



Communicating about value to employees:

Lessons learned from rolling out the Accountable Care Plans

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Sept. 14, 2016



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Today

- Why employee engagement matters
- Background on introduction of new plans in 2016: An opportunity for new engagement and messaging
- HCA's engagement strategies
- Refining our strategies moving forward
- Communications requirements of Accountable Care Plans
- Let's hear from our value-based purchasing partners:
 - UW Medicine
 - Group Health
- Questions

Why employee engagement matters

- Help members understand changes to benefits.
- Engaged employees are healthier, feel like they have more control of their health.

**THE SAVVY HEALTH CARE PURCHASER
GETTING HIGH-VALUE CARE**

As individual consumers, every time we make a purchase we must weigh cost and quality to determine value.

Employers and labor union trusts purchasing health care benefits are doing the same thing—they're just buying a lot at one time and at a lot of cost to their organization.

HOW TO BUY HIGH-VALUE HEALTH CARE
How employers and trusts buy health care can change the way care is delivered—for the better. High-value care is high quality, patient-centered care, provided at the fair price, leading to the best possible health outcomes.

QUALITY

There is enormous variation in the quality of health care. Not all care is equally good.

1. Look for medical groups and hospitals that deliver the care patients need and that avoid unnecessary tests and procedures.

PATIENT EXPERIENCE

Having a good experience at the doctor's office or hospital can lead to better health.

2. Expect providers to listen to patients and respect the role they play in their own health care.

COST

Paying more for health care doesn't necessarily mean the care will be better.

3. Look for providers who offer high-quality care at a fair price.

THESE RESOURCES CAN HELP YOU MAKE SURE YOU ARE BUYING HIGH-VALUE HEALTH CARE

See the Common Measure Set on the Community Checkup, powered by the Washington Health Alliance, at www.wacomunitycheckup.org, to see how health care organizations rate on quality measures.

Compare patient experience at clinics and medical groups in the region at www.wacomunitycheckup.org/your-voice-matters.

Become a member of the Washington Health Alliance and join the conversation to transform health care delivery. Learn more at www.wahealthalliance.org.

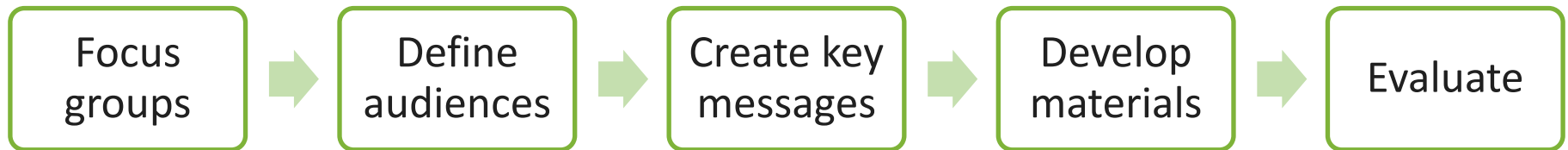
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Savvy Shopper infographic, Washington Health Alliance and HCA

Introducing the new plans in 2016

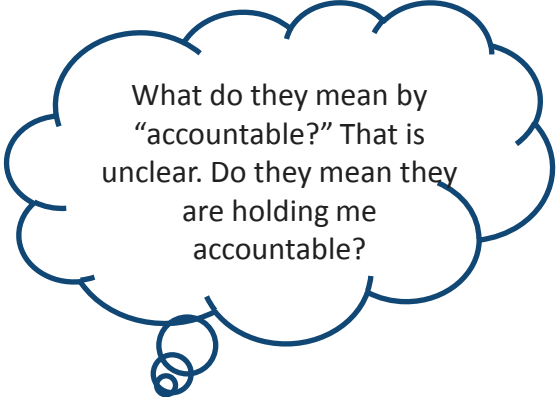
- HCA's Paying for Value strategy drove the development and adoption of two new health plans:
 - Group Health Sound Choice
 - UMP Plus (two networks)
 - Puget Sound High Value Network
 - University of Washington Medicine Accountable Care Network
- Opportunity to educate members on HCA's updated purchasing strategy
- Promote new value-based plan options

