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**Deloitte's 2011 Survey of Health Care Consumers:
Key Findings, Strategic Implications**

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Agenda

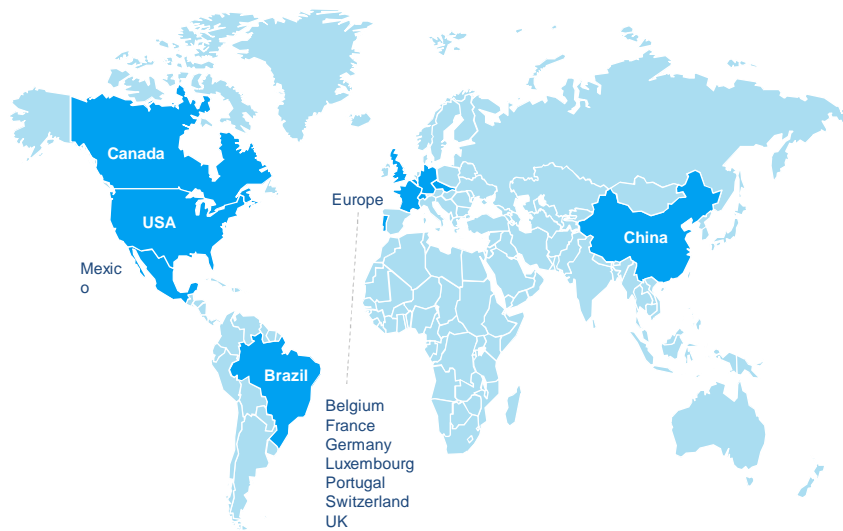
- Overview and methodology
- Overarching themes
- Perceptions of health care system performance
- Consumer interactions with their health care system
- Unmet needs and opportunities
- Five major barriers

Source: Deloitte's 2011 Survey of Health Care Consumers.

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Deloitte's 2011 Global Survey of Health Care Consumers

15,735 consumers were surveyed in 12 countries



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Questions targeted recent use (behaviors), factors influencing use, attitudes, satisfaction, unmet needs

Wellness & Healthy Living

- Effort to improve or maintain health
- Participation in wellness programs
- Participation in health/disease mgmt
- Adherence to treatment
- Interest in self-monitoring devices

Traditional Health Services

- Perception of provider quality differences
- Preferences in choice of doctor/hospital
- Satisfaction with doctor/hospital services
- Types of care sought in past year
- Decisions to forego or delay care
- Willingness to travel for care
- Reasons for switching doctors, treatment
- Interest in special services and programs
- Retail clinics
- Prescription medications
- Genetic testing

Alternative Health Services

- Alternative practitioners and therapies — preferences, use, reasons for using

Information Resources

- Use of Internet to find information about treatments, doctors, hospitals, health plans
- Level of trust in various information sources
- Use of quality, cost, and safety information
- Interest in using online medical records, email with doctors, integrated systems
- Personal health records

Health Insurance

- Financial preparation for future costs
- Adequacy of and satisfaction with insurance
- Factors important to health plan choice
- Benefits/features important if customizable
- Contact w/plan to raise questions/complaints

Health Policy

- Economic impact of health care on family
- Views of 16 reform proposals / role of government

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Overarching themes

Overarching themes from Deloitte's 2011 Global Survey of Health Consumers

- A health system's perceived performance is unrelated to its funding or structure; it is driven by consumer impressions and expectations.
- Consumers tend to be uninformed but strongly opinionated; they are heavy users, but largely disengaged in decisions about their health and health care; they are concerned about costs, but not clear on alternatives other than delayed care.
- There is significant opportunity to engage consumers more effectively. It requires policymakers and industry stakeholders to align interests toward their engagement. Reducing costs, leveraging information technologies, and improving service delivery are notable areas for innovation and improvement.

Source: Deloitte's 2011 Survey of Health Care Consumers.

