



The Beryl Institute - Ipsos PX Pulse Consumer Perspectives on Patient Experience in the U.S.

MAY 2023

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We define the patient experience as the sum of all interactions, shaped by an organization's culture, that influence patient perceptions across the continuum of care. We believe human experience is grounded in the experiences of patients & families, members of the healthcare workforce and the communities they serve.

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INTRODUCTION

Welcome to the 12th release of The Beryl Institute – Ipsos PX Pulse as we continue to follow the trends on consumers' perspective of healthcare and the human experience they have when seeking, accessing and engaging in care. This release represents a deeper dive into some of the foundational ideas we have been exploring since the launch of PX Pulse in early 2020.

Beyond continuing to track core trends, in this issue we look at the aspects of care that people have shared are important to investigate and how often they are experiencing these aspects of care. We also dig deeper into issues related to out-of-pocket expenses and access to care, including differences between access expectations versus experiences.

This release is important, as it reinforces how some of the most fundamental issues to receiving healthcare, care costs and the access they have to care, impact the overall human experience of care. It underlines that experience is truly an integration of all that people encounter, and every touch point can influence the experience people reflect.

The power of PX Pulse continues to be its ability to look beyond the concepts that comprise the healthcare experience to the realities that people face every day. The findings help us reflect on how we can more effectively operationalize healthcare and move forward with confidence in knowing what truly matters to those we serve every day.

Our hope remains that this is not simply data to read but information on which to act. Our belief is that on the pages of PX Pulse you find actionable ideas that can lead to lasting solutions that will ensure the best in experience for all.

METHODOLOGY

This research was conducted using online surveys fielded through the Ipsos KnowledgePanel,[®] one of the only probability-based online panels that is representative of the U.S. population. The KnowledgePanel was chosen to provide one of the highest levels of accuracy and representativeness available on the web, allowing for the accurate measurement of consumer experiences, opinions and behaviors in the United States.

In total, 1,006 completed surveys were obtained in the United States through the KnowledgePanel for this quarter's release. The survey was fielded from March 1-10, 2023 to a sample group of people that were randomly selected to be representative of the U.S. population in terms of Census estimates of gender, age, race, ethnicity, education, income and region. The survey was fielded in English-only. Findings presented in this report were weighted to correct for any over- or under-representation in the distribution of completed surveys across these demographic categories, as well as to account for the aforementioned over-sampling.

Since the launch of PX Pulse in early 2020, we have presented findings in a pattern of shorter core inquiries and deeper-dive sets of questions in alternating quarters. This quarter we expanded our inquiry beyond the core questions with a follow-up inquiry on the experience of important aspects of patient experience as well as issues around out-of-pocket expenses and access to care.

The core questions we have asked since the launch of PX Pulse include:

- 1 Thinking about the healthcare system in America as a whole, overall, how would you rate the quality of healthcare in this country?
- 2 From the following list, which healthcare issue is most important to you?
- 3 Thinking about how you have experienced healthcare in the past year, how would you rate your overall experience?
- 4 Overall, how important is it that you have a good patient experience?
- 5 Why is having a good patient experience important to you?

CORE QUESTIONS

Overall quality and experience of care remain consistent.

General trends related to quality and experience of care hold steady, with the rating of quality dropping 2% and the overall care experience increasing 3% (Figures 1 and 2).

Figure 1. Quality of Healthcare in America (% "Very Good" + "Good")

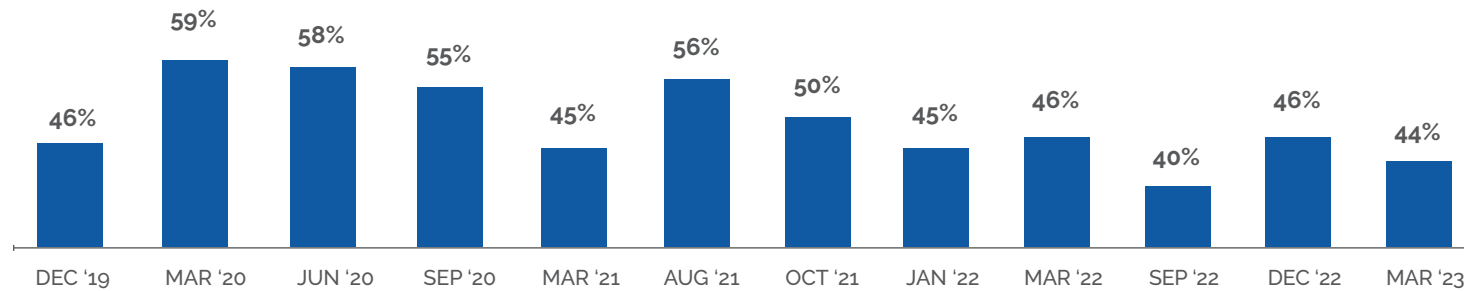
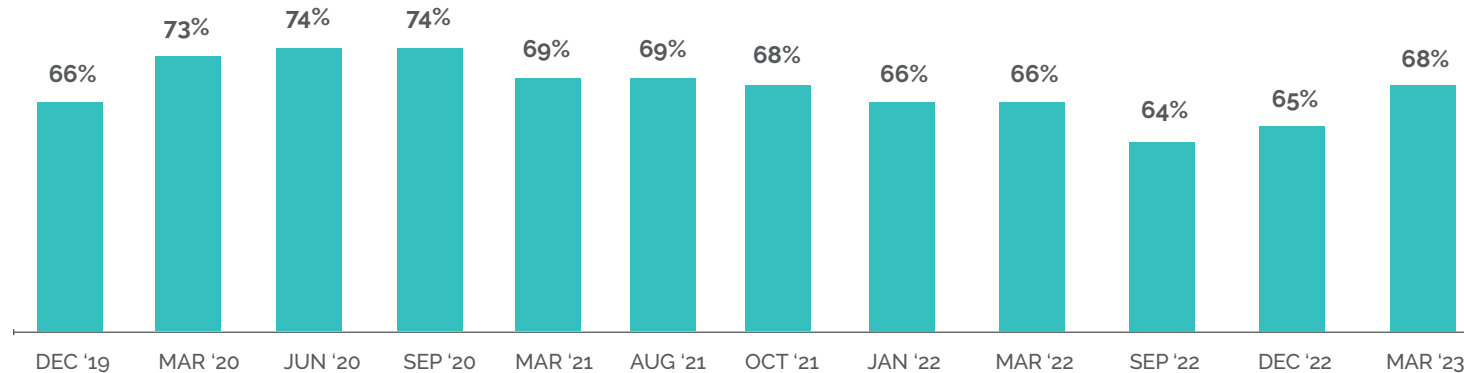


