Indianapolis

March 11, 2006

Citizens' Health Care Working Group

HEALTH CARE
THAT WORKS FOR ALL
AMERICANS

OVERVIEW

Conveying a strong sense of social justice, participants at the Indianapolis community meeting of the Citizens' Health Care Working Group combined a concern for the welfare of all Americans with an awareness of individual responsibility.

Fairness, equality, and equity were reoccurring themes in the discussion of values, access, financing and trade-offs. They consistently coupled universal access to health care, particularly basic services, with a desire for "equity in pricing and bearing the cost." When asked if everyone should be required to enroll in basic health care coverage (either private or public), more than 85 percent answered 'yes'.

Emphasis was also repeatedly placed on the patient-provider relationship and the importance of education and preventive care. Participants identified the top two responsibilities of individuals and families as "practice(ing) preventive health" and "being good stewards of health care resources." When asked for suggestions on slowing the growth of health care costs, participants highlighted the impact of long-term savings through more preventive care and improving chronic disease management. In addition, they also felt that both were feasible outcomes.

While recognizing the shortcomings of the current health care system, participants expressed a calm and pragmatic optimism, along with a willingness to be proactive in finding and implementing solutions.

Citizens' Health Care Working Group Community Meetings

Kansas City, Missouri
Orlando, Florida
Baton Rouge, Louisiana
Memphis, Tennessee
Charlotte, North Carolina
Jackson, Mississippi
Seattle, Washington
Denver, Colorado
Los Angeles, California
Providence, Rhode Island
Miami, Florida
Indianapolis, Indiana
Detroit, Michigan
Albuquerque, New Mexico
Phoenix, Arizona
Daytona Beach, Florida
Upper Valley, New Hampshire
Hartford, Connecticut
Des Moines, Iowa
Philadelphia, Pennsylvania
Las Vegas, Nevada
Eugene, Oregon
Sacramento, California
Billings, Montana
San Antonio, Texas
Fargo, North Dakota
New York, New York
Lexington, Kentucky
Little Rock, Arkansas
Cincinnati, Ohio
Sioux Falls, South Dakota
Salt Lake City, Utah

SESSION FINDINGS

Values

Participants at this meeting expressed their views that social justice and fairness should be the basis of health care in the United States and recognized the importance of both individual and social responsibility. They coupled universal access to health care, particularly basic services, with a desire for "equity in pricing and bearing the cost." Participants placed a high value on a respectful, long-term patient-provider relationship and emphasized the importance of education and preventive care.

> **As we consider ways to improve our health care system, what values and/or principles do you believe are fundamental?** *(Top 5 responses below)*
>
> - Social Justice and fairness
> - Access to basic services
> - Universal and hassle-free
> - Equality for all, with social, emotional, physical, and mental well-being
> - No one turned away

Benefits

"The system isn't set up to give health care, its set up to make money."

Participants expressed overwhelming agreement (95 percent) that it should be public policy for all Americans to have access to affordable health care coverage. While viewing access to health care as a basic right, they also conveyed a palpable willingness to contribute to the success of a system that would facilitate health care for all. Participants emphasized the importance of education and prevention to the sustainability of any health care system. In the discussion of what benefits should be added to a basic benefits plan (see attachment), participants listed chronic disease management, preventive care, an increased focus on education, complete preventive and curative dental services, nutritional counseling and exercise prescriptions as their priorities. They felt decisions regarding a basic benefits package should be made by consumers, medical professionals and the federal government.

Getting Health Care

"We have rural areas here in Indiana where you can't even get a paramedic."

Cost, confusion, and access to health care providers were three of the leading concerns in the discussion on getting health care. Over a third of the participants listed cost as their primary concern. They expressed frustration with a "complicated and confusing" system and the lack of access to physicians, either because of a rural location or physicians "opting out" of providing care to specific groups.

Participants at this meeting placed a high value on affordability of health care and a consistent relationship with a health care provider. One participant noted that "If you change jobs, it forces to you change doctors, and that doesn't help our care. It's important to me to have a continuing relationship with a provider- for years if possible." They also recognized an individual's responsibility to work towards a "more equal patient-provider relationship" to facilitate communication. They desired

removal of the barriers in the current system that inhibit patient respect. One participant spoke of how he interviewed multiple primary care physicians to find one he felt listened to him and treated him with respect. He suggested more people take this responsibility to seek out a provider with whom they can have a personal relationship.

