



**SPECIAL REPORT – CONCERNS
ABOUT EFFORTS TO REDUCE
MEDICARE SPENDING ON
PRESCRIPTION DRUGS**

 **McLaughlin & Associates**



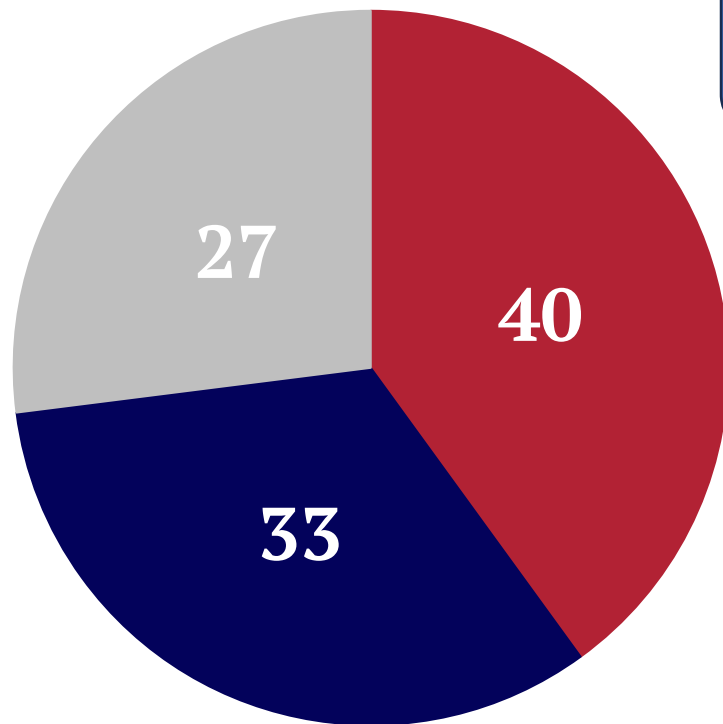
KEY TAKEAWAYS

- Proposals to reduce Medicare spending on prescription drugs – including price controls and repealing the noninterference clause - have mixed support.
- The most effective arguments against giving the government more authority to reduce prescription drug spending in Medicare focus on:
 - The impact of lobbying and politics on drug coverage decisions.
 - Fewer patients receiving the medicine they need.
 - Money being taken from Medicare and spent elsewhere.
- There is overwhelming agreement that any savings in Medicare should be kept in Medicare – and most believe that money should be used to improve benefits.
- Americans believe Medicare spends much more on prescription drugs than it does. After learning drugs are only 12% of Medicare spending, while hospitals services are 40%, voters wonder why so much attention is paid to drug spending.

MIXED SUPPORT FOR PROPOSALS TO REDUCE MEDICARE SPENDING ON PRESCRIPTION DRUGS

“There is a proposal in Congress to give the government new authority to reduce Medicare spending on prescription drugs. It would give the government the power to control the price it pays for drugs in Medicare and repeal the non-interference clause, which prohibits the government from deciding what drugs can be covered by private prescription drug plans in Medicare Part D.

Do you favor or oppose this proposal?”



■ Oppose ■ Favor ■ Don't Know

“Some of this sounds good in theory, but...now you get the government involved. I just think there’s too much government involvement in too many things...at the end of the day, it...turns out worse than the initial hope.”

– Darlyn, 67, Independent White Woman, North Carolina

“I personally would support it more if its going to reduce my cost.”

– Lisa, 57, Independent Black Woman, Arkansas

“I don't know a nicer way to say it, but I don't trust the government making these decisions, and I sure do not trust big pharma.”

– Scotti, 40, Independent White Woman, Texas

“The doctor’s closer to the patient...I have family members who work in the medical community, so they live it firsthand where a doctor’s opinion or whatever you want to say is overruled by an administrator who has little to no medical background.”

