HEALTHCARE VALUE HUB

Data Brief | August 2025

Michigan Survey Respondents Worry about High Drug Costs; Express Bipartisan Support for Policy Solutions

Summary

A survey of more than 1350 Michigan adults, conducted from June 30 to July 29, 2025, found:

- More than half (51%) of all survey respondents reported being either “worried” or “very worried” about affording the cost of prescription drugs;
- More than a quarter of respondents (27%) reported rationing medication due to cost in the last year;
- Respondents earning less than $50,000 a year, those enrolled in coverage they purchased on their own (such as through the Marketplace), and respondents with a disability, or who live with a person with a disability, reported rationing medication more frequently than other respondents;
- Nearly 3 in every 4 respondents (73%) “agree” or “strongly agree” that the United States health care system needs to change; and
- Across party lines, respondents expressed strong support for policy-based solutions.

Prescription drug prices in the United States are nearly 2.8 times higher than the prices in other OECD countries, like Canada, Japan, and France.[1] With nearly seven in every ten American adults (69%) prescribed at least one medication, these high costs impact the majority of the population to some degree.[2] Although many survey respondents (77%) indicated that they would switch to a lower-cost generic alternative if given the opportunity, this option is not always available, leaving some patients without an affordable way to access necessary medications.

Medication Rationing

When prescription drugs are unaffordable, patients may be forced to ration the medications they have on hand by skipping doses or splitting pills in half, or they may not be able to fill their prescription at all. Individuals who ration medication often experience worse health outcomes and more frequently use health care services relative to patients who take their medication as prescribed.[3] More than one in every four (27% of) respondents reported rationing medication due to cost concerns in the last year (see Figure 1).

Among Michigan respondents, medication rationing was most commonly reported among respondents enrolled in enrolled in coverage they purchased on their own (such as through the Marketplace), followed by those with Medicaid. Other groups also reported a greater likelihood of rationing medication, such as respondents earning less than $50,000 a year and respondents with a disability or living in a household with a person with a disability (see Table 1).

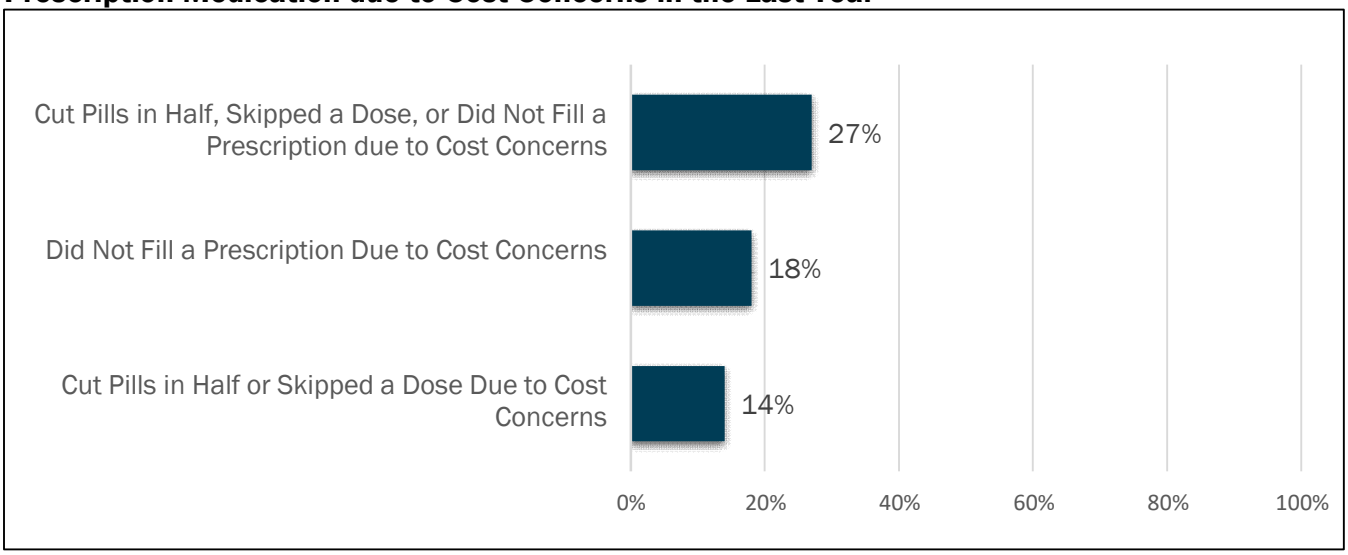
Nationally, rationing behaviors occur across income and insurance status. Approximately 27% of prescriptions written to insured American adults go unfilled due to insurance coverage denials.[4] While some patients are able to overcome these obstacles by using secondary insurance, paying out-of-pocket, or applying manufacturer coupons, nearly half (47%) of all survey respondents identified addressing high health care costs, including drug prices, as one of their top three policy priorities for government action.

