

Hispanics: *A growing force in the New Health Economy*

Health Research Institute

In spring 2014, HRI and PwC's Consumer Intelligence Series set out to better understand Hispanic consumer attitudes and behaviors in the rapidly changing media, technology, and healthcare landscape.



Introduction

More than 10 million Hispanics are eligible to gain health insurance coverage under the Affordable Care Act (ACA) through the state health insurance exchanges or Medicaid expansion.¹ For businesses aiming to succeed in the New Health Economy, Hispanics represent unparalleled growth opportunities. (See HRI's essay on the [New Health Economy](#)).

But, if healthcare companies fail to “speak their language,” they will miss opportunities to capture the fastest growing demographic in the US and gain their customer loyalty.

In spring 2014, PwC's Health Research Institute (HRI) and *Consumer Intelligence Series* set out to gain a deeper understanding of Hispanic consumers and their health-related attitudes, preferences and behaviors.

While opportunities abound for both traditional and non-traditional healthcare companies, netting the Hispanic consumer and their dollar will not be easy.

Before devising strategies to win Hispanic consumers, healthcare organizations must first understand the basics about this important demographic. Following are the key insights gathered from HRI's research.

1. Non-traditional health businesses, or new entrants, may have an advantage reaching Hispanics: Perhaps more than any other consumer group. Hispanics are cost conscious and mobile savvy, and do not necessarily stay within the traditional US healthcare system for their care.

2. Healthcare companies looking to impress the Hispanic market will have to work harder to earn their trust: Hispanics are less likely to share personal health information than other consumers.

3. Strong Hispanic connection points may exist in cyberspace: Healthcare companies should consider tapping into existing social and mobile platforms that are popular with this group.

4. Healthcare companies with strategies for distinct Hispanic subgroups will increase customer loyalty: Healthcare organizations need to approach Mexicans, Puerto Ricans, and other Hispanic subgroups differently. They also need to understand generational idiosyncrasies and health habits that might be hard to change.

About this research

Hispanics are the fastest growing minority in the US and have the greatest purchasing power of any US ethnic group. For businesses aiming to succeed in today's economy, Hispanics represent unparalleled growth opportunities.

Through the ongoing Consumer Intelligence Series, HRI and PwC's Entertainment, Media, and Communications (EMC) practice collaborated to better understand Hispanic consumer attitudes and behaviors in the rapidly changing media, technology, and healthcare landscape. (Click here to read the separate report from EMC—[Mi Movil: Hispanic consumers embrace mobile technology.](#))

Channels and demographics

The research uncovered the similarities and differences between two distinct consumer segments—Hispanic and non-Hispanic consumers in the US—and included:

- A spring 2014 nationwide survey (in English and Spanish) of 500 Hispanics and 500 non-Hispanics ranging in age from 18-65
- Two Hispanic and two non-Hispanic focus groups with participants ranging in age from 25-59 in New York City and Dallas
- A social media listening campaign
- Interviews with industry professionals

Hispanics and health: Key research findings and recommendations

1. New entrants and non-traditional healthcare companies may have an advantage reaching Hispanics.

Perhaps more than any other consumer group, Hispanics are cost conscious, mobile savvy, and do not necessarily stay within the traditional \$2.8 trillion US healthcare system.

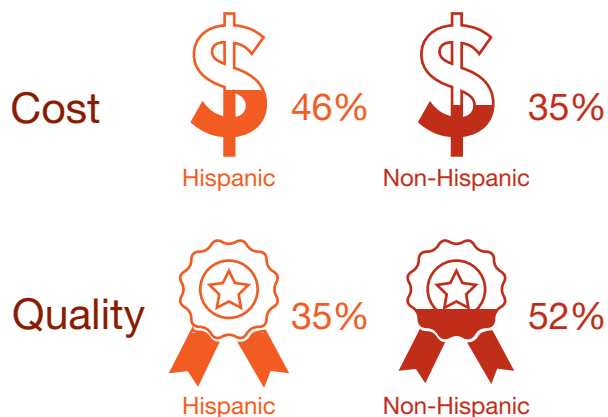
HRI research found that, on average, cost is more important than quality and convenience when Hispanics weigh their healthcare decisions, while quality is most important to non-Hispanics. (See Figure 1). While insurance status influences what Hispanics value most, insured Hispanics still place less importance on quality than do non-Hispanics.

