



Health Care Opinion Leaders' Views on Priorities for the Obama Administration

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ABSTRACT: The 17th Commonwealth Fund/*Modern Healthcare* Health Care Opinion Leaders Survey asked a diverse group of experts about priorities for the incoming administration and found President Obama enjoys a strong mandate for major elements of the health care reform proposal unveiled during the 2008 presidential campaign. There was strong support for allowing uninsured individuals to purchase coverage through a health insurance exchange, expanding the State Children's Health Insurance Program, creating new insurance market regulations, instituting employer provision or financing of coverage, and including a public insurance option in an insurance exchange. Large majorities of opinion leaders thought several specific health care provisions were very important or absolutely essential elements of a forthcoming economic stimulus package, including investing in health information technology, providing federal Consolidated Omnibus Budget Reconciliation Act (COBRA) premium assistance for recently laid-off workers, and allowing long-term unemployed Americans access to a public health insurance program.

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OVERVIEW

During the 2008 presidential campaign season, the vast majority of Americans called for comprehensive reform of the nation's health care system, with approximately nine of 10 adults saying it was important for the candidates to have proposals to improve the quality of care, ensure care and insurance are affordable, and decrease the number of the uninsured.¹ In response to public demand for federal action and leadership, President Barack Obama made fundamental health reform a cornerstone of his campaign. Specifically, he advocated for near-universal coverage through a mixed private-public group insurance system and proposed a series of measures designed to control costs and promote efficiency within the health care system.² Despite the current fiscal crisis and ongoing economic

downturn, the incoming administration has reaffirmed its commitment to comprehensive health reform initiatives. Several significant health care provisions are likely to be included in a forthcoming economic stimulus package.

To determine the level of support for President Obama's health care reform proposals and discern the best strategies for moving the health care system toward high performance, the latest Commonwealth Fund/*Modern Healthcare* Health Care Opinion Leaders Survey asked leaders in health care and health policy about priorities for the incoming administration. Survey respondents voiced resounding support for the major health initiatives President Obama unveiled on the campaign trail, including expansion of the State Children's Health Insurance Program (SCHIP), new regulation of the insurance market, employer provision or financing of coverage, and the introduction of a public insurance option in an insurance exchange. Two-thirds of opinion leaders believed the incoming administration should pursue universal coverage at the same time it develops policies to improve quality, increase efficiency, and control costs. Respondents also reported strong support for including specific health measures within an economic stimulus package, including reauthorizing and expanding SCHIP, investing in health information technology, opening a public health insurance program to the long-term unemployed, and providing federal Consolidated Omnibus Budget Reconciliation Act (COBRA) premium assistance to recently laid-off workers.

These views are in line with the recommendations of the Commonwealth Fund Commission on a High Performance Health System, which has a mission to promote better access, improved quality, and greater efficiency across the U.S. health care system. The Commission has recommended simultaneously pursuing five key strategies for change: ensuring affordable coverage for all, aligning incentives and effective cost control, providing accountable and coordinated care, aiming higher for quality and efficiency by investing

