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COST & COVERAGE COLLABORATIVE

Cost & Coverage Collaborative

Key findings from QualBoard discussions among Black and AAPI adults nationally in June of 2025

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Research Objectives

1

UNDERSTAND

Understand how healthcare fits into people's broader policy priorities, including which aspects of the system feel most broken and most urgent to fix.

2

CHANGE

Explore what kind of change people want to see—whether that's cost relief, structural reform, or something in between—and how achievable they believe those changes are.

3

BARRIERS

Identify the major perceived barriers to progress, such as corporate influence, political inaction, or systemic dysfunction—and uncover who or what people hold accountable.

4

ENGAGEMENT

Gauge emotional engagement with the issue, particularly among those who feel discouraged — what it takes to move people from resignation to a belief that change is possible.

5

MESSAGING

Test early messaging directions that motivate people to demand government accountability — not just for access, but for a more equitable, affordable, and functional healthcare system.

Methodology

Audiences

N = 25 AAPI adults nationally
N = 25 Black adults nationally

- Mix of ages, mix of genders, mix of geographies, mix of levels of interaction with healthcare system
- Excludes strong opposition to healthcare reform

Details

3 QualBoard discussion board sessions over a period of a week conducted online

Field Dates

June 18th – June 25th, 2025

NOTE: Prior to passing of Big Beautiful Bill

Overall Key Takeaways

1 Participants are clear-eyed about the problems with the healthcare system, many from direct experience, and find it to be an extremely important issue.

- Participants face stress and anxiety related to healthcare costs in their own lives and have witnessed racial disparities in access to care in their own communities. Participants organically connect high costs of healthcare to insurance companies caring more about their profits than patients and how the system benefits the wealthy and corporations above all.

2 Corporate interests and money in politics need to get out of the way for meaningful change in the healthcare system to be possible.

- Participants think change to healthcare should be possible, but as a precursor to that change, a shift is needed from policy being influenced by lobbied interests of Big Pharma and insurance companies to instead centered around the needs of the people. Within the current system, participants describe a two-way collaboration where government regulates/holds corporations accountable to fair prices, and corporations cooperate.

3 Unlike other issues, there is high agreement across partisan lines that healthcare should be more affordable and accessible to all.

- While Republicans, Independents, and Democrats may see the issue of healthcare affordability and access through different lenses, there is a common theme that healthcare costs are outrageously high in this country, change is needed to bring them down, and that the government should play a role in that change.

4 Black and AAPI adults have experienced racial disparities in healthcare in different ways. They agree that no one should be forced to choose between healthcare and paying for groceries, gas, and other necessities.

- When polled, the statement on having to choose between healthcare and basic goods resonated most and was language participants had organically used earlier in the discussion board, relating back to personal experience with this impossible dilemma.
- Black participants report not being taken seriously by healthcare providers and lack of healthcare facilities in their neighborhoods, and AAPI participants point out the need for more preventative screening and testing in their communities, as well as language and cultural competency.

Healthcare Importance

Where does healthcare rank among the biggest issues facing the country today for most people?

1. Healthcare Importance

2. Pain Points in Healthcare

3. Healthcare Reform

4. Values & Messaging

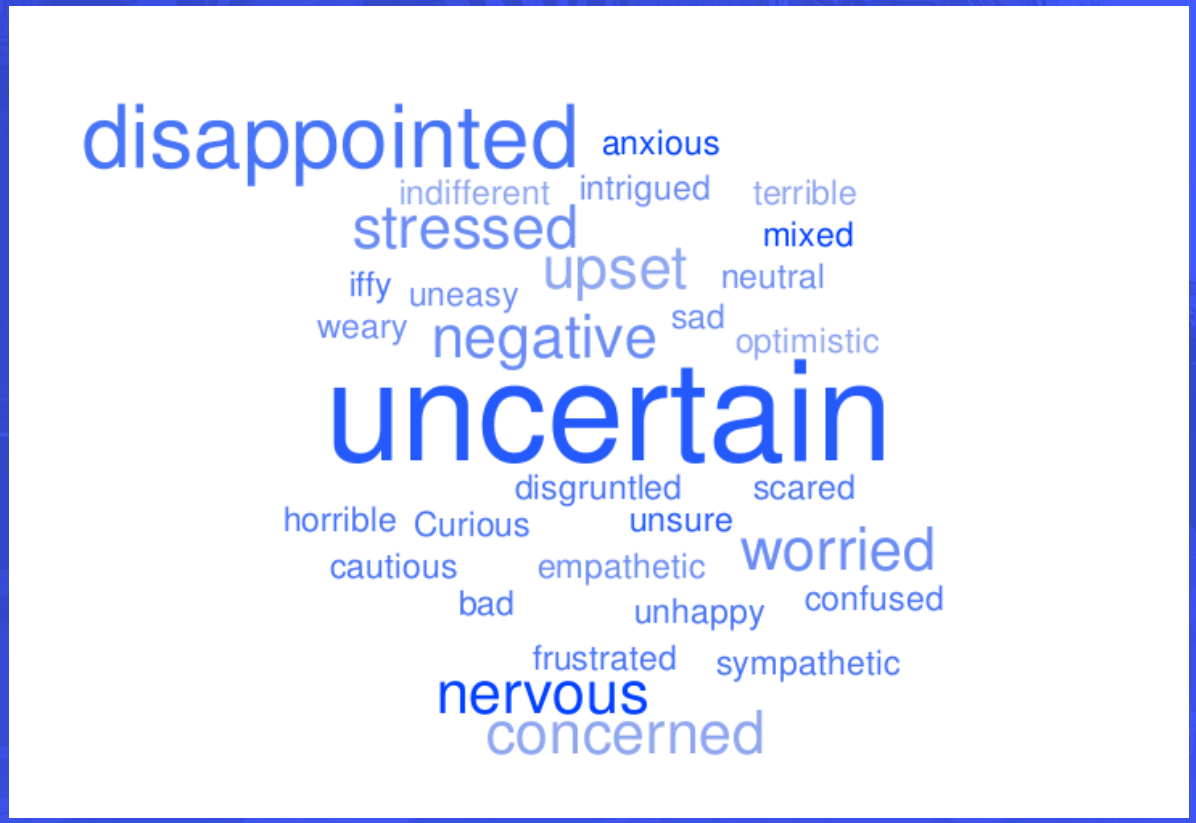
5. Conclusion

Healthcare Importance Findings

Where does healthcare rank among the biggest issues facing the country today for most people?
Healthcare is top-of-mind for some participants initially when asked about most important issues facing the country, but news cycles influence myriad of other issues in the forefront.
When probed, participants express that healthcare is an extremely important issue, and feel it deserves more attention.
Most participants feel directly and/or indirectly affected by problems with the healthcare system.
Participants are clear-eyed on the problems with the healthcare system organically, mostly focused on high costs and profit-driven motives from corporations and government officials.

Participants were overwhelmingly unhappy about the current state of the country, citing the Administration and economy as contributing factors.

I feel _____ about the way things are going in the U.S. these days. What's making you feel this way?



