

Event Summary
“Public Opinion on Health Reform: What Do the Polls Mean?”
October 23, 2009

The Alliance for Health Reform, with support from the Kaiser Family Foundation, held a briefing in the Hart Senate Office Building Room 902, Washington, DC. This briefing examined American opinion on health reform and discussed the impact of polls on policymaking.

Ed Howard, executive vice president at the Alliance, extended a welcome from Senators Rockefeller and Collins to those in attendance. He also thanked the panelists for their participation and the Kaiser Family Foundation for sponsoring the event. Mr. Howard noted the ubiquity of new polls, some of which seem contradictory. It is important, he said, to examine the workings of polls and the interplay between public opinion and policymaking.

The first panelist, **Mollyann Brodie** with the Kaiser Family Foundation, highlighted key findings from the October Kaiser Health Tracking poll and preceding polls. Results have shown that month after month in 2009, more Americans believe that now is the right time for health reform than believe that we cannot afford reform. Almost twice as many people believe the country would be better off with reform than who believe the country would be worse off. There is a wide divergence in opinion by political affiliation; almost three-fourths of Democrats believe that it is more important than ever to do health reform now, while two-thirds of Republicans say we can't afford to do so. Among independents, 55 percent favor taking on reform, and 41 percent do not. Responses vary on specific policy options. A majority favor provisions that require insurance companies to cover anyone who applies, even those with a prior illness, with 54 percent strongly agreeing with this option. Majorities also favor requiring all Americans to have health insurance and a government-administered public health insurance option. However, these majorities are “less intense,” Dr. Brodie said, since smaller portions strongly agreed than with the options mentioned earlier. Additional questions demonstrated how giving people additional information can affect their responses in polls. Since opinions about such questions are malleable, Dr. Brodie believes that the side whose perspective “breaks through” will mold public opinion. It is “too early to tell where the public ultimately comes out,” she concluded.

The second panelist, **Mark Blumenthal** with Pollster.com dissected variations in polling data. Pollsters use two types of questions, he explained. Opinion questions ask about things that Americans often think about, such as health reform in general, while reaction questions gauge a response to new information, such as a description of a specific policy proposal. In addition, differing answers from different polls can be caused by whose name is connected with reform in the poll question, whether the President, Congress, or the Democrats. The range of those who do not report an opinion to pollsters varies between 2 and 20 percent, Mr. Blumenthal said. He also noted that pollsters push for responses, forcing people to react to descriptions. This is one reason why opinions offered in response to such questions are subject to change. Finally, he noted how favorable public opinion, cautioning that public opinion can continue to be in flux even after a bill is passed.

Next, **Karlyn Bowman** with the American Enterprise Institute argued that while polls are useful, they are too crude to be used to make policy. The polling industry is competitive, she observed, forcing opinions that may just be “mushy”. She cited examples of polling questions in which alternative wording produced wildly different results. Additionally, she reasoned that members of the public actually have no opinion on the public option because they do not know what it is. Nonetheless, polls can give insight into personal experiences, such as the quality and costs of care. Americans have consistently believed since the 1930s that the federal government has a strong role to play in health care. Likewise, Americans are generous and sincerely want to help others, but this generosity must be balanced against other personal and public expenses. She also noted that few researchers have compared opinions on health care with opinions on other issues, such as reforming the immigration system.

Humphrey Taylor, chairman of the Harris Poll and Alliance Board Member, rounded out the presentations by identifying “what ... the public really wants”. Often polls confuse rather than enlighten policymakers, he explained, and health care is particularly confusing. The public knows what it wants, but has limited knowledge of policy and its effects, he offered. Most are unhappy with the current system and want change. The public is opposed to a government-run health care system but thinks some government intervention is needed. Yet, little consensus exists on the appropriate roles of the government, or of individuals or employers. Some see health care as a right; a minority sees it as a service. Moreover, people do not favor proposals that threaten their own insurance or that ration care. Mr. Taylor reminded the audience that opinions expressed depend on how you ask the questions. Interestingly, most people do not think or talk about the issues that are the focus of much of the health reform debate, such as reimbursement reform. They also see no conflict in getting every treatment they want, while simultaneously wanting to contain costs. Mr. Taylor closed with selections from Uwe Reinhardt’s “All American Wish List for Health Reform”, which highlights Americans’ contradictory values contradictory values.

A lively question and answer session followed.