APPENDIX, "How Americans Think About Health Care and Insurance," Beatrice Ferrario and Stefanie Stantcheva. In *Tax Policy and the Economy*, volume 40. Chicago, IL: University of Chicago Press, 2026.

A-1 Survey Information

TABLE A-1: ATTRITION

	2019 Survey		2025 Survey	
	Survey completion (1)	Completion time $< 5^{th}$ percentile (2)	Survey completion (3)	Completion time $< 5^{th}$ percentile (4)
Female	-0.03**	-0.01	0.01	-0.01
	(0.02)	(0.01)	(0.02)	(0.02)
Has kids	0.02	0.00	0.01	-0.07***
	(0.02)	(0.02)	(0.02)	(0.02)
Black	-0.06*	0.01	0.00	-0.03
	(0.03)	(0.03)	(0.02)	(0.03)
Hispanic	-0.01	0.01	0.00	-0.02
	(0.03)	(0.03)	(0.02)	(0.02)
Other	-0.04	0.04*	0.03	-0.01
	(0.02)	(0.02)	(0.03)	(0.03)
Age 30-49	-0.01	-0.02	0.03*	0.03
	(0.02)	(0.02)	(0.02)	(0.02)
Age 50-69	-0.05**	-0.04*	0.05**	0.01
	(0.02)	(0.02)	(0.02)	(0.03)
Middle-Income	0.01	0.02	0.03	-0.02
	(0.02)	(0.02)	(0.02)	(0.03)
High-Income	0.04*	-0.03	-0.00	0.01
	(0.02)	(0.02)	(0.02)	(0.02)
College Degree	0.02	0.01	0.04**	0.01
	(0.02)	(0.02)	(0.02)	(0.02)
Economics related major	-0.01	0.00	0.02	0.02
	(0.03)	(0.03)	(0.03)	(0.03)
Not working	-0.01	0.01	0.01	-0.01
	(0.02)	(0.02)	(0.02)	(0.03)
Retiree	-0.01	0.02	0.01	-0.04
	(0.02)	(0.02)	(0.04)	(0.04)
Policy knowledge	0.07***	-0.03*	0.01	-0.05**
	(0.02)	(0.02)	(0.02)	(0.02)
Constant	0.84***	0.15***	0.84***	0.16***
	(0.03)	(0.02)	(0.03)	(0.03)
Observations	2134	2134	1136	1136

Notes: The dependent variable in columns (1) and (3) is an indicator variable equal to one if the respondent completed the survey; respondents who did not complete the survey were excluded from the analysis. The dependent variable in columns (2) and (4) is an indicator variable equal to one if the respondent's completion time was below the 5th percentile, resulting in the exclusion of the observation from the analysis. The independent variable *Policy knowledge* is an indicator variable equal to one if the respondent self-reports being "highly knowledgeable" or "somewhat knowledgeable" on economic policy matters. Standard errors in parentheses. * $p < 0.1$, ** $p < 0.05$, *** $p < 0.01$.

TABLE A-2: CORRELATES OF POLITICAL AFFILIATION IN THE 2025 SAMPLE

| | Republican |
	(1)
Female	-0.02
	(0.03)
Age 30-49	-0.00
	(0.04)
Age 50-69	-0.00
	(0.04)
Middle-Income	-0.09**
	(0.05)
High-Income	0.09**
	(0.04)
Less than 4-year college	0.09
	(0.08)
4-year college/Master's	0.13*
	(0.08)
Professional degree	0.16
	(0.10)
Descriptive statistics	
Sample mean	0.32
Young mean	0.32
Low-income mean	0.26
Low-education mean	0.17
Observations	1055

Notes: The dependent variable is an indicator variable equal to one if the respondent reported "Republican" as political affiliation. Standard errors in parentheses. * $p < 0.1$, ** $p < 0.05$, *** $p < 0.01$. Data from the 2025 survey.

TABLE A-3: CORRELATES OF POLITICAL AFFILIATION IN THE 2019 SAMPLE

| | Republican |
	(1)
Female	0.00
	(0.02)
Age 30-49	0.16***
	(0.03)
Age 50-69	0.17***
	(0.03)
Middle-Income	0.06*
	(0.03)
High-Income	0.09***
	(0.03)
Less than 4-year college	-0.01
	(0.08)
4-year college/Master's	-0.06
	(0.08)
Professional degree	-0.11
	(0.10)
Descriptive statistics	
Sample mean	0.32
Young mean	0.18
Low-income mean	0.27
Low-education mean	0.29
Observations	1826

Notes: The dependent variable is an indicator variable equal to one if the respondent reported "Republican" as political affiliation. Standard errors in parentheses. * $p < 0.1$, ** $p < 0.05$, *** $p < 0.01$. Data from the 2019 survey.

TABLE A-4: INCENTIVES IN KNOWLEDGE QUESTIONS - 1

	Knew what Medicaid is	Knew what Medicare is	Knew whether ACA Medicaid changed eligibility	Knew existance of Individual Mandate in 2018	Knew of penalty for uninsured in 2018	Knew whether individual mandate changed in 2019	Knew penalty for uninsured reduced to zero in 2019
	(1)	(2)	(3)	(4)	(5)	(6)	(7)
Received incentive	0.02	0.00	0.02	0.03	0.03	0.05	-0.00
	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.02)
Republican	-0.07**	-0.02	-0.03	0.00	0.03	0.06*	-0.01
	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.02)
Independent and others	-0.01	-0.05**	-0.04	0.03	0.04	0.04	0.02
	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.02)
Female	0.11***	0.07***	-0.04*	0.07***	0.11***	0.03	0.01
	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)
Has kids	0.03	-0.00	-0.04*	0.03	0.01	0.04	-0.01
	(0.02)	(0.02)	(0.03)	(0.02)	(0.03)	(0.03)	(0.02)
Black	-0.05	-0.19***	-0.03	-0.02	-0.04	-0.11**	-0.04
	(0.05)	(0.05)	(0.05)	(0.05)	(0.05)	(0.05)	(0.04)
Hispanic	-0.09*	-0.15***	-0.05	-0.03	0.02	-0.05	0.00
	(0.05)	(0.05)	(0.05)	(0.05)	(0.05)	(0.05)	(0.03)
Other	-0.02	-0.04	-0.13***	-0.05	-0.08**	-0.12***	-0.02
	(0.04)	(0.04)	(0.04)	(0.04)	(0.04)	(0.04)	(0.03)
Age 30-49	0.04	0.04	0.02	0.07**	0.11***	0.00	0.05**
	(0.03)	(0.03)	(0.04)	(0.03)	(0.03)	(0.04)	(0.02)
Age 50-69	0.12***	0.18***	-0.02	-0.00	0.06	0.05	0.06**
	(0.04)	(0.04)	(0.04)	(0.03)	(0.04)	(0.04)	(0.03)
Middle-Income	-0.01	-0.02	0.00	-0.01	-0.01	0.02	0.03
	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.02)
High-Income	-0.02	-0.01	-0.01	0.00	-0.02	0.03	0.01
	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.02)
College Degree	0.03	0.05*	0.01	0.01	0.01	0.04	-0.04**
	(0.03)	(0.03)	(0.03)	(0.02)	(0.03)	(0.03)	(0.02)
Economics related major	0.05	-0.03	0.01	0.02	0.05	0.03	0.09***
	(0.04)	(0.04)	(0.04)	(0.04)	(0.04)	(0.04)	(0.03)
Working	-0.03	0.03	-0.04	0.17***	0.17**	0.06	0.08*
	(0.07)	(0.07)	(0.07)	(0.06)	(0.07)	(0.07)	(0.05)
Not working	0.02	0.04	-0.06	0.20***	0.22***	0.03	0.05
	(0.07)	(0.07)	(0.07)	(0.07)	(0.07)	(0.07)	(0.05)
Retiree	0.02	0.15**	-0.10	0.13*	0.17**	0.01	0.07
	(0.08)	(0.08)	(0.08)	(0.07)	(0.08)	(0.08)	(0.05)
Policy knowledge	0.06**	-0.01	0.04*	0.02	0.01	0.08***	0.03
	(0.02)	(0.02)	(0.03)	(0.02)	(0.03)	(0.03)	(0.02)
Observations	1814	1805	1825	1825	1825	1825	1825

Notes: The dependent variable is an indicator variable equal to one if the respondent answered correctly. The independent variable *Policy knowledge* is an indicator variable equal to one if the respondent self-reports being "highly knowledgeable" or "somewhat knowledgeable" on economic policy matters. Standard errors in parentheses. * $p < 0.1$, ** $p < 0.05$, *** $p < 0.01$. Data from the 2019 survey.
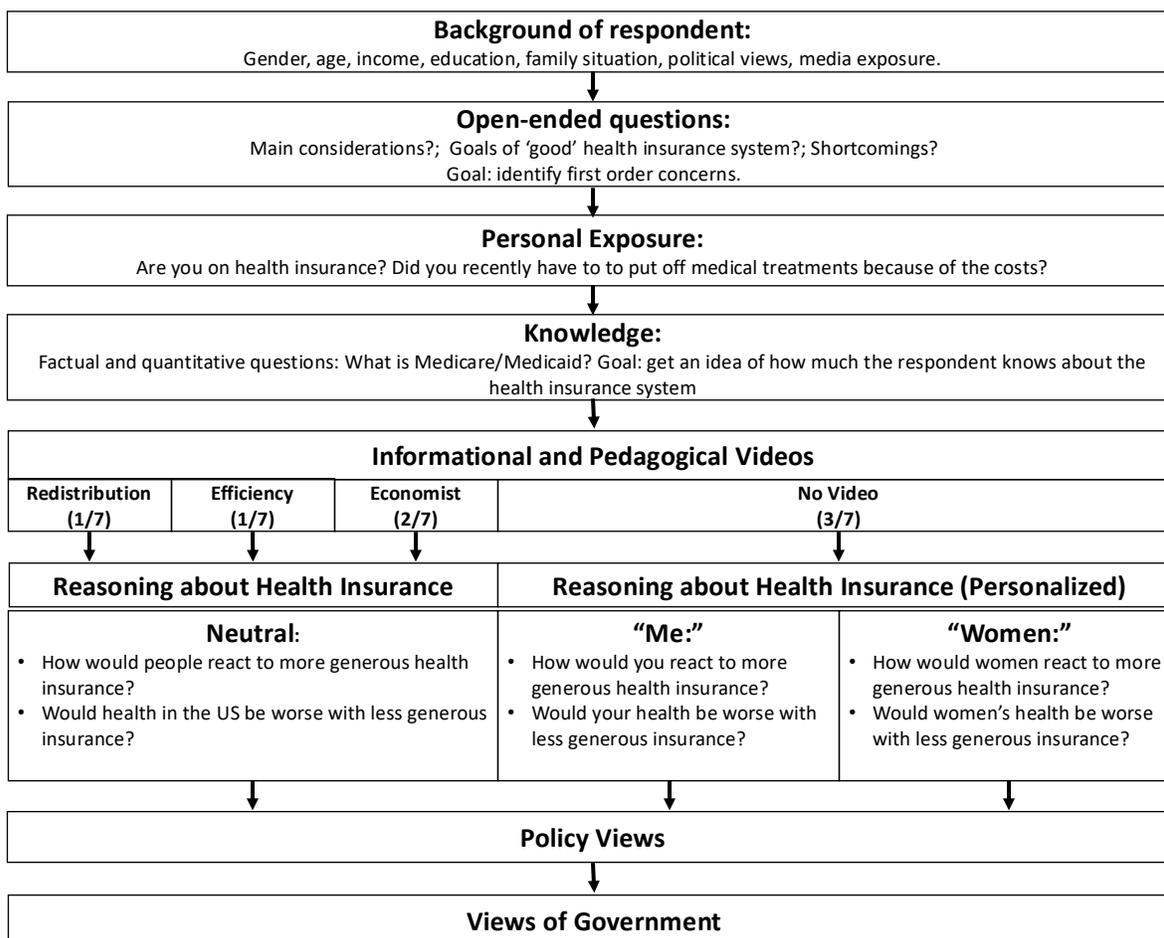
TABLE A-5: INCENTIVES IN KNOWLEDGE QUESTIONS - 2

| | Know of employer mandate and small emp. exemption (1) | Knew that current premiums: | | | | |
		Can condition on tobacco use (2)	Can condition on age (3)	Can condition on location (4)	Cannot condition on gender (5)	Cannot condition on pre-existing (6)
Received incentive	0.02	-0.02	0.01	0.05	0.01	0.03
	(0.03)	(0.03)	(0.03)	(0.03)	(0.02)	(0.03)
Republican	-0.03	-0.02	-0.07***	0.03	-0.01	-0.00
	(0.03)	(0.03)	(0.03)	(0.03)	(0.02)	(0.03)
Independent and others	0.05*	-0.03	0.01	0.00	-0.00	-0.01
	(0.03)	(0.03)	(0.03)	(0.02)	(0.02)	(0.03)
Female	0.05**	0.05**	-0.01	-0.05**	0.06***	-0.04*
	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)
Has kids	-0.02	0.03	-0.05**	0.01	-0.00	0.01
	(0.03)	(0.03)	(0.02)	(0.02)	(0.02)	(0.03)
Black	-0.08	-0.04	-0.10**	0.02	-0.10***	-0.12**
	(0.05)	(0.05)	(0.05)	(0.05)	(0.04)	(0.05)
Hispanic	-0.07	0.01	-0.09*	-0.05	-0.02	-0.06
	(0.05)	(0.05)	(0.05)	(0.05)	(0.04)	(0.05)
Other	-0.00	0.03	0.01	-0.03	-0.09***	-0.07*
	(0.04)	(0.04)	(0.04)	(0.03)	(0.03)	(0.04)
Age 30-49	-0.04	-0.02	0.08**	-0.05*	0.08***	-0.00
	(0.04)	(0.04)	(0.03)	(0.03)	(0.02)	(0.03)
Age 50-69	0.04	-0.06	0.18***	-0.02	0.14***	0.04
	(0.04)	(0.04)	(0.04)	(0.03)	(0.03)	(0.04)
Middle-Income	0.05	0.06*	-0.02	-0.00	0.03	-0.03
	(0.03)	(0.03)	(0.03)	(0.03)	(0.02)	(0.03)
High-Income	0.06*	-0.00	0.05*	0.03	-0.01	-0.02
	(0.03)	(0.03)	(0.03)	(0.03)	(0.02)	(0.03)
College Degree	0.04	-0.07***	0.03	0.01	-0.02	0.11***
	(0.03)	(0.03)	(0.03)	(0.02)	(0.02)	(0.03)
Economics related major	-0.03	-0.01	0.04	-0.03	0.08***	0.03
	(0.04)	(0.04)	(0.04)	(0.04)	(0.03)	(0.04)
Working	0.01	0.01	-0.10	-0.00	0.06	0.07
	(0.07)	(0.07)	(0.07)	(0.06)	(0.05)	(0.07)
Not working	0.01	-0.01	-0.14**	-0.01	0.04	0.10
	(0.08)	(0.08)	(0.07)	(0.06)	(0.05)	(0.07)
Retiree	-0.03	-0.02	-0.09	-0.03	0.02	0.07
	(0.08)	(0.08)	(0.07)	(0.07)	(0.05)	(0.08)
Policy knowledge	0.03	-0.02	0.06**	0.01	-0.00	0.06**
	(0.03)	(0.03)	(0.02)	(0.02)	(0.02)	(0.03)
Observations	1825	1825	1825	1825	1825	1825

Notes: The dependent variable is an indicator variable equal to one if the respondent answered correctly. The independent variable *Policy knowledge* is an indicator variable equal to one if the respondent self-reports being "highly knowledgeable" or "somewhat knowledgeable" on economic policy matters. Standard errors in parentheses. * $p < 0.1$, ** $p < 0.05$, *** $p < 0.01$. Data from the 2019 survey.

A-2   2019 Results

FIGURE A-1: PERSONAL EXPOSURE TO HEALTH INSURANCE
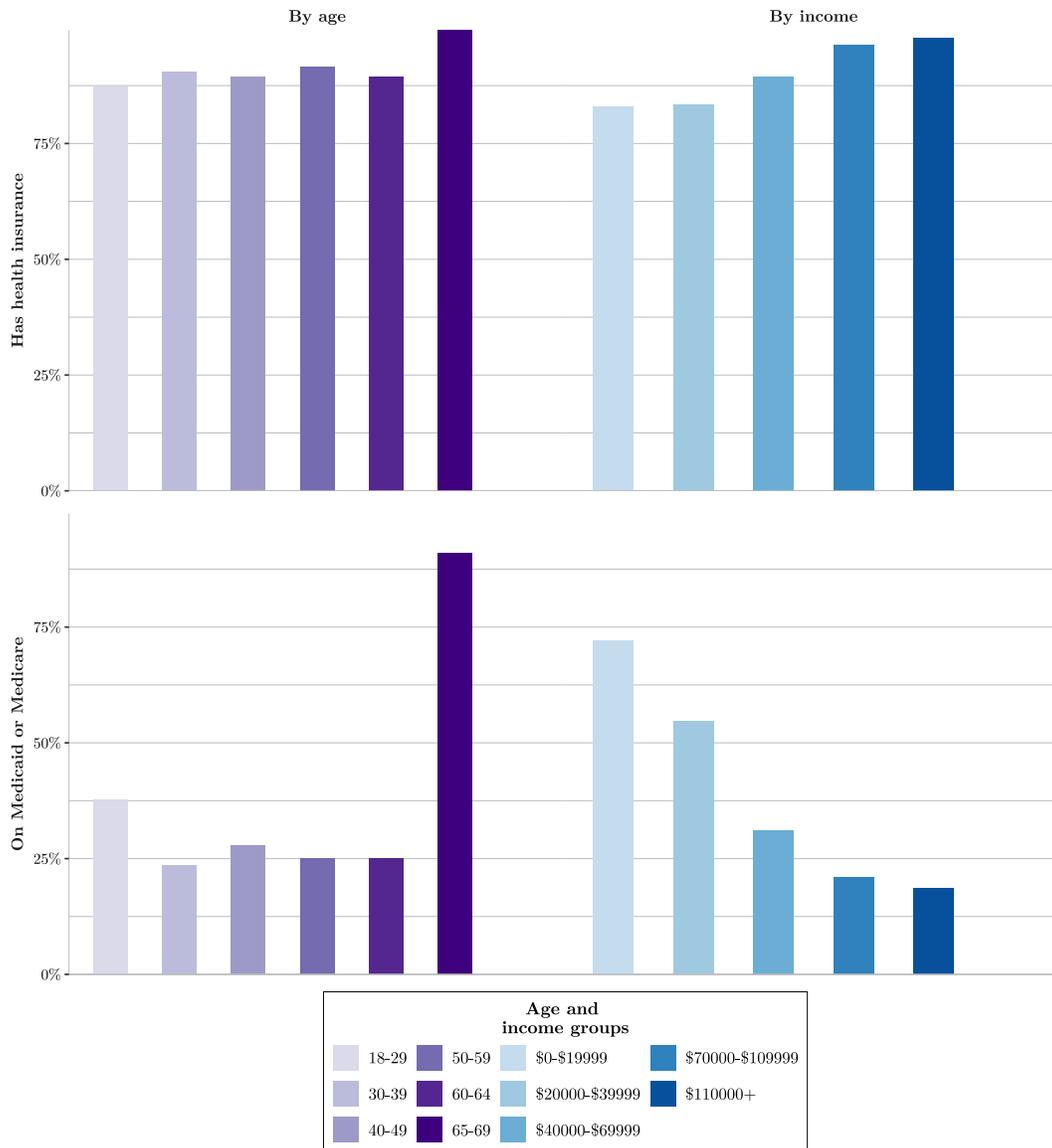
Notes: The bars represent the proportion of respondents in 2019 who had health insurance and who were enrolled in Medicaid or Medicare, broken down by age and income groups.

FIGURE A-2: 2019 SURVEY FLOW

Background of respondent:
Gender, age, income, education, family situation, political views, media exposure.

↓

Open-ended questions:
Main considerations?; Goals of 'good' health insurance system?; Shortcomings?
Goal: identify first order concerns.

↓

Personal Exposure:
Are you on health insurance? Did you recently have to to put off medical treatments because of the costs?

↓

Knowledge:
Factual and quantitative questions: What is Medicare/Medicaid? Goal: get an idea of how much the respondent knows about the health insurance system

↓

Informational and Pedagogical Videos

Redistribution (1/7)	Efficiency (1/7)	Economist (2/7)	No Video (3/7)

Reasoning about Health Insurance	**Reasoning about Health Insurance (Personalized)**	
Neutral: • How would people react to more generous health insurance? • Would health in the US be worse with less generous insurance?	**"Me:"** • How would you react to more generous health insurance? • Would your health be worse with less generous insurance?	**"Women:"** • How would women react to more generous health insurance? • Would women's health be worse with less generous insurance?