Key issues: Presidential administration, Economy/Cost of Living, Racism, Immigration, Healthcare, Job security, International Conflict

Healthcare: "I feel that healthcare is a huge facing everyone right. Especially when you have no income. I feel that **people who don't have insurance do not get fair healthcare**. This is personal because **I have been through it**... Also, I feel that **the whole whole healthcare industry needs a overhaul and to be reconstructed**." – Black Woman

Rights threatened: "It's getting harder and harder to find good news... I've seen **people argue over things that I believe should be basic human rights**. Right now, I'm just hoping if I keep my head down I can walk by the controversy, but doing nothing counts as doing something. Looking away and keeping to yourself is how problems grow. **I just don't know what to do anymore**." – Black Nonbinary person

Economy, Job market: "The tariff or the trade war has made our stocks crash, we have lot of people looking for jobs , economy is down , in May U.S. credit ratings got downgraded ,inflation is rising , taxes and healthcare cost have gone up . So sometimes we wonder if our retirement savings will be enough . not sure what new policy and changes would be implemented." – AAPI woman

Participants believe healthcare is an important issue facing the country, with many prioritizing it as the most important when considering personal issues.

Participants feel healthcare is very important, but that there are other issues in the foreground currently. They immediately note that healthcare should be more *affordable, fair, available* and *accessible*.

IMPORTANCE

"Health care is **extremely important every one needs healthcare, some more than others, and should have access to affordable health** and that looks different for everyone **whether it's mental or physical it should be available.**" – Black woman

"Healthcare is **among the most important issues facing our country and possibly the most important issue especially from my personal perspective.** This is because having **access to quality and affordable healthcare has become increasingly unattainable these days.**" – AAPI Woman

"**Healthcare is important**, I know health can change rapidly and **I don't feel secure that I would be able to afford healthcare costs if something drastic happens.**" – Black woman

PRIORITIZATION

"**Healthcare is vital** because I am going through alot of health issues right now, where I need to be able to receive care without any issues. Also, I feel that **healthcare should be automatically include transport, not just for elderly, disabled, and veterans**, but for those who dont have transportations to their appointments period." – Black woman

"**Healthcare is not as important as the other issues currently. Healthcare also seems to be a longer-term (years) issue that needs to be addressed although not immediately.** It seems to have been **usurped by these other issues now.**" – AAPI man

"**While issues like tech regulation and civil rights are really important to me as a CS major, I still look at healthcare as a high priority...** Even though I don't need pay for it right now since I'm on my parents' insurance plan, I am **constantly realizing how important it is for the healthcare system to be fair and unbiased with its patients for the future.**" – Asian man

Participants are mainly hearing about funding cuts, raising costs, and insurance companies' practices in the news, but many aren't hearing much about healthcare at all.

What, if anything, have you heard about healthcare in the news lately? If you saw any news related to healthcare online recently, if you'd like you can attach a link to the article or upload a screenshot of the article webpage.

Some participants associate Trump with raising healthcare costs by cutting funding, while others saying he is working on lowering prescription drug prices.

Funding cuts: "I have read about how the Trump administration **wants to limit the amount of funding allocated to healthcare costs, such as coverage given by Medicaid and Medicare**." – AAPI woman

Drug Prices: "I read on Google news app that **President Trump is working on reducing drug prices by up to 50%**." – AAPI woman

Affordability: "They're **taking away so much from people that truly can't afford their medical treatments and their prescriptions** and that's not right. My family depends on certain medications and to know that it can at anytime be taken away is heartbreaking." – AAPI woman

No news: "I honestly **have not seen anything lately in the news about healthcare**." – Black woman

Insurance companies, Affordability: "I have noticed the different companies having **issues fulfilling claims and also most consumers having issues with the new premiums due**, that doesn't equal the amount of coverage received." – Black man

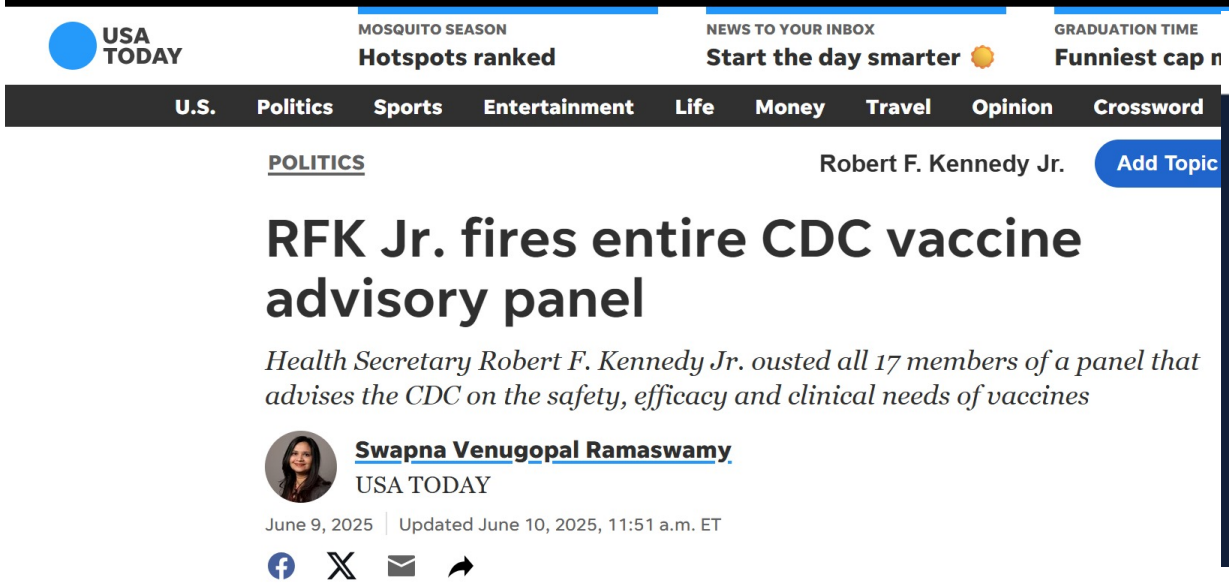
Affordability: "I have heard about the **costs of healthcare going up and making it more difficult for people to afford it and have access** to good quality healthcare. The **costs of prescription medications have also increased** and there has been talk in the news about the **government wanting to regulate drug companies**, so the price of prescription drugs are not so high." – AAPI woman