Forty-three percent of Hispanics have delayed care due to cost at least once in the last year, compared to 35% of non-Hispanics, according to the survey. “I think Hispanic men have machismo, like we’ll just wait all night,” said one Hispanic focus group participant in Dallas. “We’ll be in pain all night and just wait for the doctor until the next morning.”

According to Pew Research, less than half of Hispanics say they have a regular doctor.² HRI found that the belief that “doctor knows best” is not always shared by this population, regardless of insurance status. Hispanics are less likely than other consumers to use

Figure 1: Hispanics value cost over quality when making decisions about care

When deciding where to seek healthcare, what is most important to you?

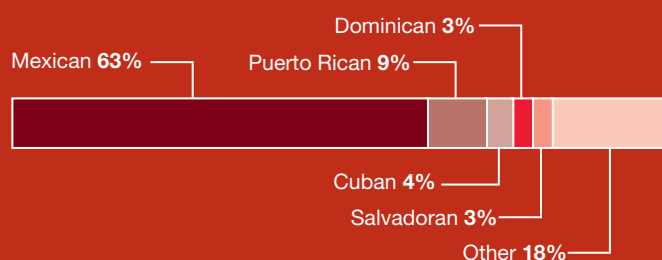


Source: HRI/EMC Hispanic consumer survey, 2014

¡Mucho gusto! Getting to know a growing consumer segment

“Hispanic” refers to an ethnic group including several subgroups. About 52 million Hispanics currently live in the US, comprising nearly 17% of the total population.³

Population breakdown by Hispanic origin



Half of Hispanic Americans live in three states (CA, TX, FL). Arizona, California, Colorado, Florida, Illinois, New Jersey, New York, and Texas have populations of 1 million or more Hispanic residents.⁴

Hispanics are the fastest growing minority group in the US. Since the 2000 U.S. Census, the Hispanic population has risen 43%, and projections indicate that it will reach 132.8 million—or 30% of the total US population—by 2050.⁵

More than 10 million Hispanics may gain coverage under the Affordable Care Act. Today, one in four Hispanics lacks health insurance, and Hispanics are more likely than all ethnicities to be uninsured.⁶

The Hispanic pocketbook packs a punch. US Hispanics had \$1.2 trillion in purchasing power in 2013, more than any other ethnic group.⁷

Diabetes is a primary health concern. The NIH estimates that 10% of Hispanic Americans are living with diabetes compared to 8% of the general population.⁸ By 2031, the CDC says 20% of the adult Hispanic population in the US will have diabetes.⁹

Figure 2: Hispanics often seek care in retail clinics

About how many times did you seek care for yourself at a medical clinic in a pharmacy or retail store in the past 12 months?



Source: HRI/EMC Hispanic consumer survey, 2014

a doctor as primary caregiver when facing a non-emergency condition, and they are more open to using community health clinics in their neighborhoods, non-traditional settings such as retail clinics, and alternative caregivers such as pharmacists. (See Figure 2). According to the survey, 66% of Hispanics say they primarily go to the doctor for non-emergency conditions, compared to 76% of non-Hispanics.

In some cases, Hispanic Americans may be carrying over behaviors learned in their home countries, where care is often delivered in less formal settings. “In many Latin American countries, pharmacies are on every street corner, just like liquor stores or McDonald’s,” said Elena Rios, M.D., president and CEO of the National Hispanic Medical Association. “They are open all day long and there is no appointment necessary. Pharmacists are considered trusted sources of information at the patient’s convenience. It’s a different way of getting taken care of...and it’s good enough for the people who need it.”

