





MEDIA COVERAGE OF HEALTH CARE REFORM A FINAL REPORT

A CONTENT ANALYSIS

The Kaiser Health Care Media Monitoring Report: A Joint Project for the Kaiser Family Foundation, Times Mirror Center for The People and The Press, and Columbia Journalism Review

> Research and analysis by the Times Mirror Center in association with the Kaiser Family Foundation and Columbia Journalism Review

FOR FURTHER INFORMATION CONTACT:

Andrew Kohut, Director Lee Ann Brady, Project Manager Times Mirror Center For The People & The Press (202) 293-3126 Matt James, Vice President Communications and Media Programs Kaiser Family Foundation (415) 854-9400

Suzanne Braun Levine, Editor Dennis F. Giza, Associate Publisher Columbia Journalism Review (212) 854-2716

HEALTH CARE REFORM: CONTENT ANALYSIS OF PRESS COVERAGE

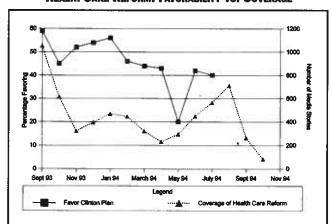
Health Care Reform was resurrected briefly as a major story in the American print and broadcast media from July through August 1994, as Congressional consideration of the issue came to a head. The amount of coverage rivalled the record levels of space and time devoted to the subject a year earlier when President Clinton unveiled his reform proposal. But coverage plummeted as reform began its death throes in September after Congress recessed without voting on the issue and Democrats admitted health care was dead for the session at least. The issue was virtually invisible in the mid-term election campaign, both on the political stumps and in the media.

During the third and final period of the Times Mirror content analysis of media coverage of the health care issue — five and a half months from July through mid-November 1994 — the stories increasingly followed trends that were identified from the outset of this work a year earlier. Most striking was that the politics of reform dominated in the coverage, while stories about the potential impact of reform on individuals and their families got ever-decreasing attention. Coverage also was concentrated increasingly on Congress rather than the White House, and on individual Congressmen rather than the President or Hillary Rodham Clinton, as alternative reform measures were introduced, debated, and ultimately discarded.

Public support for health care reform fell off gradually but steadily from its high water mark of 59% in favor (33% opposed) after the Clinton plan was presented. It dropped to 40% in favor (56% opposed) in mid-1994, despite the dramatic rise in coverage at the time of the Congressional debate. Gallup polls show that majority support turned to majority opposition between January and February 1994, following Clinton's State of the Union address. There was little correlation between the amount of coverage of the reform issue and support for the Clinton plan — coverage rose sharply as support eroded noticeably — reflecting the fact that most of the

coverage dealt with alternative proposals that implicitly rejected the Clinton formula.

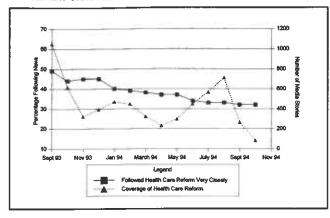
HEALTH CARE REFORM: FAVORABILITY VS. COVERAGE



PUBLIC REMAINS ATTENTIVE

But while support decreased over the year by about one-third, that level was nonetheless substantial. Moreover, close attention continued to be given to news about the issue by the public. This attentiveness decreases in parallel with support for the Clinton plan but was seemingly unrelated to the amount of media coverage to the issue. Some 32% of the public said it was following news reports about reform "very closely" in September and October when coverage had taken a dive into its post-mortem stage. The issue thus appeared to remain alive into the campaign season even if it was not politically viable in the strategy of Democratic candidates. Despite the threats and promises a year earlier by voters to punish or reward their Congressional candidates according to their position on the issue, less than 1% of more than 2,000 stories analyzed in the almost half year leading up to the election linked any politician's electoral prospects to the outcome of the health care reform debate.

HEALTH CARE REFORM: FOLLOWED CLOSELY VS. COVERAGE



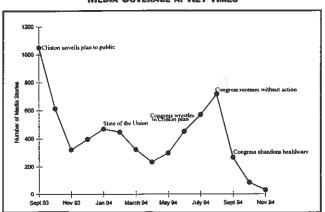
At the same time, however, the public's knowledge about key aspects of the reform package, such as whether it promised health care for all Americans, was decreasing over the course of the entire study period as coverage decreased and public dissatisfaction with that coverage rose. In an August 1994 Harris poll, only 32% of the public rated the media as excellent or good (5% said excellent) on health care coverage, down markedly from a year earlier when 44% said the coverage was excellent or good (7% said excellent) in a September 1993 PSRA/Harvard poll.

For the American press, health care reform was a challenging story with both social and political dimensions. It chose to concentrate on the political aspects, which was understandable but also the easier road to travel. The proposal had to become law before it would have any effect, so political infighting, counter proposals, and lobbying activities were necessarily important aspects of the issue. But stories that highlight conflict also attract wider audiences than those which seek to explain the intricacies of financing and providing health care to Americans (who, except for South Africans, are the only citizens of a western Democracy without universal coverage). Judging by the public's response, however, the media flunked the job.

RANGE OF STUDY

This report both summarizes the third and final phase of the content analysis study of media coverage and provides a summation of the entire effort which was conducted by the Times Mirror Center, under the sponsorship of the Kaiser Family Foundation in conjunction with the *Columbia Journalism Review*. Previous reports covered September through November, 1993 (Period I), and January 15 through May 31, 1994 (Period II). The last period extended five and a half months, from June 1 through November 13, 1994 (Period III).

