

**Cicero®** | **MGT**

# Perspectives Toward Utah's Healthcare System

Utah Resident Survey Insights

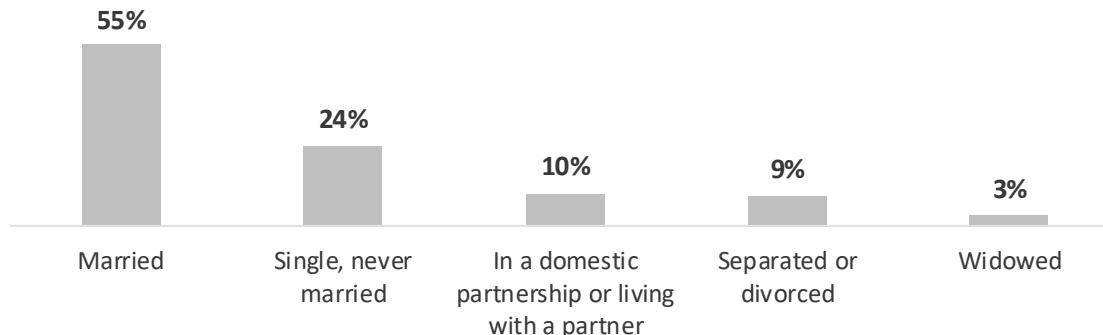
July 2025

# Survey responses are demographically representative of Utah's population and exhibit the following characteristics

Cicero gathered quantitative, statistically significant data from a total of **1,000 Utah residents**. The survey was distributed statewide and hosted by Cicero from late-May to July 2025. Survey questions were designed to focus on the following topics: Healthcare Experiences; Perceptions Toward Utah's Healthcare System; Performance and Improvements Related Topics; Perceptions of Trust, Quality and Affordability within Utah's Healthcare System; and Demographics.

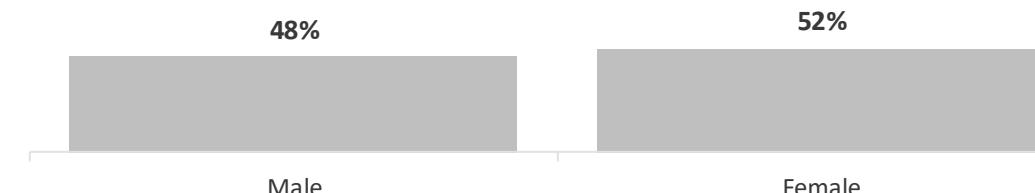
## Marital Status

All respondents; n=1,000



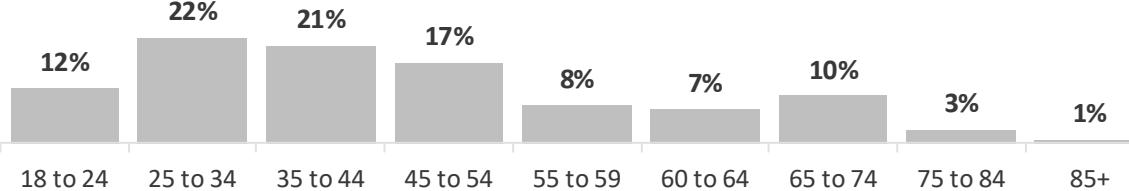
## Gender

All respondents; n=1,000



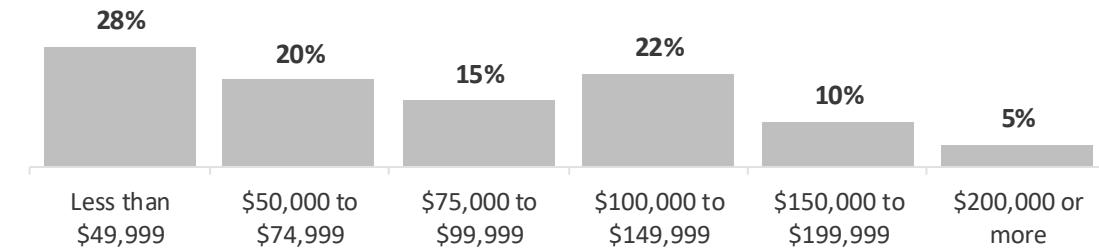
## Age Category

All respondents; n=1,000



## Income Level

All respondents; n=1,000



Q5: What is your age?

Q7: In 2024, what was your total household income before taxes?

Q8: Which of the following best describes your marital status?

Q10: What is your gender?

# EXECUTIVE SUMMARY

Utahns actively use the state's healthcare system and trust those delivering care—but affordability pressures and uneven institutional trust strain confidence across all population segments.

## Utah's Healthcare System Is Widely Used—But It's Straining Households

Engagement is high, but so is financial vulnerability. Even insured Utahns experience unreliable financial protection—suggesting an affordability gap that's systemic, not marginal.

- Nearly all Utahns interacted with the system in the past year—primarily for prescriptions and checkups.
- Most are covered through private or employer-sponsored insurance.
- Yet **over half paid fully out-of-pocket** for at least one service, and **cost is a consistent barrier**—especially for younger and lower-income residents.
- For many, **financial strain begins below \$1,000**, with skipped care, delayed treatments, and debt as common outcomes.

## Trust Exists—but It's Narrow, Conditional, and Uneven

Utahns' confidence in the system is focused on individual care, not so much the system behind it. Utahns are essentially saying, "I trust my doctor, but I don't necessarily trust the system to work for me."

- Overall trust in the system is moderate (61% lean toward trust), but deep trust is rare—only 8% "completely trust" Utah's healthcare system.
- Trust is **highest in clinicians** (especially for communication and honesty), followed by hospitals; **insurers trail far behind**.
- Very few of the "trust attributes" tested earn broad consensus among Utahns. Fragmentation is consistent across segments—but trust skews higher for high-income, retired, and educated groups.

## Utahns Sees a Path Forward—But Expects More from System Leaders

Utahns aren't rejecting the system—they're asking for more from it. Utahns want a system that works *with* their trusted care providers—not one that leaves them to navigate gaps on their own

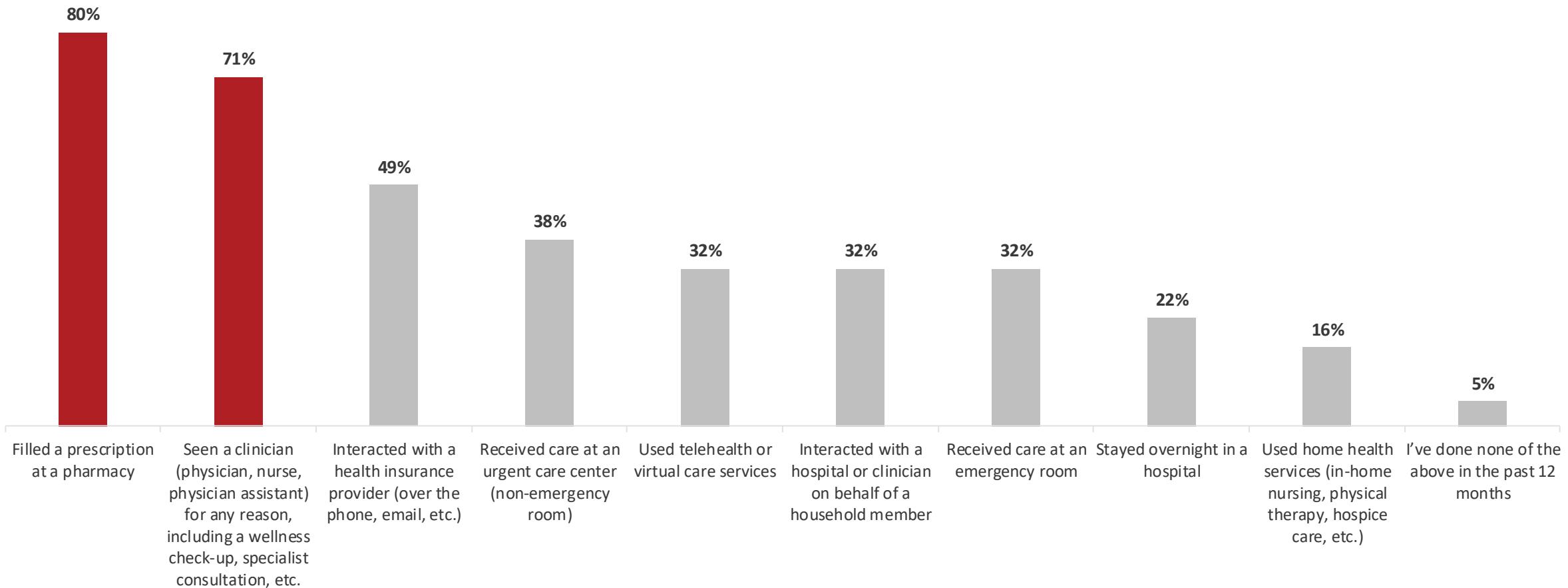
- 83% of Utahns believe the healthcare system needs adjustment or reform—though many say significant reforms are not required.
- Frontline actors (clinicians and hospitals) are seen as leading today's system improvements—but Utahns want to see **greater leadership and responsibility placed on the state and system institutions**.
- Residents see progress in quality and delivery, but **affordability and insurers remain stalled**.
- The public's ask is clear: preserve what works at the front line but **bring greater accountability and transparency to system-level actors**.

