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Topic	Page
Dashboard	2
Executive Summary	8
Survey Results	16
Background and Methodology	45
Appendix	47

Dashboard
Executive Summary
Survey Results
Background and Methodology
Appendix



**Access to Healthcare
During & After the
COVID-19 Pandemic**

How Respondents Feel Access to Healthcare Team(s) is
During the COVID-19 Pandemic Compared to Before

	Aggregate (n=105)	Medicaid/ Uninsured (n=42)	Community Residents (n=63)
Better	7%	10%	5%
Worse	35%	33%	36%
About the same	58%	57%	59%

Highlights

- Telemedicine and quick response times have made access to healthcare team(s) during the COVID-19 pandemic BETTER
- Cancelled/rescheduled appointments and lack of the option to see a provider in-person have made access to healthcare team(s) WORSE during the COVID-19 pandemic
- Many respondents feel they have still been able to see a provider or they have not needed health care and therefore they feel their access to healthcare team(s) during COVID-19 pandemic is ABOUT THE SAME

COVID-19 Impact on Healthcare Survey – Patient Perspective

Aggregate n=105 Response Rate: 12% from Panel

Medicaid or Uninsured n=42 Response Proportional Rate 41%
(42 out of 105)

Community Residents n=63 Response Proportional Rate 59%
(63 out of 105)

How Respondents Feel Access to Healthcare Team(s) Will Be
After the COVID-19 Pandemic Compared to During

	Aggregate (n=105)	Medicaid/ Uninsured (n=42)	Community Residents (n=63)
Better	33%	36%	30%
Worse	11%	9%	13%
About the same	56%	55%	57%

Highlights

- Telemedicine and in-person options and the ability to see a provider face-to-face will make access to healthcare team(s) after the COVID-19 pandemic BETTER
- Providers being back logged with appointments and the continued need to social distance will make access to healthcare team(s) WORSE after the COVID-19 pandemic
- Many respondents feel they have still been able to see a provider and therefore they feel their access to healthcare team(s) after COVID-19 pandemic will remain ABOUT THE SAME



Communication

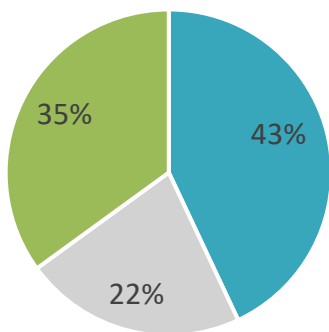
80% of respondents like speaking to a clinician or provider through video call

- 74% Medicaid/Uninsured
- 86% Community Residents

33% of respondents experienced technical challenges during a video call with a provider

- Video and/or audio not working
- Unclear video and/or audio

Will Continue to Use Video Conferencing after the COVID-19 Pandemic (n=105)



■ Yes ■ No ■ I don't know

Some respondents feel medical concerns need to be addressed face-to-face with a provider.

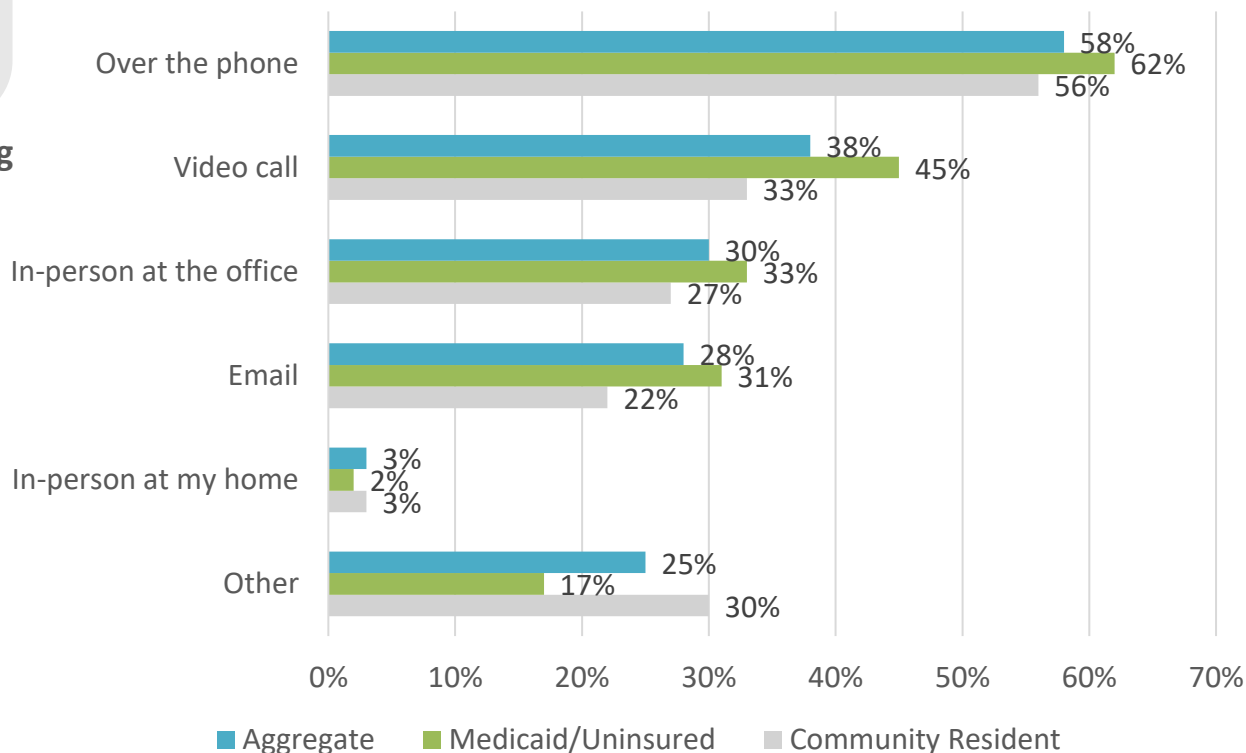
COVID-19 Impact on Healthcare Survey – Patient Perspective

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Medicaid or Uninsured n=42 Response Proportional Rate 41%
(42 out of 105)

Community Residents n=63 Response Proportional Rate 59%
(63 out of 105)

Communication with Healthcare Team(s) During COVID-19 Pandemic



■ Aggregate ■ Medicaid/Uninsured ■ Community Resident





Telehealth/Telemedicine

34% of respondents have concerns about using Telehealth/Telemedicine

- 31% Medicaid/Uninsured
- 37% Community Residents

74% of respondents are receptive to receiving healthcare services remotely (a rating of 4 or 5 on a 1 to 5 scale)

- 90% Medicaid/Uninsured
- 59% Community Residents

57% of respondents are confident in the quality of care received using a video call with a clinician or provider (a rating of 4 or 5 on a 1 to 5 scale)

- 67% Medicaid/Uninsured
- 51% Community Residents

*Despite the receptiveness and confidence with remote healthcare, 67% of respondents prefer to see a clinician/provider face-to-face.

