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decision behavior experts

Impact of digital healthcare on the patient experience

Research exploring patients' views on telehealth during COVID-19 and implications for future pharma digital strategies

October 2020

Contents

__Contact us__ for deep dive insights on indication areas and countries

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Impact of telehealth on patient experience and pharma strategies

The digital transformation in the healthcare industry was already underway pre-COVID-19, yet many pharmaceutical companies were struggling with the transition even before the pandemic.

Coronavirus triggered a massive change in behavior across the entire healthcare spectrum - putting **digital developments in a pressure cooker**.

Telehealth, during the first lockdown in particular, served as an **accelerator** to rethink and prioritize digital strategies without delay.

The most successful pharma marketing strategies today will be built on **knowing the effects of telehealth on patient care** including:

- What are **patients' needs and expectations** in a telehealth setting?
- Where can pharma **step in, to better support** as distant care becomes much more common in patient care?
- How can pharma **make a difference** for patients, HCPs, and other key stakeholders beyond 'just good products'?

Here we share our findings and implications for pharmaceutical companies.

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About the study

Sample

4 Indication areas:
Oncology, chronical cardiac disease, chronic lung disease, and diabetes

United States, France, Germany, Italy, Spain, United Kingdom and The Netherlands

n= 1541

Fielded: June 2020

See appendix for detailed information on research set up and sample

Exploring the patients' digital experience:

o How big was the shift from traditional to distant care?

o How do patients assess the quality of their care?

o How willing are patients to continue using distant care?

o What channels did patients use and which do they prefer?

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Most patients had a <u>positive</u> experience of the transition to telehealth

79%

Patients report a **positive experience** using (more) telehealth during COVID-19 lockdowns

Key drivers of telehealth satisfaction for patients

76%

Feel distant care is **less time intensive**

60%

Think they can **more quickly reach their physician** through telehealth

39%

See a positive impact on their **budget** as a result of telehealth

A5: How did you experience the transition to receiving care at a distance rather than face-to-face?

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However, <u>half</u> of patients are unwilling to continue using telehealth extensively

Patients pinpoint concerns with continuing distant care

75%

Feel telehealth is **less personal**

53%

Doubt their **HCP's ability** to determine their physical health through telehealth

31%

Feel their **mental health** needs gets more attention in face-to-face consultations

37%

Feel they have **more say** in their treatment in **face-to-face consultations**

38%

Have **privacy concerns** about telehealth

54%

Patients would **NOT continue** using telehealth as extensively, if given the option in the future

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Questions to consider

How does telehealth affect the patient's voice and consultation outcomes?

For HCP decision making it is key that patients share the broad spectrum of their disease-related needs. Both patient's physical *and* emotional needs impact treatment choice and consultation outcomes.

Currently, it seems that telehealth negatively impacts the interaction during the consultation, and patients don't seem to feel empowered to share their emotional needs.

Ask yourself:
- **What do my patients need in order to confidently share their disease and treatment needs with their HCPs to ensure quality outcome of HCP – Patient interaction?**

- **For what type of interactions is telehealth just simply not a good fit?**

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What information do I need to provide patients, so they feel in control of their disease?

During the first lockdown period, patients spent more time searching for health information online, versus before the global pandemic.

This behavioral shift creates an opportunity to educate patients through online sources, thereby helping them have a greater say in the treatment they receive.

Empowering patients to play an increased role in the decision-making process has become more urgent. *Why?*

The right treatment decision is more than ever based on a patient's ability to communicate their physical and mental health in a challenging non-face-to-face context.

Ask yourself:
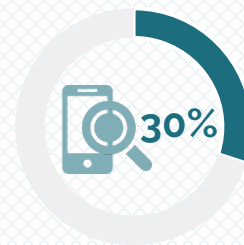- **What information do my patients need right now to feel at ease about their disease management**
- **Where do they wish to find this?**

Patients spent more time & effort to stay informed about their health

50%

30%

Search for information more often on their health condition

Used **more online sources** for information on their physical health

Questions to consider

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Questions to consider

How can you support healthcare providers striving to give the best possible virtual care?

Currently, half of all patients feel their HCP is unable to adequately assess their physical health through telehealth. Thus, HCPs need to be enabled to recognize and act upon patients' needs in a virtual consultation: they need to know what is required to set up a fulfilling digital consultation.

Ensuring that HCPs are well-equipped to provide a quality consultation, both in terms of content and in terms of format, is a key step in making virtual consultations a success.

Ask yourself:
- **What kind of trainings, tools & information do my target HCPs need to feel empowered to provide quality care to patients?**

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Questions?

__Contact us__ to deep dive into our insights, learn more about country and indication difference & discuss what this means for your patient population and future digital strategy!

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Senior Manager
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VP, Client Solutions
US

For more inspiration + more tips digital in pharma

Visit our __Decision Behavior Disruption__ knowledge center for more content in this series, including __Accelerating digital pharma marketing strategies now__

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Appendix

Contact us for deep dive insights on indication areas and countries

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Methodology & sample

Survey flow
Included topics

Screening

Establishing patient type
Establishing shift to Telehealth

Impact of COVID-19 on consultation

Size of shift to Telehealth
Used & preferred methods of Telehealth communication

Telehealth experience

Overall experience transition to Telehealth
Perceptions of quality of care in Telehealth vs traditional care*
Advantages & disadvantages of Telehealth vs traditional care

Information seeking & future expectations

Changes in information seeking behaviour
Expectations around Telehealth in the future

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Quality of care questions were based on WHO Quality of Care definitions
Source: https://www.who.int/maternal_child_adolescent/topics/quality-of-care/definition/en/

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Sample Overview

TOTAL SAMPLE: N=1541

N = **280**
Chronic lung condition: **60**
Chronic heart condition: **60**
Diabetes: **60**
Cancer: **100**

N = **154**
Chronic lung condition: **55**
Chronic heart condition: **28**
Diabetes: **60**
Cancer: **11**

N = **189**
Chronic lung condition: **59**
Chronic heart condition: **36**
Diabetes: **60**
Cancer: **34**

N = **192**
Chronic lung condition: **60**
Chronic heart condition: **37**
Diabetes: **59**
Cancer: **34**

N = **279**
Chronic lung condition: **59**
Chronic heart condition: **60**
Diabetes: **60**
Cancer: **100**

N = **205**
Chronic lung condition: **55**
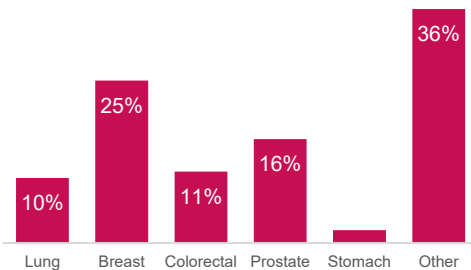Chronic heart condition: **56**
Diabetes: **60**
Cancer: **34**

N = **242**
Chronic lung condition: **60**
Chronic heart condition: **37**
Diabetes: **59**
Cancer: **36**

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S1: Do you have any (or several) of the following health conditions?

Sample Overview

TOTAL SAMPLE: N=1541

Cancer

Lung	Breast	Colorectal	Prostate	Stomach	Other
10%	25%	11%	16%		36%

Chronic Lung Condition

COPD	Asthma	Other
44%	74%	7%

Diabetes

Type 1	Type 2
58%	42%

(Pie chart: 26%, 22%, 27%, 24%)

Chronic Heart Condition

Congenital heart disease	Heart Failure	Arrhythmia	Other
30%	40%	39%	13%

S1.1: You indicated you had a type of chronic lung disease, can you please specify which one(s)?
S1.2: You indicated you had a type of chronic heart disease, can you please specify which one(s)?
S1.3: You indicated you had a type of diabetes, can you please specify which one?
S1.4: You indicated you had a type of cancer, can you please specify which one?

