Pennsylvania Survey Respondents Worry about Hospital Costs, Face Challenges Understanding Cost and Quality Information, and Support Government Action

Executive Summary

Hospital care is a major source of financial concern for many Pennsylvania residents. Findings from Altarum's Consumer Healthcare Experience State Survey (CHESS), conducted among more than 1,400 Pennsylvania adults from July 9th – July 14th, 2026, highlight widespread worry about hospital costs. The results also point to challenges understanding hospital costs and quality information and broad support for government action.

Key findings include:

- **Worry about hospital costs is widespread:** Seventy-five percent of respondents reported worry about affording health care now or in the future, including hospital services.
- **Hospital care is a common source of medical bills:** Nearly one-third of respondents (31%) experienced a financial burden from medical bills, and 22% reported outstanding medical bills; among those with outstanding bills, 68% reported at least one hospital bill.
- **Challenges finding hospital cost and quality information:** Respondents reported lower confidence finding procedure costs in advance, locating hospital quality ratings, and resolving billing issues compared to navigating routine health care decisions.
- **Understanding insurance terms varies across respondents:** Fewer than half of respondents correctly defined "coinsurance," with lower understanding among respondents with less formal education.
- **Broad, bipartisan support for solutions:** Respondents across political affiliations expressed support for government actions related to hospital pricing, billing practices, and oversight of health system consolidation.

Together, these findings show that hospital care represents a significant source of financial risk for many respondents, often alongside challenges anticipating costs and assessing quality. At the same time, there is broad public support for efforts to improve hospital cost transparency and oversight.

Background

Hospitals provide essential care, but the cost of hospital services can be difficult for consumers to anticipate and afford. Findings from Altarum's Consumer Healthcare Experience State Survey (CHESS) show widespread concern about hospital costs and gaps in consumers' ability to find and interpret information about hospital prices, billing and quality. This brief summarizes responses from more than 1,400 Pennsylvania adults surveyed from July 9th – July 14th, 2026, focusing on hospital affordability, access to cost and quality information, and support for related policy solutions. Detailed information on survey methods and respondent characteristics is available in the **Appendix**.

Worry about Affording Hospital Services

Seventy-five percent of Pennsylvania respondents reported being worried about affording health care, both now and in the future, including affording services commonly provided in hospitals. Respondents frequently reported worry related to hospital-associated services and situations that may involve high out-of-pocket costs, including medical care for a serious illness or accident (52%), maternity or reproductive care (25%), and ambulance services in an emergency (45%).

These concerns are reflected in respondents' experiences after receiving care. Nearly one-third of respondents (31%) reported experiencing a financial burden due to medical bills and 22% of respondents reported having outstanding medical bills. Among the respondents who reported having outstanding medical bills, greater than two in every three respondents (68%) reported at least one of those bills came from a hospital.

Together, these findings show that hospital services are a major source of financial worry and medical bills for many respondents. Challenges affording care and anticipating hospital costs contribute to this concern, especially when information about prices, billing, and quality is difficult to find.

