

Embargoed until May 18, 2016, 3 p.m. CST

The TMC Health Policy Institute Consumer Health Report 2016: Second annual survey 5 states

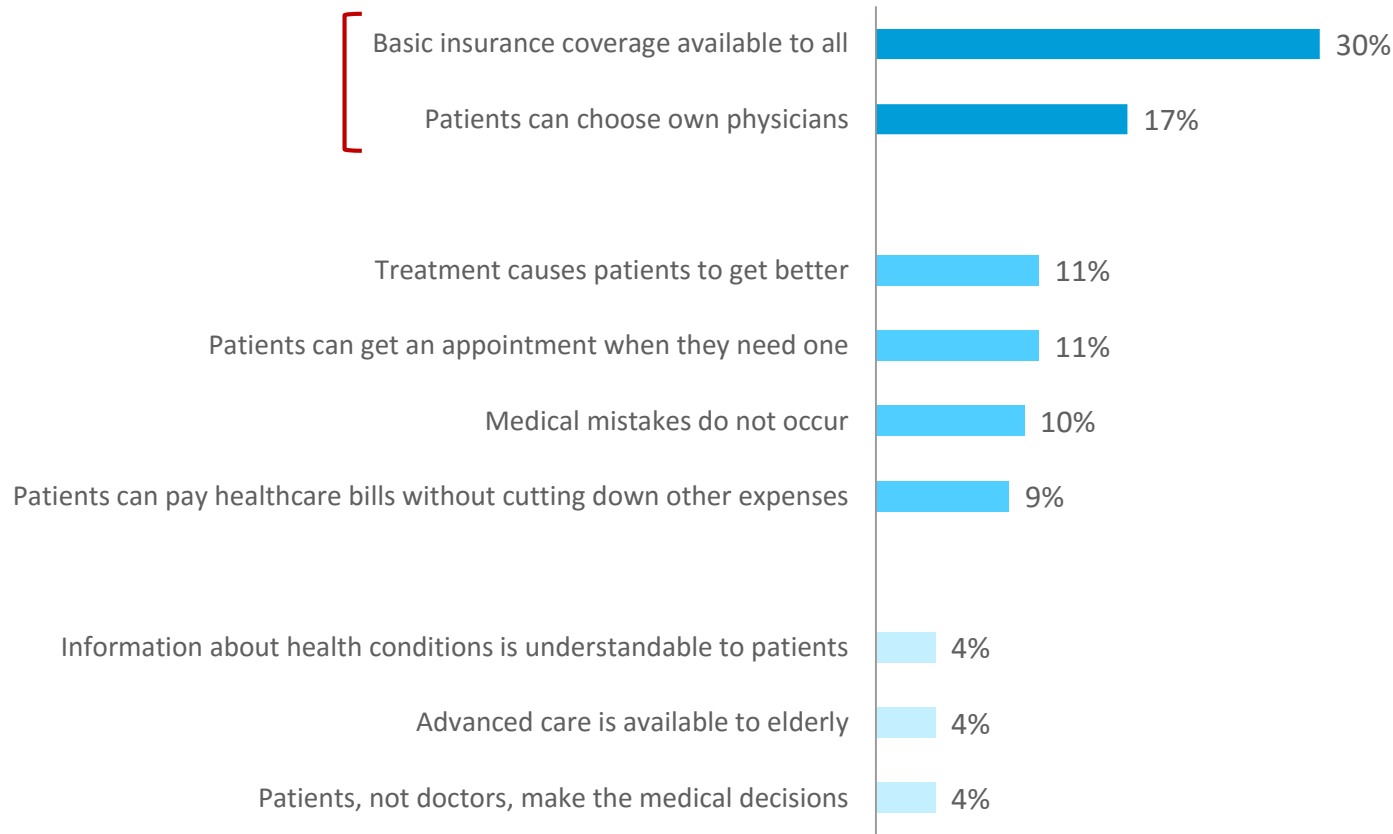
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Coverage and choice are among most important health system characteristics: similar across states

Percent Ranking First in Importance for Healthcare System Characteristics

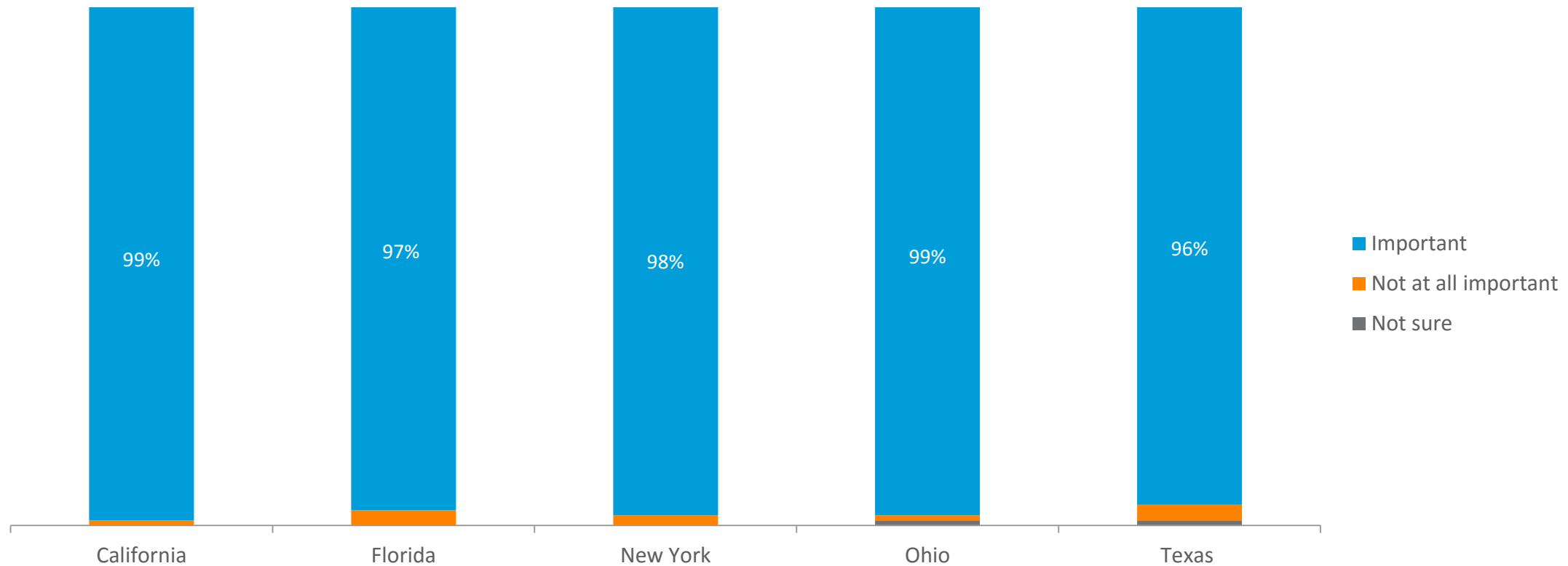


BASE: ALL QUALIFIED RESPONDENTS

Q310 Below are 9 statements describing a healthcare system. Please rank these where 1 is the most important characteristic and 9 is the least important characteristic of a healthcare system.

Healthcare consumers value having health insurance

Importance of Having Health Insurance for you and your family



BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q100 (Q205) How important is having health insurance to you and your family?

Across all states, a candidate's position on health issues would count in their vote

Political Candidate's View Would Count Somewhat or a Lot in Voting Decision

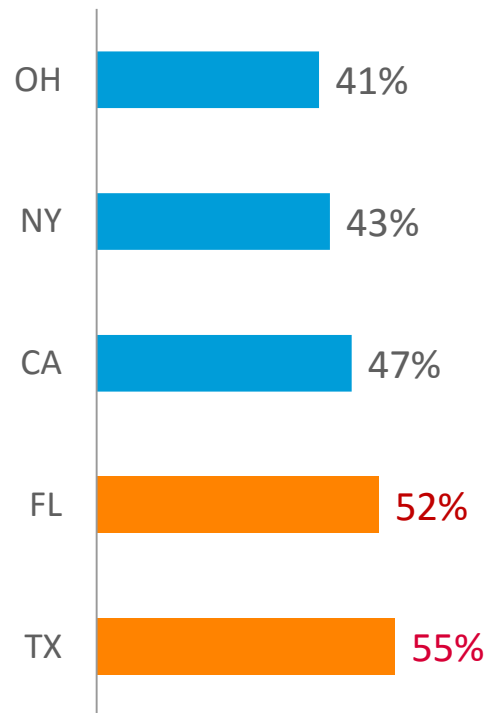
	TOTAL	California	Florida	New York	Ohio	Texas
The government should provide health insurance coverage for all US citizens	70%	71%	70%	76%	64%	64%

BASE: WOULD FIND MENU LABELING AT LEAST SOMEWHAT HELPFUL (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q465n Imagine that a candidate for political office in your state held each of the following views. How much would that count in your decision to vote for him or her?

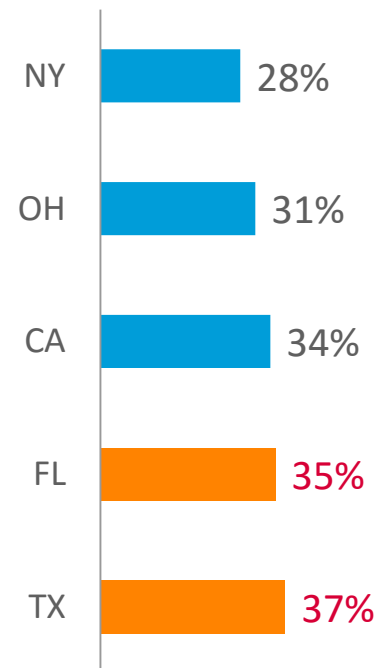
Quality of care varies by state

Higher in FL and TX

Worry about quality of healthcare



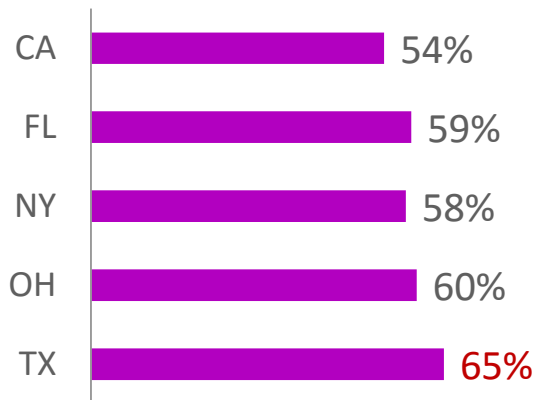
Quality is worse than two years ago



Consumers are paying more out-of-pocket; some are cutting down elsewhere to afford care (especially TX)

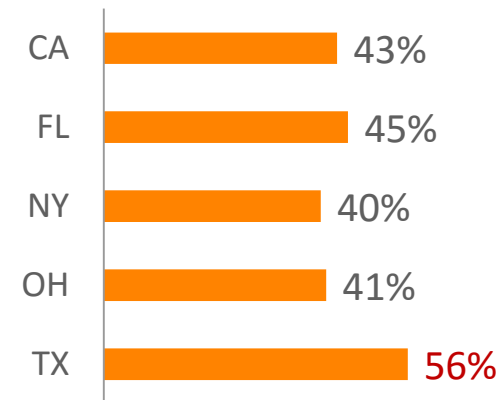
“I’m paying more out of pocket for my healthcare this year than two years ago”

58%



“I have to cut down on other expenses to pay for healthcare”

45%



79% among those who purchase their own coverage from Exchange or insurance company

Percent strongly/somewhat agree

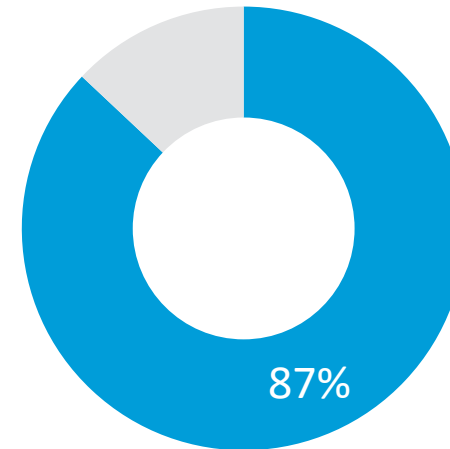
Cost is the main barrier for uninsured

Only small percentage of uninsured maintain they do not have insurance because they don't need it

Main Reason Uninsured

	TOTAL	California	Florida	New York	Ohio	Texas
Too Expensive: Main Reason	54%	52%	63%	39%	52%	57%
Don't need it: Main Reason	11%	12%	1%	11%	8%	17%

87% of uninsured who visited the health exchange marketplace could not afford coverage



Those who say they "don't need it" tend to be younger and slightly more likely to say their health is "excellent."

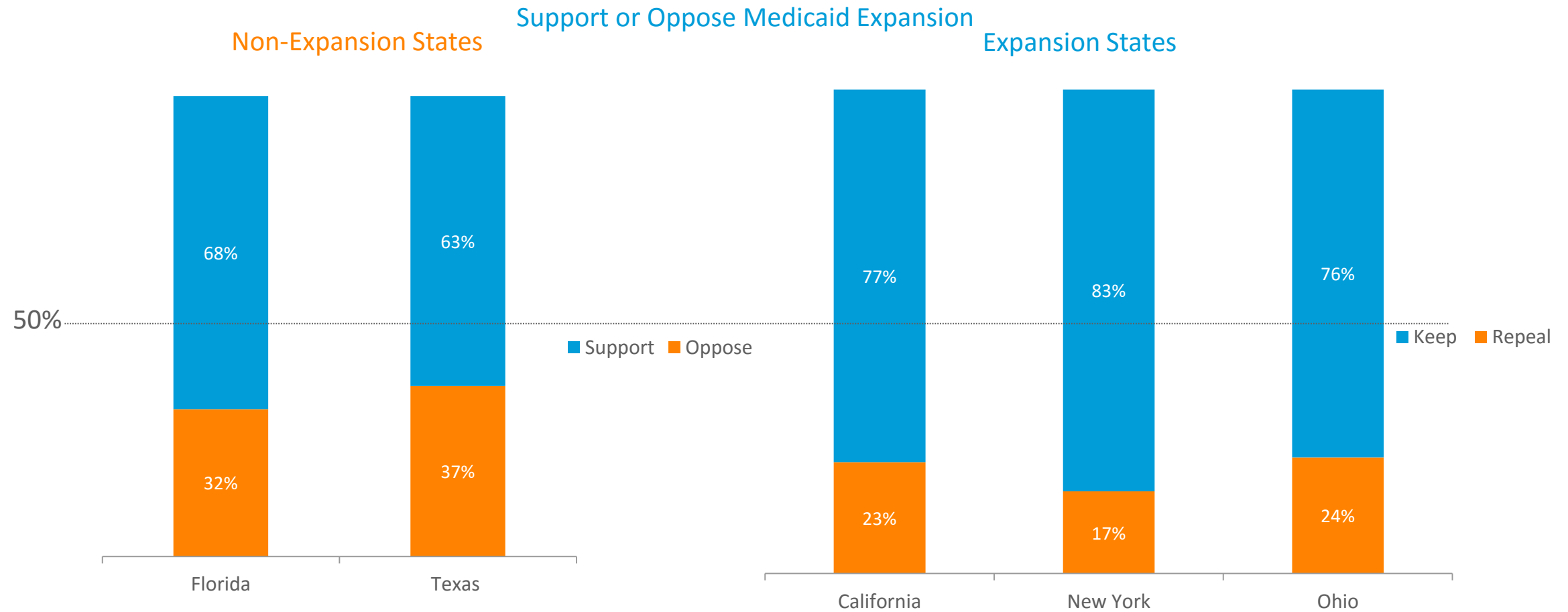
Across all states, a candidate's position on health issues would count in their vote

Political Candidate's View Would Count Somewhat or a Lot in Voting Decision

	California	Florida	New York	Ohio	Texas
Manage healthcare costs	85%	86%	85%	85%	82%

BASE: WOULD FIND MENU LABELING AT LEAST SOMEWHAT HELPFUL (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q465n Imagine that a candidate for political office in your state held each of the following views. How much would that count in your decision to vote for him or her?

Medicaid expansion viewed favorably across states; Almost 2/3's of Texans support



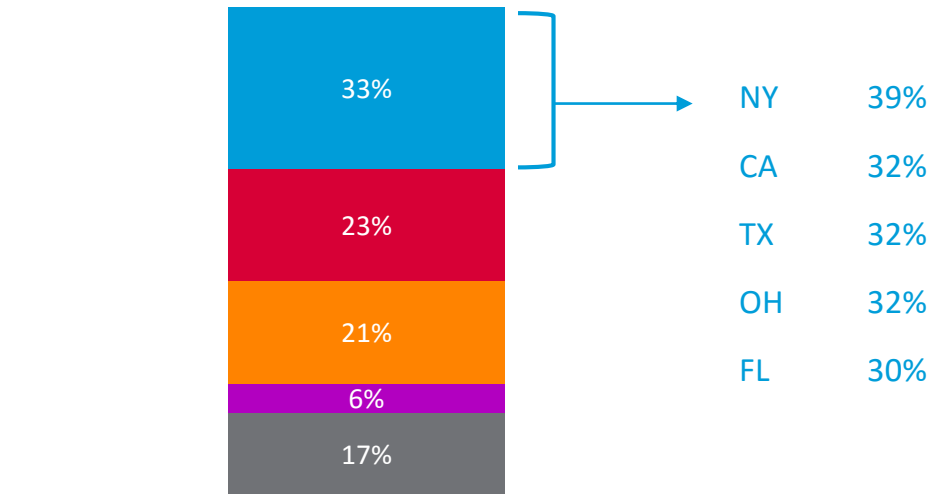
BASE: FLORIDA AND TEXAS RESPONDENTS Q120n As you may know, [state] did not expand its health insurance program (Medicaid) under the Affordable Care Act to cover more low-income uninsured adults. How much do you support or oppose the expansion of state health insurance to cover more low-income adults in [state]? (Florida n=1000, Texas n=1002)

BASE: NEW YORK, CALIFORNIA, AND OHIO RESPONDENTS Q125n As you may know, [state] expanded its health insurance program (Medicaid) under the Affordable Care Act to cover more low-income uninsured adults. Should [state] keep or repeal (terminate) this expansion to low-income adults? (California n=1004, New York n=1000, Ohio n=1001)

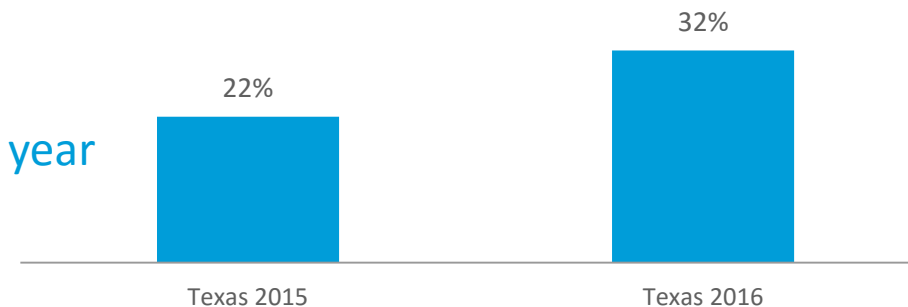
Expanding Medicaid is top choice for reaching universal coverage

How Government Should Expand Health Insurance to All US Citizens

- Expand Medicaid
- It's not the government's responsibility
- Give people a certain amount of money to buy own
- Do not care how
- Not sure



In Texas, nearly a 50% increase since last year



Across all states, a candidate's position on health issues would count in their vote

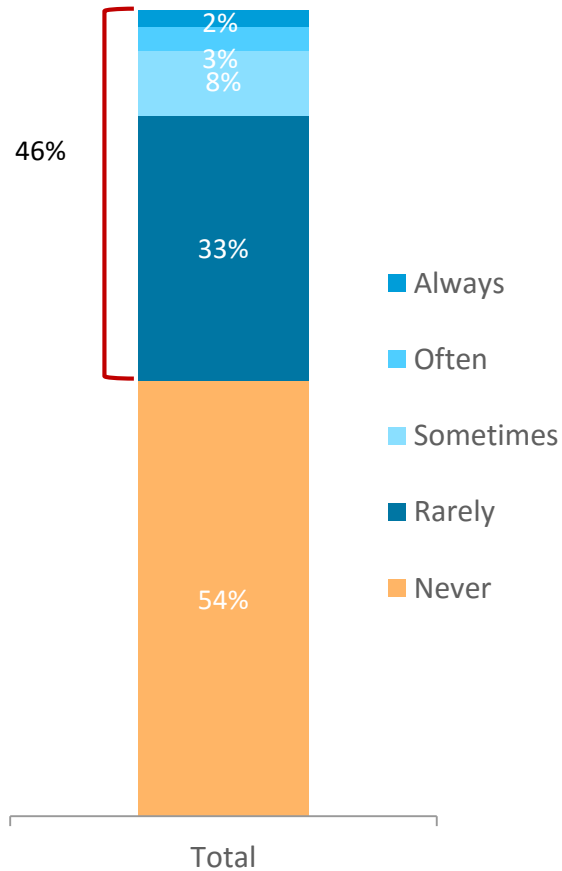
Political Candidate's View Would Count Somewhat or a Lot in Voting Decision

	TOTAL	California	Florida	New York	Ohio	Texas
Expand state health insurance (Medicaid) to cover more low income adults	69%	70%	71%	72%	64%	67%

BASE: WOULD FIND MENU LABELING AT LEAST SOMEWHAT HELPFUL (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q465n Imagine that a candidate for political office in your state held each of the following views. How much would that count in your decision to vote for him or her?

