



The 2000 Health Confidence Survey Summary of Findings

Overview

The 2000 Health Confidence Survey (HCS) finds that Americans are becoming more critical about many aspects of the health care system.

- Twenty-seven percent of respondents report feeling that health care, in general, has gotten better in the last five years, but 4 in 10 feel it has gotten worse (39 percent). In comparison, 3 in 10 respondents in 1998 felt health care had gotten better (31 percent) and one-third felt it had gotten worse (35 percent).
- Among those respondents who have received care in the past two years,
 - Four in 10 are extremely or very satisfied with the care they have received in general (39 percent, down from 46 percent in 1998).
 - More than 4 in 10 are extremely or very satisfied with the quality of the medical care they received (43 percent), compared with almost half in 1998 (47 percent).
- Twenty-two percent of respondents to the 2000 HCS named health care as the most critical issue facing America today (up from 16 percent in 1999 and 14 percent in 1998). This places health care just behind education (25 percent) and ahead of crime (16 percent), Social Security (11 percent), gun control (10 percent), and taxes (9 percent) as the issue considered to be most critical.

These changes are accompanied by continued concern about escalating health care costs and a lack of confidence about the future of the health care system, particularly among women and those in poorer health. At the same time, respondents' declining familiarity with the term "managed care," their tendency to believe that their employer is better able than they are to choose a health insurance plan, the fact that many with employment-based coverage say they are not likely to obtain health insurance coverage on their own if they should lose their current coverage, and uninsured respondents' lack of awareness about state low-cost insurance programs, may make them feel that much of the national health care debate lacks relevance for their situation.

Health Care Costs

Despite continued national prosperity, individual respondents are more likely than in the past to be dissatisfied with the cost of health insurance. Four in 10 of those who have received health care in the past two years say they are not too (19 percent) or not at all (20 percent) satisfied with health care costs, compared with one-third of respondents in 1998. Likewise, respondents are more likely than in 1998 to be not too (19 percent) or not at all (24 percent) satisfied with health costs not covered by insurance.

Satisfaction With Health Care Costs, Among Those Receiving Care in Past Two Years

	Cost of Health Insurance			Health Costs Not Covered by Insurance		
	1998	1999	2000	1998	1999	2000
Extremely Satisfied	13%	7%	8%	7%	5%	5%
Very Satisfied	18	19	16	14	17	15
Somewhat Satisfied	32	34	31	30	32	29
Not Too Satisfied	17	19	19	17	20	19
Not At All Satisfied	15	14	20	20	17	24
Don't Know	1	2	1	4	2	2
Not Applicable	4	5	4	8	7	5

Americans are slightly more likely than in 1998 to say they are extremely or very confident of being able to afford health care without financial hardship during the next 10 years (24 percent, up from 20 percent). One-third are somewhat confident (33 percent), and 4 in 10 are not too or not at all confident (41 percent). Similarly, about one-fourth say they are extremely or very confident (27 percent), and one-third are somewhat confident (32 percent) of being able to afford prescription drugs without financial hardship during the next 10 years. Four in 10 are not too or not at all confident about being able to afford prescription drugs.

However, as respondents look toward Medicare (the federal health care insurance program for the elderly and disabled), their confidence in their ability to afford health care in old age without financial hardship tends to decrease. Half of respondents who are not yet eligible for Medicare are not too (30 percent) or not at all (20 percent) confident that they will be able to afford health care without financial hardship once they are eligible for Medicare. Almost identical proportions are not too (30 percent) or not at all (21 percent) confident they will be able to afford prescription drugs without financial hardship.

Confidence in Ability to Afford Health Care and Prescription Drugs in the Future, Among Those Not Yet Eligible for Medicare

	Health Care		Prescription Drugs	
	Next 10 years	Once eligible for Medicare	Next 10 years	Once eligible for Medicare
Extremely Confident	8%	4%	9%	5%
Very Confident	16	10	18	11
Somewhat Confident	34	34	33	31
Not Too Confident	21	30	20	30
Not At All Confident	20	20	18	21

Just 1 in 10 respondents is extremely or very confident in his or her ability to afford nursing home care should the individual or a family member need it (10 percent), and only one-fourth are somewhat confident (25 percent). Likewise, 1 in 10 is extremely or very confident about being able to afford home health care should they or a family member need it (9 percent), although slightly more—one-third—are somewhat confident of their ability to afford this kind of care (33 percent).

