Young Adults’ Attitudes and Perceptions on Health Insurance and their Health Insurance Literacy Levels

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Assessing Young Adults' Attitudes and Perceptions on Health Insurance and their Health Insurance Literacy Levels

By

Law Yang

A Thesis Submitted in Partial Fulfillment of the Requirements for the Degree of

Master of Science

In

Community Health Education

Minnesota State University, Mankato

Mankato, Minnesota

May, 2016
April 4, 2016

Young Adults’ Attitudes and Perceptions on Health Insurance and their Health Insurance Literacy Levels

Law Yang

This thesis has been examined and approved by the following members of the student’s committee.

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Judith K. Luebke

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Mark Windschitl

__________________________
Joseph Visker
Abstract

Young Adults’ Attitudes and Perceptions on Health Insurance and their Health Insurance Literacy Levels

Yang, Law., M.S. Community Health Education, Minnesota State University, Mankato, May 2016.

The purpose of this study was to determine health insurance literacy levels and assess attitudes and perceptions about health insurance among young adults aged 18 – 24 years. Data for this quantitative descriptive research was collected using the Health Insurance Literacy Measurement (HILM) tool in addition to 15 researcher developed survey items. The survey was distributed to 233 Minnesota State University, Mankato students. Overall findings of this research indicated that among sampled young adults, most of the participants had positive attitudes and perceptions towards health insurance, such viewing health insurance as something important to them and important to their health. Additionally, findings from the HILM tool indicated that participants lacked confidence when it came to choosing and using a health plan. However, findings also indicated that participants practiced behaviors that would enable them to choose and use the health plan that’s best for them.
Acknowledgements

Most importantly I’d like to acknowledge my committee chair who’s also been my academic advisor since I was an undergraduate student, Dr. Judith Luebke. They say that the mediocre teacher tells, the good teacher explains, the superior teacher demonstrates, but the great teachers inspire. You’ve definitely inspired me to surpass places I would’ve never dreamed of in my academic career. Thank You!

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Thank you to the American Institute for Research on giving me permission to use the HILM tool and to those who helped in making my data collection possible, thank you.

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Most importantly thank you to my wife, Amanda Vang. Your relentless support is what makes all of this possible and I am excited to see what opportunities await us.
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Chapter 1

Introduction

An important issue the Affordable Care Act (ACA), passed in 2010, aimed to address was to increase health insurance coverage among young adults (18-24 years of age). According to the 2013 U.S. Census Bureau report, approximately 13 percent (42 million) of the population had no health insurance (Smith & Medalia, 2014). Of those who are uninsured, young adults are the most likely to be uninsured (Cantiello, Fottler, Oetjen, & Zhang, 2015). The high rate of uninsured young adults is of importance because at that age they are considered to be in the prime of their health. Additionally, the lack of health insurance coverage can be attributed as a barrier to health care and may leave young adults vulnerable to high medical expenses (Federal Interagency Forum on Child and Family Statistics, 2014).

Statement of Problem

Historically, young adults have been among the most likely to not have health insurance in the United States (Parsons, H.M. et al., 2014). Among the U.S. population, young adults are the largest subgroup to not have health insurance (Cantiello, Fottler, Oetjen, Zhang, 2015). Additionally young adults are 30 percent less likely to be insured compared to the rest of the population (Cantiello, et al., 2015). In attempts to address this issue, an area of focus within the Affordable Care Act (ACA) is the importance of obtaining health insurance as adolescents are transitioning into young adulthood (Wong et al., 2015).
Health insurance literacy levels may contribute to the lack of health insurance coverage among young adults because of their inability to purchase and understand health insurance plans. In fact, 51 percent of adults in the US do not know basic health insurance terms such as “premium”, “deductible”, and “copay” (Cox, 2013). The high cost of health insurance may also discourage young adults from purchasing health insurance. In a recent health insurance survey, 50 percent of participants responded that their primary reason for not purchasing health insurance is because they cannot afford it (Cantiello et al., 2015).

**Significance of Problem**

In the 2014 demographic report on America’s young adults by the Federal Interagency Forum on Child and Family Statistics, there were approximately 31.2 million individuals’ ages 18-24 living in the United States, which accounts for approximately 13 percent of the entire adult population. Additionally, the young adult population was reported to be quite diverse compared to the population of individuals ages 25 and older (Federal Interagency Forum on Child and Family Statistics, 2014).

Health insurance coverage is strongly related to better health among children and adults. Having health insurance makes health care affordable and helps those who are insured to use health care services appropriately (Bernstein, Chollet, & Peterson, 2010). Compared to those who are insured, uninsured individuals receive much less preventative health care and/or care for acute or chronic conditions (Bernstein et al., 2010). In addition, even when uninsured people are aware that they have a chronic condition they are less than likely than those who are insured to have regular checkups for the chronic condition, resulting in more emergency department visits (Bernstein et al., 2010).
Furthermore young adults who are covered by health insurance are significantly more likely to report of having excellent health status compared to their counterparts who have no health insurance (Cardella & Depew, 2014). Importantly, uninsured people have a 10 percent to 25 percent increased risk of mortality compared to people who have health insurance (Price et al., 2010).

**Purpose Statement**

The purpose of this study was to determine health insurance literacy levels and assess attitudes and perceptions about health insurance among young adults.

**Theoretical Framework**

The Health Belief Model (HBM) has been one of the most commonly used theoretical frameworks in health education, specifically explaining health behavior in people (Glanz, Rimer, & Viswanath, 2015). The HBM was developed by social psychologists in the 1950s in the U.S. Public Health Service to help explain why people were not participating in free chest x-rays to detect and diagnose tuberculosis (Glanz, Rimer, & Viswanath, 2015).

The HBM consists of six primary constructs that help to determine or predict why people will take certain health related actions (Glanz, Rimer, & Viswanath, 2015). The six constructs of the HBM are *cues to action, perceived susceptibility, perceived severity, perceived benefits, perceived barriers, and self-efficacy* (Cottrell & McKenzie, 2011). The construct *cues to action* identifies strategies individuals can use to initiate a change in their health behavior (Cottrell & McKenzie, 2011). *Perceived susceptibility* assesses an individual’s belief of experiencing an adverse health condition such as an injury or disease (Cottrell & McKenzie, 2011). The third construct, *perceived severity* describes an
individual’s perception of the seriousness or impact of certain adverse health conditions (Cottrell & McKenzie, 2011). The next construct in the HBM, *perceived benefits*, assesses the benefits that an individual believes will occur if they change a health behavior (Cottrell & McKenzie, 2011). *Perceived barriers* describes the possible challenges to changing a health behavior (Glanz, Rimer, & Viswanath, 2015). The last construct of the HBM, *self-efficacy*, assesses an individual’s self-confidence to take action for health behavior change (Cottrell & McKenzie, 2011).

This research uses the constructs of *perceived susceptibility*, *perceived benefits*, and *perceived barriers* as a theoretical framework. *Perceived susceptibility* can be used to assess young adults’ perceived susceptibility of needing health care services. The construct, *perceived benefits* can help in assessing young adults’ perception of the benefits related to having or not having health insurance such as health status and financial security. *Perceived barriers* can also be used in helping to assess what young adults perceive as barriers to attaining health insurance such as cost and health insurance literacy.

**Research Questions**

1. Among sampled young adults, aged 18 – 24 years, what are their perceptions towards health insurance?
2. Among sampled young adults, aged 18 – 24 years, what are their attitudes about health insurance?
3. What is the health insurance literacy level among sampled young adults’ aged 18 – 24 years old?
Limitations

The following are limitations of this study:

1. Financial Resources
2. Subjects’ willingness to take the survey

Delimitations

The following are delimitations of this research:

1. Sample of college students aged 18 – 24 years old
2. Data collection was limited to a sample of students at Minnesota State University, Mankato (MSU).
3. Limited time and resources

Assumptions

The following are assumptions of this research:

1. Subjects will respond honestly to administered survey
2. Subjects will understand survey questions

Definition of Terms

Attitude – “A mental or neural state of readiness, organized through experience, exerting a directive or dynamic influence on the individual’s response to all objects and situations to which it is related” (Allport, 1987, p. 810)

Health Insurance Literacy – The degree to which individuals have the knowledge, ability, and confidence to find and evaluate information about health plans, select the best plan for their financial and health circumstances, and use the plan once enrolled (Health Insurance Literacy Roundtable, 2012, p. 2).
Individual Mandate – Tax penalty uninsured individuals are assessed mandated by the Affordable Healthcare Act (Healthcare.gov, n.d.).

Perception – The process by which organisms interpret and organize sensation to produce a meaningful experience of the world (Lindsay & Norman, 1977).

Young Invincible – Young adults, 19-24 years of age who consider themselves healthy and immune to many health problems so they decide not to purchase health insurance (Deloitte Center for Health Solutions, 2014).
Chapter II

Review of Literature

Introduction

The purpose of this study was to determine health insurance literacy level, assess attitudes about, and perceptions of health insurance among young adults. A literature review of previous research related to health insurance and health insurance literacy rates among young adults was conducted. Content addressed in the literature review includes a description and definition of Young Invincibles gathered from previous literature; young adults’ attitudes about health care and health insurance; cost of health insurance, health literacy, and health insurance literacy.

