2017 State of Consumerism in Healthcare

Slow Progress in Fast Times

Results of the Kaufman Hall Healthcare Consumerism Index
Introduction

The whole notion of consumer experience has changed dramatically in just the past several years. You can order anything from a new sofa set to a load of groceries from your smartphone and have it delivered or waiting for pick-up when you arrive. You can ask a voice-recognition device in your home to play your favorite song, order a ride, or buy household supplies. Instead of driving to the mall to shop, you can choose from among 480 million products on Amazon. As this new level of service has become the norm, consumers have begun to expect a similar experience in healthcare—such as walk-in visits, online scheduling, virtual visits, and direct messaging with providers. Rising out-of-pocket healthcare costs further incentivize consumers to select providers that fulfill those expectations.

Hospitals and health systems have been slow to catch up with evolving consumer demands. Results from Kaufman Hall’s Healthcare Consumerism Index show that fewer than one in 10 organizations are treating consumer expectations as a high priority by consistently applying and building consumer-centric capabilities. The Healthcare Consumerism Index rates respondents to a national Kaufman Hall survey according to their levels of priority, capability, and functionality relative to consumer-based strategies (see “About the Report”). Eight percent earned Tier 1 ratings, 29 percent earned Tier 2 ratings, 37 percent earned Tier 3 ratings, and 27 percent earned Tier 4 ratings.

**Figure 1. Overall Performance: Kaufman Hall’s Healthcare Consumerism Index**

<table>
<thead>
<tr>
<th>Tier</th>
<th>Percent</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tier 1</td>
<td>8%</td>
<td>Meeting consumer expectations is a high priority; several important consumer-related capabilities are being applied with some demonstrated successes, and more are in the works</td>
</tr>
<tr>
<td>Tier 2</td>
<td>29%</td>
<td>Meeting consumer expectations is a high priority, and work is underway on several new consumer-related capabilities</td>
</tr>
<tr>
<td>Tier 3</td>
<td>37%</td>
<td>Meeting consumer expectations is a medium or low priority, and only moderate activity is underway on new capabilities</td>
</tr>
<tr>
<td>Tier 4</td>
<td>27%</td>
<td>Meeting consumer expectations is a medium or low priority, and minimal activity is underway on new capabilities</td>
</tr>
</tbody>
</table>

*Source: Kaufman Hall Healthcare Consumerism Index*
and 64 percent received Tier 3 ratings or lower (Figure 1). The results indicate widespread lack of focus among legacy healthcare providers on meeting current and future consumer expectations. Data from Kaufman Hall’s annual Healthcare Consumerism Survey provide more detail about varying levels of performance. Key findings include:

**Significant gaps exist between priorities and capabilities**
- Many healthcare organizations recognize consumer-centric objectives as high priorities, but few have the capabilities to successfully achieve those objectives
- Healthcare organizations are behind the times in digital consumer engagement; digital initiatives often are disconnected from broader consumer engagement strategies

**Organizational value propositions are out of sync with consumers**
- Most organizations lack alignment between the factors they see as their primary competitive differentiators, and what they perceive consumers value most

**Consumer access is a work in progress**
- Many organizations are inconsistent and slow to expand access to consumers via non-traditional care options, such as urgent care centers or retail care clinics
- Initiatives to expand access in other areas, such as same-day appointments or virtual visits, are in the early implementation stages for most providers

**Organizations have a narrow view of consumer experience**
- Traditional healthcare providers have made minimal gains in improving key aspects of the patient experience
- The default for many organizations is to be reactive in responding to consumer experience issues, rather than proactive in preventing them

**Consumer insights are incomplete and applied inconsistently, if at all**
- Organizations continue to rely on outdated methodologies and analytics
- While many providers use multiple means of gathering consumer insights, those efforts are not comprehensive and rarely are consistently applied to drive key strategies and decisions

**Pricing strategy is a blind spot for many**
- Efforts to provide price transparency are particularly sparse
About the Report

The report that follows is based on the Kaufman Hall 2017 Healthcare Consumerism Survey, a detailed online survey sent to executives at hospitals and health systems across the country. More than 125 organizations participated. The survey asked questions measuring strategic focus and intent toward being a consumer-centric organization, as well as the resources and capabilities that aid in achieving a consumer-centric organizational core. The overall survey results are included throughout this report—showcasing results in the key areas of organizational alignment, value proposition, access, experience, insights generation and application, and pricing.

