

HEALTH CARE REFORM UPDATE: INCREASED PATIENT PROTECTION

A Public Opinion Study

Spring 1998

In January, the Congressional Institute commissioned Charlton Research Company to conduct a comprehensive national study on health care reform. The study indicated that Americans are relatively satisfied with their current health-care coverage, and a majority reported that they had never been denied coverage because of restrictions made by their HMO. Our findings are in keeping with other recent studies. For example, a recent *US News & World Report/Kaiser Family Foundation Survey* found that nine-out-of-ten Americans had not been denied medical treatment in the past year because of their insurance coverage. Furthermore, eighty-seven percent are very or somewhat satisfied with their current health insurance plan. Despite these relatively positive attitudes toward current coverage, Americans are very worried about their future health-care experiences. For example, majorities in the *US News & World Report/Kaiser Family Foundation Survey* indicated they are concerned that, in the future, they may be denied coverage for a specific medical procedure, that they may not always be able to go to their doctor of choice, and that the quality of health care could get worse. Our study suggested that these fears are driven by anecdotal evidence. Although a majority of people may not have experienced any coverage problems, they have heard of someone who has and fear a problem could happen to them in the future.

Our research also indicated that while Americans are concerned about the current health-care system, they have not yet come to a mature judgment about health-care reform. Instead, they are at the stage of weighing potential policy implications against personal values systems and health-care experiences. In order to further explore these issues, the Congressional Institute and Charlton Research Company asked Americans to rate their attitudes toward several health-care policy alternatives specifically dealing with patient protection. The results of this second survey—which was conducted in May among a random sample of adults nationwide—are consistent with the overall findings from our January study.

First, the results suggest that while people may not think the current system is meeting their ideal standard, they do not necessarily want more regulations or stipulations imposed on the health-care system. For example, of three policy alternatives circulating in Congress, respondents favor the two which offer relatively minor changes to the current system (See Fig 1). A plurality indicated that they would prefer Congress to focus on providing tax deductions

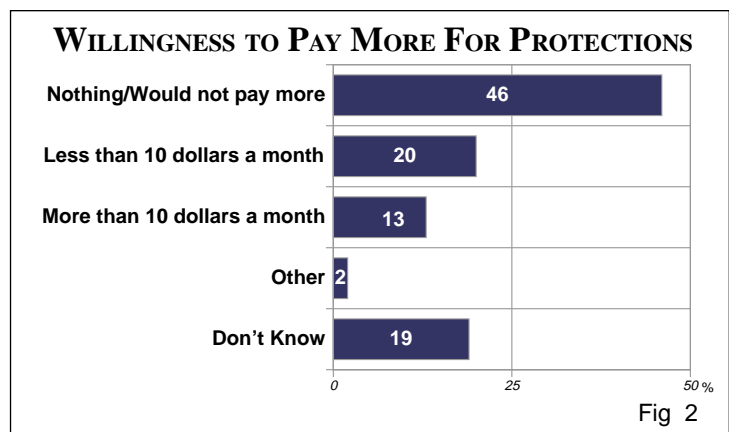
HEALTH CARE REFORM FOCUS		
	<i>First Mentions</i> %	<i>Total Mentions</i> %
Provide tax deductions	44	70
Significantly increase medical research funding	32	65
Strengthen the patients review process	21	49
Don't Know	3	3

Fig 1

and tax credits for insurance premiums to make health insurance more affordable and to give people more insurance choices. Respondents had similar favorable attitudes toward significantly increasing medical research funding so that we can discover new cures and better treatments and develop prevention programs which will lower the cost of health care in the long term. They had much less favorable opinions toward the idea of strengthening the process by which patients can demand a review of decisions made by doctors, hospitals and/or insurance companies which may result in higher health-care costs. This data also indicates that people are much more interested in affordability than in strengthening patient protections. As in the January study, respondents tend to favor economic policy solutions, such as tax deductions and medical research funding, to patients' rights solutions.

