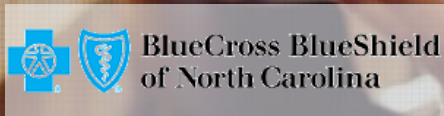


A photograph of an elderly couple in a kitchen. The woman, on the left, has short white hair and is wearing a grey cardigan over a floral top. She is laughing and looking towards the man. The man, on the right, has white hair and glasses, and is wearing a grey sweater over a light blue shirt. He is also smiling and looking at the woman. The background shows a kitchen with wooden cabinets and a sink.

MEDICARE ADVANTAGE FOCUS GROUPS

PREPARED FOR AND IN
COLLABORATION WITH:



JUNE 2019

METHODOLOGY

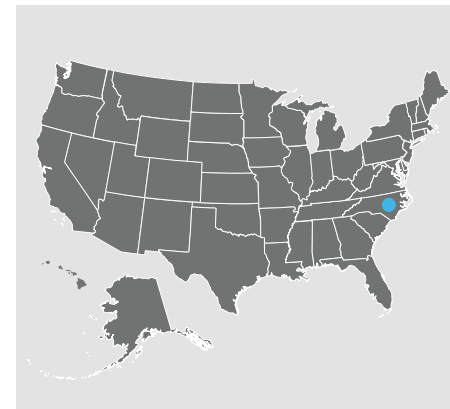
OBJECTIVES AND METHODOLOGY

OBJECTIVES:

- The Medicare Stars team relies on the results of **quantitative studies** conducted by independent parties to **understand how Stars are assigned to Blue Cross NC** (i.e. CAHPS, HEDIS, and HOS). These quantitative studies **allow limited customization** of questions and **provide minimal actionable insights**.
- The purpose of **focus groups** is to take what the Medicare Stars team has learned from the surveys further, by asking both Blue Cross NC Medicare Advantage members and non-members customized questions to **gain actionable insights that the surveys do not offer**. The overall goal is to **assist in the improvement of member experiences and Stars ratings**.

METHODOLOGY:

- Groups were held in **Raleigh, North Carolina** on Monday, June 3, 2019
 - Group 1: Medicare Advantage Members Age 73 – 85: 8 respondents participated
 - Group 2: Medicare Advantage Members Age 65 – 72: 8 respondents participated
 - Group 3: Medicare Advantage Members Age 73 – 85: 9 respondents participated



TARGET AUDIENCE

SCREENING SPECIFICATIONS:

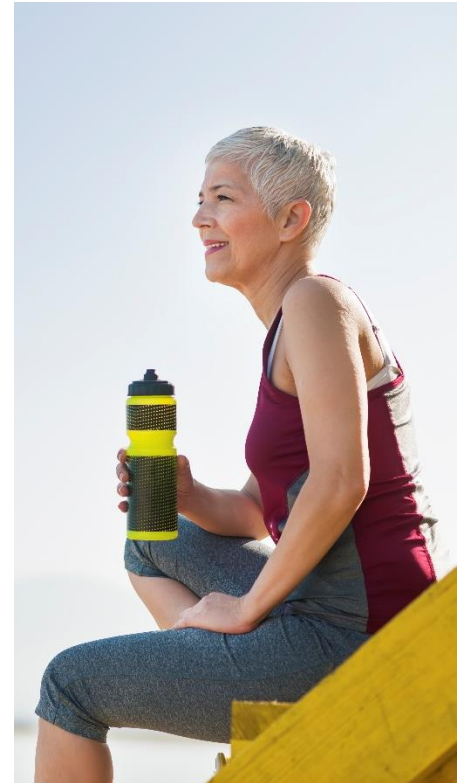
- Mix of Gender, Age and Ethnicity
- Not competitively employed
- No past 3 month participation
- Age 65 – 85
- Decision maker regarding health insurance
- Medicare plan purchased on own through insurance company
- Medicare Advantage plan with Part D
- Mix of those members with Blue Cross NC and with competitive plans
- Used their health insurance plan in the past year
- Recruit a mix of some members with conditions, such as diabetes



