

2016 Survey on Healthcare in Japan

Health and Global Policy institute

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I. Summary

HGPI has been undertaking regular surveys of public opinions on healthcare issues since 2006 in order to have a better understanding of public perceptions and awareness related to desired health and healthcare policies.

Continuing from previous surveys, the 2016 survey included questions on the satisfaction rate towards the current healthcare system and the degree of trust towards healthcare personnel and organizations. In addition, the survey was also conducted on currently hot topics such as high-priced drugs and medical procedures.

(1) Main takeaways from survey results

- ⊙ 70% are in favor of using insurance to cover the costs of high-priced drugs; however, many people also expressed that some form of restriction should be in place.
- ⊙ The degree of trust towards pharmacists has reached 83% for a wide range of age groups. This is the highest degree of trust for any category of healthcare professional
- ⊙ Trust in the Government is increasing – the degree of trust towards the Ministry of Health, Labour and Welfare (MHLW) increased by 15 points

(2) Healthcare policies suggested by survey results (future point for discussion)

Survey results suggested the following topics for future discussions about the sustainability of the healthcare system.

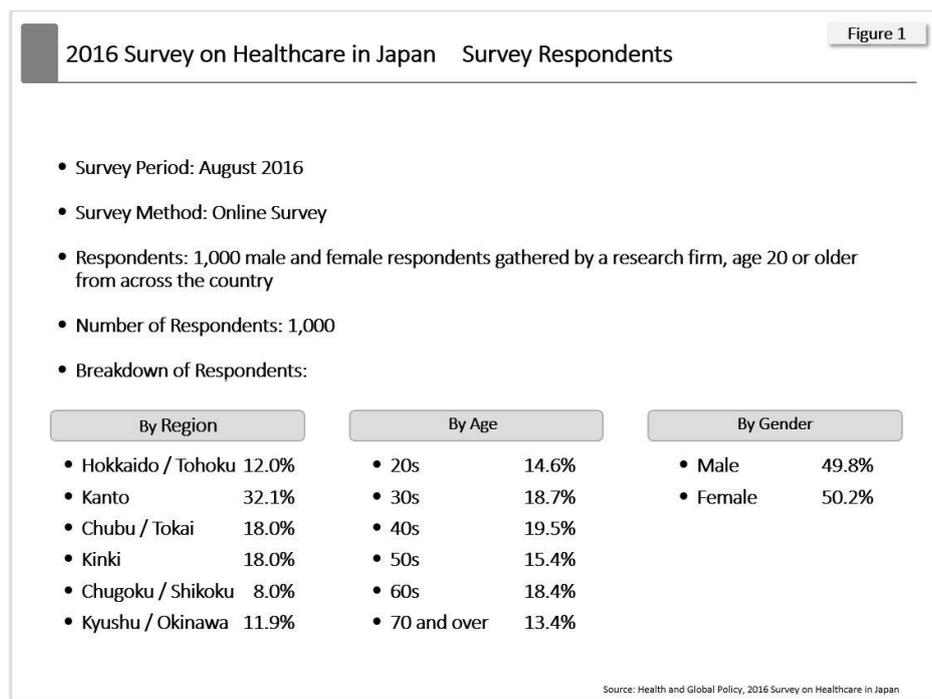
- ⊙ How can a framework be set up to allow for the full participation by citizens in the healthcare decision making process? How can a framework be created for cost burdens that the public will accept?
- ⊙ How can a balance be struck between the coverage of new drugs and medical procedures created through technological advancements by public insurance, and limited public funds?

II. Overview of the Survey

An internet based public opinion survey was administered to 1,000 males and females over 20 years of age during August 2016. A breakdown of respondent demographics is shown in Figure 1. The survey was only administered to those who gave informed consent after a detailed explanation. Considerations were made for anonymity through the use of serial numbers to differentiate surveys.

Taking place on the internet, participation in this survey was limited to only those with access to the internet and some level of internet literacy and education, leading to a certain degree of sampling bias. This should be kept in mind when interpreting the results of this survey¹.

¹ mith MA, Leigh B. Virtual subjects: using the Internet as an alternative source of subjects and research environment. Behav Res Meth Instrum Comput. 1997;29:496–505.



III. Survey results

(1) Satisfaction with the healthcare system

Continuing on from the previous (2013) survey, in addition to inquiring into the overall public satisfaction with Japan's current healthcare system, questions were asked on healthcare quality and safety, services for patients, access to healthcare, healthcare payments, and the decision-making process for regulations. Satisfaction trends were analyzed through comparisons with past results.

① 2016 survey results (figure 2)

- Satisfaction exceeded 50% related to healthcare quality (quality of diagnoses, technology, and health safety)

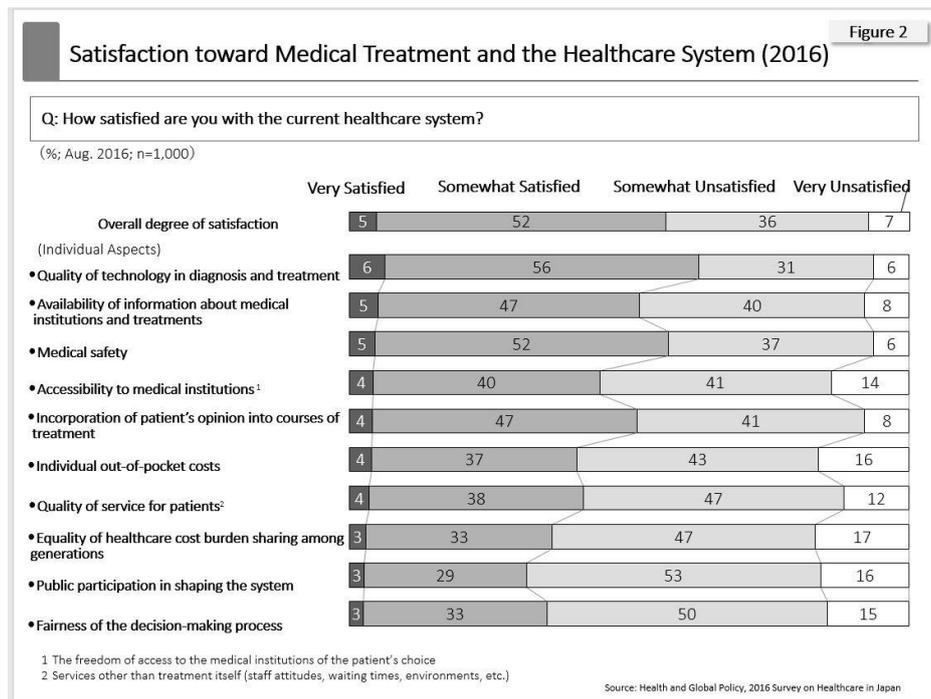
The satisfaction rate for healthcare quality related topics such as the quality of technology used for diagnoses and treatment reached 62%. In addition, the satisfaction rate was 57% for medical safety, 52% for information about healthcare institutions and treatment methods, and 51% for communication with healthcare professionals about treatment policies. The majority of respondents were very satisfied or somewhat satisfied for all items.

