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COMMITTEES

INTERGOVERNMENTAL AFFAIRS, CHAIRMAN

March 25, 1996

#### THE FIGHT OVER HEALTH CUTS GOES ON THE INTERNET

The fight over Medicaid cuts took to the information superhighway today as State Representative Italo S. Cappabianca debuted his health care cuts home page on the Internet.

A copy of SB1441, a clickable map of Pennsylvania that reveals health care cuts by county and hospital, links to newspaper articles about this legislation and phone numbers of local state representatives are all available on this homepage.

"With the help of this site a Pennsylvania citizen can find out how many people will lose health coverage in his neighborhood or the effect of this bill on their local hospital," Cappabianca stated.

Like last year's fight over the state budget and the school voucher fight, Cappabianca's home page Internet site is an important source of state government information.

Cappabianca invites Pennsylvanians to send him their stories about the struggle to pay for health care or the impact of these cuts on local hospitals.

"These health care cuts are being deliberately rushed through the legislature before the people can realize the full impact of this measure," Cappabianca stated. "My home page seeks to inform the public about this serious matter, before its too late."

To access the health cuts home page the home page address (http://www.libertynet.org/~pahouse/healthcut)

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FEDERAL-STATE RELATIONS, CHAIRMAN

## House of Representatives

COMMONWEALTH OF PENNSYLVANIA
HARRISBURG

To:

**Democratic Members** 

From:

Italo S. Cappabianca

Re:

Potential Idea for a District Mailing: Health Care Survey Case Study

Health Care is an important issue that faces our commonwealth and our nation. While there have been many national studies and one or two state-wide studies. I believe it is important to hear from the residents of our own legislative districts on the issue of health care.

This belief led me to draw up and send a 38 question survey to every household in my legislative district covering three main health care issues; health insurance coverage, out of pocket expenses, and views on health care reform. This survey was based on two different academic surveys.

Using the House Democratic TV and Radio Studio I taped public service announcements urging people to fill out this important survey. I then purchased a minimal amount of cable TV and radio air time in my district to air these announcements. Furthermore, the local newspaper published a press release on this survey. This media coverage began five days before the bulk mailed items were scheduled to be delivered to households.

The response rate was phenomenal; over 7% of all households filled out this detailed 38 question survey on health care. Some three months after sending the surveys, I still receive several returned surveys every week.

Enclosed is a draft copy of the report resulting from this survey, the survey questions used in the mailing and a copy of the survey questions used in a recent statewide Blue Cross survey. If you are interested in surveying your constituents on this issue, using similar questions may help judge regional and other differences in health care coverage, cost and viewpoints. Page five of this package contains an executive summary of this survey.

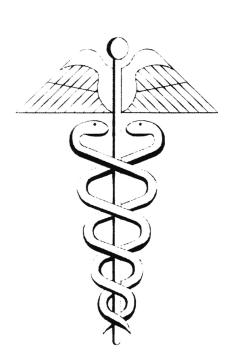
My office would be happy to help you adapt these questions for your own survey. Please contact my office at 7-4358 for assistance.

# Health Care Coverage, Costs and Reform:

## **An Erie Citizen Survey**

Representative Italo S. Cappabianca

May 1994



## Health Care Coverage, Costs and Reform: An Erie Citizen Survey by Representative Italo S. Cappabianca

As part of my ongoing efforts to represent the constituents of the Second Legislative District, I recent conducted a mail survey on health care. This draft report summarizes some of the important findings of this questionnaire. As of May 2, 1994, I have received over 1225 responses to this detailed survey. More continue to return every day, almost two months after they were sent out.

This questionnaire was based on several other dedicated health care surveys that have been used by non-partisan polling agencies. Some thirty eight questions were included in this questionnaire. This survey was mailed to over 17,000 households in the Second Legislative District in early March. The survey had a return address built into the mailer. Survey results were analyzed with statistical software. For almost every question, there was an extremely high level of participation.

