Strong Public Support Continues for States to Accept Federal Funds to Cover More Uninsured People Through Medicaid

April 9, 2013  A new national survey sponsored by the Georgetown University Center for Children and Families and the National Women’s Law Center shows strong support among adults 18 and older for their states to accept federal dollars that have been allocated to cover more uninsured people through Medicaid. The survey, conducted March 15-19, 2013 among 1,016 adults 18 and older, has a margin of error of \( \pm 4 \) percentage points.

The survey reinforces findings from numerous state polls that show widespread public support for state elected officials to accept federal funds allocated by the Affordable Care Act to cover more people through Medicaid.\(^1\) In addition, the survey demonstrates that a majority of the public would be concerned if their state turns down the federal dollars. Specifically, when they learn that some lower-income people could fall into a “coverage gap” without affordable health coverage options if their state turns down the funds – while higher income people will be eligible for new tax credits to buy insurance on the health exchanges – most feel this is a good reason for their state to accept the federal dollars. Key findings include:

- **By a ratio of 3 to 1, survey respondents want their state to accept the federal money and cover more people through Medicaid:** 62% say their state should accept the federal dollars, while only 19% say their state should turn the money down (17% are neutral).

- **After hearing arguments on both sides, two-thirds of survey respondents still want their state to accept the federal money:** 67% want their state to accept the money so that more people can get preventive care and stay out of hospital emergency rooms while 31% want their state to turn down the money in order to avoid increases in government spending.

- **Most survey respondents are concerned about the "coverage gap" that will occur if their state turns down the federal money and believe that avoiding this gap is a good reason for their state to accept the federal money:** When they learn that

\(^1\)http://www.acscan.org/content/wp-content/uploads/2013/01/ACS-CAN-Report_National-Summary-Final.pdf  
http://publicmind.fdu.edu/2013/govmar/final.pdf
some people could be left without new affordable health coverage options if their state turns down the federal money (i.e. the "coverage gap"):

– 74% of survey respondents say they are concerned about the coverage gap;
– 70% of survey respondents say avoiding the coverage gap is a good reason for their state to accept the federal money; and
– More than one-quarter (27%) believes they are at personal risk of falling into this coverage gap.

• **Most survey respondents are personally affected by their state’s decision:** More than half (55%) say they have a close friend or family member who is uninsured.

• **There is broad support for states accepting the federal money and covering more uninsured people through Medicaid.** Across gender, race and ethnicity, and region of the country there is more support for accepting the federal money than there is for turning it down.

Detailed findings can be found on the following pages.
DETAILED FINDINGS

By a ratio of 3 to 1, survey respondents want their state to accept the federal money and cover more people through Medicaid.

As Figure 1 shows, 62% of survey respondents indicate that their state should accept the federal funds to cover more uninsured people through the Medicaid program while only 19% say their state should turn the money down.

Among all demographic groups, support for accepting the federal funds is higher than support for turning the money down. There are some differences among subgroups, however, including divides by gender, connections to individuals without health insurance, and partisan affiliation. For example, support for accepting the federal funds is higher among women than men (65% vs. 59%) while support is also higher among those who have a close friend or family member who is uninsured over those without such a close connection (69% vs. 57%). Among those with a political affiliation, Democrats (76%) are much more likely than either Independents (64%) or Republicans (40%) to support states accepting the federal money. Republicans are split on support for states accepting the federal money or turning it down (40% accept; 42% turn it down; 17% neutral). Finally, there is no significant difference in support based on region of the country: Northeast (61%), Midwest (62%), South (64%) and West (61%).
After hearing arguments on both sides, two-thirds of survey respondents still want their state to accept the federal money.

Survey respondents considered two arguments on each side of this issue and then picked the argument they agreed with the most. In response, 67% agreed with the argument that states should accept the federal money so that more people can access preventive health services and see a doctor rather than receive care in hospital emergency rooms. In contrast, 31% sided with the argument that states should turn down the federal funds in order to avoid higher taxes and more government debt that would come from expanding the Medicaid program. (See Figure 2)

Support for Side B – the argument that asserts that states should accept the federal funds to help families access preventive care and avoid emergency rooms – is widespread and cuts across demographic groups. One exception is among Republicans: 59% agree with Side A (turning down the federal funds because of worries about increased taxes and government debt) while 39% agree with Side B (accepting the federal funds because it will reduce emergency room usage and save tax payer dollars).
Most people are concerned by the "coverage gap" if their state turns down the federal money.

Survey respondents read a description of what could happen if their state turns down the federal dollars and does not cover more people through Medicaid, often referred to as the “coverage gap.” They then considered a series of questions about the coverage gap. Below is the description:

“The purpose of the new health care law is to provide a path to health insurance for all Americans. Starting soon, many people will be able to get federal tax credits to help them afford health insurance. These tax credits will be available in every state. In states that accept the federal money to cover more people through Medicaid, many people with lower incomes will also be able to get affordable coverage. However, if [STATE] turns down the money, those with lower incomes will fall into a “coverage gap.” In other words, they will not get any help towards affording health insurance, while many people with higher incomes will still get help.”

In response, three-quarters (74%) of survey respondents said that they would be concerned about this coverage gap if their state turns down the money (32% “very” and 42% “somewhat” concerned). In addition, seven in ten (70%) believe avoiding the coverage gap is a good reason for states to accept the federal money and more than one-quarter (27%) believe they could actually fall into the coverage gap. (See Figure 3) People who have a close friend or family member who is uninsured are among those most likely to see themselves falling into this coverage gap (40%).

Concern about the “coverage gap” is high among Democrats (86%), people with a close connection to someone who is uninsured (82%), and women (79%). There is no significant difference in concern level based on region of the country. However, respondents in the West (31%) are more likely to believe they will fall into the coverage gap than respondents in the Northeast (23%), Midwest (26%) and South (26%).
Most people have a personal stake in their state’s decision about whether or not to accept the federal dollars to cover more people through Medicaid.

More than half of survey respondents (55%) indicate that they have close friends or family members who do not have health insurance (43% say they do not have these close connections to people who are uninsured). This finding, along with the previous insight about falling into the coverage gap, suggests that many survey respondents feel a personal stake in the decision their state will be making about accepting the federal funds. These findings point to a sense of personal vulnerability in terms of health coverage that may influence the public’s feelings about this state decision. In other words, some survey respondents may be thinking of their own potential need for health coverage in the future and so want their state to accept federal dollars and provide more opportunity for coverage through Medicaid so that it is there if they need it.

Methodology
PerryUndem Research and Communication conducted this survey among 1,016 adults 18 and older March 15-19, 2013. The survey was conducted using Knowledge Network’s online probability sample. The survey was administered in English and Spanish. The margin of sampling error for the survey is + 4.0 percentage points. If you have questions about this survey, contact Michael Perry at mike@perryundem.com.