Perhaps not surprisingly, respondents who describe their health as good, fair, or poor are more likely than those who describe it as excellent or good to say they are not confident of being able to afford future health care. Six in 10 of those in fair or poor health indicate they are not confident of being able to afford health care without financial hardship in the next 10 years (60 percent), compared with 46 percent in good health and 32 percent in excellent or very good health. Sixty-three percent of those in fair or poor health are not confident of being able to afford health care once they are eligible for Medicare, compared

with 55 percent in good health and 45 percent in excellent or very good health. In addition, 8 in 10 in fair or poor health are not confident of being able to afford nursing home care (79 percent versus 68 percent in good health and 57 percent in excellent or very good health), and three-fourths are not confident of being able to afford home health care (74 percent versus 59 percent in good health and 50 percent in excellent or very good health).

Medicare

In addition to lacking confidence in their ability to afford health care once they are eligible for Medicare, those who are not yet eligible tend to lack confidence in other aspects of Medicare. Consistent with previous years, just 2 in 10 Americans are extremely or very confident that they will be able to get the treatments they need once they are eligible for Medicare (20 percent), compared with one-third who are confident over the next 10 years or until they are eligible for Medicare. Even fewer are extremely or very confident that they will have enough choice about who provides their medical care (16 percent), compared with almost 3 in 10 confident over the next 10 years or until they are eligible for Medicare (28 percent).

**Confidence in Future Health Care Aspects,
Among Those Not Yet Eligible for Medicare**

	Being Able to Get Needed Treatments		Having Enough Choice About Medical Provider	
	Next 10 years	Once eligible for Medicare	Next 10 years	Once eligible for Medicare
Extremely Confident	10%	5%	9%	5%
Very Confident	24	15	19	11
Somewhat Confident	41	40	40	36
Not Too Confident	15	24	17	30
Not At All Confident	9	14	13	17

Just as women are more likely than men to identify health care as the most critical issue facing America today (25 percent of women versus 18 percent of men), they are more likely to be concerned about their ability to get health care once they are eligible for Medicare. Women are more likely than men to be not confident that they will be able to afford health care without financial hardship once they are eligible for Medicare (54 percent versus 44 percent), that they will have enough choice about who provides their medical care (51 percent versus 41 percent), and that they will be able to get the treatments they need (42 percent versus 33 percent).

When asked about possible changes to the Medicare system to ensure that the program remains financially sound, it appears that respondents would be most likely to favor using the budget surplus to pay some of the costs of Medicare (75 percent) and allowing Medicare beneficiaries to choose from many private plans, with government contributing a fixed amount to the cost of the plan (73 percent). More than half favor requiring seniors with income above \$50,000 to pay more (54 percent) or reducing payments to doctors and hospitals for treating people covered by Medicare (53 percent). Only about 3 in 10 favor increasing the amount Medicare recipients pay when they receive care (31 percent), increasing payroll taxes for current workers (29 percent), or increasing the eligibility age for Medicare to 67 (26 percent).

Managed Care Familiarity

Despite the fact that managed care has been around for a number of years and that the majority of those with health insurance are enrolled in some type of managed care program, respondents tend to be *less likely* than in previous years to say they are familiar with managed care. The percentage describing themselves to be somewhat familiar with managed care has dropped from 29 percent in 1998 to 23 percent in 2000. At the same time, the percentage saying they are not at all familiar has increased from 28 percent to 39 percent. This means that much of the public debate over health care, centered as it is around a discussion of “managed care,” may have little meaning for the majority of Americans.

