THE BERYL INSTITUTE – IPSOS PX PULSE: CONSUMER PERSPECTIVES ON PATIENT EXPERIENCE IN THE U.S.

July 2020

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The Beryl Institute is the global community of practice committed to elevating the human experience in healthcare. We believe human experience is grounded in experiences of patients & families, those who work in healthcare, and the communities they serve.

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.*

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INTRODUCTION

TRACKING CONSUMER PERSPECTIVES ON PATIENT EXPERIENCE DURING A GLOBAL PANDEMIC AND AN ELEVATED CONVERSATION ON SYSTEMIC RACISM

Since the second release of The Beryl Institute – Ipsos PX Pulse in March 2020, the United States has continued to address the COVID-19 pandemic and experienced a rapidly elevating conversation on systemic racism and social disparities, along with nationwide protests, sparked by the death of George Floyd. This moment has uncovered long-standing issues and brought them to the fore, leading to an increasing call to move beyond words to action in ending systemic racism in America. The realities of racism and disparities have only been further highlighted by the pandemic itself, revealing very different outcomes based on race.

Now many citizens and organizations are having dialogues about the realities of race and identity in day-to-day life and working to take action to address them. The Beryl Institute itself moved quickly to address this issue in both releasing a community call to action and rapidly establishing a resource center on systemic racism and health disparities. This issue of PX Pulse itself has been designed to include relevant questions on this topic and for this moment.

At a time when COVID-19 case counts continue to increase in the United States and as thousands of citizens continue to take to the streets to protest these critical social issues, broader debates on opening the economy and schools, wearing masks and social distancing remain. For the healthcare sector, mounting worries about resource shortages and staff continue to emerge as volumes and therefore bottom-lines are impacted across the system. As revealed in the last release of PX Pulse, a shift to telemedicine is a consideration for consumers in some cases, but as revealed in this release, there is still fear and hesitation across the general consumer base as to how, when and why they will choose to reengage in healthcare overall.

Even in this crisis context, patient experience continues to remain an important topic among consumers. With national COVID-19 incidence rates rising daily, and the reemergence of stricter social distancing mandates, providers are continuing to adopt new and different methods of care delivery, as levels of uncertainty and fear about the pandemic's outcome continue to loom over the nation.

This third release of The Beryl Institute - Ipsos PX Pulse presents an updated look at patient perspectives while continuing to provide a common language by which to discuss the rapidly changing nature of healthcare experiences in the United States. Specifically, this report tracks changes on core questions since the previous quarter and consumer perspectives on how COVID-19 affects their comfort in receiving care. This release of The Beryl Institute – Ipsos PX also looks to understand consumer perspectives on discrimination in the healthcare sector due to race, gender and sexual orientation. Lastly, the report provides a deep dive into the emergency room experience, healthcare preferences, and telemedicine portals.

ROADMAP

NEW INSIGHTS DELIVERED QUARTERLY

The Beryl Institute – Ipsos PX Pulse publishes findings quarterly, sharing new insights from consumers about healthcare that will further elevate the conversations around patient experience.

The survey asks five core questions that will track consumer perspectives on patient experience and healthcare overall.

PX Pulse helps ensure that as the conversation on human experience in healthcare continues to expand, a focus on the needs of the consumer remains central to the evolving healthcare system.

In addition, each quarterly report features a deep dive into consumer experiences within specific health settings, including primary care, hospital care, emergency and urgent care, as well as post-visit care. Consumers will also be asked about specific dimensions of care, including access, cost, and use of telemedicine.

The roadmap for The Beryl Institute – Ipsos PX Pulse 2020 publications and the insights to be included are outlined below.

Core Questions Asked Each Quarter

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?

Release Month:	January Public Release	April Public Release	July Public Release	October Public Release
Healthcare Setting-specific Questions	Primary Care	Acute Care / Hospital	Emergency Room / Urgent Care	Following Guidance about At-home / Post-visit Care
Domain-specific Questions	Access & Cost Provider Communication	Factors Influencing Hospital Use Telemedicine Practices	Scope of Consumer Practices Telemedicine Portals Disparities and Discrimination	Framing Patient Experience

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, 1,020 completed surveys were obtained in the United States through the KnowledgePanel for this quarter's release. The survey was fielded from June 23 through July 2.

The survey was fielded 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. Individuals who visited an emergency room or urgent care center were oversampled to obtain robust estimates for this subpopulation. 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 oversampling.

CORE FINDINGS

CONSUMER ENGAGEMENT IN HEALTHCARE CONTINUES TO DECLINE AMID INCREASES IN COVID-19 CASES NATIONALLY

As COVID-19 infection rates continue to rise, consumers continue to engage in less healthcare activities this quarter compared to last quarter. We see significant decreases across the board for healthcare activities, with the largest drop seen for visits to the primary care provider (-26%) since our first survey.

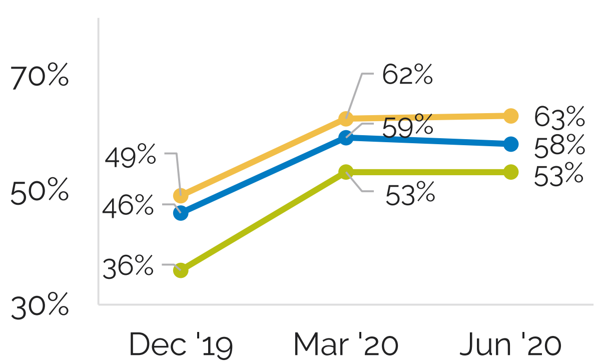
Despite the lower level of engagement in healthcare activities and the continued spread of COVID-19, consumers remain positive about the overall quality of healthcare in the United States. This holds true when looking at ratings for respondents overall, respondents who reported a recent healthcare visit, and respondents who did not report a recent visit. Similarly, we continue to see that consumers remain positive about their overall care experience across the aforementioned three groups.

