

Perfecting Population Health

Leaders are varied in their approaches to population health management but share common goals and challenges.

In their efforts to bolster their population health management programs and ensure the wellness of their patient populations, payers and providers are employing a variety of services and initiatives to improve health indicators, bolster adherence to treatment plans and strengthen overall wellness. While executives have differing approaches for distinct populations, most have centered their efforts around influencing the health of members and patients beyond the four walls of a hospital or clinic, according to a recent survey commissioned for Envolv Health by Modern Healthcare Custom Media.

The survey, which was answered by 640 healthcare leaders across the U.S. in May and June of 2019, offered insights into how healthcare organizations are approaching population health management (PHM) and their biggest challenges in ensuring the health of the communities they serve.

DIFFERING SENTIMENTS ON POPULATION HEALTH MANAGEMENT

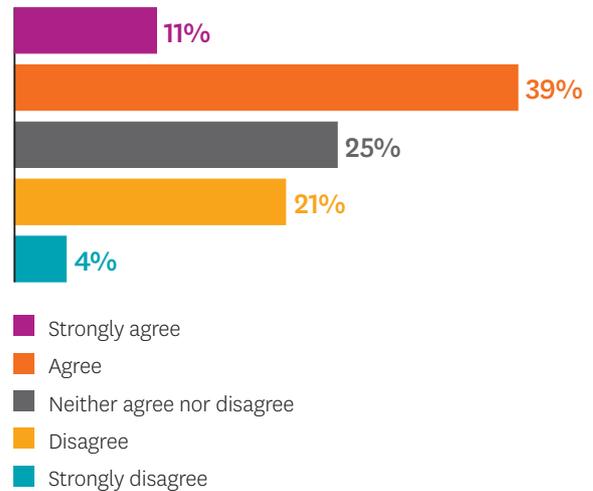
Leaders who answered our survey appear confident in their knowledge of their patient or member population's needs, but it's less clear whether they have the data to back up this confidence.

Eighty-three percent of respondents agreed that their organization has a grasp on the most pertinent challenges and conditions afflicting their patient or member population. Only 6 percent reacted with disagreement to this sentiment, and 11 percent were neutral.

Reliable data and consistent analytics are crucial to an efficient, evidence-based population health management program, but organizations differ in their investment in this area. This was evident in responses to our survey, as leaders' confidence was more varied when they were asked whether their organization "lacks the data [they] need to fully understand [their] patient/member population." While over half of readers expressed disagreement with this statement, 26 percent noted that their organization lacks the data they need.

Most providers (77 percent) told us that they believe their organization is taking proactive steps to address population health. What we saw across our survey, however, is an acknowledgement among leaders regarding the importance

"My organization struggles to influence patient behavior to improve population health"



of influencing patient behavior, both in impacting their lifestyle and directing them toward care. Fifty percent of leaders told us that they struggle to influence patient behavior in their efforts to improve population health.

"Changing patient behavior is hard, no matter where you sit in the healthcare system. Bottom line, it's the individual behavior changes that research is telling us have the biggest impact on clinical outcomes," said Rashi Venkataraman, executive director of prevention and population health for America's Health Insurance Plans (AHIP). "We need to make healthier choices easier for all Americans."

CHALLENGES IN ADDRESSING POPULATION HEALTH

While leaders were somewhat split on their ability to influence patient or member behavior, this was rated as leaders' top challenge in addressing population health, with 63 percent of respondents rating it among their top three challenges. Other popular responses included social determinants (57 percent), chronic disease management (48 percent), medication costs and adherence (43 percent) and health literacy (24 percent). These challenges all represent key areas where providers and payers in value-based agreements are now expected to address factors that have traditionally seemed beyond their control, through community education, care coordination and engagement with nontraditional partners such as religious groups,

housing agencies and food banks. Providers and payers who are able to address social barriers, improve patient health literacy and curb out-of-pocket costs will have patient populations that are more likely to make healthy behaviors and seek appropriate care.

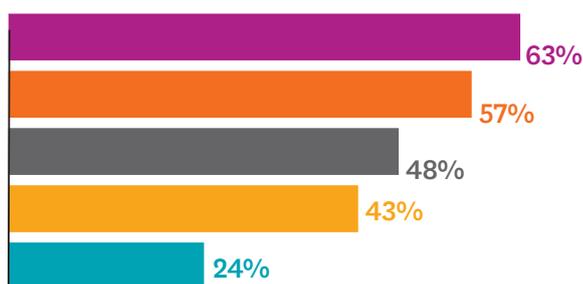
“Often, successful patient engagement strategies require meeting customers where they are and meeting them in their community, recognizing that different approaches are going to work with different individuals,” Venkataraman said. “So, you see health plans investing in a wide variety of strategies in order to support their members’ social needs.”

Healthcare executives are often vocal about the challenge of keeping costs down and ensuring reimbursement, so it’s notable that only 2 percent of respondents cited cost and reimbursement among their most pertinent challenges related to population health management.

