

2022 ANNUAL CONSUMER SENTIMENT BENCHMARK REPORT

The State of Healthcare Transparency and Health Plan Member Engagement



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The healthcare landscape looks markedly different than it did a year ago.

With COVID-19 moving from pandemic to endemic, we are seeing people return to getting regular care. While that's a positive turn of events, the continuing struggles with a confusing healthcare system persist. This underscores that more work is needed to support people as they try to understand and plan for healthcare, including how to manage their expenses.

Related to the expense of care, health plans are taking action to comply with the Centers for Medicare & Medicaid Services (CMS) price transparency mandates, which require out-of-pocket cost estimates be made available to members. This year's survey results show that cost continues to play a significant role in care decisions, including a concerning rate of patients delaying care based on uncertainty around price.

Consumers are also looking for more information about treatment options and more in-depth information about providers so they can find the right fit for their unique healthcare situation. Many people are accessing new benefits at new jobs amid the Great Resignation and are left to understand the details on their own.

These sentiments and others are reflected in our annual benchmark report. We heard that more people than ever before are using transparency tools provided by their health plans to understand coverage, make informed decisions, and manage costs. We believe the data cited throughout this report will be useful to health plans and others in the industry as we move forward in a post-pandemic world.

Together, we can make healthcare better for all.

In good health,

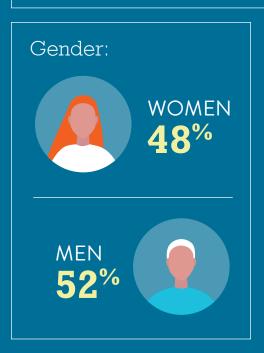
Your HealthSparq team

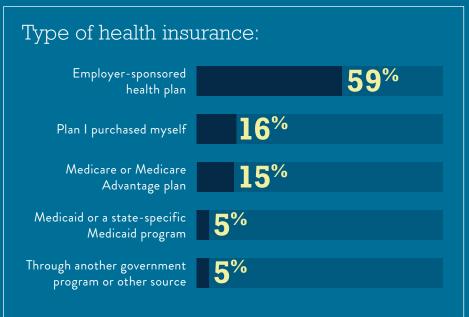
ABOUT THE SURVEY

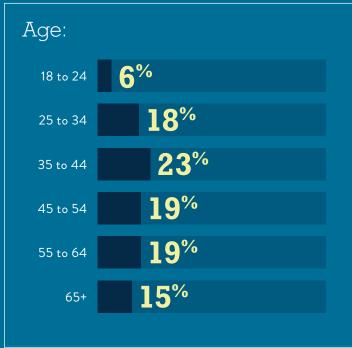
Through a partnership with Ribnik, a leading research firm, our consumer survey focused on perceptions, attitudes, and behaviors around healthcare transparency efforts and costs, with an emphasis on the impacts to health plans. This 2022 benchmark report can help chart a course for the future of member experience, engagement, and transparency.

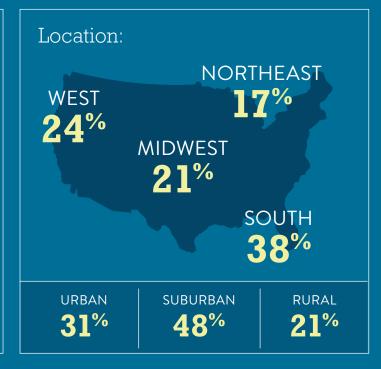
Size: 1,006 U.S. RESIDENTS

Date: JANUARY 2022







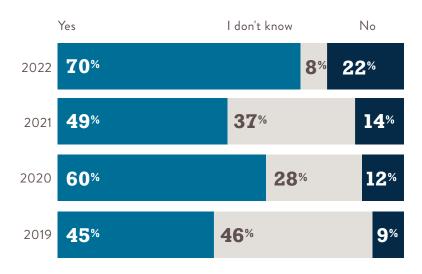


LET'S HEAR IT FOR TRANSPARENCY TOOLS

HealthSparq has been leading healthcare transparency and guidance for more than a decade, and we're pleased to see transparency tools are finally having their moment.