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How common was Telehealth during COVID-19?

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14% of all screened patients experienced more Telehealth since COVID-19

For 19% of patients care was postponed, while for 60% nothing changed in how they received their care

% of patients with a health condition at higher risk of COVID-19

- 14%
- 86%
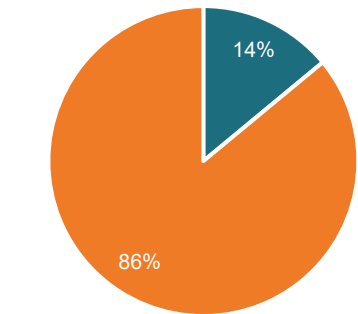
■ Experienced more Telehealth

■ Did not experience more Telehealth

N= 8717*

Impact of COVID-19 on patients' healthcare for those who did not experience more Telehealth

Nothing changed — 60%

Postponed care — 19%

Frequency of interaction with HCP changed — 21%

N= 7176*

S2.- Has COVID-19/Corona changed your health care?

*Sample sizes relate to participants who screened out

SKIM
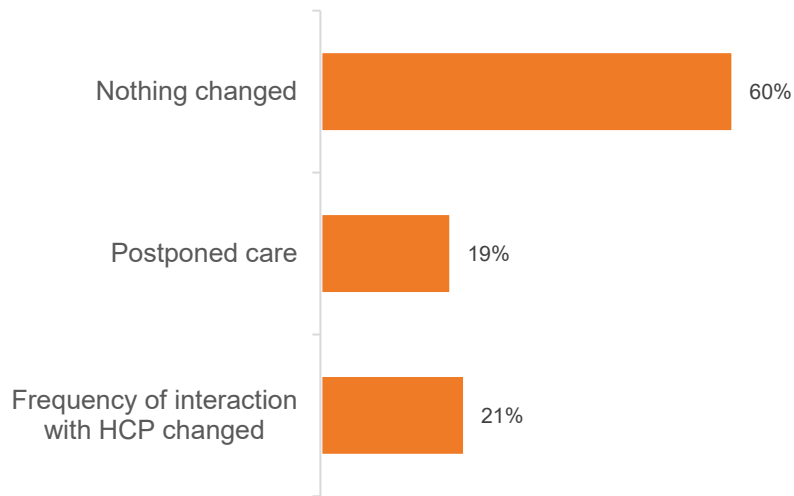
For the 60% of patients whose care didn't change, this was because their health status did not require them to interact with the HCP during this time.

Reasons why patients did not experience a change in their healthcare during COVID-19

- 46% — Nothing - I didn't need to interact with my physician since Corona/COVID19
- 29% — The frequency with which I interact with my physician is very low
- 14% — My healthcare could not have been postponed
- 7% — I was receiving care at a distance before Corona/COVID-19 started
- 4% — Don't know

N= 4822*
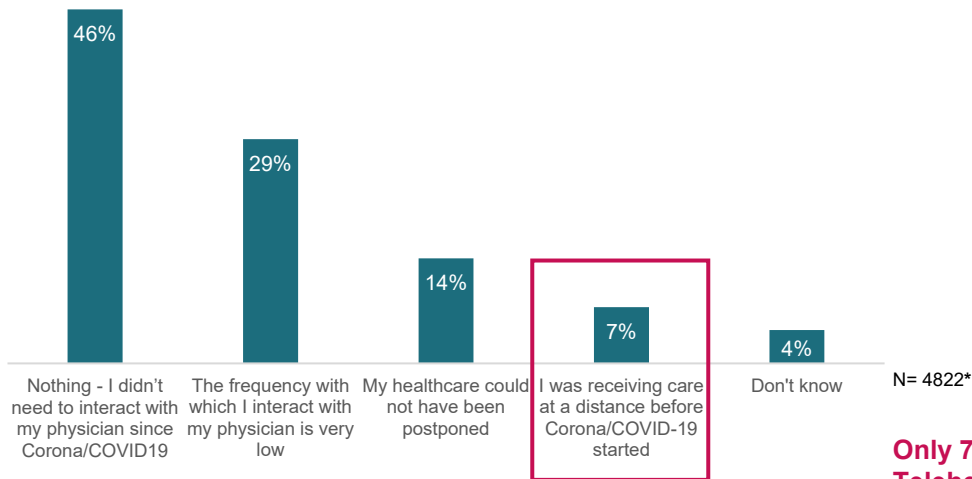
Only 7% of patients were Telehealth before COVID-19 started

Cancer patients **saw different changes** than patients with other health conditions:

35% of cancer patients didn't need to interact with their physician.

24% of cancer patients didn't experience a change because their health care could not be postponed

N= 1225*

18

*Sample sizes relate to participants who screened out

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Experience with
care at a distance

For those patients whose type of interaction changed during COVID-19, the shift was quite large
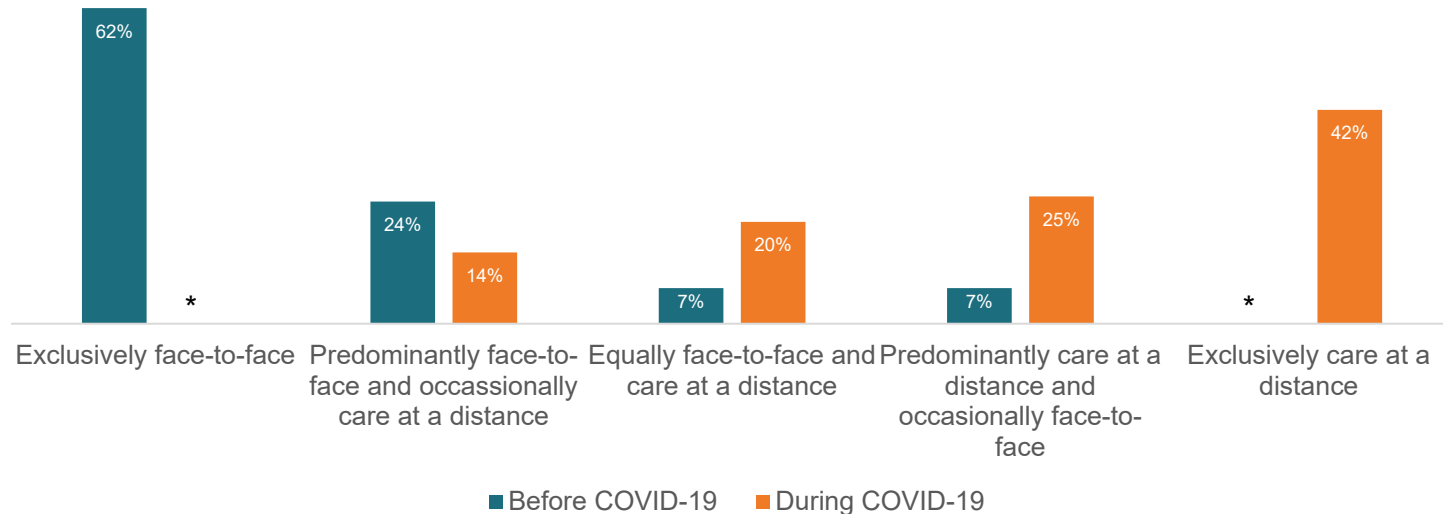
Over 60% received solely face-to-face care before COVID-19, while during COVID-19, 40% received Telehealth exclusively

Chart with categories:
- Exclusively face-to-face: Before COVID-19 62%, During COVID-19 *
- Predominantly face-to-face and occasionally care at a distance: Before COVID-19 24%, During COVID-19 14%
- Equally face-to-face and care at a distance: Before COVID-19 7%, During COVID-19 20%
- Predominantly care at a distance and occasionally face-to-face: Before COVID-19 7%, During COVID-19 25%
- Exclusively care at a distance: Before COVID-19 *, During COVID-19 42%

■ Before COVID-19   ■ During COVID-19

On average, patients saw their care shift towards distant care by 2.3 points on a 4-point scale

N= 1541

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A1: How did you interact with your physician before Corona/COVID-19?
A2: How are you interacting with your physician during Corona/COVID-19?

