The Commonwealth Fund/*Modern Healthcare* Health Care Opinion Leaders Survey

VULNERABLE POPULATIONS

August 2011

Introduction

The Commonwealth Fund Health Care Opinion Leaders (HCOL) Survey was conducted by Harris Interactive® on behalf of The Commonwealth Fund and *Modern Healthcare*, with responses from a broad group of 186 of innovators and opinion leaders in health policy, health care delivery, and finance. This was the 26th study in a series of surveys designed to highlight leaders' perspectives on the most timely health policy issues facing the nation. This survey focused on vulnerable populations.

Health care opinion leaders were identified by The Commonwealth Fund, *Modern Healthcare*, and Harris Interactive as individuals who are experts and influential decision makers within their respective industries.

About the Respondents

Respondents represent a broad range of employment positions and professional settings. For analytical purposes we combined respondents into four sectors (for a more detailed description of respondents' place of employment please refer to Table 8):

- *Academic/Research Institutions* (58%)*
- *Business/Insurance/Other Health Care Industry* (25%)*; including health insurance, pharmaceutical, other industries/businesses, and health care improvement organizations
- *Health Care Delivery* (22%)*; including medical societies or professional associations, allied health societies or professional associations or organizations, hospital or related professional associations or organizations, hospitals, nursing homes/long-term care facilities, clinics, and physician or other clinical practices.
- *Government/Labor/Consumer Advocacy* (9%)*; including government, labor, and consumer advocacy.**

* Percentages add to more than 100 as respondents were able to give more than one answer.
** Respondents in these industries were combined because of the small sample sizes of the individual groups.

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TABLE 1
RATING OF U.S. HEALTH SYSTEM'S PERFORMANCE

"On the whole, how successful is the U.S. health system in achieving high performance on the following domains?"

Note: Percentages may not add up to 100 percent because of rounding or no response.

Base: 186 respondents

		Total	Academic/ Research Inst.	Health Care Delivery	Business/ Insurance/ Other Health Care Industry	Government/ Labor/ Consumer Advocacy
		%	%	%	%	%
Quality, or the extent to which care is effective and well-coordinated, safe, timely, and patient-centered	**n=**	**185**	**107**	**41**	**46**	**16**
	Very successful/ Successful	**14%**	**15%**	**24%**	**7%**	**6%**
	Very successful	—	—	—	—	—
	Successful	14%	15%	24%	7%	6%
	Neither successful nor unsuccessful	30%	25%	34%	39%	44%
	Very unsuccessful/ Unsuccessful	**57%**	**60%**	**41%**	**54%**	**50%**
	Unsuccessful	44%	50%	32%	37%	44%
	Very unsuccessful	13%	10%	10%	17%	6%
	Not sure	—	—	—	—	—
Access, as measured by participation in the health care system and the affordability of insurance coverage and medical services	**n=**	**185**	**107**	**41**	**46**	**16**
	Very successful/ Successful	**10%**	**8%**	**12%**	**11%**	**6%**
	Very successful	1%	—	2%	—	—
	Successful	9%	8%	10%	11%	6%
	Neither successful nor unsuccessful	16%	14%	15%	13%	25%
	Very unsuccessful/ Unsuccessful	**74%**	**78%**	**73%**	**76%**	**69%**
	Unsuccessful	48%	50%	51%	48%	44%
	Very unsuccessful	26%	27%	22%	28%	25%
	Not sure	—	—	—	—	—

TABLE 1 (continued)
RATING OF U.S. HEALTH SYSTEM'S PERFORMANCE

"On the whole, how successful is the U.S. health system in achieving high performance on the following domains?"

Note: Percentages may not add up to 100 percent because of rounding or no response.

