

Kaiser Family Foundation




\*107\*

# WHAT SHAPES LAWMAKERS' VIEWS:

*A Survey of Members of Congress and  
Key Staff on Health Care Reform*



THE HENRY J.  
KAISER  
FAMILY  
FOUNDATION

conducted by  
 COLUMBIA INSTITUTE  
in conjunction with the  
Harvard School of Public Health



# WHAT SHAPES LAWMAKERS' VIEWS:

## *A Survey of Members of Congress and Key Staff on Health Care Reform*



A Survey Conducted for the  
KAISER FOUNDATION  
by the  
COLUMBIA INSTITUTE  
in conjunction  
with the Harvard School of Public Health



Fieldwork: December 1994 - February 1995



Columbia Institute

*Project Directors:*

Orval Hansen, Ph.D., President  
Jonathan Ortman, Executive Director

*Project Staff:*

Christopher Norton  
Tana Rosenblatt

8 E Street, S.E.  
Washington, D.C. 20003  
(202) 547-2470



Kaiser Foundation

Drew E. Altman, Ph.D., President  
Matt James, Vice President,  
Media and Communications Programs

2400 Sand Hill Road  
Menlo Park, CA 94025  
(415) 854-9400



Harvard School of Public Health

*Project Director:*

Robert J. Blendon, Sc.D.

*Project Staff:*

Mollyann Brodie

677 Huntington Avenue  
Boston, MA 02115  
(617) 432-4502

# TABLE OF CONTENTS

---

I .	Introduction	1
II .	Executive Summary	2
III .	Methodology	3
IV .	Report	5
	<i>Factors Contributing to the Outcome</i>	5
	<i>Sources of Influence</i>	7
	Interest Groups	7
	Major Participants	8
	Media Sources	8
	Information Sources	9
	<i>Communications</i>	10
	Mail	10
	Telephone	10
	<i>Public Education</i>	11
	<i>The Future of Health Care Reform</i>	12
	Diagnosis for Future Action	12
	Priorities for Incremental Reform	13
	Outlook for Reform in the New Congress	13
V .	Survey Data	14
VI .	Survey Questions	24



## INTRODUCTION

---

After a year of contentious national debate, the 103rd Congress chose not to enact any form of comprehensive health care reform. To many outside the Congress, this outcome seemed unexpected since the president and the majority party leadership from both houses of Congress made the enactment of such legislation one of their top priorities. The purpose of this study is to answer the question of why the movement for major health care reform in the 103rd Congress failed.

Its approach relies on interviewing actual members of Congress, or members of their staffs, who were particularly involved in this debate. The interviews focused on the following issues:

- ◆ What were the key factors that contributed to the failure of reform?
- ◆ Which interest groups had the greatest influence on the outcome of the debate?
- ◆ What role did the media, public opinion, constituent mail, forums and health care experts have on the outcome of the debate?



## EXECUTIVE SUMMARY

---

Flaws in the president's health care reform plan and in the process of its preparation and consideration were viewed as the principal factors contributing to the failure to pass legislation in the 103rd Congress. The plan was seen as too complex with too much government control. The delay in its preparation along with the failure to involve the Congress in the process and to seek a compromise with Republicans in the early stages of the debate were major obstacles to the passage of a bill.

Business groups, primarily the health insurance industry and small business, were seen as the interest groups having had the greatest influence on the outcome of the debate. Among other sources, the administration, public opinion and interest group activities were judged to be the most influential. Among media sources, talk radio had the greatest influence. Independent research organizations and the Congressional Budget Office were among the most influential of the information sources and studies.

Most members of Congress were the target of a record volume of mail and other communications, most of which favored limited reform. During the course of the debate support for major or limited reforms diminished and opposition to any reforms increased. The public received a great deal of information on the health care issues, but most respondents said the public was not well informed but became better informed during the debate. Public forums were said to have helped inform the public.

Most respondents recommended that future efforts to reform health care proceed incrementally with separate bills. The Congress should be involved in the development of legislation on a bipartisan basis. Priorities identified included insurance reform, malpractice reform and cost containment. Overall, members expressed optimism at the prospects for reform in the 104th Congress.



## METHODOLOGY

---

Interviews were conducted with 38 members of the United States House of Representatives and Senate and 18 legislative staff during December 1994 and January and February 1995. Most of those selected for interview were actively involved in the consideration of health care reform legislation. They served on the committees with jurisdiction over health care reform legislation or they were members of the committee staff or legislative staff of members serving on those committees. Some members of the House or Senate leadership or their legislative staff were interviewed. Others who were not members of the key committees were also interviewed. It was necessary to reschedule interviews with many of the members several times because of the changing legislative schedule. In almost all cases where members were interviewed, a health care legislative assistant was present and often provided more detailed information about mail, telephone calls and other communications to the member.

