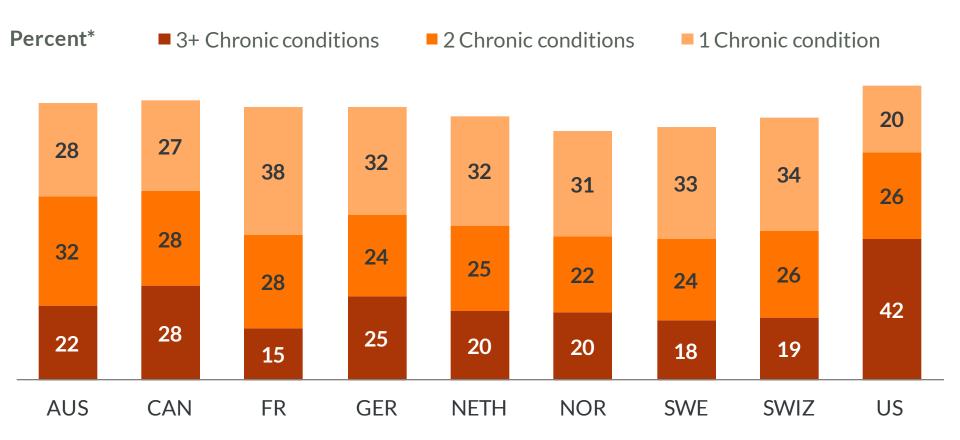
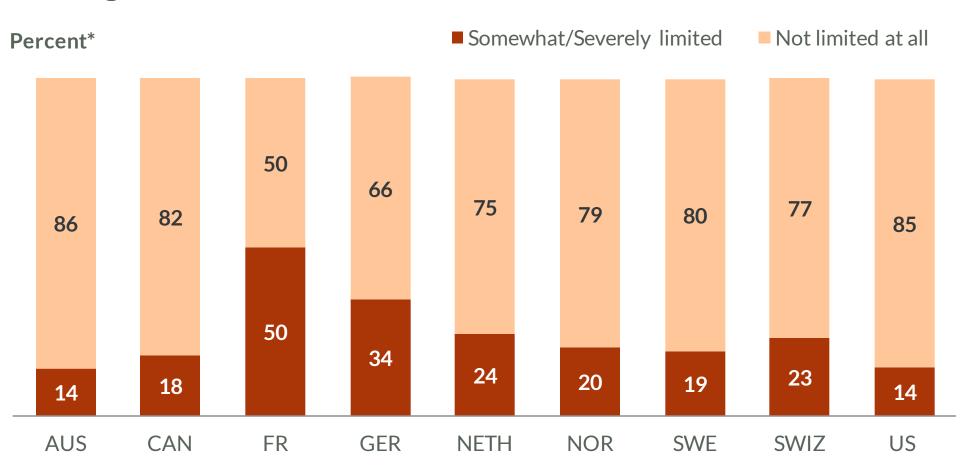
Exhibit 1

More Older Adults in U.S. Have Multiple Chronic Conditions



^{*} Reported having hypertension or high blood pressure, heart disease, diabetes, lung problems, mental health problems, cancer, and/or joint pain/arthritis.

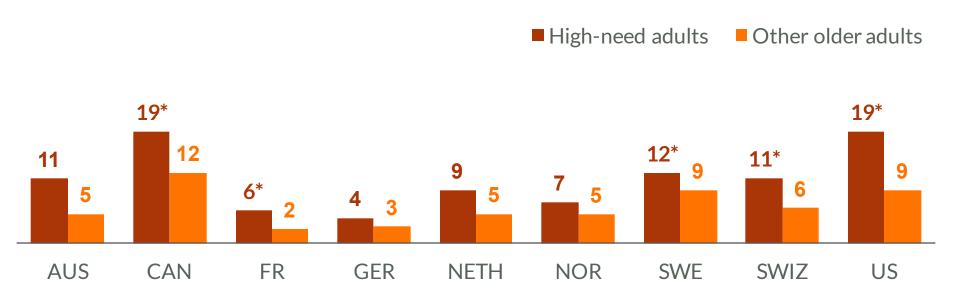
Varying Rates of Functional Limitations in Older Adults Among Nine Countries



^{*} Reported being "somewhat or severely limited" in the activities people usually do, such as feeding oneself, getting in and out of bed or a chair, dressing and undressing, or bathing.

