



Healthcare Costs and Policy Poll End-of-Year 2025

Harris on Demand Platform
October 2025

Background and Objectives

The PAN Foundation is a national charitable foundation and healthcare organization committed to accelerating access to affordable, equitable healthcare through financial assistance, advocacy and education. PAN understands the profound impact that financial assistance has on treatment adherence and quality of life for people living with life-threatening, chronic and rare diseases.

PAN regularly commissions research to better understand patient experience as well as challenges faced when accessing care. The research findings from this rapid poll focus on adults' out-of-pocket spending in 2025 and top concerns for policymakers looking ahead to 2026.

Methodology

**Audience:**

2,084 U.S. adults 18+ including 1,970 that have some form of health insurance and 1,260 that have a chronic condition

**Field Timing:**

October 7 – 9, 2025

**Mode:**

5-minute online survey via Harris on Demand (HOD) omnibus platform

**Weighting:**

Data are weighted to ensure results are projectable to the population of U.S. adults age 18+

Method Statement *(to be included in all press materials):*

This survey was conducted online within the United States between October 7 – 9, 2025, among 2,084 adults (aged 18 and over), including 1,970 that have some form of health insurance and 1,260 that have a chronic condition, by The Harris Poll on behalf of PAN Foundation via its Harris On Demand omnibus product. Data were weighted where necessary by age, gender, race/ethnicity, region, education, marital status, household size, household income, and political party affiliation, to bring them in line with their actual proportions in the population. Respondents for this survey were selected from among those who have agreed to participate in our surveys. The sampling precision of Harris online polls is measured by using a Bayesian credible interval. For this study, the sample data is accurate to within ± 2.5 percentage points using a 95% confidence level. This credible interval will be wider among subsets of the surveyed population of interest.

All sample surveys and polls, whether or not they use probability sampling, are subject to other multiple sources of error which are most often not possible to quantify or estimate, including, but not limited to coverage error, error associated with nonresponse, error associated with question wording and response options, and post-survey weighting and adjustments.

Notation Guide

Please refer to the notation guide for explanations of the various notation and formatting used throughout this deck:

Throughout the report:

- ***“Adults with chronic conditions”*** refers to data among adults who have been diagnosed by a healthcare professional with a cardiovascular condition, mental health condition, chronic pain syndrome, chronic respiratory condition, gastrointestinal condition, musculoskeletal condition, endocrine disorder, thyroid disorder, chronic liver disease, reproductive diseases / conditions, neurological condition, chronic sexually transmitted diseases / infections, renal (kidney) condition, ophthalmologic condition, immunological condition, genetic disorder, infectious diseases, or another chronic health condition
- ***“Adults with rare diseases”*** refers to data among adults who have been diagnosed by a healthcare professional with an autoimmune disease, endocrine disease, hematological condition, metabolic disorder, or another rare disease

In Tables and Charts:

- Percentages may not add up to 100% due to weighting and/or computer rounding.
- Results based on small samples (n<100) should be interpreted as directional only.
- An asterisk (*) indicates a percentage greater than zero but less than 1%; a “ – ” indicates a value of zero.

Base Notes:

- Each slide includes a base note that displays the full question text as shown to the survey respondents as well as the number of respondents who answered each question, for reference.
- Some response labels on slides are shortened for brevity; see notes section for full description provided.

Executive Summary

Executive Summary

By the end of 2025, many Americans will have spent more than \$1,000 on monthly healthcare premiums as well as out-of-pocket costs

- Four in 10 adults (40%) will spend more than \$1,000 on healthcare out-of-pocket expenses before the end of the year, including 9% who will spend more than \$5,000.
- This year, over a third of adults (36%) spent more than \$1,000 on monthly insurance premiums. Of those, 18% spent more than \$2,500.

Rising healthcare expenses are common and are leading Americans to take action to ensure affordability

- Almost 4 in 10 (39%) experienced an increase. Among those who experienced an increase 25% said it was small and 14% experienced a significant increase. More than 2 in 5 insured adults (46%) experienced an increase in the cost of their monthly premiums for healthcare/prescription coverage.
- Nearly a third (31%) of those who experienced an increase in out-of-pocket or premium expenses costs say the cost of their health insurance premium most negatively impacted their personal budget, while a quarter say dental care (27%) and prescription medication (25%) increases hurt the most.
- Most adults (51%) have taken action this year to ensure they can afford their healthcare costs, most commonly – using their credit card (19%). About 1 in 10 are taking steps, such as stretching out their prescriptions to make them last longer (11%), delaying/cancelling treatments to afford care (11%), and not filing prescriptions (9%).

Executive Summary (cont'd)

Healthcare policy changes that could impact access and affordability are concerning Americans

