

# Healthy Utah Poll

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Initial Findings

June 2014

Notalys, LLC | Data Decision Direction

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# Healthy Utah Poll

## Initial Findings

### Information About the Poll:

This report presents the results of a poll of 623 registered voters across the State of Utah regarding Governor Herbert's recently crafted *Healthy Utah* Plan. Responses were collected through phone interviews and online survey questionnaires. The survey was conducted in May and June of 2014.

### Poll Conducted By:

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Project Manager: Chad Berbert

### Analysis and Report Prepared By:

NOTALYS, LLC  
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About the preparers: Jay Goodliffe and Sven Wilson are professors of political science at Brigham Young University. They have participated in this project as private researchers of Notalys, LLC. This document is the work of Notalys and is not sponsored or endorsed by, or affiliated with Brigham Young University.

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### Sponsors:

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Utah Health Policy Project  
Utah Hospital Association  
Voices for Utah Children

## Executive Summary

The Healthy Utah Poll was commissioned by a group of Utah civic groups interested in gauging support for Governor Herbert's *Healthy Utah* plan. The poll was conducted by Dan Jones & Associates on a sample of 623 Utah voters during May and June, 2014. The full data and methods were then shared with Notalys for independent analysis. Notalys also consulted with the Dan Jones project leader on the development of the survey instrument. This report is the first set of research findings based on the poll.

Complete poll results are found in this report along with a description of methods and an analysis of the results. The poll gives a clear and compelling summary of how Utah voters see the *Healthy Utah* plan, particularly in comparison to other options, such as a full Medicaid Expansion.

**Key findings** from the poll analysis are the following:

### Widespread Support

- When compared with the option of doing nothing, 88% of Utah voters prefer the *Healthy Utah* plan, and 70% prefer *Healthy Utah* compared to a full Medicaid expansion.
- *Healthy Utah* has strong support across the state and *among all demographic groups*. Support is high for all age, education, race, gender, education and income categories.

### No Partisan Divide

- Conservative Republicans support *Healthy Utah*. Among voters who identify as Republicans, 64% of those who are "very conservative" support the Governor's plan, while just 13% oppose the plan.
- In general, support among Republicans is higher for *Healthy Utah* than it is among Democrats, since more Democrats favor Medicaid expansion.

### Support for Affordable Health Care

- About 9% of likely voters are currently uninsured, even after healthcare.gov went into effect. A majority (54%) of voters know someone who is uninsured.
- Utahns think health insurance is very important, and, more surprisingly, 83% believe "all legal Utah residents should have access to affordable health insurance."
- Utah voters believe that individual responsibility is important when it comes to insurance, but they are also supportive of government assistance for those who cannot afford coverage. Of the 65% of voters who agree that "individuals and families should generally be responsible for meeting their own healthcare needs," 80% also agree with the statement that "individuals who are unable to afford health insurance should receive help from government sources."
- Utahns are *not* opposed to a federal role in health care. 71% believe it is appropriate for the state to accept federal assistance in health care.

### Support for *Healthy Utah* Plan Features

- A significant majority of voters are interested in the issue of health care, but only about 40% have heard of the new *Healthy Utah* plan thus far. When the details of the plan are provided, voters are in strong support.
- Utah voters strongly support the individual features of the *Healthy Utah* plan. Respondents say that the following features of the plan make them more likely to support it than they would otherwise:
  - 59% are more likely to support the plan because it requires individuals to pay *premiums and co-pays* (10% are less likely).
  - 59% are more likely to support the plan because it provides *private health insurance* for people with low incomes rather than enrolling them in traditional Medicaid (14% are less likely).
  - 68% are more likely to support the plan because it allows *greater flexibility* for how Utah spends federal dollars than allowed under traditional Medicaid (10% are less likely).

### Opposed to Inaction

- The strongest consistency in the poll is that voters are very opposed to the status quo of doing nothing. Democrats are more inclined to do a Medicaid expansion, while Republicans support Governor Herbert's plan. But both groups oppose the status quo. In a three-way comparison, *only 6% of the state voters prefer doing nothing.*
- If *Healthy Utah* is rejected by federal officials, 65% would support a new Utah-specific solution, and 28% support a Medicaid expansion. Only 7% would favor doing nothing.
- And, 54% of voters indicate they would be more likely to vote for legislators who support *Healthy Utah*. Only 14% indicate they would be less likely to vote for a legislator who supported the plan.

## *Poll Take-Aways*

*Utahns are overwhelmingly supportive of the features of Governor Herbert's Healthy Utah plan.*

*Utahns value individual responsibility, but both Republicans and Democrats are strongly supportive of a government role in assisting low-income individuals to obtain health insurance.*

*What Utahns are against, more than anything, is doing nothing.*

## 1. Introduction/Background

For the past two years, Utahns have been actively debating how the state should move forward given the changing health care landscape. The Affordable Care Act (ACA), sometimes referred to as ObamaCare, is changing the way that many Utahns obtain health insurance.

In 2010, a US Supreme Court ruling on a section of the ACA created a “donut hole” of an estimated 57,000 Utahns. These are adults who cannot receive subsidies to purchase insurance on [healthcare.gov](http://healthcare.gov) because their income is too low yet their incomes are too high to be eligible for traditional Medicaid.

Governor Herbert recently rolled out a new initiative to extend health insurance in the state to these individuals. His *Healthy Utah* plan takes federal dollars targeted towards Medicaid expansion and returns them to the state to assist in the purchase of private health insurance.

In this report, we analyze the results of a new poll, the Healthy Utah Poll. Conducted in May and June, 2014 by Dan Jones & Associates, the poll results indicate that 88% of Utahns prefer adopting the *Healthy Utah* plan rather than continuing the status quo. *Healthy Utah* is also preferred by 70% of residents compared to the option of expanding traditional Medicaid.

The results of the Utah Health Poll clearly indicate that the state is strongly behind the governor in trying to make the ACA work for Utah in a way that is consistent with Utah values.

## 2. Methodology

### *Sampling*

Dan Jones & Associates conducted the survey. To select survey respondents, they drew a random sample from a list of registered voters in Utah, based on county. They set county and gender quotas based on overall statewide demographics to insure that every county would be represented according to its population, and that the gender balance would reflect the state's gender balance. They conducted the survey by telephone (69% of respondents, n = 429), and by email (31% of respondents, n = 194) using a recruiting partner. Both phone and online survey respondents were screened for county, gender, and registered voter status. With 623 respondents, the margin of error on the (unweighted) data is 3.9%.

### *Weighting*

The survey responses (raw data) were statistically adjusted using a technique called raking (or raking) to correct for potential nonresponse error and potential coverage error. Nonresponse error occurs if the non-respondents from the random sample of registered voters differ significantly from the actual respondents in their responses to the survey items. Coverage error occurs when the random sample of registered voters differs significantly from the group that we are attempting to survey and draw inferences about (in this case, likely voters). Although it is impossible to know whether there is any

nonresponse and coverage error, when weighting, we use what we know about nonresponse and coverage to minimize the chance of error.

In our weighting procedure, we calculated the age distributions from the list of registered voters, and from the likely voters of 2014, and used them to statistically adjust the survey data so that respondents belonging to overrepresented groups were given less weight in the analysis and those in underrepresented groups were given more weight. In this case the age distribution of survey respondents was lower than the age distribution of registered voters and likely voters. We model likely voters in the 2014 general election as those who turned out to vote in the most recent similar election: the 2010 general election, which is the most recent midterm federal election.

The weighted data is used in the topline results (summary statistics) and cross-tabulations tabulations (margin of error 5.2%). However, the results are qualitatively similar when we weight to registered voters or do not weight the data.

### *Regression Analysis*

Regression analysis is used when two or more factors may influence the variable we are trying to explain or predict. For example, both age and ideology may be related to support for a proposed program. By using crosstabs, or similar methods, we can examine the relationship between age and program support, and the relationship between ideology and program support. It is also likely that there is a relationship between age and ideology. Regression analysis allows us to control for (or hold constant) the relationship between age and program support while examining the relationship between ideology and program support. In other words, we can calculate the relationship between ideology and program support, net of any age effects. And we can calculate simultaneously the relationship between age and program support, net of ideology effects.

The idea of holding constant one effect while calculating another effect can be scaled up to many variables held constant by including those variables in the regression. In the regression models that follow, we estimate which factors influence support for various health insurance programs as well as components of those programs. We run three regressions. In the first regression, we include demographic variables: gender, age, education, income, household size, race/ethnicity, religion, and religious activity. We thus estimate how each demographic factor is associated with support for a program, while holding other demographic variables constant. In the second regression, we include the demographic variables as well as variables for partisan identification and ideology. In the third regression, we include variables of the second regression as well as specific attitudes toward health insurance reported by the respondent.

