This brief summarizes results from a survey conducted in 2017 of non-elderly Mississippi adults regarding their health insurance coverage, as well as federal and state policies related to health coverage. It serves as a follow-up to similar surveys conducted in 2013 and 2014-15.

The Center for Mississippi Health Policy commissioned researchers at the Social Science Research Center (SSRC) at Mississippi State University to survey non-elderly Mississippi adults to assess their knowledge, attitudes, and behaviors related to health insurance, the Affordable Care Act (ACA), and proposals to replace the ACA. More detailed information, including the full report and a chartbook, is available at www.mshealthpolicy.com.

Opinions of the Affordable Care Act and Its Components

As found in the previous surveys, respondents report little knowledge of the ACA or the Health Insurance Marketplace (formerly known as “Exchanges”). Three out of five (60%) say they know nothing or only a little about the ACA, and 64 percent know little or nothing about the Health Insurance Marketplace.

The rates of the uninsured reporting little or no knowledge of the ACA or the Health Insurance Marketplace are significantly higher than those with insurance, as shown in Figure 1.

**FIGURE 1. MISSISSIPPIANS’ KNOWLEDGE OF THE ACA BY HEALTH INSURANCE STATUS (2017)**

![Pie charts showing knowledge levels by insurance status]

- Percentage who reported knowing little or nothing about the health reform law known as the Affordable Care Act (ACA)*
  - Insured: 58%  
  - Uninsured: 70%

- Percentage who reported knowing little or nothing about the health insurance exchange or marketplace under the ACA*
  - Insured: 64%  
  - Uninsured: 68%

- Percentage who believe they have enough information about the health reform law to understand how it affects them
  - Insured: 56%  
  - Uninsured: 49%

In a departure from previous surveys, more Mississippi adults have a positive opinion of the ACA than have a negative one, as shown in Figure 2 (47% support vs. 38% non-support and 15% unsure).

**FIGURE 2. SUPPORT FOR THE ACA (2013-2017)**

<table>
<thead>
<tr>
<th>Income Per Year</th>
<th>Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; $10,000</td>
<td>68%</td>
</tr>
<tr>
<td>$10,000 to $29,999</td>
<td>71%</td>
</tr>
<tr>
<td>$30,000 to $59,999</td>
<td>63%</td>
</tr>
<tr>
<td>$60,000 to $99,999</td>
<td>46%</td>
</tr>
<tr>
<td>&gt; $100,000</td>
<td>36%</td>
</tr>
</tbody>
</table>

Source: Southward, L.H., et. al. (2017).
Note: Statistically significant difference (p<.001)

As in previous surveys, respondents showed support for many of the components of the ACA, with the notable exception of the individual mandate penalty (Figure 3).

**FIGURE 3. MISSISSIPPIANS' OPINIONS ON HEALTH REFORM (2017)**

<table>
<thead>
<tr>
<th>Statement</th>
<th>Percentage Agreeing</th>
</tr>
</thead>
<tbody>
<tr>
<td>People should be able to buy health insurance in any state if the plan offers better value</td>
<td>91.7%</td>
</tr>
<tr>
<td>All large employers should be required to provide health insurance to their employees</td>
<td>85.4%</td>
</tr>
<tr>
<td>There should be subsidies to help low-income people buy health insurance</td>
<td>81.6%</td>
</tr>
<tr>
<td>People with pre-existing conditions should not have to pay more for health insurance</td>
<td>77.9%</td>
</tr>
<tr>
<td>Children should be able to be covered on their parent’s health insurance policy to age 26</td>
<td>73.9%</td>
</tr>
<tr>
<td>The Medicaid program in Mississippi should be expanded to cover everyone below the Federal Poverty Level</td>
<td>72.1%</td>
</tr>
<tr>
<td>Most individuals should be required to have health insurance</td>
<td>58.1%</td>
</tr>
<tr>
<td>Penalties or fines should be imposed on people who don’t buy health insurance</td>
<td>18.0%</td>
</tr>
</tbody>
</table>


There was a considerable increase in the percentage of those surveyed who said they had enough information about the ACA to understand how it affects them or their families: from 37 percent in 2013 to 54 percent in 2017. As illustrated on the left, 40 percent forecasted in 2013 they would be worse off as a result of the ACA, only 29 percent in 2017 said they were worse off due to the ACA. Almost half (47%) said they were unaffected by the ACA, an increase from 2013 when only 18 percent predicted they would be unaffected.