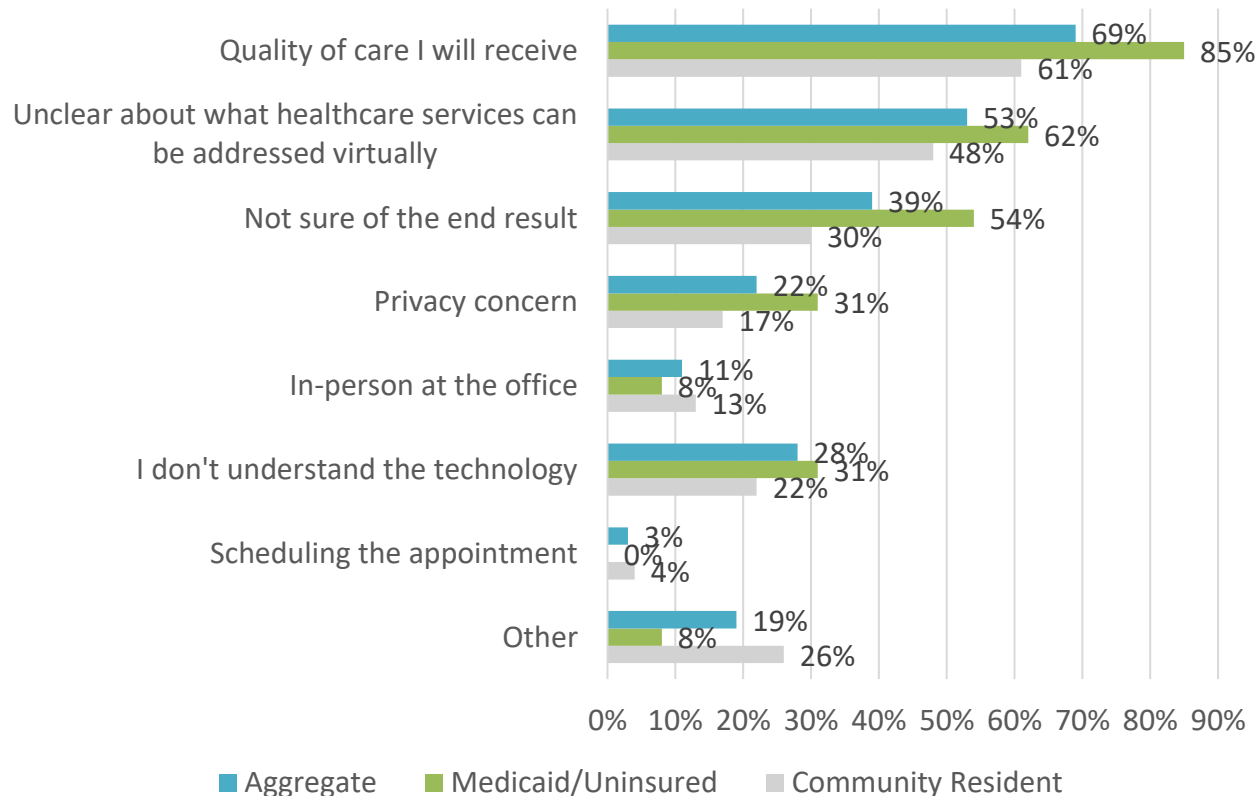
COVID-19 Impact on Healthcare Survey – Patient Perspective

Aggregate n=105 Response Rate: 12% from Panel

Medicaid or Uninsured n=42 Response Proportional Rate 41%
(42 out of 105)

Community Residents n=63 Response Proportional Rate 59%
(63 out of 105)

Concerns with Using Telehealth/Telemedicine





Returning to a Medical Office after the COVID-19 Pandemic

28% of respondents are moderately to extremely nervous to return to a medical office in-person after the COVID-19 pandemic (a rating of 4 or 5 on a 1 to 5 scale)

- 40% Medicaid/Uninsured
- 19% Community Residents

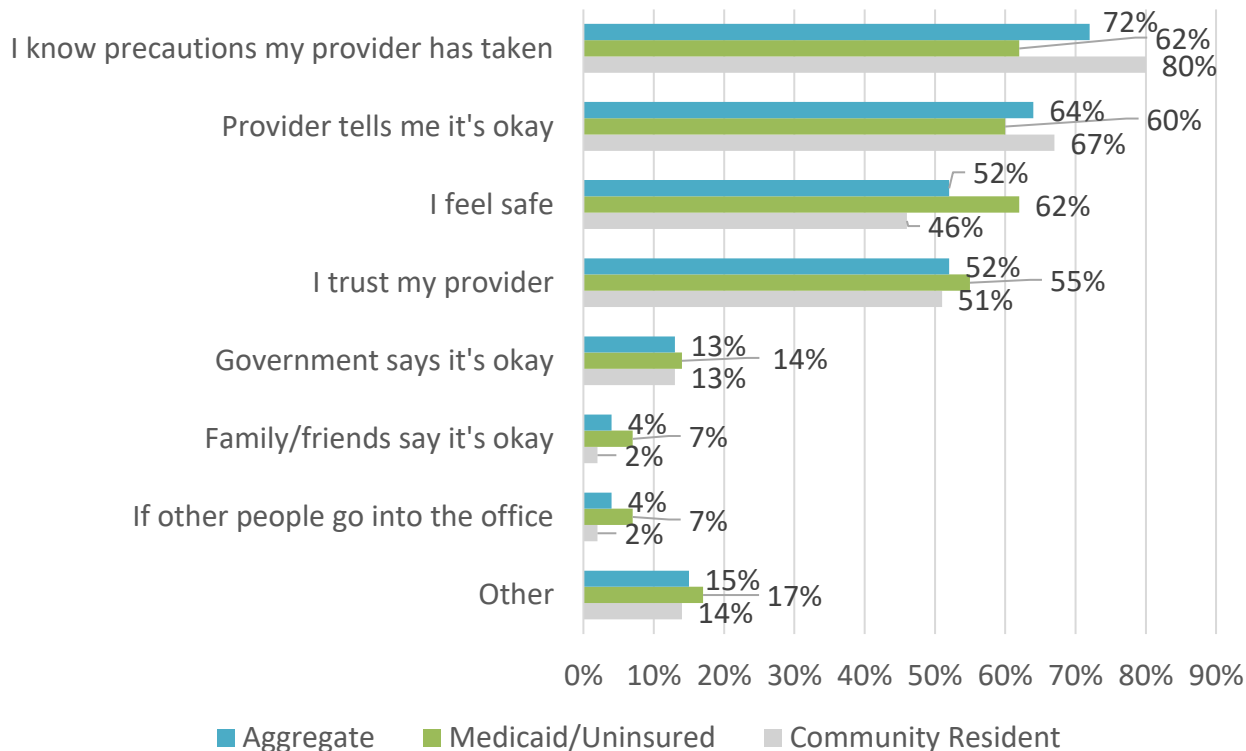
COVID-19 Impact on Healthcare Survey – Patient Perspective

Aggregate n=105 Response Rate: 12% from Panel

Medicaid or Uninsured n=42 Response Proportional Rate 41%
(42 out of 105)

Community Residents n=63 Response Proportional Rate 59%
(63 out of 105)

