

AMERICANS' VIEWS OF HEALTHCARE COSTS, COVERAGE, AND POLICY

While more than \$3.3 trillion, nearly a fifth of the gross domestic product, is spent on healthcare in the United States,¹ a new national poll finds that three-quarters of Americans think they're not getting their money's worth. Americans report that costs are a factor in a number of decisions they make about their care. For example, 40 percent say they skipped a recommended medical test or treatment in the last 12 months due to cost, and 32 percent were unable to fill a prescription or took less of a medication because of its cost.

The West Health Institute and NORC at the University of Chicago poll offers new insights into how Americans feel about the costs of healthcare and how they report those costs affect their medical decisions and personal finances. It also reveals what Americans think about how lawmakers are handling the issue.

The nationwide survey was conducted February 15-19, 2018, using the AmeriSpeak® Panel, the probability-based panel of NORC at the University of Chicago. Online and telephone interviews using landlines and cell phones were conducted with 1,302 adults. The overall margin of sampling error is plus or minus 3.8 percentage points.

The high cost of healthcare strikes fear in many Americans. In fact, 4 in 10 surveyed say they fear the costs associated with a serious illness, which is more than the number who say they fear the illness itself. That fear is often based on personal experience. For example, those who report



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Five Things You Should Know

from the West Health Institute/NORC Survey on Healthcare Costs, Coverage, and Policy...

- 1) Three quarters of Americans say that our country doesn't get good value for what we spend on healthcare.
- 2) Forty percent say they skipped a recommended medical test or treatment in the last 12 months due to cost, and 32 percent were unable to fill a prescription or took less of it because of its cost.
- 3) Four in 10 say they fear the costs associated with a serious illness, which is more than the number who say they fear the illness itself.
- 4) Over half of Americans say they received a medical bill they thought was covered by insurance or where the amount they owed was higher than expected, and more than a quarter say they had a medical bill turned over to a collection agency in the past 12 months.
- 5) About half of Americans disapprove of the way their representative in Congress is handling the cost of healthcare.

¹ Centers for Medicare & Medicaid Services. <https://www.cms.gov/research-statistics-data-and-systems/statistics-trends-and-reports/nationalhealthexpenddata/nhe-fact-sheet.html>

skipping a recommended test or treatment because of the cost are about twice as likely as those who have not reported this experience to say they fear the cost of getting seriously ill.

For the majority of Americans, healthcare costs have a significant and enduring impact on financial health. Fifty-three percent of respondents say they have had a least one of the following situations occur because of healthcare costs in the last year: 36 percent report depleting their savings, 32 percent say they racked up credit card debt, 30 percent believe they had to decide between paying medical bills and basic necessities, and 41 percent report they couldn't save any money because of their spending on healthcare. Additionally, more than a quarter say they had a medical bill turned over to a collection agency.

These experiences and dissatisfaction are evident in people's assessments of how the government is handling healthcare costs and the policies they want implemented. About half of Americans disapprove of the way their representative in Congress is handling the cost of healthcare. When it comes to healthcare, Social Security, policies that affect young people, and policies that affect seniors, more than a quarter of all Americans lack trust in both political parties.

The vast majority of Americans think healthcare access for seniors should be a priority for Congress, and a majority support maintaining or increasing funding for Medicare and Social Security. The survey finds most Americans would be willing to take an increase in payroll taxes to pay for it. Though those age 18-29 are decades from retirement, more than one-third say it's important their congressional representatives advance policies to help seniors. These numbers rise with age—78 percent of those age 60 and older, 69 percent of those age 45-59, 50 percent of those age 30-44, and 36 percent of those age 18-29 say it's important.

Key findings include:

- Americans say they often go without needed care or choose less expensive options due to costs. For example, 40 percent say they skipped a recommended medical test or treatment in the last 12 months due to cost, and 32 percent were unable to fill a prescription or took less of a medication because of the cost.
- Sixty percent of those who report skipping a recommended test or treatment due to cost say they fear the cost of a serious illness compared to 27 percent of those who have not reported skipping a test or treatment because of the cost. When it comes to fear of getting a serious illness itself, 47 percent of people who have skipped a test or treatment due to cost are afraid of becoming ill compared to 24 percent of those who have not done this.
- Over half of Americans say they have received a medical bill for a cost they thought was covered by their health insurance in the past 12 months, and a similar proportion report receiving a medical bill saying the amount they owed was higher than expected. More than a quarter say they had a medical bill turned over to a collection agency.
- Thirty percent report they have had difficulty paying for basic necessities, like food, heat, and housing, 36 percent say they have had to use up all or most of their savings, 32 percent report borrowing money or increasing credit card debt, and 41 percent believe they decreased contributions to a savings plan because of healthcare expenses.
- Six in 10 Americans say it is important for their congressional representative to spend time advancing policies to help seniors gain access to high-quality, affordable healthcare and supportive services.

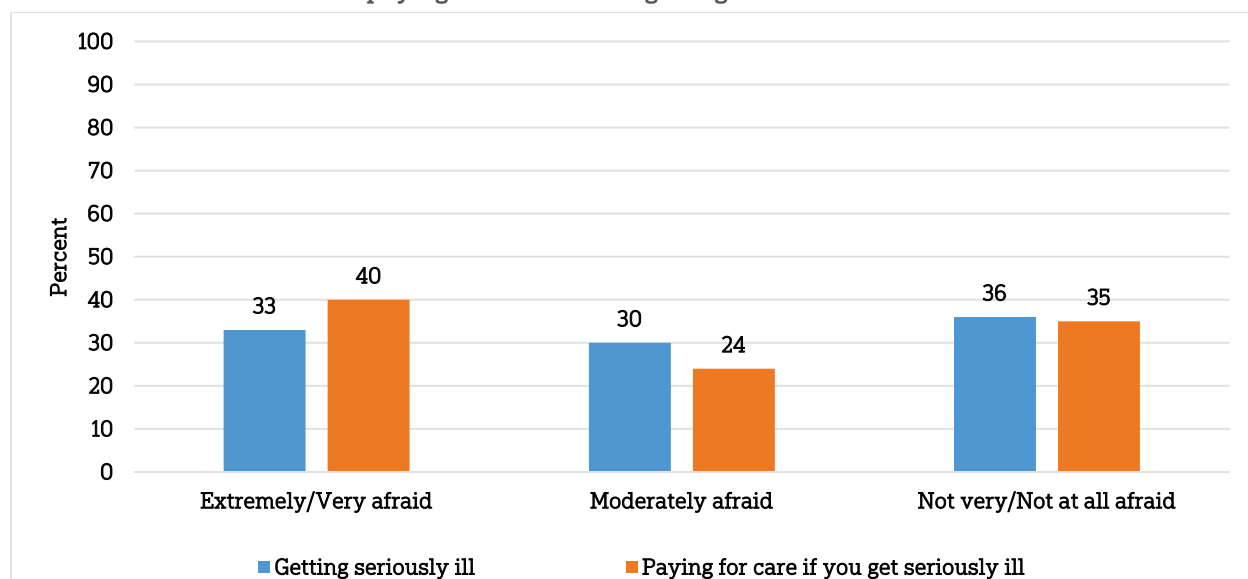
- Over half of Americans want their representative in Congress to increase funding for Medicare (56 percent) and Social Security (53 percent). Forty-two percent want an increase in spending for Medicaid, and 37 percent for the Affordable Care Act, also known as Obamacare.
- There is majority support for expanding Medicare to include eye exams for prescription glasses (75 percent), dental care (73 percent), hearing aids (71 percent), and long-term care (69 percent), even if it means an increase in the Medicare payroll tax.
- About half of Americans disapprove of the way their representative in Congress is handling the cost of healthcare, whereas just 15 percent approve, and a third neither approve nor disapprove.