Cost is always a factor in decision-making, but it’s clear that leaders are foremost concerned with efforts to effectively manage population health programs and show positive outcomes. Leaders have recognized that PHM programs are a necessary and worthwhile expenditure demanded by changes in policy and prompted by advances in public health.

“By and large, healthcare organizations have recognized that the savings of a successful preventive care program are monumental and interventions like screenings and immunization come at a much lower cost than a lifetime of chronic disease management,” Venkataraman said.

Top 5 population health challenges cited by healthcare leaders



- Influencing Behavior (e.g., preventive health, nutrition, tobacco use)
- Addressing Social Determinants of Health (e.g., food insecurity, access, homelessness)
- Chronic Disease Management
- Medication Costs and Adherence
- Health Literacy

Top 5 PHM tools and programs according to healthcare leaders

-  Lifestyle programs (e.g., smoking cessation, nutrition and weight management)
-  Care coordination for chronic illness
-  Care coordination after hospital discharge
-  Medication adherence and pharmacy services
-  Telehealth services

HOW LEADERS ARE APPROACHING POPULATION HEALTH MANAGEMENT

Healthcare organizations are employing a wide variety of initiatives in their efforts to manage the health of their patient and member populations, with the most popular programs focusing on behavior influence. The top five tools cited by respondents included lifestyle management such as smoking cessation, nutrition and weight management (77 percent), care coordination for chronic illness (76 percent), care coordination after hospital discharge (74 percent), medication adherence and pharmacy services (61 percent), and telehealth services (56 percent). Over half of participants are also utilizing community health screenings, data analytics, mental health counseling and emergency assistance, and maternal health management.

Venkataraman called care coordination the “bread and butter” of payers’ efforts to manage population health. Organizations are expanding upon these core competencies by investing in new digital tools—including telehealth, apps and therapeutic devices—that can expand access to care and help patients better monitor their health.

“Social workers and care managers have always understood the connection between social determinants of health and clinical outcomes,” Venkataraman said. “There’s been a lot of energy around social determinants in our industry recently, making it easier for payers to expand upon things they already know work. The business case for care coordination as a tool for overcoming those barriers has made itself over many years.”

Only a quarter of organizations are currently administering programs that address dental health or vision health, which some providers and payers may see as outside of the realm of medical payers and providers. Organizations do not appear to

be widely administering these programs themselves, but most leaders believe they're an important contributor to population health, with 84 percent responding that vision health coverage or services are "very important" or "important" to a successful PHM program, and 89 percent saying the same for dental health. This suggests that there may be significant opportunity for payers and providers to partner with organizations that have more significant expertise and efficiency in these areas.

Dental and vision outcomes can be important predictors of disease in the medical realm. Increasingly, providers and payers are embracing these services as crucial to providing "whole-person care."

"Our members are continuously looking to ways to integrate these services into traditional medical care," Venkataraman said. "It's important for Americans to be able to find a benefits package that fits the needs of their family, and insurance companies are looking to cover as many of those services as affordably as possible."

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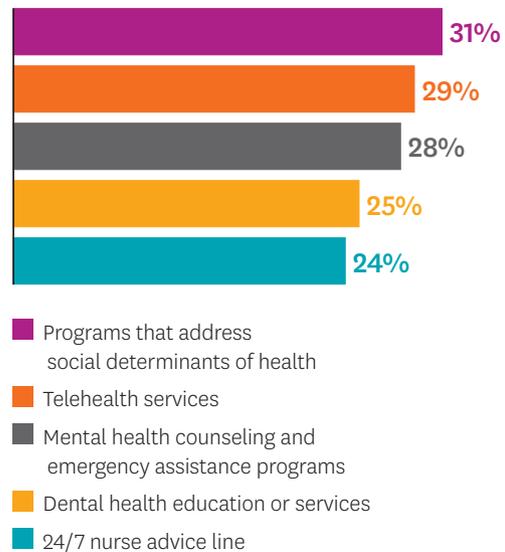
Venkataraman points to the popularity and success of Medicare Advantage plans, which often include dental and vision coverage, in addition to hearing and wellness. "It's a good example of where health plans are trying to integrate all of these services, recognizing that these needs should be addressed in whole-person care, in a holistic way."

Leaders who took our survey are utilizing dental and vision programs in relatively low numbers, but further responses to our survey show there may be an appetite to implement them in the future.

LEADERS SEE OPPORTUNITIES FOR EXPANSION

Eighty-seven percent of respondents expressed interest in adding at least one new tool or program to their PHM initiatives. Leaders' top choices included programs that address social determinants of health (31 percent), telehealth services (29 percent), mental health counseling and emergency

Top 5 programs or tools challenges respondents said they'd like to add in the future



assistance programs (28 percent), dental health education or services (25 percent) and a 24/7 nurse advice line (24 percent). Vision health education or services were not far behind at 21 percent.

