

**ANALYSIS OF PUBLIC OPINION TOWARD
HEALTH POLICY IN THE
MEDICAL CENTER OF DELAWARE MARKET AREA**

by

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PREFACE

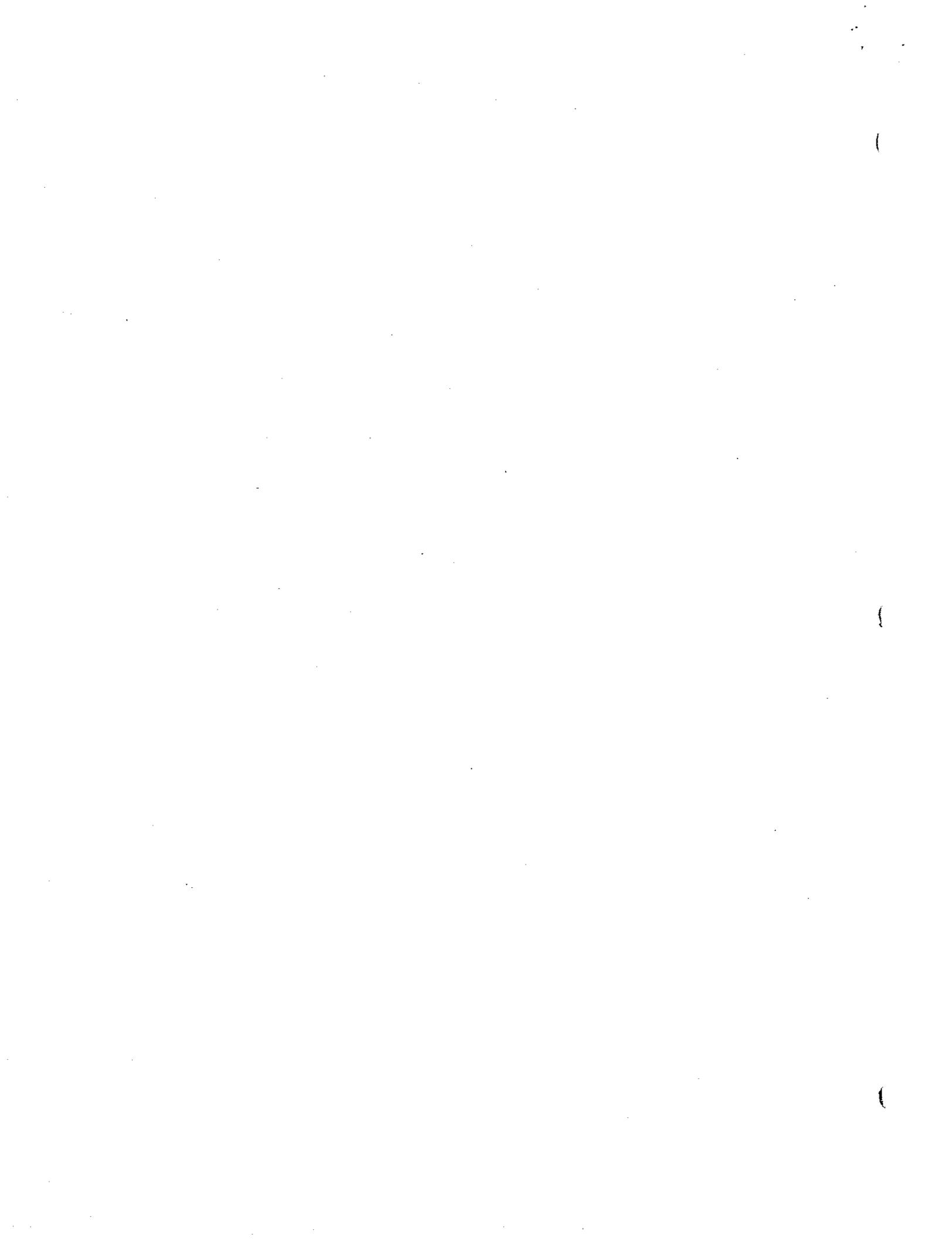
The primary guidance and support for this project came from the Medical Center of Delaware marketing, public affairs, and development leadership. Phil Wescott, Rex Holloway, Bob Still, and Ed Golin, a consultant to the Medical Center, provided keen advice and ideas through many long meetings. Michele Schiavani, Barbara Hearne, and Barbara Teter helped to refine the research questions, survey, and analysis. We thank the Medical Center personnel for their professional and friendly support throughout this project.

The staff of the Center for Applied Demography and Survey Research conducted the interviews, checked questionnaires, coded and keypunched responses, and set up SPSS control files. We thank all of the Center's staff for their excellent assistance.

Drs. Anne Mooney and David Ermann received the survey instrument, read the first draft of this report, and made many helpful suggestions. We greatly appreciate their insights and help.

Finally we thank the over 900 individuals who were willing to take the time to share their thoughts about health care policy and issues. This report is built upon their ideas and concerns.

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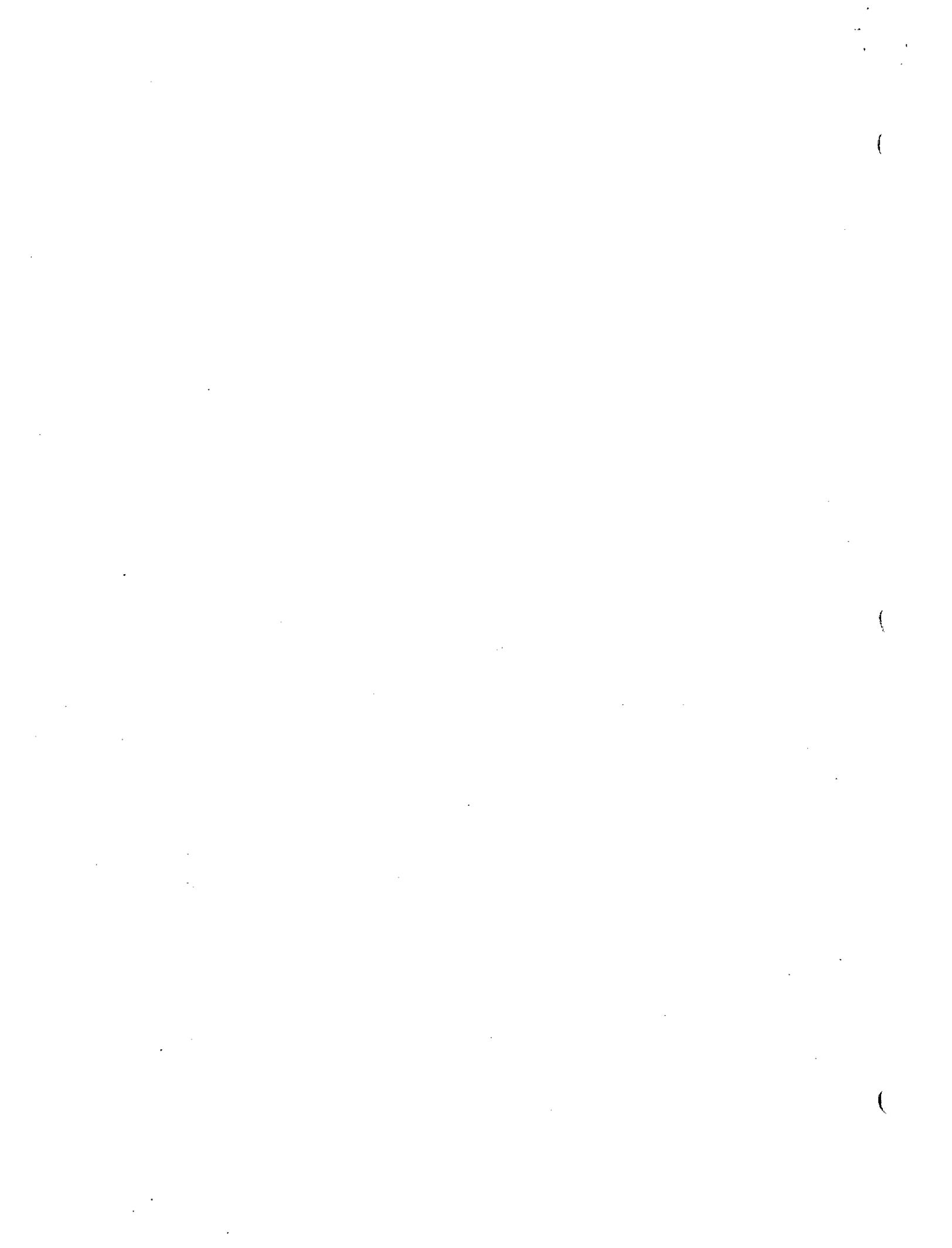


