

National Survey of Likely Voters

Conducted By:
McLaughlin & Associates
August 2026



Methodology



On behalf of the National Psoriasis Foundation, McLaughlin and Associates conducted a national survey among 1,400 likely voters between August 22-25, 2026.

All interviews were conducted online. The interview distribution and demographics reflect a 2026 general election turnout model.

The accuracy of the sample of 1,400 likely voters is within +/- 2.6% at a 95% confidence interval. The numbers in this presentation have been rounded and may not equal 100%.

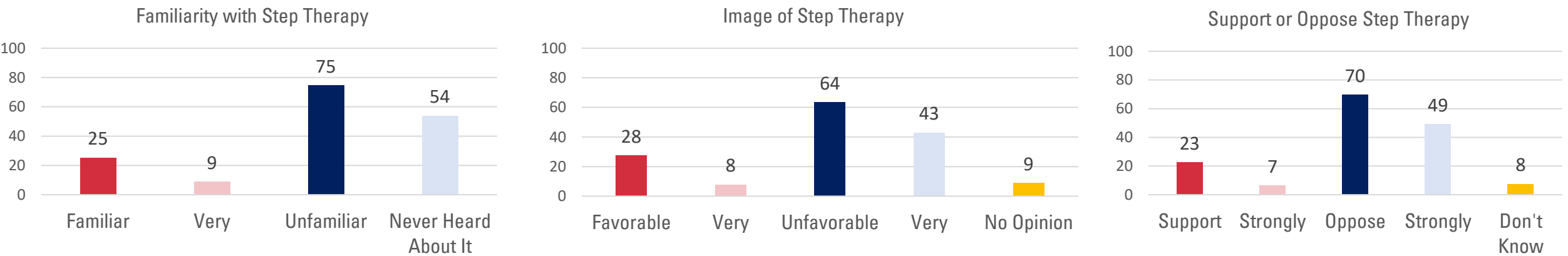
Party		Gender:		Education:	
Republican	35%	Male	48%	Less/Bachelors	60%
Democratic	34%	Female	52%	Bachelors/PG	40%
Independent	31%				
Age:		Race:		Regions:	
		White	72%	East	17%
18-34	18%	Hispanic	11%	Midwest	22%
35-44	17%	Black	11%	South	38%
45-54	16%	Asian	4%	West	23%
55-64	21%	Other	2%		
65+	27%				

Executive Summary



Step Therapy Is Unpopular But It Must Be Defined

- Raising awareness and defining Step Therapy will help your mission. Three-quarters (75%) are unfamiliar with Step Therapy. One-quarter is familiar, but only 9% say “very” familiar.
- When given a definition, a greater than 2 to 1 majority (64% to 28%) has an unfavorable opinion of Step Therapy. By a 35-point margin, the negatives are much more intense than the positives (43% very unfavorable vs. 8% very favorable).
- The opposition to insurance companies enforcing Step Therapy mandates is even stronger (70% oppose vs. 23% support). The opposition’s intensity outweighs the support’s intensity by 42-points (49% vs. 7%).
- There are opinion gaps: opposition is greater among Independents than Republicans and Democrats; it’s stronger among voters with than without a college degree; it’s higher among White voters than Hispanic and Black voters; it’s greater among voters 55-plus than under 55; it’s bigger among women than men; and it’s stronger among suburban and rural voters than urban voters.