## Insights & Learnings

# Nearly all Utahns have interacted with the state's healthcare system in the past year, most often to fill prescriptions or visit clinicians for check-ups and consultations

## Reported Healthcare Activities by Utah Households (Past Year)

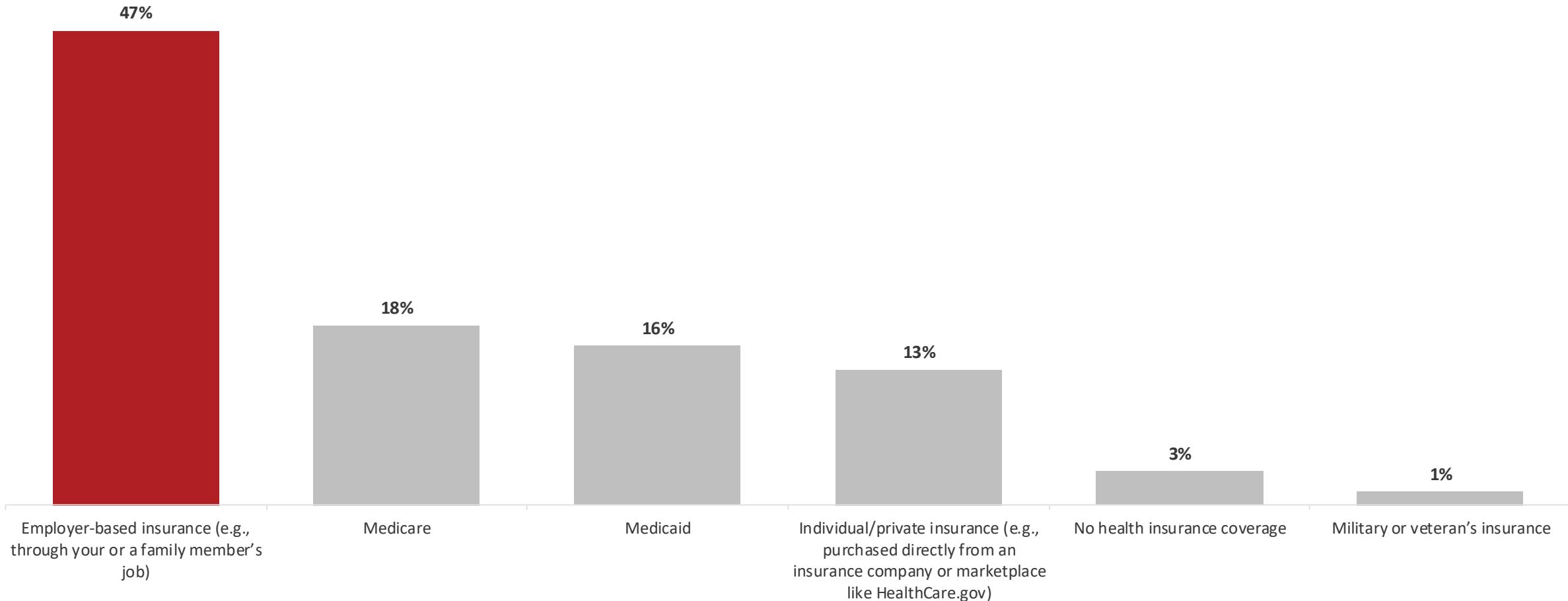
Multi-Select; n=1,000; Utah's healthcare system refers to the full landscape of hospitals, clinics, doctors, nurses, pharmacies, insurance providers, and other related entities, professionals, and resources in Utah that work together to provide healthcare services.



# Six out of ten Utahns engage with Utah's healthcare system using employer-based or individual/private insurance

## Self-Reported Primary Type of Health Insurance

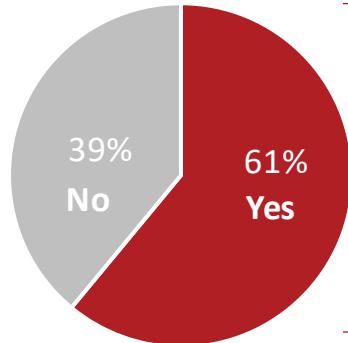
*n=1,000*



# Excluding dental and vision, about half of Utahns paid fully out-of-pocket for at least one healthcare related expense in the past year

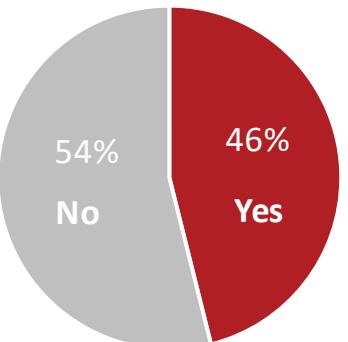
## Percent of Utahns that Have Paid Fully Out-of-pocket Without Using Insurance (Past 12 Months)

*n=967; only those with health insurance responded*



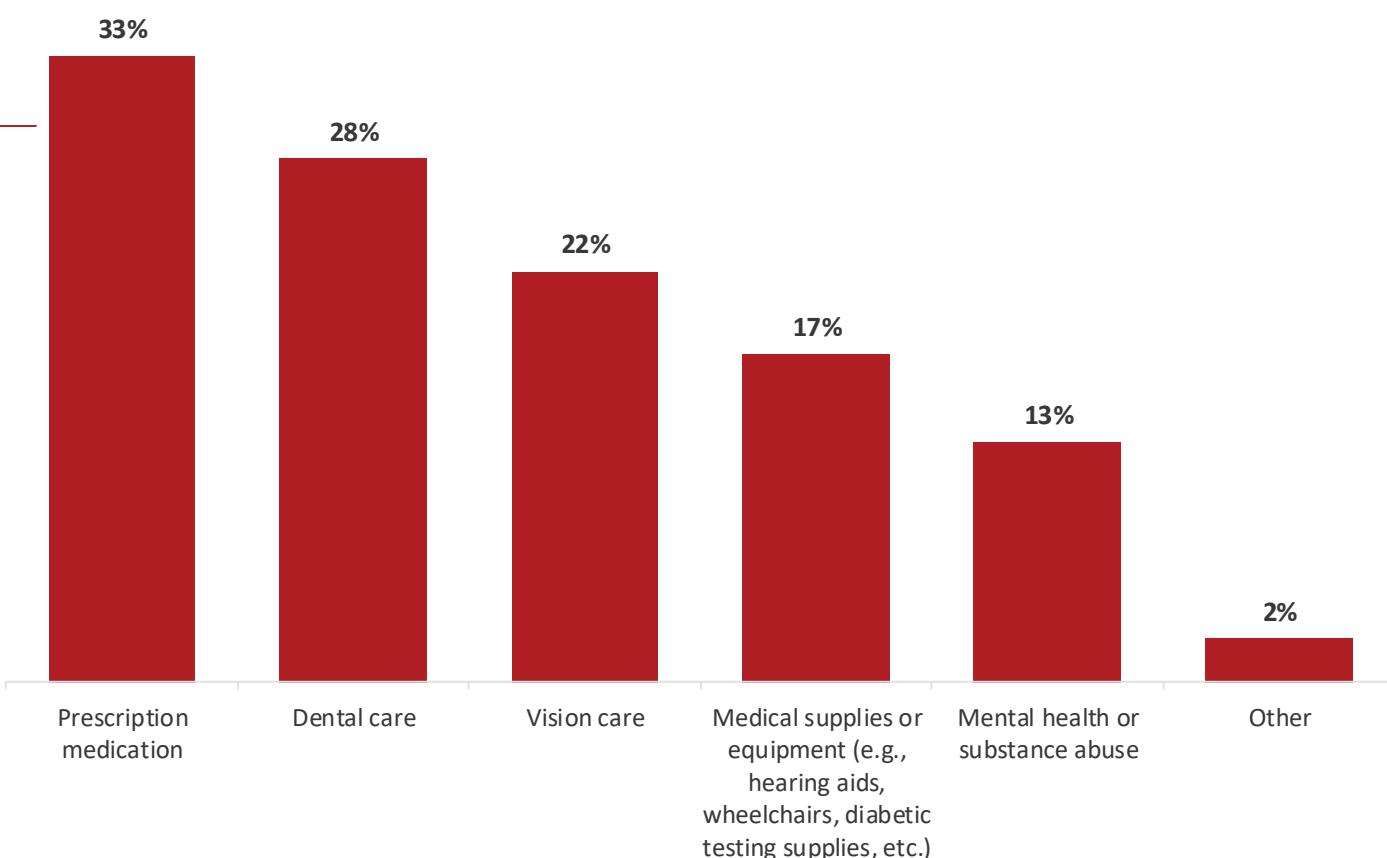
## Percent of Utahns that Have Paid Fully Out-of-pocket Without Using Insurance (EXCLUDING DENTAL & VISION)

*n=967; only those with health insurance responded*



## Specific Healthcare Related Expenses Paid For Fully Out-of-pocket

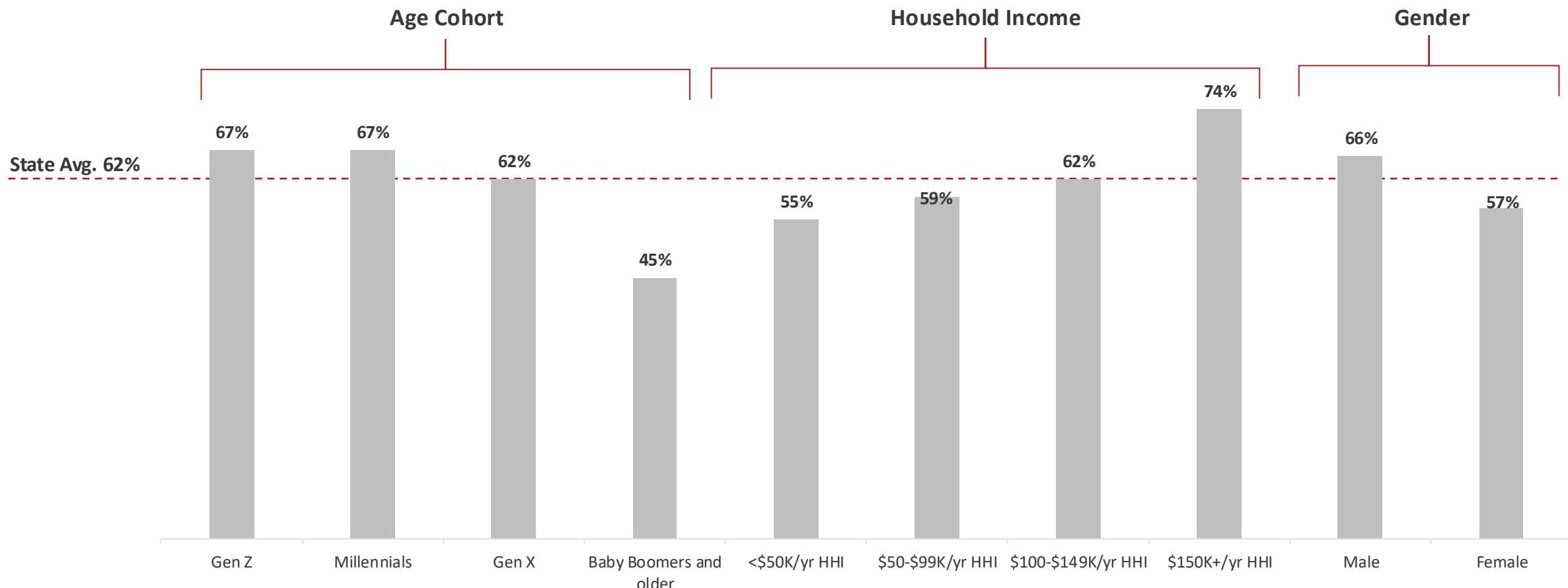
*Multi-Select; n=967; figures representative of total insured population and not just those that have paid fully out-of-pocket.*



