

Understanding **Consumer Preferences** in Post-Acute and Senior Care

2017 Post-Acute Care Collaborative consumer choice data book

RESEARCH REPORT

Look inside for:

- Details on the Post-Acute Care Collaborative consumer preference survey
- Study methodology in brief
- Data on consumer preferences for various care scenarios for themselves and loved ones

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RESEARCH REPORT

Post-Acute Care Collaborative

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What Do Consumers Want in Post-Acute Care?

Long-Term Success Dependent on Appealing to Consumers

Consumer Involvement in Decision Making Is Changing. Are Outreach Efforts?



Consumers Increasingly Active in Post-Acute and Senior Living Care Decisions

As the population ages, more individuals require post-acute and senior care for themselves and their families. At the same time, increased access to information via the Internet has driven those individuals to become more active consumers, asking questions and assessing options to get the best care possible.

To continue to facilitate high occupancy, post-acute and senior living leaders must appeal to potential patients, residents, and their families by delivering the services and amenities those consumers seek.



The Post-Acute Care Collaborative Consumer Choice Survey

The Post-Acute Care Collaborative conducted a national consumer survey last year to assess consumer preferences in four post-acute and senior living care scenarios: hip replacement rehabilitation, senior living, stroke rehabilitation, and dementia care. To capture consumers' decision-making processes, we asked them to rank 27 potential attributes by relative importance.

The Post- Acute Care Collaborative Consumer Choice Survey Data Book



How to Use This Resource

This data book includes findings on what factors are most relevant to consumers choosing post-acute or senior care for themselves and their families.

The following pages provide details on the survey methodology, along with overall survey results. The data within this book represents our findings for all respondents; for additional data broken down by specific demographic factors, see advisory.com.



To learn more about what attracts **your consumers**, see *What Consumers Want*, a downloadable poster showing insights from the Consumer Choice Survey.

