



Summary & Chartpack

2008 Update on Consumers' Views of Patient Safety and Quality Information

October 2008

Methodology

The *2008 Update on Consumers' Views of Patient Safety and Quality Information* survey was conducted by telephone from July 29 to August 6, 2008, among a randomly selected nationally representative sample of 1,517 respondents 18 years of age and older. Interviews were conducted as part of the *Kaiser Health Tracking Poll: Election 2008* series. Telephone interviews were completed by Princeton Survey Research Associates. The margin of sampling error for the overall survey is plus or minus three percentage points. For results based on subsets of respondents the margin of error is higher. Note that sampling error is only one of many potential sources of error in this or any other public opinion poll.

This report draws data from a set of questions related to consumer quality information that the Kaiser Family Foundation has asked since 1996. Other polls cited in this report are:

- 2006: Kaiser Family Foundation/Agency for Healthcare Research and Quality *2006 Update on Consumers' Views of Patient Safety and Quality Information* (conducted August 3-8, 2006)
- 2004: Kaiser Family Foundation/Agency for Healthcare Research and Quality/Harvard School of Public Health *National Survey on Consumers' Experiences with Patient Safety and Quality Information* (conducted July 7-September 5, 2004)
- 2000: Kaiser Family Foundation/Agency for Healthcare Research and Quality *National Survey on Americans as Health Care Consumers: An Update on The Role of Quality Information* (conducted July 31-October 13, 2000)
- 1996: Kaiser Family Foundation/Agency for Healthcare Research and Quality *Consumer Information Survey* (conducted July 29-August 3, 1996)

SUMMARY OF FINDINGS

COMPARATIVE QUALITY INFORMATION AND COORDINATION OF CARE

Exposure to and use of quality information

The share of the public now saying they have seen and/or used information comparing the quality among various health care related providers has fallen back to levels last recorded in 2000. The vast majority of people say they have neither seen nor used comparative quality information. Together, this suggests that the challenge remains to get basic quality information developed by experts into broad use amongst the public. Furthermore, people report real difficulty in finding comparative costs related information that many believe would help patients become more cost-conscious consumers of health care.

- Three in ten (30%) Americans say that they have seen information comparing the quality of different health insurance plans, hospitals, or doctors in the past year. Around two in ten say they have seen information comparing the quality of health insurance plans (22%) or hospitals (20%). Fewer (12%) say they have seen information comparing the quality of doctors (Chart 1).
- The share of Americans who have seen comparative quality information in 2008 (30%) is somewhat lower than it was in 2006 (36%) and 2004 (35%), and roughly similar to the share seen in 2000 (27%). While similar shares as in previous years say they have seen information comparing the quality of doctors, smaller shares say they have seen information comparing the quality of health insurance plans and hospitals than in 2006. In 1996, reports of comparative quality information peaked among the public at 39 percent, driven almost entirely by reports of quality information related to comparing health plans. (Chart 1)
- Overall, around one in seven (14%) say they have seen and used information comparing the quality among different health insurance plans, doctors, or hospitals in the past year, down slightly from about one in five in 2006 (20%) and 2004 (19%). Specifically, fewer than one in ten Americans say they have seen and used information comparing the quality of health insurance plans (9%), hospitals (7%), or doctors (6%) in the past year to make health care related decisions. These shares are slightly smaller than they were in 2006 (Chart 2).
- People with more education are more likely to say they have seen and used comparative quality information (18% for college graduate; 17% for those with at least some college) than those with a high school degree or less (11%) (Chart 3).
- Just 6 percent say they have heard of the government website that compares hospital on quality of care ratings, www.HospitalCompare.gov (Chart 4).
- In addition to these reports of low exposure to comparative quality information, nearly two-thirds (64%) of Americans say that it is difficult to find information comparing the cost of different treatments and procedures offered by different doctors and hospitals (Chart 5).

Perceptions of Quality and Sources of Information for Choice of Providers

Fewer than half of the public perceive that there are “big” differences in quality among different health related providers, one of the basic underlying tenets that makes comparative quality information useful to decision-making. While the share of the public saying there are differences in quality of care increased between 1996 and 2000, it has fallen again in 2008. When it comes to sources of information in making choices about providers, many still favor familiarity over expert ratings, especially for doctor or hospital choices. However, across the 12-year period, there has been an overall increase in the share of those saying they would select health plans, surgeons, and hospitals based on expert ratings.