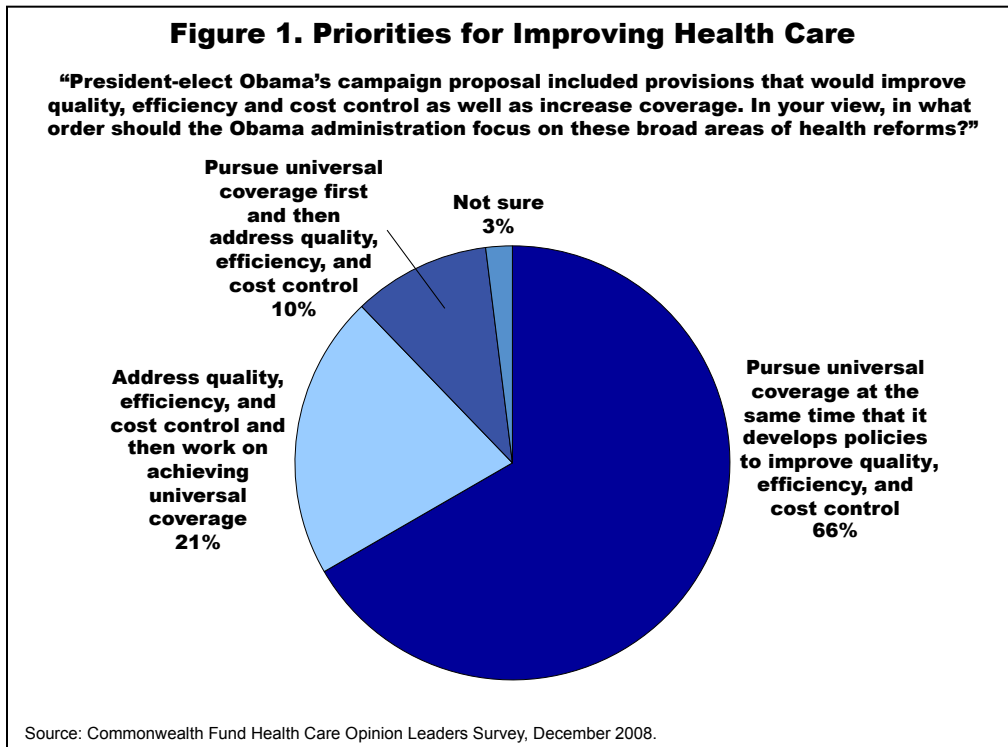
in information technology and comparative effectiveness information, and creating accountable leadership on the national level and public-private collaboration.³ Measured against these broad principles, the priorities outlined by President Obama and endorsed by a strong majority of health care opinion leaders have the potential to move the health care system toward high performance.⁴

THE HEALTH CARE OPINION LEADERS SURVEY

The Commonwealth Fund and *Modern Healthcare* recently commissioned Harris Interactive to solicit the perspectives of a diverse group of health care experts on priorities for the new administration and various proposals for health care reform. The 194 individuals who took part in the survey—the 17th in a continuing series of surveys assessing the views of experts on key health policy issues—represent the fields of academics and research; health care delivery; business, insurance, and other health industries; and government, labor, and advocacy groups (see [Methodology](#)).

Priorities for Improving Care

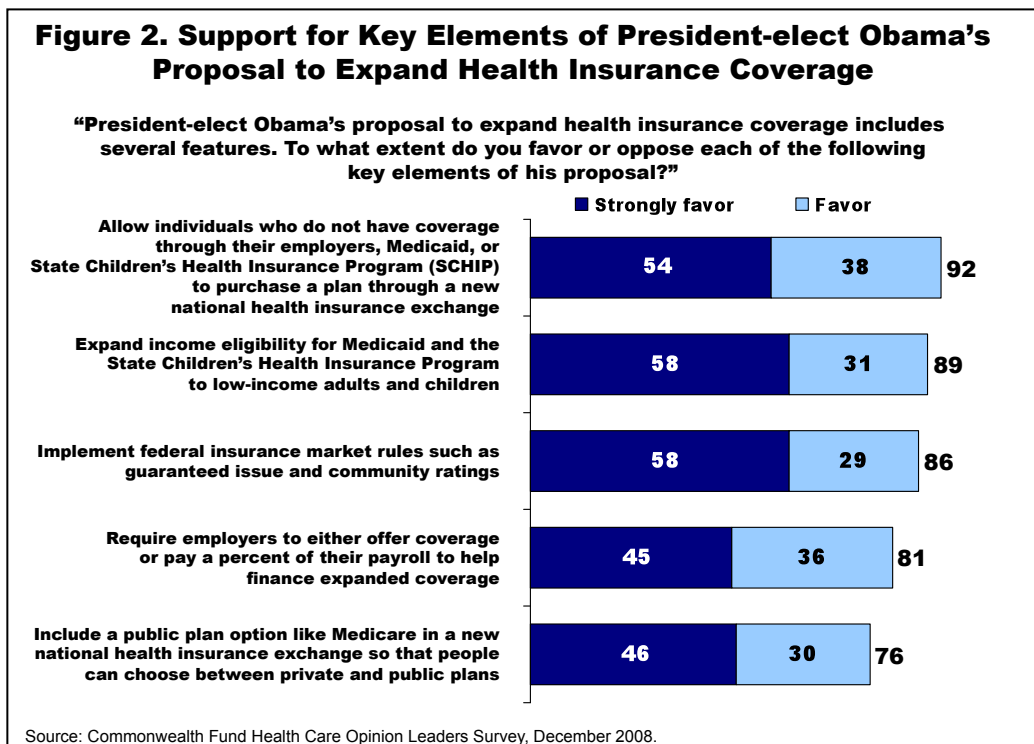
Two-thirds (66%) of survey respondents believe that the Obama administration should pursue universal coverage at the same time it develops policies to improve quality, efficiency, and cost control (Figure 1). Members in academic and research fields (73%) reported support for the simultaneous approach at higher rates than those in the business, insurance, and other health care industries (53%) (Table 1). Twenty-one percent of health care opinion leaders favored addressing quality, efficiency, and cost control before attempting to achieve universal coverage. Support among respondents in business and industry was higher (37%) than from those in academic and research institutions (11%). Ten percent of all health care opinion leaders supported pursuing universal coverage first and then addressing quality, efficiency, and cost control.



