

**APPENDIX B. SURVEY TABLES**

**TABLE 1  
PERCEIVED MAGNITUDE OF CHANGES NEEDED  
TO SIGNIFICANTLY IMPROVE CARE DELIVERY**

“Overall, what is the magnitude of changes in the delivery system (the way providers are organized and care is delivered) that you believe is necessary to achieve significant gains in the quality and efficiency of care in the United States?”

Base: 211 Respondents

	<b>Total (n=211)</b>	<b>Academic/ Research Inst. (n=101)</b>	<b>Health Care Delivery (n=53)</b>	<b>Business/ Insurance/ Other Health Care Industry (n=51)</b>	<b>Government/ Labor/ Consumer Advocacy (n=26)</b>
	<b>%</b>	<b>%</b>	<b>%</b>	<b>%</b>	<b>%</b>
A fundamental change is required in the way most of the U.S. delivery system is organized	89	89	87	84	92
Only modest changes are needed—most of the U.S. delivery system operates well.	8	9	11	10	8
No changes are needed.	0	0	0	0	0
Not sure	3	2	0	6	0

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

**TABLE 2**  
**IMPORTANCE OF POLICY STRATEGIES FOR**  
**IMPROVING HEALTH SYSTEM PERFORMANCE**

“How important do you think each of these are in improving health system performance?”

Base: 211 Respondents

		Total (n=211)	Academic/ Research Inst. (n=101)	Health Care Delivery (n=53)	Business/ Insurance/ Other Health Care Industry (n=51)	Government/ Labor/ Consumer Advocacy (n=26)
		%	%	%	%	%
Strengthening the primary care system	<b>Very important/ Important (Net)</b>	<b>90</b>	<b>90</b>	<b>94</b>	<b>84</b>	<b>92</b>
	Very important	72	70	83	65	77
	Important	18	20	11	20	15
	Somewhat important	5	5	6	8	0
	Not important	3	3	0	8	0
	Not sure	2	2	0	0	8
Encouraging care coordination, and the management of care transitions	<b>Very important/ Important (Net)</b>	<b>91</b>	<b>89</b>	<b>94</b>	<b>90</b>	<b>88</b>
	Very important	68	67	70	73	54
	Important	22	22	25	18	35
	Somewhat important	6	7	6	4	0
	Not important	3	3	0	4	4
	Not sure	*	0	0	0	4
Encouraging the integration/ organization of providers, both within and across care settings	<b>Very important/ Important (Net)</b>	<b>82</b>	<b>80</b>	<b>87</b>	<b>82</b>	<b>85</b>
	Very important	48	51	45	39	54
	Important	34	29	42	43	31
	Somewhat important	12	15	9	8	4
	Not important	2	3	2	4	4
	Not sure	3	2	2	4	8
Promoting health information exchange networks/regional health information organizations	<b>Very important/ Important (Net)</b>	<b>66</b>	<b>66</b>	<b>64</b>	<b>63</b>	<b>62</b>
	Very important	32	31	21	33	38
	Important	35	36	43	29	23
	Somewhat important	22	24	21	25	23
	Not important	7	5	13	10	4
	Not sure	5	5	2	2	12
Promoting care management of high-cost/complex patients	<b>Very important/ Important (Net)</b>	<b>88</b>	<b>85</b>	<b>91</b>	<b>90</b>	<b>92</b>
	Very important	62	59	72	65	58
	Important	26	26	19	25	35
	Somewhat important	9	12	8	4	4
	Not important	2	1	2	6	4
	Not sure	1	2	0	0	0

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

**TABLE 3**  
**IMPORTANCE OF POLICY STRATEGIES FOR**  
**FACILITATING DELIVERY SYSTEM REFORM**

“How important do you think each of the following are in facilitating delivery system reform?”

