APPENDIX TABLES

TABLE 1. EFFICACY OF HEALTH CARE REFORM PLANS AT ACHIEVING UNIVERSAL HEALTH CARE

"In your view, how effective would these two general approaches be in <u>achieving universal coverage</u>?"

Base: 221 respondents

		Total (n=221) %	Academic/ Research Inst. (n=112)	Health Care Delivery (n=56)	Business/ Insurance/ Other Health Care Industry (n=59)	Government/ Labor/ Consumer Advocacy (n=25)
	Very effective/ Effective (Net)	8	4	4	20	4
Tax incentives	Very effective	2	1	4	7	4
for individual	Effective	5	4	0	14	0
insurance market	Somewhat effective	32	31	39	36	32
	Not effective	59	63	57	42	64
	Not sure	1	1	0	2	1
	Very effective/ Effective (Net)	61	65	59	51	60
Mixed private-	Very effective	29	30	29	22	36
public group	Effective	32	35	30	29	24
insurance system	Somewhat effective	30	26	29	36	32
	Not effective	8	8	13	12	8
	Not sure	1	1	0	2	0

Note: Percentages may not add up to 100% because of rounding.

TABLE 2. SUPPORT FOR PRESIDENTIAL CANDIDATES' HEALTH CARE REFORM PROPOSALS

"To what extent do you favor or oppose the following features of the presidential candidates' healthcare reform proposals?"

·	5	Total (n=221) %	Academic/ Research Inst. (n=112)	Health Care Delivery (n=56)	Business/ Insurance/ Other Health Care Industry (n=59)	Government/ Labor/ Consumer Advocacy (n=25)
Doguiro overveno	Strongly favor/	83	85	82	78	80
Require everyone to have health	Favor (Net)					
insurance with	Strongly favor	39	40	41	32	40
premium subsidies	Favor	44	45	41	46	40
for low- and	Oppose	10	7	13	12	4
moderate- income	Strongly oppose	4	4	4	5	8
families	Not sure	3	3	2	5	4
	No response	1	1	0	0	4
Require employers to either offer	Strongly favor/ Favor (Net)	71	70	64	66	64
	Strongly favor	32	31	30	25	36
coverage or pay a percent of their	Favor	39	38	34	41	28
payroll that would	Oppose	14	12	20	24	16
help finance	Strongly oppose	7	10	5	5	8
expanded coverage	Not sure	6	7	11	5	12
Oxpanada dovorago	No response	1	2	0	0	0
Implement market	Strongly favor/ Favor (Net)	86	83	88	86	92
regulations against	Strongly favor	53	48	59	58	60
risk selection such	Favor	33	35	29	29	32
as guaranteed	Oppose	6	5	5	8	4
issue and	Strongly oppose	4	4	2	3	0
community rating	Not sure	3	4	4	0	0
	No response	2	3	2	2	4
Set a minimum	Strongly favor/ Favor (Net)	62	60	70	61	68
floor on the	Strongly favor	30	34	36	19	36
percentage of	Favor	32	26	34	42	32
premium revenues	Oppose	18	15	14	22	12
going for medical	Strongly oppose	7	9	2	8	8
care	Not sure	12	14	14	8	12
	No response	1	2	0	0	0
Allow individuals,	Strongly favor/ Favor (Net)	62	55	73	66	72
small businesses, and associations to buy private	Strongly favor	29	22	43	37	36
	Favor	33	33	30	29	36
	Oppose	17	22	11	14	12
insurance across	Strongly oppose	10	10	5	7	4
state lines	Not sure	10	12	11	8	12
	No response	1	1	0	0	0

