

New Healthcare Provider Experience Study

Prepared For:



January 14, 2022



INTRODUCTION

The aim in conducting the *New Healthcare Provider Experience Study* was to gain insights on Americans' experiences when scheduling and meeting with a new healthcare provider for the first time, as well as to understand their preferences and desires for the overall healthcare experience.

We are pleased to present the findings of the *New Healthcare Provider Experience Study* commissioned by Tegria and hope that it will serve as the basis for communications for your media outreach as well as for your internal use purposes.



KEY FINDINGS BY QUESTION

Q1: When was the last time you saw (in-person or virtually) a new healthcare provider for the first time?

Roughly 4 in 5 Americans (81%) have seen a new healthcare provider for the first time in the past 5 years, with about half (51%) saying they have done so in the past 12 months.

- Adults ages 18-44 are more likely than those ages 45+ to say they have seen a new healthcare provider for the first time:
 - Within the past 5 years (90% vs. 73%)
 - O Within the past 12 months (63% vs. 42%)
- Hispanic and Black Americans are more likely than White Americans to say they have seen a new healthcare provider for the first time:
 - Within the past 5 years (86% and 89% vs. 78%)
 - Within the past 12 months (63% and 66% vs. 47%)

Q2: Thinking about the first appointment you scheduled with your newest healthcare provider, how long did it take you to see your provider from the time you reached out to schedule? If you are unsure, please provide your best estimate.

Among Americans who have seen a new healthcare provider for the first time in the past 5 years, 1 in 4 (25%) say that it took more than 2 weeks to see the provider from the time they reached out to schedule, with more than 1 in 10 (12%) saying it took more than 4 weeks.

Among those who've seen a new provider for the first time in the past 5 years:

- Women are more likely than men to say it took more than 4 weeks to see their provider from the time they reached out to schedule (15% vs. 10%)
- Adults ages 45-64 are more likely than those ages 35-44 to say from the time they reached out to schedule to when they actually saw their provider it took:
 - More than 2 weeks (33% vs. 20%)
 - More than 4 weeks (17% vs. 8%)

Q3: Which of the following are important to you when meeting with a new healthcare provider for the first time? Please select all that apply.

When it comes to meeting with a new healthcare provider for the first time, ease of scheduling the appointment (60%) tops the list of things that are important to Americans, followed by kindness from the provider (56%) and office staff (52%). While convenient appointments are valued by



many, fewer seem to be concerned with self-service scheduling or telehealth options. Half of Americans (50%) say the ability to get an appointment immediately is important to them and more than 2 in 5 (43%) say the same of a provider offering appointments on their preferred days/time of day, while only about 1 in 4 find a self-service appointment scheduling option (26%) or telehealth visit options (24%) important. Additionally, knowledge seems to trump credentials and specialties, as nearly half of Americans (47%) say knowledgeable office staff is important compared to less than 2 in 5 (37%) who say the same of healthcare provider credentials/specialties and less than 1 in 4 (23%) who say the same of multi-specialty practices. Other important factors when meeting a new provider for the first time include short/no wait time to see the provider upon arrival at the office (47%), ease of confirming insurance coverage (46%), ease of completing new patient paperwork (43%), and ability to be referred to a specialist in-network if needed (43%).

- Women are more likely than men to say the following are important to them when it comes to meeting a new healthcare provider for the first time:
 - Ease of scheduling the appointment (64% vs. 56%)
 - Kindness from healthcare provider (66% vs. 45%)
 - Kindness from office staff (60% vs. 44%)
 - Ability to get an appointment immediately (54% vs. 46%)
 - Knowledgeable office staff (51% vs. 43%)
 - Short/No wait time to see the healthcare provider once arriving at the office for an appointment (50% vs. 43%)
 - Ease of confirming insurance coverage (50% vs. 43%)
 - Ease of completing new patient paperwork (48% vs. 38%)
 - Healthcare provider offering appointments on my preferred days/time of day (49% vs. 38%)
 - Ability to refer me to a specialist in my network if needed (49% vs. 36%)
 - Healthcare provider credentials or specialties (40% vs. 33%)
 - Telehealth (virtual) visit options (27% vs. 22%)
- Adults ages 65+ are more likely than those under age 65 to say the following are important when meeting a new healthcare provider for the first time:
 - Ease of scheduling the appointment (79% vs. 55%)
 - Knowledgeable office staff (60% vs. 44%)
 - Ease of confirming insurance coverage (62% vs. 42%)
- Adults ages 65+ are more likely than those ages 18-54 to say the following are important when meeting a new healthcare provider for the first time:
 - Kindness from healthcare provider (64% vs. 51%)
 - Short/No wait time to see the healthcare provider once arriving at the office for an appointment (64% vs. 38%)
 - Ease of completing new patient paperwork (57% vs. 37%)
 - o Ability to refer me to a specialist in my network if needed (59% vs. 35%)
 - Healthcare provider credentials or specialties (46% vs. 30%)
- Adults under age 65 are more likely than those ages 65+ to say telehealth visit options are important when meeting a new healthcare provider for the first time (27% vs. 15%)