Have you done any of the following healthcare activities in the past 3 months?	Dec '19 (Q1)	Mar '20 (Q2)	Jun '20 (Q3)	% Diff Between Q1 and Q3
Visited your primary care provider	61%	52%*	35%*	-26%
Stayed in a hospital overnight	10%	6%*	3%*	-7%
Visited a specialist provider	47%	34%*	29%*	-18%
Visited an emergency room/urgent care facility	24%	20%	12%*	-12%
Visited a lab for medical tests	50%	36%*	29%*	-21%

An asterisk (*) denotes statistically significant differences from the previous quarter

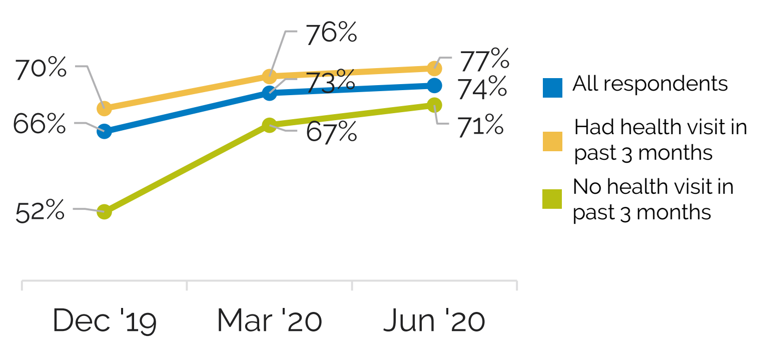
Quality of Healthcare in America

% that report 'Very good' or 'Good'



Overall Care Experience in the Past 12 Months

% that report 'Very good' or 'Good'



All changes between quarters 1 and 2 are statistically significant. Changes between quarter 2 and quarter 3 are non-significant.

COST AND ACCESS ARE THE MOST IMPORTANT HEALTHCARE ISSUE FOR CONSUMERS

Consumers continue to cite costs as among the most important healthcare issues to them. The top two most important issues remain the same compared to last quarter and include having affordable insurance options and out-of-pocket healthcare costs.

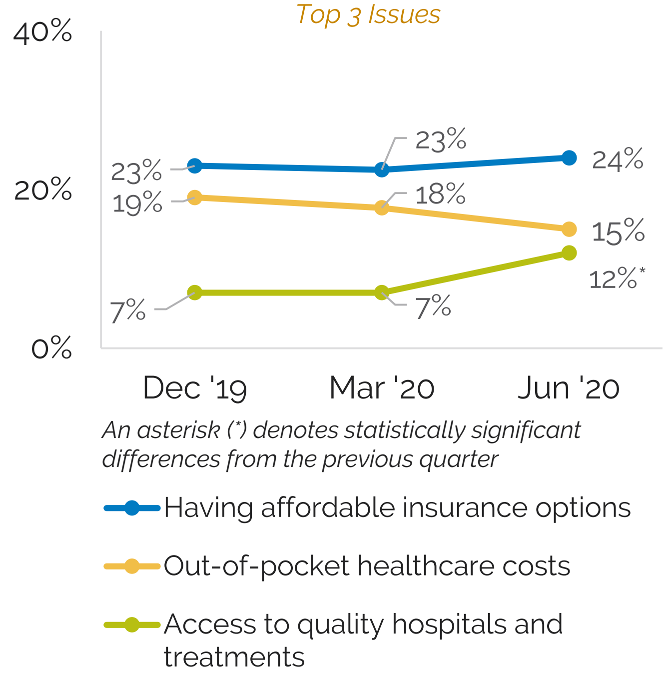
ACCESS TO QUALITY HOSPITALS AND TREATMENTS EMERGES AS A TOP GROWING HEALTHCARE ISSUE FOR CONSUMERS

The third most important issue among consumers is having access to quality hospitals and treatments, which had a statistically significant surge in importance from last quarter (+5%). The issue narrowly surpassed cost of health insurance premiums as being more important this quarter.

Continued concern around the COVID-19 outbreak may likely be driving the increased importance placed on access to treatments, reflecting the value consumers place on being seen and treated by a healthcare provider during the pandemic.

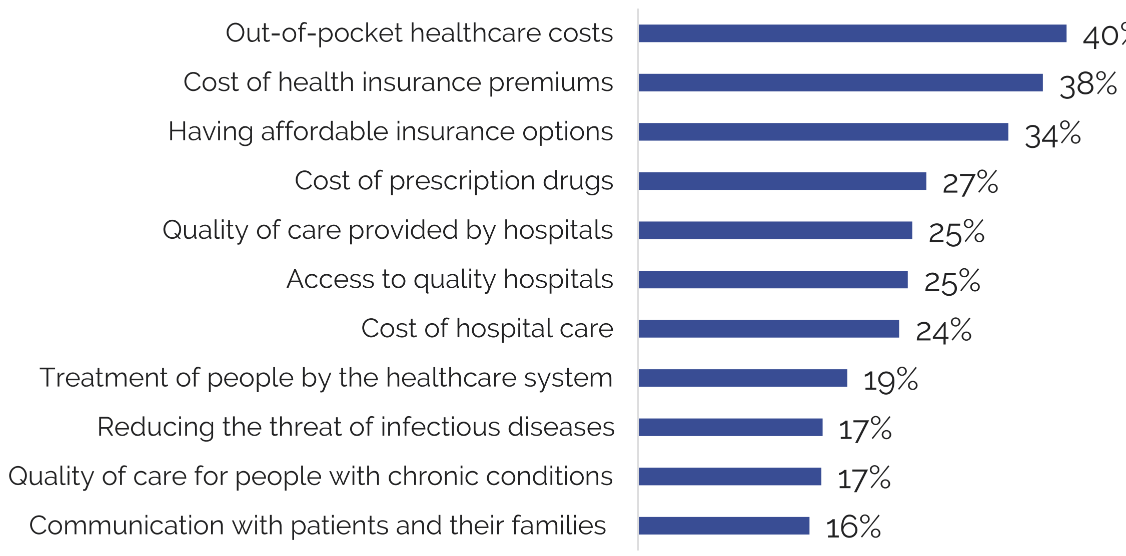
Which healthcare issue is most important to you?

Top 3 Issues



An asterisk (*) denotes statistically significant differences from the previous quarter

Which healthcare issues are important to you?



All changes between quarter 2 and quarter 3 were non-significant.

MEANGINGFUL PARTICIPATION IN CONSUMER CARE EXPERIENCES COMES IN MANY FORMS

When asked which actions reflect meaningful participation in care experiences, a majority of consumers identify two items: having open access to their medical records (66%) and partnering with their healthcare provider on decisions related to their plan of care (55%). Over a third of consumers also report that completing surveys about their care reflects meaningful participation.

As a healthcare consumer, which of the following actions reflect meaningful participation in your care experiences?

CONSUMERS WANT RESPECT AS THEY CONTINUE TO SAY PATIENT EXPERIENCE MATTERS TO THEM

Healthcare consumers continue to say that having a good experience is important to them as patients. Nearly 94% of people affirm that good patient experience is either "very important" or "extremely important." This finding remains stable from the last quarter.

The top two reasons stated for why good patient experience is important to consumers remain stable from the last quarter as well. These include their health being important to them (70%) and knowing that their physical needs are being taken seriously (60%). Consumers are also significantly more likely to say that they want to be treated with respect, with an increase of 6% from last quarter saying that this is one of the reasons why patient experience is important to them.