Financing

"If we want to bring the cost of health care down, then ultimately, we need to reduce the burden of disease. We need to reduce the need to spend money rather than figuring out how to redistribute the money. Otherwise the system will remain broken regardless of how we want to pay for it."

The majority of participants (85 percent) felt that everyone should be required to enroll in a health care system. They reasoned that "If we aren't required to opt in, then we are going to fall short on funding" and that "the healthy have always subsidized the sick and if you stay in an insurance type model, there is no other choice." Others expressed the view that "we are paying for it anyway, and it would be more equitable to share the costs more fairly." Some also felt the need to recognize individual freedoms and "self determination- we as individuals have a right to make that choice, but what happens if there is a catastrophic problem?"

What steps can we take to slow the growth of health care costs?
(Top 5 answers according to impact and feasibility)

- Better preventive care
- Chronic disease management
- Reduce middle man costs (insurance companies)
- More transparency of cost
- Continued focus on evidence-based medicine

Responses were split on whether or not some people should be responsible for paying more for health care than others (42 percent disagreed). One participant volunteered his concern that "what if we have genetic testing for hereditary diseases? Why should people be penalized if they have a predisposition?" If some people are to pay more than others, half of the participants thought income could be used to determine the scale. About a third of the participants included health behaviors as a factor in determining a person's contribution to a system.

Only one third of the individuals felt that public policy should continue to encourage employer based health insurance. The other two thirds expressed the view that "as long as we have an employer based system, health care it will be an imperfect patchwork full of gaps."

Tradeoffs and Options

Participants recognized an "individual responsibility to be a good steward of health care resources." They emphasized the importance of practicing "preventive health," including screenings, a healthy diet and exercise. There was an understanding that "individuals need to get involved in decision making" and "make proactive choices about their health behaviors." They also recognized a "financial responsibility of contributing to a social system" that would provide health care to all Americans.

About 88 percent of participants were willing to contribute additional funds to support an effort to provide every American access to health care.

On the topic of controlling health care costs, participants suggested an increase in preventive care, attention to chronic disease prevention and management, transparency, and a desire to "reduce the middle man costs." Other suggestions included the need to address "futile end of life issues" recognizing that "we need to be willing to spend less on the quest for immortality."

When asked about priorities for public spending, participants felt everyone should have access to health insurance. They valued investments in public health measures and increased emphasis on health care providers in rural areas. They also valued the availability of health care through safety net programs.

Participants favored the creation of a national health insurance program financed by taxpayers that would provide coverage to everyone. They felt it was both advantageous and feasible to require everyone to enroll in a plan, either public or private, while providing assistance to those who could not otherwise afford to enroll. They also desired to expand neighborhood health clinics and open enrollment in federal programs.

METHODOLOGY

Participants at the meeting sat at tables of eight to ten people, each with a volunteer facilitator. The meeting format was a mix of table-level discussion, reporting table findings to the full group, quick surveys using electronic keypads and full group discussion sessions. Main points from the table discussions were called-out to the full group and displayed on a screen. Participants answered questions and ranked choices using keypads after which the results were displayed. Findings from these polls formed the basis for full group discussion. Complete polling data from this meeting is available in the Data section of this report and online at
www.citizenshealthcare.gov

PARTICIPATION

On Saturday, March 11, 2006, from 9:00 am- 1:00 pm, over 240 participants gathered at Butler University in Indianapolis, Indiana, to discuss health care. Dr. Patricia Maryland represented the Working Group. Dr. Judith Monroe, Indiana's State Health Commissioner, provided insight into specific issues facing the Hoosier State. Senator Bayh and Senator Lugar sent remarks that were read to participants, thanking them for their participation in this national effort to find ways to improve health care for all Americans.

DATA

Are you male or female?

37.0%   1   Male
63.0%   2   Female

How old are you?

6.6%   1   Under 25
34.0%   2   25 to 44
49.7%   3   45 to 64
9.6%   4   Over 65

Are you Hispanic or Latino?

3.0%   1   Yes
93.0%   2   No
4.0%   3   No Response

Which of these groups best represents your race?