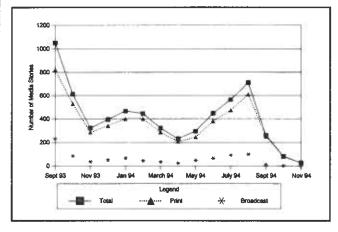
MEDIA COVERAGE AT KEY TIMES



Data was compiled by reviewing and coding stories that appeared in national and regional newspapers and national news broadcasts. During the first period, 1,987 stories were coded; during the second period, 1,529 stories; and during the final period, 2,084 stories. In addition to the total number of stories published and broadcast during the period, the stories were categorized according to straight news, backgrounders, interviews, editorials, and commentary or "op-ed" pieces. Excluded were broadcast panel discussions and print letters-to-the-editor.

In the final period, stories on health care reform were plentiful initially, averaging about 500 a month in June and July and topping 700 in August. Coverage plunged by more than half in September, by another two-thirds in October, and averaged merely one a day for the first half of November. The print media stayed with the health care story much longer than television. In September, out of 263 total print and broadcast pieces on the issue, television provided less than 5% (12 pieces); in October, only 3 of 83 total pieces were on broadcast media; and in the first half of November, when total coverage on health care dropped to merely one-a-day, broadcast coverage disappeared; no stories on the issue were broadcast.

HEALTH CARE REFORM COVERAGE: TOTAL VS. PRINT VS. BROADCAST



THE CLINTONS AND THEIR PLAN

Not surprisingly, the focus was on Capitol Hill during the final period of analysis. Health care news was being made at least three times more often by Congressional figures than Administration officials. President Clinton remained the top individual news maker over the course of the entire period studied, but specific members of Congress challenged and sometimes surpassed him at various points, particularly at the height of Congressional activity on the issue. Among these were two Democrats, Sen. Daniel P. Moynihan of New York and Sen. George Mitchell of Maine, and Sen. Bob Dole (R-Kansas), the minority leader.

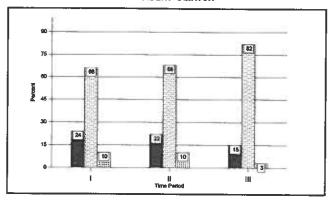
Hillary Rodham Clinton's coverage remained virtually unchanged throughout the second and third periods, although it was half of the attention she enjoyed in the initial (Fall 1993) period when she was most actively campaigning for the reform proposal. She was, however, featured prominently in the obituaries and post-mortems on the Clinton plan, at times eclipsing all other newsmakers — her husband and the various senators — combined.

Along with the decline in stories of reform featuring the Clintons, the coverage became less favorable toward them in the final period studied. Only 3% of the stories about the President had a positive spin, down from 10% in each of the previous periods. Mrs. Clinton's favorable coverage dropped even more precipitously: from 31%

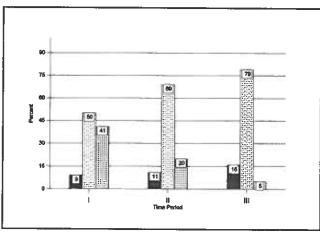
positive in the first period, through 17% in the second period (early 1994), to only 4% in the last period. Negative coverage of President Clinton also dropped over the course of the study, from 22% in both of the earlier periods to 18% at the end. But Hillary Clinton's negative coverage increased by about half, to 13% of stories with negative spin in the final period. Overall, however, the stories about both Clinton's were remarkably balanced — a story was judged in balance or neutral when fewer than twice the comments, quotes, citations, or innuendoes were negative vs. positive or vice versa — over the course of the study: over 60% in the first period, rising through the second period to more than 80% in the final period.

BALANCE IN COVERAGE -- PRINT

PRESIDENT CLINTON

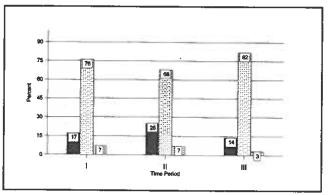


HILLARY RODHAM CLINTON

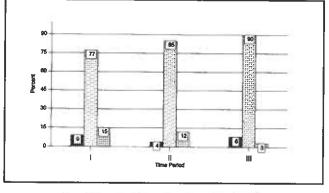


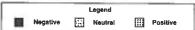
BALANCE IN COVERAGE - BROADCAST

PRESIDENT CLINTON



HILLARY RODHAM CLINTON





Somewhat less balance was found in stories in the third period about prospects for passage of some kind of health care reform plan. Nonetheless, it was considerable, with 65% of pieces judged neutral. By this time, the media had largely given up on the Clinton plan for reform, and more than half of the stories about prospects for reform legislation dealt with alternatives to his proposal. The domination of the health care story by politics was most apparent in this period: fully 62% of all pieces in all the media gave odds for or against enactment of some reform law. More than half of them handicapped alternative plans, of which 37% were neutral, 11% pessimistic, and 7% optimistic. Relatively little attention had been given to alternative plans in the earlier two periods under study, with almost all the focus on Clinton's proposal. In late 1993, 66% of all stories were neutral about prospects for Clinton's plan, with 16% pessimistic and 9% optimistic. In the second period, in early 1994, neutrality dropped to 47%, pessimism rose to 21% and optimism slid to 6%. In the final period, only one in three stories (32%) assessed prospects for the Clinton plan; with 20% neutral, 10% pessimistic about passage, and 2% optimistic.