Hispanics surpass non-Hispanic consumers when it comes to using mobile devices. According to the survey, Hispanics led all other consumer groups in 23 out of 25 uses for mobile devices, including

checking news, shopping online, and the use of customer service apps. For healthcare, Hispanics were more likely to use an app or search the Internet for information about doctors and insurance companies than other consumers. Nearly one-fifth of Hispanics said they are already using an app or the Internet to make medical appointments; another 31% said they would be very willing to.

Hispanic focus group participants saw potential in the use of mobile health apps to send their health data directly to a physician. Several were already communicating with a doctor or other caregiver via email. In addition to their comments in the focus groups, a separate HRI survey in fall 2013 revealed that 45% of all consumers are willing to communicate with a caregiver by text message.¹⁰ Since 96% of Hispanics use their mobile phones to send and receive texts—compared to 92% of non-Hispanics—they may also be more likely to communicate health-related matters by text.

Recommendations for healthcare companies:

◆ Healthcare companies that partner to expand their understanding of and reach to Hispanics will likely be better off. “While each of the

regions Molina serves is very unique, we have an overall strategy that includes partnership,” said Ruthy Argumedo, associate vice president for community outreach at Molina Healthcare, a Hispanic-led company founded 30 years ago by the Molina family that offers managed care plans and medical clinics for low-income consumers. In 2010, the Hispanic Business Magazine recognized Molina as the largest Hispanic business in the US based on revenue and growth.¹¹

Molina creates links to large and small pharmacies to answer formulary questions and sponsor wellness programs. During Covered California—the state’s campaign to heighten awareness about its public health insurance exchange—Molina partnered with CVS Pharmacy to educate individuals about gaining coverage.

◆ Retail pharmacies investing in chronic disease management may be enticing to Hispanics. Ten percent of Hispanics are living with diabetes—compared to 8% of the overall population¹²—and the Centers for Disease Control and Prevention estimate 20% will be living with the condition by 2031.¹³

Hispanics may be more likely to use diabetes specialists strategically placed in their neighborhoods. At this year’s JP Morgan Healthcare Conference, Greg Wasson, CEO of Walgreen Company, described how the company is investing in advancing community pharmacy: “The average diabetes patient visits our pharmacist 30 times a year while they visit their primary care physician maybe two to four times a year...We’re enabling our pharmacists to spend even more time with their patients to help them understand the importance of taking their medications properly.”¹⁴

◆ HRI estimates that the ancillary health market of products and services—which includes mobile

apps—is worth \$267 billion.¹⁵ Companies should tap into Hispanics’ mounting purchasing power, ‘do-it-yourself’ mentality, and willingness to seek care in non-traditional settings. Look to this demographic to pilot mobile health apps ranging from diagnostics to chronic disease management. Hispanics may be the first adopters of these tools.

◆ Hispanics were more likely to download coupons to a phone than other consumers (25% compared to 17%). Opportunities exist for pharmaceutical companies and retail pharmacies to improve medication adherence by making prescription discounts accessible by mobile devices.

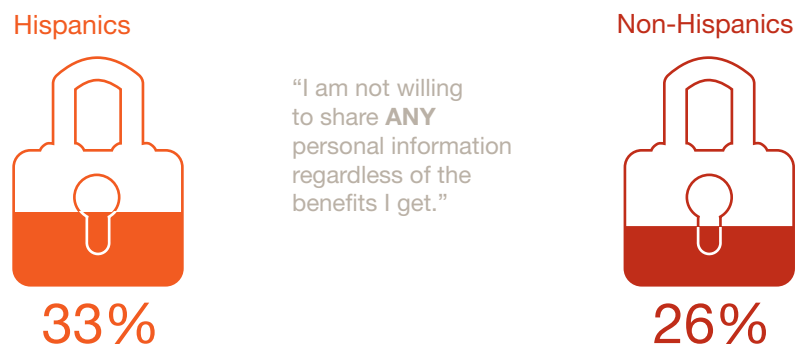
◆ Businesses looking to get into the mobile health app space might consider partnering with other mobile companies that have already gained traction with Hispanics, have a community orientation, and are looking to expand their services.

