



Washington Health Care Issues Survey Results

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CodeBlueNow!
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VERBATIM COMMENTS

Q6A: Thinking of your own experiences with health care, as well as what you hear and read about, what would you say is the BEST thing about the current national health care system?

- If you have finances, you get quality care
- Nothing
- Available to a wide range of income levels
- Good service and the physician will work me in if I'm sick
- They are good doctors, but they are expensive
- I would say, probably the training the doctors go through because we get better care here than a third world country
- We don't have to wait for major surgery
- Having a choice of providers
- Quality
- That there is one
- Technology. Doctors know more than they used to
- The variety of services that it offers
- The knowledge within our nation. We have some of the best doctors in the world
- There are a lot of qualified doctors to help you
- Being able to see a doctor
- Those that are fortunate enough to have insurance have good insurance. They get better care
- There is opportunity for everyone to get health care
- In my case, it is fine. I don't need doctors so it is hard to say
- Many individuals, excellent care and coverage
- Get rid of the HMO'S. Go back to the way it used to be
- The technology
- Medicare. That's why I'm satisfied. We have coverage through Medicare because it's less expensive than it would be if we had to cover it ourselves
- You can get any type of care that you need
- We are free to chose what we want if we can afford it
- It's good for real extreme emergency things
- That even people that work full time, even if they're in poverty level, they can find health care
- Would be the safety of the drugs
- What national health system?
- We don't have to wait long like Canada
- It's availability. I work in the health care industry, in HMO's some pencil pusher is making medical decisions
- That the children are taken care of. No child left behind
- Going to the doctor I choose to go to
- It's good health care if one could afford it
- The research
- I can go to just about any doctor
- It's probably the access. If you are truly sick than you can get quality care if you need it
- Children can be taken care of easily
- We do have excellent health care providers and knowledge base and testing available without a lengthy wait time
- Our national government is not running it
- The availability to the elderly
- We have the highest quality health care

- There isn't anything really good about it. We need to reform it
- Cannot think of anything good about it
- The best thing about the current health system is that it is not socialized yet
- I think they are trying to be fair and get things worked out
- Excellent quality of care
- It is good at least that there is a system in place
- The availability of emergency care or urgent care
- We have the ability to have health care. We can have health care, where other countries don't have health care
More access
- It's accessible. There are probably many providers out there that do a wonderful job
- There probably are more people that have adequate health care than don't and that is a good thing
- Those of us who work at higher paying jobs have good care and good access
- Quality. Quality of care is the best in the world
- Military health care. They take care of their soldiers
- We have more wealthy doctors than anyone in the world
- Best thing is we have had all of our needs met
- Alternative medicine
- It is good if you have it through your employer
- I'd say it's good health care
- Nothing
- We do not have socialized medicine
- Access to health care
- It's challenging. If you're poor you can get health care services, but not of high quality
- It's always been available to us
- Freedom to choose any doctor you want
- You can get anything; like elective surgery
- There is a struggle for people on fixed incomes
- I think it needs to be reformed; more like Germany. Medicare should pay for vision. They should be more aware of the needs of lower income people
- Donated dollars to hospitals
- Technology and the health care providers
- Anybody can walk into a hospital or emergency room and can get what they need—even those that don't have health insurance
- The quality of our doctors
- If a guy gets hit by a car and breaks his leg, he's not going to live the rest of his life with a broken leg. He's going to get it taken care of. If there's any type of illness, for the most part you get taken care of
- Medical technician
- The quality
- The best thing is that Urgent Care will help you and that they are not too concerned how you are going to pay at that time
- Our access to the latest research techniques and drugs—like the latest heart surgery techniques. We're still one of the leaders in the world in innovative treatments
- I've had no problems
- It's private and not government ran
- I don't think there is anything good about it
- Medicare
- The fact that we can get into emergency care or non-emergency care without having a long wait
- If you can afford it, you have it!
- The best thing about it is the ability to choose your own doctors
- Well it's available if you can purchase it
- I think in terms of access and quality in care, it is far better than what is offered in other countries

- Freedom of choice; lots of choices
- Nothing
- There are a lot of options to choose from
- You can choose your own doctor
- I think they're working to give us more options
- We have the best health care in the world
- The medical technology. A lot of information is available about this on the Internet and that is good. The physicians are very well trained
- They're improving it all the time. Heart surgery
- That we have one
- I can't say what the best thing is
- That the government's not running it
- There's a large opportunity for people to get health care
- I think it provides care for everyone. Even people who aren't able to pay. They can go to the emergency room and get help
- No comment
- There are some good doctors
- I Would prefer it over the European systems with socialized medicine
- The ability to take care of you. I've had open-heart surgery twice. I've had nothing but good luck with it
- There is nothing good about the national health care system
- That the alternatives are not any better—like what Canada has
- Choice. Under my plan I have a choice of doctors and treatment
- Medicare
- I think probably for seniors it's better than for working people with children
- You can get it if you need it
- The availability
- The overall quality
- If everyone had it, it would be fine
- There is no best thing. I guess the only thing is all the new gadgets—CAT scans and MRI
- The quality of the education of the health providers
- Everybody has to pay. People who don't or won't, cost the people who will have to pay and the attorneys will sue. The constitution sides with lawyers for those who were not able to immigrate to America
- Well, I guess it would be that many of the larger employers can cover their employees as well
- The quality of the health care providers. The doctors, nurses and professionals are very good
- Expertise, quality
- It is driven by the market instead of sponsored by the government
- The wide variety of specialists
- It is good. You have access to it if you have the money
- Social security
- Technology
- Access to new technology in health care
- I get to choose my own doctor
- They do still have the public health. Medicare and Medicaid. Available for people who can't afford insurance
- The quality
- The selection of doctors, I guess
- Quality
- We should have enough trained physicians to take care of people
- Private health insurance is better than social health insurance
- Good doctors
- It's provided very well for us; me and my wife
- We have a lot of research going on and they're creating new ways to help people every day

- It's availability. I have not heard of denials
- Doctors are educated
- I can't think of anything
- Access
- Because I don't pay anything
- The level of knowledge
- Well, I don't think there is a best care scenario now. We need help for older Americans. Medicare is important. I'm an older American. The older Americans have something whereas some of the middle Americans don't
- If you have access through an employer or another source of affordable insurance, it can be adequate
- We are coming up with new treatments and new drugs and the rest of the world is not. They're relying on us
- Government don't run it
- The freedom to select my own doctors and hospitals that I go to
- It does a pretty good job on the older people and a pretty good job on the welfare people
- The technology available
- The choice of a health care provider
- We don't have a national health care system really
- The access to health care
- I want to pick who I go to. I want to have a say. I don't want health care like Canada
- Medicare
- Being that it's the free enterprise system, it responds to market demands
- The quality of the care that is available
- Nothing good about it. Especially people who don't or can't afford insurance and the elderly
- If you're in a situation where you really, really need health care, you can get health care and get treated, say for instance in an emergency room and get treated if you cannot afford it—at least in Washington State
- There is nothing good about national health care
- Choice of doctors. I can get access to my own doctors and any number of specialists
- It's better than nothing
- The quality. I think Americans have access to the best facilities and physicians
- People with disabilities do get some health care
- That it's available
- The caring of doctors towards patients
- Technology advancements
- Absolutely nothing
- Basic health coverage is provided to families and single people who qualified
- It's better than absolutely nothing
- It is good that we have access and we don't have to wait for elective surgery
- The ability to get a hold of generic drugs. The fact that you have an alternative to sometimes ridiculously priced drugs
- It gives you the ability to use whoever (health care provider) you want to use
- The fact that there isn't one. I've met a lot of people from Canada that are very disappointed. I think we need to keep it private
- That I can order medicine out of Canada that's cheaper
- Children who are state dependents end up with some kind of health care
- The access
- Nothing good about it
- There isn't anything very good
- Quality care givers
- The quality
- Everybody can get help. Well, we have, in most cases, good doctors and it's not socialized medication. That's bad. I've seen it in Canada and such

- It's available
- I believe in medical care being private and not run by the government. I believe if Hillary Clinton is nominated we will have socialist medicine and that is a watered down branch of Communism
- If you can get it, it's good
- Nothing
- I think it's okay as far as I'm concerned; as long as I have the insurance
- We got quality doctors and equipment
- The quality
- I think that it is good for people who are very ill. I think it's innovative and there are always new ideas about cures for new diseases
- Your choice of who to go to
- Nothing
- Public hospitals can't deny anyone
- The fact that you can really go wherever you want. I mean, you have choices
- The quality of doctors. Very professional. Very motivated
- Emergency care
- If you can afford it, you can have the best
- At least two-thirds of Americans are receiving health care
- Opportunities for people to get the medical help that they need that they wouldn't have already gotten without the ability to get coverage. Most people wouldn't pay the high cost
- The freedom of choice
- There are quite a few qualified doctors and specialists although not everybody has access. Medicare is a good thing, but not a perfect system. Helps people that cannot afford it
- People who don't have coverage in some shape or form can usually find something. Usually they can go to an Emergency Room. They will take care of you in an Emergency Room, regardless of income or coverage.
- You automatically get covered
- The choice of doctors
- I don't know that there is anything good about it
- That it's there
- There isn't anything worth talking about
- The quality is very good
- That it is privately run
- We have the best health care available in the world
- Cost and care both
- I'm happy that my kids quality for community health because of the death of my husband
- Able to utilize new technology
- Access to medical facilities
- I know that there's good health care available if you can get it
- The health care providers are on time when I call them
- There isn't a best thing; it's just a money making service
- Medicare
- Nothing
- Good for people who are older and qualify for Medicare and Medicaid.
- Everyone is very well informed as to what is available
- Access. People have access. They can walk into a hospital and get care or see a doctor. I'm not talking about what the media, the TV says. I know people who are indigent or illegal can walk in and get care. At least in our area there's a big hospital. Small town, USA; anyone can get care. I don't want the federal government to control health care.
- The level of technology. The ability for diagnostic and the sophistication of care, from what I read, seems to be on par with anywhere in the world
- Broad in scope. No matter what you need, there is somebody out there that can do that
- It pays a lot of doctors. The quality of care is good

