



Driving multichannel, team-based engagement to impact HEDIS

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With the recently released updates to HEDIS performance measures, stakeholders across the healthcare landscape are organizing resources and implementing strategies to ace their performance scores in 2018.

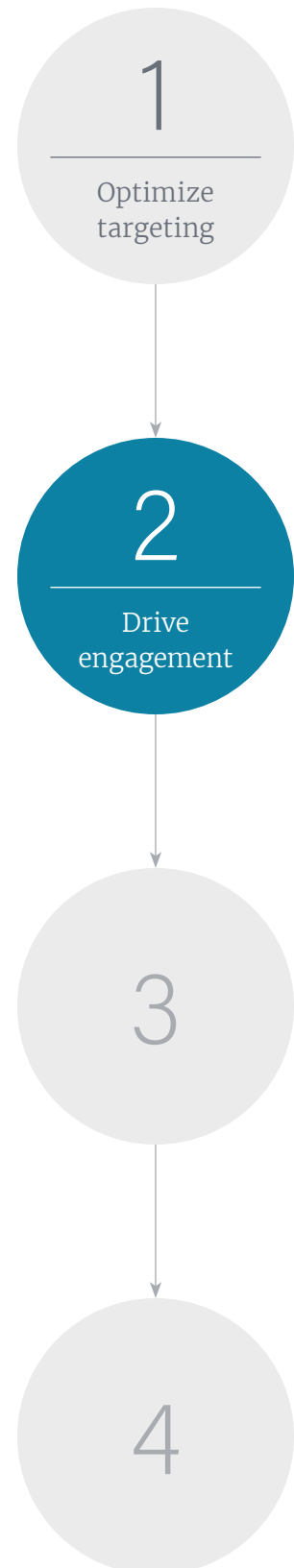
In order to meet evolving industry standards, HEDIS measures now place increasing weight on patient satisfaction and prevention. In fact, **patient satisfaction (CAHPS - 19% of total) and prevention (26% of total) alone account for 45% of the HEDIS scores**. Health plans looking for opportunities to impact these measures are turning to care management—programs intended to support patients in their recovery from acute events and the ongoing management of chronic conditions—to address new HEDIS measures and impact performance on these high value areas. However, as it exists today, care management will require more changes to address the evolving focus of CAHPS and HEDIS measures. Plans are paying attention to see how new technology, workflows, and organizational processes can make a difference for care management.

So, what does **transforming care management** really mean? It starts with putting the needs of patients first, leveraging digital channels to modernize clinical services, integrating siloed interventions, and rigorously measuring impact to drive continuous improvement.

In this 4-part series, **we outline key strategies that health plans can apply to transform care management and improve performance on HEDIS**.

The series will include the following strategies:

1. optimizing targeting for recruitment,
2. driving engagement,
3. leveraging personalized, digital clinical programs, and
4. rigorously measuring clinical services.



In the first part of our series on improving HEDIS performance through care management transformation, we discussed methods for targeting and recruiting the highest value population of members (read [Part 1 here](#)). Once enrolled, the fundamental goal of care management is to **engage members successfully over time** in order to improve outcomes. Widespread digital transformation presents an opportunity to modernize engagement methods and adapt organizational structures to drive faster achievement on quality outcomes.

This white paper will discuss the benefits of utilizing a multichannel strategy to create meaningful member engagement as well as new staffing models that focus on building relationships with members. Together, these efforts position care teams to derive greater value from member support and improved performance on quality outcomes such as HEDIS.

Multichannel support truly engages members

With 77% of Americans now owning a smartphone¹, consumers are driving an unprecedented shift in expectations and preferences powered by the “on the go” nature of mobile devices. This trend is particularly salient for healthcare because, unlike its technology predecessors, smartphone ownership spans demographic segments, advancing access to hard-to-reach populations such as Medicaid members, rural and limited-access members, and non-English speakers.

While seniors (age 65+), who in 2018 hit a record with 46% owning smartphones, appear to be the anomaly at first glance, it's important to recognize that 85% of this group owns some kind of mobile device (such as a regular cell phone or tablet). Seniors express the same preference for mobile interaction.

These trends reflect the opportunity to realign support methods to meet members' multichannel expectations. In fact, leveraging a multichannel approach has already proven to **create cost savings** and **increase member satisfaction** by providing the right type of support at the right time. Whether mobile

devices are used to access relevant health information, communicate via text message, request a prior authorization, coordinate with multiple providers, or enter patient-reported outcomes, they have become the predominant conduit for managing health and care. Members are looking for multichannel options—a combination of phone calls, messaging, apps, web, and video chat—so they can choose the method that meets their needs in the moment.

In our experience working with care management teams, we've heard members voice a strong preference for multichannel, mobile support, and

1. Pew Research Center, Mobile Fact Sheet. February 5, 2018.

messaging in particular, for a variety of reasons. For example, it's:

- Flexible and convenient: many members work during business hours when care managers would otherwise try to call, so mobile messaging allows the member to engage and respond on their own time.
- More frequent support and guidance rather than intermittent calls.
- Relevant, trustworthy information available right at their fingertips.
- A discreet way to discuss sensitive health topics.
- Written down so members can review responses, suggestions, instructions, and goals later.
- An easier way to schedule a phone call or video chat, when needed.

As these examples demonstrate, providing multichannel support is what it truly means to meet members on their terms, especially for varied needs.

The shift to multichannel engagement rewards care managers as well. Having more effective tools for support helps care managers develop **long-term, trust-based relationships with their members** that open the door to successful interventions. Imagine two scenarios...