DIFFERENCES IN THE MEDIA

For all media, the monthly averages of total number of stories were highest in Period I, dipped substantially in Period II, and rebounded in Period III before the final decline. Television news never accounted for more than 16% of the total coverage, but was usually above 10% until the last three months of the study when the issue largely disappeared. National papers ran about twice as many stories on the issues as the regional papers studied. Of the national papers, most stories were carried by The Washington Post (804) and The New York Times (743), followed by USA Today (575), the Los Angeles Times (552), and The Wall Street Journal (444). Less differences appeared in the television news, which was led by CNN (169 pieces) and ABC (166), then CBS (149), NBC (138), and Mac-Neil/Lehrer (126). The newsweeklies, finally, did not return to the story significantly in the final period of study; and while initially each had cover-related major stories about health care reform, they dealt with the death of the reform effort only in passing. Time, in particular, ran a 75word obituary in its "Chronicle" section, which was well below the 100word minimum for inclusion in this study. Among other differences found by the study was that broadcast news became more political in time, compared to the print medium. In the initial period, about three in ten stories in both media dealt with the impact on politics of the health care issue, but in the second and third periods under review, politics weighed much more heavily in broadcast than in print pieces: 78% and 85% for broadcast in the respective periods, compared to 59% and 70% for print. Broadcast also tended, over time, to feature a newsmaker to tell the story more than print, particularly in the final period of the study. Almost two-thirds (63%) of broadcast pieces in Period III focused on news made by Congress, compared to less than half (48%) of print stories.

METHODOLOGY

The following 17 news outlets were monitored for the period of June 1, 1994 through November 13, 1994.

National newspapers were selected on the basis of circulation, distribution, size of Washington D.C. bureau, and audience. Geographic distribution and diversity of parent corporation were factors in regional selections.

Broadcast news was taped in Washington, D.C., according to published television timetables. Thus, this study was subject to preemption by local affiliates, a common occurrence on weekends devoted to college and professional sports.

NATIONAL NEWSPAPERS The Los Angeles Times (daily), The New York Times (daily), The Wall Street Journal (M-F), The Washington Post (daily), USA Today (M-F)

REGIONAL NEWSPAPERS The Dallas Morning News, The Des Moines Register, The Miami Herald, The Seattle Times (all dailies)

Newsweek, Time, U.S. News & World Report

BROADCAST NEWS ABC World News Tonight, CBS Evening News, CNN Evening Prime, NBC Nightly News (all daily broadcasts), PBS MacNeil/Lehrer NewsHour (M-F broadcast)

SCREENING AND INCLUSION

All newspapers, magazines, and broadcasts were reviewed in their entirety. If one-third, or more, of a news story was related to health care reform, it was included in this study, with some exceptions:

- 1) For print, only articles of 100 words or longer were studied;
- 2) For broadcast, all references were coded, but anchor lead-ins of less that 35 seconds were considered part of the upcoming report unless it was clear that the lead-in was intended to stand alone;
- 3) For broadcast, only the *produced* pieces, reported by a correspondent, were included; discussions among experts and/or partisans, moderated by an anchor or correspondent, were not.

The one-third rule for inclusion is accepted practice in content analysis. The exceptions noted insure that those stories that are too brief to be meaningful, or are not truly the product of a news organization, are not part of the final analysis.

INTERCODER RELIABILITY

Intercoder reliability measures the extent to which coders, operating autonomously, code or classify the same story the same way. Intercoder reliability tests were performed throughout this study, and no significant differences were found to exist on a recurring basis.

COMPARATIVE RESULTS HEALTH CARE REFORM NEWS CONTENT ANALYSIS

I. September 1-November 30, 1993	N=1,987 News Stories
II. January 15-May 31, 1994	N=1,529 News Stories
III. June 1-November 13, 1994	N=2,084 News Stories

1. News Source Designates the newspaper, magazine, or broadcast in which the story appeared. *El Diario* and *Amsterdam News* were part of the analysis for Period I only. Figures represent the total number of stories for each entry.

PRINT

NATIONAL	1	II	Ш
Los Angeles Times	233	134	185
The New York Times	228	163	352
TheWall Street Journal	163	147	134
The Washington Post	270	258	276
USA Today	194	170	211

REGIONAL	1	11	100
The Dallas Morning News	124	122	179
The Des Moines Register	120	109	142
The Miami Herald	124	106	148
The Seattle Times	107	81	125
El Diario	14	_	_
Amsterdam News	_	_	_
Newsweeklies			
Newsweek	26	16	25
Time	15	10	18
U.S. News & World Report	.16	23	18

Broapcast For Period I only, one morning show was monitored per week on a rotating basis.

EVENING NEWS			
ABC World News Tonight	51	39	76
CBS Evening News	74	37	38
CNN Prime News	70	46	53
NBC Nightly News	60	32	46
PBS MacNeil/Lehrer	34	34	58
Morning Shows			
ABC Good Morning America	36	_	_
CBS Morning Show	22	_	_
NBC Today Show	_	_	_
NPR Morning Edition	6	_	

2. DATE Designates the month and year of publication or broadcast. Figures represent the total number of stories for each entry.