Figure 2. Overall Care Experience in the Past 12 Months (% "Very Good" + "Good")



Cost-related issues remain most important to consumers.

Affordable insurance options, out-of-pocket costs and insurance premiums continue to hold the greatest importance to people (Figures 3 and 4). However, when asked to select a single issue, access to quality hospitals/treatments was one of the top three issues selected. As access to care continues to be a challenge, we have explored this issue deeper, as you will see later in the report.

Figure 3. Which healthcare issue is most important to you?

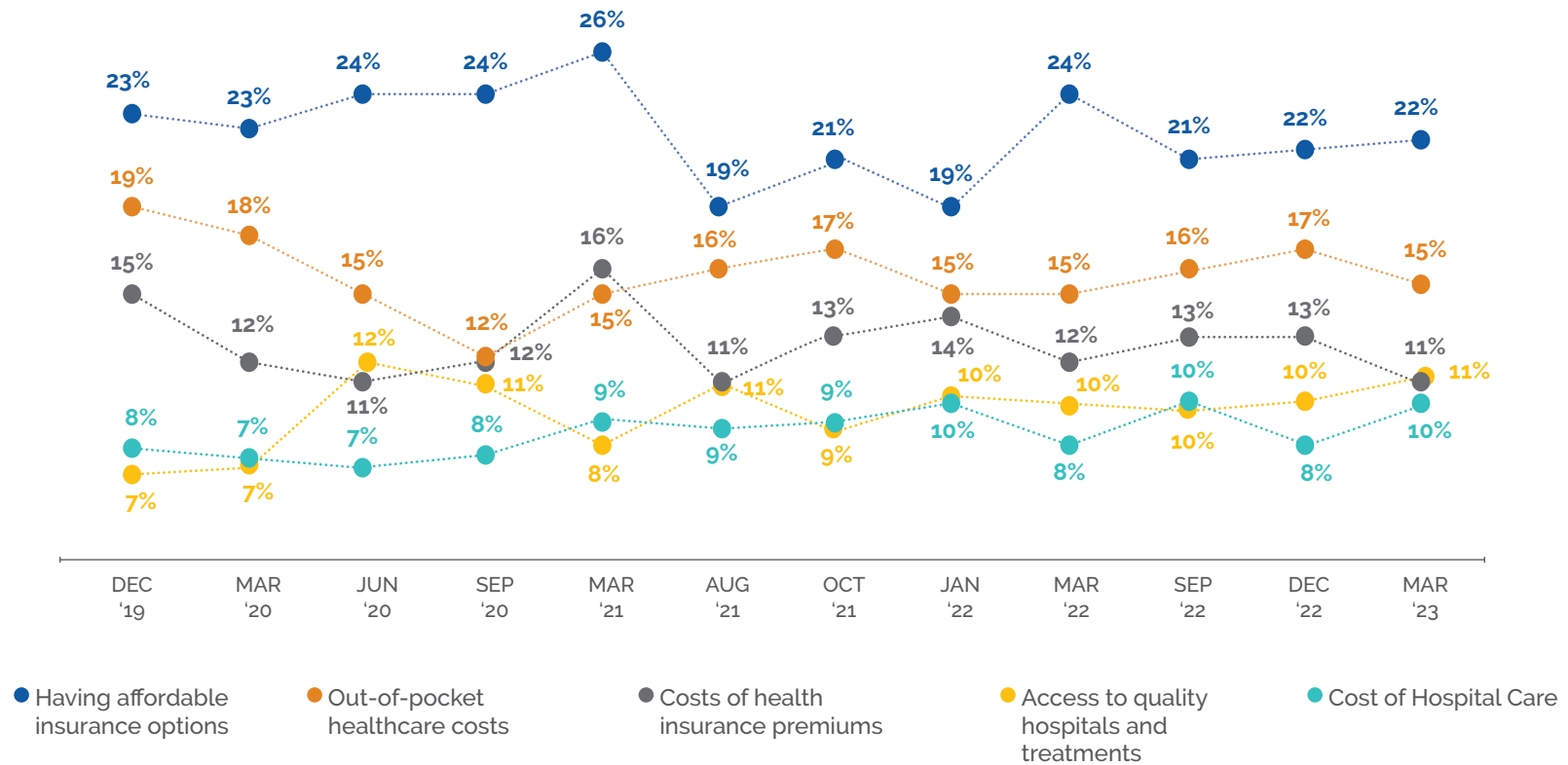
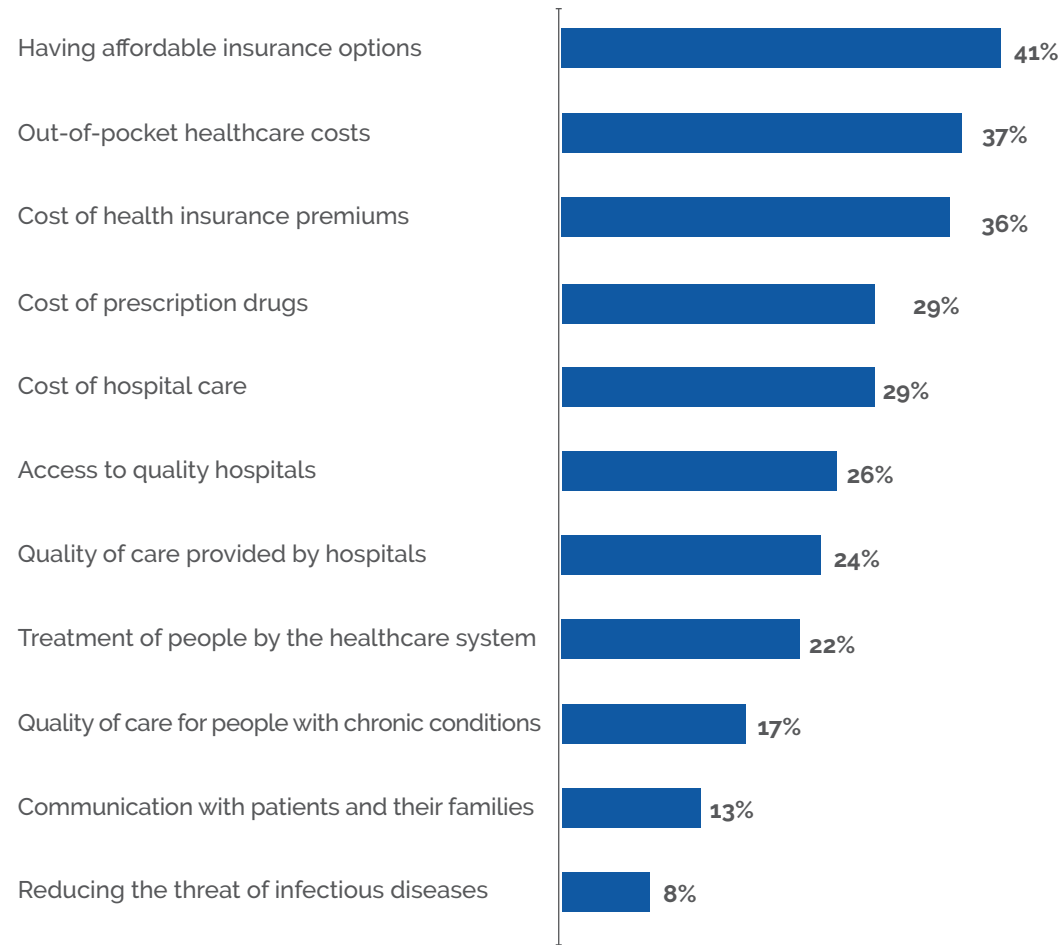


