

Member Benefits and Retention Survey

2024



Executive Summary

Despite generally high satisfaction, a significant portion of members remains open to exploring other plans during the Annual Enrollment Period (AEP), highlighting the need for plans to emphasize and leverage key benefits to retain members.

In this survey, 300 Medicare members across the U.S. were engaged to assess their satisfaction with their current plan benefits as well as their understanding and usage of their plans. The study also explored barriers to benefit engagement and preferred communication channels for notifications and personalized updates. Key insights from this research will guide marketers to refine segmentation and enhance their retention strategies.

Key takeaways

- 1. Medicare plan satisfaction:** 89% of members were satisfied, but 42% were still open to exploring new plans with their current insurers.
- 2. Loyalty risk:** 38% of members were open to considering another plan with a different insurer – suggesting room for improving plan fit and loyalty. Younger members (67 to 69-year-olds) were slightly less “very satisfied” and members between 65 and 72 years of age were the most likely to consider another insurer.
- 3. Supplemental benefits utilization:** The most-used supplemental benefits included over-the-counter (OTC) allowances and medical supplemental benefits (vision, dental and/or hearing).
- 4. Barriers to benefit use:** The most common reason for not using benefits was lack of need. However, a notable portion of members also cited other reasons, including lack of awareness, forgetfulness and access difficulty.
- 5. Communications preferences:**
 - Beneficiaries were highly interested in personalized communications regarding cost savings opportunities and their utilization of medical and non-medical supplements. To a lesser degree, there was interest across age groups in receiving information regarding screening eligibility, annual appointments, wellness programs and chronic condition management,
 - Medicare members generally preferred receiving updates and information through email, followed by mail, though other channels were shown to have some traction and there was some variation on preferences depending on topic.

Marketing actions to consider

1. Develop targeted email and mail campaigns that focus on the benefits members may not be aware of or have forgotten, such as supplemental benefits (vision, dental, hearing). Personalized updates about benefit utilization and reminders should be emphasized for retention.
2. Launch educational campaigns that inform members about how to access and use supplemental benefits (e.g., over-the-counter allowances, vision/dental/hearing and rewards programs). These campaigns should be delivered through preferred channels like email and mail.
3. Promote the tailored features of current plans through content that speaks to the specific health and lifestyle needs of different age groups. Ensure messaging emphasizes how the plan can evolve with changing healthcare needs, which may address concerns for members considering switching.
4. Implement loyalty programs targeted at younger members (65–69-year-olds). Encourage them to advocate for their plan through positive reinforcement and incentives for remaining loyal.
5. Prioritize email for most communications, but offer alternative channels (mail, newsletters, member portal), especially for more personalized or complex information. Consider age-based preferences as well.

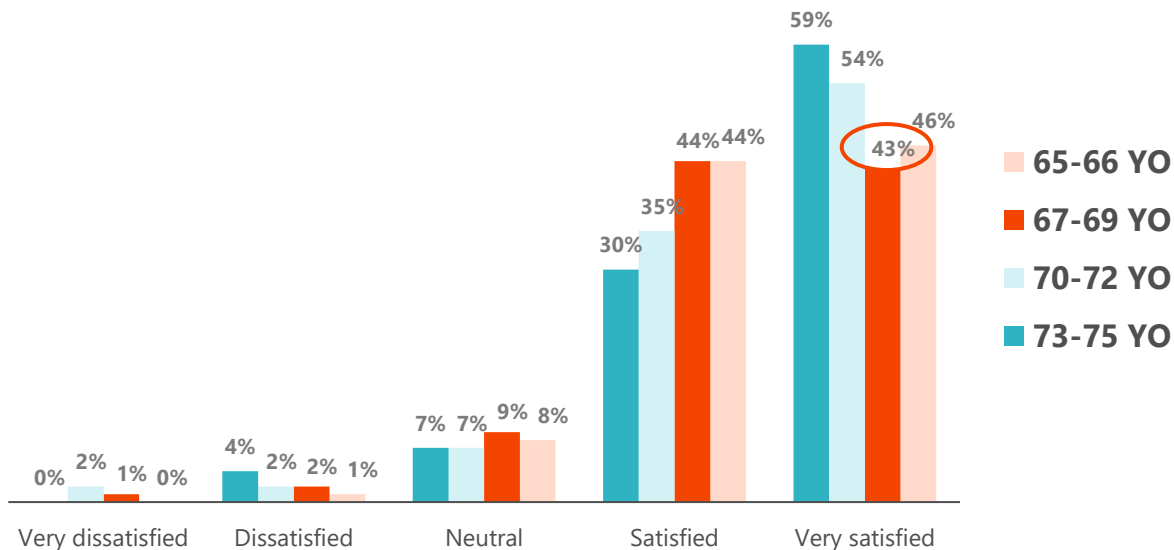
Findings



Medicare member satisfaction overview

Overall, 89% were satisfied, with older members showing higher satisfaction. The 67-69 age group (43% "very satisfied") appears most at risk to consider alternate plan options.

Q. Overall, how satisfied are you with your current plan?



Satisfaction (unaided response)

Coverage and **doctors** were the most-mentioned areas of satisfaction.

Q. In a few words, what do you find most satisfying about your Medicare plan?

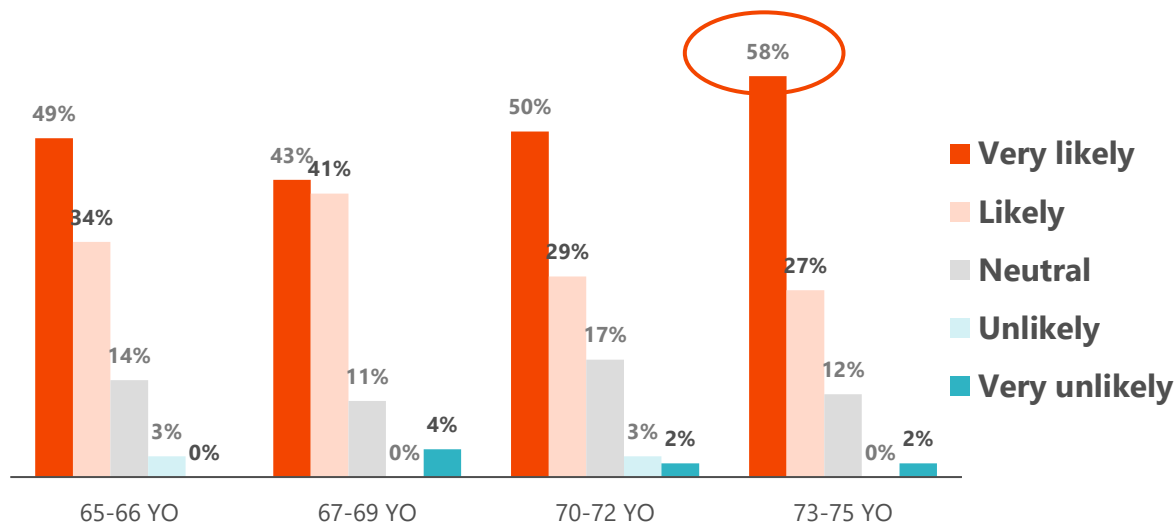




Likelihood to recommend

The **oldest beneficiaries** were more “**very likely**” to recommend their plan compared to younger groups – by at least 8 percentage points.

Q. How likely are you to recommend your Medicare plan to others?





Alignment between coverage and needs

Good news for Medicare plans – **the vast majority of beneficiaries reported that their plan matches their needs.**

Q. How well would you say your current plan fits your coverage needs?

Plan Fit	Percent Who Agree
Very well/well	90%
Very poor/poor	3%
Neutral	6%



Pain points

Most respondents said “nothing” is **dissatisfying** about their coverage. The most common complaints were focused on dental and general coverage.

