

2021 Open Enrollment Report

HEALTH INSURANCE MARKETPLACES 2021 OPEN ENROLLMENT REPORT

The Health Insurance Marketplaces 2021 Open Enrollment Report summarizes health plan selections made on the individual Marketplaces during the 2021 Open Enrollment Period (2021 OEP). The report includes data for the 36 states with Marketplaces that use the HealthCare.gov eligibility and enrollment platform for the 2021 plan year, as well as for the 15 State-Based Marketplaces (SBMs) that use their own eligibility and enrollment platforms.¹ Additional data are reported for the states with Marketplaces that use the HealthCare.gov platform, including age, gender, rural location, self-reported race and ethnicity, household income as a percent of the federal poverty level (FPL), and the average premiums among consumers with and without advance payments of the premium tax credit (APTC).

More information on applications and plan selections is available in a suite of accompanying public use files (PUFs). The PUFs contain information on applications submitted and the number of medical and stand-alone dental plan selections by state, county and ZIP code.² The 2021 OEP State-Level PUF includes other plan and demographic information, including the metal level of selected plans, premium and financial assistance information, age, gender, rural location, self-reported race and ethnicity, and household income as a percent of FPL. Within the 2021 OEP State, Metal Level, and Enrollment Status PUF, data are stratified by new, returning, and automatically re-enrolled consumers and by plan metal level. The methodology for this report and detailed metric definitions are included with the materials for the PUFs.

Key findings from this report include:

- *Plan Selections:* Approximately 12.0 million consumers selected or were automatically re-enrolled in a Marketplace plan during the 2021 OEP in the 50 states plus the District of Columbia (DC). This is approximately a 5 percent increase from 11.4 million consumers in the 2020 OEP.
- *New Consumers:* Nationally, 21 percent of consumers with a plan selection during the 2021 OEP were new to the Marketplaces through which they enrolled, compared to 25 percent during the 2020 OEP.
- *Financial Assistance:* Eighty-eight percent of consumers in states that use the HealthCare.gov platform received APTC in the 2021 OEP, which is a one-percentage point increase from eighty-seven percent in the 2020 OEP. Among consumers receiving APTC, the average APTC amount covered 85 percent of the total premium in both the 2020 and 2021 OEP.

¹ Plan selections and other data by Marketplace platform for each OEP reflects the status of the state's platform at the time of that OEP. Data for SBMs that use their own eligibility and enrollment platforms are retrieved from the respective states' information systems and have not been validated by CMS; thus, metric calculations for these states may vary. The 15 SBMs that use their own eligibility and enrollment platforms in 2021 are California, Colorado, Connecticut, the District of Columbia, Idaho, Maryland, Massachusetts, Minnesota, Nevada, New Jersey, New York, Pennsylvania, Rhode Island, Vermont, and Washington. Nevada transitioned to an SBM for the 2020 plan year, and New Jersey and Pennsylvania transitioned to SBMs for the 2021 plan year.

² The state-level PUFs can be found at: <https://www.cms.gov/research-statistics-data-systems/marketplace-products/2021-marketplace-open-enrollment-period-public-use-files>.

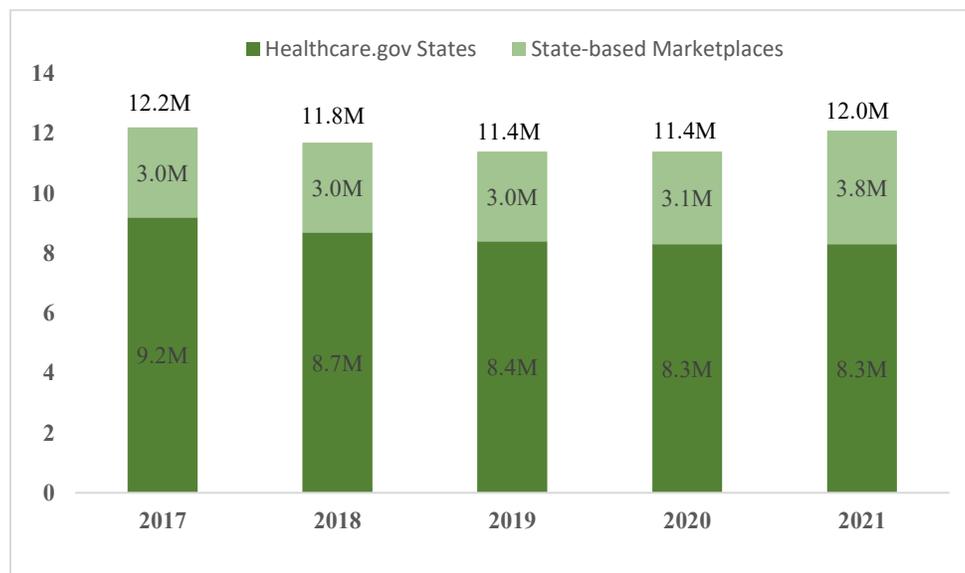
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- *Net Premiums:* After application of APTC, the average monthly net premium for consumers receiving APTC was \$92 in the 2021 OEP, compared to \$89 in the 2020 OEP.

