

TABLE 1a
TOP PRIORITIES FOR CONGRESS IN NEXT 5 YEARS

"Which of the following health care issues should be the top priorities for Congress to address in the next five years?" (Multiple response)

Base: 251 Respondents

	Total	Academic/ Research Institution	Health Care Delivery	Business/ Insurance/ Other Health Care Industry	Government/ Labor/ Consumer Advocacy
	%	%	%	%	%
Expand coverage to the uninsured	83%	87%	75%	67%	91%
Increased use of information technology to improve the quality and safety of care	62%	57%	65%	70%	64%
Enact reforms to moderate the rising costs of medical care for the nation	51%	54%	52%	48%	48%
Medicare reforms to ensure long-run solvency	44%	44%	48%	62%	27%
Medicare payment reform to reward performance on quality and efficiency	42%	41%	38%	53%	36%
Address racial/ethnic disparities in care	30%	33%	29%	22%	42%
Administrative simplification and standardization	29%	30%	38%	25%	39%
Medicaid reforms to improve coverage	29%	28%	31%	27%	33%
Address shortage of trained health professionals (e.g., primary care physicians and nurses)	23%	20%	44%	17%	24%
Control rising cost of prescription drugs	22%	24%	27%	20%	30%
Malpractice reform	17%	9%	27%	33%	3%
Improve the quality of nursing homes and long-term care	14%	17%	8%	8%	24%
Improve incentives to purchase long-term care insurance	10%	11%	6%	13%	9%
Control Medicaid costs	6%	9%	2%	5%	3%

TABLE 1b
TOP 5 PRIORITIES FOR CONGRESS IN NEXT 5 YEARS

Ranking Summary

Base: 251 Respondents

	Total	Academic/ Research Institution	Health Care Delivery	Business/ Insurance/ Other Health Care Industry	Government/ Labor/ Consumer Advocacy
	Rank	Rank	Rank	Rank	Rank
Expand coverage to the uninsured	1 (1)*	1 (1)	1 (1)	2 (1)	1 (1)
Increased use of information technology to improve the quality and safety of care	2 (n/a)**	2 (n/a)	2 (n/a)	1 (n/a)	2 (n/a)
Enact reforms to moderate the rising costs of medical care for the nation	3 (4)	3 (3)	3 (5)	5 (5)	3 (4)
Medicare reforms to ensure long-run solvency	4 (3)	4 (4)	4 (3)	3 (3)	
Medicare payment reform to reward performance on quality and efficiency	5 (5)	5		4 (4)	
Address racial/ethnic disparities in care					4
Administrative simplification and standardization					5
Address shortage of trained health professionals (e.g., primary care physicians and nurses)	n/a***		5		

* ranking in 2004

**wording change in 2006

***new item in 2006

TABLE 2**GOALS FOR THE NEXT 10 YEARS**

"Please indicate what you would see as both an achievable and a desirable target or goal for policy action for the next 10 years."

Base: 251 Respondents

	Total	Academic/ Research Institution	Health Care Delivery	Business/ Insurance/ Other Health Care Industry	Government/ Labor/ Consumer Advocacy
	Median %	Median %	Median %	Median %	Median %
The proportion of under-65 population that has no health insurance (now about 18%)	5	6	6	10	5
The total cost of health care as a percentage of the GDP (now about 15%)	16	16	16	16	16
Portion of recommended care that patients receive	77	77	78	76	81

TABLE 3**WAYS TO CONTROL RISING COSTS AND IMPROVE QUALITY**

"Below is a list of ways that have been proposed to control the rising costs of health care and improve the quality of care. Which of the following should be the top priorities for action?"
(Multiple Response)