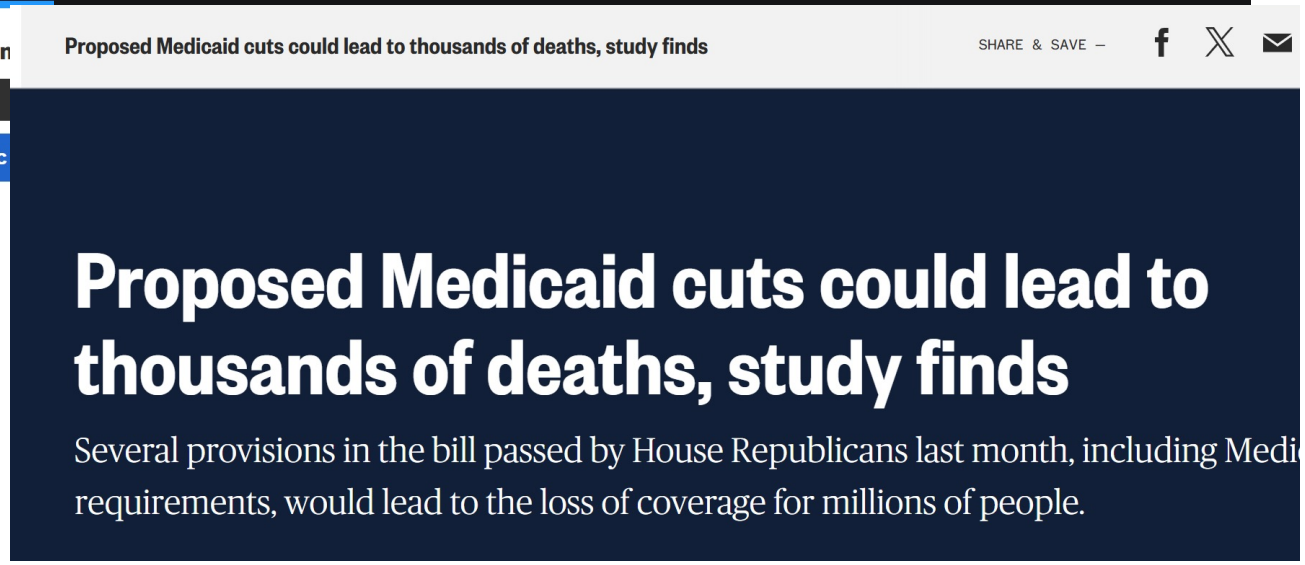
Insurance companies, large hospitals: "I'm hearing that **insurance companies have far too much power in healthcare decisions**, and **large hospital systems are taking over smaller businesses**." – AAPI man

No news: "I haven't heard much as our **News media is focused on other 'More Important' issues. Healthcare is very important but is not the news of the moment**." – Black man

Participants provided links to healthcare topics reflective of the variety of topics people associate with healthcare-related issues.

What, if anything, have you heard about healthcare in the news lately? If you saw any news related to healthcare online recently, if you'd like you can attach a link to the article or upload a screenshot of the article webpage





Most participants did not have a favorable view of healthcare in the U.S. due to high costs and prioritizing profit over patients, with many comparing the system to other countries.

What do you feel when you think about healthcare in this country, if anything?

"I feel that there are **some pros and cons to the health care in this country**. We have **pretty good health care benefits** for those who are low income but **not so good health care for the middle class and higher**." - Black woman

"I have a **distasteful outlook** on how our government 'handles' those who need healthcare. Such as the mentally ill and physical ill individuals. **We need fair and helpful healthcare for all**." – Black woman

"We **could have decent health care like other countries if they weren't so money hungry. It's ONLY about money**, it's **not about the things that can make the people feel better or have a better quality of life**." – AAPI woman

"I think it is a **broken system, especially when you look at other countries.** It costs so much to obtain healthcare, yet the value is not there. For example, as a country, **the healthcare spend is much higher than other countries. However, our health is not noticeably better**." – AAPI Woman

"I feel that we have **some of the best healthcare in the country if you can afford it.** I believe that **our healthcare cost are way out of control**." – Black man

"**Sadness, disappointment, anger**. I feel like **our healthcare system is intentionally broken so people can make ridiculous sums of money off the backs of hardworking and suffering Americans**." – AAPI man

"When I think about healthcare in this country, I feel **unsettled and disappointed** because I feel like our healthcare system is **failing us more and more every day**. Ideally **American healthcare should be the best in the world**, considering that the United States of America stands as the symbol of freedom, power and positivity, as well as strength and opportunity out of all of the countries in the world, and to experience severe deterioration in our healthcare system like this, including **healthcare disparities, over-expensive healthcare services and treatments, lack of resources and access to medical care for many civilians** is **alarming and depressing**." – AAPI Woman

Even if a healthcare issue didn't directly impact them, many of the participants discussed loved ones affected by healthcare costs, access to prescriptions, and a fear of no longer being able to afford care.

Is healthcare an issue that impacts you, your loved ones, or community? If so, in what ways? Please feel free to share personal stories if you feel comfortable doing so. What are your biggest worries or concerns when it comes to healthcare for you and your family, if any?

IMPACT

"Yes **too many people in my family and community avoid hospitals due to the cost and fees** associated **they are so worried about the cost that they are suffering from illness** that could be managed or possibly cured." – Black woman

"**I have had two seizures before, only once I went to the hospital**. I went because my lips turned blue and my mom was terrified for me. After an entire night of testing and waiting, their response was 'sometimes people just faint', they ignored the fact that I had a seizure and called it just an accident... **I can't afford to go to a doctor and get told that they don't know.** The next time I have a seizure, I'm just gonna eat salt and call it a day because nobody in my family can afford the alternative." – Black nonbinary person

"**Healthcare affects my whole community, especially students, immigrants and working-class families**. For most of us, access to affordable and reliable care isn't always there." – AAPI man

CONCERNS

"My biggest concern is that we might be **forced to forgo necessary doctor visits and treatments** as a result of the **outrageous cost and shrinking network accessibility**." – AAPI woman

"We have a friend that has breast cancer, and **she was insured but many of her treatments and treatment drugs are not covered on her family plan**. I'm most **afraid that we will get some type of chronic illness and the same thing can happen to us**." – AAPI woman

"I am **concerned [about my mother's health] and wish healthcare was more accessible, cheaper and/or free for her to get checked out**. My biggest concern for my immediate family would be **if my husband loses his job, healthcare for myself and my son would be much more expensive**." – AAPI woman

Pain Points in Healthcare

What parts of our healthcare system feel most broken or frustrating to people?

1. Healthcare Importance
2. **Pain Points in Healthcare**
3. Healthcare Reform
4. Values & Messaging
5. Conclusion

Pain Points in Healthcare Findings

What parts of our healthcare system feel most broken or frustrating to people? What do people want to change about the healthcare system?
Participants are most frustrated and impacted by high healthcare costs, from insurance premiums to prescription drug costs to copays at appointments.
Fear related to current or impending potential financial stress in the case of a medical emergency or diagnosis are stressful sentiments related to healthcare.
Participants with government-funded healthcare coverage (Medicare, Medicaid) less impacted by these pain-points, but there is fear of losing these benefits.
Black participants face not being taken seriously by healthcare providers, fewer hospitals, and barriers to accessing care – disparities most participants had personally experienced and seen in their communities.
While AAPI participants were less likely to point out racial disparities and focused more on economic class, participants pointed cultural and language barriers when seeking care and the need for more preventative screening and testing.

High costs are a severe source of fear and anxiety for participants.

- Out of pocket costs cause the most financial stress among participants.
- Participants point out how it only takes one serious medical emergency to push you into a desperate financial situation.
- Participants report avoiding doctor's appointments due to cost, risking worse health outcomes, and having to choose between medical services and other basic goods.

