



# The Commonwealth Fund 2007 International Health Policy Survey in Seven Countries

The Commonwealth Fund  
2007 International Symposium on Health Care Policy  
Washington, D.C., October 31 – November 2, 2007

Cathy Schoen, Senior Vice President  
Robin Osborn, Vice President and Director  
International Program in Health Policy and Practice  
The Commonwealth Fund

# 2007 International Health Policy Survey

- Telephone survey: representative samples of adults ages 18 and older in Australia, Canada, Germany, the Netherlands, New Zealand, the United Kingdom, and the United States.
- Final samples: 1,009 Australia, 3,003 Canada, 1,407 Germany, 1,557 the Netherlands, 1,000 New Zealand, 1,434 United Kingdom, and 2,500 United States.
- Conducted by Harris Interactive and subcontractors, and in the Netherlands by The Center for Quality of Care Research (WOK), Radboud University Nijmegen, from March 6 to May 7, 2007.
- Co-funded by the German Institute for Quality and Efficiency in Health Care, the Dutch Ministry for Health, and the Health Council of Canada.
- Core Topics: Access, Coordination, Patient-Centered Care, Chronic Care and Safety.
- Medical home: analysis of experiences of adults with and without a primary care “medical home” with specified attributes





# System Views: Access, Cost, and Waiting Times

# Overall Views of the Health Care System in Seven Countries, 2007

Percent reported:	AUS	CAN	GER	NETH	NZ	UK	US
Only Minor Changes Needed	24	26	20	42	26	26	16
Fundamental Changes Needed	55	60	51	49	56	57	48
Rebuild Completely	18	12	27	9	17	15	34



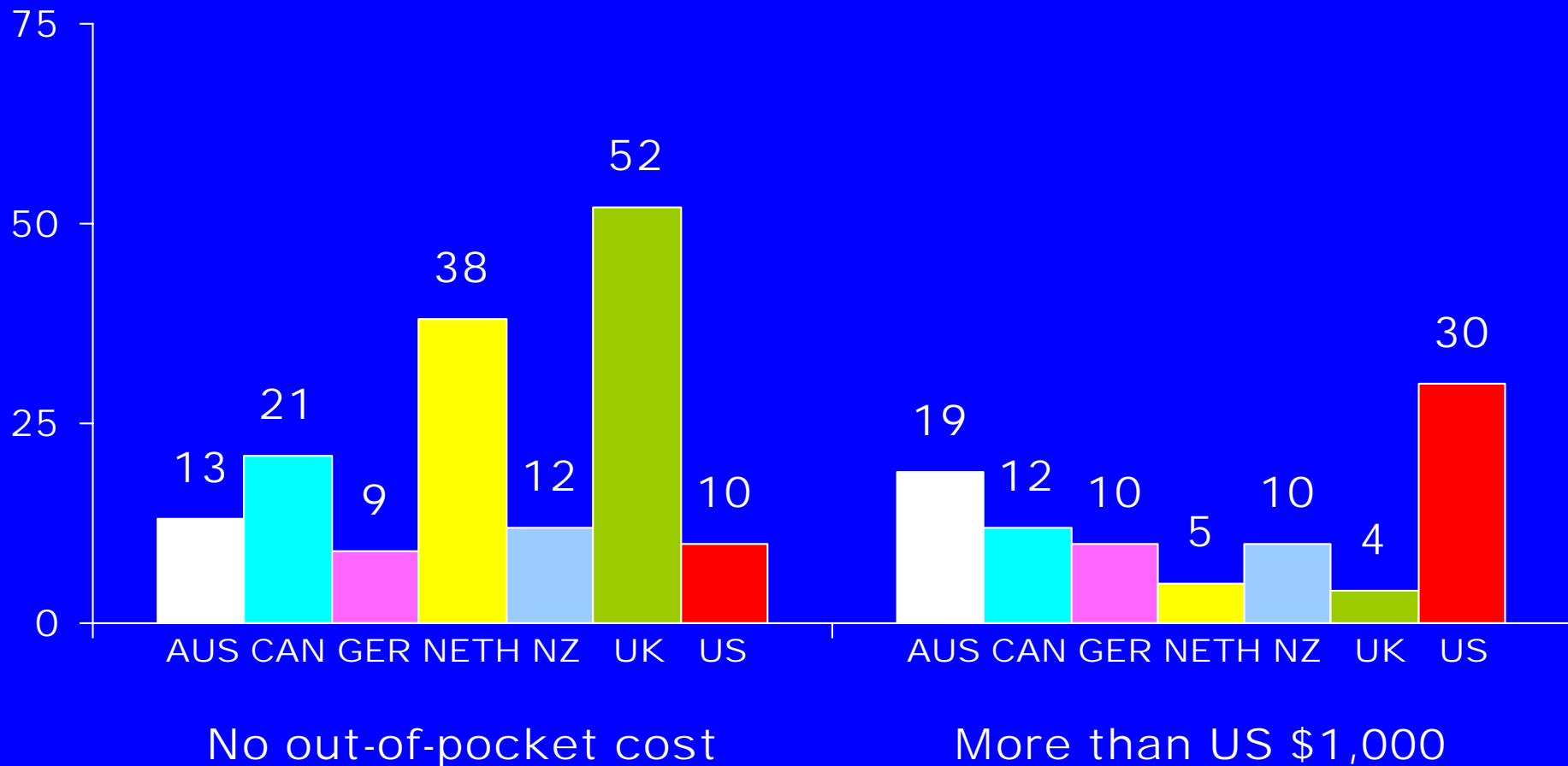
# Cost-Related Access Problems

Percent in past year due to cost:	AUS	CAN	GER	NETH	NZ	UK	US
Did not fill prescription or skipped doses	13	8	11	2	10	5	23
Had a medical problem but did not visit doctor	13	4	12	1	19	2	25
Skipped test, treatment or follow-up	17	5	8	2	13	3	23
Percent who said yes to at least one of the above	26	12	21	5	25	8	37