Challenges Finding Hospital Cost and Quality Information

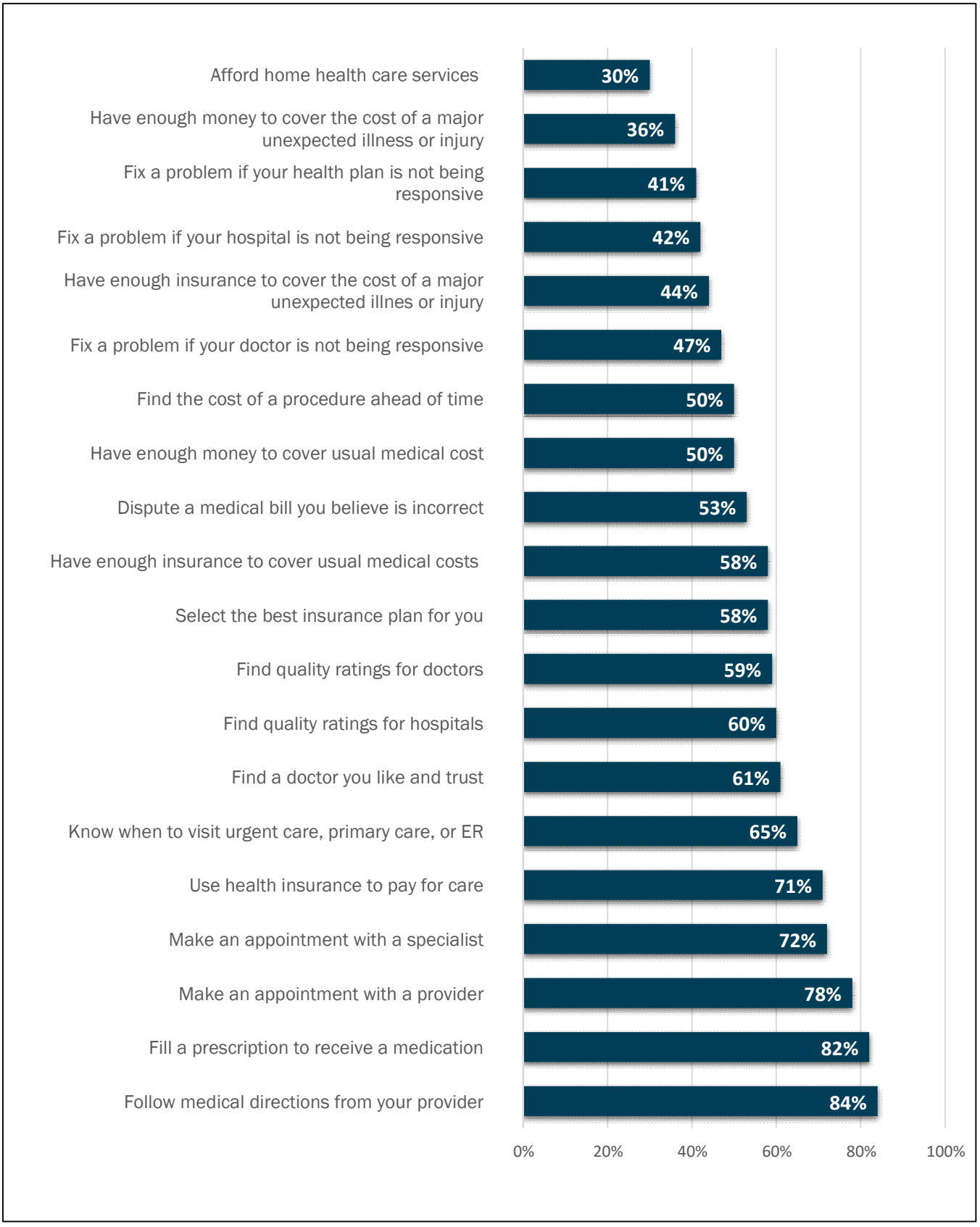
Survey results indicate that hospital care presents distinct challenges related to understanding costs, billing, and quality information before services are provided. While many respondents' report confidence navigating routine health care decisions, confidence is lower for tasks that involve anticipating or managing hospital costs and quality information.

Why This Matters

These gaps in confidence suggest that consumers may have limited ability to plan for potential out-of-pocket expenses or assess quality before hospital care. Challenges finding clear, usable hospital cost and quality information may increase the likelihood of unexpected medical bills and make billing problems harder to resolve after care.

Figure 1 illustrates this contrast across common health care–related tasks. Respondents were more likely to report high confidence in their ability to perform activities such as filling a prescription (82%) or following instructions from a provider (84%). In contrast, fewer respondents reported high confidence in tasks that are especially relevant to hospital care, including finding the cost of a procedure in advance (50%), locating quality ratings for hospitals (60%), and disputing a medical bill (53%).