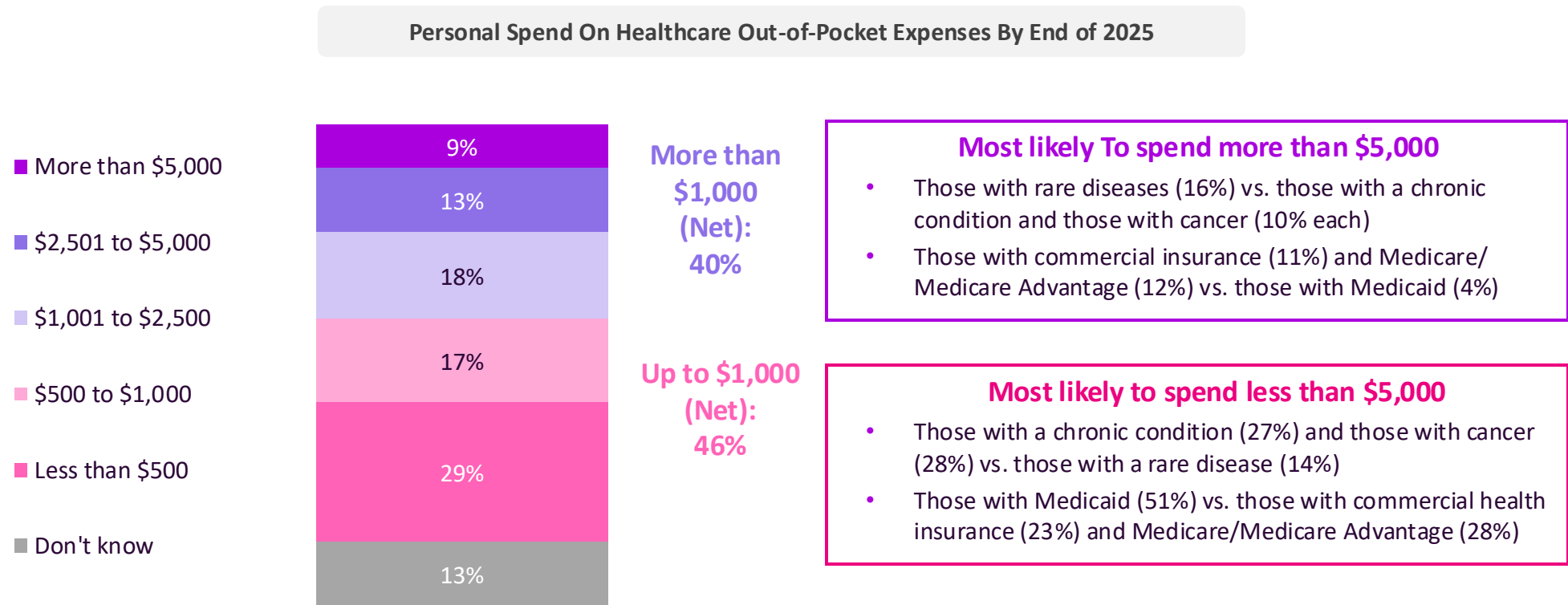
- More than half of adults (57%) are concerned (including 32% who are *very concerned*), that the 'One Big Beautiful Bill' passed in 2025 may prevent access to care for millions through Medicaid.
- About half of adults (49%) are concerned that premium tax credits put in place during the COVID-19 health emergency to help people afford their health insurance premiums purchased via the ACA will expire on December 31 – thus impacting their ability to afford health insurance. More than a quarter (26%) say they are *very concerned* this may affect their ability to afford health insurance coverage.
- Seven in 10 adults (70%) are concerned that there will be an impact on their access to health care in 2026. The most common areas of concern are around increases to healthcare premiums (27%), deductibles (20%), and OOP costs for prescription medications (18%).

Healthcare affordability is key – Americans think it should be a focus for policymakers

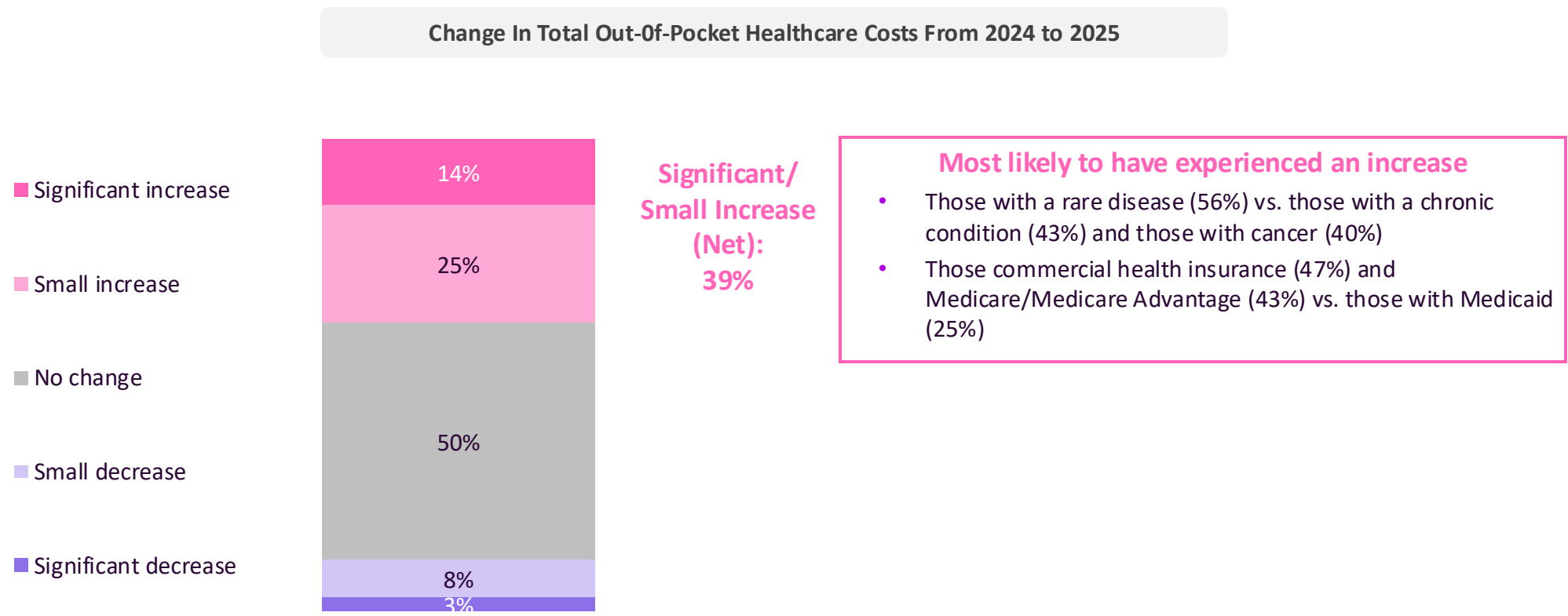
- Most adults think policymakers and elected officials should keep affordability (86%) top of mind when thinking about healthcare issues. The number one affordability factor to keep in mind is keeping prescription costs low (33%), followed by reducing premium costs (32%).
- Many (67%) also think policymakers should keep access/coverage related factors in mind, namely protecting access to care through Medicaid (22%) and increasing access to mental health services (16%).
- Policy/Legislation/Regulation are other factors that more than half of adults (57%) think lawmakers should keep in mind, specifically regulating the use of Artificial Intelligence (AI) to make healthcare decisions (16%) and making premium tax credits on the ACA Marketplace permanent (15%).

