



CYGNAL

Texas, Ohio, Missouri, Arkansas Healthcare & Hospital Cost Research Initiative

April 2026 | Four-State Voter Survey (n=600 each)

The Opportunity in Four States

86-89%

Extremely / very concerned about
cost of healthcare

90-92%

Believe hospital costs are
getting higher

93%

Support requiring hospital
price transparency

What we learned across all four states:

- Cost anxiety is near-universal.
- Hospital systems have negative but moveable images.
- Messaging shifts blame attribution by 15-19 points away from insurance and toward hospitals, without touching pharma.
- Hospital systems are less defined than pharma or insurance, which makes them the target with the most room to move. The lane is wide open in every state.

How the Research Was Conducted

Texas

n = 600

Ohio

n = 600

Missouri

n = 600

Arkansas

n = 600

Methodology

Voters in Texas, Ohio, Missouri, and Arkansas. Identical script fielded in each state, so results are directly comparable.

Mixed-mode methodology weighted to reflect likely voter universe in each state. Margin of error $\pm 4.0\%$ at 95% confidence for each individual state sample.

All figures shown throughout this deck are weighted. Toplines and crosstabs delivered separately for each state.

Cost Concern Is Near-Universal

% Extremely or very concerned about the cost of healthcare

Texas

86%

56% extremely
30% very

Ohio

87%

60% extremely
27% very

Missouri

89%

59% extremely
30% very

Arkansas

85%

57% extremely
28% very

*Not a soft number. A mandate for action,
and the floor sits above 85% in every state tested.*

