



**TO:** PhRMA  
**FR:** Morning Consult  
**DT:** July 2024  
**RE:** 50-state poll results

Morning Consult ran a poll, on behalf of PhRMA, focusing on health care issues and potential policy solutions that states could enact to tackle health care cost and affordability challenges. This poll was conducted from May 13 – May 19, 2024, among a national sample of 20,089 adults. The interviews were conducted online.

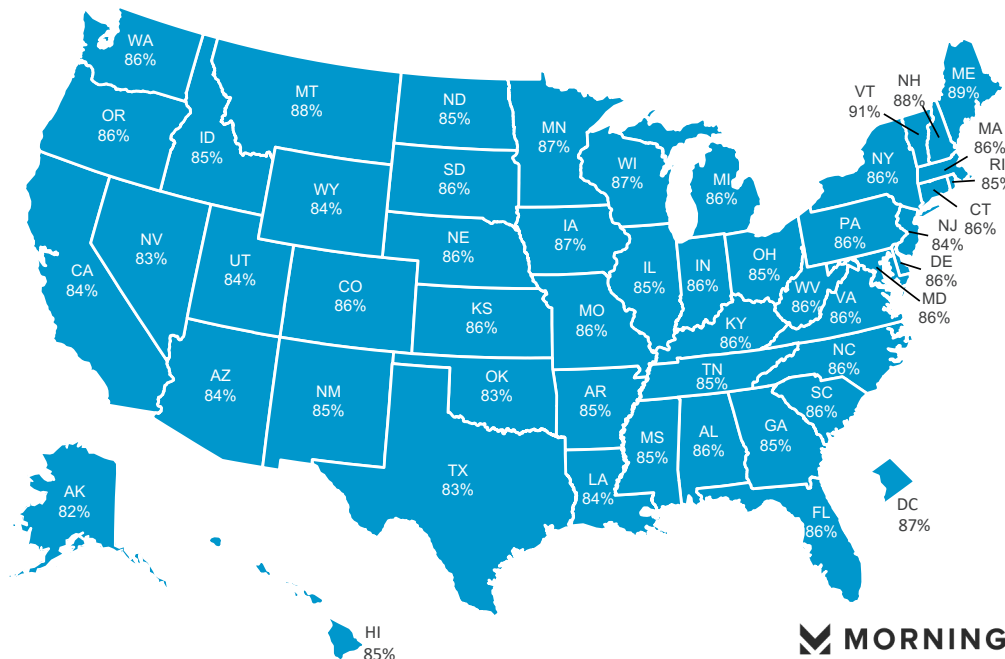
**KEY FINDINGS**

- Nearly all adults, across all states, agree that lowering out-of-pocket costs for health care should be a top priority for policymakers.
- Three-in-five adults reject government price setting of medicines, such as prescription drug affordability boards, once they learn about tradeoffs.
- Adults across all states express concerns about middlemen, like pharmacy benefit managers, once they learn about their business practices and their impact on patients accessing and affording their prescription medicines.
- A strong majority of adults support policymakers holding health insurance companies and PBMs accountable and shifting savings to patients directly.

**DETAILED FINDINGS – HEALTH CARE PRIORITIES**

- 86% of adults agree that lowering out-of-pocket costs for health care should be a top priority for policymakers (59% *strongly agree*).
- Two-in-three (68%) adults believe that health insurance coverage getting more expensive and covering less is a larger problem than the cost of prescription drugs.

*The map below shows total agreement (strongly + somewhat) that lowering out-of-pocket costs should be a top priority for policymakers.*