Reported availability of transparency tools is at its highest point yet, with consumer opinion of these tools just as high.

Does your health plan offer healthcare transparency tools?



For the survey, healthcare transparency tools are defined as online tools from insurance companies where members can search for in-network providers ("Find a Doctor"), get cost estimates for procedures, learn about treatment options, and/or get guidance on insurance-covered options.

Awareness is up and so is usage.

67%

of those who have access to transparency tools say they've used the tools in the past year – up from 2021.

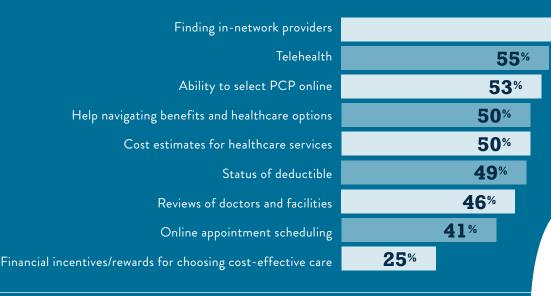
Most of those who have access to transparency tools but haven't used them say they didn't have a healthcare need. The remainder found the information they needed from their doctor or by calling their health plan customer service line.



CONNECT WITH MEMBERS THROUGH PROVIDER PROFILES

"Find a Doctor" is the most available transparency tool.

Which resources are offered by your health plan's transparency tool? (respondents were asked to select all that apply)





People need as much information as possible to make informed choices about their healthcare, and that includes provider availability, years of experience for a given procedure or specialty, office locations, and much more.

The **top five** most important factors when searching for a doctor are:

Whether the doctor is in-network
2 Distance from home or work
3 Years of experience
4 Appointment availability
5 Cost

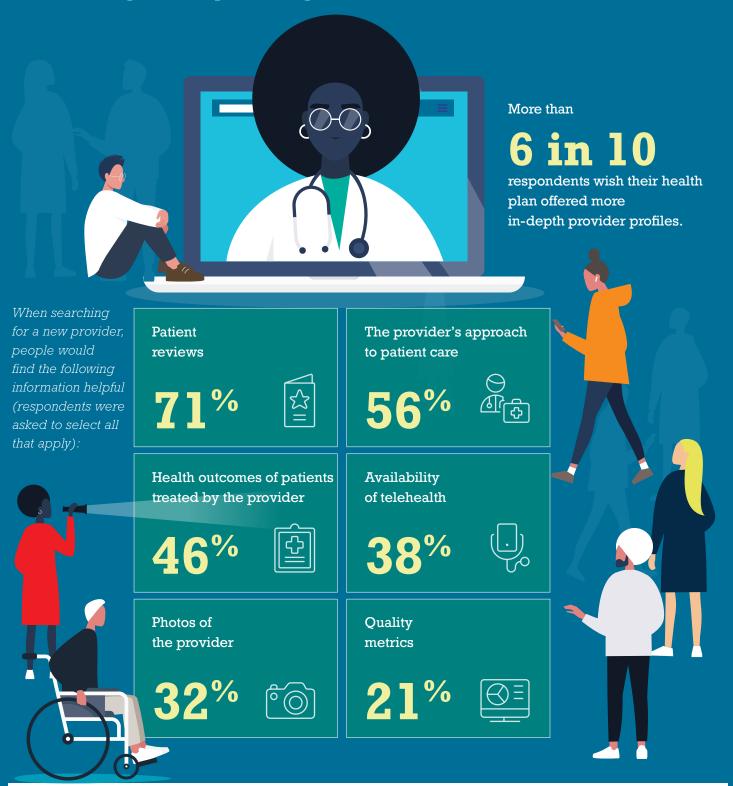
When armed with information, consumers are likely to make different healthcare decisions based on the factors that are most important to them.

72%



Accuracy is the key to member trust: Three in 10 people reported finding inaccurate information when searching for a doctor on their health plan website. Beyond compliance, issues associated with provider data accuracy and having the right information for care selection is critical to building and maintaining member trust. Developing better approaches to provider data updates is key for improved member experience and compliance going forward.

