

HealthyTexas

CONCLUSION AND ANNUAL ENROLLMENT REPORT

November 2015

Submitted by

Texas Department of Insurance



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Executive Summary

Between 2010 and 2014, more than 2,500 small employers provided affordable health insurance to 22,000 Texans through Healthy Texas, an innovative pilot leveraging public-private partnerships with insurers aimed at reducing the cost of coverage. In accordance with program requirements, participating employers had not recently offered health insurance as a benefit, and almost 70 percent of their employees earned less than 300 percent of the Federal Poverty Level (FPL). More than eight out of 10 Healthy Texas employers had never offered health insurance prior to enrolling. This final report describes the conclusion of Healthy Texas following the end of enrollment in November 2014 and summarizes its achievements during the program's four-year span.

| HEALTHY TEXAS AT A GLANCE | | The 81st Legislature enacted Healthy Texas in 2009 to provide comprehensive coverage at a lower cost by leveraging the expertise and administrative capacity of private health carriers combined with public funds to mitigate the risk to partner carriers for some high-cost claims. As a result, Healthy Texas carriers were able to offer coverage at up to 30 percent less than comparable small group coverage. |
|--------------------------------|---------------|---|
| Employers enrolled | 2,554 | |
| Lives covered | 22,057 | |
| Participation rate | 83% | |
| Percentage of low-wage workers | 69.4% | |

The Texas Legislature, in conjunction with the Texas Department of Insurance, envisioned Healthy Texas after years of TDI research into the reasons many Texans did not obtain health insurance and the barriers that small employers faced in offering coverage. Consistently, Texas' small employers identified cost as a major barrier to offering health insurance as a benefit to employees.¹ The Legislature initially provided Healthy Texas with an appropriation of \$36 million. TDI obtained another \$13.5 million in federal grant funds.

Combined, those funds supported the mitigation of high-cost claims to the carriers, outreach to the small business community, actuarial analysis of claims data, and program administrative costs. Based on spending projections that assumed no additional funding from the Legislature, TDI suspended Healthy Texas enrollment in August 2012. To prevent employers from seeing their coverage end in the middle of a plan year, TDI allowed employers to renew their coverage for one final plan year if their plans were up for renewal on or before December 1, 2013. TDI projected the need for additional funds to allow renewals for the final plan year, so the 83rd Legislature designated prompt pay penalty funds no longer needed by the Texas Health Insurance Pool (Pool) for that purpose; however, the Legislature did not grant the necessary appropriation authority for TDI to spend those funds. The 84th Legislature provided a \$5.2 million supplemental appropriation to cover final payments to the carriers for activities during the wind down of coverage.

The last employers termed off of Healthy Texas on November 30, 2014, and carriers worked to close all member claims over the next few months. In October 2015, TDI distributed the final payments to Healthy Texas partner carriers for a total of \$49.2 million going to mitigate high-cost claims over the life of the program.

¹ Healthy Texas Phase I Report, Texas Department of Insurance, November 2008, available at: www.tdi.texas.gov/reports/life/documents/hlthytxph1rpt08.pdf

Introduction

In response to TDI recommendations based on years of research into the challenges small employers faced in offering health insurance benefits, the 81st Texas Legislature created Healthy Texas by enacting Senate Bill 78 in 2009. Healthy Texas was a public-private partnership between the state and carriers to make comprehensive health insurance available at a lower cost to small employers with mostly low-wage workers.

Between November 2010 and November 2014, 2,554 small employers provided coverage to 22,057 Texans in comprehensive health plans that cost on average 30 percent less than comparable traditional small employer coverage. Almost 70 percent of the employees of Healthy Texas employers earned less than 300 percent of the FPL. Healthy Texas members paid \$96.5 million in reduced premiums over the life of the program, saving an estimated \$41 million over the expected cost of traditional small employer coverage.

The Legislature provided \$36 million to fund Healthy Texas in 2009. TDI suspended enrollment in Healthy Texas in August 2012, based on spending projections with no additional funding from the Legislature.² TDI worked with Healthy Texas carriers to notify employers with plan anniversary dates on or before December 1, 2013, that they could renew coverage one final plan year. The final Healthy Texas employers terminated coverage on November 30, 2014. The 84th Legislature provided limited funding through a supplemental appropriation to close out final Healthy Texas payments.

This report fulfills the statutory requirement that TDI provide an annual Healthy Texas enrollment update to the Legislature and summarizes TDI's work to close out the program following the end of enrollment.³

Purpose

For nearly a decade, TDI conducted extensive grant-funded research into the nature of the employer-sponsored insurance market in Texas by looking at employers who were and were not able to offer insurance coverage to employees as a benefit. Consistently, small employers identified cost as a significant barrier to obtaining health insurance and emphasized the need for understandable standardized coverage options.⁴

Using information about the barriers small employers cited for not offering coverage, the Legislature created Healthy Texas in 2009 as an affordable alternative. The legislation aimed to bring new small employers with low-wage workers and no recent history of offering health insurance coverage into the health insurance market without creating disruptions for employer groups already offering coverage.

