The 2021 Health Care Insights Study
Introduction

Results of the 2021 Health Care Insights Study reveal the long-lasting impacts of the COVID-19 pandemic on people of all ages, especially the mental health crisis in the U.S. that is making itself felt in a variety of ways.

The 2021 findings highlight some of the many challenges we have faced during the pandemic, but they also point to a remarkable resilience among consumers, providers and the health care system, as well as a willingness to engage with health care differently and more meaningfully. Not only have people sought new avenues of care during the pandemic, but they have taken this unprecedented time as an opportunity to work on health goals and reexamine priorities.

As vaccinations expand and state-based restrictions ease back to a more normal life cadence, this transition offers an opportunity to focus on the need for personalized care. It’s clear as we move forward that health care can no longer follow a one-size-fits-all model. Consumers want to engage in the health care system in the ways that fit their lifestyle, age and gender.

By understanding the types of care people want to receive and how they want to receive it, we can use this difficult year as the foundation for rebuilding a health care system that puts people first.

At CVS Health, we have accelerated innovation in the last year to provide the types of care consumers want — from increased availability of virtual care; to providing affordable, accessible mental health services; to a rapid, national rollout of COVID-19 testing and vaccines that provide more local, personalized and convenient care. We’re here to support people in achieving better outcomes not just for physical health, but for total health.

CVS Health’s response to the COVID-19 pandemic

Throughout 2020 and the first half of 2021, CVS Health has expanded its focus on serving the evolving needs of our communities. For example, CVS Health:

- Waived charges for at-home delivery of medications.
- Waived cost sharing and copays for inpatient hospital admissions related to COVID-19 for Aetna members.
- Opened Crisis Response Lines and expanded 24/7 access to the Aetna Nurse Medical Line for all Aetna and Caremark members.
- Expanded telehealth services.
- Worked quickly to add community testing options that eliminated barriers to testing in areas hard-hit by the virus.
- Played a significant role in national rollout of COVID-19 vaccines in both long-term care facilities and in our stores.
- Created a fully digital end-to-end customer experience for COVID-19 testing and vaccinations.
The impact of the COVID-19 pandemic on mental health

For more than a year, we lived with stay-at-home orders, social isolation and economic uncertainty. Though we are past many of the worst aspects of the pandemic, it’s anticipated that the effects of this collective experience will be felt for months — possibly years — to come.

This is cause for concern, as the pandemic had a significant impact on people’s mental health and well-being. Study data points to the need for more resources and support for some of our most vulnerable populations.

Stress levels rose significantly due to COVID-19, and the pandemic impacted the health and lifestyle of people in a variety of ways:

- Anxiety: 37% of women vs. 32% of men
- Stress: 35% of women vs. 31% of men
- Change in physical activity: 35% of women vs. 31% of men
- Sleep changes: 33% of women vs. 31% of men
- Weight gain: 33% of women vs. 31% of men
- Lack of routine/daily schedule/structure: 30% of women vs. 26% of men
- Depression: 30% of women vs. 26% of men
- Feelings of isolation and loneliness: 30% of women vs. 25% of men

As a result of the pandemic, respondents said their use of nicotine (21%), alcohol (20%) and opioids (10%) increased this year.

Interestingly, men seemed to struggle with substance use more than women throughout the pandemic:
The types of stress felt during the pandemic were wide-ranging, as many households took on homeschooling responsibilities while working from home without access to childcare.

Men reported slightly higher levels of stress compared to female respondents over the significant lifestyle shifts that took place during quarantine:

<table>
<thead>
<tr>
<th>Stress Category</th>
<th>All people</th>
<th>Men</th>
<th>Women</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caring for children who live in the home</td>
<td>64%</td>
<td>70%</td>
<td>59%</td>
</tr>
<tr>
<td>Homeschooling children</td>
<td>62%</td>
<td>67%</td>
<td>58%</td>
</tr>
<tr>
<td>Work</td>
<td>62%</td>
<td>67%</td>
<td>58%</td>
</tr>
<tr>
<td>Health of loved ones</td>
<td>62%</td>
<td>64%</td>
<td>57%</td>
</tr>
<tr>
<td>Exercise</td>
<td>59%</td>
<td>65%</td>
<td>55%</td>
</tr>
<tr>
<td>Household finances</td>
<td>58%</td>
<td>60%</td>
<td>56%</td>
</tr>
<tr>
<td>Personal health</td>
<td>53%</td>
<td>56%</td>
<td>51%</td>
</tr>
<tr>
<td>Nutrition</td>
<td>51%</td>
<td>57%</td>
<td>47%</td>
</tr>
</tbody>
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Alarmingly — but perhaps not surprisingly — young adults (18-34-years-old) were most impacted by the COVID-19 pandemic compared to other generations. Not only were they the most likely age group to report depression (35%) as a result of the pandemic, they also reported a higher rate of mental illness (28%) than compared to total respondents (23%).