These views reflect academic research that consistently indicates that patient experience is positively associated with a wide range of important clinical care outcomes. These associations can be found across a wide range of disease areas, settings, outcome measures and study designs. Additionally, patient experience matters as an end in itself. At the human level, the findings continue to support consumers' desire to be treated with respect and as a person—in line with the overall mission of healthcare.

"Healthcare professionals should treat people as they would want to be treated themselves"

CONSUMERS REPORT ONLY SOME LEVEL OF COMFORT SEEKING HEALTHCARE SERVICES DURING THE COVID-19 PANDEMIC

As COVID-19 infection rates continue to rise, consumers are saying they feel “extremely”, “very”, or “somewhat” comfortable seeking healthcare services. Consumers are especially comfortable seeking services from their primary care provider, specialist provider or lab for medical tests. There is less comfort for consumers seeking care at the hospital, the emergency room or urgent care center. This may be due to the fact that hospitals and emergency rooms are more likely to be tending to patients with confirmed cases of COVID-19.

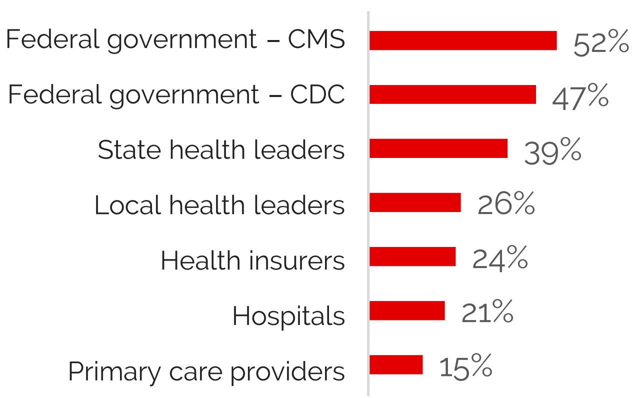
When asked what would make you feel more comfortable seeking healthcare services, common responses from consumers included stricter adherence to mask policies and increased testing for COVID-19. Consumers also mention they would feel more comfortable seeking healthcare services once a proven COVID-19 vaccine is available to the public.

GOVERNMENT AGENCIES SEE LARGEST NEGATIVE PERCEPTION IMPACT DUE TO COVID-19

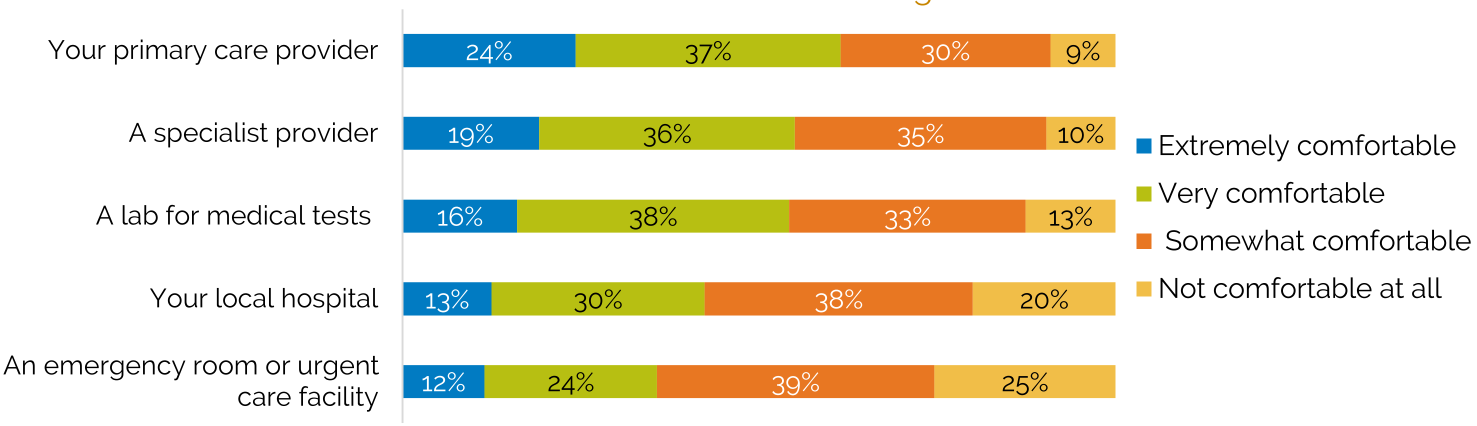
COVID-19 has affected consumers perspectives in various ways across different healthcare actors in America. Perspectives remain relatively neutral for primary care providers and hospitals with over half of the consumers stating their views on these healthcare actors have stayed the same during the COVID-19 outbreak. Consumers reported more negative perspectives towards governments leaders.

How has COVID-19 changed your perspective of the following healthcare actors in America?

% that report ‘Made it much worse’ or ‘Made it worse’



At this time, how comfortable are you seeking healthcare services from the following?



EMERGENCY ROOM & URGENT CARE

CONSUMERS ARE SATISFIED WITH THEIR EMERGENCY ROOM AND URGENT CARE EXPERIENCES

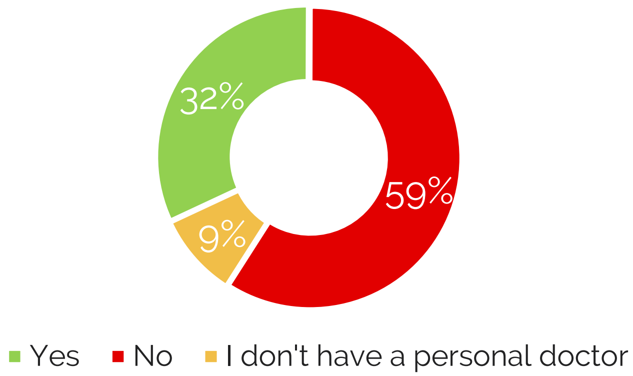
Almost all consumers who have visited the emergency room (ER) or urgent care clinic (UCC) in the past three months were "very satisfied" or "somewhat satisfied" with their most recent care experience (90%). When asked about what could have made the experience better, many consumers complained about waiting times.

The mains reasons consumers visited the ER and UCC were for injury (26%), minor illness (20%) and sudden serious illness such as chest pains or severe headaches (26%). A few consumers also said they visited the ER due to COVID-19 symptoms or to receive COVID-19 testing.