CONSUMERS SELECTING PLANS THROUGH THE MARKETPLACES: 50 STATES, PLUS DC

Approximately 12.0 million³ consumers selected or were automatically re-enrolled⁴ in a Marketplace plan during the 2021 OEP. This includes 8.3 million consumers in states using the HealthCare.gov platform and 3.8 million consumers in SBMs using their own platforms (see Figure 1).

Figure 1: Plan Selections during the 2017 – 2021 Open Enrollment Periods⁵



³ In addition to the total plan selections in this report, 975,337 individuals in New York and Minnesota signed up for coverage through a Basic Health Plan (BHP). States have the option of establishing BHPs to provide health coverage for low-income residents whose income is too high for Medicaid and who might otherwise be eligible for Marketplace coverage.

⁴ As in prior years, consumers with coverage at the end of 2020 who did not make an active selection were generally automatically re-enrolled for 2021. When consumers had 2021 Marketplace plans available to them from their 2020 issuer, they were automatically re-enrolled into the same plan as 2020 or a different plan from the same issuer. Depending on the Marketplace, they could also be automatically re-enrolled into a suggested alternate plan from a different issuer, if no plan from their current issuer was available to them.

⁵ For HealthCare.gov Marketplaces: the 2017 OEP was from 11/1/2016 to 1/31/2017; the 2018 OEP was from 11/1/2017 to 12/15/2017 with data reported through 12/23/2017; the 2019 OEP was from 11/1/2018 to 12/15/2018 with data reported through 12/22/2018 (this includes the additional time provided to consumers who were unable to enroll by the original deadline); the 2020 OEP was from 11/1/2019 to 12/15/2019 with data reported from 11/1/2019 to 12/21/2019 (this includes the additional time provided to consumers who were unable to enroll by the original deadline); the 2021 OEP was from 11/1/2020 to 12/15/2020 with data reported through 12/21/2020 (this includes the additional time provided to consumers who were unable to enroll by the original deadline). Dates through which data are reported vary for SBMs; see the PUF methodology for detailed information.

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Table 1 summarizes the types of consumers who selected plans during the 2021 OEP. Twenty-one percent of consumers with a plan selection were new to the Marketplace, and 46 percent of consumers actively returned to select a 2021 plan on a Marketplace. Additional plan selection and demographic data for all 50 states plus DC are contained in the accompanying PUFs.

Table 1: Summary of OEP Plan Selections by Enrollment Type

	Count 2020	Count 2021	% of Total ⁶ 2020	% of Total ⁶ 2021
New Consumers	2,845,816	2,545,559	25	21
Returning Consumers Re-enrolling in Coverage				
Active Re-enrollees	5,273,646	5,513,796	46	46
Automatic Re-enrollees	3,289,985	3,945,010	29	33
Total Plan Selections	11,409,447	12,004,365	100	100

CONSUMERS APPLYING FOR AND SELECTING PLANS THROUGH THE HEALTHCARE.GOV PLATFORM

Reported below is additional information for applicants and consumers in states with Marketplaces that use HealthCare.gov. Table 2 displays statistics on the individuals who requested coverage on a submitted application for the 2020 and 2021 OEPs. In the 2021 OEP, 93 percent of requesting coverage were determined eligible to make a Qualified Health Plan selection (QHP), compared to 92 percent in the 2020 OEP. The percentage of consumers who applied for coverage and were preliminarily determined eligible for their state's Medicaid or Children's Health Insurance Program (CHIP) remained at 8 percent during the 2020 and 2021 OEPs.⁷

Table 2: HealthCare.gov Application Activity and Eligibility for 2020 and 2021 OEP

	Count 2020	Count 2021	% of Total 2020	% of Total 2021
Consumers Applying for Coverage on Submitted Applications	10,410,963	10,161,816		
QHP Eligible	9,620,485	9,479,261	92	93
Medicaid/CHIP Eligible	836,451	762,533	8	8

Table 3 shows demographic and plan characteristics among consumers who selected or were automatically re-enrolled in a plan during the 2020 and 2021 OEPs. Similar to the 2020 OEP, 18 percent of HealthCare.gov consumers resided in a rural location in the 2021 OEP. When compared

⁶ Totals may not sum to 100% due to rounding.

⁷ For HealthCare.gov states, individuals are generally determined eligible for either a QHP or Medicaid/CHIP, but there are cases where an individual is determined eligible for both QHP coverage and Medicaid/CHIP or neither. However, if a consumer is determined eligible for Medicaid/CHIP, they are typically not assessed for QHP eligibility.

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to the 2020 OEP, the percentage of consumers with reported household incomes between 100% and 250% FPL increased to 73 percent in the 2021 OEP from 71 percent in the in the 2020 OEP.⁸ During the 2021 OEP, 88 percent of consumers had their premiums reduced by APTC, compared to 87 percent in the 2020 OEP. The percentage of consumers who received cost-sharing reductions (CSRs) remained relatively stable from the 2020 OEP to the 2021 OEP at 52 percent and 51 percent, respectively. The percentage of consumers who selected a silver plan decreased from 59 percent in the 2020 OEP to 56 percent in the 2021 OEP, while bronze plan selections increased from 33 percent to 37 percent of total plan selections on HealthCare.gov.