Q. In a few words, what do you find most dissatisfying about your Medicare coverage?

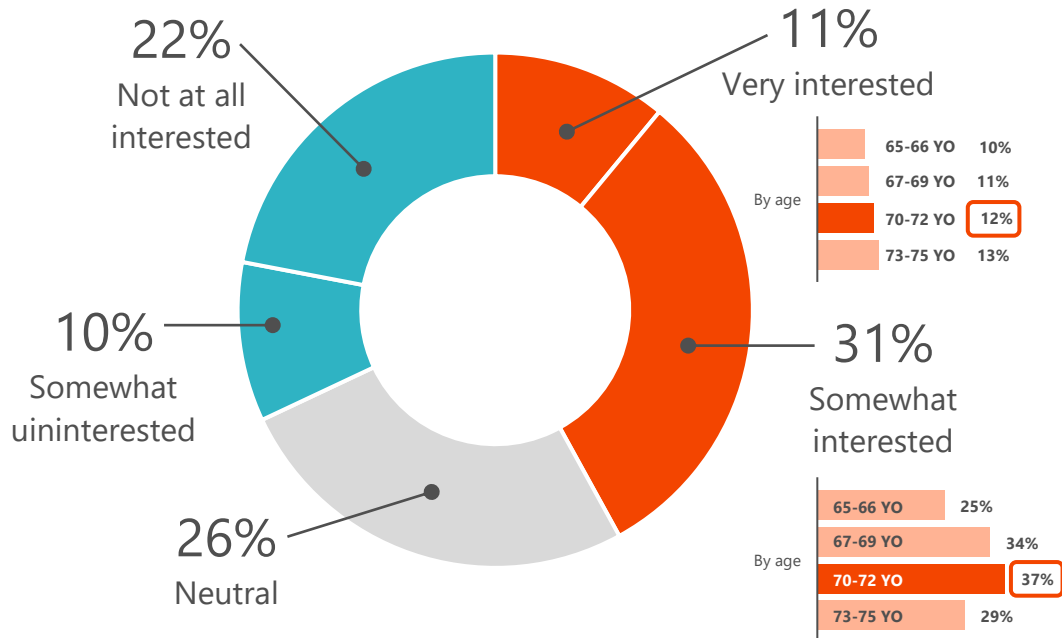




Interest in other plan options: current insurer

Although 89% of Medicare members were satisfied with their current plan, **42% were still “somewhat” to “very interested” in exploring other options from their current insurer.** Among these, those aged 70 to 72 showed the highest interest in considering different plans.

Q. How interested would you be in exploring a different Medicare plan from your current insurer during the next Annual Enrollment Period?

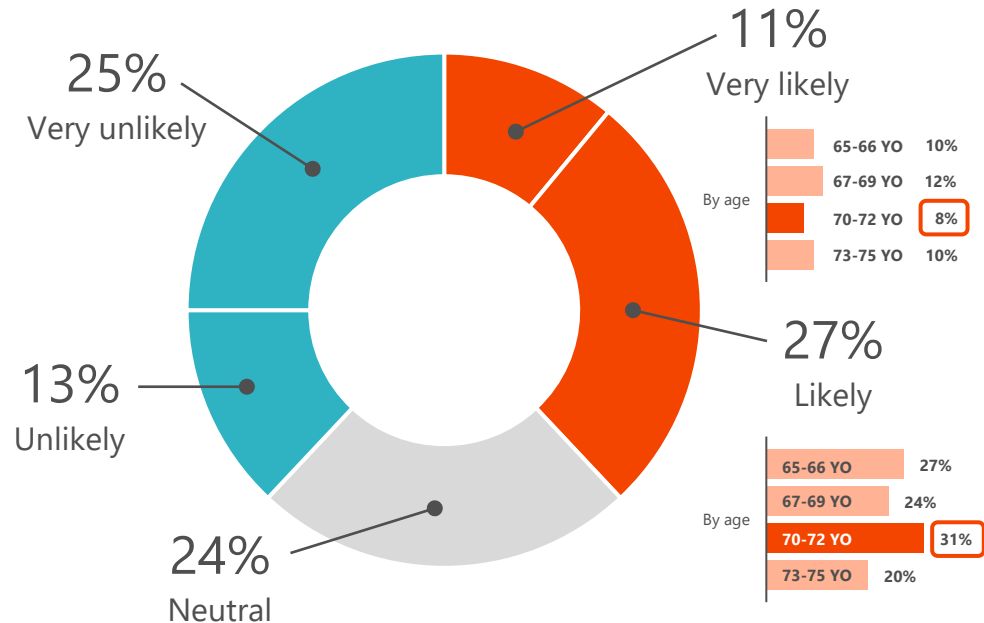




Interest in other plan options: different insurer

Overall, 38% of respondents were open to exploring coverage with a different insurer.

Q. How likely would you be to explore a Medicare plan from a different insurance company during the Annual Enrollment Period?



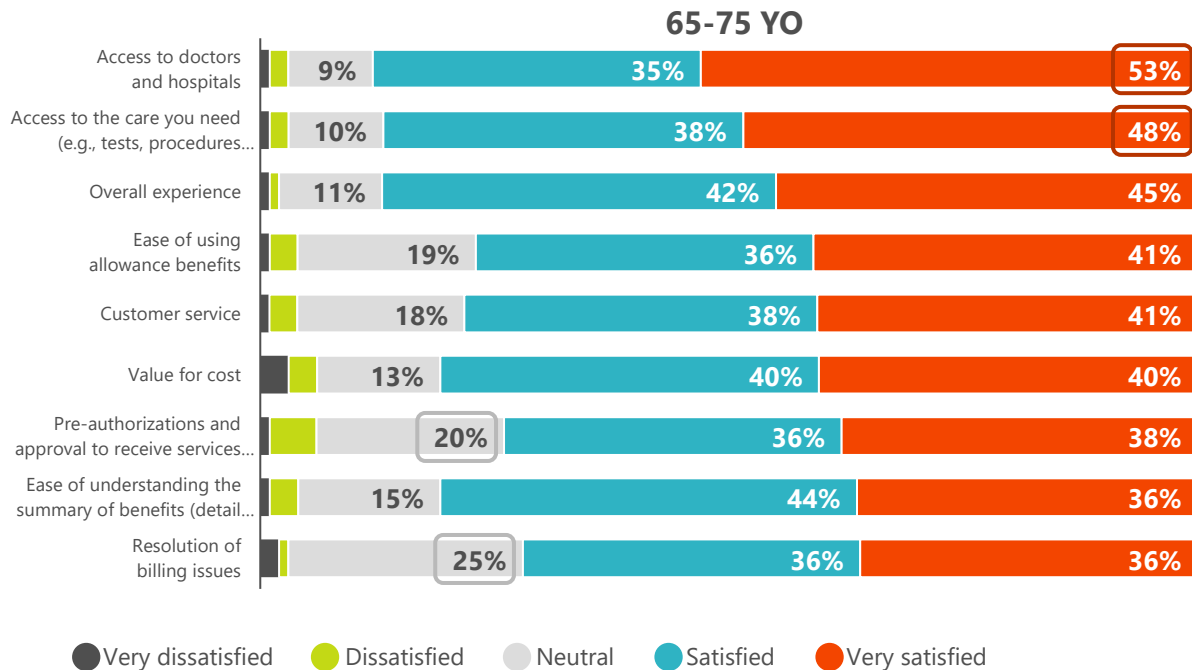


Satisfaction by plan feature

Access to doctors and needed care were rated highest.

Areas for improvement include billing resolution and treatment pre-authorizations.

