



Continued Public Opinion Research Analysis

FOCUS GROUPS 2021



As USofCare embarks on its second year of a five-year effort to better understand people's health care needs, we commissioned four virtual focus groups to dig deeper into important topics that emerged from our first year of research.

The four focus groups were facilitated by ALG Research and conducted on April 28th and 29th, and included groups of participants who are Black, low-income, Republican, and have insurance they are satisfied with. Below are key findings from the focus groups. We will continue to deepen our understanding of people's health care needs and the problems they want to have addressed throughout the year. These activities will include continued commissioned research, community engagement and ethnographic research, and regular analysis of public opinion.

Findings from these focus groups are consistent with our first year of research.

1 Cost is the primary concern among participants

Concerns about the cost of health care remain front and center. Affordability is the core critique of the system across demographics. **Cost has driven a number of participants to skip seeking routine care.** This was an especially prevalent issue in our low-income group, but it was not an uncommon occurrence across demographics and included many participants who have insurance. Our November 2020 survey found that cost was the overwhelming reason that 42% of voters had forgone insurance in the past and that 41% of those under 30 have opted not to seek medical treatment in the last year.

- Even those who are more financially secure struggle to understand what their care will end up costing or what they are responsible for paying. This is itself a deterrent for them seeking care.

2 Targeted fixes are desired over large scale change

Most participants, regardless of demographic or insurance situation, are hesitant to support dramatic change. These participants talk about a system that offers such fragile peace-of-mind that they are left grateful for the most basic levels of care and are mostly resistant to dramatic changes that might put that at risk. Instead, they believe that targeted fixes to big problems may have a better success rate, on a faster timeline.

3 There is broad support for achieving core improvements to the health care system

- People want certainty that they can **afford** their health care.
- People want the security and freedom that **dependable** health care coverage provides as life changes.
- People want to get the **personalized** care they need, when and how they need it.
- People want to experience a health care system that's understandable and **easy to navigate**.

USofC
adopted
these goals
in 2020.

4 Respondents want to preserve choice in the health care system and speak highly of innovation and quality of care in the U.S.

For some this means being able to keep your insurance if you like it, for others, it means being able to pick the doctor you want to see. Even those who are more critical about their experiences believe our system offers a lot of choice in providers. This is also a reflection of the quality and innovation available within the U.S. health care system. Participants are aware of frequently evolving treatments and technologies, and they don't want to lose access to that innovation.

The Low Bar of “Satisfied”: Deepening our Understanding of Perplexing Survey Findings

Across our first year of research, we asked respondents about their level of satisfaction with health insurance and how their health care experiences compared to others. We found significant concerns and challenges that people were facing. However, in our national survey commissioned in November 2020, we found that 93 percent of people were “satisfied” with their health insurance and that 62% of people thought the care they received was “better than average”. **These percentages stunned us since they didn’t align with the concerns about coverage and care we had been hearing from people across our qualitative research (in-depth interviews, community conversations, focus groups, qual boards, etc.).** We utilized the focus groups this year to dig deeper into these questions and understand the backstory.



★ Being “satisfied” with health insurance doesn’t mean what we think it means.

In our focus groups we had an entire group of participants who said they were insured and satisfied, and we asked about satisfaction across all groups. **We found that being satisfied is not an indication that insurance is a generally positively-viewed industry or that their insurance situation is flawless.** Instead, they recognize that simply by having insurance that covers most of their needs, they are more fortunate than others who do not. The concept of being “satisfied” is relative. The alternative of not having insurance is enough to keep those with it grateful for what they have. As one participant who is satisfied with their insurance put it, “it’s the only thing I have so I have to be [satisfied] unfortunately.”

★ Perception of having “better than average” health care experiences is a reflection of seeing how poorly the system works in general.

Health care is in many ways seen as a case of ‘haves’ and ‘have nots’ – those who have access to health care are thankful for it, and well aware of the struggles that those without coverage endure. Understanding that your health care experiences might be better than average (or just average) does not mean you think the system is working. As one Black participant put it, “health care works good if you got it, if you don’t, you’re S.O.L.”

Another telling example came from a low-income respondent who stated she was both satisfied with her insurance and that her experiences were better than average despite having experienced an alarming health care situation where she was nearly provided with the wrong cancer treatment.

★ We vastly underestimate the solitude, stress, and weight of dealing with the health care system.

We asked participants reflect on the possibility of achieving core improvements to the system:

- Certainty that they can afford their health care.
- Security and freedom that dependable health care coverage provides as life changes.
- Personalized care they need, when and how they need it.
- A health care system that’s understandable and easy to navigate.

In their responses, they talk about feeling more secure, having peace of mind, and a great sense of relief. With these improvements, participants also offer that they would be more likely to seek care when they need it.

Dealing with insurance remains a focal point of the health care experience. When we are asking questions about the health care system overall, it’s important to keep in mind that respondents are often thinking about coverage and cost, not necessarily the health care they receive.

Looking Ahead

In the focus groups, we also gathered important feedback about the types of solutions that people want to see put in place. These solutions will be further tested in our next phase of research.

We look forward to publishing new results as they emerge and sharing a prioritized set of solutions later in the year.