









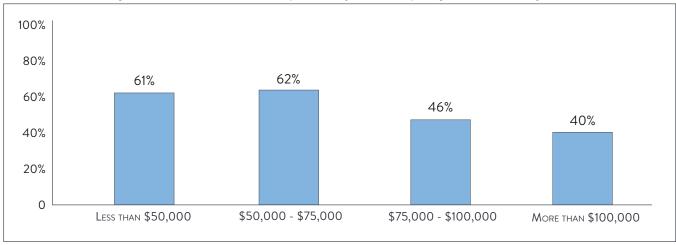
DATA BRIEF NO. 138 | JANUARY 2023

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

According to a survey of more than 1,110 Wisconsin adults, conducted from June 22, 2022, to July 6, 2022, respondents are concerned about prescription drug costs and express a strong desire for policymakers to enact solutions.

More than half (53%) of survey respondents reported being somewhat or very worried about affording the cost of prescription drugs. Worry varies substantially by income group, with respondents in households making less than \$75,000 per year¹ reporting the most worry (see Figure 1). However, it is important to note that a large percentage of households making above \$75,000 per year also reported worrying about affording prescription drugs.

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

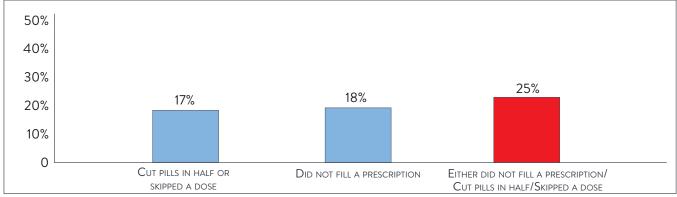


Source: 2022 Poll of Wisconsin Adults, Ages 18+, Altarum Healthcare Value Hub's Consumer Healthcare Experience State Survey

In addition to being worried about prescription drug affordability in the future, many Wisconsin respondents reported experiencing hardship in the prior 12 months due to the cost of prescription drugs. Indeed, 1 in 4 Wisconsin respondents (25%) reported that they 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 certain populations in Wisconsin. People in lower-income households, those with Wisconsin Medicaid and those who live in rural areas of the state all reported higher rates of rationing medications (see Table 1). Similarly, Hispanic/Latinx respondents, respondents of color and respondents with a household member with a disability also reported higher rates of rationing medications (see Table 2).

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



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

Table 1
Wisconsin Respondents with Drug Affordability Issues, by Income Group, Insurance Type and Geographic Setting

|   | CUT PILLS IN HALF OR SKIPPED A DOSE | DID NOT FILL A PRESCRIPTION | EITHER DID NOT FILL A PRESCRIPTION/<br>CUT PILLS IN HALF/OR SKIPPED A DOSE |
|---|-------------------------------------|-----------------------------|--|
| Інсоме  |                                     |                             |  |
| Less than \$50k   | 17%                                 | 20%                         | 25%  |
| \$50k - \$75k   | 17%                                 | 19%                         | 26%  |
| \$75k - \$100k  | 12%                                 | 16%                         | 20%  |
| More than \$100k  | 20%                                 | 14%                         | 27%  |
| Insurance Type  |                                     |                             |  |
| PRIVATE INSURANCE: EITHER HEALTH INSURANCE THROUGH MY EMPLOYER OR A FAMILY MEMBER'S EMPLOYER OR INSURANCE I BUY ON MY OWN | 18%                                 | 20%                         | 27%  |
| MEDICARE, COVERAGE FOR SENIORS AND THOSE WITH SERIOUS DISABILITIES  | 11%                                 | 12%                         | 17%  |
| Wisconsin Medicaid, Coverage for Low-Income People  | 25%                                 | 22%                         | 32%  |
| GEOGRAPHIC SETTING  |                                     |                             |  |
| Rural   | 21%                                 | 21%                         | 29%  |
| Non-Rural   | 16%                                 | 17%                         | 24%  |

