



## Views on Prescription Drug Costs and Voting Among Adults Ages 50-Plus

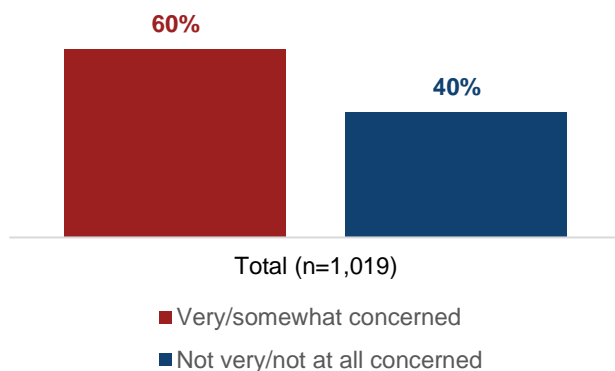
### ABOUT THIS SURVEY

As [previous research](#) has shown, most midlife and older adults rely on prescription drugs to maintain their health, yet many worry about their ability to pay for them. They also believe that lawmakers should take action to help make prescription medications more affordable. This AARP survey of 1,019 American adults ages 50 and older explores their level of concern about their ability to afford the cost of prescription drugs, their knowledge of a new law that reduces prescription drug prices and costs for people in Medicare, and their likelihood of voting for Congressional candidates who support various measures related to prescription drug costs. The importance of prescription drug pricing as a consideration for voting in the November 2024 election is also explored. This survey has a margin of error of  $\pm 4.24$  percentage points.

### KEY FINDINGS

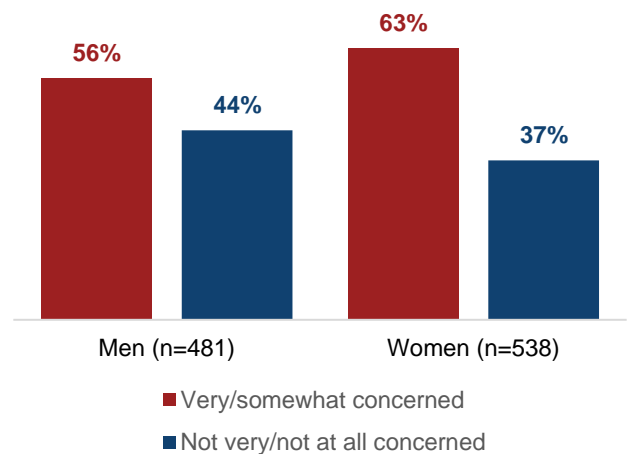
**Majority of adults 50-plus are concerned about being able to afford prescription drugs for themselves or a family member.** Six in ten (60%) adults ages 50 and older said they are very or somewhat concerned about being able to afford the cost of prescription drugs they or a family member might need (Figure 1).

**Figure 1: Level of concern about affording prescription medications**



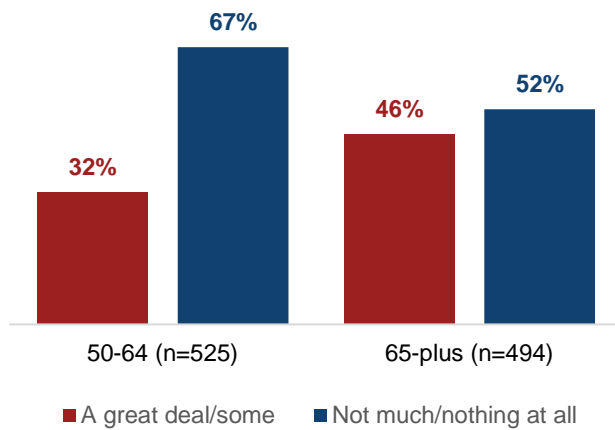
While there are no differences in responses by age or by political ideology, women ages 50 and older are more likely than men in the same age group to say they are very or somewhat concerned about being able to afford the cost of prescription medication they or a family member may need (63% vs. 56%) (Figure 2).