Healthy Texas' statutorily mandated goals were to

- provide access to quality, small employer health benefit plans at an affordable price;
- encourage small employers to offer health insurance coverage to employees and their dependents; and
- maximize reliance on proven managed care strategies and procedures.⁵

² Texas Insurance Code - Section 1508.258

³ Texas Insurance Code - Section 1508.257(b)

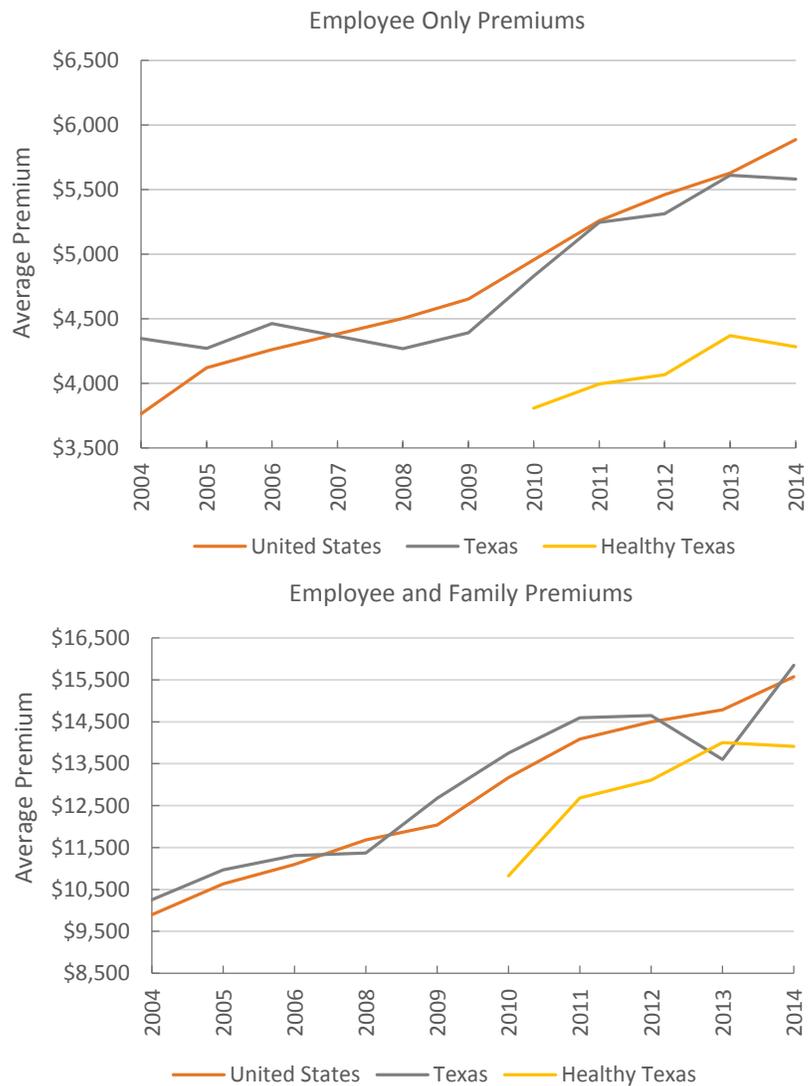
⁴ Healthy Texas Phase I Report, Texas Department of Insurance, November 2008, available at: www.tdi.texas.gov/reports/life/documents/hlthytxph1rpt08.pdf

⁵ Texas Insurance Code - Section 1508.001

To help keep coverage costs affordable and administrative expenses at a minimum, TDI partnered with two private health insurance carriers, Celtic Insurance Company and United Healthcare (UHC), through a competitive bid process to provide coverage to eligible small employers. The partner carriers were able to leverage their existing expertise in enrollment, benefits administration, claims handling, and provider reimbursement. Each used existing agent networks to market to eligible small employers.

In turn, TDI administered the Premium Stabilization Fund (PSF), established as part of Healthy Texas to offset the partner carriers' costs and enable them to lower premiums for coverage. The carriers provided regular reports to TDI on claims activity, and TDI used the PSF to reimburse carriers for eligible high-cost claims. TDI also monitored enrollment and ongoing claims activity to ensure PSF expenditures did not exceed available funds. As a result, Healthy Texas carriers offered coverage up to 30 percent lower than comparable small employer coverage in Texas. Figure 1 shows the average annual employee only and employee plus family health insurance premiums in the small employer market in the United States, Texas, and for Healthy Texas over time.

Figure 1: Small Employer Market Average Premiums



2007 data were not collected for the Insurance Component.