For each variable that has an ordering to its scale (e.g. income), we use the category scale as a single variable in the regression. For each variable that does not have an ordering (e.g. religion), we include each category as a variable (leaving out one category as a baseline). Because we are controlling for income, we use unweighted data in the regressions, but the results are qualitatively similar when we

weight to likely voters. In the main body, we provide a summary report of whether each ordered variable (in each of the three regressions) has a positive (+) or negative (-) relationship, and whether each unordered variable has any relationship (check). A blank means there is no statistical relationship found in the data.<sup>1</sup>

### 3. Main Results

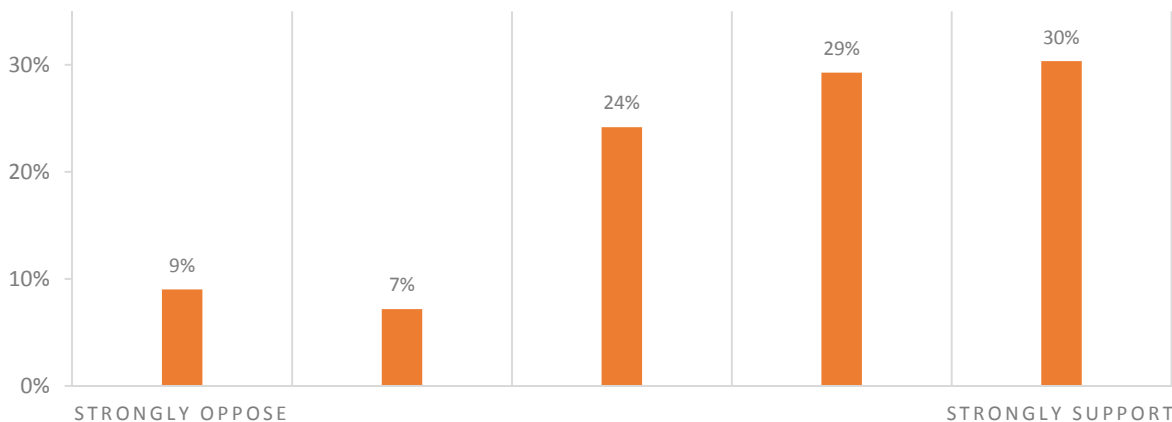
#### A. Overall Support

Although *Healthy Utah* is a new idea, voters in the state are already getting behind it. Because many voters have not yet learned the details of the plan (and, indeed, the plan is still being negotiated with the federal government), part of this support is undoubtedly due to trust in the Governor to do what is in the interests of the state. Yet when Utahns voters hear the specifics of the plan, they are supportive. Just under 40% of Utahns were already familiar with the plan, but everyone was given the following brief description:

Governor Herbert recently announced the Healthy Utah plan which utilizes the private insurance market to provide health insurance for Utahns living at or near the poverty line. If implemented, the plan would return to Utah nearly 250 million dollars paid by Utahns to the federal government each year. Under the Healthy Utah plan, this money would be used to assist more than 55,000 low-income Utahns who currently lack access to affordable health insurance. Funds would either purchase insurance from the private insurance market or support participation in current state health insurance programs.

After receiving this description, voters were asked the following question, with results given in the table below:

**Using a scale of 1 to 5 with 1 meaning "strongly oppose" and 5 meaning "strongly support," how would you rate your support of Governor Herbert's Healthy Utah Plan?**

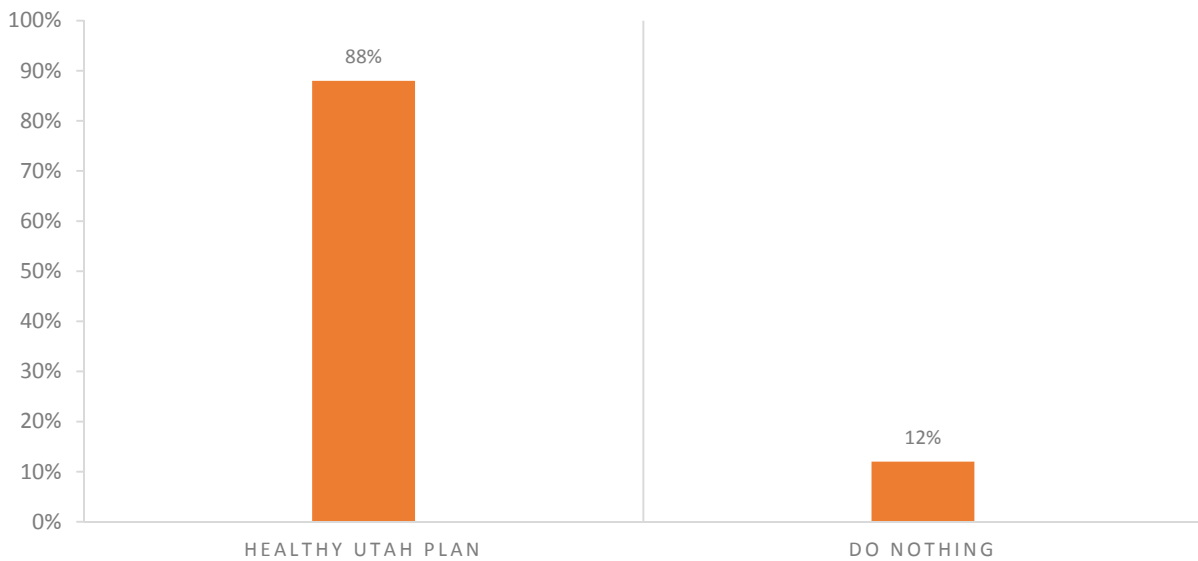


<sup>1</sup> A technical appendix with full regression results is available upon request. Contact Notalys at [info@Notalys.com](mailto:info@Notalys.com).

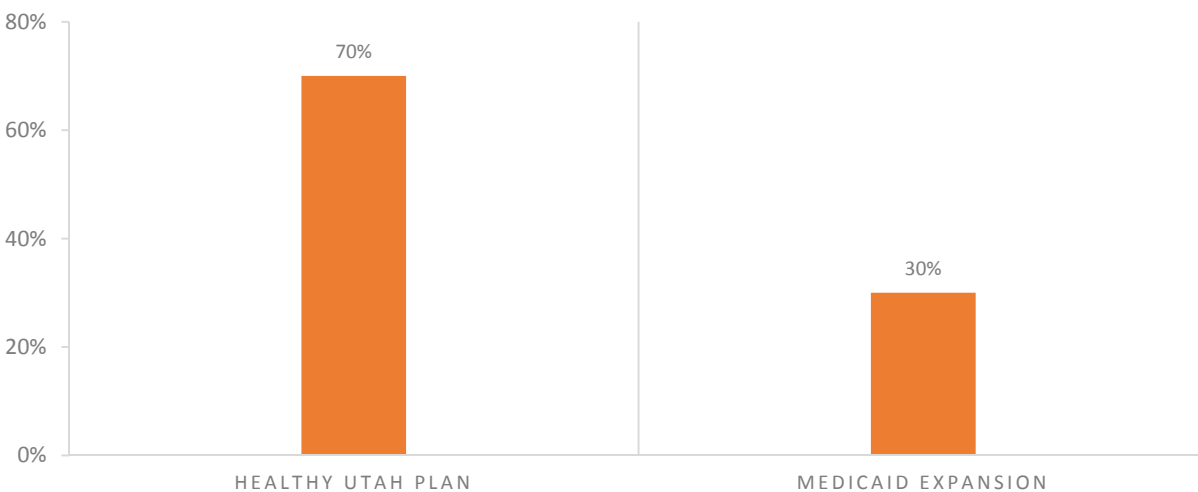
Thus only 16% of likely voters oppose this plan. A sizable 24% are in the neutral position, indicating the newness of the plan that voters are still learning about, but a solid majority indicate support.

The most compelling poll results are when the plan is compared to alternatives. After listing other features of the plan—copayments, private insurance, flexibility—respondents were asked to compare the plan to other programs. In comparison to the option of doing nothing, 88% of voters are in favor of *Healthy Utah*. The Governor’s approach is also supported in comparison to doing a traditional Medicaid expansion, indicating that his desire to find a "Utah Solution” resonates with Utah voters. When asked whether they prefer *Healthy Utah* or an expansion of Medicaid, 70% preferred *Healthy Utah*.

**One option is for the state to do nothing. Do you prefer: to do nothing or the Healthy Utah Plan?**

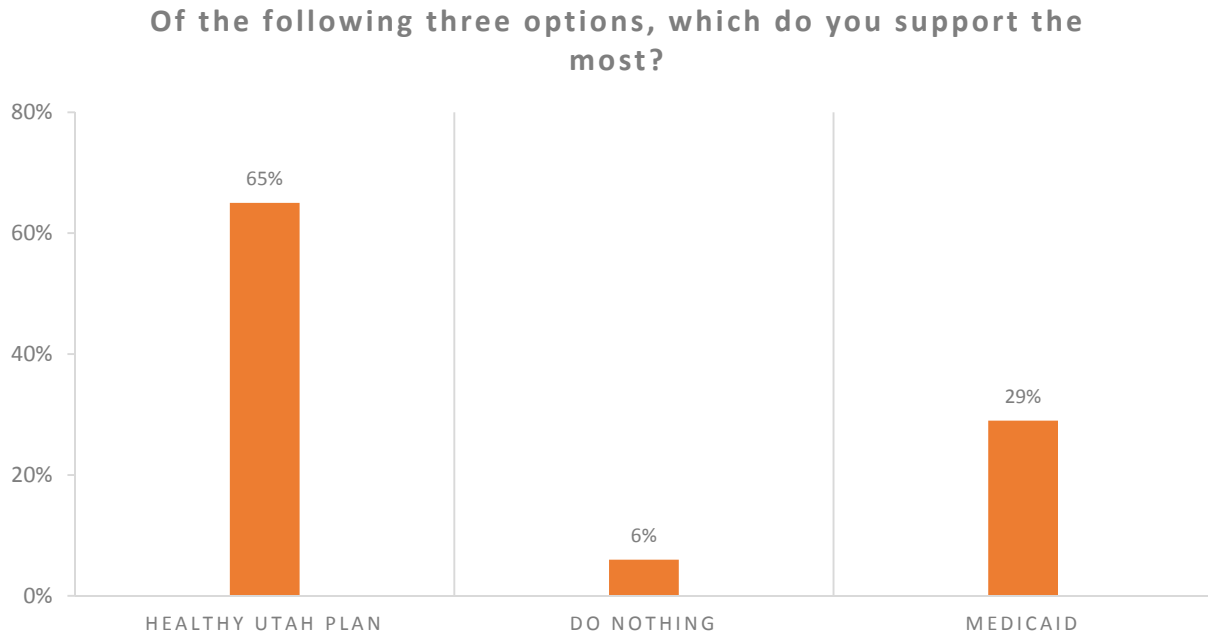


**One option is for the state to do nothing. Do you prefer: Medicaid expansion or the Healthy Utah Plan?**





The poll also did a three-way comparison between *Healthy Utah*, Medicaid expansion, and doing nothing. In this comparison, 65% of likely voters support *Healthy Utah* over Medicaid expansion or doing nothing. The figure below indicates these central findings.