SECTION 1: HEALTHCARE COSTS

More Americans are afraid of paying for healthcare for a serious illness than they are afraid of getting sick in the first place.

Healthcare costs are a looming fear for many Americans, and some are more afraid of paying for care than of becoming seriously ill. Forty percent fear the costs associated with a severe illness, compared with just 33 percent who are afraid of the illness itself. Race is associated with differences in fear of becoming seriously sick—Hispanics and blacks are more likely than whites to be afraid of getting ill (47 percent and 41 percent vs. 28 percent).

More Americans are afraid of paying for care than of getting a serious illness.



Question: How afraid are you of...

Source: West Health Institute/NORC poll conducted February 15-19, 2018, with 1,302 adults nationwide

Americans often make healthcare decisions based on costs.

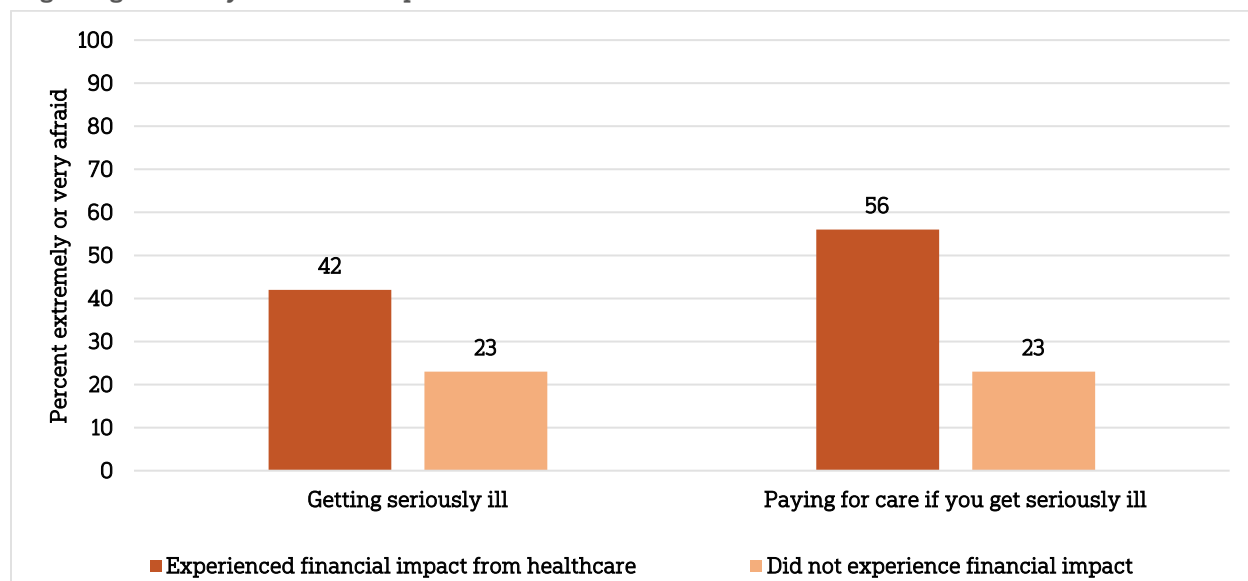
For many, these fears are based in Americans' experiences of having cost be a factor in the decisions they make in their own care.

People who report making healthcare decisions based on cost are much more likely to fear the cost of a serious illness. For example, 60 percent of people who say they have skipped a recommended test or treatment due to cost fear the cost of getting a serious illness compared to 27 percent of those who

have not done this. When it comes to fear of getting a serious illness itself, 47 percent of people who say they have skipped a test or treatment are afraid of becoming ill compared to 24 percent of those who have not done this.

Similar patterns emerge among those who report that they've faced significant financial obstacles due to healthcare costs for fear of getting seriously ill (42 percent vs. 23 percent) and paying for care if they get ill (56 percent vs. 23 percent).

Americans who report experiencing negative financial impacts due to healthcare costs are more afraid of getting seriously ill and the expenses that come with it.



Questions: How afraid are you of...

Thinking more about paying for healthcare costs, how often does paying for healthcare costs cause you to...

Source: West Health Institute/NORC poll conducted February 15-19, 2018, with 1,302 adults nationwide

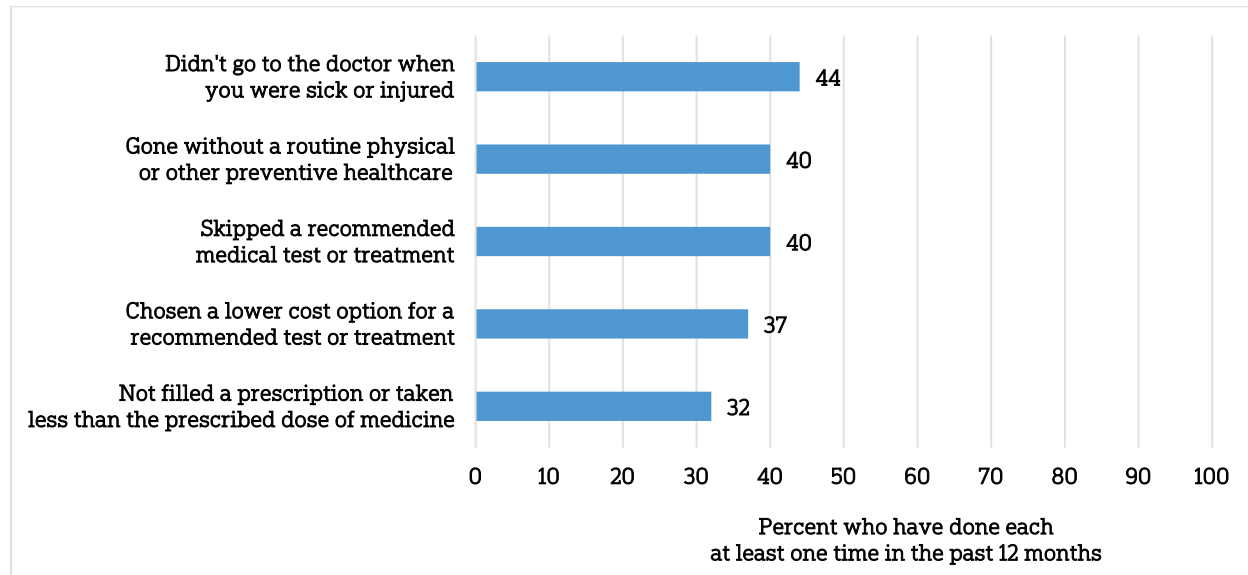
Many Americans say they have made healthcare decisions in the past year based on costs, including: 44 percent who report they did not go to the doctor when sick or injured, 40 percent who say they went without a routine physical or other preventive care, and 40 percent who report skipping a medical test or treatment. Another 37 percent say they chose a lower-cost option for a test or treatment, and 32 percent say they have not filled a prescription or have taken less than the prescribed dose of medicine.

