The people of Pennsylvania have spoken, and politicians in Washington, DC, and across the nation are taking notice.

Harris Wofford’s November 1991 win over former Attorney General Dick Thornburgh in Pennsylvania’s Senate race has raised the stakes for healthcare reform as a 1992 election issue. Wofford campaigned hard on the need for a national healthcare program, positioning it as a key middle-class concern for the 1990s. His come-from-behind win over the former Bush administration cabinet member has sent pollsters, policy analysts, and politicians scurrying to figure out what it all means. Is healthcare reform truly a viable campaign issue, or was Pennsylvania a fluke—a case of a well-managed campaign triumphing over a fumbled campaign?

This column examines several postelection polls of Pennsylvania voters to determine what role healthcare played in the voting booth. Even though the election results will be analyzed for months to come, Wofford’s win has had the immediate effect of pushing interest in healthcare reform to a new height. As the New York Times noted in its November 8 lead editorial, “Harris Wofford’s striking upset victory over Dick Thornburgh... makes health care reform Topic A on the domestic agenda. Mr. Wofford’s rousing declaration that ‘working people should have the right to a doctor when they are sick’ contributed mightily to his triumph.”

**Analyzing Wofford’s Win**

The Kaiser Poll  On the Sunday before election Tuesday 1991, Drew Altman, president of the Henry J. Kaiser Family Foundation, saw the attention Wofford was drawing to health insurance issues and asked: Does the anecdotal evidence match the data? To gather some hard data, the foundation quickly brought in Harvard polling specialist Robert Blendon to design a postelection voter poll in Pennsylvania. On November 5-6, KRC Communications Research, a national polling firm based in Newton, MA, polled 1,000 Pennsylvanians who voted in the Senate election.

The Kaiser-Blendon poll found that, indeed, national health insurance was the most important issue for Pennsylvania voters when asked, “Which two issues mattered the most in deciding how you would vote for the senator?” National healthcare topped the list with 50 percent of all voters, 64 percent of Wofford voters, and 39 percent of Thornburgh voters. Issues falling behind healthcare included taxes (29 percent of all voters, 29 percent of Wofford voters, 27 percent of Thornburgh voters); recession or loss of jobs (21 percent of all voters, 27 percent of Wofford voters, 15 percent of Thornburgh voters); and candidate’s record or reputation (14 percent of all voters, 7 percent of Wofford voters, 24 percent of Thornburgh voters).

Overall, voters said healthcare was more likely to be “one of several important factors” (47 percent) rather than the “single most important factor” (21 percent) in their decision for senator. However, when asked, “Did the issue of national health insurance make you more likely to vote for the candidate who favored national health insurance, less likely to vote for the candidate who favored national health insurance, or have no impact?” 63 percent of all voters and a whopping 85 percent of Wofford voters answered “more likely.” On the opposite question—“Did the issue of national health insurance make you more likely to vote for the candidate who opposed national health insurance...”—51 percent of voters overall and 72 percent of Wofford voters answered “less likely.” Thornburgh voters, on the other hand, were 37 percent “more likely” to vote for such a candidate.

Looking more deeply into the issue of healthcare, the Kaiser-Blendon poll found that 75 percent of all voters (80 percent of Wofford, 71 percent of Thornburgh) thought high cost was by far the biggest problem with healthcare for themselves and their families. Clearly, consumers are
not as shielded from the rapid rise in healthcare costs as many have thought.

As for the type of healthcare reform Pennsylvania’s voters preferred, the results were mixed. Voters were given three alternatives:

- “A plan in which businesses are required to either provide coverage for all their employees or contribute to a federal fund that would cover all Americans”—essentially the “pay-or-play” option of the Senate Democratic HealthAmerica bill put forward by Sen. George Mitchell, D-ME, and Sen. Jay Rockefeller, D-WV.
- “A national health care plan run by the government, financed by taxpayers, which would cover all Americans,” similar to a bill proposed by Rep. Marty Russo, D-IL.
- “Leaving things the way they are”

Overall, Pennsylvania voters were nearly split between the pay-or-play option (35 percent) and an all-government plan (32 percent). Wofford voters were more likely to support an all-government plan (48 percent, compared with 31 percent for the pay-or-play plan). Thornburgh voters favored the pay-or-play option (39 percent, versus 17 percent for the all-government plan). Few voters were satisfied with the status quo (17 percent overall, 9 percent of Wofford voters, 27 percent of Thornburgh voters).