HCA's engagement strategy in 5 steps

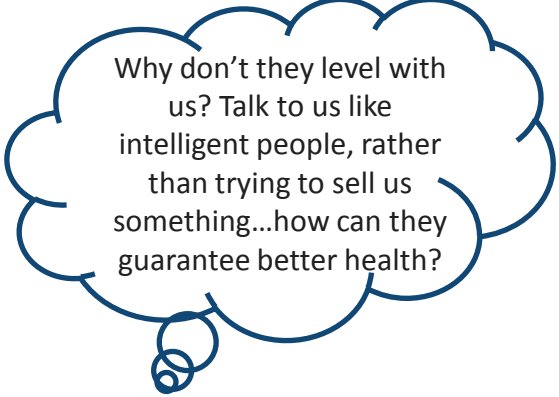


Step 1—Summer 2015 focus groups

- 5 groups of 8 participants each
- Testing names, messages, words/descriptors, taglines, descriptions of the new plan
- What we learned:
 - Member priorities included choice of physicians, providers; large networks; reasonable and predictable costs; seamless coordinated care with little redundant paperwork; availability of doctors and specialists.
 - Keep it simple. Avoid ill-defined terms like “innovative.”
 - Comparison tools are the most helpful: Costs, networks, services covered.
 - No one method of communication will work for everyone: Some prefer email, some like newsletters or website



What do they mean by “accountable?” That is unclear. Do they mean they are holding me accountable?



Why don't they level with us? Talk to us like intelligent people, rather than trying to sell us something...how can they guarantee better health?



Step 2—Define audiences (for UMP Plus)

- Create personas to target marketing:
 - Low users of health care services
 - Young families
 - Millennials (ages 21-34 years)
 - SmartHealth participants
 - Members with complex health needs

- Be clear about who is not ideal for UMP Plus:
 - Members who travel or work often outside of the network service area
 - Early retirees who live part of the year outside of the network service area (snowbirds)
 - Parents with enrolled children who live outside of the network service area (e.g., college students)
 - Members with loyalty to out-of-network providers



Young Families

High use of pediatric/primary care services

Health care realities:

- + Visit providers often—kids get sick, and pass illness to family
- + Frequent pediatric visits—some Emergency Department visits
- + Need 24/7 access to clinical advice
- + Fill out a lot of paperwork
- + Busy—want streamlined processes and coordinated care

Great benefits:

- + Costs go down—premiums, cost-sharing, medical deductible
- + No prescription-drug deductible
- + Office visits are free when you see a primary care provider in your plan's network
- + Good selection of providers
- + Increased quality, using research-based medicine and best practices
- + Centralized appointment line for network providers
- + 24/7 nurse advice line

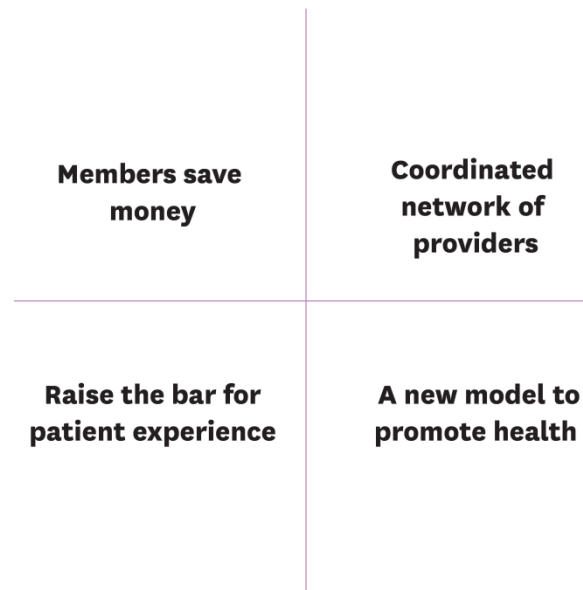
These members may especially like:

- + Primary care office visits are free in the plan's network
- + Choice of pediatric hospitals and providers
- + Extended hours for many primary care providers
- + 24/7 nurse advice line
- + Coordinated care among network providers

Example of persona

Step 3—Create key messages

- What do members need to know?



Branding themes—the “bites” in our bite, snack, meal, approach to messaging

Step 4 —Develop materials

- Develop UMP Plus specific materials
 - Web content
 - Kitchen table toolkit mailer
 - Content for PEBB newsletters and benefit fairs
- Develop health literacy materials that are about value-based care overall
 - Web content
 - Video
 - Value-based options handout

As you review your 2016 plan options, here are some things to ask about:

My providers

- Are the providers I want to see available?
- Will the primary care provider spend enough time with me during my visit? Am I able to ask all my questions and mention any concerns I have?
- Will my provider share information that helps us work in partnership to make decisions about my health care?

Coordinated care

- Will I receive care by providers who are supported by a system with the goal of keeping me healthy and getting me the care I need?
- If I am seeing more than one health provider or have complicated medical issues, how will they share information about my health, so that I'm not filling out duplicate forms or getting unnecessary care?

Nurse line, online resources

- Does the plan have access to a 24/7 nurse line or medical help line for after-hours support or to help me decide whether I need to see a provider?
- Am I able to easily find information online about my care and available options to support me making the decisions that work best for me?