PaselaVoz, an SMS text service that sends traffic and community information based on a member’s zip code, has secured a half million Hispanic subscribers in five southern states during the past three years. The service averages 500-1,000 new subscribers daily. Community churches use the platform to send information such as audio devotionals and a call center manages incoming questions.

David Iberkleid, the company’s founder and managing director, believes one reason PaselaVoz has had success in building trust with

Figure 3: Hispanics are more reluctant to share personal information than other consumers

Do you agree with the following statement?



Source: HRI/EMC Hispanic consumer survey, 2014; survey participants who indicated they ‘agree’

subscribers is that the service is interactive. “If you put information on the TV or in the newspaper, you don’t have the opportunity to respond,” he said. The startup is planning to launch a mobile app that would offer a chat option.

2. Healthcare companies looking to impress the Hispanic market will have to work harder to earn their trust.

Hispanics are less likely to share personal information than other consumers. One-third of the Hispanics HRI surveyed—compared to 26% of other consumers—said that they are not willing to share personal information, regardless of benefits they might receive in return such as faster appointment scheduling or prescription discounts. Hispanic men are less willing to share than Hispanic women, according to the survey. “If

something is going on in your house, you don’t talk about it out of the house,” said a Hispanic woman from Dallas. “If somebody is sick with some kind of an illness, it doesn’t leave the house. Nobody needs to know that. That’s instilled in us since we’re little. It’s like you don’t go back to school and tell the teacher what’s going on at home. Never.”

Hispanic focus group participants described generations of mistrust of formal institutions such as the government and insurance companies. Trust is key, but the corporate world and government have failed to earn it. So has the health industry. “We want to know that it’s going to be safe, that you’re going to use that information for what you say you’re going to use it for,” said one Hispanic focus group participant in New York City. “In our culture, we believe a lot in the word... Trust.”

“We don’t have much, so what we have, we hang onto it,” added a fellow New Yorker.

However, the HRI survey suggests there is hope for cracking the privacy barrier. HRI research found that Hispanic consumers’ lack of trust may be fueled by information gaps about healthcare in general. “Even the concept of health insurance can

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In our culture, we believe a lot in the word...Trust.”

— New York focus group participant

be foreign to many Hispanics,” said Maria Beltran, California outreach coordinator for Young Invincibles, a national organization that represents the health interests of 18- to 34 year-olds. Nearly 60% of the Hispanics surveyed said that the amount of personal information they are willing to share depends on the company asking and a clear articulation of how the information will be used.

Trust begins with adequate, accurate, and comprehensive communication—such as making complex concepts like health insurance easy to understand and connecting the dots. And language gaps are not always the problem—focus

group participants said they would rather read information in English, since Spanish translations are so poor.