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

Table 2
Wisconsin Respondents with Drug Affordability Issues, by Race/Ethnicity and Disability Status

|  | CUT PILLS IN HALF OR<br>SKIPPED A DOSE | DID NOT FILL A PRESCRIPTION | EITHER DID NOT FILL A PRESCRIPTION/<br>CUT PILLS IN HALF/OR SKIPPED A DOSE |
|--|--|-----------------------------|--|
| RACE AND ETHNICITY   |  |                             |  |
| People of Color  | 25%                                    | 28%                         | 37%  |
| White  | 16%                                    | 16%                         | 24%  |
| Hispanic/Latinx  | 28%                                    | 23%                         | 35%  |
| Non-Hispanic/Latinx  | 16%                                    | 17%                         | 24%  |
| DISABILITY STATUS  |  |                             |  |
| HOUSEHOLD DOES NOT INCLUDE A MEMBER WITH AT LEAST ONE DISABILITY | 12%                                    | 14%                         | 19%  |
| Household Include a Member with at<br>Least One Disability       | 29%                                    | 25%                         | 38%  |

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

As Table 1 shows, respondents living in households earning more than \$100,000 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 lower-income households. These hardships are alarmingly prevalent in middle-income households, as well. Respondents with Wisconsin Medicaid reported the highest rates of rationing medication compared to other insurance types, followed by those with private insurance. 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 (see Table 2).

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 Wisconsin respondents were generally dissatisfied with the health system:

- Just 34% agreed or strongly agreed that "we have a great healthcare system in the U.S.,"
- While 70% 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
- 70%—Hospitals charging too much money
- 64%—Insurance companies charging too much money

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

- 92%—Require drug companies to provide advanced notice of price increases and information to justify those increases
- 91%—Cap out-of-pocket costs for life-saving medications, such as insulin

- 91%—Authorize the Attorney General to take legal action to prevent price gouging or unfair prescription drug price hikes
- 90%—Set standard prices for drugs to make them affordable
- 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

Table 3
Percent Who Agree/Strongly Agree, by Political Affiliation

|  |       | GENERALLY SPEAKING, DO YOU THINK OF YOURSELF AS |          |         |
|--|-------|---|----------|---------|
| SELECTED SURVEY QUESTIONS/STATEMENTS   | TOTAL | REPUBLICAN                                      | DEMOCRAT | Neither |
| MAJOR REASON FOR RISING HEALTHCARE COSTS: DRUG COMPANIES CHARGING TOO MUCH MONEY   | 74%   | 74%   | 78%      | 71%     |
| The government should require drug companies to provide advanced notice of price increases and information to justify those increases      | 92%   | 92%   | 95%      | 87%     |
| The government should cap out-of-pocket costs for life-saving medications, such as insulin   | 91%   | 88%   | 96%      | 88%     |
| The government should authorize the Attorney General to take legal action to prevent price gouging or unfair prescription drug price hikes | 91%   | 92%   | 95%      | 86%     |
| The government should set standard prices for drugs to make them affordable  | 90%   | 87%   | 96%      | 87%     |
| The government should prohibit drug companies from charging more in U.S. than abroad   | 88%   | 84%   | 94%      | 85%     |
| The government should create a Prescription Drug Affordability  Board to examine the evidence and establish acceptable costs for drugs     | 88%   | 84%   | 95%      | 84%     |

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

Moreover, there is substantial support for government action on drug costs regardless of the respondents' political affiliation (see Table 3).

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

- 78% would switch from a brand name to an equivalent generic drug if given a chance
- 48% have tried to find out the cost of a drug beforehand

#### **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 Wisconsin was \$63,293 (2016-2020). U.S. Census, Quick Facts. Retrieved from: U.S. Census Bureau QuickFacts: Wisconsin
- 2. For more detailed information about healthcare affordability burdens facing Wisconsin respondents, please see Healthcare Value Hub, Wisconsin Residents Struggle to Afford High Healthcare Costs; Worry About Affording Healthcare in the Future; Support Government Action across Party Lines, Data Brief No. 137.