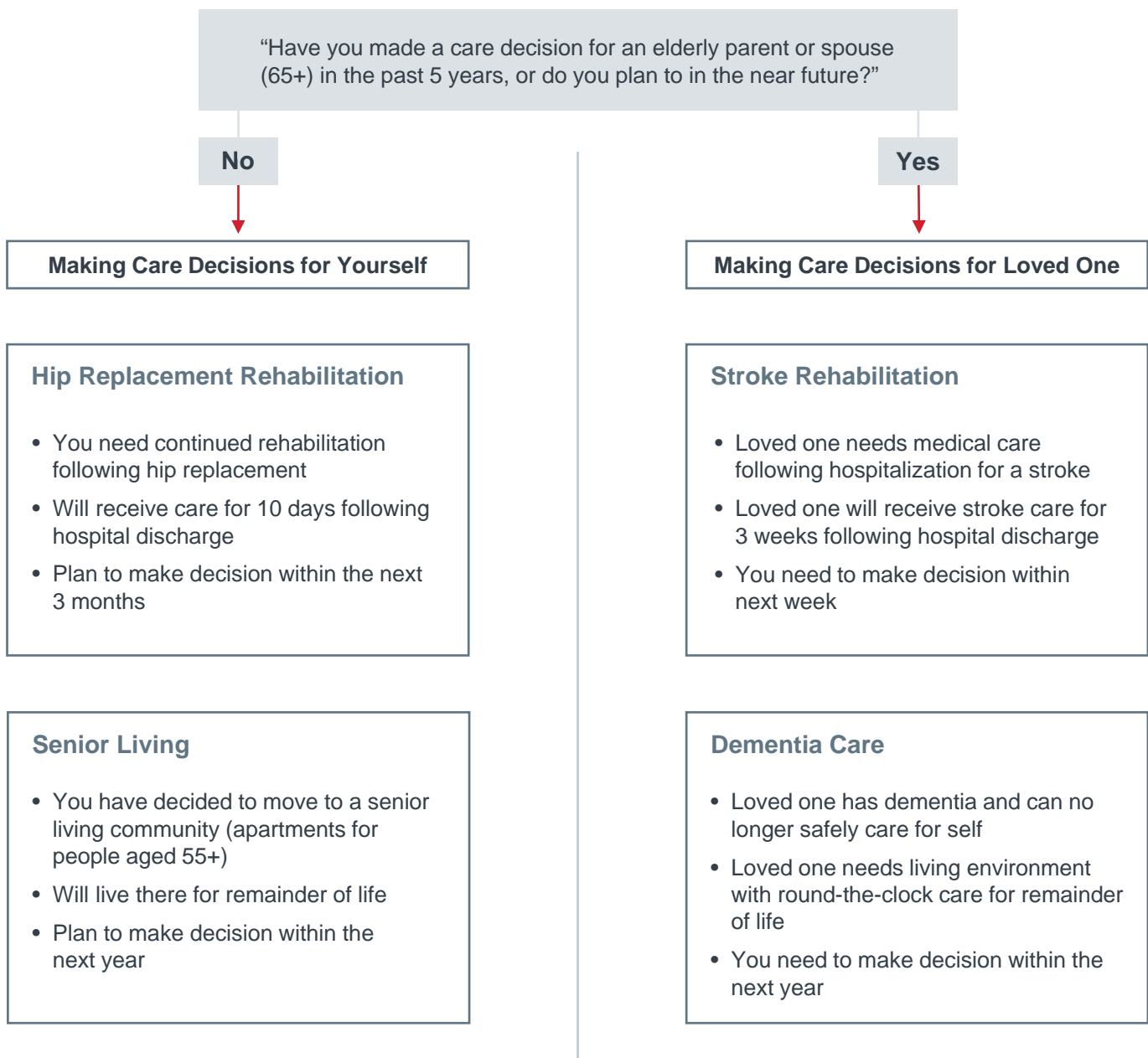
Survey Structure and Methodology

Survey Overview

In June 2016, we surveyed 2,514 people to gain insight into the relative importance of various criteria when making post-acute and senior living care decisions.

To explore the ways preferences vary based on the type of post-acute or senior care an individual needs, we designed four scenarios that presented different combinations of time frame (short- vs. long-term care), urgency of decision making (planned vs. in-the-moment), and recipient of care (respondents vs. respondent's loved ones).

We grouped the respondents into two groups based on whether they had made, or planned to make, care decisions for a loved one. Each group was asked to consider two of the four scenarios.



Source: Post-Acute Care Collaborative interviews and analysis.

Survey Methodology Enables Comparison

Study Design

We used a MaxDiff methodology to assess consumers' post-acute and senior living preferences. MaxDiff's chief advantage over other survey methodologies is that in addition to building a ranking of consumers' absolute preferences, it also shows how strongly consumers prefer each attribute relative to the others. It does so by asking respondents to repeatedly make trade-offs among the attributes. For each scenario in our survey, we showed respondents sets of five randomly grouped attributes (from a total list of 27 attributes), exposing them to each attribute multiple times. For each set of five attributes, we asked respondents to choose which attributes were most and least important.

Example MaxDiff Question: Choosing a Car

List of Services	Most Appealing	Least Appealing
Backseat cup holders	<input type="radio"/>	<input type="radio"/>
Third-row seating	<input type="radio"/>	<input checked="" type="radio"/>
Side airbags	<input checked="" type="radio"/>	<input type="radio"/>
DVD player	<input type="radio"/>	<input type="radio"/>