EXECUTIVE SUMMARY

KEY LEARNINGS: HEALTH AND WELLNESS

- The consumers with Medicare Advantage plans that participated in groups are an **active, proactive and adventurous** group of individuals with the **freedom, means and network in place to make caring for themselves relatively easy**
- Managing their **overall health and wellness is a priority** as they recognize the importance of being **able to mentally and physically keep up** with their family and peers... plus, they want to **prolong their lives and feel good** doing it
- **Enjoying themselves is also paramount**, whether that means doing the things they love, spending time with the people they love or devoting their time to their faith and to helping others. They **seek and find inspiration** all around them
- There is a **strong awareness that health and wellness encompasses the physical, mental and spiritual**, so they take care to keep their body, mind, and spirit fit and agile through a variety of activities, habits and practices



KEY LEARNINGS: RESOURCES

- The **breadth of resources, varied support network and interest in learning/research** further demonstrates the consumers' proactivity and involvement in self-care
- **Each resource played a particular role** in their overall care and they lean into each for different reasons:



Friends, family and partners are the primary resource for emotional, physical and organizational support



Their **PCP plays an essential role** and is often seen as a partner in caring for their health and wellness. The PCP tends to have the strongest influence, driving action and problem solving. Personalized care, familiarity and access are key to fostering this relationship



Self-reliance is huge for these consumers, who recognize that *"no one else is going to do it for me"*



The access, knowledge and judgement-free nature of **Pharmacists** makes them a key resource for many who rely on them for questions both big and small



Specialists were a valued resource because, simply put, they are seen as an expert. Trust is bolstered if they are referred by a friend or the PCP. Respondents were split as to whether they trust the Specialist over the PCP



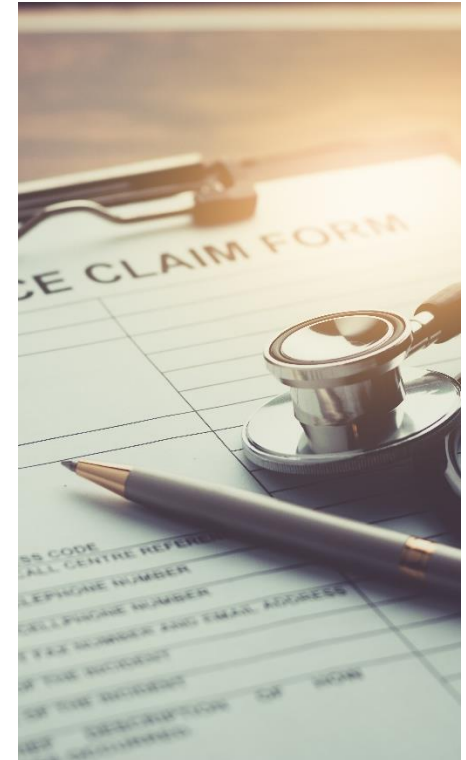
Trainers are trusted by some who appreciate their knowledge about the body and turn to them to keep them strong and keep them moving



The **insurance company** played a lesser, yet still important role, in caring for ones' health by making it easy to access and connect to proper care, medication and various medical advancements

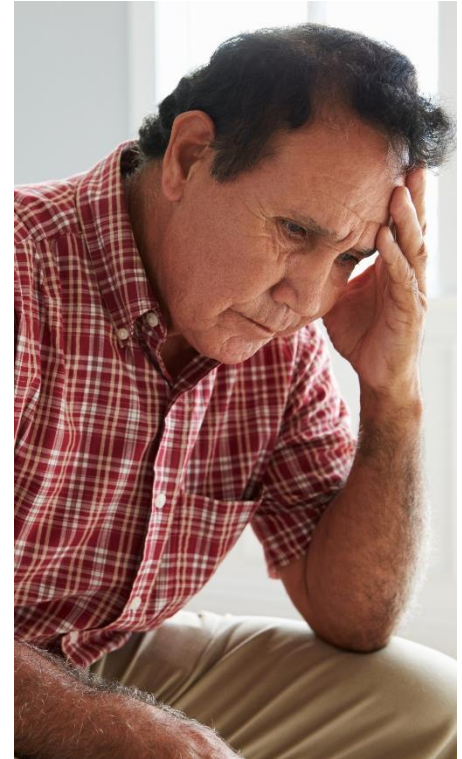
KEY LEARNINGS: INSURANCE CARRIER

- Regardless of who their carrier is, consumers often believe that **insurance carriers overstep their bounds outside of managing logistics and payments** and there are several key reasons why this is irksome
 - Too much involvement in the management of ones' health feels out of place and unhelpful because it often interferes with physician recommendations and plans of action – coverage for tests, procedures and Rx tend to get turned down, which confounds and infuriates consumers
 - Involvement, benefits or perks cause many to worry that their premiums will increase – they believe that it's not really a 'benefit', rather it's a way to justify rising costs
 - Difficulties understanding coverage, poor customer service and confusing/overly-complicated mailings and communications are also frustrating
- Many believe that bringing more of a **personalized, human touch** and **making coverage/information more accessible** would **increase engagement and participation** in programs
- The role of insurance carriers, knowledge of programs and view of challenges are **consistent across participants**, regardless of their carrier



