Florida Voters' Attitudes toward Expanding the Medicaid Program in the State

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Summary: Public support for Medicaid expansion in Florida and in the nation is considerably greater than for the Affordable Care Act (ACA) as a whole although support of and opposition to both divide along political party lines. Support for Medicaid expansion among registered voters in Florida is strongest among Democrats and is similar in that respect to support found in polls of similar groups across the country. Controlling for everything else, we found that racial and ethnic minorities and the less affluent favor expansion more strongly while there are no significant differences among men and the women or young and old. This discussion of survey results shows that different wording of questions, different samples of poll participants, and surveys conducted in different states do not markedly change the fact that voters' support for Medicaid expansion is greater than their opposition to it.

Background

The Medicaid program, a federal-state partnership with shared financing, provides health care insurance coverage to low-income children, parents, the elderly and the disabled. In FY 2010, Medicaid covered 66.4 million beneficiaries in the United States including 3.7 million people in Florida. In both cases, roughly half of those covered were children.¹

A provision in the federal Affordable Care Act (ACA) enacted in 2010 expanded Medicaid to previously ineligible low-income adults under age 65 with family incomes at or below 138 percent of the federal poverty level (FPL) which was \$32,499 for a family of four, in 2013.² On March 23, 2010, when President Obama signed the ACA, the Florida Attorney General filed a lawsuit on behalf of the state in federal district court challenging two provisions of the ACA- the requirement that individuals maintain a minimum level of health insurance coverage and the requirement that states expand Medicaid eligibility.³ Florida was joined by 25 other states in the law suit.⁴ Under the ACA, the Secretary of Health and Human Services was authorized to withhold existing Medicaid funds from states that refused to comply with the expansion mandate. In its decision of June 28, 2012, the Supreme Court upheld the constitutionality of the individual mandate but not the provision that would have penalized states for failure to comply with the Medicaid expansion requirements.⁵ That decision in effect made Medicaid expansion decisions optional for states.

States had to submit to the Department of Health & Human Services amendments to state Medicaid plans that would expand insurance coverage to populations unserved prior to the enactment of ACA. As of October 2013, 25 states and the District of Columbia were moving toward Medicaid expansion. The 25 remaining states, including Florida, have no approved agreements in place. Three states – Arkansas, Iowa, and Michigan – received approval for Section 1115 research and demonstration waivers to expand coverage to eligible uninsured residents. Although Florida has neither enacted legislation nor been granted a waiver to provide an alternative Medicaid expansion scheme, several measures were

considered during the 2013 legislative session to provide access to health insurance coverage to more low-income people.⁸

Legislation on Medicaid expansion has yet to advance during the 2014 session. Assuming there is any movement toward that end, there are legislative vehicles. For example, a bill by Senator Rene Garcia, a Republican from Hialeah, would authorize the corporation that administers the State Children's Insurance Program, the Florida Healthy Kids Corporation, to administer a health care program for uninsured adults. The bill would amend the statute establishing the Corporation to authorize the corporation to provide to eligible uninsured adults an "alternative benefit package" and make use of "a unique network of providers and contracts." A comprehensive analysis of the new program would be conducted to determine whether or not to continue the new program after an initial period of three years. According to the bill, any benefits provided through the new program would not be considered an entitlement. ¹⁰

The future cost to the state of ACA-related Medicaid expansion is the issue most often cited in public deliberations of the issue. The ACA does not require a state financial match for the first three years of implementation of expanded Medicaid coverage, but a 10% match will be phased in during subsequent years. In Florida, based on projections from the Social Services Estimating Conference, the federal funding share was estimated in 2013 to be approximately \$51.5 billion for the first ten years of expanded Medicaid coverage. Proponents point to the forgone federal revenue resulting from rejection of Medicaid expansion, whereas opponents note increasing state funding obligations after the initial three years, totaling an estimated \$3.5 billion for a seven-year period ending in SFY 2022-2023.

