Percent A
Are you male or female?
40.6%  1 Male
59.4%  2 Female

Percent B
How old are you?
3.9%  1 Under 25
19.9%  2 25 to 44
56.3%  3 45 to 64
19.9%  4 Over 65

Percent C
Are you Hispanic or Latino?
4.3%  1 Yes
89.0%  2 No
6.7%  3 No Response

Percent D
Which of these groups best represents your race?
78.9%  1 White
2.4%  2 Black or African American
1.0%  3 Asian
0.5%  4 Native Hawaiian or Pacific Islander
1.4%  5 American Indian or Alaska Native
5.3%  6 Other
10.5%  7 Decline to answer

Percent E
What is the highest grade or year of school you completed?
1.0%  1 Elementary (grades 1 to 8)
0.0%  2 Some high school
2.4%  3 High school graduate or GED
11.5%  4 Some college
5.8%  5 Associate Degree
29.8%  6 Bachelor's Degree
Percent F

What is your primary source of health care coverage?

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Option</th>
</tr>
</thead>
<tbody>
<tr>
<td>58.2%</td>
<td>1 Employer-based insurance</td>
</tr>
<tr>
<td>11.7%</td>
<td>2 Self-purchased insurance</td>
</tr>
<tr>
<td>1.9%</td>
<td>3 Veterans’</td>
</tr>
<tr>
<td>16.4%</td>
<td>4 Medicare</td>
</tr>
<tr>
<td>1.4%</td>
<td>5 Medicaid</td>
</tr>
<tr>
<td>4.7%</td>
<td>6 Other</td>
</tr>
<tr>
<td>5.2%</td>
<td>7 None</td>
</tr>
<tr>
<td>0.5%</td>
<td>8 Not sure</td>
</tr>
</tbody>
</table>

Percent G

What is your employment status?

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Option</th>
</tr>
</thead>
<tbody>
<tr>
<td>12.9%</td>
<td>1 Self-employed</td>
</tr>
<tr>
<td>45.3%</td>
<td>2 Employed - working full time</td>
</tr>
<tr>
<td>6.5%</td>
<td>3 Employed - working part-time</td>
</tr>
<tr>
<td>5.5%</td>
<td>4 Not employed / currently looking for work</td>
</tr>
<tr>
<td>1.5%</td>
<td>5 Homemaker</td>
</tr>
<tr>
<td>28.4%</td>
<td>6 Other</td>
</tr>
</tbody>
</table>

Percent H

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

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Option</th>
</tr>
</thead>
<tbody>
<tr>
<td>79.7%</td>
<td>1 It is in a state of crisis</td>
</tr>
<tr>
<td>19.3%</td>
<td>2 It has major problems</td>
</tr>
<tr>
<td>0.5%</td>
<td>3 It has minor problems</td>
</tr>
<tr>
<td>0.5%</td>
<td>4 It does not have any problems</td>
</tr>
<tr>
<td>0.0%</td>
<td>5 No opinion</td>
</tr>
</tbody>
</table>

Percent I

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

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Option</th>
</tr>
</thead>
<tbody>
<tr>
<td>27.1%</td>
<td>1 To pay for everyday medical expenses</td>
</tr>
<tr>
<td>36.2%</td>
<td>2 To protect against high medical costs</td>
</tr>
<tr>
<td>36.7%</td>
<td>3 No opinion</td>
</tr>
</tbody>
</table>
Percent J

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?

1. All in, nobody out
2. Strong emphasis on preventive care
3. Affordable
4. Universal health care as a right
5. Quality with comprehensive coverage
6. Equal access to a core set of evidence-based practices
7. Social responsibility
8. Emphasis on choice
9. Culturally competent and consumer friendly
10. Simplicity/understandable

Percent K

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.]

97.1%  1 Yes
2.9%  2 No

Percent L

Which of the following statements most accurately represents your views?

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

6.8%  1 now
93.2%  2 system

Intro M-x

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 copayments 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?

Percent M-1
Of the most frequent answers the group gave, what would you add?
28.1%  1 Evidence-based alternative care
10.4%  2 Hospice care
17.0%  3 Expanded dental coverage
10.4%  4 Family planning services
  5.9%  5 Home care services (e.g. nutrition)
  6.7%  6 Eye care
  3.0%  7 Right-to-die provisions
  5.9%  8 Self-management of insurance
11.9%  9 Education (including chronic conditions)
  0.7% 10 Hearing care

Percent M-2
Of the most frequent answers the group gave, what would you add?
28.6%  1 Smoking cessation
10.3%  2 Comprehensive preventive care
16.7%  3 Long-term care
11.1%  4 Preventive mental health services
  5.6%  5 Medical supplies and equipment (esp. for home care)
  4.8%  6 Nutritional services
  3.2%  7 Financing to providers for portable records
  6.3%  8 Gene therapy
12.7%  9 Naturopathic remedies
  0.8% 10 Organ transplants

Percent M-3
Of the most frequent answers the group gave, what would you take out?
33.9%  1 Nothing
16.9%  2 Chiropractic care
12.4%  3 Trim certain elements within each area
15.8%  4 Eliminate waste
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?

