



Implementing Health Reform: A Communications Perspective

New Jersey
June 8, 2010
By The Herndon Alliance



States

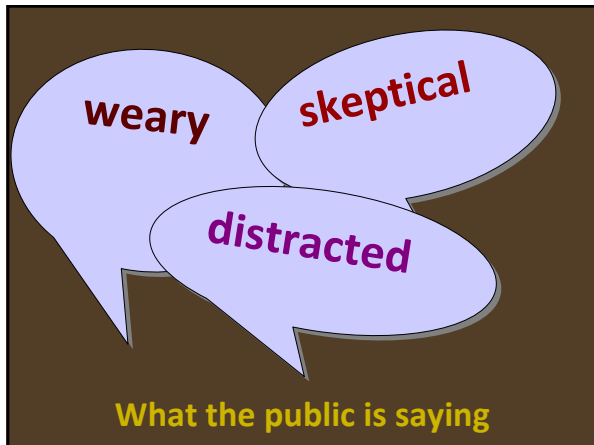
- Implement law
- Protect existing state coverage
- Address unfinished business; fix weaknesses of law
- **Public education on the value of the law**



It's about people

**Herndon Alliance
Healthcare Messaging Poll**

**Conducted April 19-25, 2010
National poll
1,000 general election likely voters
Anzalone Liszt Research**







Poll findings: page 1

- Passage of reform hasn't resulted in increased support for the law—voters still oppose by about a 9-point margin (strong opposition significantly higher than strong support);
- About 60% of the public knows: pre-existing conditions; expansion of coverage; keep your doctor and coverage; tax credits for small businesses;
- Our persuasive arguments maintain current level of support – mitigating against further loss of support; they don't win against attacks;
- Messaging with persuasive audiences should highlight:
 - establishing **trust**
 - making healthcare more **secure**

Poll findings: page 2

- While these message frames didn't increase support when head to head with a strong opposition message, they outperformed an anti-insurance company frame (which lost ground with voters overall and key audiences against the same opposition message);
- Mobilize the BASE differently from informing key audiences (focus on security, holding insurance companies accountable, and benefits for women and children);
- About 50% of seniors are still unaware of closing the donut hole.

Poll findings: page 3

Messages to **avoid**—
will undermine your broader message

- Reduce deficit
- Create jobs
- Strengthen Medicare

Challenge—

Increase understanding and support of reform in a difficult environment.

Opportunity—

About 40% of voters (55% of persuadables) say they need to know more about the law before forming an opinion.

Our job is to provide information, not rhetoric.

Education is critical

The Trust Issue — Public hard time believing.

Pew Poll: 1950's over 70% of public had 'trust' in government almost always or most of the time; 2010 only 22% of public have trust in government almost always or most of the time.

Herndon Alliance poll (4.10)

- 42% Support the new healthcare reform law
- 51% Oppose the new healthcare reform law

Wall Street Journal survey (5.14.10)

- 42% Repeal and replace
- 55% Give it a chance and improve it

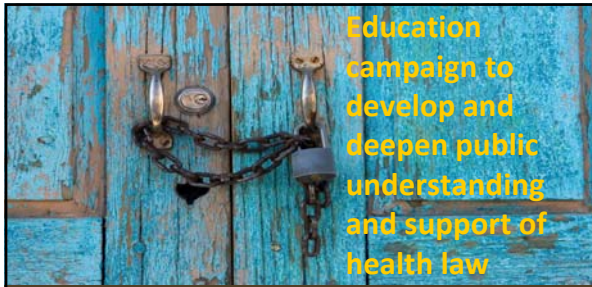
Our job? To connect with the public. To build understanding/support for the new law. to give the law a chance and improve it.

Confidence builder:

Our job is to help the public understand how the reforms will best serve them, their doctors, and the quality of their health care.



Education campaign—now through Labor Day



**Education
campaign to
develop and
deepen public
understanding
and support of
health law**

- 1) Connect with persuadable public who say they need more information about law;
- 2) Connect with the base so they speak out on behalf of reforms and approach the 2010 election with health reform in mind.

State Leaders as Messengers

- **Know your audience**
 - Keep it personal—how the reforms will impact them
 - Start the conversation where your audience is in their thinking and move them along
- **Establish strategies and tactics to implement an education campaign**
 - Handouts/mailers/PSA/letters to editors
 - Speak at community forums
 - Media
- **Identify your messengers**
Media 61%; providers 16%; AARP 10%

Public Still Needs to Know

- The law requires Members of Congress to get their healthcare coverage from the same exchange as tens of millions of Americans (21% part of the law; 51% not part of the law);
- The law closes the gap in Medicare prescription drug coverage (donut hole) and provides prevention services such as annual check-ups for seniors (48% don't know);
- The law doesn't create a government run healthcare program (47% of the public says there's a public option);
- Provides tax credits to small businesses to make health care coverage for their employees more affordable (34% of the public don't know);
- 28% of the public says the law creates death panels.