- The U.S. has the best quality
- You can get quality health care in the United States
- Nothing
- Nothing good about it. The poor can't get it and the rich can
- That we get to use our own doctors
- High quality care
- That it is there
- The technology
- They do a fine job, the carriers. No problems
- I like the fact that it is not run by the government
- The technological advances that the United States can offer because they have the money to do it
- Patients over the age of 65 have access to health care
- No comment
- If you're not a citizen or if you're a minority then you can get treatment
- Probably better than most countries
- Availability of the experienced personnel
- Medicare. Because they pay regularly and without questions and take down the amount of money doctors are charging. The Medicare amount they will pay is way below what non-Medicare are paying because Medicare has such a club; a big hammer
- The simple fact that good health care is available
- It is better than nothing
- The availability of high technology
- Quality of care
- It's a free enterprise system
- The quality of care. The technology and new advances in medicine
- Public health care like DSHS and statewide health care. People with no income or very low income can still get it
- The quality of care
- Nothing
- That we, for the most part, can be treated. I guess that we have one
- You have freedom of choice
- I can hire whatever doctor I want if I have enough money to do it. With socialized medicine, I can't do that
- You can choose your own doctor
- Available to almost everyone
- Quality of care
- The quality. Just the quality of the technology, the training of the doctors, the level of care that's available
- The quality of the care. Doctors are well trained and we have the ability to be treated for anything
- Prescription Plan D
- I would say the quality. We get good health care quality. The care that's provided is excellent and availability of health care. There's access to an adequate number of providers
- Nothing
- We have a lot of quality health providers
- That it is a private system, not public
- There is no national health care system. Everyone is on their own
- That people have a choice. If we need to access a doctor, we can do that. A specialist is available
- They give you a choice of medical facilities and doctors
- The quality is good
- Availability. They have health care for almost any person who lives in the U.S. and there's health care for anyone. You might have to search for it, but it's there. I live in a little bitty town and if I can find someone to treat my diabetes than others can. It's a training hospital and they have really good care
- We have extraordinary resources. Better than other people. I luck out because I have sons who are doctors

- The choice. Options
- You have a choice of different doctors
- It's open to most people
- Just Medicare. Medicare was able to provide for me when I had no medical coverage
- Well I'm satisfied with it for no particular reason. I get good care. I'm past 94
- It doesn't exist. Nothing good to say
- If you're dying, they'll look at you
- Provides jobs
- When available, it's usually pretty good
- Availability. Access
- Probably the education that they wreck
- Nothing
- Access to care
- Probably the quality of the care. That generally Americans who can pay for it can get good health care
- I guess there's plenty of care available to those who can afford it. There's plenty of doctors out there waiting for your money
- Depends on the coverage you get and the doctor you see. I think it's pretty bad for a large portion of the country
- That we still have something. We still have choice. You're free to go with your company or with a private insurance. Next year we won't be. It'll change to an HAS account with a high deductible
- It is available to the needy
- I think that the medical coupons and access for people who are struggling to afford it. It's good we have it. We need more, but I'm glad we have it
- Access to service
- That they have health care
- I guess that we even have a health care system
- I can't think of a best thing
- That I can choose who I want to go to
- I don't think there is a best thing about it!
- It covers a majority of people
- Technological superiority
- All I know is the military system and I have had good access to that. I guess the availability of specialists. The surgeons, the various types of specialty doctors, the cancer research. There's a large amount of research going on in breast cancer and other cancers
- I think it's better than in any other countries
- The new technologies and tests that are available
- Quality of care
- Get doctors easier
- The level of care, I guess. I think our medical people are very well trained in the U.S.
- The ready availability of top quality technology and trained personnel
- It's widely available
- Freedom to do anything. Choose own doctor.
- I like that children aren't denied access to health care. I guess that's about it. Any child—no matter what, in the State of Washington, can get health care according to my understanding
- The quality of the care you get
- For those who have jobs with benefits; most are taken care of
- It does a lot for elderly people, but not enough
- Well, my own experience is all I can speak for; by the way you were treated by the people in the hospital
- That hopefully it's changing to a single payer
- The quality of care
- There are many options available

- They're talented. The medical staff and the procedures.
- Highest rate of doctors and quality tools for surgical equipment. Surgeries are very fast. You don't have to wait. It takes a year in Canada.
- If you have good insurance coverage you're able to go and not pay out of pocket
- I can't think of anything that's good
- I'd have to say whether you have medical insurance or not. At least in Washington you can't be denied medical care. When I go to the hospital here and stuff and at a lot of clinics I see if you can't pay they won't deny you
- We have good technology
- Technology available
- That most people can get coverage, like seniors
- There is no real national health care system
- I'm going to say research and development. In the U.S., we have access, I believe, to more types of treatment and specialty care. We're able to take advantage of the latest health care treatment. We have access to the latest in health care
- I'm lucky enough to be able to afford it. We're self-employed. I'm luck our business makes enough to pay for it. If we worked for someone else, our health care would be nil
- If you have coverage, you have choice
- People who can afford it have good care
- It's the best one in the world
- The quality of doctors
- There is no current national health care, only regional
- That it's a privately owned industry and that it's not heavily run by the government. The quality is better because people are motivated by a profit. They won't be rushing medical students to quickly cover everything. My worry is if it's socialized the quality will go down
- The ready availability of elective procedures
- For myself, it's available and I have good coverage
- In some policies you can choose your own doctor
- I guess they have well-trained doctors. They have better access to medical education than most places in the world
- The quality of the health care
- I get my health needs met
- Nothing
- It actually being knocked down and put under a microscope
- Prescriptions for elderly on fixed incomes
- The quality of the care provided
- There isn't one
- That the quality of care is really good
- The technology that they have
- There is no best thing
- Well, we do have access, if you have insurance, to good care
- You have a choice of your providers or doctors
- Doctors can call upon each other to get more information on issues they might not be as knowledgeable about
- That I'm not assigned a doctor. I can go see whomever I want
- That it's there for everyone if they really want it. If they want to get out and work and pay for it
- Anyone can go to the hospital if they want to. No one is going to turn you away, insurance or no insurance
- Expertise of doctors and the equipment we have in our country
- Not much
- The technology
- Nothing
- It's terrible
- I feel our health care is pretty advanced as far as technology

- Doctors are well educated. The space in hospitals is all very clean
- There is good care out there, you just have to find it
- Choices. Choice of doctors and low waiting time for necessary treatment
- Coverage for a lot of people
- We do not have a national health care system
- It's that we have the latest technology and pharmaceuticals
- If you are covered and you go in with a problem, you will be tested for everything
- I like the freedom to be able to choose my health care
- I don't think there is a best thing
- It's available to everybody
- The research that's gone into the system that makes it the best health care system if you can afford it
- It's powerful and capable of doing great things
- It's promising
- The best care that exists; but you better be rich
- None. It's adequate
- Technology. Cutting edge technology
- Nursing profession is wonderful
- There isn't one. It is lousy
- The ability to go to any doctor you want to
- Availability
- Short wait times for specialists
- Private choice
- The quality of care
- Availability. Good quality of service
- There's nothing good to say about it
- The majority of Americans have access to adequate health care
- Well, quality of care for those who can afford it
- I don't know that there is a best thing
- They have to accept you at the Emergency Room if you are going to die
- It's available to most people
- You know there isn't anything best about it
- There are a lot of doctors available
- I am totally against the national health care system, like what Canada has
- I can go to whatever doctor I want
- Probably the high availability of high tech testing and top notch drugs and those sorts of things
- I don't know that there is a national health care system
- The technology
- The quality
- Anybody can get it
- It's available. The state-of-the-art equipment is available, but those with limited means can't access it.
- Quality
- Could be better
- The fact that it is fairly advanced. Lots of research. Leading edge technology.
- I didn't think we had one
- Surgery
- There is no national health care system
- That it's getting looked at. It's being talked about. It's going to be part of the election
- How much knowledge there is out there
- Nothing. I think that our access to drug research is good, but I think it is misleading
- There aren't any outstanding caregivers
- If you can afford it, you can get good care

- They diagnose people well
- It's available
- The quality and availability of specialists
- That it is not done by the government
- Probably the quality
- Choice of health care
- Accessibility
- It's not socialized
- I believe we have the best health care. We just have poor access to it
- If you're rich, you can get health care
- Medicare
- The choices. The freedom to choose your provider
- The quality of care
- Nothing
- It pays for my prescriptions
- The doctors in our area are knowledgeable and high quality
- Maybe that we can choose our own doctors
- Well, the Medicare helps you a lot
- Quality
- I think having Medicare and Medicaid is a good thing
- It's a step in the right direction
- We have access to a lot of technology

Q6B: What would you say is the WORST thing about the current national health care system?

- Medicare
- It's not accessible to a lot of people
- I don't think the doctors really care
- The cost
- Out of pocket expense, lack of affordability for working, low-income, and seniors
- Coverage
- The cost
- So many people can't afford it
- Cost of health care
- As far as my opinion, I'm not dissatisfied with it
- So expensive. It needs to be completely revamped. Too many illegal immigrants get health care.
- Not all people have access to health care coverage
- Price
- It's hard to get and it's expensive—especially if you're elderly
- Not enough school nurses
- Not accessible. Lack of accessibility
- It doesn't cover everybody
- Disproportionate to the needs of the population. Aliens get care that citizens are paying for
- Cost and access
- The cost
- The ability to get coverage
- The expense
- It's too costly for disadvantaged people
- A lot of people that need it, but can't afford it
- The cost
- There are thousands of people who can't afford the cost of insurance so they have to go without
- A lot of the times, you cannot see doctors except at certain hours
- Some of the people had to wait for months to see a doctor. By the time they did so, it was too late. They died. There should be more doctors and less people suing them
- Cost and insurance. The insurance structure
- Many individuals don't have excellent care or coverage
- I don't like it that you can't choose your own doctor, but have to choose from a small list
- The cost
- That everyone doesn't have equal access to quality health care. It's because it's an economic model. The health care providers and the insurance companies have to keep the stockholders happy and make money for them. They are the middle men. There's waste in the economic system because of the middle man. The insurance companies are the middle men. I think it should be publicly funded.
- They are taking care of a lot of people that should not be taken care of. They are sending tax dollars to people that have no business having health care
- Hospitals. The care is phenomenally expensive due to lawsuits or malpractice
- I really feel bad when people are dying when they can't afford medical insurance
- The lack of coverage for everybody
- It's not holistic. They just treat the symptoms, not the cause
- That it's not available to all people that need it
- Hard to say, the cost
- There is no national health care system
- It goes up so much every year. The amount they cover and the prices they charge

- It's not accessible to everyone. I think not everyone has good health care. It costs too much and it's not provided by employers. Probably because of the costs, I don't know
- The number of available physicians at this time
- Cost
- The expense
- Not everybody can have it
- The cost of it
- There is no medical drug coverage and you have to have a supplement to get by
- Its complexity
- Gender inequality. Women can get health care and coverage. For men to get it depends on marital status and being in a family situation
- That it's too expensive for many people to access
- Too much government involvement already
- Not enough research
- Lack of access
- Insurance companies have way too much control
- The fumbling of the government. Nobody seems to know what they're doing. They can't seem to make up their mind on something
- Cost
- The worst thing is drug companies marketing their drugs and the moving influence of taking children's medication off the market. It does not give a parent anything to give the children because of all the drugs that are taken off the market. The last think has to do with my employer. As of January of this year we lost all of our doctors. We went to a doctor that was close logistically. They sucked. The third thing is corporate health care is changing and now you get whatever your company accommodates and doctors refusing to work with health insurance because the health insurance does not pay their bills. I'm single and a mom and I depend on doctors I can trust. It's like they read *Time Magazine* and they think they are going to think about all this other crap. I'm very in to successful research and when it feels like it is media driven, I just think that all of this is bullshit. There are one hundred thousand drugs to treat a "bad day" and when it comes to children's cough there is no cure or medication. When the large company took over our company they changed our provider and we lost all of our doctors.
- Sometimes I don't they they're fair to the seniors. I think they could do a little better for the seniors
- Expense and lack of affordable insurance for everybody
- Too many people are uninsured
- There are problems with the cost. You still have to pay. There are problems with accessibility to talk to a doctor before you get to the appointment. It takes 3 days to get back to a patient when you call. The insurance company says that I have full coverage but I still end up spending out-of-pocket. It is supposed to be full coverage. I had a cavity filled. The cost was \$268 for a cavity. I still ended up paying. The insurance company only paid \$12 toward it.
- The worst thing is if you are wanting to get into specialty care. They can be out four to five months and the insurance companies keep raising our insurance rates, but our cost of living remains the same
- A lot of people can't afford it
- It's costs seem expensive
- That insurance companies have more say than patients and doctors and that pharmaceutical companies and insurance companies have more power and say than they should
- People who are the working poor and unemployed have limited or no access
- Cost shifting from the government. Currently Medicaid doesn't pay for their expenses. The employer subsidizes the rest. It drives up the cost
- Lack of availability for poor families
- Very poor access to the people that are underserved
- People that are poor are not covered
- Conventional medicine. It doesn't work. It makes people sicker
- Overzealous attorneys
- Cost

