

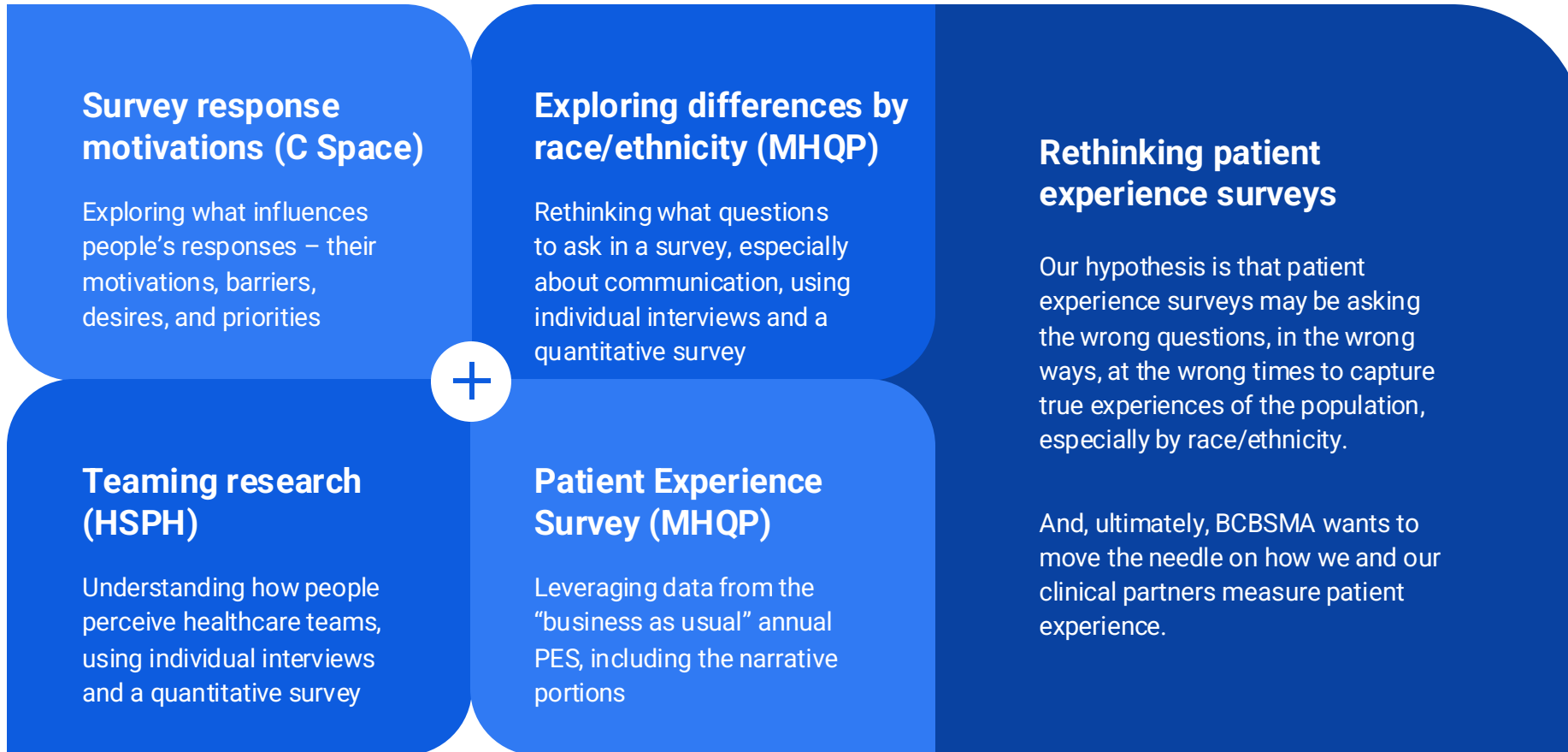


RETHINKING PATIENT EXPERIENCE SURVEYS

**Qualitative Findings from C Space Health's Online Communities
January/February 2025**

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There are four parallel work streams feeding into how BCBSMA is rethinking patient experience surveys



This report presents the findings from the C Space Health online communities conducted by Blue Cross Blue Shield of Massachusetts in January 2025. This qualitative exploration aimed to understand people's motivations, preferences, and barriers to responding to patient experience surveys.