Figure 1. Percentage of Respondents Who Feel "Very" or "Extremely" Confident They Can Complete Select Health Care Related Tasks



Source: 2026 Survey of Pennsylvania Adults, Ages 18+, Altarum Healthcare Value Hub's Consumer Healthcare Experience State Survey

Understanding Insurance Terms

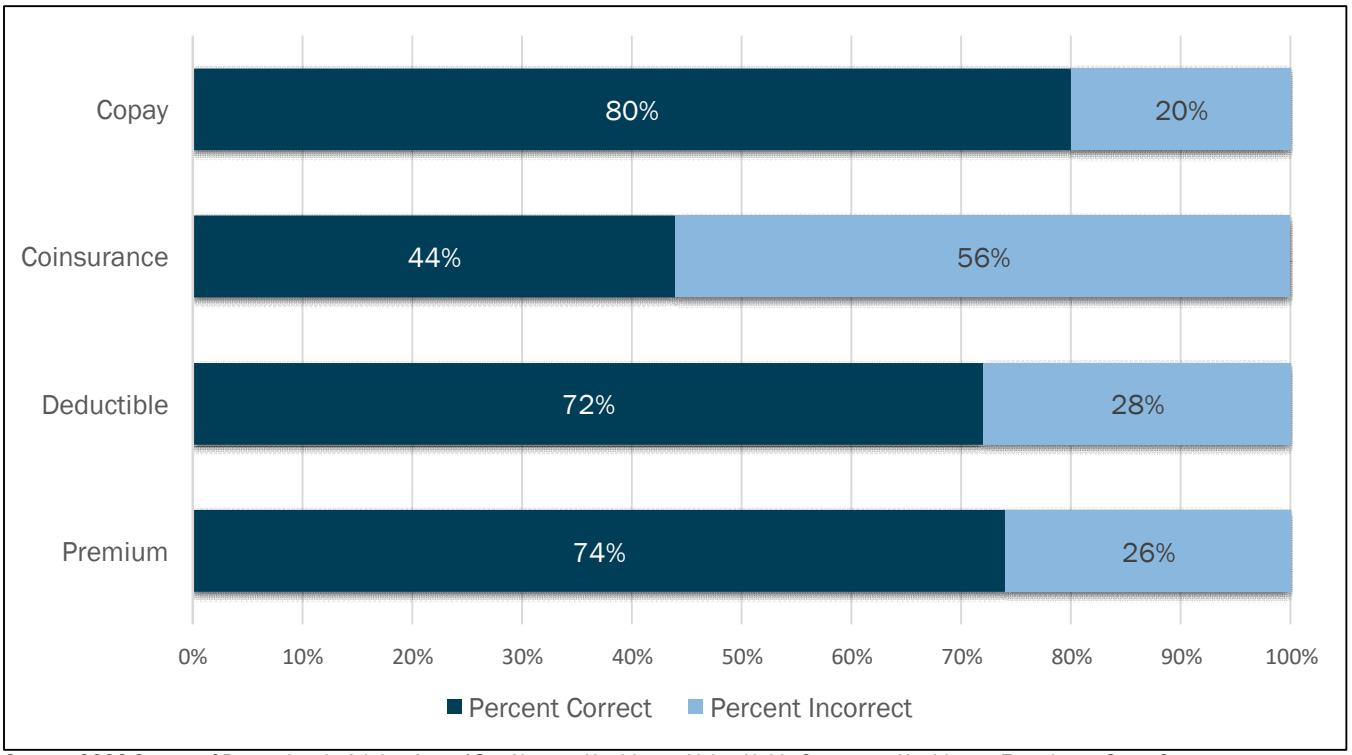
Figure 2 shows that while most respondents were able to correctly define "premium," and "deductible," fewer than half (44%) were able to accurately define "coinsurance", a key component of hospital cost-sharing after a deductible is met. Misunderstanding coinsurance can be particularly consequential for hospital services, where charges are often higher and cost-sharing amounts are less predictable.

Understanding of insurance terms varied by educational attainment (**Table 1**). Respondents with lower levels of education were less likely to correctly define key cost-sharing terms compared to those with a bachelor's or graduate degree, which may make it harder for some patients to anticipate hospital costs and understand medical bills.

