



Little Rock

April 29, 2006



Citizens' Health Care Working Group

**HEALTH CARE
THAT WORKS FOR ALL
AMERICANS**

OVERVIEW

People attending the Little Rock community meeting overwhelmingly believed that it should be public policy that all Americans have affordable health care coverage.

In support of this view, two themes ran throughout the meeting: the concern over the costs of health care; and the belief that all should “participate in the financing of their health care.” The need for sliding scale fees or co-payments was often mentioned.

Taking responsibility was an important undercurrent throughout the Little Rock meeting. In addition to supporting fees based on sliding scales, there was support for allowing people who could not afford to purchase health services to exchange community service for health care. Besides participating in the financing of their health care, attendees believed that individuals should adopt healthy lifestyles, use hospital emergency rooms only for emergencies, and work hard at making their views known to policymakers. It was the view of attendees that it was the responsibility of the health care system to reduce administrative costs, promote good health by covering prevention and wellness programs and find better ways to use volunteers and students in health care delivery.



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
Sacramento, California
San Antonio, Texas
Fargo, North Dakota
New York, New York
Lexington, Kentucky
Little Rock, Arkansas
Cincinnati, Ohio
Sioux Falls, South Dakota



SESSION FINDINGS

Values

Slightly less than half of the participants at the Little Rock meeting believed that the American health care system is in a state of crisis (48 percent) and a similar percentage (47 percent) believed the system has major problems. Virtually all attendees (97 percent) thought it should be public policy that all Americans have affordable health care coverage. The group identified these values in descending order as most important to a health care system that worked for all Americans:

- The system should be characterized by these words: available, affordable, preventive, prescriptive, fair and flexible;
- There should be access and insurance coverage for all; and
- Access and quality should be equal for all.

Other characteristics that attendees thought important included: care that was patient-centered; an emphasis on access to primary care; early education and prevention; and care that was delivered with respect regardless of one's form of coverage.

Benefits

"We shouldn't have to sacrifice when Congress receives lifetime care."

All but a handful of attendees believed that coverage based on a defined set of benefits was preferable to coverage based on one's membership in a particular group.

Getting Health Care

Affordability issues dominated participants' discussion of barriers to getting health care. The single most important issue the group thought important to address was the cost of services and the impact of costs on access. This was followed by the lack of affordable services and health insurance, and the need for timely access regardless of ability to pay. Lack of knowledge about health care and the health care system and lack of transportation were also issues the group identified as needing attention.

Financing

"We have a responsibility to participate in financing health care proportionate to our incomes. There should be incentives for healthy behavior."

Attendees identified a number of responsibilities that individuals and families had in financing health care. A general theme was that individuals and families need to share in the costs of their health care to the extent they are able. Use of a sliding scale based on income to determine co-payments or other charges came up frequently. One person suggested that for some people community service could be exchanged for care. Another noted that people need information about costs in

order to make informed decisions about care. Participants also noted the responsibility people held to promote healthful lifestyle changes.

Attendees believed that the best way to reduce health care costs is to provide coverage for prevention and wellness programs. They also believed tort reform would reduce health system costs. They thought that healthy lifestyles would also reduce costs and that the greater availability of public programs, such as community health centers, would reduce inappropriate emergency room use and thereby lower costs.

Eighty-five percent of attendees believed that everyone should be required to enroll in basic health care coverage. A large majority believed that in such a system some people should pay more for coverage, with most believing that a combination of criteria including family size, health behaviors, income and other factors should be used to determine how much was paid.

The group was divided on whether current tax rules encouraging employers to provide insurance should be continued. Forty-two percent believed they should; 35 percent believed they should not and the remainder abstained from voting.

Tradeoffs

“Do something with the information you are compiling.”

“Congress has to be serious about priorities. Cut earmarks and divert those funds to what people really need.”

Participants identified ten potential tradeoffs. Those that received the strongest support from attendees were:

- Trading healthy lifestyles for reduced insurance premiums (82 percent agreed or strongly agreed)
- Exchanging insurance company profits for better health care (71 percent agreed or strongly agreed)
- Increased community service in exchange for improved health care access (68 percent agreed or strongly agreed)

Four out of five participants did not support a tradeoff that reduced future Medicare benefits in exchange for future tax reductions. Although 48 percent of participants said they were unwilling to pay more taxes in exchange for affordable health care, 44 percent indicated that they would support this tradeoff.

Although more than half of the participants said they would be willing to trade defense spending for better health care, 36 percent of attendees either disagreed or strongly disagreed with this suggestion.

Among the participants' top three priorities for increased public spending were:

- Guaranteeing that all Americans have health coverage
- Investing in public health programs to prevent disease, promote health and protect the public, and

- Guaranteeing that all Americans get health care when they need it, through public safety net programs if needed.

