

## APPENDIX

### TABLE A1: SAMPLE INTERVIEW QUESTIONS

#### **Introduction:**

Thank you for allowing me to interview you. As I explained in the consent form, I will be recording this interview so I can accurately understand your ideas in your own words. Interviews will be transcribed, which means I will make a typed/written transcript of what we say. The transcript identifies you only by a research identification number, it will not use your name; quotations from the transcript may be used in reports and publications but will not identify you. The tapes will only be used for the purpose of this study and they will be destroyed at the end of the study. Your participation is completely voluntary. You also have the right to withdraw from the study at any time. If you want to withdraw from the study all the information you provide will be destroyed and omitted from the final paper.

This interview will be no longer than 30-45 minutes, depending on how much you would like to share.

Do you have any questions for me before we begin?

Ok, so this study is about how people switch and disenroll from their Medicare Advantage program.

There are a lot of choices in the Medicare program and choosing one can be quite difficult for everyone. We are interested in learning how people make choices in Medicare Advantage, what things were not working with their Medicare Advantage plan and what was important to them when selecting a new insurance plan, and whether they get any help in making their choices. The second part of our study is to understand what was like to be in a plan. We'd like to know people's experiences with their prior and their current plan, and why they decided to switch and/or disenroll.

**Warmup:** To begin I would like to know a little about you.

- What do you like to do in your free time? Ok, great. That sounds nice.

**Enrollment in Medicare Advantage:** Now let's go to the interview. I would like to start by talking about how you decided to enroll in your first Medicare Advantage plan.

- Please tell me how you chose your Medicare Advantage plan.
  - If you remember, tell me any steps you took to decide.
  - How long did it take you to make the choice?
  - How did you get your information about the plan?
  - What did you do with the information you got from Medicare Advantage plans before and after you enrolled?
  - If you received help from others, who were they and what help did they provide?
  - how helpful was it?
- Looking back, what were some of the important features that you wanted when choosing a plan?

We're interested to know how people think about medical costs and insurance.

- I'm sure you know there are a lot of technical terms, like *premiums*, *deductibles*, *co-pays* and *out of pocket expenses*. Let's talk about those terms,
- Tell me whether you found any of the terms confusing. Which ones?
- Were there people who helped you understand what the terms meant?
- How were they helpful?
- How easy do you think it is to compare costs, coverage, and provider networks of plans?
- Please tell me anything else you want to tell me about how you made the choice of plan and what might have been helpful.

**Switching/disenrolling from Medicare Advantage: So that's about half the interview. You've been extremely helpful. Now I want to understand your experience with switching plans.**

These questions are pre-switch

- Could you tell me about your original plan: what did you like/not like about it? Did it work the way you expected? Did it provide the coverage you were expecting? (probes can include the following):

What about any difficulty getting the care you need?

- What about how far you have to go to get care?
- How are your doctors and other providers?
- What about choice of doctors or referrals?
- What is it like to deal with customer service?
- What about getting paid (reimbursement) by the plan?
- What about out-of-pocket costs?

Tell me when the thought of switching plans crossed your mind, and what were the concerns you had.

- What kinds of things did you think about while switching?
  - Why did you switch plans?
  - How easy do you think it was to switch plans?
  -

Tell me why you disenrolled from Medicare Advantage

- What was not working for you?
  - What were you looking for?
  - What things didn't you like about being in this plan?
  - Were there any negative experiences that you had?

**Next Choice:**

Please describe as best as you can how you made your current choice

- What elements were you considering when switching/disenrolling?
  - Were you thinking about cost?

- Were you thinking about doctors?
- Did someone help you make this choice?
- Anything else that came into this decision?

These are post-switch and/or disenrollment

Now that you have enrolled in a new plan, how is it?

**Exit questions:**

- What advice would you give others enrolling for the first time? What information is most important to deciding which plan to choose.
- That was my last question.
- Is there anything else I should have asked or that you would also like to say?

