

Connect for Health Colorado: Results and Recommendations From Website Usability Testing with Consumers

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I. Executive Summary

Introduction and Methods

This report summarizes the results of consumer usability testing of Connect for Health Colorado's website, developed and maintained by the Health Insurance Marketplace in Colorado. Usability testing focused on the key functions of the Marketplace website, including helping consumers assess their eligibility for Qualified Health Plans (QHPs) offered through the Marketplace and public and private subsidies; comparing and choosing a QHP; and enrolling in a plan.

American Institutes for Research® (AIR®), contracted by the Centers for Medicare & Medicaid Services (CMS), conducted the assessment in December 2014. During the testing, AIR facilitators guided 10 participants through 11 tasks on the website.¹

Findings and Recommendations

Overall, participants were able to complete most tasks. Some tasks were relatively easy for participants to complete, such as the Get Started (Tasks 1–2) and Get Help (Tasks 9–10) tasks.

However, the Assess Eligibility (Tasks 3–5) and Compare, Select, and Enroll in a Health Plan (Tasks 6–8) tasks were more challenging for participants. They struggled with the length of the shared eligibility application as well as understanding some of the questions in the application. Participants also had difficulty comparing health plans and understanding health insurance terms (e.g., coinsurance). However, difficulty understanding health insurance is not a challenge that is unique to the Marketplace; problems with health insurance literacy are widespread.^{2, 3}

Connect for Health Colorado can begin to address some of these challenges with small immediate changes, but other challenges will require longer term efforts. For example, adding in-text definitions of complex terms is one immediate step to help consumers better understand health insurance. Ultimately, improving health insurance literacy is a long-term effort.

Strengths

Participants were able to complete several tasks with ease and had a positive experience while completing them:

- Participants were able to **identify the website purpose** as helping people in Colorado get health insurance. (Task 1: Find website purpose)
- Participants were able to easily navigate to the account creation page. (Task 2: Create account)
- Participants were able to **find a checklist of documents** for the shared eligibility application. (Task 3: Find list of information needed to apply)

¹ Because of time constraints, the facilitator asked participants to complete a subset of the 11 tasks.

² Paez, K., & Mallery, C. (2014, October). A little knowledge is a risky thing: Wide gap in what people think they know about health insurance and what they actually know. Retrieved from, http://aircpce.org/wpcontent/uploads/2014/10/11801-451-05_Issue_Brief_102014.pdf

³ Parragh, Z. A., & Okrent, D. (2015). Health literacy and health insurance literacy: Do consumers know what they are buying? Retrieved from http://www.allhealth.org/publications/Private_health_insurance/Health-Literacy-Toolkit 163.pdf

- Most found information on how to appeal an eligibility decision without any major problems. (Task 4: Find appeals information)
- Participants easily **found information on how to get assistance** by phone or in-person. Many said they would prefer to find help online or over the phone. However, no one found the online chat feature. (Task 9: Find where to get help)

Areas for Improvement

Participants also experienced challenges completing several tasks; however, Connect for Health Colorado can implement several things to help improve the consumer experience:

- Participants struggled with the **number of questions in the shared eligibility application** and the amount of time it took to complete. (Task 5: Determine eligibility)
 - Recommendation: Review the questions to determine whether all are critical for Connect for Health Colorado to collect. In addition, consider whether some of the information can automatically populate from the account creation page or other sources.
- Participants had difficulty understanding some of the shared eligibility application questions, such as: "Who is Helping You?", "Program Selection: Medical assistance or none," and "individual shared responsibility exemption."
 - Recommendation: Revise the wording of some of the questions and add in-text plain language definitions for complex or confusing terms.
- Participants had difficulty **using some of the plan shopping features**, such as the "apply filters" button, two-sided filters, and "compare X plans" button.
 - Recommendation: Implement improvements to these features so plan lists update
 automatically when filters are adjusted, make the slider ends more noticeable, and place
 "compare X plans" buttons on the right side above and below the plan list.
- Participants had **difficulty comparing health plans and understanding health insurance terms**. But difficulty understanding health insurance is not a challenge that is unique to the Marketplace; problems with health insurance literacy are widespread. (Task 6: Compare health plans)
 - Recommendation: Provide brief in-text definitions of health insurance terms. Consumers
 could benefit from having definitions and examples of insurance terms easily accessible
 while they compare plans.
- Participants were confused by the results received when using the search box on the homepage because results from the Connect for Health Colorado website were not prominently featured. (Task 9: Find where to get help)
 - Recommendation: Modify the search box on the homepage to feature primarily results from the Connect for Health Colorado site.

II. Introduction

Purpose

This report summarizes the results of consumer usability testing of Connect for Health Colorado's website, developed and maintained by the Health Insurance Marketplace in Colorado. Consumer website usability testing gathers information about whether—⁴

- Consumers are able to readily find the information they want (navigation)
- Consumers can interpret the language used and information as intended (comprehension)
- The website provides information about what consumers want to know (relevance)

To do this, the Centers for Medicare & Medicaid Services (CMS) contracted with American Institutes for Research® (AIR®) to conduct website usability assessments with consumers. This work is part of CMS' contract with AIR to provide technical assistance (TA) to the Marketplaces. The contract with AIR also funds the development, testing, and implementation of two consumer experience surveys, which will provide standardized information on consumers' experiences with the Marketplaces and the Qualified Health Plans (QHPs) offered through the Marketplaces. Health Insurance Marketplace Survey (Marketplace Survey) scores provide general feedback about how consumers view the Marketplace website experience and other aspects of Marketplace performance.

To support Marketplaces in using the results of the Marketplace Survey and improving the consumer experience, in 2015, CMS will be publishing the Marketplace Survey Improvement Guide. The Guide will also include suggestions for improving website usability (see exhibit 1).

The purpose of the usability testing was to provide the Marketplaces with feedback that—

- Improves the consumer's experience
- Informs the interpretation of the Marketplace Survey scores

Exhibit 1. Helping the Marketplace Improve the Consumer Experience

In 2015, CMS will publish the Marketplace Survey Improvement Guide. Some of the topics addressed in the Guide will include:

- Applying website usability principles to help consumers easily find information they need on your Marketplace's website
- Using plain language to help consumers find, understand, and use information to make informed decisions
- Providing consumer decisionsupport tools that help consumers manage the amount of information they see and make informed choices

The Guide will be available at http://www.cms.gov/Medicare/Quality -Initiatives-Patient-Assessment-Instruments/QualityInitiativesGenInfo/Health-Insurance-Marketplace-Quality-Initiatives.html

⁴ Nielsen, J., & Loranger, H. (2006). Prioritizing Web usability. Berkeley, CA: Nielsen Norman Group.

⁵ For further information about the survey, see: http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Quality-InitiativesGenInfo/Health-Insurance-Marketplace-Quality-Initiatives.html

The usability testing focused on the key functions of the Marketplace websites, including helping consumers determine their eligibility for Marketplace QHPs offered through the Marketplace and public and private subsidies; comparing and choosing a QHP; and enrolling in a plan.

This report describes results and recommendations from the usability testing. Each Marketplace will choose to follow through on some recommendations but not others, taking into consideration their circumstances and overall priorities. Some of the recommendations, such as small changes to Web content, may be relatively easy to implement. Other recommendations may require more extensive resources and time, such as extensive programming or additional Marketplace infrastructure. Marketplaces may choose to address resource-intensive recommendations at a future point or over multiple years.

Most of the recommendations focus on the immediate goal of providing consumers with a positive enrollment experience. However, longer-term goals include improving health insurance literacy among consumers. For example, adding in-text definitions of complex terms is one immediate step to help consumers better understand health insurance. Ultimately improving health insurance literacy is a long-term effort.

Methods and Population

To assess the usability of the websites, AIR experts in measure development, public reporting, plain language, consumer engagement, and website usability developed a semi-structured interview protocol to guide consumers through 11 tasks on the website (exhibit 2). AIR worked with Connect for Health Colorado to tailor the protocol to focus on the testing tasks and participant characteristics that were of greatest interest to them. See appendix B for the testing guide.

Population. AIR recruited consumers with demographic characteristics of people eligible to shop for and purchase insurance through the Marketplace website. Ten people participated in the testing. See appendix C for more details on the population and methods used to conduct and analyze the findings from the assessment.

Limitations. There are several limitations to this testing:

- Participants and testing. The participants fit the demographic criteria of those who were eligible to purchase health insurance through the Marketplace; however, they were not required to be shopping for insurance through the Marketplace. Therefore, they were less invested in completing the tasks than a consumer actively looking to get health insurance through the Marketplace. In addition, participants knew this was a test; therefore, they may have spent less time completing some tasks (e.g., comparing health plans) than they would in a real-life situation. AIR encouraged participants to make decisions that were as realistic as possible.
- User Acceptance Testing (UAT) environment. The testing to determine eligibility, compare plans, and enroll was conducted in the UAT environment, which may not be identical to the production website in terms of content and traffic volume.
- Time and travel. Testing sessions were conducted at the Connect for Health Colorado office between the hours of 8:30 a.m. and 5:30 p.m. Therefore, participants who were not able to travel or complete the testing during these hours are not represented.
- Language. Individuals who were not comfortable reviewing a website in English and answering questions in English were not included. This is a subset of the population that the Marketplace serves. Future testing should consider including people whose primary language is not English and should also explore testing the accessibility of the website for visually impaired consumers.

• Task duration. Participants were asked to "think aloud" while performing tasks, which likely affected task duration.

Exhibit 2. Usability Testing Tasks⁶

Tasks 1-2: Get Started

- Task 1: Find and tell me the purpose of this website.
- Task 2: Create an account for this website.

Tasks 3-5: Assess Eligibility

- Task 3: Find a list of the types of information or documents you would need to apply for health insurance.
- Task 4: Find information about how to appeal a decision from the Marketplace.
- Task 5: Assess your eligibility to receive financial assistance to purchase the health insurance.

Tasks 6-8: Compare, Select, and Enroll in a Health Plan

- Task 6: Find and compare the features of at least two of the health insurance plans that you think might be a good fit for you.
- Task 7: Select the health plan that would be best for you.
- Task 8: Complete the enrollment process.

Tasks 9-10: Get Help

- Task 9: Find out where you could get help if you were using this website and had questions.
- Task 10: Find a list of frequently asked questions (FAQs).

Task 11: Word Activity

Task 11: Select five words that describe your experience using the website.

⁶ AIR did not test two originally planned tasks: (1) "Identify the steps (or process) to apply for a health insurance plan through the Marketplace website," and (2) "In your own words, tell me what this notice tells you [show eligibility notice]." The first task was not included because this information was not available on the website; the second, because AIR did not receive real-time eligibility notices during testing.

