



CS 147



FINDING ASSURANCE IN INSURANCE

Angela Mao, Delali Bruce, Abbie Maemoto, Susan Lee





OUR TEAM



delali
cs & design '26
kombucha enthusiast

abbie
cs '25
celsuis enthusiast

susan
cs '25
film enthusiast

angela
cs '25
strawberry acai
refresher enthusiast



PROBLEM DOMAIN

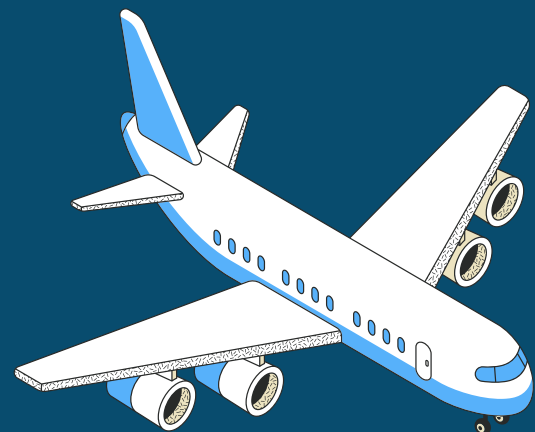


Our inspiration



Our own experiences as students arriving at Stanford and seeking medical attention

How do young people navigate their healthcare experience?



Understanding insurance plan benefits

Finding affordable, in-network care

Finding care upon moving to a new city

Moving from parent insurance to an independent



NEEDFINDING CRITERIA

WHO

- Young demographic (20-30 y.o.)
- Moved to a new city within the last 5 years

WHY

- Young people face challenges with insurance transitions
- Seek medical help on their own, perhaps for the first time

WHERE

- Both in-person & virtually (6 total)
- Interviewee's location of preference (places of comfort)

NORMS

- At least 2 team members present
- 1 person interviewing, 1 person note-taking & filming
- Incentivized with "Thank You" tokens of appreciation (i.e. coffee)

HOW

- Zoom for virtual interviews; iPhone camera for filming
- iPhone voice memos for audio-only





QUESTIONS EXPLORED

- Tell us about a time you sought care in a **new city**- how did you go about finding it?
- Do you have health insurance?
 - If so, tell us about your **current plan and its benefits**. Tell us how you **find care within your network** plan.
 - If not, tell us about the motivations behind opting out of
- What resources do you use to find the best care for ***your needs***?



!! EXTREME USER !!

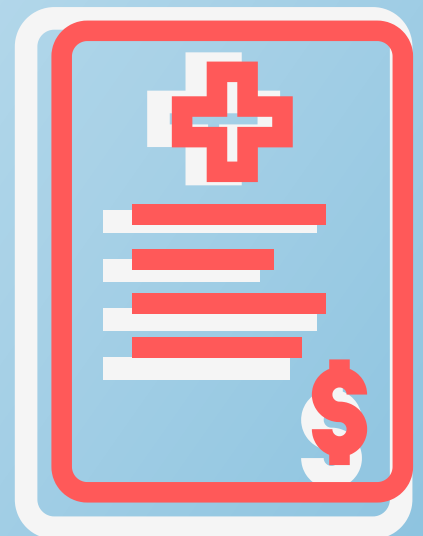


Extreme User in Frequency of Care

- Seeks medical care often (2-3x/month)
- 10+ treatment methods prescribed

Why High Frequency is Extreme:

- Plethora of experience in finding out-of-state healthcare
 - Diversity in type and quality of care
- More visits = more co-pays
 - Want to explore how financials play a role in influencing healthcare decisions



Anastazja K.

Junior at Stanford

Earth Systems

Stanford, CA



FEATURED INTERVIEWEES



Alia

*Biotech start-up
founder
San Francisco, CA*



“Bob”

*Management
Consultant
Boston, MA*



Connie Liu

*Entrepreneur
Palo Alto, CA*



Anastazja K.

*Junior at Stanford
Earth Systems
Stanford, CA*



ADDITIONAL INTERVIEWEES



Dr. David Svec
*Internal Medicine at
Stanford Medicine
Palo Alto, CA*



Lyubo
*UX Designer
Palo Alto, CA*

**** SEE APPENDIX ****



Anastazja

Junior at Stanford

South Bend, IN

*** Extreme User ***

“There is so much **bureaucratic infrastructure** that is really **intimidating** when all you need to know is where to go to get help that is **affordable**”



SAY

THINK

DO

FEEL

"I'm not an expert on how my own health insurance works"

"Getting things transferred to the West Coast has been incredibly difficult"

"My healthcare journey here has been so difficult because of all of the transitions"

"The system is designed for someone with a one-off infection, not a recurring infection"

"I had to call and beg and cry to be seen"

"Had to call and email and talk to so many different doctors to establish a relationship"

"None of my doctors noted me down for a follow-up"

"it's nearly impossible for my doctor in South Bend, Indiana to communicate with Stanford"

"I feel like I'm always the middle man between medical institutions"

"I've been mishandled by Stanford Hospital"

"I needed further assistance"

"I had a lung infection and recurring UTIs"

"My health insurance is tied to my father's job which means its limited to the state of Indiana"

"I've had to advocate for myself again and again"

The lack of communication between medical stakeholders is systemic

Physical health is a big part of mental health and well-being

Many doctors prescribe "quick-fixes" rather than thinking about the bigger picture of a patient's health

Universities are inequitable when it comes to providing care to athletes vs students

It's easier to pay more money than navigate the complexities of health insurance.