Voters Feel It In Their Wallets

Hospital cost direction and recent billing experience



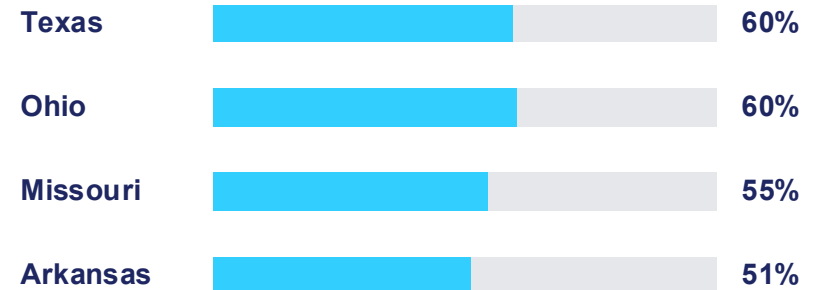
90-92%

Believe hospital costs are going higher



51-60%

Had a household hospital bill come in higher than expected in past year

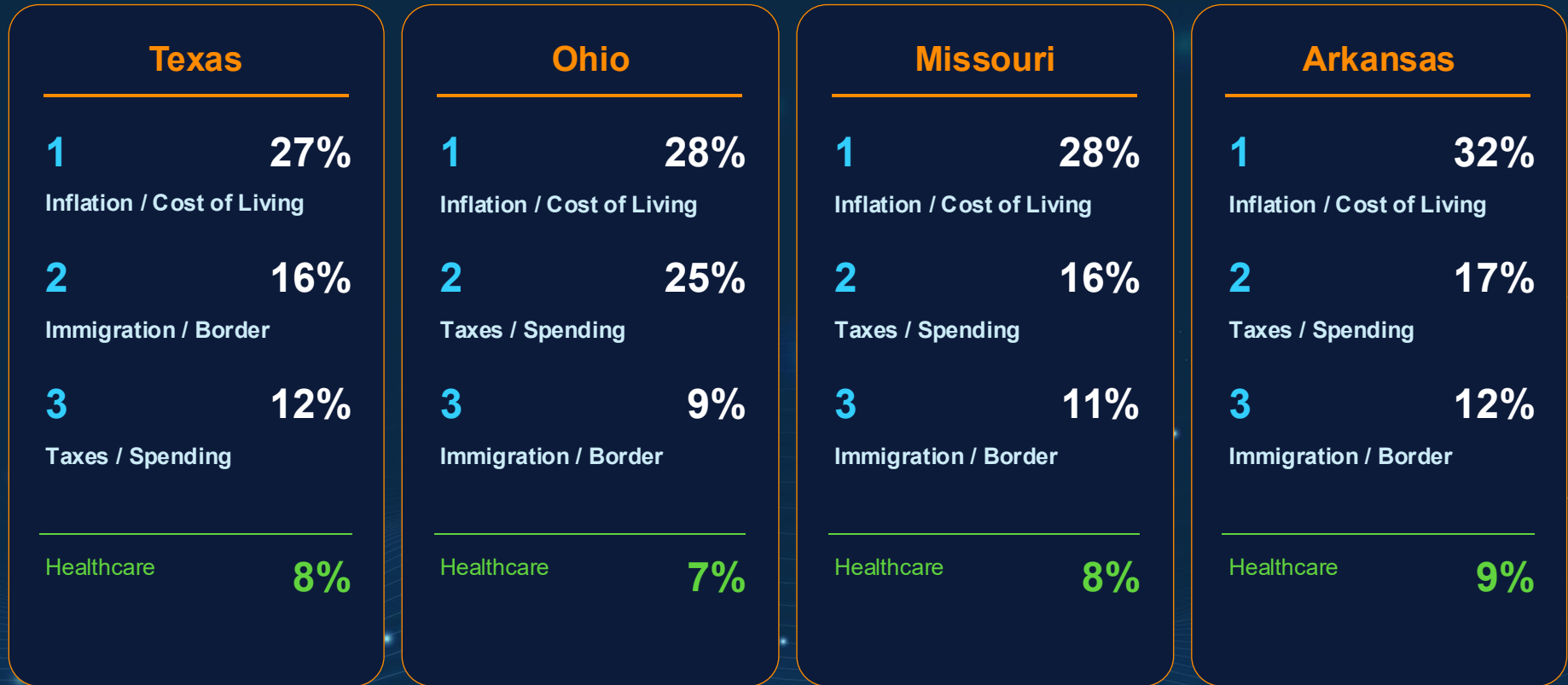


Urgency is not manufactured. It is already in the mail and in the statements.

Inflation Leads — Healthcare Sits Beneath It



Top issue priorities by state, plus healthcare's share



*Healthcare sits at 7-9% unprompted. That gap is the pivot.
Voters are already anchored on economic anxiety — we bring the healthcare story to them.*

Every Industry Target Is Underwater

Net favorable rating (% favorable minus % unfavorable), by industry and state

Pharma

-59 to -51

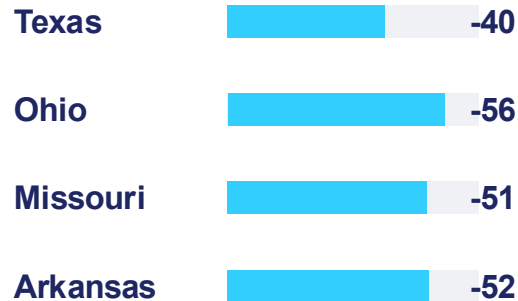
net favorability range



Insurance

-56 to -40

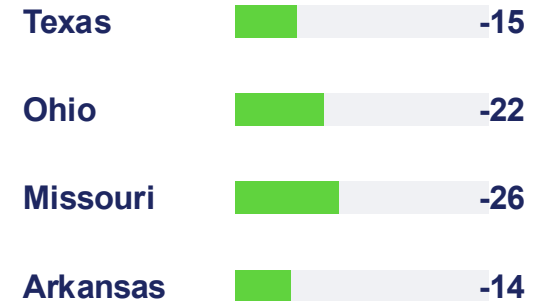
net favorability range



Hospital Systems

-26 to -14

net favorability range



Pharma and insurance are already convicted. Hospitals are underwater but less defined — the most room to move, especially in AR (-14) and TX (-16).

Hospital Systems Have Room to Move

Net favorability of hospital systems — less underwater than pharma or insurance, but still negative