Detailed Findings

4 in 10 adults (40%) will spend more than \$1,000 on healthcare out-of-pocket expenses before the end of the year

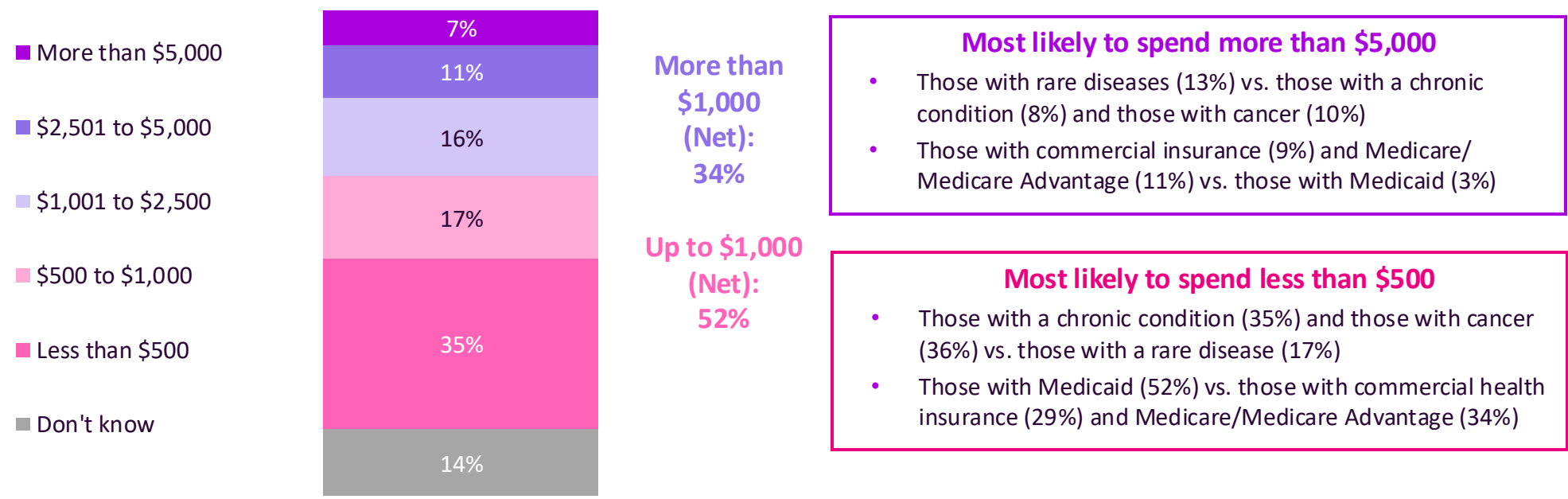


Almost 2 in 5 adults (39%) experienced an increase in out-of-pocket healthcare costs between 2024 and 2025 – with 14% experiencing a *significant* increase



Over a third of adults (34%) spent more than \$1,000 on monthly insurance premiums, 18% spent more than \$2,500

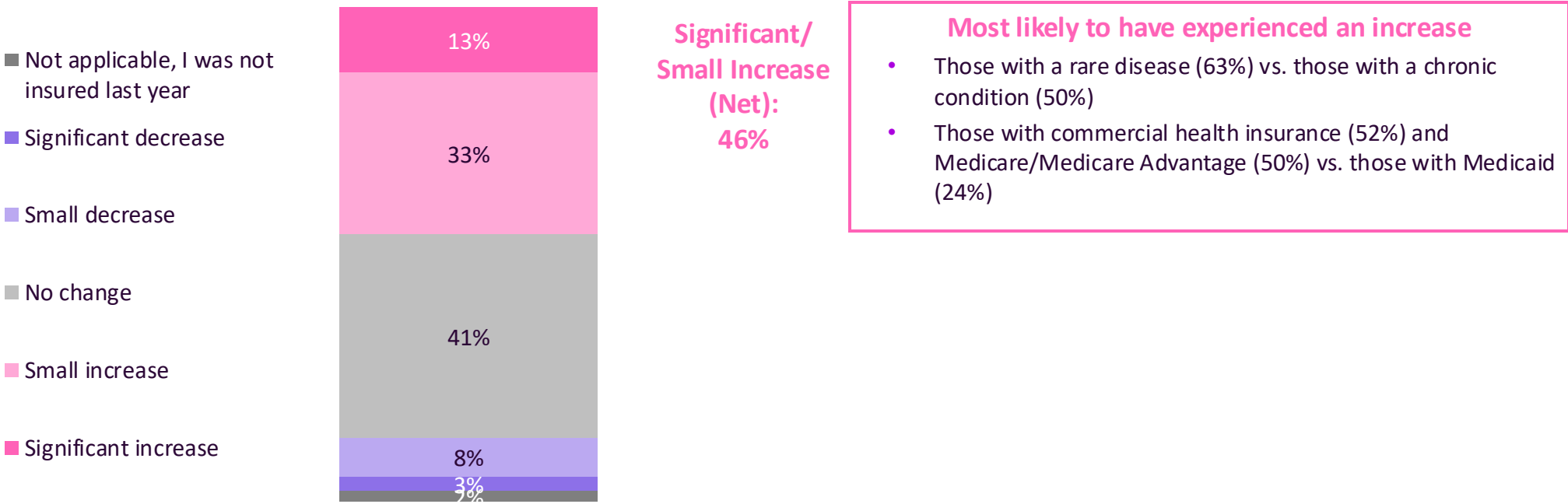
Total Spend On Monthly Premiums for Healthcare/Prescription Coverage In 2025
Base: Adults with Insurance



