Healthcare experience:

The difference between loyalty and leaving

Healthcare consumers' rapidly evolving experience expectations

Healthcare organizations want to make meaningful progress in responding to people's rapidly evolving experience expectations. **After all, loyalty and engagement hang in the balance.**

Healthcare consumerism isn't new. But people's experience expectations are evolving. All the time. The pandemic supercharged a cultural shift that is continually raising the bar for simpler, more convenient and more human-centric experiences tuned to the changing context of people's lives. Healthcare is more experiential, less transactional. Providers' growth and customer retention is increasingly tied to experience. And payers are getting disrupted by players with digital-native business models centered on delivering breakthrough experiences.

Healthcare organizations have recognized the need for change and have begun to invest in and transform experience capabilities in recent years. But are they making the right investments fast enough to keep pace?

We surveyed almost 21,000 US consumers of both providers and payers to find out.

The results reveal that access, ease of doing business, digital engagement and trust are non-negotiable when it comes to creating health experiences that meet consumers' experience expectations.

These findings underscore how essential it is to get health experiences right on consumers' terms, and how difficult doing this has become. Because winning consumer engagement and loyalty not only requires the ability to meet people where they are, it also means understanding where they are going.
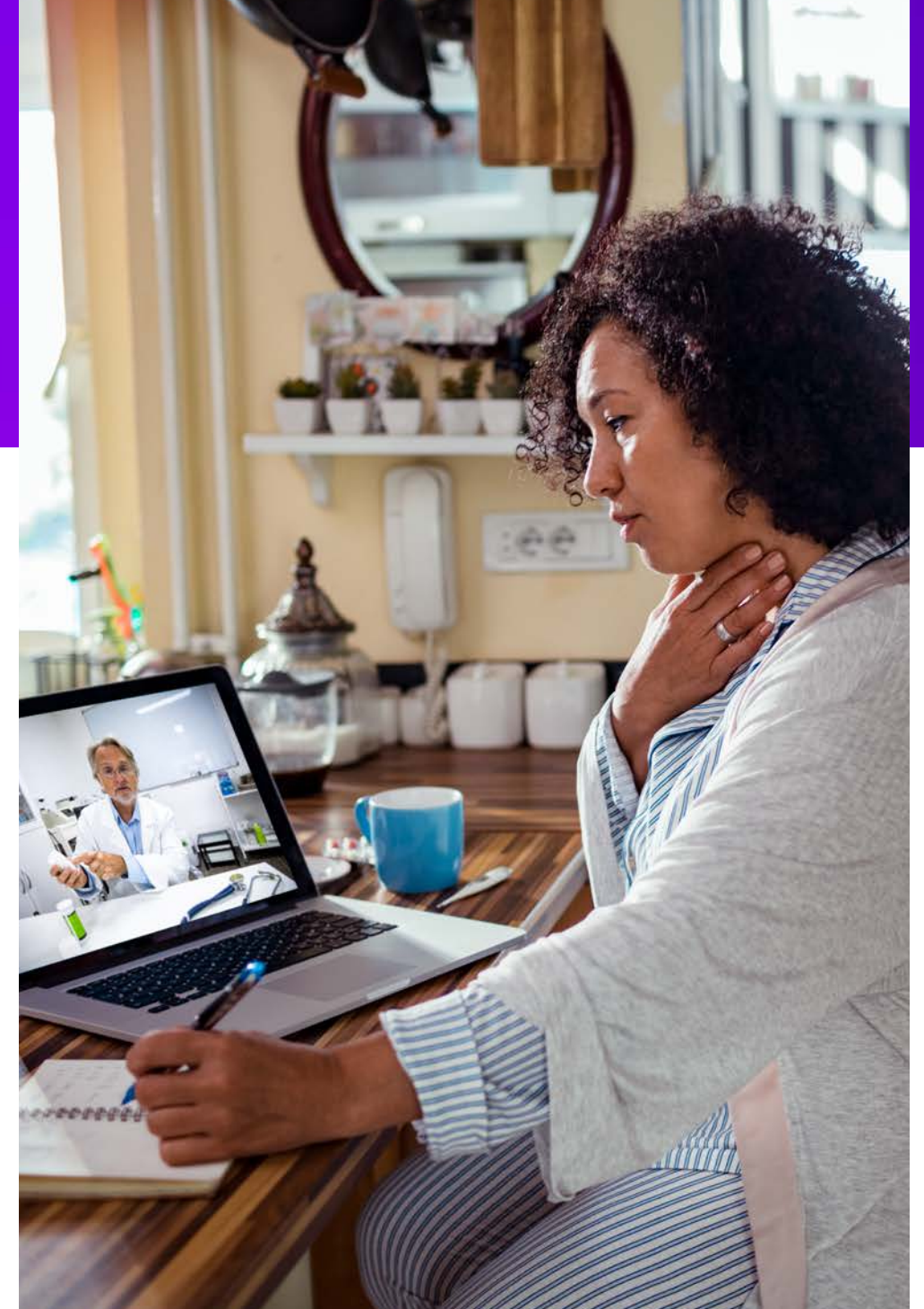
People are holding providers and payers more accountable

Healthcare organizations have been fully aware of the rise in consumerism for several years. Yet they have often struggled to respond fast enough to people's changing expectations.

Our survey shows an increase in people's intentions around provider selection and their propensity to switch when dissatisfied. Nearly one-third (30%) selected a new provider in 2021—up from 26% in 2017. One quarter switched providers because they were unhappy—up from 18% in 2017 (Figure 1).[1]

Figure 1

People are switching providers more often than they did five years ago.

Selected New Provider		Switched Because Unhappy	
26%	**30%**	**18%**	**25%**
2017	2021	2017	2021
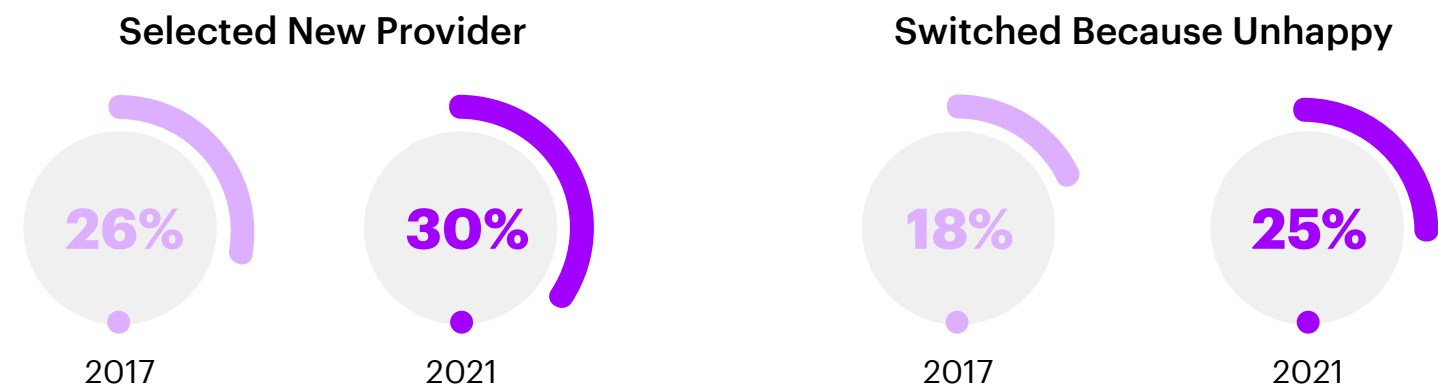
Source: Accenture Patient Experience Benchmark Survey, 2017 and 2021