Base: 211 Respondents

		Total (n=211)	Academic/ Research Inst. (n=101)	Health Care Delivery (n=53)	Business/ Insurance/ Other Health Care Industry (n=51)	Government/ Labor/ Consumer Advocacy (n=26)
		%	%	%	%	%
Payment reform (i.e., moving away from fee-for-service payment)	<b>Very important/ Important (Net)</b>	<b>79</b>	<b>81</b>	<b>66</b>	<b>82</b>	<b>96</b>
	Very important	59	57	53	63	62
	Important	20	24	13	20	35
	Somewhat important	9	9	19	6	0
	Not important	7	7	9	6	4
	Not sure	4	3	4	6	0
Government regulatory changes	<b>Very important/ Important (Net)</b>	<b>79</b>	<b>72</b>	<b>75</b>	<b>80</b>	<b>92</b>
	Very important	46	41	47	41	54
	Important	33	32	28	39	38
	Somewhat important	13	18	13	10	4
	Not important	2	2	0	8	0
	Not sure	4	6	8	2	0
Voluntary accreditation/ certification	<b>Very important/ Important (Net)</b>	<b>30</b>	<b>29</b>	<b>34</b>	<b>31</b>	<b>35</b>
	Very important	6	4	8	10	8
	Important	24	25	26	22	27
	Somewhat important	47	45	51	41	46
	Not important	18	20	9	25	12
	Not sure	5	7	4	2	8
Consumer engagement/ empowerment	<b>Very important/ Important (Net)</b>	<b>69</b>	<b>64</b>	<b>75</b>	<b>75</b>	<b>77</b>
	Very important	27	23	26	31	38
	Important	41	42	49	43	38
	Somewhat important	27	32	19	22	23
	Not important	3	3	2	4	0
	Not sure	1	1	2	0	0
Increased provider competition on quality/efficiency	<b>Very important/ Important (Net)</b>	<b>61</b>	<b>52</b>	<b>55</b>	<b>75</b>	<b>46</b>
	Very important	27	17	17	37	35
	Important	34	36	38	37	12
	Somewhat important	30	34	38	20	42
	Not important	7	11	6	6	8
	Not sure	2	3	0	0	4
Private and public payer collaboration	<b>Very important/ Important (Net)</b>	<b>76</b>	<b>69</b>	<b>75</b>	<b>80</b>	<b>85</b>
	Very important	41	34	34	45	46
	Important	35	36	42	35	38
	Somewhat important	18	27	17	14	0
	Not important	1	1	4	0	0
	Not sure	4	3	2	6	15

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

**TABLE 4**  
**IMPORTANCE OF PAYMENT REFORM STRATEGIES**  
**FOR FACILITATING DELIVERY SYSTEM REFORM**

“Below are some specific payment reform strategies that have been suggested to facilitate delivery system reform. Please indicate your level of support for each one.”