Figure 4. Which healthcare issues are most important to you? (Top 3)



Experience and the human side of healthcare remain important.

Having a good experience continues to be important to people, remaining fairly stable at 94% (Figure 5). The reasons why patient experience is important continues to focus on human needs, such as health and well-being, physical needs, positive outcomes and being treated with respect (Figures 6 and 7).

Figure 5. Overall, how important is it that you have a good experience as a patient? (% "Extremely important" or "Very important")

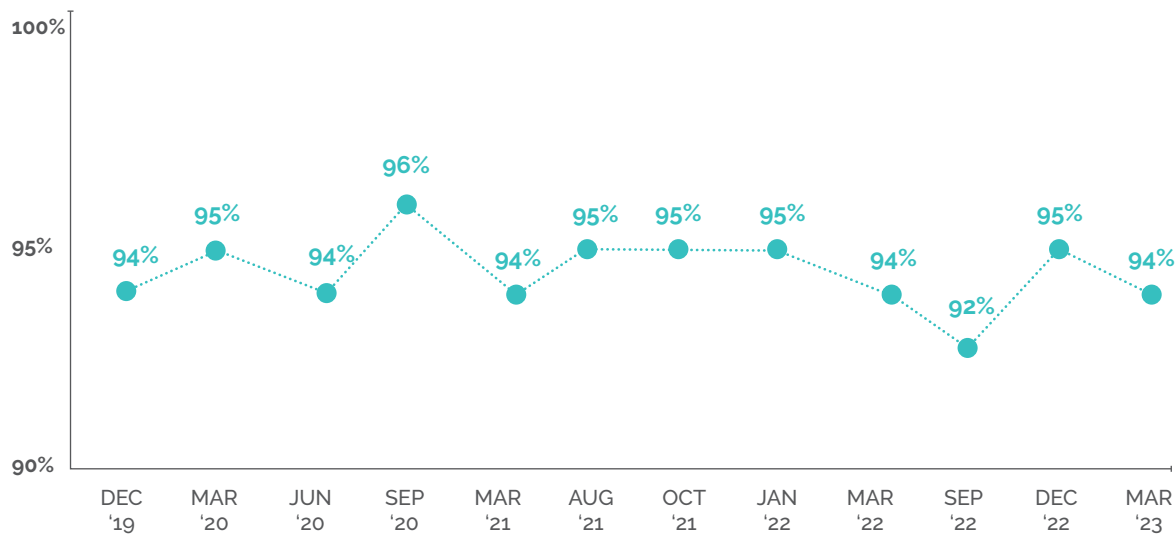
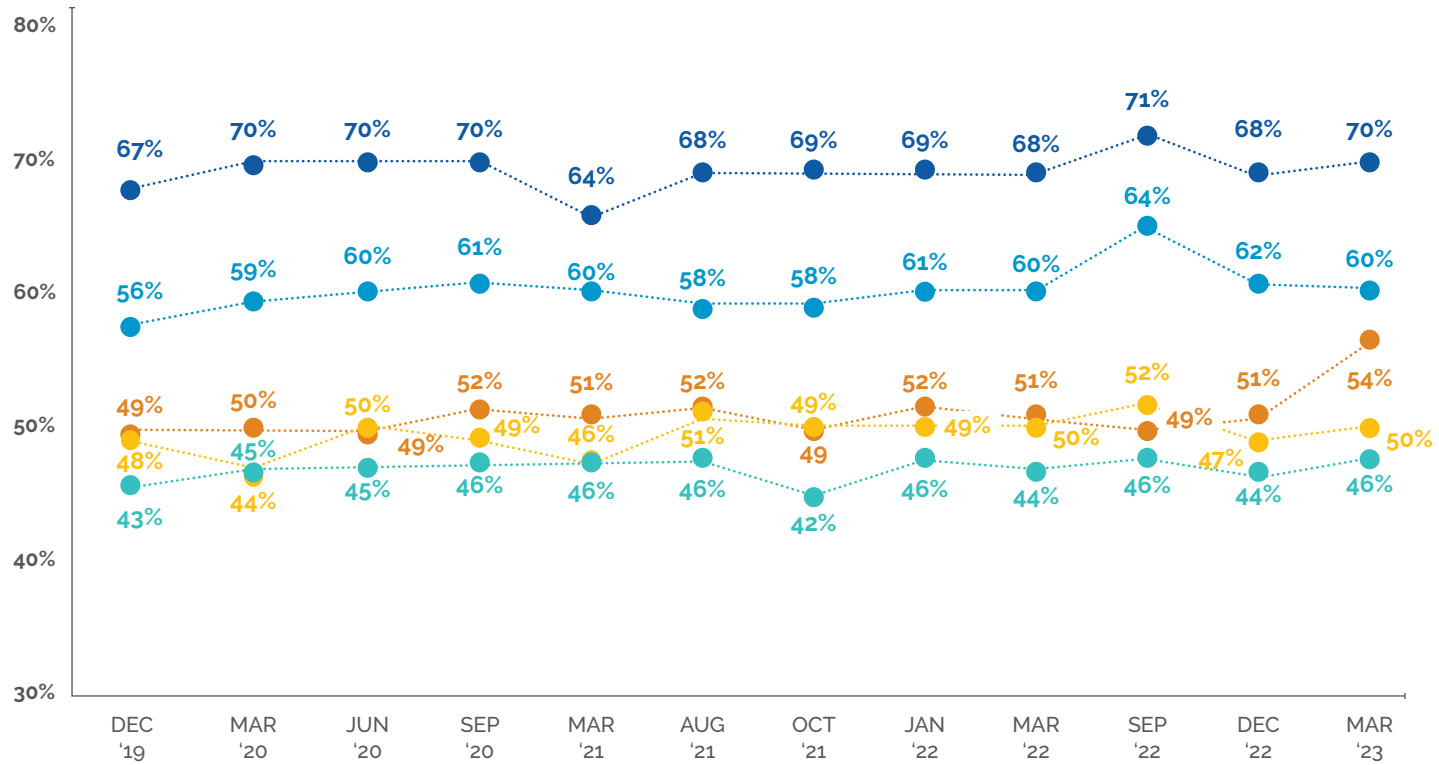


Figure 6. Why is having a good patient experience important to you?

- 70%** My health and wellbeing are important to me
- 60%** I want to know my physical needs are being taken seriously
- 54%** Good patient experience contributes to my healing/good healthcare outcomes
- 50%** I want/deserve to be treated with respect
- 46%** I want to be addressed as a person, not as a symptom, diagnosis or disease
- 37%** It will influence how I make healthcare decisions in the future
- 36%** I spend my money on this
- 34%** My time matters
- 20%** I see myself as a customer

Figure 7. Why is having a good patient experience important to you?



- My health and wellbeing are important to me
- I want to know my physical needs are being taken seriously
- I want/deserve to be treated with respect
- Good patient experience contributes to my healing/good healthcare outcomes
- I want to be addressed as a person, not as a symptom, diagnosis or disease

BEHIND THE CORE QUESTIONS

Overall, healthcare providers are delivering on the aspects of patient experience that people deem important.

In digging into how often people experience aspects of patient experience investigated as part of the core questions during their own encounters, we found that 91% report being “always” or “usually” treated with respect. Other important aspects of patient experience are also experienced a majority of the time, ranging from 81%-87%. Areas related to shared decision-making, such as being included in care decisions and having a clear plan of care, are on the lower end of the range and may highlight potential opportunities for improvement (Figure 8).

Figure 8. How often does your healthcare provider...? (% Always + Usually)

91%	Treat you with courtesy and respect
87%	Address you as a person, not as a symptom, diagnosis, or disease
86%	Communicate in a way you can understand
83%	Take your physical needs seriously
83%	Listen to you
83%	Prioritize your health and wellbeing
82%	Include you in making decisions about your health care
81%	Provide a clear plan of care and explanation

Co-pays and prescriptions are most commonly associated with out-of-pocket expenses.

