

### People's Voice Survey: **United States Country Brief 2025**



### BACKGROUND

High-quality health systems generate health, trust, and economic benefit while responding to changing population needs. Current measurements of health systems fail to capture people's perspectives at the population level. The People's Voice Survey (PVS) is a new instrument that measures health system performance from the populations' perspective. It assesses use of health care as well as people's experiences, expectations, and confidence in the health system.

### **METHODS**

During June – July 2025, data were collected from a nationally representative sample of 4,066 adults in the United States across two languages (English and Spanish) via online or telephone surveys. All data are weighted to represent the population.

### **KEY FINDINGS**

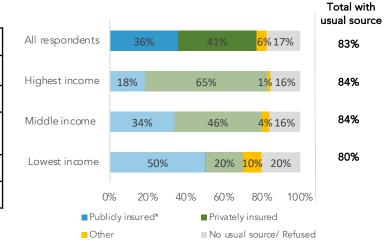
### Health care utilization in past 12 months

Average number of health care contacts (all types)	7.6
Average number of in-person facility visits	5.5
Average number of virtual or telemedicine contacts	1.1
% of respondents who received mental health care (among those with poor or fair mental health)	53.3%
% of all respondents who had an overnight hospital stay	10.1%
% of all respondents with no unmet need for health care	85.3%

#### Overall Respondent demographics<sup>1</sup> (N = 4,066)Age (median) [Min, Max] 46.0 [18.0-99.0] Female 2066 (50.8%) Urban residency 3462 (85.2%) Post-secondary 2520 (62.0%) Education (highest Secondary 1176 (28.9%) level) 364 (9.0%) Primary 1892 (46.6%) Highest (≥ \$65,000) Household Middle (\$40,000-\$65,000) 682 (16.8%) income Lowest (< \$40,000) 1476 (36.3%) (annual) Unknown 15 (0.4%) No insurance 367 (9.0%) Public insurance\* 1660 (40.8%) Health insurance Private insurance 1999 (49.16%) Other insurance type 40 (1.0%)

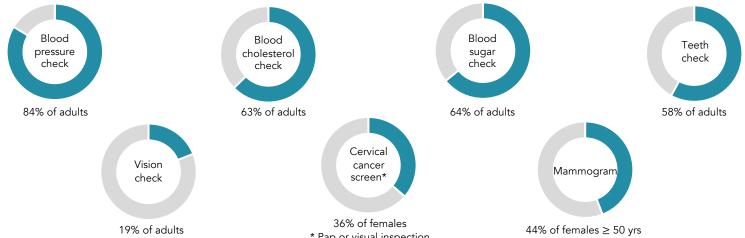
#### Usual source of care:

Percent with usual source of care by income and insurance



#### Health system competence

Preventative care services: Percent of eligible population who received service in past 12 months



\*Public insurance includes Medicare, Medicaid, TRICARE, VA, Military, Alaska Native, Indian Health Service, and Tribal Health Services.

\* Pap or visual inspection

Note: Percentages in this brief may not sum to expected totals due to rounding.

<sup>1.</sup> Denominators of some items may vary slightly from the full sample size due to missingness.

### Care competence and user experience

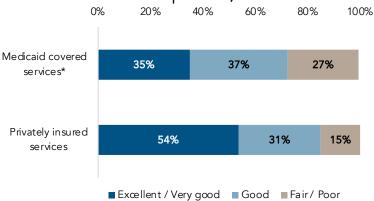
### Average<sup>1</sup> quality ratings for last health care visit in past 12 months



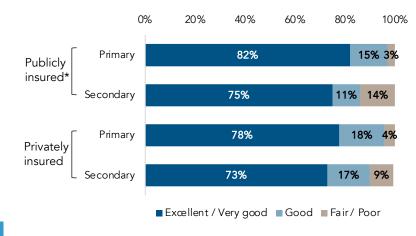
- 1. Rounded to the closest Likert category
- 2. Provider skills, knowledge of past visits, explanations, equipment/supplies
- 3. Respect, courtesy, joint decisions, visit time, wait time, scheduling time

#### Health system quality

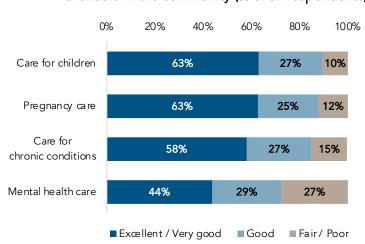
# Quality ratings of the services covered by Medicaid or private insurance (% of all respondents)



### Quality ratings for last health care visit (% of users of facility type in past 12 months)



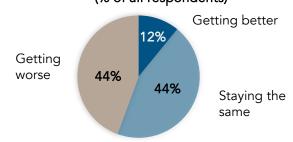
### Quality ratings of key primary care services available in the community (% of all respondents)



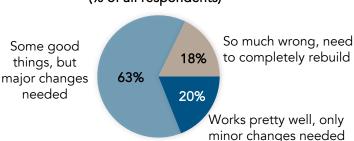
### Confidence in and endorsement of the health system

#### Confidence in health system as a whole (% of all respondents): Including public, private, NGO health care facilities/providers Can get good quality care 85% if very sick Health security: Can afford good quality care if 66% % very or very sick somewhat confident Can get and afford good quality 63% care if very sick Government considers the public's opinion in health system decisions (% of all respondents): 33%

## Endorsement: Health system trajectory over past 2 years (% of all respondents)



### Endorsement: Current health system (% of all respondents)



% very or somewhat confident