Familiarity With Managed Care

	1998	1999	2000
Extremely Familiar	4%	4%	5%
Very Familiar	9	12	9
Somewhat Familiar	29	24	23
Not Too Familiar	26	22	22
Not At All Familiar	28	35	39

One reason that respondents report being unfamiliar with managed care may be that many continue to believe that they have never been enrolled in this type of insurance program. Two-thirds of respondents think they have never been enrolled in managed care (66 percent). One in 10 each believes he or she is currently enrolled (12 percent) or was previously but is not now enrolled (11 percent). Another 1 in 10 does not know whether or not he or she has ever been enrolled in managed care (11 percent). In fact, about 90 percent of workers currently participating in a health plan are in some form of managed care.

The Employment-Based System

Almost one-half of respondents covered by employment-sponsored health insurance are extremely (12 percent) or very (36 percent) satisfied with their current health insurance plan. Four in 10 are somewhat satisfied (40 percent) and 1 in 10 is not too (7 percent) or not at all (4 percent) satisfied. Most are also at least somewhat confident that the employer sponsoring their insurance has selected the best available health plan for its workers. More than 4 in 10 are extremely (14 percent) or very (29 percent) confident and 37 percent are somewhat confident.

In contrast, respondents are less likely to be confident that they could choose the best available health insurance plan for themselves if their employer stopped offering health insurance. One-third are extremely (11 percent) or very (21 percent) confident and one-third are somewhat confident (32 percent), but 19 percent are not too confident and 16 percent are not at all confident. Among those more likely to be not confident in their ability to choose the best available health plan are those in good, fair, or poor health, those with household income less than \$35,000, and those ages 45 to 64.

Confidence in Choice of Best Available Health Plan

	Employer's Choice	Respondent's Choice
Extremely Confident	14%	11%
Very Confident	29	21
Somewhat Confident	37	32
Not Too Confident	13	19
Not At All Confident	7	16

Almost all respondents covered by employment-based health insurance are at least somewhat confident that their employer will continue to offer health insurance coverage to its workers. Three in 10 are extremely confident (30 percent), nearly 4 in 10 are very confident (38 percent), and one-fourth are somewhat confident (25 percent) that their employer will continue to do so. Fewer than 1 in 10 is either not too (4 percent) or not at all (3 percent) confident. Those who rate health care in America as fair or poor are more likely to be only somewhat confident or not confident that their employer will continue to offer coverage.

**Confidence in Employer Continuing to Offer Coverage
by Rating of Health Care in America**

	Rating of Health Care in America			
	Total with employer coverage	Excellent/ very good	Good	Fair/poor
Extremely Confident	30%	45%	32%	24%
Very Confident	38	45	39	36
Somewhat Confident	25	7	25	30
Not Too Confident	4	1	3	6
Not At All Confident	3	2	1	3

If their employer were to stop offering health insurance, one-fourth of those with employment-based coverage say they would be not too (14 percent) or not at all (12 percent) likely to purchase insurance coverage on their own. Two in 10 say they would be somewhat likely to purchase coverage (20 percent). Only about one-half indicate they would be extremely (26 percent) or very (27 percent) likely to do so. It is possible that many who say they are not likely to purchase insurance on their own feel that they would not be able to afford or would be unable to get individual coverage. Those who rate their health as fair or poor, have someone in their household with a chronic condition, are not college graduates, or have annual household income less than \$35,000 are all more apt to say they are not likely to purchase coverage. Still, significant minorities of those in excellent health, with college degrees, or with household incomes of \$50,000 or more also say they are not likely to purchase insurance.

Likelihood of Purchasing Individual Coverage, by Health Status

	Health Status			
	Total with employer coverage	Excellent/ very good	Good	Fair/poor
Extremely Likely	26%	30%	19%	15%
Very Likely	27	29	26	17
Somewhat Likely	20	17	27	18
Not Too Likely	14	12	15	23
Not At All Likely	12	10	12	25

Two in 10 of those with employment-based health insurance are willing to pay \$150 to \$199 a month for health insurance coverage purchased on their own, and one-third are willing to pay \$200 or more (33 percent). Among those willing to pay at least \$150 a month are men, those with higher income or higher education, those who are married, and those who are in excellent, very good, or good health.

