

BURDA ON HEALTHCARE

Patients Are Telling You What They Want, But Are You Listening?

By David Burda

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Patients are just like customers in any other industry. They want the same things. They want a good product. They want good service. And they want both of those things at a reasonable price. It's really not that complicated, but too many payers and providers still don't — or refuse to — grasp the concept.

I was reminded of that recently when my mom, an 83-year-old who lives by herself but who no longer drives, asked me to take her to her local Walgreens pharmacy to pick up one of her prescriptions. I said, "Sure, I'll come by a little later, and we'll go through the drive-through window." She said, "Great, you are the world's best son (I added that part), but we can't go at noon. The drive-through pharmacy pick-up window is closed from 12 to 1 for lunch."

Now, if you work from home like I do, you know that if you have errands to run during the day, you run them between 8 a.m. and 10 a.m. (after morning school and work traffic) or between 3 p.m. and 5 p.m. (after school traffic but before work traffic) if you want to complete your errands efficiently.

You never, ever run your errands between 10 a.m. and 3 p.m. because that's when all the seniors are out running their errands, and I use that term "running" loosely. If you try to run your errands at the same time, it will take you three times



as long, and there's no way you're getting any work done that day. Have you ever been behind three seniors ordering lunchmeat at a deli counter? As my brother-in-law once said, he puts more meat on one sandwich than the six different types of deli meat that an 80-year-old orders for a week.

From noon to 1 p.m. is prime time for seniors to pick up their prescriptions from their local pharmacy. Yet, it's when the pharmacists at my mom's local pharmacy close the drive-through window, take their lunch break (probably to eat a big sandwich) and shut down for an hour. Talk about not having a clue about what your customers want.

In that spirit, I'm going to review some recent polls, research and surveys in which consumers tell payers and providers what they want. It might be good business to listen to what they're saying.



In October, National Public Radio, the Harvard T.H. Chan School of Public Health and the Robert Wood Johnson Foundation released the results of their joint survey of 3,616 U.S. adults age 18 or older that they conducted for their Household Experiences in America During the Delta Variant Outbreak report. You can download the 47-page report [here](#).

Here's what the respondents said about telehealth:

- 42 percent said they had a telehealth visit with a provider because they couldn't see their provider in person.
- 82 percent said they were "completely" or "somewhat" satisfied with their telehealth visit.
- But 64 percent said they would have preferred to see their provider in person.
- 84 percent said the government should require health insurers to cover telehealth visits.
- But that percentage drops to 49 percent if it means paying higher premiums.

What customers are saying: Telehealth visits are a nice to have when there's no other choice, but I'm not going to pay more for them even if I like them.

Also, in October, PhRMA, big pharma's trade association, released the results of its patient experience survey of 4,765 U.S. consumers age 18 and older for the association's Barriers to Health Care Access in the Patient Experience report. You can download the 18-page report [here](#).

Here's what the respondents said about their experiences with the current system:

- 76 percent said they were satisfied with the care that they receive.
- And 70 percent said that they can access the care that they need.
- But 31 percent said their current out-of-pocket medical costs are "unworkable" for their household budget.
- 21 percent said they had problems paying their medical bills and expenses over the past year.
- And 13 percent said they regularly skip need medical care because they can't afford it.

What customers are saying: It's a great healthcare system for those who can afford it. But until you make it more affordable for me, I'll have to make some tough choices for me and my family.

Also, in October, which seems to be a popular month for trying to find out what healthcare consumers think, Kyruus released the results of its survey of 1,000 healthcare consumers for the provider search and scheduling platform company's fifth annual Patient Access Journey Report. You can download the 12-page, 2021 report [here](#).

Here's what the respondents ranked as "extremely important" criteria when selecting a provider:

- 77 percent said "accepts my insurance."
- 55 percent said "clinical expertise on my condition."
- 48 percent said "reputation of the hospital or health system."
- 44 percent said "appointment availability."
- 40 percent said "location."
- 38 percent said "cost."
- 34 percent said "quality of online patient ratings and reviews."
- 19 percent said "offers virtual visits."
- 18 percent said "offers online scheduling."

What customers are saying: My out-of-pocket costs, i.e., affordability, eclipse pretty much everything else, even the clinical expertise and reputation of a provider.

In September, Huron Consulting released the results of a survey of 1,601 consumers that it conducted for its Healthcare 2021 Consumer Market Report. You can download the 12-page report [here](#).

Here's what the respondents said about their current and future providers:

- 75 percent said they were satisfied with their care from their current provider.
- But 60 percent said they would be willing to switch providers for the right reasons.

Of those respondents who said they would be willing to switch, here's why they said they would make a change in who they see for their care:

- 56 percent said more trust and respect of the provider.
- 46 percent said lower cost.
- 44 percent said closer location.
- 40 percent said shorter wait times.
- 35 percent said virtual care.

What customers are saying: Loyalty only goes so far. I like my hospital and doctor, but I'd be willing to switch for better care, better service and lower costs.



Also, in September, J.D. Power released the results of its survey of 4,676 healthcare customers that it used for its 2021 U.S. Telehealth Satisfaction Study. You can learn more about the study [here](#).

Here's what the respondents said about their experiences with telehealth visits and companies.

The top three reasons they said they used a telehealth service were:

- Convenience (57 percent).
- Ability to receive care quickly (47 percent).
- Safety (36 percent).

The top four barriers that they encountered with using a telehealth service were:

- Limited services (24 percent).
- Lack of awareness of costs (15 percent).
- Confusing technology requirements (15 percent).
- Lack of information about providers (15 percent).

What customers are saying: I'm willing to use virtual care when it fits my needs, but you better make it clear who I'm seeing, how much it costs and how I use your technology.

PATIENTS WANT WHAT EVERYBODY WANTS

Like I said at the top, patients are like customers in any other industry. They want a product that works. They want great service. And they don't want to overpay for what they get.

It really isn't that complicated. All payers and providers have to do is start listening.

Thanks for reading.

AUTHOR



Dave Burda began covering healthcare in 1983 and hasn't stopped since. Dave writes his own column, "Burda on Health," for us, contributes to the weekly 4Sight Health blog and manages our weekly e-newsletter, 4sight Friday. Dave believes that healthcare is a business like any other business, and customers—patients—are king. If you do what's right for patients, good business results will follow.

Dave's personnel experiences with the healthcare system both as a patient and family caregiver have shaped his point of view. It's also been shaped by covering the industry for 35 years as a reporter and editor. He worked at Modern Healthcare for 25 years, the last 11 as editor.

Prior to Modern Healthcare, he did stints at the American Medical Record Association (now AHIMA) and the American Hospital Association. After Modern Healthcare, he wrote a monthly column for Twin Cities Business explaining healthcare trends to a business audience, and he developed and executed content marketing plans for leading healthcare corporations as the editorial director for healthcare strategies at MSP Communications.

When he's not reading and writing about healthcare, Dave spends his time riding the trails of DuPage County, IL, on his bike, tending his vegetable garden and daydreaming about being a lobster fisherman in Maine. He lives in Wheaton, IL, with his lovely wife of 35 years and his three children, none of whom want to be journalists or lobster fishermen.

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