INTRODUCTION

The health care field is in a state of flux and reexamination. The nation is facing the exploding cost of health care, the escalating number of uninsured Americans, and the increased threat of AIDS and TB. With the victory of Bill Clinton, an advocate of universal access to health care, the health care system seems poised for change.

A key determinant of the scope and direction of change that will take place will be public opinion about our health care system. The views of the general public toward the health care system and institutions within the system will play a critical role in shaping the future of health care in this nation and individual states.

With this in mind, the Medical Center of Delaware (MCD) contracted with the Center for Applied Demography and Survey Research at the College of Urban Affairs and Public Policy, University of Delaware, to undertake a public opinion study of attitudes of the general public and of recent MCD patients toward health policy issues in the MCD's market area. This report summarizes the preliminary findings from the survey.



METHODOLOGY

The purpose of the survey was to ascertain the attitudes of individuals in the MCD's market area and recently discharged MCD patients about health care policy issues. The survey instrument was developed by the College of Urban Affairs and Public Policy with the assistance of the MCD's leadership group in marketing, public affairs, and development (named in the Preface). Questions from national, state, and other surveys were reviewed for inclusion. Some questions were written exclusively for this project. The instrument was pretested with 40 respondents in late September and early October, 1992.

Two samples were selected, a market area (or general population) sample and a recent MCD patient sample. The MCD market area was defined as New Castle County, DE and the adjoining zip code areas in DE, NJ, PA, and MD. This included areas in Kent, Delaware, Salem, Cecil, and Chester counties. Respondents were selected to be interviewed using the random digit dial method. A procedure was utilized to select sample members at random from each household. The patient sample was randomly selected from a list of patients discharged from the MCD during the period of August, 1991 through July, 1992. A procedure was used to interview the individual who had been an MCD patient, but when the patient was not identifiable or available another member of the household was interviewed.

The market area sample size was 606 respondents. Sampling error in a sample of this size is +/- 4 percent at the 95 percent level of confidence. Thus, a reported percentage of 40 percent represents a range of 36 to 44 percent given sampling error. The patient sample was 305 respondents. Sampling error for a sample of this size is +/- 6 percent.

The telephone survey was conducted from October 9, 1992 to November 12, 1992 by professional interviewers. Calls were made

from 9 a.m. through 9 p.m. Up to 5 callbacks were made as necessary to reach a member of the randomly chosen household.

RESULTS

The market area sample was primarily drawn from New Castle County (Table 1). Responses from recent MCD patients differed little from those in the market area sample. Thus, we focus the reporting of the results on the market area sample and discuss how the former patient sample differed later in this report.

Health Care System

In general the market area sample was positive about the health care system. They were most positive about the quality of care and most concerned about the cost of care. The respondents believed in the principle of equal access to health care but in general have not experienced a problem with access.

Over 70 percent of the market area sample judged the quality of health care available to them and their families as good or excellent (Table 2). Under 10 percent viewed the quality as poor. Over 6 in 10 of the general sample viewed the health care system as either basically sound or working but in need of some changes (Table 3). While almost three-quarters of the public expressed the need for some or significant changes, few (7.9%) judged the system beyond repair. These results suggest the greater New Castle County public is open to changes in the current system of health care but not radical changes.

The biggest problem in the health care system is defined in many different ways, but common to almost all the answers were cost factors (Table 4). On this open-ended question, 43.7 percent stated that the biggest problem was that health care was too expensive or that costs were inflated. Another 14.5 percent complained that elderly and low income people either could not afford care or were underinsured. The third most frequent response, cited by 6.1 percent of the respondents, was that insurance rates are too high or that insurance does not cover

Table 1

Characteristics of the Market Area Sample

RESIDENCE

New Castle County	80.5%
Kent County	1.8%
Delaware County	3.0%
Chester County	3.8%
Salem County	4.8%
Cecil County	6.1%

FORMAL EDUCATION

Less than high school graduate	10.1%
High school graduate	34.8%
Some college	18.8%
College graduate	25.7%
Post graduate	10.1%
Refused/Don't Know	5.0%

AGE

18 - 24	8.4%
25 - 44	46.2%
45 - 64	26.1%
65 or older	18.6%
Refused	0.7%

RACE

White/Caucasian	83.2%
Black	11.4%
Hispanic	1.2%
Other (including refused)	4.3%

INCOME (Annual Household)

Under \$15,000	11.9%
\$15,000 - \$29,999	17.0%
\$30,000 - \$44,999	20.0%
\$45,000 - \$59,999	16.3%
\$60,000 and above	21.8%
Refused/Don't Know	13.0%

SEX

Male	39.3%
Female	60.7%

Table 2

Q1: In general how would you rate the quality of health care available to you and your family – EXCELLENT, GOOD, FAIR, or POOR?

MARKET AREA

Excellent	22.9%
Good	46.4%
Fair	21.8%
Poor	8.1%
Don't Know	0.8%

Table 3

Q2: In your view, is our health care system basically sound, working but needs some changes, could work but needs significant changes, or is it beyond repair and needs to be rebuilt?

MARKET AREA

Basically sound	16.8%
Working but needs some changes	43.2%
Could work with significant changes	29.4%
Beyond repair; needs to be rebuilt	7.9%
Don't know	2.6%

Table 4

Q3: What is the biggest problem that you see in our health care system?

MARKET AREA

Costs (care too expensive, inflated costs)	43.7%
Elderly/low income people can't afford costs, underinsured	14.5%
Insurance (rates too high, doesn't cover medicine)	6.1%
Insurance (disparity between doctor's charges and coverage)	2.5%
Availability of family doctors	2.1%
No problem	3.8%
Other problem specified	19.1%
Don't know /Refused	8.2%

enough, e.g., prescription medicines. The next most frequent criticism, mentioned by 2.5 percent of the respondents, was the gap between doctors' charges and insurance coverage. Thus, two thirds of the respondents cited a cost item in naming the biggest health care problem.