Reasons Patients will be Comfortable Returning to a Medical Office





Trusted Sources of Information Related to COVID-19

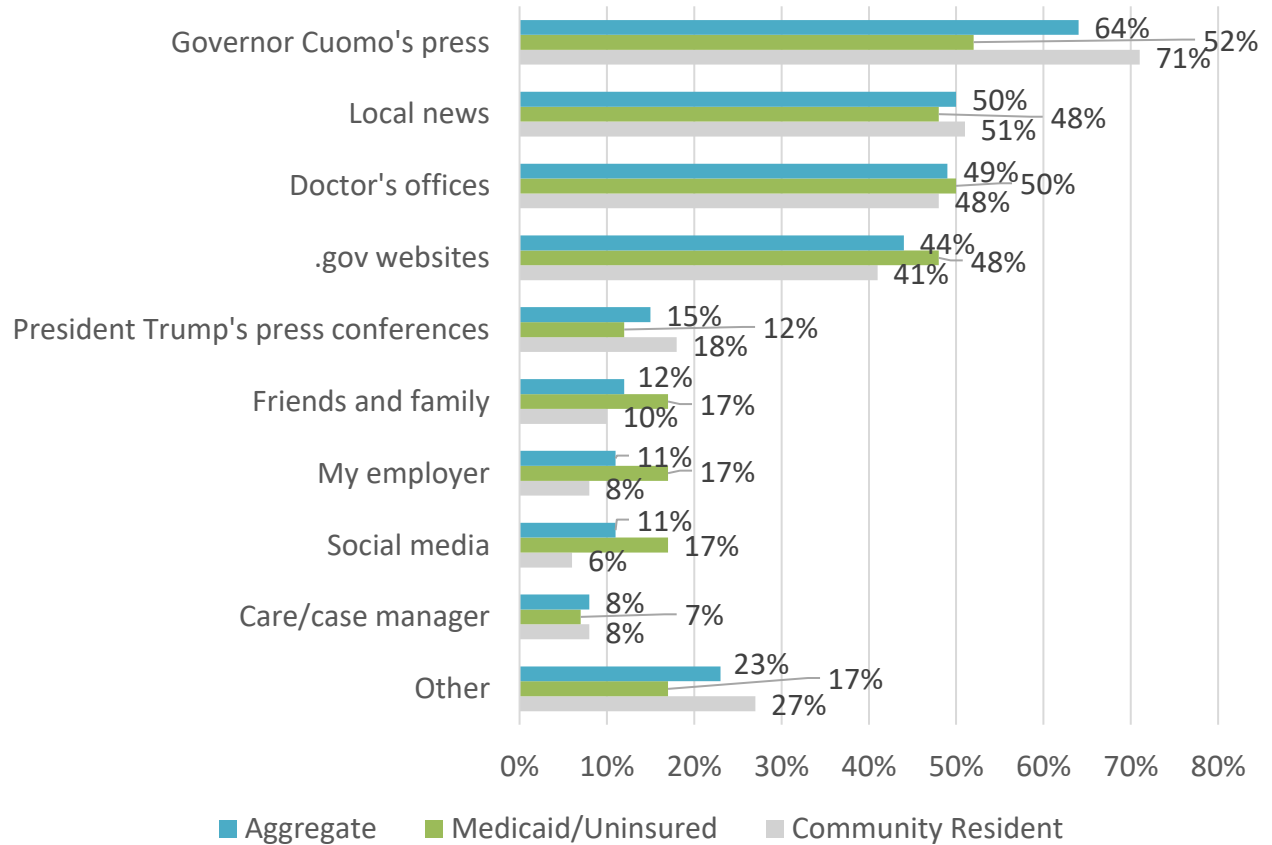
COVID-19 Impact on Healthcare Survey – Patient Perspective

Aggregate n=105 Response Rate: 12% from Panel

Medicaid or Uninsured n=42 Response Proportional Rate 41%
(42 out of 105)

Community Residents n=63 Response Proportional Rate 59%
(63 out of 105)

For Patients to be Comfortable Returning to a Medical Office



Executive Summary
Survey Results
Background and Methodology
Appendix

Patient Survey Executive Summary

Online survey was administered to the Care Compass Network (CCN) panel members from Group 1: Medicaid or Uninsured and Group 4: Community Residents from **May 14th, 2020 to May 28th, 2020**.

- ❖ 22 questions
- ❖ **105 surveys (12% completion rate)**. Average completion time 5 minutes.
- ❖ **Community Residents had a 60%** [63 out of 105 for each] proportional response rate.
- ❖ **Medicaid or Uninsured had a 40%** [42 out of 105 for each] proportional response rate {Pg. 17}.

Section A: How Respondents feel Access to healthcare team(s) is DURING the COVID-19 pandemic compared to BEFORE

1. Slightly more than half of the respondents 58% [61 out of 105] feel that their access to healthcare team(s) is about the same during the COVID-19 pandemic as it was before.
 - 1.1 Medicaid and Uninsured respondents** reported: 10% [4 out of 42] feel access to healthcare is better, 33% [14 out of 42] feel access is worse, and 57% [24 out of 42] feel access is about the same. {Pg. 20}.
 - 1.2 Community Resident respondents** reported: 5% [3 out of 63] feel access to healthcare is better, 36% [23 out of 63] feel access is worse, and 59% [37 out of 63] feel access is about the same. {Pg. 20}.
2. The respondents shared they rated access to healthcare team(s) during the COVID-19 pandemic for reasons including:
 - 2.1 Medicaid and Uninsured respondents** reported that they feel access is better because 1) video calls are better, 2) health care staff seem more concerned and 3) more precautions are taken. The top reasons they feel access to healthcare team(s) is worse are 1) dissatisfaction with video appointments, 2) lack of in-person interaction and 3) cancelled appointments. The top reasons the respondents feel access to healthcare team(s) is about the same include 1) they still have been able to see their provider when needed, 2) they haven't noticed any changes and 3) they have not needed an appointment so they have not experienced a difference {Pg. 21-22}.
 - 2.2 Community Resident respondents** reported that they feel access to healthcare team(s) is better because 1) telemedicine makes appointments easier and 2) there have been quick response times. The top reasons respondents feel access is worse are 1) cancelled appointments, 2) medical offices being closed and 3) less in-person patient/provider appointments. The top reasons the respondents feel access is about the same are 1) they have not needed health care and 2) there is the same level of accessibility as before {Pg. 23-24}.

Section B: How Respondents Feel Access to Healthcare Team(s) will be AFTER the COVID-19 pandemic compared to DURING

1. Slightly more than half of the respondents 56% [59 out of 105] feel that their access to healthcare team(s) will be about the same after the COVID-19 pandemic as it was during the pandemic.
 - 1.1 **Medicaid and Uninsured respondents** reported: 36% [15 out of 42] feel access to healthcare will be better, 9% [4 out of 42] feel access will be worse, and 55% [23 out of 42] feel access will remain about the same. {Pg. 25}.
 - 1.2 **Community Resident respondents** reported: 30% [19 out of 63] feel access to healthcare will be better, 13% [8 out of 63] feel access will be worse, and 57% [36 out of 63] feel access will remain about the same. {Pg. 25}.

2. The respondents shared they rated access to healthcare team(s) after the COVID-19 pandemic for reasons including:
 - 2.1 **Medicaid and Uninsured respondents** reported that they feel access will be better because 1) they will be able to see a provider face-to-face, 2) in-person and telemedicine will both be options and 3) more safety precautions will be in place. The top reasons they feel access to healthcare team(s) will be worse are 1) they feel providers will be back logged for appointments and 2) they will be nervous to go into a provider's office. The top reason the respondents feel access to healthcare team(s) will remain about the same is 1) they haven't noticed any changes in their care during the pandemic {Pg. 26}.
 - 2.2 **Community Resident respondents** reported that they feel access to healthcare team(s) will be better because 1) in-person and telemedicine will both be options for health care, 2) there will be more availability for appointments and 3) you will be able to physically go to the doctor easier than during the pandemic. The top reasons respondents feel access will be worse are 1) doctors/providers will be back logged for appointments and 2) there will be lingering fear about being in public and catching the virus. The top reason the respondents feel access will remain about the same is 1) they feel there is the same level of accessibility as before the pandemic, so no reason to feel it would change after {Pg. 27-28}.

Section C: Communication during the COVID-19 pandemic

1. Slightly more than half of the respondents 58% [61 out of 105] communicated with their healthcare team(s) over the phone during the pandemic. Video calls 38% [40 out of 105] and in-person at the office visits 31% [31 out of 105] were also common methods of communication.
 - 1.1 Of the **Medicaid and Uninsured respondents** 62% [26 out of 42] communicated with their healthcare team(s) over the phone, 45% [19 out of 42] through a video call, 33% [14 out of 42] in-person at the office, 31% [13 out of 42] through email, and 2% [1 out of 42] communicated in-person at their home. Other ways Medicaid and Uninsured respondents communicated with their healthcare team(s) included: patient portal and in the patient's car {Pg. 29}.
 - 1.2 Of **Community Resident respondents** 56% [35 out of 63] communicated with their healthcare team(s) over the phone, 33% [21 out of 63] through a video call, 27% [17 out of 63] in-person at the office, 22% [14 out of 63] through email, and 3% [2 out of 63] communicated in-person at their home. Other ways respondents communicated with their healthcare team(s) included: patient portal, mail and in a hospital Emergency Room {Pg. 29}.

