Battleground or Common Ground?
American Public Opinion on Health Care Reform

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INTRODUCTION

The health care debate in the United States needs no introduction. It has been an ongoing background debate for decades and periodically comes to the fore when an administration seeks to institute reforms. The effort at reform in the early 1990s produced a frenzy of political activity and the current one is proving to be similar.

Behind much of the debate is the question of whether the United States is exceptional. No other highly developed country in the world has a health care system similar to that in the United States. While the United States excels in advanced medical technology, it leaves the largest percentage of its population uninsured. Questions about how much responsibility the government has for its citizens’ health care go to the core of an ongoing debate in American culture about the role of government and the responsibility of citizens for their own welfare.

In 2008 WorldPublicOpinion.org conducted a poll of 21 nations from around the world, asking people whether they believe that their government is responsible for ensuring access to health care. Americans registered the second lowest number saying that the government is responsible. And yet three quarters said it was. Seven in 10 Americans also said that their government was not doing a good job in ensuring access—the fourth highest of all countries polled in a list that included many developing countries.

One of the key purposes of this study has been to dig deeper into these beliefs. What do Americans mean when they say the government is responsible for ensuring access and why are they dissatisfied with what the government is doing? What would they like the government to do?

The current environment for conducting surveys is unusual if not unique. There has been no shortage of shrill rhetoric about the role of the government in health care, much of it in highly partisan contexts. Has this had an impact on how people view these fundamental questions?

Much polling has been conducted in recent months as the health care debate has heated up. However, a large portion of it has focused on the political dynamics. Support for reform has eroded. Views of the administration have cooled, but views of the Republicans are worse. It is not clear whether these tepid responses are to the actual content of reforms proposed or if they are a reaction to the highly partisan character of the debate. Numerous studies have shown that when the parties fight about possible changes, the public tends to ‘turn off’ and lose confidence in the any of the ideas.

A major factor affecting responses to any government initiative is the general lack of trust in the government, which is at historical lows. When the public does not trust the government it is not always clear whether their lack of enthusiasm for new initiatives reflects a lack of support for the specifics of the initiative or rather a general lack of confidence about the government in general.
A central goal of this study has been to go beyond the responses to the politics and to the government as an institution and to find out more about how people think about the actual proposals.

Some, though not all, of the key reform proposals have been tested in other polls. Often they have been mentioned in cryptic phrases that are clearly understandable only to people who have been following the debate closely. As a result, it is not always clear what less attentive people are assuming when they respond. Some may argue that this does not matter; that the views of the attentive public are all that matters politically.

We have sought to find out more about the values of the public as a whole. In many questions we have made a point of providing clear information about possible reforms, and have presented respondents with the dominant pro and con arguments. Even if many people do not fully understand the debate now, its consequences will become clearer to them if reforms are instituted. Thus it behooves policymakers to seek to understand in advance how Americans really think about these issues when they are clearly presented and better understood.

Existing poll questions based on cryptic but varied descriptions of reform proposals have elicited highly different responses. This suggests that people are trying to use the descriptions of proposals as a way of trying to understand them more fully. Looking at the variance based on wording can be illuminating, but another method, used here, is to provide fuller information explicitly. We have also sought to extend the range of reforms that can be explored.

To begin with, on the controversial public option, little is known about the public’s views on the actual versions circulating in Congress which would make it available, not to all, but only to those who cannot obtain employer-based insurance. How does the public evaluate both a general, and a more limited public option?

The idea of a national health exchange, and also ideas for a national insurance market that Republicans have proposed (including Senator McCain during his presidential campaign), would all require changes in the rules against purchasing insurance across state lines, which are justified by the state’s role as primary regulator of its health insurance industry. When these factors are laid out to the public in pro and con arguments, do they view changing these rules as a good idea?

With the increasing polarization of the debate, has there been an effect on levels of support for placing further regulation on health insurance companies? Are there meaningful divergences on this issue now among Republicans, Democrats and Independents?

Tort reform is a longstanding Republican cause that yet rarely enters the mainstream of debate. But when the public evaluates the arguments, does it think tort reform could make a worthwhile contribution or not? How partisanized is this issue, so long inscribed on the Republican banner?
The idea of an employer mandate—making all but the smallest employers’ provision of health care a requirement, with the choice of contributing to a public fund instead—has been tested with the public many times and benefits from an underlying value that employers have a responsibility where their employees’ health insurance is concerned. However, 2009 is the worst economic year for decades, and many employers are hard-pressed to hold down layoffs, much less increase benefits. Does the economic crisis play into the public’s attitudes—and if so, what is its judgment, all things considered, on an employer mandate?

An element that was already known to be problematic for the public is the individual mandate, which would require everyone to have health insurance—with financial help if necessary, but spurred by a penalty for those who do not comply. While the element of compulsion is known to be unpopular, how does the public respond to the argument that those without insurance use hospitals anyway and their costs are passed through to the whole population?

The idea that savings can be found in the health care system—and especially in Medicare—through streamlining, cutting waste and tracking down fraud and abuse, has given rise to a forceful reply that the health of senior citizens would be endangered by any process of looking for cost savings in Medicare. Does the public think this is true? Do older people? Do people think that Medicare has distinctly more or less waste than private health care?

President Obama has made a commitment that a health care reform package he would sign will not have the long-term effect of adding to the budget deficit. Past polling has shown that majorities believes health care reform will increase the deficit, and also their taxes (which is not the same thing). But what is the real relationship between these beliefs and support or opposition to health care reform? Do most of those who expect a rise in their taxes oppose reform?

One of the familiar battle cries in this and past health care debates is that the US health care system is the best in the world. How many Americans think this is true? Do they think this is true about all, some, or few aspects of their health care system?

To probe for answers to these and other questions about how Americans view health care, WorldPublicOpinion.org and the Brookings Institution conducted a poll among 1400 Americans. The size of the sample answering each question varied, though all had over 800 respondents. The margin of error varied from +/- 2.6 to 3.5 percentage points.

The survey was fielded September 26-October 5, 2009 by Knowledge Networks, a polling, social science, and market research firm in Menlo Park, California, with a stratified random sample of its large-scale nationwide research panel. This panel itself has been randomly recruited from the national population of households having telephones; households without internet access are subsequently provided with free web access and an internet appliance. Thus the panel is not limited to those who already have home internet access. The distribution of the sample in the Web-enabled panel closely tracks the distribution
of United States Census counts for the US population on age, race, Hispanic ethnicity, geographical region, employment status, income, education, etc. Upon survey completion, the data were weighted by gender, age, education, and ethnicity. For more information about the online survey methodology, please go to: www.knowledgenetworks.com/ganp.

