



Charlotte

February 18, 2006



Citizens' Health Care Working Group

HEALTH CARE

THAT WORKS FOR ALL

AMERICANS

OVERVIEW

Participants at the Charlotte community meeting of the Citizens' Health Care Working Group expressed an array of opinions which many times seemed to contradict one another. A desire to provide universal health care access often conflicted with strong individualistic concerns about cost, choice and freedom.

Participants were unified in their concern over the cost of health care. When asked for the most important reason to have health insurance, more than 70 percent answered 'to protect against high medical costs'. Following that question, when asked what values they considered to be fundamental when determining changes to the system, the most popular response was 'affordability'. Competing with that sentiment however was the overall support for a basic benefits package that included 'non-traditional modes of health care'.

And while more than several participants highlighted cultural barriers – including language – as difficulties that they and/or others they knew had faced, when asked to prioritize spending proposals, there was little support for funding programs to help eliminate problems in access to or quality of care for minorities.

Despite these differences however, participants found common ground on the need to emphasize the importance of personal responsibility, health education, increased use of all health providers (not limited to physicians) and the need to approach the individual holistically.



**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

"Yes- we agree that there should be a basic level of services for everyone- everyone has a right to that care. But our concern is that neither of those- what we have now, or a basic plan for everyone - will work until it's a consumer driven choice and not a corporate solution that values profits above everything else. The consumer should be driving the choices- not like the way the culture is now. There should be more of a balance."

Participants frequently recognized a conflict between societal and individual concerns during their values discussion. They expressed a desire for everyone to have access to health care, but voiced concerns about how that care would be financed, the involvement of the government, and whether they would be satisfied with a changed system. Regard for the health care of society was expressed alongside concerns about individual freedom and the competitiveness of American businesses. Participants expressed a distrust of both big business and the government.

Participants listed affordability and equal access as their top priorities in health care. However, they also emphasized the importance of preventive medicine, a holistic approach to the person, health education, and self-responsibility.

Benefits

Most participants (81 percent) preferred a health care system based on a basic benefit package for all. Individuals supporting categorical eligibility (19 percent) voiced concern about how a basic benefit package would be financed and what would happen to people in need of more than just "basic" care. A mistrust of the government was also expressed. One participant remarked that "providing a basic plan will creep and grow until we have a universal system- and then it will be a system as unresponsive as Canada." The audience sought to add non-traditional forms of health care (alternative and complementary medicine) to the basic plan of health services, and reiterated the importance of health education. The majority of participants felt that decisions regarding the components of a basic health plan should be made either by consumers (23%) or a combination of health care providers and patients (69%).

Individuals at this meeting did express a willingness to pay more for an "a la carte" health plan that would allow them to add various services to a basic plan. These optional plans would vary according to life phases and offer coverage for the areas that would be the most cost effective for each age group. For example, a woman in childbearing years could pay an additional amount for OB-GYN services, while a middle aged man may prefer a component that consisted of various screenings and tests.

Getting Health Care

When asked what was most important to them when getting health care, participants replied the care of their children, individual time with their physicians, a relationship with a primary care provider, consumer choice of providers, culturally competent care, and medical confidentiality. Some of the comments included:

- "Don't mess with well-child screenings. Sick or well, don't mess with my babies!"
- "When you change insurance, you should be able to keep your doctor."
- "We have lost time intensive care- we have lost that. Providers right now don't have time to spend with us! You only get two minutes with your doctor."
- "Primary care doctor- I like that relationship and I don't want to see that go away."
- "We need to automate the system as much as possible- let's make those patient records and data available to all physicians to help the care for the patient."
- "Culturally competent care- funding to encourage more minority physicians and providers. If I want an African American dermatologist, I have to search high and low."
- "We need a solid system in place for patient advocacy- someone needs to train family members because mistakes can happen and people can die."

In getting care, what is most important to you?

- Well-child screening
- Getting what you need, when you need it at a reasonable cost
- Keep doctors when changing insurance
- Time-intensive care (more time with providers)
- Culturally competent care (e.g. more training for non-minority providers)
- Senior care
- Consumer choice of care providers
- Accurate diagnosis of treatment
- Consistency
- Confidentiality of medical treatment history

Financing

Discussion on the topic of financing was enthusiastic, and there was energetic disagreement among participants. The majority of the participants (80%) felt that everyone should be required to enroll in a basic health care plan, either public or private. Questions arose regarding the enforcement of a mandatory enrollment and penalties for non-compliance. Comments in this lively discussion ranged from "everyone should be required to participate" to "requiring people (to enroll in a plan) goes against what our country was founded on." One participant remarked that a basic health care plan should be similar to Medicare, where the majority of the people eligible for the program voluntarily enroll.

