



Provider+ Web Conference Series

Health Market 2.0: Vulnerable Consumers + Health Information



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Today's Speakers



Parie Garg
Oliver Wyman



Meshie Knight
Robert Wood Johnson
Foundation



Dr. Esteban Lopez
Blue Cross Blue Shield of Texas



Melayne Yocum,
Martin Luther King Jr.
Community Hospital



Alexis Bortniker
Foley & Lardner LLP
moderator

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Building a Culture of Health in America

Meshie Knight, MA

Robert Wood Johnson
Foundation

INTEGRITY | RESPECT | COMMITMENT | CARING

BlueCross BlueShield of Texas

OUR PURPOSE

To do everything in our power to stand with our members in sickness and in health

South Los Angeles – MLK Hospital and Medical Group

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- Melayne Yocum
- 30 years – healthcare finance and operations
- Mature managed care marketplace
- Prior experience in vulnerable populations was generally a small percentage of overall business
- Last six years most of work in vulnerable population of south Los Angeles
- Martin Luther King, Jr. Community Hospital and Community Medical Group
- 1.4 million people
- 84% Medi-Cal (Medicaid)
- Over 70% Hispanic
- Worst health disparities in Greater Los Angeles area
- Hospital opened May 2015
- Medical Group opens December 2016



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RESEARCH FINDINGS: PROVIDING HEALTH INFORMATION TO VULNERABLE CONSUMERS

DECEMBER 2016

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Study overview



Consumer research

Marketplace research

Objective

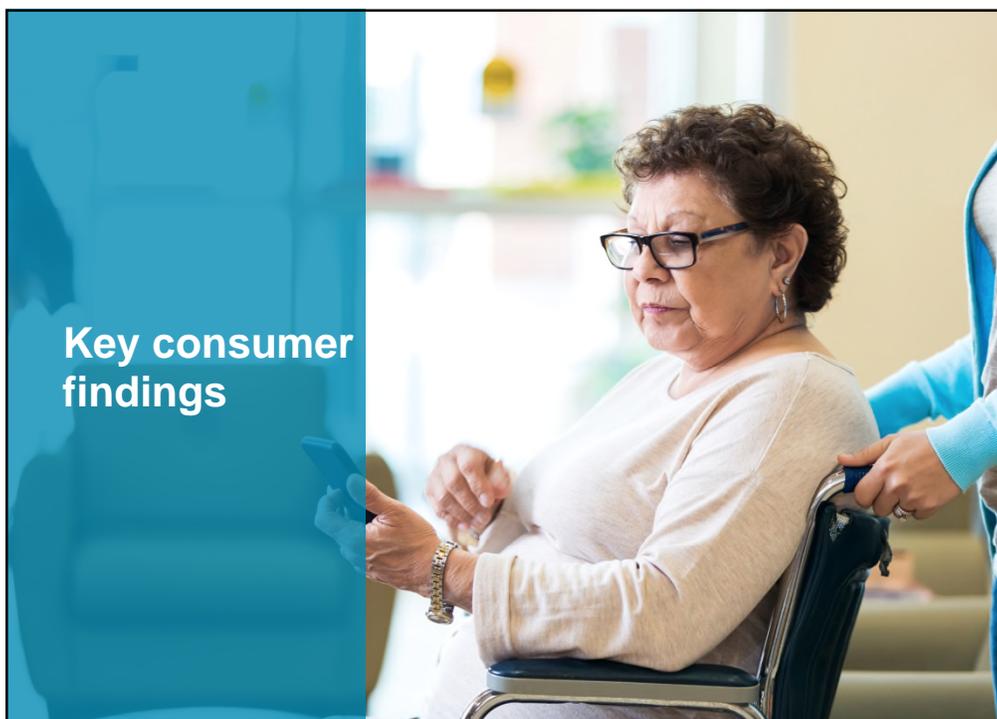
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|---|--|
| <ul style="list-style-type: none"> • Understand how and when health information sources are used • Understand satisfaction or dissatisfaction with existing sources • Identify any unmet needs | <ul style="list-style-type: none"> • Understand 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

- | | |
|--|--|
| <ul style="list-style-type: none"> • Low-income / Uninsured • Non-English Speakers • Caregivers | <ul style="list-style-type: none"> • Providers • Health Plans • Other relevant stakeholders |
|--|--|

Approach

- | | |
|---|--|
| <ul style="list-style-type: none"> • 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 | <ul style="list-style-type: none"> • 97 interviews with marketplace decision-makers and influencers • Review and synthesis of news articles, market research, etc. |
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The consumer research sought to answer four key questions

- 1** What are the **specific needs and frustrations** surrounding healthcare information for vulnerable consumers?
- 2** What are **key barriers** that prevent vulnerable patients from effectively receiving health information from providers?
- 3** How is healthcare information **most commonly accessed** by vulnerable consumers?
- 4** Who are the **most engaged users** of healthcare information?