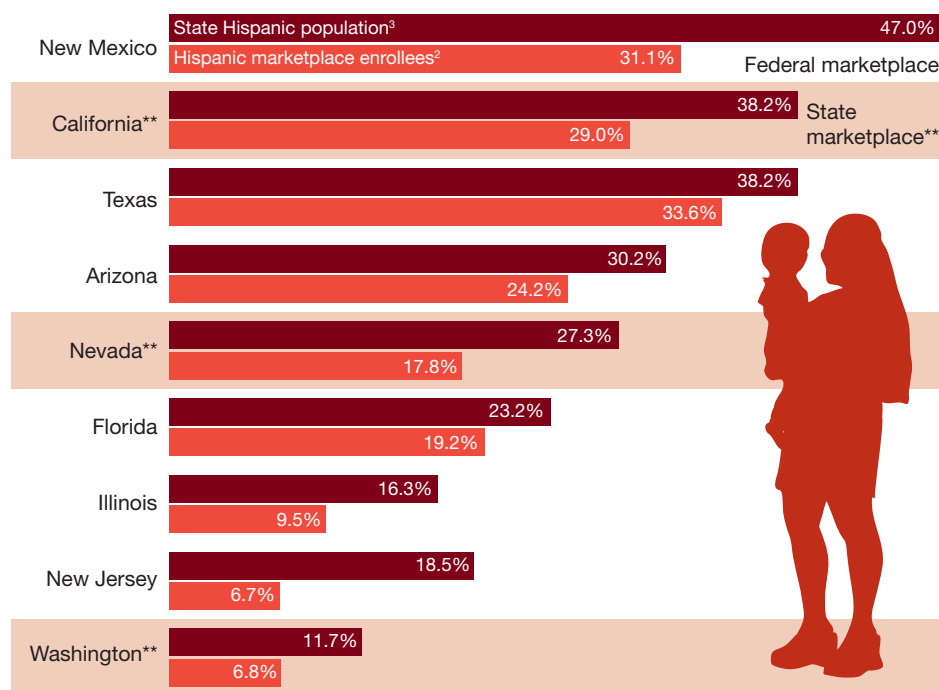
Very few of the Hispanic focus group participants were familiar with the term “health insurance exchange” compared to non-Hispanic participants. Just one-third of uninsured Hispanics have visited their state’s exchange website and less than half felt they understood the insurance options available. This may partly explain why Hispanic enrollment figures have largely missed the mark, according to data released by the Department of Health and Human Services. (See *Fast stats on Hispanic enrollment in the marketplace* below).

Interviews with industry professionals suggested that Hispanics are receiving only sound bites instead of detailed information regarding the ACA. Starting this year, most Americans without coverage will face a penalty. “It will be a wakeup call when Hispanics are filing their tax returns because they aren’t thinking about it now,” said Rios.

Reluctance to share personal information is reflected in clinical trial participation as well. Hispanics comprise less than 8% of clinical trial participants, nearly half that of African Americans. Participation in clinical trials for cancer—the leading cause of death for Hispanics—is even lower.¹⁶

Fast stats on Hispanic enrollment in the marketplace

At the time open enrollment in the health insurance exchanges—or marketplaces—began in October 2013, Hispanics represented 25% of the uninsured population eligible for coverage.¹ At enrollment close, Hispanics accounted for just 10.7% of enrollees in the federal marketplace.^{2} Some states fared better than others. For example, border states had the highest share of Hispanics shopping on the federal exchange. The states in the graphic to the right reported data on Hispanic enrollment.*



* The Department of Health and Human Services reports that 31% of enrollees did not indicate ethnicity.

** CA, WA, and NV are the only states participating in the State-Based Marketplaces (SBM) that publicly released ethnicity enrollment data.

¹ Gee, ER. ASPE Research Brief: Eligible uninsured Latinos. Office of the Assistant Secretary for Planning and Evaluation, Department of Health and Human Services (2014).

² http://aspe.hhs.gov/health/reports/2014/MarketPlaceEnrollment/Apr2014/Marketplace_StateSum.cfm

³ <http://quickfacts.census.gov/qfd/states/32000.html>

A shortage of Hispanic doctors, who often help recruit trial participants, may be partly to blame. “Most Hispanic doctors are so overwhelmed, they have no time for a side business called clinical trials,” said Rios. The Association of American Medical Colleges (AAMC) estimates that Hispanics comprise just over 6% of students graduating from US medical schools, far below the overall Hispanic population (16.7%).¹⁷

Recommendations for healthcare companies:

- ◆ Reaching Hispanics in or near settings where they feel most comfortable—such as churches, schools, or family-owned businesses—is crucial.

During open enrollment, Health Care Service Corporation (HCSC), which operates Blue Cross and Blue Shield plans in five states, piloted retail locations with bilingual staff in select Latino neighborhoods, opened a bilingual customer education phone line, and utilized mobile assistance centers (also known as pop-up retail).

