



2025 REPORT

TRACKING HEALTHCARE AFFORDABILITY AND VALUE

The West Health-Gallup Healthcare Affordability Index
and Healthcare Value Index



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Tracking Healthcare Affordability and Value

Since 2021, West Health and Gallup have tracked healthcare affordability, access, quality and value through ongoing surveys of at least 4,800 Americans per administration.

The findings have led to the creation of two indices, which reveal the trends and issues Americans face as they navigate a high-priced U.S. healthcare system.



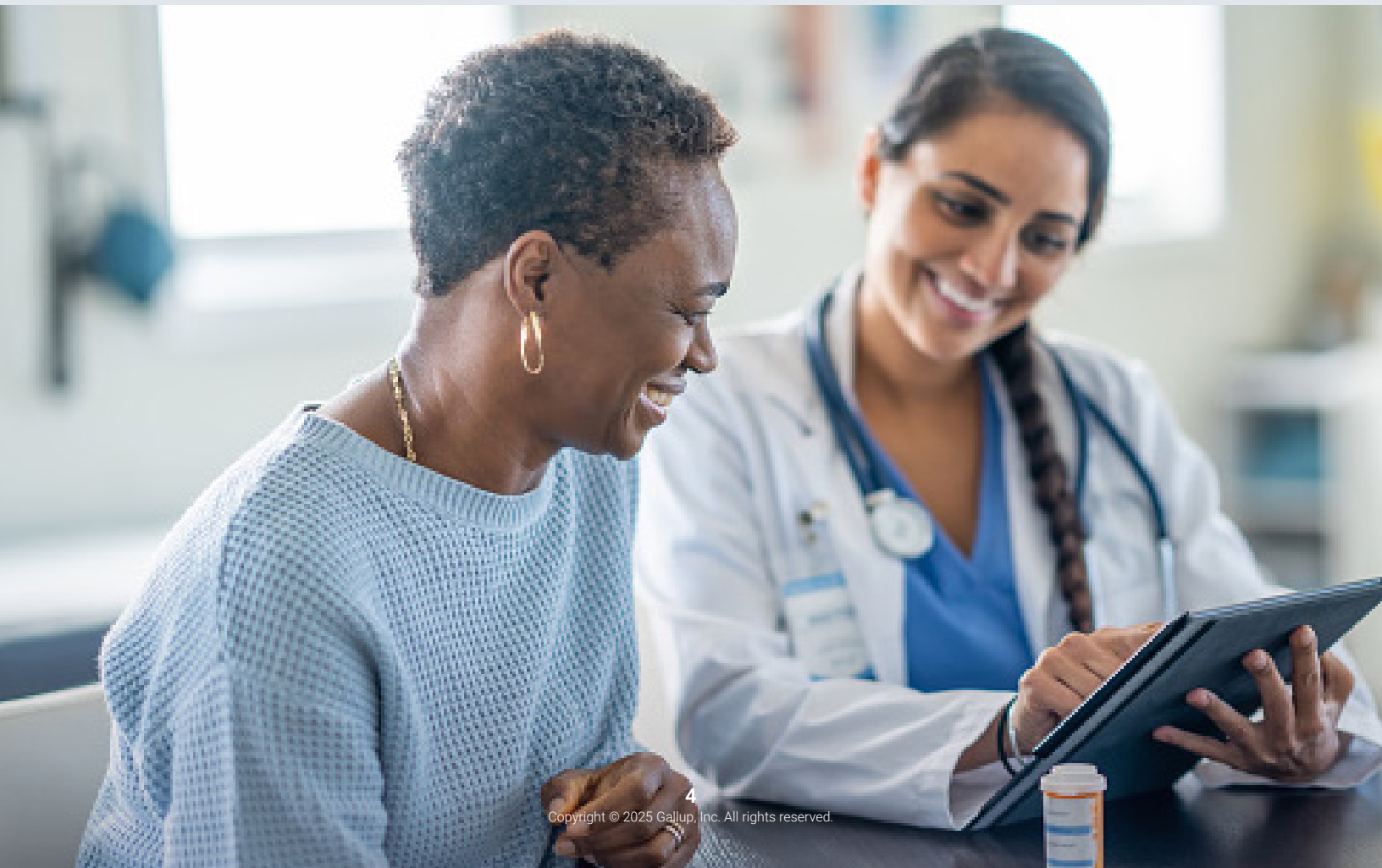
The West Health-Gallup Healthcare Affordability Index

gauges the impact of high healthcare prices and access to care on adults in the U.S.



The West Health-Gallup Healthcare Value Index

measures the perceived value of the care received:
Is the quality of care worth the cost?



Introduction

The percentage of Americans classified as Cost Secure — persons who are able to afford care and medicine and who have access to quality care if it were needed today — is at its lowest level since measurement began in 2021, according to the latest West Health-Gallup Healthcare Affordability Index.