# Older and lower-income Utahns are least likely to pay fully out-of-pocket for care

## Percent of Utahns that Have Paid Fully Out-of-pocket Without Using Insurance (Past 12 Months)

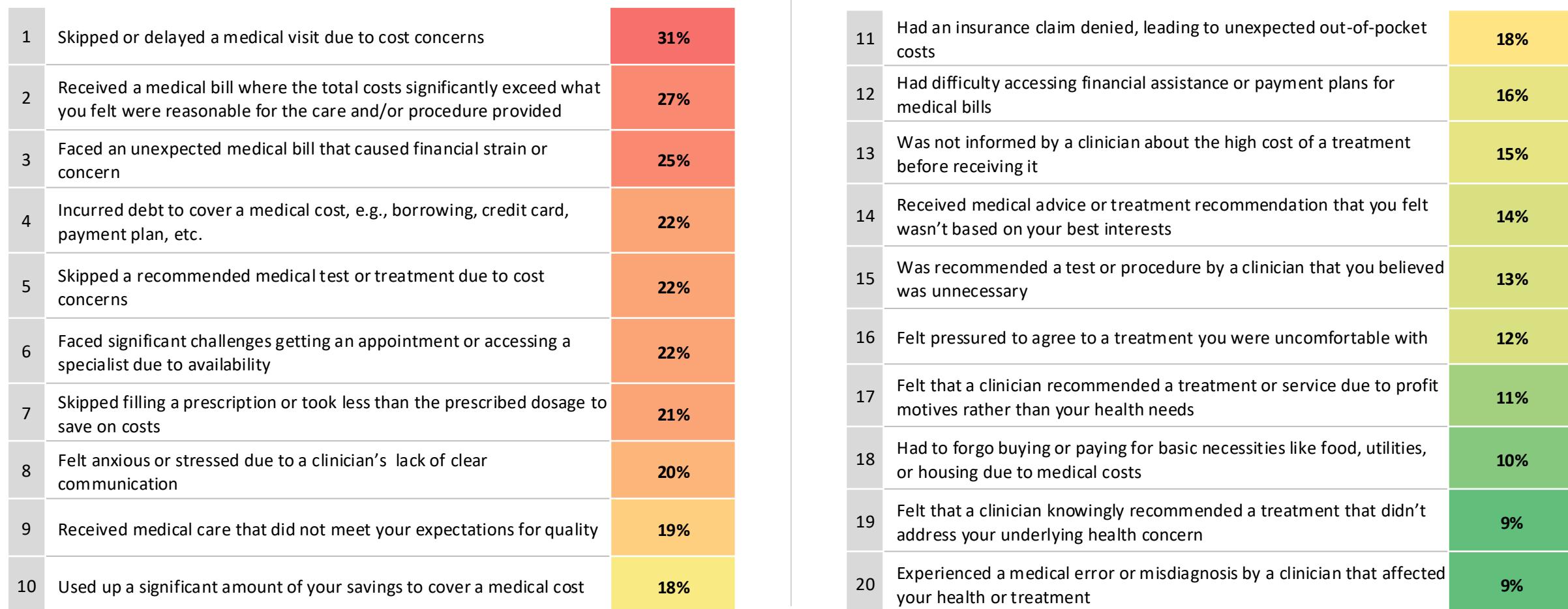
*n=967; only those with health insurance responded*



# Many Utahns report cost-related barriers that may limit or delay necessary care—often resulting in skipped visits, medical debt, or financial strain

## Self-Reported Healthcare Events Experienced in the Past 12 Months

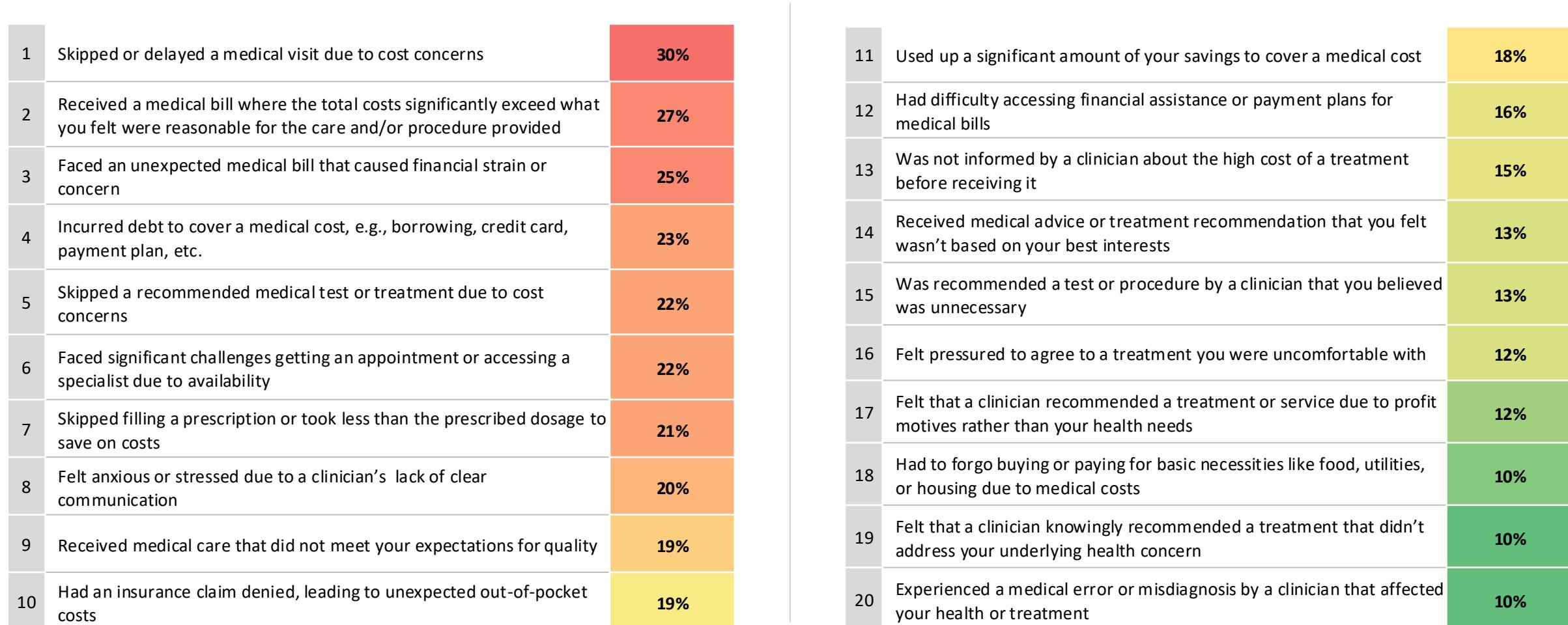
Multi-Select; n=1,000; Inclusive of all immediate household members



# FILTERED TO ONLY INCLUDE UTAHNS WITH HEALTH INSURANCE

## Self-Reported Healthcare Events Experienced in the Past 12 Months

Multi-Select; n=1,000; Inclusive of all immediate household members; Only those with health insurance included