What the Public Wants to Hear

Choice + control

Peace of mind (security and stability)

Accountability

Fairness

Individual responsibility

Internal vs. External Language

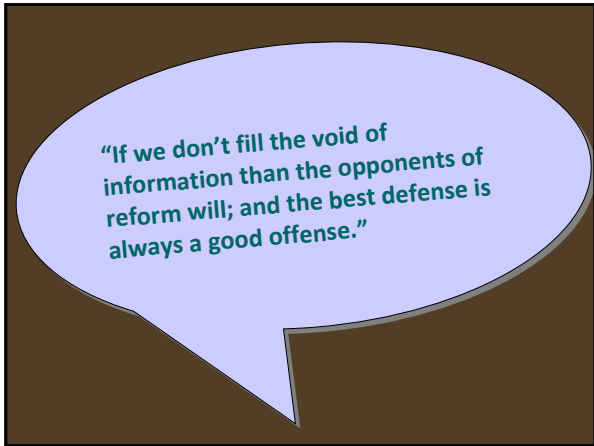
How You Can Help

CREATE A NJ BASED EDUCATION CAMPAIGN

Be proactive – set a positive narrative and get information to the public (what’s in the reform and how it will benefit them, doctors, and healthcare in general)

Speak about how the law gives us better **choices and control** of our healthcare; makes healthcare more **affordable**; makes health insurers more **accountable** and the public more responsible; **expands health coverage** to all Americans, and makes the **health system more sustainable**.

REMEMBER – The public wants facts not rhetoric.





How You Can Help

Be reactive –

1. answer briefly
2. question the source
3. your message

A = Q + 1

How You Can Help

- **Be realistic** about what the reforms will actually accomplish, about the timeframe they will be introduced, and the need to continue to improve on the current law.
- **Be realistic** about your resources (time, energy, expertise, funding).
- **Be heard widely**



Key target audiences

Independents
(20% of voters)

White women
(women +65)

Hispanics

Families (white) with incomes
\$75K-100K

Base



Persuadables are receptive to pro-reform messaging (persuasive arguments) but no silver bullet message moves them 'in support' of the law.



**Independent American voters—
top overall message (72%)**

“Reform requires that members of Congress get their healthcare coverage from the same plans as millions of Americans. It will also make healthcare coverage more secure by ensuring that working families can’t be denied coverage due to a pre-existing condition, or lose their coverage or be forced into bankruptcy when someone in their family gets sick.”

Revised Message for Base

“Reform will make healthcare coverage more secure by requiring insurance companies to cover people with pre-existing conditions and banning them from dropping coverage when someone gets sick. It will also increase competition on insurance companies to help lower costs, and will prohibit insurance companies from charging women more than men for the same coverage.”

Revised Message for Seniors

“Reform requires that Members of Congress get their healthcare coverage from the same exchange as millions of Americans. If it is good enough for Members of Congress and their families, it will be good for average Americans. The plan will also reduce prescription drug costs for seniors by closing the current coverage gap in Medicare and will give seniors free yearly check-ups.”

Persuasive Argument

“Reform will improve healthcare for women and children by prohibiting insurers from charging women more than men for the same coverage and requiring coverage for maternity care. It will also require insurance companies to cover any child with a pre-existing condition and allow children to stay on their parents insurance until they are twenty-six.”

Persuasive Argument

“Reform lowers the costs of prescription drugs for seniors by closing the coverage gap in Medicare, cuts waste from the system to ensure that Medicare funds go to improving care, and provides for annual check-ups so seniors can have better preventive care.”

Persuasive Argument

FOR BASE ONLY – at this time, independent voters aren’t as persuaded by hits on insurers as the base is.

“Insurance companies spent over five hundred million dollars opposing healthcare reform because they knew it would hold them accountable. Reform will require insurance companies to cover people with pre-existing conditions, ban them from dropping coverage for people who get sick, crack down on their unjustified premium hikes, and increase competition among them to help lower costs.”

Emphasize benefits this year:

- coverage of kids with pre-existing conditions;
- coverage of kids up to 26 years old;
- guaranteed coverage even when you get sick;
- tax credits for small businesses;
- starting to close the donut hole.