Only about half of U.S. adults (51%) believe basic healthcare is affordable and readily accessible, a 10-percentage-point drop since 2022.

Even among Medicare-eligible adults aged 65 and older, healthcare affordability is down, dropping below 70% for the first time. At the same time, since 2021, affordability among Black and Hispanic Americans has dropped by 13 and 17 points to 41% and 34%, respectively, widening the gap with White Americans, who have remained steady at 58%.

Notably, the percentage of U.S. adults aged 50 to 64 who are Cost Secure has dropped to 48%, well below the high of 63% in 2022 and 10 points lower than the initial estimate of 58% in 2021. While less pronounced, downward trends are also found across all other age groups.

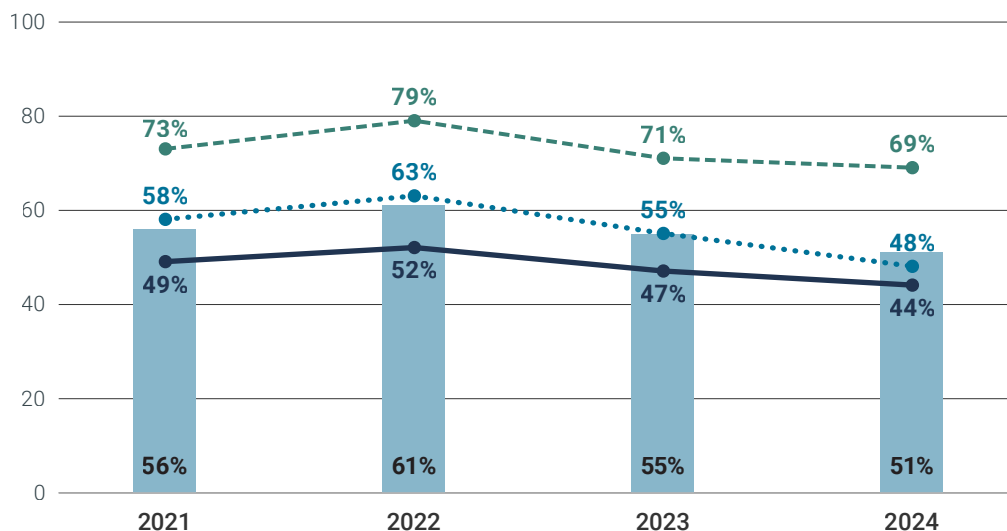
CHART 1

West Health-Gallup Affordability Index, Trended 2021-2024

The percentage of American adults who are Cost Secure in their healthcare has dropped to a new low of 51%, led by a seven-point drop since 2023 among those aged 50 to 64.

% Cost Secure

■ All adults — 18 to 49 50 to 64 — 65 and older



In terms of the perceived value of their healthcare, as tracked by the West Health-Gallup Healthcare Value Index, nearly two in five Americans (38%) observe Poor Perceived Value in U.S. healthcare.

This has improved from a peak of 45% in 2021 but has remained over 35% for the past three years. Only 6% of Americans observe High Perceived Value, which has also remained steady.



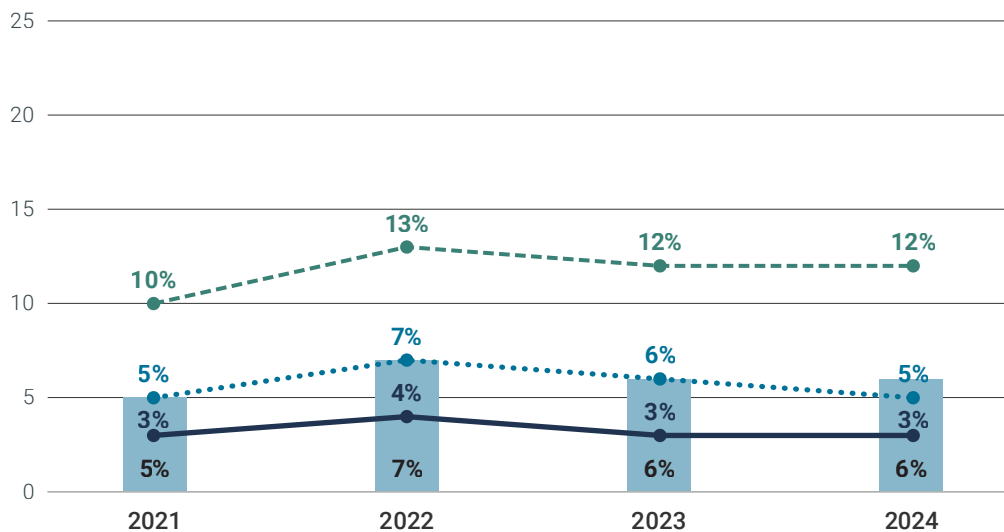
CHART 2

West Health-Gallup Healthcare Value Index, Trended 2021-2024

The percentage of American adults observing High Perceived Value in the U.S. healthcare system has remained low and unchanged since 2021.

