



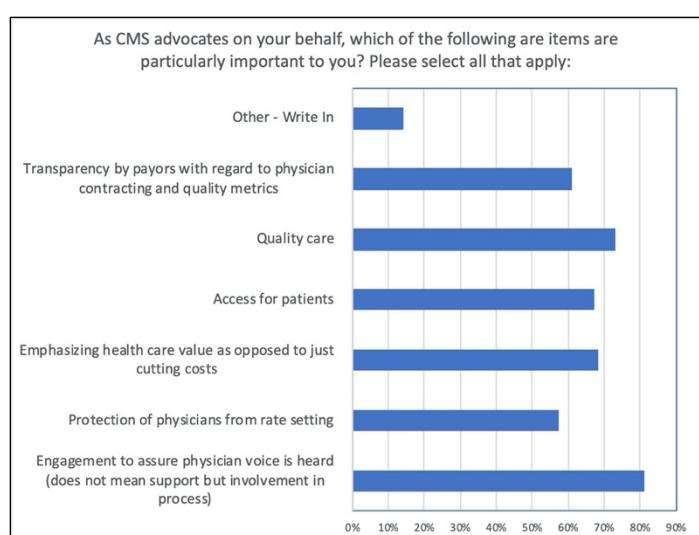
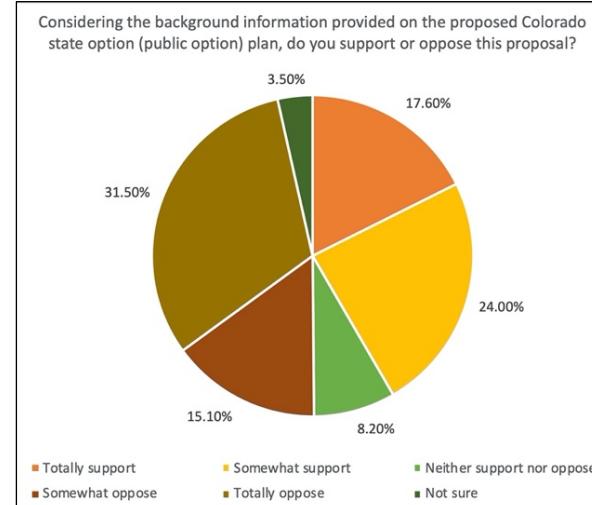
MEMORANDUM

TO: CMS Board of Directors
FROM: Chet Seward
DATE: February 12, 2020
RE: Statewide membership survey on public option plan

CMS recently fielded a focused statewide membership survey on the proposed public option to inform the board about member views for decision making and advocacy next steps. The survey examined physician attitudes about the proposed public option plan, what physicians think will happen if the plan is implemented, and other key issues within the proposed plan including the impacts of hospital rate setting. A total of 426 CMS members completed the survey (70% of whom are in active practice of 20 or more hours a week) for a 7.2% survey response rate of the 5,873 physician members surveyed. This results in a margin of error of $\pm 4.57\%$ at the 95% confidence level. The survey was conducted January 29, 2020 - February 11, 2020.

Key results

- Physicians continue to consider the rising cost of care to be a crisis or a very serious problem. While that rate is down from 73% in 2017 to 59% today, it still represents a strong majority of responses. While the cost of care is of concern to physicians, there is no overriding consensus on whether or not the proposed public option can meaningfully address those concerns without adverse consequences.
- CMS physicians have divided opinions about the proposed public option. While those who totally oppose or somewhat oppose narrowly outnumber (46%) those who totally support or somewhat support (42%), the intensity is stronger amongst those who are totally opposed.
 - There are meaningful differences across specialties, with primary care physicians more strongly supportive (26%) of the public option plan as compared to surgical specialists (8%), and surgical specialists more strongly opposed (41%) than primary care physicians (26%).
- Members prioritized the need for CMS to be actively engaged as this proposal works through the legislature because they want physicians' voices heard. In addition, members prioritized the need for quality care, emphasizing health care value rather than just cost control, and access to care for patients.
- The prospect of hospital rate setting sparks a number of concerns for physicians. Respondents overwhelmingly express concern that hospital rate setting will lead to physician rate setting (72% somewhat/very concerned), while 65% are somewhat/very concerned that such rate setting will lead to physician contracted rate reductions by



hospitals. A strong majority (66%) are concerned that hospital rate setting will adversely impact workloads and another 65% are worried about effects on physician clinical autonomy (see figures 1 & 2).