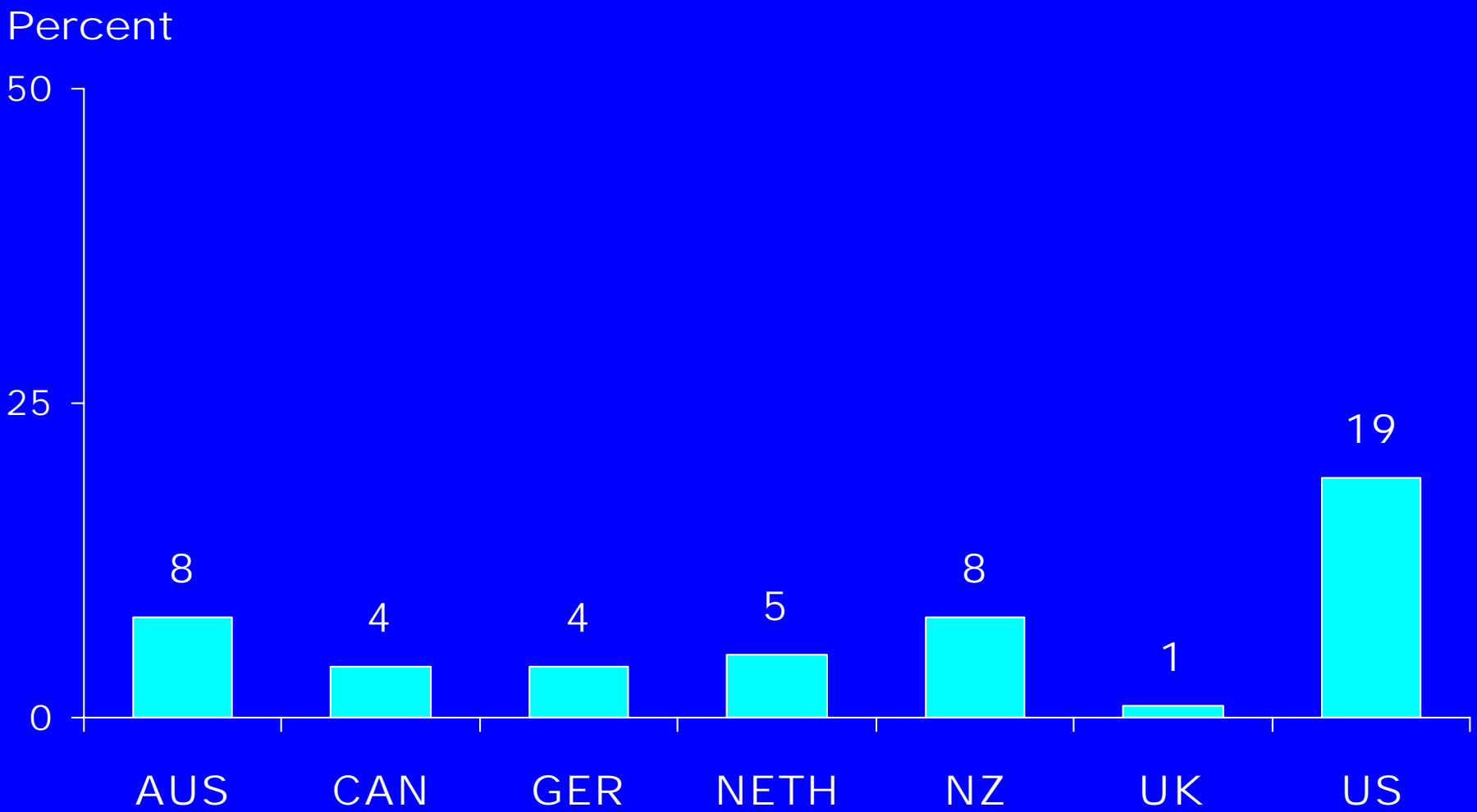


# Out-of-Pocket Medical Costs in the Past Year

Percent



# Serious Problems Paying or Unable to Pay Medical Bills in the Past Year

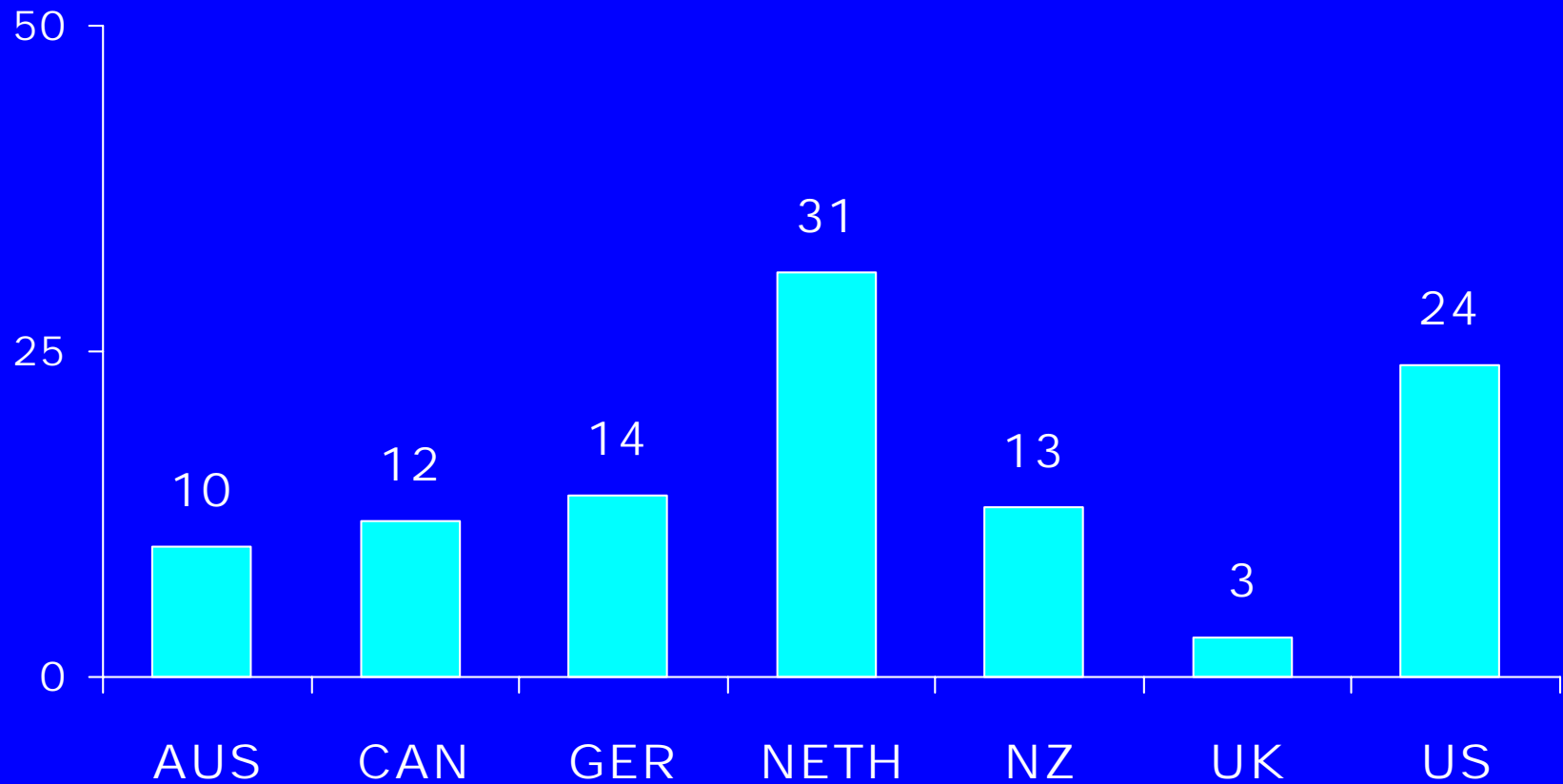


Source: 2007 Commonwealth Fund International Health Policy Survey



# Spent Any Time on Paperwork or Disputes Related to Medical Bills or Insurance

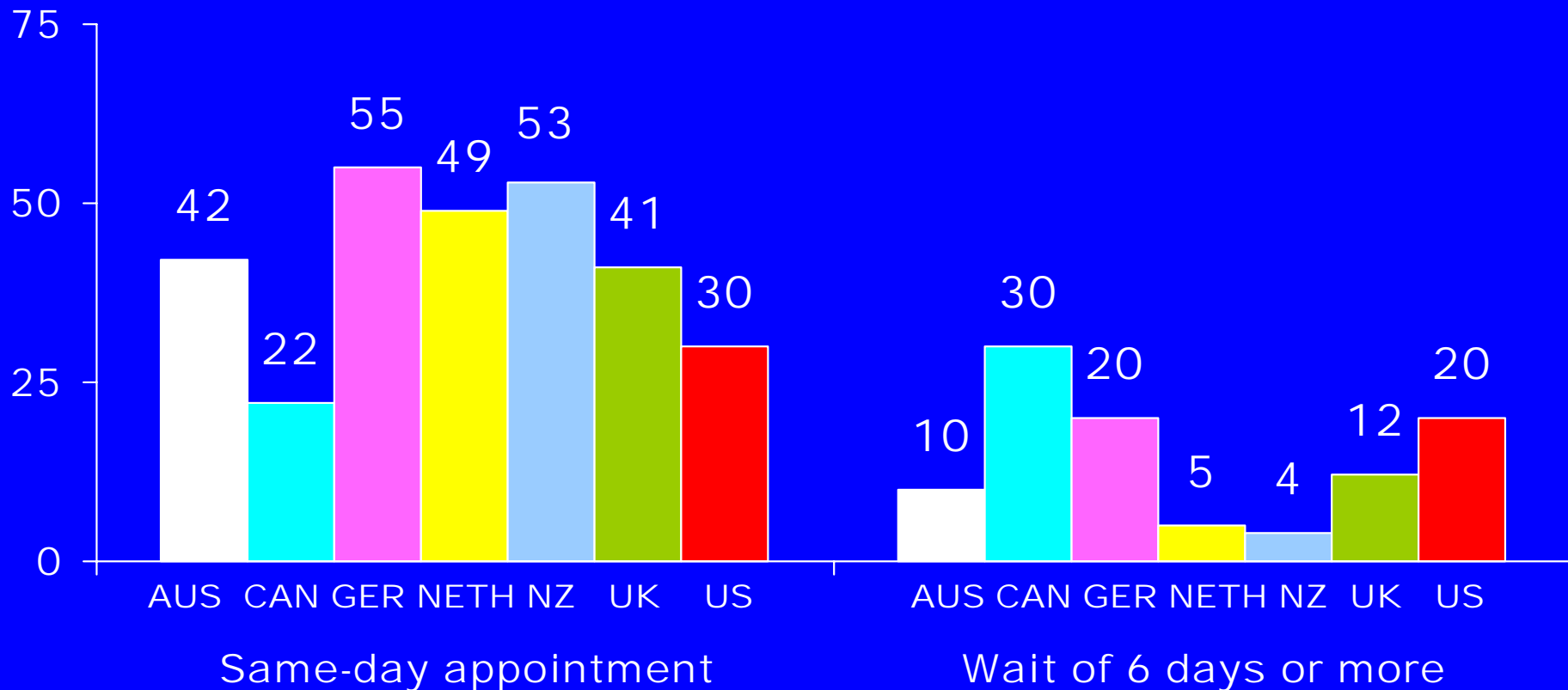
Percent





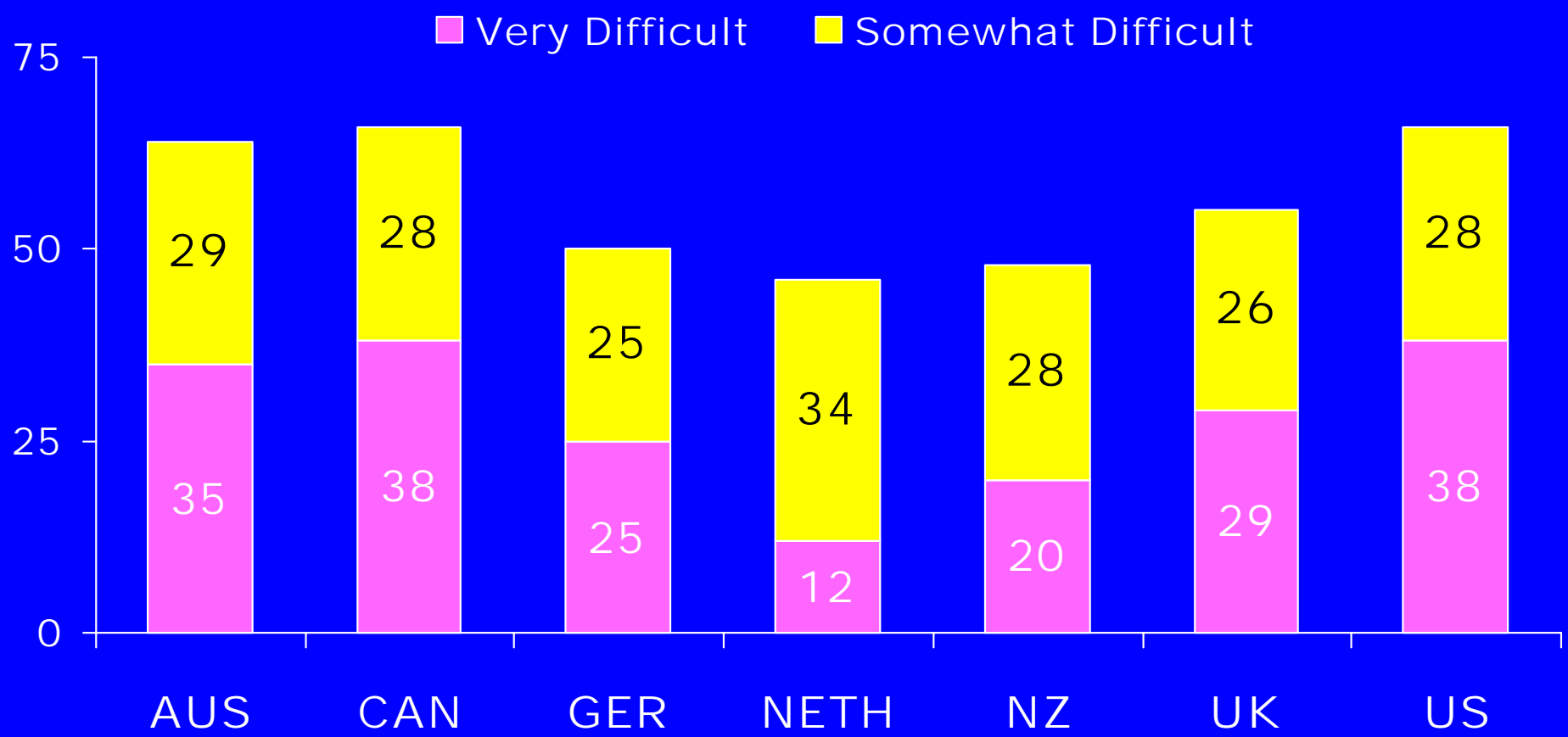
# Access to Doctor When Sick or Need Medical Attention

Percent



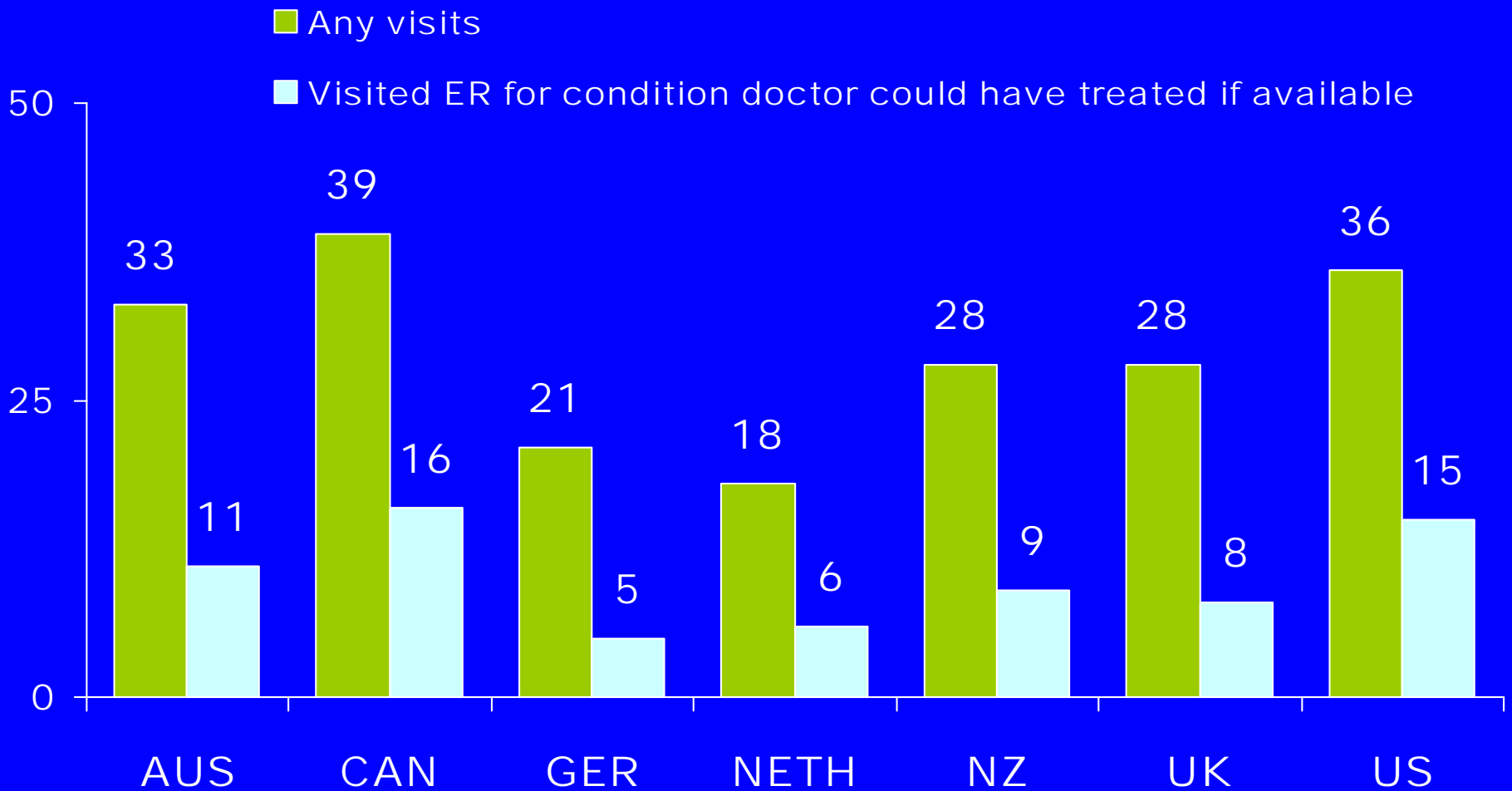
# Difficulty Getting Care on Nights, Weekends, Holidays Without Going to the Emergency Room