Out-of-Pocket Costs: "If only the monthly amount that we pay for healthcare were the only cost things would be OK. But it feels like **insurance companies and other pharmaceutical companies are not concerned about the customer as much as they are at the bottom line. They bring in millions in profit but don't give back back to the customer. As always a co-pay and a medical item they don't cover.**" – Black man

Choose between Food and Healthcare: "Health care is not affordable for my family right now and **it makes you worry more... It shouldn't be that you have to chose between healthcare and food on your table.**" – Black man

Fear: "Even with insurance, the cost of premiums, co-pays, deductibles, and prescriptions can quickly add up, making it a **major burden for families**. Personally, **healthcare costs definitely impact my overall cost of living and financial stability**. It's something I have to plan for and worry about, especially when unexpected medical needs come up. **The fear of a large medical bill or not being able to access care when needed is always in the back of my mind..**" – Black woman

Life and Death: "Affording, proper quality, healthcare services and **treatment costs an arm and a leg**, and we **often have to choose between buying food for our home or paying expensive monthly bills, especially healthcare bills.** My biggest worries and concerns for myself and my family is that we are sometimes unable to afford healthcare services, diagnostic screenings... **this scares me a lot because it is the very fine line between survival and death. I don't wanna think about losing myself or my family to an overexpress healthcare system that places its threshold way too high for anyone to cross or manage through.**" – AAPI woman

Risk of Poverty: "**Healthcare is extremely unaffordable**, and **affordable care is low-quality. A single ER bill could lead someone into poverty.** I have a **high concern on what healthcare costs could do to my financial stability.**" – AAPI man

Daily Worry: "Healthcare is **absolutely not affordable** in this country. It has a **significant impact on our cost-of-living**. As a result of the **outrageous growth in the cost of annual healthcare premiums and out-of-pocket expenses, we have to cut back on both doctor visits, optional treatments** as well as other household expenses. **Healthcare cost is something I worry about daily.**" – AAPI woman

Most participants utilizing government-funded healthcare plans are satisfied with their coverage, though fear losing those benefits.

Those on Medicaid and Medicare see how expensive healthcare would be without this coverage, and express the desire for others in the country to have similar benefits.

Fear of Cuts: "I currently have Medicaid and I'm able to get my high cholesterol medicine... **If the Government cuts funds on Medicare and Medicaid, many people will die."** – AAPI woman, 45-54

Medicare: "Well, **I struggle to pay my bills each month, so it's not just healthcare. I have relatively good insurance through Medicare**, which covers medical care, hospitalization, and prescription medication. **I still struggle to pay, but I do manage to pay the monthly premium out of pocket for the insurance that covers 20% of the approved charges that Medicare does not pay**. I realize many families may not have the premium amount to pay every month." – Black man, 55-64

Medicare: "My Medicare cost $184.00, my last dentist visit cost $200.00:with insurance with a visit every three months co-pays are stable at $25.00 hospital visits emergency room $120.00, plus 20% Medicare doesn't pay which is where Medicaid was the alternative for help but **with government cuts it getting worse.**" – Black man, 55-64

Medicaid: "**At my age I am on the state medicaid program so I am in good shape here.** I really **hope that a very poor person without insurance can get the help they need**, especially in an emergency." – AAPI man, 55-64

Medicaid: "So far my health is very stable due to good presciption that I take daily. **If I didn't have Medicaid and is using Cobra Insurance, I might be stuck with hight deductive and copays that I couldn't afford."** – AAPI woman, 45-54

Medicaid: "**I think Medicaid is the best insurance ever! I don't think people even know that**... Vision including prescription eyeglasses, dental, medical, emergency room, hospital care, ambulance, car fare, surgery, pschotherapy, addiction treatment, home care, family member takes care of you, crutches, wheelchair, etc. **There is not one employer-based heath insurance that offers what Medicaid provides for in my State. I think it's rather generous as it should be. People who are poor have a hard time to begin with..**" – Black man, 55-64

Black participants report discrimination and barriers to access such as not being taken seriously by medical providers, and fewer healthcare facilities in Black neighborhoods.

Many Black participants shared personal stories about these disparities and connect it to broader systemic racism in the country.

Not Heard, Representation: "I think **black Americans face years of not being heard enough in the healthcare system**. I think **representation is still a problem for blacks in the healthcare system**." – Black woman, 25-34

Stereotypes: "I think inequality in getting medical care, there's is alot of **racial bias and stereotypes** by health care providers and also we face **limited access to quality health care**... I have seen in my community where **friends struggle to get medical care they need** because it's Un accessible or because they were discriminated because racial bias. ." – Black man, 18-24

Not Heard, Fewer Hospitals: "Black communities are more impacted than many other groups. The **effects of racism both past and present** play a big role, **from fewer hospitals in Black neighborhoods to doctors not listening or believing Black patients**. I've seen it in my own community people **waiting too long to go to the doctor because they don't trust the system or can't afford the care**, and others being **misdiagnosed or ignored** when they do go. These healthcare gaps hurt families, lead to more sickness, and can shorten lives." – Black woman

Not Taken Seriously: "I think **black people deal with the same healthcare problems as other Americans but worse**. Often for black people there's **less access and more bias**. We're **often not taken seriously by doctors**. The system just treats us different sometimes." – Black woman, 45-54

Lack of Facilities: "I grew up in the most poor area of my city where it was 99% African American. Problems and health care are compounded there... **I have seen with my own eyes the impact of lack of access to proper care. There are no urgent care facilities, no hospitals, no doctor's offices, no drug stores, no pharmacies, and no clinics in these areas.**" – Black woman, 25-34

Not Taken Seriously: "I have noticed that in the black community that often **times I wasn't taking serious especially when needing pain medication**. I can recall having a **four hour cancer surgery with complications that kept me in the hospital an additional week. After discharge being sent home with one day of pain medication**. After researching I realized I should have received a weeks worth of medication... **I felt I was being treated like a drug addict instead of a patient**." – Black man, 45-54

AAPI participants reported language and cultural barriers, as well as insufficient screenings for chronic illnesses leading to delayed treatment and worse health outcomes.

Many AAPI participants focused on the need for increased preventative medicine and testing. Others felt that financial status or economic class was a bigger indicator of disparities in healthcare than race, having not seen or experienced these racism in healthcare themselves. Those who saw a role of race in healthcare disparities tended to be younger.

Chronic Illness: "Asian-heritage people are **more susceptible to heart disease and diabetes**, and these **chronic conditions are not addressed well by the US healthcare system**. There **needs to be more affordable ways to establish preventative medicine**." – AAPI man, 25-34

Cultural/Language Barriers, Chronic Illness: "I would say that the problems in healthcare that impact Asian Americans and Pacific Islanders the most include these population having **lower insurance rates, presence of language and cultural barriers, and the fact that many Asian Americans and Pacific Islanders suffer from chronic health conditions, including hypertension, diabetes, heart problems**, which warrant the need for routine medical care... These issues and circumstances lead to **delayed or complete lack of medical care which contributes to the higher mortality and morbidity rates** in our country." – AAPI woman, 35-44

Language Barriers: "The most affected person I've seen is my mother. **She is Cambodian and Hawaiian and has a strong accent, which made it especially hard for her to get proper care**." – AAPI man, 35-44

Class, Not Race: "I'm not quite sure I'm aware of any major differences in how Asian Americans and Pacific Islanders would be impacted by healthcare in this country. **I don't see it so much as a racial/ethnic issue, but more of a class issue**. So overall, I would say the impact is the same because **I have not seen any differences in my own life or community**." – AAPI man, 25-34

Class, Not Race: "I am an Asian American, and for me personally **I do not feel like my group has been impacted any more or less than other groups**. I think it is **more of an economic issue** that separates groups from accessing quality healthcare. **There are groups from all different ethnicities that can fall in the lower income brackets**, and therefore **anyone can be impacted by healthcare problems if they are unable to afford it**." – AAPI woman, 45-54

Class, Not Race: "Don't see any difference, **I feel it's same for every ethnicity. It depends more on the financial status of individual**." – AAPI man, 35-44

Participants agree that Big Pharma, insurance companies, big hospitals and executives are benefiting from the system, while marginalized and lower income groups, and those that rely on the healthcare system more are hurt.