- Since 2000, there has been a decline in the share of Americans who say there are “big” differences in the quality of care among different health care providers. About four in ten say there are “big” differences in health plans (44%) and hospitals (41%), and three in ten perceive big differences in specialists (33%) and general practitioners (30%) (Chart 6).
- When faced with a choice between familiarity and ratings of different health care providers, a slim majority say they would be more likely to choose health plans (52%) based on high expert ratings versus recommendations by friends and family. Roughly even shares say they would choose a higher-rated surgeon (47%) or a surgeon who has been treated by friends or family (44%). When it comes to hospitals, however, a clear majority (59%) say they would choose a hospital that is familiar to them, rather than a higher-rated facility (35%) (Chart 7).
- There has been no meaningful change in these responses since 2004. However, across the 12-year trend, there has been an overall increase in the share of those saying they would select health plans, surgeons, and hospitals based on expert ratings (Chart 8).
- College educated Americans are more likely to say they would prefer health plans, surgeons, or hospitals with higher ratings than are those with a high school education or less, while those with less education are more likely to say they prefer familiarity than are those with a college education (Chart 9).
- In addition, over half of the public (53%) agrees that “employers are not good sources of information on the quality of insurance plans because they are mainly concerned with saving money on health benefits,” while one in three (36%) instead agree that “employers are good sources of information because they have already done the research comparing different health plans.” These shares are now roughly equal to those of 1996 (Chart 10).

Reported problems with coordination of care

Most people say that coordination among the different health professionals they see is a problem, with majorities saying they have had to wait longer than expected for test results and have seen a doctor who was missing some of their medical information.

- Two-thirds (67%) of the public says that coordination among different health professionals is a problem, including three in ten (30%) who say it is a “major” problem (Chart 11).
- Although there was a slight decrease in the share saying coordination of care is a problem between 2004 and 2006 (from 69% to 60%), in 2008, the share perceiving a problem returned to about the same level reported four years ago (67%) (Chart 11).

- More than one in five report that two specific problems with coordination of care happen “very” or “somewhat” often: having to wait for test results longer than they thought appropriate (24%) and seeing a health care professional who did not have all of their medical information (22%). About one in ten Americans report often having to wait for a health professional or return for another appointment because they did not have the appropriate medical information (13%) and being sent for duplicate medical tests (10%) (Chart 12).
- Though there was a slight decline in reports of experiencing specific problems with coordination of care between 2004 and 2006, in 2008, the shares reporting a problem returned to levels reported in 2004 (Chart 13).

Steps taken by individuals to improve coordination of care

Many people say they have taken steps on their own to help ensure the coordination of their health care.

- Over one-third (36%) say they or a family member have created their own set of medical records to ensure that their health care providers have all of their medical information (Chart 14).
- Many people also report taking specific steps that are in line with recommendations from experts to help ensure safer health care.¹ For example, at least four in ten say they have done each of the five things asked about (Chart 15):
 - Checked the medication that a pharmacist gave them with the prescription that their doctor wrote (70%);
 - Called to check on the results of a medical test they had done (64%);
 - Brought a list of all of the medications they were taking to a doctor’s appointment, including non-prescription drugs (59%);
 - Brought a friend or a relative to a doctor’s appointment so that they could help ask questions and understand what the doctor was telling them (47%);
 - Or told a doctor, nurse, or surgeon about any drug allergies when they did not ask for this information (40%).
- Since 2004, similar shares report doing two of the five specific actions, while reports of doing two of the other actions have increased, and reports of doing one of these actions have fallen (Chart 15).
 - The share saying they have ever checked the medication given to them by a pharmacist, or told a practitioner about a drug allergy has remained roughly the same since 2004.
 - The share saying they have brought someone with them to an appointment or brought a list of medications to an appointment has slowly increased since 2004.
 - The share saying they have called to check on test results has slightly declined since 2004.

