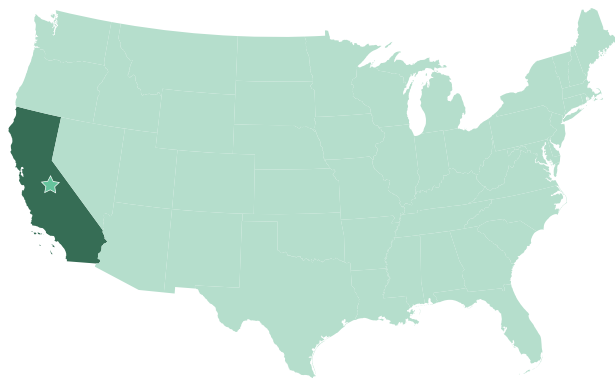


# The Patient Experience

## Perspectives on Today's Healthcare



### Background

The American Academy of Physician Associates (AAPA) advocates for the physician associate/assistant (PA) profession and provides tools to improve the PA practice and patient care. Earlier this year, AAPA approached The Harris Poll to revisit work that had been conducted in 2014. Unlike the past survey, AAPA wanted to take a wider look at the state of the U.S. healthcare system and capture the issues patients are encountering within today's system. Additionally, the research seeks to understand attitudes toward PAs to reinforce the need for this group of expertly trained, high-quality, compassionate providers. This summary includes research findings from the national sample collected as well as the oversample of adults living in California.

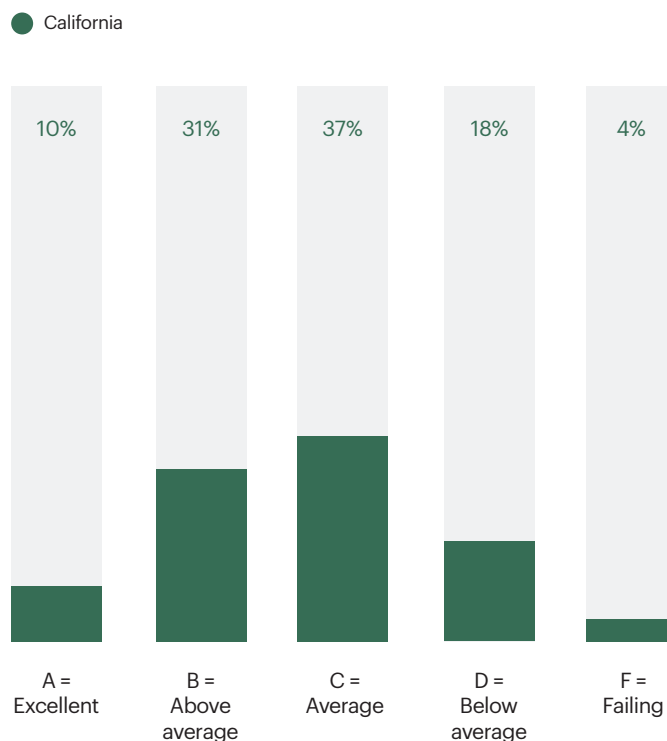
The research revealed that the U.S. healthcare system is stretched thin – a reality that was both illuminated during and exacerbated by the COVID-19 pandemic. In addition to healthcare provider burnout and staffing shortages, many feel that not everyone has equal access to care, and simply navigating the system can be overwhelming and time-consuming. This may contribute to the general lack of confidence that the U.S. healthcare system will be able to support the care they need in the future. Beyond the need to reduce the cost of healthcare, adults agree that having stronger relationships with providers – especially those whom they trust – has the potential to improve their health. This is where PAs, working to the full extent of their education and ability, have an opportunity to elevate healthcare within the U.S.

### Views of the System

More than one in five Californians rate the U.S. healthcare system poorly. Concerns about community resources for health are significant in California. Nationwide, widespread dissatisfaction with healthcare prevails.

- Dissatisfaction with the healthcare system:** More than one in five of adults in California grade the healthcare system as poor (22% give it a D or F). Nationally, about one-quarter of adults agree that, at a high level, the system is poor: 26% give the U.S. healthcare system a D (18%) or an F (8%) grade.
- Impact of workforce shortages:** Sixty-one percent of Californians worry about healthcare workforce shortages affecting their families. While it is a majority, the percentage of Californians with those concerns is lower than what is seen on a national level (68%).
- Concern about community resources:** About 43% of Californians believe their community lacks essential health resources, a sentiment echoed by 42% of U.S. adults nationwide.

