**340B Research 2024**

***Morning Consult, October 29-30, 2024***

*N = 1,796 registered voters*

* Now you will read more about the 340B Drug Pricing Program and critiques that have been made in recent years. Please indicate how concerning, if at all, each of the statements are about the 340B Drug Pricing Program.
  + The 340B program is a profit generator for large, for-profit pharmacy chains and hospitals. They are not passing along savings that they receive on medicines to vulnerable patients as the program intended.
    - Very concerning 44%
    - Somewhat concerning 24%
    - Not too concerning 8%
    - Not at all concerning 3%
    - Don’t know/no opinion 20%
  + Most pharmacies profiting from the 340B program are owned by pharmacy benefit manager (PBM) “middlemen.”
    - Very concerning 36%
    - Somewhat concerning 30%
    - Not too concerning 8%
    - Not at all concerning 4%
    - Don’t know/no opinion 22%
  + Research shows that hospital participation in the 340B program has not improved health outcomes for low-income patients.
    - Very concerning 43%
    - Somewhat concerning 28%
    - Not too concerning 7%
    - Not at all concerning 4%
    - Don’t know/no opinion 19%
  + 340B hospitals mark up the cost of medicines that they receive at a discount by as much as 6.6 times what independent physicians charge.
    - Very concerning 44%
    - Somewhat concerning 25%
    - Not too concerning 8%
    - Not at all concerning 3%
    - Don’t know/no opinion 20%
  + Only 35% of 340B hospitals and 23% of pharmacies involved in the 340B program are located in medically underserved areas.
    - Very concerning 36%
    - Somewhat concerning 33%
    - Not too concerning 8%
    - Not at all concerning 3%
    - Don’t know/no opinion 20%
  + Hospitals that participate in 340B are not-for-profit and do not pay taxes. However, many 340B hospitals pay their executives millions of dollars each year.
    - Very concerning 40%
    - Somewhat concerning 28%
    - Not too concerning 9%
    - Not at all concerning 4%
    - Don’t know/no opinion 19%
  + Even though 340B hospitals are meant to support underserved patients, many have been accused of aggressive debt collection practices against patients who are least able to afford care.
    - Very concerning 44%
    - Somewhat concerning 26%
    - Not too concerning 8%
    - Not at all concerning 3%
    - Don’t know/no opinion 20%
  + Hospital executives are using 340B to create new profit streams by buying up smaller non-340B hospitals and independent physician practices and marking up the cost of care.
    - Very concerning 41%
    - Somewhat concerning 28%
    - Not too concerning 8%
    - Not at all concerning 3%
    - Don’t know/no opinion 20%
  + An increasing number of hospitals are identifying as rural referral centers (RRCs) – so they can be eligible for the 340B program – even though they are not located in a rural community and have no obligation to treat rural patients.
    - Very concerning 38%
    - Somewhat concerning 30%
    - Not too concerning 9%
    - Not at all concerning 3%
    - Don’t know/no opinion 20%
* If you did not know, pharmacy benefit managers (PBMs) are intermediaries or “middlemen” between insurers, pharmacies, and drug manufacturers that manage prescription drug benefits on behalf of health plans. There are more than 85,000 contracts between a 340B provider and a pharmacy with financial ties to one of the three largest PBMs — CVS Health, Express Scripts and OptumRx. These contract pharmacies dispense medicines that 340B hospitals prescribe to patients, generating significant revenues from the safety-net program. Based on what you know, how much of a priority should it be, if at all, for Congress to address PBMs participating in the 340B Drug Pricing Program?
  + A top priority, 36%
  + Important but not top priority, 37%
  + Not a priority, 7%
  + Should not be done, 2%
  + Don’t know/no opinion, 17%
* Below are some potential ways to reform the 340B Drug Pricing Program. For each, please indicate if you support or oppose this proposal.
  + Increase transparency by allowing for audits on how hospitals and pharmacies are using the 340B program.
    - Strongly support, 47%
    - Somewhat support, 25%
    - Somewhat oppose, 6%
    - Strongly oppose, 3%
    - Don’t know/no opinion, 19%
  + Define in law who qualifies as a “340B patient,” so everyone is playing from the same rule book to ensure the right patients benefit from the program.
    - Strongly support, 45%
    - Somewhat support, 27%
    - Somewhat oppose, 6%
    - Strongly oppose, 3%
    - Don’t know/no opinion, 20%
  + Establish new requirements that ensure qualifying low income and uninsured patients benefit directly from 340B through reduced out-of-pocket costs for their medicines.
    - Strongly support, 44%
    - Somewhat support, 27%
    - Somewhat oppose, 6%
    - Strongly oppose, 2%
    - Don’t know/no opinion, 20%
  + Update flaws in the hospital eligibility requirements that currently allow large, wealthy hospital systems to pad their profits so that the 340B program serves true safety net hospitals and clinics.
    - Strongly support, 44%
    - Somewhat support, 26%
    - Somewhat oppose, 6%
    - Strongly oppose, 3%
    - Don’t know/no opinion, 21%

*Methodology:*

This poll was conducted between October 29-October 30, 2024 among a sample of 1796 Registered

Voters. The interviews were conducted online and the data were weighted to approximate a target

sample of Registered Voters based on gender by age, educational attainment, race, marital status,

home ownership, race by educational attainment, 2020 presidential vote, and region. Results from

the full survey have a margin of error of plus or minus 2 percentage points.