Key findings were:

1. The Role of Government in Health Care
Three in five Americans believe that the government has the responsibility to ensure that citizens can meet their basic need for health care; however, this number has declined significantly over the last year, and is no longer bipartisan, presumably in response to the current debate. Three in five also see health care as a right, not a privilege. Views are roughly divided as to whether the government should generally provide health care services directly.

2. Assessments of Current Situation
Two out of three Americans, including clear majorities of all parties, believe that the US government is doing a poor job of ensuring that people can meet their basic needs for health care. A majority thinks that the present health care system is not viable because costs are rising while more people are going onto Medicare. Large majorities are concerned about whether they and Americans in general will be able to get health insurance at a price they can afford. However, there is less concern about the quality of health care: views are divided as to whether, on its present trajectory, health care will worsen.

3. Reaction to Health Care Debate
As the partisan debate has grown more intense, far more people have become less supportive of both parties’ ideas than have become more supportive of the ideas of one party. People express substantial levels of anxiety about the subject of health care. More express fear that the government action will make the health care system worse than express confidence that government action will help. People are divided as to whether the government can afford to reform health care in the current economic environment.

4. Specific proposals
Nearly all of the specific proposals for health care reform are endorsed by a majority. Large majorities favor a public option limited to those who are not receiving insurance through their employer, cross-state purchasing and requiring insurance companies to accept every applicant and to not drop sick people for making a mistake in their original application form. More modest majorities favor
tort reform, a public option for all who wish it, an employer mandate, and an individual mandate. A modest majority opposes the government directly providing health care.

4a. Public Option
A majority favors a public option available to all, while three-quarters favor one limited to those who cannot get insurance through their employers. Interestingly, a modest majority of Republicans, as well as large majorities of Democrats and Independents, favors a limited public option.

4b. Cross-State Purchasing
Two-thirds favor the idea of cross-state purchasing, including large majorities of all parties. A large majority finds the argument in favor of cross-state purchasing convincing, while a substantial majority finds the argument against it unconvincing.

4c. Insurance Company Regulation
Overwhelming majorities of all parties favor the government requiring insurance companies to accept every applicant for coverage and prohibiting insurance companies from dropping a sick person because of a minor mistake in his or her application form.

4d. Tort Reform
A modest majority favors the idea of tort reform, including a plurality of Democrats. The argument in favor of tort reform is found convincing by a large majority, while the argument against it elicits a divided response.

4e. Employer mandate
A large majority is convinced by the argument against a proposed requirement that all but the smallest businesses either provide health insurance to all their workers or pay into a public fund to cover the uninsured, but a strong majority also finds the argument for such a requirement convincing. A modest majority favors such a requirement.

4f. Individual Mandate
A modest majority favors requiring all people to have health insurance for themselves and their children, with a subsidy for those who could not afford it and a penalty for those who refuse. Views break along party lines. Interestingly, majorities of both parties find convincing arguments both for and against an individual mandate.
5. Cutting Health Care Costs
An overwhelming majority thinks that it is possible to cut waste, fraud and abuse in the health care system without denying people the treatment they need. Estimates of the magnitude of waste, fraud, and abuse are substantial and approximately equal for private and public health care.

6. Impact of Health Care Reform on Taxes and the Deficit
Six in ten believe that health care reform will lead to at least somewhat higher taxes and that the deficit will increase at least somewhat. Those who believe that taxes and the deficit will go up are less supportive of reform, but only those who believe that their taxes and the deficit will become a lot greater depart from majority positions in support of major health care reforms.

7. Perceptions of US Health Care System
Contrary to frequent assertions in the health care debate that the American health care system is the best in the world, most Americans have more modest and realistic assumptions about how the American health care system compares to other highly developed countries. Most Americans have a good understanding about which health care programs are government sponsored and which are private.

8. Older Americans
Older Americans are generally less supportive than younger people of the government taking on new obligations (obligations that could potentially compete with Medicare). However a majority, albeit a relatively smaller one, does support the idea that the government is responsible for ensuring access to health care, a slight majority favors a generally available public option, and a large majority supports a limited public option. Older Americans report that they are following the health care debate more closely than do persons of other ages; they also express more worry about the issues of health care.
1. ROLE OF GOVERNMENT IN HEALTH CARE

Three in five Americans believe that the government has the responsibility to ensure that citizens can meet their basic need for health care; however, this number has declined significantly over the last year, and is no longer bipartisan, presumably in response to the current debate. Three in five also see health care as a right, not a privilege. Views are roughly divided as to whether the government should generally provide health care services directly.

Most Americans see the government as having responsibility for health care. However, the tumultuous political debate on the subject over the last year has apparently polarized views and eroded this consensus position. The debate also seems to have made the distribution of American opinion increasingly different from that of other countries.

In 2008, WPO asked Americans whether the US government “should be responsible for ensuring that its citizens can meet their basic need for health care.” At that time, 77% said that the US government does have such a responsibility, while 21% said that it does not. While this was an overwhelming majority, the US actually had the second-lowest number expressing this view—the 21-nation average was 92%.

In the current poll, the percentage of Americans dropped precipitously, though a substantial majority—60%—still endorsed the view that the government is responsible for health care. Thirty-seven percent chose the other position that “this is not the government’s responsibility.”

Over this period, Republicans have gone through a sharp reversal: in 2008 a majority (55%) said the
government has a responsibility for health care, and 43% disagreed, while in the current study, only 29% of Republicans said the government has a responsibility and 69% disagreed—a 26-point shift.

There has also been significant erosion among Independents and Democrats. Among Independents, 81 percent said in 2008 that government has a responsibility, compared to 60 percent today. And among Democrats there has been a 10-point drop, from 96% to 86%.

Compared to other countries, the majority of Americans who see the government as responsible for ensuring that citizens can find health care is probably now the lowest in the world. In 2008 the lowest number expressing this view was 70%, in India.

The issue of government responsibility naturally raises a deeper question—whether access to health care is a right. This question surfaced as a controversy in August when Republican Sen. Jim DeMint of South Carolina said in an interview, “I think health care is a privilege. I wouldn't call it a right,” though DeMint went on to say there should be some kind of safety net.1 To make use of the terms in the current discussion, this study asked respondents, “Do you mostly think of health care as a right or as a privilege?” Sixty-three percent mostly thought of it as a right; 36% mostly thought of it as a privilege. This view divided sharply along party lines, though, with 63% of Republicans saying that it was a privilege, and 78% of Democrats and 72% of Independents saying that it is a right.