Section D: Video Conferencing (Telehealth/Telemedicine)

1. The majority of the respondents, 80% [32 out of 40], who used a video call to speak with a clinician shared they liked the experience.
 - 1.1 Of the **Medicaid and Uninsured respondents** 74% [14 out of 19] liked speaking to a clinician or provider through a video call {Pg. 30}.
 - 1.2 Of the **Community Resident respondents** 86% [18 out of 21] liked speaking to a clinician or provider through a video call {Pg. 30}.
2. Of the respondents who utilized a video call with a clinician or provider, 67% [27 out of 40] did not experience technical challenges {Pg. 31}.
 - Of the **Medicaid and Uninsured respondents** 42% [8 out of 19] experienced technical challenges during a video call. According to the respondents, the top technical challenges included the video not working properly and the sound being a little unclear {Pg. 33}.
 - Of the **Community Resident respondents** 24% [5 out of 21] experienced technical challenges during a video call. According to the respondents, the top challenges included the sound cutting in and out, the video not working, audio not working, and the video being interrupted. {Pg. 33}.

[CONTINUED] **Section D: Video Conferencing (Telehealth/Telemedicine)**

3. Slightly less than half of the respondents 43% [17 out of 40] would continue using video conferencing after the COVID-19 pandemic.
 - 3.1 Of the **Medicaid and Uninsured respondents** 47% [9 out of 19] would continue to use video conferencing after the COVID-19 pandemic, 21% [4 out of 19] would not continue to use video conferencing, and 32% [6 out of 19] were unsure if they would continue to use video conferencing or not. Those respondents that would not continue to use video conferencing shared they feel vitals cannot be monitored virtually and it doesn't feel personal to them {Pg. 34-35}.
 - 3.2 Of the **Community Resident respondents** 38% [8 out of 21] would continue to use video conferencing after the COVID-19 pandemic, 24% [5 out of 21] would not continue to use video conferencing, and 38% [8 out of 21] were unsure if they would continue to use video conferencing or not. Those respondents that would not continue to use video conferencing shared they feel vitals cannot be monitored virtually, it is difficult to show problems over the phone, and they prefer human interaction {Pg. 34-35}.

4. Of the respondents almost three-quarters (74%) are receptive of receiving healthcare services using a video call (a rating of a 4 or 5 on a 1 to 5 scale).
 - 4.1 Of the **Medicaid and Uninsured respondents** 90% [19 out of 21] are receptive of receiving healthcare services using a video call (a rating of a 4 or 5 on a 1 to 5 scale) {Pg. 36}.
 - 4.2 Of the **Community Resident respondents** 59% [16 out of 27] are receptive of receiving healthcare services using a video call (a rating of a 4 or 5 on a 1 to 5 scale) {Pg. 36}.
 - 4.3 Medicaid and Uninsured respondents (Mean=4.29) are more receptive to healthcare services using remote technology when compared to Community Resident respondents (Mean= 3.52) {Pg. 36}.

5. Of the respondents over half (57%) are confident with the quality of care they receive through a video call with a clinician or provider (a rating of a 4 or 5 on a 1 to 5 scale).
 - 5.1 Of the **Medicaid and Uninsured respondents** 67% [28 out of 42] are confident with the quality of care they receive through a video call with a clinician or provider (a rating of a 4 or 5 on a 1 to 5 scale) {Pg. 37}.
 - 5.2 Of the **Community Resident respondents** 51% [32 out of 63] are confident with the quality of care they receive through a video call with a clinician or provider (a rating of a 4 or 5 on a 1 to 5 scale) {Pg. 37}.
 - 5.3 Medicaid and Uninsured respondents (Mean=3.86) are slightly more confident with the quality of healthcare services using remote technology when compared to Community Resident respondents (Mean= 3.37).

{CONTINUED} **Section D: Video Conferencing (Telehealth/Telemedicine)**

6. Some of the respondents rated their level of confidence as a 3 or lower on a scale of 1 to 5.
 - 6.1 Of the **Medicaid and Uninsured respondents** who rated a 3 or lower, they feel video conferencing is not the same as an in-person visit, certain things cannot be done through video, the provider should physically exam a patient, and some people do not have access to the technology needed. {Pg. 38}.
 - 6.2 Of the **Community Resident respondents** who rated a 3 or lower, they feel similar to the Medicaid and Uninsured respondents. They feel video conferencing is not the same as an in-person visit, certain things cannot be done through video, the provider should physically exam a patient, and some lacked the confidence to understand/use the technology needed {Pg. 39}.

7. Many of the respondents (66%) do not have any concerns using Telehealth/Telemedicine.
 - 7.1 Of the **Medicaid and Uninsured respondents** 31% [13 out of 42] have some concerns using Telehealth/Telemedicine {Pg. 40}.
 - 7.2 Of the **Community Resident respondents** 37% [23 out of 63] have some concerns using Telehealth/Telemedicine {Pg. 40}.

8. “The quality of care,” “I am unclear about what healthcare services can be addressed virtually,” and “I am not sure what the end result will be” are the top three concerns about using Telehealth/Telemedicine for both groups.
 - 8.1 Of the **Medicaid and Uninsured respondents** 85% [11 out of 13] are concerned with the quality of care they will receive, 62% [8 out of 13] are unclear about what healthcare services can be addressed virtually, 54% [7 out of 13] are not sure what the end result will be, 31% [4 out of 13] have a privacy concern, 8% [1 out of 13] don’t understand the technology needed, and none of the respondents in this group are concerned with scheduling the appointment or how to pay for it {Pg. 41}.
 - 8.2 Of the **Community Resident respondents** 61% [14 out of 23] are concerned with the quality of care they will receive, 48% [11 out of 23] are unclear about what healthcare services can be addressed virtually, 30% [7 out of 23] are not sure what the end result will be, 17% [4 out of 23] have a privacy concern, 13% [3 out of 23] don’t understand the technology needed, 4% [1 out of 23] are concerned about scheduling the appointment and none of the respondents in this group are concerned with how to pay for the appointment {Pg. 41}.
 - 8.3 Some other concerns of the respondents include: 1) type of exam (virtual) (both groups), 2) the referral process, 3) lack of access to needed technology, and 4) unable to see visual cues from the provider virtually (Community Residents).

Section E: Returning to a Provider's Office after the COVID-19 pandemic

1. Overall, some of the respondents (43%) have a low level of nervousness (a rating of 1 or 2 on a scale of 1 to 5) about returning to a medical office in-person after the COVID-19 pandemic. However, 38% are moderately to extremely nervous (with a rating of 4 or 5 on a 1 to 5 scale) to return to medical office in-person after the COVID-19 pandemic.
 - 1.1 Of the **Medicaid and Uninsured respondents** 40% [17 out of 42] are nervous to return to a medical office in-person after the COVID-19 pandemic, and rated a 4 or 5 on a 1 to 5 scale. {Pg. 42}.
 - 1.2 Of the **Community Resident respondents** 19% [12 out of 63] are nervous to return to a medical office in-person after the COVID-19 pandemic, and rated a 4 or 5 on a 1 to 5 scale. {Pg. 42}.