- It costs too much
- The cost. Out-of-pocket expenses
- It is not available to everyone
- Unavailability for the poor
- All the freebies that illegal (aliens) get
- The cost
- My clinic doesn't take Medicaid anymore. It has to be out-of-pocket or you have to buy supplemental insurance
- The availability to get care
- Problems with access to care, payment system, lack of health insurance
- The fact that they want to socialize it, I don't like. Everybody gets treated the same and they tell you where to go
- The cost
- The average working guy cannot use the national health care system. The average guy does not have insurance through his employer
- Complicated rules
- Cost
- I would say through the State of Washington, we had to sign up to get help through DSHS because of the lack of income and I had to fill out so many different forms to get help. The red tape of actually getting financial assistance is ridiculous
- That it's not accessible to everybody. We pay a high cost so other countries can use the drugs we developed. I think we should subsidize us too
- It can be abused by nursing homes—they order unnecessary tests
- Cost. Could be some regulation as far as what is charged by insurance companies
- The cost and availability. Cost is too high. Availability non-existent for some people.
- The lack of availability for working class people. If you don't have insurance than you're in trouble
- Too complicated. Too many places to go to get different things
- The number of people who aren't insured
- Cost of the health care
- It doesn't address the needy or the under-employed
- Cost of insurance
- Think the worst thing is that there are people who go in that can't get any help
- The government is involved
- I think that it has fallen victim to abuse. I think that I definitely have an opinion about this. I think the people in this country are extremely unhealthy and that has affected the cost of health care
- The unavailability for everybody
- The access to any type of care out of state with your insurance in case of emergencies
- Over priced
- Too expensive for many people
- The cost
- You have to have a big group of people to get good rates
- Too much bureaucracy
- The toughest thing is there are a lot of people who cannot pay for medical care or insurance and have to pay out of pocket
- The cost of our health care and the quality of our doctors. I went to a specialist for torn ligaments and he couldn't read an MRI. They recommended a machine that cost \$5,000 that the insurance company paid for that wasn't needed.
- It doesn't take care of Americans
- It's that not everyone can get good health care
- That the government's not doing anything about it
- The cost
- The way children and seniors are helped. They don't get the help they need financially

- If you have more money you get better care
- Costs too much
- Lack of access, dwindling supply of providers for DSHS-type health care
- It's impossible to get to the doctors unless you are in a very, very small subset of the nation
- The cost
- Feds opened the laws up. Ability to insurance companies to start HMO's and PPO's. They can tell you how they are going to pay for them.
- The fact that it is not available to everyone
- That doctors have to pay such outrageous liability insurance. Doctors are leaving Washington or stop practicing, making longer waits for people
- I would say cost and accessibility for low income. It's very expensive and some don't have access to health care so it's expensive and accessible to only 10% of the population. Because it's capitalism and it's a battle of the fittest, a certain percentage falls behind. Capitalism doesn't always serve the public good
- Too uneven. People who work hard can't afford insurance and can't afford the health care
- The high cost for young families with children
- If you're poor, you don't get covered
- You have to be an advocate on your own behalf
- I don't know. They want their money, but they don't want to pay when you have it coming. The insurance we had before—they wanted to drain you, but they didn't want to take care of things
- The cost
- The cost
- Everyone doesn't have it
- Excluding my primary, we go to the doctor and the doctor doesn't speak English--maybe as a second language and that's being kind. I had to be admitted to a hospital 3 months ago and the two doctors treating me couldn't understand them.
- The cost that makes it difficult for people with special needs to get health care
- Coverage
- So many people don't have any coverage at all
- It's employer based. If you don't have employment or work for a small employer, costs go up and they have to cut benefits. It's an illogical way to supply benefits. I've been a private employer for 25 years and providing insurance is a burden for me. It also hurts us competing with foreign companies that don't have to pay for those benefits
- Attorneys
- I don't have any objections to it
- The cost of tests
- The cost of everything—prescriptions, premiums. The part they don't cover is all out of control. We shouldn't pay more in this country for prescriptions
- That the very poor don't have as good access as the rest of us
- The cost
- Hard on the poor, working class and the senior citizens. I think American citizens should get help before illegal immigrants. Hospitals are giving free health care to illegal immigrants
- We don't have enough doctors and nurses
- The cost
- The cost
- Having to wait sometimes to get in to see them (doctors)
- Access
- How it's funded for different areas of society
- Not enough coverage, not enough people are covered
- Too many lawyers
- It doesn't cover everybody
- Too many people that don't have health care
- Probably not everyone knows how to access the best health care for themselves

- Insurance coverage issues
- They seem to not take into consideration alternative methods
- Affordability. I think too many people can't afford to have it. So many people can't have it because they have to make choices between food and electricity and health care. I'm lucky. They just can't afford it—probably education, low-income. Even if they have access to it, the communication isn't readily available so they're not aware of what's available. I'm disregarding DSHS. I'm just talking about the poor Joe that's got a minimum wage job and a family and if you have a small business, you can't afford health care for your employees.
- The cost
- Not available to everyone
- High premiums
- The elderly not getting the proper medical care they need
- That there are too many people having to go without health care or cannot afford health care or insurance. I think we're in a world of hurt as far as leadership in this country, as far as people caring about those that don't have access
- Availability. Affordable access to health care
- It doesn't really cover everyone
- None
- Government trying to run it
- Probably the cost of care
- It doesn't cover everybody
- The available structure of it. The cost.
- Too many people are left out
- It doesn't include enough people that's why I said we don't have one
- It doesn't cover enough people, the people who cannot afford it
- Cost, medications, elderly are treated unfair, those people who need it, can't afford it.
- The superior power of prescription companies and the traditional medical care
- The cost
- The cost
- No availability for people on low income and the elderly. The cost of medication is insane
- The overall cost
- You should be able to have access when you need it
- Cost. Just the cost of everything. Doctors' appointments, prescription drugs, hospital care. I just think it's too expensive to bring new products and medicines to the marketplace
- The cost
- Too much paperwork. Too much covering of the ass. Too much waste. Cost.
- Poor coverage through Medicare, lack of access to alternative and complementary medicine
- The cost. It's too expensive. Not enough people have access to the good health care that's out there.
- Instead of paying for one drug, they (Medicare) would rather pay for a bunch of drugs. Also, instead of helping me give myself an injection at home, they would rather send me to the hospital and have them give me a shot and generate a hospital bill, sometimes an ambulance visit, emergency room visit, the doctor on call, medicines, etc.; generates a bill instead of a shot at home.
- That the uninsured can be turned away and then the inordinate costs.
- I do not think it's out there for enough people
- The cost of medications
- Insurance companies ripping people off
- The cost and the lack of insurance for everybody
- They don't provide a better health system where everyone can get health care without having to pay through the nose
- Too many don't have access to it. I almost dies because I couldn't afford it
- There are many children and elderly people that cannot afford insurance
- There was an article I read last week about how the drug companies are trying to keep the generics out. It's a profiteering racket basically. The drug industry.

- I think from what I hear, the process by which the doctors get their return from Medicare. It takes a long time for them to get their pay
- The fact that people are trying to push us to have one
- The elderly are almost forgotten. There's no way they can get anybody to help them. They can't get the medicine they need
- Not enough people have access to quality health care at a price that they can afford
- It's not available to enough people
- The prices of pharmaceuticals
- There isn't one. That's what's wrong with it
- The greed from the insurance and pharmaceutical companies
- The cost. Some of the insurance is high
- Time
- The worst thing would be the people that have to contend with HMO's like Kaiser. I've almost died in them. HMO's are the worst of them and the general hospitals are not subsidized so they are not well maintained.
- It doesn't give the average middle of the road a good enough choice. They (HMO's) dictate to you, you have non-doctors making doctors decisions about treatment
- I don't believe in the plan to socialize the medicine
- If you have no money, you have no health care
- Too many people can't get it
- Lots of people are not covered
- Well, probably the cost. Get what you pay for
- That it's just expensive. The cost. It's ridiculous and it shouldn't be like that, especially for the elderly
- The cost
- The cost
- I think that the access is very uneven and that there is too much emphasis on curing people when they are ill instead of preventing it in the first place. Affordability is an issue also
- Certain categories of people are not covered and do not have capacity or intellect to get covered. It's the challenge of getting care
- Most people cannot get health care
- They don't take care of their people who really need it. The government gives the people from Mexico benefits when they're not even citizens
- There are too many middle class people who are not on welfare or elderly who do not qualify for any help
- That not everyone can get health care. I should say the people who don't have insurance. It is not affordable for them.
- The whole network program that you're locked into. If you're traveling you have to make sure you go to a network doctor if you have an emergency.
- Lack of affordability
- If you cannot afford it, you're in tough shape
- Sometimes the inability to take care of some individuals because of the insurance
- The cost. It costs too much
- Cost. Accessibility for seniors is atrocious. The fact that they have to go to additional providers to pay a monthly fee in order to get medications
- It is not available to the average American
- It's very limited. The ability to find doctors to take you on as a new patient. They only leave a certain amount of openings and depending on the insurance or no insurance, they don't get paid
- The way non-medical people are allowed to make decisions that should be made by doctors—meaning insurance companies
- Lack of universal availability
- Access to it by people who do not have health care insurance
- Pass the cost off on to the people who can afford it, then it goes up every year until they cannot afford it

