

Community Catalyst: Voters Want to See Action on Health and Economic Policy Priorities

FROM: HIT Strategies – Roshni Nedungadi, Ashley Aylward, & Erica Tebbs, Pollsters

TO: Interested parties

Community Catalyst commissioned HIT Strategies, the leading millennial and minority-owned public opinion research firm, to conduct a national poll to understand the extent to which voters prioritize health care as an element of economic wellbeing, including how they view policies aimed at addressing the underlying drivers of medical debt. The survey consisted of 1000 registered voters nationally, with oversamples of Black, Latino/a, AAPI and young (aged 18-39) registered voters, conducted via online panel. The results reinforce the resonance of policies that connect health care affordability, people's overall health, and their economic well-being. As HIT's research demonstrates, these policies are especially supported by Black voters, Latino/a voters, and LGBTQ+ voters, leaning into a vast potential with these voters and communities to enact change that benefits all.

Key Takeaways

- 1. Though health care costs are not organically top-of-mind for most voters when it comes to cost-of-living, most voters struggle to afford their health care costs and/or insurance plans.** When given a list of issues, most voters agree that cost of living (52%) and economy (49% selected) are of utmost importance, while 28% say health care - lower on the list of priorities. However, though almost all are insured (91%), the majority of voters nationally are still struggling to afford health care costs and/or their insurance plan (23% can afford insurance but struggle to afford other health care costs, and 32% struggle to afford both insurance and other health care costs, together making up 55% of the audience). Close to half report they currently have some form of medical debt (43%).
- 2. There is overwhelming bipartisan support for greater action from government on dental care, medical debt, and non-profit hospital accountability.** The most popular policies were: making dental care part of what insurance companies must cover (83% total support, 62% strongly support) and removing all medical debt from credit scores (75% support, 57% strongly support). Protection from hospitals' extraordinary billing and collection practices was also highly supported (71% support, 45% strongly support). Overall, a strong majority of voters (60% or more) supported each of Community Catalyst's policy proposals. Majority support persists across demographics and political ideologies, highlighting medical debt and hospital accountability as unifying issues.
- 3. There is an opportunity to improve cost-of-living expenses through health care policies that prevent medical debt and make dental care more affordable.** Most voters say the policies tested will ease their living expenses: they predict that insurance coverage of dental care (66% total impact, 37% big impact) and policies aimed at preventing medical debt (68% total impact, 33% big impact) would have the biggest impact on their own cost of living. Parents, young voters under 40, Black voters, and Latino/a voters predict even higher impact.
- 4. Voters across the political spectrum want to see major change in the health care system, emphasizing the desire among voters for bipartisan action in this area.** Voters want to see substantial change in the health care system (71% say it needs major change or be completely rebuilt). This includes 74% of self-ID Democrats, 75% of Independents, and 66% of Republicans.

High health care costs directly impact living costs and economic security for many voters, emphasizing the importance of policies that address health care affordability. Though the vast majority report being insured, close to half (43%) have some form of medical debt and most (55%) report struggling to afford insurance and/or health care costs for themselves and their families. Parents with children under 18 (65%), especially Latino/a parents (71%) and Black parents (62%), were most likely to report having medical debt. Of those who say they are struggling to afford insurance and health care costs, over half (56%) report having delayed or foregone dental care services due to its cost, highlighting dental care as a problematic area when it comes to affordability.

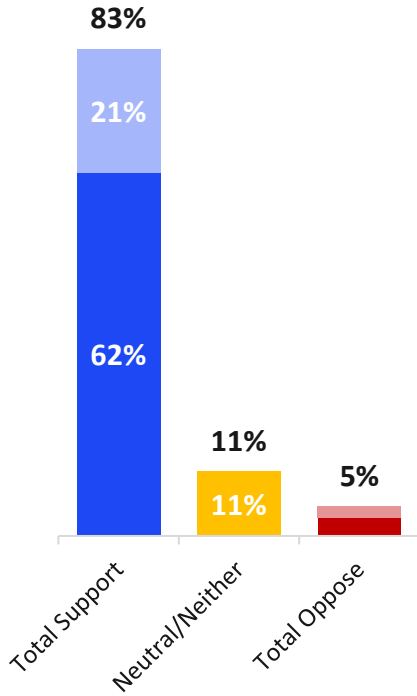
There is overwhelming support for Community Catalyst’s health and economic justice policy proposals, both generally and among key audiences. While these policies were popular across demographics, Black voters, Latino/a voters, and LGBTQ+ voters consistently reported even higher support. The proposals were framed with brief, neutral contextual information about the purpose and functionality of each policy, contributing to the understanding of each policy and therefore the support (see Context & Scene Setting for full question wording). While some education is needed on these policies, there is organic support once voters are aware of them.