About half of people have used the Emergency Department for non-emergencies; the doctor's office was closed

How Often Use Emergency Dept
When Not True Emergency



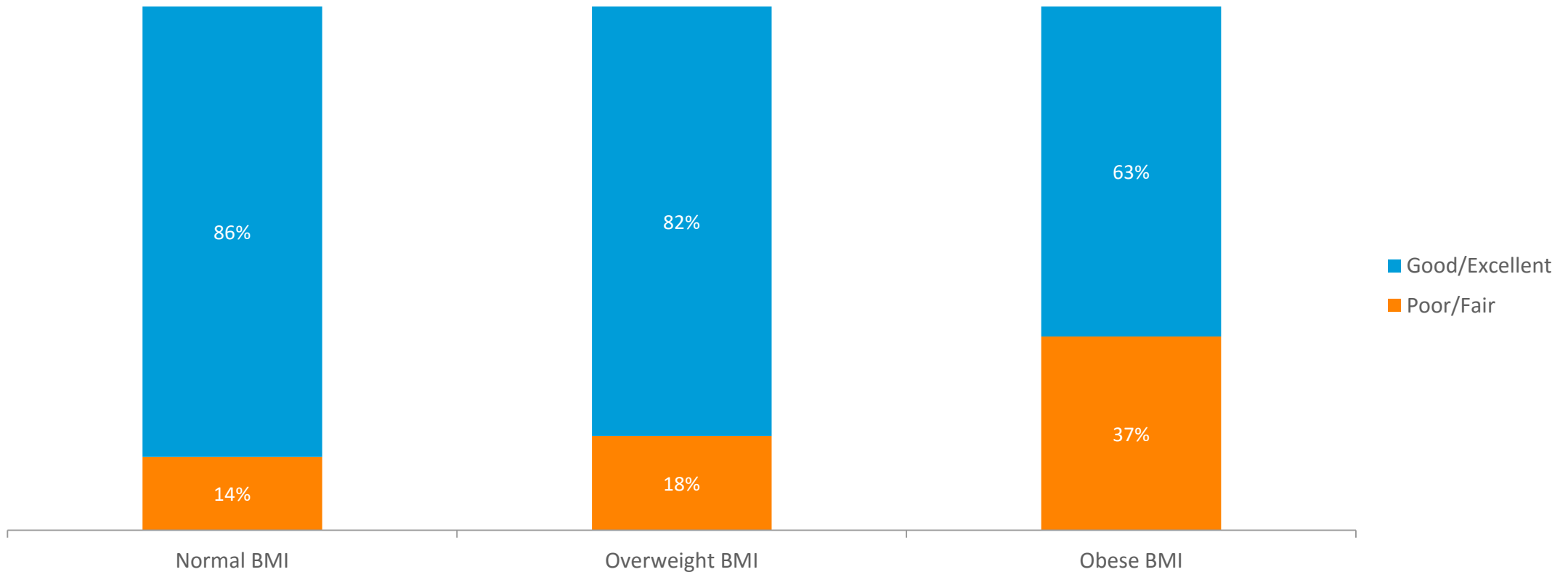
Why Go To ED for Non-Emergency

Doctor's office closed	45%
Doctor could not see me that day	18%
ER was convenient	19%
Do not have my own doctor to see	10%
Other	22%

BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q555N How often do you use the emergency room for yourself or your child, even though it is not a true emergency?

86% of Normal BMI say they are in good-to-excellent health... SO DO MOST WHO ARE OVERWEIGHT OR OBESE

Self-Described Health Status



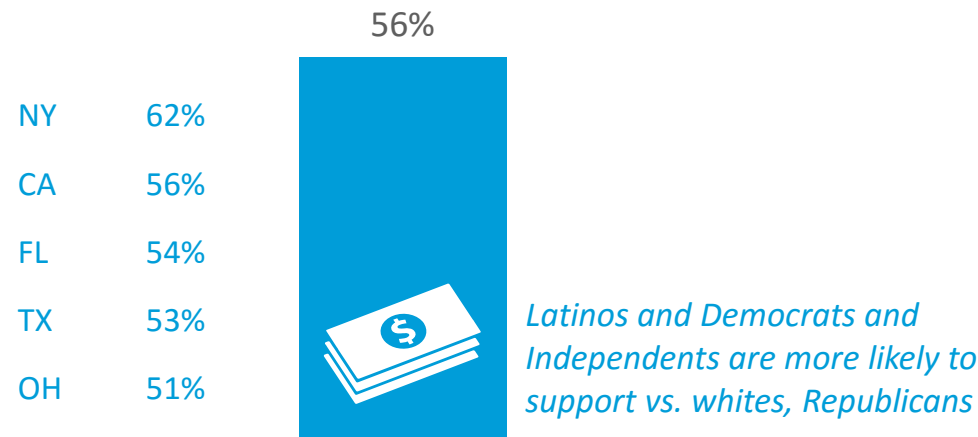
BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q505(Q455). Overall, how would you describe your health?

More than 1 in 2 across all states support making foods that lead to obesity more expensive



“Foods that lead to obesity should be more expensive”

Percent strongly/somewhat agree



How much of a tax?

Sugared drinks



44% support a tax of 50% or more

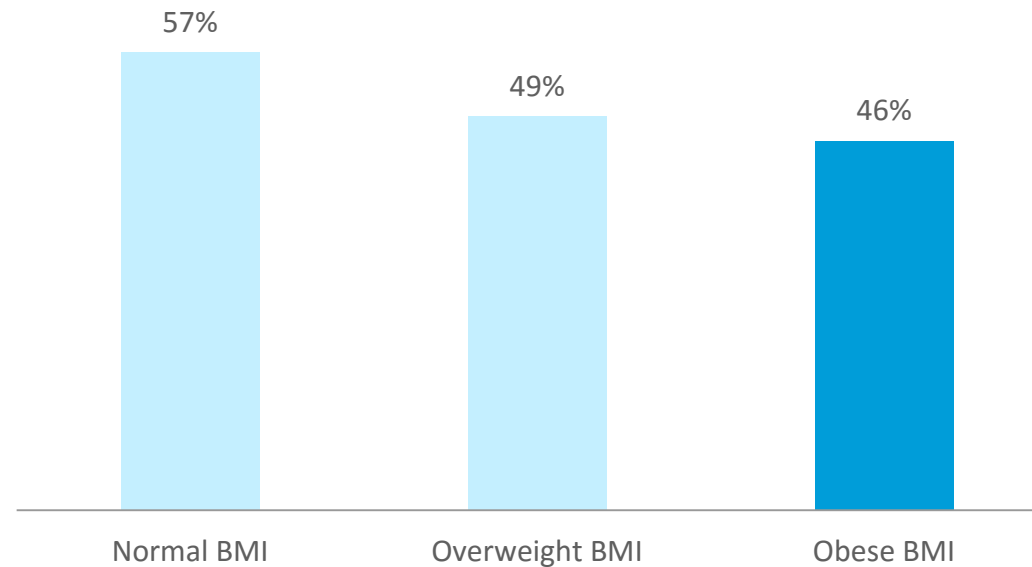
25% or more tax

Unhealthy meals



Overweight and obese consumers are more skeptical that soda tax would help

“Taxes on sugary drinks could help people make healthier choices”



BASE: ALL QUALIFIED RESPONDENTS (Total n=5007)
Q440 (Q235) How much do you agree or disagree with each of the statements below

About 2/3's are in favor of red-yellow-green food labeling

	TOTAL	California	Florida	New York	Ohio	Texas
Symbols, such as red, green, and yellow traffic lights to show the healthiest choices	64%	63%	64%	66%	65%	62%

...and about the same number would support a candidate in favor of menu labeling.

BASE: WOULD FIND MENU LABELING AT LEAST SOMEWHAT HELPFUL (Total n=4483, California n=901, Florida n=884, New York n=913, Ohio n=893, Texas n=892)
Q460n How helpful would you find each of the following types of menu information for maintaining healthy eating habits?



Key State Findings: Texas

Cost



More consumers in Texas than any other state surveyed are:

- Paying more out of pocket for healthcare vs. 2 years ago (65%)
- Cutting down on other expenses to pay for healthcare (56%)

Quality ★ ★ ★ ☆

- Worried about quality (55%)
- Say quality has declined in the last 2 years (37%)

Coverage



- 96% of Texans say having health insurance coverage is important

“Improving access”



- Nearly 2 in 3 Texans would support Medicaid expansion in Texas (63%)
- Medicaid expansion is the top way Texans would expand coverage; this increased 50% from last year

A decorative graphic on the left side of the slide, featuring a series of overlapping, curved lines in various colors (blue, red, green, yellow) that create a sense of depth and movement. Three colored dots (blue, red, green) are placed along these lines.

APPENDIX

Politics

Across all states, a candidate's position on health issues would count in their vote

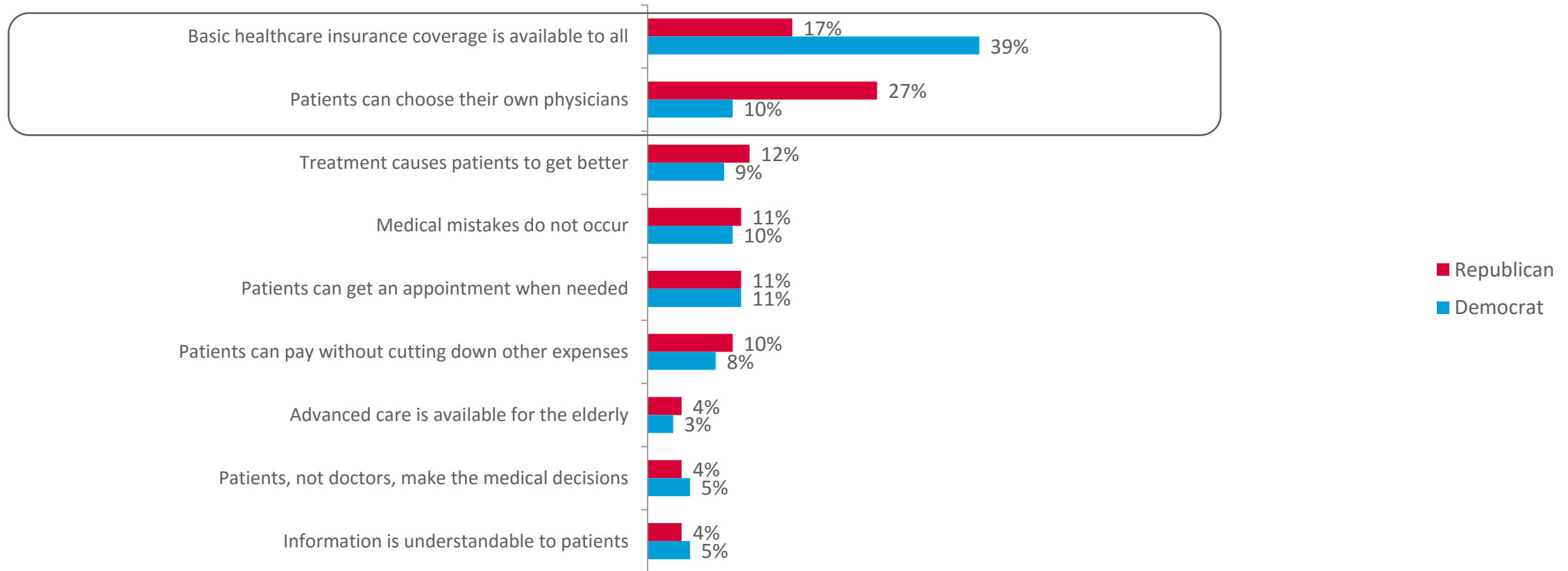
Political Candidate's View Would Count Somewhat or a Lot in Voting Decision

	California	Florida	New York	Ohio	Texas
Manage healthcare costs	85%	86%	85%	85%	82%
Expand state health insurance (Medicaid) to cover more low income adults	70%	71%	72%	64%	67%
The government should provide health insurance coverage for all US citizens	71%	70%	76%	64%	64%
Menus should be labeled with nutritional information	61%	62%	63%	56%	56%

BASE: WOULD FIND MENU LABELING AT LEAST SOMEWHAT HELPFUL (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q465n Imagine that a candidate for political office in your state held each of the following views. How much would that count in your decision to vote for him or her?

Democrats value coverage, Republicans choice of physician

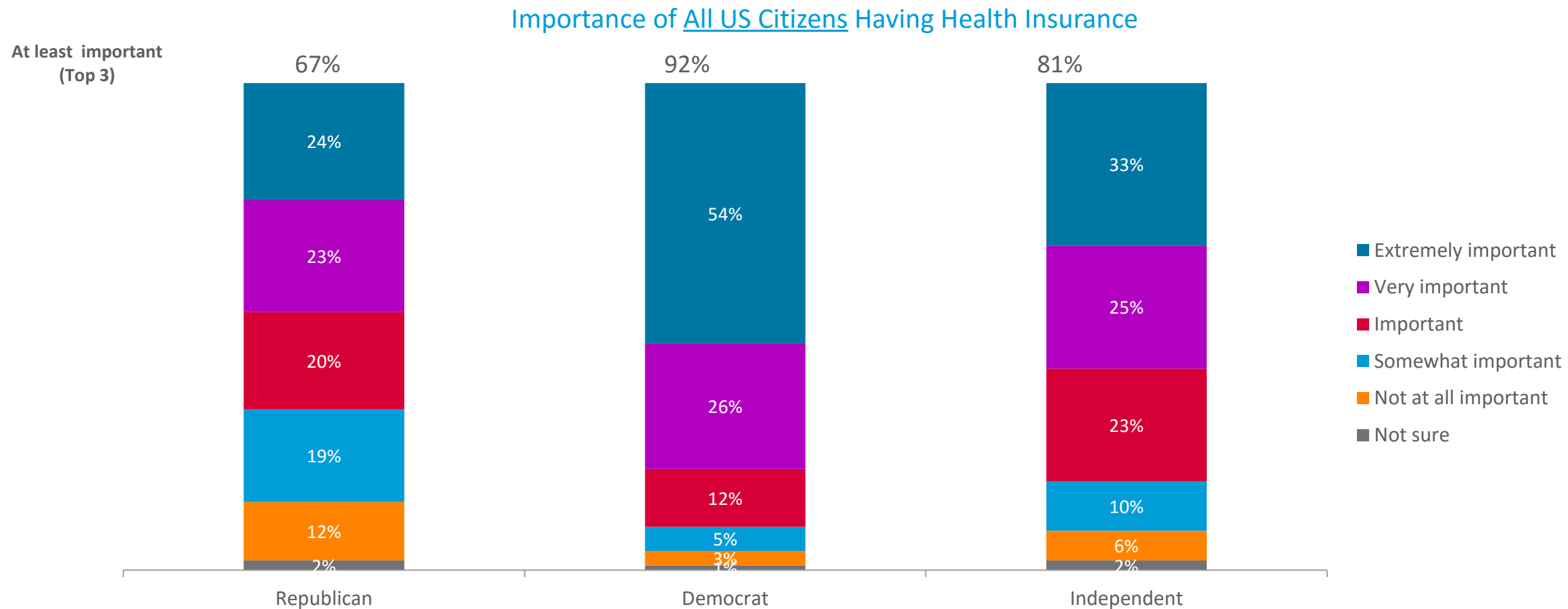
Percent Ranking **First** in Importance for Healthcare System Characteristics



BASE: ALL QUALIFIED RESPONDENTS

Q310 Below are 9 statements describing a healthcare system. Please rank these where 1 is the most important characteristic and 9 is the least important characteristic of a healthcare system.

Two-thirds of Republicans and over 9 in 10 Democrats say coverage for all US citizens is important

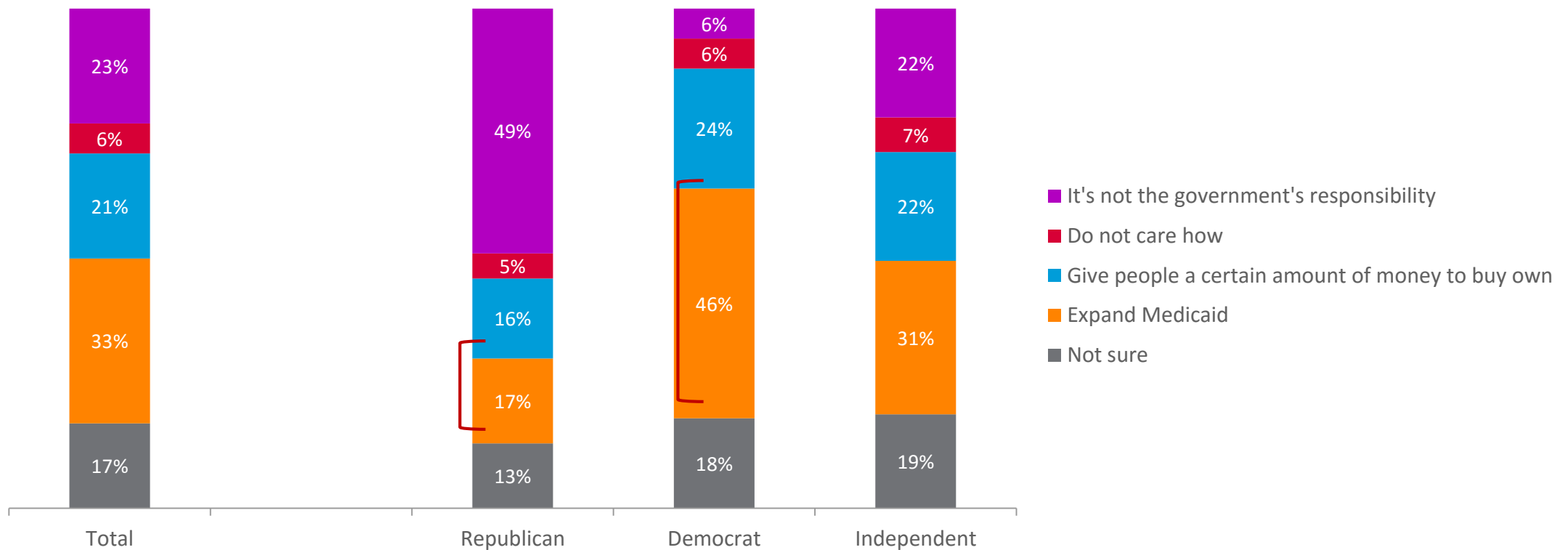


BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q105 (Q705) How important is it to you that all US citizens have health insurance?

Support for Medicaid expansion is partisan

Democrats significantly more likely to support; nearly half of Republicans say it is not the government's responsibility to expand coverage

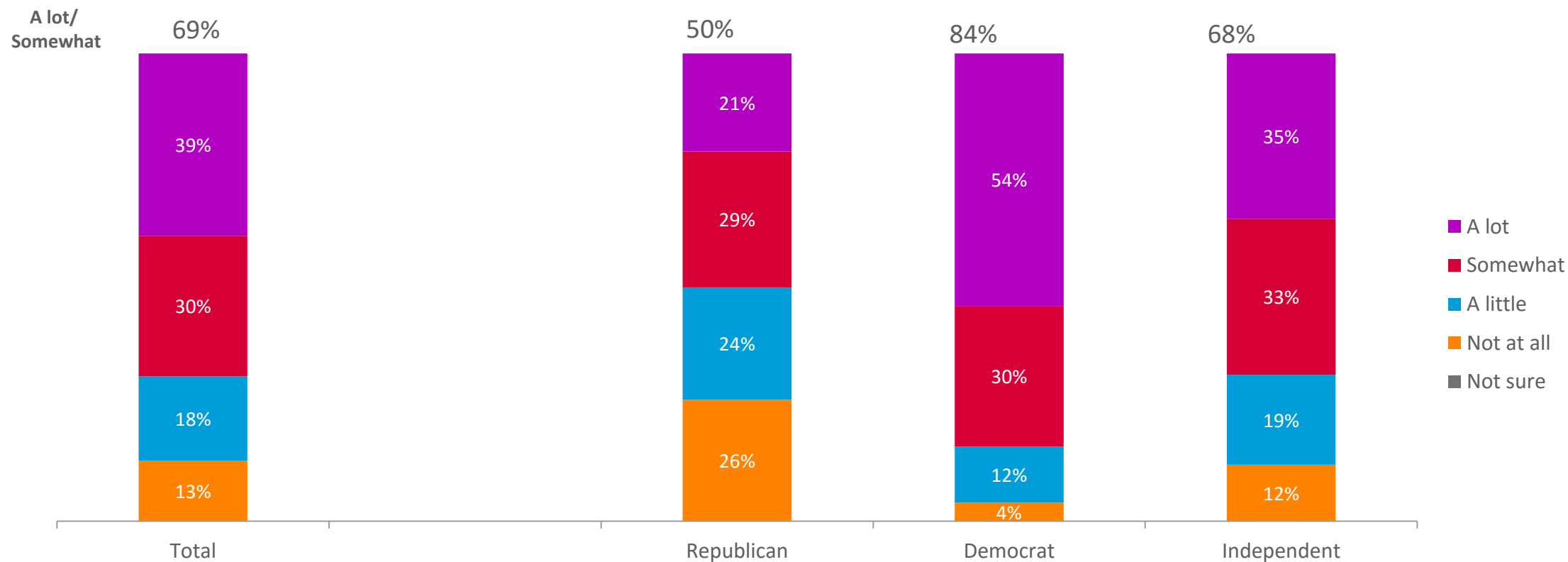
How Government Should Expand Health Insurance to All US Citizens



BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q110 (Q715) If the government could expand health insurance to all US citizens, which of the following best describes how you would prefer this be done?

