2011 Survey of Health Care Consumers in Portugal

*Key Findings, Strategic Implications*

Produced by the Deloitte Center for Health Solutions
# Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foreword</td>
<td>3</td>
</tr>
<tr>
<td>Introduction</td>
<td>4</td>
</tr>
<tr>
<td>Survey highlights</td>
<td>6</td>
</tr>
<tr>
<td>Zone One: Wellness and healthy living</td>
<td>9</td>
</tr>
<tr>
<td>Zone Two: Information resources</td>
<td>11</td>
</tr>
<tr>
<td>Zone Three: Traditional health services</td>
<td>14</td>
</tr>
<tr>
<td>Zone Four: Alternative health services</td>
<td>18</td>
</tr>
<tr>
<td>Zone Five: Health insurance</td>
<td>19</td>
</tr>
<tr>
<td>Zone Six: Health policy</td>
<td>20</td>
</tr>
<tr>
<td>Major findings</td>
<td>24</td>
</tr>
<tr>
<td>Stakeholder implications</td>
<td>25</td>
</tr>
<tr>
<td>Closing thoughts</td>
<td>26</td>
</tr>
<tr>
<td>Contacts</td>
<td>27</td>
</tr>
</tbody>
</table>
2011 Survey of Health Care Consumers: Portugal

Many points of view on health care in Portugal have been published, but very few present a vision of Portuguese consumers’ choices and behaviors. The 2011 Survey of Health Care Consumers in Portugal, conducted by the Deloitte Center for Health Solutions, studies consumers’ attitudes, behaviors, and unmet needs. It offers health care industry leaders and policy makers a comprehensive perspective on how Portuguese consumers approach their health, health care, and health insurance. In the process, it offers a tool for prospective change in the system.

Engaging consumers in managing their health is a key to improving the efficiency and efficacy of our system’s performance, now and in the future. The results presented in this study foresee both opportunities for improvement and a need to more clearly communicate with consumers about the way the system is organized and how each citizen can contribute to and benefit from a more consumer-centric approach to care.

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In health care, the role that individuals play in choosing doctors and hospitals, treatment options, and insurance coverage is becoming increasingly important. In many of the world’s health care systems, that role to date has been minimal; however, it is clear that engaging individuals to become more active increases the likelihood of better care and lower costs.

This first-time survey of Portuguese health care consumers offers a glimpse of current opinions and activities as a baseline for future trend analysis. Concurrently, Deloitte conducted surveys in 11 other countries to compare consumer attitudes and behaviors in varied circumstances and systems of care.

In most systems, consumers’ role in managing their health has been secondary; physicians and hospitals have made most of the decisions on their behalf. Looking forward, though, it is apparent that the emergence of technologies that assist consumers in decision-making, and anticipated limits on funding for health care systems, will require new approaches to population health management. Equipping consumers to be more active, engaged, and accountable for their care and the associated costs may be an important new dimension for health care system improvement.

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Foreword
How do health care systems perform from the viewpoint of the citizens they serve? Do individuals understand their treatment options and respond accordingly? Are choices of physicians and hospitals made based on objective information about quality, service, and cost? Are prescription drugs and alternative courses of care thoughtfully considered by consumers when recommended? Are mechanisms to mitigate financial risk via insurance or personal spending managed effectively, or are costs for health care forcing compromises for families?

These questions are at the center of a global discussion about how health care systems – whether government-run or private – relate to their end users, consumers. In 2011, the Deloitte Center for Health Solutions surveyed adults in 12 countries to gauge opinions and expectations about their health care systems. Across these countries there are many differences in health care systems’ structures and operations as well as in the political and economic emphases of national health care reforms. Citizens in each of these countries differ widely in their social, cultural, economic, and generational viewpoints; however, they are all end users of health care and hold strong views on the performance of their respective systems and what they expect to receive from health care. In this report, we offer a baseline analysis about health care consumerism in Portugal.

Health care consumerism: Conceptual framework for this study

Conducted annually in the U.S. since 2008, Deloitte’s longitudinal study of health care consumers seeks to provide a comprehensive view of health care consumerism, a view that goes beyond the conventional boundaries of what health and health care are commonly thought to encompass. In addition to the traditional services that doctors and hospitals provide, the study’s framework takes into account the expanding spectrum of treatment alternatives, delivery settings, information sources, and programs that are coming into existence to promote wellness and self-care, address health needs, and finance health care.

Now in its fourth year, and the first year for Portugal, the 2011 survey explores consumers’ behaviors, attitudes and unmet needs in six areas (Figure 1):

- Wellness and healthy living
- Information resources
- Traditional health services
- Alternative health services
- Health insurance
- Health policy

Figure 1: Zones of health care consumer activity

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This year, Deloitte surveyed health care consumers in Belgium, Brazil, Canada, China, France, Germany, Luxembourg, Mexico, Portugal, Switzerland, the United Kingdom, and the United States (Figure 2).

Highlights of Portugal’s results are included in this summary. A global report, which contrasts findings from the 12 countries, and separate country reports can be found at www.deloitte.com/us/2011consumerism.

**Survey methodology**

A nationally representative sample of 1,000 Portuguese adults, aged 18 and older, was surveyed in April 2011 using a web-based questionnaire. The sample was representative of the nation’s population with respect to age and gender. The margin of error is +/- 3.0% at the .95 confidence level.

The survey consisted of 67 questions, with 29 potential follow-up questions. It was administered in Portuguese. Participants were asked about behaviors before attitudes within each topic area to reduce response bias.