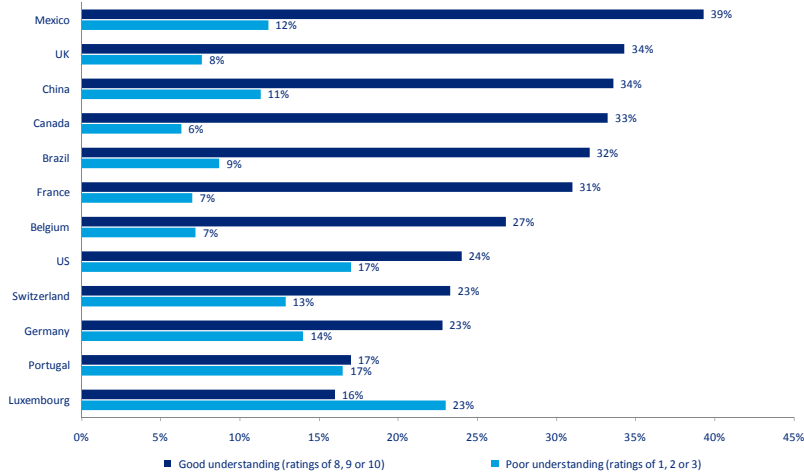
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Perceptions of health care system performance

Most consumers have a weak understanding of how their country's health care system works:

only 16% to 39% say they have a good understanding.

How well do you think you understand how your country's health care system works?



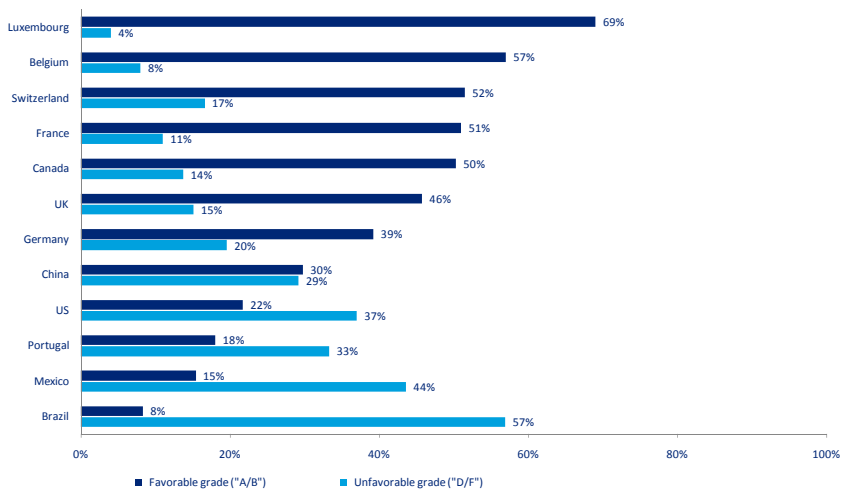
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Report card grades of system performance vary widely:

8% to 69% give their system an "A" or "B."

Using a typical report card scale with grades of A, B, C, D, and F, how would you grade the overall performance of the country's health care system?

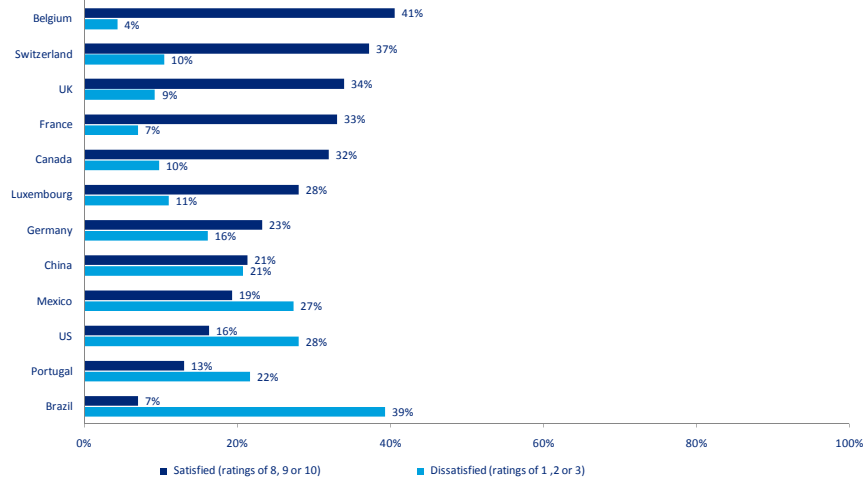


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Dissatisfaction is widespread: only 7% to 41% are satisfied with their system's performance.

How satisfied are you with the performance of your country's health care system?

