

Qualitative Analysis of Open-Ended Questions from The Asclepius Initiative 2026 Health Care Coverage Survey of Kentuckians

Overview

The Asclepius Initiative (TAI) conducted the 2026 Kentucky Health Care Coverage survey between May 2026 and June 2026 in partnership with NORC at the University of Chicago. The survey is conducted every two years, beginning in 2022. The purpose of the survey is to understand the experiences, attitudes, and beliefs of Kentuckians about the current United States health care system, how it affects them and their families, and their interest in considering alternative models for health care coverage financing.

This report analyzes the open-ended questions from the survey.

Methodology

There were two open-ended questions on the 2026 Kentucky Health Care Coverage survey.

1. What feature of a national health care coverage program would be most important to you?
2. What fears/concerns do you have with the idea of a national health care coverage program?

Open-ended text responses from each question were analyzed using content analysis.

Question 1: The following themes were used to categorize individual responses to Question 1: Access, Cost, Coverage, or Quality. Each response received a primary theme code. Responses that were relevant to multiple themes received multiple codes. Each response could be assigned up to three themes. Consequently, the total frequency of keyword codes exceeds the number of individual responses. Out of 1,028 responses, 869 were assigned 1 theme, 154 responses were assigned two themes, and 5 responses were assigned three themes. Responses that did not align well with any theme were categorized as “Other.” Survey participants who said they were unsure, didn’t know, or had no opinion were categorized as “Unsure/No opinion.” Participants who answered the question as “not applicable” or left a blank response were excluded from the analysis. Additional sub-themes were included to capture other themes that were commonly mentioned and included “Medications”, “Vision”, “Dental”, and “Equity.”

For the purposes of this analysis, responses that mentioned “coverage for all” or “fairness”, or supporting those most in need, or the like, were assigned a sub-theme called “equity.” The equity sub-theme was most likely to occur with a primary code of coverage (96/100 occurrences or 96% of the time).

Question 2: was categorized thematically using the same codes that were used in the 2024 survey. The themes were: Abuse, Access, Cost, Coverage, Government/System, and Quality.

PART 1

Question 1: What feature of a national health care coverage program would be most important to you?

There were 1,028 responses to Q1. Table 1 provides frequencies for each theme that was assigned to the response. Table 2 provides frequencies for each of the sub-themes.

Some responses did not align with a main theme and were categorized as “Other” (n=107). These responses will be discussed in more detail later. There were 80 responses from individuals who said they were unsure how they felt about a national health care coverage program, had no opinion or did not have enough information to have an opinion either way.

Table 1. Frequency of Themes for Responses to Question 1

Theme	Frequency
Coverage	446
Cost	365
Access	125
Other	107
No opinion/Unsure	80
Quality	68

Table 2. Frequency of Sub-Themes for Responses to Question 1

Sub-Theme	Frequency
Equity	100
Medication	29
Dental	22
Vision	10

Theme 1: Coverage

Coverage was the most frequently occurring theme (n=446). Respondents in this category often cited an interest in equitable coverage (n=100), referring to the idea that all people should have health care coverage, regardless of their ability to pay. Several respondents cited the ability to maintain coverage for their current providers as an important feature. Additionally, some respondents expressed interest in coverage for dental (n=22) and vision (n=10). One respondent suggested coverage for hearing, one suggested coverage for chiropractic providers, and two emphasized mental health coverage. Twenty-nine people noted that more affordable medications, and coverage of medications, was important (n=29). Noteworthy responses related to coverage included:

- *Reliable coverage no matter where someone works or lives would probably matter most to me.*
- *The most important part of a national health care coverage program to me would be knowing that myself and everyone else would not be suffering due to lack of coverage.*

- *Including dental and vision care within standard coverage would genuinely transform the lives of many ordinary people.*
- *Stable coverage during employment changes would provide continuity and reduce disruptions in ongoing healthcare needs.*
- *Insurance that stays with you between jobs, a layoff, or career change shouldn't put your family's health at risk.*
- *Ensuring that every person can visit their preferred doctor without worrying about complex network restrictions.*
- *For me, the most important feature is that every person in the country can get medical treatment when it is needed, regardless of their job or income. By extension, no one would go into debt due to a medical issue.*
- *Everyone can get the help they need. No one should have to choose between eating/feeding their family, and getting the healthcare and/or medicine they need to survive.*

Theme 2: Cost

Cost was the second most frequently occurring theme (n=365). Affordability of premiums, medication, and low out-of-pocket costs were frequently mentioned.

