



DATA BRIEF NO. 136 | NOVEMBER 2022

Washington Residents Worry About High Drug Costs; Support a Range of Government Solutions

A survey of more than 1,300 Washington adults, conducted from August 3, 2022 to August 16, 2022, found that Washington respondents are concerned about prescription drug costs and express a strong desire for policymakers to take action and enact policy solutions.

Key Findings

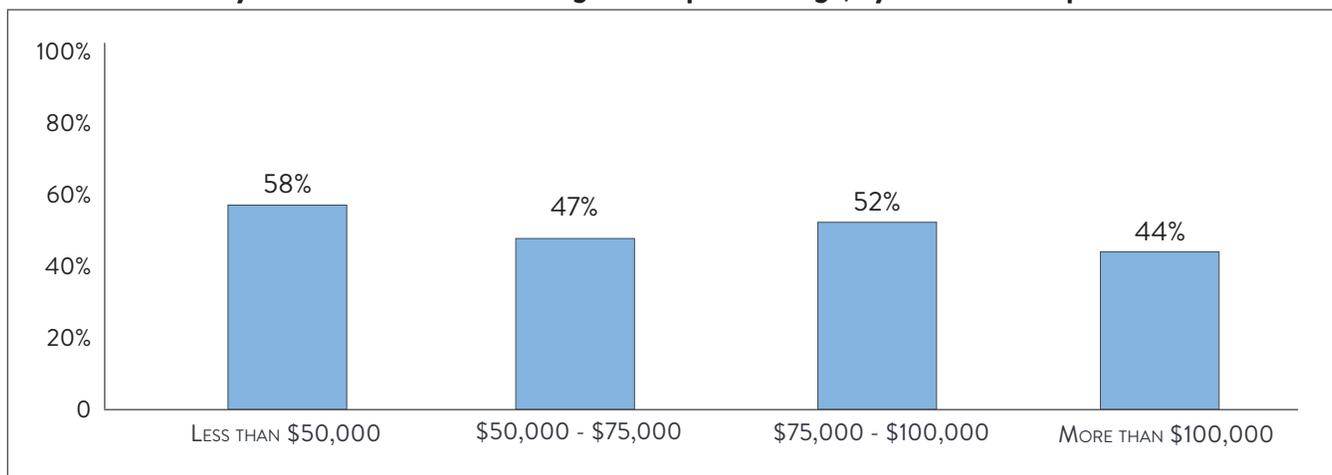
- Roughly 1 in 4 (27%) of respondents rationed medication due to cost;
- Half (50%) of respondents were worried about affording the cost of prescription drugs; and
- 76% of respondents said that drug companies charging too much money is a “major reason” for high healthcare costs

Half (50%) of survey respondents report being somewhat or very worried about affording the cost of prescription drugs. Worry about prescription drug prices varied substantially by income group, with respondents in households making less than \$50,000 per year¹ experiencing the most worry (see Figure 1). However, it is important to note that many households making more than \$50,000 per year also worry about affording prescription drugs.

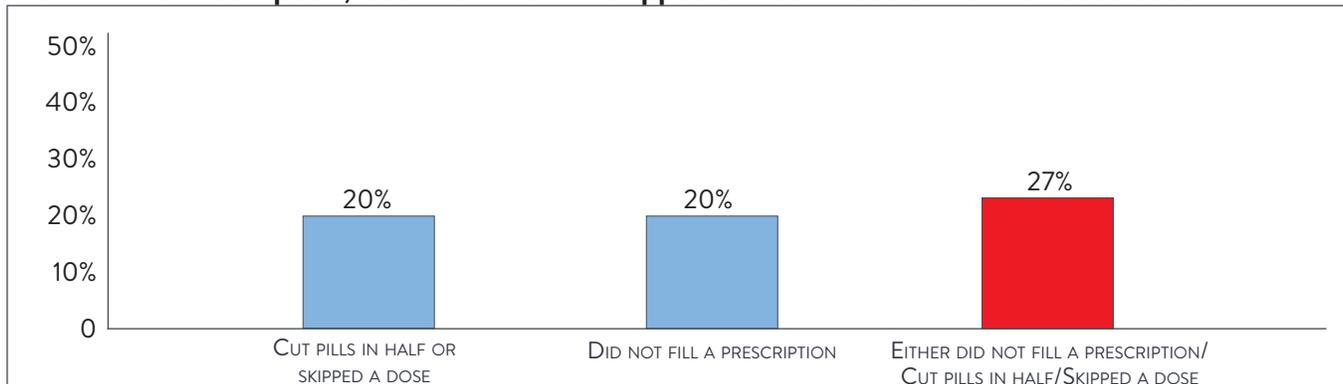
In addition to being worried about affording prescription drugs in the future, many Washington respondents have experienced hardship affording the cost of prescription drugs. Roughly 1 in 4 Washington respondents (27%) did not fill a prescription, cut pills in half or skipped a dose of medicine in the last year due to cost (see Figure 2).