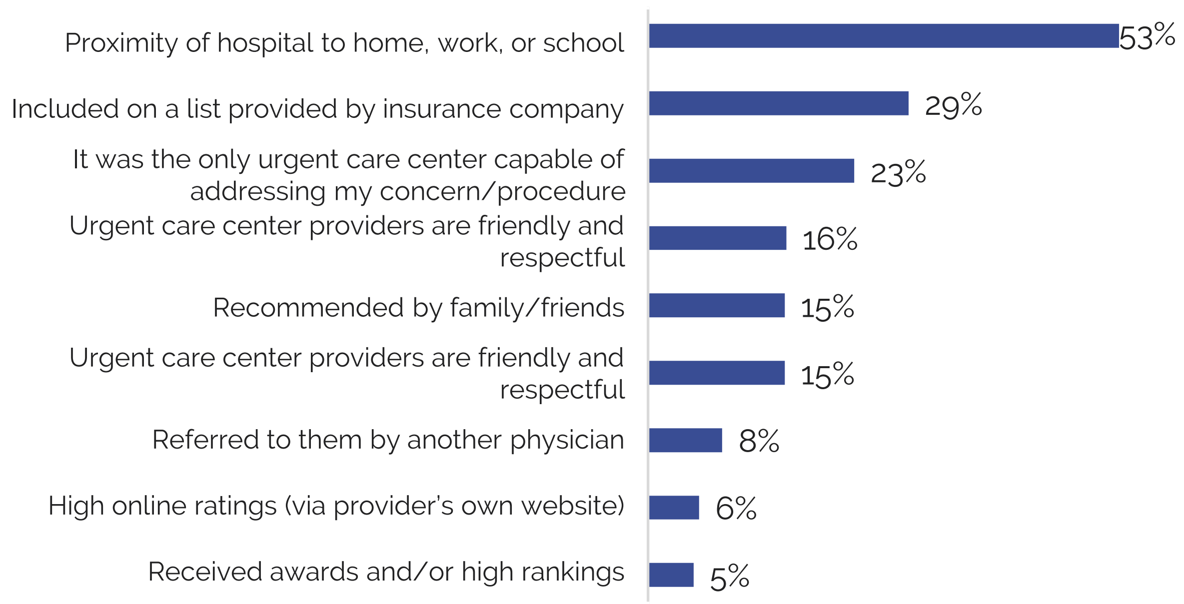
Only 32% of consumers considered going to see their regular doctor instead of visiting their specific hospital ER or UCC. Consumers said they did not go to their doctor because they were either in too much pain, it was an emergency or that it was during a time when their regular provider was closed.

Consumers were also asked about the reason for choosing their specific UCC. Over half reported proximity of the UCC to their home, work or school as being the deciding factor for their choice (53%).

Did you consider going to your regular doctor instead of the ER to deal with the issues that brought you to the ER?



Why did you choose your specific urgent care center?



HEALTHCARE PREFERENCES

CONSUMERS PREFER PROVIDERS WHO ARE FAMILIAR WITH THEIR MEDICAL HISTORY BUT ALSO PREFER NOT TO WAIT WHEN SICK

Almost all consumers “strongly agree” or “somewhat agree” that it is important to see a provider who is familiar with their medical history (95%) and their child’s medical history (92%). Similarly, consumers agree that they would prefer to see the same provider when they go to their doctor’s office (91%).

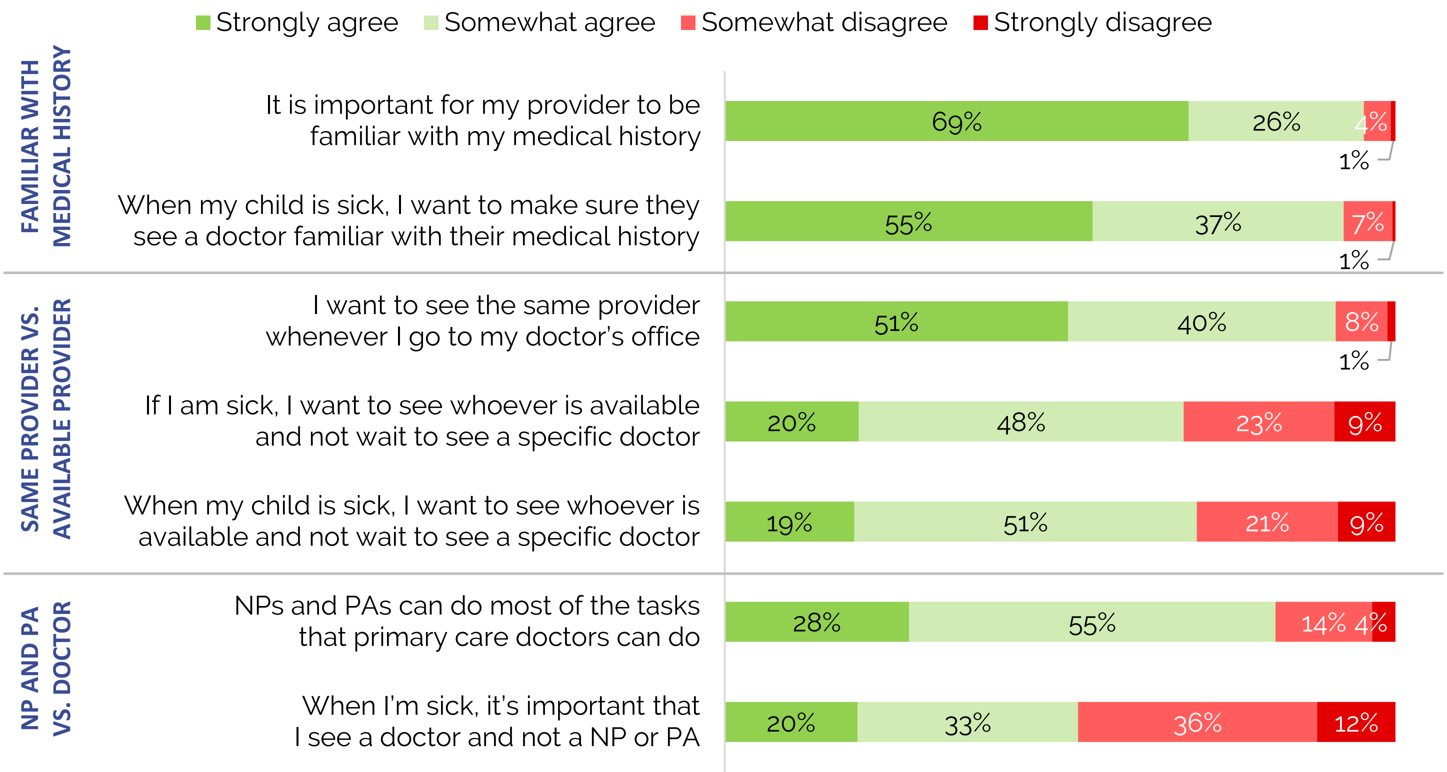
However, consumers also agree that they would rather see an available provider instead of waiting to see a specific provider when they are sick (68%) or when their child is sick (70%).

CONSUMERS BELIEVE NPs / PAs CAN DO THE SAME TASKS AS DOCTORS BUT ARE SPLIT ON WHICH THEY WOULD PREFER TO SEE WHEN SICK

Consumers were also asked about their opinions on seeing a nurse practitioner (NP) or physician assistant (PA) rather than a doctor.

