

Executive Summary

Background

The Health Care Value Hub conducted 45 Consumer Health Care Experience State Surveys (CHESS) across 36 states between 2018 and 2025, with some states participating multiple times.

CHESS is designed to provide reliable, state-level estimates of respondents' views on a wide range of health system issues: confidence in using the health system, the financial burden and tradeoffs that respondents have experienced, their worries about needing and affording health care now and in the future, and the policy fixes that might be needed to address these issues. The purpose of this report is to present key findings on core topics assessed by the CHESS from 2021 to 2025 and contextualize the results in relation to the social, political, and economic landscape of the U.S.

CHESS findings consistently reveal high levels of concern about health care affordability, insurance stability, and the overall performance of the U.S. health care system. These attitudes closely track the political, social, and economic context of each survey year, highlighting the value of CHESS as a tool for monitoring public sentiment in response to significant events.

Healthcare Access and Affordability are Concerns for CHESS Respondents

- From 2021-2025, CHESS respondents expressed strong concern about being able to obtain and afford needed health care. Younger adults, respondents with lower incomes, Medicaid enrollees, and non-White respondents were consistently the most worried populations. **A greater share of respondents feared their insurance becoming too expensive compared to losing it entirely.**
- From 2021–2025, a rising share of **respondents across all income levels reported experiencing at least one affordability burden** with Medicaid enrollees, lower-income, and non-White respondents experiencing the highest burden levels.
- Unexpected medical bills remained a key source of financial stress, with about **half of U.S. adults nationally unable to cover a \$500 bill without borrowing** (Sparks, Lopes, et al., 2025). With Medicaid eligibility rules shifting in 2026 and Affordable Care Act premium subsidies expiring in late 2025 (Lo et al., 2025; Sullivan & Rapfogel, 2025), worry about affordability is expected to rise. CHESS data will play a critical role in tracking these changes.

CHESS Respondents Want the Government to Address Health Care Issues

When asked to select top **health related** issues for the government to address, CHESS respondents consistently selected:

- Addressing high health care and prescription drug costs;
- Preserving consumer protections, such as preexisting condition safeguards;
- Expanding access to affordable coverage; and
- Improving Medicare.



Women's issues were rarely selected as a top three government priority, but interest spiked in 2022 following the *Dobbs v. Jackson* decision (U.S. Supreme Court, 2022), which overturned *Roe v. Wade* and led to widespread changes in reproductive health care laws. Women, especially those with low income or from racial minority groups, face disproportionate challenges related to mental health and intimate partner violence, in addition to obstacles to reproductive health care, intensified by affordability and access obstacles (Ranji et al., 2019; Zivin & Courant, 2024). CHESS results show that U.S. adults are motivated by societal issues and seek government action to address health care concerns, including those affecting women.

Attitudes Toward the Health Care System and Policy Solutions

Across all states and years, most CHESS respondents believed the **U.S. health care system needs meaningful change**. Between 69% and 82% agreed that reforms are necessary, with the number of respondents who supported health care system change increasing each year. Respondents expressed exceptionally strong (greater than 80%) bipartisan support for policies that would:

- Improve price transparency for procedures and medications;
- Cap out-of-pocket costs for lifesaving drugs;
- Simplify insurance switching;
- Require upfront cost estimates from insurers and providers; and
- Expand affordable coverage options.

These findings demonstrate widespread alignment on core affordability and transparency reforms, regardless of political affiliation.

Conclusion

Across five years of data, CHESS findings consistently illustrate a health care system that is difficult for many Americans to afford, navigate, and trust. Respondents' experiences reflect both longstanding structural, historical barriers and acute stresses brought on by policy changes, economic conditions, and shifting social dynamics. As the U.S. enters a period of major health policy transition, particularly related to Medicaid eligibility and marketplace subsidies, CHESS offers a crucial, real-time benchmark of public concern. The evidence underscores a clear call for policy action to improve health care affordability, strengthen social supports, and address persistent disparities.