% High Perceived Value

■ All adults — 18 to 49 50 to 64 — 65 and older



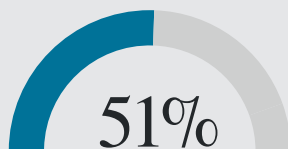


West Health-Gallup Healthcare Affordability Index: Cost Security Hits New Low

The West Health-Gallup Healthcare Affordability Index evaluates three key factors in determining Americans' ability to afford healthcare:

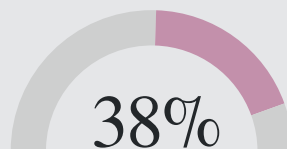
- 1 Care avoidance:** Has there been a time in the last three months when you or a member of your household had a health problem but did not seek treatment due to cost?
- 2 Skipped treatments:** Has there been a time in the last three months when you or a member of your household was unable to pay for medicine that a doctor prescribed because you did not have enough money to pay for it?
- 3 Difficulty today:** If you needed access to quality healthcare today, would you be able to afford it?

Based on their responses, Americans fall into one of three categories:



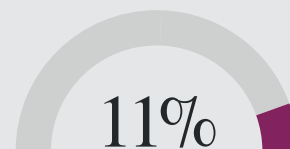
COST SECURE

These persons report no recent occurrences of inability to afford care *or* prescribed medicine in their household *and* have access to quality care if it were needed today.



COST INSECURE

These persons report recent occurrences of being unable to pay for care *or* medicine *or* lack easy access to quality care.



COST DESPERATE

These persons report recent occurrences of being unable to pay for household care, being unable to pay for prescribed medicine *and* feeling that they would not have access to affordable quality care if needed today.

Half of U.S. adults are Cost Insecure or Cost Desperate.

About half of all Americans (49%) are categorized as either Cost Insecure or Cost Desperate, up by four points since 2023. Notably, the percentage of Americans classified as Cost Desperate has climbed into double digits for the first time, reaching 11%. Hispanic, younger and lower-income Americans are among the most likely to report struggling to afford care:

- **Households earning less than \$24,000 annually are 25 times as likely** as those earning \$180,000 or more to be Cost Desperate (25% vs. 1%, respectively). Lower-income Americans also show the greatest increase in being Cost Desperate compared with all other income groups, rising 10 points in the past year alone.
- **Hispanic adults (18%) are more than twice as likely** as White adults (8%) to be Cost Desperate. The percentage of Hispanic adults meeting the criteria for being classified as Cost Desperate has nearly doubled from the initial measurement of 10% in 2021, significantly widening the gap between the two groups. The percentage of Cost Desperate Black adults has climbed to 14%, the highest point yet measured.
- **Adults younger than 50 are over three times as likely** as those aged 65 and older to be Cost Desperate (14% vs. 4%, respectively).



TABLE 1

Percentage of U.S. Adults Classified as Cost Desperate Rising

| | 2021 | 2022 | 2023 | 2024 | Change since 2021 (pct. pts.) |
|----------------------------------|-----------|-----------|-----------|------------|----------------------------------|
| All adults | 8% | 7% | 8% | 11% | +3 |
| AGE | | | | | |
| 18 to 49 | 10% | 9% | 10% | 14% | +4 |
| 50 to 64 | 8% | 7% | 10% | 11% | +3 |
| 65 and older | 3% | 3% | 3% | 4% | +1 |
| RACE/ETHNICITY | | | | | |
| Black adults | 9% | 7% | 11% | 14% | +5 |
| Hispanic adults | 10% | 11% | 14% | 18% | +8 |
| White adults | 8% | 6% | 7% | 8% | 0 |
| GENDER | | | | | |
| Men | 7% | 6% | 6% | 9% | +2 |
| Women | 9% | 8% | 11% | 12% | +3 |
| ANNUAL HOUSEHOLD INCOME | | | | | |
| Less than \$24,000 | 14% | 11% | 15% | 25% | +11 |
| \$24,000 to less than \$48,000 | 13% | 14% | 16% | 19% | +6 |
| \$48,000 to less than \$90,000 | 11% | 9% | 10% | 12% | +1 |
| \$90,000 to less than \$120,000 | 4% | 5% | 2% | 5% | +1 |
| \$120,000 to less than \$180,000 | 3% | 3% | 3% | 3% | 0 |
| \$180,000 or more | 2% | 2% | 2% | 1% | -1 |

An estimated 28.7 million U.S. adults are categorized as Cost Desperate when it comes to affording healthcare.

Significant practical implications exist for being Cost Desperate.