Close to three quarters of attendees were willing to pay more, either through taxes or other means to support efforts that would assure that all Americans have access to affordable high quality coverage, although the additional amount they were willing to pay, in general, was modest.

The three health care proposals that meeting participants believed would be most helpful in making progress toward health care that works for all Americas were:

- Requiring that all Americans enroll in basic health coverage, either public or private
- Creating a national health insurance program financed by taxpayers through which all Americans would receive health coverage and
- Expanding neighborhood health clinics

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 key pads 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 online at www.citizenshealthcare.gov/reports

PARTICIPATION

Approximately 135 people attended this meeting which took place Saturday, April 29, 2006 from 10:00-2:00 at the Little Rock Convention Center. Deb Stehr represented the Working Group at the meeting. Juanita Boyd Hardy of *AmericaSpeaks*, moderated the meeting.

Attendees were predominantly female (72 percent) and middle-aged (57 percent aged between 45 and 64). Forty-nine percent of attendees were Caucasian; 47 percent were African-American.

The audience was well-educated with over half having either a bachelor's (20 percent) or an advanced (36 percent) degree. Close to two thirds of the audience (63 percent) had employer-sponsored insurance; another nine percent had self-purchased insurance. Six percent were uninsured.

The meeting was hosted by the Community Health Care Association of Arkansas. Other sponsors included: the Arkansas Oral Health Commission; Baptist Health; Delta Dental Plan of Arkansas; the Little Rock Convention and Visitors Bureau; Mid-Delta Community Consortium; the National Association of Community Health

Centers; the Peabody Hotel; Pfizer; Southern Financial Partners; and the University of Arkansas at Little Rock Children International. Three television stations, Channels 4, 7 and 11 attended the meeting and Clear Channel radio covered the meeting with a 30 minute program. The meeting was also covered in the Arkansas Democrat-Gazette, where a letter from State Representative Tommy Roebuck was published.

DATA

Are you male or female?

27.8% Male
72.2% Female

How old are you?

4.6% Under 25
25.2% 25 to 44
56.5% 45 to 64
13.7% Over 65

Are you Hispanic or Latino?

0.8% Yes
99.2% No

Which of these groups best represents your race?

48.9% White
47.3% Black or African American
0.8% Asian
0.8% Native Hawaiian or Pacific Islander
1.5% Native American or Alaska Native
0.0% Multi-racial
0.0% Other racial background
0.8% Decline to answer

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

2.3% Elementary (grades 1 to 8)
3.1% Some high school
7.7% High school graduate or GED
20% Some college
10.8% Associate Degree
20% Bachelor's Degree
36.2% Graduate or professional degree
0.0% Decline to answer

What is your primary source of health care coverage?

63.1% Employer-based insurance
9.2% Self-purchased insurance
1.5% Veterans'
10.8% Medicare
6.2% Medicaid
3.1% Other
6.2% None
0.0% Not sure

What is your employment status?

- 6.9% Self-employed
- 66.4% Full-time employed
- 8.4% Part-time employed
- 3.1% Not employed / currently looking
- 0.8% Homemaker
- 14.5% Other /Retired

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

- 48% It is in a major state of crisis
- 47.2% It has major problems
- 31% It has minor problems
- 0.0% It does not have any problems
- 1.6 No opinion

Should it be public policy that all Americans have affordable health care coverage?

- 96.8% Yes
- 3.2% No

Which value is most fundamental to our health care system?

- 22.9% Access and insurance coverage for all
- 5.5% Equality in accessing basic primary care
- 1.8% Choice & quality in their health care
- 15.6% Equal access and equal quality
- 30.3% Available, affordable, preventive, prescriptive, fair, and flexible
- 11.9% Equal access with quality patient centered health care
- 1.8% Tracking and accountability and consumer direction
- 2.8% System that does not punish the uninsured
- 3.7% Respectfully delivered regardless type of coverage
- 3.7% Early education and early primary prevention

Which of these models would be the better way to provide coverage?

- 4.2% Providing coverage for particular groups of people
- 95.8% Defined level of services for everyone

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?

- 34.2% Cost of services and health access
- 24.6% Lack of affordability and no health insurance
- 5.3% Affordability relating to pre-existing illness
- 6.1% Lack of knowledge
- 5.3% Lack of transportation
- 1.8% Lack of choice
- 13.2% Timely access regardless of ability to pay
- 4.4% Poor quality of health care because lack of insurance
- 0.9% Programs lack flexibility
- 4.4% Lack of mental health parity

What can be done to slow the growth of health care costs? Which of these is the best way to reduce costs?

