

Chartpack

The Kaiser Family Foundation/Harvard School of Public Health

National Survey on Consumer Experiences With and Attitudes Toward Health Plans

August 2001

Section I:
Experiences With Health Plans
(among privately insured adults ages 18 to 64)

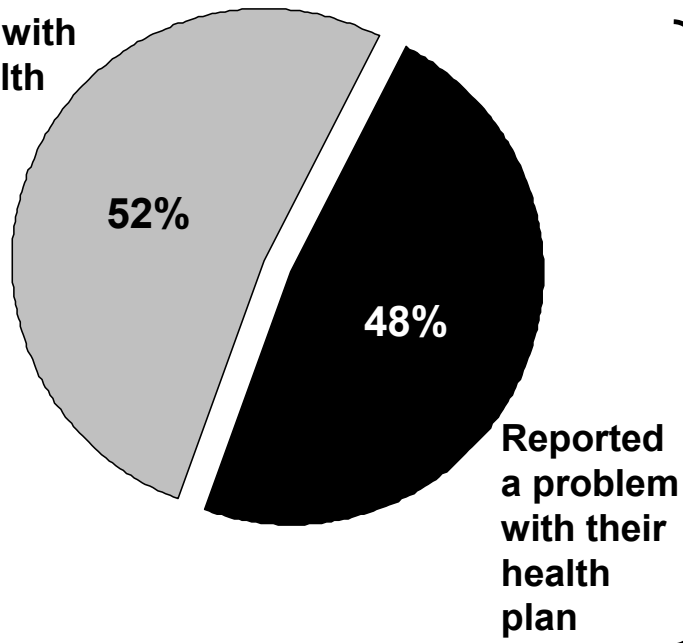
Chart 1

About Half of Insured Adults Report Some Kind of Problem With Their Health Plan Over the Past Year

(among privately insured adults ages 18 to 64)

Percent of insured adults under age 65 who...

Did not
report a
problem with
their health
plan



Type of Problem that Occurred Most Recently

13% Delays or denials of coverage or care

13% Billing or payment problems

10% Difficulty seeing a physician

8% Communication or customer service problems

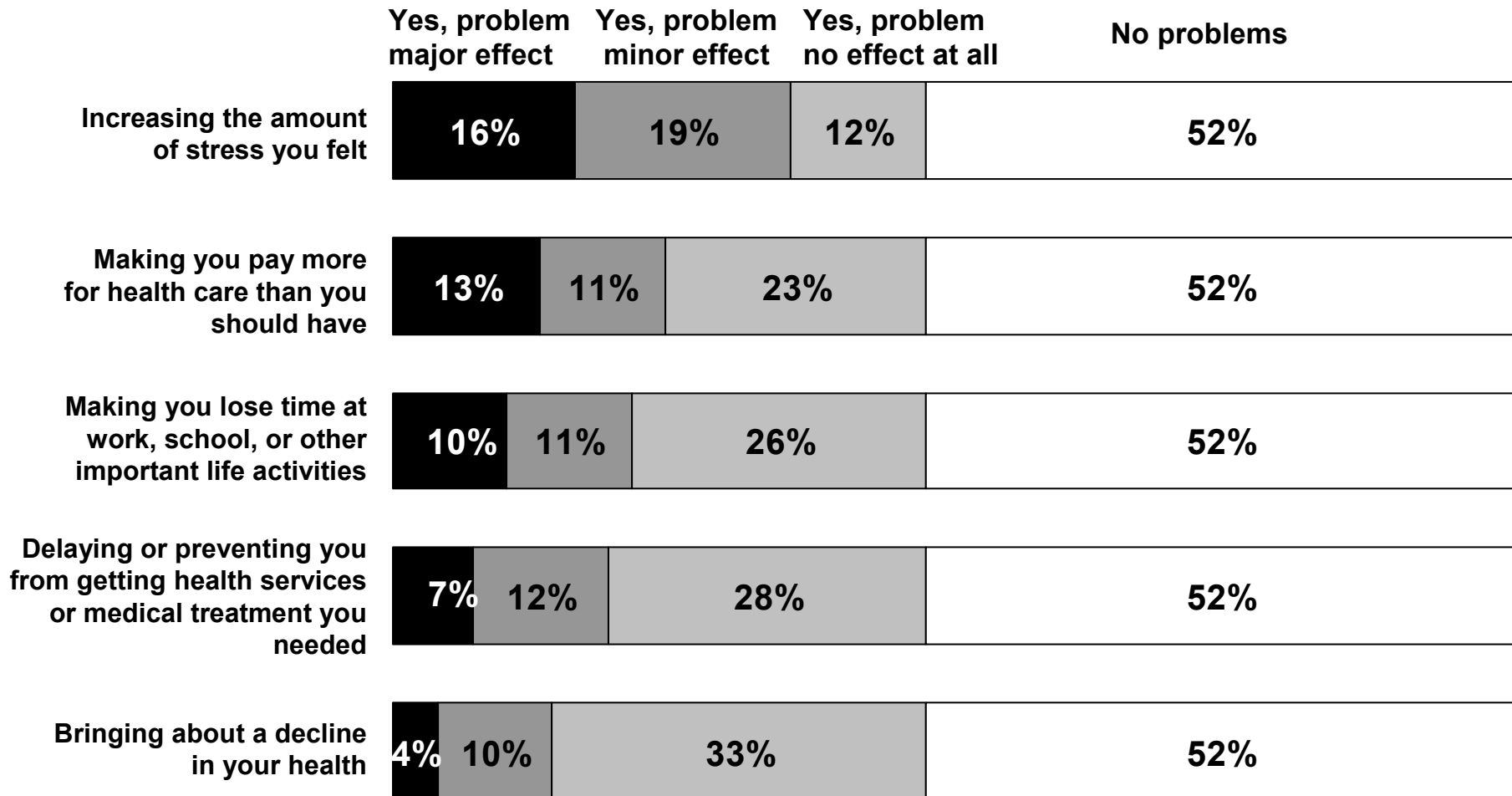
4% Problem type unspecified

Chart 2

How much effect, if any, did the problem have in terms of...

(among privately insured adults ages 18 to 64)

Did it have a major effect, a minor effect, or no effect at all in...?