Getting primary care is essential, regardless of the cost

Quality of care is subpar at the university-level

Quick access to medication is the best reliever for health-related anxieties

When quality of care is unsatisfactory, there is greater compulsion to frequent the clinic more often

The logistical nightmare of transferring insurance disincentivizes her to switch out of her Indiana-based insurance

Finding the right care provider is a long and difficult process that requires lots of trial and error.

Greater frequency of care is a significant source of stress

Having access to own records should be a given, not a fight

Constantly advocating for herself to the Student Health Services

Has to call providers in both Indiana and Stanford constantly to get medical records

Paid \$10-15k in medical bills over 2 years

Forced to find an out-of-network primary urologist in the Bay

Gestures very adamantly as she describes her prolonged journey of treating a recurrent problem

Used to live in South Bend, Indiana but now is at Stanford

9 rounds of antibiotics, chest X-ray, kidney ultrasound, CT scan, and other minor procedures and scans

Takes cranberry pills as a way to offset UTI symptoms until she can get care

Visits Vaden Health Center frequently (at least 1-2 times per month)

Laughs uncomfortably when talking about her infections

Goes to Stanford hospital very frequently (at least once per quarter)

Tearful when talking about her frustrations with being forced to go to Stanford Hospital

Has to fly home to Indiana to receive primary care

Rides horses as a form of well-being

Cares deeply about the environment and natural Earth

Deep mistrust in hospital systems and medical professionals

Tired of having to advocate for herself when quality, recurrent care should be a given

Grateful for easy online interfaces for access to care

Relief from hearing a medical professional's opinion

Anxiety about recurring health problems

Pride in taking initiative of her own healthcare

Frustrated with long call wait times across different medical providers

Angry about the inaccessibility of her own records

Indifferent about the cost of care, as long as she can receive quality care

Extremely nervous about when new or recurring symptoms will surface

Sensitive about the stigma behind seeking frequent healthcare

Comfort in having regular check-ups with a physician

Need to seek external validation that she is healthy in order to live happily

SAY

THINK



DO

FEEL

Finding healthcare upon moving to a new city during a new and exciting time in life is extremely difficult

Healthcare for college students is meant to treat one-time problems, not recurrent issues

The patient shouldn't have to continuously advocate for their own care to their own doctors

There needs to be better communication between medical professionals and stakeholders

Takes over-the-counter medication as a way to mitigate symptoms until she can find care

Has to take a flight home to seek primary care from physician with all her medical records

Severe anxiety about whether or not she has received adequate care

Exhausted from having to communicate with so many different stakeholders in her own care

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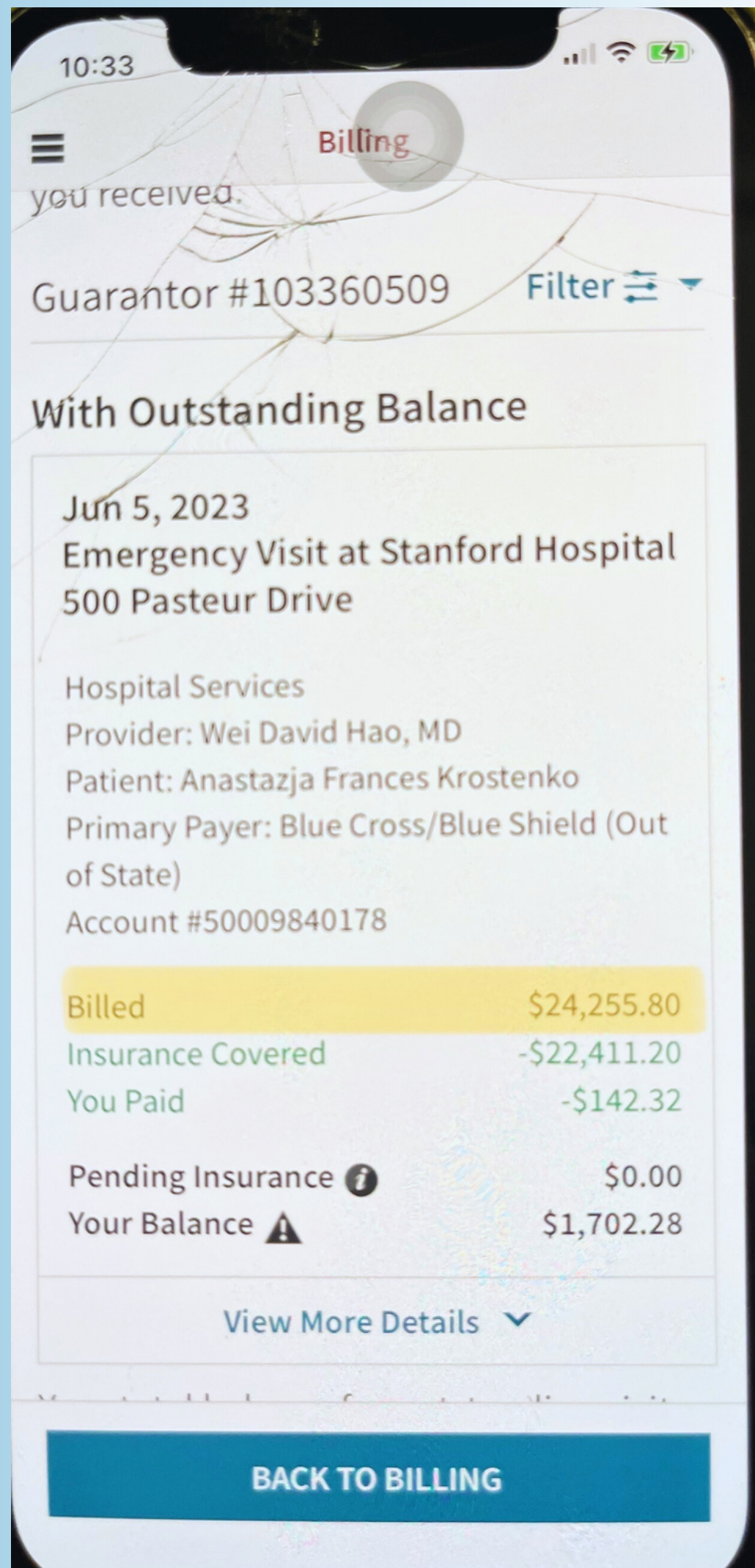
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Anastazja