		Total (n=221)	Academic/ Research Inst. (n=112)	Health Care Delivery (n=56)	Business/ Insurance/ Other Health Care Industry (n=59)	Government/ Labor/ Consumer Advocacy (n=25)
Include a public plan option like Medicare	Strongly favor/ Favor (Net)	79	81	77	80	84
in the new group	Strongly favor	45	45	36	44	56
insurance	Favor	34	37	41	36	28
"connectors" so that	Oppose	8	6	4	12	8
people can choose	Strongly oppose	4	4	9	2	0
between private	Not sure	7	7	11	7	8
and public plans	No response	1	2	0	0	0
Expand Medicaid	Strongly favor/ Favor (Net)	78	79	75	76	76
and the State	Strongly favor	46	52	41	37	48
Children's Health	Favor	33	28	34	39	28
Insurance Program to include adults at	Oppose	12	9	14	17	8
poverty level or	Strongly oppose	5	4	7	3	8
above	Not sure	3	4	4	3	8
above	No response	2	3	0	0	0
Eliminate employer benefit tax exemption	Strongly favor/ Favor (Net)	45	50	34	53	44
from personal income	Strongly favor	11	11	7	14	16
taxes and replace it	Favor	34	39	27	39	28
with a standard	Oppose	25	21	29	34	28
income tax deduction	Strongly oppose	15	19	14	7	20
or tax credit for people	Not sure	14	9	23	7	8
with private coverage.	No response	1	2	0	0	0
Administer an	Strongly favor/ Favor (Net)	52	58	48	49	64
individual mandate	Strongly favor	17	19	18	17	8
and income-related premium assistance	Favor	35	39	30	32	56
	Oppose	24	22	27	25	16
through the tax code	Strongly oppose	9	9	11	8	8
anough the tax code	Not sure	13	9	14	17	12
	No response	1	2	0	0	0

Note: Percentages may not add up to 100% because of rounding.

Source: Commonwealth Fund Health Care Opinion Leaders Survey, January 2008.

TABLE 3. DESIRED GOAL FOR HEALTH CARE REFORM

"Do you think health care reform should . . .?"

Base: 221 respondents

	Total (n=221)	Academic/ Research Inst. (n=112)	Health Care Delivery (n=56)	Business/ Insurance/ Other Health Care Industry (n=59)	Government/ Labor/ Consumer Advocacy (n=25)
Preserve private insurance markets with reduced regulation	11	10	7	14	4
Organize and regulate private markets with an insurance connector (e.g., Massachusetts)	61	63	55	61	52
Replace private markets with public insurance (e.g., Medicare)	37	44	38	24	56
Allow public insurance (i.e., Medicare) to compete with private insurance	65	65	59	73	64
Not sure	7	6	11	7	4

Note: Percentages may not add up to 100% because of rounding.

TABLE 4. SUPPORT OF FINANCING EXPANDED HEALTH CARE COVERAGE

"To what extent do you favor or oppose the following methods of financing expanded health care coverage?"

·		Total (n=221)	Academic/ Research Inst. (n=112)	Health Care Delivery (n=56)	Business/ Insurance/ Other Health Care Industry (n=59)	Government/ Labor/ Consumer Advocacy (n=25)
		%	%	%	%	%
	Strongly favor/ favor (net)	66	71	59	56	64
	Strongly favor	17	18	9	12	28
Increase in	Favor	49	53	50	44	36
general taxes	Oppose	19	14	23	31	24
	Strongly oppose	7	5	11	8	8
	Not sure	5	6	5	5	4
	No response	3	4	2	0	0
Repeal of recent	Strongly favor/ favor (net)	75	86	71	63	76
tax breaks for	Strongly favor	45	53	32	36	36
families with	Favor	30	33	39	27	40
incomes above	Oppose	12	4	16	22	12
\$200,000 or letting	Strongly oppose	8	6	7	14	8
them expire	Not sure	2	2	4	2	4
	No response	2	2	2	0	0
	Strongly favor/ favor (net)	38	41	32	29	64
Introduce new	Strongly favor	12	13	11	8	32
Introduce new national sales tax	Favor	26	28	21	20	32
or value-added tax	Oppose	33	27	34	42	28
or value-added tax	Strongly oppose	16	20	18	14	4
	Not sure	10	10	14	15	4
	No response	2	3	2	0	0
	Strongly favor/ favor (net)	88	91	82	85	96
Increase taxes on	Strongly favor	41	43	43	34	60
tobacco or other	Favor	47	48	39	51	36
products that are	Oppose	5	3	9	7	0
harmful to health	Strongly oppose	4	3	2	8	4
	Not sure	1	3	4	0	0
	No response	2	1	4	0	0
	Strongly favor/ favor (net)	35	38	36	25	44
Implement a	Strongly favor	7	7	9	7	12
revenue	Favor	28	31	27	19	32
assessment	Oppose	36	32	36	42	20
on hospitals	Strongly oppose	14	13	16	20	16
	Not sure	12	15	7	10	16
	No response	3	2	5	2	4