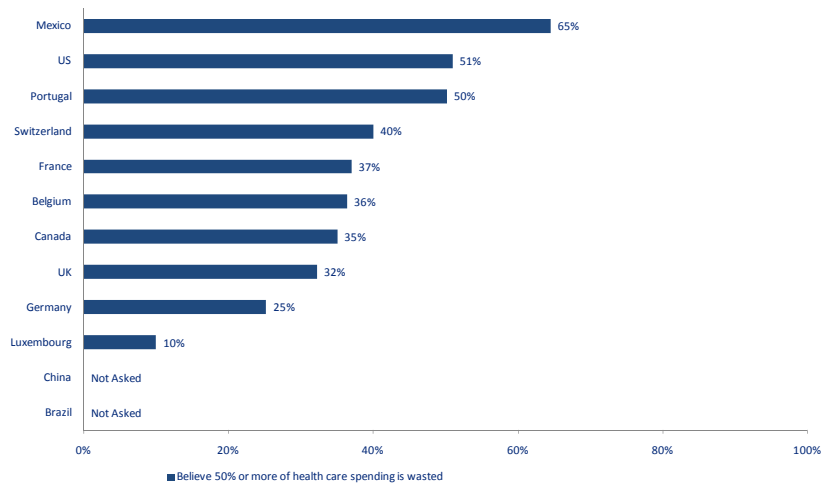


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Opinions about the wastefulness of the system vary widely.

Percent of people who feel that 50% or more of the total money spent on health care is wasted:



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Key takeaways:

health care system performance

- Opinions vary somewhat, but opportunities for improvement are prominent themes in every country.
- The perceived performance rating for a health care system is unrelated to its structure or financing model; regardless of system structure, its effectiveness is judged by consumers based on cultural expectations and personal experiences.
- Consumers do not have informed views of other systems of the world; they are not inclined to compare their system to “another” system, but more inclined to compare to “a better version” of their own.

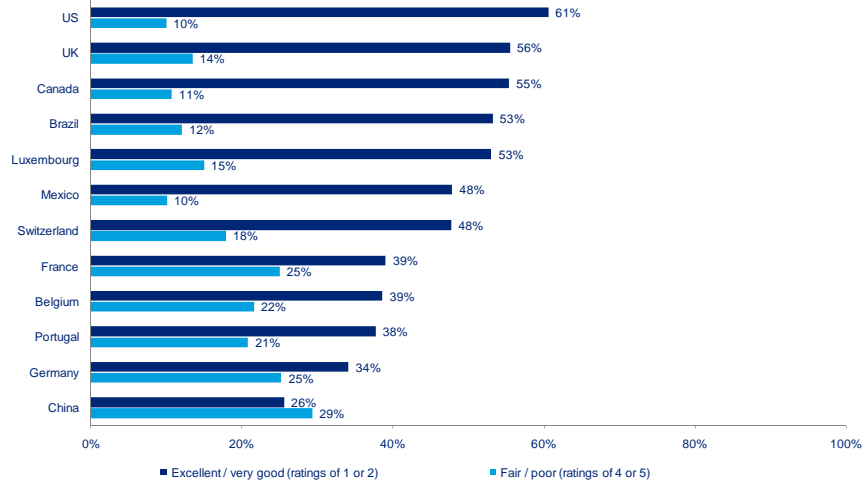
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Consumer interactions with their health care system

Self reported health status varies somewhat: a quarter to more than half say they are healthy, while less than a third say they are unhealthy.

In general, how would you rate your overall health?

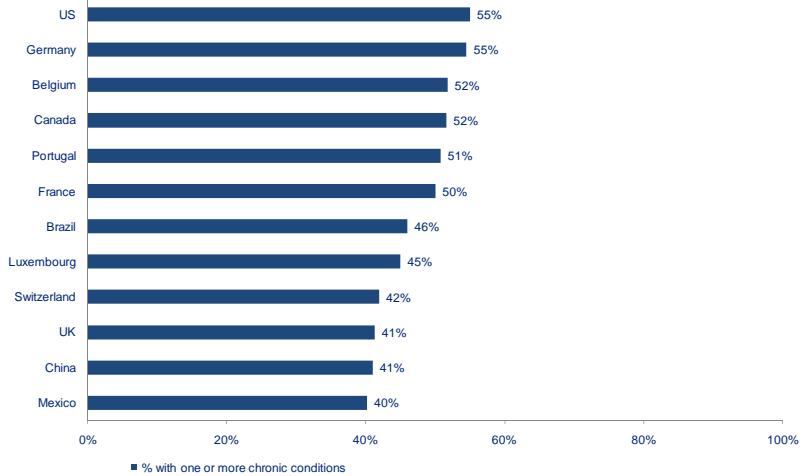


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4 to 5 in 10 have been diagnosed with one or more chronic conditions.