Most participants recognized the system was built to maximize profit, but also felt those benefiting take advantage.

Insurance Companies: "I think the insurance companies are benefitting. **They create rules that benefit them and their owners at the detriment to their customers**. They can **skew pricing to their advantage since the system was designed to benefit them**." – Black man, 55-64

Insurance Companies: "Definitely insurance companies and large hospital systems benefit the most. **they profit from the high prices and the billing**... The overall **system was built around profit and private enterprise** and not necessarily universal access." – AAPI man, 18-24

The Rich: "The **rich people** are benefitting from our Healthcare. **They can afford any doctors, medicines and surgeries**." – AAPI woman, 45-54

Pharma, Insurance Companies, Hospital Execs: "Big pharma. insurance companies and hospital execs benefit the most to me. **They get rich off people being sick. It's not about the care of people it's all about their profit margin. The system was built to work for them** not people like my mom and me." – Black woman, 45-54

Participants point out how those making less are impacted more.

Marginalized Groups: "Generally speaking, traditionally marginalized groups of people suffer worse outcomes than the general population. **Minority groups including the lgbtqia+ community, African-Americans and people of color, poor people**, etc." – Black man, 55-64

Chronic Illnesses: "**People with chronic illness** like me feel it every day.**We need ongoing expensive care**.The system makes it a **constant fight to get what we need without getting broke**." – Black woman, 25-34

Lower Income: "**Those with fewer means are impacted the most**. Not only do lower-income families tend to live in areas with relatively **poor access to clean and professional health care services**, but they are also **impacted the most financially by insane costs**." – AAPI man, 25-34

Lower Middle Class: "I think the middle class, especially the **lower middle class** are especially hurt by the healthcare problems. **I remember not qualifying to MassHealth but at the same time not being able to afford to pay for insurance earlier in my career**." – AAPI woman, 35-44

Healthcare Reform

Do people believe the healthcare system can realistically be improved? What do people believe is standing in the way of improving healthcare?

What kind of action do people envision to change the healthcare system, and what role can they see for themselves in that change?

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Healthcare Reform Findings

Do people believe the healthcare system can realistically be improved? What do people believe is standing in the way of improving healthcare? What kind of action do people envision to change the healthcare system, and what role can they see for themselves in that change?
Participants believe healthcare reform should be achievable, but corporate interests and money in politics stand in the way.
Participants want both immediate and gradual change to fix the healthcare system, with bringing down costs being the top priority.
The biggest change that is needed to the healthcare system is affordability and accessibility, even for those who view the U.S. healthcare system as great. This is viewed as absolutely necessary, not something to just strive for.
Participants see a role for themselves in raising their voices and concerns in healthcare, but still depending on a potentially unresponsive government for the change to manifest.

The dream healthcare system would be affordable, accessible, and stress-free; even those who believe the U.S. has some of the best healthcare see these changes as necessary. A lot of pessimism on if these are changes are possible.

DREAM

"**Getting medical care would be affordable, simple and respectful in a perfect world.** There will be nothing like stress, fighting with insurance companies just to stay alive. If I need care for my health condition, I would just walk into a very neat, welcoming clinic or hospital and be seen quickly. **I would not have to worry whether a treatment was covered or what my copay will be. Everything would be paid for through a public system like taxes.** Care will be free just like a basic human right." – **Young Black Woman**

"**Providers would not get kickbacks for medication they prescribe.** Per perhaps **the government should run health care and predominantly black neighborhoods would have more clinics,** doctor's offices, hospitals, and emergency treatment facilities. This should include dental and mental health." – **Black Woman**

"I would say we have the best medical care right now too .... **The change that I would like is the affordability of care , prices of drugs be affordable and within the reach of the patients** . the insurance companies are to be regulated so that the patients get more benefits for what they pay. **The health care should be monitored by the federal and state government." – AAPI Woman**

POSSIBLE OR IMPOSSIBLE

- **Both skeptical and optimistic**
- **Barrier to change is big pharma and wealthy insurance companies lobbying**
- **Dream healthcare system no one would have to worry about insurance or costs**
- **Healthcare should be treated as a human right and managed by the federal and state governments**

"I think it is entirely possible for healthcare in the US to be revamped. **If man can put a man on the moon, then certainly changes can be made to the health care system.** No one is looking for a perfect healthcare system, just much better" – **Black Woman**

"It doesn't feel very realistic right now because **healthcare does not seem like a government priority**. Up until now, there have been no noticeable changes, so I don't see changes happening in general in the future either." – **Young AAPI Woman**

"I think it's somewhat realistic and **people are eventually going to get fed up with the status quo** and demand change." – **Black Lean Republican Man**

Distrust in government and healthcare companies, who participants identify as responsible for healthcare costs, directly relate to the obstacles they see in the way of meaningful change in healthcare.

- Most participants believe that the government holds the primary responsibility to keep corporations in check and regulate prices. Some participants say that insurance companies and healthcare providers should also take part in this responsibility.
- Skepticism towards those in power to fix this issue, whether in government or the private sector, is rooted in MONEY: Lack of funding, pharma and insurance lobbying, profit or political interests prioritized over people.

RESPONSIBILITY & OBSTACLES

Public, Government: "I think it's **Most people not realizing how big an issue it is or belittling it's importance.** I think the **Government has a huge part to play aswell but it seems they are focused on other things.**" – Black man, Strong Republican

Cost: "The biggest obstacle is that there are **no changes that can be made at this point that benefits everyone without cost. Someone's gain is another person (or organization's) loss.** There is probably nothing further that can be done so that we can have it both ways." – AAPI man, Republican

Government, Lack of Change So Far: "I think it is **mostly the government's responsibility, and partially the healthcare companies themselves... since I have seen very little to no changes, it makes it hard to be optimistic that things will improve.**" – AAPI woman, Independent lean Democrat

Gridlock, Big Pharma: "**Political gridlock** is a major problem as well as **big pharma lobbying** . The biggest obstacle is we need systematic reform. **It can be done but it will take time to be cultivated.**" – AAPI woman, Republican

Government, Profit-driven: "**I believe the government should better regulate pharmaceutical and healthcare from a point of compassion.** These **judges, representatives and senators are allowed to invest in pharmaceuticals and make money off of the companies that don't give us good service.** It almost feels like **they profit from our lack of great healthcare.** At this point, **I do not trust the government** to take on anything outside of war, mongering or hurting people. This government is one of identity politics and **it's too concerned with fixing problems that don't affect my bottom line as an American citizen.**" – Black man, Independent

Government, Profit-Driven: "The biggest obstacle is the **corrupt people in power who stand to benefit from the system staying the way it is. There's too much money to be made from a broken system.**" – Black woman, Democrat

Government, Profit-Driven: "It's the responsibility of **lawmakers in Washington**, but I don't trust them to get this job done. **Both parties make so much money from pharma companies that they also don't want to fix it.**" – AAPI man, Independent lean Republican

Participants see some changes as able to happen quicker, while systemic changes will be gradual and take longer. Their own role in these changes is to raise their voice and concerns.

