HEALTHCARE VALUE HUB

Data Brief | December 2025

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

Summary

A survey of more than 1,380 Washington adults conducted from September 9 to October 8, 2025, found:

- Nearly half (48%) of all survey respondents reported being either “worried” or “very worried” about
- affording the cost of prescription drugs;
- More than a quarter of respondents (26%) reported rationing medication due to cost in the last year;
- Respondents earning less than $50,000 a year (34%), those enrolled in department of veteran affairs health care (48%) and respondents with a disability or who live with a person with a disability (35%), reported rationing medication more frequently than other respondents;
- 71% of all survey respondents believe the health care system is unaffordable
- 94% of all survey respondents believe health care costs are rising; and across party lines, respondents expressed support for policy-based solutions.

Prescription drug prices in the United States are nearly 2.8 times higher than the prices in other Organization for Economic Co-operation and Development (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]

Medication Rationing

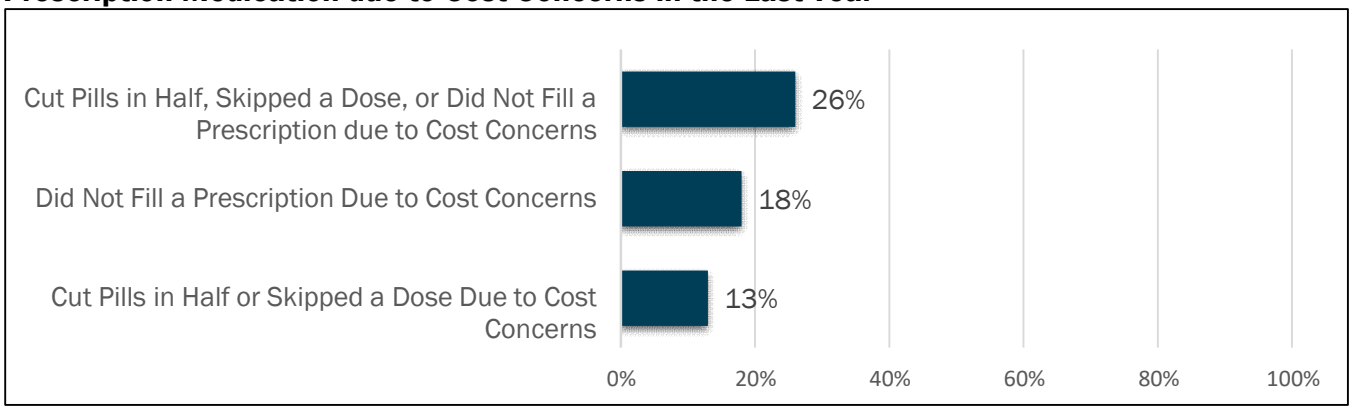
When prescription drugs are unaffordable, patients may be forced to ration the medications they have on hand by skipping doses or splitting pills in half, or they may not be able to fill their prescription at all. Individuals who ration medication often experience worse health outcomes and more frequently use health care services relative to patients who take their medication as prescribed.[3] More than one in every four (26% of) respondents reported rationing medication due to cost concerns in the last year (see Figure 1).

Among Washington respondents, medication rationing was most commonly reported among respondents enrolled in Department of Veterans Affairs health care (48%), followed by those without insurance (38%), and Apple Health (35%). However, certain populations were more likely to report 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, 22% of survey respondents identified lowering what you pay out of pocket for prescription drugs, as one of their top three policy priorities for government action.

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 Washington 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 3	Did Not Fill a Prescription 2	Any Medication Rationing
Geographic Area			
Urban	14%	18%	29%
Suburban	12%	16%	22%
Rural	13%	20%	26%
Household Income			
≤ $50,000 annually	19%	27%	34%
$50,001 - $75,000 annually	11%	16%	24%
$75,001 - $100,000 annually	12%	19%	24%
$100,001 - $200,000 annually	13%	16%	27%
≥ $200,000 annually**	8%	8%	14%
Disability			
Household includes a person with a physical or cognitive impairment	25%	22%	35%
Household does not include a person with physical or cognitive impairment	8%	16%	22%
Demographic Characteristics			
Race and Ethnicity			
Asian + Native Hawaiian or Other Pacific Islander	7%	12%	18%
American Indian/Alaska Native	20%	25%	33%
Black or African American	10%	14%	28%
Hispanic or Latino	23%	37%	48%
White, alone non-Hispanic	12%	13%	21%

	Cut Pills in Half or Skipped a Dose 3	Did Not Fill a Prescription 2	Any Medication Rationing
Orientation			
Sexual Diverse	20%	20%	33%
Not Sexual Diverse	12%	17%	24%
Employment Status			
Employed Full-Time	15%	20%	31%
Employed Part-Time	15%	18%	26%
Retired	4%	5%	7%
Unemployed, but seeking employment	21%	37%	43%
Insurance Status			
Employer-Sponsored health insurance	12%	20%	27%
Health insurance purchased individually	18%	11%	26%
Medicare Part A and Part B, coverage for older adults	13%	9%	21%
Medicare Advantage/Medicare Part C	8%	7%	12%
Apple Health, state Medicaid program	22%	29%	35%

Source: 2025 Poll of Washington Adults, Ages 18+, Altarum Healthcare Value Hub's Consumer Healthcare Experience State Survey
Note: Respondents were presented with the following racial and ethnic groups to select: Black or African American, Hispanic or Latino, American Indian or Alaskan Native, Asian, Native Hawaiian or Other Pacific Islander, Middle Eastern or North African, White, Multiracial. Categories not listed above did not have sufficient response rates to report reliable estimates. Unweighted responses among those with incomes above $200,000 annually were below the level to provide reliable estimates, so results should be interpreted with caution. For geographic area, respondents were asked to self-report whether they lived in urban, suburban, or rural area to capture the mix of settings within counties.

