eHealth Original Research: Medicare Pulse on Consumer Sentiments & Satisfaction

February 2023
Introduction

With eHealth’s original research: Medicare Pulse - Consumer Sentiments & Satisfaction report we lean into 2023 by taking stock of how today’s Medicare beneficiaries feel about their coverage, what they look for when purchasing a Medicare plan, and concerns they have for the future.

Findings in this report demonstrate that while a strong majority of beneficiaries are satisfied with their coverage, many still feel unheard by the political leaders and policymakers who shape the Medicare program. We see that costs are a big concern, but premiums often come second to other expenses. We also learn how disparities of income may shape the Medicare experience of many beneficiaries.

This report is based on a far-ranging survey of beneficiaries currently enrolled in Medicare Advantage, Medicare Supplement, or Medicare Part D plans purchased through eHealth. The survey was conducted in February of 2023, with over 4,500 responses.

For more than 25 years, eHealth has had its finger on the pulse of American health insurance consumers. We’ve helped millions find the best coverage for them, and we continue to provide opportunities for beneficiary feedback. We offer proprietary insights into Medicare beneficiaries through this presentation.
Highlights

• **Most are satisfied with Medicare coverage but still feel unheard:** 88% of Medicare beneficiaries are satisfied with their coverage, but 60% say political leaders aren’t really listening to the needs of Medicare enrollees.

• **Worry over out-of-pocket costs trumps premiums:** More beneficiaries are worried about being able to afford their out-of-pocket costs (75%) than their monthly premiums (43%).

• **Many fear new costs with the end of the COVID emergency:** 62% say they are worried about increased out-of-pocket costs for COVID-related care when the federal emergency declaration ends.

• **Concerns for the future differ by income:** Lack of access to the prescription drugs they need is the top concern for the most affluent beneficiaries, while lower-income beneficiaries worry more about benefits being reduced or being able to pay for medical care.

• **Annual coverage reviews are important, but awareness of some opportunities is low:** Overall, 95% say it’s important to review their coverage options at least once per year, but only 10% of Medicare Advantage enrollees are aware of the Medicare Advantage enrollment period currently underway.
Almost nine in ten express satisfaction with their Medicare coverage

- 50% say they are “very satisfied” with their Medicare coverage.
- 38% say they are “satisfied.”
- 8% say they are neither satisfied nor dissatisfied.
- Only 4% of respondents express dissatisfaction with their Medicare coverage.

Lower income beneficiaries are more likely to say their satisfaction has increased*

- Overall, 33% say they are more satisfied with their coverage today than they were a year ago; 53% are equally satisfied.
- 42% of those with an income below $25,000 per year say they are more satisfied today than a year ago, compared to 31% with an income of $50,000 to $75,000 and 26% with an income over $100,000.
- Those on a fixed income were more likely than those not on a fixed income to say they are more satisfied today than a year ago (36% vs 29%).

* Findings in this column include responses only from those who indicated they were covered by Medicare a year ago.
The Biggest Cost Concerns for Medicare Beneficiaries

Fewer than half worry about paying premiums but three quarters worry about out-of-pocket costs

- 12% of Medicare beneficiaries say they are “very worried” about their ability to pay their monthly premiums, while an additional 31% are “somewhat worried.”
- 25% say they are “very worried” about their ability to pay their maximum out-of-pocket costs in case of serious illness or hospitalization, while another 50% are “somewhat worried.”

Younger beneficiaries and those living on a fixed income are most worried about their out-of-pocket costs

- 64% of those living on a fixed income say they lack savings sufficient to cover their maximum out-of-pocket costs, compared to 35% of those not living on a fixed income.
- 58% of those between age 65 and 70 say they lack savings sufficient to cover their maximum out-of-pocket costs, compared to 50% of those age 71 through 79.
Beneficiaries’ Top Consideration When Choosing Plans

Coverage for preferred doctors is a bigger consideration than affordable monthly premiums

- 31% of respondents say finding a plan that covers their preferred doctors or hospitals is their number one priority when choosing a plan.
- 24% cite affordable monthly premiums.
- 17% cite affordable copays and deductibles.
- 9% each cite coverage for prescription drugs or the extra benefits (gym membership discounts, etc.) that some Medicare plans may offer.

“What’s most important to you when picking Medicare coverage?”

When choosing a Medicare plan, different income levels have different priorities

- 28% of those with an income of $50,000 to $75,000 per year say an affordable premium is their top priority, compared to 22% of those earning less than $25,000 and 14% of those earning over $100,000.
- 49% of those with an income over $100,000 per year say coverage for preferred doctors and hospitals is their top priority, compared to 34% of those earning $50,000 to $75,000 and 25% of those earning under $25,000.
Unaffordable care and reduced benefits are top concerns when beneficiaries think about the future.

- 37% say they worry most about not being able to afford medical care in the future.
- 28% worry most about their Medicare benefits being reduced.
- 19% worry most about lack of access to doctors or hospitals.
- 7% worry most about lack of access to the prescription drugs they need.