Missouri

-26

24% fav | 51% unfav

Ohio

-22

24% fav | 47% unfav

Texas

-15

31% fav | 47% unfav

Arkansas

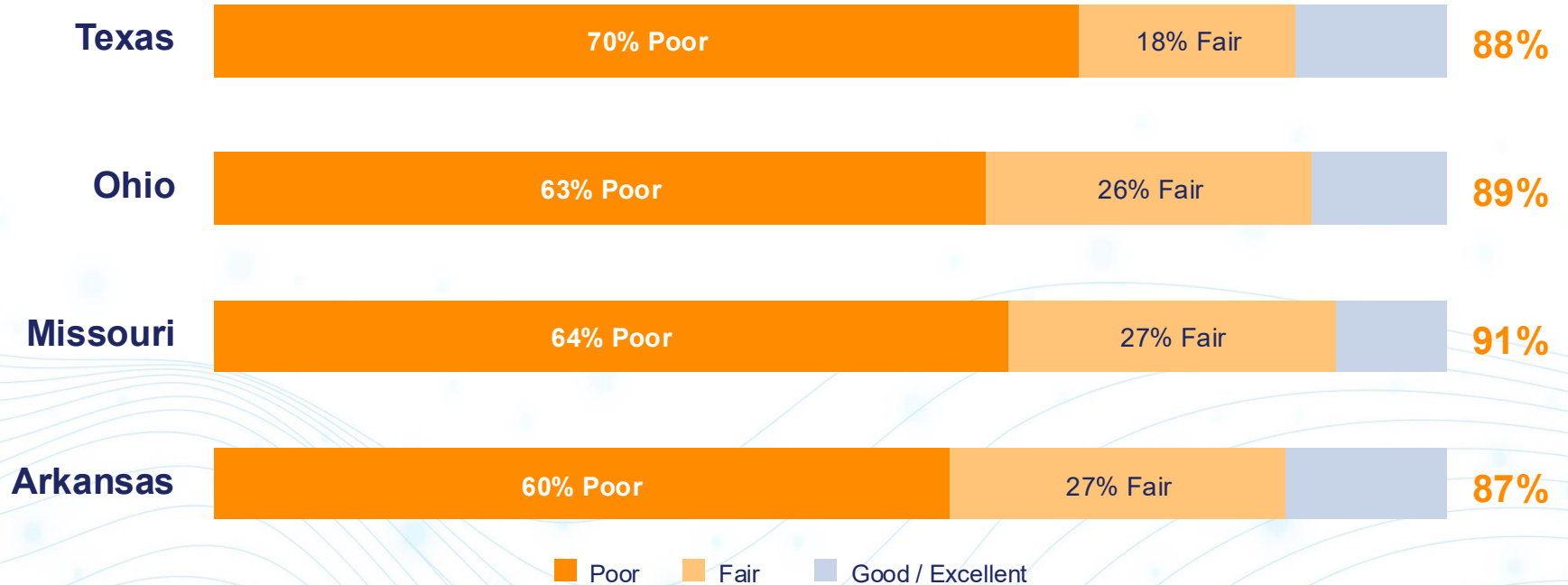
-14

30% fav | 45% unfav

*AR and TX hospital systems are the softest targets.
OH and MO have the deepest existing damage to build on.
Every state is winnable.*

Voters Say Hospitals Are Failing on Cost

% rating hospital job performance on keeping costs affordable as Poor or Fair



87-91% already rate hospitals Fair or Poor on affordability.
The foundation is laid. We add specificity.

Price Transparency Is the Universal Entry Point

% support requiring hospitals to disclose pricing



93%

support hospital price transparency. In every state. Without exception.

Texas

93%

80% strongly

Ohio

93%

76% strongly

Missouri

93%

77% strongly

Arkansas

93%

74% strongly

*Not a partisan issue. Not a geographic one. A consensus issue to build from,
and it keeps the fight on hospital behavior.*

Where Blame Starts: Insurance Takes the Hit

Pre-message: most responsible for increased hospital costs (% first-mention)

Category	Texas	Ohio	Missouri	Arkansas
Health Insurance Cos.	34%	35%	34%	34%
Overcharging	23%	21%	22%	18%
Exec Compensation	11%	12%	12%	12%
Hospital Systems	5%	8%	7%	8%
Pharma	6%	7%	7%	9%

*Before any messaging, insurance carries 34-35% of blame. Hospital systems sit at just 5-8%.
That is exactly the problem the messaging solves.*

After Messaging: Hospitals Enter the Picture

Post-message: most responsible for increased hospital costs (% first-mention)

Category	Texas	Ohio	Missouri	Arkansas
Health Insurance Cos.	23%	22%	23%	25%
Hospital Systems	19%	20%	19%	20%
Overcharging	17%	17%	19%	19%
Exec Compensation	15%	19%	17%	14%
Pharma	4%	4%	5%	5%

*Hospital systems triple or quadruple. Exec pay and overcharging absorb the rest.
Pharma barely moves.*