- When asked about the impacts of the proposed plan, physicians believe that it will make affordability much/a bit better (56%). Physicians overwhelmingly are concerned that the proposed plan will cause cost shifting to other employer-sponsored insurance (73% of respondents are somewhat/very concerned), while almost two-thirds of respondents are somewhat/very concerned that the proposed plan doesn't go far enough to improve the affordability of insurance. 47% of physicians also expect that the proposed plan will make their ability to provide the care their patients need a bit/much worse, and there is also concern about the impact of the plan on access to and quality of care.
 - Surgeons express statistically significant higher levels of concern related to key components of the proposed plan as compared to primary care and non-surgical specialty colleagues including: 57% of surgeons say that they are very concerned and another 25% are somewhat concerned about cost shift; 76% are somewhat/very worried that the plan will drive competition out of the market; 79% are somewhat/very concerned that care quality will be degraded; and two-thirds are somewhat/very concerned that the plan will decrease access to care.
 - Questions which approached similar concepts with variations in wording showed what appears to be incongruous data.
 - 61% of respondents expect that coverage for the un/underinsured will be much/a bit better should the proposed plan be implemented. Yet 56% are somewhat/very concerned that the plan would not improve the rate of insurance coverage (see figures 1 & 2); and
 - Regarding how the plan will affect competition in the insurance market, results are different when physicians share what they expect should the plan be implemented and what they are concerned about in the plan (see figures 1 & 2).
 - These questions and their responses highlight the importance of clear communication with our members about aspects of the proposed plan as they move forward.
- Open-ended responses mirror both the diversity of opinions about whether or not the proposed plan should be supported or opposed, while underscoring strong opinions about necessary levels of government vs. market-driven intervention in the system. Responses underscore some of the underlying, competing demands of the system that physicians must negotiate daily, while also surfacing a number of key questions that have yet to be answered because an official bill has not been released.

Conclusions

CMS physicians continue to be concerned about the cost of health care and the impacts that it has on their patients and their communities. As the public option debate unfolds, they emphasize the need for health care value which includes quality, not just cost control, coupled with ensuring access to care as priorities, and want CMS to be actively engaged in the debate on behalf of the profession. There is no consensus position on the public option plan amongst membership as almost equal numbers support and oppose the proposed plan.

Members are concerned that the plan won't do enough to improve health care affordability, in addition to being very worried that the proposed public option plan will shift costs to other parts of the market. The plan provokes concern about effects on care quality, access, and the ability of physicians to care for their patients. In particular, the prospect of hospital rate setting sparks a number of concerns, most notably that physician rate setting is next.

Figure 1:

Considering the background information provided on the proposed public option, if it were passed into law, then do you expect that the public option will make things better, worse or have no impact on the following issues?

	Make things much better	A bit better	No effect	A bit worse	Make things much worse	Not sure
Affordability for patients (premiums, co-pays and deductibles)	13.4%	42.4%	10.4%	9.4%	19.1%	5.4%
Coverage for the uninsured and underinsured	20.0%	40.5%	17.9%	5.0%	12.1%	4.5%
Competition in the commercial health plan market across the state	12.4%	28.2%	17.8%	12.0%	21.6%	8.0%
Cost shifting to employers and other parts of the system	3.8%	11.5%	11.1%	24.2%	35.1%	14.4%
Ability of physicians to provide the care that patients need	9.9%	15.3%	17.9%	17.7%	30.2%	9.0%
Practice of medicine for physicians	8.0%	13.2%	14.7%	18.2%	36.2%	9.7%

Figure 2:

The following is a list of some of the key issues regarding the proposed public option plan. Please indicate your level of concern with each one. The plan will:

	Not at all concerned	Not very concerned	Neither	Somewhat concerned	Very concerned	Not sure	
Not improve the rate of insurance coverage	7.3%	22.3%		10.3%	33.1%	22.8%	4.2%
Cause cost shifting to other employer-sponsored insurance	4.2%	11.0%		7.3%	34.3%	38.7%	4.5%
Drive competition out of the insurance market	11.3%	20.0%		13.0%	21.9%	29.5%	4.2%
Degrade the quality of care	12.7%	15.3%		8.2%	22.5%	38.5%	2.8%
Decrease access to care	13.9%	22.4%		9.7%	18.9%	30.0%	5.2%
Not go far enough to improve the affordability of insurance	4.9%	11.1%		16.5%	31.5%	32.2%	3.8%