



United States | 2022

Healthcare Research

2022 Patient Consumer Survey

Convenience and choice drive patient decisions as
new digital options take hold

3 key themes for 2022



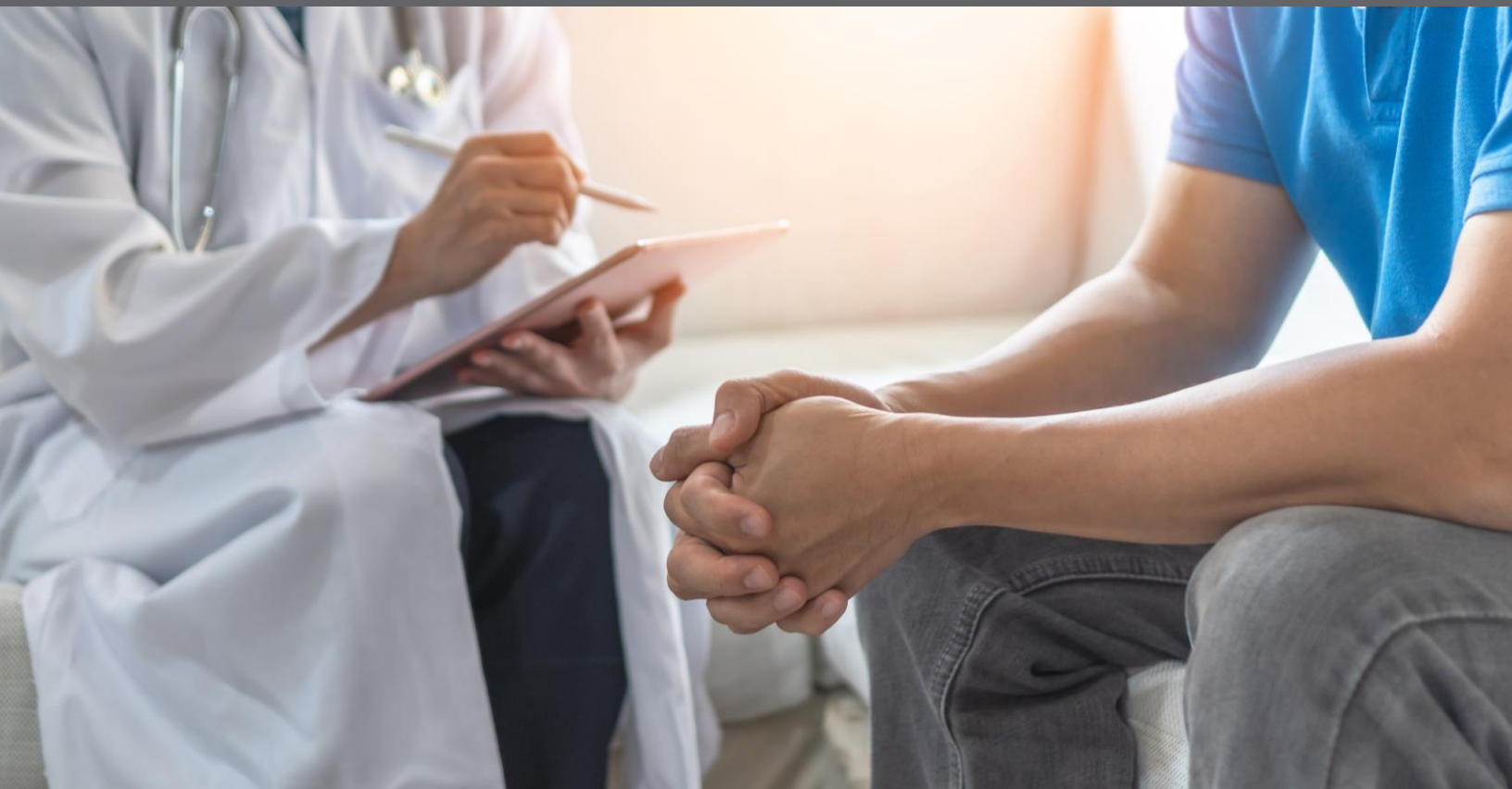
Location and convenience matter most; health systems and providers can unlock patient preferences to support site selection for scarce facility types



Telehealth/virtual care is here to stay and will open new avenues for greater patient access, driving system expansion and pressure on medical real estate supply



The quality of care and the facilities themselves can influence choice; systems can increase patient access through modernizing key facilities



More about this survey

The survey was conducted with a nationally representative group of U.S. residents from January 3, 2022, to January 12, 2022. The number of respondents totaled 4,060, of which 52% were female and 48% male.