The Blame Redistribution Works

Before → After messaging, percentage point change by category

Texas	Ohio	Missouri	Arkansas
Insurance 34 → 23 -11	Insurance 35 → 22 -13	Insurance 34 → 23 -10	Insurance 34 → 25 -10
Hospital Sys. 5 → 19 +14	Hospital Sys. 8 → 20 +12	Hospital Sys. 7 → 19 +12	Hospital Sys. 8 → 20 +13
Exec Pay 11 → 15 +4	Exec Pay 12 → 19 +7	Exec Pay 12 → 17 +5	Exec Pay 12 → 14 +2
Overcharging 23 → 17 -6	Overcharging 21 → 17 -4	Overcharging 21 → 18 -3	Overcharging 18 → 19 +1
Pharma 6 → 4 -2	Pharma 7 → 4 -4	Pharma 7 → 5 -3	Pharma 8 → 5 -3

*Hospital-linked blame rises 16-19 points in every state.
The redistribution flows from insurance to hospital behaviors. Pharma is untouched.*

Fourteen Messages Built to Shift Blame

Message battery categories and strategic approach

ATTACK CATEGORIES

Financial Harm

Sue patients, garnish wages, aggressive collections

Pricing Games

Overcharge vs. independent clinics, ignore transparency law

Market Abuse

Buy up competitors, dominate local markets

Executive Greed

CEO pay 60x average worker

Tax Break Misuse

Billions in exemptions, no charity care delivered

Federal Program Abuse

Cash in on programs meant for vulnerable patients

Hidden Money

Offshore accounts

Cultural Flashpoint

Foreign national organ priority

HOW WE MEASURE EFFECTIVENESS

Shapley Values

Each message's marginal contribution to shifting blame toward hospitals, accounting for overlap with other messages.

Directional Coding

Uncompensated Care and Largest Employer are hospital-DEFENSE messages. Disbelief scores as "positive" toward the strategy.

By State and Group

Computed overall and by Party, Age, and Bill-Shocked. Different voters respond to different frames.

Outcome Variable

Post-message blame attribution to hospital systems, exec pay, overcharging, tax breaks, or lack of competition.

Top Messages by State, Ranked by Effectivity

Shapley value ranking of message contribution to shifting blame toward hospitals, overall voter universe



*Uncompensated Care and Largest Employer are hospital-defense messages. Disbelief = positive. Bar length shows relative effectivity vs. #1 in each state.

TX and AR have dominant winners. OH splits three ways. MO message effectiveness is deepest among federal-abuse and state-named targets.

Message Rankings Shift by Party

Top message by state and party — what works for one segment often fails for another

	Texas	Ohio	Missouri	Arkansas
Republicans	<ol style="list-style-type: none"> 1. Offshore Accounts 2. Anti-Memorial Hermann 3. Uncompensated Care* 	<ol style="list-style-type: none"> 1. Anti-Cleveland Clinic 2. Anti-Bon Secours Mercy Health 3. Abuse Federal Programs 	<ol style="list-style-type: none"> 1. Tax Breaks Abused 2. Abused Federal Programs 3. Overcharge vs. Clinics 	<ol style="list-style-type: none"> 1. Ignore Transparency Law 2. Buy Up Competitors 3. Foreign National Organs
Independents	<ol style="list-style-type: none"> 1. Foreign National Organs 2. Offshore Accounts 3. Anti-HCA Healthcare 	<ol style="list-style-type: none"> 1. Overcharge vs. Clinics 2. Largest Employer* 3. Abuse Federal Programs 	<ol style="list-style-type: none"> 1. Overcharge vs. Clinics 2. Abuse Federal Programs 3. Anti-SSM Health DePaul 	<ol style="list-style-type: none"> 1. Tax Breaks Abused 2. Abuse Federal Programs 3. Offshore Accounts
Democrats	<ol style="list-style-type: none"> 1. Foreign National Organs 2. Anti-HCA Healthcare 3. Anti-Baylor Scott & White 	<ol style="list-style-type: none"> 1. Foreign National Organs 2. Abuse Federal Programs 3. Ignore Transparency Law 	<ol style="list-style-type: none"> 1. Sue & Garnish Patients 2. Ignore Transparency Law 3. Foreign National Organs 	<ol style="list-style-type: none"> 1. Overcharge vs. Clinics 2. Uncompensated Care* 3. Tax Breaks Abused

Republicans respond to state-named targets and federal abuse. Independents pivot to pocketbook overcharges. Democrats go for process violations and cultural frames.