In the recent Legislative session, Utah House Republicans led by Speaker Lockhart proposed a plan that used a combination of state and federal money to extend care to a limited number of low-income residents. The poll discussed in this report does not compare *Healthy Utah* to this alternative, but recent research carried out by the Utah Voter Poll compares the Speaker’s plan to Medicaid expansions and other options. In that poll, the Speaker’s Plan received only 11% support among Utah voters, the lowest of any of the plan descriptions in the poll.<sup>2</sup>

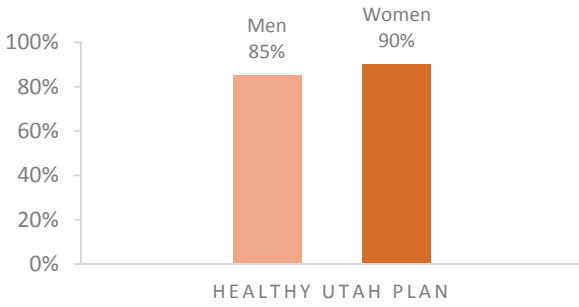
### Demographics

With such a high percentage of Utahns supporting *Healthy Utah*, it would be surprising to find large differences of support across demographic categories. Indeed, this is the case. The *Healthy Utah* plan is supported across all demographic groups in the state. The following tables show preference for the *Healthy Utah* plan over doing nothing among different demographic groups.

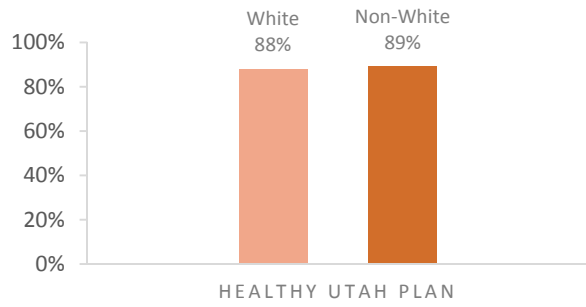
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<sup>2</sup> Complete results of the Utah voter poll are at <http://utahvoterpoll.org/documents/2014%20March%20UVP%20Topline.pdf>. See the Utah Data Points blog for further description: <http://utahdatapoints.com/2014/05/utah-voters-support-medicaid-expansion/>

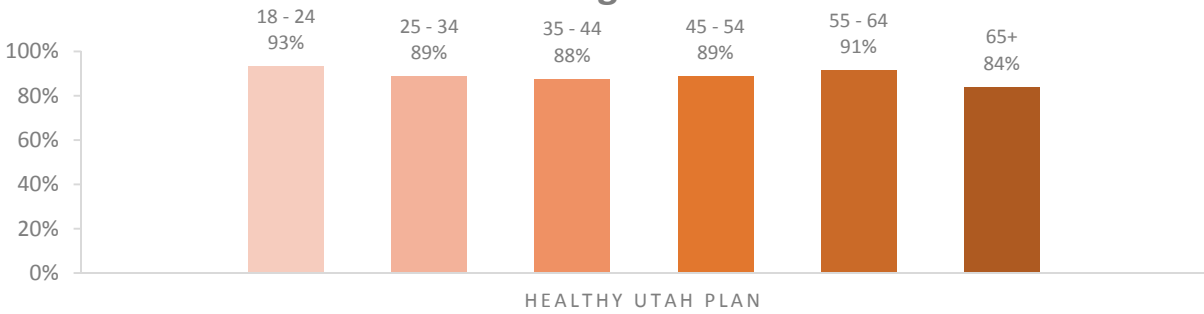
## Gender



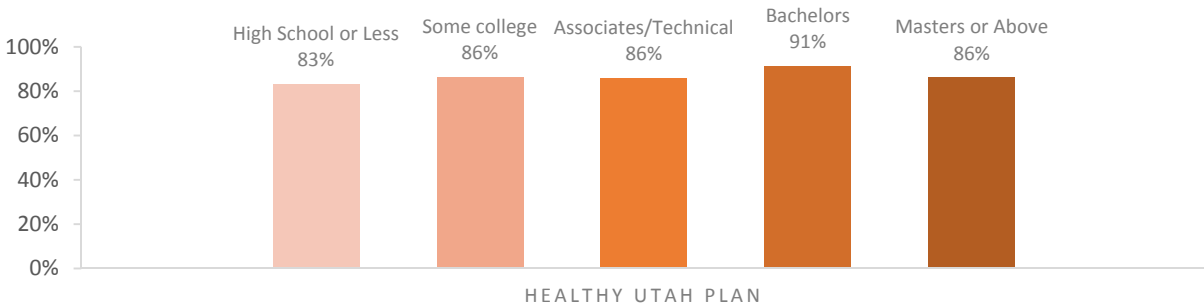
## Race/Ethnicity



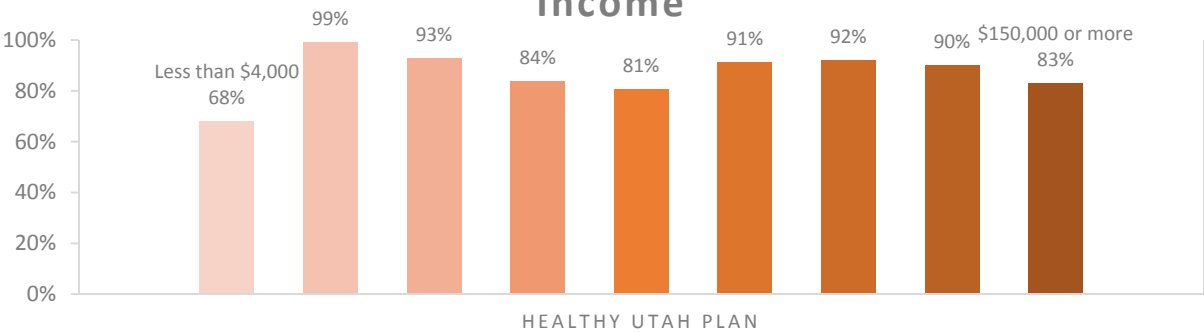
## Age



## Education



## Income

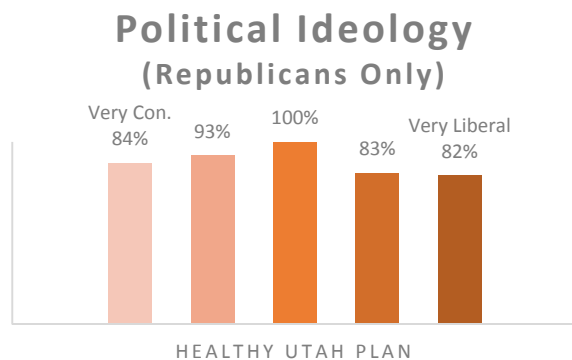
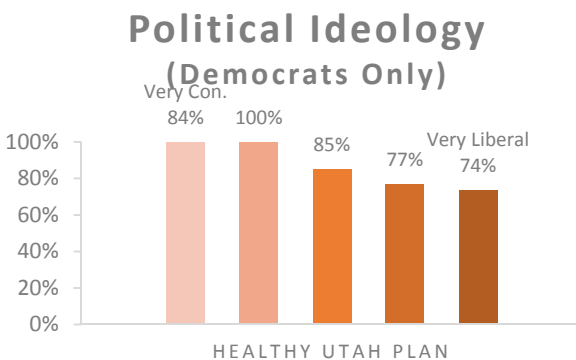
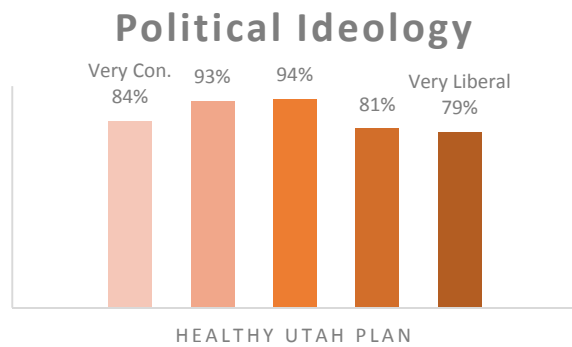
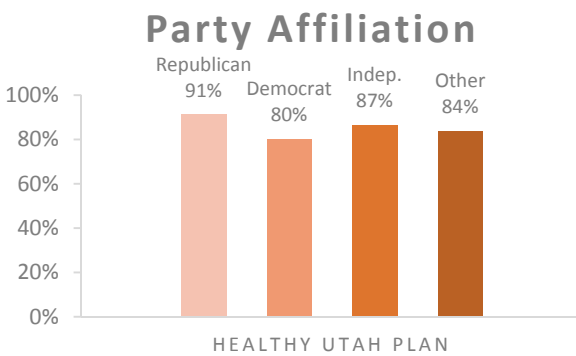


## Politics

Utah is a “red” state. Some have assumed that the overall conservative nature of the state would lead to opposition of any plan that uses federal dollars to promote health care for the poor. This is not the case. Compared to the option of doing nothing, support for the plan varies little across political parties and ideologies. Even among those who identify as Republicans and “very conservative,” support for the plan is high.

There is a political divide in the state regarding Medicaid expansion. Democrats are much more likely to support a traditional expansion of Medicaid than Republicans are, and they would prefer Medicaid expansion over *Healthy Utah* (77% prefer Medicaid and 23% support *Healthy Utah*). Individuals of both parties strongly favor doing something rather than doing nothing by overwhelming majorities.