This poll asked several specific questions regarding perceptions of costs as barriers to care. Other surveys employ more specific definitions of going without care due to costs. For example, the most recent findings from the National Health Interview Survey (NHIS) from 2015 and 2016, show that 10 percent of adults have gone without dental care because they could not afford it and less than 10 percent have gone without medical care in the past 12 months because they could not afford it.^{2,3}

² Summary Health Statistics: National Health Interview Survey, 2015.
https://ftp.cdc.gov/pub/Health_Statistics/NCHS/NHIS/SHS/2015_SHS_Table_P-9.pdf

³ Summary Health Statistics: National Health Interview Survey, 2016.
https://ftp.cdc.gov/pub/Health_Statistics/NCHS/NHIS/SHS/2016_SHS_Table_A-19.pdf

Many Americans report they have made healthcare decisions based on cost in the past 12 months.

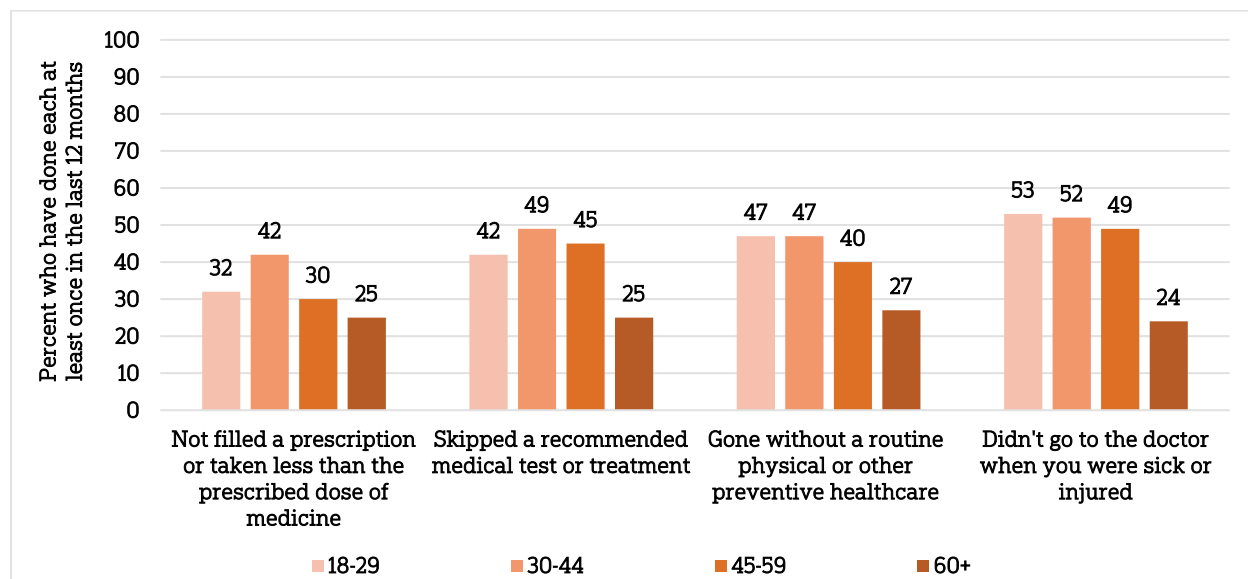


Question: Thinking more about the costs of healthcare, in the past 12 months, how often have you done any of the following because of cost?

Source: West Health Institute/NORC poll conducted February 15-19, 2018, with 1,302 adults nationwide

Young and middle-aged adults more often report going without care than seniors. Compared to those age 60 and older, adults age 18 to 59 are nearly twice as likely to say they reduced their prescription medication, skipped out on tests or treatments, went without preventive care, or avoided the doctor when sick or injured.

Younger adults more often say they go without needed care due to healthcare costs compared to seniors.

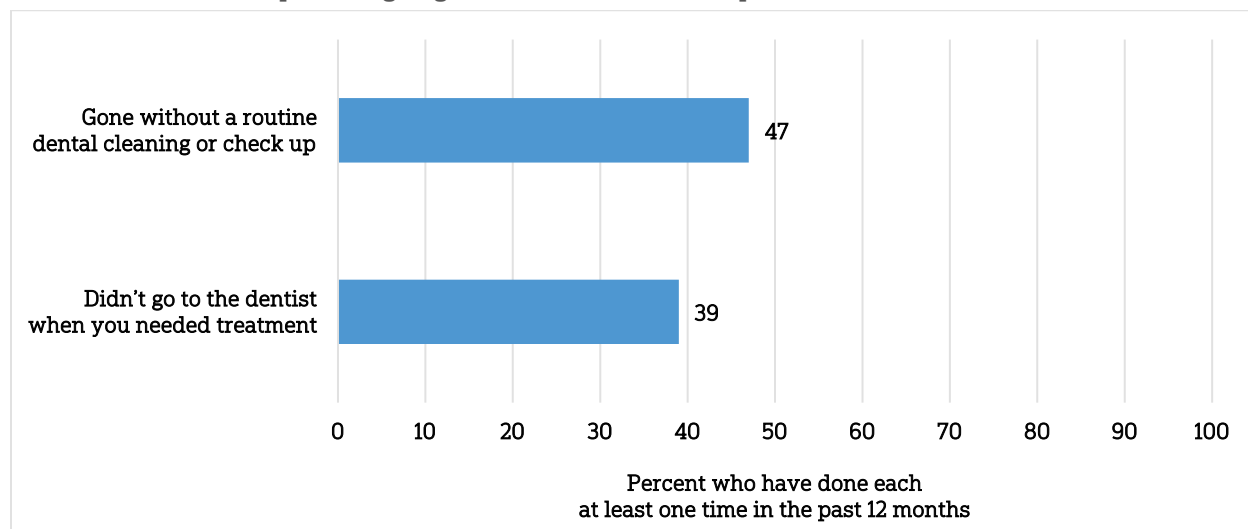


Question: Thinking more about the costs of healthcare, in the past 12 months, how often have you done any of the following because of cost?

Source: West Health Institute/NORC poll conducted February 15-19, 2018, with 1,302 adults nationwide

When it comes to dental care, many Americans say they have gone without a dental appointment due to the cost. This includes 47 percent who say they went without a routine dental cleaning or check up, and 39 percent who say they did not go to the dentist when they needed treatment.

More than one third report foregoing some dental care in the past 12 months due to cost.



Question: Thinking more about the costs of healthcare, in the past 12 months, how often have you done any of the following because of cost?

Source: West Health Institute/NORC poll conducted February 15-19, 2018, with 1,302 adults nationwide

While lower-income and less-educated Americans are no less likely than others to report going without other types of healthcare, they are more likely to say they put dental care on the back burner if the costs are high. Adults with household incomes under \$50,000 more often say they have avoided routine dental care (55 percent vs. 41 percent) or that they did not go to the dentist when treatment was needed (47 percent vs. 33 percent). In the same vein, Americans without college degrees are more likely than those with greater education to report bypassing both preventive visits to the dentist (54 percent vs. 33 percent) and visits when treatment is needed (47 percent vs. 23 percent).