**TABLE A2: CODING SCHEME (MULTIPLE CODES WERE APPLIED TO THE SAME PASSAGE OF THE INTERVIEW IF APPROPRIATE. THESE CODES WERE READ AND SUMMARIZED AND CLUSTERED INTO THEMES).**

<b>CATEGORY</b>	<b>CODE</b>	<b>PRIORI/EMERGENT</b>	<b>SAMPLE QUOTES</b>
<b>PARTICIPANT</b>	Health literacy	Priori	<ul style="list-style-type: none"> <li>• "And having worked in the system and kind of seeing behind the scenes what works and what doesn't work. I have some friends with some complicated health problems and fortunately they don't work because it is a part-time job for them negotiating everything with their insurance, so I see it's a lot of work."</li> </ul>
	Computer literacy (or lack of thereof)	Emergent	<ul style="list-style-type: none"> <li>• "I went online. I didn't go on Medicare.gov. It piped in ... They gave me a different website and it gave me different companies."</li> <li>• "No, I don't have, no I don't have a computer. I don't go, I didn't go on online. No, I didn't."</li> </ul>
	Self-reliance/individual responsibility	Emergent	<ul style="list-style-type: none"> <li>• "I would say it's up to the individual to do their homework. It's up to the individual like myself to ask these questions?"</li> <li>• " I mind my own business. So I mean, I'm not going around asking. Um people you know, what? What plan do you have then? ... I'm not like that. I like to mind my own business. Let them do what they want, I do what I want. [laughs]"</li> </ul>
	Plan rating (how they rate it)	Priori	<ul style="list-style-type: none"> <li>• "I do not have other experience with other insurance, it is hard. I have only had [X insurance company] and [Y insurance company]. But I will rate it four."</li> <li>• "A five. They are not bad. They take care of</li> </ul>

			<p>me. Sometimes I feel I have problems and they tell me to come. Sometimes I try to get appointment and they make space for me."</p> <ul style="list-style-type: none"> <li>"I would give them a 3. I have to pay too much. If I go to the ER, I have to pay \$100, \$50 for specialist, \$35 for primary care visit. Sometimes I do not tell anything to my primary care doctor, so I do not get send to the specialist. I cannot pay that money; I do not have a fortune. I cannot afford that luxury."</li> </ul>
	Language	Emergent	<ul style="list-style-type: none"> <li>" People switched to that plan and they started receiving bills. I do not care if I do not get the \$100. She comes here and tells me about the bills she gets, so I told her... you see, I do not want that. I do not receive those bills. Then you have to call and see what is going on and have to pay for that. They complain about the insurance. It is not good for me if I can buy toothpaste or something at the pharmacy if I am getting all these bills and in English. Then these people need to come here and have someone help them translate and see what are the charges."</li> </ul>
	Personal feelings (disrespected, taken advantaged of)	Emergent	<ul style="list-style-type: none"> <li>"We are forgotten seniors, we are forgotten people. You know that? ... We contributed all our life. Now we're, now we're our 70s and 80s, we're not doing anything anymore. But try to get someone that 17 or 20 to do something, it's "I'm not doing that"... We're the seniors, we do it. ..in three years. I got a raise last year, I'm sorry—\$2. That's from Social"</li> </ul>

			<ul style="list-style-type: none"> <li>• "Don't make it so damn confusing when you try to read up on it. You know it's like you almost have to go to uh—I think they make it confusing so the insurance agent can sell you a policy. I get older, it's frustrating."</li> </ul>
<b>ENROLLMENT PROCESS</b>	Complexity	Priori	<ul style="list-style-type: none"> <li>• "This is what I did and I helped my ... We did do some Medicare coverages. Yeah, this is confusing and it needs to be simpler. Since I worked on computers and I did comparisons, I helped my boss out. Yeah, this is complicated."</li> <li>• "Sometimes I do not understand. I don't understand why if someone is paying an expensive premium, we also have to pay copays. We should not have to pay copays for drugs, at least....I know what they mean because they have explained me like 80 thousand times. "</li> <li>• "Because I looked at like—because I had [X Insurance company] and I tried [Y insurance company] I think and a couple others and I tried to like put down my paper, compare on a spreadsheet showing what was covered by who and what wasn't covered—just so confusing."</li> </ul>
	Comparing plans	Priori	<ul style="list-style-type: none"> <li>• "I will review it once the review cycle comes again and see if there's anything else out there. Everybody here seems to have [X insurance company] or [Y insurance company]. I think they have [Z insurance company]. I don't know what it is here. In [the other city], It was [Y insurance company] and [Z insurance company combined] but I don't</li> </ul>