Support across party and ideology is reflected in the following tables. Support for the plan is relatively even across party/ideology, and the stronger supporters are Republicans and conservatives.



## Regression Results

In the regression analysis described in the Methodology section, we look at support (on the 5-point scale discussed above) for *Healthy Utah* controlling for a variety of variables. This approach allows us to identify the effects of individual voter characteristics on support for the plan while controlling for the effect of other characteristics.

### Factors indicating support for *Healthy Utah*

	Model 1	Model 2	Model 3
<u>Demographics</u>			
Female	+	+	+
Age			
Education			
Income	-	-	-
Household size			
Race/ethnicity	✓	✓	✓
Religion			
Religious activity	+	+	+
<u>Politics</u>			
Republican (compared to Independent)			+
Democrat (compared to Independent)			
Other Party (compared to Independent)			
Conservative		+	+
<u>Beliefs/Attitudes</u>			
Health insurance important			
Everyone should have access to affordable insurance			
Individuals responsible for meeting needs			+
Help from Govt. sources is appropriate			+
Govt. should assist low income			+

Table Notes: + /- indicate a statistically significant effect in the positive/negative direction

✓ indicates a statistically significant difference across groups within the category

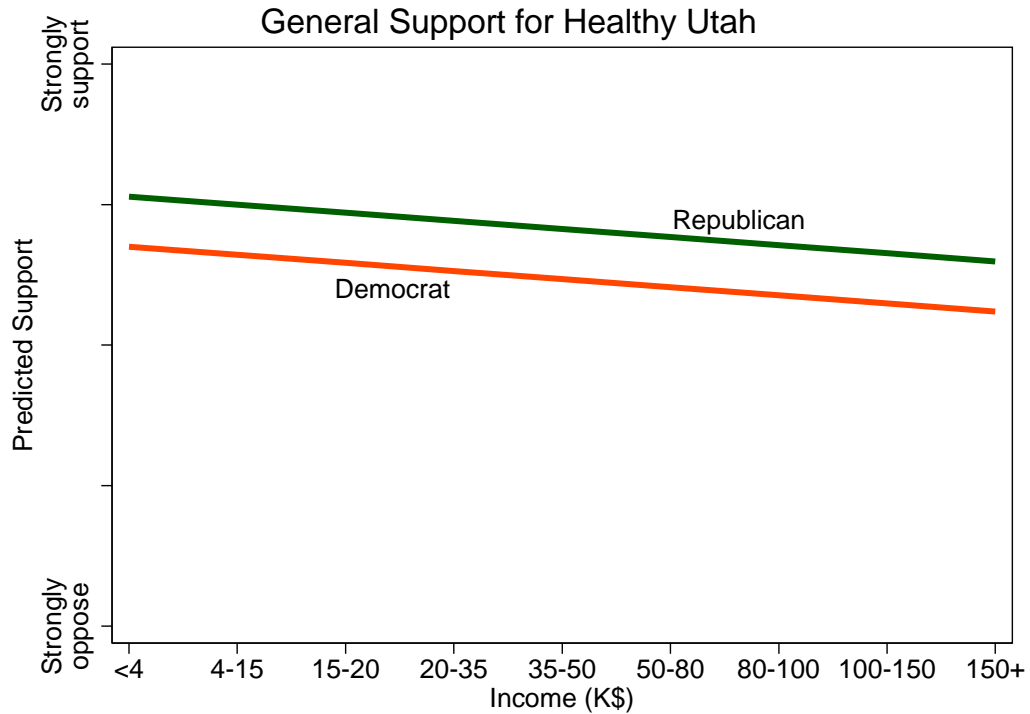
Model 1: includes only demographics as independent variables

Model 2: adds political party/ideology

Model 3: adds health insurance attitudes

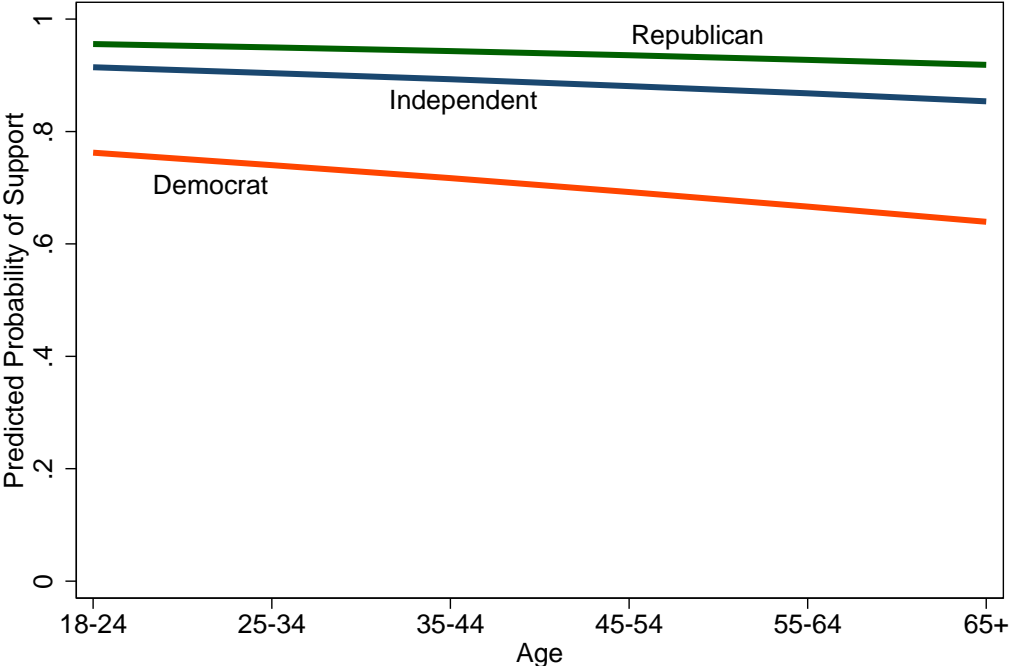
The effects indicated in the table above show which variables are statistically significant. The table indicates that women are more supportive than men, support is strong among the religiously active, that support wanes as income grows, and that Hispanics support the plan at a higher rate than non-Hispanics. Even after controlling for demographics, being a Republican (especially a conservative) is associated with higher support for the plan. These partisan effects persist even after adjusting for attitudes about health insurance and government (Model 3).

But, in general, none of the categories have effects that are large in size. For example, support for *Healthy Utah* declines somewhat with income for both Democrats and Republicans as indicated by the figure below.

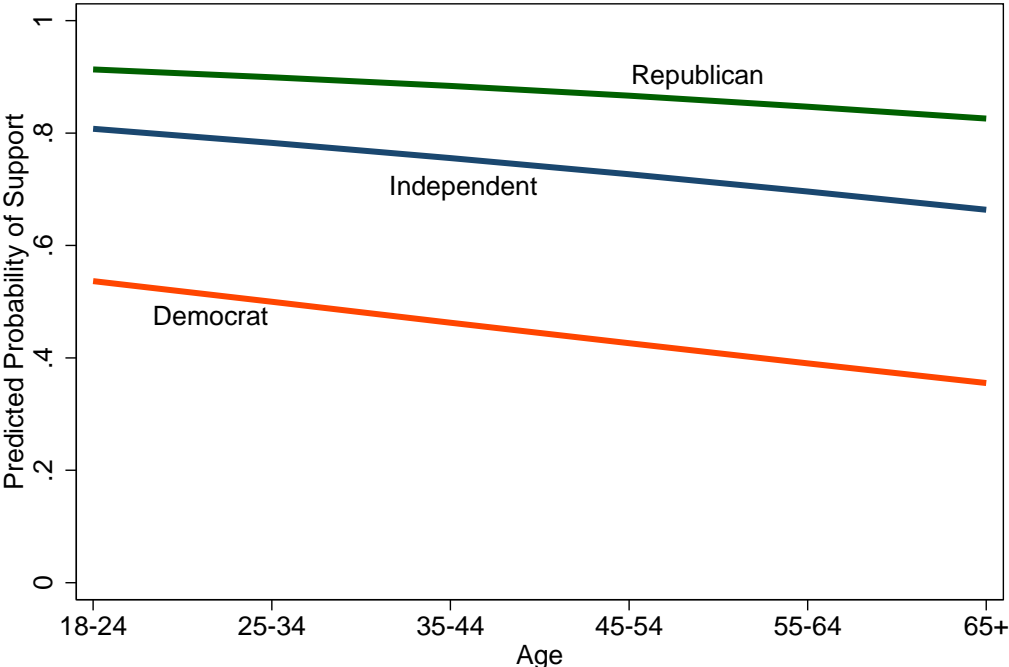


Support for the plan also declines with age, though the effect is not statistically significant. The age effect is illustrated below. The first figure shows *Healthy Utah* compared to doing nothing, while the second shows *Healthy Utah* v. Medicaid expansion. In addition to showing how support declines somewhat with age, the figures reveal partisan differences and show how support for the plan is much stronger among Republicans than Democrats (a majority of whom favor Medicaid expansion).