- Probably the high cost. If you don't have health insurance it'll make you go broke. I know people who can't afford to go to the doctor when they need to. If it's a major thing like cancer, you can go bankrupt. Part of it is caused by malpractice lawsuits. A lot of doctors now are afraid to practice because of that. There's got to be something to limit those
- The cost
- No access for people who don't have a lot of money
- The cost is too high
- Inability to get on it, basically. And the fact if you're an illegal alien they practically chase them down the street, but if you're a citizen you cannot get it at all
- Many people have to go to the emergency room for any health care and it overwhelms the E.R. so regular E.R. patients can't get the emergency care they need
- It's had to get from one doctor to the other. You need referrals
- There is not a national system. People in unions and high paying jobs are getting help with their health care
- Probably the cost
- They are going to try to make the government be in health care and socialized medicine
- There aren't enough people involved with it
- Expense of everything and patients with major surgery are sent home too soon
- Access to care
- The amount of uninsured
- The expense of it: drugs are expensive, the access to insurance, the people running HMO's, the presidents that are being paid exorbitant salaries. It costs too much to manage the private companies. They get exorbitant salaries. It goes to management instead of delivering health care
- It's a little costly
- Doctors do not care. If you do not have insurance, you're not getting in
- Cost for prescriptions, lack of coverage
- Poor people don't get nothing—no health care
- Low income people don't have access to it
- Too many foreigners are getting care that they are not paying for, but the taxpayers are paying for
- Prices are rising dramatically. Going back to my access, not talking about what the media says, health care cost is going up. My Medicare supplements are going up faster than inflation which comes down to federal involvement screwing things up. Someone in Washington doesn't know what's happening. I live in a small town. Government is meddling. There's more than 50 mandates. I have a small business. If I want to insure my employees I have to give all kinds of coverage, domestic partners, pregnancy, etc.
- Does not cover enough people
- The billing system. You can never tell how much money you owe. There's a whole bunch of living wage employment that we have to support to find out how much it is. I know someone who had to wait till a collection agency called to find out how much they owed
- Not available to people who need it
- Beneficial needs for members of health care's. Individual themselves that are qualified for the health care systems. The fact that they are not able to receive the benefits
- I feel the care—I get Kaiser insurance—is expensive
- We don't take care of our low-income people. I think it's almost a national disgrace
- The cost and it's only for the rich
- Not everyone has access
- Not everybody can afford it
- Everything. Affordability is a huge issue, paperwork process, restrictions
- Poor people can't get health care and the rich people can and people working two jobs cannot get health care
- The cost and not everybody gets health care
- People that can't afford health care
- So many people cannot get care
- That it is there
- Pharmaceuticals running the show

- Making it affordable for everyone
- Lot of people don't have insurance
- There are so many people who don't get health care and expect other people to pay for it
- Everybody doesn't have access. I think it should not be mandated. It should be to help people
- It doesn't apply to people under the age of 65
- The expenses
- Availability. Low income families have to go without or qualify for welfare to get medical help
- The inability of a lot of people to afford it
- Having to get referrals for everything
- The fact that everyone isn't covered. It's been a lot of political chicanery. They battle to have universal health care and there are many, even children, that aren't covered. Those without coverage are forced into the E.R. and pro bono care in hospitals. That is not fair and it's expensive. Ninety percent of the people don't have the coverage I do, I'm lucky.
- I don't think they are taking care of some of the military as well as they should
- It's not available to lower income families
- Everyone doesn't have a right to health care
- The unavailability of basic care for everyone
- Expense
- I have no comment on that
- Elderly people. Medicare is the biggest problem. My uncle couldn't get the medicine he needed. It costs too much
- Overall cost. I work in an emergency room and I see people's bills who don't have insurance. Even those with insurance can have a pretty hefty bill sometimes
- Bureaucracy. How difficult it is to do the paperwork
- So many are uninsured
- The premiums. They're way too high. A family can't afford to insure the family unless you're making big bucks
- The doctor malpractice insurance premium which drives medical costs so high
- People can't afford it
- The doctors aren't available. There is too much population and not enough health care facilities
- The whole insurance thing is too high, too restricted
- People seem to be complaining about it a lot
- Probably the cost. It can be very prohibitive to someone who doesn't have an employer that provides it, if you have to pay for the whole thing yourself. From what I know in Washington. I'm referring to access to insurance
- The cost. It costs too much
- Getting access to lab work tests. I had cancer 8 years ago and they cut back on what they pay for lab work and in another year or two they won't pay for anything
- Paperwork. The documentation on everything I have to go through
- That it doesn't cover everybody
- I think the government should take care of the elderly people and they don't. They ignore the elderly people
- The cost
- Probably the rapid increases in cost that we've seen over the last few years
- Unfairness. If you have money you can get it. If you don't, then you can't
- I'd say trial lawyers that make the costs for providers go up. Excessive law suits and the malpractice insurance that they have to have
- We don't have a choice. Sometimes you have to use whatever is available
- The cost
- I have no complaints. My situation is all the experience I can talk about. It's been great
- It doesn't provide health care for the most deserving people
- The cost

- Probably the cost. Just that the premiums are way out of control and you don't get good coverage for what you pay
- Cost of it and not enough people are covered and prescriptions are too expensive
- It costs way too much
- The drug companies monopolizing how it works. All the major drug companies make you need to get these certain drugs. They make the doctors prescribe the newest and most expensive drugs when there could be another alternative
- Well, because so many people aren't covered. They can't afford it. They don't have the insurance. I'm lucky. I have good insurance. Because there's unemployment, people are laid off, they lose their medical coverage. I'm very lucky
- The cost is too high
- We don't have any
- Poor people don't have access
- If you have minor problems, they don't really take care of you
- Financial part of it
- Unavailability due to not have full work week
- Inconsistent availability. A system that does not have incentives for preventive care.
- People who go in for care and do not get it
- It's very expensive
- Wastefulness
- It's lack of availability to low-income, uninsured people. Because insurance isn't available at affordable prices
- Abuse of it
- The overall cost is out of control. Have you been to the doctor lately without insurance and paid the bills? There's a lot of employers who can afford insurance for their employees. It just keeps going up and up
- No funding
- The lack of so many people using it
- There's too many people without health insurance. Affordability. It would be the affordability and the availability. Some people who live in poor communities outside cities don't have the hospitals or the means to get to hospitals
- Not available to middle class
- How overloaded some of the low-income services are with patients, many patients, not enough time, doctors being swamped
- Poor people can't get coverage. They get charged full price because they have no insurance
- They don't provide enough for everybody
- Cost. The premium cost. It's too much. Medicare is too confusing and expensive for senior citizens. It's too expensive because senior citizens have a fixed income and it's confusing because they have to pick the health coverage they need
- That a lot of people don't have accessibility to it because of the cost part of it. It's do expensive. When you make minimum wage how can you afford it? For socialized medicine I think the same care should be available to the poor as well as people with a lot of money. People from other countries should be able to get health care too
- The elder care is pitiful. Unless you are of a certain nationality, people of a certain nationality are catered to first
- Two things. One is we have the most expensive system and secondly, it does not cover everyone in the country.
- That people are turned away if they don't have insurance. The cost of insurance
- That it is not nationalized
- It doesn't cover everybody
- It's too expensive
- General availability. From what I read, a lot of people just don't have access, low income mainly, because of insurance. From what I understand, in rural areas there's a lot less access. The specialists and hospitals are concentrated in metropolitan areas.
- That we don't track the people that don't even belong here

- All the uninsured
- The cost
- The worst thing is there is a group of people who just don't have the money and people who have to go without their medicines because of the astronomical cost of medications
- The cost
- The cost
- The cost
- Too expensive. Just about everything about it
- The fact that so many people, due to lack of coverage, are forced to enter the health care system through emergency rooms
- Out of control costs
- Regulation by government. That's what makes it so expensive
- So many people without insurance
- That middle-class income, there's no break for us. We just can't get health insurance at an affordable price and if we don't get it through an employer there's no help. I have catastrophic health insurance. The deductible is \$1,500 per year. You can meet that pretty fast, but the calendar year comes up pretty fast and you have to start all over again.
- The cost
- Too many people are uninsured
- The politics involved in it
- The cost I'm sure is the worst thing
- 44 million uninsured because there's no money for health care. I think health care should be a national priority, like education
- It cuts out a lot of people. The majority of working people can't afford to get it
- The cost for medication is too high
- The availability for everyone. Everyone can't have health care. They can't afford it. There's not enough funds
- I think that the insurance companies keep too much of the money
- The prices
- Many people don't have health care
- Doesn't cover everybody
- Trying to give it away to people that don't work or produce
- People do not have equal access. It is wrong for the insurance to dictate what drugs doctors can prescribe. It could be a drug that could cure someone, and only the rich can get quality. Medicare Part D is a lot of junk and Congress says they will give people the same care as what they (Congress) gets
- Difficult to get insurance when you are a widow, which I am. It took a year to get insurance
- People not getting care they need
- 47 million uninsured Americans
- Insurance companies
- People who aren't legal, especially children, won't be able to have medical care. I don't know if they passed it yet and coverage is running out for children's medical care. There is a program to give medical care to anyone under 18 and there's not going to be enough money
- Lack of access
- The fact that so many people are not covered, period. Well, they're too poor to afford anything and the government is not coming out and the president just vetoed health care for little kids to get money for his goddamn war. The fact that so many people are going to Emergency. Our hospitals are running out of money. The whole thing needs to be restructured as soon as possible
- Lack of affordability
- The cost. Basic office calls used to be \$68 about ten years ago and now its \$148
- Lack of access for the poor and the ones who make too much to qualify for state aid and their employers don't provide an insurance that they can afford
- Rising costs as it is related to the legal aspects of health care. A lot of frivolous lawsuits
- It's not accessible enough to a greater amount of people. In other words, I think it costs too much

- It's limited availability to people
- I just think everyone's overcharging; the doctors, the insurance companies, the pharmaceuticals. In '97 my back surgery was \$25,000. Now I bet it would be \$50,000 or \$60,000. I got charged \$6 for an aspirin and the insurance company paid it. I don't know what can be done about it
- Not available to everyone
- People who can't afford it don't have good health care
- No general access
- It isn't very good
- The cost
- There shouldn't be one (a national health care system) and as far as I know there isn't one
- The hard thing is finding the balance of how to care for the poor while maintaining personal responsibility. Sometimes the people who really need it can't get it and the people who don't need it do get it. Maintaining a balance between need and availability
- Access to health care is limited for some people
- The cost of medication
- The cost and what you get for what you have to pay
- Since you can't go to the regular doctors seven days a week, so you end up going to a high-priced walk-in clinic or emergency room. I feel this is a bad part of our system
- It provides for people who don't belong here and yet they get better health care than I do. I live in an area where there's a lot of illegal immigrants and they drop a kid and it's legal. That should be changed
- Probably the cost; too damned expensive
- Access to health care by all Americans and the cost of that health care
- We're paying for illegal immigrants to get health care
- For a lot of people it's too expensive
- The expense
- Insurance companies, pharmaceutical companies
- Welfare. We have to pay taxes for people that take advantage of the system
- Probably the cost of insurance
- Cost is horrendous
- Probably the cost of private insurance
- The cost. I mean I am going to have a hip replacement and the doctor is only getting \$2,500 and I am paying \$85,000 for the entire operation. Where is the money going?
- It's expensive
- The cost
- The high cost
- Too many uninsured. High cost of insurance. Big insurance companies. I think they're making money and they don't follow through with things. They don't allow doctors to make the health care choices. It's too regulated. They have their set of criteria and the doctors and hospitals have to go along with that
- The people just above the poverty level just can't make it, can't make out
- Most people can't go to the doctor, they can't afford it
- The high cost of health care—especially prescription drugs
- The cost
- It's that the doctors don't know more about nutrition. They used to say we didn't need vitamin C, now they say we do. When they're in their colleges or universities they're not being taught enough about nutrition
- Too expensive
- The way that its paid for. Sometimes the doctor will issue a prescription and when you go to have it filled, the exact meds aren't given because of cost
- Adequate care for everyone
- The cost
- Prices
- Out-of-pocket expenses are terrible