In addition to answering the specific questions, respondents were encouraged to add further comments to explain their own positions and to provide insights into the dynamics of the health care reform debate. Most of those interviewed were willing to devote the time needed to provide detailed responses. Most welcomed the opportunity to contribute to the survey. All the interviews were conducted by Dr. Orval Hansen, President of the Columbia Institute. Development of the questionnaire, preparation of background material and assistance in the analysis were provided by a team from the Harvard School of Public Health led by Dr. Robert Blendon and Mollyann Brodie.

Following is a breakdown of those interviewed on the basis of house and party identification:

Members				Staff			
	Total	Rep	Dem		Total	Rep	Dem
Senate	6	4	2	Senate	9	5	4
House	32	14	18	House	9	3	6
	38	18	20		18	8	10

### Committees and Leadership, Members

*Members of the leadership and their legislative staff are listed under both leadership and their committees.*

House	Rep	Dem	Senate	Rep	Dem
Ways & Means	4	2	Finance	1	1
Energy & Commerce	3	7	Labor & Hum. Res.	1	1
Education & Labor	1	2	Other Committees	1	0
Other Committees	6	7	Leadership	1	1
Leadership	0	3			

### Committees and Leadership, Staff

House	Rep	Dem	Senate	Rep	Dem
Ways & Means	2	3	Finance	2	4
Energy & Commerce	0	1	Labor & Hum. Res.	0	1
Education & Labor	2	1	Other Committees	3	0
Other Committees	0	0	Leadership	2	1
Leadership	0	0			

To the open-ended questions the respondents were asked to list principal factors and influential interest groups, media sources, information sources, studies and expert opinions. They were also asked to offer advice and to identify priorities to guide future health care reform efforts. In response to these questions many listed several factors, influences, etc. Some listed only one or none. The data, therefore, are weighted toward those who listed more than one item in their responses which may not be representative of the entire group of respondents.



## REPORT

---

### FACTORS CONTRIBUTING TO THE OUTCOME

The failure to enact health care reform legislation in the 103rd Congress is attributed to flaws in the proposed plan and in the process by which it was developed and considered in Congress. The long delay in preparing the plan and in moving it to the floor of the House and Senate for debate enabled opponents of specific provisions to mount an effective attack on the plan. It was "a bridge too far" in the words of a House Democrat who opposed the president's plan.

Most respondents were critical of the president's plan. It was described as "too sweeping," "too broad," "too complex," "too heavy handed," and "too much government control." To achieve the stated goal of universal coverage it became threatening to those who were currently covered and generally satisfied with their health services. The sweeping nature and complexity of the plan caused fear and confusion among the public.

As the debate proceeded the employer mandates became the target of effective attacks particularly by small business operators. Although the employer mandate was said to be essential to achieve universal coverage it ultimately became too heavy a burden to carry. The plan was also criticized for its failure to deal up front with its costs and how they would be paid. As these costs became more apparent, support for the plan diminished. Respondents were not unanimous in their criticism of the plan, however. A minority did not fault the plan but attributed its defeat to other factors, particularly the opposition of well financed interest groups. Critics of the plan acknowledged the effectiveness of the activities of interest groups.



The process by which the plan was developed and the strategy employed to secure its enactment were widely criticized. Many respondents said it was a mistake to create a large task force to draft the legislation and to exclude the Congress from direct participation in the process. They were also critical of the administration's "51 vote strategy," i.e. to exclude the Republicans and to rely on the strength of Democratic majorities in both houses to pass the legislation.

All who commented on the subject said that the timing of the preparation and congressional consideration of the plan proved fatal. They noted that when the president announced his health care reform proposal, the stated goal of universal coverage had fairly broad public support. The long delay in the drafting of legislation by the task force provided an opportunity for opponents to exploit doubts about the plan.

After proposed legislation was submitted to Congress, there was another long delay before any bills reached the floor of the House and Senate for debate. The legislation was considered by five congressional committees, and ultimately four reported bills. During this period public support diminished further as specific provisions became targets of interest groups' lobbying through advertising campaigns and other activities aimed at the public.

Several respondents said when the details of the president's plan were unveiled it was obvious that it could not win congressional approval in that form. They said that the administration made a strategic error in failing to agree to work with proponents of alternative plans to craft a compromise that could gain the support of bipartisan majorities in both houses. Some respondents were also critical of Democratic leaders in both houses who they said counseled the president during the earlier stages of the congressional debate not to compromise. Republicans and Democrats on the House Energy and Commerce Committee voiced frustration over their failure to get a vote on a bipartisan compromise they were supporting.