Figure 1

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



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

Figure 2**Did not Fill a Prescription, Cut Pills in Half or Skipped a Dose Due to Concerns About Cost**

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

Different populations experienced greater prescription drug affordability challenges, shown in Table 1. Respondents living in households with a person with a disability reported notably higher rates of rationing medication due to cost (46%) in the past 12 months compared to respondents without a disabled household member (18%). Some people of color also reported higher prescription drug affordability challenges—Black/African American respondents (37%) and Hispanic/Latinx respondents (40%) reported higher rates of rationing their prescription medicines than other groups. Comparing across insurance types, respondents enrolled in Apple Health (Washington State's Medicaid plan for people with low incomes) reported the highest rates of rationing medication (37%) compared to other insurance types, but respondents with private health insurance also reported rationing medication as well (28%). By geographic area, respondents living in rural areas reported higher rates of rationing medication (37%) compared to those in non-rural areas (24%).

Finally, respondents living in households earning less than \$50,000 and those earning between \$75,000 and \$100,000 per year reported the highest rates of not filling a prescription, cutting pills in half or skipping a dose of medicine compared to respondents living in households earning greater than \$100,000 a year (see Table 1). However, these hardships are alarmingly prevalent in all income levels.

In light of these prescription drug cost concerns—as well as concerns about high healthcare costs generally²—it is not surprising that Washington respondents expressed dissatisfaction with the health system and recognized the need for improvement:

- Just 33% agreed or strongly agreed that “we have a great healthcare system in the U.S.,”
- While 73% agreed or strongly agreed that “the system needs to change.”

When given more than 20 options, respondents most frequently said that the “major reasons” for high healthcare costs were:

- 76%—Drug companies charging too much money
- 68%—Hospitals charging too much money
- 68%—Insurance companies charging too much money

Table 1**Washington Respondents with Drug Affordability Issues, by Income Group, Race/Ethnicity, Insurance Type, Disability Status and Geographic Setting**

	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
ALL RESPONDENTS	20%	20%	27%
INCOME			
LESS THAN \$50K	19%	22%	30%
\$50K - \$75K	15%	14%	22%
\$75K - \$100K	21%	27%	32%
MORE THAN \$100K	21%	19%	25%
ETHNICITY³			
HISPANIC/LATINX	31%	31%	40%
NON-HISPANIC/LATINX	18%	19%	25%
RACE³			
AMERICAN INDIAN OR NATIVE ALASKAN, ASIAN, NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER	20%	23%	28%
BLACK/AFRICAN AMERICAN	26%	29%	37%
WHITE	19%	20%	27%
INSURANCE TYPE			
HEALTH INSURANCE THROUGH MY EMPLOYER OR A FAMILY MEMBER'S EMPLOYER OR INSURANCE I BUY ON MY OWN	20%	21%	28%
MEDICARE, COVERAGE FOR SENIORS AND THOSE WITH SERIOUS DISABILITIES	14%	13%	20%
APPLE HEALTH, COVERAGE FOR LOW- INCOME PEOPLE	27%	29%	37%
DISABILITY STATUS⁴			
HOUSEHOLD DOES NOT INCLUDE A PERSON WITH AT LEAST ONE DISABILITY	12%	13%	18%
HOUSEHOLD INCLUDES A PERSON WITH AT LEAST ONE DISABILITY	35%	35%	46%
GEOGRAPHIC SETTING			
RURAL	28%	28%	37%
NON-RURAL	17%	18%	24%

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

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	76%	71%	80%	75%
THE GOVERNMENT SHOULD CAP OUT-OF-POCKET COSTS FOR LIFE-SAVING MEDICATIONS, SUCH AS INSULIN	92%	89%	94%	90%
THE GOVERNMENT SHOULD REQUIRE DRUG COMPANIES TO PROVIDE ADVANCED NOTICE OF PRICE INCREASES AND INFORMATION TO JUSTIFY THOSE INCREASES	91%	89%	93%	90%
THE GOVERNMENT SHOULD SET STANDARD PRICES FOR DRUGS TO MAKE THEM AFFORDABLE	91%	86%	94%	90%
THE GOVERNMENT SHOULD AUTHORIZE THE ATTORNEY GENERAL TO TAKE LEGAL ACTION TO PREVENT PRICE GOUGING OR UNFAIR PRESCRIPTION DRUG PRICE HIKES	89%	88%	91%	88%
THE GOVERNMENT SHOULD PROHIBIT DRUG COMPANIES FROM CHARGING MORE IN U.S. THAN ABROAD	89%	85%	93%	88%
THE GOVERNMENT SHOULD CREATE A PRESCRIPTION DRUG AFFORDABILITY BOARD TO EXAMINE THE EVIDENCE AND ESTABLISH ACCEPTABLE COSTS FOR DRUGS	88%	84%	93%	85%

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

When it comes to tackling high drug costs, Washington respondents endorsed several prescription drug-related strategies for policymakers:

- **92%**—Cap out-of-pocket costs for life-saving medications, such as insulin
- **91%**—Require drug companies to provide advanced notice of price increases and information to justify those increases
- **91%**—Set standard prices for drugs to make them affordable
- **89%**—Authorize the Attorney General to take legal action to prevent price gouging or unfair prescription drug price hikes
- **89%**—Prohibit drug companies from charging more in the U.S. than abroad

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

While Washington respondents across the political spectrum support the government taking action to address high drug costs, they also see a role for themselves:

- **72%** would switch from a brand name to an equivalent generic drug if given a chance
- **51%** have tried to find out the cost of a drug ahead of time

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 policy actions. Annual surveys can help assess whether progress is being made.