Not surprisingly, when we gave respondents a list of statements about five possible problems in the health care system, almost every respondent (97%) agreed with the statement that "The cost of health care is too great." (Table 5) Such unanimity is rare in surveys. Large majorities also agreed that too many people are not covered by medical insurance (80.4%) and too many people cannot get the health care services they need (84.3% agreed). In contrast, only 35.6 percent agreed that the quality of health care is inadequate.

Costs

In sharp contrast to the agreement on the nature of the central problem in the health care system, the public offered many different views about the main reason why health care costs are rising. The most frequently mentioned reasons for rising health care costs were malpractice insurance and lawsuits (17.7%), too many people not paying and not having insurance (12.2%), doctors, hospitals, and drug companies charging too much (10.1%), doctors charging too much (6.9%), and problems in the system, e.g., everyone trying to get rich (5.6%) (Table 6).

The tendency to spread the blame for health care cost inflation around is also reflected in the public's responses to eight specific possible reasons for the cost increases. A majority of the market area sample judged hospital charges (61.7%), doctors' charges (58.3%), people without insurance whose health care costs have to be paid (55.1%), and lawsuits against doctors and hospitals (53.5%) as very important in causing the rapidly increasing cost of health care in the country (Table 7). Slightly under a majority (48.7%) viewed the cost of prescription drugs as a very important reason. While certainly viewed by many

Table 5

Q4: I am going to read to you a list of possible problems in our health care system. Please tell me whether you AGREE or DISAGREE with each.

	MARKET AREA		
	Agree	Disagree	DK
a. Too many people aren't covered by medical insurance.	92.4%	4.0%	3.6%
b. The cost of health care is too great.	97.0%	2.5%	0.5%
c. The quality of health care is inadequate.	35.6%	59.4%	5.0%
d. People do not do what they should to stay healthy.	80.4%	14.7%	5.0%
e. Too many people cannot get the health care services that they need	84.3%	10.9%	4.8%

Table 6

Q5: In your view, what is the main reason for rising health care costs?

MARKET AREA

Malpractice insurance /lawsuits	17.7%
Too many people not paying and not having insurance	12.2%
Charges too high (doctors, hospitals, drugs)	10.1%
Doctor's charges	6.9%
System (everyone trying to get rich)	5.6%
Insurance company charges	4.6%
Greediness of AMA	3.8%
Inflation	3.0%
Modern technology	3.0%
Prescription drugs (costs differ between pharmacies)	2.5%
Abuses of system	2.0%
Paperwork	1.7%
Cost of living	1.7%
Other	11.9%
Don't know /Refused	13.8%

Table 7

Q6: I'm going to mention several reasons that might be causing the rapidly increasing cost of health care in this country. Please rate each on a scale from 1 to 5 where 1 means it is NOT an IMPORTANT reason and 5 is a VERY IMPORTANT reason why health care costs are rising.

	MARKET AREA						
	Not Important					Very Important	DK/NS
	1	2	3	4	5	9	
a. Hospital charges.	1.7%	1.8%	13.5%	20.8%	61.7%	0.5%	
b. New medical equipment and technology.	5.0%	7.3%	20.8%	23.3%	41.9%	1.8%	
c. Doctor's charges.	1.3%	3.5%	17.0%	19.6%	58.0%	0.3%	
d. People without insurance whose health care costs have to be paid.	2.3%	5.0%	16.3%	19.1%	55.1%	2.1%	
e. The cost of prescription drugs.	3.5%	7.6%	18.2%	21.3%	48.7%	0.8%	
f. The aging of our population.	4.0%	12.4%	27.4%	24.8%	29.4%	2.6%	
g. Lawsuits against doctors and hospitals.	3.6%	7.8%	14.7%	16.8%	53.5%	3.6%	
h. Unnecessary treatments and operations.	4.5%	11.2%	26.9%	24.6%	30.9%	2.0%	

as reasons for health care cost inflation, new medical equipment and technology (41.9%), the aging of the population (29.4%), and unnecessary treatments and operations (30.9%) were not cited as frequently as very important reasons for increasing costs.

The public in the greater New Castle County area, thus, was less likely to view "demand" factors such as the demand for the most technologically sophisticated treatment, the need to serve more people with major medical problems, i.e., the growing elderly population, or the desire for treatments and operations which may not be needed, as the primary explanation for health cost inflation. Rather, the public viewed the charges of the major health care providers and malpractice system as the primary culprits. This is consistent with national surveys which indicate that the public views individuals taking advantage of the system as opposed to increasing demands on the system as the primary cause of health care inflation.

Availability and Access

A large majority of respondents viewed the availability of doctors (62.0%), emergency services (70.6%), and routine hospital care (74.1%) as about right (Table 8). Highly specialized hospital care was viewed as not available enough by one-third of the respondents. Ninety percent of the respondents reported having no difficulty finding a doctor to care for them or a member of their household in the past year (Table 9). (Of those who did, 43.5% needed a general practitioner and 14.5% needed a gynecologist or obstetrician.) Only 2.1% reported that doctor availability was a problem on the open ended question asking what was the biggest health care problem.

When asked what kind of health insurance they had, 5.6 percent of the respondents reported none. Thus, the large majority of respondents have not experienced an availability problem in health care services.

Table 8

Q7: How would you rate the availability of the following health care services for people in your area such as doctors? Are there NOT ENOUGH, JUST ABOUT THE RIGHT NUMBER, or MORE THAN NEEDED?

	MARKET AREA			
	Not Enough	About Right	More than Needed	DK
a. Doctors	17.7%	62.0%	15.3%	5.0%
b. Emergency services	22.8%	70.6%	2.6%	4.0%
c. Routine hospital care	15.2%	74.1%	4.0%	6.8%
d. Highly specialized hospital care	32.3%	48.5%	6.9%	12.2%

Table 9

Q16/17: Have you had difficulty finding a doctor to care for you or a member of your household in the past year? What kind of doctor did you need?

MARKET AREA

No difficulty	89.6%
Obstetrician/Gynecologist	1.5%
General practitioner	4.5%
Pediatrician	1.0%
Internist	1.2%
Neurologist	1.0%
Other	1.2%

Opinions

Responses to a set of opinion items reinforces the conclusions drawn above: universal access to health care was almost unanimously desired and cost was viewed as the greatest systematic problem in the health care system. The public wants equal access to health care, access that does not depend on one's income. Over three-quarters agreed that everyone should be entitled to the same amount of health care, whether or not they can pay for that care (Table 10). Even more respondents (87.6%) rejected the notion that only those who can afford it should be permitted to buy very expensive treatments. Nor did the public think that the costs of health care, at least within the insurance system, should be related to income. Over two-thirds rejected the notion that those with higher incomes should pay higher health insurance premiums.

Not surprisingly, two-thirds of the respondents did not think that hospitals do a good job of controlling their costs. When those who had been patients or had a member of the family in the hospital in the last five years were asked whether the doctors' and hospital charges were reasonable or unreasonable, 40.7 percent judged the doctors charges and 54.7 percent viewed the hospital charges as unreasonable (Table 11).

The public did react positively to programs to prevent disease; 70.1 percent indicated that such programs should have funding priority over programs to prolong life. When asked about the quality of care provided through HMOs, the public was split, 39.4 percent judging the quality of care offered by HMOs as good or better as traditional health insurance plans. While 27.1 percent disagreed, one-third answered don't know. This subgroup may be open to future HMO recruitment efforts.