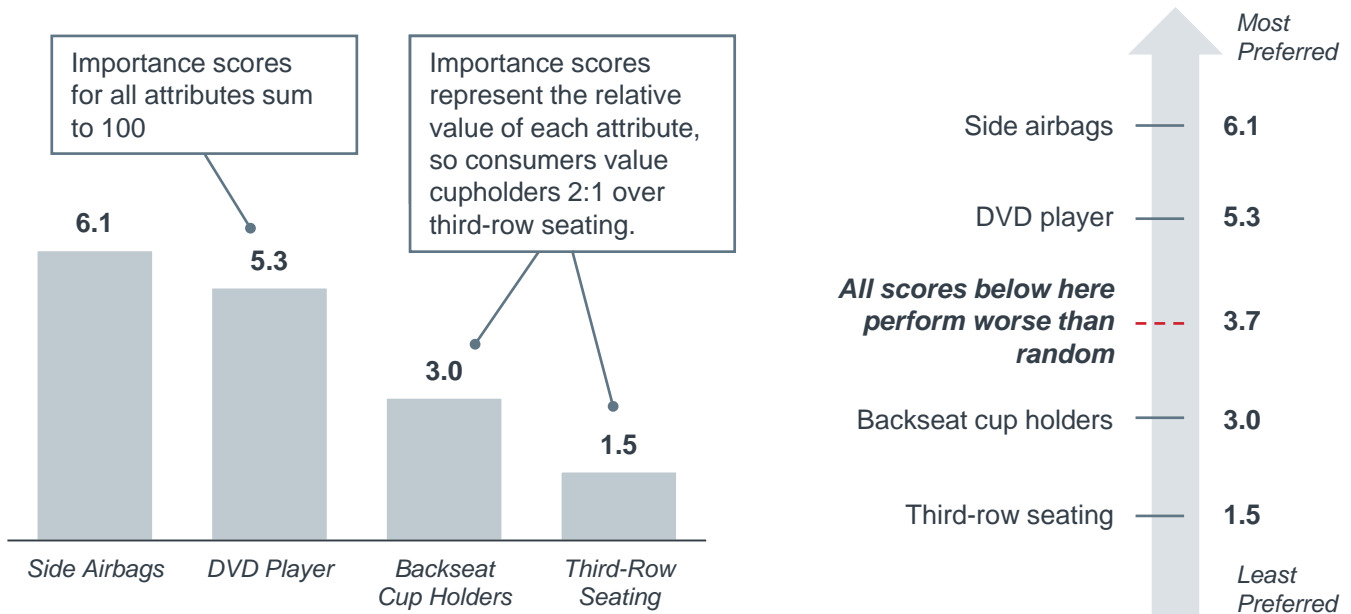
Advantages to MaxDiff Methodology

- 1 Understand the magnitude of difference** between ranked attributes
- 2 Force trade-offs**, which is more reflective of real-life decision making

Interpreting the Data

Using the MaxDiff methodology, we aggregated respondents' preferences to generate "importance scores" for each attribute included in the four scenarios. The results rank consumers' overall preferences for each scenario and show how strong those preferences are relative to each other.

Higher scores represent more important attributes. The data is also scalable, so an importance score twice as high as another would indicate that consumers find that attribute twice as important. All importance scores for a given scenario will sum to 100.



Source: Post-Acute Care Collaborative interviews and analysis.

Hip Replacement Rehabilitation Attributes

Scenario: Making a Hip Replacement Care Decision for Yourself

The next four pages of this data book list the attributes consumers were asked to compare for each scenario. Each page introduces a summary of the scenario and lists the applicable attributes.

Scenario Summary: *You need continued rehabilitation following a hip replacement. You will receive care for 10 days following hospital discharge. You plan to make the decision within the next three months.*

Patient Care and Experience Attributes

- Cost**
 - My insurance will cover the vast majority of costs
 - What I will pay out-of-pocket is less than average, compared to other facilities

- Lifestyle and Amenities**
 - I can receive all of my treatment at home
 - The facility has all private rooms
 - Typically, patients remain in this facility for a time period shorter than the industry average
 - Family members may visit at any time
 - While in the facility, I will only share common spaces with other short-term patients
 - While in the facility, I will share common spaces with long-term care residents
 - The facility has an excellent dining plan and newly appointed décor

- Clinical Quality**
 - My treatment is provided in a facility that specializes in rehab for hip replacements
 - Care is overseen primarily by physicians, who visit regularly
 - Provider is part of a system that offers services I might need after leaving, like outpatient rehab
 - Facility provides rehab for various types of surgeries, injuries, and medical conditions
 - Patients are seen by physicians who work only in the rehab facility
 - Patients are seen in the facility by their community physicians
 - Care is overseen primarily by nurse practitioners with occasional visits by a physician
 - Care is delivered primarily by nurses with occasional visits by physicians or nurse practitioners