III. Summary Results

Overall, participants were able to complete most of the tasks. Some of the tasks were relatively easy for participants to complete, such as the Get Started (Tasks 1–2) and Get Help (Tasks 9–10) tasks. However, the Assess Eligibility (Tasks 3–5) and Compare, Select, and Enroll in a Health Plan (Tasks 6–8) tasks were more challenging for participants. They struggled with the length of the application to assess their eligibility for financial assistance, as well as understanding some of the questions in the application. Participants also had difficulty comparing health plans and understanding health insurance terms. But difficulty understanding health insurance is not a challenge that is unique to the Marketplace; problems with health insurance literacy are widespread.^{2,3}

Connect for Health Colorado can begin to address some of these challenges with relatively small immediate changes, whereas others will need more long-term efforts. For example, adding in-text definitions of complex terms is one immediate step to help consumers better understand health insurance. But, ultimately improving health insurance literacy is a long-term effort (see exhibit 3 for resources).

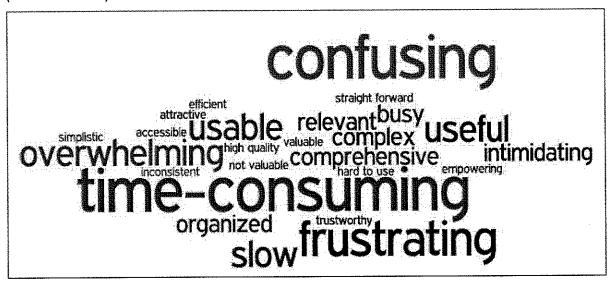
Exhibit 3. Resources for Long-Term Efforts to Improve Health Insurance Literacy

- National Academy for State Health Policy, Around the Network Promising Practices: Health Insurance Literacy,
 https://www.statereforum.org/sites/default/files/promising_practices_health_insurance_literacy_jan uary_2015.pdf
- Enroll America, Health Insurance Literacy Resource Hub, http://www.enrollamerica.org/hil/
- Alliance for Health Reform, Health Literacy and Health Insurance Literacy: Do Consumers Know What They Are Buying? http://www.allhealth.org/publications/Private_health_insurance/Health-Literacy-Toolkit 163.pdf
- Pacific Business Group on Health, Supporting Consumers' Decisions in the Exchange, http://www.pbgh.org/key-strategies/engaging-consumers/216-supporting-consumers-decisions-in-the-exchange
- Marketplace Survey Improvement Guide, available in 2015 at http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/QualityInitiativesGenInfo/Health-Insurance-Marketplace-Quality-Initiatives.html

Words That Describe Participant's Overall Experience

At the end of each test session, participants selected five words that best described their experience using the website (Task 11). The results are shown in the word cloud in figure 1. The most popular words (chosen by five participants) were "confusing" and "time-consuming." Some also said that their experience was "overwhelming" or "frustrating." When participants used the words "frustrating," "overwhelming," or "time-consuming" to describe their experience using the website, it was in reference to the time it took to go through the financial eligibility application (Task 5) and/or the comparing and selecting a health plan page (Tasks 6-8). While most participants saw the value in using the Connect for Health Colorado website to apply for financial assistance and purchase health insurance, they were generally dissatisfied with their experience on the site. But some called the site "useful" and "usable" and "organized." Those who described it as organized liked the FAQs page and thought the information was well-organized and useful. Others said it was "relevant" because everyone needs health insurance.

Figure 1. Words Chosen by Participants to Describe Their Experience Using the Website (Task 11 Results)



Summary Results and Recommendations

Table 1 summarizes the results and recommendations to improve the usability of the Connect for Health Colorado website. The last column of the table also suggests the order in which Connect for Health Colorado may want to prioritize the recommendations. The priority categories are as follows:

- **Priority 1** changes that may be relatively easy to implement or are critical to core website functions (short-term changes)
- Priority 2 changes that may require a moderate amount of effort (mid-term changes)
- Priority 3 changes that may require more significant time and resources (long-term changes).

⁷ Benedek, J., & Miner, T. Measuring desirability: New methods for evaluating desirability in a usability lab setting. Microsoft Corporation, Retrieved from: http://www.uxmatters.com/mt/archives/2010/02/rapid-desirability-testing-a-case-study.php

Each Marketplace's circumstances and priorities are unique; therefore, it will be important for each Marketplace to review the recommendations and suggested priorities to determine what changes are the most feasible to start with and what changes should be addressed at a future point or over multiple years.

Table 1. Results and Recommendations

Task Tasks 1–2: Get Started	Results and Reactions	Recommendations	Priority ⁸	
Task 1: Find and tell me the website purpose of this website. Most participants were able to identify the website purpose as a place to help people in Colorado get health insurance.		No changes needed.	NA	
	Some commented that the photo banner on the homepage was too large or busy, which made it more difficult for some to find information on the website's purpose.	Reduce the size of the photo banner on the homepage so people can more easily see the main website buttons such as "Individuals and Families – Current Customers."	1	
Task 2: Create an account for this website.	Participants were able to easily navigate to the account creation page.	No changes needed.	NA	
	Since the "username" field autopopulated with the participant's email address, some participants were confused about whether they could create their own username or they had to use their email address.	Add a note above the username field to explain that consumers can use their email address or create their own username. For example, "You may use your email address as your username, or you can choose your own." The note should be in a different font or italicized to help distinguish it from the field name.	1	
Some participants wanted to see a confirmation screen after they finished creating their account.		Create a confirmation page after the user has created his/her account that says something such as: "Congratulations, you have created an account with Connect for Health Colorado." The message should then provide instructions on how to log in.	1	
Tasks 3-5: Assess Eligibility				
Task 3: Find a list of the types of information or documents you would need to apply for health insurance.	Most were able to find a checklist of documents for the financial assistance application.	No changes needed.	NA	

⁸ Priority 1 = changes that may be relatively easy to implement or are critical to core website functions; priority 2 = changes that may require a moderate amount of effort; priority 3 = changes that may require more significant time and resources.

Task	Results and Reactions	Recommendations	Priority ⁸
	Some participants were confused by the list of documents because they were not sure if the same documents were needed by those who were not applying for tax credits. Also at this point, they were not sure if they would apply for tax credits, primarily because they did not understand what they were.	 Revise the checklist to differentiate between the information that is needed to assess eligibility for tax credits and the information needed to apply for health insurance. Provide a concise and clear explanation of tax credits and how the financial application relates to getting health insurance. Provide information on what consumers should consider when making the decision to apply for financial assistance. 	1
Task 4: Find information about how to appeal a decision from the Marketplace.	Most found information on how to appeal a decision without any major problems.	No changes needed.	NA
	Many participants were disappointed that more information on appeals was not provided on the page. Some participants did not notice the hyperlink to the appeal form.	Add information to educate consumers about the appeals process and include a hyperlink directly to the appeal form instead of the page on which the form can be found.	1
Task 5: Determine your eligibility to receive financial assistance to purchase the health insurance.	Participants struggled with the number of questions in the shared eligibility application and the amount of time it took to complete.	Review the questions to determine if all are critical for Connect for Health Colorado to collect and can be removed. In addition, consider whether some of the information can automatically populate from the account creation page or other sources.	2–3 ⁹
	Participants did not see the options they expected in the "About Your Application: Application Location" question. They were also unsure of why this information was needed.	Remove this question from the application if it is not critical.	1
	Participants were confused when they were asked to identify the "Reasons for Enrolling Outside of Open Enrollment" because it was during the open enrollment period.	Remove this question from the application, except when it is outside of the open enrollment period. Alternatively, add an option for "none" or "not applicable" when it is open enrollment.	1
	Participants were confused by the "Who is Helping You?" page because they did not understand how to respond if no one was helping them.	Add a question that first asks "Is anyone helping you (e.g., agent, broker, guide, counselor)?" Then, if applicable, ask the follow-up questions to determine the source of assistance.	1

⁹ Identifying questions to remove may require moderate changes (priority 2), but autopopulating from other sources may be a more long-term effort (priority 3).

Task Results and Reactions		Recommendations	Priority ⁸
	Participants were confused by the "Program Selection: Medical assistance or none" question because they did not understand the terminology and that these were options in response to a single question.	Include in-text definitions in plain language for "medical assistance" and "none." In addition, change the check box to a radio button, so only one choice can be selected.	1
	When receiving an error message, participants had some difficulties identifying which question was the source of their application errors.	Highlight the exact location of each error (e.g., highlight the field with the error in red or yellow) using inline error messages to draw attention to the location of errors. 10	2
	Participants did not understand what was meant by "individual shared responsibility exemption" in the Exemption to the Requirement to Purchase Health Insurance question.	Include a brief in-text definition in plain language of this phrase after the question.	1
	Participants tried to type their street number and street name in the same field rather than as two separate fields.	Have a single field for both street number and street name.	1
	Participants were not able to select a "county" from the drop-down list after entering their ZIP code.	Investigate why this drop-down option would not work and update the site accordingly.	1
Tasks 6-8: Compare, Select, and Enroll in a Health Plan			
Task 6: Find and compare the features of at least two of the health insurance plans that you think might be a good fit for you.	Most participants easily accessed the list of insurance plans available to them.	No changes needed.	NA
	Some participants felt that the list of plan results loaded very slowly.	Optimize the speed at which plan results load, possibly by rendering results in smaller groups as they are found, to reduce user frustration.	1
	Some users did not realize the "apply filters" button needed to be selected in order to narrow the plan list.	Have the plan list update as filters are adjusted so users can see immediate updates to the plan options.	1
	Some did not realize the sliding filters were two-sided and excluded dollar amounts they desired.	Make the movable ends of the sliders more noticeable by increasing their size or altering their color.	1

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 $^{^{10}}$ Enroll UX2014. (2012). A new standard for public and private health insurance enrollment: Design specifications manual. Retrieved from: http://www.ux2014.org/deliverables

Task	Results and Reactions	Recommendations	Priority ⁸
	Some participants had difficulty adjusting cost filters to the dollar amount they desired because the range was large (e.g., \$0 to \$20,000).	Lessen the range of prices displayed in the monthly premium cost filter by customizing it to the range in the user's search results.	2
	Most participants attempted to use the side- by-side plan comparison feature, but some had difficulty locating the "compare X plans" button.	Place "compare X plans" buttons on the right side above and below the plan list, where users are more likely to look for it.	1
	Some participants were unfamiliar with some health insurance terms, especially terms on the plan details pages and the metal levels.	Add brief definitions of health insurance terms (e.g., metal levels) on the pages where these terms appear in the text. When possible, replace confusing terms with plain language terms. In addition, include a link to the "Glossary of Terms" from within the plan compare pages. Provide an example scenario to help consumers understand how the metal levels translate into costs to the consumer.	2–311
	For plans that had coinsurance rather than copays for a particular service, some participants only noticed the "no charge" that appeared in copay rows while ignoring the costs listed in the coinsurance rows.	Revise the plan details table to use "does not apply for this plan" when the feature is not applicable to the health plan and "no charge" when the feature is part of the plan but there is no charge associated with the service.	1
	Some participants expected the "facilities" category of the plan details to contain information about which doctors, hospitals, or urgent care centers were in-network. However, the "facilities" category provides the cost of services in hospitals and other facilities.	Add the "provider look up" button to the plan details page. This will help users determine if their preferred care providers, hospitals, and facilities participate in a plan when they are reviewing plan details.	2
Task 7: Select the health plan that would be best for you.	Participants completed this task relatively quickly, but some mentioned they would have needed assistance or additional time if they were actually selecting a health plan. 12	No changes needed.	NA

¹¹ Adding in-text definitions would require moderate changes (priority 2); however, adding features that help consumers understand health insurance terms and metal levels would require more ongoing and long-term efforts (priority 3).