As out-of-pocket expenses are a top issue to consumers, this issue of PX Pulse sought to investigate how people are defining out-of-pocket expenses and how those expenses impact their experience. Direct pay items that have immediate impact on people's pocketbooks, such as co-pays for appointments and prescriptions, are most commonly associated with out-of-pocket expenses (Figure 9).

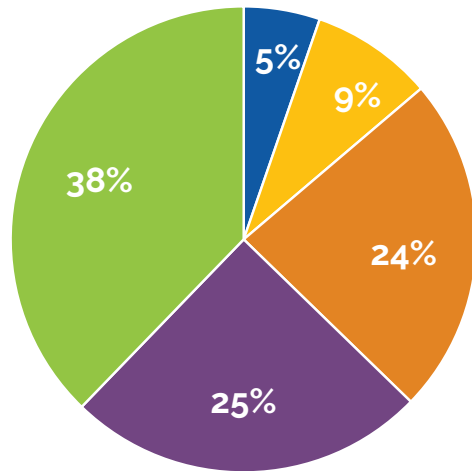
Figure 9. Which services do you associate with out-of-pocket expenses?

73%	Co-pay for regular appointments
72%	Prescriptions
54%	Insurance monthly premium
50%	Ambulance or other emergency care fees
40%	Imaging (X-ray, CT Scan, MRI, etc.)
37%	Blood work or other lab tests
35%	Orthopedic devices (Casts, slings, braces, etc.)
29%	Treatments (cancer treatment, dialysis, etc.)
4%	Other

Out-of-pocket expenses are not a significant deterrent to seeking care.

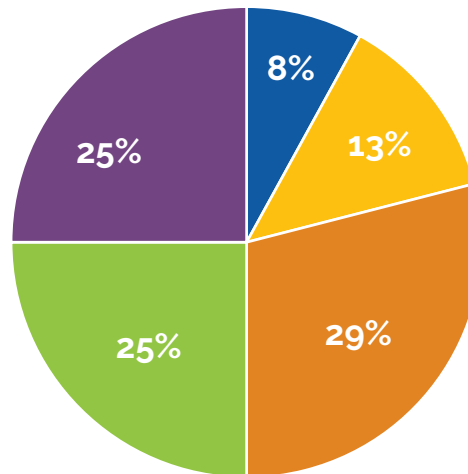
While out-of-pocket expenses are consistently a top issue, most respondents (63%) “rarely” or “never” put off care due to expenses. (Figure 10). Additionally, about half of the respondents do not look for less expensive treatment or service options (Figure 11). While the Pulse did not ask about reasoning for not searching for less expensive treatment options, this lack of action may reflect respondents’ reliance on physician guidance and/or recommendations, loyalty or comfort with the care providers they currently have, or restrictions due to the insurance options they have available. At the same time, out-of-pocket expenses only impacted patient experience to a “great” or “very great” extent for 28% of people (Figure 12). While most people express that the impact on their experience is “little” or “very little,” these findings illustrate how costs still should be considered when looking at patient experience and ways to improve to help people receive the best treatment with the lowest cost burden.

Figure 10. How often do you delay getting the care you need due to the cost of out-of-pocket expenses?



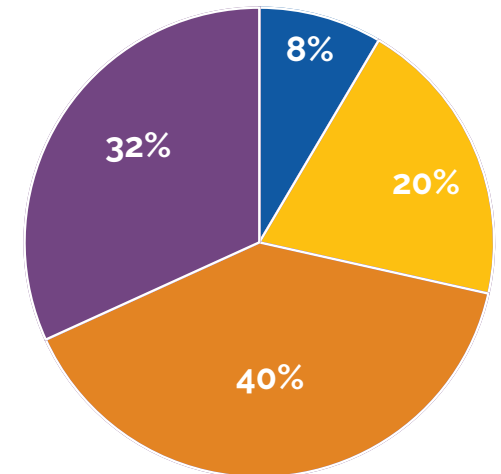
Always (blue), Frequently (yellow), Sometimes (orange), Rarely (purple), Never (green)

Figure 11. How often do you search for less expensive treatments or service options?



Always (blue), Frequently (yellow), Sometimes (orange), Rarely (purple), Never (green)

Figure 12. To what extent do your out-of-pocket healthcare expenses impact your patient experience?



To a very great extent (blue), To a great extent (yellow), To some extent (orange), To a little extent (purple)

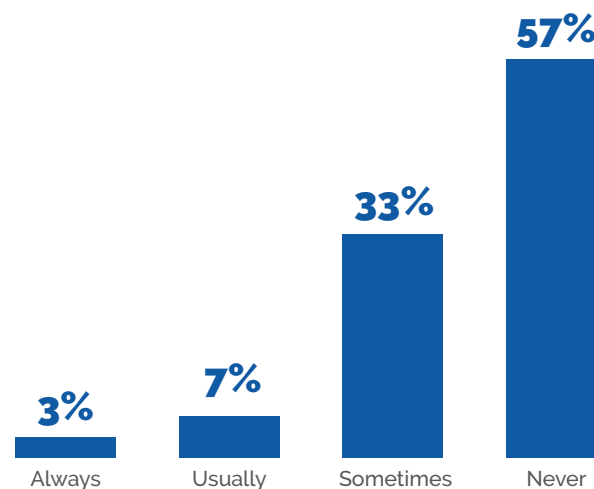
ACCESS TO CARE

As access to care has become both an operational consideration and an issue linked to equity in healthcare, it finds itself squarely at the heart of the experience conversation. We sought to explore the realities of people seeking care both in routine or preventative settings and in urgent care settings and the issues of access that may exist for the U.S. consumer.

