Healthcare Benefits Survey Data Summary

Methodology

In June 2025, the APS Department of Human Resources and the Office of Procurement administered a survey to gather feedback from staff on what aspects of healthcare are important when considering an insurance carrier. Current staff received an anonymous link through APS email. The link was also shared through division-wide emails and posted on the APS website. APS retirees had the option to complete the online survey or a paper copy that was sent to them. Multiple emails and reminders were shared throughout the survey administration window to ensure awareness of the survey. Results from this survey will be used to inform the Request for Proposals issued in the Fall of 2025.

Response rate

A total of 2,048 surveys were completed from current staff and retirees. Findings in this data summary are focused on the current APS employees and retirees under the age of 65. A total of 1514 current APS employees and 72 retirees under the age of 65 completed the survey. Findings for retirees 65 and older will be reported in a separate data report. Staff from all scales of benefits eligible employees were represented in the sample of respondents. The margin of error for current APS employee respondents is 2% with a 95% confidence interval, indicating that we can be 95% confident that the sample result reflects the actual population within the margin of error.

Table 1: Response Rates by Scale

Scale	Current APS Staff	rrent APS Staff Survey Respondents	
	%	%	n
A Scale	14%	10%	161
C Scale	1%	1%	19
D Scale	4%	3%	53
E Scale	5%	6%	89
G Scale	5%	8%	124
M Scale	7%	3%	41
N Scale	2%	1%	21
P Scale	4%	7%	108
T Scale	58%	55%	877
X Scale	1%	1%	19
Other		Less than 1%	2
Retirees under 65		5%	72
Total		100%	1586

Summary of Findings

A majority of survey respondents (86%) indicated that they are currently enrolled in APS-sponsored health insurance. Of those who are enrolled in APS-sponsored health insurance, approximately one-third are enrolled in an HMO compared to two-thirds who are enrolled in an PPO.

Table 2: Are you currently enrolled in APS-sponsored health insurance? (n=1585)

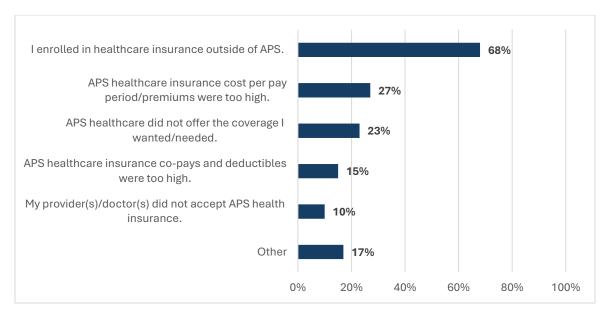
No	Yes
14%	86%

Table 3: If you are enrolled in APS-sponsored healthcare insurance, are you enrolled in an HMO or PPO? (n=1364)

НМО	PPO	I don't know
33%	65%	3%

• The main reason staff did not enroll in APS sponsored health insurance is due to **enrollment in** health insurance outside of APS. Approximately 1/4 of respondents indicated that the cost was too high (27%), or it did not offer the needed coverage (23%).

Figure 1: Why did you decide not to enroll in APS-sponsored health insurance for SY 2024-25? (n=219)



• When considering health insurance, out-of-pocket costs and premiums were identified as important or very important by over 95% of respondents. Over 80% of respondents also noted that current providers in network (86%) and the amount of time to process claims (82%) are important/very important.

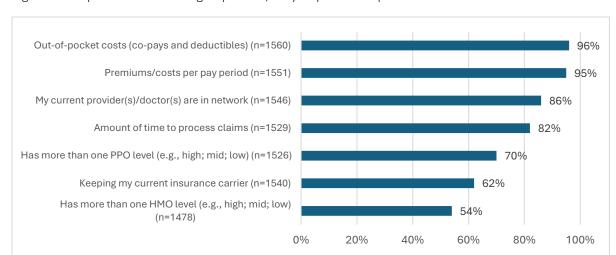


Figure 2: Respondents Indicating Important/Very Important Aspects of Healthcare Insurance

When asked about health insurance services, 82% of respondents identified the availability of provider(s)/doctor(s) in-network as an important service. In addition, 62% noted expansive prescription drug coverage and 51% reported that support finding a specialty provider/doctor are important services.

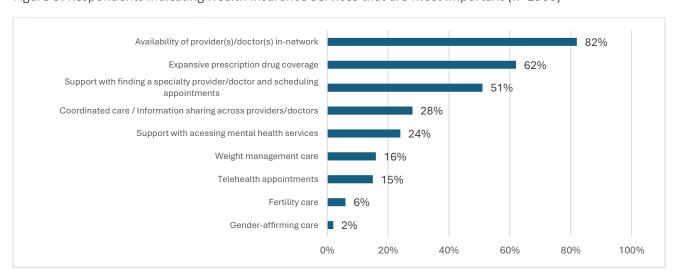


Figure 3: Respondents Indicating Health Insurance Services that are Most Important (n=1566)

• A majority of survey respondents (83%) reported that offering more than one health insurance carrier is important or very important.