Why This Matters

Understanding how insurance applies to hospital services often requires familiarity with terms that determine what patients pay out-of-pocket, such as deductibles, coinsurance, and copays. Survey results suggest that many respondents have difficulty accurately defining these terms, which can make it challenging to anticipate hospital charges before receiving care. Research indicates that nearly half of insured adults find at least one aspect of their insurance difficult to understand.[1]

Figure 2. Percent Who Chose the Correct Insurance Term Definition



Source: 2026 Survey of Pennsylvania Adults, Ages 18+, Altarum Healthcare Value Hub's Consumer Healthcare Experience State Survey

**Note:* Totals may not equal 100% due to rounding.

Definitions: "Premium" is a fee paid on a regular schedule for an insurance policy; "Deductible" is the money you pay before an insurance company will pay a claim; "Coinsurance" is the percentage of a health care bill you pay after the deductible is met; "Copay" is the portion you pay for using specific covered services.

Table 1. Percent Who Correctly Defined Select Insurance Terms, by Education Level

	Coinsurance	Premium	Deductible	Co-Pay
High School Diploma or GED	35%	60%	57%	69%
Some College, Training, or Certificate	39%	75%	71%	86%
Associate Degree	41%	77%	74%	84%
Bachelor's Degree	50%	79%	80%	84%
Graduate School	55%	83%	84%	85%

Source: 2026 Survey of Pennsylvania Adults, Ages 18+, Altarum Healthcare Value Hub's Consumer Healthcare Experience State Survey

**Note:* Totals may not equal 100% due to rounding.

**Respondents who reported completing some high school. Graduating from high school, or receiving a GED are represented in the "High School Diploma or GED" row; respondents who reported that they attended some or completed a graduate degree program are represented in the "Graduate School" row.

Definitions: "Premium" is a fee paid on a regular schedule for an insurance policy; "Deductible" is the money you pay before an insurance company will pay a claim; "Coinsurance" is the percentage of a health care bill you pay after the deductible is met; "Copay" is the portion you pay for using specific covered services.

Perceptions of Who Drives High Costs

Survey respondents identified several actors as contributing to high health care costs. Drug manufacturers were most frequently cited (75%), followed by health insurance companies (72%). More than half of Pennsylvania respondents (56%) also identified hospitals as contributors to high health care costs, placing hospitals among the institutions commonly associated with rising health care expenses.

Support for Solutions to Address Hospital Costs and Transparency

Survey respondents expressed broad support for government actions aimed at addressing health care affordability, including strategies that relate specifically to hospital costs and transparency. Across political affiliations, respondents reported that it is important for the state to play a role in protecting consumers from high and unexpected medical costs and in improving access to information needed to navigate care (**Table 2**).

Pennsylvania respondents supported a range of policy approaches relevant to hospital care, including limiting excessive hospital prices, addressing billing practices that increase costs without improving care, and strengthening oversight of health system consolidation that may contribute to higher prices. Support for these strategies was observed among Republicans, Democrats, and Independents, suggesting shared concern about the impact of hospital costs on patients and families.

Together, these findings indicate that concerns about hospital affordability and transparency are accompanied by broad public support for government efforts to improve how hospital prices are set, communicated, and regulated.

Table 2. Percent of Respondents Who "Agree" or "Strongly Agree" with Selected Statements, by Political Affiliation

Selected Survey Statement	Total Percent	Republican	Democrat	Independent
The government should prohibit extra fees that aren't connected to the cost of your care, like hospitals charging facility fees at offices and clinics miles away from the hospital campus	93%	92%	94%	93%
The government should limit the prices at expensive hospitals in the private health insurance market (Medicare and Medicaid already set hospital prices for their markets)	92%	95%	92%	88%
The government should prevent hospitals from charging more for routine health care services that are most often provided in a doctor's office	92%	91%	94%	91%
The government should increase investment in primary care	90%	88%	91%	89%
The government should integrate the Medicaid and Medicare programs for people who are eligible for both to make it simpler for them to navigate those programs	90%	86%	92%	91%
The government should change the way we pay doctors and hospitals to reward quality outcomes rather than quantity of services	87%	88%	87%	85%
The government should make it easier for people to apply for and renew their Medicaid coverage	87%	81%	92%	87%
Everyone should have access to the health services they need, when and where they need them, without financial hardship	86%	81%	93%	83%
The government should limit and prevent health care mergers that could reduce competition and increase health care prices	86%	84%	88%	85%
The government should allow your pharmacist to substitute for a lower cost prescription drug option, if available, without needing to get permission from your prescriber	84%	85%	83%	85%
The state government should implement policies aimed at lowering the high and rising costs of health care	84%	81%	90%	79%