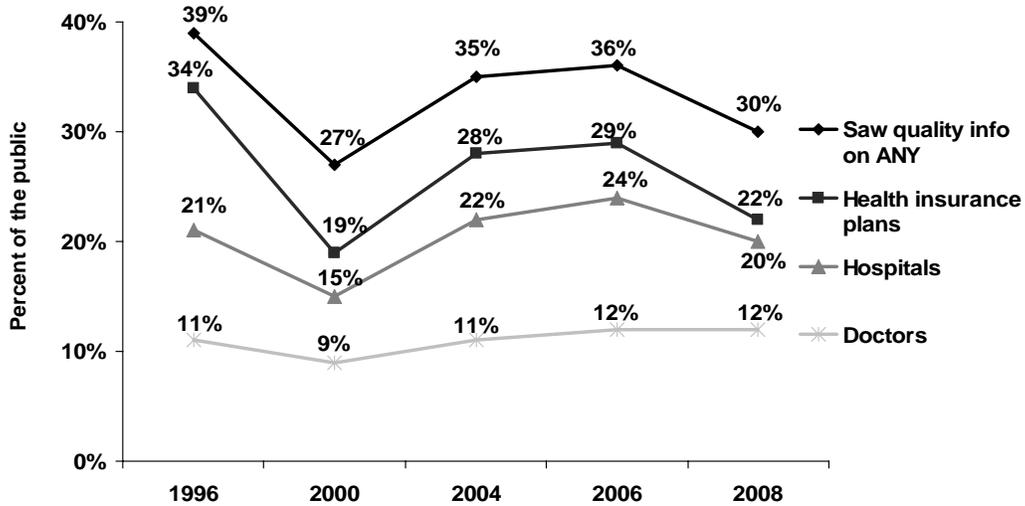
¹ See “Five Steps to Safer Health Care,” developed by the U.S. Department of Health and Human Services in partnership with the American Hospital Association and the American Medical Association (<http://www.ahrq.gov/consumer/5steps.htm>).

Exposure to and Use of Quality Information

Chart 1

Exposure to Comparison Quality Information

Percent who say they saw information in the past year comparing quality among each of the following:



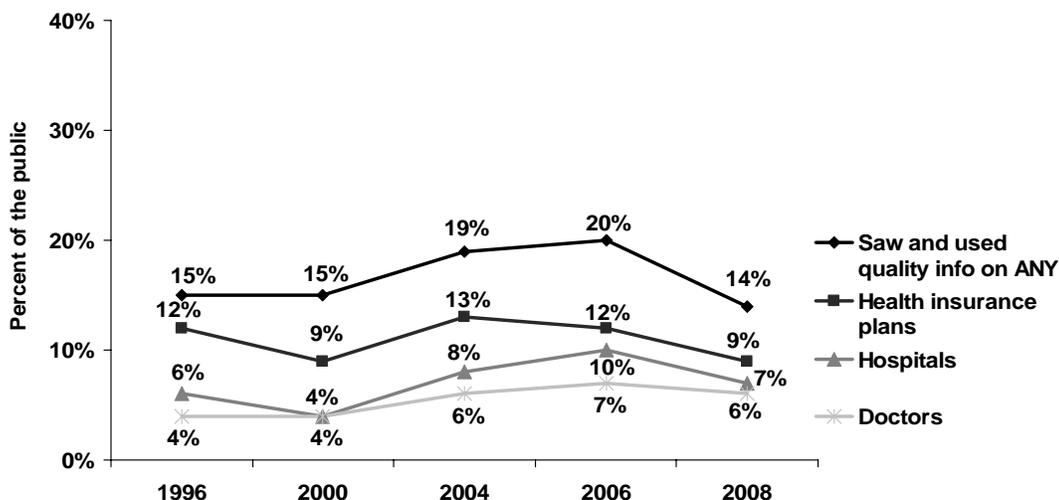
Sources: KFF 2008 Update on Consumers' Views of Patient Safety and Quality Information (Jul. 29-Aug. 6, 2008); KFF/AHRQ 2006 Update on Consumers' Views of Patient Safety and Quality Information (Aug. 3-8, 2006); KFF/AHRQ/Harvard School of Public Health National Survey on Consumers' Experiences with Patient Safety and Quality Information (Jul. 7-Sep. 5, 2004); KFF/AHRQ National Survey on Americans as Health Care Consumers: An Update on The Role of Quality Information (Jul. 31-Oct. 13, 2000); KFF/AHRQ Consumer Information Survey (Jul. 26-Sep. 5, 1996)



Chart 2

Exposure to and Use of Comparison Quality Information

Percent who say they saw information in the past year comparing quality among each of the following and used it to make health care decisions:



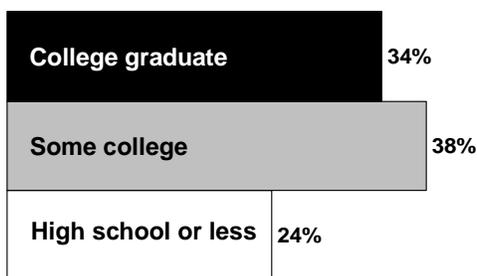
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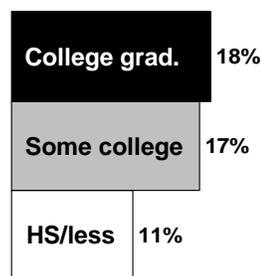
Chart 3