Insight

Students who don't have easy access to quality care with their insurance are more likely to seek frequent care than students who have regular physicians due to anxieties around physical and mental health.

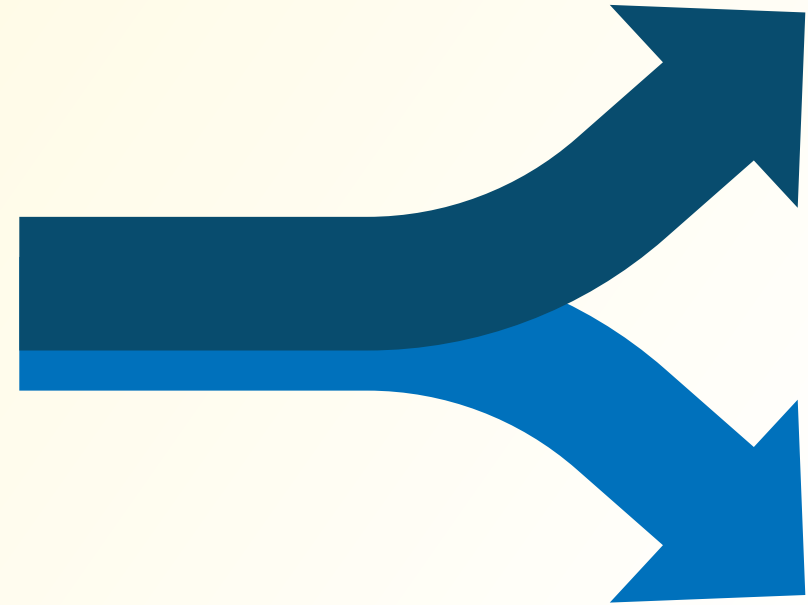


Need

Students want to easily be able to find doctors who can provide personalized care based on their home medical records.



Anastazja



Insight

People would rather spend more money on quality personalized care than pay less through insurance because of the inconvenience of filtering through best-fit clinics.



Need

Students need a way to filter through in-network physicians based on their own personalized needs and desires.



Alia

*Biotech Founder
San Francisco, CA*

“The money I have spent to travel back home for in-network care could *cover the cost of my surgery*”

2 SAY

getting care in SC is really expensive

would really like more flexible packages

I wonder how we can digitize healthcare systems??

why doesn't care extend across states?

didn't know the details of her new insurance (coverage & benefits)

THINK

"the cost of travel to get care could cover the cost of my surgery"

"I had no idea my Medicare had been pulled out."

what are the main resources ppl use to "figure it out"

pretty surprising that her new insurance ^{benefits} were still unclear to her

busy schedules make finding new insurance providers difficult


"it is faster to go in person & sign papers than online"

"I wasn't fully aware of the severity of my physical situation"

curious about the ins & outs of student healthcare

how can we increase healthcare visibility between providers?

what are the stress effects for young ppl w/ debilitating injuries etc?

ALIA 

3 DO

fly to SC for medical care

Had a debilitating back injury while in school

paid \$70-80/hr for PT care

more communication between providers

more visibility for young people transitioning from healthcares

DO

calls or looks online for in-network providers

Had to ask insurance for a list & then manually narrow it down ->

through calling & asking (re finding female doctors or PTs)

clearer communication barrier for understanding Medicare coverage

Medicare coverage across states?

Had to pay out of pocket for PT

injury has worsened overtime - is currently home to receive care

lives a very active lifestyle - now impaired

Have more coverage for regular students (like athletes do)?

Help individuals find tailored providers to their needs w/o having to make calls

SAY

THINK



DO

FEEL

"I wasn't fully aware of my situation and I let things build up unconsciously"

"I only have state coverage so I have to go back home for check ups"

"I thought the pain was just going to go away"

"The football players get referred out and are fully covered, but when you're just a student, you're not"

"After college, there was no referral out to another insurance provider."

There is preferential and inequitable bias for athlete well-being over student well-being at universities

The lack of communication between Medicare and physicians is

How can the referral process be digitized?

Care should not be confined to state lines

"I found the cheapest out-of-pocket PT...I could have done the same routine in my dorm room"

"I'm paying \$70 for the same exact thing I learned in the last class, so stopped"

"I didn't think about insurance when I moved."

"My family is on Medicare, and it differs by state, and they don't tell you when you're no longer covered. It could happen at any moment, any age."