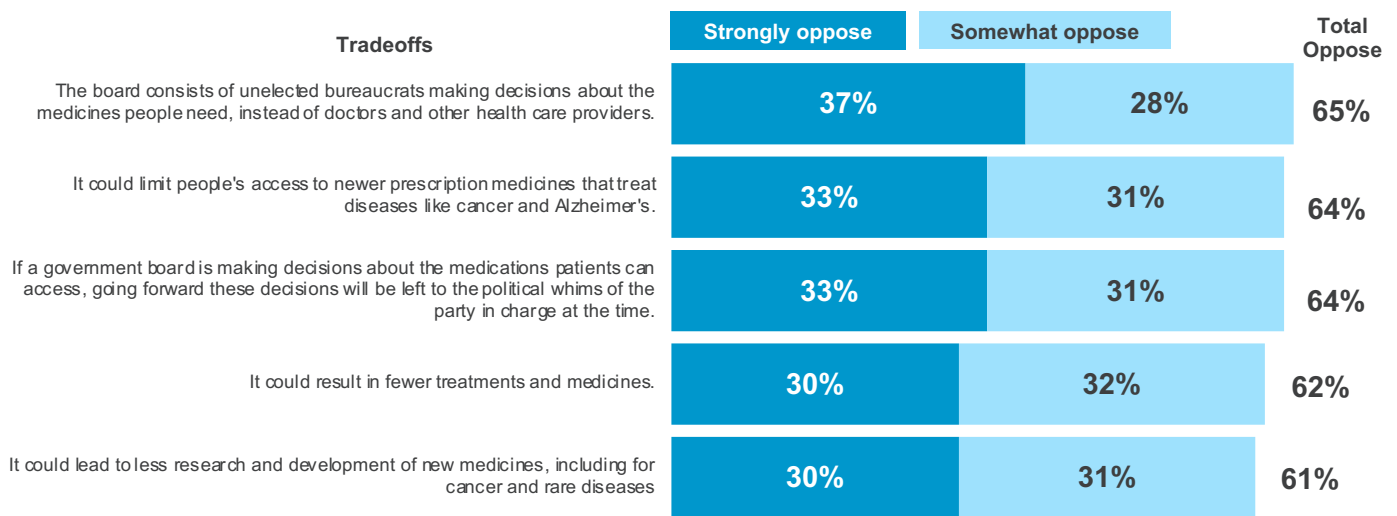


- 84% of adults agree that policymakers should focus on cracking down on abusive health insurance practices that make it harder to get the care they need (56% *strongly agree*).

Adults express concerns for other actors in the health care industry, such as insurance company middlemen, also called pharmacy benefit managers (PBMs) that impact patients access to prescription medicines.

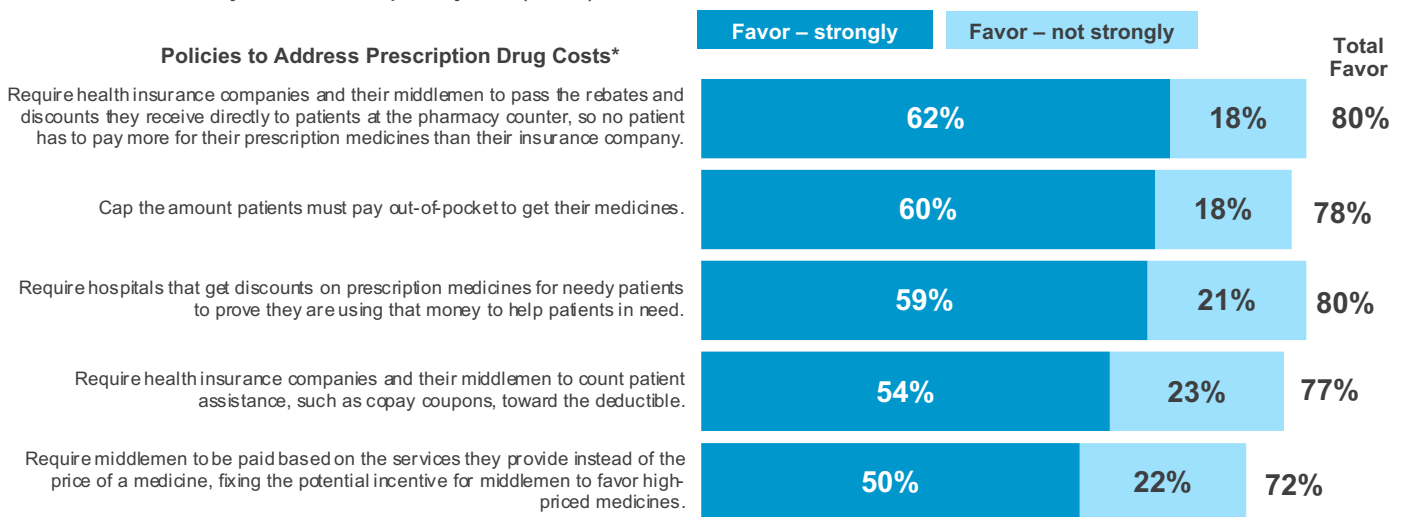
**DETAILED FINDINGS – POLICY SOLUTIONS**