In conducting a thorough literature review on health insurance literacy levels, attitudes about, and perceptions of health insurance among young adults’, several databases within the Minnesota State University, Mankato (MNSU) Library Services were used. Literature databases that were specifically used for the literature review and this research included EBSCO, ProQuest, and Google Scholar. To search for literature within the listed databases the following keywords and phrases were used: health insurance literacy among young adults, health insurance literacy, young adults, health insurance literacy, and perception of health among young adults.
**Young Invincibles**

Young adults from the ages of 19-24 years of age are often termed as the “young invincibles” by the media (Deloitte Center for Health Solutions, 2014). Many young invincibles consider themselves healthy and immune to many health problems and because of this there is a common belief that it may be the reason why many young adults decide to not purchase health insurance (Deloitte Center for Health Solutions, 2014). However, in a research conducted by the Deloitte Center for Health Solutions, 90 percent of 500 participants aged 19 – 34 reported to be in good, very good or excellent health, and only 11 percent of uninsured young adults’ reported that they don’t have health insurance because they don’t need it (Deloitte Center for Health Solutions, 2014). This shows that only a small percentage of young adults report that they don’t have health insurance because they believe that they won’t need health insurance.

Although young invincibles perceive themselves to be in good health and choose not to purchase health insurance, many of them may be jeopardizing their health for the future. Many young adults already have single or multiple chronic illnesses, and more importantly, many are engaging in lifestyle behaviors that may affect their risk of disease in the future (Bibbins-Domingo & Burroughs, 2010). Importantly for young adults is that in the last three decades mortality resulting from cardiovascular disease have decreased in all age groups except for young adults and poorly controlled cardiovascular risk factors such as smoking and lack of exercise may contribute to this statistic (Bibbins-Domingo & Burroughs, 2010). Similarly, the current and increasing high rates of obesity among adolescents today brings even greater likelihood for future chronic diseases (Bibbins-Domingo & Burroughs, 2010).
Attitudes Towards Health Care And Health Insurance

Literature reviewed shows that positive attitudes and higher levels of confidence towards the U.S. health care system and health insurance system are generally associated with the older population (Dien, 2009). Dien (2009), found that young adults had the least confidence amongst any age group of receiving the best quality health services and had the least confidence in receiving affordable health services. Dien (2009) further identified this as a cause of concern because young adults generally have fewer financial resources to pay for the high cost of health care, often resulting in prolonged illness and/or not seeking health services when needed. Additionally, Bernstein (2009) suggested that the high rate of uninsured young adults may be attributed to true cost of health insurance rather than the young adults’ attitudes towards health insurance cost was the biggest determining factor in this age group.

Cost Of Health Insurance

As a whole, the young adult population is cost-sensitive. A major reason why so many young adults do not purchase health insurance is the rising cost of health insurance (Cantiello et al., 2015). In a health insurance survey conducted by Humana, 50 percent of the 1,463 participants responded that the primary reason for not buying health insurance is because they cannot afford it (Cantiello et al., 2015). Similarly in a study investigating college students’ perceptions of health insurance, almost 50 percent of 1,367 students perceived the cost of health insurance as too expensive (Price et al., 2010). When considering the cost of health insurance coverage it is important to weigh the benefits of cost versus protection. Similarly, of sampled young adults in the Deloitte research, 2014 who decided to not purchase health insurance, few responded that it was because of their
chances of getting sick, however many reported that it was the perception of cost versus
the expected benefits (Deloitte Center for Health Solutions, 2014). Interestingly, young
adults who remained uninsured were three times more likely than those who obtained
health insurance to have experienced technical difficulties during open enrollment
(Deloitte Center for Health Solutions, 2014). However, young adults who decided to
purchase health insurance stated that it would bring them peace of mind, reduce financial
risks, and avoid paying the ACA individual mandate (Deloitte Center for Health
Solutions, 2014).

While the Patient Protection and Affordable Care Act (ACA) of 2010 is designed
make health insurance more affordable for millions of people, the law will assess a tax
penalty called the individual mandate on people who choose to remain uninsured
(Cunningham & Bond, 2013). The individual mandate can influence young adults’
decisions regarding purchase of health insurance. Whether or not the individual mandate
will be an incentive for individuals to purchase health insurance will depend if the
penalty is sufficient enough. In 2014 the fine was $95, in 2015 it was $325, and in 2016 it
will increase to $675 (Cunningham & Bond, 2013).

Health Literacy

To help understand health insurance literacy levels in the US, a review of health
literacy levels may be helpful. Health literacy is the ability of an individual to obtain,
process, and understand basic health information and services in order to make
appropriate health choices (U.S. Department of Health & Human Services, 2008). It is
important to note that even individuals with strong literacy skills can still face health
literacy challenges. For example, only 12 percent of US adults have proficient health
literacy, and over a third of U.S. adults (77 million) have difficulty when completing common health tasks (America's Health Literacy: Why We Need Accessible Health Information, 2008).

Additionally, in a study performed by the U.S. Department of Education only 12 percent of adults were identified to be proficient in health literacy, 53 percent were intermediate, 22 percent were basic, and 14 percent had a below basic health literacy level (Parragh & Okrent, 2015). The low rate of health literacy levels among adults in the US could be related to low health insurance literacy levels in the US as well. In a 2013 research study conducted by the American Institute of CPAs, 51 percent of adults in the US did not understand basic health insurance terms such as a “premium”, “deductible”, and “copay” (Cox, 2013).

Health Insurance Literacy

As shown in the two open enrollment periods for the health insurance marketplace since the implementation of the ACA in 2014, it is more important now than ever to provide the information needed to motivate consumers and help them make appropriate decisions when selecting and purchasing health insurance (Stern, 2015). Health insurance literacy has become ever more important because of the ACA’s goal to increase health insurance coverage in the U.S. Analysis from the ACA’s first open enrollment in 2014 showed that health insurance policies, definitions, and concepts remained complex to the general public (Stern, 2015). Health insurance literacy is defined as “the knowledge, ability, and confidence to find and evaluate information about health plans, select the best plan for his or her family for their own or their family’s financial and health
circumstances, and use the plan once enrolled” (Health Insurance Literacy Expert Roundtable, 2012, p. 7).

Additionally, results from Enroll America’s 2015 post open enrollment period showed that 48 percent of the uninsured lacked confidence in choosing a plan for themselves in the future and 68 percent of the uninsured wanted more information about health insurance terms (Stern, 2015). In addition to low health literacy levels, other reasons, such as lack of information or misinformation, information overload, financial literacy, and time constraints can contribute to making poor decisions when choosing a health insurance plan (Kim, Braun, & Williams, 2013). However, regardless of their confidence in choosing a health insurance plan for themselves, consumers did value choosing a health insurance plan as important (Kim, Braun, & Williams, 2013).

**Summary**

Health insurance literacy is an important concern in the U.S., especially with the enactment of the ACA in 2010. As the baby boomer generation is getting older it’s important for the ACA to enroll more young adults in health insurance in order to keep the cost of health insurance down. However, to increase the health insurance coverage among young adults, factors such as young adults’ attitudes about and perceptions of health insurance, and health insurance literacy level must be addressed. As Stern, 2015 stated in her issue report with Enroll America:

“Generally speaking, people do not need to be health insurance experts to purchase and retain coverage.....they do need effective tools and resources at the
appropriate times to make informed decisions so that they can maintain their coverage over time” (para. 8).
Chapter III

Methodology

Introduction

This chapter describes the research design, participant selection process, instrumentation, data collection procedure, and data analysis method of this study. The purpose of this study is to determine health insurance literacy levels, assess attitudes about, and perceptions of health insurance among young adults.

Research Design

This study utilized quantitative non-experimental research methods, specifically survey instrumentation to collect data. A 36 question survey tool was developed using the 21 core questions from the Health Insurance Literacy Measurement (HILM) tool and 15 additional questions developed specifically for this research. The rationale for utilizing quantitative non-experimental research methods is because this research design is often used to measure knowledge, attitudes, beliefs, and behaviors of people (Cottrell & McKenzie, 2011). Within non-experimental research, the descriptive research method will be further used to identify current conditions and the “way things are” for the selected sample (Cottrell & McKenzie, 2011).

The technique used to collect descriptive data was survey research. The reason for using survey research is because, it is typically used to measure perceptions, attitudes, behaviors, or characteristics of a group of people (Cook & Cook, 2008). Additionally,
surveys are also useful in measuring the perceptions of a group, regardless of the accuracy of the perception (Cook & Cook, 2008). Therefore, survey research is appropriate for this study because it allows the researcher to assess health insurance literacy levels, the attitudes about, and perceptions of health insurance among young adults.

**Participant Selection**

Prior to data collection, approval for research involving human subjects was obtained from the Minnesota State University, Mankato, MN Institutional Review Board (IRB) Approval (See Appendix A). Subjects eligibility criteria for the participation was age 18 - 24 years. This criteria was chosen because young adults are considered to be between the ages of 18-24 years (Deloitte Center for Health Solutions, 2014).

Convenience sampling was used to recruit participants at Minnesota State University, Mankato. Class instructors were emailed for permission to collect data on their students. Classes selected ranged from lower to upper level courses in psychology, anthropology, art, and health science at Minnesota State University, Mankato. Of the recruitment emails sent to instructors, five instructors replied giving permission to collect in their classes. Data collection was conducted in two biostatistics classes, one sociology class, three health and the environment classes, and two first aid and CPR class.

