

Moving Medicaid Expansion Forward

Recommendations from Message Research in Non-Expansion States

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Conservative and moderate voters are open to expansion but really need to know what is at stake. If a straight expansion of Medicaid is not viable in your state, then below is advice about how to talk about an alternative plan with conflicted voters.

FRAME THE ISSUE THE RIGHT WAY

It is important to emphasize each state's ability to design its own plan and the control the state has over how the dollars are spent. The language below tested especially well:

"STATE has an opportunity to use federal dollars to help uninsured, low-income state residents between the ages 19 and 64 buy private health insurance. The state plan is funded by money that was set aside by the Affordable Care Act. Through this plan, STATE will be able to offer affordable health coverage to XXX,XXX working families who do not get insurance through their jobs and cannot afford it on their own. This will help STATE by reducing the number of uninsured using hospital ERs and bringing \$XXX million in economic benefits to STATE including X,XXX new jobs. The state plan will be paid for with 100% federal dollars through 2016. After 2016, the federal government will pay at least 90% of the costs going forward."

1 DEFINE WHO WILL BENEFIT

1. **Define eligible individuals as "working families."** This counters perceptions these are people looking for a hand out.
2. **Give sample income amounts.** Voters are surprised that eligible individuals have such low incomes.
3. **Tell voters that Medicaid eligibility levels are very low.** They do not know that in many non-expansion states, childless adults cannot qualify and even parents must be well below the poverty line to qualify.
4. **Name the industries they work in.** Explain these are individuals working in construction, landscaping, tourism, childcare, and similar jobs that don't offer insurance. This is powerful.

2 EXPLAIN THE COVERAGE GAP

"Already XXX,XXX state residents have fallen into the 'coverage gap.' This means their incomes are too low to qualify for tax credits through HealthCare.gov and too high to qualify for Medicaid. They are stuck in the middle with no affordable insurance options because the Governor/State Legislature will not accept federal tax dollars that were set aside to help uninsured families in STATE afford coverage."

3 MAKE THESE POINTS...

- ✓ **The plan is "cost-neutral."** Cite studies by university researchers and economists that show the expansion will have no impact on the state budget.
- ✓ **We lose the money if we do not use it.** Explain the money was set aside by the ACA and that the federal government will keep it if the state does not use it to expand coverage.
- ✓ **The state can opt out.** It helps silence skeptics to say the state can opt out of the plan at anytime – particularly if the federal government does not pay its share of the costs.
- ✓ **A new hospital fee can pay the state's 10% share.** A new idea emerging in some states is to have hospitals pay some or all of the 10% the state will have to pay in two years. Voters like this.

4 RESPOND TO ATTACKS

"We cannot trust the federal government to pay their share."

- **RESPONSE:** The state can back out of the program at any time – there is no risk.

"We cannot afford the 10% share of cost."

- **RESPONSE:** The 10% cost can be paid for by a new hospital fee – there will be no cuts to education, no new taxes on you.
- **RESPONSE:** Researchers predict the expansion will be "cost neutral" to the state – savings will offset the costs.

USE MESSAGES BUILT AROUND THESE THEMES...

HARDWORKING FAMILIES: “Hardworking families in STATE need the security of quality health care coverage to get care when they need it, without facing huge medical bills or going into bankruptcy.”

ECONOMIC BENEFITS TO THE STATE: “A report sponsored by the state estimated that the expansion could bring as much as \$XXX million in economic benefits to STATE during the first three years of implementation. Because more people would now be using health care, the same report predicted the expansion would create X,XXX new jobs, most of them in health care.”

PREVENTION IS SMARTER: “It is a wiser use of our taxpayer dollars to pay for preventive care rather than continue to have uninsured state residents use the ER when they are already sick and cost more to take care of.”

USE IT OR LOSE IT: “If the State Legislature turns down the money, the federal government will keep tax dollars set aside for our state. In STATE, we are losing \$X,XXX,XXX a day, which has added up to \$XXX million dollars so far. We should spend our own tax dollars to help hardworking families in STATE who need health insurance.”

RESPOND TO HARMFUL WAIVER IDEAS

Excessive Premiums + Copays

“These are low-income families with tight budgets. They may not be able to afford premiums and copayments.”

“When other states have tried this the result was that many families did not sign up. They could not afford the costs.”

“What happens if they miss a payment because of unexpected bills? Should the family lose coverage?”

Punitive Healthy Behaviors

“Financial penalties never work. It is better to give discounts for people who get check ups, stop smoking, and who take care of their health.”

“How far do we go monitoring people’s behaviors? Will people have to breathe into a “smokelyzer” to prove they are not smoking? Do we want government monitoring our eating habits?”

Health Plan Work Requirements

“How will this be monitored? Will we have to create a new state bureaucracy to make sure people are working or looking for work? Is this a good use of tax dollars?”

“These families are already working. They are in fields like construction, landscaping, and childcare that don’t offer insurance. Work requirements are not needed and only add more bureaucracy.”

USE THESE MESSENGERS...

- Researchers and Economists
- Individual Doctors and Nurses
- Groups Representing Patients Like American Cancer Society and AARP
- Uninsured Individuals in the Coverage Gap
- Community Health Centers

Voters want to hear from neutral, informed sources. While they want to hear about impacts on hospitals, they may view hospitals as having a stake in the issue and therefore biased. Likewise, politicians should speak out on this issue but voters feel they are biased and politically motivated. Potential messengers that might work include a small business owner, a faith leader, a Dean of a Medical School, and other respected local leaders.

IT IS IMPORTANT TO “CHECK THE BOX” ON WAIVER IDEAS

In more conservative states, it may be necessary to give ground on some waiver ideas in order to pass an expansion. Voters in these states seem to need to “check the box” on these ideas and to see “personal responsibility” required in this plan. However, this research suggests voters do not want these ideas to create hardship on families or keep people from enrolling in the plan. It may be possible to build consensus around commonsense implementation of these ideas so that families are not hurt.