



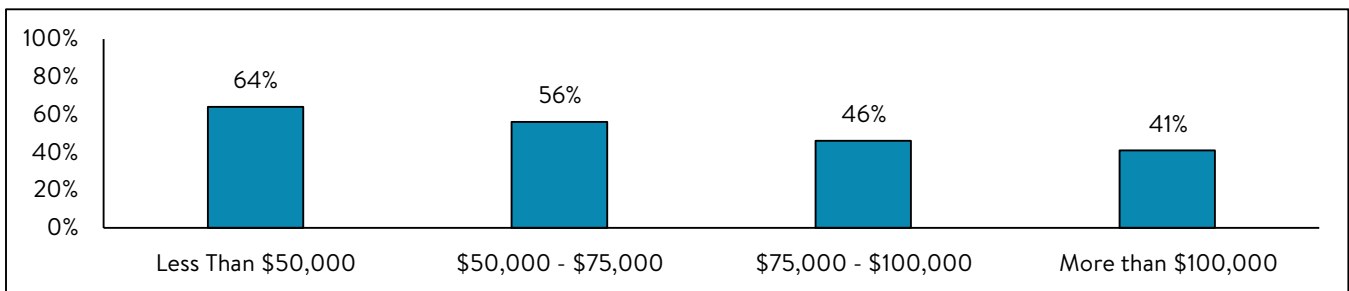
DATA BRIEF NO. 154 | AUGUST 2023

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

According to a survey of more than 1,300 Florida adults, conducted from May 3 to May 23, 2023, 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 varied substantially by income group, with respondents in households making less than \$50,000 per year<sup>1</sup> experiencing 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 prescription drugs.

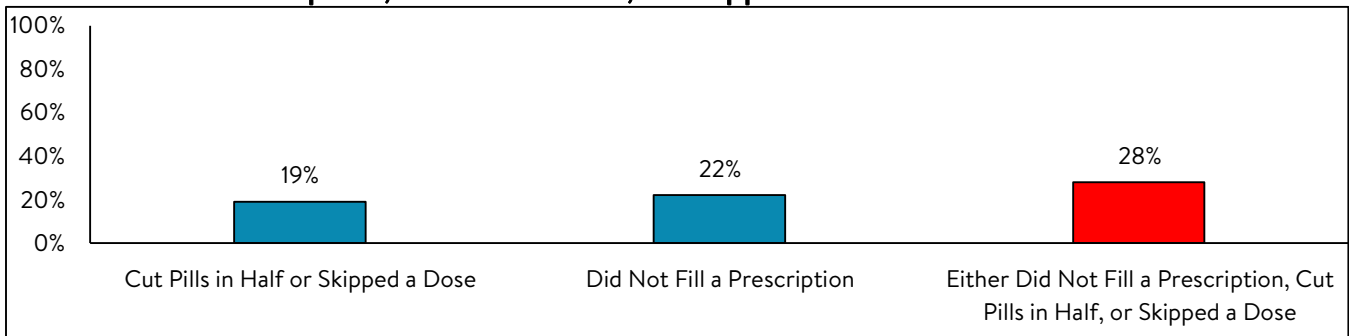
**Figure 1**  
**Somewhat or Very Worried About Affording Prescription Drugs, by Income Group**



2023 Poll of Florida 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 Florida respondents have skipped, delayed, or avoided care altogether in the prior 12 months due to the cost. Indeed, over 1 in 4 respondents (28%) reported rationing medication by either not filling a prescription, cutting pills in half, or skipping a dose of medicine in the last year due to cost (see Figure 2).

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



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**Table 1****Florida Respondents with Prescription Drug Affordability Issues, By Income Group, Geographic Setting, Race, Ethnicity, Insurance Type, and Disability Status**

	Cut Pills in Half or Skipped Dose	Did Not Fill a Prescription	Did Not Fill a Prescription, Cut Pills in Half, or Skipped Dose
<b>Income Group</b>			
Less than \$50,000	22%	28%	35%
\$50,000 - \$75,000	19%	20%	28%
\$75,000 - \$100,000	15%	15%	20%
More than \$100,000	14%	17%	21%
<b>Geographic Setting</b>			
Rural	24%	29%	34%
Non-Rural	16%	18%	24%
<b>Race/Ethnicity</b>			
Respondents of color			
Black/African American	21%	22%	30%
Asian	15%	15%	22%
Hispanic/Latino(a), any race	20%	23%	29%
White, non-Hispanic/Latino(a)	18%	21%	27%
BIPOC*	20%	22%	29%
<b>Insurance Type</b>			
Health insurance through my employer or a family member's employer	20%	24%	30%
Health insurance that I buy on my own (not through an employer)	18%	21%	26%
Medicare, coverage for seniors and those with serious disabilities	11%	13%	17%
Florida Medicaid, coverage for low-income people	29%	29%	41%
<b>Disability Status**</b>			
Household does not include a person with at least one disability	14%	16%	21%
Household includes a person with at least one disability	29%	35%	44%

Source: 2023 Poll of Florida Adults, Ages 18+, Altarum Healthcare Value Hub's Consumer Healthcare Experience State Survey

\*The BIPOC category includes respondents who are: Black or African American, American Indian or Native Alaskan, Asian, Native Hawaiian or other Pacific Islander, or Hispanic/Latino(a). The quantity of responses for all groups other than Asian, Black or African American, and Hispanic/Latino(a) respondents were not large enough to report reliable estimates. We regret that we were not able to provide reliable estimates for each individual group to better represent the diverse communities of Florida.

\*\*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.

