



#### GREENBERG QUINLAN ROSNER RESEARCH

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### **38 percent** A new national survey highlighting the new political realities on health care

A new national survey conducted for Democracy Corps and the Women's Voices Women's Vote Action Fund<sup>1</sup> shows an intense new majority for implementing and improving the Affordable Care Act. A minority of voters want to repeal or replace "Obamacare," which has been the core demand of the Republicans in Congress who have shut down the government.

We want to be clear because so much of the punditry assumes Obamacare is "unpopular." Many supporters assume that support will come once the benefits take effect in January. Neither of these assumptions is true. Support has shifted dramatically since 2010 when reforms *were* unpopular and supporters paid a high political price. Some of that reflects perceptions of new positive benefits by people over 50 years, white older women and unmarried women. While supporters and opponents are divided evenly on the health care reforms, 8 percent are opposed because they do not go far enough. Just 38 percent are opposed because it is big government – very close to the number who stick with the Republican call to repeal and replace the law.

The debate ahead is about implementation of the Affordable Care Act, or Obamacare. When that is the choice, voters trust the Democrats by 17 points (49 to 32 percent) to do a better job. The more Republicans make the period ahead about blocking implementation, the more they trust Democrats to do a better job in government.

Because the opposition has been so cataclysmic in describing what will happen to Americans when the Affordable Care Act is implemented, it is important for progressives to step up, own the changes taking place, educate and mobilize voters, and welcome accountability. A plurality of voters in Republican-held House districts and a quarter of those voting Republican say they are less likely to support their Republican incumbents shutting down the government because of Obamacare. Opponents of the Affordable Care Act could pay a very high price in 2014 and for a generation.

<sup>&</sup>lt;sup>1</sup> Based on a national survey conducted by Greenberg Quinlan Rosner for Democracy Corps and Women's Voices Women Vote Action Fund. The survey of 950 2012 voters (1150 unweighted) nationwide, including 860 likely 2014 voters, was conducted from October 6-8, 2013. Unless otherwise noted, overall margin of error= +/-3.18 percentage points at 95% confidence.

Of course, voters do lack critical information and are genuinely nervous about affordability and the effect it might have on employment and small business. They want to implement it but call it "a start" and "first draft." They want to see changes that will improve the law. But they do support it—reject repeal efforts that would block implementation.

Support is growing because key beneficiaries are seeing benefits and this suggests that support will grow further as the changes become apparent. In this survey, we tested both favorable and unfavorable information about the law—and the number expecting they would benefit from the Affordable Care Act rose by 11 points. Voters are particularly excited that insurance companies cannot deny those with pre-existing conditions, drop policyholders if they become sick, and must cover preventive health services. They are eager for health insurance companies to act like insurance again.

The shifts are being driven by experience and personal expectations, but not by partisans. The biggest changes are with independents. If our survey is right, we should see big shifts ahead with baby boomers, unmarried women, and particularly young people.

### **Key findings:**

- Just 38 percent now clearly oppose the Affordable Care Act. While likely voters divide evenly on the plan, 8 percent oppose the law because it *does not go far enough*. As a result, just 38 percent oppose the law because it is big government.
- By significant margins, voters want lawmakers to implement and fix the law, rather than repeal it. By a 20-point margin, 58 percent to 38 percent, voters say lawmakers should implement and fix the law rather than repeal it. Additionally, intensity favors implementation—38 percent strongly favor implementing the law while 28 percent strongly favor repeal.
- Strong opposition to the law has dropped a net 10 points since 2010 now at 34 percent. This is a totally different context than 2010, when Democrats paid the price for the ACA and Republicans took control of the House
- These shifts are driven by movement among key groups who are the first to see the benefits. The biggest shifts on favorability since 2010 come not from partisans but from independents and key groups, including unmarried women, white non-college voters, and seniors. These are also the groups most likely to report that they are seeing the benefits of the law. This is not being driven by partisans aligning their views; this is being driven by the relevance of the changes to people's lives.
- Unmarried women, independents, white non-college voters, and seniors are beginning to see the effects of the Affordable Care Act. While many still report "too early to tell," the percent of unmarried women, independents, babyboomers, white-non college voters, and seniors who say that they are beginning to see the effects of the Affordable Care Act has doubled since March.