Note: Don't know not shown

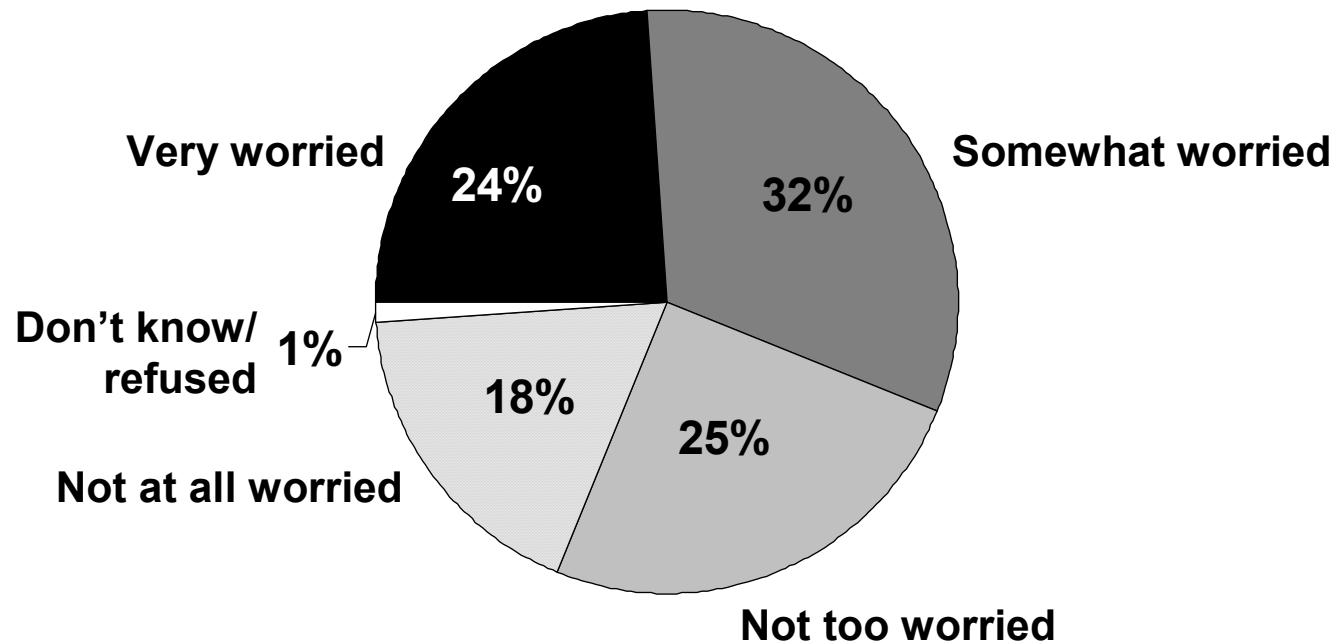
Source: Kaiser Family Foundation/Harvard School of Public Health *National Survey on Consumer Experiences With and Attitudes Toward Health Plans*, August 2001 (conducted July-August 2001).

Chart 3

Worry About Health Plans

(among privately insured adults ages 18 to 64)

Percent who say they are worried that “If [they] become sick—their health plan will be more concerned about saving money than providing the best treatment”



Source: Kaiser Family Foundation/Harvard School of Public Health *National Survey on Consumer Experiences With and Attitudes Toward Health Plans*, August 2001 (conducted July-August 2001).

Chart 4

Worry about Health Plan, by Type of Plan

(among privately insured adults ages 18 to 64)

Percent by type of health plan, who say they are worried that “If [they] become sick—their health plan will be more concerned about saving money than providing the best treatment”

	<u>“Very” Worried</u>	<u>“Somewhat” Worried</u>	<u>“Not Too” Worried</u>	<u>“Not at All” Worried</u>
Total for Managed Care	25%	34%	25%	16%
“Strict” Managed Care	31%	36%	21%	11%
“Loose” Managed Care	21%	32%	28%	19%

Chart 5

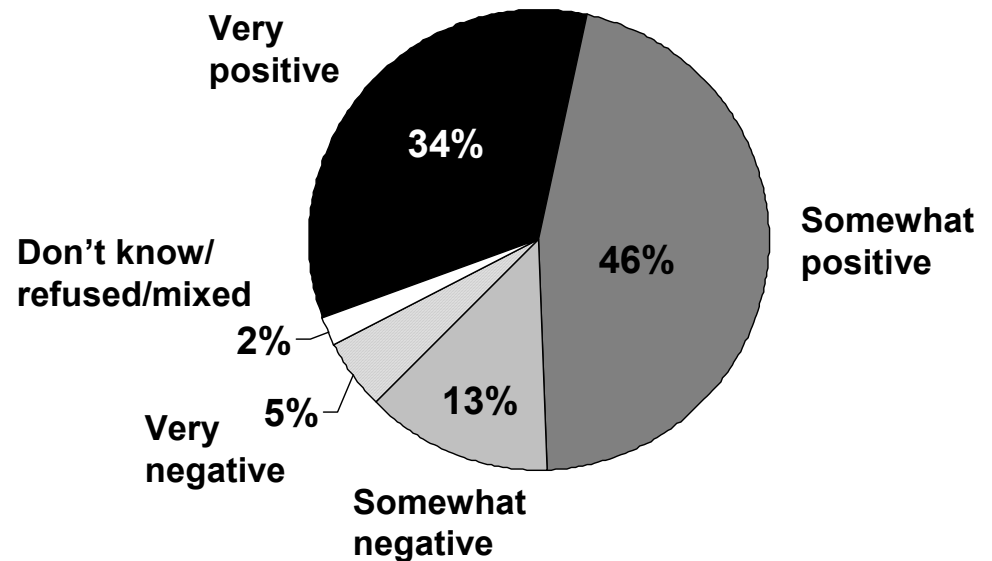
Contact With Health Plans Is a Common and Generally Positive Experience

(among privately insured adults ages 18 to 64)

Percent who in the past year contacted their health plan...



Of those who contacted their plan, the percent who say their recent experiences in dealing with their health plan have been...



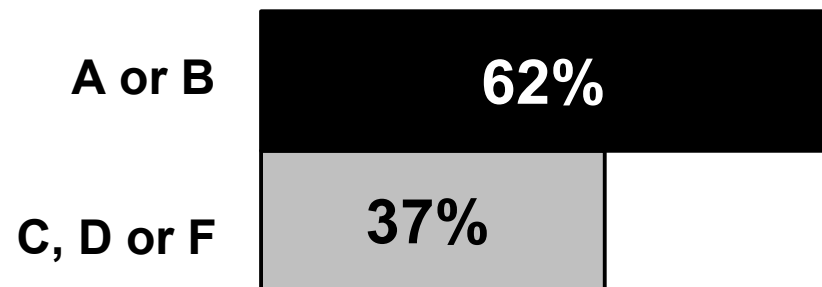
Source: Kaiser Family Foundation/Harvard School of Public Health *National Survey on Consumer Experiences With and Attitudes Toward Health Plans*, August 2001 (conducted July-August 2001).

Chart 6

Making the Grade

(among privately insured adults ages 18 to 64)

Percent of each group who give their health plan a grade of...



Note: Don't know not shown

Source: Kaiser Family Foundation/Harvard School of Public Health *National Survey on Consumer Experiences With and Attitudes Toward Health Plans*, August 2001 (conducted July-August 2001).

Chart 7

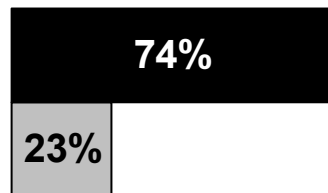
Grades Vary

(among privately insured adults ages 18 to 64)

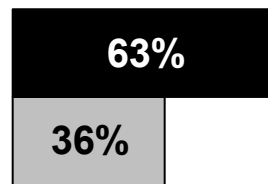
Percent of each group who give their health plan a grade of...