Source: Analysis of 2000-2014 Medical Expenditure Survey. Agency for Healthcare Research and Quality.

Healthy Texas Basics

Employer qualifications

One of the primary goals of Healthy Texas was to bring new employers that were the least able to afford health insurance into the health insurance market without disrupting the existing market for other small employers. As a result, the Legislature defined a clear set of eligibility criteria employers needed to meet to participate in Healthy Texas.

As described in the enabling legislation, to be eligible for Healthy Texas an employer had to

- have between two and 50 employees,
- be located in Texas,

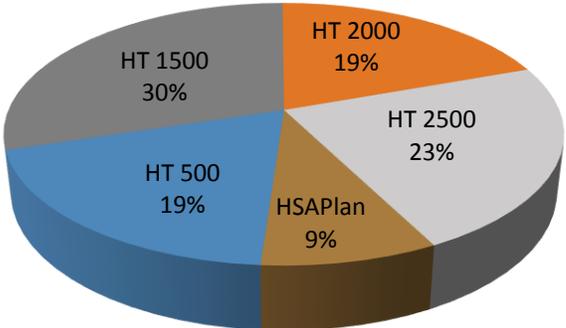
- not have provided health insurance as a benefit within 12 months prior to applying, except for employers who offered health plans with relatively few benefits and very low cost,
- pay at least 30 percent of its employees’ wages at or below 300 percent of FPL (\$34,470 annually in 2013, the final year of renewals),
- get at least 60 percent of its employees to sign up for Healthy Texas,
- pay at least 50 percent of the monthly health insurance premium on behalf of each covered employee, and
- offer coverage to dependents of covered employees.

Plan benefits

One unique aspect of Healthy Texas was the use of standardized plans between carriers. By agreeing to participate in Healthy Texas, carriers agreed to offer standardized Healthy Texas plans to eligible employers, with only minor variations. In the first year of Healthy Texas, all plans offered by both carriers either had a \$500 deductible; a \$1,500 deductible; or were a high-deductible, health savings account (HSA) model. In following years, TDI expanded the allowable Healthy Texas plans to include \$2,000 and \$2,500 deductible options in addition to the three plans previously offered.

Employers showed varied interest in the plan options. Among all groups who enrolled in Healthy Texas, about 30 percent of all employers selected the \$1,500 deductible plan. The next most popular plan was the \$2,500 deductible. Only 9 percent of Healthy Texas employers enrolled in the HSA plan. Employers could select a different plan when they renewed coverage, but 86 percent opted to keep the same coverage. Figure 2 shows the percent of employers that selected each plan option.

Figure 2: Enrollment by Plan Type



Employees were able to choose coverage from the following four tiers:

- employee only,
- employee and children,
- employee and spouse, or
- entire family.

Each plan required varied levels of cost sharing from enrollees up to a defined out-of-pocket maximum. Under the plans, enrollees were responsible for an annual deductible, coinsurance, and copayments. Plans did not cover out-of-network costs except for emergencies that occurred outside of the plan service area. The following benefits were not part of any Healthy Texas plan (except as a possible value-added service):

- private duty nursing and home health care,
- durable medical equipment and medical supplies or prosthetics,
- dental services, and
- glasses and contacts.

Table 1: Healthy Texas Benefit Summary

| Healthy Texas Plan Basics | Healthy Texas 500 Plan | Healthy Texas 1500 Plan | Healthy Texas 2000 Plan | Healthy Texas 2500 Plan | Healthy Texas HSA Plan |
|--|--|---|---|---|---------------------------------------|
| Annual Deductible | \$500 (3x for family) | \$1,500 (3x for family) | \$2,000 (3x for family) | \$2,500 (3x for family) | \$2,500 (2x for family) |
| Coinsurance | 20% | 20% | 20% | 30% | 20% |
| Out-of-Pocket Maximum (Including Deductible)* | \$2,000 per insured person (3x) for family | \$3,000 per insured person (3x) for family | \$4,000 \$10,000 family | \$5,000 \$12,000 Family | \$5,000 (2x for family) |
| Annual Maximum Benefit per Person | \$2,000,000 | \$2,000,000 | \$2,000,000 | \$2,000,000 | \$2,000,000 |
| Emergency Room Visits (waived if admitted) | \$125 copayment | | \$200 copayment | \$250 copayment | Deductible then \$250 copayment |
| Physician Office Visit Limit and Copayments (except for certain preventive services) | \$25 copayment | | Copayments: \$20 for primary care provider, \$40 for specialist | Copayments: \$25 for primary care provider, \$50 for specialist | Subject to deductible and coinsurance |
| Urgent Care Visits | \$50 copayment | | | \$75 copayment | Subject to deductible, coinsurance |
| Outpatient Psychiatric and Substance Abuse Services (unlimited visits annually) | \$25 copayment | | \$20 copayment | \$25 copayment | Subject to deductible, coinsurance |
| Prescription Drugs | Healthy Texas 500 Plan | Healthy Texas 1500 Plan | Healthy Texas 2000 Plan | Healthy Texas 2500 Plan | Healthy Texas HSA Plan |
| Deductible | \$200 | \$500 | \$500 | \$500 | Annual deductible |
| Generic Copayment | \$10 | \$10 | \$10 | \$15 | Annual deductible, then \$10 |
| Brand Copayment - Formulary | \$25 | \$25 | \$35 | \$45 | Annual deductible, then \$50 |
| Brand Copayment - Nonformulary | \$50 | \$50 | \$60 | \$80 | Annual deductible, then \$75 |
| Mail Order Copayment | 90-day supply generic and brand for 2x copayment | | | | |
| Generic Penalty | Waived if dispensed as written | | | | |