Percent reported very or somewhat difficult



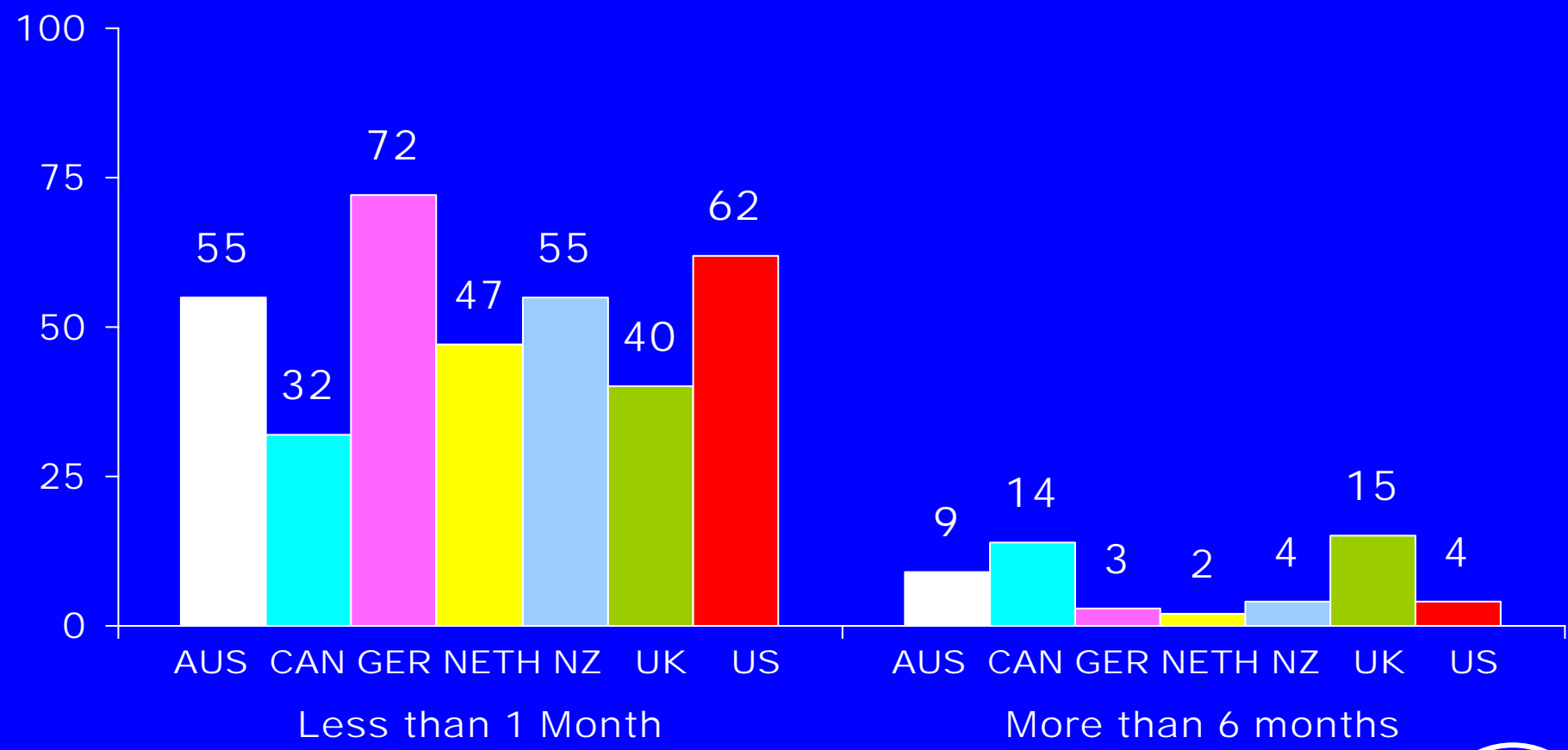
# Emergency Room Use in the Past Two Years<sup>11</sup>

Percent



# Waiting Time for Elective or Non-Emergency Surgery

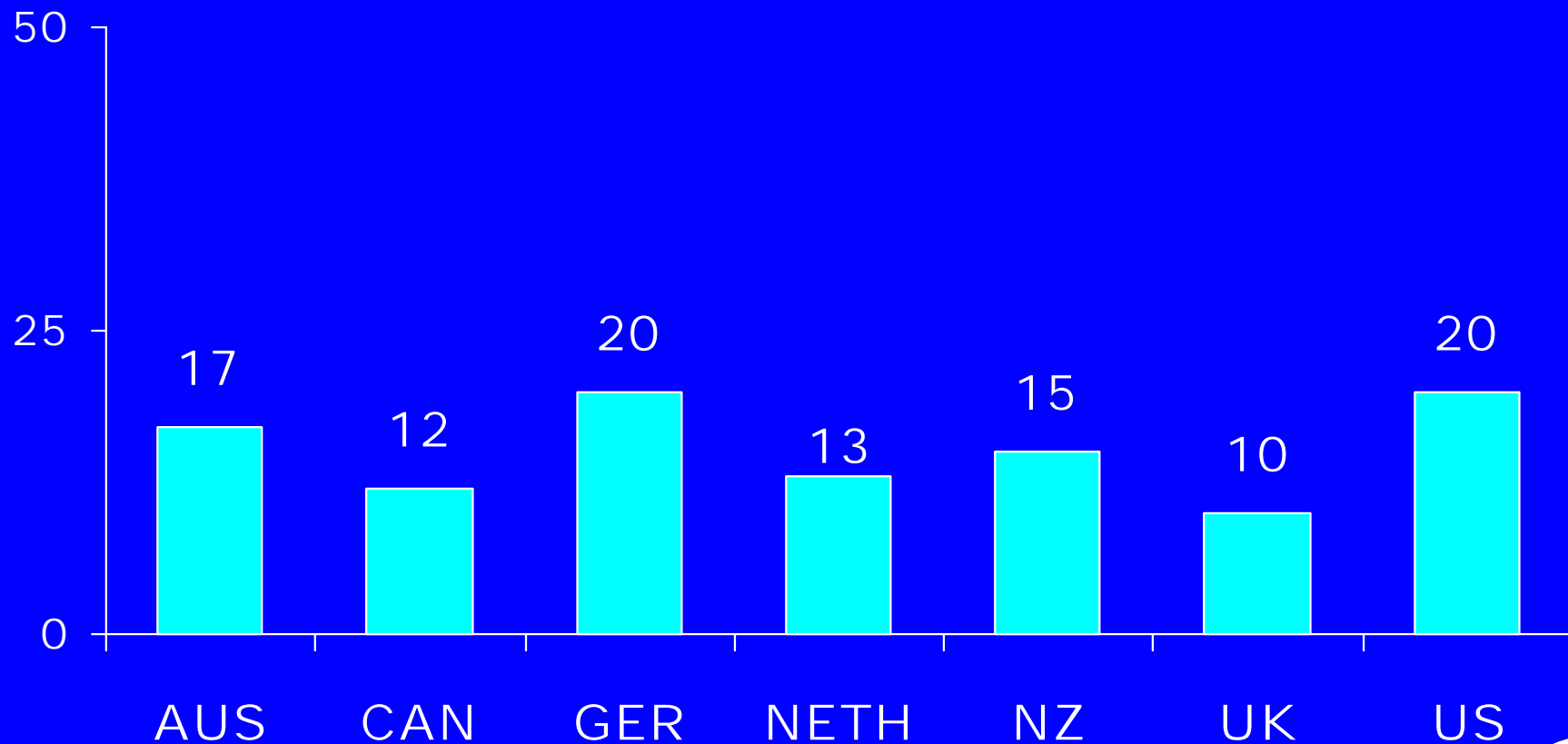
Percent of adults who needed elective or non-emergency surgery



Source: 2007 Commonwealth Fund International Health Policy Survey

# Doctor-Recommended Treatment Had Little or No Benefit in Past Two Years

Percent





# Primary Care Doctor and Medical Home

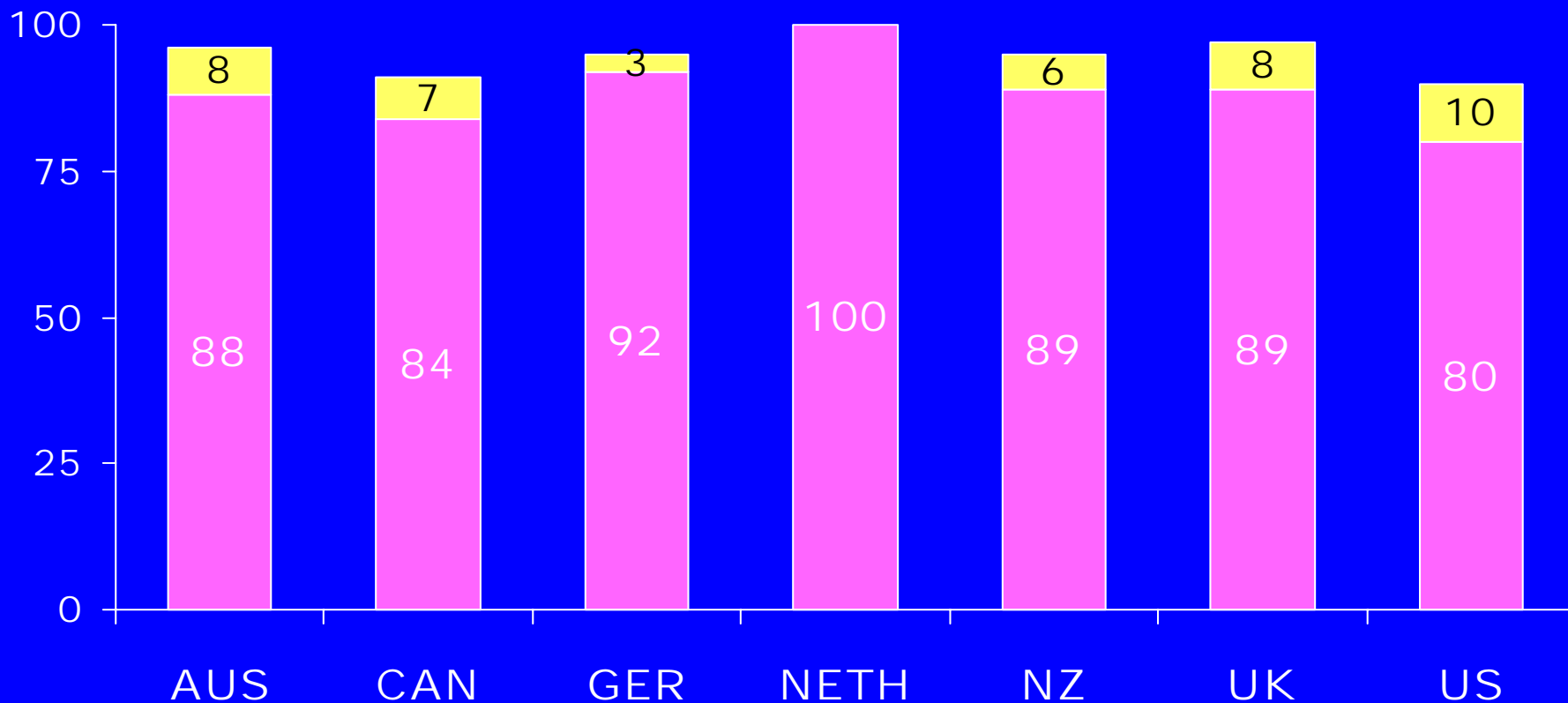
# Creation of “Medical Home” Composite Variable

- Analysis of 2007 Survey used positive responses to four questions to create an indicator of having a source of primary care with key characteristics of a “medical home”
- Medical Home criteria includes:
  - Adult has regular doctor or place of care
  - Doctor/staff know important information about patient’s history
  - Place is easy to contact by phone during regular office hours
  - Doctor/staff help coordinate care received from other doctors/sources of care

# Have a Regular Doctor or Place of Care

Percent

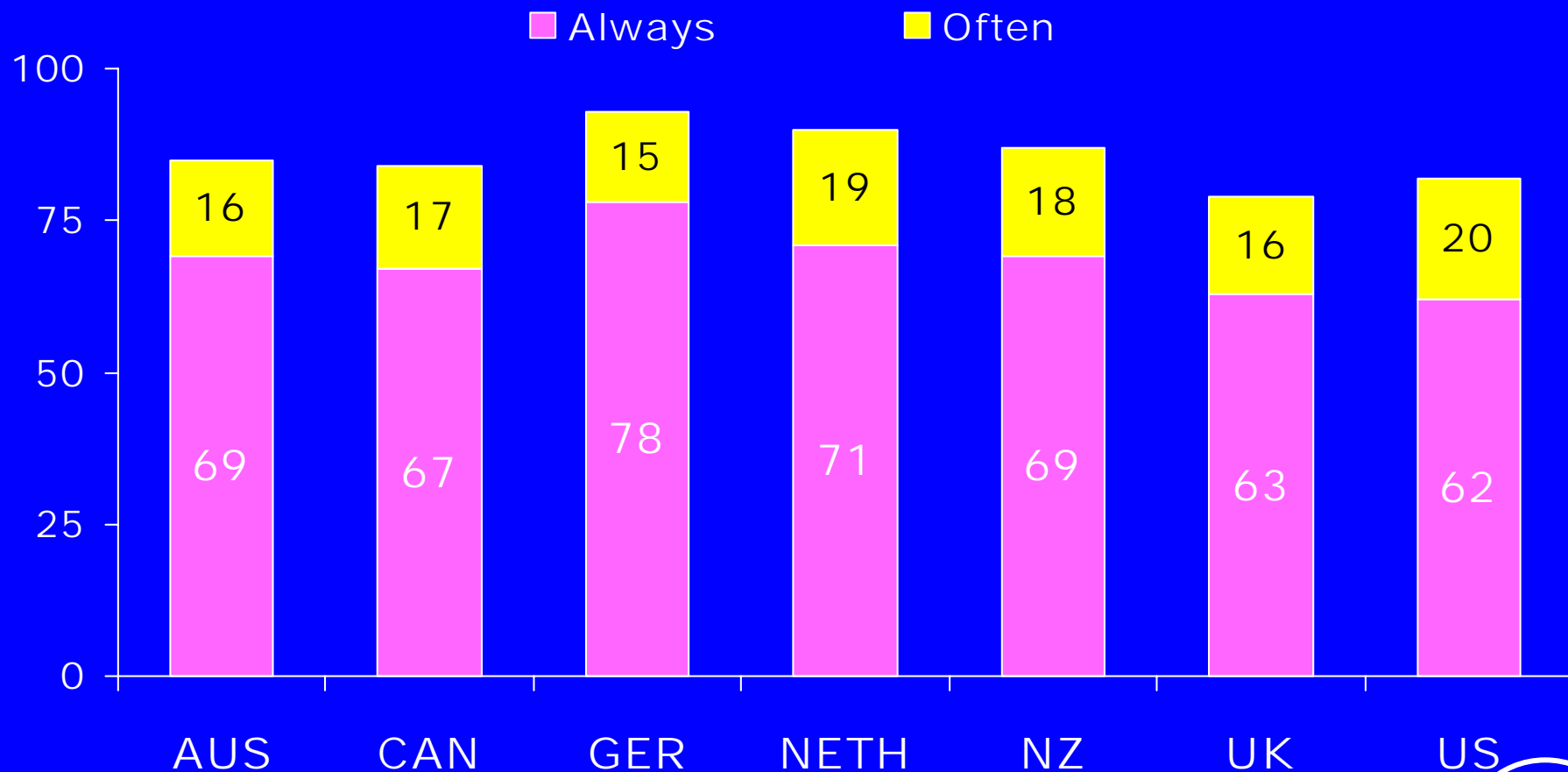
■ Regular doctor    ■ Regular place of care





