

***Oklahoma Employer/Employee
Partnership for Insurance
Coverage (O-EPIC):***

***Small Business Employer Feedback
as Part of a Continuous Quality
Improvement Process***

November 2005 – June 2006

*The Primary Care Health Policy Division
Department of Family and Preventive Medicine
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Oklahoma City, Oklahoma*

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The Oklahoma Health Care Authority

This report completes contract component 4.2 (c): Prepare a written report detailing the feedback gathered on behalf of OHCA regarding the continuation of the O-EPIC Program, to be submitted no later than March 31, 2007.

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*Oklahoma Employer/Employee
Partnership for Insurance Coverage (O-EPIC)*

**Small Business Employer Feedback as Part of a
Continuous Quality Improvement Process**

November 2005 – June 2006

Executive Summary

“O-EPIC is a wonderful opportunity for companies who could not otherwise afford benefits for their employees.”

*Oklahoma Small Business Owner
August 2006*

Purpose: This report, prepared for the Oklahoma Health Care Authority (OHCA), describes the experiences, questions, comments, and suggestions of small business employers participating in O-EPIC, the Oklahoma Employer/Employee Partnership for Insurance Coverage. O-EPIC is a premium assistance program for income-eligible workers (gross family income up to 185% FPL*) employed in small businesses (25[†] employees or fewer). Previous investigations, conducted during the early phases of the O-EPIC program, yielded four reports, which were submitted to OHCA.¹⁻⁴

This study gathers feedback from small business employers participating in the O-EPIC program during all or part of November, 2005, through June, 2006. These results are intended to contribute to the continuous quality improvement (CQI) of the O-EPIC program.

Background: Figures released recently by the U.S. Census Bureau for 2005 place the number of uninsured Americans at 46.6 million, an increase of 2.9% over 2004.^{5,6} Contrary to popular opinion, 80% of the uninsured are U.S. citizens,^{7,8} and many are middle class, working adults.^{5,7-13}

* FPL: federal poverty level, see Table 1.

†A bill that will increase the size of businesses that can participate in O-EPIC to 50 employees was signed by Governor Henry on June 9, 2006. Implementation is expected to occur later this year.

Between 2000 and 2004, employment-based health coverage declined for working age adults and families across the board.⁶ The number of people covered by their employer has declined steadily from 63.6% in 2000 to 59.5% in 2005,^{9,11} while the size of the workforce has grown by 5.4 million since August 2003.¹⁴ Recent studies have shown that as many as half of young adults between 19 and 24, many of whom are entering the workforce for the first time, may be uninsured. These same studies go on to say that these new workers want health insurance but cannot afford it.¹⁵⁻¹⁸ Yet, America continues to rely "mostly on employers to cover workers."¹⁹

Recent data shows that Oklahoma had the 5th highest per capita percentage of uninsured adults between the ages of 18 and 64 in the U.S. (23.6%). Only Nevada (23.9%), New Mexico (26.0%), Louisiana (26.4%) and Texas (30.7%) had a larger percentage of uninsured adults.

In data released recently by the U.S. Census Bureau, Oklahoma ranked fourth, behind only Texas, New Mexico, and Florida, in percentage of uninsured people (adults and children), averaged over the 3-year period between 2003 through 2005.⁵

For the same period, Oklahoma had the 5th highest number of uninsured workers among the 50 states and the District of Columbia (20.6%).²⁰

With little movement at the Federal level to deal with the health care crisis, many states are taking steps of their own to provide coverage for income-eligible workers.²¹ Oklahoma, thanks to the efforts of state government leadership, implemented an innovative program that combines state and employer efforts with private health insurance products: the Oklahoma Employer/Employee Partnership for Insurance Coverage. Since it began in November, 2005, more than 450 small businesses and 900 employees and spouses* have signed up for health insurance coverage under the O-EPIC program.

This report details the results of a study to gather feedback from small business employers as part of the O-EPIC continuous quality improvement program.

Methods: Methods used for this study have been reported in detail previously,²⁻⁴ and are described briefly here. **Subjects:** Surveys were sent to 360 small business employers who participated in the O-EPIC program during all or part of the period from November, 2005 through June, 2006; 217 (60.3%) of employers contacted completed and returned the survey. **Survey Instrument:** DFPM staff assisted OHCA with the development of a survey instrument. OHCA mailed surveys to 360 employers on July 7, 2006. A copy of the survey instrument is attached (Appendix A). Four types of questions were used to gather demographic data and opinions of O-EPIC to be used as part of a CQI process:

1. Likert scale
2. Estimates
3. Multiple choice
4. Open-ended, narrative

Data Analysis: All raw data from the surveys were entered into Excel spreadsheets and statistically analyzed in a manner described previously.^{2,22-25} The raw data are available by request. Descriptive statistical analysis was done with Excel, and all comparative analysis were done with SPSS V.11, a statistical

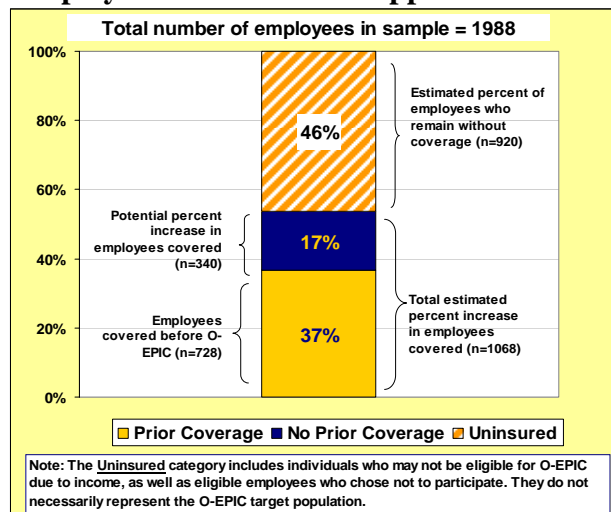
*These numbers are based on the most recent count by OHCA on August 1, 2006, after this study was terminated.

software program. Charts and graphs were created in Excel.

Key Findings

1. In this sample, 728 employees were covered by insurance before O-EPIC (about 37% of the total number of employees in the study sample); employers estimated that an additional 340 previously uninsured workers (about 17% of the total number of employees) would potentially be covered by O-EPIC. This figure includes employees already covered by O-EPIC as well as those who might be eligible and are currently applying for coverage. If all these employees are approved, this would increase the total number of insured within the sample to 1068 (about 54% of the 1988 employees represented) (Figure 1).

Figure 1. Total Estimated Percent of Employees Covered after Approval Process*



*Note that the individuals included in the “Uninsured” category may not represent the O-EPIC target population. The majority of the 920 (46%) uninsured did not qualify for O-EPIC under current eligibility criteria. Most earned over 185% FPL, although based on employer comments, many “just missed” the eligibility cut-off.

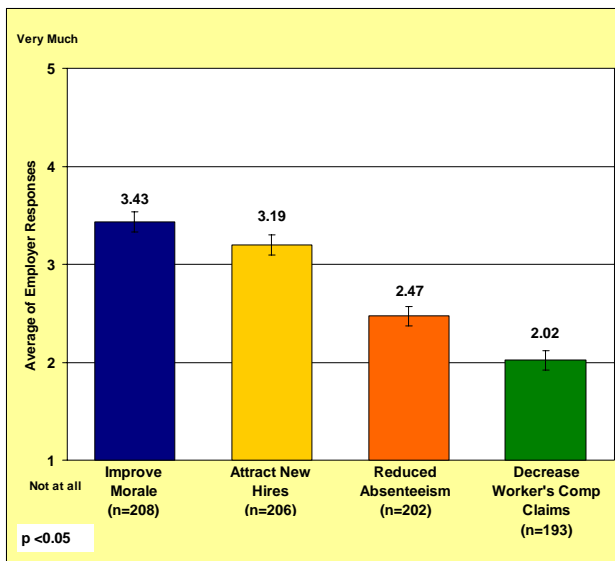
“Many couldn’t apply because they make too much money, which is sad because most make \$20,000 or slightly less--not exactly middle income living.”

2. In this sample, employers rated four potential benefits of participating in the O-EPIC program:

- improving employee morale,
- attracting new hires,
- reducing absenteeism, and
- decreasing worker’s compensation claims.

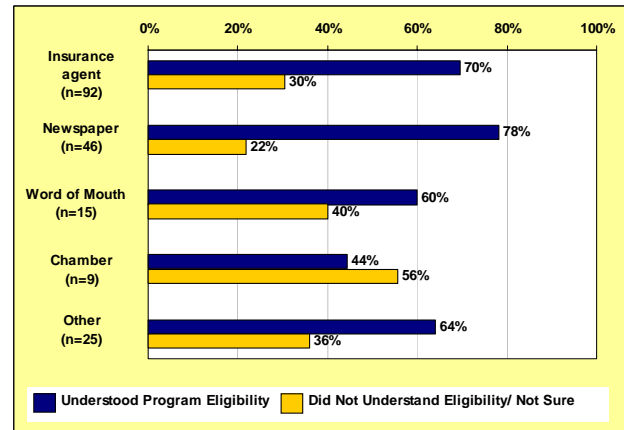
Employers responded that improving morale and attracting new hires were important considerations (average response of 3.43 and 3.19, respectively) (Figure 2). These two benefits ranked higher than “Reduce Absenteeism” and “Worker’s Comp Claims,” and analysis showed that the differences were statistically significant ($p \leq 0.05$).

Figure 2. Employer Ranking of Four Potential Business Benefits of Participation in O-EPIC



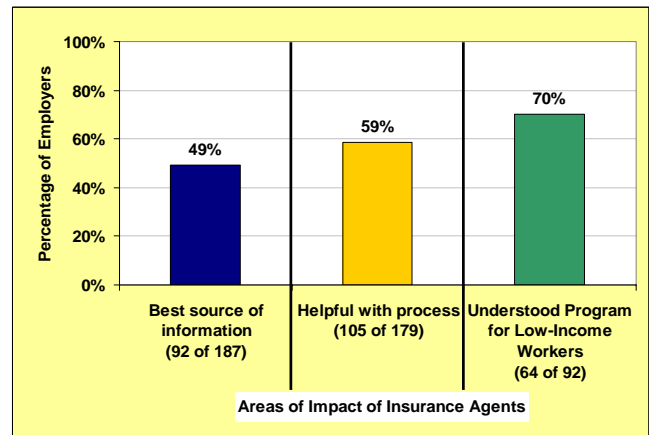
3. In this sample, employers were more likely to understand the income eligibility of the O-EPIC program when information was presented by insurance agents and newspapers, and least likely to understand when information was from Chambers of Commerce (Figure 3).

Figure 3. Employer Understanding of O-EPIC Eligibility by Information Source (n=187)



4. Insurance agents played a major role in assisting small business employers with successful implementation of the O-EPIC program. This held true regardless of the location of the business (urban or rural) and the size of the business (5 or fewer vs 6 or greater). Insurance agents were the major source of information about O-EPIC for 92 of 187 employers sampled, and were more likely to ensure that employers understood the program than if employers got information from other sources. Agents were also rated as the most helpful from among a variety of assistance sources (Figure 4).

Figure 4. Employer View of Impact and Importance of Insurance Agents in Facilitating O-EPIC



Recommendations

1. Employers who responded to this survey believed that participation in the O-EPIC program **improved the morale** of their employees. Studies have demonstrated that improved morale results in improved productivity, which in turn can enhance the financial viability of the company.^{26,27} A marketing campaign with emphasis on this finding could also encourage other small businesses to apply.
2. In this sample, employers also felt that O-EPIC had a positive impact on their ability to **attract new hires**. A marketing campaign with emphasis on this finding could also encourage other small businesses to apply.
3. Small business employers surveyed expressed the need for an increase in the income eligibility limit and in the size of the businesses. A few expressed concerns that they might lose coverage if their business “attracts” new hires and exceeds the 25 employee limit.
4. Employers surveyed appreciated being asked for their opinion of the program. Employers were complementary of O-EPIC program staff, implying that, at a minimum, current efforts should be continued.
5. Employers who responded to this survey stated that the program was easy to administer within their business. Continuing a quality improvement process that includes feedback from employers, and perhaps from employees, will allow the program to keep meeting the needs of the target populations.
6. When applicable, employers in this sample reported that their insurance agents were an important part of their O-EPIC experience. Therefore, OHCA should continue to maintain and build close, positive relationships with insurance carriers and agents/producers (such as the Brown Bag lunches).
7. Continue increasing newspaper, mass media, and other publications about the O-EPIC program. Employers in this sample reported that newspapers are a major source of information about the O-EPIC program.
8. When responding employers selected “Other” as their source of information, they listed radio ads and information transmitted through trade associations. Public service and outreach efforts aimed at these information sources would also seem appropriate and beneficial.

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Introduction

“Without the help of O-EPIC, I would not be able to provide health insurance to my employees. I feel so much better that my employees have health coverage.”

*Oklahoma Small Business Owner
August, 2006*

Purpose:

This report, prepared for the Oklahoma Health Care Authority by faculty and staff of the University of Oklahoma Health Sciences Center (OUHSC) Division of Primary Care Health Policy (PCHP), describes the experiences, reactions, questions, comments, and suggestions of small business employers who are participating in the Oklahoma Employer/Employee Partnership for Insurance Coverage (O-EPIC). O-EPIC is a premium assistance program for income-eligible workers (gross family income up to 185% FPL*) employed in small businesses (25† employees or fewer) which began on November 1, 2005. This study is a follow-up study to investigations conducted during the early phases of the O-EPIC program. Those initial investigations yielded four reports, which were previously transmitted to OHCA.¹⁻⁴

This study examines the experiences of small businesses participating in the O-EPIC program from November, 2005, through June, 2006. These results are intended to contribute to the continuous quality improvement (CQI) of the O-EPIC program.

* FPL: federal poverty level, see Table 1.

†A bill that will increase the size of businesses that can participate in O-EPIC to 50 employees was signed by Gov. Henry on June 9, 2006. Implementation is expected to occur later this year.