Base: 211 Respondents

		Total (n=211) %	Academic/ Research Inst. (n=101) %	Health Care Delivery (n=53) %	Business/ Insurance/ Other Health Care Industry (n=51) %	Government/ Labor/ Consumer Advocacy (n=26) %
Expansion of pay-for-performance programs	<b>Strongly support/ Support (Net)</b>	<b>55</b>	<b>49</b>	<b>49</b>	<b>65</b>	<b>62</b>
	Strongly support	20	17	15	35	27
	Support	34	32	34	29	35
	Somewhat support	31	38	34	25	12
	Do not support	11	9	17	8	23
	Not sure	3	4	0	2	4
Providing supplemental payments to primary care (on top of fee-for-service) for delivering comprehensive, coordinated, and accessible care	<b>Strongly support/ Support (Net)</b>	<b>84</b>	<b>84</b>	<b>91</b>	<b>76</b>	<b>85</b>
	Strongly support	51	49	62	51	42
	Support	33	36	28	25	42
	Somewhat support	9	10	4	12	8
	Do not support	4	4	4	8	4
	Not sure	3	2	2	2	4
Episode-based payments for acute hospitalizations	<b>Strongly support/ Support (Net)</b>	<b>64</b>	<b>65</b>	<b>51</b>	<b>75</b>	<b>58</b>
	Strongly support	27	25	25	43	19
	Support	36	41	26	31	38
	Somewhat support	18	17	23	16	15
	Do not support	7	6	13	2	8
	Not sure	11	12	13	6	19
Capitation or other special payment arrangements for organized delivery systems	<b>Strongly support/ Support (Net)</b>	<b>67</b>	<b>71</b>	<b>47</b>	<b>75</b>	<b>69</b>
	Strongly support	35	40	25	39	27
	Support	32	32	23	35	42
	Somewhat support	21	19	32	16	19
	Do not support	9	6	17	10	8
	Not sure	4	4	4	0	4
Incentives for avoiding unnecessary hospitalizations and rehospitalizations	<b>Strongly support/ Support (Net)</b>	<b>84</b>	<b>83</b>	<b>79</b>	<b>90</b>	<b>88</b>
	Strongly support	39	37	25	47	54
	Support	45	47	55	43	35
	Somewhat support	11	15	11	6	4
	Do not support	3	1	8	2	8
	Not sure	1	1	2	2	0

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

**TABLE 5**  
**AGREEMENT WITH STATEMENTS REGARDING ORGANIZED DELIVERY SYSTEMS**

“For the purpose of answering the next set of questions, an organized delivery system is one which provides enhanced access to care, care coordination, participates in health information exchange, and has hospitals, physician practices, and other providers working together to improve quality and efficiency. Please indicate whether or not you agree with the following statements about organized delivery systems.”

Base: 211 Respondents

		Total (n=211) %	Academic/ Research Inst. (n=101) %	Health Care Delivery (n=53) %	Business/ Insurance/ Other Health Care Industry (n=51) %	Government/ Labor/ Consumer Advocacy (n=26) %
Organized delivery systems are more likely to deliver high quality care than non-organized systems.	<b>Strongly agree/ Agree (Net)</b>	<b>76</b>	<b>74</b>	<b>77</b>	<b>71</b>	<b>85</b>
	Strongly agree	44	46	47	35	62
	Agree	32	29	30	35	23
	Somewhat agree	17	18	13	22	8
	Do not agree	4	6	6	4	8
	Not sure	3	2	4	4	0
Organized delivery systems are more likely to deliver efficient care than non-organized systems.	<b>Strongly agree/ Agree (Net)</b>	<b>74</b>	<b>71</b>	<b>81</b>	<b>69</b>	<b>81</b>
	Strongly agree	45	47	43	33	65
	Agree	29	25	38	35	15
	Somewhat agree	18	22	8	22	8
	Do not agree	3	2	4	6	8
	Not sure	5	5	8	4	4
Organized delivery systems are more likely to deliver patient-centered care than non-organized systems	<b>Strongly agree/ Agree (Net)</b>	<b>57</b>	<b>54</b>	<b>53</b>	<b>53</b>	<b>62</b>
	Strongly agree	28	28	26	24	35
	Agree	29	27	26	29	27
	Somewhat agree	23	27	26	24	19
	Do not agree	11	10	11	18	15
	Not sure	9	9	9	6	4

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

**TABLE 6**  
**PERCEIVED LIKELIHOOD OF ACHIEVING POTENTIAL**  
**ORGANIZED DELIVERY SYSTEM BENEFITS USING VARIOUS SCHEMES**

“How likely do you think it is that the results of an organized delivery system can be achieved with the following?”