There are substantial differences in financial and health-related experiences and outcomes between those who are Cost Secure and those who are Cost Desperate. Compared with Cost Secure adults, those categorized as Cost Desperate are:

- **at least 10 times as likely** to have cut back on utilities and food to pay for needed care in the past 12 months
- **seven times as likely** to have had a family member or friend die in the past 12 months after not receiving needed treatment due to an inability to pay for it
- **21 times as likely** to be “extremely concerned” that their household will be unable to pay for needed prescription drugs in the next 12 months
- **29 times as likely** to be “extremely concerned” that their household will be unable to pay for needed healthcare services in the next 12 months

A substantial range in Cost Desperate status exists across U.S. divisions.

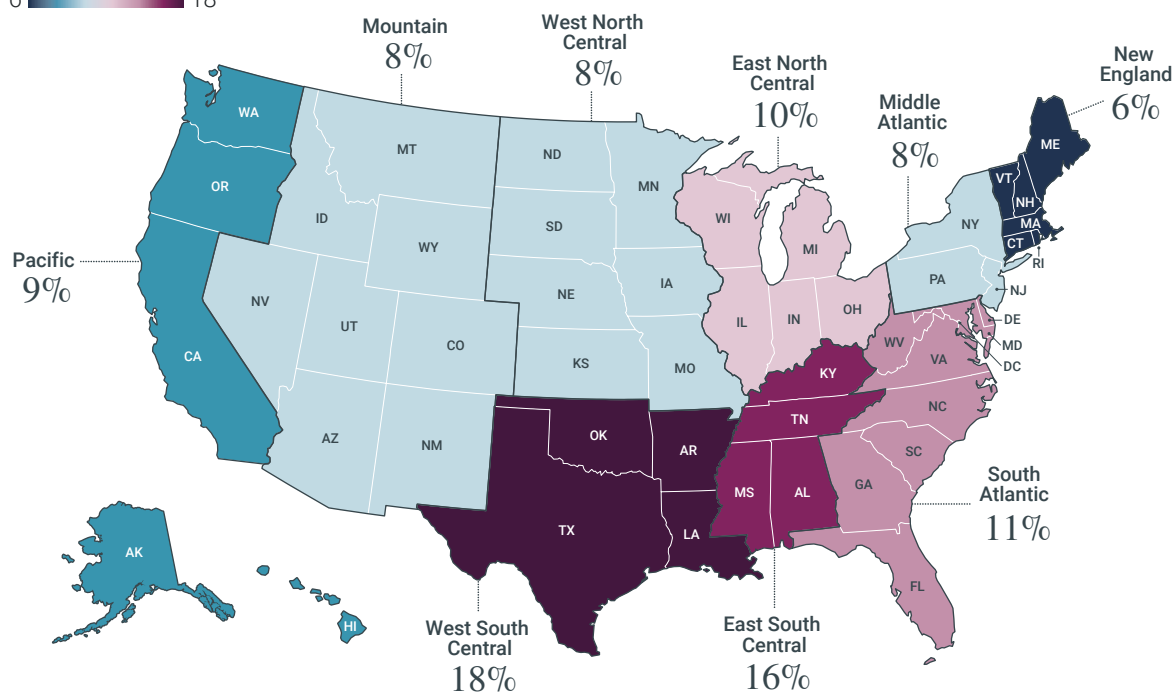
Across nine U.S. Census Bureau divisions, Americans in southern parts of the country are more likely than those in other regions to be classified as Cost Desperate. For example, adults living in the West South Central division (18%) are three times as likely as those living in the New England division (6%) to be Cost Desperate.

CHART 3

U.S. Adults Classified as Cost Desperate, by U.S. Census Division

% Cost Desperate

6 18



Skiping prescribed medicine or drugs because of cost reaches a new high of 18%.

The percentage of Americans recently forgoing prescribed drugs due to an inability to pay for them — a key aspect of the Healthcare Affordability Index — reached a new high of 18% in 2024, up three points from 2023. Among those in households earning less than \$24,000 annually, however, the percentage is much higher: **42% report choosing not to fill prescriptions within the past three months because they could not afford them**, up by 19 points and nearly double what was observed in 2021. Meanwhile, the percentage of Americans forgoing prescriptions in high-income households (2%) has *decreased* by three points during the same period.

Women (20%) continue to be more likely than men (15%) to be unable to pay for prescription drugs, a consistent gender gap found over time. The differences seen between White adults and their Black and Hispanic counterparts, however, have notably increased. Black adults (28%) and Hispanic adults (30%) show increases of 11 points and 13 points, respectively, since 2021, while the percentage among White adults (13%) remains unchanged.

TABLE 2

Has there been a time in the last three months when you or a member of your household has been unable to pay for medicine or drugs that a doctor had prescribed for you because you did not have enough money to pay for them?

