



Consumer Decision Points

Using Online Reports to Gauge Quality of Physician Performance

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Aligning Forces for Quality

- Robert Wood Johnson Foundation flagship program
 - Improving quality and equality of care in 17 communities
 - Consumer Engagement
 - Performance Measurement and Public Reporting
 - Quality Improvement
- Communications research conducted in early 2010
 - determine who would use information comparing physicians' performance, and when they would use it
 - Research conducted with Ipsos Understanding Unlimited
 - Builds on earlier communications research

Goals

- Understand reactions to the concept of using comparative information about ‘quality of care’ provided by local physicians
- Identify where people currently look for health information
- Understand ‘decision points’ for looking at this information
- Use these insights to shape ideas for ‘marketing’ comparative performance information

Meeting consumers where they are ...

I believe I am already receiving quality care.

I have never heard of or considered a site compare doctors' performance in my area.

What is quality health care anyway?

I am not motivated to change doctors or to question my care.

I trust people (doctors, family) to help me find quality care.

Common denominators:

‘Low interest’ consumers/patients

- In a “good place.”
 - Content, satisfied, connected to their physician.
 - Good network of referral sources.
- Rely more on personal recommendations.
- Emotional. In denial. Inertia.
 - No urgency to investigate finding better quality care, even when they admit to having concerns about their physician’s care/approach. In denial about the seriousness and potential progression of the condition.

Common denominators: 'High-interest' consumers/patients

- Cynical. Been “burned” before.
 - Significantly bad experiences with physician error in the past.
- More comfortable questioning physicians. Experienced with the dialogue. Knows common ‘measures’ for care.
- The ‘go-to girl’ in her circle.
 - More health savvy. High baseline knowledge of conditions.
 - Takes pride in recommending info to friends and family.
 - More confident.

Decision Points: Opportunities

Consumers perceive limited opportunities for using this information.

Once on the site, they may discover benefits for repeat visits.

Changes in Location or Insurance

- Physician moves far away
- Consumer moves to a new city
- If no referral is available/viable
- New health care plan

Changes in Health Status or Significant Diagnosis

- New health needs and concerns
 - 40s mammography
 - 50s gastroenterology care
 - Same sex pediatrician
- New serious condition – MS, Cancer

Big Problem with MD

- Misdiagnosis or no diagnosis
- Medication error
- Poor service

Enabling Others

- Provide a resource for friends
- Use the site to help ailing family/friend, recommend the site to loved one to find care

Getting to the information

Doorways to reaching consumers
at the right occasion and in the prime frame of mind.

National Web Sites

- Google – Intuitive search words
- WebMD – Link to local site
- National associations – Link to local site

Local Tactics

- News Web sites / TV, talk radio – Health segment
- City magazines or city Web sites – timed to the “Top Doctors” edition
- Health events – Diabetes and heart disease especially

Insurance Web Sites

- Connected with the provider search function. A link on the search page calls out an independent community resource
- Special resource during enrollment or for educating newly diagnosed patients

People to People

- Ancillary care providers – Hospital referral center, nurses, social workers/government agencies, diabetes educators
- Trusted people – Friends, family, respected spokesperson