Consumer Views of Care Management: Preview of 2009 Survey of US Health Care Consumers
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Model: Behaviors, attitudes and unmet needs in six zones of consumerism were the focus of the 2009 survey.

Consumers are typically referred as “patients” in context of traditional services…

“enrollees” in health insurance….

“clients” in wellness and Alternative settings…

“voters” in health policy..

“users” when searching for information.
2009: Most consumers believe the U.S. health care system is complicated, expensive, wasteful, and under-performing

- Most consumers (73%) are confused about how the U.S. health care system works
- Most (94%) believe health care costs are a threat to their personal financial security (regardless of the insurance they have/don’t have or their health status)
- Over half (52%) believe 50% or more of the dollars spent on health care in the U.S. are wasted
- Most believe the system is performing poorly: 20% give it an A or B vs. 38% who grade it D or F

2008/2009: The US health care consumer market is not homogenous: six segments differ in their level of activism, with 7 of 10 wanting improvements

<table>
<thead>
<tr>
<th>Factor</th>
<th>Content &amp; Compliant</th>
<th>Sick &amp; Savvy</th>
<th>Online &amp; Onboard</th>
<th>Shop &amp; Save</th>
<th>Out &amp; About</th>
<th>Casual &amp; Cautious</th>
</tr>
</thead>
<tbody>
<tr>
<td>Segment size</td>
<td>29%</td>
<td>24%</td>
<td>8%</td>
<td>2%</td>
<td>9%</td>
<td>28%</td>
</tr>
<tr>
<td>System use</td>
<td>Medium</td>
<td>Highest</td>
<td>High</td>
<td>Medium</td>
<td>Medium</td>
<td>Lowest</td>
</tr>
<tr>
<td>Preferences regarding care</td>
<td>Traditional</td>
<td>Traditional</td>
<td>Traditional, but open to non-conventional settings</td>
<td>Traditional, but open to alternative and non-conventional settings</td>
<td>Alternative approaches and non-conventional settings</td>
<td>Disengaged, but currently leans toward traditional</td>
</tr>
<tr>
<td>Dependence on providers</td>
<td>Accepts what doctor recommends</td>
<td>Takes charge of own care</td>
<td>Leans toward relying on self</td>
<td>Leans toward allowing doctor to make decisions</td>
<td>Makes own decisions/independent</td>
<td>Leans toward relying on self</td>
</tr>
<tr>
<td>Compliance with treatment</td>
<td>Most compliant</td>
<td>Compliant</td>
<td>Compliant</td>
<td>Less compliant</td>
<td>Least compliant</td>
<td>Less compliant</td>
</tr>
<tr>
<td>Satisfaction with providers and plans</td>
<td>Most satisfied</td>
<td>Satisfied</td>
<td>Satisfied</td>
<td>Less satisfied</td>
<td>Least satisfied</td>
<td>Less satisfied</td>
</tr>
<tr>
<td>Other important distinctions</td>
<td>Less likely to seek information; less likely to use value-added services; least interested in shopping for and customizing insurance</td>
<td>Seeks information; sensitive to quality; uses some value-added services; wants to shop for and customize insurance</td>
<td>Seeks information; uses online tools the most; sensitive to quality; maximizes use of value-added services</td>
<td>Makes changes to insurance; price-sensitive; uses value-added services; most likely to travel for care</td>
<td>Seeks information; sensitive to quality; uses some value-added services; wants to shop for and customize insurance</td>
<td>Price-sensitive; unprepared financially for future needs; less likely to seek information; less likely to use value-added services</td>
</tr>
</tbody>
</table>
1 in 5 participated in a wellness program last year (up from 2008); more than half say they would if given a financial incentive

- Participation is higher among consumers with employer-based insurance (23%) and lower among the uninsured (8%) and consumers with individual plans (9%)
- Seniors (15%) and Gen Y (17%) are less likely than Boomers (20%) and Gen X (20%) to report participating in wellness programs
- Current participation rates are similar between consumers who have one or more chronic conditions (18%) vs. those who do not (20%), but interest in doing so (if it cost nothing) is higher among those with chronic conditions (62% vs. 56%)
2 in 3 smokers tried to stop in the last year; 1 of 3 alcohol users tried to reduce consumption