**Government Providing Health Care Directly**

Throughout the health care debate, the idea of direct government provision of health care (as Britain does with its National Health Service) has been alluded to grimly by some on the right as a catastrophic consequence of reforms, and put forward by others on the left as a chance to make a clean break with the problems of the existing system. At no time has direct, universal government provision been taken seriously at the policymaking level. Nonetheless, because of its ghostly prominence in the background of the debate, this study asked respondents to consider it.

The question explained that “One option is for the government to provide health care directly. In this case the government actually runs the hospitals and clinics. Currently the US government provides health care to veterans

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through the Veterans Administration.” Respondents were then asked: “Would you favor or oppose the idea of having the government provide health care services directly to all Americans who want it?”

Surprisingly, views were roughly divided, with 47% in favor and 50% opposed. Not surprisingly, attitudes divided sharply along party lines, with 73% of Republicans opposed, 62% of Democrats in favor (37% opposed), and a modest majority of Independents in favor, 53% to 43%.

2. ASSESSMENTS OF CURRENT SITUATION

Two out of three Americans, including clear majorities of all parties, believe that the US government is doing a poor job of ensuring that people can meet their basic needs for health care. A majority thinks that the present health care system is not viable because costs are rising while more people are going onto Medicare. Large majorities are concerned about whether they and Americans in general will be able to get health insurance at a price they can afford. However, there is less concern about the quality of health care: views are divided as to whether, on its present trajectory, health care will worsen.

Respondents were asked: “Keeping in mind the limits of the US government’s resources, please tell me how well the government is ensuring that people can meet the basic need for health care?” Sixty-six percent said the government is doing “not very well” (45%) or “not well at all” (21%). Only 33 percent said the government was doing “somewhat well” (29%), or “very well” (4%).

This view was quite bipartisan: a majority held the view that the government was doing not very well or not at well among Republicans (58%), Independents (74%), and Democrats (70%).

This question was first asked by WPO in 2008 as part of a larger study of 21 nations. At that time, views were essentially the same, with 69% saying that the government was ensuring access to health care not very well (43%), or not well at all (26%).

Americans gave their government the fourth-lowest ratings among the 21 nations polled. Only Russia, Ukraine, and Argentina gave a lower rating.

From an economic perspective, a large majority of Americans think the current health care system is not sustainable in the long run. Respondents were asked to
choose between two arguments. One argument invoked confidence in the free market and aversion to government intervention:

The American health care system is basically sound, because it is part of a competitive free market that can adapt to future challenges. If the government interferes by imposing changes, it will only make things worse.

The other argument focused on cost increases and the aging of the US population:

The cost of health care is increasing faster than inflation, and as the population ages, the government has to cover more and more people under Medicare. Clearly, the government needs to take major steps to reform the American health care system.

Asked to choose, 68% endorsed the argument saying the current system is not viable and demands reform, while only 30% preferred the argument against government-led reform. This was not a consensus position: while overwhelming majorities said that reforms were necessary among Democrats (87%), and Independents (75%), a majority of Republicans (58%) disagreed.
Anxiety about Holding On To Health Insurance

Three in four Americans are concerned that sometime in the future, the cost of health insurance may slip out of reach. Seventy-four percent said they were very concerned (42%) or somewhat concerned (32%) that “at some point you and your family will not be able to get health insurance at a price you can afford.” Only 26 percent said they were not very concerned (19%) or not concerned at all (7%).

Anxiety about keeping a grip on health insurance is pervasive across demographic groups. Among those with a college or graduate degree, 61 percent are concerned (very, 28%); among those with some college education, the number rises to 79% (very, 47%), with concern among those with a high school diploma (77%, 42% very) or less (79%, 58% very) being about the same.

Anxiety is also high across all incomes, though the intensity of concern declines with income. Among those making more than $75,000 a year, 64% are concerned (31% very); among those with a median income, concern rises to 72% (38% very) and 82% among those making less than $35,000 (54% very)

Importantly, though, when people are asked to think not about themselves but about Americans in general, their already considerable concern is heightened. Eighty-four percent said they were very (46%) or somewhat (38%) concerned “about whether Americans in general can get health insurance at a price they can afford” —10 points higher than when asked about themselves.

Less Concern about Quality of Health Care

Respondents were asked, “If no major health care legislation is enacted, do you think the health care system in this country will get worse, get better, or stay about the same?” Respondents divided as to whether the quality of health care would necessarily erode without reform. Forty-eight percent thought the system would get worse; only 6% said it would get better; and 46% thought it would stay about the same.

It should be noted, though, that most of those who think health care would not get worse were not saying that they did not think that action was unnecessary. Sixty-two percent of this group think the government is not doing a good job of ensuring that people can meet their basic need for health care (see section 1 above). Anxiety is also high across all incomes, though the intensity of concern declines with income. Among those making more than $75,000 a year, 64% are concerned (31% very); among those with a median income, concern rises to 72% (38% very) and 82% among those making less than $35,000 (54% very)

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3. REACTION TO HEALTH CARE DEBATE

As the partisan debate has grown more intense, far more people have become less supportive of both parties’ ideas than have become more supportive of the ideas of one party. People express substantial levels of anxiety about the subject of health care. More express fear that the government action will make the health care system worse than express confidence that government action will help. People are divided as to whether the government can afford to reform health care in the current economic environment.

As the partisan debate has grown in size and rancor, half of Americans have felt “turned off” and have distanced themselves from it. Respondents were asked: “As the partisan debate over health care has grown more intense, has this led you to feel more supportive of the Democrats’ ideas, more supportive of the Republicans’ ideas, or less supportive of both sets of ideas?” Fifty percent said they felt less supportive of both sets of ideas. Only 24% percent said the debate was drawing them closer to the Democrats’ thinking; just 21% said it was drawing them closer to the Republicans’ thinking.

The health care issues that Americans hear about in the public debate are evoking a high degree of anxiety in a majority. Asked, “When you think about the issues of health care, how worried does it make you feel?” and asked to answer on a scale of 0 to 10, where 0 means not worried at all and 10 means extremely worried, the average response was 6.41 and the median response was 7.

Only 15% gave a response between 0 and 3; 30% gave a response between 4 and 6; and 55% gave a response between 7 and 10. Interestingly, the distribution of anxiety is entirely non-partisan. The average among Republicans was 6.53; among Democrats, 6.6; and among Independents, 5.98.

Americans are showing anxiety about the possible effect of changes to the health care system. Asked to choose between two statements, 53% chose “I’m afraid that government action will only make our health care system worse,” while just 44% chose “I’m confident that government action can improve our health care system.”