Meet robust provider profile expectations.



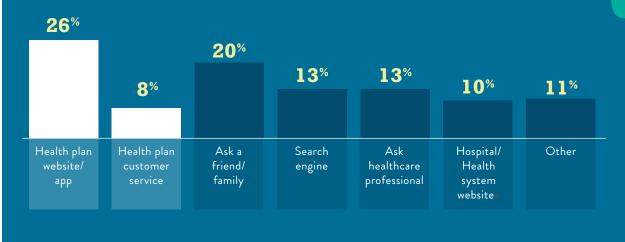


Close the digital scheduling gap: Appointment scheduling is a big opportunity to deliver what consumers and providers want. While the majority of consumers would like to schedule appointments through their health plan's website, just four in 10 report having that option.

HEALTH PLANS ARE FIRST STOP TO LOOK FOR CARE

Providing a great experience for members is critical.

Thinking about the last time you looked for a doctor, where was the FIRST place that you looked?



People are making more informed decisions.

For consumers with transparency tools, the majority feel the tools help with understanding coverage, making informed decisions, and managing costs. Specifically, over last year, more people agree the tools provide a better understanding of coverage.







The tools help me make informed decisions (87% in 2021) The tools help me manage my healthcare spending (82% in 2021)



To engage even more members, proactive marketing can make a big impact. Creating more awareness about your online tools can replace a high-cost customer service calls with a click to your website.

TIME TO TAKE PRICE TRANSPARENCY TO NEW HEIGHTS

Federal mandates for price transparency will expand access to out-of-pocket costs for consumers, but they are just a foundation. Plans have an opportunity to build on the rules to meet the real-world needs of members on the cost of care, help them understand what to expect, and provide guidance on finding the right provider for their needs.

People's health increasingly hindered by lack of clear pricing information.

While transparency tool usage is up, understanding costs continues to be a widespread issue.

44%

of respondents have avoided getting healthcare services because they didn't know the costs—a sharp increase over 2021, when 25% of people reported avoiding care due to unknown costs.





This phenomenon is even more pronounced among consumers ages 18 to 34, 63% of whom report avoiding care for this reason. Among consumers with a high-deductible health plan, 51% avoided care. These delays are costly in the long run as health issues can become more complex and expensive.

Members who look for costs, trust accuracy of estimates.

75%

say they trust their health plan to provide accurate information about expected costs for medical services.



Expectations continue to rise.



People increasingly expect their health plan to help them understand the cost of care.



want accurate information for what they will pay out-ofpocket for services, up from 83% in 2021.



wish they had more control over their healthcare costs, up from 67% in 2021.

When it comes to searching for costs:

59%

of 18 to 34-year-olds used their health plan website specifically to obtain cost information for a service or procedure.

Only 25% of those 55+ have ever done so.



Considerable Support for federal price transparency mandates.

The CMS Transparency in Coverage Mandate and the No Suprises Act are intended to help people understand their out-of-pocket costs before getting care. The mandates require health plans to provide access to what a particular provider charges for a specific billable service.

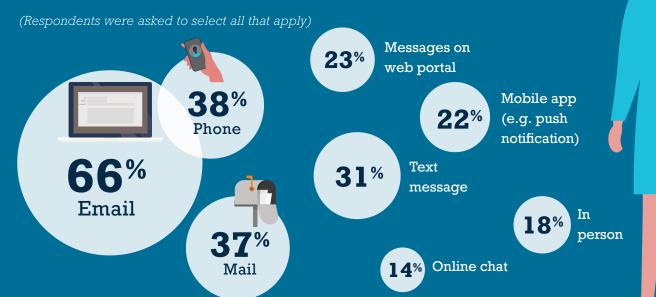
While just one in three consumers is aware that the federal government will soon require health insurance companies to provide cost estimates to members for all covered services,

81% support this requirement.

REGULAR COMMUNICATION DRIVES ADOPTION

People want to hear from their health plan about new services, helpful guidance, and tools for navigating benefits. While there are many communication channels available, two-thirds of consumers prefer their health plan to communicate via email. Consumers under age 55 are more likely to prefer other methods such as text message, mobile app, or online chat.

