

Broker Perspectives on Medicare Advantage Enrollment and Coverage Decisions Among Veterans



Melissa Hafner, MPP; Robyn Elkins, MA; Juana Ruiz, BS; Susan Joy, MA, MPH

Appendix B. Broker Interview Protocol

Introduction

Thank you for participating in our conversation today. My name is _____, and my colleague(s) _____ and I work for an organization called American Institutes for Research (AIR). As we indicated in our outreach, we are leading a study funded by Arnold Ventures to understand how veterans enroll in and use Medicare Advantage plans. Today we'll talk about your perception of veterans' needs when they enroll in MA plans, your understanding of the overlap between VHA and MA benefits and any actions that MA plans may take to influence where veterans receive their care, and any recommendations or information that you provide to veterans when they're selecting or enrolling in an MA plan.

CONFIDENTIALITY: First, I would like to assure you that everything that you say during this conversation will be kept confidential. Your name and the names of any individuals that you mention will not appear on any report or other publications, and the recording of today's conversation, along with any transcripts and notes, will be stored on a secure server that is only accessible to members of our research team. The reports we produce will summarize the information gathered and will never be associated with an identifiable individual. We will destroy the interview recording from this study 5 years after the study ends.

PARTICIPANT RIGHTS: Taking part in this study is voluntary. If you choose not to participate, your role as an agent or broker will not be affected.

RISKS AND BENEFITS OF PARTICIPATING IN THE STUDY: This interview asks about your experiences working with veterans who enroll in Medicare Advantage plans and any interactions you may have with the MA plans. Answering these questions might cause to you feel uncomfortable. There are no right or wrong answers to the questions we will ask today, so feel free to share your thoughts. You may choose not to answer every question, and we can stop the discussion at any time. Your participation in this interview is voluntary and you do not have to answer any questions you don't want to. We hope that your participation in this study will help policy makers and other decision makers improve the quality and efficiency of the Medicare program.

INCENTIVES: You will receive an electronic gift card for \$75 via email as a token of our appreciation.

VERBAL CONSENT: Do you consent to participate in this study?

Our discussion will take approximately 60 minutes. We would like to record the session for note-taking accuracy. However, we will not record if there are any concerns about the recording, and instead will

take notes. Do you have any objection to being recorded? Do you have any other questions about the study or your participation before we begin?

Start recording if there were no objections.

Questions (55 minutes):

Time guideline: 0:05 minutes into the call.

1. Let's start with introductions. Please tell me your name, title, and your role at your company. It would also be helpful to know how long you have been working as an agent/broker.

Great, let's dive into the substance of our discussion. I want to start by asking you to walk me through the process of enrolling someone who is a veteran into a Medicare Advantage or "MA" plan.

2. First, when someone comes to see you to enroll in an MA plan, do you typically ask them if they are a veteran, or do you wait to see if they self-identify as a veteran?
 - a. **[IF THEY PROACTIVELY ASK]:** How does knowing their veteran status help you find them an MA plan that's a good fit for them?
 - b. **[IF THEY DON'T ASK]:** Ok, so knowing their veteran status doesn't inform the selection of a plan, is that right?
3. How familiar would you say you are with veterans' benefits—health benefits that veterans can get through the VA—as compared to Medicare Advantage benefits?
 - a. What's your understanding of how the specific benefits interact or overlap?
 - b. What kinds of coverage or services might veterans lose or duplicate if they enroll in an MA plan? Do you see these overlaps as beneficial or confusing?

Time guideline: 0:20 minutes into the call.

Let's move on to some questions about the benefits offered by MA plans and how veterans use them.

4. Thinking about the MA plans that are available in your area, can you think of any that seem to be intended for veterans? (prompt: based the name of the plan, the plan design, benefits, etc.)
 - a. **[IF YES]:** Are there differences between the benefits that those MA plans offer and other MA plans? If so, what are those differences?
 - i. Do you see differences in how plans describe coordination with VA benefits?
 - ii. **[IF PLAN NAMES, IMAGERY, ETC. MENTIONED]:** What themes or messages seem to resonate with veterans?
 - b. **[IF NO, GO TO NEXT QUESTION]**
5. Do you find that veterans enrolling in MA plans are looking for coverage of certain benefits?
 - a. **[IF YES]:** What are some of those benefits? (prompts: behavioral health, physical therapy, other specialty care.)
 - b. If that overlaps with benefits they could get through the VA, how do you typically explain those overlaps to veterans?

c. [IF NO, GO TO NEXT QUESTION]

6. What do you hear from your veteran clients about their experiences with MA plans?
 - a. Is the feedback different from other MA plan enrollees?
 - b. Do you find that veterans stay with their MA plan or do they tend to switch?

Time guideline: 0:40 minutes into the call.

7. Of the MA plans you sell, are there certain ones that you recommend for veterans?
 - a. [IF NO, GO TO NEXT QUESTION]
 - b. [IF YES]: Can you talk about why you recommend those plans? (prompts: \$0 premiums, low copays, supplemental benefits, etc.)
 - c. Are you aware of any MA plans that offer specific services for veterans, like coordinating their VA benefits or helping them use the benefits that have lower OOP costs? For example, if they can get a service from the VA at no cost sharing vs. getting it covered by the MA plan with some cost sharing?
8. How do you learn information about MA plans that is relevant to veterans?
 - a. Do they provide you with any resources that you find useful in helping your clients? (prompts: benefits in their plans that veterans might use, or ways to help you with outreach to veterans)?
 - b. Do they offer any special incentives for enrolling veterans?
9. Is there anything else we didn't talk about today that you'd like to mention?