% Yes

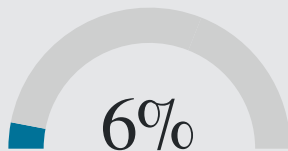
| | 2021 | 2022 | 2023 | 2024 | Change since 2021 (pct. pts.) |
|----------------------------------|------------|------------|------------|------------|-------------------------------|
| All adults | 14% | 13% | 15% | 18% | +4 |
| ANNUAL HOUSEHOLD INCOME | | | | | |
| Less than \$24,000 | 23% | 20% | 28% | 42% | +19 |
| \$24,000 to less than \$48,000 | 21% | 23% | 26% | 26% | +5 |
| \$48,000 to less than \$90,000 | 16% | 14% | 16% | 18% | +2 |
| \$90,000 to less than \$120,000 | 9% | 8% | 7% | 10% | +1 |
| \$120,000 to less than \$180,000 | 6% | 5% | 5% | 8% | +2 |
| \$180,000 or more | 5% | 6% | 6% | 2% | -3 |
| GENDER | | | | | |
| Men | 12% | 10% | 11% | 15% | +3 |
| Women | 16% | 15% | 20% | 20% | +4 |
| RACE/ETHNICITY | | | | | |
| Black adults | 17% | 19% | 22% | 28% | +11 |
| Hispanic adults | 17% | 17% | 25% | 30% | +13 |
| White adults | 13% | 11% | 12% | 13% | 0 |



West Health-Gallup Healthcare Value Index: Few Americans See High Value

The West Health-Gallup Healthcare Value Index comprises three key perceptions that determine the healthcare system's value to Americans:

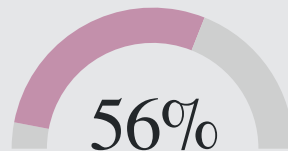
- 1 Systemwide quality of care relative to its cost:** Do you think Americans pay too much, too little or about the right amount for the quality of healthcare they receive?
- 2 Individual quality of care relative to its cost:** Do you think your household pays too much, too little or about the right amount for the quality of healthcare you receive?
- 3 Value of most recent interaction with the healthcare system:** Thinking of the most recent time that you received medical care, either in person or remotely, was your experience worth the cost?



6%

**HIGH
PERCEIVED VALUE**

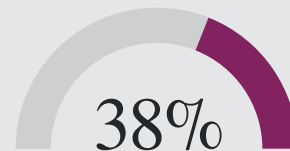
These persons report that both their household *and* Americans generally are paying the right amount (or too little) relative to the quality of care they receive *and* that their most recent care experience was worth the cost.



56%

**INCONSISTENT
PERCEIVED VALUE**

These persons report that either their household *or* Americans generally are paying too much for the quality of the care that they receive *or* that their most recent care experience was not worth the cost.



38%

**POOR
PERCEIVED VALUE**

These persons report that both their household *and* Americans generally are paying too much for the quality of the care that they receive *and* that their most recent care experience was not worth the cost.

Few Americans see healthcare as a good value relative to the cost.

Examining the three items that comprise the Healthcare Value Index:

- **About nine in 10 U.S. adults (89%)** say people across the country are paying too much for the quality of care they receive.
- **Over two-thirds (68%)** believe their own household pays too much relative to the quality.
- When asked to evaluate their most recent healthcare experience, **44% of U.S. adults**, including **51% of those under 50**, say it was not worth the cost.

Nearly four in 10 Americans (38%) observe Poor Perceived Value, similar to the last reading in 2023. Adults younger than 50 (44%) continue to be nearly twice as likely as those aged 65 and older (23%) to perceive poor value in the U.S. healthcare system.



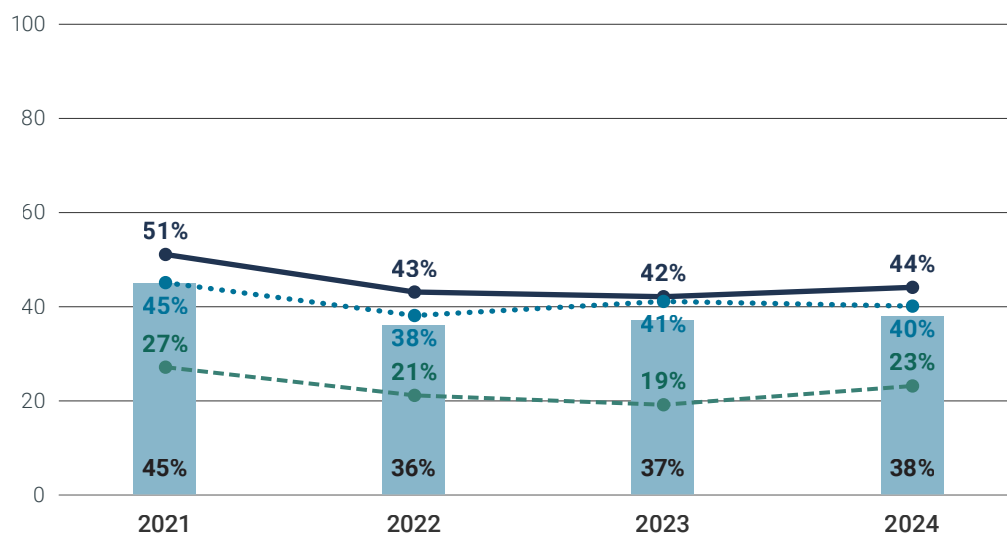
CHART 4

West Health-Gallup Healthcare Value Index, Trended 2021-2024

The percentage of American adults who see Poor Perceived Value in the U.S. healthcare system continues to hover just below 40%, down from the COVID-era high of 45%.