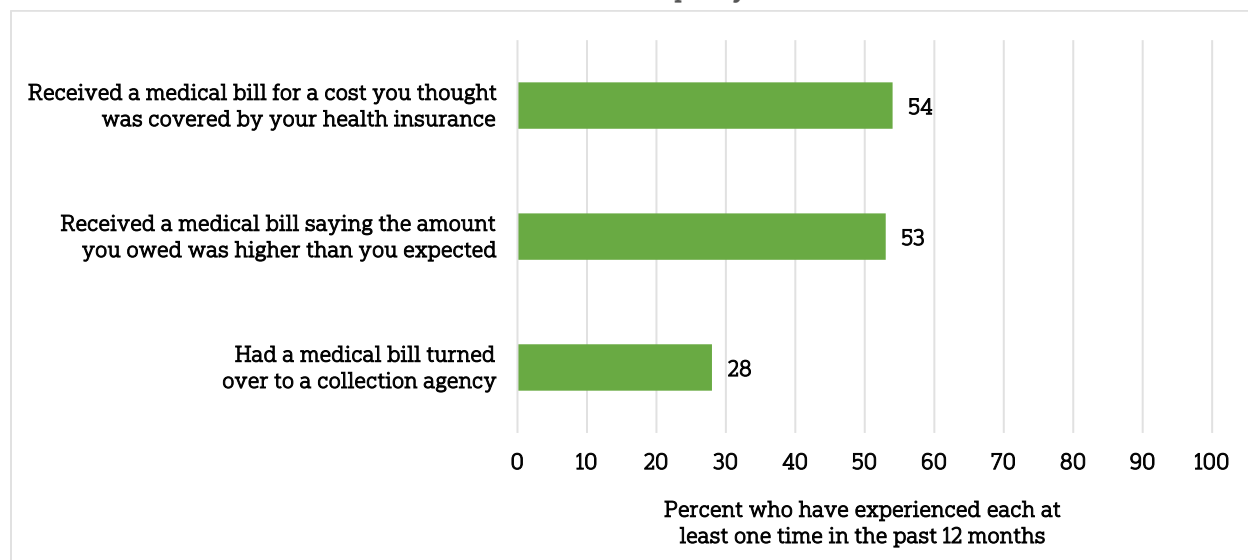
Young and middle-aged adults are also more likely to say they forego dental care due to cost. In the past 12 months, 51 percent of Americans under age 60 report going without preventive dental care due to cost compared to 36 percent of adults age 60 or older. Fewer, but still 43 percent of young and middle-aged adults say they did not go to a dentist when they needed treatment, higher than the 30 percent of seniors who said the same.

The cost of healthcare negatively affects Americans' financial decisions.

In addition to their physical health, Americans' financial health is also at stake. Many say the cost of healthcare affects them through unexpected medical bills, draining savings, and competing with the costs of basic necessities.

Over half of Americans say they have received a medical bill for a cost they thought was covered by their health insurance in the past 12 months, and a similar proportion say they have received a medical bill saying the amount they owed was higher than expected. Twenty-eight percent say they had a medical bill turned over to a collection agency. Blacks are twice as likely as whites to report having a medical bill turned over to a debt collector (44 percent vs. 22 percent). Thirty-seven percent of Hispanics say they've had this happen.

While half of Americans report being surprised by the cost of their medical bills, over a quarter have had a medical bill turned over to a debt collector in the past year.

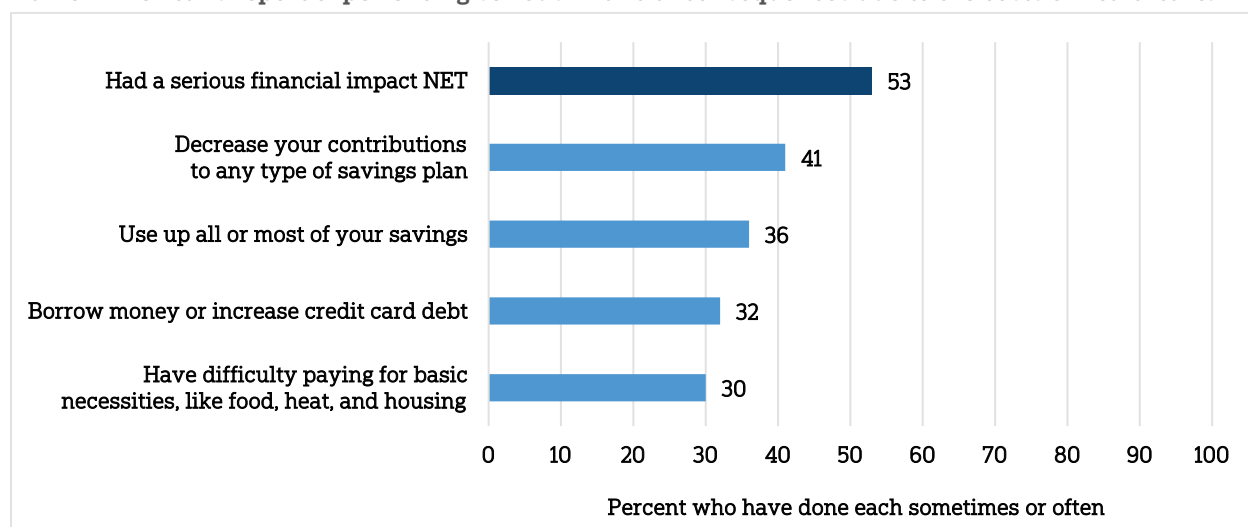


Questions: Thinking about your experience with paying medical bills, in the past 12 months, how often has each of the following happened?

Source: West Health Institute/NORC poll conducted February 15-19, 2018, with 1,302 adults nationwide

A majority of Americans report experiencing a serious impact on their finances and ability to survive day-to-day because of the cost of care, including 41 percent who say they decreased their contributions to a savings plan, 36 percent who say they used up all or most of their savings, 32 percent who say they borrowed money or increased their credit card debt, and 30 percent who say they could not pay for basic necessities like food or heat.

Half of Americans report experiencing serious financial consequences due to the costs of healthcare.



Question: Thinking more about paying for healthcare costs, how often does paying for healthcare costs cause you to...

Source: West Health Institute/NORC poll conducted February 15-19, 2018, with 1,302 adults nationwide

While the financial impacts of healthcare costs are wide-reaching, Americans who are lower income, non-white, and less educated are disproportionately affected.

Americans with lower incomes are more likely to report having difficulty paying for basic necessities like food, heat, and housing. Thirty-eight percent of those with a household income of less than \$50,000 per year say they have struggled with this, compared with 24 percent of adults making \$50,000 or more per year. Similarly, adults without a college degree are more likely to report that they had to use up most or all of their savings (41 percent vs. 24 percent) or increase their debt (36 percent vs. 23 percent). Black adults are also more likely than whites to report difficulty paying for basic necessities due to the cost of care (44 percent vs. 27 percent).