– Mitch, 66, Independent White Male, North Carolina



WHAT RESONATES? POTENTIAL CONSEQUENCES OF PROPOSALS TO REDUCE MEDICARE SPENDING ON PRESCRIPTION DRUGS

	PERCENT LIKELY TO HAPPEN	PERCENT CONCERNED IF HAPPENED	RESONANCE SCORE (ALL)	RESONANCE SCORE (REP)	RESONANCE SCORE (IND)	RESONANCE SCORE (DEM)
Drug coverage decisions become more influenced by politics and lobbying and less by doctor and patient decisions.	65	74	139	67/75 142	66/76 142	63/73 140
Fewer patients receive the medicines their doctor recommends because the government won't pay for them.	63	75	138	66/78 144	62/71 133	63/74 137
Savings in Medicare are used to pay for other government programs instead of lowering what patients pay for medicines.	59	73	132	60/75 135	58/76 134	59/67 126
Coverage decisions are made based on the economic value of patients' lives, which would be discriminate against the elderly and disabled.	57	72	129	58/71 129	56/72 128	57/72 129
The government establishes a national drug coverage formulary that determines what medicines are available for patients.	60	66	126	62/69 131	56/64 120	62/63 125
Less private sector investment in drug research and development, leading to fewer new cures and treatments in the future.	54	69	123	58/70 128	48/67 115	54/69 123

***Bold** = Most effective



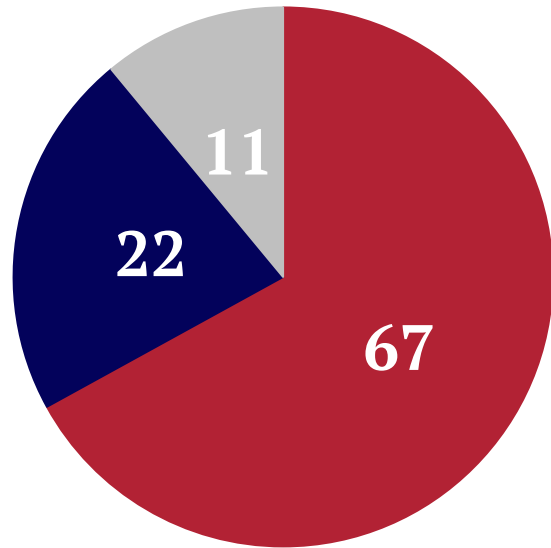
OVERWHELMING AGREEMENT – SAVINGS FROM MEDICARE SHOULD STAY IN MEDICARE

Most say savings in Medicare should be used to improve benefits.

(IF PREFER KEEPING SAVINGS IN MEDICARE)

Which do you agree with more?

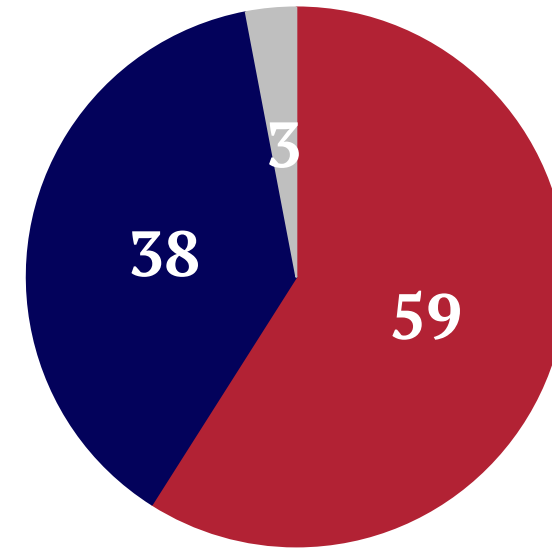
1. Any savings found in Medicare **should be kept in Medicare**, not used for other programs or priorities.
- OR,
2. Any savings in Medicare **should be kept to reduce the budget deficit**, not spent on other priorities.



■ Kept in Medicare ■ Reduce Deficit ■ Don't Know

Which do you agree with more?

1. Any savings found in Medicare should be kept in Medicare **to improve benefits.**
- OR,
2. Any savings found in Medicare should be kept in Medicare **to improve the financial health of the program.**



■ Improve Benefits ■ Improve Financial Health ■ Don't Know



INDEPENDENTS HOSTILE TO MEDICARE SAVINGS BEING USED FOR GREEN ENERGY PROJECTS

“I think the savings should still remain at Medicare or like the, the health sector.”

-Leland, 40, Independent Asian Man, California

“The purpose of saving the money was for Medicare. If you don't do that, then it just disappears.”

- Darlyn, 67, White Woman, North Carolina

“You're still taking electricity...that power is being generated by coal, natural gas, nuclear, hydro, whatever else. It doesn't matter...the idea that it's a green initiative is laughable.”

--David, 41, Independent White Man, New York

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Why Is Medicare Saving Paying for Teslas?

