AUGUST 2026

Patient Perspectives Resource 2:
What Patients Want Health Care Teams to Know

GLP-1 Medication Adherence

Developed April 2025 with input from members of the NEO QI Hub Patient Advisory Council to help health care teams provide more patient-centered diabetes care.

Starting and Using GLP-1 Medications

Try This:

- Discussing both benefits and risks clearly, honestly, and empathetically
- Normalizing conversations about side effects and encourage patients to speak up
- Reassessing side effects early and often
- Supporting medication adjustments or switches when side effects are severe
- Reviewing potential drug interactions at every visit

Instead of This:

- Minimizing or dismissing side effects
- Expecting patients to tolerate severe symptoms without reassessment
- Assuming patients know which symptoms are normal or temporary

Patient Education and Readiness

Try This:

- Ensuring access to a diabetes educator or trained staff
- Providing simple, plain-language education (verbal and written)
- Confirming patient understanding and readiness before starting therapy
- Tailoring education to the patient's stage of readiness
- Reinforcing that learning may involve trial and error

Instead of This:

- Starting GLP-1 therapy without education or follow-up
- Relying on patients to "figure it out on their own"
- Using overly technical or rushed explanations

Insurance, Cost, and Financial Barriers

Try This:

- Reviewing insurance coverage at the time of prescribing
- Explaining medication alternatives if preferred options are not covered
- Connecting patients to:
  - Manufacturer assistance programs
  - Community or pharmacy support resources
- Revisiting medication plans if coverage changes or lapses

Instead of This:

- Assuming patients can afford prescribed medications
- Ignoring cost concerns unless patients raise them
- Leaving patients unsupported during coverage disruptions

Reducing Stigma and Building Trust

Try This:

- Using nonjudgmental, supportive language
- Normalizing GLP-1s as one of many valid treatment options
- Addressing the patient's medical, emotional, and social context
- Acknowledging and reducing shame or stigma related to weight or diabetes medications
- Highlighting patient success stories to encourage engagement

Instead of This:

- Framing GLP-1-use as a failure or shortcut
- Focusing only on weight rather than overall health
- Overlooking emotional responses to medication use

Follow-Up and Long-Term Support

Try This:

- Practicing patient-centered care grounded in empathy
- Documenting patient experiences with side effects, benefits, and challenges
- Using individualized follow-up plans
- Celebrating successes (e.g., improved A1C, increased confidence)
- Reinforcing progress to support long-term adherence

Instead of This:

- Using a one-size-fits-all follow-up approach
- Focusing only on clinical metrics without patient context
- Missing opportunities to reinforce motivation

This resource is part of the AHEAD Initiative Diabetes QI Clinical Toolkit. For access to this toolkit and additional resources, please visit NEOQIHub.org.

In partnership with

The Northeast Ohio Quality Improvement Hub is funded by the Ohio Department of Medicaid and administered by the Ohio Colleges of Medicine Government Resource Center.
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