¹² AIR encouraged participants to make decisions that were as realistic as possible on their own. However, participants knew this was a test and they were not actually enrolling in insurance during the session.

Task	Results and Reactions	Recommendations	Priority ⁸
	The final deciding factor for all participants was some element of cost. Monthly premium and annual deductible were mentioned most often, but some consumers had difficulty understanding the different types of costs.	Add in a measure of cost at time of care that accounts for the plans' covered benefits (e.g., premiums) and anticipated health care service use for the year. If such a measure is not available, consider adding plan averages for low or high service use in addition to premiums. 13 This would help consumers get a better sense of the total costs for each insurance plan, which will help them make a more informed decision when selecting a health plan.	3
	Participants were familiar with the concept of adding the plan to their shopping cart, but one person did not realize that the plan was already in her cart.	Change the color and/or shape of the "Remove from cart" button to visually distinguish it from the "Add to cart" button.	1
Task 8: Complete the enrollment process.	Participant wanted to see a clearer "thank you for enrolling" page to confirm that her enrollment application was received. Participant also wanted to see options for paying online.	Add additional text to the "thank you for enrolling page" that states something such as "We have received your application. Your health plan carrier will notify you by email/postal mail and provide you with information on how to pay your monthly premium. You will not be enrolled in the plan you selected until your insurer receives your first payment."	1
	Participant looked for a shopping cart icon (similar to an online shopping website) that would direct him to the checkout page, but did not notice the one in the top banner.	Make the shopping cart icon more visible, so users can easily see and click on it to navigate to the checkout page.	1
Tasks 9–10: Help Function			
Task 9: Find out where you could get help if you were using this website and had questions.	Participants easily found how to get assistance by phone or in-person. Many said they would prefer to find help online or over the phone. No one found the online chat feature.	Add a link to online chat in the button in the middle of the homepage that currently says, "Find free in-person help." Rename this button to something such as "Get help" and include information on online, phone, and in-person help. This will help users find the online chat function, and all forms of assistance, much easier.	1
	Many participants stated they were not likely to use the Avatar, Kyla, for assistance. Some thought Kyla would direct them to an online chat feature.	Allow the Avatar, Kyla, to direct users to the online chat feature or the FAQs page.	2

¹³ Pacific Business Group on Health. (2013). Consumer choice of health plan decision support rules for health exchanges: Top 5 rules for decision support, and strategies to bridge the gaps [Issue Brief]. Retrieved from: http://www.pbgh.org/key-strategies/engaging-consumers/216-supporting-consumers-decisions-in-the-exchange

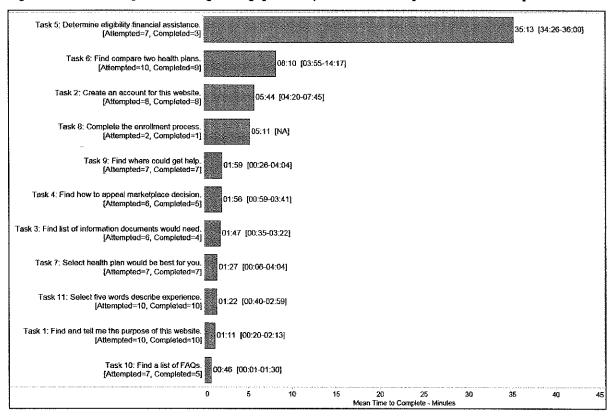
Task	Results and Reactions	Recommendations	Priority ⁸
	Participants were confused by the results received when using the search box on the homepage because results from the Connect for Health Colorado website were not prominently featured. Instead, some of the results were for links outside of Connect for Health Colorado, and were not necessarily relevant to information on the Marketplace website.	Modify the search box on the homepage to primarily feature results from the Connect for Health Colorado site as opposed to other websites outside of the Marketplace, and also move the search bar to the top of the page on every page of the site. This will allow users to find results that are applicable to the Connect for Health Colorado site, and by moving the search bar to the top of every page users will not have to scroll down the page to find it.	2
	When reviewing the "In-person Assistance" page, participants were not sure what differences existed between the three types of help (enrollment centers, brokers, health coverage guides).	Add a short, bulleted summary on the "In-person Assistance" page to summarize and define the three types of help available.	1
Task 10: Find a list of frequently asked questions (FAQs).	Most participants were able to find the list of FAQs; however, some had difficulty finding it.	 Include a "help drawer" on the top-right side of all webpages that includes access to the FAQs, as well as the glossary and online chat. 14 Rename the "Questions" under the "Brokers" heading on the bottom of the homepage to something such as "Questions for Brokers" to clarify that this is not the general FAQ link for consumers. List the FAQs webpage as the first returned result when consumers type "FAQs" in the search box on the homepage. Have the Avatar Kyla direct users to the FAQs page. 	2
	Some participants who found the FAQs page quickly and easily felt there were too many topics on the page, preferring a narrower list of categories. However, not all of the participants thought there was too much information on the page, as one participant liked that a lot of information was provided at once.	List "General Information" and other most popular consumer topics at the top of the FAQs page (rather than "Carrier Support and Carrier Team Questions") at the top of the page.	1
	Some participants were looking for the words "Frequently Asked Questions" instead of its abbreviation, "FAQs." Even when reviewing the topics under "Resources" on the homepage, they did not notice FAQs listed there.	Spell out "FAQs" as "Frequently Asked Questions" where it is listed on the homepage.	1

 $^{^{14}}$ Enroll UX2014. (2012). A new standard for public and private health insurance enrollment: Design specifications manual. Retrieved from: http://www.ux2014.org/deliverables

Average Time to Completion for Each Task

For each task, figure 2 shows the number of participants who attempted the task and completed it. Among those who completed the task, the average time to complete and the range are calculated. Some participants attempting a task did not complete the task because of reasons such as insufficient time and inability to complete (e.g., could not locate the information).

Figure 2. Mean Time [and Low-High Range] to Complete Each Task [Minutes: Seconds]



IV. Findings and Recommendations by Task

This section describes the findings and recommendations by task. Participants were asked to perform tasks related to—

- Get Started (Tasks 1–2)
- Assess Eligibility (Tasks 3–5)
- Compare, Select, and Enroll in a Health Plan (Tasks 6–8)
- Get Help (Tasks 9–10).

See exhibit 4 for resources on improving webpage layout and readability that can be used to improve consumer's experiences across the tasks.

Exhibit 4. Resources for Improving Webpage Layout and Readability

- Enroll UX2014. A new standard for public and private health insurance enrollment: Design specifications manual, http://www.ux2014.org/deliverables
- PlainLaguage.Gov. Writing for the web, http://www.plainlanguage.gov/howto/guidelines/FederalPLGuidelines/webWrite.cfm

Task 1: Find and tell me the purpose of this website.

Results and Reactions

Participants were able to complete this task relatively quickly. Most reviewed the homepage to identify the website's purpose and indicated that this was a website where people in Colorado could get health insurance. Some participants noted it was for people in Colorado without an employer-sponsored health plan.

Some participants noted that they had to scroll down below the fold of the first screen on the homepage in order to find the content that told them the purpose of the webpage (see figure 3 for a screenshot of the homepage). Some described the homepage as "busy" because of the rotating photos. Buttons for more information about issues such as "Individuals and Families-Current Customers" were below the photos. The size of the monitor used during the testing did not allow participants to see these buttons without scrolling. Some participants liked the photos and indicated they were reflective of people in Colorado; however, some noted that they did not identify with the people in the photos.

Figure 3. Connect for Health Colorado Homepage



Recommendations

No major changes are needed to the homepage in order for consumers to identify the website's purpose. However, Connect for Health Colorado may want to consider—

• Reducing the size of the photo banner on the homepage. This will make it easier for consumers using smaller monitors to see the buttons below the photos, such as "Individuals and Families—Current Customers."

Task 2: Create an account for this website.

Results and Reactions

Of those who attempted this task, all completed it. Participants understood where to go to create an account.

On the account creation page, some of the participants were confused about whether they could create a username or had to use their email address as the username because the username field was autopopulated with their email address. Some liked that their email address was autopopulated as the username because it would be easier to remember; others did not like this feature and wanted to create their own username.

After participants created an account, they were taken to the account log-in screen. One participant was surprised that she did not see a confirmation screen after she finished creating her account.

I would assume when the page refreshed after I created the account that it would say, "Congratulations, you've created an account." Or I assumed it would say I would be receiving an email that my account had been created. When it takes you back to the log-in page, it makes me think I did something wrong.

(CO15, 31-year-old white female, new enrollee)

Recommendations

Connect for Health Colorado may want to consider the following types of changes:

Add a note above the username field to explain that consumers can use their email address
or create their own username. For example, "You may use your email address as your

username, or you can choose your own." The note should be in a different font or italicized to help distinguish it from the field name. This should help to eliminate any confusion as to whether they should enter their own username or use their email address as their username.

• Create an account confirmation page. After the user creates his/her account, the page could say, "Congratulations, you have created an account with Connect for Health Colorado" and provide the consumer with instructions on how to log in. This will reduce confusion about whether the user's account information was received.

Task 3: Find a list of the types of information or documents you would need to apply for health insurance.

Results and Reactions

Most participants who attempted this task completed it. Some found the list of documents in the "Individuals and Families—New Customers" section, while others found it on the FAQs page.

Some participants indicated that they would not look for a list like this one on their own. Instead, they would prefer to just begin the application or they assumed that they would not need that much information to complete the application.

Some participants, upon finding the list of documents, noted that the list said it was for those seeking tax credits. They wondered what documents were needed by people who were not seeking tax credits. One participant was not sure if he would apply for financial assistance, primarily because he did not understand what it was..

This still doesn't seem like I would be [completing the task] because this is about financial information, and I don't know if I would apply for financial aid. [Reads the top of the sheet] This might apply to me. I'm not familiar with these tax credits.

(CO14, 42-year-old white male, new enrollee)

Recommendations

Connect for Health Colorado may want to consider the following types of changes to help consumers better understand the tax credits/financial assistance and how financial assistance relates to enrolling in a health insurance plan:

- Revise the lists to differentiate between the information needed to apply for financial assistance and the information needed to enroll in health insurance.
- Provide a concise explanation of tax credits and how the financial application relates to enrollment.
- Provide information on what consumers should consider when making the decision to apply for financial assistance.

Task 4: Find information about how to appeal a decision from the Marketplace.

Results and Reactions

Most of the participants attempting this task completed it and most found the information by looking on the FAQs page and locating the Q&A page titled, "I don't agree with my eligibility results. How do I

appeal?" Most were dissatisfied that more information on appeals was not provided. The first thing that some participants noticed was a phone number, and they did not want to call someone. Others said they expected to find more information on the appeals process or what information they needed to gather to make an appeal. One participant noticed that an appeal form was mentioned and clicked on the link provided, but he was surprised that it did not take him directly to the form. Instead, it took him to a page with a list of documents on which the form could be found.

