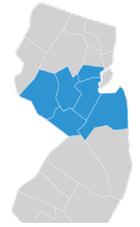




DATA BRIEF NO. 71 | AUGUST 2020

Central New Jersey: 45% of Adults Experienced Healthcare Affordability Burdens in the Past Year



According to a survey of New Jersey adults, conducted from May 7, 2020 to May 12, 2020, residents of the Central New Jersey region have experienced high levels of healthcare affordability burdens. These burdens were somewhat lower than those experienced by Northern and Southern New Jersey, but still, almost half of Central New Jersey adults (45%) experienced one or more of the following healthcare affordability burdens in the prior 12 months.

1) BEING UNINSURED DUE TO HIGH PREMIUM COSTS¹

2) DELAYING OR FORGOING HEALTHCARE DUE TO COST

Four out of ten Central New Jersey adults (40%) who needed healthcare during the prior 12 months encountered one or more cost-related barriers to getting that care:

- 25%—Skipped needed dental care
- 21%—Delayed going to the doctor or having a procedure done
- 16%—Skipped a recommended medical test or treatment
- 14%—Avoided going to the doctor or having a procedure done altogether
- 14%—Cut pills in half or skipped doses of medicine
- 11%—Had problems getting mental healthcare and/or addiction treatment
- 10%—Did not fill a prescription

Moreover, cost was by far the most frequently cited reason for not getting needed medical care, exceeding a host of other barriers like transportation, difficulty getting an appointment and lack of childcare.

3) STRUGGLING TO PAY MEDICAL BILLS

In the prior 12 months, nearly a quarter of Central New Jersey adults (23%) experienced one or more of these struggles to pay their medical bills:

- 7%—Used up all or most of their savings
- 6%—Racked up large amounts of credit card debt
- 6%—Borrowed money, got a loan or another mortgage on their home
- 5%—Placed on a long-term payment plan
- 5%—Contacted by a collection agency
- 5%—Were unable to pay for basic necessities like food, heat or housing

HIGH LEVELS OF WORRY ABOUT AFFORDING HEALTHCARE IN THE FUTURE

Residents of Central New Jersey also reported high levels of worry about affording healthcare in the future. Three-quarters of respondents (75%) reported being “worried” or “very worried” about one or more of the following topics: health insurance becoming too expensive (64%); affording nursing home and home care services (62%); costs when elderly (57%); cost of a serious illness or accident (55%); cost of needed dental care (53%); prescription drug costs (48%); and losing health insurance (37%).

DISSATISFACTION WITH THE HEALTH SYSTEM AND SUPPORT FOR CHANGE

Residents of Central New Jersey were extremely dissatisfied with the health system. Seven in ten (70%) agreed or strongly agreed that “*the system needs to change*,” while just 28% agreed or strongly agreed that “*we have a great healthcare system in the U.S.*”

Respondents do see a role for themselves in solving problems. They reported actions they have already taken, like researching the cost of a drug beforehand (53%), as well as actions they should be taking—65% believed that taking better care of their personal health is one of the top things they can do personally to address affordability.

But, in far greater numbers, they saw a role for their elected representatives. Examples of strategies that received support across party lines included (Total/Republican/Democrat/Neither):

- Make it easy to switch insurers if a health plan drops your doctor—(93%/92%/93%/94%)
- Show what a fair price would be for specific procedures—(92%/95%/92%/89%)
- Require hospitals and doctors to provide up-front cost estimates to consumers—(92%/88%/93%/94%)
- Require insurers to provide up-front cost estimates to consumers—(92%/88%/93%/94%)

The high burden of healthcare affordability, along with high levels of support for change, suggest that elected leaders and other stakeholders need to make addressing the cost of healthcare a top priority. Annual surveys can help assess whether or not progress is being made.

NOTE

1. We received too few responses at the regional level to provide a reliable estimate for this statistic, but these respondents are included in the overall “burdened” population.

For survey methodology and state-wide data, see www.healthcarevaluehub.org/New-Jersey-Healthcare-Survey



ABOUT ALTARUM'S HEALTHCARE VALUE HUB

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