■ A or B ■ C, D or F

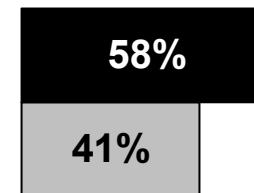
Traditional Insurance



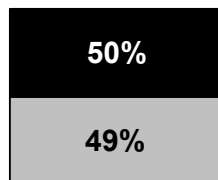
“Loose” managed care



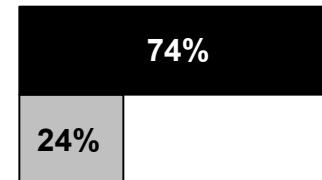
“Strict” managed care



People reporting problem



People not reporting problem



Note: Don't know not shown

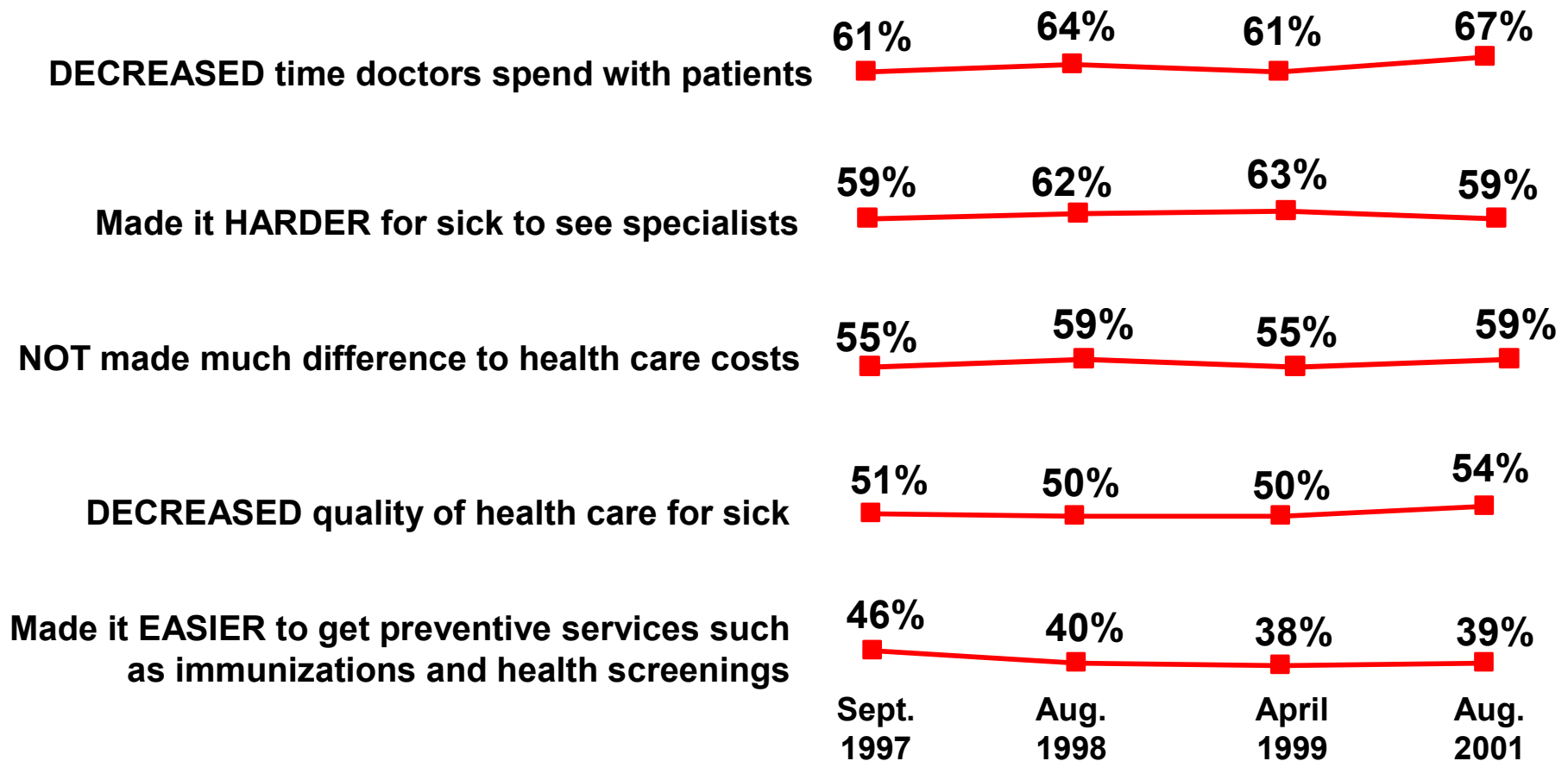
Source: Kaiser Family Foundation/Harvard School of Public Health *National Survey on Consumer Experiences With and Attitudes Toward Health Plans*, August 2001 (conducted July-August 2001).

Section II:
Attitudes Towards Health Plans

Chart 8

Impact of Managed Care

“During the past few years, HMOs and other managed care plans have...”

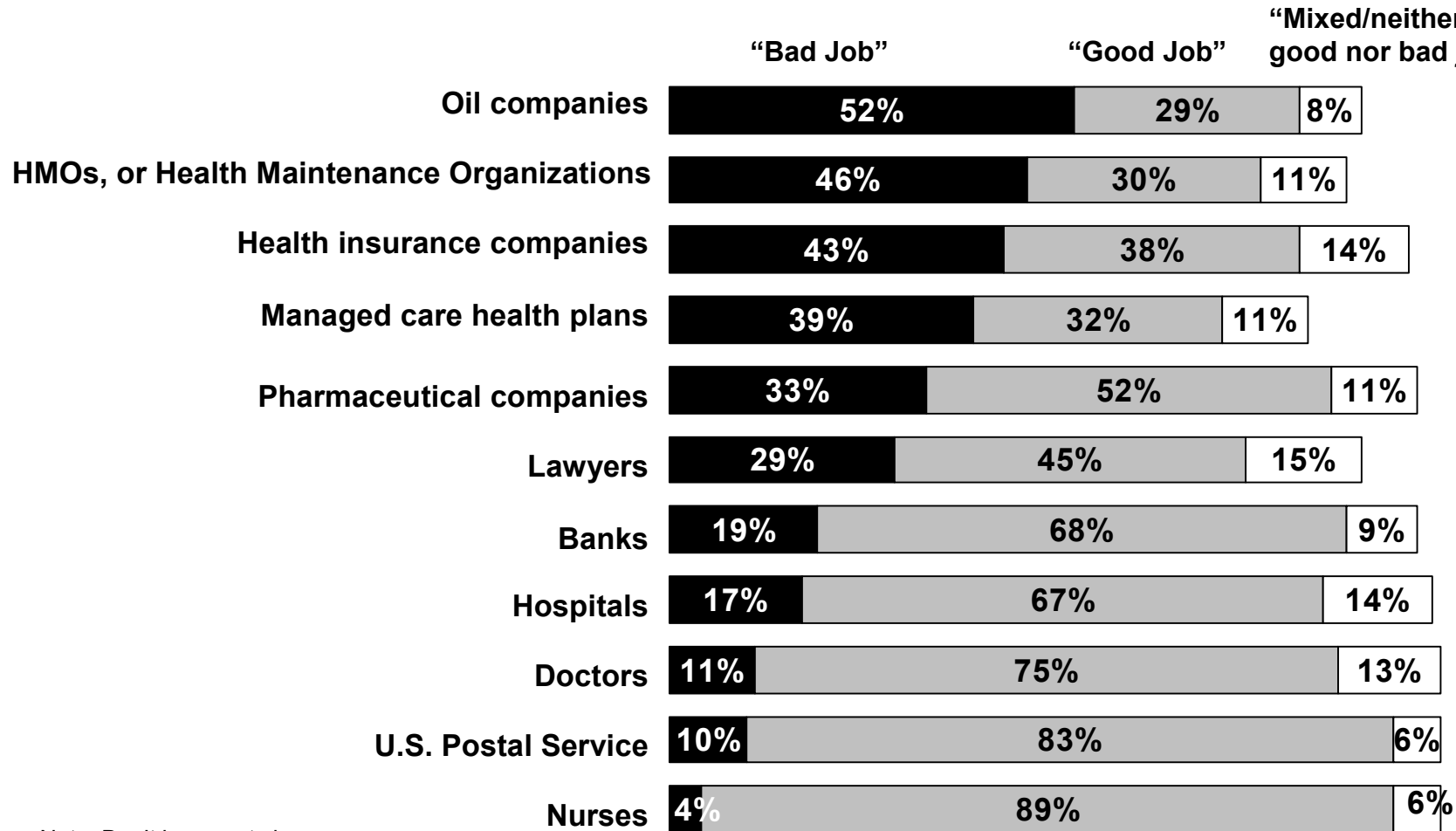


Source: Kaiser Family Foundation / Harvard School of Public Health *National Survey on Managed Care*, November 1997; Kaiser Family Foundation / Harvard School of Public Health *National Survey on Medicare*, October 1998; Kaiser Family Foundation / Harvard School of Public Health *Health News Index*, March - April 2000; Kaiser Family Foundation/Harvard School of Public Health *National Survey on Consumer Experiences With and Attitudes Toward Health Plans*, August 2001 (conducted July-August 2001).

