New Congress Should Focus on Covering the Uninsured, Reducing Health Costs, According to New Health Care Opinion Leaders Survey

Leaders Optimistic about Coverage and Cost Goals; Also Favor Increasing Levels of Recommended Care Americans Receive, Curbing Inappropriate Services

New York City, January 8, 2007—Expanding coverage for the uninsured should be the top health care priority for the new Congress over the next five years, identified as “absolutely essential” or “very important” by 88% of respondents to the latest Commonwealth Fund Health Care Opinion Leaders survey. Other top priorities are moderating rising health care costs (81%), reforming Medicare to ensure long-term solvency (80%), and increasing the use of information technology to improve the quality and safety of patient care (80%), the survey of respected experts indicated. Opinion leaders also say that reducing the proportion of the uninsured under-65 population from 18 percent to 5 percent is an achievable and desirable goal for policy action within the next 10 years.

The survey of leading health care experts with a diverse range of professional and ideological perspectives is the ninth in a series by The Commonwealth Fund, and the first conducted in partnership with the publication Modern Healthcare. Opinion leaders included 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 on Congressional priorities. The survey was completed online by 289 experts.

“When this many of our nation's health care experts, who don't always agree about priorities, name the same few critical issues, we have an excellent starting point for action on the health care agenda for the next few years,” said Commonwealth Fund President Karen Davis. “Covering the uninsured is a key component of a high performance health care system for the United States, and the experts' opinions reflect this great need.”
Reducing Uninsured and Cost Burdens, Improving Care Seen As Attainable Goals

Opinion leaders feel that substantial changes are achievable and desirable in several health care policy areas. In addition to saying that the proportion of uninsured could and should be significantly reduced over the next 10 years, respondents said (on average) that the proportion of households spending more than 10 percent of income (and 5 percent for those with low incomes) on health care costs could be reduced from 17 percent currently to 10 percent. Respondents also said that the total cost of health care as a percentage of gross domestic product (GDP) should and could be held to the current level of 16 percent over the next 10 years. Current projections by the Centers for Medicare and Medicaid Services are that health spending will grow to 20 percent of GDP by the year 2015.

Respondents also said that the proportion of recommended care received by adults could be increased from 55 percent to 75 percent, and the proportion of recommended care received by children could be increased from 44 percent to 80 percent.

Leaders Indicate Approaches That Would Be Effective to Expand Coverage

Opinion leaders agree on the importance of expanding health coverage for the uninsured and, in large part, on the approaches that would be effective in expanding coverage. Majorities say that effective strategies include:

- mandating that all individuals buy coverage, combined with subsidies and an insurance pooling mechanism for the uninsured to purchase affordable coverage (57%);
- providing states with matching funds for expanded Medicaid/SCHIP coverage for low-income children and adults (57%);
- creating a single-payer insurance system (54%); or
- covering everyone under Medicare (53%).

Half of all respondents say that requiring employers who don’t provide coverage to contribute to a fund would be an effective way to improve coverage, and 62 percent of respondents from government and advocacy groups believe that would be effective. Half of all respondents also say that allowing individuals and small businesses to buy into the Federal Employees Health Benefits program or similar group option would be an effective way to expand coverage.

Experts were less confident that the following options would be effective: providing tax credits or subsidies to low-wage workers (25%); promoting tax-free health saving accounts (14%); or allowing association health plans to provide coverage without state licensing restrictions (13%).

Respondents differed about which reforms would be extremely or very effective strategies to expand coverage for the uninsured. Respondents from academia and research organizations believe that a single-payer insurance system would be effective (66%); whereas, most respondents from the health care delivery sector (62%) and business, insurance and other
health industry leaders (57%) believe that an individual mandate to buy coverage would be effective.

The top five strategies for each sector are shown in the following table:

**EFFECTIVENESS OF REFORMS TO EXPAND COVERAGE FOR THE UNINSURED**
**ACCORDING TO SECTOR—TOP FIVE RANKING SUMMARY**

(Percent responding reform would be extremely or very effective)

<table>
<thead>
<tr>
<th></th>
<th>Academic/ Research</th>
<th>Health Care Delivery</th>
<th>Business/ Insurance/ Other Industry</th>
<th>Govt/Labor Consumer Advocacy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mandate that all individuals buy coverage, with subsidies and pooled insurance to increase affordability</td>
<td>4 (59%)</td>
<td>1 (62%)</td>
<td>1 (57%)</td>
<td></td>
</tr>
<tr>
<td>Provide federal matching funds for Medicaid/SCHIP coverage for low-income adults</td>
<td>3 (61%)</td>
<td>2 (58%)</td>
<td>2 (53%)</td>
<td>5* (51%)</td>
</tr>
<tr>
<td>Establish a single-payer insurance system run by the government</td>
<td>1 (66%)</td>
<td>5 (52%)</td>
<td></td>
<td>2* (54%)</td>
</tr>
<tr>
<td>Cover everyone under Medicare</td>
<td>2 (63%)</td>
<td></td>
<td></td>
<td>2* (54%)</td>
</tr>
<tr>
<td>Require employers who don’t provide coverage to contribute to a fund to pay for such coverage</td>
<td></td>
<td>4 (54%)</td>
<td>3 (46%)</td>
<td>1 (62%)</td>
</tr>
<tr>
<td>Allow buy-in to the FEHPB program or similar federal group option</td>
<td></td>
<td>3 (55%)</td>
<td>5 (44%)</td>
<td>5* (51%)</td>
</tr>
<tr>
<td>Open up Medicare to everyone not covered by an employer plan</td>
<td>5 (56%)</td>
<td></td>
<td></td>
<td>2* (54%)</td>
</tr>
<tr>
<td>Provide incentives or requirements to expand employer-based health insurance</td>
<td></td>
<td></td>
<td>4 (45%)</td>
<td></td>
</tr>
<tr>
<td>Let near-elderly adults buy into Medicare</td>
<td></td>
<td></td>
<td></td>
<td>5* (51%)</td>
</tr>
</tbody>
</table>

Rank based on proportion of respondents indicating reform would be “extremely effective” or “very effective”; statistical significance of differences cannot be precisely determined.

*When percents were equal, options were assigned the same rank.

Reducing Inappropriate Care, Increased Use of Evidence-Based Guidelines, Improving IT Use Considered Top Ways to Control Costs

When asked about approaches to control the rising cost of health care, three of four health care leaders said that reducing inappropriate care would be effective, with the greatest support coming from business/insurance/other health industry leaders (83%). Other approaches health care leaders think would be effective in reducing costs are: use of evidence-based guidelines to determine whether a test or procedure should be done (70%), increased and more effective use of information technology (66%) and increasing the use of disease and care management strategies for the chronically ill (65%).

Methodology: The online survey was conducted within the United States by Harris Interactive between November 14, 2006 and December 8, 2006. The survey was delivered via e-mail to a panel of 1,246 opinion leaders in health policy and innovators in health care delivery and finance; 289 responded. The sample was derived from a panel developed by The Commonwealth Fund, *Modern Healthcare* and Harris Interactive. Data from this survey were not weighted. With a pure probability sample of 289, one could typically say with a ninety-five percent probability that the overall results would have a sampling error of +/-6 percentage points. Sampling error for data based on sub-samples would be higher and may vary. 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 Commonwealth Fund is a private foundation supporting independent research on health and social issues.