↓

Policy Views

↓

Views of Government

Notes: This figure illustrates the survey flow, which is structured into eight sequential blocks. The first block collects demographic and socioeconomic details, including gender, age, income, education, occupation, employment status, marital status, number of children, place of residence, and political views. The second block features open-ended questions designed to capture respondents' initial, unprompted thoughts about health insurance before introducing more structured, closed-ended questions, following Ferrario and Stantcheva (2022). The third block gathers information on respondents' personal experiences with health insurance and their broader health-related experiences. The fourth block assesses their factual knowledge of the U.S. health care system. In the fifth block, the experimental component is introduced, where respondents are randomly assigned to one of four groups, each shown a different informational video or no video at all (control group), with each video emphasizing a distinct aspect of the health insurance system. The fractions in parentheses indicate the proportion of respondents assigned to each treatment. The sixth block explores respondents' reasoning about health insurance, with those who watched a video receiving neutrally phrased questions, while those in the control group are assigned one of two formats: first-person phrasing ("Me" branch) or framing questions around women ("Women" branch). The final blocks examine respondents' policy preferences regarding health insurance and their broader views on the role of government.
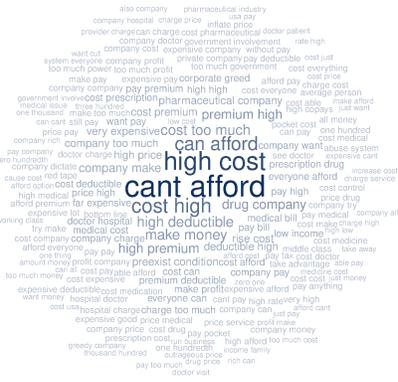
Figure A-3: Word clouds for Health Insurance

(a) What are your Main Considerations about Universal Health Insurance and Whether the U.S. should have Universal Health Insurance?

(b) What would be the Goal of a Good Health Insurance System?
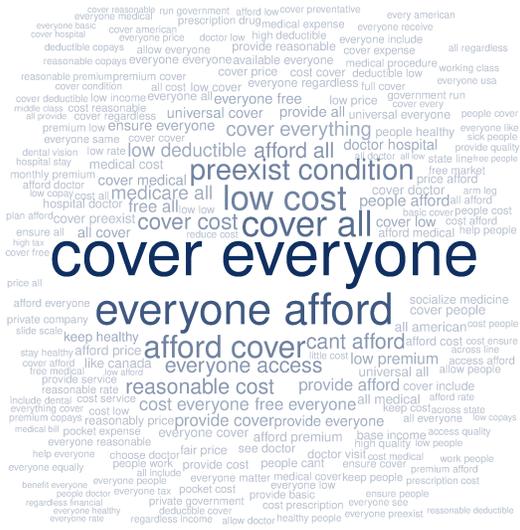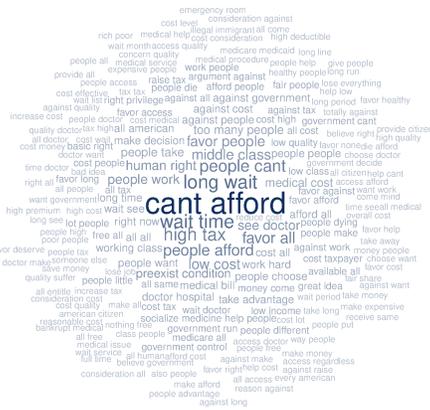
## (c) What is the Biggest Problem with Health Insurance in the U.S.?

Notes: The figure shows word clouds based on the text analysis of the open-ended health insurance questions. Each panel refers to the open-ended question indicated in the caption. Raw answers are processed by removing *stop* words and the words explicitly used in the text of the questions and all *don't know* answers. The largest label, *cover everyone*, appears in 7.6% of responses. Labels for panels (A) and (B) labels were increased by 10% to improve legibility. Data from the 2019 survey.

A-2.1   Text Analysis

FIGURE A-4: ANALYSIS OF OPEN ENDED QUESTIONS

(A) WHEN YOU THINK ABOUT HEALTH INSURANCE AND WHETHER THE U.S. SHOULD HAVE UNIVERSAL HEALTH INSURANCE FOR ALL, WHAT ARE THE MAIN CONSIDERATIONS—IN FAVOR OR AGAINST IT—THAT COME TO YOUR MIND?
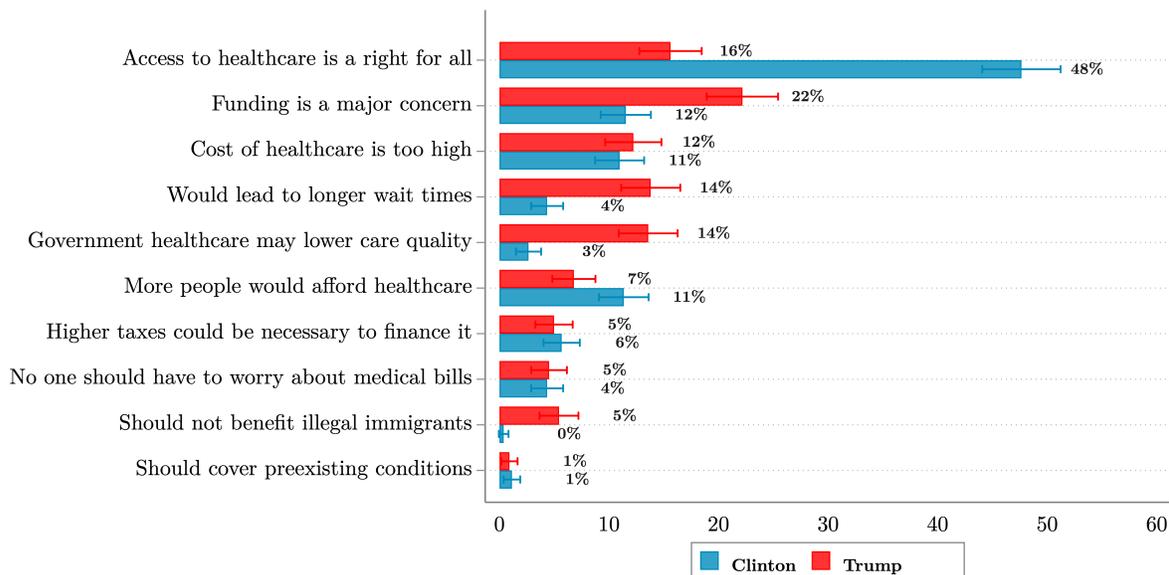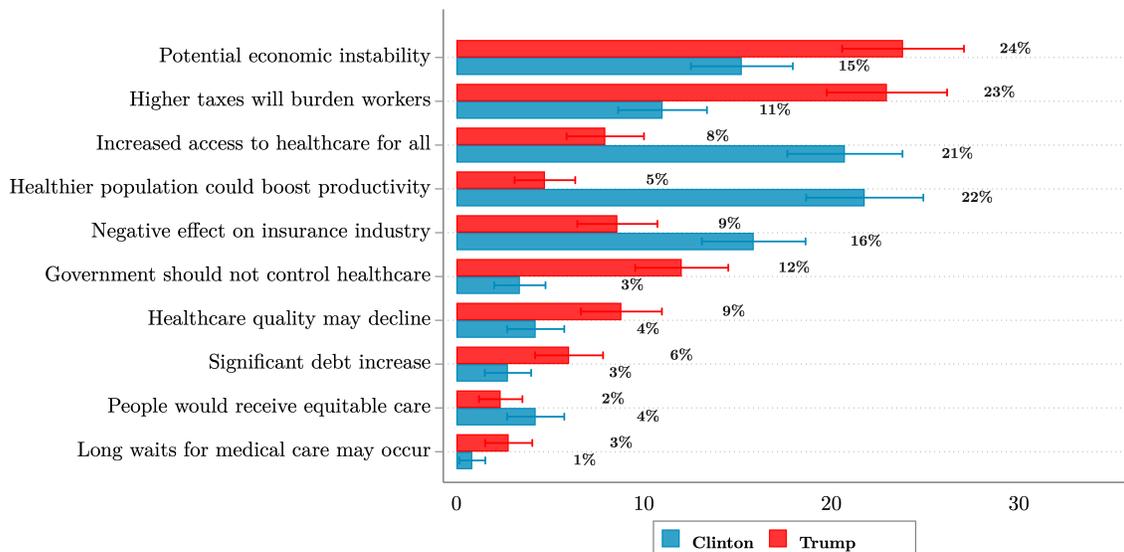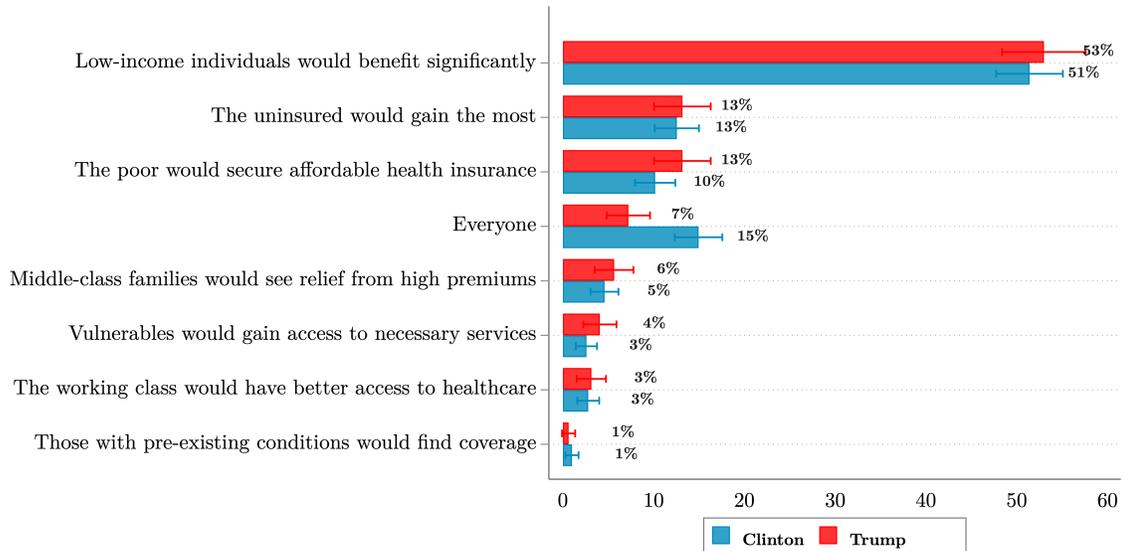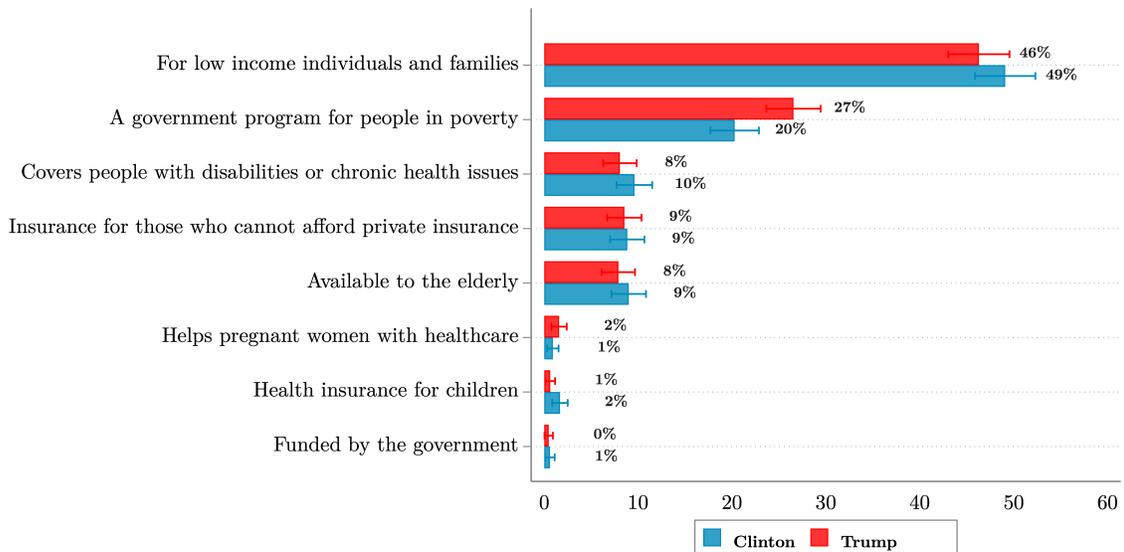

Notes: This chart displays the proportion of answers that match the respective narrative as identified by the LLM, along with their 90% confidence intervals. Percentages sum to 100% for each political affiliation. Data from the 2019 survey.

(B) WHAT WOULD BE A GOOD HEALTH INSURANCE SYSTEM IN YOUR VIEW? WHAT WOULD BE THE GOAL OF A GOOD HEALTH INSURANCE SYSTEM?
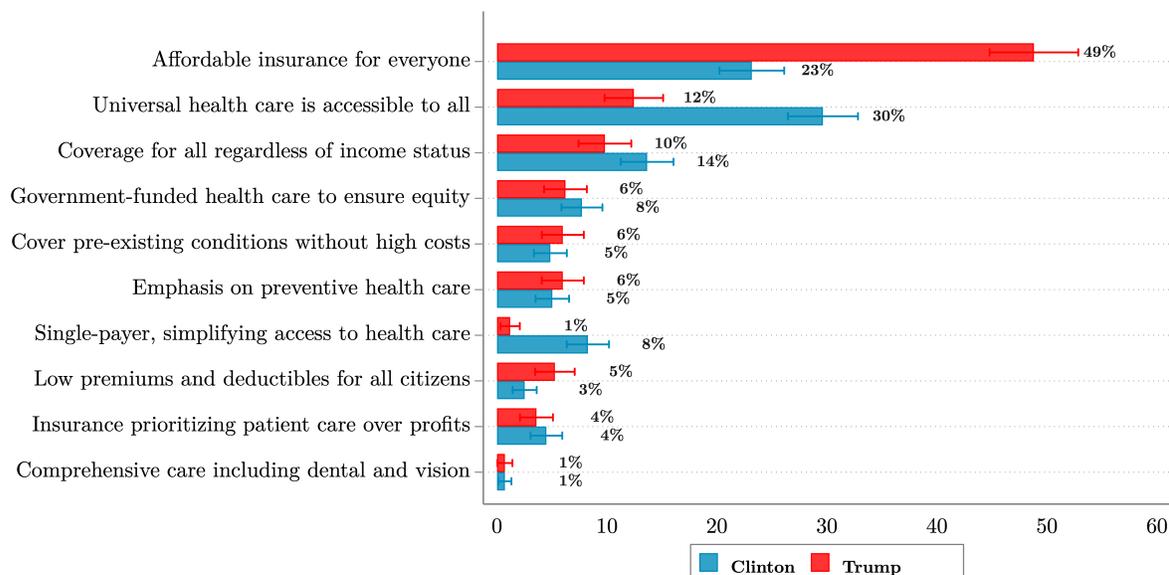
Notes: This chart displays the proportion of answers that match the respective narrative as identified by the LLM, along with their 90% confidence intervals. Percentages sum to 100% for each political affiliation. Data from the 2019 survey.

(c) What do you personally see as the biggest problem with health insurance in the United States today?

Health insurance is unaffordable — Trump 62%, Clinton 52%
Insurance companies prioritize profit — Trump 13%, Clinton 20%
People lack access to necessary care — Trump 14%, Clinton 17%
Pharmaceutical prices are excessive — Trump 6%, Clinton 6%
High out-of-pocket expenses deter people from care — Trump 4%, Clinton 3%
Confusion in navigating health insurance — Trump 2%, Clinton 2%
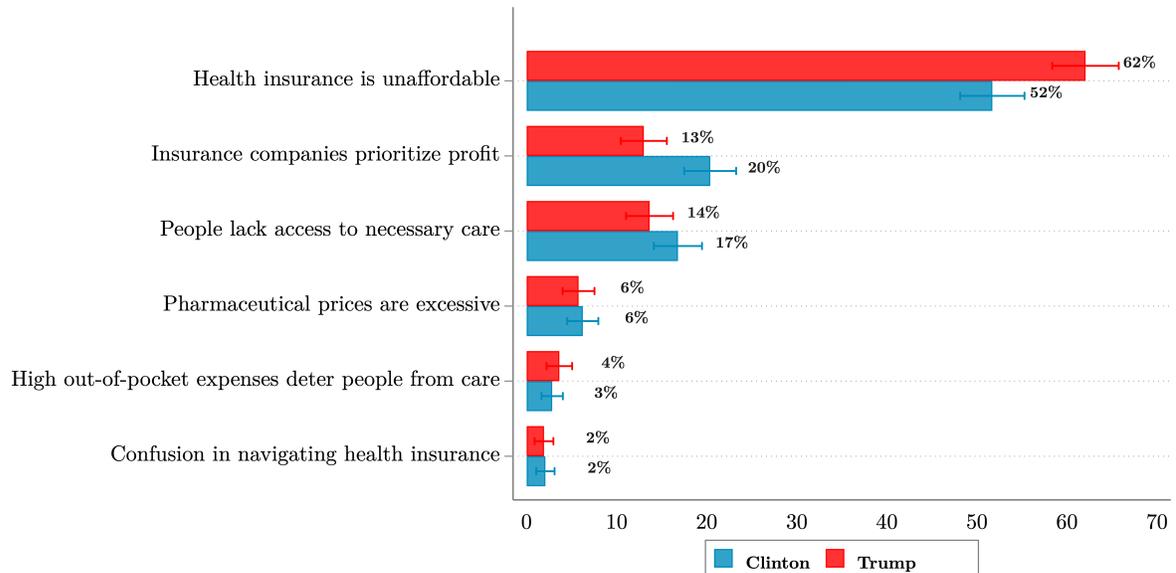
Notes: This chart displays the proportion of answers that match the respective narrative as identified by the LLM, along with their 90% confidence intervals. Percentages sum to 100% for each political affiliation. Data from the 2019 survey.

(d) What do you think would be the effects on the U.S. economy if a single-payer health insurance system were introduced?

Potential economic instability — Trump 24%, Clinton 15%
Higher taxes will burden workers — Trump 23%, Clinton 11%
Increased access to healthcare for all — Trump 8%, Clinton 21%
Healthier population could boost productivity — Trump 5%, Clinton 22%
Negative effect on insurance industry — Trump 9%, Clinton 16%
Government should not control healthcare — Trump 12%, Clinton 3%
Healthcare quality may decline — Trump 9%, Clinton 4%
Significant debt increase — Trump 6%, Clinton 3%
People would receive equitable care — Trump 2%, Clinton 4%
Long waits for medical care may occur — Trump 3%, Clinton 1%

Notes: This chart displays the proportion of answers that match the respective narrative as identified by the LLM, along with their 90% confidence intervals. Percentages sum to 100% for each political affiliation. Data from the 2019 survey.