			<p>know what they consider [Z insurance company] here. I have to review it. I can't-</p> <ul style="list-style-type: none"> <li>• "Oh yeah, she went through everything. You know there's a zero plan. There's uh, whatever kind of plan, then of course, there's the real expensive plan, which I wish I could have but I can't...I don't like the way that goes because with the zero plan, there are only certain doctors and you don't have your choice of a hospital."</li> </ul>
	Choice overload (or not)	Priori	<ul style="list-style-type: none"> <li>• " I thought it was a good plan. No, but there are so, so many to choose from you know, [X insurance company], [Y insurance company], I don't know how many."</li> <li>• "Yeah, could be [difficult]. They want you to think of it. You have to, you have to figure out the cost of this, the cost of that."</li> </ul>
	Inertia	Priori	<ul style="list-style-type: none"> <li>• "Uh, nah I just carried over because it was the same insurance coverage that I had before I retired."</li> <li>• "I don't remember exactly what happened [during enrollment], just happened."</li> </ul>
	Hassle	Priori	<ul style="list-style-type: none"> <li>• "Oh, I wish I could find a better one, but it's just, um, like to save myself the aggravation, I'm staying where I am."</li> <li>• "No. This [plan]--they're a pain in the neck because they're constantly...because they cannot send me enough notices...They want me to get on and I don't want to do that. I just want to—I don't want to do it. It's just very aggravating. It's that but they do it and they keep sending in them."</li> </ul>
	Time to make a	Priori	<ul style="list-style-type: none"> <li>• "Yeah, it took me a couple months."</li> </ul>

	decision		<ul style="list-style-type: none"> <li>• "I think about 35 to 45 minutes."</li> </ul>
	Plan switching	Priori	<ul style="list-style-type: none"> <li>• "That is why I changed in 2015, because of the referrals that you need. Evidently, [X insurance company] is more conscious about that. [Y insurance company] is about the care, you can go to any specialists that you want. But, as I said, I was only insured in Rhode Island, not outside."</li> <li>• "Well, a friend of mine made a suggestion that I thought was good, I don't take a lot of medications and I don't use western medicine for the most part and the type of things I use for my healthcare Medicare, most insurance, won't pay for it. That's why I was okay with the straight, but I'm getting older and so at some point maybe I need a joint replacement or something and this friend said, 'Well, you ought to get enrolled in something that covers the supplement because you might need something and then you're paying all this out of pocket.' So, I thought that was a good thing to think about, there are a lot of choices and ... And so, for me it was good that there was a choice that didn't cost me any more 'cause that was important, I'm paying for all my holistic alternative types of treatments myself, and so I... And I'm living on social security right now, so it was important for me not to pay more."</li> <li>• "Who knows what'll happen. I might get something else. I don't know. "</li> <li>• "Yeah, basically. Then, when I left ... It gets renewed every year so I stayed with the plan</li> </ul>