- By a 17-point margin (49 to 32), voters say they trust Democrats more than Republicans on implementing the Affordable Care Act. The more Republicans make the period ahead about implementation, the more voters trust Democrats to do a better job in government.
- **Positive information and messaging moves support for the ACA even further.** Focusing on the law's protections for insurance consumers and the improved insurance benefits for consumers moves voters to a more positive position on the ACA. Messaging and policies on both sides produce a net 11- point shift in the number saying they expect positive benefits with health care reform. The gain is even greater among those who are most likely to be impacted—20 points among young people and unmarried women.
- There is still a real lack of information among voters, especially those who are most likely to benefit from the law. Almost half of all voters (46 percent) still say it is too early to tell how the ACA will affect them—unchanged since March. The lack of information is particularly pronounced among the RAE. This includes unmarried women, even as many are beginning to see benefits. This aligns closely with what we heard in focus groups.
- Voters see this as a "first draft" and understand that it will take time to get it right. In focus groups with unmarried women, voters said this law is a "first draft." They see it as a big change and believe it will take some time to work well for everyone—but they want it to be implemented so we can begin to reap its benefits and make those important changes.
- Among all voters, as well as unmarried women and the RAE, the biggest concerns are about jobs and premiums going up. All of these came through very clearly in focus groups among unmarried women who were deeply concerned that the ACA would have a negative effect on the number and quality of jobs available, as well as the potential cost of insurance plans.
- However, voters do not see the Affordable Care Act as the main enemy—insurance companies are. Messages and information centered on insurance and insurance companies is the core of the most positive message for the Affordable Care Act and produce big shifts at the end of the survey.
- A working women's agenda, including health care reform, is empowering for unmarried women. Unmarried women see healthcare as one essential part of broader economic goals for women. Because many unmarried women have to make healthcare choices based on basic household finances, a message connecting healthcare to pocketbook policies for working women is very powerful for this group and aligns closely with how they think about healthcare.

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### The 38 percent minority.

Just 38 percent of voters now side with the Republicans in Congress who shut down the government to prevent or postpone implementation. Voters are eager to see the law implemented, even before hearing any information or messaging from either side. By a 20-point margin, voters say they want the law implemented and fixed rather than repealed and replaced, with intensity favoring implementation.

A similar question asked by CBS News/New York Times in September found nearly identical results—56 percent agreed we should "uphold the law and make it work as well as possible," while 38 percent wanted Congress to "try to stop the law from being put into place by cutting off funding to implement it."<sup>2</sup>



Those margins are even wider among key groups of voters, including the Rising American Electorate, two thirds of whom favor implementation over repeal. Among independents, a 55 percent majority favor implementation, 36 percent strongly. Majorities of white seniors (55 percent), white non-college voters (51 percent), and suburban voters (55 percent) all favor implementing and fixing the Affordable Care Act over repealing and replacing it. Even in Republican-held districts, half favor implementation over repeal.

 $<sup>^{2}</sup>$  CBS News/New York Times Poll, conducted September 19-23 among n = 1014 adults. Margin of error +/- 3.

### Affordable Care Act: significant shifts in favorability driven by experience.

Likely 2014 voters are split down the middle on the ACA—44 percent in favor and 46 percent opposed to it. However, we asked those who opposed the law, whether they oppose because it goes too far or not far enough, almost one in five said the reforms did not go far enough. Opposition to the law because it represents big government or overreach stands at just 38 percent.

### Just 38 percent now oppose the healthcare law because it goes too far: combined, 52 percent support the law or want it to go farther.



This even divide on support for the law stands in stark contrast to 2010, when Democratic candidates paid the price for the ACA by voters who opposed the law by an average of 11 points. Strong opposition to the law, which was 46 percent in January 2010, has fallen to just 34 percent—a 10-point decline since the 2010 election. Critically, this shift is produced by key groups of voters and is not partisan and political. It is driven by experience. The biggest shifts on favorability since 2010 come not from partisans but from independents and swing groups, including white non-college voters and seniors. This is not being driven by partisans aligning their views; this is being driven by the relevance of the changes to people's lives.

Net ACA Favorability Among Key Groups			
Group	2010 Average	October 2013	Net shift
Likely voters	-11	0	+11
Unmarried women	+9	+29	+20
White older women	-23	-4	+19
White women	-22	-7	+15
Independents	-25	-12	+13
White non-college	-31	-18	+13
Women	-6	+6	+12
Seniors	-23	-11	+12
White seniors	-30	-18	+12
Unmarried	+10	+22	+12
White over age 49	-24	-13	+11
White age 50-64	-19	-10	+9

### Support driven by experience

The strongest driver here is not politics, but individuals' own experiences with the law. Key groups who have begun to see the effects of the ACA, including unmarried women, older women, seniors, white non-college voters, and voters over age 50—have shifted significantly in their self-reported experiences with the law. While many in these groups continue to say it is still too early to tell whether the ACA will have an effect on them (good or bad), the percentage of those groups that are seeing the effects has increased significantly. This is a critical finding, as seeing the effects of the law is the strongest driver of support for it in this survey.

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### Shift in support parallels shift in actually experiencing personal benefits in last six months

Now I'm going to read you a few short statements about the health care reform law. After I read all the statements, please tell me which one of these statements comes closest to your experience... I am beginning to see benefits in the new health care law.