Support for Healthy Utah vs. nothing



Support for Healthy Utah vs. Medicaid



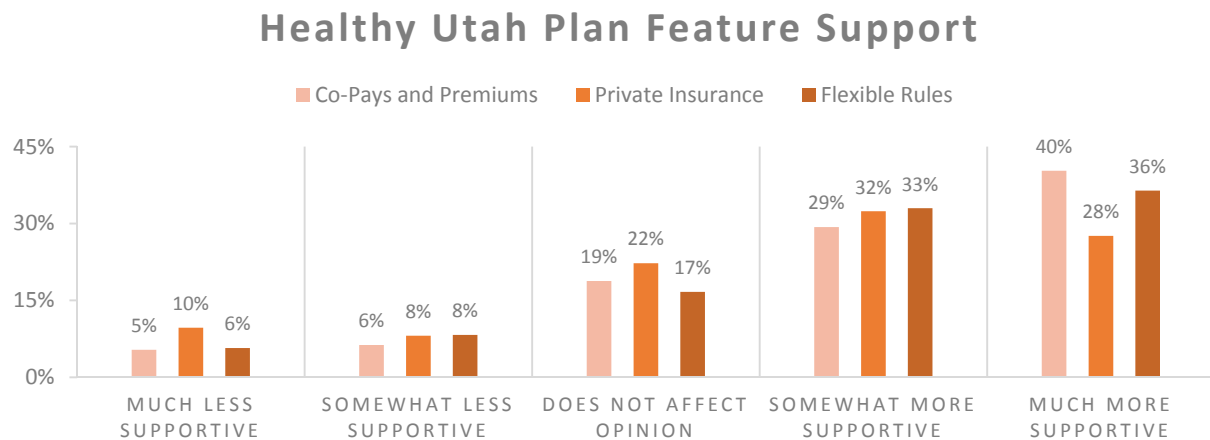
## B. Support for Plan Features

Knowledge of the *Healthy Utah* plan is not high, though better than might be expected given that it has only been part of the public discussion for a few weeks. Of the 31% who have heard of the plan, only 6% consider themselves to be very familiar with the plan features and 15% are somewhat familiar.

Therefore it is important to examine the particular features of the plan, which were explained to survey respondents.

After describing the general overview of the plan and gauging general support (see previous section), the poll inquired about some of the important features of the plan. The first feature is that enrollees will be required to pay premiums and co-pays; the second is that the plan will enroll people in private insurance rather than in traditional Medicaid; the third is that the plan will offer more flexible rules than traditional Medicaid.

Respondents were asked the effect that each of these features had on their support for the plan. In each case, the features of the plan, when explained, caused respondents to increase their support for the plan, often “much more.” The impact of these features on plan support is given in the following three figures.



## Regression Results

What voter characteristics are associated with support for plan features? The tables below identify what the regression analysis says about support for plan features.

### Support for Plan Features: Co-Pays and Premiums

	Model 1	Model 2	Model 3
<u>Demographics</u>			
Female	+		
Age	+		
Education			
Income	+	+	+
Household size			
Race/ethnicity	✓	✓	✓
Religion	✓	✓	✓
Religious activity	+	+	+
<u>Politics</u>			
Republican (compared to Independent)		+	+
Democrat (compared to Independent)			
Other Party (compared to Independent)			
Conservative		+	+
<u>Beliefs/Attitudes</u>			
Health insurance important			+
Everyone should have access to affordable insurance			
Individuals responsible for meeting needs			+
Help from Govt. sources is appropriate			
Govt. should assist low income			

Table Notes: see table on p. 10 for full table notes.



## Support for Plan Features: Uses Private Insurance

	Model 1	Model 2	Model 3
<u>Demographics</u>			
<i>Female</i>	+	+	
<i>Age</i>			
<i>Education</i>			
<i>Income</i>			
<i>Household size</i>			
<i>Race/ethnicity</i>	✓	✓	✓
<i>Religion</i>	✓		
<i>Religious activity</i>	+		
<u>Politics</u>			
<i>Republican (compared to Independent)</i>		+	+
<i>Democrat (compared to Independent)</i>		-	
<i>Other Party (compared to Independent)</i>			
<i>Conservative</i>		+	+
<u>Beliefs/Attitudes</u>			
<i>Health insurance important</i>			+
<i>Everyone should have access to affordable insurance</i>			+
<i>Individuals responsible for meeting needs</i>			+
<i>Help from Govt. sources is appropriate</i>			-
<i>Govt. should assist low income</i>			

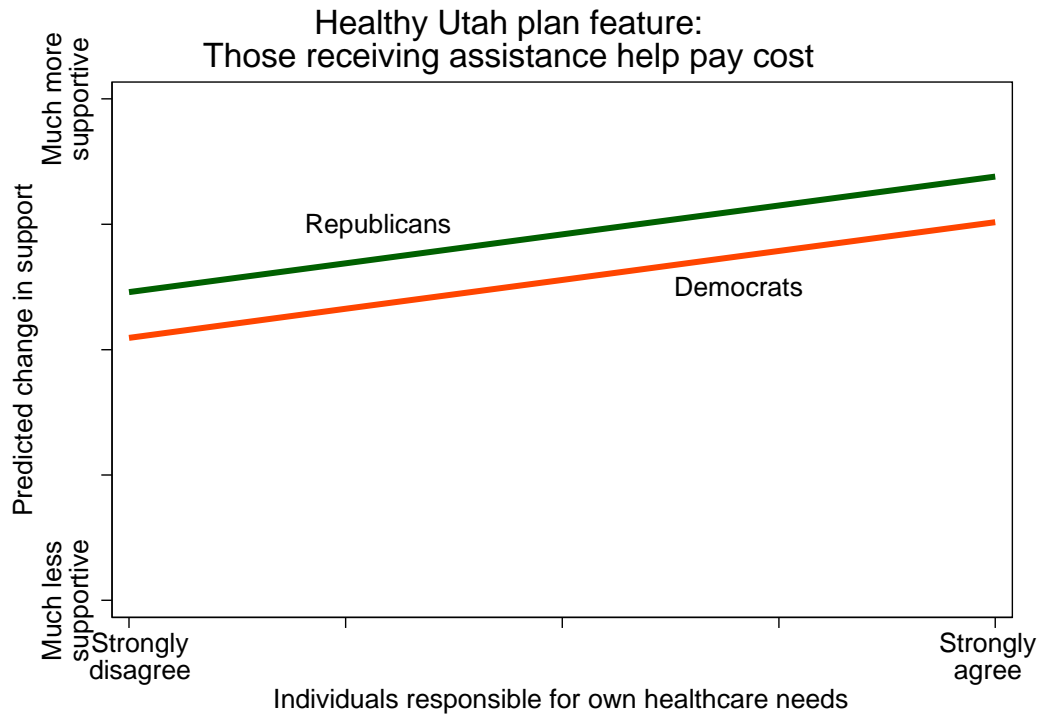
Table Notes: see table on p. 10 for full table notes.

## Support for Plan Features: Flexible Rules

	Model 1	Model 2	Model 3
<u>Demographics</u>			
<i>Female</i>			
<i>Age</i>			
<i>Education</i>			
<i>Income</i>			
<i>Household size</i>			
<i>Race/ethnicity</i>	✓	✓	✓
<i>Religion</i>	✓		
<i>Religious activity</i>	+		
<u>Politics</u>			
<i>Republican (compared to Independent)</i>			
<i>Democrat (compared to Independent)</i>		-	-
<i>Other Party (compared to Independent)</i>			
<i>Conservative</i>		+	+
<u>Beliefs/Attitudes</u>			
<i>Health insurance important</i>			+
<i>Everyone should have access to affordable insurance</i>			+
<i>Individuals responsible for meeting needs</i>			+
<i>Help from Govt. sources is appropriate</i>			-
<i>Govt. should assist low income</i>			+

*Table Notes: see table on p. 10 for full table notes.*

As indicated in the tables above, attitudes about health insurance and government affect how Utahns perceive plan features in predictable ways (though the effects are not always statistically significant). The figure below shows that the more people endorse the view that individuals are generally responsible for providing for their own health care increases, the more support received for the plan feature that enrollees in *Healthy Utah* should help pay the cost for their care by paying premiums and co-pays. The graph also indicates that support for this plan feature does not differ much between Republicans and Democrats.



### C. Attitudes about Health Care and Government

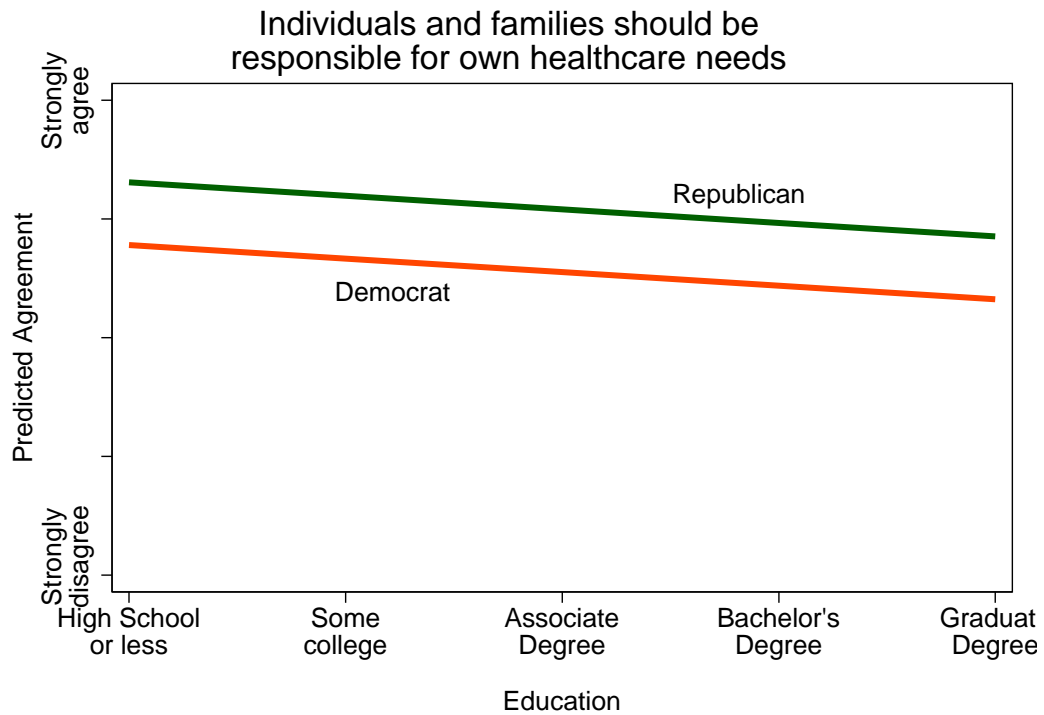
As noted above, most Utahns are not familiar with the Governor’s new plan. Thus their support hinges critically on how the plan is explained to them as part of the survey process. Survey designers took care to provide an accurate description of the plan as it now exists, but certainly in a low-information environment, respondents are highly susceptible to how the plan is “pitched” to them.

