

WHAT MATTERS MOST

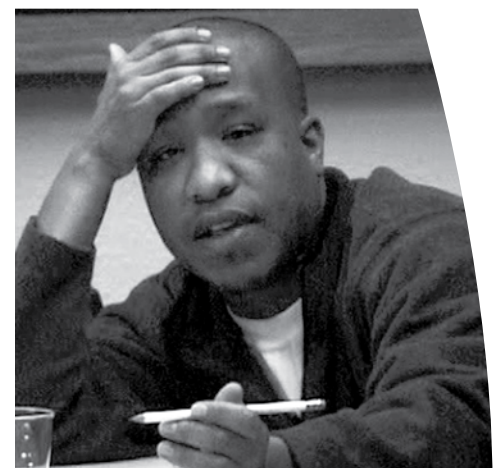
Californians'
Priorities
for Healthcare
Coverage

May 2009

CENTER
FOR HEALTHCARE
DECISIONS
when there are no easy answers.

chcd.org

Executive Summary



If you

were

designing

a health

plan...

WHAT MATTERS MOST

Californians' Priorities for Healthcare Coverage

When it comes to healthcare benefits, Californians do not expect insurance to pay for everything. But they are very clear about the medical problems that matter most for coverage.

In an effort to understand how people prioritize healthcare benefits, the Center for Healthcare Decisions (CHCD) developed *What Matters Most* to address an important question for state and national healthcare reform: what types of medical problems are essential for coverage? This project is part of CHCD's on-going commitment to bring the public's voice to healthcare policy.

Approach

What Matters Most was conducted in two stages: a random-sample telephone survey to learn how Californians prioritize coverage of various medical situations and a series of discussion groups to identify the reasons that differentiate higher and lower priorities.

Field Research Corporation surveyed 1,019 Californians, presenting a series of short medical vignette ranging from curable cancer to mild forgetfulness.

Examples:

A 24-year-old woman has long-standing asthma that prevents her from being active. With an inhaler and medications, she can live a more normal life.

A 32-year-old man is very active with sports and his glasses often get in the way. Laser surgery would correct his vision so he wouldn't need glasses anymore.

Each respondent was randomly assigned 19 vignettes (from 87 total) and asked two questions for each:

- 1) On a scale of 1 to 10, what priority would you give to cover this if you were designing a health plan for a general population in California?
- 2) Given that the more that health insurance covers, the more the plan may cost you and others, would you want health insurance to cover this service or not?

Following the phone survey, CHCD conducted 15 two-hour group discussions with 176 community members throughout California. At each session, group members discussed a sampling of the vignettes, providing the rationale for why some services are rated high, mid-level and lower priority.

Results

- There is strong agreement among Californians that insurance coverage is most important for saving lives, preventing illness and restoring or maintaining basic activities of living.
- When medical problems do not have a major impact on an individual's functioning or life span, or when treatments are not likely to work well, Californians consider them a lower priority for coverage.
- Certain situations – such as those regarding obesity and substance abuse – elicit intense debate, reflecting differing views about illness and the obligations of health insurance.
- Several themes dominate discussions about coverage priorities, including:

Personal fulfillment. Self-esteem, happiness, good mental health and individual achievement are goals that some view as high priority for

coverage. Others regard them as intangible, without boundaries and not the purpose of health insurance. This topic divides discussion group members more than any other.

Personal responsibility. Seen as important in avoiding medical problems or taking actions to resolve them, it is a value that everyone embraces. But for many, a person's lack of personal responsibility is the overriding rationale for making a problem a lower priority for coverage.

Prevention. As *saving lives* is the preeminent health outcome, preventive care is regarded as the best use of health insurance. Its value is two-fold: avoiding or reducing suffering and saving societal and personal dollars.

Based on the survey data and discussion findings, Californians' coverage priorities are grouped at three levels:

What Matters Most. Medical situations that matter the most to most people:

- Problems that are likely to lead to illness, disease, disability or death if not prevented or treated.
- Problems that interfere with functioning that is essential for the most important activities of daily living (work, self-care, family care).
- Problems that may bring much higher societal costs if not treated early.

Among these high-priority situations, people support coverage when:

- Less expensive or non-medical ways of treating the problem have been tried first.
- There is medical treatment available that is proven to be effective.

What Matters Some. Medical situations that some people also regard as important for coverage:

- Problems that cause physical discomfort but do not interfere with major activities of living.
- Problems that bring personal distress to the individual.
- Non-medical services that are designed to help individuals become or remain healthy and fit.

What Matters Least. Medical situations that fewer people regard as important for coverage:

- Problems that are unsightly but not physically harmful.
- Problems that delay or prevent individuals from pursuing recreational activities.
- Treatments that are requested by patients for convenience or to feel reassured.
- Problems that are not medically significant or would resolve over time without treatment.

Next Steps

As healthcare and policy leaders explore ways to reduce costs and extend coverage to more people, *What Matters Most* results could help develop a prototype basic coverage plan:

- 1) Focus first on those medical situations that matter most, assuring that there are no financial barriers to getting the care. Foregoing ‘inconsequential’ care is no bargain unless patients can obtain and afford the care that matters most.
- 2) Review the services rated at mid-level priority – such as dental, vision, substance abuse and obesity – and develop options that balance benefits with resources.
- 3) Consider developing a tiered cost-sharing model for lower-priority situations and for medical treatments with low effectiveness.
- 4) Keep the public actively involved in these decisions. Their participation can help policymakers design coverage standards that are most likely to be accepted by individuals in their roles as patients, as taxpayers and as concerned citizens desiring a system that is fair and affordable.

The entire *What Matters Most* report can be downloaded at www.chcd.org or contact CHCD for print copies.



3400 Data Drive
Rancho Cordova, CA 95670
916.851.2828

chcd.org

Engage your public. We can help.

The Center for Healthcare Decisions (CHCD) is a nonpartisan, nonprofit 501(c)3 organization near Sacramento, California. Understanding there are no easy answers in healthcare policy, we are dedicated to advancing healthcare that is fair, affordable and reflects the priorities of an informed public.

Contact CHCD for more information.

chcd.org / 916.851.2828