Support for Key Elements of Obama’s Proposal to Expand Insurance Coverage

More than nine of 10 (92%) health care opinion leaders favor or strongly favor allowing individuals who do not have coverage through their employers, Medicaid, or SCHIP to purchase a plan in a new national health

insurance exchange (Figure 2). There was a similar level of support for expanding income eligibility for Medicaid and SCHIP to include low-income adults and children (89%). More than three-fourths of health care opinion leaders favored or strongly favored implementing federal insurance market rules, such as



guaranteed issue and community rating (86%); requiring employers to either offer coverage to employees or pay a percentage of their payroll to help finance expanded coverage (81%); and including a public plan option like Medicare in a new national health insurance exchange (76%). Members of the academic and business communities were somewhat split on support for employer pay-or-play provisions (86% and 71%, respectively) and the public plan option (83% and 69%, respectively) (Table 2).

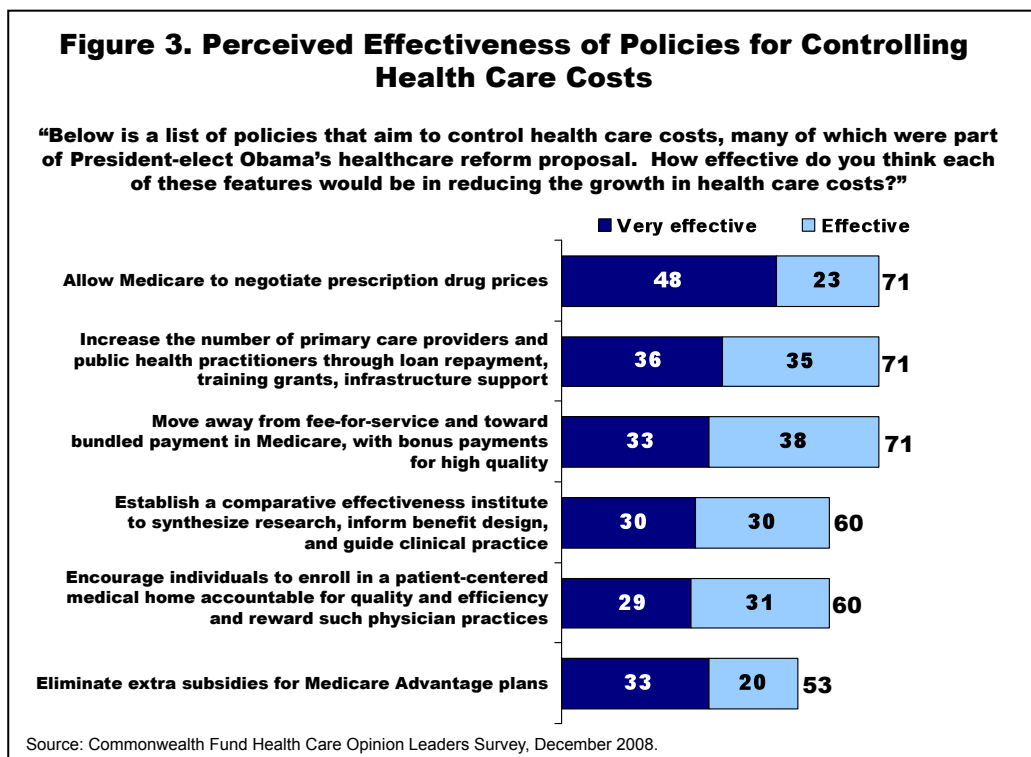
Perceived Effectiveness of Policies for Controlling Health Care Costs