Table 3: Demographic and Plan Characteristics of Consumers with 2020 and 2021 OEP Plan Selections on HealthCare.gov

	% of Total ⁹ 2020	% of Total ⁹ 2021
Age		
Less than 18	10	9
18 - 34	25	25
35 - 54	36	36
55+	30	29
Gender		
Female	55	55
Male	45	45
Location		
Rural	18	18
Non-rural	82	82
Race		
African-American	7	6
Asian	7	6
White	49	44
Other Race ¹⁰	4	4
Unknown	34	40
Ethnicity		
Hispanic/Latino	12	12
Not Hispanic/Latino	64	62
Unknown	24	26
Household Income		
100% - 250% FPL	71	73

⁸ For a family of four, a household income between 100% and 250% FPL generally corresponds to an annual household income of between \$26,200 and \$65,500 for coverage year 2020. This information can be found online at <https://aspe.hhs.gov/2020-poverty-guidelines>).

⁹ Totals may not sum to 100% due to rounding.

¹⁰ Other Race includes multiracial, American Indian/Alaska Native, and Native Hawaiian/Pacific Islander.

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	% of Total ⁹ 2020	% of Total ⁹ 2021
251% - 400% FPL	19	17
Other Household Income ¹¹	10	10
Financial Assistance		
With APTC	87	88
With CSR	52	51
Metal Level		
Catastrophic	1	1
Bronze	33	37
Silver	59	56
Gold	7	7
Platinum	<1	<1
Total Plan Selections	8,286,871	8,251,703

Table 4 contains information on premiums for consumers in states with Marketplaces that used the HealthCare.gov platform in each respective year. The average premium before application of APTC decreased by one percent, from \$595 per month in the 2020 OEP to \$590 in the 2021 OEP. Among consumers with APTC, the average APTC amount covered 85 percent of the total premium in both the 2020 and 2021 OEPs; the average premium after APTC for these consumers increased from \$89 in the 2020 OEP to \$92 in the 2021 OEP.

Table 4: Average Monthly Premium and Average Monthly Net Premium after APTC for Consumers with 2020 and 2021 OEP Plan Selections on HealthCare.gov

	Number	Average Monthly Premium	Average Monthly APTC	Average Monthly Premium after APTC
All Consumers – 2020	8,286,871	\$595	\$450	\$145
All Consumers – 2021	8,251,703	\$590	\$446	\$144
Consumers w/ APTC – 2020	7,205,225	\$606	\$517	\$89
Consumers w/ APTC – 2021	7,234,110	\$601	\$509	\$92
Consumers w/o APTC ¹² – 2020	1,081,646	\$522	NA	NA
Consumers w/o APTC ¹² – 2021	1,017,593	\$512	NA	NA

¹¹ Other household income includes plan selections for which consumers were not requesting financial assistance, household incomes below 100% FPL, household incomes above 400% FPL, and unknown household income. Please see the PUF for more information.

¹² Note that these findings may not be generalizable to the entire population of consumers who purchased individual market plans without APTC, as many consumers in this population purchase plans off of the Marketplace.

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Table 5 includes the average individual deductibles for consumers with plan selections during the 2017-2021 OEPs by metal level and CSR variant. Including silver plan CSR variants, the overall average deductible of plans selected during the OEP was \$2,825, consistent with the \$2,835 average for the 2020 OEP. Deductibles for consumers enrolled in the two most generous silver plan CSR variants, the 87 percent actuarial value (AV) plan and the 94 percent actuarial value plan, increased by 3 percent and declined by 35 percent, respectively, from the 2020 OEP to the 2021 OEP.¹³

Table 5: Average Individual Deductibles for 2017 – 2021 OEP Plan Selections on HealthCare.gov

	Bronze	Silver	73% AV CSR	87% AV CSR	94% AV CSR	Gold	Platinum	Overall
2017	\$6,327	\$3,491	\$2,863	\$661	\$189	\$1,003	\$184	\$2,405
2018	\$6,153	\$3,970	\$2,945	\$710	\$231	\$1,243	\$146	\$2,685
2019	\$6,376	\$4,056	\$2,913	\$567	\$131	\$1,225	\$120	\$2,719
2020	\$6,446	\$4,181	\$3,128	\$517	\$105	\$1,319	\$101	\$2,835
2021	\$6,094	\$4,500	\$3,115	\$530	\$69	\$1,458	\$68	\$2,825

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¹³ The 87% AV silver plan variant is available to APTC-eligible consumers with a household income greater than 150% FPL and less than or equal to 200% FPL, and the 94% AV silver plan variant is available to APTC-eligible enrollees with a household income greater than or equal to 100% FPL and less than or equal to 150% FPL.