A vast majority of consumers “strongly agree” or “somewhat agree” that NPs and PAs can perform most of the same tasks as primary care doctors (83%). Despite that opinion, half of consumers still agree it is important to see a doctor rather than a NP or PA when they are sick (53%).

Please indicate whether you agree or disagree with each of the following statements:



CONSUMERS PREFER TO VISIT THEIR PERSONAL DOCTOR'S OFFICE OVER A CLINIC IN A PHARMACY OR STORE

Consumers were asked about their preferences for visiting their personal doctor's office versus visiting a clinic in a pharmacy or store for a variety of medical circumstances.

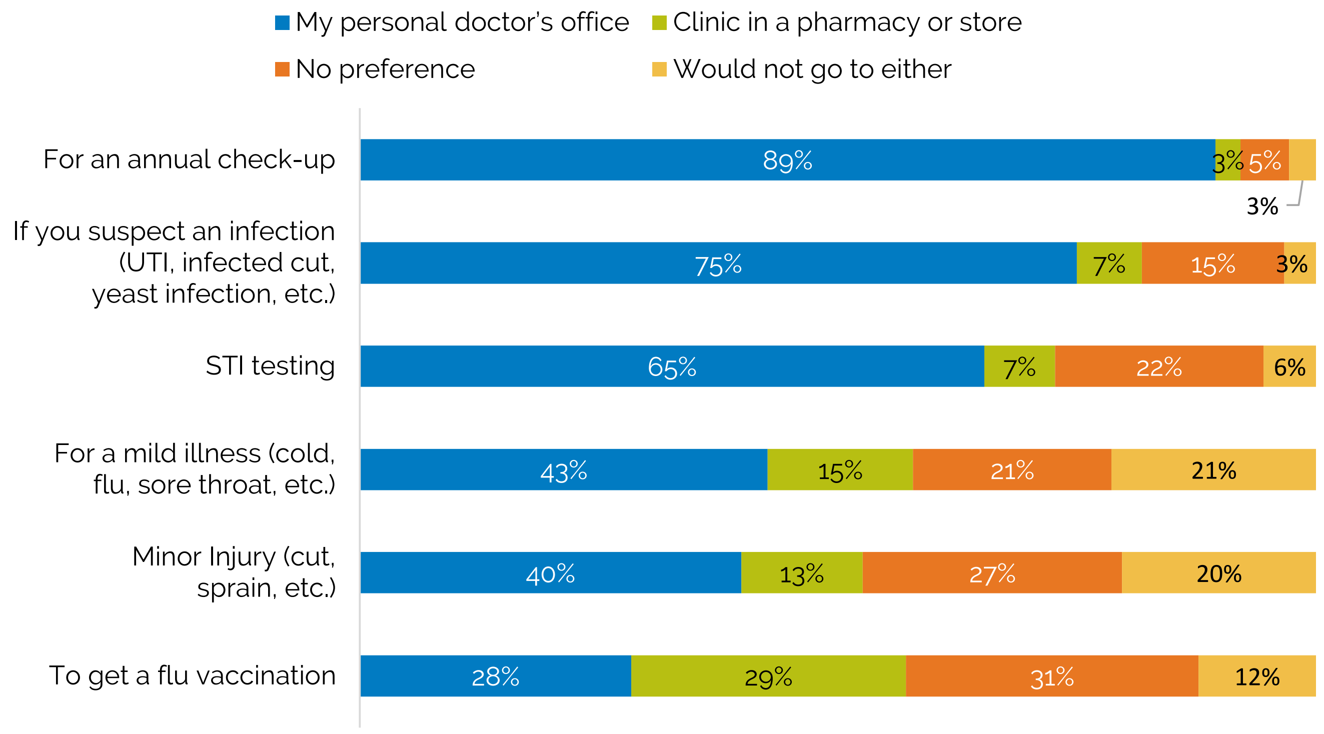
A majority of consumers prefer to visit their personal doctor's office for their annual check-up (89%), for a suspected infection (75%) and for STI testing (65%). While fewer, most consumers still prefer to visit their personal doctor's office for mild illnesses (43%) and minor injuries (40%).

In all those circumstances, only a small number of consumers indicate that they would prefer to visit a clinic in a pharmacy or store (range of 3% to 15%). Consumers are more likely say they have no preference (range of 5% to 31%) than saying they prefer to visit a clinic in a pharmacy or store (range of 3% to 29%).

The one difference was for flu vaccinations: around the same number of consumers prefer to get their flu shot at their personal doctor's office (28%) and at a clinic in a pharmacy or store (29%). Another third of consumers have no preference on where to go for flu vaccinations (31%).

In a few circumstances, a sizable number of consumers indicate that they would not go to either their personal doctor's office or a clinic in a pharmacy or store. A fifth of consumers would not visit either place for mild illnesses (21%) or minor injuries (20%). A smaller portion of consumers would also not visit either place for flu vaccinations (12%).

Please indicate whether you would prefer to visit your personal doctor's office or a clinic in a pharmacy or store in each of the following circumstances:



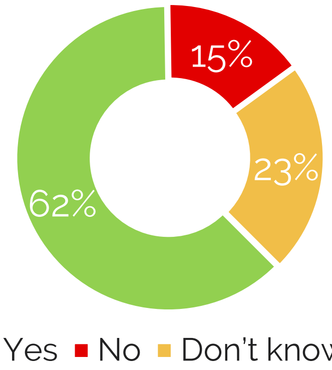
TELEMEDICINE PORTALS

THE MAJORITY OF CONSUMERS HAVE ACCESS TO AN ONLINE PORTAL, BUT MANY DO NOT CHOOSE TO USE IT

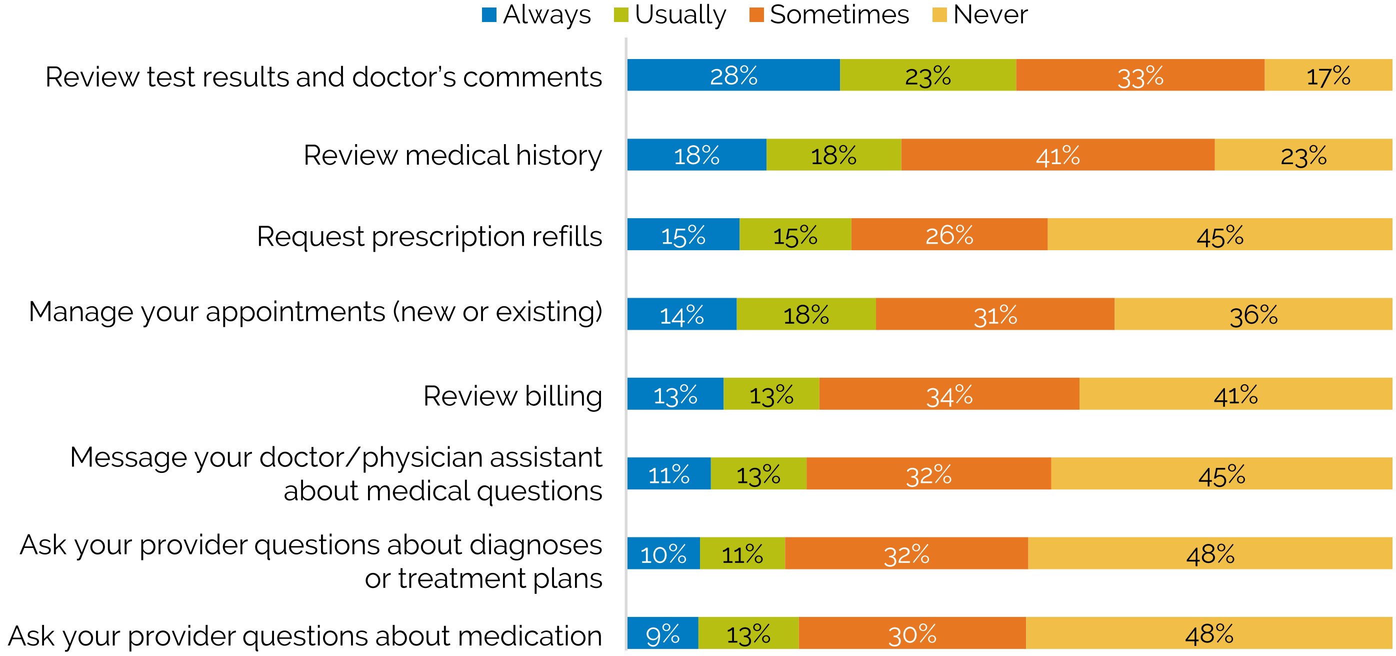
Consumers were asked about their experience using telemedicine portals—platforms (such as secure online websites or mobile apps) that give patients 24-hour access to their health information. A majority of consumers say that their doctor provides access to an online portal or app that they can use to access their health information (62%). A small number say that their doctor does not provide an online portal (15%), while the rest did not know if their doctor provided one or not (23%).

While most consumers have access to an online portal, fewer actually use it to access their health information. Only around a fifth up to half of consumers indicate that they "Always" or "Usually" use the online portal for any reason (range of 21% to 51%). Additionally, a large portion of consumers never use the online portal for any reason (range of 17% to 48%). The most common reasons consumers use the online portals are to review their test results and doctor's comments, review their medical history, request prescription refills and manage their appointments.

Does your doctor provide you with an online portal or an app that you can use for accessing your health information?



Please indicate how often you use your healthcare provider's online portal for each of the following:



DISPARITIES AND DISCRIMINATION

CONSUMERS' OPINIONS ON RACIAL QUALITY OF CARE DISPARITIES LARGELY VARY BASED ON CONSUMERS' RACE AND ETHNICITY

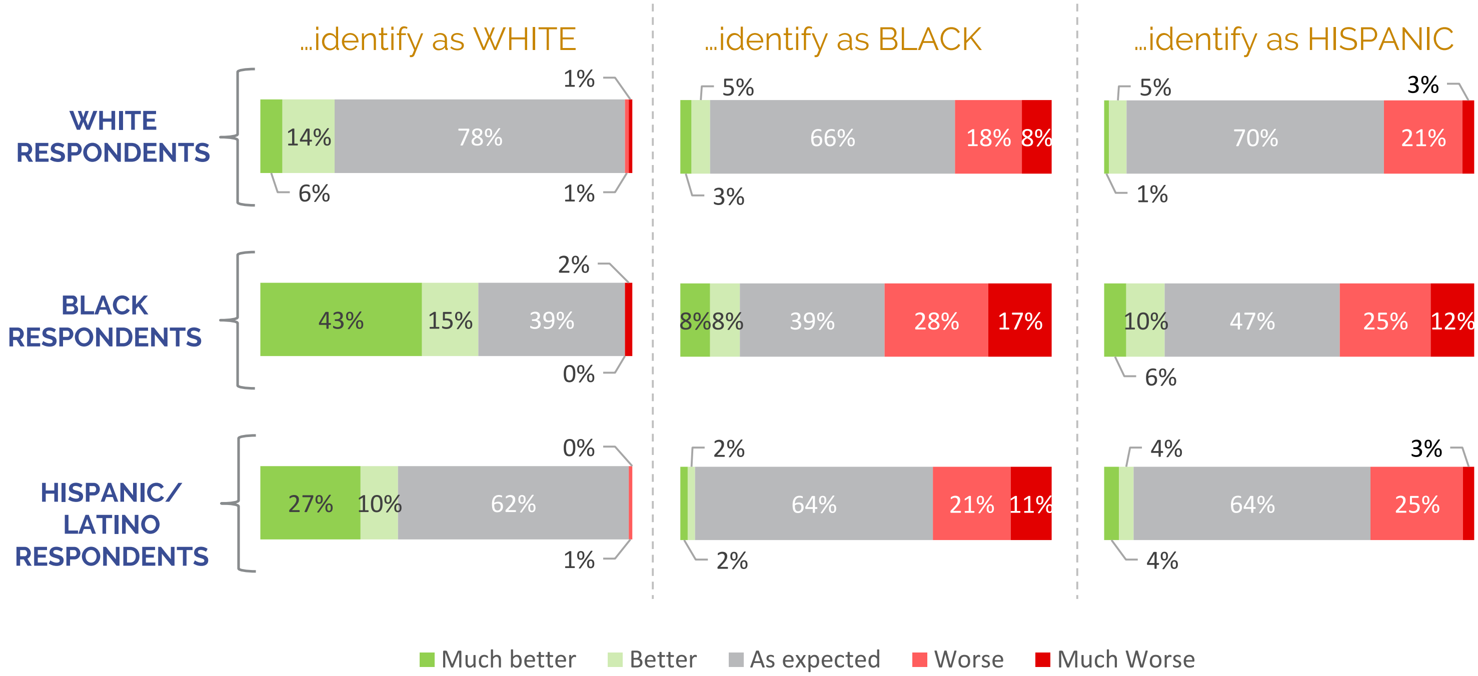
Consumers were asked their opinion on if quality of care differs between different groups of people.

When rating the quality of care provided to White people, White consumers are most likely to believe that White people receive care "as expected" (78%). Only 20% of White consumers believe White people receive "better" or "much better" care compared to other groups of people. Conversely, a majority of Black consumers (58%) and over a third of Hispanic/Latino consumers (37%) believe that White people receive "better" or "much better" care.