Half of Republicans say a political candidate's position to expand Medicaid would count at least somewhat; 84% of Democrats

How Much Political Candidate's View Would Count in Voting Decision
-Expand state health insurance (Medicaid) to cover more low income adults-

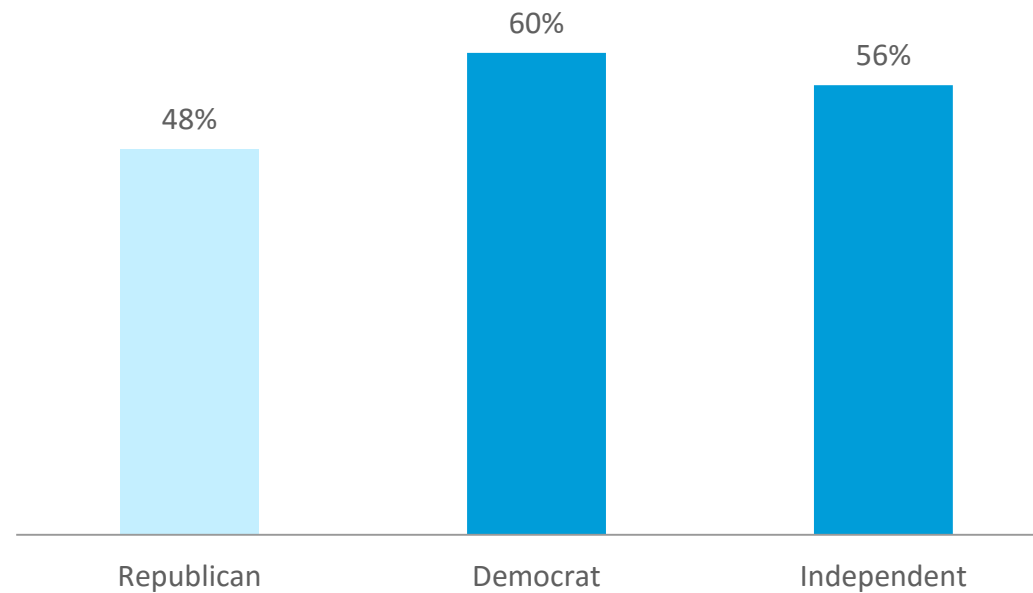


BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)

Q465n_5. Imagine that a candidate for political office in your state held each of the following views. How much would that count in your decision to vote for him or her? Expand state health insurance (Medicaid) to cover more low income adults -

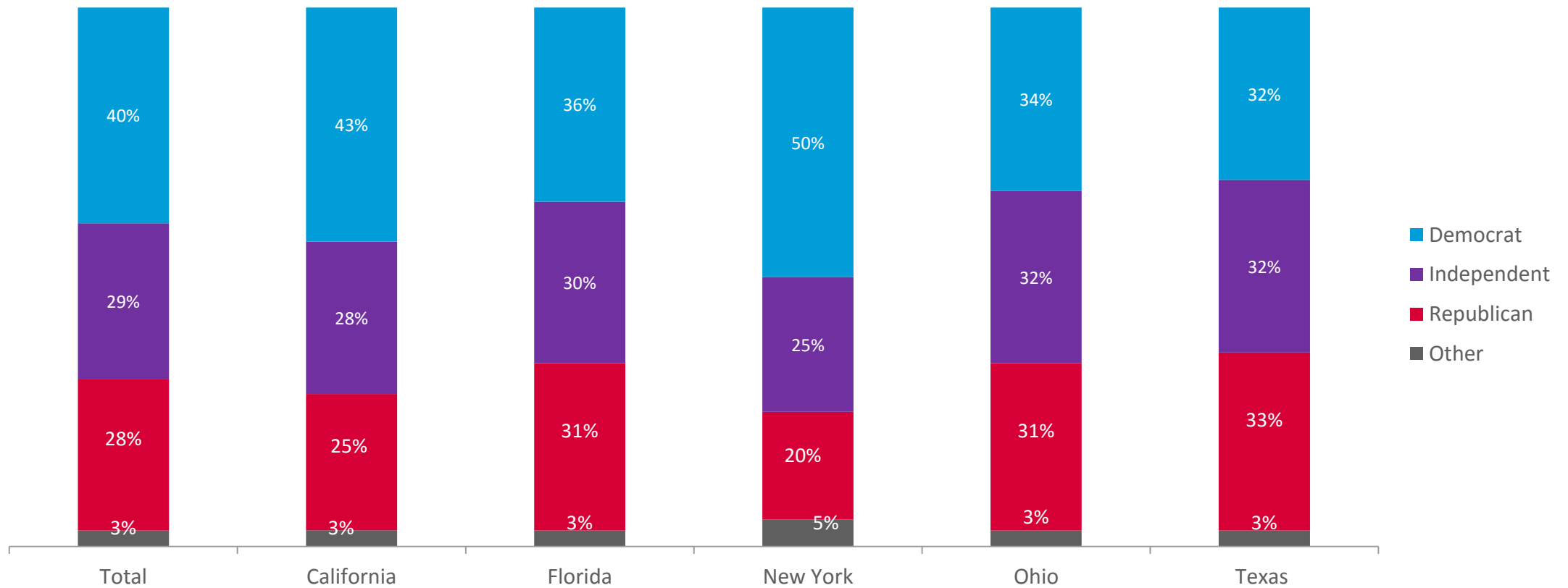
Democrats more likely to support increasing the price of foods that lead to obesity than Republicans

“Foods that lead to obesity (e.g., sugary drinks, high calorie meals) should be more expensive ”



BASE: ALL QUALIFIED RESPONDENTS (Total n=5007)
Q440 (Q235) How much do you agree or disagree with each of the statements below

Party Affiliation: Texas is 1/3, 1/3, 1/3



BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q905 Generally speaking, do you usually think of yourself as a Republican, Democrat, Independent, or something else?

The Uninsured

Key Findings: Uninsured

Attitudes



- 85% say it is important to have health insurance
- 81% say it is important that all US citizens have health insurance
- Like among insured, Medicaid is top choice to expand health insurance to all US citizens (38% among uninsured, 32% among insured)
- 69% of uninsured in non-expansion states (TX, FL) support Medicaid expansion (on par with insured, 65%)

Quality



- 2 in 3 (68%) of uninsured worry about quality of healthcare (vs. 46% insured)
- Half (51%) say quality is worse than 2 years ago (vs. 32% insured)

Costs



- Cost is the main barrier for uninsured; 54% say it is the main reason uninsured (And 77% say it is main or other reason)
- 87% of uninsured who visited the health exchange marketplace could not afford coverage

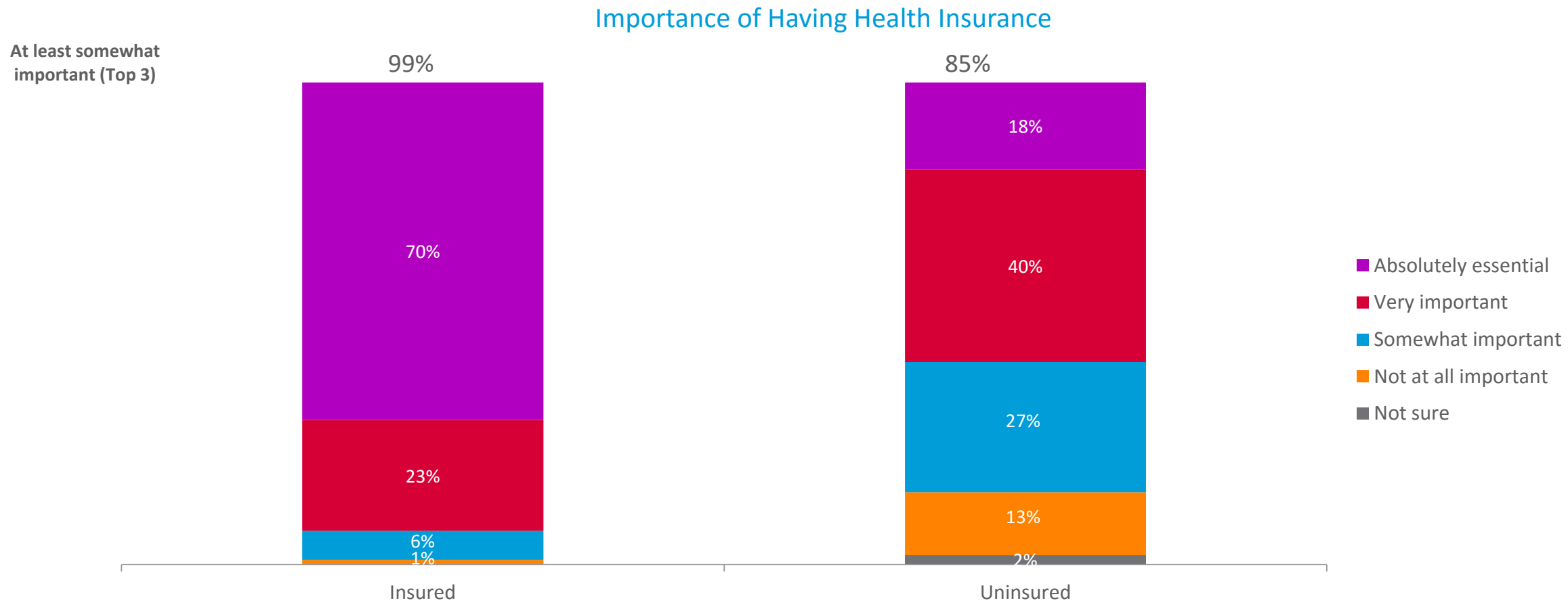
Access



- Only 29% of uninsured have regular PCP (vs. 85% insured)
- Almost 1 in 5 (18%) turn to the ER first for primary care (vs. 3% of insured)

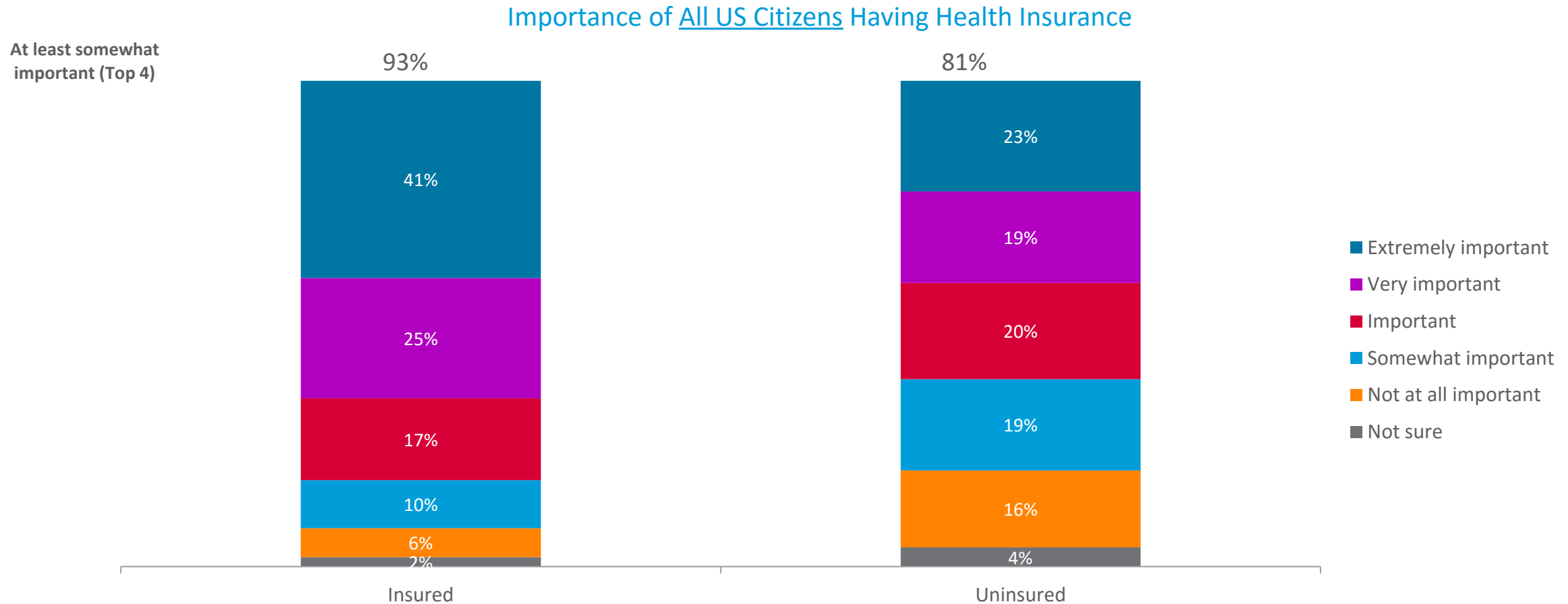
Among the insured, 7 in 10 deem insurance “absolutely essential”

Uninsured may get by without it, but most agree it is important



BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q100 (Q205) How important is having health insurance to you and your family?

Insured are more likely to say coverage for all US citizens is important



BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q105 (Q705) How important is it to you that all US citizens have health insurance?

Cost is the main barrier to insurance for uninsured

Main Reason Do Not Have Health Insurance

	TOTAL	California	Florida	New York	Ohio	Texas
Too expensive	54%	52%	63%	39%	52%	57%
Not eligible through Medicare or Medicaid	12%	5%	27%	11%	5%	11%
Don't think I need it	11%	12%	1%	11%	8%	17%
Employer does not offer	5%	7%	2%	0%	5%	6%
Not eligible through employer	4%	6%	3%	12%	3%	1%
Don't know how to get it	4%	6%	0%	13%	4%	0%
Not employed	-	-	-	-	-	-
Other	10%	12%	4%	13%	23%	8%

BASE: UNINSURED (Total n=499, California n=79, Florida n=127, New York n=64, Ohio n=51, Texas n=178)
 Q205 Which of the following is the main reason you do not currently have health insurance?

Uninsured consumers across income groups perceive insurance as too expensive (the top reason)

Fewer say this among \$75k-\$100k group, but it's still the top reason

Reason Uninsured (Select Responses)

	TOTAL	Less than \$35k	\$35k to LT \$50k	\$50k to LT \$75k	\$75k to LT \$100k	\$100k or more
Too Expensive: Main Reason	54%	54%	57%	60%	37%	56%
Don't need it: Main Reason	11%	12%	5%	12%	13%	12%

Quality and access is worse for uninsured

Percent Who Worry About Quality of Healthcare

Insured	Uninsured
46%	68%

Have a regular PCP

Insured	Uninsured
85%	29%

Quality is Worse than 2 Years Ago

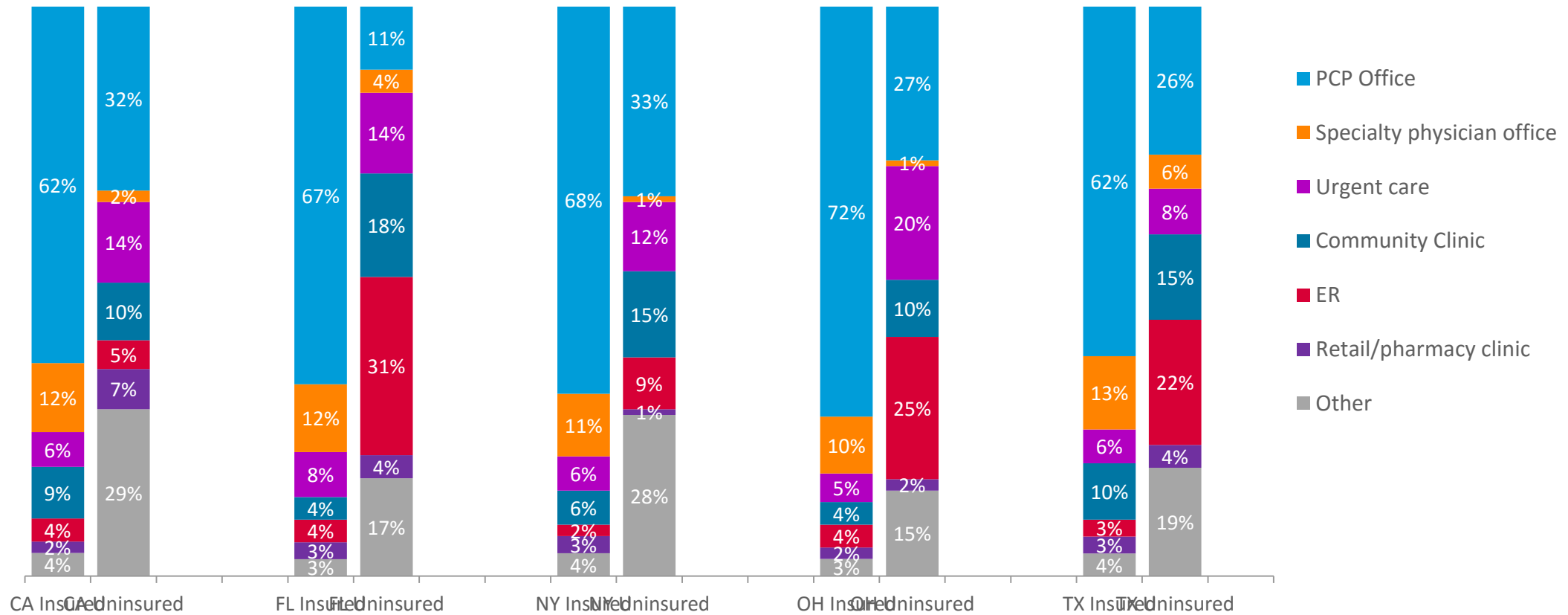
Insured	Uninsured
32%	51%

Use ER for primary care

Insured	Uninsured
3%	18%

Uninsured more likely to use ER in Florida, Ohio, and Texas in particular

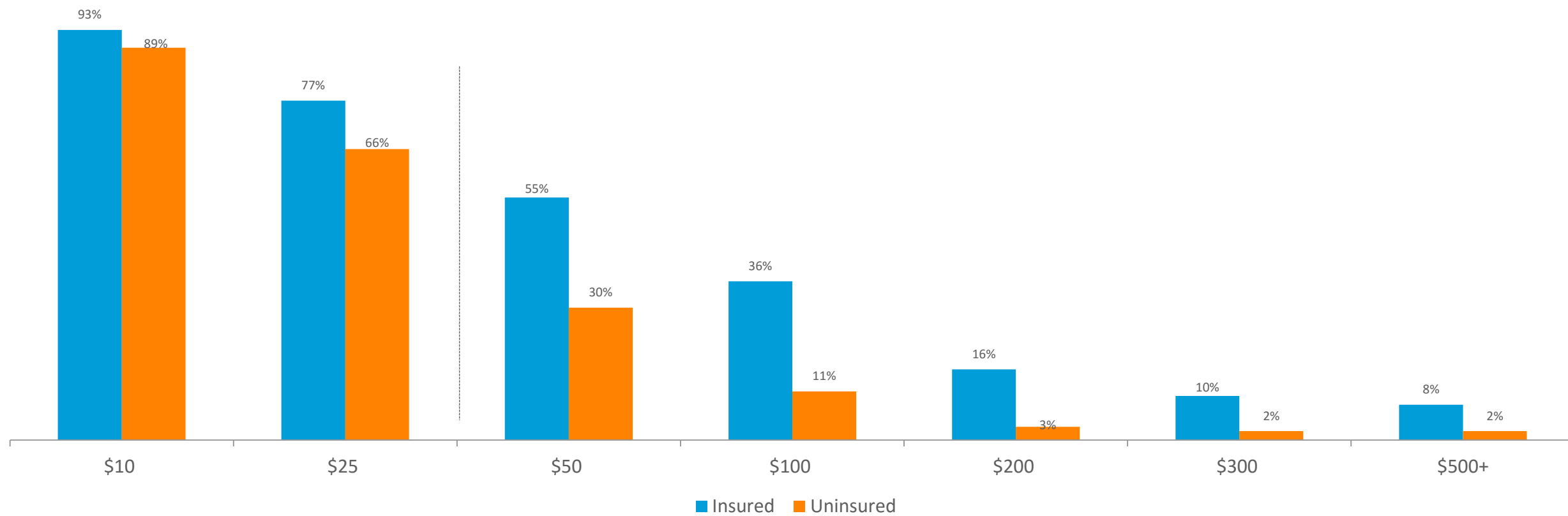
Setting Go To Most Often For Healthcare Needs



BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q550 (Q470) Which setting do you go to most often for your healthcare needs?

Uninsured more limited in what they can pay OOP for care

How Much Can Pay Out-of-Pocket per Month for Healthcare Without Cutting Other Expenses



BASE: ALL QUALIFIED RESPONDENTS (Total n=5007)

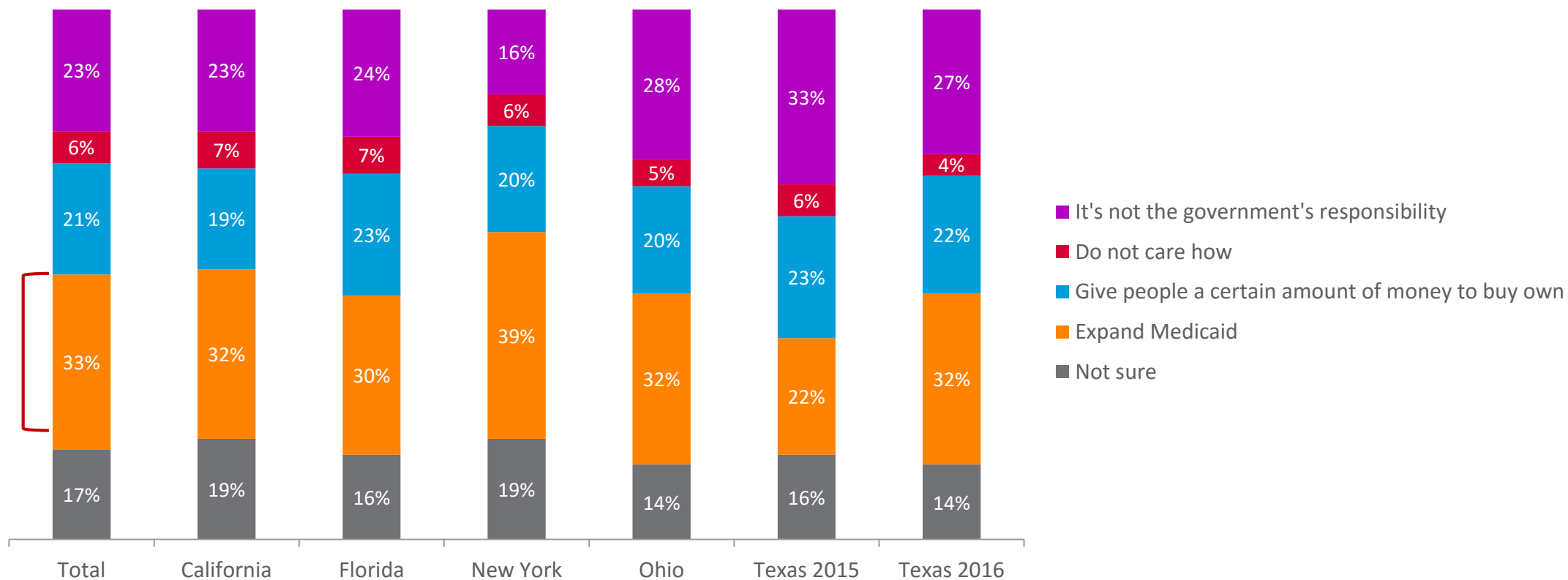
Q315n Now please think about the amount of money you pay out-of-pocket each month for all your and your family's healthcare needs. Would you be able to pay \$[xx] each month out of pocket for your and your family's healthcare needs without cutting down on other expenses?