Find out more of Our Your Health website, www.oph.wa.gov/myhealthapp

Shine a light on your medical plan options

Choose the best plan for you and your family

Choosing a health care plan is important. Many people think first about cost and which doctors and hospitals are in the network. There are other things to consider when choosing the plan that is right for you and your family.

Take a look >>>

Health literacy handout for benefit fairs



Changing the Way the PEBB Program Pays for Health Care in 2016 video

2015	2016 January 1 (3 or more people)	2016 November 1 (3 or more people)
Prescription drug deductible	\$100/person, \$300/family (Tier 2 and 3 drugs only)	\$0
Emergency room	\$75 copay + 15%	\$75 + 15%
Inpatient hospital services	\$200/day up to \$600 max/year per person + 15% professional fees	\$200/day up to \$600 max/year per person + 15% professional fees
Office visit—primary care	15%	\$0

Make your plan choice, open enrollment begins November 1

Choose your PEBB medical plan November 1-30 for coverage that begins January 1, 2016.

You can make plan changes on My Account at: www.hca.wa.gov/pebb

Is UMP Plus a good fit for you?

Low Users of Health Care Services
All ages, don't access care often

Health care realities:

- Don't become ill or get hurt often
- Generally healthy

These members may especially like:

- Extended hours for many primary care providers
- 24/7 nurse advice line
- No medical deductible for subscribers who qualify for a SmartHealth wellness incentive in 2016

SmartHealth Participants
All ages, highly engaged, prevention-focused

Health care realities:

- Likely to work at improving their health and wellness
- Comfortable using web portals to access information
- Receptive to change, early adopters for better health
- Take advantage of health improvement programs

These members may especially like:

- No medical deductible for subscribers who qualify for a SmartHealth wellness incentive in 2016
- Web tools and ability to view test results
- Partnering with their providers on health care decision-making

Young Families
High use of pediatric/primary care services

Health care realities:

- Visit providers often—lets get sick and pass illness to family
- Frequent pediatric visits, some emergency department visits and procedures
- Need 24/7 access to clinical advice
- Fit out a lot of paperwork
- Want streamlined processes and coordinated care

These members may especially like:

- Primary care office visits are free in the plan's network
- Choice of pediatric hospitals and providers
- Extended hours for many primary care providers
- 24/7 nurse advice line
- Coordinated care among network providers

Members with Complex Health Needs
All ages, chronic or intensive health care needs

Health care realities:

- Coordinate care among multiple providers
- Manage complex or chronic needs for self or family members
- May need more costly medications
- May need additional specialized services or medical equipment

These members may especially like:

- Comprehensive network of specialists to choose from
- Coordinated care among network providers—less burden on scheduling and communicating with providers
- Partnering with their providers on health care decision-making

Millennials
22-34 year olds

Health care realities:

- Tech-savvy and plugged in to digital tools
- Looking for quick and easy health care solutions
- Basic expectations of health plans
- More open to changing plans

These members may especially like:

- Lower premiums, cost-sharing and medical deductible
- Web tools and ability to view test results
- Extended hours for many primary care providers
- Partnering with their providers on health care decision-making

Not Ideal Members
People for whom UMP Plus may not be beneficial

Health care realities:

- Members who travel or work often outside of the network service area
- Early retirees who live part of the year outside of the network service area (snowbirds)
- Members with loyalty to out-of-network providers
- Parents with enrolled children who live outside of the network service area (e.g., students in college, or living at home in separate households)
- Members with loyalty to out-of-network providers

UMP Plus kitchen table toolkit mailer

Washington State Health Care Authority

Search Home About HCA Contact HCA

Home > About HCA > Programs & Initiatives > Making informed health care decisions

Programs & Initiatives

- Apple Health (Medicaid)
- Clinical collaboration and initiatives
- Health Information Technology
- Health Technology Assessment
- Healthier Washington
- Program Integrity
- Public Employees Benefits Board (PEBB) Program
- Making informed health care decisions**
- Tribal Affairs
- Uniform Medical Plan (UMP)
- Washington Health Information Industry Education Council
- Washington Prescription Drug Program (WPDP)

Making informed health care decisions

Making informed health care decisions

Take charge of your health care

Health care can be complicated. But as the consumer, you can be an active participant in your health. This page includes resources and tools to help you take a bigger role in your health.

Being a savvy health care shopper

As part of our Healthier Washington initiative, in partnership with the Washington Health Alliance, we've created a campaign called the **Savvy Health Care Shopper**. The campaign includes a video, a series of infographics, and a brochure for you to use to help you and your employees know how to get high-value health care. We encourage you to share these materials with your employees, members, and even your friends and family.