- Recommendations and Ratings**
 - My doctor recommended the provider
 - The provider has a good score on a Medicare quality comparison website
 - The provider has high quality ratings in online reviews
 - My hospital's care manager recommended the provider
 - My friend, colleague, family member, or neighbor recommended the provider
 - The provider is on a *U.S. News and World Report* Top 100 list

- Other**
 - The facility is close to my doctor and hospital
 - The facility is close to my home
 - The provider is owned and operated by the same health system where I had my surgery
 - The facility is close to my relatives' homes

Senior Living Attributes

Scenario: Making a Senior Living Decision for Yourself

Scenario Summary: *You have decided to move to a senior living community (apartments for people aged 55+). You will live there for the remainder of your life. You plan to make the decision within the next year.*

Patient Care and Experience Attributes

Cost

- The yearly cost to live in this community is lower than the average costs for other communities
- The yearly cost to live in this community is average compared to other facilities

Lifestyle and Amenities

- Community offers assisted living and skilled nursing on the same campus, in case I need them later
- Family and friends can visit at any time
- Community offers a shuttle to go shopping and to places in town
- If my spouse and I need different levels of care, we can still live together at this community
- Community offers an excellent dining plan
- I have friends who live at the community
- Community has regular social events
- Community has regular religious services of my preferred religion
- Community has on-site exercise classes
- Community allows pets to visit
- Community is affiliated with my religious group
- Community has newly appointed décor
- Community has an on-site salon

Clinical Quality

- Staff at the community will check on me, and there are emergency call buttons if I need help
- Community has a primary care physician on-site if I need care
- Physical and occupational therapists will come on-site to provide care, if needed
- Community offers resources for planning for end-of-life needs
- Community has a mental health counselor on staff and available for support as needed

Recommendations and Ratings

- My doctor recommended the community
- Community has positive online reviews
- My son or daughter thinks this is the right community for me

Other

- Community is close to my relatives' homes
- Community is close to my current home
- Community is independently owned and operated
- Community is part of a large chain of senior living providers

Stroke Rehabilitation Attributes

Scenario: Choosing Post-Acute Stroke Care for a Loved One

Scenario Summary: *A loved one needs medical care following hospitalization for a stroke. He or she will receive stroke care for three weeks following hospital discharge. You need to make the decision within the next week.*

Patient Care and Experience Attributes

Cost

- My parent's insurance will cover the vast majority of costs
- What my parent will pay out-of-pocket is less than average, compared to other facilities
- What my parent will pay out-of-pocket is average, compared to other facilities

Lifestyle and Amenities

- Family members may visit at any time
- The facility has all private rooms
- Typically, patients remain in this facility for a time period shorter than the industry average
- The facility has an excellent dining plan and newly appointed décor
- The facility has a clergy member of my parent's preferred religion on staff for spiritual healing

Clinical Quality

- My parent's treatment is provided in a facility that specializes in rehab from strokes
- The facility is certified as a Top Stroke Center
- The facility is part of a system that offers services my parent might need after leaving, like outpatient rehab
- The facility is affiliated with my hospital's stroke center
- Facility provides rehab for various types of surgeries, injuries, and medical conditions
- Patients are seen in the facility by their community physicians
- Patients are seen by physicians who work only in the rehab facility
- The facility has a mental health counselor on staff and available for support as needed
- The facility offers resources for planning end-of-life needs

Recommendations and Ratings

- My parent's doctors recommended the facility
- The provider has a good score on a Medicare quality comparison website
- The provider has high quality ratings in online reviews
- My parent's hospital care manager recommended the facility
- The provider is on a *U.S. News and World Report* Top 100 list
- My friend, colleague, family member, or neighbor recommended the facility

Other

- The facility is close to my home
- The facility is owned and operated by the same health system where my parent received treatment
- The facility is close to the hospital
- The facility is close to my parent's home