**Background: Portugal’s health care system**

**Portugal** covers citizens under the universal National Health System (NHS), occupation-based “health subsystems,” and private voluntary health insurance. About 34 percent of health care costs are financed by private entities and citizens. The NHS is funded mostly by general taxation (co-payments represent less than one percent), while subsystems and supplemental insurance operate on individual and employer contributions. Approximately 17 percent of the population is covered under a subsystem and 21 percent under a voluntary insurance plan. The health care sector represents about ten percent of the country’s gross domestic product (GDP) and almost six percent of the public budget, and recorded constant growth over the last decade. Since then, public health policies have reorganized primary care and health care for the elderly. Private health services have also increased, with a significant number of new hospitals and clinics offering specialized care.
Consumer perceptions of Portugal’s health care system performance

Consumers believe that the Portuguese health care system is wasteful, complex, and performs poorly.

- Fewer than 1 in 5 consumers rate the performance of Portugal’s health care system as either “excellent” (0.7%) or “very good” (17%). In contrast, 82% give the system a poor report card rating of “C” or below (“C” 49%; “D” 23%; and, “F” 10% (Figure 3).
- 17% feel that they have a strong understanding of how the overall health care system works in Portugal; 17% feel that they do not.
- Slightly more than one-third of consumers feel that the system is performing better than five years ago (36%); a similar number feel that there has been no change (35%) and 24% feel that it is now performing worse than five years previously. Boomers (those born 1946-1964) (32%) in particular, feel that the system is performing worse than before, as do those with “fair” or “poor” health (32%).
- Half (50%) of consumers believe that 50% or more of health care spending is wasted (Figure 4). This waste is attributed to redundant paperwork (67%), individuals not taking enough responsibility for maintaining their own health (32%), unnecessary tests and procedures being performed (24%), heroic end-of-life measures pursued instead of offering pain relief and palliative care (24%), and defensive medicine practices (19%).

Satisfaction overall is low: 13% of consumers are satisfied with the performance of the health care system; 22% are not at all satisfied.

- Consumers are dissatisfied with wait times (70%), access (39%), and failure to focus on patient-centered care (37%) and wellness (34%). Consumers are satisfied with modern technology (41%), innovation (40%), and facilities (29%).
The economic downturn has altered consumers’ health care spending habits

Almost 8 in 10 Portuguese consumers are cautious about spending on health care. 3 in 10 are concerned about future health care costs.

- Three-fourths (77%) of consumers say that the recent economic slowdown has had some impact on how much they are willing to spend on health care services and products. Of these, 49% are more cautious about spending, 20% have cut back spending significantly, and 8% have reduced their spending greatly (Figure 5).
- In the past year, most people have spent money out-of-pocket on pharmaceutical items (95%), over-the-counter products (95%), and on physicians and medical specialists (89%). Half (51%) feel that they receive good value for out-of-pocket spending on pharmaceutical items and physician services (48%); 4 in 10 feel they receive good value for their money when purchasing over-the-counter products (41%). 31% feel that they receive excellent or good value for out-of-pocket spending on health insurance, 29% for hospital services, and 21% for rehabilitation services.

Consumers are concerned about their ability to meet future health care costs; 43% say they spent more on health care products and services than in the prior year.

- Less than one in five (18%) consumers feels financially prepared to handle future health care costs, while 26% do not feel prepared (Figure 6). Of those who feel prepared, most (25%) obtain insurance through an employer. Those who feel unprepared include those with “fair” or “poor” health (42%), those with a chronic condition (32%), and Boomers (36%).
- 43% report they experienced an increase in household spending on health care products and services in the past 12 months.
- Monthly spending on health care restricted the household’s ability to spend on other goods and services for around three-quarters of consumers (77%). Of these, most say they experienced a slight restriction (36%) or a moderate restriction (30%); for some, spending was greatly limited (11%).
Nearly 1 in 4 consumers in Portugal provides care to a family member.

- 23% of consumers report providing care for another individual. Of consumers who report caring for other individuals, 14% care for individuals under the age of 18, 10% care for individuals between ages 18 and 25, 26% care for individuals between ages 26 and 45, 37% care for individuals between ages 45 and 64, and 33% care for individuals age 65+. 20% care for individuals in more than 1 age group.
- Care is provided primarily by the recipient’s spouse (41%), son or daughter (23%), mother or father (21%), extended family members (8%), and equal proportions of paid non-family members and government-funded non-family members (both 4%).
- Care duration ranges from zero to six months (21%), six to 12 months (9%), between one and two years (9%), and two years or more (30%). 31% do not recall the duration.
- 84% of family caregivers report that constant care giving impacts on their income-generating capacity; for some (38%), this represents a major limitation on their ability to earn an income.
4 in 10 consumers rate their physical health as “excellent” or “very good” but half have one or more chronic conditions.

- Close to 4 in 10 Portuguese consumers (37%) rate their physical health as “excellent” or “very good,” while 21% rate their physical health as “fair” or “poor” (Figure 7).
- Half (50%) of consumers report having a chronic condition (Figure 7). 31% report having at least one chronic condition, 15% have at least two, and 4% have three or more.
- The prevalence of chronic conditions slightly increases with age; also, significantly more women (55%) report having at least one chronic condition compared to men (47%).

Use of preventive health care measures that involve traditional medical treatments accessed through providers is high. By contrast, use of alternative preventive health care treatments and participation in wellness programs that depend on individual effort is low.