- Adults ages 18-34 are less likely than those ages 35+ to say the following are important when meeting a new healthcare provider for the first time:
 - Ease of scheduling the appointment (44% vs. 66%)
 - Ability to refer me to a specialist in my network if needed (28% vs. 48%)
- Adults ages 18-54 are twice as likely as those ages 55+ to say a self-service appointment scheduling option is important when meeting a new healthcare provider for the first time (33% vs. 16%)
- White Americans are more likely than Hispanic and Black Americans to say the following are important when meeting a new healthcare provider for the first time:
 - Ease of scheduling the appointment (65% vs. 53% and 44%)
 - Short/No wait time to see the healthcare provider once arriving at the office for an appointment (53% vs. 42% and 30%)
 - Ease of confirming insurance coverage (51% vs. 37% and 38%)
- White Americans are more likely than Black Americans to say the following are important when meeting a new healthcare provider for the first time:
 - Kindness from healthcare provider (61% vs. 46%)
 - Knowledgeable office staff (52% vs. 33%)
 - Ability to refer me to a specialist in my network if needed (46% vs. 34%)
- Hispanic Americans are more likely than White Americans to say a self-service appointment scheduling option is important when meeting a new healthcare provider for the first time (33% vs. 23%)
- Hispanic and Black Americans are more likely than White Americans to say a multispecialty practice is important when meeting a new healthcare provider for the first time (31% and 29% vs. 20%)

Q4: How much do you agree or disagree with each of the following statements?

I find the process of seeing a new healthcare provider (e.g., finding a new provider, scheduling appointments) frustrating.

Providers and medical offices have room for improvement as 3 in 5 Americans (60%) find the process of seeing a new healthcare provider frustrating.

Adults ages 18-54 are more likely than those ages 65+ to feel this way (64% vs. 51%)

I have found technology (e.g., patient portals, apps) helpful when working with a new healthcare provider (e.g., scheduling appointments, getting test results, asking medical questions, paying a bill).

Technology could alleviate struggles during the patient journey as three quarters of Americans (75%) have found technology helpful when working with a new healthcare provider.



• Adults ages 18-54 are more likely than those age 65+ to cite this (80% vs. 64%)

I want the ability to use technology (e.g., patient portals, apps) when managing my healthcare experience (e.g., online scheduling/bill pay, portal that shows health records/test results, mobile app, messaging providers directly).

There is a strong desire for technology in the healthcare process as nearly 4 in 5 Americans (79%) want the ability to use technology when managing their healthcare experience.

- Women are more likely than men to cite this (82% vs. 77%)
- Those ages 35-54 are more likely than those ages 18-34 and 65+ to want this (86% vs. 77% and 70%)

My first appointment with my newest healthcare provider made me feel confident in continuing to see them for future healthcare needs.

Most Americans (85%) feel confident in continuing to see their newest healthcare provider for future healthcare needs based on the first appointment they had with them; this jumps to 90% among those who found technology helpful when working with a new provider.

- Adults ages 35-44 and 55+ are more likely than those ages 18-34 to express this sentiment (86% and 90% vs. 78%)
- White Americans are more likely than Hispanic Americans to feel this way (87% vs. 79%)

My newest healthcare provider is doing a good job managing my health issues.

A majority of Americans seem to be satisfied with their current providers as more than 4 in 5 (85%) say their newest healthcare provider is doing a good job managing their health issues.

Adults ages 35-44 and 65+ are more likely to say this compared to those ages 18-34 (88% and 90% vs. 80%)

I am unsure of how to navigate my own healthcare services (e.g., scheduling, viewing test results, getting referrals).

Many Americans could use more guidance in their healthcare journey as nearly 2 in 5 (38%) say they are unsure of how to navigate their own healthcare services.

- Men are more likely than women to cite this (44% vs. 33%)
- Adults under age 65 are nearly twice as likely as those 65+ to cite this (43% vs. 22%)
- Adults ages 18-44 are more likely than those ages 45+ to cite this (50% vs. 28%)
- Hispanic and Black Americans are significantly more likely than White Americans to cite this (51% each vs. 32%)



The ability to schedule healthcare appointments online (e.g., website, portal, mobile app) would make the scheduling process much easier.