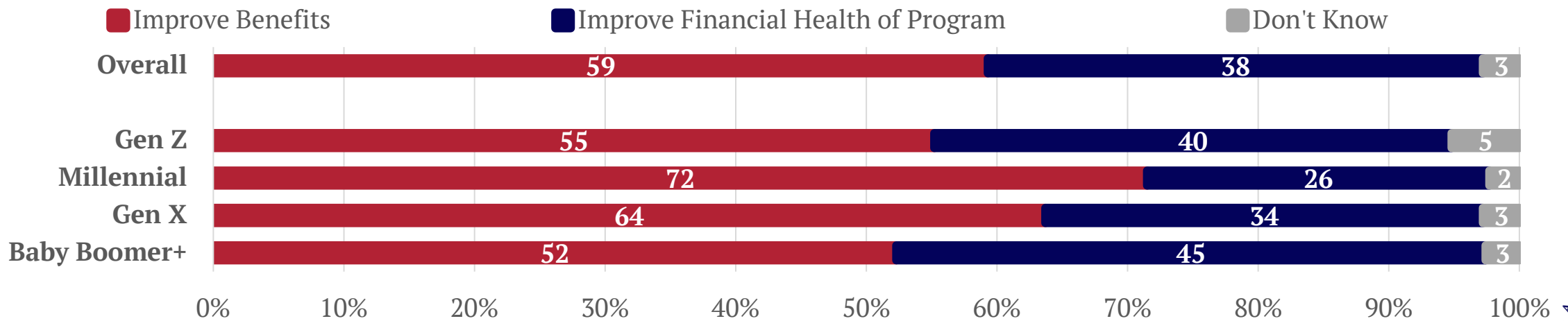
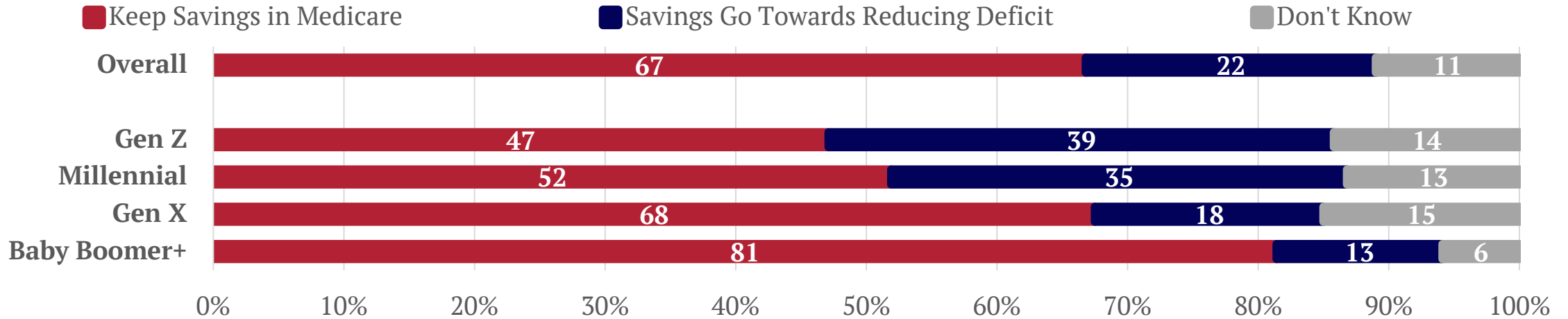
Climate change now takes priority over medical care in health policy.

The Inflation Reduction Act marked the first time climate change took priority over medical care in American health policy.

Initially heralded as a “sweeping health care and climate bill,” the law is now projected to spend more than a trillion dollars on green energy but only a fraction of that improving Medicare.