Base: 211 Respondents

		Total (n=211)	Academic/ Research Inst. (n=101)	Health Care Delivery (n=53)	Business/ Insurance/ Other Health Care Industry (n=51)	Government/ Labor/ Consumer Advocacy (n=26)
		%	%	%	%	%
Integrated delivery systems (e.g., Kaiser Permanente) or large multi-specialty group practices	<b>Very likely/ Likely (Net)</b>	<b>88</b>	<b>90</b>	<b>81</b>	<b>86</b>	<b>92</b>
	Very likely	52	53	49	49	50
	Likely	36	37	32	37	42
	Somewhat likely	6	8	4	6	0
	Not likely	5	2	9	8	8
	Not sure	0	0	2	0	0
Independent Practice Associations (IPAs) or similar private entities providing infrastructure support (information technology, quality improvement, care coordination networks, etc.) for independent providers	<b>Very likely/ Likely (Net)</b>	<b>27</b>	<b>23</b>	<b>28</b>	<b>29</b>	<b>46</b>
	Very likely	4	2	4	6	8
	Likely	23	21	25	24	38
	Somewhat likely	43	45	53	35	27
	Not likely	26	27	15	35	27
	Not sure	3	5	2	0	0
Public entities providing infrastructure support (information technology, quality improvement, care coordination networks, etc.) for independent providers	<b>Very likely/ Likely (Net)</b>	<b>34</b>	<b>36</b>	<b>40</b>	<b>25</b>	<b>50</b>
	Very likely	9	14	8	10	15
	Likely	25	22	32	16	35
	Somewhat likely	38	38	32	43	35
	Not likely	24	21	25	31	15
	Not sure	4	6	2	0	0
Providers that are only connected "virtually" through health information exchange networks or payment incentives	<b>Very likely/ Likely (Net)</b>	<b>23</b>	<b>16</b>	<b>26</b>	<b>25</b>	<b>31</b>
	Very likely	4	0	8	8	8
	Likely	19	16	19	18	23
	Somewhat likely	45	48	49	43	38
	Not likely	28	33	23	31	27
	Not sure	2	3	0	0	4

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

**TABLE 7**  
**SUPPORT FOR INTERVENTIONS TO STIMULATE GREATER PARTICIPATION**  
**IN ORGANIZED DELIVERY SYSTEMS**

“Below are some interventions to stimulate greater participation in organized delivery systems (including informal, or “virtual” systems). Please indicate your level of support for each.”

Base: 211 Respondents

		Total (n=211) %	Academic/ Research Inst. (n=101) %	Health Care Delivery (n=53) %	Business/ Insurance/ Other Health Care Industry (n=51) %	Government/ Labor/ Consumer Advocacy (n=26) %
Providers should be given financial incentives to practice in an organized delivery system.	<b>Strongly support/ Support (Net)</b>	<b>60</b>	<b>54</b>	<b>55</b>	<b>61</b>	<b>73</b>
	Strongly support	25	22	25	29	35
	Support	35	33	30	31	38
	Somewhat support	20	20	30	20	15
	Do not support	14	17	13	16	12
	Not sure	5	8	0	4	0
Patients should be given financial incentives to join an organized delivery system.	<b>Strongly support/ Support (Net)</b>	<b>48</b>	<b>47</b>	<b>49</b>	<b>47</b>	<b>58</b>
	Strongly support	19	16	28	18	8
	Support	29	31	21	29	50
	Somewhat support	24	27	26	27	12
	Do not support	21	21	19	24	23
	Not sure	5	5	2	2	8
Organized delivery systems should have access to special payment arrangements (e.g., capitation, episode-based payment, etc.).	<b>Strongly support/ Support (Net)</b>	<b>70</b>	<b>68</b>	<b>64</b>	<b>75</b>	<b>58</b>
	Strongly support	34	37	30	29	19
	Support	36	32	34	45	38
	Somewhat support	16	15	23	16	15
	Do not support	9	11	11	8	12
	Not sure	5	5	0	2	15
The government should provide infrastructure support in areas where formal organized delivery systems don't naturally develop.	<b>Strongly support/ Support (Net)</b>	<b>63</b>	<b>58</b>	<b>66</b>	<b>53</b>	<b>85</b>
	Strongly support	25	24	28	24	15
	Support	38	35	38	29	69
	Somewhat support	24	24	28	35	12
	Do not support	8	9	4	12	0
	Not sure	4	8	0	0	4

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

**TABLE 8**  
**PRIORITIZATION OF AREAS OF ORGANIZED DELIVERY SYSTEMS**  
**NEEDING GOVERNMENT SUPPORT**

“You mentioned that you believe that the government should help provide infrastructure support in areas where formal organized delivery systems don’t naturally develop. How much of a priority should each of these “utilities” be?”