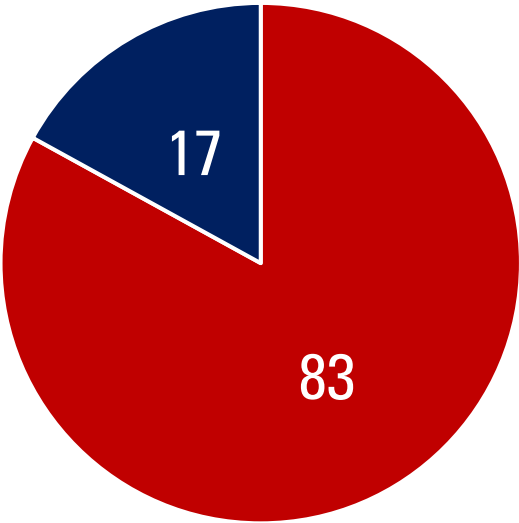


Step Therapy:	Total	Trump Voters	Und Cong	Rep	Dem	Ind	Ind M	Ind W	Less Bach.	Bach. PG	White	Hispanic	Black	18-34	35-54	55-64	65+	Male	Female	Urban	Suburb	Rural	Take Rx
Support	23	24	18	27	26	14	18	12	24	21	17	33	48	43	26	17	10	28	18	33	20	15	22
Oppose	70	69	65	66	67	76	76	77	67	74	76	56	49	50	66	77	83	66	73	60	73	76	71
Don't Know	8	7	17	7	6	9	6	11	9	6	8	10	4	7	8	7	8	6	9	7	7	9	8
Net	-47	-45	-48	-40	-41	-62	-59	-64	-43	-53	-59	-23	-1	-7	-40	-60	-73	-38	-55	-27	-54	-61	-49

Step Therapy Impact

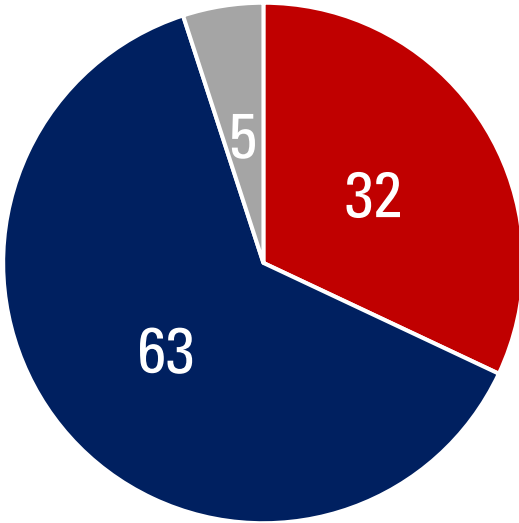
- Four in five (83%) voter households have someone regularly taking a prescription drug, including 66% who personally take medicine.
- One-third (32%) say their insurance company has denied a household member coverage for a prescription drug or forced them to take an alternative drug instead of the one prescribed by their doctor. The percentage reaches 37% among households who regularly take prescription drugs.
- Three-quarters (77%) are concerned that their insurance company could force them to take an alternative drug instead of the drug their doctor prescribed. Half (50%) are extremely or very concerned.

Regularly Take Prescription Drug



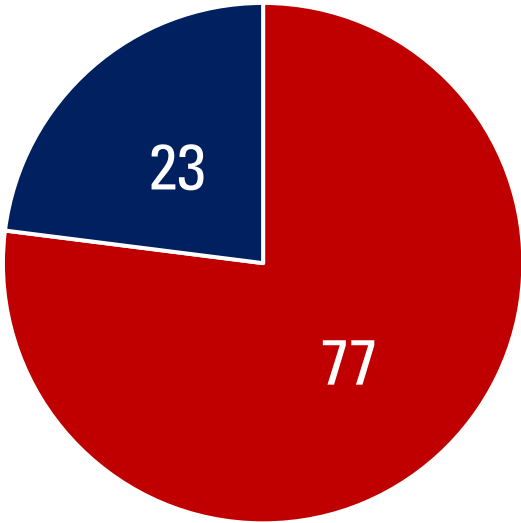
■ Yes ■ No

Denied By Insurance



■ Yes ■ No ■ Don't Know

Will Get Denied by Insurance



■ Concerned ■ Not Concerned/DK

Framing Step Therapy: Patients & Doctors vs. Insurance Companies

- There is big demand for healthcare reforms and solutions. Three-quarters say the healthcare system is facing a crisis (26%) or major problems (50%).
- By a 59-point margin (76% to 17%), three-quarters believe individuals and their doctors should have more control in the healthcare system than insurance companies.
- Nine in ten (90%) voters trust their doctor more than their insurance company to prescribe medicine.
- Doctors are popular while images of pharmaceutical companies, big health insurance companies, PBMs, and healthcare middlemen are underwater.