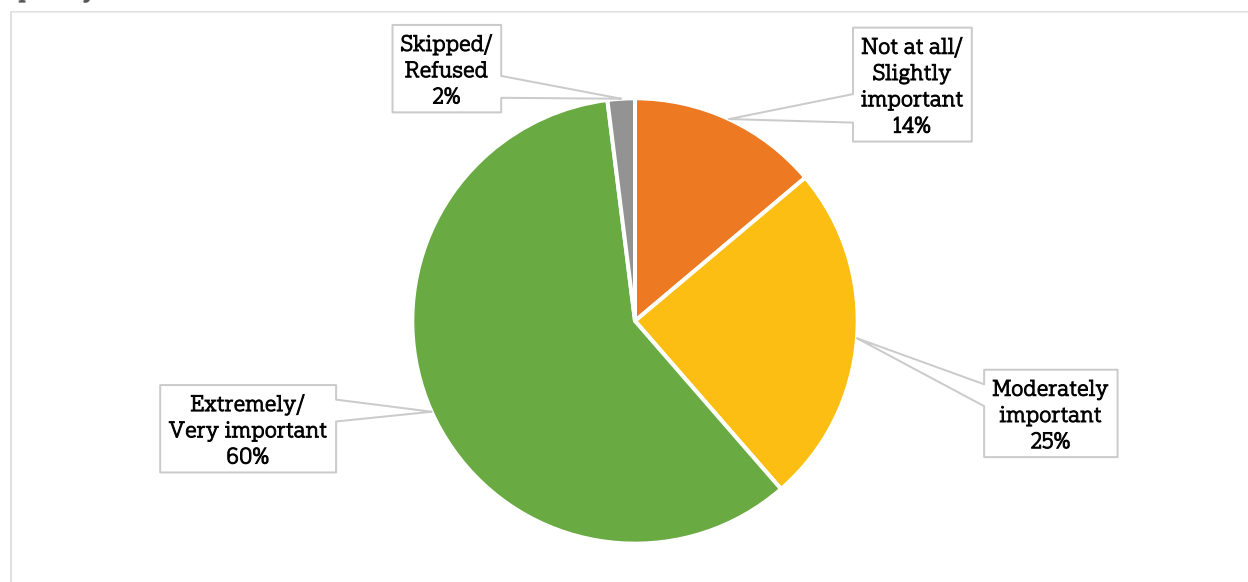
While the uninsured are more likely to experience some of these hardships due to healthcare costs, having health insurance doesn't fully insulate people. More than 4 in 10 of those without health insurance say they have racked up debt or had difficulty paying for basic necessities, compared with 3 in 10 insured adults.

SECTION 2: HEALTHCARE COVERAGE

When it comes to the country's growing senior population, the vast majority of Americans think healthcare access for older adults should be a priority for Congress.

Overall, 60 percent of Americans say it is important for their congressional representative to spend time advancing policies to help seniors have access to high-quality, affordable healthcare and supportive services. Another 25 percent say it's moderately important, and just 14 percent feel it is not important for their representative to pursue.

Six in 10 Americans say it's important that their representative advance policies to help seniors access quality and affordable care.



Question: How important is it for your representative in Congress to spend their time advancing policies to help seniors have access to high-quality, affordable healthcare and supportive services?

Source: West Health Institute/NORC poll conducted February 15-19, 2018, with 1,302 adults nationwide

American's personal experience facing significant financial setbacks due to healthcare costs translates into greater support for congressional action on affordable, quality senior care. Sixty-four percent of those who say they have experienced debt, a loss of savings, or other significant financial obstacles due to healthcare costs say this is important, compared with 54 percent of those who haven't had those experiences.

Blacks are more likely than whites and Hispanics to say it is very or extremely important for their congressperson to spend time advancing these policies (75 percent vs. 58 percent and 52 percent), as are Democrats compared to independents or Republicans (68 percent vs. 46 percent and 55 percent).

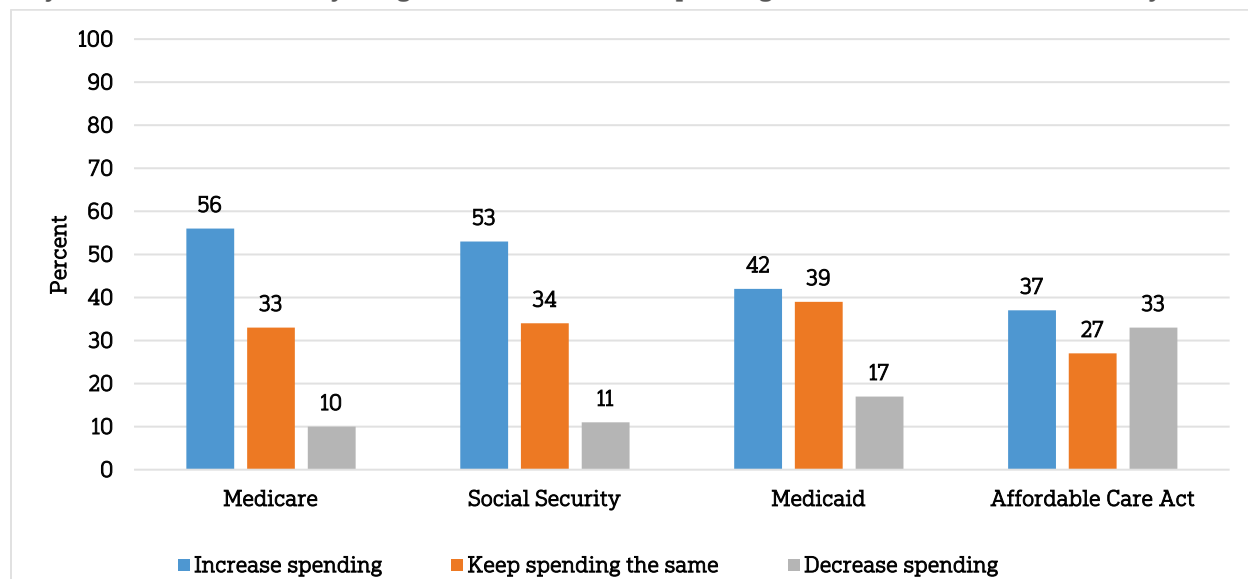
However, younger people are still more reticent than older Americans to prioritize care for seniors. Seventy-eight percent of those age 60+, 69 percent of those age 45-59, 50 percent of those age 30-44, and 36 percent of those age 18-29 say it is important.

A majority support maintaining or increasing funding for Medicare and Social Security.

When it comes to existing programs for seniors—Medicare and Social Security—more than half of Americans support increasing their funding. One in 3 say spending should be kept the same, and 1 in 10 support decreasing spending on these programs.

However, fewer support shoring up funds for Medicaid or the Affordable Care Act. Forty-two percent want an increase in spending for Medicaid, and 37 percent for the Affordable Care Act, also known as Obamacare.

Majorities of Americans say Congress should increase spending on Medicare and Social Security.



Question: Thinking about the federal budget, would you prefer that your representative in Congress vote to increase spending, decrease spending, or keep spending the same for...

Source: West Health Institute/NORC poll conducted February 15-19, 2018, with 1,302 adults nationwide

Support for greater spending on Medicare and Social Security grows with age. Those over 30 years are more likely than those younger than 30 to support an increase in spending for Medicare. Forty-two percent of adults younger than 30, 56 percent of those age 30-44, 62 percent of those age 45-59, and 60 percent of those age 60 and over support increases in Medicare. Support for Social Security ranges from 40 percent of those under 30 years, up to 63 percent of those age 60 and older.