- It's pretty unfair. People who have good health coverage and people that are wealthy are lucky. Everyone else is unlucky
- There is no good thing about it. People can't get health care. I have family members that can't get health care
- The parameters are set to satisfy the big HMO's and corporate entities
- I understand there are a lot of people who don't get health care at all
- Affordability and access
- Lack of access for lower income families
- A lot of it is wasted
- Inequity of coverage by the insurance you can afford
- The worst thing is that so many people don't have coverage and that you can lose it so easily if you do have it
- It's way over-priced and not everybody has access to it
- I think the unavailability to those that can't afford it. There are so many Americans that do not have health coverage and can't get it because they don't have the money
- Inefficient
- So many people don't have it. It's expensive. General lack of coverage
- Not everybody is covered
- That it's too expensive for a great majority of Americans
- Too much bureaucracy
- That so many people do not have access to it
- It doesn't cover enough people
- Very little care for a very high price
- There are many people who do not have access
- The cost
- You get treated a lot better if your health care is covered by the state
- The doctors
- The cost, the doctors, the works; they need to reduce it
- The cost
- The cost
- I guess quality and access
- Availability to people of all incomes
- People with insurance are paying for people who don't have insurance
- It doesn't reach enough people
- That there are a lot of Americans who do not have access to adequate health care
- The number of people that can't afford it
- Communication issues
- It's only available based on your ability to pay
- Insurance plans
- The people that really need it can't get on it and can't afford it
- The ability to afford the insurance, to even get it
- Probably too costly for the elderly and people that are on fixed incomes and the unemployed
- The drug prescription plan has got to be the worst thing they ever came up with. It's so bad I actually dropped out. The hassle you have to go through with it and to understand it is pathetic
- The cost of everything
- It is pretty expensive and too many lawyers suing over things that do not need to be sued over
- It's not available to a lot of people
- We really don't have one
- Malpractice lawsuits that are frivolous
- That it's not universally available to everyone
- That there isn't one and that it is not available to everyone
- It is only accessible to a few
- Universal accessibility. I think everybody in the country should be covered by health care

- The cost and the lack of access to low income citizens
- Cost
- Too many people can't get provided for. A lot of elderly people don't get coverage
- There needs to be a lot of improvement. Help out the people that need it and not the people that are illegal and no, I'm not going to name a race or anything, an when, and if you try to use it the correct way, the illegals are wiping us out so nothing's available
- The cost
- The lack of coverage for so many people
- The paperwork
- Cost
- Paperwork and the trying to get through to get the care that you need
- That it is expensive and not available to people
- Prescription medication, bills expensive as hell
- Not everyone has access to it
- The expense
- The education of physicians in this country
- There are too many people who don't have it (health care)
- It doesn't cover everyone. We need to pay more for attention to health care rather than the war
- That not everybody is covered
- The cost
- That not all doctors have enough knowledge
- Cost
- Coverage and people's ability to get the things they need and that not everyone has it
- Cost. General availability to everyone
- Cost
- That so many people are uninsured
- That it is unaffordable to most
- I think that it's how impersonal it is. It's often that people are treated like a case, not a person and the control that the pharmaceutical companies have over the health care system
- The costs associated with it
- A lot is done in Washington D.C.
- Access, especially for the poor and the vulnerable
- Government wanting to control
- Not enough people covered. There are a lot of people going uncovered
- The insurance industry
- Not enough coverage for those that really need it and it's too expensive
- It is not available to enough people
- The price. It's unaffordable
- Health insurance doesn't cover everything
- Cost
- Expense
- That it's too expensive and that kids go without it
- Lack of access to health care
- The expense and the unfairness to poor people
- That somebody who need the help cannot receive it. If they could stop sponging off taxpayers
- The expense, for most people. Like the pharmacy side of it. The pharmaceutical expense
- That the health care system has gone down the tubes so bad that I couldn't even describe it. I think it is very unfortunate that the insurance companies dictate what the doctors get paid.
- I'm pretty satisfied with it and the illegal immigrants here, they get it for free and the people that live here have to pay
- Lack of coverage

- Cost
- Too many people going totally uncovered
- That it takes care of you after you are sick instead of preventing it

Q8: Do you have other concerns about the health care system that we have not already covered?

- When somebody is put into a crisis situation there is no advocate to tell them what kind of treatment they can receive. The individual is responsible for finding treatment options including financial and physical help on their own
- T.M.J. should be looked at on a case to case basis; not just classified as dental
- I don't believe in social medicine
- Needs to be more checks and balances on people or agencies that police other people who rob the system and higher punishment for people who do rob the system
- I don't like illegal aliens having access to our health system. I don't think we should have to pay for them
- We need more choices. I would like to be able to choose my own provider. And choose my own pharmacy. We are limited as to what's available out there
- The insurance lawsuits, where everybody can sue for whatever happens, puts our doctors on edge. The doctors are so scared to practice; they perform twice as many tests as needed, to cover their behind
- The elderly need help if they need it
- Health care for low income people
- Insurance
- The variability of the quality of the care depending on where the person lives
- The cost of drugs. I think the pharmaceuticals are making a lot of money. Both the cost and efficacy of drugs and the advertising that goes into drugs, the money they spend advertising drugs on TV, a huge part of their budget, is going up at a higher rate than the research budget. Then there are drugs that are used for off-label uses, not what they are tested for. An anti-epileptic drug is being pushed as a painkiller
- I think that hospitals go to the extreme in overcharging patients. They will give you the option of paying it off yourself and cut the price in half but if you can't, they will charge your insurance company the full price.
- The extreme cost of health care just seems to be over the moon, way higher than it should be. People can go abroad like Canada or South America to get procedures done and get the same thing done there for a way less price than here in America
- Training the nurses, doctor. The trained more and better
- The disparity in pricing between the insured and the uninsured people with insurance pay much less
- I'm concerned that people that don't pay in to things get stuff for free. And the ones, who do pay, have to pay off huge deductibles
- Congress has a fantastic health care system that they don't pay for and they don't really care. They don't care about their constituents and what they pay. They have dynasties in Washington and consequently, they are not concerned about the general public
- The people that want to treat the health care system that doesn't know a lot about the system
- I just hope it doesn't go government. England and Canada show how badly government health care would work. Now I have a choice about where to get a transplant
- Needs a major overhaul. Take out of the hands of the HMO's
- I'm tired of all of these immigrants that get free health care while working Americans can't afford it
- I believe in privatized health care because I do not believe in monopoly or socialized medicine. The only position the government should take is in regard to regulatory standard for drug trial and scientific research. The government needs to set the standard and enforce the regulations on it but they do not need to be involved in the management. It needs to be a privatized business so that there is competition
- If other developed countries can provide national health care, we should be able to do it. At a minimum, the United States should also be able to do that
- In Canada they have great care, whether you have a job or not. The doctors also don't care if you challenge them or don't like an answer that you get. You can always go to a new doctor
- One of my concerns is why all this talk about where the money is going is only looking at the doctors and nurses and not at the equipment, not the suppliers and insurance companies. Don't just look at the doctors and nurses and other health care providers

- The biggest misnomer is the amount of the uninsured. The number that the media puts out there is inaccurate. People on COBRA are considered uninsured. There are actually more people covered than what the statistics show. The number is 10 million uninsured, not 45 million
- The influence of pharmaceutical companies. They have too much control over how doctors do medicine, rather than what's best for the patient
- The cost is terribly expensive from an employer's view. I have to offer health insurance for people to work for me. What the employer pays is one half or one-third of what I'm paying them
- Self-employed people pay so much out of their pocket and they do not get really good coverage
- Health care should be available to all, like education
- Professionals should get it through their employers and everyone else should get it through the government
- I live on the Canadian border, and see that we might get our models from the Canadians. They are not a good model, as opposed to Japanese, French, Swedish, etc.
- My concern is that a lot of time around the election period they talk about the health care system and once they are elected they don't talk about it any more. Everyone talks a great game but nobody has done anything about it
- I don't want them to have Medicare cutbacks
- The large drug companies and insurance companies. Some of the doctors have such a self-interest in making money that they don't provide the care they need to. I have service injury. I get excellent care from the Veterans Association. I am concerned that the care won't continue
- I've seen what happens to the health care in countries that have government run health care programs and I don't want to see that happen here. Such as Sweden and Canada
- What is being proposed now is the same thing that was being proposed back in 1974, but we really need to come up with a plan that is going to work
- How come Americans can't get covered for medical emergencies but immigrants can?
- Pricing and insurance price inflation. The cost is way too high.
- There's a lot more to be said about accessibility and affordability of health care
- For everybody getting health care. They respond to people with health care better than people who do not have health care. Children get taken care of. It is important to have
- Questions about everything...
- I'm very concerned that the U.S. Ranks 34th or 35th of all the developed countries on the planet in terms of the quality of our health care
- There are too many choices. PPO's HMOs. I don't know who to choose. It's too confusing
- Getting too expensive for most people on fixed incomes
- The concern that I have about health care system is there's no way of enforcing anything. Anything that is the law on the books should be enforced. There would more money if things were honest
- My thing is that illegals shouldn't be able to get health care free. If they get it free, I should get it free. The employer should be able not to be stuck with certain providers. They should be able to put out feelers to others. If it costs us each less, say Blue Cross Blue Shield, we should go to that. I should be able to go to a doctor in an emergency room that speaks English. And I want the same kind of health care members of congress have
- They don't explain well and they're not going to
- People won't buy health care insurance. Ten years ago a pre-existing condition was not going to change my wife's insurance to \$700 a month. She had to get a job with health insurance
- I think that insurance company. It's causing the problems that we had
- Based around lawsuits that are filed for malpractice. Costs are increasing due to legal expenditures. Due to legal actions. Part of the cost should fall on the government to provide legal counseling for doctors or health care professionals, to help offset the costs
- I'm concerned about what 2008 will cover with different health care organizations. I think that we should know exactly what we're going to cover and have a plan set up so we would know when we have to pay full price when we take so much medicine. That they don't have generic prices for some of the most expensive medicine
- It's a lot harder for people to get because the insurance rates go up higher and higher