More than 2 in 5 insured adults (46%) experienced an increase in healthcare/prescription premiums year-over-year – with 13% experiencing a *significant* increase

Change In Monthly Premium Cost of Healthcare/Prescription Coverage From 2024 to 2025

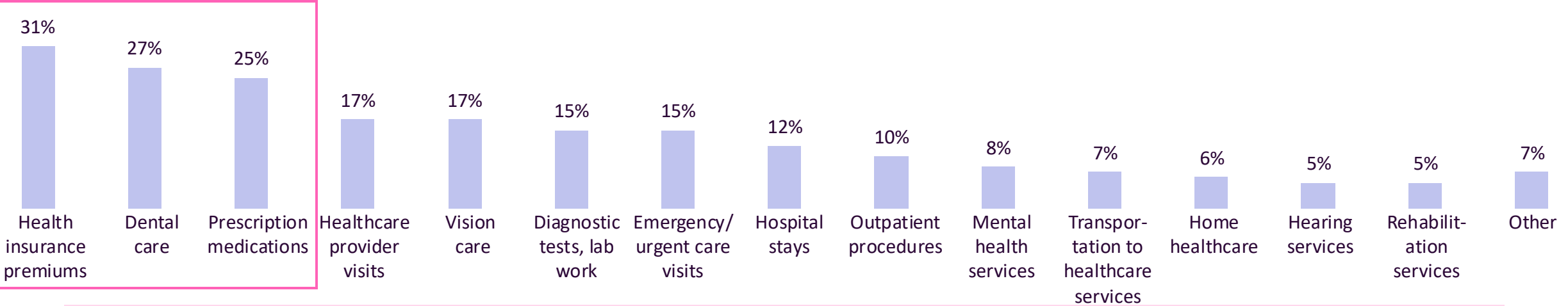
Base: Adults with Insurance



Health insurance premium costs, dental care, and prescription medications were the costs that most negatively impacted personal budgets

Cost That Most Negatively Impacted Personal 2025 Budget

Base: Adults Who Experienced An Increase in OOP or Premium Healthcare Expenses



Selected in Top 3

Have Rare Disease:	Have Chronic Conditions:	Have Cancer:	Have Commercial Insurance:	Have Medicaid:	Have Med/Med Adv:
Healthcare provider visits (30%)	Health insurance premiums (33%)	Health insurance premiums (41%)	Health insurance premiums (32%)	Vision care (28%)	Health insurance premiums (36%)
Prescription medications (29%)	Prescription medications (30%)	Prescription medications (38%)	Dental care (27%)	Dental care (27%)	Dental care (29%)
Health insurance premiums (24%)	Dental care (26%)	Dental care (32%)	Prescription medications (24%)	Prescription medications (27%)	Prescription medications (28%)
Dental care (24%)					

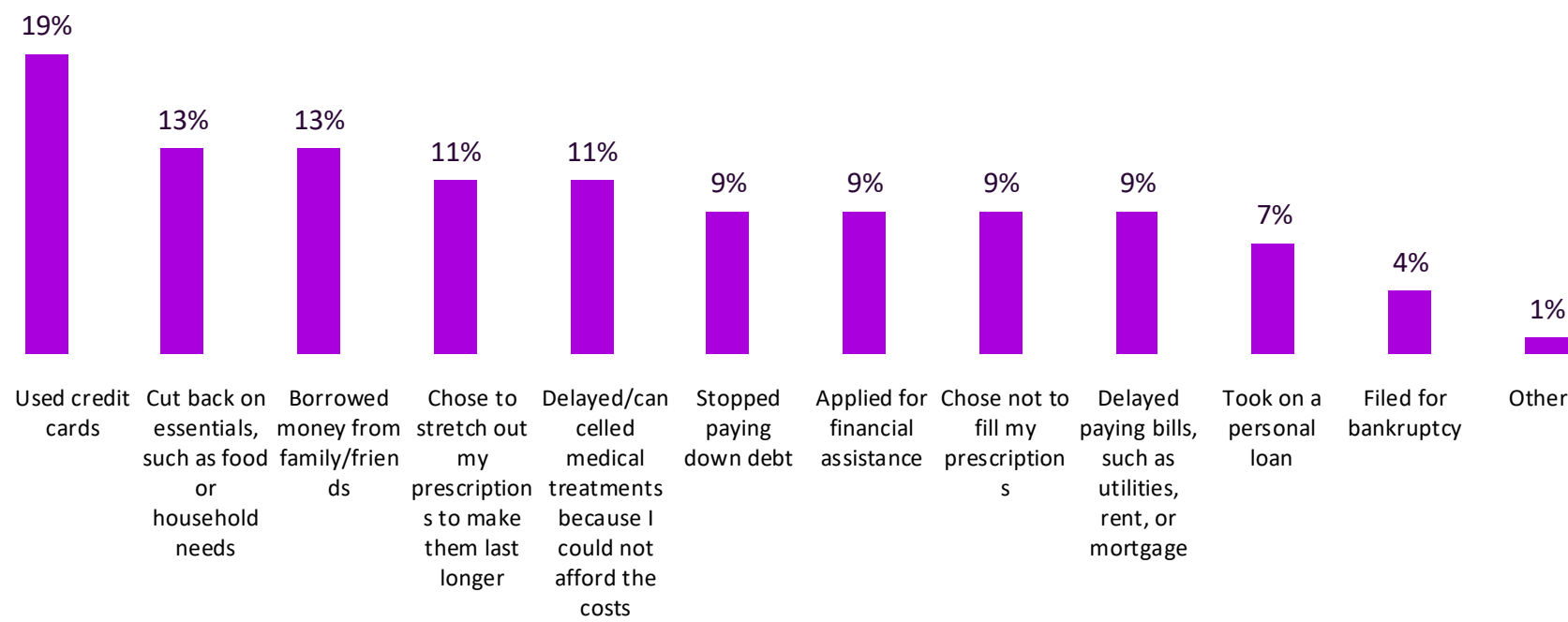
More than half of adults (51%) have taken action to ensure they can afford their healthcare costs, with the most common being using their credit card (19%)

