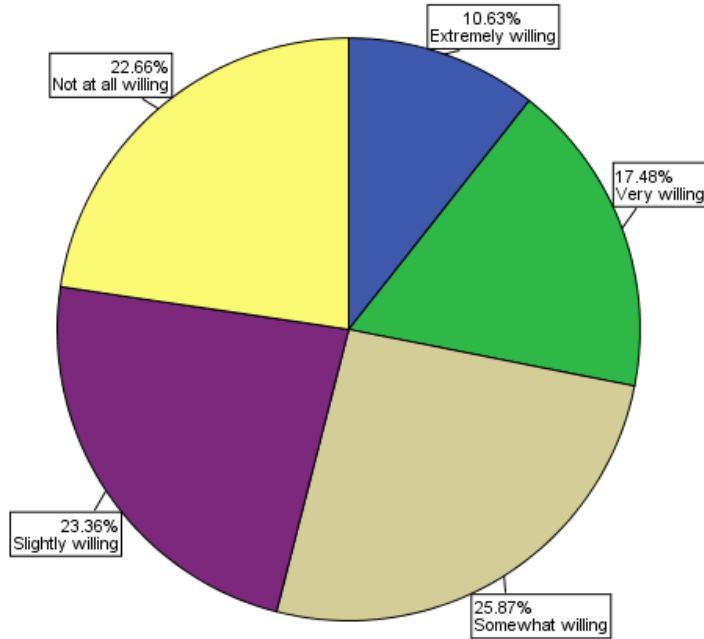
Q3a.d / Q3d. willingness to explore a Medicare Advantage plan if…it offers "Silver Sneakers"

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Extremely willing	76	8.4	10.7	10.7
	Very willing	125	13.8	17.6	28.2
	Somewhat willing	185	20.4	26.0	54.2
	Slightly willing	166	18.3	23.3	77.5
	Not at all willing	160	17.6	22.5	100.0
	Total	712	78.4	100.0	
Missing	DON'T KNOW	1	.1		
	BLANK	41	4.5		
	System	154	17.0		
	Total	196	21.6		
Total		908	100.0		

The UWSC ran crosstabs on Q3a.d/Q3d by the following sub-groupings of respondents; Medicare enrollment status, retirement status, state or local employer, respondent's sex, and the ETF defined regions of WI (including those living outside of WI).

There were statistically significant differences across sub-groups for Medicare enrollment status. The results of those cross-tabulations are on the following pages.

Below are the responses to Q3a.d/Q3d by whether or not the respondent is enrolled in Medicare based on the ETF sample file designation. The difference between the two sub-groups is statistically significant $p < 0.01$ (Pearson Chi-Square is 17.544).

Willingness to explore a Medicare Advantage plan if it offers Silver Sneakers by Medicare enrollment status
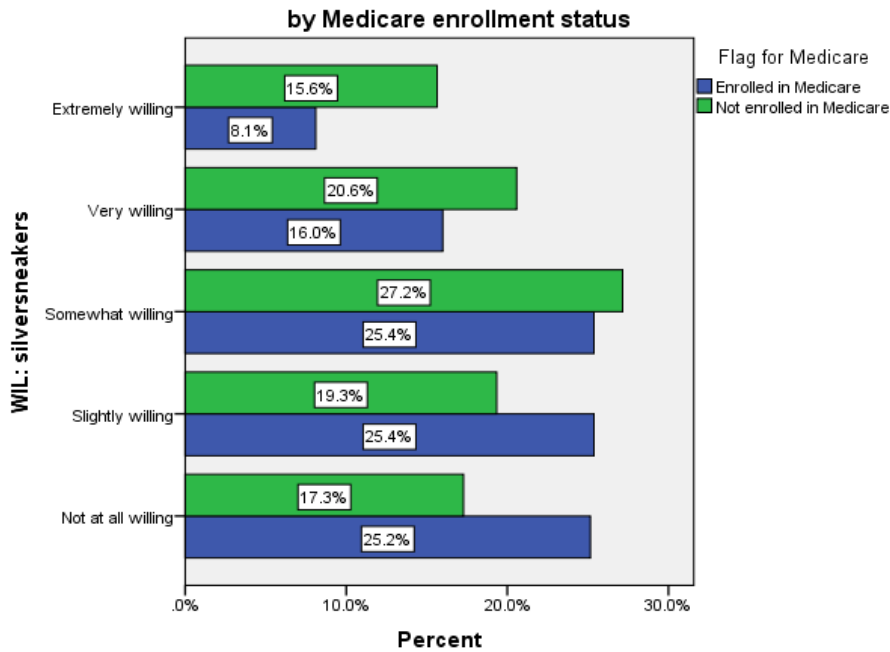
			Flag for Medicare		
			Enrolled in Medicare	Not enrolled in Medicare	Total
WIL: silversneakers	Extremely willing	Count	38	38	76
		% within Flag for Medicare	8.1%	15.6%	10.7%
	Very willing	Count	75	50	125
		% within Flag for Medicare	16.0%	20.6%	17.6%
	Somewhat willing	Count	119	66	185
		% within Flag for Medicare	25.4%	27.2%	26.0%
	Slightly willing	Count	119	47	166
		% within Flag for Medicare	25.4%	19.3%	23.3%
	Not at all willing	Count	118	42	160
		% within Flag for Medicare	25.2%	17.3%	22.5%
Total		Count	469	243	712
		% within Flag for Medicare	100.0%	100.0%	100.0%

Below are the responses to Q3a.d/Q3d by whether or not the respondent is retired based on the ETF sample file designation.   The difference between the two sub-groups is not statistically significant $p > 0.05$ (Pearson Chi-Square is 8.715).

Willingness to explore a Medicare Advantage plan if it offers Silver Sneakers
by retirement status
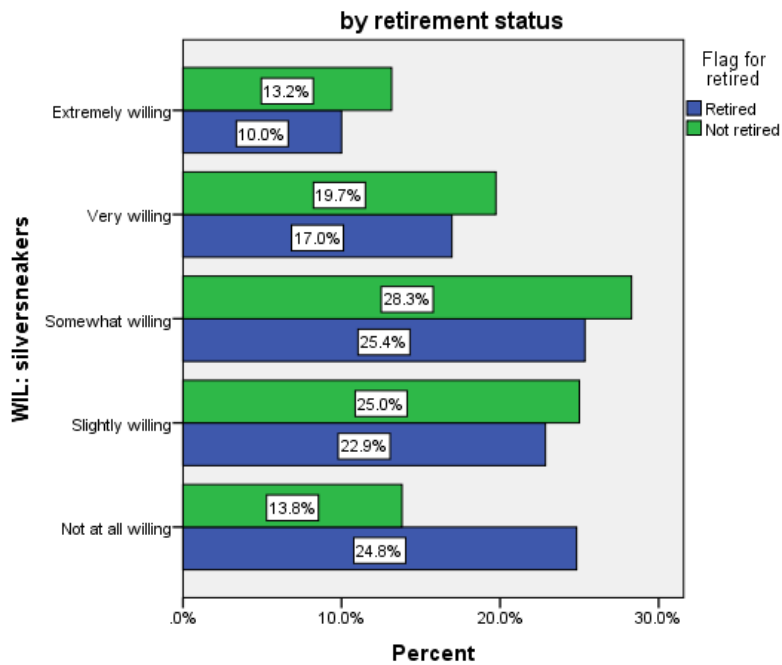
			Flag for retired		
			Retired	Not retired	Total
WIL: silversneakers	Extremely willing	Count	56	20	76
		% within Flag for retired	10.0%	13.2%	10.7%
	Very willing	Count	95	30	125
		% within Flag for retired	17.0%	19.7%	17.6%
	Somewhat willing	Count	142	43	185
		% within Flag for retired	25.4%	28.3%	26.0%
	Slightly willing	Count	128	38	166
		% within Flag for retired	22.9%	25.0%	23.3%
	Not at all willing	Count	139	21	160
		% within Flag for retired	24.8%	13.8%	22.5%
Total		Count	560	152	712
		% within Flag for retired	100.0%	100.0%	100.0%

Below are the responses to Q3a.d/Q3d by whether the respondent is/was employed by state or local government based on the ETF sample file designation.   The difference between the two sub-groups is <u>not</u> statistically significant *p* > 0.05 (Pearson Chi-Square is 3.781).

Willingness to explore a Medicare Advantage plan if it offers Silver Sneakers
by respondent's employer type
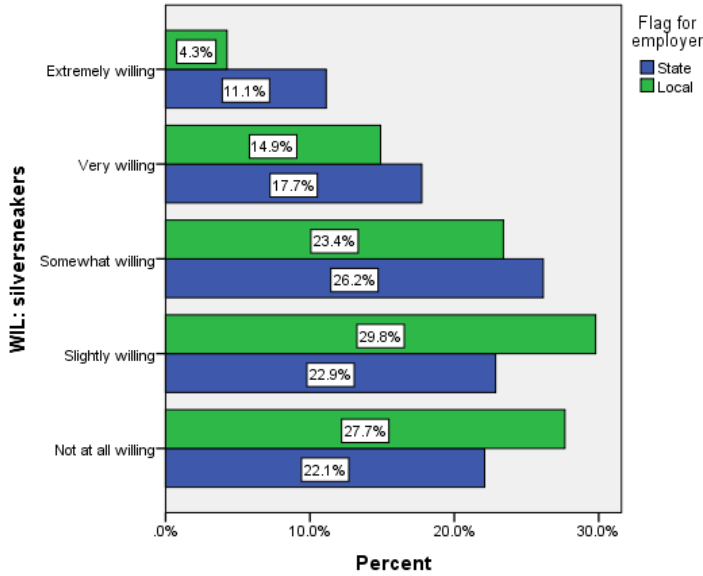
			Flag for employer		Total
			State	Local	
WIL: silversneakers	Extremely willing	Count	74	2	76
		% within Flag for employer	11.1%	4.3%	10.7%
	Very willing	Count	118	7	125
		% within Flag for employer	17.7%	14.9%	17.6%
	Somewhat willing	Count	174	11	185
		% within Flag for employer	26.2%	23.4%	26.0%
	Slightly willing	Count	152	14	166
		% within Flag for employer	22.9%	29.8%	23.3%
	Not at all willing	Count	147	13	160
		% within Flag for employer	22.1%	27.7%	22.5%
Total		Count	665	47	712
		% within Flag for employer	100.0%	100.0%	100.0%

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Below are the responses to Q3a.d/Q3d by the respondent's sex based on the ETF sample file designation.   The difference between the two sub-groups is <u>not</u> statistically significant $p > 0.05$ (Pearson Chi-Square is 4.875).

Willingness to explore a Medicare Advantage plan if it offers Silver Sneakers

by respondent's sex
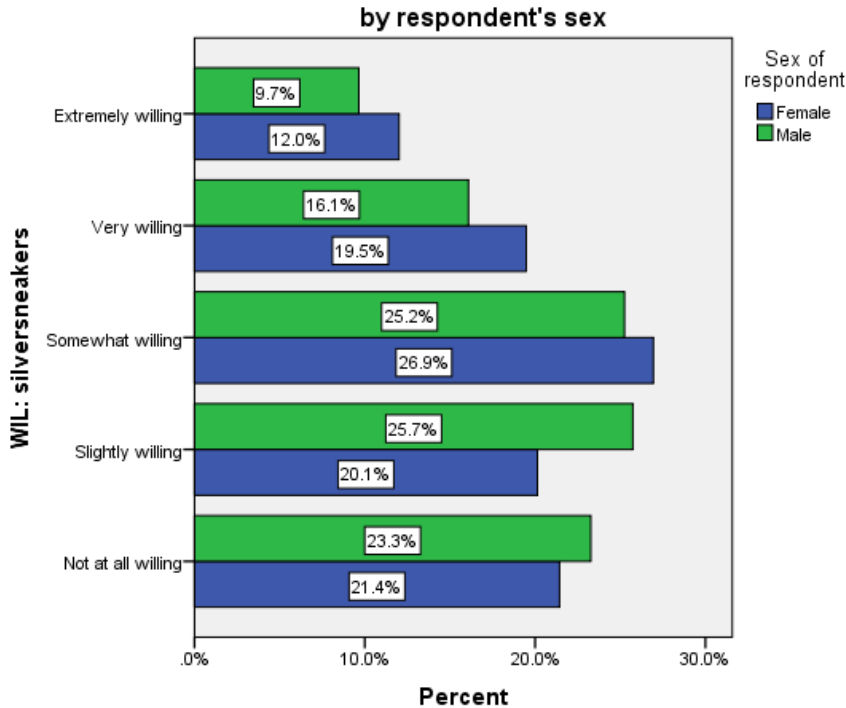
			Sex of respondent		Total
			Female	Male	
WIL: silversneakers	Extremely willing	Count	37	39	76
		% within Sex of respondent	12.0%	9.7%	10.7%
	Very willing	Count	60	65	125
		% within Sex of respondent	19.5%	16.1%	17.6%
	Somewhat willing	Count	83	102	185
		% within Sex of respondent	26.9%	25.2%	26.0%
	Slightly willing	Count	62	104	166
		% within Sex of respondent	20.1%	25.7%	23.3%
	Not at all willing	Count	66	94	160
		% within Sex of respondent	21.4%	23.3%	22.5%
Total		Count	308	404	712
		% within Sex of respondent	100.0%	100.0%	100.0%

Below are the responses to Q3a.d/Q3d by grouping respondents based on the region of the state they live in based on the address in ETF sample file designation. The difference between the sub-groups is <u>not</u> statistically significant $p > 0.05$ (Pearson Chi-Square is 17.242).

Willingness to explore a Medicare Advantage plan if it offers Silver Sneakers by ETF defined regions of Wisconsin
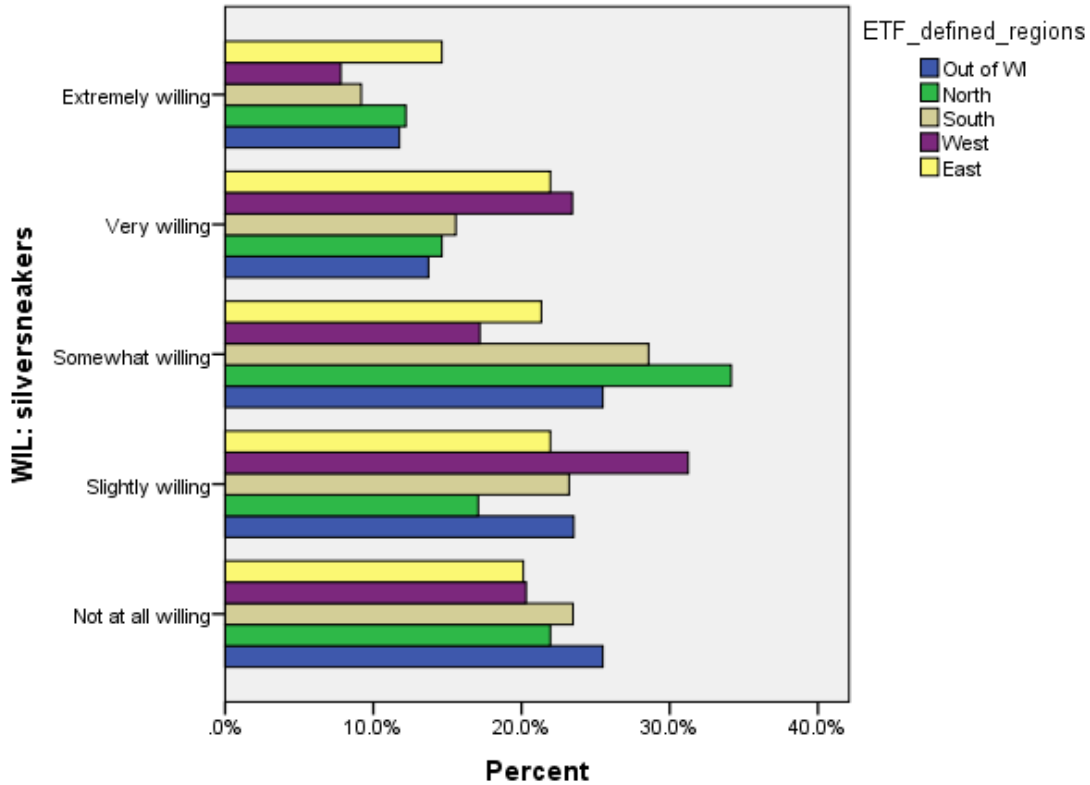
Crosstab

			ETF_defined_regions					
			Out of WI	North	South	West	East	Total
WIL: silversneakers	Extremely willing	Count	6	5	36	5	24	76
		% within ETF_defined_regions	11.8%	12.2%	9.2%	7.8%	14.6%	10.7%
	Very willing	Count	7	6	61	15	36	125
		% within ETF_defined_regions	13.7%	14.6%	15.6%	23.4%	22.0%	17.6%
	Somewhat willing	Count	13	14	112	11	35	185
		% within ETF_defined_regions	25.5%	34.1%	28.6%	17.2%	21.3%	26.0%
	Slightly willing	Count	12	7	91	20	36	166
		% within ETF_defined_regions	23.5%	17.1%	23.2%	31.3%	22.0%	23.3%
	Not at all willing	Count	13	9	92	13	33	160
		% within ETF_defined_regions	25.5%	22.0%	23.5%	20.3%	20.1%	22.5%
Total		Count	51	41	392	64	164	712
		% within ETF_defined_regions	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Below are the overall results from respondents to both surveys for question 3a.e/3e, but only for those respondents who are <u>not</u> currently enrolled in a Medicare Advantage plan.