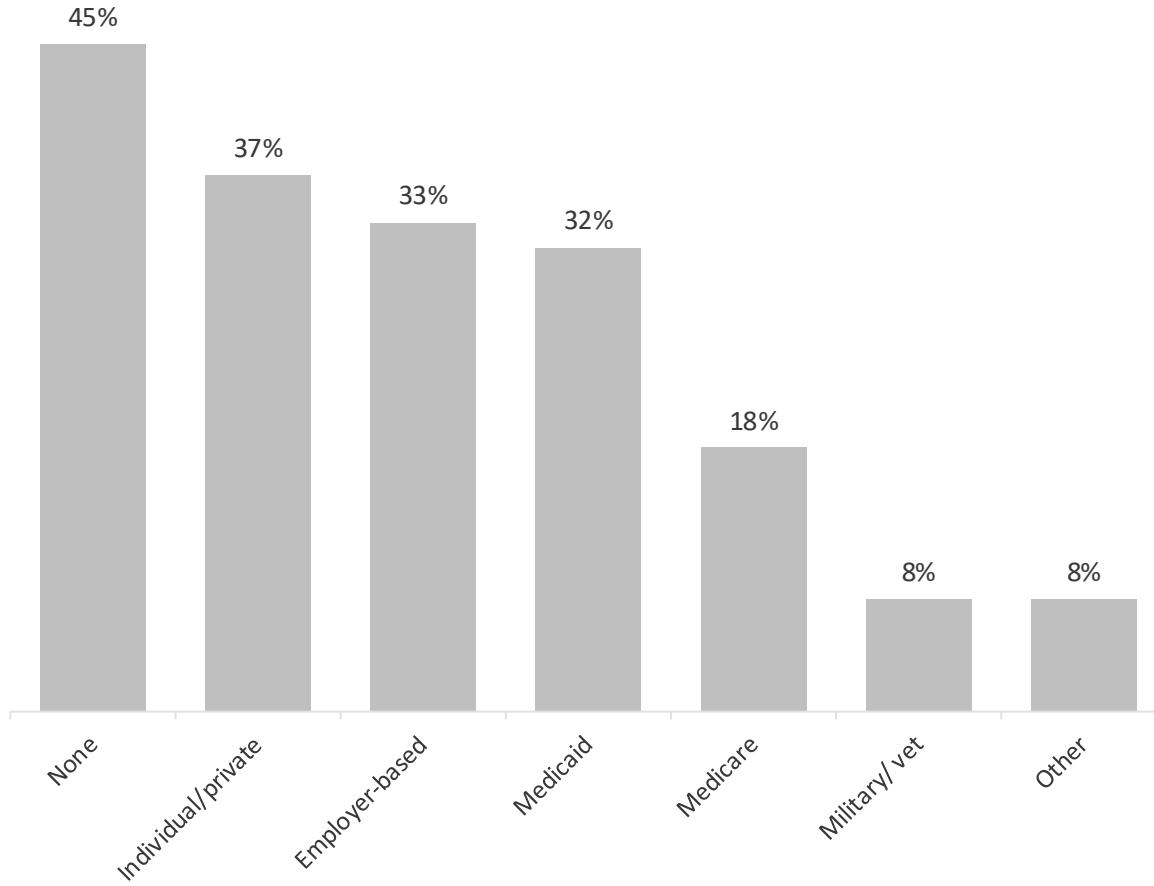


# Cost-related care delays hit hardest among the uninsured and privately insured—yet remain a persistent pressure even for those with employer or public coverage.

## Percent Who Skipped or Delayed a Medical Visit Due to Cost Concerns:

### **(SEGMENTED BY INSURANCE TYPE)**

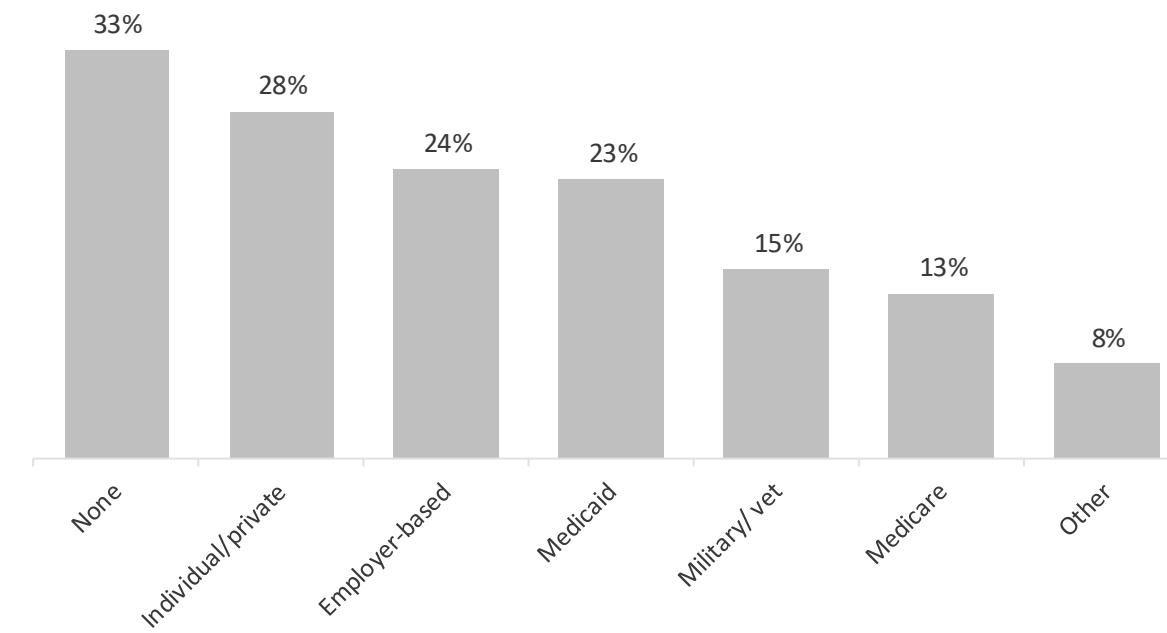
Multi-Select; n=1,000; Based on past 12 months



## Percent Who Skipped a Recommended Medical Test Or Treatment Due to Cost Concerns:

### **(SEGMENTED BY INSURANCE TYPE)**

Multi-Select; n=1,000; Based on past 12 months

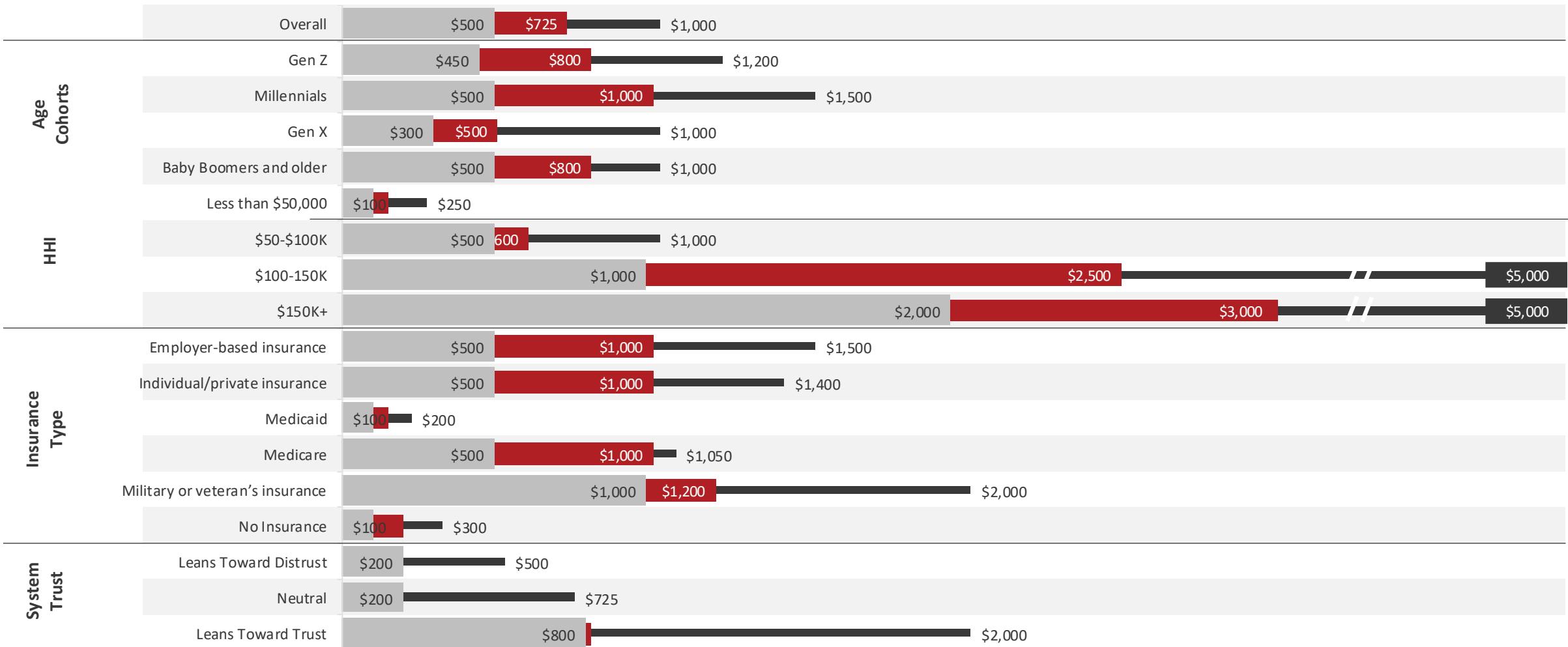


# Most Utahns face financial vulnerability at low thresholds—many would reach critical strain from a \$1,000 medical bill or less

## Tipping Points: When a Medical Bill Becomes a Financial Burden

Comfortable Limit – Max payment without financial worry or cutting essentials       Strain Threshold – Point at which you'd need to borrow or incur medical debt