When asked to provide more details on why they rationed medication in the last year, respondents provided a variety of anecdotes, including:

- "I could not fill my medication because my insurance denied a pre-approval even though [the prescription] was on their formulary and I had been taking it for two years under another insurance. They denied appeal after appeal, and I couldn't pay $1300 per month."
- "I need injections and pain patches and can't get them because my Medicare doesn't cover them."
- "Last fall I did not continue a GLP-1 drug because I was in the donut hole."
- "[My doctor gave me a sample of Jardiance and Trelegy,] the sample really helped but when he gave me the RX the costs were way out of my price range."

Figure 1

Percent of Respondents that Did Not Fill a Prescription, Cut Pills in Half, or Skipped a Dose of a Prescription Medication due to Cost Concerns in the Last Year



Source: 2025 Poll of Michigan Adults, Ages 18+, Altarum Healthcare Value Hub's Consumer Healthcare Experience State Survey

Table 1

Percent of Respondents Rationing Medication due to Cost, By Geographic Area, Coverage Type, Demographic Characteristics

	Cut Pills in Half or Skipped a Dose	Did Not Fill a Prescription	Any Medication Rationing
Geographic Area			
Rural	12%	17%	24%
Nonrural	14%	19%	28%
Northern Michigan	15%	16%	24%
Western Michigan	9%	15%	20%
Mid-Michigan	18%	24%	32%
Southeast Michigan	14%	19%	28%

	Cut Pills in Half or Skipped a Dose	Did Not Fill a Prescription	Any Medication Rationing
Household Characteristics			
Household Income			
≤ $50,000 annually	14%	25%	34%
$50,001 - $75,000 annually	17%	22%	31%
$75,001 - $100,000 annually	14%	13%	20%
≥ $100,000 annually	12%	11%	20%
Disability			
Household includes a person with a disability	22%	29%	40%
Household does not include a person with a disability	11%	14%	21%
Demographic Characteristics			
Race and Ethnicity			
Respondents of Color*	17%	21%	33%
White, alone non-Hispanic	13%	17%	25%
Employment Status			
Employed Full-Time	13%	17%	27%
Employed Part-Time	18%	23%	35%
Not employed, seeking employment	23%	26%	34%
Orientation			
Sexual Diverse	19%	23%	34%
Not Sexual Diverse	13%	18%	26%
Insurance Status			
Employer-Sponsored health insurance	11%	17%	24%
Health insurance purchased individually	19%	21%	36%
Medicare, coverage for older adults	13%	16%	23%
Michigan Medicaid	16%	24%	34%

Source: 2025 Poll of Michigan Adults, Ages 18+, Altarum Healthcare Value Hub's Consumer Healthcare Experience State Survey
Note: The Respondents of Color category reflects the combined responses from survey participants who are Black or African American, Hispanic or Latino, American Indian or Alaskan Native, Asian, Native Hawaiian or Other Pacific Islander. The response rate for one or more of those demographic categories was not sufficient to report reliable estimates.

Worries about Affording the Cost of Prescription Drugs in the Future

More than half (51%) of survey respondents reported being somewhat or very worried about affording the cost of prescription drugs. Worry varies by income group, with respondents in households making less than $50,000 per year experiencing the most worry (see Table 2).[5] However, a large percentage of households making above $75,000 per year also reported worrying about the cost of prescription drugs.