KEY LEARNINGS: BARRIERS (CHALLENGES)

- While barriers to managing health and wellness exist, these consumers with Medicare Advantage plans **find them relatively easy to overcome, likely due to their location (excellent care is easily accessible), vitality and desire to be healthy over the long term.** Now that they are older and (mostly) retired they have the freedom and time to devote to caring for their health and wellness
- **Time, money, physical limitations, organizational red tape** (e.g. navigating the system, understanding coverage, making appointments, lack of preventative care/coverage), **lack of desire** and **sheer laziness** are the main barriers/challenges to consistently doing more
 - The most challenging activities for consumers are the ones that require consistent, long-term effort and discipline – exercise, managing chronic conditions and eating well
 - The often high cost and challenges of scheduling specialist and specialty (e.g. eye, dental, foot, mammogram) appointments make them ‘somewhat challenging’
 - Time and effort required to schedule wellness visits sometimes get in the way of making them happen but they are often regarded as ‘somewhat easy’
 - Activities which require less effort but show a high, tangible rate of return are seen as ‘easy’ to perform consistently (getting a physical, refilling/taking Rx, making PCP appointments)
 - Plus, doctors tend to limit the amount of Medicare patients they have, similar to Medicaid



KEY LEARNINGS: OPPORTUNITIES TO IMPROVE INSURANCE CARRIER-CONSUMER RELATIONSHIP

MAKE MAINTAINING HEALTH EASIER BY ADDRESSING KEY CHALLENGES/BARRIERS:

- **Physical wellness:** Silver Sneakers, incentives for exercise logged, exercise related perks (e.g. exercise gear), incentives for weight management
- **Diet:** Condition and need-specific recipes (e.g. cooking for one, cooking for diabetes, etc.), reward coupons for fresh produce
- **Extend coverage:** include coverage for 'essentials' like dental, eye, foot, mammogram, prostate screenings and better Rx coverage
- **Easier appointments:** Seamless digital/phone appointment scheduling
- **Transportation vouchers:** for lower income, less mobile individuals (not represented in these groups) and for those who need transportation home from mild procedures

MAKE CHRONIC CONDITION MANAGEMENT SIMPLER:

- **Condition management tools:** Calendar of important tests/procedures, managing time, medication tracking, diet/exercise and mindset tips



KEY LEARNINGS: OPPORTUNITIES TO IMPROVE INSURANCE CARRIER-CONSUMER RELATIONSHIP, CONTINUED

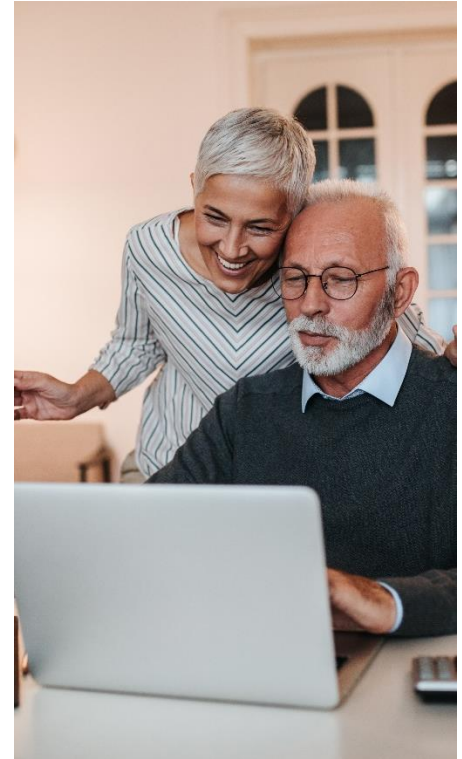
EDUCATE CONSUMERS:

- **Offer resources to answer key questions:** Whether more knowledgeable staff, information databases or informative newsletters, consumers are hungry for information, tips and hacks
- **Inform about incentive/reward programs:** educate and remind consumers about options and incentives either through the PCP, PCP staff or **succinct** communications (digital, email, newsletter)