These survey results indicate a high level of interest in health care issues and a desire for changes that would lead to less uncertainty about health care coverage and cost. Beyond the general debate over health care reform, I have found two interesting results in this survey. First, there is an extremely high level of agreement on the proposition that people in Erie experience the same problems with health care as the rest of the nation. Many innovative health care developments are occurring in Erie. However, these improvements should not lead to a conclusion that Erie can't benefit from the national debate over health care.

Second, analysis of this survey indicates that many Erie respondents have significant health care costs that they must pay in premiums or in out of pocket expenses. This high level of personal health care costs should also be examined. While recent programs may be bringing corporate health care costs in line, I believe we should examine the level and causes of high health care costs for individuals.

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#### **Executive Summary**

1225 Responses to a Detailed 38 Question Mail Survey mailed to Erie Residents which equals a 7% Return Rate.

#### Health Care Coverage

Only 1 out of every 12 adults report they don't have insurance, but almost 1 out of every 4 working families report that at least one member of their household is not covered by insurance

Approximately 2/3rds of the people who don't have insurance in the survey report that they are currently employed.

Over 80% of working adults below receive their health care coverage through their place of employment and in 97% of these cases, the employee contributes for part of the insurance.

#### Health Care Costs

One out of every Five adults pays more than \$1,000 a year in out of pocket medical expenses.

#### Public Opinion

73% Agree that there is a Crisis in Health Care

88% Agree that People in Erie experience the same problems with Health Care as the rest of the Nation

77% Agree that New Laws are needed to get Universal Coverage

#### Choice of Health Care Reform Plans

66% Favor One of Two Major Reform Proposals
36% Support Managed Competition with Employer Mandates [Clinton and Casey]
30% Support Single Payer System based on Canada

34% Favor the Existing System with Improvements [Cooper Plan]

#### • Public Priorities

Reducing Doctor's Salaries had the lowest priority of twelve different health care priorities listed in the survey; Reducing Health Care costs had the highest priority.

#### **Health Care Coverage**

Overall, survey results indicate that most Erie residents [92.5%] have some type of health care coverage, either from an employer, the government or privately purchased insurance. Approximately seven percent of Erie residents report that they don't have any form of health care insurance. However among Erie residents between the age of 25 and 65, the actual number of uninsured seems to be closer to one in ten.

Who are the uninsured? The demographic makeup of the uninsured shatters some stereotypes. Two thirds of the uninsured have jobs; mainly in the retail, health care or food service sectors. Women are almost twice as likely to be uninsured as men, whether they are employed or not. Among the uninsured, the largest demographic segment is composed of individuals who are males 35 to 45 years old and males and females who are 25 to 35 years old.

To determine the number on uninsured children and spouses, respondents were asked if there was anyone in your family who does not have health care coverage? Overall, one out of every six Erie homes [17.9%] reports that they have a member of their family who doesn't have health care coverage.

Significantly, almost one out of every four [23%] working families reported that they could not cover their entire family with health insurance. The industries that had the highest rates of workers with families that don't have complete coverage is food service, retail and manufacturing. The smaller the business, the more likely that the employee can't cover the entire family. Unfortunately, one out of three people who are self employed report that they don't cover their entire family with health insurance.

#### Where do they get their coverage?

Like national trends, a majority of Erie residents receive their health care coverage through their employer. [54.8%] Because of the aging demographics of the city of Erie and the slightly higher response rates from citizens above 65 years old, the percentage of people who receive health care coverage through government programs like Medicare and Medicaid is probably higher than some other regions of the state.[21.9%] A smaller segment of the population [11.4%] buy insurance outside of their job while [11.9%] of the respondents report that they get their health insurance in some other way.

Among respondents who indicate that they are currently employed, a vast majority receive health care through their employer [81.5%] while smaller numbers buy insurance outside of their job or are not covered by insurance at all. Responses indicate that women are 50% more likely than men to buy insurance outside of work or not to have any insurance.

#### Who pays for their Coverage?

For respondents who are employed, approximately one third [33.6%] indicated that they have employers who pay for all of their health care payments. Over one half of the respondents [52.6%] work for businesses that pay for some of their health care coverage. A smaller number, approximately seven percent [7%], work for business that don't offer insurance or will not contribute towards health care premiums.

