



DATA BRIEF NO. 131 | OCTOBER 2022

## Maryland Residents Worried about High Drug Costs; Support a Range of Government Solutions

According to a survey of more than 1,300 Maryland adults, conducted from July 6 to July 20, 2022, respondents are concerned about prescription drug costs and express a strong desire for policymakers to enact solutions.

Nearly half (49%) of survey respondents reported being somewhat or very worried about affording the cost of prescription drugs. Worry varied substantially by income group, with respondents in households earning less than \$50,000 per year<sup>1</sup> reporting the most worry (see Figure 1). However, it is important to note that large percentages of households higher up the income spectrum also reported worrying about affording prescription drugs.

**Figure 1**  
**Somewhat or Very Worried About Affording Prescription Drugs, by Income Group**



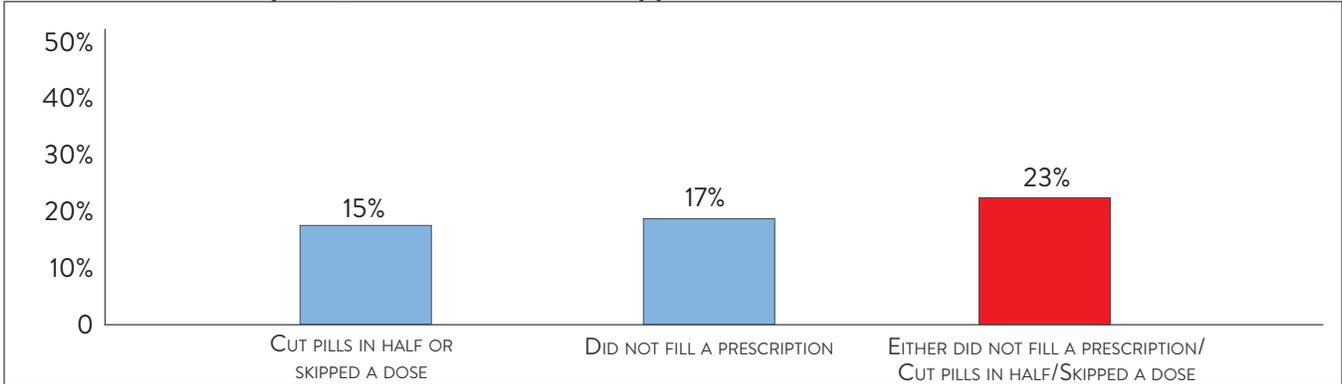
Source: 2022 Poll of Maryland Adults, Ages 18+, Altarum Healthcare Value Hub's Consumer Healthcare Experience State Survey

In addition to being worried about prescription drug affordability in the future, many Maryland respondents have experienced hardship in the prior 12 months due to the cost of prescription drugs. Indeed, nearly 1 in 4 Maryland respondents (23%) did not fill a prescription, cut pills in half or skipped a dose of medicine due in the last year due to cost (see Figure 2).

These hardships disproportionately impact people in lower-income households. As Table 1 shows, respondents living in households earning less than \$50,000 per year reported higher rates of rationing their prescription medicines (by not filling a prescription, cutting pills in half or skipping a dose of medicine) than respondents living in higher-income households. These hardships were alarmingly prevalent in middle-income households, as well. Respondents purchasing health insurance on their own, as well as those with Maryland Medicaid, reported the highest rates of rationing

**Figure 2**

**Did not Fill a Prescription, Cut Pills in Half or Skipped a Dose Due to Concerns About Cost**



Source: 2022 Poll of Maryland Adults, Ages 18+, Altarum Healthcare Value Hub's Consumer Healthcare Experience State Survey

**Table 1**

**Maryland Respondents with Drug Affordability Issues, by Income Group, Race/Ethnicity, Insurance Type and Disability Status**