- Over 50% of people are dissatisfied with Dissatisfaction with the proportion of cost burdens expected to be paid by individual patients and the fairness of generational cost burden differences reached over 50%
In regards to healthcare costs, 59% are not satisfied with the proportion of cost burdens expected to be paid by individual patients. 64% are not satisfied with unequal healthcare cost burdens among generations. The majority of respondents reported they were either very unsatisfied or somewhat unsatisfied for both items.

- Overall satisfaction in the healthcare system exceeded 50%; however, many were unsatisfied with the direction of decisions about the system

Overall public satisfaction with Japan's healthcare system reached 57%; however, 69% were unsatisfied with the scope of citizen involvement in decision making about the healthcare system. 65% were unsatisfied with the fairness of the healthcare system decision making process. More

people were dissatisfied than satisfied with the decision-making practices related to the healthcare system.



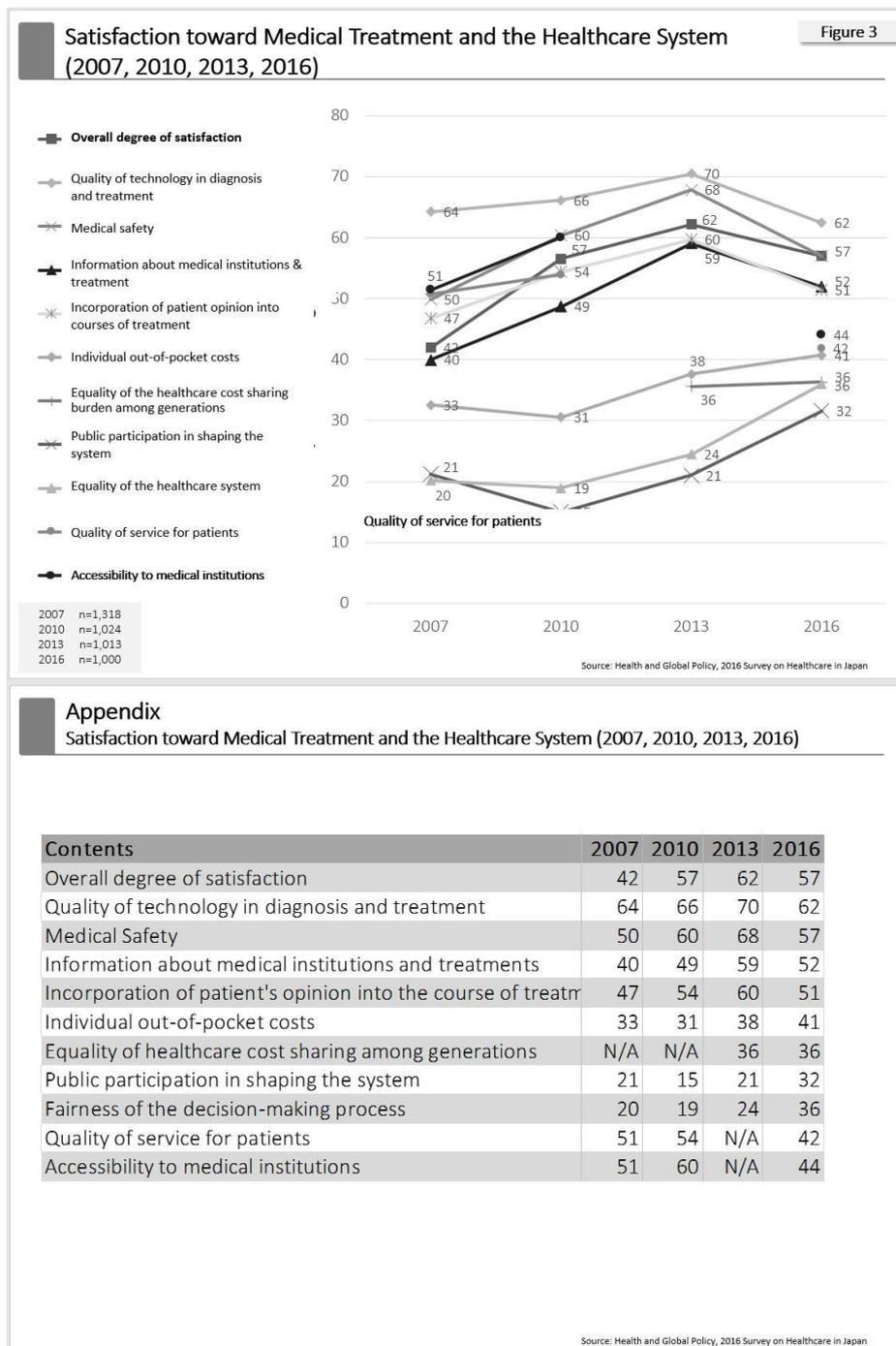
② Comparison with past survey results (2007, 2010, 2013, and 2016) (figure 3)

- Overall, satisfaction in the healthcare system has increased over the past 10 years

In comparison to 2007, the overall satisfaction rate has gone up. In particular, the greatest gains have been seen for satisfaction related to the fairness of the healthcare system decision making process, which has increased by 16 points. Satisfaction rates have decreased related to services for patients, access to healthcare institutions, and the quality of diagnostic and treatment technology. The greatest decrease was seen for satisfaction related to services for patients, which decreased 9 points.
- In comparison with 2013, satisfaction with healthcare system decision making has increased, while satisfaction with the quality of healthcare decreased.