*Copayments do not accumulate toward the out-of-pocket maximum. Prescription drugs are not included in the out-of-pocket maximum except in the health savings account plan.

All plans covered child and adult immunizations at 100 percent. Each also covered the following services subject to the deductible and coinsurance:

- inpatient and outpatient hospital and physician's facility charges;
- inpatient psychiatric and substance abuse services;
- maternity hospital benefits;
- radiology and pathology performed in office setting;
- ambulance services; and
- miscellaneous medical services, including therapeutic injections, allergy testing, allergy immunotherapy, and cardiovascular.

Costs

Group premiums for Healthy Texas plans were based on the deductible level, geographic location of the employer, and the age and gender of covered employees. The \$500 deductible plan was typically the highest cost plan option available, while the HSA plan tended to be the least expensive option from UHC and the \$2,500 deductible plan was the least expensive option from Celtic Insurance. Plan cost to employees varied depending on whether the employees chose coverage just for themselves or opted for dependent coverage. Table 2 shows the average premium per coverage tier at the end of each year Healthy Texas provided coverage.

Table 2: Average Monthly Healthy Texas Premiums*

| | Employee | + Spouse | + Children | + Family |
|------|----------|----------|------------|------------|
| 2010 | \$317.31 | \$660.23 | \$531.50 | \$901.77 |
| 2011 | \$332.88 | \$719.71 | \$603.65 | \$1,056.82 |
| 2012 | \$338.86 | \$739.19 | \$625.46 | \$1,092.61 |
| 2013 | \$364.06 | \$790.37 | \$669.80 | \$1,167.01 |
| 2014 | \$356.89 | \$769.62 | \$669.15 | \$1,159.41 |

*Averages for all plan types combined.

Employees shared the cost of coverage with employers. To offer Healthy Texas coverage, employers agreed to pay at least 50 percent of the employee-only premium for full-time employees. About 60 percent of employers paid the minimum share of premiums. About 31 percent of employers contributed 100 percent of premiums, and the vast majority of those employers had fewer than five employees. Among those contributing 100 percent of employee premiums, 77 percent had only two or three employees.

Employers had the option to offer coverage to part-time employees and their dependents. They also had the option to pay a percentage of the premium for part-time employees and dependents of all employees. About 38 percent of employers offered coverage to part-time employees, but only 15 percent of those who did opted to contribute toward the premiums of part-time employees. About 15 percent of participating employers contributed toward dependent premiums.

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Outreach

To make Healthy Texas successful, TDI and the partner health insurance carriers worked together to inform small employers about the available coverage and how to access it. As mentioned earlier, the carriers enlisted their network of agents to get the word out to potentially eligible employers. TDI enlisted the services of a marketing firm to develop an effective outreach plan. After extensive research, including focus groups with employers, employees, insurance agents, stakeholder interviews, and an online employer survey, the marketing firm launched two statewide marketing campaigns to inform the public about Healthy Texas through the Internet, print publications, billboards, radio ads, and television ads between August 2011 and December 2011. Additionally, the marketing firm produced materials to assist agents in promoting Healthy Texas.

Figure 3: Healthy Texas Web hits



TDI launched the Healthy Texas Online website at www.HealthyTexasOnline.com in January 2010 and redesigned the site in 2011 to coordinate with the outreach campaign. The page received more than 645,000

visits between January 2010 and December 2014. The web hits rose steadily each month in the beginning of the program. During the coordinated marketing campaign, Healthy Texas Online saw an increase of more than five times the visits per month over prior months, as shown in Figure 3.

Program End

The Legislature gave TDI the responsibility for monitoring the PSF when it enacted Healthy Texas, and it gave TDI the authority to suspend enrollment to ensure claims expenses did not exceed funding available.⁶ As described earlier, TDI suspended enrollment to new members in August 2012 based on actuarial projections. At that time, Healthy Texas had 2,310 active employers with 13,420 active employees and dependents. Employers with existing Healthy Texas coverage and plan anniversary dates on or before December 1, 2013, were allowed to renew coverage for one final plan year.