Exposure To And Use Of Comparison Quality Information, by Education Status

Percent who say they saw quality info on health insurance plans, hospitals, or doctors in the past year



Percent who say they saw quality info on health insurance plans, hospitals, or doctors in the past year and used it to make health care decisions



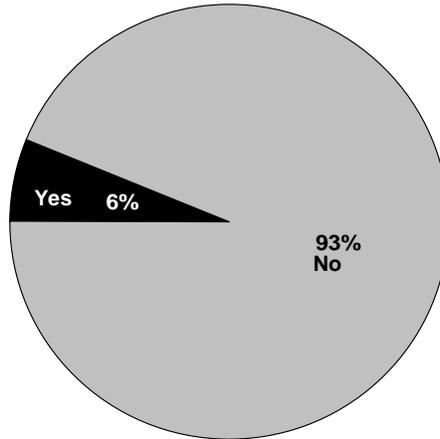
Source: KFF 2008 Update on Consumers' Views of Patient Safety and Quality Information (Jul. 29-Aug. 6, 2008)



Chart 4

New Government Website

Have you heard of the new government website, www.HospitalCompare.hhs.gov, that lets consumer compare hospitals, or not?



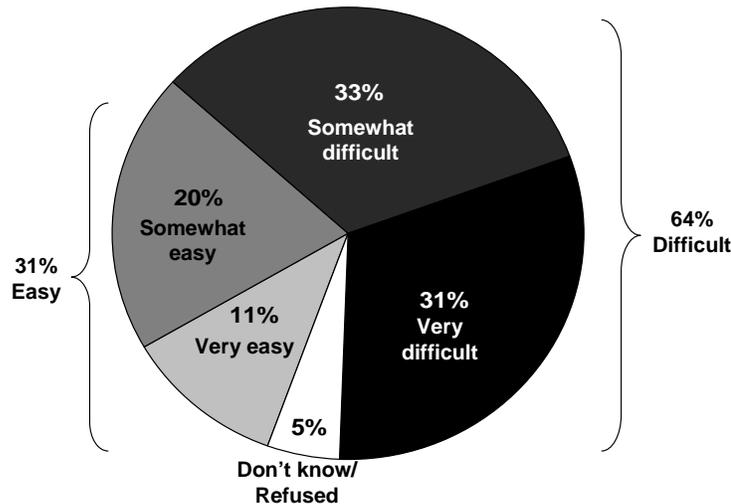
Source: KFF 2008 Update on Consumers' Views of Patient Safety and Quality Information (Jul. 29-Aug. 6, 2008)



Chart 5

Perceived Availability of Cost Comparison Information

In general, how easy or difficult would you say it is to find out how much medical treatments and procedures provided by different doctors and hospitals would cost you? Would you say it is very easy, somewhat easy, somewhat difficult, or very difficult?



Source: KFF 2008 Update on Consumers' Views of Patient Safety and Quality Information (Jul. 29-Aug. 6, 2008)

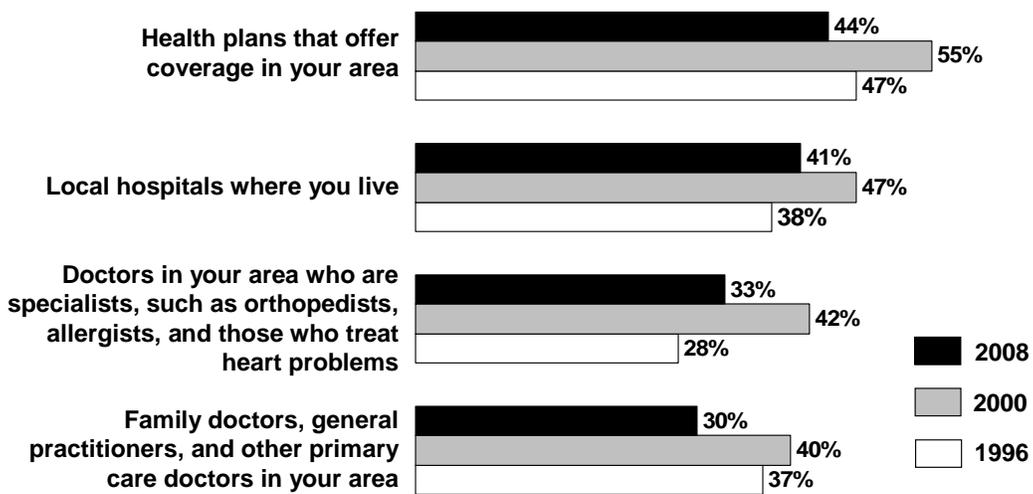


Perceptions of Quality and Sources of Information for Choice of Providers

Chart 6

Differences in Quality

Percent who say there are “big differences” in the quality of care among each of the following:



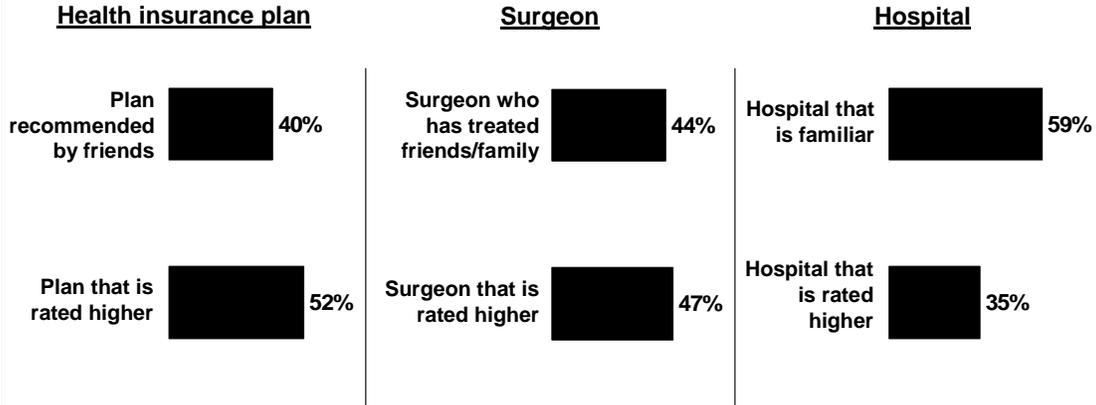
Sources: KFF 2008 Update on Consumers' Views of Patient Safety and Quality Information (Jul. 29-Aug. 6, 2008); KFF/AHRQ National Survey on Americans as Health Care Consumers: An Update on The Role of Quality Information (Jul. 31-Oct. 13, 2000); KFF/AHRQ Consumer Information Survey (Jul. 26-Sep. 5, 1996)



Chart 7

Familiarity vs. Ratings in 2008

Percent who say they would prefer a ...*



Note: "Don't know/Refused" responses not shown

*Full question wording: Suppose you HAD TO CHOOSE between two health plans. The first one is strongly recommended to you by friends and family, but the second one is rated much higher in quality by independent experts who evaluate plans. If the two plans cost the same, which would you be more likely to choose?

Suppose you HAD TO CHOOSE between two surgeons at a hospital. The first surgeon has treated a friend or family member without any problems, but his ratings aren't as high as those of other surgeons at the hospital. The second surgeon's ratings are much higher, but no one you know personally has ever been one of his patients. Which surgeon would you be more likely to choose?

Suppose you HAD TO CHOOSE between two different hospitals. The first one is the hospital you and your family have used for many years without any problems, but the second hospital is rated much higher in quality by the experts. Which hospital would you be more likely to choose?

Source: KFF 2008 Update on Consumers' Views of Patient Safety and Quality Information (Jul. 29-Aug. 6, 2008)

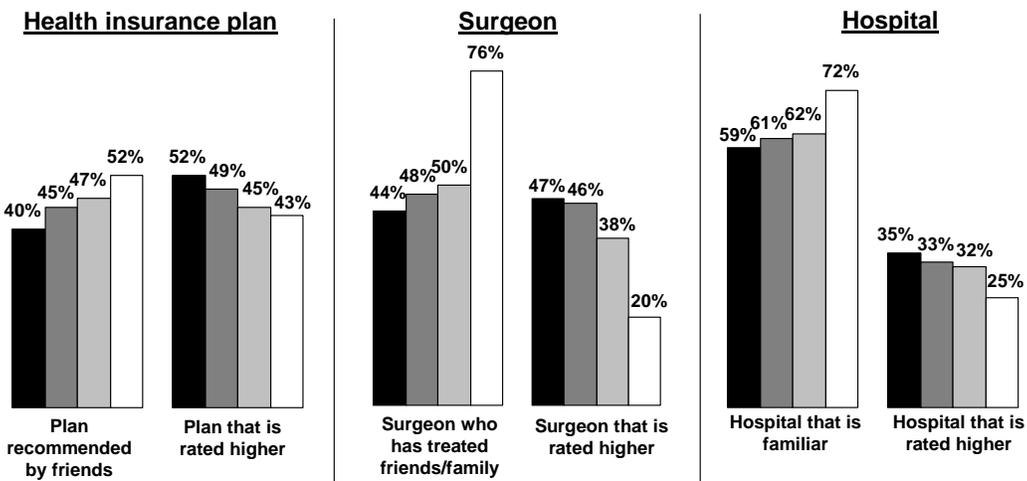


Chart 8

Trend, Familiarity vs. Expert Ratings in Provider Choices

Percent who say they would prefer a ...

