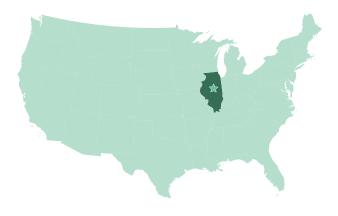
The Patient Experience

Perspectives on Today's Healthcare



Background

The American Academy of Physician Associates (AAPA) advocates for the physician associate/assistant (PA) 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 sample collected as well as the oversample of adults living

The research revealed that the U.S. healthcare system is 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 to reduce the cost of healthcare, adults agree that having health. This is where PAs, working to the full extent of their healthcare within the U.S.

Views of the System

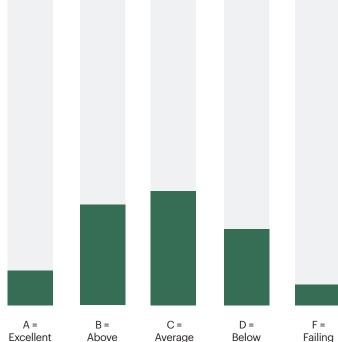
Illinois

Nearly three in ten adults in Illinois give the U.S. system a failing grade, and a substantial proportion of Illinois residents are concerned about healthcare workforce shortages affecting themselves or their families.

- Dissatisfaction with healthcare system: Twenty-eight percent of Illinoisans grade the healthcare system as poor (with 22% giving it a D and another 6% giving it an F). Nationally, 26% rate it the same: (D/F: 18% and 8% respectively).
- Impact of workforce shortages: While 66% of Illinoisans worry about healthcare workforce shortages affecting their families, nearly 68% nationally fear the same for their loved ones or themselves.

Healthcare Grades: U.S. Healthcare System

10% 29% 33% 22% 6%



average

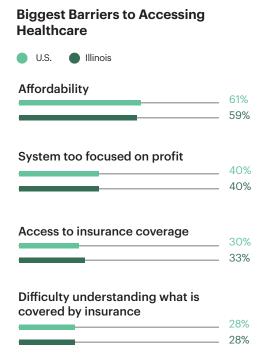




average

The healthcare system falls short in addressing people's needs in Illinois and nationally. Illinoisans identify affordability as a top deterrent to access, and are particularly likely to identify lack of providers as a barrier to care access.

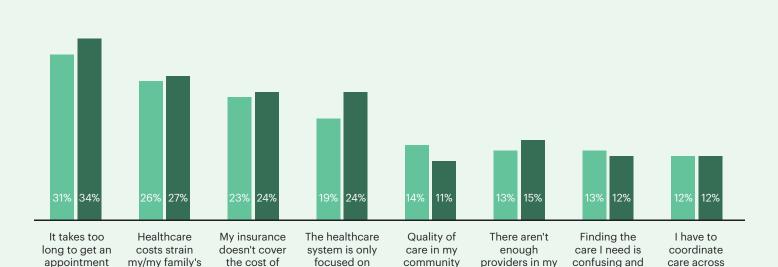
- Deterring care: Affordability stands as a primary hurdle, with close to six in 10 adults in Illinois (59%) and nationally (61%) saying that affordability in general is among the top barriers to accessing healthcare. Interestingly, residents in Illinois are particularly likely to say that lack of primary care providers is also a barrier to access (19% vs. 13% nationally).
- **Financial strain:** Nearly three in ten adults (27%) in Illinois say healthcare costs strain their and/or their families finances. Additionally, more than two-fifths of adults in Illinois (43%), in line with adults nationally (43%), say there are often times they cannot afford healthcare for themselves or their families.
- Insurance coverage: Adults in Illinois are similarly likely to adults nationally to cite that their insurance doesn't cover the cost of enough services (24% vs. 23% nationally).