Survey Participation

- **Motivation to respond:** People are more likely to respond to surveys if they had a very positive or very negative experience. They are motivated by the belief that their feedback will be used to recognize good service or improve poor service.
- **Barriers to response:** Long surveys, irrelevant questions, lack of clarity about how survey responses will be used, and concerns about privacy and anonymity deter people from responding. Neutral experiences are less likely to prompt a response.

Survey Preferences

- **Format:** People prefer short surveys (under 5 questions, taking less than 5 minutes) delivered via email or online platforms. They dislike phone calls, text and paper mail surveys.
- **Content:** People want surveys to include both multiple-choice questions and open-text fields to explain their responses. Questions should be relevant and specific to their experience.
- **Question focus:** People prioritize questions about the quality of care received over broader questions about the overall experience. They also value questions that allow them to express their feelings and satisfaction.

Key Takeaways

The good news is that people want to help drive quality improvement, so to boost participation:

- 1. Clarify survey purpose:** Explain the purpose of the survey upfront and highlight how patient feedback will be used.
- 2. Be transparent about anonymity and privacy:** Highlight confidentiality practice to encourage honest feedback.
- 3. Ensure questions are relevant and specific to the patient's experience:** People are more likely to respond to surveys and provide honest feedback when they feel the questions are directly related to their personal experiences. Irrelevant or overly broad questions can lead to frustration, incomplete responses, or disregard for the survey.
- 4. Keep surveys short and simple:** Limit surveys to under 5 questions and ensure they can be completed in less than 5 minutes.
- 5. Include open-text fields:** Combine multiple choice with open-text options. Allow people to provide detailed feedback in their own words to capture the nuances of their experiences and the rationale for their responses.
- 6. Optimize survey delivery:** Use email or online platforms for survey distribution, and avoid phone calls, texts and paper mail, which are less preferred.

CONTEXT AND APPROACH

Context: Patient experience surveys are inherently flawed and we know they don't capture true experiences by race/ethnicity.

- BCBSMA has been asking their patient experience questions the same way for years. We have identified that the questions are not consistently understood, result in barriers to answering the questions honestly, and don't capture the most relevant consumer sentiment about both their health plan and their health care system interactions.
- Analyses conducted by Massachusetts Health Quality Partners (MHQP) show only small (seemingly inconsequential) differences in experience by race/ethnicity on quantitative surveys. But, numerous qualitative studies show that there are larger felt differences in patient experience by race/ethnicity.
- **Our hypothesis is that patient experience surveys may be asking the wrong questions, in the wrong ways, at the wrong times to capture true experiences of the population, especially by race/ethnicity.**
- Ultimately, BCBSMA wants to move the needle on how we and our clinical partners measure patient experience and hold the health system, writ large, accountable for delivering an equitable patient experience.
- We want patient experience surveys to be:
 - Impactful – capture meaningful information about consumer sentiment that can be acted on
 - Understandable – consistently clear what the question is asking
 - Non-intrusive – makes respondents feel safe answering honestly
 - Easy to complete – generates a healthy response rate in the context of survey fatigue
 - Equitable – accounts for known biases in how subpopulations respond to existing surveys

Methods and Approach

Objective: Explore what influences people’s responses to patient experience surveys, including their motivations, barriers, desires, and priorities.

Methods: Fielded 2 online facilitated group discussions for 7-days each in BCBSMA’s Medicare and Commercial C Space Health online communities.