**Figure 2: Level of concern about affording prescription medications, by gender**



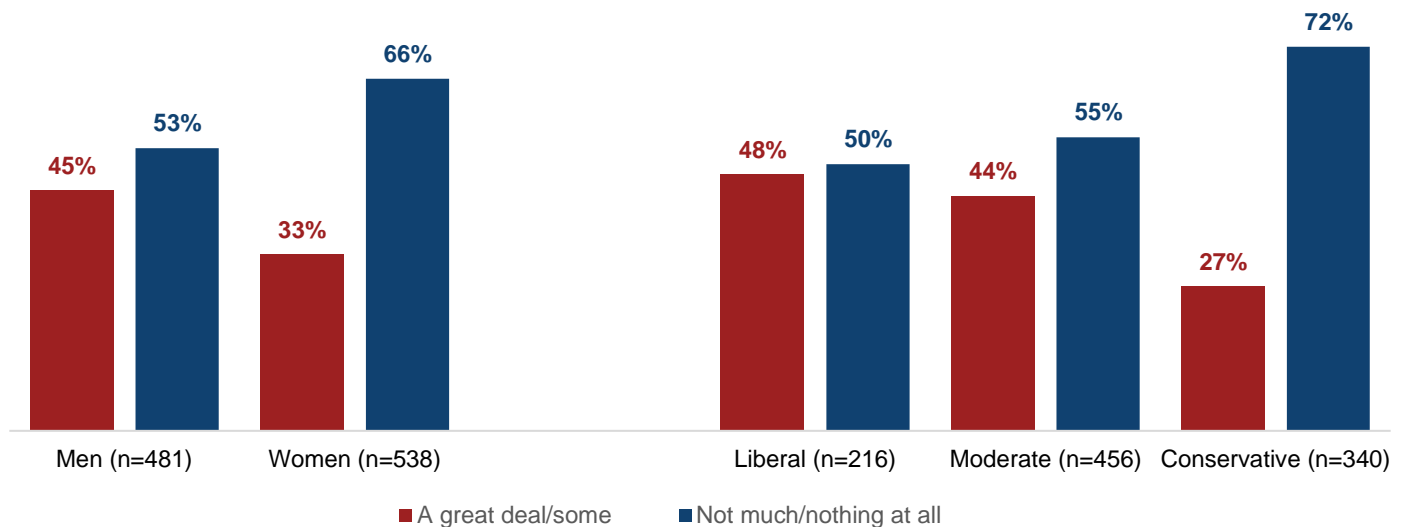
**Awareness of the new law affecting prescription drug prices in Medicare is relatively low, although there are differences by age.** About four in ten (39%) adults ages 50-plus said they had seen, read, or heard a great deal or some about a recent law that reduces prescription drug prices and costs for people in Medicare (not shown). In terms of differences by age, adults ages 65 or older are more likely than those ages 50-64 to say they have seen, read or heard a great deal or some about the law (46% vs. 32%); those ages 50-64 are more likely to say they have seen not much or nothing at all (67% vs. 52%) (Figure 3).

**Figure 3: Awareness of the new law, by age group**



Similarly, awareness of the new law affecting prescription drug prices in Medicare varies by gender and political ideology. Men are more likely to say they have seen, read, or heard a great deal or some about the law (45% vs. 33%), while women are more likely to say they have seen not much or nothing at all about it (66% vs. 53%). In terms of political ideology, adults who define themselves as liberal or moderate are more likely than conservatives to say they have seen, read, or heard a great deal or some about the new law (48% and 44% vs. 27%); those who define themselves as conservative report seeing, reading or hearing not much or nothing at all about it (72% vs. 50% and 55%) (Figure 4).

**Figure 4: Awareness of the new law, by gender and political ideology**

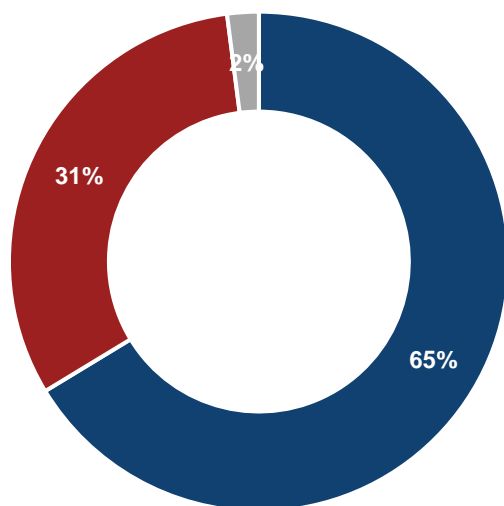


**By roughly a two-to-one margin, adults ages 50-plus say they would be more likely to support Congressional candidates who support the new law that includes allowing Medicare to negotiate for lower prescription drug prices.** Nearly two-thirds (65%) of adults 50-plus say they would be more likely to support such a candidate compared to three in ten who say it would make no difference in their voting (31%) (Figure 5 on the following page). Adults ages 65 or older are more likely than their younger counterparts to say they are more likely to vote for such a Congressional

candidate (70% vs. 60%); adults ages 50-64 are more likely to say it would make no difference in their vote (34% vs. 27%).