Uninsured Americans

Much of the public policy debate regarding ways to expand health insurance coverage is moving in the direction of individual responsibility and tax incentives, as opposed to the existing employment-based system. While the number of uninsured respondents in the 2000 HCS is relatively small, their responses strongly suggest that such proposals may not be effective among a core group of uninsured.

The assumption among policymakers has been that adult Americans without health insurance would obtain insurance if they could afford to do so. However, 3 in 10 uninsured respondents say they are not interested in having health insurance (30 percent). Another 3 in 10 uninsured report that they have been offered employment-based coverage since they lost or discontinued their insurance but decided not to take it (29 percent). Further, while some other surveys have found that people tend to be uninsured for relatively brief periods of time, substantial minorities of the uninsured in both the 2000 and 1999 HCS indicate they have been without health insurance for at least three years (41 percent in 2000; 46 percent in 1999).

Those without insurance are generally willing or able to pay only a small amount toward the cost of health insurance. Nine percent are willing to pay less than \$25 a month, 4 percent are willing to pay \$25 to \$49 a month, 29 percent are willing to pay \$50 to \$99 a month, and 16 percent are willing to pay \$100 to \$149 a month. Seven percent are not willing to pay anything so that they can have health insurance.

Amount Uninsured Are Willing to Pay for Health Insurance

Nothing	7%
\$1 to \$9 a month	1
\$10 to \$24 a month	8
\$25 to \$49 a month	4
\$50 to \$99 a month	29
\$100 to \$149 a month	16
\$150 to \$199 a month	7
\$200 or more a month	9
Don't know	19

The majority of uninsured Americans continue to be unaware of state-subsidized health insurance programs. Fewer than 4 in 10 uninsured respondents say they have heard about any low-cost or free insurance programs for uninsured adults or children in their state (37 percent). When those who have heard of these programs are asked why they have not enrolled, some mention that they make too much money to qualify (20 percent) or that the program is only for children (19 percent). However, 37 percent are unable to say why they have not enrolled, and 7 percent say they are not interested—providing further evidence that some Americans may choose to remain uninsured despite efforts to make health care more affordable.

The 2000 HCS

These findings are part of the third annual Health Confidence Survey (HCS), a survey that examines a broad spectrum of health care issues, including Americans' satisfaction with health care today, their confidence in the future of the health care system and Medicare, and their attitudes toward health care reform. The survey was conducted within the United States between April 26 and May 28, 2000, through 20-minute telephone interviews with 1,001 individuals ages 21 and older. Random digit dialing was used to obtain a representative cross section of the U.S. population. Interview quotas were estab-

lished by sex of respondent, and the data were weighted by age and education to reflect the actual proportions in the population.

In theory, the weighted sample of 1,001 yields a statistical precision of plus or minus 3 percentage points (with 95 percent certainty) of what the results would be if the entire population ages 21 and older were surveyed with complete accuracy. However, there are other possible sources of error in all surveys that may be more serious than theoretical calculations of sampling error. These include refusals to be interviewed and other forms of nonresponse, the effects of question wording and question order, interviewer bias, and screening. While attempts are made to minimize these factors, it is difficult or impossible to quantify the errors that may result from them.

The HCS is co-sponsored by the Employee Benefit Research Institute (EBRI), a private, nonprofit, nonpartisan public policy research organization; the Consumer Health Education Council (CHEC), a partnership of private- and public-sector institutions dedicated to raising public awareness on health care coverage, and a part of the EBRI Education and Research Fund; and Mathew Greenwald & Associates, Inc., a Washington, DC-based market research firm. The 2000 HCS data collection was funded by grants from 15 organizations. Staffing was donated by EBRI, CHEC, and Greenwald & Associates. HCS materials and a list of underwriters may be accessed at the EBRI Web site: www.ebri.org.