Wanting to better understand the challenges that people face when undergoing care transitions, the Centers for Medicare & Medicaid Services listened to the stories of 46 people with Medicare and their caregivers. In recounting their experiences, people spoke of a broad range of obstacles they confront. Some of these obstacles were noted as not being unique to care transitions. This graphic depicts 11 insights, informed by this research, on the most commonly shared challenges.

**Coverage options create multiple decision points for people with Medicare.**
Even with a growing number of resources meant to help people with Medicare navigate the system, confusion is common, particularly when dealing with complex costs and coverage rules.

"But even with Medicare, you never know what things are going to cost... You've never told and you never really find out... Like my husband says, 'You go to buy a car and you know what you're going to be charged, and on medical you don't have a clue.'" - Person with Medicare

**Doctors are no longer the single source of information that people with Medicare rely on to understand their medical conditions.**
Similarly, what the doctor suggests is just one of many opinions that people consider when making health decisions.

"I went home and got on the internet and figured out what I was pretty sure I had... I made the mistake of telling a doctor... He totally dismissed me. He had no interest in what I knew about my body that could have helped accelerate the diagnosis process." - Person with Medicare

**Medicare often uses a one size fits all approach, and leaves people with specific needs such as people with disabilities and chronic diseases, people who speak English as a second language, or dual-eligible individuals, jumping through additional hoops to get the care they need.**

"I was a Medicare beneficiary due to disability. I found it rather unusual the way Medicare is administered and why if you are put on disability then you wait two years to qualify for Medicare. Generally, with an ovarian cancer patient, a two year wait is a long, long time." - Person with Medicare

**In contrast to the widely held belief that a shared understanding between providers and patients is about priorities, values, and goals as the basis of good care, people with Medicare largely feel like they are not being heard and are excluded from decision-making.**

"I had a hospital send me a bill for outpatient surgery [for my late husband] and I said, 'he's never been to this hospital and if he has I want to see a picture because he's been dead for 2 years.'" - Caregiver of Person with Medicare

**It's up to you and your family.**
"The snow scared me to death... The State doesn't have a plan for dealing with dialysis patients during the snow... So it's on, it's up to you and your family." - Person with Medicare

**People with Medicare feel like providers often under-value the realities of how they live their lives and how these realities affect their ability to follow their care plan.**

"The doctor has to be proactive at home to keep the arm or leg usable." - Person with Medicare

**During a care transition, the moments that require the most decisions often coincide with the times that people with Medicare have the lowest capacity due to stress, fear, or the side effects of medication.**

"I'm on a large amount of opioids and when I was on morphine it numbed my brain, it was too hard to figure out Medicare and Medicaid." - Person with Medicare