Over 40% of people experience some issue in scheduling care.

In the last 12 months, about 80% of people tried to schedule routine or preventative care. Of those people that scheduled a preventative care appointment, 10% "always" or "usually" had difficulty scheduling an appointment, while another third "sometimes" had issues scheduling an appointment. A majority (57%) said they "never" had trouble scheduling an appointment (Figure 13). While these numbers seem positive, 43% of people having an occasional issue or more reflects an opportunity to review scheduling systems to ensure ease and minimize barriers to improve scheduling issues that may impact access to preventative care.

Figure 13. In the last 12 months, how often did you have trouble scheduling an appointment for routine or preventative care?



Most people expect to be able to schedule a preventative care appointment within 14 days.

Most people (45%) expect to receive preventative care in “4 to 7 days” or “8 to 14 days.” Most people also report that they experience receiving an appointment within those timeframes (Figure 14). It is important to note that these findings do not tell us if the same people expecting to receive care in a particular timeframe are the same people that reported receiving an appointment within the same timeframe.

That said, when looking at the reported expectations and experiences, differences can be seen. In general, people expect to receive preventative care within a shorter timeframe than experienced. This highlights the misalignment in expectations versus experience that can cause preventative care scheduling frustrations and impact overall experience.

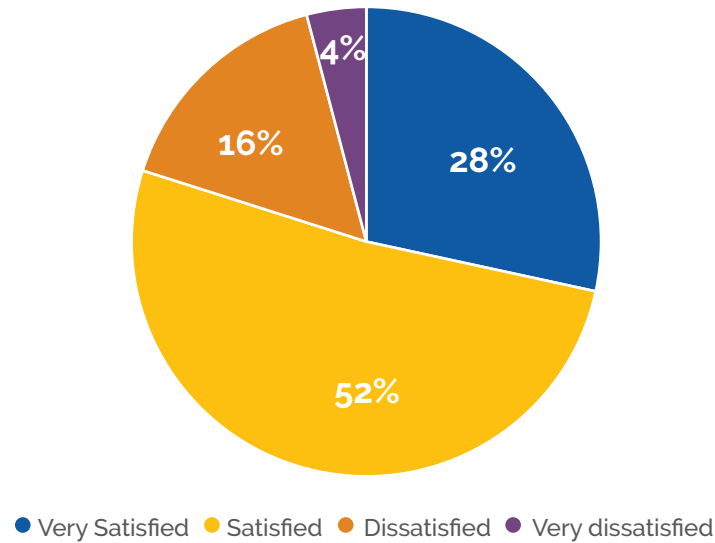
Figure 14. Scheduling Preventative Care: Expectation vs. Experience

Experience	Expectation
Same day	
8%	7%
1 day	
3%	3%
2 to 3 days	
9%	13%
4 to 7 days	
18%	22%
8 to 14 days	
19%	23%
15 to 30 days	
18%	19%
31 to 60 days	
14%	8%
61 to 90 days	
5%	4%
91 days to longer	
4%	2%
I did not make an appointment for routine or preventative care in the last 12 months	
1%	0%

Even with differences between expectations and experiences, people are generally satisfied with their ability to schedule preventative appointments.

Eighty percent of people were "satisfied" or "very satisfied" with their ability to schedule preventative care (Figure 15). This satisfaction may be with the process, timing, or some other factor.

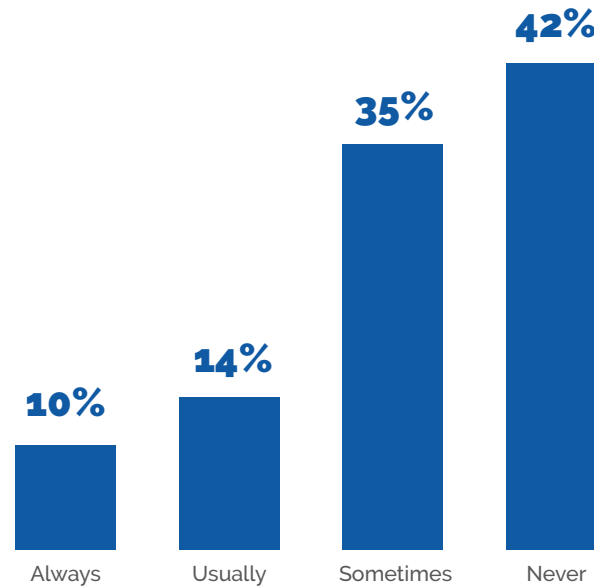
Figure 15. How satisfied are you with your ability to schedule appointments for routine or preventative care?



Of the people who sought to schedule urgent care in the last 12 months (35% of all people), a majority identified at least some trouble in scheduling care.

Of the 35% of people that made an urgent care appointment, 24% “always” or “usually” had trouble scheduling their care and another 35% had trouble “sometimes” (Figure 16). As urgent issues require more immediate attention, it may not be surprising that more people reported trouble scheduling urgent care appointments. That said, delays in care caused by scheduling challenges could have a greater impact on care and experience. These scheduling challenges also have bigger implications for the healthcare system overall, as people that encounter scheduling issues may go to an emergency room to have their needs addressed sooner. The ripple effect of these access issues extend patient experience, with implications for costs, utilization, quality, and outcomes.

Figure 16. In the last 12 months, how often did you have trouble scheduling an appointment for an urgent care issue?



Differences between expectations and experience around access to urgent care were more significant and reflect a larger opportunity for healthcare organizations.