Coverage

Medicaid is top choice to expand coverage

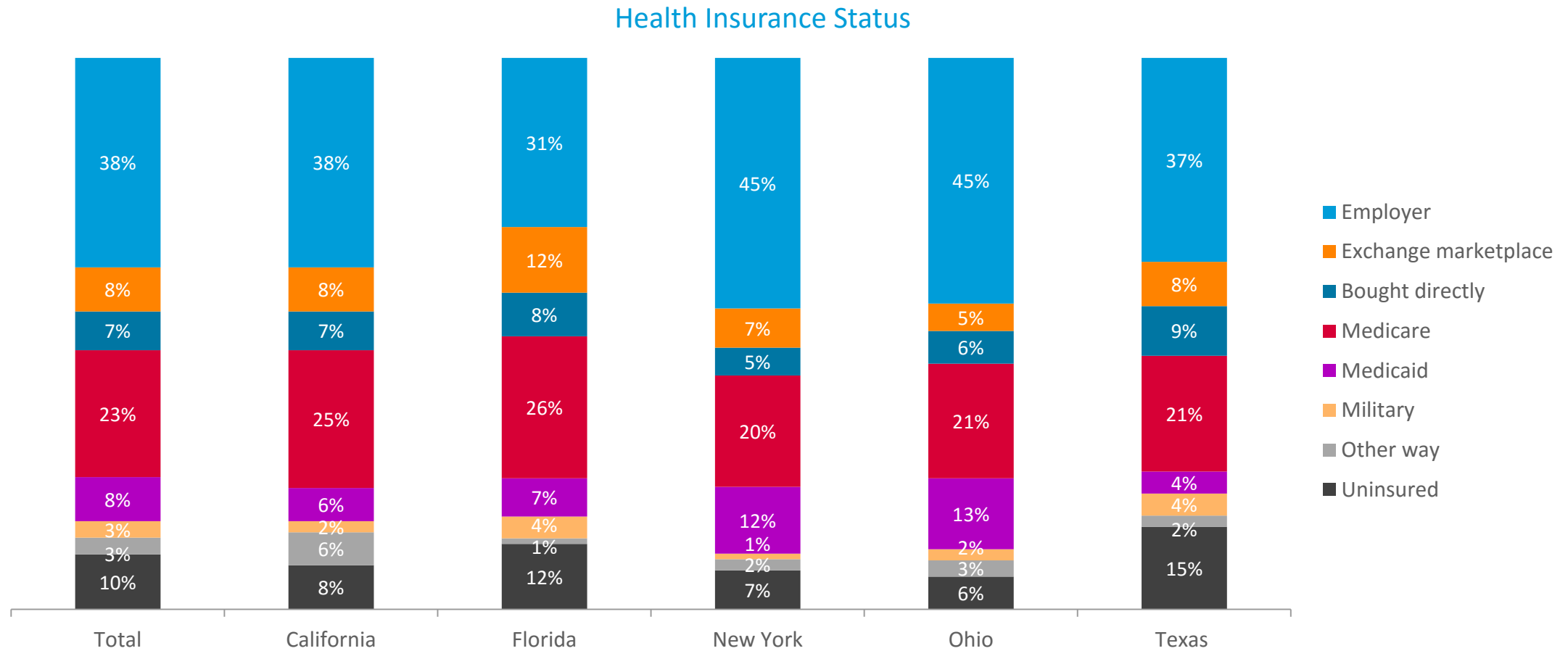
In Texas, more say *expand Medicaid* and fewer say *it is not the government's responsibility* vs. last year

How Government Should Expand Health Insurance to All US Citizens



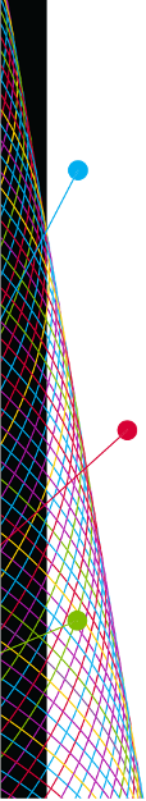
BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
 Q110 (Q715) If the government could expand health insurance to all US citizens, which of the following best describes how you would prefer this be done?

Employer coverage is most common, followed by Medicare



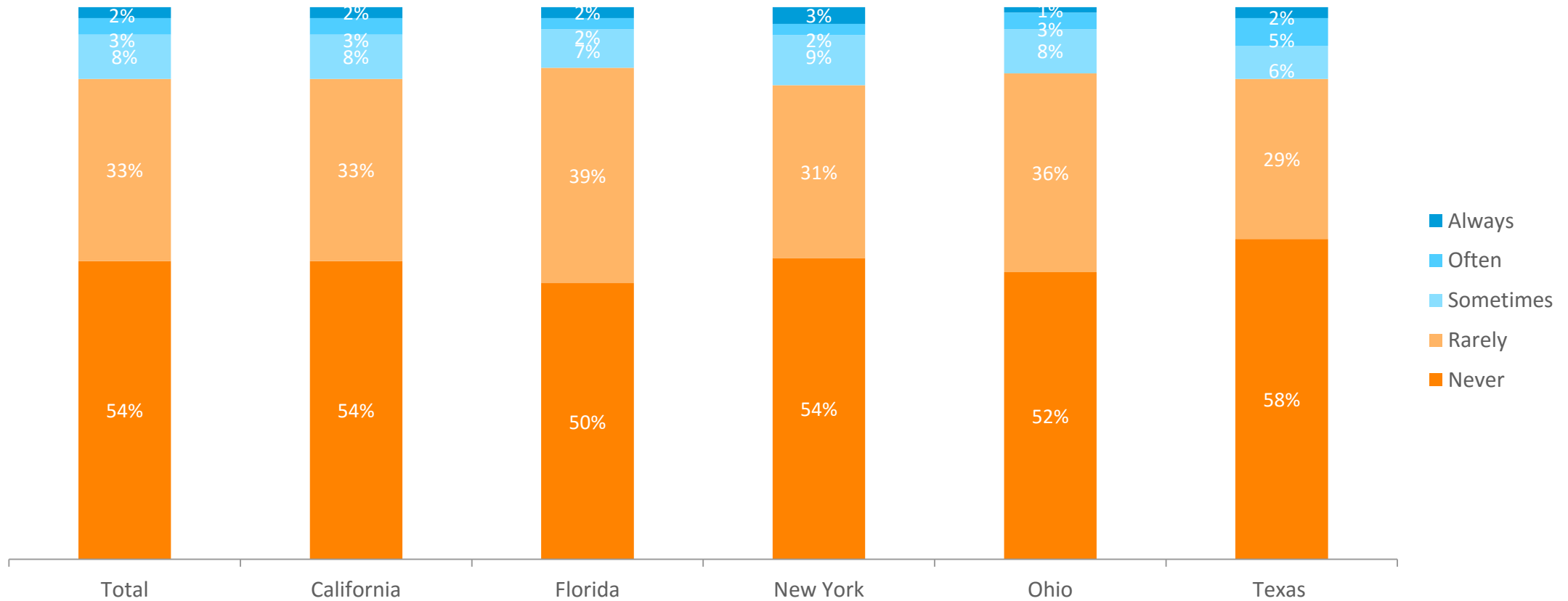
BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
 Q200 Which one of the following best describes how you receive your primary health insurance coverage?

Access



About half of people have used the Emergency Department for non-emergencies.

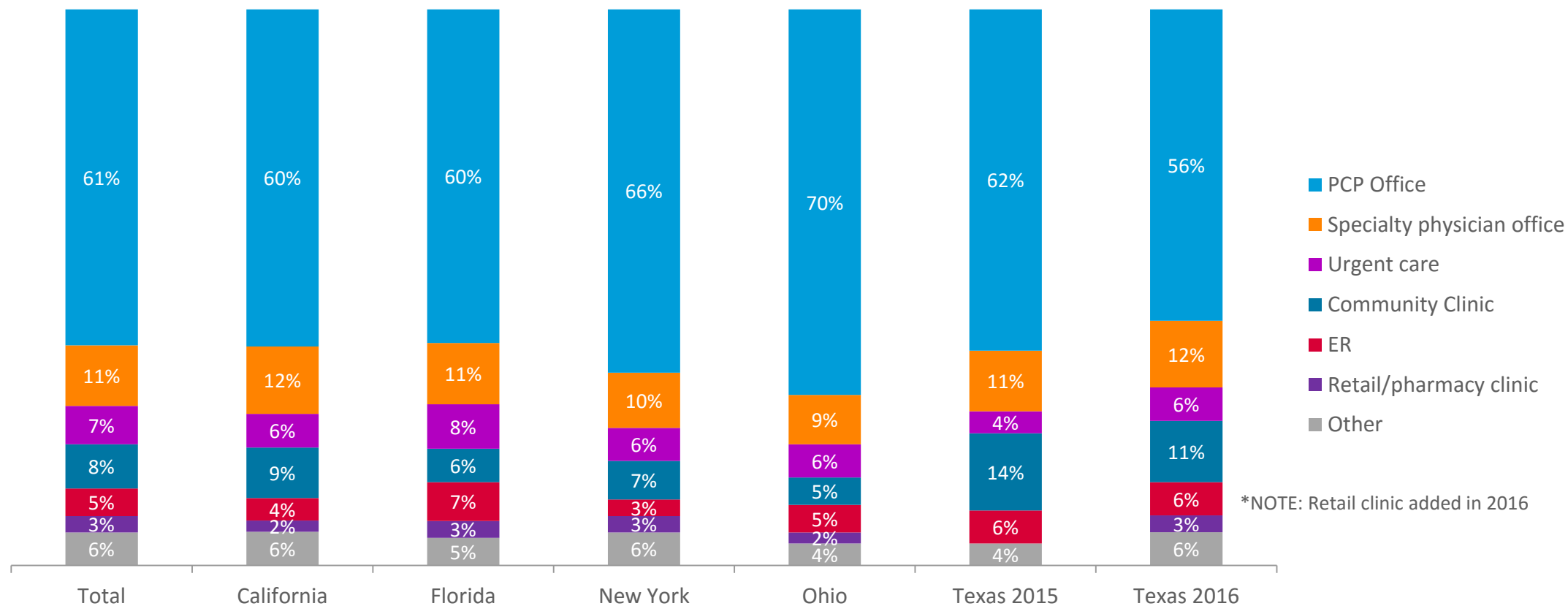
How Often Use Emergency Room When Not True Emergency



BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q555N How often do you use the emergency room for yourself or your child, even though it is not a true emergency?

Consumers get care at PCP office most often

Setting Go To Most Often For Healthcare Needs



BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q550 (Q470) Which setting do you go to most often for your healthcare needs?

Consumers turn to ED in non-emergency when doctor is unavailable

Particularly if office is closed

Why Go To ED for Non-Emergency

	TOTAL	California	Florida	New York	Ohio	Texas
Doctor's office closed	45%	43%	43%	46%	50%	45%
Doctor could not see me that day	18%	23%	11%	21%	16%	15%
ER was convenient	19%	12%	22%	20%	21%	25%
Do not have my own doctor to see	10%	8%	11%	8%	10%	13%
Other	22%	24%	23%	17%	20%	23%

BASE: HAS GONE TO ER WHEN NOT EMERGENCY (Total n=2118, California n=400, Florida n=430, New York n=411, Ohio n=456, Texas n=421)
Q560n Why have you gone to the emergency room when it was not a true emergency? Please select all that apply.

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Why Go To ED for Non-Emergency

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Why Go To ED for Non-Emergency

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Other	22%

BASE: HAS GONE TO ER WHEN NOT EMERGENCY (Total n=2118, California n=400, Florida n=430, New York n=411, Ohio n=456, Texas n=421)
Q560n Why have you gone to the emergency room when it was not a true emergency? Please select all that apply.

About 8 in 10 have a regular PCP; uninsured far less likely to have regular PCP or specialist

Health Facts

	TOTAL	California	Florida	New York	Ohio	Texas
Has a PCP	79%	79%	76%	84%	84%	76%
Has a specialist	48%	44%	50%	54%	45%	51%

	Uninsured	Insured
Has a PCP	29%	85%
Has a specialist	11%	52%

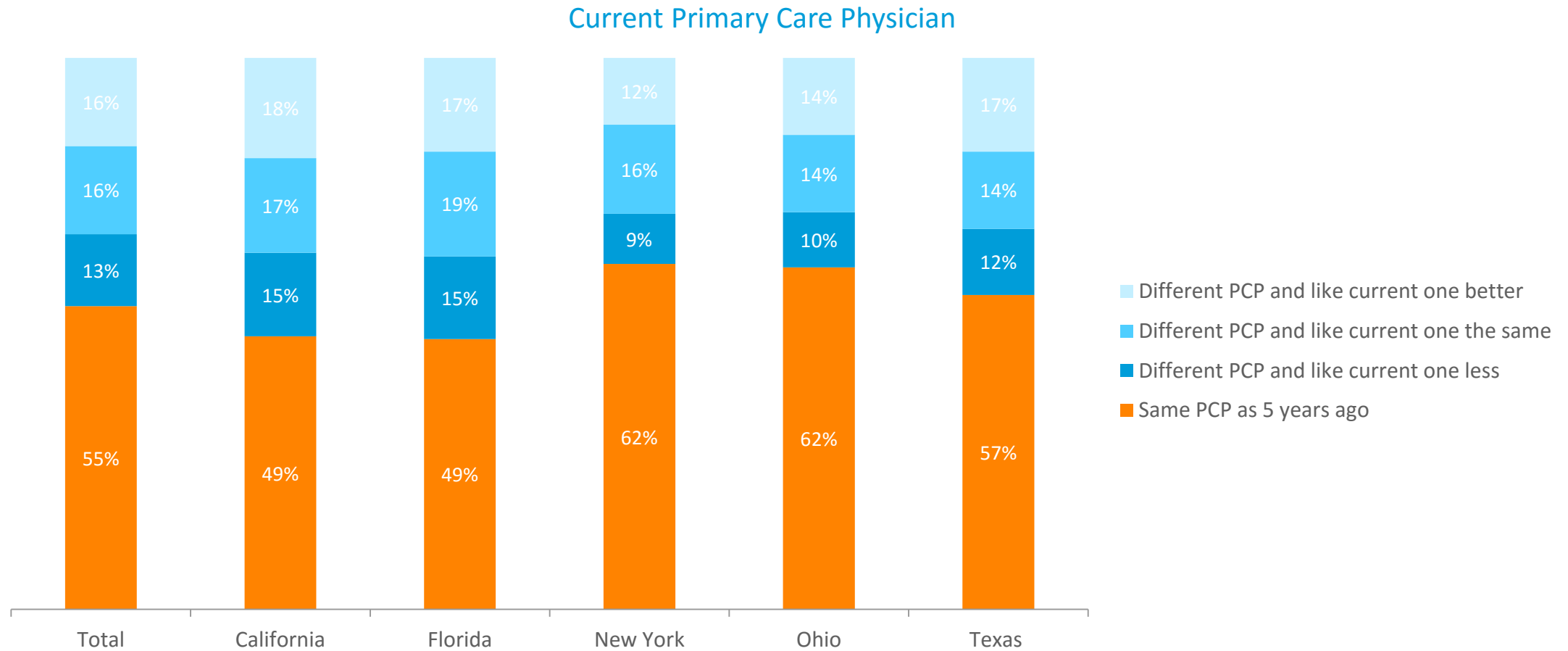
BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)

Q540 Do you have a primary care physician that you see when you have health problems?

Q545 Do you have a specialist physician that you see when you have health problems in that physician's specialty?

*Question different for 2015 "Which of the following types of physicians do you have?"

Most consumers with PCPs have same doctor as 5 years ago

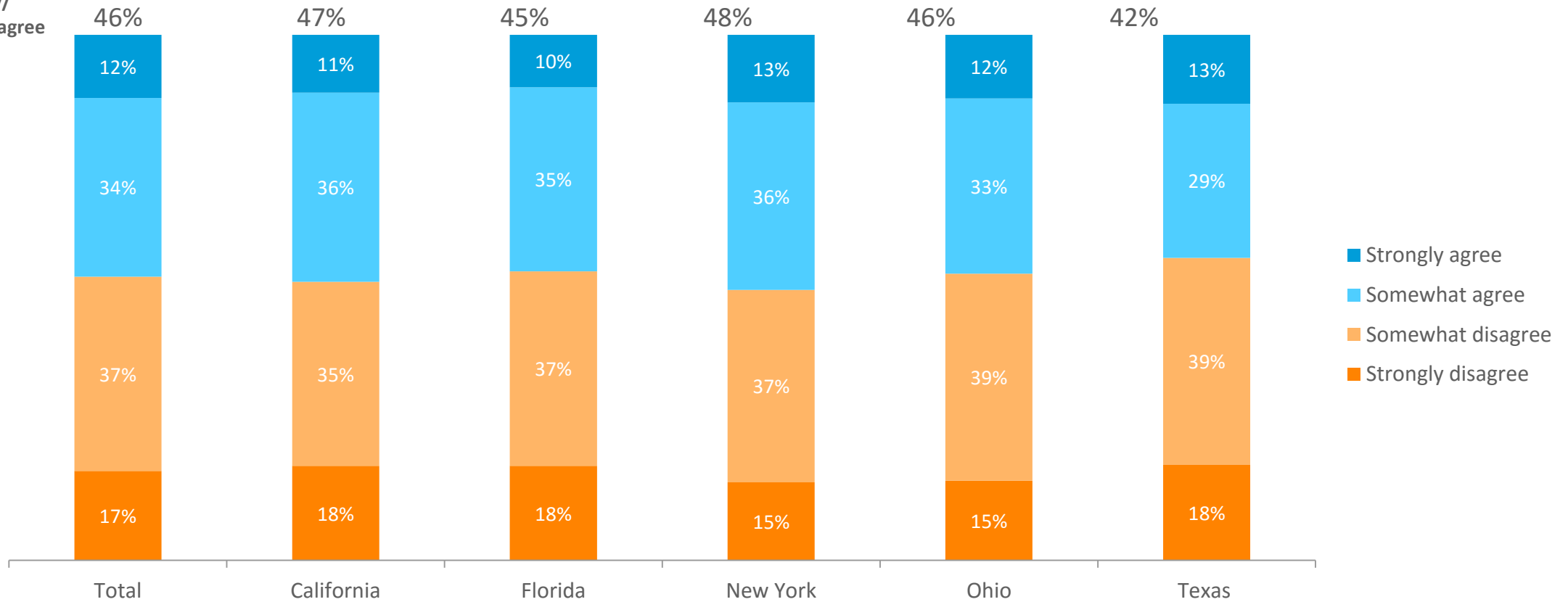


BASE: HAS PCP (Total n=4014, California n=800, Florida n=778, New York n=856, Ohio n=839, Texas n=741)
Q542 Which of the following best describes your current primary care physician?

Consumers are split on how easy it is to see doctor

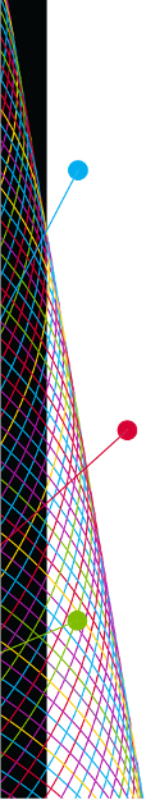
“It’s easier for me to get an appointment with a doctor now versus two years ago”

Strongly/
Somewhat agree



BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q305n Now please tell us how much you agree or disagree with each of the statements below

Cost of Healthcare

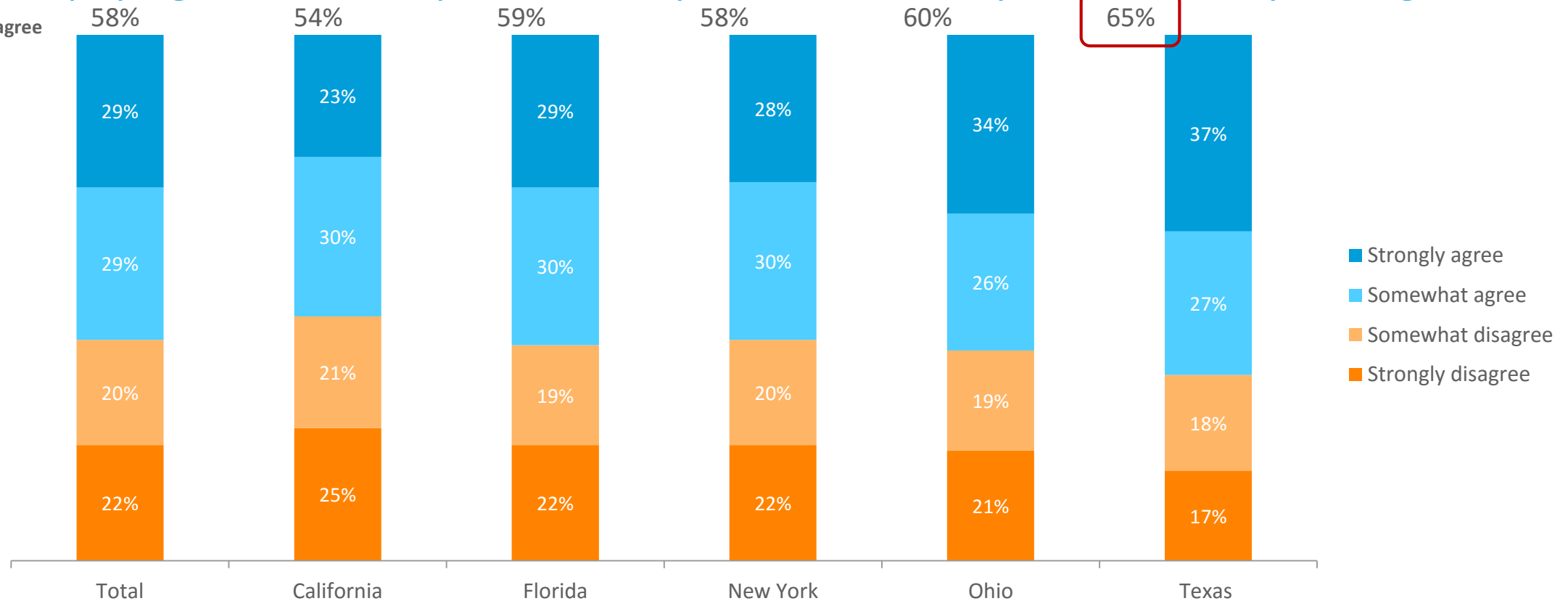


Majority paying more OOP for care vs. 2 years ago

In Texas, more than two-thirds report paying more this year

“I’m paying more out of pocket for my healthcare this year than two years ago”