Social connection wavered as many struggled to meet new people or find ways to be social during a period of physical separation.

65% of total respondents
said COVID-19 had a high/moderate impact on their ability to stay socially connected to family and friends.

46% said they strongly agree/agree that they don’t know where to go to meet new people (a slight uptick from 41% in 2020)

45% said they strongly agree/agree that they no longer have a desire to be social (up from 38% in 2020)

42% said they strongly agree/agree that they live in a place that makes it inconvenient to be social (up from 31% in 2020)

41% said they strongly agree/agree that they no longer have friends and family nearby (compared to 31% in 2020)

Data found that men were more likely than women to report that COVID-19 had a high impact on their ability to stay socially connected (72% vs. 60%).

Curiously, despite mandated social distancing, most strongly agreed/agreed they were happy with their social connection. Sixty-nine percent of those aged 18-34 said they strongly agree/agree that they are happy with their social connection compared to 75% for those aged 35-50, 73% for those aged 51-64, and 74% for those aged 65+. At the same time, women weren’t as happy with their social connection as men (68% vs. 80%). And while men were happy with their social connection, a higher percentage shared that they no longer have the desire to be social (53% vs. 41% of women).
Providers are concerned about the mental health of their patients.

When thinking about the overall well-being of their patients, 44% of providers say all or most of their patients are facing significant challenges with their emotional/mental health. Of all generations, providers are most concerned about those 18-34 and 65+. When asking providers their level of concern regarding their patients’ mental health, 39% had high concern for their patients 65 and older. They additionally had a higher level of concern about loneliness/social connection for the 65+ age group (44%) than they did for the 18-34 group (28%). In reference to patients 18-34 years of age, providers said 46% were facing significant challenges with their mental health.

That said, providers are working to provide support and connect patients to additional resources. In fact, 60% of providers always/often discuss mental health and loneliness/social connection (44%) with their patients, and 51% of providers always or often prescribe or recommend mental health professional resources to their patients in order to help them meet health goals.

Respondents with a higher annual income were more likely to seek out mental health services:

- $75K+ 35%
- $35-$75K+ 23%
- <$35K 23%

Respondents with a higher annual income were more likely to seek out mental health services:

48% of respondents said they would be very or somewhat likely to seek out mental health services if they could do so using a “virtual visit”. Interestingly, men were more likely than women to say they’d be very/somewhat likely to seek mental health services using a virtual visit (57% of men vs. 43% of women).

94% of licensed clinical workers said they added virtual offerings to their practices. This is a great indicator of the rising use of virtual tools to provide mental health services.

Expanding resources for mental health

People indicated they are interested in using virtual tools to obtain mental health services. Additionally, most people felt they had good access to their providers outside of an appointment.

Interestingly, despite the pandemic’s impact on mental health, 74% of people did not seek mental health services. What’s more, more men (32%) than women (23%) sought out mental health services as a result of the COVID-19 pandemic despite women reporting they were more likely than men to experience mental health difficulties in response to the pandemic. These difficulties included increased anxiety, stress, feelings of isolation and loneliness, depression, mood swings, changes in appetite, and suicidal thoughts.

Data shows this gap could be a result of costly care:

- 28% of respondents said they did not visit a mental or behavioral health specialist when they needed support due to cost/affordability.
- 61% of respondents said they have high/moderate concern about being able to afford treatment for mental/behavioral health conditions.

However, it’s also possible this lack of engagement with the mental health industry in a time of need was a result of few-to-no available resources.

Respondent Rank

CVS Health has increased access to mental health services by expanding offerings in select HealthHUB® locations. People can access personalized, local support through clinical social workers, who can provide mental health assessments and therapy, as well as help patients connect with additional local providers and community resources.