"I wish there was a more flexible plan that works across different states"

Learning about insurance plans is difficult when juggling an extremely busy schedule

Paying out of pocket is better than being prescribed meds that render useless

It is not a priority in her life to learn about the extent of care her insurance will cover

How am I supposed to "figure it out for myself" when I am pushed into the deep end after college?

"I transitioned to United Healthcare, but I don't even know if I can use it in the Bay"

"You just want to go in, get checked out, and get your referral to a specialist"

"There needs to be wider coverage with Medicare"

"I don't want to pay for 2 things at once, but I want care at home and in the Bay"



Insurance providers don't actually care about helping people with finding healthcare

Paying out of pocket is better than being prescribed meds that render useless

Medicare should let me know in advance when I need to renew my plan

Easy-to-use digital interfaces should replace the phone call model Medicare uses

The slowness of the whole referral and treatment process is a big part of why I need surgery

Has to call Medicare in order to get referrals

Paid out-of-pocket for a physical therapist near Georgetown

Had to fly back home in South Carolina to get surgery

Got wisdom teeth out, and had to get referred out

Frustrated by the lack of communication between Medicare and physicians

Annoyed that she has to travel coast to coast for healthcare

Angry that she was misdiagnosed so many times by the school nurse

Found out that she was dropped by Medicare

Had to transition to United while waiting for her Medicare renewal to go through

Finds in-network providers via phone call

Travels coast to coast for healthcare constantly

The need for flexibility in her health insurance plan

Confused by how Medicare chooses when people must renew their plan

Frustrated by the lack of accessibility to necessary referrals for surgery

Turns her forms for Medicare in via pen and paper because it's faster than email

Learned insurance jargon via going through the healthcare process herself

Filtered through list of physical therapists from school nurse by herself

Took ibuprofen to the point where it now renders ineffective

Goes through 3-4 agents before she can find someone to work on her problem

Home in South Carolina will always be an important part of her life, and thus essential to her healthcare needs

Financially exasperated by constantly having to pay out of pocket for the sake of convenience

Discouraged because she believes that there is no solution for her problem

Confused about how to filter through best care options based on her personal preferences

Chuckled when talking about the logistical disorganization of Medicare

Comfortability is of utmost importance when receiving care

SAY

THINK



DO

FEEL

I thought I could take care of it on my own

I was kicked off my Medicare plan without warning

Lack of communication between Medicare, physicians at home, and physicians in the Bay is the reason it has taken years to get surgery

Phone calls to Medicare require long process of going through 3-4 agents before getting help

Goes home to South Carolina frequently for care

Frustrated by the lack of flexibility of health insurance plans across state lines

"I wasn't fully aware of my situation... things were unclear"

"I only have state insurance... I have some home care services"

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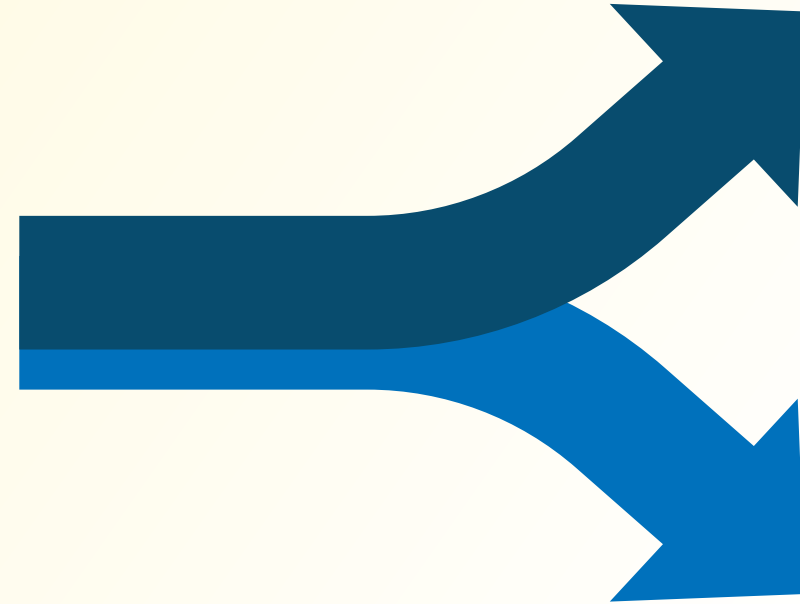
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Alia



Insight

Lack of transparency and flexibility from insurance providers forces people to return home to receive more efficient care.



Need

Users need a digitized, cross-state referral system that streamlines the healthcare process.



Connie

Entrepreneur

Palo Alto, CA

“I’m fairly educated and I can barely figure this out.”

SAY

THINK



DO

FEEL

"I was already employed... which was a godsend because I wasn't under insurance all of undergrad... they found a 5 pound ovarian cyst."

"I had to file for short-term disability, which was such a trash process."

"I'm fairly educated and I can barely figure this out."

"Kaiser went on strike so I had to... pay out of pocket to get a diagnosis."

"After that incident, any time I can get Kaiser, I just get Kaiser. They did great."

"I think I just have low trust in most health plans."

"It was kind of stressful [switching around health insurance]."

"As a young, healthy person, I don't think it's necessary to get a high [cost] insurance."

"I don't know the terms of the insurance because that was kind of dense and hidden."

"I would essentially look for the best one that cost me nothing"

"All the times I wasn't on Kaiser, I never found a good doctor. I tried 6 doctors."

"During MediCAL I didn't even bother going to the doctor... health issues were light and I wasn't desperate enough"

Has to call San Mateo multiple times to activate/deactivate MediCAL

Asked father to help choose insurance plan when employed by Nueva

Paid out of pocket to get diagnosed for hyperthyroidism when Kaiser went on strike.