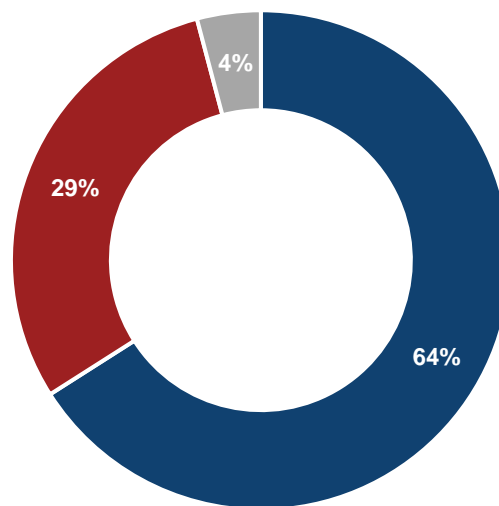
Further, while there are no gender differences in responses to this question, adults who define themselves as liberal or moderate are more likely to report that they would be more likely to vote for such a candidate (73% and 71% vs. 52%); conservatives are more likely to say it would make no difference in their vote (45% vs. 21% and 25%).

**Figure 5: Likelihood of voting for Congressional candidate who supports allowing Medicare to negotiate for lower prescription drug prices**



■ More likely ■ No difference ■ Less likely

**Figure 6: Likelihood of voting for Congressional candidate who supported capping insulin copayments at \$35 per month for those with health insurance**

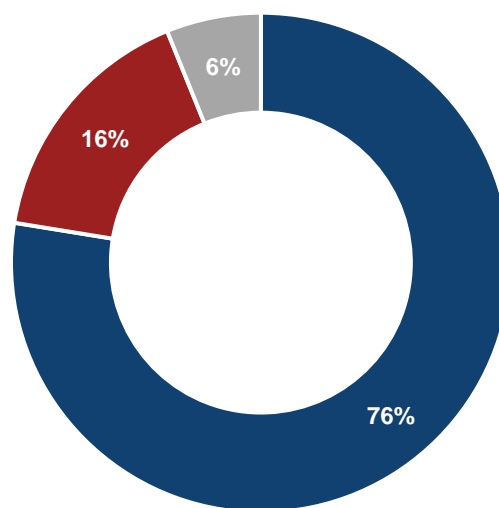


■ More likely ■ No difference ■ Less likely

By a similar margin, adults ages 50-plus say they would be more likely to support Congressional candidates who supported capping insulin copayments at \$35 per month for those with health insurance. Nearly two-thirds (64%) of adults 50-plus say they would be more likely to support such a candidate compared to three in ten who say it would make no difference (29%) (Figure 6).

When asked if they would be more or less likely to vote for a candidate for Congress who supported capping insulin copayments at \$35 dollars per month for people with health insurance, or if would make no difference, men are more likely than women to say it would make no difference (34% vs. 25%). Adults 50-plus who identify as liberal and moderate are more likely than those who identify as conservative to say they would be more likely to vote for such as candidate (72% and 68% vs. 56%); conservatives more likely to say it would make no difference (40% vs. 18% and 26%).

**Figure 7: Likelihood of voting for Congressional candidate who supports cracking down on drug companies that unfairly extend their patents to keep prices high**



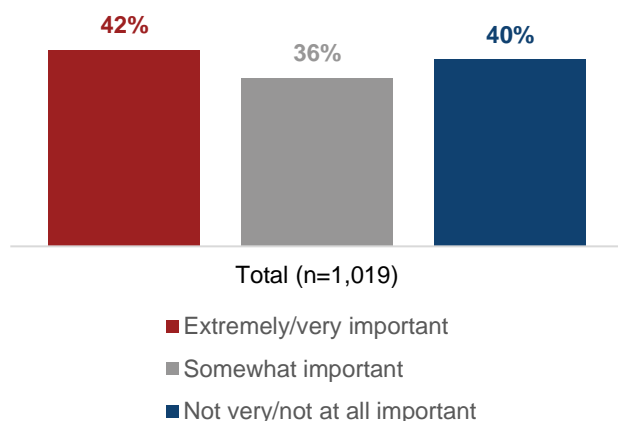
■ More likely ■ No difference ■ Less likely

**Adults ages 50-plus are even more likely to say they would support candidates who support cracking down on drug companies that unfairly extend their patents to keep prices high.** More than three-quarters (74%) of adults ages 50 and older report they would be more likely to support Congressional candidates who support efforts to crack down on drug companies that unfairly extend their patents compared to one in six (16%) who say it would make no difference in their voting (Figure 7 on the previous page).