Willingness to explore a Medicare Advantage plan if it requires you to use one card for both medical and prescription drug benefits

11.03% Not at all willing
15.64% Extremely willing
16.76% Slightly willing
31.70% Very willing
24.86% Somewhat willing
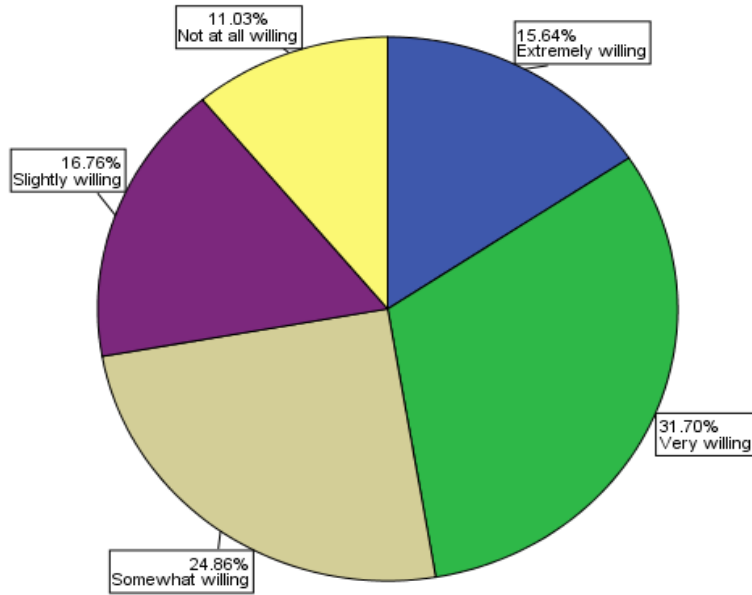
Q3a.e / Q3e. willingness to explore a Medicare Advantage plan if…it requires you to use one card for both medical and prescription drug benefits

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Extremely willing	112	12.3	15.7	15.7
	Very willing	227	25.0	31.8	47.5
	Somewhat willing	177	19.5	24.8	72.4
	Slightly willing	118	13.0	16.5	88.9
	Not at all willing	79	8.7	11.1	100.0
	Total	713	78.5	100.0	
Missing	DON'T KNOW	1	.1		
	BLANK	40	4.4		
	System	154	17.0		
	Total	195	21.5		
Total		908	100.0		

The UWSC ran crosstabs on Q3a.e/Q3e by the following sub-groupings of respondents; Medicare enrollment status, retirement status, state or local employer, respondent's sex, and the ETF defined regions of WI (including those living outside of WI).

There were statistically significant differences across sub-groups for the following sub-groups; Medicare enrollment status and the respondent's retirement status.   The results of those cross-tabulations are on the following pages.

Below are the responses to Q3a.e/Q3e by whether or not the respondent is enrolled in Medicare based on the ETF sample file designation.   The difference between the two sub-groups is statistically significant $p < 0.01$ (Pearson Chi-Square is 48.708).

Willingness to explore a Medicare Advantage plan if it requires you to use one card for both medical and prescription drug benefits
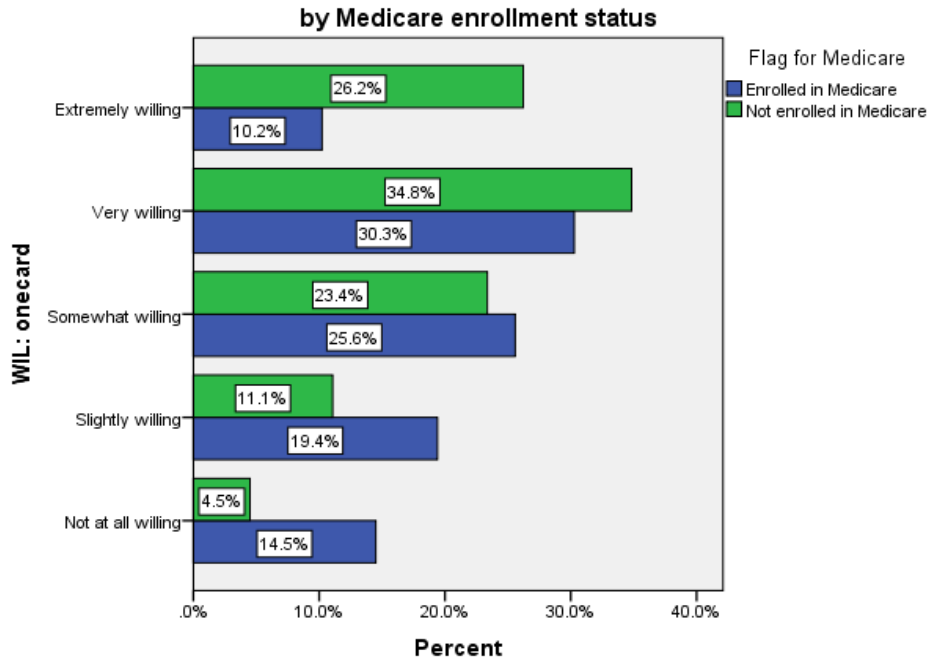
			Flag for Medicare		
			Enrolled in Medicare	Not enrolled in Medicare	Total
WIL: onecard	Extremely willing	Count	48	64	112
		% within Flag for Medicare	10.2%	26.2%	15.7%
	Very willing	Count	142	85	227
		% within Flag for Medicare	30.3%	34.8%	31.8%
	Somewhat willing	Count	120	57	177
		% within Flag for Medicare	25.6%	23.4%	24.8%
	Slightly willing	Count	91	27	118
		% within Flag for Medicare	19.4%	11.1%	16.5%
	Not at all willing	Count	68	11	79
		% within Flag for Medicare	14.5%	4.5%	11.1%
Total		Count	469	244	713
		% within Flag for Medicare	100.0%	100.0%	100.0%

Below are the responses to Q3a.e/Q3e by whether or not the respondent is retired based on the ETF sample file designation.   The difference between the two sub-groups is statistically significant $p < 0.01$ (Pearson Chi-Square is 14.711).

Willingness to explore a Medicare Advantage plan if it requires you to use one card for both medical and prescription drug benefits
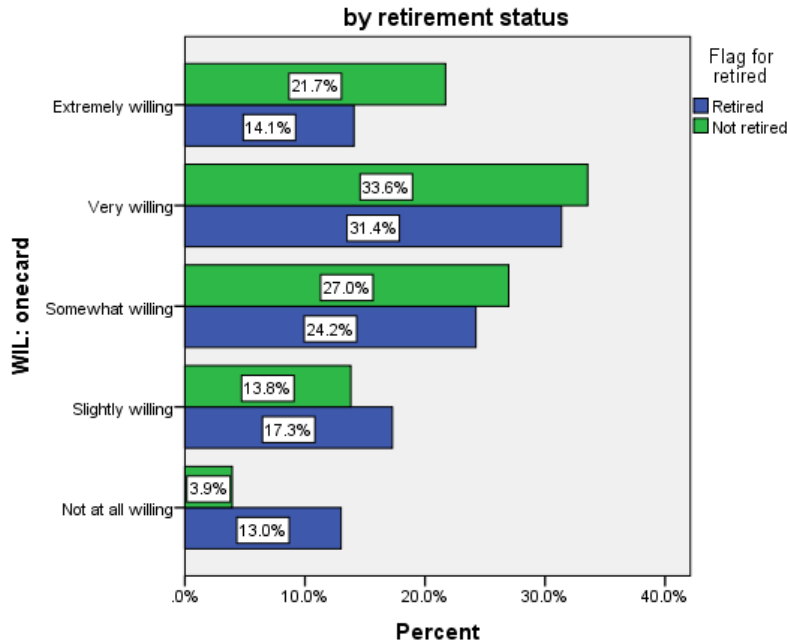
			Flag for retired		
			Retired	Not retired	Total
WIL: onecard	Extremely willing	Count	79	33	112
		% within Flag for retired	14.1%	21.7%	15.7%
	Very willing	Count	176	51	227
		% within Flag for retired	31.4%	33.6%	31.8%
	Somewhat willing	Count	136	41	177
		% within Flag for retired	24.2%	27.0%	24.8%
	Slightly willing	Count	97	21	118
		% within Flag for retired	17.3%	13.8%	16.5%
	Not at all willing	Count	73	6	79
		% within Flag for retired	13.0%	3.9%	11.1%
Total		Count	561	152	713
		% within Flag for retired	100.0%	100.0%	100.0%

Below are the responses to Q3a.e/Q3e by whether the respondent is/was employed by state or local government based on the ETF sample file designation. The difference between the two sub-groups is <u>not</u> statistically significant $p > 0.05$ (Pearson Chi-Square is 0.681).

Willingness to explore a Medicare Advantage plan if it requires you to use one card for both medical and prescription drug benefits

by respondent's employer type
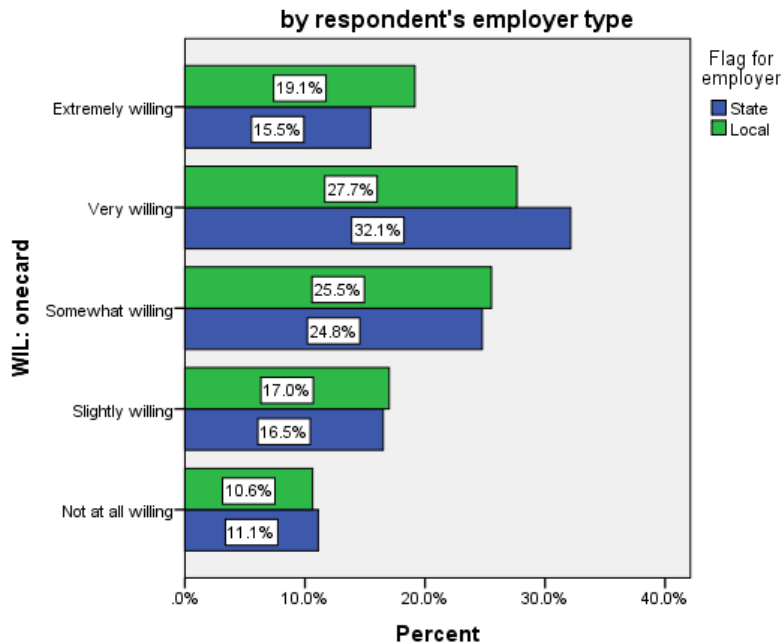
			Flag for employer		
			State	Local	Total
WIL: onecard	Extremely willing	Count	103	9	112
		% within Flag for employer	15.5%	19.1%	15.7%
	Very willing	Count	214	13	227
		% within Flag for employer	32.1%	27.7%	31.8%
	Somewhat willing	Count	165	12	177
		% within Flag for employer	24.8%	25.5%	24.8%
	Slightly willing	Count	110	8	118
		% within Flag for employer	16.5%	17.0%	16.5%
	Not at all willing	Count	74	5	79
		% within Flag for employer	11.1%	10.6%	11.1%
Total		Count	666	47	713
		% within Flag for employer	100.0%	100.0%	100.0%

Below are the responses to Q3a.e/Q3e by the respondent's sex based on the ETF sample file designation.   The difference between the two sub-groups is not statistically significant $p > 0.05$ (Pearson Chi-Square is 3.887).


Willingness to explore a Medicare Advantage plan if it requires you to use one card for both medical and prescription drug benefits

by respondent's sex
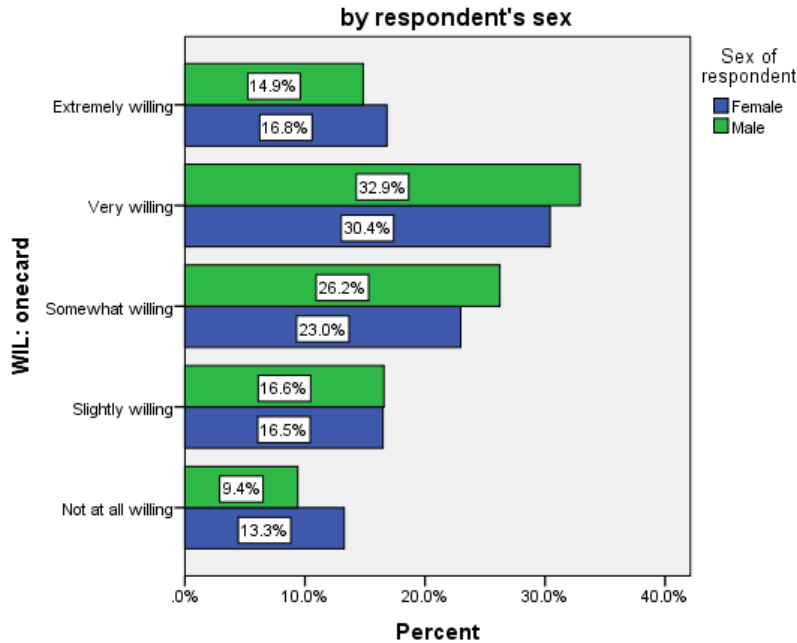
			Sex of respondent		Total
			Female	Male	
WIL: onecard	Extremely willing	Count	52	60	112
		% within Sex of respondent	16.8%	14.9%	15.7%
	Very willing	Count	94	133	227
		% within Sex of respondent	30.4%	32.9%	31.8%
	Somewhat willing	Count	71	106	177
		% within Sex of respondent	23.0%	26.2%	24.8%
	Slightly willing	Count	51	67	118
		% within Sex of respondent	16.5%	16.6%	16.5%
	Not at all willing	Count	41	38	79
		% within Sex of respondent	13.3%	9.4%	11.1%
Total		Count	309	404	713
		% within Sex of respondent	100.0%	100.0%	100.0%

Below are the responses to Q3a.e/Q3e by grouping respondents based on the region of the state they live in based on the address in ETF sample file designation.   The difference between the sub-groups is <u>not</u> statistically significant $p > 0.05$ (Pearson Chi-Square is 21.287).

Willingness to explore a Medicare Advantage plan if it requires you to use one card for both medical and prescription drug benefits
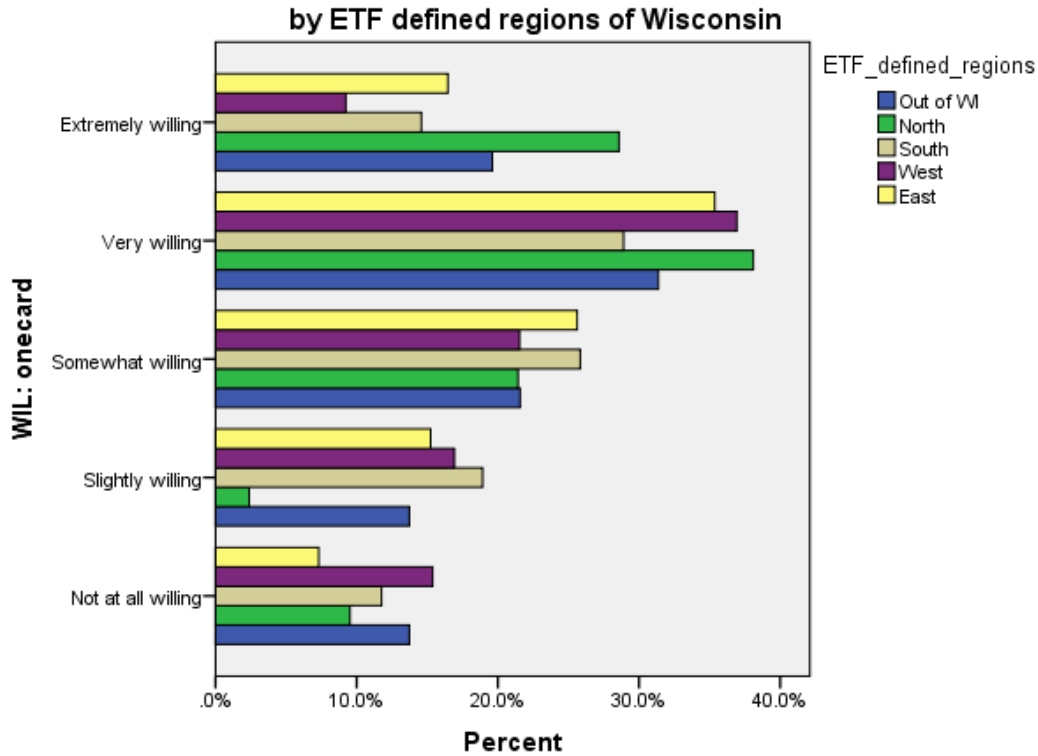
Crosstab

			ETF_defined_regions					
			Out of WI	North	South	West	East	Total
WIL: onecard	Extremely willing	Count	10	12	57	6	27	112
		% within ETF_defined_regions	19.6%	28.6%	14.6%	9.2%	16.5%	15.7%
	Very willing	Count	16	16	113	24	58	227
		% within ETF_defined_regions	31.4%	38.1%	28.9%	36.9%	35.4%	31.8%
	Somewhat willing	Count	11	9	101	14	42	177
		% within ETF_defined_regions	21.6%	21.4%	25.8%	21.5%	25.6%	24.8%
	Slightly willing	Count	7	1	74	11	25	118
		% within ETF_defined_regions	13.7%	2.4%	18.9%	16.9%	15.2%	16.5%
	Not at all willing	Count	7	4	46	10	12	79
		% within ETF_defined_regions	13.7%	9.5%	11.8%	15.4%	7.3%	11.1%
Total		Count	51	42	391	65	164	713
		% within ETF_defined_regions	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Below are the overall results from respondents to both surveys for question 4a.