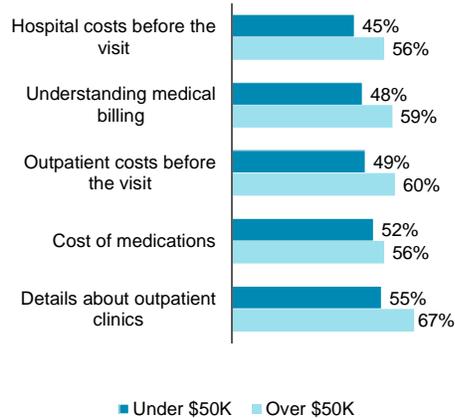
1 Needs and frustrations of vulnerable consumers It's all about cost

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)



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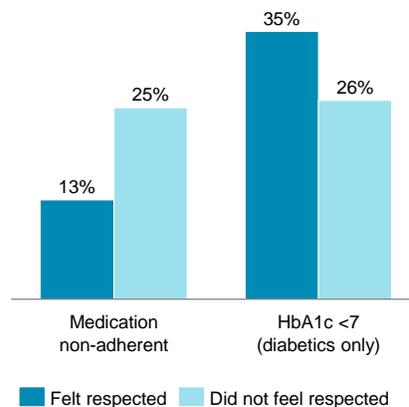
2 Key barriers to receiving health care information Respect me and I'll respect your treatment regimen

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)



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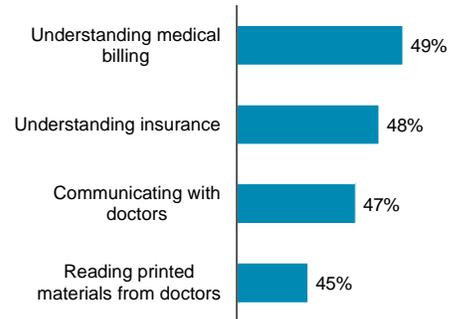
2 Key barriers to receiving health care information Español, por favor!

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



3 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

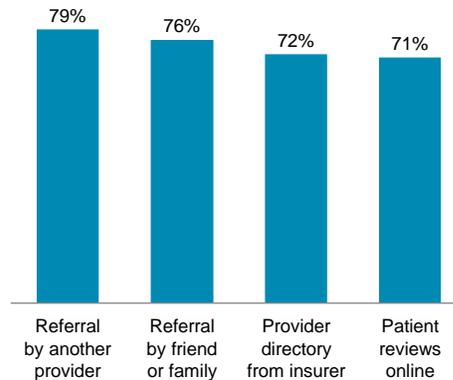
3 Most common ways of accessing healthcare information Listen to me, listen to my network

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)



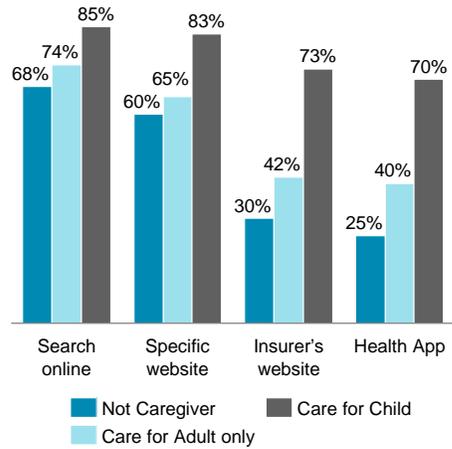
4 Most engaged users of health information New portal? New health resource? Tell the caregivers

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)



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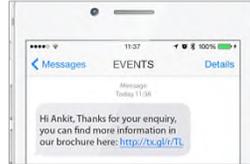
Build respect while providing useful and accessible information

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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Discussion

- How will the findings of the study impact your organization– specifically with regard to your consumer information strategy and what is your organization doing to address information access issues for vulnerable populations?
- The Foundation has been heavily involved in topics related to healthcare parity, equal access, and improving experiences for vulnerable populations. In your opinion, how has the Foundation’s sponsorship changed the landscape, and what is the next area of focus?
- What will it take to make a cultural shift in how providers view and treat vulnerable patients? How can health plans play a role? How has the Foundation been able to assist stakeholders in creating this transition?

Discussion Continued

- Now that you have this information in hand, what is the next level of information you would seek to be able to drive change in how healthcare information is provided?
- Despite the proliferation of cost transparency tools, cost information remains the greatest gap. Why don't these tools fit the bill / how can they improve? What, if anything, has Blue Cross Blue Shield of Texas found to be useful in providing cost information to vulnerable populations?
- Often, a barrier to the proliferation of information, ability to implement the use of new tools relates to physicians unwillingness to engage. Have you found provider willingness to participate to be an issue?

Discussion Continued

- Many vulnerable consumers rely on word of mouth / social networks for information; how can health plans and providers outreach in the community? What, if any, support do health plan need from legislatures to make outreach a possibility?
- Where do you see opportunities to interact and collaborate differently with other stakeholders and/or to encourage, help sustain such collaboration?
- Based on what you have found in this study, what are some first steps that providers and payers can take to begin to provide better access to vulnerable populations?

Conclusion

- Thank you for joining us today, we hope you found the discussion to be valuable.
- If we were unable to answer your question during today's webinar, we will follow-up with you via email.