(E) Which groups of people — if any — would gain if a single-payer health insurance system were introduced in the U.S.?
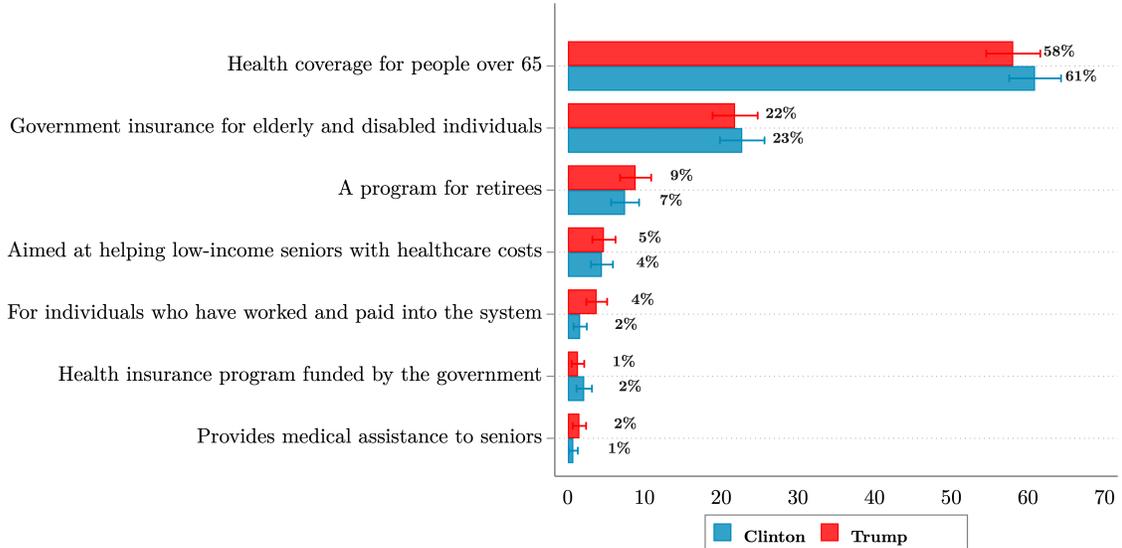

Notes: This chart displays the proportion of answers that match the respective narrative as identified by the LLM, along with their 90% confidence intervals. Percentages sum to 100% for each political affiliation. Data from the 2019 survey.
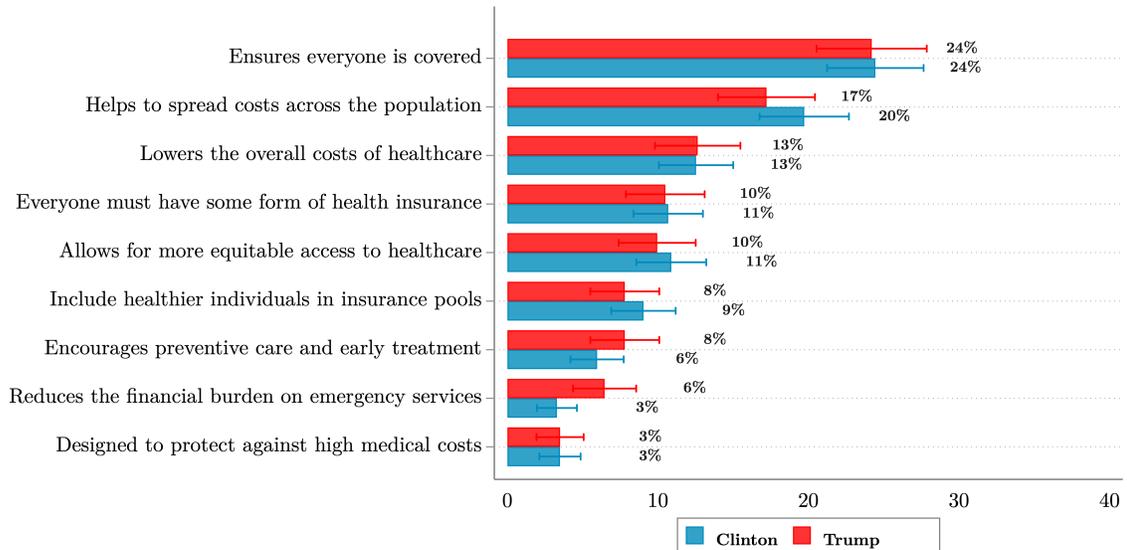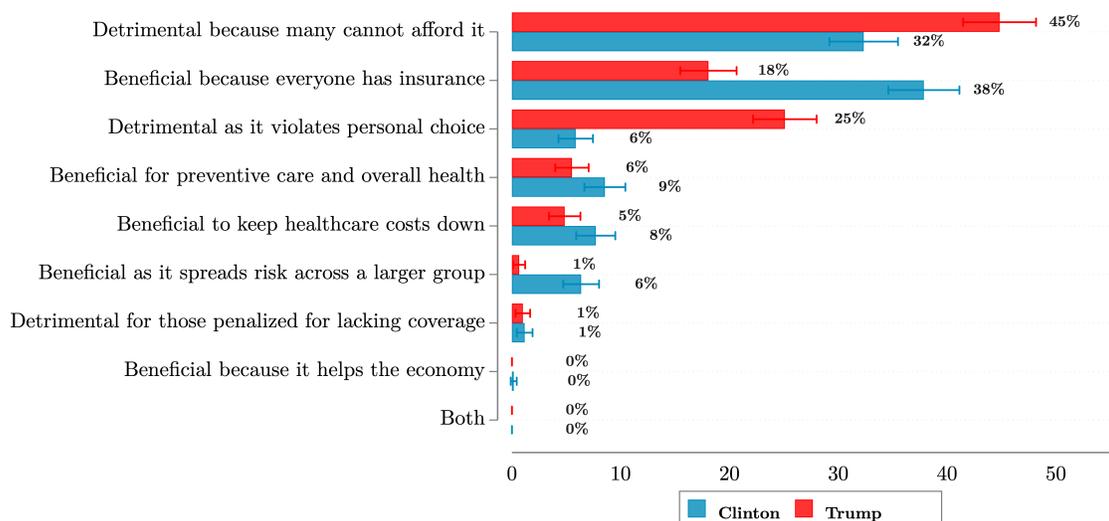
(F) What is Medicaid? Who is eligible for Medicaid?

Notes: This chart displays the proportion of answers that match the respective narrative as identified by the LLM, along with their 90% confidence intervals. Percentages sum to 100% for each political affiliation. Data from the 2019 survey.

(g) What is Medicare? Who is eligible for Medicare?

Notes: This chart displays the proportion of answers that match the respective narrative as identified by the LLM, along with their 90% confidence intervals. Percentages sum to 100% for each political affiliation. Data from the 2019 survey.

(h) In your view, what is the main reason for having an individual mandate?

Notes: This chart displays the proportion of answers that match the respective narrative as identified by the LLM, along with their 90% confidence intervals. Percentages sum to 100% for each political affiliation. Data from the 2019 survey.

(I) WOULD YOU SAY THAT AN INDIVIDUAL MANDATE IS BENEFICIAL OR DETRIMENTAL? PLEASE EXPLAIN YOUR REASONING.

Notes: This chart displays the proportion of answers that match the respective narrative as identified by the LLM, along with their 90% confidence intervals. Percentages sum to 100% for each political affiliation. Data from the 2019 survey.

| | More generous insurance would encourage: | | | Employer insurance discourages quitting bad job | Health in US worse if ↓ insurance | ↑ preventive healthcare, ↓ costs | Healthcare to all important bc of contagion | Efficiency index |
| | less use of emergency rooms | higher use of medical services | higher use of preventive care | | | | | |
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Panel A: Personal Characteristics								
Female	0.02	-0.05**	0.09***	0.06***	0.04*	0.04**	0.04**	0.07**
	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)	(0.03)
Republican	-0.15***	0.06**	-0.19***	-0.12***	-0.25***	-0.17***	-0.18***	-0.40***
	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.02)	(0.02)	(0.04)
Age 30-49	-0.02	-0.04	-0.05	-0.07**	-0.07**	0.03	-0.01	-0.06
	(0.04)	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.05)
Age 50-69	-0.01	-0.08**	-0.02	-0.07**	-0.07**	0.05	0.01	-0.09**
	(0.04)	(0.04)	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.05)
Middle-Income	-0.00	-0.06**	0.02	0.01	-0.00	0.02	0.03	-0.01
	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.02)	(0.04)
High-Income	-0.05	-0.07**	-0.02	0.03	-0.04	0.02	0.04*	-0.06
	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.02)	(0.02)	(0.04)
Panel B: Question formulation								
Women	0.07	0.00	-0.04	-0.07	-0.05	-0.01	-0.02	0.00
	(0.06)	(0.06)	(0.05)	(0.05)	(0.05)	(0.05)	(0.04)	(0.07)
Female	0.02	-0.06**	0.06**	0.03	0.02	0.04*	0.04**	0.05
	(0.03)	(0.03)	(0.03)	(0.02)	(0.02)	(0.02)	(0.02)	(0.04)
Women × Female	-0.09	-0.02	0.08	0.11**	0.09	0.05	0.02	-0.00
	(0.07)	(0.06)	(0.06)	(0.06)	(0.06)	(0.05)	(0.05)	(0.08)
Women	0.02	-0.01	-0.02	-0.06	-0.02	-0.02	-0.05	-0.03
	(0.06)	(0.06)	(0.06)	(0.05)	(0.05)	(0.05)	(0.04)	(0.08)
Republican	-0.14***	0.10***	-0.20***	-0.13***	-0.24***	-0.20***	-0.19***	-0.40***
	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.02)	(0.04)
Women × Republican	0.00	-0.00	0.04	0.10	0.03	0.10	0.07	0.10
	(0.08)	(0.08)	(0.07)	(0.07)	(0.07)	(0.06)	(0.06)	(0.10)
Panel C: Video treatment effects								
Female	0.02	-0.05**	0.09***	0.06***	0.04*	0.04**	0.04**	0.07**
	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)	(0.03)
Redistribution T	0.01	0.01	-0.07	-0.00	-0.02	-0.02	0.00	-0.04
	(0.04)	(0.04)	(0.04)	(0.04)	(0.04)	(0.03)	(0.03)	(0.05)
Efficiency T	0.19***	0.10**	-0.01	-0.07*	-0.03	-0.04	0.02	0.05
	(0.04)	(0.04)	(0.04)	(0.04)	(0.04)	(0.03)	(0.03)	(0.05)
Economist T	0.13***	0.03	-0.03	-0.03	-0.01	-0.03	-0.00	0.03
	(0.04)	(0.04)	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.05)
Redistribution T	0.00	-0.05	-0.02	0.04	0.04	-0.06	-0.00	-0.01
	(0.07)	(0.06)	(0.06)	(0.06)	(0.06)	(0.05)	(0.05)	(0.08)
Efficiency T	0.21***	0.01	-0.01	-0.04	-0.09	0.01	-0.01	-0.03
	(0.07)	(0.06)	(0.06)	(0.06)	(0.06)	(0.05)	(0.05)	(0.08)
Economist T	0.15***	0.03	-0.03	-0.02	-0.00	-0.01	0.00	0.05
	(0.05)	(0.05)	(0.05)	(0.05)	(0.05)	(0.04)	(0.04)	(0.07)
Republican	-0.13***	0.01	-0.18***	-0.08**	-0.24***	-0.13***	-0.20***	-0.38***
	(0.04)	(0.04)	(0.04)	(0.04)	(0.04)	(0.03)	(0.03)	(0.06)
Redistribution T × Republican	-0.04	0.14	-0.13	-0.12	-0.12	0.00	-0.01	-0.14
	(0.09)	(0.09)	(0.08)	(0.08)	(0.08)	(0.07)	(0.06)	(0.11)
Efficiency T × Republican	-0.02	0.12	0.02	-0.06	0.08	-0.07	0.09	0.13
	(0.09)	(0.08)	(0.08)	(0.08)	(0.08)	(0.07)	(0.06)	(0.11)
Economist T × Republican	-0.02	0.04	-0.01	-0.08	-0.01	-0.08	0.01	-0.06
	(0.07)	(0.07)	(0.06)	(0.06)	(0.06)	(0.05)	(0.05)	(0.09)
Panel D: Descriptive statistics								
Control mean	0.48	0.36	0.72	0.79	0.75	0.81	0.84	0.00
Male control mean	0.45	0.46	0.72	0.75	0.72	0.78	0.80	-0.05
Democrat control mean	0.56	0.35	0.85	0.82	0.89	0.91	0.98	0.23
Republican control mean	0.47	0.41	0.64	0.83	0.70	0.72	0.72	-0.12
Observations	1824	1822	1822	1825	1824	1825	1824	1825

Notes: The dependent variables in columns 1-3 are indicator variables equal to one if the respondent thinks that the extent to which more generous health insurance would encourage people/themselves/women towards the behaviors listed ranges from *a lot* to *a great deal. Employer insurance discourages quitting bad job:* the dependent variable is an indicator variable equal to one if the respondent thinks that health insurance through the employer would discourage people/respondents themselves/women from quitting a bad job or switching jobs out of fear of losing their health insurance. The dependent variables in columns 4-7 are indicator variables equal to one if: *Health in US worse off if ↓ insurance:* the respondent agrees or strongly agrees that with less generous health insurance, health in the U.S./their own health/women's health would be worse since they could not afford appropriate medical care; *↑ preventive healthcare, ↓ costs:* the respondent agrees or strongly agrees that more generous insurance coverage for preventive care can lead to a reduction in total medical costs/to a reduction of their own medical costs/more generous coverage for preventive care *for women* can lead to a reduction in total medical costs; *Healthcare to all important bc of contagion:* the respondent agrees or strongly agrees that it is important that everyone/the respondent themselves/all women can afford proper health care because people who become sick with a contagious disease could have negative effects on others too; *Efficiency index:* index that captures whether the respondent supports efficiency arguments in favor of having health insurance. The questions in columns (1) to (7) are asked with the three different formulations: "Me," "women," and the generic formulation. Standard errors in parentheses. * $p < 0.1$, ** $p < 0.05$, *** $p < 0.01$. Data from the 2019 survey.

	↑ insurance, ↓ financial stress (1)	Important to to help low-incomes (2)	Unfair to pay more if: Pre-existing conditions (3)	Worse health (4)	Health issue outside of own control (5)	Equity index (6)
Panel A: Personal Characteristics						
Female	0.04**	-0.02	0.19***	0.16***	0.03	0.22***
	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)	(0.03)
Republican	-0.16***	-0.30***	-0.18***	-0.15***	-0.18***	-0.57***
	(0.02)	(0.03)	(0.03)	(0.03)	(0.03)	(0.04)
Age 30-49	0.02	-0.04	0.11***	0.07**	-0.02	0.07
	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.05)
Age 50-69	0.02	-0.04	0.15***	0.10***	-0.07**	0.07
	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.05)
Middle-Income	0.01	-0.04	0.07**	0.05*	-0.03	-0.01
	(0.02)	(0.03)	(0.03)	(0.03)	(0.03)	(0.04)
High-Income	0.01	-0.11***	0.01	0.02	-0.06**	-0.11***
	(0.02)	(0.03)	(0.03)	(0.03)	(0.03)	(0.04)
Panel B: Question formulation						
Women	-0.02	-0.05	-0.07*	-0.08**	0.14***	-0.04
	(0.03)	(0.04)	(0.04)	(0.03)	(0.04)	(0.06)
Women	-0.01	-0.03	0.00	-0.01	0.14**	0.11
	(0.05)	(0.05)	(0.05)	(0.05)	(0.05)	(0.08)
Republican	-0.16***	-0.27***	-0.15***	-0.13***	-0.18***	-0.54***
	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.05)
Women × Republican	-0.03	-0.04	-0.13*	-0.14**	-0.00	-0.23**
	(0.06)	(0.07)	(0.07)	(0.06)	(0.07)	(0.11)
Panel C: Video treatment effects						
Redistribution T	-0.04	-0.08	-0.05	-0.00	0.08	-0.02
	(0.05)	(0.06)	(0.06)	(0.06)	(0.06)	(0.09)
Efficiency T	-0.03	-0.09	-0.09	-0.04	0.05	-0.09
	(0.05)	(0.06)	(0.06)	(0.05)	(0.06)	(0.09)
Economist T	-0.07*	-0.08*	-0.09*	-0.10**	0.09*	-0.07
	(0.04)	(0.05)	(0.05)	(0.04)	(0.05)	(0.07)
Republican	-0.16***	-0.33***	-0.23***	-0.19***	-0.15***	-0.58***
	(0.03)	(0.04)	(0.04)	(0.04)	(0.04)	(0.06)
Redistribution T × Republican	-0.03	0.04	0.02	-0.01	-0.10	-0.13
	(0.07)	(0.08)	(0.08)	(0.07)	(0.08)	(0.12)
Efficiency T × Republican	-0.02	0.10	0.13	0.03	-0.05	0.09
	(0.07)	(0.07)	(0.08)	(0.07)	(0.08)	(0.12)
Economist T × Republican	0.02	0.03	0.11*	0.10*	-0.04	0.06
	(0.05)	(0.06)	(0.06)	(0.06)	(0.06)	(0.09)
Redistribution T	-0.03	-0.07*	-0.04	-0.03	0.02	-0.04
	(0.03)	(0.04)	(0.04)	(0.04)	(0.04)	(0.06)
Efficiency T	-0.06*	-0.06	-0.03	-0.04	0.05	-0.04
	(0.03)	(0.04)	(0.04)	(0.04)	(0.04)	(0.06)
Economist T	-0.06**	-0.05	-0.05	-0.04	0.08**	-0.02
	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.05)
Panel D: Descriptive statistics						
Control mean	0.86	0.78	0.75	0.82	0.66	-0.00
Male control mean	0.84	0.78	0.66	0.71	0.68	-0.12
Democrat control mean	0.94	0.91	0.84	0.84	0.74	0.25
Republican control mean	0.81	0.66	0.66	0.76	0.65	-0.23
Observations	1825	1823	1672	1671	1824	1825

Notes: The dependent variables are indicator variables equal to one if ↑ *insurance, ↓ financial stress:* the respondent agrees or strongly agrees that more generous health insurance can help people/the respondent themselves/women deal with unexpected large medical costs, reducing financial stress; *Important to help low-incomes:* the respondent agrees or strongly agrees that it is important to financially help low-income families/families like that of the respondent themselves/low-income women so that they can afford medical care. *Unfair to pay more if pre-existing conditions:* the respondent believes that it is unfair or very unfair that people with pre-existing conditions have to pay more for their health insurance than people without pre-existing conditions/the respondent themselves had to pay more for his own health insurance than people with fewer pre-existing conditions than them/women with pre-existing conditions have to pay more for their health insurance than women without pre-existing conditions; *Unfair to pay more if worse health:* the respondent believes that it is unfair or very unfair that people born with worse health have to pay more for health care or insurance than people born with better health/the respondent themselves had to pay more for their own health insurance than people born with better health than themselves/if women born with worse health have to pay more for health care or insurance than women born with better health; *Health issue out of own control:* the respondent believes that health issues are mostly the result of circumstances outside of one's control/that the respondent's own health issues are mostly the result of circumstances outside of their own control/that women's health issues are mostly the result of circumstances outside of their control; *Equity index:* index that captures whether the respondent supports equity arguments in favor of having health insurance. The questions in columns (1) to (5) are asked with the three different formulations: "Me," "women," and the generic formulation. Standard errors in parentheses. * $p < 0.1$, ** $p < 0.05$, *** $p < 0.01$. Data from the 2019 survey.

	Catastrophic situations (1)	Pediatric care (2)	Preventive care (3)	Maternity (4)	Emergency room (5)	Primary care visits (6)	Specialists non-essential care (7)
Panel A: Personal Characteristics							
Female	-0.02	0.03	0.05**	0.07***	-0.03	0.01	-0.04*
	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)
Republican	-0.16***	-0.25***	-0.11***	-0.19***	-0.16***	-0.17***	-0.07***
	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.02)
Age 30-49	-0.06	-0.02	0.01	-0.06*	-0.01	-0.01	0.00
	(0.04)	(0.04)	(0.03)	(0.04)	(0.04)	(0.03)	(0.03)
Age 50-69	-0.05	-0.11***	0.00	-0.17***	-0.02	-0.05	-0.05
	(0.04)	(0.04)	(0.04)	(0.04)	(0.04)	(0.04)	(0.03)
Middle-Income	-0.06*	0.01	0.05	-0.03	-0.04	-0.04	-0.05**
	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)
High-Income	-0.07**	-0.00	0.06**	-0.01	-0.07**	-0.05	-0.12***
	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)
Panel B: Underlying mechanisms							
Republican	-0.01	-0.09***	0.01	-0.05*	-0.03	-0.07**	0.02
	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)
Efficiency index	0.09***	0.10***	0.19***	0.10***	0.11***	0.12***	0.10***
	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)
Equity Index	0.17***	0.15***	0.07***	0.15***	0.11***	0.05**	0.04**
	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)
Government trust Index	0.03	0.05***	0.01	0.03	0.04**	0.04**	0.04**
	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)
Panel C: Video treatment effects							
Redistribution T	-0.04	0.03	-0.02	0.01	0.05	0.02	-0.02
	(0.04)	(0.04)	(0.04)	(0.04)	(0.04)	(0.04)	(0.04)
Efficiency T	-0.03	0.03	0.08*	0.04	0.03	0.05	0.08**
	(0.04)	(0.04)	(0.04)	(0.04)	(0.04)	(0.04)	(0.04)
Economist T	-0.03	-0.02	0.02	0.01	0.04	0.02	0.03
	(0.04)	(0.04)	(0.04)	(0.04)	(0.04)	(0.04)	(0.03)
Redistribution T	-0.08	-0.01	-0.07	-0.03	-0.03	0.07	-0.02
	(0.07)	(0.07)	(0.07)	(0.07)	(0.07)	(0.06)	(0.06)
Efficiency T	0.02	0.00	0.06	0.03	0.04	0.12*	0.14**
	(0.07)	(0.07)	(0.06)	(0.07)	(0.07)	(0.06)	(0.06)
Economist T	-0.06	-0.03	0.03	-0.07	0.00	-0.02	0.02
	(0.05)	(0.05)	(0.05)	(0.05)	(0.05)	(0.05)	(0.05)
Redistribution T × Republican	0.10	0.04	0.00	0.08	0.05	-0.12	-0.05
	(0.09)	(0.09)	(0.09)	(0.09)	(0.09)	(0.09)	(0.07)
Efficiency T × Republican	-0.09	0.01	0.01	0.02	-0.02	-0.12	-0.06
	(0.09)	(0.09)	(0.08)	(0.09)	(0.09)	(0.08)	(0.07)
Economist T × Republican	0.03	0.05	-0.04	0.15**	0.03	0.07	0.02
	(0.07)	(0.07)	(0.07)	(0.07)	(0.07)	(0.07)	(0.06)
Panel D: Descriptive statistics							
Control mean	0.57	0.54	0.61	0.48	0.41	0.32	0.20
Male control mean	0.57	0.55	0.60	0.45	0.45	0.34	0.22
Democrat control mean	0.63	0.71	0.66	0.60	0.50	0.43	0.23
Republican control mean	0.50	0.37	0.56	0.35	0.28	0.24	0.13
Observations	1823	1819	1824	1822	1822	1824	1824

Notes: The dependent variables are indicator variables equal to one if the respondent supports full coverage (the patient pays no costs out of pocket) for the medical services listed. Standard errors in parentheses. * $p < 0.1$, ** $p < 0.05$, *** $p < 0.01$. Data from the 2019 survey.