**Instrumentation**

To assess the health insurance literacy levels among young adults, the Health Insurance Literacy Measure (HILM) (see Appendix B) self-assessment tool was used. The HILM tool is a self-assessment measure of consumers’ ability to select and use private health insurance (Paez et al., 2014). The HILM was developed by the Health
Insurance Literacy Measure Project Team. Survey questions were developed by using the conceptual model as a guide, then tested in two rounds of cognitive interviews (Paez et al., 2014, p 225-239). After a field test of with 832 participants, exploratory factor analysis was used, revealing two HILM scales, choosing health insurance and using health insurance (Paez et al., 2014, p 225-239). The two scales were then divided into a confidence subscale and likelihood of behaviors subscale (Paez et al., 2014, p 225-239). Development of the HILM tool showed “correlations between the HILM scales and an objective measures of health insurance knowledge and skills were positive and statistically significant which supports the validity of the measure” (Paez et al., 2014, p 225-239). To measure validity of the HILM tool, two sets of analyses were performed using the objective measure of knowledge and skills as the standard (Paez et al., 2014, p 225-239). Additionally, the HILM tool was found to have a high internal consistency with all Cronbach’s alpha coefficients to be greater than 0.9 during development (Paez et al., 2014, p 225-239). Permission (see Appendix C) to use the HILM tool was granted from the American Institute for Research (AIR). Upon permission to use the HILM tool, AIR request that the researcher use proper citation to credit them for the research.

In addition to using the HILM tool to assess health insurance literacy among young adults, 15 additional survey questions were developed and used to assess attitudes and perceptions of health insurance among young adults (See Appendix D). However, due to time limitations the 15 developed items were not piloted test, therefore their consistency and validity are unknown.
Data Collection Procedures

The data collection process received approval by the MSU IRB on March 3, 2016. Data collection process took place from March 14, 2016 – March 18, 2016. All data collection was performed in MSU, Mankato classes once permission from the class instructor was granted and limited to currently enrolled students aged 18-24 years. The data collection survey was administered by the researcher in person. Before surveys were distributed to participants, consent was obtained through a written consent form that was orally read to the participants by the researcher (See Appendix E). Participants were also notified through the consent form that if they wished to participate in the data collection, their identity will be confidential, and collected data will only be used for this thesis research. Once surveys were distributed the researcher waited outside the classroom until all participants finished their surveys. To further protect the confidentiality of participants, collected and analyzed data will be placed in a locked filing cabinet for safe keeping in the Health Science Department at MSU, Mankato.

Participants were asked to take a 9-10 minute survey consisting of 36 questions. Of the 36 questions on the survey, 21 were retrieved from the HILM tool, with permission from the American Institute for Research (AIR) and an additional 15 questions were developed by the researcher. The 21 questions retrieved from the HILM tool was used to measure health insurance literacy levels, while 15 of the questions developed by the researcher was used to assess attitudes and perceptions towards health insurance among young adults.
Data processing and analysis

Collected survey data was analyzed using the Statistical Package for the Social Sciences (SPSS) software where a descriptive statistics analyses was used to assess individual survey items. Analyzed data from each item was then used to identify common themes among collected data.
Chapter IV

Findings

Introduction

The purpose of this study was to determine health insurance literacy levels and assess attitudes and perceptions about health insurance among young adults. Data were collected March 14, 2016 through March 18, 2016 at MSU, M. A total of 250 survey were distributed to six different classroom within the MSU, M campus. Of the 250 surveys distributed 236 were completed including three surveys not included in analysis due to incompletion or the respondents’ age range eligibility requirements. The final sample size was 233.

Description of Sample

The non-probability sample for this research consisted of 233 students enrolled for the spring 2016 semester at Minnesota State University, Mankato. Of the 233 participants 29.1 percent \( (n=6) \) were 19 and 24.2 percent \( (n=54) \) were 20 years old, (see Table 4.1).

<table>
<thead>
<tr>
<th>Age Of Participants</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>18 yrs.</td>
<td>30</td>
<td>13.5</td>
</tr>
<tr>
<td>19 yrs.</td>
<td>65</td>
<td>29.1</td>
</tr>
<tr>
<td>20 yrs.</td>
<td>54</td>
<td>24.2</td>
</tr>
<tr>
<td>21 yrs.</td>
<td>29</td>
<td>13</td>
</tr>
<tr>
<td>22 yrs.</td>
<td>29</td>
<td>13</td>
</tr>
<tr>
<td>23 yrs.</td>
<td>8</td>
<td>3.6</td>
</tr>
<tr>
<td>24 yrs.</td>
<td>8</td>
<td>3.6</td>
</tr>
<tr>
<td>Total</td>
<td>223</td>
<td>100.0</td>
</tr>
</tbody>
</table>
Additionally, 33.6 percent \((n=75)\) of participants reported to be in their freshman year of college, 30.9 percent \((n=69)\) were sophomores, 22 percent \((n=49)\) were juniors, and 13.5 percent \((n=30)\) were seniors (see table 4.2).

<table>
<thead>
<tr>
<th>Year in School</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Freshman</td>
<td>75</td>
<td>33.6</td>
</tr>
<tr>
<td>Sophomore</td>
<td>69</td>
<td>30.9</td>
</tr>
<tr>
<td>Junior</td>
<td>46</td>
<td>22</td>
</tr>
<tr>
<td>Senior</td>
<td>30</td>
<td>13.5</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>223</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

The primary language of the majority, of the participants 91 percent \((n=213)\) was English (see table 4.3).

<table>
<thead>
<tr>
<th>Primary Language</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>English</td>
<td>203</td>
<td>91</td>
</tr>
<tr>
<td>Other</td>
<td>20</td>
<td>9</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>223</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>
95.5 (n=213) percent of participants reported that they have health insurance, 2.7 percent (n=6) had no health insurance, and 1.8 percent (n=4) did not know if they had health insurance (see table 4.4).

Table 4.4

<table>
<thead>
<tr>
<th>Health Insurance Coverage</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>213</td>
<td>95.5</td>
</tr>
<tr>
<td>No</td>
<td>6</td>
<td>2.7</td>
</tr>
<tr>
<td>Don’t Know</td>
<td>4</td>
<td>1.8</td>
</tr>
<tr>
<td>Total</td>
<td>223</td>
<td>100</td>
</tr>
</tbody>
</table>

Of those who reported to have no health insurance 1.3 percent (n=3) said because it was too expensive and 1.3 percent (n=3) said they had no health insurance because of other reasons (see table 4.5).

Table 4.5

<table>
<thead>
<tr>
<th>Reason for No Coverage</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Too Expensive</td>
<td>3</td>
<td>50</td>
</tr>
<tr>
<td>Other</td>
<td>3</td>
<td>50</td>
</tr>
<tr>
<td>Total</td>
<td>6</td>
<td>100</td>
</tr>
</tbody>
</table>
Research Question 1: Among sampled young adults, ages 18 – 24 years, what are their perceptions towards health insurance?

To assess perceptions towards health insurance among sampled young adults, five survey questions were developed. When asked if health insurance is important for their health, 86.6 percent (n=193) of participants agreed or strongly agreed that health insurance is important to their health (see table 4.6).

<table>
<thead>
<tr>
<th>Importance to Health</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Disagree</td>
<td>4</td>
<td>1.8</td>
</tr>
<tr>
<td>Disagree</td>
<td>3</td>
<td>1.3</td>
</tr>
<tr>
<td>Neutral</td>
<td>23</td>
<td>10.3</td>
</tr>
<tr>
<td>Agree</td>
<td>92</td>
<td>41.3</td>
</tr>
<tr>
<td>Strongly Agree</td>
<td>101</td>
<td>45.3</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>223</td>
<td>100</td>
</tr>
</tbody>
</table>

However, when asked if health insurance is hard to obtain, 47.5 percent (n=106) responded neutral, 31.4 percent (n=70) disagreed, and 14.8 percent (n=33) responded that they agreed (see table 4.7).

<table>
<thead>
<tr>
<th>Difficult to Obtain</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Disagree</td>
<td>11</td>
<td>4.9</td>
</tr>
<tr>
<td>Disagree</td>
<td>70</td>
<td>31.4</td>
</tr>
<tr>
<td>Neutral</td>
<td>106</td>
<td>47.5</td>
</tr>
<tr>
<td>Agree</td>
<td>33</td>
<td>14.8</td>
</tr>
<tr>
<td>Strongly Agree</td>
<td>3</td>
<td>1.3</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>223</td>
<td>100</td>
</tr>
</tbody>
</table>
When asked if health insurance is important to their financial security, 46.6 percent \((n=104)\) were neutral and 48 percent \((n=107)\) agreed or strongly agreed that health insurance was important to their financial security (see table 4.8).