4,060

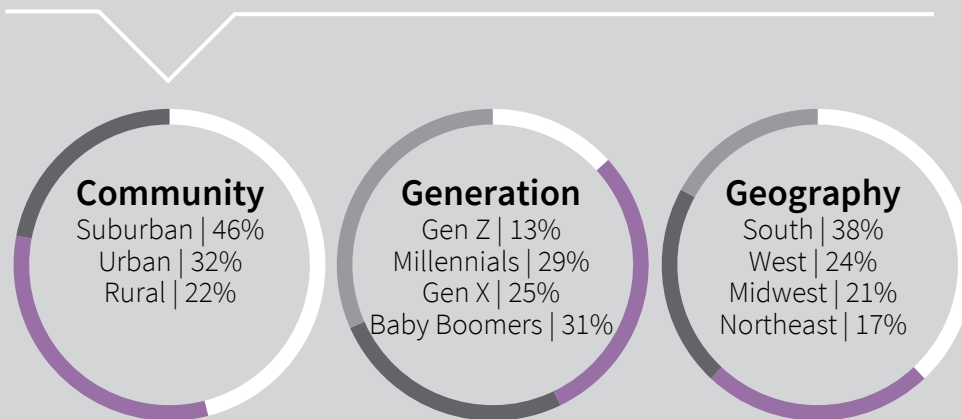
Survey respondents

52%

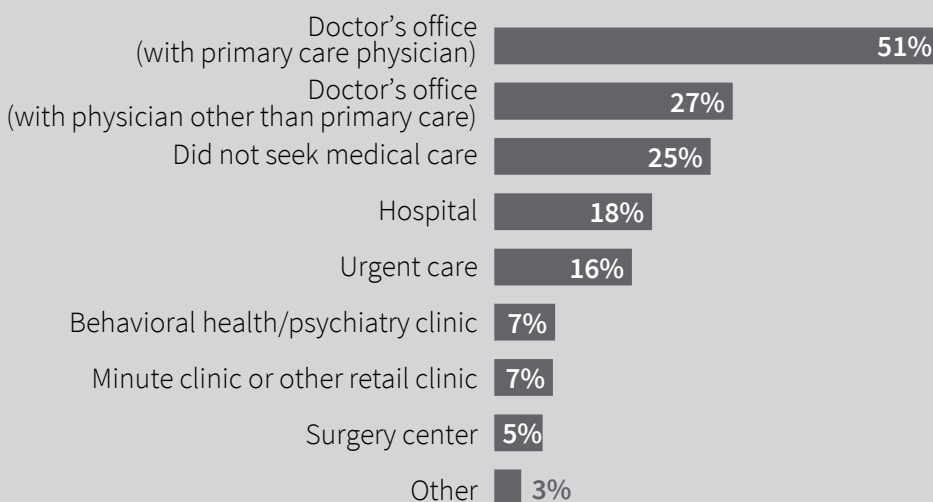
Female

48%

Male



Dispersion of type of facility visited for in-person care



Source: JLL Patient Survey via Engine Insights

Note: Respondents allowed to select as many answers as applied (Total > 100%)

Key theme #1



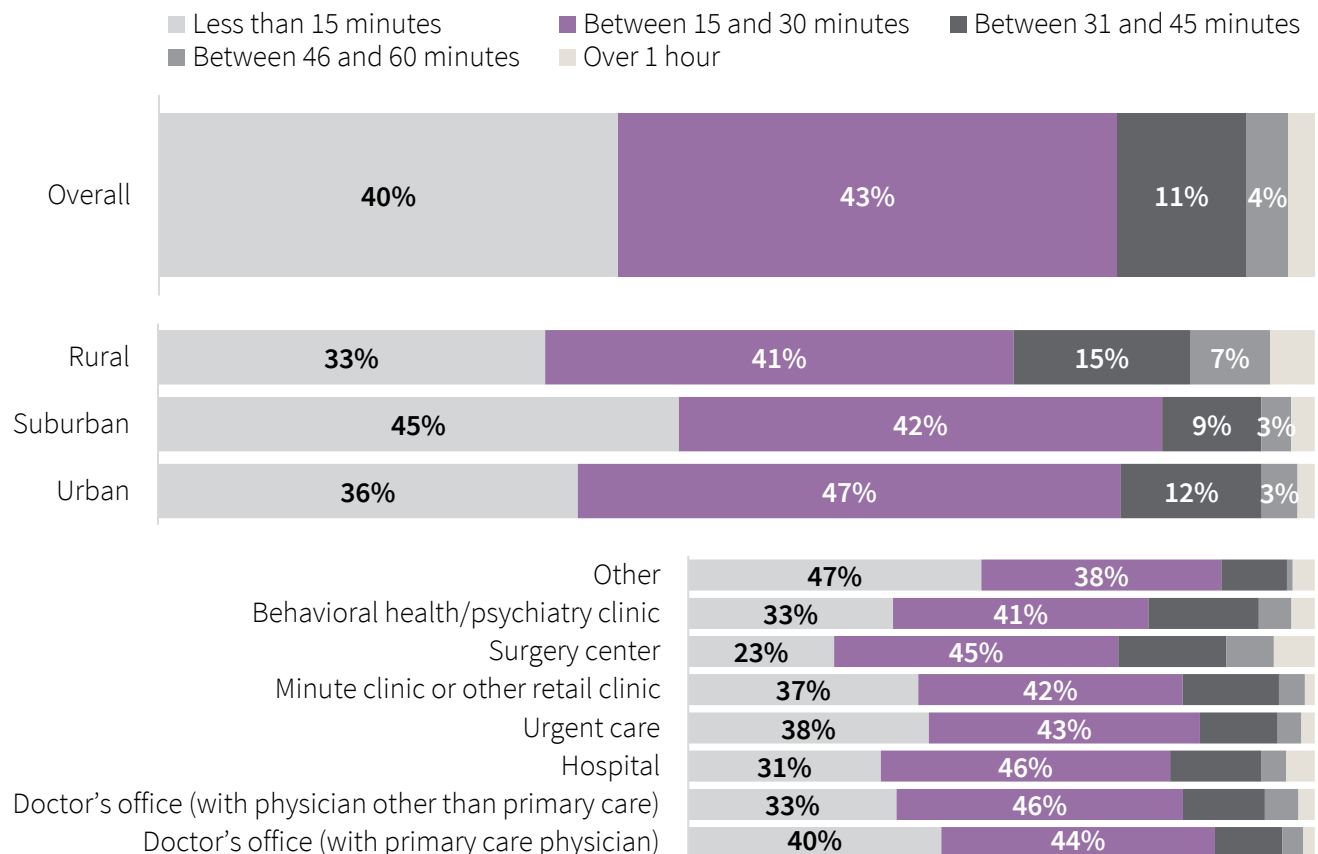
Location and convenience matter most; health systems and providers can unlock patient preferences to support site selection for scarce facility types

Overall, **83% of patients are traveling less than 30 minutes to access care**, though this is down from 89% in 2020. Those who traveled 45 minutes or more were more often seeking acute care, either in a surgery center or hospital, or seeking behavioral health services. Patients prioritize locational convenience over facility quality, which has remained true since 2020.

Q:
How long was your travel time to the healthcare facility?

40% of respondents who had an in-person doctor's appointment, had taken a visit to the hospital or had another non-dental medical service since July 1 indicated they traveled **less than 15 minutes to receive care**.

Patient travel time





A smaller share of respondents in urban and rural communities are traveling less than 15 minutes than the overall share

Only 23% of surgery center respondents indicated that they **traveled for less than 15 minutes** to access care. Furthermore, 31% of surgery center respondents traveled 31 minutes or more, while only 20% of total respondents did.