2. “I know exactly what precautions my provider has taken to ensure my safety,” “my provider tells me it’s okay,” and “I feel safe” are the top three reasons patients will be comfortable returning to a medical office in-person after the COVID-19 pandemic for both groups.
 - 2.1 Of the **Medicaid and Uninsured respondents** 62% [26 out of 42] will be comfortable to return to medical offices in-person after the COVID-19 pandemic when they know exactly what precautions their provider has taken to ensure their safety, 60% [25 out of 42] when their provider tells them it’s okay, 62% [26 out of 42] when they feel safe, 55% [23 out of 42] trust their provider, 14% [6 out of 42] when the government says it’s okay, 7% [3 out of 42] when their family/friends say it’s okay, and 7% [3 out of 42] if other people go into an office, they will feel comfortable as well {Pg. 43}.
 - 2.2 Of the **Community Resident respondents** 80% [50 out of 63] will be comfortable to return to medical offices in-person after the COVID-19 pandemic when they know exactly what precautions their provider has taken to ensure their safety, 67% [42 out of 63] when their provider tells them it’s okay, 46% [29 out of 63] when they feel safe, 51% [32 out of 63] trust their provider, 13% [8 out of 63] when the government says it’s okay, 2% [1 out of 63] when their family/friends say it’s okay, and 2% [1 out of 63] if other people go into an office, they will feel comfortable as well {Pg. 43}.
 - 2.3 Some other reasons the respondents will be comfortable returning to a medical office include: 1) there is a vaccine, 2) their personal knowledge, 3) no second wave (Medicaid and Uninsured), 4) all cases have recovered or perished, and 5) scientists say it’s okay (Community Residents).

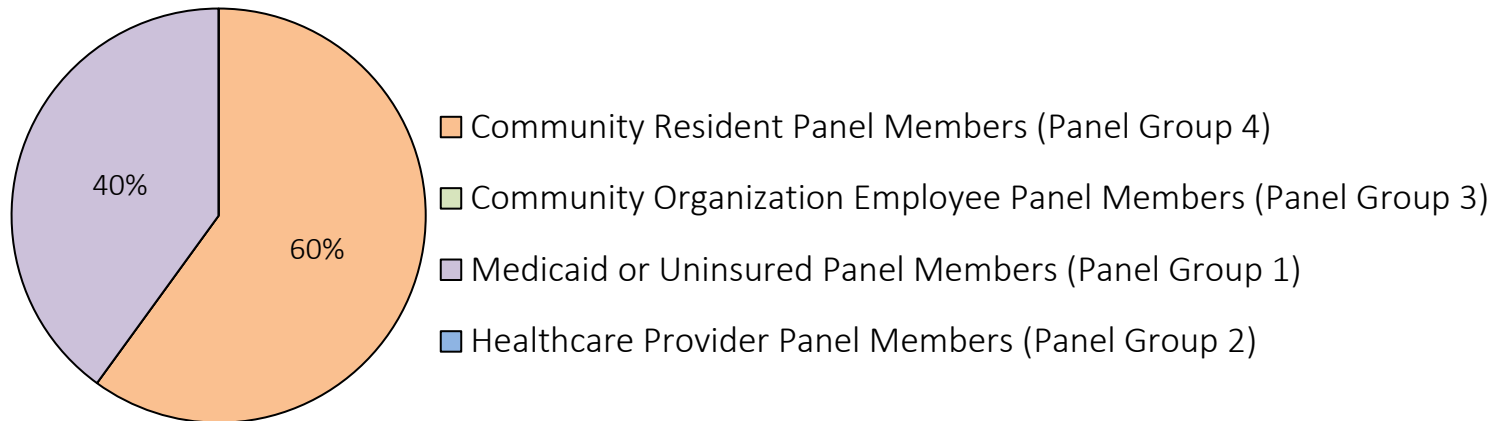
Section F: Trusted Sources of Information

1. “Governor Cuomo’s press conferences/releases,” “local news,” and doctor’s offices” are the top three most trusted resources of information related to COVID-19 for both groups.
 - 1.1 Of the **Medicaid and Uninsured respondents** 52% [22 out of 42] feel Governor Cuomo’s press conferences/releases are a trusted resource, 50% [21 out of 42] trust a doctor’s office, 48% [20 out of 42] trust the local news, 48% [20 out of 42] trust .gov websites, 12% [5 out of 42] trust President Trump’s press conferences, 17% [7 out of 42] trust friends and family, their employer and social media, and 7% [3 out of 42] trust their care/case manager. {Pg. 44}.
 - 1.2 Of the **Community Resident respondents** 71% [45 out of 63] feel Governor Cuomo’s press conferences/releases are a trusted resource, 51% [32 out of 63] trust the local news, 48% [30 out of 63] trust a doctor’s office, 41% [26 out of 63] trust .gov websites, 18% [11 out of 63] trust President Trump’s press conferences, 10% [6 out of 63] trust friends and family, 8% [5 out of 63] trust their employer and their care/case manager, and 6% [4 out of 63] trust social media. {Pg. 44}.
 - 1.3 Some other trusted sources of information include: 1) God, (Medicaid and Uninsured), 2) insurance companies, 3) retirement community administration (Community Residents), 4) medical websites, 5) scientists, 6) The New York Times, and 7) combining information from multiple sources (both groups).

Survey Results
Background and Methodology
Appendix

Survey Respondents: Group Breakdown

Survey Respondents: Group Breakdown n105		
Category:	n	%
Community Resident Panel Members (Panel Group 4)	63	60%
Medicaid or Uninsured Panel Members (Panel Group 1)	42	40%
Community Organization Employee Panel Members (Panel Group 3)	-	-
Healthcare Provider Panel Members (Panel Group 2)	-	-



Survey Respondents: County Breakdown

Survey Respondents: County Breakdown n105				
Category:	Live In		Work In	
	n	%	n	%
Broome	49	47%	45	43%
Tompkins	14	13%	14	13%
Cortland	11	10%	4	3%
Tioga	6	6%	3	3%
Steuben	5	5%	5	5%
Chemung	4	4%	3	3%
Schuyler	4	4%	3	3%
Delaware	3	3%	1	1%
Chenango	2	2%	2	2%
Cayuga	1	1%	-	-
Otsego	-	-	1	1%
Other	6	5%	24	23%

❖ Note: Respondents can join the panel if they work or live in one of the counties listed above. Additionally, not all current panel members have provided county information.

Patient Survey Results

AGE: n105; Single Response						
Category:	Total %		Medicaid or Uninsured Panel Members n42		Community Resident Panel Members n63	
	n	%	n	%	n	%
20-24	1	-	1	2%	-	-
25-30	-	-	-	-	-	-
31-34	4	4%	4	10%	-	-
35-39	4	4%	3	7%	1	2%
40-44	6	6%	4	10%	2	3%
45-49	11	10%	7	17%	4	6%
50-54	12	11%	5	12%	7	11%
55-59	10	10%	5	12%	5	8%
60-64	20	19%	5	12%	15	24%
65-69	18	17%	6	14%	12	19%
70-74	9	9%	-	-	9	14%
75+	4	4%	1	2%	3	5%
Not available	6	6%	1	2%	5	8%

Q1: How do you feel your access to your healthcare team(s) has been during the COVID-19 pandemic compared to before COVID-19?
n105; Single Response

Category:	Total %		Medicaid or Uninsured Panel Members n42		Community Resident Panel Members n63	
	n	%	n	%	n	%
Better	7	7%	4	10%	3	5%
Worse	37	35%	14	33%	23	36%
About the same	61	58%	24	57%	37	59%

Q1a: Why do you feel this way? n105; Single Response

Medicaid/Uninsured (n=42)

Better

- Still able to have a visit, just on video, making it better for me.
- Checking in on me to see if I'm okay.
- Seem more concerned.
- I feel that medical providers are taking extra precautions to safeguard my health at this time.

Worse

- I haven't been able to get a needed endoscopy. I was, however, able to have a telehealth visit.
- Can't get in to see a doctor. A lot of appointments have been cancelled.
- My 6-month old had to receive his immunizations in the backseat of my car.
- Everything's much harder.
- It's hard for me to get in for a face to face visit now that I have to worry about COVID.
- All appointments have been cancelled.
- They are there but you feel the need to stay away.
- Less desire from health officials to see low priority patients.
- Don't have that one-on-one feeling.
- Getting to doctor has been difficult after I was negative for COVID to get meds for whatever I did have.
- Video appointments do not always work.
- Challenging for the Physician to remember who you are without the visual experience.