			<p>and just renewed it. I moved up here and I couldn't get [X insurance company]."</p> <ul style="list-style-type: none"> <li>• "No. Anything better than this? No, I'm I'm I'm happy with that. You know, I like it. "</li> </ul>
<b>SOURCE OF INFORMATION</b>	Broker	Emergent	<ul style="list-style-type: none"> <li>• "Well because when he showed me, he had actually—He came by my house after I retired and sat down with me and he went over this booklet and I had this booklet right in front of me and he was going over the plans and, uh, we figured out what the best plan would be for me."</li> </ul>
	Insurance Company	Emergent	<ul style="list-style-type: none"> <li>• "Well I tried to do it like I called the different insurance companies and the impression I got was they would hook me up with like an insurance agent trying to sell me insurance...and it's like you know I don't need that headache. I just wanna keep it simple and affordable and with good coverage."</li> <li>• "Yes, sure I do. They have very good representatives, always at the meetings in September. You can call them. Even after you switch, you can still call them. In my case, there is a lady here in [town], she will help you even to fill out the forms (if you cannot do it on your own). They have a very organized system."</li> <li>• "So that's where I went. And I compared to prices and uh coverage. I think I called up, I called them up and ask them when I had some specific questions and got the answers. I went to uh, the [X insurance company] uh meetings that they have for people going on Medicare, went to a couple of those, asked</li> </ul>

			questions there, and that's how I got my information and decided."
	Friend		<ul style="list-style-type: none"> <li>• "No, no. And if we do, you know, if if that happens they don't talk, you know that they keep that information to themselves. They don't share that information, you know. I'm, I'm not going to talk to [friend] about what your plan is."</li> <li>• "Uh, well, I was told about it by uh, you know acquaintances. They said well, you know why aren't you having this zero plan. I didn't know it existed until you know acquaintances told me that they had it"</li> </ul>
	CMS	Priori	<ul style="list-style-type: none"> <li>• "I went online. I didn't go on Medicare.gov. It piped in ... They gave me a different website and it gave me different companies."</li> <li>• "Yeah. Well I look through the books too, you know, that Medicare sends you and I didn't see anything that was exactly the same. You know maybe there is, maybe [X insurance company] or some place, you know? But I've never been able to kind of see in the book that they send you about this time that there's anything that is the same. It's all basic insurance, you know. So I can't measure [insurance company] supplemental versus X. I have never done that. And maybe there is no X..., you know."</li> </ul>
	Other's experience	Priori	<ul style="list-style-type: none"> <li>• " Yeah. A woman come in the second day I was in there [in the hospital], and sat down with me and started going over, what do you have, what do you do, and she just went,</li> </ul>

			"Oh, you're eligible. This isn't going to cost you anything."
	Employer seminar/former employer	Emergent	<ul style="list-style-type: none"> <li>"Uh he gave a seminar at [company] one day and I went to the seminar and that's how I got to meet him and then after meeting with him, I had called him and made an appointment to sit down and talk to him because I was telling him eventually, I gotta retire from [former employer]. So he sat down with me and explained this and then when I was in the process of retiring um I called him and uh I met with him and he hooked me up with this Medicare Advantage Plan. "</li> </ul>
	Unaware of resources	Emergent	<ul style="list-style-type: none"> <li>" At the time that I was retiring, I didn't have that or I wasn't aware of it. "</li> <li>" I don't know. I don't have a clue whatsoever. I just got lucky when, in fact, I got lucky because it was a day—I was up in my benefits lady's office and I was asking her about Medicare and she says "[Mr.X]," she says, "you ask a lot of good questions" and she's the one who said "you know we have this [doctor insurance representative] that's going to be here doing a seminar over here at [employer] on such-and-such date and you need to see if your supervisor will allow you to go. I thought, "that's what I'm going to do. So that's how I got it." How anybody else—like I said, I just got lucky. How anybody else would go about it, I don't know. If you know how to use a computer or or all that, then I guess they would have to go online. I don't know. I</li> </ul>