One third of all people expect to receive an urgent care appointment on the same day. Like preventative care, people expect to receive urgent care quicker than may be experienced, as 59% of people expect to receive an appointment for urgent issues in a day or less (Figure 17). As noted previously, delays in accessing urgent care may lead to people waiting to receive care, which may lead to potentially greater health issues, or seeking alternative avenues for care to prevent further delays in care.

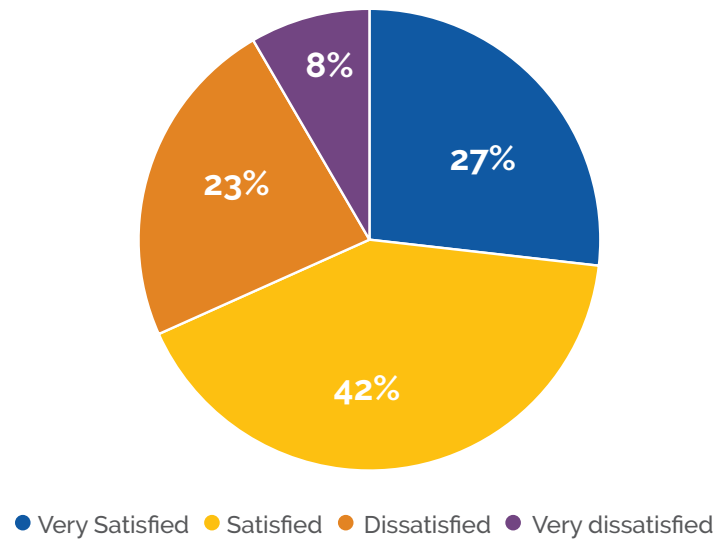
Figure 17. Scheduling Urgent Care: Expectation vs. Experience

Experience	Expectation
Same day	
23%	33%
1 day	
20%	26%
2 to 3 days	
20%	21%
4 to 7 days	
16%	12%
More than 7 days	
21%	8%
I did not need care right away in the last 12 months	
0%	1%

Almost a third (31%) of all people were “dissatisfied” or “very dissatisfied” with their ability to schedule an appointment for urgent care.

Given that more people reported having trouble scheduling urgent care, it is not surprising to see higher dissatisfaction with scheduling appointments for urgent care than preventative care (Figure 18). This point reinforces that patient experience begins before people enter a clinical encounter, as the interaction they have with a healthcare organization around scheduling can set the foundation for the experience they have and can also lead them making alternative choices in how, when, or where they receive care.

Figure 18. How satisfied are you with your ability to schedule appointments for urgent care?



When asked about responsibility for access issues, people place blame on health insurers and a general belief that these issues are “just how healthcare is.”

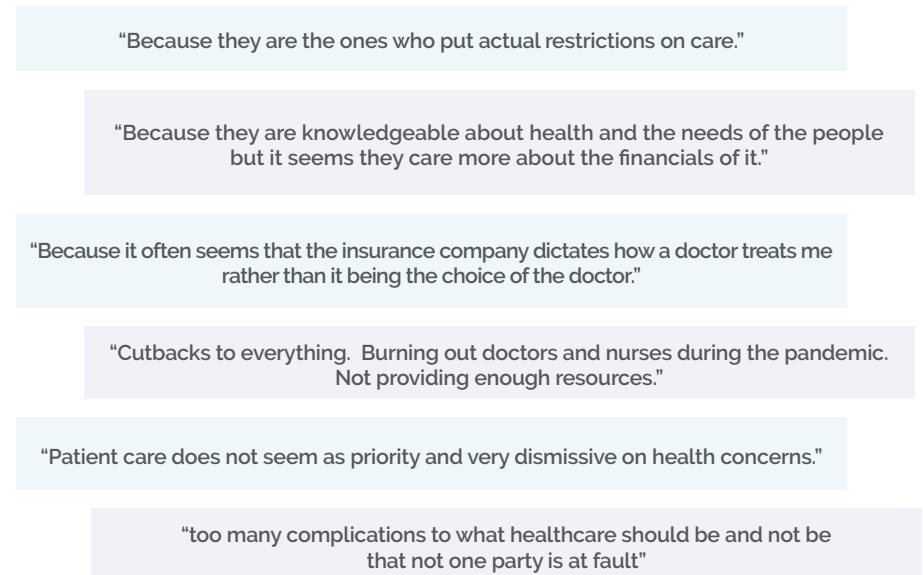
When considering responsible parties for access to care issues, 30% of people said that these issues are “just the way healthcare is,” perhaps showing some resignation to the system. Other top selections pointed to health insurers and federal government health leaders (Figure 19).

When asked about why they assigned blame to the party they selected, comments frequently mentioned that the party they selected were the ones who put the rules, laws, systems or restrictions in place. Other common comment themes were related to healthcare costs and the belief that the particular party was making decisions based on costs (Figure 20). These themes mirror findings from our 2022 third quarter PX Pulse, where we explored the erosion of trust in the healthcare system. In that report, we found that many reported “feeling as though the healthcare system acts out of self-interest rather than mine as a patient.”

Figure 19. When thinking about the challenges you or someone you know has had when trying to access healthcare, who do you blame for the challenges?

Health Insurers	28%	State Health Leaders	3%
Federal Government Health Leaders	21%	Local Health Leaders	1%
Primary Care Providers	8%	Other	6%
Hospitals	3%	No one, it is just how healthcare is	30%

Figure 20. Why do you assign blame to that party?