Notice on End of Coverage

The Healthy Texas partner carriers worked with TDI to develop a nonrenewal notification letter for groups as they approached the end of their plan years beginning December 1, 2013. Each carrier provided at least a 45-day notice to employers

- letting them know that their Healthy Texas plan would not be renewed,
- describing any conversion options if available,
- describing other coverage options through the carrier, and
- directing employers and employees to other resources, including TDI, for guidance in exploring other health insurance options.

The carriers began distributing these notices to affected employers and employees beginning mid-November 2013. The final groups ended their plan year on November 30, 2014, terminating all coverage in Healthy Texas. TDI has provided all final reimbursements for PSF-eligible claims to participating carriers.

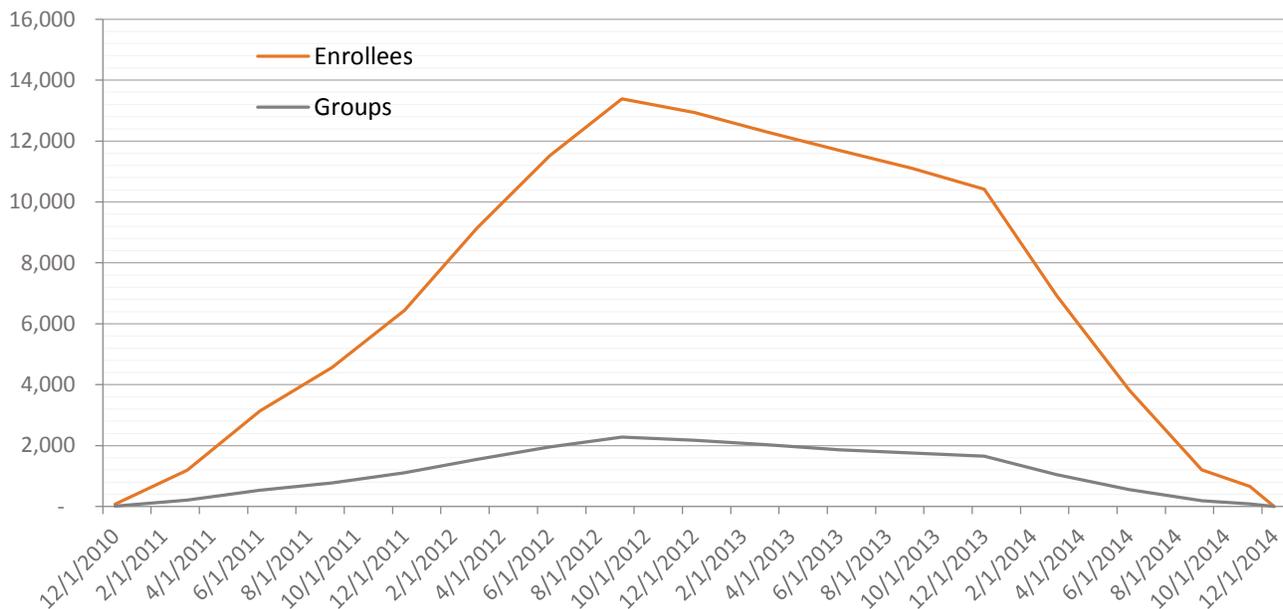
When groups began terminating from Healthy Texas coverage, TDI asked participating carriers to provide any information they had about whether those groups enrolled in other small employer group coverage. Celtic Insurance does not currently offer small employer group coverage outside of Healthy Texas, so it did not have any data on what avenues employers pursued after ending coverage. UHC reported that about 52 percent of its Healthy Texas employers transitioned into comparable UHC coverage and less than one percent switched carriers. The status of the remaining employers was unknown.

Final Demographics

Healthy Texas provided coverage for the employees and families of Texas small employers between November 2010 and November 2014. During that time, 2,554 small employers offered health insurance as a benefit to 22,057 employees and dependents. In August 2012, at peak enrollment, 2,310 employers actively enrolled 13,420 employees and dependents in a Healthy Texas plan. Enrollment slowly declined after new enrollment was suspended and began to drop steadily as existing groups termed off coverage at the end of the plan year beginning in January 2014. The final 88 employers with 666 covered members terminated Healthy Texas coverage on November 30, 2015. Figure 4, on the following page, shows active enrollment since the inception of the program.