Stretch Limit – Maximum you can manage with trade-offs, before serious strain



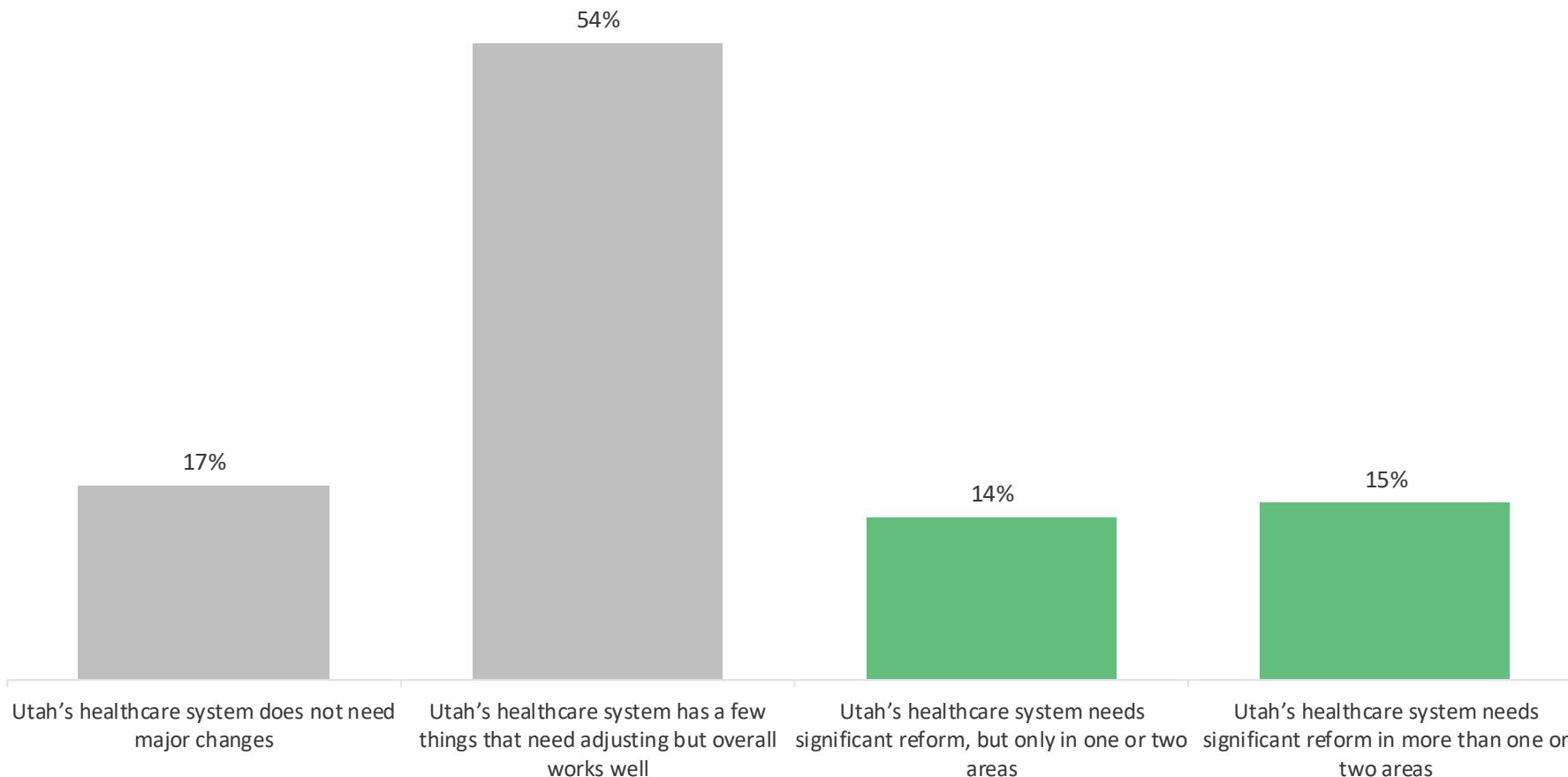
**Cicero** | **MGT** Q27: At this moment, what is the maximum amount for a new medical bill (e.g., for a hospital visit or procedure) that you feel you could afford using only your existing cash and savings, without incurring debt or borrowing?

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# Utahns see the healthcare system as functional but in need of improvement, with 54% calling for adjustments and another 29% supporting significant reform

## Utahns' Views on the Need for Healthcare System Reform

n=1,000



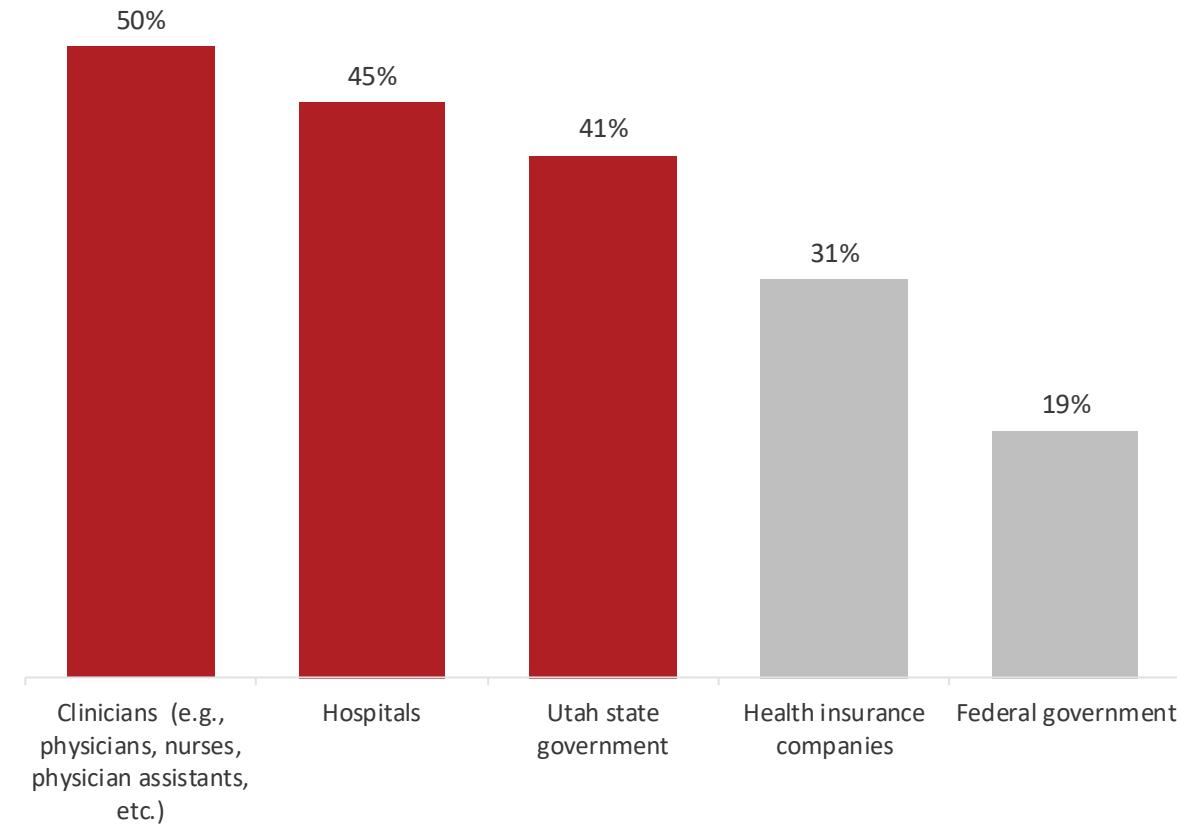
### Secondary Insights

- **Male Respondents Skew Slightly More Satisfied with the Current System:** Male respondents showed higher levels of satisfaction with Utah's healthcare system compared to their female counterparts.
- **Satisfaction Increases With Income Level:** High-income groups saw greater satisfaction than low-income groups. Those lower-income respondents were more likely to voice the need for significant reforms in multiple areas.

# Frontline actors are seen as leading today—but many believe ultimate responsibility goes to the system as a whole – with an outsized role expected of Utah state govt.

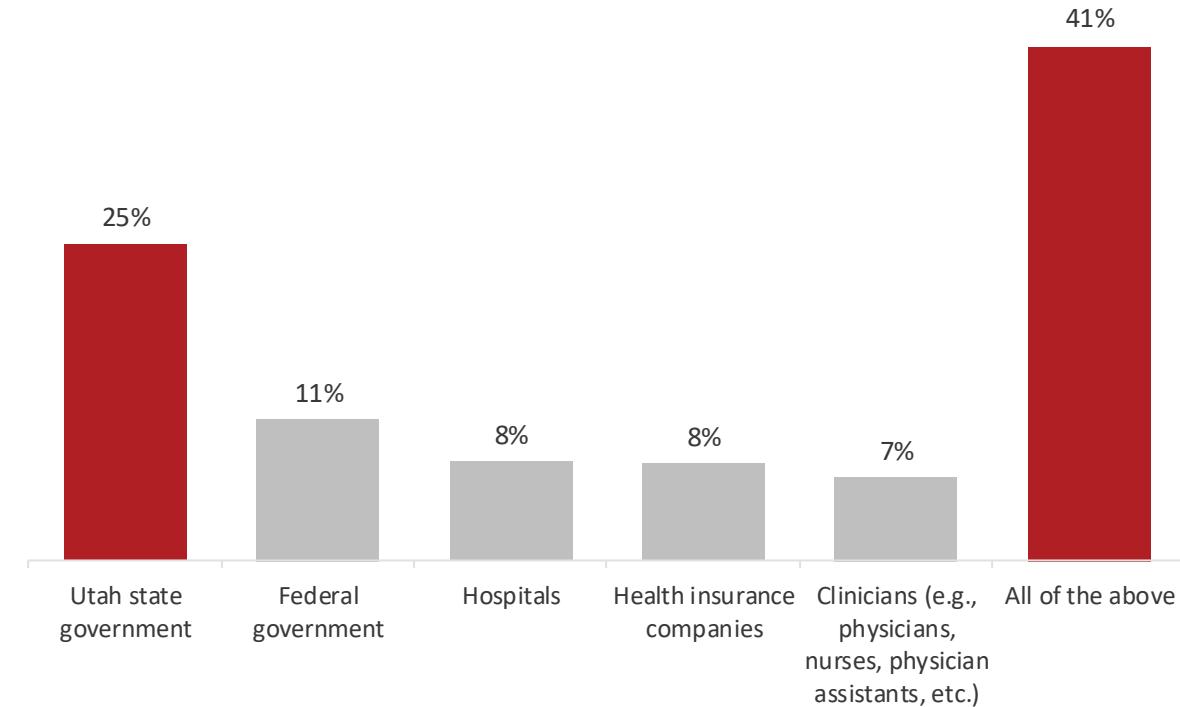
## Public Belief on Who is CURRENTLY Working to Address/Improve Utah's Healthcare System