		1	11	111
I.	September 1993	1051	820	231
	October 1993	614	529	85
	November 1993	322	285	37
II.	January 15-31, 1994	234	200	34
	February 1994	446	401	45
	March 1994	322	287	35
	April 1994	232	207	25
	May 1994	295	246	49
III.	June 1994	448	382	66
	July 1994	565	475	90
	August 1994	711	611	100
	September 1994	263	251	12
	October 1994	83	80	3
	November 1-13, 1994	14	14	

3. Position Designates the placement of the story within the publication or newscast. Figures are percentages.

Newspapers	1	90	111
Page One Story	16	11	16
National/International Section	46	53	52
Editorial Pages/Section	18	23	21
Business Section	10	5	2
Metro/Local/Regional Section	4	5	3
Style/Life Section	1	1	*
Special Section (Magazine,	•		
Science, Health, etc.)	5	2	6
Other	*	*	*
	100%	100%	100%
Magazines			
Cover Associated Story	40	_	_
Outside line	14	8	7
No cover appearance	_46	. 92	_93
**	100%	100%	100%

Broadcasts	I	#	111
First story	11	10	11
Second story	10	11	15
Third story	10	13	8
Fourth story	10	14	13
Story 5 to 9	28	38	39
Story 10 to 14	17	13	13
Story 15 to 19	7	1	1
Story 20 to 24	3	*	*
Story 25 to 29	2	*	*
Story 30 or later	2	*	*
•	100%	100%	100%

4. STORY LENGTH Designates story length as measured by number of words or by number of minutes or seconds in each story. Figures are percentages.

Newspapers and Magazines	1	п	Ш
Less than 300	9	14	10
300-499	18	22	19
500-999	45	42	43
1,000-1,499	20	17	20
1,500-2,499	7	5	7
2,500 or more	_1	*	_1
	100%	100%	100%
Broadcasts			
Less than 30 seconds	6	2	_
:30-:59	5	11	6
1:00-1:29	9	11	11
1:30-1:59	9	21	10
2:00-2:29	36	34	43
2:30-2:59	10	7	7
3:00-3:59	10	6	10
4:00-4:59	5	2	5
5:00 and over	_10	6	8
	100%	100%	100%

5. WIRE SERVICE Designates whether the story was filed by a staff reporter, drawn from wire services, or was a Commentary/Op-ed piece written by a non-staff/guest columnist or a story without a byline. Figures are percentages.

Newspapers Only	ı	11	111
Staff Writer	70	67	68
Associated Press	5	6	5
Chicago Tribune Service	*	*	*
Gannett	*	*	*
Knight-Ridder	2	1	1
L.A. Times Wire Service	1	2	3
N.Y. Times Wire Service	1	1	2
Reuters	*	*	1
Washington Post Service	2	2	2
Commentary/Op-ed: Non-staff	13	17	14
Other wire service	3	3	3
Don't know/can't tell	3	1	1
	100%	100%	100%

6. DATELINE Designates location from which story was filed. Figures are percentages. T=total, P=print, and B=broadcast.

	<u>! II</u>		<u>! II</u>			Ш	
	T	T	T	P	В		
Washington, D.C.	66	68	74	72	85		
New York City	8	6	6	7	1		
Other U.S./International	21	25	20	21	14		
Unknown	5	1	*	*	_=		
	100%	100%	100%	100%	100%		

7. STORY TYPE Figures are percentages. Categorizes the story as:

	1	1 11			
	T	T	T	P	В
Lengthy interview	3	*	*	*	_
News	27	43	39	36	61
Backgrounder	50	34	34	34	39
Commentary/Op-ed	12	14	14	16	_
Editorial	4	7	8	9	_
Informational Sidebar	4	2	5	5	_=
	100%	100%	100%	100%	100%

8. Use of GRAPHICS (print only) Identifies the use of graphics within each story. Figures are percentages.

		II	111
Graphics used	14	7	9
Graphics not used	<u>86</u>	<u>93</u>	<u>91</u>
	100%	100%	100 %

9. LEVEL OF IMPACT — Focus of Story Identifies the manner in which the story examines the impact of health care reform. Figures are percentages.

. 0	1	Ш		Ш	
IMPACT ON:	T	Ŧ	T	P	В
Individuals and families	17	8	4	4	3
Health care profession	6	2	1	1	1
Overall health care system	21	16	17	19	6
Politics	31	62	72	70	85
The economy	12	8	4	4	4
The nation (non-political)	<u>13</u>	4	2	2	1
•	100%	100%	100%	100%	100%

10. Recurring Story Leads Designates the specific story lead or "big story," measuring ad hoc issues and events of major proportion. Figures are percentages.