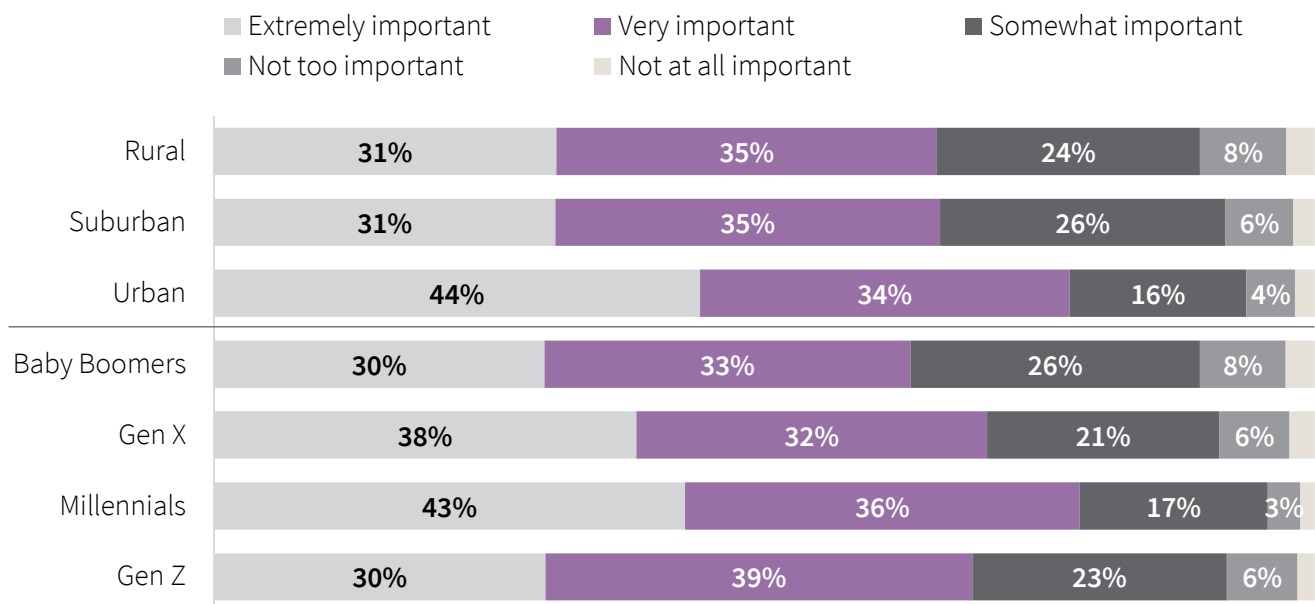
More and more complex surgeries are being performed in ambulatory surgery centers rather than hospitals, as the ASC covered procedures list expands, more consumer financial incentives are offered and innovation/technology is advancing minimally invasive techniques. It's projected that over one-third of all knee replacements will be performed in ASCs over the next decade, whereas only 6.5% are performed today (Advisory Board).

Q:
How important was location convenience in selecting a healthcare provider?

Of those who had an in-person doctor's appointment, had taken a visit to the hospital or had another non-dental medical service since July 1, **70% found location convenience either very or extremely important** when selecting a healthcare provider. Location convenience is most important to millennials and respondents in urban communities.

Unsurprisingly, minute clinic respondents cited locational convenience as **extremely important (40%)**, followed closely by hospital patients (39%), urgent cares (38%) and behavioral health/psychiatry clinics (38%).

Location convenience importance



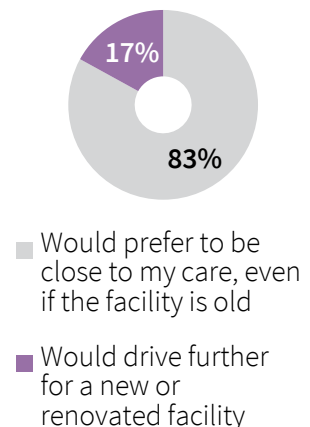
Q:
If your care was the same, would you choose to go to a healthcare provider that's closer to you or newly built?

Respondents who had an in-person doctor's appointment, had taken a visit to the hospital or had another non-dental medical service since July 1 prioritize location over quality of facility.

The overall sentiment surrounding choosing a healthcare provider that's closer or newly built did not change from the 2020 survey—83% would prefer to be closer to care, even if the facility is old; 17% would drive further for a newly built facility.

- Placing a focus on accessible locations would be beneficial for health systems/occupiers.
- The minor exception is more surgery center respondents than average said they would drive further for a new or renovated facility, at 24%.

Location vs. infrastructure



Key theme #2



Telehealth/virtual care is here to stay and will open new avenues for greater patient access, driving system expansion and pressure on medical real estate supply

Virtual visits peaked at 52% of visits in the second quarter of 2020 and since then have stabilized to around 11% (Chartis Group, May 2021), up from a pre-pandemic utilization of less than 1% in early 2020. We had no choice but to adopt virtual care options in 2020 due to restrictions on in-person interactions, driving the higher adoption rate during the height of the pandemic.

But telehealth is not replacing the physical office by any means. Our patient survey results reveal that **31% of telehealth visits resulted in a physical office visit**. While telehealth may offer convenience

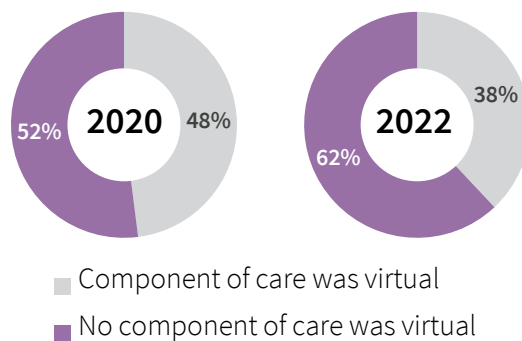
and more efficient care options, it can also be an avenue to increase patient access and drive more overall healthcare visits. Telehealth is an augment to the physical office, not a replacement.

Physical facilities are still imperative to invest in, as the expansion of patient access across all health systems will lead to competitive leasing dynamics, especially because many virtual care providers must maintain patient confidentiality and data security—and compliant virtual care settings are more likely to be in a medical office setting, not in a doctor's home office.

Q:
During your medical services, was there a component of care virtually via video or over the phone (excluding basic coordination such as scheduling)?

Components of virtual care have decreased since the height/onset of the pandemic for patients who have had in-person doctor's appointments, largely a result of restrictions lifting.

Virtual care



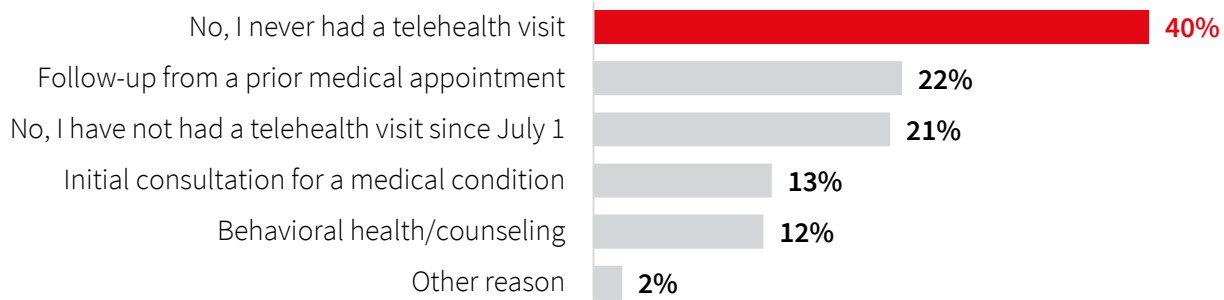
Virtual components of care were more common in the Northeast and West (41% and 43%, respectively), in comparison to the Midwest and South (32% and 36%, respectively).