[Watch this video to get started on being a savvy shopper.](#)

Choosing Wisely

Some of the most common medical procedures may be overused. The Washington Health Alliance's **Choosing Wisely campaign** focuses on cervical cancer screening, antibiotics, cardiac and other imaging, and early elective births.

Web content

Step 5—Evaluate

- Online survey of PEBB Program members June 16-30 (those who chose an ACP and those who did not)
- Research goals:
 - Understand who chose and did not choose an ACP and their decision process
 - Test PEBB channels of communication to understand how best to reach them
- What we learned (834 completed surveys)
 - Provide information about benefits and costs in future messaging
 - Provide information about how HCA works to address provider network options
 - Use success stories to illustrate cost savings, benefits, enhanced services, coordinated care, and provider options
 - Continue provider outreach and education efforts

Refining our strategy moving forward

- Testimonials from PEBB Program members
- Video that clearly defines who UMP Plus works best for
- Creating purchaser toolkit:
 - Current research about paying for value
 - How HCA promoted its accountable care network to employees
 - How HCA shaped contract terms
 - Links to resources

Triple Aim

**The goal of accountable care is to achieve the
“Triple Aim”**

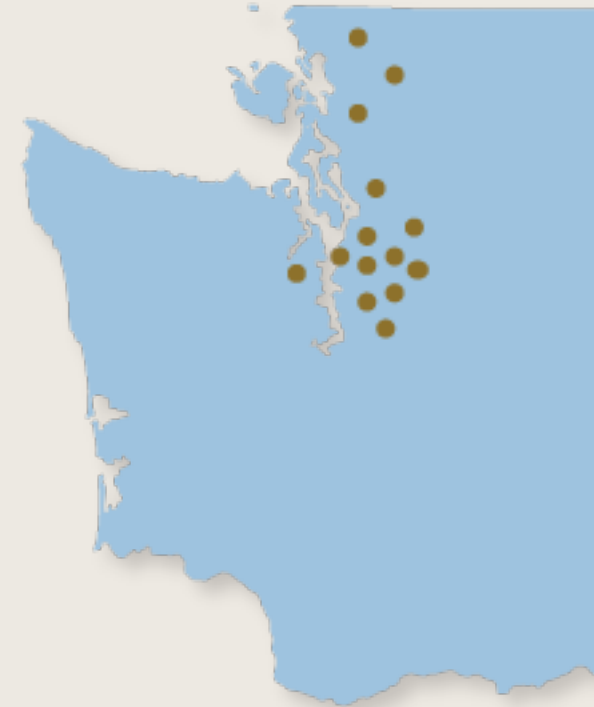
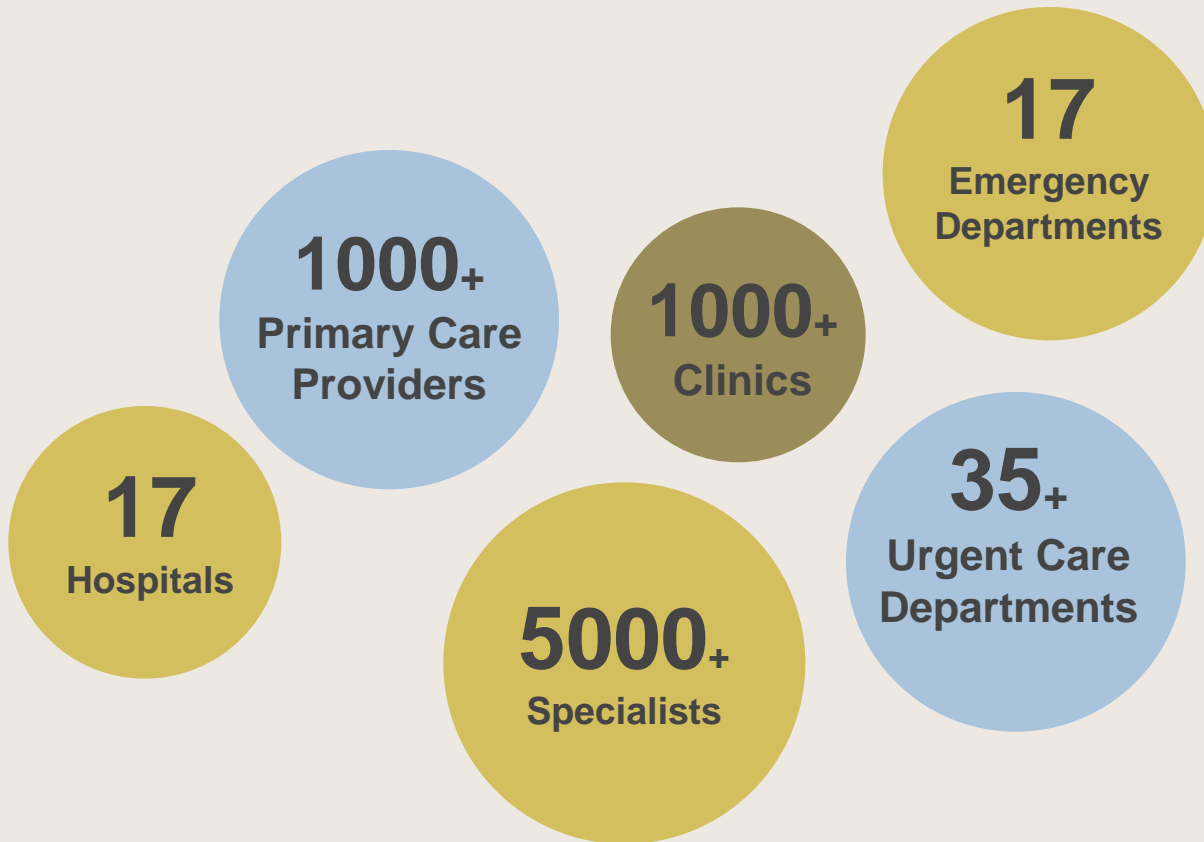
- ✓ Improve patient experience
- ✓ Achieve better population health
- ✓ Make health care more affordable