Base: 183 Respondents

		Total (n=183) %	Academic/ Research Inst. (n=83) %	Health Care Delivery (n=50) %	Business/ Insurance/ Other Health Care Industry (n=45) %	Government/ Labor/ Consumer Advocacy (n=25) %
Information technology services	<b>Very high/High priority (Net)</b>	<b>80</b>	<b>73</b>	<b>76</b>	<b>87</b>	<b>92</b>
	Very high priority	41	36	40	44	44
	High priority	39	37	36	42	48
	Medium priority	15	23	12	11	8
	Low priority	2	0	6	2	0
	Very low priority	1	0	2	0	0
	Not sure	1	1	0	0	0
	Do not support gov’t support	1	2	2	0	0
Quality improvement services	<b>Very high/High priority (Net)</b>	<b>62</b>	<b>61</b>	<b>54</b>	<b>56</b>	<b>76</b>
	Very high priority	25	30	16	27	32
	High priority	37	31	38	29	44
	Medium priority	27	31	30	27	20
	Low priority	5	4	8	7	0
	Very low priority	2	1	4	4	4
	Not sure	2	2	0	0	0
	Do not support gov’t support	3	0	4	7	0
Care coordination and/or care management services	<b>Very high/High priority (Net)</b>	<b>69</b>	<b>69</b>	<b>72</b>	<b>64</b>	<b>64</b>
	Very high priority	29	34	32	18	32
	High priority	40	35	40	47	32
	Medium priority	18	22	16	13	20
	Low priority	5	5	6	7	8
	Very low priority	2	2	2	2	8
	Not sure	1	1	0	4	0
	Do not support gov’t support	4	1	4	9	0
24/7 access services	<b>Very high/High priority (Net)</b>	<b>57</b>	<b>60</b>	<b>52</b>	<b>51</b>	<b>64</b>
	Very high priority	25	33	18	22	20
	High priority	32	28	34	29	44
	Medium priority	26	23	34	20	20
	Low priority	9	11	8	11	8
	Very low priority	3	4	4	2	4
	Not sure	3	2	0	7	4
	Do not support gov’t support	3	0	2	7	0

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



**TABLE 9**  
**AGREEMENT WITH STATEMENTS REGARDING MEDICAL HOMES**

“For the purpose of answering the next set of questions, we will define medical homes as patient-centered primary care practices that are designed to offer accessible, continuous, and coordinated care. Optimally, they utilize multi-disciplinary teams and health information technology, and actively try to engage their patients in care management and shared decision-making.

Recently, many public and private payers have decided to support medical home demonstration projects. Please indicate whether or not you agree with the following statements about medical homes.”