Tried 6 doctors when not using Kaiser.

Impassioned when emphasizing how difficult filing for short-term disability was.

Expressive gestures when expressing thankfulness she was employed when she discovered her cyst.

Switches insurance when starting new companies

Didn't go to the doctor when on MediCAL because there were no available doctor appointments.

Went to the teledoc but didn't actually use it after MediCAL didn't work out.

Filed for short-term disability during recovery after cyst surgery because she didn't have enough paid leave from her job at Nueva

Pursues active lifestyle: yoga and the gym.

Searched for available doctors online when on MediCAL

Provides free insurance for her startup employees.

Why don't San Mateo officials even understand MediCAL themselves?

Believes quality care is necessary but not to the point where she would get the most expensive plans.

Thinks quality care is necessary but not to the point where she would get the most expensive plans.

There should be a more streamlined process to activate/deactivate MediCAL

Believes Kaiser to be the best health insurance for herself.

Finding available doctors should be easier.

Paying out of pocket is necessary when Kaiser can't provide (goes on strike).

Filing for short-term disability should be less complicated.

Employers offering different health insurance plans to their employees is a good thing.

As an employer herself, believes she should provide accessible insurance for her employees.

There is a lack of education on health insurance and healthcare even when people are educated.

Confused why health insurance is so difficult to navigate.

Annoyed at difficulty of filing for short-term disability

Thankful for comprehensive employee health insurance under Nueva

Frustrated by not finding available doctors even though website said they were available.

Stressed by constantly having to switch health insurance or go on MediCAL when creating startups.

Unsure about how her insurance works still (Kaiser).

Satisfied with Kaiser's insurance, especially after her cyst surgery.

Feels safe with her current plan due to her health and young age.

Feels insecure about other health plans and insurance options.

Exasperated by difficulty of activating/deactivating MediCAL.

Grateful for parent support in choosing insurance when employed under Nueva.

SAY

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Has trouble navigating her own health insurance let alone deal with constantly switching to Medical.

Why don't San Mateo officials even understand MediCAL

Believes quality care is necessary but not to the point where she would get the most expensive plans.

There should be a more streamlined process to activate/deactivate MediCAL

Education on different health insurance plans and types of insurance should be better.

The healthcare system should be more organized, up-to-date, and knowledgeable about their own system.

Paying out of pocket necessary when Kaiser can't provide (go on strike).

Employers offering different health insurance plans to their employees is a good thing.

As an employer herself, believes she should provide accessible insurance for her employees.

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Pursued lifestyle gym.

Provides free insurance for her startup employees.

Sometimes doesn't seek out a doctor when not on Kaiser because it's not worth the hassle.

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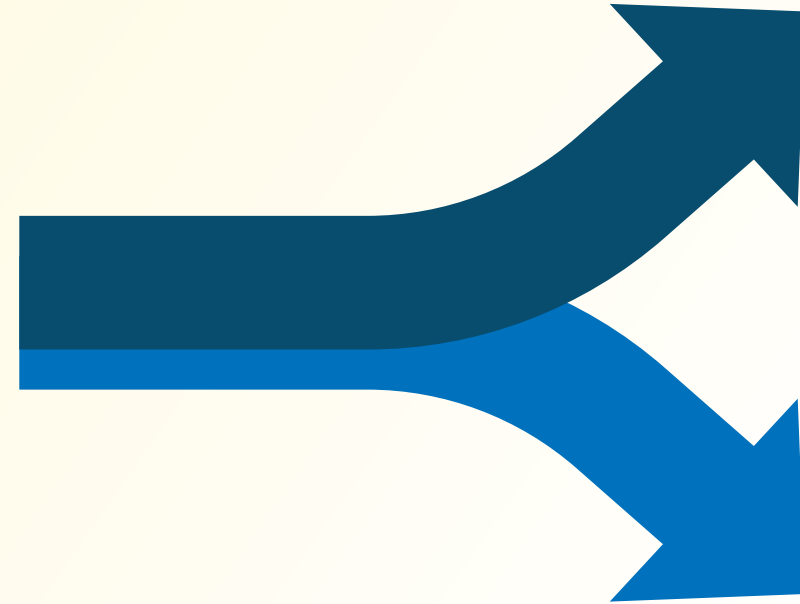
Annoyed how complicated switching insurance and activating/deactivating plans is.

DO

FEEL



Connie



Insight

The processes for switching insurance plans is arduous, and understanding different plans is difficult. Even after switching plans, factors like outdated information on doctor availability, long wait times, and internal strikes make finding care difficult.