Future decision-makers are a flight risk ...

Switching is far more common among younger people, especially Gen Z and millennials. **Younger generations are nearly six times more likely to switch providers (Figure 2)**.[2] They are in an important and unique position as frequent healthcare decision-makers for both their aging parents and children today. And they might need care for themselves now or in the future. Healthcare organizations' future growth depends on how well they understand what it takes to keep younger people loyal.
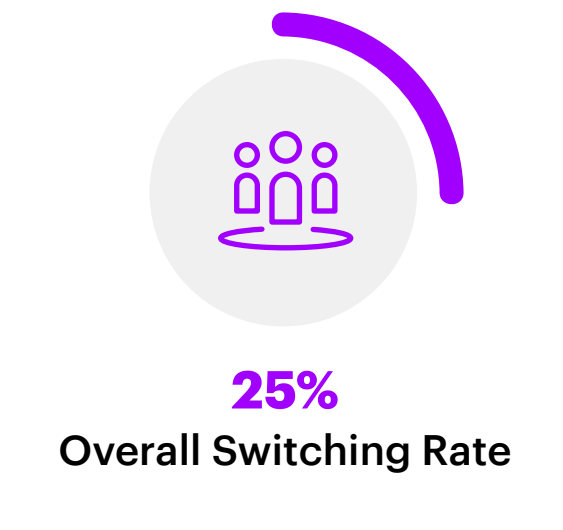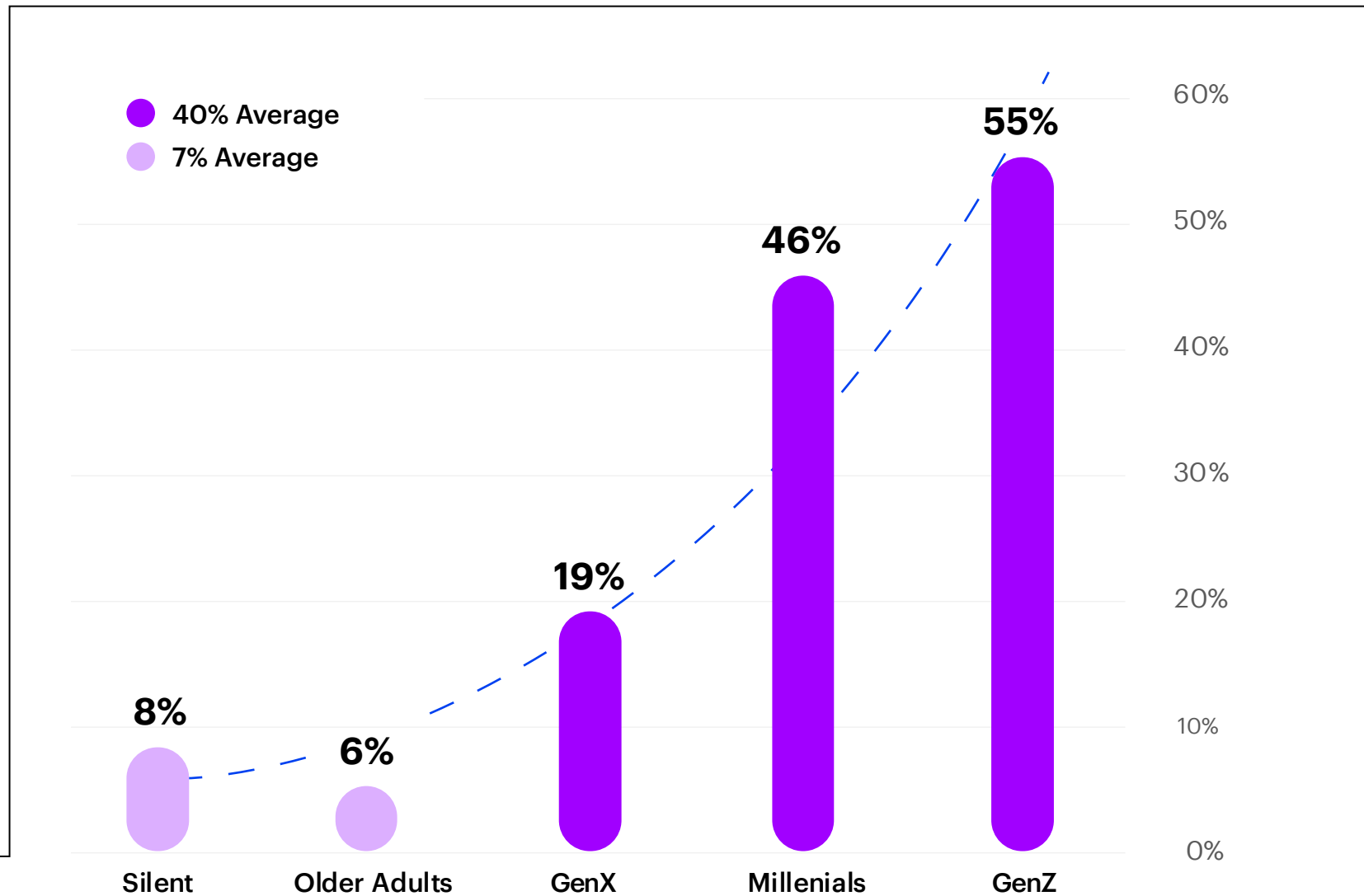
25%
Overall Switching Rate

Younger generations are nearly six times more likely to switch providers than older people are.