Base: 211 Respondents

		Total (n=211)	Academic/ Research Inst. (n=101)	Health Care Delivery (n=53)	Business/ Insurance/ Other Health Care Industry (n=51)	Government/ Labor/ Consumer Advocacy (n=26)
		%	%	%	%	%
A health system that emphasizes medical homes is more likely to deliver high quality care than a system that doesn't.	<b>Strongly agree/ Agree (Net)</b>	<b>67</b>	<b>61</b>	<b>75</b>	<b>73</b>	<b>62</b>
	Strongly agree	37	36	45	39	35
	Agree	29	26	30	33	27
	Somewhat agree	22	27	11	18	23
	Do not agree	2	3	2	4	4
	Not sure	9	9	9	6	12
A health system that emphasizes medical homes is more likely to deliver efficient care than a system that doesn't	<b>Strongly agree/ Agree (Net)</b>	<b>60</b>	<b>54</b>	<b>74</b>	<b>65</b>	<b>62</b>
	Strongly agree	28	27	38	27	31
	Agree	32	28	36	37	31
	Somewhat agree	22	23	11	20	15
	Do not agree	7	11	6	8	8
	Not sure	10	12	8	6	15
A health system that emphasizes medical homes is more likely to deliver patient-centered care than a system that doesn't	<b>Strongly agree/ Agree (Net)</b>	<b>72</b>	<b>69</b>	<b>72</b>	<b>73</b>	<b>65</b>
	Strongly agree	37	34	45	37	42
	Agree	35	36	26	35	23
	Somewhat agree	18	19	15	16	19
	Do not agree	3	4	2	4	4
	Not sure	7	8	8	8	12
Overall, the U.S. healthcare delivery system should be based on a medical home system of care.	<b>Strongly agree/ Agree (Net)</b>	<b>55</b>	<b>49</b>	<b>68</b>	<b>59</b>	<b>46</b>
	Strongly agree	33	35	45	29	31
	Agree	21	14	23	29	15
	Somewhat agree	21	25	15	14	19
	Do not agree	10	12	4	16	15
	Not sure	14	15	11	12	19

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

**TABLE 10**  
**SUPPORT FOR VARIOUS PAYMENT MODELS TO SUPPORT THE MEDICAL HOME**

“Many functions of the medical home model of care are not currently reimbursed under the current payment system. Several payment models have been proposed to support the medical home. Please indicate your level of support for each one.”

Base: 211 Respondents

		<b>Total</b> (n=211)	<b>Academic/ Research Inst.</b> (n=101)	<b>Health Care Delivery</b> (n=53)	<b>Business/ Insurance/ Other Health Care Industry</b> (n=51)	<b>Government/ Labor/ Consumer Advocacy</b> (n=26)
		%	%	%	%	%
For certified medical homes, supplement fee-for-service payment with a prospective per-member/per-month capitated fee (e.g., often referred to as a “care management” fee)	<b>Strongly support/ Support (Net)</b>	<b>71</b>	<b>71</b>	<b>68</b>	<b>71</b>	<b>62</b>
	Strongly support	32	32	43	29	19
	Support	39	40	25	41	42
	Somewhat support	17	17	21	16	27
	Do not support	5	6	2	8	4
	Not sure	5	4	6	6	4
For certified medical homes, offer the option to replace fee-for-service payment with a comprehensive per-member/per-month capitated fee for all primary care services	<b>Strongly support/ Support (Net)</b>	<b>64</b>	<b>66</b>	<b>49</b>	<b>65</b>	<b>69</b>
	Strongly support	31	32	23	41	23
	Support	32	35	26	24	46
	Somewhat support	19	17	25	16	15
	Do not support	9	7	15	12	12
	Not sure	7	8	8	8	0
Award primary care practices an annual bonus payment based on medical home certification	<b>Strongly support/ Support (Net)</b>	<b>47</b>	<b>46</b>	<b>51</b>	<b>53</b>	<b>46</b>
	Strongly support	15	16	23	10	8
	Support	32	30	28	43	38
	Somewhat support	23	25	23	18	27
	Do not support	17	20	9	22	8
	Not sure	10	8	11	8	15
Create additional fee-for-service procedure codes for medical home functions such as care coordination, care management, etc.	<b>Strongly support/ Support (Net)</b>	<b>49</b>	<b>49</b>	<b>49</b>	<b>47</b>	<b>50</b>
	Strongly support	18	12	23	18	19
	Support	31	37	26	29	31
	Somewhat support	25	27	30	20	31
	Do not support	18	18	9	29	8
	Not sure	6	5	8	4	8

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

**TABLE 11**  
**SUPPORT FOR MECHANISMS OF ENCOURAGING PATIENTS**  
**TO REGISTER WITH MEDICAL HOMES**

“Please indicate your level of support for the following mechanisms of encouraging patients to register with medical homes.”