Multi-Select; n=1,000



## Public Belief on Who SHOULD BE Primarily Responsible for Improving Utah's Healthcare System

n=1,000

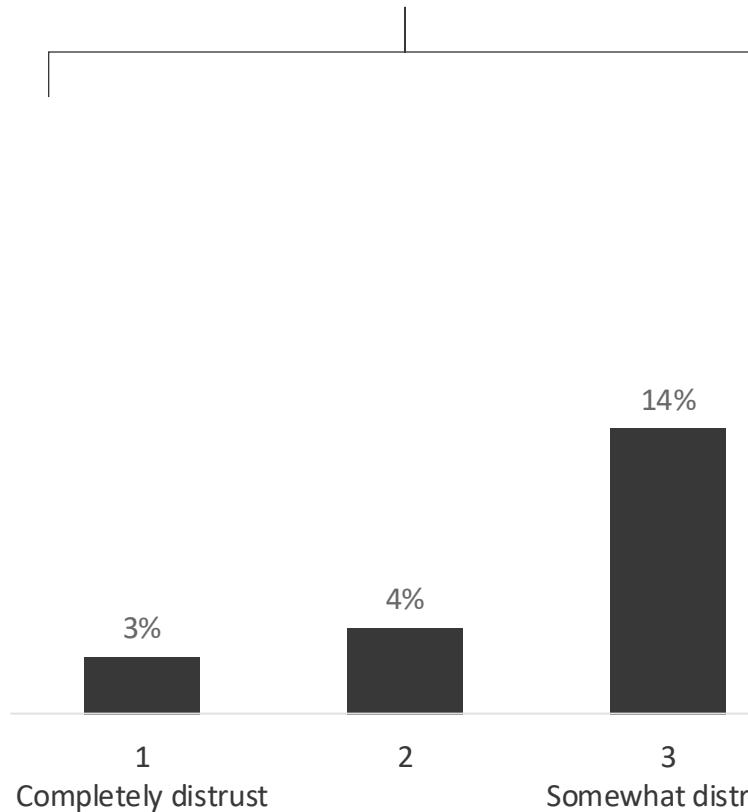


# Overall trust in Utah's healthcare system is generally widespread—but not deep

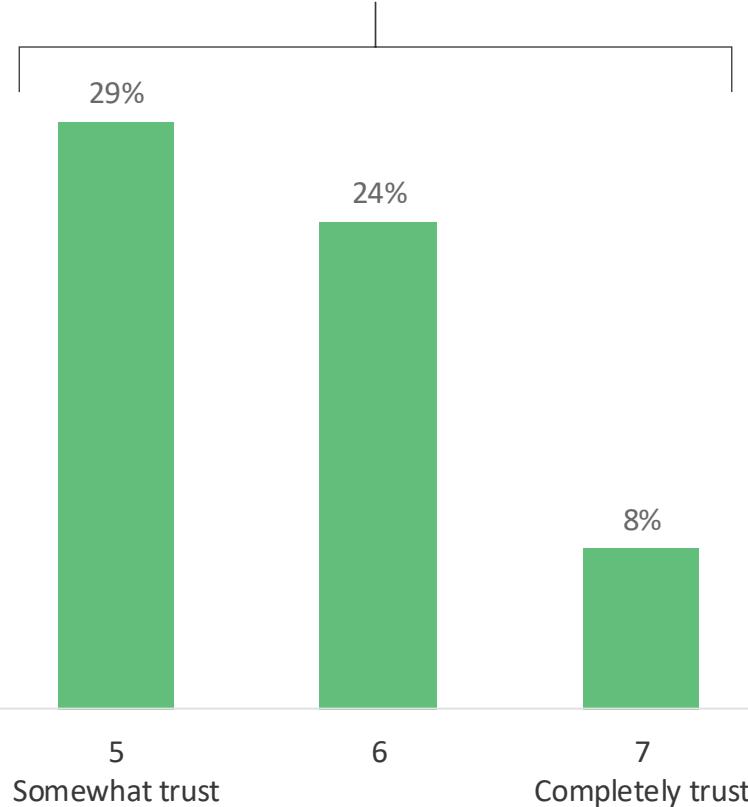
## Public's Trust in Utah's Healthcare System

Multi-Select; n=1,000; Percent Figures Are Top 3 (Out of 1-7 Ranking); Top Utah's healthcare system refers to the full landscape of hospitals, clinics, doctors, nurses, pharmacies, insurance providers, and other related entities, professionals, and resources in Utah that work together to provide healthcare services.

**Leans Toward DISTRUST | 21% of Utahns**



**Leans Toward TRUST | 61% of Utahns**



## Secondary Insights

- Utahns with lower trust tend to engage Utah's healthcare system more

High system use does not equate to high trust—in fact, Utahns who interact more frequently with the healthcare system are often *less* trusting of it, suggesting that repeated exposure may highlight system flaws and drive dissatisfaction.

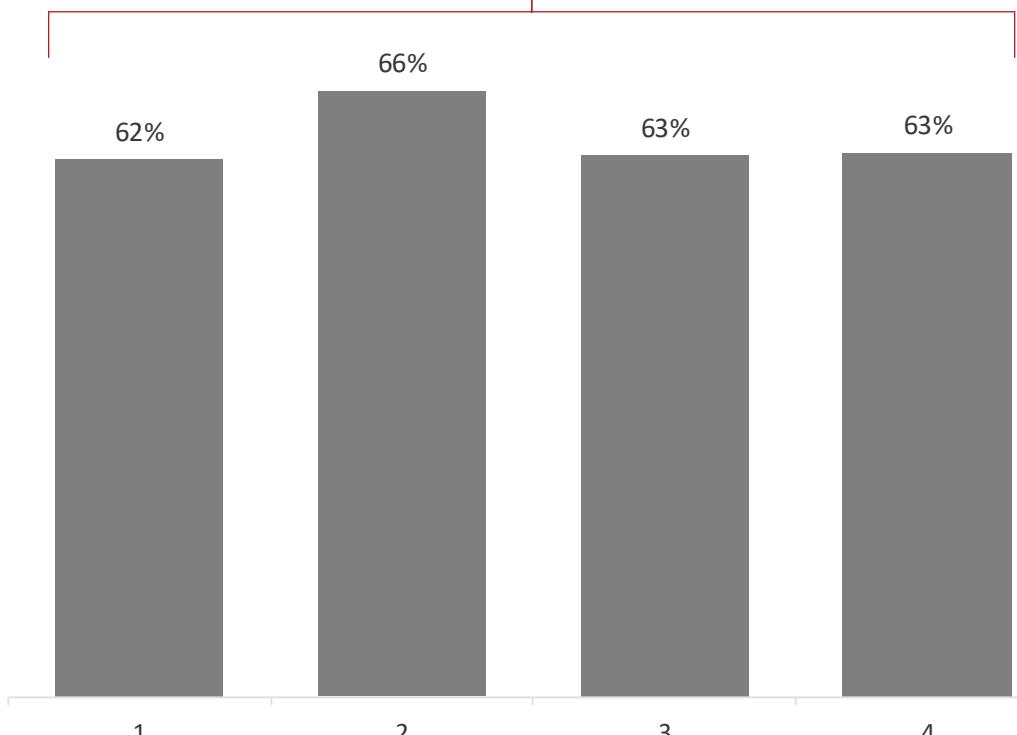
# Utahns with lower trust tend to engage Utah's healthcare system more

## Public's Trust in Utah's Healthcare System

### (SEGMENTED BY: Reported Number of Healthcare Activities (Past Year))

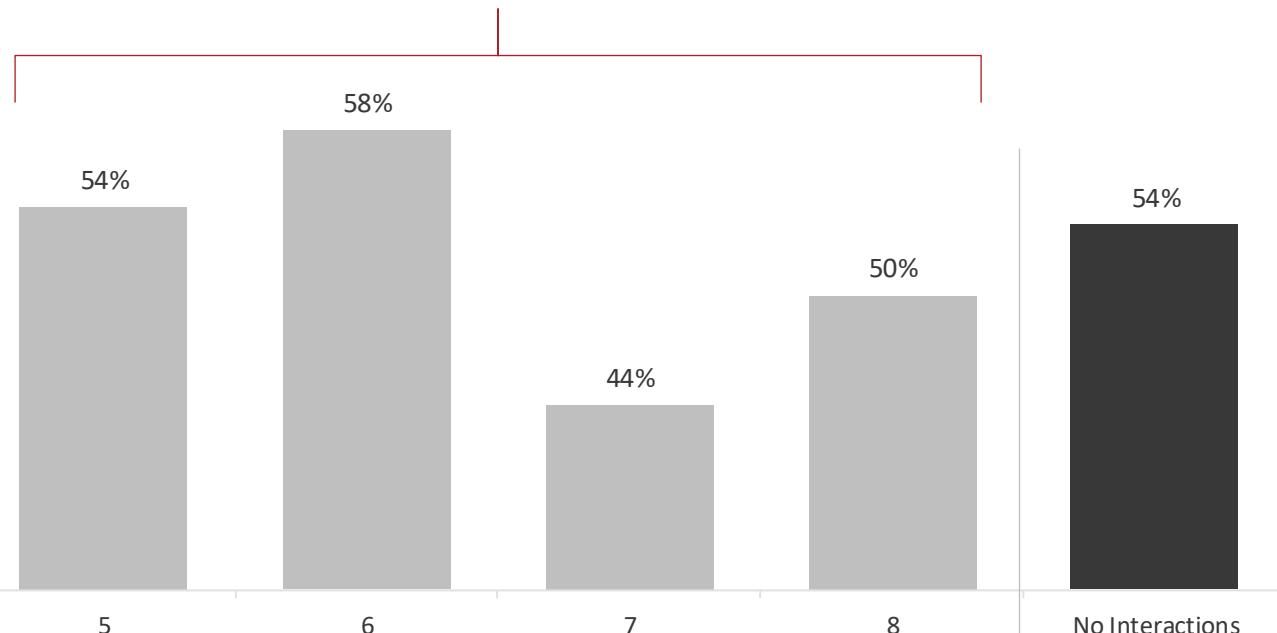
Of Utahns Who Reported 1-4 Healthcare Activities in Past Year)

**63% Trust Utah's Healthcare System Works Well**



Of Utahns Who Reported 5-8 Healthcare Activities in Past Year)