Need

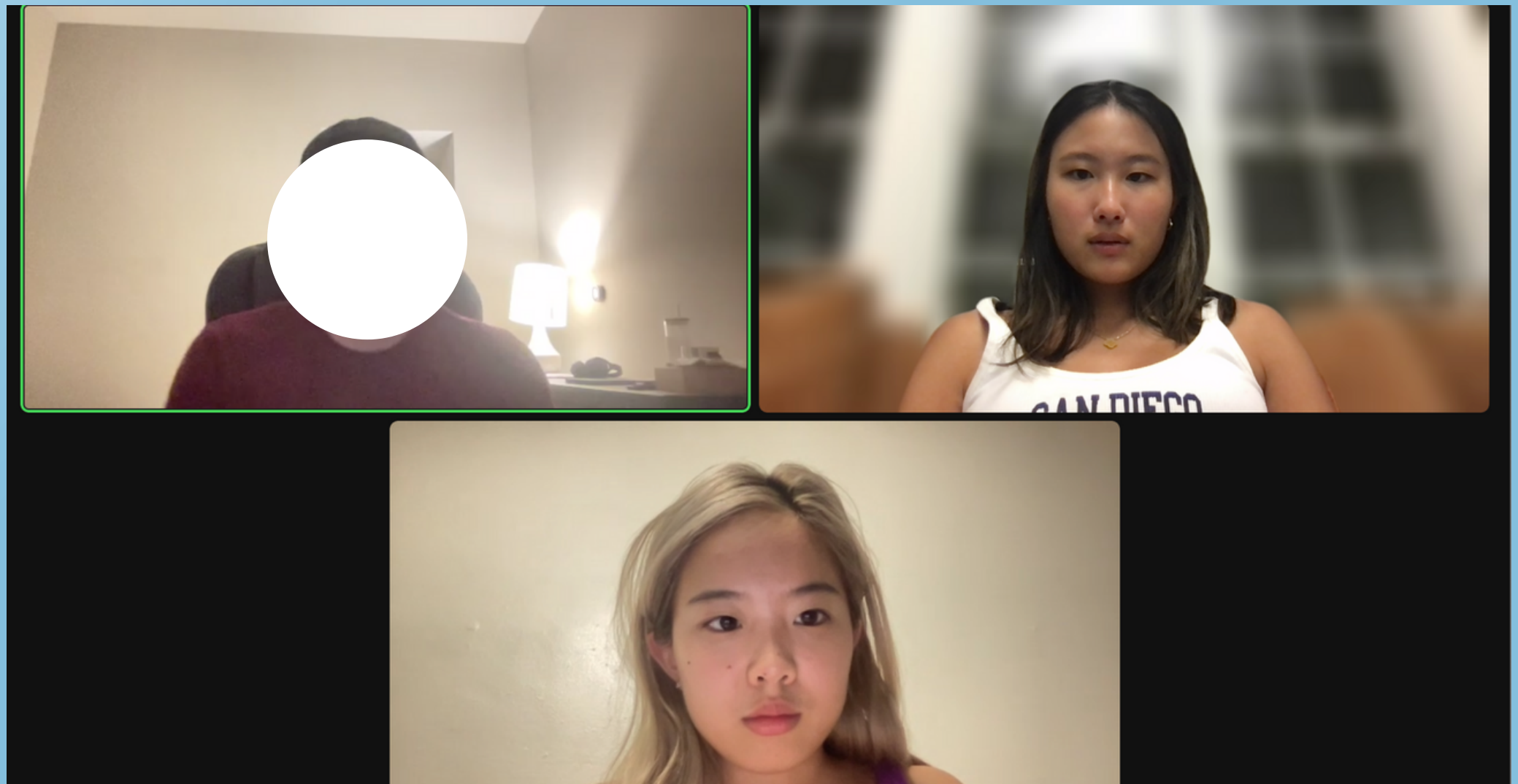
There is a need for a faster / more convenient way to find tailored in-network solutions for people looking for care, and a more streamlined process for understanding and switching plans.



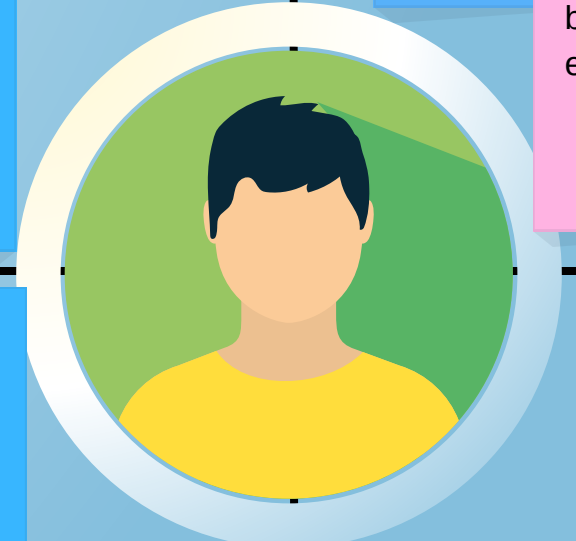
“Bob”

*Management Consultant
Boston, MA*

“If I have to pay out of pocket for an emergency, I will do it, I will call an ambulance”



SAY THINK



"I've been traveling every week since training began"

"I will do it, I will call the ambulance if I need"

"Oh, I'm originally from Miami, and I still go home to do my yearly checkups..."

"It's been difficult for me to get prescription medication in my new state because of state laws"

"However, I've never had an emergency while traveling luckily"

"Honestly, as a consultant, when I travel, I'm working, so being healthy is super important."