Noteworthy comments related to cost included:

- *What I value most is the affordable monthly premium and comprehensive prescription drug reimbursement. I also value the ability to see a general practitioner nearby without incurring high out-of-pocket deductibles.*
- *The money it would save me from paying for the premiums, and hopefully for the cost of prescription medicines too.*
- *Affordable premiums matter most so every family can access treatment without financial stress.*
- *That it be affordable, but still provide good coverage at any doctor I prefer.*
- *Affordable costs, easy access to doctors quality care and no financial stress during medical emergencies.*
- *People would no longer have to face bankruptcy in order to simply stay alive and healthy.*

Theme 3: Access

There were 125 responses associated with access to care. For the purposes of this analysis, access to care referred to more than having health insurance coverage (which was coded as "coverage"). Respondents mentioned the need for access to timely health care services, access to comprehensive services, including care for chronic conditions and other specialty care, the ability to see providers regardless of network coverage, providers located in or near their community, and accessibility without compromising the quality of care. Noteworthy responses related to access included:

- *My top priority would involve fast access to specialists whenever a serious medical concern actually arises.*
- *Easy access to doctors and treatments would be most important so people can get help when needed.*

- *Thing that matters most to me is cutting down the wait times for surgeries because the longer people are made to wait the worse they usually end up getting.*
- *The most important feature for me would be timely access to healthcare ensuring that patients can see doctors and specialists when needed without facing long wait times for appointments tests or treatment.*
- *What I would care about the most is making sure that even someone who is out in a rural village gets the exact same quality of care as a person sitting in the middle of a big city.*
- *Accessibility of doctors, treatments, and medicine for all without an insurance company blocking someone from receiving treatment based on arbitrary measures. It would allow doctors to choose if a patient needs a treatment instead of a drug company or an insurance company.*

Theme 4: Quality

Fifty responses were associated with the maintenance or improvement of quality of care as an important feature of a national health care system. Noteworthy responses related to quality included:

- *Maintaining quality healthcare coverage with low deductibles.*
- *Equal quality of treatment for the rich and the poor ensures that fairness remains at the core of healthcare.*
- *Priority is delivering affordable universal coverage while keeping excellent service quality and freedom to select preferred medical specialists.*
- *The quality of care would be a problem if the number of people increase.*
- *Strong focus on affordability while maintaining good quality care would be most desirable outcome.*

“Other” Responses

There were 107 responses that did not align well with any key word/category and, thus, were categorized as “other” responses. These responses were diverse in nature and several represented opinions about a national health care coverage program. Some examples include:

- *Being able to convince the naysayers that it would end up being a benefit for everyone. People worry about longer wait times or insufficient [sic] coverage, but all it takes is a little research to learn that that is not the case. Having been wealthy and poor, I can attest that the middle-class is the one suffering the brunt of the healthcare crisis. If you are poor, Medicaid takes care of (wonderfully). If you are wealthy, premiums are not an issue. If you are middle-class, you are in deep trouble financially.*
- *Or, if cholesterol is a bit high, instead of looking at diet, exercise and other factors, they immediately talk about medications. STOP with the medications. Let's look at diet . GET RID OF PROCESSED FOODS!!!!*
- *Absolutely no interest in nationalized healthcare. Give medicine [sic] back to caregivers.*
- *The efficiency of the program and choosing the provider you want would be the most important. Anything the government is in charge of always gets tied up forever in red tap [sic], so this concept would never work.*
- *And our government will not be able to run this program efficiently, as well. We need to keep private insurance companies competing and running healthcare.*

- *Having a system that puts patients and their doctors in charge of health decisions not insurance companies.*

Opposed to a National Health Care Coverage Program

Seventy-five people shared that they were not in favor of a national health care program and/or that restrictions should be applied, including the exclusion of non-citizens or people who were unemployed by choice. Many responses were associated with negative perceptions towards government-run health care.