### **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.

Contact the Hub: 3520 Green Court, Suite 300, Ann Arbor, MI 48105 (734) 302-4600 | www.HealthcareValueHub.org | @HealthValueHub

## Methodology

The Altarum Healthcare Value Hub'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 1,196 respondents who live in Wisconsin. 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 1,113 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  | 187       | 17%        |
| \$20K - \$30K  | 135       | 12%        |
| \$30K - \$40K  | 117       | 11%        |
| \$40K - \$50K  | 132       | 12%        |
| \$50K - \$60K  | 137       | 12%        |
| \$60K - \$75K  | 122       | 11%        |
| \$75K - \$100K   | 122       | 11%        |
| \$100K - \$150K  | 104       | 9%         |
| \$150K+  | 57        | 5%         |
| AGE  |           |            |
| 18-24  | 216       | 20%        |
| 25-34  | 216       | 20%        |
| 35-44  | 163       | 15%        |
| 45-54  | 136       | 12%        |
| 55-64  | 228       | 21%        |
| 65+  | 142       | 13%        |
| HEALTH STATUS  |           |            |
| Excellent  | 120       | 11%        |
| Very Good  | 368       | 33%        |
| Good   | 385       | 35%        |
| FAIR   | 195       | 18%        |
| Poor   | 45        | 4%         |
| DISABILITY   |           |            |
| MOBILITY: SERIOUS DIFFICULTY WALKING OR CLIMBING STAIRS  | 187       | 17%        |
| COGNITION: SERIOUS DIFFICULTY CONCENTRATING, REMEMBERING OR MAKING DECISIONS                   | 119       | 11%        |
| INDEPENDENT LIVING: SERIOUS DIFFICULTY DOING ERRANDS ALONE, SUCH AS VISITING A DOCTOR'S OFFICE | 73        | 7%         |
| HEARING: DEAFNESS OR SERIOUS DIFFICULTY HEARING  | 80        | 7%         |
| Vision: Blindness or serious difficulty seeing, even when wearing glasses                      | 50        | 4%         |
| SELF-CARE: DIFFICULTY DRESSING OR BATHING  | 59        | 5%         |
| No disability or long-term health condition  | 757       | 68%        |

| DEMOGRAPHIC CHARACTERISTIC                                    | FREQUENCY | PERCENTAGE |
|---|-----------|------------|
| Gender  |           |            |
| Woman   | 717       | 64%        |
| Man   | 368       | 33%        |
| Transwoman  | 1         | <1%        |
| Transman  | 3         | <1%        |
| Genderqueer/Nonbinary   | 15        | 1%         |
| Insurance Type  |           |            |
| HEALTH INSURANCE THROUGH EMPLOYER OR FAMILY MEMBER'S EMPLOYER | 406       | 36%        |
| HEALTH INSURANCE I BUY ON MY OWN                              | 87        | 7%         |
| Medicare  | 295       | 27%        |
| Wisconsin Medicaid  | 232       | 21%        |
| TRICARE/MILITARY HEALTH SYSTEM                                | 13        | 1%         |
| DEPARTMENT OF VETERANS AFFAIRS (VA) HEALTH CARE               | 18        | 2%         |
| No coverage of any type                                       | 40        | 4%         |
| I don't know  | 26        | 2%         |
| RACE/ETHNICITY  |           |            |
| American Indian or Native Alaskan                             | 29        | 3%         |
| Asian   | 21        | 2%         |
| Black or African American                                     | 73        | 7%         |
| Native Hawaiian or Other Pacific Islander                     | 5         | <1%        |
| White   | 976       | 88%        |
| Prefer Not to Answer  | 21        | 2%         |
| Two or More Races   | 23        | 2%         |
| HISPANIC OR LATINX – YES                                      | 105       | 9%         |
| Hispanic or Latinx - No                                       | 1,008     | 91%        |
| PARTY AFFILIATION   | ,         |            |
| REPUBLICAN  | 287       | 26%        |
| DEMOCRAT  | 420       | 38%        |
| Neither   | 406       | 36%        |
| Geographic Setting  |           |            |
| Rural   | 223       | 20%        |
| Non-Rural   | 890       | 80%        |

Source: 2022 Poll of Wisconsin 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.

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. We do not report any estimates under N=100 and a co-efficient of variance more than 0.30.