Goals of a Premium Assistance Program, such as O-EPIC:

As identified in an earlier study,¹ health care premium assistance programs, such as O-EPIC, are initiated to achieve some or all of the following goals:

- ◆ To extend health coverage to thousands of income-eligible workers and their spouses by supporting privately underwritten employer-sponsored insurance.
- ◆ To reduce the financial impact of rising health insurance premiums on small businesses.
- ◆ To decrease the overall number of uninsured working adults.
- ◆ To reduce dependence on publicly funded health coverage.
- ◆ To improve the overall health of citizens through access to primary care and preventive health services as part of a qualified health insurance plan.

To achieve these goals, buy-in and proactive support of the program by stakeholders is crucial. The three stakeholder groups impacted by implementation of the O-EPIC program are:

1. ***Small business employers.*** Those businesses that employ 25 or fewer full or part-time workers.
2. ***Insurance carriers.*** Insurance companies that are licensed to sell qualified insurance products for small groups within Oklahoma.

3. Employees and spouses. Those workers with family incomes that meet the O-EPIC income eligibility criteria (Table 1).

Table 1. O-EPIC Income Eligibility Levels

Family Size	Maximum Income
1	\$18,130
2	\$24,240
3	\$30,710
4	\$37,000
5	\$43,290
6	\$49,580
7	\$55,870
8	\$62,160

*For families larger than 8 add \$3,400 per person.

SOURCE: Oklahoma Health Care Authority, 2006.

Beginning in November, 2005, researchers with the Primary Care Health Policy Division at the University of Oklahoma Health Sciences Center began assisting the OHCA in conducting a series of studies with small business employers and insurance carriers to gather feedback on the initial phases of the O-EPIC program. Those studies resulted in four reports, which were submitted to OHCA for use as part of a continuous quality improvement (CQI) of the O-EPIC program.¹⁻⁴

The results reported here continue the CQI process by gathering feedback from small business employers 9 months after O-EPIC began.

Background:

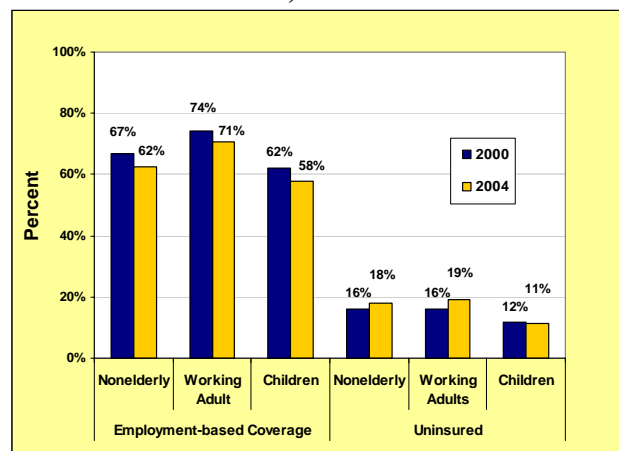
Figures released recently by the U.S. Census Bureau for the year 2005 place the number of uninsured Americans at 46.6 million, an increase of 2.9% over 2004.^{5,6} Many of the uninsured are middle class, working adults.^{5,7-13} Contrary to popular opinion, 80% of the uninsured are U.S. citizens.^{7,8} The erosion of employer-sponsored coverage, caused by the continued increase in their health care costs, is forcing more and more workers and the families into the ranks of the uninsured.⁶ Yet, America

continues to rely "mostly on employers to cover workers."¹⁹

Continued record-breaking – and budget-breaking – increases in health care costs are making it more and more difficult for employers, particularly small business employers (less than 50 employees) to offer affordable health care coverage for their workers.^{5,7-13} High premium costs are compelling small and large businesses alike to increase employee cost shares, and in some cases, to cancel coverage entirely. Increases in cost share, particularly premium contributions, are forcing low- and middle-income workers to reject employer-sponsored coverage, thus increasing the numbers of uninsured.^{5,7-13}

Between 2000 and 2004, employment-based health coverage declined for all working age adults and families across the board (Figure 5).⁶ In fact, the number of people covered by their employer has declined steadily from 63.6% in 2000 to 59.5% in 2005,^{9,11} while the size of the workforce has grown by 5.4 million since August 2003, according to the U.S. Department of Labor.¹⁴

Figure 5. Change in Source of Health Insurance, 2000 to 2004*



Source: Employee Benefit Research Institute.⁶

*Figure does not include individuals or families with public or government health coverage (e.g., Medicaid, VA, etc.)

Recent studies have shown that as many as half of young adults between 19 and 24, many of whom are entering the workforce for the first time, may be uninsured. These same studies go on to say that these new workers want health insurance but cannot afford it.¹⁵⁻¹⁸

Recent data placed Oklahoma 5th highest in per capita percentage of uninsured adults between the ages of 18 and 64 in the U.S. (23.6%). Only Nevada (23.9%), New Mexico (26.0%), Louisiana (26.4%) and Texas (30.7%) have a larger percentage of uninsured adults.

Data released recently by the U.S. Census Bureau, Oklahoma ranked fourth, behind only Texas, New Mexico, and Florida, in percentage of uninsured people (adults and children), averaged over the 3 year period between 2003 through 2005 (Figure 6, next page).⁵

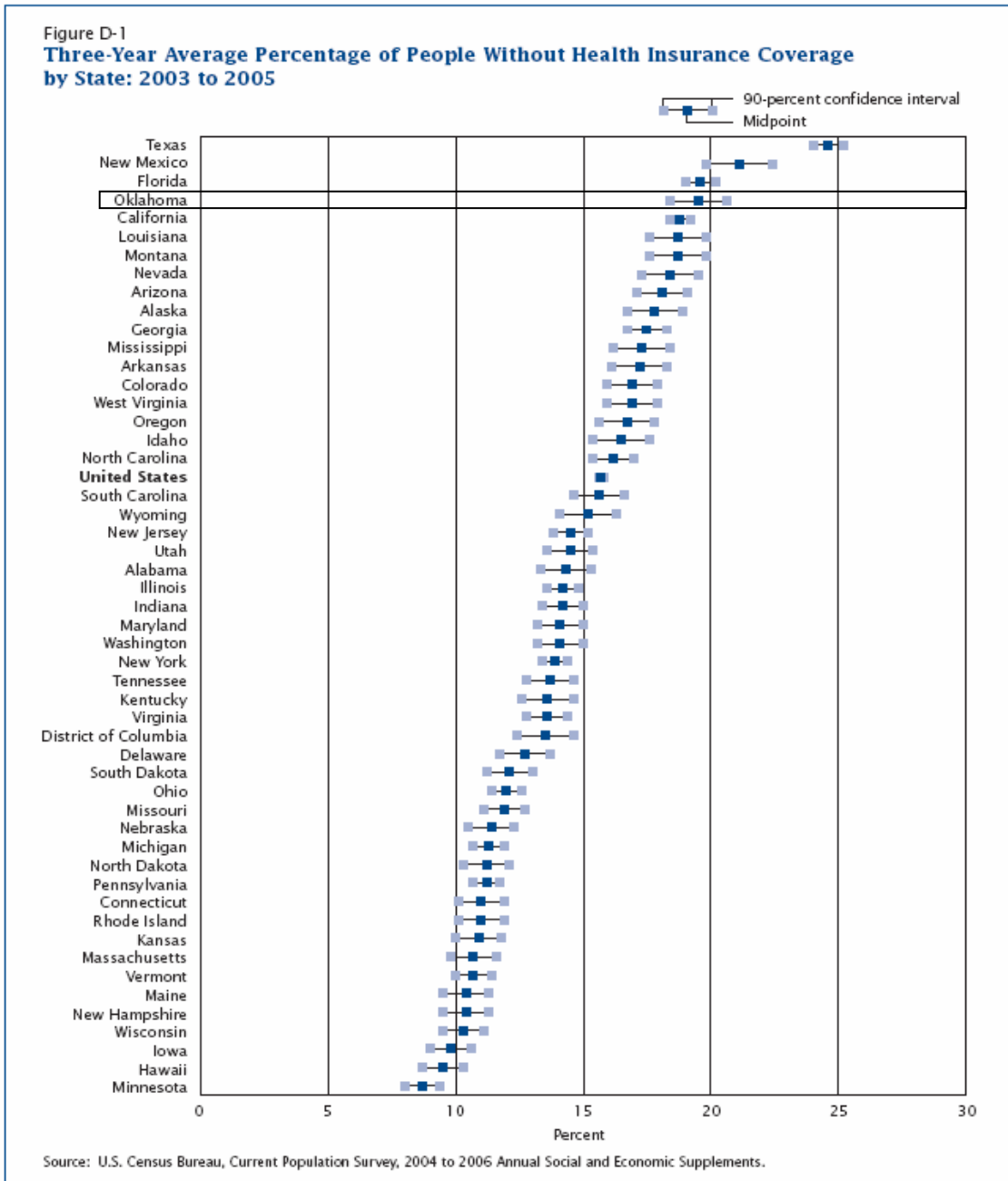
For the same period, Oklahoma had the 5th highest number of uninsured workers among the 50 states and the District of Columbia (20.6%).²⁰

With little movement at the Federal level to deal with the growing crisis in health care, many states are moving forward with plans of their own to provide coverage for the working poor.²¹ On November 1, 2005, thanks to the efforts of state government leadership, Oklahoma imple-

mented an innovative program that combines state and employer efforts with private health insurance industry products to create the Oklahoma Employer/Employee Partnership for Insurance Coverage (O-EPIC). Introduced on November 1, 2005, O-EPIC is a health insurance program that subsidizes premium and out-of-pocket costs for income-eligible employees utilizing established, employer-sponsored, private insurance. As of August 1, 2006, after this survey was conducted, OHCA indicated that more than 450 small businesses and 900 employees and spouses have signed up for health insurance coverage under the O-EPIC program.

As part of an on-going continuous quality improvement process for the O-EPIC program, OHCA asked researchers at the Department of Family and Preventive Medicine's Primary Care Health Policy Division University of Oklahoma Health Sciences Center to assist them in conducting a survey to gather feedback from employers participating O-EPIC from November, 2005 through June, 2006. This report describes the results of that study.

Figure 6. Three-Year Average of People Without Health Insurance Coverage by State: 2003-2005⁵



Methods

“The O-EPIC program is the greatest program for small business employers and employees to be offered in years.”

*Oklahoma Small Business Owner
August, 2006*

To gather feedback from small business employers participating in the O-EPIC program, faculty and staff of the DFPM assisted OHCA with developing and analyzing a survey as part of the O-EPIC continuous quality improvement (CQI) process. The methodology used for this study is described here, and follows closely methods used for studies conducted previously.^{2,7,8,22-24,28-32}

Subjects

Subjects for this study were small business employers (25 employees or fewer) who were actively participating in the O-EPIC program during all or part of the period from November, 2005, through June, 2006. OHCA mailed survey instruments to approximately 360 small business employers on July 7, 2006; 217 employers completed and returned the survey by the study cut-off date (August 7, 2006), a 60.3% return rate.

Survey Instruments

DFPM researchers assisted OHCA in developing the survey instrument for this study using a previously validated process.^{22,23,28-33} A copy of the survey instrument is attached (Appendix A). Unlike previous studies, no education material explaining the O-EPIC program was included with this survey because the employers in the sample were already familiar with the O-EPIC program.

Four types of questions were developed for the surveys:

1. Likert scale,
2. Multiple choice,
3. Estimates,
4. Open-ended, narrative.

Demographic and descriptive data, such as location, size of business, etc., were collected and used to determine whether significant differences occurred among participants in different demographic sectors. Specific questions about program components were developed to gather feedback and suggestions about the O-EPIC application and enrollment process, eligibility, administration, and quality issues (see Appendix A).

Data Analysis

Survey questions were designed to facilitate statistical analysis. Responses were entered into an Excel database and analyzed to determine – where appropriate – mean, median, mode, standard deviation, and standard error of the mean. Data entry was subjected to random testing to ensure accuracy. Every 4th entry was checked against the original survey by a member of the staff not involved in the data entry process to reduce the likelihood of data entry errors. The raw data from the Excel spreadsheet are available by request.

The Excel database was imported into SPSS V.11 for the statistical analysis, including frequency and mean statistics. Graphical representations for these studies were generated in Excel. All statistical measures of association or analytical testing tools were calculated using SPSS V.11 software as described previously.^{2,22-25}

Answers requiring a written response were entered exactly as they appeared on the completed survey, and used to add richness to the studies and reports. The raw data are available upon request. The comments are included with this report as Appendix B.

Resources and References

Since its inception in March 2003, the Primary Care Health Policy Division has been building a library of relevant policy materials. These materials include newspaper accounts, research reports and articles, and internet resources. Citations to these materials have been entered into an EndNote Reference Management Library database. To date, the library includes over 764 documents and citations. Materials relevant to Medicaid program innovation, uninsured and underinsured working adults and families, and current national discussions about health care are included in this library. The database and the library are available for use by OHCA staff, and by others upon special request. The numerous references cited in this report are part of this library and database.

Biographical sketches for all program faculty and staff are attached in Appendix C.

Limitations of this Study

Surveys were mailed to all 360 employers participating in O-EPIC between November, 2005, and June, 2006. Completed surveys were returned by 217 small business employers, a 60.3% return rate. The choice of survey recipients was not randomized; the survey was sent to all employers who were participating in O-EPIC on the mail-out date. Additionally, there was no way to control which employers

would complete the survey, and which would not. Therefore, a certain amount of selection bias must be assumed. Employers completing the survey may have an agenda for completing the survey that is not readily discernable from the survey results. In addition, some of the questions called for estimates and opinions from employers, which require subjective responses.

Another limitation is that not all employers answered every question, which may affect the data analysis. Every effort was made, during the analysis process, to allow for these discrepancies. To facilitate understanding, the number of responses received for each data point are reported in the results section, where applicable.

However, the high return rate (60.3%) should allow policy makers to utilize this study with reasonable assurance that the results represent the opinions, feelings, and suggestions from a large majority of the small businesses participating in O-EPIC.