Noteworthy responses included:

- *The ability for more people to be able to receive healthcare coverage is important to me. However, I cannot see how this could be done w/o corruption and cheating causing a great problem in implementing it.*
- *There are too many unanswered questions to support this now. And if you consider all the lies that were told when implementing the affordable care act how can anybody believe anything we are told now?*
- *There isn't one the federal government now incapable of running anything period. Look at all the waste there already is from. The local to the federal level.*
- *The US government is already to [sic] big, no way would I want my kids or grandkids to have to continue to foot a plan that would balloon [sic] out of reach in just a few years! This is not the governments [sic] responsibility*
- *I do not support the government, especially democrats who are not trustworthy, to run this system*
- *Do not approve for people who have never contributed to society or drug addicted*
- *I think the government is not competent to run anything nationally. I think all medical and educational decisions should be ran by the states. Do if you do not like it [sic] in your state, you can move. Free choice. National is no free choice.*

PART 2

Question: What fears/concerns do you have with the idea of a national health care coverage program?

Because the nature of the open-ended text responses was similar to the previous survey (2024), the same themes were used to categorize responses for the 2026 survey. These themes were: Abuse, Access, Cost, Coverage, Government/System, and Quality. Responses that did not align well with any themes were categorized as “other.” Respondents who said they were unsure or didn’t know were included as “unsure.”

There were 1,040 responses to Q2. Table 3 provides frequencies for each theme. If responses did not align with any of the themes, then they were categorized as “Other.” These responses will be discussed in more detail later.

Table 3. Frequency of Themes for Responses to Question 2

Theme	Frequency
Cost	264
Government/System	227
Quality	223
None/No fears or concerns	169
Coverage	151
Abuse	72
Access	49
Other	39
Unsure	28

Theme 1: Cost

Cost was the most frequently occurring theme across the 1,040 responses. Nearly 26% of respondents (n=264) described cost as a primary fear or concern related to a national health care coverage program. Comments related to cost spanned several aspects including concerns about the cost to implement a national health care coverage program and the possibility of increased taxes to fund a program. The most frequently co-occurring themes with cost were coverage and quality. Common concerns were that the costs of a national health care coverage program would be so prohibitive that coverage may be cut, which could lead to lower quality of care and fewer or no services.

Noteworthy comments related to cost included:

- *Cost, taxes increased, the turmoil it will cause when implemented, those nor [sic] contributing still having coverage.*
- *Fear that long-term budget issues may result in lower benefits and limits on available services.*
- *My fears is would [sic] Healthcare coverage be provided by how much taxes each individual/ household is able to pay.*
- *The cost for health care is obviously not free. The cost have [sic] to come from somewhere. Would that be higher taxes? Taxes are high enough as it is.*
- *There is a deductible amount for hospitalization, and for minor illnesses, the cost may be too low to meet the reimbursement criteria. There is also an annual reimbursement limit. Once a major illness is contracted, all the expenses exceeding the cap will be borne by the individual.*
- *That when it comes down to extreme measures, and if a treatment isn't covered, how does a person cover that unless they are wealthy.*

Theme 2: Government/System

This theme reflected fears or concerns about systemic issues such as strains on the health care workforce and concerns about government control of the health care system. There were 227 responses related to government/system. Several respondents expressed concerns about the federal government's ability to effectively run a health care program with some mentioning the potential influence of politics. Others expressed fears and concerns that the government could

suddenly end coverage for some or all or that a national program could introduce more bureaucracy and red tape. Seven respondents cited fears about the loss or slowing down of innovation within the health care system as a result of fewer profit gains in health care and/or due to the slow nature of government to adopt new technologies.

There were several respondents who opposed the government administering a national health care coverage program because they felt the program would be a failure, citing other countries (e.g. Canada) as an example.

Noteworthy comments related to government/system included:

- *I fear that we are being lied too [sic] again. Many of the points brought up earlier were supposed to be fixed by the affordable care act but obviously they were not.*
- *Healthcare run by the government worries me. Dealing with the DMV is bad enough [sic] imagine if your medical care was run by the government*
- *Less doctors would want to provide care if they cannot upcharge, they would no longer be able to treat care like a business and would find careers elsewhere which could add to wait times or limit access.*
- *That the government would try to privatize it, somehow. That's absolutely the wrong approach, and what's wrong with our current health care system. All the private companies are in it to make money, NOT to provide health care that benefits the patient.*
- *I don't trust Republicans not to make this yet another way to funnel money into the pockets of billionaire while screwing [sic] over the 99%*
- *My greatest fear would be that the government would make end of life decisions for individuals that were terminal, deny care to infants with birth defects, demand abortions for babies with severe birth defects all in the name of saving money.*
- *Political figures using the program as a political football and coming up with ridiculous coverages like "abortion on demand" or transgender surgery and other electives being covered for no other reason than to get votes.*

Theme 3: Quality

In total, 223 respondents expressed concern about the quality of care provided by a national health care coverage program. As previously mentioned, concerns about quality and cost often co-occurred as did concerns about quality and systems. For instance, several respondents expressed concerns that a national health care coverage program would increase the number of patients in the system thereby increasing strains on providers and health care facilities and reducing overall quality of care. There was concern about longer wait times to access services and decreased access to specialty services.