#### Health Care Coverage by Size of Employer

Approximately 664 respondents who replied that they have jobs, of which 584 indicated that they work for the private sector. Of private sector employees, approximately one out of every five workers [22.3%]is employed by a company that has less than 25 workers. Approximately one half of the respondents [50.2%] reported that they work for companies that have more than 100 employees. Another nineteen percent [19. %] report that they work for companies with between twenty six and one hundred employees. Finally, approximately eight percent of respondents indicated that are self-employed. According to this survey, health care coverage and costs vary by the size of the company.

Less than 5% of the workers at companies with more than 100 employees report that they don't have insurance. But the percentage of workers without health insurance doubles with smaller companies. Moreover, among self-employed citizens, almost thirty percent don't have health insurance.

Health care contributions toward insurance also vary by the size of the employer. While less than 3% of workers at large companies have to pay the entire cost of insurance, more than 12% of employees at small businesses have to pay the entire cost of insurance without employer contributions.

As reported above, a majority of workers have health coverage, but have to contribute part of the premiums. Among these workers, approximately 1 out of 4 people pay a minimal amount, less than \$25 a month. On the other hand, a larger group, almost one out of every three workers pay more than \$100 per month. In this group, the most frequent employee contribution is somewhere between \$25 and \$100 a month. This contribution is reported by over 40% of the workers who share the responsibility for health care.

For people who have to buy insurance outside of work, the responsibility and cost is shifted away from their employer, making their premiums significantly higher than people who get insurance through work. Over 87% of people who buy insurance outside of work pay more than \$100 per month for coverage, with over 40% paying more than \$200 a month. For workers who cover their families this cost is even higher, over 1/3rd of people with family coverage pay more than \$300 per month.

As a result of these conditions, workers at small businesses and the self-employed pay significantly more health care dollars than workers at bigger companies. While close

to 2/3rds of employees at big businesses pay less than \$100 per month for health insurance, only 1/2 of small business employees pay less than \$100 per month. Less than 10% of big business employees pay more than \$200 per month for insurance while more than 20% of small business employees pay over \$200 per month for insurance. Among the self-employed a majority of people pay more than \$100 per month for insurance; for this group the actual premium is much closer to the \$200 and above figure.

#### Who does their Health Insurance Cover?

Insurance costs vary by the number of people covered. Forty two percent of respondents reported that their insurance covers themselves while twenty nine percent of insurance covered the respondent and spouse and twenty seven percent reported that the insurance covered their entire family.

#### What does their Health Insurance Cover?

The biggest gaps in Insurance coverage for Erie citizens is for routine doctor's visits and prescription drugs. Almost 30% of respondents reported that their insurance did not cover routine doctor's visits while slightly over 30% of respondents wrote that their insurance did not have any coverage for prescription drugs. One third of Erie residents believed that their insurance covered all hospital costs while less than ten percent of respondents reported that their insurance covered all of their prescription costs.

#### **Demographics**

The survey group approximates the demographic background of the residents of the Second Legislative District. While survey respondents were slightly more male than female, census statistics indicate the opposite is actually the case. However, age statistics from basically track census statistics of the survey population. For example, analysis of survey data indicate that approximately 30% of all respondents are older than sixty five years old. According to Census statistics approximately 30% of all households have 1 or more person who is sixty five years or older.

## Health Care Costs How much out of pocket expenses?

#### **Doctors & Hospitals**

Like the issue of premium costs, Erie respondents seem to be divided into two distinct categories in terms of out of pocket expenses. Approximately one half of the people responding to the survey report that their out of pocket expenses for hospitals and doctors in the past twelve months was less than \$250. On the other hand, approximately thirty percent of respondents report out of pocket expenses exceeding \$500 in the past twelve months. Ten percent of the respondents report expenditures exceeding \$1000 in the past year.

#### **Prescription Drugs**

For prescription drugs, many respondents reported significantly less out of pocket expenditures. For example, approximately fifteen percent of respondents reported out of pocket expenses for prescription drugs of more than \$500.