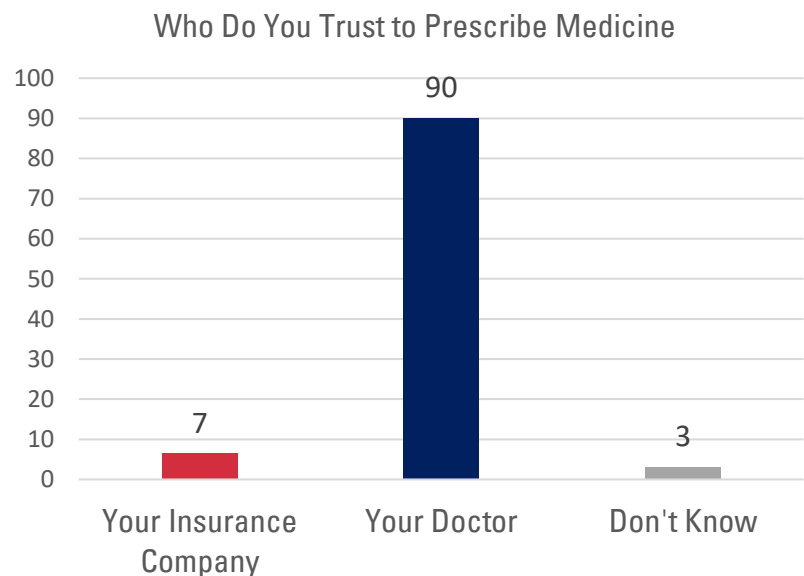
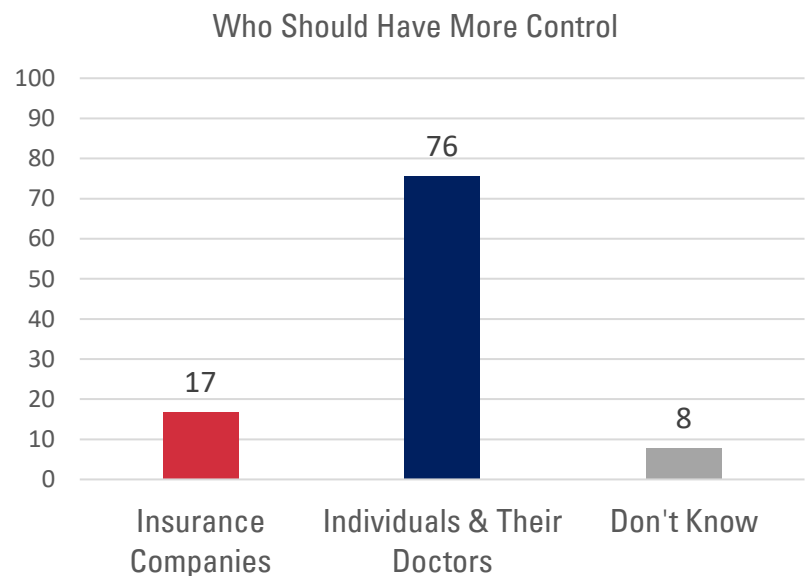
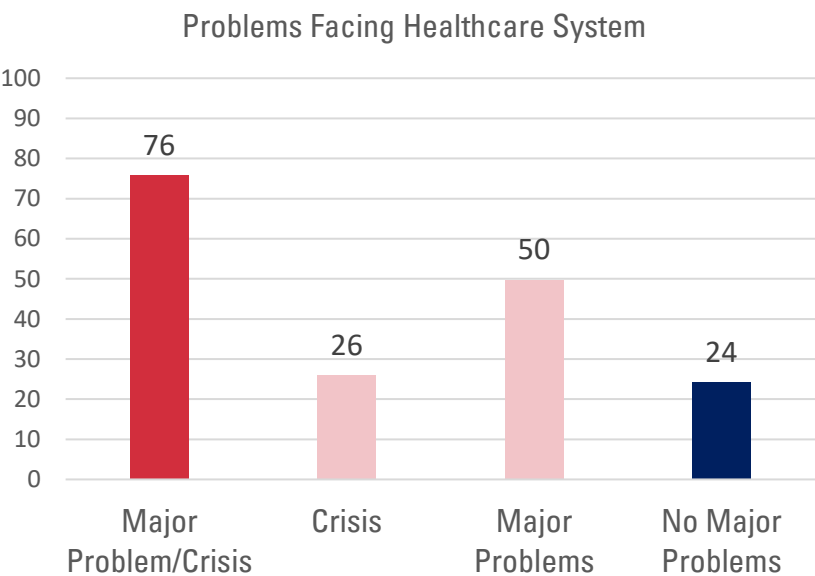
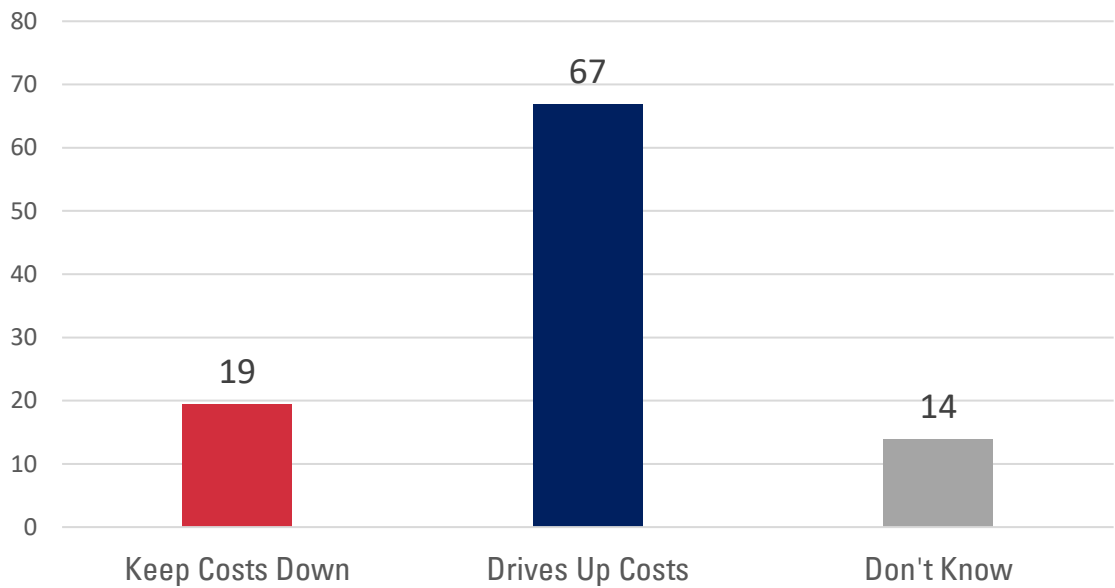


