

# 2002 Health Confidence Survey Summary of Findings

## Overview

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This year's Health Confidence Survey (HCS) represents the fifth wave of an annual survey to assess the attitudes of the American people regarding the health care system in the United States. Although changes have been made to the questionnaire during these five years to examine topical issues, certain key questions have tracked trends in health confidence and satisfaction with the health care Americans receive for much of this time. Surprisingly, however, the HCS has found little change over time in Americans' confidence in and satisfaction with the health care system.

- Among those respondents who have received care in the past two years,
  - Forty-four percent are *extremely* or *very* satisfied with the care they have received in general (statistically unchanged from 46 percent in 1998).
  - More than half continue to be *extremely* or *very* satisfied with the quality of the medical care they receive (57 percent in 1998, 55 in 2002).
- Just one-third of respondents are *extremely* or *very* confident that they will be able to get the treatments they need during the next 10 years (33 percent in 1998, 34 percent in 2002), while roughly 2 in 10 are confident they will be able to get needed treatments once they are eligible for Medicare (18 percent in 1998, 21 percent in 2002).
- Half of those receiving coverage through an employment-based plan report being *extremely* or *very* satisfied with their health plan (50 percent in 1998, 50 percent in 2002). Another 4 in 10 are *somewhat* satisfied (39 percent in 1998, 37 percent in 2002).

Nevertheless, some noteworthy changes have occurred that indicate health care is becoming a growing concern.

- Americans are more likely than in 1998 to identify health care as a critical issue for the nation (14 percent in 1998, 19 percent in 2002). This places health care behind terrorism and national security (29 percent) and about equal to education (18 percent), which for years has been the issue considered to be most critical.
- Almost 4 in 10 who received care in the past two years say they are not satisfied with the cost of their health insurance (38 percent), compared with one-third in 1998 (32 percent). Forty-four percent are not satisfied with the costs of health care not covered by their insurance (up from 37 percent in 1998).

## Satisfaction With Health Care

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Satisfaction with the healthcare Americans currently receive has shown remarkably little change in the five years tracked by the HCS (Figure 1). Among those receiving health care within the two years prior to the survey, the percentage of respondents saying they are *extremely* or *very* satisfied with the health care they have received, in general, is roughly the same in 2002 (44 percent) as it was in 1998 (46 percent), although satisfaction dipped slightly in 2000 (39 percent). Approximately 4 in 10 respondents continue to be somewhat satisfied with the health care they have received (40 percent in 1998, 41 percent in 2002). Likewise, more than half continue to be *extremely* or *very* satisfied with their ability to choose their doctor (54 percent in 1998, 57 percent in 2002) and the quality of the medical care they receive (57 percent in 1998, 55 percent in 2002). Satisfaction with health care tends to increase with age and household income.

Figure 1  
Satisfaction With Selected Aspects of Health Care, Among Those Receiving  
Care in Past Two Years

Health Care Received, in General					
	1998	1999	2000	2001	2002
Extremely Satisfied	13%	11%	9%	10%	10%
Very Satisfied	33	31	30	36	34
Somewhat Satisfied	40	43	44	42	41
Not Too/Not At All Satisfied	11	14	16	10	12
Don't Know/Refused	3	1	2	1	2
Not Applicable	-	-	-	-	-
Ability to Choose Your Doctor					
	1998	1999	2000	2001	2002
Extremely Satisfied	19%	21%	20%	19%	18%
Very Satisfied	35	32	33	38	39
Somewhat Satisfied	24	23	26	25	25
Not Too/Not At All Satisfied	19	20	21	17	18
Don't Know/Refused	1	1	1	<0.5	<0.5
Not Applicable	2	2	1	1	<0.5
Quality of Medical Care Received					
	1998	1999	2000	2001	2002
Extremely Satisfied	17%	14%	13%	14%	13%
Very Satisfied	40	39	40	43	41
Somewhat Satisfied	33	34	37	34	36
Not Too/Not At All Satisfied	7	10	10	7	8
Don't Know/Refused	1	1	1	<0.5	1
Not Applicable	2	<0.5	<0.5	1	1

Source: Employee Benefit Research Institute, Consumer Health Education Council, and Mathew Greenwald & Associates, Inc., 1998–2002 Health Confidence Surveys.