- Invited members to opt-in to participating in the two weeks of discussions via screening questionnaire
- Each week, we posted the discussion prompt on Monday for participants to respond, C Space moderators probed with follow-up questions through Thursday, and the discussions were closed on Sunday.
- Participants were incentivized for their responses.
- Inductive rapid thematic analysis was conducted live during the discussions and after of the transcripts to identify key themes.

	Participants n (%)
Commercial	51 (54%)
Medicare	43 (46%)
Age 18-34 years	15 (16%)
Age 35-49 years	20 (21%)
Age 50-64 years	16 (17%)
Age 65+ years	43 (46%)
Woman	46 (49%)
Man	48 (51%)
White	65 (69%)
Non-White	29 (31%)

KEY FINDINGS - WEEK 1 DISCUSSION

Week 1 Discussion Prompt: What motivates people to respond?

This week we would like to talk about surveys you may receive from healthcare providers outside of this community.

You may have received a survey following a medical appointment that asks you about the quality of your experience as a patient. These “patient experience surveys” may come to you via email, mail, phone, or text.

For each of the questions below, we’d like you to recall to the best of your ability how you felt, thought, and acted when you received one of these surveys. If you can’t recall receiving one of these surveys, please try to imagine you have just had a medical appointment and you received this type of survey.

1. When you get patient experience surveys, do you tend to answer them? Why or why not?
 - What are some reasons or situations that you do take the time to respond?
 - What are some reasons or situations that you do not take the time to respond?
2. Have you ever had a hard time answering the questions in a patient experience survey? If so, tell us about it.
 - What, if anything, keeps you from answering the questions accurately or honestly with your true feelings?
3. If it were up to you to write the survey questions, what would you ask about to understand whether a medical appointment was a positive, negative, or neutral patient experience?

People respond to surveys because they want to reward positive experiences or help improve after negative experiences.

1. **People are most likely to respond to patient experience surveys when they've had a very positive or very negative experience, and less likely when it was neutral or as expected.**
 - a. Articulated more in Commercial compared to Medicare.
2. **They're motivated by thinking that their feedback will be used to recognize positive experiences or used to help providers and practices improve after negative experiences.**
 - a. Articulated more in Medicare compared to Commercial.
 - b. They want to know how the information will be used upfront to decide if and how to respond.
 - c. Especially for negative experiences, they want follow-up to know that they were heard and that there might be actions taken as a result of their responding to the survey. However, they also want assurances around confidentiality/anonymity so these are in opposition.
3. **And, the surveys must be easy to respond to.**
 - a. Fewer than 10 questions (preferably under 5) and take no more than 5 minutes
 - b. Balance of multiple choice questions with not too many answer choices (faster/easier to respond to), and **a strong desire for open-text to explain the context/why behind a response** and provide specific examples to help the provider improve.
 - c. Preference for online/email over phone call (worst), paper mail, and text messages.
 - d. Questions and answer choices should be relevant (not too broad, or wrong visit type).
 - e. Commercial was more concerned about length/ease than Medicare, and suggested being incentivized to respond, especially for neutral experiences.

People don't respond to surveys when they're too onerous or it's unclear if and how the responses might be used.

1. **Patients are unlikely to respond to surveys when they take too much time, have to navigate through multiple web pages, need to mail it back, or have questions and answer choices that feel irrelevant or not applicable (sometimes too specific or too general).**
 - a. More true for Commercial compared to Medicare
2. **People struggle to decide if responding is worth their time because they don't know how their response might be used**
 - a. There is skepticism that their responses will be used to improve services
 - b. Concerned their responses might be used to penalize providers
 - c. Question whether negative feedback will impact the care they receive, or damage the relationship with their provider (more in Commercial)
 - d. Lack of clarity around privacy, confidentiality, and anonymity also limits responses and honesty
 - e. Some perceive surveys as potential scams, especially if received by text or ask for identity verification
3. **Because neutral experiences are not associated with action (i.e., recognition or improvement), there is a belief that it's not worth reporting about it, which causes response bias.**

People want to share their feelings and satisfaction with their experiences, not just the transactional things.