It is not surprising that Pennsylvania’s voters did not have a clear idea of what kind of healthcare reform they wanted. Wofford was rather fuzzy in his details during the campaign. Blendon explained in an interview that Pennsylvania’s voters “don’t understand the alternative reform plans, but I don’t really blame them. Wofford’s most brilliant achievement was what polls call the ‘Eisenhower effect’ of ‘I will go to Korea and win the war, but don’t bother me with the details.’”

Blendon was surprised himself that healthcare ranked as high as it did in the Pennsylvania poll: “Healthcare should be number three or four [as an election issue] and not that high. I can’t quite figure it out.” Blendon noted that Wofford’s campaign, along with Sen. Paul Wellstone’s, D-MN, bid for senator of Minnesota in 1990, were the only two races in recent history to win on a national health insurance platform. He gives much credit for Wofford’s success to the campaign the two candidates ran. “Thornburgh did a poor job of surfacing other Republican issues, while Wofford made [national healthcare] a salient issue of his.”

When asked why voters were now open to healthcare reform as a campaign issue, Blendon responded: “We’ve threatened the middle class; benefits shrink, choices shrink, costs grow, and people may even lose their health insurance. . . . Thus there is a general problem [with health insurance], and the recession raises and heightens it.” The growing healthcare crisis has merged with the recession to highlight a variety of middle-class economic concerns, of which healthcare is prominent. In a press statement, Kaiser’s Altman concluded: “Solutions may vary, but politicians who fail to address this issue now do so at their peril. Clearly, Americans are increasingly concerned about healthcare and want their elected officials to do something about it.”

The HIAA Poll The Health Insurance Association of America (HIAA) retained two pollsters—one Democratic and the other Republican—to conduct its own postelection survey in Pennsylvania. On November 6-7, the two firms, Public Opinion Strategies and Mellman & Lazarus, polled 600 Pennsylvanians who voted in the Senate election.

The HIAA poll gives a mixed message on the role healthcare reform played in the Pennsylvania election. Statements from the association emphasize the finding that only 14 percent of Pennsylvania’s voters meant their vote to send a message that it is time to “adopt a national health insurance plan.” Other message options chosen more often included “elect the candidate with the experience to get the most done for Pennsylvania” (28 percent), “get the state’s economy moving again” (23 percent), and “put a stop to ‘business as usual’ in Washington” (19 percent).

As one delves more deeply into the survey instrument, however, clear concerns about healthcare issues emerge. When Wofford voters were asked to state their number one and number two reasons for their vote, “stand on health care” topped both lists. Thirty-three percent of Wofford voters listed healthcare as the primary reason for their vote, above options such as “do not like Thornburgh” (25 percent), “Wofford is for the common man/middle class” (16 percent), “it’s time for a change” (14 percent), and “like Wofford’s stand on issues” (14 percent). As the second most important reason for choosing Wofford, healthcare weighed in at 24 percent, above “Wofford is for the common man” (12 percent), “time for a change” (11 percent), “like Wofford” (1 percent), and “like his stand on issues” (10 percent). “Economy/jobs and tax issues” were well down both lists, at 6 percent and 5 percent, respectively. Thornburgh voters’ primary reasons included “like Thornburgh/good governor” (36 percent), “like his stand on issues” (17 percent), “Wofford is unrealistic” (16 percent), “more familiar with him” (15 percent), and “Republican” (13 percent).
Those who remembered Wofford or both candidates discussing healthcare during the campaign were asked: "Did what Harris Wofford say about healthcare make you more likely to vote for Wofford, less likely to vote for him, or did it make no difference in your vote?" A majority (52 percent) said they were more likely to vote for Wofford on the basis of his healthcare statements, 19 percent said they were less likely, and 28 percent said it made no difference.

The concern that healthcare is becoming too expensive ranked number two (after the fear that drugs and crime are too widespread) among all Pennsylvania voters. Healthcare costs were "one of the most important" worries to 38 percent of voters and caused a "great deal" of concern to 42 percent. The number three concern was that "the cost of living for things I need is going up faster than my income." Thirty-seven percent ranked this "one of the most important" concerns, and 38 percent said it worries them "a great deal."