Compared to the previous survey, conducted in 2013, satisfaction in the fairness of the healthcare system decision making process increased by 12 points. This was the greatest increase of all items since 2013. In contrast, satisfaction related to medical safety decreased the most of all items, falling 11 points.

While the satisfaction rate increased related to the proportion of the healthcare cost burden expected to be paid by individuals and the fairness of the healthcare system decision making process, satisfaction decreased related to the quality of healthcare and the healthcare system overall.



③ Comments

- ✓ The majority of the respondents were satisfied with the current health services offered and the healthcare system overall
- ✓ Satisfaction with healthcare safety has gone decreased compared to previous surveys perhaps due to numerous news reports that have been written and broadcast related medical accidents and drug effectiveness and safety
- ✓ In comparison with the previous surveys, improvements have been seen in satisfaction rates related to public participation in the healthcare system decision making process and the fairness of that process. The reasons behind these improvements are unclear. The broadening of patient advocacy activities and growing ease of expressing oneself through social networks and other means in recent years may have had some influence

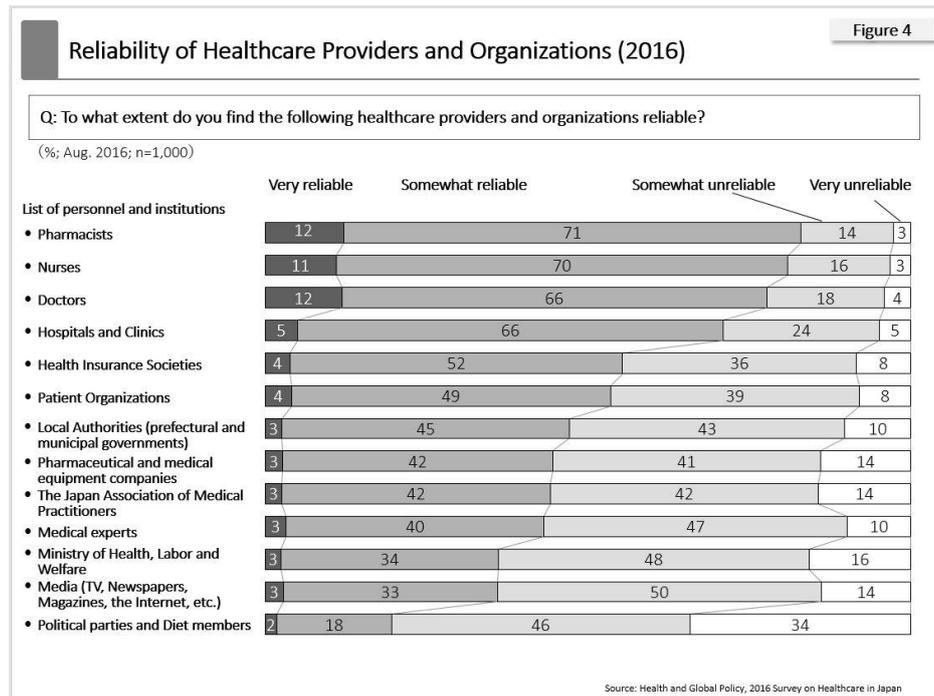
(2) Degree of trust towards healthcare professionals and institutions

Questions were asked about public trust in each of the stakeholders involved in healthcare policy in Japan.

① Current survey results (2016)

■ High degree of trust towards pharmacists, doctors, and nurses

Pharmacists obtained the highest degree of trust at 83%, followed by nurses at 81%, doctors at 78%. Trust in healthcare professionals was high. In contrast, political parties and members of the Diet obtained the lowest amount of trust at 20%, followed by the media at 36% (figure 4).

