

# OnPoint

A HEALTH AND WELL-BEING PERSPECTIVE

LAUNCHED IN 2007 BY THE INSTITUTE FOR HEALTHCARE IMPROVEMENT (IHI), THE TRIPLE AIM IS A FRAMEWORK FOR OPTIMIZING HEALTH SYSTEM PERFORMANCE BY SIMULTANEOUSLY PURSUING THESE THREE DIMENSIONS:

-  Improve the patient experience of care (including quality and satisfaction)
-  Improve the health of populations
-  Reduce the per capita cost of healthcare

## Care. Health. Cost.

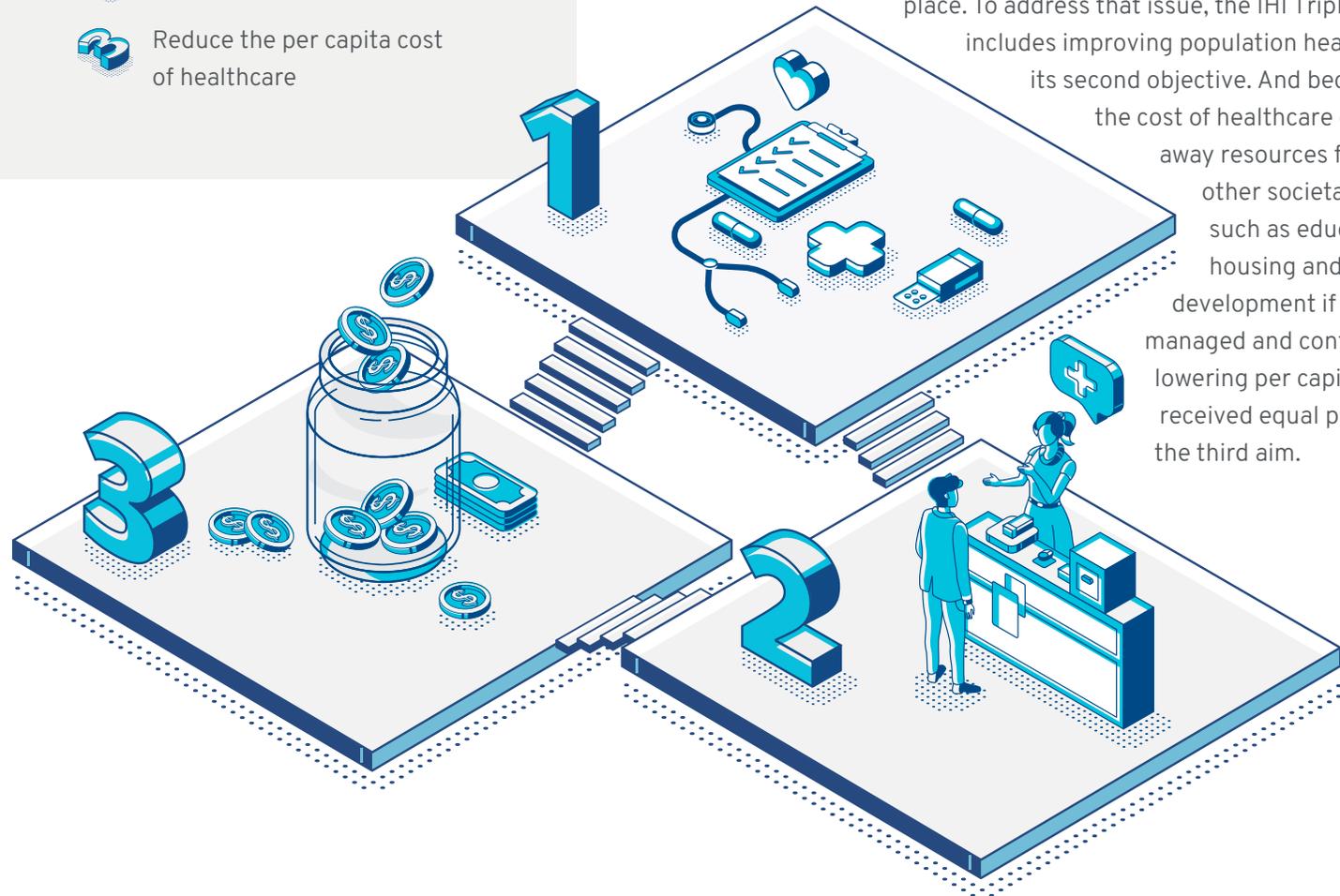
### How Health Plans Can Help Healthcare Achieve the Triple Aim