Results

“If you or your employees make less than 185% of the FPL, this program will save you and them a huge amount, provide excellent coverage and greatly enhance morale, longevity and reduce sickness.”

*Small Business Employer Participating in O-EPIC
August 2006*

Results from the survey data are reported in two sections: (1) Descriptive statistics on a question-by-question basis, and (2) comparative analysis on pairings of survey questions. The raw data are available by request. Comments from respondents may be found in Appendix B. Results are reported in the order the questions were asked on the survey (Appendix A). OHCA distributed 360 surveys to small business employers who were participating in the O-EPIC program from November, 2005 through June, 2006. Surveys were returned by 217 employers, a 60.3% return rate.

NOTE: Not every question was answered by every survey respondent. Therefore, the number of responses (n) for each question may vary.

Abbreviations used in this analysis:

SEM = standard error of the mean

Std Dev = standard deviation

p-value = for this analysis, a p-value of 0.05 or less was considered a statistically significant result.*

Survey Results

1. Type of business (e.g., manufacturing, retail, service, health care, etc.). To determine generalizability of the data collected to the businesses state and nationwide, employers were asked what type of business they were in. Survey responses, sorted by categories from the

* p-value: a measure of probability that a difference between groups happened by chance. For example, a p-value of .01 (p=.01) means that there is a 1 in 100 chance the result occurred by chance. The lower the p-value, the more likely it is that the difference between groups is real.

U.S. Department of Commerce, are shown in 7a.

Figure 7a. Mix of Businesses in Study Sample (n=201)

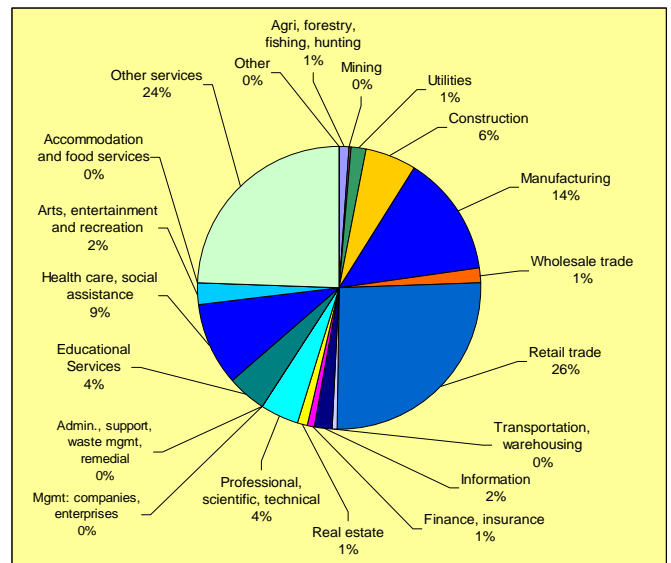
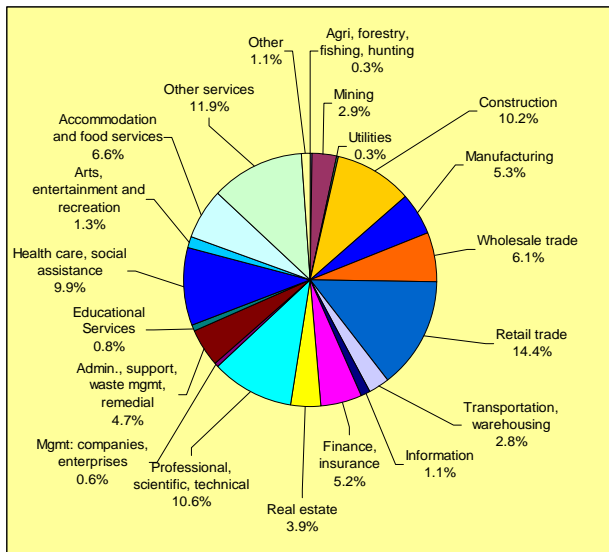


Figure 7b shows the mix of businesses for Oklahoma. Based on visual comparison, the sample of businesses in this study, in general, resembles the business mix for all Oklahoma, with these exceptions: our sample does not include any administrative support, waste management, or companies that manage other companies or enterprises. Therefore, we feel that the businesses participating in O-EPIC reflect the general mix of business types in Oklahoma.

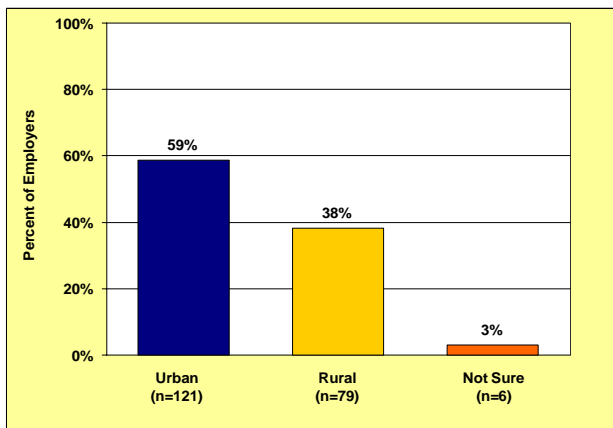
Figure 7b. Mix of Businesses in Oklahoma



Source: U.S. Department of Commerce

2. Location of business. Previous studies have shown that the location of businesses can be a predictor of responses to other questions. Therefore, businesses in this study were asked whether their business was in an urban or rural area. Most respondents (59%, n=121) indicated their business was located in an urban area; 38% (n=79) said their business was rural, and 3% (n=6) were not sure (Figure 8).

Figure 8. Location of Businesses in Sample (n=206)

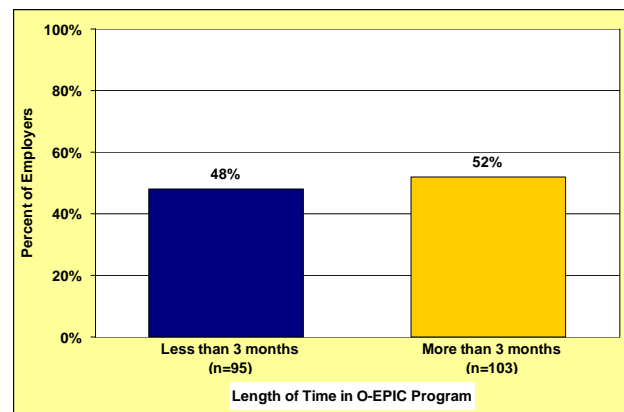


3. How many employees are in your company? The average number of employees in the 210 companies that responded to this question is **9 to 10** (9.47, Std Dev = 6.38). The median number of employees was 8, the mode was 2, and the range was from 1 to 33. The fact that

some of the businesses reported greater than 25 employees (the target for O-EPIC) might be explained by growth and new hires in participating businesses since they qualified. The total number of employees reported in the 210 companies was **1,988**.

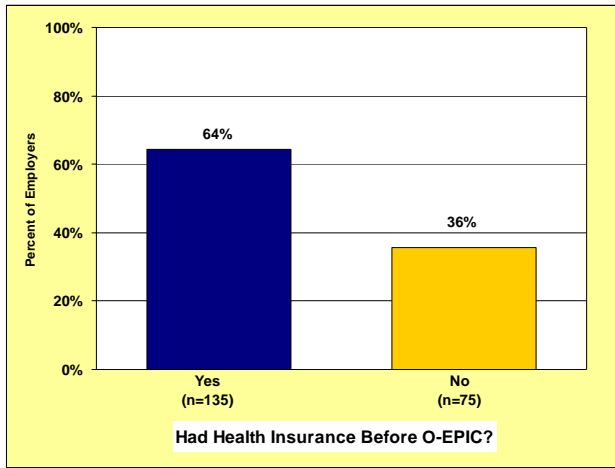
4. How long have you been in the O-EPIC program? Slightly more than half of those surveyed have been participating in O-EPIC for more than 3 months (52%, n=103), while 48% (n=95) were new to the program (Figure 9). Given that O-EPIC has been accepting applications since November, 2005, this is a good indication that interest in the program remains high, but outreach efforts should continue.

Figure 9. Length of Time of Participation in O-EPIC Program (n=198)



5. Did you have health insurance before the O-EPIC program? More than half of businesses surveyed (64%, n=135) had an insurance plan in place before O-EPIC; 35% (n=75) initiated a health plan after O-EPIC began (Figure 10). This indicates that the O-EPIC program is having the desired effect of incentivizing employers to provide coverage for previously uninsured workers.

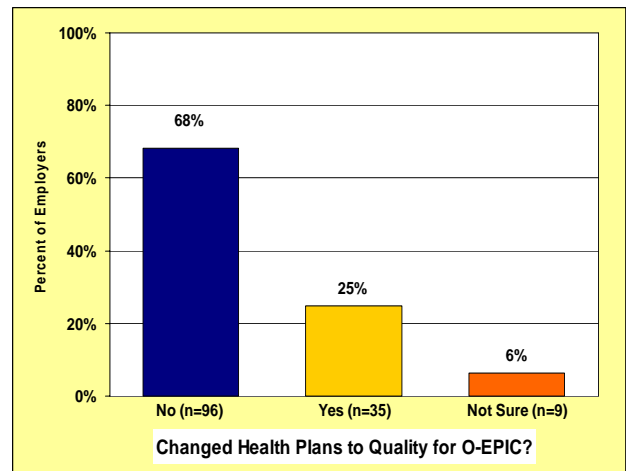
Figure 10. Business Insurance Status Prior to O-EPIC Implementation (n=211)



6. If you offered health insurance before O-EPIC, how many employees participated? One hundred twenty seven (127) out of the 135 employers who reported (in the previous question) having health coverage prior to O-EPIC responded to this question. Those 127 employers reported that **approximately 6 employees per business** were covered under their existing employer-sponsored plan. In all, a total of 731 employees in 127 businesses had coverage prior to the O-EPIC program, 37% of the entire employee population (1,988). The standard deviation for this response was 5.43, indicating a great deal of variance. The median was 4 employees and the range was 1 to 30 employees covered per business.

7. If you offered health insurance before this program, did you have to change health insurance plans to participate in O-EPIC? One hundred and forty one (141) employers responded to this question (6 greater than reported having coverage prior to O-EPIC in Question 5). One quarter (25%, n=35) had to switch plans to qualify in order to participate in the O-EPIC program. More than half (68%, n=96) did **not** have to switch plans, and 9 employers (6%) weren't sure if they had to switch plans (Figure 11).

Figure 11. If Health Plan Offered, Did You Have to Change Plans to Qualify for O-EPIC? (n=141)



8. For the most recent 12 month period available, approximately how much did you spend on health insurance? There was wide disparity in the amount the 135 employers who responded to this question spent on health insurance over the past 12 months. The average amount reported was \$25,562. The large standard deviation – \$23,121 – indicates a great variation in employer-paid premiums, as do the minimum (\$0), and the maximum (\$125,000). The total amount of premium dollars paid by \$3,450,872. By utilizing the following formula, we estimated the amount of premium per covered employee (n=728) in our study to be **\$4,740 per employee** per year, which is higher than the Oklahoma average of \$3,644³⁵ and the national average of \$3,481, as reported in 2005.³⁴

Total premium dollars=	\$3,450,872	
Total # insured employees=	728	= \$4,740/employee

A caveat: the way this question was worded, and the very large variation in responses, raises a number of concerns, and cautions. Did each employer offer health coverage for a full year? Were employees added throughout the year? Did some employers contribute toward family coverage? Because this is an important question, attempts to reword

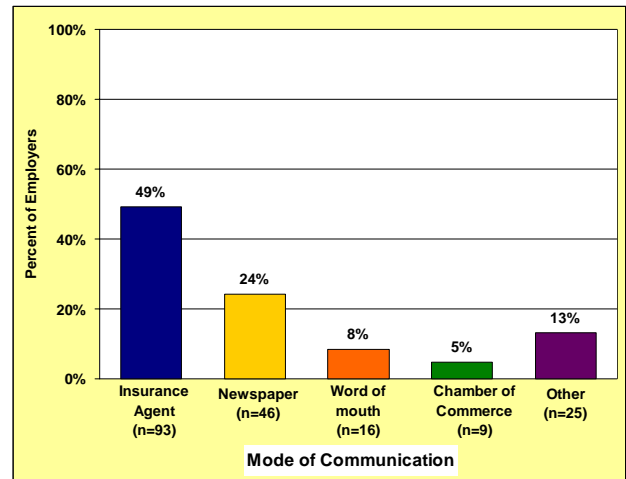
the question to gather the necessary information on future studies should be undertaken.

9. How many of your employees have applied for the O-EPIC program? The average number of employees per company, as reported in Question 3, was between 9 and 10. Of these 9-10 employees, about 6 were covered by insurance prior to O-EPIC (see Question 6). Employers (n=215) reported that, on average, between **3 and 4** of their employees (mean=3.4) applied for O-EPIC (Std Dev = 2.91, median=3, minimum=1, maximum=16). The sum total of employees who applied for coverage under O-EPIC in the businesses sampled was **731**.

10. Of the employees who applied for O-EPIC in Question 9, how many did not have health insurance before? Employers (n=212) reported that, of the 731 employees who applied for health coverage under O-EPIC, **340** did not have coverage before O-EPIC. The average number of employees per small business who did not have coverage prior to O-EPIC was between 1 and 2 (mean=1.6, Std Dev = 2.13, minimum=0, maximum=11).

11. How did you hear about the O-EPIC program? Insurance agents were employers' most frequent source of information about the O-EPIC program (49%, n=93). Newspaper was second (24%, n=46), followed by word of mouth (8%, n=16) and Chamber of Commerce (5%, n=9). Twenty-five employers (13%) said they heard about O-EPIC from other sources, which included mail, e-mail, radio, employees, and trade associations (Figure 12).