			<p>don't even text. I got a flip phone and I tell people don't text me. Do not text me because, and do you want to know why, because I don't know how to use it and I'm not interested in using it. If you call me on my cell phone, I'll answer it so I don't know how people find out, I honestly don't."</p>
	Senior Center	Emergent	<ul style="list-style-type: none"> <li>• "I didn't this year but last year I went to one of the meetings [at the Senior Center] because I wanted to see what it was all about. This year they had something at the center at my senior center and I just went and listened because somebody was there from [all the insurance companies]"</li> </ul>
	In-person preference	Emergent	<ul style="list-style-type: none"> <li>• "I don't like the phone. I'd rather talk to people. "</li> <li>• "Uh more convenient. I'm not that far from it, I go to it. And, uh, I don't like waiting on the phone. [laughs]"</li> </ul>
<b>CONFUSION</b>	Program confusion	Emergent	<ul style="list-style-type: none"> <li>• "A lot of the times the way they talk, I get Medicare, Medicaid mixed up, for one thing....I'm 77 but when I retired I was like 65 and I'm thinking what about if somebody now, if somebody my age trying, wants to understand that process, it just doesn't come about. That's why you see a lot of people go to—now you got Medicaid, Medicare and then you got Medicare A, which everybody gets. Now it's B. Now what's covered under B? Now then you got, what is it, the uh, part that covers medicine—"</li> </ul>
	Term confusion	Priori	<ul style="list-style-type: none"> <li>• "Uh, uh, you know what's a copay and deductible. It's just—it's more confusing than</li> </ul>

			<p>what it has to be."</p> <ul style="list-style-type: none"> <li>• "Generally I know co-pay, premium, deductible, and whether you're in hospital or just overnight or not overnight...Most of us don't really understand all there is to know about deductibles, except and you have exception here and you have exception there. There's just too many, it's like lawyer speak."</li> </ul>
<b>SWITCHING</b>	Open to switching	Emergent	<ul style="list-style-type: none"> <li>• "Well, if I suddenly found myself in the position where I needed different medications and different care, and I found that this plan did not suit my needs, then I would. But I know it's too late now because December 7th is the cut-off date, right?" "That I don't know. Who knows, who knows. Like I said, I have been healthy, but one never knows. How knows? I can't really answer that one...It would be through them. Because they offer different plans, you know? That's why I like to go to some of the meetings. But I'm not about to change. But if I was sickly I would consider maybe a better plan. But this plan is not bad, you know. I'm happy with it."</li> </ul>
	Closed to switching	Emergent	<ul style="list-style-type: none"> <li>• "Yes. It may be more expensive to switch to a different plan and I may not have the same coverage or benefits. [X insurance company] have other plans available. I know if I choose a plan with a higher premium, I may not have to pay to go to the ER or copayments to go the doctor – The \$50 to go to the specialists or \$35 for a primary care visit. If I have a plan with a higher premium, I may not have to pay."</li> </ul>

			<p>But, one thing makes up for the other. So, then it is not good for me"</p> <ul style="list-style-type: none"> <li>• "I know there are. I have seen some options, but I am comfortable with what I have. I know there are other options."</li> </ul>
<b>STICKINESS</b>		Priori	<ul style="list-style-type: none"> <li>• "Yes, yes I'm satisfied. And what [insurance broker] also told me today was, I asked him "do I have to renew every year?" he said "no what happens [participant] is this: we, when there's changes made, we contact you. Because with uh Medicare advantage, um, you never know when there's gonna make changes. Sometimes they make changes for the good, sometimes they make changes for the bad, but when they make changes, we always contact you in ample time."</li> <li>• "Oh, I get that. They feel comfortable and so it's like, "Let's not rock the boat, I'm not dealing with this. It's too complicated."</li> <li>• I absolutely have no idea. I just know, I've always been with [X insurance company] and then when I couldn't afford a real good one, you know I went there and I got this plan, which was years ago." "Yes. When I officially started collecting social security and Medicare, that was when I was 65 so that was 15 years ago, and I enrolled in this."</li> </ul>
<b>CONSIDERATIONS FOR SWITCHING/ STICKINESS</b>	Referrals	Priori	<ul style="list-style-type: none"> <li>• "My doctor gives me the referrals, if I need it, not all the time because I want them. I do not have to wait long."</li> <li>• "That is why I change in 2015, because of the referrals that you need. Evidently, [X</li> </ul>