	Insurance system unfair (1)	Dissatisfied health insurance (2)	Support Medicare for all (3)	Support transfers to low-inc. (4)	Support individual mandate (5)	Support employer mandate (6)
Panel A: Personal Characteristics						
Female	0.13***	0.14***	-0.12***	-0.06**	-0.04*	0.06***
	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)
Republican	-0.28***	-0.17***	-0.36***	-0.32***	-0.26***	-0.23***
	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)
Age 30-49	0.02	-0.02	-0.06*	-0.03	0.00	-0.05*
	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)
Age 50-69	0.04	-0.03	-0.14***	-0.08**	0.00	-0.08**
	(0.04)	(0.04)	(0.04)	(0.04)	(0.03)	(0.03)
Middle-Income	0.04	0.01	-0.07**	-0.11***	0.00	-0.01
	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)
High-Income	-0.00	-0.06**	-0.08***	-0.09***	0.10***	0.03
	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)
Panel B: Underlying mechanisms						
Republican	-0.16***	-0.08***	-0.16***	-0.13***	-0.16***	-0.10***
	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)
Efficiency index	0.00	-0.03	0.14***	0.13***	0.11***	0.12***
	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)
Equity Index	0.24***	0.22***	0.11***	0.17***	-0.04**	0.08***
	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)
Government trust Index	-0.04**	-0.05***	0.15***	0.09***	0.16***	0.06***
	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)
Panel C: Video treatment effects						
Redistribution T	0.02	-0.02	0.01	-0.01	0.05	-0.05
	(0.04)	(0.04)	(0.04)	(0.04)	(0.04)	(0.04)
Efficiency T	0.00	-0.02	0.03	-0.01	0.07*	-0.01
	(0.04)	(0.04)	(0.04)	(0.04)	(0.04)	(0.04)
Economist T	-0.01	-0.01	-0.00	-0.03	0.02	-0.01
	(0.04)	(0.04)	(0.04)	(0.04)	(0.03)	(0.03)
Redistribution T	0.06	-0.04	0.03	0.00	-0.03	0.03
	(0.06)	(0.07)	(0.06)	(0.06)	(0.06)	(0.06)
Efficiency T	-0.05	0.01	0.03	-0.03	0.10*	-0.00
	(0.06)	(0.06)	(0.06)	(0.06)	(0.06)	(0.06)
Economist T	-0.03	-0.03	0.01	-0.03	0.04	-0.02
	(0.05)	(0.05)	(0.05)	(0.05)	(0.05)	(0.05)
Republican	-0.28***	-0.19***	-0.35***	-0.32***	-0.25***	-0.22***
	(0.04)	(0.04)	(0.04)	(0.04)	(0.04)	(0.04)
Redistribution T × Republican	-0.09	-0.01	-0.01	-0.01	0.05	-0.13
	(0.08)	(0.09)	(0.08)	(0.09)	(0.08)	(0.08)
Efficiency T × Republican	0.09	0.00	-0.01	0.06	-0.04	0.02
	(0.08)	(0.08)	(0.08)	(0.08)	(0.08)	(0.08)
Economist T × Republican	0.02	0.08	-0.03	-0.02	-0.04	0.01
	(0.06)	(0.07)	(0.06)	(0.07)	(0.06)	(0.06)
Panel D: Descriptive statistics						
Control mean	0.64	0.61	0.43	0.60	0.29	0.71
Male control mean	0.58	0.53	0.50	0.63	0.31	0.65
Democrat control mean	0.77	0.73	0.65	0.78	0.48	0.81
Republican control mean	0.45	0.48	0.23	0.44	0.16	0.58
Observations	1825	1825	1824	1825	1824	1824

Notes: The dependent variables are indicator variables equal to one if: *Access to healthcare should improve:* the respondent believes that access to healthcare should be improved for many families; *Insurance system unfair:* the respondent believes that the U.S. insurance system is somewhat unfair or very unfair; *Dissatisfied health insurance:* the respondent is somewhat dissatisfied or very dissatisfied with the health insurance in the U.S.; *Support Medicare for all:* the respondent supports or strongly supports Medicare-for-all. *Support transfers to low-inc.:* the respondent supports or strongly supports providing additional transfers or subsidies to low-income families to help them with the costs of their health care; *Support individual mandate:* the respondent supports or strongly supports having an individual mandate; *Support employer mandate:* the respondent supports or strongly supports having an employer mandate whereby every large employer is obliged to offer health insurance plans for employees. Standard errors in parentheses. * $p < 0.1$, ** $p < 0.05$, *** $p < 0.01$. Data from the 2019 survey.

sectionDefinition of Variables

Core Respondents' Characteristics

Female: respondent is female.

Male: respondent is male.

Age 18-29: respondent's age is between 18 and 29 years.

Age 30-49: respondent's age is between 30 and 49 years.

Age 50-69: respondent's age is between 50 and 69 years.

White: respondent's ethnicity is European American/White.

Black: respondent's ethnicity is African American/Black.

Hispanic: respondent's ethnicity is Hispanic/Latino.

Low-Income: respondent's household income is below $39,000.

Middle-Income: respondent's household income is between $40,000- $69,000.

High-Income: respondent's household income is above $70,000.

Republican: respondent's political affiliation is Republican.

Democrat: respondent's political affiliation is Democrat.

Independent and others: respondent's political affiliation is independent or other or he is non-affiliated.

Trump: respondent supported (or would have supported) Trump in the last presidential elections.

Clinton: respondent supported (or would have supported) Clinton in the last presidential election (2019 survey only).

Harris: respondent supported (or would have supported) Harris in the last presidential election (2025 only).

Economics related major: respondent has a college degree with an economics-related major.

College Degree: respondent has a college degree.

Less than 4-year college: respondent reports as highest level of education "High School degree/ GED", or "Some College", or "2-year College Degree."

4-year college/Master's: respondent reports as highest level of education "4-year College Degree" or "Master's Degree."

Professional degree: respondent reports as highest level of education "Doctoral Degree" or "Professional Degree (JD, MD, MBA)."

Policy knowledge: respondent self-reports being "highly knowledgeable" or "somewhat knowledgeable" on economic policies and issues.

No policy knowledge: respondent self-reports being "not very knowledgeable" or "not knowledgeable at all" on economic policies and issues.

Retiree: respondent self-reports being a "retiree".

Not working: respondent self-reports being "unemployed and looking for work" or "not currently working and not looking for work."

Working: respondent self-reports being "self-employed or small business owner," or "part-time employee," or "full-time employee."

Has kids: respondent self-reports having at least one child.

"ME" randomization: respondent was randomized to see the mechanisms questions personally formulated.

"WOMEN" randomization: respondent was randomized to see the mechanisms questions formulated about women rather than people in general.

Redistribution T: respondent was randomized to see the information treatment focused on the distributional

impacts of the policies (2019 only).

Efficiency T: respondent was randomized to see the information treatment focused on the efficiency costs of the policies (2019 only).

Economist T: respondent was randomized to see the information treatment focused on both efficiency costs and distributional impacts of the policies (2019 only).

Medicare T: respondent was randomized to see the information treatment focused on Medicare (2025 only).

Medicaid T: respondent was randomized to see the information treatment focused on Medicaid (2025 only).

Received incentive: indicator variable if the respondent received incentives for the knowledge questions.

Mechanisms and Outcomes

More generous insurance would encourage less use of emergency rooms: dummy equals one if the respondent believes that the extent to which more generous insurance would encourage people (in the control group and for all respondents in 2025), the respondent themselves (in the "ME" randomization), women (in the "WOMEN" randomization) to make less use of the emergency room for conditions that do not warrant it ranges from a lot to a great deal.

More generous insurance would encourage higher use of medical services: dummy equals one if the respondent believes that the extent to which more generous insurance would encourage people (in the control group and for all respondents in 2025), the respondent themselves (in the "ME" randomization), women (in the "WOMEN" randomization) to use more medical services they do not really need simply because they do not have to pay the full cost of them ranges from a lot to a great deal.

More generous insurance would encourage higher use of preventive care: dummy equals one if the respondent believes that the extent to which more generous insurance would encourage a lot or a great deal people (in the control group and for all respondents in 2025), the respondent themselves (in the "ME" randomization), women (in the "WOMEN" randomization) to use more preventive medical care such as regular screenings and check-ups ranges from a lot to a great deal.

Employer insurance discourages quitting bad job: dummy equals one if respondent believes that employer-provided health insurance would discourage people (in the control group and for all respondents of 2025), the respondent themselves (in the "ME" randomization), women (in the "WOMEN" randomization) from quitting a bad job or switching jobs from fear of losing their health insurance

Health in US worse if ↓ insurance: dummy equals 1 if respondent agrees or strongly agrees that with less generous health insurance, health in the U.S. (in the control group and for all respondents in 2025), the respondent's own health (in the "ME" randomization), women's health (in the "WOMEN" randomization) would be worse since they could not afford sufficient and appropriate medical care.

↑ preventive health care, ↓ costs: dummy equals 1 if the respondent agrees or strongly agrees that more generous health insurance coverage for preventive care can lead to a reduction in total medical costs (in the control group and for all respondents in 2025), to a reduction of the respondent's own total medical costs (in the "ME" randomization), more generous health insurance coverage for preventive care for women can lead to a reduction in total medical costs (in the "WOMEN" randomization).

health care to all important bc of contagion: dummy equals 1 if the respondent agrees or strongly agrees that healthcare for all (in the control group and for all respondents in 2025), the individual (in the "ME" randomization), or women (in the "WOMEN" randomization) is important because untreated people sick with contagious diseases have negative effects on others too.

Access to health care should be improved: dummy equals 1 if respondent believes that access to health care should be improved for many families.

↑ insurance, ↓ financial stress: dummy equals 1 if respondent agrees or strongly agrees that more generous health insurance can help people (in the control group and for all respondents in 2025), the respondent themselves deal with (in the "ME" randomization), women (in the "WOMEN" randomization) deal with unexpected large medical costs, reducing the financial stress.

Important to help low-incomes: dummy equals 1 if respondent agrees or strongly agrees that it is important to help low-income families (in the control group and for all respondents in 2025), families like mine (in the "ME" randomization), low-income women (in the "WOMEN" randomization) so that they can afford medical care.

Unfair to pay more if pre-existing conditions: dummy equals 1 if respondent believes that it is very unfair or unfair that people with pre-existing conditions have to pay more for their health insurance than people without pre-existing conditions (in the control group and for all respondents in 2025), if the respondent themselves had to pay more for his own health insurance than people with fewer pre-existing conditions than him (in the "ME" randomization), if women with pre-existing conditions have to pay more for their health insurance than women without pre-existing conditions (in the "WOMEN" randomization).

Unfair to pay more if worse health: dummy equals 1 if respondent believes that it is very unfair or unfair that people born with worse health have to pay more for health care or insurance than people born with better health (in the control group and for all respondents in 2025), if the respondent themselves had to pay more for his own health insurance than people born with better health than him (in the "ME" randomization), if women born with worse health have to pay more for health care or insurance than women born with better health (in the "WOMEN" randomization).

Health issue out of own control: dummy equals 1 if the respondent believes that health issues are mostly the result of circumstances outside of one's control (in the control group and for all respondents in 2025), that his own health issues are mostly the result of circumstances outside of his own control (in the "ME" randomization), that women's health issues are mostly the result of circumstances outside of their control (in the "WOMEN" randomization).

Insurance system unfair: dummy equals 1 if the respondent believes that the US insurance system is somewhat unfair or very unfair.

Dissatisfied health insurance: dummy equals 1 if the respondent is somewhat dissatisfied or very dissatisfied with the health insurance in the U.S.

Support Medicare for all: dummy equals 1 if respondent supports or strongly supports Medicare-for-all.

Support transfers to low-inc.: dummy equals 1 if respondent supports or strongly supports providing additional transfers or subsidies to low-income families to help them with the costs of their health care.

Support individual mandate: dummy equals 1 if respondent supports or strongly supports having an individual mandate.

Support employer mandate: dummy equals 1 if respondent supports or strongly supports having an employer mandate whereby every large employer, with more than 50 employees, is obliged to offer health insurance plans for their employees.

Support Medicare expansion: dummy equals 1 if respondent supports or strongly supports lowering the age threshold for Medicare, so that more people become eligible.

Support Medicare more gen.: dummy equals 1 if respondent supports or strongly supports expanding the

services offered by Medicare.

Support Medicaid expansion: dummy equals 1 if respondent supports or strongly supports expanding Medicaid, so that more people are eligible for it.

Support Medicare more gen.: dummy equals 1 if respondent supports or strongly supports expanding the services offered by Medicaid.

Support govt. provision expansion: dummy equals 1 if respondent supports or strongly supports an expansion of government-provided health insurance.

Preventive care: dummy equals 1 if respondent supports full coverage for preventive care.

Primary care visits: dummy equals 1 if respondent supports full coverage for primary care visits.

Maternity: dummy equals 1 if respondent supports full coverage for maternity and newborn care.

Specialists non-essential care: dummy equals 1 if respondent supports full coverage for specialist visits for non-essential care.

Catastrophic situations: dummy equals 1 if respondent supports full coverage for catastrophic situations.

Emergency room: dummy equals 1 if respondent supports full coverage for ER care.

Pediatric care: dummy equals 1 if respondent supports full coverage for pediatric care.

Indices

Each index is based on all survey questions pertaining to the corresponding mechanism (efficiency, equity, government trust). The index is created by firstly taking the simple average of the standardized values of the variables pertaining to the relevant questions, where z-scores are computed by subtracting the control group mean and dividing by the control group standard deviation. Then, the average is standardized again.

Efficiency index: Index that captures if the respondent is in favor of having health insurance for efficiency reasons. It combines both open-ended questions on the reasons to have an individual mandate and multiple-choice questions on the reasons for having health insurance in general. Specifically, it combines the following variables: "more generous insurance encourages to make less use of the emergency room;" "more generous insurance encourages higher use of medical services;" "more generous insurance encourages higher use of preventive care;" "$\uparrow$ preventive health care, $\downarrow$ costs;" "health care to all important bc of contagion;" "employer-insurance discourage quit bad job;" "health in US worse if $\downarrow$ insurance."

Equity index: Index that captures if the respondent is in favor of having a health insurance for equity reasons. It combines both open-ended questions on the reasons to have an individual mandate and multiple-choice questions on the reasons for having health insurance in general. Specifically, it combines the following variables: "$\uparrow$ insurance, $\downarrow$ financial stress;" "important to help low-incomes;" "unfair to pay more if pre-existing conditions;" "unfair to pay more if worse health;" "health issue out of own control."

Government trust index: Index that captures if the respondent trusts the government. It combines multiple-choice questions on the reasons for having health insurance in general. Specifically, it combines the following variables: "government can be trusted to do what is right;" "government should do more to solve problems;" "government should be active in most areas."

A-3 Robustness of the results to a typo in the Medicaid treatment

In the 2025 survey, the original treatment video for Medicaid contained two typos: in two different screens, it mistakenly used the word "Medicare" instead of "Medicaid." Specifically, the first incorrect sentence is found at minute 00:59 and states: "The benefits of Medicare are also not limited to those who receive coverage. Medicare helps us all." The second error appears at 01:47 and reads: "Research shows that Medicaid works. It saves lives, reduces hardship, and helps people thrive. Expanding Medicare could allow more Americans to enjoy these health and financial benefits." To assess the robustness of our findings, in October 2025 we re-ran the survey with the corrected version of the video for a sample of 201 respondents.

Below we show that there is no difference in the views expressed between respondents who saw the original video and those who saw the corrected video. Specifically, the tables below report the results from regressions where the dependent variables are all responses from the survey which we have used in the analysis, and the independent variables are an indicator equal to one if the respondent viewed the incorrect version, alongside the full set of demographic controls. Except in one case, we do not find any significant difference in responses. Specifically, the coefficients on the variables for Medicare support and expansion, which were more plausibly affected by the error, are insignificant, supporting robustness.

FIGURE A-5: MEDICAID TREATMENT TYPOS

Notes: The figure shows screenshots from the information treatment on Medicaid. It highlights the mistakes that were made in that treatment for the 2025 July survey wave. Instead of referring to Medicaid, the video referred to Medicare on two screens. The link to the video can be found here.

FIGURE A-6: MEDICAID TREATMENT TYPOS - CORRECTED
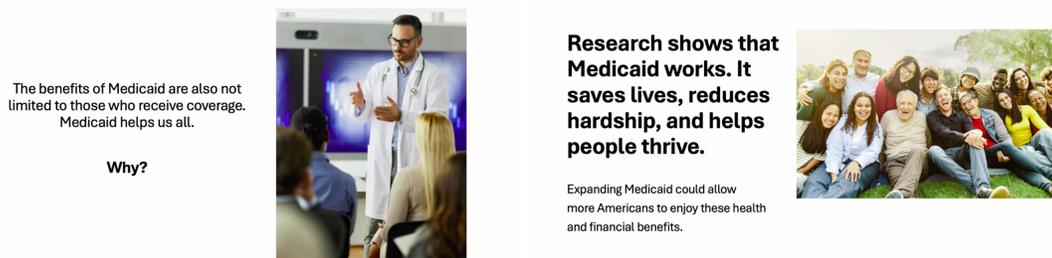
Notes: The figure shows screenshots of the corrected version of the Medicaid treatment used in the 2025 October survey wave to check the robustness of the results to the mistake made in the July wave. The link to the video can be found here.

TABLE A-10: EFFICIENCY COSTS AND SPILLOVER EFFECTS OF HEALTH INSURANCE

| | More generous insurance would encourage: | | | Employer insurance discourages quitting bad job | Health in US worse if ↓ insurance | ↑ preventive healthcare, ↓ costs | Healthcare to all important bc of contagion | Efficiency index |
| | less use of Emergency rooms | higher use of Medical Services | higher use of preventive care | | | | | |
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Panel A: Indicator for survey wave								
Incorrect version	-0.07	0.01	-0.01	0.00	-0.02	-0.05	0.02	-0.03
	(0.05)	(0.04)	(0.04)	(0.03)	(0.03)	(0.03)	(0.03)	(0.05)
Panel B: Descriptive statistics								
Observations	472	472	472	472	472	472	472	472

Notes: The independent variable is an indicator equal to one if the respondent was part of the July survey wave. Observations are restricted to include respondents who received the Medicaid treatment in either of the two 2025 survey waves. The regressions control for demographic characteristics. The dependent variables in columns 1-3 are indicator variables equal to one if the respondent thinks that the extent to which more generous health insurance would encourage people towards the behaviors listed ranges from *a lot* to *a great deal*. *Employer insurance discourage quit job:* the dependent variable is an indicator variable equal to one if the respondent thinks that health insurance through the employer would discourage people from quitting a bad job or switching jobs out of fear of losing their health insurance. *Health in US worse off if ↓ insurance:* the respondent agrees or strongly agrees that with less generous health insurance, health in the U.S. would be worse since they could not afford appropriate medical care. *↑ preventive healthcare, ↓ costs:* the respondent agrees or strongly agrees that more generous insurance coverage for preventive care can lead to a reduction in total medical costs. *Healthcare to all important bc of contagion:* the respondent agrees or strongly agrees that it is important that everyone can afford proper health care because people who become sick with a contagious disease could have negative effects on others too. *Efficiency index:* index that captures whether the respondent supports efficiency arguments in favor of having health insurance.