⬤ **40% Average**
⬤ **7% Average**

55%
46%
19%
8%
6%

| Silent | Older Adults | GenX | Millenials | GenZ |

60%
50%
40%
30%
20%
10%
0%

Source: 2021 Accenture Patient Experience Benchmark Survey
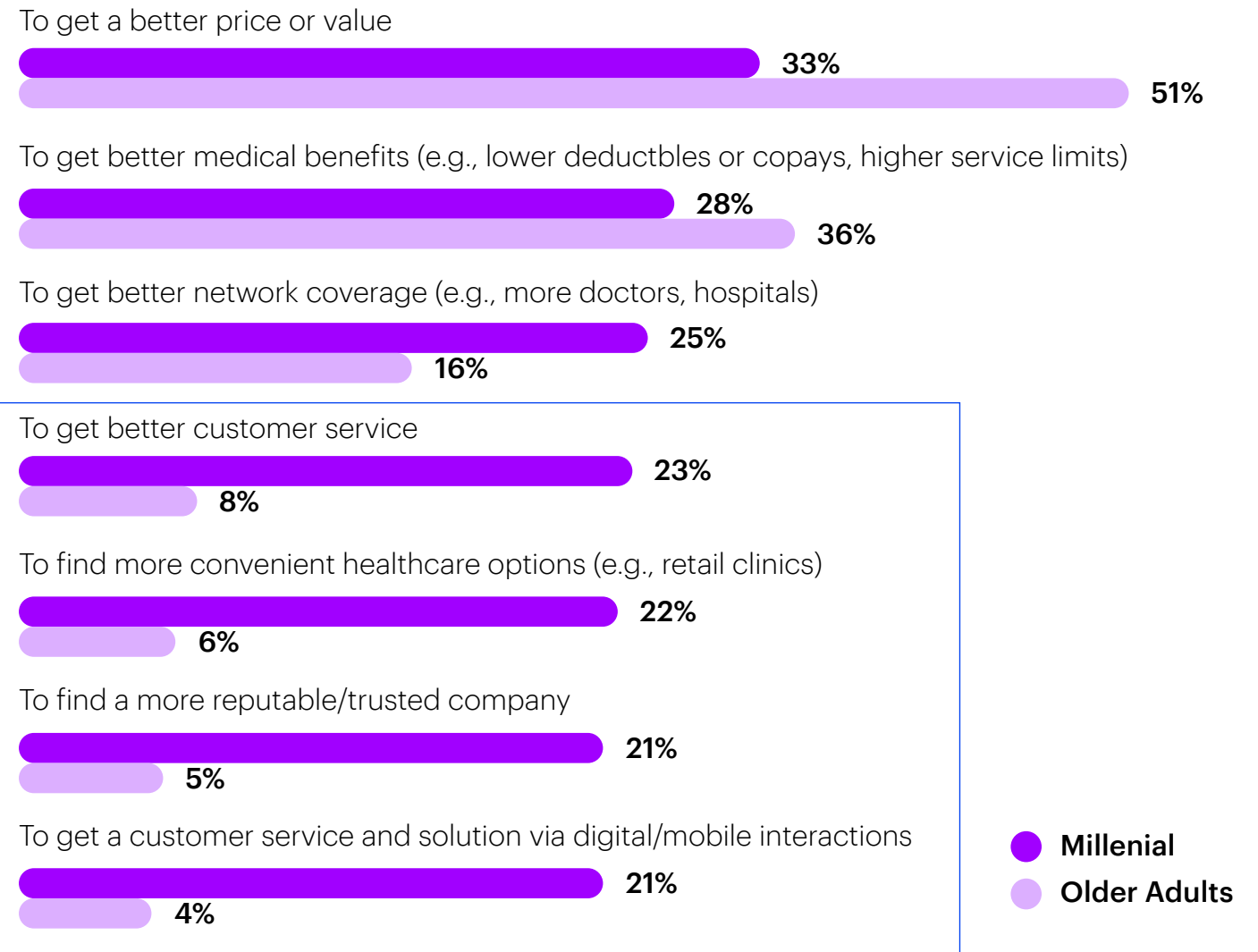
...and they lean into experience

We see a similar dramatic shift among younger people when looking at selection drivers for health insurance plans.

The survey results indicate that younger generations increasingly value experience factors like customer service, convenience and trust over price. Millennials are three to five times more likely to value these factors than older adults when selecting an insurance plan.

Younger people are less likely than older adults to consider price, medical benefits and network coverage to be top factors when selecting a health plan.[3]

Younger generations care more about experience factors when selecting a health insurance plan.

To get a better price or value
33%
51%

To get better medical benefits (e.g., lower deductbles or copays, higher service limits)
28%
36%

To get better network coverage (e.g., more doctors, hospitals)
25%
16%

To get better customer service
23%
8%

To find more convenient healthcare options (e.g., retail clinics)
22%
6%

To find a more reputable/trusted company
21%
5%

To get a customer service and solution via digital/mobile interactions
21%
4%

● **Millenial**
● **Older Adults**

Source: 2022 Accenture Consumer Payer Experience Benchmark Survey

Experience factors are driving the upswing in **switching**

For providers:

Once people begin their healthcare experience, many find it difficult to navigate the entire care journey. In fact, **nearly 80% of provider switchers cite ease of navigation** factors as the reason for leaving. These factors include difficulties in doing business, bad experiences with administrative staff and inadequate digital solutions. Consider too that the rate of switching for ease of navigation factors is nearly double that of even a poor clinical experience (Figure 4).[4]

Figure 4
78% of people say ease of navigation factors are the reason for leaving their providers.
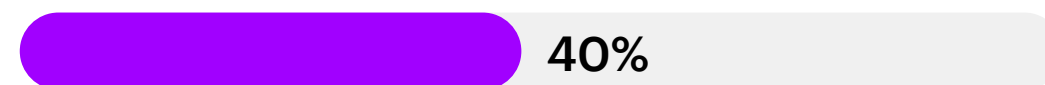
Identified as Top Factor

**Switching Provider Factors**

Ease of Navigation

78%

- They were difficult to do business with
- I had a bad experience with the front desk or administrative staff
- The digital/online service and support solutions do not meet my needs (e.g., mobile, digital/virtual assistants)

Clinical Experience/Expertise

40%

- I had a bad experience with a doctor or a member of the care team
- Got referred by someone I trust to a better provider
- Found someone more expert for my clinical needs

Convenience

8%
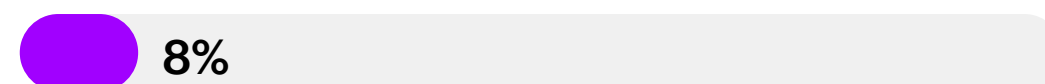
- Their appointment hours were inconvenient
- I was not able to get an appointment quickly enough
- Their location(s) were not convenient to work or home

Source: 2021 Accenture Patient Experience Benchmark Survey

For payers:

While people leave payers for many reasons, those we surveyed cite experience as the most important reason. **About half (49%) say that experience factors made them leave.** These factors include inaccurate or inconsistent information, unanswered questions, poor experiences using digital tools, poor customer service and discomfort with how payers used their personal data. After experience, people are most likely to switch payers because of benefits and coverage (Figure 5).[5]

Figure 5
Nearly half of people leave their payers because they are dissatisfied with the experience.