<table>
<thead>
<tr>
<th>Rank</th>
<th>Stakeholder</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st</td>
<td>Consumers</td>
</tr>
<tr>
<td>2nd</td>
<td>Medical professionals</td>
</tr>
<tr>
<td>3rd</td>
<td>Federal government</td>
</tr>
<tr>
<td>4th</td>
<td>State and/or local government</td>
</tr>
<tr>
<td>5th</td>
<td>Employers</td>
</tr>
<tr>
<td>6th</td>
<td>Insurance companies</td>
</tr>
</tbody>
</table>

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. Insurance bureaucracy slowing down care
2. Limited coverage
3. INS services make it risky for undocumented aliens
4. Transportation/location
5. Lack of facilities in rural areas
6. Discrimination (race, ethnicity etc)
7. Lack of access to specialist outside of network
8. Lack of control over care
9. Being uninsured or underinsured (cost)
10. Self-employed

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. Lack of purchasing power for small businesses (to compete with large firms)
2. Copays and deductibles
3. Pre-existing conditions
4. Lack of national plan

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

1. Affordable and universal access to health care
In getting health care, what is most important to you?

- 1 Education for all
- 2 Easy access to supplements and vitamins
- 3 Preventive care
- 4 Privacy and confidentiality
- 5 Consistent payment
- 6 Eliminate existing conditions as criteria
- 7 Access to primary care
- 8 Everyone should have a regular provider (primary care physician/medical home)
- 9 Disconnect health care from employment
- 10 Eliminate corporate profit

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

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>76.8%</td>
<td>1 Yes</td>
<td>2 No</td>
</tr>
<tr>
<td>23.2%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Should some people be responsible for paying more than others?

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>77.0%</td>
<td>1 Yes</td>
<td>2 No</td>
</tr>
<tr>
<td>23.0%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>32.2%</td>
<td>1 Yes</td>
<td>2 No</td>
</tr>
<tr>
<td>67.8%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Rank S-x

What should the responsibilities of individuals and families be in paying for health care?

- S-1 Pay taxes to fund it
- S-2 Live healthy lifestyles
- S-3 Pay affordable copays and deductibles
- S-4 Responsibility to choose good providers
- S-5 Pay progressive taxes (combined with corporate taxes)
- S-6 Copay system based on sliding scale
- S-7 Participate in public health education system (and teach)

T-1

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

- 1 Subsidized medical education in exchange for public service in certain communities where they are needed
- 2 Managed care / case management (lessons from HMOs)
- 3 Prevention
- 4 Doctors and nurses in public schools to support more healthy lifestyles, etc.
- 5 One claim form, one card, one processing system (reduce administrative costs)
- 6 Regulate provider profits
- 7 Eliminate advertising by pharmaceuticals
- 8 Combine resources into one pool
- 9 Emphasize training for diverse workforce
- 10 National system will reduce cost (e.g. ambulatory care)

T-2

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

- 1 Changing model reduces administrative costs
- 2 Right-to-die initiative to reduce end-of-life costs
- 3 Invest public resources in encouraging more healthy lifestyles
- 4 Change management structure (more local) -- national standards and local management
- 5 Respect cultural values on end-of-life care
- 6 FDA as guardian of people against industry
- 7 Technology assessment
- 8 Increase taxes on smoking and gasoline
- 9 Teach living well with chronic conditions
10 Expand use of information technology to reduce cost and improve care

T-3
Which of these steps is the most important to take in order to slow the growth of health care costs in America?
-- 1 Take non-emergent care out of ER
-- 2 No competition under Medicare part D
-- 3 More transparent process to limit profits
-- 4 Reduce or eliminate insurance company profits

Percent X-x
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.

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

Percent Y
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 Give up Medicare/Medicaid for a basic benefits package for all
-- 2 Foreign aid investment for greater spending on health care
-- 3 Give up tax breaks for the wealthy in exchange for more childrens' health care
-- 4 Fewer dollars for space exploration for more spending on health care

Rank Z-x
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).

9th  Z-1 Offer uninsured Americans income tax deductions, credits, or other financial assistance to help them purchase
     of private health insurance on their own.
     Expand state government programs for low-income people (eg. Medicaid & S-CHIP) to provide coverage for
7th  Z-2 more people without health insurance.
     Rely on free-market competition among doctors, hospitals, other health care providers and insurance
10th Z-3 companies rather than having government define benefits and set prices.

4th  Z-4 Open up enrollment in national federal programs like Medicare or the federal employees’ health benefit program
     Expand current tax incentives available to employers & their employees to encourage employers to offer
8th  Z-5 insurance to more workers & families
6th  Z-6 Require businesses to offer health insurance to their employees
2nd  Z-7 Expand neighborhood health clinics
     Create a national health insurance program, financed by taxpayers, in which all Americans would get their
1st  Z-8 insurance
3rd  Z-9 Require that all Americans enroll in basic health care coverage, either private or public
     Increase flexibility afforded states in how they use federal funds for state programs (such as Medicaid and S-
5th  Z-10 CHIP) to maximize coverage