Base: 186 respondents

		Total	Academic/ Research Inst.	Health Care Delivery	Business/ Insurance/ Other Health Care Industry	Government/ Labor/ Consumer Advocacy
		%	%	%	%	%
Efficiency, meaning the degree to which there is overuse or inappropriate use of services, preventable hospitalizations and readmissions, regional variation in quality and cost, administrative complexity, and use of information systems	**n=**	**184**	**107**	**41**	**46**	**16**
	Very successful/ Successful	**3%**	**3%**	**5%**	**2%**	**—**
	Very successful	—	—	—	—	—
	Successful	3%	3%	5%	2%	—
	Neither successful nor unsuccessful	7%	8%	5%	7%	13%
	Very unsuccessful/ Unsuccessful	**89%**	**88%**	**90%**	**91%**	**88%**
	Unsuccessful	54%	51%	66%	54%	63%
	Very unsuccessful	35%	36%	24%	37%	25%
	Not sure	1%	1%	—	—	—
Equity, defined as an absence in disparities among population groups in terms of health status, care, and coverage	**n=**	**185**	**107**	**41**	**46**	**16**
	Very successful/ Successful	**4%**	**4%**	**5%**	**7%**	**6%**
	Very successful	—	—	—	—	—
	Successful	4%	4%	5%	7%	6%
	Neither successful nor unsuccessful	6%	4%	15%	7%	6%
	Very unsuccessful/ Unsuccessful	**90%**	**93%**	**80%**	**87%**	**88%**
	Unsuccessful	50%	50%	46%	57%	63%
	Very unsuccessful	39%	43%	34%	30%	25%
	Not sure	—	—	—	—	—
Outcomes, which includes measures such as life expectancy, mortality, and prevalence of disability and limitations because of health	**n=**	**185**	**107**	**41**	**46**	**16**
	Very successful/ Successful	**24%**	**23%**	**41%**	**13%**	**25%**
	Very successful	2%	1%	2%	2%	6%
	Successful	23%	22%	39%	11%	19%
	Neither successful nor unsuccessful	23%	23%	27%	33%	38%
	Very unsuccessful/ Unsuccessful	**52%**	**53%**	**32%**	**54%**	**38%**
	Unsuccessful	38%	39%	20%	37%	38%
	Very unsuccessful	14%	14%	12%	17%	—
	Not sure	—	—	—	—	—

TABLE 2
RATING OF U.S. HEALTH SYSTEM'S ACHIEVEMENT OF EQUITY FOR VULNERABLE POPULATIONS

"How successful is the U.S. health system in achieving equity on the following domains: for vulnerable populations?"

Note: Percentages may not add up to 100 percent because of rounding or no response.

Base: 186 respondents

		Total	Academic/ Research Inst.	Health Care Delivery	Business/ Insurance/ Other Health Care Industry	Government/ Labor/ Consumer Advocacy
		%	%	%	%	%
Quality, or the extent to which care is effective and well-coordinated, safe, timely, and patient-centered	**n=**	**184**	**106**	**41**	**46**	**16**
	Very successful/ Successful	**5%**	**3%**	**10%**	**7%**	**6%**
	Very successful	—	—	—	—	—
	Successful	5%	3%	10%	7%	6%
	Neither successful nor unsuccessful	14%	18%	17%	13%	6%
	Very unsuccessful/ Unsuccessful	**81%**	**78%**	**73%**	**80%**	**88%**
	Unsuccessful	52%	49%	54%	52%	63%
	Very unsuccessful	29%	29%	20%	28%	25%
	Not sure	1%	1%	—	—	—
Access, as measured by participation in the health care system and the affordability of insurance coverage and medical services	**n=**	**184**	**107**	**41**	**46**	**16**
	Very successful/ Successful	**7%**	**5%**	**10%**	**9%**	**6%**
	Very successful	—	—	—	—	—
	Successful	7%	5%	10%	9%	6%
	Neither successful nor unsuccessful	12%	10%	15%	11%	13%
	Very unsuccessful/ Unsuccessful	**82%**	**85%**	**76%**	**80%**	**81%**
	Unsuccessful	43%	46%	44%	37%	44%
	Very unsuccessful	38%	39%	32%	43%	38%
	Not sure	—	—	—	—	—
Outcomes, which includes measures such as life expectancy, mortality, and prevalence of disability and limitations because of health	**n=**	**185**	**107**	**41**	**46**	**17**
	Very successful/ Successful	**4%**	**4%**	**7%**	**4%**	**—**
	Very successful	—	—	—	—	—
	Successful	4%	4%	7%	4%	—
	Neither successful nor unsuccessful	18%	18%	27%	17%	35%
	Very unsuccessful/ Unsuccessful	**77%**	**79%**	**66%**	**78%**	**65%**
	Unsuccessful	43%	43%	37%	46%	35%
	Very unsuccessful	35%	36%	29%	33%	29%
	Not sure	—	—	—	—	—