Identified as Top Factor

Ease of Navigation

49%

Clinical Experience/Expertise

35%

Access/Network

32%

Switching Provider Factors

- Information provided to me was not accurate or inconsistent
- I was unable to get questions answered
- Poor experience using digital methods and tools (e.g., online, mobile app)
- Poor experience working with customer service
- I did not like the way they were utilizing personal data about me
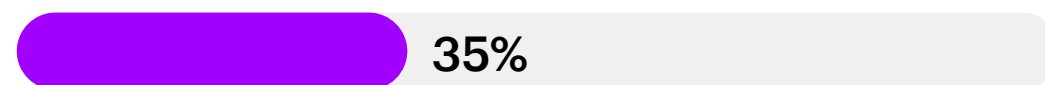
- The prescription drug benefits did not meet my needs/expectations
- Condition Management programs were not robust and did not meet my needs
- The wellness or supplemental benefits/perks were not robust/did not meet my needs

- My preferred doctor/hospital was not in prior plan network
- Lack of convenient health care options

Source: 2022 Accenture Consumer Payer Experience Benchmark Survey

How to humanize experiences to drive engagement and loyalty

Our research reveals that to deliver the health experiences that people expect today—and keep people at the center of engagement—there are four factors to focus on across every part of the care journey.

01 Access

People expect **availability** of services that meet their unique needs...

02 Ease of doing business

Along a personalized healthcare journey of **convenient** interactions...

03 Digital engagement

With access to **tools** that match their individual level of digital engagement...

04 Trust

To build **confidence and loyalty** with their healthcare organizations.
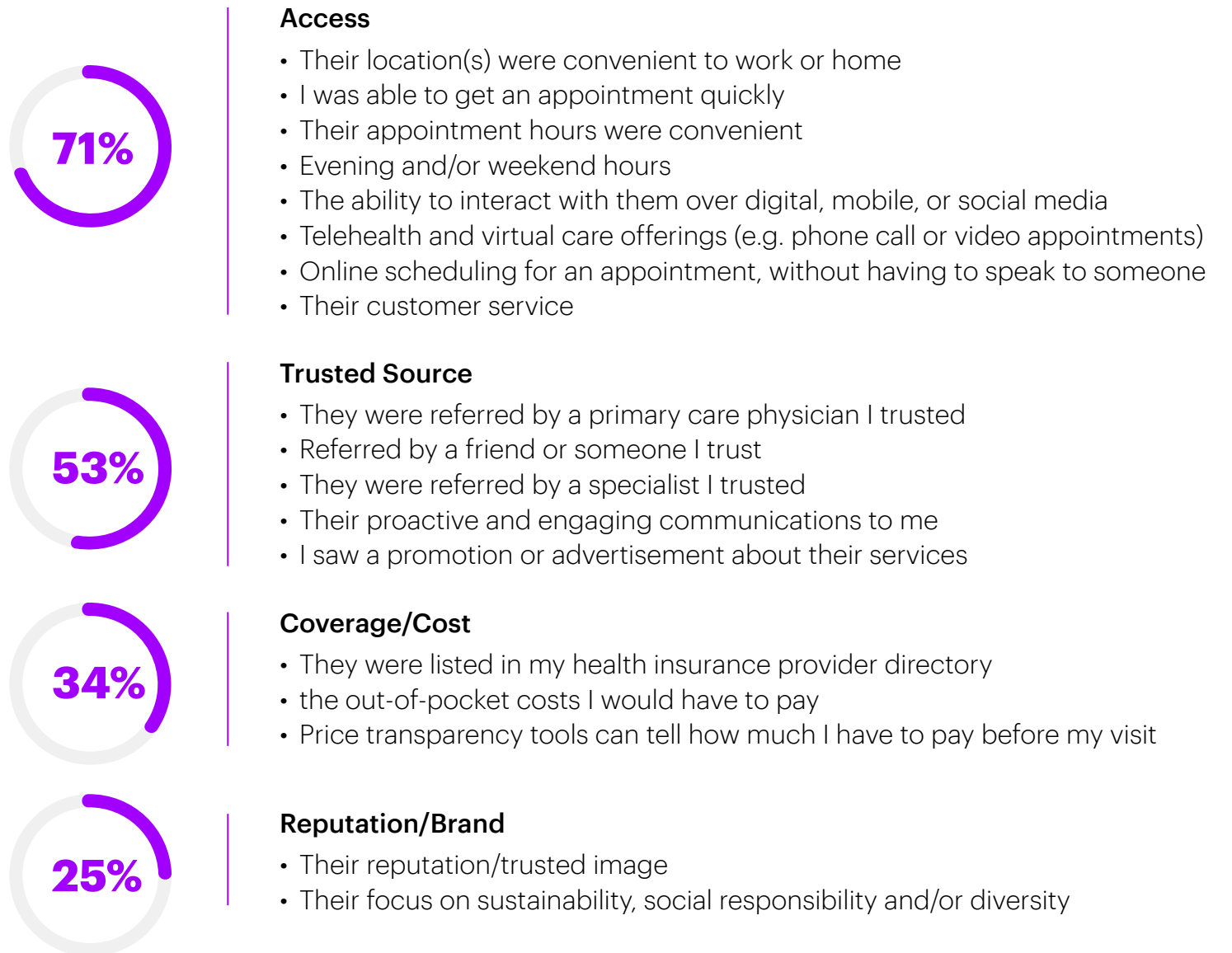
01 Access

Access

An overwhelming 71% of people cite access as a top factor in selecting a new provider.[6] They value things like appointment availability, convenience, customer service and the ability to connect to their provider through their preferred channels. Access is a known imperative across many healthcare organizations. While it's a complex issue to address, organizations that have invested in transformational change are gaining ground.

Although access factors far outweigh all others, a trusted referral source is also important. Just over half of respondents (53%) consider it to be a top factor in their selection of a new provider (Figure 6).[7] This makes sense considering that trusted sources naturally help people with access and navigation support, which we know are very important to them.

> The fact that people value trusted sources makes sense considering that they help with **access and navigation support**, which we know are important.

Access is a top factor influencing how people select providers.