Medicaid plays a critical role in giving eligible patients access to necessary medical care	78%	73%	86%	74%
The state government should invest in improving health status in low-income communities	77%	66%	88%	72%
Potential price increases should be factored in when the state government is deciding whether to allow a health system to consolidate, grow, or close	72%	72%	77%	65%
Racial inequities in health care are a major issue, causing people of color to receive lower-quality care compared to others	53%	32%	74%	46%

Source: 2026 Survey of Pennsylvania Adults, Ages 18+, Altarum Healthcare Value Hub's Consumer Healthcare Experience State Survey

Conclusion

Findings from the Pennsylvania Consumer Healthcare Experience State Survey show that hospital care is a significant source of financial concern for many respondents. Widespread worry about affording hospital services is accompanied by challenges finding and understanding hospital cost, billing, and quality information before care is received.

These findings show how difficulty anticipating hospital costs and assessing quality may increase the risk of unexpected medical bills and financial strain. At the same time, respondents across political affiliations express support for government efforts to improve hospital cost transparency and accountability, underscoring shared concern about the impact of hospital costs on patients and families.

Appendix.

Methodology & Population

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 July 9th – July 14th, 2026, used a web panel from Dynata with a demographically balanced sample of approximately 1,400 respondents who live in Pennsylvania. 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 1,405 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	879	51%
Man	526	49%
Sexual Diverse	133	10%
Insurance Type		
Employer-Sponsored Insurance	486	44%
Insurance Purchased Myself	101	7%
Traditional Medicare	196	12%
Medicare Advantage	244	14%
Medicaid	256	15%
TRICARE/Military	9	1%
Department of Veterans Affairs	9	1%
No coverage of any type	71	4%
I don't know	33	2%
Race		
American Indian/Native Alaskan	18	1%
Asian	37	5%
Black or African American	212	13%
Native Hawaiian/Other Pacific Islander	2	< 1%
White	1076	81%
Prefer Not to Answer	4	< 1%
Two or More Races	75	7%
Ethnicity		
Hispanic or Latino	139	9%
Non-Hispanic or Latino	1266	91%
Age		
18-24	179	12%
25-34	212	18%
35-44	258	21%
45-54	231	16%
55-64	262	16%
65+	260	16%
Party Affiliation		
Republican	426	32%
Democrat	580	40%
Neither	399	28%

Demographic Characteristic	Frequency	Percent
Household Income		
Under $20K	230	11%
$20K-$29K	155	8%
$30K - $39K	149	8%
$40K - $49K	112	6%
$50K - $59K	154	9%
$60K - $74K	133	7%
$75K - $99K	168	13%
$100K - $149K	185	18%
$150K+	119	21%
Education Level		
Some high school	43	2%
High school diploma/GED	434	26%
Some college or training/certificate program	264	16%
Associate degree	172	11%
Bachelor's degree	275	24%
Some graduate school	32	2%
Graduate degree	185	20%
Self-Reported Health Status		
Excellent	166	14%
Very Good	419	33%
Good	546	36%
Fair	233	14%
Poor	41	3%
Disability		
Mobility	254	15%
Cognition	127	9%
Independent Living	107	8%
Hearing	97	7%
Vision	59	5%
Self-Care	62	5%
No disability or long-term health condition	975	72%

Source: 2026 Poll of Pennsylvania 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.

Notes

[1] Pollitz, K., Pestaina, K., Montero, A., Lopes, L., Valdes, I., Kirzinger, A., Brodie, M., KFF Survey of Consumer Experiences with Health Insurance, (KFF, June 15, 2023) https://www.kff.org/report-section/kff-survey-of-consumer-experiences-with-health-insurance-methodology/ (Accessed December 5, 2024).

About the Altarum 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.

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