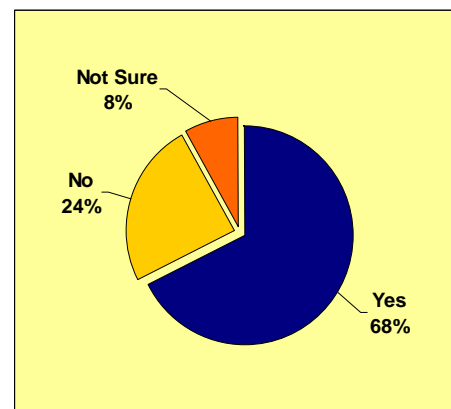
Figure 12. How Did You Hear About the O-EPIC Program? (n=189)



“My insurance agent has been great.”

12. Prior to applying for the O-EPIC program, did you understand the program was designed for low-income workers? Most employers (68%, n=144) felt confident that they understood the eligibility requirements of O-EPIC program before they applied; 24% (n=52) said “No” they did not understand eligibility, and 8% (n=17) were “Not Sure” (Figure 13).

Figure 13. Did You Understand that O-EPIC was Specifically for Low-Income Workers Before Applying? (n=214)



“This process was fairly easy and the staff was very eager to help with info. I did not understand the cost share of the insurance.”

13. If you could say one thing to other employers who might be considering enrolling in O-EPIC, what would that be? Comments from employers ranged from praise for the program to words of advice regarding program specifics to watch for. The following is a sampling of comments from current O-EPIC participants to prospective participants. A complete list of comments is included in Appendix B.

- “Finally the working poor can afford insurance. This is the best thing ever in my 28 years of being self-employed. I am proud of our state.”*
- “This is the best way to have health insurance for your employees--just wish it was available for all employees.”*
- “Please inform yourself of the benefits and cost.”*
- “Be aware of the income levels.”*
- “It is simple to do.”*
- “Complicated process but probably worth it.”*
- “This program does seem to work well.”*
- “Check each employee's eligibility before doing anything else.”*
- “Check the income limit.”*
- “Only older employees see benefit of the health insurance--younger workers just want more money in place of insurance.”*
- “Do it! Great insurance--easy to administer.”*
- “Health insurance is the responsible way to live life.”*
- “Make sure your employees will sign up before you go through the effort.”*
- “You must apply--it is a tremendous cost savings.”*
- “For small businesses it is well worth the paperwork required.”*

14. On a scale of 1 to 5, with 1 being negative and 5 being positive, please rate four potential benefits of O-EPIC for your business? Employers were asked to rate four potential business benefits of O-EPIC in order to determine the importance of each:

- 1) Improve Employee Morale,
- 2) Attract New Hires,
- 3) Reduce Absenteeism, and
- 4) Decrease Worker’s Compensation Claims.

“[O-EPIC is a] great investment for retaining employees.”

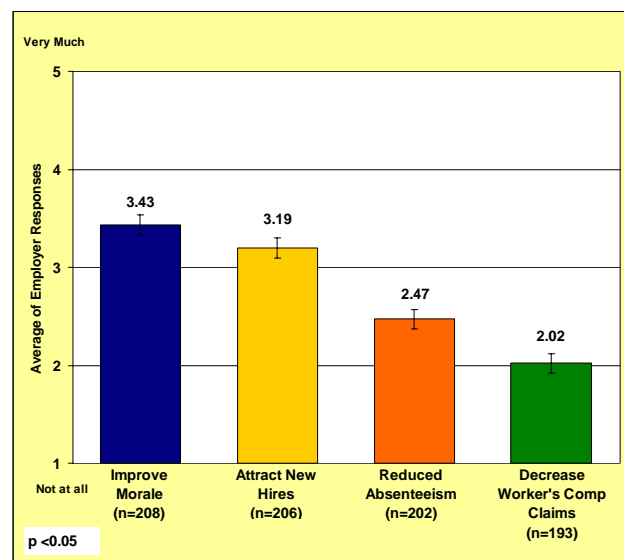
Statistical analysis revealed a statistically significant difference between each of the four potential benefits, which allows us to place the four potential benefits in rank order.

Employers ranked “Improve Morale” as the greatest positive impact that O-EPIC has had on their businesses (mean=3.43, SEM=0.10), followed closely by improved ability to “Attract New Hires” (mean=3.19, SEM=0.10). “Reduced Absenteeism” was the third rated benefit (mean=2.47, SEM=0.10), and “Decrease Worker’s Comp Claims,” fourth (mean=2.02, SEM=0.10). The differences between each of these potential benefits were statistically significant ($p \leq 0.05$) (Figure 14).

These data indicate that O-EPIC is having a significant impact on the morale of the employees in the businesses surveyed, and worker morale is correlated to productivity.^{26,27} As one employer said:

“The program gives employees an additional incentive to begin work.”

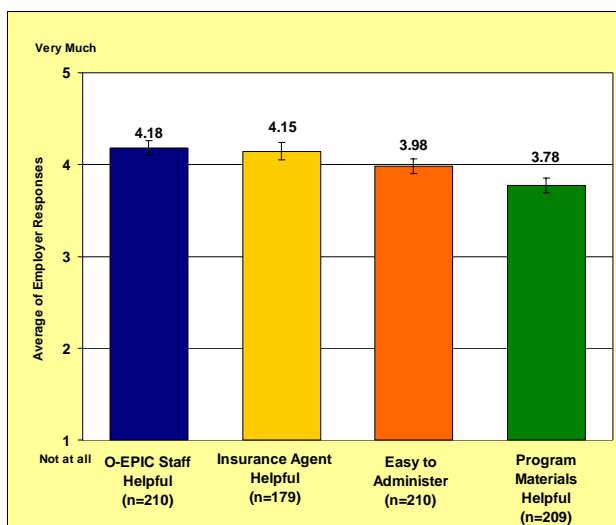
Figure 14. Employer Perception of Importance of O-EPIC on Four Potential Business Benefits



15. *On a scale of 1 to 5, with 1 being negative and 5 being positive, please rate four aspects of the O-EPIC application and administration process.* Employers were asked to rate four separate aspects related to application and administration process. These aspects were not related to the O-EPIC program itself, but were non-programmatic elements that supported the insurance program. O-EPIC staff received high marks from employers for their helpfulness during the O-EPIC application and administration process. On a scale of 1-5, employers rated O-EPIC staff a mean of 4.18 (SEM=0.08), followed closely by assistance from their insurance agent (mean=4.15, SEM=0.10). They also reported that O-EPIC was relatively easy to administer (mean=3.98, SEM=0.08), and that program materials were helpful (mean=3.78, SEM=0.08) (Figure 15). Overall, these responses indicate that O-EPIC participants were pleased with the assistance they have received implementing the program.

“Great customer service at O-EPIC!”

Figure 15. Employer Rating of Helpfulness and Utility of Four Non-programmatic Elements of O-EPIC



“Unlike most government agencies O-EPIC provides very high quality phone assistance--real humans!--who are very polite and stay with you and it does not matter how long it takes--till problems are solved and questions answered. This is very much appreciated.”

16. *If you have been approved for the O-EPIC program, but your employees have not applied, why?* The most frequent answers to this question were:

- 1) Employees earned too much, and
- 2) Employees had coverage through spouse or other source.

One employer said that one of his employees met the income requirement but did not qualify because he lived over the state line.

17. ***Additional Comments:*** Many of the comments indicated that, in general, employers were pleased with the program and glad to be able to offer their income-eligible workers health coverage. The following comment reflects the thoughts of many employers regarding the O-EPIC program as it is currently.

I sincerely appreciate this program and hope more of my staff can participate as time passes.

I also hope two other things:

- 1) ***Increase [eligibility] to employers with 50+ employees, and***
- 2) ***Increase [eligibility] to 300% of FPL.***

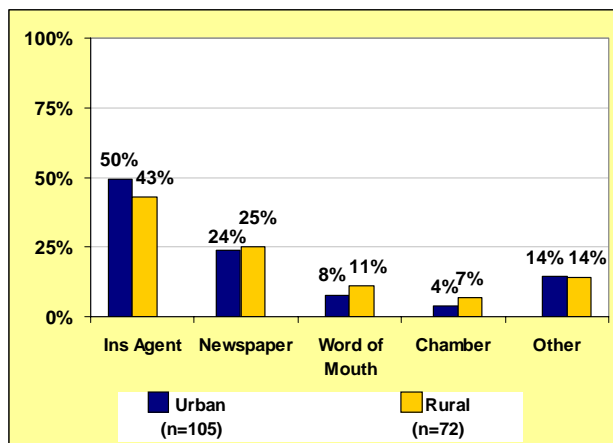
Several of the responses to this question have been placed throughout the text where relevant. A complete listing of comments is included in Appendix B.

Comparative Analyses

Six comparative analyses were run on the data collected for this study. Questions for cross-analysis were chosen based on their potential to yield results with applicability to policy issues.

1. Does the source of information about the O-EPIC program vary significantly by business location (urban vs rural)? We utilized demographic data to compare responses between urban and rural businesses. When asked how they heard about the O-EPIC program, the most frequent source of information for both urban and rural businesses was insurance agents. Urban businesses were slightly more likely to have heard about O-EPIC from their agents (50%) than rural businesses (43%). (In addition, 7% of employers reported their location as “unsure”. Those employers were not included in this cross-analysis.)

Figure 16. How Did You Hear About O-EPIC Compared by Urban vs Rural Location (n=177)

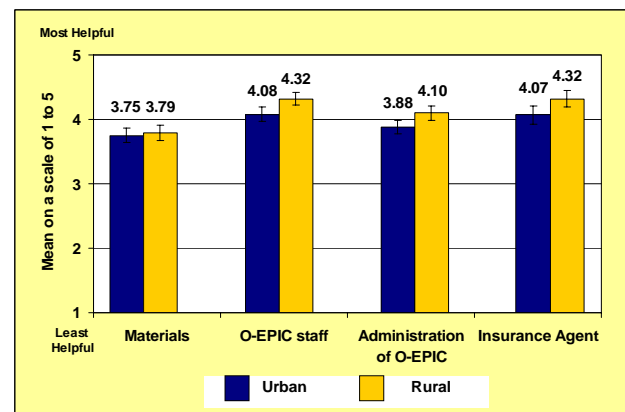


Rural businesses were slightly more likely to have heard about O-EPIC from newspapers (25%, n=18) than were urban businesses (24%, n=25). Similarly, rural businesses reported hearing about O-EPIC by word of mouth (11%, n=8) somewhat more often than urban businesses (8%, n=8), and rural employers were also more likely to have heard about O-EPIC through their Chamber of Commerce (7%, n=5) compared with only 4% (n=4) of urban businesses (Figure 16). Both groups were equally likely to report hearing about from other sources (e.g., an employee, radio, mail and e-mail, and trade associations). Although there are subtle differences among the groups, a chi

square analysis revealed that the differences were not statistically significant ($p > 0.05$).

2. Does the location of the business (urban vs rural) influence how employers rate four elements of the O-EPIC application and administration process? Question 15 asked employers to rate four non-programmatic elements of the O-EPIC application and administration process: (1) program materials, (2) helpfulness of O-EPIC staff, (3) ease of administration, and (4) helpfulness of insurance agent. Responses to this question were cross-analyzed with business location (urban vs. rural). There were no statistically significant differences between urban and rural business locations for their responses to this question ($p > 0.05$) (Figure 17). This indicates that businesses in both areas were equally pleased with the support and materials for the O-EPIC program (see Figure 15).

Figure 17. Likelihood that Location of Business will Influence Employer Rating of Four Non-programmatic Elements of Participation in O-EPIC

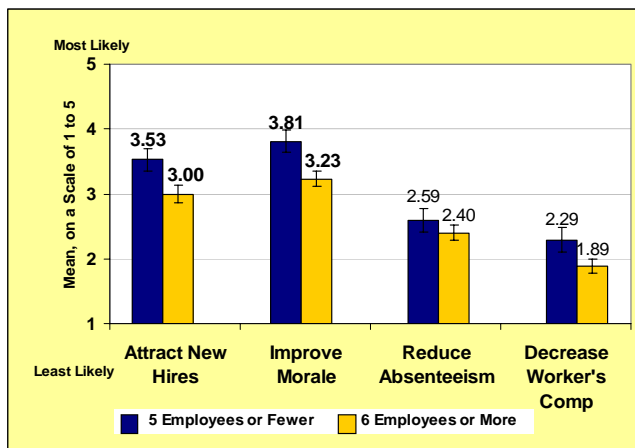


3. Does business size (5 employees or fewer compared with 6 employees or more) predict how employers will rate four potential benefits of the O-EPIC program? Question 14 asked employers to rate four potential business benefits of having health insurance coverage through O-EPIC: “attract new hires,” “improve employee morale,” “reduce absenteeism,” and “decrease worker’s comp claims.” We compared how employers rated these four

potential benefits by the size of their business as measured by number of employees (5 or less and 6 or more). When each of the four potential benefits was stratified by business size and analyzed, two of the analyses revealed statistically significant differences in the means: **Attract New Hires** and **Improve Morale**.

Employers with 5 or fewer employees were significantly more likely to feel that O-EPIC would make them more competitive in **attracting new hires** (mean=3.53, SEM=0.17) than employers with 6 or more employees (mean 3.00, SEM=0.13). Additionally, employers with 5 or fewer employees were more likely to report that O-EPIC would **improve employee morale** (mean 3.81, SEM=0.17), and potentially enhance productivity, than employers with 6 or more employees (mean=3.23, SEM=0.13). These differences were statistically significant ($p \leq 0.05$) (Figure 18).