The majority of survey respondents (74 percent) were from health systems, and 21 percent were from hospitals. Remaining respondents were from medical groups or other types of provider organizations. Nearly half of respondents (46 percent) were healthcare Executives or Officers, while 37 percent were Directors or Vice Presidents.

The Kaufman Hall Healthcare Consumerism Index rates the survey respondents nationwide according to their level of engagement in consumer-based strategies. The Index was based on four key areas of the survey:

- **Insights generation and application**: Developing consumer insights from multiple methods such as surveys, analysis of internal patient data, and qualitative and quantitative research; applying consumer insights to areas such as strategic planning, consumer experience, access to care, program/service investment decisions, and pricing
- **Access**: Enhancing access to care and clinicians through various means, such as retail clinics, virtual visits, online scheduling, extended hours, and patient-provider messaging
- **Consumer experience**: Addressing common problems such as long wait times, confusing billing communications, inattentive clinicians, poor staff behavior, website problems, and inadequate wayfinding
- **Pricing**: Determining prices with tools such as benchmarking and analysis of service-level pricing risk, demand-elasticity, and price-volume tradeoff; and making meaningful price information available to consumers

Each of these areas is weighted equally, and organizations are placed into tiers ranging from 1 (most consumer-centric) to 4 (least consumer-centric), as outlined in Figure 1. Each Index category is derived from multiple survey questions and input from proprietary Kaufman Hall data and expertise.

*Ratings for individual organizations are not publically available. Survey respondents can receive results for their organization upon request. Contact consumer@kaufmanhall.com for more information.*
Significant Gaps Exist Between Priorities and Capabilities

While consumerism remains a priority for most healthcare organizations across the country, it is far from a capability for many. The survey results show some large gaps between the priority placed on key consumerism objectives and the actual capabilities that organizations have built in those areas (Figure 2).

For example, 90 percent of survey respondents said that improving key elements of the consumer experience was a high priority for their organizations, but only 30 percent have built capabilities in those areas. Similarly, 73 percent identified developing a diverse set of facility-based access points as a high priority, but just 25 percent have the needed capabilities.

The Digital Disconnect
Fifty-eight percent of healthcare leaders identified offering digital tools and information to enable consumer engagement as high priorities for their organizations. Of those, just 14 percent said they have those capabilities.

Building digital capabilities should be integral to organizations’ efforts to improve the end-to-end consumer experience, yet many are taking a more siloed approach that is disconnected from a broader consumer engagement strategy. In an age when more than three-quarters of the population carries a smartphone, consumers have access to more than 165,000 health-related apps, and more than 72 percent of U.S. Internet users look for health information online, healthcare providers need to be doing more to connect with their consumers where they live, work, and play.

For healthcare, the digital revolution is not an era on some distant horizon—it is already here and forever altering how care is delivered.

**Figure 2. The Priority-Capability Gap**

<table>
<thead>
<tr>
<th>Priority-Capability Gap</th>
<th>High Priority</th>
<th>Established Capabilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Improving key elements of the consumer/patient experience</td>
<td>90%</td>
<td>30%</td>
</tr>
<tr>
<td>Developing a diverse set of facility-based access points</td>
<td>73%</td>
<td>25%</td>
</tr>
<tr>
<td>Offering digital tools and information to enable consumer engagement</td>
<td>58%</td>
<td>14%</td>
</tr>
<tr>
<td>Developing a range of virtual/telehealth access points</td>
<td>56%</td>
<td>23%</td>
</tr>
</tbody>
</table>

Notes:
1) Priority defined as 7-10 rating of importance for categories
2) Current capability defined by “Evidence of Success” and “Measuring Results” response

Source: Kaufman Hall 2017 Healthcare Consumerism Survey
Organizational Value Propositions Are Out of Sync with Consumers

Significant discrepancies also exist when it comes to how well organizations are meeting consumer needs and wants, according to the survey. Respondents were asked to rank which factors most distinguish their organizations from the competition, and then which factors they believe their consumers value most in selecting a provider. Healthcare leaders had very different answers for the two categories (Figure 3).

