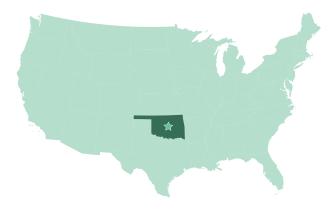
The Patient Experience

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 Oklahoma

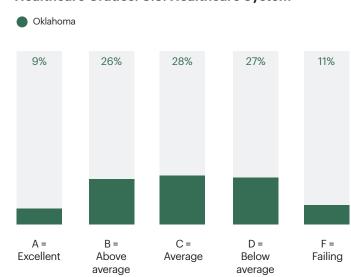
The research revealed that the U.S. healthcare system is stretched thin – a reality that was both illuminated during and exacerbated by the COVID-19 pandemic. In addition to healthcare provider burnout and staffing shortages, many feel that not everyone has equal access to care, and simply navigating 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

Nearly two in five adults in Oklahoma give the U.S. system a failing grade, and a substantial proportion of Oklahomans are concerned about their community having the resources they need to keep people healthy.

- **Dissatisfaction with healthcare system:**Thirty-eight percent of Oklahomans grade the healthcare system as poor (with 27% giving it a D and another 11% giving it an F). Nationally, 26% rate it the same: (D/F: 18% and 8% respectively).
- Impact of workforce shortages: While 72% of Oklahomans worry about healthcare workforce shortages affecting their families, nearly 68% nationally fear the same for their loved ones or themselves.
- Concern about community resources: Nearly half (46%) of Oklahomans feel that their community does not have the resources needed to keep people healthy, a sentiment echoed by 42% of U.S. adults nationwide.

Healthcare Grades: U.S. Healthcare System



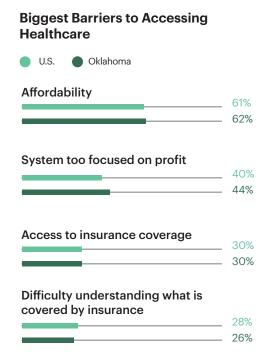




Oklahoma

The healthcare system falls short in addressing people's needs in Oklahoma and nationally. Oklahomans identify affordability as a top deterrent to access.

- Deterring care: Affordability stands as a primary hurdle, with more than six in 10 adults in Oklahoma (62%) and nationally (61%) saying that affordability in general is among the top barriers to accessing healthcare. 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.
- Financial strain: Nearly a third of adults (31%) in Oklahoma say healthcare costs strain their and/or their families finances.
 Additionally, more than half of adults in Oklahoma (54%), significantly more than nationally (43%), say there are often times they cannot afford healthcare for themselves or their families.
- Insurance coverage: Adults in Oklahoma are more likely than adults nationally to cite that their insurance doesn't cover the cost of enough services (29% vs. 23% nationally).