UMP Plus - UW Medicine Accountable Care Network

- ✓ UW Medicine became an Accountable Care Organization in January 2014
- ✓ First partnership was with Boeing
- ✓ Partnered with Health Care Authority in 2015 for the 2016 year
- ✓ The UW Medicine ACN uses a “medical home” model – patient care managed by a team of professionals working in close coordination.
- ✓ The UW Medicine ACN is the most comprehensive accountable care network in Washington

UMP Plus - UW Medicine Accountable Care Network

Spanning cities and neighborhoods across Puget Sound



UW Medicine ACN Network Members

UW Medicine Accountable Care Network



Fred Hutchinson Cancer Research Center
UW Medicine
Seattle Children's



UW Medicine

UW Medicine ACN Member Organizations

- ✓ **Capital Medical Center**
 - Capital Physician Services
- ✓ **Children's University Medical Group**
- ✓ **MultiCare ConnectedCare**
 - MultiCare Allenmore Hospital
 - MultiCare Auburn Medical Center
 - MultiCare Good Samaritan Hospital
 - MultiCare Mary Bridge Children's Hospital and clinics
 - MultiCare Tacoma General Hospital
 - MultiCare Clinics
 - Grays Harbor Medical Center
- ✓ **Overlake Medical Center**
- ✓ **Overlake Medical Clinics**
- ✓ **Seattle Cancer Care Alliance**
- ✓ **Seattle Children's Hospital**
- ✓ **Skagit Regional Health**
 - Skagit Valley Hospital
 - Skagit Regional Clinics
 - Cascade Valley Hospital and Clinics
- ✓ **UW Medicine**
 - Harborview Medical Center and clinics
 - Northwest Hospital & Medical Center and clinics
 - UW Medical Center and clinics
 - UW Neighborhood Clinics
 - UW Physicians
 - Valley Medical Center and clinics
 - Airlift Northwest
- ✓ **Independent Provider Groups**

UMP Plus - UW Medicine Accountable Care Network Outreach

- ✓ Open Enrollment fairs
- ✓ Presentations at Open Enrollment fairs
- ✓ Webinars
- ✓ Easy to access web portal with information on providers, hospital clinics and more.
- ✓ Letters to attributed and designated patients pre-enrollment fairs

UMP Plus - UW Medicine Accountable Care Network Insights

- ✓ Saving money is most important
- ✓ Is provider in network?
- ✓ No cost Virtual Clinic
- ✓ Centralized contact center
- ✓ Shared decision making is not important
- ✓ No one knows what accountable care means

How we will measure success

PATIENT EXPERIENCE

- ✓ Appointment access
- ✓ Telephone access
- ✓ Hours of care and after-hours care locations
- ✓ Patient satisfaction
 - Timely care
 - Provider Communication
 - Office staff attitude
 - Overall provider rating

HEALTH IMPROVEMENT

- ✓ Diabetes
- ✓ Blood pressure
- ✓ Cholesterol treatment
- ✓ Cancer Screenings (cervical, colon)
- ✓ Obesity screening and weight management
- ✓ Mental health
- ✓ Caesarean section rates
- ✓ Intensive outpatient care program