These hardships disproportionately impact people in lower-income households. As Table 1 shows, respondents living in households earning less than \$50,000 and those earning between \$50,000 and \$75,000 per year reported higher rates of rationing their prescription medicines than respondents living in higher-income households. However, these hardships are alarmingly prevalent in middle-income households as well.

Respondents with Florida Medicaid coverage 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 1).

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

- Just **30%** agreed or strongly agreed that “*we have a great healthcare system in the U.S.*,”
- While **68%** 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:

- **72%**—Drug companies charging too much money
- **69%**—Hospitals charging too much money
- **66%**—Insurance companies charging too much money

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

- **90%**—Cap out-of-pocket costs for life-saving medications, such as insulin
- **90%**—Require drug companies to provide advanced notice of price increases and information to justify those increases
- **89%**—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
- **87%**—Prohibit drug companies from charging more in the U.S. than abroad
- **85%**—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 respondent’s political affiliation (see Table 2).

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

- **73%** would switch from a brand name to an equivalent generic drug if given a chance
- **55%** find, or have tried to find, out the cost of a drug beforehand

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

Selected Survey Statements/Questions	Total Percent of Respondents	Do you think of yourself as...		
		Republican	Democrat	Neither
<i>Major reason for rising healthcare costs: Drug companies charging too much money</i>	72%	70%	75%	71%
The government should cap out-of-pocket costs for life-saving medications, such as insulin	90%	88%	92%	90%
The government should require drug companies to provide advanced notice of price increases and information to justify those increases	90%	91%	92%	88%
The government should authorize the Attorney General to take legal action to prevent price gouging or unfair prescription drug price hikes	89%	90%	91%	86%
The government should set standard prices for drugs to make them affordable	89%	86%	93%	89%
The government should prohibit drug companies from charging more in U.S. than abroad	87%	86%	89%	88%
The government should create a Prescription Drug Affordability Board to examine the evidence and establish acceptable costs for drugs	85%	82%	90%	84%

Source: 2023 Poll of Florida Adults, Ages 18+, Altarum Healthcare Value Hub's Consumer Healthcare Experience State Survey

**CONCLUSION**

The high burden of healthcare and prescription drug affordability, along with high levels of support for change, suggests 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 progress is being made.

**Notes**

1. Median household income in Florida was \$61,777 (2017-2021). U.S. Census, *Quick Facts*. Retrieved from: [U.S. Census Bureau QuickFacts: Florida](https://www.census.gov/quickfacts/fl)
2. For more detailed information about healthcare affordability burdens facing Florida respondents, please see Healthcare Value Hub, [Florida Residents Struggle to Afford High Healthcare Costs: Worry About Affording Healthcare in the Future; Support Government Action across Party Lines](#), Data Brief No. 152 (August 2023).

**ABOUT THE ALTARUM 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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**HEALTHCARE VALUE HUB**

**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 possible policy solutions.

This survey, conducted from April 25 to May 23, 2023, used a web panel from online survey company Dynata with a demographically balanced sample of approximately 1,514 respondents who live in Florida. 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 1,376 cases for analysis. After those exclusions, the demographic composition of respondents was as follows, although not all demographic information has complete response rates:

Demographic Characteristic	Frequency	Percentage
<b>Gender</b>		
Woman	752	55%
Man	594	43%
Transwoman	3	<1%
Transman	5	<1%
Genderqueer/Nonbinary	2	<1%
<b>Insurance Type</b>		
Health insurance through employer or family member’s employer	395	29%
Health insurance I buy on my own	206	15%
Medicare, coverage for seniors and those with serious disabilities	354	26%
Medicaid, coverage for low-income earners	205	15%
TRICARE/Military Health System coverage	33	2%
Department of Veterans Affairs (VA) Healthcare	27	2%
No coverage of any type	107	8%
I don’t know	49	4%
<b>Race</b>		
American Indian or Native Alaskan	41	3%
Asian	110	8%
Black or African American	277	20%
Native Hawaiian or Other Pacific Islander	17	1%
White, Non-Hispanic/Latino(a)	913	52%
Prefer Not to Answer	28	2%
Two or More Races	51	4%
<b>Ethnicity</b>		
Hispanic or Latino(a)	311	23%
Non-Hispanic or Latino(a)	1,065	77%
<b>Age</b>		
18-24	272	20%
25-34	236	17%
35-44	182	13%
45-54	205	15%
55-64	268	20%
65+	200	15%

Demographic Characteristic	Frequency	Percentage
<b>Household Income</b>		
Under \$20K	210	15%
\$20K-\$29K	166	12%
\$30K - \$39K	127	9%
\$40K - \$49K	144	10%
\$50K - \$59K	131	10%
\$60K - \$74K	143	10%
\$75K - \$99K	178	13%
\$100K - \$149K	179	13%
\$150K+	98	7%
<b>Self-Reported Health Status</b>		
Excellent	207	15%
Very Good	442	32%
Good	469	34%
Fair	213	15%
Poor	45	3%
<b>Disability</b>		
Mobility: Serious difficulty walking or climbing stairs	224	16%
Cognition: Serious difficulty concentrating, remembering or making decisions	151	11%
Independent Living: Serious difficulty doing errands alone, such as visiting a doctor’s office	123	9%
Hearing: Deafness or serious difficulty hearing	92	7%
Vision: Blindness or serious difficulty seeing, even when wearing glasses	80	6%
Self-Care: Difficulty dressing or bathing	71	5%
No disability or long-term health condition	935	68%
<b>Party Affiliation</b>		
Republican	467	34%
Democrat	417	30%
Neither	492	36%

Source: 2023 Poll of Florida 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.