<table>
<thead>
<tr>
<th>Table 4.8</th>
<th>Financial Security</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frequency</td>
<td>Percent</td>
</tr>
<tr>
<td>Strongly Disagree</td>
<td>1</td>
</tr>
<tr>
<td>Disagree</td>
<td>11</td>
</tr>
<tr>
<td>Neutral</td>
<td>104</td>
</tr>
<tr>
<td>Agree</td>
<td>85</td>
</tr>
<tr>
<td>Strongly Agree</td>
<td>22</td>
</tr>
<tr>
<td>Total</td>
<td>223</td>
</tr>
</tbody>
</table>

Similarly, on the survey question about affordability of health insurance, 40.8 percent \((n=91)\) were neutral, 20.1 percent \((n=45)\) either disagreed or strongly disagreed, and 39 percent \((n=87)\) agreed or strongly agreed (see table 4.9).

<table>
<thead>
<tr>
<th>Table 4.9</th>
<th>I Can Afford Health Insurance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frequency</td>
<td>Percent</td>
</tr>
<tr>
<td>Strongly Disagree</td>
<td>5</td>
</tr>
<tr>
<td>Disagree</td>
<td>40</td>
</tr>
<tr>
<td>Neutral</td>
<td>91</td>
</tr>
<tr>
<td>Agree</td>
<td>73</td>
</tr>
<tr>
<td>Strongly Agree</td>
<td>14</td>
</tr>
<tr>
<td>Total</td>
<td>223</td>
</tr>
</tbody>
</table>
Lastly, when asked if health insurance plans are hard to understand, 40.4 percent (n=90) were neutral and 44.8 percent (n=105) agreed or strongly agreed (see table 4.10).

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Disagree</td>
<td>3</td>
<td>1.3</td>
</tr>
<tr>
<td>Disagree</td>
<td>30</td>
<td>13.5</td>
</tr>
<tr>
<td>Neutral</td>
<td>90</td>
<td>40.4</td>
</tr>
<tr>
<td>Agree</td>
<td>85</td>
<td>38.1</td>
</tr>
<tr>
<td>Strongly Agree</td>
<td>15</td>
<td>6.7</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>223</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>
Research Question 2: Among sampled young adults, ages 18 – 24 years, what are their attitudes on health insurance?

Five questions were also developed to assess attitudes towards health insurance among sampled young adults. When asked if health insurance is something they need, 92 percent \((n=205)\) agreed or strongly agreed and similarly when asked if health insurance is important to them 87 percent \((n=194)\) agreed or strongly agreed (see Table 4.11 & 4.12).

<table>
<thead>
<tr>
<th>Health Insurance is Something I Need</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Disagree</td>
<td>4</td>
<td>1.8</td>
</tr>
<tr>
<td>Disagree</td>
<td>2</td>
<td>0.9</td>
</tr>
<tr>
<td>Neutral</td>
<td>12</td>
<td>5.4</td>
</tr>
<tr>
<td>Agree</td>
<td>84</td>
<td>37.7</td>
</tr>
<tr>
<td>Strongly Agree</td>
<td>121</td>
<td>54.3</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>223</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Health Insurance Is Important To Me</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Disagree</td>
<td>4</td>
<td>1.8</td>
</tr>
<tr>
<td>Disagree</td>
<td>1</td>
<td>0.4</td>
</tr>
<tr>
<td>Neutral</td>
<td>24</td>
<td>10.8</td>
</tr>
<tr>
<td>Agree</td>
<td>91</td>
<td>40.8</td>
</tr>
<tr>
<td>Strongly Agree</td>
<td>103</td>
<td>46.2</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>223</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>
When participants were asked if they were healthy, so they don’t need health insurance, 79.8 percent disagreed or strongly disagreed (see table 4.13).

Table 4.13
*I Am Healthy Enough, I Don't Need Health Insurance*

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Disagree</td>
<td>64</td>
<td>28.7</td>
</tr>
<tr>
<td>Disagree</td>
<td>114</td>
<td>351.1</td>
</tr>
<tr>
<td>Neutral</td>
<td>37</td>
<td>16.6</td>
</tr>
<tr>
<td>Agree</td>
<td>8</td>
<td>3.6</td>
</tr>
<tr>
<td>Strongly Agree</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>223</td>
<td>100</td>
</tr>
</tbody>
</table>

Additionally, when asked if health insurance is worth the money it costs, 23.8 percent (*n*=53) of participants were neutral and 68.2 percent (*n*=152) of participants disagreed or strongly disagreed (see table 4.14).

Table 4.14
*Health Insurance Is Not Worth The Money*

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Disagree</td>
<td>43</td>
<td>19.3</td>
</tr>
<tr>
<td>Disagree</td>
<td>109</td>
<td>48.9</td>
</tr>
<tr>
<td>Neutral</td>
<td>53</td>
<td>23.8</td>
</tr>
<tr>
<td>Agree</td>
<td>13</td>
<td>5.8</td>
</tr>
<tr>
<td>Strongly Agree</td>
<td>5</td>
<td>2.2</td>
</tr>
<tr>
<td>Total</td>
<td>223</td>
<td>100</td>
</tr>
</tbody>
</table>
Lastly, when participants were asked if they knew how to purchase health insurance, 20.6 percent (n=46) were neutral and 57.9 percent (n=129) disagreed or strongly disagreed (see table 4.15).

Table 4.15

<table>
<thead>
<tr>
<th>I Know How To Purchase Health Insurance</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Disagree</td>
<td>31</td>
<td>13.5</td>
</tr>
<tr>
<td>Disagree</td>
<td>99</td>
<td>44.4</td>
</tr>
<tr>
<td>Neutral</td>
<td>46</td>
<td>20.6</td>
</tr>
<tr>
<td>Agree</td>
<td>42</td>
<td>18.8</td>
</tr>
<tr>
<td>Strongly Agree</td>
<td>6</td>
<td>2.7</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>223</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>
Research Question 3: What is the health insurance literacy level among sampled young adults’ ages 18 – 24 years old?

To assess the health insurance literacy level among sampled young adults, the Health Insurance Literacy Measurement (HILM) tool was used. The HILM tool was developed by the American Institute for Research (AIR) and composes of 21 core questions which is divided into four categories; 1) Confidence: choosing a health plan, 2) Behavior: choosing a health plan, 3) Confidence: using a health plan, and 4) Using a health plan.

The first category of the HILM tool, Confidence: Choosing a Health Plan, consists of six questions. When asked about their ability to understand health insurance terms, 56 percent \((n=125)\) of participants were not at all confident or slightly confident and 32.3 percent \((n=72)\) of participants were moderately confident (see table 4.16).

<table>
<thead>
<tr>
<th>Understanding Health Insurance Terms</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not at all confident</td>
<td>38</td>
<td>17</td>
</tr>
<tr>
<td>Slightly confident</td>
<td>87</td>
<td>39</td>
</tr>
<tr>
<td>Moderately confident</td>
<td>72</td>
<td>32.3</td>
</tr>
<tr>
<td>Very confident</td>
<td>11</td>
<td>4.9</td>
</tr>
<tr>
<td>Don't Know</td>
<td>15</td>
<td>6.7</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>223</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>
For the second question which asked if participants knew where to find the information needed to choose a health plan if insurance was not offered through an employer, 53.4 percent \((n=119)\) of participants were not at all confident (see table 4.17).

<table>
<thead>
<tr>
<th>Know Where To Find Information Needed If Not Offered Through Employer</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not at all confident</td>
<td>55</td>
<td>24.7</td>
</tr>
<tr>
<td>Slightly confident</td>
<td>64</td>
<td>28.7</td>
</tr>
<tr>
<td>Moderately confident</td>
<td>65</td>
<td>29.1</td>
</tr>
<tr>
<td>Very confident</td>
<td>24</td>
<td>10.8</td>
</tr>
<tr>
<td>Don't Know</td>
<td>15</td>
<td>6.7</td>
</tr>
<tr>
<td>Total</td>
<td>223</td>
<td>100</td>
</tr>
</tbody>
</table>

When participants were asked if they knew how to estimate that they would have to pay for their health care needs in the next year, 63.3 percent \((n=141)\) were not at all confident or slightly confident (see table 4.18).

<table>
<thead>
<tr>
<th>Know How To Estimate Your Health Care Needs In The Next Year</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not at all confident</td>
<td>82</td>
<td>36.8</td>
</tr>
<tr>
<td>Slightly confident</td>
<td>59</td>
<td>26.5</td>
</tr>
<tr>
<td>Moderately confident</td>
<td>54</td>
<td>24.2</td>
</tr>
<tr>
<td>Very confident</td>
<td>13</td>
<td>5.8</td>
</tr>
<tr>
<td>Don't Know</td>
<td>15</td>
<td>6.7</td>
</tr>
<tr>
<td>Total</td>
<td>223</td>
<td>100</td>
</tr>
</tbody>
</table>
Additionally, when participants were asked if they knew where to go for help if they were having trouble affording health insurance outside an employer, 60.1 percent \((n=134)\) were not at all confident or slightly confident (see table 4.19), and 63.7 percent of participants also reported that they were not at all confident or slightly confident in knowing what questions to ask to choose the best health plan for them (see table 4.20).