HELP FORGE CONNECTIONS:

- **Be a conduit:** Offer community meet-ups, seminars, volunteer opportunities and suggestions on how to stay socially active, informed and connected

*Note: sentiments are similar among consumers regardless of insurance carrier



APPROACH TO HEALTH AND WELLNESS

PASSIONATE ABOUT LIVING THEIR BEST LIFE NOW AND IN THE FUTURE



- Consumers with Medicare Advantage plans are an **active, proactive** and **adventurous** group committed to doing everything possible to **enjoy their retirement** (or semi-retirement). They have the **means** and the **support network** in place to **care for themselves** and aren't shy about **focusing their attention and resources on their health and wellness**
- Most are **retired** and a handful are **cutting down on their work schedule**, whether that means working one part time job instead of two, taking temp work or simply doing seasonal (e.g. tax) work



- Overall, **they spend their time by doing what brings them joy** - most notably being with family and friends, reading, exercising, gardening, traveling, volunteering and antiquing
- Inspiration comes in many forms**, frequently by connecting with loved ones (e.g. grandkids, children and friends), being involved in their faith, hobbies and finding strength in the energy and spunk of young people

HIGHLY PROACTIVE AND DEDICATED TO THEIR HEALTH AND WELLNESS

- **Health and wellness is paramount** – consumers recognize that *“without it, you have nothing”*
- As such, **they do everything they can to maintain – and improve** upon in some cases - their current state of health



My philosophy is doing what's necessary to maintain what you can

- *“Aging gracefully and being healthy”*, issue avoidance and *“being able to live every day to the fullest”* are a driving force in all of their lives

- Some consumers have been proactively caring for their health since they can remember but **most experienced a trigger**, which inspires them (or forced them) to be more proactive
 - High blood pressure, breast cancer, diabetes, eating disorders, heart disease, the loss of friends and family members are all wake-up calls. The desire to physically and mentally keep up with others is also a strong motivator
- A handful admit that caring for their health and wellness is a **“constant lifetime struggle”** but one that is **worth pushing through**. However, most believe that the end result is desirable (and necessary) enough that they are willing to put in any and all effort

MOST HAVE A HOLISTIC APPROACH TO HEALTH AND WELLNESS

There is a strong awareness that health and wellness encompasses both the physical, mental, and spiritual, so consumers take care to keep their body and mind fit and flexible through a variety of activities, habits and practices.

HOW THEY CARE FOR THEIR BODY:

- Eating well - by including more healthy foods and limiting fats, pastry, sweets
- Exercising; moving, mall walks, gym, Silver Sneakers
- Technology (Fitbit, Apple watch)
- Make and keep doctor appointments

BODY



HOW THEY CARE FOR THEIR MIND:

- Socialize, maintain friendships, love and be loved
- Travel
- Reading, do puzzles, etc. to keep their mind sharp
- Helping others/volunteer
- Have *"me time"*

MIND



HOW THEY CARE FOR THEIR SPIRIT:

- Find balance – mindfulness and meditation
- Faith
- Family, friendship and community
- Stay adaptable (mentally and physically)
- Be involved in the everyday, living in the moment and appreciating the everyday

SPIRIT



KEY RESOURCES FOR SUPPORT

PROACTIVITY STARTS WITH BEING WELL INFORMED, WELL CONNECTED AND WELL SUPPORTED

- These consumers demonstrate their **proactive nature** via the **breadth of their support network** and understanding the importance of having – and using! – various **supportive resources** to care for their health and wellness
- Regardless of which support elements they rely on most heavily, these consumers **do their best to stay informed** by reading newsletters (Tufts, Harvard), magazines (AARP), listening to programs on the radio/TV, Googling (a lot!) and attending online meet-ups to learn more and get support
- Being informed, aware and on top of their own ailments allows them to **better maintain their health and wellness and feel in control**
- Several noted that **programs to educate and reward younger consumers** on proactive health management would be **more beneficial than trying to change behaviors and habits of older individuals**



FRIENDS, FAMILY AND BEING THEIR OWN NORTH STAR ARE FOUNDATIONAL

- Many **rely primarily on the support of others** including their spouse, family, *“nagging children”*, support groups and friends to keep them honest (e.g. doing what they need to do in terms of diet, exercise, medication), keep them organized, help them stay on track, take them to and from appointments, inform them of hereditary issues, be a sounding board and simply talk through challenges
- The **more proactive consumers rely most heavily on themselves**, recognizing that, at the end of the day, **they are responsible for their own health** and *“no one can do what it takes to stay healthy better than me”*
- The **intrinsic desire to “live right and live well” drives them to action** and strongly motivates them to stay committed