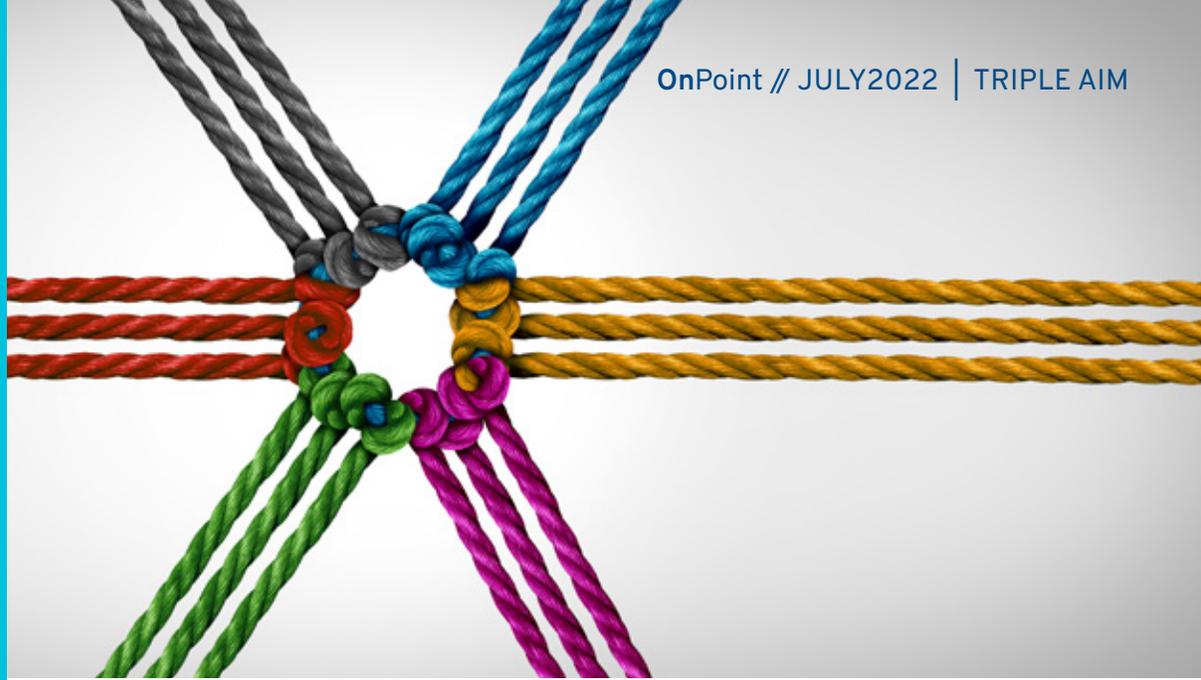
Before the Triple Aim was developed, the goal of healthcare had been defined to a great extent by a report developed by the Institute of Medicine entitled “Crossing the Quality Chasm.” That report outlined six domains of quality or aims of improvement for healthcare: safety, effectiveness, timeliness, efficiency, patient-centeredness, and equity. But those objectives, while worthy, only applied to the delivery of healthcare, not to the multiple reasons

that cause someone to need medical care in the first place. To address that issue, the IHI Triple Aim

includes improving population health as its second objective. And because

the cost of healthcare can take away resources from other societal needs, such as education, housing and economic development if not managed and controlled, lowering per capita costs received equal priority as the third aim.





## The Role of Health Plans

Given the highly complex and inter-related structure of the healthcare system, working to achieve the Triple Aim requires an integrated effort that involves all relevant parties, from hospitals and providers to the public health sector. That collaboration must also include health plans, who have a vested interest in aligning their services to help achieve, all three of the Triple Aims—especially as provider payments are increasingly linked to the value and effectiveness of the services that health plans cover. Simply put, the goals of value-based care align precisely with the objectives of the Triple Aim.