Noteworthy comments related to quality included:

- *That the care provided would become less than, that not all doctors would accept it, and that the cost would still be too high for most individuals.*
- *I'll look at the VA system and see nothing but long Waits and inadequate care. If the government runs all Health Care throughout the nation it's only going to be as bad or worse*

- *It will be just like everywhere else in the world! It always turns into lack of care, long wait times like as in months, poor quality of care & some bureaucrat (insurance whose doctor) deciding what you can & can't get & when! It is Socialist medicine, not healthcare!*
- *Not able to get needed care. Waiting for approval. I earned the right and worked for it to have decent health care. Government run would be a disaster!*
- *I know the wait time to get what is needed for the patient is horrendous. Also, I know that people from Canada hate the system and come to America so this obviously doesn't work well.*
- *Every other country that offers free healthcare to all has long wait times to see providers and a decreased level of care.*
- *I am really concerned about whether rural and urban populations will receive similar levels of care.*

Theme 4: Coverage

Overall, 151 respondents expressed concerns about coverage under a national health care coverage program. As previously discussed, concerns about coverage commonly occurred with concerns related to cost and quality. Specifically, respondents were concerned that high costs could lead to cuts to coverage of services. There were also concerns expressed about coverage for non-citizens or others who don't "deserve" to have coverage or that a national health care coverage program might limit personal choices for providers.

Noteworthy comments related to coverage included:

- *A fear that the government can cancel people's coverage.*
- *I worry that a national healthcare program could limit my choice of doctors and make it harder to continue receiving care from the providers I prefer.*
- *That it will be very basic like the current Medicaid program and not cover vision and dental*
- *Makes a socialised medicine [sic]. It makes a difference who gets coverage or not. And services for those in need. I don't want them telling what my care is [sic].*

Theme 5: Abuse

There were 72 responses related to concerns about abuse of a national health care coverage program. In this case, abuse refers to a fear or concern that people or organizations, including the government and health care entities, will abuse a system that provides national health care coverage. Abuse also refers to corruption and fraud. Abuse commonly co-occurred with government/system and was related to responses concerned about corruption due to political interference or government inefficiencies.

Noteworthy comments related to abuse included:

- *Corruption and only one organization overseeing the program. Current government programs are not really run very well - there is so much red tape to work through - and it is very difficult to get the help that one needs.*
- *That it could turn out to be another scam to rob taxpayers and line the pockets of politicians.*

- *Mismanagement of public funds across various departments often plagues massive programs designed for nationwide implementation by governments.*
- *Payoffs, bribes, etc. Meaning the rich get whatever they need and the poor are stuck with whatever is left.*
- *Some people abuse the system, therefore making people in need of care suffer. I feel like it would be a struggle. I would need to be more educated on it before a formal decision.*

Theme 6: Access

Access was cited as a concern for a national health care coverage program by 39 respondents. Access most frequently occurred alongside themes of quality and government/system and was commonly associated with concerns about increased patient demands on the system resulting in lack of access to providers or longer wait times for appointments. There were also concerns raised about access related to medications and specialty services.

Noteworthy comments related to access included:

- *Shortage of medicines and equipment becomes likely when demand suddenly rises beyond what supply chains and budgets can realistically support.*
- *It would make the wait times to see not only doctors but specialist [sic] almost impossible.*
- *I'm worried that it will be more difficult to meet with healthcare providers, especially in emergencies.*
- *Older people would have a difficult time getting health care.*

“Other” Responses

There were 28 responses that did not align well with a primary theme and were categorized as “other.”

Noteworthy responses included:

- *I just hope they don't make it one of those things that is forced on people. It should always be optional.*
- *I'm concerned with stupid people raging about it because they grew u [sic] during the Cold War and think anything for the people is communism.*
- *Would be great and so much a month on a card to use with whatever you need.*
- *People could be less concerned about being proactive about healthy living because they know all they have to do is go to a doctor.*
- *It is a terrible idea, period.*
- *Everybody would run to the Doctor for every little thing.*