- The inequity in how its funded. The people that are left out. We need public health care for everyone in the country. It would be a birthright. We pay for it with our tax dollars. Everyone should feel like the most important person. There are so many people that have influence on the care system
- People should take out money to make sure there are adequate funds for health insurance
- Overall cost of insurance, employee denied Medicare reimbursements
- Health care benefits paid for by the government should only be given to U.S. Citizens or people with dual citizenship
- It's inconsistent. My experiences have all been good. Not everyone is that way
- There are people who are not employed and people who are not U.S. Citizens who need care
- Government keeps hands off it
- If we have national health care, we won't have the quality of our care that we have now
- Doctor's offices and hospitals have too many rules and regulations. Educate the people that there is a federal law that they can't deny access to hospital or treatment and the county has to pick it up (bill) and pay it although the county can demand payment down the line from you, which might break you
- Overall lack of coverage of complementary alternative preventive medicine and nutrition
- Health care should be reasonable and affordable for everybody
- They are so many people that can't afford it
- Seems like nobody talks about all the embezzlement that insurance companies do
- Providing insurance for illegal
- The poverty guidelines need to be lowered. I have Medicare and a good health and prescription drug coverage plan, yet if my sister didn't pay for my medication I'd lose my house.
- The plan. They ought to dump it, the prescription drug plan for people on Medicare, it's not working. I'm paying \$75 a month premiums and I still have to pay for my medicines. When I could go on welfare and probably get them for free.
- The privatization of it all, but I appreciate the free market system. I guess with the holding of information you don't get a breakdown of information say for instance you have an MRI. We need health care information that should be a part of health care, so that we can be a part of the decision making
- There is no national health care and we should have it
- My concern is that the money being spent right now is not being used efficiently to provide coverage
- The amount of paperwork on a daily basis that I have to do, takes away from my patient care
- HMOs that are using really unqualified people and denying health care
- I don't like the new drug plan.
- Socialized medicine is a form like the European and Canadian system. I don't believe in this kind of system. I believe in the free market system and governments run the military
- I'm against socialized medicine
- No. I'm just wondering how it's going to end up. It's so hard for anyone to afford it , why not make it affordable for them? It's not fair and they're turned down at hospitals
- We try and provide too much. I wonder about the efficiency about some coverages
- Health insurance needs to be available to all Americans. It does not need to be a Medicaid system. Socialized medicine needs to be controlled
- Not the current system, but I'm real concerned that what Hillary Clinton is proposing its too expensive; more expensive than five major government proposals together. Plus, if it's so great, why doesn't she go on it, instead of the private plans all those people have
- I'm concerned with the whole idea of socialized medicine. I don't think it works in Canada and in other European countries
- You skipped the illegal alien part. I live in an area. I'm a disabled veteran and my kids get a very low grade of health insurance, called champ VA. They have no vision, no dental. You have to have a pre-authorization for appendicitis. They (social health services) actively pursue illegal aliens and give it to them but say I cannot get it, because they say I make too much money!
- I think it's strange that the insurance company has more to say about you than your doctor does. I don't think that is right because they are not trained. The doctor is afraid to give you an answer, because they're afraid of lawsuits
- Drug companies have very heavy political clout

- It's so mismanaged that normal people can't afford health insurance and small business can't afford the bid for everyone to be covered
- I am deeply concerned that the country is turning into socialized medicine
- The liability
- I think its broken and it needs to be fixed. There's so much money going to management rather than providing health care to people. I think there's a lot of problems. It has to be remedied by Congress at some point. The health insurance people are paying for is so exorbitant. People at the top are just raking in money. There's plenty of these health care organizations, like Health Care South, taken into court for criminal behavior
- It's just for the rich
- Impact of medication prices
- The insurance companies need to pay more than what they do. The amount of money you pay for premiums. Cost of it doesn't cover everything. That's wrong
- Just to reiterate I don't want the federal government to come up with a plan because then we'll be worse than Canada. Then you can't get your testing or an operation. There are big time problems in socialistic countries
- I need more coverage for every single person. It strongly needs to be improved and I don't know the answer to this but it needs to be solved
- The continuity of coverage loophole. If, for whatever reason, there's a lapse in your insurance coverage you fall into a purgatory situation where a new insurance carrier can claim that a coverage you want is a pre-existing condition
- The pharmaceutical companies charge too much and they make too much off of us. They charge us more and we get less. Every year my insurance goes up. I pay more and I am covered for less. What happens at our school when people run out of sick leave or they don't have enough money for health care is we give ours to them. People don't get the health care that they need
- There is a mental health paradox; mental health should be on the same level as diabetes, Alzheimer's, or any other medical condition or any other chronic condition. Addictions should also be considered chronic and treated as well
- Accountability of it. Unified health care for everybody
- When you go to a doctor or hospital, that should be covered if you have a health plan
- Hillary's universal health care is a bad idea! Health care needs to be an individual responsibility like auto insurance
- I think that Medicare provides well enough. But individual states do not and I'm talking about the Medicaid coverage. Medicaid does not pay well, at least in the state of Washington. Many health care professionals reject Medicaid patients for that very reason. Payments are often held back by third party payers and their practice will ultimately be to the detriment of the patient
- We do not get what we should have. A friend told me he should have gotten some shots but was not given them
- The system is not there for a majority of people in country. We should have better overall health care for all individuals in the U.S.; the people who are legally in the United States
- Children should be covered by health insurance without people losing their homes
- The way the drugs are approved and promoted. The inability to get natural products evaluated.
- I am very much against socialized medicine such as Canada has. They have very poor health care
- Premiums; just that they need to be more affordable.
- I just don't want socialized medicine because it's going to cost the general public more money to support that. The care won't be as good and, you can pick your own doctor now.
- A good thing to do would be to have a mail out survey because this requires more careful thought
- People shouldn't have to pay. It shouldn't be their sole responsibility
- Being able to get the tests and the checkups and things I need. I don't have cancer at this time but there is a possibility of it coming back. I need tests to make sure that it can be caught early if it comes back and save all of us money. It seems like generally going to the doctor for the flu and things like that are getting more expensive. I'm on social security and on a fixed income. I think it is being eaten away more and more through medical costs or Medicare premiums
- I'm concerned about the astronomical pricing of medications
- There are so many things that Medicare does not cover like dentistry and I just think it's rotten. I cannot go out and buy insurance to supplement my Medicare

- I'm not in favor of government regulated health care or the care Hillary is proposing
- My only concern is that everyone in America should have it available after trillions of dollars spent in Iraq. We Should use it for health care
- Just that something has to be done. Too many middle class and poor and self-employed, cannot afford health insurance
- My concern is that other countries are doing so much better with their dollars than we are
- I think all U.S. citizens should be allowed medical coverage instead of immigrants and illegal immigrants
- Nothing perfect. Any way we do it it's never going to be perfect. It can't be. We are all just human beings. All we can do is try. I'd just like to see that people don't suffer just because they don't have enough money
- Level of health care. Since I've had my stroke I feel as though, if I was a rich person, I would get better care. I get minimum care
- The system does not incentivize individuals to live healthy life styles. Having multiple insurance companies that people transfer between does not incentivize the insurance companies to focus on prevention. The amount spent on the last months of life is far too much and we should become more comfortable with death as a culture
- The unequal access to health care
- I think it also cover or include in it the pharmaceutical side of things
- Some doctors should be monitored in some institutions
- It should be socialized
- I would like to know more about what's going on in research and see it in basic media and newspapers, instead of medical journals; a little more coverage about things like stem cell research
- No questions addressing the middle man aspect about it. The insurance should be a not-for-profit. Our biggest cost element is the insurance aspect about it. Insurance aspect of it should not be dictating or telling the doctors what the doctors can and cannot do!
- We should be covering people who get real ill, life threatening diseases, and can't keep their jobs and insurance
- I just think it's a little lopsided. The wealthy have unlimited access and the poor have limited access
- They waste too much money on bureaucracy. Too many people have their fingers in the pot
- I just know there's a lot of people I know who don't have coverage. They don't have access or the health care they're offered is so expensive they can't afford it. I know a family with 2 different health care plans and their diabetes tests are 600 dollars a month, more than the medication itself. My son had surgery without anesthesia because he didn't have health coverage
- I would like parity for substance abuse and mental illness
- Because of their economic situation they cannot enter the health care system unless they go through emergency. We end up paying enormous amounts of money on medical problems that could have been prevented through basic health care. A better way to get people into health care without a crisis
- I know that one of the reasons is because of law suits and those should be looked at and quit being so lenient
- The fact that a HMO or insurance company can tell the doctor that "no, we're not going to cover that." The doctor should make that decision and if it's covered amend of the insurance. I should be allowed to have the surgery, the doctor should make this call
- I'm concerned about how socialized people are trying to make it (health care) another bloated government agency
- Racial bias. Different races get treated differently
- The Medicare program is efficient and should be applied. We should take VA and Medicaid and put them all together and include people not included. It should cover everyone. We can deliver the service for same price we're paying
- The insurance companies. They pay the gate keeper. If the doctors send patients to specialists too often, they penalize the doctors. From my mother's experience, you wait to get an appointment for specialists, one at a time. Then only for one appointment, delaying the care that the patient needs. My mother had to wait 3 months for her operation because of delays in seeing the specialists. The operation would have worked better without the wait
- Should be made more accessible to seniors who are not on Medicare and can't work anymore
- It's broken
- Cost and availability

- We need physicians accountability
- Mostly tort reform
- I do not think the government should be paying medical bills and taking American money to pay for illegal citizens
- The malpractice it is getting out of hand. A lot of the doctors can't practice because the prices are too high and the lawsuits are just ridiculous
- I think there needs to be more education. I see people going to the ER for colds and that kicks everybody's insurance up. It seems that illegal aliens go to the ER most of the time for things as small as a cold and again that kicks our health care costs up
- There should be higher accountability for hospitals and doctors. And there should be caps on how much they can charge for things. I don't know really
- Malpractice for physicians is very high
- There should be more focus on preventive medicine vs. just being reactive. I think there should be education in high schools. At least all of these questions should be asked to high school students.
- It's very confusing. We are torn because we belong to a clinic and they say if we don't join their program we could not be accepted there. They say in certain cases there is no premium and I don't believe that. I think the health care system is in trouble and its very confusing
- Geographic differences. One's access to their type of coverage depends on where one lives and how much money they make
- The current nationally available systems are run by bureaucrats which historically has lead to extremely poor execution and waste of public dollars
- Currently payments by government undercut the market rate which forces the burden of premium increases to policy holders
- It is unavailable for everybody. Those that have more money can get better care than those that don't
- I feel like it's corrupt and I feel like it's become sort of a kind of a privilege rather than a right and that really bothers me. It's just really expensive, I'm really lucky to have health insurance but it's costing me a lot and I feel like, that if I didn't make the amount of money that I'm able to make, I don't know what I would do and that scares me
- I would like to see more naturopath care, chiropractic, massage therapy, etc. spread throughout the United States because most states don't recognize them as part of the health care system, but yet they are considered to be health professionals.
- I want to make sure that I can choose my own doctor with whatever health care system I have
- I don't think it's going to get better soon, but one can hope. Soldiers coming home from war are going to need expensive medical treatment and someone is going to have to pay
- The affordability of medical education is also a concern because if we have program that provides health care for all our citizens we are going to need more qualified health care professionals
- I think we need to do a better job of training our doctors, we need a better way of training them
- The money goes into other peoples pockets
- I think that we should have a health saving program rather than a nation health care system so that if I don't use the health care I could just cash in what I've saved
- I don't like the consumer managed health care or consumer driven health care. I don't like how corporations are minimizing out-of-pocket that they have to pay and the employees are having to pay more for deductibles
- I'd like to see total accountability in terms of where our dollars go
- The very high cost of health care in our country and the fat. Even though the cost is so high, people don't seem to have the same benefits that other people pay less for in other countries
- Insurance companies are crooks
- If they go to a system like that, health care should be for all.
- I think people should have to work to have health care; government should pay if you are disabled or really hurt
- The connection of health insurance to employers is probably one of the biggest problems with the way that health care is provided.
- Children and lower income people. Children. The older you are, you should be more responsible for health care

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- Inaccuracy of advertising, dissatisfied with the political aspect of it, false info about other health care systems
 - Ad dental to it. It should be standard
 - Just the fact that the nation is so big, that nothing is controllable
 - Turning 65 and concerned about coverage after that age, and who would take a new patient
 - The control that the pharmaceutical companies have over the health care system. They prescribe such a large quantity of drugs to the American people, then they prescribe new drugs to offset the side effects of the original (prescription) drugs. One quarter to one half of a million people die due to prescribed drugs while being properly taken. The mentality is that it's simply the cost of doing business. They just move on nothing is ever done about the fact that people have died in the meantime. They might take a drug off the market. But they're not any less careless when prescribing the next new drug up for promotion.
 - That if everybody gets insured and starts using the medical facilities and the doctors we should be able to bring down our prices and we would be able to see more people and the more people we have, the more money they'll get
 - Hospital buildings. Costly buildings, rather than efficient
 - Cost of long-term care and sustainability
 - Lack of access to health care
 - The way they control narcotics its ridiculous. I could only receive so much because of state regulations although the doctors know about it and they still won't give it to me
 - No
 - The cost of prescription drugs. I think we're being ripped off to subsidize other countries
 - I think the cost of drugs is out of sight and I think that the drug companies are responsible for that. I think the government can afford to pay for it but would rather spend it on the war and other things

Q10: Who would you trust to create a new health care system for the nation, would you say...