*Patients who had exclusively care at a distance before COVID-19 and those who continued to have exclusively face-to-face care during COVID-19 were screened out

An overwhelming majority of patients had a positive experience of the transition to Telehealth

Especially Italy & Spain are content with Telehealth, overall experience in Netherlands is least positive

| 2% | 4% | 7% | 9% | 24% | 32% | 23% |

Negative experience | **Neutral experience** | **Positive experience**

79%
of patients reported having a **positive experience** of the transition to care at a distance

50%   60%   70%   80%   90%   100%

% with positive overall experience of transition

N= 1541

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A5: How did you experience the transition to receiving care at a distance rather than face-to-face?
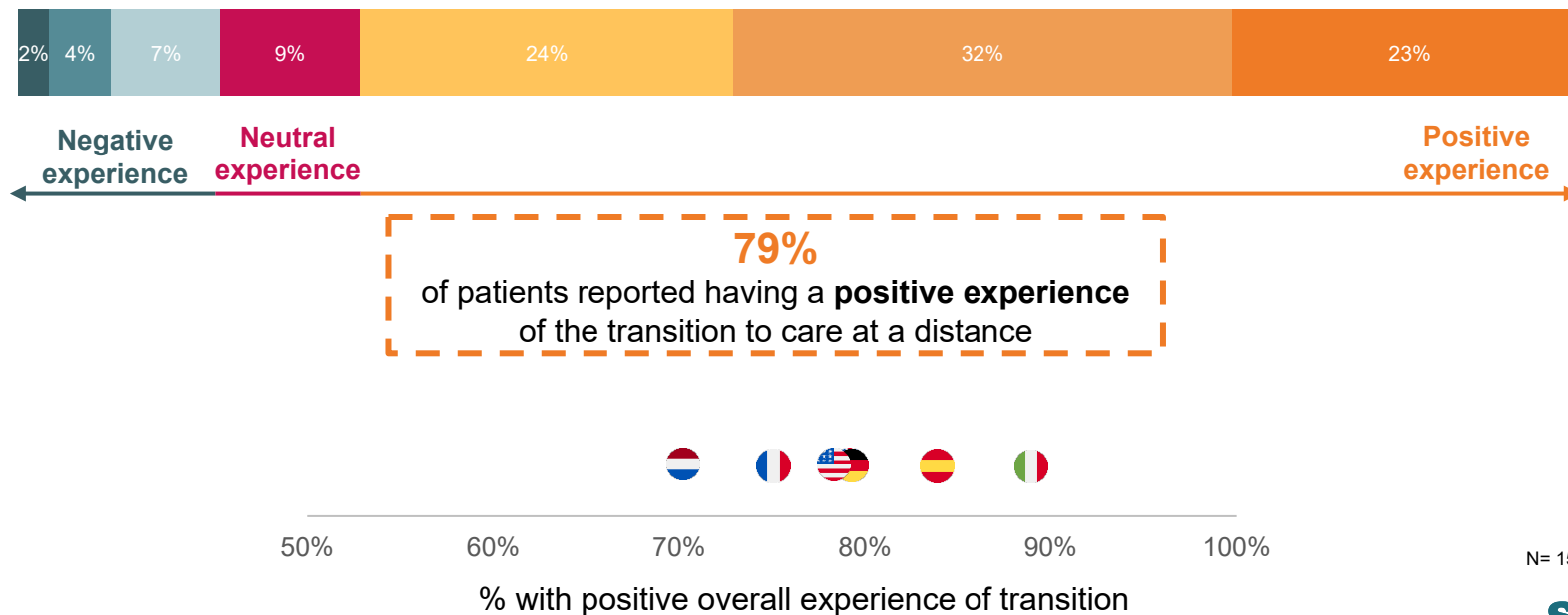
Contributing to this positive experience is the time saved through Telehealth and accessibility of their healthcare provider
To the minority who sees a noticeable impact on their budget, this often outweighs the benefits of face-to-face care

76% Think face-to-face appointments take **more time than care at a distance** because of travel and waiting times.

Out of which 68% say spending less time travelling and waiting for their appointment is important for them.

60% Can **reach their physician more quickly** through care at a distance than face-to-face care.

Out of which 85% appreciate that they can reach their physician more quickly than before.

39% Thinks the money they save when receiving care at a distance has a **noticeable impact on their budget**.

Out of which 72% believe the money they save receiving care at a distance **outweighs the benefits of face-to-face care**.

N= 1541

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A7: The following statements are about care at a distance and face-to-face interactions. To what extent do you agree or disagree with the following statements?
A7.1: The following statements are about how much you value benefits and disadvantages of care at a distance. To what extent do you agree or disagree with the following statements?

Moreover, patients feel confident that their physical health is being treated equally well as it would have been face-to-face
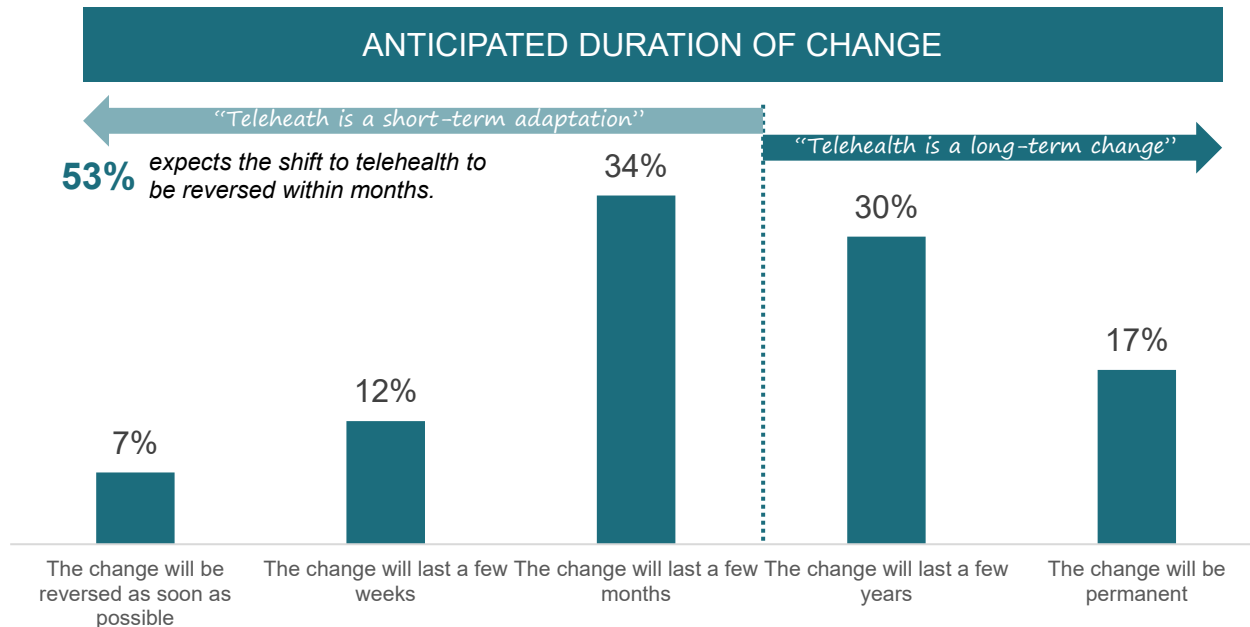

72% — **Don't think their physician would choose a different treatment** if their care was face-to-face.