By the time legislation reached the House and Senate for debate, it became clear that all the bills, including the alternatives sponsored by Senator George Mitchell, the Senate Majority Leader, and Representative Richard Gephardt, the House Majority Whip, could not pass without major changes. With only a few weeks remaining in the session, there was not enough time to prepare and pass a compromise version with more limited goals. By this time some Republicans who had favored alternatives were persuaded to oppose any health care reform legislation in order to deny the president and the Democrats the opportunity to claim credit for a success just before the 1994 elections.

## SOURCES OF INFLUENCE

### Interest Groups

Interest groups have been known to be influential factors in determining the outcome of major congressional debates. These interviews assessed which of the hundreds of interests attempting to affect the outcome of the health care reform debate were ultimately most successful in their influence.

Business groups were identified as the most influential in the debate. Within the overall business category, the insurance industry was most frequently listed. Most who listed the insurance industry made specific mention of the Health Insurance Association of America (HIAA). Several also made specific reference to the "Harry and Louise" television ads.

Following closely in perceived influence was small business with the National Federation of Independent Business (NFIB) most often identified. Others listed business generally with a few references to business organizations such as the National Association of Manufacturers (NAM) and the Chamber of Commerce.

Next in perceived influence were various provider groups which included hospitals, physicians and other care givers. Several respondents identified seniors generally as influential with some specific references to the American Association for Retired Persons (AARP).

Many respondents declined to list any interest groups as influential. In their comments they discounted interest groups as a major factor in the outcome of the health care debate noting that it was the general public that had the greatest influence.

Generally, the interest groups identified as influential in the health care debate were also seen as influential in the respondents' states or congressional districts. Overall, however, interest groups were considered to be less influential locally than at the national level. Among the more active local groups were provider organizations such as hospitals or physician groups in the state or community and small business operators.

## Major Participants

The administration, public opinion and advertising by interest groups were seen as the most potent influences in the outcome of the health care debate. Responses suggested that the influence of public opinion was also reflected in other sources listed including the activities of interest groups, constituent communications, radio talk shows and town meetings. Many who listed the administration added the qualifier "in a negative way," i.e. that the administration must shoulder much of the blame for the failure to pass health care reform.

Also high on the list of influences were communications from constituents, news media, the two political parties and radio talk shows. Other activities by interest groups were perceived to be less influential and PAC contributions were seen as having little influence. It was noted by some that the PACs often gave to those on all sides of the issue apparently seeking to gain access rather than influence.

## Media Sources

Left alone, most Americans would have known very little about the health care reform debate in Congress. Whatever information about the principal choices facing Congress the public actually knew or learned, it acquired through the nation's media. From the congressional perspective, what role did the media play in the debate and which sources were most important to the outcome?

Among the media sources, talk radio was seen as having had by far the greatest influence in the health care debate. Most who listed talk radio made specific reference to Rush Limbaugh. A few identified radio generally and television as an influence. Among the major daily papers *The New York Times* was credited with the greatest influence followed by the *The Wall Street Journal*, *The Los Angeles Times*, and *The Washington Post*.

All major daily newspapers except *The Wall Street Journal* were seen as supporters of the president's plan and the radio talk shows were opposed. Many respondents were critical of the media generally for reporting primarily on the conflict between the advocates of various positions rather than on the substance of the proposals under consideration. They said the media generally did not do a good job in helping the public to understand the health care reform issues. A Democratic senator said, "The media were unforgivable. They covered the debate like a horse race. They should have informed the people about the effects of proposals."

## Information Sources

Beyond the media and interest groups, other sources of information may also have been important to congressional members in their decision-making. Which sources were seen as the most influential?

Overall, public opinion polls were viewed as the source of information with the greatest influence on the outcome of the congressional debate although polls were ranked higher by Republicans than by Democrats. Other sources said to have had a great deal of influence were White House staff and senior administration officials, trade associations, news media, and congressional agencies. Among those in the latter category, respondents said that the Congressional Budget Office (CBO) had much more influence than other congressional agencies. Many noted that support for the president's plan eroded after the CBO reported its cost estimates for the plan.

Although information from independent think tanks, research organizations and health care experts was not considered to have had a great deal of influence, it was judged to be the most useful. All the information sources listed were considered by most respondents to be useful. Editorials were the least useful.