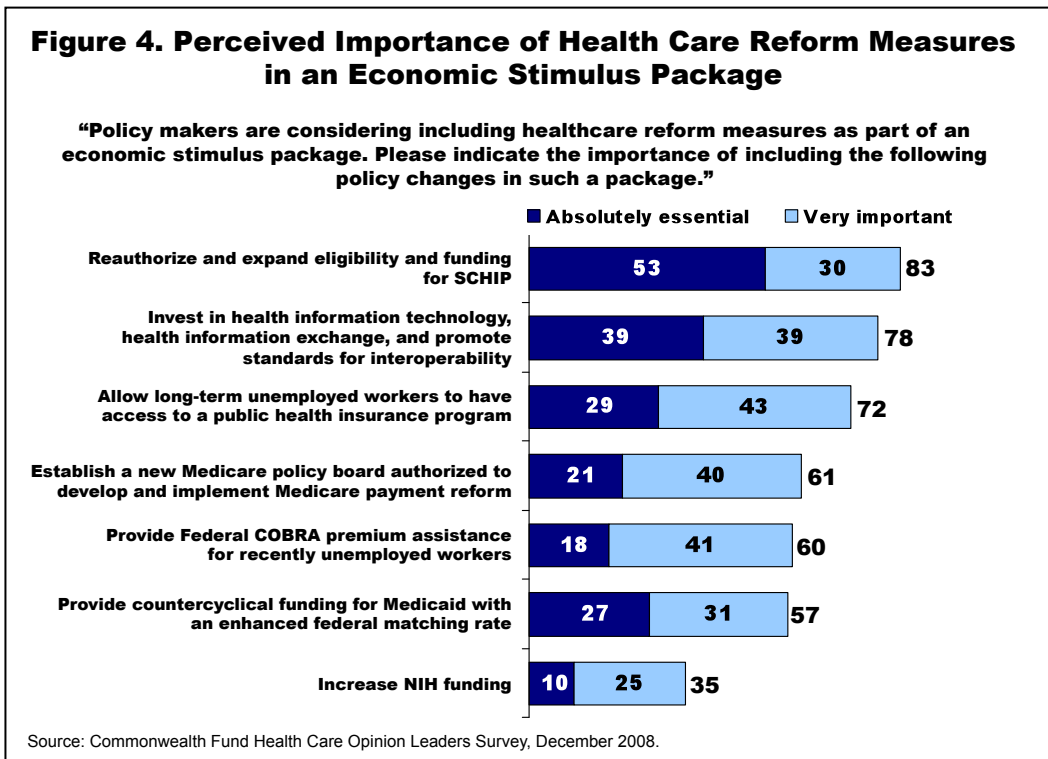
Seventy-one percent of opinion leaders believe that allowing Medicare to negotiate prescription drug prices would be an effective or very effective way to reduce the growth of health care costs (Figure 3). Respondents from business, insurance, and other health care industries (58%) were less supportive of this approach than those in academic or research institutions, health care delivery fields, or government, labor, and consumer advocacy organizations (Table 3). Seventy-one percent of opinion leaders believed that increasing the number of primary care providers and

public health practitioners through loan repayment, training grants, and infrastructure support was an effective or very effective strategy to control costs; the same amount (71%) reported that moving away from fee-for-service and toward bundled payment in Medicare would effectively control costs. Sixty percent of all respondents felt that establishing a center for comparative effectiveness or encouraging individuals to enroll in a patient-centered medical home would be effective or very effective approaches to reduce cost growth.