- A majority of consumers (86%) report that they used one or more preventive or wellness services in the past 12 months:
  - Nearly two-thirds (65%) say they had a regular check-up (Figure 8). Men aged 45-64 years, in particular, report they visited a doctor/medical professional for a routine check-up (74%).
  - 46% say they had an imaging examination or test such as an MRI, CAT scan, or X-ray (Figure 8). This is particularly true for women (54% of those aged 25-44, and 68% of those aged 45-64).
  - 14% of consumers report they received an influenza vaccination (Figure 8).
  - 6% of consumers say they consulted a personal trainer to improve their health (Figure 8).
  - 40% report taking vitamins, minerals, or herbal supplements at some point in the last 12 months (Figure 8), but less than one quarter of consumers take vitamins and minerals (22%) on a regular basis to improve their health or to treat a health condition or problem. Women (25%) are more likely to take vitamins and minerals than men (19%).
In order to improve their health:

- 20% regularly use nutritional foods such as probiotic yogurts or cholesterol-reducing spreads; use is significantly more common among Boomers (30%) compared to Generation Y (those born 1982-1993) (12%) or Generation X (those born 1965-1981) (19%).
- In the past year, 42% have purchased nutritional foods specifically for health purposes.
- 16% use over-the-counter medications; this behavior is more prevalent among women than men (20% vs. 13%).
- 8% use natural therapies.
- Fewer than 1 in 10 (9%) consumers say they participated in wellness programs (Figure 8).
- More individuals with a chronic condition (11%) participate in wellness programs than those without a chronic condition (7%).
- Many consumers favor a tax-based incentive to encourage healthy living, with 45% favoring a tax deduction. This approach is more popular with men (48%) than women (41%), those with “excellent” or “very good” health (49%), and in Generation Y (50%).
Consumers depend on doctors and hospitals for clinical information; they do not widely use online resources for health care.

- Nearly 8 of 10 consumers report they used the Internet in the past year for online banking (78%). Fewer consumers report they used the Internet to purchase merchandise (65%) or to make travel reservations (44%). 32% say they looked online for information about health care treatment options. Generation Y (37%) and Generation X (33%) consumers are significantly more likely to search for health information online than Boomers (26%).

- Consumers rely on academic medical centers (46%), community hospitals (45%), the National Health Care Call Center – Linha de Saude 24 (38%), health government organizations (e.g., Infarmed and DGS) (33%), and pharmacies (30%) as the most-trusted sources of health treatment information. Fewer consumers trust employers (13%), insurance companies (12%), and the Internet (9%) (Figure 9).

- Consumers cite the following as the most-trusted sources of information on treatment costs: community hospitals (42%), academic medical centers (40%), health government organizations (32%), and pharmacies (32%). Fewer consumers trust independent health-related websites (15%), employers (14%), and the Internet (11%).

- Overall, younger generations are more likely to look online for information about the quality (Generation Y [21%] and Generation X [23%]) or costs of services (Generation Y [35%] and Generation X [28%]) provided by a physician. Women are significantly more likely than men to look online for quality information (24% females vs. 16% males) and for cost information (35% females vs. 22% males).

- 15% of consumers say they compared available treatment options for a particular treatment. These people tend to have “fair” to “poor” health (19%) and three or more chronic conditions (27%). Women are more likely to do this than men (18% vs. 12%).

**Figure 9: Trust in information sources**

If you wanted information about the most effective and safe treatment(s) for a certain health condition, how much trust would you have in the following “third-party” sources to provide reliable information?

![Chart showing trust in information sources](chart.png)

- **Academic medical centers/Teaching hospitals**: 46%
- **Community hospitals**: 45%
- **Linha de Saúde 24**: 38%
- **Health government organizations (e.g., Infarmed, DGS)**: 33%
- **Pharmacies**: 30%
- **Medical associations/societies**: 26%
- **Regulatory authorities (ERS)**: 19%
- **Pharmaceutical/biotech/medical device manufacturers**: 14%
- **Independent health-related websites (e.g., Web MD)**: 14%
- **Employers**: 13%
- **Health insurance companies/health plans**: 12%
- **Internet search engines/sites (e.g., Google, Wikipedia)**: 9%

Chart shows % who trust the source (i.e., gave a rating of 8, 9, or 10 on a 10-point scale, where 1 = no trust and 10 = complete trust)

- **2011 Portugal**
Consumers are interested in tools to self-monitor their health; younger adults are interested in using technology such as cell phones and PDAs.

- Almost 2 of every 3 consumers (65%) are interested in using a medical device that would enable them to check their condition and send test results to their physician electronically (Figure 10).
- If their medical records were available on their smartphone, slightly over one-third of consumers (35%) say they would be “very likely” to use their cell phone or PDA to monitor their health; 41% would be “somewhat likely” to do so, and 25% would be “not at all likely” to use telephonic devices for such purpose (Figure 10).

The use of social media for health care purposes is low; younger adults use it to comment on their health care experiences whereas Seniors and Boomers seek information on prescription drugs.

- The majority of respondents (89%) report they do not use social networking sites such as Facebook or Twitter for health care purposes.
- Of those who report using social networking sites, Seniors (those born 1900-1945) and Boomers do so to learn about prescription drugs (12% and 10%), Generation Y (7%) and Generation X (6%) to comment on their experiences. Overall, significantly more females than males (13% vs. 8%) use social media for health care purposes.
- 9% of consumers report they used a blog to share their health care experiences with others or to learn about others’ health care experiences. Bloggers tend to be Generation Y (12%) or Generation X (10%) who comment about their health care experiences.

Figure 10: Interest in medical devices and cell phones for health-monitoring purposes

If you have or were to develop a health condition that needs to be checked regularly, how interested would you be in using a self-monitoring device? If your medical records were available to you on your smartphone, and you were able to download information about your medical condition and treatments, how likely would you be to use your smartphone to monitor your health?

![Figure 10: Interest in medical devices and cell phones for health-monitoring purposes](image-url)
Use of personal health records by Portuguese consumers is low; however, they would favor a government-provided electronic health record for use by themselves and their health care providers.

- Adoption of electronic personal health records (PHRs) is low, with just 10% of consumers maintaining a PHR using a computer software program or a website. There are no significant differences by gender.
- When asked how likely consumers would be to change physicians for access to their health records via a secure Internet connection, Generations Y and X are more likely to respond “very likely” (23% and 26%) and “somewhat likely” (48% and 44%); Boomers and Seniors are more likely not to switch physicians (45% and 54%).
- 64% of consumers say they would favor having a government-provided electronic health record (EHR) for use by themselves and their health care providers, and 55% are supportive of the government providing financial incentives to physicians to adopt EHRs.