75.4%   1   White
15.6%   2   Black or African American
0.5%   3   Asian
0.0%   4   Native Hawaiian or Pacific Islander
1.5%   5   American Indian or Alaska Native
4.0%   6   Other
3.0%   7   Decline to answer

What is the highest grade or year of school you completed?

0.5%   1   Elementary (grades 1 to 8)
2.5%   2   Some high school
11.5%   3   High school graduate or GED
20.0%   4   Some college
4.5%   5   Associate Degree
19.5%   6   Bachelor's Degree
41.5%   7   Graduate or professional degree
0.0%   8   Decline to answer

What is your primary source of health care coverage?

75.8%   1   Employer-based insurance
7.6%   2   Self-purchased insurance
0.0%   3   Veterans'
9.6%   4   Medicare
2.0%   5   Medicaid
1.0%   6   Other
4.0%   7   None
0.0%   8   Not sure

What is your employment status?

11.4%	1	Self-employed
62.2%	2	Employed - working full time
7.5%	3	Employed - working part-time
1.5%	4	Not employed / currently looking for work
0.5%	5	Homemaker
16.9%	6	Other

Which one of these statements do you think best describes the U.S. health care system today?

61.3%	1	It is in a state of crisis
37.1%	2	It has major problems
1.0%	3	It has minor problems
0.0%	4	It does not have any problems
0.5%	5	No opinion

Which one of the following do you think is the MOST important reason to have health insurance?

36.4%	1	To pay for everyday medical expenses
62.1%	2	To protect against high medical costs
1.5%	3	No opinion

As we consider ways to improve our health care system, what values and/or principles do you believe are fundamental? And which of the following values/principles is most important to you?

18.2%	1	Social Justice and fairness
14.4%	2	Universal and hassle-free
10.7%	3	No one turned away
5.3%	4	System driven by clinicians, not payers
16.0%	5	Access to basic services
4.3%	6	Understandable
13.9%	7	Equality for all, with social, emotional, physical, and mental well-being
9.6%	8	Equity in pricing and baring the cost
5.3%	9	Freedom to choose services; independence
2.1%	10	High quality

As we consider ways to improve our health care system, what values and/or principles do you believe are fundamental? And which of the following values/principles is second most important to you?

14.4%	1	Social Justice and fairness
12.2%	2	Universal and hassle-free
7.2%	3	No one turned away
6.7%	4	System driven by clinicians, not payers
16.7%	5	Access to basic services
3.3%	6	Understandable
8.9%	7	Equality for all, with social, emotional, physical, and mental well-being
12.2%	8	Equity in pricing and baring the cost
9.4%	9	Freedom to choose services; independence
8.9%	10	High quality

Should it be public policy that all Americans have affordable health care coverage? [By public policy we mean that the stated public goal is set out in federal or state law.]

94.9%	1	Yes
5.1%	2	No

Which of the following statements most accurately represents your views?

7.5%	1	Providing coverage for particular groups of people (e.g. employees, elderly, low-income, etc.) as is the case now
92.5%	2	Providing a defined level of services for everyone (either by expanding the current system or creating a new system)

It would be difficult to define a level of services for everyone. A health plan that many people view as "typical" now covers these types of benefits, many of which are subject to co-payments and deductibles:

- Preventive Care—screenings, routine physicals, influenza and pneumonia immunizations, well child care, limited dental care
- Physicians' Care—inpatient services, outpatient surgery, related tests, home and office visits, medical emergency care
- Chiropractic Care
- Maternity Care
- Prescription Drugs
- Hospital/Facility Care—inpatient and outpatient services
- Physical, Occupational, and Speech Therapy
- Mental Health and Substance Abuse—inpatient and outpatient facility and professional care

How would a basic package compare to this "typical" plan?
Of the most frequent answers the group gave, what would you add?

3.1%	1	Major medical insurance
17.0%	2	More preventive care (education)
18.0%	3	Complete preventive/curative dental services
12.4%	4	Basic vision care
21.1%	5	Chronic disease management (preventive, pharmacy, home health included)
13.4%	6	Long-term care
3.6%	7	Hospice care
0.5%	8	Comfort care
10.3%	9	Catastrophic coverage
0.5%	10	Energetic medicine (e.g. vibrational)

Of the most frequent answers the group gave, what would you add?