Of those surveyed, approximately 16 percent reported not being currently covered by health insurance, a drop from 23 percent in 2013. By far, the most common (45%) obstacle to having health insurance cited was cost. When asked about the Health Insurance Marketplace, over half of Mississippi adults think that the Marketplace has led to higher insurance costs, compared to seven percent who see the Marketplace as lowering costs. Over one-third expressed the opinion that the Marketplace has resulted in a smaller choice of health plans, while one-fifth said the result was a larger choice of health plans.

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Responses of the Uninsured

Uninsured respondents overwhelmingly perceive health insurance as something they need, but were also significantly more likely to state that insurance is not worth the cost as shown in Figure 4.

Approximately a third of the uninsured reported that they tried to enroll in insurance coverage through the Health Insurance Marketplace. Of these respondents, most (52%) said they did not enroll because the plans in the Marketplace were unaffordable.

One strategy proposed for making health insurance more affordable is to allow insurers to offer plans with high deductibles and co-pays or fewer benefits in order to lower the premiums. When asked if they would purchase such a plan if the cost was affordable, 77 percent of the uninsured said they would. When asked what amount they would be willing to pay per month for an affordable plan, more than half (55%) listed a price that was $75 or less. Without substantial subsidies, the price of basic health insurance coverage with reasonable cost-sharing far exceeds the amount people are willing to pay.

Access to Care and Health Status

There were significant differences in self-reported health status and access to care based on the type of health insurance coverage and lack of coverage. Those enrolled in a government-based health insurance plan (i.e. Medicare or Medicaid) were more likely to rate their health status as poor or fair than those in other insurance categories. Almost half (49%) of those in government insurance programs self-reported their health as poor or fair, compared to 29 percent of the uninsured, 23 percent of those with individual policies, and 19 percent of those with employer-based coverage. The fact that eligibility for government-based programs encompasses old age and disability may strongly influence these ratings.

The uninsured were significantly more likely to report difficulty in accessing health care services than those with government coverage, private individual policies, or employer-based insurance. More than half (55%) of uninsured respondents reported not having a regular source of health care, compared to 22 percent of those with individual policies, 18 percent of those with employer-based coverage, and 12 percent of those covered by government programs.
Discussion

The findings of this follow-up survey provide insight into the attitudes, opinions, and behaviors of Mississippi adults since the initial survey in 2013. There continue to be low levels of knowledge about the Health Insurance Marketplace and the Affordable Care Act, particularly among uninsured adults in Mississippi. Although there was a significant increase in support of the ACA, less than half of adults favor the law overall, and a very high proportion oppose the individual mandate penalty. However, Mississippians strongly support many of the health reform components in the law, including subsidies for low income individuals and Medicaid expansion.

The percentage of Mississippi adults who are uninsured has dropped since 2013, but cost is still the greatest barrier to their obtaining health insurance coverage. The uninsured overwhelmingly perceive value in health insurance coverage, although not to the extent of the insured, but are more likely to state that health insurance is not worth the cost. For those with low incomes, unaffordable private coverage and lack of access to premium assisted coverage through an employer, the Marketplace, Medicaid, or other source leave some adults with no other alternative than to remain uninsured.

Information on all survey responses can be obtained from the full SSRC report and a chartbook on the Center’s website at www.mshealthpolicy.com.

Sources

