
NEWS

For Immediate Release

Media Contact: Heidi Otway, 850-681-3200 / 850-597-2771 cell, heidi@saltermitchellpr.com

With More Options Than Ever, Florida Seniors Still Express Similar Frustrations About Their Medicare Advantage Plans

Survey Shows Access to Doctors, Costs, and Changes to Plans Are Causes of Concern

FT. LAUDERDALE, Fla (November 14, 2018) Florida seniors over 65 have less than a month to purchase Medicare Advantage plans during the current open enrollment period that closes on December 7th. The [average beneficiary is able to shop among 24 Medicare Advantage plans](#) in their area. Yet with all of these options, a recent survey commissioned by [Devoted Health](#) showed that seniors polled in Florida continue to experience frustrations with the plans they chose.

Frustration #1: Access to Doctors

“Not being able to choose the doctor I want all the time,” was a concern shared from a survey respondent from Palm Beach County. A respondent in Broward wrote about the “difficulty of finding a good primary care physician,” while in Citrus County, a survey respondent said, “doctors are over 45 miles away.” A Flagler County respondent lamented about “specialists out of network.” A respondent in Pinellas County wrote the “booklet shows hundreds of doctors, but when you call to get a new doctor they no longer carry that insurance plan.”

Devoted Health Florida Market President Dariel Quintana says the annual open enrollment period is a good time for seniors to assess their current plans and make changes, which may include switching to another insurance provider to get better access to the doctors they want and benefits that lead to better healthcare outcomes.

Frustration #2: Expected and Unexpected Costs

Cost was another top frustration, with several seniors writing about “high co-pays.” A respondent from Sumter County stated concerns about “the antiquated medical system we have in the U.S. (sic) that costs will rapidly range out of control and government funding (Medicare) will not follow suit.”

A woman in Pinellas County said her current plan provider views her “as just a number to them,” and stated, “they don’t pay when I need them.”

Frustration #3: Changes to Their Plan

Seniors shared a third top frustration — changes being made to their Medicare plan after they had enrolled. A respondent in Sarasota said, “[My] company keeps changing carriers,” while another in Pasco said they were frustrated by the concern of “Being sold to another company not as good.” A respondent in Palm Beach wrote that “They are making many changes mid-year,” and another respondent from the same area said “Mid-year, my plan dropped contracts with local hospital and doctors.” A respondent from Broward was frustrated that their plan “Changed the formulary list” after they had enrolled.

Other findings from the Florida seniors polled include:

- 50 percent said the most important factor they consider when choosing a plan is having their personal doctor in-network
- 42 percent were seeking a plan that provided the right benefits at a reasonable price
- 31 percent were afraid of surprise costs
- 27 percent were concerned that drastic changes could be made to their Medicare Advantage plan

“I’ve been in the health insurance industry for two decades and while there have been a number of advances, I’m not surprised that we keep hearing the same frustrations from seniors with Medicare Advantage plans,” Quintana said. “At Devoted, we are working diligently to disrupt the system as a ‘payvidor’ – a combination of a ‘payor’



and ‘provider’ of health care services, so our members are treated like family and will receive the best care possible.”

As a Medicare Advantage plan, Devoted Health is responsible for the full cost of care of its members and has a true incentive to keep its members healthy. With this in mind and a deep belief that every Devoted member should be treated as one would treat their own family, the company is partnering with healthcare providers in ways that empower them to deliver the highest-quality care possible. In addition, Devoted Health will provide dedicated guides to help members navigate the healthcare system and will deliver tech-enabled Devoted care services to the home, including clinician house-calls for patients who are sickest and most at risk.

To learn more about Devoted Health and its Medicare Advantage plans, visit devoted.com.

About the survey

The survey was commissioned by Devoted Health and conducted in August 2018 among a statewide representative sample of 525 Florida residents ages 65 to 80 who are currently enrolled in Medicare Advantage plans. The margin of error was 5 percent.

About Devoted Health

Devoted Health is a next-generation Medicare Advantage plan guided by a deep belief that every member should be treated like we would treat our own family: with loving care, a profound commitment to their health and well-being, and respect for them and their time. As a “payvidor” that integrates being both a payor and provider of healthcare services, Devoted partners with top doctors and hospitals, uses industry-leading technology, and supports members with dedicated guides and tech-enabled care services in order to help Medicare beneficiaries get the highest-quality health care -- the right care in the right place at the right time. For more information, go to www.Devoted.com and follow us on Twitter @DevotedHealth.