It should come as no surprise that social determinants of health rank high among healthcare executives' priorities for the future. In a survey conducted on behalf of Envolve Health in 2018, 46 percent of respondents told Modern Healthcare Custom Media that they feel their organization is only "somewhat prepared" to address their community's future needs as related to social determinants of health. Another 25 percent said their organization was "not at all prepared" or "not as prepared as we need to be."

The desire of nearly a quarter of respondents to add a 24/7 nurse advice line to their PHM capabilities comes as misuse of hospital emergency departments has inflicted a massive burden on health plan premiums and overall healthcare costs. As healthcare organizations invest in tools that can guide individuals to the most appropriate venue of care, some are offering members the opportunity to consult with a nurse about their best course of action when ill. These healthcare professionals can not only dissuade patients from making unnecessary ED visits but also play a crucial role in triaging potentially life-threatening conditions that require emergent care.

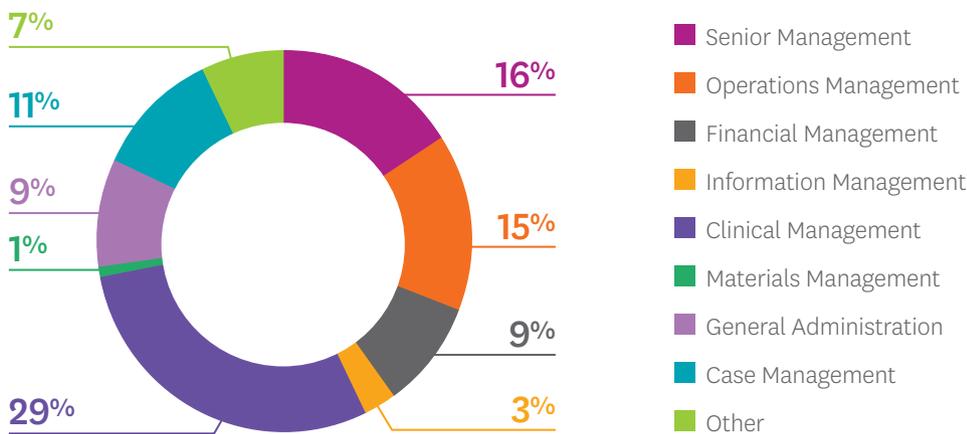
PREPARING FOR A VALUE-BASED FUTURE

As more healthcare organizations enter value-based agreements and become responsible for the health outcomes of the individuals in their care, providers and payers alike will seek out best practices, technologies and partners that can help them influence the innately personal aspects of patients' and members' lives that impact healthcare outcomes. Success isn't going to come from a specific "gold standard" solution, but rather from the right mix of programs and initiatives that meet the specific needs and challenges of each organization's unique populations.

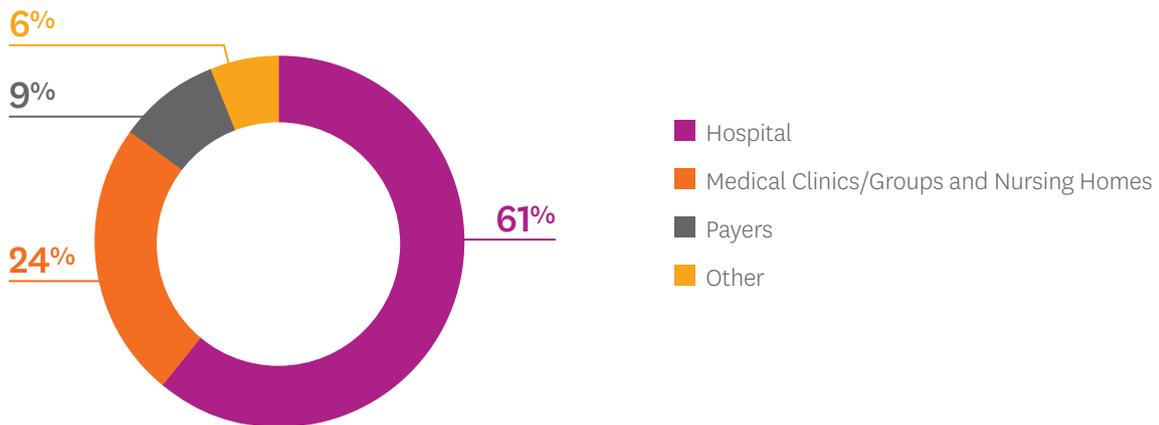
Envolve Health similarly doesn't believe in a one-size-fits-all model for healthcare, but rather a whole-health, integrated and flexible approach that connects traditionally fragmented services while linking individuals to appropriate medical and community resources. Envolve Health, through its family of companies, offers a comprehensive suite of solutions that can support your population health management program, including specialty pharmacy, PBM, vision, dental, diabetes management, nurse advice line and MSO services. Learn more at EnvolveHealth.com, or call 1-844-234-0810 to speak with a member of the Envolve Health team.

DEMOGRAPHICS

Responsibilities/Roles of Survey Respondents



Institutions Represented



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