Reforms

The public is positive about cost reduction efforts centered around limiting malpractice awards and increased treatment by nurses or doctors' assistants (Table 12). Over 80 percent

Table 10

Q8: Please tell us whether you AGREE or DISAGREE with each of the following statements.

	MARKET AREA		
	Agree	Disagree	DK
a. In general, hospitals do a good job of controlling their costs.	21.5%	69.0%	9.6%
b. HMO's provide a quality of health care as good or better than traditional health insurance plans.	39.4%	27.1%	33.5%
c. Everyone should be entitled to the same amount of health care, whether or not they can pay for that care.	77.7%	19.0%	3.3%
d. Individuals with higher incomes should pay higher health insurance premiums than individuals with low incomes for the same health insurance coverage.	28.5%	68.0%	3.5%
e. Only those who can afford it should be permitted to buy very expensive treatments, such as a heart or liver transplant.	8.4%	87.6%	4.0%
f. Programs to prevent disease should have funding priority over programs to prolong life.	70.1%	17.8%	12.0%

Table 11

Q13: When was the last time you or a member of your family (family members living in this household) were a hospital patient?

Within the last year	43.7%
Within two years	13.7%
Within three years	9.4%
Within four years	5.3%
Within five years	3.0%
Six years or more ago	21.3%

Q14: For this last hospital visit (within the last five years), did you consider the doctors' charge as REASONABLE or UNREASONABLE? /did you consider the hospital charges as REASONABLE or UNREASONABLE?

	Reasonable	Unreasonable	Don't know
Doctor's charges	39.3%	40.7%	20.0%
Hospital charges	27.5%	54.7%	17.8%

Table 12

Q9: Answer YES or NO to the following. If it would reduce the cost of health care, would you be willing to:

	MARKET AREA		
	Yes	No	DK
a. To have your routine illnesses treated by a nurse or doctor's assistant rather than by a doctor?	71.8%	27.2%	1.0%
b. To pay more of your medical bills before insurance starts to pay?	35.8%	59.2%	5.0%
c. To wait a longer time in order to get an appointment to see a doctor?	23.6%	73.6%	2.8%
d. To limit the opportunities for people to use expensive modern technology?	27.2%	65.8%	6.9%
e. To put a limit on the amount of money that could be awarded for pain and suffering in malpractice cases?	82.7%	13.5%	3.8%

expressed a willingness to put a limit on the amount of money that could be awarded for pain and suffering in malpractice cases. Over 70 percent would be willing to be treated by a nurse or physician's assistant for a routine illness. But few supported a higher insurance deductible (35.8%), increased waiting time to see a doctor (23.6%), or a limit on the opportunities for people to use expensive modern technology (27.2%).

The greater New Castle County public was almost unanimous in supporting at least one market-based solution to the problem of health care cost inflation. Almost every respondent was in favor of proposals to require doctors (94.1%) and hospitals (91.9%) to post their charges for patients to see (Table 13). Almost three-quarters of respondents were supportive of having the state, through a regulatory committee, decide how much doctors and hospitals can charge for particular services. The public thus supported at least two proposals to control costs. A majority, however, opposed having the state decide what expensive medical equipment should be in each hospital. More (66.0%) were supportive of avoiding duplication of expensive medical services even if it means that patients would have to travel further for services. Presumably, the additional respondents in favor of this proposal support voluntary, rather than state mandated, cooperation. Thus, there is some support for regulating services but not as much support as for regulating costs.

The public's support for malpractice reform was again indicated by the 82.8 percent in favor of limiting malpractice awards. Over 80 percent of the respondents also favored requiring employers to provide health insurance for full time employees.

Despite the nation's concern about taxes, a majority of the respondents (57.9%) supported paying an additional \$100 per year in state income taxes to provide health care for people unable to pay for their own health care services. While a substantial percentage of people were opposed (38.4%), responses to this

Table 13

Q12: Are you FOR or AGAINST each of the following changes or alternatives in health care services?

	MARKET AREA		
	For	Against	DK
a. Requiring doctors to post a list of charges for their patients to see?	94.1%	5.1%	0.8%
b. Having the state, through a regulatory committee, decide how much doctors can charge for particular services.	73.6%	23.3%	3.1%
c. Having the state, through a regulatory committee, decide what expensive medical equipment should be in each hospital.	41.6%	51.3%	7.1%
d. Avoiding duplication of expensive medical services such as heart bypass surgery, even if it means that you may need to travel further for those services.	66.0%	23.8%	10.2%
e. Limiting malpractice awards.	82.8%	11.6%	5.6%
f. Requiring employers to provide health insurance for full time employees.	82.8%	13.7%	3.5%
g. Having the federal government provide health insurance to all financed through taxes.	51.8%	35.1%	13.0%
h. Having hospitals publish lists of their typical charges for the most common procedures and treatments.	91.9%	4.6%	3.5%
i. Having the state, through a regulatory committee, decide how much hospitals can charge for particular services.	72.4%	25.4%	2.1%
j. Requiring patients to pay a greater part than they now pay of all their medical bills to encourage them to watch their medical expenses.	30.2%	63.9%	5.9%
k. For patients who have virtually no hope of recovery, limiting the use of expensive medical technology.	53.1%	37.1%	9.7%
l. Paying an additional \$100 per year in state income taxes to provide health care for people unable to pay for their own health care services.	57.9%	38.4%	3.6%

proposal do suggest that under the right conditions those in the New Castle County area are willing to put their money where their principles are--they supported universal health care access and were willing to pay for it through state income taxes. A majority (51.8%) also supported the federal government providing health insurance to all financed through taxes.

Almost two-thirds of the respondents were opposed to increasing insurance co-payments. A majority, however, were willing to limit the use of expensive medical technology for patients who have virtually no hope of recovery. This question, however, caused the most comments in the pretest and survey. Respondents wanted to change the question no matter how it was asked. When an age limit to treatment was given, respondents wanted to eliminate the age limit, and vice versa. In this difficult area of moral concern a simple survey question cannot do justice to the range of opinions and complexity of the issues involved.

Perceptions of the Medical Center of Delaware

The Medical Center of Delaware appears to be a well known institution in the New Castle County area. Eighty percent of the market area sample has heard of the Medical Center of Delaware (Table 14). An even greater percentage of those living in New Castle County (86.9%) has heard of the Medical Center. A smaller percentage (51.7%) of those living outside New Castle County heard of the Center. After the interviewer revealed that the MCD is composed of Christiana and Wilmington Hospitals, almost every respondent (95%) indicated knowledge of how to get to Christiana Hospital. Almost all (96.3%) of our New Castle County residents and 89.8 percent of those outside of New Castle County reported knowing how to travel to Christiana Hospital. Close to 78 percent of the market sample area knew how to get to Wilmington Hospital. Even more of those living in New Castle County (84.8%) knew how to travel to Wilmington Hospital. In comparison, less

Table 14

Information about the Medical Center of Delaware

	MARKET AREA	
	Yes	No
Have you heard of the Medical Center of Delaware?	80.0%	20.0%
Do you know how to get to Christiana Hospital?	95.0%	3.8%
Do you know how to get to Wilmington Hospital?	77.7%	20.0%
Have you or a member of your family been a patient at the MCD in the last year?	30.9%	66.8%

than half (48.3%) of those outside of New Castle County knew how to get there.

