State of Patient Access Focus Brief: Patients with lower incomes

Overview

Income and socioeconomic status are intertwined with other characteristics, such as race, sex and gender identity, sexual orientation, and age. When it comes to healthcare access, income may be among the most important factors. Our 2024 State of Patient Access survey defines patients with lower incomes as those in households with less than $50,000 in annual earnings.

2024 State of Patient Access Scorecard

<table>
<thead>
<tr>
<th>Overall grade</th>
<th>Total</th>
<th>Lower Income Patients &lt;$50k</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall Access to Care</td>
<td>C</td>
<td>C-</td>
</tr>
<tr>
<td>Relationship with Healthcare Professionals</td>
<td>B</td>
<td>B-</td>
</tr>
<tr>
<td>Affordability of Prescription Medications</td>
<td>B-</td>
<td>B-</td>
</tr>
<tr>
<td>Access to Treatment through Healthcare Plans</td>
<td>D-</td>
<td>F</td>
</tr>
<tr>
<td>Financial Toxicity</td>
<td>C-</td>
<td>D-</td>
</tr>
</tbody>
</table>

The PAN Foundation’s State of Patient Access initiative aims to further explore healthcare access challenges and their impact on different communities. To crystallize the key findings from the patient survey and synthesize the state of patient access in the United States, we created a scorecard with five dimensions:

1. Overall Access to Care
2. Relationship with Healthcare Professionals
3. Affordability of Prescription Medications
4. Access to Treatments through Healthcare Plans
5. Financial Toxicity

When looking at the five dimensions included in the 2024 State of Patient Access Scorecard, patients with lower incomes rated Access to Treatment through Healthcare Plans (“F”) and Financial Toxicity (“D-”) lower than the patients overall.
Detailed findings

Health status and utilization
• Patients earning less than $50,000 per year were more likely than those who earn $50,000 or more to view their chronic conditions as moderate or severe (72% vs. 61%).
• Patients with lower incomes were more likely to have multiple diagnoses (60% vs. 53% of patients with higher incomes).
• Half (52%) of patients with lower incomes rated their health as poor or fair, compared with 35% of higher-earning patients.
• Half (51%) of patients with lower incomes reported having a disability, compared with 31% of patients with higher incomes.
• Nearly one-quarter (22%) of patients with lower incomes said the healthcare they got in the past year was poor or fair, compared with 15% of patients with higher incomes.
• Patients with lower incomes were twice as likely as patients with higher incomes to say their income hurt their access to the best possible healthcare (24% vs. 12%), and three times more likely to say their disability status negatively impacted access (10% vs. 3%).
• Compared with patients earning $50,000 or more, patients making less than $50,000 were less likely to have had an annual check-up with a HCP (60% vs 68%) or a preventative care appointment (35% vs 42%).

Logistical challenges
• Patients with lower incomes experienced financial struggles paying for care at higher rates than others (16% vs. 12%); the same is true of difficulties paying for the prescription medications they need (13% vs. 9%).
• Patients with lower incomes were three times more likely than patients with higher incomes to lack transportation to appointments (16% vs. 5%).
• Patients with lower incomes were slightly less likely than higher-earning counterparts to have Wi-Fi or high-speed internet access at home (5% vs. 3%). Perhaps not surprisingly, fewer patients with lower incomes had a telehealth appointment in the past year (28% vs. 38% of patients with higher incomes).

Insurance barriers
• Among patients with lower incomes, 35 percent said their health insurance deductible was not at all or not very affordable, compared with 29% of patients with higher incomes.
• Three in five (60%) patients with lower incomes said that trying to understand their health insurance details is nearly impossible, compared with half (50%) of patients with higher incomes.

Financial hardship, anxiety, and toxicity
• One-third (33%) of patients with lower incomes experienced high levels of financial toxicity, compared with 19% of patients who earn $50,000 or more per year.
• One-quarter (26%) of patients with lower incomes have an outstanding medical bill they are not sure how they will pay; that figure is 21% among patients with higher incomes.
• Nearly two-thirds (63%) of patients with lower incomes said unexpected medical bills were unaffordable in the past year, compared with 47% of patients with higher incomes.
• Looking ahead, half (51%) of patients with lower incomes worried about unexpected health costs in the coming year, compared to 43% of patients with higher incomes.
• Most (78%) patients with lower incomes said they would only be able to afford an unexpected medical bill that was less than $500.
• Two in five (40%) patients with lower incomes took some financial action to be able to pay for prescriptions, compared with 34% of patients earning more.
• One-fifth (21%) of patients with lower incomes said they did not get a prescription in the past 12 months because of high out-of-pocket costs, compared with 15% of other patients.
• When they could not get a prescription medication because of cost, 17% of patients with higher incomes scheduled an unplanned HCP visit, compared to just 7% of patients with lower incomes.

Financial hardship, anxiety, and toxicity

<table>
<thead>
<tr>
<th>Visit Type</th>
<th>Patients earning &lt;$50,000/year</th>
<th>Patients earning &gt;$50,000/year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary care</td>
<td>75%</td>
<td>83%</td>
</tr>
<tr>
<td>nurse</td>
<td>19%</td>
<td>24%</td>
</tr>
<tr>
<td>Specialist</td>
<td>44%</td>
<td>57%</td>
</tr>
<tr>
<td>Annual checkup</td>
<td>60%</td>
<td>68%</td>
</tr>
<tr>
<td>Visit to get tests</td>
<td>55%</td>
<td>62%</td>
</tr>
<tr>
<td>Preventive visit</td>
<td>35%</td>
<td>42%</td>
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</tbody>
</table>

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