There's a form you would download and complete [clicks on the link].... I don't think is the right form either. Oh, the appeal form is at the bottom. If you're going to appeal, I would think this is the first form you should see, not at the bottom.

(CO22, 44-year-old Hispanic male, new enrollee)

Recommendations

Connect for Health Colorado may want to consider the following types of changes:

• Add information to educate consumers about the appeals process, such as what steps they should take to get started, how long it will take, and what information they need to provide. Also, consider adding a hyperlink to the appeals form instead of the page on which the form can be found. This will provide consumers with the information they expect to find.

Task 5: Determine your eligibility to receive financial assistance to purchase the health insurance.

Results and Reactions

Although seven participants attempted this task, only three were able to complete it during the testing.¹⁵ The shared eligibility application for financial assistance has approximately 31 screen pages for a single person, and more for households with multiple people.

Participants struggled with the number of questions in the shared eligibility application and the amount of time it took to complete. Several participants indicated they would not have enough time to complete the application in a single sitting, and some were not sure they would return to complete it. Some participants said the application asked for the same information they provide through their taxes, and they would have liked for information to automatically populate from their taxes. Some also said they wished that the application pulled more information from their account creation (e.g., address), so they did not have to enter it again.

It's at 0 percent and I'm still at start...this is going to be a process. I would make sure I had at least an hour to sit down. I have a one-year old and three-year old. If it wasn't a time when my daughter or son was at school or at a nap, I would make sure I had the time to concentrate on this....

(CO11, 28-year-old African American female, new enrollee)

¹⁵ On the second and third days of testing, AIR prioritized this task to allow respondents to have more time during the session to attempt to complete it. Two of the three participants completed the task on the second and third days of testing.

Participants were able to easily navigate the website to start the application. However, participants had difficulty understanding some of the questions and using some of the functions in the application. Some of the issues included:

Content Issues

- Who is helping you? This page asked participants whether an agent or broker was helping them with the application. Most participants were confused by this. Some thought they had to identify an agent or broker in order to proceed. Most did not see the instructions on the top of the page that said, "If no one is helping you, click 'Save and Continue."
- About your application: Application location. This question asked the participant to identify where he/she is applying from. Options included childcare provider, county offices, home, etc. Most participants were confused by this question. Some said they thought they would see drop-down options to indicate their county of residence. Some did not understand why this information was needed.
- Reasons for enrolling outside of open enrollment. This question asks the participant to select the reason(s) for shopping for health insurance outside of open enrollment. There is no option to indicate "does not apply" or "not applicable." Most did not understand why they were being asked this question during open enrollment or what they should do if they didn't have one of these events. Participants thought they had to select an answer to this question.
- Program selection: medical assistance or none. The question asks the participant to select the
 box for each program they would like to apply to: medical assistance or none. Most participants
 did not understand what this question was asking for and were unfamiliar with the term "medical
 assistance" (see figure 4). Some were unclear about whether this was one question or two
 separate questions. Some received an error message after selecting both boxes, since only one
 option can be selected.
- Error messages. Error messages were displayed with a "warning" box at the top of the page. Some participants did not easily see the error message. Some suggested that it would be helpful if the exact location of the error were highlighted in the webpage, rather than describing the location of the error at the top of the page.
- Exemption to the requirement to purchase health insurance. The question asks, "Does this person have an individual shared responsibility exemption?" Some participants said they did not understand this question and did not know what such an exemption was. One person read the information available by clicking on the question mark button, but was not helped by the explanation. Some said they would have to Google the terms to understand the question.

Figure 4. Participants Did Not Understand the Program Selection Question

Website Function Issues

@ 2014 @ 2015

- Where you live: Separate street # and street name. The application asks the participant to indicate where he/she lives. There are two separate fields for the street number and the street name. Most participants did not notice this and would try to type their street number and street name in the same field. Some did not understand this was a problem until they received an error message.
- County button. The drop-down menu for the question "in what county do you live?" did not activate after the participant typed in their ZIP code. Participants were not able to select a county until they tried to proceed to the next page and received an error message for not completing that field.

Recommendations

To address the issues that participants experienced, Connect for Health Colorado may want to consider the following types of changes:

- Review the shared eligibility application questions to determine which, if any, are not critical for Connect for Health Colorado to collect and can be removed. For example,
 - Could "Application Location" be removed?
 - Could the number of questions about "Who is Helping You?" be reduced?
 - Could "Reasons for Enrolling Outside of Open Enrollment" only be included when it is outside of the open-enrollment period?
 - Could some fields pre-populate with information from account creation or other sources (e.g., address)?

These changes will help reduce the number of questions in the shared eligibility application and the amount of time it takes consumers to complete it.

• Add screener questions, when applicable, so that only consumers who respond with an affirmative receive more detailed follow-up questions. In the "Who is Helping You?" section, have a screener question such as "Is anyone (e.g., agent/broker, guide, counselor) helping you with your application?" If the person selects "yes," then he/she would see follow-up questions about the person's name and license number.

- Clarify some of the terms within the application, including: "individual shared responsibility exemption" in the Exemption to the Requirement to Purchase Health Insurance question, and "medical assistance or none" in the Program Selection question. Provide a brief in-text definition of these terms using a different font or italics to help the consumer understand the question.
- Add radio buttons instead of check boxes when people should only select one response option. For example, this change would help people select only one choice in the Program Selection question.
- **Highlight the exact location of each error** (e.g., highlight the field with the error in red or yellow) using inline error messages to draw attention to the location of errors. ¹⁶
- Resolve the malfunctioning "county" drop-down list that did not function properly.
- Collapse the "Where You Live: Street # and Street Name" into a single field. This may reduce the number of errors consumers receive while completing the application.

Task 6: Find and compare the features of at least two of the health insurance plans that you think might be a good fit for you.

Results and Reactions

All participants attempting this task were able to access the list of health plans, and most were able to compare the features of two plans in order to complete the task.

The health plan result lists tended to load slowly on both the UAT and the public site, but the UAT was particularly slow. Most participants commented on this slow speed, and some expressed frustration. All participants looked at the list of plans and said that cost was important to them. Most began by reviewing premium costs, and some also considered deductible costs. Some of those reviewing deductible costs expressed concern about selecting a plan with a high deductible because if they had a medical emergency they would owe a large amount at once.

I don't mind paying out of pocket to go to the doctor. I would worry about things that would be extremely expensive, like hospital stays.

(CO16, 39-year-old white female, returning enrollee)

Some noticed the plan metal levels, commenting that they did not understand what they signified; some decided it was best not to pick bronze plans. One participant decided to review silver plans because she did not want "the best or the worst." Participants did not seem to connect the metal levels with how much they would have to pay for their monthly premiums and out-of-pocket expenses for services. But some said they would like to know how much they would pay out of pocket during the year and were not sure if there was a type of plan that might be best for them. One participant said that she would call a service representative for assistance.

I'm math challenged, so I'd need someone on the phone to help me figure out which of these three is better for me. This one is \$400 a month with no deductible but this one is \$200 a month with a \$6250 deductible.

(CO17, 48-year-old African American female, new enrollee)

¹⁶ Enroll UX2014. (2012). A new standard for public and private health insurance enrollment: Design specifications manual. Retrieved from: http://www.ux2014.org/deliverables

Filtering the list of plans was problematic. Some participants used filters to narrow the list of plans, but many people had difficulty using them. Participants experienced a variety of problems, including:

- Not being able to adjust the sliders to the desired dollar amount because the range of values was large (e.g., \$0 to \$20,000 for monthly premium)
- Not realizing that the sliders were two-sided. Many assumed that the left side of the slider was setting a maximum filter value, but it was set a minimum value. For example, a participant might desire a maximum monthly premium of \$350, but moving the left side slider to \$350 limits the results to plans with premiums that are \$350 or more.
- Not realizing that the user needs to press the "apply filter" button to update results
- Having difficulty locating the "apply filter" button
- Choosing desired criteria and then applying filters, only to learn that no plans fit the desired combination of criteria

Some users commented that they would like the list of plans to update as they selected filter options.

I have to go back to the top to apply the filter. I like that Kayak just does it automatically. I wish it would change the [list of plan] options immediately as I make filter changes.

(CO15, 31-year-old white female, new enrollee)

The "compare X plans" button was difficult for some to locate. When reviewing plan options, most participants attempted to use the "compare plans" feature for a side-by-side comparison of plan details. However, some had difficulty locating the "compare X plans" button, located at the top-left side of the plan list, and one person was not able to find the button. One participant repeatedly hit the "save and continue" button prominently displayed at the bottom-right side of the page during his attempt to view a side-by-side comparison. When asked about the button's location, participants suggested that it be moved to the right side of the page, either at the top or bottom of the list of results.

Some participants were unfamiliar with terms used to describe plans. While some said they were familiar with the terms used to compare plans, others admitted that they were not familiar with all of them. The unfamiliar terms varied by person, but some of the terms were essential health benefits (EHB), exclusive provider organization (EPO), tier, combined deductible, monthly cost value, annual maximum cost, level of coverage (platinum, gold, silver, bronze), and coinsurance. Some said that they would like an explanation of the terms on the page, and that if they were comparing plans in real life (not part of usability testing), they would seek help from a variety of sources (e.g., family members, online searches, customer service representatives) to confirm they understood the information before they selected a plan.

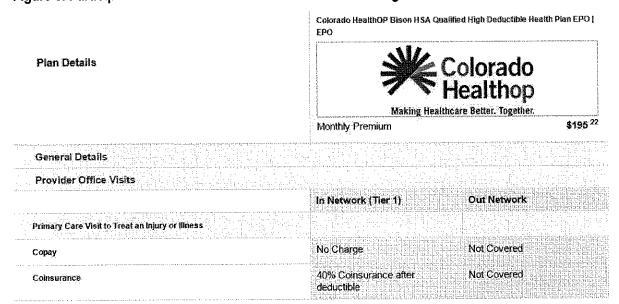
I don't want to agree with something that I don't know what it means.... I want them to define these terms.... There should be a study guide that would tell you what an EPO, HMO is.

(CO11, 28-year-old African American female, new enrollee)

Not knowing the meaning of the term "coinsurance" led some participants to believe that out-of-pocket costs for a plan were lower than they were. The facilitator asked some participants about the meaning of "coinsurance." Rather than understanding it to be an out-of-pocket cost to the consumer, they thought it was a cost to the insurer that only applied in situations where the insured person was covered by more

than one plan, such as a spouse's plan. When these participants reviewed details for plans that required coinsurance, as in figure 5, they looked at the copay for a service, saw "no charge," and ignored coinsurance costs. This misunderstanding could have led participants to pick plans with higher than anticipated out-of-pocket costs.

