From: John Ray of YouGov Blue and Sean McElwee of Data for Progress  
To: Interested parties  
Date: August 2019  
Subject: Support for Providing Generic Pharmaceuticals as a Means of Combating Rising Drug Prices

On behalf of Data for Progress, YouGov Blue fielded a survey that included an item asking voters whether they supported permitting Medicare to negotiate lower drug prices. Additionally, Data for Progress designed a message test to determine the most effective frame for convincing voters to support policy reform allowing the manufacture of generic pharmaceutical drugs to help lower prices. To do so, we experimentally compared messages framing the issue of generic competition around patients’ ability to pay and the relative price of drugs in the US compared to other countries. This memo includes a full explanation of the item wording, sampling strategy, and weighting strategy.

Executive Summary

- Voters are overwhelmingly supportive of allowing the government to negotiate lower drug prices, with 84 percent of US voters supporting this policy and only 5 percent opposing it.
- Ninety-one percent of Democrats, 81 percent of independents, and 77 percent of Republicans support allowing Medicare to negotiate lower drug prices. Opposition was nearly nonexistent, with only 3 percent of Democrats, 5 percent of independents, and 7 percent of Republicans actively opposing the policy.
- Voters randomly assigned to read a message about a policy allowing competition from generic pharmaceuticals were more likely to support that policy when the message centered patients’ ability to pay rather than international price comparisons.
- Even with Republican arguments against generic competition, majorities of Democrats and independents supported generic competition—as do just under half of Republicans.

National Survey Results

At the outset of our survey, we asked voters whether they would support or oppose allowing Medicare to negotiate lower drug costs. Specifically, we asked:

Some have proposed allowing Medicare to negotiate lower drug prices with pharmaceutical companies. Do you (support or oppose) this idea?

Voters could report whether they strongly supported, somewhat supported, neither supported nor opposed, somewhat opposed, or strongly opposed this policy. In our sample of US voters, 84 percent of respondents reported they supported this policy. The following plot breaks down responses by the full sample, which includes just over one thousand US voters.
Perhaps surprisingly, partisan identification does not necessarily drive support for this policy. While support for the policy was highest among Democrats, we found that majorities of Democrats, independents, and Republicans supported the policy. Ninety-one percent of Democrats, 81 percent of independents, and 77 percent of Republicans reported somewhat or strongly supporting allowing Medicare to negotiate lower drug prices.
In addition to enjoying support across the partisan divide, this policy is popular across the urban/suburban/rural divide among US voters. In this survey, we asked respondents to describe if the area they lived in would best be described as a “city,” “suburb,” “town,” or “rural area.” Across these possible geographic types, the total support for the policy did not deviate much from the national topline. Fully 84 percent of city-dwelling voters, 83 percent of suburb-dwelling voters, 87 percent of town-dwelling voters, and 85 percent of rural area-dwelling voters somewhat or strongly supported allowing Medicare to negotiate lower drug prices.
Message Test Results

Later in the survey, we posed a message test to voters to ascertain levels of support for allowing competition from generic pharmaceuticals to help lower drug prices. In this test, we randomly assigned half of respondents to receive either the “ability to pay” statement, and the other half to receive the “other countries’ prices” statement.

The “ability to pay” statement read:

Some Democrats in Congress have proposed allowing the production of generic versions of life-saving drugs if the government determines that a drug company has raised prices beyond patients’ ability to pay. This would end the patent on the drug and allow other companies to manufacture generic versions of the drug and provide it to consumers at a lower cost.

And the “other countries’ prices” statement read:

Some Democrats in Congress have proposed allowing the production of generic versions of life-saving drugs if the government determines the price of the drug is higher in the United States than it is in other countries. This would end the patent on the drug and allow other companies to manufacture
generic versions of the drug and provide it to consumers at a lower cost.

Both statements were followed by the below argument:

Democrats say this would make life-saving drugs available to all Americans and ensure everyone can afford medicine without going into debt.

Republicans say this will reduce the incentives for companies to invest in life-saving medical innovation and make the U.S. no longer an international leader in drug production.

Finally, we asked voters if they strongly supported, somewhat supported, neither supported nor opposed, somewhat opposed, strongly opposed, or were unsure about the policy.

Notably, both versions of the statement anchored respondents to consider a policy being proposed by Democrats in Congress. This is notable for two reasons. First, mentioning that the policy originated with “Democrats” likely instantiates a partisan cue, the net effect of which will be that support for the policy would be higher among Democrats and independents who lean Democrat than it would be without a partisan cue, and that support would be lower among Republicans and independents who lean Republican than it would be without the partisan cue. We included a Republican counterargument to ensure the partisan nature of the conflict was clear. Second, we mention that the cue originates in Congress, which historically is the least popular of the branches of the federal government.

Despite this, we found that support for the policy was high across the full sample, with voters in the “ability to pay” being significantly more likely to support the policy. Across the full sample, 68 percent of voters in the “ability to pay” condition, with a 95 percent confidence interval bounded between 66 percent and 70 percent of voters in that condition somewhat or strongly supported the policy. About 62 percent of voters in the “other countries’ prices” condition, with a 95 percent confidence interval between about 59 percent and 65 percent, somewhat or strongly supported the policy.
Across the party-identification divide, the general trend of the “ability to pay” statement being more popular than the “other countries’ prices” statement persisted, though with smaller sample sizes in each group it is harder to draw statistically confident conclusions. Among Democrats, 90 percent in the “ability to pay” treatment group and 86 percent in the “other countries’ prices” treatment group supported the policy. Among independents, those estimates included 63 percent support in the “ability to pay” group and 57 percent in the “other countries’ prices” group, down to about 47 percent support in the “ability” group among Republicans and 40 percent in the “other countries” group. The following plot breaks out treatment effect estimates by party identification. Within each group, the overlapping 95 percent confidence intervals suggest that the different policy statement are not associated with statistically detectable differences in support for the policy.
Conclusion

The profits of the pharmaceutical industry offer an incredibly compelling target for progressives. Our polling shows that voters across partisan affiliation support for increased government action to reduce prices and limit excess profit in the pharmaceutical industry. Even after Republicans begin counter-messaging, our data suggest that progressives will hold the upper hand on proposals that leverage government intervention to directly challenge prescription drug companies’ price gouging.

Methods Appendix

This survey is based on 1,009 interviews conducted by YouGov on the internet of self-identified registered voters. The sample was weighted according to gender, age, race, education, census region, and 2016 presidential vote choice. Respondents were selected from YouGov's panel to be representative of registered voters. The weights range from 0.2 to 4.8, with a mean of 1 and a standard deviation of 0.5.