Q. Please rate your level of satisfaction with your Medicare plan on the factors listed below.

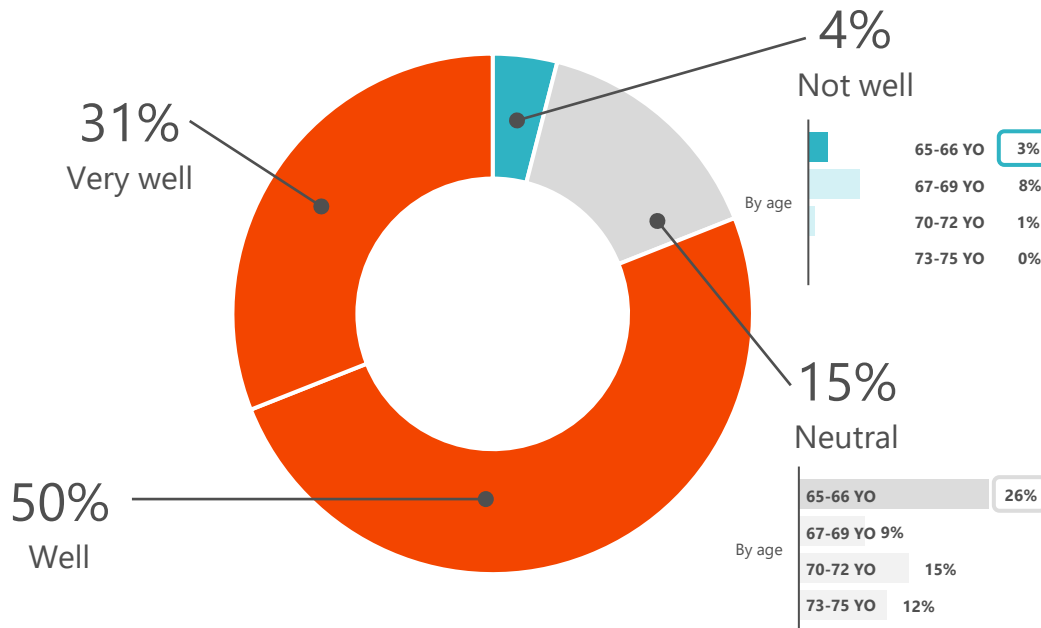




Understanding benefits

While overall **81% of Medicare members said they understand their plan “well” or “very well,”** there is opportunity to increase clarity, especially with 65 to 66-year-olds.

Q. How well do you understand the benefits provided by your Medicare plan?



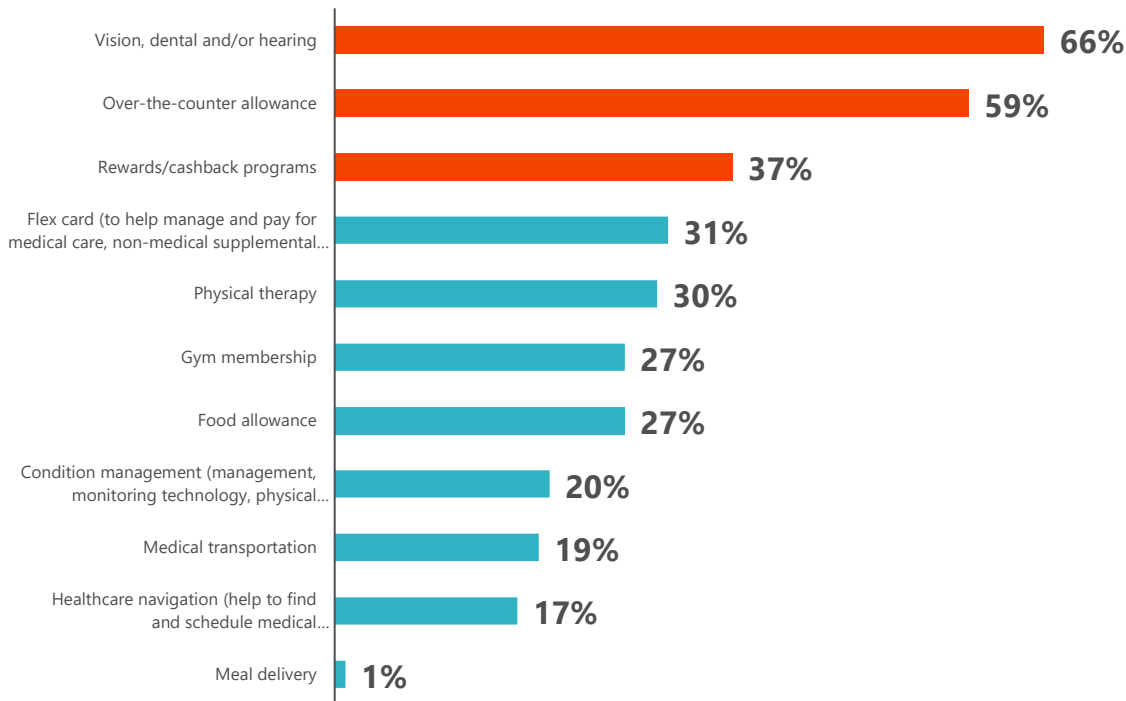


Most-used supplemental benefits

The top three supplemental benefits that members have either used or would use are:

- **Vision, dental and/or hearing**
- **Over-the-counter allowance**
- **Rewards/cashback programs**

Q. Which of the following supplemental benefits have you used or would you use?



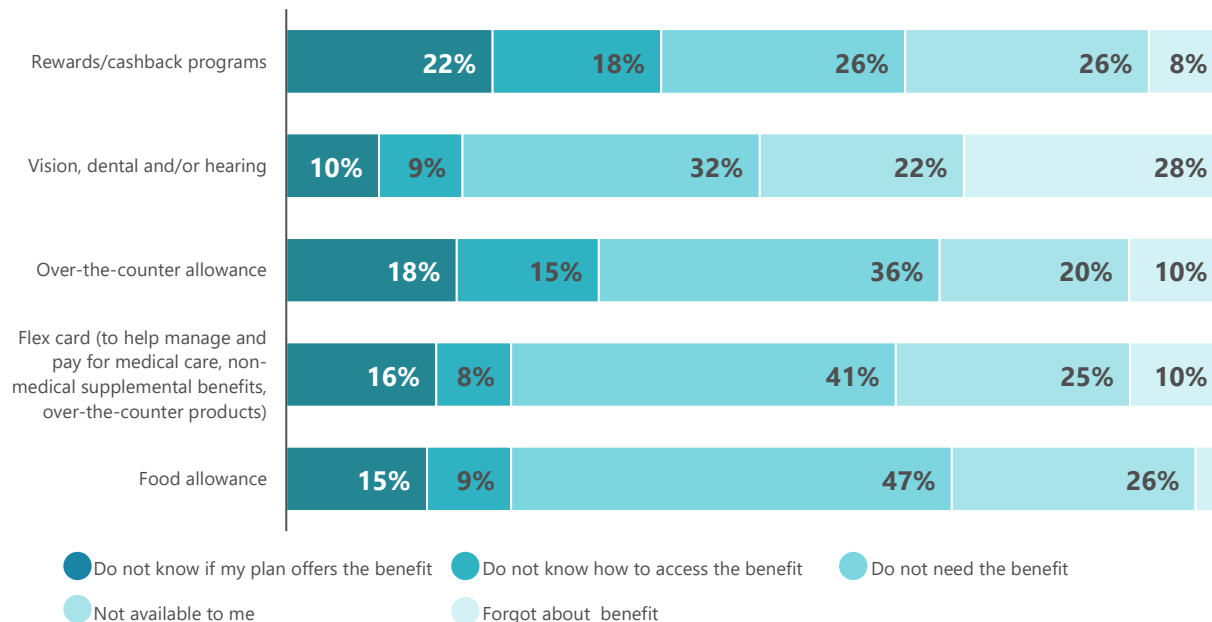


Barriers to use

Members noted a variety of reasons for not using benefits. In most cases, **the reason most often cited was lack of need.**

It is also notable that 28% of members cited forgetfulness for not using their supplemental medical benefits (vision, dental and/or hearing).

Q. You indicated that you do not use the following supplemental benefits. For each benefit, please select the primary reason you do not use it.