61% — Think care at a distance **prevents their physical health from getting worse**.

Patients surely understand the necessity of receiving more distant care in times of a pandemic.

N= 1541

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However, the positive evaluation of Telehealth must be considered in the context of patients not expecting this to be a lasting change
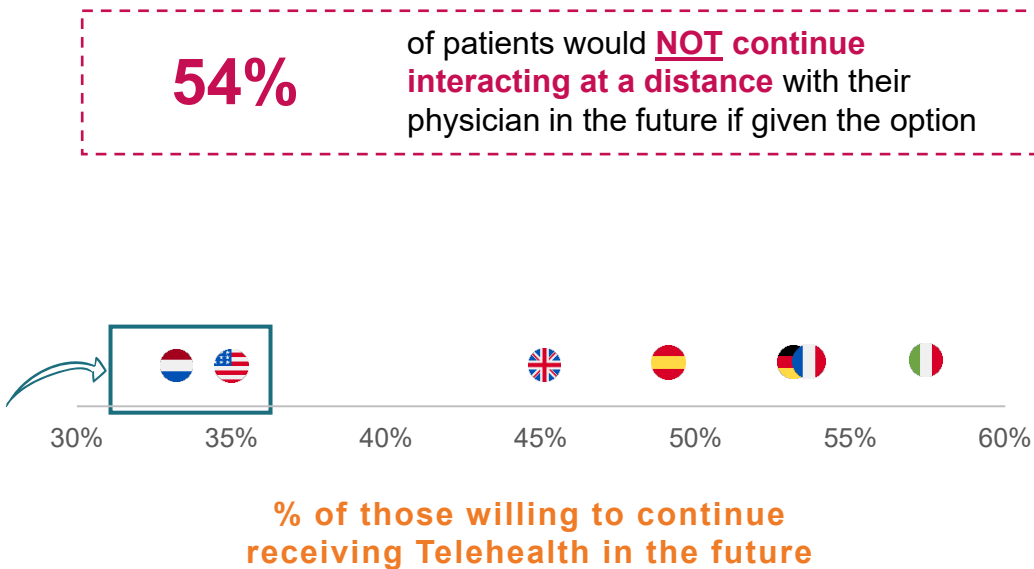Only 17% of patients expect Telehealth to stay: over 50% expects to revert soon

ANTICIPATED DURATION OF CHANGE

"Teleheath is a short-term adaptation"

"Telehealth is a long-term change"

53% expects the shift to telehealth to be reversed within months.

7%
The change will be reversed as soon as possible

12%
The change will last a few weeks

34%
The change will last a few months

30%
The change will last a few years

17%
The change will be permanent

N= 1541

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A9: To what extent do you believe that care at distance will be a lasting change?

This is underlined by the fact that if they had the choice, most patients **would not continue with Telehealth** in the future
Especially Dutch & American patients are unwilling to continue using Telehealth

54% of patients would **NOT continue interacting at a distance** with their physician in the future if given the option

30%   35%   40%   45%   50%   55%   60%

% of those willing to continue receiving Telehealth in the future

N= 1541

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A key pain point for patients is the feeling that Telehealth does not allow their physician to address their mental health adequately

HCPs addressing patients' **mental health needs** in care at a distance just as well as through face to face interactions is the **most important** driver in their overall experience of the transition

32% Feel care at a distance <u>does not</u> allow their physician to **address their mental health needs** just as well as through face to face interactions.

36% Believe they <u>don't</u> **have a bigger say in their treatment** when receiving care at a distance

N= 1541

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A6: To what extent do you agree or disagree with the following statements?

Moreover, 75% of patients feel Telehealth is less personal and 53% feels their physical health cannot be determined virtually

Additionally, for a quarter of patients, privacy concerns lead to a preference for face-to-face care over Telehealth

Telehealth...

... is less personal

75% Feel face-to-face interactions with their physician are **more personal**.

Out of which 85% enjoy face-to-face interactions with their HCP more because they are more personal.

... has inferior examinations

53% Believe their **physician cannot determine their physical health** without seeing them face-to-face.

... is less privacy friendly

38% Have **privacy concerns** regarding care at a distance.

Out of which 69% would **prefer not to receive** care at a distance in order to **protect their privacy**.

N= 1541

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Patients show more information seeking behavior, a potential indicator of dissatisfaction with information and care received
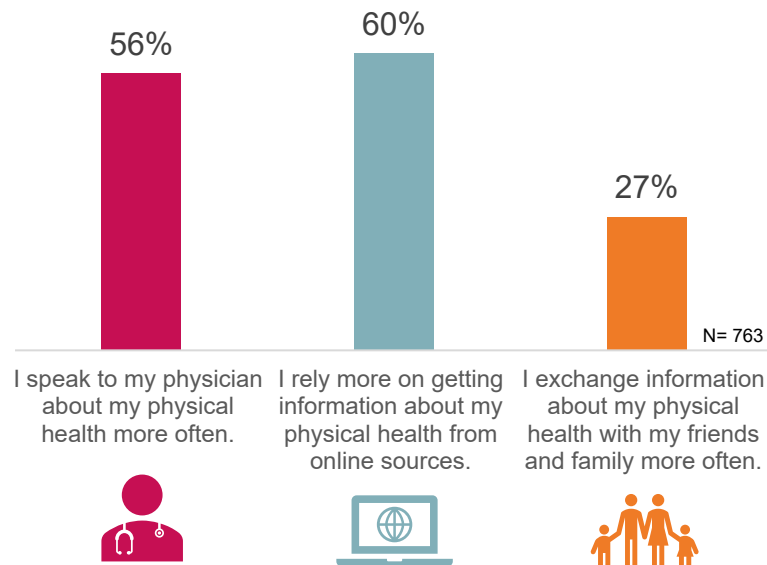
**50%** Find themselves **looking for information** around their health condition **more often**

N= 1541

How has your information seeking behavior changed?

56% I speak to my physician about my physical health more often.

60% I rely more on getting information about my physical health from online sources.

27% I exchange information about my physical health with my friends and family more often.

N= 763

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A8: Now that your care is at a distance, do you find yourself looking for information around your health condition more often?
A8.1: You stated your information searching had changed, how has it changed?

Patients might be going through a honeymoon phase since their positive experience is driven by its advantages
With time its disadvantages and the discrepancies between what they receive and what they want may become more pronounced
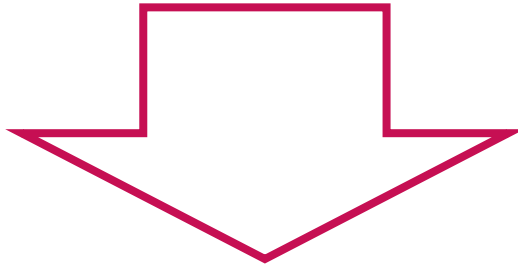
Currently, advantages outweigh drawbacks…
- Telehealth helps save time;
- Allows patients to reach their HCPs faster
- Has a positive impact on patient's budget
- Helps patients stay healthy in times of pandemic