Respondents to the HCS are, however, more likely in 2002 than in 1998 to report being dissatisfied with health care costs (Figure 2). Almost 4 in 10 say they are *not too* or *not at all* satisfied with the cost of their health insurance in 2002 (38 percent), compared with one-third in 1998 (32 percent). Moreover, 44 percent report being *not too* or *not at all* satisfied with the costs of health care not covered by their insurance, compared with 37 percent in 1998. This increasing dissatisfaction with cost is found among all age and household income groups.

Despite the relative stability in satisfaction with health care, Americans are more likely than in 1998 to identify it as a critical issue for the nation. In that year, just 14 percent named it as the single most critical concern facing America. Two in 10 identify it as the most critical issue in America today (19 percent). This places health care below terrorism and national security (29 percent) and about equal to education (18 percent) as an issue of concern. Health care ranks ahead of the economy (13 percent), Social Security (8 percent), taxes (7 percent), and the budget deficit (2 percent) as the most critical issue. The perception of health care as the most critical issue is related to age and gender (Figure 3). More than 2 in 10 respondents ages 45 and over (22 percent) and women (24 percent) select health care as the most critical issue in America today, and women are more likely now than in 1998 to view health care as a critical concern (15 percent in 1998).

Figure 2  
Satisfaction With Health Care Costs, Among Those Receiving Care in Past Two Years

Cost of Health Insurance					
	1998	1999	2000	2001	2002
Extremely Satisfied	13%	7%	8%	11%	9%
Very Satisfied	18	19	16	20	18
Somewhat Satisfied	32	34	31	30	29
Not Too/Not At All Satisfied	32	33	40	33	38
Don't Know/Refused	1	2	1	2	2
Not Applicable	4	5	4	4	3
Health Costs Not Covered by Insurance					
	1998	1999	2000	2001	2002
Extremely Satisfied	7%	5%	5%	8%	6%
Very Satisfied	14	17	15	18	16
Somewhat Satisfied	30	31	29	30	28
Not Too/Not At All Satisfied	37	37	43	37	44
Don't Know/Refused	4	2	2	2	4
Not Applicable	8	7	5	6	3

Source: Employee Benefit Research Institute, Consumer Health Education Council, and Mathew Greenwald & Associates, Inc., 1998–2002 Health Confidence Surveys.

Figure 3  
Most Critical Issue in America Today, by Gender and Age

	Total	Gender		Age	
		Men	Women	Under 45	45 and Older
Terrorism and National Security	29%	28%	31%	27%	32%
Health Care	19	14	24	16	22
Education	18	18	17	24	11
The Economy	13	15	10	16	9
Social Security	8	9	7	4	11
Taxes	7	9	4	8	6
The Budget Deficit	2	3	2	3	2
Don't Know/Refused	5	5	5	3	8

Source: Employee Benefit Research Institute, Consumer Health Education Council, and Mathew Greenwald & Associates, Inc., 2002 Health Confidence Survey.

## Confidence in the Health Care System

Americans express a moderate degree of confidence in some aspects of today's health care system (Figure 4). More than half say they are *extremely* or *very* confident that they are able to get the treatments they need (55 percent). However, less than half are *extremely* or *very* confident that they have enough choice about who provides their medical care (45 percent), and fewer than 4 in 10 are *extremely* or *very* confident of being able to afford prescription drugs without financial hardship (39 percent) and being able to afford health care without financial hardship (36 percent).

As respondents to the HCS look to the future, they become less confident in the health care system (Figure 4). Just one-third of respondents are *extremely* or *very* confident that they will be able to get the treatments

Figure 4  
Confidence in Selected Aspects of the Health Care System

	Ability to Get Treatments You Need			Have Enough Choice About Who Provides Care		
	Today	Next 10 Years	Once Eligible for Medicare	Today	Next 10 Years	Once Eligible for Medicare
Extremely Confident	21%	10%	6%	20%	10%	5%
Very Confident	34	24	15	25	20	12
Somewhat Confident	32	44	43	35	40	39
Not Too/Not At All Confident	12	21	33	18	29	42
Don't Know/Refused	1	1	3	1	1	2

  