⁶ Texas Insurance Code - Section 1508.258

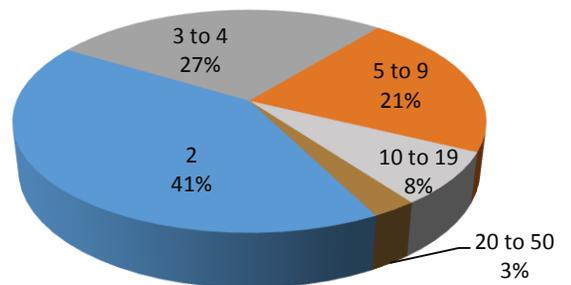
Figure 4: Active Healthy Texas Enrollment



Other demographics

Healthy Texas targeted small employers with at least two, but not more than 50 employees. The program was successful in reaching employers of all sizes, but the largest appeal was among very small employers. More than 89 percent of all employers enrolled had fewer than 10 employees. About 41 percent of enrolled employers had just two employees. Figure 5 shows the average group size of employers who participated in Healthy Texas during the life of the program.

Figure 5: Average Group Size



To participate in Healthy Texas, at least 30 percent of the employees at a business had to earn 300 percent of the FPL or less. Healthy Texas employers exceeded this requirement with about 69.4 percent of employees at or below that income level. At initial enrollment, an average of 83 percent of employees elected to enroll in the coverage.

The gender of enrollees was split almost evenly with 51 percent male membership and 49 percent females. Men accounted for about 54 percent of employees enrolled, and women made up about 55 percent of dependents that were covered. Healthy Texas also helped employees’ spouses gain access to health insurance. Among dependents, 76 percent of those covered were a spouse of the employee and 24 percent were children.

Healthy Texas succeeded in attracting a wide range of employers from across the state. As shown in Figure 6 and Table 3, small employers from all 11 Health and Human Services Regions enrolled employees in Healthy Texas during the life of the program.⁷ Most Healthy Texas employers were located in the Metroplex and the Houston area.

Figure 6: Map of Texas Regions

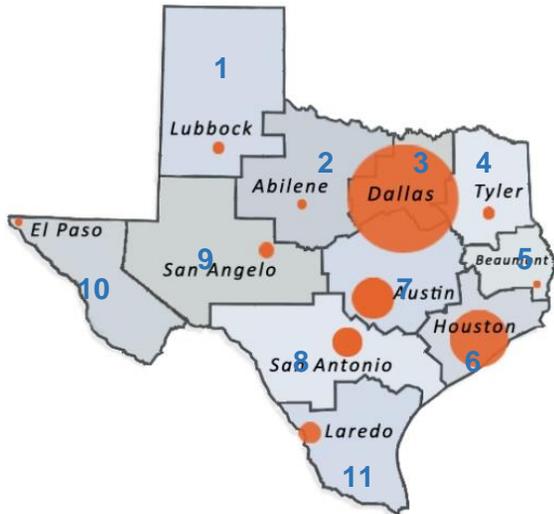
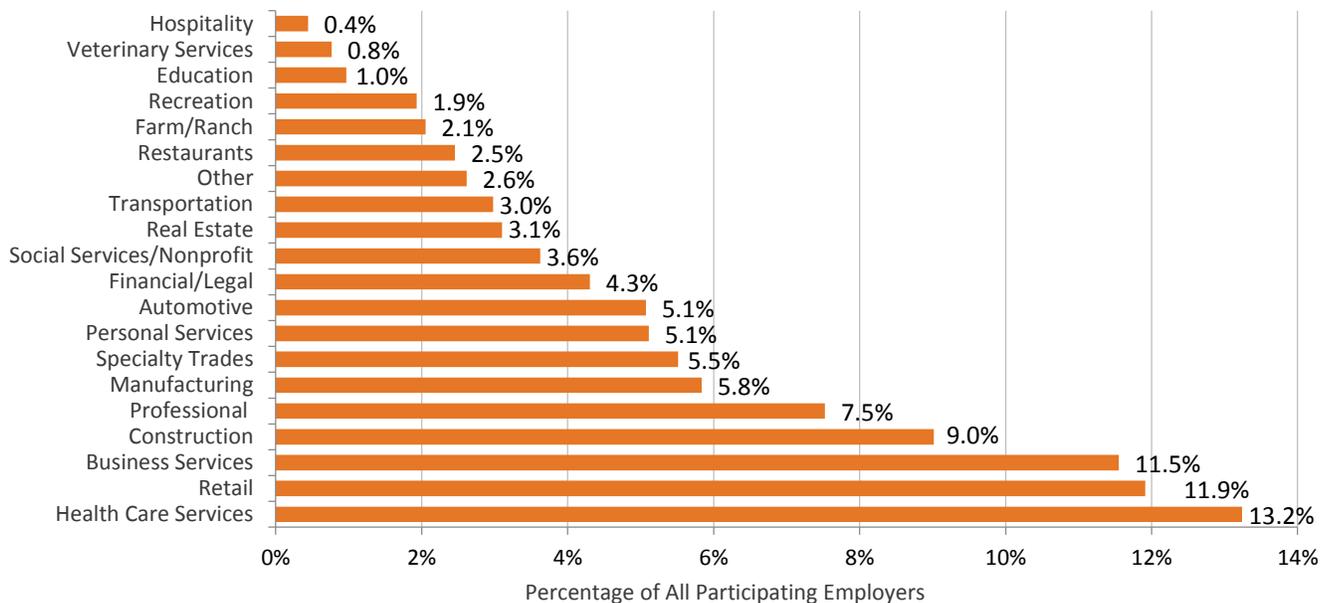