Specifically, **75% of behavioral health/psychiatry clinic respondents had a virtual component** to care.

Q:
**Since July 1, 2021, have you
 had a telehealth visit for any
 of the following reasons?**

50% of respondents have had a telehealth appointment since July 1.*

Telehealth visit since July 1

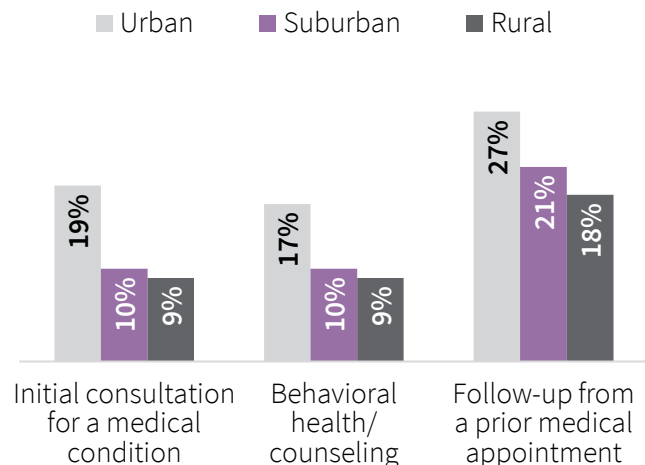
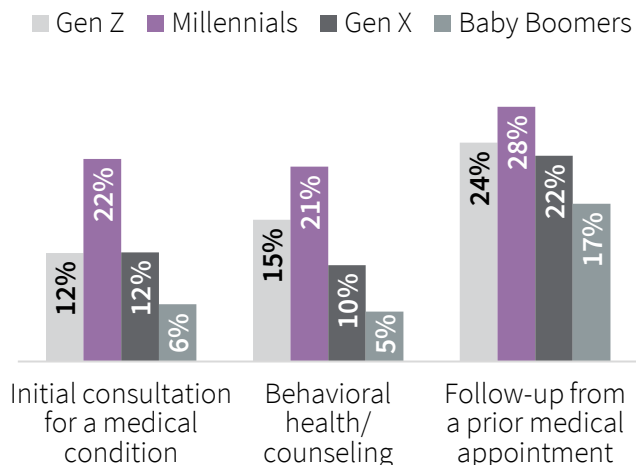


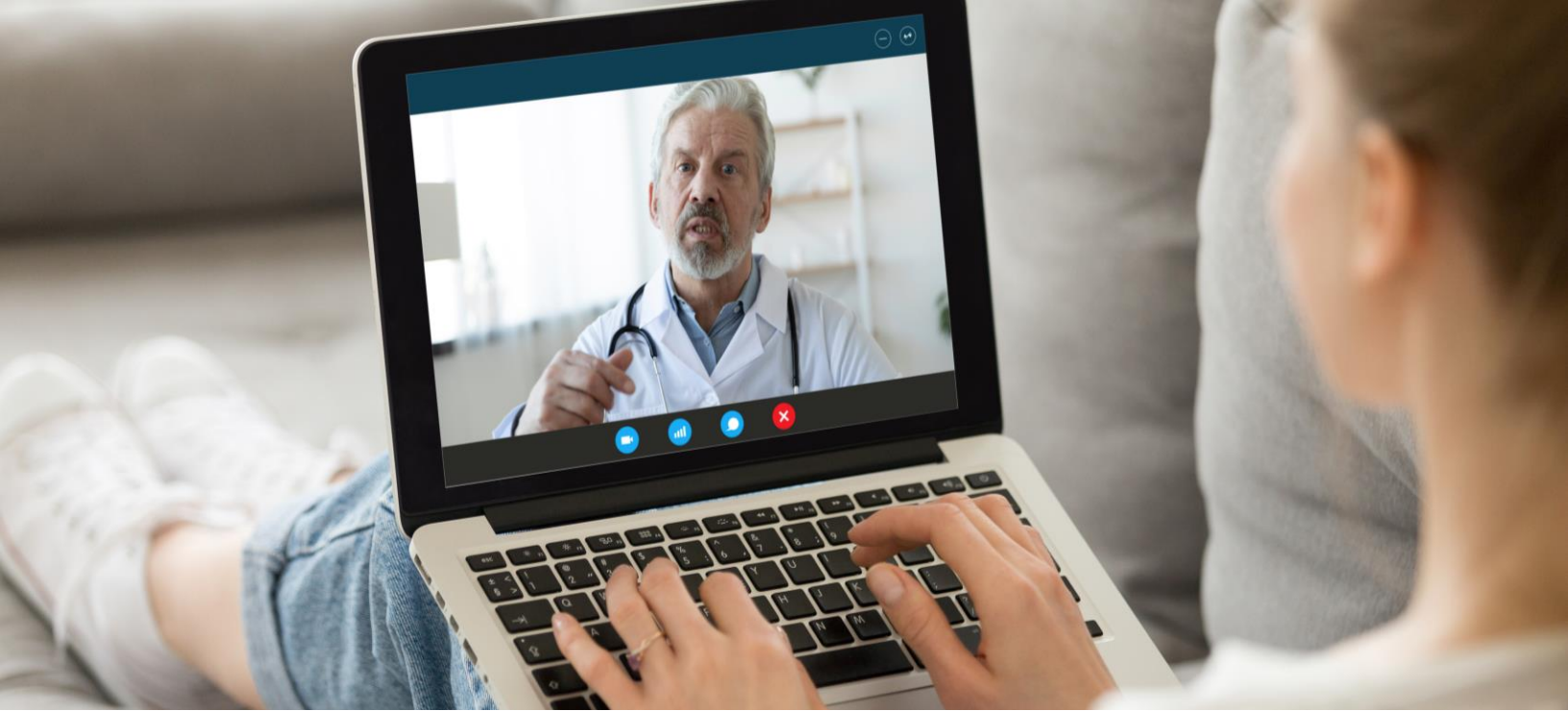
*Respondents allowed to select as many answers as applied (Total > 100%)

Millennials and urban community dwellers led the way in telehealth visits

Surprisingly, the most technical generation, Gen Z, only scheduled telehealth visits for an initial consultation at the same rate as Gen X. However, according to Advisory Board, Gen Z is more likely to rely on recommendations from friends and family when deciding where to go for care, which is where the older, less tech-savvy generation could be influencing this trend.