Some may critique the above results by saying that in a conservative state, the high support indicated for this plan is not in line with the political values of the state, which are generally in opposition to federal entitlement programs, such as Medicaid. Indeed, the support for the Governor’s plan compared to a Medicaid expansion as envisioned by the ACA is not surprising given Utah’s conservative political culture.

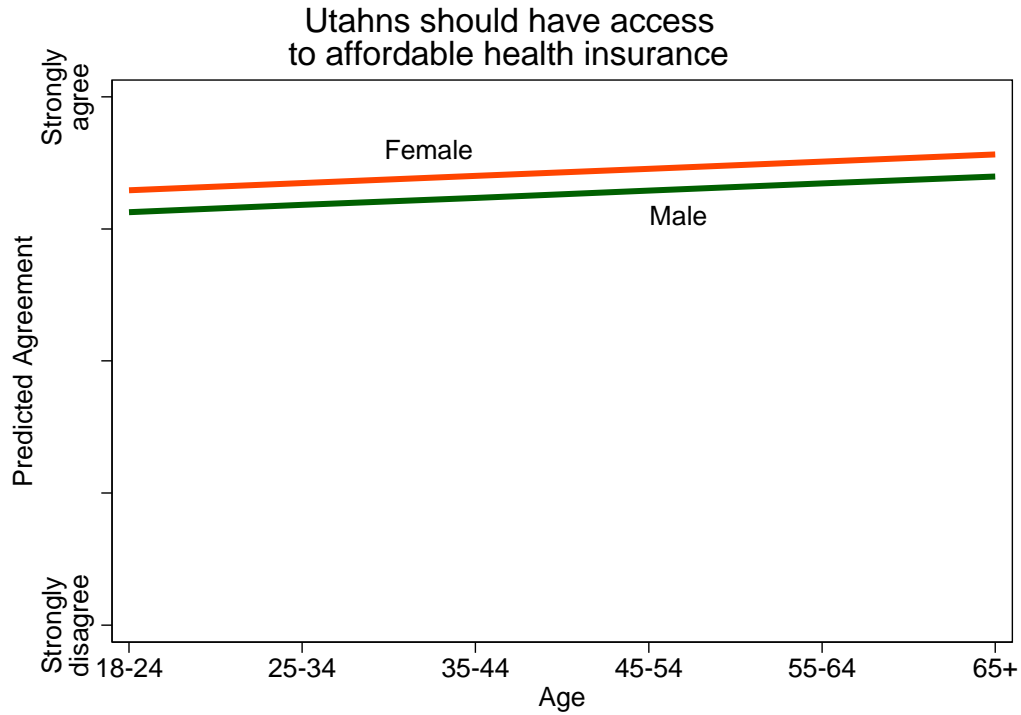
However, this broad-brush view that Utahns do not believe that government should play a role in health care is not supported by the data and paints a distorted picture of Utah values. Utahns may have limited information about the Medicaid expansion issue, but when asked general questions about their views on health insurance and government—questions that do not rely on knowledge of particular plans or even of program details—the results suggest that the support for the *Healthy Utah* plan is consistent with a more deeply held set of values.

The idea that individuals and families should generally be responsible for their own health care needs finds strong support in this survey. The regression models used to analyze this data indicate, as in the

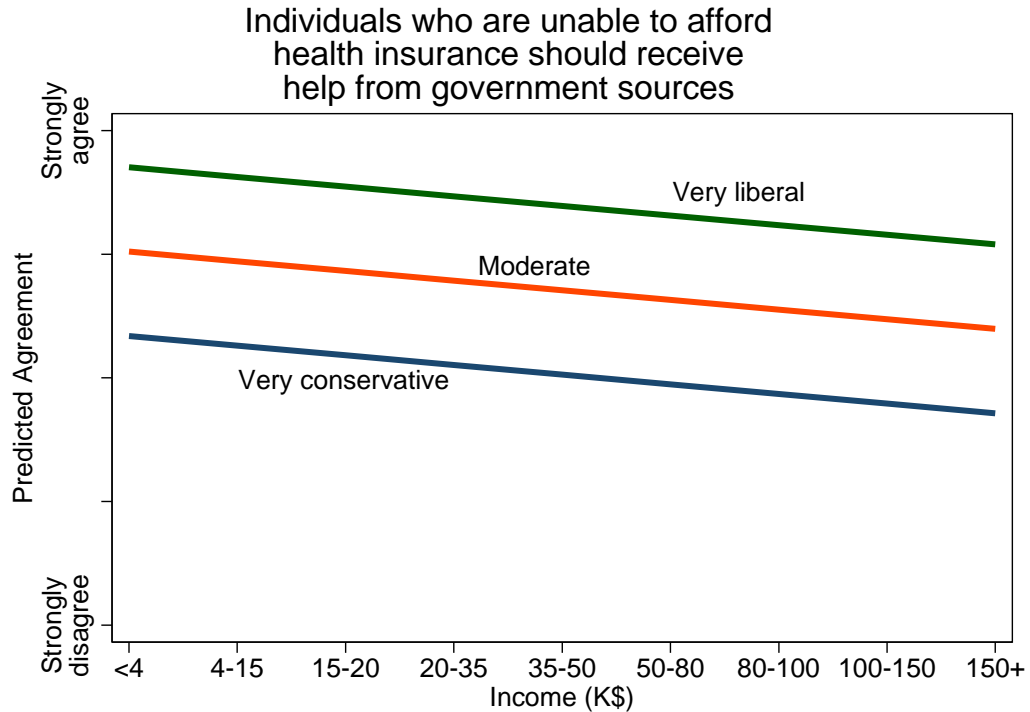
figure below, that this is a view held by both Republicans and Democrats, but that views on the question tend to moderate with a greater degree of education.



The values detected in this survey suggest that Utahns are motivated both by conservative ideals of individual responsibility and by compassion for the poor. Utahns also have a strong belief in the importance of health insurance. The overwhelming majority believe that everyone should have access to affordable health insurance. This belief is somewhat stronger among women than men, and, as indicated in the figure below, tends to grow stronger with age.

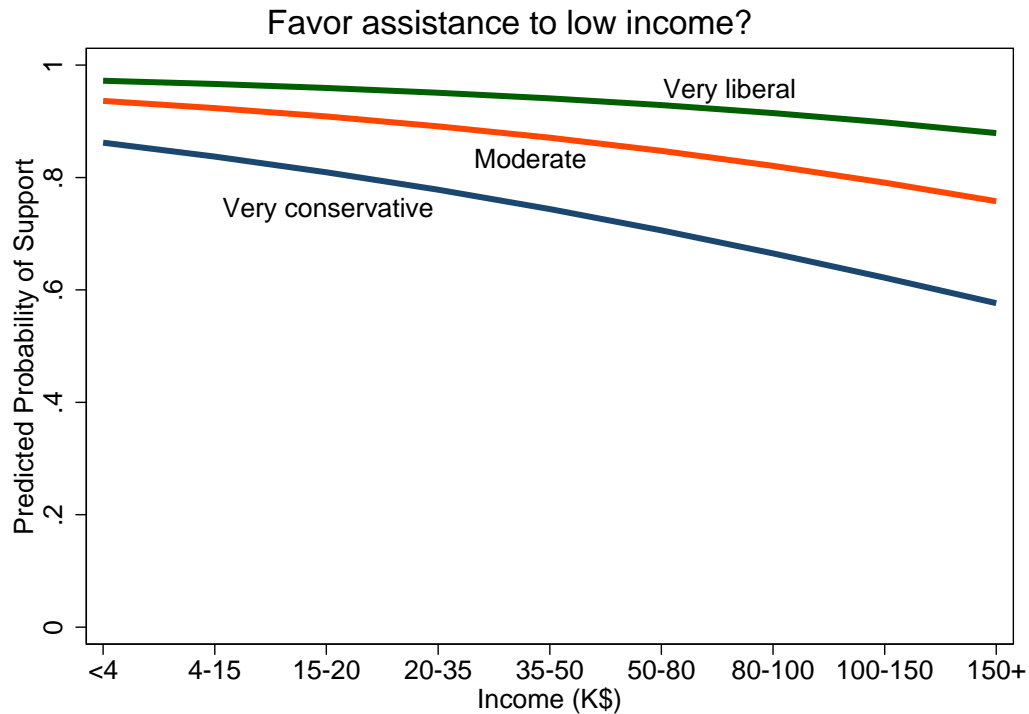


Voters in the state also support the idea that individuals who cannot afford insurance should receive assistance from government sources. 51% of the state voters support that view, while only 20% disagree (the remainder are neutral). This view is one that, as we might expect, differs significantly by party affiliation, but support among Republicans is higher than one might suspect, with 37% agreeing.



When put in the specific context of the Medicaid gap (or “donut hole”), however, support for providing government assistance rises substantially among members of both major parties. Poll respondents are told, “Currently, people above the poverty level can qualify for significant federal subsidies to buy health insurance, but unless a state government elects to provide help, individuals below the poverty level are not eligible for any assistance. Do you favor offering assistance to those individuals who currently do not qualify because their income is too low?”

When put in this specific context, the feelings against public assistance fade, and 81% of voters answer “yes” to the above question, including 76% of Republicans. The figure below shows that conservatives are less likely to support this view than liberals, but support for providing assistance to people in the coverage gap is considerable.