While there are no age or gender differences in responses when respondents were asked if they would be more or less likely to vote for a candidate for Congress who supports cracking down on drug companies that unfairly extend their patents to keep prices high, conservatives are more likely than liberals to report that it would make no difference (25% vs. 8%).

**The cost of prescription drugs is an important consideration for adults ages 50-plus when thinking about their vote next November.** When asked about the importance that the cost of prescription drugs would play when thinking about/deciding their vote next November, more than four in ten (42%) adults ages 50 and older said it is extremely or very important with one-third (36%) saying it is somewhat important to them (Figure 8).

**Figure 8: Importance of the cost of prescription drugs when deciding one's vote in November 2024**



**Notably, there are important age, gender, and ideological differences when adults ages 50 and older consider the impact of the cost of prescription drugs on their voting behavior:**

- Adults ages 65 and older are more likely than their younger counterparts to say the cost of prescription drugs is extremely, very, or somewhat important to them when thinking about their vote next November (83% vs. 73%); adults ages 50-64 are more likely to say it is not very or not at all important to them (26% vs. 17%).
- Additionally, women are more likely than men to say that the cost of prescription drugs is important to them (84% vs. 72%), while men are more likely to say that it is not important (27% vs. 16%).
- In terms of political ideology, liberals and moderates are more likely than conservatives to say that prescription drug costs are extremely, very, or somewhat important to them when thinking about how they will vote in November 2024 (86% and 86% vs. 63%). In contrast, conservatives are more likely to say it is not important (36% vs. 14% of both liberals and moderates).

## IMPLICATIONS

**Adults ages 50-plus say they will take the cost of prescription drugs into consideration when thinking about how they will vote next November.** Although awareness of the new law that reduces prescription drug prices and costs for people in Medicare is relatively low, adults ages 50-plus say they would be more likely to support Congressional candidates who support this law as well as those who supported capping insulin copayments at \$35 per month for those with health insurance (which is a provision in the law). They are even more likely to say they would support candidates who support cracking down on drug companies that unfairly extend their patents to keep prices high.

## SURVEY RESPONDENT DEMOGRAPHICS

*n* = 1,019

Demographic Variable	Weighted
<b>Age</b>	
50-64 years	53%
65 years or older	47%
<b>Gender</b>	
Men	47%
Women	53%
<b>Race/Ethnicity</b>	
Asian, non-Hispanic	4%
Black, non-Hispanic	11%
Hispanic	12%
White, non-Hispanic	70%
Other, non-Hispanic	1%
2+ races, non-Hispanic	2%
<b>Education</b>	
Some college or less	66%
Bachelor's degree or higher	34%
<b>Marital Status</b>	
Currently Married	59%
Currently separated/divorced/widowed/single	41%
<b>Household Income</b>	
Less than \$30,000	24%
\$30,000 to under \$60,000	27%
\$60,000 to under \$100,000	22%
\$100,000 or more	27%

## METHODOLOGY

This nationally representative survey was fielded on September 15-18, 2023 to explore the level of concern that adults ages 50 and older have about their ability to afford the cost of prescription drugs, their knowledge of the new law affecting prescription drug prices in Medicare, and their likelihood of voting for Congressional candidates who support various measures related to prescription drug costs. The survey included adults aged 50 and older (N=1,019) and it was implemented online and by telephone using NORC's Foresight 50+ panel. Data are weighted to the latest Current Population Survey (CPS) benchmarks developed by the U.S. Census Bureau and are balanced by gender, age, education, race/ethnicity, region, and AARP Membership. The weighted data reflect the U.S. population of adults ages 50 and over. The margin of error for the total sample is  $\pm 4.24$  percentage points.

For more information on this survey, contact Teresa A. Keenan at [keenana@aarp.org](mailto:keenana@aarp.org). For media inquiries, contact [media@aarp.org](mailto:media@aarp.org).

## ABOUT AARP

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AARP is the nation's largest nonprofit, nonpartisan organization dedicated to empowering people 50 and older to choose how they live as they age. With a nationwide presence, AARP strengthens communities and advocates for what matters most to the more than 100 million Americans 50-plus and their families: health security, financial stability, and personal fulfillment. AARP also produces the nation's largest circulation publications: AARP The Magazine and AARP Bulletin. To learn more, visit [www.aarp.org/about-aarp/](http://www.aarp.org/about-aarp/), [www.aarp.org/español](http://www.aarp.org/español) or follow [@AARP](https://twitter.com/AARP), [@AARPenEspañol](https://twitter.com/AARPenEspañol) and [@AARPadvocates](https://twitter.com/AARPadvocates) on social media.

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