% Poor Perceived Value

■ All adults — 18 to 49 50 to 64 - - - 65 and older



Perceived value in healthcare is associated with several perspectives regarding the care experience.

Perceived value in care is associated with many avenues through which Americans evaluate the U.S. healthcare system. Compared with those who perceive high value, those who perceive poor value are:

- **about one-third as likely** to think their most recent care experience significantly improved their health (13% vs. 37%, respectively)
- **over seven times as likely** to have had a household member's health problem worsen due to postponing care (30% vs. 4%)

Americans who qualify for federally funded healthcare programs such as Medicare and Medicaid are more likely to see value in their care.

A significant portion of Americans — at least one-third across most major demographic groups — view both their own and others' experiences with the U.S. healthcare system as delivering poor value. The sentiment that the quality of care is not worth the cost is widespread regardless of personal characteristics or situations in life.

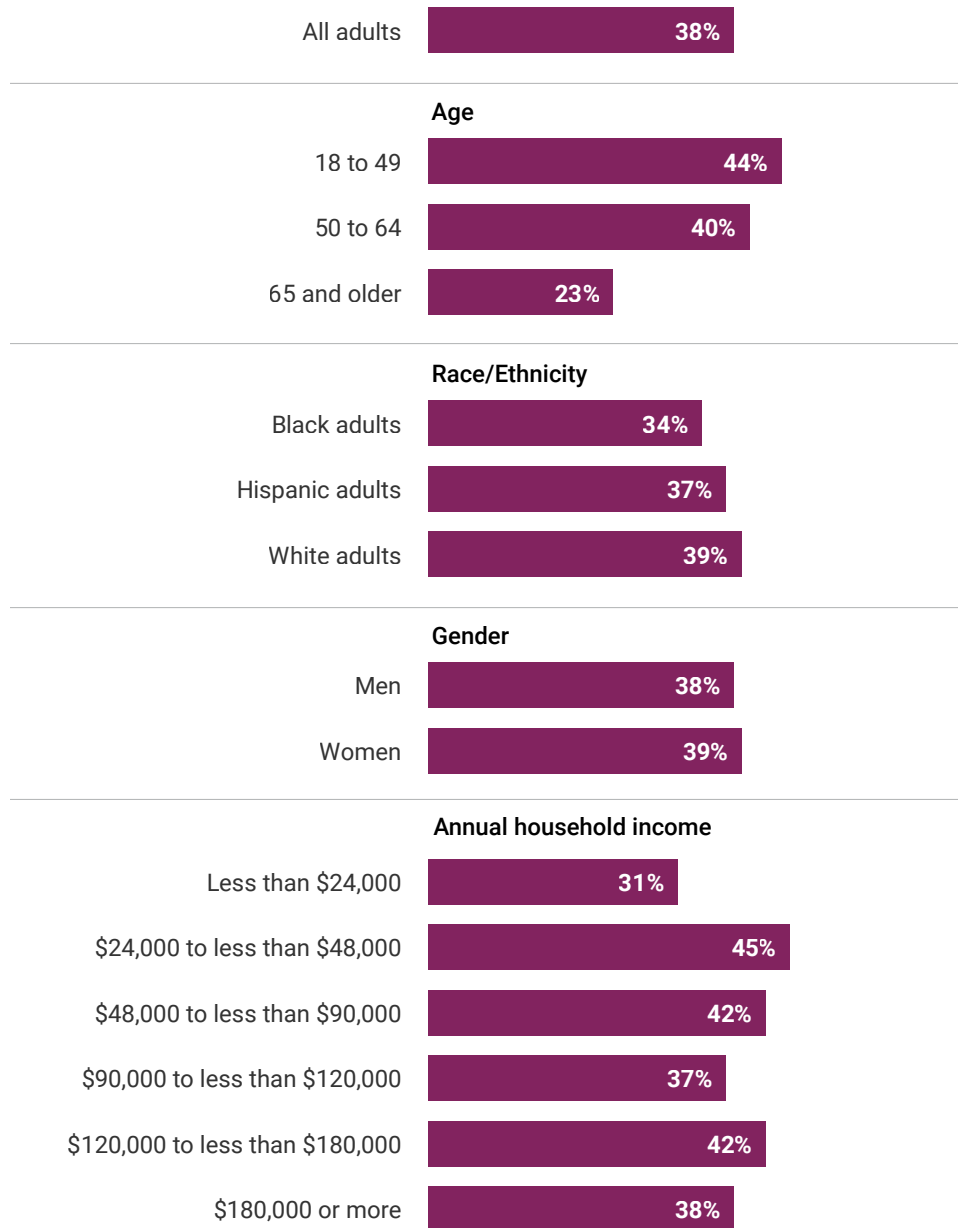
The one exception is among Americans eligible for federal healthcare programs, such as Medicare and Medicaid. Rates of Poor Perceived Value drop considerably among adults aged 65 and older (23%), a population eligible for Medicare. Americans living in households earning under \$24,000 annually are also slightly less likely to report Poor Perceived Value (31%) compared with other household income levels; adults in these households are more likely to qualify for and receive Medicaid benefits.