While a large majority thinks the health care system needs a serious overhaul, a significant part of this majority is anxious about adding such a big task to a government that is (for example) providing emergency scaffolding for the financial system and trying to stimulate the economy back into growth. Respondents were
offered three statements regarding the health care system:

--[It] needs major changes, and the government should make them now
--[It] needs major changes, but right now the government overextended and should wait a few years before making them
--[It] does not need major changes

Only 14% thought the system needs no major changes. Among the 83% who said that changes are needed, the larger number, but less than half of the whole sample (47%), thought the government should make them now. About a third (36%) agreed the system needs major changes, but felt the government is overextended and should wait a few years.

These positions broke sharply along partisan lines. Though just 27% of Republicans said that the health care system does not need major changes, only 25% believe the government should make those changes now. Instead, the most common response was the 45% of Republicans who said the government is overextended and should wait. On the other hand, a 67% majority of Democrats said the government should act now, with only a quarter (27%) saying it should wait. Among Independents, 48% agreed with the Democrats, while 37% agreed with a plurality of Republicans that change should be delayed.
4. SPECIFIC PROPOSALS

Nearly all of the specific proposals for health care reform are endorsed by a majority. Large majorities favor a public option limited to those who are not receiving insurance through their employer, cross-state purchasing and requiring insurance companies to accept every applicant and to not drop sick people for making a mistake in their original application form. More modest majorities favor tort reform, a public option for all who wish it, an employer mandate, and an individual mandate. A modest majority opposes the government directly providing health care.

4a. Public Option

A majority favors a public option available to all, while three-quarters favor one limited to those who cannot get insurance through their employers. Interestingly, a modest majority of Republicans, as well as large majorities of Democrats and Independents, favors a limited public option.

To offer respondents an opportunity to think through the types of arguments frequently repeated in the health care debate, respondents evaluated an argument in favor of each specific proposal and one against it, and only then said whether they favored or opposed the proposal.

The public option was introduced in the following language. The question was preceded by one that described government health care, in part to ensure that respondents would make the clear distinction between it and the public option.

One option is not to have the government provide health services directly but to provide health insurance. The US government currently provides health insurance to senior citizens through Medicare. Some people have proposed giving other Americans the option of getting insurance from the government, in addition to the option of private insurance. This is known as providing a ‘public option.’

Respondents then evaluated a dual argument in favor of the public option that mentioned both the uninsured and the benefits of competition:

If people cannot find affordable coverage the government needs to provide them with an option. Furthermore, the competition provided by a public option would force private insurers to lower their overhead costs, making insurance cheaper for everyone.

This argument was found convincing by 68% and unconvincing by 31%. Slightly more found it very convincing (23%) than found it very unconvincing (15%).

Next an opposing argument was offered that described the competition as inherently unfair and raised the prospect of an eventual complete government takeover of health care:

Because the government would not need to make profits, a government-run health insurance program would unfairly undercut private insurance companies. This would
inevitably lead to a government takeover of health care and put the government between you and your doctor.

Fifty-two percent said they found the argument convincing (20% very), while 46% said it was unconvincing (16% very).

Thus, both the pro and con argument were found convincing by a majority, though a far larger majority found the pro argument convincing. A substantial number—32%—found both arguments convincing.

### A Generally Available Public Option

Finally, respondents were asked whether they favored or opposed “creating a government-administered health insurance option that anyone can purchase to compete with private insurance plans.” A 57% majority favored a generally available public option, with 39% opposed.

Overall it appears that hearing the pro and con arguments had little net affect. This exact question was asked by Research 2000 over September 28-30 and found 59% in support, with 34% opposed.

Among the 32% who found both the pro and the con arguments convincing, asked to decide, 60% came down in favor of a widely available public option, with only 35% opposed.

### A Limited Public Option

In the current debate at the level of Congress and the White House, discussion about the public option largely revolves around the goal of providing it to those who are unable to obtain health insurance through an employer. Therefore, in the study, respondents who opposed the widely available public option were then asked, “What if the government-administered health insurance plan were offered as an option only to people who cannot get insurance through their employers?”

Another 18% of the full sample supported this narrower version of the public
option. Thus overall, 75 percent would support a public option as a choice for those who cannot get employer-based health insurance.

**Partisan Differences**

As would be predicted, Republicans show less support for the public option than Democrats, but interestingly, a majority of Republicans (59%) favors a limited public option, though a large majority (65%) opposes a widely available public option. A substantial majority of Independents favors a generally available option (57%) and a large majority a limited public option (74%). Democrats favors both versions by overwhelming majorities (79% general, 91% limited). [See graphs for details.]

The argument in favor of the public option was found convincing by 52% of Republicans (48% unconvincing), as well as 61% of Independents (39% unconvincing), and 87% of Democrats. The argument opposing the public option was convincing to 70% of Republicans, but unconvincing to 58% of Independents (convincing: 40%), and 56% of Democrats.

**Polling from Other Sources**

Recent polling on the public option from other organizations has produced a range of responses, from a divided response to two-thirds in favor. Response was divided over an NBC/ Wall Street Journal (Sept 17-20) question that asked about “creating a public health care plan administered by the government that would compete directly with private health insurance companies.” This question did not clarify that the public option would be insurance, as opposed to government-provided health care. It also did not clarify that the purpose was to expand coverage, stating only that it would compete with private companies. When the same question was asked in the context of a list of other options that referred to expanding coverage, support was higher at 53%, perhaps because the potential for greater coverage was implied.

A Kaiser poll described the public option as a “government-administered public health insurance option” in the context of other options and found 59% in support (September 11-18.)

CBS/NY Times (Sept. 19-23) asked about “offering everyone a government-administered health insurance plan – something like the Medicare coverage that people 65 and older get” and found 65% in support. In this case, the description emphasized that it was an insurance plan and made elaborate comparisons to Medicare coverage, which emphasized its purpose of increasing coverage.
4b. Cross-State Purchasing

Two-thirds favor the idea of cross-state purchasing, including large majorities of all parties. A large majority finds the argument in favor of cross-state purchasing convincing, while a substantial majority finds the argument against it unconvincing.

Various proposals in the health care debate from both parties would require some modifications in current rules that make each state a separate market for health insurance. In the existing framework, the state serves as the regulator for its health insurance industry. Republican Sen. John McCain’s 2008 presidential campaign based its health care proposals on changing this framework and providing tax credits that would enable individuals to shop nationwide for health insurance.

The problem was introduced to respondents this way:

Currently, the states regulate health insurance, and insurers cannot sell policies to customers in other states. One proposed reform would allow people or companies to purchase insurance from any state.