#### Democrats should want this debate.

The more the debate is about implementation, the better Democrats stand. Voters now give Democrats an 18-point advantage on implementing the healthcare law. Half (49 percent) of all voters now say they trust Democrats more to implement the ACA, 36 percent strongly. By contrast, just 31 percent say they trust Republicans more, 17 percent strongly.

And Republicans are already paying the price. In Republican districts, nearly half (47 percent) say they are less likely to vote for the Republican incumbent. Even among those who currently support their Republican incumbents, a quarter (23 percent) say they are less likely to vote for their GOP representatives because of the shutdown—10 percent say much less likely. Importantly, this debate moves voters towards favoring the law. After hearing messages and information both for and against the ACA, 15 percent of all voters shift toward believing that the ACA will make things better for them.

### And as people here more positive and negative information, they are significantly more likely to think reform will make things better.

All in all, do you think the health care reform law will make it better or harder for you, or will it not have much effect?



The biggest shifts come among those most likely to be impacted by the law—young people, African Americans, mothers, unmarried women, and women. One in five unmarried women and RAE voters moved toward a more positive position on the law.

**Democracy Corps** 

### **Biggest shifters**

All in all, do you think the health care reform law will make it better or harder for you, or will it not have much effect?



### Message framework for the Affordable Care Act

The strongest framework focuses on protecting consumers from insurance companies. It is clear from focus groups that voters come to this issue through their frustration with insurance companies.

The big message framework centers on making health insurance real, particularly for women. As we learned in focus groups among unmarried women, consumers feel at the mercy of insurance companies. They have been dropped from insurance, denied coverage, and battled to receive the benefits for which they already paid.

Insurance is supposed to be there for you when you are sick.

That's the whole purpose of having insurance. When you're sick and need it.

Many have personally—or know someone who has—suffered serious health consequences as a result.

It'd be like getting in a car accident and insurance drops you.

*It's the f*\*\*\*\*\* *point of health insurance* 

We'll insure you while you're...feeling good, and then you're going to get sick, oh, sorry.

That's the whole purpose of having insurance. When you're sick and need it.

Many have personally—or know someone who has—suffered serious health consequences as a result.

I was dropped from my insurance. I was self-employed... I was in the hospital for three months and they dropped me after that.... After that – my experience after that I ended up having four more operations without insurance within the next 24 months.

I had a friend who had breast cancer and she was young, it was aggressive and she reached her limit and so she couldn't afford the treatment her doctor was recommending and she's dead. I don't know if she would have been alive if she could have had treatment.

I know personally, my grandmother had breast cancer 14 years ago. And the combination of [treatments] put her over her lifetime limit... She's had it twice since then. And it's been almost completely out of pocket. She's remortgaged her home. They sold their lake house. I mean, what do you pay for your life? That's what it is. So if they get rid of that lifetime care – not everybody's going to use that. But some people will need it.

One bout with cancer will [put you over your lifetime limit.]

While these circumstances make them hopeful that the ACA will be the change they need, as we learned in focus groups, they remain largely unaware of how the ACA will impact them and the specific benefits they will receive. This includes those who currently do and currently do not have insurance. The information about the ACA that does change their minds is focused on the key areas where the healthcare system currently does not work for them.

Voters become even more supportive of the law after learning of its benefits and protections, especially those that will protect insurance consumers and keep insurance companies in check, and those that will require expanded access to comprehensive benefits.

• **Keeping insurance companies in check:** The top policies and message in the survey focus on protections for consumers and new requirements for insurance companies. The top policies highlight what insurance companies cannot do and the top message says they have to actually be insurance companies now. In focus groups, participants were very vocal about the many injustices they have suffered at the hands of insurance providers. Providing consumers with rights and putting a check on insurance companies was something the women in our groups desperately craved.

• **Benefits:** Learning that all health insurance plans must provide standard medical benefits and must cover preventive care for women were both strong policies on the survey. And in focus groups, participants recognized that preventive healthcare had the potential to reduce costs for everyone. Those with low-cost/high-deductible plans first worried about the cost of these plans, but were supportive if they believed they would not have to pay more for these higher quality plans.

#### Best framework: Insurance companies have to act like insurance companies:

The strongest entry point for talking to voters is the law's protections for consumers. The top policies on this survey recognize that the Affordable Care Act provides critical protections for consumers and women.

# Protections from insurance companies dominate new changes – particularly can't drop because sick

Much better Total 46 63 Insurance companies cannot charge higher premiums or drop your health coverage if you become sick. RAE 53 70 Total 42 57 No one can be denied health insurance for a pre-existing condition by any insurance company. RAE 43 58 57 Total 36 Insurance companies cannot be able to put lifetime limits on what they will pay for medical care. RAF 40 57 55 Total 41 All new insurance plans must cover preventive health care for women, such as mammograms, screenings for cervical cancer, etc. RAE 62 29 Total 51 Insurance companies must justify any rate increase of 10 percent or more to prevent sudden rate increases. RAE 33 52 Total All insurance plans provided must provide a standard set of 48 basic medical benefits, such as preventative care. RAE 35 55 Total 3/ 48 Insurance companies can no longer charge women higher premiums than men. RAE 40 56 Young people are allowed to stay on their parents' health Total 45 insurance until they are 26 years old. RAE 45

I'm going to read you some recent changes you may have noticed to health insurance and health care. After I read each one, I want you to tell me whether that will make things better or harder or have no effect for you.