- Several doctors were not open. Chiropractor, audiologist we're not accepting appointments. No safety.
- Yearly appointment was canceled with my gynecologist. No appointments available with my LLMD.

About the same

- They are available, just not in person.
- Because, as always, they are just a phone call away.
- I was able to change providers after 8 years easily.
- Prior to COVID, my PCP was available online through email. (Guthrie Now)
- Have not noticed much difference.
- Got in for child's sick appointment same day.
- Haven't had to go to the doctor.
- I have been able to do phone therapy appointments, but I had to cancel my annual physical.
- Dr still available for in-person or Telemedicine.
- I haven't needed anything.
- Phone calls, emails and portal contacts all the same.
- I don't think it takes any longer to get in. You might be able to get in quicker now, but I haven't tried.
- I know that if I need to see my doctor she is available.
- My doctor is still open and able to see me as if COVID didn't exist, she is a private practice NP.
- I haven't needed to make an appointment, so no difference.
- Because I rarely asked for access, I take good care of myself.
- I don't have a healthcare team, so it's the same.

{CONTINUED}Q1a: Why do you feel this way?
n105; Single Response

Medicaid/Uninsured (n=42)

{CONTINUED} About the same

- No changes medically.
- I have seen no increase or decrease in health care visits.
- I have had no problems.
- I was still able to be seen.
- I am generally healthy.
- Because it has been the same.
- No changes.

{CONTINUED}Q1a: Why do you feel this way?
n105; Single Response

Community Residents (n=62)

Better

- Telemedicine options, and they sent lab nurse to draw blood so I didn't have to go to a facility.
- Quick response to phone calls.
- The use of telemedicine has made some of my appointments much easier.

Worse

- Appointments have been cancelled and rescheduled several times.
- They are available by telephone, but I am reluctant to make an appointment, and I am avoiding contact.
- Appointments have been postponed.
- I have cancer, appointments are not easily conducted. I dislike phone appointments.
- No regular appointments.
- The virtual appointments are good but not thorough.
- Slower response time, due to needing to shift their focus to virus cases.
- Not entirely comfortable with appointments in doctor's office; video calls encompass less.
- Not willing to go in for routine check-ups, ongoing pains, better off waiting.
- I have quarterly glaucoma IOP checks. My last one

(scheduled for April) got canceled.

- Limited availability
- Less personal interaction and limited opportunity.
- All appointments other than urgent or emergency care have been cancelled.
- COVID is keeping me physically away.
- Because every appointment we had made was cancelled and needs to be rescheduled.
- Our county did not have access to testing for a long time, we still don't have antibody testing.
- Telemedicine is available, but procedures (ie. mammogram) have been delayed, plus I miss in person visits.
- They are not proficient in the use of technology.
- Office visits replaced by Telemedicine.
- My appointments have been cancelled or moved without notice.
- Offices are not opened. Staff doesn't seem to be working full time & call backs are delayed.
- Many medical offices are closed. I have no major health issues, but others do.
- Medical professionals should concentrate on the ill. I don't want to go to an office and don't need to.

{CONTINUED}Q1a: Why do you feel this way?
n105; Single Response

Community Residents (n=62)

About the same

- Have not needed to access health care (12).
- I have had needed appointments, some in person and some telemedicine.
- Personally, I have not had any issues, but if I did I still can talk to them on the phone.
- I can still get an appointment if needed.
- My provider offers telemedicine and I have had a med check using it. It worked fine.
- I'm still getting the same level of care and accessibility as before.
- More virtual than face to face but still available.
- I still call if I have an issue to discuss options.
- None of my appointments have been cancelled. We do them virtually including my annual physical.
- It has always been great. Responses to questions were answered quickly-cautious advice was given.
- Have only had to talk to them by phone.
- Seems available.
- I haven't had any problems.
- Seen no change.
- My PCP and specialist have not responded to any messages I have left for them.
- I've had access to my healthcare providers via phone, portal and have had appointments
- Access is not the problem; the problem is that the Federal Government did not prepare.
- I can still contact my primary care doctor.
- I know they are there in the office, but I avoided going.
- I assume they are still accessible if I needed them.
- Busy phone lines, long waits.
- No problem for me to get care.
- I was still able to contact them, get prescriptions as usual.
- Because my doctor was moved to another building.
- No reason.
- N/A.

Q2: How do you feel your access to your healthcare team(s) has been after the COVID-19 pandemic compared to during COVID-19?
n105; Single Response

Category:	Total %		Medicaid or Uninsured Panel Members n42		Community Resident Panel Members n63	
	n	%	n	%	n	%
Better	34	33%	15	36%	19	30%
Worse	9	11%	4	9%	8	13%
About the same	59	56%	23	55%	36	57%

Q2a: Why do you feel this way? n105; Single Response

Medicaid/Uninsured (n=42)

Better

- Will be able to see my doctors face to face (3).
- Providers will now have both methods to serve patients - in person and virtual.
- I hope telemedicine is here to stay.
- I think that health care will be better able to respond to changes.
- They have ramped up telemedicine.
- More concern for staff and patient safety.
- I will feel more free to be around others.
- More precautions in place.
- It has brought on a heightened sense of care.
- I'm hoping telehealth will continue to be offered.
- I'm hoping that things will open back up, increased safety measures.
- Practices will open back up and practitioners will be available.
- I don't know.

Worse

- Because it was pretty bad to start except my primary, but now everyone is going to be hesitant.
- I think this silliness will continue for many years to come.
- It will be harder to get in now to doctors with social distancing.
- Appointments are going to be booked for months out due to people not being able to see the doctor.

About the same

- I don't see a change (5).
- Still available.
- It doesn't feel like anything is different.
- Nothing changes I use the same doctors.
- Always very good care so it should not change.
- I don't think it will change much besides less wait to minimize contact.
- Medical providers still out there.
- Our area has not been hit hard, were getting ready to start elective procedures.
- Hoping it will be better, but from what I've seen thus far it looks like we need a better plan.
- Because I rarely see the doctor so I know she will still be there.
- I make sure that I keep my health up to date and I don't skimp.
- Because I have had no problems before the pandemic and none now.
- Why should it change?
- Things will still take time to get back to normal.
- They care.
- Will take time to get patients seen that need to be seen as priority first.
- Hopefully everything will go back to normal.
- More people will be going all at once.
- I don't know.

{CONTINUED}Q2a: Why do you feel this way? n105; Single Response

Community Resident (n=63)

Better

- They'll be stricter about check-ups.
- Ability to use telemedicine.
- Maybe some can remain virtual. I like it.
- They may now be able to continue the contact without in person visits.
- Change helps learn new and better ways.
- They have had time to regroup and tackle this huge pandemic, I think they are better prepared.
- It is my hope the use of telemedicine will streamline access to physicians.
- Doctor offices will get back to a more normal schedule.
- Will be able to have in person appointments. An actual assessment can be conducted.
- No fear of getting the virus.
- Offices will reopen at a more reasonable rate.
- Easier access.
- Appointments won't be cancelled.
- Physical participation.
- When we have a better understanding and tools, I won't be as afraid of seeking medical attention.
- Travel restrictions will be lifted allowing office visits.
- Staff will be working full time and offices will be open more regularly.
- Medical offices will re-open, hopefully.

- People with problems other than COVID-19 can go to their healthcare practitioners.