TABLE 3
THE AFFORDABLE CARE ACT AND VULNERABLE POPULATIONS

"How effective do you feel the Affordable Care Act will be in addressing the following issues for vulnerable populations?"

Note: Percentages may not add up to 100 percent because of rounding or no response.

Base: 186 respondents

		Total	Academic/ Research Inst.	Health Care Delivery	Business/ Insurance/ Other Health Care Industry	Government/ Labor/ Consumer Advocacy
		%	%	%	%	%
Quality, or the extent to which care is effective and well-coordinated, safe, timely, and patient-centered	**n=**	**180**	**106**	**41**	**46**	**16**
	Very effective/ Effective	**36%**	**37%**	**49%**	**30%**	**38%**
	Very effective	1%	1%	—	—	—
	Effective	36%	36%	49%	30%	38%
	Neither effective nor ineffective	34%	35%	27%	39%	31%
	Very ineffective/ Ineffective	**24%**	**24%**	**24%**	**24%**	**25%**
	Ineffective	16%	18%	17%	11%	19%
	Very ineffective	8%	6%	7%	13%	6%
	Not sure	5%	5%	—	7%	6%
Access, as measured by participation in the health care system and the affordability of insurance coverage and medical services	**n=**	**180**	**106**	**41**	**46**	**16**
	Very effective/ Effective	**68%**	**70%**	**66%**	**63%**	**69%**
	Very effective	8%	10%	5%	—	13%
	Effective	60%	59%	61%	63%	56%
	Neither effective nor ineffective	11%	12%	5%	15%	13%
	Very ineffective/ Ineffective	**18%**	**16%**	**29%**	**17%**	**13%**
	Ineffective	12%	13%	22%	7%	6%
	Very ineffective	6%	3%	7%	11%	6%
	Not sure	2%	2%	—	4%	6%
Financial protection, or protection against hardship from medical bills	**n=**	**180**	**106**	**41**	**46**	**15**
	Very effective/ Effective	**67%**	**67%**	**66%**	**63%**	**73%**
	Very effective	7%	9%	2%	—	13%
	Effective	60%	58%	63%	63%	60%
	Neither effective nor ineffective	13%	14%	12%	17%	7%
	Very ineffective/ Ineffective	**17%**	**16%**	**20%**	**20%**	**7%**
	Ineffective	9%	11%	15%	4%	7%
	Very ineffective	7%	5%	5%	15%	—
	Not sure	3%	3%	2%	—	13%

TABLE 3 (continued)
THE AFFORDABLE CARE ACT AND VULNERABLE POPULATIONS

"How effective do you feel the Affordable Care Act will be in addressing the following issues for vulnerable populations?"

Note: Percentages may not add up to 100 percent because of rounding or no response.