Acceptability of changes to Medicare plan if prescription drug coverage was wrapped into your plan

6.40%
Not at all acceptable

17.73%
Extremely acceptable

7.18%
Slightly acceptable

29.97%
Somewhat acceptable

38.72%
Very acceptable
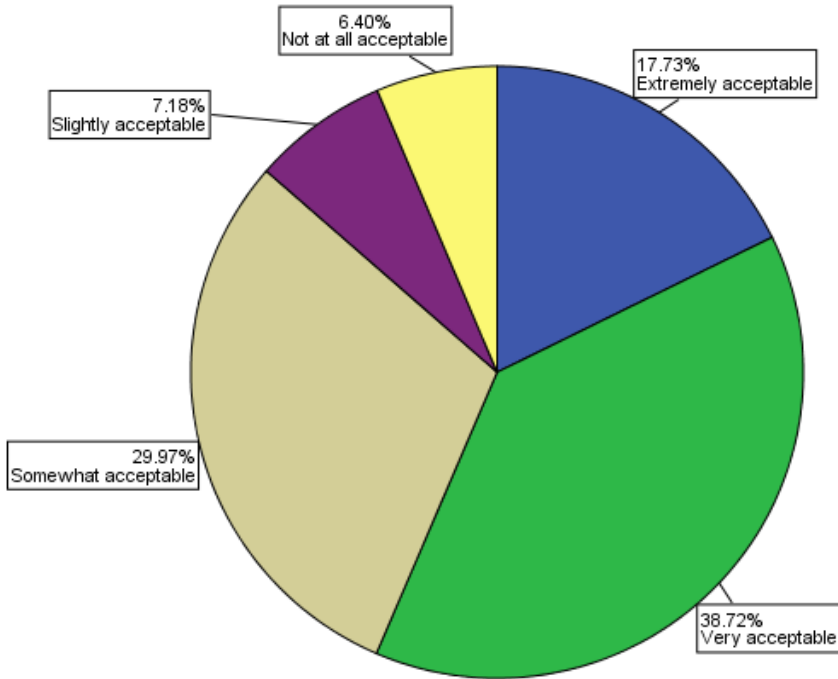
Q4a. acceptable changes to Medicare plan if…prescription drug coverage was wrapped into your plan

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Extremely acceptable	156	17.2	17.6	17.6
	Very acceptable	345	38.0	38.9	56.5
	Somewhat acceptable	266	29.3	30.0	86.5
	Slightly acceptable	64	7.0	7.2	93.7
	Not at all acceptable	56	6.2	6.3	100.0
	Total	887	97.7	100.0	
Missing	DON'T KNOW	2	.2		
	REFUSED	1	.1		
	BLANK	18	2.0		
	Total	21	2.3		
Total		908	100.0		

The UWSC ran crosstabs on Q4a by the following sub-groupings of respondents; Medicare enrollment status, retirement status, state or local employer, respondent's sex, the ETF defined regions of WI (including those living outside of WI), and by the respondents' answers to how they either are paying or plan to play for the monthly health insurance premiums.

There were statistically significant differences across sub-groups for the following sub-groups; Medicare enrollment status, the respondent's retirement status, and the ETF defined regions of Wisconsin. The results of those cross-tabulations are on the following pages.

Below are the responses to Q4a by whether or not the respondent is enrolled in Medicare based on the ETF sample file designation.   The difference between the two sub-groups is statistically significant $p < 0.01$ (Pearson Chi-Square is 34.745).
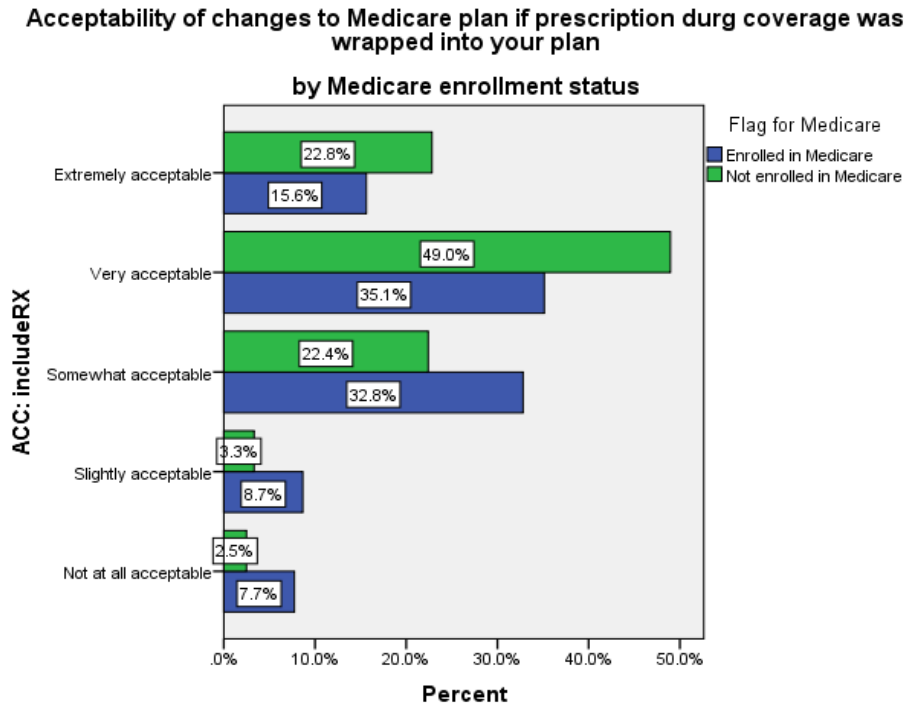
Acceptability of changes to Medicare plan if prescription durg coverage was wrapped into your plan
by Medicare enrollment status

			Flag for Medicare		
			Enrolled in Medicare	Not enrolled in Medicare	Total
ACC: includeRX	Extremely acceptable	Count	101	55	156
		% within Flag for Medicare	15.6%	22.8%	17.6%
	Very acceptable	Count	227	118	345
		% within Flag for Medicare	35.1%	49.0%	38.9%
	Somewhat acceptable	Count	212	54	266
		% within Flag for Medicare	32.8%	22.4%	30.0%
	Slightly acceptable	Count	56	8	64
		% within Flag for Medicare	8.7%	3.3%	7.2%
	Not at all acceptable	Count	50	6	56
		% within Flag for Medicare	7.7%	2.5%	6.3%
Total		Count	646	241	887
		% within Flag for Medicare	100.0%	100.0%	100.0%

Below are the responses to Q4a by whether or not the respondent is retired based on the ETF sample file designation. The difference between the two sub-groups is statistically significant $p < 0.01$ (Pearson Chi-Square is 18.882).

Acceptability of changes to Medicare plan if prescription durg coverage was wrapped into your plan

by retirement status
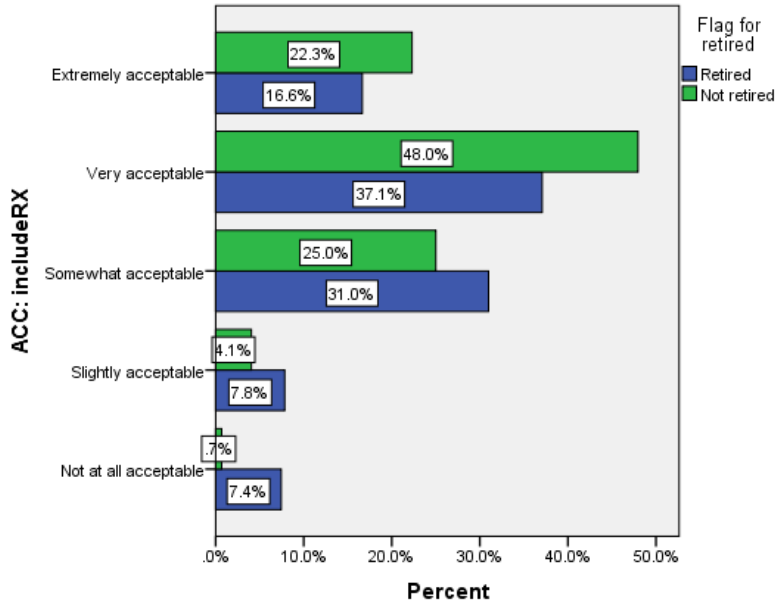
			Flag for retired		
			Retired	Not retired	Total
ACC: includeRX	Extremely acceptable	Count	123	33	156
		% within Flag for retired	16.6%	22.3%	17.6%
	Very acceptable	Count	274	71	345
		% within Flag for retired	37.1%	48.0%	38.9%
	Somewhat acceptable	Count	229	37	266
		% within Flag for retired	31.0%	25.0%	30.0%
	Slightly acceptable	Count	58	6	64
		% within Flag for retired	7.8%	4.1%	7.2%
	Not at all acceptable	Count	55	1	56
		% within Flag for retired	7.4%	0.7%	6.3%
Total		Count	739	148	887
		% within Flag for retired	100.0%	100.0%	100.0%

Below are the responses to Q4a by whether the respondent is/was employed state or local government based on the ETF sample file designation. The difference between the two sub-groups is <u>not</u> statistically significant $p > 0.05$ (Pearson Chi-Square is 0.053).

Acceptability of changes to Medicare plan if prescription durg coverage was wrapped into your plan

by respondent's employer type
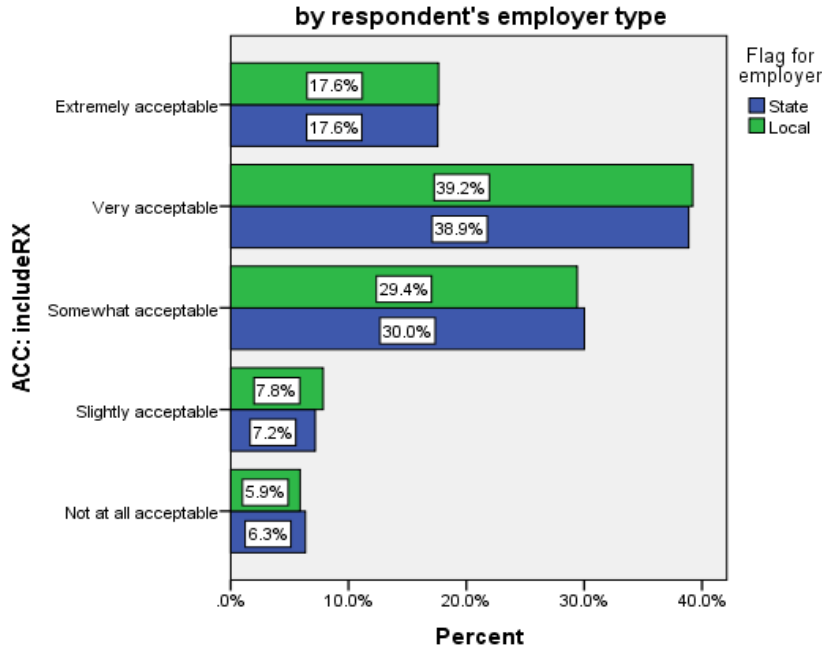
|			Flag for employer		
			State	Local	Total
ACC: includeRX	Extremely acceptable	Count	147	9	156
		% within Flag for employer	17.6%	17.6%	17.6%
	Very acceptable	Count	325	20	345
		% within Flag for employer	38.9%	39.2%	38.9%
	Somewhat acceptable	Count	251	15	266
		% within Flag for employer	30.0%	29.4%	30.0%
	Slightly acceptable	Count	60	4	64
		% within Flag for employer	7.2%	7.8%	7.2%
	Not at all acceptable	Count	53	3	56
		% within Flag for employer	6.3%	5.9%	6.3%
Total		Count	836	51	887
		% within Flag for employer	100.0%	100.0%	100.0%

Below are the responses to Q4a by the respondent's sex based on the ETF sample file designation. The difference between the two sub-groups is not statistically significant $p > 0.05$ (Pearson Chi-Square is 0.358).

Acceptability of changes to Medicare plan if prescription durg coverage was wrapped into your plan

by respondent's sex
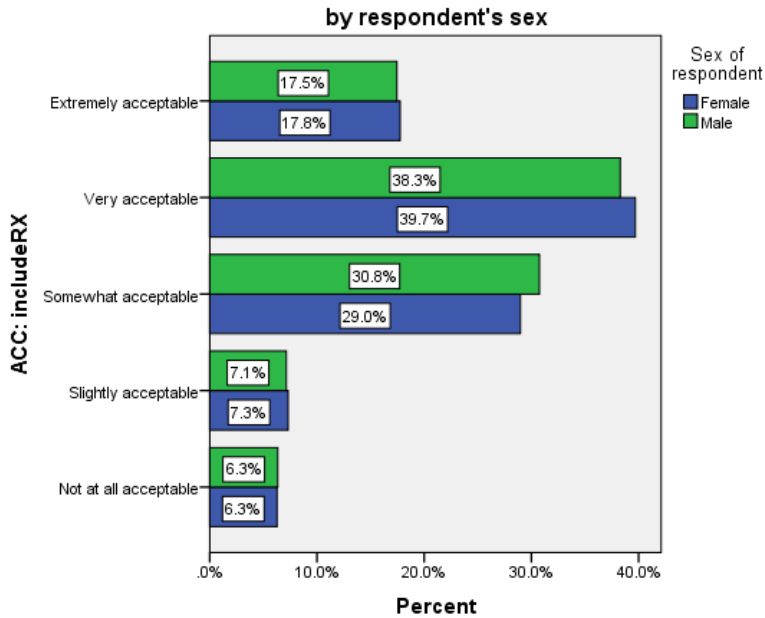
			Sex of respondent		Total
			Female	Male	
ACC: includeRX	Extremely acceptable	Count	68	88	156
		% within Sex of respondent	17.8%	17.5%	17.6%
	Very acceptable	Count	152	193	345
		% within Sex of respondent	39.7%	38.3%	38.9%
	Somewhat acceptable	Count	111	155	266
		% within Sex of respondent	29.0%	30.8%	30.0%
	Slightly acceptable	Count	28	36	64
		% within Sex of respondent	7.3%	7.1%	7.2%
	Not at all acceptable	Count	24	32	56
		% within Sex of respondent	6.3%	6.3%	6.3%
Total		Count	383	504	887
		% within Sex of respondent	100.0%	100.0%	100.0%

Below are the responses to Q4a by grouping respondents based on the region of the state they live in based on the address in ETF sample file designation.   The difference between the sub-groups is statistically significant $p = 0.013$ (Pearson Chi-Square is 31.246).

Acceptability of changes to Medicare plan if prescription durg coverage was wrapped into your plan
by ETF defined regions of Wisconsin
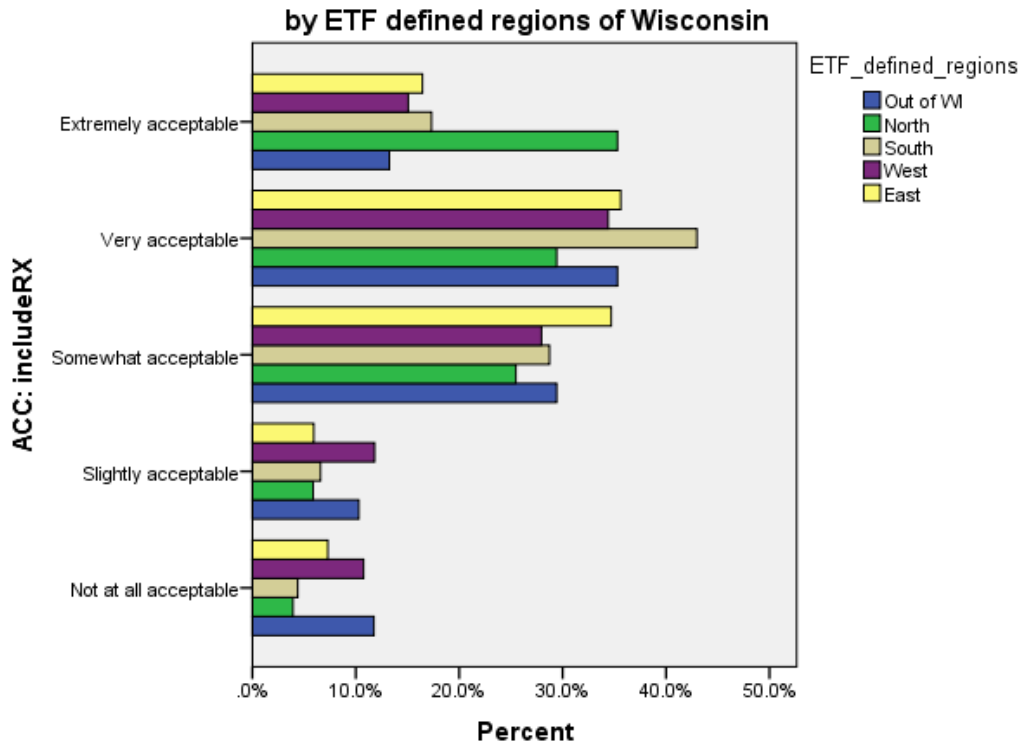
Crosstab

			ETF_defined_regions					
			Out of WI	North	South	West	East	Total
ACC: includeRX	Extremely acceptable	Count	9	18	79	14	36	156
		% within ETF_defined_regions	13.2%	35.3%	17.3%	15.1%	16.4%	17.6%
	Very acceptable	Count	24	15	196	32	78	345
		% within ETF_defined_regions	35.3%	29.4%	43.0%	34.4%	35.6%	38.9%
	Somewhat acceptable	Count	20	13	131	26	76	266
		% within ETF_defined_regions	29.4%	25.5%	28.7%	28.0%	34.7%	30.0%
	Slightly acceptable	Count	7	3	30	11	13	64
		% within ETF_defined_regions	10.3%	5.9%	6.6%	11.8%	5.9%	7.2%
	Not at all acceptable	Count	8	2	20	10	16	56
		% within ETF_defined_regions	11.8%	3.9%	4.4%	10.8%	7.3%	6.3%
Total		Count	68	51	456	93	219	887
		% within ETF_defined_regions	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Below are the responses to Q4a by how the respondents reported that they either are currently paying for or plan on paying for their monthly health insurance premiums (Q7/Q5).
The differences between the sub-groups are <u>not</u> statistically significant $p > 0.05$ (Pearson Chi-Square is 21.703).

