Will Voters Support Higher Taxes to Fund Universal Health Care? Oregon, 2019



J Gen Intern Med 35(10):3120–1 DOI: 10.1007/s11606-020-05959-z © Society of General Internal Medicine 2020

INTRODUCTION

Many state legislators fear voting for universal health care (UHC) bills, believing their constituents will reject the requisite new taxes. Consequently, of 18 state legislatures that have considered them, ¹ only Vermont's legislature passed a UHC bill. Even then, it refused to enact new taxes to fund it.²

Legislative approval of UHC requires confidence that voters will accept new taxes. Half of Americans report that their federal income tax is too high.³ Tax increases to fund statewide UHC plans must be large: a 2017 RAND Corporation study in Oregon found that current statewide private health care spending (\$18 billion) approximates current total state government spending (\$16 billion).⁴

Thus, a publicly funded, statewide, universal health care plan in Oregon would require doubling state tax collections.

This distaste for new taxes may not extend to health care funding. A July 2019 survey by Elway Research (Seattle, WA) assessed Oregon voter support for a state-administered, tax-funded UHC plan that doubled or tripled state taxes.⁵ This survey was unique: no previous survey has asked voters about increasing taxes to fund statewide UHC.

Prior Presentations A press release was issued by Warren George in 2019 (see reference 5)

The results were lightly reported in local newspapers and electronic media:

- https://stateofreform.com/news/oregon/2019/08/elway-poll-findsbroad-support-in-oregon-for-universal-care/
- https://www.oregonlive.com/health/2019/08/majority-oforegonians-support-statewide-universal-health-care-poll.html
- https://khn.org/morning-briefing/wednesday-august-21-2019/#section-803914 (Kaiser Health News Morning Briefing, State Watch, August 21st. 2019).

A presentation was made to state legislators and their aides in Salem, OR, on November 18, 2019.

The results of the survey were presented at a meeting of the Oregon Health Forum, a monthly educational breakfast discussion in Portland, on November 19, 2019; at: https://www.oregonhealthforum.org/2019/10/20/november-19-2019-will-oregonians-accept-tax-funded-universal-healthcare/

There have been no presentations of this data at any scientific meetings or conferences.

Received April 15, 2020 Accepted June 4, 2020 Published online June 24, 2020 This survey question is of import to state legislators who will want to know whether voters will accept the increased taxes needed to finance a statewide UHC plan.

METHODS

In July 2019, Elway Research called 17,337 randomly selected names from the Oregon voter registration list. Up to six attempts were made to contact a voter at each number before a substitute number was called. In total, 1648 voters were contacted and 402 interviews were completed. Final completion rate was 2.3% (completed/total dialed) and final cooperation rate was 24% (completed/contacted). Respondents were asked eleven questions, including ones asking what health care problems they considered most important and the desirability of UHC. The data were weighted by age and party affiliation to reflect the Oregon electorate. Congressional District was derived from the voter registration list. The margin of sampling error is ± 5.18 at 95% confidence for full-sample analyses. All numbers presented are weighted percentages.

A complete description of questions, methods, analysis, and results can be found at the website of the survey sponsor.⁵ Question 10 asked respondents about a hypothetical, tax-funded state-administered, UHC proposal that would replace "premiums and other health care expenses" with a new tax. Respondents were told that the plan would reduce total health care spending for typical households, but "...would require an additional health care tax of two to three times as much as you pay in state income tax." Respondents were asked whether they would definitely vote for such a proposal, probably vote for it, probably vote against it, or definitely vote against it.

RESULTS

In response to question 10 and its proposed state-administered UHC plan with doubled or tripled state income taxes, 62% of respondents supported such a plan ("definitely" or "probably"). Thirty percent opposed it and the remainder were unsure (Table 1). Support among Oregon's five Congressional Districts ranged from 72% in its most urban district to 55% in its most rural (data not shown).

Table 1 Support for Universal Health Care Plan that Replaces Premiums and Out-of-Pocket Expenses with Doubled or Tripled Income Taxes (n = 402)

	Percentage
Definitely vote for it	21.9
Probably vote for it	40.5
Probably vote against it	9.4
Definitely vote against it	20.8
Not sure	7.4
Total	100.0

These are responses to the following question: "Oregon households and businesses currently spend over 16 billion dollars a year on health care. The total amount raised by Oregon's income tax is about 6 billion dollars. This means that funding universal health care for everyone in Oregon would require an additional health care tax of two to three times as much as you pay in state income tax. However, under this plan, a typical household would pay less for the new tax than they currently pay in total for premiums and health care expenses. And everyone in the state would have health care. People with employer-paid health care would pay less tax because employers who currently pay for insurance premiums would be required to pay part of the health care tax for their employees. As things stand today, would you be inclined to: Definitely vote for such a proposal; Probably vote for it; Probably vote against it; Definitely vote against such a proposal?"

DISCUSSION

In contrast to national surveys indicating voter rejection of higher taxes, this survey demonstrates that 62% of Oregon voters would "definitely" or "probably" support a state-administered UHC plan that doubled or tripled state taxes.

Legislators in Oregon, as elsewhere, balk at raising taxes for fear of constituent revolt. Support for UHC suffers, therefore, not from disregard of constituent health care but from legislative anticipation that voters will reject increased taxes, regardless of purpose. Legislators fear endangering their re-election by endorsing UHC bills.

The Elway survey suggests this fear is unfounded. A majority of Oregonians, even in its most rural Congressional District, will support higher taxes if dedicated to funding UHC.

The principal limitations of the survey were absence of a detailed plan, unspecified health care benefits, low response rate, and inability of respondents to determine impact on their personal finances.

In summary, this survey indicates that Oregon voters are far more desirous of UHC and far less intimidated by the associated taxes than national surveys suggest. We conclude that Oregon legislators, and perhaps those in other states, should seriously consider statewide UHC proposals, confident that their constituents already understand the certainty of increased taxes.

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Authors' Contribution Kenneth Rosenberg initiated, supervised and co-wrote the manuscript. Samuel Metz co-wrote the manuscript.

Funding Information Warren George funded the survey and owns the data

Compliance with Ethical Standards:

Conflict of Interest: The authors declare that they do not have a conflict of interest.

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