			<p>insurance company] is more conscious about that. [Y insurance company] is about the care, you can go to any specialists that you want. But, as I said, I was only insured in Rhode Island, not outside."</p> <p>"No, the only thing that uh, I found, find annoying [chuckles] this past year, they put a new requirement with any services. Uh, basically any services aside from my principal provider, I have to get a reference on."</p>
	Satisfaction	Priori	<ul style="list-style-type: none"> <li>• " I, uh, I um don't know. I just, I'll say I'm satisfied. I wish it was not so, uh, expensive, because every year it goes up and up and I don't understand that."</li> <li>• "I am happy with what I have. Insurance must have a profit."</li> </ul>
	Spouse	Emergent	<ul style="list-style-type: none"> <li>• "When my husband was living, I had to cosign for him, but now I'm alone, and I have to decide for myself."</li> <li>• "No, I'm pretty--I'm pretty used to uh, a lot of plans. My husband was uh, I was actually, how should I say it, I got it from his plans because he got—everything that come along, he got it. Okay, so I was involved with a lot of his co-pays and everything was okay." " I mean, what's covered and what's not covered...for me and my wife."</li> </ul>
	Plan changes (decision making factor)	Priori	<ul style="list-style-type: none"> <li>• "I think they way to simply the process is for people to read what they receive. Because before you get your new plan booklet, and it's thick, you just look up what you wanna know. You read the changes that are gonna be instituted for the next year. Sometimes it's</li> </ul>

			<p>less, like the co-pay is less. Sometimes it's more. But just read it. I don't have many problems like people do, like diabetes, or COPD, but if that's your concern, then read those sections and find out what would be better for you. You have to do things on your own. You can't just sit back and wait for somebody to hold your hand. "</p>
	Customer Service	Priori	<ul style="list-style-type: none"> <li>• "Another resource. They give you phone numbers, you know, when you join and they say if you have any questions about what's covered or not covered you can call this help line, which I haven't done, I worked for [insurance company] at one point and so I don't find those things very reliable."</li> </ul>
	Covered Benefits	Priori	<ul style="list-style-type: none"> <li>• "Uh, I think I have pretty good—some things I wish I was better covered by. Uh, like I don't like when I go for blood work, you know, very little is covered. I gotta pay for the whole thing pretty much." "Yeah so far I like the services. because I need prescriptions and they send my prescriptions in the mail. They give me a 90-day supply of my, like, I take high blood pressure pills, I take vitamin-e pills and everything comes in the mail."</li> <li>• "This [X insurance company] plan is a plan that I don't pay anything more for, it has a lot of benefits if I need them, and because I don't take medication then I don't need the drug supplement, which usually makes the plans change, they cost more or there's different rules about the plan, so I have a very simple</li> </ul>



			<p>[insurance company]"</p> <p>"I go do that, and that's all I've really needed. Now there's ... I want to go see a specialist, so it's going to be interesting, depending on what the specialist orders, how to find out what my insurance is going to pay for before my doing the exam. I think that's the game, always trying to know, you ordered this, but what's the insurance going to pay for it. They're not going to pay for it, what's the other option? It becomes a big negotiation it sounds like."</p> <ul style="list-style-type: none"> <li>• "A lot of the same similarities, number one. I don't have that much of an income so I used a plan that has zero premium. There is no deductible. There is a copay so I pay the copays. I am not a sick old person so if I go to the doctors twice a year is a lot... There're prescriptions. I use the email order. Some of them are two dollars and some of them are zero so that's the reason."</li> </ul>
	Brand Loyalty	Priori	<ul style="list-style-type: none"> <li>• ""Okay, I know the company. I know..." It used to be [in town] and then they changed names. Yeah, I knew the company. If it was a company I never heard of, I wouldn't."</li> <li>• "It would be through them. Because they offer different plans, you know? That's why I like to go to some of the meetings. But I'm not about to change. But if I was sickly I would consider maybe a better plan. But this plan is not bad, you know. I'm happy with it."</li> </ul>
	Health Status	Priori	<ul style="list-style-type: none"> <li>• "Yeah it sure does because at my age—Right now, I'm sorta like pre-diabetic so they gotta,</li> </ul>