There was less consensus among participants on the question of whether public policy should continue to encourage employer sponsored health care (62% responded affirmatively and 38% negatively). One participant remarked that "if we got rid of employer based health care, and put that into the government programs, that would enable our industries in the U.S. to be more competitive." Another

participant deemed that intervention inadequate because "it doesn't include small businesses and immigrants and all those other people who show up in our ER's that are here in the U.S. working." The audience agreed (91%) that government resources should continue to assist those who could not otherwise afford health care, but they emphasized the importance of individual ownership and responsibility where at all possible.

Suggestions for reducing health care costs included greater transparency regarding the actual cost of care, increased utilization of health information technology, and incentives for healthy behaviors. One participant suggested a "single plan (co-op) that covers all residents and provides for early intervention and preventive care as an investment that will lower health care costs." Additional suggestions included prohibiting direct to consumer advertising, medical malpractice caps, preventing lawyers from advertising for malpractice cases, legalizing and opening the purchasing of prescription drugs on the global market, taxing people who engage in unhealthy lifestyles, increasing the affordability of nutritional foods, and health education camps for families. Participants recognized the high costs associated with end-of life care, and reminded each other that they should "be realistic and realize that we cannot live forever." An individual commented that "Medicare's overhead is 3% and others is 16%- lets get the private sector out of the system."

What are some steps to take in order to slow the growth of health care costs in America?

- Research on what is causing us to get sicker
- Cap on medical malpractice lawsuits
- A single plan (co-op) that covers all residents, provides for early intervention and preventive care is an investment that will save money in long run
- Percentage of ticket sales to sporting events and all entertainment venues into a national health fund
- Legalize and open purchasing of prescription drugs on global market
- Minimize duplication of paperwork and admin costs
- More utilization of health information technology
- Every family should go to a health care center and learn about what it means to be healthy
- Cap the amount of care and tie to provider payments
- Tax people who are engaging in unhealthy lifestyles
- Use cost-accounting systems like other businesses to determine true cost
- Consumer-driven cost control
- Realistic limits on end-of-life care
- Get private insurance out of the system
- Make healthy lifestyles more affordable
- Incentives or other tax deductions for healthy lifestyles
- Controls on medical malpractice
- Limit tax deductions for employer-provided coverage to a basic package
- Require doctors to post prices in lobbies

Tradeoffs

There was clear disagreement among participants on the topic of trade-offs. When asked if they were willing to pay any additional amount for health care, around 44% were not willing to pay any additional amount, either in taxes, premiums, or other means, for health care, yet 16% were willing to spend \$1,000 or more. Some were willing to pay a "health insurance tax," and trade off some level of convenience for higher quality care. Individuals suggested increased utilization of all health providers, not solely physicians. One woman suggested offering incentives for healthy behaviors, commenting that she would be "willing to test (her) hemoglobin and A1C for a tax break." Other suggestions addressed the way in which society

values health care professionals. A participant remarked that scholarships should be provided for all health care provider training. Another was "worried about the influence of affluence- the consumer has very little control and it's crushing us." There was also an awareness that a more efficient health care system would lead to a "better labor force and better educated children that will make us more competitive globally."

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/reports

PARTICIPATION

On Saturday, February 18, 2006, at 8:30 am, more than 100 residents of the Charlotte area gathered at the Harris Conference Center to voice their concerns on health care. Congressman Robin Hayes welcomed the participants to the community meeting and Senator Elizabeth Dole sent remarks to be read to the audience. Dr. Aaron Shirley represented the Working Group.

DATA

Are you male or female?

27.0%	1	Male
73.0%	2	Female

How old are you?

4.5%	1	Under 25
27.0%	2	25 to 44
52.8%	3	45 to 64
15.7%	4	Over 65

Are you Hispanic or Latino?

6.7%	1	Yes
87.8%	2	No
5.6%	3	No Response

Which of these groups best represents your race?

59.1%	1	White
31.2%	2	Black or African American
2.2%	3	Asian
0.0%	4	Native Hawaiian or Pacific Islander
1.1%	5	American Indian or Alaska Native
4.3%	6	Other
2.2%	7	Decline to answer

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

1.1%	1	Elementary (grades 1 to 8)
3.3%	2	Some high school
8.7%	3	High school graduate or GED
16.3%	4	Some college
3.3%	5	Associate Degree
29.3%	6	Bachelor's Degree
37.0%	7	Graduate or professional degree
1.1%	8	Decline to answer

What is your primary source of health care coverage?

62.4%	1	Employer-based insurance
10.8%	2	Self-purchased insurance
0.0%	3	Veterans'
11.8%	4	Medicare
0.0%	5	Medicaid
1.1%	6	Other
12.9%	7	None
1.1%	8	Not sure

What is your employment status?