	Ability to Afford Health Care Without Financial Hardship			Ability to Afford Prescription Drugs Without Financial Hardship		
	Today	Next 10 Years	Once Eligible for Medicare	Today	Next 10 Years	Once Eligible for Medicare
Extremely Confident	14%	8%	6%	17%	7%	5%
Very Confident	21	17	12	22	17	12
Somewhat Confident	33	38	36	33	37	36
Not Too/Not At All Confident	31	35	44	27	36	44
Don't Know/Refused	1	1	2	1	2	2

Source: Employee Benefit Research Institute, Consumer Health Education Council, and Mathew Greenwald & Associates, Inc., 2002 Health Confidence Survey.

they need over the next 10 years or until they are eligible for Medicare (34 percent), and only 3 in 10 are *extremely* or *very* confident of having enough choice about who provides their medical care during this period (30 percent). Roughly one-fourth each are *extremely* or *very* confident of being able to afford health care without financial hardship (25 percent) and being able to afford prescription drugs without financial hardship (24 percent).

Confidence in the future of the health care system reaches even lower levels as respondents look toward Medicare (the federal health care insurance program for the elderly and disabled) (Figure 4). Only about 2 in 10 respondents not yet eligible for Medicare are *extremely* or *very* confident that they will be able to get the treatments they need once they are eligible for Medicare (21 percent). Fewer are *extremely* or *very* confident that they will be able to afford health care without financial hardship (18 percent), that they will be able to afford prescription drugs without hardship (17 percent), or that they will have enough choice about who provides their medical care once they are eligible for the program (17 percent).

While there has been very little change in relative confidence about the current and future condition of the health care system, HCS respondents are less pessimistic than they used to be. For example, the percentage of respondents saying they are *not too* or *not at all* confident in their ability to afford health care without financial hardship in the next 10 years or until eligible for Medicare decreased from 44 percent in 1998 to 35 percent in 2002, and the percentage saying they are not confident in their ability to afford health care once eligible for Medicare decreased from 51 percent in 1998 to 44 percent in 2002. Similarly, the percentage of respondents *not too* or *not at all* confident in their ability to afford prescription drugs without financial hardship once eligible for Medicare decreased from 51 percent in 2001 to 44 percent in 2002. Finally, the percentage of those *not too* or *not at all* confident that they will have enough choice about who provides their medical care in the next 10 years decreased from 36 percent in 1998 to 29 percent in 2002.

Perhaps not surprisingly, respondents who describe their health as *fair* or *poor* are more likely than those who describe it as *excellent*, *very good*, or *good* to say they are *not too* or *not at all* confident of being able to afford future health care (Figure 5). For example, more than half of those in *fair* or *poor* health are not confident of being able to afford health care once they are eligible for Medicare (55 percent), compared with

roughly 4 in 10 of those in *excellent* or *very good* (42 percent) or *good* (43 percent) health. In addition, those who describe their health as *fair* or *poor* are more likely to say they are not confident of having enough choice about who provides their medical care and being able to get the treatments they need during the next 10 years.

Just as women are more likely than men to identify health care as the most critical issue facing America today (24 percent of women versus 14 percent of men), they are more likely to be concerned about the future of the health care system. In particular, women are more likely than men to be *not too* or *not at all* confident that, once eligible for Medicare, they will be able to afford prescription drugs without financial hardship (52 percent versus 37 percent), that they will be able to afford health care without hardship (51 percent versus 37 percent), and that they will be able to get the treatments they need (41 percent versus 26 percent) (Figure 6).

Figure 5  
**Confidence in Ability to Afford Health Care Without Financial Hardship  
 Once Eligible for Medicare, by Health Status**

	Health Status			
	Total	Excellent/ Very Good	Good	Fair/Poor
Extremely Confident	6%	5%	6%	9%
Very Confident	12	14	9	8
Somewhat Confident	36	36	39	27
Not Too/Not At All Confident	44	42	43	55
Don't Know/Refused	2	2	2	1

Source: Employee Benefit Research Institute, Consumer Health Education Council, and Mathew Greenwald & Associates, Inc., 2002 Health Confidence Survey.

Figure 6  
**Confidence in Ability to Get Needed Treatments Once Eligible for Medicare, by Gender**

	Gender		
	Total	Men	Women
Extremely Confident	6%	7%	5%
Very Confident	15	18	13
Somewhat Confident	43	47	39
Not Too/Not At All Confident	33	26	41
Don't Know/Refused	3	3	2

Source: Employee Benefit Research Institute, Consumer Health Education Council, and Mathew Greenwald & Associates, Inc., 2002 Health Confidence Survey.