Base: 211 Respondents

		<b>Total</b> (n=211)	<b>Academic/ Research Inst.</b> (n=101)	<b>Health Care Delivery</b> (n=53)	<b>Business/ Insurance/ Other Health Care Industry</b> (n=51)	<b>Government/ Labor/ Consumer Advocacy</b> (n=26)
		%	%	%	%	%
All patients should be required to register with a medical home.	<b>Strongly support/ Support (Net)</b>	<b>22</b>	<b>17</b>	<b>21</b>	<b>31</b>	<b>27</b>
	Strongly support	6	4	8	8	4
	Support	16	13	13	24	23
	Somewhat support	20	23	30	10	23
	Do not support	49	53	36	53	46
	Not sure	7	5	11	6	4
Patients with chronic illness should be required to register with a medical home.	<b>Strongly support/ Support (Net)</b>	<b>35</b>	<b>30</b>	<b>49</b>	<b>35</b>	<b>23</b>
	Strongly support	15	9	25	16	15
	Support	20	21	25	20	8
	Somewhat support	22	25	15	22	42
	Do not support	35	41	23	37	31
	Not sure	6	4	11	6	0
All patients should be given a financial incentive (e.g., reduced premiums or co-pays) to register with a medical home.	<b>Strongly support/ Support (Net)</b>	<b>51</b>	<b>47</b>	<b>53</b>	<b>55</b>	<b>54</b>
	Strongly support	21	22	19	14	27
	Support	30	25	34	41	27
	Somewhat support	22	28	23	16	23
	Do not support	20	18	15	25	19
	Not sure	7	8	8	4	4
Patients with chronic illness should be given a financial incentive (e.g., reduced premiums or co-pays) to register with a medical home.	<b>Strongly support/ Support (Net)</b>	<b>67</b>	<b>62</b>	<b>74</b>	<b>71</b>	<b>62</b>
	Strongly support	32	30	38	27	38
	Support	35	33	36	43	23
	Somewhat support	17	23	11	16	23
	Do not support	9	8	8	10	12
	Not sure	5	6	6	4	4

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

**TABLE 12  
PERCEPTIONS TOWARDS GROWTH OF RETAIL CLINICS**

“Retail clinics, or convenient care clinics, are year-round clinics located within a larger retail operation, and typically offer basic medical services such as diagnosis and treatment for strep throat and urinary tract infections, as well as preventive services such as routine physicals and vaccinations. Overall, do you think the rapid growth of retail clinics over the past 2 years is a positive or negative development for health care in the United States?”

Base: 211 Respondents

	Total (n=211)	Academic/ Research Inst. (n=101)	Health Care Delivery (n=53)	Business/ Insurance/ Other Health Care Industry (n=51)	Government/ Labor/ Consumer Advocacy (n=26)
	%	%	%	%	%
<b>Very Positive/Positive (Net)</b>	<b>54</b>	<b>57</b>	<b>36</b>	<b>65</b>	<b>46</b>
Very positive	16	15	6	25	8
Somewhat positive	38	43	30	39	38
Neither negative nor positive	19	17	32	18	23
Somewhat negative	16	18	15	14	19
Very negative	6	6	13	2	4
Not sure	4	2	2	2	8

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

**TABLE 13  
SUPPORT OF REGULATORY CHANGES TO ENCOURAGE  
GROWTH OF RETAIL CLINICS**

“To what degree do you support regulatory changes that would encourage the growth of retail health clinics?”