## COMMUNICATIONS

Prior studies have shown that the volume and type of constituent communication Congress can receive may have a major impact on members' decision-making. The tenor of the communications received on health care reform changed during the course of the debate. Overall, it reflected more support for limited reforms than support for or opposition to major reforms. In the early months there was greater support for the major reforms of the president's plan. Over time sentiment in the communications shifted toward limited reforms and opposition to any reforms. Much of the communication in the final weeks of the 1994 session urged members not to vote for any of the proposals and to defer action on the subject until the next Congress.

### Mail

Members were the target of a very high volume of mail on the subject of health care reform. Most estimated the volume to be greater than on other major issues and pointed out that the mail extended over a longer period of time than is normal for an issue being considered in Congress.

The mail was seen to have been stimulated more by the initiative of individuals than by organized mail campaigns, although more of the mail to Democrats fell in the latter category. Most described their mail as a mixture of the two. Many respondents said it was obvious that much of the mail written by individuals appeared to have been inspired by information received from radio talk shows or other media sources, particularly television.

### Telephone

Most respondents also reported receiving a higher volume of telephone calls on the subject than on other major issues. Several noted, however, that the telephone calls came over a longer period of time than is normal for other issues. Telephone calls are normally concentrated in the period just before a floor vote is scheduled on an issue. A vote was never scheduled in the Senate or in the House on health care reform legislation. With few exceptions involving members who were seen as leaders nationally on health care reform legislation, most of the telephone calls came from within the member's district or state.

## PUBLIC EDUCATION

In contrast to some major policy debates, the health care reform debate directly affected most Americans. Therefore, their state of knowledge about the issues involved in the debate would certainly have affected their responses in opinion polls and communications with members of Congress. The survey queried the members on how informed they thought their constituents were on the issues in this critical debate.

Overall, respondents said the public was not well informed on health care reform issues. Republicans were nearly evenly divided in their opinions. Generally those who were more supportive of the president's plan viewed the public as not well informed. Many opponents, on the other hand, attributed the erosion of support for the plan to a well informed public. Some qualified their responses by drawing a distinction between information and understanding, noting that the public had a great deal of information about health care reform but lacked understanding of the issues in the debate. Most agreed that the public became better informed during the debate but several disagreed, saying that the public became more confused.

Forums, sponsored across the country, were one vehicle for educating the public. A large majority of the respondents participated in non-partisan public forums on health care reform, mostly in their own districts. In almost all cases these forums were judged to be useful in informing the public about the issues. Many noted that they had participated in forums sponsored by the Columbia Institute. Many of the members said that while the forums were useful in informing the public they were particularly useful in informing themselves. Some said they thought they gained more than the public did.

## THE FUTURE OF HEALTH CARE REFORM

### Diagnosis for Future Action

Respondents were asked what direction they thought health care reform would follow in the 104th Congress. They believed it would move ahead on an incremental basis with a slow and deliberate process. Reform most likely would be accomplished through a number of separate and narrowly constructed bills that could be understood and explained. Several said it was likely only to address the problems that need fixing and would be less comprehensive in scope than prior efforts. Reforms would be designed so they did not threaten those who had insurance or disrupt the relationships with their current health care providers.

Obviously with the new Congress, success in reforming health care would also require consensus building and would have to be bipartisan in its support. Implicit in many of the comments was the need for congressional leaders to be involved in the initial stages to identify the areas where bipartisan agreement was possible and then to move forward to shape the legislation through the committee system. Many emphasized the importance of public understanding and support. As reform proceeds, the public needs to be kept informed through forums and the media, and the attitudes of an informed public should be considered in the legislative decisions. A few respondents were skeptical of the usefulness of an incremental approach and continued to favor reform through comprehensive legislation.

## Priorities for Incremental Reform

Insurance reforms were most often identified as the priorities for future health care reform. Most who listed insurance reform as a priority made specific mention of portability and access to insurance by those with pre-existing conditions. Reform of medical malpractice or tort reform was next on the list of priorities.

Also among the priorities listed were cost containment, a change in anti-trust laws to permit cooperation among local hospitals and changes in the tax laws to allow deductibility of health insurance premiums and to permit medical savings accounts. Other priorities included Medicare and Medicaid reform and expanded access to health services, particularly for women and young children.

## Outlook for Reform in the New Congress

After a number of interviews had been completed, another question was added: "Are you generally optimistic or pessimistic about the prospects of health care reform legislation being passed in the 104th Congress?" Responses ranged from "very optimistic" to "very pessimistic." Nineteen Republicans and 15 Democrats responded to the question. By a margin of 16 to 3 Republicans expressed optimism. Among the Democrats the pessimists outnumbered the optimists by a narrow margin.





## SURVEY DATA

.....