#### **Total Out of Pocket Expenses**

Combining both Questions twelve and thirteen further illuminates the personal cost of health care in the Erie region. The resulting figure represents the total reported out of pocket expenses. Total out of pocket expenses are indicated in the chart below. Please note that these expenses do not include health insurance premiums paid through employers.

| Total Out of Pocket<br>Expense | Total<br>Population | Senior<br>Citizens | Workers<br>Who Get<br>Insurance<br>from their<br>Company | Workers who<br>don't get<br>Insurance<br>from Their<br>Company |  |
|--------------------------------|---------------------|--------------------|--|--|--|
| Less than \$500                | 44.9%               | 49%                | 41%  | 38.5   |  |
| Between \$500 and \$1000       | 34.5%               | 30%                | 40%  | 38.5   |  |
| Over a \$1000                  | 20.5%               | 20%                | 19% -  | 23%  |  |

Total out of pocket expenses vary by family size and age group. Households with children have significantly higher out of pocket medical expenses. The following chart highlights these variations. Approximately 2/3rds of families pay more than \$500 a year in out of pocket medical expenses.

| Percentage of Respondents | Less than \$500<br>Out of Pocket | Between \$500-1000<br>Out of Pocket | Over \$1,000<br>Out of Pocket |
|---------------------------|----------------------------------|-------------------------------------|-------------------------------|
| No Children               | 50%                              | 32%                                 | 18%                           |
| Children                  | 34%                              | 42%                                 | 24%                           |

Age differences also correlate with changes in out of pocket expenses, even correcting for different family sizes. Only twenty percent of all respondents below the age of 35 report out of pocket expenses exceeding \$750 per year. However, this number increases to approximately one out of every three people during the ages from 35 to 65. The percentage of people with high out of pocket expenses decreases to 27% for people who are above 65 years old. This decrease is probably attributable to increased use of

Medicare and Medicaid.

Out of pocket expenses also vary by type and size of employers. The following analysis calculated costs using three different types of insurance policies. By category, most workers had much lower out of pocket expenses than other demographic groups.

Highest percentage of Out of Pocket Expenses beyond \$1,000 out of 8 Industries

| Individual    | Individual & Spouse      | Family        |
|---------------|--------------------------|---------------|
| Retail        | Service                  | Retail        |
| Manufacturing | Retail                   | Service       |
| Service       | Utilities/Transportation | Manufacturing |

However, among purchasers of individual policies, the retail and manufacturing sectors had significantly higher out of pocket expenses than other groups of workers. Health care workers had significantly less out of pocket expenses than other workers. For spousal policies, the Service, Retail and Utility sectors had the highest levels of out of pocket expenses. For family insurance policies, retail, service and manufacturing sectors had the highest percentage of workers with high out of pocket expenses.

Out of pocket expenses can differ by the size of the company that an employee works for. For purchasers of single insurance policies, almost two thirds of workers have out of pockets expenses of less than \$500 per year. Unfortunately, less than half of the workers in small businesses have a similar expenses and almost one third of all self-employed workers have out of pocket expenses more than \$1,000.

For people with spousal policies, out of pocket expense are much higher. Almost two thirds of workers have out of pocket expenses of more than \$500 per year. There does not seem be significant differences between different sizes of employers and the self-employed. For family policies an even larger percent of workers have higher out of pocket expenses than spousal policies, almost 70% above the \$500 minimum. While slight cost differences emerge between different sizes of employers, 40% of self-employed workers report out of pocket expenses exceeding \$1000 per year. This rate among the self employed is probably confirmation of data presented earlier in this analysis which indicated that a majority of the self employed pay more than \$100 per month for insurance while 40% pay more than \$200 a month in premiums.

#### **Opinions on Health Care Reform**

What are the health care priorities of Erie Citizens?