Table 3: Healthy Texas Employers by Region

| Location of Enrolled Businesses | Percent of Employers | Number of Employers |
|---------------------------------|----------------------|---------------------|
| Metroplex (Region 3) | 33% | 852 |
| Gulf Coast (Region 6) | 23% | 573 |
| Central Texas (Region 7) | 15% | 394 |
| Upper South Texas (Region 8) | 12% | 312 |
| Lower South Texas (Region 11) | 8% | 205 |
| West Texas (Regions 9 and 10) | 3% | 64 |
| Upper East Texas (Region 4) | 2% | 51 |
| Southeast Texas (Region 5) | 2% | 43 |
| High Plains (Region 1) | 1% | 36 |
| Northwest Texas (Region 2) | 1% | 24 |

Healthy Texas attracted employers in a wide range of industries, from farm and ranch to construction, and education to health care services. Employers included small bookstores, coffee shops, day spas, fitness centers, and even a few small craft breweries. The most common industry among Healthy Texas employers was health care services, comprising 13.2 percent of participating employers as shown in Figure 7. These employers included medical offices, community health centers, pediatricians, rehabilitation offices, and cancer centers.

Figure 7: Healthy Texas Employers by Industry Type



⁷ Texas Health and Human Services Commission, www.hhsc.state.tx.us/about_hhsc/Regions/

Premium Stabilization Fund

TDI managed the PSF, which was designed to help the Healthy Texas carriers offer coverage on par with plans available in the traditional small employer health insurance market at a lower price. As its name describes, the PSF helped insulate carriers from the effects of certain high-cost claims to make claims expenses more predictable, thus allowing contracted carriers to stabilize premiums.

Table 4: Healthy Texas Claims Corridor

| Per Person Annual Claims | Responsibility |
|--------------------------|--|
| \$0-\$5,000 | Private insurer pays 100% |
| \$5,000-\$75,000 | Healthy Texas pays 80% Private insurer pays 20% |
| \$75,000 + | Private insurer pays 100% |

When it created Healthy Texas, the 81st Legislature defined a range of claims that would be eligible for 80 percent reimbursement from the PSF. Through the PSF, participating carriers received back 80 percent of total medical claims for members that fell between \$5,000 and \$75,000 annually. The carriers paid 100 percent of claims outside of this range. Table 4 depicts the claims eligible for PSF reimbursement and carriers' claim responsibilities.

TDI funded the PSF with the Legislature's initial \$36 million appropriation in combination with funds from a federal grant as part of the State Health Access Program through the U.S. Health Resources and Services Administration. In total, TDI dedicated \$44 million for PSF reimbursements to participating carriers. Carriers submitted monthly reports to TDI, including claims activity in the calendar year so TDI could monitor potentially eligible claims. In February and August of each year, participating carriers submitted requests for reimbursement for PSF-eligible claims paid during the year.

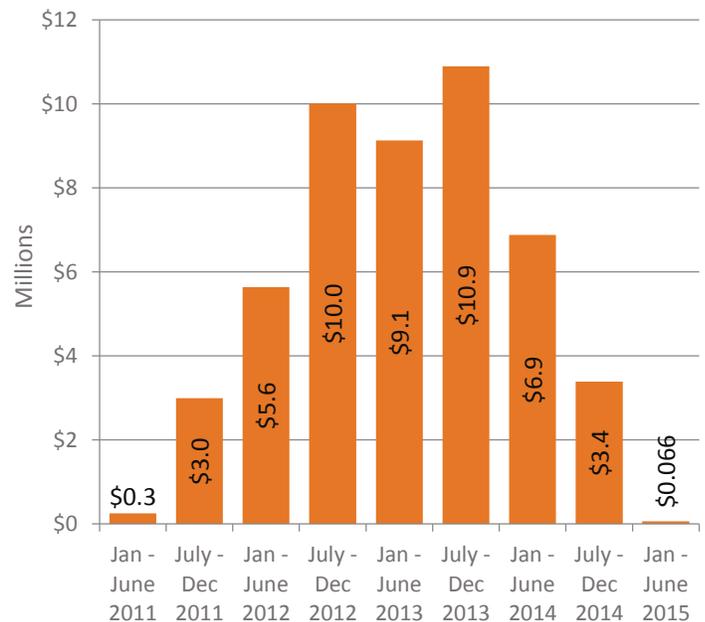
Supplemental appropriation

When TDI suspended enrollment in August 2012, staff began to develop a wind down plan in the event that new funding would not become available. To prevent employers from losing coverage in the middle of their plan year, TDI opted for staggered terminations to enable each groups' coverage to terminate at the end of their plan year. TDI allowed existing Healthy Texas employers to renew coverage for one final plan year through December 1, 2013.