1. *In your opinion, what are the principal factors that contributed to the outcome of the health care debate?*

	Percent of Total (n=99)*
Too big, too sweeping, too much government control	20 %
Too complex, public didn't understand	13
Interest group lobbying and advertising	13
Wrong strategy, excluded Congress in preparation, partisan	11
Public fears, confusion	10
Delay in reaching Congress, tried to move too fast	8
Threatening to those with insurance	6
Failure to compromise	6
Republicans blocked for political purposes	4
Too costly, no plan to pay for it	3
Wrong concept, not well thought out	3
The economy improved, public felt less insecure	2

\* multiple responses

	Percent of Total (n=101)*	Percent of Rep (n=46)*	Percent of Dem (n=55)*
Insurance industry, HIAA	29 %	26 %	33 %
Small Business, NFIB	22	20	24
Providers, hospitals, physicians	11	7	15
Business, NAM, Chamber of Commerce	10	11	9
Seniors, AARP	7	11	4
Pharmaceuticals	4	2	5
General public	3	4	2
Others	7	7	7
No interest groups identified	7	12	1

\* multiple responses

	Percent of Total (n=61)*	Percent of Rep (n=21)*	Percent of Dem (n=40)*
Small business, NFIB	30 %	29 %	30 %
Insurance industry, HIAA	16	10	20
Providers, hospitals, physicians	13	10	15
Business, NAM, Chamber of Commerce	8	0	13
Seniors, AARP	7	14	3
Others	7	10	5
No interest groups identified	19	27	14

\* multiple responses

3. A. *In your opinion, did each of the following have a great deal, some, not very much, or no influence on the outcome of the congressional debate on health care reform?*

**TOTAL RESPONSES:**  
(n=56)

	Great Deal	Some	Not Very Much	None	Don't Know
The administration	80 %	13 %	4 %	2 %	1 %
Town meetings & public forums	39	38	20	0	3
The news media, broadcast & print	46	39	11	0	4
Advertising by interest groups	55	36	5	0	4
Other activities by interest groups	30	45	12	0	10
Public opinion	75	16	2	4	3
PAC contributions	7	23	54	11	5
The two political parties	43	27	27	2	1
Mail and other communications from constituents	41	39	14	2	4
Radio talk shows	36	52	4	0	8

REPUBLICAN RESPONSES:  
(n=26)

	Great Deal	Some	Not Very Much	None	Don't Know
The administration	81 %	15 %	4 %	0 %	0 %
Town meetings & public forums	65	27	8	0	0
The news media, broadcast & print	42	38	19	0	1
Advertising by interest groups	42	46	12	0	0
Other activities by interest groups	27	42	15	0	16
Public opinion	92	4	0	4	0
PAC contributions	4	15	62	15	4
The two political parties	31	38	31	0	0
Mail and other communications from constituents	65	27	4	4	0
Radio talk shows	35	61	4	0	0

**DEMOCRAT RESPONSES:**  
(n=30)

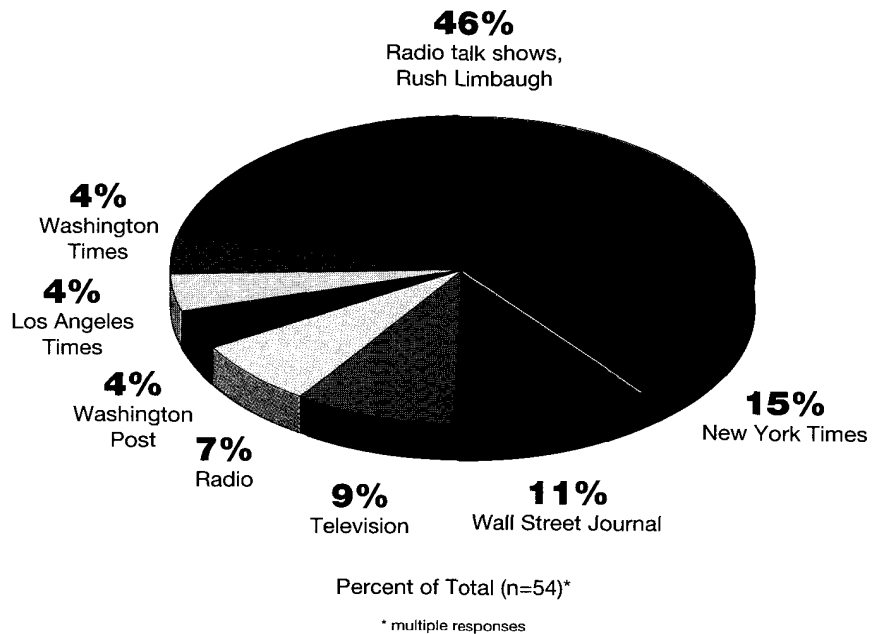
	Great Deal	Some	Not Very Much	None	Don't Know
The administration	81 %	10 %	3 %	3 %	3 %
Town meetings & public forums	17	47	30	0	6
The news media, broadcast & print	50	40	3	0	7
Advertising by interest groups	67	27	0	0	6
Other activities by interest groups	33	47	10	0	10
Public opinion	60	27	3	3	7
PAC contributions	10	30	47	7	6
The two political parties	53	17	23	3	4
Mail and other communications from constituents	20	50	23	0	7
Radio talk shows	37	43	3	0	17

