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## Study overview







#### Consumer research

## Marketplace research

### **Objective**

- Understand how and when health information sources are used
- Understand satisfaction or dissatisfaction with existing sources
- Identify any unmet needs

- Understand degree of awareness of consumer needs and how "marketplace" is providing health information to patients
- Identify how each stakeholder is poised to act going forward

### Sample

- Low-income / Uninsured
- Non-English Speakers
- Caregivers

- Providers
- **Health Plans**
- Other relevant stakeholders
- 4,068 consumer survey responses across income status, insurance status and language
- **Approach**
- Focus groups with 51 consumers in 5 sessions across 3 geographies
- 14 interviews/ethnographies
- Review of academic / "grey" literature

- 97 interviews with marketplace decisionmakers and influencers
- Review and synthesis of news articles, market research, etc.



## The consumer research sought to answer four key questions

- What are the specific needs and frustrations surrounding healthcare information for vulnerable consumers?
- What are key barriers that prevent vulnerable patients from effectively receiving health information from providers?
- How is healthcare information most commonly accessed by vulnerable consumers?

Who are the most engaged users of healthcare information?

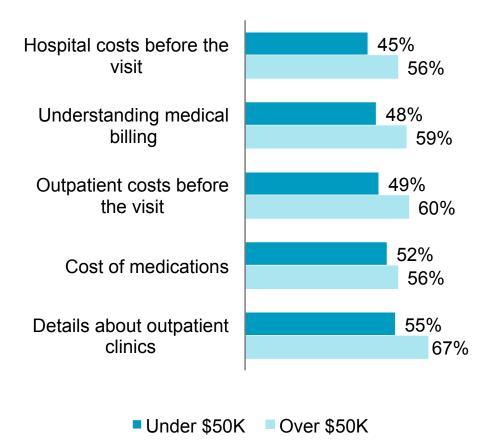
# Needs and frustrations of vulnerable consumers Understanding healthcare is especially frustrating for lower income consumers

### **Key findings**

Vulnerable patients experience a more frustrating health information landscape

- In general, lower-income respondents are less satisfied
- As a result, they tend to consult fewer resources and spend less time searching for health information

# % Satisfied with information type (By income)



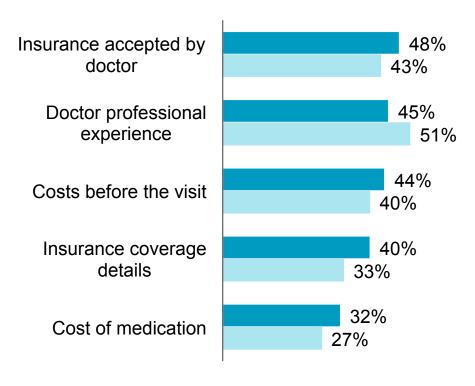
# Needs and frustrations of vulnerable consumers It's all about cost

### **Key findings**

# Information related to cost transparency is most in demand

- Vulnerable consumers, often lower-income and even more price sensitive, are most dissatisfied with cost information
- The top improvement priorities were related to cost and insurance
- Uninsured patients are more concerned with costs than Medicaid patients

# **Top information improvement priorities** (*By income*)



Under \$50K
Over \$50K

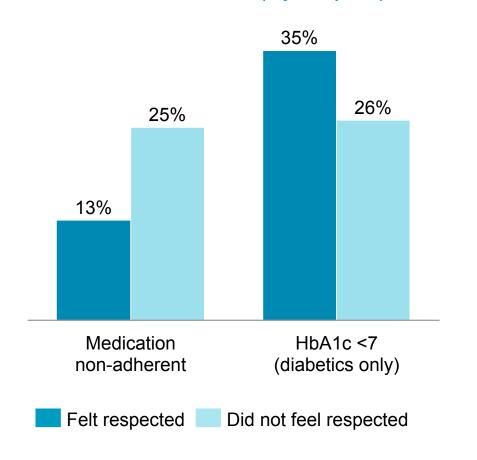
## 2 Key barriers to receiving health care information Respect me and I'll respect your treatment regimen

### **Key findings**

Vulnerable patients reported that they felt disrespected by providers

- Vulnerable patients are three times more likely to feel disrespected
- Disrespected patients are twice as likely to not follow their treatment regimen
- Many low-income patients perform exhaustive searches for indicators that a doctor will be respectful
- Low-income patients discussed the importance of the physician's photograph to gauge likelihood of being treated with respect

# % Not taking medication and diabetics with HbA1c under 7 (By respect)



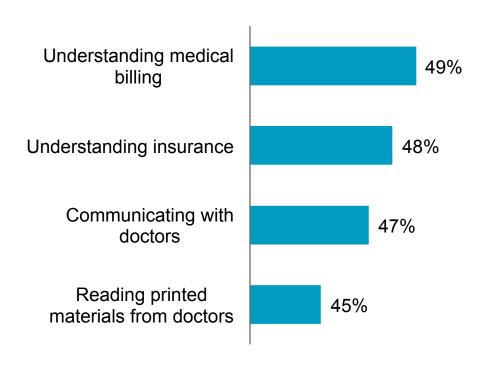
# 2 Key barriers to receiving health care information Español, por favor!