Actuarial analysis estimated that TDI would need between \$5 million and \$6 million more than the amount available in the PSF to close out coverage. Though the 83rd Legislature did not renew funding for the continuation of Healthy Texas, it did use Senate Bill 1367 to designate some funds no longer needed by the Pool for premium assistance to cover additional PSF payments during close out. However, TDI did not obtain appropriation authority to spend the funds the Legislature designated.

During the 84th Legislative Session, TDI requested and received a supplemental appropriation totaling about \$5.2 million to cover the agency's obligation to reimburse the participating carriers' PSF-eligible claims incurred by Healthy Texas members. In October 2015, TDI distributed the final PSF payments for a total of \$49.2 million in PSF payments over the life of the program, shown in Figure 8.

Figure 8: Total PSF Payments



Evaluation

Throughout the course of Healthy Texas, TDI staff monitored enrollment and worked to meet the needs of enrollees, agents, and carriers. TDI continually evaluated the performance of participating carriers and responded to many inquiries from consumers and agents. Additionally, TDI enlisted partners to conduct independent evaluations of Healthy Texas. In 2012, TDI commissioned a marketing firm to conduct an online survey to measure overall employer and employee satisfaction with the program, assess ongoing employer interest, and uncover opportunities for improvement. In 2013, TDI also contracted with an auditing firm to conduct a performance audit of the Healthy Texas carriers.

Enrollee Satisfaction

During the period from April 2012 to June 2012, TDI commissioned a marketing firm to conduct an online survey of Healthy Texas participants. The marketing firm designed the survey to assess satisfaction among small business decision makers and individual employees about key components such as cost, communication, and coverage. Table 5 shows a summary of responses from employers and employees.

Key findings include

- Two-thirds of employers rated their overall experience with Healthy Texas as “very positive” and most of the remainder said their experiences were “somewhat positive.”
- More than eight in 10 employers had not offered health insurance as a benefit before enrolling in Healthy Texas.
- Affordability was the main reason employers cited for their initial and ongoing interest.

Table 5: Employee Satisfaction Survey Results

| Survey Question | Very Satisfied | Somewhat Satisfied | Neither | Somewhat Dissatisfied | Very Dissatisfied |
|--|----------------|--------------------|---------|-----------------------|-------------------|
| <i>Ease of Enrolling</i> | 74% | 19% | 6% | 0% | 1% |
| <i>Amount of Time for Day-to-Day Administration</i> | 73% | 21% | 5% | 0% | 1% |
| <i>Level of Employee Interest</i> | 65% | 24% | 10% | 0% | 0% |
| <i>Ease of Understanding Eligibility Criteria</i> | 59% | 31% | 5% | 5% | 0% |
| <i>Availability of Benefit Packages that Fit My Business</i> | 55% | 29% | 9% | 6% | 1% |
| <i>Quality of Doctors and Hospitals</i> | 72% | 21% | 6% | 0% | 1% |
| <i>Overall Satisfaction: Interaction with Agent</i> | 71% | 18% | 6% | 1% | 4% |
| <i>Overall Satisfaction: Carrier</i> | 60% | 30% | 4% | 3% | 3% |
| <i>Frequency of Communication with Representative</i> | 56% | 22% | 16% | 4% | 3% |
| <i>Availability of Support</i> | 55% | 24% | 14% | 4% | 3% |
| <i>Coverage and Benefits</i> | 43% | 40% | 9% | 4% | 5% |
| <i>Cost of Premiums for Employees</i> | 37% | 40% | 5% | 13% | 5% |
| <i>Cost of Premiums for Employers</i> | 35% | 39% | 9% | 14% | 3% |
| <i>Cost of Deductibles</i> | 35% | 35% | 11% | 14% | 4% |

Note: Due to rounding, some totals do not equal 100%

Healthy Texas Carrier Audit

The independent audit of Healthy Texas carriers covered the period from the beginning of Healthy Texas enrollment in November 2010 until December 2012. The auditors assessed each carrier's performance in four areas:

- Healthy Texas eligibility verification,
- premium rate reporting,
- claims and data systems, and
- PSF invoicing.

Overall, the audit determined that the carriers performed well and reported data accurately. The auditors found that carrier reporting of premium rates and claims data for PSF invoicing was complete and accurate. In a few cases, auditors identified potential issues in the eligibility verification process at the carrier level. In general, the audit of detailed claims data found carriers reported accurately.