Overall, there is a strong case for implementing these policies in the mission to make health care more affordable and in addressing cost-of-living at large.

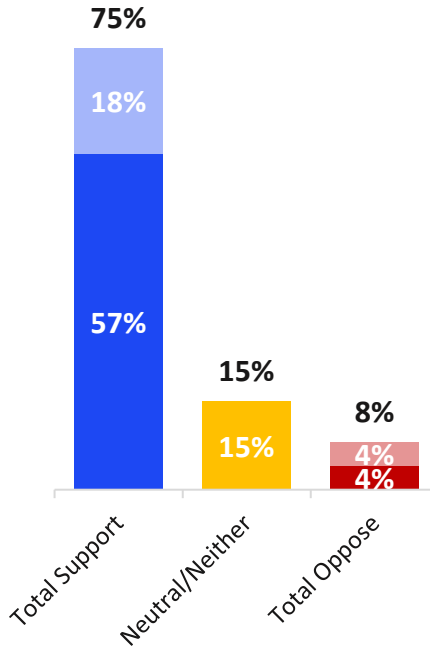
- Voters support policies aimed at preventing medical debt:
 - Insurance coverage of dental care (included as Essential Health Benefit):
 - 83% of voters say they *support* this proposal, with 62% saying they *strongly support* it
 - 66% say it would have a *big or moderate impact* on easing their living expenses
 - Removing medical debt from credit scores
 - 75% of voters say they *support* this proposal, with 57% saying they *strongly support* it
 - Prohibiting the promotion of deferred interest credit cards in medical settings
 - 61% of voters say they *support* this proposal, with 36% saying they *strongly support* it
- Voters support policies that hold non-profit hospitals accountable:
 - Obligating hospitals to directly inform patients of their payment options, including financial assistance
 - 72% of voters say they *support* this proposal, with 43% saying they *strongly support* it
 - Prohibiting hospitals from billing and collection practices that can lead to home foreclosures and bank account seizures (Extraordinary Collection Actions)
 - 71% of voters say they *support* this proposal, with 45% saying they *strongly support* it
 - Prohibiting hospitals from delaying or denying medically necessary care for patients that have not yet paid past medical bills
 - 69% of voters say they *support* this proposal, with 47% saying they *strongly support* it

Q18, 23, 26, 28, 29, 30. How much do you support or oppose the proposal to [POLICY]?

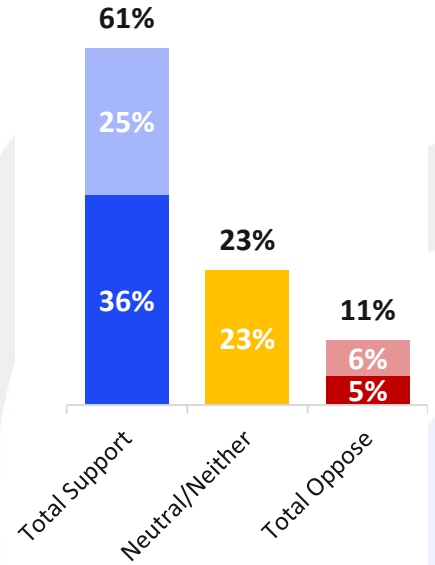
Include Dental Care as Essential Health Benefit



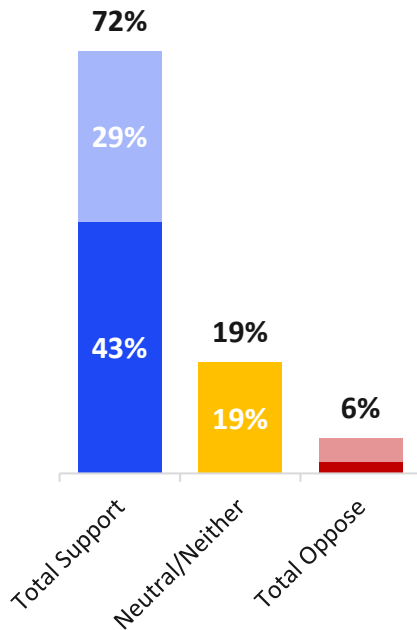
Remove all Medical Debt from Credit Scores