Public Support for Legislation Regarding Medicaid Expansion

While the Legislature has yet to act on Medicaid expansion, Florida voters are more likely to support than oppose such a measure according to results of a recent poll. Between January 27 and February 1, 2013, the Bureau of Economic and Business Research (BEBR), in cooperation with the Bob Graham Center for Public Service at the University, conducted telephone interviews of 1,006 Florida registered voters. The survey posed questions eliciting Florida voters' attitudes toward various public policies before the Legislature. One question asked: "What is your position toward expanding the Medicaid program in Florida?" In the following discussion percentages represent the fraction of the total number of persons who responded in favor or opposition. The methodology is discussed in more detail in Appendix 1.

Sixty-seven percent of voters supported Medicaid expansion and 27% opposed it. A majority of all groups identified among the poll respondents (Democrats, women, men, racial and ethnic minorities, etc.) favored Medicaid expansion, with the exception of those who classify themselves as Republicans, rather than Independents or Democrats. Republicans were evenly split between those in favor (50%) and those opposed (50%) to Medicaid expansion. By contrast, 88% of Democrats expressed support for expansion. Sixty-six percent of respondents who live in a Florida State House or Senate district currently represented by a Republican favor expanding Medicaid. In the Florida State House and Senate districts

currently represented by Democrats, the percentages in favor of expansion were: 78% and 79%, respectively.

Controlling for everything else, we found that Hispanics, African Americans, and the less affluent favor expansion more strongly while there are no significant differences in preference among men and women or young and old. Men were slightly less likely than women to favor expansion 69% to 71%, an insignificant difference. Those 65 and older were less in favor than younger adults, 68% to 70%, again insignificant. Groups significantly more in favor of expansion were Hispanics (81%) and African Americans (89%). Respondents from households with incomes of \$125,000 or above were significantly less likely than those from other households to favor expansion, 60% to 71%. ¹⁵

Medicaid expansion was also supported by Florida registered voters in a poll of 1,176 voters conducted in June 2013 by Quinnipiac University. That survey found that voters favored Medicaid expansion by 49% to 40%. The question was framed differently than in the BEBR survey with reference made in the Quinnipiac poll to Medicaid as a "government program": "As you may know Medicaid is a government program that pays for health care for low-income people and others with certain disabilities. Do you think that increasing the number of people eligible for Medicaid coverage in Florida is a good idea or a bad idea?" While the level of support surpassed that of opposition, slightly less than half the respondents (49%) thought Medicaid expansion was a good idea compared to 40% who did not. Demographic characteristics were similar to those in the BEBR survey in terms of gender, ethnic/racial minority, and income. However, the Quinnipiac survey showed less support by Republicans and Democrats than in BEBR's survey. The properties of th

A half year before the Quinnipiac University poll and a year before the BEBR poll, registered Florida voters were polled by the American Cancer Society Cancer Action Network (ACS CAN). ACS CAN phrased the question in terms of whether Florida should accept federal money to cover more people with Medicaid or turn the expansion money down. Responses were: 63% in support of accepting the money and 25% opposed. The respondents were then asked to listen to brief statements about the issue, one for each side. After listening to the statements, respondents changed their answers only slightly, to 62% in favor and 28% opposed.

In addition to surveying Floridian voters, ACS CAN posed the same set of questions about Medicaid expansion to voters in six other states—Kentucky, Michigan, New Mexico, Iowa, New Jersey and Texas. Responses in the other six states surveyed by ACS CAN -- whether the state should accept federal money to cover more people with Medicaid or turn the expansion money down --also favored accepting funds to expand Medicaid. Responses in Kentucky (63%), Michigan (63%), and New Mexico (65%) were similar to those in Florida (63%). Support for Medicaid expansion in New Jersey was higher, at 70%. Support in Texas and Iowa was lower, at 58% and 57%, respectively. In all six other states, expansion was favored by larger shares of women, young voters, respondents with lower incomes, Democrats, and racial/ethnic minorities.²⁰ A majority of white registered voters supported Medicaid expansion in every state but Texas (47%). After hearing the arguments for and against, respondents in all states still favored expansion by wider margins over those opposed, although, as in Florida, overall support was lower in each case.

The wording in the ACS CAN survey of voters in seven states including Florida and Texas could certainly have weakened opposition to expansion. The BEBR question made no reference to the fact that the funding was federal as was the case with ACS CAN. The Quinnipiac survey may have strengthened opposition, if anything, in that it referred to Medicaid as a "government program. " Yet, despite the differences in wording in the various surveys, they reflect greater support for Medicaid expansion than opposition. This is particularly noteworthy with respect to Texas and Florida, both states with the highest uninsured populations in the United States lacking Medicaid expansion programs.