Base: 186 respondents

		Total	Academic/ Research Inst.	Health Care Delivery	Business/ Insurance/ Other Health Care Industry	Government/ Labor/ Consumer Advocacy
		%	%	%	%	%
Efficiency, meaning the degree to which there is overuse or inappropriate use of services, preventable hospitalizations and readmissions, regional variation in quality and cost, administrative complexity, and use of information systems	**n=**	**181**	**107**	**41**	**46**	**16**
	Very effective/ Effective	**29%**	**27%**	**34%**	**26%**	**38%**
	Very effective	1%	2%	—	—	—
	Effective	28%	25%	34%	26%	38%
	Neither effective nor ineffective	30%	31%	29%	28%	31%
	Very ineffective/ Ineffective	**36%**	**36%**	**37%**	**37%**	**25%**
	Ineffective	22%	21%	29%	20%	25%
	Very ineffective	14%	15%	7%	17%	—
	Not sure	5%	7%	—	9%	6%
Outcomes, which includes measures such as life expectancy, mortality, and prevalence of disability and limitations because of health	**n=**	**180**	**107**	**41**	**45**	**16**
	Very effective/ Effective	**32%**	**35%**	**29%**	**29%**	**44%**
	Very effective	1%	1%	—	—	—
	Effective	32%	34%	29%	29%	44%
	Neither effective nor ineffective	37%	36%	44%	36%	31%
	Very ineffective/ Ineffective	**26%**	**25%**	**24%**	**29%**	**19%**
	Ineffective	18%	21%	15%	16%	6%
	Very ineffective	8%	5%	10%	13%	13%
	Not sure	4%	5%	2%	7%	6%

TABLE 4
POST-REFORM ROLE OF TRADITIONAL SAFETY-NET PROVIDERS

"Assuming that the coverage expansion initiatives included in the Affordable Care Act are implemented as scheduled in 2014, which of the following comes closest to your view regarding the post-reform role of traditional safety-net providers such as public hospitals and Federally Qualified Health Centers?"

Note: Percentages may not add up to 100 percent because of rounding or no response.

Base: 186 respondents

	Total	Academic/ Research Inst.	Health Care Delivery	Business/ Insurance/ Other Health Care Industry	Government/ Labor/ Consumer Advocacy
	%	%	%	%	%
n=	**181**	**107**	**41**	**46**	**16**
A. Traditional safety-net providers will no longer be needed	—	—	—	—	—
B. Traditional safety-net providers will still be needed to serve individuals who remain uninsured	16%	16%	20%	15%	13%
C. Traditional safety-net providers will still be needed as they are best equipped to serve the special needs of vulnerable populations (even if they are insured)	9%	8%	12%	11%	25%
Both B and C	73%	72%	66%	72%	63%
Not sure	2%	4%	2%	2%	—

TABLE 5
IMPROVING THE QUALITY OF CARE PROVIDED BY SAFETY-NET PROVIDERS

"Please indicate the degree to which you support the following strategies to improve the quality of care vulnerable populations receive from safety-net providers such as community health centers, public hospitals, and faith-based and mission-driven community service facilities."

Note: Percentages may not add up to 100 percent because of rounding or no response.

Base: 186 respondents

		Total	Academic/ Research Inst.	Health Care Delivery	Business/ Insurance/ Other Health Care Industry	Government/ Labor/ Consumer Advocacy
		%	%	%	%	%
Facilitate the adoption and spread of patient-centered medical homes	**n=**	**181**	**107**	**41**	**46**	**16**
	Strongly support/ Support	**83%**	**84%**	**85%**	**74%**	**88%**
	Strongly support	40%	35%	59%	39%	31%
	Support	43%	50%	27%	35%	56%
	Neither support nor oppose	13%	11%	15%	22%	13%
	Oppose/ Somewhat oppose	**2%**	**2%**	**—**	**2%**	**—**
	Oppose	1%	1%	—	—	—
	Strongly oppose	1%	1%	—	2%	—
	Not sure	2%	3%	—	2%	—
Facilitate the adoption and spread of accountable care organizations	**n=**	**180**	**107**	**40**	**45**	**15**
	Strongly support/ Support	**47%**	**54%**	**40%**	**38%**	**60%**
	Strongly support	11%	12%	13%	9%	—
	Support	37%	42%	28%	29%	60%
	Neither support nor oppose	38%	33%	40%	44%	33%
	Oppose/ Somewhat oppose	**11%**	**8%**	**15%**	**18%**	**7%**
	Oppose	9%	7%	8%	16%	—
	Strongly oppose	2%	1%	8%	2%	7%
	Not sure	3%	5%	5%	—	—
Move toward tightly integrated models of care delivery	**n=**	**181**	**107**	**41**	**46**	**16**
	Strongly support/ Support	**82%**	**83%**	**76%**	**78%**	**81%**
	Strongly support	39%	37%	39%	48%	25%
	Support	44%	46%	37%	30%	56%
	Neither support nor oppose	12%	13%	7%	20%	13%
	Oppose/ Somewhat oppose	**4%**	**3%**	**15%**	**2%**	**6%**
	Oppose	4%	3%	12%	—	—
	Strongly oppose	1%	—	2%	2%	6%
	Not sure	1%	1%	2%	—	—