LET'S EXAMINE THE IMPACT HEALTH PLANS CAN HAVE IN ACHIEVING EACH OF THE THREE TRIPLE AIMS.

Each OnPoint issue provides a concise, insightful summary about a key health and well-being issue facing health plans and employers today.



### Improve the Experience of Care

Healthcare is already a confusing experience for consumers, who must navigate their way through a maze of medical specialists, provider networks, cost options and coverage questions as they seek to find help for, in many cases, multiple health issues. It's no wonder, then, that more than 2/3 of consumers say that every step of the healthcare process is a chore.<sup>1</sup> That confusion is only increasing as more and more specialized medical services and technologies become available to consumers through their health

plans. Having access to more services, choices and information may be a positive in terms of making care more effective and available, but it can often overwhelm consumers, causing them to not act at all. In fact, half of consumers today say that have avoided seeking care altogether because so much work is involved in navigating the healthcare system.<sup>2</sup>

What consumers need is not more information but clarity, not more choices but guidance. The right health and well-being platform can simplify the healthcare experience by providing an individualized and relevant wellness journey that is



streamlined into a series of simple actions. Instead of facing an overwhelming multitude of choices, the health plan member now has a step-by-step guide that includes information and motivational triggers, individualized for the member and customized for specific populations, that are more effective at generating engagement.

**Such a platform would:**

- // Provide timely information to help members understand how, where and when preventive screenings should take place as well as what to expect.
- // Direct members to high-quality, high-value healthcare solutions.

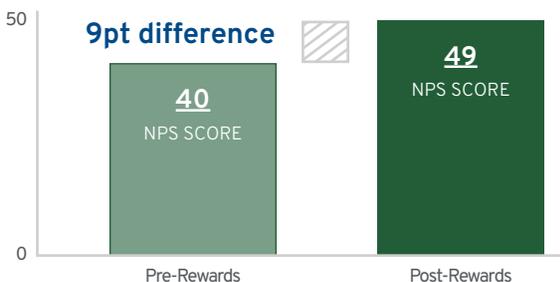
In addition, a health and well-being platform that is white labeled and uses the branding of the health plan provides a one-source, seamless experience that is less confusing for consumers and positions the plan as an active and helpful resource that cares about its members.

**REAL-WORLD RESULTS**

Providing a first-rate consumer experience sometimes requires adapting quickly to changing circumstances. During the COVID-19 pandemic, many members of a major statewide health plan faced the real possibility of being unable to pay their health plan premiums or being forced to drop their health insurance altogether as a result of the economic decline. To address this challenge head-on, Onlife launched a rewards program in just 10 days for the plan. In addition to saving more than 100,000 member months and more than \$50 million in premiums from delinquency, the program boosted the plan’s Net Promoter Score (NPS), considered by many to be the gold standard for measuring customer loyalty and satisfaction, for these two important member groups.

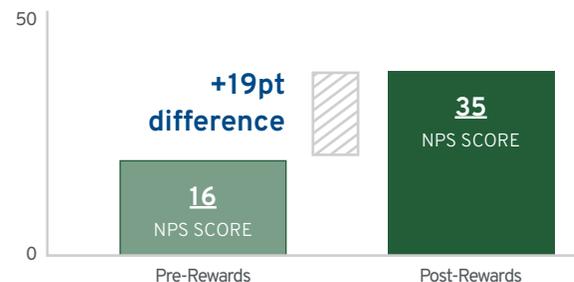
**IU65 Overall (ACA and pre-ACA)**

January - August 2020



**Fully Insured Group**

January - August 2020



In addition, the number of members who registered in the rewards program more than tripled during the first nine months of 2020 compared to the same time period the year before.



## Improve the Health of Populations

Population health identifies and addresses health issues specific to certain communities, demographics and medical cohorts in order to prevent illness before it happens and mitigate its effects. Examples include reducing the prevalence of heart disease or adult-onset diabetes among certain segments of the population. Identifying, analyzing and finding solutions to these issues involves bringing together representatives from many different areas, including healthcare, industry, nonprofit organizations, academia and local government.

