

HEALTHSPARQ®

What Do Consumers Want in HealthCare?

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HEALTHSPARQ'S MISSION

*Helping People Make
Smarter Health Care Choices*

LISTENING TO REAL CONSUMERS LEADS TO REAL RESULTS

- At HealthSparq, we believe products should evolve based on what real consumers need and want. That's why we created a robust user research program.
- We have worked with hundreds of people—gaining insights and building empathy.
- Let's talk about what we've learned!

WHAT HAVE WE LEARNED?

Key Insights from hundreds of conversations

PERSONAS AND ARCHETYPES

Personas

- Describe and represent members based on demographics, needs, and wants
- Differentiates segments
- Drives targeted communication
- Focuses organization on primary audiences and use cases
- No more than 3-5 are useful

Archetypes

- Describe and represent member needs, mind set, and tasks
- Differentiates based on haves and needs
- Drives use case development and product and service features
- Focuses on goals rather than demographics
- Needed when target audience is very broad

NEEDS AND GOALS: ARCHETYPES



One and Done



Repair and Recover

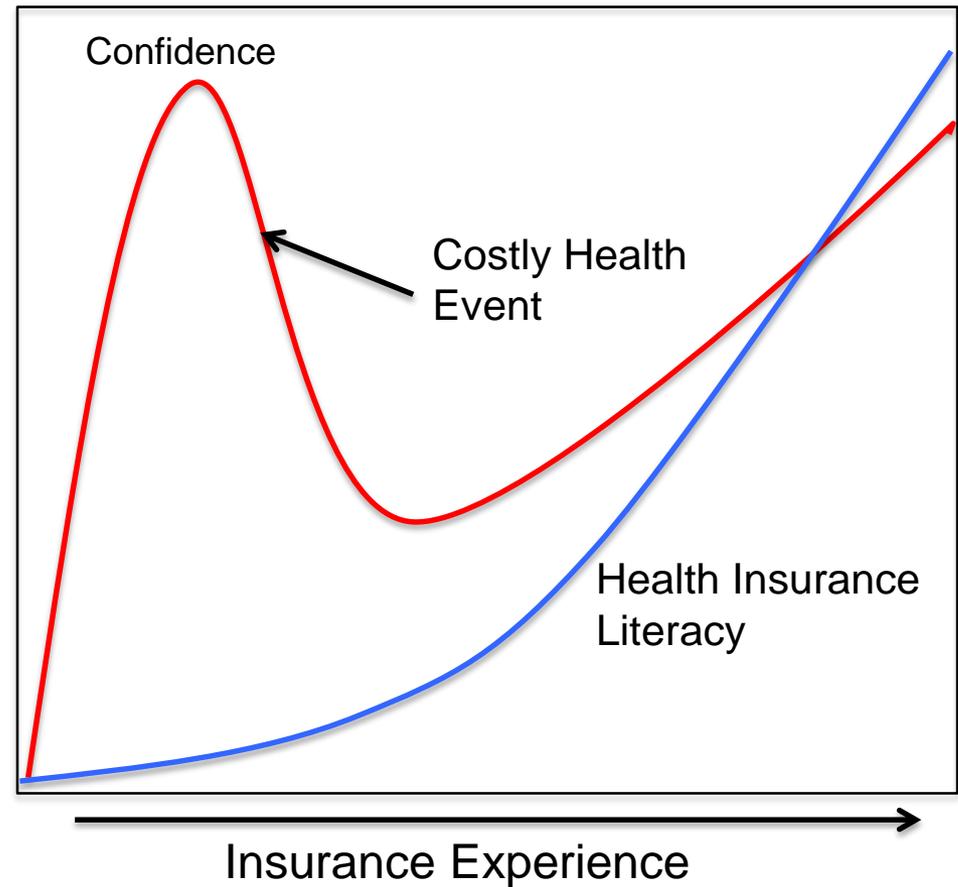


Chronic Experienced



KEY INSIGHT: CONSUMERS THINK THEY KNOW ABOUT INSURANCE UNTIL THEY DON'T

- Americans overestimate their understanding of their plan design and the rules to follow*
- But in fact, many people do not have the basic knowledge they need to make informed decisions about care (do not know what they do not know)
- Users value a clean and simple experience but do not expect anything health care or health plan related to be simple