Only 1-2% of consumers in all three groups believe that White people receive "worse" or "much worse" care, while 24-45% of consumers believe Black and Hispanic/Latino people receive "worse" or "much worse" care. However, around two-thirds of White (66%) and Hispanic/Latino consumers (64%) believe that Black people receive care "as expected," while fewer Black consumers (39%) hold the same opinion.

Similarly, White (70%) and Hispanic/Latino (64%) consumers are more likely than Black consumers (47%) to believe that Hispanic/Latino people receive care "as expected." Black consumers (37%) were also slightly more likely than White (24%) and Hispanic/Latino (28%) consumers to believe that Hispanic/Latino people receive "worse" or "much worse" care.

To what extent do you think the quality of care provided is better or worse than it should be for people who...



MOST CONSUMERS BELIEVE MEN AND WOMEN RECEIVE SIMILAR QUALITY OF CARE

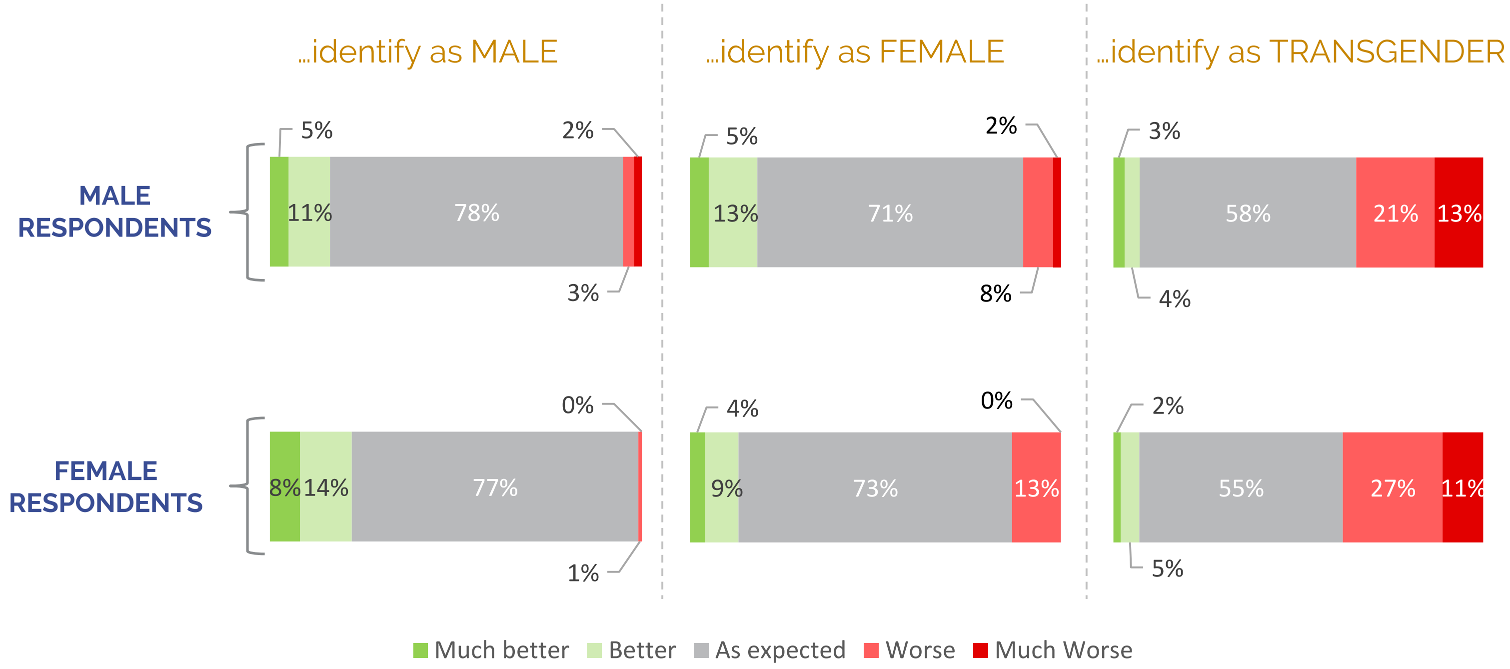
A large majority of both male and female consumers believe men and women receive care "as expected" (range of 71% to 78%). A small number of male (10%) and female (13%) consumers believe that women receive "worse" or "much worse" care.

Interestingly, male and female consumers are each slightly more likely to believe the opposite gender receives better care. Female consumers (22%) are slightly more likely than male consumers (16%) to say that men receive "better" or "much better" care, while male consumers (18%) are slightly more likely than female consumers (13%) to say that women receive "better" or "much better" care.

OVER A THIRD OF CONSUMERS BELIEVE TRANSGENDER PEOPLE RECEIVE WORSE CARE

While over half of male (58%) and female (55%) consumers believe that transgender people receive care "as expected," over a third of male (34%) and female (38%) consumers say that transgender people receive "worse" or "much worse" care.

To what extent do you think the quality of care provided is better or worse than it should be...



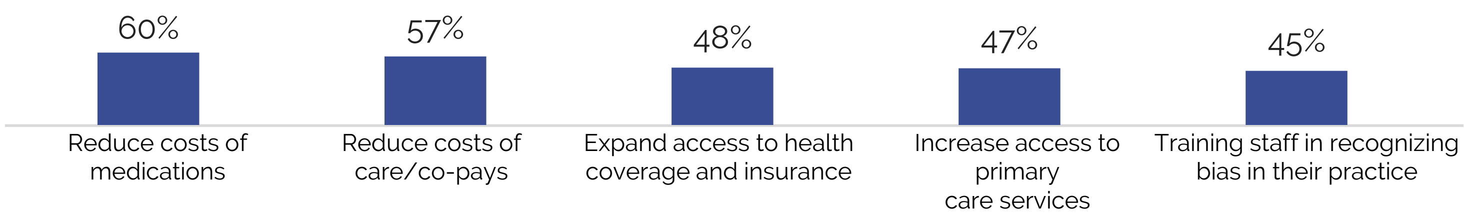
MINORITY CONSUMERS REPORT MORE PERSONAL EXPERIENCES WITH DISCRIMINATION IN HEALTHCARE

When asked about personal experiences with discrimination and prejudice during healthcare encounters, most consumers across all groups stated that they "never" or "rarely" experience discrimination. However, the groups most likely to say that they "sometimes" or "often" experience discrimination in healthcare are Black (35%), Hispanic/Latino (24%), and other minority consumers (range of 18% to 21%), as well as gay/lesbian/bisexual consumers (19%).