Actions Taken in 2025 To Afford Healthcare Costs

Taken Any
Action (Net):
51%

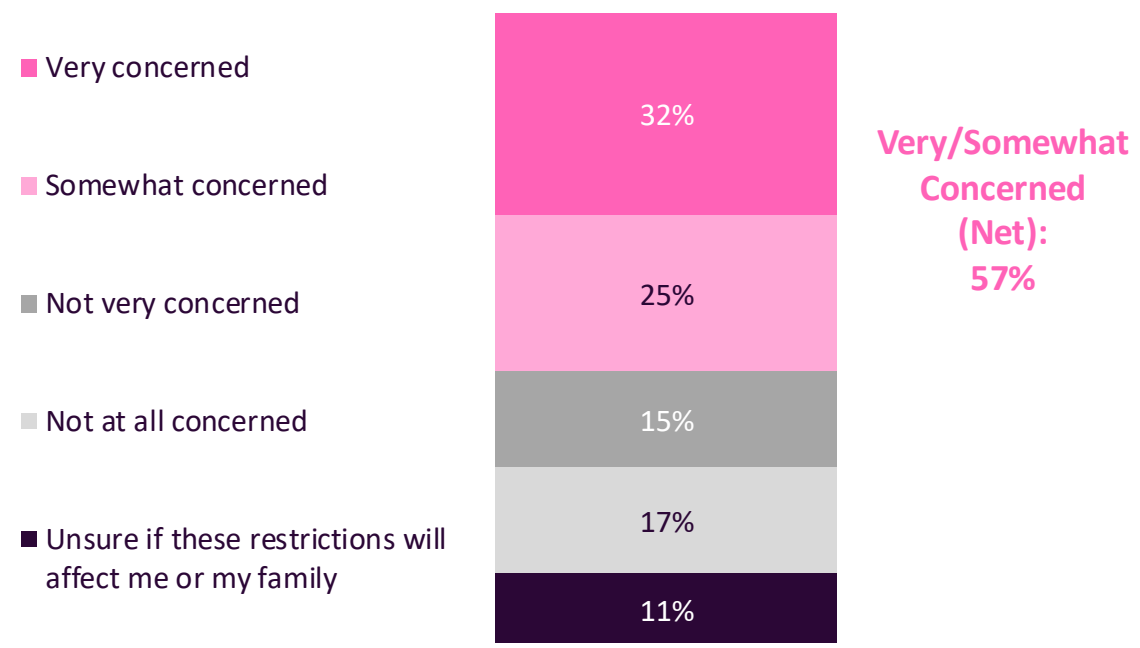
Most likely to have taken (any) action

- Those with a rare disease (82%) vs. those with a chronic condition (56%) and those with cancer (48%)
- Those with commercial health insurance (58%) vs. those with Medicare/Medicare Advantage (48%)



Nearly 3 in 5 Americans are concerned that the 'One Big Beautiful Bill' may prevent access to care for millions through Medicaid – including a third (32%) who are *very concerned*

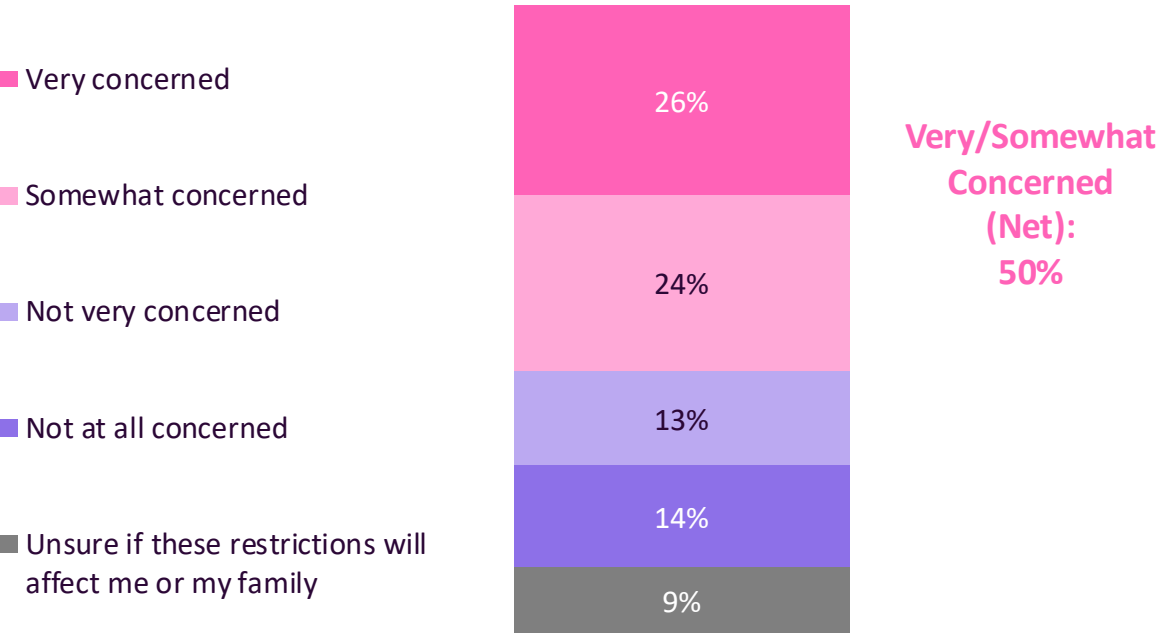
Concerns About One Big Beautiful Bill Potentially Restricting Access To Care Through Medicaid