Standard errors in parentheses. * $p < 0.1$, ** $p < 0.05$, *** $p < 0.01$. Data from the 2025 surveys.

TABLE A-11: EQUITY CONSIDERATIONS OF HEALTH INSURANCE

| | ↑ insurance, ↓ financial stress | Important to to help low-incomes | Unfair to pay more if: | | Health issue out of own control | Equity index |
| | | | Pre-existing conditions | Worse health | | |
	(1)	(2)	(3)	(4)	(5)	(6)
Panel A: Indicator for survey wave						
Incorrect version	-0.01	0.01	0.01	-0.01	0.00	-0.08
	(0.02)	(0.03)	(0.04)	(0.04)	(0.04)	(0.07)
Panel B: Descriptive statistics						
Observations	472	472	472	472	472	472

Notes: The independent variable is an indicator equal to one if the respondent was part of the July survey wave. Observations are restricted to include respondents who received the Medicaid treatment in either of the two 2025 survey waves. The regressions control for demographic characteristics. The dependent variables, with the exception of column (6), are indicator variables equal to one if the following conditions are met. For *↑ insurance, ↓ financial stress:* the respondent agrees or strongly agrees that more generous health insurance can help people deal with unexpected large medical costs, reducing financial stress. For *Important to help low-incomes:* the respondent agrees or strongly agrees that it is important to financially help low-income families so that they can afford medical care. For *Unfair to pay more if pre-existing conditions:* the respondent believes that it is unfair or very unfair that people with pre-existing conditions have to pay more for their health insurance than people without pre-existing conditions. For *Unfair to pay more if worse health:* the respondent believes that it is unfair or very unfair that people born with worse health have to pay more for health care or insurance than people born with better health. For *Health issue out of own control:* the respondent believes that health issues are mostly the result of circumstances outside of one's control. Finally, *Equity index* is an index that captures whether the respondent supports equity arguments in favor of having health insurance. Standard errors in parentheses. * $p < 0.1$, ** $p < 0.05$, *** $p < 0.01$. Data from the 2025 survey.

TABLE A-12: SUPPORT FULL COVERAGE FOR THE FOLLOWING SERVICES

	Preventive care (1)	Primary care Visits (2)	Maternity (3)	Specialists non-essential care (4)	Catastrophic situations (5)	Emergency room (6)	Pediatric care (7)
Panel A: Indicator for survey wave							
Incorrect version	0.02	0.04	-0.00	0.03	0.07	0.05	0.05
	(0.04)	(0.05)	(0.04)	(0.04)	(0.04)	(0.05)	(0.04)
Panel B: Descriptive statistics							
Observations	472	472	472	472	472	472	472

Notes: The independent variable is an indicator equal to one if the respondent was part of the July survey wave. Observations are restricted to include respondents who received the Medicaid treatment in either of the two 2025 survey waves. The regressions control for demographic characteristics. The dependent variables are indicator variables equal to one if the respondent supports full coverage (the patient pays no costs out of pocket) for the medical services listed. Standard errors in parentheses. * $p < 0.1$, ** $p < 0.05$, *** $p < 0.01$. Data from the 2025 survey.

TABLE A-13: POLICY VIEWS ON THE HEALTH INSURANCE

	Access to health-care should be improved (1)	Insurance system unfair (2)	Support transfers to low-inc. (3)	Support Govt. prov. expansion (4)	Support Medicaid expansion (5)	Support Medicaid more gen. (6)	Support Medicare expansion (7)	Support Medicare more gen. (8)	Support Medicare for all (9)	Support Employer mandate (10)	Support Individual mandate (11)
Panel A: Indicator for survey wave											
Incorrect version	-0.05	-0.01	-0.01	0.03	0.05	0.02	0.03	0.02	0.03	0.07*	0.01
	(0.04)	(0.04)	(0.04)	(0.04)	(0.04)	(0.03)	(0.04)	(0.03)	(0.05)	(0.04)	(0.04)
Panel B: Descriptive statistics											
Observations	472	472	472	471	471	470	472	471	472	472	472

Notes: The independent variable is an indicator equal to one if the respondent was part of the July survey wave. Observations are restricted to include respondents who received the Medicaid treatment in either of the two 2025 survey waves. The regressions control for demographic characteristics. The dependent variables are indicator variables equal to one if the following conditions are met. For *Access to healthcare should improve:* the respondent believes that access to healthcare should be improved for many families. For *Insurance system unfair:* the respondent believes that the U.S. insurance system is somewhat unfair or very unfair. For *Support transfers to low-inc.:* the respondent supports or strongly supports providing additional transfers or subsidies to low-income families to help them with the costs of their health care. *Support govt. prov. expansion:* the respondent supports or strongly supports expanding U.S. government-provided insurance, reducing people's reliance on employer-provided insurance. For *Support Medicaid expansion:* the respondent supports or strongly supports expanding Medicaid's eligibility. For *Support Medicaid more gen.:* the respondent supports or strongly supports making Medicaid more generous by expanding the services it covers. For *Support Medicare expansion:* the respondent supports or strongly supports lowering the age eligibility threshold for Medicare, expanding its coverage. For *Support Medicare more gen.:* the respondent supports or strongly supports making Medicare more generous by expanding the services it covers. For *Support Medicare for all:* the respondent supports or strongly supports Medicare-for-all. For *Support employer mandate:* the respondent supports or strongly supports having an employer mandate whereby every large employer is obliged to offer health insurance plans for employees. For *Support individual mandate:* the respondent supports or strongly supports having an individual mandate.
Standard errors in parentheses. * $p < 0.1$, ** $p < 0.05$, *** $p < 0.01$. Data from the 2025 survey.

A-4 Classification of Knowledge Questions

In Figure 6, the accuracy of respondents in the first two rows of Panel A was measured by means of open-ended questions. In order to classify relatively correct and incorrect answers, we employed a classification algorithm based on GPT-4o-mini. Specifically, we ran two parallel scripts—one for Medicare and one for Medicaid—that fed each response to the LLM together with a short prompt summarizing the core facts. The model was instructed to return a single binary label ("Correct"/"Incorrect") reflecting basic conceptual understanding rather than technical completeness, and to treat minor omissions leniently. Tables A-14 and A-15 present a sample of classified answers for each wave and for each of the questions. The accuracy of the other questions, which were not asked in an open-ended format, was directly assessed.

TABLE A-14: SAMPLE OF CLASSIFIED ANSWERS TO "WHAT IS MEDICARE? WHO IS ELIGIBLE FOR MEDICARE?"

Relatively correct answers	Relatively incorrect answers
2019	
Medicare is medical insurance pre-paid by individuals over their working years that kicks in when that person turns 65	A government insurance policy for the aged, widows , and orphans
Medicare is a government funded healthcare program. Eligibility is based on age, or disability.	if you are unemployed and or a low income family
It's for individual 65 or older or individual with disabilities.. it's paid by the government but individual has to pay portion for the insurance	medicare is health covarage provision through different means and every body is bound to get it for payment to avoid fines
Seniors and disabled individuals	Same as medicaid
Generally Medicare is available for people age 65 or older, younger people with disabilities in or people with end stage renal disease	Medicare is insurance for senior citizens that fall below a certain income.
people 65 and older	people without insurance, immigrants with children
2025	
Medicare is for people over 65 and for people who are disabled from working.	I believe it's the health insurance that state government offers and is available to people who don't have health insurance already.
Medicare is government-subsidized health insurance for the elderly. I think you have to be 65 or over to apply.	Low income citizens.
Medicare is a federal health insurance program in the United States designed primarily for people age 65 and older, though it also covers certain younger individuals with specific health conditions.	I believe Medicare is for those that do not have healthcare coverage and this is an option for them. Those that are low income or seniors..
Medicare is for those 65 and older, as well as those with end-stage renal disease. Part A is basic and cheaper (required for those 65+), while Part B is more expensive and offers more premiums.	People who don't have insurance from their companies or don't work. Low income and older people are eligible for Medicare.
This is for elderly people and they need to meet a age minimum.	eligibility is based on income household size and needs

Notes: The table shows illustrative excerpts from open-ended responses to the question "What is Medicare? Who is eligible for Medicare." Entries in the left column are answers classified by the LLM as relatively correct; entries in the right column are answers classified as relatively incorrect.

TABLE A-15: SAMPLE OF CLASSIFIED ANSWERS TO "WHAT IS MEDICAID? WHO IS ELIGIBLE FOR MEDICAID?"

Relatively correct answers	Relatively incorrect answers
2019	
Medicaid is government sponsored health insurance. People that earn under a certain amount are eligible	Medicaid is a federal program Citizen of USa is eligible
Insurance given by the state for the low income status	A government insurance policy for the disabled
Medicaid in the United States is a federal and state program that helps with medical costs for some people with limited income and	Medicaid is for elder people with low retirement income
it's a government program for people with low income it helps them to deal with their medical expenses	A government run program. For those over 65 or any age with a disability.
Is a health isurance of the goverment to low class people to pay their health.	governmental insurance for the elderly, disabled, and children in need.
2025	
Medicaid is for those with an income lower or equal to the determined cap. It is for people who are within the poverty line.	I believe it's the the health insurance that the federal government offers and is available for everyone.
medicaid is for low income families and individuals, or people of a certain age or medical conditions.	People over a certain age. People with disabilities.
Medicaid is government-sponsored health insurance. People who meet low income eligibility criteria can apply for Medicaid.	Medicaid is health insurance offered to senior citizens over 65.
Medicaid is for people whose incomes don't allow them to purchase a commercial health insurance policy. I believe everyone is eligible as long as they meet certain income thresholds	A handout program for low income individuals who do not work.
It's a Federal program to assist people with low income to have access to health care but is managed by the states	I think it is a health insurance company. I don't know who is eligible.

Notes: The table shows illustrative excerpts from open-ended responses to the question "What is Medicaid? Who is eligible for Medicaid." Entries in the left column are answers classified by the LLM as relatively correct; entries in the right column are answers classified as relatively incorrect.

A-5   2019 Questionnaire

A-5.1   Background questions

1. What is your gender?

   Male; Female; Other

2. What is your age? *Text box*

3. What was your TOTAL household income, before taxes, last year?

   $0–$9999; $10000–$14999; $15000–$19999; $20000–$29999; $30000–$39999; $40000–$49999; $50000–$69999; $70000–$89999; $90000–$109999; $110000–$149999; $150000–$199999; $200000+

4. Were you born in the United States?

   Yes; No

5. In what state or U.S. territory were you born?

   Alabama; Alaska; Arizona; Arkansas; California; Colorado; Connecticut; Delaware; District of Columbia; Florida; Georgia; Hawaii; Idaho; Illinois; Indiana; Iowa; Kansas; Kentucky; Louisiana; Maine; Maryland; Massachusetts; Michigan; Minnesota; Mississippi; Missouri; Montana; Nebraska; Nevada; New Hampshire; New Jersey; New Mexico; New York; North Carolina; North Dakota; Ohio; Oklahoma; Oregon; Pennsylvania; Rhode Island; South Carolina; South Dakota; Tennessee; Texas; Utah; Vermont; Virginia; Washington; West Virginia; Wisconsin; Wyoming; American Samoa; Guam; Northern Mariana Islands; Puerto Rico; Virgin Islands

6. In which ZIP code do you live?

   Text box

7. Please indicate your marital status.

   Single; Married; Legally separated or divorced; Widowed

8. How many children do you have?

   I do not have children; 1; 2; 3; 4; 5 or more

9. *Screening Question 1.* Most modern theories of decision making recognize that decisions do not take place in a vacuum. Individual preferences and knowledge, along with situational variables can greatly impact the decision process. To demonstrate that you've read this much, just go ahead and select both strongly agree and strongly disagree among the alternatives below, no matter what your opinion is.

   Do you agree or disagree with the following statement: "It is easy to find accurate and reliable information in the media these days."

   Strongly agree; Agree; Disagree; Strongly disagree

10. How would you describe your ethnicity/race?

    European American/White; African American/Black; Hispanic/Latino; Asian/Asian American; Mixed race; Other (please specify)

11. Which category best describes your highest level of education?

    Eighth Grade or lower; Some High School; High School degree/GED; Some College; 2-year College Degree; 4-year College Degree; Master's Degree; Doctoral Degree; Professional Degree (JD, MD, MBA)

12. (If highest level of education superior to "High School" to 11) What is/was your field of study in college? If multiple degrees apply, please select the field corresponding to your last degree.

    Accounting/bookkeeping; Administrative science/public administration; Advertising; Agriculture/ horticulture; Allied health; Anthropology; Architecture; Art; Aviation/aeronatics; Biology; Business administration; Chemistry; Child/human/family development; Comm. disorders; Communications/speech; Computer science; Counseling; Criminology/criminal justice; Dance; Dentistry; Economics; Education; Educational administration; Electronics; Engineering; English; Environmental science/ecology; Ethnic studies; Fashion; Finance; Fine arts; Food science/nutrition/culinary arts; Foreign language; Forestry; General sciences; General studies; Geography; Geology; Gerontology; Health; History; Home economics; Human services/human resources; Humanities; Industrial relations; Industry and techn; Information technology; Journalism; Law; Law enforcement; Liberal arts; Library science; Marketing; Mathematics; Mechanics/machine trade; Medicine; Music; Nursing; Other; Other vocational; Parks and recreation; Pharmacy; Philosophy; Physical education; Physics; Political science/international relations; Psychology; Public relations; Social sciences; Social work: Sociology; Special education; Statistics/biostatistics; Television/film; Textiles/cloth; Theater arts; Theology; Urban and regional planning; Veterinary medicine; Visual arts/graphic design/design and drafting; Other

13. (If "other" to 12) You selected "other" for field of study. Please specify below:

    Text box

14. What is your current employment status?

    Full-time employee; Part-time employee; Self-employed or small business owner; Unemployed and looking for work; Student; Not currently working and not looking for work; Retiree

15. (If "Full-time employee", "Part-time employee", or "Self-employed or small business owner" to 14) Which category best describes your main occupation?

    Managers (chief executives; senior officials; legislators; managing directors; administrative and commercial managers; production managers; hotel and restaurant managers; retail and wholesale trade managers); Professionals (scientists; mathematicians; engineers; architects; designers; doctors; nurses; paramedical practitioners; professors; teachers; business and administration professionals; finance professionals; software and application developers and analysts; database and network professionals; legal professionals; librarians; curators; social and religious professionals; authors; journalists; creative and performing artists); Technicians and associate professionals (science technicians; engineering technicians; mining, manufacturing and construction supervisors; ship and aircraft controllers and technicians; medical technicians; business and administration associate professionals; legal associate professionals; sports and fitness workers; artistic, cultural and culinary associate professionals; information and communications technicians); Clerical support workers (general office clerks; secretaries; customer services clerks; numerical clerks; material-recording and transport clerks); Service and sales workers (travel attendants, conductors and guides; cooks; waiters and bartenders; hairdressers and beauticians;

building and housekeeping supervisors; sales workers; cashiers and ticket clerks; personal care workers; protective services workers); Agricultural workers (crop growers; animal producers; forestry workers; fishery workers; agricultural and fishery laborers); Craft and related trades workers (building trades workers; blacksmiths; machinery mechanics and repairers; handicraft workers; electrical and electronic trades workers; food processing workers; wood treaters; garment workers); Plant and machine operators, and assemblers (stationary plant and machine operators; assemblers; drivers; mobile plant operators), and assemblers; Elementary occupations (cleaners and helpers; mining and construction laborers; manufacturing laborers; transport and storage laborers; street and related sales and service workers; refuse workers); Armed forces occupations

16. (If "Unemployed and looking for work," "Not currently working and not looking for work," or "Retiree" to 14) Even if you are not currently working, which category best describes your latest occupation? Check the one that applies. If you have had multiple jobs, check the one that describes your main occupation.

    Same options as above

17. (If "Full-time employee," "Part-time employee," or "Self-employed or small business owner" to 14) Are you employed in one of the following sectors? Check the one that applies. If you have multiple jobs, check the one that describes your main occupation.

    Agriculture, plantations, other rural sectors; Basic metal production; Chemical industries; Commerce; Construction; Education; Financial services, professional services; Food, drink, tobacco; Forestry, wood; Health services; Hotels, tourism, catering; Mining; Mechanical and electrical engineering; Media, culture, graphical; Oil and gas production, oil refining; Postal and telecommunications services; Public service; Shipping, ports, fisheries, inland waterways; Textiles, clothing, leather, footwear; Transport (including civil aviation, railways, road transport); Transport equipment manufacturing; Utilities (water, gas, electricity); None of the above

18. (If "Unemployed and looking for work," "Not currently working and not looking for work," or "Retiree" to 14) Even if you are not currently working, in what sector does your latest occupation fall into? Check the one that applies. If you have multiple jobs, check the one that describes your main occupation.

    Same options as above

19. Are you covered by Medicaid, Medical Assistance, or Medicare?

    Yes; No

20. Did you, or anyone in your household, receive food stamps or use a food stamp benefit card at any time during 2018?

    Yes; No

21. At any time during 2018, even for one month, did you or anyone in your household receive any cash assistance from a state or county welfare program such as welfare or welfare to work, TANF, general assistance, diversion payments or refugee cash?

    Yes; No

22. If you had to use one of these five commonly-used names to describe your social class, which one would it be?

    Lower Class or Poor; Working Class; Middle Class; Upper-middle Class; Upper Class

23. Thinking back to when you were in elementary school, how often did you usually recite the Pledge of Allegiance?

    Daily; Weekly; Monthly; A few times per year or less; Never

24. On economic policy matters, where do you see yourself on the liberal/conservative spectrum?

    Very liberal; Liberal; Moderate; Conservative; Very conservative

25. What do you consider to be your political affiliation, as of today?

    Republican; Democrat; Independent; Other; Non-Affiliated

26. (If respondent answered "Other" to previous question) Please specify your political affiliation.

    Text box

27. Did you vote in the last presidential election?

    Yes; No

28. (If "Yes" to 27) In the last presidential election, supported:

    Hillary Clinton; Donald Trump; Jill Stein; Gary Johnson; Other

    (If "No" to 27) Even if you did NOT vote, please indicate the candidate that you were most likely to have voted for or who represents your views more closely.

    Hillary Clinton; Donald Trump; Jill Stein; Gary Johnson; Other

29. Are you registered to vote at your current address?

    Yes; No

30. There are many types of elections such as federal elections for president and members of Congress, primary elections where voters choose party nominees, local elections for city council and school boards, and special elections when vacancies arise in between scheduled elections.

    Which best describes how often you vote, since you became eligible?

    Every election without exception; Almost every election, may have missed one or two; Some elections; Rarely; Don't vote in elections

31. Did you vote in the November midterms elections?

    Yes; No

32. (If "Yes" to 31) Which party did you vote for?

    Republican Party; Democratic Party; Other

33. (If "No" to 31) Which party would you have liked to support?

    Republican Party; Democratic Party; Other

34. How much, if at all, do you try to stay up to date on the news?

    A great deal; A fair amount; Only a little; Not at all

35. Thinking about various sources of news available today, what would you say is your main source of news about current events in the U.S. and around the world?

    TV; Newspaper (print); Magazine; Radio; Internet; Word of mouth; Other; None, I don't follow the news

36. (If selected *TV*) Please specify

    ABC; BBC; CBS; CNBS; CNN; Fox News; MSNCB; NBC; PBS; Univision; Local TV news; Other television or TV news; Other television program or channel; Non-specific news or evening news; Non-specific cable news

37. (If selected *Newspaper (print)*) Please specify

    The New York Times; The Wall Street Journal; USA Today; Los Angeles Times; The Mercury News; New York Daily News; New York Post; The Washington Post; Other big-city newspaper; Local newspapers; Other newspapers

38. (If selected *Radio*) Please specify

    NPR; Talk Radio; Other Radio Channel

39. (If selected *Internet*) Please specify

    News websites and online newspapers; Facebook; Twitter; Instagram; Snapchat; Youtube; Pinterest; Reddit; Linkedin; Other social media sites; Other internet sites

40. (If selected *Magazine*) Please specify

    Time Magazine; The Atlantic; The New Yorker; The Economist; Bloomberg Businessweek; Other Magazine

41. (If selected *News websites and online newspapers*) You answered "News websites and online newspapers." Could you please specify your main source of information?