Figure 7  
**Support for Reforms to Ensure Access to Health Insurance**

	Strongly Support	Somewhat Support	Somewhat Oppose	Strongly Oppose	Depends/ Don't Know
Requiring All Employers To Offer Health Insurance To Employees	63%	19%	9%	7%	3%
Expanding Government Programs, Such As Medicare or Medicaid	53	28	7	8	3
Tax Credits To Help People Pay For Employer Coverage	47	32	7	8	6
Allowing Uninsured People To Buy Into Government Programs	44	33	9	5	8

Source: Employee Benefit Research Institute, Consumer Health Education Council, and Mathew Greenwald & Associates, Inc., 2002 Health Confidence Survey.

Most Americans would support certain reforms to ensure that all Americans have access to health insurance (Figure 7). While approximately 8 in 10 respondents *strongly* or *somewhat* support each of the reforms mentioned in the HCS, they are most likely to say they *strongly* support requiring all employers to offer health insurance to employees (63 percent). More than half *strongly* support expanding government programs, such as Medicare or Medicaid (53 percent). Somewhat fewer *strongly* support tax credits to help people pay for employer coverage (47 percent) and allowing uninsured people to buy into government programs (44 percent).

When asked whether they would prefer to get health insurance through an employer, from the government, or directly from an insurance company, three-fourths of respondents indicate that they are reluctant to deal directly with insurance companies. Almost half say they would prefer a system where they get insurance through an employer (48 percent), and one-fourth say they would prefer to get it from the government (25 percent). Two in 10 would prefer to get health insurance directly from an insurance company (19 percent). The remainder are unable to say what type of system they would prefer (8 percent).

Respondents age 65 and older are more likely than younger respondents to prefer a government-based system, while those under age 65 are more likely than older respondents to prefer an employment-based system. Likewise, preference for an employment-based system increases with household income and with education, and preference for a government-based system is stronger among those with a high school education or less and those with household income of less than \$35,000. Interestingly, preference for purchasing health insurance directly from an insurance company does not vary by respondent demographics.

## Judging the Quality of the Health Care System

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While a number of characteristics rank highly as very important when judging the quality of a doctor, Americans are most likely to say that the skill, experience, and training of the doctor is the most important characteristic (39 percent) (Figure 8). Many also cite personal and communication factors as most important: 27 percent say that communication skills and willingness to listen and explain thoroughly are most important; 11 percent cite the degree to which the doctor involves them in the decisions made regarding their care; and 8 percent say the doctor's personal manner, sensitivity, and respect are most important.

Similarly, respondents are most likely to consider the skill, experience, and training of the medical staff to be the most important characteristic when judging the quality of a hospital (45 percent) (Figure 9). Considerably fewer respondents cite other characteristics, such as how well the staff explains tests, treatments, and what to expect (12 percent); the degree to which the staff involve them in the decisions made regarding their health care (6 percent); the sensitivity, courtesy, and respect shown by the hospital staff (6 percent); and the hospital's reputation (6 percent).

Despite interest in quality, fewer than 4 in 10 respondents with health insurance coverage report their employer or health plan provides them with information on the quality of doctors or hospitals (37 percent). Seven in 10 of those who say their employer or health plan does not provide them with this type of information say they would like to have access to information on the quality of doctors or hospitals (71 percent).

When it comes to judging the quality of health plans, many Americans under age 65 view access to care as the most important characteristic (Figure 10). Almost 3 in 10 say that the ability to get the care your doctor recommends is the most important characteristic (27 percent), while almost 2 in 10 say access to emergency care is most important (17 percent). Fifteen percent cite the range of services covered by the plan.

Figure 8  
Important Characteristics When Judging the Quality of a Doctor

	Most Important	Very Important	Somewhat Important	Not Important	Don't Know/Refused
Their Skill, Experience and Training	39%	92%	6%	1%	<0.5%
Their Communication Skills and Willingness To Listen and Explain Thoroughly	27	90	8	1	<0.5
The Degree To Which They Involve You In The Decisions Made Regarding Your Health Care	11	86	12	1	<0.5
Their Personal Manner, Sensitivity, and Respect	8	84	15	1	<0.5
The Ability To Get Timely Appointments	4	72	26	2	1
The Competence Of The Office Staff	3	75	24	1	0
The Attitude Toward Referrals	2	71	24	2	2
The Waiting Time At The Doctor's Office	2	45	43	11	1
Something Else	1				
Don't Know/Refused	4				

Source: Employee Benefit Research Institute, Consumer Health Education Council, and Mathew Greenwald & Associates, Inc., 2002 Health Confidence Survey.