**53% Trust Utah's Healthcare System Works Well**



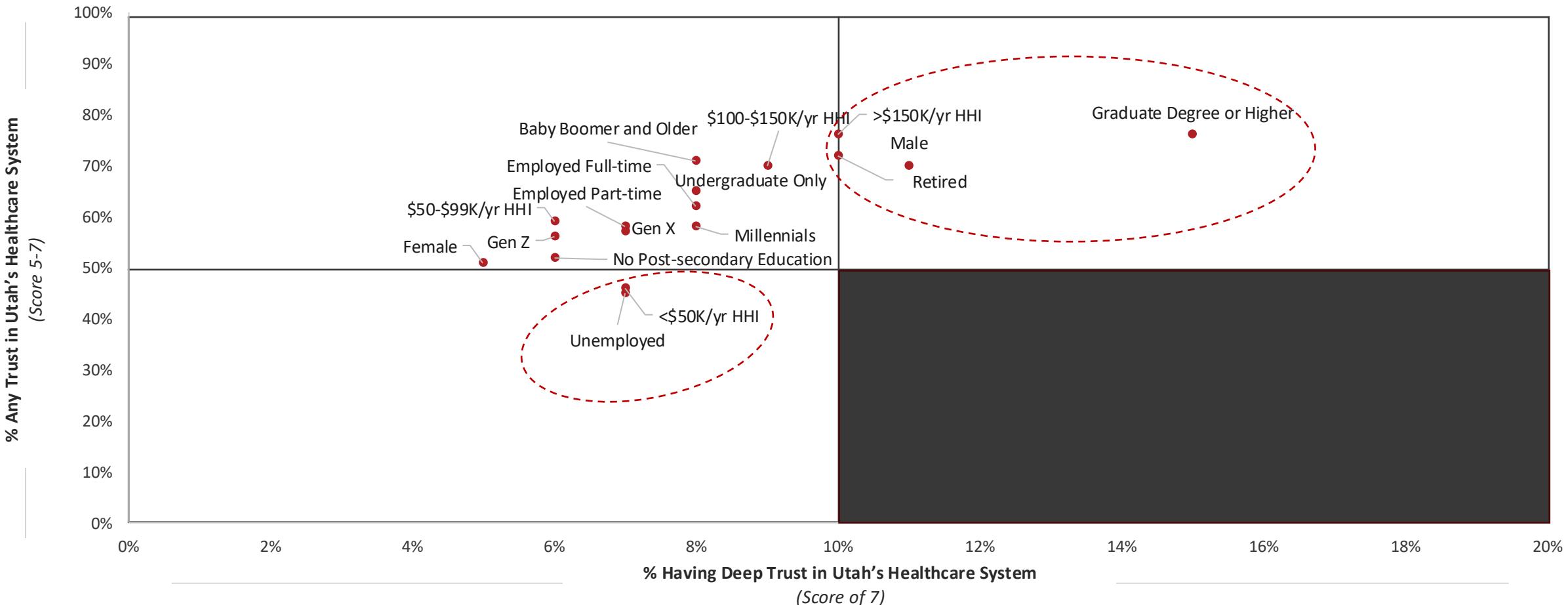
Q14: In the past 12 months, have you or someone in your immediate household, done any of the following?

Q19: How much do you trust Utah's healthcare system to work well for you?

# Trust is relatively consistent across groups, though deeper trust trends higher across some demographic lines—such as income, retired groups, and education

## Public Trust in Utah's Healthcare System by Segment

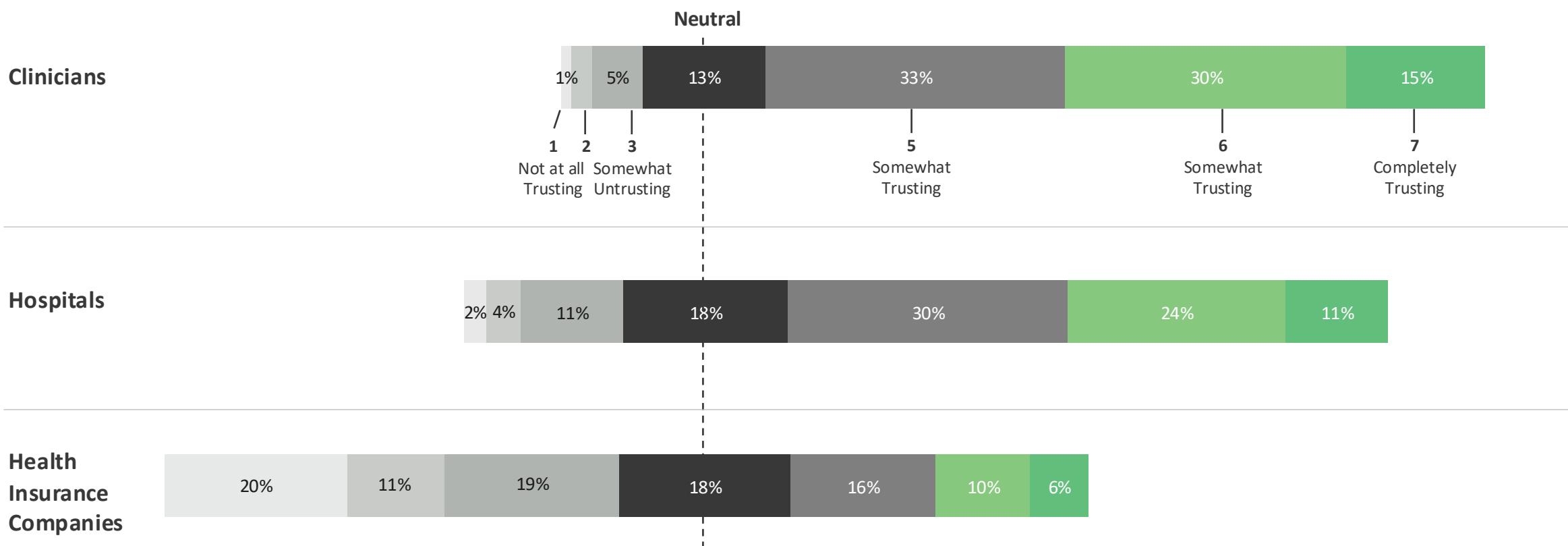
n=1,000; results are shown across different population segments



# Within Utah's healthcare systems, trust levels are highest toward clinicians, followed by hospitals, with health insurers trailing significantly

## Public Trust Toward Specific Individuals and Organizations

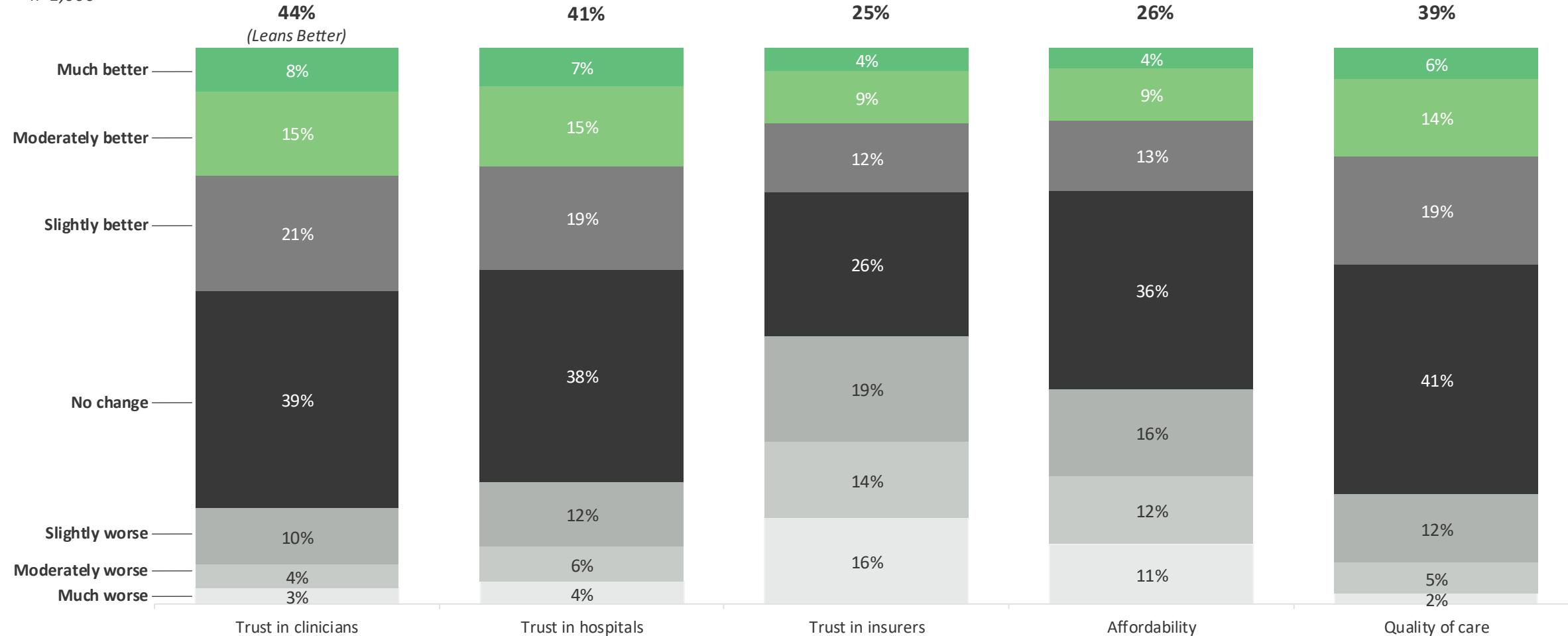
*n=1,000*



# During the past year, Utahns view improvements as strongest in areas closest to care delivery—clinicians, hospitals, and quality—while affordability and insurers lag