i. September 1-November 30, 1993	T	P	8
Discussion/Analysis of actual Clinton Plan	23	26	9
Pre-release analysis of Clinton Plan	11	11	13
Presenting the Clinton Plan/Public Outreach	10	10	12
Clinton speech to Congress/Nation	6	5	10
Hillary testifies before Congress	4	3	7
Clinton bill sent to Congress	3	2	5
Leak of Clinton's reform plan	3 2 2 2	2	4
Plans other than Clinton's	2	2	2
Clintons attack insurance industry ads	2	1	3
Republicans propose alternative plan	1	1	2
Republican response to plan/Speech	1	1	- 1
Delay in Clinton's delivery to Congress	1	1	2
Complexity of reform issue	1	1	_
Abortion and reform package	1	1	*
State/Local reforms to-date	*	*	*
Other	*	*	*
Not a big story	_32	33	_30
	100%	100%	100%
II. JANUARY 15-MAY 31, 1994			
Presenting the Clinton Plan/Public Outreach	17	15	27
Discussion/Analysis of Clinton Plan	10	11	4
Clinton's State of the Union Address	5	5	8
House/Senate Committee Action/Votes	5	5	1
Alternatives to Clinton Plan	4	4	3
State/Local Reforms to-date	3 3 3 3 2 2	3	1
Hill Hearings RE: Health Care Reform	3	. 3	6
Business Groups Anti-Clinton Plan	3	3	5
Cooper Plan in Spotlight	3	3	2
Harry & Louise Saga Continues	3	3 2 2 2	5
Republican Response to State of the Union Speech	2	2	1
Kennedy Senate Initiatives Re: Health Care Reform		2	1
Rostenkowski's Rush to Enact Reform	1	1	2
Complexity of Reform Issue	1	1	_
Abortion and Health Care Reform	*	*	_

George Mitchell's Senate Initiatives Re: Reform

Not a Big Story

III. June 1-November 13, 1994	T	P	B
House/Senate Floor Action	7	6	14
Presenting the Clinton Plan/Public Outreach	6	5	11
Congressional Committee Action	6	5	7
Health Care Reform - Dead or Alive?	5	4	7
State/Local Reforms to-date	4	5	2
Bipartisan Congressional Coalition	4	4	4
George Mitchell Senate Initiatives re:Health Care Reform	n 4	3	7
Post-Mortems on Health Care Reform	3	3	1
Clinton backtracks re: Universal Coverage	3	2	4
Health Care Reform & Special Interest Advertising	2	2	3
Proposed options/alternative plans	2	2	2
Congressional August recess over			
- Health Care Reform Debate returns	2	2	1
House Democrats/Gephardt Last-Ditch Bill	2	2	1
1995 — What Happens to HCR?	2	2	_
Democrats Say: Let's Start Over in '95	1	1	2
Moynihan — Saviour of Health Care Reform	1	1	2
Catholics/Abortion/Health Care Reform	1	1	1
August Delay in Congressional Vote	1	1	_
Discussion/Analysis of Actual Clinton Plan	1	1	2
Congressional Floor Action	1	1	2
Other	5	8	8
Not a Big Story	_37	_39	_19
	100%	100%	100%

11. Principal News Subject Identifies the principal news subject in each story. Figures are percentages.

	Ī	<u>]]</u>		111	
GENERAL CATEGORIES	T	Ŧ	T	P	В
Cost of Proposal	3	5	1	1	1
Government's role	6	6	2	2	2
Who's covered	7	6	8	8	11
What's covered	8	5	5	5	4
Who pays	11	8	7	8	5
Reform: approaches and features	16	13	12	12	10
Impact on quality	1	1	1	1	_
Restrictions on choice	1	1	*	*	*
Portability	*	*	*	*	_
Primary practice emphasis	3	1	2	2	1
Economic factors	6	4	2	2	1
Impact on existing programs	3	1	1	1	
Politics of health care reform	28	46	57	56	65
Other/Miscellaneous	7	3	2	2	*
	100%	100%	100%	100%	100%

SPECIFIC TOPICS Figures represent the total number of stories for each entry.

each entry.	1	<u> </u>		<u> </u>	
COST OF PROPOSAL	T	T	T	P	В
Overall price tag	13	7	2	2	_
Impact on federal budget deficit	7	24	1	1	_
Cost of proposal/Other	41	39	21	18	3
GOVERNMENT ROLE					
Price controls on fees/rates/etc.	18	17	6	6	
Set spending caps	12	3	_		
Established uniform benefits	3	1	_	_	
Set uniform standards for plans	- 1	2	_	_	
Certification of health plans	3	2	1	1	
Compiles individual citizen records	_	2	1	_	1
Other	90	60	40	6	4
Who's Covered					
Timetable for coverage to take effect	8	1	6	5	1
Percent of population covered	1	8	20	14	6
Coverage of rural populations	4	6	1	1	_
Coverage of current uninsured	24	9	11	10	1
Coverage of disabled	1	6	1	1	_
Opt-outs	_	1			_
Coverage/Other	89	68	128	106	22
WHAT'S COVERED					
Coverage of "ordinary & necessary" care	13	2	9	7	2
Coverage of long-term care	15	5	7	7	_
Coverage of mental health services	11	8	5	5	_
Coverage of abortion	30	16	36	31	5
Benefits for current uninsured	12	2	4	4	_
Comprehensiveness/Other	75	38	41	38	3