18.9%	1	Self-employed
50.0%	2	Employed - working full time
2.2%	3	Employed - working part-time

- 8.9% 4 Not employed / currently looking for work
- 2.2% 5 Homemaker
- 17.8% 6 Other

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

- 58.8% 1 It is in a state of crisis
- 37.1% 2 It has major problems
- 4.1% 3 It has minor problems
- 0.0% 4 It does not have any problems
- 0.0% 5 No opinion

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

- 28.6% 1 To pay for everyday medical expenses
- 70.2% 2 To protect against high medical costs
- 1.2% 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?

- 10.8% 1 Access to preventative health care
- 0.0% 2 Independence
- 6.0% 3 Self-responsibility
- 4.8% 4 All should contribute (shared responsibility)
- 1.2% 5 Transparent health system
- 8.4% 6 Health education
- 22.9% 7 Equal access
- 2.4% 8 Ethical decision-making
- 9.6% 9 Holistic (mind and spirit)
- 33.7% 10 Affordability

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.]

- 92.0% 1 Yes
- 8.0% 2 No

Which of the following statements most accurately represents your views?

- 18.9% 1 Providing coverage based on who you are (for example, people who have coverage through their employers or people who qualify for public programs because of age or because they are poor) as is the case currently
- 81.1% 2 Defining a level of services for everyone, regardless of their status, but with coverage assured only for that defined set of services
- 0.0% 3 Unsure

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?

22.5%	1	Non-traditional modes of health care (alternative and complimenting traditional coverage)
13.8%	2	Vision
11.3%	3	Health care education (including diet and nutrition)
11.3%	4	Home care and support for caregivers
3.8%	5	Women's health care (OB/GYN)
8.8%	6	Enabling services to encourage healthy lifestyles
8.8%	7	Comprehensive dental (including preventive)
2.5%	8	Behavioral health care
11.3%	9	Nurse practitioners, midwives, licensed health care professionals
6.3%	10	Necessary medical equipment and appliances

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

1.3%	1	Preventive healthcare
10.0%	2	Limit prescription drugs to generics when available
70.0%	3	Cosmetic surgery (non medically necessary)
10.0%	4	ER visits that are not emergency
8.8%	5	Chiropractic

Who ought to decide what is in a basic benefits package?

1.2%	1	Government
3.7%	2	Medical professionals
1.2%	3	Insurance companies
1.2%	4	Employers
23.5%	5	Consumers
69.1%	6	A combination of above

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	Pre-existing conditions excluded from policy
--	2	Rural areas being underserved
--	3	Up-front cost requirements (limits access)
--	4	Maximum benefit caps
--	5	Timeliness of getting appointments
--	6	Physical barriers and transportation
--	7	Lack of specialized providers
--	8	Limit of insurance approval
--	9	Not being able to be classified
--	10	Limited access to other health care professionals

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	Cultural barriers and language
--	2	Lack of culturally competent and sensitive health care workforce

- 3 Difficulty in finding providers accepting Medicare patients
- 4 Patient-physician determination of care
- 5 Professionals leaving the practice due to malpractice
- 6 Conflict between private insurance and Medicaid
- 7 Lack of cohesive relationships between providers
- 8 Have to see too many doctors

In getting health care, what is most important to you?

- 1 Well-child screening
- 2 Getting what you need, when you need it at a reasonable cost
- 3 Keep doctors when changing insurance
- 4 Time-intensive care (more time with providers)
- 5 Culturally competent care (e.g. more training for non-minority providers)
- 6 Senior care
- 7 Consumer choice of care providers
- 8 Accurate diagnosis of treatment
- 9 Consistency
- 10 Confidentiality of medical treatment history

In getting health care, what is most important to you?

- 1 Chronic illness
- 2 Health care for all (provide for each other)
- 3 System for patient advocacy
- Automate the health care system as much as possible (e.g. electronic medical records)
- 4 records)

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

- 80.4% 1 Yes
- 19.6% 2 No

Should some people be responsible for paying more than others?

- 72.4% 1 Yes
- 27.6% 2 No

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

- 11.9% 1 Everyone should pay the same
- 1.2% 2 Family size
- 27.4% 3 Health behaviors
- 32.1% 4 Income
- 27.4% 5 Other

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

- 61.8% 1 Yes
- 38.2% 2 No

Do you think government resources should be used to continue current programs that cover some people who can't otherwise afford it?

- 90.7% 1 Yes
- 9.3% 2 No

On a scale from 1 (strongly disagree) to 4 (strongly agree), please rate your agreement with the

following responsibilities of individuals and families in paying for health care.