The Audiences That Matter Most

Top message by state — bill-shocked voters and age cuts

	Texas	Ohio	Missouri	Arkansas
Bill Shocked	<ol style="list-style-type: none"> 1. Foreign National Organs 2. Anti-HCA Healthcare 3. Buy Up Competitors 	<ol style="list-style-type: none"> 1. Foreign National Organs 2. Anti-Bon Secours Mercy Health 3. Sue & Garnish Patients 	<ol style="list-style-type: none"> 1. Anti-SSM St. Mary's 2. Abuse Federal Programs 3. Largest Employer* 	<ol style="list-style-type: none"> 1. Ignore Transparency Law 2. Anti-Baptist Health 3. Anti-CHI St. Vincent
Under 50	<ol style="list-style-type: none"> 1. Foreign National Organs 2. Tax Breaks Abused 3. Offshore Accounts 	<ol style="list-style-type: none"> 1. Overcharge vs. Clinics 2. Offshore Accounts 3. Foreign National Organs 	<ol style="list-style-type: none"> 1. Abuse Federal Programs 2. Anti-St. Luke's 3. Uncompensated Care* 	<ol style="list-style-type: none"> 1. Ignore Transparency Law 2. Anti-Baptist Health 3. Buy Up Competitors
50+	<ol style="list-style-type: none"> 1. Abuse Federal Programs 2. Foreign National Organs 3. CEO Pay 60x Workers 	<ol style="list-style-type: none"> 1. Anti-Cleveland Clinic 2. Offshore Accounts 3. Tax Breaks Abused 	<ol style="list-style-type: none"> 1. Anti-SSM Health St. Mary's 2. Overcharge vs. Clinics 3. Foreign National Organs 	<ol style="list-style-type: none"> 1. Overcharge vs. Clinics 2. Largest Employer* 3. Tax Breaks Abused

Bill-shocked voters respond to the most emotionally charged message available in their state. In TX and OH that's foreign national organ prioritization. In MO and AR it's the state-named targets because the state content itself is visceral. This is the audience most ready to act.

The Fraud Frame: Personal, Not Abstract



When voters hear hospitals may be misusing federal healthcare programs or billing improperly, their biggest concerns:

#1 Patients paying higher out-of-pocket costs **56%**

TX 56% · OH 60% · MO 52% · AR 58%

#2 Hospitals profiting instead of helping vulnerable patients **50%**

TX 48% · OH 51% · MO 53% · AR 48%

#3 Taxpayer dollars being wasted **33%**

TX 32% · OH 37% · MO 35% · AR 29%

*The reactions are personal — out-of-pocket hits, profit at patients' expense, care denied.
Not political. Visceral. Ours to use.*

Named Targets Carry Their Own Weight

State-specific hospital system messages and their believability



Texas

HCA Healthcare

63%

more likely to believe

Baylor Scott & White

64%

more likely to believe

Memorial Hermann

61%

more likely to believe

Ohio

Cleveland Clinic

69%

more likely to believe

OhioHealth

67%

more likely to believe

Bon Secours Mercy

67%

more likely to believe

Missouri

Saint Luke's KC

65%

more likely to believe

SSM Health St. Mary's

65%

more likely to believe

SSM Health DePaul

69%

more likely to believe

Arkansas

UAMS

70%

more likely to believe

CHI St. Vincent

57%

more likely to believe

Baptist Health

71%

more likely to believe

Named targets are credible across every state — voters already suspect these specific systems. Specificity wins.

The Bottom Line

Four takeaways to carry into strategy

1

The Environment Is Ready

Cost anxiety is above 85% in every state. Transparency support is 93% without exception. Voters arrive primed — we do not build urgency, we channel it.

2

Hospitals Are Reachable

Hospital system net image ranges from -14 (AR) to -27 (MO). Underwater but less defined than pharma or insurance. The most movable target.

3

Blame Redistributes Cleanly

Messaging shifts blame from insurance to hospital behaviors by 16-19 points in every state. Insurance drops, hospital systems triple, pharma untouched.

4

The Messages Differ by Audience

Republicans, Independents, Democrats, and bill-shocked voters each rank messages differently. Targeting matters. No single attack works everywhere.

***There is nothing in this data that should cause hesitation.
The ammo is here. The audience is ready.***