With minimal marketing of the retail stores, the company had long lines of people seeking information. “It was almost all viral,” said Carlos García, director of demographic market segments. “As with any major purchase, consumers will weigh their options and may not purchase a product the first time online.”

Molina Healthcare has an information center in the San Bernardino mall to connect

community members with local food banks, healthcare resources, and other sources of support. To increase access to local hospitals, Goodwill, and grocery stores, Molina shuttles operate in communities with large Hispanic populations. Argumedo says that through such outreach, Molina hopes the community grows to “trust the health plan, trust Molina.”

EmblemHealth, a health insurer serving New York City, introduced EmblemHealth Neighborhood Care in 2013 by opening three walk-in sites in which individuals and families can speak to EmblemHealth professionals with ties to the community without leaving their neighborhoods.

- ◆ Reversing misconceptions and building trust begin with investing in a culturally competent and sensitive workforce. In the last few years, three new medical schools have opened in states with the largest populations of Hispanics. Four are under development. These schools are designed with the community’s needs in mind, with a major focus on educating physicians who are culturally sensitive to diverse populations, incorporating inter-professional education, and serving the medically underserved.

Florida International University graduated its first class of medical students last year. The medical school prepares physicians to care for South Florida’s diverse demographics, especially in Miami-Dade County, which has the third

largest Hispanic population in the country. Texas Tech University and the University of Central Florida opened new medical schools with similar objectives in 2006 and 2007.

The University of Texas System recently received approval to build a medical school in the Rio Grande Valley near the border that will focus on the greatest health needs of that community.

Francisco González-Scarano, M.D., dean and vice president for medical affairs at University of Texas Health Science Center at San Antonio, expects 50 students to enroll in at Rio Grande in its inaugural year. “There is resistance among Hispanic families to send their kids far away for school. Part of the concept at Rio Grande is that students will stay after their schooling to care for this community.”

The AAMC reports that nearly two-thirds of physicians that completed undergraduate and graduate medical education in the same state remained there to practice. Retention rates in California, Florida, and Texas were higher.¹⁸

However companies need additional strategies to extend caregiver reach if they are to succeed under new payment models that focus on outcomes and managing population health. They must bring cultural competence to a broader, non-Hispanic workforce through training programs and building relationships with Hispanic public health workers, dubbed ‘promotores’¹⁹ that help providers in underserved areas extend their reach and make more effective use of their time.

- ◆ To gain trust, businesses such as insurance companies need to ditch the sales attitude when dealing with the community. “It is the cultivation of a relationship that draws membership,” said Molina’s Argumedo.

*In the last few years, **three new medical schools** have opened in states with the largest populations of Hispanics. **Four** are under development.*

3. Strong Hispanic connection points may be in cyberspace.

Overall, Hispanics are heavier social media users than non-Hispanics. Hispanics also rely on these virtual networks when making healthcare decisions. (See Figure 4). Ingrained family values and long distance support systems appear to influence this trend. “Hispanics understand the value of social media and networking because their family unit is very strong,” said Rios. “What keeps it strong is the communication tools.” To build brand loyalty, health organizations ought to take advantage of settings and media that Hispanics are already using.

Hispanics also may be accessing information from non-traditional sources because of job responsibilities. The Bureau of Labor Statistics reports that 49% of Hispanics have more than one job compared to about 39% of whites.²⁰

“As Hispanics, we work more,” said one Hispanic focus group participant in New York City. “We’re out and about more, as opposed to [non-Hispanics], by 5:00 most of them are home. They’re in front of their Internet and stuff. There’s no need for them to use all this mobile technology or anything like that. Like most of them are usually home, where some of us work two jobs.”