Perceived Importance of Health Care Reform Measures in an Economic Stimulus Package

Eighty-three percent of health care opinion leaders thought it was very important or absolutely essential to include reauthorization and expansion of SCHIP as part of an economic stimulus package (Figure 4). More than three-fourths (78%) of all opinion leaders thought that investment in health information technology was a very important or absolutely essential element of a stimulus package. Allowing long-term unemployed workers access to a public health insurance program





was also viewed as very important or absolutely essential by nearly three-fourths (72%) of all respondents.

Several other health care provisions were viewed by a majority of respondents as very important or absolutely essential to include in an economic stimulus package: establishing a new Medicare policy board authorized to develop and implement Medicare payment reform (61%), offering federal COBRA premium assistance for recently unemployed workers (60%), and providing countercyclical funding for Medicaid with an enhanced federal matching rate (57%).

Perceived Importance of Including Various Policies in the First Phase of a Phased Approach to Universal Coverage

Opinion leaders were asked to rate the importance of including various policies in the first phase of a phased approach to universal coverage. Eighty-two percent of total respondents reported that expanding income eligibility for Medicaid and SCHIP for low-income adults and children was either a very important or absolutely essential element of a first phase (Figure 5). In addition, 71 percent of opinion leaders felt that beginning to plan and implement a national health insurance exchange was a very important or absolutely essential

policy. Opinion leaders viewed allowing older adults to buy into Medicare (66%), eliminating the two-year Medicare waiting period (65%), and enacting requirements that employers offer coverage or contribute to the cost of coverage (60%) as very important or absolutely essential elements of a first phase.

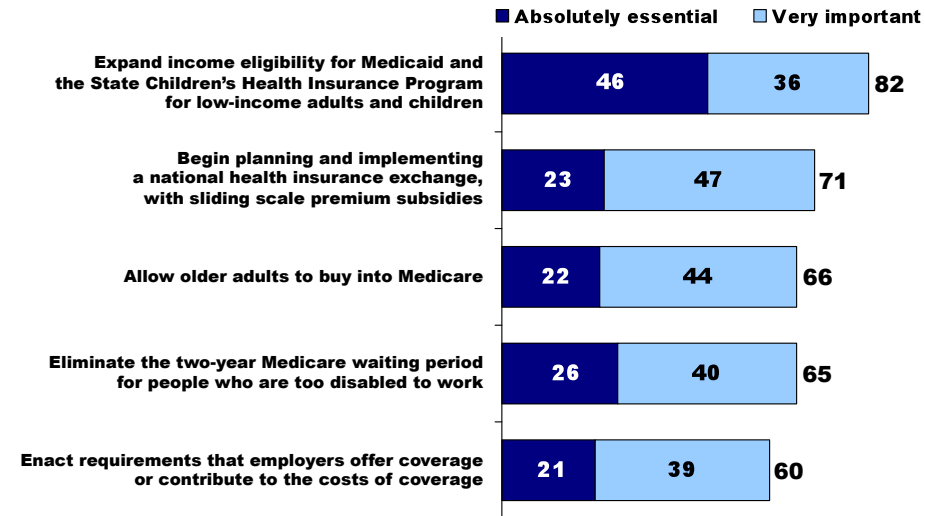
Perceived Importance of Payment Reform, Promoting Efficiency, and Controlling Costs in a Phased Approach to System Reform

Given the current economic and fiscal challenges facing the country, President Obama may follow a phased approach to systemwide initiatives such as payment reform, promoting efficiency, and controlling costs. Opinion leaders were asked to rate the importance of including various policies in the first phase of such reforms. Seventy-six percent of total respondents felt that providing funding to accelerate the adoption of health information technology and promote uniform standards of interoperability were very important or absolutely essential elements of a first phase (Figure 6).