"I wouldn't mind paying out of pocket if something did go wrong especially if I can probably get my company to reimburse me"

"I've been working on getting my healthcare set up in Boston but I've been busy"

"I think young ppl should have a better understanding of state laws when it comes to prescription medication"

"I really wish education about healthcare was taught more in school"

"I'll try to stay in network, but will go out of network if needed"

"[Consulting company] made it really easy to enroll in health insurance"

"I have [condition] which requires me to have medication, which I did not disclose to my company"

"I've been really lucky to make good money out of college and have stable employment"

"I grew up FLI, it would have been useful to know the difference between HSA/FSA"

Getting healthcare set up in Boston will be a long/tedious process

It might be negative to disclose [condition] to [consulting company]

The company's enrollment process made health decisions easier

I'm in the economic position to pay out of pocket -> health is more important than money

Transitioning from school to job insurance is easier with the same provider

Prescription medication laws vary significantly by state and can be barriers to necessary care

Schools lack important education on navigating healthcare systems

Aetna's familiarity and benefits make it the best choice for him

Traveling and health need to be well-balanced for work efficiency

Going out-of-network should be a last resort, but it's feasible if necessary

Seeking reimbursements from the company for health expenses is possible

The perception of state laws impacting prescription access is problematic

Brings advil with him while traveling

Still goes home in-state to Florida to go for regular checkups

Had a period without health insurance after university and before job insurance

Stuck with same insurance (Aetna) from college to company

Talked to family for an hour before choosing insurance plan from company

Choose premium for all of his insurance options at [consulting company]

Has not needed to find healthcare while traveling yet

Feels secure in the healthcare plan he chose

Uses insurance from school/company, never had to "search for own insurance"

Actively schedules checkups during breaks/family visits

Actively decided on Aetna for its benefits

Stays in hotels/works when traveling

[Consulting company] made it really easy to enroll in health insurance

Goes back to Florida to get medication refill

Chooses to be with HSA over FSA

Confident that he will get healthcare if he ever needs it

Supported/grateful for his family in making healthcare decisions

Annoyed by the task of transitioning check-ups away from Boston

Grateful that he's never experienced sickness/need for healthcare while traveling

Frustrated that he can't get prescription medicine in Boston when he needs it regularly

Satisfied with his job's health insurance enrollment process

Worried about disclosing his medical condition to the company

Relieved he hasn't encountered emergencies during travel

Grateful for the economic security he currently has

Discontent with the gap in school's education on healthcare

Concerned about staying within the insurance network when seeking care

Comfortable with his current health insurance setup

DO FEEL

SAY THINK

Growing up FLI, the insurance process and terminology was extremely unclear

There is a negative stigma behind disclosing health conditions to employers

Would rather receive more expensive, high-quality care than cheaper, low-quality care

Takes care of his own health issues because of the nature of his work

Annoyed that care is tied to his hometown in Boston when he is constantly traveling for work



DO FEEL

"I've been traveling every week since training began"

"I will do it, I will call the ambulance if I need"

"However, I've never had an emergency while traveling luckily"

"Honestly, as a consultant, when I travel, I'm working, so being healthy is super important."

"I wouldn't mind paying out of pocket if something did go wrong especially if I can probably get my company to reimburse me"

"I really wish education about healthcare was taught more in school"

"I'll try to stay in network, but will go out of network if needed"

"I have [condition] which requires me to have medication, which I did not disclose to my company"

"I've been really lucky to make good money out of college and have stable employment"

"It's been difficult for me to get prescription medication in my new state because of state laws"

"I grew up FLI, it would have been useful to know the difference between HSA/FSA"

"[Consulting company] made it really easy to enroll in health insurance"

"Oh, I'm originally from Miami, and I still go home to do my yearly checkups..."

"It's been difficult for me to get prescription medication in my new state because of state laws"

Getting healthcare set up in Boston will be a long/tedious process

It might be negative to disclose [condition]

The company's enrollment process made health decisions easier

I'm in the economic position to pay out of pocket -> health is more important than money

Prescription medication laws vary significantly by state and can be difficult to navigate

Schools lack education on health insurance

Aetna's familiar and benefits make it the best choice for him

Traveling and health need to be well-balanced for work efficiency

Going out-of-network should be a last resort, but it's feasible if necessary

perception of laws impacting prescription access is problematic

Brings advil with him while traveling

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Concerned about gap in school's education on healthcare

Concerned about staying within the insurance network when seeking care

Comfortable with his current health insurance setup



"Bob"



Insight

Certain individuals do feel confident in their ability to find healthcare. However, young people still tend to have their healthcare decisions/offices tied to their family and hometown.



Need

There is a need for young people to learn how to transition recurring healthcare services to locations they relocate to. Overall, there's a need for education about healthcare for young adults, especially those who move to different states.



KEY TAKEAWAY THEMES



Young people are traveling back home to receive care

Medicare vs Private Insurance

Healthcare provider & stakeholder communication

Willingness to pay out-of-pocket





WHAT'S NEXT?



**EXPAND
INTERVIEW
SCOPE**

Interview users with **more diverse backgrounds** and get more **expert opinions** on insurance in the US specifically



**DIG DEEPER
INTO
INTERVIEWS**

Continue analyzing **trends and themes** we find in our interviews



**NARROW
DOWN
PROBLEM**

Determine what specific problem within **accessing insurance** we want to focus on



CREATE POVS

Formulate **point of views** from our potential users



Thank You For Listening!

Questions?



APPENDIX



ADDITIONAL INTERVIEWEES



Dr. David Svec
*Internal Medicine at
Stanford Medicine
Palo Alto, CA*



Lyubo
*UX Designer
Palo Alto, CA*

**** SEE APPENDIX ****

SAY

THINK



DO

FEEL

"Insurance doesn't influence much on the inpatient side of things... fortunately we don't have substantial impacts from it."

"Insurance mostly impacts us once we're trying to get patients back to outpatient care. That's primary care or specialty care."

"The only thing I'm uncertain about is the Kaiser system, since Kaiser is such a closed system."

"When patients leave the area, it's generally all in the patient's hands to find new doctors, hospitals, etc."