Preferences differ based on a patient's community, with urbanites more likely than all others to request a telehealth appointment for an initial consultation, suggesting that even in a dense urban community with more options for care available, convenience wins over. Only 36% of urbanites traveled less than 15 minutes to a healthcare facility, compared to 45% of suburbanites, which also helps support why telehealth is embraced in urban settings.

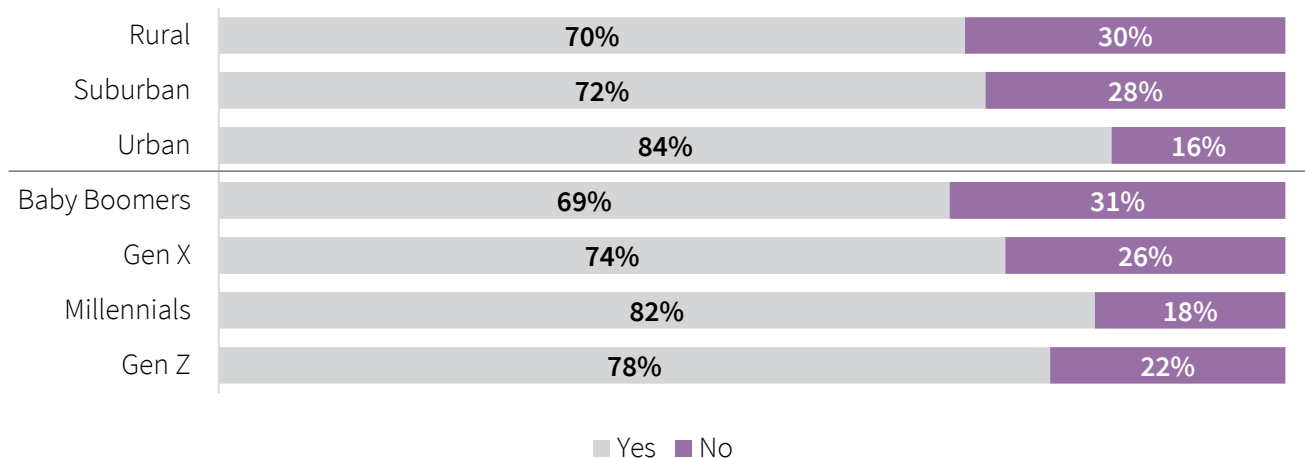




Q:
Would you prefer a telehealth visit in the future, based on your experience?

76% of all respondents who had a telehealth visit since July 1 would prefer telehealth visits in the future.

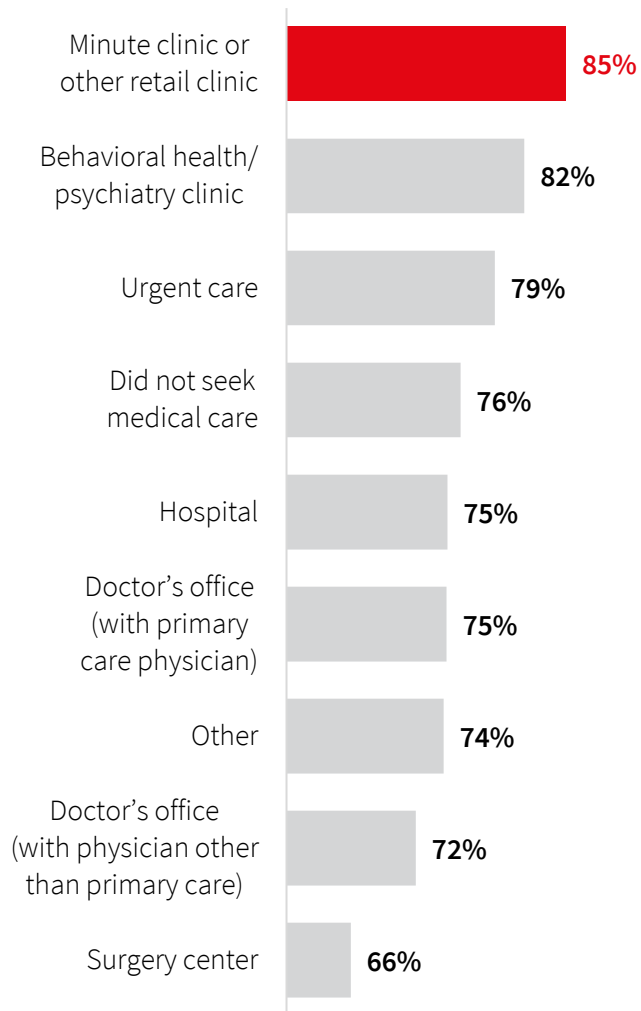
Millennials and urban dwellers specifically are the most favorable to telehealth



- **31% of requested and directed telehealth visits led to an in-person visit**, so it is important for health systems to consider patient preferences when developing a telehealth strategy.
- Minute clinic or other retail clinic respondents would prefer telehealth visits in the future the most compared to survey respondents receiving care at other sites.
- Surgery center respondents would prefer telehealth visits in the future the least, which makes sense given the acute nature of care received in those facilities.

Telehealth preference varies by sites of care

Would prefer a telehealth visit in the future, based on experience?



Virtual health has limitations to how much it can perform as a service—it's estimated that **only 20% of outpatient visits can be performed virtually** in the future (Advisory Board). Health visits in psychiatry have a much higher feasibility to be carried out virtually than care in ophthalmology or urology, for example.



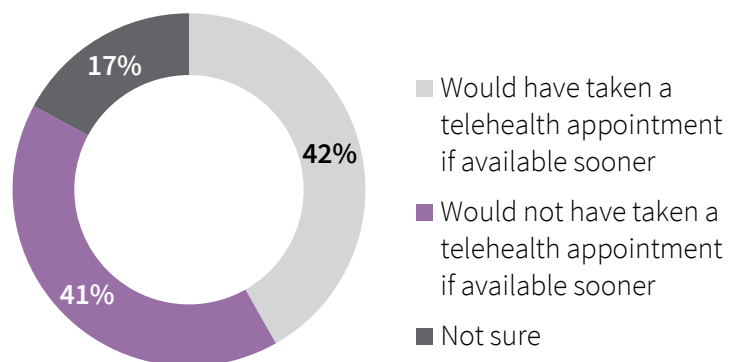


Q:

Would you have taken a telehealth appointment if available sooner?