Table 2

Percent of Respondents Somewhat or Very Worried About Affording Prescription Drugs, by Household and Demographic Characteristics

	Somewhat or Very Worried about Affording Prescription Drugs
Household Characteristics	
Household Income	
≤ $50,000 annually	60%
$50,001 - $75,000 annually	56%
$75,001 - $100,000 annually	49%
≥ $100,000 annually	39%
Disability	
Household includes a person with a disability	64%
Household does not include a person with a disability	46%
Demographic Characteristics	
Race and Ethnicity	
Respondents of Color*	53%
White, alone non-Hispanic	50%
Employment Status	
Employed Full-Time	52%-
Employed Part-Time	-56%
Not employed, seeking employment	-66%
Orientation	
Sexual Diverse	65%
Not Sexual Diverse	48%
Insurance Status	
Employer-based health insurance	47%
Health insurance purchased individually	57%
Medicare, coverage for older adults	44%
Michigan Medicaid	65%

Source: 2025 Poll of Michigan Adults, Ages 18+, Altarum Healthcare Value Hub's Consumer Healthcare Experience State Survey
Note: The Respondents of Color category reflects the combined responses from survey participants who are Black or African American, Hispanic or Latino, American Indian or Alaskan Native, Asian, Native Hawaiian or Other Pacific Islander. The response rate for one or more of those demographic categories was not sufficient to report reliable estimates.

Respondent Perceptions of Health Care Systems, Policy Solutions

Given how often respondents reported being concerned about affording prescription drugs, it is not surprising that Michigan respondents are generally dissatisfied with the health care system. In fact, just 31% of respondents agreed or strongly agreed that the United States health care system is "great," while 73% agreed or strongly agreed that the United States health care system needs to change.

Michigan respondents also frequently reported that they believe that pricing decisions made by drug companies are a major reason for high health care costs. In fact, out of fifteen options, the most frequently cited reasons for high health care costs were:

- 75% — Drug companies charging too much money
- 71% — Insurance companies charging too much money
- 69% — Hospitals charging too much money

When asked about their views on policy solutions to address the high cost of prescription drugs, Michigan respondents endorsed a number of prescription drug-related strategies, including:

- 91% — Authorize the Attorney General to take legal action to prevent price gouging;
- 90% — Set standard prices for drugs to make them affordable;
- 90% — Cap out-of-pocket costs for life-saving medications, such as insulin;
- 90% — Prohibit drug companies from charging more in the U.S. than abroad; and
- 88% — Establish a Prescription Drug Affordability Board to examine evidence and establish acceptable costs for prescription drugs.

The survey also revealed that there is bipartisan support for a variety of policies designed to make prescription drugs more affordable. Nearly all (91% of) respondents agreed that states should authorize the Attorney General to take legal action to prevent price gouging or unfair drug price hikes, including 88% of respondents identifying as a Republican, 94% of respondents identifying as a Democrat, and 89% of unaffiliated respondents (see Table 3).

Table 3

Percent of Respondents that Agreed or Strongly Agreed that the Government Should Employ Select Strategies, by Political Affiliation

Selected Survey Statement	Total Percent	Republican	Democrat	Independent
Authorize the Attorney General to take legal action to prevent price gouging or unfair drug price hikes	91%	88%	94%	89%
Cap out-of-pocket costs for life-saving medications, such as insulin	90%	87%	94%	89%
Set standard prices for drugs to make them affordable	90%	87%	93%	89%
Prohibit drug companies from charging more in U.S. than abroad	90%	92%	91%	87%
Create a Prescription Drug Affordability Board to examine and establish acceptable costs for drugs	88%	84%	93%	85%

Source: 2025 Poll of Michigan Adults, Ages 18+, Altarum Healthcare Value Hub's Consumer Healthcare Experience State Survey

The high burden of health care and prescription drug affordability, along with high levels of support for change, suggests that elected leaders need to make addressing this consumer burden a top priority. Annual surveys can help assess whether progress is being made. For more detailed information about health care affordability burdens facing Michigan respondents, please see *Healthcare Value Hub, Michigan Residents Struggle to Afford High Health Care Costs; Worry About Affording Health Care in the Future; Support Government Action across Party Lines, Data Brief (August 2025).*