<table>
<thead>
<tr>
<th>Table 4.19</th>
<th>Know Where To Go For Help If Having Trouble Affording Health Insurance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Frequency</td>
</tr>
<tr>
<td>Not at all confident</td>
<td>74</td>
</tr>
<tr>
<td>Slightly confident</td>
<td>60</td>
</tr>
<tr>
<td>Moderately confident</td>
<td>56</td>
</tr>
<tr>
<td>Very confident</td>
<td>20</td>
</tr>
<tr>
<td>Don't Know</td>
<td>13</td>
</tr>
<tr>
<td>Total</td>
<td>223</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Table 4.20</th>
<th>Know What Questions To Ask To Choose The Best Plan For You</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Frequency</td>
</tr>
<tr>
<td>Not at all confident</td>
<td>58</td>
</tr>
<tr>
<td>Slightly confident</td>
<td>74</td>
</tr>
<tr>
<td>Moderately confident</td>
<td>53</td>
</tr>
<tr>
<td>Very confident</td>
<td>14</td>
</tr>
<tr>
<td>Don't Know</td>
<td>14</td>
</tr>
<tr>
<td>Total</td>
<td>223</td>
</tr>
</tbody>
</table>
Lastly, when participants were asked if they would be able to choose the best health plan for themselves, 34.9 percent \( (n=142) \) were not at all confident or slightly confident and 60.1 percent \( (n=134) \) were moderately confident or very confident (see table 4.21).

**Table 4.21**

*You Would Choose The Health Plan Best For You*

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not at all confident</td>
<td>25</td>
</tr>
<tr>
<td>Slightly confident</td>
<td>51</td>
</tr>
<tr>
<td>Moderately confident</td>
<td>74</td>
</tr>
<tr>
<td>Very confident</td>
<td>60</td>
</tr>
<tr>
<td>Don't Know</td>
<td>13</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>223</strong></td>
</tr>
</tbody>
</table>

The second category of questions in the HILM tool, Behavior: Choosing a Health Plan assessed the participants’ behavior when choosing a health plan and consisted of seven questions. The first question asked participants how likely they were to understand how plans differ, with 53.3 percent \( (n=109) \) of participants responding not at all likely or somewhat likely (see table 4.22).

**Table 4.22**

*How Likely Are You To Understand How Plans Differ*

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not At All Likely</td>
<td>21</td>
</tr>
<tr>
<td>Somewhat Likely</td>
<td>98</td>
</tr>
<tr>
<td>Moderately Likely</td>
<td>79</td>
</tr>
<tr>
<td>Very likely</td>
<td>20</td>
</tr>
<tr>
<td>Don't Know</td>
<td>5</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>223</strong></td>
</tr>
</tbody>
</table>
The next question in this group asked participants how likely they were to find out if they have to meet a deductible for health care services. Findings showed that 48.7 percent ($n=109$) of participants were not at all likely or somewhat likely to find out if they have to meet a deductible for health care services (see table 4.23).

<table>
<thead>
<tr>
<th>Table 4.23</th>
<th>How Likely Are You To Find If You Have A Deductible</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frequency</td>
<td>Percent</td>
</tr>
<tr>
<td>Not At All Likely</td>
<td>35</td>
</tr>
<tr>
<td>Somewhat Likely</td>
<td>74</td>
</tr>
<tr>
<td>Moderately Likely</td>
<td>69</td>
</tr>
<tr>
<td>Very likely</td>
<td>28</td>
</tr>
<tr>
<td>Don't Know</td>
<td>17</td>
</tr>
<tr>
<td>Total</td>
<td>223</td>
</tr>
</tbody>
</table>

When participants were asked how likely they were to identify which doctors and hospitals are covered in each plan, 62.8 percent ($n=140$) of participants responded moderately likely to very likely (see table 4.24).

<table>
<thead>
<tr>
<th>Table 4.24</th>
<th>How Likely Are You To See Which Doctors and Hospitals Are Covered</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frequency</td>
<td>Percent</td>
</tr>
<tr>
<td>Not At All Likely</td>
<td>20</td>
</tr>
<tr>
<td>Somewhat Likely</td>
<td>56</td>
</tr>
<tr>
<td>Moderately Likely</td>
<td>68</td>
</tr>
<tr>
<td>Very likely</td>
<td>72</td>
</tr>
<tr>
<td>Don't Know</td>
<td>7</td>
</tr>
<tr>
<td>Total</td>
<td>223</td>
</tr>
</tbody>
</table>
When asked how likely they are to understand the cost of prescription drugs, 69.1 percent \((n=154)\) of participants responded moderately likely or very likely (see table 4.25).

Table 4.25

<table>
<thead>
<tr>
<th>Understand What You Have To Pay For Prescription Drugs</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not At All Likely</td>
<td>18</td>
<td>8.1</td>
</tr>
<tr>
<td>Somewhat Likely</td>
<td>45</td>
<td>20.2</td>
</tr>
<tr>
<td>Moderately Likely</td>
<td>78</td>
<td>35</td>
</tr>
<tr>
<td>Very likely</td>
<td>76</td>
<td>34.1</td>
</tr>
<tr>
<td>Don't Know</td>
<td>6</td>
<td>2.7</td>
</tr>
<tr>
<td>Total</td>
<td>223</td>
<td>100</td>
</tr>
</tbody>
</table>

Similarly, when participants were asked how likely they were to understand the cost for an emergency visit, 40 percent \((n=89)\) responded not at all likely or somewhat likely and 55.6 percent \((n=124)\) responded moderately likely or very likely (see table 4.26).

Table 4.26

<table>
<thead>
<tr>
<th>Understand What You Have To Pay For Emergency Room Visits</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not At All Likely</td>
<td>18</td>
<td>8.1</td>
</tr>
<tr>
<td>Somewhat Likely</td>
<td>45</td>
<td>20.2</td>
</tr>
<tr>
<td>Moderately Likely</td>
<td>78</td>
<td>35</td>
</tr>
<tr>
<td>Very likely</td>
<td>76</td>
<td>34.1</td>
</tr>
<tr>
<td>Don't Know</td>
<td>6</td>
<td>2.7</td>
</tr>
<tr>
<td>Total</td>
<td>223</td>
<td>100</td>
</tr>
</tbody>
</table>
When asked how likely you are to understand what you would have to pay for a specialist visit 45.3 percent \( (n=101) \) of participants responded not at all likely or somewhat likely and 51.6 percent \( (n=115) \) responded moderately likely or very likely (see table 4.27).

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not At All Likely</td>
<td>33</td>
</tr>
<tr>
<td>Somewhat Likely</td>
<td>68</td>
</tr>
<tr>
<td>Moderately Likely</td>
<td>64</td>
</tr>
<tr>
<td>Very Likely</td>
<td>51</td>
</tr>
<tr>
<td>Don't Know</td>
<td>7</td>
</tr>
<tr>
<td>Total</td>
<td>223</td>
</tr>
</tbody>
</table>

Lastly, when asked how likely they were to identify coverage of unexpected medical costs, 43 percent \( (n=96) \) of participants responded not at all likely or somewhat likely and 53.3 percent \( (n=119) \) responded moderately likely or very likely (see table 4.28).

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not At All Likely</td>
<td>27</td>
</tr>
<tr>
<td>Somewhat Likely</td>
<td>69</td>
</tr>
<tr>
<td>Moderately Likely</td>
<td>71</td>
</tr>
<tr>
<td>Very Likely</td>
<td>48</td>
</tr>
<tr>
<td>Don't Know</td>
<td>8</td>
</tr>
<tr>
<td>Total</td>
<td>223</td>
</tr>
</tbody>
</table>

The third category in the HILM tool, Confidence: Using a Health Plan, was designed to assess participants’ confidence in using a health plan and consisted of four questions. The first question asked participants how confident they were in determining
what is and is not covered before receiving health care services, 56.9 percent \((n=127)\) responded that they were not at all confident or slightly confident (see table 4.29).

Table 4.29

<table>
<thead>
<tr>
<th>Able To Find What Is And Is Not Covered Before Receiving Health Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frequency</td>
</tr>
<tr>
<td>----------</td>
</tr>
<tr>
<td>Not at all confident</td>
</tr>
<tr>
<td>Slightly confident</td>
</tr>
<tr>
<td>Moderately confident</td>
</tr>
<tr>
<td>Very confident</td>
</tr>
<tr>
<td>Don't Know</td>
</tr>
<tr>
<td>Total</td>
</tr>
</tbody>
</table>

When participants were asked if they know how to figure out their share of the cost for care, 58.3 percent \((n=130)\) responded not all confident or slightly confident (see table 4.30).

Table 4.30

<table>
<thead>
<tr>
<th>Understand Your Share Of The Cost For Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frequency</td>
</tr>
<tr>
<td>------------</td>
</tr>
<tr>
<td>Not at all confident</td>
</tr>
<tr>
<td>Slightly confident</td>
</tr>
<tr>
<td>Moderately confident</td>
</tr>
<tr>
<td>Very confident</td>
</tr>
<tr>
<td>Don't Know</td>
</tr>
<tr>
<td>Total</td>
</tr>
</tbody>
</table>
When asked if they knew what question to ask about their health plan if they have a coverage problem, 59.2 percent \((n=132)\) of participants responded not at all likely or slightly likely (see table 4.31).

<table>
<thead>
<tr>
<th>Table 4.31</th>
<th>Know What Questions To Ask Your Health Plan If You Have A Problem</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Frequency</td>
</tr>
<tr>
<td>Not at all confident</td>
<td>50</td>
</tr>
<tr>
<td>Slightly confident</td>
<td>82</td>
</tr>
<tr>
<td>Moderately confident</td>
<td>50</td>
</tr>
<tr>
<td>Very confident</td>
<td>29</td>
</tr>
<tr>
<td>Don't Know</td>
<td>12</td>
</tr>
<tr>
<td>Total</td>
<td>223</td>
</tr>
</tbody>
</table>

In addition, 68 percent \((n=152)\) of participants responded not at all confident or slightly confident when asked if they know what to do if their health plan refuses to pay for a service they thought should be covered (see table 4.32).