Among the market area sample, a majority of respondents (54.3%) reported seeing a magazine or newspaper ad published by a hospital (Table 15). The same percentage reported reading a hospital newsletter. Of those who read a hospital newsletter, 67 percent considered the newsletter helpful. Over one-in-ten market respondents (13%) reported reading a newsletter published by Christiana Hospital while 2.8 percent reported reading one from Wilmington Hospital. A little over five percent of the market area sample have read a newsletter published by the Medical Center of Delaware. Thus, one-in-five respondents reported seeing an MCD or affiliate hospital newsletter. In comparison, one third of the sample area has read a newsletter from St. Francis Hospital. How respondents rated the helpfulness of the newsletters they received from these various hospitals is reported in Table 16.

About the same percentage of the market area sample that have read newsletters by Christiana and Wilmington hospital have seen an ad published by one of the two (11% and 2.3% respectively). Similarly, there was no difference between the percentage of the population that read a newsletter and those who saw a magazine or newspaper advertisement from the Medical Center of Delaware (5.1 percent).

It is clear that the Christiana Hospital of the Medical Center of Delaware is not only well known, it is also the hospital of choice for the MCD market area. Almost half of the respondents selected the Christiana Hospital as their preferred hospital for surgery, emergency room treatment, specialized care, or baby delivery (Table 17). Few selected Wilmington Hospital. In comparison, one fifth selected St. Francis for all but specialized heart or cancer care.

Hospital selection was consistent with market area ratings of the quality of health care at each hospital. Over 70 percent of the market area respondents rated the Christiana Hospital as

Table 15

Q19: Have you seen any newspaper or magazine ads by hospitals in the last year?

MARKET AREA	
Yes	54.3%
No	45.7%

Q20: Do you recall which hospital(s) sponsored the ad?

MARKET AREA	
Christiana Hospital	11.0%
Wilmington Hospital	2.3%
Medical Center of Delaware	5.1%
St. Francis Hospital	33.3%
Other	48.3%

Q21: Have you read any hospital newsletter in the last year?

MARKET AREA	
Yes	54.3%
No	45.7%

Q22: Which hospital sent the newsletter?

MARKET AREA	
Christiana Hospital	13.0%
Wilmington Hospital	2.8%
Medical Center of Delaware	5.1%
St. Francis Hospital	33.3%
Other	45.8%

Q23: Was the newsletter helpful?

MARKET AREA	
Yes	67.5%
No	15.6%
Mixed	15.9%
Don't know	1.0%

Table 16

Q21: Was the hospital newsletter helpful? (by hospital)

	MARKET AREA			
	Yes	No	Mixed	DK
Christiana Hospital (n= 77)	62.3%	18.2%	18.2%	1.2%
Wilmington Hospital (n= 17)	70.5%	17.6%	11.7%	
Medical Center of Delaware (n= 31)	54.8%	25.8%	19.3%	
St. Francis Hospital (n= 199)	70.8%	12.5%	16.0%	0.5%

Table 17

Q10: Which hospital would you prefer to use if you or a family member in your household:

	MARKET AREA				
	Christ	Wilm	St.Fran	Union	River
a. Needed surgery that required an overnight stay in the hospital?	50.0%	2.0%	21.9%	1.8%	2.3%
b. Needed surgery that did not require an overnight stay?	46.7%	3.1%	22.4%	3.0%	2.5%
c. Needed an emergency room for injury or illness?	48.0%	4.6%	21.3%	3.5%	3.3%
d. Needed specialized heart or cancer care?	41.7%	1.0%	7.4%		1.0%
e. Were going to have a baby?	48.8%	1.5%	21.3%	3.5%	0.8%

excellent or good (Table 18). Wilmington Hospital received this high a rating from over one-third of the respondents, but almost half did not provide a quality rating. Again in comparison, St. Francis Hospital, also located in Wilmington, was viewed more favorably; half of the market area respondents rated St. Francis as good or excellent in its quality of health care and less than one-third did not give it a rating.

We wanted to determine if the MCD is misperceived as a public hospital. The interviewers informed the respondents that a public hospital is one that is tax supported and run by the government. We asked whether or not the Medical Center of Delaware is a public hospital. The respondents were divided in approximately thirds; one third of the sample responded yes, 28.9 percent said no while 37.8 percent said they did not know (Table 19). Surprisingly enough, 39.1 percent of the sample living in New Castle County responded yes, the MCD is a public hospital! Outside of New Castle County two-thirds of the population said they did not know if the Medical Center is a public hospital.

Of those who knew that the Medical Center of Delaware was not tax supported or run by the government, 7.7 percent believed that the state of Delaware has a public hospital. Over one third (35.6%) said the state does not have a public hospital. The remaining 56.7 percent did not know if the state had a hospital of this kind. Of the individuals who thought the state does have a public hospital, 33.3 percent believed it was the MCD. Of those who knew that the medical center was not a public hospital and those who were not sure, 5.1 percent believed that the state does have a hospital of this kind. Almost one quarter (23.8%) believed the state does not and 37.8 percent answered "don't know." Clearly there is a great lack of information and many misperceptions about public hospitals in the state of Delaware.

Table 18

Q11: How would you rate the quality of health care at each of the following hospitals – EXCELLENT, VERY GOOD, FAIR or POOR?

	MARKET AREA				
	Excellent	Good	Fair	Poor	DK
a. Riverside Hospital	4.3%	14.7%	11.9%	3.0%	66.0%
b. Christiana Hospital	27.1%	43.7%	10.2%	3.6%	15.3%
c. Wilmington Hospital	5.8%	29.5%	14.5%	2.5%	47.7%
d. St. Francis Hospital	22.9%	36.3%	7.6%	1.3%	31.8%

Table 19

Information about Public Hospitals in Delaware

	MARKET AREA		
	Yes	No	Don't know
Is the MCD a public hospital?	33.3%	28.9%	37.8%
Does Delaware have a public hospital?*	7.7%	35.6%	56.7%

*N=404; not asked of respondents who said MCD was a public hospital.