6.7%	Early childhood education
5.7%	Better utilization of students & volunteers to deliver services
18.1%	Tort reform for all health care related services
12.4%	Reducing ER visits by funding more public programs
13.3%	Healthy lifestyle
9.5%	Reduce administrative costs by sharing medical records
20.0%	Coverage for prevention and wellness programs
3.8%	Reducing the length of drug patents
7.6%	Early prevention of chronic illness
2.9%	Sharing responsibility among medical institutions

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

85.0%	Yes
15.0%	No

Should some people be responsible for paying more for health care coverage than others?

11.1%	No – everyone should pay the same
5.1%	Yes – based on family size
6.0%	Yes – based on health behaviors
15.4%	Yes – based on income
62.4%	Yes – based on other criteria or a combination of the above

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

41.6%	Yes
35.4%	No
23.0%	Abstain

Please indicate your level of support for this trade-off: Willing to give up insurance company profit, to get better health care

6.3%	Strongly Disagree
8.9%	Disagree
14.3%	Neutral
30.4%	Agree
40.2%	Strongly Agree

Please indicate your level of support for this trade-off: Give up defense spending, for better health care

22.2%	Strongly Disagree
13.9%	Disagree
9.3%	Neutral
15.7%	Agree
38.9%	Strongly Agree

Please indicate your level of support for this trade-off: Give up access to health care based on privileged position, for universal health care

13.8%	Strongly Disagree
12.8%	Disagree
20.2%	Neutral
32.1%	Agree
21.1%	Strongly Agree

Please indicate your level of support for this trade-off: Pay more taxes, for affordable quality health care

30.2%	Strongly Disagree
17.9%	Disagree
7.5%	Neutral
26.4%	Agree
17.9%	Strongly Agree

Please indicate your level of support for this trade-off: Give up intensive care at end of life, to have universal coverage

17.1%	Strongly Disagree
13.5%	Disagree
18.9%	Neutral
22.5%	Agree
27.9%	Strongly Agree

Please indicate your level of support for this trade-off: Give up homestead credit, for federal insurance program

15.8%	Strongly Disagree
15.8%	Disagree
22.8%	Neutral
26.3%	Agree
19.3%	Strongly Agree

Please indicate your level of support for this trade-off: Give up choice, for evidence based best practices

10.9%	Strongly Disagree
14.5%	Disagree
17.3%	Neutral
20.9%	Agree
36.4%	Strongly Agree

Please indicate your level of support for this trade-off: Give community service, for improved access to health care

13.4%	Strongly Disagree
6.3%	Disagree
12.5%	Neutral
21.4%	Agree
46.4%	Strongly Agree

Please indicate your level of support for this trade-off: Embrace healthy lifestyles, in exchange for lower insurance premiums

- 4.5% Strongly Disagree
- 2.7% Disagree
- 10.9% Neutral
- 22.7% Agree
- 59.1% Strongly Agree

Please indicate your level of support for this trade-off: Give up future Medicare benefits, in exchange for future tax reductions

- 61.0% Strongly Disagree
- 18.6% Disagree
- 9.3% Neutral
- 5.1% Agree
- 5.9% Strongly Agree

Considering the rising costs of healthcare, what should be the most important priority for public spending in order to reach the goal of “health care that works for all Americans? Which is your first priority?

- 7.4% Guaranteeing that there are enough health care providers, especially in areas such as inner cities and rural areas
- 22.3% Investing in public health programs to prevent disease, promote healthy lifestyles, and protect the public in the event of epidemics or disasters
- 48.9% Guaranteeing that all Americans have health coverage
- 1.1% Funding the development of computerized health information to improve the quality and efficiency of health care
- 1.1% Funding programs that help eliminate problems in access to or quality of care for minorities
- 0.0% Funding biomedical and technological research that can lead to advancements in the treatment and prevention of disease
- 14.9% Guaranteeing that all Americans get health care when they need it, through public “safety net” programs (if they can not afford it)
- 4.3% Preserving Medicare and Medicaid

Considering the rising costs of healthcare, what should be the most important priority for public spending in order to reach the goal of “health care that works for all Americans? Which is your second priority?

- 12.1% Guaranteeing that there are enough health care providers, especially in areas such as inner cities and rural areas
- 28.0% Investing in public health programs to prevent disease, promote healthy lifestyles, and protect the public in the event of epidemics or disasters
- 17.8% Guaranteeing that all Americans have health coverage
- 4.7% Funding the development of computerized health information to improve the quality and efficiency of health care
- 6.5% Funding programs that help eliminate problems in access to or quality of care for minorities
- 2.8% Funding biomedical and technological research that can lead to advancements in the treatment and prevention of disease
- 23.4% Guaranteeing that all Americans get health care when they need it, through public “safety net” programs (if they can not afford it)
- 4.7% Preserving Medicare and Medicaid

Considering the rising costs of healthcare, what should be the most important priority for public spending in order to reach the goal of “health care that works for all Americans? Which is your third priority?