Accessibility of care was seen as most important to consumers, followed by consumer experience (encompassing consumer interactions from initial contact through completion of care and rehabilitation)—but those factors ranked third and fifth respectively as differentiators in terms of what organizations currently offer consumers. Meanwhile, quality of clinical outcomes was cited as the top competitive differentiator for respondents, but ranked third for what respondents perceive as consumers’ priorities.

These responses suggest a general lack of alignment between what healthcare leaders see as their organizations’ primary competitive strengths, and what they perceive consumers want most. While many providers identify quality of clinical outcomes as a differentiator, it is a true point of differentiation for a relative few. Most organizations will need to define their market positioning in other ways. As one survey respondent described: “We’ve been trained to focus on quality, quality, quality—now we have to preserve that while also improving access and experience.”

Only by closing this gap can organizations truly become consumer-centric. Healthcare leaders must ensure that their organization’s value proposition aligns with what is most important to patients.

Figure 3. Consumer Expectations Versus Organizational Strengths

<table>
<thead>
<tr>
<th>Rank</th>
<th>What Our Consumers Want</th>
<th>Our Competitive Differentiators</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Accessibility of Care</td>
<td>Quality of Clinical Outcomes</td>
</tr>
<tr>
<td>2</td>
<td>Consumer Experience</td>
<td>Availability of Complex Care and Treatments</td>
</tr>
<tr>
<td>3</td>
<td>Quality of Clinical Outcomes</td>
<td>Accessibility of Care</td>
</tr>
<tr>
<td>4</td>
<td>Value</td>
<td>Geographic Coverage</td>
</tr>
<tr>
<td>5</td>
<td>Availability of Complex Care and Treatments</td>
<td>Consumer Experience</td>
</tr>
</tbody>
</table>

Source: Kaufman Hall 2017 Healthcare Consumerism Survey
Consumer Access Is a Work in Progress

As previously mentioned, accessibility of care is seen as the top priority in terms of what healthcare consumers want, yet the survey results show significant room for improvement in this area. When asked to describe retail-oriented access points, respondents overwhelmingly indicated that such offerings remain limited at their organizations. Overall, efforts to expand access are inconsistent and rarely informed by robust consumer insights. Only 15 percent of organizations rated in the Tier 1 category for aggressively moving to improve patient access (Figure 4).

Nearly half of respondents (47 percent) said they had no retail clinics, while 34 percent said they had only limited access to such clinics (Figure 5). Just 19 percent said their organizations offered significant access via retail clinics.

Results were similarly low for other offerings, including urgent care centers, ambulatory surgery centers, employer-based clinics, and freestanding imaging or lab-draw sites. Results for virtual access were particularly low, as providers have been slow to adopt online avenues to care. Just 23 percent of respondents said their organizations offer significant access via virtual visits, while an overwhelming 77 percent said they offered either no or limited access via virtual visits.

Figure 5. Availability of Non-Traditional Access Points

![Figure 5. Availability of Non-Traditional Access Points](source: Kaufman Hall 2017 Healthcare Consumerism Survey)
Enhancing access with a variety of entry points is a *must* for legacy healthcare providers to expand consumer options and experience, and vie with disruptive competitors that seek to lure patients with more convenient care options.

Providing a variety of physical and virtual “locations” is only one component of how consumers view access. Other methods of expanding consumer access are works in progress for many organizations—most either have some efforts in place, or are working to implement them. The most common measures include online patient portals, extended hours for diagnostic services, and same-day appointments (*Figure 6*). A full 60 percent of respondents said their organizations are working to offer online scheduling, and 52 percent are implementing same-day options for patients to speak with a physician. Forty-two percent of respondents said their organizations are working on increasing virtual visit offerings.

While such efforts are in the early stages for many, these results indicate that most healthcare leaders are aware of the importance of increasing access for consumers. Organizations that fail to move forward in these areas will be left behind. Many already are feeling the pressure. As one survey respondent put it: “Several years ago, we were a mover and a shaker, but now we’re behind the industry because consumerism has moved so quickly.”

*Figure 6. Innovative Methods for Patient Access*
Organizations Have a Narrow View of Consumer Experience

Survey respondents cited the quality of the patient experience as the second-highest priority for consumers, yet most admit that their organizations are just beginning to make needed improvements. Sixty-four percent of respondents rated in Tiers 3 and 4 for this category (Figure 7), indicating that most healthcare providers continue to take a more reactive approach to consumer issues—responding to complaints as they arise—rather than proactively working to improve the consumer experience.