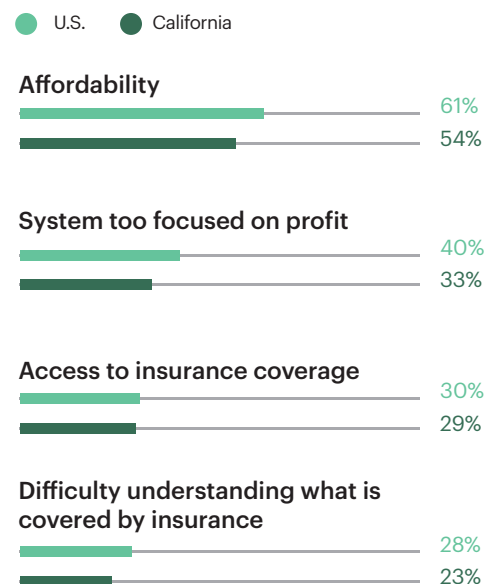
### Healthcare Grades: U.S. Healthcare System



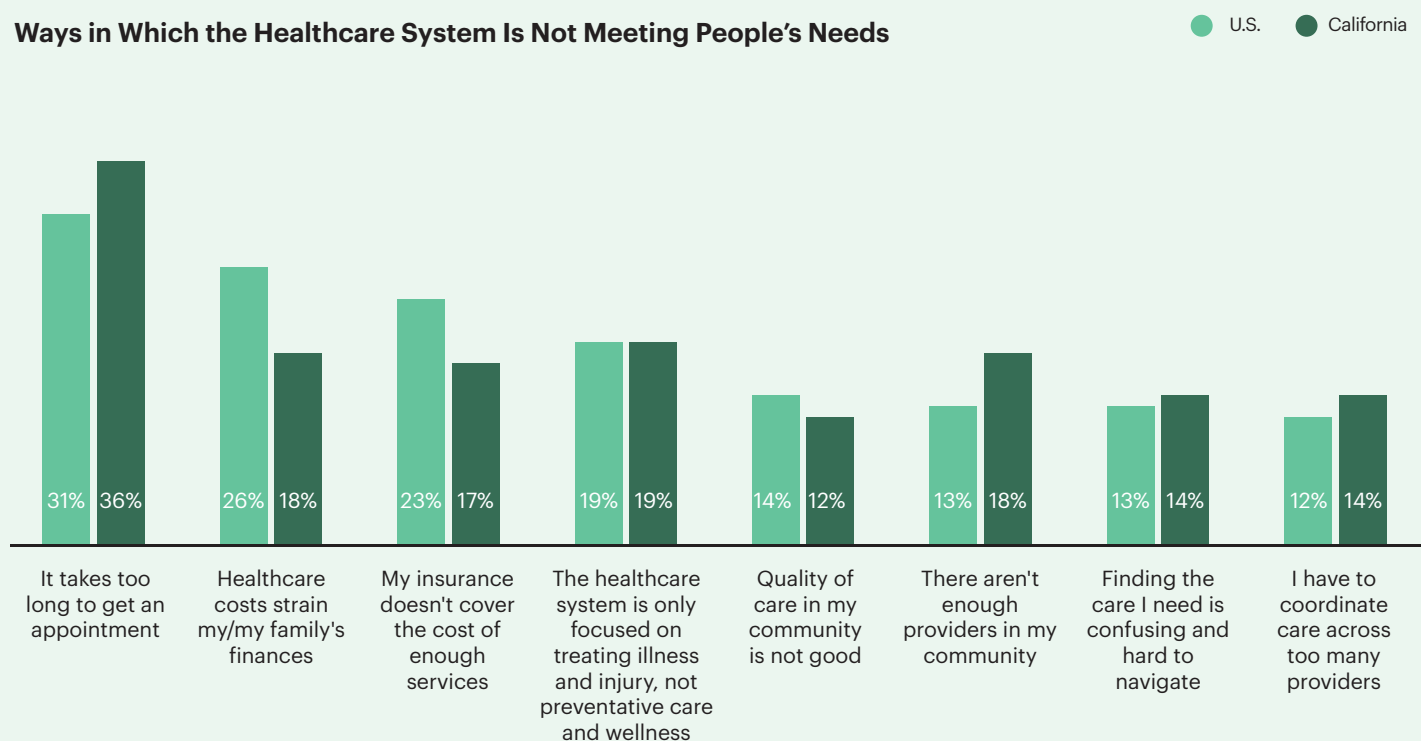
## The healthcare system falls short in addressing patient needs in California and nationally. Access barriers persist, with Californians emphasizing inequities and provider shortages over affordability.