### **Key findings**

# Spanish speakers often struggle with language barriers

- Spanish speakers reported the biggest barriers were related to understanding insurance, communicating with doctors and understanding billing
- Due to fear of prejudice, they are often reluctant to request Spanish resources even when available
- Spanish speakers often seek medical advice from friends and family

# % Spanish speakers who felt language is a barrier



# Most common ways of accessing healthcare information Google has the power to change healthcare

### **Key findings**

# Google is most frequently used to find health information

- All income groups reported going to Google as their starting source to answer health and healthcare questions
- However, lower-income patients often don't know the precise search terms used to find relevant information
- Tools and resources with health information were invaluable – when lower-income patients found them

### Focus group example



"For me – I know I can Google this. It will help me right now. So I just did that. I just did my Googles."

- Washington DC Focus Group

# Most common ways of accessing healthcare information Mobile is king

### **Key findings**

# Mobile is the most common medium for information searches

- Consumers that are younger, lower-income or racial minorities use mobile phones for 90-95% of their internet use
- Sites sometimes do not render well on mobile devices, leading to bad user experiences
- When a website is not viewable or usable via a mobile device, consumers give up or call – they do not seek to use another device

### Focus group example

**Moderator:** "What proportion of [your friends' and family's] online searches do you think are on a phone versus a computer, of any kind of internet use not just healthcare?"

Participant 1: "Like 90%." [Laughter]

Participant 2: "I would say

95%." [Laughter]

Participant 1: "Nobody uses their computer anymore."



Chicago Focus Group

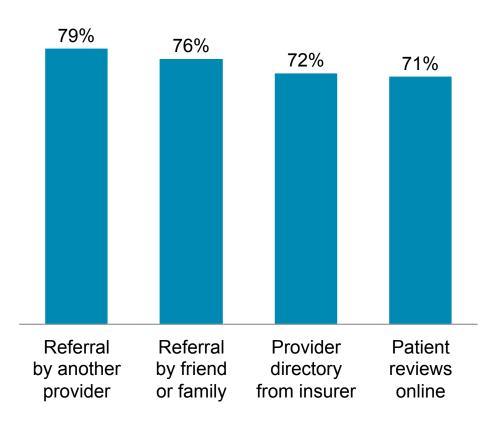
# Most common ways of accessing healthcare information Listen to me, listen to my network

### **Key findings**

Friends, family, and patient reviews prove to be highly influential

- Family and friends highly influence one's choice of doctor
- Patient reviews are also highly influential – when patients are aware of them
  - For those that use patient reviews, 83% reported being influenced by them
  - Vulnerable patients expect that reviews are written by people like themselves and could be trusted
  - Reviews are used for choosing doctors rather than facilities

# % Reporting source is important when choosing doctor (*Top 4 sources*)



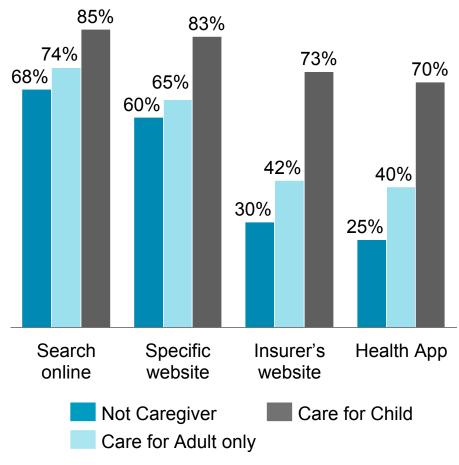
## Most engaged users of health information New portal? New health resource? Tell the caregivers

### **Key findings**

# Caregivers are the most active seekers of health information

- Caregivers are super-users of online resources / apps
- While they are adept at finding information for others, they have trouble finding information for themselves
  - Information on respite care and financial support are particularly difficult to locate

# % Accessing resource to find information (By caregiver type)





## Build respect while providing useful and accessible information

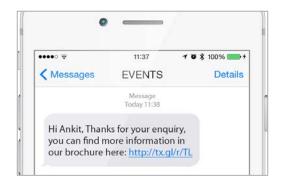
# Rebuild provider respect and trust





- Treat consumers the same, regardless of coverage type
- Track respect measures and reinforce behaviors
- Hire from the community to build trust / connection

# Provide accessible and simple information





#### Ensure information is:

- · Easy to find
- Mobile-friendly
- Simple and clear
- Various languages

# **Prioritize cost** transparency information





- Communicate costs before visits
- Recommend tools when they are of the most use
- Ensure tools are intuitive and accessible

## Outreach to the community while engaging caregivers more deeply



## **Outreach to the community**

Capitalize on existing social networks via outreach campaigns (e.g. churches, schools and local grocers) over traditional institutional sources such as hospital or insurer channels



# **Engage caregivers more deeply**

Engage caregivers by providing ratings, portals, apps and SMS tools and by connecting them to caregiver-specific resources (e.g. respite care, financial assistance)

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