Privacy and security risks are a concern to Portuguese health care consumers.

- Slightly over one-third of respondents (35%) are concerned that the privacy and security of their personal health/medical information may be at risk if they used a website or software program to maintain a PHR. 29% were not concerned (Figure 11).
- While this sentiment is generally consistent across age groups, Generation X is significantly more concerned compared to Generation Y (38% vs. 30%).

![Figure 11: Concern about privacy and security of health information](image-url)

How concerned are you that the privacy and security of your personal health/medical information might be at risk if you were to use a computer software program or website to maintain a personal health record that allowed you to share information with your doctor through an Internet connection?

Note: Bars may not sum precisely to the totals above due to rounding.

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Physicians

7 of 10 consumers have a primary care physician and the majority is satisfied with the quality provided; most consumers would value a physician care coordinator to manage their health.

- Nearly half of consumers say they visited their physician in the past year for an illness or injury (43%).
- Nearly 3 of 4 (71%) consumers have a primary care physician (PCP). Those with at least one chronic condition (78%) are significantly more likely than those with no chronic conditions (64%) to have a PCP.
- An insufficient supply of PCPs is the main reason why consumers report not having one (41%); others feel they do not need one (19%) or prefer an alternative care provider (4%).
- 1 in 10 people say they chose not to go to a doctor when sick or injured (11%) in the past year. This is primarily due to a belief that the problem would go away without medical attention (70%). Other reasons include inconvenient appointment times (25%), and cost (23%). 14% say they preferred to use an alternative treatment first or instead (Figure 12).
- Almost 2 of 3 (61%) consumers are satisfied with the quality of care they receive from their PCPs; 4% are not (Figure 13). Significantly more Boomers (71%) are satisfied with the care provided compared to Generation Y (52%) or Generation X (58%).
- 15% of consumers indicate they delayed and/or decided not to follow a course of treatment due to: cost (27%), concern about potential risks/side effects of treatment (25%), or the treatment was no longer needed (19%).
- A small number (12%) of consumers report they switched physicians in the previous year; reasons included dissatisfaction with the care provided by the doctor (30%), the consumer moved (22%), and the consumer needed a doctor with a different specialty (15%).
- Of those who report they paid out-of-pocket for physician services in the past 12 months, 48% feel that they received good value for money, 27% feel the opposite.
- Almost all consumers indicate some interest in an NHS PCP assuming a care coordination role to assertively manage their health care. 58% are very interested and 39% somewhat interested. 4% are not at all interested.

Figure 12: Reasons consumers did not see a doctor when they were sick or injured

Why did you decide not to see a doctor/medical professional when you were sick or hurt?

- Thought the problem would go away: 70%
- Appointment times were inconvenient/I did not have time/took too long: 25%
- Cost was too high: 23%
- Wanted to use an alternative approach/natural therapy first or instead: 14%
- Insurance did not cover the service or treatment I needed: 7%
- Difficult to find a doctor who would accept a new patient: 4%
- Other: 5%

Figure 13: Satisfaction with primary care providers and hospitals

Overall, how satisfied are you with the quality of care you received from your primary care provider/received from the hospital you used most recently?

- Primary care provider: 61% satisfied, 17% not satisfied
- Hospital care: 57% satisfied, 21% not satisfied

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Hospitals

3 of 5 hospital users are satisfied with the quality of care they received; consumers chose hospitals based on location and access.

- 48% report they used a hospital service in the preceding 12 months, primarily for emergency room treatment (29%) or outpatient services (25%). 8% stayed overnight.
- Of those consumers who used hospital services in the last 12 months, over half (57%) say they are satisfied with the quality of care they received; 7% are not satisfied (Figure 13). Significantly more Boomers (68%) than Generation Y (44%) or Generation X (56%) consumers report being satisfied.
- Consumers who used hospital services in the past 12 months say they chose a hospital based on factors including proximity to home (56%), rapid access to care (56%), specialization in the services needed (54%), and doctor/medical professional recommendation (49%) (Figure 14).
- Those who had not recently used hospital services list specialization in services needed (78%), rapid access to care (78%), doctor/medical professional recommendation (68%), and quality and satisfaction ratings (66%) as deciding factors in choosing a hospital, should they need one.

Retail clinics

Consumers visit physicians for preventive health care and for treating illnesses but they are just as likely to visit a walk-in clinic or a hospital emergency room for a minor medical condition.

- More than half (51%) say they used a pharmacy or walk-in clinic in the last 12 months to get care for a non-emergency health problem for themselves or a family member.
- If consumers needed treatment for a minor medical condition, 49% say they would use a pharmacy or walk-in clinic and 53% would be likely to use a hospital emergency room (ER). 29% say they would pay out-of-pocket for care instead of waiting up to a week for an appointment at a physician’s office.
- Retail clinics are used by Generation Y (54%) and Generation X (52%) consumers; less so for Boomers (39%).
- 31% of all consumers say they would not be likely to pay out-of-pocket for treatment of a minor medical condition, even if it meant faster treatment.

Figure 14: Factors important to hospital choice

How important were the following factors to you in choosing the hospital you used most recently?

<table>
<thead>
<tr>
<th>Factor</th>
<th>Rating</th>
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<tbody>
<tr>
<td>Fast access/no waiting times</td>
<td>56%</td>
</tr>
<tr>
<td>Close to home</td>
<td>56%</td>
</tr>
<tr>
<td>Specialization</td>
<td>54%</td>
</tr>
<tr>
<td>Doctor recommendation/referral</td>
<td>49%</td>
</tr>
<tr>
<td>Quality/satisfaction ratings or consumer reports</td>
<td>46%</td>
</tr>
<tr>
<td>Reputation</td>
<td>42%</td>
</tr>
<tr>
<td>Insurance coverage</td>
<td>35%</td>
</tr>
<tr>
<td>Cost of services</td>
<td>33%</td>
</tr>
<tr>
<td>Close to public transportation</td>
<td>30%</td>
</tr>
<tr>
<td>Amenities</td>
<td>29%</td>
</tr>
<tr>
<td>Affiliation with a medical school</td>
<td>13%</td>
</tr>
<tr>
<td>Affiliation with a religious organization</td>
<td>4%</td>
</tr>
</tbody>
</table>

Chart shows % who gave the factor a rating of 8, 9, or 10 on a 10-point scale (1 = not at all important and 10 = extremely important) among consumers who used hospital services in the last 12 months.