71%

Access
- Their location(s) were convenient to work or home
- I was able to get an appointment quickly
- Their appointment hours were convenient
- Evening and/or weekend hours
- The ability to interact with them over digital, mobile, or social media
- Telehealth and virtual care offerings (e.g. phone call or video appointments)
- Online scheduling for an appointment, without having to speak to someone
- Their customer service

53%

Trusted Source
- They were referred by a primary care physician I trusted
- Referred by a friend or someone I trust
- They were referred by a specialist I trusted
- Their proactive and engaging communications to me
- I saw a promotion or advertisement about their services

34%

Coverage/Cost
- They were listed in my health insurance provider directory
- the out-of-pocket costs I would have to pay
- Price transparency tools can tell how much I have to pay before my visit

25%

Reputation/Brand
- Their reputation/trusted image
- Their focus on sustainability, social responsibility and/or diversity

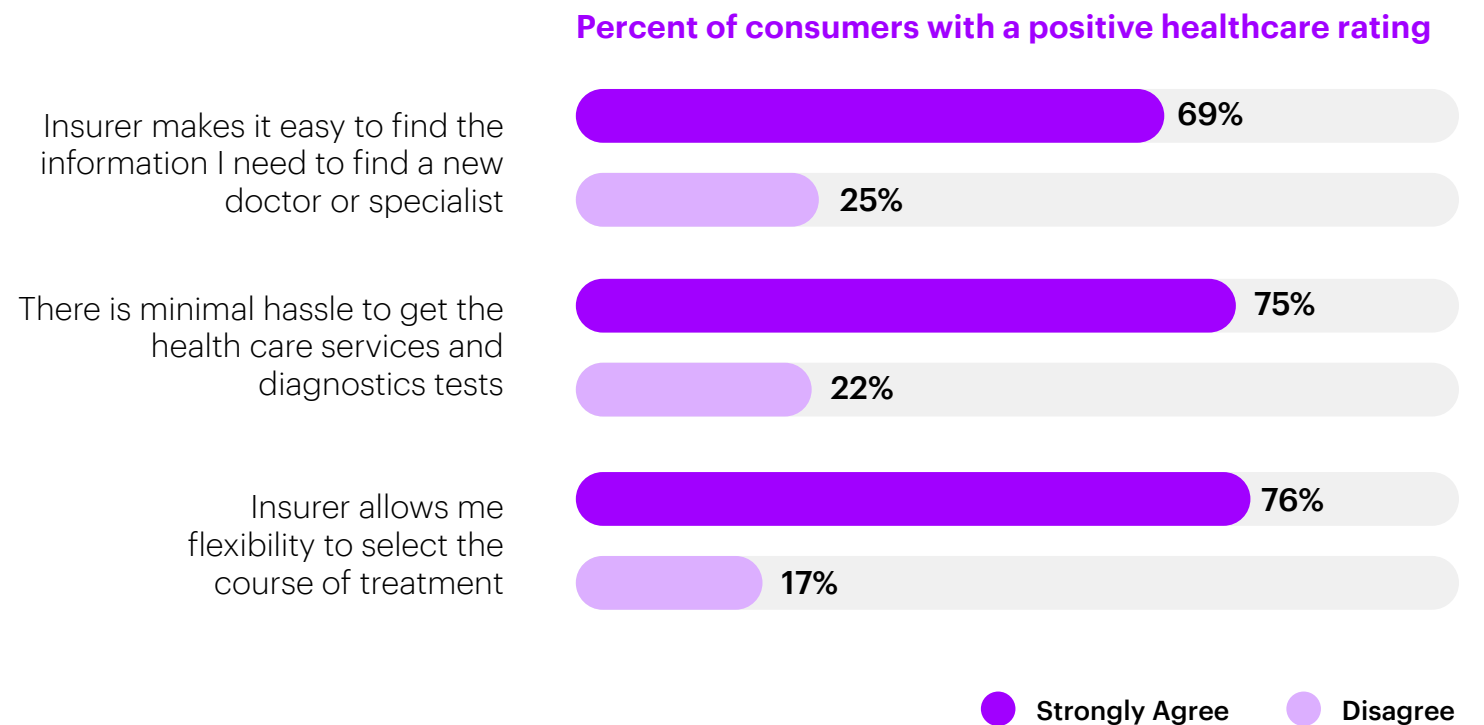Source: 2021 Accenture Patient Experience Benchmark Survey

Access

One of payers' primary roles is enabling people to access the quality care they need. People want that to happen with the right information, minimal hassle and flexibility. Payers' effectiveness across these factors has a significant impact on people's perception of their health experiences, and as such, on their likelihood of staying. People who have a positive perception of payer access factors are far more likely to rate their overall healthcare experience positively (Figure 7).[8]

Payer access factors impact healthcare ratings.

Percent of consumers with a positive healthcare rating

Insurer makes it easy to find the information I need to find a new doctor or specialist
- 69%
- 25%

There is minimal hassle to get the health care services and diagnostics tests
- 75%
- 22%

Insurer allows me flexibility to select the course of treatment
- 76%
- 17%

● Strongly Agree ● Disagree

Source: 2022 Accenture Consumer Payer Experience Benchmark Survey

02 Ease of doing business

Ease of doing business

Closely connected to access, ease of doing business also keeps people loyal and engaged in healthcare. Together, these factors make up the entire experience of navigating and interacting across the healthcare journey. Considering how much people care about and prioritize their ability to access services, it's only natural that they have the same expectations for the rest of the experience.

Access to services is so important that ease of doing business has a considerable impact on loyalty. **People who find their providers very easy to work with are nine times more likely to stay than those who find them difficult to work with—and three times more likely to stay than if their provider is even somewhat easy to work with (Figure 8).**[9]

Similarly, people are four times more likely to stay with payers they find are very easy to work with compared to those that find their payer difficult—and twice as likely to stay than if the payer is even somewhat easy to work with (Figure 8).[10]