Chart 9

Image of Industries and Groups

For each one please tell me if each of the following generally do a “good job” or a “bad job” of serving their consumers...



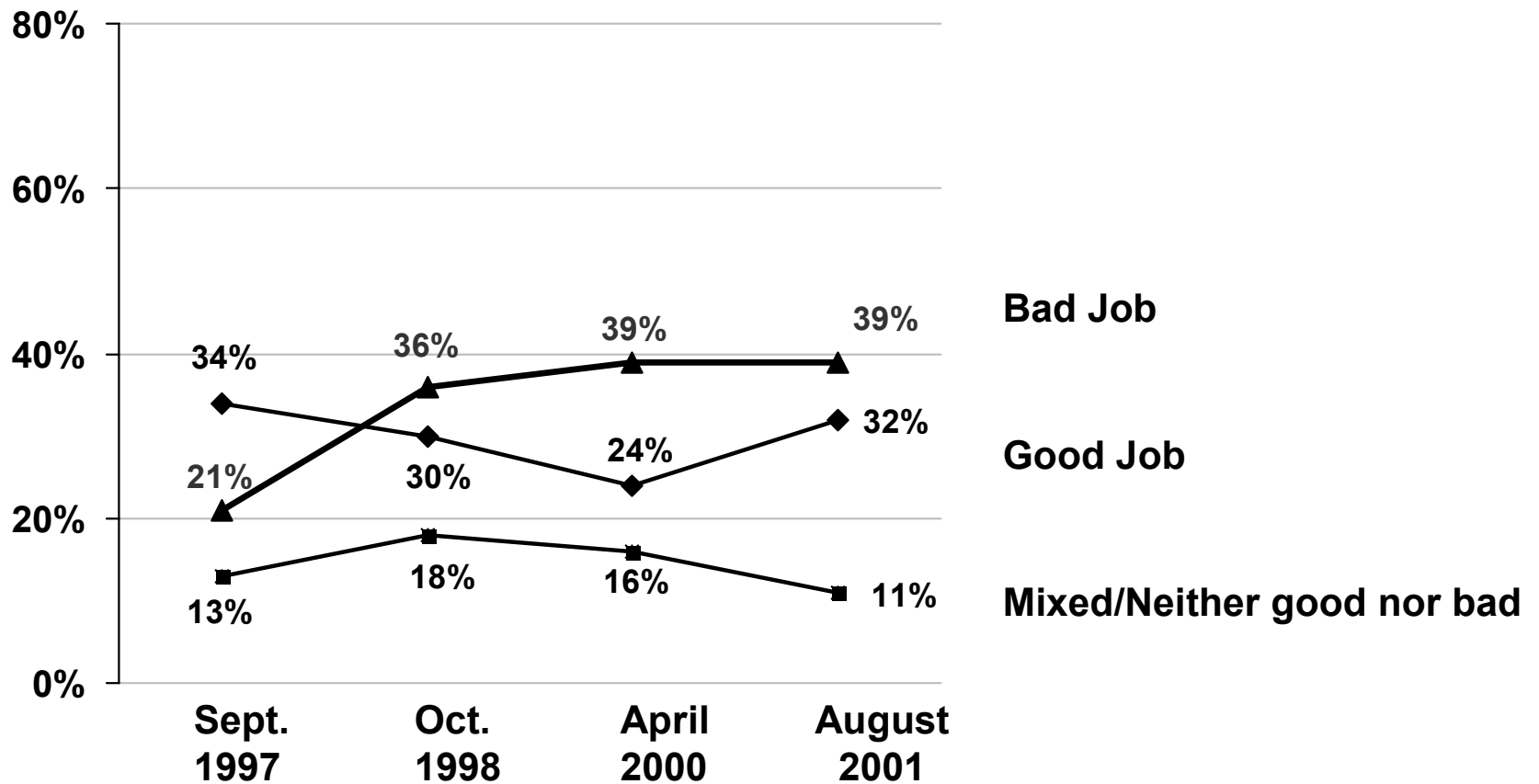
Note: Don't know not shown

Source: Kaiser Family Foundation/Harvard School of Public Health *National Survey on Consumer Experiences with and Attitudes Towards Health Plans*, August 2001 (conducted July-August 2001); Kaiser Family Foundation/Harvard School of Public Health *National Survey on Consumer Experiences With and Attitudes Toward Health Plans*, August 2001 (conducted July-August 2001).

Chart 10

Changing Views of Managed Care Plans

In general, do you think managed care health plans are doing a good job or a bad job in serving health care consumers?



Note: Don't know not shown

Source: Kaiser Family Foundation / Harvard School of Public Health *National Survey on Managed Care*, November 1997; Kaiser Family Foundation / Harvard School of Public Health *National Survey on Medicare*, October 1998; Kaiser Family Foundation / Harvard School of Public Health *Health News Index*, March - April 2000; Kaiser Family Foundation/Harvard School of Public Health *National Survey on Consumer Experiences With and Attitudes Toward Health Plans*, August 2001 (conducted July-August 2001).