	1	Ш		111	
Who Pays	T	T	T	P	B
Federal income tax	3	6	1	1	_
Cigarette/Liquor tax	42	11	19	17	2
Tax insurance benefits	. 1	2	2	2	_
Value-added tax	_	2	_	_	_
Tax on hospital windfalls	_	1	_		
Employer mandates	16	55	76	65	11
"Fairness" of financing	7	2	_	_	_
Consumer costs	18 139	1 43	57	55	
Paying for reform/Other REFORM — APPROACHES AND FEATURE		40	JI	,,,	_
HIPCs	RES 9	0			
Health plans or provider networks	32	8 8	6	6	_
Payment of doctors	1	1	_	_	
Medical malpractice	10	1	6	5	1
Health security cards	1		_	_	
Continued role of insurance companies	_	5	7	7	_
Administrative cost of running system	8	1		_	_
Alternate approach to new system	29	79	153	130	23
Regional Health Alliances	_	23	4	4	_
Establishment of National Health Board	_	1	1	1	_
Organization/Components and Other	211	78	62	60	2
IMPACT ON QUALITY					
Present insured get same quality care	9	6	_		
Delays for appointment, office waits	1	_	_	_	_
Quality of health care/Other	14	14	12	12	_
RESTRICTIONS ON CHOICE					
Patient free to choose provider	18	7	3	2	1
Doctors free to choose treatment	3	4	2	2	_
Freedom of choice/Other	5	7	5	5	-
PORTABILITY					
Coverage moves with individual	6	3	2	2	_
PRIMARY PRACTICE EMPHASIS					
Shift doctors to family/primary care	12	3	5	5	_
Reorganize medical practice/Other	40	15	29	27	2
ECONOMIC FACTORS					
Reform's impact on jobs	17	5	_	_	
Reform's impact on small business	35	11	7	6	1
Reform's impact on big business	_	7	2	2	_
Economy and reform/Other	67	30	22	21	1
IMPACT ON EXISTING PROGRAMS					
Medicare system/benefits	12	11	12	12	_
Abolishing Medicaid	6	1	2	2	_
Worker's compensation	3	_	1	1	_
Auto-accident injuries]	_	_	_	_
Existing programs/Other	32	4	9	9	_
POLITICS OF HEALTH CARE REFORM					
Role of Clinton Administration	67	84	128	97	31
Health Care Reform Task Force	20	4	25	25	_
HHS/Bureaucratic role	3	I	1	1	_
Congressional role	100	197	554	458	96
Special interest role	60	96	93	81	12
State/Local role	17	21	44	42	2
Federal/State/Local relationship	202	14	10	10	26
Politics/Other	283	282	334	298	36
OTHER/MISCELLANEOUS	131	46	47	47	_

12. PRINCIPAL AND SECONDARY NEWS SUBJECT Identifies the prominent health care reform topics in each story. Figures are percentages.

_	1	Ш	<u> </u>			
GENERAL CATEGORIES	T	T	T	P	В	
Cost of Proposal	5	6	2	2	2	
Government's role	10	8	5	5	3	
Who's covered	10	9	13	12	17	
What's covered	10	6	6	. 7	5	
Who pays	17	12	14	15	11	
Reform: approaches and features	23	20	20	20	16	
Impact on Quality	2	2	1	2	-	
Restrictions on Choice	2	2	1	1	1	
Portability	1	1	*	*	_	
Primary practice emphasis	4	1	2	2	2	

		1	<u>II</u>		<u>]]]]</u>	
GENERAL CATEGORIES (CONT'D)		T	T	T	P	8
Economic factors		8	5	2	2	1
Impact on existing programs		5	2	2	2	
Politics of health care reform		36	55	66	65	78
SPECIFIC TOPICS Figures repre	cent	the t	otal nur	nhar of	otorio	for

SPECIFIC TOPICS Figures represent the total number of stories for each entry.

out only.					
	1	Щ		111	
COST OF PROPOSAL	T	T	т т	P	В
Overall price tag	18	13	3	-	-
Impact on federal budget deficit	9	31	ĭ		
Cost of proposal/Other	64	58	34	30	4
GOVERNMENT ROLE					
Price controls on fees/rates/etc.	29	18	12	12	
Set spending caps	14	4	_	_	_
Established uniform benefits	3	_	_	_	
Set uniform standards for plans	3	1	_	_	_
Certification of health plans	3	_	_	_	_
Assessment of new and					
existing technology	. —	2	_	_	_
Gov't compiles individual citizen record		2	1	_	1
Government role/Other	146	95	89	82	7
WHO'S COVERED				_	_
Timetable for coverage to take effect Percent of population covered	9	2	9	7	2
Coverage of rural populations	2 7	9	28	21	7
Coverage of current uninsured	35	6 13	12	1	_
Coverage of disabled	3	6	13 1	12 1	1
Opt-outs	_	1	3	3	
Coverage/Other	134	104	215	178	37
WHAT'S COVERED			217	1,0	٠,
Coverage of "ordinary and					
necessary" care	20	2	12	10	2
Coverage of long-term care	20	7	8	8	_
Coverage of mental health services	13	9	5	5	_
Coverage of abortion	32	17	44	37	7
Benefits for current uninsured	17	3	4	4	_
Comprehensiveness/Other	102	63	61	57	4
Who Pays					
Federal income tax	3	8	1	1	_
Cigarette/Liquor tax	48	14	24	20	4
Tax insurance benefits	1	3	4	4	
Employer mandates	24	84	156	133	23
"Fairness" of Financing Consumer costs	8	2	_	_	_
Tax on hospital windfalls	24	1	-	_	_
Value-added tax		1 2	_	_	_
Paying for reform/Other	240	85	116	113	3
REFORM - APPROACHES AND FEATU		0.5	110	113	J
HIPCs	11	8	2	2	
Health plans or provider networks	48	13	6	6	_
Payment of doctors	3	ĭ	_	_	_
Medical malpractice	10	1	6	5	1
Health security cards	1	_	1	_	1
Continued role of insurance companies	21	9	9	9	
Administrative cost of running system	12	3	_	_	_
Alternate approach to new system	56	114	256	219	37
Regional Health Alliances	_	31	6	5	1
Establishment of National Health Board	_	3	7	7	_
Organization/Components and Other	132	116	128	125	3
IMPACT ON QUALITY		_			
Present insured get same quality care	16	7	1	1	_
Delays for appointment, office waits	1	2:		_	_
Quality of health care/Other	29	21	26	26	_
RESTRICTIONS ON CHOICE	~-				
Patient free to choose provider	26	10	4	3	1
Doctors free to choose treatment Freedom of choice/Other	4	6	3	2	I
· ·	17	11	9	9	_
PORTABILITY Coverage moves with individual	12	-	_	_	
Coverage moves with individual Portability/Other	13	5	5	5	_
i ortaonity/Onici		2	_	_	_