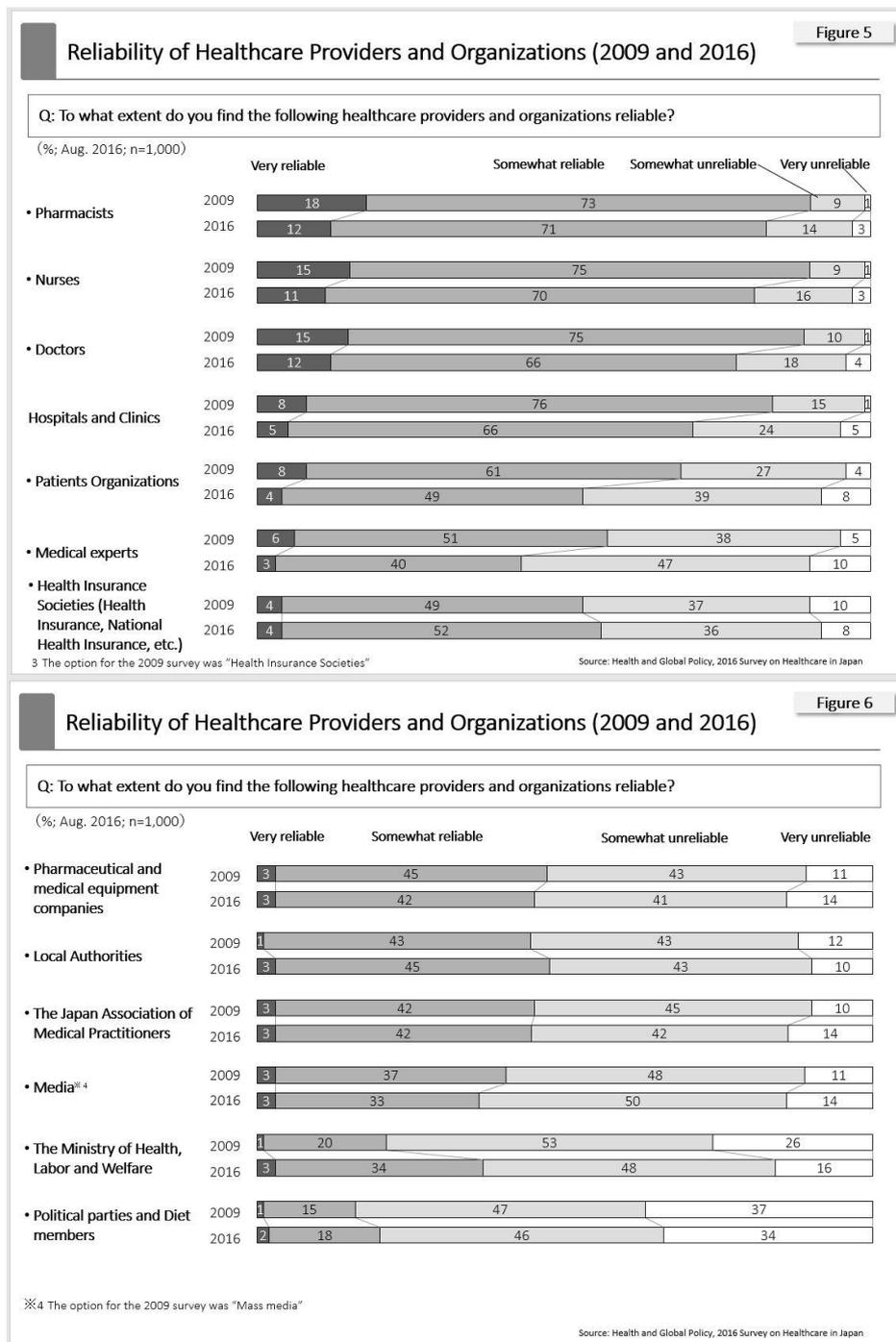


② Comparisons with previous results (2009, 2016) (figure 5 and figure 6)

■ The degree of trust towards MHLW has gone up 15 points since 2009

In comparison with 2009 results and looking at the general trend, MHLW saw the greatest increase in trustworthiness (15 points). In contrast, the most distrusted group is now patient advocacy groups, which have seen a decrease in trust of 16 points. Trust towards medical insurance unions (health insurance associations, national health insurance, etc.), municipalities (prefectural offices and city halls), MHLW, political parties, and members of the National Diet has increased. With the exception of the Japan Medical Association, the trust fell in all health professionals and institutions.

Special care should be given when interpreting the results regarding health professionals and institutions, and the notation used for relevant questions were changed to allow them to be more easily understood by respondents.



③ **Comment**

- ✓ Continuing from previous survey results, pharmacists earned the highest degree of trust. The introduction of a system through which pharmacists make house calls has led them to be deemed as important stakeholders to ensure patient safety and relief. There is a high expectation for regional healthcare professionals to play a role in management and education related to medication use.
- ✓ Trust towards MHLW has increased compared to 2009. Since MHLW was facing a great amount of criticism related to pension problems and the medical care system for latter-stage elderly people in 2009, trust in the Ministry was at a low point. It is believed that the increase this time represents a positive shift in public opinion related to recent activities and information sharing initiatives carried out by MHLW.

- ✓ The decline in trust in patient groups may be related to the fact that it is now possible to easily obtain information on illnesses and treatments through internet or mobile phones thanks to advancements in technology. It may be that public expectations for the role of patient advocate groups are changing.

(3) Opinions regarding high-priced drugs and medical procedures

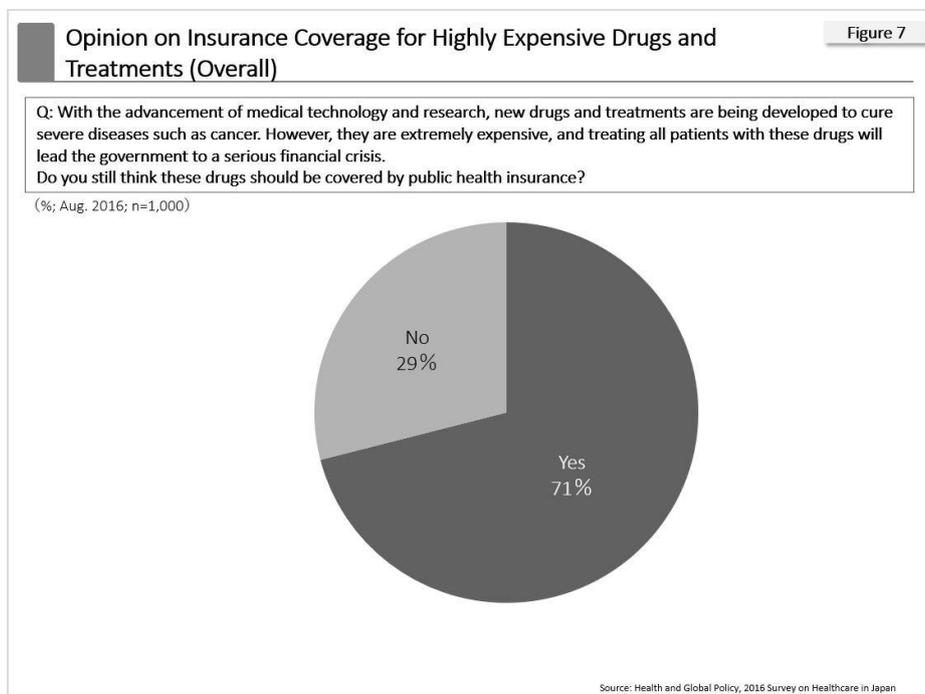
Recently, there has been much public discussion about high-priced drugs. It is expected that more debates will continue to take place regarding the handling of high-priced medical and pharmaceutical products and medical procedures in the future. Questions were asked in light of this to grasp public opinion regarding the aforementioned topics.

① Survey Results (2016)