"I'm perfectly healthy, but I am part of clinical research trials where they check my vitals for free."

"I haven't gone to a doctor in so many years."

"In emergency situations, care is always given no matter what. The insurance is dealt with later."

"I'm on the Stanford health insurance, which is a bit expensive, but it's nice knowing everyone."

"EMTALA says you need to accept patients if you have clinical capability irrespective of insurance."

"If they're uninsured it's a big problem" (context: patients traveling to different states and need care)

"We recommend that they call their insurance carrier so that their records end up all in the same place."

Believes that the insurance process is a hassle, even from the perspective as a doctor.

Thinks that he can identify is health for the most part as a doctor, bypassing checkups.

Switching to a different health insurance would not be worth it.

Getting personal checkups might take too much of his time and isn't worth it.

Believes Stanford's health insurance is the best for him since he knows the people working there.

Expensive health insurance is worth it when he can trust the insurance.

Care is the most important priority when dealing with patients.

Since not all insurance systems are unified (ex: Kaiser is different from others), insurance is even more complicated.

Although he cares for patients, he doesn't believe it's his responsibility to determine what's in-network.

There should be better communication between doctors, patients, and insurance to ensure referrals are in-network.

Doesn't go to his own personal checkups.

Clinical days where he checks on 8-12 patients (inpatients).

Enrolls himself in clinical research trials for science and his own checkups.

Teaches, conducts research, works on quality improvement, safety control, and patient safety on non-clinical days.

Works mainly in inpatient care (essentially urgent care/ER)

Works with Stanford Health Consulting Group to improve Stanford hospital system.

Tries his best to refer patients to in-network specialists, providers, etc.

Chief Medical Officer at Stanford Healthcare TriValley, providing care to East Bay and beyond.

Got contemplative when discussing how it's mostly on patients to navigate insurance after he recommends specialists / PCPs.

Got more animated when talking about how he enrolls in clinical research trials and checks on himself.

Feels lucky to not have to deal with insurance too much as a doctor.

Uncertain about how insurance works especially for outpatient care.

Feels grateful that he is healthy for the most part and that he hasn't had to use his health insurance.

Satisfied and trusts Stanford health insurance; confident they will provide him the care if he ever needs it.

Feels somewhat regretful that it's mostly on patients to determine if their insurance can cover the care they receive.

Loves his work researching, teaching, and providing care for patients.

Confident in his ability to check up on his health for the most part.

Is grateful that as an inpatient doctor he doesn't have to deal with insurance too much.

Dubious about some aspects of insurance, like how each state's laws vary, which can complicate things.

Resolute and firm on prioritizing care over insurance. Would not sacrifice care over anything.

SAY

THINK



DO

FEEL

"I found a family friend to help find surgery and post-surgery care when my family had just moved to the States."

"I went to the ER more to alleviate my personal anxiety [in case something was wrong]."

"My mom is considering switching to Palo Alto Medical due to long wait times getting appointments with specialists."

"It's something like more than 2 months out for appointments and MRIs."

Health is ultimately the most important: would rather go to ER and alleviate personal anxiety about his health than be unsure.

Community is an important resource when navigating health insurance and healthcare.

Going to the ER shouldn't have to take so long.

Navigating health insurance shouldn't be such a difficult process, especially when switching within the same company.

"It wasn't an easy process to switch to individual health insurance."

"I work at a large and outdated company so I was mostly self-navigating through Workday."

"Pushing technology on scale tends to be like that. It's really you and the Internet, what info can I find for myself, and what community do I have to help piece that picture together."

"My experience was much more funneled than my friend from the European Union."

Outdated technology also contributes to the hassle of navigating health insurance.

Switching insurances is a hassle; switching out of Kaiser wouldn't have been ideal for him.

Doctor and appointment availability should be faster, especially for less healthy patients like his mother.

Searching for new insurance (ex: for his mother) should be an easier process.

"I knew ultimately my end-goal was to go through Kaiser and mitigate for amounts as best as I can."

"I had to wait 3.5 hours in the ER... I ended up getting out at 4:30 am."

Making it easier to understand health insurance terms would be helpful, and making them easier to remember would be nice.

Education about health insurance is limited. It was because of his community that he was able to understand the process.

Enjoys bike riding in his free time.

Consults community and family friends for help when navigating health insurance.

Chose Kaiser again due to already having been in Kaiser when younger.

Frustrated by long ER waits and variability in wait length.

Confused by the paperwork and insurance options when transitioning to individual health insurance.

Feels lucky his search for health insurance was easier than his friends immigrating from other countries.

Thankful his ER visit was 99% covered; paid less than \$100.

Chose Kaiser again due to already having been in Kaiser when younger.

Stumbled over some health insurance terms like co-pay and HMO/PPO during the interview.

Made sure to get the insurance with the lowest monthly pay.

Asked parents for help when initially switching to individual health plan.

Thankful he only had to switch from Kaiser (parents) to Kaiser (individual).

Annoyed by the outdated Workday technology used to handle insurance papers.

Feels grateful he had a community (ex: family friend) to support his search.

Comfortable and confident with his current insurance

Used Workday to handle insurance switch process when getting his job.

Gets regular checkups as necessary.

Made confused gestures when talking about switching insurance plans after employment; not too confident in explaining his insurance.

Concerned about his mom's long appointment wait time and current search to switch insurances.

Confident in his youth and health and that he won't need to use his insurance much.

Feels sympathetic towards friends who had a much harder time finding insurance.