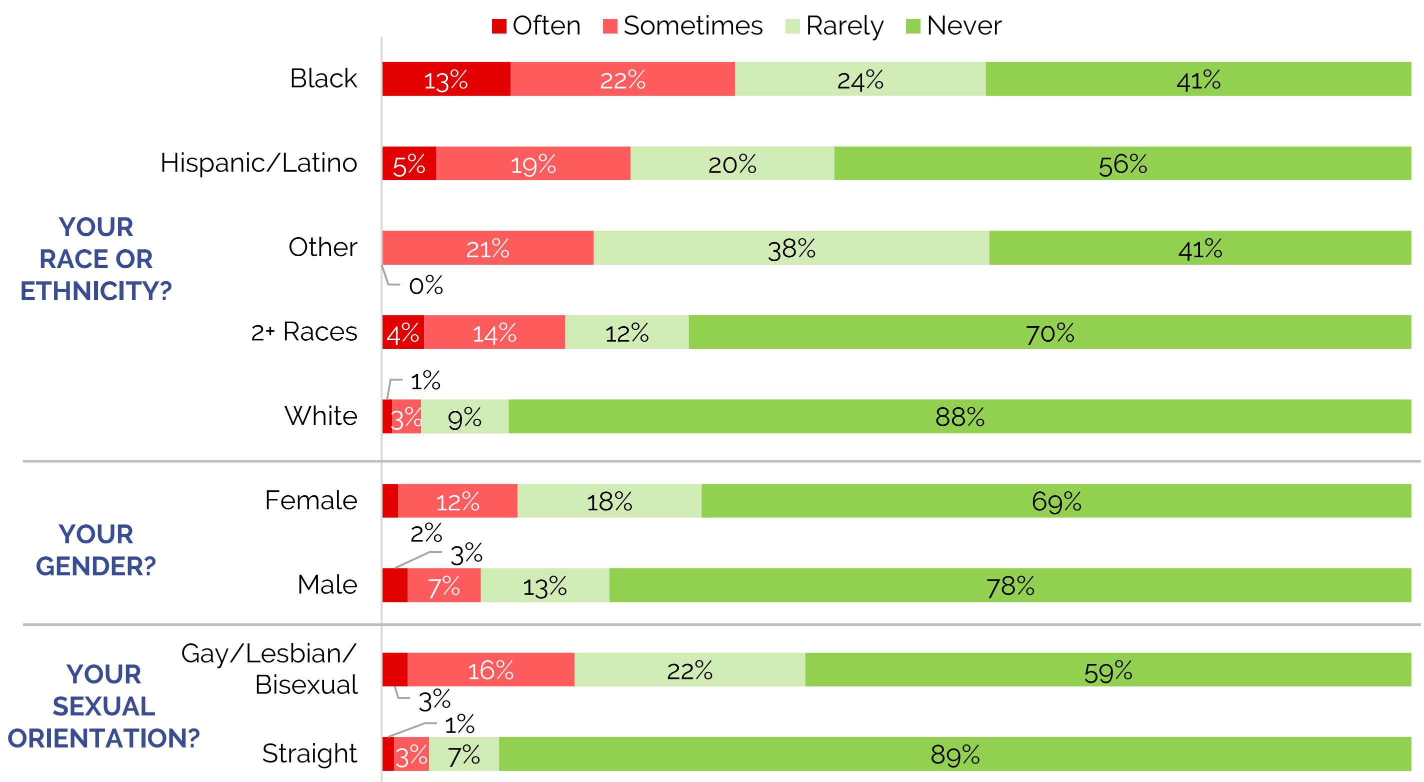
REDUCING HEALTHCARE COSTS WILL HELP ENSURE HIGH-QUALITY CARE FOR EVERYONE

Consumers believe reducing medication costs (60%) and other healthcare costs (57%) will be most helpful for ensuring everyone receives high-quality care. Expanding access to insurance (48%) and basic healthcare services (47%) as well as training healthcare staff in how to recognize and address bias (45%) were also selected by many consumers.

What should be done so that everyone receives high-quality of care regardless of identity?



How often, if ever, have you personally experienced discrimination or prejudice in your healthcare encounters based on...



TAKEAWAYS

The Beryl Institute - Ipsos PX Pulse continues to put consumer voices and the human experience at the forefront of healthcare discussions. This publication shares a number of significant new consumer insights for the industry:

- Consumers are engaging in less healthcare activities overall, with the largest drop seen for primary care provider visits (-26% since the first PX Pulse release).
- Despite lower engagement in healthcare activities, consumers remain positive about overall healthcare quality (58%) and their own care experiences (74%).
- While costs remain among the most important healthcare issue for consumers, having access to quality hospitals and treatments has seen a surge in importance from last quarter (+5%).
- Consumers continue to say that patient experience is either “very important” or “extremely important” (94%), They are also more likely than last quarter to say that they want to be treated with respect (+6%)
- Consumers report that having open access to their medical records (66%) and partnering with their healthcare provider on decisions related to their plan of care (55%) reflects meaningful participation in care experiences.
- Over half of the consumers reported feeling “extremely comfortable” or “very comfortable” visiting their primary care provider, specialist provider or a lab during the pandemic (54%-61%).
- Consumers say that stricter adherence to mask policies and increased testing for COVID-19 will make them feel more comfortable seeking healthcare services.
- Consumers hold a more negative view of government leaders due to COVID-19. In contrast, consumer views remained relatively neutral for primary care providers and hospitals.
- Consumers agree that they would rather see an available provider instead of waiting to see a specific provider when they are sick (68%) or when their child is sick (70%).
- The vast majority of consumers “strongly agree” or “somewhat agree” that NPs and PAs can perform most of the same tasks as primary care doctors (83%).
- Consumers prefer to visit their personal doctor’s office for their annual check-up (89%), for a suspected infection (75%) and for STI testing (65%) over a clinic in a pharmacy or store.
- The majority of consumers indicate that their doctor provides access to an online portal/app that they can use to access their health information (62%). A small number said that their doctor does not provide an online portal (15%).
- The majority of Black consumers (58%) and over a third of Hispanic/Latino consumers (37%) believe that White people receive “better” or “much better” care. Black consumers believe (58%) that Black people receive ‘worse’ or ‘much worse’ care, while Hispanic/Latino consumers (28%) say the same about Hispanic/Latino people.
- The majority of both male and female consumers believe that men and women receive care “as expected” (range of 71% to 78%). A small number of male (10%) and female (13%) consumers believe that women receive “worse” or “much worse” care.
- Over a third of male (34%) and female (38%) consumers say that transgender people receive “worse” or “much worse” care.
- Black (35%), Hispanic/Latino (24%) and other minority consumers (range of 18% to 21%), as well as gay/lesbian/bisexual consumers (19%) say they experienced discrimination in their healthcare encounters.

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