… in the long run, disadvantages may trump benefits
- Less personal interaction with HCP
- Dissatisfaction with HCP's ability to care for mental health
- Doubts on HCP's ability to assess physical health
- Smaller say in treatment
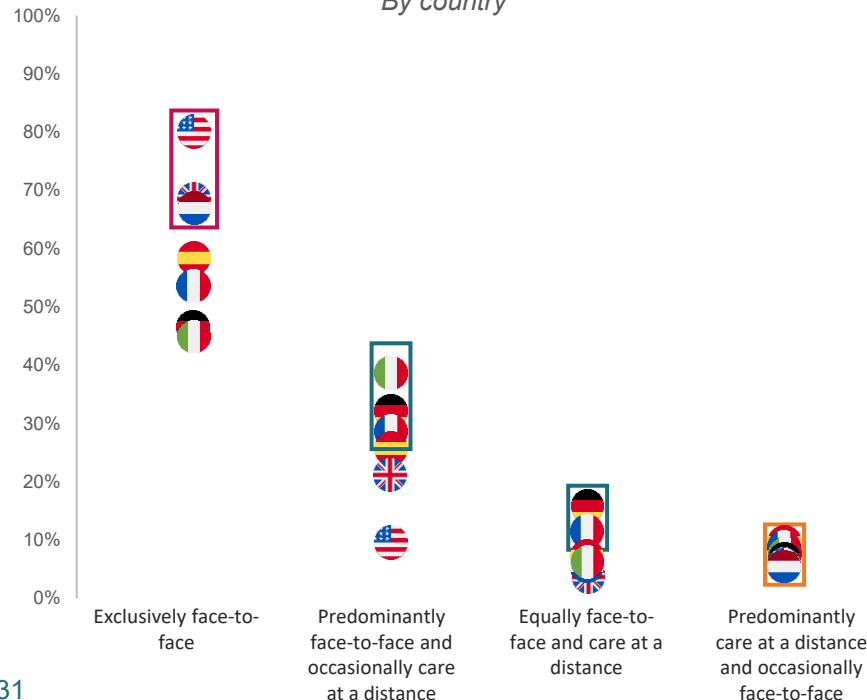
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Patient experiences across markets

In some countries, like Germany & Italy, patients show more familiarity with Telehealth pre-COVID
In US, NL & UK, patients were used to face-to-face interaction only

Patient – HCP interaction prior to COVID-19
By country

Face-to-face most common

Across all markets, few patients connected more with their HCP via Telehealth than in person pre-COVID-19: The overwhelming majority saw their HCP face-to-face at least half of the time.

Low familiarity with Telehealth in NL, US & UK

In the US, UK & The Netherlands, the overwhelming majority of patients had never received Telehealth prior to COVID-19.

**Relative familiarity with Telehealth in FR, IT, & DE**

In Germany, Italy & France, it is more common for patients to have communicated through Telehealth channels before COVID-19.

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NL: 189
UK: 280

US: 279
DE: 154

FR: 192
IT: 205
ES: 242

During COVID-19, it differed from market to market how much face-to-face interaction with HCPs still happened
In FR & DE face-to-face interaction was still common, much less so in UK, US, NL

Patient – HCP interaction during COVID-19
By country
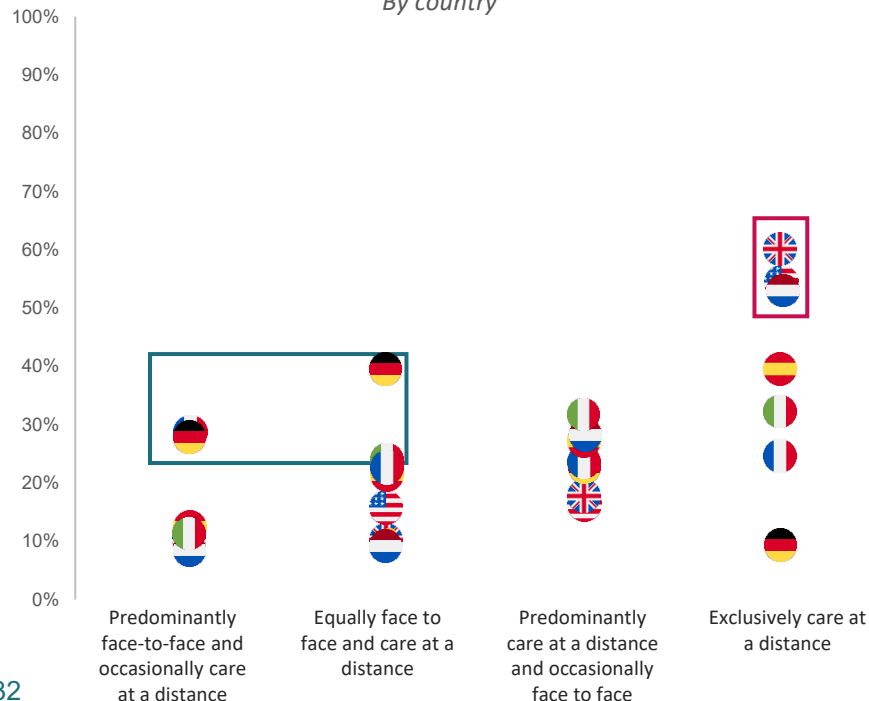
**Only Telehealth for patients in NL, US & UK**

Despite the inexperience with Telehealth in these countries, the majority of patients in NL, US & UK had no face-to-face interactions with their HCP during the COVID-19 lockdown.

More mixed approach in other markets, especially FR & DE

French & German patients still saw their HCPs throughout COVID-19 lockdowns: majority of these patients still physically saw their HCP for at least half of their consultations.

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Current Telehealth communication relies heavily on the use of phone calls across all countries

Currently used methods of communication
% of patients
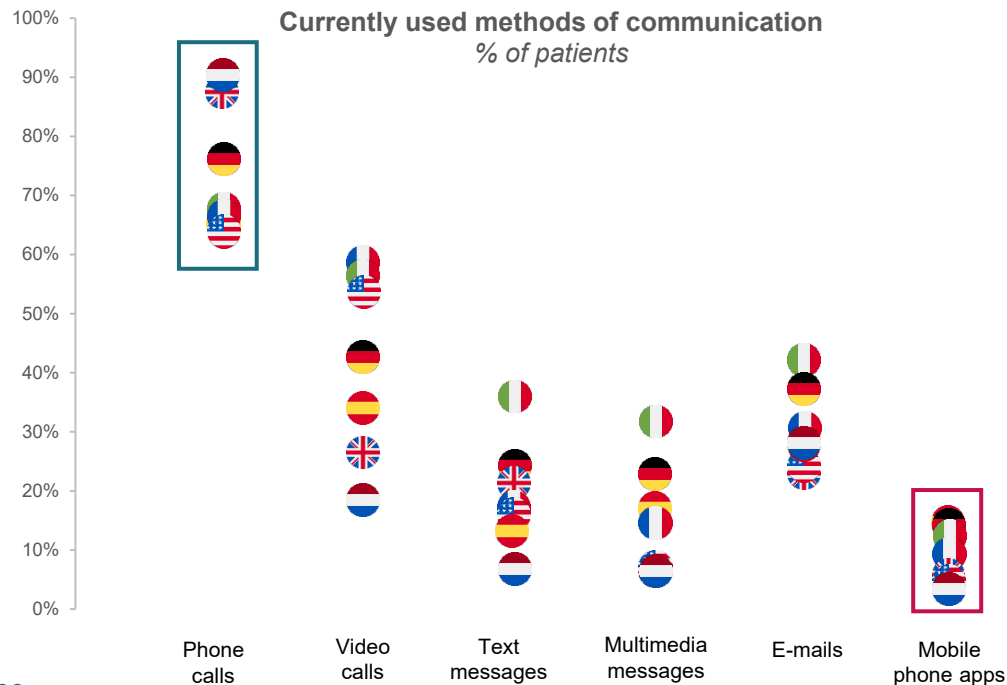
Phone calls are most used

Across all countries, phone calls are the most often used method of communication, with 60% - 90% of patients across countries using this method.

Mobile apps are used by a small %

Mobile phone apps are the least used method of communication across all countries with only 2% - 14% using this method of interaction.

A3: Which methods are you using when interacting with your physician?

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UK: 280   DE: 154   IT: 205
                    ES: 242

Interest in using phone and video calls is high while interest in using mobile apps is lower

Preference for methods of communication
% of patients

Phone and video calls most preferred

Between 80 and 90% of patients are interested in using phone calls, and between 50-80% are interested in video calls.