		Total (n=221)	Academic/ Research Inst. (n=112)	Health Care Delivery (n=56)	Business/ Insurance/ Other Health Care Industry (n=59)	Government/ Labor/ Consumer Advocacy (n=25)
	Strongly favor/ favor (net)	51	54	57	39	64
Implement a	Strongly favor	15	16	21	17	12
revenue	Favor	35	38	36	22	52
assessment	Oppose	24	20	23	36	12
on insurers	Strongly oppose	8	8	4	10	12
	Not sure	15	18	13	15	12
	No response	2	1	4	0	0
Redirect current	Strongly favor/ favor (net)	49	53	39	49	48
subsidies for care	Strongly favor	8	7	5	8	8
of patients who are	Favor	41	46	34	41	40
disproportionately	Oppose	19	16	21	17	24
uninsured or	Strongly oppose	8	9	11	7	12
low-income	Not sure	20	20	21	25	16
	No response	4	3	7	2	0

Note: Percentages may not add up to 100% because of rounding.

Source: Commonwealth Fund Health Care Opinion Leaders Survey, January 2008.

TABLE 5. DETERMINING APPROPRIATE AMOUNT FAMILIES PAY FOR PREMIUMS

"Determining how much families should pay for premiums and out of pocket expenses is a critical part of health care reform. The Massachusetts Commonwealth Health Insurance Connector Authority currently stipulates that families in Massachusetts with incomes

- Under 150% of the poverty line pay no premiums
- 150% up to 200% of the poverty line pay no more than an average of 2.4% of income in premiums
- 200% up to 300% of the poverty line pay no more than an average of 4.5% of income in premiums
- 300% up to 500% of the poverty line would pay an average of 8% of income in premiums

What do you think about the amount the guidelines require families to pay?"

Base: 221 respondents

		Total (n=221)	Academic/ Research Inst. (n=112)	Health Care Delivery (n=56)	Business/ Insurance/ Other Health Care Industry (n=59)	Government/ Labor/ Consumer Advocacy (n=25)
	It is too much	% 1	% 0	% 0	% 2	% 4
Under 150% of the poverty line pay	It is about the right amount	80	86	80	73	76
no premiums	It is not enough	6	4	5	12	8
	Not sure	13	10	14	14	12
150% up to 200%	It is too much	18	17	16	12	20
of the poverty line pay no more than an	It is about the right amount	62	69	64	63	60
average of 2.4% of	It is not enough	4	3	5	5	0
income in premiums	Not sure	16	12	14	20	20
2000/ up to 2000/	It is too much	19	15	16	19	16
200% up to 300% of the poverty line pay no more than an	It is about the right amount	54	62	63	44	64
average of 4.5% of	It is not enough	6	5	4	10	0
income in premiums	Not sure	20	16	18	27	20
moorne in premiums	No response	1	2	0	0	0
300% up to 500%	It is too much	25	23	25	27	24
of the poverty line pay an average	It is about the right amount	45	51	50	34	44
of 8% of income	It is not enough	9	8	5	12	8
in premiums	Not sure	20	18	18	27	24
in promiums	No response	1	0	2	0	0

Note: Percentages may not add up to 100% because of rounding.

TABLE 6. EFFICACY IN IMPROVING HEALTH CARE QUALITY

"Below is a list of features in the presidential candidates' health care reform proposals that aim to improve quality. How effective do you think these features would be in improving health care quality?"