As these services are covered by most insurers and employee assistance programs (EAPs), they offer a lower-cost model than traditional therapy. CVS Health aims to expand these behavioral health offerings across the country throughout 2021.
Accessibility and the COVID-19 pandemic’s influence on new avenues of care

While COVID-19 presented a number of challenges, it also provided an opportunity for people to take a closer look at their health care. In fact, data found that 77% of people said that COVID-19 has led them to pay more attention to their health in general, and 50% indicated that stay-at-home orders helped them achieve their health goals.

The pandemic also had an outsized influence on how people engaged with their health and accessed care within the system, potentially influencing them to explore new avenues for care.

Historically, primary care physicians (PCPs) have been the most trusted provider for consumers. While that remains the case, overall trust in PCPs declined this year (49% in 2021 vs. 59% in 2020) while trust in other health care providers rose.

For example, trust in nurse practitioners and physician assistants increased slightly (14% in 2021 vs. 11% in 2020). This indicates that people are connecting with new kinds of providers and recognizing the multiple ways they can receive health care services.

Consumers are interested in exploring other avenues of care, especially as insurance (55%) and location (43%) are among the top factors that influence health care decisions.

For example, routine care has begun to shift from PCPs to other types of providers. Routine care from PCPs for a minor illness or injury has dropped since last year — going from 62% in 2020 to 56% in 2021.

When asked about the treatments and recommendations they receive from their PCPs, people indicated the following health care providers could also provide the same services:

<table>
<thead>
<tr>
<th>Provider</th>
<th>Percentage</th>
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</thead>
<tbody>
<tr>
<td>Physician assistant</td>
<td>63%</td>
</tr>
<tr>
<td>Nurse practitioner</td>
<td>57%</td>
</tr>
<tr>
<td>Registered nurse</td>
<td>56%</td>
</tr>
<tr>
<td>Pharmacist</td>
<td>44%</td>
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The use of other health care resources has grown in preference when seeking routine care for a minor illness or injury:

<table>
<thead>
<tr>
<th>Resource</th>
<th>Percentage</th>
<th>Change from 2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>Online resources</td>
<td>19%</td>
<td>vs. 12% in 2020</td>
</tr>
<tr>
<td>Community health centers</td>
<td>19%</td>
<td>vs. 15% in 2020</td>
</tr>
<tr>
<td>Local pharmacies</td>
<td>17%</td>
<td>vs. 11% in 2020</td>
</tr>
</tbody>
</table>

90% of respondents said they would always/often/sometimes follow advice and/or medical recommendations from their pharmacist.

For the first time, data shows that consumers are exploring more and different options for where and how to receive care. For example, only 77% of people reported going to the same doctor’s office to receive care, compared to 85% in 2020. Additionally, 15% of people reported they shop around for care, using factors such as cost of care to determine the best pathway. This tendency to seek care from different types of providers has increased since 2020, when only 8% shopped around for care.
Not surprisingly, the COVID-19 pandemic accelerated the use of virtual tools to seek care.

57% of respondents said as a result of the pandemic, they have used virtual visits with their doctors. In the last 12 months, 53% of respondents indicated they had used virtual care for a health care visit.

For a doctor visit during which respondents did not need any type of physical exam,

68% of respondents were very/somewhat likely to consider using a “virtual visit.” This has risen slightly since 2020 where 65% of consumers said the same.

The ability to monitor one’s health using apps, wearables, etc., has also grown in preference.

75% of respondents said it is very/somewhat important to be able to monitor their health using those virtual tools (vs. 70% in 2020).

Men more than women:

57% vs. 43% were very/somewhat likely to seek out mental health services using a virtual visit.

64% vs. 46% have used virtual visits as a result of COVID-19, suggesting that women may prefer to seek in-person care or have delayed care altogether.

21% vs. 15% cited the importance of having the option of virtual care when getting routine care for a minor illness or injury.

Using virtual care to improve accessibility

The COVID-19 pandemic accelerated the use of telemedicine and changed the way consumers sought care and providers offered care:

57% of respondents said they used a virtual visit to connect with their provider.

Providers indicated that having access to the following would be very or somewhat valuable to their patients in terms of communication:

72% said virtual office visits

71% said telehealth

CVS Health expansion of virtual offerings:

As we move into a post-pandemic world, CVS Health continues to provide personalized and integrated health care to meet the evolving needs of our customers and patients. As part of that focus, we have expanded virtual care services to support people for every meaningful moment of health.