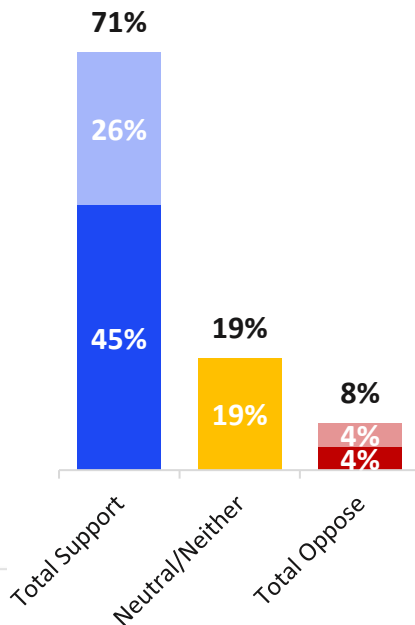
Prohibit the Promotion of Deferred Interest Credit Cards in Medical Settings



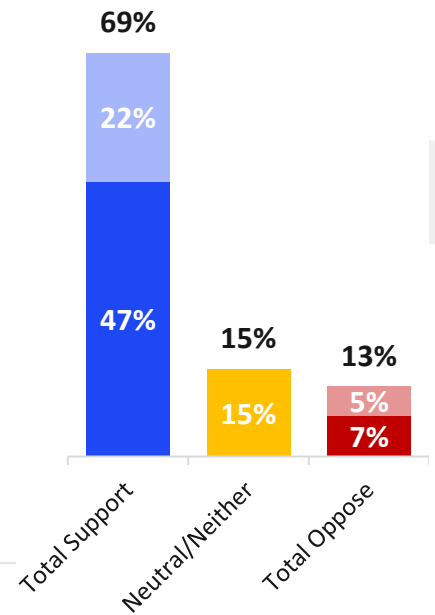
Nonprofit Hospitals: Hold Non-Profit Hospitals Accountable, Inform Patients of Payment Options



Nonprofit Hospitals: Prohibit Extraordinary Billing and Collection Practices



Nonprofit Hospitals: Prohibit Delaying or Denying Medically Necessary Care due to Nonpayment



Policy	Context & Scene Setting in Question Wording
<p>Include Dental Care as Essential Health Benefit</p>	<p>Currently, dental care is not typically included in most health insurance plans. Some policymakers have proposed including dental care, like cleanings and cavity fillings, as part of the benefits insurance plans are required to cover.</p>
<p>Remove all Medical Debt from Credit Scores</p>	<p>Currently, unpaid medical bills over \$500 can show up on credit reports and have resulted in individuals facing challenges when it comes to buying a home, signing a lease, or even getting a job due to downgraded credit. Some policymakers have proposed establishing protections for people by preventing all medical debt from impacting an individual's credit score – meaning all unpaid medical bills, including those for medically necessary procedures, would no longer show up on credit reports.</p>
<p>Prohibit the Promotion of Deferred Interest Credit Cards in Medical Settings</p>	<p>Deferred interest medical and dental credit cards promise patients “0% interest” during a promotional period. However, if the entire balance is not fully paid off by the end of the promotional period, high interest rates are applied to all charges, including those that have already been paid off, often leaving patients with even higher debt. Some policymakers have proposed prohibiting the promotion of deferred interest credit cards in medical settings – including emergency rooms, hospitals, dental and doctor’s offices – to protect people from these misleading practices that often result in additional debt.</p>
<p>Nonprofit Hospital Policy Questions Introduction</p>	<p>In exchange for not having to pay taxes, non-profit hospitals are required to provide free or discounted health services, known as “charity care,” to some patients that are unable to pay for all or a portion of the services they receive. But many patients do not know these options for financial support exist.</p>
<p>Inform Patients of Payment Options</p>	<p>Some policymakers have proposed policies that hold non-profit hospitals more accountable in their duty to provide free or discounted services, such as obligating hospitals to directly inform patients of their payment options – including financial assistance and if they are eligible for free services.</p>
<p>Prohibit Extraordinary Billing and Collection Practices</p>	<p>Some policymakers have proposed policies that prohibit hospitals from certain billing and collection practices that can lead to home foreclosures and bank account seizures of patients with unpaid medical bills.</p>
<p>Prohibit Delaying or Denying Medically Necessary Care due to Nonpayment</p>	<p>Some policymakers have proposed policies that prohibit hospitals from delaying or denying medically necessary care for patients that have not yet paid past medical bills.</p>

RESEARCH CONTENT CONTACT

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These findings are from a proprietary survey conducted by HIT Strategies on behalf of Community Catalyst. This survey consisted of 1000 registered voters nationally, with 4 National Oversamples: 100 Black registered voters, 100 Latino/a registered voters, 100 AAPI registered voters, and 100 young registered voters (aged 18-39). The survey was conducted via online panel. The survey fielded from February 21st – 28th, 2024 and the margin of error is +/- 2.84%. Margin of error is higher among subgroups.