Base: 251 Respondents

	Total	Academic/ Research Institution	Health Care Delivery	Business/ Insurance/ Other Health Care Industry	Government/ Labor/ Consumer Advocacy
	%	%	%	%	%
Increased and more effective use of information technology	64%	57%	75%	77%	52%
Reward providers who are more efficient and provide higher-quality care	61%	60%	65%	63%	64%
Increased use of disease and care management strategies for the chronically ill	53%	52%	52%	50%	55%
Use evidence-based guidelines to determine whether a test or procedure should be done	47%	49%	46%	42%	61%
Make information on comparative quality and costs of care of hospitals and physicians available to the public	37%	34%	19%	48%	39%
Reduce administrative costs of insurers and providers	33%	35%	48%	33%	30%
Have all payers, including private insurers, Medicare, and Medicaid, adopt common payment methods or rates	33%	35%	42%	28%	21%
Consolidate purchasing power by public and private insurers working together to moderate rising costs of care	25%	25%	25%	22%	30%
Reduce inappropriate medical care and fraud	23%	18%	29%	27%	39%
Create a national agency to set quality standards and practice guidelines	21%	21%	23%	12%	36%
Encourage small employers to join larger group purchasing pools to buy health insurance for their employees	18%	15%	19%	17%	24%
Malpractice reform	18%	15%	23%	28%	3%
Legalize the importation of brand name prescription drugs from Canada or other countries	12%	14%	13%	10%	12%
Encourage competition among insurers and providers	11%	13%	6%	10%	3%
Require consumers to pay a substantially higher share of their health care costs	10%	11%	10%	12%	6%

TABLE 3b
WAYS TO CONTROL RISING COSTS AND IMPROVE QUALITY
 Ranking Summary

Base: 251 Respondents

	Total	Academic/ Research Institution	Health Care Delivery	Business/ Insurance/ Other Health Care Industry	Government/ Labor/ Consumer Advocacy
	Rank	Rank	Rank	Rank	Rank
Increased and more effective use of information technology	1 (2)*	2 (1)	1 (1)	1 (2)	4 (2)
Reward providers who are more efficient and provide higher-quality care	2 (n/a)**	1 (n/a)	2 (n/a)	2 (n/a)	1 (n/a)
Increased use of disease and care management strategies for the chronically ill	3 (n/a)***	3	3	3	3
Use evidence-based guidelines to determine whether a test or procedure should be done	4 (n/a)***	4	5	5	2
Make information on comparative quality and costs of care of hospitals and physicians available to the public	5 (3)			4 (3)	5 (4)
Reduce administrative costs of insurers and providers	(4)	5 (4)	4 (3)	(5)	
Have all payers, including private insurers, Medicare, and Medicaid, adopt common payment methods or rates	(n/a)***	5			
Reduce inappropriate medical care and fraud				(5)	5

* ranking in 2004

**wording change in 2006

***new item in 2006

TABLE 4a
EXPANDED COVERAGE FOR THE UNINSURED

"Below is a list of possible reforms to expand coverage for the uninsured. Which of the following should be the top priorities for action?" (Multiple Response)

Base: 251 Respondents

	Total	Academic/ Research Institution	Health Care Delivery	Business/ Insurance/ Other Health Care Industry	Government/ Labor/ Consumer Advocacy
	%	%	%	%	%
Allow individuals and small businesses to buy into the Federal Employees Health Benefits Program or similar federal group option	51%	50%	58%	48%	45%
Require employers who don't provide coverage to contribute to a fund that would pay for such coverage	46%	44%	54%	35%	64%
Let near-elderly adults buy into Medicare	43%	44%	31%	42%	64%
Provide federal matching funds for Medicaid/SCHIP coverage of everyone below 150% of poverty	41%	45%	33%	32%	48%
Establish a single-payer insurance system	38%	42%	44%	28%	48%
Open up Medicare to everyone not covered by an employer plan	35%	39%	40%	32%	30%
Provide tax credits or other subsidies to low-wage workers to buy coverage	32%	33%	31%	32%	27%
Provide incentives or requirements to expand employer-based health insurance	32%	26%	48%	42%	30%
Mandate that all individuals buy coverage and provide new tax credits for the uninsured to purchase insurance in the individual insurance market	29%	28%	31%	35%	18%
Provide reinsurance for small business insurance plans	22%	23%	10%	25%	12%
Eliminate two-year waiting period for the disabled for Medicare	21%	21%	13%	17%	42%
Promote tax-free health savings accounts	16%	11%	19%	32%	3%
Permit association health plans to provide coverage without state licensing	5%	4%	13%	5%	--