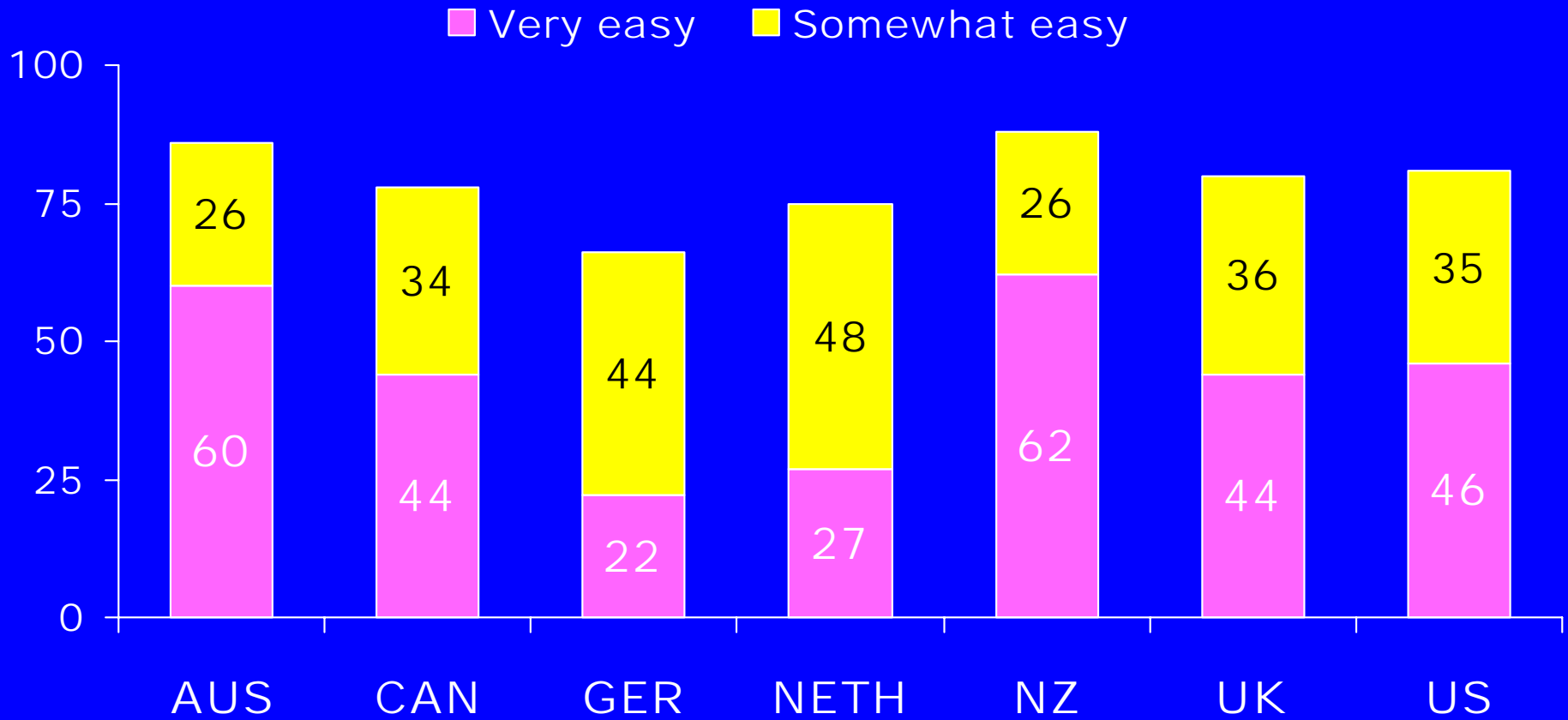
# Does Doctor Know Important Information About Your Medical History?

Base: Have regular doctor/place  
Percent



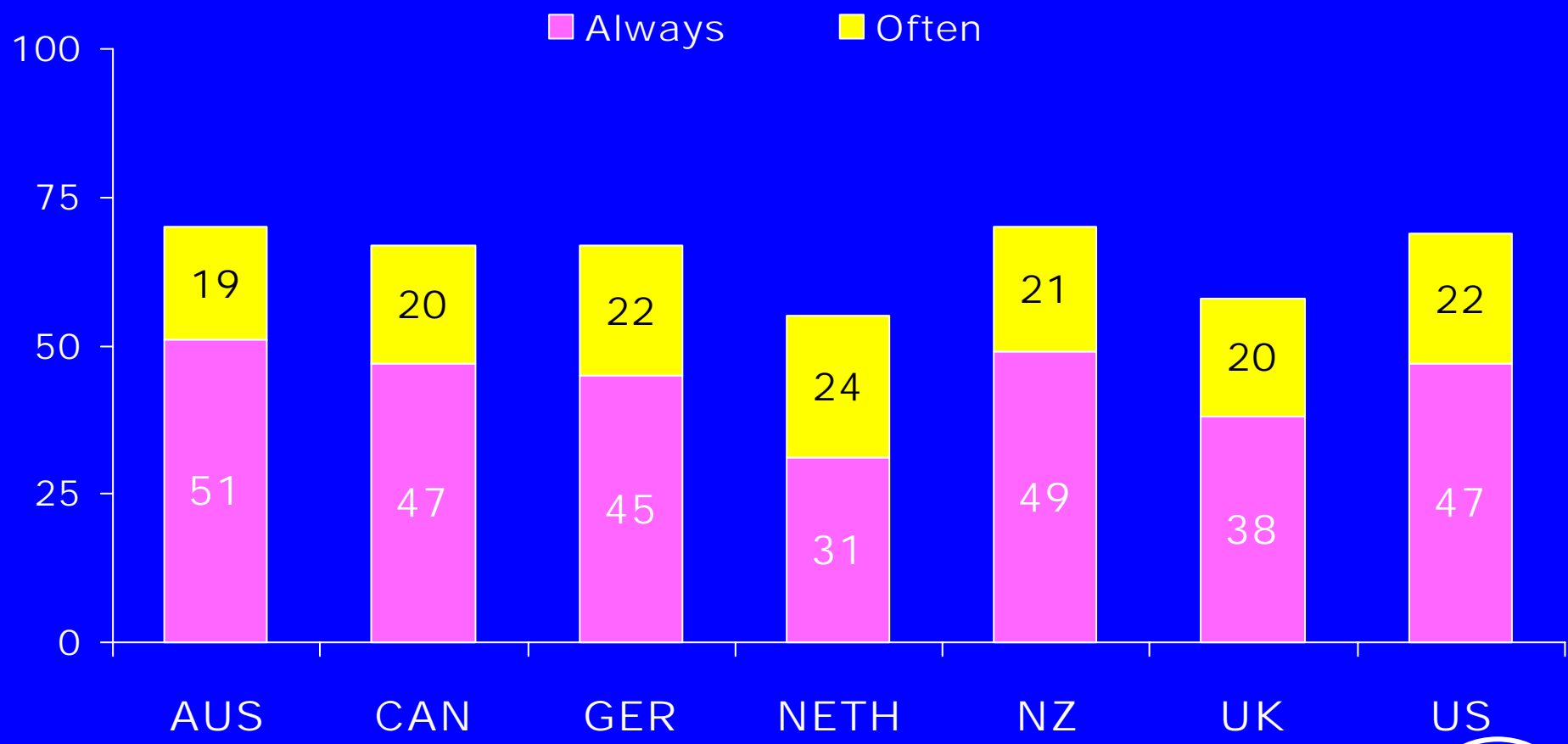
# How Easy Is It to Contact Doctor by Phone During Regular Hours?

Base: Have regular doctor/place  
Percent



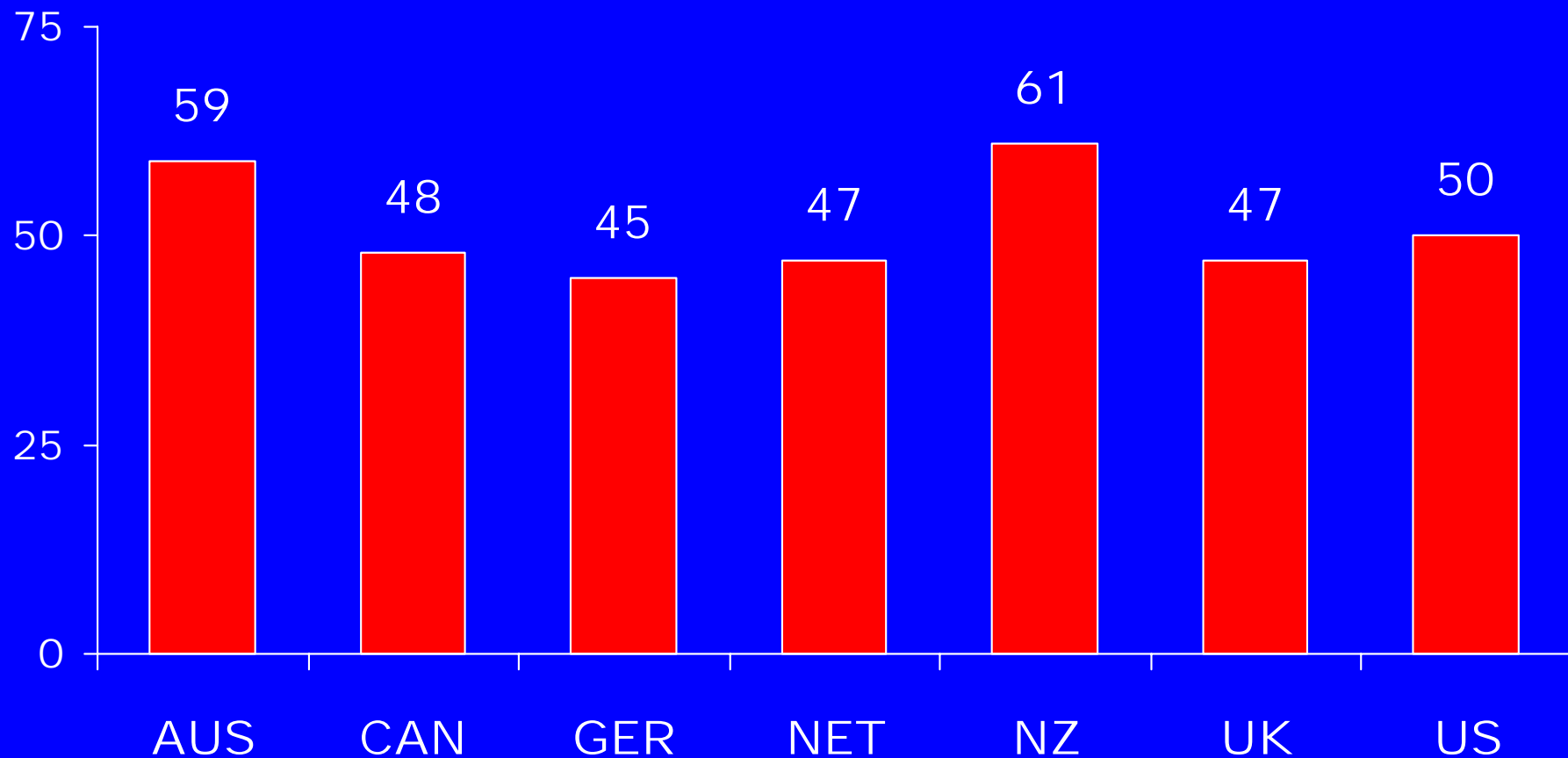
# Regular Doctor Coordinates Care Received from Other Doctors/Places

Base: Have regular doctor/place  
Percent



# Adults with a Medical Home

Percent



Note: Medical home includes having a regular provider that knows you, is easy to contact, and coordinates your care.