Acceptability of changes to Medicare plan if prescription drug coverage was wrapped into your plan
by payment method

Crosstab

			payforMHIP					
			You will use your accrued sick leave credit account	You will use your Wisconsin retirement system annuity payment	You will pay the health plan directly	Some other way. Please tell us:	Not sure	Total
ACC: includeRX	Extremely acceptable	Count	93	35	12	3	12	155
		% within payforMHIP	18.2%	15.2%	17.6%	11.1%	28.6%	17.7%
	Very acceptable	Count	207	77	30	10	17	341
		% within payforMHIP	40.6%	33.5%	44.1%	37.0%	40.5%	38.9%
	Somewhat acceptable	Count	147	72	21	12	10	262
		% within payforMHIP	28.8%	31.3%	30.9%	44.4%	23.8%	29.9%
	Slightly acceptable	Count	33	25	2	1	2	63
		% within payforMHIP	6.5%	10.9%	2.9%	3.7%	4.8%	7.2%
	Not at all acceptable	Count	30	21	3	1	1	56
		% within payforMHIP	5.9%	9.1%	4.4%	3.7%	2.4%	6.4%
Total		Count	510	230	68	27	42	877
		% within payforMHIP	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Below are the overall results from respondents to both surveys for question 4b.

Acceptability of changes to Medicare plan if all current plans offered under It's Your Choice Health Plan Medicare were no longer available

6.36%
Extremely acceptable

11.25%
Very acceptable

38.64%
Not at all acceptable

26.93%
Somewhat acceptable

16.82%
Slightly acceptable
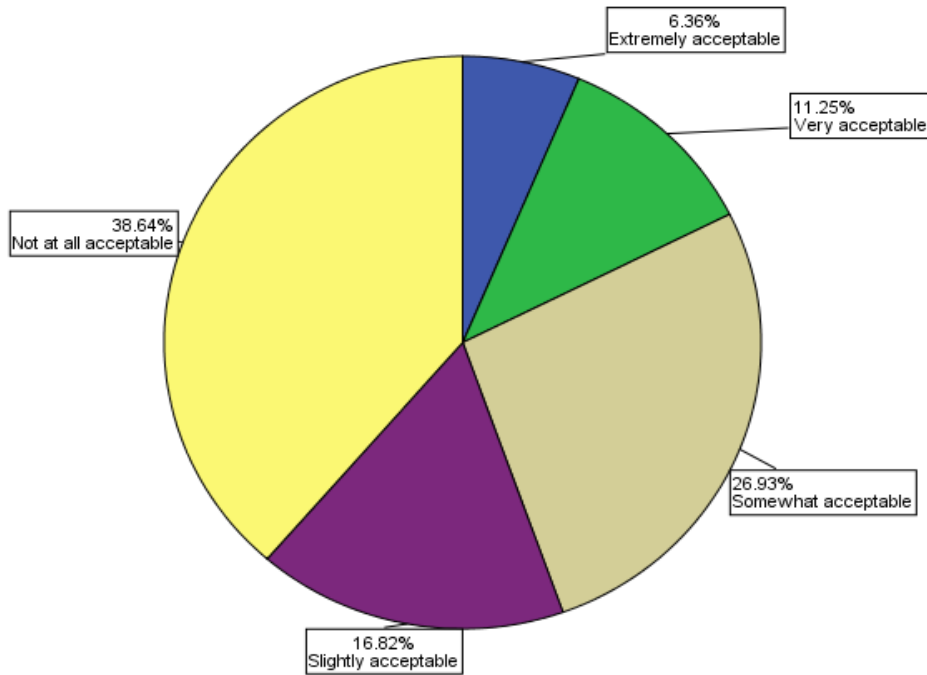
Q4b. acceptable changes to Medicare plan if…all current plans offered under It's Your Choice Health Plan Medicare were no longer available

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Extremely acceptable	56	6.2	6.4	6.4
	Very acceptable	98	10.8	11.2	17.6
	Somewhat acceptable	237	26.1	27.1	44.6
	Slightly acceptable	147	16.2	16.8	61.4
	Not at all acceptable	338	37.2	38.6	100.0
	Total	876	96.5	100.0	
Missing	DON'T KNOW	8	.9		
	REFUSED	1	.1		
	BLANK	23	2.5		
	Total	32	3.5		
Total		908	100.0		

The UWSC ran crosstabs on Q4b by the following sub-groupings of respondents; Medicare enrollment status, retirement status, state or local employer, respondent's sex, the ETF defined regions of WI (including those living outside of WI), and by the respondents' answers to how they either are paying or plan to play for the monthly health insurance premiums.

There were no statistically significant differences across sub-groups for any of the sub-groups examined.   The results of those cross-tabulations are on the following pages.

Below are the responses to Q4b by whether or not the respondent is enrolled in Medicare based on the ETF sample file designation. The difference between the two sub-groups is <u>not</u> statistically significant $p > 0.05$ (Pearson Chi-Square is 8.095).

Acceptability of changes to Medicare plan if all current plans offered under It's Your Choice Health Plan Medicare were no longer available

by Medicare enrollment status
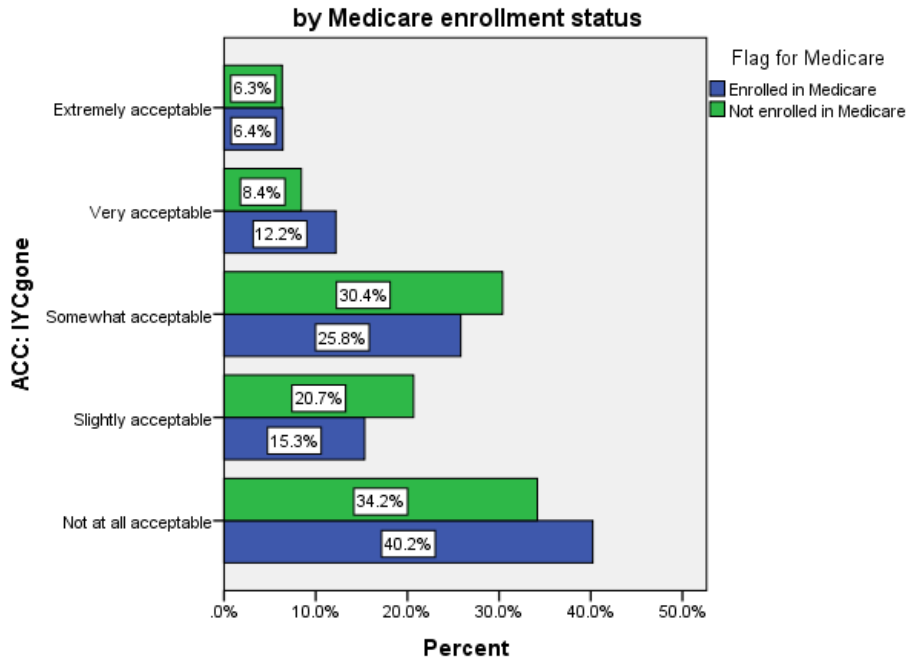
| | | | Flag for Medicare | | |
			Enrolled in Medicare	Not enrolled in Medicare	Total
ACC: IYCgone	Extremely acceptable	Count	41	15	56
		% within Flag for Medicare	6.4%	6.3%	6.4%
	Very acceptable	Count	78	20	98
		% within Flag for Medicare	12.2%	8.4%	11.2%
	Somewhat acceptable	Count	165	72	237
		% within Flag for Medicare	25.8%	30.4%	27.1%
	Slightly acceptable	Count	98	49	147
		% within Flag for Medicare	15.3%	20.7%	16.8%
	Not at all acceptable	Count	257	81	338
		% within Flag for Medicare	40.2%	34.2%	38.6%
Total		Count	639	237	876
		% within Flag for Medicare	100.0%	100.0%	100.0%

Below are the responses to Q4b by whether or not the respondent is retired based on the ETF sample file designation. The difference between the two sub-groups is not statistically significant $p > 0.05$ (Pearson Chi-Square is 2.550).

Acceptability of changes to Medicare plan if all current plans offered under It's Your Choice Health Plan Medicare were no longer available
by retirement status
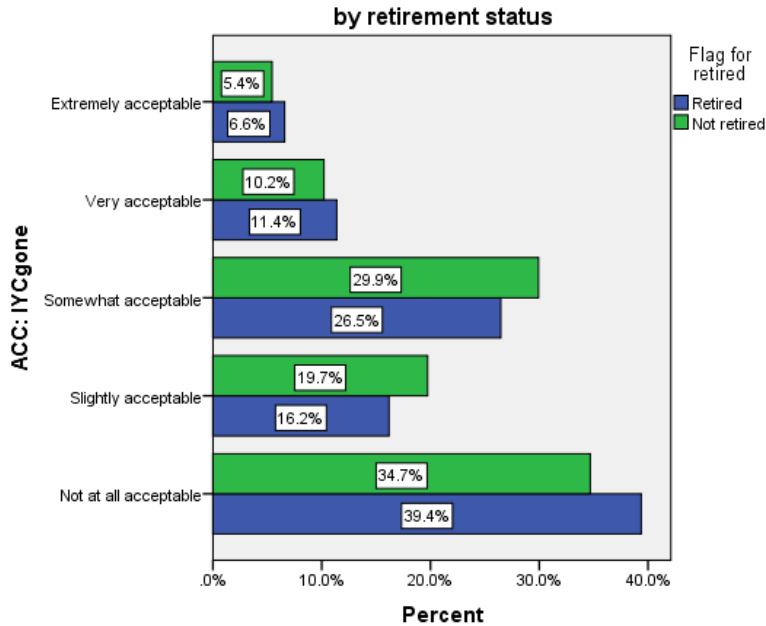
			Flag for retired		
			Retired	Not retired	Total
ACC: IYCgone	Extremely acceptable	Count	48	8	56
		% within Flag for retired	6.6%	5.4%	6.4%
	Very acceptable	Count	83	15	98
		% within Flag for retired	11.4%	10.2%	11.2%
	Somewhat acceptable	Count	193	44	237
		% within Flag for retired	26.5%	29.9%	27.1%
	Slightly acceptable	Count	118	29	147
		% within Flag for retired	16.2%	19.7%	16.8%
	Not at all acceptable	Count	287	51	338
		% within Flag for retired	39.4%	34.7%	38.6%
Total		Count	729	147	876
		% within Flag for retired	100.0%	100.0%	100.0%

Below are the responses to Q4b by whether the respondent is/was employed state or local government based on the ETF sample file designation.   The difference between the two sub-groups is not statistically significant *p* > 0.05 (Pearson Chi-Square is 2.286).

**Acceptability of changes to Medicare plan if all current plans offered under It's Your Choice Health Plan Medicare were no longer available**

by respondent's employer type
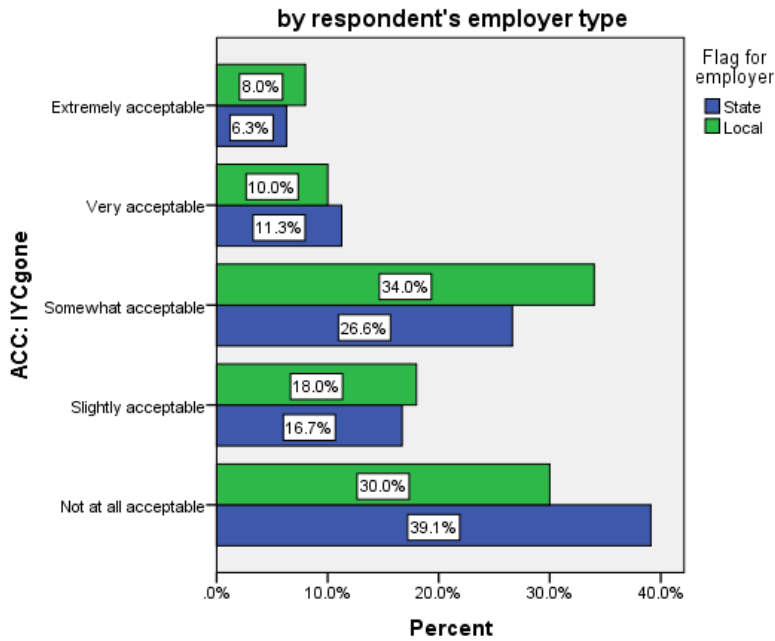
			Flag for employer		
			State	Local	Total
ACC: IYCgone	Extremely acceptable	Count	52	4	56
		% within Flag for employer	6.3%	8.0%	6.4%
	Very acceptable	Count	93	5	98
		% within Flag for employer	11.3%	10.0%	11.2%
	Somewhat acceptable	Count	220	17	237
		% within Flag for employer	26.6%	34.0%	27.1%
	Slightly acceptable	Count	138	9	147
		% within Flag for employer	16.7%	18.0%	16.8%
	Not at all acceptable	Count	323	15	338
		% within Flag for employer	39.1%	30.0%	38.6%
Total		Count	826	50	876
		% within Flag for employer	100.0%	100.0%	100.0%

Below are the responses to Q4b by the respondent's sex based on the ETF sample file designation. The difference between the two sub-groups is not statistically significant $p > 0.05$ (Pearson Chi-Square is 4.376).

Acceptability of changes to Medicare plan if all current plans offered under It's Your Choice Health Plan Medicare were no longer available

by respondent's sex
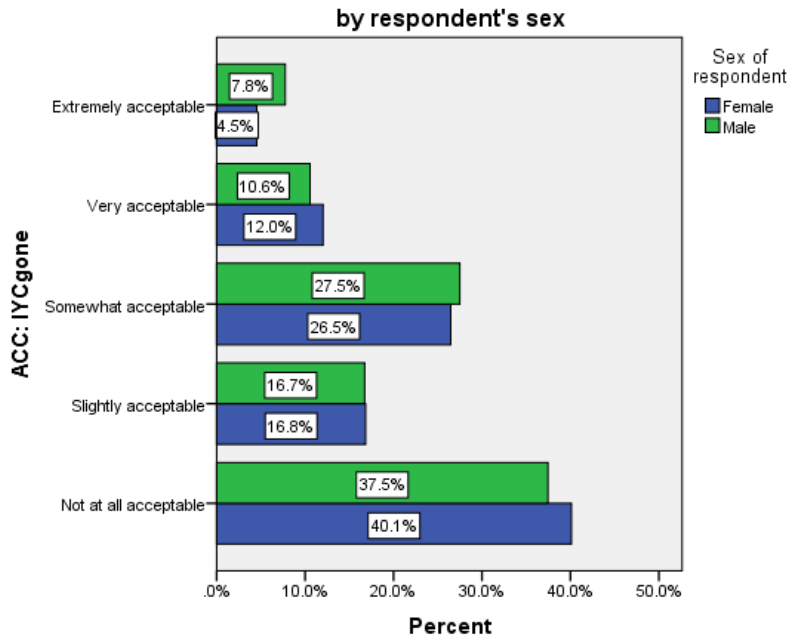
			Sex of respondent		
			Female	Male	Total
ACC: IYCgone	Extremely acceptable	Count	17	39	56
		% within Sex of respondent	4.5%	7.8%	6.4%
	Very acceptable	Count	45	53	98
		% within Sex of respondent	12.0%	10.6%	11.2%
	Somewhat acceptable	Count	99	138	237
		% within Sex of respondent	26.5%	27.5%	27.1%
	Slightly acceptable	Count	63	84	147
		% within Sex of respondent	16.8%	16.7%	16.8%
	Not at all acceptable	Count	150	188	338
		% within Sex of respondent	40.1%	37.5%	38.6%
Total		Count	374	502	876
		% within Sex of respondent	100.0%	100.0%	100.0%

Below are the responses to Q4b by grouping respondents based on the region of the state they live in based on the address in ETF sample file designation. The difference between the sub-groups is not statistically significant $p > 0.05$ (Pearson Chi-Square is 11.731).