GRADUAL AND INCREMENTAL CHANGE

- Some participants see incremental change as more reliable and more likely to hold up in the long term

Immediate: "The **affordability should be changed immediately**, it **should happen a quick as the president has be implementing every other policy.**" – Black woman, Democrat

Immediate: A small change is **having insurance companies have clear claims processing** and **requiring health systems to have a health equity department**. That change should happen immediately." – Black woman, Democrat

Incremental: I think **incremental changes would be most effective, allowing people to get acquainted with any updates**. But it somewhat **depends on how significant the item being changed is**. There is no one-size-fits-all answer." – AAPI man, Republican

Both: "These are massive changes that will take a long time to finish... **They can get BETTER in five years. They won't be fixed for at least the next 20.**" – Black non-binary person, Democrat

PERSONAL ROLE

- Raising voice through various actions still depends on government response

Raise Voice: "We have **limited power to make a difference, except the government can adhere to our voices when we protest for a better health care system.**" – Black man, Strong Republican

Where to Spend: "**We have the power of where we put our money. However, we are limited to insurance** offered by my husband's employer... **we could choose to go to providers who we think are fair and deserve our money.**" – AAPI woman, Republican

Raise Voice: "**I believe if we the people would voice our disdain for the healthcare system and pettion for change , it will happen.**" – Black woman, Democrat

Grassroots movement: "I often feel **people like me are the 'minority' in the US and just don't have the say or power to influence changes in healthcare**. However, **a grassroots movement is needed** in the **form of social or political activism by more ordinary people** like me to advocate for change and influence public opinion. These movements can take the forms of **social media, local and nation-wide ballots and elections to choose and support politicians willing to champion our cause.**" – Young AAPI woman, Independent lean Republican

Values & Messaging

What kind of values and messages encourage people to believe the government should be doing more in public action to achieve a better healthcare system for all?

What information and proof-points present the best case for the urgency and prioritization of healthcare reform?

1. Healthcare Importance
2. Pain Points in Healthcare
3. Healthcare Reform
4. **Values & Messaging**
5. Conclusion

Values & Messaging Findings

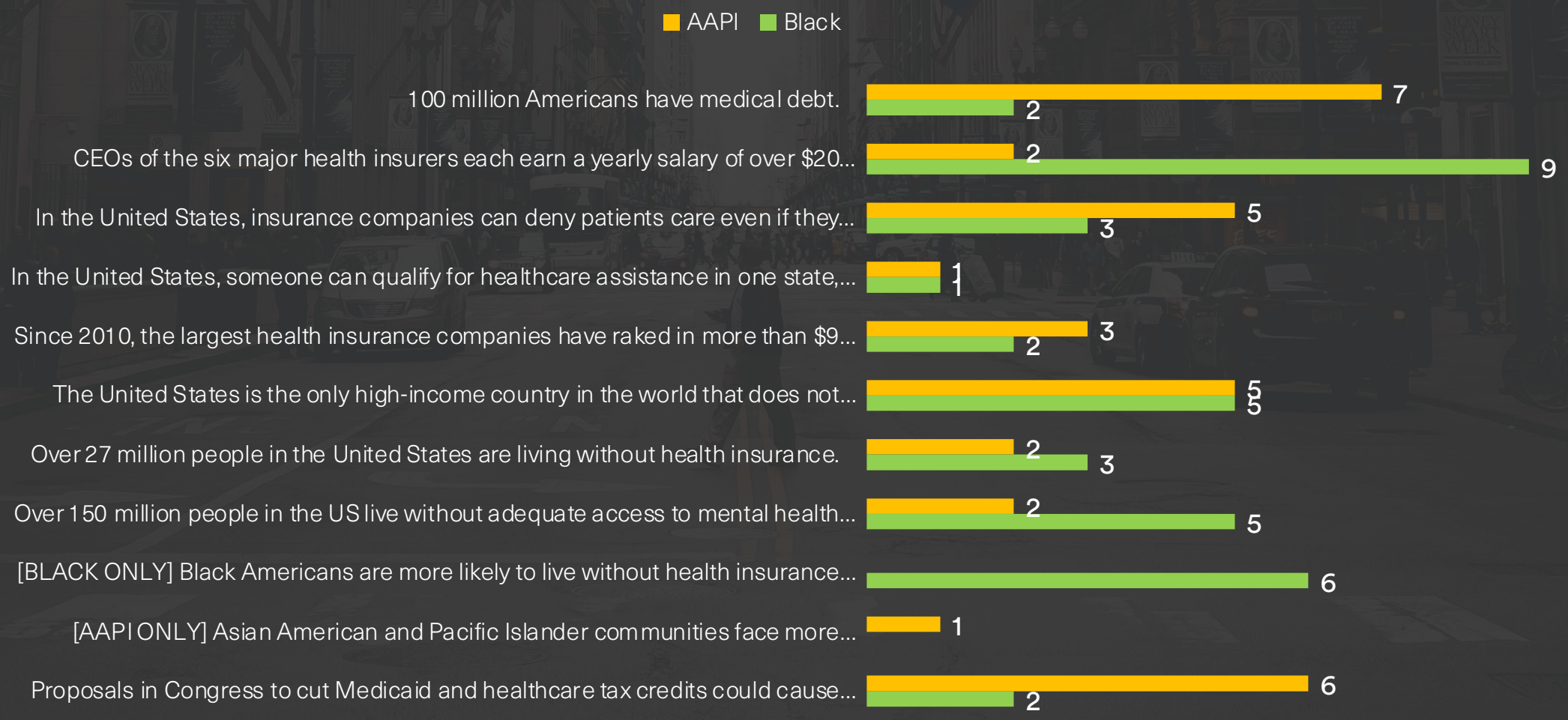
What kind of values and messages encourage people to believe the government should be doing more in public action to achieve a better healthcare system for all? What information and proof-points present the best case for the urgency and prioritization of healthcare reform?
Facts and messaging on corporate profits in healthcare industry illicit strong reactions from participants, especially amongst our Black participants.
Some AAPI participants were skeptical of CEO salary comparisons
AAPI participants did not respond as strongly to AAPI specific facts, which may be from not facing medical discrimination first-hand.
Participants often repeated how healthcare in the U.S. should not be set up like a business and are often putting profit over people
Values were highly rated, but the overall strongest was on how nobody should be forced to decide between paying for healthcare or groceries. This pulled strong agreement and motivation reactions from even our Republican participants.