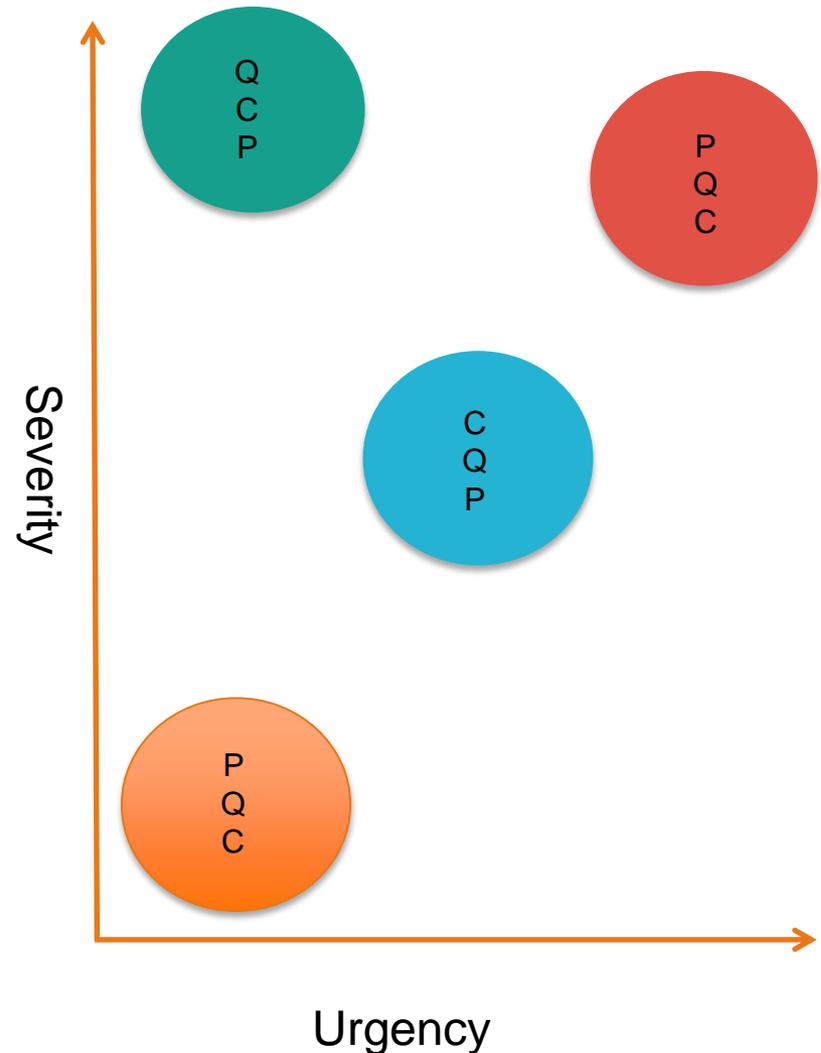
KEY INSIGHT: SELECTING A DOCTOR IS LIKE ONLINE DATING

- Users want as much detailed, personal information about potential doctors as possible (lots of photos, philosophy of care written in their own words, years of experience, areas of focus, etc.)
 - Users want to see what the doctor looks like, understand their values, and glimpse their style
- They want to hear from other people “like them” about the doctor and their experience
 - They want to see how close the doctor is to their profile
- Given that trial and error is still how most people select their doctor, users tell us they use qualitative, personal data to predict if seeing a specific doctor will be a good experience



KEY INSIGHT: WHAT IS IMPORTANT WHEN SELECTING CARE VARIES

- Users make their care choices based on a combination of these broad categories: Cost, Proximity, and Quality
- They weight them differently based on the type of care needed, and the severity and urgency of the condition
- Proximity: Address, Map
 - easiest to inform and is the foundational element for directories
- Cost: Plan, Network Status, Benefit Details, Service Price, Out of Pocket Cost
 - Variable, and can be challenging to present clearly
- Quality: Ratings, Reviews, Designations, Word of Mouth Recommendations
 - most challenging to provide and is where users rely on proxies that stand in for experience



KEY INSIGHT: SEEING COSTS FOR CARE STILL NOVEL

- Despite having more access, a majority of Americans do not expect to be able to find costs for medical services
- They have experience from provider directories viewing doctor and hospital location, plan participation and some quality information
 - Very little has prepared them for viewing, evaluating, and using medical service and treatment cost information
- They are usually surprised and delighted when they see costs – it is highly desired
 - However, having been surprised by costs in the past, users are somewhat skeptical of upfront prices
- Most assume the prices they see are averages that, unless overtly shown otherwise, have little to do with their personal reality
- Increasing the personalization of the numbers (my insurance plan, my numbers) increases the trust in their accuracy

KEY INSIGHT: TOO MANY NUMBERS = NUMBER SOUP

- Americans have very low numeracy. Most cannot easily and quickly make sense of a table of numbers.
 - They struggle to understand purpose of the numbers presented to make the story in the data come forward
 - Which makes understanding the appropriate choice or next action to take very difficult
- Data are useless without guidance, context, and highlighting appropriate associations
 - Do the math for them and tell them what good looks like
 - This means having a point of view
- Choices are only useful when there are highly discrete options.
 - Too many options with too little difference or too many variables is paralyzing



KEY INSIGHT: DON'T MAKE ME THINK

- Cognition has limits, and high emotion reduces capacity to process complex, high variable-laden decisions
 - Use 5 digits +/- 2 as a guide for chunking information
- People disengage and look for shortcuts when faced with large amounts of content and numbers
 - Plain Language helps, but alone it is not enough
- Consumers will not read, especially online and when they are trying to complete a specific task.
 - They skim, focus on images and use interface controls as guides.
- They will ignore messages that are not immediately relevant to them at the moment.
- You can't rely on training, or disclaimers to communicate complex, albeit important, information to consumers
 - User interface is like a joke, if you have to explain it, it isn't very good

SO WHAT CAN YOU DO NEXT?

- Bring consumers into your building
- Remember not everyone works in health care
- Use the “mom” test!
- Don’t assume they know

CONSUMER PANEL VIDEO

HEALTH CARE CONSUMER PANEL
#whatthehealthcare



Thanks!