Acceptability of changes to Medicare plan if all current plans offered under It's Your Choice Health Plan Medicare were no longer available

by ETF defined regions of Wisconsin
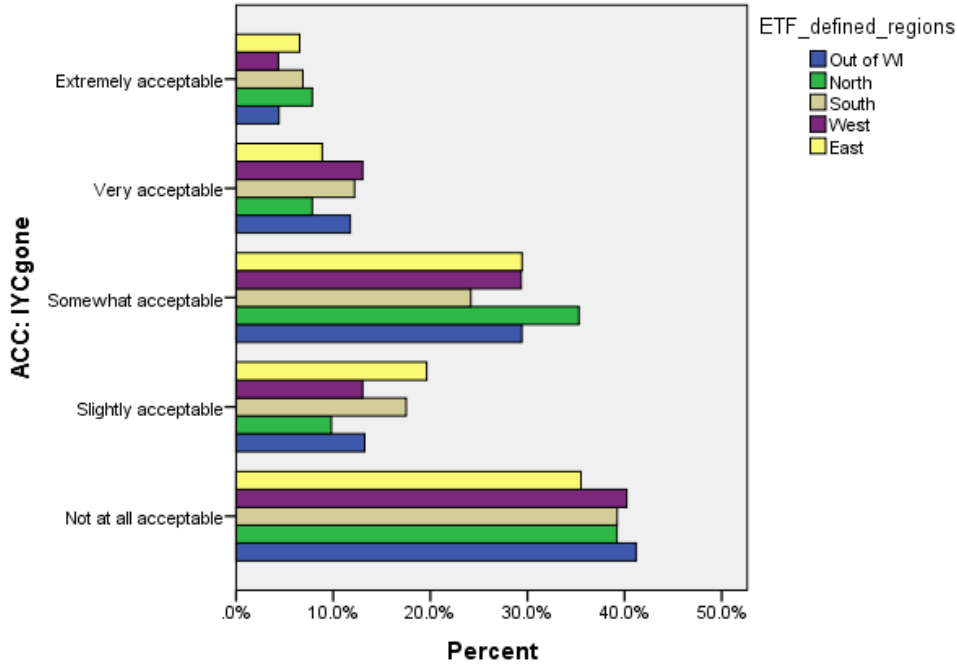
Crosstab

			ETF_defined_regions					
			Out of WI	North	South	West	East	Total
ACC: IYCgone	Extremely acceptable	Count	3	4	31	4	14	56
		% within ETF_defined_regions	4.4%	7.8%	6.9%	4.3%	6.5%	6.4%
	Very acceptable	Count	8	4	55	12	19	98
		% within ETF_defined_regions	11.8%	7.8%	12.2%	13.0%	8.9%	11.2%
	Somewhat acceptable	Count	20	18	109	27	63	237
		% within ETF_defined_regions	29.4%	35.3%	24.2%	29.3%	29.4%	27.1%
	Slightly acceptable	Count	9	5	79	12	42	147
		% within ETF_defined_regions	13.2%	9.8%	17.5%	13.0%	19.6%	16.8%
	Not at all acceptable	Count	28	20	177	37	76	338
		% within ETF_defined_regions	41.2%	39.2%	39.2%	40.2%	35.5%	38.6%
Total		Count	68	51	451	92	214	876
		% within ETF_defined_regions	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Below are the responses to Q4b by how the respondents reported that they either are currently paying for or plan on paying for their monthly health insurance premiums (Q7/Q5).
The differences between the sub-groups are <u>not</u> statistically significant $p > 0.05$ (Pearson Chi-Square is 16.156).

Acceptability of changes to Medicare plan if all current plans offered under It's Your Choice Health Plan Medicare were no longer available
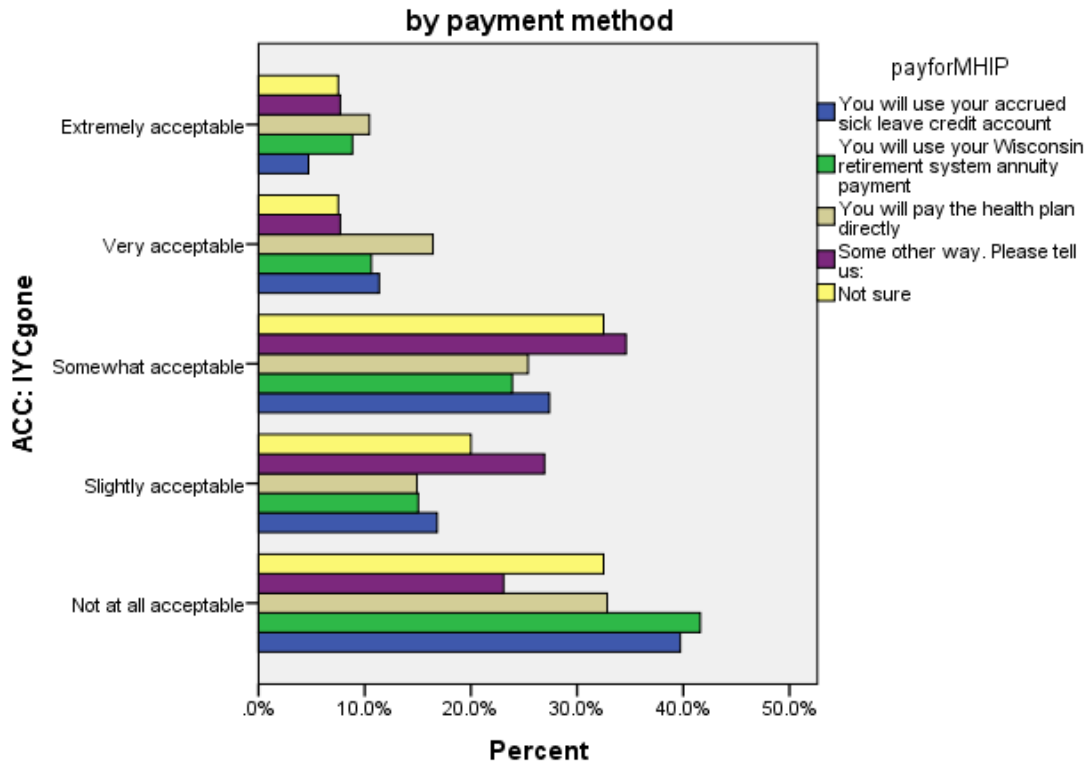by payment method

Crosstab

			payforMHIP					
			You will use your accrued sick leave credit account	You will use your Wisconsin retirement system annuity payment	You will pay the health plan directly	Some other way. Please tell us:	Not sure	Total
ACC: IYCgone	Extremely acceptable	Count	24	20	7	2	3	56
		% within payforMHIP	4.7%	8.8%	10.4%	7.7%	7.5%	6.5%
	Very acceptable	Count	57	24	11	2	3	97
		% within payforMHIP	11.2%	10.6%	16.4%	7.7%	7.5%	11.2%
	Somewhat acceptable	Count	140	54	17	9	13	233
		% within payforMHIP	27.6%	23.9%	25.4%	34.6%	32.5%	26.9%
	Slightly acceptable	Count	85	34	10	7	8	144
		% within payforMHIP	16.8%	15.0%	14.9%	26.9%	20.0%	16.6%
	Not at all acceptable	Count	201	94	22	6	13	336
		% within payforMHIP	39.6%	41.6%	32.8%	23.1%	32.5%	38.8%
Total		Count	507	226	67	26	40	866
		% within payforMHIP	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

94

Below are the overall results from respondents to both surveys for question 4c.

Acceptability of changes to Medicare plan if the It's Your Choice Medicare Plus plan was no longer available

7.00%
Extremely acceptable

11.70%
Very acceptable

36.24%
Not at all acceptable

26.49%
Somewhat acceptable

18.58%
Slightly acceptable
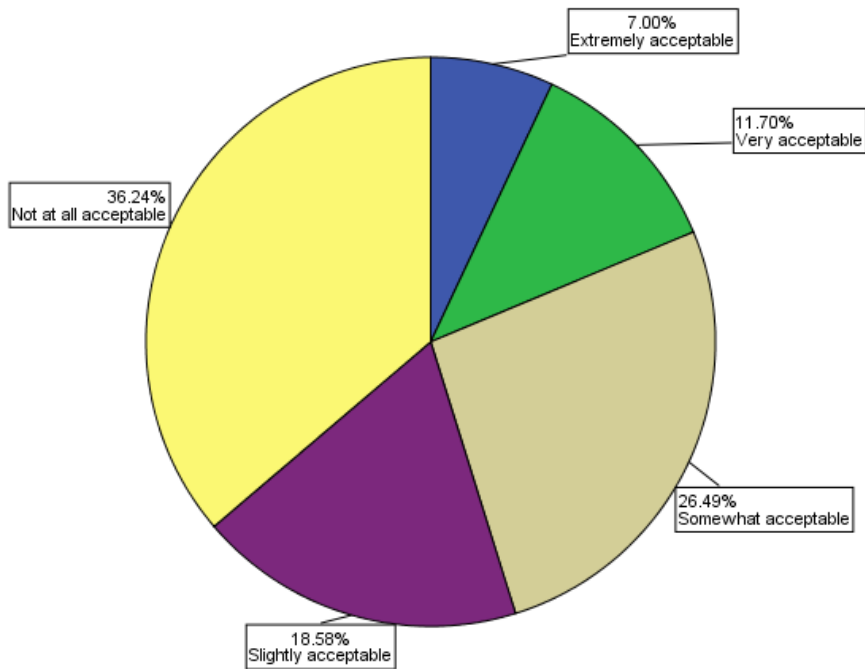
Q4c. acceptable changes to Medicare plan if…the It's Your Choice Medicare Plus plan was no longer available

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Extremely acceptable	61	6.7	7.0	7.0
	Very acceptable	101	11.1	11.6	18.7
	Somewhat acceptable	231	25.4	26.6	45.3
	Slightly acceptable	160	17.6	18.4	63.7
	Not at all acceptable	315	34.7	36.3	100.0
	Total	868	95.6	100.0	
Missing	DON'T KNOW	6	.7		
	REFUSED	1	.1		
	BLANK	33	3.6		
	Total	40	4.4		
Total		908	100.0		

The UWSC ran crosstabs on Q4c by the following sub-groupings of respondents; Medicare enrollment status, retirement status, state or local employer, respondent's sex, the ETF defined regions of WI (including those living outside of WI), and by the respondents' answers to how they either are paying or plan to play for the monthly health insurance premiums.

There were statistically significant differences across sub-groups only for the following sub-group the respondents' retirement status.   The results of those cross-tabulations are on the following pages.

Below are the responses to Q4c by whether or not the respondent is enrolled in Medicare based on the ETF sample file designation.   The difference between the two sub-groups is <u>not</u> statistically significant $p > 0.05$ (Pearson Chi-Square is 5.317).

Acceptability of changes to Medicare plan if the It's Your Choice Medicare Plus plan was no longer available

by Medicare enrollment status
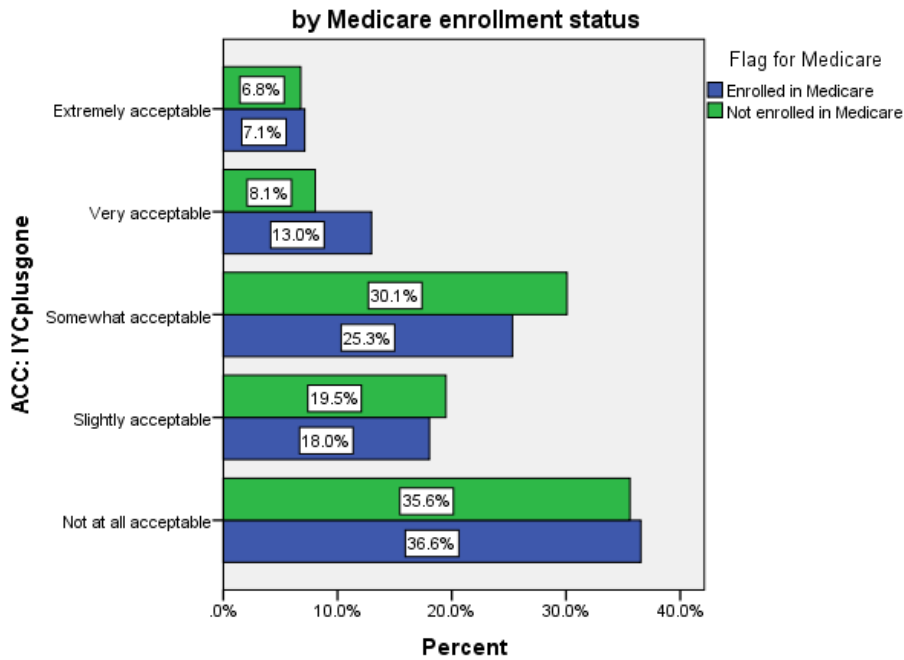
			Flag for Medicare		
			Enrolled in Medicare	Not enrolled in Medicare	Total
ACC: IYCplusgone	Extremely acceptable	Count	45	16	61
		% within Flag for Medicare	7.1%	6.8%	7.0%
	Very acceptable	Count	82	19	101
		% within Flag for Medicare	13.0%	8.1%	11.6%
	Somewhat acceptable	Count	160	71	231
		% within Flag for Medicare	25.3%	30.1%	26.6%
	Slightly acceptable	Count	114	46	160
		% within Flag for Medicare	18.0%	19.5%	18.4%
	Not at all acceptable	Count	231	84	315
		% within Flag for Medicare	36.6%	35.6%	36.3%
Total		Count	632	236	868
		% within Flag for Medicare	100.0%	100.0%	100.0%

Below are the responses to Q4c by whether or not the respondent is retired based on the ETF sample file designation.   The difference between the two sub-groups is statistically significant $p < 0.01$ (Pearson Chi-Square is 13.892).

Acceptability of changes to Medicare plan if the It's Your Choice Medicare Plus plan was no longer available

by retirement status
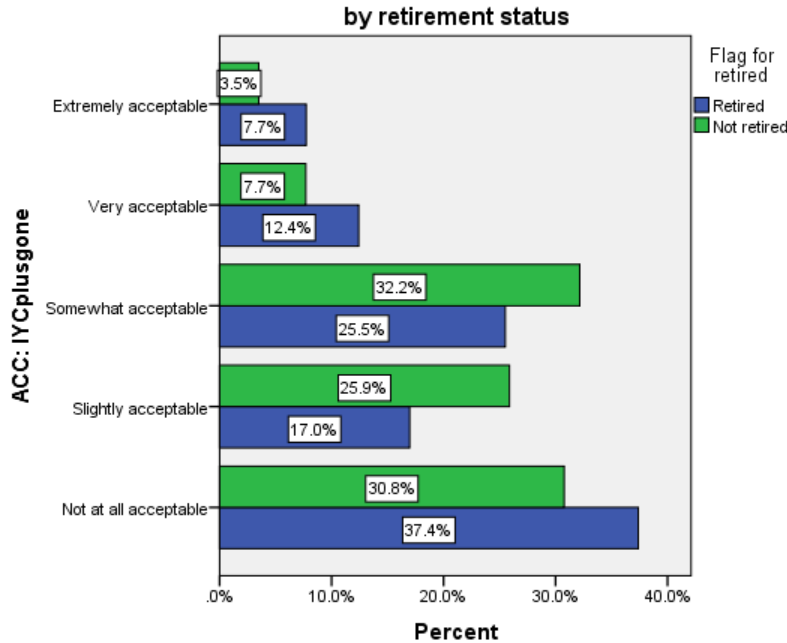
			Flag for retired		
			Retired	Not retired	Total
ACC: IYCplusgone	Extremely acceptable	Count	56	5	61
		% within Flag for retired	7.7%	3.5%	7.0%
	Very acceptable	Count	90	11	101
		% within Flag for retired	12.4%	7.7%	11.6%
	Somewhat acceptable	Count	185	46	231
		% within Flag for retired	25.5%	32.2%	26.6%
	Slightly acceptable	Count	123	37	160
		% within Flag for retired	17.0%	25.9%	18.4%
	Not at all acceptable	Count	271	44	315
		% within Flag for retired	37.4%	30.8%	36.3%
Total		Count	725	143	868
		% within Flag for retired	100.0%	100.0%	100.0%

Below are the responses to Q4c by whether the respondent is/was employed state or local government based on the ETF sample file designation. The difference between the two sub-groups is <u>not</u> statistically significant *p* > 0.05 (Pearson Chi-Square is 1.513).


Acceptability of changes to Medicare plan if the It's Your Choice Medicare Plus plan was no longer available
by respondent's employer type
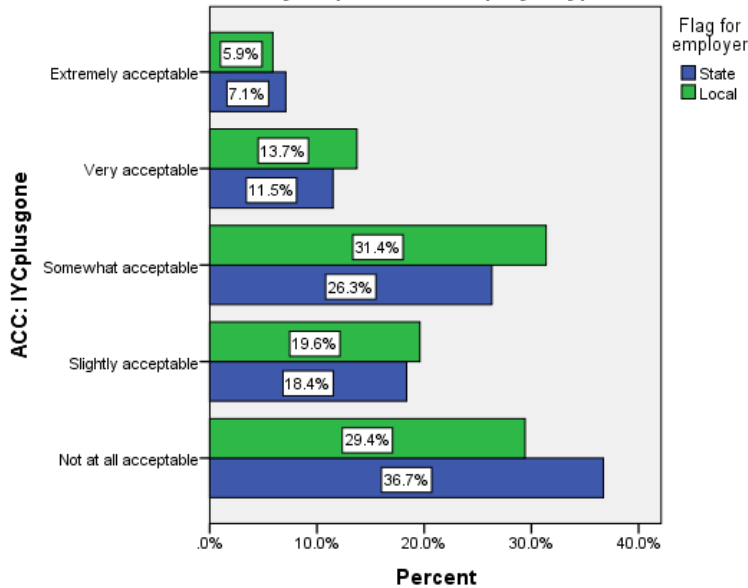
			Flag for employer		Total
			State	Local	
ACC: IYCplusgone	Extremely acceptable	Count	58	3	61
		% within Flag for employer	7.1%	5.9%	7.0%
	Very acceptable	Count	94	7	101
		% within Flag for employer	11.5%	13.7%	11.6%
	Somewhat acceptable	Count	215	16	231
		% within Flag for employer	26.3%	31.4%	26.6%
	Slightly acceptable	Count	150	10	160
		% within Flag for employer	18.4%	19.6%	18.4%
	Not at all acceptable	Count	300	15	315
		% within Flag for employer	36.7%	29.4%	36.3%
Total		Count	817	51	868
		% within Flag for employer	100.0%	100.0%	100.0%

Below are the responses to Q4c by the respondent's sex based on the ETF sample file designation.   The difference between the two sub-groups is not statistically significant $p > 0.05$ (Pearson Chi-Square is 4.683).