- People want to share their feelings and satisfaction with the overall experience, not just the transactional things like check-in procedures. How they feel is what's memorable.
- Questions about feelings resonate when they're specific enough. Suggested questions mainly focused on:

Interaction with the provider

Did you feel listened to by your medical provider?

Did you feel respected and listened to?

Do you feel that your medical provider spent a sufficient amount of time with you and your issue?

Did you feel comfortable during your visit?

Did you feel that your questions had been answered?

Did you feel free to call or email with any follow-up questions?

Did you leave feeling uneasy? Overwhelmed?

Visit general experience

Do you feel like you got your money's worth?

Did you feel rushed?

Was the visit a good use of your time?

Did you feel safe and comfortable throughout the process?

Were they kind?

Would you return if you had to? Would you refer a friend?

KEY FINDINGS - WEEK 2 DISCUSSION

Week 2 Discussion Prompt: Which question does the best job of capturing what's important to you as a patient?

Last week, we heard that a lot of you wanted patient experience surveys to be short and simple, with space to write in more details if you had a very positive or very negative experience.

Now, imagine that you recently had a medical appointment and afterward you received a survey asking about your experience. The results from the survey will be used to help the provider/practice improve.

Please see below for 3 possible questions that could be included in the survey:

- A. How did you feel about your overall experience? (answer choices: good / neutral / bad, with space to explain your answer)
- B. How satisfied are you with the care you received? (answer choices: fully satisfied / somewhat satisfied / not at all satisfied, with space to explain your answer)
- C. Would you recommend this provider/practice to your friend or family member? (answer choices: Yes / Maybe / No, with space to explain your answer)

For this activity, please answer the following two questions in your post:

1. Which of these questions (A, B, or C) would do the best job of capturing what's important to you as a patient, and why?
2. In your opinion, which of these questions (A, B, or C) would be most likely to capture feedback that would help a provider/practice improve, and why?

People liked the broad question asking about satisfaction with the care they received if it had a space to explain more.

1. **When forced to choose between a question asking about satisfaction with the “care” they received and a question asking how they felt about their “overall experience,” people prioritized “care” as the most important aspect of their healthcare interactions because that’s the purpose of their visit.**
 - a. People interpreted “care” to mean things occurring during the clinical encounter (e.g., interaction with doctors, nurses, or other healthcare professionals), and “overall experience” to include a broader scope, like parking, check-in staff, cleanliness, etc.
 - b. “Care” resonates because it aligns with their main reason for visiting a provider. It makes them feel that the survey is addressing their main priority—receiving quality medical care—and that their feedback would be more actionable for quality improvement.
 - c. People also liked being asked about “satisfaction” as a summary of how the visit went.
2. **While some found “overall experience” too vague and thought it included variables outside of the provider’s control, others thought it was better because it allowed room to comment on “non-care” aspects that still contribute to their experience holistically.**
 - a. Some resonated with this questioning because capturing the entire experience (from arrival to departure) provides a more holistic view of what it's like to be a patient at the practice.
3. **Asking about “willingness to recommend” was seen as the least useful because it’s subjective and many other factors can influence a rating.**
 - a. Some liked that it could collect feedback in a way that seemed constructive and actionable.
 - For others knowing if patients recommend a practice can be a strong endorsement and create confidence in choosing that provider/practice because it summarizes both satisfaction and trust.

A few anecdotal findings

- **Use of surveys for performance reviews:** While mixed, most were comfortable with (or at least understanding about) responses being used for a performance review provided that it's only one of many components. Some were concerned about retaliation against staff or negative comments being traced back to themselves as a patient.
- **Use of AI to read open text responses:** There were mixed reactions to using artificial intelligence to read free-text comments, broadly more acceptance in Commercial than in Medicare.
- **Survey frequency:** Many Commercial respondents seemed okay with getting a survey after every visit while most Medicare respondents (who see doctors much more frequently on average) thought after every visit was excessive and bothersome.