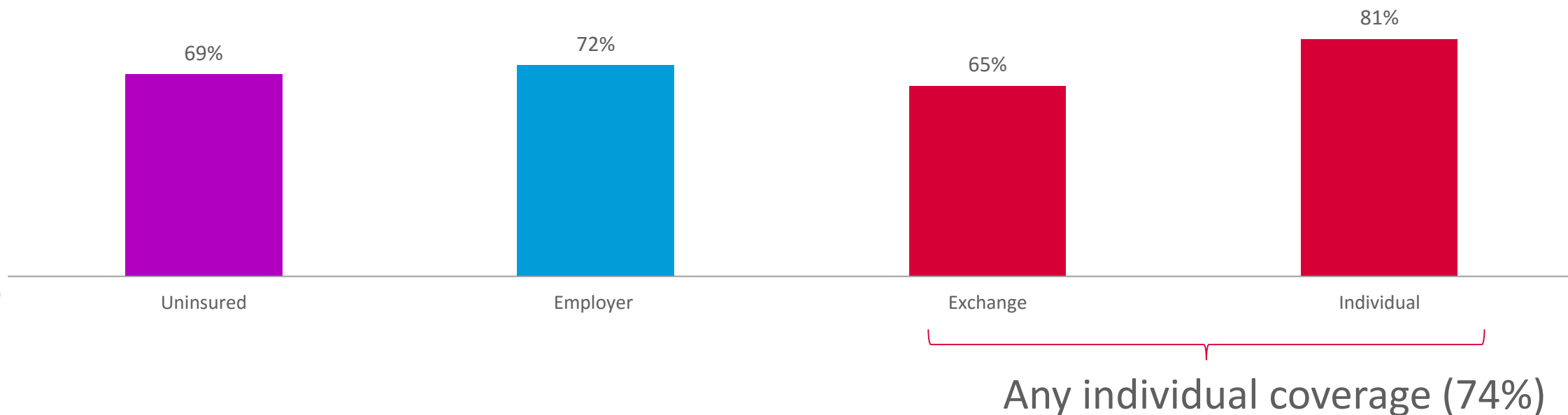
Strongly/
Somewhat agree



BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q305n Now please tell us how much you agree or disagree with each of the statements below

Texans across coverage types are paying more OOP

“I’m paying more out of pocket for my healthcare this year than two years ago”
(% Agree)



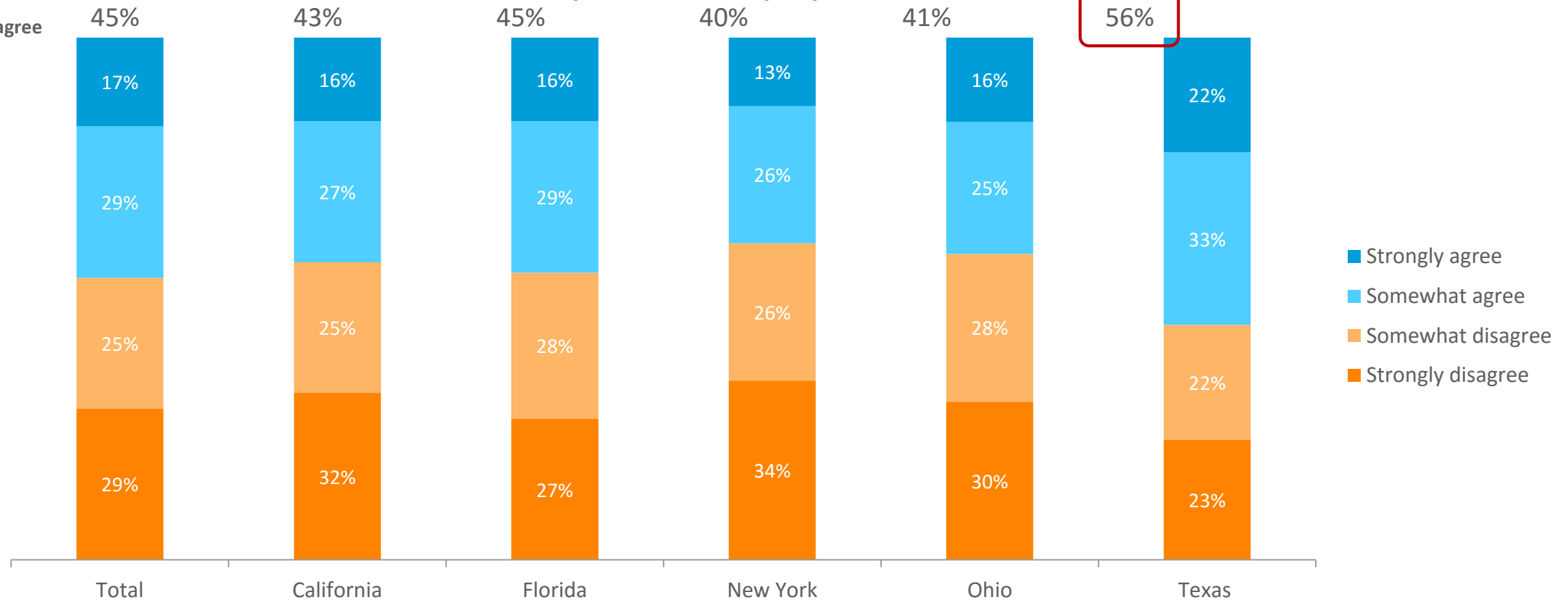
BASE: ALL TEXAS RESPONDENTS (Texas n=1002)
Q305n Now please tell us how much you agree or disagree with each of the statements below

Many consumers sacrificing to pay for healthcare

Especially in Texas where more than half are cutting down elsewhere to pay for care

“I have to cut down on other expenses to pay for healthcare”

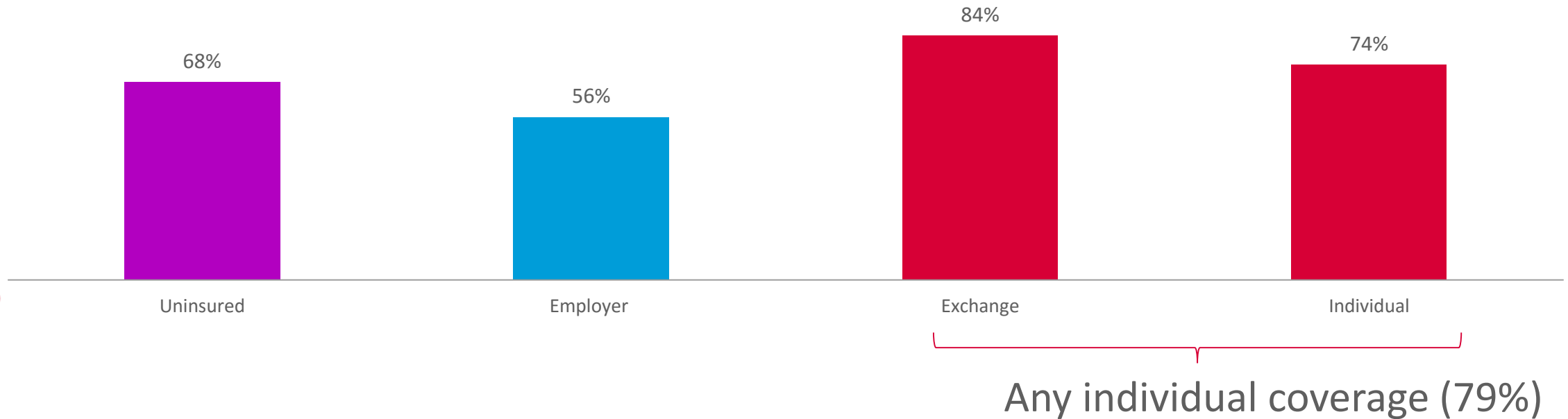
Strongly/
Somewhat agree



BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q305n Now please tell us how much you agree or disagree with each of the statements below

Texans who purchased own coverage more likely to have to cut down to afford care

“I have to cut down on other expenses to pay for healthcare”
(% Agree)

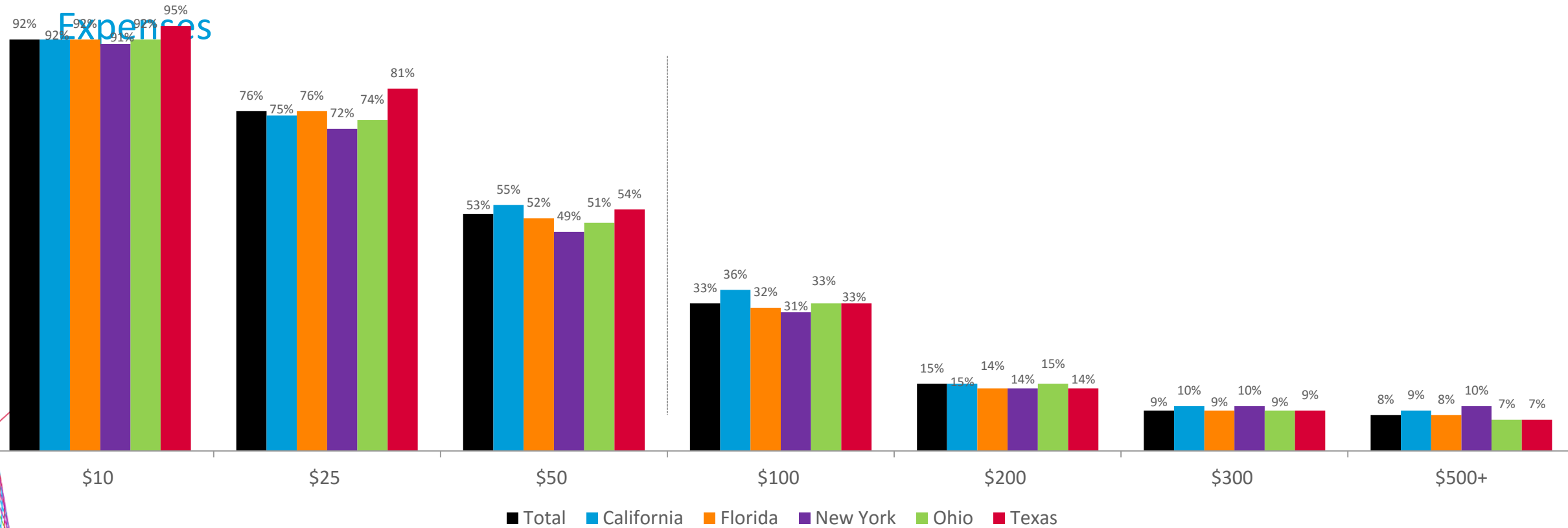


BASE: ALL QUALIFIED TEXAS RESPONDENTS (Texas n=1002)
Q305n Now please tell us how much you agree or disagree with each of the statements below

Many can afford ~\$50 per month OOP for healthcare, (but not more)

How Much Can Pay Out-of-Pocket per Month for Healthcare Without Cutting Other

Expenditures

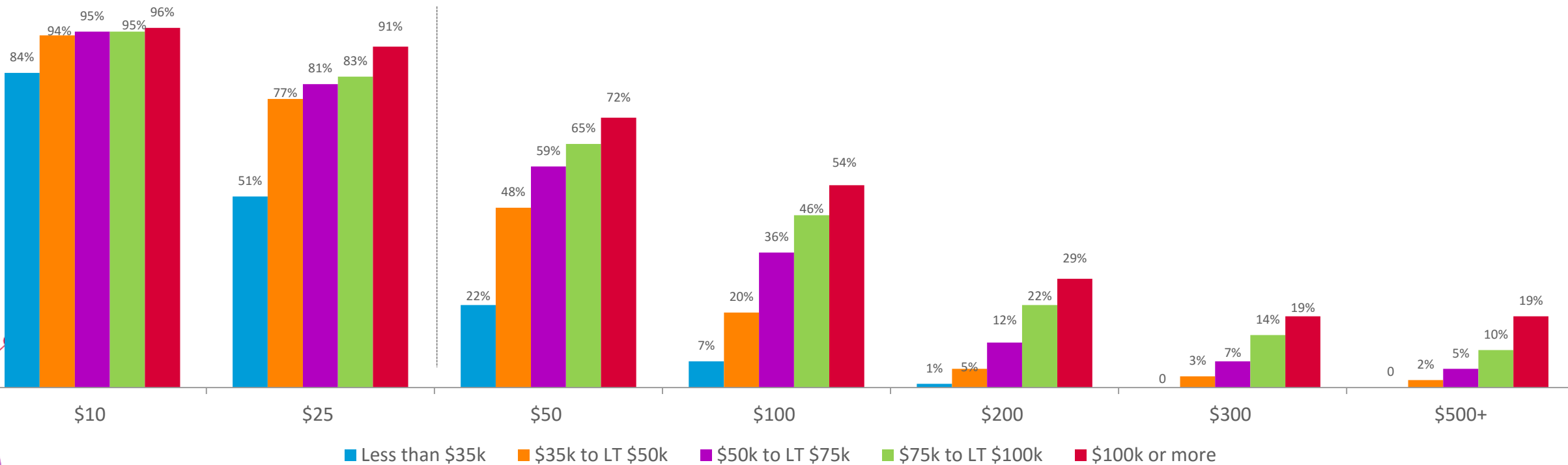


BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)

Q315n Now please think about the amount of money you pay out-of-pocket each month for all your and your family's healthcare needs. Would you be able to pay \$[xx] each month out of pocket for your and your family's healthcare needs without cutting down on other expenses?

For most lower-income, OOP costs of \$50 or more/month mean cutting back elsewhere

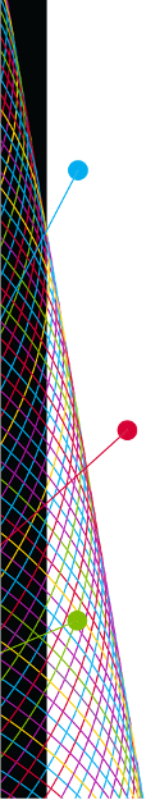
How Much Can Pay Out-of-Pocket per Month for Healthcare Without Cutting Other Expenses



BASE: ALL QUALIFIED RESPONDENTS (Total n=5007)

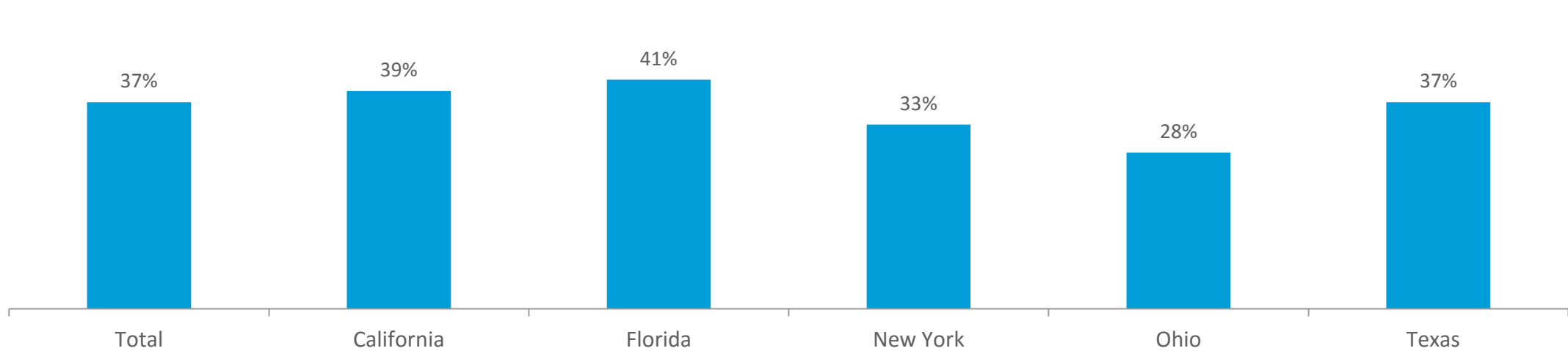
Q315n Now please think about the amount of money you pay out-of-pocket each month for all your and your family's healthcare needs. Would you be able to pay \$[xx] each month out of pocket for your and your family's healthcare needs without cutting down on other expenses?

Insurance exchanges



More than 1 in 3 have visited HIX

Ever Visited Health Insurance Exchange Marketplace

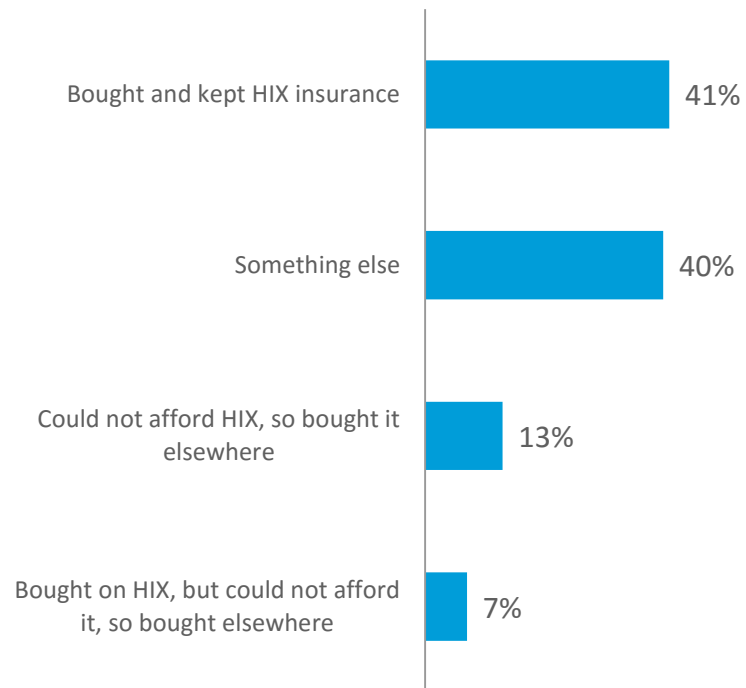


BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q202 Have you ever visited the health insurance exchange marketplace (e.g., Healthcare.gov or your state exchange) to shop for health insurance?

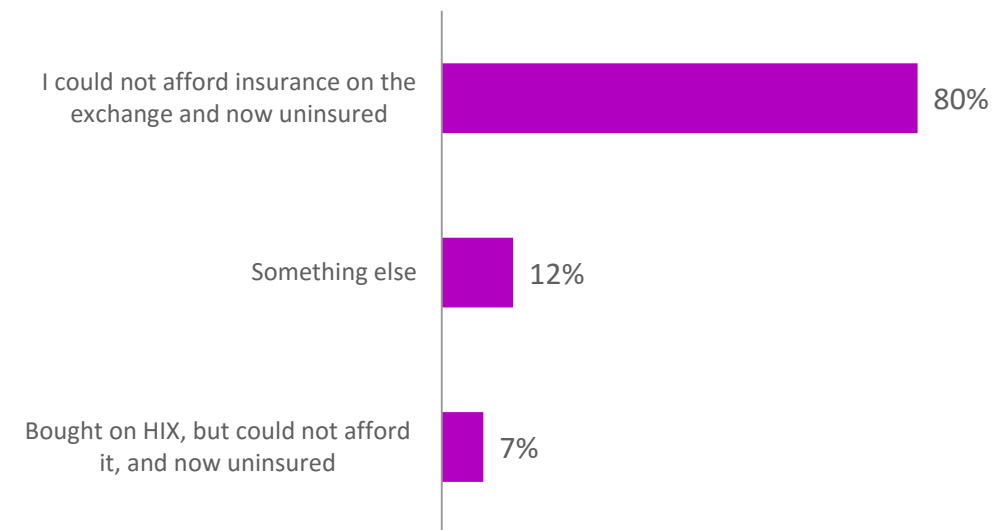
Uninsured who visited Exchange found they could not afford coverage

What Happened After Visiting Exchange By Insurance Status

Currently Insured



Currently Uninsured



BASE: VISITED THE EXCHANGE (Total n=1708)

Q204 What happened after you visited the health insurance exchange marketplace (e.g., Healthcare.gov or your state exchange)?

Among HIX visitors, about a third bought and kept coverage from the exchange

However, New Yorkers were more likely to do so; Texans and Ohioans less likely

What Happened After Visiting Exchange

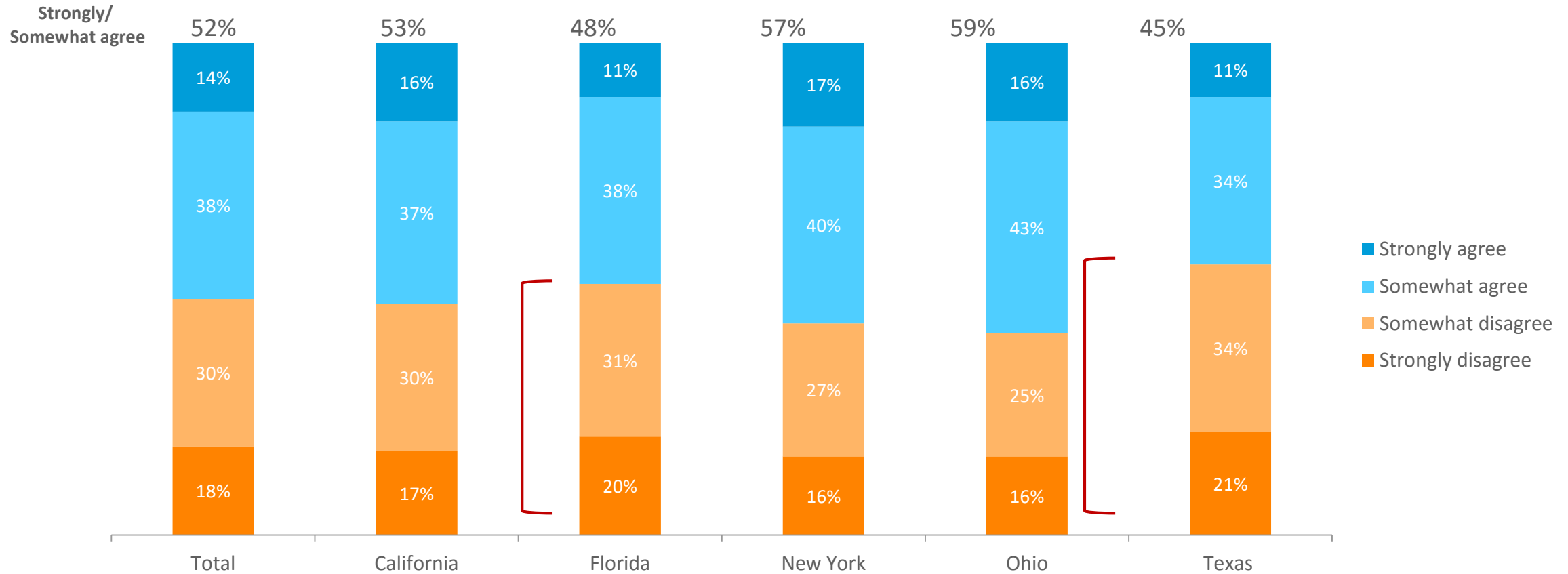
	TOTAL	California	Florida	New York	Ohio	Texas
Bought insurance on the exchange and still have it	35%	35%	37%	43%	28%	28%
Originally bought insurance on exchange, later realized could not afford, and bought insurance somewhere else	6%	5%	8%	7%	6%	3%
Originally bought insurance on exchange, later realized could not afford, and now uninsured	1%	1%	1%	0%	0%	2%
Could not afford insurance on the exchange, so bought it somewhere else	11%	8%	16%	9%	16%	11%
Could not afford insurance on the exchange, and now uninsured	11%	7%	14%	8%	8%	21%

BASE: VISITED THE EXCHANGE (Total n=1708, California n=353, Florida n=370, New York n=332, Ohio n=286, Texas n=367)
 Q204 What happened after you visited the health insurance exchange marketplace (e.g., Healthcare.gov or your state exchange)?