In addition to questions relating to personal health care information, respondents were also asked to rank twelve different health issues on a scale from very important to not at all important.

| Quest.<br># | Question Text and Number of Ratings of<br>Very Important                        | Percentage of<br>Ratings of Very<br>Important |
|-------------|---|---|
| 26          | Keeping Down the Cost of Health Care [1013]                                     | 83.2%   |
| 27          | Reducing the Paperwork to Reduce<br>Health Care Costs [896]                     | 73.6%   |
| 35          | Providing Quality Health Care to the Elderly [893]                              | 73.4%   |
| 30          | Making Health Insurance Available to Everyone[850]                              | 69.8%   |
| 32          | Controlling the Amounts paid in Medical Malpractice Suits Against Doctors [850] | 69.8%   |
| 25          | Providing Quality Health Care for<br>Everyone [841]                             | 69.1%   |
| 28          | Preventing Unnecessary Medical Tests [789]                                      | 64.8%   |
| 31          | Continue Providing Veteran's Medical Care [712]                                 | 58.5%   |
| 34          | Adding Long-Term Care to Medicare [705]   | 57.9%   |
| 33          | Increase Research in Women's Health<br>Issues [541]                             | 44.5%   |
| 36          | Investing Money in Technical Equipment that is used for Health Care [457]       | 37.6%   |
| 29          | Reducing Salaries Paid to Doctors [421]   | 34.6%   |

Notes on health care priorities

Among health care workers, there was a 10% gap between their support of reducing doctor's salaries and other people's agreement with this issue. However, even without including health care workers, the priority of reducing salaries paid to doctors would still be the least popular priority among respondents.

#### Is there a crisis?

One of the most debated points in the health care debate is whether a crisis exists with health care today? Some seventy three percent [73%] of respondents agreed that there is a crisis with health care today while only nineteen percent of respondents believed that there was not a crisis in the health care system. [19.3%] Approximately seven percent of respondents checked the don't know response.

#### **Health Care Fears?**

Moreover, the top two fears expressed by respondents in this survey is that their insurance policy doesn't cover enough [33.1%] and that they can't afford insurance [32.4%]. A relatively small number of respondents [4%] report that they are concerned that they are unable to find a local doctor that accepts their insurance.

#### Should there be universal coverage?

Another widely debated aspect about health care reform is universal coverage. Using a widely tested survey question about the need for universal coverage, Erie respondents overwhelming saw a need for Universal coverage. Over 3/4 of respondents agreed with the statement that legislation is needed to provide universal coverage. And people strongly in favor of this statement outnumbered people strongly against this idea by an almost 5 to 1 ratio. The exact percentages are the following.

Strongly Agree 56%
Mildly Agree 21%
Mildly Disagree 8%
Strongly Disagree 11%
Don't Know 4%

#### What type of Health Care Reform do people support?

People were given three choices of health care reform plans; Managed Competition with Mandates, A Single Payer Plan and the existing system with some improvements. Responses were almost equally divided their support between each of these plans.

|  |       |      |        | Working  |
|--|-------|------|--------|----------|
|  | Total | Male | Female | Families |
| Managed Competition with Employer Mandates | 36%   | 31%  | 43%    | 43%      |
| Single Payer System                        | 30%   | 30%  | 30%    | 27%      |
| Supporting Significant<br>Change           | 66%   | 60%  | 73%    | 70%      |
| Existing System with Improvements          | 34%   | 39%  | 27%    | 30%      |

While people seem divided on the type of reform necessary; two-thirds of the people support major reform that includes universal coverage through employer mandates or a single payer system. Support for the various plans varies by gender and age. As listed above there is a twelve percentage point gap between male and female support of keeping the existing system with improvement. Support for the various plans also vary by the level of employer contribution to health insurance. Support for the existing system is the highest among workers whose companies pay all of their premiums. However, even in this category workers support significant reform 60% to 40%. Among workers who pay part or all of their premiums, managed care is supported by 43% of respondents, with significant reform endorsed by 71% of respondents.

| Industries where Employees Support Managed Competition and Single Payer by More than 70% |
|--|
| Food Service   |
| Retail   |
| Manufacturing  |
| Utilities/Transportation   |

#### Who Should Pay for those who Can't Afford Health Care?

Respondents were asked to designate which agency or institution should be primarily responsible for paying the health care bill of those who cannot afford it? Of the people who chose a specific agency the responses are listed below.

| Federal Government  | 51.1% |
|---------------------|-------|
| Insurance Companies | 18.2% |
| State Government    | 13.3% |
| Do Not Fund         | 12.0% |
| County Government   | 3.6%  |
| Private Business    | 1.8%  |

### Your Opinion Counts On Health Care

Health care reform is one of the leading issues of our time and one that will affect the lives of each of us as well as generations to come. It is important to let your elected state and Congressional legislators know what your thoughts and feelings are concerning this important issue.