Figure 18. Likelihood that Size of Business will Influence Employer Rating of Four Potential Business Benefits of Participation in O-EPIC



Although not statistically significant ($p > 0.05$), employers with 5 or fewer employees were more likely to believe that O-EPIC would reduce absenteeism (mean=2.59, SEM=0.18) than employers with 6 or more employees (mean=1.89, SEM=0.11). Smaller companies were also somewhat more likely to believe O-EPIC would decrease worker's comp claims (mean=2.29, SEM=0.19), compared with larger

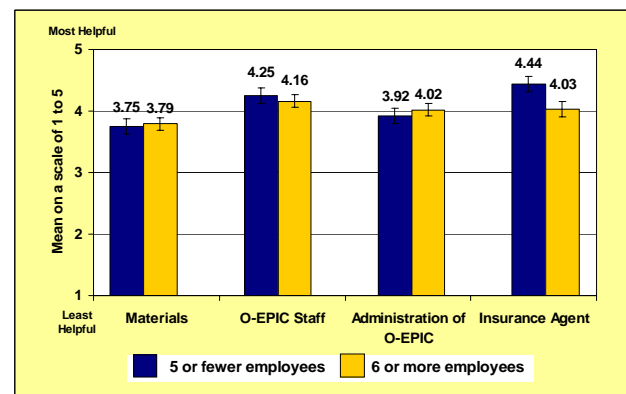
companies (mean=2.40, SEM=0.12), the differences, likewise, were not statistically significant ($p > 0.05$) (Figure 18).

4. Does business size (5 employees or fewer compared with 6 employees or more) predict how employers will rate four non-programmatic, administrative aspects of O-EPIC?

Question 15 asked employers to rate four non-programmatic or administrative elements: (1) helpfulness of O-EPIC staff, (2) helpfulness of Insurance Agent, (3) ease of administration, and (4) program materials. Responses to this question were stratified and cross-analyzed by business size as measured by number of employees (5 or fewer, 6 or more).

Among the four elements, a statistically significant difference was found for only one of the comparisons. Employers with 5 or fewer employees were more likely to rate the helpfulness of their insurance agent higher (mean=4.44, SEM=0.12) than employers with 6 or more employees (mean=4.03, SEM=0.13). This difference was statistically significant ($p \leq 0.05$) (Figure 19).

Figure 19. Helpfulness of Four Elements of the O-EPIC Application and Administration Process Compared by Size of Business (Number of Employees)

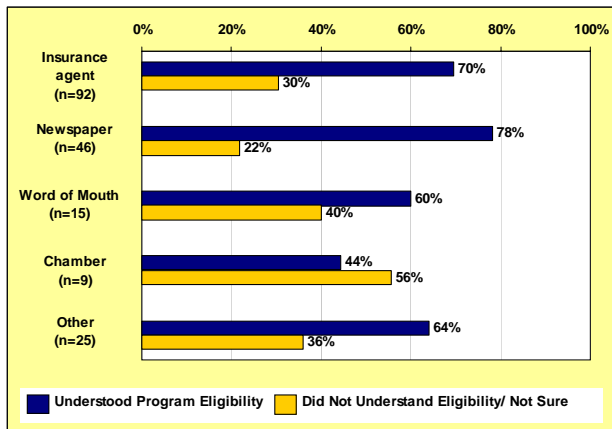


This finding may become more interesting once the O-EPIC program grows to include larger businesses. In this context, however, it makes sense that smaller businesses (which may have been in operation for shorter periods of time)

would rely more heavily on help from an informed source, such as an insurance agent.

5. Does the source of information about the O-EPIC program predict how well employers understand that O-EPIC is intended for income-eligible workers? To determine whether the source from which employers got details about the O-EPIC program predicted the depth of their understanding of the intent of the program, particularly that the program was designed for income-eligible workers, responses to Question 11 were stratified and analyzed by employers self-reported understanding of the program (Question 12). Most employers who heard about the O-EPIC program from their insurance agent (n=92) said they were well-informed about the program (70% compared with 30%). Of those who read about O-EPIC in the newspaper (n=46), 78% said they understand the program was for income eligible employees, compared with 22% who indicated they did not (Figure 20).

Figure 20. Employer Understanding of O-EPIC Eligibility by Information Source (n=187)



Likewise, those employers who heard about O-EPIC from a friend, colleague, etc. (“Word of Mouth”) (n=15), as well as those who indicated they heard about the program from another source (“Other”) (n=25) indicated that they felt they were adequately informed about the program eligibility. Only those who got their information from a Chamber of Commerce

(n=9) indicated they did not fully understand that the program was specifically for income-eligible workers (Figure 20).

6. Does the length of time employers have been participating in O-EPIC (3 months or less vs longer than 3 months) predict how they will rate four potential benefits of the O-EPIC program? To determine whether the length of time employers had been participating in the O-EPIC program had any impact on how they rated four potential business benefits, responses to Question 4, length of time in O-EPIC, and Question 14, potential business benefits of O-EPIC, were stratified and cross analyzed. Statistical analysis revealed no statistically significant difference among the responses (p>0.05) (Figure 21).

Figure 21. Employers’ Rating of Four Potential Business Benefits Compared by Length of Time in O-EPIC Program (less than 3 months vs more than 3 months)

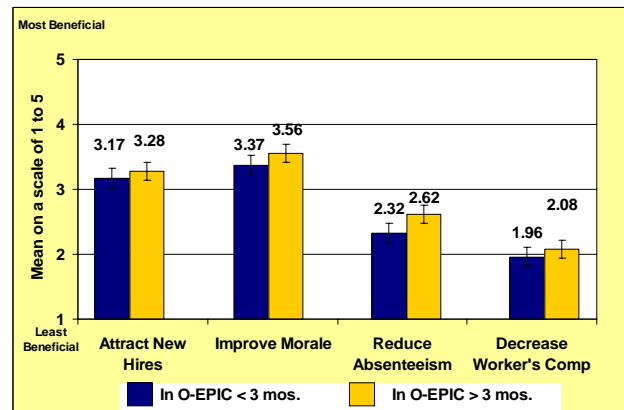


Table 2. Survey Results-at-a Glance

1. Type of business		Sample is roughly representative of mix of business types in OK
2. Location of business	Urban=58.7% Rural=38.3% Not sure=3.0%	The sample was roughly representative of Oklahoma's demographics.
3. How many employees	Mean=9.47 employees Std Dev=6.58	Companies ranged in size from 1 to 33 with an average between 9 and 10.
4. How long have you been in O-EPIC	Mean=4.09 months Std Dev=2.42	Companies reported being in O-EPIC between 1 and 8 months with an average of 4 months.
5. Did you have health insurance before O-EPIC	Yes=64% No=36%	Most employers had a plan in place, but about 1/3 sought a new plan when they applied to O-EPIC.
6. How many employees participated in health plan before O-EPIC	Mean=5.73 Std Dev=5.43	Employers reported between 1 and 30 employees in existing ESI with an average between 5 and 6 employees.
7. Did you have to change health insurance plans to participate in O-EPIC	Yes=24.8% No=68.1% Not Sure=6.4%	Most employers did not have to switch health insurance plans to participate in O-EPIC.
8. How much did you spend on health insurance in last 12 months	Mean=\$25,562 Std Dev= \$23,121	Employers reported spending between \$0 and \$125,000 on ESI last year with an average of \$25,562. Per employee annual cost = \$4,740.
9. How many employees applied for O-EPIC	Mean=3.40 employees Std Dev=2.91	Employers reported between 1 and 16 employees applying for O-EPIC with an average between 3 and 4 employees.
10. How many employees did not have health insurance before O-EPIC.	Mean=1.60 employees Std Dev=2.13	Employers reported between 1 and 11 employees without previous insurance with an average between 1 and 2 employees.
11. How did you hear about the O-EPIC	Ins. Agent=48.7% Newspaper=24.1% Word of Mouth=8.4% Chamber of Commerce=4.7% Other=13.1%	Most employers heard about O-EPIC through their insurance agent and the newspaper.
12. Prior to applying for O-EPIC, did you know program was for low-income workers	Yes=67.3% No=24.3% Not Sure=7.9%	Most employers understood that O-EPIC was meant for low-income workers prior to applying.
13. If you could say one thing to other employers who might be considering enrolling in O-EPIC, what would that be?		Narrative
14. On a scale of 1 to 5 with 1 being negative and 5 being positive, please rate the following aspects of how the O-EPIC program has impacted your business in following areas?	Improve employee morale: Mean=3.43 SEM=.10 Attract New Hires: Mean=3.19 SEM=.10 Decrease Absenteeism: Mean=2.47, SEM=.10 Decrease Worker's Comp Claims: Mean=2.02, SEM=.10	Employers believed that "Improve Employee Morale" was the biggest positive impact O-EPIC would have upon their business. Attract new hires was second.

<p>15. On a scale of 1 to 5 with 1 being negative and 5 being positive, please rate the following aspects of the O-EPIC program and application process.</p>	<p>O-EPIC Staff: Mean=4.18, SEM=.08 Insurance Agent: Mean=4.15, SEM=.08 Administration of O-EPIC: Mean=3.98, SEM=.08 Program Materials: Mean=3.78, SEM=.08</p>	<p>Employers found the O-EPIC staff and their Insurance Agents to be very helpful during the application process.</p>
<p>16. If you have been approved for the O-EPIC program, but your employees have not applied – why?</p>		<p>Narrative</p>

Discussion

“It’s been great. We did not know what we were going to do. Our insurance was going up, and we were looking into lowering the benefits and raising the deductibles. We still got to pick our insurance company.”

*Oklahoma Small Business Owner
August 2006*

The Oklahoma Employer/Employee Partnership for Insurance Coverage (O-EPIC) was implemented to extend health insurance coverage to income-eligible working individuals and their spouses. These are individuals with annual family incomes at or below 185% of the federal poverty level (see Table 1). The start-up phase of the program extended coverage to employees in small businesses (fewer than 25 employees) with a qualified, private, employer-sponsored health plan in place, or that were negotiating a contract with a carrier. O-EPIC began accepting applications in November, 2005.

This report describes the experiences of small business owners who were participating in the O-EPIC program from November, 2005, through June, 2006.

Retail and service sector businesses made up half of the businesses in the study (26% and 24%, respectively). More than half of the businesses were located in urban areas (58.7%). The number of employees in the sample ranged from 1 to 33, which is slightly higher than the intended target audience (25 employees or fewer). Slightly more than half of the businesses had been participating in O-EPIC from longer than 3 months (52%), and more than half had a health insurance plan in place prior to applying to the O-EPIC program (64%). It is important to note that 36% of employers were interested

enough in providing coverage for their employees that they subscribed to an eligible insurance plan in order to qualify for O-EPIC.

In addition, 25% of businesses that had a health insurance plan in place prior to applying to O-EPIC switched to a qualified health plan in order to participate. Given the administrative hassles involved in changing insurance coverage, the fact that these employers were willing to switch plans indicates the degree of interest employers have in participating in O-EPIC.

The average amount spent on health insurance per employee in this study was about \$4,740. This figure is higher than the Oklahoma average of \$3,644³⁵ and the national average of \$3,481, as reported in 2005.³⁴ This figure should be viewed with caution, however, as there was a very broad range of responses to this question. However, it would be interesting to follow-up on expenditures reported by O-EPIC participants in order to track the financial impacts – positive and/or negative – that the program is having.

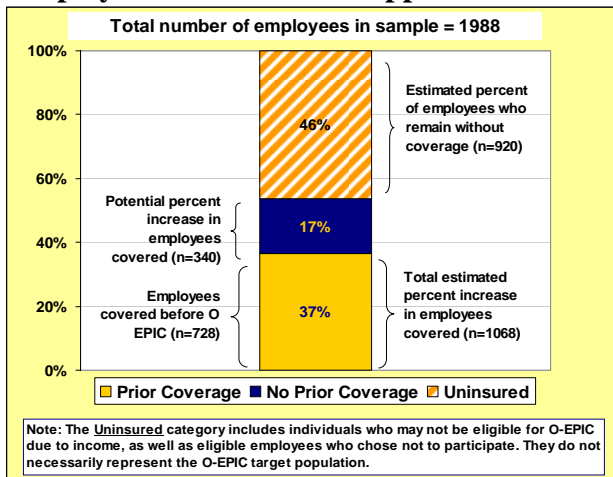
Because the plan reduces employee out-of-pocket (OOP) expense by charging employees on a sliding scale based on income, all employees in the target population should be able to afford purchasing the O-EPIC subsidized insurance plans. Table 3 describes the study employees by insurance status.

Table 3. Overview of Study Employees' Insurance Status

Employee Pool	No.	% of 1988
Total Number of Employees in Sample	1988	100%
Employees with Prior Coverage	728	37%
Employees Applying for Coverage through O-EPIC	731	37%
O-EPIC Applicants without Prior Coverage	340	17%

Of the combined total 1988 employees working in the small businesses sampled for this study, 728 were covered by employer-sponsored health plans before O-EPIC. Based on survey responses, O-EPIC subsidies resulted in health coverage for an additional 340 employees, bringing the estimated total insured in the study sample to 1068, a potential 46% increase. In this scenario, the total percent of insured employees would increase from 37% to 54% (Figure 22).

Figure 22. Total Estimated Percent of Employees Covered after Approval Process*



*Note that the individuals included in the “Uninsured” category may not represent the O-EPIC target population. The majority of the 920 (46%) uninsured did not qualify for O-EPIC under current eligibility criteria. Most earned over 185% FPL, although based on employer comments, many “just missed” the eligibility cut-off.

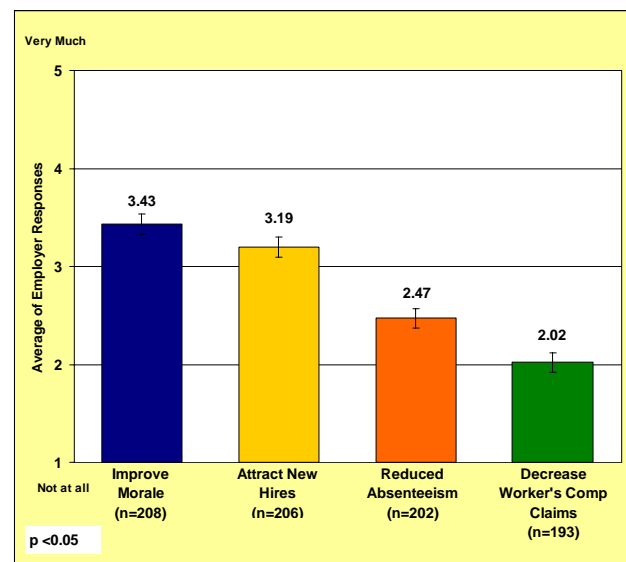
“Many couldn’t apply because they make too much money, which is sad because most make \$20,000 or slightly less--not exactly middle income living.”