- Deterring care:** Affordability stands as a primary hurdle, with 61% of adults identifying it as a top barrier to healthcare access. U.S. adults also rate the system's outsized focus on profit, insurance coverage availability, and ability to understand coverage options as other factors that contribute to accessibility challenges. While still a significant challenge, Californians show a slightly lower concern regarding cost barriers at 54%.
- Financial strain:** Around 18% of Californians find healthcare costs financially straining. However, they are less likely than the national average (17% vs. 23%) to report insufficient insurance coverage for services.
- Inequities and bias:** Californians are more likely than adults on a national level to say inequities/bias within the system are the biggest barriers to access in the U.S. (18% of Californians compared to 13% of adults nationally).
- Lack of providers:** Californians are more likely than adults nationally to point to a lack of providers in their area as a way the system isn't meeting their needs (18% vs. 13%) and also may be why Californians are directionally more likely to point to it taking too long to get an appointment compared to their peers nationally (36% vs. 31%).

### Biggest Barriers to Accessing Healthcare



### Ways in Which the Healthcare System Is Not Meeting People's Needs

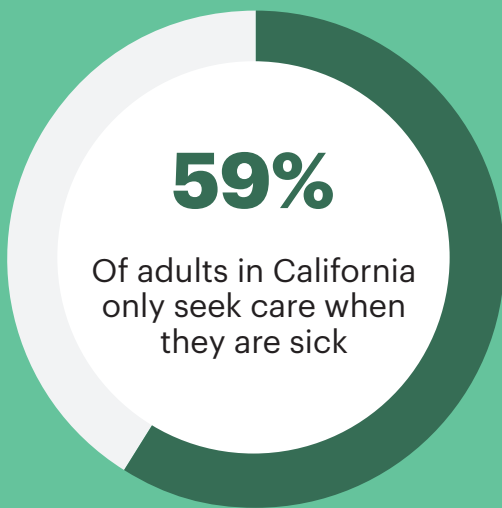


**Coordinating care burdens patients and informal caregivers assisting family and friends navigate the healthcare system.**

- **Coordinating care:** Both in California (64%) and nationwide (65%), significant majorities of adults find healthcare coordination overwhelming and time-consuming.
- **Long wait times:** On average, whether nationally or in California, it takes nearly a month to get a needed appointment with a healthcare provider. For those who do not get an appointment within a week, it takes an average of 3.9 weeks (national) and 3.6 weeks (California). Adults in California report spending an average of 2.0 hours a week coordinating care for themselves or their families, and an average of 2.9 hours if they are helping someone else navigate care.

**Cost worries, access barriers, care coordination challenges, and resulting frustration significantly influence behavior and, ultimately, shape health outcomes.**

- **Skipping care:** In California, slightly less than half (46%) say they have delayed or skipped care within the past two years which is comparable to what adults report on a national level (44%).
- **Cost of care:** Financial cost is the top reason adults delayed or skipped care in California and nationally (33% vs. 40% respectively).
- It is more common for adults in California to delay or skip care because finding a provider was too complicated (24% vs. 15% nationally).
- **Impact of skipping care:** Sixty-eight percent of adults in California who delayed or skipped care within the past two years experienced some kind of impact as a result, including worsening condition, negative impact on mental health, and/or overall health decline. Results were directionally lower nationally, with 60% reporting some kind of impact.



**46%** OF ADULTS IN CALIFORNIA

**Have either skipped or delayed healthcare services within the past two years**

While many adults provide positive assessments of their personal interactions with providers, nearly half observe that their healthcare provider(s) appear burned out or overburdened. This can lead to patients feeling rushed during appointments.