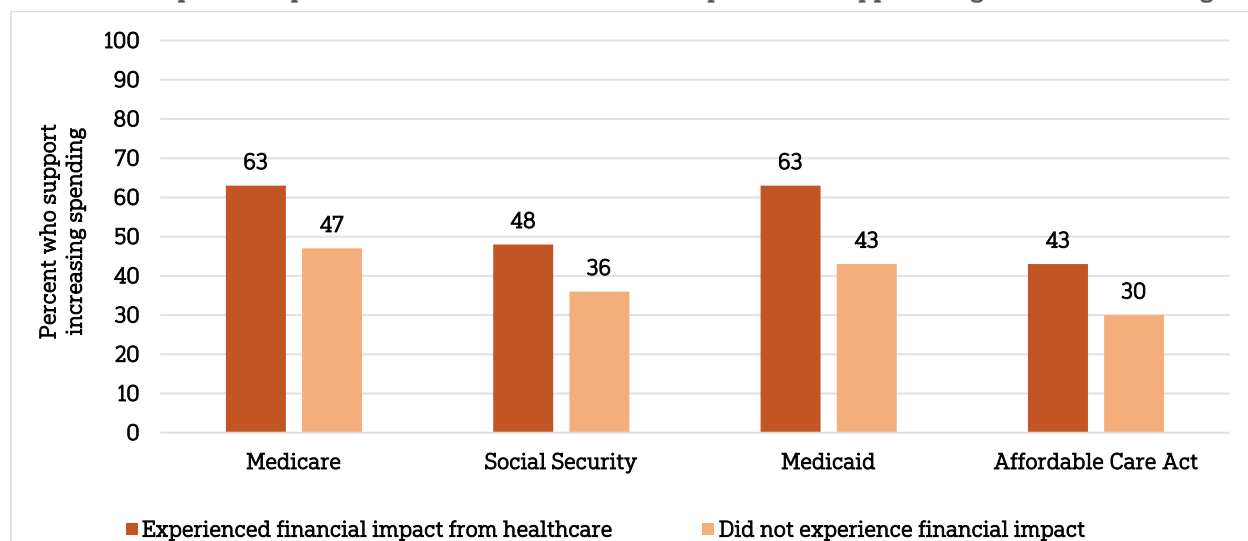
Racial differences emerge in support for shoring up these programs, particularly Medicaid and the Affordable Care Act. Blacks are more likely than whites and Hispanics to support an increase in funding for Medicare (67 percent vs. 55 percent and 52 percent), Social Security (65 percent vs. 54

percent and 43 percent), Medicaid (64 percent vs. 37 percent and 47 percent), and Obamacare (58 percent vs. 33 percent and 40 percent).

Support also falls along party lines. Democrats are more likely than independents and Republicans to favor increasing spending for Medicare (62 percent vs. 51 percent and 49 percent) and Medicaid (58 percent vs. 34 percent and 25 percent). As for the Affordable Care Act, Democrats are the most likely to want increased spending (56 percent), followed by independents (28 percent) and Republicans (17 percent).

Beyond demographics, personal experience with the costs of the healthcare system also drives support for funding. Americans who report at least sometimes needing to increase their debt, experiencing loss of savings, or being unable to pay for basic necessities due to healthcare expenses are more likely to support increased spending on those programs. People who report making some healthcare decisions based on cost are also more likely to favor increasing funds. For example, those who say they didn't go to the dentist when they needed treatment because of the cost are more likely than those who did not report this to support greater spending for Medicare (62 percent vs. 52 percent), Medicaid (49 percent vs. 38 percent), and Social Security (63 percent vs. 48 percent).

Americans' reported experiences with healthcare costs impact their support for government funding.



Questions: Thinking about the federal budget, would you prefer that your representative in Congress vote to increase spending, decrease spending, or keep spending the same for...

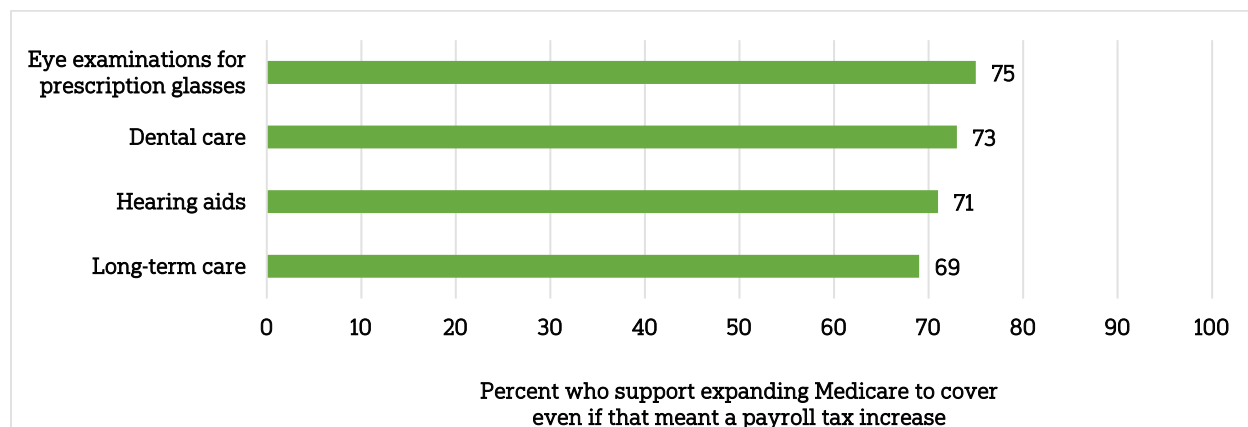
Thinking more about paying for healthcare costs, how often does paying for healthcare costs cause you to...

Source: West Health Institute/NORC poll conducted February 15-19, 2018, with 1,302 adults nationwide

Most support expanding the services covered by Medicare and would be willing to pay higher taxes to do so.

Most support expanding the services covered by Medicare and would even be willing to take a hit to their paycheck to do so. There is majority support for expanding Medicare to include eye exams for prescription glasses (75 percent), dental care (73 percent), hearing aids (71 percent), and long-term care (69 percent), even if it means an increase in the Medicare payroll tax.

Three in 4 Americans support expanding Medicare to cover dental care and eye exams for glasses, even if it means a tax increase.



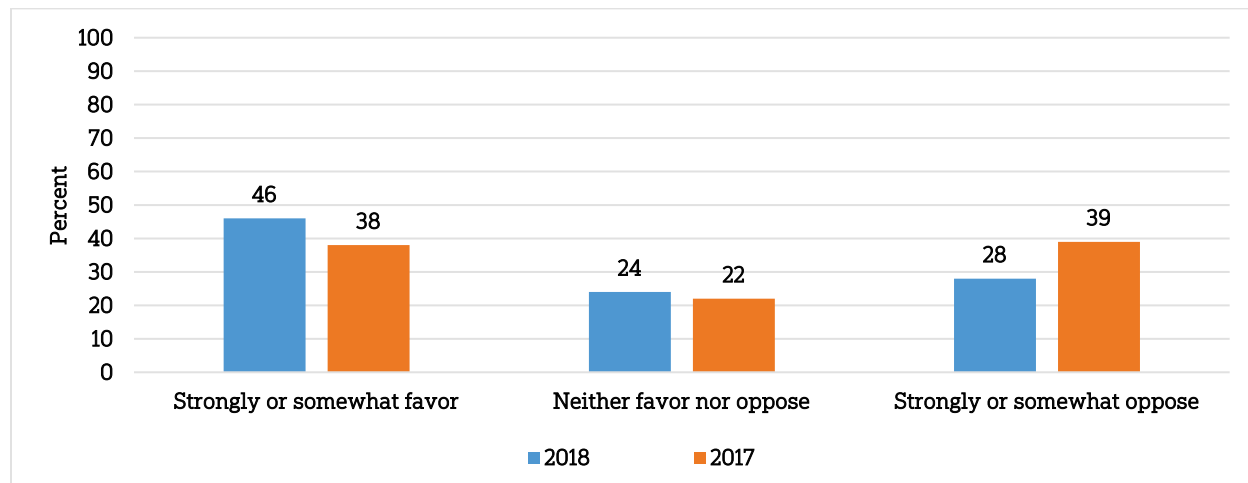
Questions: There are some healthcare items that Medicare doesn't currently cover. Should Medicare, the national healthcare insurance program for persons age 65 and over, pay for each of the following or not? Would you still support Medicare covering each of the following if that meant an increase in the Medicare payroll tax?
 Source: West Health Institute/NORC poll conducted February 15-19, 2018, with 1,302 adults nationwide