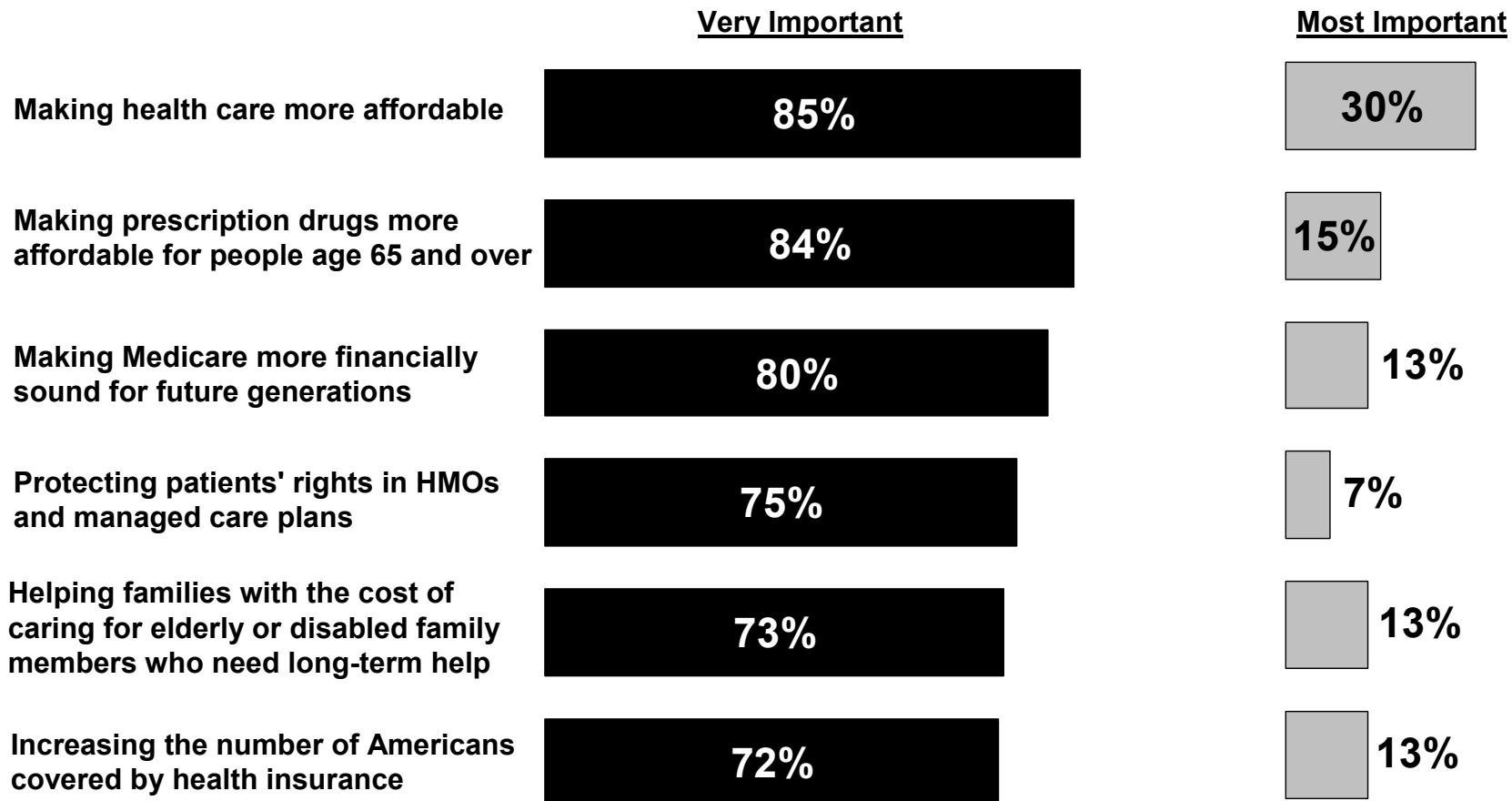
Section III:
Patients' Bill of Rights

Chart 11

Ranking Health Care Priorities

Do you think this issue is very important for the President and the Congress to deal with, somewhat important, not too important, or not at all important?

You said the following issues were very important. Which ONE of these would you say is the MOST important health care issue?

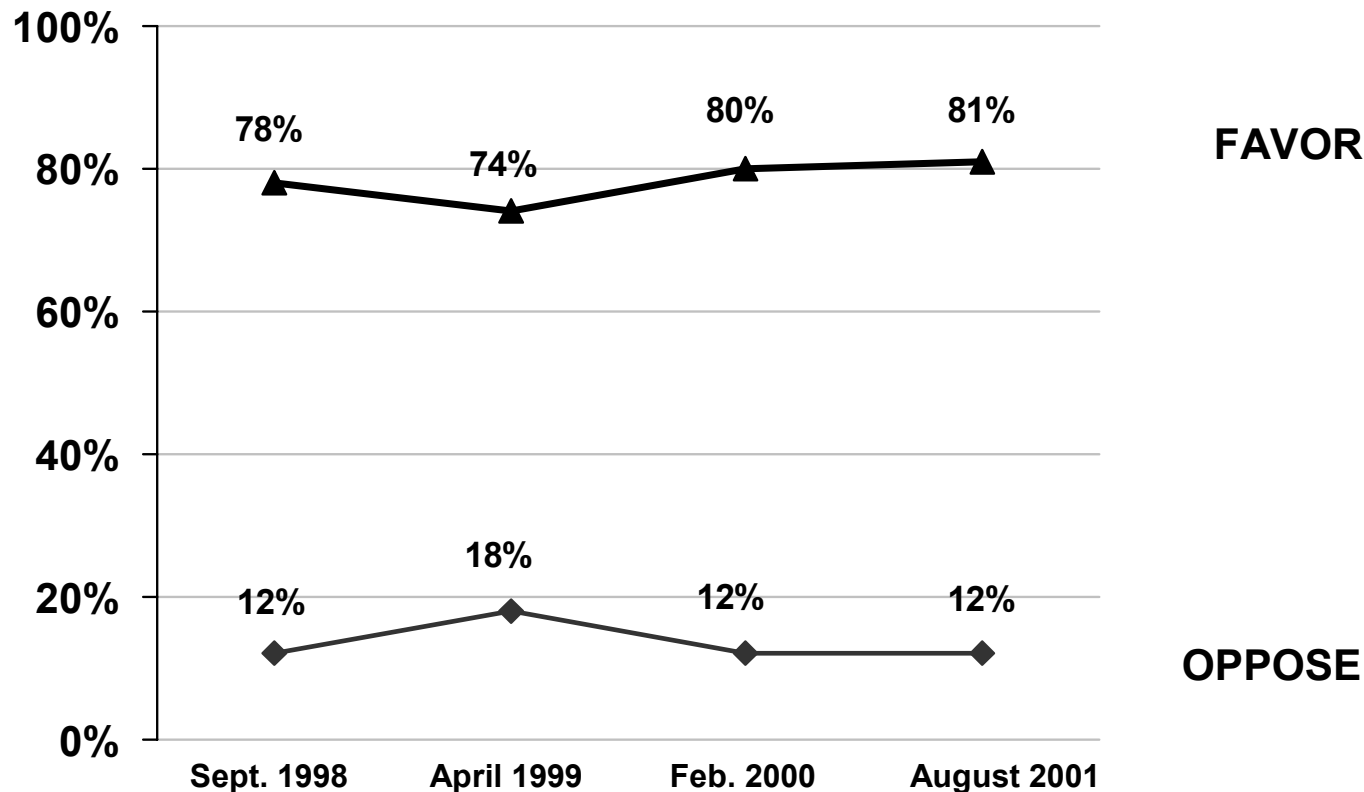


Source: Kaiser Family Foundation/Harvard School of Public Health *National Survey on Consumer Experiences With and Attitudes Toward Health Plans*, August 2001 (conducted July-August 2001).

Chart 12

Opinion on a Comprehensive Patients' Bill of Rights

“A law, called the Patients' Bill of Rights, has been proposed that would require HMOs, other managed care plans, and health insurance companies to provide people with more information about their health plan, make it easier for people to see medical specialists, allow appeals to independent reviewers when someone is denied coverage for a particular medical treatment, and give people the right to sue their health plans. Do you favor or oppose such a law?”