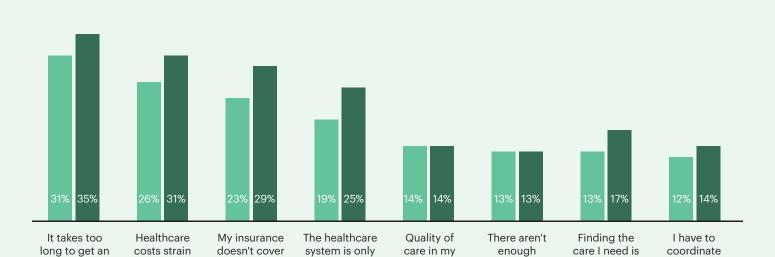


Ways in Which the Healthcare System Is Not Meeting People's Needs

the cost of

enough

services



community

is not good

providers in my

community

focused on

treating illness

and injury, not

preventative care and wellness

American Academy of

appointment

my/my family's

finances



care across

too many

providers

confusing and

hard to

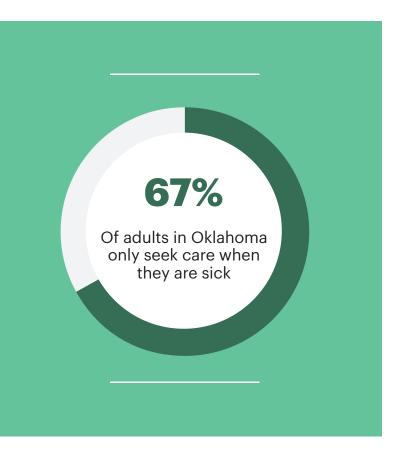
navigate

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

- Coordinating care: Seven in 10 adults in Oklahoma (70%) and more than 6 in 10 nationally (65%) say that coordinating and managing healthcare is overwhelming and time-consuming. Adults in Oklahoma report spending an average of 2.6 hours a week coordinating care for themselves or their families, and an average of 3.8 hours if they are helping someone else navigate care. Nationally, adults spend an average of 2.0 hours coordinating care for themselves or their families and an average of 3.3 hours helping someone else.
- Long wait times: On average, whether nationally or in Oklahoma, 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 3.8 weeks (Oklahoma).

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

- Skipping care: More than half of Oklahomans (55%) say they have delayed or skipped care which is a significantly higher proportion than what is seen nationally (44%). Oklahomans are directionally more likely than adults nationally to only seek care when they are sick (67% vs. 61%, respectively).
- Cost of care: Financial cost is the top reason adults delayed or skipped care in Oklahoma and nationally (47% in Oklahoma vs. 40% nationally).
- Impact of skipping care: Moreover, two-thirds of adults in Oklahoma (66%) who delayed or skipped care within the past two years experienced some kind of impact as a result, including negative impact on mental health (28%), overall health decline (24%), and/or worsening condition (23%). Results were directionally lower nationally, with 60% reporting some kind of impact.



55% OF ADULTS IN OKLAHOMA

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 which may lead to patients feeling rushed during appointments.

- **Demands of healthcare providers:** Two-thirds of adults in Oklahoma (67%) and nationally (66%) agree that healthcare providers seem more rushed than they have been in the past.
- Provider burnout: Nearly half of adults in Oklahoma (46%) and nationally (47%) worry their healthcare providers appear to be burned out/overburdened and seven in ten (70%) in Oklahoma and nationally (71%) worry that the demands on providers are too great.
- Patient sentiment: Around a third of adults in Oklahoma (33%) and nationally (30%) 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 (53% in Oklahoma vs. 49% nationally).

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. Oklahoma adults are nearly as likely to have a primary care provider (82%). 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 ten adults nationally who have a primary care provider (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: Nationally. more than two-fifths of care coordinators (45%) agree that better primary or preventative healthcare could have prevented the health condition, injury, or major illness for the patient.







Physician associates/assistants are well-positioned to be part of the solution to the healthcare crisis in the U.S. Having an ongoing relationship with a PA further establishes and enhances these positive feelings.

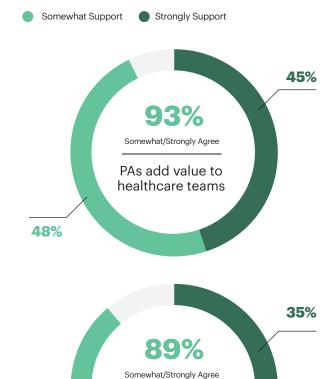
- PA trust: Nearly two-thirds of adults (64%)
 nationally and significantly more adults in
 Oklahoma (72%) say that they would trust a PA to
 serve as their primary care provider.
- High marks for PA care: Around eight in 10 adults (79% nationally and 78% in Oklahoma) who have seen a PA rate the medical care they received from a PA in the past 12 months as either good or excellent. Nationally, those who consider themselves as having an ongoing relationship with a PA are more likely to grade their recent healthcare as an A or B (89% compared with 76% who have seen a PA but do not have an ongoing relationship).

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 93% in Oklahoma, are in support).
- 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%, both nationally and in Oklahoma).

Agreement with Statements about PAs

(Among U.S. Adults)



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.

PAs improve

health outcomes

for patients

54%





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 Oklahoma (n=507). 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.





