

## **NEWS RELEASE**

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## National Quality Agenda, Payment Reform and Care Integration Are Keys to Improving Quality and Patient Safety, Says New Health Care Opinion Leaders Survey

Government Support for Reforms Deemed Critical; Health Information Technology, Public Quality Reporting, Pay for Performance Seen as Effective Strategies

**New York City, July 30, 2007**—As health care quality and patient safety concerns rise, the latest <u>Commonwealth Fund Health Care Opinion Leaders survey</u> finds leaders united behind several key reform measures: more than half (56%) support the creation of a new public-private entity to coordinate quality efforts and form a national quality agenda; 95% believe that fundamental payment reform is needed; and three-fourths (73%) say that greater organization and integration of provider care is necessary for improved quality and efficiency.

Within these broad categories, the survey found consensus for specific strategies—many that include government leadership:

- 90% of respondents said use of health information technology should be mandated for Medicare providers within 5 or 10 years;
- half (51%) support financial incentives for physicians and hospitals to provide high quality care;
- 59% of respondents support public reporting of providers' performance on quality measures;
- only 7% felt that the current Patient Safety and Quality Improvement Act was sufficient to guarantee patient safety; three-fourths felt information about a physicians' or hospitals' patient safety record should not be confidential; and
- 73% support Medicare reform that would pay "medical homes"— defined as a health care setting that provides patients with timely, well-organized care, and enhanced access to providers—for care coordination.

In a new data brief on the survey findings, <u>Health Care Opinion Leaders' Views on the Quality and Safety of Health Care in the United States</u>, Katherine Shea, Tony Shih, and Karen Davis of The Commonwealth Fund find that opinion leaders agree the United States health care system isn't designed to provide high quality health care and changes must be made at the highest levels. A report released by The Commonwealth Fund last week, <u>An Analysis of Leading Congressional Health Care Bills</u>, <u>2005-2007: Part II, Quality and Efficiency</u>, found that current legislative proposals fall short of a national strategy for health care quality and efficiency.

"We were surprised at the amount of support the survey showed for government leadership in key areas, and for public-private partnerships in setting a national quality agenda," said Commonwealth Fund President Karen Davis. "My hope is that policymakers and providers will see the value in the kind of unified policy these opinion leaders support. We need to move away from our fragmented system of care and move toward national strategies that will ensure all Americans the high performance health care system they deserve."

Despite wide agreement and support for reforms opinion leaders did identify challenges. Nearly 8 of 10 (79%) said that physician autonomy would be a challenge to care integration, and 69 percent said the lack of financial incentives would be a barrier. However, only 14% felt that consumer resistance would be a barrier.

Seventy percent of opinion leaders said that the federal government should play a leading role in helping finance health information technology. Fifty-eight percent said that insurers/payers should step in.

"As expected, health information technology was identified as a promising vehicle for improving quality and efficiency," said Anthony Shih, M.D., assistant vice president for Quality and Efficiency Programs at the Fund. "But in addition to that, there was a strong call for federal leadership in actively promoting adoption, including through financial assistance to providers and health information exchange networks. This likely stems from the recognition that almost everybody stands to benefit from widespread use of health information technology."

The survey of leading health care experts with a diverse range of professional and ideological perspectives is the eleventh in a series from The Commonwealth Fund, and the third conducted in partnership with the publication *Modern Healthcare*. Commentaries on the survey findings by two former Secretaries of Health and Human Services, Donna E. Shalala and Tommy G. Thompson, are posted on the Fund's Web site. Shalala, who served under President Bill Clinton, is currently president of the University of Miami. Thompson, who served under President George W. Bush, is currently independent chairman at the Deloitte Center for Health Solutions.

Opinion leaders surveyed include experts from four broad health care sectors: academia and research organizations; health care delivery; business, insurance, and other health industry; and government and advocacy groups. Elected officials and media representatives were excluded. The online survey was conducted by Harris Interactive® on behalf of The Commonwealth Fund and focused solely on health care quality. The survey was completed online by 214 experts.

Methodology: The Commonwealth Fund Health Care Opinion Leaders Survey was conducted online by Harris Interactive between June 4, 2007, and July 1, 2007. The survey was administered via e-mail to a panel of 1,467 opinion leaders in health policy and innovators in health care delivery and finance. The final sample included 214 respondents from various industries. Typically, samples of this size are associated with a sampling error of +/- 6.7 percent. 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 sample was developed by The Commonwealth Fund, Modern Healthcare magazine, and Harris Interactive. Data from this survey were not weighted.