- Insurance companies
- It needs to be a conglomeration of all the people from all of those fields to be involved, to do the health care system
- A combination of health care professionals, business professionals, non-profit organizations, federal government, academic institutions and public/common people
- None by themselves. I'd say any combination of numerous groups, not just one. A collaborative thing. The Federal government, health care professionals, private industry, etc.
- Also community involvement
- Non-profit organizations with church affiliations
- Health care system should be left alone and stay as it is
- Federal government?
- State level
- Elected officials
- State government
- I don't want a national health care system
- It needs to be a combination of those
- The individual
- Community advocates
- Also clergy
- A group formulated that would be a combination of others trying to make a format how a national health care program would work
- It depends on what the non-profit organization is
- Scientists
- All the people that I mentioned
- Myself alone
- We need a committee that represents the elderly and children. We need people also from business and government. They also need to research how other countries do health care—like Canada
- Local and state government
- A group with a neutral accounting stance as far as services provided
- All of the above, everybody needs to put their fair share of money in
- All of the above, a coalition of all
- Panels that consist of people from all the areas, representatives from each area
- A new president that supports national health care
- A combination. Professionals, ordinary people, companies, nutritionists, professional doctors, employers, businesses, etc.
- A combination of academic institutions. By that I mean medical community in the academic world, federal government, health care professionals, business professionals, and public/common people
- Lawyers
- A combination of all the above
- Free market system
- State government
- All medical people in the field
- The people of the United States should be able to have a big part in deciding the health coverage for people and how much we should have to pay
- A combination of physicians and business people
- Leave the system in place as is, and provide health care for people. Watch where the money is going
- All of the above
- A combination of people, business, and health care providers

- A combination of the public, the government, health care professionals
- Senator Obama
- The alternative or complementary medicine providers
- Those of us that are shelling out for this, the health care industry, it's got to be a little bit of everybody
- Michael Moore
- A panel of academics, government, doctors
- A group that represents a little bit of everybody from the group
- Combination of everything. I don't think that it should be just one organization that takes care of everything

Q10A: I'm going to describe an organization that is working with the American public to design a new national health care system. This organization is non-profit and non-partisan, meaning it is not affiliated with any political party, any government agency or any medical or insurance group. It is made up entirely of citizens like you and experienced professionals. Would you trust this type of organization to shape a new health care system for the nation?

- Maybe
- If the CEO's aren't being paid a million dollars or large sums of money. It would be something I would look at
- I would be willing to listen to them
- I would trust them to design something, but I don't think that they could get it implemented
- Possibly
- Yes, if there were a good number of medical people involved
- I am leery of creating anything like a national health care system
- I'd have to know more about the group
- I need to find out more, but maybe
- Yes, if they would include some type of clergy people
- It would depend on probably who the private citizens are. That they are not somehow involved behind the scenes with companies or the government, that may not be publicly known
- Perhaps. I don't trust politicians to do anything
- In concert with other interests and parties
- If they were people like me—working class citizens
- Depends on their qualifications
- Maybe. I would like to know more about them first
- Yes. But it should be a combined effort with government, medical, all of the entities mentioned in the last question
- Yes. It would be a good place to start and to further that comment; health care is a very complex situation and it is problematic to rely on a single entity to optimize health care delivery
- Maybe. Depends on who they are, but in principal, yes
- I would listen
- I can't write them a blank check, but it would be interesting to see what they would do
- Regionally, but not for the whole nation
- If they have one attorney involved, no
- Maybe if everything was disclosed
- Yes, with the agreement that it would be managed by the professionals
- Depends on who makes up the organization and who makes the decisions
- Know who is in it first and foremost
- Not alone
- To propose, but not shape, because they would not have any authority
- You said they are not political and I'd like to believe that and if they are not with a political party then yes, I would
- I think that I would, but I would like to see it before agreeing
- I'd like to know more about it
- It would be a qualified yes after I saw the paperwork
- I would have to know more about it
- I would want to see who is in it. Who is backing it
- I'd have to know more about it
- Probably yes, but it would depend on what they came up with
- Probably

- I would say yes, as long as they are getting input from the other sectors like business, medical, government, and public health. Even though they are not included in this scenario
- Probably, but there should be a wider representation of interested parties
- Not if it's national health care
- Not necessarily, I'd have to see it
- I'd have to know more about it. I'd have to know more than that it's a good feely non-profit. I'd have to know about the people who are running it, what their backgrounds are
- Undecided. It's a wide scope. You haven't placed parameters around the size of the organization that would do this. Individual cats are nice, but it's real hard to herd them
- Want to know more about them first
- I'd have to know more about them
- If it is in the framework of the groups that were mentioned in the last question. If it doesn't look at the financial aspects and health aspects, then it wouldn't work
- I don't think that should be a national health care system, but rather, a local one
- I'd rather have them than anyone else
- I guess, if we could vote on it
- I might
- It would depend on who is on the board, their education and the goals of the group. But, if carefully chosen, then yes
- Maybe
- It really depends on the competence of the individuals involved, lay people might get emotionally involved and we need pragmatic solutions that incorporate the reality that there is a finite amount of resources available to solve the problem
- Maybe, I would have to know a lot more
- I would have to know more about the organization
- Depends on what they do
- Yes, if they had reps from different sectors of society
- Depends on what kind of professionals
- I'd have to see what they come up with before I would commit to an answer
- You haven't told me who the group is or what their affiliations are. It's a pretty nebulous group. I don't know who's funding them
- It would depend on the level of education and what they know about health care
- I would have to know more about it
- Maybe
- I don't give them the trust up front. They have to earn it. They have to show me what they are going to do and then I'll decide whether I like it or not
- I'd have to know more about it
- Maybe. I'd need to know more about it
- I don't know enough about them. I can't give an answer until I know more about the organization
- I think you would have to hear what they are thinking before you could agree
- Probably would have to have health care professionals in there
- Not enough information
- Unless I knew more about it. I would like to know who the leaders are and backgrounds. Possibly based on more prudent information about that organization
- It would depend on the credentials of the individual
- I would have to know more about the group
- To critique it
- Maybe
- It would depend on the makeup of it; who the people are and where they come from
- As long as they do the job right
- I would trust some of their input, but not to shape the whole thing
- I'd have to look at the structure first

- Not if their decisions are the final decisions
- Maybe
- Depends on the output of their studies
- Possibly
- If I knew about them. If I knew information about their organization, then yes
- Somewhat
- I would have to know more about them
- I'd be interested to see what they have to say
- I would have to first find out about it
- They could probably contribute to it, but I know that they couldn't do it
- It depends because I don't know anything about them

Q11: What do you feel would be the top three most important elements of an ideal health care system?

- Liaison to follow certain cases
- Provides for low income and disabled and elderly
- Hours of operation
- Make sure that everyone's covered
- Efficiency and variety
- Free
- Cut back health care for anyone who is not a U.S. citizen
- Everything should be covered by health care insurance whether midwives, chiropractic, dermatology
- Everyone shares the cost; not just the government paying and not just the people paying
- Guaranteed funding so it would provide access to health care for everyone. Buying health care that is efficacious and cost effective; a high probability that it will be effective and based in science. It shouldn't be up to the employers to pay for health care. I think they should contribute, but not necessarily cover their employees. It's got to be through taxes. Businesses should help fund it
- Take care of elderly. Employers should be responsible for health insurance
- 1. The structure; receiving money and distributing money to the different health care facilities. 2. state to state or federally funded organization
- More emergency and free help. Why can't you get appointments within a month?
- Quality. Standard type of health care for basic doctor visits, check ups and preventive care. If I want to pay for more I can buy it. Plastic surgery should not be in the plan, for example
- A plan that people can manage on their own.
- Prescription coverage. Adequate instructions on follow-up care
- A low complexity administrative cost for health care providers
- Access to pharmacy and current testing procedures
- Make it so you can understand it for people that don't have the education to understand all the big words
- Serve people who are ill
- Keep it employer based. There need to be more insurance companies in the market to keep it competitive. Increase the mortality rate. People need to die earlier. The mortality of infants today is 103. The person that smokes, drinks, plays the lottery, pays into the system, and pays taxes, works hard and dies at 65 is ideal for the system. People that are healthy and live a long time are a burden to the system. How do you get a population not to live as long or to curb usage in that senior population?
- Universal access
- They need to be covering alternative licensed modalities
- Doctors can choose what they want to charge. There should be tiers of care and health insurance at various levels
- Common sense
- Vision and dental as well as medical