Quality of Healthcare

More consumers in TX, FL worry about quality vs. CA, NY, OH

"I don't worry about the quality of healthcare because it is generally excellent"

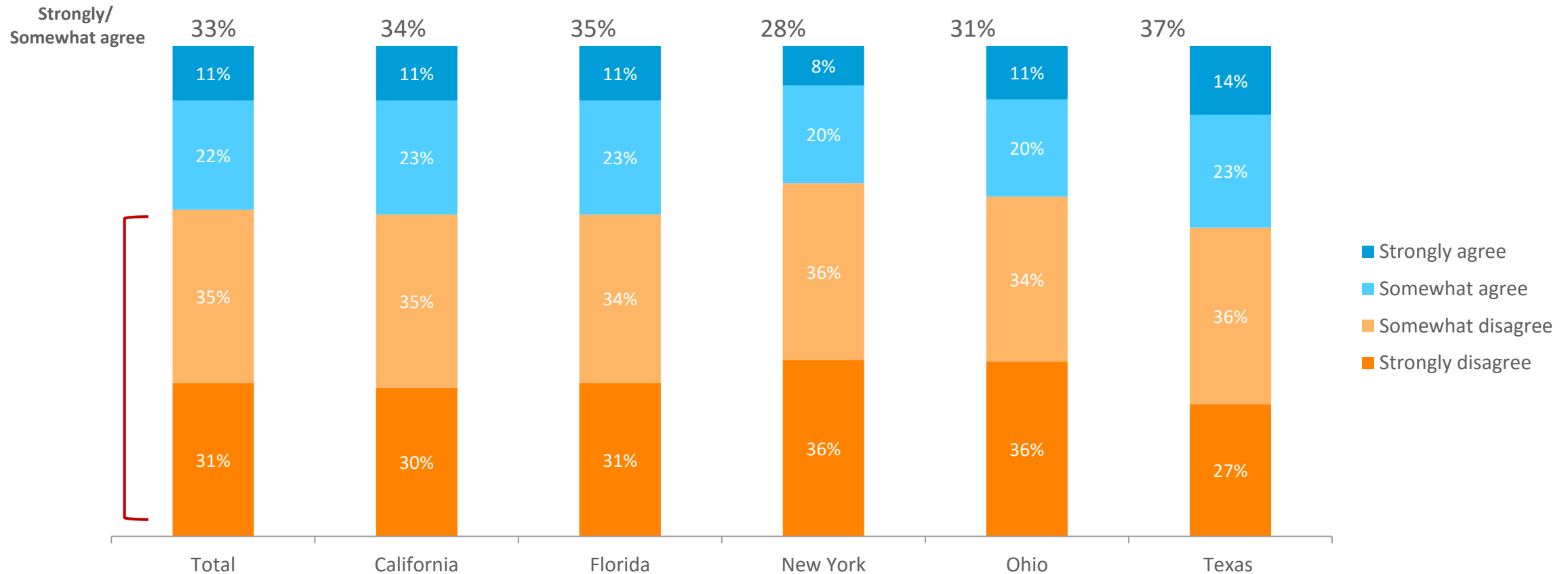


BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q305n Now please tell us how much you agree or disagree with each of the statements below

Most have not seen quality decline in past 2 years

Texas sees the most quality decline

“The quality of my healthcare is worse this year than two years ago”

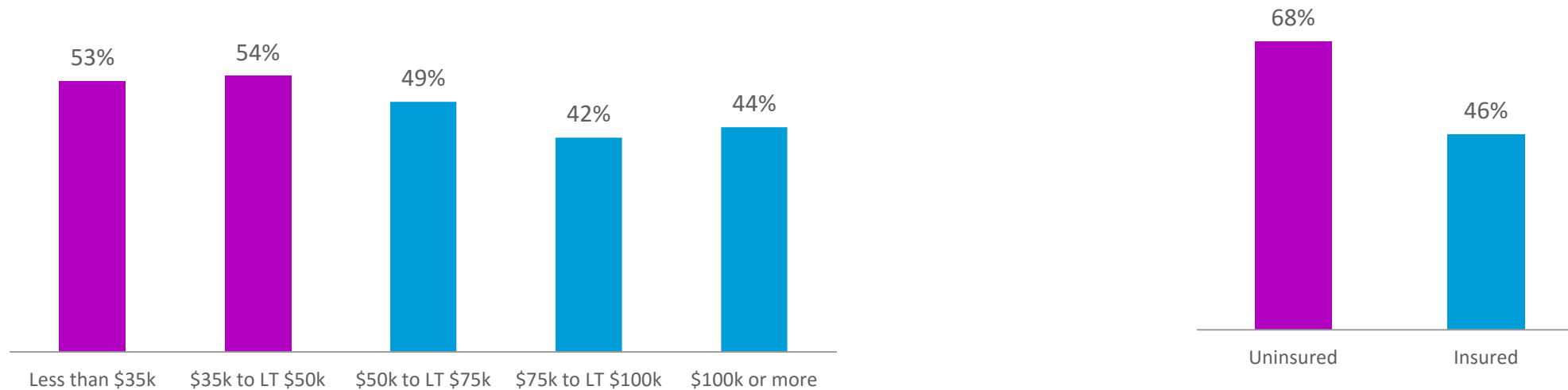


BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q305n Now please tell us how much you agree or disagree with each of the statements below

Uninsured and lower income adults more likely to worry about quality

Percent Who Worry About Quality of Healthcare

"I don't worry about the quality of healthcare because it is generally excellent" (% Disagree)

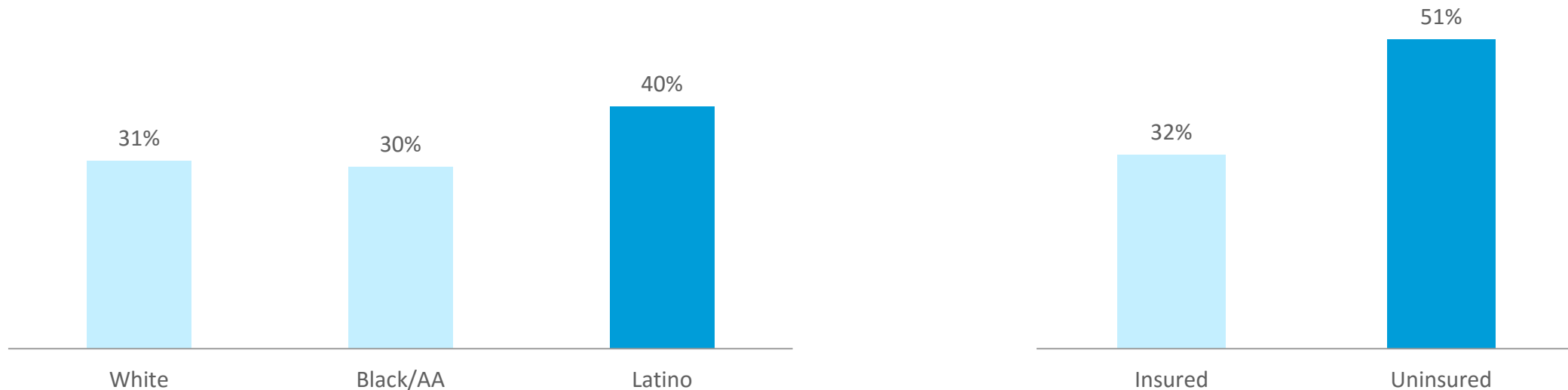


BASE: ALL QUALIFIED RESPONDENTS (Total n=5007)

Q305n Now please tell us how much you agree or disagree with each of the statements below

Latino and uninsured consumers are more likely to say quality of their healthcare is worse this year ⁿ

“The quality of my healthcare is worse this year than two years ago”
(Percent Agree Somewhat/Strongly)



BASE: ALL QUALIFIED RESPONDENTS (Total n=5007)

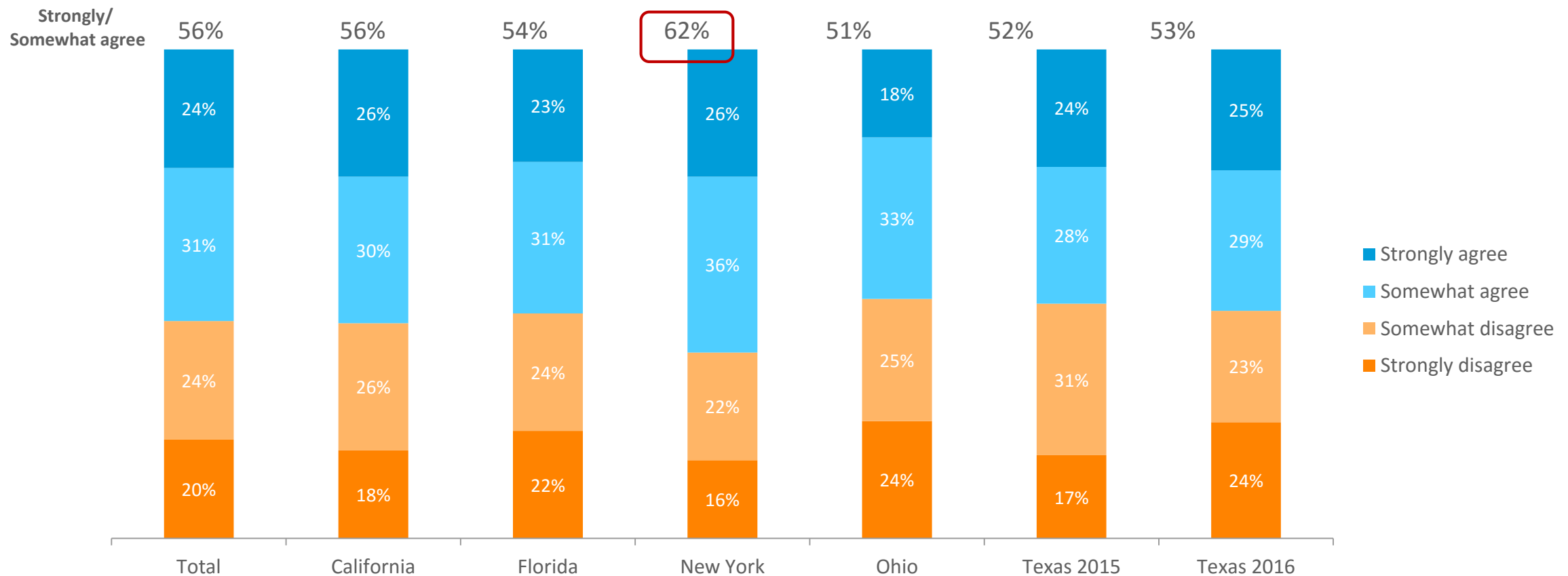
Q305n Now please tell us how much you agree or disagree with each of the statements below

Obesity and Smoking

More than half in every state support a “fat tax”

Support is highest in New York

“Foods that lead to obesity (e.g., sugary drinks, high calorie meals) should be more expensive ”

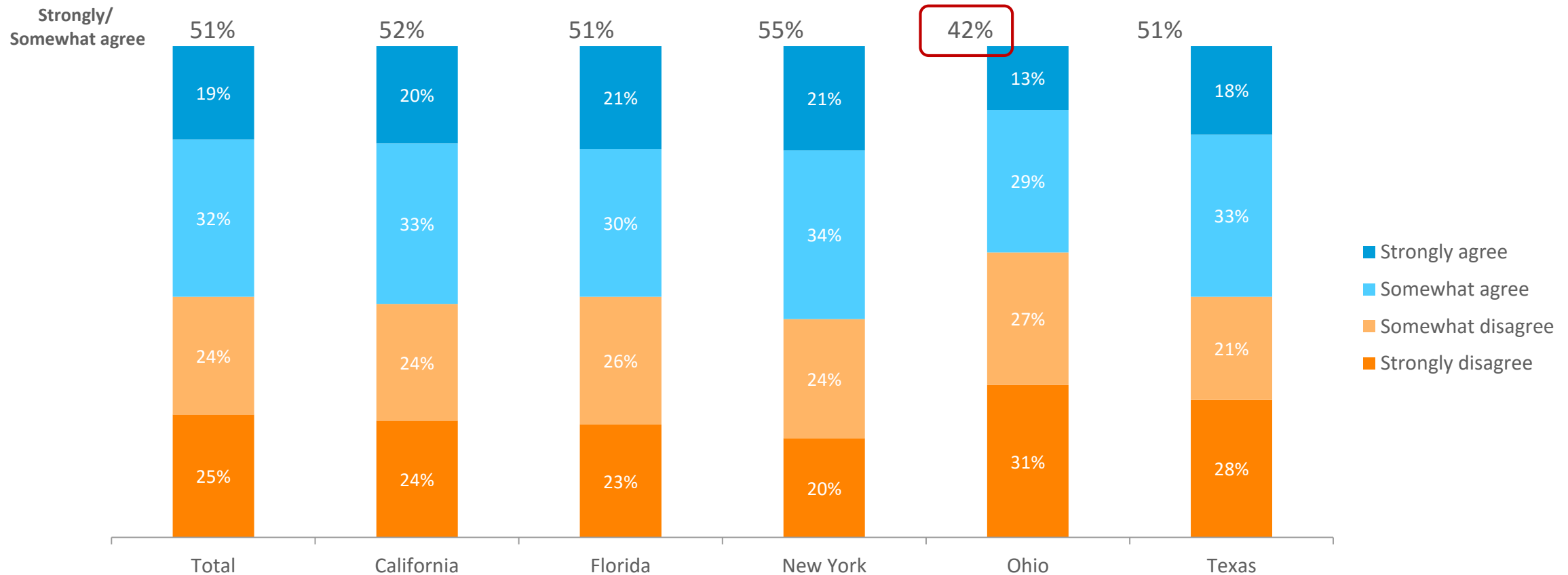


BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q440 (Q235) How much do you agree or disagree with each of the statements below

Half see soda tax as way to promote healthier choices

Although consumers in Ohio are more skeptical

“Taxes on sugary drinks could help people make healthier choices”

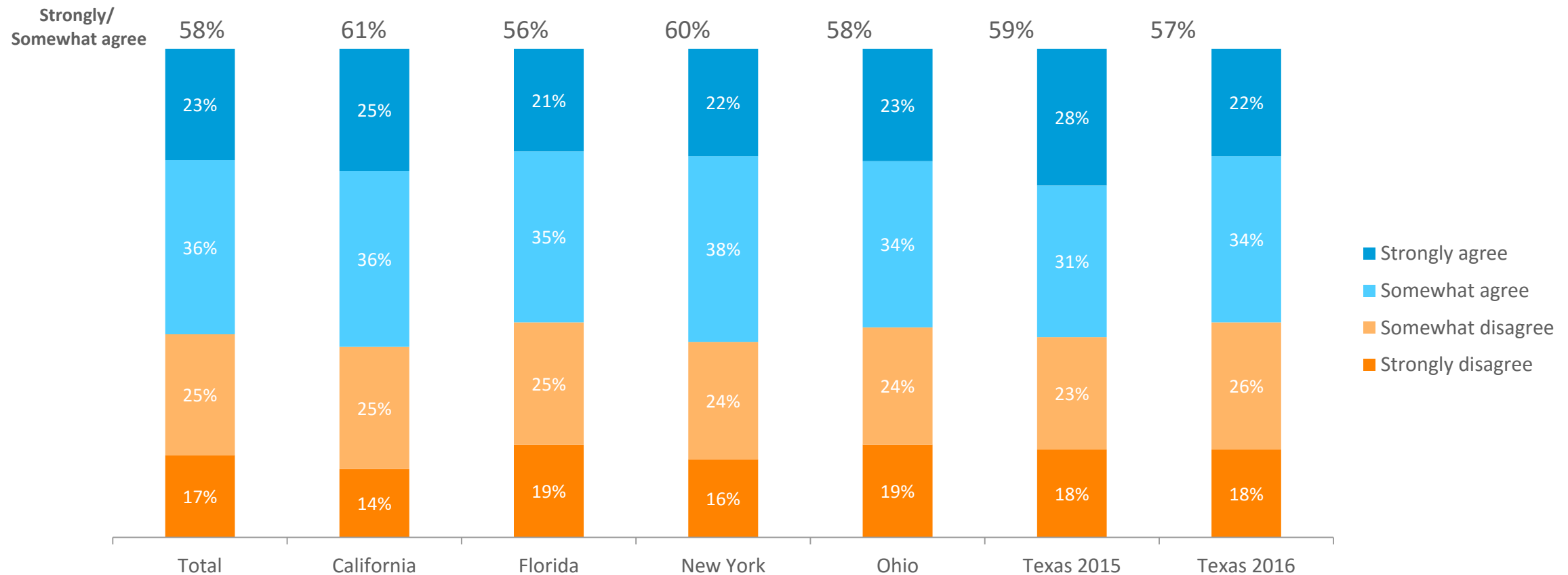


BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q440 (Q235) How much do you agree or disagree with each of the statements below

More than half support charging more to cover people with poor health habits ⁿ

In Texas, support is steady from last year

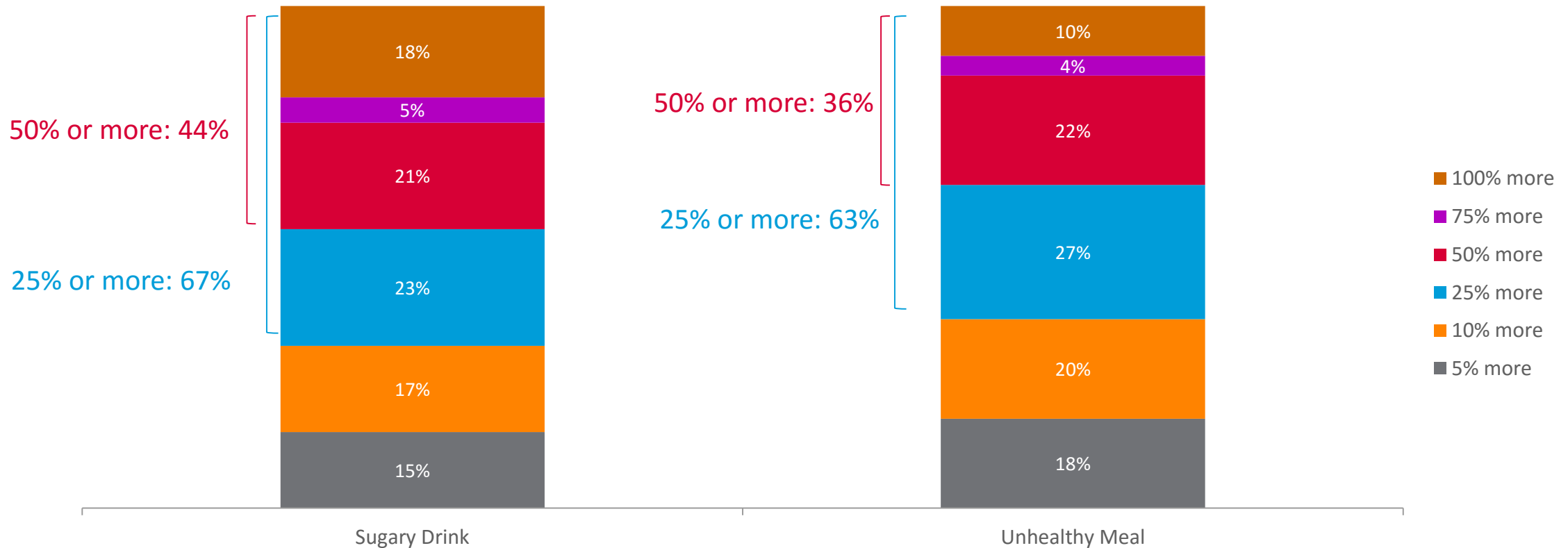
“People with poor health habits (e.g., smoking, lack of exercise) should pay more for health insurance ”



BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q440 (Q235) How much do you agree or disagree with each of the statements below

Among fat tax supporters, many support a tax of 50% or more for sugary drinks, 25% or more for meals

How Much More Should a \$1.00 Sugary Drink or \$10.00 Unhealthy Meal Cost vs. \$1.00 Drink Without Sugar or \$10.00 Healthy Meal (Among those supporting fat tax)



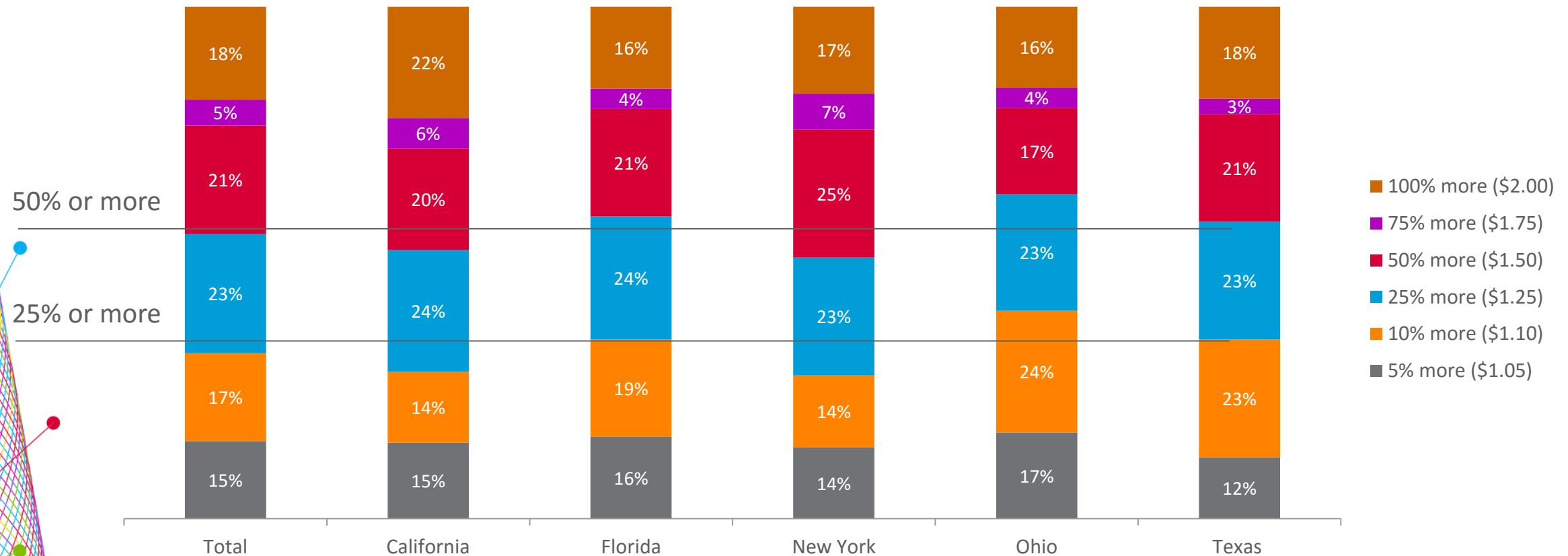
BASE: AGREE FOODS THAT LEAD TO OBESITY SHOULD BE MORE EXPENSIVE (Total n=2694, California n=555, Florida n=531, New York n=590, Ohio n=506, Texas n=512)

Q445n You said that you agree that sugary drinks should be more expensive than drinks without sugar. How much more should a \$1.00 sugary drink cost compared with \$1.00 drink without sugar?