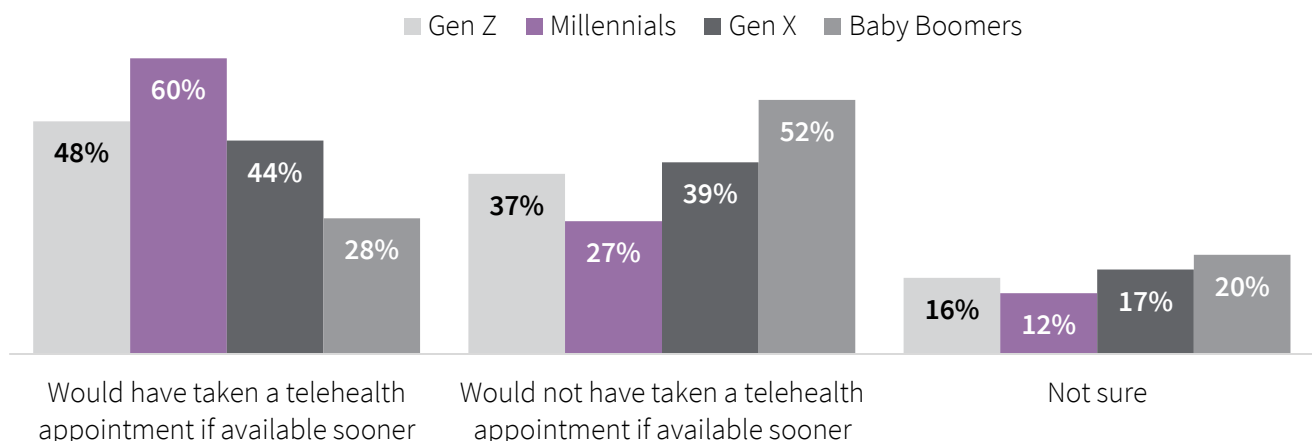
Across all demographic groups, respondents who had an in-person doctor's appointment, had taken a visit to the hospital or had another non-dental medical service since July 1 that was not scheduled the day of are split on whether they'd take a telehealth appointment if available sooner.

Telehealth visit and availability



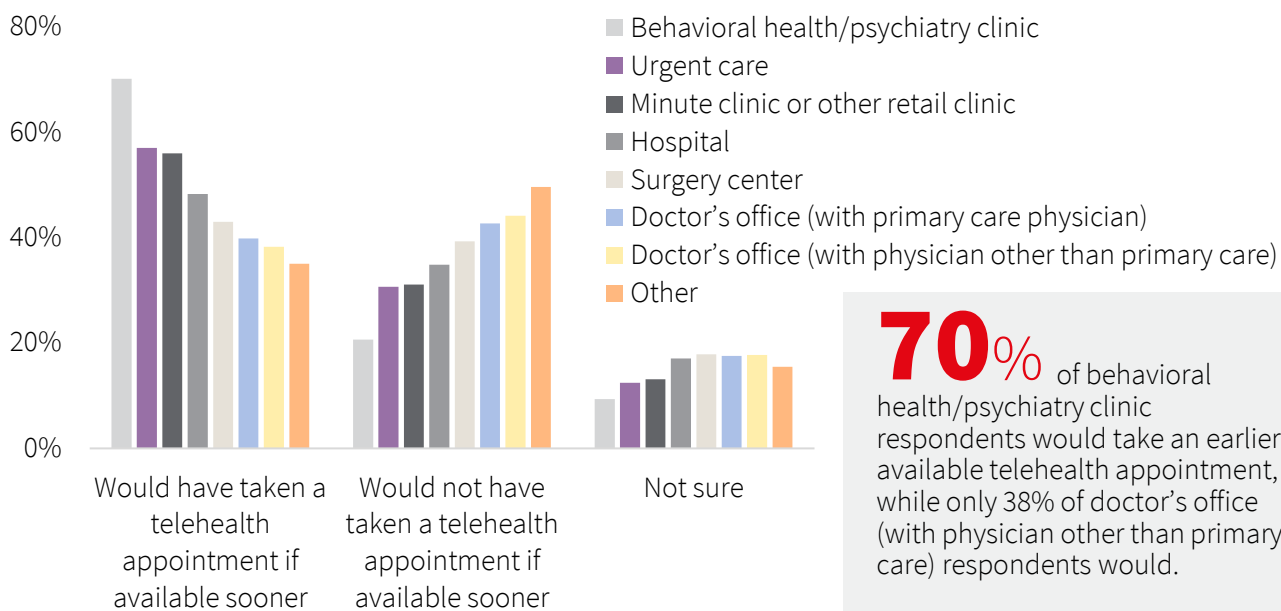
Generational preferences differ

Even if an appointment is available sooner via telehealth, baby boomers are much less likely to schedule a telehealth appointment than other generations, especially when compared to millennials, who were the most likely. Millennials prefer convenience and efficiency, while baby boomers prefer more personalized care and perhaps have strong ties to their medical providers given increased need for care among this age group.





Telehealth is more logical in certain care, and patients recognize that



Psychiatry has the highest feasible virtual shift potential (Advisory Board). In early 2020, less than 3% of psychiatric visits were conducted virtually. When the pandemic hit, that number shot to 61% by the first week of April and has hovered in the low- to mid-60% range. All specialties across the board saw a similar drastic spike in telehealth visits in the early days of the pandemic but, unlike psychiatric visits, have since simmered to be only about 10% higher than pre-pandemic levels (Chartis Group).

Key theme #3



The quality of care and the facilities themselves can influence choice; systems can increase patient access through modernizing key facilities

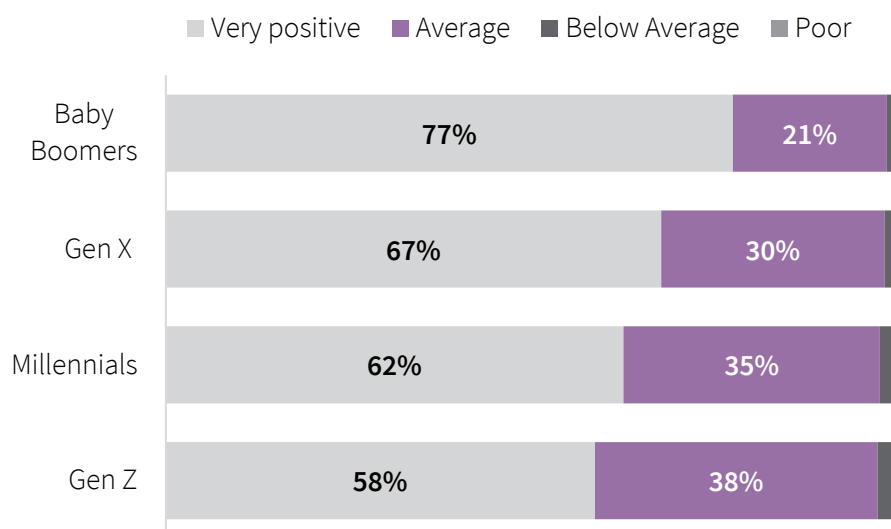
Generation gaps and community differences are evident when assessing opinions on quality, preferences and habits surrounding healthcare. However, the overall impression is that healthcare facilities are lacking in creating an inviting and modern environment.

