



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 year¹ 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



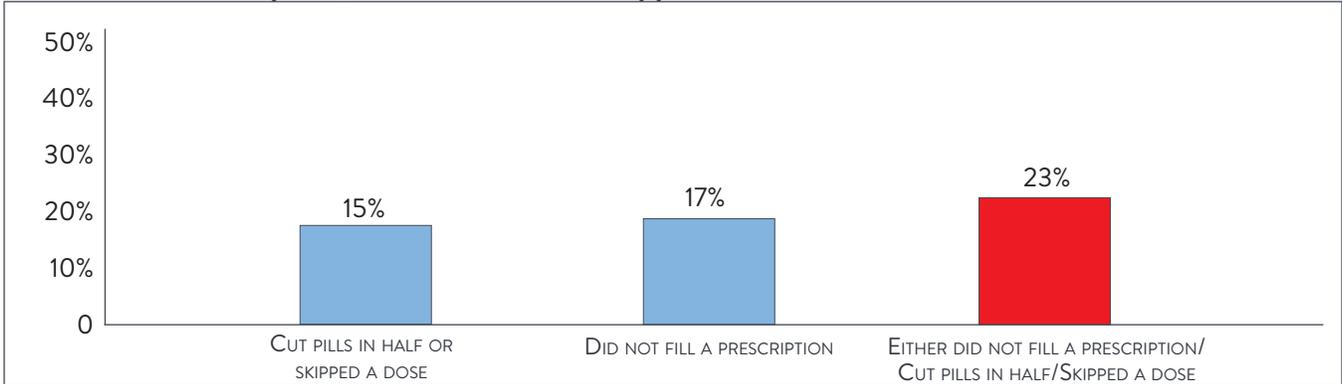
Source: 2022 Poll of Maryland Adults, Ages 18+, Altarum Healthcare Value Hub's Consumer Healthcare Experience State Survey

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 |
|--|-------------------------------------|-----------------------------|---|
| INCOME | | | |
| LESS THAN \$50K | 20% | 21% | 30% |
| \$50K - \$75K | 17% | 21% | 28% |
| \$75K - \$100K | 18% | 20% | 28% |
| MORE THAN \$100K | 9% | 11% | 16% |
| RACE/ETHNICITY | | | |
| PEOPLE OF COLOR | 18% | 20% | 29% |
| WHITE | 14% | 16% | 22% |
| HISPANIC/LATINX | 16% | 15% | 23% |
| NON-HISPANIC/LATINX | 14% | 17% | 23% |
| INSURANCE TYPE | | | |
| 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% |
| DISABILITY STATUS | | | |
| 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 generally²—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: <i>DRUG COMPANIES CHARGING TOO MUCH MONEY</i> | 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.

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

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 |
|--|-----------|------------|
| HOUSEHOLD INCOME | | |
| 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% |
| AGE | | |
| 18-24 | 255 | 19% |
| 25-34 | 312 | 23% |
| 35-44 | 219 | 16% |
| 45-54 | 188 | 14% |
| 55-64 | 199 | 15% |
| 65+ | 163 | 12% |
| HEALTH STATUS | | |
| EXCELLENT | 208 | 15% |
| VERY GOOD | 483 | 36% |
| GOOD | 458 | 34% |
| FAIR | 167 | 12% |
| POOR | 27 | 2% |
| DISABILITY | | |
| 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 |
|---|-----------|------------|
| GENDER | | |
| WOMAN | 914 | 68% |
| MAN | 408 | 30% |
| TRANSWOMAN | 0 | 0% |
| TRANSMAN | 2 | <1% |
| GENDERQUEER/NONBINARY | 13 | 1% |
| INSURANCE TYPE | | |
| 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% |
| RACE/ETHNICITY | | |
| 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% |
| PARTY AFFILIATION | | |
| 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.