Among fat tax supporters, many support a tax of 50% or more for sugary drinks

2 in 3 support a tax of 25% or more

How Much More Should a \$1.00 Sugary Drink Cost vs. \$1.00 Drink Without Sugar (Among those supporting fat tax)

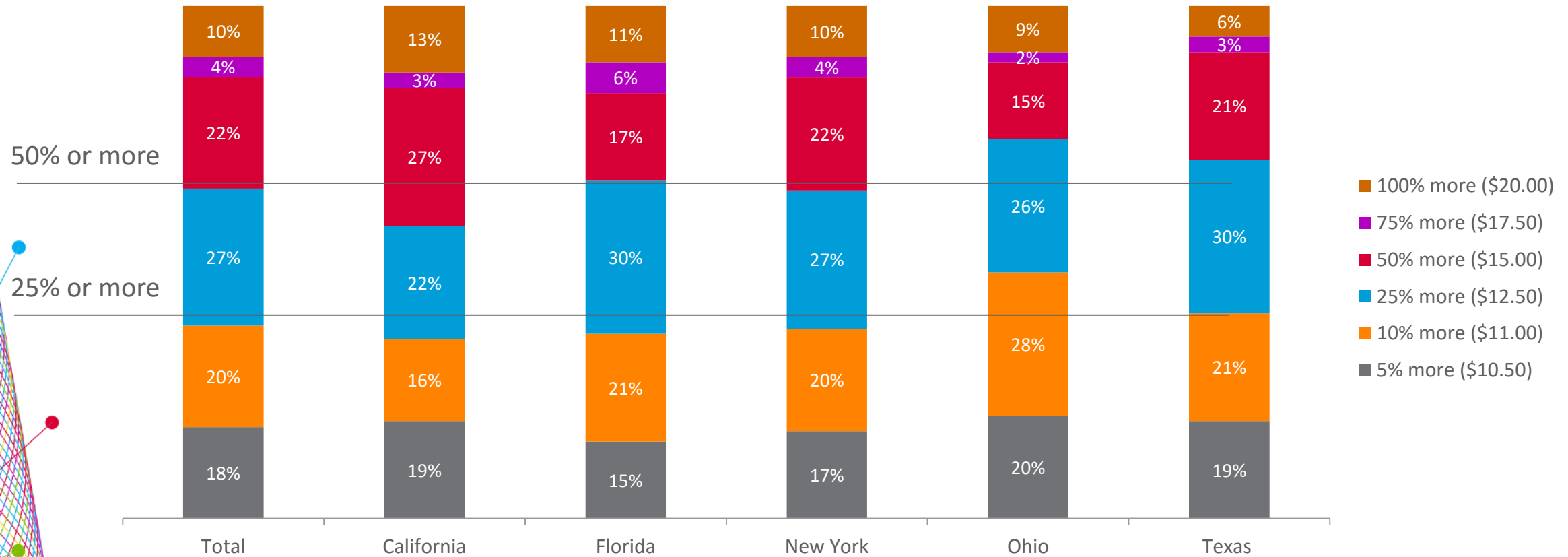


BASE: AGREE FOODS THAT LEAD TO OBESITY SHOULD BE MORE EXPENSIVE (Total n=2694, California n=555, Florida n=531, New York n=590, Ohio n=506, Texas n=512)

Q445n You said that you agree that sugary drinks should be more expensive than drinks without sugar. How much more should a \$1.00 sugary drink cost compared with \$1.00 drink without sugar?

More than half of fat tax supporters support 25% tax or more on unhealthy meals

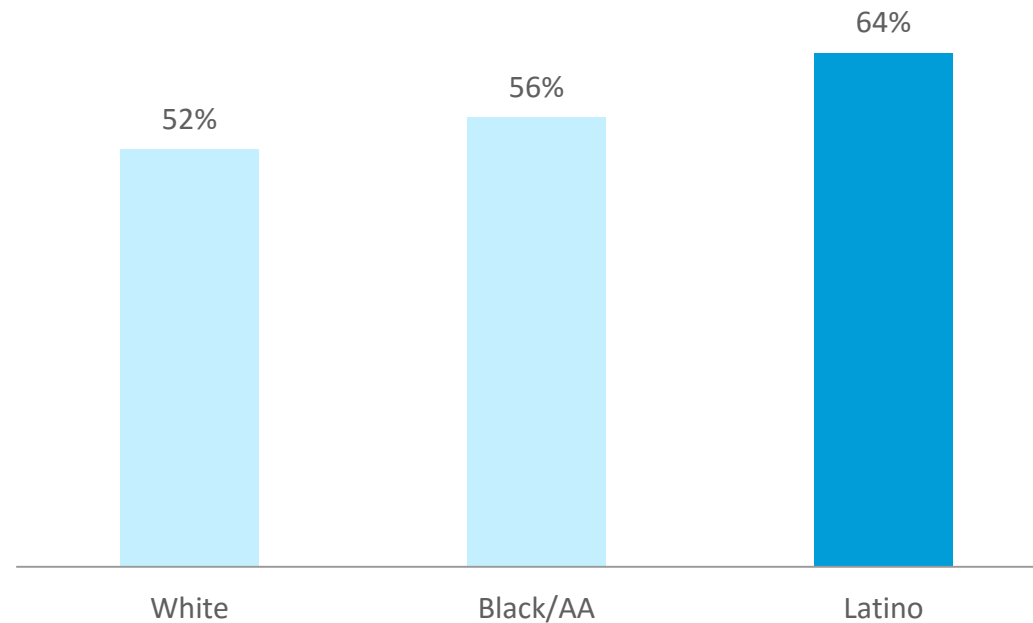
How Much More Should a \$10.00 Unhealthy Meal Cost vs. \$10.00 Healthier Meal (Among those supporting fat tax)



BASE: AGREE FOODS THAT LEAD TO OBESITY SHOULD BE MORE EXPENSIVE (Total n=2694, California n=555, Florida n=531, New York n=590, Ohio n=506, Texas n=512)
 Q450n How about a meal with high calorie foods that leads to obesity? How much more should a \$10.00 unhealthy meal cost compared to a \$10.00 healthier meal?

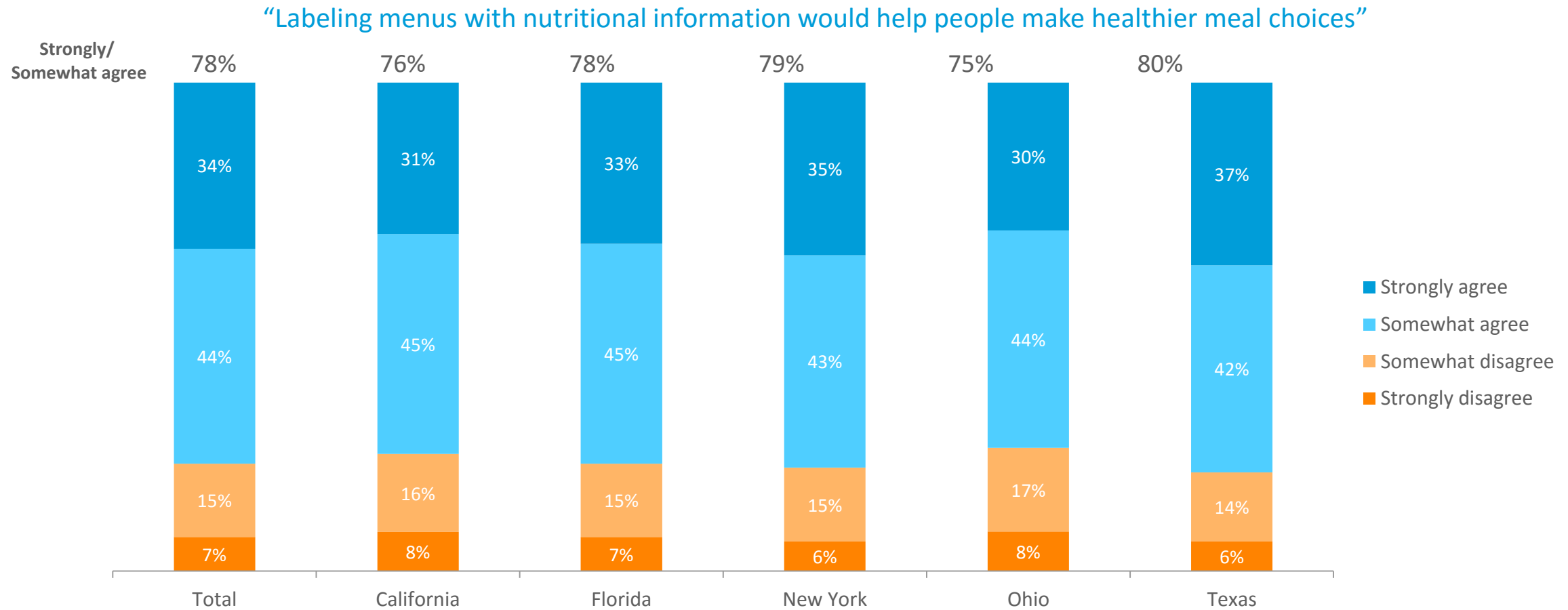
Latino support for fat taxes significantly higher than among white consumers

“Foods that lead to obesity (e.g., sugary drinks, high calorie meals) should be more expensive ”



BASE: ALL QUALIFIED RESPONDENTS (Total n=5007)
Q440 (Q235) How much do you agree or disagree with each of the statements below

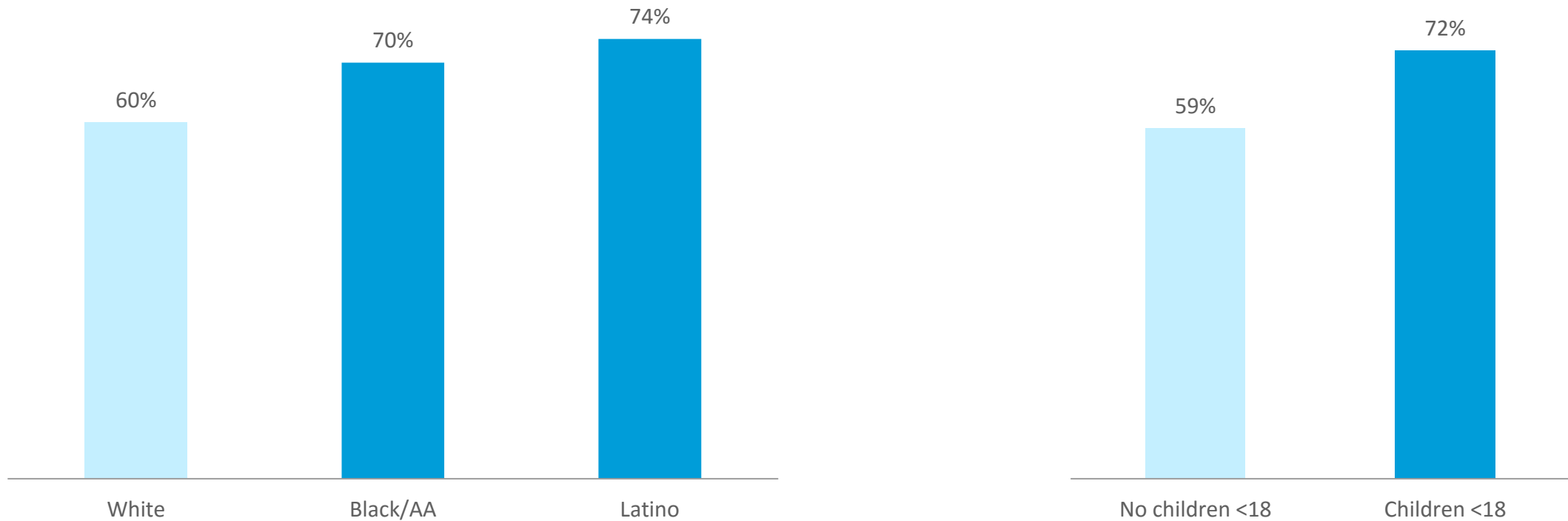
Menu labeling seen as way to promote better choices



BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q440 (Q235) How much do you agree or disagree with each of the statements below

Healthy food symbols appeal to parents and black and Latino consumers in particular

Symbols, such as red, green, and yellow traffic lights to show the healthiest choices, would be helpful for maintaining healthy eating habits



BASE: WOULD FIND MENU LABELING AT LEAST SOMEWHAT HELPFUL (Total n=4483, California n=901, Florida n=884, New York n=913, Ohio n=893, Texas n=892)
Q460n How helpful would you find each of the following types of menu information for maintaining healthy eating habits?

Across all states, a candidate's position on health issues would count in their vote

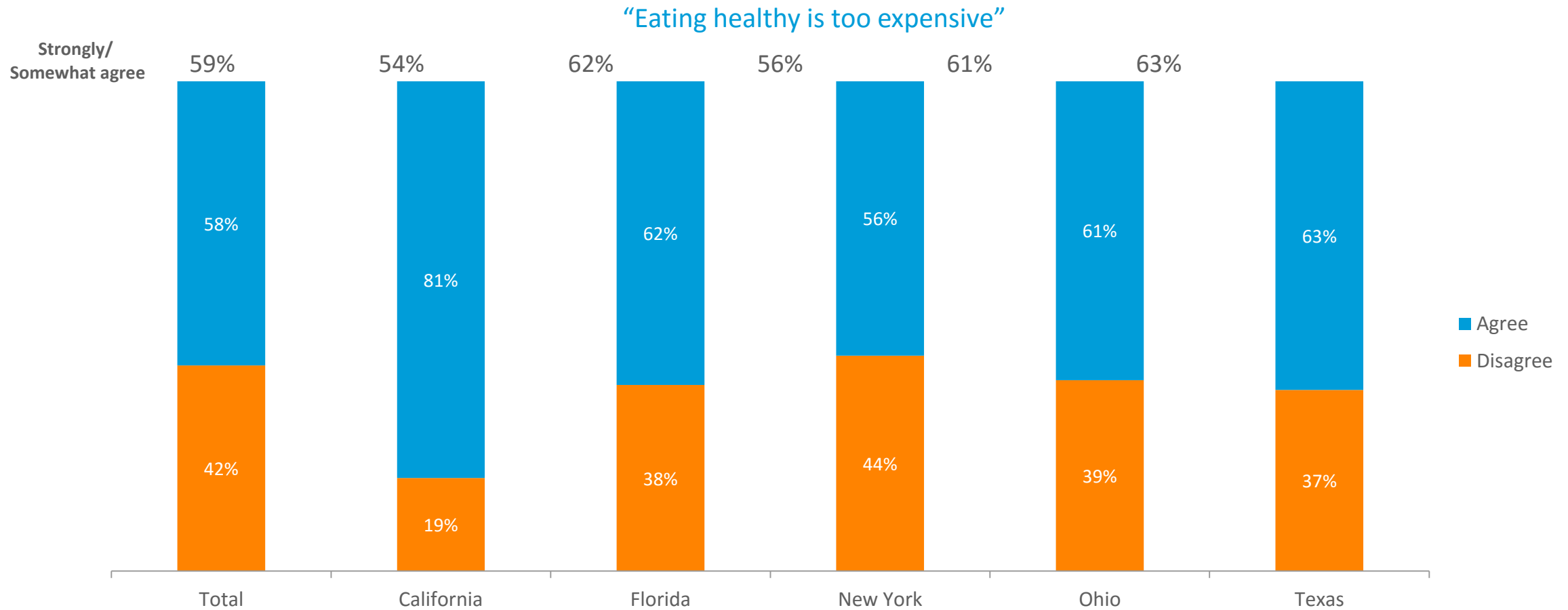
Political Candidate's View Would Count Somewhat or a Lot in Voting Decision

	TOTAL	California	Florida	New York	Ohio	Texas
Menus should be labeled with nutritional information	60%	61%	62%	63%	56%	56%

BASE: WOULD FIND MENU LABELING AT LEAST SOMEWHAT HELPFUL (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q465n Imagine that a candidate for political office in your state held each of the following views. How much would that count in your decision to vote for him or her?

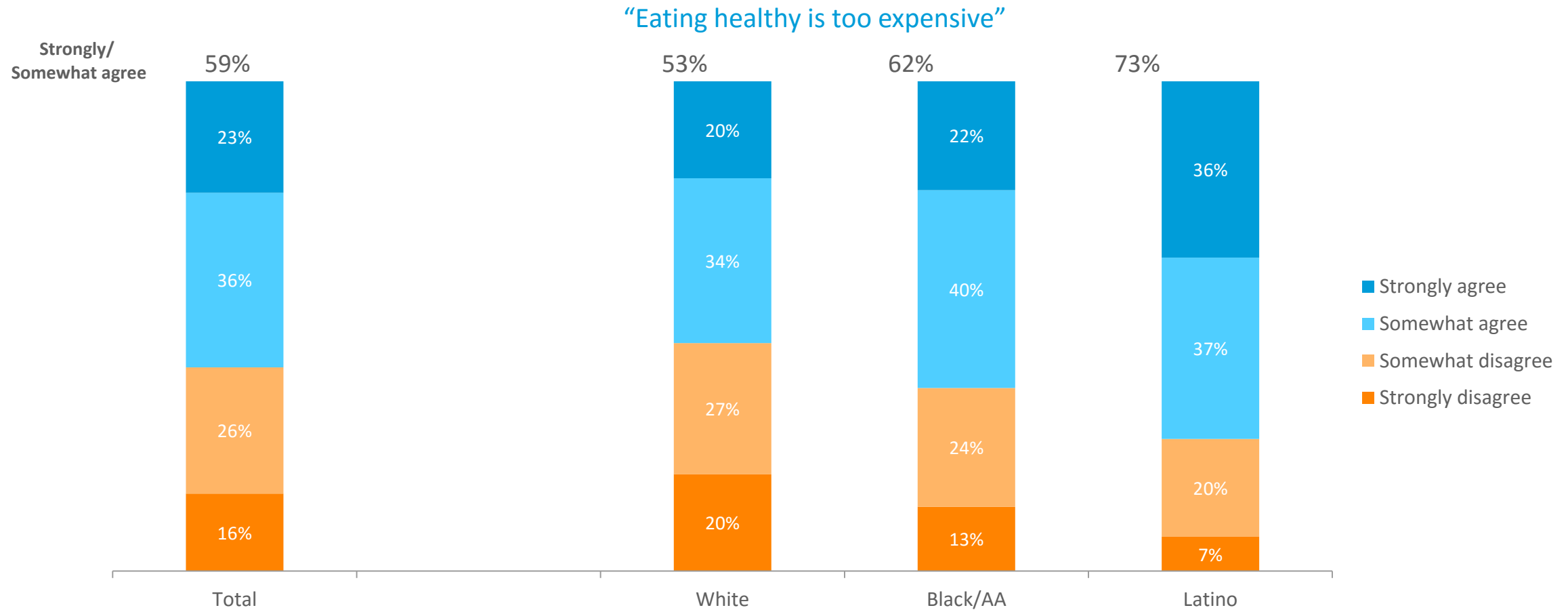
Slightly more than half in all states find healthy eating is too expensive

More say this in FL, OH, and TX



BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q440 (Q235) How much do you agree or disagree with each of the statements below