Concerning Facts on U.S. Healthcare System

100 million Americans have medical debt.
CEOs of the six major health insurers each earn a yearly salary of over $20 million on average. The average salary in the United States is $63,795.
In the United States, insurance companies can deny patients care even if they have health insurance.
In the United States, someone can qualify for healthcare assistance in one state, but not the next state over. Similarly, basic healthcare services may cost more in one state vs. another.
Since 2010, the largest health insurance companies have raked in more than $9 trillion in revenue.
The United States is the only high-income country in the world that does not provide healthcare to all of its citizens.
Over 27 million people in the United States are living without health insurance.
Over 150 million people in the US live without adequate access to mental health services due to wait times, cost, or provider availability.
[BLACK PARTICIPANTS ONLY] Black Americans are more likely to live without health insurance and live in a state that hasn't expanded Medicaid compared to white Americans.
[AAPI PARTICIPANTS ONLY] Asian American and Pacific Islander communities face more barriers accessing and affording healthcare than their white counterparts.
Proposals in Congress to cut Medicaid and healthcare tax credits could cause 16 million people to lose their insurance coverage and increase healthcare prices for everyone

Most Concerning Facts About U.S. Healthcare System

Now you'll see a list of facts related to the current state of healthcare in the U.S. Please select which TWO are the most concerning, then explain your thinking behind the options you chose.



Many struggled to only pick 2 options - Majority felt most moved by the contrasting info of 100 million in medical debt and the high profit of healthcare corporations/CEOs

AAPI Participants

General: "I always hear about **how cheap healthcare is in other countries,** and it **makes me wonder why such a prosperous country like the US does not have the same**. If these companies are making that much revenue, they definitely can afford to lower prices."
— Young AAPI Woman

100 million fact: "This shows that the **US doesn't have an adequate healthcare system**. I am most concerned with so many people having medical debt because **I know burdensome it is to pay for medical bills**. Also, it boggles my mind that people with insurance can be denied care because medical insurance is very expensive and it feels like robbery paying for it and not getting the benefits."
— AAPI Woman

2010 Revenue & High-income country facts: "These two seem most concerning to me **because it shows that healthcare is a business** in the United States, **and not considered a basic (essential) need for it's citizens.**"
— AAPI Republican Woman

Black Participants

CEO Pay: "It should be a crime to not allow free health care in one wealthy country." — Young Black Republican Man

Deny Patients Care: "In the United States, insurance companies can deny patients care even if they have insurance. This is of great concern because **there is no point having insurance when one can't get the care needed.** Based on my rare health condition, delays and denials in care can be life threatening."
— Black Woman

100 million fact: "the two topics I selected make me feel angry and they made me concerned because it only takes one bad day to have crippling medical debt for years if uninsured."
— Black Man

Value Statements on Healthcare System

Nobody should be forced to choose between paying for healthcare or paying for groceries, gas, and other necessities.

When people can't afford the healthcare they need, they should be able to get help.

Everyone should have equal access to healthcare so we can thrive and be healthy no matter our race, income, or zip code.

Healthcare shouldn't be a privilege. It's a right.

Our healthcare system should prioritize people over profits.

Corporations shouldn't be allowed to profit from patients getting sicker.

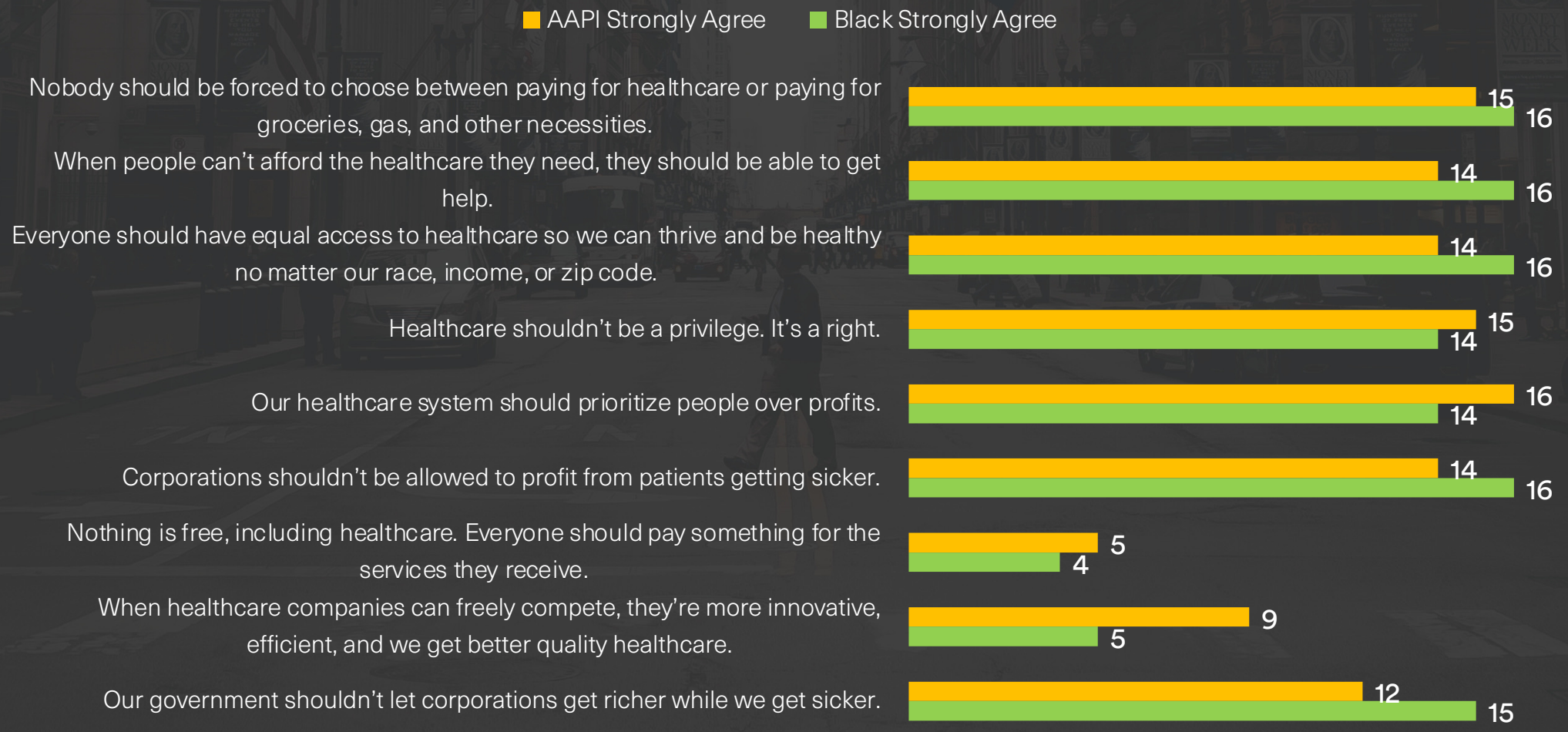
Nothing is free, including healthcare. Everyone should pay something for the services they receive.

When healthcare companies can freely compete, they're more innovative, efficient, and we get better quality healthcare.

Our government shouldn't let corporations get richer while we get sicker.