Table 4:Respondents Indicating Level of Importance for APS to Offer More than One Insurance Carrier (n=1573)

Not at all important	Slightly important	Important	Very important
4%	13%	29%	54%

Data from the open-ended responses showed more than **one-third (34%)** of respondents indicated the **general affordability** of health insurance as an important feature when considering health insurance.

Table 5: Open-ended comments regarding healthcare features

Theme	n = 361
General affordability; Current insurance is too expensive	34%
Customer service – Responsive; Patient first; Easy website/app; System easy to use; Transparent billing	16%
Collaborative care across providers; One location for multiple services	16%
Larger network – more providers; more locations; more out-of-network options; Prescription options and delivery; medical devices; preventative/routine care	15%
Include options – levels; plans; carriers	15%
Comprehensive coverage of health concerns – women's health; fertility; holistic/alternative care; chronic/current conditions; coverage for a diverse community	10%
Coverage for weight management prescriptions	6%
Include dental and vision; Better dental and vision	6%
Out of area coverage	5%
Mental health coverage	3%
Other	5%

• Respondents shared additional comments about APS healthcare in general. A **majority** (59%) of these respondents indicated that they hope to **bring Kaiser Healthcare back** as a healthcare insurance option.

Table 6: Open-ended responses with other comments

Theme	n = 529
Kaiser – bring back; better; cheaper	59%
Happy, want to keep CareFirst	13%
Solicitation process – transparency; include staff/retirees; adequate communication during process	8%
Comments regarding the most recent APS healthcare change	7%
Don't change insurance again	7%
Issues with current provider/s – scheduling; prescriptions; customer service; don't like	6%
Specific provider attributes – easy to make appointments; multiple locations; extended hours	5%
Prefer Cigna	3%
Want to keep current providers	3%
Other	6%

Appendix

Survey Data Disaggregated by Staff Enrolled in APS Healthcare and Staff Not Enrolled in APS Healthcare

• Ninety-five percent of survey respondents enrolled in APS healthcare and those not enrolled in APS healthcare indicated that the out-of-pocket costs and premiums are important or very important when considering healthcare.

Table 7: Respondents Indicating Level of Importance for Aspects of Healthcare Insurance by Staff Enrolled in APS Healthcare vs. Staff Not Enrolled in APS Healthcare

		Not at all important	Slightly important	Important	Very important	l'm not sure
Out-of-pocket costs (co-pays and	APS Healthcare (n=1347)	1%	2%	15%	80%	2%
deductibles)	Non-APS Healthcare (n=212)	1%	2%	23%	72%	2%
Premiums/costs per	APS Healthcare (n=1342)	1%	3%	20%	75%	2%
pay period	Non-APS Healthcare (n=208)	0%	3%	21%	69%	2%
My current provider(s)/doctor(s)	APS Healthcare (n=1338)	7%	6%	18%	67%	2%
are in network	Non-APS Healthcare (n=207)	3%	4%	19%	71%	3%
Amount of time to	APS Healthcare (n=1328)	3%	12%	34%	49%	2%
process claims	Non-APS Healthcare (n=200)	5%	15%	32%	47%	2%
Has more than one PPO levels (e.g., high;	APS Healthcare (n=1317)	11%	13%	31%	38%	7%
mid; low)	Non-APS Healthcare (n=208)	8%	10%	34%	38%	11%
Keeping my current	APS Healthcare (n=1334)	21%	13%	21%	41%	6%
insurance carrier	Non-APS Healthcare (n=205)	13%	13%	19%	48%	7%
Has more than one HMO levels (e.g., high;	APS Healthcare (n=1273)	22%	15%	26%	27%	10%
mid; low)	Non-APS Healthcare (n=204)	13%	16%	33%	27%	10%

• When asked about health insurance services, **84%** of respondents enrolled in APS healthcare and **75%** of those not enrolled in APS healthcare identified **the availability of provider(s)/doctor(s) in-network** as an important service.

Table 8: Respondents Indicating Important Health Insurance Services by Staff Enrolled in APS Healthcare vs. Staff Not Enrolled in APS Healthcare

Insurance Service	APS Healthcare (n=1352)	Non-APS Healthcare (n=213)
Availability of provider(s)/doctor(s) in-network	84%	75%
Expansive prescription drug coverage	63%	60%
Support with finding a specialty provider/doctor (e.g., endocrinologist; neurologist; cardiologist) and scheduling appointments	51%	49%
Coordinated care / Information sharing across providers/doctors	29%	27%
Support with accessing mental health services (Support with scheduling appointments and finding provider/doctor; telehealth options)	24%	26%
Telehealth appointments	14%	21%
Weight management care	16%	16%
Fertility care	6%	7%
Gender-affirming care	2%	2%

• A majority of survey respondents enrolled in APS healthcare (83%) and those not enrolled in APS healthcare (78%) reported that offering more than one health insurance carrier is important or very important.

Table 9: Percent of Respondents Indicating Level of Importance for APS to Offer More than One Insurance Carrier by those Enrolled in APS Healthcare and those not Enrolled in APS Healthcare.

	Not at all important	Slightly important	Important	Very important
APS Healthcare (n=1365)	4%	13%	29%	54%
Non-APS Healthcare (n=217)	6%	13%	27%	51%