Appendix C. Broker Interview Codebook

Code	Definition
1. Global Codes	
1.1 Saved Quote, Veteran Experience	Cross-code to flag strong, illustrative quotes describing veterans' lived experiences with Medicare Advantage (MA), VA care, or navigating both systems.
1.2 Stories of Care Experience	Anecdotal stories of care access, denials, approvals, or outcomes (positive or negative) related to MA or VA care.
1.3 Unsure	To identify blocks of text where coder is unsure of the appropriate codes. Emergent themes can also be captured here.
1.4 Respondent Characteristics	Participant background information (e.g., military branch, prior VA use, insurance context), information shared during intros.
1.5 Positive Sentiment	Positive sentiment expressed during response
1.6 Negative Sentiment	Negative sentiment expressed during response
2. Reasons for Medicare Advantage Enrollment and Decision-Making	General mentions of MA enrollment decisions that do not fit into the subcodes below
2.1 Reasons for Enrolling in MA	Reasons participants chose Medicare Advantage over traditional Medicare.
2.1.1 Cost Considerations	Mentions of MA low premiums, copays, out-of-pocket costs, or additional financial protection <i>that led the respondent to enroll in MA</i>
2.1.2 Supplemental Benefits	References to dental, vision, gym memberships, grocery cards, or other extra benefits <i>that led the respondent to enroll in MA</i>
2.1.3 Issues with Traditional Medicare	Descriptions of what was not working in traditional Medicare <i>that led the respondent to enroll in MA</i> .
2.1.4 Issues with VA care	Descriptions of issues or challenges with VA care <i>that led the respondent to enroll in MA</i>
2.2 Information Sources During Enrollment	Sources named by enrollees when selecting an MA plan.

Code	Definition
2.2.1 Marketing and Advertising	Mentions of TV ads, mailers, or other marketing materials.
2.2.2 Agent/Broker	Mentions of guidance from agents or brokers, including veteran-specific messaging.
2.2.3 Other Information Sources	Mentions of other information sources during enrollment (e.g., friends, spouse)
3. Experience Using Medicare Advantage Coverage	General mentions of Medicare Advantage coverage that do not fit into the subcodes below
3.1 MA Primary and Routine Care	Experiences accessing primary or routine care through MA.
3.2 Provider Network Access	Issues or ease of finding in-network providers.
3.3 Specialty Care Access (MA)	Experiences accessing specialist care through MA.
3.3.1 Prior Authorization	Experiences with prior authorization requirements.
3.3.2 Denials and Appeals	Coverage denials, appeals, or skipped care.
3.4 Supplemental Benefits	Mentions of supplemental benefits
3.4.1 Dental	Mentions of supplemental dental benefits
3.4.2 OTC medications	Mentions of supplemental OTC medication benefits
3.4.3 Vision	Mentions of supplemental vision benefits
3.4.4 Fitness	Mentions of supplemental fitness benefits (e.g., Silver Sneakers)
3.4.5 Other Supplemental Benefits	Mentions of other supplemental benefits
3.5 MA Prescription Drug Coverage	Mentions of MA prescription drug coverage
3.6 In-Home Visits	Experiences with MA-offered in-home visits.
3.7 Satisfaction with MA Benefits	Perceived adequacy or excess of MA benefits.
3.8 Switching Considerations	Thoughts about switching back to traditional Medicare.
3.9 Access to plan information	Mentions of sources of information for understanding benefits (customer service, plan materials, app)
3.10 Costs of MA Plan	Mentions of costs such as copays, deductibles, premiums
4. VA Health Care Utilization	General mentions of VA health care utilization not covered by codes below

Code	Definition
4.1 VA Use Prior to MA Enrollment	Use of VA care before enrolling in MA, how long.
4.2 Reasons for Using VA Care	Why participants choose VA for certain services.
4.2.1 Established provider relationship	Mentions of having an existing relationship or trust of VA provider(s)
4.2.2 Lower cost	Mentions of VA care being lower cost than MA
4.2.3 Geographic location/proximity	Mentions of VA facility or provider being geographically close
4.2.4 Specific services	VA services or types of care mentioned by respondents
4.2.5 Other reasons for using VA care	Other reasons not stated above
4.3 Reasons for Not Using VA Care	Barriers or reasons for discontinuing VA care.
4.3.1 Disability rating/eligibility	Mentions of disability ratings or other eligibility issues
4.3.2 Proximity to VA	Mentions of traveling long distance to VA
4.3.3 Quality or access concerns	Mentions of quality or access concerns with the VA (e.g., long wait times, poor care)
4.3.4 Reliance on/preference for MA	Mentions of a preference for MA providers or services
4.3.5 Other	Other reasons for not using the VA
4.5 VA Prescription Drug Coverage	Mentions of drug coverage through MA
4.6 Community Care	Mentions of VA community care (i.e., private providers contracted with VA)
4.7 VA Dental, Vision, Hearing Benefits	Mentions of VA dental, hearing or vision benefits
5. Coordination Between Medicare Advantage and VA	General mentions of coordination between MA and VA
5.1 Decision-Making Between MA vs. VA	How participants decide which system to use for care.
5.1.1 Guidance on Care Selection	Advice from providers, plans, or brokers on where to seek care.
5.2 Understanding of Benefit Coordination	Clarity or confusion about how MA and VA benefits work together.
5.2.1 Areas of Confusion	Specific aspects of coordination that are unclear.
5.2.2 Desired Resources	Suggestions for tools or resources to improve understanding.