    HuffingtonPost.com; CNN.com; NYTimes.com; WashingtonPost.com; LATimes.com; FoxNews.com; Bloomberg.com; DrudgeReport.com; Yahoo News; Google News; Other

42. (If respondent gets their news mostly from online newspapers) Would you say that you access most of the articles you read through a social media like Facebook or Twitter or by going directly on the website of the newspaper?

    Mostly through social media; Mostly through the newspaper's website

43. In general, how important do you think it is to stay informed about economic policy?

    Very important; Somewhat important; Not very important; Not important at all

44. (If "Very important" or "Somewhat important" at 43) What would you say are the main reasons why you wish to be well informed about economic policy?

    You may select several options.

Affects personal finances; Affects business or profession; Relevant to stock market and investments; Economic issues are important politically and might affect my vote; To be a responsible citizen, I like to keep informed

45. How knowledgeable do you consider yourself on economic policies and issues?

    Highly knowledgeable; Somewhat knowledgeable; Not very knowledgeable; Not knowledgeable at all

46. For the following sources of information, how often would you say you use them to stay informed about economic policy?

    Often; Regularly; Occasionally; Rarely; Never

    - TV
    - Newspapers (print)
    - Newspapers (online)
    - Magazines
    - Radio
    - Internet
    - Word of mouth

A-5.2 Open-ended questions

We now want to ask you a few broader questions. Please use the text boxes below and write as much as you feel like. Your opinion and thoughts are important to us! There is no right or wrong answer.

1. What would be a "good" health insurance system in your view? What would be the goal of a good health insurance system?

   Text Box

2. When you think about health insurance and whether the U.S. should have universal health insurance for all, what are the main considerations—in favor or against it—that come to you mind?

   Text Box

3. What do you personally see as the biggest problem with health insurance in the United States today?

   Text Box

4. A single-payer health insurance system is one in which the government operates a tax-funded health insurance plan for all U.S. residents. The government acts as the main insurer and everyone is included in the universal health insurance scheme.

   What do you think would be the effects on the U.S. economy if a single-payer health insurance system were introduced?

   Text Box

5. Which groups of people—if any—would gain if a single-payer health insurance system were introduced in the U.S.?

   Text Box

A-5.3 Personal Exposure

1. Do you currently have health insurance?

   Yes; No

2. (If "No" to 1) Which of these are reasons why you stopped being covered or do not have health insurance?

   You may select several options.

   Lost job or change in employment; Change in marital status or death of parent; Ineligible due to age or left school; Employer didn't offer or insurance company refused; Cost; Medicaid stopped; Other (includes moved, self-employed, never had coverage, did not want or need coverage, and other unspecified reasons)

3. (If "Yes" to 1) Are you on Medicaid or Medicare?

   Yes; No

4. (If "Yes" to 1 and "No" to 3) Who pays for the cost of premiums on your health insurance? Do you or someone in your household pay the total costs, does an employer or other organization pay the total cost, or is it the cost shared between the employer or some other organization and you or someone in your household?

   Self/Household pays all; Employer or organization pays all; Costs are shared

5. Within the last twelve months, have you or a member of your family put off any sort of medical treatment because of the cost you would have to pay?

   Yes; No

6. (If "Yes" to 5) When you put off this medical treatment, how serious was the condition or illness?

   Very serious; Somewhat serious; Not very serious; Not at all serious

7. Are you generally satisfied or dissatisfied with the total cost you pay for your healthcare?

   Very satisfied; Somewhat satisfied; Somewhat dissatisfied; Very dissatisfied

8. Overall, how would you rate the quality of health care you receive?

   Excellent; Good; Fair; Poor

A-5.4 Knowledge about Policy (Incentives)

In this section, all respondents will receive the following screening question.

- As you probably know, the government and researchers gather a lot of statistical information about the economy. We are interested in learning whether this information finds its way to the general public. The next set of questions is about some economic policies in the United States. These are questions for which there are right or wrong answers.

  In order for your answers to be most helpful to us, it is really important that you answer these questions as accurately as you can and without consulting any external sources. Although you may find some questions difficult, it is very important for our research that you try your best. Thank you very much!

- For the next set of questions, we will award additional survey pay for respondents whose answers are closest to the true answer. All questions which are subject to this additional award are clearly marked with a green text at the top of the page. Please note that consulting outside sources will disqualify you from this award. Please answer on your own.

- These questions are part of the questions for which accurate answers will be rewarded.

1. Out of 100 adults in the U.S., how many are currently paying any income tax at all?

   Slider going from 0 to 100

2. Can you think of the different ways in which Americans today obtain health insurance? Please list all you can think of.

   Text box

3. These questions are part of the questions for which accurate answers will be rewarded

   What is Medicaid? Who is eligible for Medicaid?

   Text box

4. What is Medicare? Who is eligible for Medicare?

   Text box

5. This question is part of the questions for which accurate answers will be rewarded.

   If an elderly person is in need of long-term care, which program(s) will pay for that? Select all correct answers from the list below (several answers can be correct):

   Note: Long-term care means assistance with the basic personal tasks of everyday life for elderly people.

   Medicare will pay for all of long-term care for all elderly above 65; Medicare supplements will pay for all of long-term care for elderly who purchase them; Medicare with or without supplements will only pay for short periods of long-term care for all the elderly above 65; Private long-term care insurance plans will only pay for long-term care for all elderly who purchased them; Employer health insurance plans will pay for the long-term care of retired employees; Medicaid will pay for all of long-term care for all elderly; Medicaid will pay for all of long-term care only for elderly who have a low income and low assets; Medicaid will pay part of the long-term care for all the elderly

6. These questions are part of the questions for which accurate answers will be rewarded.

   Medicaid is a federal and state program that helps people with low income pay for their health insurance.

   Medicare is a federal program that provides health insurance for Americans aged 65 and older, as well as younger people with disability status.

   Out of 100 Americans, how many get their health insurance coverage through the following programs? The total must equal 100.

   Important note: Individuals can be enrolled in several programs at once. Here, we are interested in the primary insurer. An individual who has Medicaid and any other type of insurance is counted in the Medicaid category and an individual who has both Medicare and employer-based coverage is counted in the employer-based category.

- Medicaid

- Medicare

- Group health insurance through employer

- Other insurance (policies purchased directly from an insurance company, military, other public...)

- Uninsured

7. Out of 100 American children, aged below 18, how many are enrolled in Medicaid?

   Slider going from 0 to 100

8. This question is part of the questions for which accurate answers will be rewarded.

   Are insurance companies currently allowed to set different premiums based on the following characteristics?

   Yes; No

   - Gender
   - Age
   - Tobacco use
   - Where the person lives
   - Preexisting conditions (such as having diabetes, obesity, or being pregnant at the time of purchase of the insurance)

9. In 2018, was there an individual mandate, whereby everyone was obligated to buy health insurance?

   Yes; No

10. (If "Yes" to 9) What happened if you did not have health insurance?

    A penalty had to be paid; You were forced to buy insurance; You received a warning; Nothing happened

11. Were any changes made to the individual mandate in 2019?

    Yes; No

12. (If "Yes" to 11) How did the legislation on the individual mandate change in 2019?

    The penalty was increased; The penalty was decreased; The penalty was reduced to zero; The individual mandate was canceled; Other

13. Is there currently an employer mandate, whereby employers have to provide health insurance to their employees?

    Yes, all employers are required to provide health insurance to their employees; Yes, but small employers are excluded from this requirement; No, employers are not required to provide health insurance to their employees

14. These questions are part of the questions for which accurate answers will be rewarded.

    To be eligible for Medicaid, a family's income needs to be below a certain percentage of the Federal Poverty Level for a family of that size. How high is that percentage in your state for a family like yours to be eligible for Medicaid?

    Under 50% of the FPL; Between 50 and 90% of the FPL; Between 130 and 160% of the FPL; Between 160 and 200% of the FPL; Higher than 200% of the FPL;

15. Please specify the percentage

    Text box

16. Did the Affordable Care Act (ACA) make any changes to the eligibility for Medicaid in your state?

    Yes, it expanded eligibility; No, it remained the same; Yes, it reduced eligibility

17. *Screening Question 2.* In order to facilitate our research on decision making we are interested in knowing certain factors about you, the decision maker. Specifically, we are interested in whether you actually take the time to read the directions; if not, then some of our manipulations that rely on changes in the instructions will be ineffective. So, in order to demonstrate that you have read the instructions, please ignore the question below. Instead, simply put the slider to 98. Thank you very much.

    Slider from 0 to 100

18. Comparing the U.S. to other rich countries such as France, Germany, or the U.K., how much do you think the U.S. spends on health care as a share of its GDP?

    Much more; More; About the same; Less; Much less

19. Comparing the U.S. to other rich countries such as France, Germany, or the U.K., how good do you think that important and common measures of health outcomes, such as life expectancy or infant mortality are in the U.S.?

    Much better; Better; About the same; Worse; Much worse

A-5.5   Knowledge about Policy (No Incentives)

As you probably know, the government and researchers gather a lot of statistical information about the economy. We are interested in learning whether this information finds its way to the general public. The next set of questions is about some economic policies in the United States. These are questions for which there are right or wrong answers.

In order for your answers to be most helpful to us, it is really important that you answer these questions as accurately as you can and without consulting any external sources. Although you may find some questions difficult, it is very important for our research that you try your best. Thank you very much!

1. Out of 100 Americans, how many do not have health insurance?

   Slider going from 0 to 100

2. Can you think of the different ways in which Americans today obtain health insurance? Please list all you can think of.

   Six Text Boxes

3. What is Medicaid? Who is eligible for Medicaid?

   Text Box

4. What is Medicare? Who is eligible for Medicare?

   Text Box

5. If an elderly person is in need of long-term care, which program(s) will pay for that? Select all correct answers from the list below (several answers can be correct):

   Note: Long-term care means assistance with the basic personal tasks of everyday life for elderly people.

   Note: Selection can include multiple answers

   Medicare will pay for all of long-term care for all elderly above 65; Medicare supplements will pay for all of long-term care for elderly who purchase them; Medicare with or without supplements will only pay for short periods of long-term care for all the elderly above 65; Private long-term care insurance plans will only pay for long-term care for all elderly who purchased them; Employer health insurance plans will pay for the long-term care of retired employees; Medicaid will pay for all of long-term care for all elderly; Medicaid will pay for all of long-term care only for elderly who have a low income and low assets ; Medicaid will pay part of the long-term care for all the elderly

6. Medicaid is a federal and state program that helps people with low income pay for their health insurance.

   Medicare is a federal program that provides health insurance for Americans aged 65 and older, as well as younger people with disability status.

   Out of 100 Americans, how many get their health insurance coverage through the following programs? The total must equal 100.

   Important note: Individuals can be enrolled in several programs at once. Here, we are interested in the primary insurer. An individual who has Medicaid and any other type of insurance is counted in the Medicaid category and an individual who has both Medicare and employer-based coverage is counted in the employer-based category.

   - *Insert Number for* Medicaid
   - *Insert Number for* Medicare
   - *Insert Number for* Group health insurance through employer
   - *Insert Number for* Other insurance (policies purchased directly from an insurance company, military, other public...)
   - *Insert Number for* Uninsured
   - *Insert Number for* Total

7. Out of 100 American children, aged below 18, how many are enrolled in Medicaid?

   Slider going from 0 to 100

8. Are insurance companies currently allowed to set different premiums based on the following character-istics?

   (a) Gender

   (b) Age

   (c) Tobacco use

   (d) Where the person lives

   (e) Pre-existing conditions (such as having diabetes, obesity, or being pregnant at the time of purchase of the insurance)

   Yes; No

9. In 2018, was there an individual mandate, whereby everyone was obligated to buy health insurance?

   Yes; No

10. What happened if you did not have health insurance?

    A penalty had to be paid; You were forced to buy insurance; You received a warning; Nothing happened

11. Were any changes made to the individual mandate in 2019?

    Yes; No

12. How did the legislation on the individual mandate change in 2019?

    The penalty was decreased; The penalty was reduced to zero; The individual mandate was canceled; Other

13. Is there currently an employer mandate, whereby employers have to provide health insurance to their employees?

    Yes, all employers are required to provide health insurance to their employees; Yes, but small employers are excluded from this requirement; No, employers are not required to provide health insurance to their employees

14. To be eligible for Medicaid, a family's income needs to be below a certain percentage of the Federal Poverty Level for a family of that size. How high is that percentage in your state for a family like yours to be eligible for Medicaid?

    Under 50% of the FPL; Between 50 and 90% of the FPL; Between 90 and 130% of the FPL; Between 130 and 160% of the FPL; Between 160 and 200% of the FPL; Higher than 200% of the FPL;

15. Please specify the exact percentage

    Text box

16. Did the Affordable Care Act (ACA) make any changes to the eligibility for Medicaid in your state?

    No, it remained the same; Yes, it reduced eligibility

17. *Screening Question 2.* In order to facilitate our research on decision making we are interested in knowing certain factors about you, the decision maker. Specifically, we are interested in whether you actually take the time to read the directions; if not, then some of our manipulations that rely on changes in the instructions will be ineffective. So, in order to demonstrate that you have read the instructions, please ignore the question below. Instead, simply put the slider at 98. Thank you very much.

Out of 100 adults in the U.S., how many are currently paying any income tax at all?

Slider going from 0 to 100

18. Comparing the U.S. to other rich countries such as France, Germany, or the U.K., how much do you think the U.S. spends on health care as a share of its GDP?

More; About the same; Less; Much less

19. Comparing the U.S. to other rich countries such as France, Germany, or the U.K., how good do you think that important and common measures of health outcomes, such as life expectancy or infant mortality are in the U.S.?

Much better; Better; About the same; Worse; Much worse

A-5.6 Health Treatment

Respondents are randomly assigned to one of four groups, labeled as "Redistribution," "Efficiency," "Economist," and "Control." In the first three cases, respondents are shown a video, different between the three treatment groups, while those in the control group are not. The videos are introduced by the following:

- Recent academic research has studied what the effects of health care insurance are. We will now show you one short video (with sound) that summarizes some key ideas of these studies. Please pay attention to the information provided as you will be asked questions about it later. Do not skip forward or close the page while the video is running.

  Please proceed to the next page when you are ready. Note that you will not be able to move forward with the survey before the end of the short video. The video lasts about three minutes.

Links to the videos can be found here:

- Health Treatment - Redistribution

- Health Treatment - Economist

- Health Treatment - Efficiency

A-5.7 Mechanisms

1. An individual mandate for health insurance means that everyone has to buy health insurance that covers some essential health benefits. This can go hand in hand with some subsidies for low-income households who couldn't afford plans on their own.

In your view, what is the main reason for having an individual mandate?

Text box

2. Would you say that an individual mandate is beneficial or detrimental? Please explain your reasoning.

   Text box

3. *CONTROL GROUP.* If people have health insurance through their employer, do you think this would discourage them from quitting a bad job or switching job from fear of losing their health insurance?

   "ME" RANDOMIZATION. If you have or had health insurance through your employer, do you think this would discourage you from quitting a bad job and switching job for fear of losing your health insurance?

   "WOMEN" RANDOMIZATION. We would now like to ask you a few questions on the effects of changes in health care policy on women

   If women have health insurance through their employer, do you think this would discourage them from quitting a bad job or switching job from fear of losing their health insurance?

   Yes; No

4. *CONTROL GROUP.* If health insurance were to be made more generous, to what extent would it encourage people towards the following behaviors?

   "ME" RANDOMIZATION. If your health insurance were to be made more generous, to what extent would it encourage you towards the following behaviors?

   "WOMEN" RANDOMIZATION. If health insurance were to be made more generous, to what extent would it encourage women towards the following behaviors?

   A great deal; A lot; A moderate amount; A little; None at all

   - Make less use of the emergency room for conditions that do not warrant it
   - Use more medical services they do not really need simply because they do not have to pay the full cost of them
   - Use more preventive medical care such as regular screenings and check-ups

5. Do you agree or disagree with the following statement?

   CONTROL GROUP. "With less generous health insurance, health in the U.S. would be worse since many people could not afford sufficient and appropriate medical care."

   "ME" RANDOMIZATION. " With less generous health insurance, my health would be worse since I could not afford sufficient and appropriate medical care."

   "WOMEN" RANDOMIZATION. "With less generous health insurance for women's health issues, health in the U.S. would be worse since many women could not afford sufficient and appropriate medical care."

   Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree

6. Do you agree or disagree with the following statement?

   CONTROL GROUP. "More generous health insurance coverage for preventive care can lead to a reduction in total medical costs, since medical issues would be caught early on before they turn into

more serious and expensive health conditions and because many medical problems could be avoided altogether."

"ME" RANDOMIZATION. "More generous health insurance coverage for preventive care can lead to a reduction of my total medical costs, since it would allow me to catch medical issues early on before they turn into more serious and expensive health conditions and because many medical problems could be avoided altogether."

"WOMEN" RANDOMIZATION. "More generous health insurance coverage for preventive care for women can lead to a reduction in total medical costs, since women's medical issues would be caught early on before they turn into more serious and expensive health conditions and because many medical problems could be avoided altogether."

Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree

7. Do you agree or disagree with the following statement?

8. *CONTROL GROUP.* "More generous health insurance can help people deal with unexpected large medical costs. It can thus reduce financial stress and debt built up to pay the medical bills for families."

   "ME" RANDOMIZATION. "More generous health insurance could help me deal with unexpected large medical costs. It can thus reduce my financial stress and I won't have to build up debt to pay the medical bills for my family."

   "WOMEN" RANDOMIZATION. "More generous health insurance can help women deal with unexpected large medical costs. It can thus reduce women's financial stress and debt built up to pay the medical bills for women's health issues."

   Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree

9. *CONTROL GROUP.* Would you say that it is fair or unfair that people with pre-existing conditions have to pay more for their health insurance than people without pre-existing conditions?

   "ME" RANDOMIZATION. Would you say that it is fair or unfair if you had to pay more for your health insurance than people with fewer pre-existing conditions than you?

   "WOMEN" RANDOMIZATION. Would you say that it is fair or unfair that women with pre-existing conditions have to pay more for their health insurance than women without pre-existing conditions?

   Very fair; Somewhat fair; Somewhat unfair; Very unfair

10. *CONTROL GROUP.* Is it fair or unfair that people born with worse health have to pay more for health care or insurance than people born with better health?

    "ME" RANDOMIZATION. Is it fair or unfair if you had to pay more for health care or insurance than people born with better health than you?

    "WOMEN" RANDOMIZATION. Is it fair or unfair that women born with worse health have to pay more for health care or insurance than women born with better health?

    Very fair; Somewhat fair; Somewhat unfair; Very unfair

11. *CONTROL GROUP.* Would you say that health issues and medical conditions are mostly the result of circumstances outside of one's control or mostly the result of one's own actions?

   Mostly the result of circumstances outside of one's control; Mostly the result of one's own actions

   "ME" RANDOMIZATION. Would you say that your own health issues and your own medical conditions are mostly the result of circumstances outside of your control or mostly the result of your own actions?

   Mostly the result of circumstances outside of my own control; Mostly the result of my own actions

   "WOMEN" RANDOMIZATION. Would you say that health issues and medical conditions that arise for women are mostly the result of circumstances outside of their control or mostly the result of these women's own actions?

   Mostly the result of circumstances outside of women's control; Mostly the result of women's own actions

12. Let us consider the following statement about health care and health insurance. Please tell us whether you agree or disagree with it.

   CONTROL GROUP. "It is important that everyone can afford health care because people who become sick with a contagious disease that is not treated can have negative effects on others too."

   "ME" RANDOMIZATION. "It is important that I am able to afford health care because if I became sick with a contagious disease that is not treated, I can have negative effects on others too."

   "WOMEN" RANDOMIZATION. "It is important that all women can afford proper health care because women who become sick with a contagious disease that is not treated can have negative effects on others too."

   Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree

13. Let us consider the following statement about health care and health insurance. Please tell us whether you agree or disagree with it.

   CONTROL GROUP. "It is important to help low-income families so that they can afford medical care by subsidizing their insurance premiums or by giving them transfers for medical care."

   "ME" RANDOMIZATION. "It is important to help families like mine so that they can afford medical care by subsidizing our insurance premiums or by giving us transfers for medical care."

   "WOMEN" RANDOMIZATION. "It is important to help low-income women so that they can afford medical care by subsidizing their insurance premiums or by giving them transfers for medical care."

   Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree

14. *"WOMEN" RANDOMIZATION.* If you had to choose, which comes closest to your view?