		Total (n=221)	Academic/ Research Inst. (n=112)	Health Care Delivery (n=56)	Business/ Insurance/ Other Health Care Industry (n=59)	Government/ Labor/ Consumer Advocacy (n=25)
I haife was avality	Very effective/ Effective (net)	61	62	52	64	76
Uniform quality reporting and	Very effective	29	23	27	44	40
transparency of	Effective	32	38	25	20	36
information on	Somewhat effective	31	31	32	29	20
quality of provider	Not effective	7	5	14	5	4
quality of provider	Not sure	1	1	0	2	0
	No response	1	1	2	0	0
	Very effective/ Effective (net)	61	56	61	63	68
Reward providers	Very effective	25	17	23	34	44
who provide	Effective	36	39	38	29	24
higher quality	Somewhat effective	30	37	29	22	20
care	Not effective	6	4	9	12	4
	Not sure	2	3	0	3	8
	No response	1	1	2	0	0
Support	Very effective/ Effective (net)	70	70	68	75	88
increased and	Very effective	35	30	30	51	52
more effective use of information	Effective	35	40	38	24	36
	Somewhat effective	26	25	25	24	12
	Not effective	2	3	4	0	0
technology	Not sure	1	1	2	2	0
	No response	1	1	2	0	0

		Total (n=221)	Academic/ Research Inst. (n=112)	Health Care Delivery (n=56)	Business/ Insurance/ Other Health Care Industry (n=59)	Government/ Labor/ Consumer Advocacy (n=25)
Support increased use of "medical	Very effective/ Effective (net)	65	63	75	68	80
home" type	Very effective	32	29	41	34	48
models of care	Effective	33	33	34	34	32
management	Somewhat effective	27	29	18	24	16
where patients	Not effective	5	5	0	8	4
have a regular	Not sure	2	2	5	0	0
doctor knowledgeable of their medical history and easy access to care and enhanced coordination of care	No response	1	1	2	0	0
	Very effective/ Effective (net)	26	25	25	29	36
Hold hospitals	Very effective	7	8	11	2	16
accountable for	Effective	19	17	14	27	20
ethnic and racial	Somewhat effective	39	39	36	41	36
disparities in care	Not effective	28	29	30	29	20
	Not sure	7	6	7	2	8
	No response	1	1	2	0	0
	Very effective/ Effective (net)	44	41	38	51	64
A "consumer	Very effective	15	12	9	22	36
report" of quality of care by	Effective	29	29	29	29	28
	Somewhat effective	42	43	39	36	28
providers	Not effective	12	13	20	12	8
	Not sure	1	2	2	2	0
	No response	1	2	2	0	0

Note: Percentages may not add up to 100% because of rounding.

TABLE 7. PRIORITIES IN HEALTH CARE PROVISIONS

"Most candidates' plans also include provisions that would improve quality, efficiency, and cost control as well as increase coverage. In your view, which of the following provisions should the next president focus on?"

Base: 221 respondents

	Total (n=221) %	Academic/ Research Inst. (n=112)	Health Care Delivery (n=56)	Business/ Insurance/ Other Health Care Industry (n=59)	Government/ Labor/ Consumer Advocacy (n=25)
Pursue universal coverage at the same time that he/she develops policies to improve quality, efficiency, and cost control.	70	73	75	56	72
Pursue universal coverage first and then address quality, efficiency, and cost control.	14	13	13	19	16
Address quality, efficiency, and cost control and then work on achieving universal coverage.	12	11	4	20	8
Not sure	3	4	5	3	0
No response	1	0	4	2	4

Note: Percentages may not add up to 100% because of rounding.

TABLE 8. EFFICACY OF HEALTH CARE REFORM PLANS AT CONTROLLING HEALTH CARE COSTS

"How effective would these two general approaches be in controlling health care costs?"

Base: 221 respondents

		Total (n=221)	Academic/ Research Inst. (n=112)	Health Care Delivery (n=56)	Business/ Insurance/ Other Health Care Industry (n=59)	Government/ Labor/ Consumer Advocacy (n=25)
	Very effective/ Effective (Net)	7	4	9	14	8
Tour in continue	Very effective	3	1	4	3	8
Tax incentives	Effective	5	3	5	10	0
for individual insurance market	Somewhat effective	26	27	27	24	24
insurance market	Not effective	64	68	61	61	68
	Not sure	3	2	2	2	0
	No response	0	0	2	0	0
	Very effective/ Effective (Net)	14	13	20	5	20
Mixed private-	Very effective	2	4	2	0	0
public group	Effective	12	10	18	5	20
insurance	Somewhat effective	41	40	34	47	48
system	Not effective	41	43	43	44	32
	Not sure	4	4	2	3	0
	No response	0	0	2	0	0

Note: Percentages may not add up to 100% because of rounding.