PCP PROVIDES CONTINUITY, FAMILIARITY AND DIRECTION



- Primary Care Physicians are **essential to caring for health and wellness** and many look to them as a **go-to source** of wisdom, advice and an overall plan of action. Critically, **they feel seen and known by their PCP** and believe that they **truly have their best interest at heart**

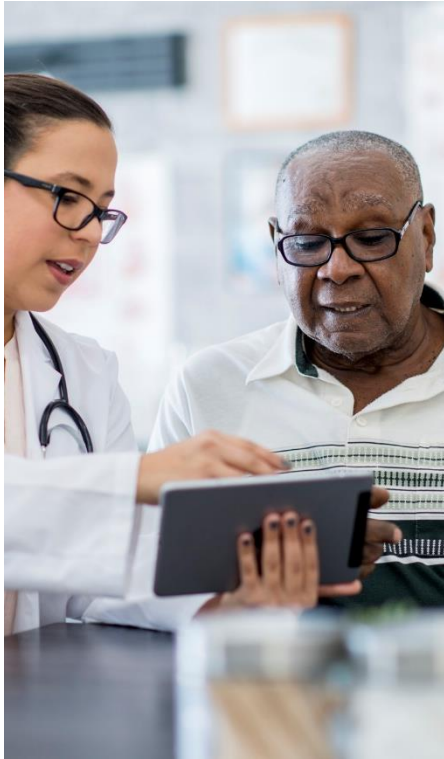
“

“My PCP keeps me honest about my health”

“We have a relationship – he knows me, he knows my body. I trust him implicitly”

- Most believe that their physician goes *“above and beyond”* and *“genuinely cares”* about them, taking their time to understand challenges, problem solve and provide solutions and support

PCP PROVIDES CONTINUITY, FAMILIARITY AND DIRECTION (CONT'D)



- For most, the **PCP is easily and readily accessible** via e-mail, text, phone, my chart portals and even in person, which allows them to truly lean into the relationship and feel more connected
 - Preference is individualized with many agreeing that digital access is key in this day and age, while others appreciate the personalization, depth of detail/information that you can only get via a phone call
- The **lack of an accessible follow-up resource** for details of what they need to know if they “*forget after an appointment*” and don’t believe it’s important enough to “*bother*” their doctor with (e.g. what to expect and how to prepare for a procedure) frustrates some
- Some have a **less-than-ideal relationship** with their PCP because either they’ve **had to change practices or their physician retired**. In these cases, they realize they need the time to develop familiarity and trust... and many lament that, especially with younger doctors, “*they don’t do things the way they used to*”

LESS CONSISTENTLY ENGAGED PILLARS OF SUPPORT ARE STILL HIGHLY CREDIBLE

- **Pharmacists** are also seen as **key players** to a handful of consumers who appreciate that they are an **accessible, judgement-free and informed** resource that has records of their prescription history, often gives seasonal shots and is attentive to their questions. Their accessibility and knowledge makes them a valuable and trusted resource



"I can go in anytime, talk to my Pharmacist. He's knowledgeable about my medications and can answer my questions big or small"

- **Specialists** are a **trusted resource** for many because, simply put, they *"know a hell of a lot more than you do."* Seen as the **expert or end-all-be-all** to many, there is an **inherent trust** in specialists as they are focused on specific ailments, conditions and procedures. This trust is further bolstered if the Specialist is referred by their PCP or a friend
 - The main break in trust comes when the Specialist and PCP have different opinions. In these cases, consumers are more likely to side with the PCP because of the familiarity and personal connection. When a lack of trust or familiarity exists with the PCP, the Specialist is often held in an even higher regard
- **Trainers** are also an **important resource** to fostering health and wellness. Their **knowledge of the body** along with **personalized, attentive care and awareness and familiarity** with an individuals strengths and limitations make them invaluable to some

MANY FEEL INSURANCE CARRIERS HAVE THEIR PLACE... AND SHOULD REMAIN THERE

Insurance carriers play an important role in the management of health and wellness... But consumers place them in a very narrow box of providing access and paying bills... other activities often felt unwarranted or unnecessary