Base: 211 Respondents

	Total (n=211)	Academic/ Research Inst. (n=101)	Health Care Delivery (n=53)	Business/ Insurance/ Other Health Care Industry (n=51)	Government/ Labor/ Consumer Advocacy (n=26)
	%	%	%	%	%
<b>Strongly support/ Support (Net)</b>	<b>31</b>	<b>35</b>	<b>21</b>	<b>45</b>	<b>23</b>
Strongly support	10	12	9	12	8
Support	20	23	11	33	15
Somewhat support	15	14	13	12	27
Do not support	42	40	57	39	31
Not sure	11	12	8	4	19

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

**TABLE 14**  
**AGREEMENT WITH STATEMENTS REGARDING RETAIL CLINICS**

“Below are some beliefs about retail clinics. Please rate your level of agreement with each of the following statements.”

Base: 211 Respondents

		Total (n=211) %	Academic/ Research Inst. (n=101) %	Health Care Delivery (n=53) %	Business/ Insurance/ Other Health Care Industry (n=51) %	Government/ Labor/ Consumer Advocacy (n=26) %
Retail clinics are more convenient for the patient than traditional care settings	<b>Strongly agree/ Agree (Net)</b>	<b>75</b>	<b>73</b>	<b>62</b>	<b>84</b>	<b>69</b>
	Strongly agree	46	43	28	53	50
	Agree	29	31	34	31	19
	Somewhat agree	18	20	25	12	31
	Do not agree	3	3	8	0	0
	Not sure	2	3	4	4	0
Retail clinics provide services at lower cost than traditional care settings	<b>Strongly agree/ Agree (Net)</b>	<b>50</b>	<b>54</b>	<b>34</b>	<b>49</b>	<b>46</b>
	Strongly agree	15	15	11	14	19
	Agree	35	40	23	35	27
	Somewhat agree	20	13	30	24	35
	Do not agree	10	10	19	8	8
	Not sure	18	22	13	20	12
Retail clinics provide inferior quality of care than traditional care settings	<b>Strongly agree/ Agree (Net)</b>	<b>10</b>	<b>12</b>	<b>15</b>	<b>0</b>	<b>15</b>
	Strongly agree	2	3	2	0	4
	Agree	9	9	13	0	12
	Somewhat agree	15	12	21	22	19
	Do not agree	45	46	26	55	42
	Not sure	29	30	36	24	23
Retail clinics further fragment care delivery in the United States.	<b>Strongly agree/ Agree (Net)</b>	<b>49</b>	<b>48</b>	<b>62</b>	<b>47</b>	<b>54</b>
	Strongly agree	23	26	34	16	27
	Agree	26	22	28	31	27
	Somewhat agree	27	27	21	29	31
	Do not agree	16	15	15	18	15
	Not sure	7	10	0	6	0

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

**TABLE 15**  
**SUPPORT OF REQUIREMENT FOR RETAIL CLINICS**  
**TO COORDINATE SERVICES WITH TRADITIONAL DELIVERY SYSTEM**

“Do you support a requirement for retail clinics to coordinate their services (with patient permission) with the traditional health care delivery system (i.e., inform the patient’s primary care physician of the specific diagnoses made and the procedures, medications, and other treatments delivered)?”

Base: 211 Respondents

	<b>Total</b> (n=211)	<b>Academic/ Research Inst.</b> (n=101)	<b>Health Care Delivery</b> (n=53)	<b>Business/ Insurance/ Other Health Care Industry</b> (n=51)	<b>Government/ Labor/ Consumer Advocacy</b> (n=26)
	<b>%</b>	<b>%</b>	<b>%</b>	<b>%</b>	<b>%</b>
<b>Strongly support/ Support (Net)</b>	<b>68</b>	<b>66</b>	<b>72</b>	<b>73</b>	<b>69</b>
Strongly support	41	38	58	41	35
Support	27	29	13	31	35
Somewhat support	19	21	17	16	23
Do not support	9	8	8	12	4
Not sure	3	4	2	0	4

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