   "Employers who have religious objections to the use of birth control should be...

   ... able to refuse to provide it in health insurance plans for their employees."; ... required to provide it in health insurance plans for their employees just as other employers are required to do."

15. *"WOMEN" RANDOMIZATION.* Would you find it fair or unfair that women who use birth control methods pay for the cost of birth control on their own?

   Very fair; Fair; Unfair; Very unfair

16. *"WOMEN" RANDOMIZATION.* Should women who are planning on using birth control methods have increased insurance copays because they might cost more for their insurers?

    Yes; No

17. *"WOMEN" RANDOMIZATION.* Do you favor or oppose a law allowing pharmacists and health providers to opt out of providing medicine or surgical procedures that result in abortion?

    Strongly favor; Favor; Oppose; Strongly oppose

18. *"WOMEN" RANDOMIZATION.* Should insurance providers have to cover medicine or surgical procedures that result in abortion?

    Yes; No

A-5.8 Outcomes

1. Do you feel that access to health care in the U.S. today is fair for everyone, even for low-income families, or do you feel that access to healthcare should be improved for many families?

    Access to health care is fair even for low-income families; Access to health care should be improved for many families

2. How fair would you say the current U.S. health insurance system is?

    Very fair; Somewhat fair; Somewhat unfair; Very unfair

3. How satisfied or dissatisfied are you with health insurance in the U.S.?

    Very satisfied; Somewhat satisfied; Somewhat dissatisfied; Very dissatisfied

4. *Screening Question 3.* When a big news story breaks people often go online to get up-to-the-minute details on what is going on. We want to know which websites people trust to get this information. We also want to know if people are paying attention to the question. To show that you've read this much, please ignore the question and select ABC News and The Drudge Report as your two answers.

    When there is a big news story, which is the one news website that you would visit first? (Please only choose one)

    ABC News; The Wall Street Journal; FOX News; The Drudge Report; New York Post; CNBC; The Mercury News; USA Today; Other news website

5. As you may know, some have proposed a "Medicare-for-all" single payer health insurance program that would be administered by the federal government and financed through taxes. Please tell us if you favor or oppose this proposal, or if you don't know enough to say?

    Favor; Neither favor nor oppose; Oppose; Strongly oppose; Don't know enough to say

6. Do you support or oppose providing additional transfers or subsidies to low-income families to help them with the costs of their health care?

    Strongly support; Support; Neither support nor oppose; Oppose; Strongly oppose

7. Do you support or oppose having an individual mandate whereby every individual is obliged to buy health insurance?

    Strongly support; Support; Neither support nor oppose; Oppose; Strongly oppose

8. Do you support or oppose having an employer mandate whereby every large employer, with more than 50 employees, is obliged to offer health insurance plans for their employees?

    Strongly support; Support; Neither support nor oppose; Oppose; Strongly oppose

9. Imagine it were up to you to design Americans' health insurance plans such that they are most cost-effective and that patients get the best care while having to pay the lowest insurance premiums.

    For the following types of medical care, please say which ones should receive: full coverage (the patient pays no costs out of pocket); generous coverage (the patient has only minimal copay or deductibles); low coverage (costs are shared and the patient bears a significant share of total costs); no coverage (meaning the patient has to pay the full costs out of pocket). Bear in mind that the more generous coverage is, the higher health insurance premiums can be expected to be.

    - Preventive care (e.g.: annual physical examinations, recommended cancer screening, or immunizations)
    - Primary care visits for non-life threatening conditions (e.g.: for a cold, flu, or stomach bug)
    - Maternity and newborn care (pre-natal screenings and check-ups, birth and delivery, newborn screening and care)
    - Specialist visits for non-essential care (e.g.: elective hip replacement, hearing aids)
    - Medical care for catastrophic situations (e.g.: long-run medical care after bad accidents or serious injuries once one leaves the emergency room; intensive treatment for cancers; management of serious, long-term hear and liver conditions)
    - Emergency room care (emergency, short-term care after accidents, severe illness, life-threatening conditions that require immediate attention)
    - Pediatric care (medical care for children)

    Full coverage; Generous coverage; Low coverage; No coverage

A-5.9   General Outcomes

For these different groups, please tell us if you think that they're are paying their fair share in federal taxes, paying too much, or paying too little?

1. High-income households...

    ... pay much more than their fair share in income taxes.; ... pay more than their fair share in income taxes.; ... pay their fair share in income taxes.; ... pay less than their fair share in income taxes.; ... pay much less than their fair share in income taxes.

2. Middle-class households...

... pay much more than their fair share in income taxes.; ... pay more than their fair share in income taxes.; ... pay their fair share in income taxes.; ... pay less than their fair share in income taxes.; ... pay much less than their fair share in income taxes.

3. Take the following government services. For each of them, say if would you like it to receive increased funding (even if that means more taxes or reduced spending in other areas), decreased spending (in order to reduce taxes or increase spending elsewhere) or would you like for its funding to be left unchanged?

   - Transfers and income support programs for those out of work
   - Better schools for children from low-income families
   - Income support and retraining programs for workers who are displaced by international competition and trade
   - Subsidies for low-income households to help them with the costs of health insurance premiums and health care
   - Wage subsidies and help for the working poor who work for low wages

A-5.10   Government Questions (Specific)

1. To improve access to health care for all Americans, rich or poor, the government (at the local, state, or federal level) has the ability and the tools to do:

   Nothing at all; Not much; Some; A lot

A-5.10.1   Government Questions (General)

1. How much of the time do you think you can trust our federal government to do what is right?

   Almost always; A lot of the time; Not very often; Almost never

2. Some people think the government is trying to do too many things that should be left to individuals and businesses. Others think that government should do more to solve our country's problems. Which come closer to your own view?

   Government is doing too much; Government is doing just the right amount; Government should do more

3. Next, we'd like you to think more broadly about the purposes of government.

   Where would you rate yourself on a scale of 1 to 5, where 1 means you think the government should do only those things necessary to provide the most basic government functions, and 5 means you think the government should take active steps in every area it can to try and improve the lives of its citizens?

   You may use any number from 1 to 5.

   1; 2; 3; 4; 5

4. Of every tax dollar that goes to the federal government in Washington, D.C., how many cents would you say are wasted?

   Slider going from 0 to 100

5. How satisfied are you with the way the federal government in Washington is dealing with the problems the country is facing today?

   Very satisfied; Somewhat satisfied; Somewhat dissatisfied; Very dissatisfied

6. Consider now a list of functions the federal government could serve.

   On a 1 to 5 scale, please say how much responsibility you think the government should have for each—with 1 meaning the government should have no responsibility at all and 5 meaning the government should have total responsibility in this area:

   - Reducing income differences between the rich and the poor
   - Reducing the transmission of wealth from one generation to the other
   - Making sure Americans have adequate health care
   - Reducing the differences in opportunities between children from wealthy and poor families
   - Regulating trade to and from the U.S. to protect American producers and consumers
   - Maintaining a stable financial system and ensuring that credit markets work
   - Ensuring a stable dollar
   - Providing a minimum standard of living for all

   No responsibility - 1; 2; 3; 4; Total responsibility - 5

A-5.11   POST - Willingness to pay for information

By taking this survey, you are automatically enrolled in a lottery to win $1000. In a few days you will know whether you won the $1000. The payment will be made to you in the same way as your regular survey pay, so no further action is required on your part.

   Are you are interested in learning the correct answers to all the questions about (income taxation/estate taxation/health insurance/trade policy) in the U.S.? If you are, you can forfeit part of your gain (should you win the lottery) in exchange for the correct answers. If you select that option, you will be given the right answers on the next page. You will only pay the amount selected if you do, in fact, win the lottery.

   Note: This information would be very hard to find online on your own. It is the result of a lot of careful research and you cannot easily find the correct answers.

   In case you win the lottery are you willing to give up ($1 / $2 / $5 / $10 [1]) to receive all the correct answers to the questions about trade policy in the U.S.?

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[1]Note: the amount is randomized among participants

No, I am not willing to pay anything (We will not provide you with the correct answers); Yes, I am willing to pay $1 / $2 / $5 / $10 (We will provide you with all the correct answers on the next page. You will only pay this amount out of your lottery earnings if you do win the lottery).

A-5.12 True answers

If respondent answers "Yes" to A-5.11

1. Correct answers.

   Out of 100 Americans, 9 are uninsured, 21 are on Medicaid, 14 on Medicare, 49 on a group employer-based plan and 8 on another type of insurance.

   Out of 100 American children ages below 18, 37 are enrolled in Medicaid.

   Insurance companies are currently allowed to set different premiums based on the following characteristics: age, where you live, tobacco use. Insurance companies are currently not allowed to set different premiums based on gender and pre-existing conditions.

   As of 2018, there was an individual mandate, whereby everyone is obligated to purchase health insurance. If you did not have insurance, you had to pay a fine. A law enforced in 2019 reduced the fine to $0 (but did not technically cancel the individual mandate).

   There is currently an employer mandate, whereby employers have to provide health insurance to their employees. Small employers with fewer than 20 employees, however, are excluded from this requirement.

2. Medicaid eligibility by state and family size.

   The following states expanded Medicaid eligibility under the Affordable Care Act, thereby setting the eligibility for families of all sizes to 138% of the Federal Poverty Level:

   Alaska; Arizona; Arkansas; California; Colorado; Connecticut; Delaware; Hawaii; Idaho; Illinois; Indiana; Iowa; Kentucky; Louisiana; Maine; Maryland; Massachusetts; Michigan; Minnesota; Montana; Nebraska; Nevada; New Hampshire; New Jersey; New Mexico; New York; North Dakota; Ohio; Oregon; Pennsylvania; Rhode Island; Utah; Vermont; Virginia; Washington; West Virginia.

3. In the other states, the eligibility works as follows for families of different sizes:

4. Are you surprised by these numbers?

   Yes; No

5. What did you find particularly surprising?

   Text Box

A-5.13 Self-reported questions

1. It is vital to our study that we only include responses from people that devoted their full attention to this study. Otherwise years of effort (the researchers' and the time of other participants) could be wasted. You will receive credit for this study no matter what, however, please tell us how much effort you put forth towards this study.

In the other states, the eligibility works as follows for families of different sizes:

State	1	2	3	4	5 or more
Alabama	18%	18%	18%	18%	18%
Florida	33%	33%	33%	33%	33%
Georgia	0%	38.35%	36.84%	36.24%	35.69% to 35.39%
Kansas	38%	38%	38%	38%	38%
Mississippi	22.44%	22.31%	22.18%	22.09%	22.07% to 21.94%
Missouri	22%	22%	22%	22%	22%
North Carolina	42.90%	41.48%	38.52%	35.57%	33.61%
Oklahoma	44.98%	44.98%	44.99%	44.99%	44.99%
South Carolina	62%	62%	62%	62%	62%
South Dakota	60.69%	56.28%	50.99%	47.33%	44.87% to 40.38%
Tennessee	100.63%	96.89%	93.03%	89.26%	85.74% to 79.58%
Wisconsin	100%	100%	100%	100%	100%
Wyoming	52.29%	53.73%	50.41%	47.76%	48.62% to 55.84%

Texas distinguishes between 1-parent and 2-parent families:

Family size	1-parent family	2-parent family
1	10,18%	-
2	14,29%	11,74%
3	13,28%	14,49%
4	13,24%	13,63%
5 or more	12,64%	13,54%

Finally, the District of Columbia's eligibility level is 221% of FPL for parents with dependent children and 215% of FPL for other, non-elderly adults.

I put forth almost no effort; I put forth very little effort; I put forth some effort; I put forth quite a bit of effort; I put forth a lot of effort

2. Also, often there are several distractions present during studies (other people, TV, music, etc.). Please indicate how much attention you paid to this study. Again, you will receive credit no matter what. We appreciate your honesty!

I gave this study almost no attention; I gave this study very little attention; I gave this study some of my attention; I gave this study most of my attention; I gave this study my full attention

A-5.14   Bias and Feedback

1. Do you feel that this survey was biased?

   Yes, left-wing bias; Yes, right-wing bias; No, it did not feel biased

2. Please feel free to give us any feedback or impression regarding this survey.

   Text Box

A-5.15   Consent Page

Academic Research Survey We are a non-partisan group of academic researchers from the Economics Department at Harvard University. Our goal is to learn about people's attitudes on several issues. Please read the information below before consenting to begin the research study.

- This survey is voluntary. You have the right to not answer any question, and to stop the survey at any time or for any reason (to exit the survey, simply close this window). We expect that it will take about 20 minutes. You will likely learn a lot!

- Your name will never be recorded by researchers. Results may include summary data, but you will never be identified. The data will be stored on Harvard servers and will be kept confidential. The collected anonymous data may be made available to other researchers for replication purposes.

- You will be compensated for this interview conditional upon (i) completing the survey and (ii) passing our survey quality checks, which use sophisticated statistical control methods to detect incoherent and rushed responses. **Responding without adequate effort may result in your responses being flagged for low quality and you may not receive your payment.**

Please note that it is very important for the success of our research that you **answer honestly** and **read the questions very carefully** before answering. If at any time you don't know an answer, please give your best guess **without consulting any external sources.** However, please be sure to spend enough time reading and understanding the questions.

You are encouraged to print or take a screenshot of this page for your records. If you have any questions about this study, you may contact us at studysocialsciences2018@gmail.com.

This research has been reviewed and approved by the Harvard University Area Institutional Review Board ("IRB"). You may talk to them at (617) 496-2847 or cuhs@harvard.edu if:

- Your questions, concerns, or complaints are not being answered by the research team.

- You cannot reach the research team.

- You want to talk to someone besides the research team.

- You have questions about your rights as a research subject.

- You want to get information or provide input about this research.

  Yes, I would like to take part in this study, and confirm that I LIVE IN THE U.S., and I am 18 or older; No, I would not like to participate

A-6 2025 Questionnaire

A-6.1 Background questions

1. What is your gender?

   Male; Female; Other

2. What is your age? *Text box*

3. What was your TOTAL household income, before taxes, last year?

   $0-$9999; $10000-$14999; $15000-$19999; $20000-$29999; $30000-$39999; $40000-$49999; $50000-$69999; $70000-$89999; $90000-$109999; $110000-$149999; $150000-$199999; $200000+

4. Were you born in the United States?

   Yes; No

5. In what state or U.S. territory were you born?

   Alabama; Alaska; Arizona; Arkansas; California; Colorado; Connecticut; Delaware; District of Columbia; Florida; Georgia; Hawaii; Idaho; Illinois; Indiana; Iowa; Kansas; Kentucky; Louisiana; Maine; Maryland; Massachusetts; Michigan; Minnesota; Mississippi; Missouri; Montana; Nebraska; Nevada; New Hampshire; New Jersey; New Mexico; New York; North Carolina; North Dakota; Ohio; Oklahoma; Oregon; Pennsylvania; Rhode Island; South Carolina; South Dakota; Tennessee; Texas; Utah; Vermont; Virginia; Washington; West Virginia; Wisconsin; Wyoming; American Samoa; Guam; Northern Mariana Islands; Puerto Rico; Virgin Islands

6. In which ZIP code do you live?

   Text box

7. Please indicate your marital status

   Single; Married; Legally separated or divorced; Widowed

8. How many children do you have?

   I do not have children; 1; 2; 3; 4; 5 or more

9. *Screening Question 1.* Most modern theories of decision making recognize that decisions do not take place in a vacuum. Individual preferences and knowledge, along with situational variables can greatly impact the decision process. To demonstrate that you've read this much, just go ahead and select both strongly agree and strongly disagree among the alternatives below, no matter what your opinion is.

   Do you agree or disagree with the following statement: "It is easy to find accurate and reliable information in the media these days."

   Strongly agree; Agree; Disagree; Strongly disagree

10. How would you describe your ethnicity/race?

    European American/White; African American/Black; Hispanic/Latino; Asian/Asian American; Mixed race; Other (please specify)

11. Which category best describes your highest level of education?

    Eighth Grade or Lower; Some High School; High School degree/GED; Some College; 2-year College Degree; 4-year College Degree; Master's Degree; Doctoral Degree; Professional Degree (JD, MD, MBA)

12. (If highest level of education superior to "High School" to 11) What is/was your field of study in college? If multiple degrees apply, please select the field corresponding to your last degree.

    Accounting/bookkeeping; Administrative science/public administration; Advertising; Agriculture/ horticulture; Allied health; Anthropology; Architecture; Art; Aviation/aeronatics; Biology; Business administration; Chemistry; Child/human/family development; Comm. disorders; Communications/speech; Computer science; Counseling; Criminology/criminal justice; Dance; Dentistry; Economics; Education; Educational administration; Electronics; Engineering; English; Environmental science/ecology; Ethnic studies; Fashion; Finance; Fine arts; Food science/nutrition/culinary arts; Foreign language; Forestry; General sciences; General studies; Geography; Geology; Gerontology; Health; History; Home economics; Human services/human resources; Humanities; Industrial relations; Industry and techn; Information technology; Journalism; Law; Law enforcement; Liberal arts; Library science; Marketing; Mathematics; Mechanics/machine trade; Medicine; Music; Nursing; Other; Other vocational; Parks and recreation; Pharmacy; Philosophy; Physical education; Physics; Political science/international relations; Psychology; Public relations; Social sciences; Social work: Sociology; Special education; Statistics/biostatistics; Television/film; Textiles/cloth; Theater arts; Theology; Urban and regional planning; Veterinary medicine; Visual arts/graphic design/design and drafting; Other

13. What is your current employment status?

    Full-time employee; Part-time employee; Self-employed or small business owner; Unemployed and looking for work; Student; Not currently working and not looking for work; Retiree

14. If you had to use one of these five commonly-used names to describe your social class, which one would it be?

    Lower Class or Poor; Working Class; Middle Class; Upper-middle Class; Upper Class

15. On economic policy matters, where do you see yourself on the liberal/conservative spectrum?

    Very liberal; Liberal; Moderate; Conservative; Very conservative

16. What do you consider to be your political affiliation, as of today?

    Republican; Democrat; Independent; Other; Non-Affiliated

17. (If "Other" to 16) Please specify your political affiliation:

    Text box

18. Did you vote in the last presidential election?

    Yes; No

19. (If "Yes" to 18) In the last presidential election, you supported:

    Kamala Harris; Donald Trump; Jill Stein; Robert Kennedy; Other

20. (If "No" to 18) Even if you did NOT vote, please indicate the candidate that you were most likely to have voted for or who represents your views more closely.

    Kamala Harris; Donald Trump; Jill Stein; Robert Kennedy; Other

21. Did you vote in the November 2022 midterms elections?

    Yes; No

22. (If "Yes" to 21) Which party did you vote for?

    Republican Party; Democratic Party; Other

23. (If "No" to 21) Which party would you have liked to support?

    Republican Party; Democratic Party; Other

24. How knowledgeable do you consider yourself on economic policies and issues?

    Highly knowledgeable; Somewhat knowledgeable; Not very knowledgeable; Not knowledgeable at all

A-6.2   Open-ended questions

We now want to ask you a few broader questions. Please use the text boxes below and write as much as you feel like. Your opinion and thoughts are important to us! There is no right or wrong answer.

1. What would be a "good" health insurance system in your view? What would be the goal of a good health insurance system?

2. When you think about health insurance and whether the U.S. should have universal health insurance for all, what are the main considerations—in favor or against it—that come to your mind?

3. What do you personally see as the biggest problem with health insurance in the United States today?

A-6.3   Personal Exposure

1. Do you currently have health insurance?

   Yes; No

2. (If "No" to 1) Which of these are reasons why you stopped being covered or do not have health insurance?

   You may select several options.

   Lost job or change in employment; Change in marital status or death of parent; Ineligible due to age or left school; Employer didn't offer or insurance company refused; Cost; Medicaid stopped; Other (includes moved, self-employed, never had coverage, did not want or need coverage, and other unspecified reasons)

3. (If "Yes" to 1) Are you on Medicaid or Medicare?

   Yes; No

A-6.4   Knowledge about policy

As you probably know, the government and researchers gather a lot of statistical information about the economy. We are interested in learning whether this information finds its way to the general public. The next set of questions is about some economic policies in the United States. These are questions for which there are right or wrong answers.

In order for your answers to be most helpful to us, it is really important that you answer these questions as accurately as you can and without consulting any external sources. Although you may find some questions difficult, it is very important for our research that you try your best. Thank you very much!

1. What is Medicaid? Who is eligible for Medicaid?

   Text box

2. What is Medicare? Who is eligible for Medicare?

   Text box

3. **Medicaid** is a federal and state program that helps people with low income pay for their health insurance.