In the first one, a care manager from a health plan calls a member on the phone for the first time, asks a long set of assessment questions, and tells the member she needs a mammogram. After hanging up, the member may or may not follow through with scheduling the appointment.

In the second one, the same care manager calls a member on the phone for the first time and offers to support her with her needs. (Now, the care manager may know the member needs a mammogram, but she takes time to get to know her first, asking what she needs help with and providing valuable support.) They may talk on the phone occasionally, but most communication happens via mobile messaging. After working with the member for a few weeks, the care manager reminds the member it's time for her annual mammogram, makes it relevant to her health goals, and provides information via mobile about why it's important.

Which scenario would **you** prefer? →

Relationship-based interventions*



INSIGHT FOR THE CARE TEAM

Member indicated she has not had a mammogram within the past year.

Message from care manager

Hi NAME, you're doing great with your exercise goal this week, nice job! I also noticed you haven't had a mammogram in a while. Can I help you schedule it?

Message from member

I know I need to, but I keep putting it off.

Message from care manager

I understand that! It often feels like the last thing you need to do. Mammograms are one of those things you want to push up on your priority list. Breast cancer is curable for most women, but only if you catch it early - which is what mammograms are for! I'd love to help you get this done. Do you think you'll be able to schedule your mammogram this week?

Message from member, **less than 30 minutes later**

Just scheduled an appointment for next week!

Message from care manager

I love your commitment to making healthier choices. You just say it and then you do it!

Message from member

Lol it's because you're there for me and I can talk it out. So thank you!

* Adapted from a real conversation through Wellframe

Simply put, this model changes the whole dynamic of member engagement. Instead of focusing on one quality issue alone, it reorients the conversation around the member's **holistic needs** through more frequent, meaningful interactions, and dramatically increases the likelihood that a member follows through on that quality issue in question. By meeting members on their terms and providing value up front, care

With *each message* a patient receives in the first week in care management, s/he is

20%

more likely to be engaged after 30 days*

* Measured by real health plans using Wellframe

managers can hold members accountable for reaching their health goals, scheduling follow-up appointments, and taking actions that close gaps in care. The benefits are sweeping: most immediately, happier (and healthier) patients, and more satisfied care teams; longer term, better performance on quality outcomes; and crucially, the **opportunity to impact additional quality metrics going forward.**

Patient story: early intervention



Care *teams* amplify engagement

So multichannel engagement sounds promising, but the next question is, of course, “how will this scale?” The path we’ve seen to be most effective for supporting members through digital channels relies heavily on **a team-based approach** and willingness to innovate and iterate on roles and responsibilities.

Care management programs typically employ a group of licensed clinicians who are responsible for both reaching out to members and engaging them toward improved outcomes. A significant proportion of the care manager’s time is spent calling members—many of whom do not answer—and completing administrative tasks in an effort to document all interactions with members. As such, only a fraction of their time is spent actually working with members and providing the support they are trained to deliver.

However, care management teams can reverse these inefficiencies and deliver more value, especially when embracing multichannel engagement strategies, by rethinking team structure. **Role specialization** in particular is a cost-effective and time-efficient approach for reshaping the care management team that supports overall quality initiatives. Two of the care manager’s core functions—recruitment and non-clinical engagement—can be reassigned to new roles on the team. The model that emerges will look like this: →

Care team roles



CARE MANAGER

- Actively works with patients during periods of high clinical need providing education on self-management, medications, and other clinical topics.
- Main point of contact for high-risk, high complexity patients who have persistent clinical needs.
- Pulled in on an as-needed basis to address clinical issues for lower-risk patients when they arise.
- Operates at the top of his or her clinical license.



RECRUITMENT SPECIALIST

- Plays a non-clinical role, focusing solely on outreach, recruitment, and enrollment of target members.
- Provides technical support to help members with mobile devices.



ENGAGEMENT SPECIALIST

- Plays a non-clinical role focused on maintaining patient engagement.
- Trained in patient advocacy and health coaching to help members manage psychosocial and lifestyle factors (social determinants) that are often the barrier to good health or successful recovery.
- Promotes engagement through mobile messaging with members on daily to weekly basis.

Task-shifting these essential components of care management to non-clinical staff members drives improvements throughout the value chain. First, members receive the right type of support at the right time from a dedicated team of specialists trained in the best practices of their respective focus areas. Second, care managers are able to focus the majority of their time on proactive intervention and high-priority clinical needs, while engagement specialists provide ongoing support

on day-to-day topics. Third, and most importantly, adapting team structure enables the care team to **support significantly more members in clinical services at once**, since multichannel support maximizes the efficiency of interactions with each member.

The accountability and convenience of multichannel support combined with the team-based approach of digital care management together represent solid building blocks for improving the clinical outcomes

that matter for HEDIS performance. Advances in patient satisfaction, efficiency, and scale serve only to emphasize the urgency with which plans must consider these improvements and truly begin meeting members on their terms.

In the next segment of our series on transforming care management to improve HEDIS scores, we'll dive into digital care programs designed for members, including mobile-optimized education and data collection to keep members coming back. We'll also discuss how this novel data set necessitates a needs-based workflow for the care team. Stay tuned!

About Wellframe

Wellframe partners with leading health plans to transform care management and member engagement. Our mobile-enabled care management program optimally extends existing care management systems and resources to provide members with ongoing guidance and support, when and where they need it. Wellframe's data driven approach delivers proven results including improved member experience, reduced medical spend and increased efficiency.



TECH-ENABLED



DATA-DRIVEN



PATIENT-CENTRIC