Source: 2007 Commonwealth Fund International Health Policy Survey





# Coordination of Care

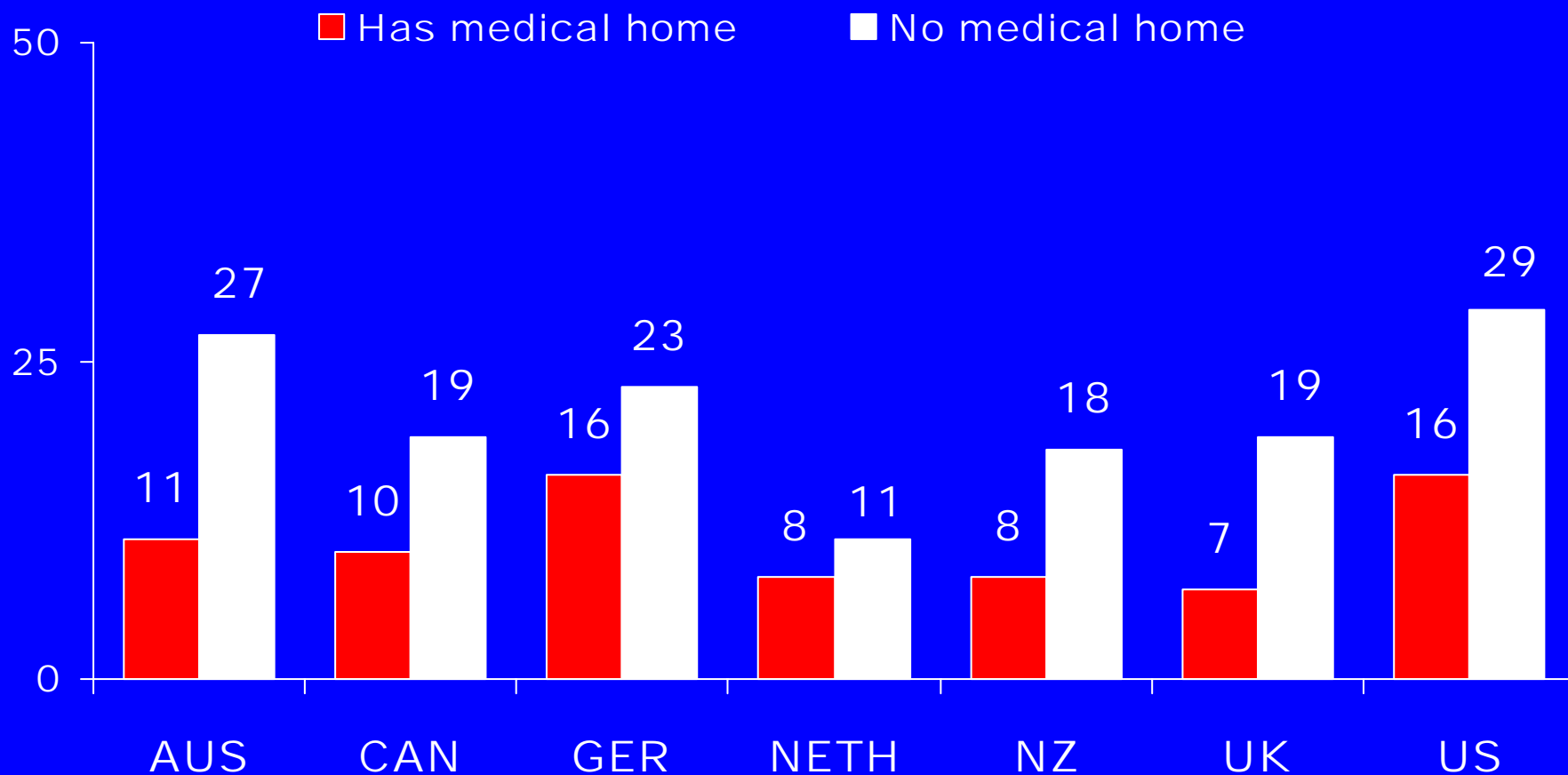
# Care Coordination

Percent reported in past two years:	AUS	CAN	GER	NETH	NZ	UK	US
Test results or records not available at time of appointment	11	11	8	7	9	10	15
Duplicate tests: doctor ordered test that had already been done	10	5	15	4	6	5	14
Percent with either coordination problem	18	15	19	9	12	13	23



# Coordination Problems: Medical Records Not Available During Visit or Duplicative Tests, by Medical Home

Percent with coordination problems



Note: Medical home includes having a regular provider that knows you, is easy to contact, and coordinates your care.

Source: 2007 Commonwealth Fund International Health Policy Survey



# Specialist Care Coordination

Base: Saw a specialist in the past year

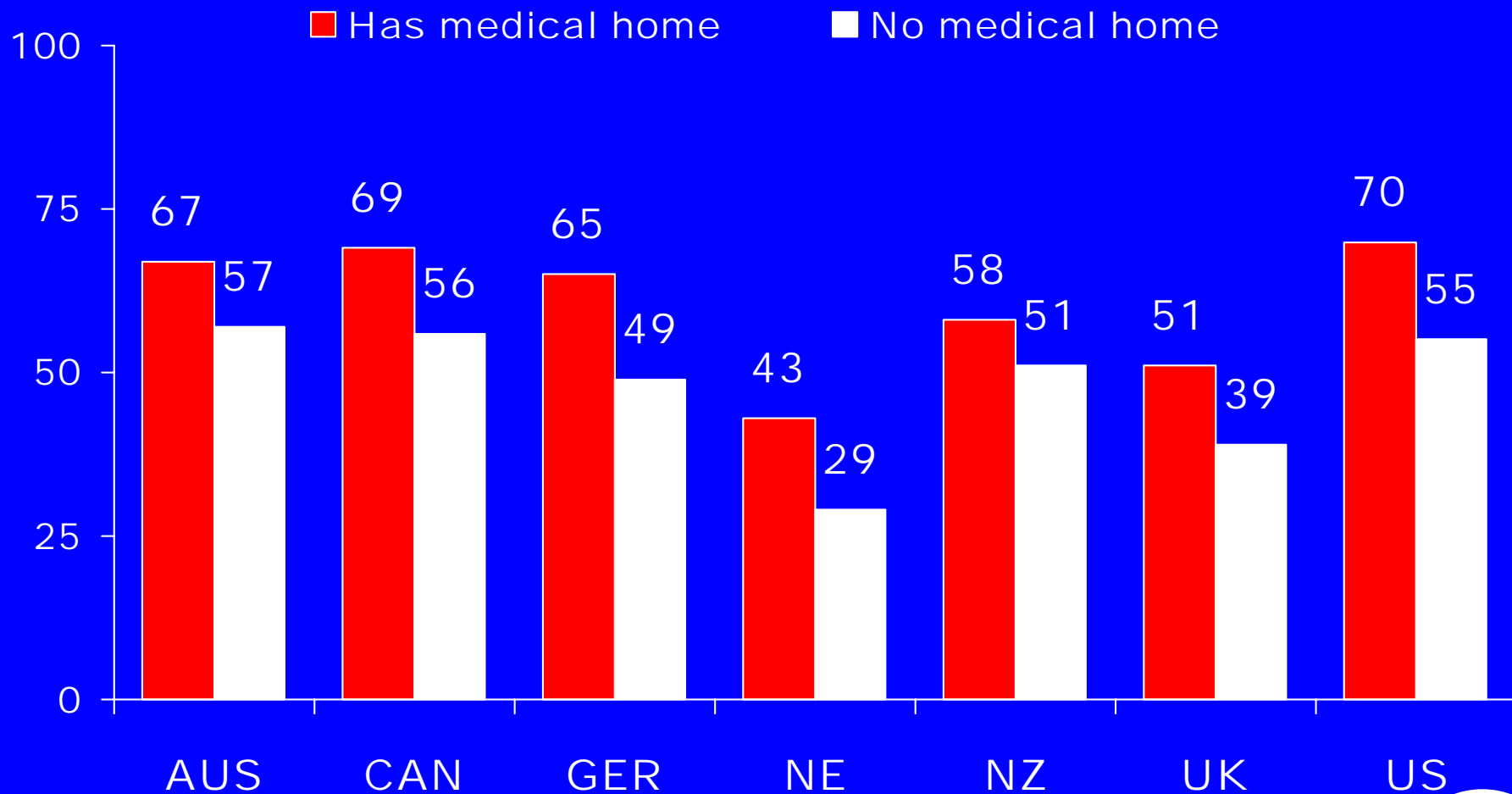
Percent who reported regular doctor:	AUS	CAN	GER	NETH	NZ	UK	US
Helped you decide who to see	63	63	57	35	55	45	63
Provided specialist with information about your condition or problem	81	76	57	65	73	70	72





# Regular Doctor Helped You Decide on Specialist, by Medical Home

Percent

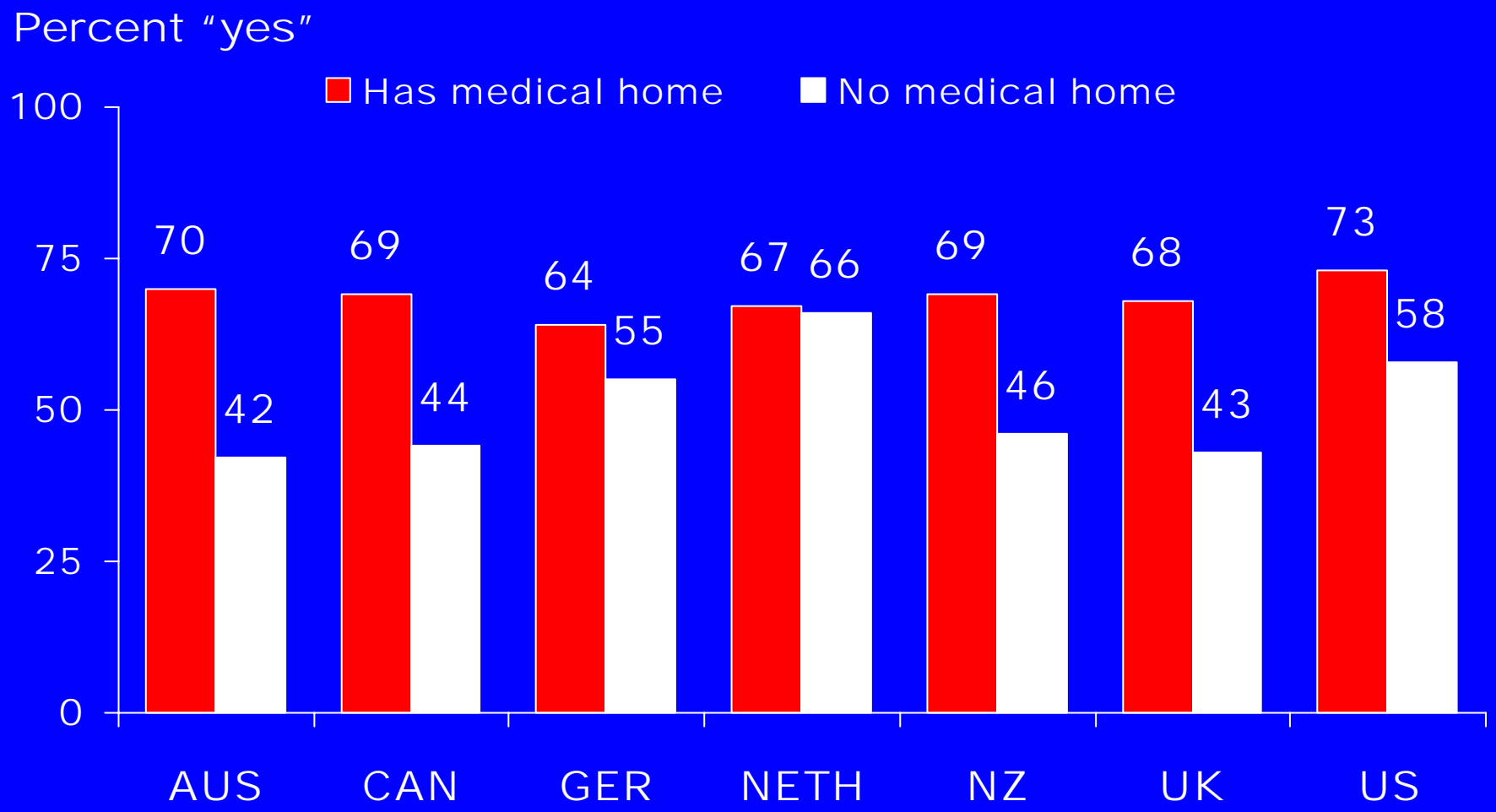


Note: Medical home includes having a regular provider that knows you, is easy to contact, and coordinates your care.

Source: 2007 Commonwealth Fund International Health Policy Survey



# After Emergency Room Use, Did Regular Doctor Seem Informed About Care Received? By Medical Home



Note: Medical home includes having a regular provider that knows you, is easy to contact, and coordinates your care. Average for all respondents: AUS=57%, CAN=57%, GER=33%, NETH=66%, NZ=60%, UK=54%, US=66%.

