

State of Patient Access Focus Brief: Patients of color

Overview

Racial and ethnic disparities are well documented in healthcare, with tragic consequences in the form of higher disease burdens and shorter lifespans among patients of color. These inequities are deeply rooted in structural racism and systemic bias, as well as intersecting social and economic disadvantages. Our 2024 *State of Patient Access* survey shows that patients of color face higher burdens and more obstacles to care. Patients of color reported lower assessments of the quality of their care, less trust in healthcare providers (HCPs), and more financial and administrative barriers than their white counterparts.

2024 State of Patient Access Scorecard

	Total		Patients of color		Black/African American patients		Hispanic patients		Asian patients		Native American/Pacific Islander patients	
Overall grade	C	75.8	C-	72.2	C	74.4	C-	70.1	C	74.6	C-	71
Overall Access to Care	C+	78.8	C	76	C+	78.4	C	74.8	C	76.2	C+	77.1
Relationship with Healthcare Professionals	B	84.2	B-	81.7	B-	82.8	B-	82.3	B-	80.9	B	83.8
Affordability of Prescription Medications	B-	82.3	C+	78.8	B-	81.1	C	76.1	B-	81.8	C	75.9
Access to Treatment through Healthcare Plans	D-	62.8	D-	60.5	D-	63.9	F	57.9	D-	62.5	F	54.9
Financial Toxicity	C-	70.7	D-	63.7	D	65.7	F	59.3	C-	71.8	D-	63.1

■ B= 80-89 ■ C= 70-79 ■ D= 60-69 □ F= 50-59

The PAN Foundation's *State of Patient Access* initiative aims to further explore healthcare access challenges and their impact on different communities. To crystallize the key findings from the patient survey and synthesize the state of patient access in the United States, we created a scorecard with five dimensions:

1. Overall Access to Care
2. Relationship with Healthcare Professionals
3. Affordability of Prescription Medications
4. Access to Treatments through Healthcare Plans
5. Financial Toxicity

When looking at the five dimensions included in the 2024 *State of Patient Access* Scorecard, patients of color graded *Overall Access to Care* ("C"), *Affordability of Prescription Medications* ("C+"), and *Financial Toxicity* ("D-") worse than white patients. On *Access to Treatments through Healthcare Plans*, Hispanic patients and Native American or Pacific Islander patients gave a failing grade ("F"), as did Hispanic patients on *Financial Toxicity*.



Detailed findings

Healthcare services

- Patients of color were less likely than white patients to have had annual checkups (59% vs. 69%), appointments to undergo tests (55% vs. 62%), specialist appointments (48% vs. 55%), and preventive visits (35% vs. 42%).
- Among patients of color who had a medical appointment in the past year, 45% had a telehealth visit compared with just 30% of white patients in the same category.
- Among patients of color who had received healthcare services in the past 12 months, 21% said that care was only poor or fair, compared to 15% of white patients.

Financial hardship, anxiety, and toxicity

- Nearly one-third (31%) of patients of color said they have a great deal, or a lot of financial toxicity related to their chronic condition(s), compared with white patients (20%).
- Patients of color (59%) were less likely than white patients (45%) to be able to afford an unexpected medical bill less than \$500.
- Nearly one-quarter (22%) of patients of color said they did not get a prescription medication because of costs in the past year, compared with 14% of white patients; and patients of color (85%) were more likely than white patients (75%) to face negative impacts as a result.
- More than one-third (35%) of patients of color said their deductible had not been at all or very affordable in the past 12 months compared with 29% of white patients; 41% of patients of color said they worry about deductible affordability compared with 35% of white patients.
- More than half (53%) of patients of color with health insurance said they had faced some challenge getting their prescribed medications, compared with 47% of white patients.

Interactions with HCPs

- Patients of color are more likely than white patients to feel their HCP does not take their concerns seriously (15% vs. 10%) and twice as likely to feel their HCP is critical of their habits (12% vs. 6%) and to feel their HCP does not understand them (10% vs. 5%).

Specific challenges facing Black and Hispanic patients

There were several differences in the experiences of Black and Hispanic patients, compared with white patients, including:

- One-quarter (25%) of Black patients felt their race/ethnicity negatively impacted their ability to get the best possible healthcare compared with 2% of white patients and 6% overall.
- Hispanic patients who had seen an HCP in the past year were more likely to report cultural barriers (12%) or language barriers (12%) that make it difficult to communicate with their HCP, compared with 2% of white patients on both measures.
- More than one-third (37%) of Hispanic patients reported high levels of financial toxicity, compared with 31% of patients of color and 20% of white patients.
- Nearly one-third (30%) of Hispanic patients reported an outstanding medical bill they do not know how they will pay, compared with 21% of white patients. However, the average balance for Hispanic patients was lower, nearly \$4,700 vs. \$5,300 for white patients.
- One-third (34%) of Hispanic patients said that the cost of prescription drugs had been difficult in the past year; the same proportion said drug costs had been unaffordable.
- Hispanic patients (52%) were more likely than white patients (31%) to have taken some financial action to be able to afford medications; 26% of Hispanic patients said they want help finding resources to help pay for prescriptions.

Logistical challenges

- Patients of color (57%) were more likely than white patients (45%) to experience logistical challenges when they accessed needed care.
- Patients of color (60%) were more likely than white patients (42%) to have relied on resources other than formal medical appointments for support with their chronic conditions.
- Two-thirds (65%) of patients of color in the survey said they wanted some form of help to access needed healthcare compared with 47% of white patients.