- Most likely to be concerned**
- Those with a rare diseases (74%) vs. those with a chronic condition (62%) and those with cancer (55%)
 - Those with Medicaid (70%) vs. those with commercial insurance (60%) and Medicare/Medicare Advantage (55%)
 - And *very concerned* (43% vs. 33% and 32% respectively)

Half of adults (50%) are concerned as COVID-era ACA premium tax credits will expire on December 31 – thus impacting American’s ability to afford health insurance

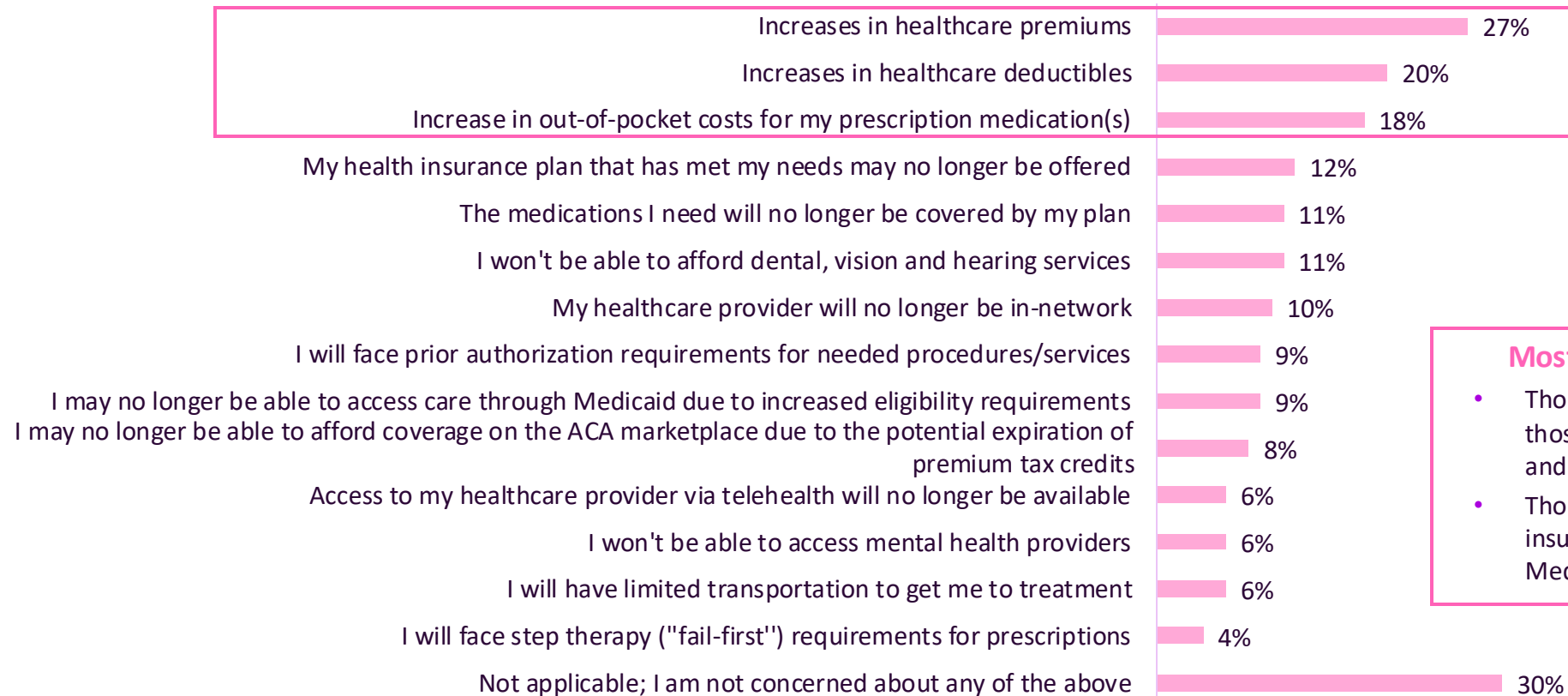
Concerns About Expiration of Tax Credits And The Impact on Ability to Afford Health Insurance Coverage



- Most likely to be concerned**
- Those with a rare disease (69%) vs. those with a chronic condition (53%) and those with cancer (43%)
 - Those with Medicaid (60%) vs. those with commercial health insurance (54%) and Medicare/Medicare Advantage (46%)

Looking ahead to 2026, Americans are most concerned about increases to healthcare premiums (27%), deductibles (20%), and out-of-pocket costs for prescription medications (18%)