While location and convenience remain of paramount importance to the patient, health systems can strategically leverage patient preferences to their benefit, especially within varying target communities and age groups.

Q:
Thinking of your most recent healthcare visit, how would you rate the quality of your experience?

Baby boomers who had an in-person doctor's appointment, had taken a visit to the hospital or had another non-dental medical service since July 1 find their recent healthcare visit experiences more positive than other generations.

Quality of visit by demographic

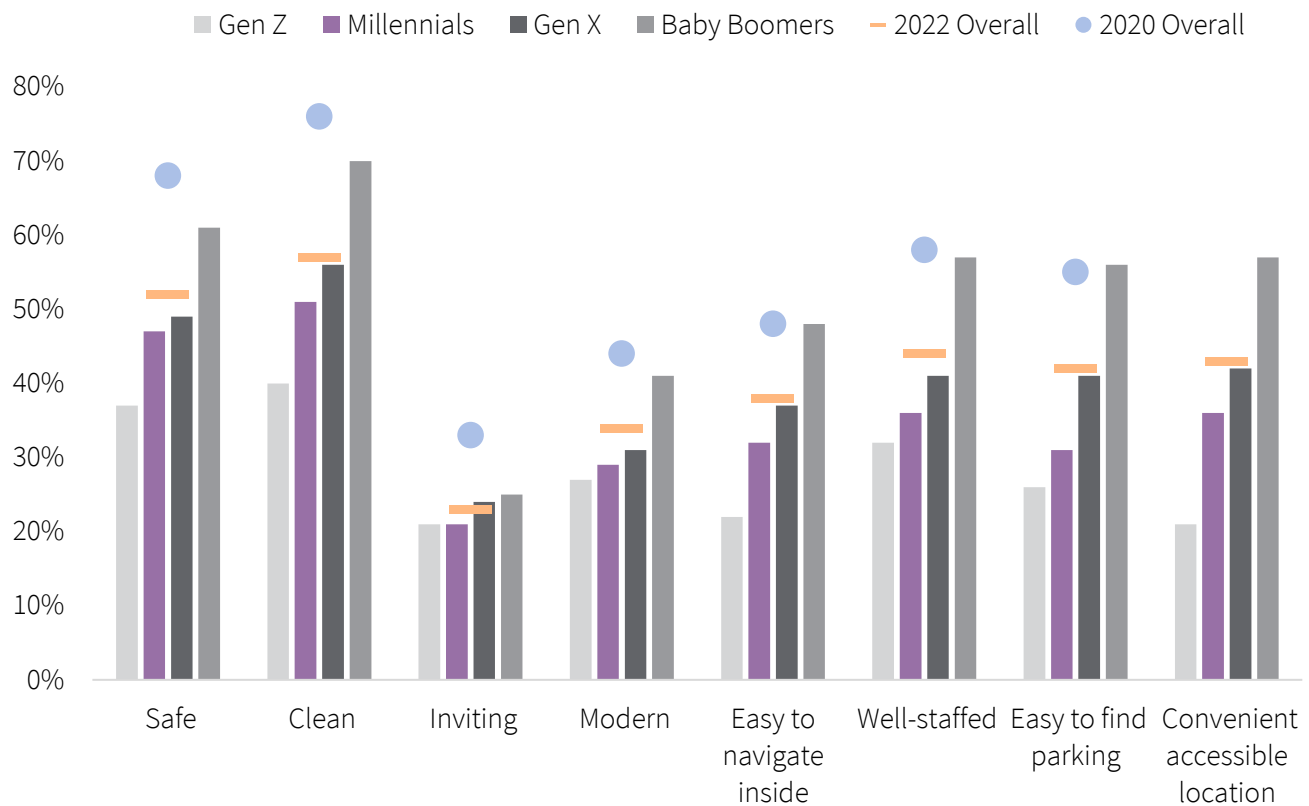


A majority of Gen Z respondents find their experiences very positive but, compared to the other generations, have the most average to below average experiences.

Q:
**What did you feel
about the
environment of
the facilities?**

Baby boomers are the most impressed with the environment of facilities, suggesting they are also the least critical, whereas younger cohorts, especially Gen Z, value higher-end experiences. According to Advisory Board, 78% of Gen Z is willing to pay a \$200 annual fee solely for premium clinic services. Providers have an opportunity to build for the next generation of patients by upgrading facilities to be more inviting and modern.

Facility environment expectations differ among generations



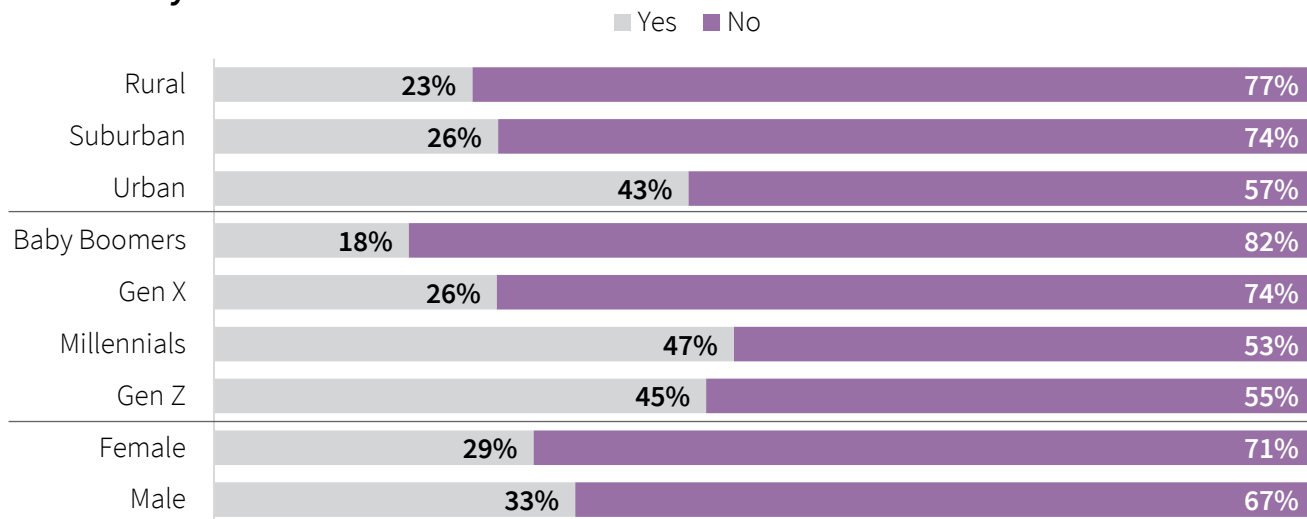
Since the height of the pandemic, the importance of safety, cleanliness and well-staffed facilities has dropped the most drastically. Safety is down 16 percentage points, cleanliness is down 19 points and the importance of well-staffed facilities fell 14 points, which is all largely a result of the pandemic-related staffing shortages across the healthcare industry.