Public Support Regarding the Affordable Care Act

Although respondents to the BEBR survey were largely supportive of Medicaid expansion, they were less positive about the existing version of the ACA which contained the Medicaid expansion provisions. The January 2014 BEBR survey asked: "What would you like to see Congress do with the health care law?" Respondents were given several options: 1. Keep the health care law in place as it is; 2. Make minor changes to the health care law; 3. Make major changes to the health care law; 4. Or repeal the health care law entirely." A much smaller percentage of respondents (39% in total) were supportive of keeping the ACA as is (12%) or making minor changes (27%). Those supporting major changes to the ACA (19%) or its repeal (38%) represented the majority of responders to the question, 57%. The remaining 4% did not respond or did not know.

Table 1
Congressional Action on the ACA

Keep the health care law in place as is	12%
Make minor changes to the health care law	27%
Make major changes to the health care law	19%
Repeal the health care law entirely	38%
Don't know/refused	4%
Total	100%

In terms of party affiliation, Democrats were much more likely than Republicans to favor leaving the law in place or making minor changes (25%) compared to Republicans (4%). On the other hand, Republicans were much more supportive of making major changes to the law or repealing it (33%) than were Democrats (11%). The table below displays the responses to the question about amending the ACA.

A University of Texas/ Texas Tribune survey of registered voters (February 2014) also gauged voter attitudes toward the ACA. The respondents were asked to indicate their level of support. Only 32% indicated they were very favorable (15%) or somewhat favorable (17%); 9% were neither favorable nor unfavorable; 7% were somewhat unfavorable; 49% were very unfavorable and 3% said they had no opinion or did not respond. Because the questions were worded differently, one can only analyze general support or opposition. In both Florida and Texas, there appears to be more opposition to than support for the ACA and the opposition seems to be more intense than the overall support.

Around the time of the BEBR survey (January 2014), the Kaiser Family Foundation surveyed over 1,500 adults in Florida (not necessarily registered voters) asking a question that was phrased differently than the BEBR question: "Do you think opponents of the health care law should continue their efforts to repeal the law or should they accept that it's the law and work to improve it?" Of those surveyed, 55% responded that opponents should accept the law as is and should support it and 38% supported efforts to repeal the law, the same percentage that supported repeal in the BEBR survey. The remaining 6% replied that they did not know or did not respond. Although outright repeal of the law was not supported by the majority of respondents, it was supported by a sizeable minority.

In December 2013, the Pew Research Center posed a more general question to over 2,000 adults, asking whether them whether they supported or opposed health care reform. Like the Kaiser Family Foundation survey, the Pew Research Center survey directed its question to adults who were not necessarily voters. Of those responding, 54% disapproved and 41% approved of the health care law. That result is really not too dissimilar from the 57% in the BEBR survey who opted for repealing or making major changes to the law compared to the 39% who supported leaving ACA as is or making minor changes to it.

A Disconnect Between Voters' Attitudes toward Medicaid Expansion and the Affordable Care Act?

One might ask why is there such a difference in support levels for Medicaid expansion and the ACA in general. Half the states, including the populous states of California and New York, have already expanded their respective Medicaid programs. Many legislatures in the other states are currently considering their options since the U.S. Supreme Court's decision has shifted the focus of Medicaid expansion under the ACA from the national to the state level. The biggest obstacle for state legislatures in terms of supporting expansion appears to revolve around future costs to the state once the initial three years of 100% federally-funded coverage have passed and the 90% (federal)-10% (state) matching requirement becomes effective.

The ACA is much broader in scope than the Medicaid program expansion issue. There has been extensive nationwide, as well as state coverage in the press and elsewhere, about the challenges and problems that have afflicted the development of the on-line health insurance exchanges and other aspects of implementing the ACA. These problems include, among others, the complexity of the law; state and federal management of the rollout of the health care exchanges; late changes to compliance requirements, and political opposition to the law.²⁶

The Pew Research Center recently polled adults about their perceptions of problems with the ACA.²⁷ Regardless of political party affiliation, a majority in each party cited the complexity of the law as a major reason for the law's problems. There was far less consensus, however, on other possible reasons for those problems, with Republicans much more likely than Democrats to point to poor management by the Obama administration and flaws in the law itself as major reasons for the law's difficulties. A much larger percentage of Democrats (74%) said that a major reason was politicians who oppose the law trying to undermine it, compared to 23% Republicans and 47% Independents.