Respondents then evaluated the argument in favor of this idea, which focused on the value of competition:

The government should allow people to shop anywhere in the country for the health insurance that best meets their needs. This will increase competition, make basic policies more affordable for lower-income individuals, and benefit middle-class families whose choice is now restricted to expensive plans.

This argument was found convincing by a large majority — 84% (35% very convincing). Only 15% found the argument unconvincing. Interestingly, there were no meaningful differences among Republicans, Democrats and Independents.

Respondents were then exposed to an argument against changing the current rules, which raised the prospect of weakening efforts to regulate the insurance companies:

Selling health insurance across state lines would hurt states’ efforts to regulate insurance companies. It will benefit the young and healthy at the expense of the old and sick by undermining the efforts of a state to guarantee that insurance companies provide a certain level of benefits.

A majority found this argument unconvincing, however. Fifty-four percent rejected it, while 44% found it convincing. Among Republicans, 61% found the counter-argument unconvincing, as did 57% of Independents. Meanwhile, a slight majority of Democrats found the argument convincing (51% convincing, 46% unconvincing).
Finally, when asked, “Do you think the rules against purchasing insurance across state lines should be changed, or kept the same as they are?” two thirds (65%) supported changing the rules, while 32% were opposed.

About a third of respondents (36%) agreed with both the pro and con arguments. A bare majority of this group supported changing the rules, 52% to 45%.

Differences by party were quite minimal. Changing the rules received the support of 69% of Republicans, 64% of Democrats, and 61% of Independents.

There has been little or no publicly available recent polling on cross-state purchasing. In June, however, 71% supported a related concept: a “national health insurance exchange—a market where individuals and small businesses can comparison shop among different private plans or a public option” (Democracy Corps). Only 22% were opposed.

4c. Insurance Company Regulation

Overwhelming majorities of all parties favor the government requiring insurance companies to accept every applicant for coverage and prohibiting insurance companies from dropping a sick person because of a minor mistake in his or her application form.

A key area of health care reform on which there is extensive bipartisan agreement in Congress is the regulation of health care insurance to curtail certain common practices, such as refusing new applicants who have pre-existing medical conditions, or finding ways to drop long-time subscribers who are seriously ill.

Respondents were asked about these practices in two separate questions. A very large 82% supported regulations such that “insurance companies would be required to accept every applicant for coverage, including people with pre-existing medical conditions.” Only 16% were opposed. Support was at 73% among Republicans, 80% among Independents, and 90%
among Democrats. Similarly, an even larger 86% favored regulations such that “insurance companies would not be permitted to drop a sick insured person because they can identify a minor mistake in their original application form.” Just 12% were opposed. Support for this measure was statistically the same across Republicans, Democrats and Independents.

Other polls have also shown overwhelming support for stronger regulation of insurance companies. Most recently (September 17-20), 89% told NBC/Wall Street Journal that they wanted health care legislation to include “requiring that health insurance companies cover people with pre-existing medical conditions” (must be included: 63%). Similarly, in July Pew found 79%--and Time magazine found 80%--in favor of requiring health insurance companies to “offer coverage to anyone who applies, even if they have a pre-existing condition.” Democracy Corps found almost as much support for a more stringent set of regulations, requiring “insurance companies to offer coverage regardless of pre-existing conditions or medical history and prohibit[ing] them from dropping coverage or raising rates when people become sick.” Seventy-five percent supported these regulations, with 23% opposed.

4d. Tort Reform

A modest majority favors the idea of tort reform, including a plurality of Democrats. The argument in favor of tort reform is found convincing by a large majority, while the argument against it elicits a divided response.

Tort reform is a long-standing proposal, largely identified with Republican thinking on health care reform, which appears to appeal to a majority among all parties. Respondents were introduced to the idea in the following way:

Another proposed reform, called “tort reform,” would regulate malpractice suits against doctors. There would be ceilings on the size of awards for punitive damages, and new lawsuits would be screened to make sure they had some basis.

Respondents then evaluated a pro-tort reform argument that focused on reducing doctors’ tendency to practice “defensive medicine”:

Tort reform will save money because doctors will focus on what the patient needs, instead of ordering many expensive tests just to protect themselves from lawsuits. It will also lower the cost of malpractice insurance, which leads to increased fees.
Three in four (77%) found this argument convincing (very: 35%). Only 21% said it was unconvincing. Seventy-six percent of Democrats, 74% of Independents, and 80% of Republicans found it convincing.

Then an argument against tort reform was presented. This focused on the potential for high jury awards in malpractice cases to serve as a deterrent against doctors’ negligence.

Tort reform is a bad idea that will happen at patients’ expense. If jury awards are limited, incompetent doctors will have less incentive to be careful, and patients who have been permanently harmed by their mistakes may not receive adequate compensation.

A modest majority of 53% found this argument convincing, while 43% found it unconvincing. Responses were also more polarized by party. Fifty-five percent of Republicans found this argument unconvincing, while 63% of Democrats found it convincing, as did 51% of Independents (45% unconvincing).

After evaluating the arguments, respondents were simply asked, “Do you favor or oppose tort reform?” A modest majority—55%—were supportive, while about a third (38%) were opposed.

Four in 10 agreed with both the pro and con arguments about tort reform. When asked to decide, a plurality endorsed tort reform (50% to 41%), less than the whole sample.

Tort reform does elicit bipartisan support. Sixty-four percent of Republicans supported it, as did a plurality of Democrats (50% in favor, 41% opposed) and modest majority (52%) of Independents.

Consistent with this support for tort reform, when NBC/Wall Street Journal asked (September 17-20) about “creating a law that limits the amount of money someone can collect if they win a lawsuit after being injured by bad medical care,” 65% wanted such a law included in health care reform legislation; only 28% were opposed. The fact that support was significantly lower in the present study suggests that the con argument presented may have been something that people had not heard or considered.
4e. Employer mandate

A large majority is convinced by the argument against a proposed requirement that all but the smallest businesses either provide health insurance to all their workers or pay into a public fund to cover the uninsured, but a strong majority also finds the argument for such a requirement convincing. A modest majority favors such a requirement.

One proposal for health care reform involves having more of the cost of coverage paid for by employers, rather than by the government. This “employer mandate” would have the effect of turning the existing system of optional employer-provided coverage into a legal requirement for most businesses. Respondents were presented this idea as follows:

Another idea for increasing coverage is for the government to require all but the smallest businesses to either provide health insurance for their workers, or contribute to a public fund to cover the uninsured. This is called an employer mandate.