Three powerful message frameworks become clear in this survey to guide mobilization around the law. First, insurance companies "actually have to act like insurance companies." The top message on the survey gives voice to voters' frustrations with insurance providers and highlights the law's protections against insurance companies. Second, the law has protections for women that are unprecedented. And third, the health care changes are a critical new element in a progressive working women's agenda – that particularly moves unmarried women.

## Protections from insurance companies and women's health strong messages – combined with reassurance about improving

Now I'm going to read you some things people are saying about Obamacare. After I read each one, please tell me whether it makes you much more supportive of Obamacare, somewhat more supportive, a little more supportive, no more supportive, or less supportive of Obamacare.

(INSURANCE COMPANIES) The biggest change in this law is that insurance companies actually have to act like insurance companies and provide health coverage when you need it. They can't raise your rates or drop you when you get sick, get older, or have a baby, nor can they charge women more than men or set life-time limits that hurt you take away your coverage when you need it most. Insurance will now give you the peace of mind it should.



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(WOMEN'S HEALTH) We have to make sure health care is affordable and good for small business. But the Affordable Care Act is important particularly for women. Women can't be charged more than men. Having a baby is no longer considered a pre-existing condition. All plans must cover preventive health services, mammograms and contraception. This coverage is long overdue and a big deal for women.



## Unmarried women's strongest response ties health care to broader working women's agenda

Now I'm going to read you some things people are saying about Obamacare. After I read each one, please tell me whether it makes you much more supportive of Obamacare, somewhat more supportive, a little more supportive, no more supportive, or less supportive of Obamacare.

(WOMEN AGENDA) Working women struggle with pay that doesn't keep up with prices and managing the demands of work and children. We should make sure women get equal pay for equal work, raise the minimum wage, expand child care, make sure working parents can care for kids and finally, make sure they have affordable health insurance. Now, women will be sure of having health insurance and health services they can afford - and that is critical for working women.



### **Concerns about ACA**

While this survey finds very positive trends, both the survey and focus group point to a real lack of information among all voters—and especially key populations like the RAE and unmarried women—about what the law will mean for them. This produces big shifts in favorability after they hear about essential pieces of the law, but also puts a fine point on the real lack of knowledge about it.

Voters do have real concerns—beyond the lack of information. They see this law as a big change. And with any big change, they believe it will take time before the "kinks" are worked out. As we learned in focus groups in Raleigh, NC, Detroit, MI, and Portland, OR, unmarried women see the ACA as a "first draft." They say we must implement the law in order to understand how to make it work well and work well for everyone. They believe reforms of this order require that kind of serious attention.

It was a work in progress and that I was hopeful about it. And it's kind of like a rough draft. Like there's going to be several changes to it over the next decade.

I think you're still working out the kinks in two years.

*I think they're going to, as it plays out, they're going to make little changes here and there.* 

*After two years reevaluate and say this part worked, this part didn't work, this did. Then they'll rewrite it.* 

We'll learn from the things that aren't working.

When asked why they withhold support, their biggest concerns are about jobs being lost and premiums going up. All of these came through very clearly in focus groups among unmarried women who were deeply concerned that the ACA would have a negative effect on the number and quality of jobs available, as well as the potential cost of insurance plans.

I don't know if these small businesses are going to survive having to provide that insurance. And I'm worried about jobs being lost or hours being cut because of the fact that, you know, they're having to provide the health insurance. Or people are going to say, "Well, OK, you're a 40-hour employee now, but we're going to have to cut you back to 29 hours or something like that to not be a full-time employee." Or just saying, "We've got to reduce our workforce because of having to pay for health insurance."

# People worry about impacts on employment and small businesses

Now I'm going to read you a list of concerns some people have about the new health care law - The Affordable Care Act or Obamacare. After I read each one, please tell me whether you are very concerned about this, somewhat concerned, a little concerned, or not at all concerned.



However, despite these concerns, it is clear that voters want to see this law implemented. They have already become more optimistic about the law and, after hearing information about it and messaging on both sides, voters become significantly more favorable toward it. This is particularly true among unmarried women and the RAE.

Messages tested very strong when they talked about the continuing changes to make sure that insurance is affordable and to help small businesses. Progressive messages will be stronger where they reassure that this is a continuing process with the goal of making the Affordable Care Act work.