28.8%	1	Family planning
40.0%	2	Nutritional counseling and exercise prescriptions
26.4%	3	Disability
4.8%	4	Incentives for advance directives

Of the most frequent answers the group gave, what would you take out?

5.0%	1	Mental health & substance abuse
68.3%	2	Chiropractic care
17.5%	3	Physician care home visits
4.2%	4	Office visits
5.0%	5	Selected hospital care
35.6%	6	Nothing

On a scale of 1 (no input) to 10 (exclusive input), how much input should each of the following have in deciding what is in a basic benefit package?

3rd Federal government
4th State and/or local government
2nd Medical professionals
6th Insurance companies
5th Employers
1st Consumers

What kinds of difficulties have you had in getting access to health care services? And which of these kinds of difficulties is the most important to address?

--	1	Physicians opting out
--	2	Lack of central information communication
--	3	Lack of respect
--	4	Promptness for those who wait until the last minute
--	5	Providers being incentivized to withhold screening and tests
--	6	Cost

Should everyone be required to enroll in basic health care coverage - either private or public?

| 85.5% | 1 | Yes |
| 14.5% | 2 | No |

Repoll: Should everyone be required to enroll in basic health care coverage - either private or public?

| 88.1% | 1 | Yes |
| 11.9% | 2 | No |

Should some people be responsible for paying more than others?

| 58.4% | 1 | Yes |
| 41.6% | 2 | No |

What criteria should be used for making some people pay more?

15.5%	1	None - everyone should pay the same
3.6%	2	Family size
29.0%	3	Health behaviors
47.2%	4	Income
4.7%	5	Other

Should public policy continue to use tax rules to encourage employer-based health insurance?

| 30.8% | 1 | Yes |
| 69.2% | 2 | No |

What responsibilities of individuals and families in the health care system would you support most?

5.8%	1	Get involved in decision-making
20.6%	2	Individual responsibility of being good stewards of health care resources
29.1%	3	Practice preventive health
14.8%	4	Educate people on good health behaviors (including within the education system, and for those with newborns)
9.5%	5	Make good/healthy choices
1.1%	6	Seek and find a good medical home
2.1%	7	Help build trust within health care delivery system (e.g. cultures)
6.9%	8	Accept financial responsibility
3.2%	9	Making good spending decisions (with more authority)
6.9%	10	Understand coverage and co-pays to keep cost down

What responsibilities of individuals and families in the health care system would you support second most?

9.0%	1	Get involved in decision-making
19.7%	2	Individual responsibility of being good stewards of health care resources
28.7%	3	Practice preventive health
8.4%	4	Educate people on good health behaviors (including within the education system, and for those with newborns)
6.2%	5	Make good/healthy choices
4.5%	6	Seek and find a good medical home
3.9%	7	Help build trust within health care delivery system (e.g. cultures)
6.2%	8	Accept financial responsibility
6.2%	9	Making good spending decisions (with more authority)
7.3%	10	Understand coverage and copays to keep cost down

IMPACT: On a scale from 1 (low) to 10 (high) in terms of impact, which of these steps is the most important to take in order to slow the growth of health care costs in America?

10th	Standard care for health insurance and standard allowable charges
7th	More transparency of cost (publicize cost)
5th	Cap pharmaceutical profits
13th	Control supply-side (e.g. duplicate technology and facilities)
4th	Ensure money actually goes to providing care
8th	Address futile end-of-life issues
14th	More coordinated recordkeeping and standardization
12th	Decrease bureaucracy and increase technology
11th	Stop allowing pharmaceutical companies to advertise direct to consumers
3rd	Chronic disease management
1st	Better preventive care lowers cost in the long run
6th	Continued focus on evidence-based medicine
2nd	Reduce middleman cost (insurance companies)
9th	Cap on certain costs

FEASIBILITY: On a scale from 1 (low) to 10 (high) in terms of feasibility, which of these steps is the most important to take in order to slow the growth of health care costs in America?