Worse

- I assume doctors will be backed up.
- They will be very busy.
- Not sure what changes will take place
- I'm concerned about the feasibility safe of ophthalmologist appointments.
- It is going to take months to catch up. Shortage before, worse now.
- Will take awhile to catch up and numbers of people scheduled may be reduced to have social distancing.
- They are not proficient in the use of technology

About the same

- Haven't been impacted so far.
- I can always talk to them.
- I think they will continue offering telemedicine for people who don't feel comfortable going in.
- People are afraid of change even if it's for the better.
- More face-to-face than virtual but still there. I will probably be more willing to seek care.
- I don't see any changes coming.
- They are going to have to ease back in as we all do.
- Scheduled appointment.
- I don't think it will be any different.

{CONTINUED}Q2a: Why do you feel this way?
n105; Single Response

Community Resident (n=63)

{CONTINUED}About the same

- Don't see why it would change much. My Providers are still actively providing.
- Because my healthcare has been exceptional, and I expect that it will be the same after this is over.
- The provider is very detailed and responsive.
- My health care at Guthrie is very good.
- I just do!
- No different.
- Why should it?
- Don't feel things will change.
- Why would it get better at this point.
- Hope that there is a change in Federal Leaders.
- I see no reason for a change.
- I know the office is staffed.
- I think they're trying to stay available to their patients.
- My health hasn't changed
- Who knows when the pandemic might end!
- Always busy lines, long waits.
- Might be a bit of a wait, and protocols will change, but I don't anticipate problems.
- No reason.
- Why would it change.
- My doctors have been open throughout this pandemic.
- Our health care teams care about us.
- Hopefully get to visit office.
- Healthcare will provide the care they need.
- Define "after". Until there is a vaccine readily available or the last contagious person is okay?
- I have no idea how it will be (2).

Q3: How have you communicated with your healthcare team(s) during the COVID-19 pandemic? n105; Multiple Response						
Category:	Total %		Medicaid or Uninsured Panel Members n42		Community Resident Panel Members n63	
	n	%	n	%	n	%
Over the phone	61	58%	26	62%	35	56%
Video call (Telehealth or Telemedicine)	40	38%	19	45%	21	33%
In-person at the office	31	30%	14	33%	17	27%
Email	27	26%	13	31%	14	22%
In person at my home	3	3%	1	2%	2	3%
Other*	26	25%	7	17%	19	30%

* Other includes: **Medicaid/Uninsured**- have not needed to access health care (2), backseat of car (1), patient portal (1), phone (1), N/A (2), **Community Residents**- have not needed to access health care (10), patient portal (3), left a note on office door (1), mail (1), hospital e-room (1), only spoke when they called to cancel an appointment (1), and none of the above (2).

Q3b: [If Q3(Video Call)=Yes] Did you like speaking to a clinician or provider through a video call? n40; Single Response						
Category:	Total %		Medicaid or Uninsured Panel Members n19		Community Resident Panel Members n21	
	n	%	n	%	n	%
Yes	32	80%	14	74%	18	86%
No	8	20%	5	26%	3	14%

Q3c: [If Q3(Video Call)=Yes] Did you experience any technical challenges (for example: difficulty hearing the provider, weak video connection) speaking to a clinician or provider through a video call?
n40; Single Response

Category:	Total %		Medicaid or Uninsured Panel Members n19		Community Resident Panel Members n21	
	n	%	n	%	n	%
Yes	13	33%	8	42%	5	24%
No	27	67%	11	58%	16	76%

AGE RANGE FOR TECHNICAL DIFFICULTIES: n13						
Category:	Total %		Medicaid or Uninsured Panel Members n8		Community Resident Panel Members n5	
	n	%	n	%	n	%
20-24	1	8%	1	12.5%	-	-
35-39	2	15%	2	25%	-	-
45-49	1	8%	1	12.5%	-	-
50-54	2	15%	2	25%	-	-
55-59	1	8%	-	-	1	20%
60-64	2	15%	-	-	2	40%
65-69	3	23%	1	12.5%	2	40%
Not available	1	8%	1	12.5%	-	-

Q3d: [If Q3c=Yes] Please describe the technical challenge(s) you have experienced.
n13; Open-ended

Medicaid/Uninsured (n=8)

- Zoom didn't work on my tablet - had to use cell.
- Setting up the video.
- Video call would not stay connected we ended up just talking on the phone.
- Video wasn't working properly
- The provider sent me the wrong link, and the provider had technical issues on their end too.
- Wouldn't go through or work.
- Their sound was not clear, that was my only issue.
- My computer specifically wouldn't allow access to my front facing camera during the meeting.

Community Residents (n=5)

- Trouble connecting, then trouble with audio.
- The video connection was interrupted. One call the provider had difficulty, unable to make call.
- I couldn't get my microphone to work. Eventually we use the video and I use my regular phone for the voice part.
- Their video connected but mine wouldn't.
- A small amount of voices cutting out. It was not a big deal.

Q3e: [If Q3(Video Call)=Yes] If given the option, do you think you will continue to use video conferencing (Telehealth/Telemedicine) after the COVID-19 pandemic? n40; Single Response						
Category:	Total %		Medicaid or Uninsured Panel Members n19		Community Resident Panel Members n21	
	n	%	n	%	n	%
Yes	17	43%	9	47%	8	38%
No	9	22%	4	21%	5	24%
I don't know	14	35%	6	32%	8	38%

Q3ee: [If Q3e=No] Please explain why.
n9; Open-ended

Medicaid/Uninsured (n=4)

- Vitals need to be monitored.
- Doesn't feel personal.
- Hard for the doctor to really assess me.
- I'd rather see the person face-to-face and interpret what they say with body language.

Community Resident (n=5)

- I like human interaction.
- The physical was not thorough.
- Prefer person to person, can't get blood pressure checked by phone.
- Too difficult to show problems over phone or computer.
- They are useless. How can you do a physical exam?

Q3f: Using a scale of 1 to 5, where 1 is “not at all” and 5 is “extremely,” how receptive are you to receiving healthcare services using a video call with a clinician or provider where you interact remotely using technology (also known as Telehealth/Telemedicine)??
n48; Single Response

	Not at all 1		2		3		4		Extremely 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	4	8%	4	8%	5	10%	17	36%	18	38%	3.85
Medicaid or Uninsured Panel Members; n=21	1	5%	1	5%	-	-	8	38%	11	52%	4.29
Community Resident Panel Members; n=27	3	11%	3	11%	5	19%	9	33%	7	26%	3.52

Q3g: Using a scale of 1 to 5, where 1 is “not at all” and 5 is “extremely,” how confident are you in the quality of care received using a video call (Telehealth/Telemedicine) with a clinician or provider?
n105; Single Response

	Not at all 1		2		3		4		Extremely 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	7	7%	12	11%	26	25%	35	33%	25	24%	3.56
Medicaid or Uninsured Panel Members; n=42	1	2%	5	12%	8	19%	13	31%	15	36%	3.86
Community Resident Panel Members; n=63	6	9%	7	11%	18	29%	22	35%	10	16%	3.37

[If Q3g=3 or lower] Please explain why.
n45; Open-ended

Medicaid/Uninsured (n=14)

- Because it just isn't the same as an in-person visit.
- Because my health is important and can't see inside body by video chat.
- Certain things just cannot be seen or done over the phone.
- Doesn't feel the same as been there in person.
- Don't like it.
- Doctor cannot check blood pressure, or level of sinus swelling etc. through a video call.
- Haven't done any.
- I feel a good portion of Healthcare is seeing the patients and any symptoms if they have any.
- I feel some exams need to be in person to evaluate heart rate, oxygen levels, skin tone, etc.
- If the provider doesn't have to touch me or physically examine me, then I'm good with telemedicine.
- It's not a universally accessible median. Some families simply don't have that access available.
- It's just not the same as in person.
- I've never done a video call, ever.
- My doctor picks up a lot of information from physical signs you wouldn't see on video.
- N/A

{CONTINUED}[If Q3g=3 or lower] Please explain why.
n45; Open-ended

Community Resident (n=31)

