

TO: PIPC
 FR: Morning Consult
 DT: November 2021
 RE: Results for 2021 PIPC Poll



Morning Consult ran a poll, on behalf of Partnership to Improve Patient Care, focusing on the use of cost-effective assessments to determine the value of coverage and treatment costs. The survey finds that Americans want patients and their doctors in charge of health care decision making and are opposed to the use of cost assessments such as Quality-Adjusted Life Year (QALY).

VOTERS DO NOT WANT GOVERNMENT HEALTH CARE COSTS REDUCED AT THE EXPENSE OF ACCESS TO BEST AVAILABLE TREATMENTS

- When voters were presented two priorities, the first being holding down the cost of health care for the government and the second being making sure patients have access to the best available treatments, 74% of voters chose to prioritize making sure patients have access to the best available treatments.

VOTERS WANT HEALTH CARE DECISIONS MADE BETWEEN PATIENTS AND DOCTORS, NOT SET BY GOVERNMENT GUIDELINES

- Nine in ten (91%) voters agree with the statement that “Health care decisions should be made between patients and their doctors.” This includes 68% who *strongly agree* with this statement.
 - Republicans (92%), Democrats (92%), and Independents (91%) all *agree* with this statement.
- Over six in ten (63%) disagree with the statement that “The government should set guidelines for what treatments doctors should prescribe to patients with different diseases.” This includes 43% who strongly disagree with this statement.

WHEN DECIDING HOW TREATMENTS ARE COVERED, RESEARCH CONSISTENTLY SHOWS VOTERS' TOP CONSIDERATIONS ARE DOCTORS' RECOMMENDATIONS AND HEALTH OUTCOMES FOR INDIVIDUAL PATIENTS

- Among a list of considerations tested for how treatments are covered, current and past PIPC research show that nearly half of voter's top ranked considerations, of the options tested, are doctors' recommendations (2021: 45% / 2019: 47%) and health outcomes for individual patients (2021: 45% / 2019: 48%).

VOTERS DO NOT WANT COST OF TREATMENT TO DETERMINE COVERAGE

- When asked if voters support private health insurers using cost of treatment for the average patient as a rationale to determine what treatments are covered under insurance, half (52%) say they are opposed to this rationale – 31% support this rationale to determine what treatments are covered.
 - Independents (55%), Republicans (52%), and Democrats (52%) all oppose this rationale.
- When presented with more information about coverage rationales, opposition for using cost as a rationale not to cover a treatment for some patients rose to 63%.

VOTERS REJECT THE USE OF “AVERAGES” TO MAKE COVERAGE OR PAYMENT DECISIONS

- When told that some are concerned the use of an average formula or cost-effectiveness to decide what treatment and tests are covered could have unintended consequences for the patients that do not fit the average, 82% of voters said they are concerned about government or their health insurer making decisions based on what works for the “average” patient. This includes nearly half (47%) of voters who are *very concerned* about unintended consequences of using an average formula or cost effectiveness.
- When presented with the following potential consequences of the government setting Medicare coverage or payment decisions based on what works for the “average” patient, over half of voters make it clear that they are *very concerned* this could result in seniors and people with disabilities being less able to get access to their medicines (54%), that the framework will end up focusing on cost cutting instead of health care quality and access (52%), and that this will take away decision making power from doctors (51%).

Concern	Very Concerned	Total Concerned
Seniors and people with disabilities will be less able to access the medicines they need	54%	85%
The framework will end up focusing on cost cutting instead of health care quality and access	52%	84%
This will take decision making power away from doctors	51%	84%
This will unfairly impact our most vulnerable citizens	49%	83%
Patients like me will be less able to access the medicines they need	48%	79%
This will ignore factors that are more important to individual patients, like the ability to work or care for children	47%	80%
This will exacerbate already existing health inequities for people of color.	41%	72%

VOTERS DO NOT APPROVE OF THE USE OF QALY (QUALITY-ADJUSTED LIFE YEAR) MEASURES BY THE VA AND WANT TO EXTEND THE SAFEGUARD AGAINST THE USE OF QALYS

- After learning more about the VA using QALY-based assessments, 53% of voters oppose the VA’s use of QALYS. This includes one in four (27%) who are *strongly opposed* to the VA’s use of QALYS.
- Seven in ten (70%) voters support expanding the statutory protection against cost effective analysis in government health care decisions (like QALYS) under Medicaid. This includes one in four (39%) who *strongly support* of the expansion.
 - Democrats (76%), Independents (68%), and Republicans (65%) are all supportive of expanding the statutory protection.

Methodology: This poll was conducted November 2nd, 2021, among a sample of 1998 Registered Voters. The interviews were conducted online. Results from the full survey have a margin of error of plus or minus 2 percentage points. The past PIPC research poll was conducted February 15-18, 2019, among a sample of 2001 Registered voters. The interviews were conducted online. Results from the full survey have a margin of error of plus or minus 2 percentage points.