Source: 2007 Commonwealth Fund International Health Policy Survey





# Patient-Centered Care

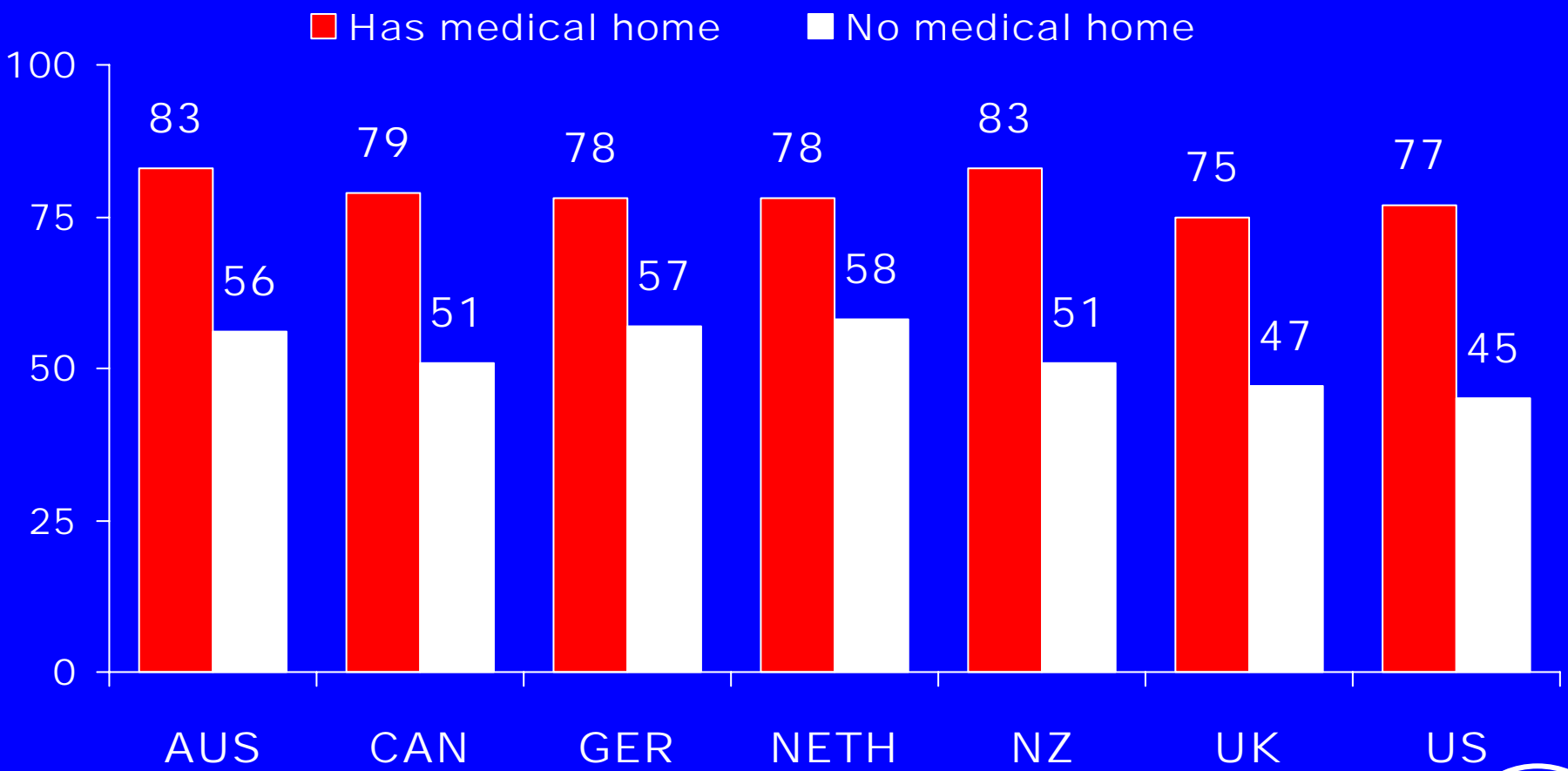
# Doctor-Patient Communication

Percent reported doctor:	AUS	CAN	GER	NETH	NZ	UK	US
Always knows important information about your medical history	69	67	78	71	69	63	62
Always explains things so you can understand	79	75	71	71	80	71	70
Always spends enough time with you	73	59	70	71	69	59	56
Always tells you about your treatment options and involves you in decisions about your treatment	66	62	62	60	67	54	61



# Doctor Always Explains Things, Spends Enough Time With You, and Involves You in Decisions, by Medical Home

Average percent of adults with a regular doctor or place of care reporting "always" across three indicators of doctor-patient communication



Note: Medical home includes having a regular provider that knows you, is easy to contact, and coordinates your care.

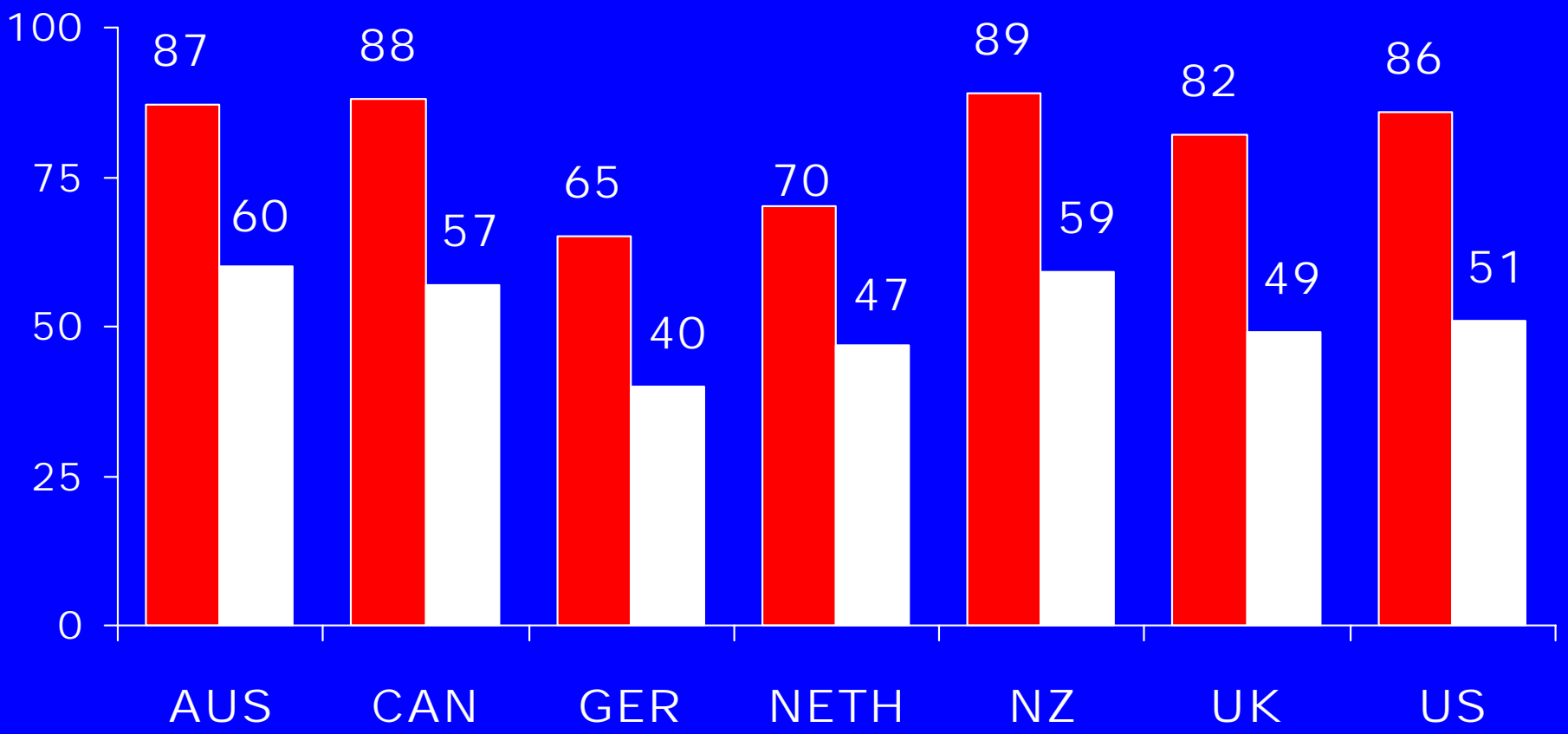
Source: 2007 Commonwealth Fund International Health Policy Survey



# Quality of Care from Doctor, by Medical Home

Percent rated care received "excellent" or "very good"

■ Has medical home ■ No medical home



Note: Medical home includes having a regular provider that knows you, is easy to contact, and coordinates your care.

Source: 2007 Commonwealth Fund International Health Policy Survey





# Care for Chronic Conditions

# Care Management and Coordination for Chronic Conditions

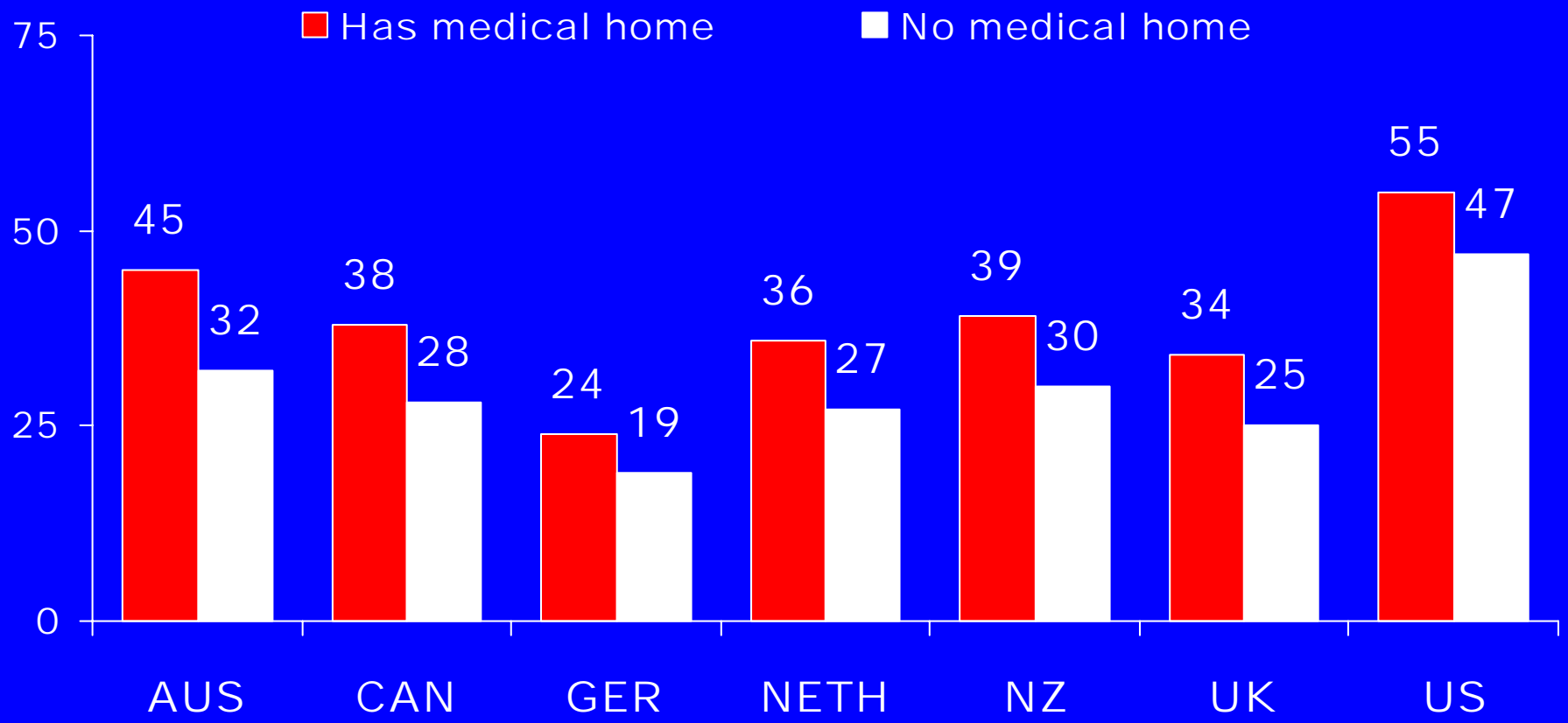
Adults with a chronic condition reported:	AUS	CAN	GER	NETH	NZ	UK	US
Doctor gives you a written plan for managing care at home	40	33	22	31	35	30	61
Receive reminder for preventive/follow-up care	44	40	57	58	48	58	70
Often/sometimes receive conflicting information from different health professionals	14	16	19	13	19	18	22





