





Equity for Seniors:Using Data to Guide COVID-19

Pandemic Recovery

Avalere Health | An Inovalon Company

A Few Housekeeping Items



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If you have a question for the speakers, or how to use ON24, please submit your question through the Q&A box.

Today's Speakers

Speaker



Kristi Mitchell
Practice Director, Center for
Healthcare Transformation

Avalere Health

Speaker



Richard Ashworth
President and CEO

Tivity Health

Speaker



Leana Wen, MD Senior Advisor

Avalere Health



Seniors Bear Disproportionate Risks of COVID-19 Mortality

Risk for COVID-19 Hospitalizations & Deaths by Age Group	Hospitalizations	Deaths
30 – 39 years old (Reference Group)	1x	1x
40 – 49 years old	1.5x	2.9x
50 – 64 years old	2.5x	8.9x
65 – 74 years old	3.5x	24.4x
75 – 84 years old	5.5x	62.2x
85+ years old	8x	175.6x

CDC Data as of February 18, 2021



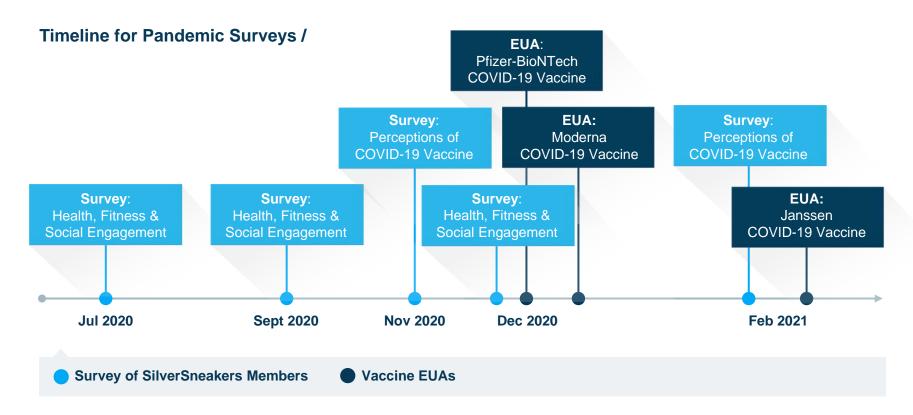
88% of all deaths from COVID-19 in 2020 were in individuals over the age of 60.

Source: "Older Adults", Centers for Disease Control and Prevention. Accessed at: https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/older-adults.html



New Survey Data Highlights Seniors' Lived Experiences During the COVID-19 Pandemic

Tivity Health Solicited Senior Feedback Beginning in July 2020 /



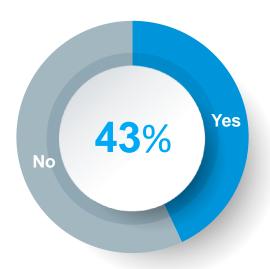




COVID-19 Will Impact Seniors' Health for Years to Come

Seniors Report Delays in Medical Care, Changes in Fitness & Nutrition Habits Resulting from the Pandemic /

Delays in Medical Care /



Reasons for Delaying or Avoiding Appointments /

- Felt unsafe visiting a medical office during Coronavirus (70%)
- Medical office was temporarily closed due to Coronavirus (27%)
- Adhering to local or state stay-at-home recommendations (18%)

Changes in Fitness & Nutrition /

49%

Respondents reporting a **decrease** in their level of physical activity vs. pre-COVID-19 in Dec 2020, up from 45% in May 2020

29%

Respondents reporting that their eating habits are worse when compared to beginning of the COVID-19 period in Dec 2020



Social Networks Inform Seniors' Decisions on Vaccine

Responsibility to Local Communities Is Consistently Identified as a Driving Factor in Vaccine Uptake /

I will get vaccinated...

To protect myself



"Given my age, my health problems, and the fact that I live alone, I do not want to put any added burden on my community."

To protect my family



"I would take it because I want to be able to see my family."

To protect my community



"People who are working and must be out and about in the community should be vaccinated first."

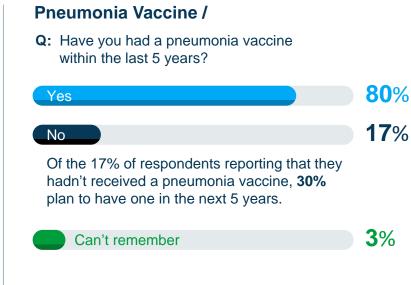
N = 3,142; Data reported in November 2020 among senior respondents who plan to get the Coronavirus vaccine



Barriers to Flu & Pneumonia Vaccine Uptake Highlight Need for Proactive, Consistent Messaging

Historical Learnings Can Shape Ongoing Communications /

Flu Vaccine / Q: Do you plan on or did you already get your flu vaccine this season? Already received flu vaccine Among minority survey respondents, 76% report receiving the flu vaccine. Among low-income respondents, 66% report receiving a flu vaccine. Plan to get flu vaccine 4% Do not plan to get flu vaccine 13% Don't know



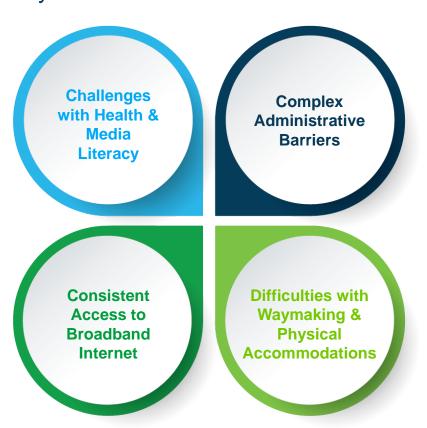


Clear, consistent recommendations from clinicians and other trusted sources of information is critical in driving broad uptake among seniors.