2011 Portugal

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Traveling for care
Consumers prefer to seek care locally but are willing to travel outside their local areas to receive the best care available.

- 24% of consumers report they traveled outside their local area in the preceding year to consult with a doctor, undergo a medical test or procedure, or receive treatment. Many are open to traveling outside their local area for treatment if recommended to do so by their physician (56%).

- Less than 1% says they traveled outside Portugal to consult with a doctor, undergo a medical test or procedure, or receive treatment in the last 12 months. Considerably more say they would consider doing so if they needed a necessary hospital procedure like joint replacement or heart surgery (15% “definitely” and 49% “maybe”) or if they needed elective care such as cosmetic surgery or dental treatments (7% would “definitely” and 30% would “maybe” consider traveling outside Portugal) (Figure 15).

- The decision to travel outside Portugal for essential care depends on factors such as an expectation of superior quality medical care and treatment (77%), availability of the specific doctors or treatment needed (75%), more up-to-date technologies and facilities than are available in Portugal (71%), lack of waiting times (65%), and out-of-pocket costs (63%).

- For necessary care (such as joint replacement or heart surgery) 59% would “definitely” go to a hospital that is not the one nearest to their home and 35% would “maybe” do so. 53% would “definitely” go to a town nearby and 41% would maybe do so. With respect to elective procedures such as cosmetic surgery or dental treatments, 40% say they would “definitely” and 49% would “maybe” go to a hospital that is not the one nearest to home; 32% would “definitely” and 51% would “maybe” travel to a neighboring city (Figure 15).

- The decision to travel outside Portugal for elective procedures is based on criteria such as superior quality of medical care and treatment (78%), availability of the specific doctors or treatments (73%), up-to-date technologies and facilities (70%), lack of waiting times (65%), and lack of waiting times (65%).

Figure 15: Willingness to travel for care
How likely would you be to travel for necessary or elective hospital care?

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Prescription medication use

4 in 10 (42%) of Portuguese consumers use prescription medications; the majority believes they are safe and effective.

- 42% of consumers take prescription medications.
  - Of those taking prescription medications:
    - 40% are being treated with one prescription medication.
    - 23% are being treated with two prescription medications.
    - 34% are being treated with three or more prescription medications.
  - Additionally, nearly 3 of 4 (77%) consumers taking prescription medications are confident about the effectiveness of their medications, compared to the 1% who is not confident about the effectiveness.
  - Of those taking one or more prescription medications, 37% say they switched to a generic drug to save money in the past 12 months; 41% purchased a generic drug rather than a prescription drug based on advice they received at the pharmacy counter; and 39% purchased an over-the-counter product rather than a prescribed drug (Figure 16).
  - 7% report they were treated, or are aware of someone who was treated, in the last 12 months with a personalized medication, which was described as a medicine that is tailored to an individual’s needs and condition (e.g., using genetic testing to develop a specialized medication that specifically targets the individual with a particular disease).
  - Of prescription medication users, 31% looked online for information on treatment options and 19% asked a pharmacist’s opinion about medication prescribed by a doctor. In the past year, 12% of prescription medication users discontinued taking a prescription medication before it was finished and 12% modified the dosage or frequency without telling the doctor (Figure 17).

Figure 16: Prescription medication behaviors motivated by cost

Which of the following have you done in the last 12 months?

- Purchased a generic drug instead of a prescription drug because of price or advice received at the pharmacy counter (41%)
- Purchased an over-the-counter product from a store instead of filling a prescription (39%)
- Asked doctor to prescribe a generic drug rather than the brand drug due to cost (37%)
- Purchased prescription medications from a source outside the country (1%)
- Purchased prescription medications from a mail order or online pharmacy (1%)

Figure 17: Seeking and using information about treatment options

Which of the following have you done in the last 12 months?

- Looked online for information about treatment options (31%)
- Asked a pharmacist’s opinion about a medication that was prescribed by a doctor (19%)
- Compared available treatment options for a particular health condition/problem (17%)
- Asked doctor to prescribe particular drug by name or brand or asked whether it would be a better choice (13%)
- Discontinued taking a prescribed medication before it was finished (12%)
- Modified the dosage or frequency of prescribed medication without asking or telling your doctor (12%)
- Switched prescription medications (4%)
Interest in alternative health services is low in Portugal.

- Portuguese consumers report that, in the last 12 months:
  - 11% treated a health problem with an alternative approach or a natural therapy, and 14% consulted an herbalist, homeopath, chiropractor, or other alternative health care practitioner or advisor (Figure 18).
  - Of the consumers who switched doctors/medical professionals (12%), 9% did so because they wanted to use a health care practitioner who offered alternative treatment approaches or natural therapies.
  - 9% of prescription medication users used an alternative treatment approach or natural therapy in addition to a prescribed medication; 7% of prescription medication users substituted an alternative treatment approach or natural therapy for a prescribed medication (Figure 18).
  - 15% delayed or decided not to follow a course of treatment recommended by their doctor/medical professional; of these, 12% did so because they wanted to use an alternative or natural therapy first or instead.

**Figure 18: Use of alternative treatment options and natural therapies**

Which of the following have you done in the last 12 months?