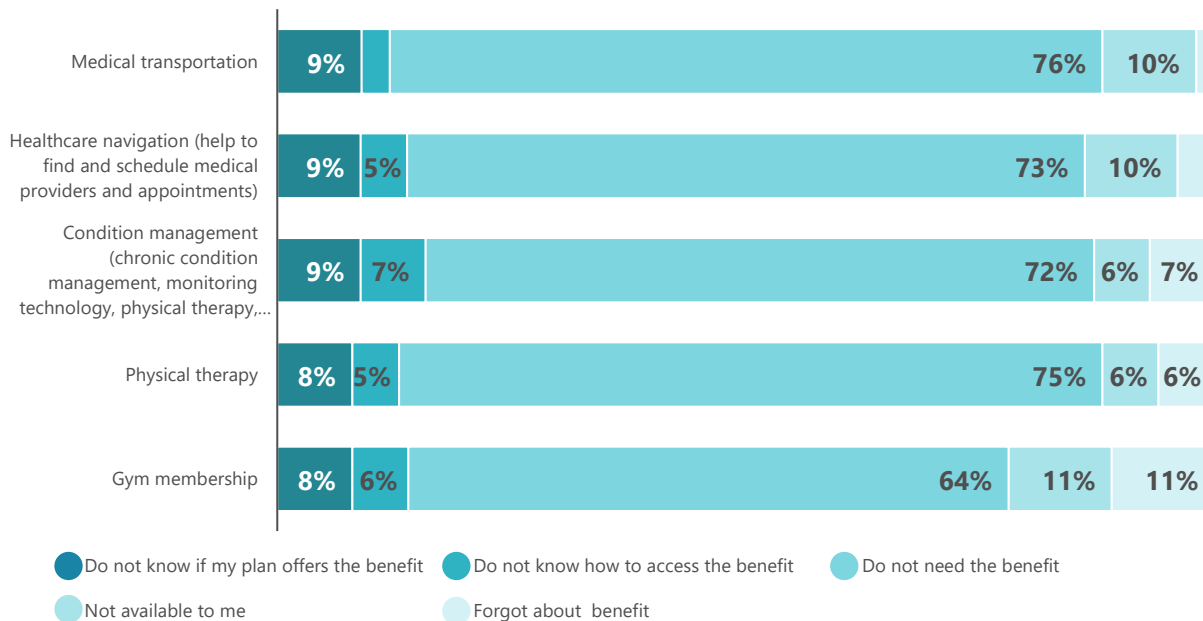


Barriers to use (cont.)

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Q. You indicated that you do not use the following supplemental benefits. For each benefit, please select the primary reason you do not use it.

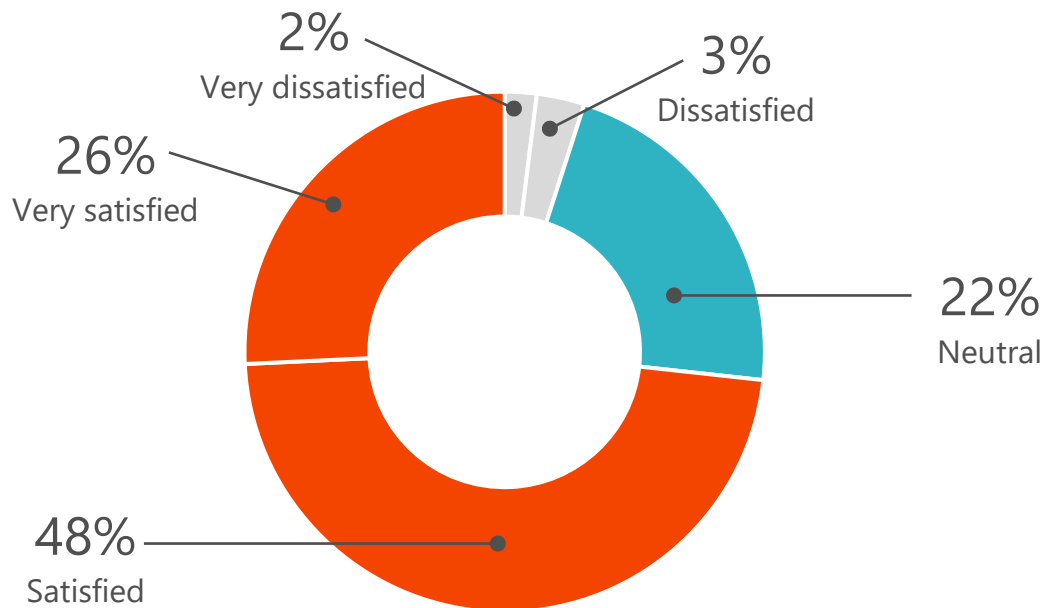




Medicare plan communications

Nearly 75% of Medicare members were satisfied with the clarity and frequency of their plan's communication.

Q. How satisfied are you with the frequency and clarity of communications from your Medicare plan?

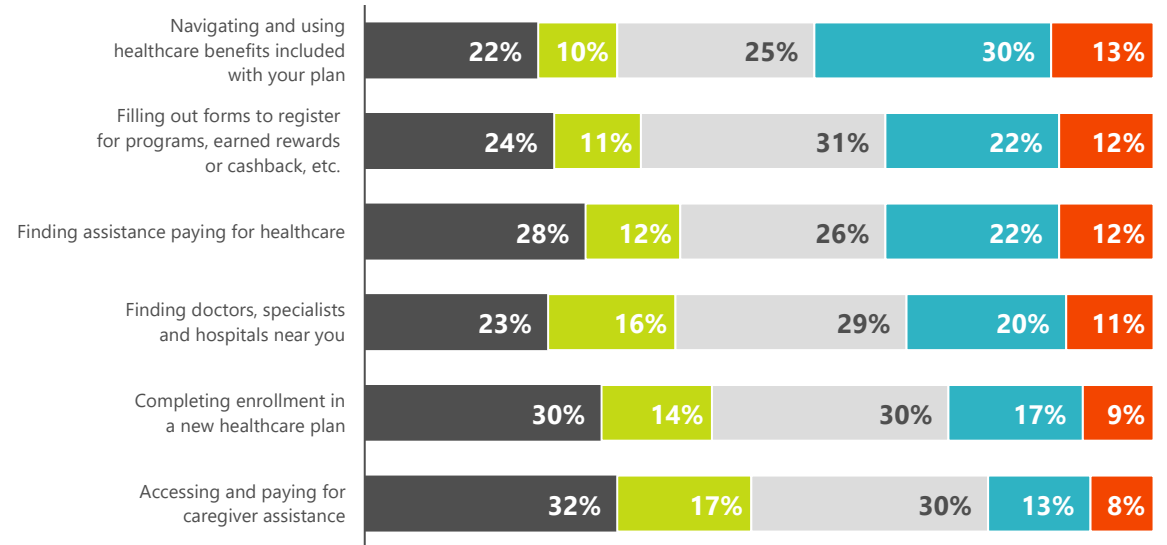




Interest in plan assistance

The type of engagement with health plan reps that members would find most valuable is **help navigating and using plan benefits**.

Q. How interested would you be in having a representative from your Medicare plan help you with the following activities?



● Not at all interested ● Somewhat uninterested ● Neutral ● Somewhat interested ● Very interested

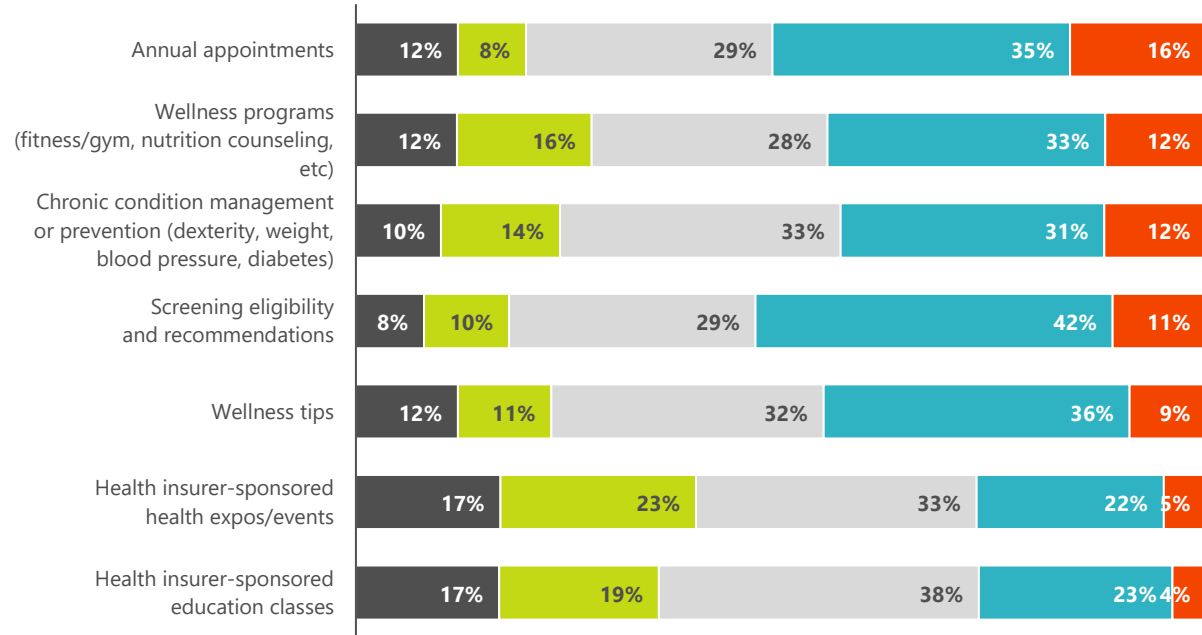


Valued notifications

Medicare members were most interested in receiving information on:

- **Annual appointments**
- **Wellness programs**
- **Chronic condition management or prevention programs**
- **Screening eligibility and recommendations**

Q. How interested are you in receiving information or reminders about the following?



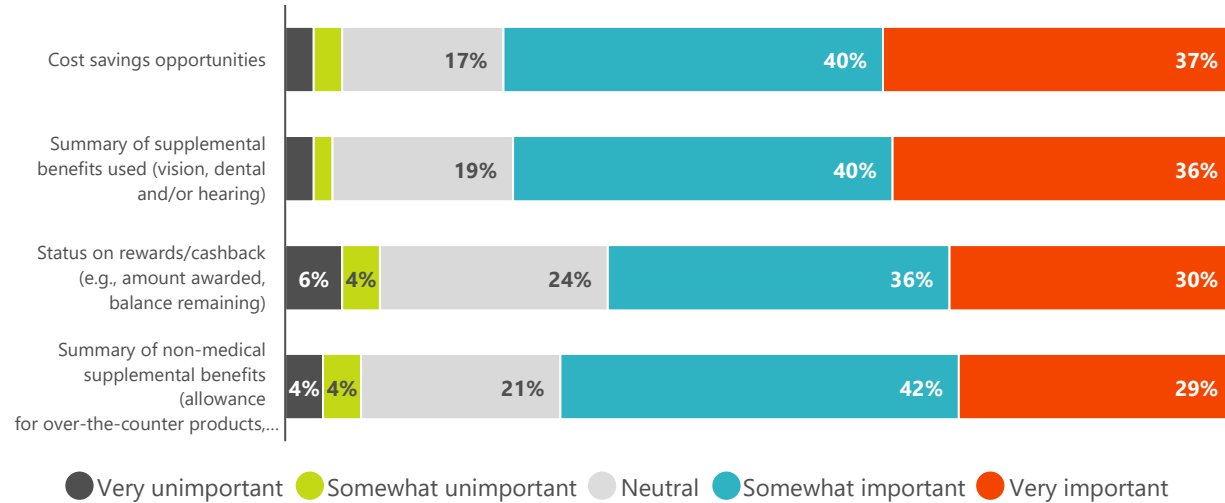
● Very uninterested ● Somewhat uninterested ● Neutral ● Somewhat interested ● Very interested



Personalized updates

Medicare members saw value in personalized communications specific to **cost savings opportunities** and **summary of supplemental benefits**.

Q. How important is it for you to receive updates on the following plan benefits?



Appendix A:
Age segmentation on notification engagement
and preferred communication channel



Communication channel preference

Email and mail were the preferred communication channels for nearly all information topics.

Q. Notifications and preferred communications

Topic	Preferred Communication
Annual appointments	#1) Email, #2) Text
Wellness programs	#1) Email, #2) DM
Chronic condition mgt.	#1) Email, #2) DM
Screenings	#1) Email, #2) DM
Wellness tips	#1) Email, #2) DM
Health expos/events	#1) Email, #2) DM
Health education classes	#1) Email, #2) DM
Cost savings opportunities	#1) Email, #2) DM
Supplemental medical benefit use	#1) Email, #2) DM
Rewards and cashback use	#1) Email, #2) DM
Supplemental non-medical benefit use	#1) Email, #2) DM



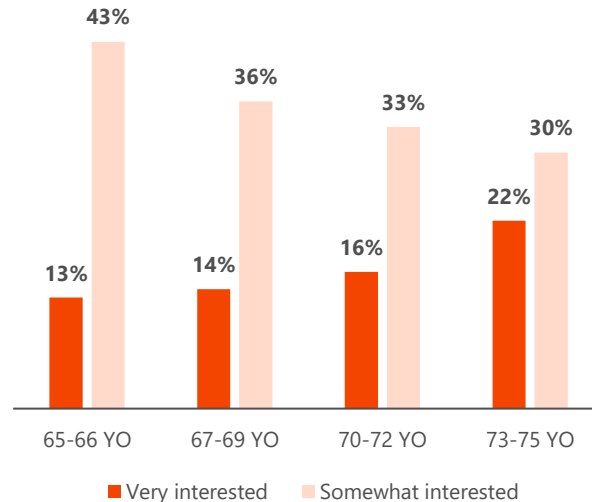
Annual appointments

Notifications and channel preference by age group

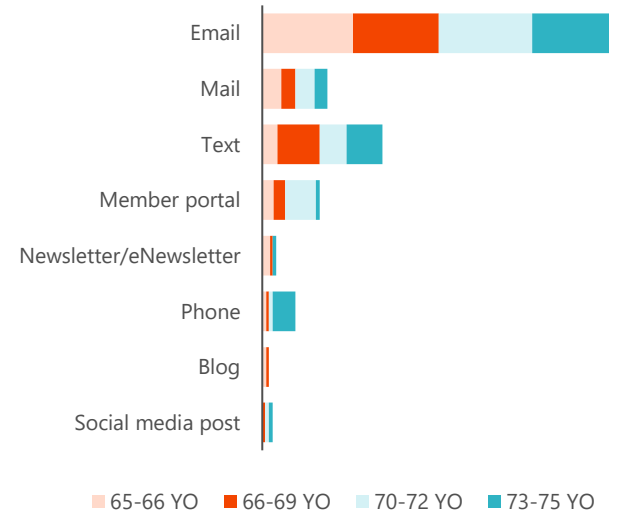
With 65 to 66-year-olds as the most engaged, **the majority of Medicare beneficiaries were interested in getting reminders for annual appointments.**

Email was the preferred channel, followed by text for these reminders.

Q. Interest level



Q. Preferred communication





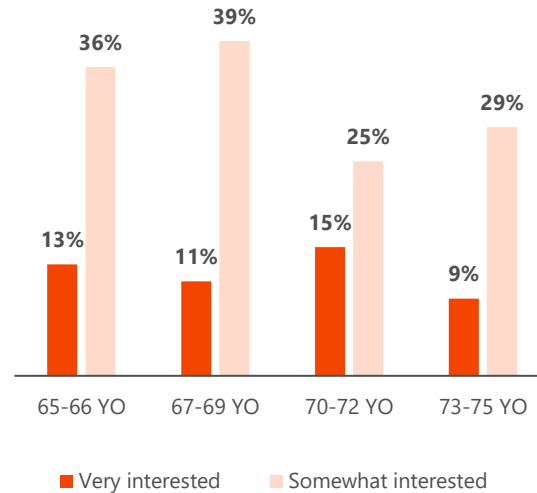
Wellness programs

Notifications and channel preference by age group (cont'd)

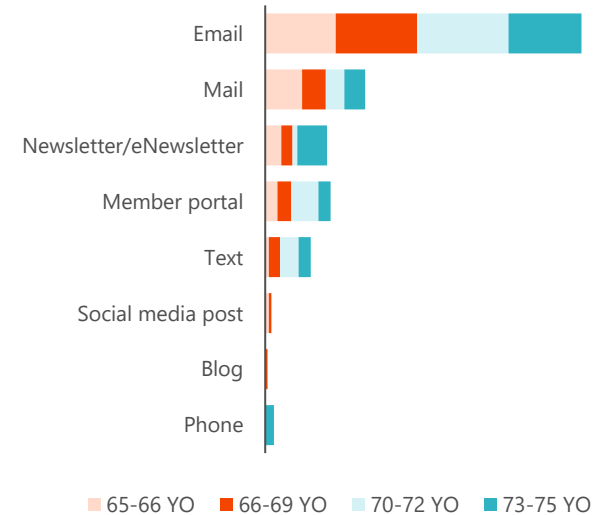
The younger Medicare members were more interested in wellness programs than their elders; 49% or more of 65 to 69-year-olds were “somewhat” or “very interested.”