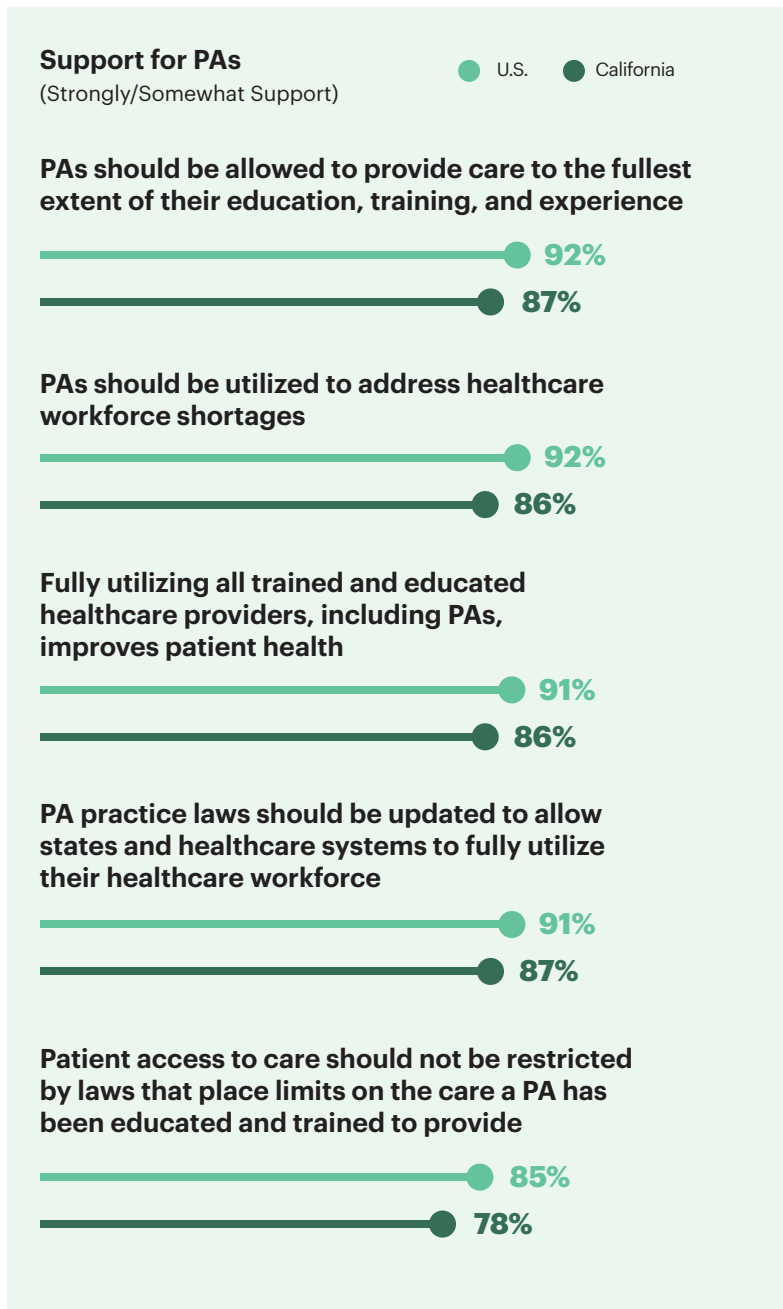
- **Demand on healthcare providers:** Nearly two-thirds in California (64%) and nationally (66%) agree that healthcare providers seem more rushed than they have been in the past.
- This may be why more than half of adults in California (55%) worry their healthcare providers appear to be burned out/overburdened and around two-thirds 67% in California worry that the demands on providers are too great.
- **Patient sentiment:** Around three in 10 adults in California (31%) say that they personally have felt rushed during a healthcare appointment and about half acknowledge that they don't always feel listened to by healthcare providers (48% in California). A quarter of adults in California (25%) say their own healthcare would be improved if their healthcare provider had more time to spend with them.

### The Value of Physician Associates/Assistants

Positive patient-provider relationships are crucial to keeping people active within the healthcare system, bolstering faith in the system, and improving health outcomes overall.

- **Primary care:** At a national level, more than four-fifths of adults (86%) have a primary care provider, while 14% do not. California adults are similarly likely to have a primary care provider (87%). Nationally, those who have a primary care provider are two times more likely than those who do not to give healthcare they received in the past 12 months an A or B grade.