Attitudes of Former MCD Patients

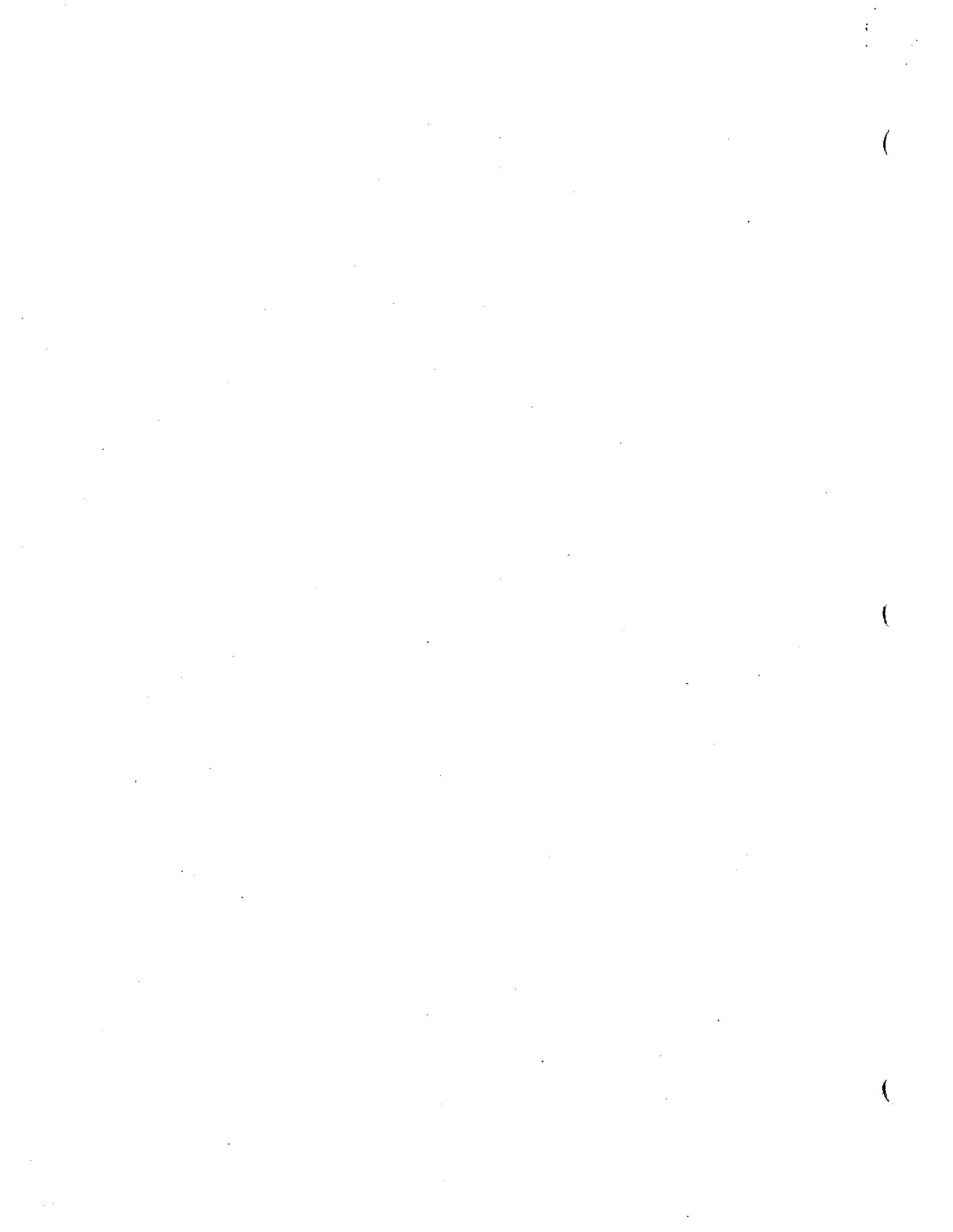
In general the MCD patient sample respondents did not differ from the market area sample respondents in attitudes about the health care system and health care policies. Among almost 50 comparisons between the two samples only three yielded percentage differences of more than 10 percentage points. Patients were at least 10 percent more likely to view the cost of prescription drugs as very important in health care inflation (61.6% vs. 48.7%), be in favor of having the state decide what expensive medical equipment should be in each hospital (54.8% vs. 41.6%), and view the hospital charges for their last visit (if they had a visit in the last five years) as unreasonable (67.2% vs. 54.7%). The other differences were under 10 percent and reinforce the conclusion from the larger differences; compared with the general population patients were slightly more concerned about hospital costs, the costs of prescription drugs, more in favor of state control of hospital costs, and more concerned that good health care not be a function of income.

While patients were more likely to have lower incomes than respondents in the market area sample (61.3% vs. 48.8% \leq \$45,000 annual income) and to be older (median age 52 vs. 42 years), differences in opinion were not a function of these demographic differences.

Since 30.9% of the market area sample report being MCD patients in the last year or having a family member who was a patient, the sample comparison is not a pure MCD patient versus non-patient comparison. We thus divided the market area sample by patient status to further explore patient/non-patient differences. However, within the market area sample we found that those who reported having been a MCD patient in the last year (n=187) did not differ significantly in attitudes from those who had not been patients (n=405). On virtually every comparison there was no statistically significant difference. (One significant difference appeared: MCD former patients in the market area sample were slightly more likely than non-patients to

view the cost of prescription drugs as very important in health care cost inflation.) This confirms the conclusion from the market area/patients sample comparison; patient status is not a significant correlate of health care policy views.

We did find some differences, however, between patient and non-patient views on evaluations of the Medical Center of Delaware. Comparing the patient and market area samples, we found former patients were about 16 percent more likely to select the Christiana Hospital to treat them than non-patients for all but emergency room services and more than twice as likely to select the Wilmington Hospital, although the percentages are still low. Similarly former patient's ratings of the two MCD hospitals were higher than non-patient's ratings. Somewhat more limited differences in the same direction appeared within the market area sample.



CONCLUSIONS

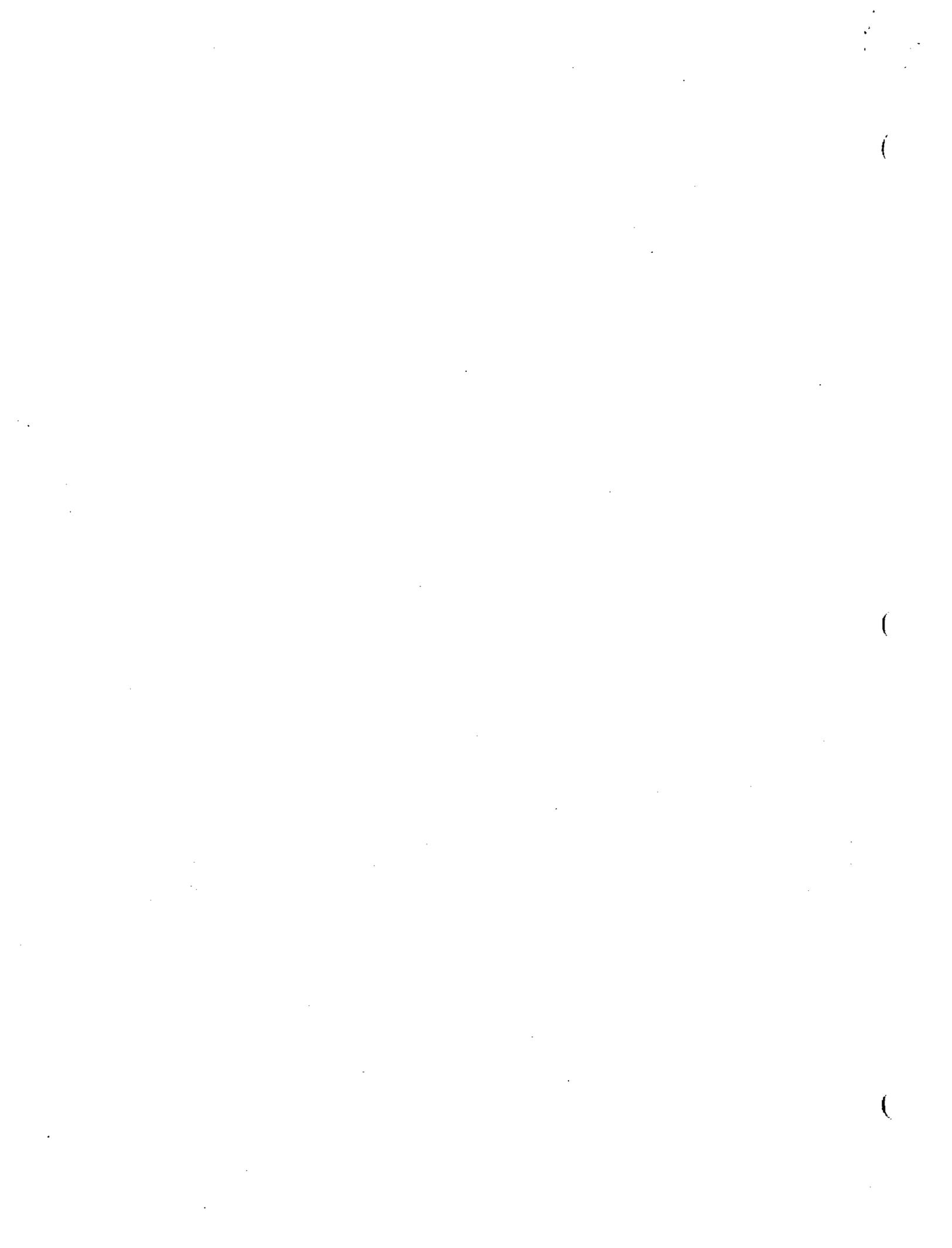
The public in the MCD market area viewed the quality and access that they received from their health care system as good to excellent. Cost was their greatest concern, and health care cost inflation was viewed primarily as the result of high charges, greedy people, and malpractice suits, not increasing demands on the system. The public also was concerned about increasing access to the health care system for others; they did not think that access should be a function of ability to pay.