Though multiple channels had traction, **Email was preferred**, followed by mail.

Q. Interest level



Q. Preferred communication





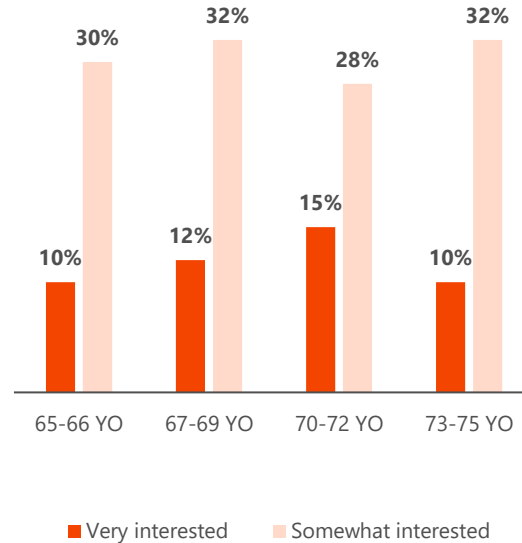
Chronic condition management

Notifications and channel preference by age group (cont'd)

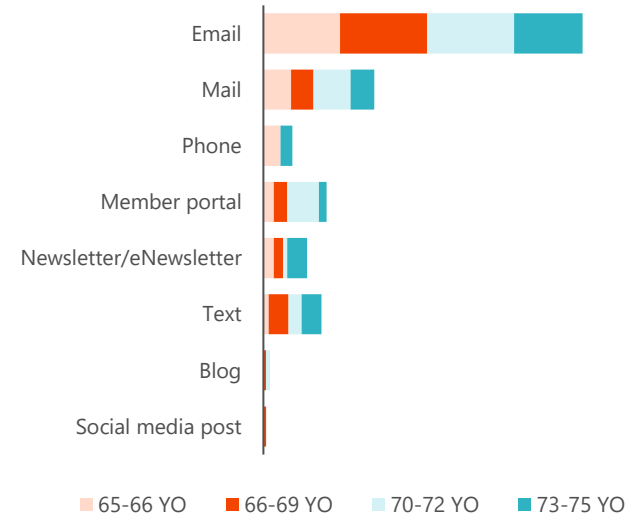
Over 40% of all age groups were interested in information on chronic condition management.

Email was the preferred communication channel, followed by mail.

Q. Interest level



Q. Preferred communication





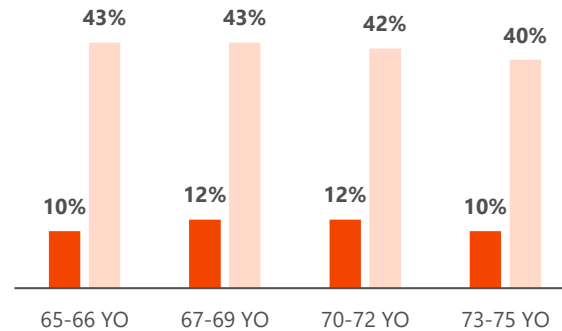
Notifications and channel preference by age group (cont'd)

Medicare members of all ages were similarly interested in learning about screening eligibility and recommendations.

Email was by far the preferred channel of communication for this information.

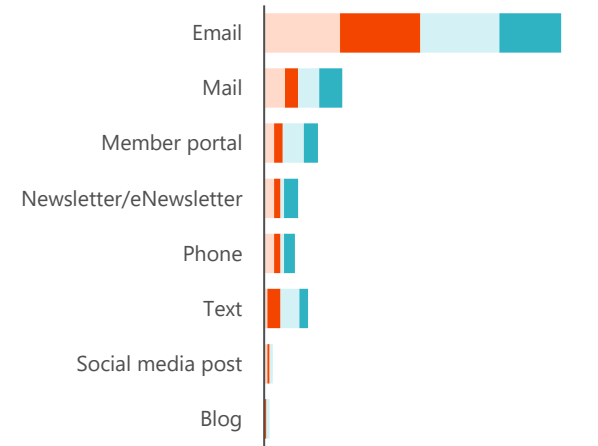
Screenings

Q. Interest level



Very interested Somewhat interested

Q. Preferred communication



65-66 YO 66-69 YO 70-72 YO 73-75 YO



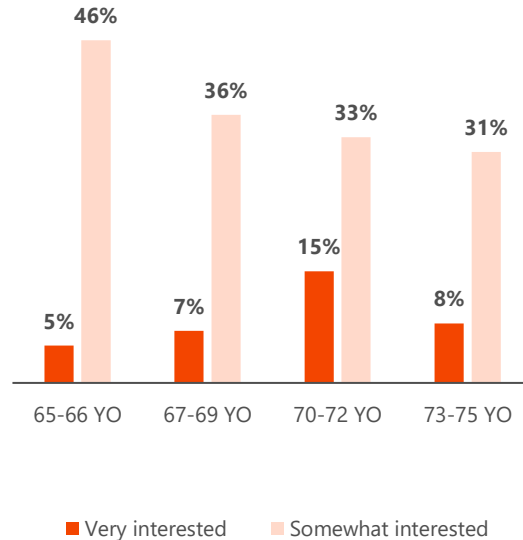
Notifications and channel preference by age group (cont'd)

Younger Medicare members (65 to 66-year-olds) were more interested in wellness tips than their elders.

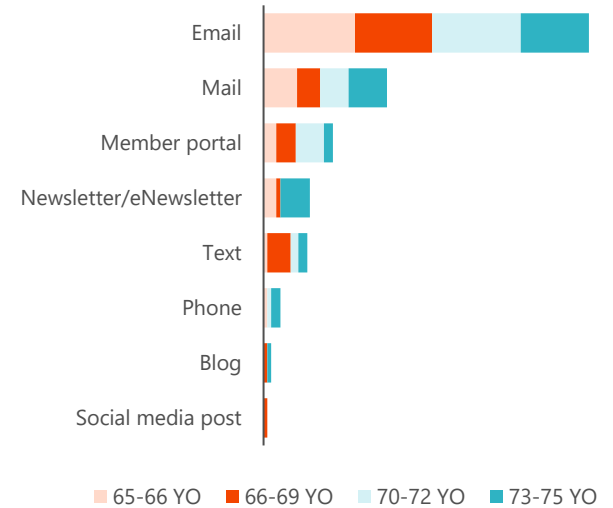
While across all members, email was the preferred channel of communication, **it's worth noting there was also traction for mail and the member portal.**

Wellness tips

Q. Interest level



Q. Preferred communication





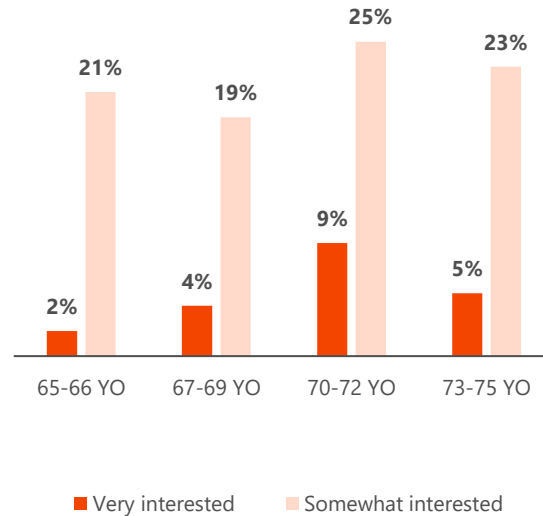
Health expos/events

Notifications and channel preference by age group (cont'd)

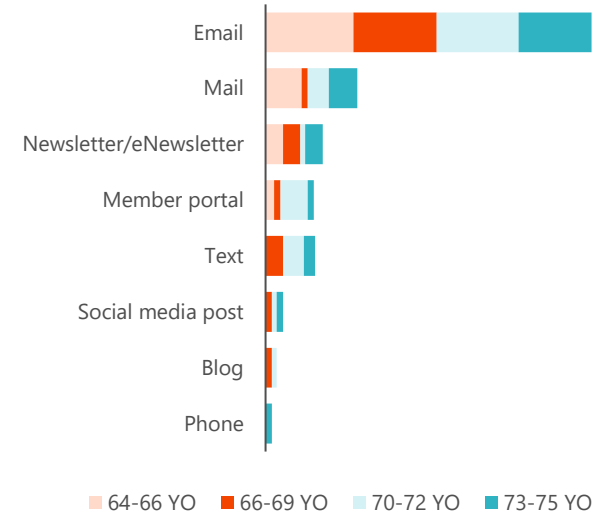
Older beneficiaries (70 to 75-year-olds) were more interested than the younger groups in notifications on health expos and events.