<table>
<thead>
<tr>
<th>Table 4.32</th>
<th>Know What Questions To Ask Your Health Plan If You Have A Problem</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Frequency</td>
</tr>
<tr>
<td>Not at all confident</td>
<td>50</td>
</tr>
<tr>
<td>Slightly confident</td>
<td>82</td>
</tr>
<tr>
<td>Moderately confident</td>
<td>50</td>
</tr>
<tr>
<td>Very confident</td>
<td>29</td>
</tr>
<tr>
<td>Don't Know</td>
<td>12</td>
</tr>
<tr>
<td>Total</td>
<td>223</td>
</tr>
</tbody>
</table>

Group four of the HILM tool: Using a Health Plan, consisted of four questions that aimed to assess how likely participants would use their health insurance in a variety of ways. When asked how likely they are to look into what their health plan will and will not cover before getting health care services, 62.7 percent \((n=140)\) of participants responded that they would be moderately likely or very likely to do so (see table 4.33).
Table 4.33  
*Look Into What Your Plan Will Cover Before A Health Service*

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not at all confident</td>
<td>20</td>
<td>9</td>
</tr>
<tr>
<td>Slightly confident</td>
<td>24</td>
<td>26.5</td>
</tr>
<tr>
<td>Moderately confident</td>
<td>65</td>
<td>29.1</td>
</tr>
<tr>
<td>Very confident</td>
<td>75</td>
<td>33.6</td>
</tr>
<tr>
<td>Don't Know</td>
<td>4</td>
<td>1.8</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>223</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

When participants were asked how likely they are to look to member services to tell them what medical services their health plan covers, 61.9 percent (*n=132*) responded moderately likely or very likely (see table 4.34).

Table 4.34  
*Look To Member Services To Tell You What Medical Services Are Covered*

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not at all confident</td>
<td>24</td>
<td>10.8</td>
</tr>
<tr>
<td>Slightly confident</td>
<td>57</td>
<td>25.6</td>
</tr>
<tr>
<td>Moderately confident</td>
<td>86</td>
<td>38.6</td>
</tr>
<tr>
<td>Very confident</td>
<td>52</td>
<td>23.3</td>
</tr>
<tr>
<td>Don't Know</td>
<td>4</td>
<td>1.8</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>223</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Additionally, when asked how likely they were to find out if a doctor was in network before scheduling an appointment, 46.2 percent (*n=103*) of participants responded not at all likely or somewhat likely and 49.8 percent (*n=111*) of participants responded moderately likely or very likely (see table 4.35).
Table 4.35
*Find Out A Doctor Is In-Network Before Seeing*

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not at all confident</td>
<td>39</td>
<td>17.5</td>
</tr>
<tr>
<td>Slightly confident</td>
<td>64</td>
<td>28.7</td>
</tr>
<tr>
<td>Moderately confident</td>
<td>58</td>
<td>26</td>
</tr>
<tr>
<td>Very confident</td>
<td>53</td>
<td>23.8</td>
</tr>
<tr>
<td>Don't Know</td>
<td>9</td>
<td>4</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>223</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Lastly, when asked how likely they are to review their health plan statement, 65.2 percent \((n=152)\) of participants responded not at all likely or somewhat likely to do so (see table 4.36).

Table 4.36
*Review Statements You Get From Your Health Plan*

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not at all confident</td>
<td>24</td>
<td>10.8</td>
</tr>
<tr>
<td>Slightly confident</td>
<td>63</td>
<td>28.3</td>
</tr>
<tr>
<td>Moderately confident</td>
<td>61</td>
<td>27.4</td>
</tr>
<tr>
<td>Very confident</td>
<td>70</td>
<td>31.4</td>
</tr>
<tr>
<td>Don't Know</td>
<td>5</td>
<td>2.2</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>223</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

**Summary of Findings**

The purpose of this study was to determine health insurance literacy levels and assess attitudes and perceptions about health insurance among young adults. The data collection process of the study involved the distribution of a 36 question survey. The final sample size was 223. Collected data from participants’ was then processed in SPSS and each question was analyzed into a frequency data set.
Chapter V

Summary, Conclusions, Recommendations

Health insurance literacy is one of many vital skills needed for obtaining optimal health. This is why it’s more important than ever for young adults to have health insurance while they are in the prime of their health. Most importantly, health insurance has been found to be strongly related to have better health among children and adults. By having health insurance, health care services can become affordable and also help those who are uninsured to use health care services (Bernstein, Chollet, & Peterson, 2010). Based upon data collected and analyzed in this research, a summary and conclusions, recommendations for future research, and recommendations for the health education practice are presented in this chapter.

Perception towards Health Insurance

A purpose of this study was to determine perceptions about health insurance among sampled young adults. Results from the collected data showed that 86.6 percent of participants agreed or strongly agreed that health insurance is important to their health. Additionally, about 47.5 percent of participants responded that they were neutral that health insurance is difficult to obtain. Similarly, 44.8 percent agreed or strongly agreed that health insurance plans are hard to understand.
Attitude towards Health Insurance

Another purpose of this study was to determine attitudes about health insurance among sampled young adults. Analyzed data from participant responses show that 92 percent of participants agreed or strongly agreed that health insurance was something they needed and 87 percent agreed or strongly agreed that health insurance is important to them. Additionally, 79.8 percent of participants disagreed or strongly disagreed that they were healthy enough to not need health insurance. Of the sampled participants 68.2 percent disagreed or strongly disagreed that health insurance was not worth the money it costs. However, 57.9 percent of participants disagreed or strongly disagreed that they know how to purchase health insurance.

Health Insurance Literacy

Collected data showed that on all six survey questions used to measure participants’ confidence in choosing a health insurance plan most were not at all confident or slightly confident when choosing a health insurance plan. Similarly, on the seven questions used to measure participants’ behaviors on choosing a health plan, collected data showed that most participants were not at all likely or somewhat likely to have the behaviors needed to choose the best health plan for themselves. On the four questions assessing participants’ confidence in using a health insurance plan, collected data also showed that most participants were not at all confident or slightly confident in using a health insurance plan. Lastly, on the four questions assessing how likely participants’ will use their health insurance services, most participants responded moderately likely to very likely.
Summary and Conclusion

Similar to the findings by Cantiello and colleagues (2015), this study also found that young adults are a cost sensitive population. In this study, 40.8 percent of participants responded neutral and 20.1 percent responded disagree or strongly disagree when asked if they can afford health insurance. Similarly, in a research conducted by Humana, 50 percent of young adults said that they did not have health insurance because they could not afford it (Cantiello et al., 2015).

A common theme found in this research that confirmed in other research is young adults’ lack of confidence when choosing a health plan. As seen from Enroll America’s 2015 post open enrollment period research, 48 percent of the uninsured lacked confidence in choosing a plan for themselves in the future and 68 percent of the uninsured wanted more information about health insurance terms (Stern, 2015). Similarly, this research found that 56 percent of participants responded not at all confident or slightly confident when understanding health insurance terms. Additionally, in three of the six survey questions assessing participants’ confidence in choosing a health plan, most participants responded not at all confident or slightly confident.

Another important theme found in this research is that the majority of participants responded that health insurance was important to them. When asked about the importance of health insurance on health status, 86.6 percent of participants agreed or strongly agreed. Additionally, when asked if health insurance is important to them, 87 percent responded agree or strongly agree. When asked if health insurance is important to their financial security, 48 percent of participants responded agree or strongly agree and when
asked if health insurance is something they need, 87 percent of participants responded agree or strongly agree as well.

Data from this research indicated that regarding young adults’ attitudes and perceptions towards health insurance, they do value the importance of health insurance and how it can affect various aspects of their lives such as their financial security and most importantly their overall health status. Though a majority of participants responded health insurance as important to them, it’s important to note that a majority of them also responded that health insurance is something they cannot afford. Additionally, it’s also important to note that there were a number of survey items from this research to which participants responded “neutral” or “don’t know”. These answers may be due to a lack of experience dealing with health insurance or a lack of education about health insurance.

**Recommendations for Further Research**

For future studies related to health insurance or health insurance literacy, the researcher recommends using the HILM tool. Reasons for continued use of the HILM tool is because of its high levels of internal consistency and validity. Additionally, if using the HILM tool, the use of the complimentary questions developed by AIR would also be recommended as well.

If future studies are interested in using the 15 survey items developed by the researcher, a pilot test of the items are recommended. Due to the time constraints of this research, the researcher did not pilot test the 15 developed survey items. A pilot test of the survey items will help to identify its validity and reliability.
An additional recommendation that the researcher suggests for future research is to add a data collection instrument that can measure participants’ applied health insurance knowledge such as identifying health insurance terms or ability to calculate out of pocket cost when receiving a health service.