When asked to choose among two options "if there were a government policy to assure everyone is covered for medical expenses," 60 percent favored "a system with a choice of private health insurance with public plans for the elderly and poor," above "a system in which everyone would be enrolled in a single government-run health care program" (27 percent favored). When read a brief description of the Canadian health insurance system, however, 45 percent strongly favored adopting such a system in the United States.

HIAA president Carl Schramm noted the confusion among voters in specifying which healthcare reform alternatives they prefer. Schramm said in a press statement:

Based on these preliminary data, it's a far stretch to assume that the tea leaves of the Pennsylvania election returns portend overwhelming support for national health insurance. Clearly the voters are keenly interested in lowering health care costs and extending health care coverage. Equally clear is that their concern for lower costs and greater access does not translate into support for an expensive, taxpayer-funded, government-sponsored health insurance system.

EFFECT ON 1992 ELECTION

Wofford's defeat of a former Bush administration insider has had several immediate effects in Washington. Although perhaps not directly related, Bush's postponement of a trip to Asia gave the appearance of a president waking up to the fact that his domestic policy fires need tending. A number of analysts believe the Wofford win may force Bush to face, or at least acknowledge, some problems with the U.S. health insurance system. Republican pollster Bill McInturff of Public Opinion Strategies, who helped conduct the HIAA poll, said, "I would advise even my Republican candidates to be for change in the health system." Regarding the presidential election, he added that "the Thornburgh campaign is a reminder that the Bush campaign is going to need to respond to [healthcare] on the offensive." Blendon said, however, "I am one of the few people who still believe George Bush can win without addressing this issue." On the other hand, if Bush offers no plan or thread of concern whatsoever regarding healthcare, "it could become a symbol of his lack of concern" for middle-class economic issues, continued Blendon.

For House and Senate races in 1992, Blendon believes the Pennsylvania race "will send a message to Democratic senators and congressmen that this is a wonderful issue to differentiate yourself on [in the campaign]. It could elect a lot of Democrats." Kaiser's Matt James believes "Democrats, wittingly or unwittingly, may have stumbled on one of those touchstone issues," just as the Republicans did in the 1980s with quotas and taxes.

Congressional Democrats, however, do not agree on how to use this "touchstone" issue in their campaigns. According to Blendon, "Senate Democratic leaders would like to pass some bill [such as the Mitchell-Rockefeller plan] and see the president veto it." They hope such a veto would bring a negative voter backlash against Republican politicians. Blendon thinks "House Democrats would prefer not to have a bill so members can run on the type of plan that best fits their constituency." Campaigns in 1992 may not be afforded as much leeway as Wofford was in brushing over the details of healthcare reform proposals. House Democrats fear that if they lock into one specific plan before the campaign, they will be attacked by those special interest groups threatened by the reform plan.

On the other side of the aisle in Congress, Senate Republican leaders unveiled their answer to healthcare reform just two days after Wofford's win. The Health Equity and Access Improvement Act of 1991 was the product of the Republican Task Force on Health Care initiated in July 1990. Its chief sponsor, Sen. John Chafee, R-RI, said in introducing the bill: "It builds on the good in our system, reforms the bad, and encourages innovation in both the private and public sectors."

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The plan proposes health insurance reforms to improve affordability for small business, encourage further managed care in both public and private sectors, reform medical liability law, emphasize prevention to contain costs, revise the federal tax code to provide families earning under $32,000 with a tax credit to purchase health insurance or healthcare services, increase funding for community health centers and the National Health Service Corps to improve access to care, and streamline a waiver process to encourage flexibility among states that are ready to move forward with healthcare reform plans. No explicit financing measures were outlined.

“After mulling the matter over at great length, we looked at other proposals . . . and realized that few of them were budget neutral,” said Chafee. “As a result, we decided that it was important to get our ideas on cost containment, access, and state flexibility on the table now . . . and to hold off on a discussion of financing.”

**NEXT STEPS**

In Pennsylvania, Wofford captured voters’ attention by speaking to their fears about rising healthcare costs and loss of insurance coverage. These concerns clearly emerged in both the Kaiser and HIAA polls. The next steps, however, are not so clear. Voters did not have a definite idea of what type of reforms they preferred. This may stem from a lack of understanding, the fact that Wofford offered few details of his own, and the reality that healthcare issues are complex—policy experts and healthcare leaders cannot yet agree on the best course of action.

Healthcare reform will almost certainly be one of several key domestic and economic issues for the 1992 campaigns. The question remains whether the debates will move beyond expedient political rhetoric to more serious action and change.