- 2nd 3.314 Maintain healthy behaviors (incentives and disincentives)
- 7th 3.036 Pay based on ability to pay
- 4th 3.187 Community service as a form of payment for those who cannot afford to pay
- 3rd 3.194 Purchase insurance (tax credits to individuals instead of businesses)
Everyone has to pay something based on how they are utilizing services (based on
- 5th 3.123 lifestyles)
- 8th 1.968 Create neighborhood health watch group (model health citizens)
- 6th 3.101 Employees whose employers offer insurance required to enroll in at least a basic plan
- 9th 1.421 We are already doing what we can
- 1st 3.580 Ask to see the bills (more transparency of cost)

Which of these steps is the most important to take in order to slow the growth of health care costs in America?

- 1 Drug companies stop advertising drugs
- 2 Research on what is causing us to get sicker
- 3 Cap on medical malpractice lawsuits
- 4 A single plan (co-op) that covers all residents, provides for early intervention and preventive care is an investment that will save money in long run
- 5 Percentage of ticket sales to sporting events and all entertainment venues into a national health fund
- 6 Legalize and open purchasing of prescription drugs on global market
- 7 Minimize duplication of paperwork and admin costs
- 8 More utilization of health information technology
- 9 Every family should go to a health care center and learn about what it means to be healthy
- 10 Cap the amount of care and tie to provider payments

Which of these steps is the most important to take in order to slow the growth of health care costs in America?

- 1 Tax people who are engaging in unhealthy lifestyles
- 2 Use cost-accounting systems like other businesses to determine true cost
- 3 Consumer-driven cost control
- 4 Realistic limits on end-of-life care
- 5 Get private insurance out of the system
- 6 Make healthy lifestyles more affordable
- 7 Incentives or other tax deductions for healthy lifestyles
- 8 Controls on medical malpractice
- 9 Limit tax deductions for employer-provided coverage to a basic package
- 10 Require doctors to post prices in lobbies

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?

- 44.6% 1 \$0
- 8.1% 2 \$1 - \$100
- 10.8% 3 \$100 - \$299
- 9.5% 4 \$300 - \$999
- 16.2% 5 \$1000 or more
- 10.8% 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.

5 th	6.597	Guaranteeing that there are enough health care providers, especially in areas such as inner cities & rural areas
1 st	8.227	Investing in public health programs to prevent disease, promote healthy lifestyles, and protect the public in the event of epidemics or disasters
4 th	7.345	Guaranteeing that all Americans have health insurance
8 th	6.250	Funding the development of computerized health information to improve the quality & efficiency of health care
7 th	6.306	Funding programs that help eliminate problems in access to or quality of care for minorities
6 th	6.475	Funding biomedical & technological research that can lead to advancements in the treatment & prevention of disease
2 nd	7.753	Guaranteeing that all Americans get health care when they need it, through public safety net" programs (if they can not afford it)."
3 rd	7.366	Preserving Medicare & Medicaid

Some believe that fixing the health care system will require tradeoffs from everyone – e.g. hospitals, employers, insurers, consumers, government agencies. What could be done -- and by whom? And which of these trade-offs do you support the most?

- 1 Less profit for businesses benefiting from unhealthy lifestyles
- 2 Less corporate profit to benefit consumer
- 3 Give up information from drug companies in exchange for doctors making decisions
- 4 Give up some convenience for quality
- 5 Pay higher deductible for more choice
- 6 Tie health benefits to those received by Congress
- 7 Defense spending as a fixed percentage of health cost
- 8 Seeing physicians less in exchange for other health care professionals more
- 9 Willing to trade off full-ride athletic scholarships for medical scholarships
- 10 Willing to give blood and test cholesterol in exchange for tax breaks

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).

6 th	6.039	Offer uninsured Americans income tax deductions, credits, or other financial assistance to help them purchase of private health insurance on their own.
10 th	4.311	Expand state government programs for low-income people (e.g. Medicaid & S-CHIP) to provide coverage for more people without health insurance.
9 th	4.658	Rely on free-market competition among doctors, hospitals, other health care providers and insurance companies rather than having government define benefits and set prices.
3 rd	7.152	Open up enrollment in national federal programs like Medicare or the federal employees' health benefit program
4 th	6.776	Expand current tax incentives available to employers & their employees to encourage employers to offer insurance to more workers & families
8 th	5.697	Require businesses to offer health insurance to their employees
2 nd	7.298	Expand neighborhood health clinics
5 th	6.704	Create a national health insurance program, financed by taxpayers, in which all Americans would get their insurance
1 st	7.618	Require that all Americans enroll in basic health care coverage, either private or public
7 th	5.905	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@ahrg.hhs.gov.