Americans who have insurance are more likely to see value in expanding Medicare services. Those who are insured are more likely than the uninsured to say Medicare should cover dental care (75 percent vs. 60 percent), hearing aids (73 percent vs. 54 percent), long-term care (72 percent vs. 51 percent), and eye exams for prescription glasses (77 percent vs. 60 percent), even if it means an increase in the Medicare payroll tax.

Americans' support for a single payer healthcare system has increased from 2017 to 2018.

In February 2018, 46 percent of Americans strongly or somewhat favored a single payer healthcare system, compared to 38 percent who said the same in an [AP-NORC poll conducted in January 2017](#). Opposition to single payer has decreased during the same period, to 28 percent in 2018 from 39 percent in 2017. The number who say they neither favor nor oppose has remained steady in 2018 compared to 2017 (24 percent vs. 22 percent).

Americans' support for a single payer healthcare system has increased over the past year.



Question: Would you favor or oppose a single payer healthcare system, in which all Americans would get their health insurance from one government plan?
 Source: West Health Institute/NORC poll conducted February 15-19, 2018, with 1,302 adults nationwide

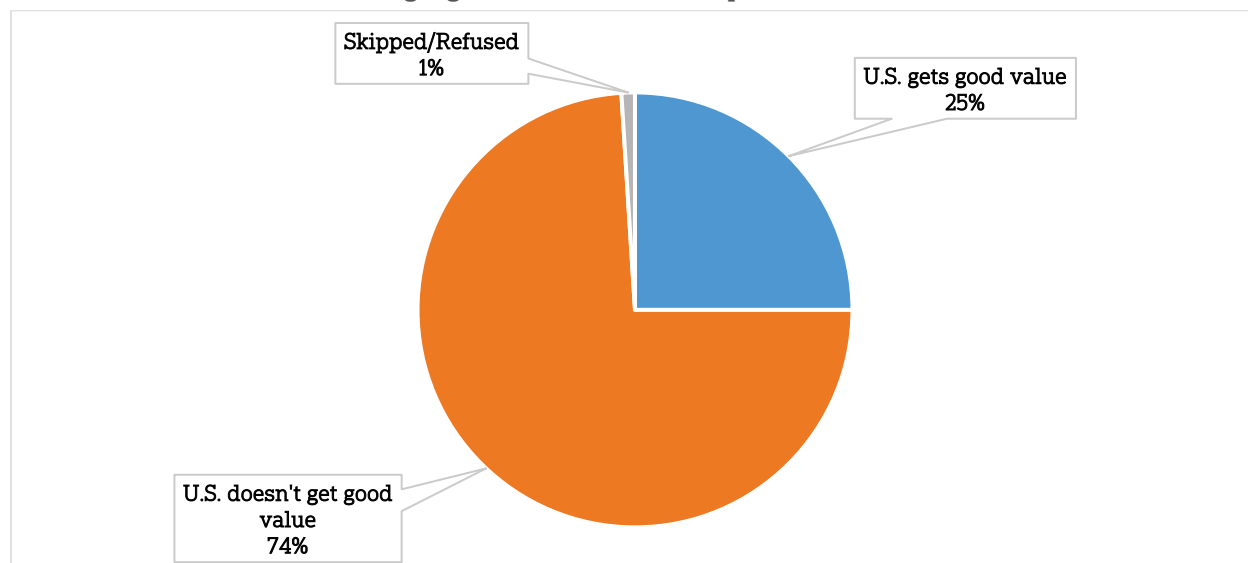
Americans who say they have experienced significant financial consequences due to healthcare costs are slightly more likely to favor a single payer system (50 percent vs. 41 percent). Employed adults are more likely to favor single payer healthcare (52 percent vs. 38 percent), as are Democrats compared with independents or Republicans (62 percent vs. 35 percent and 29 percent). On the other hand, blacks are more likely to oppose single payer than Hispanics (29 percent vs. 18 percent).

SECTION 3: HEALTHCARE POLICY

Three-quarters of Americans say that our country doesn't get good value for what we spend on healthcare.

Most Americans are dissatisfied with the costs of healthcare in the country. On average, the United States spends about twice as much per person on healthcare compared to other industrialized countries.⁴ Yet fully three-quarters don't think Americans get a good value for their healthcare dollar. And that's especially true among those who say they have experienced financial hardships due to healthcare costs in the past.

Most believe the nation does not get good value for what it spends on healthcare.



Question: Thinking about both the cost and quality of the healthcare that Americans receive, do you think that we get good value for what our country spends on healthcare, or not?

Source: West Health Institute/NORC poll conducted February 15-19, 2018, with 1,302 adults nationwide

Americans who report they have sometimes or often experienced debt, loss of savings, or being unable to pay for basic necessities due to healthcare costs are more likely to say the United States does not get good value for what it pays for healthcare than are those without such experiences (78 percent vs. 69 percent).

Beyond personal experience with healthcare expenses, there are also demographic differences between those who believe we get good value for what the nation spends on healthcare and those who do not. Whites (78 percent) are more likely to think we do not get good value compared to blacks (69 percent) and Hispanics (61 percent).

⁴ Peterson-Kaiser Health System Tracker analysis of 2016 data from OECD Health Statistics database. https://www.healthsystemtracker.org/chart-collection/health-spending-u-s-compare-countries/?_sf_s=health+spending#item-start

Education and employment also play a role in shaping perceptions of the value of healthcare costs. Eighty-two percent of those with a bachelor's degree or higher say we do not get good value for what we spend on healthcare, compared to 77 percent of those with some college, 69 percent of high school graduates, and 53 percent of those without a high school degree who say the same. And those who are employed are more likely to say we do not get good value compared to those who are unemployed (81 percent vs. 64 percent).

A majority disapprove of their representative in Congress's performance on healthcare costs.

