

Access Denied: Patients Speak Out on Health Insurance Barriers and the Need for Policy Change

Key Findings

Americans are experiencing access and affordability challenges within the health care system, and specifically, insurer- and pharmacy benefit manager (PBM)-imposed hurdles. The comprehensive Patient Experience Survey (PES) from PhRMA/Ipsos reports that patients demand greater urgency in making meaningful strides toward affordable health care.

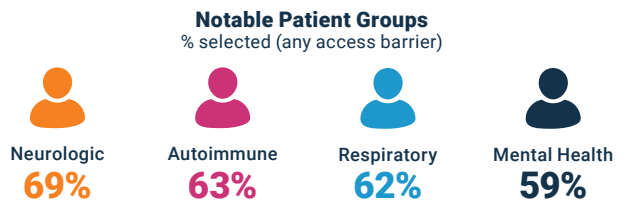
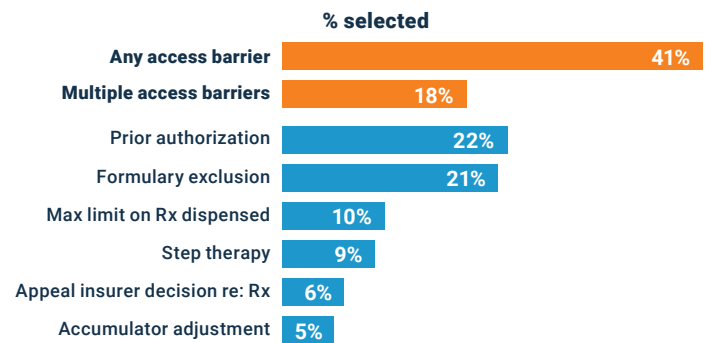
With only about one in four (28%) insured Americans believing insurance currently provides everyone with affordable access to health care when it's needed, Americans have consensus that policymakers need to help improve the patient experience in health care.

Even with insurance, Americans face abusive insurer and PBM practices that limit patient access to medicines.

- Four in 10 (41%) insured Americans taking a prescription medicine have experienced insurer- and PBM-imposed barriers to care like prior authorization or step therapy.
- Roughly half can't anticipate what they'll pay for their prescriptions (51%) and have trouble understanding their health insurance coverage (45%).
 - Insured Americans aged 18-44 can't anticipate what they'll pay (54%) and have trouble understanding (51%).

Out-of-pocket costs and medical debt are driving financial insecurity for many insured Americans.

- Out-of-pocket costs are the top health care issue for insured Americans (32% selected).
- A third of insured Americans (33%) say their out-of-pocket costs for health care services have increased over the past year; the number is higher for prescription medicine out-of-pocket costs (38%). And of those who report difficulty affording their out-of-pocket costs, deductibles are the main driver.
- Affordability can also impact adherence. A quarter (25%) of insured Americans taking a prescription medicine report they did not take their medication in the last year due to not being able to afford it; insurance-related barriers stand in the way.
- One in five (18%) report the burden of medical debt, accumulated through hospital (59%), doctor (54%) and diagnostic testing (43%) bills.

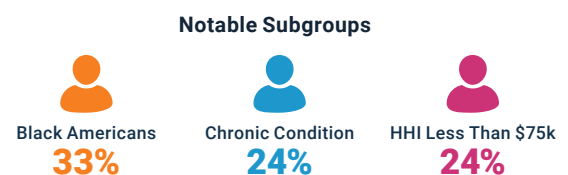


Q: Have any of the following happened to you or your family over the past year (12 months)?

Source: Patient Experience Survey, October 2024 N = 1,676 insured Americans taking Rx

Debt

18%
% "yes" to having any outstanding debt for medical expenses

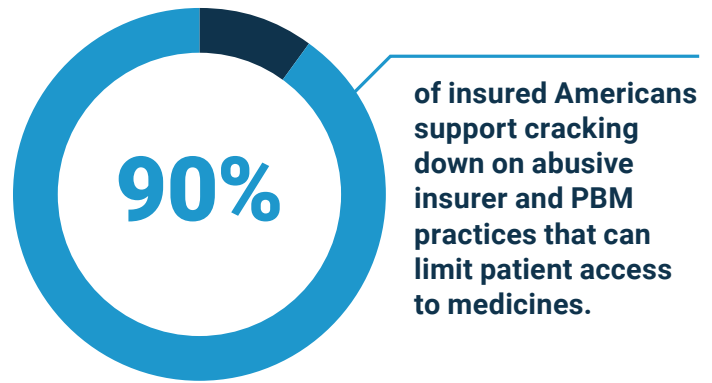


Q: Do you currently have any outstanding debt for medical expenses?

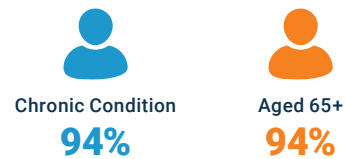
Source: Patient Experience Survey, October 2024 N = 2,397 insured Americans and N = 424 insured Americans with debt

Across demographics, insured Americans want to see increased accountability and transparency across health care and lower patient out-of-pocket costs.

- Given access hurdles, it’s no surprise there is widespread support (90%) for cracking down on abusive insurer and PBM practices that can limit patient access to medicines.
- Insured Americans’ preferred solutions focus on addressing out-of-pocket costs by reducing the burden of deductibles (34%) and having limits on out-of-pocket costs (34%).
- Strong support for other policy solutions to address out-of-pocket costs include requiring health insurers and PBMs to pass on any rebates or discounts, so patients pay less out of pocket for their medicines (91%).



Notable Subgroups



Q: 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... 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.

Source: Patient Experience Survey, October 2024 (N=2,397 insured Americans)

About the Patient Experience Survey

PhRMA’s Patient Experience Survey (PES) is a research initiative to explore the challenges Americans face as they navigate the health care system. The poll was conducted among 2,592 American adults (age 18 or older), including 2,397 with insurance, from July 19 – August 1, 2024, using Ipsos’ probability-based KnowledgePanel®, and it is representative of the American adult population. The margin of sampling error is plus or minus 1.5 percentage points at the 95% confidence level, for results based on the entire sample of adults.

Access Denied: Patients Speak Out on Health Insurance Barriers and the Need for Policy Change is the fifth report of the PES. This report details access and affordability challenges – specifically, insurer- and PBM-imposed hurdles – and patients’ desired solutions around accountability, transparency and lower out-of-pocket costs.

The full methodology and detailed findings can be found at [ipsos.com](https://www.ipsos.com) and for more on the patient experience, visit [phrma.org](https://www.phrma.org).