# Doctor Gives You Written Plan for Managing Care At Home, by Medical Home

Base: Adults with a chronic condition  
Percent with care plan



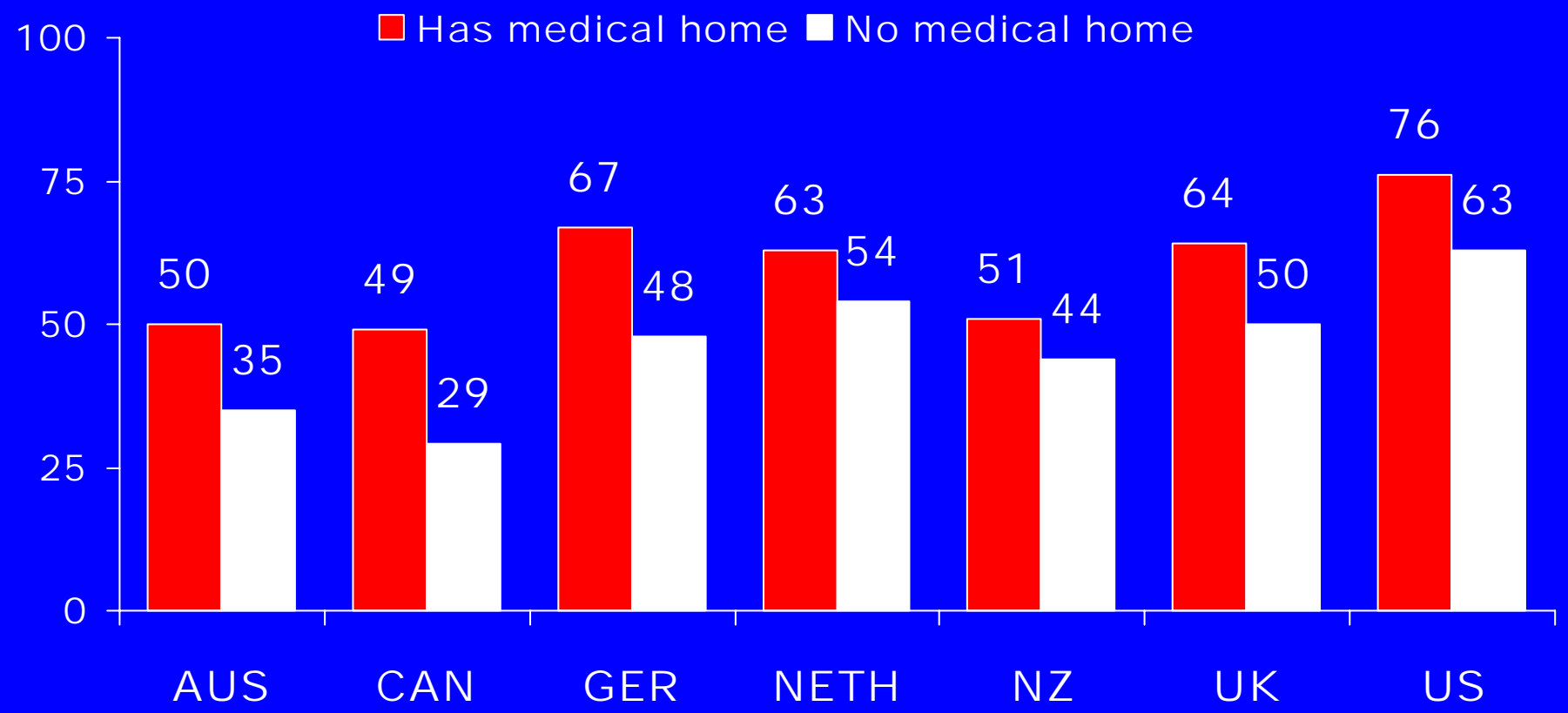
Note: Medical home includes having a regular provider that knows you, is easy to contact, and coordinates your care.

Source: 2007 Commonwealth Fund International Health Policy Survey



# Receive Reminder for Preventive/Follow-Up Care, by Medical Home

Base: Adults with a chronic condition  
Percent with reminder



Note: Medical home includes having a regular provider that knows you, is easy to contact, and coordinates your care.

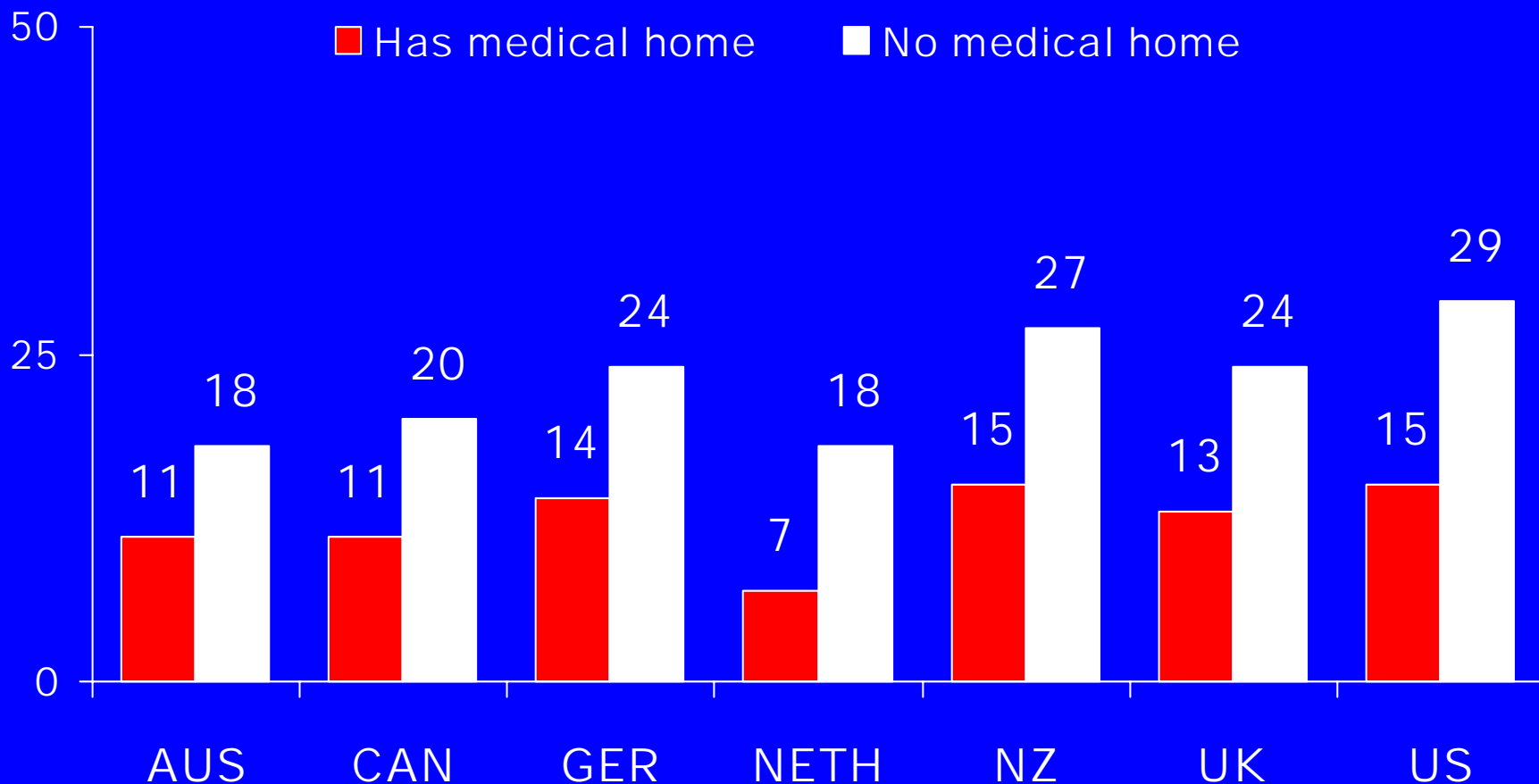
Source: 2007 Commonwealth Fund International Health Policy Survey



# Receive Conflicting Information, by Medical Home <sup>35</sup>

Base: Adults with a chronic condition

Percent often/sometimes received conflicting information



Note: Medical home includes having a regular provider that knows you, is easy to contact, and coordinates your care.

Source: 2007 Commonwealth Fund International Health Policy Survey





THE  
COMMONWEALTH  
FUND

# Safety: Medication, Medical, and Diagnostic Test Errors

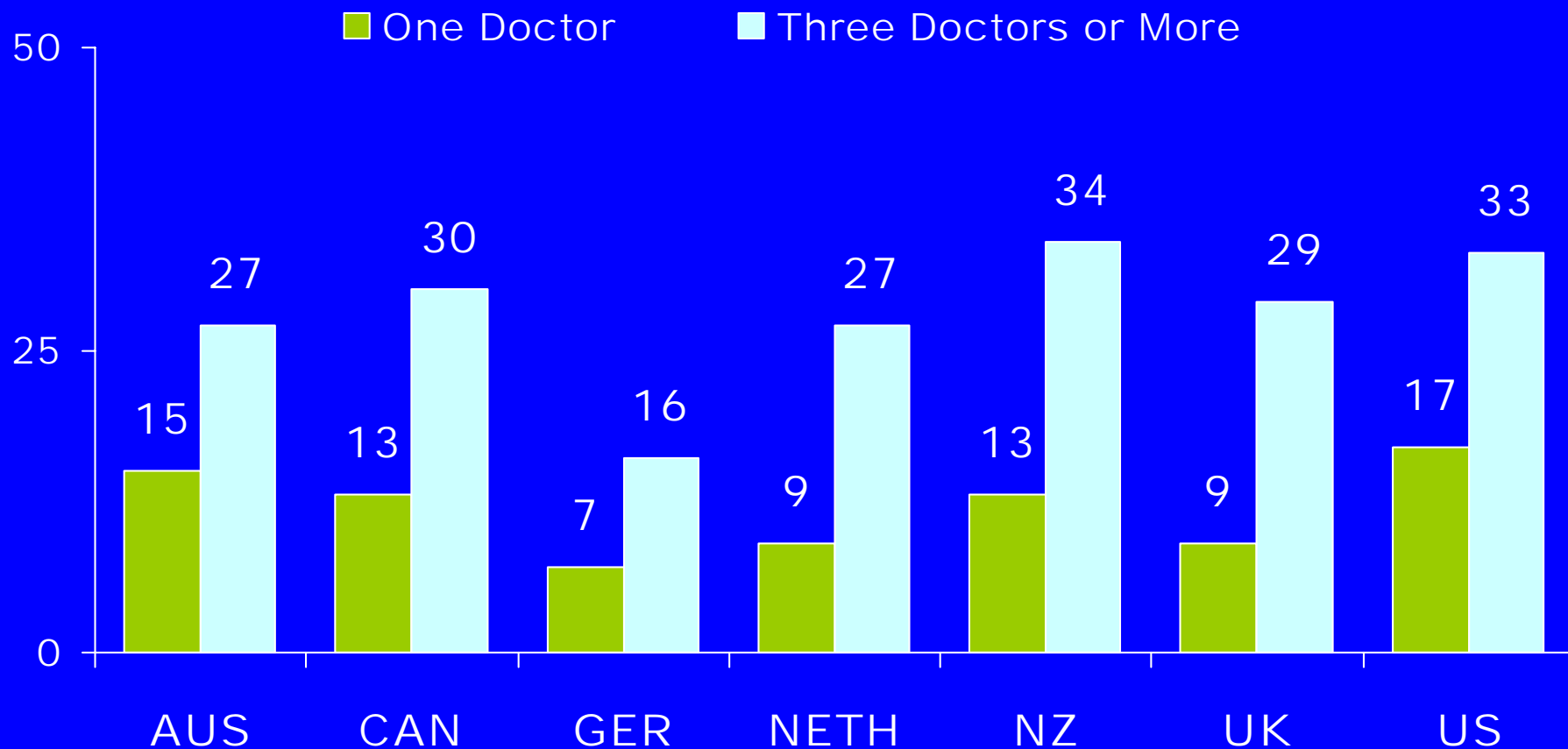
# Medical, Medication, and Lab Errors

Percent reported in past two years:	AUS	CAN	GER	NETH	NZ	UK	US
Experienced medical or medication error	15	10	9	9	11	9	13
Experienced lab or diagnostic test error	11	12	4	8	9	10	14
Experienced any medical, medication, or lab error	20	17	12	14	16	13	20