While email was the preferred channel of communications, mail, newsletters, the member portal and text were close secondary preferences.

Q. Interest level



Q. Preferred communication





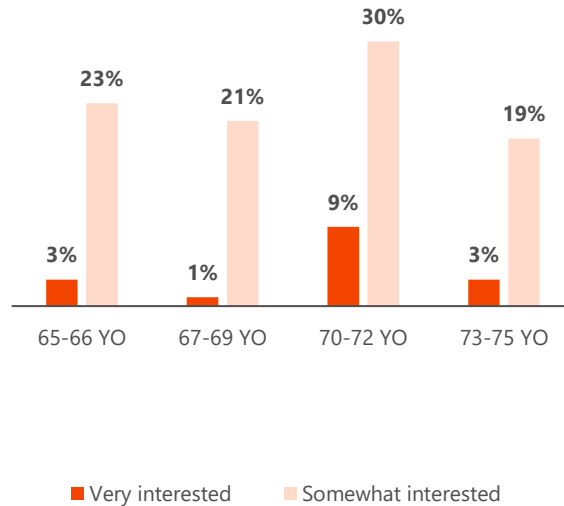
Health education classes

Notifications and channel preference by age group (cont'd)

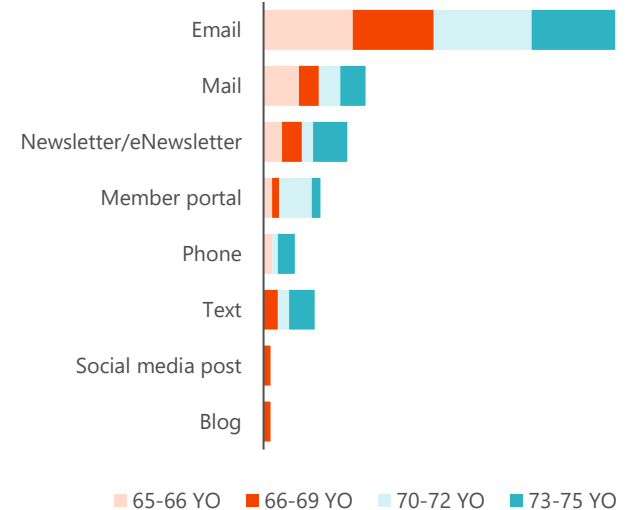
Older Medicare members (39% of 70 to 72-year-olds) were most interested in health education classes.

Email was the preferred mode of communication, followed by mail and newsletters.

Q. Interest level



Q. Preferred communication





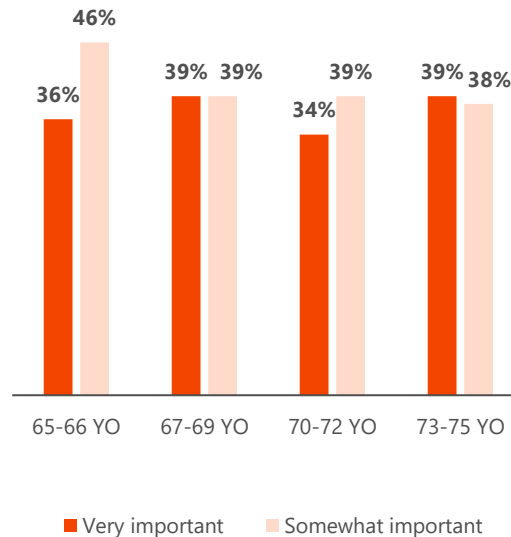
Cost savings opportunities

Personalized updates and channel preference

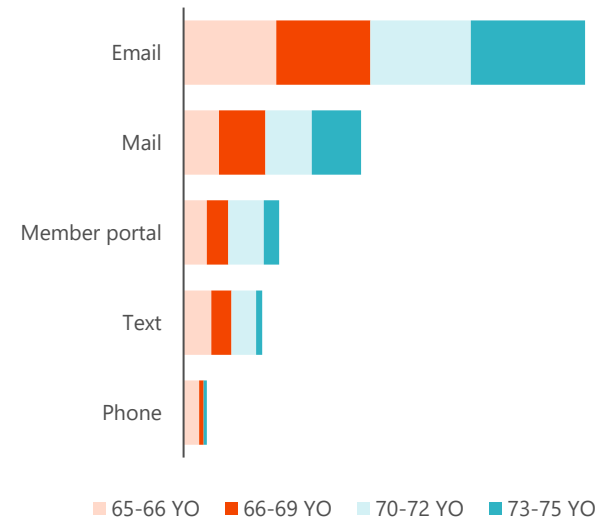
The 65 to 66-year-olds had the highest interest in learning about cost savings opportunities, but interest was strong across all age groups.

Email was the preferred communication channel, followed by mail.

Q. Interest level



Q. Preferred communication





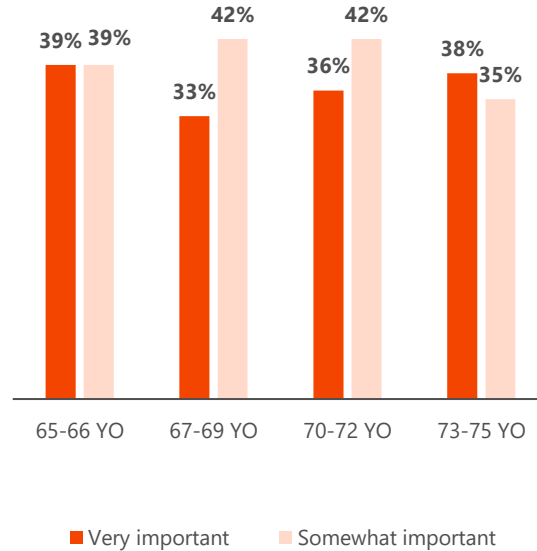
Supplemental medical benefits used

Personalized updates and channel preference (cont'd)

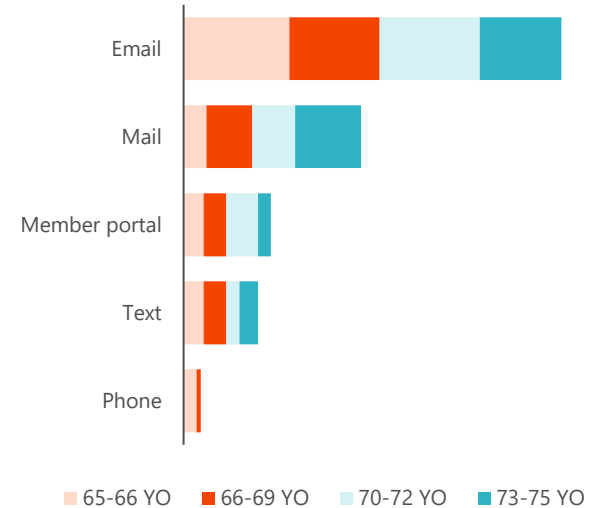
Receiving updates on their summary of medical benefit utilization was of interest across all Medicare member age segments.

While email was the preferred mode of communication, mail was a strong second.