	Ī	Ш			Ш	
PRIMARY PRACTICE EMPHASIS	T	Т		T	P	В
Shift doctors to family/primary care	18	5		6	6	-
Reorganize medical practice/Other	54	23		40	36	4
ECONOMIC FACTORS						
Reform's impact on jobs	29	8		2	- 1	- 1
Reform's impact on small business	52	15		11	10	i
Reform's impact on big business	_	- 11		3	3	7-3
Economy and reform/Other	94	48		31	30	1
IMPACT ON EXISTING PROGRAMS						
Medicare system/benefits	25	16	_	18	18	_
Abolishing Medicaid	8	2		4	4	
Worker's compensation	3	_		- 1	i	
Auto-accident injuries	1	_		_	_	_
Existing programs/Other	51	9		16	16	_
POLITICS OF HEALTH CARE REFORM						
Role of Clinton Administration	96	110		158	119	39
Health Care Reform Task Force	27	4		27	26	1
HHS/Bureaucratic role	3	1		1	1	_
Congressional role	155	277		699	572	127
Special interest role	89	129		123	107	16
State/Local role	23	28		52	48	4
Federal/State/Local Relationship	_	20		12	12	_
Politics/Other	415	395		401	353	48

13. PRINCIPAL NEWSMAKER Designates the principal newsmaker or spokesperson, if any, portrayed in each story. Figures are percentages.

	_ [<u> </u>		<u> </u>	
CATEGORICAL NEWSMAKERS	T	T	T	P	В
Clinton Administration	51	29	17	16	20
Congress	9	32	50	48	63
Experts (non-government)	2	1	1	1	_
Government Experts (not admin. reps.)	*	3	1	1	*
Officers/Spokesperson —					
Special Interest Groups	7	8	5	6	3
State/Local officials	1	5	3	4	1
Judiciary	*	*	*	*	_
Other	_30	_22	_23	24	13
1	00%	100%	100%	100%	100%

INDIVIDUAL NEWSMAKERS

GOVERNMENT					
Bill Clinton	24	18	8	8	10
Hillary Clinton	8	3	2	2	4
Dan Rostenkowski	*	3	*	*	-
Jim Cooper	*	2	*	*	-
Pete Stark	*	2	*	*	1
Robert Reischauer	*	2	*	*	-
Robert Dole	*	2	2	2	2
Ted Kennedy	*	1	1	*	1
George Mitchell	*	1	6	5	7
Jim McDermott	*	*	*	*	_
Daniel Moynihan	*	*	2	2	3
Richard Gephardt	*	*	1	1	2
Jay Rockefeller	*	*	*	*	*
John Chaffee	*	*	1	1	1
Harold Ickes	*	*	_	_	_
Donna Shalala	1	*	*	*	*
Fred Grandy	*	*	_		_
Al Gore	*	*	*	**	
John Kerry	*	*	_	_	
Joycelyn Elders	*	*	*	*	*
Tom Foley	*	*	1	1	_
Ira Magaziner	-1	aje	*	*	_
Phil Gramm	_		*	*	

INDIVIDUAL NEWSMAKERS (CONT'D)		Ш	Ш		
Non-Government	T	T	T	P	В
Lane Kirkland (AFL-CIO)	*	*	_	_	_
Richard Davidson (Am. Hospital Assn.)	*	*	_	-	_
Henry Aaron (Brookings)	*	*	_		_
Steven Schroeder (R.W. Johnson					
Foundation)	*	*	_	_	_
Helen Alvare (Nat'l Conference					
of Catholic Bishops)	*	*	*	*	_
Michael Bromberg (Fed. Am. Health Syst.)	*	*	_	-	_
Doug Johnson (Natl. Right to Life)	*	*	_		_

14. ISSUE DEBATE BALANCE LEVEL* Designates the extent to which the story is balanced when a policy issue debate is central to the piece. Figures are percentages.

Balanced	79	80	86	85	92
Not balanced or one-sided	_21	_20	_14	_15	8
	100%	100%	100%	100%	100%

15. President Cunton's Proposal* Designates whether the story is mainly critical or mainly positive about President Clinton, his White House/Administration, or family (excluding Hillary Rodham Clinton). Figures are percentages.