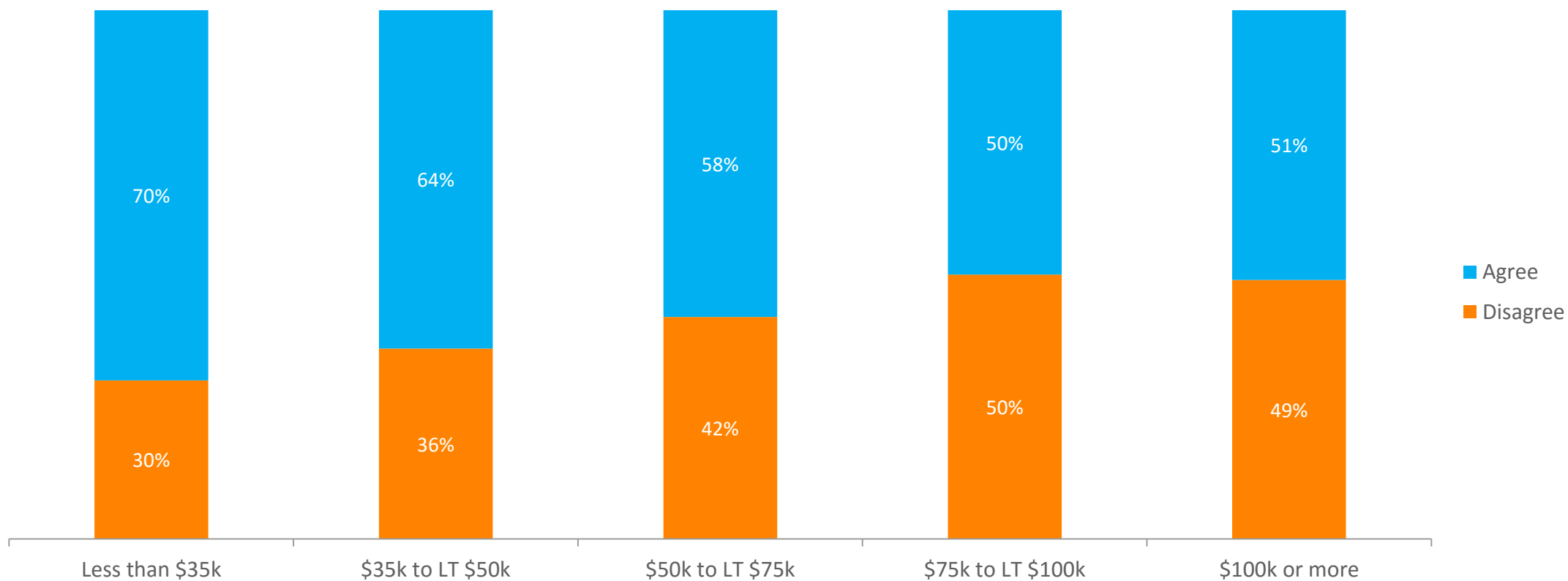
Latino consumers in particular find healthy eating is too expensive



BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q440 (Q235) How much do you agree or disagree with each of the statements below

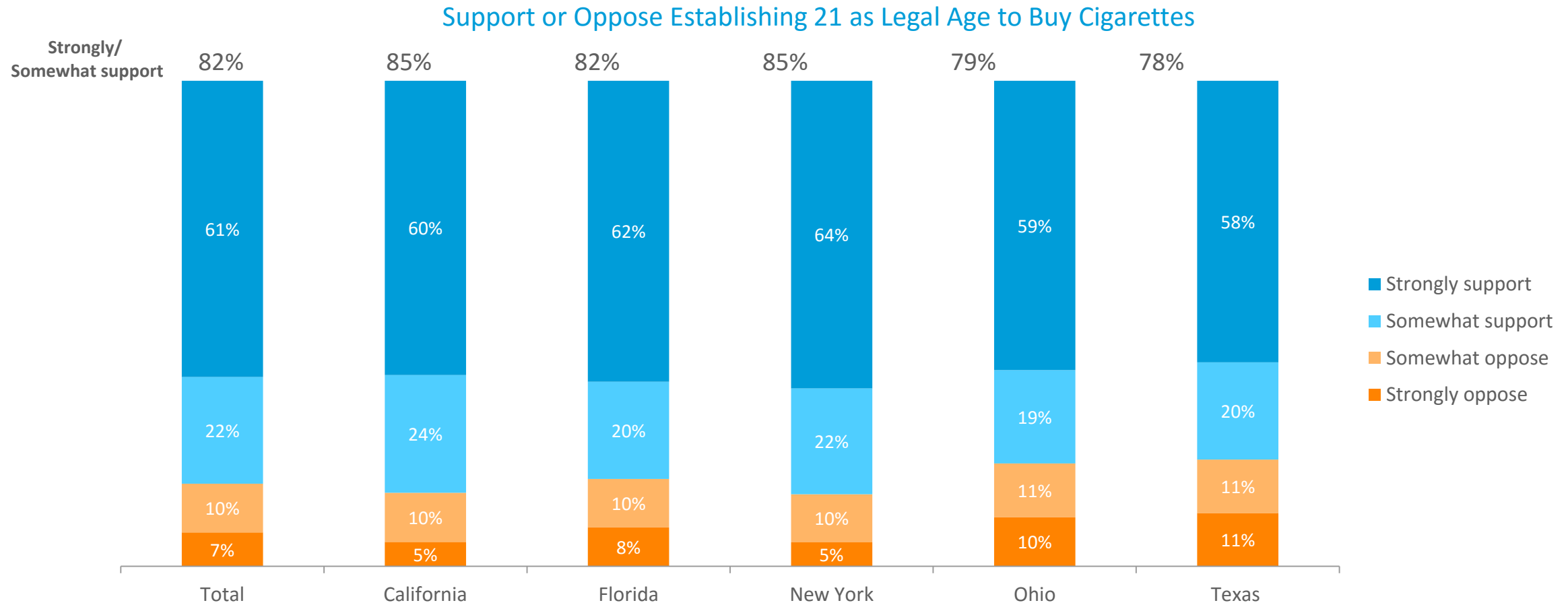
The majority of people in all income levels find eating healthy is too expensive

“Eating healthy is too expensive”



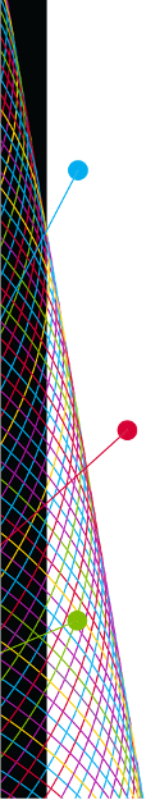
BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q440 (Q235) How much do you agree or disagree with each of the statements below

Widespread support for increasing legal age to buy cigarettes to 21



BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q470n Would you support or oppose your state legislature establishing 21 as the minimum legal age to purchase cigarettes?

State Snapshots





Key Findings: California

Coverage



- 9 in 10 (91%) Californians say having health insurance is absolutely essential or very important
- 3 in 4 (77%) support keeping the ACA Medicaid expansion in CA

Quality★★★★

- Most (66%) have not seen a decline in quality in past 2 years, although 1 in 3 (34%) have

Costs



- Majority of Californians (54%) are paying more out of pocket for healthcare vs. 2 years ago
- 2 in 5 (43%) are having to cut down elsewhere to pay for healthcare

Obesity



- 56% agree that foods that lead to obesity should be more expensive
- 3 in 4 (76%) agree that labeling menus with nutritional information would help people make healthier meal choices
- 58% are overweight or obese

In California, a candidate's position on health issues would count in their vote



Political Candidate's View Would Count somewhat or a lot in Voting Decision

	TOTAL	California
Manage healthcare costs	85%	85%
The government should provide health insurance coverage for all US citizens	70%	71%
Expand state health insurance (Medicaid) to cover more low income adults	69%	70%
Menus should be labeled with nutritional information	60%	61%

BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q465n Imagine that a candidate for political office in your state held each of the following views. How much would that count in your decision to vote for him or her?

Demographics: California

Gender		Children under 18 in Household		Employment Status	
Male	40%	Yes	29%	Employed full time	32%
Female	60%	No	71%	Employed part time	11%
Race/Ethnicity		Income		Self-employed	
White	71%	Less than \$15k	9%	Not employed, looking for work	7%
Black/African-American	3%	\$15k to less than \$25k	10%	Not employed, not looking	1%
Hispanic	14%	\$25k to less than \$50k	25%	Not employed, disability or illness	4%
Native American or Alaskan Native	1%	\$50k to less than \$100k	34%	Retired	24%
South Asian	1%	\$100k to less than \$200k	18%	Student	4%
Chinese	3%	\$200k+	4%	Stay-at-home spouse or partner	7%
Korean	1%	Education		Household Size	
Japanese	1%	Less than HS	0%	1	26%
Other Southeast Asian	0%	Some HS	2%	2	39%
Filipino	1%	Completed HS	9%	3	15%
Arab/West Asian	0%	Job training after HS	3%	4	12%
Mixed Race	1%	Some college	24%	5	4%
Some other race	1%	Associate degree	11%	6 or more	3%
Decline to Answer	0%	College	28%		
Age		Some graduate school	5%		
18-44	39%	Graduate degree	18%		
45-64	38%				
65+	23%				



Key State Findings: New York

Coverage



- 7 in 10 (69%) New Yorkers say that having insurance is “absolutely essential”
- 7 in 10 (71%) also say it is very or extremely important for all US citizens to have health insurance (significantly more than in CA, OH, and TX)
- Support for the ACA Medicaid expansion is very high; 4 in 5 say NY should keep it (83%)
- New York has the greatest number of people with PCP’s (84%) and specialists (54%)

Costs



- Majority of New Yorkers (58%) are paying more out of pocket for healthcare vs. 2 years ago
- 2 in 5 (40%) are having to cut down elsewhere to pay for healthcare

Quality ★ ★ ★ ★

- Majority of New Yorkers (57%) agree they “don’t worry about the quality of healthcare because it is generally excellent”
- 7 in 10 (72%) have *not* seen a decline in quality in past 2 years

Obesity



- 3 in 5 (62%) agree that foods that lead to obesity should be more expensive, the most of all states surveyed (significantly higher than FL, OH, TX)
- 59% are overweight or obese



In New York, a candidate’s position on health issues would count in their vote

Political Candidate’s View Would Count somewhat or a lot in Voting Decision

	TOTAL	New York
Manage healthcare costs	85%	85%
The government should provide health insurance coverage for all US citizens	70%	76%
Expand state health insurance (Medicaid) to cover more low income adults	69%	72%
Menus should be labeled with nutritional information	60%	63%

BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q465n Imagine that a candidate for political office in your state held each of the following views. How much would that count in your decision to vote for him or her?

Demographics: New York

Gender		Children under 18 in Household		Employment Status	
Male	43%	Yes	33%	Employed full time	40%
Female	57%	No	67%	Employed part time	10%
Race/Ethnicity		Income		Self-employed	
White	82%	Less than \$15k	5%	Not employed, looking for work	6%
Black/African-American	6%	\$15k to less than \$25k	9%	Not employed, not looking	1%
Hispanic	8%	\$25k to less than \$50k	23%	Not employed, disability or illness	3%
Native American or Alaskan Native	0%	\$50k to less than \$100k	38%	Retired	24%
South Asian	0%	\$100k to less than \$200k	21%	Student	2%
Chinese	2%	\$200k+	5%	Stay-at-home spouse or partner	6%
Korean	0%	Education		Household Size	
Japanese	0%	Less than HS	1%	1	23%
Other Southeast Asian	0%	Some HS	2%	2	40%
Filipino	0%	Completed HS	16%	3	15%
Arab/West Asian	0%	Job training after HS	3%	4	16%
Mixed Race	1%	Some college	19%	5	5%
Some other race	1%	Associate degree	11%	6 or more	2%
Decline to Answer	0%	College	24%		
Age		Some graduate school	5%		
18-44	37%	Graduate degree	20%		
45-64	43%				
65+	20%				



Key State Findings: Florida

Coverage



- 6 in 10 (62%) Floridians say having health insurance is “absolutely essential”
- 2 in 3 (68%) would support the ACA Medicaid expansion in FL

Quality★★★★

- Majority of Floridians (52%) **disagree** that they “don’t worry about the quality of healthcare because it is generally excellent,” significantly more than in NY and OH
- 35% say quality is worse than 2 years ago, significantly more than in NY

Costs



- 6 in 10 (59%) are paying more out of pocket for healthcare vs. 2 years ago
- 4 in 10 (45%) are having to cut down elsewhere to pay for healthcare

Obesity



- 54% agree that foods that lead to obesity should be more expensive
- 3 in 4 (78%) agree that labeling menus with nutritional information would help people make healthier meal choices
- 62% find that “eating healthy is too expensive,” significantly more than in CA and NY
- 64% are overweight or obese



In Florida, a candidate's position on health issues would count in their vote

Political Candidate's View Would Count somewhat or a lot in Voting Decision

	TOTAL	Florida
Manage healthcare costs	85%	86%
The government should provide health insurance coverage for all US citizens	70%	70%
Expand state health insurance (Medicaid) to cover more low income adults	69%	71%
Menus should be labeled with nutritional information	60%	62%

BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)

Q465n Imagine that a candidate for political office in your state held each of the following views. How much would that count in your decision to vote for him or her?

Demographics: Florida

Gender		Children under 18 in Household		Employment Status	
Male	42%	Yes	33%	Employed full time	28%
Female	58%	No	67%	Employed part time	9%
Race/Ethnicity		Income		Self-employed	
White	80%	Less than \$15k	8%	Not employed, looking for work	7%
Black/African-American	7%	\$15k to less than \$25k	13%	Not employed, not looking	1%
Hispanic	8%	\$25k to less than \$50k	30%	Not employed, disability or illness	5%
Native American or Alaskan Native	0%	\$50k to less than \$100k	35%	Retired	33%
South Asian	0%	\$100k to less than \$200k	13%	Student	2%
Chinese	0%	\$200k+	3%	Stay-at-home spouse or partner	7%
Korean	0%	Education		Household Size	
Japanese	0%	Less than HS	0%	1	22%
Other Southeast Asian	0%	Some HS	2%	2	42%
Filipino	0%	Completed HS	14%	3	16%
Arab/West Asian	0%	Job training after HS	4%	4	12%
Mixed Race	2%	Some college	25%	5	6%
Some other race	1%	Associate degree	10%	6 or more	3%
Decline to Answer	1%	College	23%		
Age		Some graduate school	4%		
18-44	30%	Graduate degree	16%		
45-64	40%				
65+	29%				



Key State Findings: Ohio

Coverage



- 7 in 10 (69%) Ohioans say having health insurance is absolutely essential
- 3 in 4 (76%) support keeping the ACA Medicaid expansion in CA

Quality ★ ★ ★ ★

- 7 in 10 (69%) have *not* seen a decline in quality in past 2 years

Costs



- Majority of Ohioans (60%) are paying more out of pocket for healthcare vs. 2 years ago
- 4 in 10 (41%) are having to cut down elsewhere to pay for healthcare

Obesity



- 51% agree that foods that lead to obesity should be more expensive
- However, significantly fewer in OH think taxes on sugary drinks could help people make healthier choices vs. the 4 other states surveyed (42%)
- 3 in 4 (75%) agree that labeling menus with nutritional information would help people make healthier meal choices
- 70% are overweight or obese



In Ohio, a candidate’s position on health issues would count in their vote

Political Candidate’s View Would Count somewhat or a lot in Voting Decision

	TOTAL	Ohio
Manage healthcare costs	85%	85%
The government should provide health insurance coverage for all US citizens	70%	64%
Expand state health insurance (Medicaid) to cover more low income adults	69%	64%
Menus should be labeled with nutritional information	60%	56%

BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q465n Imagine that a candidate for political office in your state held each of the following views. How much would that count in your decision to vote for him or her?

Demographics: Ohio

Gender		Children under 18 in Household		Employment Status	
Male	38%	Yes	39%	Employed full time	38%
Female	62%	No	61%	Employed part time	9%
Race/Ethnicity		Income		Self-employed	
White	88%	Less than \$15k	8%	Not employed, looking for work	6%
Black/African-American	7%	\$15k to less than \$25k	10%	Not employed, not looking	1%
Hispanic	3%	\$25k to less than \$50k	30%	Not employed, disability or illness	7%
Native American or Alaskan Native	0%	\$50k to less than \$100k	35%	Retired	22%
South Asian	0%	\$100k to less than \$200k	15%	Student	2%
Chinese	0%	\$200k+	2%	Stay-at-home spouse or partner	11%
Korean	0%	Education		Household Size	
Japanese	0%	Less than HS	1%	1	19%
Other Southeast Asian	0%	Some HS	2%	2	42%
Filipino	0%	Completed HS	19%	3	17%
Arab/West Asian	0%	Job training after HS	4%	4	13%
Mixed Race	1%	Some college	24%	5	6%
Some other race	0%	Associate degree	12%	6 or more	3%
Decline to Answer	0%	College	20%		
Age		Some graduate school	3%		
18-44	36%	Graduate degree	15%		
45-64	46%				
65+	18%				



Key State Findings: Texas

Cost



More consumers in Texas than any other state surveyed are:

- Paying more out of pocket for healthcare vs. 2 years ago (65%)
- Cutting down on other expenses to pay for healthcare (56%)

Quality ★ ★ ★ ☆

- Worried about quality (55%)
- Say quality has declined in the last 2 years (37%)

Coverage



- 96% of Texans say having health insurance coverage is important

“Improving access”



- Nearly 2 in 3 Texans would support Medicaid expansion in Texas (63%)
- Medicaid expansion is the top way Texans would expand coverage; this increased 50% from last year



Key State Findings: Texas

Obesity



- Support for an increase in price of foods that could lead to obesity is 53%
- Almost 50% support a tax of at least 50% on sugary drinks and a 25% tax on unhealthy meals
- 62% in favor of red-yellow-green, with slightly more wanting actual calorie count

In Texas, a candidate's position on health issues would count in their vote



Political Candidate's View Would Count somewhat or a lot in Voting Decision

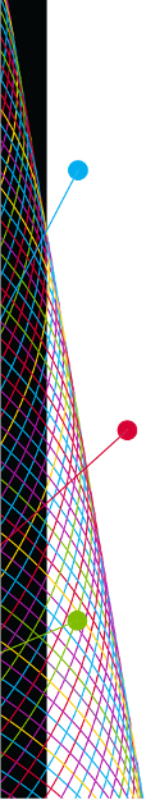
	TOTAL	Texas
Manage healthcare costs	85%	82%
The government should provide health insurance coverage for all US citizens	70%	64%
Expand state health insurance (Medicaid) to cover more low income adults	69%	67%
Menus should be labeled with nutritional information	60%	56%

BASE: ALL QUALIFIED RESPONDENTS (Total n=5007, California n=1004, Florida n=1000, New York n=1000, Ohio n=1001, Texas n=1002)
Q465n Imagine that a candidate for political office in your state held each of the following views. How much would that count in your decision to vote for him or her?

Demographics: Texas

Gender		Children under 18 in Household		Employment Status	
Male	41%	Yes	34%	Employed full time	32%
Female	59%	No	66%	Employed part time	8%
Race/Ethnicity		Income		Self-employed	
White	74%	Less than \$15k	8%	Not employed, looking for work	7%
Black/African-American	8%	\$15k to less than \$25k	11%	Not employed, not looking	1%
Hispanic	12%	\$25k to less than \$50k	30%	Not employed, disability or illness	5%
Native American or Alaskan Native	0%	\$50k to less than \$100k	34%	Retired	23%
South Asian	1%	\$100k to less than \$200k	15%	Student	4%
Chinese	0%	\$200k+	2%	Stay-at-home spouse or partner	11%
Korean	0%	Education		Household Size	
Japanese	0%	Less than HS	0%	1	20%
Other Southeast Asian	0%	Some HS	2%	2	39%
Filipino	0%	Completed HS	15%	3	18%
Arab/West Asian	0%	Job training after HS	4%	4	13%
Mixed Race	2%	Some college	25%	5	7%
Some other race	0%	Associate degree	11%	6 or more	3%
Decline to Answer	0%	College	25%		
Age		Some graduate school	5%		
18-44	38%	Graduate degree	13%		
45-64	40%				
65+	22%				

Method



Online Method Details

Survey research in any mode (e.g., telephone, online) relies on weighting by key demographic variables to ensure the data more accurately reflects the target population.

In addition, online survey research relies on propensity score weighting to correct for selection bias from sampling from online panels of respondents, who may differ from the population of interest:

- They have chosen to become a part of the Internet population;
- They have chosen to become a part of a survey panel; and,
- They have chosen to take the survey for which they received the invitation.

Propensity score weighting corrects for the fact that certain kinds of people have a greater or lesser likelihood to be online, to become part of a survey panel, and to reply to our surveys, using the following process:

- 1) Respondents to the online survey are asked a battery of attitudinal/behavioral questions that are correlated with the decisions to go online, join an online panel, and respond to an online survey.
- 2) Respondents to a survey offered in a mode that also reaches those who are offline (e.g., telephone) are asked the same battery of attitudinal/behavioral and demographic questions.
- 3) The data from the two modes (online survey and telephone) are merged and a statistical model is estimated to predict whether an online respondent “looks like” the type of respondent who would be more likely to answer by phone versus online
- 4) The online respondents are demographically weighted (using standard weighting techniques). In addition the propensity score is included in the weighting scheme as an additional factor in order to balance the attitudes and behaviors of the online respondents.

This process allows us to virtually eliminate the selection bias associated with Internet based to ensure the data is representative.

Online Method Details, cont...

In summary, weighting the data by key demographic variables ensures representativeness of survey data to the target population. This is applicable to both phone and online survey methods. Online surveys are subject to additional concerns about selection bias from sampling from online panels. Each of these issues, listed below, is addressed by weighting the data not only by demographics but also with **propensity score weighting**.

- **Issue:** Respondents to online surveys are part of the internet population and have elected to join an online panel. They may differ from the general population.
 - ~ **Resolution:** Propensity score weighting corrects for differences between individuals who are likely to be online panel members and individuals who are not, ensuring the data are representative of the broader population of interest, not just online panel members.
- **Issue:** Respondents who chose to take the survey for which they received an invitation may differ from those who elected not to.
 - ~ **Resolution:** Propensity score weighting also mitigates these differences.
 - ~ **Issue:** How do we know respondents are who they say they are (and part of the right target population)?
 - ~ **Resolution:** Online panels verify respondent ID at the time of registration. When respondents receive an invitation to a survey, they are screened to determine eligibility. Only respondents satisfying the eligibility requirements are able to proceed into the actual survey. In addition, the email invitation containing a unique URL to identify each individual respondent and ensure no one completes the survey more than once.