Image Ranking:	Fav	Unfav	Net
Your doctor(s)	88	8	+81
Pharmaceutical companies	40	51	-12
Big health insurance companies	35	57	-23
Pharmacy Benefit Managers	29	36	-7
Healthcare middlemen	25	50	-25

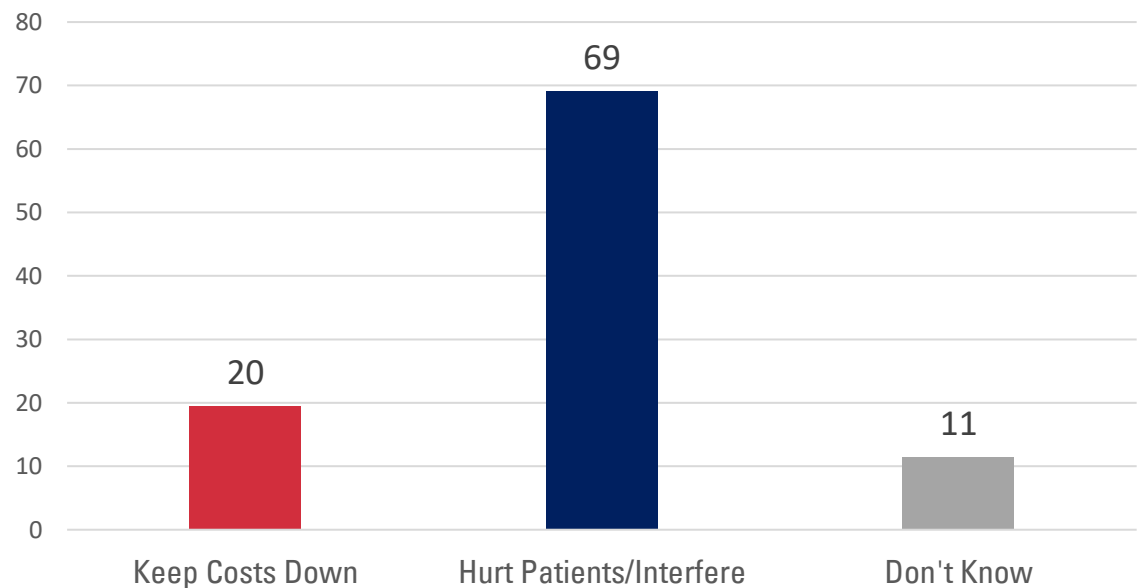
Step Therapy Cost Savings Argument Loses