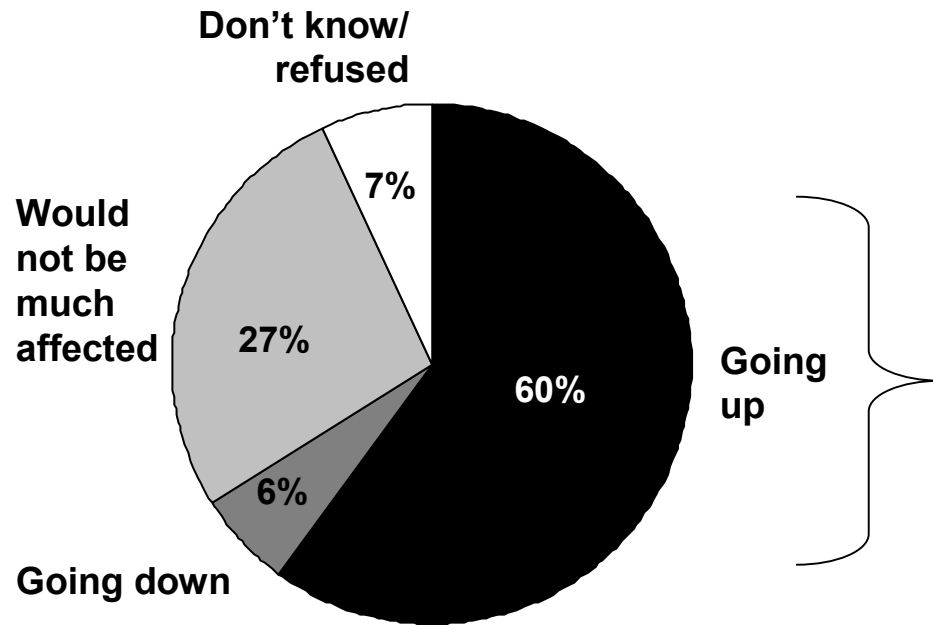
Note: Don't know not shown

Source: Kaiser Family Foundation / Harvard School of Public Health *National Survey on Managed Care*, November 1997; Kaiser Family Foundation / Harvard School of Public Health *National Survey on Medicare*, October 1998; Kaiser Family Foundation / Harvard School of Public Health *Health News Index*, March - April 2000; Kaiser Family Foundation/Harvard School of Public Health *National Survey on Consumer Experiences With and Attitudes Toward Health Plans*, August 2001 (conducted July-August 2001).

Chart 13

If the Patients' Bill of Rights were enacted, what effect- if any- do you think it would have on health insurance premiums for people like you?

Do you think it would lead to health insurance premiums...



(Among the 60% who think premiums will go up) Do you think having a Patients' Bill of Rights would be worth the increased cost of health insurance premiums, or NOT worth the increase?

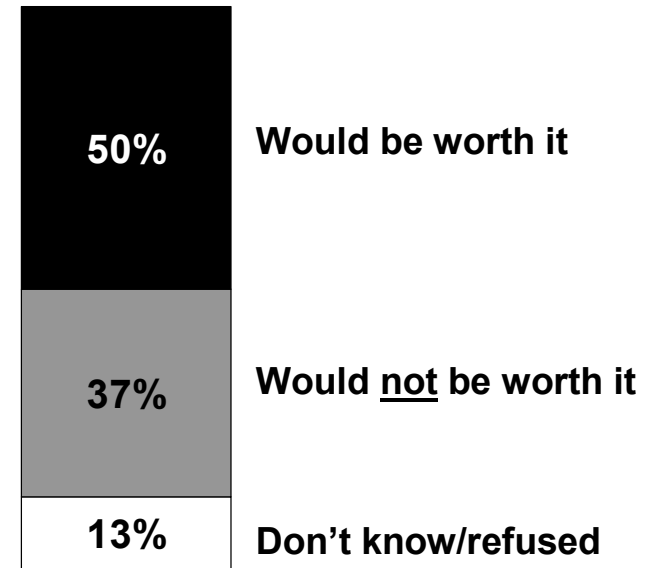
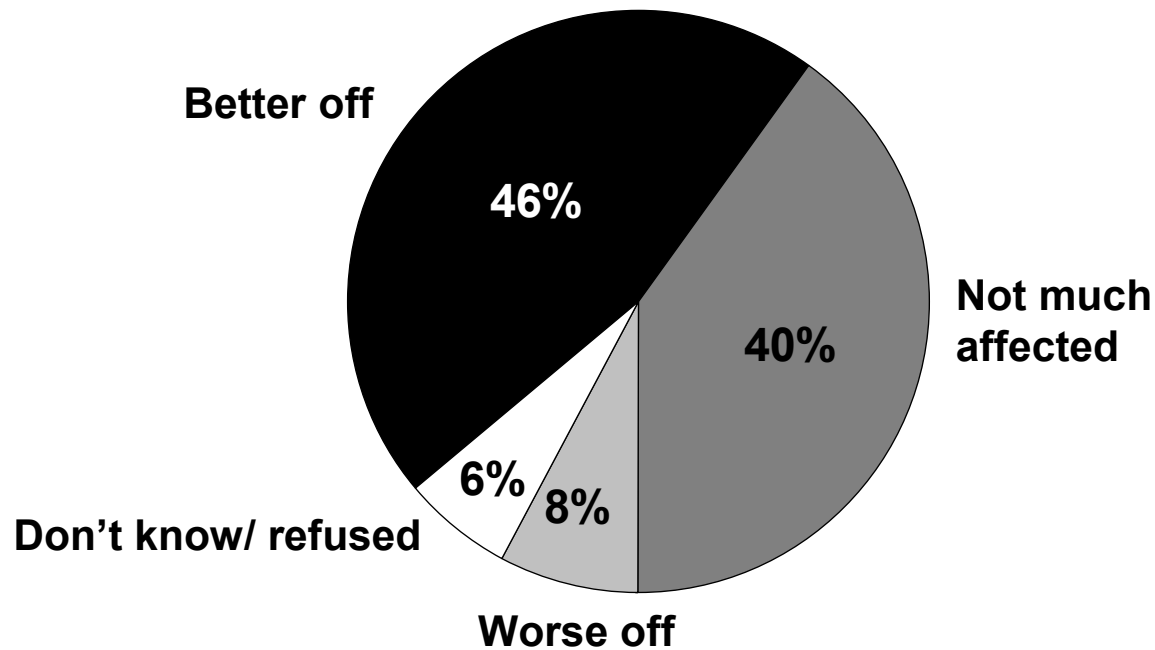


Chart 14

“If this Patients’ Bill of Rights were enacted, do you think people like you would be better off, worse off, or not affected much either way?”



Source: Kaiser Family Foundation/Harvard School of Public Health *National Survey on Consumer Experiences With and Attitudes Toward Health Plans*, August 2001 (conducted July-August 2001).

Chart 15

Criticisms Register ...



Would you still favor if...?

...you heard it would increase the cost of health insurance premiums usually shared by employers and workers by about 20 dollars per month for a typical family – that is, a little over 200* dollars per year?



...it meant that some companies might stop offering health care plans to their workers because the employers are afraid they might be sued along with the health plan?



*Possible premium increases are based on estimates prepared by the Congressional Budget Office (CBO) for Senate bill 872, cited in an April 23, 2001 letter from CBO Director Daniel L. Crippen to Senator Don Nickles, and an average family premium of \$529 per month from the 2000 Kaiser/HRET Employer Health Benefits Survey.

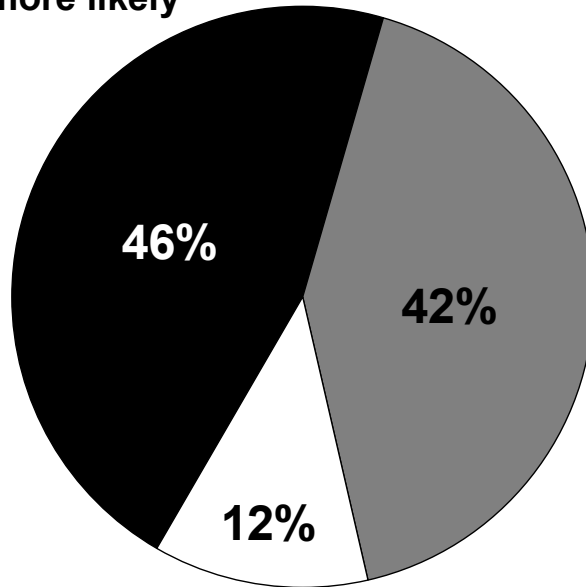
Source: Kaiser Family Foundation/Harvard School of Public Health *National Survey on Consumer Experiences With and Attitudes Toward Health Plans*, August 2001 (conducted July-August 2001).

Chart 16

If the Patients' Bill of Rights were enacted...

Do you think it would make employers more likely to STOP offering health insurance for their workers, or not?