**B. If you were to pick the two most influential, which would they be?**

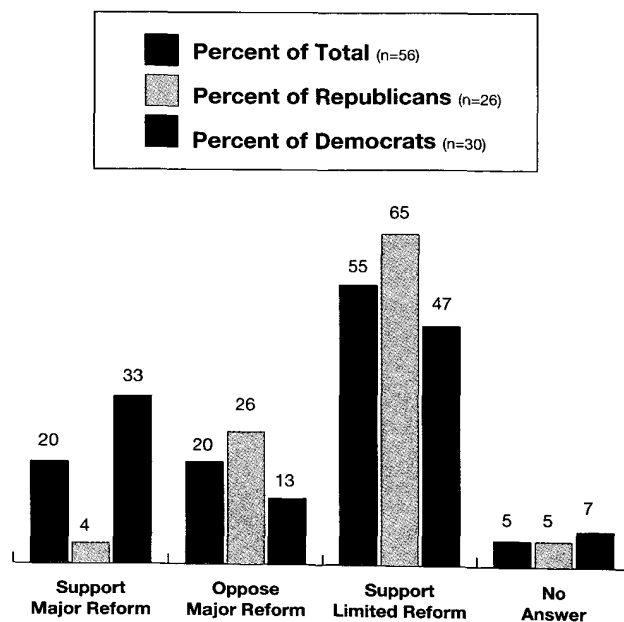
**Republican:** Public Opinion and the Administration

**Democrat:** The Administration and Advertising by Interest Groups

C. Of the media sources (e.g., editorials of The New York Times, Rush Limbaugh) which specific one or two do you believe had the most influence in the outcome of the debate?



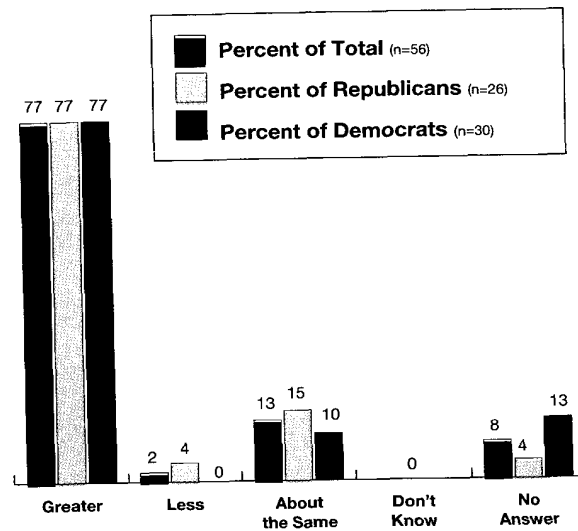
4. Generally, did the communications you received on the subject support or oppose major health care reform or support more limited reforms?



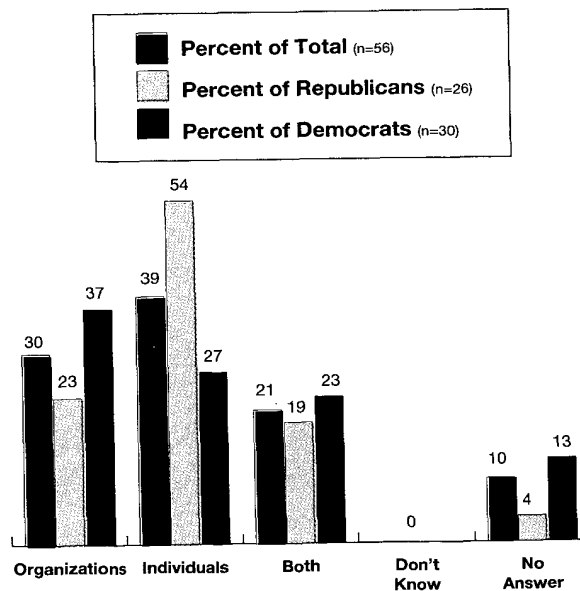
5. A. *What volume of mail did you receive on the subject?*

About half of the respondents did not quantify the mail. They described the volume as "tons," "huge," "unbelievable," "lots," "very heavy." Others reported amounts ranging from less than 100 to 3,000 letters and cards a week. Some provided totals ranging up to more than 20,000 letters.