To complement our existing telehealth offerings that were available before the pandemic, MinuteClinic™ launched E-Clinic in April 2020 as an additional way to help patients access safe, affordable and convenient non-emergency care. E-Clinic gives patients a choice between a visit with a provider virtually or in person at one of our 1,100 locations.
Providers have embraced the shift to virtual health care tools.

Most providers have added the following capabilities to accommodate the rise of virtual care*:

- Virtual office visits: 73%
- Online portal: 43%
- Mobile options such as apps or texting: 38%
- AI/predictive analytics: 2%

*5% do not offer virtual care.

Although only 1% of providers have incorporated artificial intelligence/predictive analytics capabilities into their practices, when asked if they will include them within the next several years, providers said they are:

- Very/somewhat likely: 38%
- Only slightly likely: 38%
- Not at all likely: 24%

Providers saw a positive financial impact on their practices in 2020 thanks to an increase in patient volume (56%) and the implementation of virtual care/tools (25%). Providers:

- 80% Also felt that virtual care improved their ability to provide care to patients.
- 55% Said it improved their ability to spend adequate time with patients.
- 72% Believe virtual office visits are very/somewhat valuable for their patients to be able to communicate with them.
- 71% Said telehealth options (e.g., 24/7 access to telephone information and advice from a health care professional) were valuable.

Insurance remains a critical factor in individuals’ decision-making process for where to receive care.

- 55% said insurance was most important
- 43% said convenience was most important
- 37% said cost was most important

Understanding how people want to engage with health care is crucial, as accessibility remains a top factor when it comes to finding care.

In addition to accessibility, people found the following factors most important:

- Ease of access to care: 89%
- Privacy (e.g., keeping private health information confidential): 89%
- Getting what you consider to be personalized care: 88%
- Data security: 88%
- Health care costs: 85%
- Having a care provider who is close to where you live or work: 85%
- Coordination among all my health care providers: 84%
- Being able to monitor my health (e.g., using apps, wearable devices, etc.): 75%
- Access to a health coach (e.g., someone who helps you make food and lifestyle changes to improve your well-being): 68%
Patients and providers have an open dialogue about many subjects but miss the opportunity to discuss others.

Seventy-one percent of providers said all or most of their patients proactively ask questions or talk about medications and their associated costs, difficulties adhering to medication schedules, and adverse reactions. However, only a third (33%) of their patients discuss their socioeconomic status (e.g., household income, employment status, education, access to healthy food, etc.).

80% of providers said they always or often discuss the importance of medication adherence with their patients.

Providers are less likely to discuss the following issues with patients:

- Personal pain management: 44%
- Lack of family or emotional network: 44%
- Cost of care: 44%
- Loneliness/social connection: 44%
- Lack of access to community-based resources: 32%
- Health care data privacy/security: 32%
- Individualized care

In many ways, health care in the U.S. is a one-size-fits-all model that deploys population health models to provide care. As generational trends and preferences factor into the way people access care, data points to a need for the health care industry to evolve to a more customized approach.

Younger generations are interacting with the health care system in less traditional ways compared to other age groups. For example, only 75% of those aged 18-34 have a PCP vs. 94% of those 65+.

Age is a factor in PCP trust:

- Aged 18-34: 34%
- Aged 35-50: 49%
- Aged 51-64: 64%
- Aged 65+: 65%

Those 65+ are more likely to take health recommendations from all providers listed, but in particular, the older generation is more likely to take health recommendations from their pharmacist:

- 55% Aged 65+
- 51% Aged 51-64
- 39% Aged 18-34

Those aged 18-34 are also more likely to shop around for care than other generations:

- 25% Aged 18-34
- 14% Aged 35-50
- 5% Aged 51-64
- 6% Aged 65+

18-34-year-olds are the least likely age group to prefer in-person visits to receive medical information or advice from their PCPs (64%). Rather, they are the most likely age group to prefer receiving information by telephone (22%).
People appear to have generational preferences regarding which health care providers they wish to receive health recommendations from.

Those in the 18–34 age group:
39% are more open to taking health recommendations from pharmacists, nurse practitioners, registered nurses and physician assistants at a health care facility.

Those in the 35–50 age group:
43% are more open to taking health recommendations from pharmacists.