Rollout of COVID-19 Vaccine Highlighted Persistent Challenges to Healthcare Access for Seniors

Key Social Determinants Burden Most Vulnerable Subsets /



Feedback from Seniors /

"Finding it more and more difficult to access sites and phone lines that are always busy. You just want to throw up your hands and chuck it all – days wasted for nothing."

"Very frustrating trying to get [an] appointment. No way to tell where you are on list."

"Just can't get it – process to get it is like a **scavenger hunt** and a full-time job – a mess."

Source: Tivity Health, "Trust, Timing and COVID: A Vaccine Study Among US Seniors" (February 2021)

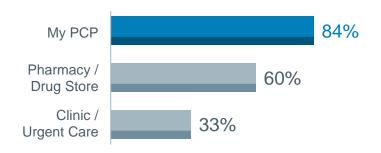


Preferred Locations for Vaccine Differed from Initial Sites for Early Vaccine Rollout

Seniors Prioritize Primary Care Providers & Pharmacies but Report Access Through Mass Vaccination Sites /

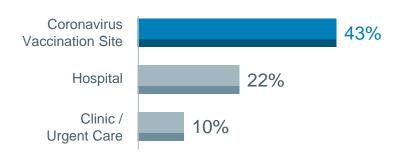
What locations would you consider going to for the Coronavirus vaccine?

November 2020 (n=3,153)



Where did you go to get the Coronavirus vaccine?

February 2021 (n=2,960)





Rationale for Incorporating Senior Preferences for Vaccine Sites:

- Familiarity with navigation and wayfinding
- Established channels for patient communication and follow up
- Proven trust between seniors and community-based providers

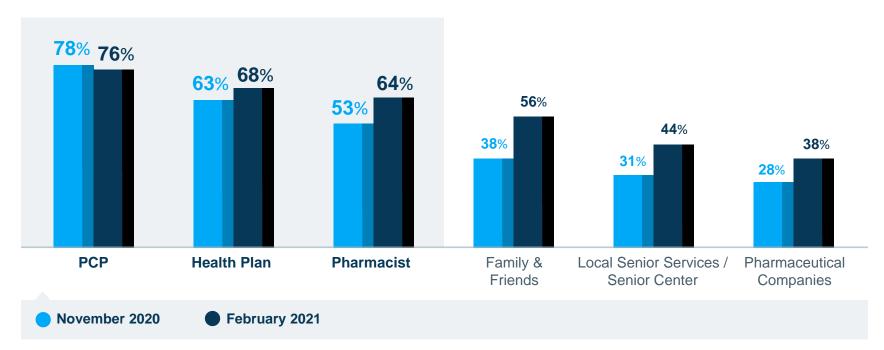


PCPs, Health Plans & Pharmacists Wield Steady Influence on Seniors' COVID-19 Vaccine Decisions

Family & Friends More Influential in Decision Over Time /

Trusted Sources of Vaccine Information (Non-Governmental) /

Q: How likely will you be to get the Coronavirus vaccine once available, if suggested by the following sources?



Data reflects survey respondents reporting they would be "Very Likely" or "Somewhat Likely" to get the vaccine if suggested by denoted sources. Nov 2020: 3,474 respondents: Feb 2021: 1,369 respondents





Recommendations for Effective Senior Engagement on COVID-19 Vaccine Uptake

Engage Trusted Messengers

- Provide members of local communities with evidence-based tools and resources to address seniors' questions and concerns
- Solicit guidance from local organizations on preferred locations for accessing healthcare services

Tailor Outreach to Specific Demographic Needs

- Specific demographic subsets (e.g., rural, lowincome, and minority populations) have varying preferences for outreach and engagement related to healthcare
- Identify unique pain points that must be addressed to guide individual decision making

Clarify Vaccine Costs

- Develop communication materials with provider organizations and health plans to address costsharing obligations
- Identify new partnerships to address non-medical costs associated with vaccine access and uptake

Address Data on Side Effects

- Seniors report that experiences related to side effects, whether major or minor, are likely to impact their decision to receive the vaccine
- Evidence-based information from credible sources (e.g., PCPs, health plans) is critical to counteract potential misinformation





Effective Pandemic Recovery Requires Robust, Reliable Vaccination Infrastructure as a Foundation

Robust Vaccination Infrastructure

Start Here



Stage 1: Communicating Logistics

Clarify "When"

Ensure awareness of availability & prioritization

Facilitate "Where"

Provide access to vaccine through preferred location

Make How Easy

Streamline operations to address seniorspecific needs (e.g., clear waitlists, accommodations for disabilities)

Stage 2: Establishing Trust

Share Experiences

Engage early adopters to relay real-world observations

Mobilize Stakeholders

Establish alliances between trusted entities (e.g., community groups, faithbased orgs) to drive uptake

Clarify Learnings

Address concerns from "wait and see" segments

Stage 3: Supporting Continued Uptake

Path to Pandemic Recovery

Maintain Contact

Follow up with patients for tracking & monitoring

Focus on Backlog

Develop plans to address healthcare needs delayed during pandemic











Q&A