Acceptability of changes to Medicare plan if the It's Your Choice Medicare Plus plan was no longer available

by respondent's sex
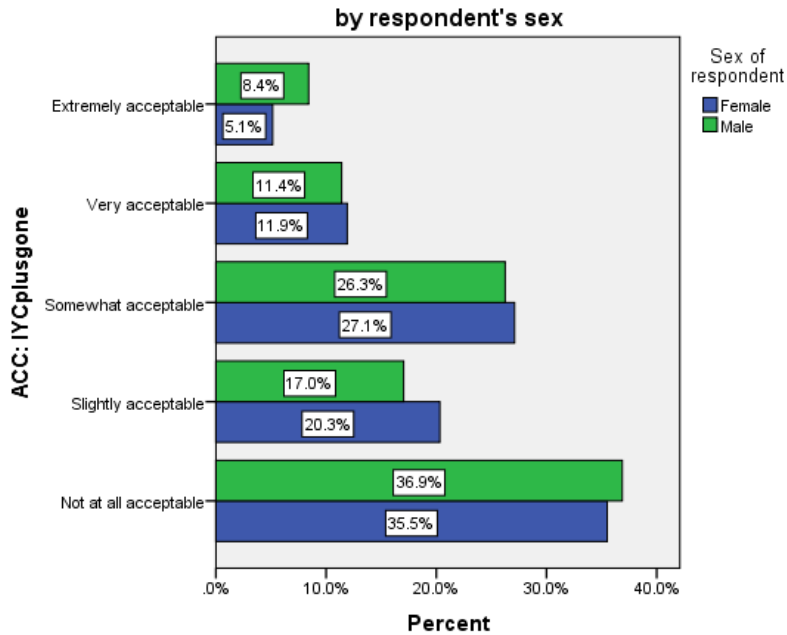
			Sex of respondent		Total
			Female	Male	
ACC: IYCplusgone	Extremely acceptable	Count	19	42	61
		% within Sex of respondent	5.1%	8.4%	7.0%
	Very acceptable	Count	44	57	101
		% within Sex of respondent	11.9%	11.4%	11.6%
	Somewhat acceptable	Count	100	131	231
		% within Sex of respondent	27.1%	26.3%	26.6%
	Slightly acceptable	Count	75	85	160
		% within Sex of respondent	20.3%	17.0%	18.4%
	Not at all acceptable	Count	131	184	315
		% within Sex of respondent	35.5%	36.9%	36.3%
Total		Count	369	499	868
		% within Sex of respondent	100.0%	100.0%	100.0%

Below are the responses to Q4c by grouping respondents based on the region of the state they live in based on the address in ETF sample file designation. The difference between the sub-groups is <u>not</u> statistically significant *p* > 0.05 (Pearson Chi-Square is 22.175).
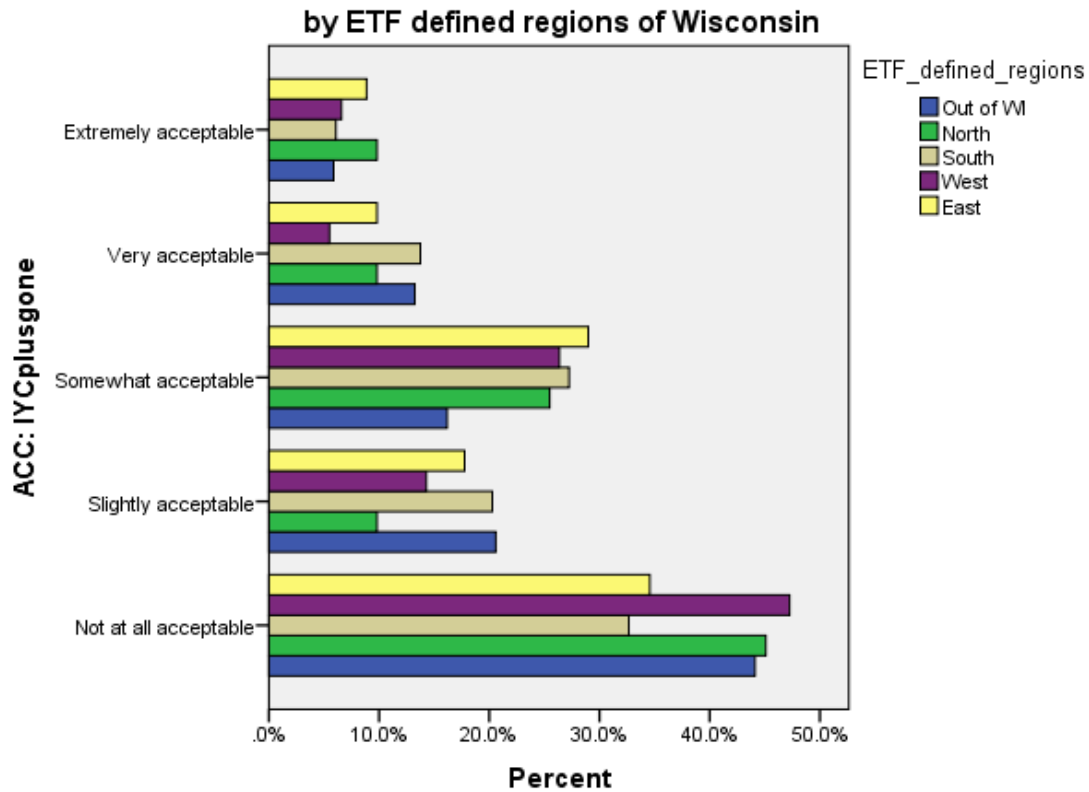
Acceptability of changes to Medicare plan if the It's Your Choice Medicare Plus plan was no longer available

by ETF defined regions of Wisconsin

Crosstab

			ETF_defined_regions					
			Out of WI	North	South	West	East	Total
ACC: IYCplusgone	Extremely acceptable	Count	4	5	27	6	19	61
		% within ETF_defined_regions	5.9%	9.8%	6.1%	6.6%	8.9%	7.0%
	Very acceptable	Count	9	5	61	5	21	101
		% within ETF_defined_regions	13.2%	9.8%	13.7%	5.5%	9.8%	11.6%
	Somewhat acceptable	Count	11	13	121	24	62	231
		% within ETF_defined_regions	16.2%	25.5%	27.3%	26.4%	29.0%	26.6%
	Slightly acceptable	Count	14	5	90	13	38	160
		% within ETF_defined_regions	20.6%	9.8%	20.3%	14.3%	17.8%	18.4%
	Not at all acceptable	Count	30	23	145	43	74	315
		% within ETF_defined_regions	44.1%	45.1%	32.7%	47.3%	34.6%	36.3%
Total		Count	68	51	444	91	214	868
		% within ETF_defined_regions	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Below are the responses to Q4c by how the respondents reported that they either are currently paying for or plan on paying for their monthly health insurance premiums (Q7/Q5).
The differences between the sub-groups are not statistically significant *p* > 0.05 (Pearson Chi-Square is 18.713).

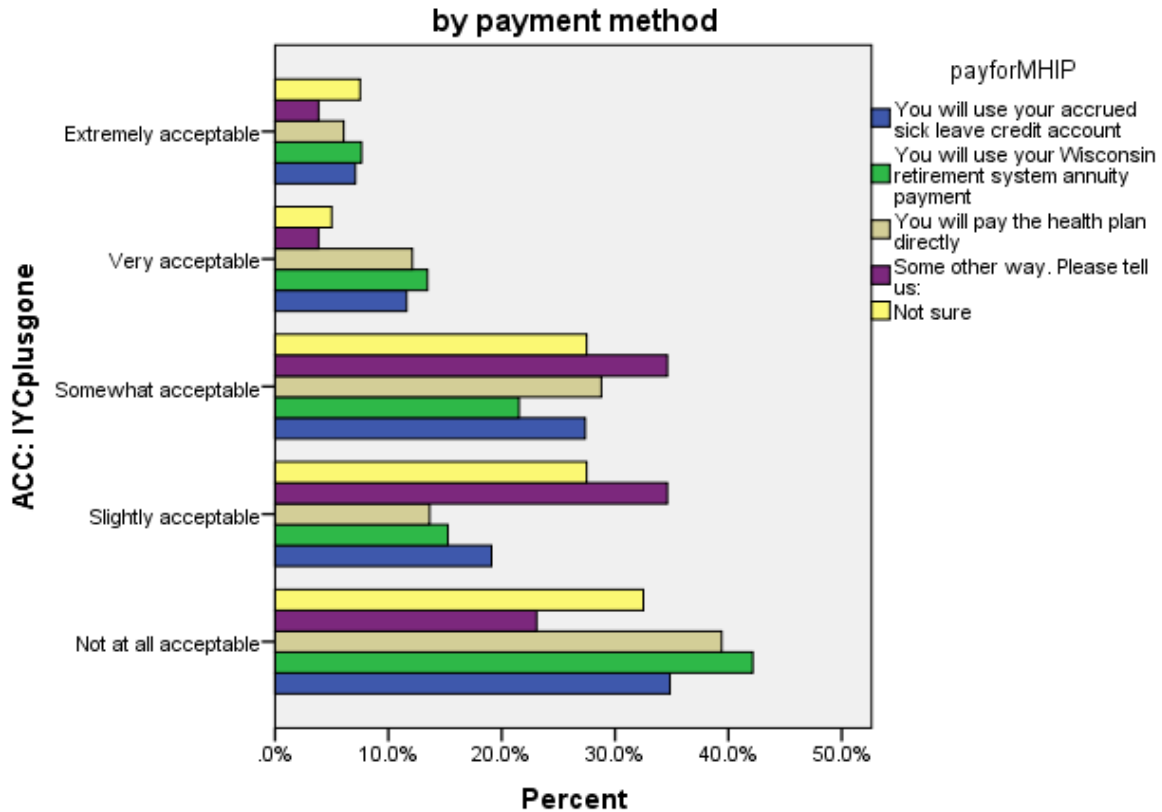## Acceptability of changes to Medicare plan if the It's Your Choice Medicare Plus plan was no longer available
by payment method

Crosstab

			payforMHIP					
			You will use your accrued sick leave credit account	You will use your Wisconsin retirement system annuity payment	You will pay the health plan directly	Some other way. Please tell us:	Not sure	Total
ACC: IYCplusgone	Extremely acceptable	Count	36	17	4	1	3	61
		% within payforMHIP	7.1%	7.6%	6.1%	3.8%	7.5%	7.1%
	Very acceptable	Count	58	30	8	1	2	99
		% within payforMHIP	11.5%	13.5%	12.1%	3.8%	5.0%	11.5%
	Somewhat acceptable	Count	139	48	19	9	11	226
		% within payforMHIP	27.6%	21.5%	28.8%	34.6%	27.5%	26.3%
	Slightly acceptable	Count	95	34	9	9	11	158
		% within payforMHIP	18.8%	15.2%	13.6%	34.6%	27.5%	18.4%
	Not at all acceptable	Count	176	94	26	6	13	315
		% within payforMHIP	34.9%	42.2%	39.4%	23.1%	32.5%	36.7%
Total		Count	504	223	66	26	40	859
		% within payforMHIP	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

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Below are the overall results from respondents to both surveys question 4d.

Acceptability of changes to Medicare plan if the possibility of having different Medicare options available than there are now

5.65%
Extremely acceptable

22.94%
Not at all acceptable

17.97%
Very acceptable

18.76%
Slightly acceptable

34.69%
Somewhat acceptable
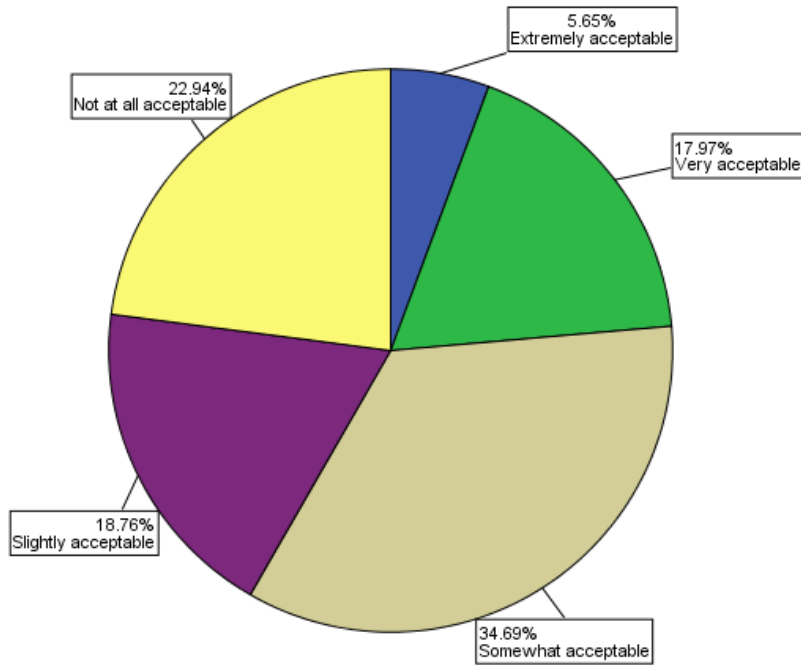
Q4d. acceptable changes to Medicare plan if…possibility of having different Medicare options available than there are now

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Extremely acceptable	50	5.5	5.7	5.7
	Very acceptable	158	17.4	17.9	23.6
	Somewhat acceptable	307	33.8	34.8	58.5
	Slightly acceptable	166	18.3	18.8	77.3
	Not at all acceptable	200	22.0	22.7	100.0
	Total	881	97.0	100.0	
Missing	DON'T KNOW	5	.6		
	REFUSED	1	.1		
	BLANK	21	2.3		
	Total	27	3.0		
Total		908	100.0		

The UWSC ran crosstabs on Q4d by the following sub-groupings of respondents; Medicare enrollment status, retirement status, state or local employer, respondent's sex, the ETF defined regions of WI (including those living outside of WI), and by the respondents' answers to how they either are paying or plan to play for the monthly health insurance premiums.

There were statistically significant differences across sub-groups for the following sub-groups; the respondents' Medicare enrollment status, the respondents' retirement status and how respondents either are paying for or plan to play for the monthly health insurance premiums. The results of those cross-tabulations are on the following pages.

Below are the responses to Q4d by whether or not the respondent is enrolled in Medicare based on the ETF sample file designation. The difference between the two sub-groups is statistically significant $p < 0.01$ (Pearson Chi-Square is 20.403).

Acceptability of changes to Medicare plan if the possibility of having different Medicare options available then there are now
by Medicare enrollment status
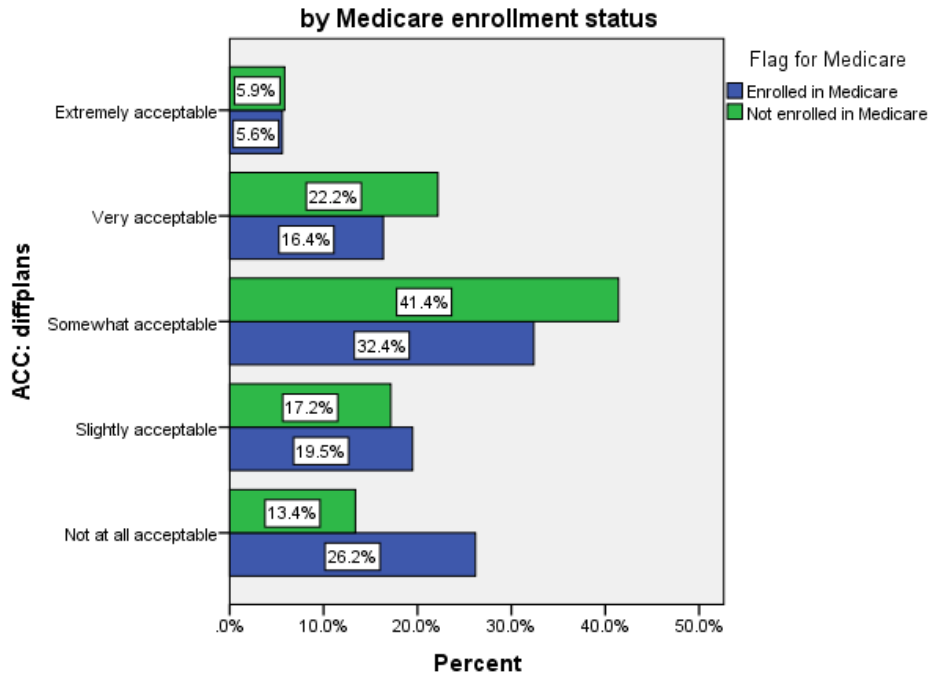
			Flag for Medicare		
			Enrolled in Medicare	Not enrolled in Medicare	Total
ACC: diffplans	Extremely acceptable	Count	36	14	50
		% within Flag for Medicare	5.6%	5.9%	5.7%
	Very acceptable	Count	105	53	158
		% within Flag for Medicare	16.4%	22.2%	17.9%
	Somewhat acceptable	Count	208	99	307
		% within Flag for Medicare	32.4%	41.4%	34.8%
	Slightly acceptable	Count	125	41	166
		% within Flag for Medicare	19.5%	17.2%	18.8%
	Not at all acceptable	Count	168	32	200
		% within Flag for Medicare	26.2%	13.4%	22.7%
Total		Count	642	239	881
		% within Flag for Medicare	100.0%	100.0%	100.0%

Below are the responses to Q4d by whether or not the respondents are retired based on the ETF sample file designation.   The difference between the two sub-groups is statistically significant $p < 0.01$ (Pearson Chi-Square is 17.081).