Have you been diagnosed by a doctor or other medical professional as having one or more chronic conditions?

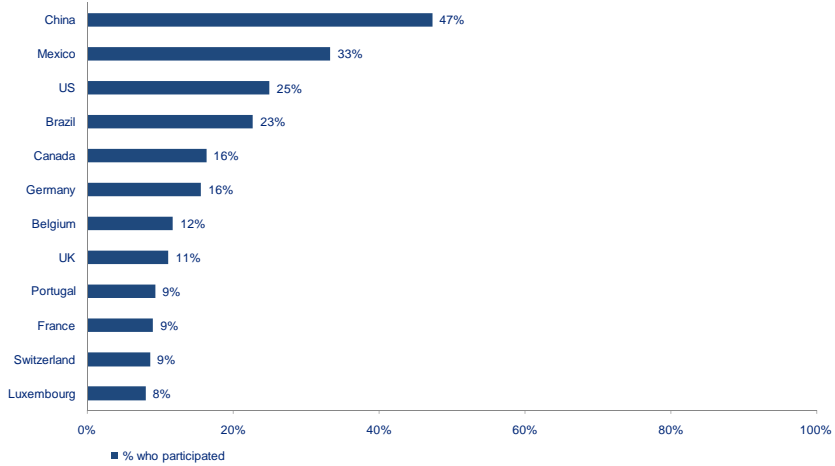


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Fewer than 1 in 4 participate in wellness programs except in Mexico and China.

Have you participated in a healthy living/wellness program offered by an employer, health plan, hospital, or other organization in the last 12 months?

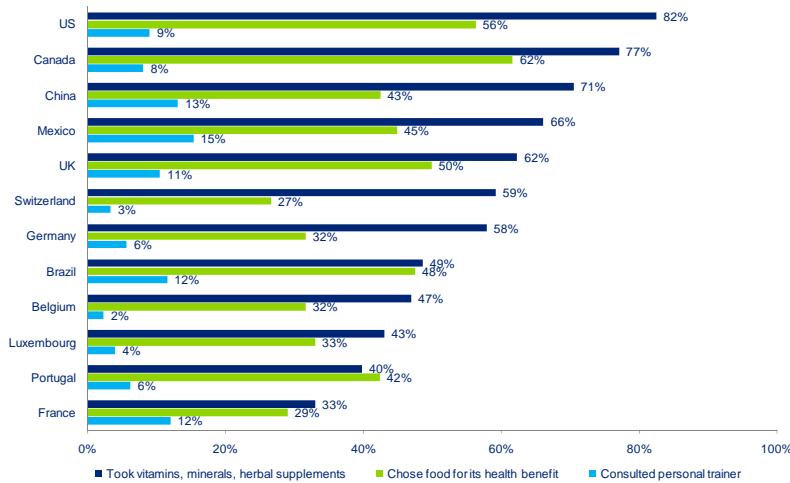


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Vitamin use and healthy food choices are associated with “healthy living” while physical exercise is low.

Which of the following have you done in the last 12 months?



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Key takeaways:

use of health systems

- Utilization of the health care system is ubiquitous: therefore, these experiences drive attitudes about the performance of the system rather than fact-based or systemic views.
- Service delivery – accessibility, paperwork, “hassles” – and costs drive impressions more than clinical performance: accuracy in diagnosis, appropriate care, latest technology, and outcomes.

