



c/o Focus Care
500 West Cummings Park
Suite 2700
Woburn, MA 01801

Willa D Long
1424 S Morgan St
Granbury, TX, 76048

Dear Willa D Long,

Thank you for having your yearly health visit offered to you by Focus Care and Care N' Care (HMO/PPO) health plan. At Focus Care, we believe better information leads to better care. Your health review with Focus Care is a great step toward preventive care and healthy living.

We have enclosed Personal Health Summary from your recent health visit. This summary gives you a good picture of your health and suggests immunizations, screenings, health tests, and local resources that you may want to discuss with your primary care provider.

We want to remind you that this private information does not affect your health care coverage in any way. Be sure to call Care N' Care before you schedule any health test to make sure it is covered.

We hope you will share your Personal Health Summary with your family and discuss it with your primary care provider. If you have questions about this letter or the enclosed Personal Health Summary, please contact Focus Care at 1-855-233-4910, Monday through Friday, 8:30 am to 9:00 pm. CT.

In good health,

A handwritten signature in black ink, appearing to read "J Fish", is positioned above the printed name and title of the sender.

Jason Fish, MD
Chief Medical Officer
Care N' Care Insurance Co., Inc

Patient Assessment Summary

Name	: Willa D Long	Age	: 79
Date of Birth	: 1943-02-19	Member ID	: CC0020764
Evaluator Name	: Leslie Berryman, FNP	Date	: 2022-5-26 01:48 PM
Gender	: Female	Address	: 1424 S Morgan St,Granbury,TX
Lob	:	Marital Status	:
Email	:	Phone	: 8179641083,
Primary Language	: Spanish	Race	: No Ethnicity

Vital Signs

Blood Pressure	/undefined mmHG	Pulse	bpm	Respiratory Rate	
Temp		Pulse Oximetry		Pain Scale /10	
Age	79	Patients Height		Patients Weight	
BMI	(Moderate Obesity)				

Allergies

None

Current Medications

None

Over the Counter Medications / Supplements

None

Diagnoses under Chronic Care Management

Active

None

History of

1. Macular Degeneration

Care management related to patient's activity levels

Assisstive Devices and DME

Prosthesis, Wheel Chair, Urinal

Falls during the past year

Once

Do you worry about falling or feeling unsteady when standing or walking

No

Worries about falling or feeling unsteady when standing or walking?

No

Did you have a fracture in past 6 months?

Care management related to past medical history

Number of times in the past 12 months seen PCP : 1

Number of times in past 12 months been to the Emergency Room : 1

Number of times in past 12 months stayed overnight in hospital : 1

Number of times in past 12 months been in a nursing home : 1

Had Surgery in the last 12 months : 1

Providers:

Medical Specialty	Specialist	For
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Primary Care Physician

PENELOPE AIKIN JACKSON

Family History:

None

Care management related to preventive care

Screenings completed during today's visit:

Screening Name	Screening Completed	Exam Date	Screening Result	Diagnosis	Comments
MICROALBUMIN					
FOBT					
A1C					
LDL					
RETINAL EYE EXAM					
DEXA					
PAD					

PHQ 2 Score:

Preventative Follow up needed

Screenings

Abdominal Aneurysm Screening	
Hepatitis C Screening	
Nutrition/ weight management	
Other	

Social

Substance Abuse	
Healthcare Proxy	
Literacy	

Disease Management

Discuss medication side effects with your Doctor	
Eye exam	
Swallowing evaluation	
Blood Pressure checks	
Exercise 30 min a day	
Take medications as prescribed	
Other	

Assessor Comments

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