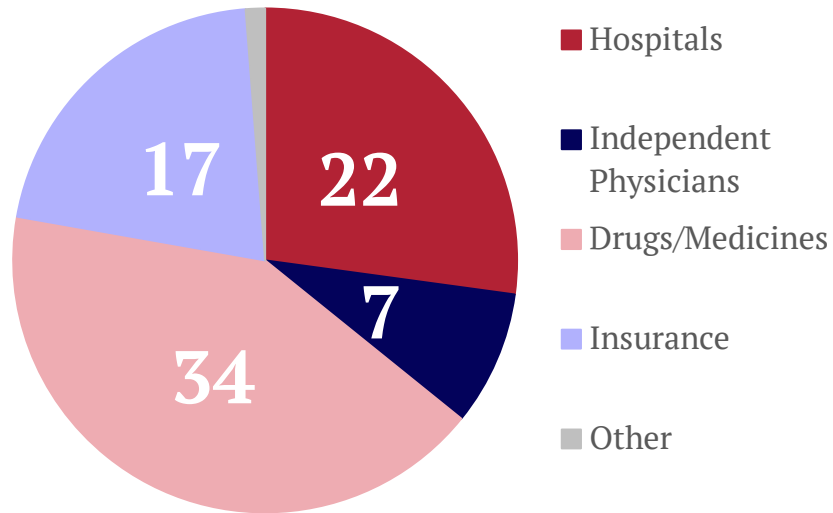
Worse, much of the \$280 billion in savings from its Medicare prescription drug provisions were siphoned off to fund green policies such as \$7,500 electric-vehicle tax credits. Medicare will keep only about 15% of the savings for some relatively inexpensive new benefits, such as a \$2,000 annual cap on pharmacy spending. That's unfortunate considering the program's costs are projected to spiral from about \$1 trillion this year to \$1.8 trillion in 2031.

AGE DIFFERENCES IN PREFERENCE OF WHAT TO DO WITH SAVINGS FOUND IN MEDICARE



AMERICANS INCORRECTLY BELIEVE MEDICARE SPENDS THE MOST ON DRUGS

To the best of your knowledge, which part of the health care system does Medicare spend the most on?



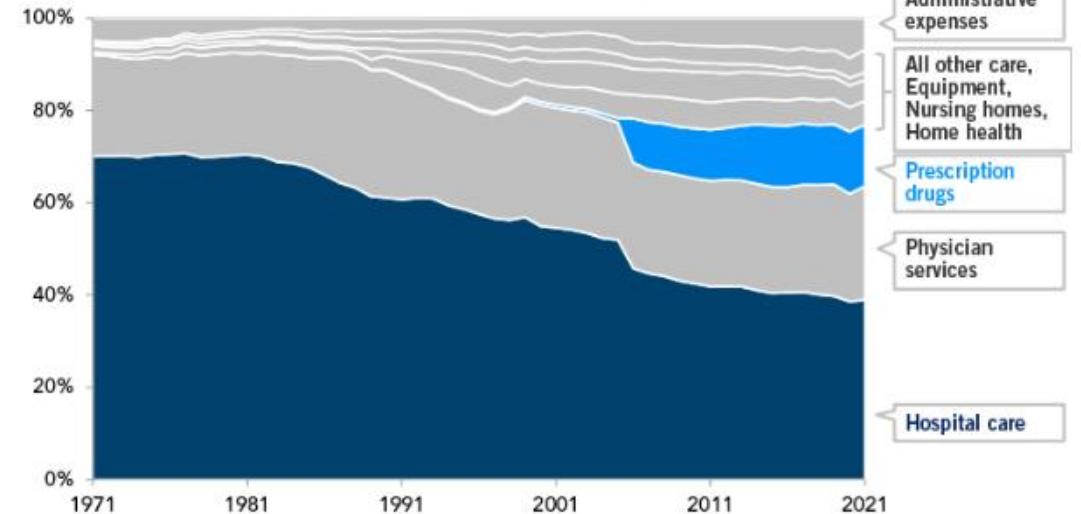
“Why are they so concerned about prescription drugs and not concerned about the high cost of anything related to hospitals?”
– Lisa, 57, Independent Black Woman, Arkansas

“That gets no press.”

– Mitch, 66, Independent White Woman, N. Carolina

In reality:

Composition of Medicare Payments (% of Total Medicare Spending)



SOURCE: Centers for Medicare & Medicaid Services, National Health Expenditure Data, December 2022.

NOTES: “Equipment” includes both durable medical equipment and other non-durable medical products. “All Other Care” includes dental services, other professional services, and other health, residential, and personal care expenditures. “Administrative Expenses” includes government administrative expenses and the total net cost of health insurance expenditures.

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McLaughlin & Associates 



August 2022

Treated Equal
Understanding Voter Priorities For Making Health Care Work in America



**Top Priorities for
Health Care
Reform**

January 2, 2023

Large, bipartisan majorities support health care price transparency and increased access to mental health care.



METHODOLOGY

The poll results in this report come from two surveys commissioned by America's New Majority Project:

1. The Winston Group, June 29-July 2, 2023, 1,200 Registered Voters
2. McLaughlin and Associates, July 27-30, 2023, 2,000 Registered Voters

Focus groups with Independents were conducted by America's New Majority Project on August 17 and 20, 2023.