8th	Standard care for health insurance and standard allowable charges
1st	More transparency of cost (publicize cost)
14th	Cap pharmaceutical profits
13th	Control supply-side (e.g. duplicate technology and facilities)
10th	Ensure money actually goes to providing care
9th	Address futile end-of-life issues
6th	More coordinated recordkeeping and standardization
11th	Decrease bureaucracy and increase technology
7th	Stop allowing pharmaceutical companies to advertise direct to consumers
2nd	Chronic disease management
3rd	Better preventive care lowers cost in the long run
4th	Continued focus on evidence-based medicine
5th	Reduce middleman cost (insurance companies)
12th	Cap on certain costs

How much more would you personally be willing to pay in a year (in premiums, taxes, or through other means) to support efforts that would result in every American having access to affordable, high quality health care coverage and services?

11.6%	1	$0
14.9%	2	$1 - $100
14.9%	3	$100 - $299
16.0%	4	$300 - $999
22.1%	5	$1,000 or more
20.4%	6	Don't know

On a scale from 1 (low) to 10 (high), please rate each of the following public spending priorities to reach the goal of health care that works for all Americans.

3rd	Guaranteeing that there are enough health care providers, especially in areas such as inner cities & rural areas
2nd	Investing in public health programs to prevent disease, promote healthy lifestyles, and protect the public in the event of epidemics or disasters
1st	Guaranteeing that all Americans have health insurance
8th	Funding the development of computerized health information to improve the quality & efficiency of health care
5th	Funding programs that help eliminate problems in access to or quality of care for minorities
7th	Funding biomedical & technological research that can lead to advancements in the treatment & prevention of disease
4th	Guaranteeing that all Americans get health care when they need it, through public safety net" programs (if they can not afford it)."
6th	Preserving Medicare & Medicaid

If you believe it is important to ensure access to affordable, high quality health care coverage and services for all Americans, which of these proposals would you suggest for doing this? Please rate each of the following proposals on a scale from 1 (low) to 10 (high).

5th	Offer uninsured Americans income tax deductions, credits, or other financial assistance to help them purchase of private health insurance on their own.
6th	Expand state government programs for low-income people (eg. Medicaid & S-CHIP) to provide coverage for more people without health insurance.
10th	Rely on free-market competition among doctors, hospitals, other health care providers and insurance companies rather than having government define benefits and set prices.
4th	Open up enrollment in national federal programs like Medicare or the federal employees' health benefit program
9th	Expand current tax incentives available to employers & their employees to encourage employers to offer insurance to more workers & families
8th	Require businesses to offer health insurance to their employees
3rd	Expand neighborhood health clinics
1st	Create a national health insurance program, financed by taxpayers, in which all Americans would get their insurance
2nd	Require that all Americans enroll in basic health care coverage, either private or public
7th	Increase flexibility afforded states in how they use federal funds for state programs (such as Medicaid and S-CHIP) to maximize coverage

STAYING INVOLVED

Through the Citizens' Health Care Working Group website, we have made it possible for you to stay involved in the discussion – and to encourage others to get involved as well. Visit the website at www.citizenshealthcare.gov and:

- Download a *Community Meeting Kit* to plan a meeting for your family, friends, neighbors and co-workers.
  www.citizenshealthcare.gov/community/mtg_kit.php

- Find a list of other cities hosting meetings and spread the word to friends and family in those cities to **Register for a Community Meeting** near them.
  www.citizenshealthcare.gov/register

- Add your opinions to three different polls in the **Public Comment Center**
  www.citizenshealthcare.gov/speak_out/comment.php

- Read what members of the Working Group and other Americans have to say by following the link on the homepage to the **Citizens' Blogs**.
  www.citizenshealthcare.gov

- Share your opinions on the future of health care by creating your own blog by following the link on the homepage to the **Citizens' Blogs**.
  www.citizenshealthcare.gov

- Join a growing group of individuals engaging in back-and-forth discussions on the **Discussion Forums** by following the link on the homepage.
  www.citizenshealthcare.gov

- Read **Community Meeting Reports** from other cities to see how opinions are shaping up across the country.
  www.citizenshealthcare.gov/community/mtng_files/complete.php

- Stay tuned to the homepage for the Citizens' Health Care Working Group **Preliminary Recommendations** (available in early June) and get involved in the 90-day public comment period.
  www.citizenshealthcare.gov

- Stay tuned to the homepage for information on the **Final Recommendations** and the schedule of **Congressional hearings** to address those recommendations.
  www.citizenshealthcare.gov

If you have additional ideas on how to get others involved, we would love to hear them. Please contact Jessica Federer at 301-443-1521 or jessica.federer@ahrq.hhs.gov.