**Major attack:
big government is bad government**



“That’s what they said after Social Security passed. That’s what they said after Medicare passed. But how many of those who now oppose health reform have declined their Social Security or Medicare benefits?”

For now: “This law requires Members of Congress to get their health care coverage from the same plans as millions of Americans.”



Attacks:

- Don't need a new law - just better oversight
- Premiums are rising - it's reform's fault
- We're paying for the undeserving—Medicaid expansion will break state budgets—scarcity
- Issue specific attacks – example mandate unamerican
- Seniors are losers

Message for Attacking Opponents of Reform

(best to link them to the insurance industry and focusing on specific reforms)

_____ has received XX in campaign contributions from insurance companies and consistently sides with their interests over the interests of working families. He/she voted to allow insurance companies to continue to deny coverage based on pre-existing conditions. Voted against providing tax credits for small business to provide healthcare to their employees and opposed requiring members of Congress to have the same healthcare coverage as million of Americans.

Rising premiums:

Fairness: It's true that we may see health insurance premiums rise in the next couple of years, before all of the new law's provisions take effect. Unfortunately, we all know from personal experience that insurance companies have been increasing premiums for the past thirty years in pursuit of bigger profits. Reform will finally bring light to these unjustified premium hikes, forcing insurers to spend a greater proportion of premiums on health care than ever before – and sending customers rebates if they don't. And when all of the new law's provisions are in place, we will finally have new competitive markets that will increase competition among insurance companies, so that premiums level off for all of us.

Individual mandate:

Personal responsibility: This bill means more Americans are taking responsibility for their health care. Just as requiring all Americans to have car insurance protects other drivers, requiring everyone to have health insurance protects taxpayers by ensuring that everyone pays their fair share. For those who are unable to afford their coverage, the bill offers the largest middle class health care tax credit in our history. And for those of us with insurance, we no longer have to pay the additional \$1,000 annually to subsidize those people who opt not to have insurance and instead rely on emergency rooms—and our payments—to cover their care.

Medicaid expansion and state budgets:

Fairness; long-term stability and security: Medicaid expansion finally brings affordable health care to millions of Americans; folks who work hard, pay their taxes, play by the rules but have not been able to afford coverage. The federal government picks up the full tab for these newly eligible people for up to three years; afterwards states begin to pick up approximately 10% of the cost. This is a shared national enterprise. Those who question the benefit of the expansion are only considering one column on the state's spread sheet. By investing in the their citizens, states will begin to provide for a healthier, stronger, more productive workforce; businesses will save on costs, reinvest in their companies, and create new jobs; the state's tax base will grow; and more of our children will not have to leave their childhood homes in order to be able to secure good jobs and raise their own healthy families.

Philosophical objections--government takeover

Government as a watchdog; no more insurance company abuses: For years insurance company bureaucrats decided if treatments recommended by doctors would be covered. Reform will ensure that insurance company bureaucrats can no longer come between you and your doctor. Reform holds insurance companies accountable by providing fair rules and setting high standards. That's not a government takeover, that's government doing what it is supposed to do--working on behalf of citizens.

System change:

Quality of care (keep it personal): My patients want me to be the best doctor I can be so I provide them with the best quality of care. Examining and talking with my patients, determining the most effective treatments, and helping my patients be more proactive in preventing disease—that's what I was trained to do. The new law makes deliberate and careful changes to how we pay for care so doctors are rewarded for better quality rather than quantity. In the long run, this will allow me to provide the best care for my patients, and it will lower costs, making access more affordable.

Access to providers:

Peace of mind: Hard-working Americans like you should be able to count on getting high quality care, when you need it, from your personal doctor. We have had a shortage of primary care growing for thirty years. It's about time we started expanding the workforce of personal physicians and nurses. The new law makes great strides in solving this problem by expanding loan repayment for doctors going into primary care, training more physicians who will become personal physicians, paying these doctors 10% more when they care for you, and finally paying them for preventive services that weren't covered before. Our doctor shortage won't be solved overnight. But these provisions make real progress toward solving the problem in the long run.



Seniors feel others benefit at their expense:

Stability; affordability; eliminating waste, fraud and abuse: Seniors have worked hard and played by the rules. They should be able to count on having security in their retirement and health care that meets their needs. This law cuts waste from the system and ends government handouts to insurance companies to ensure that Medicare funds go to improving care. It also begins to lower the costs of prescription drugs for seniors by closing the coverage gap in Medicare and provides preventive services such as annual check-ups.

For more information see:
www.herndonalliance.org

Questions please contact:
sherry@herndonalliance.org