Group Health

VBD Strategies Webinar: HCA's Care Transformation Strategies

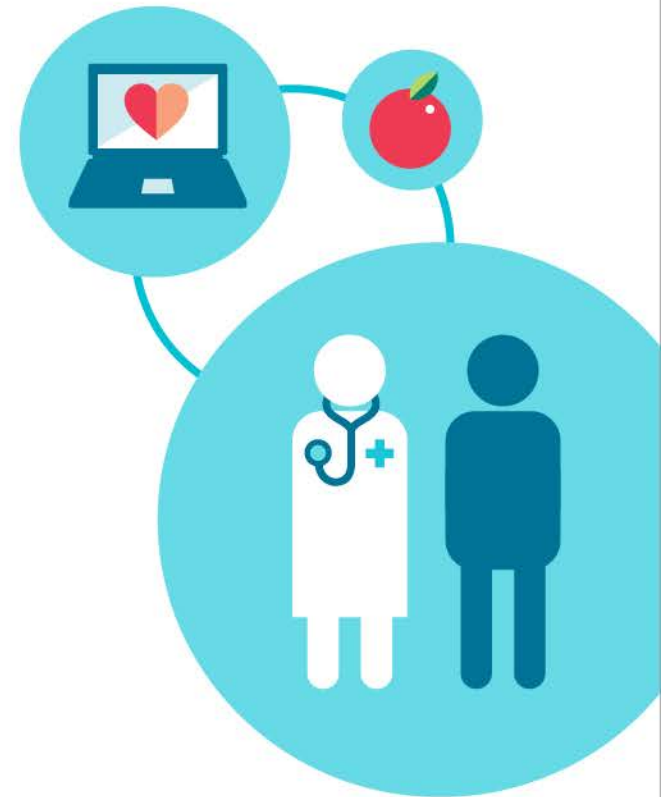
Sarah Levy, MD

Medical Director, Continuum of Care

LuAnn Wolfe

Director of Marketing for Member Engagement

9/14/16





A History of Integrated Care

From the very beginning, Group Health has envisioned a better way to go about health care

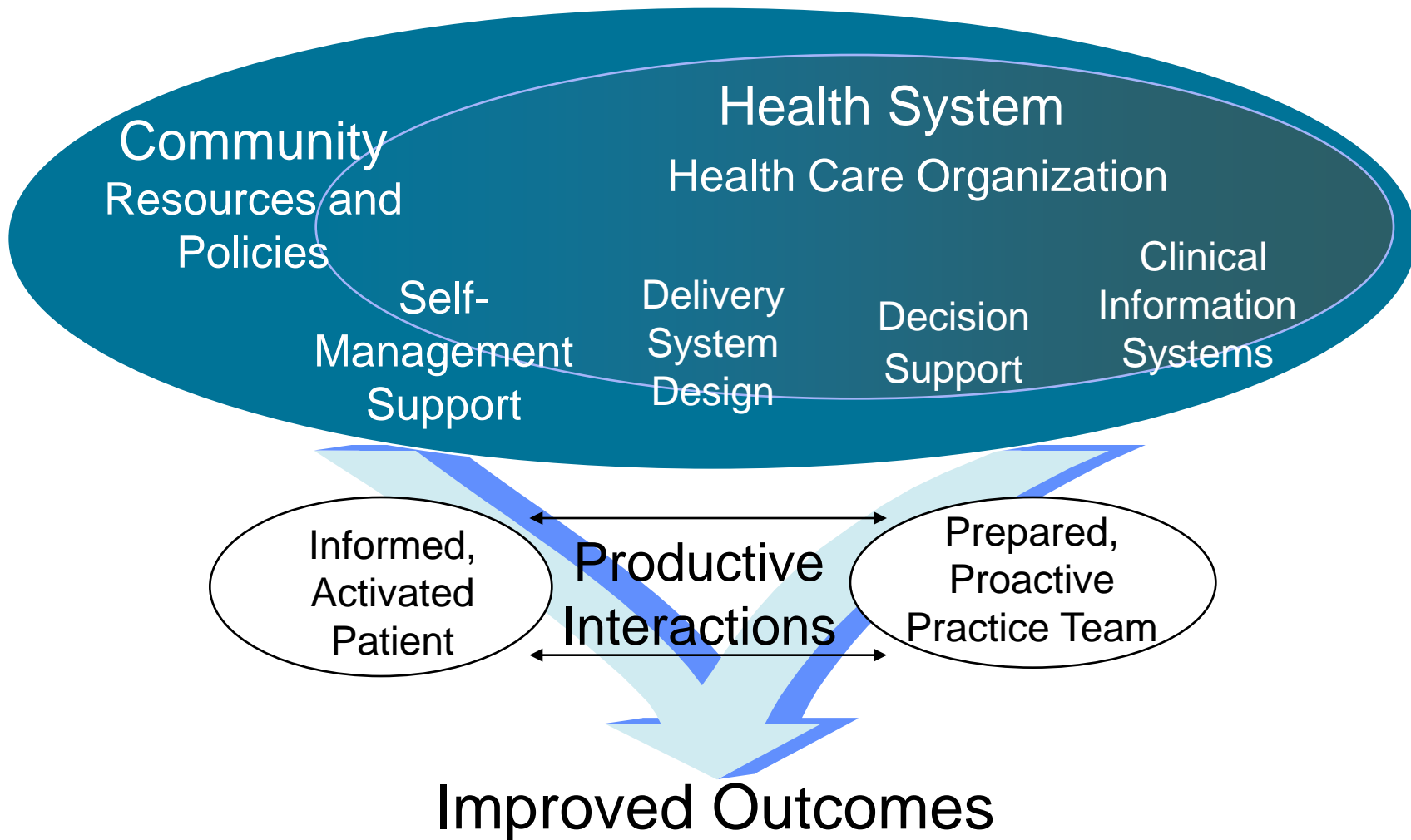
For 70 years, Group Health has consistently developed innovative ways to improve health in our communities. Cost and coverage working together to bring down the total cost of care over time.