Figure 5. Participants Unfamiliar With the Term "Coinsurance" Ignored Those Costs



Some participants were confused by the "facilities" category on the plan details page. Most participants mentioned they were interested in learning which providers were participating in plans. When some looked at the "facilities" category under plan details (figure 6), they were surprised to see the costs of care at hospitals, outpatient centers, and skilled nursing facilities. One person expected emergency department and urgent care visits to be listed, and others expected to find a list of in-network doctors or facilities.

Figure 6. Plan Details for the Facilities Category

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Coinsurance	No Charge after	Not Covered
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Recommendations

To address the issues that participants experienced during testing, Connect for Health Colorado may consider making the following changes to the site:

For the Health Plan List

- Optimize the speed at which health plan results load. One possible way to do this is to render results in smaller batches as they are found. This may decrease the likelihood of consumers becoming frustrated while shopping.
- Make the filtering features easier to use. Consider making the plan list update as users select filter criteria, since some users expect this to happen. If this is not changed, consider moving the "apply filter" button to the bottom of the filter options, where users are more likely to see it after they finish reviewing options. For filter sliders, users would benefit from having a price range customized to their results. This would give them a snapshot of the range of costs available to them and would allow improved accuracy in setting the desired dollar amount.
- Reposition the "compare X plans" button. The "save and continue" button was prominently displayed on the right side above and below the plan list. This overshadowed the "compare X plans" button on the left side above the plan list. In testing, most participants wanted to use the "compare plans" feature after reviewing the list, so it may be easier for them to locate on the top and bottom of the right side of the page, since the right side is a location that they seem to associate with the next step.

For the Plan Details

Connect users with insurance term definitions and examples. Many users could benefit from having definitions and examples of insurance terms easily accessible while they compare plans. This could be implemented in a variety of ways, but it would be ideal to add them directly on the page. The Connect for Health Colorado Glossary of Terms and Healthcare.gov Glossary include definitions to many of these terms. When possible, replace confusing terms with plain-language

terms. In addition, include a link to the "Glossary of Terms" from within the "plan compare" pages.

- Explain the meaning of the metal levels. Participants did not understand the meaning of the metal levels. To help consumers understand the total costs of plans, it would be helpful to explain on the "plan compare" pages the meaning of the metal levels. It may also be beneficial to provide an example scenario for how a consumer's total costs would compare between bronze, silver, gold, and platinum plans. Explaining numbers and calculations clearly through examples that break down calculations into simple steps can be helpful for consumers. ¹⁷
- Revise the "plan details" table to indicate when cost-sharing charges "do not apply" as opposed to have "no charge." Most plans have either copays or coinsurance for a particular type of service. For plans that had coinsurance rather than copays, some participants only noticed the "no charge" that appeared in copay rows while ignoring the costs listed in the coinsurance rows. To help consumers understand the cost-sharing structure of each health plan, use "does not apply for this plan" when the feature is not applicable to the health plan and "no charge" when the feature is part of the plan but there is no charge associated with the service.
- Add the "provider look up" button to the "plan details" page. Participants were interested to know which hospitals and doctors participated in plans. While the plan list can be filtered by providers, some users were also seeking provider information on the "plan details" pages.

Task 7: Select the health plan that would be best for you.

Results and Reactions

All seven of the participants attempting this task completed it. Three did not attempt due to time constraints. Most participants selected from the two plans they had compared in the previous task and made a choice relatively quickly. Some participants said that, in real life, they would have sought advice or done more research before making a decision. It seemed that most decided more quickly because during the testing there were no consequences to their selection.

When explaining their selection, all participants named some element of cost as the deciding factor in choosing that plan. Participants discussed cost in a variety of ways, and most took their current health and history of health care services utilization into account when considering the total cost of the plan. Some weighed the tradeoffs of choosing a higher monthly premium versus a higher deductible. One participant said she would prefer a plan with a lower deductible because it would be difficult for her to pay the full cost of a high deductible at one time, which could occur with a medical emergency. Another participant said he considered the prescription costs shown under plan details when deciding.

I would pick the Kaiser plan.... The monthly premium is less. I would pay 30 percent coinsurance after the deductible. So, overall, it's cheaper. I noticed that Kaiser had generic drugs for \$20 when they were free with Access, but I think I don't use many prescriptions, so I would still save in the long run.

(CO20,38-year-old white Hispanic male, returning enrollee)

¹⁷ McGee, J. (2010, September). Understanding and using the "Toolkit Guidelines for Graphic Design" toolkit for making written material clear and effective (CMS Product No. 11476). Washington, DC: U.S. Department of Health and Human Services, Centers for Medicare & Medicaid Services, https://www.cms.gov/Outreach-and-Education/Outreach/WrittenMaterialsToolkit/index.html?redirect=/writtenmaterialstoolkit/

Some participants also considered physician choice when selecting a plan. Some wanted an insurer that offered its own doctors in-house. Others said they would like a plan that allowed them to continue to see their current doctors. One participant said that it was important that she could see her doctors with the new plan because they knew her health.

For those using the UAT site, the task was complete once the participant added the plan to their shopping cart; for those using the public site, the task was complete once the participant verbally selected the plan. The concept of putting a plan in a shopping cart seemed to be familiar to participants. However, one participant had difficulty, because she did not easily see confirmation that the plan had been successfully added to her cart. When on the compare plans page, she attempted to add the plan to her cart several times before returning to the plan list and seeing an icon that said "remove from cart" which helped her realize it was already in her cart.

Recommendations

Participants did not encounter any major problems that would require changes to the site. However, based on the lessons learned from this task, Connect for Health Colorado may consider taking the following actions:

- Add in a measure of cost at time of care that accounts for the plans' covered benefits and anticipated health care service use. If such a measure is not available, consider adding plan averages for low or high service use in addition to premiums. This would help consumers get a better sense of the total costs for each insurance plan, which would help them make a more informed decision when selecting a health plan.
- Clarify when consumers have a plan in their shopping cart. Change the color and/or shape of the "Remove from cart" button to visually distinguish it from the "Add to cart" button. Another option is to add an icon to indicate that this "Plan is in cart."

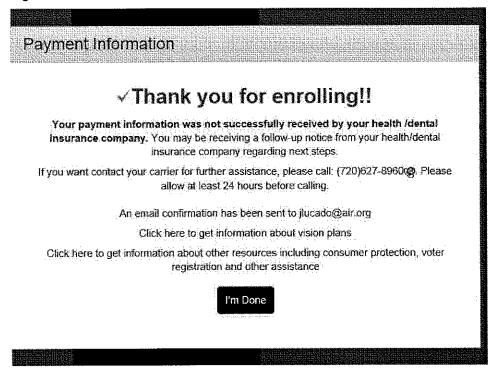
Task 8: Complete the enrollment process.

Results and Reactions

Two participants attempted this task and one participant completed it. The others didn't attempt mostly due to time constraints but one participant was logged out of the site and was not able to get back to the enrollment page. The one participant who completed this task, a 48-year-old female and new enrollee, was frustrated primarily because the only payment options were sending in a check or money order. She hoped to see an online payment option. Furthermore, the "Thank you for enrolling" page that popped up upon completing enrollment stated that her payment information was not received, and she was uncertain about whether this meant Connect for Health Colorado did not receive her enrollment information (figure 7). The current message states, "Your payment information was not successfully received by your health/dental insurance company. You may be receiving a follow-up notice from your health/dental insurance company regarding next steps."

¹⁸ Pacific Business Group on Health. (2013). Consumer choice of health plan decision support rules for health exchanges: Top 5 rules for decision support, and strategies to bridge the gaps [Issue Brief]. Retrieved from: http://www.pbgh.org/key-strategies/engaging-consumers/216-supporting-consumers-decisions-in-the-exchange

Figure 7. Confirmation of Enrollment Screen



The other participant was not able to complete this task because he was logged out of the system when he tried to check out. This participant did not notice the shopping cart button that is located in the top banner and suggested one should be placed in the top-right corner of the page, similar to an online shopping website.

I wanted to see a cart in top-right corner...would have thought when you click on it, it would bring you to checkout page.

(CO20, 38-year-old white Hispanic male, returning enrollee)

The participant also had difficulty finding the checkout button, which was on the left-hand side of the page. It was not intuitive to him that it would be located there.

Recommendations

Connect for Health Colorado may consider taking the following actions to help users to complete the enrollment process smoothly and easily:

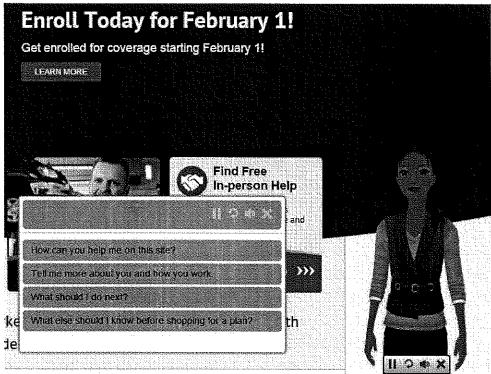
- Add additional text to the "thank you for enrolling" screen that acknowledges that their application was submitted and explains the next steps of enrollment. For example, this screen could state: "We have received your application. Your health plan carrier will notify you by email/postal mail and provide you with information on how to pay your monthly premium. You will not be enrolled in the plan you selected until your insurer receives your first payment."
- Make the shopping cart in the top banner easier for users to notice. This will help consumers more easily navigate to the checkout page and complete enrollment.

Task 9: Find out where you could get help if you were using this website and had questions.

Results and Reactions

Participants were easily able to learn how to get assistance by phone or in-person from the homepage. Most said they were likely to seek help via phone or online (i.e., chat feature or information on the site) before seeking in-person help. However, no one found the site's chat feature. Of those participants interested in online help, one said they would attempt to use the Avatar Kyla, but a few participants did not think Kyla would be useful or did not want that level of "hand-holding." One participant thought she would be able to type a question to Kyla that would connect her with an online chat feature, since only a few options pop-up when you click on her (see yellow box in figure 8).

Figure 8. Kyla Offers Assistance on the Connect for Health Colorado Homepage



When reviewing the "In-person Assistance" page, participants were not sure what differences existed between the three types of help (enrollment centers, brokers, health coverage guides). Some worried that brokers might try to steer them to a plan that was not the best fit because the broker might have some financial incentive. However, participants seemed to perceive brokers as knowledgeable and able to help. One participant believed a broker would be a more knowledgeable source of help than a customer service representative.

If you are calling yourself a broker, I hope you are experienced enough to tell me right away what I need. Instead of me taking like 8 hours, they would take 10 minutes. It seems like they would know. But then I wonder if they are getting a commission for what they're signing people up for, so maybe I would call the help line and the broker and compare [their recommendations].

(CO17, 48-year-old African American female, new enrollee)

A few participants used the search bar at the bottom of the homepage when seeking information for other tasks. They were confused by the results that popped up. During Task 4, several attempted to search for "appeal" and were disappointed that they did not see more relevant results from the site.

I would go to the search bar now and type "appeal." When I went there, I noticed there is a U.S. Court of Appeals Ruling on Subsidies. That's not helpful. It looks like it's a Google response. I see on the right-hand side there's a link on how to appeal. This isn't the way I would want to encounter the information.

