

HEALTH SUMMIT

THE FACE OF HEALTH CARE TOMORROW

Putting a Local Face on a National Issue

2009 Public Opinion Survey on Health Care Reform

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Executive Summary

*Sponsored by Blue Cross and Blue Shield of Kansas City
and the Greater Kansas City Chamber of Commerce*

Survey conducted by VVV Research & Development, INC

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BlueCross BlueShield
of Kansas City

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THE CHAMBER

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Overview/Purpose:

On June 1, 2009, VVV Research & Development, INC was commissioned by Blue Cross and Blue Shield of Kansas City (Blue KC) and the Greater Kansas City Chamber of Commerce to conduct a comprehensive community opinion survey regarding national health care reform. This research will serve as the “opinion source” to uncover viewpoints of local area physicians, hospital CEOs, brokers, Kansas City employers (large and small businesses) and the general public (who reside in the six county KC metro MSA). Specific topic areas explored included: general understanding of reform, acceptance of reform plans, insurance mandates, financing options/taxes, personal accountability and methods to control health care costs.

Participants:

The study was conducted in two phases: Qualitative (one-on-one interviews and focus groups) and Quantitative (online/written) surveys. Ninety (90) Kansas City area health care insiders participated:

- 28 area physicians
- 6 insurance brokers serving large and small businesses and individuals
- 10 hospital executives
- 22 health care leaders from the Chamber and/or Public Health
- 10 small businesses
- 14 large employers

A general public sample was also surveyed, comprised of two audiences: a Kansas City public online panel of 2,000 and 2,165 members of Blue KC, totaling 4,165. The response rate was 15.1% with 628 returns giving the study a 95% confidence level +/- 3.9%.

Specific respondent segments, and the number of respondents within each segment, are as follows: Generation X/Y (290), Baby Boomers/Seniors (336), Income Under \$40K (232), Employer Sponsored Insurance (368), Females (397), Democrats (211), Blue KC Members (281), Missouri Residents (391).

Synopsis of Opinions:

After compiling the results of all involved, including the small group participants and the general public sample, VVV Research & Development, INC generated an overall synopsis of opinions. In all, the participants:

- Are worried about funding health care reform and do not want additional national debt and/or new taxes (both business and personal);
- Are fearful of further unemployment, of rising costs for coverage and of losing their health insurance – “We are currently one pink slip away from not having insurance.”;
- Want subsidies for the poor at 100% (initially) of poverty level, not 200-400%;
- Want health care reform that requires coverage mandates with guaranteed issue and waives pre-existing conditions; and
- Are worried about a physician shortage compromising the quality of care.

Key Observations from Research:

VV Research & Development, INC made the following observations after reviewing the survey results:

- Health care insiders are concerned Washington is “rushing to reform” and not focusing enough on details. They want more focus on stabilizing Medicare, Medicaid and Social Security.
- Kansas City providers would like to see effective tort reform enacted to reduce malpractice expense and eliminate unnecessary and costly tests and procedures.
- Preferred sources for funding reform include: “sin taxes” on cigarettes and unhealthy foods; fraud and abuse auditing; Medicare Advantage cuts; eliminate COBRA; create a new private payer tax; and tax health benefit plans.
- Kansas City health care insiders overwhelmingly do not support taxing premium contributions of employer-paid health benefits, stating it would ultimately turn into another means of cost-shifting back down to employees.
- Very few respondents support the government limiting payment to physicians and hospitals in order to pay for health care reform.
- Respondents cited many ways to reduce health care waste that need to be explored before enacting new laws (see below for details).
- Much debate was given about the value of an Insurance Exchange (if created) and a potential new role for brokers.
- Physicians, hospitals and Blue KC are perceived as the “Most Committed/Trusted” in making health care reform work.
- Top items that will slow and/or stop reform include fear of more debt, mass lobbying, unemployment and town hall confrontations.
- Seven of ten points from President Obama’s plan, as stated in his September 9, 2009, speech, focus on “INSURANCE” reform, as opposed to health care reform.
- In general, support for the different elements of health care reform varies by audience. A majority of health care insiders would prefer to maintain our current health system, or move forward with incremental steps, while the general public feels more strongly about alternative options on the table, including a public option or state-run co-ops.
- Overall Kansas City opinion mirrors (for the most part) U.S. polls.

Kansas City’s Top Ten Ideas to Reduce Waste in Health Care:

- Fix the CMS schedule. Will require a realignment of how providers are paid. This should be outcome based instead of just fee for service.
- Standardize all applications for direct and group health insurance. Spending too much on enrolling people each year.
- Tort Reform – cap malpractice punitive damages. The fact that doctors are running all kinds of tests, so they don’t get sued because they don’t run every scenario possible.
- Make preventive care more affordable. Include preventive measures in all benefit plans.
- Change how plans negotiate and charge. All fees for health service should be similar regardless of the insurance company.
- Use of nurse practitioners should be increased (i.e. for ear infections, etc.). Reduce credentialing that nurse practitioners must have. Also, standardize plan provider credentialing.
- Work to standardize electronic medical records and make available to all providers. Have plans use computerized check-in (adopt 270/271 HIPAA subset).
- Closer monitoring of “free” clinic patients. Some, who can afford health care, are using the free clinics.
- Tremendous waste in pharmaceutical advertising, samples, etc. Doctors need to make the choice. Cost of advertising is built into every pill we take.
- Hold people personally responsible for their health.

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