More High-Need Adults Have Avoidable Emergency Department Visits

Went to the ED for a condition that could have been treated by regular doctor or place of care if available (percent):



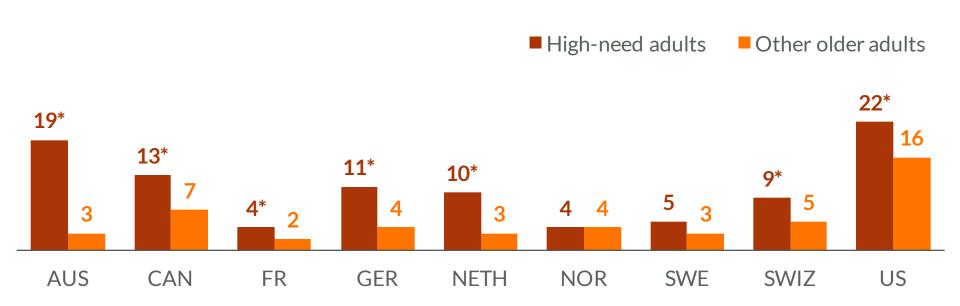
Base: Had regular doctor/place of care.

Notes: High-need adults—Adults age 65 and older with 3+ chronic conditions or a functional limitation; Other older adults—All other adults age 65 and older.

^{*} p < 0.05, denotes significant differences between high-need adults and other older adults within country.

Cost-Related Access Problems More Prevalent Among High-Need Adults

Had any cost-related access problem^a in the past year (percent):



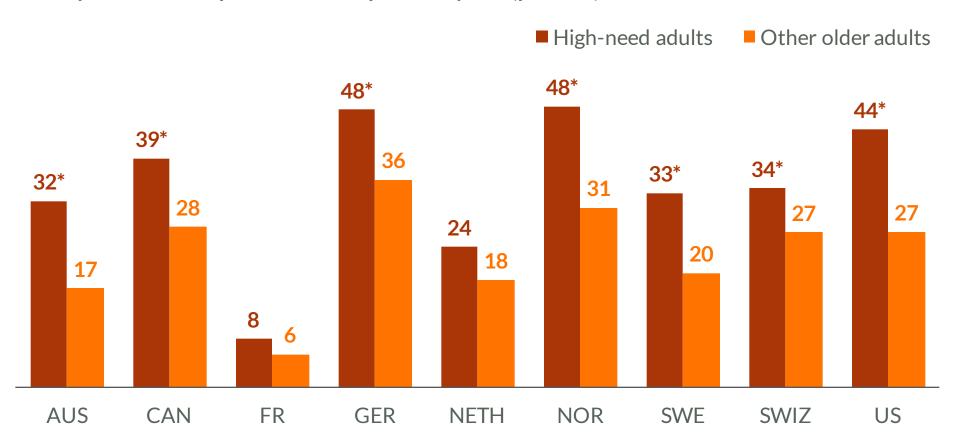
^a Had a medical problem but did not visit doctor, skipped medical test or treatment recommended by doctor, and/or did not fill prescription or skipped doses because of the cost.

Notes: High-need adults—Adults age 65 and older with 3+ chronic conditions or a functional limitation; Other older adults—All other adults age 65 and older.

^{*} p < 0.05, denotes significant differences between high-need adults and other older adults within country.

High-Need Patients Experience Poorly Coordinated Care

Had any coordination problem^a in the past two years (percent):



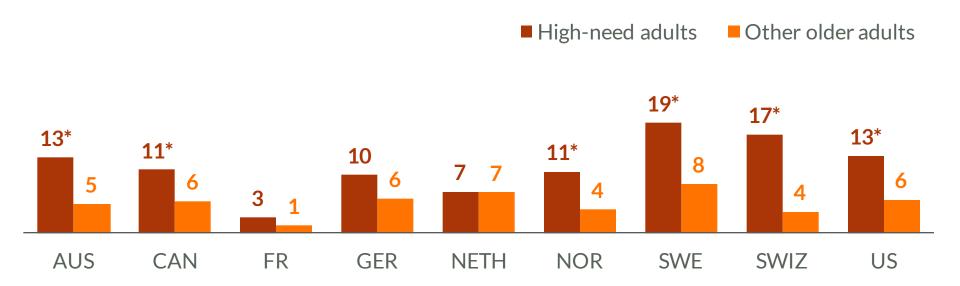
^a Test results/records not available at appointment or duplicate tests ordered; received conflicting information from different doctors; and/or specialist lacked medical history or regular doctor was not informed about specialist care.