Respondents were presented with the argument in favor of the employer mandate, which not only touched on the question of responsibility but contended that a mandate would eliminate a competitive imbalance:

Employers have a moral responsibility to provide insurance to their employees. It is also unfair that companies that do not provide insurance have an economic advantage over those who do.

Sixty-one percent of respondents found it convincing, including 18% who found it very convincing. Thirty-eight percent were not convinced (16% very). The argument in favor convinced 71% of Democrats, but only 20% of them were very convinced. A modest majority of Republicans were also convinced (53%, 46% unconvinced) as were 55% of Independents (44% unconvinced).

The argument against an employee mandate—“Requiring employers to offer health insurance will force them to pay lower wages, lay off workers, or will drive small companies out of business”—was judged convincing by a much larger 70% of respondents (26% very convincing), while 28% found it unconvincing (9% very).

Strikingly, the argument against the employer mandate convinced majorities among all three political affiliations: 60% of Democrats, as well as 82% of Republicans and 69% of Independents.

In the end, respondents were asked, “Do you favor or oppose requiring all but the smallest businesses to provide health insurance for their workers, or else to contribute to a public fund to cover the uninsured?” Fifty-four
percent favored doing so, and 43% were opposed.

Views divided along party lines. A large majority of Democrats (68%) favored the idea as well as a modest majority of Independents (54%). Republicans were mostly opposed (61%).

Curiously, among the 40% of respondents who agreed with both the pro and con arguments support for the mandate was quite high—63%.

Other polls that did not introduce pro and con arguments about an employee mandate found higher support than did this study. Most recently, 63% supported “requiring that all but the smallest employers provide health coverage for their employees, or pay a percentage of their payroll to help fund coverage for the uninsured” (NBC/Wall Street Journal, September 17-20). Kaiser found 67% support in a very similar question (September 11-18). In July, Pew found 61% in favor of “requiring employers to pay into a government health care fund if they do not provide health insurance to their employees,” with 33% opposed. Again, presumably, the con argument was one that has not had as much play in the public debate as the pro argument.

4f. Individual Mandate

A modest majority favors requiring all people to have health insurance for themselves and their children, with a subsidy for those who could not afford it and a penalty for those who refuse. Views break along party lines. Interestingly, majorities of both parties find convincing arguments both for and against an individual mandate.

The option of making health insurance mandatory but placing the cost on the individual rather than on the government or on employers is known as the “individual mandate.” The description of the individual mandate that was given to respondents read:

One proposed reform is to require all people to have health insurance for themselves and their children. Those who could not afford it would receive a subsidy. Those who refuse to buy health insurance would pay a penalty.

Arguments for and against the individual mandate proved convincing to almost identical majorities. Two out of three respondents (64%) were convinced by the argument in favor:

If people are not required to have health insurance, they still go to the emergency room when they get sick. Hospitals then pass these costs on to the rest of us by raising fees, or the government has to cover the cost with taxpayers’ money. This is not fair.

Twenty-five percent found the argument very convincing, while 33% were unconvinced (13% very). Interestingly, the pro argument convinced 75% of Democrats (33% very convinced), 63% of Independents (23% very), and 52% of Republicans (18% very).

A slightly larger 66% also found the opposing argument convincing:
People should have the right to decide for themselves whether or not they want to spend their money on health insurance. Forcing people to buy insurance is an unjustified government intrusion into people’s lives.

Thirty-two percent found this argument very convincing, and 32% were not convinced (14 very unconvinced). Here again, majorities of all partisan stripes found the argument convincing: 76% of Republicans (42% very), 76% of Independents (41% very), and 53% of Democrats (19% very).

After evaluating the arguments, respondents were asked, “Do you favor or oppose requiring all people to have health insurance for themselves and their children?” 52% responded affirmatively, and 44% said no.

The two major parties came down strongly on opposite sides of the proposal. Seventy-three percent of Democrats favored it, while 64% of Republicans opposed it. Among Independents, 50% of Independents were opposed and 43% in favor.

Four in 10 respondents found the arguments on both sides of the issue convincing. Of these, 51% favored the mandate. Interestingly, of the 7% who disagreed with both arguments, 61% also favored the mandate.

Other polls that asked about the individual mandate have found strikingly varying results, depending on how it is described. The lowest level of support was found in an NBC/Wall Street Journal poll (Sept. 17-20). It stressed the compulsory and punitive aspect of the law and referred to “government assistance” for “people with low and moderate incomes,” possibly making it sound like welfare for even people with moderate incomes. In this case, only 38% were in support.

At the other end, Kaiser found 68% support with a description that did not mention any penalty and framed subsidies as being only those who cannot afford it: “requiring all Americans to have health insurance, either from their employer or from another source, with financial help for those who can’t afford it.”

In June, Democracy Corps found 52% support—virtually the same level as in this study—by saying the mandate would “require all individuals to have health insurance or pay a fine with low and moderate income families receiving a subsidy, based on their income, to help them afford coverage.” This version included the compulsory and potentially punitive aspect but also framed the subsidy as not being welfare but a partial form of aid.
5. Cutting Health Care Costs

A n overwhelming majority thinks that it is possible to cut waste, fraud and abuse in the health care system without denying people the treatment they need. Estimates of the magnitude of waste, fraud, and abuse are substantial and approximately equal for private and public health care.

One major theme in the health care debate has been whether government efforts to seek economies in the health care system, especially in Medicare, could significantly affect the quality of care. To understand how the public views this issue, respondents were asked: “In regard to waste fraud and abuse in the health care system, do you think it can be cut while still giving people the treatment they need — [or do you think] efforts to cut it will lead to denying people the treatment they need?”

An overwhelming four in five (77%) said that waste, fraud and abuse in the health care system can be cut while still giving people the treatment they need; only 21 percent disagreed. This was very much a consensus position endorsed by very large majorities of Republicans (79%), Democrats (78%), and Independents (72%).

Estimates of Waste, Fraud and Abuse

Most Americans assume that the amount of waste, fraud and abuse is substantial in both Medicare and private health care—an assumption which accords logically with their belief that much can be trimmed without hurting the treatment of patients. When asked in an open-ended question to offer a percentage that they thought “is lost to waste, fraud and abuse,” the mean response for Medicare was 39%; interestingly, the mean response for private health care was also 39%.

Partisan variations in these estimates were quite marginal. Republicans estimated that waste fraud and abuse in Medicare (40%) was only slightly higher than in private health care (33). Conversely, Democrats estimate of waste, fraud and abuse in private health care (41) was only slightly higher than in Medicare (36).