As your state legislator and as Chairman of the Pennsylvania House Committee on Federal-State Relations, I will be in a position to act upon this issue and would appreciate your input. Please take the time to fill out this survey and return it so I can best represent your views.

This survey will be treated with confidentiality. However, if you would like my office to contact you about a health care problem, please write your name and telephone number on the survey. Thank you.

| 1. DO YOU HAVE HEALTH CA<br>MEDICARE, MEDICAID, PRIVAT<br>———  |  | R AN HMO? [CHECK  | ONE]                       |
|--|--|-------------------|----------------------------|
| 2. IS THERE ANYONE IN YOUR   | FAMILY WHO DOES NOT<br>YES NO              |                   |                            |
| 3. WHAT IS YOUR GREATEST I   | NCE  |                   | DUAVINO A DDEEVICTING      |
| AFRAID OF LOSING INSU CONDITION  | IRANCE DUE TO BEING LA                     | D OFF/JOB 1022 OF | A HAVING A PHEEXISTING     |
| CURRENT INSURANCE DUNABLE TO FIND A LOCA   |  |                   | POCKET EXPENSES            |
| 4. HOW DO YOU GET HEALTH BUY OWN HEALTH INSU PROVIDED BY EMPLOYE   | RANCE OUTSIDE OF YOU                       |                   | KONE]                      |
| PROVIDED BY THE GOV<br>SOME OTHER WAY<br>DON'T HAVE INSURANCE  | ERNMENT [MEDICAID OR                       | MEDICARE]         |                            |
| IF YOU   | DON'T HAVE INSURANCE                       | , GO TO QUESTION  | 13                         |
| 5. HOW MUCH DOES YOUR EN ALL OF THE PAYMENTS SOME OF THE PAYMENT NONE OF THE PAYMENT EMPLOYER DOESN'T OF RETIRED/UNEMPLOYED DON'T KNOW | rs<br>rs                                   | HEALTH INSURANCE  | ≣?                         |
| 6. HOW MUCH DO YOU PAY PE<br>LESS THAN \$25<br>\$101-\$200   | ER MONTH FOR YOUR HE \$26-\$50 \$201-\$300 | \$5               | 51-\$100<br>ORE THAN \$300 |
| 7. WHO DOES YOUR INSURAN YOURSELF YOURSELF AND SPOUSI YOUR ENTIRE FAMILY DON'T HAVE INSURANCE  | E  |                   |                            |
| 8. DOES YOUR INSURANCE CO  |  | NONE              | DON'T KNOW                 |