- Am not confident on my computer.
- Because doctor can't see or touch me to help make diagnosed.
- Can work as a first level of treatment.
- Can't check patient physically.
- Didn't have video call.
- Doesn't seem adequate.
- Haven't used it.
- I did not have a video call. I made a phone call to reschedule an appointment.
- I did not use any telemedicine. If I had, it would be better than nothing.
- I don't believe they are well versed in the use of technology.
- I feel it depends on what your medical needs are. Some conditions might be okay done by Telemedicine.
- I feel that for certain regular checkups Telemedicine could be fine. Things can be missed in a telemedicine.
- I feel that my needs would be better met in person, especially an assessment of heart/lung.
- I have not done this.
- I have special issues that I don't think can be helped over telehealth.
- I think they will need to listen more to what is happening with you.
- I trust them.
- IOP can't be measured remotely.
- It really depends on the circumstance. Most issues virtual is fine but some need exam.
- Lack of access technology.
- Never had one.
- Never used.
- Newness of this option.
- Not applicable, did not access Telehealth/Telemedicine.
- Some can be missed by not physically being seen by the physician.
- Something will be lost in the absence of a real physical exam.
- Sometimes PC must have "hands on" examination
- There is no ability to examine the patient. Many missed opportunities.
- There would be no general exam before discussing problem.
- Video eliminates the dr. ability to feel, see (as well), smell for physical exam, but okay for consult.
- Video is ok for minor issues that can be easily diagnosed, but in-person is best for diagnosing.

Q3h: Do you have any concerns using Telehealth/Telemedicine? n105; Single Response						
Category:	Total %		Medicaid or Uninsured Panel Members n42		Community Resident Panel Members n63	
	n	%	n	%	n	%
Yes	36	34%	13	31%	23	37%
No	69	66%	29	69%	40	63%

Patient Survey Results

Q3i: {IF Q3h=Yes} What are your concerns with using Telehealth/Telemedicine? n36; Multiple Response						
Category:	Total %		Medicaid or Uninsured Panel Members n13		Community Resident Panel Members n23	
	n	%	n	%	n	%
The quality of care I will receive	25	69%	11	85%	14	61%
I am unclear about what healthcare services can be addressed virtually	19	53%	8	62%	11	48%
I am not sure what the end result will be (Will I still be referred to a doctor's office? Will I receive the medication I need? Etc.)	14	39%	7	54%	7	30%
Privacy Concern	8	22%	4	31%	4	17%
I don't understand the technology needed	4	11%	1	8%	3	13%
Scheduling the appointment	1	3%	-	-	1	4%
How I pay for it	-	-	-	-	-	-
Other*	7	19%	1	8%	6	26%

* Other includes: **Medicaid/Uninsured**- no hands on exam (1), **Community Residents**- doctors need to see patients in-person (2), follow-up and referrals seem more elusive (1), no access to microphone or webcam (1), okay for first contact but not for physical assessment (1), and missed visuals that can be picked up at an in-person visit (1).

Q4: Using a scale of 1 to 5, where 1 is “not at all” and 5 is “extremely,” how nervous are you to return to a medical office in-person after the COVID-19 pandemic?
n105; Single Response

	Not at all 1		2		3		4		Extremely 5		Mean Score
	n	%	n	%	n	%	n	%	n	%	n
Aggregate	16	15%	29	28%	31	29%	20	19%	9	9%	2.78
Medicaid or Uninsured Panel Members; n=42	6	14%	9	22%	10	24%	11	26%	6	14%	3.05
Community Resident Panel Members; n=63	10	16%	20	32%	21	33%	9	14%	3	5%	2.60

Q4b: What will make you comfortable to return to medical offices in-person after the COVID-19 pandemic? n105; Multiple Response						
Category:	Total %		Medicaid or Uninsured Panel Members n42		Community Resident Panel Members n63	
	n	%	n	%	n	%
I know exactly what precautions my provider has taken to ensure my safety	76	72%	26	62%	50	80%
My provider tells me it's okay	67	64%	25	60%	42	67%
I feel safe	55	52%	26	62%	29	46%
I trust my provider	55	52%	23	55%	32	51%
The government says it's okay	14	13%	6	14%	8	13%
My family/friends say it's okay	4	4%	3	7%	1	2%
If other people go into an office, I feel comfortable going as well	4	4%	3	7%	1	2%
Other*	16	15%	7	17%	9	14%

* Other includes: **Medicaid/Uninsured**- there is a vaccine (2), Dr. Fauci (1), my own knowledge (1), never doubted going (1), CDC (1), no second wave and data (1) **Community Residents**- when scientists say it's okay (2), I will know (1), nothing has changed for me (1), I am comfortable with precautions to take (1), all COVID-19 cases have recovered or perished (1), threat is deemed as minimal (1), and when people take it seriously (1). One respondent stated, "not available."

Patient Survey Results

Q5: What is/are your trusted source(s) of information related to COVID-19? n105; Multiple Response						
Category:	Total %		Medicaid or Uninsured Panel Members n42		Community Resident Panel Members n63	
	n	%	n	%	n	%
Governor Cuomo's press conferences/releases	67	64%	22	52%	45	71%
Local news	52	50%	20	48%	32	51%
Doctor's offices	51	49%	21	50%	30	48%
.gov websites	46	44%	20	48%	26	41%
President Trump's press conferences	16	15%	5	12%	11	18%
Friends and family	13	12%	7	17%	6	10%
Your employer	12	11%	7	17%	5	8%
Social media	11	11%	7	17%	4	6%
Care/Case Manager	8	8%	3	7%	5	8%
Other*	24	23%	7	17%	17	27%

* Other include: **Medicaid/Uninsured**- myself (2), my church (1), God (1), Dr. Fauci (1), comparing multiple sources (1), The New York Times (1), **Community Residents**- scientists/scientific experts (5), national news (2), medical websites (1), NPR (1), IMHE (1), New York Times (1), administration in retirement community (1), common sense (1), friends who are medical providers (1), insurance company (1), multiple avenues combined (1), and myself (1).

Background and Methodology
Appendix



- ❖ This report details the findings from the COVID-19 Impact Panel Survey conducted and administered electronically to Care Compass Network (CCN) panel members (Group 1: Medicaid and Uninsured and Group 4: Community Residents) in mid May 2020. The objective of this research was to **better understand panel members' health care experience related to the COVID-19 pandemic.**
- ❖ This study consisted of an online survey that was administered to CCN panel members. The surveys included 22 questions and took respondents approximately 5 minutes to complete. A total of **105 surveys were completed representing a response rate of 12%.** Fieldwork lasted from **May 14th, 2020 to May 28th, 2020.**
- ❖ CCN partnered with Research & Marketing Strategies, Inc. (RMS) in the Spring of 2015 to create an online panel to engage in a series of research studies. This panel is comprised of four key stakeholder groups: (1) those individuals on Medicaid or uninsured; (2) clinical and non-clinical providers who see Medicaid and uninsured patients; (3) community groups, and (4) the population-at-large. The key role of the panel is to review and respond to material shared regarding improving area healthcare delivery and access.
- ❖ Any questions or comments regarding this market research study can be directed to Sara Cruz, Research Analyst at Research & Marketing Strategies, Inc. (RMS) at 1-866-567-5422 or email at SaraC@RMSResults.com.

Appendix

The information contained in this study has been obtained from primary sources and/or was furnished directly from the clients listed in this report. All source materials and information so gathered and presented herein are assumed to be accurate, but no implicit or expressed guarantee of data reliability can be assumed. This study has been prepared in the interest of a fair and accurate report, and therefore all of the information contained herein, and upon which opinions have been based, have been gathered from sources that Research & Marketing Strategies, Inc. (RMS) considers reliable.

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Certified by: 
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