Despite the increasing costs, employers continue offering health coverage. A number of reasons for this have been identified including attracting and retaining quality employees, reducing absenteeism, and improving morale and productivity.^{32,36-38} In this study, employers were asked to rate four potential benefits of participating in the O-EPIC program:

- attracting new hires,
- improving employee morale,
- decreasing worker’s compensation claims, and
- reducing absenteeism.

Employers ranked “Improve Morale” as the number one reason for participating in the O-EPIC program (mean=3.43, SEM=0.10) (Figure 23). “Attract New Hires” was the second highest rated reason, followed by “Reduced Absenteeism.” “Decreased Worker’s Comp Claims” was last, which implies worker’s comp claims were less troubling for employers than the improved morale of their workers. This confirms early studies with small business employers which found that most employers “want to do the right thing” for their businesses and for their employees.^{2,22-24,32}

Figure 23. Employer Ranking of Four Potential Business Benefits of Participation in O-EPIC



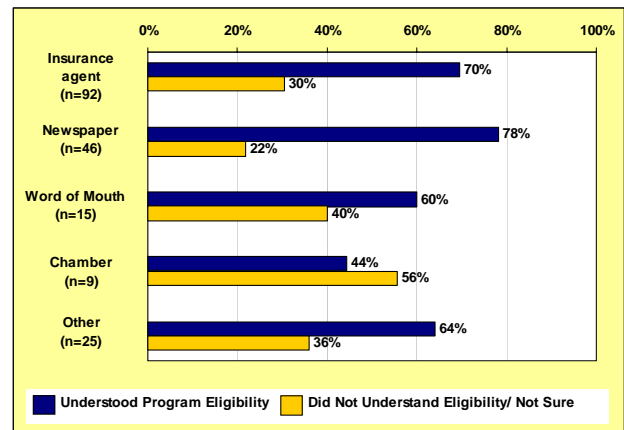
This finding has potential uses in promoting the O-EPIC program. For example, a marketing campaign emphasizing that employers taking part in the O-EPIC felt that participation improved morale, and thus increased productivity,^{26,27} could encourage other small businesses to apply to the program. Similarly, a campaign describing that participating employers felt it has a positive impact on their ability to attract new hires could raise awareness of O-EPIC, and possibly increase participation.

The success of the O-EPIC program relies on continued and increasing enrollment of small businesses and their income-eligible employees; therefore, the methods by which employers are informed about the O-EPIC program are important. This study concluded that insurance agents and newspapers were the most frequently utilized sources of information about the O-EPIC program (Figure 24), and the information provided contributed to employer understanding of the income eligibility for the O-EPIC program. Continued efforts promoting O-EPIC with agents and media sources are likely to be productive.

The “Other” category included radio ads and communication through trade associations. Public service and outreach aimed at these information sources may also prove productive.

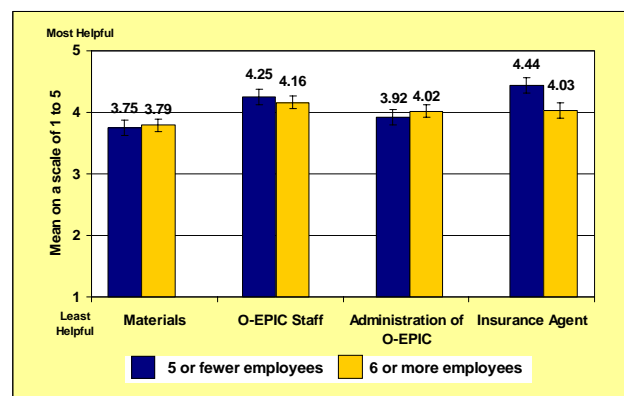
Only 9 of 187 employers received information about O-EPIC from Chambers of Commerce. Those employers were less likely to understand that O-EPIC was for income-eligible employees only.

Figure 24. Employer Understanding of O-EPIC Eligibility by Information Source (n=187)



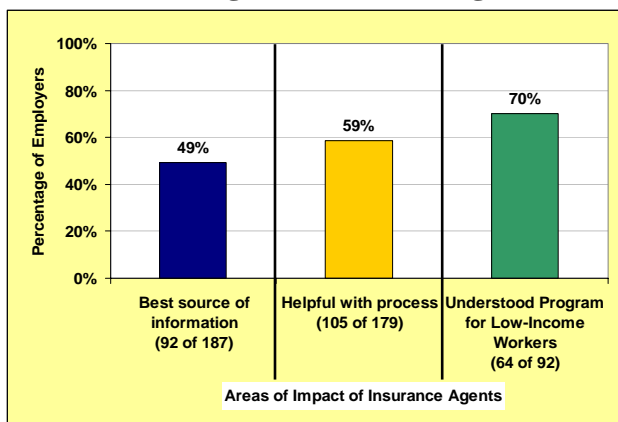
Smaller businesses were statistically more likely to rely upon the assistance of an insurance agent and pleased with the help their agent provided. Compared with the utility of four non-programmatic elements, smaller businesses (5 or fewer employees) rated the helpfulness of their agent significantly higher than did larger businesses in the sample. It makes sense that smaller businesses (which may have few, if any, administrative staff) would rely more heavily on help from an informed source, such as an insurance agent. This finding further validates the role producers are playing in promoting and facilitating O-EPIC (Figure 25).

Figure 25. Employers’ Rating of Four Elements of the O-EPIC Application and Administration Process Compared by Size of Business (Number of Employees)



When applicable, insurance agents played a major role in assisting small business employers with successful implementation of the O-EPIC program. This held true regardless of the location of the business (urban or rural) and the size of the business (5 or fewer vs 6 or more). Insurance agents were also a major source of information about O-EPIC for the employers sampled, and were more likely to ensure that the employer understood the income eligibility for the program, than if the employer got information from other sources. Agents were also rated as the most helpful from among a variety of assistance sources (Figure 26).

Figure 26. Employer View of the Impact and Importance of Insurance Agents in Facilitating the O-EPIC Program



In general, employers reported positive experiences with the O-EPIC program, and expected that the program would have a positive impact on the health and well-being of Oklahomans without adversely impacting the financial viability of their small businesses. Continued monitoring to ensure ongoing quality improvement based on stakeholder feedback will help to secure the viability of the program. Feedback from employees (perhaps as a web-based evaluation process) and carriers, in addition to employers could also be helpful in securing the continued success of the Oklahoma Employer/Employee Partnership for Insurance Coverage.

“No other state has it!”

Findings and Recommendations

“[O-EPIC] helps your staff feel safer about their health care needs.”

*Oklahoma Small Business Owner
August 2006*

Findings

1. Insurance agents played a major role in nearly every aspect of the O-EPIC application and implementation process.
2. Employers were more likely to understand the income eligibility requirement for participation in O-EPIC if they received information about the program from insurance agents or newspapers.
3. Improved employee morale, which in turn results in improved productivity, was the main reason employers in this study wanted to offer health coverage. Ability to attract new employees was second.
4. Of the total of 1988 workers employed in businesses that participated in this study, 728 **did not** have health coverage prior to O-EPIC.
5. A total of 731 employees applied for health coverage under O-EPIC, of whom **340** did not have prior coverage (46.5%).

Recommendations

1. Employers who responded to this survey believed that participation in the O-EPIC program **improved the morale** of their employees. Studies have demonstrated that improved morale results in improved productivity, which in turn can enhance the financial viability of the company.^{26,27} A marketing campaign with emphasis on this finding could also encourage other small businesses to apply.
2. In this sample, employers also felt that O-EPIC had a positive impact on their ability to **attract new hires**. A marketing campaign with emphasis on this finding could also encourage other small businesses to apply.
3. Small business employers surveyed expressed the need for an increase in the income eligibility limit and in the size of the businesses. A few expressed concerns that they might lose coverage if their business “attracts” new hires and exceeds the 25 employee limit.
4. Employers surveyed appreciated being asked for their opinion of the program. Employers were complementary of O-EPIC program staff, implying that, at a minimum, current efforts should be continued.

5. Employers who responded to this survey stated that the program was easy to administer within their business. Continuing a quality improvement process that includes feedback from employers, and perhaps from employees, will allow the program to keep meeting the needs of the target populations.
6. When applicable, employers in this sample reported that their insurance agents were an important part of their O-EPIC experience. Therefore, OHCA should continue to maintain and build close, positive relationships with insurance carriers and agents/producers (such as the Brown Bag lunches).
7. Continue increasing newspaper, mass media, and other publications about the O-EPIC program. Employers in this sample reported that newspapers are a major source of information about the O-EPIC program.
8. When responding employers selected “Other” as their source of information, they listed radio ads and information transmitted through trade associations. Public service and outreach efforts aimed at these information sources would also seem appropriate and beneficial.

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Appendices

- A. Small Business Employer Survey
- B. Comments
- C. Biographical Sketches of Project Faculty and Staff

Appendix A

Oklahoma Employer/Employee Partnership for Insurance Coverage (O-EPIC) Participating Employer Survey

You have received this survey form because you have been approved for the Oklahoma Employer/Employee Partnership for Insurance Coverage (O-EPIC) program. The purpose of this survey is to determine how satisfied you are with your participation in O-EPIC to date. The Oklahoma Health Care Authority (OHCA), which manages the O-EPIC program, has asked the University of Oklahoma Health Sciences Center Primary Care Health Policy Division to assist with this study and provide feedback to them to help improve the O-EPIC program. Your responses will be used by OHCA to improve the O-EPIC program and make it more responsive to the needs of employers and employees. The survey results will be reported to OHCA in aggregate; no names will be used and your responses will be confidential. Your input is important. Please complete the form and return in the self-addressed postage-paid envelope provided or fax to Sarah Hyden at 405-271-8800.

1. Type of business: (e.g., manufacturing, retail, service, health care, etc.)

2. Location of business:
 Urban Rural Not sure
3. How many employees are in your company?

4. How long have you been in the O-EPIC program?

5. Did you have health insurance before the O-EPIC program?
 Yes - If **Yes**, please answer questions #6 - #8
 No - If **No**, please skip questions #6 - #8
6. If you offered health insurance how many employees participated before O-EPIC?

7. If you offered health insurance before this program, did you have to change health insurance plans to participate in O-EPIC?
 Yes No Not sure
8. For the most recent 12 month period available, approximately how much did you spend on health insurance?
\$ _____
9. How many of your employees have applied for the O-EPIC program?

10. Of the employees who applied for O-EPIC in question #9, how many did not have health insurance before?

11. How did you hear about the O-EPIC program?
 Insurance agent
 Newspaper
 Word of mouth
 Chamber of Commerce
 Other: (please list) _____
12. Prior to applying for the O-EPIC program, did you understand the program was designed for low-income workers?
 Yes No Not sure
13. If you could say one thing to other employers who might be considering enrolling in O-EPIC, what would that be?

14. On a scale of 1 to 5 with 1 being negative and 5 being positive, please rate the following aspects of how the O-EPIC program has impacted your business in following areas?

	Not at All → Very Much				
It has made my business more attractive to potential new hires.	1	2	3	4	5
It has improved employee morale.	1	2	3	4	5
It has reduced absenteeism due to illness.	1	2	3	4	5
It has decreased my worker's compensation claims.	1	2	3	4	5

15. On a scale of 1 to 5 with 1 being negative and 5 being positive, please rate the following aspects of the O-EPIC program and application process.

	Not at all → Very Much				
Program materials (brochures, employee materials) were helpful	1	2	3	4	5
O-EPIC staff was helpful during enrollment.	1	2	3	4	5
It will be easy to administer O-EPIC in your business.	1	2	3	4	5
If you worked with an insurance agent throughout the application process, how helpful were they?	1	2	3	4	5

16. If you have been approved for the O-EPIC program, but your employees have not applied - why?

17. Additional Comments: _____

Thank you for participating in this important study. Your answers will contribute to the success of the O-EPIC program.

Appendix B Narrative Comments from Survey

Appendix B(a) Type of Business by Survey Number

1	retail & service	54	service	108	sheltered workshop/ group home
2	fitness center	55	manufacturing	109	service
3	service	56	retail & service	110	retail
4	optometrist office	57	oilfield service	111	child care
5	service-tag agency	58		112	service
6	broadcasting	59	wholesale	113	healthcare
7	manufacturing	60	retail & service	114	service
8	optometrist office	61	service	115	retail
9	manufacturing	62	retail & service	116	manufacturing, engineering
10	retail & service	63	healthcare	117	manufacturing
11	manufacturing	64	manufacturing	118	retail
12	retail & service	65	retail & service	119	law office
13	service	66		120	retail and service
14	healthcare	67	retail & service	121	retail
15	service	68	service	122	advertising
16	healthcare	69	travel	123	retail and service
17	service	70	retail & service	124	service
18	healthcare	71	manufacturing	125	retail and service
19	service	72	manufacturing	126	manufacturing
20	service (ins. Agency)	73	boarding school	127	Environmental consulting
21	manufacturing	74	service	128	Service and entertainment
22	service	75	utility	129	retail
23	wholesale	76	manufacturing, service	130	retail
24	retail & service	77	child care	131	utilities
25	construction	78	child care	132	retail
26	contractor	79	service	133	manufacturing
27	healthcare	80		134	child care
28	manufacturing	81	service	135	camp
29	manufacturing	82	construction	136	retail
30	manufacturing	83	retail & service	137	bank
31*		84	retail pharmacy	138	retail
32	non-profit service	85	event planning	139	manufacturing
33	lawfirm	86	lawyer	140	retail and service
34	manufacturing	87	retail	141	service
35	healthcare	88	Bridge section design	142	service
36	wholesale distribution	89	retail and service	143	service
37	construction	90	retail	144	retail and service
38	communication	91	healthcare	145	manufacturing
39	retail & service	92	service	146	retail
40	service	93	retail	147	service
41	manufacturing	94	manufacturing	148	non-profit
42	service	95	manufacturing	149	
43	manufacturing	96	manufacturing	150	
44	contractor	97	construction	151	retail
45	service	98	non-profit social services	152	service
46	service	99	service	153	service
47	healthcare	100	child care	154	manufacturing
48	service	101	construction, manufacturing	155	service
49	service	102	non-profit services	156	retail
50	retail	103	manufacturing	157	
51	service	104	service	158	agriculture
52		105	retail	159	retail
53		106	service	160	child care
		107	service	161	manufacturing

*Blank space indicates no response

Appendix B Narrative Comments from Survey

162 manufacturing
163 retail
164 service
165 retail and service
166 landscaping
167 service
168 service
169 healthcare
170 service
171 tag agency
172 retail
173 legal
174 retail
175 healthcare
176 retail
177 car sales and service
178 wholesale
179 manufacturing
180 law office
181 tag agency
182 HVAC sales and service
183 healthcare
184 healthcare
185 manufacturing and retail
186 service
187 retail
188 sales and service
189 newspaper
190 pharmacy
191 construction
192 transportation
193*
194 retail tire/auto service
195 retail
196 service
197 healthcare
198 healthcare
199 child care
200 convenience store
201 general contractor
202 farming
203 retail
204 church
205 service
206 retail
207 retail
208 retail
209 construction
210 law office
211 manufacturing and retail
212 child care
213 real estate
214 dirt construction
215 newspaper
216 convenience store
217 human service

*Blank space indicates no response.