■ 2008 ■ 2004 ■ 2000 □ 1996



Note: "Don't know" responses not shown. For full question wording, see Chart 7.

Sources: KFF 2008 Update on Consumers' Views of Patient Safety and Quality Information (Jul. 29-Aug. 6, 2008); KFF/AHRQ/Harvard School of Public Health National Survey on Consumers' Experiences with Patient Safety and Quality Information (Jul. 7-Sep. 5, 2004); KFF/AHRQ National Survey on Americans as Health Care Consumers: An Update on The Role of Quality Information (Jul. 31-Oct. 13, 2000); KFF/AHRQ Consumer Information Survey (Jul. 26-Sep. 5, 1996)



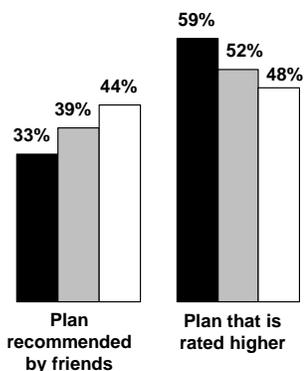
Chart 9

Familiarity vs. Ratings, by Education Status

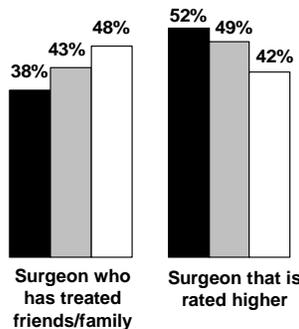
Percent who say they would prefer a ...

College graduate
 Some college
 High school or less

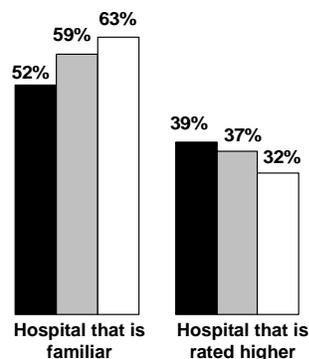
Health insurance plan



Surgeon



Hospital



Note: "Don't know/Refused" responses not shown. For full question wording, see Chart 7.

Source: KFF 2008 Update on Consumers' Views of Patient Safety and Quality Information (Jul. 29-Aug. 6, 2008)

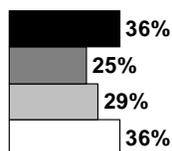


Chart 10

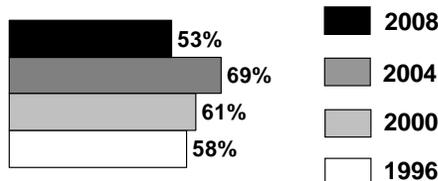
Employers as a Source of Information on Quality

Which comes closer to your view ...

Employers are a good source of information about the quality of different health plans because employers examine plans closely when deciding which ones to offer



Employers are not a good source because their main concern is saving the company money on health benefits



Note: "Don't know/Refused" responses not shown

Sources: KFF 2008 Update on Consumers' Views of Patient Safety and Quality Information (Jul. 29-Aug. 6, 2008); KFF/AHRQ/Harvard School of Public Health National Survey on Consumers' Experiences with Patient Safety and Quality Information (Jul. 7-Sep. 5, 2004); KFF/AHRQ National Survey on Americans as Health Care Consumers: An Update on The Role of Quality Information (Jul. 31-Oct. 13, 2000); KFF/AHRQ Consumer Information Survey (Jul. 26-Sep. 5, 1996)