TABLE 5 (continued)
Improving the Quality of Care Provided by Safety-Net Providers

"Please indicate the degree to which you support the following strategies to improve the quality of care vulnerable populations receive from safety-net providers such as community health centers, public hospitals, and faith-based and mission-driven community service facilities."

Note: Percentages may not add up to 100 percent because of rounding or no response.

Base: 186 respondents

		Total	Academic/ Research Inst.	Health Care Delivery	Business/ Insurance/ Other Health Care Industry	Government/ Labor/ Consumer Advocacy
		%	%	%	%	%
Ensure access to enabling services such as transportation and translation	n=	**181**	**107**	**41**	**46**	**16**
	Strongly support/ Support	**86%**	**87%**	**95%**	**80%**	**94%**
	Strongly support	33%	33%	41%	28%	25%
	Support	54%	54%	54%	52%	69%
	Neither support nor oppose	9%	9%	5%	7%	6%
	Oppose/ Somewhat oppose	**4%**	**3%**	**—**	**11%**	**—**
	Oppose	3%	3%	—	7%	—
	Strongly oppose	1%	—	—	4%	—
	Not sure	1%	1%	—	2%	—
Utilize performance-based payment contracting with providers to make them more accountable for the care that they provide to their communities	n=	**180**	**106**	**40**	**46**	**16**
	Strongly support/ Support	**74%**	**75%**	**70%**	**76%**	**94%**
	Strongly support	23%	25%	18%	28%	31%
	Support	51%	50%	53%	48%	63%
	Neither support nor oppose	17%	18%	18%	15%	—
	Oppose/ Somewhat oppose	**8%**	**7%**	**10%**	**9%**	**6%**
	Oppose	6%	7%	3%	7%	—
	Strongly oppose	2%	—	8%	2%	6%
	Not sure	1%	1%	3%	—	—

TABLE 6
ENCOURAGING PRIVATE SECTOR PROVIDERS AND VULNERABLE POPULATIONS

"Please indicate your support for or opposition to the following approaches that have been proposed to encourage private sector providers to serve vulnerable populations."

Note: Percentages may not add up to 100 percent because of rounding or no response.

Base: 186 respondents

		Total	Academic/ Research Inst.	Health Care Delivery	Business/ Insurance/ Other Health Care Industry	Government/ Labor/ Consumer Advocacy
		%	%	%	%	%
Permanently increase provider reimbursement rates under Medicaid up to Medicare levels	**n=**	**181**	**107**	**41**	**46**	**16**
	Strongly support/ Support	**71%**	**71%**	**83%**	**65%**	**56%**
	Strongly support	36%	39%	49%	22%	13%
	Support	35%	32%	34%	43%	44%
	Neither support nor oppose	13%	13%	15%	11%	25%
	Oppose/ Somewhat oppose	**12%**	**11%**	**2%**	**17%**	**13%**
	Oppose	9%	8%	2%	11%	13%
	Strongly oppose	3%	3%	—	7%	—
	Not sure	4%	5%	—	7%	6%
Provide positive incentives for providers to serve vulnerable populations (e.g., enhanced payment rates)	**n=**	**181**	**107**	**41**	**46**	**16**
	Strongly support/ Support	**81%**	**80%**	**85%**	**80%**	**69%**
	Strongly support	28%	28%	34%	30%	13%
	Support	53%	52%	51%	50%	56%
	Neither support nor oppose	12%	11%	10%	13%	31%
	Oppose/ Somewhat oppose	6%	6%	5%	4%	—
	Oppose	4%	6%	2%	2%	—
	Strongly oppose	1%	—	2%	2%	—
	Not sure	2%	3%	—	2%	—
Condition provider participation in the Medicare program on participation in Medicaid	**n=**	**181**	**107**	**41**	**46**	**16**
	Strongly support/ Support	**54%**	**55%**	**51%**	**63%**	**50%**
	Strongly support	20%	21%	20%	17%	13%
	Support	34%	34%	32%	46%	38%
	Neither support nor oppose	20%	19%	22%	17%	25%
	Oppose/ Somewhat oppose	**22%**	**22%**	**24%**	**17%**	**19%**
	Oppose	14%	14%	15%	13%	19%
	Strongly oppose	8%	8%	10%	4%	—
	Not sure	4%	4%	2%	2%	6%