Figure 9  
Important Characteristics When Judging the Quality of a Hospital

	Most Important	Very Important	Somewhat Important	Not Important	Don't Know/Refused
The Medical Staff's Skill, Experience, and Training	45%	97%	2%	<0.5%	1%
How Well The Staff Explains Tests, Treatments, and What To Expect	12	87	11	<0.5	1
The Degree To Which They Involve You In The Decisions Made Regarding Your Health Care	6	90	9	<0.5	1
The Sensitivity, Courtesy, and Respect Shown By Hospital Staff	6	88	11	<0.5	1
The Hospital's Reputation	6	76	19	4	1
The Doctor Who Referred You To The Hospital	4	67	24	9	1
Your Out-Of-Pocket Costs, Such As Co-Payments	4	55	30	12	3
The Cleanliness and The Condition Of The Facility	3	96	4	0	1
The Responsiveness Of The Nursing Staff	3	88	11	1	<0.5
Something Else	2				
Don't Know/Refused	10				

Source: Employee Benefit Research Institute, Consumer Health Education Council, and Mathew Greenwald & Associates, Inc., 2002 Health Confidence Survey.

Figure 10  
Important Characteristics When Judging the Quality of a Health Plan, Among Those Under Age 65

	Most Important	Very Important	Somewhat Important	Not Important	Don't Know/Refused
The Ability To Get The Care Your Doctor Recommends	27%	92%	8%	0%	0%
Access To Emergency Care	17	90	9	<0.5	0
The Range Of Services Covered By The Plan	15	85	14	1	0
The Doctors Available Through The Plan	14	85	14	1	<0.5
The Costs You Personally Have To Pay For	9	67	30	2	1
The Ease Of Getting Routine Care	5	82	15	3	1
The Ease Of Getting Referrals	3	72	21	5	2
Simplicity Of Paperwork	2	57	33	10	<0.5
Customer Service	1	74	24	2	<0.5
Something Else	3				
Don't Know/Refused	3				

Source: Employee Benefit Research Institute, Consumer Health Education Council, and Mathew Greenwald & Associates, Inc., 2002 Health Confidence Survey.

Figure 11  
Familiarity With Managed Care

	1998	1999	2000	2001	2002
Extremely Familiar	4%	4%	5%	6%	5%
Very Familiar	9	12	9	13	12
Somewhat Familiar	29	24	23	27	23
Not Too/Not At All Familiar	54	57	61	52	59
Don't Know/Refused	4	2	2	3	1

Source: Employee Benefit Research Institute, Consumer Health Education Council, and Mathew Greenwald & Associates, Inc., 1998–2002 Health Confidence Surveys.

## Managed Care Familiarity

Managed care has been around for a number of years, and respondents are slightly more likely than in the first year of the HCS to say they are familiar with managed care (Figure 11). Almost 2 in 10 respondents report they are *extremely* or *very* familiar with managed care health plans (17 percent, statistically unchanged from 19 percent in 2001 and up from 13 percent in 1998). At the same time, however, the majority of respondents continue to say they are not familiar with managed care (59 percent), with 38 percent being *not at all* familiar with this type of health plan.

One reason that respondents report being unfamiliar with managed care may be that many believe that they have never been enrolled in this type of insurance program despite the fact that almost all Americans with employment-based health insurance and many with Medicare or Medicaid are enrolled in a managed care plan. Almost 6 in 10 respondents think they have never been enrolled in managed care (58 percent, down from 65 percent in 1998). Nearly 2 in 10 believe that they are currently enrolled (17 percent) and more than 1 in 10 think they were previously but are not now enrolled (12 percent). Thirteen percent indicate they do not know whether or not they have ever been enrolled in managed care.