- Insurance companies' greatest argument loses to counterarguments.
- By greater than a 3 to 1 ratio (67% to 19%), two-thirds agree more with the argument that Step Therapy drives up costs than keeps costs down.
- By greater than a 3 to 1 ratio (69% to 20%), over two-thirds agree more with the argument that Step Therapy hurts patients by interfering with a patient's care than helping patients by keeping costs down.



Who do you agree with more about step therapy?

1. Insurance companies that say step therapy is a way to keep costs down for patients by having patients try less expensive drugs first.
2. Reports that say inappropriate use of step therapy doesn't save money but actually drives up costs more because the patient's health gets worse while they try multiple rounds of different medications.

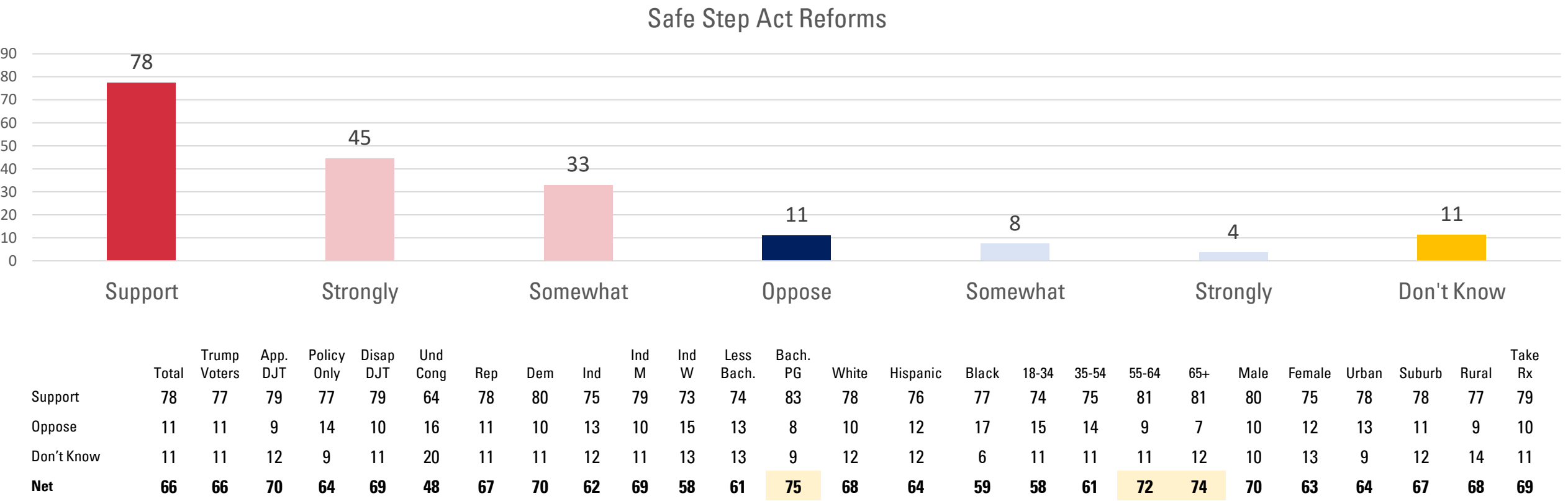


Who do you agree with more about step therapy?