Online scheduling could improve the patient experience as roughly 4 in 5 Americans (81%) feel the ability to schedule healthcare appointments online would make the scheduling process much easier.

Adults ages 35-44 are more likely than those ages 18-34 and 55+ to feel this way (88% vs. 82% and 75%)

It is acceptable to have to wait a month or more for an appointment with a new healthcare provider (from scheduling call to actual visit).

Timing is of the essence when it comes to scheduling a healthcare visit – more than 3 in 5 Americans (62%) do not feel it is acceptable to have to wait a month or more for an appointment with a new healthcare provider.

- Adults ages 65+ are significantly more likely than those under age 65 to feel this way (79% vs. 57%)
- Adults ages 45+ are more likely than those under age 45 to feel this way (70% vs. 51%)
- White Americans are more likely than Hispanic and Black Americans to feel this way (66% vs. 55% and 51%)

I would be open to having a virtual (video chat) appointment for my first visit with a new healthcare provider.

Patients are ready for modern solutions – nearly 3 in 5 Americans (59%) would be open to having a virtual appointment for their first visit with a new healthcare provider.

- Adults ages 18-54 are significantly more likely than those 55+ to cite this (69% vs. 43%)
- Black Americans are more likely than White Americans to cite this (69% vs. 55%)

I would like my healthcare experience (i.e., interactions from scheduling to seeing a provider to paying a bill) to be more like the customer experience of an online convenience service app (e.g., Amazon Prime, Uber, Instacart).

The patient experience is ready for an upgrade - more than 3 in 5 Americans (61%) would like their healthcare experience to be more like the customer experience of an online convenience service app, such as Amazon Prime, Uber, Instacart, etc.

- Men are more likely than women to desire this type of experience (64% vs. 58%)
- Adults ages 18-54 are more likely than those ages 55+ to want this type of experience (65% vs. 54%)



I am more concerned about receiving convenient service for my healthcare appointments (e.g., ability to schedule quickly and/or close to me, alternate location options like pharmacy or online) than I am about seeing my personal healthcare provider, specifically, every time.

A convenient healthcare experience seems to be more important than having a designated healthcare provider as nearly 3 in 5 Americans (59%) say they are more concerned about receiving convenient service for my healthcare appointments than they are about seeing their personal healthcare provider, specifically, every time.

- Adults ages 18-54 are more likely than those ages 55+ to feel this way (64% vs. 50%)
- Hispanic Americans are more likely than White Americans to feel this way (66% vs. 56%)

Q5: Which of the following offerings would cause you to consider switching healthcare providers? Please select all that apply.

Providers/Healthcare offices may need to step up their game as nearly 7 in 10 Americans (69%) would consider switching healthcare providers if another provider had more appealing offerings, with convenience being top of mind. The number one offering that could spark a switch is same day appointments for non-routine issues (35%). Additionally, about 3 in 10 Americans would consider a switch for a provider that has convenient locations where they already go (30%) or self -scheduling (29%). Roughly 1 in 4 Americans could be swayed to change providers if one offered a "one-stop shop" health line or a mobile app to assist with routine medical needs (26% each).

- Adults under age 65 are significantly more likely than those ages 65+ to say that certain
 offerings would cause them to consider switching healthcare providers (76% vs. 43%), and
 are more likely to cite the following offerings:
 - Same day appointments for non-routine issues (38% vs. 24%)
 - Self-scheduling (35% vs. 8%)
 - A "one-stop shop" health line (30% vs. 13%)
 - A mobile app to assist with routine medical needs (31% vs. 8%)
 - Alternative medicine options (22% vs. 6%)
 - A concierge service (19% vs. 7%)
- The following offerings are more likely to cause those ages 18-54 to consider switching providers than those ages 55+:
 - Convenient locations where I already go (35% vs. 21%)
 - Self-scheduling (38% vs. 15%)
 - A mobile app to assist with routine medical needs (35% vs. 13%)
- Hispanic and Black Americans are more likely than White Americans to say that certain
 offerings would cause them to consider switching healthcare providers (83% and 80% vs.
 63%)



- Hispanic Americans are more likely than White Americans to say the following offerings would cause them to consider switching healthcare providers:
 - Self-scheduling (39% vs. 26%)
 - o A "one-stop shop" health line (34% vs. 24%)
 - o A mobile app to assist with routine medical needs (33% vs. 25%)

Q6: Which of the following would make you give up on trying to schedule a first appointment with a new healthcare provider? Please select all that apply. Even if you do not currently see a provider, we are still interested in your response.