Dementia Care Attributes

Scenario: Choosing Dementia Care for a Loved One

Scenario Summary: *A loved one has dementia and can no longer safely care for his- or herself. Your loved one needs a living environment with constant care for the remainder of his or her life. You need to make a decision within the next year.*

Patient Care and Experience Attributes

Cost

- The yearly cost to live in this community is average compared to costs for other communities
- The yearly cost to live in this community is lower than the average costs for other communities

Lifestyle and Amenities

- Family members may visit at any time
- The facility has all private rooms
- There is a clear and easy way for family members to ask questions of their loved ones' caregivers
- The facility offers support groups for family members of residents
- The facility has regular social events
- The facility has an excellent dining plan and newly appointed décor
- The facility has a clergy member of my parent's preferred religion on staff for spiritual counseling

Clinical Quality

- All staff at the facility have special certifications in caring for dementia patients
- The facility is a Memory Care Center of Excellence
- The facility follows a nationally regarded model for dementia care
- The facility has a mental health counselor on staff and available for support as needed
- Patients are seen in the facility by their community physicians
- Patients are seen by physicians who work only in the facility
- The community offers resources for planning for end-of-life needs

Recommendations and Ratings

- The provider has a good score on a Medicare quality comparison website
- My parent's doctor recommended the facility
- The provider has high quality ratings in online reviews
- The provider is on a *U.S. News and World Report* Top 100 list
- My friend, colleague, or neighbor recommended the facility

Other

- The facility is close to my home
- The facility is close to the hospital
- The facility is close to my parent's doctor
- The facility is independently owned and operated
- The facility is owned and operated by a large chain of long-term care providers
- The facility is affiliated with my parent's religious group

Source: Advisory Board Survey Solutions' Post-Acute Care Collaborative Consumer Choice Survey, 2016; Post-Acute Care Collaborative interviews and analysis.

Consumer Choice Survey Demographic Questions

Respondents answered the following segmentation and demographic questions. Their answers to questions three through eight determined which scenarios they were asked to consider. The remaining questions provided demographic details on the survey respondents.

1. What is your gender?

Male Female

2. Which best describes your marital status?

- Now married
- Widowed
- Divorced
- Separated
- Never married

3. In the past five years, have you helped make a medical decision for a parent aged 65 or older?

Yes No

4. In the past five years, have you helped make a medical decision for a spouse aged 65 or older?

Yes No

5. In the past five years, have you helped make a medical decision for a spouse or parent aged 65 or older?

Yes No

6. In the next five years, do you expect to help make medical decisions for a parent aged 65 or older?

Yes No

7. In the next five years, do you expect to help make medical decisions for a spouse aged 65 or older?

Yes No

8. In the next five years, do you expect to help make medical decisions for a spouse or parent aged 65 or older?

Yes No

Consumer Choice Survey Demographic Questions (cont.)

9. What is the main type of health insurance that you currently use to pay for health care services?

- Private insurance—through my current employer, union, or school (through you or another family member)
- Private insurance—bought on a federal or state health exchange (by you or another family member)
- Private insurance—bought on my own from an insurance company (by you or another family member)
- Medicare—for people 65 and older or people with certain disabilities
- Medicaid, Medical Assistance, or any kind of government assistance plans for those with low incomes or a disability
- TRICARE, VA, or other military health care
- Other [Respondent Specify]
- No insurance [Exclusive]

10. What type of insurance network are you enrolled in?

Asked of individuals who have commercial insurance, n=946

- Health Maintenance Organization (HMO), where I choose a primary care doctor and must use an “in-network” facility or doctor. However, I typically pay a lower monthly amount than a PPO plan.
- Narrow Network, where I can choose from a limited number of doctors and hospitals but pay a lower monthly amount. I will pay a much larger share of the bill if I go “out of network.”
- Preferred Provider Organization (PPO), where I can choose to use many hospitals and doctors including those that aren’t in my network. I pay a higher monthly amount to have access to many doctors and facilities and will pay a larger share of the bill
- Other [Respondent Specify]
- Medicaid, Medical Assistance, or any kind of government assistance plans for those with low incomes or a disability

11. Do you have a general or yearly deductible under your current health insurance plan?

Asked of individuals who have commercial insurance, n=946

Yes No I’m not sure

12. Did you pay your entire deductible last year?

Asked of individuals who have a deductible, n=762

Yes No I’m not sure

13. Are you enrolled in a high-deductible health plan (HDHP)?

Asked of individuals who have a deductible, n=762

- Yes, I have a high-deductible health plan
- No, I don’t have a high-deductible health plan
- I don’t know

Consumer Choice Survey Demographic Questions (cont.)