- Network designed to steer people to quality providers and cost-effective care
- Integrated care to expedite treatment and eliminate redundant tests
- Chronic disease care management to reduce hospital stays
- Preventive medicine to keep people from getting sick in the first place





The Chronic Care Model



Wagner EH, Austin BT, Von Korff M. Improving outcomes in chronic illness. *Managed care quarterly*. 1996;4(2):12-25.



Longitudinal, Population Based Care Today

Still evidence based, comprehensive

Now available through more channels than ever before

- In-reach: offer all needed care at every touch
 - Outreach: birthday letters, targeted phone calls and secure messages
 - Technology supports longitudinal care, focused on outcomes
-
- a) HIV patient care is coordinated between a team of trained providers and a specialty medication pharmacy group that together ensure a nationally recognized adherence rate
 - b) Primary care nurses use a chronic disease tracker to follow diabetic patients over time coaching them to targets set in the physician care plan
 - c) MyGroupHealth web portal reminds patients about care gaps, regardless of the need for which they logged in



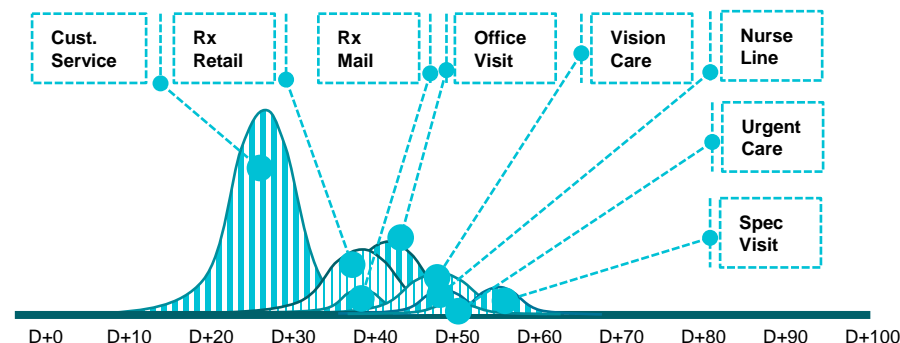
New Member Onboarding

Messages support the member where they are in their health journey

- Integrated multi-step onboarding across first 100 days
- Messages that support initial needs are given highest priority
- Rapidly identify and support those with immediate and ongoing care needs

New Member Journey

Average days to first use & percentage using various care channels during first 100 days of enrollment



Pre-effective messaging = expectation setting

- Did you receive my enrollment?
- What will come when?
- When will my ID card arrive?
- When does my plan begin?
- What's next?

Plan Start

Post-effective messaging = effective plan use

- What can I do now?
- Where is my doctor?
- Where do I go to get care?
- How do I transfer prescriptions?
- Where can I find more information?

Welcome Messaging

Online Content

How to Videos

Outreach Calls

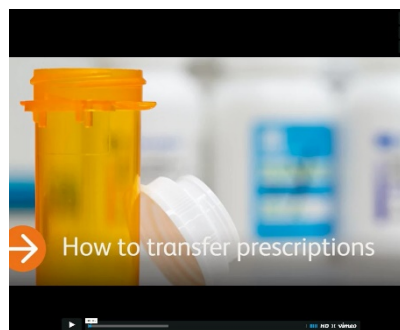
Ongoing Engagements

Trigger Based Engagements



Health Education & Plan Use

Group Health members receive touchpoints throughout the year to support health education and plan use. The multi-channel communication uses graphics and storytelling to engage members. Video and infographics are used for more complex topics



Hello, HEALTH

Who said health care had to be hard? When your care, your coverage, your doctors, and your care teams are all connected, amazingly healthy things can happen. See what's possible when you experience health care the Group Health way.