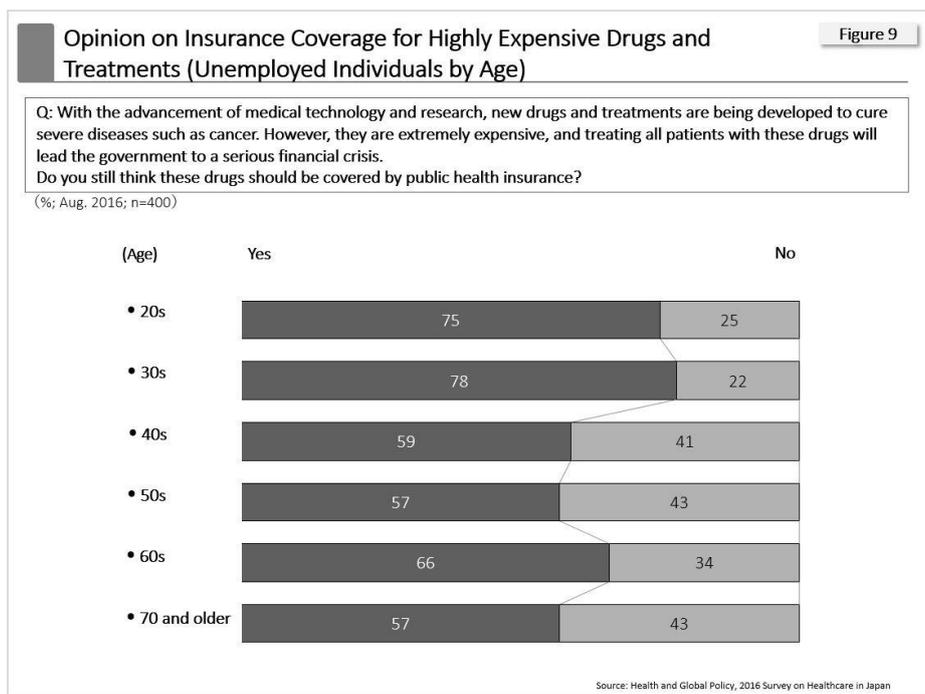
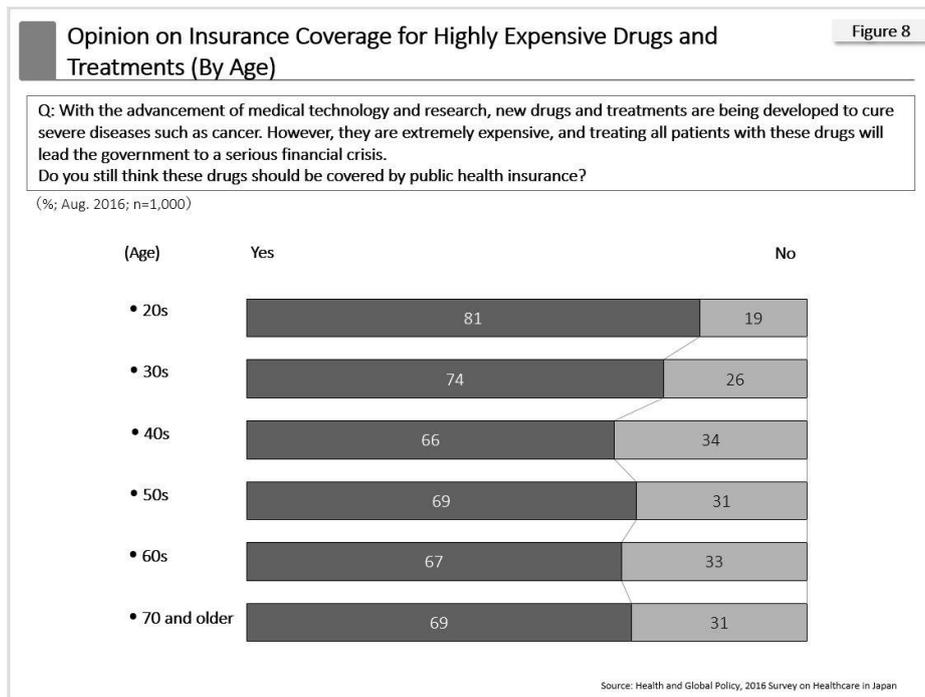
- i. Agreements and disagreements related to the application of insurance for high-priced medical and drug products and medical procedures

- There is a strong support for the use of insurance to help pay for high-priced medical and drug products and medical procedures among 20-30 year olds

When asked, “Should public insurance cover extremely high priced drugs (costing more than 10 million yen) used to treat cancer and other serious illnesses?” 71% responded that insurance should cover these drugs (figure 7). Broken down by age group, a high proportion of those in their 20s (81%) and 30s (74%) especially supported insurance coverage (figure 8). When asked about coverage based on employment type, such as coverage for full-time or part-time workers², 80% of those in their 20s (75%) and 30s (78%) agreed that part-time employees should qualify for insurance coverage. It is clear that young part-time employees feel strong uncertainty regarding healthcare payments (figure 9).



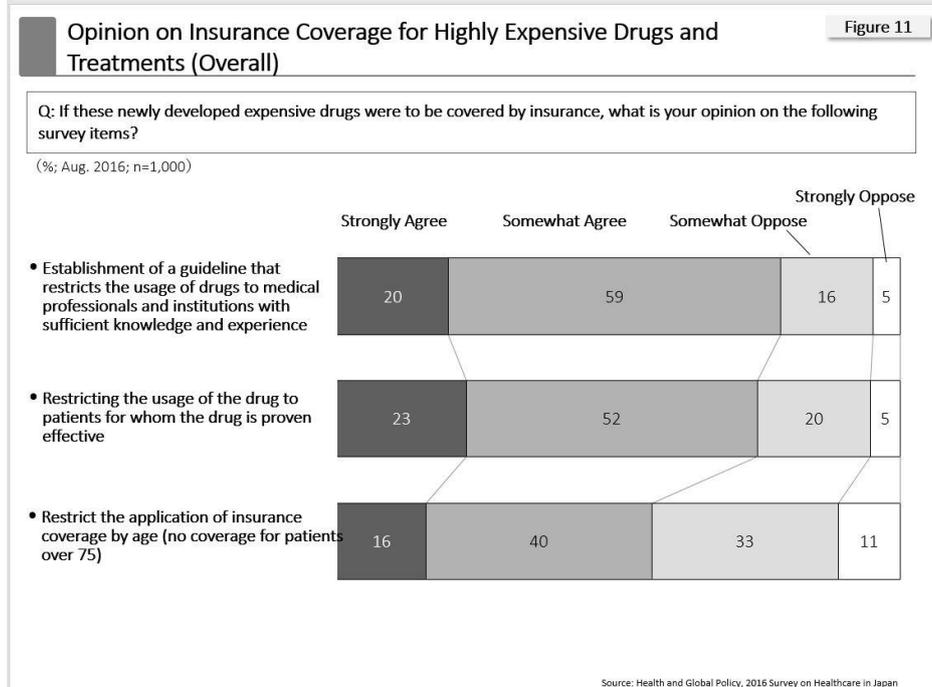
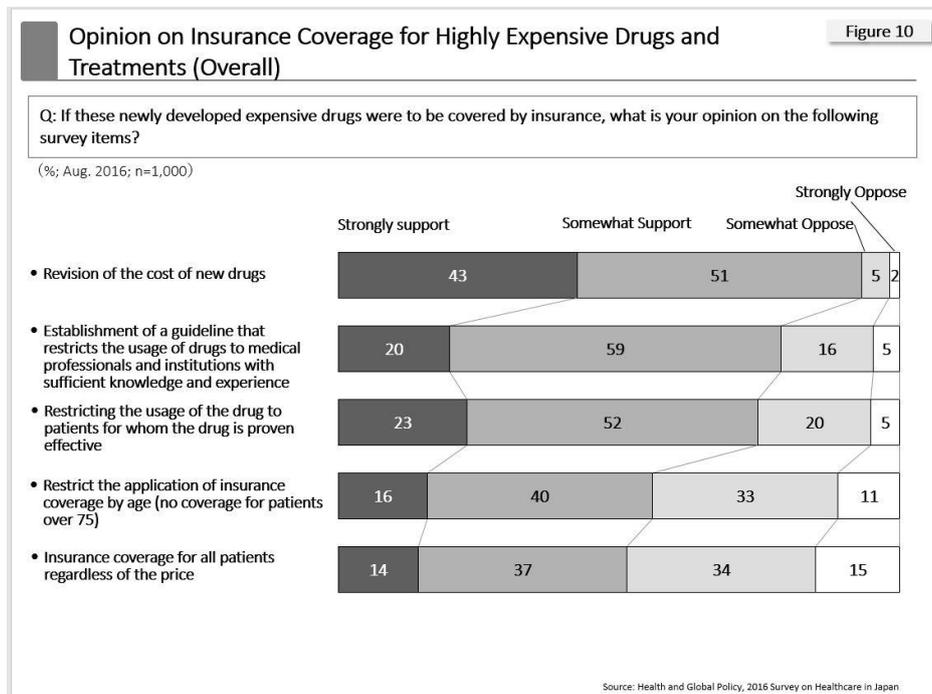
² full-time worker: office worker, company owner, public staff, teacher, nonprofit organization staff
 part-time workers: temp staff, contract staff others: self-employed, SOHO, farmer, fisher, specialist (lawyer, accountant, medical worker), full-time homemaker, student, unemployed person



