

# Appendix A: Overview of OTA Assessment: Technology, Insurance, and the Health Care System

## Background

Congress has been concerned for many years with serious and growing problems of health care costs, access, and quality. In response to requests from the Senate Committee on Labor and Human Resources (Edward Kennedy, Chairman), the House Committee on Energy and Commerce (John Dingell, chairman), the House Committee on Ways and Means Subcommittee on Health (Bill Gradison, then Ranking Minority Member), Senator Charles E. Grassley (Committees on Budget, Finance, Special Committee on Aging), and Senator Ted Stevens,<sup>1</sup> OTA'S assessment, *Technology, Insurance, and the Health Care System*, addresses these congressional concerns by focusing on the following issues:

1. What does the available literature say about the impact of lacking health insurance on access to care and patient health outcomes?
2. Can a minimum benefit package be fashioned from the perspective of effectiveness and cost-effectiveness?
3. What cost implications do the leading types of health care reform proposals have in seven areas: national health care spending and savings; Federal, State, and local budgets; employers (large and small); employment; households (low, mid-

dle, and upper income); other costs in the economy; and administrative costs?

## Schedule and Plan

The assessment was approved by the Technology Assessment Board in April 1991, and began in July 1991. In June 1992, the request letter for this Report was received from Senator Stevens.

An advisory panel for the overall assessment was formed in November 1991; the advisory panel met in January and December 1992; the final meeting of the advisory panel is scheduled for May 1993.

In addition to the release of this Report, OTA has released, or plans to release, the following documents related to the assessment:

1. *Does Health Insurance Make a Difference?*—*Background Paper (OTA-BP-H-99)*.

This interim report, requested by the Senate Committee on Labor and Human Resources, summarizes the state of the literature on the relationships among insurance coverage, access, and patient health outcomes; provides a conceptual framework for evaluating access to health care and the health effects of such access; and provides an overview of insured and uninsured populations in the United States as of 1990. The

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<sup>1</sup> Senators Grassley and Kennedy and Representative Dingell are also members of the Technology Assessment Board (TAB), the congressional body that governs OTA. Senator Stevens was a member of TAB.

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- background paper is available for congressional purposes from OTA (49241), and to the public from the U.S. Superintendent of Documents (phone number 202/275-3030; address: Washington, DC 20402; GPO stock number 052-003-01301-1, \$5.00 per copy).
2. *Health Insurance: The Hawaiian Experience--Background Paper* (will not be printed).

This background paper is available from OTA for congressional use by calling OTA at 49241, and to the public by calling OTA at 202/228-6140.
  3. *Care for Depression: Issues Raised in Using Effectiveness and Cost-Effectiveness Information to Design a Mental Health Benefit—Background Paper*.

This case study will be available from GPO in winter 1993.
  4. *Primary Care for Uninsured People: Efficacy and Access--Background Paper*.

This background paper will be available from OTA in summer 1993.
  5. *Nonfinancial Barriers to Access--Background Paper*.

This background paper will be available in late 1993; plans for distribution are not yet final.
  6. *Benefit Design in Health Care Reform*.

This, the main report of OTA'S assessment, will be available from GPO in fall 1993.
  7. *Insurance Status and Health Care Utilization: Analysis of Four Data Bases and Cost Implications of Universal Coverage--Background Paper*.

This background paper is scheduled to be available in fall 1993; plans for distribution are not yet final.