Notes

1. Median household income in Washington was \$77,006 (2016-2020). U.S. Census, *Quick Facts*. Retrieved from: [U.S. Census Bureau QuickFacts: Washington](#)
2. For more detailed information about healthcare affordability burdens facing Washington respondents, please see Healthcare Value Hub, [Washington Residents Struggle to Afford High Healthcare Costs; Worry About Affording Healthcare in the Future; Support Government Action Across Party Lines](#).
3. Regarding race/ethnicity categories, the survey separates Black/African American, Hispanic/Latinx and White respondents because there were at least 100 responses for each group. Rather than grouping and labeling the remaining respondents who were American Indian or Native Alaskan, Asian and Native Hawaiian or other Pacific Islander into an “Other” category, this brief instead listed them out together in a single remaining category.
4. Regarding disability status, respondents were asked if they or someone in their household identifies as having a disability or long-term health condition related to mobility, cognition, independent living, hearing, vision and self-care.



ABOUT ALTARUM'S HEALTHCARE VALUE HUB

With support from Arnold Ventures, 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.

This survey, conducted from August 3 to August 16, 2022, used a web panel from online survey company Dynata with a demographically balanced sample of approximately 1,502 respondents who live in Washington. Information about Dynata’s recruitment and compensation methods can be found here. 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 1,347 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
HOUSEHOLD INCOME		
Under \$20K	213	16%
\$20K - \$30K	129	10%
\$30K - \$40K	144	11%
\$40K - \$50K	110	8%
\$50K - \$60K	130	10%
\$60K - \$75K	131	10%
\$75K - \$100K	173	13%
\$100K - \$150K	190	14%
\$150K+	127	9%
AGE		
18-24	245	18%
25-34	296	22%
35-44	186	14%
45-54	173	13%
55-64	205	15%
65+	230	17%
HEALTH STATUS		
EXCELLENT	198	15%
VERY GOOD	429	32%
GOOD	443	33%
FAIR	213	16%
POOR	64	5%
DISABILITY		
MOBILITY: SERIOUS DIFFICULTY WALKING OR CLIMBING STAIRS	220	16%
COGNITION: SERIOUS DIFFICULTY CONCENTRATING, REMEMBERING OR MAKING DECISIONS	164	12%
INDEPENDENT LIVING: SERIOUS DIFFICULTY DOING ERRANDS ALONE, SUCH AS VISITING A DOCTOR’S OFFICE	124	9%
HEARING: DEAFNESS OR SERIOUS DIFFICULTY HEARING	127	9%
VISION: BLINDNESS OR SERIOUS DIFFICULTY SEEING, EVEN WHEN WEARING GLASSES	111	8%
SELF-CARE: DIFFICULTY DRESSING OR BATHING	85	6%
NO DISABILITY OR LONG-TERM HEALTH CONDITION	890	66%

DEMOGRAPHIC CHARACTERISTIC	FREQUENCY	PERCENTAGE
GENDER		
WOMAN	801	59%
MAN	516	38%
TRANSWOMAN	2	<1%
TRANSMAN	4	<1%
GENDERQUEER/NONBINARY	19	1%
INSURANCE TYPE		
HEALTH INSURANCE THROUGH EMPLOYER OR FAMILY MEMBER’S EMPLOYER	475	35%
HEALTH INSURANCE I BUY ON MY OWN	92	7%
MEDICARE	388	29%
APPLE HEALTH (MEDICAID)	264	20%
TRICARE/MILITARY HEALTH SYSTEM	31	2%
DEPARTMENT OF VETERANS AFFAIRS (VA) HEALTH CARE	17	1%
NO COVERAGE OF ANY TYPE	50	4%
I DON’T KNOW	30	2%
RACE/ETHNICITY		
AMERICAN INDIAN OR NATIVE ALASKAN	92	7%
ASIAN	96	7%
BLACK OR AFRICAN AMERICAN	126	9%
NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER	24	2%
WHITE	1,034	77%
PREFER NOT TO ANSWER	20	1%
TWO OR MORE RACES	75	6%
PARTY AFFILIATION		
REPUBLICAN	294	22%
DEMOCRAT	506	38%
NEITHER	547	41%
Geographic Setting		
Rural	339	25%
Non-Rural	1,008	75%

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

Percentages in the body of the brief are based on weighted values, while the data presented in the demographic table is unweighted. An explanation of weighted versus unweighted variables is [available here](#).

Altarum does not conduct statistical calculations on the significance of differences between groups in findings. Therefore, determinations that one group experienced a significantly different affordability burden than another should not be inferred. Rather, comparisons are for conversational purposes. The groups selected for this brief were selected 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 0.30.