Figure 8

People who find their providers and payers very easy to work with are the most likely to stay.
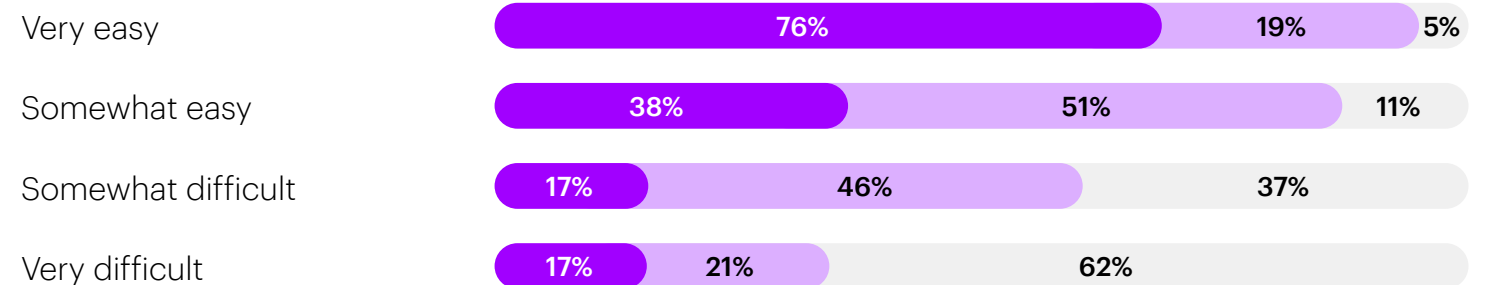
Provider

How easy is doing business?	How likely to stay?
Very easy	82% · 15% · 3%
Somewhat easy	27% · 51% · 11%
Somewhat difficult	13% · 35% · 52%
Very difficult	9% · 10% · 81%

Payer

How easy is doing business?	How likely to stay?
Very easy	76% · 19% · 5%
Somewhat easy	38% · 51% · 11%
Somewhat difficult	17% · 46% · 37%
Very difficult	17% · 21% · 62%
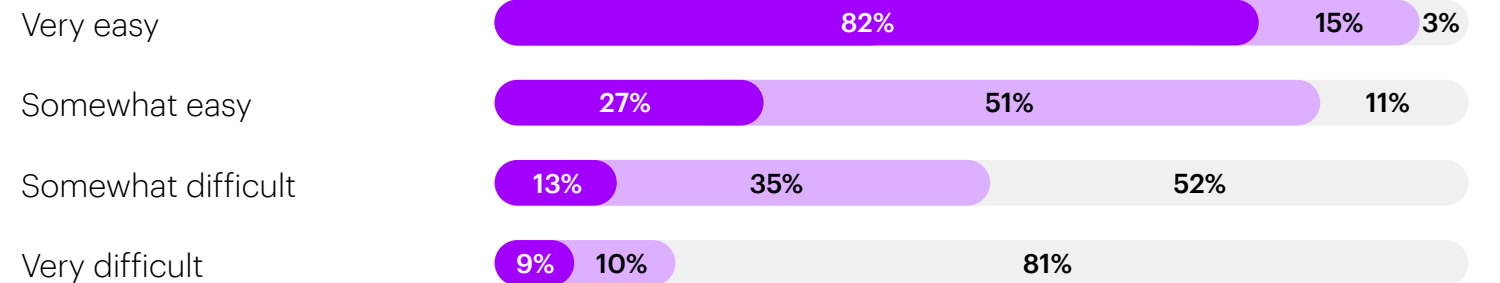
● **Most likely** ● **Somewhat likely** ○ **Unlikely**

Source: 2021 Accenture Patient Experience Benchmark Survey, 2022 Accenture Consumer Payer Experience Benchmark Survey

03 | **Digital engagement**

15

Digital engagement

The research also shows that digital engagement is a strong predictor of loyalty. Put simply, people who are highly digitally engaged are significantly more loyal. **Nearly 80% of highly digital people are likely to stay with their providers. This is more than 20% greater than all other digital engagement categories.**

The most highly digital people are also more likely to find their providers easy to do business with and to trust them. The connection between digital engagement and trust is particularly notable. Almost all (90%) of highly digitally engaged people have complete trust in their providers—more than 30% higher than all other digital engagement categories (Figure 9).[11]

Figure 9
Highly digital people are the most likely to be loyal, find providers easy to work with and trust them.

79% / 58%	**90%** / 57%	**81%** / 60%
Likely to stay	Complete Trust	Easy doing business

● Highly Digital
● Other Digital

Source: 2021 Accenture Patient Experience Benchmark Survey

What does it mean to be digitally engaged?

Low digital
They prefer to rely on traditional channels and interactions. Even then, they leave digital traces.
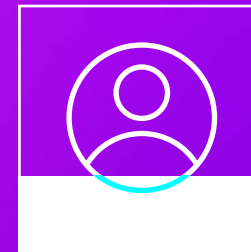
Selectively Digital
They selectively engage in digital for utiility value and convenience but will quickly fall back to traditional channels and interactions based on experience.
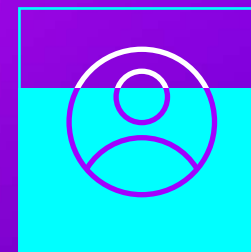
Mostly Digital
They are more likely to attempt to leverage digital methods to engage and demonstrate a preference for omni-channel experiences.
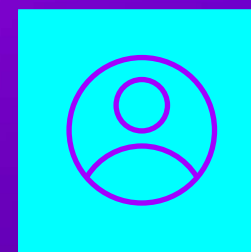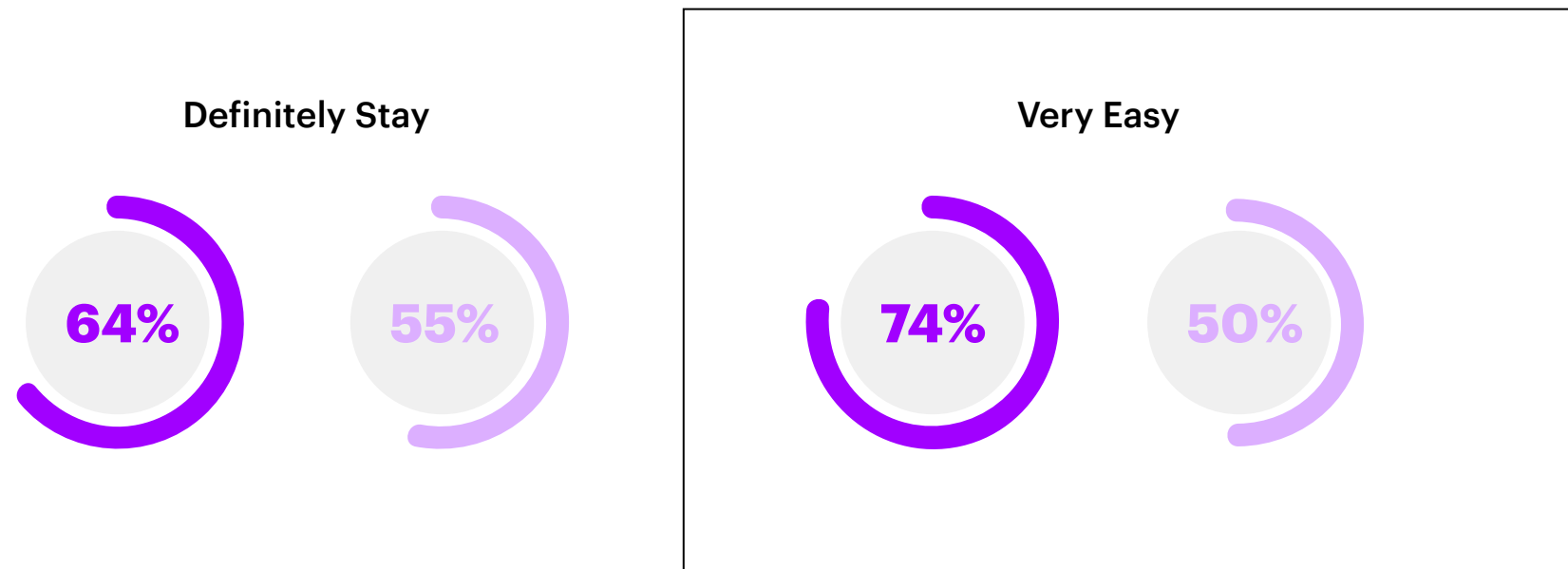
Highly Digital
They make digital part of all dimensions in their life and are likely to have a "digital first" approach to engagement–only falling back to traditional channels when digital methods fail or are unavailable.