- The insurance company plays a **lesser – yet still important role** – in caring for ones' health by **making it easy to access and connect** to proper care, medication and various medical advancements
- Many feel that the insurance carriers role should **focus solely on the logistical and monetary elements** of health and wellness and **not go any further**
- The main reason for this is that any additional involvement, benefits or perks offered raise the alarm bell that it **will increase premiums or that they “will pay for it somehow”**
- Essentially, there is a firm belief that **insurance companies are money motivated and self-serving**
- Too much involvement in the management of ones' health by the insurance carrier is also **unwanted and unwarranted** to many who believe that it's “not their place” to give medical advice, suggest or deny tests or procedures

“

“They’re not qualified to give advice or monitor my health – they don’t know me personally or know my unique health conditions

I find it shocking that my health insurance company can deny a test my doctor wants me to have. They don’t have an MD – they have no right”

CLEAR, SUCCINCT COMMUNICATION IS OFTEN LACKING

Some challenges with insurance carriers (aside from the typical frustrations of cost and perceived lack of transparency) include challenges understanding coverage, poor customer service and confusing (sometimes unreadable) communications.



DIFFICULTY UNDERSTANDING COVERAGE:

- Consumers often struggle to find out which tests and procedures are covered
- Some have challenges with prescription coverage for their medication tier
- Plus, the often “massive” coverage books/mailings are “confusing” and “hard to read”



POOR CUSTOMER SERVICE:

- With exception, there are frustrations about the lack of transparency and meaningful assistance provided by customer service representatives
- Most complaints are about not getting answers or consistent information
- Reaching out is a pain in the neck –
they’re condescending or you’re put on hold or given the run-around



LONG/CONFUSING COMMUNICATIONS

- Mailings are the main culprit, which many admit to not reading because they “rarely provide anything of value”
- Consistent with how they like to engage with the PCP, preference is for largely personalized - some prefer text/email, others the more traditional route of phone calls or succinct mailings

It’s important so I always read it but it could be a little simpler and more easy to understand

I’m not blind but it’s in 25 point. There are 7 pages, one of which is left intentionally blank – it’s wasteful,

ADDING HUMANITY TO THE INSURANCE CARRIER CAN HELP

Consumers have several suggestions as to how to bring some humanity to the insurance carrier and help them get the most out of their plan:

- 01 PUBLISHING SOME OF THEIR VALUABLE DATA IN EASILY DIGESTIBLE WAYS:** Many think that because insurance carriers collect subscriber information on illnesses, treatments and outcomes from a vast and varied audience, they can (and should) become a hub of useful information for consumers to learn from. Consumer preference is to be able to access the database to find answers easier than they do with Google.
It would be a more straightforward way to search. I think I'd get a few helpful answers instead of so many unhelpful ones.
- 02 MAKING IT EASIER TO GET THE 'RIGHT' ANSWER:** Having more adept customer service representatives via the phone and/or web portal could help to get more timely and accurate answers to questions. Frustration with being put on hold or getting different answers from different folks is talked about often in regard to healthcare. This is primarily the case for the insurance carrier and Specialist who are less familiar to Medicare members.
- 03 CREATE AN EASY-TO-READ NEWSLETTER WITH IMPORTANT INFORMATION:** Heavy text within mailings is often **not read**, which makes some feel guilty because they know they "should" read communications from their insurance carrier. Bullet points/quick bites of information in the form of a newsletter is preferred for ease of reading and comprehension. Actionable and helpful tips on how to be proactive and manage key concerns are sought after

ADDING HUMANITY TO THE INSURANCE CARRIER CAN HELP, CONTINUED

04

MAKE IT EASIER TO UNDERSTAND BENEFITS, COVERAGE AND AVAILABLE PROGRAMS. ALSO, MAKE PROGRAMS MORE MEANINGFUL: Most currently find out about benefits/rewards programs during their yearly coverage renewal but are easily overwhelmed and don't often retain all of the information. Some Medicare Advantage members with Blue Cross NC were completely unaware of the Wellness Visits and Rewards Programs. Raising awareness of incentive/reward programs via the PCP (or nurse/staff at their office) is an ideal way to inform members about valuable programs from a trusted resource. Sending out **succinct** communications (from the insurance carrier) via text, email or newsletter can also better inform them of these elements. It's important to note that rewards programs suffer from low awareness and limited knowledge of the available benefits. When exposed, many found them intriguing but weren't sure that the effort to report behaviors was 'worth' the reward. Additional high value/relevant rewards could increase motivation to participate. One consumer-generated suggestion is to 'pay it forward' by donating rewards to individuals or organizations who are less fortunate. Not only would they feel better doing this, they'd feel better about their carrier