The researcher recommends that further studies identify correlations between demographic factors and responses. For instance, a correlation between participants’ age and their responses could be compared to determine if young adults who are older and approaching 26 years of age have differing responses than younger participants. Furthermore, a study on a larger and more varied sample size would better represent the young adult sample size. Broadening the age group from the maximum age of 24 to 30 would also provide more information about young adults who are about to purchase health insurance for the first time as well.

Existing research about health insurance topics related to young adults is limited and additional studies are recommended by the researcher. Importantly, more studies on barriers to obtaining health insurance and health insurance literacy levels among young adults are recommended. Such studies would be able to help in understanding and addressing the low health insurance enrollment rate among young adults.

**Recommendations for Health Education Practice**

Data collected from this study suggest that more focus should be made in educating or even simply exposing young adults to health insurance earlier in their lives. Introducing health insurance information earlier can help to increase the health insurance literacy rates among young adults and thus increase their confidence when choosing a health insurance plan. The exposure of health insurance information can be done in a
health consumer classes offered in high schools and colleges. Most importantly, the introduction or increase of focus on health literacy levels across the US can have positive health effects. Focusing on health literacy education and advocacy will not only increase the health insurance literacy levels of individuals, it will also allow them to make health decisions that are best for them and their families.
References


Doi:10.1177/1053451208321565


Cunningham, P. J., & Bond, A. M. (2013, September). *If the price is right, most uninsured - even young invincibles - likely to consider new health insurance marketplaces*. (Research Report No. 28). Washington, DC: Health System Change.


APPENDIXES
Appendix A

IRB Approval Form
March 3, 2016

Dear Judith Luebke, Ph.D:

Re: IRB Proposal entitled "[872217-3] Assessing Young Adults' Attitudes and Perceptions on Health Insurance, and their Health Insurance Literacy Levels"

Review Level: Level II

Your IRB Proposal has been approved as of March 3, 2016. On behalf of the Minnesota State University, Mankato IRB, we wish you success with your study. Remember that you must seek approval for any changes in your study, its design, funding source, consent process, or any part of the study that may affect participants in the study. Should any of the participants in your study suffer a research-related injury or other harmful outcome, you are required to report them to the Associate Vice-President of Research and Dean of Graduate Studies immediately.

When you complete your data collection or should you discontinue your study, you must submit a Closure request (see http://grad.mnsu.edu/irb/continuation.html). All documents related to this research must be stored for a minimum of three years following the date on your Closure request. Please include your IRBNet ID number with any correspondence with the IRB.

Sincerely,

Mary Hadley, Ph.D.
IRB Coordinator

Sarah Silfors, Ph.D. LP
IRB Co-Chair
This letter has been electronically signed in accordance with all applicable regulations, and a copy is retained within Minnesota State University, Mankato IRB's records.
Appendix B

Health Insurance Literacy Measurement (HILM) Self-Assessment Tool
Health Insurance Literacy Measure®
(HILM)

Model Survey

The material in this document represents a Model Survey administration of the Health Insurance Literacy Measure.

The first 21 items represent the core questions for the four scales on the HILM and should not be modified in the question or in the direct response options.

The additional items include suggested demographics and supplemental items that are useful for analysis.

The demographic and supplemental items are not required, however. We will accept any demographic and supplemental items that you do collect (with any variety of response options). You may collect fewer demographic and supplemental items than listed in this Model Survey or you might collect additional such elements. You are welcomed and encouraged to send as much demographic and supplemental data in your file as you desire, though please send us your codebook and survey instrument so that we can crosswalk your items and responses to our coding structure.

This survey instrument can be adapted for various modes of administration (phone-based, paper-based, internet-based, etc.). Note that certain response options (such as Refusal codes) may only be applicable to certain modes of administration. The full range of possible response codes is included for each item, although not all codes may apply to your mode of administration. Similarly, if you use different codes for “Refused”, “Don’t Know”, “No Response/No Answer/Truly Missing”, “Not Collected”, and “Correct Skip/Not Applicable”, please send us your code structure for these categorizations.

Similarly, the Model Data Dictionary Record Layout Codebook represents a suggested approach to question and response coding and the positioning of the data elements in the record.

However, we will accept your data in alternative record lengths and in alternative field orders, so long as you send us your codebook and record layout so that we can restructure your data into our formats.

The Model Survey and Model Data Dictionary Record Layout Codebook are perhaps best suited for entities and organizations that wish to use the HILM but which do not have any pre-existing survey and data acquisition infrastructure. As such, the Model Survey and Model Data Dictionary Record Layout Codebook can serve as a relatively complete and customizable package for survey implementation.
Health Insurance Literacy Measure®
(HILM)

Survey Instructions:
Add any survey instructions here such as:
How to mark responses, if the survey is paper-based.
Listen to all response options before responding, if phone based or in-person with verbal administration.
How to click on responses if computer-based or internet-based.

Scale 1. Confidence: Choosing a Health Plan
The following questions are about how confident you feel choosing a health insurance plan.

Q01. How confident are you that you understand health insurance terms?
1. Not At All Confident
2. Slightly Confident
3. Moderately Confident
4. Very Confident
5. Refused
6. Don't Know
7. Non-Response/No Answer/Truly Missing

Q02. How confident are you that you know where to find the information you need to choose a health plan if you were not offered insurance through an employer?
1. Not At All Confident
2. Slightly Confident
3. Moderately Confident
4. Very Confident
5. Refused
6. Don't Know
7. Non-Response/No Answer/Truly Missing

Q03. How confident are you that you know how to estimate what you have to pay for your health care needs in the next year, not including emergencies?
1. Not At All Confident
2. Slightly Confident
3. Moderately Confident
4. Very Confident
5. Refused
6. Don't Know
7. Non-Response/No Answer/Truly Missing
Q04. How confident are you that you know where to go for help if you were having trouble affording health insurance outside an employer?

1  Not At All Confident
2  Slightly Confident
3  Moderately Confident
4  Very Confident
-1 Refused
-2 Don't Know
-3 Non-Response/No Answer/Truly Missing

Q05. How confident are you that you know what questions to ask so you can choose the best health plan for you?

1  Not At All Confident
2  Slightly Confident
3  Moderately Confident
4  Very Confident
-1 Refused
-2 Don't Know
-3 Non-Response/No Answer/Truly Missing

Q06. How confident are you that you would choose the health plan that is best for you?

1  Not At All Confident
2  Slightly Confident
3  Moderately Confident
4  Very Confident
-1 Refused
-2 Don't Know
-3 Non-Response/No Answer/Truly Missing

Scale 2: Behavior: Choosing a Health Plan

The next set of questions are about comparing health insurance plans. When answering the questions, please imagine that you have a choice of health plans.

Q07. When comparing health insurance plans, how likely are you to understand how the plans differ?

1  Not At All Likely
2  Somewhat Likely
3  Moderately Likely
4  Very Likely
-1 Refused
-2 Don't Know
-3 Non-Response/No Answer/Truly Missing
Q08. When comparing health insurance plans, how likely are you to find out if you have to meet a deductible for health care services? A deductible is the amount of money you have to pay before your health insurance will pay anything for your health care.
1. Not At All Likely
2. Somewhat Likely
3. Moderately Likely
4. Very Likely
5. Refused
6. Don’t Know
7. Non-Response/No Answer/Truly Missing

Q09. When comparing health insurance plans, how likely are you to look to see which doctors and hospitals are covered in each plan?
1. Not At All Likely
2. Somewhat Likely
3. Moderately Likely
4. Very Likely
5. Refused
6. Don’t Know
7. Non-Response/No Answer/Truly Missing

Q10. When comparing health insurance plans, how likely are you to understand what you have to pay for prescription drugs?
1. Not At All Likely
2. Somewhat Likely
3. Moderately Likely
4. Very Likely
5. Refused
6. Don’t Know
7. Non-Response/No Answer/Truly Missing

Q11. When comparing health insurance plans, how likely are you to understand what you would have to pay for emergency department visits?
1. Not At All Likely
2. Somewhat Likely
3. Moderately Likely
4. Very Likely
5. Refused
6. Don’t Know
7. Non-Response/No Answer/Truly Missing
Q12. When comparing health insurance plans, how likely are you to understand what you would have to pay for specialist visits?
   1. Not At All Likely
   2. Somewhat Likely
   3. Moderately Likely
   4. Very Likely
   -1 Refused
   -2 Don’t Know
   -3 Non-Response/No Answer/Truly Missing

Q13. When comparing health insurance plans, how likely are you to find out if the plans cover unexpected costs such as hospital stays?
   1. Not At All Likely
   2. Somewhat Likely
   3. Moderately Likely
   4. Very Likely
   -1 Refused
   -2 Don’t Know
   -3 Non-Response/No Answer/Truly Missing

Scale 3. Confidence: Using a Health Plan

The next questions ask how confident you feel about using health insurance.