| 9. DOES YOUR INSURANCE COV                | 'ER HOSPITALS COSTS?   |
|---|--|
| ALL                                       | SOME\PARTIAL NONE DON'T KNOW                                   |
| 10. DOES YOUR INSURANCE CO                | VER PRESCRIPTION DRUGS? SOME\PARTIAL NONE DON'T KNOW           |
|   |  |
| 11. IS YOUR YEARLY DEDUCTIB NO DEDUCTIBLE | _E?<br>< \$500   |
| 12. IN THE PAST 12 MONTHS HE              | OW MUCH OUT OF POCKET EXPENSES HAVE YOU HAD TO PAY TO          |
| HOSPITALS AND DOCTORS?                    |  |
| LESS THAN \$100                           | \$100-\$250    \$251-\$500<br>\$750-\$1,000    > \$1,000       |
| \$501-\$750                               | \$750-\$1,000 > \$1,000  |
| 13 IN THE PAST 12 MONTHS HO               | OW MUCH OUT OF POCKET EXPENSES HAVE YOU HAD TO PAY FOR         |
| PRESCRIPTION DRUGS?                       | WINDOW OUT OF A CONCENTRAL TO THE TOTAL TOTAL                  |
| LESS THAN \$100                           | \$100-\$250 \$251-\$500  |
| \$501-\$750                               | \$750-\$1,000 > \$1,000  |
|   |  |
| EOR STATISTIC                             | AL PURPOSES, PLEASE ANSWER THE FOLLOWING                       |
| 14. AGE                                   | AL FUNFOCES, FELACE ANOWEN THE FOLLOWING                       |
|   | 36-45  |
| 15-25                                     | 66-75 75+  |
|   |  |
| <b>15.</b> SEX: M                         | _F   |
| 16. CURRENT NUMBER OF CHIL                | DREN IN HOUSEHOLD  |
| 17. WHAT IS YOUR ZIP CODE: _              | <i>e</i>   |
| 18. ARE YOUR EMPLOYED:                    | Y N  |
| 19. TYPE OF EMPLOYER                      |  |
| SERVICE RELATED                           | UTILITIES/TRANSPORTATION RETAIL                                |
| GOVERNMENT                                | HEALTH CARE FOOD SERVICE OTHER MANUFACTURING OTHER             |
| PLASTIC INDUSTRY                          | OTHER MANUFACTURING OTHER                                      |
| 20. DOES YOUR EMPLOYER HAV                | /E   |
| LESS THAN 25 EMPLOYEE                     |  |
| 100+ EMPLOYEES                            | I AM SELF EMPLOYED   |
|   |  |
|   |  |
|   | You Decide   |
|   | Tou Declue   |
|   |  |
| 21. IS THERE A CRISIS IN THE HEAT         | H CARE SYSTEM?   |
|   | YES NO DON'T KNOW  |
|   |  |
| 22. DO YOU THINK THAT PEOPLE IN           | ERIE EXPERIENCE THE SAME PROBLEMS WITH HEALTH CARE AS THE REST |
| OF THE NATION                             |  |
|   | YESNODON'T KNOW  |
| 23 DO YOU AGREE OR DISAGREE               | THAT LEGISLATION IS NEEDED TO ENSURE THAT EVERY AMERICAN HAS   |
| COVERAGE FOR ALL MEDICAL EXP              | ENSES INCLUDING DOCTOR VISITS AND HOSPITAL CARE?               |
| STRONGLY AGREE                            |  |
| MILDLY AGREE                              |  |
| MILDLY DISAGREE STRONGLY DISAGREE         |  |
| DON'T KNOW                                | continued on page 4  |