CHART 5**Percentages of U.S. Adults Perceiving Poor Value**

Nearly four in 10 Americans observe Poor Perceived Value in the healthcare system.

% Poor Perceived Value



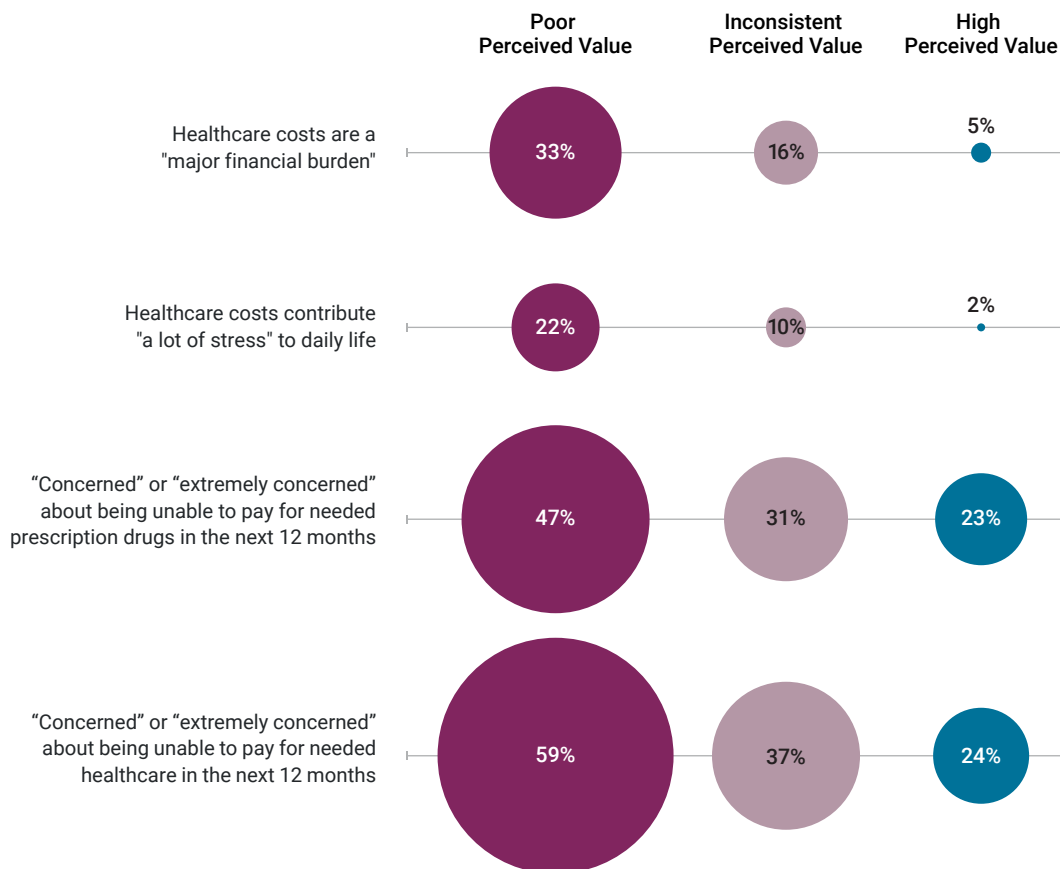
Americans who perceive poor value are more likely to feel the financial and emotional burdens of healthcare costs.

The nearly two in five Americans in the Poor Perceived Value category are much more likely than those in the High Perceived Value category to see healthcare costs as a major financial burden and source of stress. In particular, those in the Poor Perceived Value group are:

- **over six times as likely** to see the cost of care as a major financial burden (33% vs. 5%)
- **11 times as likely** to report experiencing a lot of stress in their daily life due to healthcare costs (22% vs. 2%)
- **more than twice as likely** to report concerns about their ability to pay for prescription drugs (47% vs. 23%) and needed care (59% vs. 24%) in the next 12 months

CHART 6

Poor Perceived Value Increases Financial, Emotional Burdens of Healthcare Costs



Fewer Americans see value in their most recent healthcare experience.