Reducing Common Problems

The survey results further illustrate the prevalence of this approach. Many organizations report they are working to resolve common consumer complaints. When asked which experience issues are most important to consumers, an overwhelming majority said long wait times for appointments, followed by poor behavior by consumer-facing staff, confusing billing statements, and inattentive clinician behavior.

As a result, 68 percent of respondents said their organizations are working to reduce long wait times for appointments, 67 percent to simplify confusing billing statements, 60 percent to offer patients provider feedback in real time, and 56 percent to address poor staff behavior (Figure 8). However, consumer recognition for these efforts has been minimal. For example, only 5 percent of respondents said consumers have praised their organizations’ efforts to address long wait times for appointments.

Despite significant awareness of patient experience issues, these results demonstrate that organizations have had little success in addressing them to date. Overall, healthcare providers address consumer pain points as they are made aware of them—usually after a complaint has been issued—rather than preventing them at the forefront. As one survey respondent said: “[Providers] need to be strategic and proactive, and use data to make decisions and support the strategic plan, rather than being more reactive and simply responding to problems.”
Figure 8. Organizational Progress on Patient Experience Issues

- **Inability to provide real-time feedback**
  - Consumers Have Praised Solution: 3%
  - We've Addressed It: 16%
  - We're Working On It: 21%
  - Haven't Started Working On It: 60%
- **Lack of facility wayfinding**
  - Consumers Have Praised Solution: 6%
  - We've Addressed It: 35%
  - We're Working On It: 12%
  - Haven't Started Working On It: 47%
- **Poor behavior of consumer-facing staff**
  - Consumers Have Praised Solution: 3%
  - We've Addressed It: 11%
  - We're Working On It: 30%
  - Haven't Started Working On It: 56%
- **Confusing billing statements**
  - Consumers Have Praised Solution: 2%
  - We've Addressed It: 17%
  - We're Working On It: 14%
  - Haven't Started Working On It: 67%
- **Long wait times for appointments**
  - Consumers Have Praised Solution: 5%
  - We've Addressed It: 24%
  - We're Working On It: 3%
  - Haven't Started Working On It: 68%

*Source: Kaufman Hall 2017 Healthcare Consumerism Survey*
Consumer Insights Are Incomplete and Applied Inconsistently, if at All

To better address consumer needs, organizations must have access to reliable data from a variety of sources to better understand consumers’ behaviors and priorities. Yet nearly three-fourths of organizations received low Tier 3 and Tier 4 ratings relative to their efforts to gather, analyze, and leverage consumer insights for decision making (Figure 9).

The survey results show that many organizations are not utilizing modern tools and methodologies to gain comprehensive consumer insights (Figure 10). Most organizations (97 percent) continue to rely on post-visit patient surveys, even though such surveys historically have low response rates. Only 23 percent of respondents said their organizations use advanced analytics to develop consumer insights, and just 34 percent gather real-time feedback from patients. Consumer insights are applied inconsistently overall. Organizations that use multiple means of gathering consumer insights rarely collate and apply them in a consistent way to drive key strategies and decisions.

A survey respondent said: “It’s not very often that we go out and ask people what they think.” Such a narrow approach is a recipe for failure in the new healthcare era.

**Figure 9. Index Ratings: Insights**

<table>
<thead>
<tr>
<th>Tier 1</th>
<th>16%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tier 2</td>
<td>13%</td>
</tr>
<tr>
<td>Tier 3</td>
<td>18%</td>
</tr>
<tr>
<td>Tier 4</td>
<td>53%</td>
</tr>
</tbody>
</table>

Source: Kaufman Hall Healthcare Consumerism Index

**Figure 10. Use of Tools for Gaining Consumer Insights**

<table>
<thead>
<tr>
<th>Tool</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Post-visit patient surveys</td>
<td>97%</td>
</tr>
<tr>
<td>Quantitative research</td>
<td>85%</td>
</tr>
<tr>
<td>Analysis of internal patient data (i.e. demographics, CRM)</td>
<td>72%</td>
</tr>
<tr>
<td>Real-time feedback during visit</td>
<td>34%</td>
</tr>
<tr>
<td>Advanced analytics</td>
<td>23%</td>
</tr>
</tbody>
</table>

Source: Kaufman Hall 2017 Healthcare Consumerism Survey
Pricing Strategy Remains a Blind Spot for Many

Efforts to develop effective pricing strategies are particularly lacking. Less than 10 percent of organizations rated in Tiers 1 and 2 for pursuing pricing strategies and price transparency as high priorities, according to the Index (Figure 11).