# Any Error, by Number of Doctors Seen

Percent any error



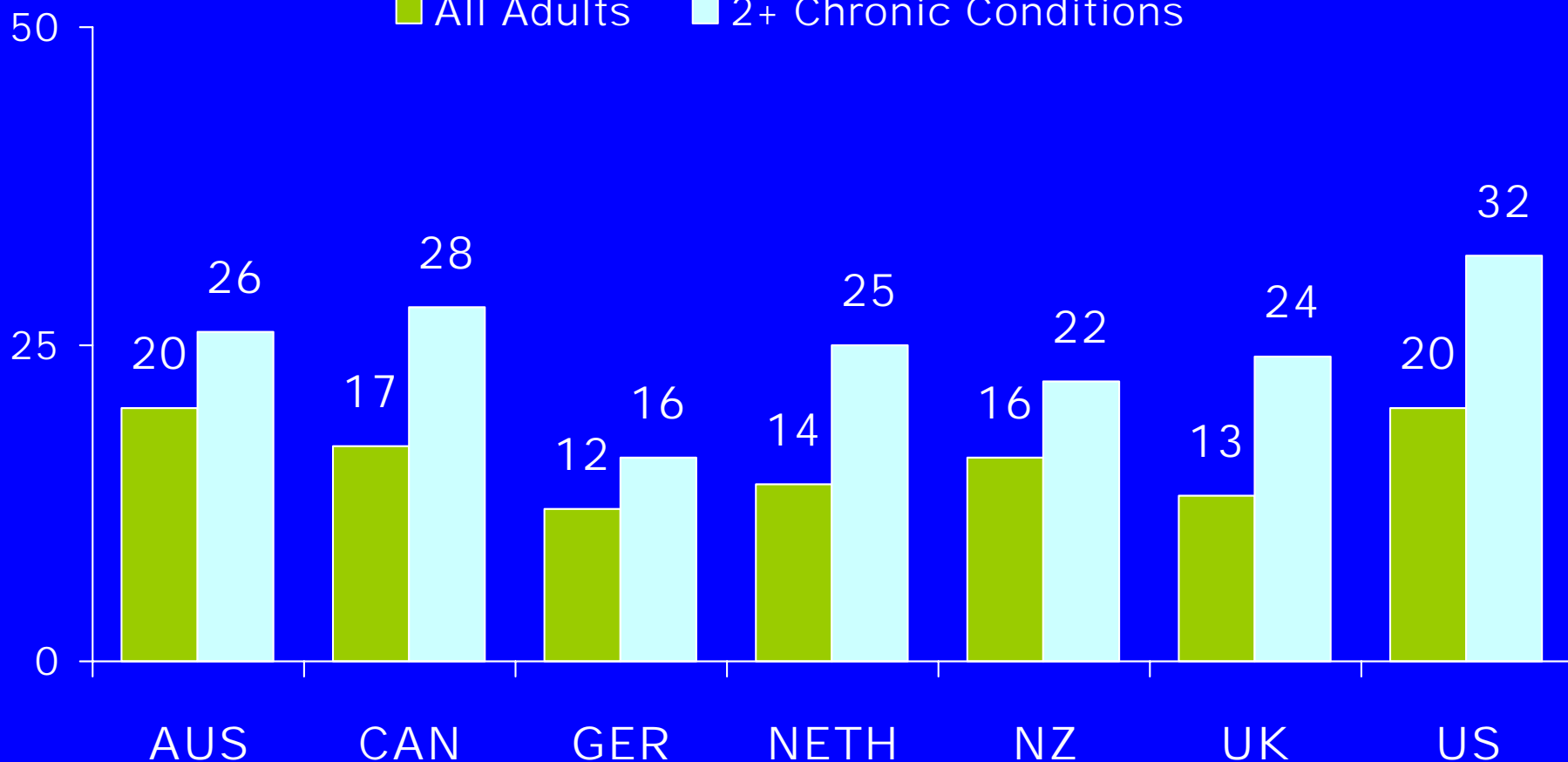
Note: Errors include medical mistake, wrong dose/medication, or lab test error.  
Source: 2007 Commonwealth Fund International Health Policy Survey



# Any Error in Past Two Years

Percent any error

■ All Adults   ■ 2+ Chronic Conditions

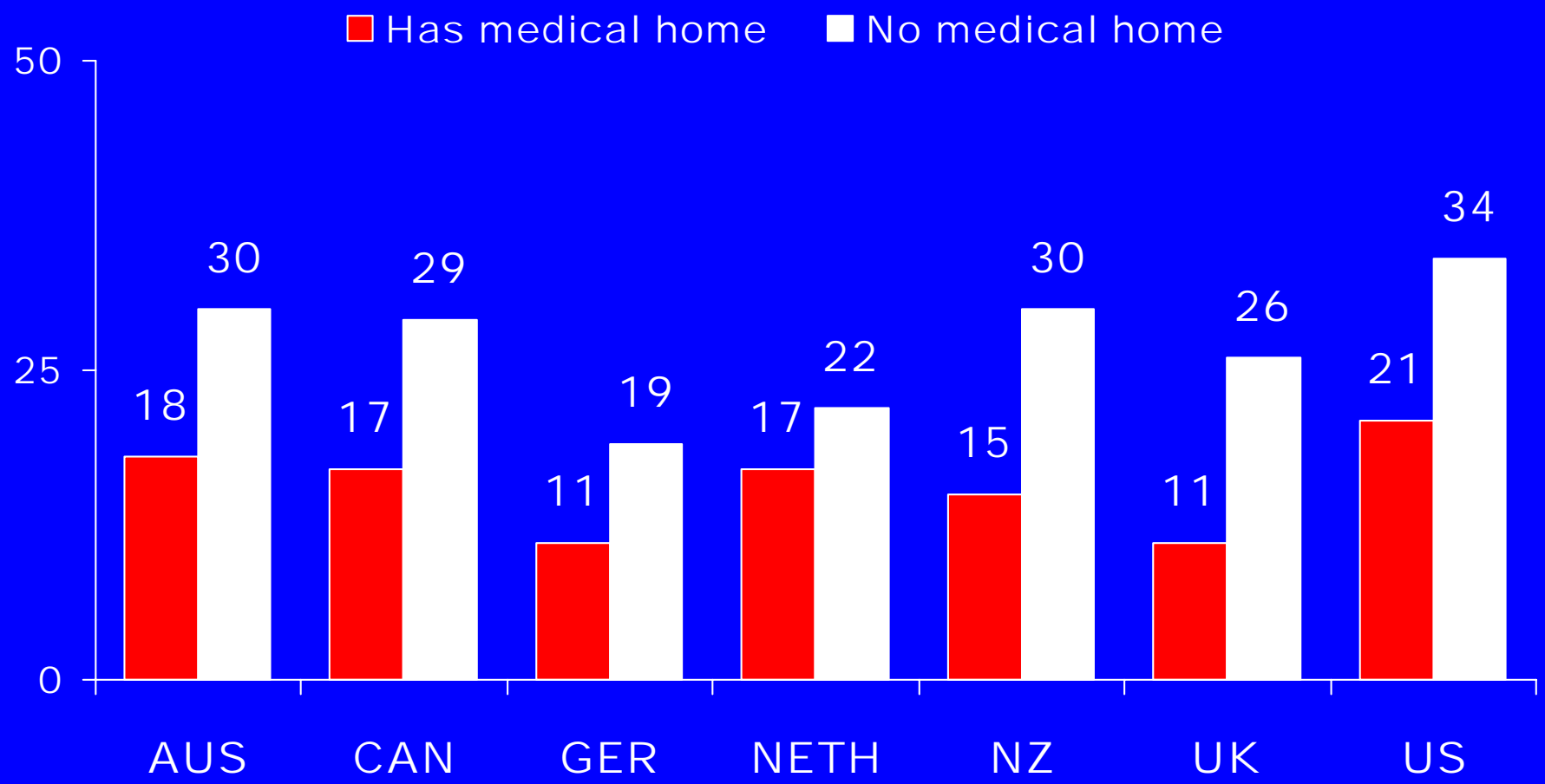


Note: Errors include medical mistake, wrong dose/medication, or lab test error.  
Source: 2007 Commonwealth Fund International Health Policy Survey



# Chronically Ill: Any Error, by Medical Home

Base: Has a chronic condition  
Percent any error



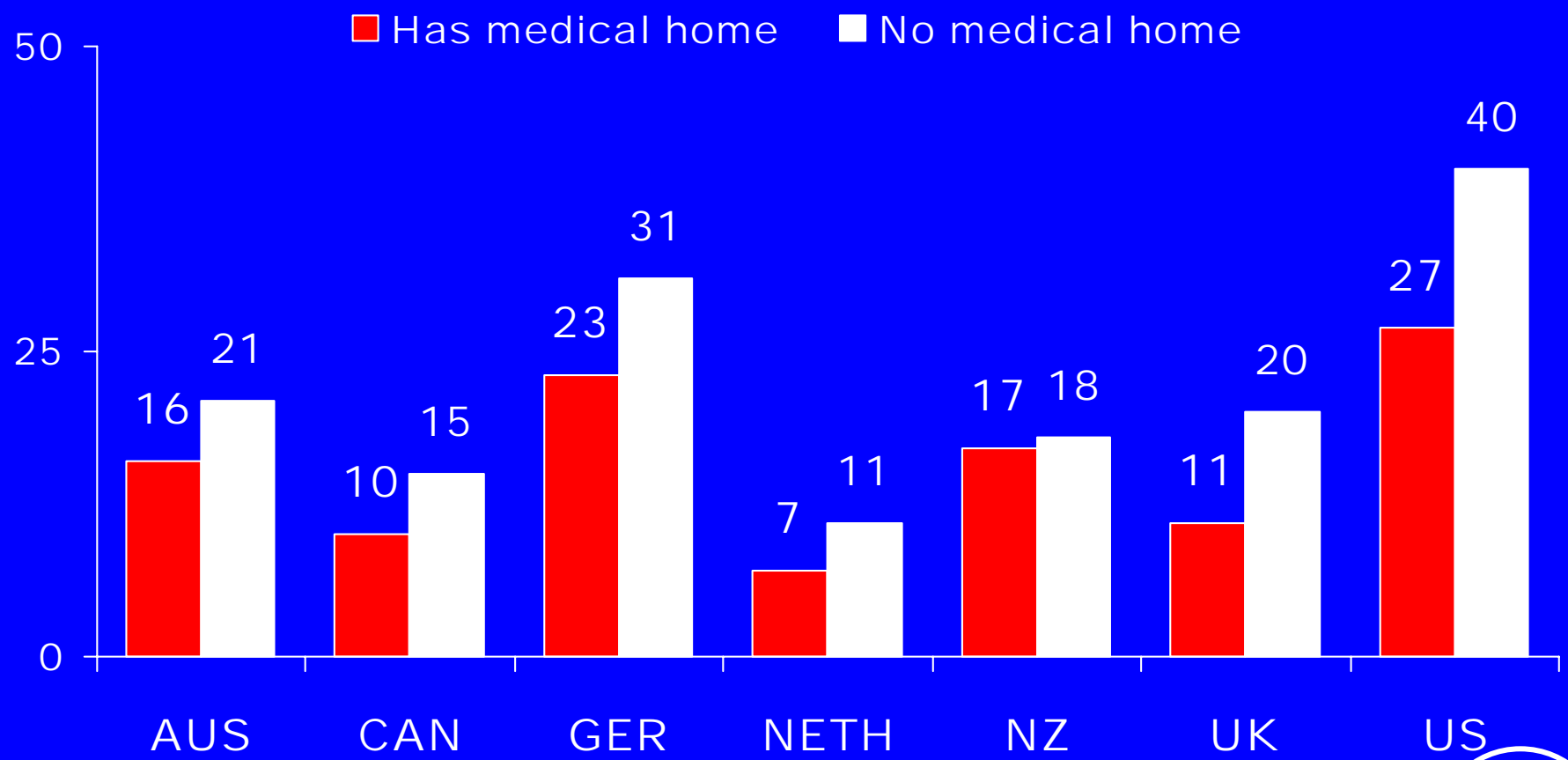
Note: Medical home includes having a regular provider that knows you, is easy to contact, and coordinates your care. Errors include medical mistake, wrong dose/medication or lab test error.  
Source: 2007 Commonwealth Fund International Health Policy Survey





# Views of the Health System in Seven Countries, by Medical Home

Percent reported health system needs to be completely rebuilt



Note: Medical home includes having a regular provider that knows you, is easy to contact, and coordinates your care.

Source: 2007 Commonwealth Fund International Health Policy Survey



# Summary of Findings

- Country patterns reflect underlying insurance design and strategic policy choices
  - Universal coverage and benefit design matters
  - The U.S. stands out for financial barriers that undermine care and often for symptoms of inefficiency
- Experiences in all countries indicate the need for more integrated, patient-centered care “systems”
- In each country, having a “Medical Home” that is accessible and coordinates care improves patient experiences
  - Patient safety
  - Coordination: with specialists/across sites of care; duplication and delays
  - Patient-centeredness and satisfaction
  - Managing Chronically Ill patients

# Conclusions

- No country systematically leads in performance
- Variations in health system performance offer opportunities for cross-national learning
- Managing patients with complex, chronic illnesses is a shared challenge
- Across countries, achieving a high performance health care system will require improvements in:
  - Care coordination
  - Patient safety
  - After-Hours Care
  - Efficiency
- Primary Care “redesign” and Workforce Strategy are critical to improving health system performance

# Acknowledgments

- C. Schoen, R. Osborn, M. Doty, M. Bishop, J. Peugh, N. Murukutla, "Toward Higher-Performance Health Systems: Adults' Health Experiences in Seven Countries, 2007," *Health Affairs* Web Exclusive (Oct. 31, 2007).

With appreciation to:

- Co-Authors: Michelle Doty, Meghan Bishop, Jordon Peugh and Nandita Murukutla
- Develop and Conduct Survey: Harris Interactive and Associates
- Conduct Survey in the Netherlands: The Center for Quality of Care Research (WOK), Radboud University Nijmegen
- Co-Funders: The German Institute for Quality and Efficiency in Health Care, the Dutch Ministry for Health and the Health Council of Canada
- Chart Preparation: Meghan Bishop and Sabrina How