Americans are now slightly less likely than they were in 2021 to report that their most recent healthcare visit was worth the cost. This core component of the Healthcare Value Index has declined among every age group, with the greatest shifts among the youngest and oldest Americans. For adults aged 18 to 29, who have typically been less likely than other age groups to report that care is worth the cost, there has been a seven-point drop, matching what is found among the oldest age group of 65 and older.

TABLE 4

Thinking of the most recent time you received medical care, in person or remotely, was your experience worth what it cost?

% Yes

| | 2021 | 2022 | 2023 | 2024 | Change since 2021 (pct. pts.) |
|--------------------|------------|------------|------------|------------|-------------------------------|
| U.S. adults | 48% | 49% | 47% | 45% | -3 |
| AGE | | | | | |
| 18 to 29 | 42% | 40% | 32% | 35% | -7 |
| 30 to 39 | 40% | 41% | 42% | 39% | -1 |
| 40 to 49 | 42% | 45% | 45% | 39% | -3 |
| 50 to 64 | 49% | 49% | 47% | 45% | -4 |
| 65 and older | 67% | 65% | 65% | 60% | -7 |



Final Thoughts

The West Health-Gallup Healthcare Indices show healthcare affordability in the U.S. is worsening and the perceived value of care remains critically low.

The situation is more severe among Black and Hispanic adults and those in lower-income households, who have been disproportionately impacted by growing disparities in affordability. While older adults (aged 65 and older) continue to report more favorable attitudes toward the cost and quality of healthcare, they are trending downward, and their perceived value of their most recent care experience saw a decrease in 2024 compared with 2021.

Numerous factors have likely played a role in the worsening affordability of care and medicine for lower-income, Black and Hispanic adults since 2021. Medical inflation and general consumer inflation have both declined over the past two years but remain elevated, putting additional strain on already high prices. Additionally, KFF found that the average annual family premiums for employer-sponsored health insurance have risen 7% this year, for the second consecutive year, to over \$25,000, with employees contributing nearly \$6,300, on average.

Recent policy reforms, such as the Inflation Reduction Act's provision to empower Medicare to implement negotiated prices for 10 commonly prescribed drugs beginning in 2026 — with more drugs to follow — is a significant step toward lowering prices. While these reforms are anticipated to improve the affordability of prescription drugs in Medicare, the impact may not be felt by Americans covered under employer-based insurance unless these reforms are adopted by the private sector.

West Health and Gallup will continue to monitor how Americans experience healthcare affordability and perceive its value through these indices. With so many Americans struggling to pay for and access care, it's more crucial than ever to track the effects — or lack thereof — of economic and policy changes on people's everyday healthcare experiences and how these experiences shape the quality of their lives.

Methodology

The West Health-Gallup 2024 Healthcare Indices Survey was conducted by web and mail Nov. 18-Dec. 27, 2024, with 6,296 adults aged 18 and older, living in all 50 U.S. states and the District of Columbia as part of the Gallup Panel™. For results based on the full sample, the margin of sampling error at the 95% confidence level is ± 1.6 percentage points for response percentages around 50% and is ± 1.0 percentage points for response percentages around 10% or 90%, design effect included. Reported subgroups will have larger margins of error, typically ± 3 to ± 5 percentage points.

The 2023 survey (n=5,149) was conducted Nov. 13, 2023-Jan. 8, 2024.

The 2022 survey (n=5,551) was conducted June 21-July 1, 2022.

The 2021 survey (n=4,843) was conducted Sept. 27-30 and Oct. 18-21, 2021.

Gallup weighted the combined samples to correct for nonresponse. Nonresponse adjustments were made by adjusting the sample to match the national demographics of gender, age, race, Hispanic ethnicity, education and region. Demographic weighting targets were based on the most recent Current Population Survey figures for the aged 18 and older U.S. population.

In addition to sampling error, question wording and practical difficulties in conducting surveys can introduce error or bias into the findings of public opinion polls.

About West Health

Solely funded by philanthropists Gary and Mary West, West Health is a family of nonprofit and nonpartisan organizations, including the Gary and Mary West Foundation and Gary and Mary West Health Institute in San Diego and the Gary and Mary West Health Policy Center in Washington, D.C. West Health is dedicated to lowering healthcare costs to enable seniors to successfully age in place with access to high-quality, affordable health and support services that preserve and protect their dignity, quality of life and independence. Learn more at westhealth.org and follow [@WestHealth](https://twitter.com/WestHealth).

About Gallup

Gallup delivers analytics and advice to help leaders and organizations solve their most pressing problems. Combining more than 80 years of experience with its global reach, Gallup knows more about the attitudes and behaviors of employees, customers, students and citizens than any other organization in the world.



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