Awareness of being in a managed care program increases with the restrictiveness of the health plan. More than half of those respondents who appear to be enrolled in a preferred provider organization (PPO)-type plan say they have never been enrolled in a managed care program (52 percent) and 15 percent do not know if they have ever been enrolled. In contrast, fewer than 4 in 10 of those who appear to be enrolled in a more restrictive health maintenance organization (HMO)-type plan say they have never been enrolled in a managed care program (39 percent) and another 16 percent say they do not know if they have ever been enrolled.<sup>1</sup>

## The Employment-Based System

Satisfaction levels with employment-based health insurance remained remarkably stable between 1998 and 2002 (Figure 12). Most respondents receiving health insurance through an employment-based plan continue to be satisfied with their current health insurance plan. Half are *extremely* (11 percent in 2002) or *very* (39 percent) satisfied with their current plan, and almost 4 in 10 are *somewhat* satisfied (37 percent). Only 14 percent say they are *not too* or *not at all* satisfied.

<sup>1</sup> Plan type is categorized by the number of managed care plan design features (out of a total of four) a respondent reports as describing his or her health plan. Individuals enrolled in plans with three or four plan design features are considered to be in "HMO-type" managed care plans; individuals enrolled in plans with one or two of these features are considered to be in "PPO-type" managed care plans; and individuals enrolled in plans with none of the four features are considered to be in "traditional" fee-for-service insurance plans.

Figure 12  
Satisfaction With Current Health Plan, Among Those Receiving Coverage Through an Employment-Based Plan

	1998	1999	2000	2001	2002
Extremely Satisfied	14%	12%	12%	11%	11%
Very Satisfied	36	37	36	41	39
Somewhat Satisfied	39	38	40	36	37
Not Too/Not At All Satisfied	10	11	11	11	14
Don't Know/Refused	1	2	1	1	<0.5

Source: Employee Benefit Research Institute, Consumer Health Education Council, and Mathew Greenwald & Associates, Inc., 1998–2002 Health Confidence Surveys.

Figure 13  
Confidence in Choice of Best Available Health Plan

	Employer/Union's Choice	Respondent's Choice
Extremely Confident	16%	8%
Very Confident	30	19
Somewhat Confident	35	35
Not Too Confident	8	16
Not At All Confident	9	21
Don't Know/Refused	1	1

Source: Employee Benefit Research Institute, Consumer Health Education Council, and Mathew Greenwald & Associates, Inc., 2002 Health Confidence Survey.

Most respondents receiving health insurance through an employer or union are at least *somewhat* confident that the employer or union has selected the best available health plan for its workers. Almost half are *extremely* or *very* confident (46 percent) and more than one-third are *somewhat* confident (35 percent). In contrast, respondents are less likely to be confident that they could choose the best available health insurance plan for themselves if their employer or union stopped offering health insurance. Less than 3 in 10 are *extremely* or *very* confident (27 percent) and more than one-third are *somewhat* confident (35 percent), but 36 percent are *not too* or *not at all* confident that they would be able to do so (Figure 13). Moreover, the percentage of respondents *not at all* confident in their ability to choose the best available plan has increased over time (21 percent, up from 16 percent in 2000). Among those more likely to be not confident in their ability to choose the best available health plan are those in *fair* or *poor* health, women, and those without college degrees.

While almost all respondents covered by employment-based health insurance remain at least *somewhat* confident that their employer will continue to offer health insurance coverage to its workers, confidence levels have decreased slightly since 2000. Only 6 in 10 are now *extremely* or *very* confident that their employer will continue to offer health insurance (61 percent), compared with almost 7 in 10 in 2000 (68 percent). Roughly one-fourth are *somewhat* confident that their employer will continue to do so (27 percent in 2002, 25 percent in 2000). One in 10 say they are *not too* or *not at all* confident (11 percent, up from 7 percent in 2000). 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 (Figure 14).

If their employer were to stop offering health insurance, more than one-half of those with employment-based coverage indicate they would be *extremely* (29 percent) or *very* (26 percent) likely to purchase insurance coverage on their own (Figure 15). Almost 2 in 10 say they would be *somewhat* likely to purchase coverage (18 percent). One-fourth are *not too* or *not at all* likely to purchase coverage (24 percent). However, when

Figure 14  
Confidence in Employer Continuing to Offer Coverage, By Rating of Health Care in America

	Total With Employer Coverage	Rating of Health Care in America		
		Excellent/Very Good	Good	Fair/Poor
Extremely Confident	27%	36%	28%	23%
Very Confident	34	41	36	31
Somewhat Confident	27	18	27	30
Not Too/Not At All Confident	11	4	10	14
Don't Know/Refused	1	2	0	1

Source: Employee Benefit Research Institute, Consumer Health Education Council, and Mathew Greenwald & Associates, Inc., 2002 Health Confidence Survey.

