





RESEARCH FINDINGS: PROVIDING HEALTH INFORMATION TO VULNERABLE CONSUMERS

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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 / UninsuredNon-English SpeakersCaregivers	ProvidersHealth PlansOther relevant stakeholders
Approach	 4,068 consumer survey responses across income status, insurance status and language Focus groups with 51 consumers in 5 sessions across 3 geographies 14 interviews/ethnographies Review of academic / "grey" literature 	 97 interviews with marketplace decision-makers and influencers Review and synthesis of news articles, market research, etc.

Key consumer findings

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?

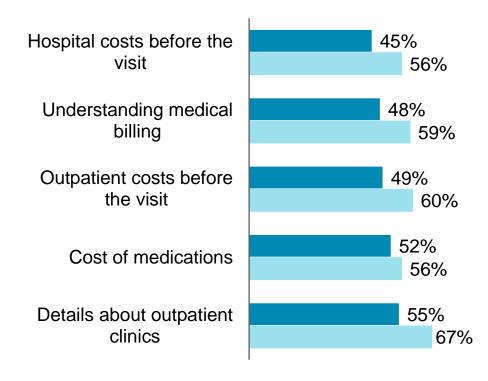
Needs and frustrations of vulnerable consumers It's all about cost

Key findings

Information related to cost transparency is most in demand

- Vulnerable patients experience a more frustrating health information landscape
- 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

% Satisfied with information type (By income)



■ Under \$50K ■ Over \$50K

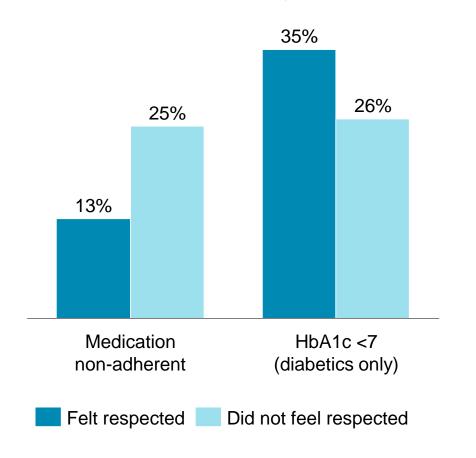
2 Key barriers to receiving health care information Respect me and I'll respect your treatment regimen

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)



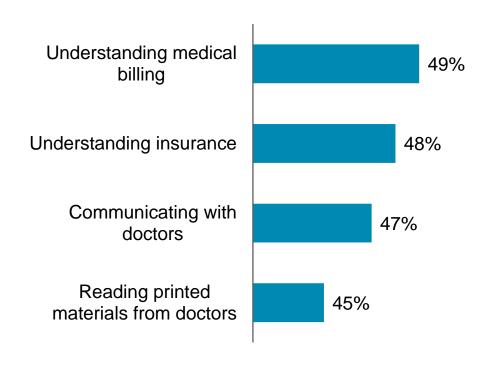
2 Key barriers to receiving health care information Español, por favor!

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

3 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

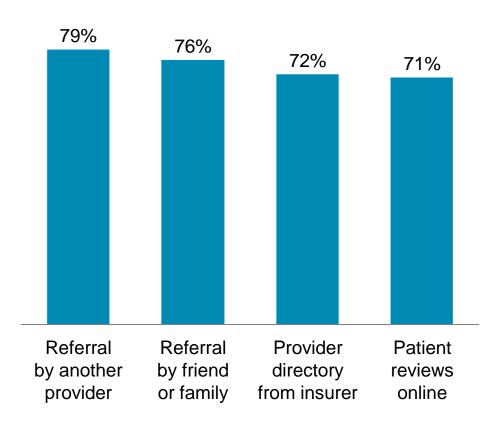
Most common ways of accessing healthcare information Listen to me, listen to my network

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*)



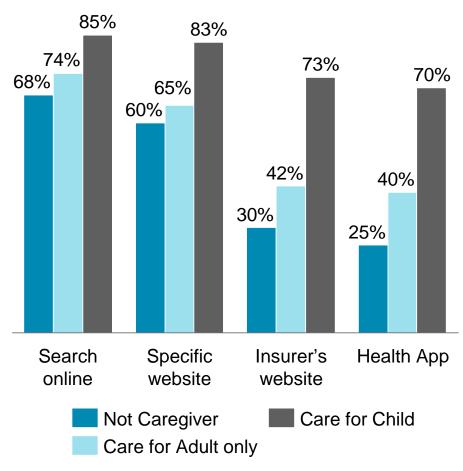
Most engaged users of health information New portal? New health resource? Tell the caregivers

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)



Health plan and provider implications

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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