			<p>every once in awhile they take the blood work and like two sometimes three times in a year. You're talking about maybe 2-3 hundred dollars each time I gotta pay."</p> <ul style="list-style-type: none"> <li>• "Think twice, three times before you start anything. You know, it's your life—I could be gone tomorrow, or be here until I'm 90. I don't know. "</li> <li>• "That's where I got my high blood pressure, my cholesterol. And since then I been using it and I don't have any, knock on wood, I don't have any complication on it. And I don't need any high dose because I only take low doses. And my copayment is less. So I can't complain. It's very good."</li> </ul>
	Out-of-pocket costs/costs	Priori	<ul style="list-style-type: none"> <li>• "Cost and copays. I did not want a plan that had a high deductible, which are always cheaper but I don't have that kind of money. I don't have \$5,000 in the bank to pay my bills. If it's \$15, I'll pay the \$15."</li> <li>• Oh yeah, she went through everything. You know there's a zero plan. There's uh, whatever kind of plan, then of course, there's the real expensive plan, which I wish I could have but I can't."</li> </ul>
	Provider network	Priori	<ul style="list-style-type: none"> <li>• "I don't know yet, I know that because, again ... Because it's Rhode Island, I was surprised that my plan covers all the hospitals in Rhode Island, usually when you have HMO they cut off half of your choices and you're limited to whatever, but it looks like I have the option of any of the hospitals in Rhode Island."</li> <li>• "No, I have my doctors right here in [town]. I</li> </ul>

			<p>don't have a long wait. I sign in and I'm taken almost right then and there. Other than that, I don't. No."</p> <ul style="list-style-type: none"> <li>• "I don't think it's...I think there are just many people who have very few choices."</li> </ul>
	Keeping provider	Priori	<ul style="list-style-type: none"> <li>• "No, I kept mine. And that was in a central question that I asked, about her specifically, to make sure she took United...Yeah, it was really important."</li> </ul>
	Future health status	Priori	<ul style="list-style-type: none"> <li>• "We do not have the best plan out there. I am still taking care of myself. Even if my leg hurts, I am not lying in bed. If I was sicker or more in bed, maybe I would need more help or nurses, but I prefer to stay at home than in the hospital or some institution."</li> <li>• "Right now I'm fine. Like I said, I don't know what's gonna happen next year. I'm lucky I don't have any problems."</li> <li>• "Right, is arthritis going to get worse, and if it does then what does that mean for me? Does it mean I might have to have surgeries, yeah, that kind of thing. That would probably be a good thing for them to be just including in their general...'Cause they do try and do...It looks like they do try and do a lot of kind of proactive wellness stuff with people, and that would be a good thing for them to improve on their suggestions that when you have your wellness appointment with your doctor it would be one of the questions."</li> </ul>
	Costs (future/hypothetical)	Emergent	<ul style="list-style-type: none"> <li>• "Yeah the only thing that scares me is, is if something happens to me and I had to go to the emergency room and they wanted to</li> </ul>

			<p>admit me and if this is an inpatient mental hospital patient, you tell me who the heck can afford \$360 per day, that's the only thing that scares me"</p> <ul style="list-style-type: none"> <li>• "Yeah, that's what I think ... For me, I think that makes sense, but yeah, I think that people ... That would be good for other people just to say, "What's ... The things going on with me, what are we looking at in the next year or the next two years of what might I need that's going to be different?" That's a good ... Yeah, that's a good thing that people should be"</li> </ul>
	Prior insurance/employer insurance	Emergent	<ul style="list-style-type: none"> <li>• "I worked for the federal government and they, I had health insurance and then when I, when I retired, I could carry that health insurance over but they said that was Medicare Advantage....I just carried over because it was the same insurance coverage that I had before I retired."</li> <li>• "It's funny that you ask that because in the beginning, yes. Because this is all new to me. You know, I'm so used to uh working, you know, because when I was working at [former employer], I was in [employer sponsored insurance], and that covered everything. So yeah I had to listen to [Doctor] very carefully and he explained it to me very carefully."</li> </ul>