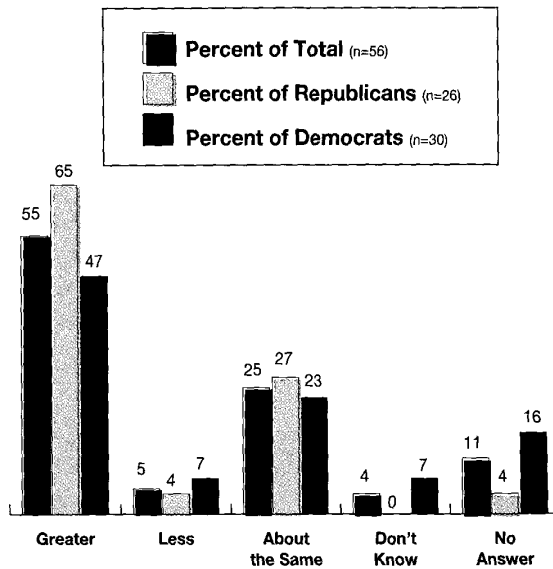
B. *Was this greater or less or about the same as you normally receive on most other major issues?*



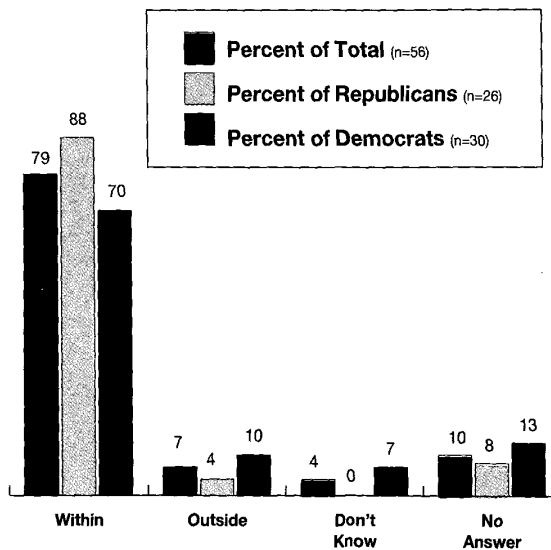
C. *Was most of the mail generated by organizations or did it come from individuals who were not part of an organized mail campaign?*



6. A. Was the volume of telephone calls to your office greater or less or about the same as you normally receive on most other major issues?