Low interest in using mobile apps

Less than 30% of patients across countries are interested in using mobile apps.

Phone calls | Video calls | Text messages | Multimedia messages | E-mails | Mobile phone apps

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While across countries the overall experience was positive, two clusters can be distinguished in terms of Telehealth experience

	NETHERLANDS, US, UK	**SPAIN, GERMANY, FRANCE, ITALY**
Extent of shift towards care at a distance from the start of COVID-19	**Moderate shift**	**Small shift**
Gap between preferred and used method of interaction when receiving care at a distance	**Moderate** (21-24%)	**Small** (10-19%)
Willingness to continue receiving care at a distance in the future	**Low** (33-45%)	**Moderate** (49-58%)

A6: The following questions are about your perception on the change in your quality of care. To what extent do you agree or disagree with the following statements?
A1: How did you interact with your physician before Corona/COVID-19?
A2: How are you interacting with your physician during Corona/COVID-19?
A3: Which methods are you using when interacting with your physician?
A4: What would be your top 3 preferred methods of interaction with your physician?

NL: 189   US: 279   FR: 192
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                         ES: 242

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Let's zoom in on the impact of the size of shift towards Telehealth first.

	NETHERLANDS, US, UK	SPAIN, GERMANY, FRANCE, ITALY
Extent of shift towards care at a distance from the start of COVID-19	**Moderate shift**	**Small shift**
Gap between preferred and used method of interaction when receiving care at a distance	Moderate (21-24%)	Small (10-19%)
Willingness to continue receiving care at a distance in the future	**Low** (33-45%)	**Moderate** (49-58%)

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The shift from face-to-face care to Telehealth was bigger in the NL, UK & US.
In ES, IT, FR and especially DE, the shift to Telehealth was less abrupt

Exclusive face-to-face care before COVID-19
vs
Exclusive Telehealth during COVID-19

For **DE, FR, IT & SP** patients were more used to Telehealth prior to COVID-19 and were less likely to have exclusive Telehealth during, making the **shift less abrupt**.
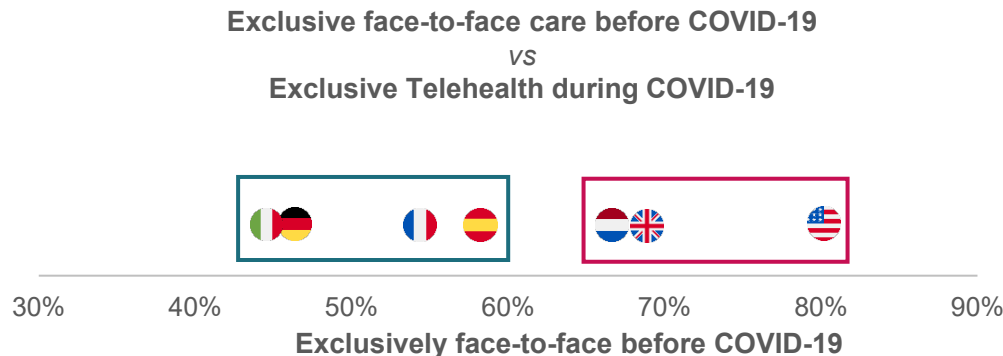
For NL, UK & US, **the shift was bigger**: The biggest portion received only face - to –face care pre- COVID 19, shifting to the majority receiving only Telehealth during COVID-19.

Exclusively face-to-face before COVID-19

30% 40% 50% 60% 70% 80% 90%

Exclusively Telehealth during COVID-19

0% 10% 20% 30% 40% 50% 60% 70%

% of change

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A3: Which methods are you using when interacting with your physician?
A4: What would be your top 3 preferred methods of interaction with your physician?
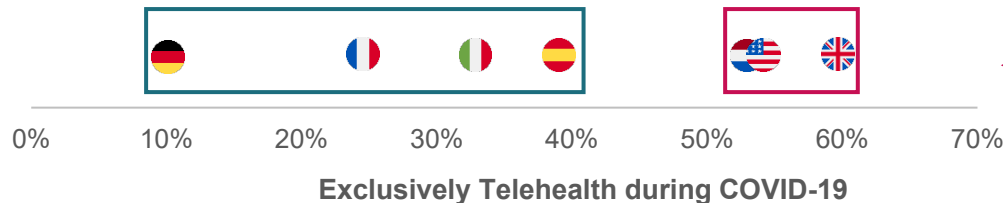
The countries that saw the biggest shift see lower willingness to continue using Telehealth
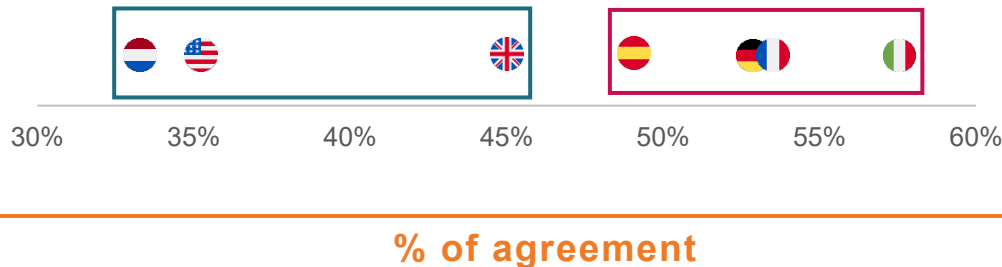## Especially US & NL patients are less likely to want to continue using Telehealth

By comparing how patients received care **before COVID-19** and **during COVID-19**, we can examine the size of the shift in care patients experienced.

Shift in the extent of care at a distance
By country

Small Shift	Moderate Shift	Big Shift
(1 – 2 points on a 4-point scale)	(2.1 – 3 points on a 4-point scale)	(3.1 – 4 points on a 4-point scale)

Willingness to continue
By country

30% 35% 40% 45% 50% 55% 60%

% of agreement

*calculated by subtracting way of interacting during COVID-19 – way of interacting before COVID-19

A1: How did you interact with your physician before Corona/COVID-19?
A2: How are you interacting with your physician during Corona/COVID-19?
A6: The following questions are about your perception on the change in your quality of care. To what extent do you agree or disagree with the following statements?

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Next, let's look at how patient's happiness with the method of interaction impacts their willingness to continue Telehealth

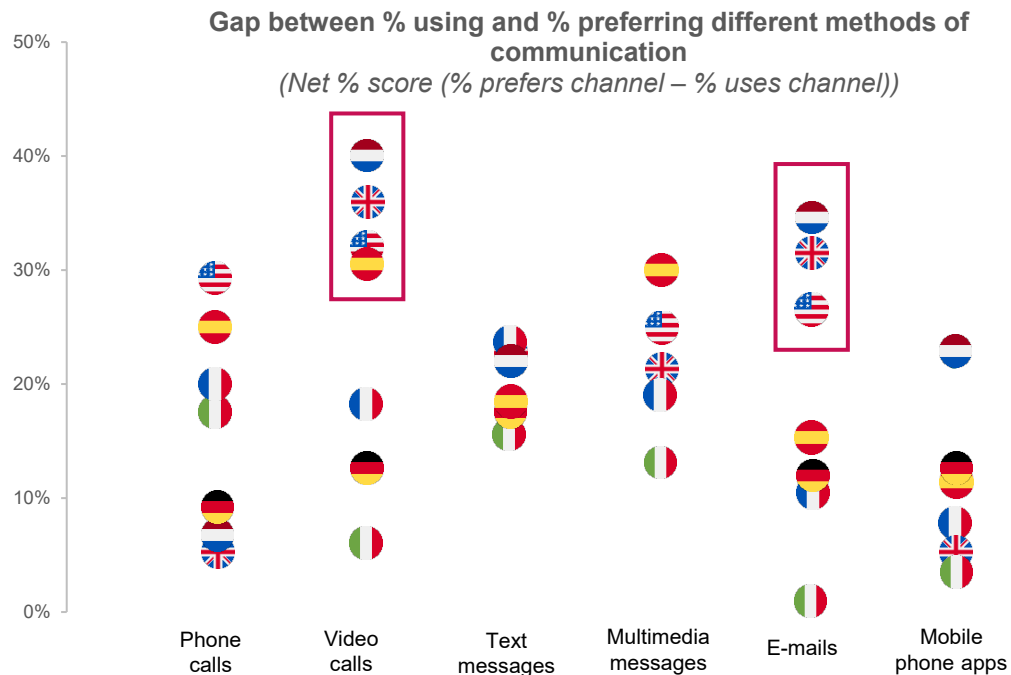|	NETHERLANDS, US, UK	SPAIN, GERMANY, FRANCE, ITALY
Extent of shift towards care at a distance from the start of COVID-19	**Moderate shift**	**Small shift**
Gap between preferred and used method of interaction when receiving care at a distance	**Moderate** (21-24%)	**Small** (10-19%)
Willingness to continue receiving care at a distance in the future	**Low** (33-45%)	**Moderate** (49-58%)