The public in the MCD market area was open to some significant changes in their health care system, but the changes do not necessary fit into an integrated and consistent approach to reform. A large majority supported both the utilization of physicians' assistants and nurses to treat routine illnesses and limitations on malpractice awards. They also supported posting doctor and hospital charges and having the state regulate such charges. In general the public supported regulating costs rather than services. While they opposed increased co-payments or deductibles, a majority supported paying an additional \$100 per year in state income taxes to provide health care for people unable to pay for their own health care services.

The Christiana hospital was well known and well received in the MCD market area. The MCD was almost as well known but the Wilmington Hospital was not the hospital of choice for many people. Part of the reason may lie in the ability of St. Francis Hospital, in comparison to Wilmington Hospital, to market its services through advertising and newsletters. The MCD was misperceived by many, including a high percentage of its own patients, as a public hospital. In general, however, the views of former MCD patients were not much different from the general public in the market area.

These survey results thus suggest some strategies for discussion and change, further issues to explore, and some hope that consensus can be reached in the future on reforming and improving health care access, quality, and cost for those who live in the MCD market area.

APPENDIX
(Survey Instrument)



General Population Sample
 Health Care Policy Survey
 College of Urban Affairs and Public Policy
 October 9, 1992

Telephone # _____

Hello, my name is _____ and I'm conducting a survey for the University of Delaware. We are interested in public opinion about health care in order to help make better decisions in this region.

Our study requires that we interview only one person who lives in your household. How many members of your household, including yourself, are 18 years of age or older? _____ (IF 1 GO TO PAGE 2)

How many are men and how many are women? Men _____ Women _____
 Who is the oldest man who presently lives in this household?
 Who is the next oldest man who presently lives in this household?
 Who is the oldest woman who presently lives in this household?
 Who is the next oldest woman who presently lives in this household?

Suffix _____

	Name or Relationship	Last digit of phone number
		0 1 2 3 4 5 6 7 8 9
1.	_____	1 1 1 1 1 1 1 1 1 1
2.	_____	2 1 2 1 2 1 2 1 2 1
3.	_____	3 1 2 3 1 2 3 1 2 X
4.	_____	1 2 3 4 1 2 3 4 X X
5.	_____	2 3 4 5 1 2 3 4 5 1
6.	_____	5 6 1 2 3 4 X X X X
7.	_____	2 3 4 5 6 7 1 X X X
8.	_____	8 1 2 3 4 5 6 7 X X

The person in your household that I need to speak with is _____.

_____ Number of calls to reach respondent
 _____ Date interviewed
 _____ Time interview began
 _____ Time interview ended

General Attitudes

1. In general how would you rate the quality of health care available to you and your family--EXCELLENT, GOOD, FAIR, or POOR?

- 1.....Excellent
- 2.....Good
- 3.....Fair
- 4.....Poor
- 9.....Don't Know

2. In your view, is our health care system basically sound, working but needs some changes, could work but needs significant changes, or is it beyond repair and needs to be rebuilt?

- 1.....Basically sound
- 2.....Working but needs some changes
- 3.....Could work with significant changes
- 4.....Beyond repair; needs to be rebuilt
- 9.....Don't know

3. What is the biggest problem that you see in our health care system?

4. I am going to read you a list of statements about possible problems in our health care system. Please tell me whether you AGREE or DISAGREE with each.

	Agree	Disagree	DK
a. Too many people are not covered by medical insurance.	1	2	9
b. The cost of health care is too great.	1	2	9
c. The quality of health care is inadequate.	1	2	9
d. People do not do what they should to stay healthy.	1	2	9
e. Too many people cannot get the health care services that they need.	1	2	9

5. In your view, what is the main reason for rising health care costs?

6. I'm going to mention several reasons that might be causing the rapidly increasing cost of health care in this country. Please rate each on a scale from 1 to 5 where 1 means it is NOT an IMPORTANT reason and 5 is a VERY IMPORTANT reason why health care costs are rising so fast. (READ LIST, ROTATE.)

	Not Important			Very Important DK/NS		
	1	2	3	4	5	9
a. Hospital charges.	1	2	3	4	5	9
b. New medical equipment and technology.	1	2	3	4	5	9
c. Doctor's charges.	1	2	3	4	5	9
d. People without insurance whose health care costs have to be paid.	1	2	3	4	5	9
e. The cost of prescription drugs.	1	2	3	4	5	9
f. The aging of our population.	1	2	3	4	5	9
g. Lawsuits against doctors and hospitals.	1	2	3	4	5	9
h. Unnecessary treatments and operations.	1	2	3	4	5	9

7. How would you rate the availability of the following health care services for people in your area such as doctors? Are there NOT ENOUGH, JUST ABOUT THE RIGHT NUMBER, or MORE THAN NEEDED?

	Not enough	About right	More than Needed	DK
a. Doctors	1	2	3	9
b. Emergency services	1	2	3	9
c. Routine hospital care	1	2	3	9
d. Highly specialized hospital care	1	2	3	9

Opinions

8. Please tell us whether you AGREE or DISAGREE with each of the following statements.

	Agree	Disagree	DK
a. In general, hospitals do a good job of controlling their costs.	1	2	9
b. HMO's (Health maintenance organizations) provide a quality of health care as good or better than traditional health insurance plans.	1	2	9
c. Everyone should be entitled to the same amount of health care, whether or not they can pay for that care.	1	2	9
d. Individuals with higher incomes should pay higher health insurance premiums than individuals with low incomes for the same health insurance coverage.	1	2	9
e. Only those who can afford it should be permitted to buy very expensive treatments, such as a heart or liver transplant.	1	2	9
f. Programs to prevent disease should have funding priority over programs to prolong life.	1	2	9

9. Answer YES or NO to the following. If it would reduce the cost of health care, would you be willing:

	Yes	No	DK
a. To have your routine illnesses treated by a nurse or doctor's assistant rather than by a doctor?	1	2	9
b. To pay more of your medical bills before your insurance starts to pay?	1	2	9
c. To wait a longer time in order to get an appointment to see a doctor?	1	2	9
d. To limit the opportunities for people to use expensive modern technology?	1	2	9
e. To put a limit on the amount of money that could be awarded for pain and suffering in malpractice cases?	1	2	9

10. Which hospital would you prefer to use if you or a family member in your household (READ and ROTATE). (IF MEDICAL CENTER OF DELAWARE, PROBE FOR WHICH HOSPITAL.)

a. Needed surgery that required an overnight stay in the hospital?