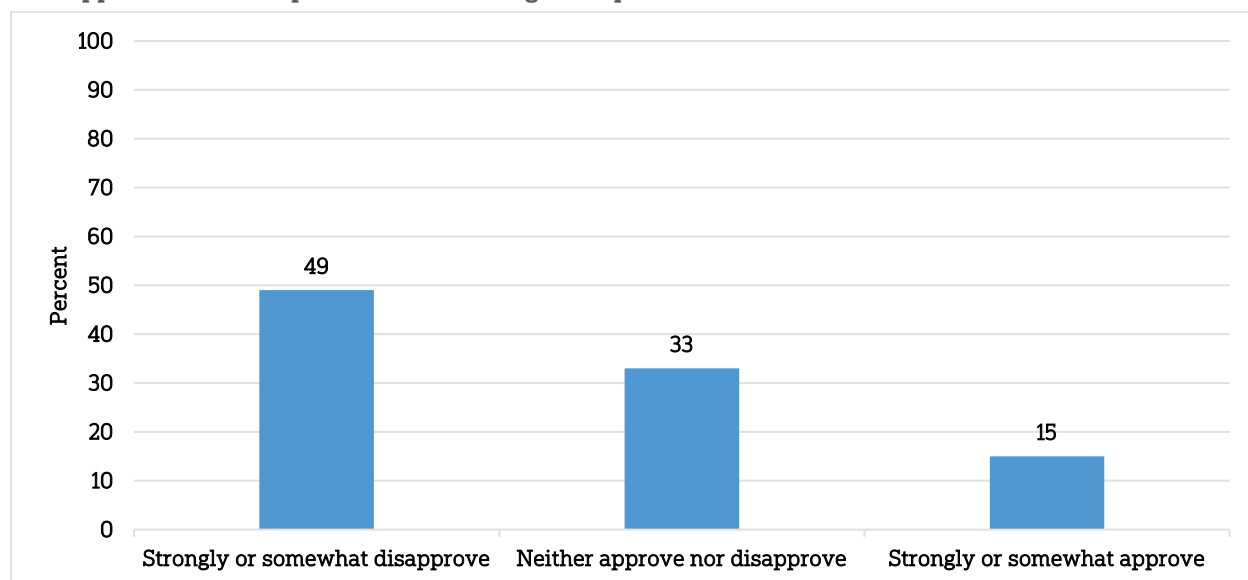
About half of Americans disapprove of the way their representative in Congress is handling the cost of healthcare, whereas just 15 percent approve, and a third neither approve nor disapprove. Americans are decidedly more negative about the way their representative deals with healthcare than they are about their overall job performance. In a [February 2018 AP-NORC poll](#), 44 percent of Americans said they approve of the way their representative in Congress is handling their job as a whole.

There is little difference by age, income, education, or partisanship in these assessments, but having negative experiences regarding healthcare costs is a significant driver of disapproval.

Americans who report having to make some healthcare decisions based on cost are more likely to disapprove of how their representative in Congress is handling healthcare costs. Fifty-five percent of those who say they have skipped a recommended test or treatment due to costs disapprove of how their congressperson handles healthcare costs, compared to 45 percent of Americans who haven't done this. Similarly, 56 percent of those who say they have avoided filling a prescription or taken less than the prescribed dose due to the costs disapprove, versus 46 percent of those who did not do this.

Those who say they have sometimes or often experienced debt, loss of savings, or being unable to pay for basic necessities due to healthcare costs are also more likely to disapprove of how their representative handles healthcare costs (54 percent vs. 43 percent).

Few approve of their representative in Congress's performance when it comes to the cost of healthcare.



Question: Overall, would you say you approve, disapprove, or neither approve nor disapprove of the way your representative in Congress is handling the cost of healthcare?

Source: West Health Institute/NORC poll conducted February 15-19, 2018, with 1,302 adults nationwide

There is no consensus about which political party to trust to handle healthcare and other related issues. More Americans trust Democrats than Republicans when it comes to handling healthcare (38 percent vs. 18 percent), Social Security (36 percent vs. 19 percent), policies that affect young people (36 percent vs. 16 percent), and policies that affect seniors (35 percent vs. 20 percent). However, over a quarter say they do not trust either of the major political parties when it comes to handling each of these issues, while roughly 15 percent say they trust both parties equally.

On the issues of Social Security and policies that affect seniors, who is trusted to do a better job handling these issues differs by race and ethnicity. Blacks are more likely than whites and Hispanics to trust the Democrats to handle Social Security (62 percent vs. 30 percent and 41 percent) and are less likely to trust the Republicans on this issue (4 percent vs. 24 percent and 13 percent). For policies that affect seniors, blacks are more likely than whites and Hispanics to trust the Democrats (56 percent vs. 30 percent and 41 percent) and are less likely to trust the Republicans (4 percent vs. 25 percent and 15 percent).

Across healthcare, Social Security, policies that affect seniors, and policies that affect young people, partisans are more likely to trust their own party to handle these issues. However, fewer than half of Republicans trust their own party to handle these, while majorities of Democrats trust their party. Majorities of independents find both parties untrustworthy to handle these issues.

STUDY METHODOLOGY

This survey was conducted by NORC at the University of Chicago with funding from the West Health Institute. NORC at the University of Chicago and the West Health Institute collaborated on all aspects of the study design and reporting. Data were collected using the AmeriSpeak Omnibus®, a monthly multi-client survey using NORC's probability-based panel designed to be representative of the U.S. household population. The survey was part of a larger study that included questions about other topics not included in this report. During the initial recruitment phase of the panel, randomly selected U.S. households were sampled with a known, non-zero probability of selection from the NORC National Sample Frame and then contacted by U.S. mail, email, telephone, and field interviewers (face-to-face). The panel provides sample coverage of approximately 97 percent of the U.S. household population. Those excluded from the sample include people with P.O. Box only addresses, some addresses not listed in the USPS Delivery Sequence File, and some newly constructed dwellings.

Interviews for this survey were conducted between February 15 and 19, 2018, with adults age 18 and over representing the 50 states and the District of Columbia. All interviews were conducted in English by professional interviewers who were carefully trained on the specific survey for this study. Panel members were randomly drawn from AmeriSpeak, and 1,302 completed the survey—1,093 via the web and 209 via telephone. The final stage completion rate is 22.4 percent, the weighted household panel response rate is 33.7 percent, and the weighted household panel retention rate is 88.1 percent, for a cumulative response rate of 6.6 percent. The overall margin of sampling error is +/- 3.8 percentage points at the 95 percent confidence level, including the design effect. The margin of sampling error may be higher for subgroups.

In addition, African Americans were sampled at a higher rate than their proportion of the population to support additional analyses. The overall margin of sampling error for the 388 completed interviews with African Americans is +/- 7.3 percentage points at the 95 percent confidence level including the design effect.

Once the sample has been selected and fielded, and all the study data have been collected and made final, a poststratification process is used to adjust for any survey nonresponse as well as any non-coverage or under- and oversampling resulting from the study specific sample design. Poststratification variables included age, gender, census division, race/ethnicity, and education. Weighting variables were obtained from the 2017 Current Population Survey. The weighted data, which reflect the U.S. population of adults age 18 and over, were used for all analyses.

For more information, email info@norc.org.

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Solely funded by philanthropists Gary and Mary West, [West Health](#) includes the nonprofit and nonpartisan [Gary and Mary West Health Institute](#) and [Gary and Mary West Foundation](#) in San Diego and the [Gary and Mary West Health Policy Center](#) in Washington, DC. These organizations are working together toward a shared mission dedicated to enabling seniors to successfully age in place with access to high-quality, affordable health and support services that preserve and protect their dignity, quality of life, and independence. For more information, visit westhealth.org and follow [@westhealth](https://twitter.com/westhealth).

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AMERICANS' VIEWS OF HEALTHCARE COSTS, COVERAGE, AND POLICY

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