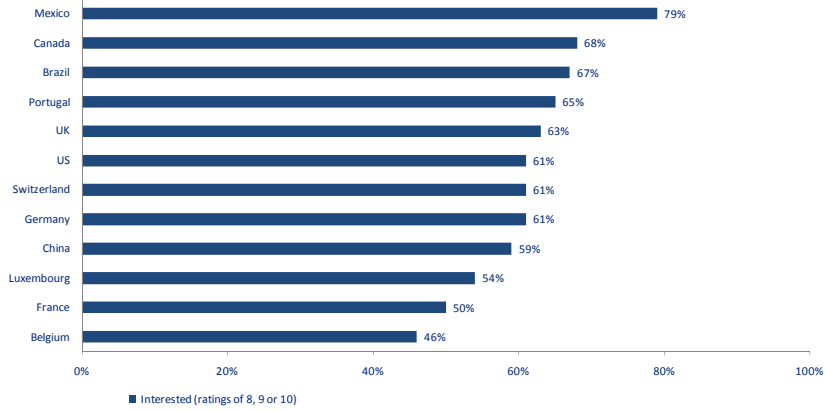
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Unmet needs
and opportunities

Consumers are highly interested in using devices to help them monitor their health and communicate with their doctor.

If you have or were to develop a health condition that needs to be checked regularly, how interested would you be in using a medical device that would enable you to check your condition and send information to your doctor electronically through a computer or cell phone via the Internet?

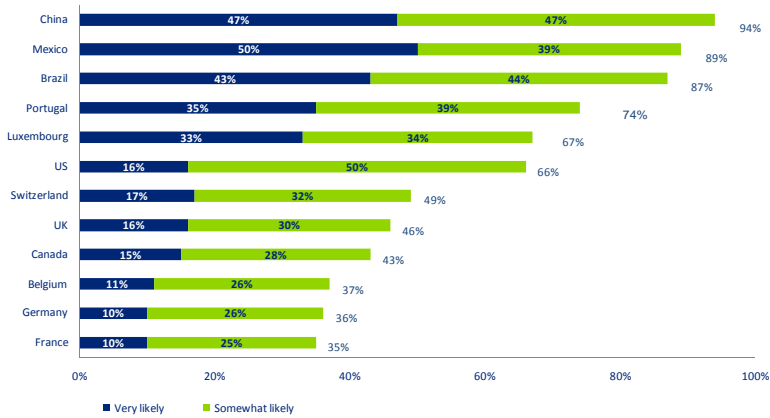


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Interest in using mobile communication devices to monitor health varies more across the countries.

If your medical records were available to you on your smart phone (or PDA), and you were able to download information about your medical condition and treatments, how likely would you be to use your smart phone (or PDA) to monitor your health?



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Key takeaways:

unmet needs and opportunities

- In every system, consumers are receptive to improvements that will save them money, improve their “user experience,” and make it easier to receive services.
- Consumers do not appear concerned about clinical quality (diagnostic accuracy, appropriate care, treatment effectiveness) – engaging consumers in understanding clinical dimensions of health system performance is a major gap in health care consumerism.

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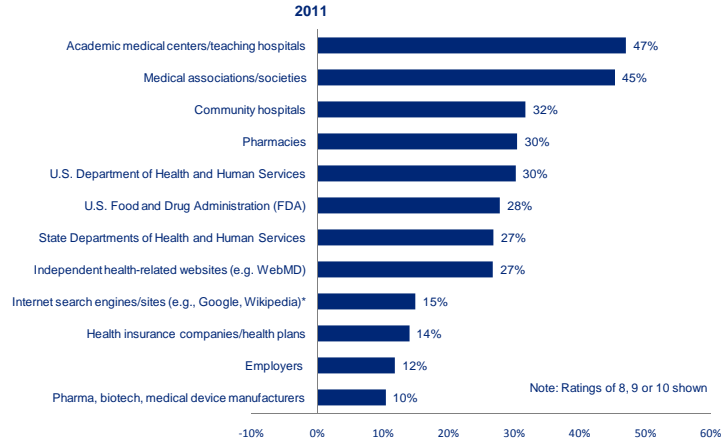
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Five major barriers

1 - Trust: consumers trust providers most for treatment information; trust in manufacturers, employers, insurers is lower.

Is the information they need available?
(U.S. shown)

If you wanted information about the most effective and safe treatment for a certain health condition, how much trust would you have in the following "third-party" sources to provide reliable information?