05

MAKE IT MORE COMPLETE AND THEREFORE MORE UNIQUE: When renewing coverage, ensuring that their current PCP is in network, having a low/affordable monthly fee, decent Rx copays and coverage for any chronic conditions are key. Coverage of preventative care, such as eye, dental, foot care and alternative remedies (acupuncture, chiropractor and massage) would be highly differentiating. Rewards programs are a nice-to-have but won't make or break the decision of which plan to choose. That being said, incentivizing for maintaining weight or reaching an exercise goal would be beneficial and motivating and could be considered

KEY HEALTH AND WELLNESS ACTIVITIES... AND THEIR BARRIERS

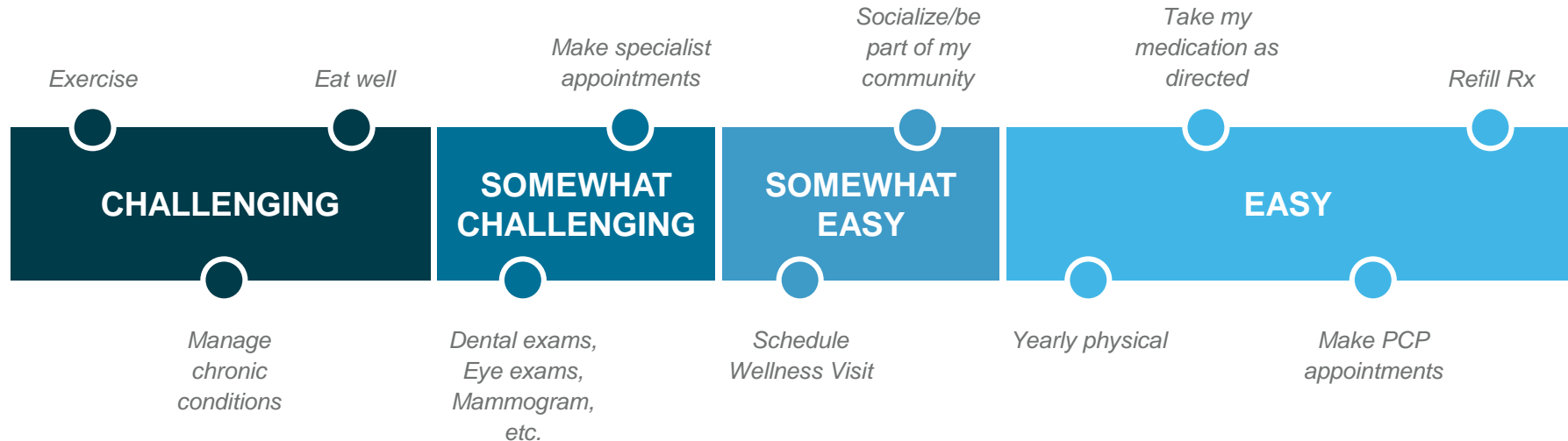
BARRIERS AND CHALLENGES EXIST BUT MOST WERE SURMOUNTABLE



- This particular group of consumers **have a strong intrinsic desire and motivation to be as proactive as possible** about their health and wellness. While they face challenges, they **typically find 'hacks' or ways to overcome them**
- The most pressing challenges and barriers to doing more to care for health and wellness are **time**, **monetary challenges and physical ailments**
- **Organizational red tape**, including not always understanding how to fully navigate the insurance system and the overall lack of preventative care (e.g. doing away with prostate screenings, not covering alternative care) are also key barriers – and a **major frustration** - for some

MOST FIND IT RELATIVELY EASY TO CARE FOR THEIR HEALTH AND WELLNESS, WITH A FEW EXCEPTIONS

When asked to rank various health and wellness activities and actions based on how challenging or easy they are, there were many consistencies. The majority of the actions are considered 'easy' for these active, proactive consumers who have the finances and support to truly care for their health and wellness



CHALLENGING ACTIVITIES: LONG-TERM DISCIPLINE AND EFFORT REQUIRED



EXERCISE

Barriers: Not enough time, feeling lazy/unmotivated, the fact that it isn't always enjoyable and physical/health limitations

Hacks/solutions: Schedule time to exercise and/or get up early/get it done, get an 'exercise buddy' for culpability, modify what you're doing to address limitations, join a gym/Silver Sneakers, get a trainer, use technology to monitor activity/inspire movement, think about motivators like long-term health, the benefits of staying active and incentives/rewards

Opportunities: Continue to promote and offer Silver Sneakers, consider offering incentives for exercise and/or exercise related perks e.g. yoga ball/mat, etc.