In short, a plausible explanation for the relatively greater support of Medicaid expansion than of ACA is that many states, including the populous states of California and New York, have already made the decision to move forward with Medicaid expansion whereas multiple challenges affecting ACA implementation continue to emerge and receive widespread media attention.

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ENDNOTES:

http://www.medicaid.gov/AffordableCareAct/Medicaid-Moving-Forward-2014/Downloads/Medicaid-and-CHIP-Eligibility-Levels-Table.pdf. New Hampshire's Medicaid expansion agreement has not been finalized.

http://edr.state.fl.us/Content/conferences/medicaid/FederalAffordableHealthCareActEstimates.pdf.

¹ Rachel Arguello and Alexandra Gates, "The Florida Health Care Landscape," The Henry J. Kaiser Family Foundation, November 12, 2013, Figure 6, http://kff.org/health-reform/fact-sheet/the-florida-health-care-landscape/.

² The FPL triggering Medicaid benefits varies by type of recipient and by state. In general, in states that have not opted for Medicaid expansion, children under age 18 and pregnant women qualify for Medicaid benefits at higher income levels than do parents and other adults. In Florida, as in other states not authorizing Medicaid expansion, adults other than pregnant women do not qualify for the most part.

³ State of Florida v. United States Department of Health and Human Services, 648 F. 3d 1245 (11th Cir. 2011).

⁴ In addition to Florida, these states include Alabama, Alaska, Arizona, Colorado, Georgia, Idaho, Indiana, Iowa, Kansas, Louisiana, Maine, Michigan, Mississippi, Nebraska, Nevada, North Dakota, Ohio, Pennsylvania, South Carolina, South Dakota, Texas, Utah, Washington, Wisconsin, and Wyoming.

⁵ National Federation of Independent Business. v. Sebelius, 567_U.S. (2012). The U.S. Supreme Court opinion was issued under the name of a lawsuit brought by the National Federation of Independent Business and other plaintiffs that had been combined with the state-initiated suit (see endnote 3).

⁶ Center for Medicare & Medicaid Services, Department of Health & Human Services, "Re: New Option for Coverage of Individuals under Medicaid," SMDL #10-005, April 9, 2010, http://downloads.cms.gov/cmsgov/archived-downloads/SMDL/downloads/SMD10005.PDF.

⁷ For the list of states moving toward Medicaid expansion, see

⁸ See a summary of legislative actions by James L. Rossica, "Miami Republican Files Bill to Expand Medicaid in Florida," January 25, 2014, http://www.huffingtonpost.com/2014/01/25/florida-medicaid-expansion_n_4666983.html.

⁹ 2014 S.B. 710, §3.

¹⁰ Ibid.

¹¹ The "first three years" of Medicaid expansion are 2014-2016. The current federal share of 'regular' Medicaid is 58.79% for Florida in FFY 2014, but each state's match rate is separately calculated based on average personal income. See Table A-1; https://www.fas.org/sgp/crs/misc/R42941.pdf.

¹² Economic and Demographic Research, "Social Services Estimating Conference," Estimates Related to Federal Affordable Care Act: Title XIX (Medicaid) & Title XXI (CHIP) Programs, Adopted revised for conference, March 7, 2013, pp. 15-16,

¹⁴ A statistically significant difference at the 2% level using a two-tailed Fisher's exact test.

¹⁵ These differences hold up in logit regression models controlling for all classifications at once.

¹⁶ This was a survey of 1,176 registered voters with a margin of error of 2.9%. The survey was conducted June 11-16, 2013. See http://www.quinnipiac.edu/images/polling/fl/fl06192013.pdf.

¹⁷ If results are confined only to voters responding good idea or bad idea, the breakdown is 80% Democrats and 30% Republicans that it was a good idea.