Governor Herbert’s stated goal from the beginning of this process nearly two years ago when the Supreme Court gave states the option of undergoing a Medicaid expansion has been to find a “Utah solution.” His focus on the twin values of personal responsibility and providing assistance for the poor seems to be succeeding in targeting a set of Utah values that transcend simple caricatures of Utah’s conservative political culture.

### D. Legislative Accountability

The results presented in this report are the opinions of likely voters in the 2014 election. It is too early to know how this issue will affect the election outcomes, but voters were asked whether they would be more likely to vote for legislative candidates if the candidate supports *Healthy Utah*. 54% of likely voters will be more likely to support candidates if they support the plan; 32% are neutral, and only 14% are less likely to support a candidate.

Interestingly, the regression results tell a story about partisanship on this issue that is different than we might expect. Self-identified Republicans are more likely to vote for candidates who support the plan than are independents and Democrats. Democrats are even less likely than independents (likely because they would prefer candidates to support Medicaid expansion). Even after controlling for party affiliation, those who see themselves as conservatives are more likely to change their voting behavior based on this issue. Those who feel health insurance is important and that everyone should have access to it are similarly more likely to support such candidates, as are those who think people should be responsible for their own care and those

who think it is appropriate for government to help low-income people who are in people in the Medicaid coverage gap.

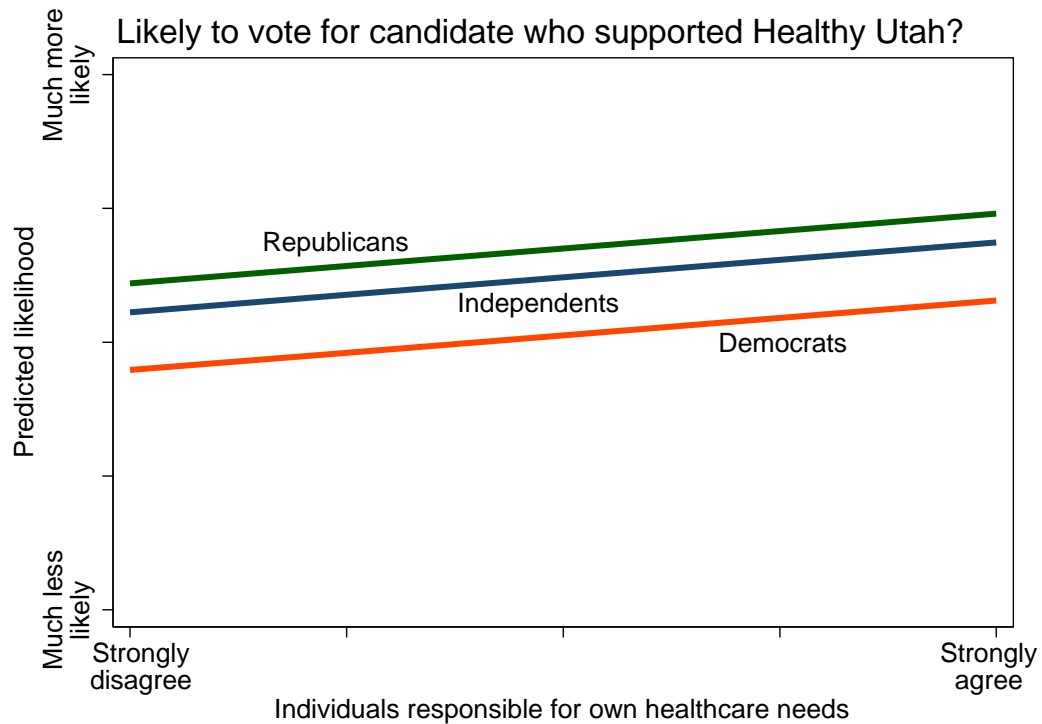
### More Likely to Vote for Candidate who Supports Healthy Utah

	Model 1	Model 2	Model 3
<u>Demographics</u>			
Female	+	+	+
Age			
Education			
Income			
Household size			
Race/ethnicity	✓	✓	✓
Religion	✓		
Religious activity	+		
<u>Politics</u>			
Republican (compared to Independent)		+	+
Democrat (compared to Independent)		-	-
Other Party (compared to Independent)			
Conservative		+	+
<u>Beliefs/Attitudes</u>			
Health insurance important			+
Everyone should have access to affordable insurance			+
Individuals responsible for meeting needs			+
Help from Govt. sources is appropriate			
Govt. should assist low income			+

Table Notes: see table on p. 10 for full table notes.



The partisan differences regarding voting for candidates who support *Healthy Utah* are given in the following figure.



#### 4. Summary & Conclusions

Polls should be interpreted cautiously in a low-information environment, where the issue is new and where many voters are not engaged. Therefore, as more public debate takes place on how to help the uninsured adults in the state, public opinion might shift. Additionally, the Governor’s office is still in negotiations with the federal government, which might not approve all the features of the proposed plan.

Nonetheless, this initial assessment of Utah voter attitudes reveals a remarkable level of support for *Healthy Utah*. This support is for the plan in general (after a summary is provided for them) and for specific features of the plan. Moreover, the poll reveals that Utah voters are very open to federal assistance for the poor when the need is accurately described to them. Utahns respond very negatively to the “donut hole” created by the Supreme Court, in which many poor people do not earn enough to qualify for generous federal subsidies that higher income people receive. A surprising 81% of likely voters (76% of Republicans and 96% of Democrats) believe that providing government assistance to buy insurance is appropriate for the people who have fallen into the donut hole.

There is ample evidence in these results that providing assistance to the poor to obtain health insurance—even “government assistance” where necessary—is a fundamental Utah value, even among those who believe strongly in individual responsibility. This aim is at the core of the *Healthy Utah* plan. The Governor’s approach of doing this primarily through the private market is also consistent with Utah values. Our initial assessment of the evidence is that the Governor has, indeed, found a “Utah solution.”

# Topline Report

## Healthy Utah Poll

*Note: Statistical weights applied to reported values. Where applicable, percentages are rounded. Percentages may not sum to 100% and counts may not sum to sample size (N).*

Q1: Do you make health care decisions for yourself? (e.g., select doctors, determine when to visit a doctor, etc.)

	Count	Percent
Yes	614	98
No	9	2

N: 623

Q2: Do you make healthcare decisions for others in your family such as children or ailing parents?

	Count	Percent
Yes	294	47
No	329	52

N: 623

Q3: For how many family members, including yourself, do you make healthcare decisions?

	Count	Percent
2	89	26
3	79	23
4	81	23
5	49	14
6	30	9
More than 6	17	5

N: 345

#### Q4: How do you pay for your own healthcare costs?

	Count	Percent
Employer provided insurance	325	52
Medicare or Medicaid	149	24
Uninsured or self-insured	49	8
Self-selected insurance plan on health care marketplace (Healthcare.gov)	36	6
Self-selected insurance plan via other sources (not Healthcare.gov)	29	5
Other	35	6

N: 623

#### Q5: How do you pay for your children's healthcare costs?

	Count	Percent
Employer provided insurance plan	201	58
Not applicable - I do not have children	41	12
Medicare or Medicaid	28	8
Self-selected insurance plan via other sources (not healthcare.gov)	21	6
Uninsured or self-insured	18	5
Self-selected insurance plan on healthcare marketplace (healthcare.gov)	10	3
CHIP (Children's Health Insurance Program)	7	2
Other, please specify:	17	5

N: 345

#### Q6: Do you currently know friends or family who are uninsured?

	Count	Percent
Yes, friends	177	28
Yes, myself or immediate family	78	13
Yes, extended family	72	12
No	255	41
Unsure	40	6

N: 623

Q7: Using a scale of 1 to 5, with 1 meaning “not at all important” and 5 meaning “very important”, how important is it in your view that people have health insurance?

	Count	Percent
1 - Not at all important	6	1
2	13	2
3	61	10
4	117	19
5 - Very important	425	68

N: 623

	Count	Percent
Not Important (1 & 2)	19	3
Important (4 & 5)	542	87

Mean Score: 4.4

Q8: Please indicate the degree to which you agree with the following statements:

Q8.1: All legal Utah residents should have access to affordable health insurance.

	Count	Percent
1 - Strongly disagree	23	4
2	19	3
3	66	11
4	104	17
5 - Strongly Agree	411	66

N: 623

	Count	Percent
Disagree (1 & 2)	42	7
Agree (4 & 5)	515	83

Mean Score: 4.4

Q8.2: Individuals and families should generally be responsible for meeting their own healthcare needs.

	Count	Percent
1 - Strongly disagree	53	8
2	28	4
3	129	21
4	144	23
5 - Strongly Agree	269	43

N: 623

	Count	Percent
Disagree (1 & 2)	81	13
Agree (4 & 5)	413	66

Mean Score: 3.9

Q8.3: Individuals who are unable to afford health insurance should receive help from government sources.

	Count	Percent
1 - Strongly disagree	67	11
2	63	10
3	182	29
4	114	18
5 - Strongly Agree	197	32

N: 623

	Count	Percent
Disagree (1 & 2)	130	21
Agree (4 & 5)	311	50

Mean Score: 3.5

Q9: Currently, people above the poverty level can qualify for significant federal subsidies to buy health insurance, but unless a state government elects to provide help, individuals below the poverty level are not eligible for any assistance.

Do you favor offering assistance to those individuals who currently do not qualify because their income is too low?

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	Count	Percent
Yes	502	81
No	117	19

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N: 620

Q10: The next set of questions are about a solution proposed by Governor Herbert to address the healthcare needs of low-income Utahns.

Have you heard of Governor Herbert's Healthy Utah plan?

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	Count	Percent
Yes	264	42
No	359	58

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N: 623

Q11: Using a scale of 1 to 5 with 1 meaning “not at all familiar” and 5 meaning “very familiar”, how familiar are you with Governor Herbert’s Healthy Utah plan?