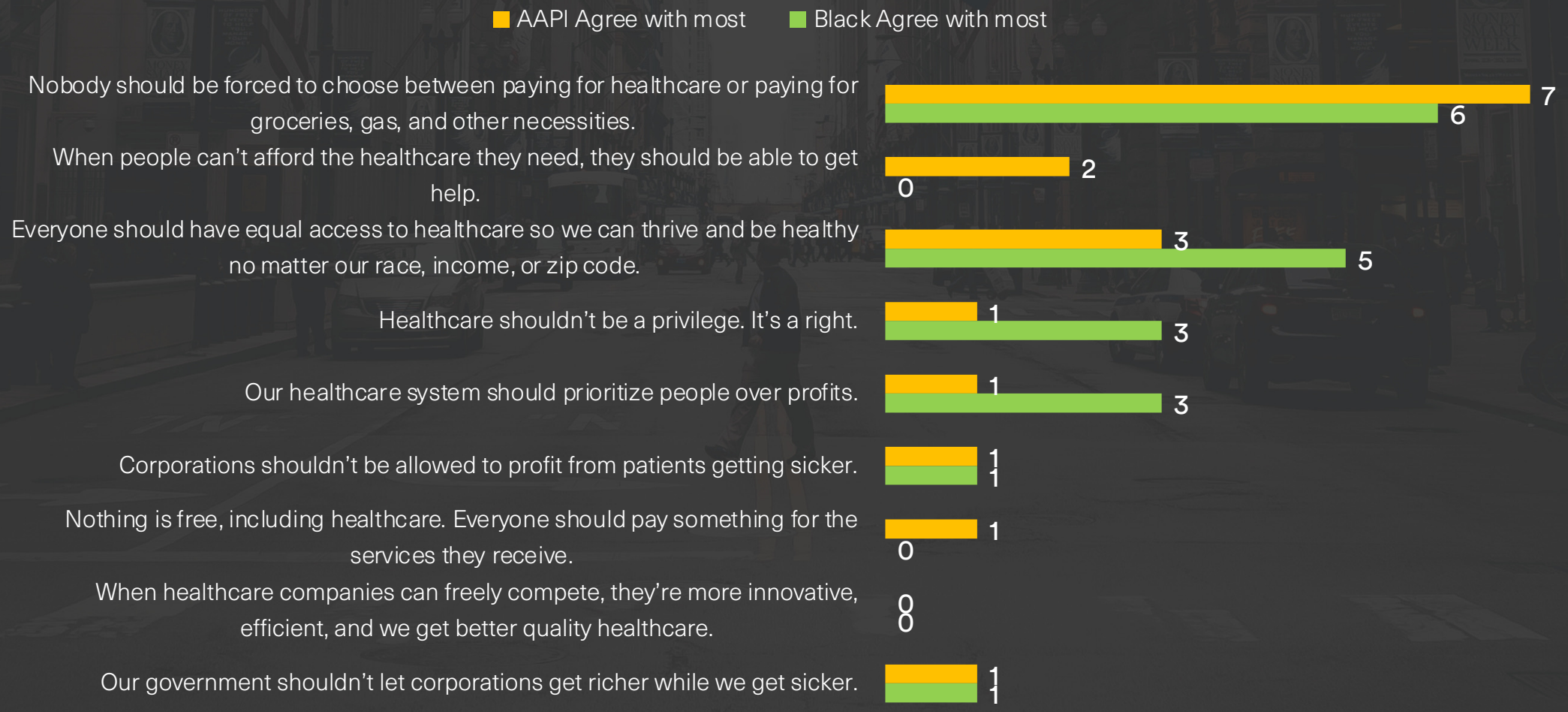
Value Statements on Healthcare System

For each statement, please rate how strongly you agree or disagree with the statement on a scale of 0-10, where “0” means you strongly disagree, “5” means you neither agree nor disagree, and “10” means you strongly agree with the statement.



Top Value Statement on Healthcare System

Now, of the same list of statements, choose the one you agree with the most



Overall, participants view healthcare as a right that should be free or accessibly to all. Mentions of corporate profits continues to motivate stronger reactions from Black participants in particular.

AAPI Participants

Privilege vs Right: "I believe this is the mindset that government officials and private corporations should and must have in mind when creating healthcare policies and changes for the American people. **Right now, they treat healthcare like it is some reward system** for people to have that it should be earned for certain people however, this is not the case as **health is a matter of life or death; sickness and mortality are never to be taken lightly** and all of us are prone to morbidity and mortality in our lives regardless of our race, ethnicity, status or creed. ."
— AAPI Woman

Equal Access: "I think if Canada can do Universal Healthcare, then the USA can as well. We just need the political might and cooperation to do it."
— AAPI Woman

Black Participants

Forced to pay for healthcare vs groceries: "The rising cost of healthcare in the United States forces many people to make difficult choices between accessing necessary medical care and affording essential needs like food, housing, and utilities" — Young Black Republican Man

Richer vs Sicker: "The role of government should be to protect the wellbeing of the people not to enable corporate profit at the expense of public health."
— Black Woman

Privilege vs Right: "Healthcare **shouldn't be a privilege, but right for all**. In my opinion it is a part of life, liberty, and the pursuit of happiness. For so long, the best healthcare for some, not all has been the status quo. I think about how the mother that was left on life support to have the baby was treated versus the Florida state Republican senator who was afforded an abortion through her privilege. There is an imbalance and it's sick.."
— Black Man

Conclusion

1. Healthcare Importance
2. Pain Points in Healthcare
3. Healthcare Reform
4. Values & Messaging

5. Conclusion

Obstacle		Opportunity
1 Distrust in government and elected officials to change healthcare system due to profit-driven motives and corporate interests	→	Opportunity to harness a turning point from the status quo to increase engagement and turn people out to elect officials prioritizing people over profits in healthcare
2 Participants report having to choose between healthcare payments and basic goods – a severe source of stress and anxiety	→	Participants use similar language around this pain point organically, whether experienced directly or perceived indirectly, and agrees this should not be the case. Uplifting this unfair and inhumane dilemma motivates people around healthcare change.
3 Participants see problems in healthcare system as complex and deep-rooted	→	Both short- and long-term goals in healthcare desired. They understand system overhaul won't happen overnight but are enthusiastic about progress towards that end. Individual policies addressing costs in the short-term still result in life-changing impacts in the meantime.

HITstrategies

COST & COVERAGE COLLABORATIVE

Thank you

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Appendix

Healthcare Screeners

16. Thinking about the health care system in the United States, how much, if at all, do you think the health care system needs to change to make quality care more affordable for all?

Requires no change	**TERM**	1
Requires minor changes	Continue	2
Requires major changes	Continue	3
Needs to be completely rebuilt	Continue	4
Don't know/Refused	Continue	5

14. Please rate how much you agree or disagree with the sentence below on a scale of 0 to 10, where "10" means strongly agree, "5" means neutral, and "0" means strongly disagree. You can choose any number from 0-10. **[IF SAY "NOT SURE," TERMINATE.]**

Government should ensure healthcare is affordable and accessible to all.	Continue 3-10 **TERM 0-2**	0-10

17. Do you or does a close family member of yours work in a healthcare profession?

Yes, I work in a healthcare profession	**TERM**	1
A close family member works in a healthcare profession	HOLD	2
No	Continue	3