Figure 15  
Likelihood of Purchasing Health Insurance on Own

If your employer or union...	Extremely Likely	Very Likely	Somewhat Likely	Not Too/Not At All Likely	Don't Know
Stopped offering you health insurance, how likely would you be to purchase it on your own?	29%	26%	18%	24%	2%
Stopped offering you health insurance, and did not increase your salary to help you pay for it yourself, how likely would you be to purchase it on your own?	19	26	27	27	1
Gave you money to buy health insurance, how likely would you be to purchase it on your own?	47	32	13	5	2

Source: Employee Benefit Research Institute, Consumer Health Education Council, and Mathew Greenwald & Associates, Inc., 2002 Health Confidence Survey.

respondents are asked if they would purchase coverage if their employer stopped offering coverage and did not increase their salary to help pay for health insurance, the percentage saying they would be *extremely* likely to purchase coverage on their own declines to 19 percent, 26 percent continue to say they would be *very* likely to purchase coverage, and the percentage saying they would be *somewhat* likely to get coverage increases to 27 percent.<sup>2</sup> Again, one-fourth of those with employment-based coverage say they would be *not too* or *not at all* likely to purchase insurance coverage on their own (27 percent).

If the employer were to provide them with money to buy health insurance, almost half say they would be *extremely* likely to purchase it on their own (47 percent) (Figure 15). Another one-third would be *very* likely to buy it (32 percent), and 13 percent would be *somewhat* likely to do so. Just 5 percent say they would be *not too* or *not at all* likely to purchase health insurance on their own if their employer gave them money to do so. However, fewer than 3 in 10 of those who say they are likely to purchase health insurance on their own with employer-provided money are *extremely* (11 percent) or *very* (17 percent) confident that they would be able to purchase health insurance that has at least the same amount of benefits as the insurance they have now (Figure 16). One-third are *somewhat* confident that they would be able to do so (34 percent), while more than one-third are *not too* or *not at all* confident (36 percent).

<sup>2</sup> The sample was randomly split. Half were asked "If your employer/union stopped offering you health insurance, how likely would you be to purchase it on your own?" The other half were asked a version of the question that added the wording "and did not increase your salary to help you pay for it yourself."

Figure 16  
**Confidence in Ability to Purchase Health Insurance With at Least Same Amount of Benefits as Currently, By Age**

	Total With Employer Coverage	Age			
		Younger Than Age 35	Ages 35 to 44	Ages 45 to 54	Ages 55 and Older
Extremely Confident	11%	11%	13%	13%	4%
Very Confident	17	22	12	17	18
Somewhat Confident	34	34	38	31	30
Not Too/Not At All Confident	36	30	35	37	45
Don't Know/Refused	2	2	1	2	2

Source: Employee Benefit Research Institute, Consumer Health Education Council, and Mathew Greenwald & Associates, Inc., 2002 Health Confidence Survey.

Not surprisingly, confidence in the ability to obtain the current level of benefits varies with a number of demographic factors. Women are more likely than men, and older respondents are more likely than younger respondents, to say they are not confident in their ability to purchase insurance with at least the same level of benefits (Figure 16). Confidence also tends to decrease as education or household income increase. For example, 30 percent of those with a high school education or less are not confident they will be able to purchase an equal level of benefits, compared to 35 percent of those with some college and 44 percent of college graduates. Interestingly, confidence does not vary as much as one might expect by health status. While those in *fair* or *poor* health are more likely than those in *excellent* or *very good* health to say they are *not at all* confident of being able to obtain an equal level of benefits (28 percent versus 14 percent), they are equally likely to say they are *extremely* or *very* confident (32 percent versus 29 percent).

