Advice in Action: Trends and Best Practices in Influencing Patient Behavior

Payers guide patients to care through coverage, while providers work to set standards for care delivery. However, these organizations can’t control member behavior. For instance, they can’t control how patients eat, whether they smoke, if they exercise, or whether they manage disease properly, among many other behaviors. As healthcare organizations take on risk for managing the overall health of patients and members under value-based agreements, many leaders are seeking to understand how they can influence individuals to make the best choices for their health. This is a top challenge for executives, who are eager to make an impact on unhealthy behaviors that can affect outcomes, according to a recent survey conducted for Envolve Health by Modern Healthcare Custom Media.

Leaders cite behavior change as top barrier to improving population health

In a survey of over 640 healthcare leaders across the U.S., three-quarters of respondents expressed uncertainty around their ability to influence patient behavior and 50 percent agreed or strongly agreed that they, as leaders, struggle to influence patient behavior as it relates to population health management (PHM). Respondents to the survey also said that influencing individual behavior was their top challenge in addressing population health, with 63 percent of leaders citing it in their top three challenges.

Leaders are frustrated in this area and understandably so, according to Julie O’Brien, PhD, a behavioral scientist and faculty director of the Centene Center for Health Transformation. The Center is a collaboration between Brown School at Washington University in St. Louis, the Center for Advanced Hindsight at Duke University, and Centene Corporation. Increasing rates of obesity, diabetes, heart disease and other conditions make it evident the industry has a long way to go in making a dent in some of the most significant diseases that impact population health.

“Everyone has their success story or intervention; however, from a population health perspective, we’re not making progress in many areas,” O’Brien said.

Most leaders say they utilize care coordinators for chronically ill patients, hospital follow-up and lifestyle programs such as smoking cessation or weight management. While these investments are a step in the right direction, experts say payers and providers must ensure they’re employing effective solutions.

If payers and providers want to make a significant impact on behaviors that are impacting patient health, they must meet the individuals where they are, said Rashi Venkataraman, executive director of prevention and population health for America’s Health Insurance Plans (AHIP). That requires an understanding that different strategies work for different patients.

“When it comes to wellness, fitness trackers may work with some populations, but others may prefer an in-person health coach,” Venkataraman said. “That’s why we see health plans investing in a wide variety of different strategies. Everyone’s trying to think outside of the box, and nothing is off the table.”

Best Practice #1

Pilot interventions before making a substantial investment.

Organizations that neglect to test potential interventions in an initial controlled experiment risk wasting funds or misinterpreting ROI. “The absolute best thing an organization can do is to test potential strategies within their own organization,” O’Brien said.

Making it easier to make the right choices

Patients are remiss in taking their medications as prescribed. A Kaiser Family Foundation poll found that 29 percent of all adults specifically cited cost as the reason they don’t take their prescribed medications. With the rise in drug prices, this should come as no surprise. According to the survey, 43 percent of leaders cited medication costs and adherence as one of their top three challenges in addressing population health, and nearly all respondents (94 percent) told us that they believe pharmacy services—including clinical programs, home prescription delivery and outreach to patients and members—are crucial to a successful PHM program.

Insurance companies and pharmacy benefit managers are investing in several technologies and services in an effort to bolster adherence, ensuring that members can afford their
medication and understand how to take it as prescribed. Leading medication adherence programs are able to proactively provide adherence intervention at time of diagnosis and allow for early identification of non-adherence risk. It’s crucial that care coordinators offer long-term support and collaborate with providers to diagnose and overcome potential barriers to adherence.

**Best Practice #2**

Remove friction.

Behavior interventions should make it easier to do things that are inherently difficult. Effectively managing certain diseases can require a significant amount of time and effort, and medication regimens can be highly complicated. Calendar invites for appointments, reminder messages and subsidized rides to the doctor’s office are just a few ways to make it a bit easier for individuals to engage in their health. “We have to remove barriers,” O’Brien said.

**Creating Good Habits**

Cost can be a significant barrier to better outcomes, but it’s not the only factor, Venkataraman noted. For example, while coverage of preventive care expanded widely in the past decade, there hasn’t been a significant uptick in use of preventive services. Payers and providers must consider the full ecosystem in which patients and members interact with their health—considering, for instance, how they can influence purchasing decisions at the grocery store and make the gym more convenient.

“It’s not just about covering costs—it’s about finding ways to incentivize behavior so that healthy choices are easy choices,” Venkataraman said.

**Best Practice #3**

Make it the norm.

Payers and providers need to create an environment in which healthy choice is salient in the moment an individual is faced with an easier, less-heathy alternative. Partnerships with local business and community organizations can assist in this effort, as can outreach that encourages use of telehealth or 24/7 nurse advice lines. “If they have the perception that using these technologies is the norm for their symptoms, they may be more likely to use it,” O’Brien said.

**DIRECTING INDIVIDUALS TO THE RIGHT POINT OF CARE**

As payers and providers look to reduce waste, many are engaging in efforts to direct patients to the most appropriate care setting to avoid misuse of the emergency department. Outreach and education play a crucial role in motivating individuals to make the right choice.

Forty-three percent of respondents who answered our survey noted they have a 24/7 nurse advice line to assist members or patients in diagnosing symptoms and direct them to the right venue of care. A recent study found that New Mexico’s statewide call center takes over 15,000 calls on the nurse advice line per month and diverts 65 percent of callers from unnecessarily going to the ED. Care coordinators can also play a key role in managing cases and keeping members out of the hospital by proactively referring them for an outpatient visit if complications are identified.

**Best Practice #4**

Offer individuals a clear plan.

Leaders should relay clear instructions on when patients or members should visit the emergency department (ED) versus a primary care physician or urgent care. “If they’ve planned ahead and made what we call an ‘implementation intention’ based on the symptoms, it can become automatic,” O’Brien said. Care coordinators that proactively target over-utilizers can coach them through specific situations where the ED is warranted, and nurse advice line staff can direct patients to the right venue and educate them for the future.

**A PROVEN PATH FORWARD**

Good health starts with prevention and thrives by eliminating barriers. The personalized benefits solutions from Envolve Health are designed to encourage and empower individuals to reach specific health goals, supplement their overall care, maintain good health habits and make a lasting health behavior change. Backed by proven techniques and sound medical advice, Envolve Health is committed to ensuring patients and members receive the right care at the right time.