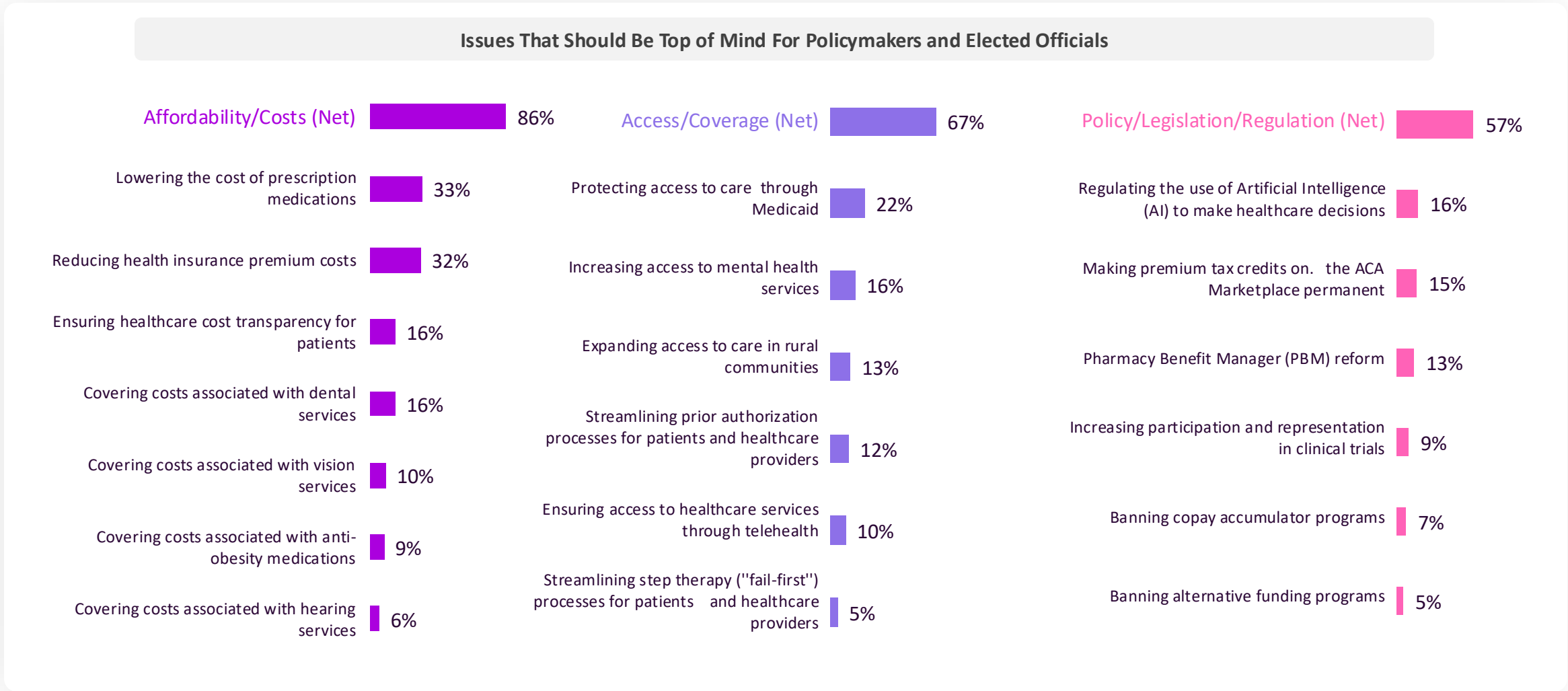
Biggest Concern About Impact to Access to Health Care



Most likely to have a concern

- Those with a rare disease (92%) vs. those with a chronic condition (78%) and those with cancer (72%)
- Those with commercial health insurance (76%) vs. those with Medicare/Medicare Advantage (71%)

American believe healthcare affordability/costs should be top of mind for policymakers and elected officials in 2026 – especially lowering the cost of prescription medications and premium costs

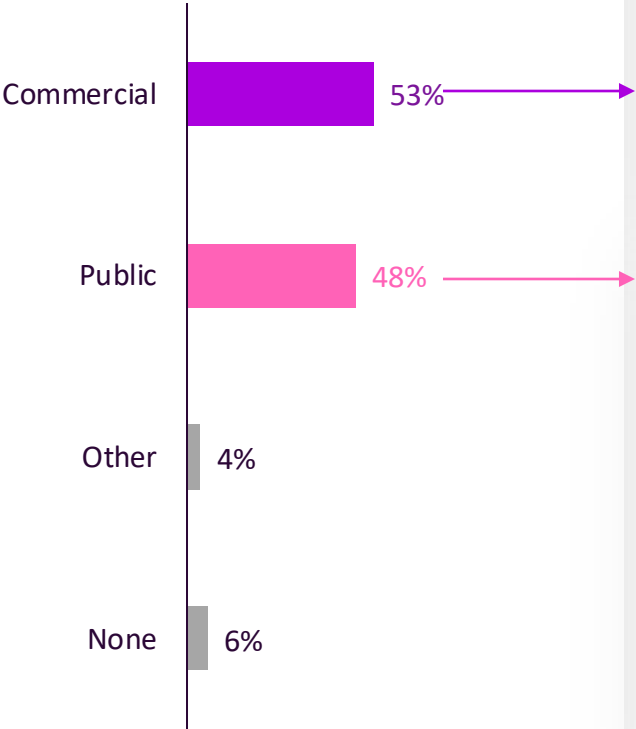


Demographics

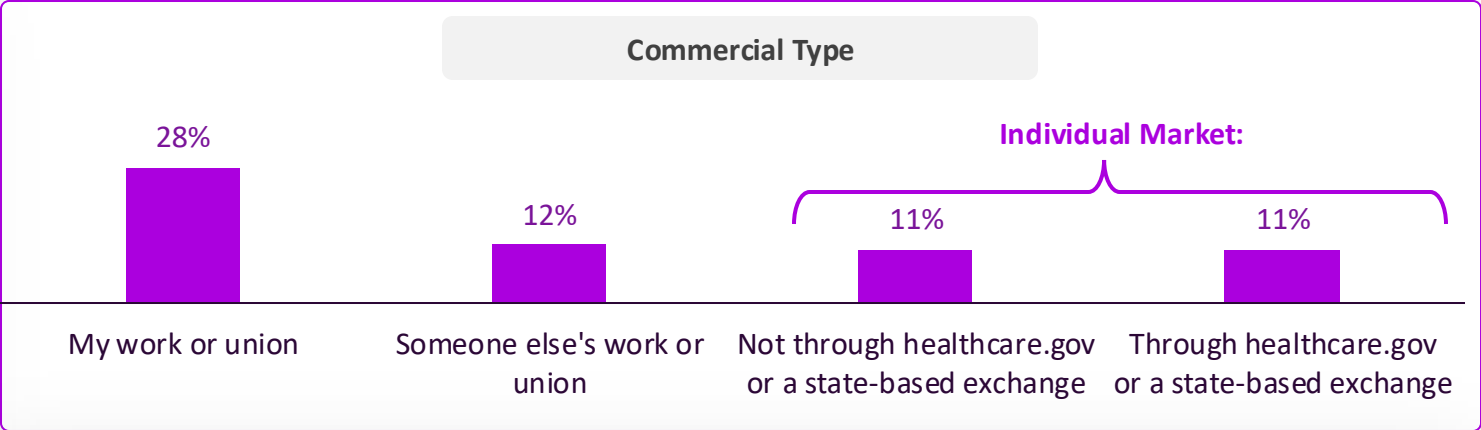
Most adults have commercial insurance, mainly through their work or union; nearly a third (32%) have a Medicare/Medicare Advantage public option