Just as Hispanics use mobile devices to maintain contact and receive news on the go, it appears that social media also influences their healthcare decisions. According to the survey,

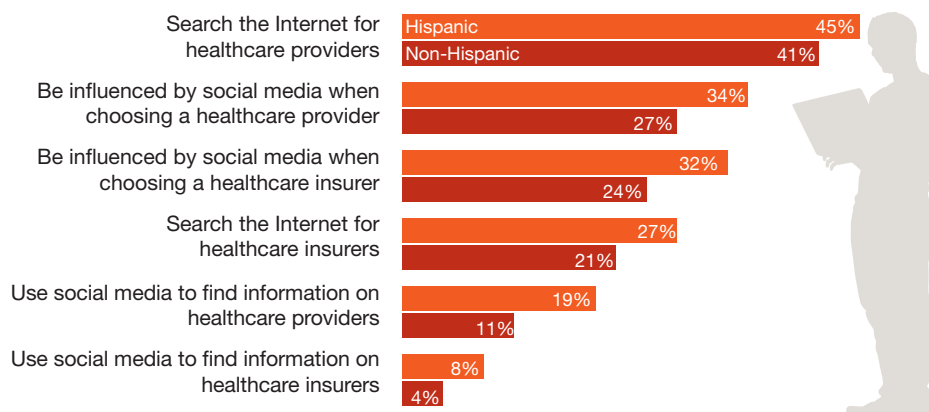
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We Hispanics, we like to communicate with each other...we’re all like family. He’s from Peru, I’m from Cuba...we’re more of brothers and sisters.”

— Dallas focus group participant

Figure 4: Across most age groups, Hispanics are more mobile and social media savvy

How likely are you to use technology with regard to healthcare and health insurance?



Source: HRI/EMC Hispanic consumer survey, 2014

more Hispanics than non-Hispanics use social media to find information about doctors and insurance companies, and Hispanics are more likely to be influenced by what they learn when making decisions about care and insurance plans.

Recommendations for healthcare companies:

- ◆ Instead of building new platforms to attract Hispanic consumers to them, companies should engage them on the websites they are already visiting. Molina Healthcare found it could use social media more effectively by partnering with Spanish news sites, where Hispanics were already active. “Some Spanish news stations post health questions on their Facebook pages and our doctors respond with advice for topics like securing health insurance coverage to flu season

and breast cancer detection,” said Sunny Yu, who is responsible for public relations and community projects at Molina.

“Personalismo”²¹ may also play a role. “Hispanics tend to rely on well-known figures, for example a TV doctor, for trusted information,” said Marcela Gutierrez, who oversees community engagement at the Center for Community Health at the University of North Texas (UNT) Health Science Center.

Baylor Healthcare also has a presence on websites with social forums. “Females are the people in the house with the most health purchasing power, so we utilize applications such as Pinterest to post healthy recipes, home remedies, and who to call in case of a health emergency,” said Stacey Guillen, oncology program coordinator at Baylor All Saints Medical Center at Fort Worth.

Baylor also uses Google+ Hangouts to host virtual health panels with physicians and consumers, and then posts the videos across all of Baylor’s social media channels. Medical professionals and patients contribute content to Baylor’s Scrubbing In blog and participate in Twitter chats.

- ◆ Businesses might also consider collaborating with or monitoring online support groups to understand Hispanics' most common health-related issues. Nearly one-fifth of Hispanics HRI surveyed said that they use these groups to learn about health conditions and treatment options, twice as many as non-Hispanic consumers. One-quarter of uninsured Hispanics use these forums.

4. Healthcare companies with strategies for distinct Hispanic subgroups will increase customer loyalty.

Hispanics are not a monolithic group. Businesses need different strategies for reaching different ethnicities and generations, and for addressing ingrained habits that are tough to change. They also need to be mindful of how they approach Hispanics who primarily speak Spanish in the home (22%, according to the HRI survey). The survey revealed differences in how these subgroups interact with the health system. (See Figure 5).

Hispanics appear more likely than other consumers to live in multi-generational households and may

Some Hispanics cross borders to seek care



Sharing medicine? We go to our countries and buy whatever. Like he goes to Peru and gets his teeth done, I go to Puerto Rico and I'm going to stock up on antibiotics."