Though these estimates may seem high, they are actually a bit lower than estimates of waste in government as a whole found in other polls.
Six in 10 believe that health care reform will lead to at least somewhat higher taxes and that the deficit will increase at least somewhat. Those who believe that taxes and the deficit will go up are less supportive of reform, but only those who believe that their taxes and the deficit will become a lot greater depart from majority positions in support of major health care reforms.

Despite optimism that the health care costs can be cut, it appears three in five Americans believe that health care reform will lead to their taxes going up at least somewhat, and that the federal budget deficit will increase somewhat as well.

Respondents were asked “Do you think that if health care reform is enacted that you will or will not pay higher taxes?” Those who thought they would were then asked whether their taxes would be a little bit higher, somewhat higher, or a lot higher. Eighteen percent thought their taxes would not increase, and another 20% thought they would go up “a little bit.” Thirty percent thought their taxes would be “somewhat higher,” and 29% thought they would be a lot higher—making a total of 59% who think their taxes would increase at least somewhat.

Only minorities among all groups believe taxes will not go up: 28% of Democrats 14% of Independents, and 9% of Republicans. Among those who believe taxes will increase, Republicans are most negative, with 51% saying they will increase a lot, 30% saying somewhat, and only 10% saying a little bit. Among Democrats, only 11% say they will increase a lot, 27% somewhat, and 30% just a little bit. Independents are relatively divided, with 31% saying a lot, 38% saying somewhat, and 15% saying a little bit.

Similarly, in a question about the deficit, 64% said that “if health care reform is enacted, it will increase the federal budget deficit,” while 33% said instead that “enough savings and revenue will be found to offset the costs.” Those who thought the deficit would rise were then asked
by how much—a little, some, or a lot. Five percent said “a little,” 23% said “some,” and 35% said “a lot”—so that 58% think the budget would increase at least some.

Partisan differences on the deficit are similar to those on taxes, though attitudes are more sharply divided. A strong majority of Republicans think the deficit will increase a lot (62%), with a quarter saying it will go up some (19%) or a little bit. Only 13% say that enough savings will be found to offset the costs. Among Democrats the trend reverses, with a slight majority saying enough savings will be found to offset the costs (51%). Only 14% say it will increase a lot, and a third say it will increase some (26%) or a little bit (7%). Independents are divided, with a third agreeing with Democrats on cost savings, a third (31%) agreeing with Republicans that the deficit will increase a lot and another three in 10 saying they will increase some (25%) or a little bit (5%).

**Beliefs about Taxes and the Deficit and Support for Reform**

Those who believe that taxes and the deficit will go up are less supportive of reform, but only those who believe that their taxes and the deficit will become a lot greater depart from majority positions in support of major health care reforms.

On a generally available public option, a majority is supportive among those who believe that taxes will not go up (78%), those who thought their taxes will rise a little (81%), and those who think they will go up somewhat (53%). But only 25% of those who expected their taxes to go up a lot favor it, with 73% of this group opposed. On a public option available only to those who cannot obtain health insurance from an employer, support was higher among all categories. Interestingly, among those who believe that taxes will go up a lot, support for the limited option was divide,d with those favoring it rising to 48%, and 49% still opposed.

Attitudes toward the federal budget deficit exhibit the same pattern. On a widely available public option, a majority was supportive among those who thought the deficit will not go up, those who thought the deficit will increase a little (89%), and those who thought it would increase some (70%). But only 29% of those who expect the deficit to go up a lot were supportive; 70% of this group were opposed. On the narrower public option, this latter group is split—47% opposed, 51% in favor.

This pattern of attitudes is apparent where the mandates are concerned as well. To take the employer mandate as an example, among those who expect the budget deficit to go up, 57-68% of those who think it will go up not at all, a little, or somewhat are in favor, but among those who think the deficit will increase a lot, 63% are opposed. The pattern prevails in attitudes about the individual mandate in regard to increased taxes.
This pattern does not apply to all reform. For tort reform and cross-state purchasing of insurance, which are not expected to incur significant costs for government, majority support runs across all categories of expectation about taxes and the deficit [see box].

<table>
<thead>
<tr>
<th>Do you think your taxes will be:</th>
<th>Will not be higher</th>
<th>A little higher</th>
<th>Somewhat higher</th>
<th>A lot higher</th>
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<tr>
<td>General Public Option</td>
<td>78%</td>
<td>81%</td>
<td>53%</td>
<td>25%</td>
</tr>
<tr>
<td>Limited Public Option</td>
<td>89%</td>
<td>91%</td>
<td>80%</td>
<td>48%</td>
</tr>
<tr>
<td>Individual Mandate</td>
<td>63%</td>
<td>75%</td>
<td>54%</td>
<td>29%</td>
</tr>
<tr>
<td>Tort Reform</td>
<td>51%</td>
<td>61%</td>
<td>58%</td>
<td>54%</td>
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</table>

<table>
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<tr>
<th>How much do you think the deficit will increase:</th>
<th>Will not increase</th>
<th>A little</th>
<th>Some</th>
<th>A lot</th>
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<tr>
<td>General Public Option</td>
<td>77%</td>
<td>90%</td>
<td>70%</td>
<td>29%</td>
</tr>
<tr>
<td>Limited Public Option</td>
<td>90%</td>
<td>93%</td>
<td>86%</td>
<td>51%</td>
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<td>Employer Mandate</td>
<td>68%</td>
<td>64%</td>
<td>57%</td>
<td>36%</td>
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<tr>
<td>Cross-State Purchasing</td>
<td>59%</td>
<td>75%</td>
<td>66%</td>
<td>68%</td>
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7. PERCEPTIONS OF US HEALTH CARE SYSTEM

Contrary to frequent assertions in the health care debate that the American health care system is the best in the world, most Americans have more modest and realistic assumptions about how the American health care system compares to other highly developed countries. Most Americans have a good understanding about which health care programs are government sponsored and which are private.

Though it is fairly common in the health care debate to assert that the United States has the best health care system in the world, most Americans have assumptions that are more modest and realistic.

Respondents were asked about five aspects of the health care system, and for each aspect they selected, whether they thought the US was better than “countries like Canada, Britain, France and Germany,” equal to these countries, or not as good.

Only on “medical technology in hospitals and clinics”—a factor often pointed to in the health care debate as a mark of superiority for the US system—did a majority (54%) think the US was better. Thirty-three percent thought it was about equal, and 8% thought it was not as good.

For “research on diseases and treatments”—an area where the US has long been very prominent—views were divided between 47% who thought the US was better, and 48% who though the US was about equal (38%) or not as good (10%).