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

enough

services



is not good

community

treating illness

and injury, not

preventative care and wellness



finances



too many

providers

hard to

navigate

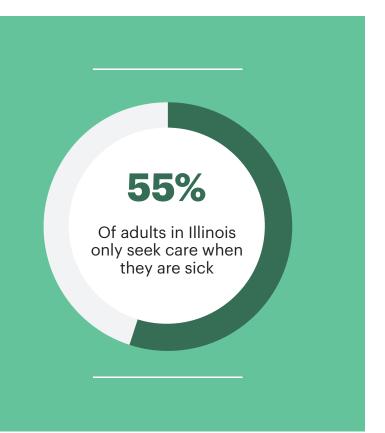
Illinois

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

- Coordinating care: Six in 10 adults in Illinois (61%) and more than 6 in 10 nationally (65%) say that coordinating and managing healthcare is overwhelming and time-consuming. Adults in Illinois report spending an average of 2.3 hours coordinating care for themselves or their families, and an average of 2.7 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 national in Illinois, it takes around a month or more 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 4.3 weeks (Illinois).

Though relatively less likely to skip or delay care than adults nationally, cost worries, access barriers, care coordination challenges, and resulting frustration continue to influence behavior of Illinoisans, which has mental health impacts for residents.

- Skipping care: Two fifths of Illinoisans (40%) say they have delayed or skipped care, in line with what is seen nationally (44%). However, Illinoisans are directionally less likely than adults nationally to only seek care when they are sick (55% vs. 61%, respectively), and are directionally more likely to say that they have not delayed or skipped care in the last two years (60% vs. 56% nationally).
- Cost of care and long wait times: Financial cost is the top reason adults delayed or skipped care in Illinois and nationally (41% in Illinois vs. 40% nationally), followed closely by it taking too long to get an appointment (37% vs. 25% nationally). Illinoisans are also more likely than adults nationally to say that finding a provider was too complicated (23% vs. 15% nationally).
- Mental health toll of skipping care: Moreover, six in ten adults in Illinois (60%) who delayed or skipped care within the past two years experienced some kind of impact as a result, including a significantly higher negative impact on mental health than what we see nationally (38% vs. 25% nationally), lost faith in the healthcare system (26%), and/or worsening condition (25%). Results were in line with adults nationally, with 60% reporting some kind of impact.



40% OF ADULTS IN ILLINOIS

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





While nearly half observe that their healthcare provider(s) appear burned out or overburdened which may lead to patients feeling rushed during appointments, Illinoisans appear to be getting comprehensive, easy to follow care plans at a higher rate than national adults.

- **Demands on healthcare providers:** Two-thirds of adults in Illinois (65%) and nationally (66%) agree that healthcare providers seem more rushed than they have been in the past.
- **Provider burnout:** Over two-fifths of adults in Illinois (43%) and nationally (47%) worry their healthcare providers appear to be burned out/overburdened and 7 in 10 (72%) in Illinois and nationally (71%) worry that the demands on providers are too great.
- Mixed patient sentiment: While a third of adults in Illinois (32%) and nationally (30%) acknowledge that they personally have felt rushed during a healthcare appointment, Illinoisans are more likely than adults nationally to say that a provider has designed a care plan that they were able to understand and follow (37% vs. 28% 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. Illinois adults are similarly likely to have a primary care provider (88%). 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 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 similar proportions in Illinois
 (61%) 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 83% in Illinois) who have seen a PA rate the medical care they received from a PA in the past 12 months as either good or excellent. 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).

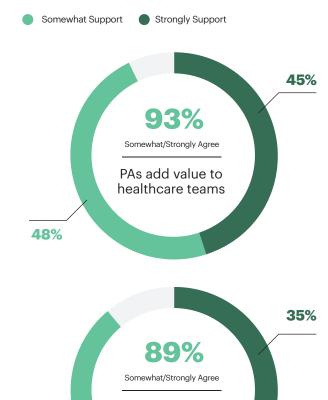
The public supports better utilizing PAs to improve the healthcare system and better address an aging population, the rise in chronic disease, and a significant healthcare workforce shortage.

- 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 90% in Illinois, 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% nationally; 89% in Illinois).

Agreement with Statements about PAs

(Among U.S. Adults)

54%



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





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 Illinois (n=503). The survey was conducted from November 28 – December 26, 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.