1. Insurance companies that say step therapy is a way to help patients by keeping costs down by having patients try less expensive drugs first.
2. People who say step therapy doesn't help patients but instead creates barriers that can hurt patients by interfering with the care that their doctor believes is most effective.

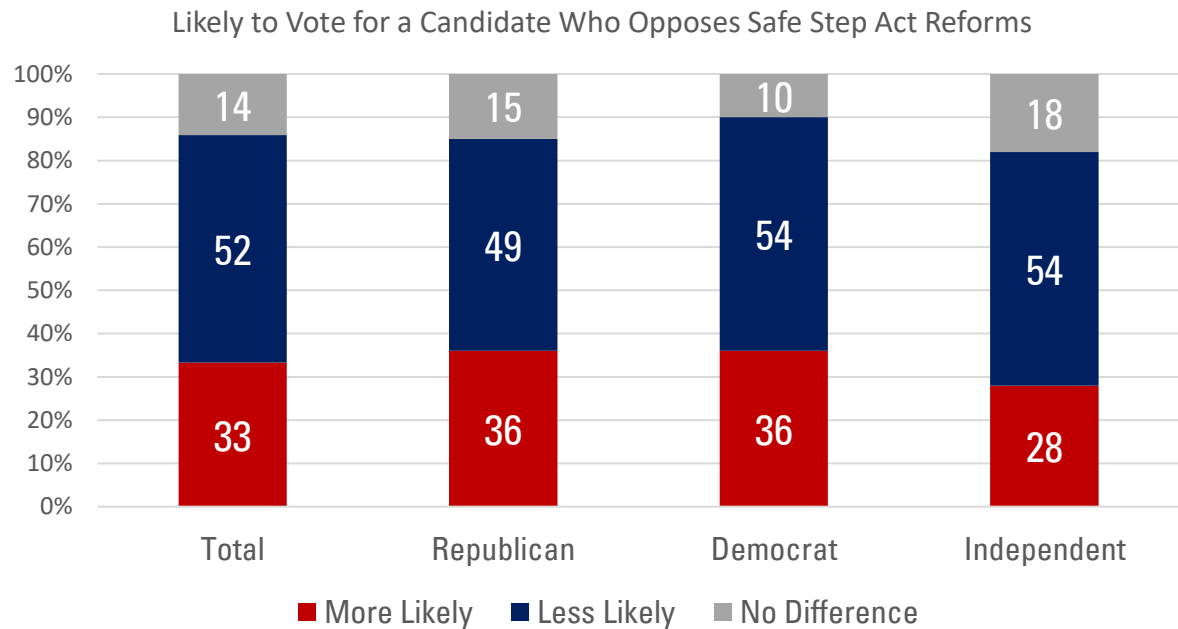
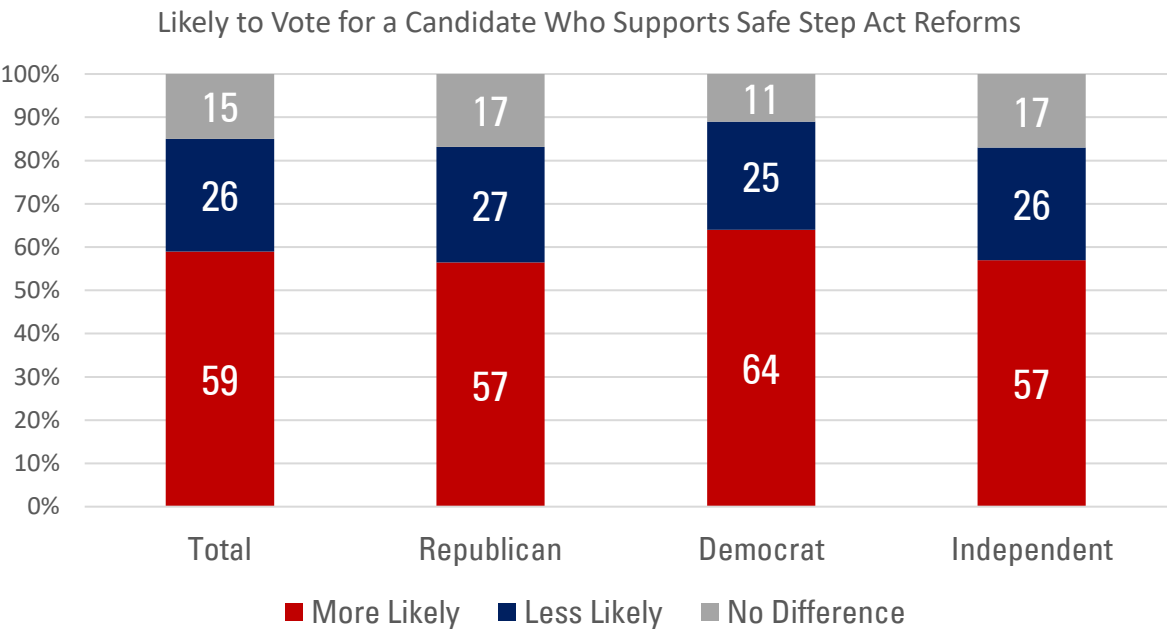
Safe Step Act Reforms Are Popular