For “infant mortality rates”—one of the most widely used international benchmarks of public health—only 35% thought the US was better. However, only 20% said correctly that the United States is not as good. In fact, the US lags behind all four of the other countries in its infant mortality rate. Thus 73% were incorrect in saying that the US was better (35%) or about equal (38%).2

For “the affordability of health insurance,” three in five (60%) said, correctly, that the US is not as good as Canada, Britain, France and Germany. Only 34% said the US is about equal (21%), or better (13%).

Finally, on “the percentage of citizens with health care coverage”—where all four of the other countries named have achieved near-universal coverage—almost two-thirds (64%) said, correctly, the US is not as good. Only 33% said the US is about equal (18%), or better (15%).

Republicans were 10-14% points higher than the sample as a whole in their belief that the US was better. Republicans assumed that the US was better on medical technology (71%), medical research (64%), infant mortality rates (49%), the affordability of health insurance (23%), and the percentage of citizens with health insurance (25%).

2 The US has 6.7 cases of infant mortality per 1,000 live births. Canada has 5, Britain 4.8, and France and Germany both have 3.8 cases. Source: OECD Health Data 2009, at http://www.oecd.org/document/16/0,3343,en_2649_34631_2085200_1_1_1_1,00.html.
## Comparative Perceptions of US Health Care System

Impressions of whether US system is better, about equal, or not as good as systems like those in Canada, Britain, France, and Germany

<table>
<thead>
<tr>
<th>Section</th>
<th>Overall</th>
<th>Republicans</th>
<th>Democrats</th>
<th>Independents</th>
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<tr>
<td><strong>Medical technology in hospitals and clinics</strong></td>
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<tr>
<td><strong>Better</strong></td>
<td>54%</td>
<td>71%</td>
<td>43%</td>
<td>47%</td>
</tr>
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<td><strong>About equal</strong></td>
<td>33%</td>
<td>19%</td>
<td>42%</td>
<td>37%</td>
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<td><strong>Not as good</strong></td>
<td>8%</td>
<td>6%</td>
<td>9%</td>
<td>10%</td>
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<tr>
<td><strong>Research on diseases and treatments</strong></td>
<td></td>
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</tr>
<tr>
<td><strong>Better</strong></td>
<td>47%</td>
<td>64%</td>
<td>33%</td>
<td>43%</td>
</tr>
<tr>
<td><strong>About equal</strong></td>
<td>38%</td>
<td>24%</td>
<td>51%</td>
<td>39%</td>
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<tr>
<td><strong>Not as good</strong></td>
<td>10%</td>
<td>8%</td>
<td>10%</td>
<td>12%</td>
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<tr>
<td><strong>Infant mortality rates</strong></td>
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<td></td>
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<tr>
<td><strong>Better</strong></td>
<td>35%</td>
<td>49%</td>
<td>27%</td>
<td>29%</td>
</tr>
<tr>
<td><strong>About equal</strong></td>
<td>38%</td>
<td>32%</td>
<td>41%</td>
<td>43%</td>
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<tr>
<td><strong>Not as good</strong></td>
<td>20%</td>
<td>14%</td>
<td>25%</td>
<td>21%</td>
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<td><strong>Affordability of health insurance</strong></td>
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<tr>
<td><strong>Better</strong></td>
<td>13%</td>
<td>23%</td>
<td>7%</td>
<td>8%</td>
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<tr>
<td><strong>About equal</strong></td>
<td>21%</td>
<td>24%</td>
<td>19%</td>
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</tr>
<tr>
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<td>60%</td>
<td>48%</td>
<td>68%</td>
<td>64%</td>
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<td><strong>Percentage of citizens with health care coverage</strong></td>
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<tr>
<td><strong>Better</strong></td>
<td>15%</td>
<td>25%</td>
<td>9%</td>
<td>10%</td>
</tr>
<tr>
<td><strong>About equal</strong></td>
<td>18%</td>
<td>17%</td>
<td>18%</td>
<td>20%</td>
</tr>
<tr>
<td><strong>Not as good</strong></td>
<td>61%</td>
<td>53%</td>
<td>67%</td>
<td>64%</td>
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</table>

At town meetings held by members of Congress during summer 2009, a few attendees caught public attention by making remarks implying they did not understand that Medicare is a government program (reportedly saying things like “the government should keep its hands off our Medicare”). In fact, there is not any significant misperception by the public on this point.

Respondents were asked about four entities—Medicare, the Veterans Health Administration, Blue Cross/Blue Shield, and Kaiser Permanente—and asked to identify each as either “a US government-run program” or not. Between 86 and 94% were correct for each case, and for Medicare, 94% knew it was a government-run program. Thus when respondents collectively gave the same estimates of waste, fraud, and abuse for private providers as for Medicare, they were fully aware that Medicare is a government program.
older Americans are generally less supportive than younger people of the government taking on new obligations (obligations that could potentially compete with Medicare). However, a majority, albeit a relatively smaller one, does support the idea that the government is responsible for ensuring access to health care, a slight majority favors a generally available public option, and a large majority supports a limited public option. Older Americans report that they are following the health care debate more closely than do persons of other ages; they also express more worry about the issues of health care.

Older Americans have attracted particular attention in the health care debate. An effort to expand health care coverage in the context of tight budgets has the potential for putting pressure on funding for Medicare, and indeed many health care reform proposals look to achieve savings in Medicare.

In the present poll older Americans (60 years plus) are generally less supportive of the government taking on new obligations that could potentially compete with Medicare. However, in nearly every case a majority, albeit a smaller one, does support doing so. Older Americans are less likely to say the government should be responsible for ensuring that its citizens can meet their basic need for health care than are younger Americans, but 55% of older Americans do support this view as compared to 67% of young people (age 18-29). A bare majority of older Americans (52%) sees health care as a right—47% say it is mostly as a privilege—while among young people 67% see health care as a right. Older Americans are the most opposed to government-run health care (64% are opposed), while those aged 30 to 59 are divided, and a 55% majority of young people favor government-run health care.

A bare majority of older Americans (51%) does support a generally available public option, though support among young people is much higher (67%). When a more limited form of the public option is offered, however, those 60 and older are as supportive of the public option as are other age groups.

Older Americans report following the health care debate much more closely than other Americans. Seventy-eight percent of those aged 60 and older are following the health care debate very closely (29%) or somewhat closely (49%), which is significantly greater than any other age group. By contrast, only 46% of those aged 18 to 29 are following the health care debate very (8%) or somewhat closely (38%).

In addition to paying more attention to the debate, older respondents are also more worried about issues of health care, with 46% rating their worry as 8 to 10 as compared to the 34% of young people. Older people (37%) also are more likely to say the current system doesn’t need to be changed (22%) than younger people (7%).