TABLE 6 (continued)
ENCOURAGING PRIVATE SECTOR PROVIDERS AND VULNERABLE POPULATIONS

"Please indicate your support for or opposition to the following approaches that have been proposed to encourage private sector providers to serve vulnerable populations."

Note: Percentages may not add up to 100 percent because of rounding or no response.

Base: 186 respondents

		Total	Academic/ Research Inst.	Health Care Delivery	Business/ Insurance/ Other Health Care Industry	Government/ Labor/ Consumer Advocacy
		%	%	%	%	%
Expand the funding of enabling services (e.g., transportation, translation) for vulnerable populations to a wider range of providers	**n=**	**181**	**107**	**41**	**46**	**16**
	Strongly support/ Support	**74%**	**76%**	**80%**	**65%**	**81%**
	Strongly support	20%	22%	24%	15%	—
	Support	54%	53%	56%	50%	81%
	Neither support nor oppose	15%	14%	12%	17%	13%
	Oppose/ Somewhat oppose	**8%**	**7%**	**5%**	**15%**	**6%**
	Oppose	7%	7%	5%	11%	6%
	Strongly oppose	1%	—	—	4%	—
	Not sure	3%	3%	2%	2%	—
Expand opportunities for scholarships and loan forgiveness for providers who practice in health professional shortage areas	**n=**	**181**	**107**	**41**	**46**	**16**
	Strongly support/ Support	**88%**	**87%**	**95%**	**89%**	**81%**
	Strongly support	45%	47%	61%	35%	25%
	Support	43%	40%	34%	54%	56%
	Neither support nor oppose	9%	10%	5%	7%	13%
	Oppose/ Somewhat oppose	**3%**	**3%**	**—**	**4%**	**—**
	Oppose	1%	1%	—	2%	—
	Strongly oppose	2%	2%	—	2%	—
	Not sure	1%	—	—	—	6%

TABLE 7
UNDOCUMENTED IMMIGRANTS AND ACCESS TO CARE

"Under the Affordable Care Act, undocumented immigrants to the U.S. are ineligible for premium subsidies and expanded Medicaid coverage. Please indicate the degree to which you support policies that would guarantee access to preventive, primary, and acute care for undocumented immigrants."

Note: Percentages may not add up to 100 percent because of rounding or no response.

Base: 186 respondents

		Total	Academic/ Research Inst.	Health Care Delivery	Business/ Insurance/ Other Health Care Industry	Government/ Labor/ Consumer Advocacy
		%	%	%	%	%
Please indicate the degree to which you support policies that would guarantee access to preventive, primary, and acute care for undocumented immigrants	**n=**	**181**	**107**	**41**	**46**	**16**
	Strongly support/ Support	**70%**	**74%**	**68%**	**61%**	**56%**
	Strongly support	34%	39%	24%	28%	13%
	Support	36%	35%	44%	33%	44%
	Neither support nor oppose	10%	14%	12%	4%	6%
	Oppose/ Somewhat oppose	**17%**	**9%**	**20%**	**30%**	**31%**
	Oppose	11%	7%	10%	20%	31%
	Strongly oppose	6%	3%	10%	11%	—
	Not sure	2%	3%	—	4%	6%

TABLE 8
TYPE OF EMPLOYMENT

"How would you describe your current employment position?"