Sixty-nine percent of total respondents reported that encouraging an increase in the national

Figure 5. Perceived Importance of Including Various Policies in the First Phase of a Phased Approach to Universal Coverage

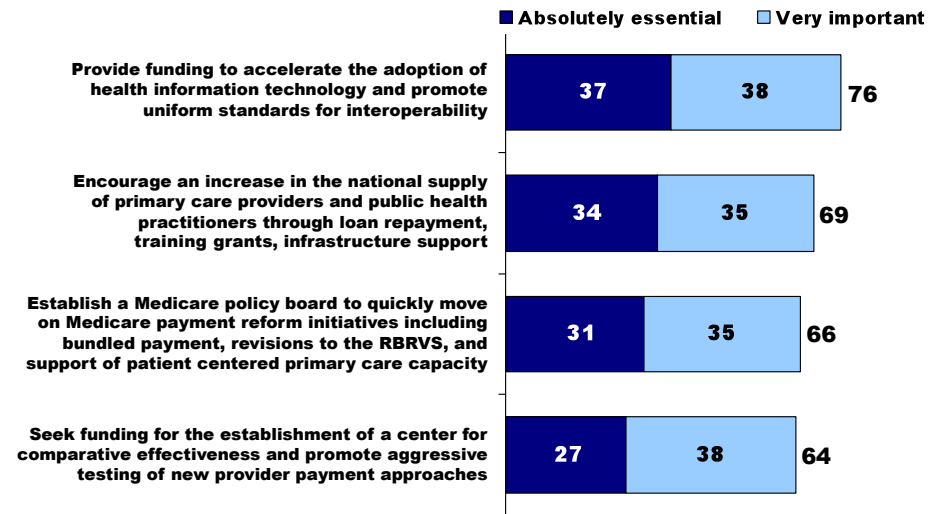
“Given the current economic and fiscal challenges facing the country, analysts have discussed the possibility of ‘phasing-in’ universal coverage and other system reforms. If President Obama were to follow a phased approach to universal coverage please indicate how important you think it is that each of the following policies be included in the first phase.”



Source: Commonwealth Fund Health Care Opinion Leaders Survey, December 2008.

Figure 6. Perceived Importance of Payment Reform, Promoting Efficiency, and Controlling Costs in a Phased Approach to System Reform

“If President-elect Obama were to follow a phased approach to system reforms such as payment reform, promoting health system efficiency, and controlling costs, please indicate how important you think it is that each of the following policies be included in the first phase.”



Source: Commonwealth Fund Health Care Opinion Leaders Survey, December 2008.

supply of primary care providers and public health practitioners through loan repayment, training grants, and infrastructure support was a very important or absolutely essential element of a first phase. Sixty-six percent of opinion leaders felt it was very important or absolutely essential to establish a Medicare policy board within a first reform phase, and 64 percent felt similarly about seeking funds for the establishment of a center for comparative effectiveness.

MOVING TOWARD A HIGH PERFORMANCE HEALTH SYSTEM

The Commonwealth Fund Commission on a High Performance Health System has defined a high performance health system as one that helps everyone, to the extent possible, lead longer, healthier, and more productive lives.⁵ Currently, although health spending in the United States is far higher than any other country, the health system falls short of what should be achievable.⁶ In order to move toward high performance, the Commission has recommended simultaneously ensuring affordable coverage for all, aligning incentives and effective cost control, providing accountable and coordinated care, aiming higher for quality and efficiency, and creating accountable leadership on the national level and public–private collaboration.⁷

The health care priorities set forth by President Obama on the campaign trail and endorsed by a strong majority of health care opinion leaders in this survey have the potential to move the health care system toward high performance. By advocating for near-universal coverage through a mixed private–public group insurance system and implementing a series of measures designed to control costs and promote efficiency within the health care system, the new administration has the opportunity to help millions of Americans get the care they need and bend the curve of the nation's unsustainable spending on health. To that end, it is critical that President Obama make early, prudent investments in American health security by including significant health care provisions in an economic stimulus bill and the first phase of a sequential approach to comprehensive reform.

The Commission's broad policy recommendations and the options presented in this brief garner substantial consensus among stakeholder groups on many key coverage and system reform issues. The responses also confirm the Commission's belief that there is no single "silver bullet" to solve the nation's health care crisis. Instead, a combination of reforms will be essential. Windows of opportunity do not stay open for long. The new administration and Congress must respond to the call for change, capitalize on the broad political and popular will for enacting substantive reform, and move swiftly to put the country on a path to high performance.