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Most methods of interaction show an unfulfilled demand, especially in US, UK and The Netherlands
Patients are especially interested in communication through video call & e-mail

Gap between % using and % preferring different methods of communication
(Net % score (% prefers channel – % uses channel))

NL, US, and UK have high unfulfilled demand.

Looking across methods of communication, on average between 25% and 27% of patients are not using their preferred method.

Video calls and e-mails are methods of communication with high unfilled demand in NL, US, and UK.

Over 30% of patients in these countries would like to use video calls while between 27% and 34% of patients would like to use emails but do not use them to communicate with their HCP.

A3.Which methods are you using when interacting with your physician?
A4. What would be your top 3 preferred methods of interaction with your physician?

NL: 189   US: 279   FR: 192
UK: 280   DE: 154   IT: 205
                    ES: 242

SKIM

A comparison between IT and NL underlines the different experiences across markets
In IT, used communication methods closely match the desired methods, whereas NL patients experience a gap between what they want to use and what is used
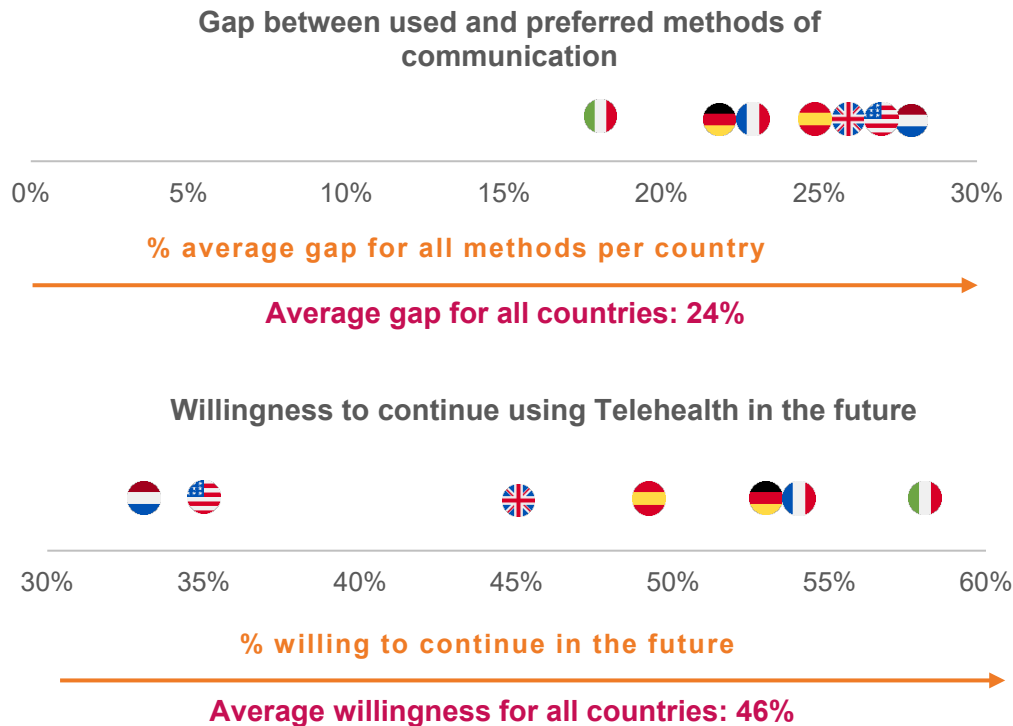
Gap between used and preferred methods of communication
% of patients
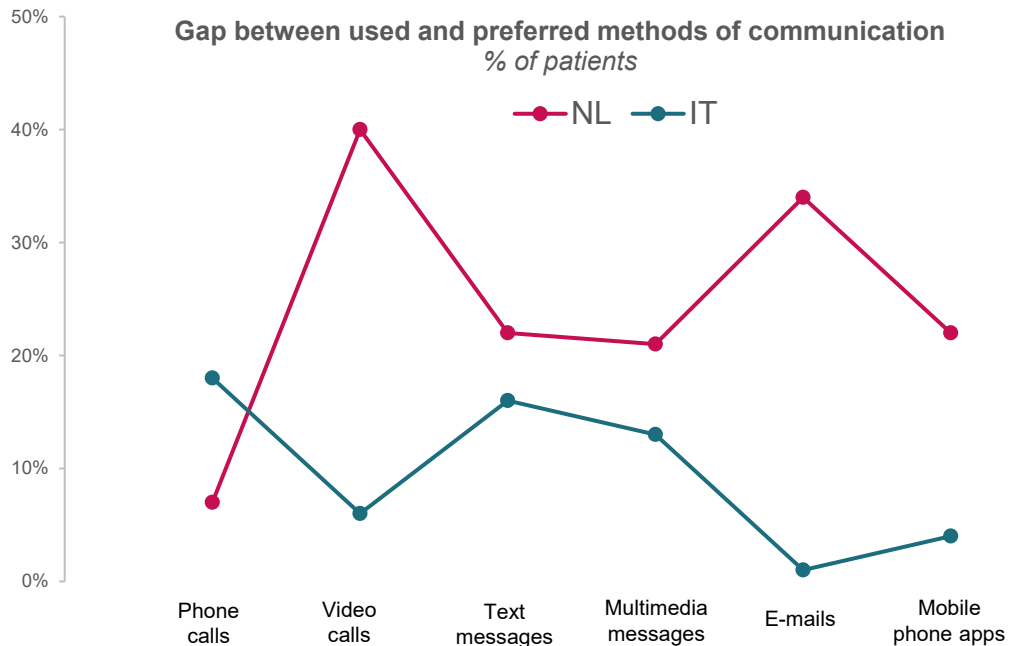
EXAMPLE
Netherlands vs. Italy

- **40% of patients want to use Video Calls and E-mails** in the Netherlands but are not using them.

- In Italy this difference is much smaller, being only around **10-15%.**

- This indicates a closer match between desired & used methods in Italy than in the Netherlands.

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In countries with a bigger gap between desired & used communication methods, willingness to continue Telehealth is lower

Gap between used and preferred methods of communication

0%   5%   10%   15%   20%   25%   30%

% average gap for all methods per country

Average gap for all countries: 24%

Willingness to continue using Telehealth in the future

30%   35%   40%   45%   50%   55%   60%

% willing to continue in the future

Average willingness for all countries: 46%

Comparing the methods patients are using and those they want to be using shows us the underutilization of the methods patients would prefer.

!

Countries on average use **2 methods of interaction** with Italy using 2.5 methods of interaction on average.