Appendix B Narrative Comments from Survey

Appendix B (b). If you could say one thing to other employers who might be considering enrolling in OEPIIC, what would that be? (Listed by Survey Number)

- 1 This program is great for our low income employees and their spouses.
2 definitely take advantage of this plan! It has been wonderful
3 *
4 This is a great program that will help you as well as your employees
5 Please inform yourself of the benefits and cost
6 Great way to help furnish health insurance to employees
7 it is great for our employees
8
9 it is simple to do
10 Take advantage of a beneficial program that has made a definite impact on our company
11 very beneficial for small business owners
12 this is the best way to have health insurance for your employees--just wish it was available for all employees
13 the only thing that is designed for small business that works.
14 be aware of the income levels
15
16 This process was fairly easy and the staff was very eager to help with info. I did not understand the the cost
share of the insurance--it is wonderful
17
18 do it!
19
20 you have to be paying poverty level wages to participate. Better off on welfare
21 do it!
22 it helps your staff feel safer about their health care needs
23 complicated process but probably worth it
24
25 do not hesitate! Great program with very knowledgeable people
26 this program does seem to work well
27 do it!
28 take advantage if you have worker's who qualify
29 check each employee's eligibility before doing anything else
30 it has been a very easy rewarding experience
31
32 very helpful program
33 wonderful opportunity for companies who could not otherwise afford benefits and for their employees
34
35 without the help of O-Epic iw ould not be able to provide health insurance to my employees. I feel so much
better that my employees have haelth coverage
36
37
38
39 check the income limit
40 if you are your employees make less than 185% of the FPL, this program will save youo and them a huge
amount, provide excellent coverage and greatly enhance morale, logevity and reduce sickness
41 excellent opportunity to provide insurance to workers
42
43
44 do it!
45 good chance to give your employees the chance to have health ins.
46 stay away from o-epic
47
48 effective way for small employers to manage health care costs
49 I would say that it is a good program if you have low income employees
50 try it but you probably won't qualify any of your employees because of the income level

*Blank spaces indicate no response.

Appendix B Narrative Comments from Survey

51 it is a blessing!
52 it appears to be a good way to provide a group health plan at a more affordable cost
53 only older employees see benefit of the health insurance--younger workers just want more money in place of insurance
54 take advantage of this plan to help provide coverage for employees who may not opt for coverage because of their portion of premiums
55*
56 the o-epic program is the greatest program for small business employers and employees to be offered in years
57
58 try for the sake of employees
59 If the company provides insurance, it is of no help--most employees income exceed the requirements
60
61 definitely do it
62 it is very helpful to employees to give them relief of burden of worrying about health insurance costs
63 worth the benefit
64
65
66
67 enroll it is a great program
68 give it a try it has been worth it for us
69
70
71
72 do YOUR employees qualify?
73
74 start today
75 do it! Great insurance--easy to administer
76 it helps
77 this is a low income insurance program not designed for "your" small business--I thought that was what Medicaid (was) for.
78
79 it has been a good benefit for my employees
80 employees at OEPIC are easy to work with
81 encourage your employees to take advantage of this. Health insurance iw the responsible way to live life.
82 it helps employees to insure their spouses that wouldn't otherwise be able to
83 helps cover people who might not be able to otherwise get insurance at a small cost to you
84 it is great for low income workers
85
86
87 if you can get it, it is very helpful
88
89 OEPIC is an opportunity for low income families to have health coverage they need
90 this will help you offer insurance, without it, I couldn't offer it
91 great investment to retaining employees
92 it worth looking into
93 by all means apply! It can not hurt to try and if you are accepted/approved you can offer insurance as a benefit. I'm glad OK has the program
94 any employee that qualifies for OEPIC should have that option
95
96 please enroll, it is a great program for lower income families who can't afford to insure spouses. Our company pays all the premiums for the employees
97 forget it! It is a waste of time. This only applies to minimum wage workers and only then if only one person in the home is working. It is a useless program.
98 not sure
99 worthwhile and not demanding
100 it is very good program and I hope it stays around for a long time

*Blank spaces indicate no response.

Appendix B Narrative Comments from Survey

- 101 it is affordable
102 it is a wonderful program. It saves money and allows people to get insurance when they would not otherwise be able to afford it
103 Unlike most government agencies OEPIC provides very high quality phone assistance--real humans!--who are very polite and stay with you and not matter howlong it takes--till problems are solved and questions answered. This is very much appreciated.
104 they are great to work with---however, we need it for the middle class too!
105*
106 it is a good deal for low income employees, but maynot be fore you if you don't qualifyq
107 only low -low income employees should apply--sadly
108 great program
109 you have nothing to lose and at the very least might save money on your insurance costs
110 your program helps small companies offer insurance when you otherwise could not
111 this is an awesome way for small businesses to ofofer benefits that we could not offer before O-EPIC
112
113
114 I would tell them about question # 12
115
116 we believe this progrm is beneficial to employees who qualify as well as the employers who employ them
117
118 it is great--my employees had no insurance--now I can afford, as well as the employee insurance
119 very benficial
120 without this program we would not be able to have health hinsurance due to the high cost
121 make sure your employees will sign up before you go through the effort
122
123 it offers a great service to lower paid employees which helps in attracting better quality employees
124 best thing for your small business
125 apply for it! It helps both the employer and the employee. It is worth the few minutes it takes to apply
126 Enroll as early as possible--don't' believe it if OEPIC sends you even written working or you are reassured on the phone you have plenty of time to get everything going there is no help after 30 days-no back dating
127 program worth considering
128 its been great, we did not know what we were going to do--our insurance was goingup and we were looking into lowering the benefits and raising the deductibles. We still raised the deductibles. Westill got to pick our insurace company
129 it's a great solution to affordabel health care for the small employers
130 apply
131 you must apply--it is a tremendous cost savings
132 don't wait
133
134 it makes insurance more affordable
135 we would defnitely tell them to apply. It is a good benefit for employee and employer
136 participating in OEPIC enables our employees to afford health care when they wouldn't be able to otherwise
137 be sure low income
138 helpful to needy people
139 it was very easy, just let your agent help you
140 it is not available to most workers and is a waste of time to apply
141 it helps the employee and the business
142
143 it is the best thing we have done for our employees
144 at least look into the program
145 it is worth the time and effort
146
147 this is a chance to get insurance for your employees that is affordable
148 look into it
149 it could benefit your employee
150

*Blank spaces indicate no response.

Appendix B Narrative Comments from Survey

151 go for it
152 do it --it is great!
153 it could be beneficial to your employees and to you
154 it's a great plan for being able to offer health insurance to your employees
155 do it
156*
157 it not only a great benefit for your employees but also the employer
158 this is an excellent way to offer coverage to your employees without undue burden to a small business. We could not afford to offer coverage without this program
159 it is a great program. There are problems but they are working them out. We are grateful to a part and have much better insurance
160 OEPIIC is not based on your business--it is based on each employee's income. If the employee is making decent \$ and doesn't have dependents, they don't qualify
161 it is work the effort
162 it's a great help for those and their families that are less fortunate
163
164 do it!
165 This program is great for our low income employees and their spouses
166 only for those who pay minimum wage--others get no benefit
167 this makes it affordable for me and my employees--it is a very good deal
168 it has been a real boost for us. It will be a real attraction for new employees to have low cost insurance coverage
169
170 the program gives employees an additional incentive to begin work
171 Give your employees a chance to be proud and not depend on Medicaid
172 check and see if it will work for you and help your employees
173 if you can take advantage of it, go for it
174 sign up use it
175 go for it, great service
176 it opens up more opportunities for potential employees because it allows you to offer them ehealth insurance benefits
177 affordable option for those who "care" about their employees!
178 this is a great program, use it
179 guest program!
180 it is a great program and it helps people who would not have insurance otherwise
181 fantastic program for small businesses who want to provide proper medical coverage for their employees but couldn't afford prior to O-EPIC. Great customer service at O-EPIC!
182 very good program
183 It is worth the effort. More employees will be able to afford health insurance
184 well worth it
185 it has allowed our employees to add spouses on and still save money on their premium
186 do it now
187 do it
188
189 do it
190
191 For small businesses it is well work the paperwork required
192
193 it helps people to afford insurance
194 do it but expect a lot of hassle
195 great leader in this state and no other state has it
196 this is an opportunity to provide a way for small employers to insure Oklahomans and also inable businesses to provide benefits that are important and affordable
197 it is pretty simple to do and can be helpful to you and employees
198
199 my insurance agent has been great

*Blank spaces indicate no response.

Appendix B Narrative Comments from Survey

200*

201

202 the program is too beneficial not to apply

203 don't bother

204

205 it is a tremendous benefit for small business owners

206 its great. You can finally afford health insurance

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213

214 this is a great opportunity for borth the employer and employee to be able to have/provide health insurance
for everyone

215 the system is very difficult and rigid. Very difficult to get help and answers

216 That finally the working poor can afford insurance. This is the best thing ever in my 28 years of being self-
employed. I am proud of our state.

217 wonderful program

*Blank spaces indicate no response

Appendix B Narrative Comments from Survey

Appendix B (c). If you have been approved for the OEPIC program, but your employees have not applied, why? (Listed by Survey Number)

1*
2
3 I have 1 concern. A friend looked into BC/BS, (we are both 58). She was quoted \$350-450, mine is \$874. Why is this? E mail bkesinger@itlnet.net
4
5 The only communication I have was with BCBS agent--was I supposed to hear from someone else?
6 really a big asset to small companies. Just wish we had more that could qualify.
7
8 we can not get any help due to income level set too low. This has been disappointing to us.
9
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11
12
13 thanks
14 #8--very little (\$12,000) reimb by employers for spouse/family coverage
15
16 Did not receive brochures on materials--only infor after we were approved.
17 Don't want the charge, even LOW charge, taken out of check.
18
19
20 never signed employees make too much by approx \$2,000 each
21
22 we would like help with one top staff that makes too much money--they never get help--most all (are) single
23 for employers who already provide 100% payment, they should be able to apply without employee involvement
24
25
26 there is a lot of information required
27
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33 terrific in every way
34
35 hopefully my employees will qualify for next year.
36 We as a company qualified but none of our employee's qualified so we have not received any support from the program
37
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39
40 I sincerely appreciate this program and hope more of my staff can participate as time passes. I also hope 2 other things, 1)increase to employers with 50+ employees and 2)increase to 300% of FPL.
41 We're very happy to provide this to our workers most of whom have never had insurance before.
42 If I had one wish with this program, I would raise the numbers--yearly salary that qualifies people--thanks, great program.
43 no one qualified for the program
44†
45 as the program grows, more will enroll
46 Rhonda is a person to be reckoned with--she is always right. Poor communication won't return phone calls and they always send the wrong amount in their favor and it still remains unpaid.

*Blank spaces indicate no response.

†Blank spaces indicate no response.

Appendix B Narrative Comments from Survey

47

48

49 we are a small employer who offers andpays for employee's single coverage insurance. Dependants and spouse are paid by the employee if they choose to get it--but because insurance is so high, our benefits we offer are limited and deductibles are high so we canafford it and so they will at least have some kind of coverage. the price it costs small companies to get the insurance is what stops them from offering it. if the program would contribute to the companies who qualify a smaller portion of all employees premiums and contribute as they are now to the low income employees, then it would be big enough benefit for companies so they could afford to offer it. whic is the other main reason people don't have insurance--their company doesn't offer it--the program needs to make it beneficial to the company even if no one qualifies so they can at least afford to offer it. Vicki Lucas

50

51 thank you!

52

53 thought it would help me retain employees

54

55

56 thank you!

57

58 this needs to be available to more people

59 I thought this was to help small business that was providing insurance

60

61 we really appreciate the program

62 thank you--it has helped my staff and i

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68 It would be better if we could insure our children too.

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72 the health insurance we changed to in order to qualify is much better.

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76 thanks!

77 The poverty level for people with zero dependents affects us--I have 50+ year old teachers that can't get insurance.

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82 enrollment process was siimple and went smoothly

83*

84

85 to qualify it should be based on individual income vs family income

86

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88

89

90 thank God for this program!

91

92

*Blank spaces indicate no response.