Notes

[1] Mulcahy, A., Schwam, D., Lovejoy, S. (2024, February 1). International Prescription Drug Price Comparisons: Estimates Using 2022 Data. RAND Corporation. https://www.rand.org/pubs/research_reports/RRA788-3.html

[2] NCHS Data Query System. (2024). Prescription Medication Use Among Adults [Internet]. Hyattsville (MD): National Center for Health Statistics. https://www.cdc.gov/nchs/dqs

[3] Nekui, F., Galbraith, A. A., Briesacher, B. A., Zhang, F., Soumerai, S. B., Ross-Degnan, D., Gurwitz, J. H., & Madden, J. M. (2021). Cost-related Medication Nonadherence and Its Risk Factors Among Medicare Beneficiaries. Medical care, 59(1), 13–21. https://doi.org/10.1097/MLR.0000000000001458

[4] Understanding the Use of Medicines in the U.S. 2025: Evolving Standards of Care, Patient Access, and Spending. (2025, April). IQVIA Institute for Human Data Science. https://www.iqvia.com/-/media/iqvia/pdfs/institute-reports/understanding-the-use-of-medicines-in-the-us-2025/iqvia-institute-iqi-us-use-of-medicines-04-25-forweb.pdf

[5] Median household income in Michigan was $69,183 (2023). (U.S. Census, Quick Facts. Retrieved from: Michigan - Census Bureau Profile

About the Healthcare Value Hub

With support from the Robert Wood Johnson Foundation and Arnold Ventures, the Healthcare Value Hub provides free, timely information about the policies and practices that address high health care 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 health care.

Contact the Hub:
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Methodology

Altarum's Consumer Healthcare Experience State Survey (CHESS) is designed to elicit respondents' 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 June 30 to July 29, 2025, used a web panel from Dynata with a demographically balanced sample of approximately 1,500 respondents who live in Michigan. 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 1,387 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	Percent
Sex		
Woman	724	53%
Man	647	47%
Sexual Diverse	198	14%
Insurance Type		
Health insurance through my or a family member's employer	503	44%
insurance I buy on my own	133	9%
Medicare, coverage for seniors and those with serious disabilities	327	24%
Michigan Medicaid	305	16%
TRICARE/Military Health System	12	1%
Department of Veterans Affairs	15	1%
No coverage of any type	55	4%
I don't know	37	2%
Race		
American Indian/Native Alaskan	59	4%
Asian	71	5%
Black or African American	428	31%
Native Hawaiian/Other Pacific Islander	9	> 1%
White	837	60%
Prefer Not to Answer	17	1%
Two or More Races	94	6%
Ethnicity		
Hispanic or Latino	71	5%
Non-Hispanic or Latino	1316	95%
Age		
18-24	290	21%
25-34	224	16%
35-44	221	16%
45-54	236	17%
55-64	241	18%
65+	165	12%
Party Affiliation		
Republican	375	27%
Democrat	529	38%
Independent	483	35%

Demographic Characteristic	Frequency	Percent
Household Income		
Under $20K	270	19%
$20K-$29K	176	13%
$30K - $39K	156	11%
$40K - $49K	120	9%
$50K - $59K	145	10%
$60K - $74K	119	9%
$75K - $99K	153	11%
$100K - $149K	150	11%
$150K+	98	7%
Education Level		
Some high school	63	5%
High school diploma/GED	393	28%
Some college or training/certificate program	328	24%
Associate degree	158	11%
Bachelor's degree	263	19%
Some graduate school	29	2%
Graduate degree	153	11%
Self-Reported Health Status		
Excellent	186	13%
Very Good	409	29%
Good	525	38%
Fair	211	15%
Poor	56	4%
Disability		
Mobility	234	17%
Cognition	147	11%
Independent Living	106	7%
Hearing	81	6%
Vision	78	6%
Self-Care: Difficulty dressing or bathing	64	5%
No disability or long-term health condition	933	67%

Source: 2024 Poll of Michigan 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.