Christ. Wilm St Fran. Union River _____

b. Needed surgery that did not require an overnight stay?

Christ. Wilm St Fran. Union River _____

c. Needed an emergency room for injury or illness?

Christ. Wilm St Fran. Union River _____

d. Needed specialized heart or cancer care?

Christ. Wilm St Fran. Union River _____

e. Were going to have a baby?

Christ. Wilm St Fran. Union River _____

11. How would you rate the quality of health care at each of the following hospitals--EXCELLENT, VERY GOOD, FAIR, or POOR? (ROTATE)

	Excellent	Good	Fair	Poor	DK
a. Riverside Hospital	1	2	3	4	9
b. Christiana Hospital	1	2	3	4	9
c. Wilmington Hospital	1	2	3	4	9
d. St. Francis Hospital	1	2	3	4	9
e. Other mentioned in Q 10 above (Specify: _____)	1	2	3	4	9
f. Other mentioned in Q 10 above (Specify: _____)	1	2	3	4	9

Reforms

12. Are you FOR or AGAINST each of the following changes or alternatives in health care services?

	For	Against	DK/NS
a. Requiring doctors to post a list of charges for their patients to see?	1	2	9
b. Having the state, through a regulatory committee, decide how much doctors can charge for particular services.	1	2	9
c. Having the state, through a regulatory committee, decide what expensive medical equipment should be in each hospital.	1	2	9
d. Avoiding duplication of expensive medical services such as heart bypass surgery, even if it means that you may need to travel further for those services.	1	2	9
e. Limiting malpractice awards.	1	2	9
f. Requiring employers to provide health insurance for full time employees.	1	2	9
g. Having the federal government provide health insurance to all financed through taxes.	1	2	9
h. Having hospitals publish lists of their typical charges for the most common procedures and treatments.	1	2	9
i. Having the state, through a regulatory committee, decide how much hospitals can charge for particular services.	1	2	9
j. Requiring patients to pay a greater part than they now pay of all their medical bills to encourage them to watch their medical expenses.	1	2	9
k. For patients who have virtually no hope of recovery, limiting the use of expensive medical technology.	1	2	9
l. Paying an additional \$100 per year in state income taxes to provide health care for people unable to pay for their own health care services.	1	2	9

Personal Experience

Now I'm going to ask you a few questions about you and your immediate family's health care experiences.

13. When was the last time you or a member of your immediate family (family members living in this household) were a hospital patient?

-
- 1.....Within last year
 - 2.....Within two years
 - 3.....Within three years
 - 4.....Within four years
 - 5.....Within five years
 - 6.....Six or more years ago (SKIP TO QUESTION 16 BELOW)
 - 7.....Never (SKIP TO QUESTION 16 BELOW)
 - 9.....Don't know or don't remember (SKIP TO Q. 16 BELOW)

14. For this last hospital visit, did you consider the doctors' charges as REASONABLE or UNREASONABLE?

- 1.....Reasonable
- 2.....Unreasonable
- 9.....Don't know

15. For this last hospital visit, did you consider the hospital charges, such as for the room, medical tests, and supplies, as REASONABLE or UNREASONABLE?

- 1.....Reasonable
- 2.....Unreasonable
- 9.....Don't know

16. Have you had difficulty finding a doctor to care for you or a member of your household in the past year?

- 1.....Yes
- 2.....No (SKIP TO Q. 18)

17. What kind of doctor did you need? _____

18. What kind of health insurance do you and your family have?
(Circle all that apply.)

None Refused Don't Know
Blue Cross/Blue Shield
Other commercial or private insurance such as Aetna
or AARP
HMO Plan (please specify plan: _____)
Medicare
Medicare plus supplemental insurance
Medicaid
Other (please specify: _____)

19. Have you seen any newspaper or magazine ads by hospitals in the last year?

- 1.....Yes
- 2.....No (SKIP TO QUESTION 21)

20. Do you recall which hospital(s) sponsored the ad(s)?

21. Have you read any hospital newsletter in the last year?

- 1.....Yes
- 2.....No (SKIP TO QUESTION 24)

22. Which hospital(s) sent the newsletter(s)?

23. Was the newsletter helpful? (OR Were the newsletters helpful?)

- 1.....Yes
- 2.....No
- 3.....Mixed

24. Now, I would like to ask you some questions about the Medical Center of Delaware. Have you ever heard of the Medical Center of Delaware?

- 1.....Yes
- 2.....No (INFORM RESPONDENTS: The MCD includes the Christiana and Wilmington Hospitals.)

25. Do you know how to get to the Christiana Hospital?

- 1.....Yes
- 2.....No, Don't know
- 3.....Not sure

26. Do you know how to get to the Wilmington Hospital?

- 1.....Yes
- 2.....No, Don't know
- 3.....Not sure

27. Have you or a member of your immediate family been a patient at any Medical Center of Delaware hospital in the past year?

- 1.....Yes
- 2.....No
- 9.....Don't Know

28. A public hospital is tax-supported and run by state government. Is the Medical Center of Delaware a public hospital or not?

- 1.....Yes, public hospital (SKIP TO Q. 30 BELOW)
- 2.....No, not a public hospital
- 9.....Don't Know

29. Does Delaware have a tax-supported public hospital for those who lack the funds to pay for general hospital care such as surgery and emergency care?

- 1.....Yes
- 2.....No
- 9.....Don't know

Demographics

I would like to ask you some final questions about you and your household that will help us to analyze the information you have given us.

30. What county do you live in? _____

- 1.....New Castle County
- 2.....Kent County
- 3.....Delaware County
- 4.....Chester County
- 5.....Salem County
- 6.....Cecil County
- 9.....Don't Know

31. How long have you lived there? _____

32. What is your zipcode? _____

33. What is the highest grade in school that you have completed?

34. What is your age? _____

35. What is your marital status?

- 1.....Never married
- 2.....Married
- 3.....Separated
- 4.....Divorced
- 5.....Widowed
- 7.....Refused

36. Which of the following groups best represents members of your household?

- 1.....White/Caucasian
- 2.....Black
- 3.....Hispanic
- 4.....American Indian
- 5.....Asian
- 6.....Other (Please specify:_____)
- 7.....Refused
- 9.....Don't Know

37. Finally, please stop me when I read the category that best suits your annual household income.

- 1..... Under \$15,000
- 2..... \$15,000 - 29,999
- 3..... \$30,000 - 44,999
- 4..... \$45,000 - 59,999
- 5..... \$60,000 and above
- 7..... Refused
- 9..... Don't know

38. FOR INTERVIEWER; CODE SEX

- 1.....Male
- 2.....Female

Thank you for your time and cooperation.