- ii. Options Available if high-priced drugs and medical procedures are to be covered by insurance
 - Many were in strong favor of policies that would re-price new drugs, revisit guideline, and sustain public health insurance

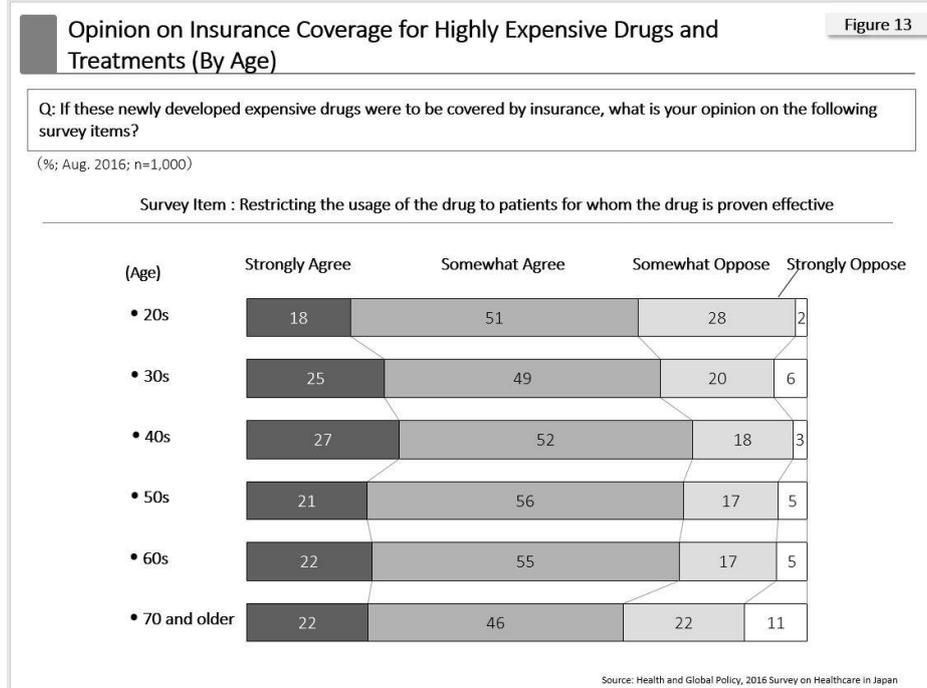
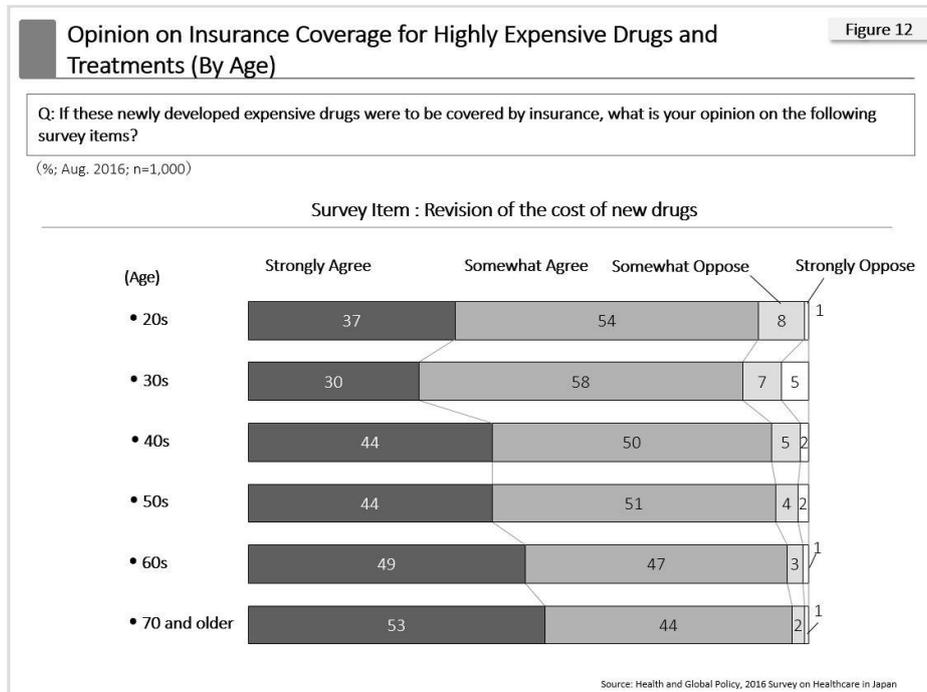
In regards to extremely high priced drugs (costing more than 10 million yen) used to treat cancer and other serious illnesses, a few choices were prepared that would allow for coverage of these drugs under public health insurance plans. These choices included “re-pricing new drugs,” “setting age limits for who can use the drug,” “administering the drug only in cases where it is thought it will be effective,” “formulating user guidelines for appropriate use,” and “administering new drugs