   Medicare is a federal program that provides health insurance for Americans aged 65 and older, as well as younger people with disability status.

4. Out of 100 Americans, how many get their health insurance coverage through the following programs? The total must equal 100.

   Important note: Individuals can be enrolled in several programs at once. Here, we are interested in the primary insurer. An individual who has Medicaid and any other type of insurance is counted in the Medicaid category and an individual who has both Medicare and employer-based coverage is counted in the employer-based category.

   - Medicaid
   - Medicare
   - Group health insurance through employer
   - Other insurance (policies purchased directly from an insurance company, military, other public...)
   - Uninsured

5. Out of 100 American children, aged below 18, how many are enrolled in Medicaid?

   Slider going from 0 to 100

6. Medicaid eligibility depends on family size, the age of each member, and the state you live in. To qualify, total household income must fall below a specific percentage of the Federal Poverty Level (FPL). For your family's size, ages, and state, what is that percentage?

   Under 50% of the FPL; Between 50 and 90% of the FPL; Between 90 and 130% of the FPL; Between 130 and 160% of the FPL; Between 160 and 200% of the FPL; Higher than 200% of the FPL;

7. Please specify the exact percentage

   Text box

8. Did the Affordable Care Act (ACA) make any changes to the eligibility for Medicaid in your state?

   Yes, it expanded eligibility; No, it remained the same; Yes, it reduced eligibility;

9. *Second screening question* In order to facilitate our research on decision making we are interested in knowing certain factors about you, the decision maker. Specifically, we are interested in whether you actually take the time to read the directions; if not, then some of our manipulations that rely on changes in the instructions will be ineffective. So, in order to demonstrate that you have read the instructions, please ignore the question below. Instead, simply put the slider to 98. Thank you very much.

   Out of 100 adults in the U.S., how many are currently paying any income tax at all?

   Slider going from 0 to 100

A-6.5   Treatment

Respondents are randomly assigned to one of three groups, labeled as "Medicare," "Medicaid," and "Control." In the first two cases, respondents are shown a video, different between the two treatment groups, while those in the control group are not. The videos are introduced by the following:

- Recent research has found uncovered new and important facts about a government program called Medicare/Medicaid. We will now show you a short video (with sound) that summarizes some key findings of these studies. Please pay attention to the information provided as you will be asked questions about it later. Do not skip forward or close the page while the video is running.

  Please proceed to the next page when you are ready. Note that you will not be able to move forward with the survey before the end of the short video. The video lasts about one minute.

  Link to the videos can be found here:

- Medicare treatment

- Medicaid treatment

A-6.6   Mechanisms

1. If people have health insurance through their employer, do you think this would discourage them from quitting a bad job or switching job from fear of losing their health insurance?

   Yes; No

2. If health insurance were to be made more generous, to what extent would it encourage people towards the following behaviors?

   A great deal; A lot; A moderate amount; A little; None at all

   - Make less use of the emergency room for conditions that do not warrant it
   - Use more medical services they do not really need simply because they do not have to pay the full cost of them
   - Use more preventive medical care such as regular screenings and check-ups

3. Do you agree or disagree with the following statement?

   "With less generous health insurance, health in the U.S. would be worse since many people could not afford sufficient and appropriate medical care."

   Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree

4. Do you agree or disagree with the following statement?

   "More generous health insurance coverage for preventive care can lead to a reduction in total medical costs, since medical issues would be caught early on before they turn into more serious and expensive health conditions and because many medical problems could be avoided altogether."

   Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree

5. Do you agree or disagree with the following statement?

   "More generous health insurance can help people deal with unexpected large medical costs. It can thus reduce financial stress and debt built up to pay the medical bills for families."

   Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree

6. Would you say that it is fair or unfair that people with pre-existing conditions have to pay more for their health insurance than people without pre-existing conditions?

   Very fair; Somewhat fair; Somewhat unfair; Very unfair

7. Is it fair or unfair that people born with worse health have to pay more for health care or insurance than people born with better health?

   Very fair; Somewhat fair; Somewhat unfair; Very unfair

8. Would you say that health issues and medical conditions are mostly the result of circumstances outside of one's control or mostly the result of one's own actions?

   Mostly the result of circumstances outside of one's control; Mostly the result of one's own actions

9. Let us consider the following statement about health care and health insurance. Please tell us whether you agree or disagree with it.

   "It is important that everyone can afford health care because people who become sick with a contagious disease that is not treated can have negative effects on others too."

   Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree

10. Let us consider the following statement about health care and health insurance. Please tell us whether you agree or disagree with it.

    "It is important to help low-income families so that they can afford medical care by subsidizing their insurance premiums or by giving them transfers for medical care."

    Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree

11. If you had to choose, which comes closest to your view?

    "Employers who have religious objections to the use of birth control should be...

    ...able to refuse to provide it in health insurance plans for their employees."; ...required to provide it in health insurance plans for their employees just as other employers are required to do."

12. Would you find it fair or unfair that women who use birth control methods pay for the cost of birth control on their own?

    Very fair; Fair; Unfair; Very unfair

13. Should women who are planning on using birth control methods have increased insurance copays because they might cost more for their insurers?

    Yes; No

14. Do you favor or oppose a law allowing pharmacists and health providers to opt out of providing medicine or surgical procedures that result in abortion?

    Favor; Oppose; Strongly oppose

15. Should insurance providers have to cover medicine or surgical procedures that result in abortion?

    Yes; No

A-6.7   Specific Outcomes

1. Do you feel that access to health care in the U.S. today is fair for everyone, even for low-income families, or do you feel that access to healthcare should be improved for many families?

   Access to health care is fair even for low-income families; Access to health care should be improved for many families

2. How fair would you say the current U.S. health insurance system is?

   Very fair; Somewhat fair; Somewhat unfair; Very unfair

3. Do you support or oppose providing additional transfers or subsidies to low-income families to help them with the costs of their health care?

   Strongly support; Support; Neither support nor oppose; Oppose; Strongly oppose

4. Do you support or oppose having an individual mandate whereby every individual is obliged to buy health insurance?

   Strongly support; Support; Neither support nor oppose; Oppose; Strongly oppose

5. Do you support or oppose having an employer mandate whereby every large employer, with more than 50 employees, is obliged to offer health insurance plans for their employees?

   Strongly support; Support; Neither support nor oppose; Oppose; Strongly oppose

6. Imagine it were up to you to design Americans' health insurance plans such that they are most cost-effective and that patients get the best care while having to pay the lowest insurance premiums.

   For the following types of medical care, please say which ones should receive:

   full coverage (the patient pays no costs out of pocket); generous coverage (the patient has only minimal copay or deductibles); low coverage (costs are shared and the patient bears a significant share of total costs); no coverage (meaning the patient has to pay the full costs out of pocket).

Bear in mind that the more generous coverage is, the higher health insurance premiums can be expected to be.

Full coverage; Generous coverage; Low coverage; No coverage

- Preventive care (e.g.: annual physical examinations, recommended cancer screening, or immunizations)
- Primary care visits for non-life threatening conditions (e.g.: for a cold, flu, or stomach bug)
- Maternity and newborn care (pre-natal screenings and check-ups, birth and delivery, newborn screening and care)
- Specialist visits for non-essential care (e.g.: elective hip replacement, hearing aids)
- Medical care for catastrophic situations (e.g.: long-run medical care after bad accidents or serious injuries once one leaves the emergency room; intensive treatment for cancers; management of serious, long-term hear and liver conditions)
- Emergency room care (emergency, short-term care after accidents, severe illness, life-threatening conditions that require immediate attention)
- Pediatric care (medical care for children)

7. Do you support or oppose lowering the age after which people become eligible for Medicare, so that younger people are covered?

   Strongly support; Support; Neither support nor oppose; Oppose; Strongly oppose

8. Do you support or oppose making Medicare more generous by expanding the services it covers?

   Strongly support; Support; Neither support nor oppose; Oppose; Strongly oppose

9. Do you support or oppose expanding Medicaid so that more people are eligible for it?

   Strongly support; Support; Neither support nor oppose; Oppose; Strongly oppose

10. Do you support or oppose making Medicaid more generous by expanding the services it covers?

    Strongly support; Support; Neither support nor oppose; Oppose; Strongly oppose

11. Do you support or oppose an expansion of U.S. government-provided health insurance, reducing people's reliance on employer-provided insurance?

    Strongly support; Support; Neither support nor oppose; Oppose; Strongly oppose

12. As you may know, some have proposed a "Medicare-for-all" single payer health insurance program that would be administered by the federal government and financed through taxes. Please tell us if you favor or oppose this proposal, or if you don't know enough to say?

    Strongly support; Support; Neither support nor oppose; Oppose; Strongly oppose; Don't know enough to say

A-6.8 Government Questions (General)

1. How much of the time do you think you can trust our federal government to do what is right?

   Almost always; A lot of the time; Not very often; Almost never

2. Some people think the government is trying to do too many things that should be left to individuals and businesses. Others think that government should do more to solve our country's problems. Which come closer to your own view?

   Government is doing too much; Government is doing just the right amount; Government should do more

3. Next, we'd like you to think more broadly about the purposes of government.

   Where would you rate yourself on a scale of 1 to 5, where

   - 1: you believe the government should limit itself to providing the most basic and essential functions for its citizens
   - 5: you believe the government should be active in all areas where it can improve citizens' lives

   You may use any number from 1 to 5.

   1; 2; 3; 4; 5

A-6.9 Feedback

1. Do you feel that this survey was biased?

   Yes, left-wing bias; Yes, right-wing bias; No, it did not feel biased

2. Please feel free to give us any feedback or impression regarding this survey. *Text box*

A-6.9.1 Consent Page

Academic Research Survey We are a non-partisan group of academic researchers from the Economics Department at Harvard University. Our goal is to learn about people's attitudes on several issues. Please read the information below before consenting to begin the research study.

- This survey is voluntary. You have the right to not answer any question, and to stop the survey at any time or for any reason (to exit the survey, simply close this window). We expect that it will take about 20 minutes. You will likely learn a lot!

- Your name will never be recorded by researchers. Results may include summary data, but you will never be identified. The data will be stored on Harvard servers and will be kept confidential. The collected anonymous data may be made available to other researchers for replication purposes.

- You will be compensated for this interview conditional upon (i) completing the survey and (ii) passing our survey quality checks, which use sophisticated statistical control methods to detect incoherent and rushed responses. **Responding without adequate effort may result in your responses being flagged for low quality and you may not receive your payment.**

Please note that it is very important for the success of our research that you **answer honestly** and **read the questions very carefully** before answering. If at any time you don't know an answer, please give your best guess **without consulting any external sources.** However, please be sure to spend enough time reading and understanding the questions.

You are encouraged to print or take a screenshot of this page for your records. If you have any questions about this study, you may contact us at studysocialsciences2018@gmail.com.

This research has been reviewed and approved by the Harvard University Area Institutional Review Board ("IRB"). You may talk to them at (617) 496-2847 or cuhs@harvard.edu if:

- Your questions, concerns, or complaints are not being answered by the research team.

- You cannot reach the research team.

- You want to talk to someone besides the research team.

- You have questions about your rights as a research subject.

- You want to get information or provide input about this research.

    Yes, I would like to take part in this study, and confirm that I LIVE IN THE U.S., and I am 18 or older; No, I would not like to participate

A-7 Sample of Answers to the Open-ended Question

A-7.1 2019

A-7.1.1 When you think about health insurance and whether the U.S. should have universal health insurance for all, what are the main considerations – in favor or against it – that come to your mind?

1. **Access to health care is a right for all:**

    "Every person deserves to have health insurance."

2. **Funding is a major concern:**

    "Health care for all is a great idea, but should not be run by the government. It is far too expensive to be taken care of by taxpayers"

3. **Cost of health care is too high:**

    "Honestly, I think that having a universal health care would help everyone and their attitudes. I can't tell you how many times I've heard about good working people complain about how high their health insurance payments are. "

4. **Would lead to longer wait times:**

    "Against because it has proven that the government can't run anything right. It will still cost us an arm a leg. The wait for doctors and service have proven to be lengthen in our countries that have universal health care."

5. **Government health care may lower care quality:**

   "Governments ruin everything they try to "help" with."

6. **More people would afford health care:**

   "Health care seems to be a rip-off scheme against Americans so if it were made into a universal plan, then it would be more fair and affordable for every citizen."

7. **Higher taxes could be necessary to finance it:**

   "I am for it but worry about increased taxes to cover cost"

8. **No one should have to worry about medical bills:**

   "People deserve to have a chance to live without the debt our current system works"

9. **Should not benefit illegal immigrants:**

   "People that are truly disabled should be able to get benefits without having to jump through hoops. Right now illegals have a much easier time getting benefits without working or paying into the system than those that deserve them."

10. **Should cover preexisting conditions:**

   "One payer system or not. Covering for Pre-existing conditions."

A-7.1.2   What would be a good health insurance system in your view? What would be the goal of a good health insurance system?

1. **Affordable insurance for everyone:**

   "A good health insurance program would offer everyone affordable health care where everyone can choose their own doctor."

2. **Universal health care is accessible to all:**

   "A health insurance system that would include as many people as possible of all risk types so that the risk is spread out among all the participants, so the cost would be close to even for all."

3. **Coverage for all regardless of income status:**

   "A system that gives the same level of care to each and every patient despite their level of income."

4. **Government-funded health care to ensure equity:**

   "Government run health care. The goal would be to have everyone covered, paying less and reviving better care. "

5. **Cover pre-existing conditions without high costs:**

   "Affordable and comprehensive coverage for all including those with preexisting ailments "

6. **Emphasis on preventive health care:**

   "A system that mandated wellness programs and checkups in order to prevent a good amount of illness and disease before it can occur."

7. **Single-payer, simplifying access to health care :**

"A good health insurance system would be a single-payer, national system. All U.S. citizens and permanent residents would have comprehensive health coverage regardless of background, income level, or age."

8. Low premiums and deductibles for all citizens:

"100% coverage on ALL services, whether in- or out-of network. AFFORDABLE premiums and deductibles."

9. Insurance prioritizing patient care over profits:

"A company that is dedicated to making the best choices for their customers and not necessarily themselves. Low cost and high quality of care."

10. Comprehensive care including dental and vision:

"Good inexpensive health care along with dental and vision. Low medication costs"

A-7.1.3 What do you personally see as the biggest problem with the health insurance in the United States today?

1. Health insurance is unaffordable:

"Costs for health insurance, many people cannot afford it. But then you have people who take advantage of the system that havenât paid a dime to the United States that qualify for funding for free health care"

2. Insurance companies prioritize profit:

"Corporate insurance greed. Not enough coverage for an affordable price."

3. People lack access to necessary care:

"Many people are walking our streets in desperate need of medication. My son drives the ambulances and he thought that many people should stay in shelters. I reminded him that a lot have mental problems and no money to get what they need"

4. Pharmaceutical prices are excessive:

"fraud, over priced drugs, and costs of health care, misuse of meds"

5. High out-of-pocket expenses deter people from care:

"They pay what they want you have to pay rest even though u don't have enough money to live off of."

6. Confusion in navigating health insurance:

"It is soooooooooooooooooooooo confusing"

A-7.2   2025

A-7.2.1   When you think about health insurance and whether the U.S. should have universal health insurance for all, what are the main considerations – in favor or against it – that come to your mind?

1. **Ensure access to care for all:**

   "I'm in favor of Universal health insurance for all because health insurance should be a basic human right. I cannot think of an argument against universal health insurance."

2. **Concerns about potential higher taxes:**

   "I think universal health insurance should be a given in a country as wealthy as the US. My only concern is the overall expense of such a system. "

3. **Guarantee coverage regardless of income:**

   "I'm for it as long as it's free health care. People will stop dying because of lack of money."

4. **May lead to longer wait times for services:**

   'The positive is that everyone would have access to the health care they need. The negative would be that if it's not done correctly it could take a long time to receive the health care you need."

5. **Could reduce overall health care costs:**

   "I'm 100% in favor of it. I think that it's been proven that the cost is FAR outweighed by the benefit of implementing a system like this. It would seem to me that overall national health care costs decrease due to the increase health of a country"

6. **Promote public health:**

   "I'm definitely for it- main considerations were to ensure everyone has access to care and improving public health."

7. **Concern for government managerial efficiency:**

   "Well in favor because current insurance companies cannot facilitate a healthy marketplace to deliver good health care at fair market prices. Now, the government has experimented with this with the VA and Medicare, and both are horrendous."

8. **Simplifies health care access:**

   "Literally it covers everyone, thats a major favor already. Like I hate having to deal with health care's middle man. At least I'd be free from that headche, thats a benefit"

9. **Help reduce medical bankruptcies:**

   "100% in favor. An accident should not bankrupt you. You should not have to live in fear of getting sick and losing everything in your life. No one should suffer because an insurance company denied them benefits."

10. **Fear reduced choice in providers:**

    "I am completely against universal health care. No one should be forced to pay for health care. I don't like the idea that my health coverage is determining which doctor I should see."

A-7.2.2 **What would be a good health insurance system in your view? What would be the goal of a good health insurance system?**

1. **Should be affordable and accessible for all:**

   "A good health insurance system should aim to promote health equity and financial protection . The goal of a good health insurance system is to ensure that everyone can receive appropriate, and affordable medical care ."

2. **Necessary to ensure medical services for all:**

   " Ensuring everyone has access to necessary health care services without financial hardship. Providing comprehensive coverage for various health needs, including preventive care, chronic disease management, and emergency"

3. **Should prevent financial hardship from medical costs:**

   "A good health insurance system should help people stay healthy and avoid financial stress when they need medical care."

4. **Including preventive care is essential:**

   "Good heath insurance would be a system where everyone is covered for at minimum preventative health care services. It would also discourage companies from gouging citizens for prescriptions and medical procedures."

5. **Quality care must be available regardless of income:**

   "Having a health care systems that provides affordable or free services to low income people, minorities and a standard medical equipment "

6. **Should not be tied to employment status:**

   "affordable coverage for everyone. NOT tied to employment. A program that supports/rewards those with healthy habits without penalizing those with issues that prevent these habits. Lowering health delivery costs"

7. **Transparency is crucial for patient trust:**

   "It would be transparent and fees would be available upfront. No hidden charges. It Ould allow easy access to specialists as needed"

8. **Efficiency and simplicity in the claims process:**

   "to be able to file claims online without any problems. I would like them covering more copays and prescription medication"

9. **Reducing health disparities is a primary goal:**

   "A good health insurance system according to my view should be aimed at supporting the poor and low class. It should make policies that make it easier for the disadvantaged to also get the services provided."

10. **Should not reject claims for necessary procedures:**

    "One that pays a lot claims if they are valid and doesn't try to find a loophole to get out of them."

A-7.2.3 What do you personally see as the biggest problem with the health insurance in the United States today?

1. **High costs are the biggest issue:**

   "That it is expensive, which means a lot of people don't have health insurance or can't afford the out-of-pocket costs left after their insurance coverage, so they don't receive proper health care."

2. **Insurance companies prioritize profit over patient care:**

   "Run by big pharmaceutical companies, whose top-of-the-ladder employees want to cushion their pockets. Will not cover medications or procedures, even if they are necessary for treatment. Have to jump through hoops if you need a specialist."

3. **System creates financial barriers to necessary care:**

   "Cost. It's borderline dystopian how have the misfortune of getting something like a cancer diagnosis can bankrupt you."

4. **Coverage is often inadequate or denied:**

   "The fact that health insurance sometimes doesn't cover certain things seemingly arbitrarily, and the fact that a good health insurance costs a lot of money."

5. **Health insurance is overly complex and confusing:**

   "It is too complicated for the average person. There are too many things to try and decode, like prior authorizations."

6. **Many people cannot afford medical care:**

   "Its doesn't cover expensive bills for people that cannot afford to pay."

7. **Coverage based on income creates inequality:**

   "The high cost making it unaffordable by all. This creates some kind of disparity between the rich and the poor."

8. **Access to health care is tied to employment:**

   "Jobs providing health care insurance means that most people working lower level jobs never get health care. Tieing insurance to a job leaves a lot of people behind. Moving jobs leaves people uninsured. "

9. **Adequate care not guaranteed even if one is insured:**

   "The gap between coverage and actual access to affordable care in that being insured does not guarantee being protected."

10. **Too many middlemen in the system:**

    "There is too many middleman. If they reduce the middleman then I think it will reduce the cost."

References

Ferrario, B., and S. Stantcheva (2022). Eliciting people's first-order concerns: Text analysis of open-ended survey questions. *AEA Papers and Proceedings, 112*, 163–169.