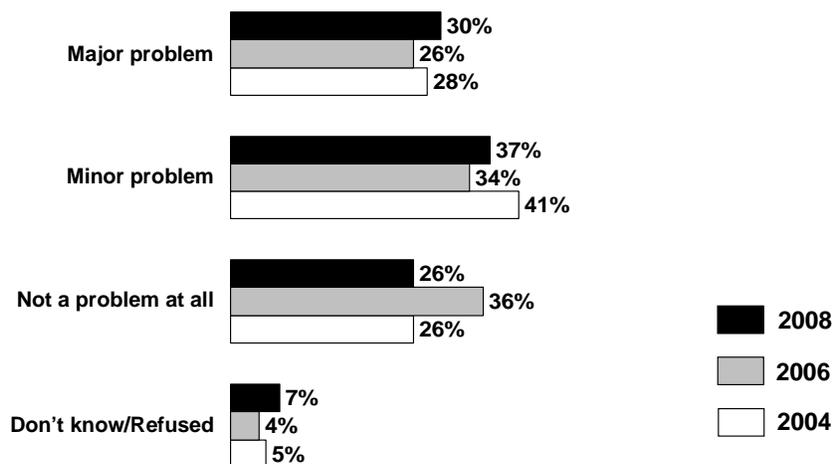


Reported Problems with and Steps Taken to Improve Coordination of Care

Chart 11

Reported Problems with Coordination Among Providers

In general, do you think that coordination among all of the different health professionals that you see is a major problem, a minor problem, or not a problem at all?



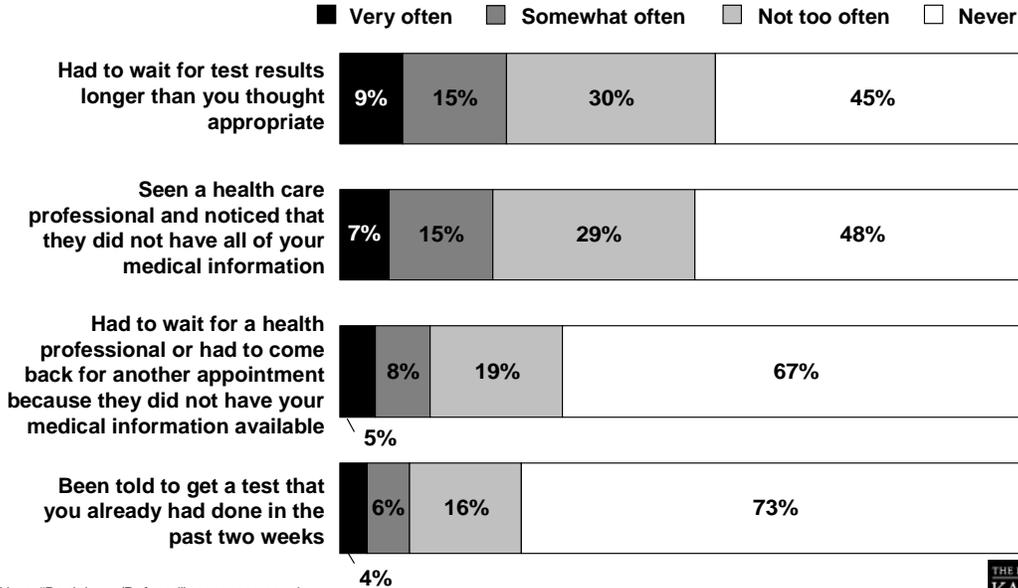
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Chart 12

Reports of Coordination Problems in 2008

Percent who say each of the following has happened to them ...



Note: "Don't know/Refused" responses not shown

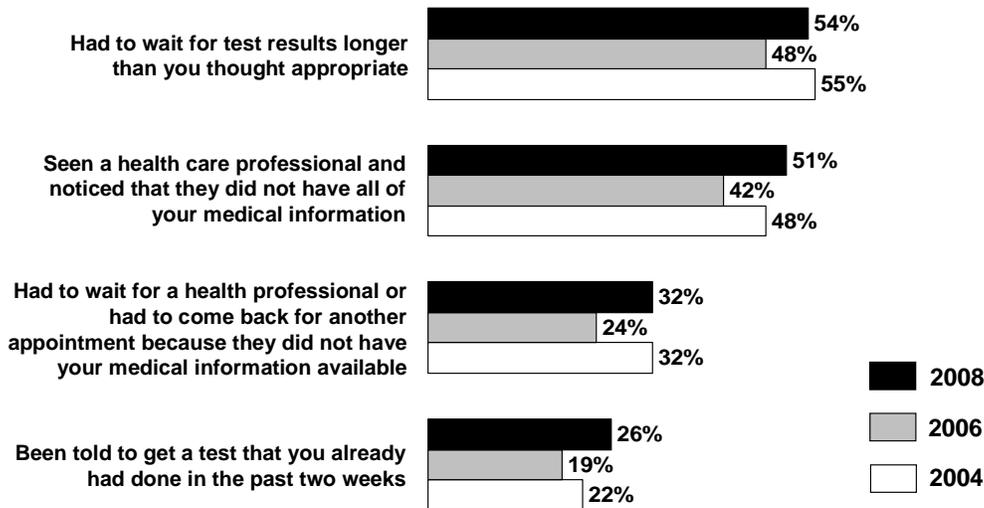
Source: KFF 2008 Update on Consumers' Views of Patient Safety and Quality Information (Jul. 29-Aug. 6, 2008)



Chart 13

Trends in Reports of Coordination Problems

Percent who say each of the following has EVER happened to them ...