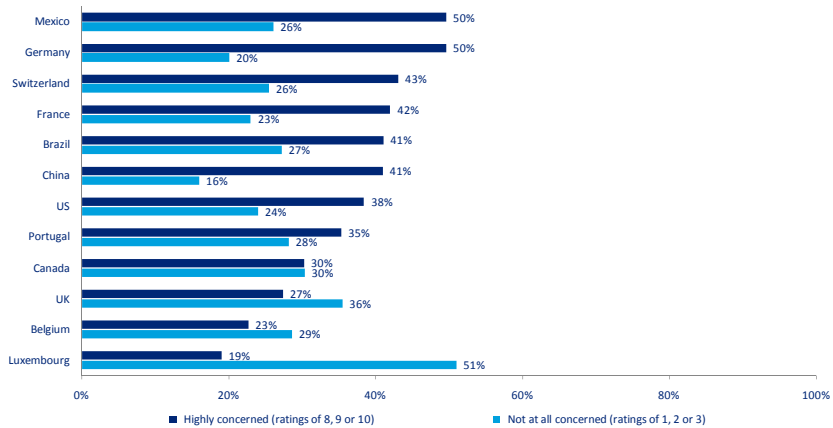
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2 - Privacy and security: consumers worry about the loss and misuse of their health information.

How can consumers get additional information if S&P issues prevail?

How concerned are you that the privacy and security of your personal health/medical information might be at risk if you were to use a computer program or website to maintain a personal health record that allowed you to share information with your doctor through an Internet connection?



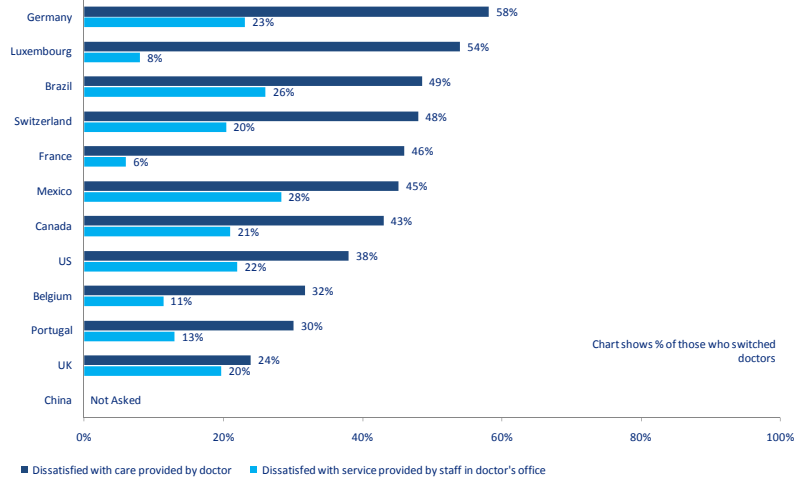
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3 - Physician continuity: dissatisfaction drives physician changes, compromising continuity of care.

How can health status improve if continuity is suboptimal?

Why did you switch doctors/medical professionals? (selected reasons shown)



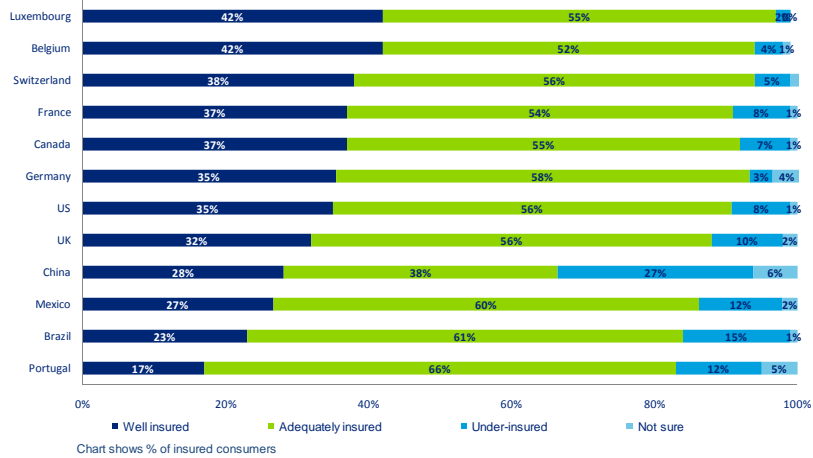
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4 - Uneven access to insurance that provides financial security: wide variation exists across countries.

How can insurance programs be aligned with financial security and incent responsible behavior by consumers?

Thinking about the amount and types of health insurance coverage you have, how adequately covered do you consider yourself to be?