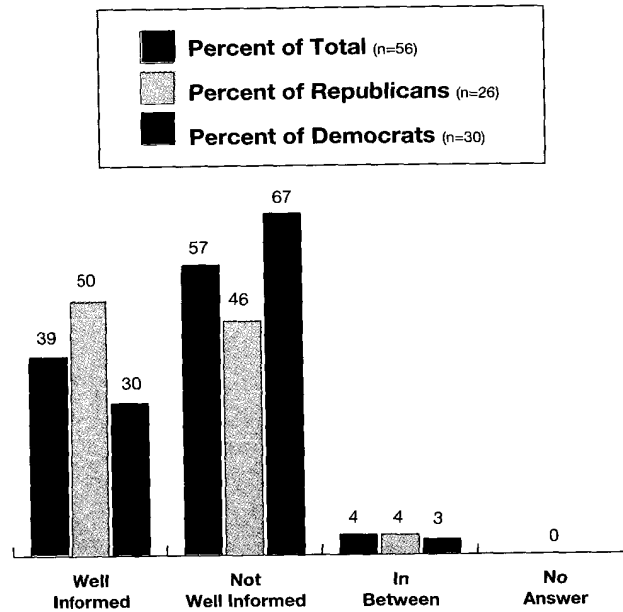


B. Did most of the calls come from within or outside the district/state?

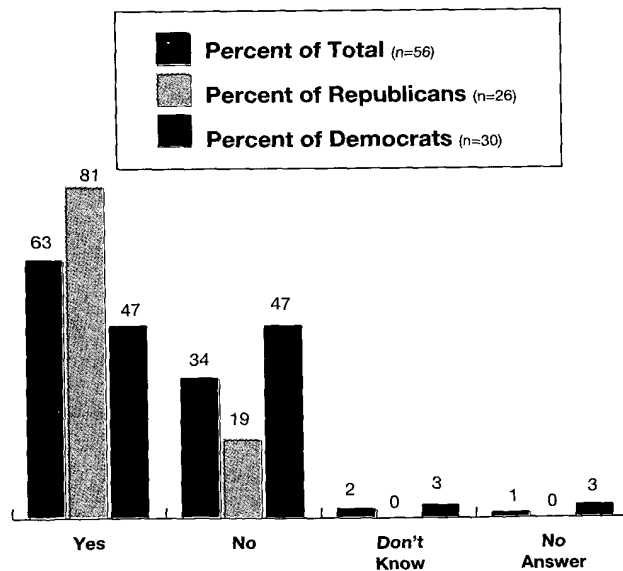




7. A. In your opinion, was the public generally well informed or not well informed on health care reform issues?



B. Did the public become better informed during the course of the debate?



8. A. What advice can you offer to guide future efforts to enact health care reform legislation?

	Percent of Total (n=57)*	Percent of Rep (n=28)*	Percent of Dem (n=29)*
Incremental, slow, in stages	44 %	39 %	48 %
Build consensus, bipartisan	19	18	21
Keep simple, fix problems	18	25	10
Involve and inform public	11	11	10
Incremental won't work, must be comprehensive	5	0	10
Don't jeopardize insured	3	7	0

\* multiple responses

B. What do you believe will be the main priorities of the next Congress in health care reform?

	Percent of Total (n=64)*	Percent of Rep (n=43)*	Percent of Dem (n=21)*
Insurance reform, portability, pre-existing conditions	23 %	21 %	29 %
Medical malpractice, tort reform	17	21	9
Cost-containment	11	7	19
Anti-trust reform	9	12	5
Administrative reform, paperwork	6	7	5
Access	6	5	9
Tax changes	6	9	0
Medicare/Medicaid reform	5	7	0
Comprehensive reform	5	0	14
Medical IRA	5	7	0
Services for women, children	3	2	5
ERISA reform	3	2	5

\* multiple response



## SURVEY QUESTIONS

.....

1. In your opinion, what are the principal factors that contributed to the outcome of the health care debate?
2. Which interest groups had the greatest influence in the congressional debate and decisions on health care reform?

Which interest groups had the greatest influence in your district/state?

3. In your opinion, did each of the following have a great deal, some, not very much, or no influence on the outcome of the congressional debate on health care reform?

	great deal	some	not very much	none	don't know
The administration	_____	_____	_____	_____	_____
Town meetings & public forums	_____	_____	_____	_____	_____
The news media, broadcast & print	_____	_____	_____	_____	_____
Advertising by interest groups	_____	_____	_____	_____	_____

Other activities by interest groups	_____	_____	_____	_____	_____
Public opinion	_____	_____	_____	_____	_____
PAC contributions	_____	_____	_____	_____	_____
The two political parties	_____	_____	_____	_____	_____
Mail and other communications from constituents	_____	_____	_____	_____	_____
Radio talk shows	_____	_____	_____	_____	_____

If you were to pick the two most influential, which would they be?

Of the media sources (e.g. editorials of The New York Times, Rush Limbaugh) which specific one or two do you believe had the most influence in the outcome of the debate?

4. Generally, did the communications you received on the subject support or oppose major health care reform or support more limited reforms?

\_\_\_\_\_ support major reforms

\_\_\_\_\_ oppose major reforms

\_\_\_\_\_ support limited reforms

5. What volume of mail did you receive on the subject?

Was this greater or less or about the same as you normally receive on most other major issues?

\_\_\_\_\_ greater

\_\_\_\_\_ less

\_\_\_\_\_ about the same

\_\_\_\_\_ don't know

Was most of the mail generated by organizations or did it come from individuals who were not part of an organized mail campaign?

- \_\_\_\_\_ organizations
- \_\_\_\_\_ individuals
- \_\_\_\_\_ don't know

6. Was the volume of telephone calls to your office greater or less or about the same as you normally receive on most other major issues?

- \_\_\_\_\_ greater
- \_\_\_\_\_ less
- \_\_\_\_\_ about the same
- \_\_\_\_\_ don't know

Did most of the calls come from within or outside the district/state?

- \_\_\_\_\_ within
- \_\_\_\_\_ outside
- \_\_\_\_\_ don't know

7. In your opinion, was the public generally well informed or not well informed on health care reform issues?

- \_\_\_\_\_ well informed
- \_\_\_\_\_ not well informed

Did the public become better informed during the course of the debate?

\_\_\_\_\_ yes

\_\_\_\_\_ no

\_\_\_\_\_ don't know

8. What advice can you offer to guide future efforts to enact health care reform legislation?

What do you believe will be the main priorities of the next Congress in health care reform?