



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

Morning Consult ran a poll, on behalf of PhRMA, that examines adults' perception of practices that health insurance companies and their middlemen, also known as pharmacy benefit managers (PBMs), use to impact access and affordability for patients. This poll was conducted from May 13 – May 19, 2024, among a national sample of 20,089 adults. The interviews were conducted online.

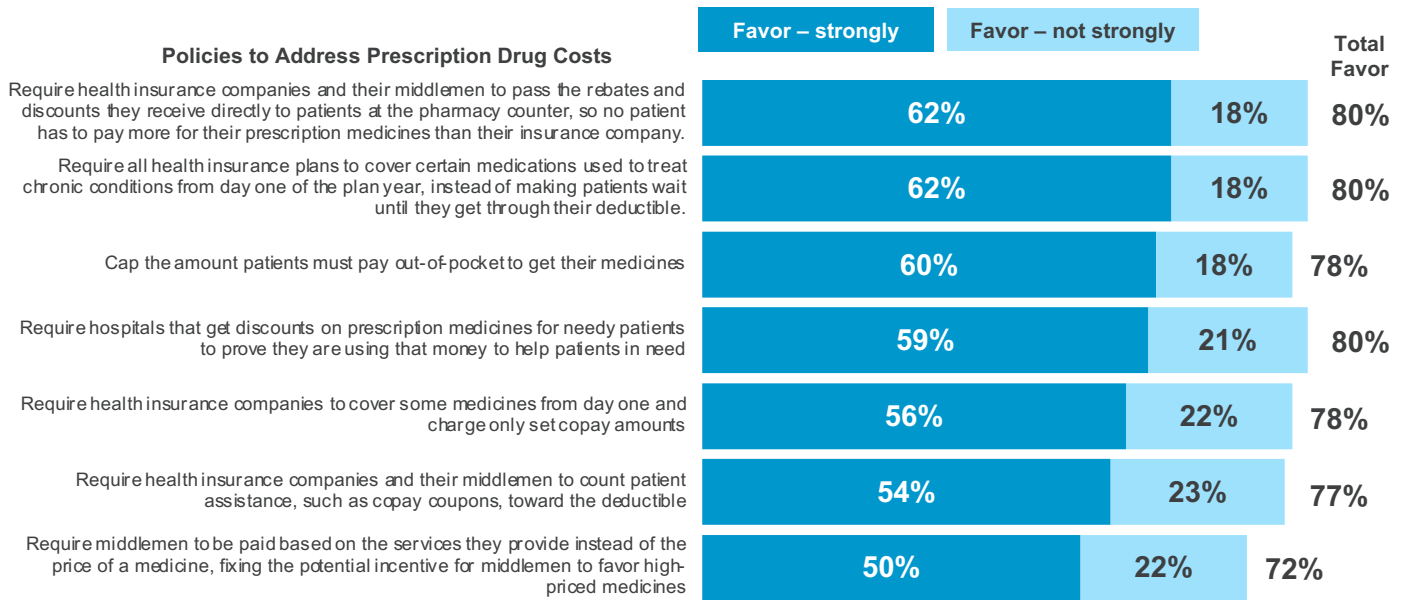
KEY FINDINGS

- Adults express concerns about insurance company middlemen, like pharmacy benefit managers (PBMs), once they learn about their business practices and their impact on patients accessing and affording their prescription medicines.

PBM Facts and Business Practices	Very concerning	Somewhat concerning	Total Concern
PBMs operate with little to no transparency or accountability	60%	22%	82%
Over half of every dollar spent on medicines goes to PBMs, payers and other stakeholders, not the companies who made them	56%	26%	82%
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	59%	22%	81%
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%	25%	81%
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%	25%	81%
PBMs influence what medicines patients get and control what patients pay at the pharmacy	55%	26%	81%
PBMs can steer people toward pharmacies they own that make them more money	55%	26%	81%
PBMs are paid based on the price of a medicine rather than only on the value of their services. Experts have noted this may incentivize PBMs to favor higher-priced medicines over lower-cost alternatives that could save patients money	55%	26%	81%
Just three PBMs control eighty percent of the U.S. prescription drug market	57%	23%	80%

- There is a bipartisan agreement that policymakers should focus on cracking down on pharmacy benefit managers (PBMs) and their business practices. Notably, 84% of adults agree that policymakers should focus on cracking down on abusive practices by health insurance companies and other middlemen that make it harder to get the care we need (56% strongly agree).
 - Democrats – 88% agree (62% strongly agree)
 - Independents – 79% agree (52% strongly agree)
 - Republicans – 85% agree (54% strongly agree)
- 83% 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 (55% strongly agree).
 - Democrats – 88% agree (63% strongly agree)
 - Independents – 77% agree (49% strongly agree)
 - Republicans – 84% agree (53% strongly agree)

- When asked about policy solutions that their state could pursue to address prescription drug costs, a strong bipartisan 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%).



- 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.

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.