### A thoughtfully designed health and well-being platform can:

- // Provide educational materials, motivation, rewards, reminders, and other interventions to encourage members to participate in scheduled screenings, close gaps in care, or take other necessary actions.
- // Use data analytics and sophisticated models to segment populations by risk factors, likely behaviors, and other characteristics to create targeted messaging.
- // Understand the Social Determinants of Health, which can impact up to 80 percent of health outcomes, found in specific neighborhoods and regions, and then connect members with the local resources available to address these issues.
- // Identify the people and populations that are more motivated to change and adopt a healthier lifestyle.

### REAL-WORLD RESULTS

The Onlife platform has a proven track record in closing gaps in care. Here are three examples.

- // For members who digitally opted in to an Onlife program for one health plan, 81 percent closed at least one gap in care compared to only 49 percent for members who opted out.
- // For Annual Wellness Exams, 76 percent of those who digitally opted in completed an Annual Wellness Exam compared to only 49 percent of those who opted out.
- // For Breast Cancer Screening, the closing percentage was 50 percent (opted in) compared to 19 percent (opted out).



## Reduce Per Capita Costs and Utilization Rates

Six in 10 American adults have a chronic disease and four in 10 have two or more.<sup>3</sup> A health and well-being platform can motivate people to participate in preventive care that reduces the likelihood of developing a chronic condition as well as take part in screenings that can detect diseases at an earlier stage when treatment is more effective. The potential costs savings are enormous.

- // Chronic diseases that are avoidable through preventive care services account for 75 percent of the nation's healthcare spending and lower economic output in the US by \$260 billion dollars a year.<sup>4</sup>
- // Treatment costs for cancer patients diagnosed early in the course of the disease are two to four times less than those diagnosed at later stages.<sup>5</sup>
- // Annual medical costs for people with high blood pressure are up to \$2,500 higher than costs for people without high blood pressure.<sup>6</sup>

### REAL-WORLD RESULTS

The savings generated by Onlife's health and well-being platform can be significant, especially when members are highly invested in the program. For example, a large health trust in the Northeast realized savings of \$7.89 per month for each member who had a low level of participation. But when members engaged at a high level that included coaching, participation in digital self-guided programs and device utilization, the per member per month savings increased to \$24.87.

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**Onlife Health**, a GuideWell company, brings end-to-end simplicity to population health and well-being. Connecting and integrating people, technology, and benefit design through our user-friendly engagement platform, we guide consumers on “the next right thing to do” in their healthcare journey. With its built-in agility, the Onlife platform can be configured and scaled quickly and easily to serve any market, from commercial health insurance to Medicare Advantage and Individual (ACA) lines of business.

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1 Change Healthcare - Harris Poll Research: Half of consumers avoid seeking care because it's too hard. Business Wire. (2020, July 13). Retrieved May 17, 2022, from <https://www.businesswire.com/news/home/20200713005099/en/Change-Healthcare---Harris-Poll-Research-Half-of-Consumers-Avoid-Seeking-Care-Because-It%E2%80%99s-Too-Hard>

2 Ibid.

3 Centers for Disease Control and Prevention. (2022, May 6). About chronic diseases. Centers for Disease Control and Prevention. Retrieved May 17, 2022, from <https://www.cdc.gov/chronicdisease/about/index.htm>

4 HealthPayerIntelligence. (2017, August 29). How preventive healthcare services reduce spending for payers. HealthPayerIntelligence. Retrieved May 17, 2022, from <https://healthpayerintelligence.com/news/how-preventive-healthcare-services-reduce-spending-for-payers>

5 Joel V. Brill, M. D. (n.d.). Screening for cancer: The economic, medical, and psychosocial issues. AJMC. Retrieved May 17, 2022, from <https://www.ajmc.com/view/screening-for-cancer-the-economic-medical-and-psychosocial-issues>

6 Centers for Disease Control and Prevention. (2021, May 10). Cost-effectiveness of high blood pressure interventions. Centers for Disease Control and Prevention. Retrieved May 17, 2022, from <https://www.cdc.gov/chronicdisease/programs-impact/pop/high-blood-pressure.htm>

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