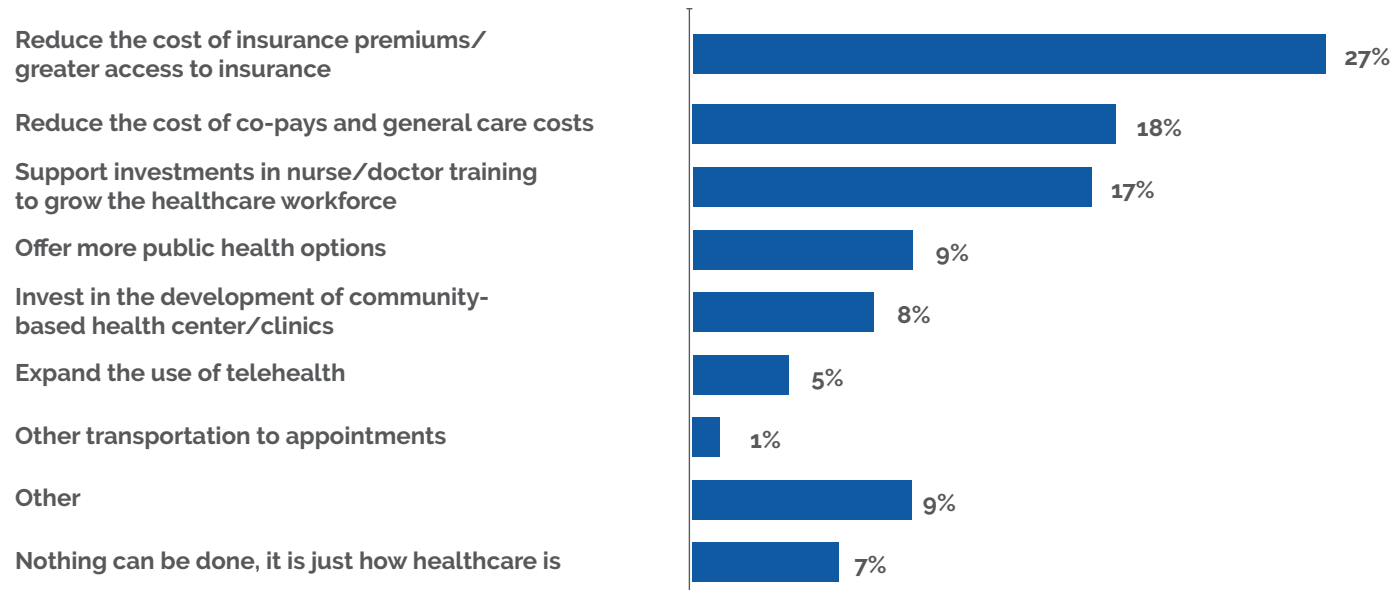


Costs were top of mind again when asked about improving access to care.

Even though, when asked about blame, most people felt it was “just how healthcare is,” there did seem to be some hope in the opportunity to improve access, as only 7% felt nothing could be done. Similar to the cost concerns seen in the core questions, reducing the cost of insurance, out-of-pocket and general care costs were the top selections related to ways to improve access. People also saw investments in the healthcare workforce as a solution to access to care challenges (Figure 21).

For those that selected “other,” the most common theme was a desire for free healthcare or a universal healthcare system.

Figure 21. What do you think could be done to improve access to care?



KEY TAKEAWAYS

In this release of PX Pulse, we dug deeper into the consistent issues raised by our people to better understand the implications of cost and access. We also continued to explore the trends in healthcare to see if any major shifts occurred. As we shared in this report:

- Our core survey findings were consistent with previous quarters' results with some subtle shifts.
- In digging deeper into the core areas to evaluate how providers are performing on aspects of care that are important to consumers, we found that these important aspects of care are being experienced a majority of the time. The aspect of care occurring the most is treating people with courtesy and respect, while areas occurring less frequently reflected opportunities to improve shared decision-making so that people feel involved in their care.
- When looking at cost-related items, 63% of people "rarely" or "never" put off care due to costs. Additionally, about half did not look for other more affordable options. This finding may reflect a reliance on medical professional guidance when making care decisions. As costs continue to be one of the important issues to consumers and impact patient experience, there is an opportunity to empower patients to explore options to find the ones that not only meet their clinical needs, but also do so in a way that reduces potential cost burdens associated with many treatments and services.
- Trouble accessing care is more commonly reported in urgent care than preventative care. This trouble may be expected given the nature of urgent care needs. When looking at scheduling expectations versus experience, misalignment is seen in both preventative care and urgent care. Again, this may be expected given what is seen in access to care scores on patient survey measures, but this misalignment highlights an opportunity to better communicate ways to schedule and what to expect when scheduling appointments. As we move into post-pandemic times, it is important that healthcare organizations innovate to find ways to best leverage and balance the use of technology to improve access to care.

- When asked what specific groups are to blame for challenges with accessing care, top responses were "health insurance companies" and "federal government health leaders." Reasons for assigning blame to the selected group reflected that people felt the group had the most control over the system through various rules or regulations. Interesting in this finding is a great sense of apathy that healthcare is "just this way" reflected by almost one-third of all people. It is unfortunate that people have come to see healthcare as potentially unreliable or inconsistent in meeting their needs when they identify it as important to their own health and well-being. There is still work left to do here.

This edition of PX Pulse helped reveal some very fundamental issues that impact both how we deliver care and where burdens on our healthcare system may emerge due to how we operate the system. At the same time, we acknowledge we are in a moment when healthcare organizations are facing massive resource constraints, especially as it relates to staffing, which puts even greater potential for expectation gaps into play.

The reality here is that cost and access are fundamental elements of the human experience in healthcare and must be addressed as such. It will help healthcare organizations be better stewards in their communities, care more effectively for their workforce and ensure the best in experience for the patients, family members and care partners they serve every day.

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