● Digitally engaged

Digital engagement

When it comes to how highly digitally engaged people interact with payers, they are more likely to stay (64% versus 55%) and more likely to consider their payer very easy to do business with (74% vs 50%) (Figure 10).[12]

Figure 10
Highly digital people are the most likely to be loyal and find payers easy to work with.

Definitely Stay

64% **55%**

Very Easy

74% **50%**

● **Highly Digital** ● **National Average**

Source: 2022 Accenture Consumer Payer Experience Benchmark Survey

04 | **Trust**

Trust

Like highly digitally engaged consumers, nearly all people who trust their providers stay with them. **Trusters[13] are five times more likely to stay with their providers than all other categories, and they are almost seven times more likely to stay than those who don't trust their providers at all (Figure 11).[14]** Similarly, trusters are four times more likely to stay with payers than distrusters—and almost twice as likely as neutrals to remain with payers they trust (Figure 12).[15]
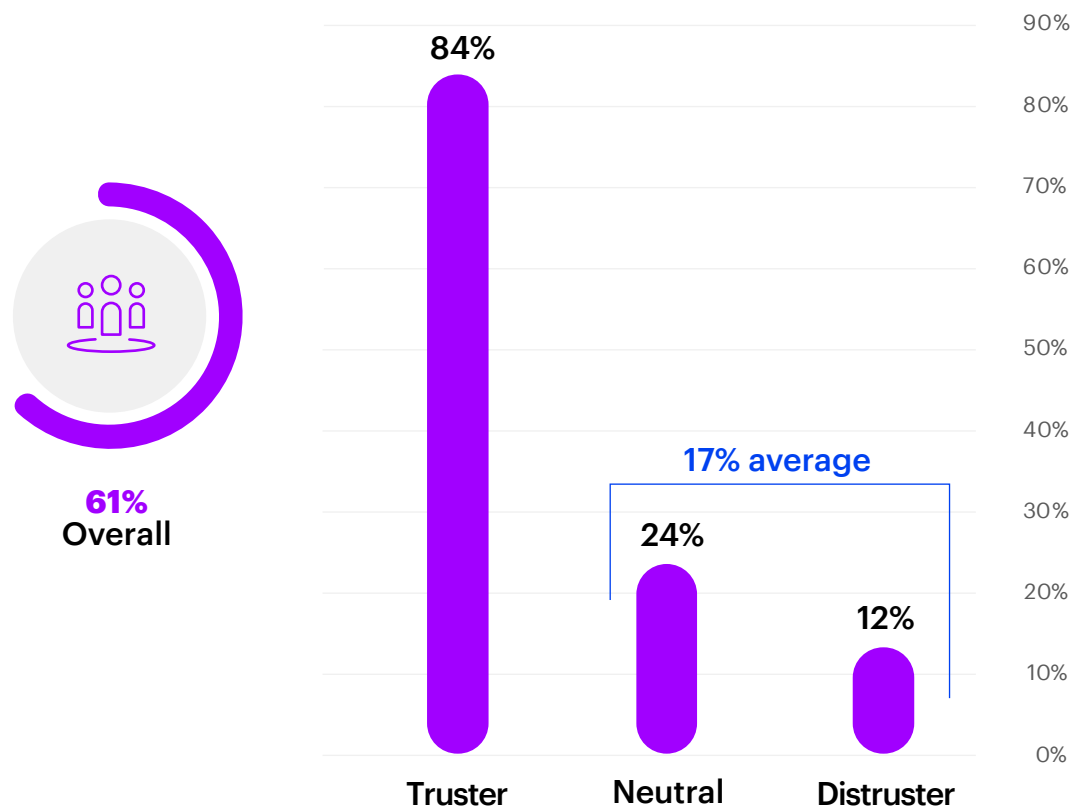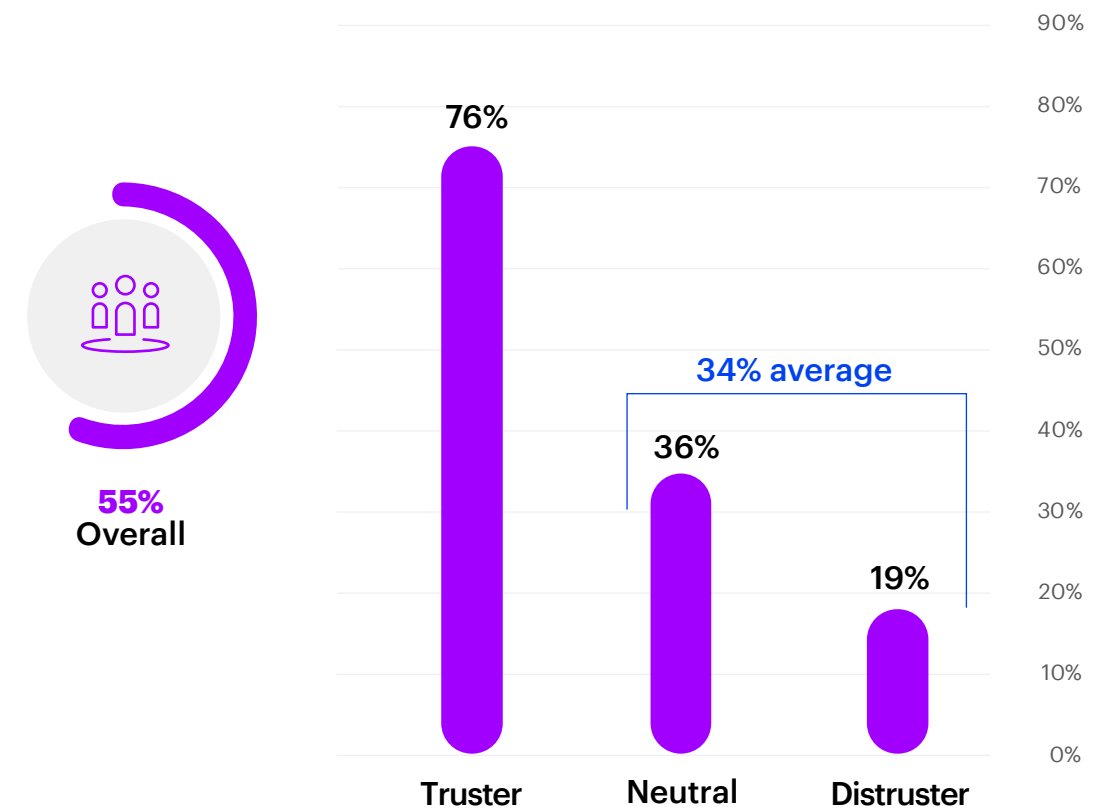
What drives trust in healthcare?