—Dallas focus group participant

be helping manage others' health conditions—quite possibly with guidance from a first generation immigrant who lacks familiarity with the US health system. Twenty-two percent of Hispanics said they live with a parent, sibling, grandparent, or other relative, compared to 15% of non-Hispanics. "So much of your healthcare values are handed down from generations," said UNT's Gutierrez.

Regardless of income, education, and insurance status, some Hispanics would rather cross borders—particularly from Texas to Mexico—to seek care.

A study by the Department of Health and Human Services Agency for Healthcare Research and Quality found that almost two-thirds of Hispanics living in Texas border towns said they crossed the border into Mexico to purchase medications, see a doctor or dentist, or receive inpatient care. While insurance status was one reason for traveling to Mexico for treatment, Hispanics surveyed also cited dissatisfaction with the quality of care in the US.²²

Focus group participants and interviewees said that with less regulation across the border and more medicines available over the

Figure 5: How subgroups of Hispanic survey respondents said they interact with the health system

What is the primary language spoken in your home? What do you consider your Hispanic origin?



Source: HRI/EMC Hispanic consumer survey, 2014

counter, some Hispanics travel to their birth countries to buy lower-cost medications for their entire families or have family members ship them. “Sharing medicine? We go to our countries and buy whatever,” said one Hispanic woman in Dallas. “Like he goes to Peru and gets his teeth done, I go to Puerto Rico and I’m going to stock up on antibiotics.” For some Hispanics, awareness of potential risks such as medication expiration, improper dosage, and adverse drug interactions, is low.

Recommendations for healthcare companies:

- ◆ Healthcare companies should make the US health system more accessible for Hispanics. Hiring Hispanic patient navigators may help win the attention of the family’s “chief pharmacist”—generally a mother or grandmother—and

educate them about the system of checks and balances available in the US health system. The key message: Take care of your family.

- ◆ Strategies that address the entire family unit resonate well with Hispanics, who typically perceive family members as a support system and source of advice—a concept known as ‘familismo’.²³

“It’s not just how we work with the patient, but also how we work with their family,” said Baylor’s Guillen. Guillen, who is also the board chairwoman of the Hispanic Wellness Coalition in north Texas, said adult children play a major role in helping their foreign-born parents with treatment decisions. “We have found we need to complement standard treatment with other things we know they value like chaplaincy and home remedies.”

- ◆ Healthcare businesses need to train employees to gain information related to origin, family status, and language spoken in the home to help them respond to Hispanic patients’ needs. “Even though the buzzwords are there, there is a deficit in tools for caregivers,” said UNT’s Gutierrez. One such tool, Gutierrez explained, is a list of resources in the community with which caregivers can collaborate and patients can be referred.

- ◆ Companies serving Hispanic communities should partner with public health organizations on outreach about safe medication practices, prevention and healthy living.

Closing thoughts

Hispanics are the fastest growing minority in the US, and census projections indicate they will comprise 30% of the total US population by 2050.²⁴ Hispanics are already the majority ethnic group in New Mexico²⁵ and they are expected to reach the same status in California this year.²⁶

Hispanics have growing buying power, but companies need focused strategies to capture this largely untapped source of revenue. More than 10 million Hispanics may gain coverage under the 2010 ACA during the next several

years²⁷—a sizable opportunity for both traditional and non-traditional healthcare companies, but only if they can win over this important group.

Hispanics care about cost and are open to new ways of getting care, making them a critical customer base in the value-based New Health Economy.²⁸ They rely heavily on a tight network of family and friends for health-related advice and information. They are mobile and social media savvy. But they are also more likely than other consumers to postpone care and forgo preventive health services.

Once businesses start “speaking their language”—literally and metaphorically—and gaining their trust, the health sector should be ready to engage Hispanics in prevention and wellness, and help them adhere to medication and treatment programs.

Partnerships with the community-based organizations that they already trust will be essential to extending companies’ future success in this market.

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