MANAGE CHRONIC CONDITIONS

Barriers: The restrictive nature and emotional toll of their chronic condition can cause consumers to feel a lack of control/ability to make a difference, the overall time involved (taking meds, going to appointments) can lead to apathy

Hacks/solutions: See doctors and specialists to maintain where they are health-wise, stay in-tune with their body to realize how they feel when they are/are not on top of it

Opportunities: Consider creating programs specific to chronic condition management including appointment calendars, medication tracking, tips and hacks for diet, exercise, mindset, etc.



EAT WELL

Barriers: Limited time or desire to cook, not wanting to cook for one, discipline/prefer unhealthy foods

Hacks/solutions: Prepare more simple meals, go to the Whole Foods bar or order take out

Opportunities: Room for health insurance carrier to make a difference by releasing a blog/newsletter with recipes specific to various needs (cooking for one, cooking for certain health issues, quick meals) or incentives for weight control

SOMEWHAT CHALLENGING ACTIVITIES: COST AND SCHEDULING GET IN THE WAY



MAKE SPECIALIST APPOINTMENTS

Barriers: High cost (often a high copay of \$50 and sometimes it's not covered), lack of familiarity with the doctor, remembering to make appointments

Hacks/solutions: PCP helps set up the appointment, get a referral from PCP or friends to bolster trust in the unknown

Opportunities: Make it easier to make appointments either via the PCP or digitally. While transportation was not usually an issue for this group of consumers, transportation vouchers were appealing for others... and for some who thought it would be helpful following a procedure (vs. having to take an Uber if no one is available to drive them). Chiropractic care is an important preventative measure and wellness solution that many want covered



DENTAL EXAMS, EYE EXAMS, MAMMOGRAM, ETC.

Barriers: Often not covered so cost is an issue, challenging to schedule due to wait times and being put on hold

Hacks/solutions: Online appointment set-up, PCP set up for you

Opportunities: Because many believe that eye, dental, foot health, chiropractic care and discounts on vitamins are essential to preventative care, it is important to reevaluate what is defined as preventive care... and what is covered

SOMEWHAT EASY ACTIVITIES: TIME AND EFFORT ARE KEY CHALLENGES



SCHEDULE WELLNESS VISIT

Barriers: Lack of desire for those who find it redundant, unfamiliarity with the visiting physician who “doesn’t know me”, lack of trust and belief that they are “padding” costs, time involved in the visit

Hacks/solutions: Avoid it altogether!

Opportunities: Better educate on the importance, purpose and value of this service



SOCIALIZE/BE PART OF MY COMMUNITY

Barriers: Lack of time/having an already packed schedule low motivation/depression or shyness can make it hard to enter or maintain inclusion in a community

Hacks/solutions: Joining senior networks or support groups, reading community newsletters, being active in church, being “forced to socialize by my children”

Opportunities: Tips and suggestions for connecting with others, community meet-ups for learning about the plan/benefits and possibly for similar conditions/issues. Perhaps offer volunteer suggestions within the community to connect them with others

EASY ACTIVITIES: LIMITED EFFORT WITH A HIGH RETURN



YEARLY PHYSICAL

Barriers: N/A

Hacks/solutions: Setting up appointments in advance

Opportunities: N/A



TAKE MY MEDICATION AS DIRECTED

Barriers: N/A (providing they had access to their prescriptions. Motivation was strong, with many noting that they recognize it is essential to prevent worsening symptoms/issues)

Hacks/solutions: Set timers to remember to order medication, take pills and having an open line of communication with PCP

Opportunities: N/A



MAKE PCP APPOINTMENTS

Barriers: For some, time was a barrier but most look forward to PCP appointments to help stay on top of their health

Hacks/solutions: Set up future appointments while in the office

Opportunities: N/A



REFILL RX

Barriers: Occasionally cost is an issue, the “donut hole”

Hacks/solutions: Auto-fill, online ordering (saves time, packaging, money!), text messages from Pharmacy when Rx is ready

Opportunities: Aside from better coverage on all Rx medications, N/A