The survey results indicate that healthcare organizations could be doing more in terms of pricing analyses. Fifty-nine percent said their organization benchmarks its negotiated payment to the market—a practice that all organizations should be using. Only 12 percent said their organizations conduct consumer research to inform analyses of demand-elasticity or patients’ willingness to pay. Pricing transparency and the perceived value of a service relative to alternatives will continue to grow in importance. A recent study of consumer interactions at one major health system found that price estimates and overall cost were among consumers’ greatest concerns.

Figure 12. Price Transparency Efforts

Source: Kaufman Hall 2017 Healthcare Consumerism Survey
Efforts to provide price transparency for patients and families are particularly sparse (Figure 12). Fifty-nine percent of respondents said their organizations respond via phone to price quote requests within a defined time period, which should be a minimum requirement for any consumer-oriented organization. Less than a quarter of respondents participated in other transparency efforts, such as offering price transparency tools, listing prices on their websites, or offering online price estimation tools.

Healthcare organizations are under mounting pressure to improve price transparency as costs continue to shift to patients (e.g. high-deductible health plans, and rising co-pays and premiums), and consumers become increasingly frustrated with difficulties in getting reliable cost estimates. Organizations that fail to make progress in accurately communicating costs to patients upfront risk alienating loyal consumers and turning away potential new patients, who ultimately will seek care elsewhere.
Where to Go from Here

One survey respondent posed this fundamental question: “It’s very easy for ‘consumer insights’ to get siloed into its own little niche. How connected is it to solving business issues and driving strategy?”

The answer is: Consumer insights should be intrinsic to everything healthcare providers do.

A relentless focus on consumers is key to growth in today’s rapidly changing healthcare environment. It is not just one initiative to be lumped in with the many, but rather an overarching capability and mindset that should be integral to them all. Organizations must develop a deep and nuanced understanding of their consumers—from demographics to health status to attitudes and behaviors—and use those insights to not only meet consumer needs, but to anticipate unidentified current and future needs.

Results from Kaufman Hall’s 2017 Healthcare Consumerism Survey clearly show that healthcare organizations are lagging and need to do more to keep pace with consumers’ changing expectations. A Tier 3 or 4 rating is insufficient as consumers increasingly compare healthcare to their experiences with more advanced, consumer-centric entities like Amazon, Netflix, and Uber.

The good news is that the survey found high performers in specific areas. Organizations that perform well in some categories can improve overall performance significantly by taking a more systematic approach to placing the consumer at the core of their business strategy. Healthcare leaders should focus efforts in three key areas:

Define your value proposition. In order to make progress, it first is critical to understand where you stand. Healthcare leaders must define, evaluate, and quantify their organization’s overall value proposition to consumers. This includes gaining a thorough understanding of their current market position and future needs with a comprehensive position assessment, including analysis of the market, operations, consumers, current and emerging competitors, and financial strength. Ultimately, organizations should seek to establish a value proposition with a differentiated position across selected dimensions of consumer value, including business/service mix, access, price/cost, quality, and consumer experience.

Re-engineer the “factory.” To succeed in an era of rapid change and innovation, organizations need to do the basics extremely well within their care delivery model. For example, they need to operate with a high degree of efficiency, significantly reducing clinical variation, eliminating duplicative sites and services, and reworking clinical and operational processes to eliminate unnecessary steps and costs. Common consumer dissatisfiers, like long wait times and confusing websites, need to be remedied.
Reimagine growth. Taking a broader view of growth is essential as competitors encroach from all sides. Hospitals and health systems should expand beyond the traditional focus areas of inpatient and outpatient care. Virtual visits, digital assistants, medical tracking devices, transportation, wellness services—all of these and many more are part of the healthcare picture for modern consumers and represent a significant share of healthcare revenue that is largely untapped by “traditional” providers. Organizations may be able to develop a broader range of services internally, or they may need to pursue creative partnerships with established innovators, start-ups, other providers, or a combination of these. Activity in this area can open up new revenue streams, as well as help protect and defend current high-margin revenue sources like diagnostic imaging and labs that are under growing pressure from competitors.