*Note: Question 11 only asked if respondent answered “yes” to question 10.*

	Count	Percent
1 - Not at all familiar	23	12
2	53	27
3	79	41
4	26	14
5 - Very familiar	12	6
N: 194		
	Count	Percent
Not familiar (1 & 2)	76	39
Familiar (4 & 5)	36	19

Mean Score: 2.8

Q12: Governor Herbert recently announced the Healthy Utah plan which utilizes the private insurance market to provide health insurance for Utahns living at or near the poverty line. If implemented, the plan would return to Utah nearly 250 million dollars paid by Utahns to the federal government each year. Under the Healthy Utah plan, this money would be used to assist more than 55,000 low income Utahns who currently lack access to affordable health insurance. Funds would either purchase insurance from the private insurance market or support participation in current state health insurance programs.

Using a scale of 1 to 5 with 1 meaning "strongly oppose" and 5 meaning "strongly support," how would you rate your support of Governor Herbert's Healthy Utah Plan?

	Count	Percent
1 – Strongly Oppose	56	9
2	44	7
3	150	24
4	182	29
5 – Strongly Support	189	30

N: 623

	Count	Percent
Oppose (1 & 2)	100	16
Support (4 & 5)	371	59

Mean Score: 3.6



Q13: The Healthy Utah plan requires those who receive assistance to help pay for the cost of their health coverage by contributing to the cost of their premium and paying copays.

Does this make you:

	Count	Percent
1-Much less supportive of the Healthy Utah Plan?	33	5
2-Somewhat less supportive of the Healthy Utah Plan?	39	6
3-Does not affect opinion of the Healthy Utah Plan?	116	19
4-Somewhat more supportive of the Healthy Utah Plan?	182	29
5-Much more supportive of the Healthy Utah Plan?	251	40

N: 623

	Count	Percent
Less Supportive (1 & 2)	72	11
More Supportive (4 & 5)	483	69

Mean Score: 3.9

Q14: The Healthy Utah plan provides low income individuals with health coverage using private insurance plans rather than enrolling them in traditional Medicaid.

Does this make you:

	Count	Percent
1-Much less supportive of the Healthy Utah Plan?	60	9
2-Somewhat less supportive of the Healthy Utah Plan?	50	8
3-Does not affect opinion of the Healthy Utah Plan?	138	22
4-Somewhat more supportive of the Healthy Utah Plan?	201	32
5-Much more supportive of the Healthy Utah Plan?	171	28

N: 623

	Count	Percent
Less Supportive (1 & 2)	110	17
More Supportive (4 & 5)	372	60

Mean Score: 3.6

Q15: The Healthy Utah plan would give Utah greater flexibility on how it spends federal dollars than traditional Medicaid rules allow.

Does this make you:

	Count	Percent
1-Much less supportive of the Healthy Utah Plan?	35	6
2-Somewhat less supportive of the Healthy Utah Plan?	51	8
3-Does not affect opinion of the Healthy Utah Plan?	104	17
4-Somewhat more supportive of the Healthy Utah Plan?	205	32
5-Much more supportive of the Healthy Utah Plan?	226	36

N: 623

	Count	Percent
Less Supportive (1 & 2)	86	14
More Supportive (4 & 5)	431	68

Mean Score: 3.9

Q16: One option is for the state to do nothing.

Do you prefer:

	Count	Percent
Do nothing?	70	12
The Healthy Utah Plan?	495	88

N: 566

Q17: One option is expand Medicaid as designed in the Affordable Care Act.

Do you prefer:

	Count	Percent
Medicaid Expansion?	161	30
The Healthy Utah Plan?	383	70

N: 545

Q18: If the U.S. Federal Government rejects supporting the Healthy Utah plan, which of the following options do you believe would be in the best interest of the State of Utah?

	Count	Percent
Doing nothing	34	6
Medicaid expansion	199	34
Create a new Utah-specific solution to provide healthcare to the uninsured	349	60

N: 582

Q19: Of the following three options, which do you support the most?

	Count	Percent
The Healthy Utah Plan	375	65
Medicaid Expansion	165	28
Do Nothing	37	6

N: 577

Q20: In the next election, would you be more likely or less likely to vote for a State House or State Senate candidate who supported the Healthy Utah Plan?

	Count	Percent
1-Much less likely	46	8
2-Somewhat less likely	36	6
3-Neutral, would not affect my vote	202	32
4-Somewhat more likely	178	29
5-Much more likely	158	25

N: 623

	Count	Percent
Less Likely (1 & 2)	82	14
More Likely (4 & 5)	336	54

Mean Score: 3.6

Q21: The State of Utah currently receives approximately \$3.5 billion in federal funding annually to assist in providing services in the state. This comprises nearly 27 of the State Government budget. The sectors currently receiving the largest amount of Federal funding include: Health Care, Transportation, and Education

Do you support the state of Utah accepting federal assistance in each of these sectors?

### Q21.1: Health Care

	Count	Percent
1-Strongly oppose	46	7
2-Somewhat oppose	50	8
3-Neither support nor oppose	84	13
4-Somewhat support	190	31
5-Strongly support	252	41

N: 623

	Count	Percent
Oppose (1 & 2)	96	15
Support (4 & 5)	442	72

Mean Score: 3.9

### Q21.2: Transportation

	Count	Percent
Strongly oppose	45	7
Somewhat oppose	40	6
Neither support nor oppose	90	14
Somewhat support	215	35
Strongly support	233	38

N: 623

	Count	Percent
Oppose (1 & 2)	85	13
Support (4 & 5)	448	73

Mean Score: 3.9

### Q21.3: Education

	Count	Percent
Strongly oppose	68	11
Somewhat oppose	29	5
Neither support nor oppose	40	6
Somewhat support	143	23
Strongly support	342	55

N: 623

	Count	Percent
Oppose (1 & 2)	97	16
Support (4 & 5)	485	78

Mean Score: 4.0

Q22: Using a scale of 1 to 5 with 1 meaning “not at all interested” and 5 meaning “very interested,” how interested are you in the issues of healthcare coverage and Medicaid Expansion in the State of Utah?

	Count	Percent
1 - Not at all interested	24	4
2	31	5
3	138	22
4	162	26
5 - Very interested	266	43

N: 623

	Count	Percent
Interested (4 & 5)	428	69
Not Interested (1 & 2)	55	9

Mean Score: 3.99

Q23: From which of the following sources are you most likely to seek information with regards to healthcare policy in the State of Utah?

	Count	Percent
Local Media	291	47
Healthcare providers	285	46
Utah Department of Health	256	41
Neighbors or friends	248	40
Health insurance companies	203	33
Utah State Legislature	164	26
Utah Insurance Department	155	25
Utah Governor’s Office	154	25
Utah Hospital Association	119	19
Other, please specify:	78	13

N: 623

### Q24: What is your gender?

	Count	Percent
Male	312	50
Female	310	50

N: 623

### Q25: Which of the following age categories best describes you?

	Count	Percent
18-24	11	2
25-34	68	11
35-44	109	17
45-54	105	17
55-64	141	23
65 or older	185	30

N: 622

### Q26: Including yourself, how many people live within your household?

	Count	Percent
1 person	61	10
2 people	229	37
3 people	94	15
4 people	90	14
5 people	76	12
6 people	33	6
7 people	19	3
8 people	7	1
More than 8 people	12	2

N: 622



Q27: What is the highest level of education you have completed?

	Count	Percent
High school graduate or less	78	13
Some college	161	26
Associate degree or Technical degree/certificate	92	15
Bachelor's degree	182	30
Graduate or professional degree	106	17

N: 619

Q28: What is your approximate annual household income?

	Count	Percent
Less than \$4,000	10	2
\$4,000 to less than \$15,000	16	3
\$15,000 to less than \$20,000	19	11
\$20,000 to less than \$35,000	66	17
\$35,000 to less than \$50,000	102	18
\$50,000 to less than \$80,000	171	30
\$80,000 to less than \$100,000	75	13
\$100,000 to less than \$150,000	74	13
\$150,000 or more	46	8

N: 579

Q29: Which of the following best describes your ethnicity?

	Count	Percent
White or Caucasian	575	93
Hispanic or Latino	12	2
American Indian or Alaska Native	7	1
Native Hawaiian or Other Pacific Islander	4	<1
Asian	3	<1
Black or African-American	2	<1
Other	11	2

N: 616

Q30: Is your religious preference...

	Count	Percent
LDS	393	65
None	89	15
Catholic	43	7
Protestant	29	5
Jewish	1	<1
Muslim	1	<1
Other	50	8

N: 606

Q31: How active are you in your religion?

	Count	Percent
Not at all active	25	5
Not very active	38	8
Very active	340	69

N: 489

Q32: In politics today, which of the following best describes your political affiliation?

	Count	Percent
Republican	267	45
Independent	176	30
Democrat	105	18
Other party (Please specify)	50	8

N: 598

### Q33: Do you consider yourself politically liberal or conservative?

	Count	Percent
Very conservative	152	25
Somewhat conservative	187	31
Moderate	116	19
Somewhat liberal	101	17
Very liberal	46	8

N: 604

### County of Residence

County	County	County	Percent
Beaver	<1	Iron	2
Box Elder	3	Juab	<1
Cache	2	Kane	<1
Carbon	2	Millard	<1
Daggett	<1	Morgan	<1
Davis	8	Piute	<1
Duchesne	<1	Rich	<1
Emery	<1	Salt Lake	36
Garfield	<1	San Juan	1
Grand	<1	Sanpete	2
		Sevier	1
		Summit	4
		Tooele	3
		Uintah	2
		Utah	15
		Wasatch	1
		Washington	6
		Wayne	<1
		Weber	6

N: 506