*\*Percentages may not add up to 100 due to rounding.*

***Patient Experience Survey, July 19-August 1, 2024***

*N = 2,592 adults ages 18+, including n=2,397 who are insured*

* Do you currently have any outstanding debt for medical expenses (money that you owe for health care services you could not afford at the time)?
  + Insured Americans (n=2,397)
    - Yes, 18%
    - No, 81%
  + Black Americans (n=264)
    - Yes, 33%
    - No, 67%
  + Chronic condition (n=833)
    - Yes, 24%
    - No, 76%
  + Household income less than $75K (n=936)
    - Yes, 24%
    - No, 75%
* Which health care expenses do you owe money for as part of your total outstanding medical debt?
  + Insured Americans with debt (n=424)
    - Hospital bills, 59%
    - Doctor bills, 54%
    - Diagnostic tests (e.g. x-rays, blood tests, etc.), 43%
    - Dental care, 18%
    - Prescription medicines, 9%
    - Some other type of medical service, 8%
    - None of the above, 4%
    - Nursing home or long-term care services, 1%
* Have any of the following happened to you or your family over the past year (12 months)?
  + Insured Americans taking Rx (n = 1,676)
    - Any Barrier To Access (Net), 41 %
    - Multiple Barriers To Access (Net), 18%
    - A medicine my doctor recommended or prescribed was not covered by my insurer (excluded from the “formulary”), 21%
    - I had to wait for my insurer to provide prior authorization for a medicine my doctor prescribed, 22%
    - I had to try and fail on another medicine before getting the medicine my doctor originally prescribed (also known as ‘step therapy’), 9%
    - I had to appeal a decision made by my insurer regarding a prescription medicine, 6%
    - My insurance company did not count copay assistance from a pharmaceutical company toward my deductible and annual maximum out-of-pocket costs (also known as an “accumulator adjustment program”), 5%
    - My insurance company set a maximum limit on the total amount of a prescription medication that could be dispensed at one time, 10%
    - None of the above, 59%
  + Neurologic (n=52)
    - Any barrier to access, 69%
  + Autoimmune (n=75)
    - Any barrier to access, 63%
  + Respiratory (n=81)
    - Any barrier to access, 62%
  + Mental Health (n=138)
    - Any barrier to access, 59%
* Thinking about the upcoming election, please indicate how important it is that candidates running for office are focused on addressing each of the following…
  + Insured Americans (n=2,397)
    - Reigning in costs (e.g., out-of-pocket costs, health care premiums, hospital services, prescription medicines)
      * Extremely important, 48%
      * Very important, 31%
      * Somewhat important, 15%
      * Not very important, 3%
      * Not at all important, 1%
      * Refused, 3%
    - Creating a more competitive health care market where patients have more health care providers to choose from and an easier time getting the health care they need
      * Extremely important, 36%
      * Very important, 32%
      * Somewhat important, 23%
      * Not very important, 4%
      * Not at all important, 2%
      * Refused, 3%
    - Working to address the issue of health care “consolidation,” where a few, large companies dominate the health care market
      * Extremely important, 38%
      * Very important, 30%
      * Somewhat important, 22%
      * Not very important, 5%
      * Not at all important, 2%
      * Refused, 3%
    - Improving access to preventive care
      * Extremely important, 48%
      * Very important, 31%
      * Somewhat important, 14%
      * Not very important, 2%
      * Not at all important, 1%
      * Refused, 3%
    - Improving access to mental health care
      * Extremely important, 51%
      * Very important, 27%
      * Somewhat important, 15%
      * Not very important, 3%
      * Not at all important, 2%
      * Refused, 3%
    - Addressing racial disparities in health care and outcomes
      * Extremely important, 38%
      * Very important, 24%
      * Somewhat important, 21%
      * Not very important, 8%
      * Not at all important, 7%
      * Refused, 3%
    - Reducing inefficiency and bureaucracy in the health system
      * Extremely important, 53%
      * Very important, 27%
      * Somewhat important, 15%
      * Not very important, 2%
      * Not at all important, 1%
      * Refused, 3%
* Below are some policies that the government could pursue to address health care costs. For each, please indicate whether you strongly support, somewhat support, somewhat oppose, or strongly oppose the policy…
  + Insured Americans (n=2,397)
    - Require hospitals and clinics to be more transparent about how much they mark-up the costs for prescription medicines
      * Strongly support, 70%
      * Somewhat support, 23%
      * Somewhat oppose, 4%
      * Strongly oppose, 1%
      * Refused, 3%
    - Crack down on abusive practices by PBMs and health plans like inappropriate fail first (step therapy) and prior authorization that can limit patient access to medicines
      * Strongly support, 64%
      * Somewhat support, 26%
      * Somewhat oppose, 4%
      * Strongly oppose, 1%
      * Refused, 5%
    - Require hospitals to use the discounts they receive on prescription medicines to help low-income and uninsured patients access the medicines they need instead of for other purposes
      * Strongly support, 57%
      * Somewhat support, 31%
      * Somewhat oppose, 7%
      * Strongly oppose, 2%
      * Refused, 3%
    - Drive greater oversight and transparency of safety net programs like 340B to ensure that hospitals and other entities are using drug discounts they receive to serve needy patients
      * Strongly support, 55%
      * Somewhat support, 33%
      * Somewhat oppose, 5%
      * Strongly oppose, 1%
      * Refused, 5%

*Methodology:*

The survey was conducted July 19th – August 1st, 2024 by Ipsos using the probability-based KnowledgePanel®. The survey is based on a nationally representative probability sample of 2,592 adults aged 18 or older. The sample included 2,397 respondents who reported being insured, with in-depth findings across certain patient populations, demographics, geographic areas and disease states.

*\*Percentages may not add up to 100 due to rounding.*