(CO15, 31- year-old white female, new enrollee)

Recommendations

Connect for Health Colorado may consider taking the following actions:

- Add a link to online chat in the button in the middle of the homepage that currently says, "Find free in-person help." Rename this button to something such as "Get Help" and include information on online, phone, and in-person help. This will help users find the online chat function much easier.
- Consider allowing Kyla to direct users to the online chat feature or the FAQs page. This would allow users to receive instant results on their questions. Many participants mentioned online assistance was easier and quicker than phone or in-person assistance. Though many of the participants did not find Kyla to be a helpful method of seeking assistance, it is possible that users would consider using her if she quickly routed them to online chat or FAQs.
- Modify the search feature on the homepage to feature relevant results from the Connect for
 Health Colorado site and consider moving the search bar to the top of the page. This will
 help users to easily find the answers they are searching for, instead of being confused by results
 that direct them to information on other websites. By moving the search bar to the top of every
 page, users will not have to scroll down on the page to find it.
- Consider adding a short, bulleted summary on the "In-person Assistance" page to define the three types of in-person help available (i.e., enrollment centers, brokers, and health coverage guides). This will help inform users on their different help options.

Task 10: Find a list of frequently asked questions (FAQs).

Results and Reactions

Most participants were able to find the list of FAQs; however, some found it with ease and others found it with some with difficulty. Participants who found the list of FAQs quickly and easily mentioned there were too many topics listed on the page. They preferred a narrower list of categories. They also thought the font size of the categories was too small and suggested using a larger font. However, not all participants thought the FAQs page had too much information; one participant liked that a lot of information was provided on one page.

Among those who had difficulty finding or did not find the FAQs page, participants tended to click on the "Questions" link under the Brokers heading at the bottom of the homepage (figure 9). This page is to assist brokers with questions they have, however. Two participants described why they had trouble finding the FAQs page:

On other websites, I go to the bottom. I go to the bottom and see the "questions" here.

(CO20, 38-year-old white male, returning enrollee)

I'm under "Broker," and I'm going to "Questions." That's not what I need. I'll click on "Get Help" again. "At Enrollment Center," OK. So this gives me phone numbers for some people. I could call and see if they could answer on the phone. I would ask Avatar [Kyla]. She pointed up here on the scrolling banner. I'll click on this picture which takes me back to this same page. I'll click on Kyla again. [After Kyla finishes talking] "Ok, look, connect me with an in-person assister. [clicks] Now I'm back at this page again! I thought I had landed somewhere."

(CO17, 48-year-old African American female, new enrollee)

Figure 9. The Bottom Banner of the Connect for Colorado Homepage



A few participants were looking for the words "Frequently Asked Questions" instead of the abbreviated "FAQs," so even when they went to the "Resources" header at the top of the homepage, they did not see the FAQs listed there (figure 10).

Figure 10. Resources Listed on the Connect for Health Colorado Homepage



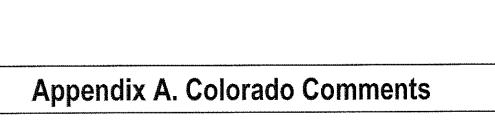
Recommendations

Connect for Health Colorado may consider taking the following actions to help users locate the FAQs page more easily:

- Include a "help drawer" on the top-right side of all webpages that includes access to the Frequently Asked Questions, as well as the glossary and online chat. In addition, spell out the term "Frequently Asked Questions (FAQs)" rather than using only "FAQs."
- Rename the "Questions" under the "Brokers" heading on the bottom of the homepage to something such as "Questions for Brokers" to clarify that this is not the general FAQs link for consumers.
- List the FAQs webpage as the first returned result when consumers type "FAQs" in the search box on the homepage.
- Have the Avatar Kyla direct users to the FAQs page.
- List "General Information" and other most popular consumer topics to the top of the FAQs page (rather than "Carrier Support" and "Carrier Team Questions" at the top of the page). This could help consumers find their topics of interest more quickly.

¹⁹ Enroll UX2014. (2012). A new standard for public and private health insurance enrollment: Design specifications manual. Retrieved from: http://www.ux2014.org/deliverables

Appendices



Staff from Connect for Health Colorado provided verbal feedback to AIR during a debrief session held on February 2, 2015. The feedback is summarized below.

Requests for clarification:

- We noticed the term "some" was used to describe the number of people who did or said something. How do we interpret that term?
 - AIR Response: AIR explained the qualitative analytical methods used and referred to the methods described in appendix C.
- Will there be a best practices report? We would like to know if a state is doing something well and it would be helpful if we could talk with them.
 - AIR Response: AIR explained that there will be a global summary report once all testing is complete. AIR is also now working with the states to schedule an informal conference call where states can share their best practices.
- For the word cloud, is it possible to differentiate which words were used to describe which parts of the website? We have different vendors. One is responsible for the shared eligibility application and shopping experience and the other is responsible for the other parts of the site. It would be helpful to know which parts the comments pertain to so that we can share this feedback with the vendors.
 - AIR Response: AIR added more details to the "Words That Describe Participant's Overall Experience" section in Draft Work Product Version 2.
- For Task 5, when you write about the "eligibility application," do you mean the "shared eligibility application"?
 - AIR Response: AIR revised the text to use the term "shared eligibility application" in Draft Work Product Version 2.

Responses to report findings for Task 6:

- It was noted that plan options loaded at a slow speed. We believe this to be an effect of the UAT environment. We have not seen that problem in the production environment.
- The price ranges shown on the sliding filters have been adjusted to correspond with the highest and lowest values for the plan options available in the search results.
- With regard to the recommendation to incorporate more definitions of terms, there had been more included last year. We are not sure where those definitions went.
- In response to the recommendation to clarify the term "no charge" that appeared on plan details pages during testing, a database change has occurred and this term is clarified on the production site.

Appendix B. Testing Guide

Colorado Website Usability Testing Guide

Testing Materials

- Laptop for testing
- Laptop for note-taking
- Audio recorder and extra batteries
- Interviewer clock
- Pens and notepads in each testing room
- Information sheet
- Interview guide
- Incentive payments

Procedures for Obtaining Informed Consent

As interviewees arrive, greeter should have them read the information sheet (if not enough time, interviewer should do this prior to starting). Give each person a copy of the form to keep.

Testing Goals

- 1. *Trust of website* Who do respondents think is providing the information on the website? Do respondents trust the source of the information? Do they trust the information? Do they trust the processes? What would improve their trust of the web site? What would improve their trust of the processes (e.g., applying for a subsidy, enrolling in a plan, comparing plans)?
- 2. *Navigation of site* Is it easy for respondents to find the information they need? What changes would improve their ability to navigate the site?
- 3. *Understanding and application of content* How well can respondents understand and use the information as it is presented? How well do they understand and interpret the information? How well can they apply the information to their personal situation and help them achieve their purpose or goal (e.g., applying for a subsidy, comparing and choosing a plan)? What changes to display or text would improve their understanding?
- 4. *Ability to act* What do respondents plan to do with the information? What influences their ability to act on the information presented in the website? What other information or supports do they need to take action?
- 5. General response to the site What information on the site is of greatest interest to respondents? What do they like about the site? What don't they like? What would they want to know or do on the site?

Timing: 90 minutes total

Approximate time		Topic	Tasks	Elapsed time
5	A. Bacl	kground	NA	5
5	B. Ope	ening	NA	10
3	C. Publ	lic home page	Task 1: Purpose of the website.	13
7	D. Indiv	vidual UAT Site	Task 2: Account creation.	20
20	E. Eligi	ibility	Task 3: List of information or documents needed to apply for health insurance. Task 4: Does not apply. Task 5: Appeals. Task 6: Eligible for financial subsidy. Task 7: Eligibility notice.	40
20		npare and Choose ealth Plan	Task 8: Find health plans. Task 9: Select health plan.	60
20	G. Enro	oll in a Health Plan	Task 10: Apply for health insurance.	80
5	H. Help	Function	Task 11: Get help. Task 12: Find FAQs.	85
5	Closing		Task 13: Word search	90

Key Interview Questions and Probes

Think aloud reminders:

- Remember to tell me your thoughts and reactions as you're looking at the webpages.
- Can you tell me what you're thinking as you are working on the task?

Track where and what participants are looking at:

- What do you see first?
- Can you show me which part you were looking at when you got that reaction?
- Where are your eyes going? What are you looking at?
- What are you looking at now? What are your thoughts?

To elicit further information:

- And you say that because...
- How so?
- In what way?
- Tell me more about that
- Remember, there isn't any right or wrong answer. I just want to know your honest opinion. That's what will help in making improvements to this website.

{Probe on significant non-verbal communication, smiles, eye-rolling, etc. Don't over-probe non-verbal communication—i.e., don't probe to the point that it makes participant self-conscious}

[Interviewer begins reading intro here]

Background 5 minutes

- Thank you for agreeing to do this interview. My name is [NAME] and I'll be talking with you today. [INTRODUCE NOTE-TAKER]
- I work for a non-profit research organization, [American Institutes for Research].
- We'll be here about 90 minutes today. We won't be taking any formal breaks, but feel free to let me know if you need a break to go to the restroom [DESCRIBE LOCATION] or to get something to drink.
- Our discussion today is part of a project sponsored by the Centers for Medicare & Medicaid Services, a federal government agency that coordinates with States to set up Health Insurance Marketplaces, expand Medicaid, and regulate private health insurance plans.
- Because of the Affordable Care Act, which you may know as Obamacare, people can purchase health insurance plans through what's called a Health Insurance Marketplace. Today we'll be talking about a website developed by Connect for Health Colorado. The website is designed to help some individuals purchase health insurance.
- We would like to learn from you how the website design can be improved.
- We will ask you to perform a series of tasks. We will observe you as you are doing the tasks on the website to get a sense of how well the website is working. I'll ask you to tell me what you are thinking as you work on each task.
- I will try to keep silent when you are doing the task, to avoid influencing what you do. So if you ask me questions, I may not be able to answer, though I will try to help if you get really stuck.
- Once you are finished with the task, we will ask you questions so we can understand how to make the website better.
 - We will ask you questions to better understand your motivation behind making selections on the website. We are <u>not</u> interested in your (or your family's) personal health information. We just want to understand your thought process when viewing information on the website.
- Remember that we are <u>not</u> testing you—we are testing the website. My job is just to collect comments about the website. If something is unclear or confusing to you, it's bound to be confusing to other people too. If tasks are confusing, it shows problems with the design of the website (not you).
- I would like to record our discussion today so that I can make sure I capture all of your feedback. As I mentioned before, your full name or identity will not be associated with your comments.
- Everything you tell me will be **confidential**. We won't connect your personal contact information with anything that you say. While you will see us taking notes to record our discussion, within our notes and our final report, you will be known as "Participant n."

Any questions?

- Before we begin I need to obtain verbal consent.
- Did you have the opportunity to look over the information sheet? (If no, review the information sheet with the participant).