Percentage of Users Who Tried to Reduce Their Use of Alcohol or Tobacco in the Last 12 months

- Tried to reduce use of tobacco/cigarettes: 66%
- Tried to reduce use of alcohol: 38%

49% of the sample reported using tobacco/cigarettes in the last year
49% of the sample reported using alcohol in the last year

Deloitte's 2009 Survey of Health Care Consumers
Consumers generally feel they are in good health; 1 in 8 rate their health as fair or poor.
Consumers report more success in managing emotional well-being than physical well-being

Deloitte’s 2009 Survey of Health Care Consumers

Percentage Who Currently Put Effort Into Improving or Maintaining Health and Well-Being

- Feeling good emotionally/mentally: 54%
- Understanding health risks/preventing problems: 54%
- Being socially connected with others: 49%
- Managing symptoms of chronic condition: 46%
- Reducing stress: 44%
- Eating a healthy diet: 44%
- Improving sleep: 42%
- Managing weight: 39%
- Exercising: 35%

NOTE: Chart shows % who gave rating of 8, 9, or 10 on 10-point scale
Almost half express interest in resources to assist in healthier living

- Interest in these tools and programs is especially high among Medicaid enrollees
- Levels of interest among Gen Y, Gen X, Boomers, and Seniors are similar
- Consumers with one or more chronic conditions tend to be more interested in these services than consumers who have no chronic conditions
7 in 10 of consumers with chronic conditions say they follow their treatment regimen

How Closely Do You Follow, Adhere To, or Comply With the Treatment Regimen(s) for Your Chronic Condition(s)?

- Adherence increases with age: 48% of Gen Y, 60% of Gen X, 76% of Boomers, and 88% of Seniors report following their treatment regimen(s) closely
- Adherence is high among Medicare enrollees (85%), but low among uninsured (51%)
Consumers are willing to participate in chronic care management programs without financial incentives

- Participation is higher among Medicaid enrollees (43%) and dual eligibles (49%), but very low among the uninsured (13%)
- Boomers and Seniors report higher participation rates (35% and 24%) than Gen Y and Gen X (26% each)
3 of 5 say financial penalties would increase their adherence to their chronic treatment regimen

How Likely Would You Be To Comply With the Treatment Regimen Recommended by Your Doctor If You Would Be Required to Pay Higher Insurance Costs Otherwise?

- 9% not at all likely
- 3% extremely likely
- 3% extremely likely
- 4% extremely likely
- 6% extremely likely
- 5% extremely likely
- 8% extremely likely
- 14% extremely likely
- 18% extremely likely
- 31% extremely likely

Deloitte's 2009 Survey of Health Care Consumers

n = 2,192 respondents with one or more chronic conditions
Consumers want assistance in dealing with their health problems: coaching from their physician and nurses is optimal: only 1 of 5 sees value in support groups or alternative coordination roles

- Interest in these services and programs is especially high among Medicaid enrollees compared to the other insurance groups
- Consumers with one or more chronic conditions tend to be more interested in these services than consumers who have no chronic conditions
Key Themes: Consumerism in U.S. health care increasingly complex as behaviors, attitudes unmet needs vary widely

1. Health care is a consumer market. Costs, quality and service are important factors in purchasing, and satisfaction levels vary based on performance.

2. The market is not homogeneous: – there are six unique segments– 3 segments (19%) are activists, 2 segments (53%) are traditionalists, and 28% are disinterested.

3. Most consumers believe the U.S. health care system is complicated, expensive, wasteful, under-performing,

4. Health cost concerns are changing behaviors.

5. Consumers want holistic care and resources to pursue wellness and healthy living.

6. Consumers embrace innovations that enhance convenience & service (retail medicine, self-monitoring devices), control of their personal health information (personal health records), and insurance programs that are customized.

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