Members prefer digital communication.



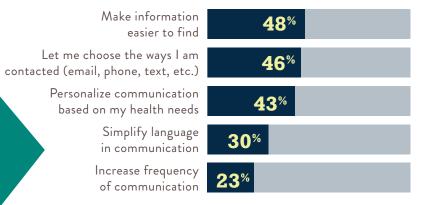
You built it, now make it easy to find.

Most consumers (81%) feel their health plan uses simple, clear language when communicating about the tools and benefits available to them, which is a testament to the industry-wide efforts over the last decade to make health-related communication more human.

Consumers also want to choose how their health plan communicates with them and expect more personalized communications.

Room for improvement

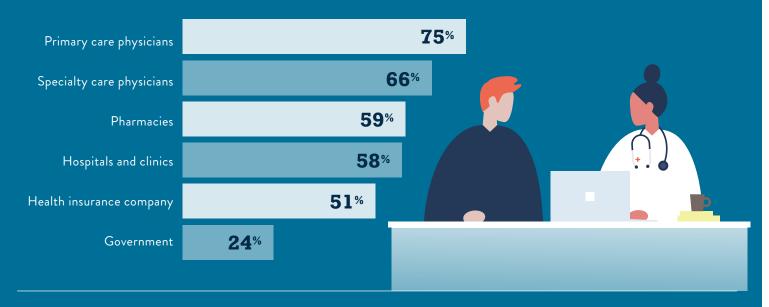
How could your health plan improve the way it communicates with you? (Respondents were asked to select all that apply)



TRUST IS CRITICAL FOR PATIENT ENGAGEMENT

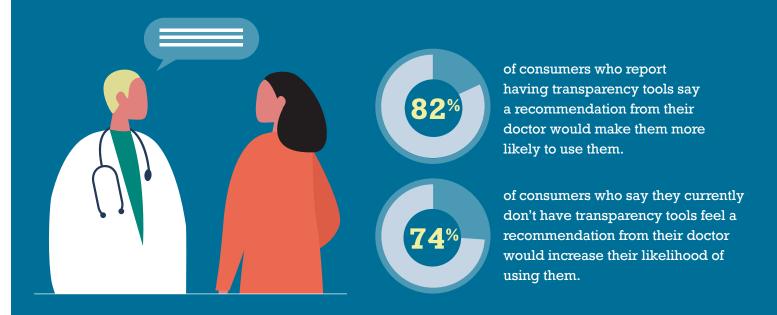
Once again in 2022, healthcare providers are the most trusted healthcare entity.

Overall, people report rating their level of trust as high or very high with the following entities:



Trust and transparency go hand in hand.

Providers are critical partners in increasing awareness and use of transparency tools, due to their high levels of consumer trust. With mandates drawing more attention to transparency solutions, health plans have the opportunity to leverage medical professionals to increase tool use.





THE OPPORTUNITY FOR 2022: EVER-GREATER TRANSPARENCY

Confusion around healthcare costs directly impacts whether a person obtains care. While engagement with healthcare is beginning to rebound, many people continue to avoid or postpone care due to uncertainty around the cost of care, which has serious implications for our collective health in the years to come.

Health plans are working to provide cost estimates for all covered services, but much more can be done to help guide people as they try to understand healthcare costs and plan for care. And while many plans already have some level of price transparency in place, little has been done to effectively market these tools—many people still don't know they exist.

The reality is that government-mandated price transparency is just the start. As awareness and use of existing healthcare decision making tools increases—through recommendations from a provider, friend, or simply by making tools easier to find—so too will demand for even greater transparency in healthcare.

There's so much opportunity ahead—to better communicate with consumers about existing transparency tools and also to work together to define what's next for the industry. By putting consumers at the heart of each decision we make, we can deliver an experience that provides meaning and control for members.

We look forward to partnering with you to make healthcare better for everyone.

We're happy to share additional data from our surveys in order to help you position your organization for success. To learn more, please visit healthsparq.com or contact us today at marketing@healthsparq.com.