²¹ University of Texas/Texas Tribune, "Texas Statewide Survey," February 2014, p. 16, http://www.laits.utexas.edu/txp media/html/poll/files/201402-summary.pdf. This was a sample of 1,200 registered Texas voters. See methodology in http://www.laits.utexas.edu/txp media/html/poll/files/201402-codebook.pdf.

codebook.pdf.
 The responses in the February 2014 survey were pretty similar to those in the October 2013 survey of Texas registered voters. Positions opposing the ACA may have hardened slightly with 46% of voters reporting to be very unfavorable in October 2013 and 49% in February 2014.

²³ The Henry J. Kaiser Family Foundation, "Kaiser Family Tracking Poll: January 2014," January 30, 2014, http://kff.org/health-reform/poll-finding/kaiser-health-tracking-poll-january-2014. This was a random telephone survey of 1,506 adults age 18 years old and older residing in the United States. For the methodology, see http://kff.org/report-section/kaiser-health-tracking-poll-january-2014-methodology/.

²⁴ Pew Research Center, "Obama Job Rating Regains Some Ground, but 2013 Has Taken a Toll," December 10, 2013, http://www.people-press.org/files/legacy-pdf/12-10-13%20Obama%20Health%20Care%20Release.pdf. ²⁵ Ibid., p. 8.

²⁶ According to Politico Magazine, the House of Representatives has voted to repeal the ACA 48 times. See http://www.politico.com/magazine/story/2014/01/house-republicans-obamacare-repeal-votes-102911.html. ²⁷ Ibid., p. 13.

¹⁸ The ACS CAN hired two polling organizations, one liberal and one conservative, to work together. The pollsters, Lake Research Partners and GS Strategy Group, conducted a survey of 982 registered voters on December 13-22, 2012.

¹⁹ GS Strategy Group, "By a Nearly 40-Point Margin, Florida Voters Accepting Federal Funds to Broaden Access to Health Coverage Through Medicaid," January 23, 2013, http://www.acscan.org/content/wp-content/uploads/2013/01/ACS-CAN-Report Florida.pdf.

content/uploads/2013/01/ACS-CAN-Report Florida.pdf.

²⁰ Individual states reports can be accessed from a hyperlink by state at American Cancer Society Cancer Action
Network, "Polling: Public Wants States to Use Federal Funds to Cover Uninsured through Medicaid," January 22,
2013, http://www.acscan.org/content/media-center/medicaid-poll. There was no breakdown for minorities in the lowa survey findings.

Appendix 1

Survey results are based on data collected by the Bureau of Economic and Business Research from 1,006 telephone and cell phone interviews of registered voters, with a 3 percent margin of error. The survey used numbers provided by the Florida Voter registration database. The Bureau conducted the interviews between January 27 and February 1, 2013. The sample came from the Florida Voter registration database. The Bureau weighted the results by age, party identification, and media market in the Florida Voter registration database.

A method of testing whether the sample is representative of Florida voters is to use precinct data and compare it to the respondents in Florida precincts and to the profile of registered voters in Florida's 2012 presidential election as reflected by the U.S. Census data. Based on that analysis, we have concluded that the BEBR January 2014 voter sample is quite representative. To determine representativeness, we looked at the distribution of respondents across Florida's 6,323 voting precincts and found that the 1,001 of 1,006 respondents who could be matched come from 902 different precincts, with a maximum of three respondents from a single precinct.

Two types of precincts are more likely to be over-represented. The first is precincts with more voters. The likelihood of a voter from any given precinct being included in the sample rises in proportion as the number of voters in a precinct increases. The second type of precinct to be over-represented is one in which the electorate tends to vote Republican. Fifty-four percent of voters in the 902 precincts with at least one BEBR survey respondent cast ballots in the November 2012 general election for the Republican presidential candidate and 47% voted for the Republican candidate for the U.S. Senate. By contrast, in the 5,385 precincts with no BEBR survey respondent, 48% of voters cast ballots for the Republican presidential candidate and 42% voted for the Republican U.S. Senate candidate. Moreover, we know statistically that among the respondents in this survey the more Republican their home precinct vote tallies were in the 2012 general election, the less likely the respondents were in 2014 to favor Medicaid expansion. Thus, without any adjustments to the over-representation of Republicans among the BEBR January 2014 respondents, the survey results would slightly understate support for Medicaid expansion, though again we cannot be certain.