	CUT PILLS IN HALF OR SKIPPED A DOSE	DID NOT FILL A PRESCRIPTION	EITHER DID NOT FILL A PRESCRIPTION/ CUT PILLS IN HALF/OR SKIPPED A DOSE
<b>INCOME</b>			
LESS THAN \$50k	20%	21%	30%
\$50k - \$75k	17%	21%	28%
\$75k - \$100k	18%	20%	28%
MORE THAN \$100k	9%	11%	16%
<b>RACE/ETHNICITY</b>			
PEOPLE OF COLOR	18%	20%	29%
WHITE	14%	16%	22%
HISPANIC/LATINX	16%	15%	23%
NON-HISPANIC/LATINX	14%	17%	23%
<b>INSURANCE TYPE</b>			
HEALTH INSURANCE THROUGH MY EMPLOYER OR A FAMILY MEMBER'S EMPLOYER	12%	14%	20%
HEALTH INSURANCE I PURCHASE ON MY OWN	23%	18%	32%
MEDICARE, COVERAGE FOR SENIORS AND THOSE WITH SERIOUS DISABILITIES	13%	15%	19%
MARYLAND MEDICAID, COVERAGE FOR LOW-INCOME PEOPLE	21%	23%	32%
<b>DISABILITY STATUS</b>			
HOUSEHOLD DOES NOT INCLUDE A PERSON WITH AT LEAST ONE DISABILITY	10%	14%	18%
HOUSEHOLD INCLUDES A PERSON WITH AT LEAST ONE DISABILITY	28%	39%	47%

Source: 2022 Poll of Maryland Adults, Ages 18+, Altarum Healthcare Value Hub's Consumer Healthcare Experience State Survey

medication compared to other insurance types. Finally, respondents living in households with a person with a disability reported notably higher rates of rationing medication due to cost in the past 12 months compared to respondents without a disabled household member.

In light of these prescription drug cost concerns—as well as concerns about high healthcare costs generally<sup>2</sup>—it is not surprising that Maryland respondents were generally dissatisfied with the health system:

- Just **33%** agreed or strongly agreed that “we have a great healthcare system in the U.S.,”
- While **72%** agreed or strongly agreed that “*the system needs to change.*”

When given more than 20 options, the options cited most frequently as being a “major reason” for high healthcare costs were:

- **74%**—Drug companies charging too much money
- **71%**—Insurance companies charging too much money
- **70%**—Hospitals charging too much money

When it comes to tackling high drug costs, Maryland respondents endorsed a number of prescription drug-related strategies:

- **90%**—Require drug companies to provide advanced notice of price increases and information to justify those increases
- **90%**—Authorize the Attorney General to take legal action to prevent price gouging or unfair prescription drug price hikes
- **89%**—Set standard prices for drugs to make them affordable
- **88%**—Cap out-of-pocket costs for life-saving medications, such as insulin
- **88%**—Prohibit drug companies from charging more in the U.S. than abroad
- **88%**—Create a Prescription Drug Affordability Board to examine the evidence and establish acceptable costs for drugs

Moreover, there is substantial support for government action on drug costs regardless of the respondents’ political affiliation (see Table 2).

While Maryland respondents are united in calling for the government to address high drug costs, they also see a role for themselves:

- **74%** would switch from a brand name to an equivalent generic drug if given a chance
- **50%** have tried to find out the cost of a drug beforehand

Respondents reported strong opinions on whether they would vote for a candidate who supports creating a Prescription Drug Affordability Board—a popular policy across the state’s political spectrum (see Table 3). Seventy-four percent of respondents reported that they would likely vote for the Democratic candidate in their legislative district if this candidate supported Prescription Drug Affordability Board legislation. Interestingly, it seems that some respondents feel so strongly about Prescription Drug Affordability Board legislation that they would consider crossing party lines—forty-seven percent of respondents who reported that they were likely to vote Democrat in the next election also reported that they would likely vote for the Republican candidate in their legislative