- Education on good health care. Where to go to get the help they need
- More diverse plans; naturopaths, acupuncture etc.
- Accessibility to all socio-economic classes, and to foreigners in our country. Having the knowledge that people know its available to them, not just in English. We're becoming a more cosmopolitan society. Control by the people. I'm not a big fan of the federal government. It shouldn't be dictated by the party in power. There should be local control states and communities. I don't want to see a socialist state, one size fits all, developed
- Prompt access to procedures
- Needs to be private. Stricter insurance regulations
- Universal care is right. If you have the money you can hire your own people. Make it non-profit. Have a universal system, with a single payer
- Driverless lawsuits and that jacks up the prices for everybody
- Individual responsibility
- No deductibles
- There needs to be a better balance. The poor people getting care free and the rich people getting charged double. And there are people on social security that are struggling and can't afford their prescriptions
- Should be relatively simple, should have less paperwork
- Information about doctors
- Financial disbursements for doctors, nurses, surgeons, staff services
- I want the ability to control my treatments. If I have cancer and they recommend chemo and other treatment, I want the right to choose not to do anything, and die with dignity
- Accessibility
- Simple to understand, not complicated. Different cost options. Different plans. Higher premiums but lower deductible
- Medicine that takes care of the person if they are seriously ill
- It shouldn't be based on economic status
- It would at least meet medical emergencies in hospitals. Cover the cost of that, help with costs if they need rehabilitation; if they needed care in the home for elderly people. Sometimes they need 24 hour coverage and a family can't do that by itself
- Be on time
- Cover necessary things
- Some preventive health care. An emphasis on preventive care, controlling costs, avoiding unnecessary treatments, efficiency, better management. Costs are rising faster than inflation
- Cut out the bureaucracy. I think the insurance companies don't need fancy buildings
- Education. Educating people who are less informed
- Honesty of asking for help
- Cost. One visit. In an HMO you have to see your primary before you see the specialist. It should be just one visit, you should be able to go where you want when you want
- So everyone will be covered
- Establish uniform minimum benefits. You have to cover mental health, preventive care and things that are not normally covered now, and catastrophic medical expenses, so its not borne by the individual or the employer
- Accessibility
- Unrestricted choice of physicians and not a preferred group
- Everyone contributes according to pay
- All of them are valid
- Being able to get all prescription drugs
- Doctors paid commensurate with education and abilities. How it would function economically
- Public should take out money for health coverage
- Timeliness, so you do not have to wait to get in for a procedure. Competency of the individual health care provider
- Pays for all prescription drugs
- Accountability on the part of both the patient and the provider
- Preauthorization hospitals that are not for profit

- New methods, like learning different ways than mainstream
- Wellness
- Availability of the best. Everybody should have access to the best health care possible regardless of income. Availability of those wanting to enter the system by way of education getting the financing and help for the training
- Not a multitude of companies. A single entity to collect premiums from the various sources and disperse them back to providers.
- Routine tests. I think they need to change the way they do coding, because they don't pay for screening unless there are symptoms and by then, if there are symptoms, the person is already at risk
- New treatments drugs and remedies
- Cost control. Make it cost effective so the price is maintained and it goes up at a reasonable inflation rate instead of the regular inflation rate
- Emphasis on non-profit health care
- Preventive care. Maintained before being ill. Adding naturopaths and such. We need to work better together. More funding. More doctors willing to work together with people better.
- Input from the public, input from health professionals, input from non-profit
- Local control over a national control of health care
- Access to doctors of your choice. Less expensive prescription drugs. More emphasis on preventive care. Just better coverage for doctors. Visits that emphasize preventive care, physical checkups
- Look at the countries that have nationalized health care
- Emergency coverage. Preventive coverage
- Checks and balance. Government should provide health care for its people
- Accountability for insurance company and pharmacies
- Coverage for everyone
- Good dental and vision care
- Access. In some small towns you have to go 20, 30 or 40 miles to get to a doctor. Competence. The last time I saw a doctor, I ruined my ankle. He said he couldn't find anything wrong with it, but it's still messed up
- Whoever provides the services should get their money in a timely manner
- More research
- Fiscal accountability
- Comprehensive government agency to oversee it, to make sure it is not abused. And it expediently goes forward
- Every child has health care
- Access to health care cost containment, and adequate compensation
- Good emergency care
- Fair world value. The cost should be comparable to other countries; getting good return on dollar. Proper medical care for cost paid
- Traditional medicine would relax more toward naturopathic medicine
- Getting something back for being healthy. Overweight people have the same access, and use the system more, but still pay the same. Financial incentives. Gas credits maybe for being healthy. Being able to pick your own provider. Flexibility
- Non-profit, like police and fire department. Research into drugs by non-profit. We need cures, not more Viagra commercials
- Basic medical coverage and catastrophic coverage. Long term chronic care
- Take care of the young (children)
- Should be based on a sliding scale depending on your income
- Those doctors get paid a fair amount without having to jump through the hoops that insurance companies put them through.
- Should be governed locally / state
- People that cannot afford health care should be able to get health care. People who can afford health care should be able to stay on their original health care, and the price of prescription drugs needs to come down
- Choice of treatment. Choice of hospitals

- Long term care provided; like rest homes, convalescent centers
- Faster payment of claims
- A payment plan, maybe like a credit card but without interest
- First, get rid of insurance companies and second get rid of the money doctors
- Everyone can get help everywhere health care is a right not a privilege
- Use natural products instead of chemicals
- Veterans are covered
- Reasonable cost not large percentage gross every year. Government overseeing it but not running it. Making sure the insurance and health care professionals aren't going wild. Overseeing but not legislating
- Efficiency from the administrative side of health care that does all the paperwork; the indirect delivery part of the operation. Equal access to the risk pool. Eligibility. No discrimination based on your employment, your gender preference, job type, past medical history, social status, etc.
- Equality in the care quality
- No restrictions. Doctor of your choice, hospital of your choice, a chiropractor etc.
- Veterans need better health care
- A fairer distribution of cost
- You should have a primary doctor no matter what your income or insurance is
- Pre-existing conditions wouldn't be a factor in determining if people got the help that they needed
- Adequate care. Affordable, but not mandatory
- Natural healing system
- Accountability. If someone messes up, it needs to be rectified
- To be able to go to doctor or hospital that could treat restrictive lung disease
- Accountability. There's going to be a lot of money involved. It has to be watched. Input from medical professionals. Not control, but input. Emphasis on care for children. If you're budgeting a specific amount of money put an adequate share in the budget for children
- Any care required for any medical issue
- Emergency treatment for everyone and independent research money
- Free enterprise
- Some type of savings plan
- Overall ability to seek out any kind of care. Certain insurance companies limit the kind of care they pay for; like they don't like to pay for naturopaths or alternative care sometimes
- Check pharmaceutical companies better than they are being checked. And the FDA takes too long to okay a new drug for physicians to prescribe
- Integrity. People that are honestly looking at people's medical needs. No frivolous surgical procedures
- Accessibility. It is available to everyone
- Cost. Equitable cost. Something that's fair for everybody. Treated the same
- Free preventive care. Mandated coverage for everyone
- Cost that doesn't increase more than 3% a year
- Coverage for services. What they would pay for and what I would be responsible for. Access to what you need; prescriptions, specialist, etc.
- Quality of hospitals. Access to medications
- Choices, options and consistency
- The premium. The cost the cost of the premium should be affordable
- Health care should not be for profit
- Make it available to everyone for a modest price
- Something that is financially stable. A system that is reliable
- Public education
- Incentives. Healthy lifestyles. So that we all want to live a healthy life style.
- Equal access
- Ability to find the best provider that you need partly by not restricting areas or regions that receive health care or services. I've had experience with people who received specialized treatment, say for cancer, and they were denied coverage for traveling to a specialist they needed out of state. They had to see someone locally

- Preventive care, which would be knowledge. I really feel most things can be controlled by diet and we're not informed about the things on our shelves that aren't good for us. No pharmaceutical industry input. Community health screening on a more available basis, for the poor and needy
- Canada and other countries have it together. Ours should be like Europe or Canada
- Up-to-date research and practices. Cleanliness, hospital efficiency, training and staffing
- Limited lawsuits so that people can't sue for an enormous amount of money for whatever
- Accessibility. I get the same medical care as Bill Gates. Equal accessibility; rich and poor. Free medicine. You don't have to pay for your medications, they come with the health care
- More patient information
- Access to care equal. Access to care without regard to socioeconomic status. Emergency services performed as soon as needed
- Free health care, low cost for prescriptions, and limiting litigation
- Emergency access. My son had to have surgery and it was \$15,000 because he didn't have coverage. Family advocates who look at the whole picture. Sometimes doctors just know that instance, not what is happening with the family. It should be available to anyone who wants it
- We need to determine who are. We need to get a better accounting on our children because there's a lot of them left behind
- Choice of what location you would like your health care coverage
- Research into new procedures and cures
- Everyone could get their needs met. Some operations and people are denied because others have better coverage
- Non-discrimination. No political games, issues or considerations
- Preventive maintenance. Making sure we have a healthy population before we need health care. Well child care; making sure children are healthy. Post-natal care
- Federal insurance set up or state or even national
- Privatized
- Health care system is constantly doing research. Alternative medicine is covered
- Everyone should pay something
- The insurance should have less control of drug prescriptions
- Getting the correct treatment
- Things need to be explained more. My baby had MRSA. The clinic just told me that's what it was, just a staph infection. It should explained and I should have had an option to get a second opinion
- Everyone is qualified
- Basic access to all Americans basic services for all Americans shared financial responsibility plan between the individual and the employer more affordable options for advanced health care like specialized treatments beyond the basic access
- A personal touch. High customer service. Personality. Going to people that like what they do.
- Easy to use, easy to access
- Have it when you need it
- Education to enter health care field and how to use health care
- High quality medical, dental, and vision for everybody
- Coverage not determined by any pre-existing conditions or illnesses or age and not basing coverage on income
- Reasonable cost. Look, it should be like education; the public schools. Everyone gets a certain basic level. If you want more you have to pay a certain amount more, like you do with private schools or whatever. Market driven prices. What the market will accept. Lots of facilities and hospitals. I don't know
- Access to health care
- Responsibility for person and their employer to provide health insurance to all people who are legal citizens
- Top quality services
- Strong oversight. I would want someone to watch over the cost and the type of care and make sure the doctors are not making false claims
- It should not be available to illegal aliens. If you can't afford it, go back to your own country. Lower the costs on prescription drugs

- Good access to medical care
- Health professionals should have a say in health policy
- National standards, not profit driven reasonable costs
- More public representation. Reducing cost, more revenue through the state and federal government
- Premiums that are manageable. Predictable costs year to year. Access to experts when needed regardless of insurance coverage
- Conversation between physician and the patient. Patient needs to weigh in on the treatment
- Basic health for everyone; dental medical etc. I would like to know where the money is going. The money is getting is lost between the doctor and the insurance companies. So, I think that we should have the right to have access to this information
- The person getting the treatment has to pay
- Access to the best treatment possible
- Universal access. Transparency
- Cleanliness needs to improve
- I do not want to see a few people with severe, serious, expensive maladies take away money for health care from people with smaller, less serious conditions. Staff should have enough pay and incentive to want to be there to give better care
- Everyone being covered and availability of services and doctors
- Fraud prevention
- Broader treatment methodology
- Dentists and eye doctors
- The community should have a large part in it
- The kind of care provided
- Short wait times
- Improved outcomes for the delivery of health care
- Easy access
- I'd leave it up to the government
- Prevention of diseases a priority
- Research costs
- Flexibility, so different types of programs can be tested in markets
- Major
- Paying for health it should be privately driven and is non-profit.
- Medical benefits including dental
- Continuing with the scientific methods
- Abolishing HMO's
- Provide grants for training of nurses, there aren't enough nurses
- Ease of use
- The pharmaceutical companies would not have any input or control in the health care system what so ever. Take the control away from the pharmaceutical companies. Their only true interest is the money.
- Freedom of choice; non-social organization; competition
- Choice of insurance
- Cheaper medication
- Computer system that improved billing
- Universal access
- Value
- Better pharmacy coverage
- It should be some ways where people have to do it; otherwise they get in trouble or get sick
- Health care should be non-profit
- Transportability