CLINTON CRITICAL	22	22	15	15	14
Policy matters	18	16	10	10	- 11
Personal qualities	*	*	1	1	_
Political ineptitude	4	6	4	4	3
CLINTON NEUTRAL	68	68	82	82	82
CLINTON POSITIVE	10	10	3	3	4
Political acumen	4	3	1	1	_
Personal qualities	*	*	*	_	2
Policy matters	6	7	2	2	2

16. HILLARY RODHAM CLINTON'S PORTRAYAL* Designates whether the story is mainly critical or mainly positive about Hillary Rodham Clinton, or her staff, including the Health Care Reform Task Force. Figures are percentages.

HILLARY CRITICAL Policy matters Personal qualities Political ineptitude	8 7 * 1	9 4 1 4	13 5 4 4	16 6 5 5	8 2 3 3
HILLARY NEUTRAL	61	74	83	79	90
HILLARY POSITIVE Political acumen Personal qualities Policy matters	31 21 9 1	17 2 10 5	4 2 1 1	5 4 1	2 - - 2

17. Portrayal of Health Care Reform's Prospects* An evaluation of the story's portrayal of the likelihood of successful implementation of a health care reform plan. Figures are percentages.

CLINTON PLAN					
Optimistic spin	9	6	2	3	1
Neutral spin	66	47	19	20	18
Pessimistic spin	16	21	10	10	12

APPENDIX: How WE CODED HEALTH CARE REFORM NEWS

The following provides further coding information for selected variables within this report.

STORY TYPE Coders identify how the journalist presented the story. Breaking events, after-the-fact accounts, and coverage of sched-

uled events are classified as **NEWS**; researched or anecdotal stories are classified as **BACKGROUNDERS**; opinion, commentary, and editorial pieces are classified as **COMMENTARY/OP-ED**.

Source of News Story Coders look for the story's origination point. News LEAKS would require that an official document had been revealed to the reporter; COVERAGE OF OPINIONS STATEMENTS OR SPECULATION FROM GOVERNMENT OR ADMINISTRATION OFFICIALS designates those stories generated by government or Clinton Administration sources; the same criteria was applied to NON-GOVERNMENT SOURCES, such as health care experts or industry spokesperson; coverage of speeches, press conferences, or breaking events were coded as NEWS EVENT; media-generated pieces were coded as NEWS ANALYSIS, INVESTIGATIVE-RESEARCHED; and other encompasses the remaining stories, including commentary, opinion and editorials.

LEVEL OF IMPACT — FOCUS OF STORY If the story examines the impact of health care reform on individuals, patients or their families, it is coded for PEOPLE; if it examines the impact on doctors, nurses, et al, it is coded for HEALTH CARE PROFESSION AND PROFESSIONALS; for impact on hospitals, insurance companies, bureaucracies, pharmaceutical companies, or other components of the OVERALL HEALTH CARE SYSTEM, it is coded as such; POLITICS and ECONOMICS stories each have separate impact codes; and those few stories that fall in multiple impact areas are coded as OTHER.

RECURRING STORY LEADS Coders evaluate each story looking for recurrent themes/leads. Typically, thematic trends in press coverage have a finite life.

PRINCIPAL NEWS SUBJECT Coders identify the most prominent health care reform topic examined in each story. Coding rules require that 1/3 or more of a story be about said topic in order to qualify as the PRINCIPAL NEWS SUBJECT.

SECONDARY NEWS SUBJECT Coders identify the second most prominent health care reform topic, if any, examined in each story. Coding rules require 1/4 of the story be about said topic, and that there can only be a **SECONDARY NEWS SUBJECT** when the coder has first identified a **PRINCIPAL NEWS SUBJECT** within the story.

PRINCIPAL NEWSMAKER Coders identify the most prominently featured newsmaker, if any, in each story. Coding rules require that 1/2 or more of a story be focused on that newsmaker in order to qualify as the **PRINCIPAL NEWSMAKER**.

PRESIDENT CLINTON'S PORTRAYAL AND HILLARY RODHAM CLINTON'S PORTRAYAL These "spin" variables require coding when 1/3 or more of a story is about the designated Clinton. Coders determine "spin" by quantifying and evaluating the positive and negative comments, interpretations, and innuendos offered by the journalist or presented as quotes from other sources. If the ratio is 2:1 negative or more, the story is coded as negative; if the ratio is 2:1 positive, it is coded as positive. Those stories that have a positive:negative ratio of less that 2:1 are considered neutral or ambiguous.

PORTRAYAL OF HEALTH CARE REFORM'S PROSPECTS For each story that discusses the likelihood of health care reform passage, coders evaluate for "spin" by quantifying and evaluating the positive and negative comments, interpretations, and innuendos offered by the journalist or presented as quotes from other sources. The 2:1 rule previously described is used to determine "spin."

ISSUE DEBATE BALANCE When an examination of a specific policy issue is central to the story, it is analyzed for **ISSUE DEBATE BALANCE**. Coders identify the policy issue (not a political issue) and evaluate the extent to which the story is fair to all sides. The previously described 2:1 rule determines balance; if a reporter quotes only one side, or attributes twice as much or more quotation to one side, the story is considered **out of Balance**. Broadcast stories of less than 30 seconds are not evaluated for Issue Debate Balance.