**Table 2**  
**Percent Who Agree/Strongly Agree, by Political Affiliation**

SELECTED SURVEY QUESTIONS/STATEMENTS	TOTAL	GENERALLY SPEAKING, DO YOU THINK OF YOURSELF AS...		
		REPUBLICAN	DEMOCRAT	NEITHER
MAJOR REASON FOR RISING HEALTHCARE COSTS: DRUG COMPANIES CHARGING TOO MUCH MONEY	74%	67%	77%	76%
THE GOVERNMENT SHOULD REQUIRE DRUG COMPANIES TO PROVIDE ADVANCED NOTICE OF PRICE INCREASES AND INFORMATION TO JUSTIFY THOSE INCREASES	90%	85%	92%	90%
THE GOVERNMENT SHOULD AUTHORIZE THE ATTORNEY GENERAL TO TAKE LEGAL ACTION TO PREVENT PRICE GOUGING OR UNFAIR PRESCRIPTION DRUG PRICE HIKES	90%	83%	94%	88%
THE GOVERNMENT SHOULD SET STANDARD PRICES FOR DRUGS TO MAKE THEM AFFORDABLE	89%	81%	93%	89%
THE GOVERNMENT SHOULD CAP OUT-OF-POCKET COSTS FOR LIFE-SAVING MEDICATIONS, SUCH AS INSULIN	88%	83%	91%	87%
THE GOVERNMENT SHOULD PROHIBIT DRUG COMPANIES FROM CHARGING MORE IN U.S. THAN ABROAD	88%	83%	92%	86%
THE GOVERNMENT SHOULD CREATE A PRESCRIPTION DRUG AFFORDABILITY BOARD TO EXAMINE THE EVIDENCE AND ESTABLISH ACCEPTABLE COSTS FOR DRUGS	88%	79%	93%	86%

Source: 2022 Poll of Maryland Adults, Ages 18+, Altarum Healthcare Value Hub's Consumer Healthcare Experience State Survey

**Table 3**  
**Likelihood of Voting for Democrat/Republican Candidates, Based on Candidates' Support for Prescription Drug Affordability Board Legislation**

	OF THOSE WHO REPORTED LIKELY TO VOTE DEMOCRAT IN THE NEXT ELECTION...	OF THOSE WHO REPORTED LIKELY TO VOTE REPUBLICAN IN THE NEXT ELECTION...
WOULD LIKELY TO VOTE FOR DEMOCRATIC CANDIDATE SUPPORTING PRESCRIPTION DRUG AFFORDABILITY BOARD LEGISLATION	96%	36%
WOULD LIKELY TO VOTE FOR REPUBLICAN CANDIDATE SUPPORTING PRESCRIPTION DRUG AFFORDABILITY BOARD LEGISLATION	47%	93%

Source: 2022 Poll of Maryland Adults, Ages 18+, Altarum Healthcare Value Hub's Consumer Healthcare Experience State Survey

district if this candidate supported Prescription Drug Affordability Board legislation. In addition, 36% of respondents who reported that they were likely to vote Republican in the next election also reported that they would likely vote for the Democratic candidate in their legislative district if this candidate supported Prescription Drug Affordability Board legislation.

## Conclusion

The high burden of healthcare and prescription drug affordability, along with high levels of support for change, suggest that elected leaders and other stakeholders need to make addressing this consumer burden a top priority. Moreover, the COVID crisis has led state residents to take a hard look at how well health and public health systems are working for them, with strong support for a wide variety of actions. Annual surveys can help assess whether or not progress is being made.

## Notes

1. Median household income in Maryland was \$87,063 (2016-2020). U.S. Census, *Quick Facts*. Retrieved from: [U.S. Census Bureau QuickFacts: Maryland](#)
2. For more detailed information about healthcare affordability burdens facing Maryland respondents, please see Healthcare Value Hub, [Maryland Residents Struggle to Afford High Healthcare Costs; Worry About Affording Healthcare in the Future; Support Government Action across Party Lines](#), Data Brief No. 130 (October 2022).



### ABOUT ALTARUM'S HEALTHCARE VALUE HUB

With support from the Robert Wood Johnson Foundation, the Healthcare Value Hub provides free, timely information about the policies and practices that address high healthcare costs and poor quality, bringing better value to consumers. The Hub is part of Altarum, a nonprofit organization with the mission of creating a better, more sustainable future for all Americans by applying research-based and field-tested solutions that transform our systems of health and healthcare.

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## Methodology

Altarum's Consumer Healthcare Experience State Survey (CHESS) is designed to elicit respondents' unbiased views on a wide range of health system issues, including confidence using the health system, financial burden and views on fixes that might be needed.