- Consulted an herbalist, homeopath, chiropractor, or other alternative health care practitioner or advisor (14%)
- Treated a health problem with an alternative approach/natural therapy (11%)
- Used an alternative approach/natural therapy in addition to a prescribed medication (% of medication users) (9%)
- Substituted an alternative approach/natural therapy for a prescribed medication (% of prescription medication users) (7%)

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Over half of consumers reported they have insurance coverage in addition to the NHS; when considering all types of insurance held, most feel they are adequately covered.

- Among consumers who have insurance coverage in addition to the NHS, 48% say they obtained this coverage through an employer (their own or their spouse’s) and 31% purchased it from an insurance company or health plan.
- Of those with supplemental insurance coverage, 61% have one or more types of additional insurance. Specifically, consumers have coverage for dental care (40%), vision/eye care (36%), critical illness (36%), long-term care (29%), prescription drugs (25%), and disability (16%). 6% indicate they have “other” supplemental insurance while 27% are not sure what additional coverage they have, if any.
- Of the consumers living with a spouse or partner (59%), over one-third (34%) are covered by the same insurance policy; 25% are covered by different policies, and 37% report their spouse has no coverage.
- 17% feel that they are “well-insured” by insurance and 12% feel that they are “under-insured” (Figure 19). More Generation Y consumers (22%) feel they are “well-insured,” while more Generation X consumers (67%) feel they are “adequately insured.”
- 44% of consumers who have health insurance either with their own employer or through their spouse or partner feel that having that insurance is important but they could do just as well shopping for insurance on their own; slightly over one-quarter (27%) report that having employer-sponsored insurance is a major reason why they stay with that employer.
- Very few consumers say they made changes to their insurance coverage in the last 12 months: 3% dropped their coverage altogether and a similar number (3%) purchased additional/supplemental coverage. Consumers report they switched plans to pay less for insurance (33%), to get better coverage/benefits (30%), and for better customer service (20%).
- For consumers who do not have insurance additional to the NHS, the major reasons include: too expensive (49%), the coverage they receive from NHS is sufficient for their health needs (33%), or they no longer have insurance because they do not work for their employer (11%).
Overall, consumers feel there is substantial room for improvement in the Portuguese health care system.

- Only 1 in 10 (10%) consumers sees the Portuguese health care system as working better than most systems in the world but slightly more (13%) agree that the quality of care in Portugal is comparable to the best in the world. Somewhat more consumers (14%) agree that increasing privatization in the system would improve performance.
- 41% agree it is possible to improve quality and reduce costs simultaneously in the current health care system. 21% agree physicians and hospitals in the system have access to the latest technologies and treatments. 8% feel that Portugal’s government is managing to balance priorities in the system; 45% feel the opposite.
- Opinions held by generations about the performance of Portugal’s health care system are consistent. The exception is the Boomers who feel more positively about the technological strengths of the system (28% agree as compared with 14% of Generation Y and 20% of Generation X). More Boomers agree that quality could improve at the same time as costs decrease (47%) as compared with younger adults (Generation Y [33%] and Generation X [39%]) (Figure 20).

### Figure 20: Consumer insights about Portugal’s health care system by generation

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Our system works better than most systems in the world.</td>
<td>9%</td>
<td>10%</td>
<td>11%</td>
</tr>
<tr>
<td></td>
<td>38%</td>
<td>38%</td>
<td>38%</td>
</tr>
<tr>
<td>The quality of care in our system is comparable to the best in the world.</td>
<td>14%</td>
<td>11%</td>
<td>14%</td>
</tr>
<tr>
<td></td>
<td>41%</td>
<td>43%</td>
<td>36%</td>
</tr>
<tr>
<td>Physicians and hospitals in our system have access to latest technologies and treatments.</td>
<td>14%</td>
<td>20%</td>
<td>28%</td>
</tr>
<tr>
<td></td>
<td>24%</td>
<td>20%</td>
<td>12%</td>
</tr>
<tr>
<td>The government does a good job balancing priorities in our system.</td>
<td>8%</td>
<td>7%</td>
<td>7%</td>
</tr>
<tr>
<td></td>
<td>41%</td>
<td>47%</td>
<td>48%</td>
</tr>
<tr>
<td>Increased privatization in our system would improve its performance.</td>
<td>15%</td>
<td>12%</td>
<td>17%</td>
</tr>
<tr>
<td></td>
<td>32%</td>
<td>37%</td>
<td>36%</td>
</tr>
<tr>
<td>It is possible to improve quality and reduce costs simultaneously in our current system of care.</td>
<td>33%</td>
<td>39%</td>
<td>47%</td>
</tr>
<tr>
<td></td>
<td>11%</td>
<td>10%</td>
<td>9%</td>
</tr>
</tbody>
</table>

Note: Seniors had insufficient cell size to report

Agree = ratings of 8, 9, or 10 on a 10-point scale
Disagree = ratings of 1, 2, or 3 on a 10-point scale
• Wait times for service were graded unfavorably by 70% of respondents (Figure 21). Consumers felt positively about modern technology (41%), medical innovation (40%), and up-to-date facilities (29%) of Portugal’s health care system, grading them an “A” or “B” (Figure 21).

• More than half (59%) feel that health care will be very important in the next political election. Reducing health care costs (56%), increasing access to services, physicians, and medications (71%), and improving the quality of care provided by doctors and hospitals (74%) are top issues for consumer support of political candidates.

The majority of consumers believe that the system should increase access to primary health care services.

• 77% say they are in favor of expanding the number of providers by training more primary care practitioners and more specialist medical practitioners (75%).

• 40% are in favor of allowing nurses to diagnose and treat uncomplicated conditions.

**Figure 21: Report card grades for specific elements of the health care system**

How would you grade the public health system in Portugal on the following dimensions (using a typical report card scale of A, B, C, D, F)?