| COVERAGE HAS SPURRED THE DEBATE ON HEALTH CAR<br>SUGGESTED. UNDER EACH OF THESE APPROACHES, EX<br>WHICH PROGRAM DO YOU FAVOR? [CHECK ONE]  | E REFORM<br>ISTING MEI  | . A NUMBE<br>DICARE CO | R OF APPF<br>VERAGE V | ROACHES H<br>VILL STILL ( | IAVE BEEN<br>CONTINUE. |  |  |
|--|-------------------------|------------------------|-----------------------|---------------------------|------------------------|--|--|
| MANAGED COMPETITION  COMPETING HEALTH INSURANCE COMPANIES WOULD O WOULD BE REQUIRED TO PROVIDE YOU WITH THAT P COULD PURCHASE BETTER COVERAGE OR SEE DOCTO COVERAGE. (THIS IS THE CLINTON & CASEY APPROACH   | ACKAGE OF<br>ORS OUTSID | BENEFITS.              | FOR ADDIT             | IONAL PAYM                | IENTS, YOU             |  |  |
| SINGLE PAYER  A GOVERNMENT AGENCY WOULD BE ESTABLISHED TO SET FEES AND TO MAKE PAYMENTS FOR MEDICAL SERVICES RENDERED TO YOU. YOU WOULD NO LONGER HAVE TO PAY HEALTH INSURANCE PREMIUMS OR FILL OUT INSURANCE FORMS BUT YOUR TAXES WOULD INCREASE TO FUND THIS PROGRAM. THERE WOULD BE NO LIMITATION IN YOUR CHOICE OF DOCTORS. UNIVERSAL COVERAGE. (CANADA HAS ADOPTED THIS APPROACH) |                         |                        |                       |                           |                        |  |  |
| EXISTING SYSTEM (WITH IMPROVEMENTS)  PROPOSED IMPROVEMENTS INCLUDE PROHIBITING IN BECAUSE OF A PRE-EXISTING MEDICAL CONDITION A CHANGE JOBS. NO GUARANTEE OF UNIVERSAL COVER NO OPINION  | ND ALLOWIN              | NG YOU TO              | RETAIN YO             | UR COVERA                 | AGE IF YOU             |  |  |
| 25. FOR EACH OF THE FOLLOWING HEALTH ISSUES, PLE<br>SOMEWHAT IMPORTANT, NOT TOO IMPORTANT, OR NOT  |                         |                        |                       |                           |                        |  |  |
| PROVIDING QUALITY HEALTH CARE FOR EVERYONE   | very important          | somewhat important     | not too<br>important  | not at all important      | don't<br>know          |  |  |
| KEEPING DOWN THE COST OF HEALTH CARE   | very<br>important       | somewhat important     | not too<br>important  | not at all important      | don't<br>know          |  |  |
| REDUCING THE PAPERWORK TO REDUCE HEALTH CARE COSTS   | very<br>important       | somewhat<br>important  | not too<br>important  |                           | don't<br>know          |  |  |
| PREVENTING UNNECESSARY MEDICAL TESTS   | very<br>important       | somewhat important     | not too<br>important  | not at all important      | don't<br>know          |  |  |
| REDUCING SALARIES PAID TO DOCTORS  | very important          | somewhat important     | not too important     | not at all important      | don't<br>know          |  |  |
| MAKING HEALTH INSURANCE AVAILABLE TO EVERYONE  | very important          | somewhat important     | not too important     | not at all important      | don't<br>kn <b>ow</b>  |  |  |
| CONTINUE PROVIDING VETERAN'S HEALTH CARE   | very important          | somewhat important     | not too important     | not at all important      | don't<br>know          |  |  |
| CONTROLLING THE AMOUNTS PAID IN MEDICAL MALPRACTICE SUITS AGAINST DOCTORS  | very<br>important       | somewhat<br>important  | not too<br>important  | not at all<br>important   | don't<br>know          |  |  |
| INCREASE RESEARCH IN WOMEN'S HEALTH ISSUES   | very<br>important       | somewhat important     | not too<br>important  | not at all important      | don't<br>know          |  |  |
| ADDING LONG-TERM CARE TO MEDICARE  | very important          | somewhat important     | not too important     | not at all important      | don't<br>know          |  |  |
| PROVIDING QUALITY HEALTH CARE FOR THE ELDERLY  | very important          | somewhat important     |                       | not at all important      | don't<br>know          |  |  |
| INVESTING MONEY IN TECHNICAL EQUIPMENT THAT IS USED FOR HEALTH CARE  | very<br>important       | somewhat<br>important  | not too<br>important  | not at all<br>important   | don't<br>kn <b>ow</b>  |  |  |
| 26. SOME CRITICS OF PROVIDING UNIVERSAL HEALTH CARE FOR ALL AMERICANS HAVE SAID THAT THIS MAY COST SOME JOBS; DO YOU BELIEVE THAT GUARANTEEING ALL AMERICANS UNIVERSAL HEALTH COVERAGE IS WORTH SOME SHORT TERM JOB LOSSES? YESNODON'T KNOW  |                         |                        |                       |                           |                        |  |  |
| 27. SOMEHEALTH CARE AGENCIES PROVIDE HEALTH CAR AND DO NOT MAKE ENOUGH MONEY TO PAY THE ENTIR RESPONSIBLE FOR THE PAYING THE HEALTH CARE BILL CFEDERAL GOVERNMENT  | E BILL. WH              | O DO YOU               | THINK SH              | OULD BE F                 | SURANCE<br>'RIMARILY   |  |  |
| STATE GOVERNMENT COUNTY GOVERNMENT INSURANCE COMPANIES PRIVATE BUSINESSES DO NOT FUND SOMETHING ELSE DON'T KNOW  |                         |                        |                       |                           |                        |  |  |
|  |                         |                        |                       |                           |                        |  |  |

24. THE HIGH COST OF HEALTH CARE INSURANCE AND THE LARGE NUMBER OF PEOPLE WITHOUT HEALTH CARE