The survey used a web panel from Dynata with a demographically balanced sample of approximately 1497 respondents who live in Maryland. The survey was conducted in English or Spanish and restricted to adults ages 18 and older. Respondents who finished the survey in less than half the median time were excluded from the final sample, leaving 1,343 cases for analysis. After those exclusions, the demographic composition of respondents was as follows, although not all demographic information has complete response rates:

### Demographic Composition of Survey Respondents

DEMOGRAPHIC CHARACTERISTIC	FREQUENCY	PERCENTAGE
<b>HOUSEHOLD INCOME</b>		
Under \$20K	180	13%
\$20K - \$30K	103	8%
\$30K - \$40K	114	8%
\$40K - \$50K	99	7%
\$50K - \$60K	125	9%
\$60K - \$75K	117	9%
\$75K - \$100K	195	15%
\$100K - \$150K	253	19%
\$150K+	157	12%
<b>AGE</b>		
18-24	255	19%
25-34	312	23%
35-44	219	16%
45-54	188	14%
55-64	199	15%
65+	163	12%
<b>HEALTH STATUS</b>		
EXCELLENT	208	15%
VERY GOOD	483	36%
GOOD	458	34%
FAIR	167	12%
POOR	27	2%
<b>DISABILITY</b>		
MOBILITY: SERIOUS DIFFICULTY WALKING OR CLIMBING STAIRS	175	13%
COGNITION: SERIOUS DIFFICULTY CONCENTRATING, REMEMBERING OR MAKING DECISIONS	95	7%
INDEPENDENT LIVING: SERIOUS DIFFICULTY DOING ERRANDS ALONE, SUCH AS VISITING A DOCTOR'S OFFICE	82	6%
HEARING: DEAFNESS OR SERIOUS DIFFICULTY HEARING	66	5%
VISION: BLINDNESS OR SERIOUS DIFFICULTY SEEING, EVEN WHEN WEARING GLASSES	53	4%
SELF-CARE: DIFFICULTY DRESSING OR BATHING	52	4%
NO DISABILITY OR LONG-TERM HEALTH CONDITION	988	74%

DEMOGRAPHIC CHARACTERISTIC	FREQUENCY	PERCENTAGE
<b>GENDER</b>		
WOMAN	914	68%
MAN	408	30%
TRANSWOMAN	0	0%
TRANSMAN	2	<1%
GENDERQUEER/NONBINARY	13	1%
<b>INSURANCE TYPE</b>		
HEALTH INSURANCE THROUGH EMPLOYER OR FAMILY MEMBER'S EMPLOYER	615	46%
HEALTH INSURANCE I BUY ON MY OWN	129	10%
MEDICARE	242	18%
MARYLAND MEDICAID	242	18%
TRICARE/MILITARY HEALTH SYSTEM	24	2%
DEPARTMENT OF VETERANS AFFAIRS (VA) HEALTH CARE	10	1%
NO COVERAGE OF ANY TYPE	43	3%
I DON'T KNOW	38	3%
<b>RACE/ETHNICITY</b>		
AMERICAN INDIAN OR NATIVE ALASKAN	30	2%
ASIAN	58	4%
BLACK OR AFRICAN AMERICAN	363	27%
NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER	4	<1%
WHITE	866	64%
PREFER NOT TO ANSWER	39	3%
TWO OR MORE RACES	35	3%
HISPANIC OR LATINX - YES	166	12%
HISPANIC OR LATINX - NO	1,177	88%
<b>PARTY AFFILIATION</b>		
REPUBLICAN	320	24%
DEMOCRAT	625	47%
NEITHER	398	30%

Source: 2022 Poll of Maryland Adults, Ages 18+, Altarum Healthcare Value Hub's Consumer Healthcare Experience State Survey

Note: Percentages in the body of the brief are based on weighted values, while the data presented in the demographic table is unweighted, except for race/ethnicity data.

Note on comparisons: We do not conduct statistical calculations to determine the significance of differences in findings. Comparisons are for conversational purposes only and are determined by advocate partners in each state based on organizational/advocacy priorities. We do not report any estimates under N=100 and a co-efficient of variance more than .30.