<table>
<thead>
<tr>
<th>Dimension</th>
<th>Favorable Grade (%)</th>
<th>Unfavorable Grade (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Up-to-date technology</td>
<td>41%</td>
<td>15%</td>
</tr>
<tr>
<td>Medical innovation (new treatments or services)</td>
<td>40%</td>
<td>18%</td>
</tr>
<tr>
<td>Up-to-date buildings and equipment</td>
<td>29%</td>
<td>25%</td>
</tr>
<tr>
<td>Access to services (availability and convenience)</td>
<td>39%</td>
<td>20%</td>
</tr>
<tr>
<td>Patient/consumer centered</td>
<td>37%</td>
<td>20%</td>
</tr>
<tr>
<td>Focus on wellness rather than illness</td>
<td>34%</td>
<td>18%</td>
</tr>
<tr>
<td>Wait times for service</td>
<td>70%</td>
<td>9%</td>
</tr>
</tbody>
</table>
## Consumers’ views on 24 health care reform proposals

<table>
<thead>
<tr>
<th>Proposal</th>
<th>Favor (%)</th>
<th>Oppose (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Assigning every Portuguese resident to a primary care general practitioner (GP) who will assist in coordinating care and referring them to needed specialty services, instead of having people assigned to no GP</td>
<td>82</td>
<td>3</td>
</tr>
<tr>
<td>2. Expanding teaching programs in Portuguese schools of medicine to increase the supply of GPs</td>
<td>77</td>
<td>4</td>
</tr>
<tr>
<td>3. Expanding teaching programs in Portuguese schools of medicine to increase the supply of specialist physicians</td>
<td>75</td>
<td>4</td>
</tr>
<tr>
<td>4. Increasing government funding and incentives to support expanding local care services (home care, day programs, and other local health resources)</td>
<td>72</td>
<td>3</td>
</tr>
<tr>
<td>5. Allowing the NHS to compile information about individuals who take prescription medications to monitor product safety and effectiveness after the products have been introduced in the market</td>
<td>67</td>
<td>3</td>
</tr>
<tr>
<td>6. Expanding teaching programs in Portuguese schools of medicine to increase the supply of GPs, if it causes a corresponding decrease in the supply of specialist physicians</td>
<td>64</td>
<td>5</td>
</tr>
<tr>
<td>7. Increasing regional support for long-term care and home care funding, even if it means shifting some funding from other parts of the health system</td>
<td>52</td>
<td>7</td>
</tr>
<tr>
<td>8. Moving services and management of illness “into” the home so the need to see a GP or hospital to manage an illness is diminished</td>
<td>47</td>
<td>6</td>
</tr>
<tr>
<td>9. Expanding primary care services by allowing nurses to diagnose problems and administer care for uncomplicated conditions</td>
<td>40</td>
<td>20</td>
</tr>
<tr>
<td>10. Requiring holistic and non-traditional methods of care to be taught in Portuguese schools of medicine</td>
<td>40</td>
<td>9</td>
</tr>
<tr>
<td><strong>Provider payment &amp; malpractice</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Establishing a special court system to address medical malpractice issues using scientifically-based guidelines to determine negligence or malpractice</td>
<td>74</td>
<td>3</td>
</tr>
<tr>
<td>12. Establishing a personal budget where patients with particular diseases or conditions are given a set amount of funding to help manage their illness</td>
<td>60</td>
<td>7</td>
</tr>
<tr>
<td>13. Paying doctors and hospitals based on clinical results and outcomes rather than on the number of patients they serve or services they provide</td>
<td>52</td>
<td>12</td>
</tr>
<tr>
<td>14. Establishing a national program that provides financial incentives for doctors who follow scientifically proven approaches when treating specific conditions</td>
<td>49</td>
<td>12</td>
</tr>
<tr>
<td>15. Limiting coverage for certain procedures and treatments based on criteria such as old age, short life expectancy, and limited outcomes expected</td>
<td>12</td>
<td>47</td>
</tr>
<tr>
<td>16. Implementing a cap on the yearly health expenditures per household</td>
<td>12</td>
<td>58</td>
</tr>
</tbody>
</table>
### Consumers’ views on 24 health care reform proposals (cont’d)

<table>
<thead>
<tr>
<th>Public health, prevention &amp; wellness</th>
<th>Favor</th>
<th>Oppose</th>
</tr>
</thead>
<tbody>
<tr>
<td>17. Increasing funding for public health surveillance and response to potential disease outbreaks</td>
<td>58%</td>
<td>4%</td>
</tr>
<tr>
<td>18. Increasing funding toward the prevention of chronic conditions and other health conditions, even if it means reducing funding to other parts of the health system</td>
<td>45%</td>
<td>8%</td>
</tr>
<tr>
<td>19. Creating a tax reduction for individuals who follow a defined set of healthy living activities and behaviors</td>
<td>45%</td>
<td>21%</td>
</tr>
<tr>
<td>20. Reducing medical intervention that would be considered heroic measures</td>
<td>25%</td>
<td>24%</td>
</tr>
<tr>
<td>21. Decreasing funds allocated to research programs on orphan diseases</td>
<td>7%</td>
<td>62%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Health information technology &amp; electronic medical records</th>
<th>Favor</th>
<th>Oppose</th>
</tr>
</thead>
<tbody>
<tr>
<td>22. Having a government-provided electronic medical record that can be used by hospitals, physicians, other health providers and yourself to manage your health information</td>
<td>64%</td>
<td>5%</td>
</tr>
<tr>
<td>23. Increasing government funding and incentives to support the adoption of electronic medical records by doctors, hospitals, and health plans</td>
<td>55%</td>
<td>7%</td>
</tr>
<tr>
<td>24. Having government, hospitals, physicians, or other health providers scan individuals’ medical records to identify individuals for whom special programs and incentives might be of interest in helping them improve or manage their health</td>
<td>51%</td>
<td>10%</td>
</tr>
</tbody>
</table>
#1: Consumers say Portugal’s health care system performs poorly and does not compare well with other systems around the world. Many consumers are dissatisfied with performance but recognize opportunities for improvement.