- 7.2% Guaranteeing that there are enough health care providers, especially in areas such as inner cities and rural areas
- 13.5% Investing in public health programs to prevent disease, promote healthy lifestyles, and protect the public in the event of epidemics or disasters
- 9.0% Guaranteeing that all Americans have health coverage
- 8.1% Funding the development of computerized health information to improve the quality and efficiency of health care
- 6.3% Funding programs that help eliminate problems in access to or quality of care for minorities
- 10.8% Funding biomedical and technological research that can lead to advancements in the treatment and prevention of disease
- 25.2% Guaranteeing that all Americans get health care when they need it, through public “safety net” programs (if they can not afford it)
- 19.8% Preserving Medicare and Medicaid

How much more would you personally be willing to pay in a year to support efforts that would result in every American having access to affordable, high quality health care coverage and services?

- 14.0% \$0
- 26.3% \$1 - \$99
- 22.8% \$100 - \$299
- 17.5% \$300 - \$999
- 7.0% \$1000 or more
- 12.3% Don't know

If you believe it is important to ensure access to affordable, high quality health care and services to all Americans, which of these proposals would you suggest for doing this? Which is most important to you?

- 11.9% Offer uninsured Americans income tax deductions, credits, or other financial assistance to help them purchase private health insurance on their own
- 9.9% Expand state government programs for low-income people, such as Medicaid and the State Children's Health Insurance Program, to provide coverage for more people without health insurance
- 1.0% Rely on free market competition among doctors, hospitals, other health care providers, and insurance companies rather than having government define benefits and set prices
- 11.9% Open up enrollment in national federal programs like Medicare or the federal employees' health benefit program
- 5.0% Expand current tax incentives for employers and their employees to encourage employers to offer insurance to more workers and families
- 1.0% Require businesses to offer health insurance to their employees
- 5.0% Expand neighborhood health clinics
- 25.7% Create a national health insurance program, financed by taxpayers, in which all Americans would get their insurance
- 27.7% Require that all Americans enroll in basic health care coverage, either private or public
- 1.0% Increase flexibility afforded states in how they use federal funds for state programs -- such as Medicaid and S-CHIP -- to maximize coverage

If you believe it is important to ensure access to affordable, high quality health care and services to all Americans, which of these proposals would you suggest for doing this? Which is the next most important to you?

- 11.2% Offer uninsured Americans income tax deductions, credits, or other financial assistance to help them purchase private health insurance on their own
- 15.9% Expand state government programs for low-income people, such as Medicaid and the State Children's Health Insurance Program, to provide coverage for more people without health insurance
- 1.9% Rely on free market competition among doctors, hospitals, other health care providers, and insurance companies rather than having government define benefits and set prices
- 9.3% Open up enrollment in national federal programs like Medicare or the federal employees' health benefit program
- 11.2% Expand current tax incentives for employers and their employees to encourage employers to offer insurance to more workers and families
- 3.7% Require businesses to offer health insurance to their employees
- 7.5% Expand neighborhood health clinics
- 25.2% Create a national health insurance program, financed by taxpayers, in which all Americans would get their insurance
- 13.1% Require that all Americans enroll in basic health care coverage, either private or public
- 0.9% Increase flexibility afforded states in how they use federal funds for state programs -- such as Medicaid and S-CHIP -- to maximize coverage

If you believe it is important to ensure access to affordable, high quality health care and services to all Americans, which of these proposals would you suggest for doing this? Which is the third most important to you?

- 12.4% Offer uninsured Americans income tax deductions, credits, or other financial assistance to help them purchase private health insurance on their own
- 15.0% Expand state government programs for low-income people, such as Medicaid and the State Children's Health Insurance Program, to provide coverage for more people without health insurance
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- 7.1% Require that all Americans enroll in basic health care coverage, either private or public
- 10.6% Increase flexibility afforded states in how they use federal funds for state programs -- such as Medicaid and S-CHIP -- to maximize coverage

Did you learn anything new today?

- 84.1% Yes
- 15.9% No

Have your opinions changed at all since you walked in this room?

24.6%	Not at all
35.1%	A little bit
23.7%	Some
16.7%	A lot

Overall, how do you rate today's meeting?

0.9%	Very Poor
0.9%	Poor
12.1%	Okay
50.9%	Good
35.3%	Excellent

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.