- When informed about the Safe Step Act reforms, approximately 4 in 5 (78%) support it with intensity (45% strongly support). Only 11% oppose it and another 11% are unsure.
- The high-level of support is bipartisan and cuts across all demographics.
- Support and net support are strongest among college graduates and voters 55-plus.



Political Upside for Supporters & Political Downside for Opponents

- Support for the Safe Step Act reforms translates into voter support for candidates running for Congress. Conversely, opposing the Safe Step Act reforms becomes a political liability, costing candidates votes. The willingness to reward and hold legislators accountable underscores the depth of support for the reforms.
- The majority (59%) are MORE likely to vote for a candidate for Congress who voted IN FAVOR of the step therapy reform proposal to ensure patients receive the most effective care prescribed by their doctor and protect patients from insurance companies interfering with their healthcare decisions or putting their health at risk. The majority voter support cuts across party lines.
- The majority (52%) are LESS likely to vote for a candidate for Congress who voted AGAINST the step therapy reform proposal, giving big insurance companies all the authority to deny patients the prescription drugs originally prescribed by their doctor by forcing them to take an alternative drug that might be less effective or not work at all; all while the insurance companies are making bigger profits.



Universal Consensus

- Ranging from 72% up to 89%, there is universal consensus on statements supporting Safe Step Act reforms.
- Don't force patients to repeat medications that don't work
- Provide exceptions to avoid delays; irreversible harm
- Prioritize care over costs
- Don't force patients off medication that's working
- Provide a clear, transparent, and standardized process
- Provide exemptions when required treatment prevents them from working safely or performing ordinary activities
- Require insurance to respond within 72-hours or 24-hours for life-saving requests
- Complexity allows less accountability and transparency; easier for insurance companies to put profits before patients
- Alternative drugs must be equally effective and won't cause harm to patients

Do you agree or disagree with the following statements?	Agree	Disagree	Net
Patients should not be required to repeat a medication they have already tried and doesn't work.	89	7	+82
Patients should receive an exception to their insurance company's step therapy mandates when delaying effective treatment could worsen their disease, cause irreversible harm, or expose them to a treatment that will likely cause an adverse reaction.	88	6	+82
Even in cases where step therapy can help lower costs, insurance companies should provide exceptions when the step therapy drug hasn't worked or is harmful to the patient, and the patient should receive the care originally prescribed by their doctor.	87	7	+80
Patients whose condition is stable on a medication should NOT be forced to switch treatments solely because they changed health plans or the plan changed its coverage requirements.	87	7	+80
Patients and doctors should have access to a clear, transparent, and standardized process for requesting a step therapy exception, without being required to submit unnecessary or complex paperwork.	87	7	+80
Patients should receive an exception to their insurance company's step therapy mandates when the required treatment would prevent them from working safely or performing ordinary daily activities.	86	7	+79
To avoid a long, drawn-out process that puts a patient's treatment plan on hold, insurance companies should respond to standard step therapy exception requests within 72 hours and urgent life-saving requests within 24 hours.	85	8	+77
Insurance companies' inappropriate use of step therapy protocols is another example of the complexity and bureaucracy of our health care system. This complexity can make insurers less accountable and transparent and can make it easier to put profits before patients.	83	10	+73
Insurance companies should only use step therapy to force patients to use a less expensive alternative drug than the one their doctor prescribed IF the alternative drug is equally effective and doesn't harm the patient.	72	19	+53