Acceptability of changes to Medicare plan if the possibility of having different Medicare options available then there are now

by retirement status
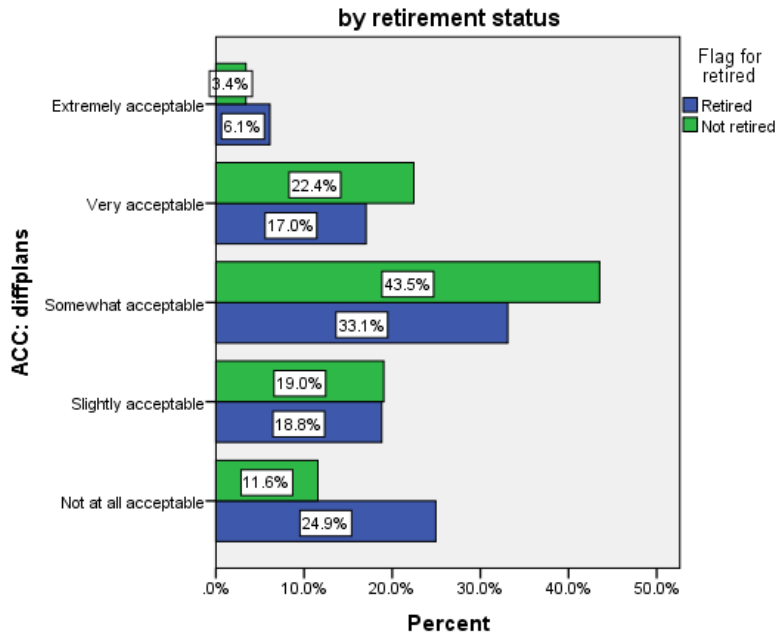
			Retired	Not retired	Total
			Flag for retired		
ACC: diffplans	Extremely acceptable	Count	45	5	50
		% within Flag for retired	6.1%	3.4%	5.7%
	Very acceptable	Count	125	33	158
		% within Flag for retired	17.0%	22.4%	17.9%
	Somewhat acceptable	Count	243	64	307
		% within Flag for retired	33.1%	43.5%	34.8%
	Slightly acceptable	Count	138	28	166
		% within Flag for retired	18.8%	19.0%	18.8%
	Not at all acceptable	Count	183	17	200
		% within Flag for retired	24.9%	11.6%	22.7%
Total		Count	734	147	881
		% within Flag for retired	100.0%	100.0%	100.0%

Below are the responses to Q4d by whether the respondent is/was employed state or local government based on the ETF sample file designation. The difference between the two sub-groups is <u>not</u> statistically significant $p > 0.05$ (Pearson Chi-Square is 0.399).

Acceptability of changes to Medicare plan if the possibility of having different Medicare options available then there are now

by respondent's employer type
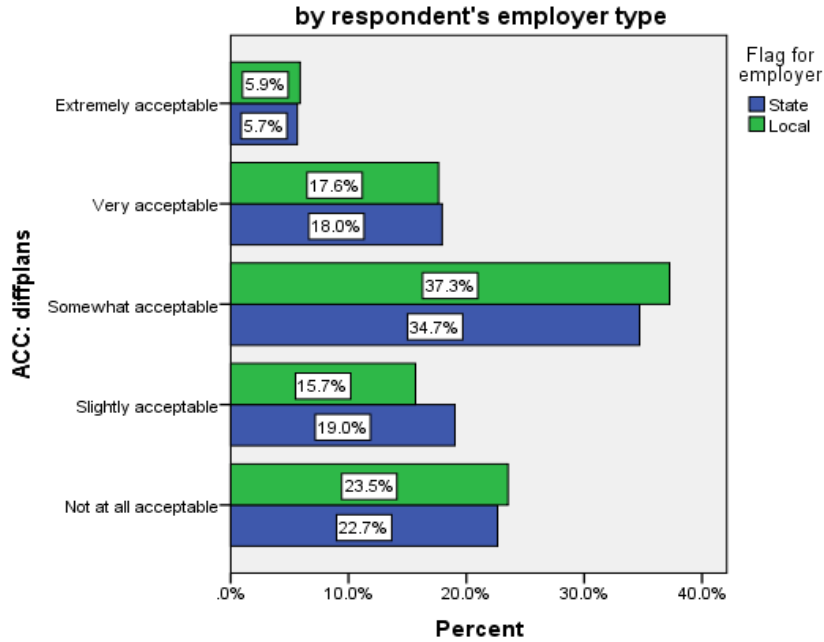
			State	Local	Total
				Flag for employer	
ACC: diffplans	Extremely acceptable	Count	47	3	50
		% within Flag for employer	5.7%	5.9%	5.7%
	Very acceptable	Count	149	9	158
		% within Flag for employer	18.0%	17.6%	17.9%
	Somewhat acceptable	Count	288	19	307
		% within Flag for employer	34.7%	37.3%	34.8%
	Slightly acceptable	Count	158	8	166
		% within Flag for employer	19.0%	15.7%	18.8%
	Not at all acceptable	Count	188	12	200
		% within Flag for employer	22.7%	23.5%	22.7%
Total		Count	830	51	881
		% within Flag for employer	100.0%	100.0%	100.0%

Below are the responses to Q4d by the respondent's sex based on the ETF sample file designation.   The difference between the two sub-groups is <u>not</u> statistically significant $p > 0.05$ (Pearson Chi-Square is 5.899).

Acceptability of changes to Medicare plan if the possibility of having different Medicare options available then there are now

by respondent's sex
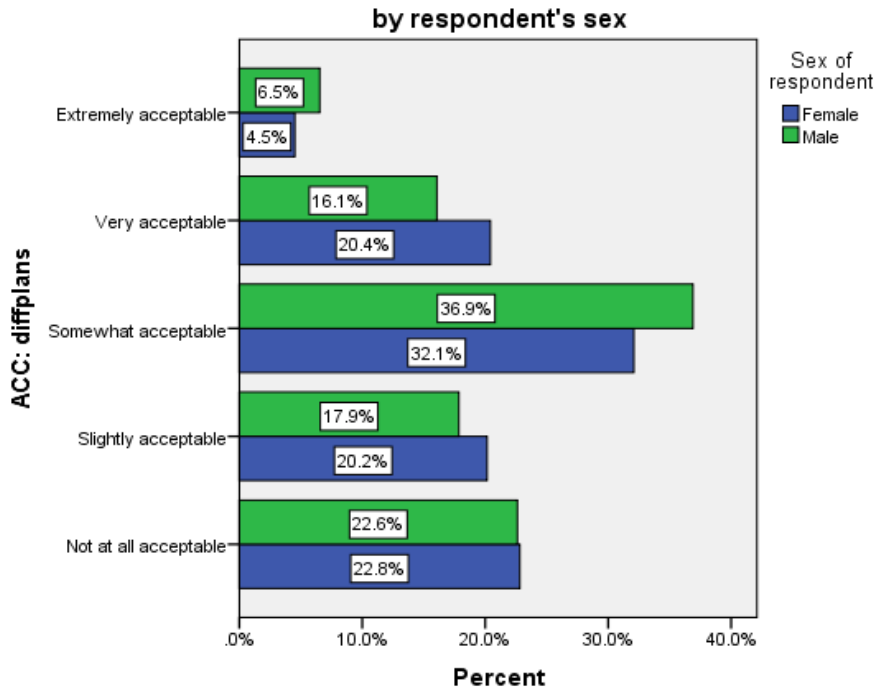
			Sex of respondent		Total
			Female	Male	
ACC: diffplans	Extremely acceptable	Count	17	33	50
		% within Sex of respondent	4.5%	6.5%	5.7%
	Very acceptable	Count	77	81	158
		% within Sex of respondent	20.4%	16.1%	17.9%
	Somewhat acceptable	Count	121	186	307
		% within Sex of respondent	32.1%	36.9%	34.8%
	Slightly acceptable	Count	76	90	166
		% within Sex of respondent	20.2%	17.9%	18.8%
	Not at all acceptable	Count	86	114	200
		% within Sex of respondent	22.8%	22.6%	22.7%
Total		Count	377	504	881
		% within Sex of respondent	100.0%	100.0%	100.0%

Below are the responses to Q4d by grouping respondents based on the region of the state they live in based on the address in ETF sample file designation. The difference between the sub-groups is <u>not</u> statistically significant $p > 0.05$ (Pearson Chi-Square is 15.223).
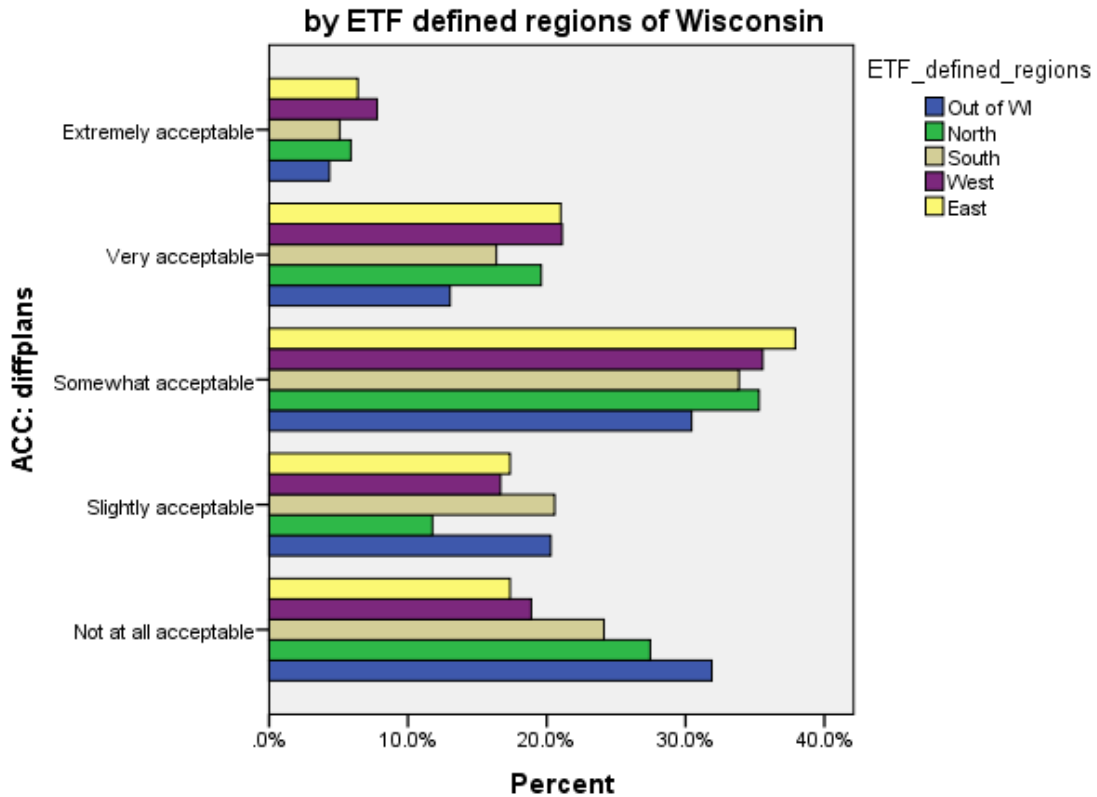
Acceptability of changes to Medicare plan if the possibility of having different Medicare options available then there are now

by ETF defined regions of Wisconsin

Crosstab

			ETF_defined_regions					
			Out of WI	North	South	West	East	Total
ACC: diffplans	Extremely acceptable	Count	3	3	23	7	14	50
		% within ETF_defined_regions	4.3%	5.9%	5.1%	7.8%	6.4%	5.7%
	Very acceptable	Count	9	10	74	19	46	158
		% within ETF_defined_regions	13.0%	19.6%	16.4%	21.1%	21.0%	17.9%
	Somewhat acceptable	Count	21	18	153	32	83	307
		% within ETF_defined_regions	30.4%	35.3%	33.8%	35.6%	37.9%	34.8%
	Slightly acceptable	Count	14	6	93	15	38	166
		% within ETF_defined_regions	20.3%	11.8%	20.6%	16.7%	17.4%	18.8%
	Not at all acceptable	Count	22	14	109	17	38	200
		% within ETF_defined_regions	31.9%	27.5%	24.1%	18.9%	17.4%	22.7%
Total		Count	69	51	452	90	219	881
		% within ETF_defined_regions	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Below are the responses to Q4d by how the respondents reported that they either are currently paying for or plan on paying for their monthly health insurance premiums (Q7/Q5).
The differences between the sub-groups are statistically significant $p < 0.01$ (Pearson Chi-Square is 43.413).

Acceptability of changes to Medicare plan if the possibility of having different Medicare options available then there are now
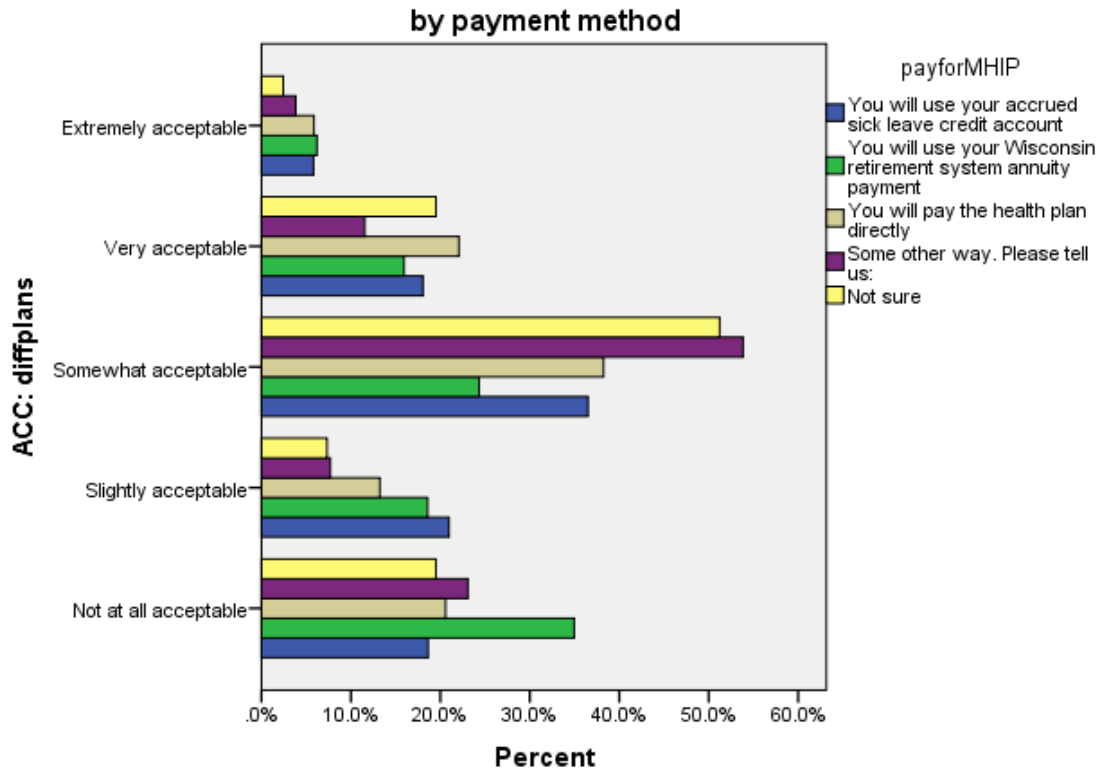
by payment method

Crosstab

			You will use your accrued sick leave credit account	You will use your Wisconsin retirement system annuity payment	You will pay the health plan directly	Some other way. Please tell us:	Not sure	Total
ACC: diffplans	Extremely acceptable	Count	30	14	4	1	1	50
		% within payforMHIP	5.9%	6.2%	5.9%	3.8%	2.4%	5.7%
	Very acceptable	Count	92	36	15	3	8	154
		% within payforMHIP	18.0%	15.9%	22.1%	11.5%	19.5%	17.7%
	Somewhat acceptable	Count	188	55	26	14	21	304
		% within payforMHIP	36.8%	24.3%	38.2%	53.8%	51.2%	34.9%
	Slightly acceptable	Count	108	42	9	2	3	164
		% within payforMHIP	21.1%	18.6%	13.2%	7.7%	7.3%	18.8%
	Not at all acceptable	Count	93	79	14	6	8	200
		% within payforMHIP	18.2%	35.0%	20.6%	23.1%	19.5%	22.9%
Total		Count	511	226	68	26	41	872
		% within payforMHIP	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

The results below are only from the respondents to the questionnaire (ET-4962M) sent to those subscribers listed as enrolled Medicare from the ETF sample file.