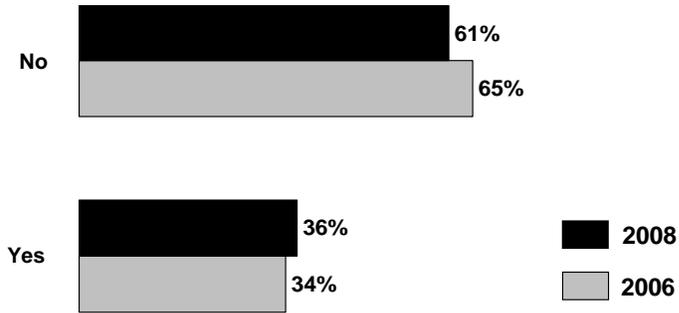
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Chart 14

Creating Personal Medical Records

Have you or a family member ever created your own set of medical records to ensure that you and all of your health care providers have all of your medical information, or not?



Note: "Don't know/Refused" responses not shown

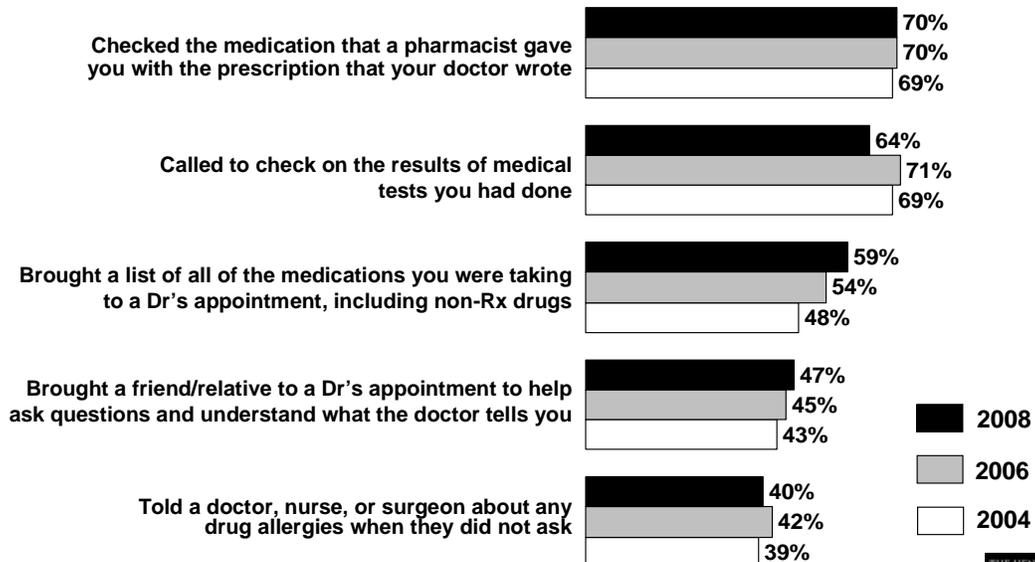
Sources: KFF 2008 Update on Consumers' Views of Patient Safety and Quality Information (Jul. 29-Aug. 6, 2008); KFF/Agency for Healthcare Research and Quality 2006 Update on Consumers' Views of Patient Safety and Quality Information (Aug. 3-8, 2006)



Chart 15

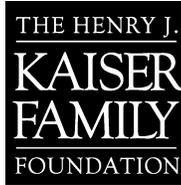
Reported Activities Related to Coordination of Care

Percent who say they have ever done each of the following ...



Sources: KFF 2008 Update on Consumers' Views of Patient Safety and Quality Information (Jul. 29-Aug. 6, 2008); KFF/AHRQ 2006 Update on Consumers' Views of Patient Safety and Quality Information (Aug. 3-8, 2006); KFF/AHRQ/Harvard School of Public Health National Survey on Consumers' Experiences with Patient Safety and Quality Information (Jul. 7-Sep. 5, 2004)





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