Strong Messages Bolster Support

- 78% support the Safe Step Act reforms.
- All of the messages roughly match or generate higher percentages of support, ranging from 76% up to 82%.
- The messages include intensity, ranging from 47% up to 61% “much” more likely to support the reforms.
- Since a high level of support exists for the Safe Step Act reforms, these messages help bolster the support and make the support more sustainable.
- After the messages, the overall support for the Safe Step Act reforms barely moved from 78% to 79%. The more significant movement is the increase in “strongly” support from 45% to 50%.

More Likely to Support Safe Step Act Reforms		Total	Support Safe Step Act	Oppose Safe Step Act	Don't Know
Individual Medical History	MORE	82	88	70	51
	much	61	70	30	32
State or Federal Law	MORE	81	87	71	48
	much	55	62	28	28
72/24 Hour Response	MORE	81	88	68	51
	much	55	63	27	27
Commonsense Exemptions	MORE	79	86	62	49
	much	53	63	22	23
Miss Work/Responsibilities	MORE	79	85	62	49
	much	50	58	22	22
Broad Coalition	MORE	78	84	66	50
	much	52	60	23	27
Delay Access	MORE	78	84	63	49
	much	49	57	23	23
Time/Navigate Protocols	MORE	77	83	67	48
	much	48	55	23	25
Insurance Profits	MORE	77	83	66	48
	much	48	55	21	28
Costs/Navigate Protocols	MORE	76	82	62	49
	much	47	54	26	25

Description	More Likely Support Proposal to Reform & Standardized Step Therapy Mandates
Individual Medical History	Treatment decisions should be based on a patient’s individual medical history and the best judgment of their own doctors, rather than on an insurance company’s one-size-fits-all step therapy mandates.
Delay Access	Insurance companies’ step therapy mandates can delay access to the medication a doctor prescribed, potentially worsening a patient’s condition, disrupting treatment that may have already been working, and causing harm that could have been avoided.
Costs/Navigate Protocols	Patients, doctors, and the health care system incur substantial costs to navigate complex and burdensome insurance companies’ protocols and bureaucracy, including step therapy regulations.
Time/Navigate Protocols	Patients, caregivers, and doctors can spend substantial time navigating complex step therapy requirements and bureaucracy, making repeated calls, submitting documentation, and pursuing exceptions or appeals.
Miss Work/Responsibilities	When step therapy delays effective treatment, patients may require additional health care services and may miss work or school and may be unable to meet family or other personal responsibilities, shifting costs and burdens elsewhere in the health care system and economy.
State or Federal Law	Workers and their families should have access to the same clear and medically appropriate step therapy protections regardless of whether their health coverage is regulated under state or federal law.
Insurance Profits	Insurance companies’ step therapy mandates often prioritize medications that provide insurers with the biggest profits rather than the medications that work best for the patient’s health and medical history.
Commonsense Exemptions	Congress can pass this proposal with a commonsense exemptions process so that medical decision-making remains with patients and their doctors, and not with insurance companies or employers.
72/24 Hour Response	This proposal will require insurance companies to respond to standardized and transparent step therapy exception requests in a timely manner within 72 hours and within 24 hours for life saving requests, so patients don’t get delayed in starting their doctor prescribed treatment.
Broad Coalition	This proposal to reform insurance companies’ harmful step therapy protocols is endorsed by a broad coalition of over 200 medical professional organizations and patient advocacy groups who represent millions of patients with life-threatening, complex, and chronic conditions who deserve their doctor-prescribed treatment without delays imposed by insurance companies.