

To: Interested Parties

Re: Key Findings From National Survey Research

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This report is based on findings from a national survey of 1,200 registered voters, including 1,107 with health insurance, conducted June 19-22, 2024 for the Alliance To Fight For Health Care.

Context of Inflation

The economy/inflation is the top issue for 38% of voters overall and with health insurance. Among those with employer-provided health insurance plans, 45% say it is their top issue.

Looking at outlook on inflation, 58% of voters say it is getting worse, rather than better (17%) or not changing (23%). This includes 58% of those with insurance (18% better, 23% not changing) and 58% of those with employer plans (17% better, 24% not changing).

| | Overall | Insured | Employer-Insured |
|--|----------|----------|------------------|
| Top issue economy/inflation | 38 | 38 | 45 |
| Outlook on inflation (better-worse-not changing) | 17-58-23 | 18-58-23 | 17-58-24 |

Health Care Costs and Inflation

Voters think that over the next year, health care costs will increase (66%) rather than stay the same (20%) or decrease (4%). Two-thirds (67%) of those with insurance (20% stay the same, 3% decrease) and 70% of those with employer plans (20% stay the same, 2% decrease) agree.

Asked to select from a list which items concerned them the most about their health care, voters identified the cost of insurance premiums (21%) followed by quality of care (17%), with the cost of co-pays/deductibles in third (16%).

In light of these cost concerns, voters do not support measures that would raise costs, including taxing employer-sponsored plans.

Voters Are Satisfied With Health Their Insurance

Of those with health insurance, our survey found a very positive 79% saying they were satisfied with their insurance (79-17 satisfied-not satisfied). Among those with an employer-provided plan, 78% say they are satisfied (78-19).

| | All insured | Employer-Insured |
|---------------|-------------|------------------|
| Satisfied | 79 | 78 |
| Not satisfied | 17 | 19 |

Proposal To Tax Employer-Provided Health Insurance

Voters oppose the proposal to tax employer-provided health insurance by 3:1 (18-58 favor-oppose). Among those with an employer-provided plan, two-thirds opposed the proposal (16-67). Opposition was also bipartisan, with 61% of Republicans (15-61), 62% of independents (15-62), and 52% of Democrats (24-52) opposing the proposal.

Presented with a series of arguments for and against the proposal, voters were more likely to believe the opposing arguments:

Given the increase in costs resulting from inflation, the government should not tax employer-sponsored health insurance to keep costs from getting passed on to working Americans (66-16 believe-do not believe overall; 76-12 among employer-insured).

A majority of Americans currently have health insurance through an employer; making employer-provided health insurance subject to taxes will mean a tax increase on most working Americans (65-19 overall; 74-18 among employer-insured).

As to the impact that taxing employer-provided health insurance plans would have on the cost of health care and insurance, 53% said this would increase rather than decrease (8%) or have no impact (21%). Among those with employer-provided plans, 57% said it would increase costs (7% decrease, 20% no impact).

Site Neutral Payments

By about 2:1, voters favor the proposal to adopt site-neutral payment policies (54-23 favor-oppose overall; 55-22 among those with insurance; 54-23 among employer-insured).

Presented with a series of arguments for and against the proposal, voters were generally more likely to believe the arguments in favor:

Health care could be more affordable by having services provided in less expensive settings when they can be done so safely — for instance, performing minor, out-patient surgery in a clinic rather than a hospital to lower the cost of the procedure (68-14 believe-do not believe overall; 69-15 among those insured; 72-15 among employer-insured).

Site neutral payment policies will help prevent hospitals from overcharging for services (60-22; 61-22 among insured; 62-24 among employer-insured).

Overwhelmingly, voters said that patients should not be charged hospital fees if they receive off-site care, such as at a doctor's office that is owned by the hospital (10-76 yes-no) or for a telemedicine appointment (9-82):

| Yes-no | Overall | Insured | Employer-Insured |
|--|---------|---------|------------------|
| Should a patient be charged a hospital facility fee for care received in an off-site doctor's office that is owned by a hospital system that is not located at a hospital? | 10-76 | 10-77 | 9-81 |
| Should patients be charged a hospital facility fee for care received via a telemedicine appointment? | 9-82 | 9-83 | 7-85 |

In a contrast, 31% said that care is of the same quality and cost no matter where a hospital delivers it, while a 55% majority said that Congress should require health care providers to report where a health care service occurred so that hospitals cannot charge extra fees for services performed at clinics or doctors' offices.