Worries about Affording the Cost of Prescription Drugs in the Future

Nearly 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	62%
$50,001 - $75,000 annually	49%
$75,001 - $100,000 annually	53%
$100,001 - $200,000 annually	42%
≥ $200,000 annually**	32%
Disability	
Household includes a person with a physical or cognitive impairment	43%
Household does not include a person with a physical or cognitive impairment	59%
Demographic Characteristics	
Race and Ethnicity	
Asian + Native Hawaiian or Other Pacific Islander	48%
American Indian/Alaska Native	59%
Black or African American	47%
Hispanic or Latino	58%
White, alone non-Hispanic	45%
Employment Status	
Employed Full-Time	50%
Employed Part-Time	59%
Unemployed	76%
Insurance Status	
Employer-based health insurance	48%
Health insurance purchased individually	54%
Medicare, coverage for older adults	36%
Apple Health, state Medicaid program	70%

Source: 2025 Poll of Washington Adults, Ages 18+, Altarum Healthcare Value Hub's Consumer Healthcare Experience State Survey
Note: Respondents were presented with the following racial and ethnic groups to select: Black or African American, Hispanic or Latino, American Indian or Alaskan Native, Asian, Native Hawaiian or Other Pacific Islander, Middle Eastern or North African, White, Multiracial. Categories not listed above did not have sufficient response rates to report reliable estimates. Unweighted responses among those with incomes above $200,000 annually were below the level to provide reliable estimates, so results should be interpreted with caution.

Respondent Perceptions of Health Care Systems, Policy Solutions

Washington respondents reported that they believe drug companies have a major responsibility for rising health care costs. The most frequently cited players contributing to rising health care costs were:

- 71% — Drug companies charging too much money
- 72% — Insurance companies charging too much money
- 44% — Hospitals charging too much money

When asked about their views on policy solutions to influence health care costs and efficiency, Washington respondents endorsed several strategies, including:

- 87% — Reign in how quickly prescription drug prices can increase in the private health insurance market (Medicare and Medicaid already do this);
- 88% — Limit the price of expensive prescription drugs;
- 86% — Allow your pharmacist to substitute for a lower cost prescription drug option, if available, without needing to get permission from your prescriber;

The survey also revealed that there is bipartisan support for these policy strategies as well (see Table 3).

Table 3

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

	Total Percent	Republican	Democrat	Independent
Reign in how quickly prescription drug prices can increase in the private health insurance market (Medicare and Medicaid already do this)	87%	88%	92%	81%
Limit the price of expensive prescription drugs	88%	88%	93%	85%
Allow your pharmacist to substitute for a lower cost prescription drug option, if available, without needing to get permission from your prescriber	86%	87%	87%	84%

Source: 2025 Poll of Washington 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 Washington respondents, please see *Healthcare Value Hub, Washington Residents Struggle to Afford High Health Care Costs; Worry About Affording Health Care in the Future; Support Government Action across Party Lines, Data Brief (November 2025).*

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:
(734) 302-4600 | www.HealthcareValueHub.org

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 September 9 to October 8, 2025, used a web panel from Dynata with a demographically balanced sample of approximately 1,700 respondents who live in Washington. 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 1,383 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	803	58%
Man	580	42%
Sexual Diverse	242	17%
Insurance Type		
Health insurance through my or a family member's employer	581	42%
Health insurance I buy on my own	128	9%
Traditional Medicare, coverage for seniors and those with serious disabilities	110	8%
Medicare Advantage	153	11%
Apple Health, Washington Medicaid	279	20%
TRICARE/Military Health System	29	2%
Department of Veterans Affairs	9	1%
No coverage of any type	61	4%
I don't know	33	2%
Race		
American Indian/Native Alaskan	161	12%
Asian	282	20%
Black or African American	341	25%
Native Hawaiian/Other Pacific Islander	54	4%
Middle Eastern/North African	15	1%
White	623	45%
Two or More Races	96	11%
Ethnicity		
Hispanic or Latino	120	9%
Non-Hispanic or Latino	1263	91%
Age		
18-24	303	22%
25-34	325	24%
35-44	298	22%
45-54	152	11%
55-64	154	11%
65+	146	11%
Party Affiliation		
Republican	309	22%
Democrat	471	34%
Independent	603	44%

Demographic Characteristic	Frequency	Percent
Household Income		
Under $20K	239	17%
$20K-$29K	118	9%
$30K - $39K	118	9%
$40K - $49K	116	8%
$50K - $59K	122	9%
$60K - $74K	119	9%
$75K - $99K	165	12%
$100K - $149K	190	14%
$150K $199K	124	9%
$200K+	72	5%
Education Level		
Some high school	55	4%
High school diploma/GED	296	21%
Some college or training/certificate program	306	22%
Associate degree	143	10%
Bachelor's degree	335	24%
Some graduate school	30	2%
Graduate degree	218	16%
Self-Reported Health Status		
Excellent	209	15%
Very Good	440	32%
Good	470	34%
Fair	209	15%
Poor	55	4%
Disability		
Mobility	216	16%
Cognition	157	11%
Independent Living	114	8%
Hearing	81	6%
Vision	74	5%
Self-Care: Difficulty dressing or bathing	59	4%
No disability or long-term health condition	994	68%

Source: 2025 Poll of Washington 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 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 Washington was $99,389 (2018-2022). (U.S. Census, Quick Facts. Retrieved from: U.S. Census Bureau QuickFacts: Washington)