Furthermore, Americans are extremely resistant to spending more money on health care, especially to provide more patient protection. Nearly half of all respondents indicated they would not pay more in health insurance premiums for the federal government

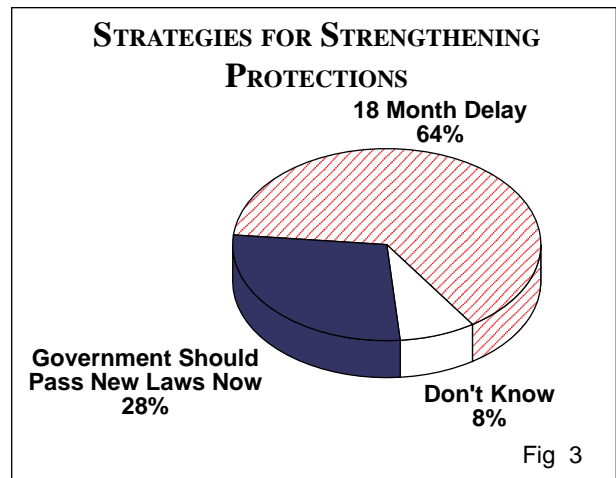
to provide patient protection by creating a third-party system of review for cases of coverage denial (See Fig 2). One-fifth would pay less than ten dollars per month in increased health insurance premiums for this additional patient protection. Only 13% would be willing to pay over ten dollars per month. These findings are consistent with other public-opinion studies. For example, a Kaiser/Harvard National Survey



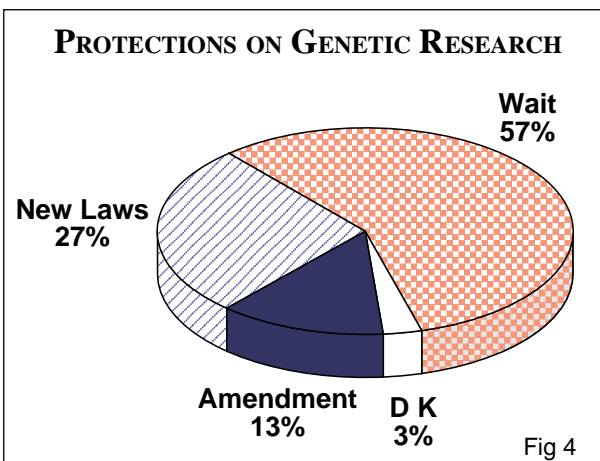
found that people are much less supportive of President Clinton's consumer bill of rights for health care once educated about its economic implications. Three-quarters of Americans favored the bill when told that it would assure patients easier access to treatment, more information to help them select plans and doctors, and new ways to appeal if they are unhappy with their care, but only thirty-three percent favored the bill when told it might increase the cost of people's health insurance premiums.

Policymakers may recognize this opinion pattern which is essentially the same one that existed during the catastrophic health-care debate of the late 1980s. In that case, prior to the bill's adoption, Congress saw data indicating strong public support for increased health-care protections. Only after enacting the law did Congress and the White House experience the wrath of senior citizens, who by then had discover they were personally required to pay for additional health-care protections. In response, Congress repealed the legislation within nine months. This case illustrates that while people often express desire for certain protections, true public judgment is only attained after people begin to recognize the trade-offs or consequences of obtaining those protections. In the catastrophic health-care case, seniors were not willing to pay for the additional benefits they were to receive. The same appears to be true when it comes to patient rights.

Americans also indicate a willingness to give the private sector a chance to reform itself, with regard to patient protection, before resorting to government regulations. Two-thirds agree with the concept of giving doctors, hospitals and insurance companies 18 months to jointly create a health care system that would better protect patient rights before imposing a new set of regulations (See Fig 3). Only one-quarter believe the government should pass new laws and regulations now to protect patient rights in dealing with doctors, hospitals and insurance companies.



Finally, in another illustration of their reluctance for additional health-care regulation, Americans are also



wary of making immediate decisions on protecting patients rights with respect to genetic research, even when told that genetic information could be used to determine the extent of people's health coverage or treatments. Over half of respondents believe that, because we still do not know enough about genetic research, we should wait until we know more about human genes before any new patient protection regulation is imposed (See Fig 4). One-quarter felt that Congress should adopt new laws to guarantee that no person can be denied coverage or treatment based

on genetic information. Very few respondents wanted the government to propose a constitutional amendment to address this issue.

Research Methodology—The patient protection questions were asked among 800 adults nationwide during May 1998. This sample size, which was proportionate to the country's demographics including geography, gender, and ethnicity, yields a $\pm 3.5\%$ margin of error. In the January 1998 Health Care Reform study, a random sample of 800 adults nationwide was interviewed.

For More Information—Please contact Tracey Soeth of Charlton Research Company at (925) 274-5900 or Jerry Climer of the Congressional Institute at (202) 547-4600 with any questions or to receive a copy of our initial Health Care Reform study.