- 8 in 10 Portuguese believe that their health care system performs sub-optimally. 22% are dissatisfied with system performance. 10% believe that the system works better than other comparable systems in the world, and the majority is dissatisfied with aspects of the system.
- Major areas for improvement are enhanced access to services, shorter wait times, and improved focus on patient-centered care and wellness.
- 4 in 10 Portuguese believe that it is possible to improve quality and reduce costs simultaneously.
- One-third of consumers feel that the system is performing better than it was five years ago.

#2: Access to and satisfaction with primary care services is relatively high. Many use a pharmacy or walk-in clinic for non-emergency care. The majority of Portuguese consumers do not participate in formal healthy lifestyle programs, nor are such things as vitamins and nutritional foods commonly used to improve health.

- 7 in 10 have a regular primary care physician.
- 43% of consumers say they sought care from their physician in the past year for sick visits, 65% for a routine checkup, and 46% for imaging exams and flu immunizations (14%).
- Less than one-quarter of consumers take vitamins and minerals (22%) on a regular basis to improve their health or to treat a health condition or problem.
- 9% report they participated in a formal lifestyle/wellness program in the past year.
- More than half (51%) say they used a pharmacy or walk-in clinic in the last 12 months to get care for a non-emergency health problem for themselves or a family member.
- If consumers needed treatment for a minor medical condition, 49% say they would use a pharmacy or walk-in clinic, 53% would be likely to use the ER at a hospital, and 29% would pay out-of-pocket instead of waiting for up to a week for an appointment at a physician’s office.
- 11% of consumers report they treated a health problem with an alternative approach or a natural therapy; 14% consulted an herbalist, homeopath, chiropractor, or other alternative health care practitioner or advisor.

#3: Use of health care information technologies for self-monitoring and care management is low, as is use of online resources. However, consumers are interested in tools to self-monitor their health and in using technology such as cell phones and PDAs.

- 76% of consumers are interested (“very likely” and “somewhat likely”) in medical record access via smart phones. Generations Y and X were more willing to switch doctors to gain access to their medical records via an Internet connection, saying they were “very likely” (23% and 26%) and “somewhat likely” (48% and 44%); Boomers and Seniors were more likely not to switch physicians (45% and 54%).
- Around 35% of consumers are concerned that the privacy and security of their health care information may be at risk if they used a website or software program to maintain a PHR.

#4: Portuguese consumers are concerned about health care costs.

- 77% of consumers say health care costs have limited their spending on other essential household items.
- 2 in 10 consumers do not feel financially prepared to handle future health care costs.
- 17% feel “well-insured” and 66% feel “adequately insured” by all types of coverage.
- 77% report that the recent economic slowdown made them reconsider how much they are willing to spend out-of-pocket on health care.

#5: Policy changes that support improved access to primary health care services, improved service, and innovation that reduces costs are popular among Portuguese consumers.

- Portuguese consumers want their health care system to improve and are highly receptive to innovation in the sector.
- From a consumer perspective, much can be done to improve care systems, utilize technology, reduce wait times, and develop a stronger consumer focus.
- 82% favor assigning every Portuguese resident to a primary care GP who will assist in coordinating care and referring them to needed specialty services.
Stakeholders in the Portuguese health care system should consider these questions and issues:

- How should providers – doctors, hospitals, and primary care centers – improve their value proposition to consumers to achieve seamless continuity of care, and enhance access, service delivery, and clinical outcomes? An opening exists to fine-tune Portugal’s health care system – to introduce quality and efficiency indicators, to achieve better value for monies invested, and to develop evidence-based care and service delivery strategies.

- How can consumers be positioned at the center of the Portuguese health care delivery system? How can they be encouraged to assume self-management of their health? What educational and healthy lifestyle programs are necessary to empower and inform consumers? A partnership between consumers and physicians serving as their adviser and navigational guide could support such an initiative. In addition, the system needs to shift focus away from hospital-based care and reliance on the ER to community-based services and the development of non-traditional resources such as nurse practitioners, community clinics, and primary care centers.

- Consumers are clearly interested in technology. There is opportunity for stakeholders to take advantage of the growing amount of information available to consumers through online sources, social media, smart phones, and medical devices for monitoring health. Consumers are increasingly "wired" and information systems that educate and equip individuals to act accountably and appropriately can have great impact. This is also true for clinical information systems and integrated systems for consolidating personal health care information (which can increase the importance of implementing the government’s planned EHR). All of these measures will have to be balanced with non-technology solutions for consumers who don’t have access to technology, primarily in remote areas, where the roles of primary care providers and community centers should be improved.

- How can companies that manufacture medical devices, pharmaceuticals, and over-the-counter solutions best reach consumers? How can consumers be engaged in understanding the impact and implications of emerging regulatory requirements such as policies to track and trace pharmaceuticals? Science presents a multitude of opportunities for consumers as well as limitations and challenges in achieving the optimal solution for their needs.

- How can payers, such as health insurers that offer complementary coverage to the NHS, add value to consumers? The recent economic slowdown has and will continue to impact how consumers spend their money on health care services. Understanding consumers’ insurance needs and developing products and solutions that match those needs will become increasingly important if payers hope to increase their customer base. Payers should also evaluate how they can take advantage of consumers’ interest in technology to monitor their health.

- Finally, what levers are necessary to engage consumers more meaningfully in decisions that affect their health care, and thus, the spending associated with that care?
There are no easy answers to the challenges that face Portugal’s health care system; however, this study offers insights to guide development of possible solutions. Consumers participating in this survey have shared their thoughts and feelings; they have told us that high-quality, readily accessible, and understandable health care is incredibly important to them. We agree. This ongoing study by Deloitte is a major milestone in capturing what consumers want from their respective health care systems and provides valuable guidance to stakeholders planning the industry’s future.
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