No, would not be more likely



Don't know/
refused

Yes, would be more likely to stop offering insurance

19%

A lot more likely

22%

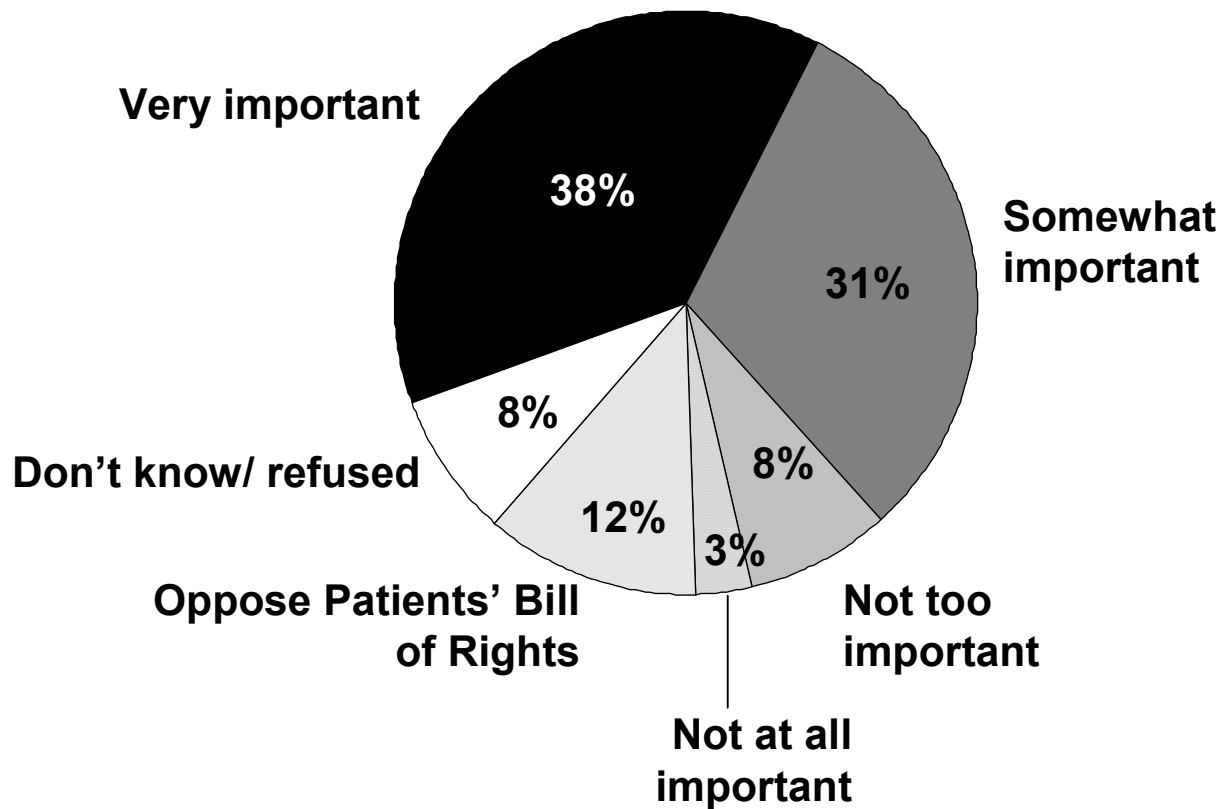
Only a little more likely

1%

Don't know how much more likely

Chart 17

How important is it to you that this law includes the right to sue a health plan?

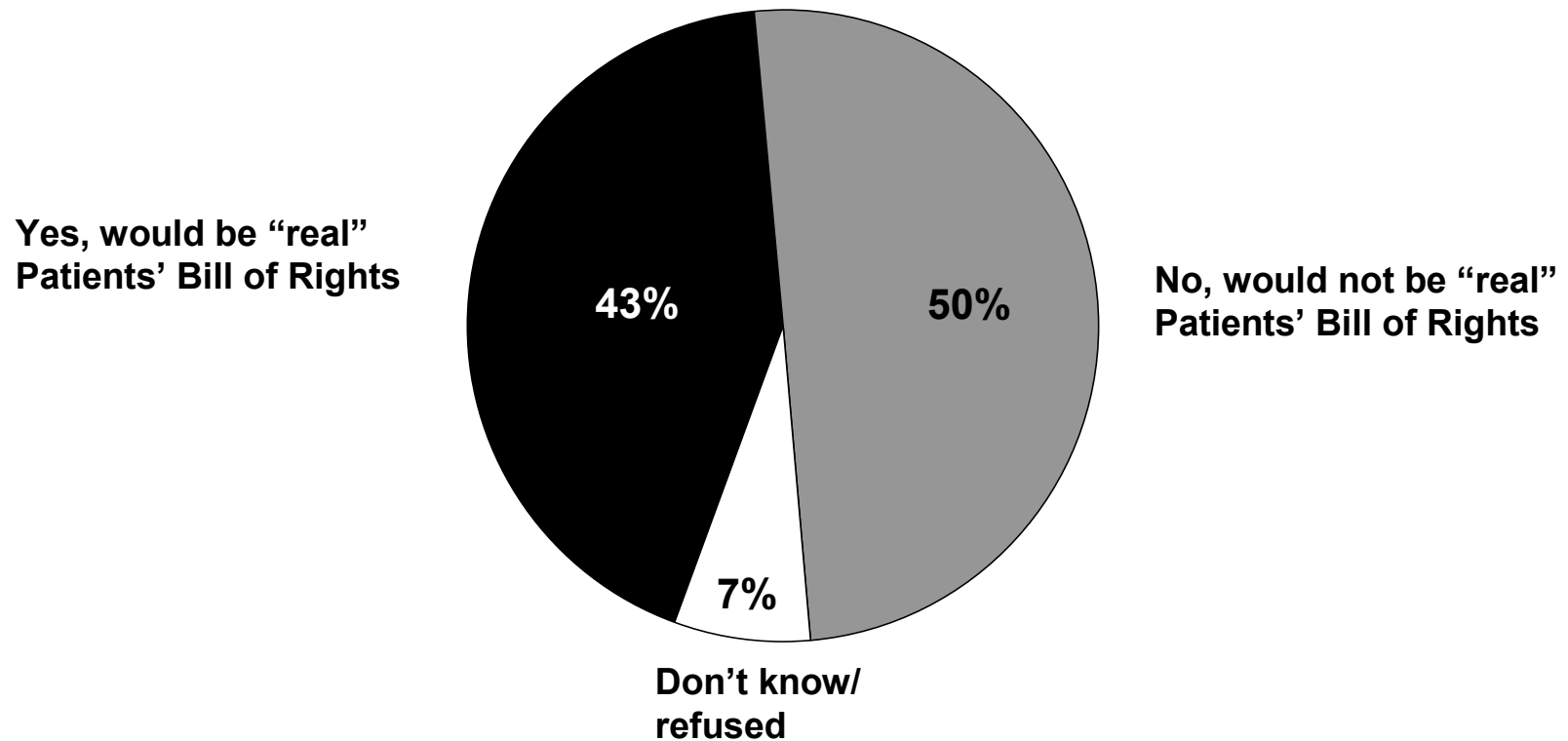


Source: Kaiser Family Foundation/Harvard School of Public Health *National Survey on Consumer Experiences With and Attitudes Toward Health Plans*, August 2001 (conducted July-August 2001).

Chart 18

A “Real” Patients’ Bill of Rights, Or Not?

“If a proposal for a Patients’ Bill of Rights did not include the right to sue your health plan, would you still consider it a “real” Patients’ Bill of Rights, or not?”