to all patients despite the price.” The most agreed to option was “re-pricing of new drugs” (94%), while the least popular option was “administer new drugs to all patients despite the price” (51%; figure 10). On the other hand, the majority of respondents also selected an option calling for some form of limitation in public insurance coverage, such as “setting age limits for who can use the drug,” “administering the drug only in cases where it is thought it will be effective,” or “formulating user guidelines for appropriate use” (figure 11).



- Differences were small among different age groups
Comparing choices among different age groups, there was not much difference among the groups in the selection rate for “re-pricing new drugs,” “formulating

user guidelines for appropriate use,” or “administer new drugs to all patients despite the price.” There were over 10 point differences in the proportion of respondents selecting “administering the drug only in cases where it is thought it will be effective” and “setting age limits for who can use the drug” among the age groups that selected these choices the most and the least (figure 12-16).



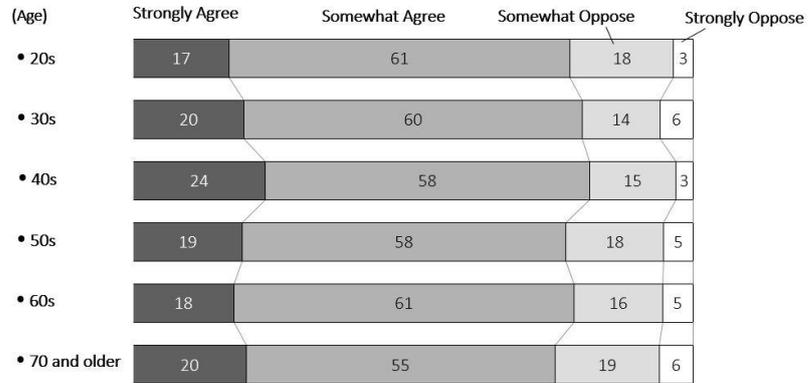
Opinion on Insurance Coverage for Highly Expensive Drugs and Treatments (By Age)

Figure14

Q: If these newly developed expensive drugs were to be covered by insurance, what is your opinion on the following survey items?

(%; Aug. 2016; n=1,000)

Survey Item : Establishment of a guideline that restricts the usage of drugs to medical professionals and institutions with sufficient knowledge and experience



Source: Health and Global Policy, 2016 Survey on Healthcare in Japan

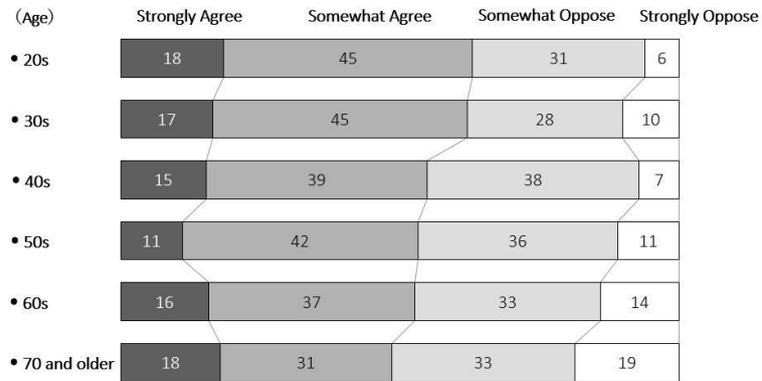
Opinion on Insurance Coverage for Highly Expensive Drugs and Treatments (By Age)

Figure 15

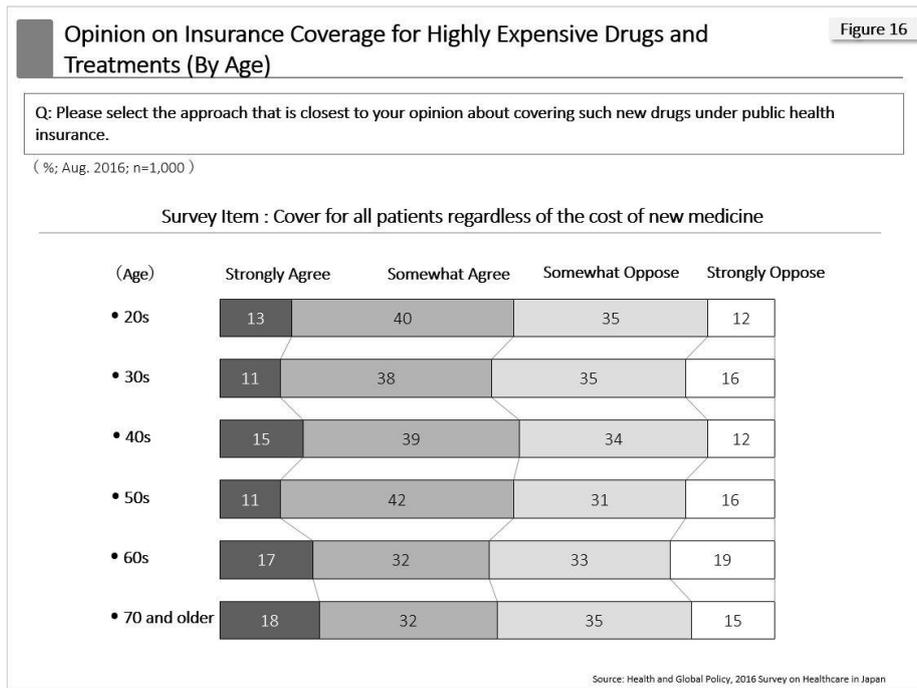
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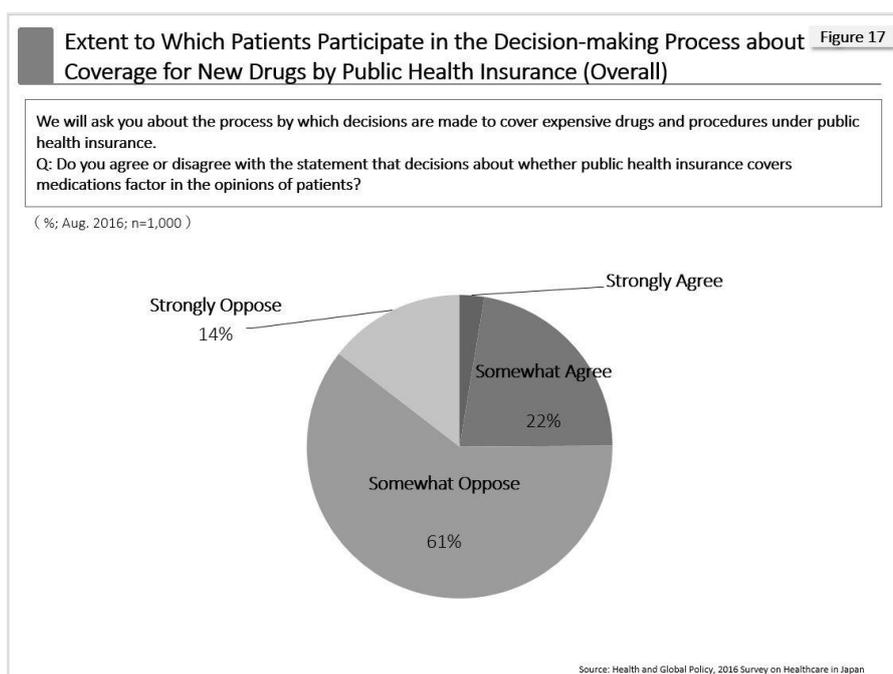
Survey Item: Restrict the application of insurance coverage by age
(No coverage for patients over 75)