NOTES

- ¹ S. K. H. How, A. Shih, J. Lau, and C. Schoen, *Public Views on U.S. Health System Organization: A Call for New Directions* (New York: The Commonwealth Fund, Aug. 2008).
- ² S. R. Collins, J. L. Nicholson, S. D. Rustgi, and K. Davis, *The 2008 Presidential Candidates' Health Reform Proposals: Choices for America* (New York: The Commonwealth Fund, Oct. 2008).
- ³ The Commonwealth Fund Commission on a High Performance Health System, *A High Performance Health System for the United States: An Ambitious Agenda for the Next President* (New York: The Commonwealth Fund, Nov. 2007).
- ⁴ Collins, Nicholson, Rustgi, and Davis, *2008 Candidates' Proposals*, 2008.
- ⁵ Commonwealth Fund Commission, *Ambitious Agenda*, 2007.
- ⁶ The Commonwealth Fund Commission on a High Performance Health System, *Why Not the Best? Results from the National Scorecard on U.S. Health System Performance, 2008* (New York: The Commonwealth Fund, July 2008).
- ⁷ Commonwealth Fund Commission, *Ambitious Agenda*, 2007.

METHODOLOGY

This survey was conducted online by Harris Interactive on behalf of The Commonwealth Fund among 194 opinion leaders in health policy and innovators in health care delivery and finance within the United States between December 1, 2008, and January 2, 2009. Harris Interactive sent out individual e-mail invitations to the entire panel containing a password-protected link and a total of four reminder emails were sent to those that had not responded. No weighting was applied to these results.

The initial sample for this survey was developed using a two-step process. The Commonwealth Fund and Harris Interactive jointly identified a number of experts across different professional sectors with a range of perspectives based on their affiliations and involvement in various organizations. Harris Interactive then conducted an online survey with these experts asking them to nominate others within and outside their own fields whom they consider to be leaders and innovators in health care. Based on the result of the survey and after careful review by Harris Interactive, The Commonwealth Fund, and a selected group of health care experts, the sample for this poll was created. The final list included 1,246 individuals. In 2006, The Commonwealth Fund and Harris Interactive joined forces with *Modern Healthcare* to add new members to the panel. The Commonwealth Fund and Harris Interactive were able to gain access to *Modern Healthcare*'s database of readers. The Commonwealth Fund, Harris Interactive, and *Modern Healthcare* identified readers in the database that were considered to be opinion leaders and invited them to participate in the survey. This list included 1,467 people. At the end of 2006, The Commonwealth Fund and Harris Interactive removed those panelists who did not respond to any previous surveys. In 2007 recruitment for the panel continued with *Modern Healthcare* recruiting individuals through their Daily Dose newsletter. In addition, Harris Interactive continued to recruit leaders by asking current panelists to nominate other leaders. The final panel size for the Health Care Delivery System Reform survey included 1,078 leaders.

With a pure probability sample of 194 adults one could say with a 95 percent probability that the overall results have a sampling error of +/- 7.0 percentage points. However, that does not take other sources of error into account. This online survey is not based on a probability sample and therefore no theoretical sampling error can be calculated.

The data in this brief are descriptive in nature. They represent the opinions of the health care opinion leaders interviewed and are not projectable to the universe of health care opinion leaders.

ABOUT THE AUTHORS

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Karen Davis, Ph.D., is president of The Commonwealth Fund. She is a nationally recognized economist with a distinguished career in public policy and research. In recognition of her work, Ms. Davis received the 2006 AcademyHealth Distinguished Investigator Award. Before joining the Fund, she served as chairman of the Department of Health Policy and Management at The Johns Hopkins Bloomberg School of Public Health, where she also held an appointment as professor of economics. She served as deputy assistant secretary for health policy in the Department of Health and Human Services from 1977 to 1980, and was the first woman to head a U.S. Public Health Service agency. A native of Oklahoma, she received her doctoral degree in economics from Rice University, which recognized her achievements with a Distinguished Alumna Award in 1991. Ms. Davis has published a number of significant books, monographs, and articles on health and social policy issues, including the landmark books *Health Care Cost Containment; Medicare Policy; National Health Insurance: Benefits, Costs, and Consequences*; and *Health and the War on Poverty*. She can be e-mailed at kd@cmwf.org.

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