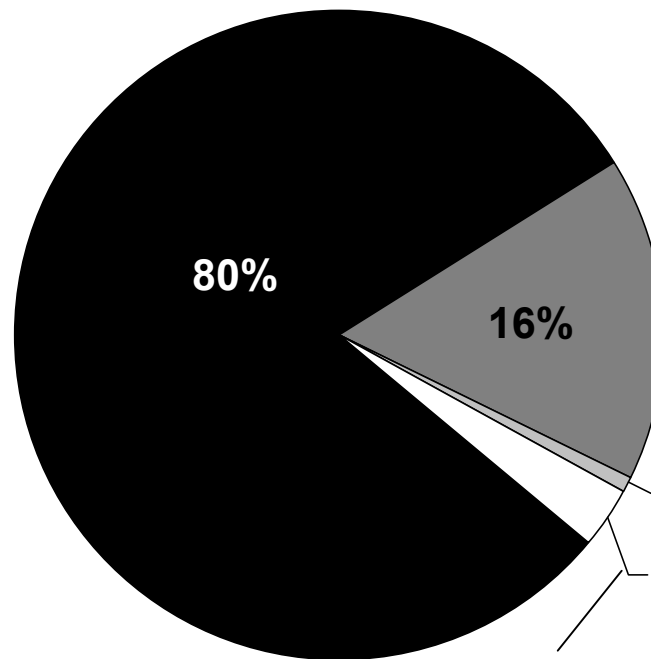
Source: Kaiser Family Foundation/Harvard School of Public Health *National Survey on Consumer Experiences With and Attitudes Toward Health Plans*, August 2001 (conducted July-August 2001).

Chart 19

Right to Sue Specifics

“Suppose the Patients’ Bill of Rights is enacted and includes the right to sue a health plan. Which ONE of the following two statements comes CLOSER to your own view of what patients should be allowed to do?”

Patients should be allowed to sue for economic losses, get a LIMITED amount of money for pain and suffering, BUT NOT get additional money to punish health plans, because this would drive up the cost of people’s health insurance premiums too much.



Patients should be allowed to sue their health plans for unlimited amounts of money to compensate them for their economic losses and pain and suffering, AND get additional money as a way of punishing health plans and discouraging bad conduct in the future.

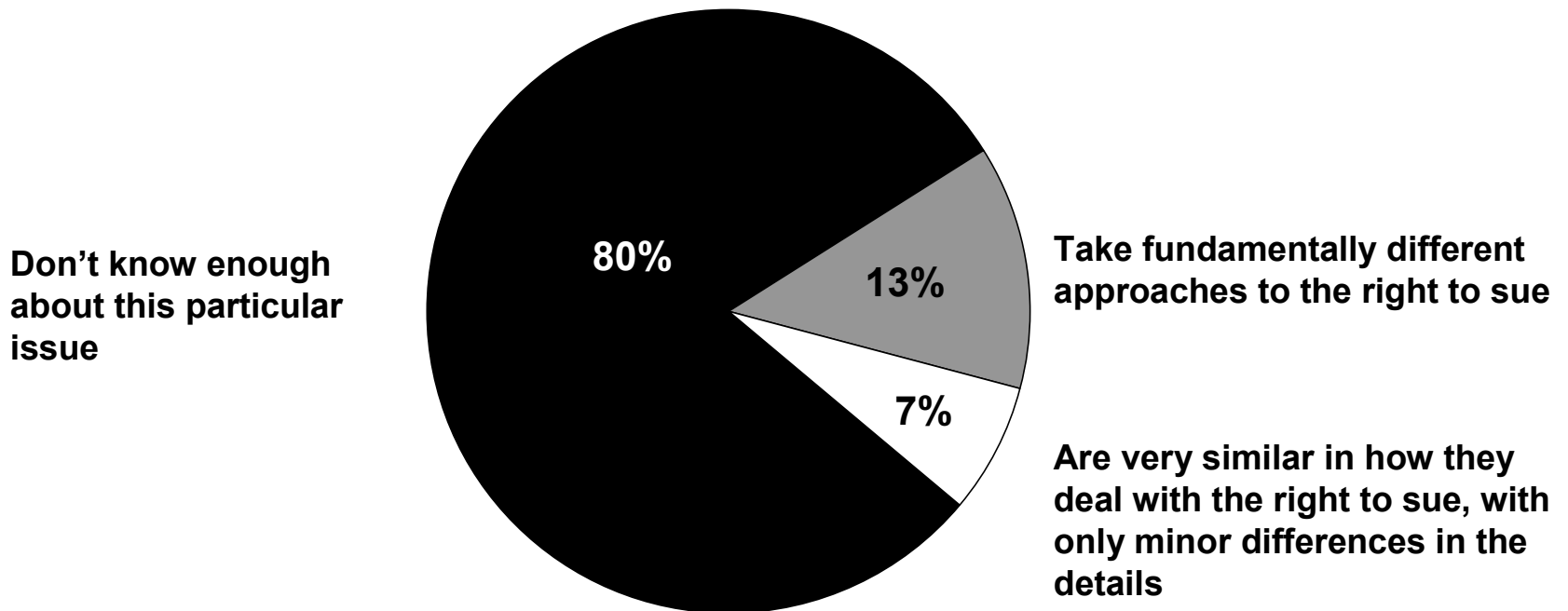
**Don’t know/
refused**

**Patients shouldn’t
have ANY rights to
sue health plans
(VOL.)**

Chart 20

Awareness of Details of Patients' Bill of Rights Debate

As you may know, President Bush and most Democrats in Congress have endorsed different versions of a Patients' Bill of Rights. Both versions include the right to sue your health plan. Do you think these two proposals...?



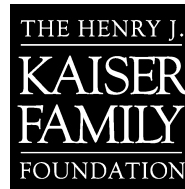
Source: Kaiser Family Foundation/Harvard School of Public Health *National Survey on Consumer Experiences With and Attitudes Toward Health Plans*, August 2001 (conducted July-August 2001).

Methodology

The Kaiser Family Foundation/Harvard School of Public Health *National Survey on Consumer Experiences With and Attitudes Toward Health Plans* was designed and analyzed by researchers at the Kaiser Family Foundation and Harvard School of Public Health. The Kaiser/Harvard survey research team was led by Dr. Mollyann Brodie, Vice President of the Kaiser Family Foundation and Professor Robert Blendon of the Harvard School of Public Health. Fieldwork was conducted by telephone by Princeton Survey Research Associates between July 2 and August 8, 2001. The survey included a nationally representative random sample of 1,205 adults age 18 and over. The margin of sampling error for the total sample is plus or minus 3 percentage points. For the 721 respondents ages 18 to 64 with private health insurance, the margin of sampling error is plus or minus 4 percentage points. The margin of sampling error may be higher for some of the other sub-groups noted in the analysis.

Because many people are unsure of - or don't know -- what kind of health insurance they have, respondents were asked a series of questions about their health plan to establish what type of coverage they actually have. They were asked if they were required to do any of the following by their plan: choose doctors from a list and pay more for doctors not on the list; select a primary care doctor or medical group; and/or obtain a referral before seeing a medical specialist or a doctor outside the plan. Respondents were listed as being in "strict" managed care if they reported their plans had all of these characteristics; listed as being in "loose" managed care if they had some but not all; and were listed as having "traditional" health insurance if they reported their plans had none of these characteristics.

The Kaiser Family Foundation is an independent, national health philanthropy dedicated to providing information and analysis on health issues to policymakers, the media, and the general public. The Foundation is not associated with Kaiser Permanente or Kaiser Industries.



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