42

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NL: 189   US: 279   FR: 192
UK: 280   DE: 154   IT: 205
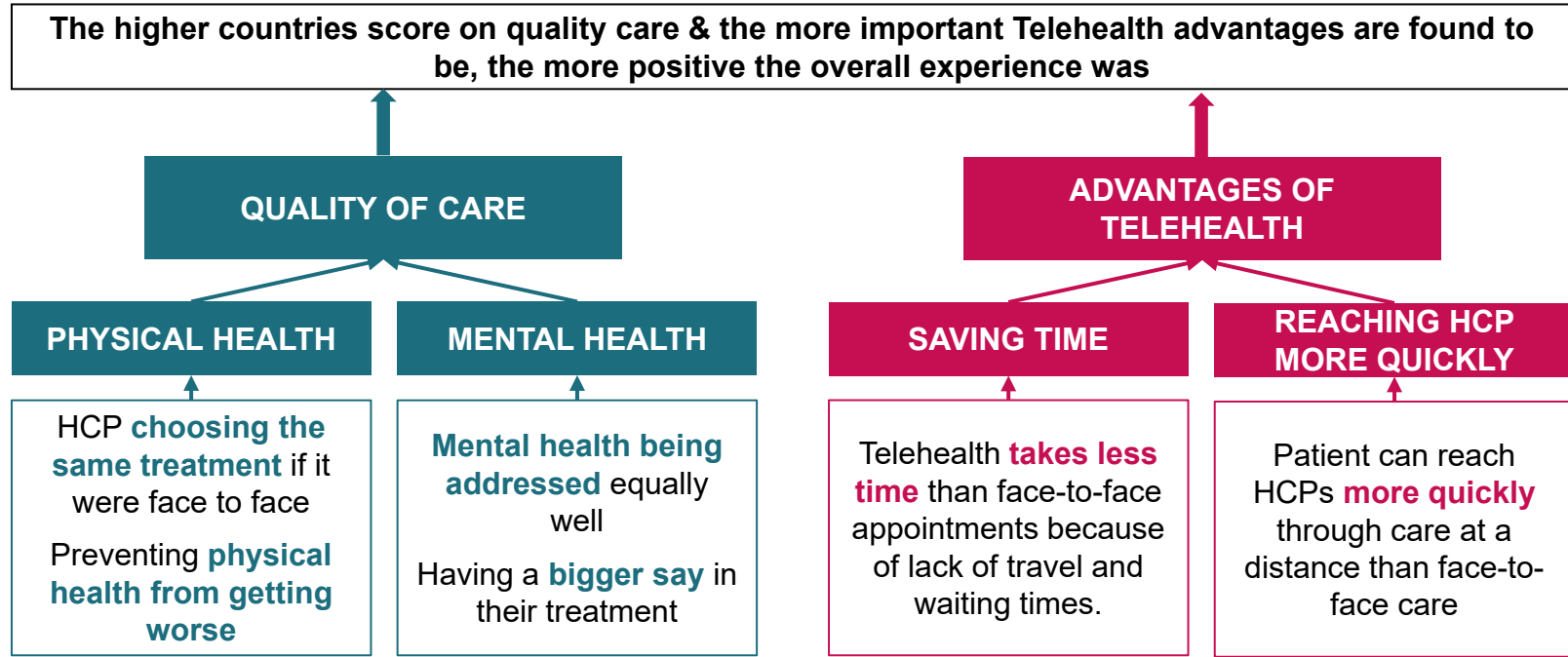   ES: 242

Countries with a smaller shift and gap in methods used/preferred had an overall more positive experience and were more willing to continue

↓↑ *Statistically significant from the average*

		🇳🇱 NL	🇺🇸 US	🇮🇹 IT
TELEHEALTH EXPERIENCE	Willingness to continue interacting at a distance in the future	33% ↓	35% ↓	58% ↑
	Positive experience of the transition to care at a distance	70% ↓	78%	89% ↑
EASE OF ADJUSTMENT	Shift in type of care received	Moderate ↑	Moderate ↑	Small ↓
	Gap between the methods patients would prefer to use and the method they actually use	28% ↑	26%	18% ↓

A1: How did you interact with your physician before Corona/COVID-19?
A2: How are you interacting with your physician during Corona/COVID-19?
A3: Which methods are you using when interacting with your physician?
A4: What would be your top 3 preferred methods of interaction with your physician?
A5: How did you experience the transition to receiving care at a distance rather than face-to-face?
A6: The following questions are about your perception on the change in your quality of care. To what extent do you agree or disagree with the following statements?

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NL: 189
US: 279
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How positively Telehealth was experienced was also driven by the perceived quality of Telehealth care, especially mental health

The weight placed on the advantages of Telehealth boost positive experience too

The higher countries score on quality care & the more important Telehealth advantages are found to be, the more positive the overall experience was

QUALITY OF CARE

ADVANTAGES OF TELEHEALTH

PHYSICAL HEALTH

HCP **choosing the same treatment** if it were face to face

Preventing **physical health from getting worse**

MENTAL HEALTH

Mental health being addressed equally well

Having a **bigger say** in their treatment

SAVING TIME

Telehealth **takes less time** than face-to-face appointments because of lack of travel and waiting times.

REACHING HCP MORE QUICKLY

Patient can reach HCPs **more quickly** through care at a distance than face-to-face care

A6:The following questions are about your perception on the change in your quality of care. To what extent do you agree or disagree with the following statements?
A7: To what extent do you agree or disagree with the following statements?
A7.1: To what extent do you agree or disagree with the following statements?

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N= 1541

Countries which were able to address mental health needs and allowed patients to have a bigger say in their treatment saw a higher willingness to continue with Telehealth.

	🇳🇱	🇺🇸	🇩🇪	🇮🇹
Willingness to continue interacting at a distance	33%	35%	53%	58%

QUALITY OF CARE		🇳🇱	🇺🇸	🇩🇪	🇮🇹
	Mental health being addressed equally well	42% ↓	42% ↓	62% ↑	65% ↑
	Having a **bigger say** in their treatment	25%	26% ↓	52% ↑	55% ↑
	HCP choosing the **same treatment** if it were face to face	72% ↓	78%	67%	69%
ADVANTAGES	Saving **time**	67% ↓	79%	76%	76%
	Being able to **reach** HCP more quickly	43% ↓	49% ↓	66% ↑	76% ↑

NL: 189   DE: 154
US: 279   IT: 205

Countries with a more positive overall experience and higher willingness to continue Telehealth seem to be more **patient-centric** in the set-up of their Telehealth system

Mental health is not addressed equally well as it is face-to-face

Patients don't have a **bigger say** in the treatment they receive

Larger **gap** between preferred methods and used methods of communication

Mental health is addressed equally well as it is face-to-face

Patients have a **bigger say** in the treatment they receive

Patients are able to **reach** their HCPs faster

Smaller gap between preferred methods and used methods of communication

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About SKIM

SKIM is a global insights agency helping leading companies thrive by understanding decision-making. To stay ahead in today's environment, it's critical to know how decisions are made and how the changing environment influences decisions for consumers, healthcare and B2B professionals.

To understand how decision-making has changed (and how it hasn't!), we adapt sophisticated research techniques and develop new innovations to address this new reality. *The result?* Practical brand communications, revenue management, product innovation, e-Commerce, and advanced analytics recommendations you can use to propel your business forward, both online and offline.

What sets SKIM apart is our decision behavior expertise + deep analytical and choice-modeling roots + a thorough understanding of the marketing challenges brands face. This unique combination, along with our creative thinking, is the reason why strategy consultants and leading companies, from Fortune 500 to digital disruptors, have continued to partner with us for decades.

With 9 offices around the world and 150+ enthusiastic SKIMmers ready to help crack your business case, *how can we team up with you today?*

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