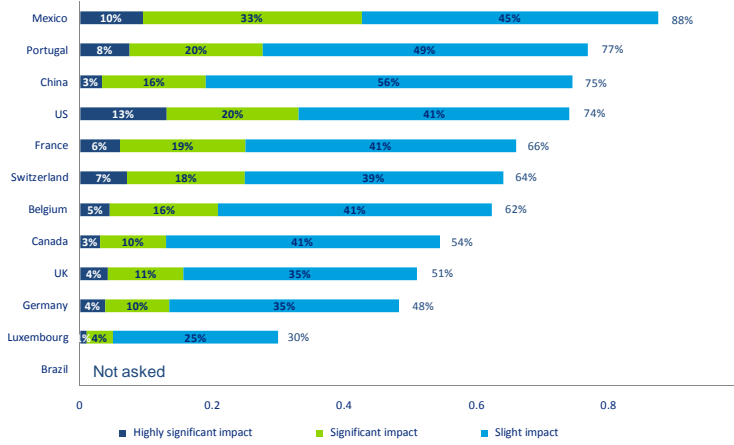
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5 - Out of pocket costs: households are forced to reduce health expenditures.

How can system costs be reduced?

Thinking about how much money you spend out of your own pocket on health care, to what extent has the recent economic slowdown made you reconsider how much you are willing to spend on health care?

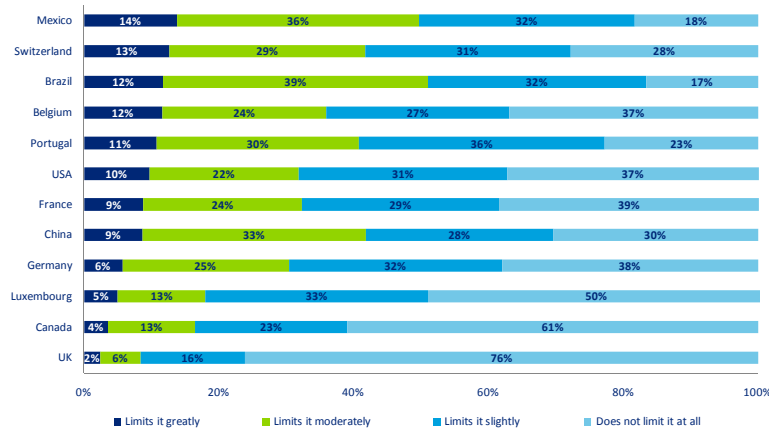


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Costs: monthly health care spending limits consumers' spending on other essentials.

To what extent does your household's current monthly level of spending on health care products and services limit your ability to spend money on other essentials such as housing, groceries, fuel, education and other things that are important to you?

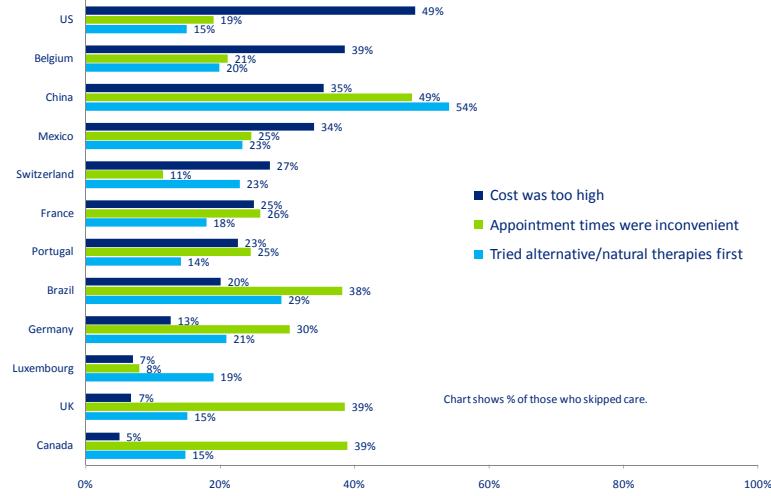


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Costs are prompting some consumers to skip care (shown) or delay treatment (not shown).

Why did you decide not to see a doctor when you were sick or injured? (selected reasons shown)



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Key takeaways:
barriers

- Costs to consumers are of growing importance to their behavior: policies that expose consumers to higher value/lower cost options will drive changes in consumerism.
- Alternative channels to equip consumers with needed information about costs, service, and clinical appropriateness are necessary: physicians and hospitals are not adequately serving the need.

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