Note: Percentages may not add up to 100 percent because of rounding or no response.

Base: 182 respondents

	%
Researcher/Professor/Teacher	33%
CEO/President	29%
Policy analyst	19%
Physician	19%
Management/Administration	12%
Consultant	11%
Foundation officer	7%
Dean or department head	5%
Consumer advocate	4%
Health care purchaser	4%
Policymaker or policy staff (federal)	2%
Lobbyist	2%
Policymaker or policy staff (state)	1%
Regulator	1%
Investment analyst	1%
Retired	8%
Other health care provider (not physician)	3%
Other	3%

TABLE 9
PLACE OF EMPLOYMENT

"Which of the following best describes the place or institution for which you work or if retired last worked?"

Note: Percentages may not add up to 100 percent because of rounding or no response.

Base: 186 respondents

	%
ACADEMIC AND RESEARCH INSTITUTIONS (NET)	**59%**
Medical, public health, nursing, or other health professional school	24%
Think tank/Healthcare institute/Policy research institution	23%
University setting not in a medical, public health, nursing, or other health professional school	11%
Foundation	8%
Medical publisher	1%
PROFESSIONAL, TRADE, CONSUMER ORGANIZATIONS (NET)	**18%**
Medical society or professional association or organization	5%
Allied health society or professional association or organization	3%
Hospital or related professional association or organization	3%
Health insurance and business association or organization	3%
Labor/Consumer/Seniors' advocacy group	3%
Pharmaceutical/Medical device trade association organization	—
Financial services industry	—
HEALTH CARE DELIVERY (NET)	**18%**
Physician practice/Other clinical practice (patient care)	7%
Health insurance/Managed care industry	7%
Hospital	5%
Clinic	5%
Nursing home/Long-term care facility	1%
GOVERNMENT (NET)	**3%**
Staff for a state elected official or state legislative committee	2%
Staff for a federal elected official or federal legislative committee	1%
Nonelected state executive-branch official	—
Nonelected federal executive-branch official	1%
Staff for nonelected state executive-branch official	—
Staff for nonelected federal executive-branch official	1%
PHARMACEUTICAL INDUSTRY (NET)	**1%**
Drug manufacturer	1%
Device company	—
Biotech company	—
OTHER INDUSTRY/BUSINESS SETTINGS (NET)	**17%**
Health care consulting firm	9%
Health care improvement organization	4%
CEO, CFO, Benefits manager	3%
Polling organization	1%
Accrediting body and organization (non-governmental)	1%

Please note that respondents may fall into more than one of these categories.

Methodology

This survey was conducted online by Harris Interactive on behalf of The Commonwealth Fund among 186 opinion leaders in health policy and innovators in health care delivery and finance within the United States between June 14 and July 20, 2011. Harris Interactive sent out individual e-mail invitations to the entire panel containing a password-protected link, and a total of five 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 Vulnerable Population survey included 1,302 leaders. With this survey, we are using a new definition of the panel. One hundred eighty-six of these panelists completed the survey, for a 14.3% response rate.

With a pure probability sample of 186 adults one could say with a 95 percent probability that the overall results have a sampling error of +/– 7.18 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. It represents the opinions of the health care opinion leaders interviewed and is not projectable to the universe of health care opinion leaders.

About Harris Interactive

Harris Interactive is one of the world's leading custom market research firms, leveraging research, technology, and business acumen to transform relevant insight into actionable foresight. Known widely for the Harris Poll and for pioneering innovative research methodologies, Harris offers expertise in a wide range of industries including health care, technology, public affairs, energy, telecommunications, financial services, insurance, media, retail, restaurant, and consumer package goods. Serving clients in over 215 countries and territories through our North American and European offices and a network of independent market research firms, Harris specializes in delivering research solutions that help us—and our clients—stay ahead of what's next. For more information, please visit www.harrisinteractive.com.