Notes: High-need adults—Adults age 65 and older with 3+ chronic conditions or a functional limitation; Other older adults—All other adults age 65 and older.

 $^{^{*}}$ p < 0.05, denotes significant differences between high-need adults and other older adults within country.

High-Need Patients Less Confident in Their Medical Care

Thought a medical mistake was made in their treatment or care in the past two years (percent):



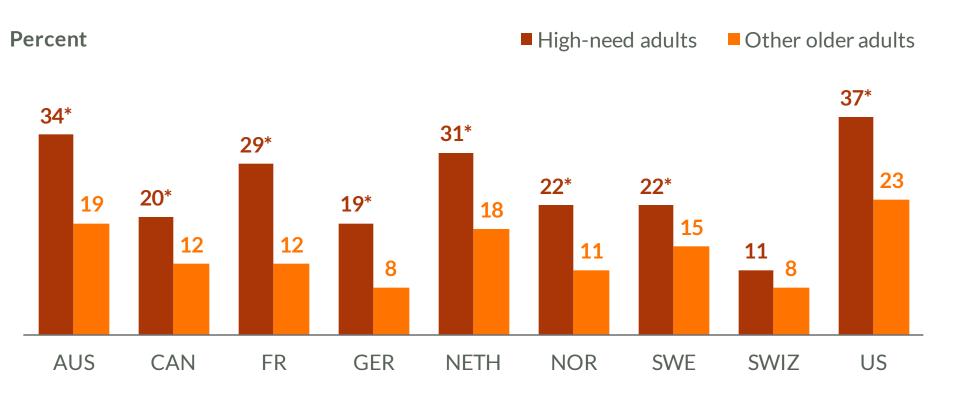
^a This could include being given the wrong medication or wrong result from a medical test.

Notes: High-need adults—Adults age 65 and older with 3+ chronic conditions or a functional limitation;

Other older adults—All other adults age 65 and older with at least one chronic condition.

^{*} p < 0.05, denotes significant differences between high-need adults and other older adults within country.

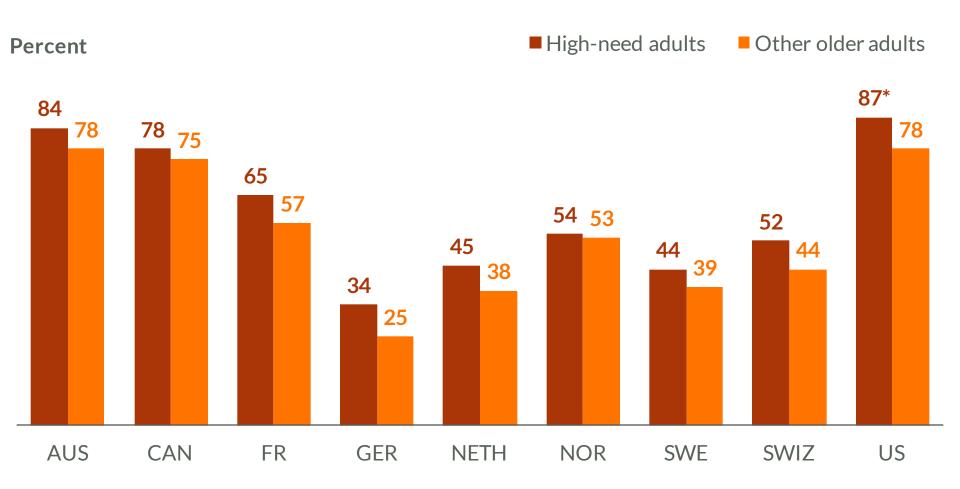
In the U.S., More High-Need Patients Report Contact from Health Care Providers Between Visits



Notes: High-need adults—Adults age 65 and older with 3+ chronic conditions or a functional limitation; Other older adults—All other adults age 65 and older with at least one chronic condition.

^{*} p < 0.05, denotes significant differences between high-need adults and other older adults within country.

High-Need Patients More Likely Than Other Older Adults to Report Having a Treatment Plan to Carry Out in Daily Life



Notes: High-need adults—Adults age 65 and older with 3+ chronic conditions or a functional limitation; Other older adults—All other adults age 65 and older with at least one chronic condition.

^{*} p < 0.05, denotes significant differences between high-need adults and other older adults within country.