(ET-4962M only) Since retirement ever changed health plan

28.53%
Yes

71.47%
No
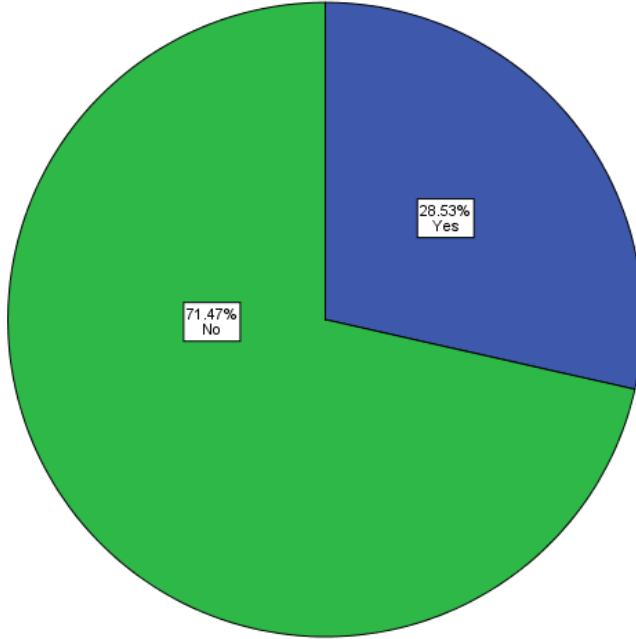
Q5 (ET-4962M). since retired ever changed your health plan

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	183	20.2	28.2	28.2
	No	466	51.3	71.8	100.0
	Total	649	71.5	100.0	
Missing	BLANK	15	1.7		
	System	244	26.9		
	Total	259	28.5		
Total		908	100.0		

The results below are only from the respondents to the questionnaire (ET-4962M) who answered "yes" to Q5 above.   So that if they reported that they have changed their health plan since retiring, what was the main reason they had for changing health plans.
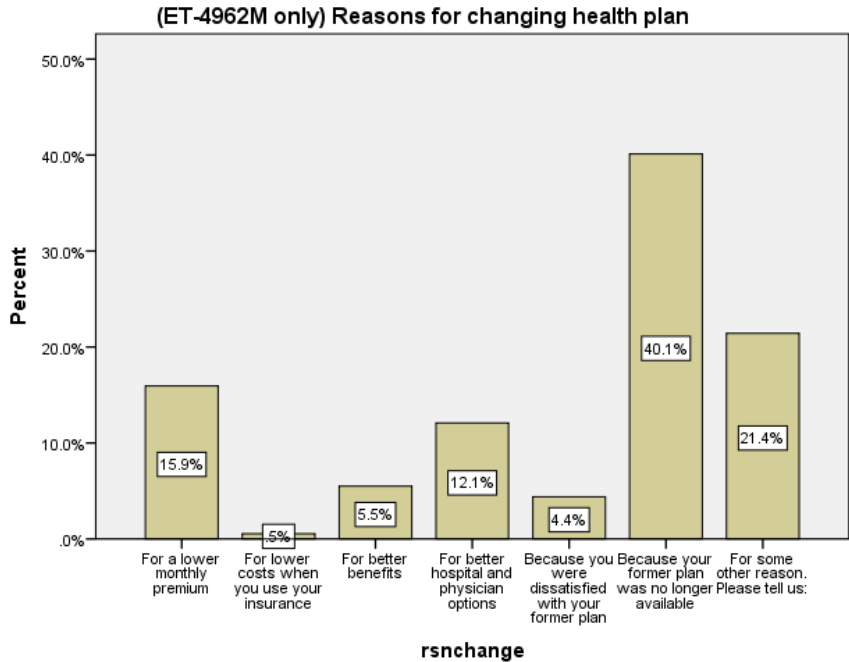
Q5a (ET-4962M). main reason you changed your health plan

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	For a lower monthly premium	29	15.8	16.2	16.2
	For better benefits	10	5.5	5.6	21.8
	For better hospital and physician options	21	11.5	11.7	33.5
	Because you were dissatisfied with your former plan	8	4.4	4.5	38.0
	Because your former plan was no longer available	73	39.9	40.8	78.8
	For some other reason. Please tell us:	38	20.8	21.2	100.0
	Total	179	97.8	100.0	
Missing	BLANK	4	2.2		
Total		183	100.0		

Below are the verbatim responses from respondents who answered "For some other reason" to Q5a above.

Q5a (ET-4962M). VERBATIM TEXT TO Q5A SOME OTHER REASON

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Age 65 - enrolled in Medicare	1	2.6	2.6	2.6
	Availability of specific medical specialists NOT available w/ current plan.	1	2.6	2.6	5.3
	Became medicare eligible.	1	2.6	2.6	7.9
	changed to wife's plan	1	2.6	2.6	10.5
	Clinic change covering plan	1	2.6	2.6	13.2
	For out of state coverage.	1	2.6	2.6	15.8
	For worldwide coverage	1	2.6	2.6	18.4
	Husbands job had health insurance and then dropped it so we re-enrolled with the state.	1	2.6	2.6	21.1
	Move back + forth to Florida each year	1	2.6	2.6	23.7
	Move from WI	1	2.6	2.6	26.3
	Moved from Madison (Dean Care) to Green Bay (Prevea 360)	1	2.6	2.6	28.9
	Moved out of current plan area.	1	2.6	2.6	31.6
	Moved out of state	1	2.6	2.6	34.2
	Moved out of state.	1	2.6	2.6	36.8
	Moved to another state.	1	2.6	2.6	39.5
	Moved too far away from provider	1	2.6	2.6	42.1
	My husband died during this period. He had sick leave account + used WPS.	1	2.6	2.6	44.7
	Nationwide coverage	3	7.9	7.9	52.6
	Nationwide coverage.	1	2.6	2.6	55.3

Nationwide/worldwide coverage	1	2.6	2.6	57.9
Needed nationwide coverage	1	2.6	2.6	60.5
Needed out of state coverage	1	2.6	2.6	63.2
No 'Health Tradition'	1	2.6	2.6	65.8
Other employer plans	1	2.6	2.6	68.4
Out-of-state coverage.	1	2.6	2.6	71.1
Relocation	1	2.6	2.6	73.7
Sick leave ran out, had to choose another cheaper.	1	2.6	2.6	76.3
so we had physicians + hospital closer to where we now live	1	2.6	2.6	78.9
Switches from Phy Plus to Unity. Not sure of PP mergin with Unity Point. Uncertainty	1	2.6	2.6	81.6
Temp. out of area move	1	2.6	2.6	84.2
To keep the same doctors	1	2.6	2.6	86.8
under spouse's plan, which ran out	1	2.6	2.6	89.5
Wanted to stay with primary physician	1	2.6	2.6	92.1
We retired early. Medicare not available for under age 65	1	2.6	2.6	94.7
Went on wife, insurance through her work.	1	2.6	2.6	97.4
Worldwide coverage (eg, WPS)	1	2.6	2.6	100.0
Total	38	100.0	100.0	

The results below are only from the respondents to the questionnaire (ET-4962M) sent to those subscribers listed as enrolled Medicare from the ETF sample file.

(ET-4962M only) Since retirement ever considered changing health plan

28.09%
Yes
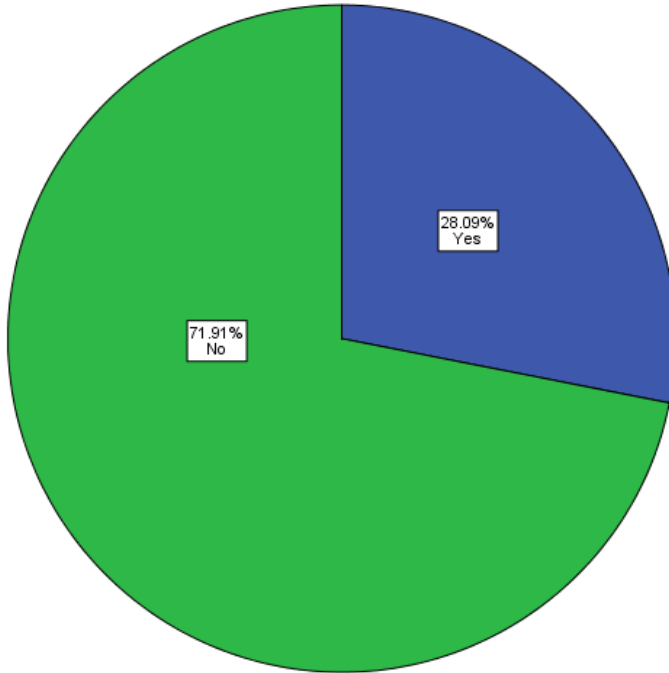
71.91%
No

Q6 (ET-4962M). since retired ever considered changing health plan

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	141	15.5	28.1	28.1
	No	360	39.6	71.9	100.0
	Total	501	55.2	100.0	
Missing	BLANK	26	2.9		
	System	381	42.0		
	Total	407	44.8		
Total		908	100.0		

The results below are only from the respondents to the questionnaire (ET-4962M) who answered "yes" to Q6 above.   So, that if they reported that they have ever considered changing their health plan since retiring, what was the main reason they had for considering changing health plans.

(ET-4962M only) Reasons for considering changing health plan
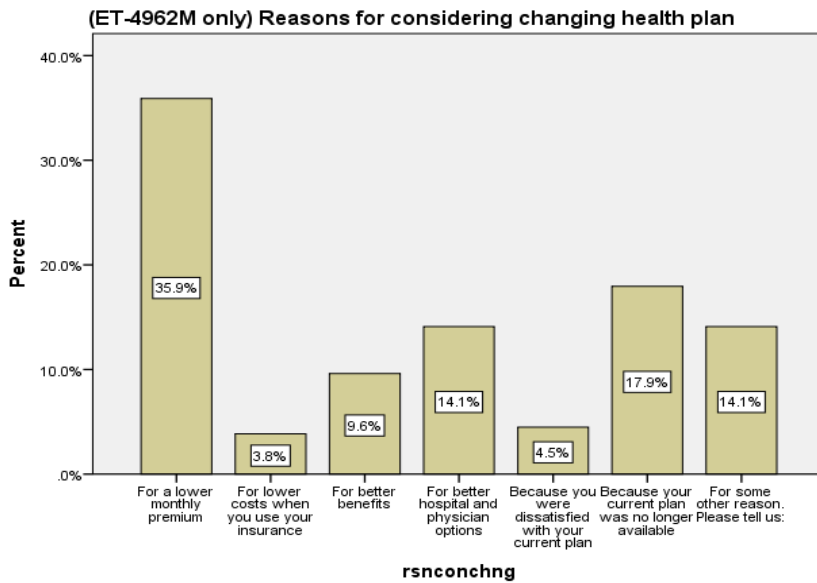
Q6a (ET-4962M). main reason for considering changing health plan

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	For a lower monthly premium	53	37.6	37.9	37.9
	For lower costs when you use your insurance	5	3.5	3.6	41.4
	For better benefits	14	9.9	10.0	51.4
	For better hospital and physician options	20	14.2	14.3	65.7
	Because you were dissatisfied with your current plan	7	5.0	5.0	70.7
	Because your current plan was no longer available	22	15.6	15.7	86.4
	For some other reason. Please tell us:	19	13.5	13.6	100.0
	Total	140	99.3	100.0	
Missing	BLANK	1	.7		
Total		141	100.0		

Below are the verbatim responses from respondents who answered "For some other reason" to

Q6a above.

Q6a (ET-4962M). VERBATIM TEXT TO Q6A SOME OTHER REASON

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	A possibility of moving for a cheaper rent. I may need to do that very soon, and my health plan or one as good as mine. (covering as much with low out of pocket) is my guide in choosing a different county in WI or MN.	1	5.3	5.3	5.3
	Age 65 - enrolled in Medicare	1	5.3	5.3	10.5
	Better nationwide coverage	1	5.3	5.3	15.8
	Checking options wince there is no trust given the present political state.	1	5.3	5.3	21.1
	Curiosity	1	5.3	5.3	26.3
	Dean not o.k. at U.W. Dane County????	1	5.3	5.3	31.6
	For ability to receive services out of static if needed.	1	5.3	5.3	36.8
	For nationwide + world coverage	1	5.3	5.3	42.1
	For out of state coverage.	1	5.3	5.3	47.4
	Get coverage closer to me.	1	5.3	5.3	52.6
	I can use accrued sick leave credit.	1	5.3	5.3	57.9
	Location of clinics too far	1	5.3	5.3	63.2
	Lower costs with equal or better coverage.	1	5.3	5.3	68.4
	Many Medicare COD supplemental plans much cheaper on private market	1	5.3	5.3	73.7
	Nation/World coverage	1	5.3	5.3	78.9
	Nationwide coverage	2	10.5	10.5	89.5

Nationwide/worldwide coverage	1	5.3	5.3	94.7
Our current plan does not offer Silver Sneakers which is the only way to attend senior classes at my fitness center :(	1	5.3	5.3	100.0
Total	19	100.0	100.0	

The results below are from the respondents to both questionnaires for question 7.   It was the last question on both surveys.

How you pay or plan to pay for your monthly health insurance premium
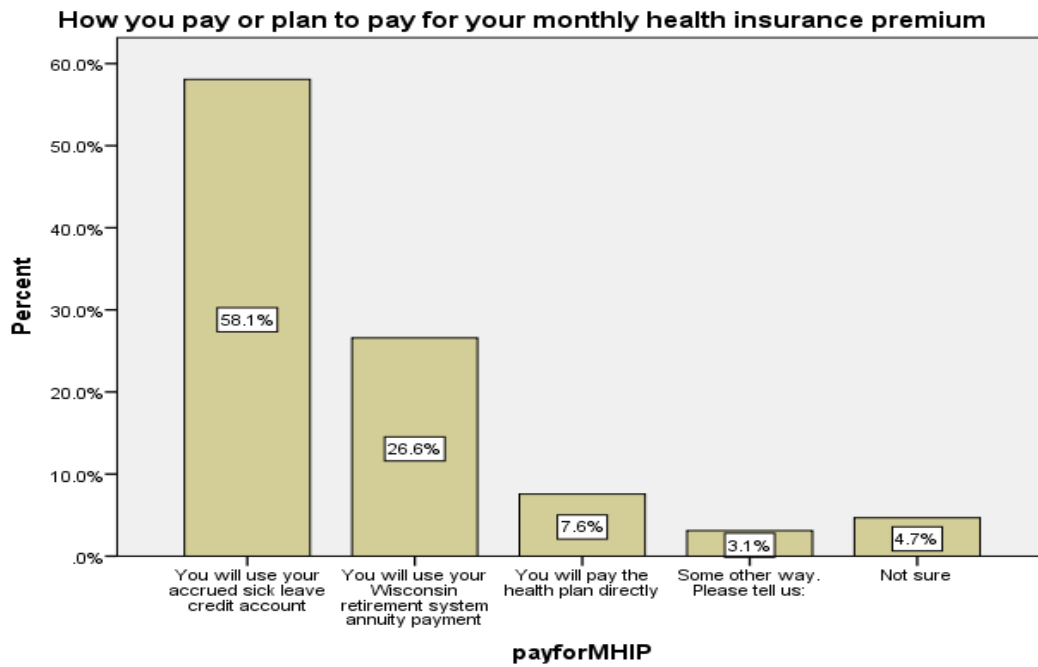
Q7 (ET-4962M) / Q5 (ET-4962N). which best describes how you pay for your monthly health insurance premium

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	You will use your accrued sick leave credit account	518	57.0	57.9	57.9
	You will use your Wisconsin retirement system annuity payment	239	26.3	26.7	84.6
	You will pay the health plan directly	68	7.5	7.6	92.2
	Some other way. Please tell us:	28	3.1	3.1	95.3
	Not sure	42	4.6	4.7	100.0
	Total	895	98.6	100.0	
Missing	BLANK	12	1.3		
	REFUSED	1	.1		
	Total	13	1.4		
Total		908	100.0		

Below are the verbatim responses from respondents who answered "Some other way" to Q7/Q5 above.

Q7 (ET-4962M) / Q5 (ET-4962N). VERBATIM TEXT OF Q7/Q5 SOME OTHER WAY

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1st accrued, then pay directly	1	3.6	3.6	3.6
	1st I will use sick, when it runs out, I will either take it out of Soc Sec or annuity	1	3.6	3.6	7.1
	AARP United Health Adv. Op. senior	1	3.6	3.6	10.7
	auto-deductible -monthly from checking	1	3.6	3.6	14.3
	Autopayment out of checking.	1	3.6	3.6	17.9
	Check	1	3.6	3.6	21.4
	comes out of my paycheck	1	3.6	3.6	25.0
	Effective Jan. 2018, life insurance convert to health care premiums.	1	3.6	3.6	28.6
	I am still a state employee..	1	3.6	3.6	32.1
	I might start collecting Social Security	1	3.6	3.6	35.7
	I will still be working, paying through payroll deduction	1	3.6	3.6	39.3
	I will use this when I retire	1	3.6	3.6	42.9
	It's been 14 yrs. since I retired so have used up sick leave	1	3.6	3.6	46.4
	NOT RETIRED	1	3.6	3.6	50.0
	Not retired. Deductions from pay.	1	3.6	3.6	53.6
	Pay through checking account.	1	3.6	3.6	57.1
	Payroll deduct not retired	1	3.6	3.6	60.7
	payroll deduction	1	3.6	3.6	64.3

Payroll Deduction	1	3.6	3.6	67.9
Sick leave accrued, then WI Annuity Payment	1	3.6	3.6	71.4
Sick leave until it runs out, then pay.	1	3.6	3.6	75.0
Start w/ sick leave credits then move to annuity.	1	3.6	3.6	78.6
Still employed. Paid for by state and comes out of my monthly pay.	1	3.6	3.6	82.1
Still state employee	1	3.6	3.6	85.7
Take money out of check before sending it to me	1	3.6	3.6	89.3
Through [word looks like 'spouses'] credit system.	1	3.6	3.6	92.9
Will use Tricare for life	1	3.6	3.6	96.4
Withdrawal from Bank Account.	1	3.6	3.6	100.0
Total	28	100.0	100.0	