



New Mexico Residents Struggle to Afford High Healthcare Costs, Particularly in Rural Areas

A survey of 1,170 New Mexico adults, conducted from July 16, 2021 to August 11, 2021, found that people living in rural areas of New Mexico experience greater healthcare affordability burdens than people living in non-rural areas of the state. Roughly 7 in 10 (72%) rural adults experienced one or more of the following healthcare affordability burdens in the prior 12 months, compared to 6 in 10 (61%) non-rural adults:

1) BEING UNINSURED DUE TO HIGH PREMIUM COSTS¹

2) DELAYING OR FORGOING HEALTHCARE DUE TO COST

Two-thirds (66%) of rural New Mexico adults encountered one or more cost-related barriers to getting healthcare during the prior 12 months, compared to 53% of non-rural New Mexico adults (see Table 1).

Table 1

Percent Delayed or Went Without Healthcare Due to Cost, by Rurality

	RURAL RESIDENTS	NON-RURAL RESIDENTS
SKIPPED NEEDED DENTAL CARE	38%	35%
AVOIDED GOING TO THE DOCTOR OR HAVING A PROCEDURE DONE ALTOGETHER	37%	29%
SKIPPED A RECOMMENDED MEDICAL TEST OR TREATMENT	35%	27%
DELAYED GOING TO THE DOCTOR OR HAVING A PROCEDURE DONE	31%	33%
HAD PROBLEMS GETTING MENTAL HEALTHCARE AND/OR ADDICTION TREATMENT	31%	23%
CUT PILLS IN HALF OR SKIPPED DOSES OF MEDICINE	30%	18%
DID NOT FILL A PRESCRIPTION	26%	19%

Source: 2021 Poll of New Mexico Adults, Ages 18+, Altarum Healthcare Value Hub's Consumer Healthcare Experience State Survey

Moreover, cost was by far the most frequently cited reason for not getting needed medical care for rural residents while non-rural residents most frequently cited difficulty getting an appointment as the reason for not receiving needed medical care. Cost and difficulty getting an appointment exceeded a host of other barriers like transportation and lack of childcare for both rural and non-rural New Mexico residents.

3) STRUGGLING TO PAY MEDICAL BILLS

Other times, New Mexico adults got the care they needed but struggled to pay the resulting bill. Half (50%) of rural New Mexico adults experienced one or more of the following struggles to pay their medical bills in the prior 12 months, compared to 34% of non-rural New Mexico adults (see Table 2).

Table 2
Percent Struggled to Pay Medical Bills, by Rurality

	RURAL RESIDENTS	NON-RURAL RESIDENTS
CONTACTED BY A COLLECTION AGENCY	23%	12%
BORROWED MONEY, GOT A LOAN OR ANOTHER MORTGAGE ON THEIR HOME	20%	10%
WERE UNABLE TO PAY FOR BASIC NECESSITIES LIKE FOOD, HEAT OR HOUSING	20%	9%
USED UP ALL OR MOST OF THEIR SAVINGS	18%	15%
RACKED UP LARGE AMOUNTS OF CREDIT CARD DEBT	17%	10%
WERE PLACED ON A LONG-TERM PAYMENT PLAN	17%	7%

Source: 2021 Poll of New Mexico Adults, Ages 18+, Altarum Healthcare Value Hub's Consumer Healthcare Experience State Survey

HIGH LEVELS OF WORRY ABOUT AFFORDING HEALTHCARE IN THE FUTURE

Large shares of both rural and non-rural residents reported high levels of worry about affording healthcare in the future. A slightly higher percentage of rural residents (**83%**) reported being “worried” or “very worried” about one of more of the following topics, while **78%** of non-rural residents reported being “worried” or “very worried” (see Table 3).

Table 3
Percent Worried or Very Worried, by Rurality

	RURAL RESIDENTS	NON-RURAL RESIDENTS
HEALTH INSURANCE BECOMING TOO EXPENSIVE	72%	63%
AFFORDING NURSING HOME AND HOME CARE SERVICES	70%	67%
COST OF A SERIOUS ILLNESS OR ACCIDENT	69%	66%
COSTS WHEN ELDERLY	66%	65%
COST OF NEEDED DENTAL CARE	63%	59%
PRESCRIPTION DRUG COSTS	59%	56%
LOSING HEALTH INSURANCE	46%	35%

Source: 2021 Poll of New Mexico Adults, Ages 18+, Altarum Healthcare Value Hub's Consumer Healthcare Experience State Survey

