Survey Finds Americans Give Health Care System a "C" Rating

As health care consumers complete open enrollment and prepare for their 2026 benefits to begin, a curious discrepancy emerges: Over half of U.S. consumers rate the overall health insurance system with a "C" grade or lower, yet nearly nine in 10 say they are satisfied with their own plan, according to a new survey from eHealth.

These numbers reveal fault lines for why consumers are dissatisfied. On the one hand, widespread unhappiness with how the system functions suggests that employees may be silently resigned to its shortcomings or unaware of available options. On the other hand, strong satisfaction with individual plans shows that while consumers are dissatisfied with the overall system, they are ok with how their individual plan allows them to access it. However, this positive response could be hiding underlying cost or access issues.

One of the most apparent signs of strain in the U.S. health care system is cost-related care avoidance. The eHealth survey found that only about half of Americans can afford their monthly insurance premiums or prescription drugs, and just 51% say they can get the care they need when they need it. Nearly half (46%) reported having to choose between paying a medical bill and covering basic needs, such as food, clothing or housing, within the past decade.

Other findings underscore the scope of consumer frustration:

- **Health care access gaps—**Just 48% of respondents said they have access to their preferred doctors.
- **Worry about inflation—**More than one in three Americans (35%) said they worry more about rising health care costs than about the cost of food, gasoline or home insurance.
- **Systemic blame—**Most survey participants place responsibility for the system's problems on insurance and drug companies (66% and 60%, respectively), followed by politicians (42%) and fraud and waste (34%).

Together, these findings suggest that affordability, access and transparency remain central challenges. While Americans value having health insurance, many are struggling to balance premiums, prescriptions and everyday essentials.

Employer Takeaway

As employees finalize their open enrollment choices and prepare for 2026, the findings from eHealth's survey highlight a growing gap between coverage and confidence.

These findings signal an opportunity for employers to better align their benefit strategies with the needs of their workforce. Although group health plan sponsors may be unable to change the broader system, clear communication about plan features, out-of-pocket expectations, and provider networks can help employees make confident, cost-conscious choices.

Employers should continue monitoring health care affordability and access trends to inform future benefits design and reinforce trust in the coverage they provide.

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