

The Spectrum Health Value Study™

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Abstract

The purpose of this study is to identify the relative importance of a set of 27 health products, programs and services to American consumers over the age of 18. Each quarter, the study interviews approximately 1000 respondents, with approximately 3000 by August 2009. Respondents are matched to the U.S. population by age, gender, region and ethnicity. During the first three waves of data collection we have watched insurance coverage drop from around 84% to 78% and now into the low 70s of all respondents. For the most part, people are generally satisfied with their health insurance coverage with 59 percent indicating a high level of satisfaction, although that level of satisfaction appears to be dropping. The most commonly cited product, programs or services ever used were prescription and over-the-counter drugs at 90 percent and 87 percent respectively. In our results three of the tested products, programs and services scored above a 90 in terms of health care value using Max Diff methodology; access to physician services, access to hospital medical services and access to emergency care.

Introduction.

According to the Institute of Medicine, writing in March of 2009, “ To address both the costs and the performance of the health care system, greater consensus will be required on what constitutes value in health care, and how to measure and increase that value.”¹ Comparing the relative value of those 27 products, programs and services is one way to quantify their value. The next issue is to determine who should be the respondent to a question that measures those relative values? Should policymakers and others who allocate the funds for health care spending be the individuals answering these relative value questions? One idea is to ask the people who actually pay for the programs, products and services—the U.S. consumers and taxpayers. The purpose of this study is to identify the relative importance of a set of 27 health products, programs and services to American consumers over the age of 18.

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¹ Institute of Medicine of the National Academies. Roundtable on Evidence Based Medicine. “Value in Health Care; accounting for cost, quality, safety, outcomes and innovations” March 2009. Downloaded on April 15, 2009 from <http://www.iom.edu/?id=64675>.

Methodology.

Each quarter, beginning in January 2009, Spectrum has interviewed approximately 1000 respondents—with approximately 3000 files in August of 2009. Respondents have been matched to the U.S. population by age, gender, region and ethnicity. The first two quarters of data will be collected via online interviewing of the E-Rewards panel, made up of 2.9 million panel members. In the third quarter of 2009, telephone interviews were added to the total respondents to adjust for online biases.

Results.

Overall, the percentage of respondents with insurance coverage has been dropping over the course of the study. For the most part, people are generally satisfied with their health insurance coverage with 59 percent indicating a high level of satisfaction although satisfaction with the current system is also waning. African-Americans, are statistically significantly more likely to indicate that they were extremely satisfied (score of 10) with their health insurance than were whites. The most commonly cited product, programs or services ever used were prescription and over-the-counter drugs at 90 percent and 87 percent respectively. Respondents are asked, for the 27 products, programs and services tested, how satisfied or not satisfied they were with these products.

The study asks all respondents if they had 'ever used' these 27 products, programs and services and then asks if they use them 'frequently.' The survey also asks respondents which services they use on a 'regular' basis.

In our results three of the tested products, programs and services scored above a 90 for health value using a Max Diff methodology; access to physician services, access to hospital medical services and access to emergency care.