RESULTS BASED ON ALL ADULTS

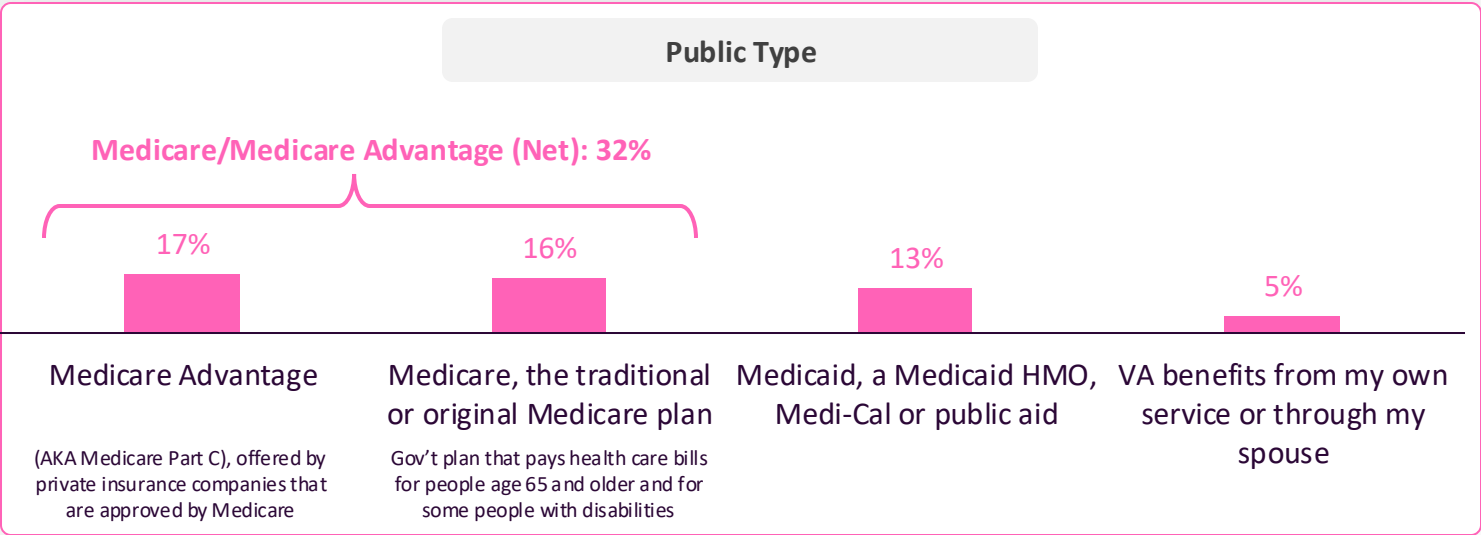
Insurance Type



Commercial Type



Public Type



Demographics

	<i>All adults</i>	<i>Commercial health insurance</i>	<i>Medicaid</i>	<i>Medicare/Medicare Advantage</i>
<i>Base size:</i>	2,084	1,146	262	663
Gender				
Man	48%	51%	40%	49%
Woman	50%	47%	58%	49%
Other/prefer not to answer	2%	2%	2%	2%
Age				
18-34	29%	31%	42%	20%
35-44	17%	22%	21%	9%
45-54	15%	20%	12%	4%
55-64	16%	19%	19%	9%
65+	23%	9%	6%	58%
<i>Mean</i>	<i>48</i>	<i>44.1</i>	<i>40.7</i>	<i>58.1</i>
Household income				
<\$50k	24%	16%	48%	22%
\$50k - \$74.9k	15%	15%	16%	14%
\$75k – \$99.9k	12%	15%	7%	14%
\$100k+	48%	56%	29%	49%
Decline to answer	1%	-	1%	1%

	<i>All adults</i>	<i>Commercial health insurance</i>	<i>Medicaid</i>	<i>Medicare/Medicare Advantage</i>
<i>Base size:</i>	2,084	1,146	262	663
Region				
Northeast	17%	21%	11%	18%
Midwest	20%	20%	22%	21%
South	39%	37%	34%	38%
West	24%	22%	34%	23%
Education				
HS or less	35%	29%	49%	37%
Some college	29%	28%	33%	26%
College grad+	36%	43%	18%	37%
Employment Status				
Employed (FT, PT, self)	65%	84%	60%	42%
Not employed	11%	6%	22%	9%
Retired	20%	8%	11%	49%
Other	9%	7%	15%	6%
Marital Status				
Married	45%	53%	20%	48%
Not married	55%	47%	80%	52%

Demographics

	<i>All adults</i>	<i>Commercial health insurance</i>	<i>Medicaid</i>	<i>Medicare/Medicare Advantage</i>
<i>Base size:</i>	2,084	1,146	262	663
Urbanicity				
Urban	33%	34%	43%	30%
Suburban	50%	52%	39%	53%
Rural	17%	14%	18%	17%
Race/Ethnicity				
White (not Hispanic)	59%	59%	45%	67%
Hispanic	18%	17%	29%	12%
Black (not Hispanic)	12%	11%	16%	12%
Asian (not Hispanic)	7%	7%	8%	5%
Other (not Hispanic)	5%	6%	3%	3%
Primary Residence				
Homeowner	64%	68%	44%	72%
Renter	34%	31%	50%	27%
None of these	2%	1%	5%	1%
Children under 18 in HH				
Yes	39%	47%	44%	27%
No	61%	53%	56%	73%