Please answer yes or no to each of the following questions.	Yes	No
Do you understand the described project and agree to be interviewed as I guide you through Colorado's health insurance Marketplace website?		
Do you agree to have the interview recorded?		
Do you understand that your name will not be associated with reports or documents related to this project?		.,
Do you understand that you can withdraw your consent at any time and stop participating in the interview without any penalty to you?		

Ground Rules

- Please give us your honest feedback. Our goal is to make recommendations on how make the
 website more easy to use, so the more feedback you offer; the more you are helping us with
 improve the website.
- We have a lot to talk about today, so there may be times when I need to move the discussion along. Please understand that when I ask that we move to a new task, I don't mean to hurry you. If there is time later we can go back to pages you would like to explore more.
- Because we're recording, please try to speak in a voice at least as loud as the one I'm using now
 so that we can make sure the tape is picking up our voices.
- Before we begin, do you have any questions?

Opening 5 minutes

- 1. Where, if anywhere, have you ever looked for information about health insurance?
 - a. Where did you go or who did you talk with to get that information?
 - b. What kind of information did you look at?
 - c. What was most important to you?
- 2. Before today, what did you know about state health insurance Marketplaces?
 - a. Have you ever gone to the Connect for Health Colorado website before?
 - b. If so, what did you use it for?

Homepage 5 minutes

As I mentioned, today we'll be talking about a website that provides information to help people compare and make decisions when selecting health insurance. One way that we figure out how to improve websites is to have a small group of people look at them first so we can find out about any potential problems and fix them.

The way we do this is by having you look at the website and tell us what you are thinking as you look at it. In other words, we want you to talk out loud about any thoughts, feelings, reactions or questions you have.

For example, if I asked you how many windows are in your living room you might think: "Well, my living room and dining room are connected, so there are 6, but I guess the question is just about my living room, so I will say 4." Today, we'd like to hear the thoughts going through your mind. As you do each task, go ahead and talk out loud and tell me what you're looking at, thinking, and what you are reading so we can understand your thought process.

Now, let's begin with the first task.

Task 1: Find and tell me the purpose of this website.

(ALT Description: What is the website designed to do? What can this website help you with?)



[GO TO SBM HOME PAGE AND OBSERVE]

- 1. What do you think are the main things you do or can learn about on this website?
- 2. Who do you think this site is for? (e.g., someone like you? Older persons? Younger persons? Someone with a health problem?)
 - a. What made you think that?
- 3. What were your general thoughts on the homepage?
- 4. What are some words that describe the webpage to you? E.g., clean, simple, confusing. [note: we will give them the word card near the end of the session]
- 5. Where would you want to go to next from this webpage?
- 6. What, if anything, on this page (the homepage) did you find to be confusing or unclear?
 - a. What could improve it?
- 7. Who do you think is running this webpage?
 - a. How did you figure that out?

Task 2: Create an account for this website.

(ALT Description: If you wanted to create an account on this website, how would you do that? Please show me.)

Don't worry, the State has given us a fake information so you do not need to provide your real personal information.

CORRECT PATHS TO CREATING AN ACCOUNT:

Create an account:

Create an Account



[GO TO SBM HOME PAGE AND OBSERVE]

- 1. To what extent was the information located where you expected?
- 2. What, if anything, was confusing or unclear?
 - a. What could improve it?

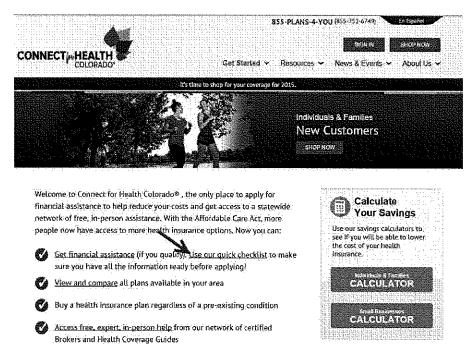
Eligibility 20 minutes

Task 3: Find a list of the types of information or documents you would need to apply for health insurance for you (and/or your family) through the website.

(Alt. Description: Before sitting down at the computer to apply for health insurance, let's say you wanted to know what type of information you would need to apply. See if you can find a list of the type of information or documents you would need in order to apply.)

CORRECT PATHS TO FIND A LIST OF INFORMATION YOU NEED TO APPLY:

1. Click on "Get Started" at top of homepage, then click "New Customers." Click on "Use our quick checklist" under the first bullet on the page.



2. Click on "Learn More" under Individuals & Families – New Customers" on the homepage. Then click, "Use our quick checklist" under the first bullet on the page.3) Click the "Shop Now" button at the top of the homepage. Then click on "Learn More" at the top of the following page. After clicking "Learn More," type "What do I need to enroll?" in the search box. The answer is the first option listed.



[OBSERVE]

- 1. To what extent was the information located where you expected?
- 2. What, if anything, was confusing or unclear?
 - a. What could improve it?

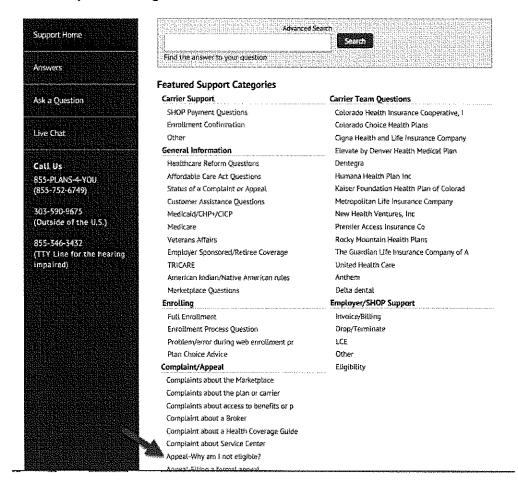
Task 5: Find information about how to appeal a decision from the Marketplace.

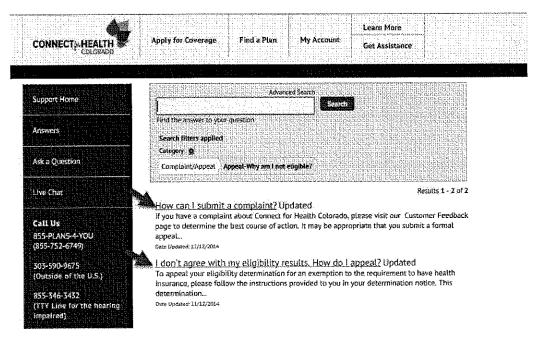
(Alt. Description: Let's say that you have applied for health insurance through the website, and the Marketplace tells you that you are not eligible for financial assistance. However, you believe this is incorrect and that you really are eligible. You want to know how to appeal (or challenge) the Marketplace's decision and let them know you don't agree. Now try to find information on how you would go about this appeal.

To appeal means to tell someone at the Marketplace that you think the decision is wrong, and ask for a fair review of the decision about how much you would have to pay for your health insurance.)

CORRECT PATH TO FIND INFORMATION ABOUT HOW TO APPEAL:

1. Click "Learn More" on the homepage Scroll down to "Complaint/Appeal" and click on "Appeal – Why am I not eligible?"





[OBSERVE]

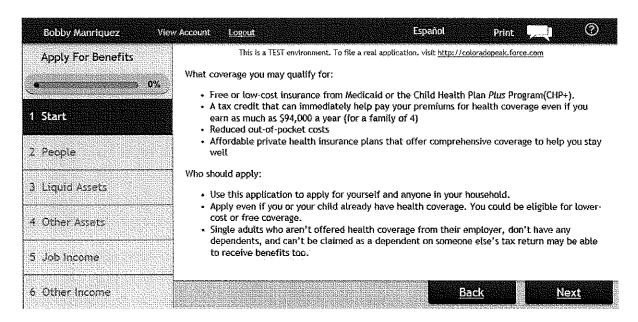
- 1. To what extent was this information located where you thought it would be?
- 2. What, if anything, was confusing or unclear?
 - a. What could improve it?

Task 6: Determine your eligibility to receive financial assistance to purchase the health insurance (get help paying for your health insurance).

(Alt. Description: let's say that you want to get health insurance through this website. How would you find out if you could purchase it through the website? How would you find out if you could get financial help paying for your insurance through the website?)

CORRECT PATHWAYS FOR ELIGIBILITY TO RECEIVE FINANCIAL ASSISTANCE:

- 1. Apply for Coverage→My eligibility
- 2. My Account→My eligibility



[OBSERVE]

- 1. To what extent was this information located where you thought it would be?
- 2. What, if anything, was confusing or unclear?
 - a. What could improve it?
- 3. Do you feel like the information on this page can be trusted? Tell me more about that.

Task 7: In your own words, tell me what this notice tells you [show eligibility notice].

(Alt. Description: You completed the eligibility application on this website. After the application is reviewed, you receive this notice. What is it telling you?)

- 1. What would you use this notice for?
- 2. What, if anything, is unclear or confusing?
 - a. What could improve it?

Compare and Choose a Health Plan

20 minutes

Now, we want to think about comparing the health plans available on the website. You want to be sure that there are health plans that fit your needs.

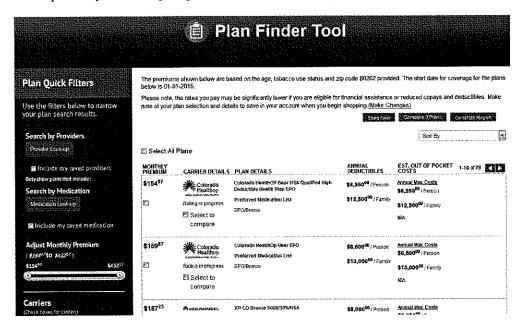
Task 8: Find out what health insurance plans are available to you through this website and compare the features of at <u>least two</u> of the health insurance plans that you think might be a good fit for you.

(Alt. Description: Let's say you want to review the health plan options and compare at least two of the plans to see which one you may prefer to purchase. Show me at least two health plans that you think may be a good fit for you.)

CORRECT PATH TO REVIEW PLANS:

1. Homepage→Find a plan→ Plan finder tool

Participant may use "compare plans" feature or look at "plan details" to compare features



[OBSERVE]

We are now going to ask you some questions to better understand your motivation behind comparing and choosing a health plan. We are <u>not</u> interested in your (or your family's) personal health information. We just want to understand your thought process when viewing these plans on the website.

- 1. To what extent was this information located where you thought it would be?
- 2. What, if anything, was confusing or unclear?
- 3. When you went to shop for and compare plans, did you notice any changes in the look or feel of the website?
 - a. What URL would you type in to log into your account?

- 4. What were some of the main differences between the health insurance plans?
- 5. *What features were the most important to you? What makes them important to you?
- 6. *What types of information about the health insurance plans was missing or not included?
- 7. What terms or words about the health insurance plans were unclear?
- 8. *What could make it easier for you to compare at least two health plans?
- 9. At what points did you feel like you needed assistance?
 - a. How would you prefer to receive this assistance (phone, Web, in-person)?
 - b. What would you ask?
 - c. What makes you prefer to get the information in this way?