## Retiree Health Care

Almost half of current workers say they think about access to health insurance benefits a lot when determining the age at which they expect to retire (48 percent). More than one-third think about it a little (36 percent), while 15 percent say they do not think about it. Nevertheless, 4 in 10 current workers plan to retire before age 65 (40 percent), that is, before the age at which they become eligible for benefits from Medicare. One reason for this may be that half of current workers expect to receive health insurance coverage through a former employer or union during their retirement (50 percent). Yet when those who expect to retire before age 65 are asked how they expect to get health insurance between their expected retirement age and the age when they are eligible to receive Medicare, only one-third cite a former employer or union (33 percent). Three in 10 mention a private plan they buy for themselves (29 percent), about 1 in 10 each say they will obtain coverage from a spouse's employer or union (10 percent) or personal savings (8 percent), and smaller proportions cite other sources of insurance such as COBRA (5 percent), buy-in to Medicare (4 percent), or Medicaid or other government plan (4 percent). One percent say they will go without insurance, and 6 percent say they do not know how they will obtain insurance during this period.

Most retirees also say they thought about access to health insurance when determining the age at which to retire. More than half thought about it a lot (54 percent) and one-fourth thought about it a little (25 percent). Of the 70 percent who retired before they were eligible for Medicare, more than 4 in 10 report they obtained health insurance from their former employer or union (44 percent) and another 2 in 10 received insurance from their spouse's employer or union (21 percent). Others say they obtained coverage through Medicaid or some other government plan (7 percent), a buy-in to Medicare (6 percent), a private plan they bought themselves (5 percent), or personal savings (3 percent). One in 10 indicate they went without coverage during the period between retiring and becoming eligible for Medicare (11 percent).

Two in 10 workers say their employer or union has made changes in the way it provides retiree health coverage during the time they have been employed at their current work place (21 percent). The majority of these respondents report a change in the plan or the structure of the program (73 percent) or a change in the amount or percentage the retiree pays toward the coverage (68 percent). One-third report a change in the eligibility age or years of service requirements (33 percent). Among those reporting a change in the way their company provides retiree health coverage, 4 in 10 think that the change will delay the age at which they will retire (39 percent).

## Uninsured Americans

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Much of the public policy debate regarding ways to expand health insurance coverage is moving in the direction of individual responsibility and tax incentives. While the number of uninsured respondents in the 2002 HCS is relatively small, their responses continue to 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, there may be a sizeable group of uninsured who would choose not to obtain coverage. Two in 10 uninsured respondents report that they have been offered employment-based coverage since they lost or discontinued their insurance but decided not to take it (20 percent). Further, while some other surveys have found that people tend to be uninsured for relatively brief periods of time, the HCS continues to find that a substantial portion of the uninsured have been without health insurance for at least three years (30 percent).

Respondents without insurance are generally willing or able to pay only a small amount toward the cost of health insurance. Two percent are willing to pay less than \$25 a month for individual coverage, 8 percent are willing to pay \$25 to \$49 a month, and 33 percent are willing to pay \$50 to \$99 a month. Almost 2 in 10 each say they would pay \$100 to \$149 or \$150 to \$199 a month (18 percent each). Only 14 percent of uninsured respondents are willing to pay \$200 a month or more for coverage. If uninsured respondents were to get health insurance on their own, more than half say they would be most concerned about covering hospital costs (54 percent). Two in 10 would be most concerned about covering doctor visits (21 percent), while 13 percent would be most concerned about covering prescription drugs. The remainder cite all three types of costs or other health costs, or say they do not know.

While some uninsured respondents do not appear to experience difficulties due to their lack of health insurance coverage, others do. Three in 10 uninsured respondents say they have delayed seeking health care since they lost their coverage (30 percent), and nearly 3 in 10 report they have decided not to get health care they thought they needed (28 percent). Moreover, 3 in 10 say that medical bills have been a major source of financial stress (31 percent), while almost as many say it has been a minor source of stress (27 percent).

The majority of uninsured Americans continue to be unaware of state-subsidized health insurance programs. Only about one-third of uninsured respondents say they have ever heard about any low-cost or free insurance programs for uninsured adults or children in their state (35 percent).

## The 2002 HCS

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These findings are part of the fifth 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 the Medicare program, and their attitudes toward health care reform. The survey was conducted within the United States between April 18 and May 19, 2002, through

20-minute telephone interviews with 1,000 individuals ages 21 and older. Random digit dialing was used to obtain a representative cross section of the U.S. population. Interview quotas were established 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 1,000 yields a statistical precision of plus or minus 3 percentage points (with 95 percent confidence) 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 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 the 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 2002 HCS data collection was funded by grants from 12 private 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/hcs](http://www.ebri.org/hcs)