One-stop convenience
Group Health Medical Centers have doctors' offices, lab, X-ray, and pharmacy, usually all under one roof. So you don't have to go all over town.

Coordinated care teams
At Group Health Medical Centers, doctors, nurses, pharmacists, and everyone on your health care team has instant access to your health information. When everyone is working together, you get the care you need more smoothly.

Care anytime, anywhere
Email your doctor, call our consulting nurse, look up test results with our mobile app, or order medications to be delivered to your home. With Group Health, you can get what you need in ways that work best for you.

Your health first
At Group Health, our doctors are salaried—not paid by how many patients they see or for procedures or tests. They can give you the time you need, and are here for one reason to help you be your healthiest.

Learn more about Group Health at ghc.org

GroupHealth **nwhealth** WELLNESS FOOD & FITNESS FAMILIES HEALTHY AGING FOOD

Exercise Ball Ab Workout Tips
August 29th, 2016 | FOOD & FITNESS

Resistance Band Workout Tips
August 22nd, 2016 | FOOD & FITNESS

Top Weekend Warrior Injuries & How to Prevent Them
August 16th, 2016 | FOOD & FITNESS

Bike Safety for Kids
August 8th, 2016 | FAMILIES, FOOD & FITNESS

Walk-in care for everyone, every day

Popular Recent

Sore Throat? Cold vs Allergies
April 28th, 2016

Whips
Happier—People in Their 40s or 50s?
April 18th, 2016

Summer Sleep Tips for Parents in Need of Shut-eye
July 21st, 2016

Digital Content

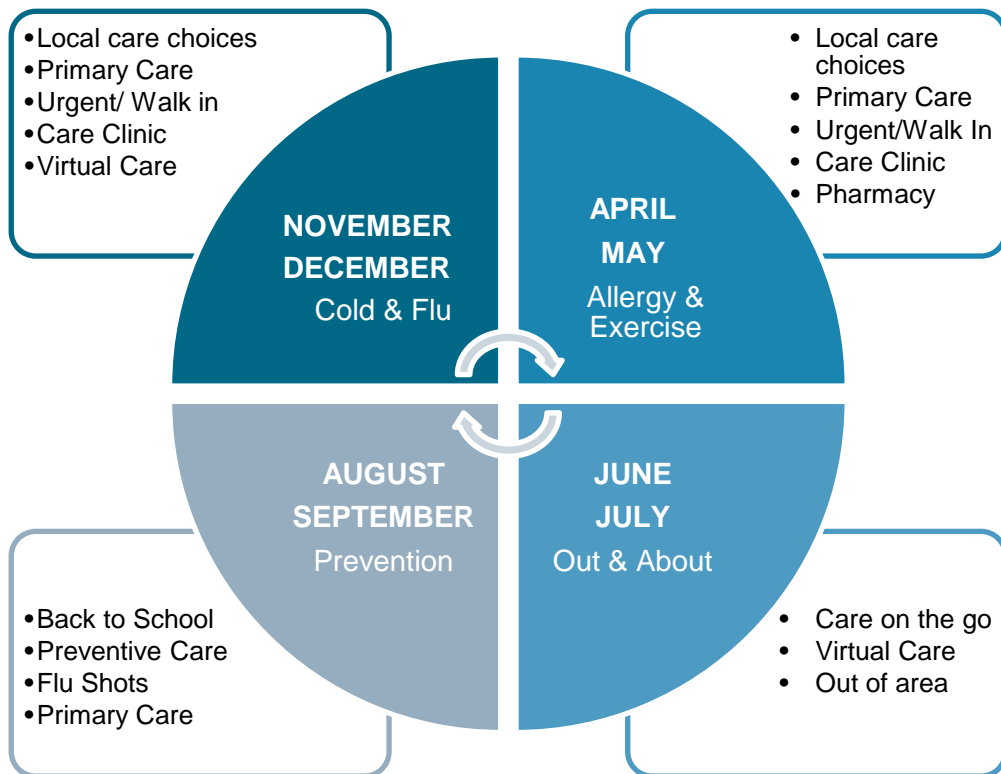
- 7 Tips to Knock Down Your Fitness Barriers
- Sore Throat? Cold vs Allergies
- Tips for Coping with Winter Blues in NW
- Shoulder Pain? Try a Resistance Band Workout
- 7 Things You Should Know about Colds and the Flu
- Losing Weight Successfully
- 5 Easy Ways to Jump-Start Your At-Home Fitness Routine
- Weekend Warrior Injuries and How to Prevent Them



Seasonal Care Options

Drive to appropriate care options during high-use seasons

- Geo-targeted mailers and emails featuring closest care locations
- Social media seasonal health tips driving to care options
- Digital advertising based on geographic location



Questions?