- **Navigating the system:** More than six in 10 adults who have a primary care provider nationally (63%) say that healthcare providers help them navigate the healthcare system – compared with less than half of those who do not have a primary care provider (48%).
- **Preventing health conditions:** More than two-fifths of care coordinators nationally (45%) agree that better primary or preventative healthcare could have prevented a health condition, injury, or major illness for the patient.



Patients with an ongoing relationship with a PA report feeling valued because the PA takes the time to listen, understand their unique needs, communicate clearly, and empower them to take control of their health.

- **PA trust:** Nearly two-thirds of adults (64%) nationally and 57% of adults in California say that they would trust a PA to serve as their primary care provider.
- **High marks for PA care:** Nearly eight in 10 adults (79% nationally and 80% in California) who have seen a PA rate the medical care they received in the past 12 months as either good or excellent. Nationally, those who consider themselves to have an ongoing relationship with a PA rate the care from a PA even higher (89%).

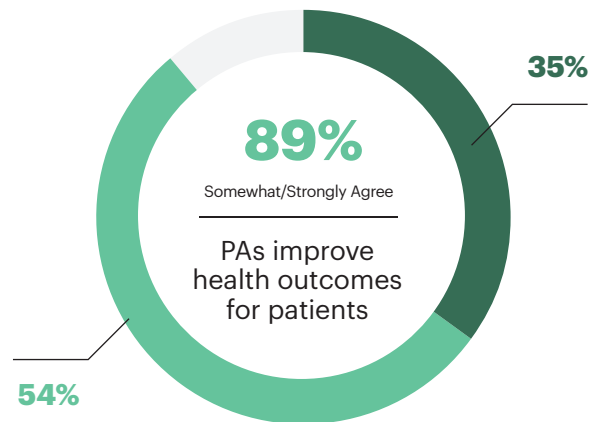
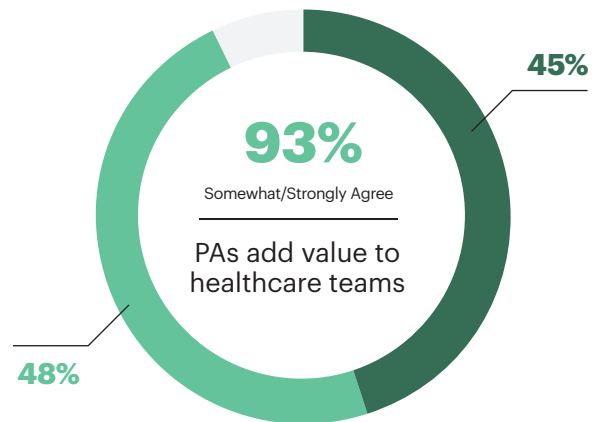
The public supports better utilizing PAs to improve the healthcare system and better address an aging population, the rise in chronic disease, and a significant healthcare workforce shortage.

- **Maximizing PA care:** Large majorities agree that PAs should be allowed to provide care to the fullest extent of their education, training, and experience (92% nationally and 87% in California).
- **Updating PA practice laws:** Majorities also support PA practice laws being updated to allow states and healthcare systems to fully utilize their healthcare workforce (91% nationally and 87% of those in California).

### Agreement with Statements about PAs

(Among U.S. Adults)

● Somewhat Support ● Strongly Support



**Unlocking the potential of all trained healthcare providers, including PAs, holds the key to enhancing patient well-being. However, maximizing this approach mandates updating PA practice laws, enabling states and healthcare systems to fully harness their workforce.**

# Research Method

The research was conducted online in the U.S. by The Harris Poll on behalf of The American Academy of Physician Associates among n=2,519 adults age 18+. In addition to the national sample, oversamples were collected in six states including California (n=513). The survey was conducted from February 23 – March 9, 2023. Interviews were conducted in English and Spanish.

Data from the national sample was weighted by race where necessary and by gender, region, education, marital status, household size, employment, household income, language proficiency (for Hispanic respondents only), and propensity to be online to bring respondents in line with their actual proportions in the population, and then combined using a post-weight.

All sample surveys and polls, whether or not they use probability sampling, as 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.

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 national sample data is accurate to within +2.8 percentage points using a 95% confidence level. This credible interval will be wider among subsets of the surveyed population of interest.