TABLE 4b
EXPANDED COVERAGE FOR THE UNINSURED

Ranking Summary

Base: 251 Respondents

	Total	Academic/ Research Institution	Health Care Delivery	Business/ Insurance/ Other Health Care Industry	Government/ Labor/ Consumer Advocacy
	Rank	Rank	Rank	Rank	Rank
Allow individuals and small businesses to buy into the Federal Employees Health Benefits Program or similar federal group option	1 (1)*	1 (1)	1 (1)	1 (1)	3 (3)
Require employers who don't provide coverage to contribute to a fund that would pay for such coverage	2 (n/a)***	3 (tie)	2	3 (tie)	1 (tie)
Let near-elderly adults buy into Medicare	3 (3)	3 (tie); (4)	(3)	2 (tie); (4)	1 (tie); (1)
Provide federal matching funds for Medicaid/SCHIP coverage of everyone 150% below poverty	4 (n/a)***	2		4 (tie)	2 (tie)
Establish a single-payer insurance system	5 (n/a)**	4	4	5	2 (tie)
Open up Medicare to everyone not covered by an employer plan	(n/a)***	5	5	4 (tie)	5 (tie)
Provide tax credits or other subsidies to low-wage workers to buy coverage	(n/a)***			4 (tie)	
Provide incentives or requirements to expand employer-based health insurance	(n/a)**		3	2 (tie)	5 (tie)
Mandate that all individuals buy coverage and provide new tax credits for the uninsured to purchase insurance in the individual insurance market	(n/a)**			3 (tie)	
Eliminate two-year waiting period for the disabled for Medicare					4
Promote tax-free health savings accounts	(n/a)**			4 (tie)	

* ranking in 2004

**wording change in 2006

***new item in 2006

TABLE 5
PLACE OF EMPLOYMENT

"Which of the following best describes the type of place or institution for which you work?"

Base: 251 Respondents

	%
Academic and Research Institutions	
Medical, public health, nursing, or other health professional school	27%
Think tank/Health care institute/Policy research institution	16%
University setting not in a medical, public health, nursing, or other health professional school	9%
Foundation	7%
Medical publisher	2%
Professional, Trade, Consumer Organizations	
Medical society or professional association or organization	8%
Hospital or related professional association or organization	2%
Allied health society or professional association or organization	1%
Health insurance and business association or organization	2%
Pharmaceutical/Medical device trade association organization	1%
Financial services industry	*
Labor/Consumers/Seniors' advocacy group	6%
Other industry/business settings/other	
Health care consulting firm	7%
CEO, CFO, Benefits Manager	2%
Accrediting body and organization (non-governmental)	1%
Polling organization	1%
Other	2%
Health care improvement organization	5%
Health Care Delivery	
Health insurance/managed care industry	4%
Hospital	6%
Nursing home/Long-term care facility	1%
Clinic	2%
Physician practice/Other clinical practice (patient care)	6%
Government	
Non-elected federal executive branch official	1%
Staff for non-elected federal executive branch official	1%
Non-elected state executive branch official	1%
Staff for a state elected official or state legislative committee	*
Staff for non-elected federal executive branch official (repeat)	1%
Staff for non-elected state executive branch official	--
Staff for a federal elected official or federal legislative committee	1%
Pharmaceutical industry	
Drug manufacturer	4%
Biotech company	1%
Device company	--
Retired	4%

TABLE 6
TYPE OF EMPLOYMENT

"How would you describe your current employment position?"

Base: 318 Respondents

	%
Teacher, Researcher, Professor	39%
Physician	17%
CEO/President	19%
Policy Analyst	23%
Administration/Management	15%
Consultant	11%
Department head/Dean	4%
Foundation officer	7%
Health care purchaser	4%
Policymaker or policy staff (federal)	2%
Consumer advocate	5%
Other health care provider (not physician)	2%
Lobbyist	2%
Policymaker or policy staff (state)	1%
Regulator	1%
Other	4%
Retired	4%
Investment analyst	--

TABLE 9
PERMISSION TO BE NAMED AS A SURVEY PARTICIPANT

Base: 318 Respondents

	%
Yes	85
No	15