- At least three-in-five adults *oppose* drug price setting policies, such as prescription drug affordability boards (PDAB), once they learn more information on the policies and are presented with tradeoffs such as the board consisting of unelected bureaucrats making decisions about the medicines people need instead of doctors and other health care providers (65%).



Numbers shown reflect total national sample

- When asked about policy solutions that their state could pursue to address prescription drug costs, strong majorities of adults *favor* laws that would require require health insurance companies and their middlemen to pass rebates and discounts directly to patients at the pharmacy counter (80%), and to require all health insurance plans to cover certain medications used to treat chronic conditions from day one of the plan year (80%).



Numbers shown reflect total national sample

\*Not all policies tested are shown in policy chart

## DETAILED FINDINGS – INSURANCE BARRIERS TO HEALTH CARE

- Over half (54%) of adults have experienced at least one of the following insurance barriers:

Insurance Barriers (% experience)	
A medicine my doctor recommended or prescribed was not covered by my insurer (excluded from the 'formulary')	20%
I had to wait for my insurer to provide prior authorization for a medicine my doctor prescribed	20%
I've received a surprise medical bill from a hospital for something that I thought would be covered by my insurance but wasn't	17%
My insurance company set a maximum limit on the total amount of a prescription medication that could be dispensed at one time	12%
I had to try and fail on another medicine before getting the medicine my doctor originally prescribed (also known as 'step therapy')	10%
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 'accumulator adjustment program')	10%
I was forced to fill my prescription at a new pharmacy determined by my insurance, instead of the pharmacy I normally use	9%
I had to appeal a decision made by my insurer regarding a prescription medicine	7%

## DETAILED FINDINGS – CONCERN FOR PHARMACY BENEFIT MANAGERS

- When it comes to questions about pharmacy benefit managers (PBMs):
  - 60% find it *very concerning* PBMs "operate with little to no transparency or accountability."
  - 59% find it *very concerning* that "the three largest PBMs are under investigation by the FTC and state regulators for potential anticompetitive behavior and their role in driving up costs for patients."
  - 57% find it *very concerning* that "just three PBMs control eighty percent of the U.S. prescription drug market."
  - 56% find it *very concerning* PBMs "negotiate discounts that can reduce the cost of some medicines by up to 80 percent, but they often don't share those savings with patients at the pharmacy."
  - 56% find it *very concerning* PBMs "profit off of financial assistance that is intended to help patients afford the medicine they need, or block people from using this assistance altogether."
  - 56% find it *very concerning* that "over half of every dollar spent on medicines goes to PBMs, payers and other stakeholders, not the companies who made them."
- Three-in-five (62%) adults are more likely to support a policymaker who worked on solutions that targeted PBMs and worked to lower out-of-pocket health care costs for patients.

## DETAILED FINDINGS – INDUSTRY AND INVESTMENT IN INNOVATION

- 81% agree that having a strong and innovative pharmaceutical industry in the U.S. is important for discovering future treatments, cures, and vaccines.
- 79% of adults agree we need to encourage pharmaceutical companies to continue investing in research and development by strengthening incentives for creating new medicines and treatments.

*National Methodology: This poll was conducted between May 13-May 19, 2024 among a sample of 20,089 Adults. The interviews were conducted online and the data were weighted to approximate a target sample of adults based on age, gender, race, educational attainment, region, gender by age, and race by educational attainment. Results from the full survey have a margin of error of plus or minus 1 percentage points.*

*State Methodology: State level findings are based on a model known as multi-level regression with post-stratification (MRP), where strata are based on census data, and results are adjusted to mirror demographics of each state.*