Trust is grounded in people's experiences across many interactions. However, the experiences that have the biggest impact on trust for both providers and payers relate to clear communication and ease of engagement.

People trust providers who...

- Make them feel heard and informed about diagnosis and treatment
- Are clear about treatment and what it requires
- Have doctors and care teams that work well together and answer questions
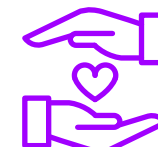
People trust payers who...

- Provide consistent information across channels
- Help them understand their coverage
- Minimize hassles to get care

Meeting experience expectations. Where to start—and what to take on.

Experience is a transformational agenda. It's important to resist the muscle memory of siloed improvement efforts that lack the scope and scale needed for real change. With the real-world constraints of budgets and resource limitations, a business case and roadmap will help leaders establish their experience north star, prioritizing factors most likely to impact the bottom and top lines.

The key is to balance consumer and business benefits over time
Here are the fundamentals for success:

Build a strong foundation

Healthcare organizations can evolve their capabilities from systems of record to systems of engagement and understanding. Doing so requires an operating model and integrated ecosystem that is experience-led and scalable. What's non-negotiable? The ability to enable ease of access and navigation, engagement across channels and personalized interactions.

Focus on the connected journey

Addressing experiences across interactions is non-negotiable to build loyalty and trust. Creating an omnichannel experience that seamlessly powers the whole journey means linking individual experiences to each other and across channels. Even the best isolated experiences are less meaningful if they aren't part of a cohesive journey.

Understand your customer

Meaningful customer insights are key for healthcare organizations to **create life-centric experiences** that reflect the needs of consumers as real people with complex and sometimes contradictory expectations and needs.[16] It's critical to build capabilities around data and analytics that incorporate the ability to measure and evaluate experience factors and their impact on the business over time. Balancing automation and human intervention, organizations can develop the insights necessary to anticipate consumers' needs over time and engage more proactively with them.

Balance the human + machine equation

Digital is not a destination. It is the means to the end of humanizing health experiences. Not only do digital capabilities help meet people where they are, but every digitized interaction also frees up human capacity to focus on people's high-touch needs. Finding the right balance, particularly in today's rapidly evolving landscape, is essential.

Decluttering member experience

A national payer wanted to transform its member experience. The company relied heavily on direct mail—some members were receiving up to 300 touchpoints each year. We helped the payer declutter the experience by identifying quick wins and defining a future member journey to enhance the experience and reduce costs. Implementing communication and campaign management capabilities and new processes and governance were critical to the transformation. The plan is expected to deliver a significant revenue uplift for campaign management.

Creating a connected patient experience

We worked with a large health system to improve access to care and create a connected patient experience. Working across marketing, contact center, digital experience and clinical operations, the transformation included developing an enterprise access operating model, an omnichannel customer engagement platform and robust customer analytics. The new patient experience includes streamlined access to care, navigation to the right point of care that is more responsive to patient preferences, and expanded access across channels.

Healthcare organizations that do not improve experiences will find themselves falling behind. The good news is that we know what people expect from their interactions—and the factors that are the top drivers of loyalty and engagement.

By finding meaningful ways to deliver on these expectations across the healthcare journey, healthcare organizations can set themselves apart—and set themselves up for success.

References

1. Accenture Patient Experience Benchmark Survey, 2017 and 2021
2. Accenture 2021 Patient Experience Benchmark Survey
3. Accenture 2022 Consumer Payer Experience Benchmark Survey
4. Accenture 2021 Patient Experience Benchmark Survey
5. Accenture 2022 Consumer Payer Experience Benchmark Survey
6. Accenture 2021 Patient Experience Benchmark Survey
7. Accenture 2021 Patient Experience Benchmark Survey
8. Accenture 2022 Consumer Payer Experience Benchmark Survey
9. Accenture 2021 Patient Experience Benchmark Survey
10. Accenture 2022 Consumer Payer Experience Benchmark Survey
11. Accenture 2021 Patient Experience Benchmark Survey
12. Accenture 2022 Consumer Payer Experience Benchmark Survey
13. Survey respondents were defined as trusters, neutrals or distrusters differently in the two surveys. For the Patient Experience Benchmark Survey, we merged a four point scale to three points by merging middle values based on respondents' answers to one survey question. For the Consumer Payer Experience Benchmark Survey, the trust scale is based on respondents' answers to six survey questions related to different aspects of trust.
14. Accenture 2021 Patient Experience Benchmark Survey
15. Accenture 2022 Consumer Payer Experience Benchmark Survey
16. Accenture, "The Human Paradox," at **https://www.accenture.com/us-en/insights/song/human-paradox**

About the Accenture 2022 Consumer Payer Experience Benchmark Survey

Accenture surveyed almost 11,000 US consumers 18 years and older to understand how their insurance companies perform across nine key healthcare consumer touchpoints. The research was conducted online between March 2022 and May 2022. Respondent data was aggregated and normalized by payer and coverage type.

About the Accenture 2021 Patient Experience Benchmark Survey

Accenture surveyed more than 10,000 US consumers 18 years and older who had sought or received care in the past 12 months to understand how their healthcare providers perform across 10 key healthcare consumer touchpoints. The research was conducted online between October and November 2021. Respondent data was aggregated and normalized for age, income, region and gender.

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