TABLE 9. EFFICACY IN REDUCING GROWTH OF HEALTH CARE COSTS

"Below is a list of features in the presidential candidates' health care reform proposals that aim to control health care costs. How effective do you think each of these features would be in reducing the growth in health care costs?"

base. 221 responde				<u> </u>	D	1
		Total	Academic/ Research Inst.	Health Care Delivery	Business/ Insurance/ Other Health Care Industry	Government/ Labor/ Consumer Advocacy
		(n=221)	(n=112)	(n=56)	(n=59)	(n=25)
		%	%	%	<u> </u>	%
Office Marillanes and	Very effective/ Effective (net)	45	46	52	46	48
Offer Medicare or	Very effective	13	13	14	12	12
other public plan option in the new	Effective	33	33	38	34	36
group insurance	Somewhat effective	24	25	21	25	28
"connectors"	Not effective	20	20	16	22	16
Cominectors	Not sure	10	9	9	7	8
	No response	1	0	2	0	0
Allow individuals, small businesses,	Very effective/ Effective (net)	29	22	43	37	20
and associations	Very effective	9	7	9	17	0
to buy private	Effective	20	15	34	20	20
insurance across	Somewhat effective	28	29	27	25	40
state lines	Not effective	33	38	21	32	32
State III ics	Not sure	10	12	9	5	8
	Very effective/ Effective (net)	29	23	36	42	36
Engourage	Very effective	11	9	7	20	12
Encourage greater consumer	Effective	19	14	29	22	24
cost-sharing	Somewhat effective	39	44	38	32	32
cost-snanng	Not effective	28	30	25	22	28
	Not sure	2	2	2	3	4
	No response	1	1	0	0	0
Support benefit design incentives	Very effective/ Effective (net)	62	59	75	64	64
that encourage	Very effective	33	28	45	37	40
use of preventive	Effective	29	31	30	27	24
services and	Somewhat effective	29	34	18	25	28
chronic condition	Not effective	7	6	4	8	8
management	Not sure	1	1	4	2	0
Courset the	Very effective/ Effective (net)	65	63	64	73	64
Correct the	Very effective	36	33	46	39	32
imbalance between primary	Effective	29	29	18	34	32
	Somewhat effective	23	25	21	15	28
and specialty care	Not effective	9	10	7	12	4
Cale	Not sure	3	3	7	0	0
	No response	1	0	0	0	4

		Total (n=221)	Academic/ Research Inst. (n=112)	Health Care Delivery (n=56)	Business/ Insurance/ Other Health Care Industry (n=59)	Government/ Labor/ Consumer Advocacy (n=25)
Allow Medicare to negotiate prescription drug prices	Very effective/ Effective (net)	65	71	68	61	68
	Very effective	33	37	39	27	32
	Effective	32	35	29	34	36
	Somewhat effective	24	21	23	27	24
	Not effective	8	6	5	10	4
	Not sure	3	2	4	2	4
Reform the malpractice system	Very effective/ Effective (net)	30	25	50	34	20
	Very effective	15	12	25	19	8
	Effective	15	13	25	15	12
	Somewhat effective	38	38	38	41	56
	Not effective	28	34	11	24	20
	Not sure	3	4	2	2	4
Establish a private-public institute on comparative	Very effective/ Effective (net)	47	42	46	56	64
	Very effective	19	15	16	22	32
	Effective	29	27	30	34	32
effectiveness to	Somewhat effective	37	41	34	29	16
produce and	Not effective	13	14	16	10	12
disseminate information on effectiveness and best practices	Not sure	3	3	4	5	8
Legalize the	Very effective/ Effective (net)	30	33	36	31	40
importation of	Very effective	11	13	20	14	8
brand name	Effective	19	20	16	17	32
prescription drugs	Somewhat effective	42	38	45	39	44
from Canada or	Not effective	24	25	16	29	16
other countries	Not sure	3	3	4	2	0
	No response	1	1	0	0	0

Note: Percentages may not add up to 100% because of rounding.

Source: Commonwealth Fund Health Care Opinion Leaders Survey, January 2008.