When it comes to scheduling a first appointment with a new provider, timing of the appointment is crucial in signing on new patients. More than half of Americans (55%) say they would give up on trying to schedule a first appointment if there were a lack of available appointments soon. Office location can also be a deterrent as nearly half of Americans (48%) say they would stop trying to set up a first appointment if an office is too far away or not conveniently located. Again, we see that time is a key factor in a positive healthcare experience, with more than 1 in 3 Americans (36%) saying that they would give up on trying to schedule a first appointment with a provider if scheduling is too time consuming. Receptionists can also be a barrier to sealing the deal with new patients, with more than 2 in 5 Americans (42%) saying a receptionist that was not helpful would deter them from trying to schedule a first appointment with a new provider, and more than 1 in 5 (21%) saying the same about having to talk to a receptionist about a personal health matter.

- Women are more likely than men to say the following would prevent them from scheduling a first appointment with a new healthcare provider:
 - Lack of available appointments soon (58% vs. 52%)
 - o Receptionist was not helpful (47% vs. 37%)
- Adults ages 45+ are more likely than those under age 45 to say the following would prevent them from scheduling a first appointment with a new healthcare provider:
 - Lack of available appointments soon (61% vs. 48%)
 - Receptionist was not helpful (46% vs. 37%)
- Adults ages 18-54 are more likely than those 55+ to say they will give up on scheduling a
 first appointment with a new healthcare provider if they have to talk to the receptionist
 about a personal health matter (26% vs. 14%)
- Adults ages 45-54 are more likely than those under age 45 to say they will give up on scheduling a first appointment with a new healthcare provider if the office is too far away/not conveniently located (57% vs. 43%)
- White Americans are more likely than Black Americans to say they will give up on scheduling a first appointment with a new healthcare provider if:
 - The office is too far away/not conveniently located (50% vs. 39%)
 - The receptionist was not helpful (45% vs. 34%)



Q7: Which of the following is the most frustrating part of scheduling an appointment with a new healthcare provider? Even if you do not currently see a provider, we are still interested in your response.

A majority of Americans (76%) find it frustrating to schedule an appointment with a new healthcare provider, with top frustrations relating to cost of services. Among them, more than 1 in 4 (26%) say the part of scheduling they find most frustrating is not knowing how much out of pocket costs they will be responsible for, and roughly 1 in 5 (21%) say it is not knowing if their insurance provider will cover a given service. Other things cited as most frustrating include getting health records transferred to a new provider (22%), getting the correct preauthorization from their insurance if needed (18%), and providing their insurance information (8%).

Among those who find it frustrating to schedule an appointment with a new healthcare provider:

- Women are more likely than men to say the most frustrating part is getting health records transferred (27% vs. 18%)
- Men are more likely than women to say the most frustrating part is:
 - o Getting the correct preauthorization from their insurance if needed (22% vs. 15%)
 - o Providing their insurance information (11% vs. 5%)
- Adults ages 18-44 are more than three times as likely as those ages 65+ to say the most frustrating part is providing their insurance information (11% vs. 3%)
- Hispanic Americans are twice as likely as White Americans to say the most frustrating part is providing their insurance information (12% vs. 6%)

Q9: Which of the following statements are true for you? Please select all that apply.

I have been referred to a specialist or other healthcare provider for additional evaluation or testing in the past 5 years.

Nearly 2 in 5 Americans (38%) say they have been referred to a specialist or other healthcare provider for additional evaluation or testing in the past 5 years, painting a picture of who may have needed (versus wanted) to set up first appointments with a new provider.

- Adults ages 55+ are more likely than those ages 35-44 to cite this (43% vs. 32%)
- White Americans are more likely than Black Americans to cite this (40% vs. 30%)

I have had to wait 2 or more weeks to see a healthcare provider for a non-routine medical issue.

More than 1 in 4 Americans (27%) say they have had to wait 2 or more weeks to see a healthcare provider for a non-routine medical issue, suggesting that many are going weeks potentially suffering while waiting to see a provider.



Adults ages 45-54 are mores likely to cite this (37% vs. 26% ages 18-44 & 23% ages 55+)

I have helped a friend or family member with their healthcare provider needs (e.g., choosing a provider, scheduling appointments, communicating with medical staff about their health issues, paying for appointments/procedures).

Many Americans are on double-duty, not only worrying about their own personal healthcare needs but those of a friend or family member, with more than 1 in 5 (22%) saying they have helped a friend or family member with their healthcare provider needs.