Source: Health and Global Policy, 2016 Survey on Healthcare in Japan



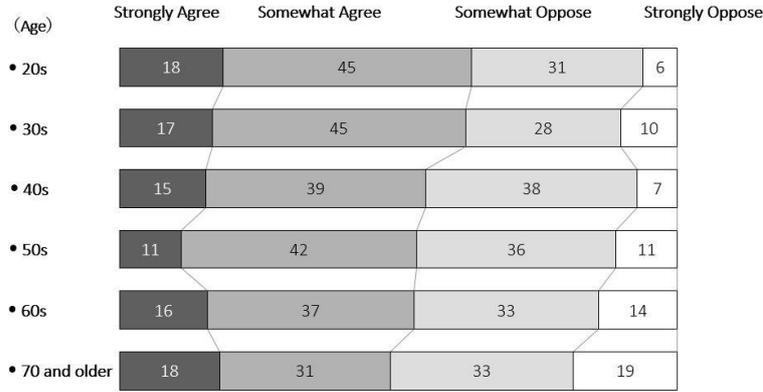
- iii. The range of patient participation in the insurance coverage decision making process
- Many members of the public expressed the opinion that patient opinions are not being incorporated in the process by which insurance coverage is decided
- In regards to a question regarding the incorporation of patient opinions in discussions about whether public insurance should cover high-priced medical and pharmaceutical products and medical procedures, 75% stated that they felt public opinion was “not incorporated” in the process (figure 17). There was no difference between age groups in the results (figure 18). In addition, broken down by employment type, 82% of part-time employees responded that they felt “patient opinions are not being reflected” which is 14 points higher than the proportion of full time employees that responded that way (68%; figure 19).



Extent to Which Patients Participate in the Decision-making Process about Coverage for New Drugs by Public Health Insurance (By Age) Figure 18

We will ask you about the process by which decisions are made to cover expensive drugs and procedures under public health insurance.
 Q: Do you agree or disagree with the statement that decisions about whether public health insurance covers medications factor in the opinions of patients?

(%; Aug. 2016; n=1,000)



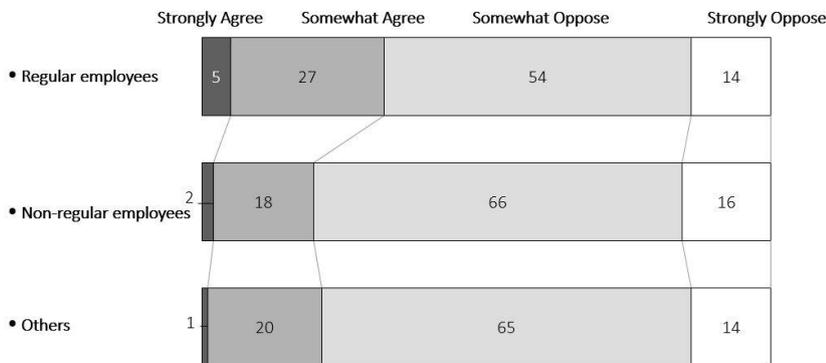
Source: Health and Global Policy, 2016 Survey on Healthcare in Japan

Extent to Which Patients Participate in the Decision-making Process about Coverage for New Drugs by Public Health Insurance (By Employment Status) Figure 19

We will ask you about the process by which decisions are made to cover expensive drugs and procedures under public health insurance.
 Q: Do you agree or disagree with the statement that decisions about whether public health insurance covers medications factor in the opinions of patients?

(%; Aug. 2016; n=1,000)

On decisions about the coverage of drugs by public health insurance



Source: Health and Global Policy, 2016 Survey on Healthcare in Japan

② Comment

- ✓ Over 70% of respondents stated that public health insurance should cover high-priced drugs and medical procedures. In addition, most respondents said that some form of restriction should be in place on the rules or scope of usage for these drugs and procedures.
- ✓ In regards to restrictions on public health insurance use, different generations had different opinions on what restrictions should be put into place. Some in the private sector have voiced their concerns about delays in innovation and research development if the prices of new drugs are lowered. This time, three options including, “creating guidelines,” “making considerations for drug effectiveness,” and “limiting

use to certain age groups” were proposed as possible restrictions on costs. Options outside of these should also be considered, including the extent that these drugs contribute to complete recovery or remission. In addition, there is a need for further multi-stakeholder discussions.

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