Q. Interest level



Q. Preferred communication





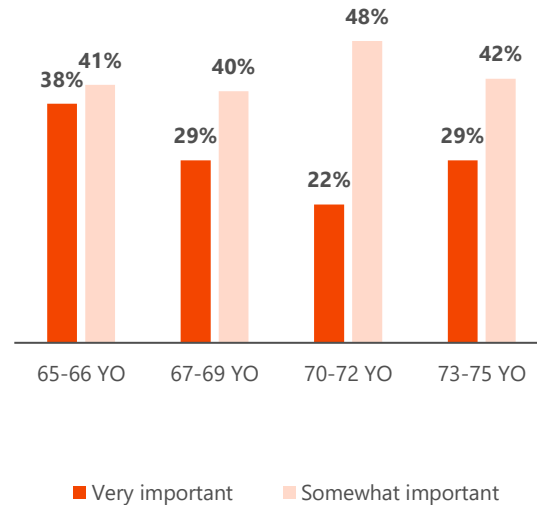
Non-medical supplemental benefits

Personalized updates and channel preference (cont'd)

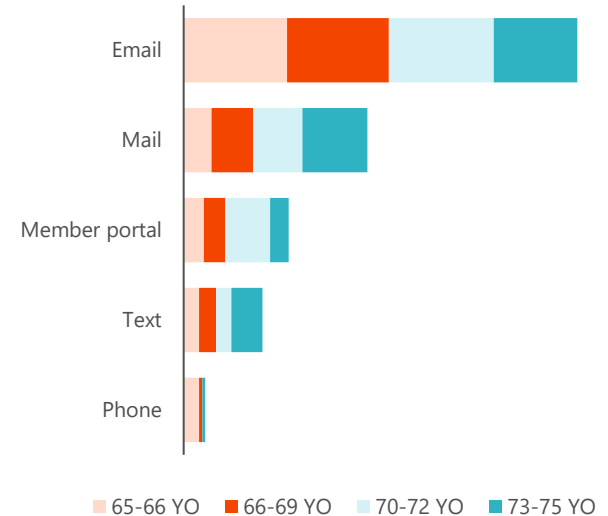
The youngest Medicare members (65 to 66-year-olds) had the highest interest in learning their status on the use of non-medical supplemental benefits.

Email was the preferred mode of communication, followed by mail.

Q. Interest level



Q. Preferred communication



Personalized updates and channel preference (cont'd)

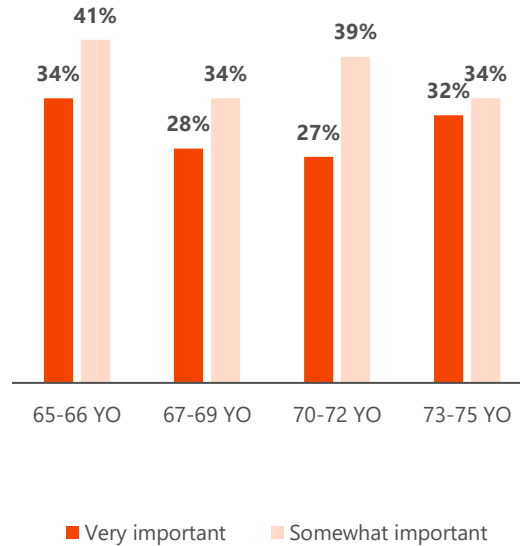
The youngest Medicare beneficiaries (65 to 66-year-olds) were the most interested in personalized updates on their rewards and cashback status.

Email was the preferred communication channel for this status, while mail, member portal and text were nearly equal secondary channels.

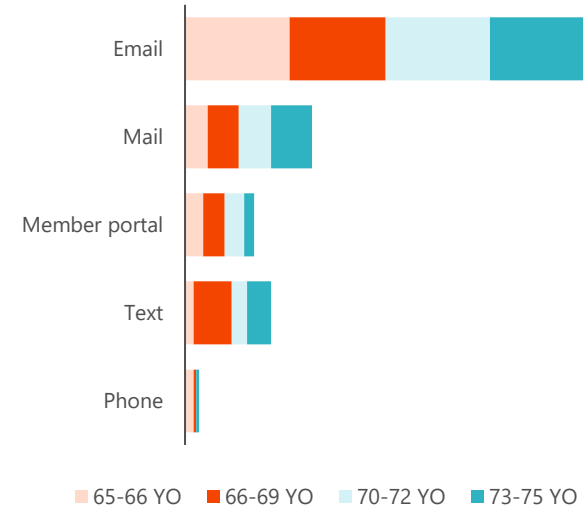
Rewards and Cashback



Q. Interest level

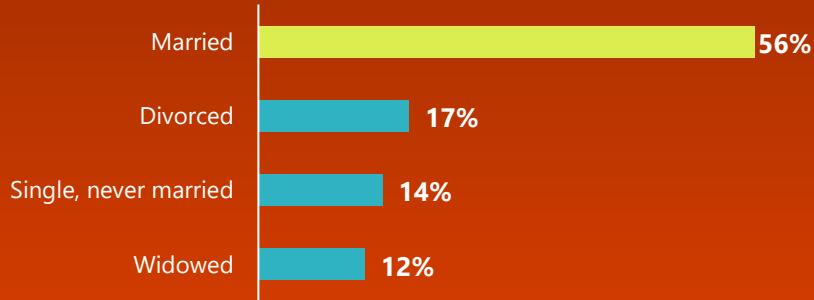


Q. Preferred communication

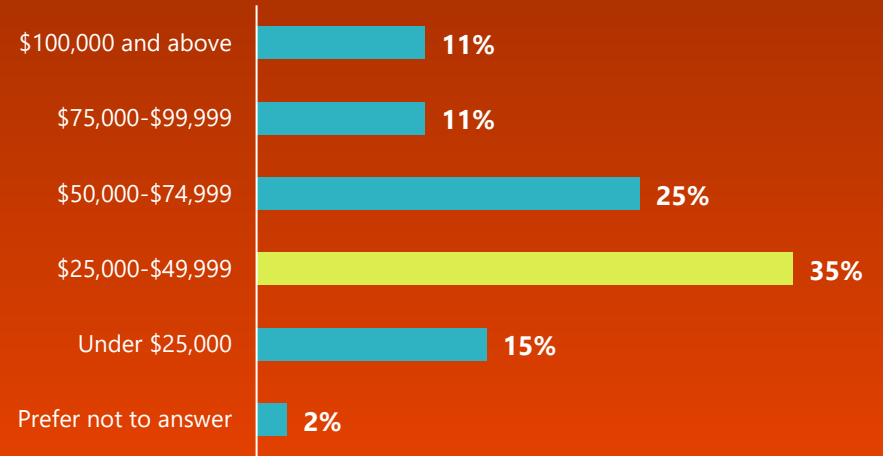


Appendix B: Respondent demographics

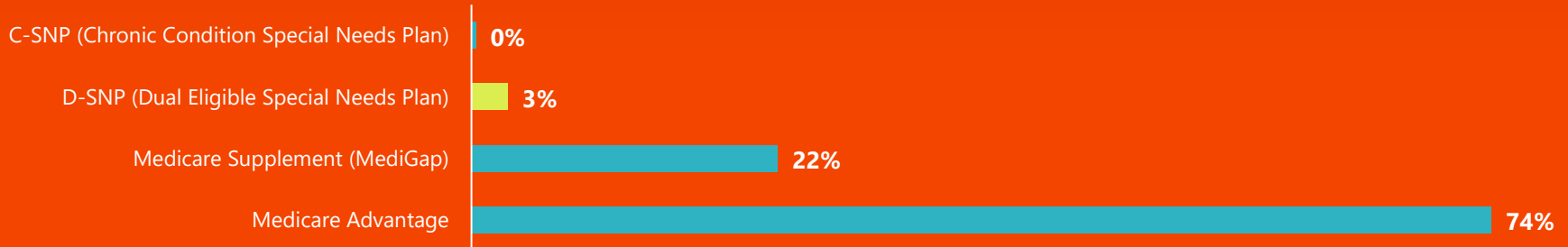
Which best describes your marital status?



What is your household income?



In what type of Medicare plan are you enrolled?





Consumer In Sight (CIS) is an investigative research series conducted by Media Logic with the aim of gaining new insights into consumer preferences and behaviors in the healthcare and financial services industries. Using an industry-leading software platform, we survey geo-targeted and national panels to track the changing marketing landscape and support clients in connecting with consumers through creative executions and multichannel media.



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