Appendix B Narrative Comments from Survey

- 93 the folks at the OEPIC support center are great! Helpful, pleasant and a pleasure to work with. Might want to streamline your process for cereving employer insure statements--have had trouble with them being input.
- 94 Everyone that I have spoke to at your office has been so helpful--thank you!!!
- 95
- 96 I have told our CPA about this program and he has helped other small businesses apply
- 97 Raise the amount of income you can make so more people are eligible. You can't live on what you call "poverty level" and you sure can't hire people to work for that.
- 98
- 99
- 100 keep ti for the small businesses
- 101 the OEPIC program has not affected us at all, as of this date we haven't been reimbursed for the insurance premiums we have paid
- 102
- 103 It is hard for divorced people to apply and get it--and they need it the most.
- 104 please expan the income limits or do not count social security. Older workdres have very expensive insurance
- 105
- 106 When my first O-EPIC subsidy payment came in I was surprised to see that there was no subsidy applied to my personal premium amount. I don't recall where I got the idea that becausei was owner of the compnay and would be paying a partial amount of my employees premiums that i would get a subsidy payment also. Maybe it was my lack of listening to my agent or wishful thinking on my part. My new Blue Cross Blue Shield policy costs me about 25% of my monthly adjusted gross income. I think it is good insurance but it is expensive too. I have 2 problems with the OHCA 1) my paperwork was submitted on time to begin coverage for my company and i have paid the april premium, but i still have not recieved a subsidy payment for april, 2006. 2) one of my employees has coverage for himself and his spouse. His and his wife's original application was approved but to date i have received no subsidy fohis wife. My agent says there is a problem with her employment, she is a member of the Army Reserves. She is now on inactive duty. She recieves no medicl benefits from the Army unless she is on active duty.
- 107 The program should help families with more than \$30,000 yr income.
- 108
- 109
- 110
- 111 thank you so much for offering this program
- 112
- 113
- 114 it is really good program, it just didn't help us
- 115 the employee who was eligible registered on line--we tried to faxinfo in like we were supposed to--heard nothing next mo (no deposit) so called--person I talked to said to refax all things to her I did and this month still no deposit so called gain. this time was told the employee had not applied--where his application went, who knows. Now we have lost 3-4 months of help. he now can not get on the web site with his number that was assigned to him--what the problem is no one seems to know--i wish i had been told two months ago that there had been a problem
- 116*
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- 120 thank you for allowing us to be part of this program
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- 123 this is a tremendous asset to our company and offers a great service to low paid workers
- 124
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- 127
- 128 we have nothad any new hires. No one has been sick or injured--we have not had to use the insurance but our peace of mind is a lot better
- 129 the girls at OEPIC have been great to work with--thanks for the great customer service

*Blank spaces indicate no response.

Appendix B Narrative Comments from Survey

130

131 thank you!

132 the staff was very helpful

133

134

135

136 would be nice if employers would qualify for some time of reduced premium assistance

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141 you need to make it easier to make a change--I added another plan and HMO and it was confusing and took too long and my employee was not covered for awhile because of this

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153 I think this is a wonderful program for the low income worker or the worker with a large family or single parent

154 it would be nice if this benefit was available for employees with higher income (but not a lot higher)

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158 the only difficulty I had was trying to enroll my employee on line. Could not get the program to work, but the person I called at OEPIC was very helpful and entered the information for us

159 the enrollment process needs some clarification. Both months we have not been reimbursed properly. We had to call but was then take care of

160

161 it is too early to tell about the impact of OEPIC

162 we have not been with OEPIC long enough to answer regarding its impact on us. its sad for those that pay taxes here in Oklahoma but live right across the state line and because of that they can't qualify for this program

163

164 what a blessing to be able to have insurance

165 our employees are very pleased with this program and so are we

166

167 thank you!

168 we hope that this program will be continued. It is such a benefit for small businesses.

169 we need coverage for older employees since their insurance is so high. If their income levels could be higher to offset the expensive insurance, if not we can not afford the insurance. We can not do insurance any more for older employees

170 the program is great but I'm unhappy with Blue Cross. They say everything is preexisting even a cold! They eventually pay but it is a hassle!

171

172

173

174 we are 3 brothers, 1 deceased with 1 employee insurance cost was putting us in debt--it is a life saver for small biz

175

176

* Blank spaces indicate no response.

Appendix B Narrative Comments from Survey

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181 Thank you for the patience and gracious service during our phases of enrollment and thank you for the continuous great customer service!

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190 I'm in favor of O-EPIC and am glad to be able to offer insurance to my employees. Now the state needs to develop a plan for the employers--I make too much to qualify for O-EPIC so I am still forced to pay over \$5500 per month for my own health insurance because there is no plan available that is any cheaper

191

192

193

194 now that we are set up, I think things will go smoothly--it has just been hard getting it all done--the system rejected the application; audit was done, statement from insurance company stating payment status was unattainable; delayed O-EPIC approval and payments, etc.

195 about time for state to take charge of the Medical and hope that state will take charge of insurance company and slap on their hand more to keep it affordable

196 great program, hope it continues, thanks!

197 we feel amount you can make to qualify is too low, we have couple we feel should qualify

198*

199 my profit margin is so low that I hope I will be able to pay employer portion to remain in the program, I may have to drop it in the future

200

201

202

203 I feel misled after all the application process--I find out no one will qualify--income should be raised.

204

205 thank you

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214 we are not eligible any longer because our plan was changed (by management) and we no longer have a qualifying plan. We only had one employee to qualify. He had insurance coverage but his family did not.

With this program he was able to get coverage for his wife and 3 children. Keep up the great work. I hope this lasts so the low income can have coverage too.

215

216 This program is great, although it is quite confusing at first.

*Blank spaces indicate no response.

Appendix B Narrative Comments from Survey

Appendix B (d). Additional Comments. (Listed by Survey Number)

1*
2
3 I have 1 concern. A friend looked into BC/BS, (we are both 58). She was quoted \$350-450, mine is \$874. Why is
this? E mail bkesinger@itlnet.net
4
5 The only communication I have was with BCBS agent--was I supposed to hear from someone else?
6 really a big asset to small companies. Just wish we had more that could qualify.
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8 we can not get any help due to income level set too low. This has been disappointing to us.
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13 thanks
14 #8--very little (\$12,000) reimb by employers for spouse/family coverage
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16 Did not receive brochures on materials--only infor after we were approved.
17 Don't want the charge, even LOW charge, taken out of check.
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20 never signed employees make too much by approx \$2,000 each
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22 we would like help with one top staff that makes too much money--they never get help--most all (are) single
23 for employers who already provide 100% payment, they should be able to apply without employee
involvement
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26 there is a lot of information required
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Appendix B Narrative Comments from Survey

- 49 we are a small employer who offers andpays for employee's single coverage insurance. Dependants and spouse are paid by the employee if they choose to get it--but because insurance is so high, our benefits we offer are limited and deductibles are high so we canafford it and so they will at least have some kind of coverage. the price it costs small companies to get the insurance is what stops them from offering it. if the program would contribute to the companies who qualify a smaller portion of all employees premiums and contribute as they are now to the low income employees, then it would be big enought benefit for companies so they could afford to offer it. whic is the other main reason people don't have insurance--their company doesn't offer it--the program needs to make it beneficial to the company even if no one qualifies so they can at least afford to offer it. Vicki Lucas
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104 please expan the income limits or do not count social security. Older workders have very expensive insurance

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APPENDIX C

Biographical Sketches of Project Faculty and Staff

Garth L. Splinter, M.D., MBA
Division Head, Primary Care Health Policy Division

Dr. Garth Splinter began his post-secondary education at the University of Oklahoma where he majored in industrial engineering, receiving his Bachelor of Science degree in 1974. He then enrolled at Harvard University's business school where he earned his MBA in 1976. He graduated from the Oklahoma University College of Medicine in 1984, with a Doctor of Medicine degree. He completed residency training in family medicine in 1987 and joined the faculty at the Oklahoma University Health Sciences Center (OUHSC) as the Director of the Health Sciences Center for Health Affairs and Rural Health Programs and part-time Medical Director for the Employees Group Insurance Board. Dr. Splinter served as Special Assistant on Health Care Issues to Governor David Walters from 1991–1994. He was also the Chair of the Commission on Oklahoma Health Care and served as Principal Investigator for the Robert Wood Johnson Grant of State Initiatives on Health Care granted to the Governor's office.

In 1994, Dr. Splinter was appointed by the Governor and confirmed by the Oklahoma Senate as Chief Executive Officer of the newly created Oklahoma Health Care Authority, the agency that oversees Medicaid. During Dr. Splinter's five years as CEO, the Oklahoma Medicaid program was successfully converted to statewide managed care. In 1999, Dr. Splinter joined the Department of Family Medicine, University of Oklahoma College of Medicine, as an Associate Professor. From 1999 to 2003, he also served as the Chief Medical Officer of the University Hospitals Trust under a contract with the University. From 2001 to the present, he has served as a board member for Ribomed Biotechnologies, Inc., a Phoenix-based startup company. From 2003 to the present, he has been the Director of the Primary Care Policy Division in the Department of Family Medicine. In that position, he oversees health policy studies addressing such issues as Medicaid reform, employee sponsored health care, and issues related to the uninsured and underinsured in Oklahoma.

Laine McCarthy, MLIS
Associate Professor and Writer/Analyst, Primary Care Health Policy Division

Laine McCarthy, MLIS, joined the Department of Family & Preventive Medicine on January 1, 1984 as a Research Assistant. She served as a Senior Administrative Manager and as a Technical Writer before her promotion to the rank of Instructor on January 1, 1995. In June, 1998, Ms. McCarthy was promoted to Clinical Assistant Professor, and then in June 2001, she received promotion to Clinical Associate Professor. She has a BA degree in English Education from the University of Arizona-Tucson, and a Masters in Library and Information Studies from the University of Oklahoma-Norman.

During her tenure with the University, Ms. McCarthy has been the recipient of several education and training grants including two grants from the Bureau of Health Professions, Health Research and Services Administration (HRSA), US Department of Health and Human Services. The first grant was awarded in 1992 (\$320,000) to establish a library in the Department of Family & Preventive Medicine, and develop and implement a residency curriculum in evidence-based medicine. The second grant, awarded in 1998 (\$500,000), established a faculty information technology training program for in-house and community physicians. She has presented the results of these grant programs in several national forums including the Society of Teachers of Family Medicine and the American Academy of Family Physicians. Ms. McCarthy is also the author of numerous manuscripts and books on a variety of topics including primary prevention of microalbuminuria (published in the Journal of Family Practice), writing case reports, medical terminology and evidence-based medicine. She has participated in the design and conduct of numerous successful research projects for the Oklahoma Health Care Authority. Laine currently serves as writer/analyst for the Division of Primary Care Health Policy.

APPENDIX C

Biographical Sketches of Project Faculty and Staff

Sarah D. Hyden

Projects Coordinator, Primary Care Health Policy Division

Sarah Hyden joined the University of Oklahoma Health Sciences Center (OUHSC), Department of Family and Preventive Medicine, Primary Care Health Policy Division as Project Coordinator in May of 2003. She holds a Bachelor of Science degree from Southern Nazarene University. Prior to joining OUHSC, she spent six years in healthcare sales and marketing field, with a focus on outreach and contact management, specifically with physicians and other health practitioners. Ms. Hyden is responsible for supervision of projects within the Primary Care Health Policy Division. Additionally, she ensures all work requirements and time deadlines are met; establishes protocol for completion of grants, contracts and/or Division research and analysis projects. She conducts research projects including presentations, survey administration and data collection to targeted populations throughout Oklahoma and serves as liaison between the Department, the Division and various government and university agencies. She has participated in the design and conduct of numerous successful research projects for the Oklahoma Health Care Authority. Ms. Hyden is currently the projects coordinator for the division.

Andréa L. Adams, MPH

Health Policy Analyst, Primary Care Health Policy Division

Andréa Adams is the health policy analyst for the division. Andréa joined the department in August of 2004 after working as a research associate in health policy research at the Oklahoma State Health Sciences Center in Tulsa for two years. She has also served as an independent statistical consultant for various non-profit agencies in Oklahoma. Andréa earned her bachelor's degree from the University of Nebraska in Lincoln in 2000 and completed her Masters of Public Health degree at the University of Oklahoma Health Sciences Center in 2002. Her primary responsibilities for the division are data analysis and statistical reporting. She has experience using statistical tools such as SPSS and MS-Excel and has published several articles on health policy research prior to joining the division.

Denise M. Brown, PHR

Senior Administrative Manager, Primary Care Health Policy Division

Denise Brown has been in the healthcare field since 1974. Denise has been with the University of Oklahoma Health Sciences Center (OUHSC) since 1984 and joined the Department of Family and Preventive Medicine in 1989. Ms. Brown holds a Bachelor of Science degree in Social Work and is a certified Professional in Human Resources. She has an extensive background in human resource, administrative and hospital based management; including patient and employee relations. As senior administrative manager, she works closely with the projects coordinator.

APPENDIX C
Biographical Sketches of Project Faculty and Staff

Steven A. Crawford, M.D.

***The Christian N. Ramsey, Jr., M.D., Endowed Chair in Family Medicine
Department of Family and Preventive Medicine***

Steven A. Crawford, M.D., is the University of Oklahoma, College of Medicine's Christian N. Ramsey, Jr., M.D., Chair in Family Medicine. Dr. Crawford graduated Magna cum laude from Claremont McKenna College in 1975 and from the University of Illinois, College of Medicine in 1979. He completed his residency training at the Waco Family Practice Residency Program in 1982 and a family medicine teaching fellowship, also in Waco, in 1983. Dr. Crawford served as chair of the family medicine department at the Oklahoma City Clinic, a private for-profit, physician-owned, multi-specialty group practice, from 1989 until 1998. He has served as Professor and Chair of the Department of Family and Preventive Medicine since 1999. His prior appointments include Interim Chair, Vice-Chair, Residency Program Director, and Associate Residency Program Director at OU. He has also served as Chief of the Family Medicine Service at the OU Medical Center since 1990 and Chairman of the OU Medical Center Board of Trustees since 2000.

Dr. Crawford has served as the elected president of the Oklahoma County Medical Society in 2002 and served as the president of the Oklahoma Academy of Family Physicians in 1994. He has also served as Chair of the Oklahoma Health Care Authority's Medical Advisory Committee and in many other professional positions over his career.