DISSATISFACTION WITH THE HEALTH SYSTEM AND SUPPORT FOR CHANGE

In light of these healthcare affordability concerns, it is not surprising that both rural and non-rural New Mexico residents reported being dissatisfied with the health system. Just **31%** of rural and **20%** of non-rural residents agreed or strongly agreed that “*we have a great healthcare system in the U.S.,*” while **65%** of rural and **72%** of non-rural residents agreed or strongly agreed that “*the system needs to change.*”

New Mexico adults also see a role for themselves in addressing healthcare affordability problems. Both rural and non-rural residents reported actions they have already taken, like researching the cost of a drug beforehand (**59%** of rural residents and **58%** of non-rural residents), as well as actions they should be taking. Sixty-three percent of rural adults and **68%** of non-rural adults believe that

Table 4
Percent Who Agreed/Strongly Agreed, by Rurality and Political Affiliation

	RURAL RESIDENTS				NON-RURAL RESIDENTS			
	TOTAL	REPUBLICAN	DEMOCRAT	NEITHER	TOTAL	REPUBLICAN	DEMOCRAT	NEITHER
"WE HAVE A GREAT HEALTHCARE SYSTEM IN THE U.S."	31%	47%	22%	19%	20%	36%	16%	16%
"THE U.S. HEALTHCARE SYSTEM NEEDS TO CHANGE"	65%	56%	73%	68%	72%	62%	80%	69%
THE GOVERNMENT SHOULD SHOW WHAT A FAIR PRICE WOULD BE FOR SPECIFIC PROCEDURES	92%	94%	95%	88%	94%	97%	93%	92%
THE GOVERNMENT SHOULD REQUIRE DRUG COMPANIES TO PROVIDE ADVANCED NOTICE OF PRICE INCREASES AND INFORMATION TO JUSTIFY THOSE INCREASES	91%	91%	94%	89%	91%	89%	92%	90%
THE GOVERNMENT SHOULD MAKE IT EASY TO SWITCH INSURERS IF A HEALTH PLAN DROPS YOUR DOCTOR	89%	88%	89%	89%	93%	94%	96%	90%

Source: 2021 Poll of New Mexico Adults, Ages 18+, Altarum Healthcare Value Hub's Consumer Healthcare Experience State Survey

taking better care of their personal health is one of the top things they can do personally to address affordability. Additionally, many said they would switch from a brand name to an equivalent generic drug if given a chance (77% of rural residents and 80% of non-rural residents).

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 healthcare costs a top priority. Moreover, the current COVID crisis is leading 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 (see Table 4). 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, however these respondents are represented in the overall "burdened" population.

For state-wide data, see www.healthcarevaluehub.org/New-Mexico-State-Survey.

Methodology

Altarum’s Consumer Healthcare Experience State Survey (CHES) 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 1,250 respondents who live in New Mexico. 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 1,170 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	222	19%
\$20K - \$30K	139	12%
\$30K - \$40K	99	8%
\$40K - \$50K	86	7%
\$50K - \$60K	95	8%
\$60K - \$75K	117	10%
\$75K - \$100K	156	13%
\$100K - \$150K	149	13%
\$150K+	107	9%
PARTY AFFILIATION		
REPUBLICAN	353	30%
DEMOCRAT	436	37%
NEITHER	381	33%
AGE		
18-24	187	16%
25-34	208	18%
35-44	144	12%
45-54	184	16%
55-64	230	20%
65+	183	16%
HEALTH STATUS		
EXCELLENT	140	12%
VERY GOOD	360	31%
GOOD	417	36%
FAIR	190	16%
POOR	63	5%

DEMOGRAPHIC CHARACTERISTIC	FREQUENCY	PERCENTAGE
GENDER		
MALE	471	40%
FEMALE	699	60%
INSURANCE STATUS		
HEALTH INSURANCE THROUGH EMPLOYER OR FAMILY MEMBER’S EMPLOYER	388	33%
HEALTH INSURANCE I BUY ON MY OWN	85	7%
MEDICARE	352	30%
MEDICAID (CENTENNIAL CARE)	196	17%
TRICARE/MILITARY HEALTH SYSTEM	32	3%
DEPARTMENT OF VETERANS AFFAIRS (VA) HEALTH CARE	29	2%
NO COVERAGE OF ANY TYPE	54	5%
I DON’T KNOW	34	3%
RACE/ETHNICITY		
AMERICAN INDIAN OR NATIVE ALASKAN	53	5%
ASIAN	20	2%
BLACK OR AFRICAN AMERICAN	57	5%
NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER	7	1%
WHITE	947	81%
PREFER NOT TO ANSWER	47	4%
TWO OR MORE RACES	26	2%
HISPANIC OR LATINO ORIGIN		
HISPANIC OR LATINO ORIGIN – YES	376	32%
HISPANIC OR LATINO ORIGIN - NO	794	68%

Source: 2021 Poll of New Mexico 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.



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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