## Perceived Improvement in Utah's Healthcare System Over the Past Year

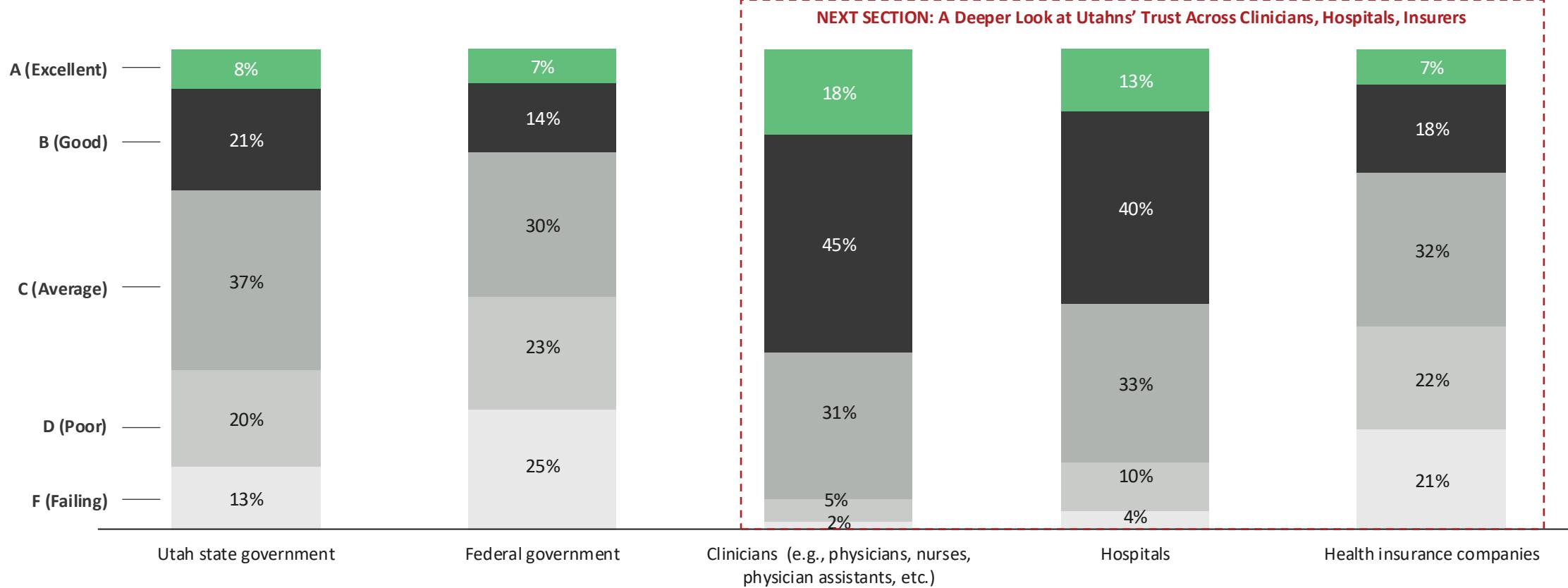
n=1,000



# Similarly, frontline actors (clinicians and hospitals) are seen as having the greatest impact, while perceptions of system-level contributors fall short

## How Utahns Grade the Impact of Key Players in Healthcare System Improvement

n=1,000



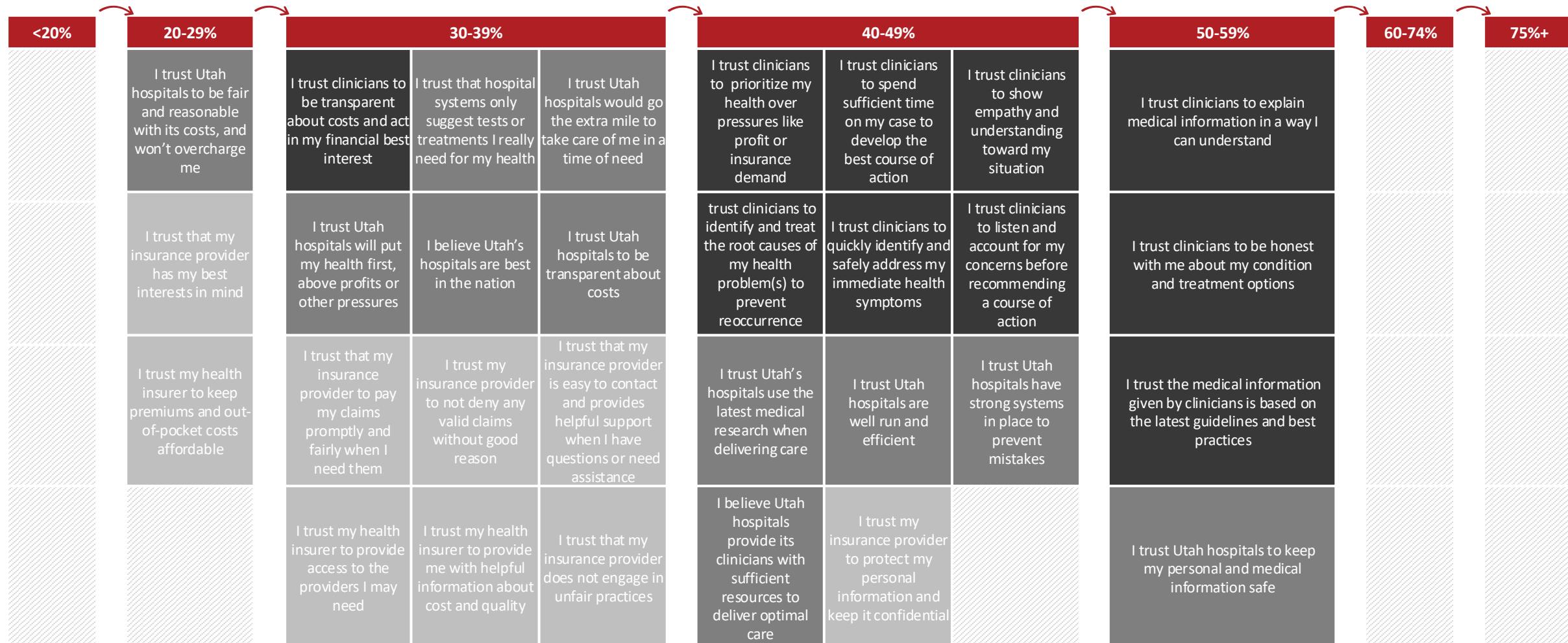
# Trust remains fragmented—few “trust” attributes earn broad agreement, underscoring inconsistent confidence across Utah’s healthcare system

Clinicians > Hospitals > Health Insurers

## Segmented View of Where Utahns Place Their Trust

Topics are categorized based on percent of Utahns that agree with each statement; agreement is derived from the top 2 selection (1-7 pt scale).


  
 = Clinician Area of Trust  
 = Hospital Areas of Trust  
 = Insurer Area of Trust



# Trust in clinicians is strongest on communication and honesty—yet trails off when it comes to financial transparency and systemic pressures



## Utahns' Agreement Across Key Areas of Trust

n=1,000; Displayed figures are derived from the top 2 (options 6-7) and bottom 2 (options 1 and 2) on a 7-pt scale.

I trust clinicians to explain medical information in a way I can understand

Completely or Moderately  
DISAGREE | AGREE

4% 56%

I trust clinicians to be honest with me about my condition and treatment options

4% 56%

I trust the medical information given by clinicians is based on the latest guidelines and best practices

4% 50%

I trust clinicians to show empathy and understanding toward my situation

5% 49%

I trust clinicians to listen and account for my concerns before recommending a course of action

7% 48%

I trust clinicians to quickly identify and safely address my immediate health symptoms

6% 47%

I trust clinicians to identify and treat the root causes of my health problem(s) to prevent reoccurrence

9% 45%

I trust clinicians to spend sufficient time on my case to develop the best course of action

9% 44%

I trust clinicians to prioritize my health over pressures like profit or insurance demand

12% 40%

I trust clinicians to be transparent about costs and act in my financial best interest

12% 38%

# Trust in hospitals is anchored in clinical standards and safety—but weakens on cost and patient-first commitments

Clinicians → Hospitals → Health Insurers

## Utahns' Agreement Across Key Areas of Trust

n=1,000; Displayed figures are derived from the top 2 (options 6-7) and bottom 2 (options 1 and 2) on a 7-pt scale.

I trust Utah hospitals to keep my personal and medical information safe

Completely or Moderately  
DISAGREE | Completely or Moderately  
AGREE

7%  51% 

I trust Utah's hospitals use the latest medical research when delivering care

6%  47% 

I trust Utah hospitals are well run and efficient

10%  41% 

I believe Utah hospitals provide its clinicians with sufficient resources to deliver optimal care

9%  40% 

I trust Utah hospitals have strong systems in place to prevent mistakes

8%  40% 

I trust that hospital systems only suggest tests or treatments I really need for my health

11%  39% 

I trust Utah hospitals would go the extra mile to take care of me in a time of need

12%  39% 

I trust Utah hospitals to be transparent about costs

20%  32% 

I trust Utah hospitals will put my health first, above profits or other pressures

18%  32% 

I believe Utah's hospitals are best in the nation

15%  31% 

I trust Utah hospitals to be fair and reasonable with its costs, and won't overcharge me

25%  25% 

# Trust in insurers lags other actors—held back by doubts around fairness, affordability, and alignment with patient needs

Clinicians

Hospitals

Health Insurers

## Utahns' Agreement Across Key Areas of Trust

*n=1,000; Displayed figures are derived from the top 2 (options 6-7) and bottom 2 (options 1 and 2) on a 7-pt scale.*

I trust my insurance provider to protect my personal information and keep it confidential

11%  44%

I trust my health insurer to provide access to the providers I may need

15%  38%

I trust that my insurance provider is easy to contact and provides helpful support when I have questions or need assistance

16%  36%

I trust that my insurance provider to pay my claims promptly and fairly when I need them

18%  36%

I trust that my insurance provider does not engage in unfair practices

18%  33%

I trust my insurance provider to not deny any valid claims without good reason

26%  32%

I trust my health insurer to provide me with helpful information about cost and quality

18%  31%

I trust my health insurer to keep premiums and out-of-pocket costs affordable

28%  29%

I trust that my insurance provider has my best interests in mind

26%  26%