Top worries for the future differ for low, mid, and upper income beneficiaries:

- Lack of access to the prescription drugs they need is the top concern cited by those with an income over $100,000 per year.
- Medicare benefits being reduced is the top concern for those with an income between $50,000 and $75,000 per year.
- Not being able to afford medical care is the top concern for those with an annual income below $25,000.
Few Medicare beneficiaries feel national leaders are paying attention to them

- 60% say political leaders are not responsive to the needs of Medicare beneficiaries.
- Only 19% think political leaders are responsive to their needs.
- 21% are unsure.

“In your opinion, are American political leaders responsive to the needs of Medicare beneficiaries?”

- 60% say political leaders are not responsive to the needs of Medicare beneficiaries.
- Only 19% think political leaders are responsive to their needs.
- 21% are unsure.

Republican and Independent voters are more likely to feel unheard by political leaders

- Regardless of party affiliation, a majority of voting beneficiaries agreed that political leaders are not listening to their needs.
- However, Republican voters (67%) and Independent voters (63%) were more likely than Democratic voters (55%) to feel that way.
Medicare Coverage and Public Policy (cont.)

Beneficiaries are twice as likely to say Medicare is moving in the “right direction” vs “wrong direction”

- When invited to consider changes to Medicare coverage in recent years, 39% say it is moving in the right direction.
- 19% say the Medicare program is moving in the wrong direction.
- 43% are unsure.

“Is Medicare moving in the right direction or wrong direction today?”

- The right direction (39%)
- The wrong direction (19%)
- I don’t know (43%)

Judgments on Medicare differ by political affiliation, but most say coverage options meet their needs

- A majority of Democratic voters (52%) say Medicare is moving in the right direction.
- Only 39% of Independent voters and 29% of Republican voters agree.
- However, 80% or more of respondents across all political affiliations say the coverage options available meet their personal needs.
Most think it’s important to review their Medicare coverage options once each year

• 95% agree or strongly agree that it’s important to review their coverage options at least once per year.

• Only 5% of respondents don’t think it’s important.

“I think it’s important to review my Medicare coverage options at least once per year.”

Four in 10 have been enrolled in their current plan for one year or less

• 39% of all respondents have been enrolled in their current Medicare coverage for one year or less; 38% have had the same plan two years or longer.

Most are unaware of the current Medicare Advantage open enrollment period

• Only 10% of Medicare Advantage enrollees know that between January 1 and March 31 they can switch to a different Medicare Advantage plan or return to Original Medicare.
Where Beneficiaries Find Help Understanding Medicare

Beneficiaries say licensed agents and friends & family are the best sources for Medicare understanding

- 48% say a licensed agent did the most to help them understand their Medicare coverage options.
- 40% cite friends or family.
- 19% cite an insurance company representative.
- 6% cite a representative from a civic organization.
- 3% cite a government employee.

“Who did the most to help you understand your Medicare coverage options?”

- A licensed agent: 48%
- Friends or family: 40%
- Insurance company representative: 19%
- Representative from a senior-serving organization: 6%
- Government employee: 3%
- Other: 3%
Anticipating the End of the COVID Emergency

Many are worried about increased costs associated with COVID testing and care

- 62% are worried the expiration of the federal COVID emergency declaration may result in more out-of-pocket costs.
- 39% are not worried.
- When the federal emergency declaration ends, some COVID care currently paid for by the federal government may devolve upon beneficiaries.

“How worried are you about your costs for COVID testing or care when the federal emergency declaration expires?”

- 44% say they were tested for COVID one or two times in the past year.
- 20% were tested three or four times in the past year.
- 8% were tested five or more times.
- 28% were not tested for COVID at all in the past year.

Many Medicare beneficiaries are still being tested for COVID periodically

- 39% are not worried.
Methodology Note

The findings presented in this report are based on a voluntary survey of Medicare beneficiaries who purchased Medicare Advantage (with or without prescription drug coverage), Medicare Supplement (Medigap) or Medicare Part D prescription drug plans through eHealth, with coverage currently in effect at the time of the survey. The survey was conducted through a third-party survey tool in February of 2023 and a total of 4,567 responses were collected. For the purposes of comparison, respondents who said they were most likely to vote for a Republican or Democratic candidate were identified, respectively, as Republican or Democratic voters; those equally likely to vote for a candidate from either party were identified as Independent voters. Throughout this report, percentages have been rounded to the nearest full percentage point and may add to slightly more or less than 100% due to rounding.
About eHealth

For more than 25 years, eHealth, Inc. (Nasdaq: EHTH) has served American consumers with innovative technology and licensed agent support to help them find health insurance solutions that fit their personal needs. Through its proprietary health insurance marketplace at eHealth.com and eHealthMedicare.com, eHealth has connected more than eight million members with quality, affordable coverage. eHealth offers Medicare Advantage, Medicare Supplement, Medicare Part D, individual, family, small business, and ancillary plans from approximately 200 health insurance companies nationwide.