Task 9: Now that you have reviewed the different health plans, let's say that you are ready to make a decision and select a health plan. Select the health plan that would be best for you [and your family].

(Alt. Description: think about the health plans that you just looked at and consider which one of them you would select for your insurance. Show me which plan you would pick.)

PATHWAY TO SELECTING A HEALTH PLAN:

1. While already in the plan finder, click on "Plan Details View"

MONTHLY PREMIUM	CARRIER DETAILS	PLANDETAILS	AVEILAL DEDUOTIBLES	ANNUAL MÁX. GOSTS	
\$148 ⁶⁸	Colorado Healthop Rating In progress	Colorado HealthOP Bear HSA Qualified High Deductible Health Plan EPO Preferred Drug List EPO/Bronze	\$6,250 ⁹⁰ / Person \$12,500 ⁹⁰ / Family	\$6,250 [∞] / Person \$12,500 [∞] / Family	Add to Cart

Please review attachments in the Plan Documents section below for additional plan details to inform your decision. Each plan may have specific features, requirements, and age restrictions.

	Out of In Network Network	Out of Network
	in Network Network	NetWork
Maximum Out of Pocket for Medical and Drug EHB Benefits (Total) -	\$6250	Not Applicable
Individual		
Combined Medical and Drug EHB Deductible - Individual	\$ 6250	Not Applicabl
Maximum Out of Pocket for Medical and Drug EHB Benefits (Total) -	\$ 12500	Not Applicable
Family		
Combined Medical and Drug EHB Deductible - Family	\$12500	Not Applicable

^{*} Note: These questions are priority and should not be skipped if time is short.

2. Or while the plan finder, click on "Plan List View"

MONTHLY PREMIUM	CARRIER DETAILS	PLAN DETAILS	ANNUAL DEDUCTIBLES	Annual Max. Costs	1-10 of 79	· 3
\$148 ⁶⁸	Colorado Healthop	Colorado HealthOP Bear HSA Qualified High Deductible Health Plan EPO	\$6,250⁰⁰ / Person	\$6,250⁰⁰/ Person	e d	Ra (5)
an and an and an and an an and an an and an	Rating in progress	Preferred Drug List	\$12,500 ⁰⁰ /	\$12,500 ⁰⁰ /	A	1d Te Cart
	Select to compare	EPO/BRONZE	Family	Family		

[OBSERVE]

- 1. Help me understand why you chose that plan?
- 2. What health plan features were most important to you (and/or your family) and why?
 - a. Doctors or hospitals
 - b. Costs (probe on what types of costs)
 - c. Benefits, such as:
 - i. Prescription medicines
 - ii. Physical, occupational, or speech therapy
 - iii. Home health care or assistance
- 3. What, if anything, was confusing or unclear?
- 4. Do you feel like the information on this page can be trusted? Tell me more about that.

Enroll in a Health Plan

20 minutes

[NOTE: Some sites require user name and passwords to enroll in a plan. If this is the case, we will ask the states for dummy test accounts for the purpose of testing. If we have dummy test accounts, please complete this section with the participant. If not, please proceed to the next section (Help Function).]

Now that you determined whether you are eligible for health insurance, you have selected a health plan, go ahead and ...

Task 10: Complete the enrollment process.

(Alt. Description: Go ahead and get (or sign up for) health insurance.)

Don't worry, the State has given us a fake username and password and you do not need to provide your real personal information.

CORRECT PATHWAY TO APPLYING FOR HEALTH INSURANCE:

1. From the plan finder, Add to cart→Check out→Apply

[OBSERVE]

- 2. To what extent was this information located where you thought it would be?
- 3. What, if anything, was confusing or unclear?
 - a. What could improve it?
- 4. What do you think happens next?
 - a. When do you expect this next step will happen?
- 5. How can you make the first premium payment for your health insurance?
 - a. Who are you paying for your health insurance (who is your insurance company)?
- 6. How did you feel going through this process?
- 7. What, if anything, did you feel like you needed assistance with?
 - a. How would you prefer to receive this assistance (phone, Web, in-person)?
 - b. What would you ask?
 - c. What makes you prefer to get the information in this way?
- 8. Do you feel like the information on this page can be trusted? Tell me more about that.

Help Function

5 minutes

Now we want to focus on the help that is available on the website. (Need to go to public site at this point)

Task 11: Find out where you could get help if you were using this website and had questions.

(Alt. Description: Let's say you are using the website and you run into any type of question, where or how would you get help.)

CORRECT PATHS TO FINDING HELP:

1. Homepage→Resources, In-person help

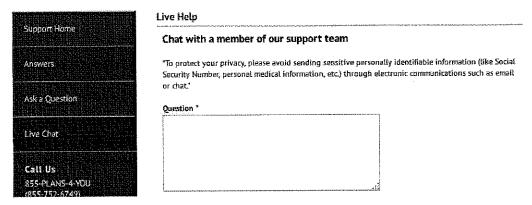


Free In-person Help

Insurance is complicated. That's why we offer a state-wide network of experts who can help you complete your application in person, at no charge. Our certified Brokers and Health Coverage Guides can help answer your questions and find a health insurance plan that meets your health and financial needs.



2. Homepage→Resources, Online help



3. Homepage→Resources, FAQs



[OBSERVE]

- 1. To what extent was this information located where you thought it would be?
- 2. What, if anything, was confusing or unclear?
- 3. How else would you have liked to have been able to get help?
- 4. How would you prefer to get help? (website, phone, in-person). Please explain.
 - a. What would you ask?
 - b. What makes you prefer to get the information in this way?
 - c. 48. What are your thoughts on using the search bar?
- 5. *How likely are you to use the avatar (Kyla)?
 - a. How would you find her to be useful?
 - b. If she is useful, where else would you like to see her? OR If not, why?

Now, please think back to a specific topic that you would have liked to get more information about. This may have been a term that you saw that was unfamiliar or one of the questions that you asked me while you were performing the tasks.

Task 12: Find a list of frequently asked questions (FAQs).

(Alt. Description: You have a question but are not sure where to look to find information about it. You decide to look for a page that shares frequently asked questions so you can look through them.)

CORRECT PATHWAY TO FINDING FAQS:

1. Homepage→Resources, FAQs



[OBSERVE]

- 1. What do you think of what you're seeing?
- 2. What, if anything, is confusing or unclear?
- 3. What else, if anything, could help you find these FAQs more easily?
- 4. What would you use this information for?

Closing 5 minutes

Task 13: Now that you have used the website, can you circle [or select] 5 words that describe your experience using the website [hand word card sheet or cards]?

Before we end, I'd like to give you a chance to share any additional thoughts or comments about the items we talked about today. Was there anything that you didn't have a chance to say during our discussion today or something that we didn't talk about that you wish we had?

Thank you very much for participating in this discussion today. We appreciate your time.

Please circle the 5 words that best describe your experience using the website 20. Thank you!

Accessible	Desirable	Gets in the way	Patronizing	Stressful
Appealing	Easy to use	Hard to use	Personal	Time-consuming
Attractive	Efficient	High quality	Predictable	Time-saving
Busy	Empowering	Inconsistent	Relevant	Too technical
Collaborative	Exciting	Intimidating	Reliable	Trustworthy
Complex	Familiar	Inviting	Rigid	Uncontrollable
Comprehensive	Fast	Motivating	Simplistic	Unconventional
Confusing	Flexible	Not valuable	Slow	Unpredictable
Connected	Fresh	Organized	Sophisticated	Usable
Consistent	Frustrating	Overbearing	Stimulating	Useful
Customizable	Fun	Overwhelming	Straight Forward	Valuable

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²⁰ An alternative approach we may use is to instruct the respondent to do the following: Please select five cards from this pile that best describe your experience using the website.

Appendix C. Methods

Participant Characteristics.

AIR recruited consumers with demographic characteristics of people eligible to shop for and purchase insurance through the Marketplace website. To be eligible for the testing, consumers had to meet the following criteria:

- 1. U.S. citizen or national
- 2. Age of 18 to 64
- 3. Comfortable reviewing a website in English and answering questions in English
- 4. Used the internet in the past three months and have access to the internet either at home or through a public venue such as the library
- 5. Responsible for selecting health insurance for themselves and family, if applicable
- 6. Have not applied or enrolled via the Connect for Health Colorado Website during the fall 2014/winter 2015 open enrollment period for 2015 coverage

AIR recruited 12 consumers for this testing and 10 participated. Two participants did not appear at the scheduled time. Table C1 displays the demographic characteristics of the participating participants.

Table C1. Sample Characteristics (n=10)

Characteristic	Sample
Enrollee type	■ 6 New
	■ 4 Renewal
Eligibility	■ 2 Medicaid
	■ 7 QHP subsidy
	■ 1 no subsidy
Health status	■ 5 Chronic conditions
	■ 5 No chronic conditions
Geographic	■ 6 Suburban
- Andrews	■ 4 Urban
	■ 0 Rural
Gender	■ 3 Male
	■ 7 Female
Average Age	■ 37.9 years
Race	■ 7 White/Caucasian
	■ 2 Black/African-American
	■ 1 Other
Ethnicity	■ 3 Hispanic/Latino
	■ 7 Not Hispanic/Latino
Education	■ 1 High School Diploma or GED
	■ 3 Vocational/Associate's/Some College
	■ 5 Bachelor's Degree

Characteristic	Sample
Education (continued)	■ Graduate Degree
Household size	■ 7 Families
	■ 3 Single

Conducting the Testing.

AIR conducted testing December 2-4, 2014, in Denver, Colorado. The participants used the Connect for Health Colorado User Acceptance Testing (UAT) website for Tasks 2-Create an account, 5-Determine eligibility, 6-Compare health plans, 7-Select a health plan, and 8-Enroll²¹; the remaining tasks were conducted on the public website.²² Participants completed the tasks using either Firefox or Chrome browsers on a PC.

An AIR facilitator, note taker, and observer participated in each 90 minute individual session. Due to time constraints, the facilitator asked the participant to complete a subset of the 11 tasks. The facilitator asked the participant to perform each task and "think aloud" as he/she performed the task. Upon completion of the task, the facilitator asked the participant follow-up questions. The note taker recorded what the participant said and the observer recorded the participant's navigation on the website, non-verbal information, and the time to complete each task. The sessions were audio recorded. The AIR team used standardized templates for the notes, observations, and debriefs after each session. Each participant received a \$75 incentive as a thank you for their involvement.

Analysis.

Following the testing, the AIR team uploaded notes, observation forms, and debrief forms into a qualitative data analysis software (NVivo 10). AIR reviewed this information by task to identify the key issues, which are summarized in this report.

The issues highlighted in this report were selected based on the (a) proportion of participants who attempted the task who had the issue and (b) the potential negative impact on participants' ability to complete the task. To describe the frequency that issues arose, we used terms such as:

- Most: experienced by more than half of those who attempted the task
- Some: experienced by less than half of those who attempted the task

²¹ Due to time constraints, some participants also compared and selected health plans on the public website.

²² The public website was used for the remaining tasks because the information needed for these tasks was located on the public website and not the UAT.