Q:
Did you check reviews of the hospital or healthcare facility before you visited?

A majority of respondents who had an in-person doctor's appointment, had taken a visit to the hospital or had another non-dental medical service since July 1 **did not check reviews of hospitals or healthcare facilities before their visit.**

However, men, Gen Z/millennials and urban community respondents are more likely to check reviews



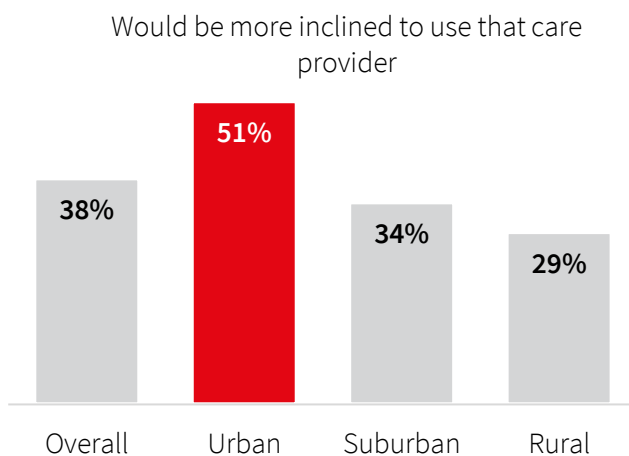
Behavioral health/psychiatry clinic respondents are almost **20%** more likely to check reviews than doctor's office respondents, indicating that more personalized care warrants more research into the providers themselves.

Q:

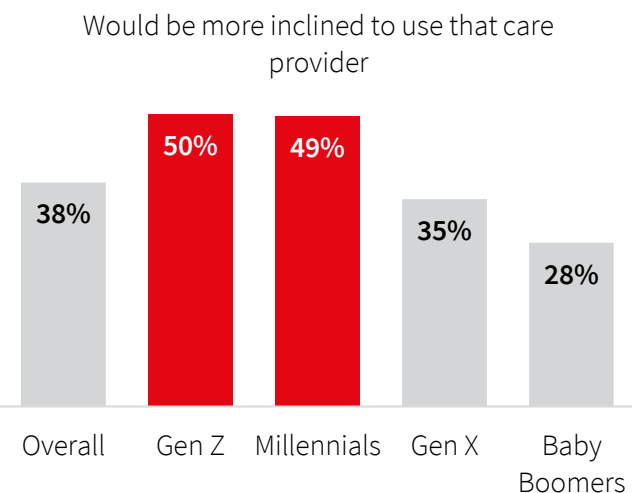
If a healthcare or hospital facility was certified as green and environmentally friendly, would that make an impact on your decision to use that care provider?

Certifying a healthcare or hospital facility as green and environmentally friendly **does not make a big impact on a majority of respondents.**

However, **51%** of urban respondents would be more inclined to use that care provider, while only **34%** and **29%** of suburban and rural respondents would be, respectively.



Similarly, **50%** of Gen Z and **49%** of millennials would be more inclined as well.



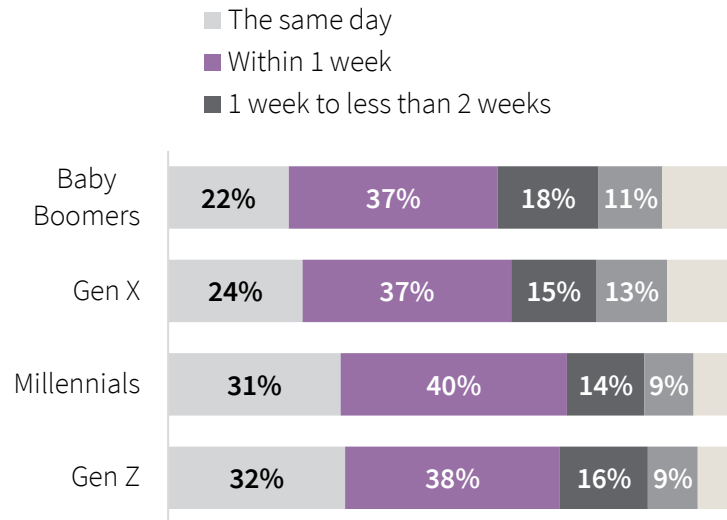
- Investments in green and environmentally friendly certifications carry more weight in urban locations where “younger” generations are the target.
- Sustainability trends are here to stay, and systems should think about building toward the future when considering expansions.
- Minute clinic or other retail clinic respondents and behavioral health/psychiatry clinic respondents would be the most inclined to use a green and environmentally friendly certified care provider (57%), while only 38% of surgery center respondents would be more inclined, indicating that the urgency or accessibility of care is a higher priority for patients than the facility itself.



Q:
Thinking of your most recent in-person healthcare visit, how long did you have to wait to get an appointment?

According to Advisory Board, baby boomers are the most tolerant of wait times for lower-acuity conditions, whereas Gen Z, who are used to everything being at their fingertips, are the least tolerant, so much so that the majority would rather leave their normal clinic for another if an appointment was available within three days.

Younger generations are waiting less time for in-person appointments



Conclusion

Patients continue to demonstrate that they are heavily concerned with location and convenience when selecting their healthcare visits. However, outside of location, systems can further attract target patient groups by implementing select upgrades and enhancements to facilities based on demographic preferences.

With its limitations, telehealth will

never fully replace in-person healthcare. However, because of its rapid adoption from the early days of the pandemic, it is a convenience that patients have grown to expect and even prefer in most cases.

Many telehealth platforms were put together hastily amid the nationwide lockdowns in 2020 and suffer from technical challenges and glitches.

Telehealth is here to stay as a facet of the healthcare industry and, in turn, will result in more in-person care. Because of this, systems need to embrace telehealth and invest in strengthening their platforms' performance and capabilities.



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