14. You mentioned you are enrolled in Medicare coverage. Which type of Medicare coverage do you have?

Asked of individuals who have Medicare coverage, n=1,161

- Traditional Medicare, also known as Medicare Parts A and B
- Medicare Advantage, also known as Medicare Part C, where you select a plan with a private company
- I don't know

15. Do you receive drug coverage through Medicare, also known as Medicare Part D?

Asked of individuals who have Medicare coverage, n=1,161

Yes No I don't know

16. Which of the following end-of-life planning actions have you taken?

Individuals selected all that apply, n=2,372

- Discussed my medical wishes with my family
- Purchased long-term care insurance
- Signed a living will
- Signed a do not resuscitate order (DNR)
- Signed an advance health care directive (outlines specific steps you do or do not want taken in a medical emergency)
- Other
- I have made no plans for future medical care

17. What was your total household income before taxes from all sources during the past 12 months?

- Less than \$25,000
- \$25,000–\$49,000
- \$50,000–\$74,000
- \$75,000–\$99,000
- \$100,000–\$149,000
- \$150,000–\$199,999
- \$200,000 or more

18. What is your total household net worth?

- Less than \$50,000
- \$50,000–\$100,000
- \$100,000–\$250,000
- \$250,000–\$500,000
- \$500,000 to \$1 million
- \$1 million or more

Consumer Choice Survey Demographic Questions (cont.)

19. What is the highest level of education you have completed?

- Some high school
- High school graduate
- Some/attending college
- Trade/tech. certification
- Associate's degree
- Bachelor's degree
- Some post-graduate
- Graduate degree

20. Which of the following best describes your racial or ethnic background?

- Caucasian (not Hispanic or Latino)
- Black or African American (not Hispanic or Latino)
- Hispanic or Latino
- Asian (not Hispanic or Latino)
- Indian (not Hispanic or Latino)
- Native Hawaiian or other Pacific Islander (not Hispanic or Latino)
- American Indian or Alaska Native (not Hispanic or Latino)
- Other racial or ethnic background
- I prefer not to say

21. Age Range

- <30
- 30-54
- 55-64
- 65+

Hip Replacement Rehabilitation Full Data Results

Scenario: Making a Hip Replacement Care Decision for Yourself



Source: Advisory Board Survey Solutions' Post-Acute Care Collaborative Consumer Choice Survey, 2016; Post-Acute Care Collaborative interviews and analysis.

Senior Living Full Data Results

Scenario: Making a Senior Living Decision for Yourself



Source: Advisory Board Survey Solutions' Post-Acute Care Collaborative Consumer Choice Survey, 2016; Post-Acute Care Collaborative interviews and analysis.

Stroke Rehabilitation Full Data Results

Scenario: Choosing Post-Acute Stroke Care for a Loved One



Source: Advisory Board Survey Solutions' Post-Acute Care Collaborative Consumer Choice Survey, 2016; Post-Acute Care Collaborative interviews and analysis.

Dementia Care Full Data Results

Scenario: Choosing Dementia Care for a Loved One



Source: Advisory Board Survey Solutions' Post-Acute Care Collaborative Consumer Choice Survey, 2016; Post-Acute Care Collaborative interviews and analysis.

Want more on **consumer preferences in post-acute care?**

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Infographic: What Consumers Want

Learn what our consumer survey means for your marketing efforts.



Implementation Resource: What Drives Consumer Choice in Senior Living?

Get key insights regarding consumer behavior when choosing a senior living community.

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