Q14. How confident are you that you know how to find out what is and is not covered before you receive a health care service?
   1. Not At All Confident
   2. Slightly Confident
   3. Moderately Confident
   4. Very Confident
   -1 Refused
   -2 Don’t Know
   -3 Non-Response/No Answer/Truly Missing
   -7 Correct Skip/Not Applicable/ No Health Insurance Coverage
Q15. How confident are you that you know how to figure out your share of the cost for care, after the health plan pays their share?
1. Not At All Confident
2. Slightly Confident
3. Moderately Confident
4. Very Confident
5. Refused
6. Don't Know
7. Non-Response/No Answer/Truly Missing
8. Correct Skip/Not Applicable/No Health Insurance Coverage

Q16. How confident are you that you know what questions to ask your health plan if you have a coverage problem?
1. Not At All Confident
2. Slightly Confident
3. Moderately Confident
4. Very Confident
5. Refused
6. Don't Know
7. Non-Response/No Answer/Truly Missing
8. Correct Skip/Not Applicable/No Health Insurance Coverage

Q17. How confident are you that you know what to do if your health plan refuses to pay for a service you think should be covered?
1. Not At All Confident
2. Slightly Confident
3. Moderately Confident
4. Very Confident
5. Refused
6. Don't Know
7. Non-Response/No Answer/Truly Missing
8. Correct Skip/Not Applicable/No Health Insurance Coverage
Scale 4. Behavior: Using a Health Plan

The next questions are about your experiences using your health insurance plan, for example, going to the doctor to receive care covered by the health plan.

Q18. When using your health insurance plan, how likely are you to look into what your health plan will and will not cover before you get health care services?

1. Not At All Likely
2. Somewhat Likely
3. Moderately Likely
4. Very Likely
-1 Refused
-2 Don't Know
-3 Non-Response/No Answer/Truly Missing
-7 Correct Skip/Not Applicable/ No Health Insurance Coverage

Q19. When using your health insurance plan, how likely are you to look to member services to tell you what medical services your health plan covers?

1. Not At All Likely
2. Somewhat Likely
3. Moderately Likely
4. Very Likely
-1 Refused
-2 Don't Know
-3 Non-Response/No Answer/Truly Missing
-7 Correct Skip/Not Applicable/ No Health Insurance Coverage

Q20. When using your health insurance plan, how likely are you to find out if a doctor is in-network before you see him/her? A network is a group of doctors, hospitals, and other health care professionals who have a contract with a health insurance plan to take care of the plan’s members.

1. Not At All Likely
2. Somewhat Likely
3. Moderately Likely
4. Very Likely
-1 Refused
-2 Don't Know
-3 Non-Response/No Answer/Truly Missing
-7 Correct Skip/Not Applicable/ No Health Insurance Coverage
Q21. When using your health insurance plan, how likely are you to review the statements you get from your health plan showing what you owe and what they paid for a service?

1. Not At All Likely
2. Somewhat Likely
3. Moderately Likely
4. Very Likely
-1. Refused
-2. Don't Know
-3. Non-Response/No Answer/Truly Missing
-7. Correct Skip/Not Applicable/ No Health Insurance Coverage
Appendix C

Health Insurance Literacy Measurement Tool Permission
Dear lawyang,

We are pleased to advise that you have been added as a Registered User to Health Insurance Literacy Measurement Project. Please read the following information carefully and be sure to save this message in a safe location for future reference.

Portal Website Address: healthinsliteracy.airprojects.org
Username: lawyang
Password: [redacted]

Thank you, we appreciate your support...

Health Insurance Literacy Measurement Project

Click here to Reply or Forward
Appendix D

Survey Instrument
Health Insurance Attitudes, Perceptions, & Literacy Survey

About You. Please tell us a little bit about yourself

1. What is your age?
   ____________ Years old

2. What is your primary language?
   ____________________

Please circle your answers

3. What is your year in school?
   Freshman  Sophomore  Junior  Senior
   Graduate student

4. Do you have health insurance?
   Yes  No  Don’t Know

5. If no, please list the main reason you do not have health insurance:
   Too expensive
   Don’t need insurance
   Don’t know how
   Other

Please put an “X” in the box that corresponds to you

<table>
<thead>
<tr>
<th></th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health insurance is something I need</td>
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<tr>
<td>Health insurance is important to me</td>
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<tr>
<td>Health insurance is important for my health</td>
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<tr>
<td>I am healthy enough, so I don’t need health insurance</td>
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<tr>
<td>Health insurance is hard to obtain</td>
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<td>Health insurance is not worth the money it costs</td>
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<td>Health insurance is important to my financial security</td>
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<td>Health insurance is something I can afford</td>
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<tr>
<td>I know how to purchase health insurance</td>
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<tr>
<td>Health insurance plans are hard to understand</td>
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</table>

Please continue onto the next page
### Confidence: Choosing a Health Plan

<table>
<thead>
<tr>
<th>How confident are you that</th>
<th>Not at all Confident</th>
<th>Slightly Confident</th>
<th>Moderately Confident</th>
<th>Very Confident</th>
<th>Don’t Know</th>
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</thead>
<tbody>
<tr>
<td>You understand health insurance terms?</td>
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<td>You know where to find the information you need to choose a health plan if you were not offered insurance through an employer?</td>
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<td>You know how to estimate what you have to pay for your health care needs in the next year, not including emergencies?</td>
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<tr>
<td>You know where to go for help if you were having trouble affording health insurance outside an employer?</td>
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<td>You know what questions to ask so you can choose the best health plan for you?</td>
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<tr>
<td>You would choose the health plan that is best for you?</td>
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</table>
**Behavior: Choosing a Health Plan**

<table>
<thead>
<tr>
<th>When comparing health insurance plans</th>
<th>Not at all Likely</th>
<th>Somewhat Likely</th>
<th>Moderately Likely</th>
<th>Very Likely</th>
<th>Don’t Know</th>
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</thead>
<tbody>
<tr>
<td>How likely are you to understand how plans differ?</td>
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<tr>
<td>How likely are you to find out if you have to meet a deductible for health care services?</td>
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<td>How likely are you to look to see which doctors and hospitals are covered in each plan?</td>
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<td>How likely are you to understand what you have to pay for prescription drugs?</td>
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<tr>
<td>How likely are you to understand what you would have to pay for emergency department visits?</td>
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</tr>
<tr>
<td>How likely are you to understand what you would have to pay for specialist visits?</td>
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<tr>
<td>How likely are you to find out if the plans cover unexpected costs such as hospital stays?</td>
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</tbody>
</table>

Please continue onto the next page
### Confidence: Using a Health Plan

<table>
<thead>
<tr>
<th>How confident do you feel about using health insurance</th>
<th>Not at all Confident</th>
<th>Slightly Confident</th>
<th>Moderately Confident</th>
<th>Very Confident</th>
<th>Don’t Know</th>
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<tbody>
<tr>
<td>You know how to find what is and is not covered before you receive a health care service?</td>
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<td>You know how to figure out your share of the cost for care, after the health plan pays their share?</td>
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<td>You know what questions to ask your health plan if you have a coverage problem?</td>
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<tr>
<td>You know what to do if your health plan refuses to pay for a service you think should be covered?</td>
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</table>

### Using a Health Plan

<table>
<thead>
<tr>
<th>Your experiences using your health insurance plan</th>
<th>Not at all Likely</th>
<th>Somewhat Likely</th>
<th>Moderately Likely</th>
<th>Very Likely</th>
<th>Don’t Know</th>
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</thead>
<tbody>
<tr>
<td>How likely are you to look into what your health plan will and will not cover before you get health care services?</td>
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<td>How likely are you to look to member services to tell you what medical services your health plan covers?</td>
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<td>How likely are you to find out if a doctor is in-network before you see him/her? A network if a group of doctors, hospitals, and other health care professionals who have</td>
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</table>
a contract with a health insurance plan to take care of the plan’s members.

How likely are you to review the statements you get from your health plan showing what you owe and what they paid for a service?

THANK YOU for your time and feedback
Please know that your participation is greatly valued
Appendix E

Consent Form
Consent Form

You are invited to take part in a research to determine health insurance literacy levels, attitudes, and perceptions about health insurance among young adults. This research is being conducted by Law Yang, a graduate student at MSU, Mankato. I ask that you read this form before agreeing to be in the research.

Purpose

The purpose of this research is to determine health insurance literacy level and assess attitudes and perceptions about health insurance among young adults aged 18 – 24 years old.

Procedures

If you agree to be in the research, and sign this consent form, we ask that you fill out a three page survey. The survey should take only 9-10 minutes of your time.

Risks and Benefits

You will be asked to answer questions that directly ask about your age, education, and health insurance related items. Some of the questions may be personal, but the information will not be shared with anyone. You may refuse to answer any questions on the form. The research presents minimal risk and no more than experienced in daily activities and there are no direct benefits of the research.

Confidentiality

The records of this research will be kept private. Anything you answer will remain confidential. In any sort of report of the research, I will not include any information that will make it possible to identify you. We are not asking for your name, address, or phone number. In addition, any other identifying information will not be kept with this survey. The surveys will be kept in a locked file located in the Health Science department at Minnesota State University, Mankato. After three years all collected data of this research will be properly destroyed. Only the researcher for this research will have access to the records.

Voluntary nature of research

Your decision whether or not to participate in this research will not affect your current or future relations with the Minnesota State University, Mankato. You do not need to complete the survey if you feel uncomfortable while taking the survey. By completing the survey you indicate your informed consent to participate in this research.
Contact

The researcher conducting this research are Law Yang. You may contact the researcher at the following email: lawtoua.yang@mnsu.edu. If you have any questions or concerns regarding the treatment of human subjects, contact: MSU IRB Administrator Minnesota State University, Mankato, Institutional Review Board, 115 Alumni Foundation, (507) 389-2321.

MSU,M IRB# 872217