Those in the 51–64 and 65+ age groups:
55% & 66% (respectively) are more open to taking health recommendations from cardiologists.

Expanding health care access through a localized approach

Our approximately 1,100 MinuteClinic® locations nationwide provide local, high-quality care that is convenient and accessible seven days a week. People can walk in and seek care for a variety of reasons:

- Routine care (screening, diagnosis, treatment)
- Follow-up for chronic condition management
- Minor illness or injuries
- Immunizations and annual exams

Serving as a complement to PCPs, all of these offerings, and more, can be done in-store or virtually to ensure care is not only localized but personalized based on patient preference. Additionally, through HealthHUB™ services, consumers can access ongoing care for chronic disease management, mental health, sleep apnea assessments and more.

Men and women engage with health care differently — and have varying preferences on how they’d like to receive care.

27% of women vs. 21% of men
Typically used nurse practitioners to get any type of health care information or advice.

85% of men vs. 79% of women
Felt their physician always/often takes them seriously when they have a question or concern.

Men are more likely to seek routine care for a minor illness at the following places:

- Hospital emergency room or urgent care clinic
  - 25% men
  - 18% women
- Online through telemedicine, health apps, etc.
  - 24% men
  - 16% women
- A community health center or clinic
  - 24% men
  - 15% women
- Local pharmacy
  - 22% men
  - 14% women

More women than men

Use the opportunity of an annual check-up to communicate with their PCP, suggesting men need to take a more proactive role in their health through scheduling non-emergency care.

- 73% of women
- 58% of men

More women than men want their PCPs to be aware of their lifestyle choices and life experiences, specifically their:

- Use of alcohol
  - 89% of women
  - 78% of men
- Level of happiness and life satisfaction
  - 86% of women
  - 79% of men
Providers’ concerns for patients varies by patient’s age.

Providers are concerned about the following issues that patients 65+ may be experiencing:

- Chronic illness: 53%
- Physical health (including mobility issues): 47%
- Medication compliance: 47%

Providers are concerned about the following issues for their younger patients (18-34 years old):

- Overuse of digital tools (e.g., cell phones, computers, etc.): 70%
- Ability to maintain a healthy diet: 50%
- Mental health: 46%

For 18-34 year old patients, providers also are concerned about their:

- Lack of interest in taking control of their own health, including nutrition: 41%
- Nicotine use: 39%
- Physical health, including mobility issues: 36%
- Cost of care: 33%
- Medication compliance: 31%
- Loneliness/social connection: 28%
- Obesity: 22%

Holistic health care via CVS Health’s pharmacist panel

CVS Health has launched an individualized care program to help people at high-risk for negative health outcomes from chronic conditions. Specially trained pharmacists at each CVS Pharmacy provide ongoing one-on-one in-person or virtual support for customers and patients.

The Pharmacist Panel program provides a holistic view of the patient by combining pharmacy and medical data. With this information, pharmacists can help patients improve medication adherence, optimize medication regimens, close gaps in care, and connect patients to their health plan, and connect patients to their health plan, and connect patients to their health plan, and connect patients to their health plan, and connect patients to their health plan, and connect patients to their health plan, and connect patients to their health plan, and connect patients to their health plan, and connect patients to their health plan, and connect patients to their health plan.

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- Loneliness/social connection: 28%
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Personalizing care to best meet women’s needs

As the stewards of health care for their families, women play a key role in coordinating and ensuring access to care. Yet, women often experience difficulties accessing health care due to busy schedules, lower incomes and higher rates of being uninsured or underinsured.

CVS Health’s local footprint and enterprise capabilities help make primary care services more accessible and affordable through our MinuteClinic™ and HealthHUB™ locations, retail pharmacies, and Caremark, Aetna, Medicaid and Medicare products. Specifically, MinuteClinic™ offers a full range of essential women’s health services, including access to birth control, pregnancy evaluations, and screening and treatment for sexually transmitted diseases and urinary tract and yeast infections. CVS Pharmacy also helps support women’s health, family planning and more, with the ability of pharmacists to prescribe contraception in all stores in 14 states (per approved scope of practice)*.

*As of June 2021
The affordability of care

Similar to last year’s findings, consumers are still greatly concerned about the cost of care. In fact, cost remains the leading obstacle to staying healthy (32%), down slightly from 2020 (35%) — this is closely followed by prescription drug pricing (22%) and housing costs (20%).