- Adults under age 65 are nearly three times as likely as those 65+ to say they have done this (26% vs. 9%)
- Adults ages 18-44 are more than twice as likely as those ages 45+ to say they have done this (31% vs. 15%)
- Hispanic Americans are more likely than White Americans to say they have done this (30% vs. 21%)

The newest healthcare provider I am seeing was not my preferred choice (i.e., I had to reach out to several providers to find one who could take me as a new patient).

Availability of healthcare providers means not everyone is able to go with their first choice, as 1 in 6 Americans (16%) say the newest provider they are seeing was not their preferred choice.

- Adults ages 18-44 are more than twice as likely as those 45+ to say this (23% vs. 10%)
- Hispanic and Black Americans are significantly more likely than White Americans to say this (22% and 21% vs. 13%)

My first experience with a new healthcare provider was so frustrating that I never scheduled an appointment with them again.

Bad first experiences with a new provider can end the relationship, with more than 1 in 10 Americans (12%) saying their first experience with a new healthcare provider was so frustrating that they never scheduled an appointment with them again.

Adults under age 65 are more than three times as likely as those 65+ to say this (14% vs. 4%)



Q10: Which of the following describe how you have felt when helping a friend or family member with their healthcare provider needs (e.g., choosing a provider, scheduling appointments, communicating with medical staff about their health issues, paying for appointments/procedures)? Please select all that apply.

When helping friends and family with healthcare provider needs, Americans seem to feel more positively than negatively about it. Among those who have done so, more than half (55%) say they have felt supportive, more than 2 in 5 (45%) say accomplished, and about a third say they have felt respected (34%) or fulfilled (32%). Only about 1 in 5 say they have felt frustrated (19%) or annoyed (17%), and about 1 in 10 say they have felt confused (13%) or like they are wasting their time (12%).

Among those who have helped a friend or family member with their healthcare provider needs:

 Men are more likely than women to say they have felt respected when doing so (43% vs. 26%)

Q11: Which of the following types of medical insurance do you have? Please select all that apply.

Nearly all Americans (93%) have medical insurance with 45% having Medicare (33%) or Medicaid (16%), 43% having employer-sponsored insurance, 7% having insurance through a Federal/State exchange, 6% through the VA, and just 2% have COBRA.

- Women are more likely than men to say they have medical insurance through Medicare/Medicaid (48% vs. 42%)
- Men are more likely than women to say they have medical insurance through:
 - Federal/State exchange (8% vs. 5%)
 - VA (8% vs. 3%)
 - o COBRA (3% vs. 1%)
- Adults ages 65+ are more likely than those under 65 to say they have medical insurance through Medicare (91% vs. 16%)
- Adults under age 65 are more likely than those ages 65+ to say they have medical insurance through:
 - Medicaid (20% vs. 4%)
 - Federal/State exchange (8% vs. 1%)
- White Americans are more likely than Hispanic and Black Americans to say they have medical insurance through Medicare (38% vs. 29% and 21%)
- Black Americans are more likely than White Americans to say they have medical insurance through Medicaid (28% vs. 13%)



FULL METHODOLOGY

This survey was conducted online within the United States by The Harris Poll on behalf of Tegria between January 4-6 among 2,019 adults ages 18+.

Results were weighted for age within gender, region, race/ethnicity, income, education, and size of household where necessary to align them with their actual proportions in the population. Propensity score weighting was also used to adjust for respondents' propensity to be online.

All sample surveys and polls, whether or not they use probability sampling, are subject to multiple sources of error which are most often not possible to quantify or estimate, including sampling error, coverage error, error associated with nonresponse, error associated with question wording and response options, and post-survey weighting and adjustments. Therefore, Harris Poll avoids the words "margin of error" as they are misleading. All that can be calculated are different possible sampling errors with different probabilities for pure, unweighted, random samples with 100% response rates. These are only theoretical because no published polls come close to this ideal.

Respondents for this survey were selected from among those who have agreed to participate in online surveys. The data have been weighted to reflect the composition of the adult population. Because the sample is based on those who agreed to participate in our panel, no estimates of theoretical sampling error can be calculated.

About The Harris Poll

The Harris Poll is one of the longest running surveys in the U.S. tracking public opinion, motivations and social sentiment since 1963 that is now part of Harris Insights & Analytics, a global consulting and market research firm that delivers social intelligence for transformational times. We work with clients in three primary areas; building twenty-first-century corporate reputation, crafting brand strategy and performance tracking, and earning organic media through public relations research. Our mission is to provide insights and advisory to help leaders make the best decisions possible. To learn more, please visit www.theharrispoll.com