Such changes will require significant leadership and focus to ensure an organization is willing and able to take this journey of transformation. According to the survey, strong senior leadership is the primary enabler of progress for improving consumer-centric capabilities and performance. Other contributing factors include a culture of innovation, initiative from front-line managers and staff, and the need to respond to competitors and consumer complaints.

Developing a robust consumer-centric approach is essential to effective strategic planning for healthcare's future. Healthcare leaders need to be prepared to make the needed investments. One survey respondent summarized it well: “We need to be ‘outside-in,’ not ‘inside-out.’”

The process is as challenging as it is worthwhile. As Amazon CEO Jeff Bezos told his employees: “We are working to build something important, something that matters to our customers, something that we can all tell our grandchildren about. Such things aren’t meant to be easy.”

More than any other type of organization in any industry, hospitals and health systems have an opportunity to build something truly important for the people they serve.

References


Participating Organizations

Kaufman Hall would like to thank all those who participated in the 2017 Healthcare Consumerism Survey. Respondents encompassed representatives from more than 125 hospitals and health systems across the country, including the following:

Advocate Health Care  
Amistad Community Health Center  
Ann & Robert H. Lurie Children's Hospital of Chicago  
Ascension  
Aspirus, Inc.  
AtlanticCare  
Avera Sacred Heart Hospital  
Baptist Health  
Bassett Healthcare Network  
Beaumont Health  
Berger Health System  
Blanchard Valley Health System  
Boca Raton Regional Hospital  
Carle Health System  
Catholic Health Initiatives  
Catholic Health Services of Long Island  
Centura Health  
CHI Memorial  
Children's Hospital of Philadelphia  
Children's of Alabama  
CHRISTUS Health  
Columbus Regional Health  
Community Health Center of Branch County  
Community Health Network  
Crawford County Memorial Hospital  
Dartmouth-Hitchcock Health System  
Davis Health System  
DeKalb Medical  
Dignity Health  
Edward-Elmhurst Health  
Fairview Health Services  
Florida Hospital  
Froedtert Health  
Gaylord Specialty Healthcare  
Good Shepherd Rehabilitation Network  
Goshen Health  
Greenville Health System  
Gundersen Health System  
Henry County Hospital  
Heywood Healthcare  
HonorHealth  
Indiana University Health  
INTEGRIS  
Kaiser Permanente  
King's Daughters Medical Center  
Kona Community Hospital  
LifePoint Health  
Magnolia Regional Health Center  
Memorial Hospital of Sweetwater County  
Mercy  
Mercy Health Partners  
Middlesex Hospital  
Monroe Clinic  
Montage Health  
MultiCare Health System  
Munson Healthcare  
Navicent Health  
Nebraska Medicine  
New Hanover Regional Medical Center  
Norman Regional Health System  
Northern Cochise Community Hospital  
Northwestern Medicine  
Norton Healthcare  
OhioHealth  
Orlando Health  
Palmetto Health  
Panorama Orthopedics & Spine Center  
PeaceHealth  
Pella Regional Health Center  
Penn Highlands Healthcare  
Peterson Regional Medical Center  
PIH Health  
Presbyterian Healthcare Services  
ProMedica  
Providence St. Joseph Health  
Rady Children's Hospital–San Diego  
Reid Health  
Riverside Health System  
Roswell Park Cancer Institute  
Rush Copley Medical Center  
Rutland Regional Medical Center  
SCL Health  
Sentara Martha Jefferson Hospital  
Seton Healthcare Family  
Spectrum Health  
SSM Health  
St. Luke's Hospital  
Summit Health  
The Medical Center at Elizabeth Place  
ThedaCare  
University Health Care System  
University of Arkansas for Medical Sciences  
University of Illinois Hospital & Health Sciences System  
University of Maryland  
Shore Regional Health  
University of Vermont Medical Center  
UW Health  
Vidant Health  
Virtua Health System  
Western Connecticut Health Network
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