A majority (85%) said health care costs are very/somewhat important when it comes to their health. The data seems to highlight the importance of providing options that are cost-effective and flexible, helping people to take greater control of their health care.

42% said they have not visited the doctor when they had a minor illness or injury due to cost (50% for those aged 18-34).

31% said they do not have a PCP because it’s too expensive. This is a drop from 2020 when 45% cited cost as a barrier. This suggests care is either becoming more affordable or consumers are seeking other types of care in addition to that provided by their PCPs.

66% said they had high/moderate concern over their ability to afford treatment for severe or rare illnesses.

People are also concerned about the following costs:

- Treatment for chronic illness
  - 2021: 66%
  - 2020: 71%

- Out-of-network care
  - 2021: 65%
  - 2020: 71%

- Health care deductibles
  - 2021: 63%
  - 2020: 70%

- Prescription drugs
  - 2021: 62%
  - 2020: 72%

- Caregiver/home health care services
  - 2021: 62%
  - 2020: 62%

- Health care coverage premiums
  - 2021: 62%
  - 2020: (no trending data available)

- Treatment for mental/behavioral health conditions
  - 2021: 61%
  - 2020: 65%

- Office visits, such as co-pays
  - 2021: 59%
  - 2020: 64%

- Bloodwork
  - 2021: 55%
  - 2020: 59%

Younger populations were more likely to say they delayed care because of cost/affordability:

- 18-34 year-olds: 50%
- 35-50 year-olds: 47%
- 51-64 year-olds: 33%
- 65+ year-olds: 23%

Additionally, men spent more on health care visits and/or medications because of the COVID-19 pandemic:

- 47% of men
- 42% of women
Helping to improve affordability of care

CVS Health is taking a leading role in developing programs to help patients save money on their prescriptions.

The 2021 Health Care Insights Study found that

- 25% of respondents said they had low/no familiarity with the out-of-pocket costs they pay for medical care.
- 23% of respondents said they do not understand how to interpret their health plans to understand out-of-pocket costs.

Cost remains a top concern for patients, which offers providers an opportunity to focus on helping patients find resources for more affordable care. While 59% of consumers reported their PCPs do an excellent/very good job in helping them understand the costs of care, more than half of consumers (51%) said their providers have not asked about affordability of health care and/or discussed resources to assist with these costs.

This issue becomes even more important when you consider that patients are unfamiliar with how to pay for medical care.

Providers said all or most of their patients are facing a significant challenge with:

- Prescription drug pricing: 44%
- Financial security: 40%
- Insurance limitations (e.g., out-of-network facilities, lack of coverage for specific medical needs): 40%

Before providers write prescriptions, they:

- Always/often check if lower-cost, clinically alternative medications are available for patients: 41%
- Review the patient’s formulary: 39%
- Review the patient’s prescriptions co-pay information: 28%

Conclusion

In many ways, the COVID-19 pandemic was a wake-up call for America and the health care industry. After years of gradual innovation and advancement, we were collectively pushed as a nation to find fast solutions for life-and-death challenges.

Moving forward, we have an opportunity to take what we’ve learned and continue to foster an integrated health model that is centered around the needs of the individual. As shown by the 2021 Health Care Insights Study findings, people not only want convenient and transparent care, but also choice and control over their experience.

At CVS Health, we are uniquely positioned to anticipate, deliver and exceed the health care expectations of our patients, customers, clients and members with the integrated health care services we provide. We’re addressing the most prevalent, costly and complex health conditions by delivering care to people in the ways that are most meaningful to them. Our ability to serve our nation during the COVID-19 pandemic only underscored the effectiveness of this strategy.
Methodology

The Health Care Insights Study by CVS Health, first released in 2018 and called the Health Ambitions Study, then known as the Path to Better Health Study in 2019 and 2020, was conducted in March 2021 and included two surveys fielded by Market Measurement, a national market research consulting firm. The consumer survey comprised 1,000 participants 18 and older, located throughout the U.S. It also oversampled five metropolitan statistical areas — Phoenix, Columbus, Tampa, Houston, and Philadelphia and two ethnic groups: Black and Hispanic people. The survey of 400 providers focused on primary care physicians and specialists with at least two years’ experience, as well as licensed clinical workers, nurse practitioners, physician assistants, registered nurses and pharmacists.