



OCT2022

OnPoint

A HEALTH AND WELL-BEING PERSPECTIVE

FORGING THE FUTURE

5 Opportunities for Health Plans

- 1 Embrace Consumerization
- 2 Invest in Robust Data Analytics
- 3 Leverage Artificial Intelligence
- 4 Operationalize Social Determinants of Health
- 5 Expand Telehealth and Home Health Coverage

“The future depends on what you do today.” – Mahatma Gandhi

Planning for the future is a daunting task for any business, especially in the field of healthcare. Industry transformation is fast and ongoing. For health plans, the challenges are many.

HERE ARE JUST A FEW:

- // A growing consumer mentality is increasingly taking hold in healthcare, strongly influencing member expectations and their healthcare decisions.
- // The COVID pandemic has ignited a new demand for telehealth services.
- // Big data analytics and artificial intelligence are raising new concerns about protecting members’ privacy.

But with these and many other challenges come new opportunities. This edition of OnPoint outlines five of these opportunities, as well as practical actions to consider for each, to help your health plan start planning for the future—today.



OPPORTUNITY #1:

Embrace Consumerization

For health plans, consumerization is the ongoing market demand that their services become more member-focused. The challenge is real and pressing. Consumers today expect their health plans to deliver the highly personalized experience delivered by digital retailers such as Amazon. In addition, the slow but inexorable shift toward value-based care is transferring more purchasing power and decision-making authority into the hands of consumers. That shift requires that health plans supply their members with the information and resources they need to make more informed and healthier decisions.

TAKING ACTION

- // Make information about your provider network more convenient, robust and accessible for members. (70 percent of members want their health plan to assist with choosing a provider.)¹
- // Provide more accurate and detailed information about pricing. (83 percent of members want their health plan to provide accurate information about out-of-pocket expenses, and 91 percent say comparing prices for healthcare services should be as simple as comparing prices on their favorite retail site.)²
- // Add omnichannel support and communication, including messaging, chat and email, so members can control how and when they interact with your health plan.

OPPORTUNITY #2:

Transform Raw Data into Member Intelligence

Data is the foundation of building a more personalized experience for consumers. “Know your customer” is the necessary first step to create personal and meaningful communications that meet consumer expectations. Fortunately, health plans are well positioned to create this new level of personalization by possessing an abundance of member data obtained from multiple sources: health assessments, biometric screenings, social determinants of health, medical records, claims, member-generated data, pharmacy records, etc.

But possessing volumes of data is not the same as knowing your members. About 75 percent of U.S. consumers want their healthcare experiences to be more personalized.³ Gaining a deep understanding of each member’s unique needs

in order to provide that level of personalization requires an ongoing commitment to and investment in data analytics and behavioral research.

TAKING ACTION

- // Replace segmented information silos—claims, consumer management etc.—with a unified platform that can analyze all to identify trends and gaps in care in a systematic and timely manner.
- // Leverage and invest in data analytics and methods, such as risk stratification and personas, that can create an integrated and fully informed member profile.
- // Incorporate data from third-party sources, including information about demographics, Social Determinants of Health, social media consumer interactions, and purchasing habits to further refine and clarify the member profile.

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

PRIVACY CHALLENGES

HIPPA and many other laws were not designed for the security risks associated with AI. Given the enormous amount of data that AI can process, ongoing review of internal safeguards and industry regulations is critical. In addition, make sure that business vendors, especially in AI, have the procedures and protocols in place to provide rigorous data protection before implementing their technologies into your infrastructure.

OPPORTUNITY #3

Leverage Artificial Intelligence

Artificial Intelligence (AI) is any computing technology that is capable of human-like functions, such as learning, reasoning, planning and problem-solving. For health plans, AI offers an opportunity to streamline processes, improve fraud detection, and deliver a better customer experience. According to Certifi, an insurance premium billing and payments platform, here are four examples of how health plans can leverage AI.

TAKING ACTION

- // **Claims Processing Automation:** One in 10 claims is incorrect, but up to 70 percent of claims are flagged and must be reviewed. AI can reduce these inefficiencies by identifying and correcting errors.
- // **Prior Authorization:** Leverage AI to help determine which procedures require authorization and what information is needed to complete the authorization.
- // **Fraud and Abuse Prevention:** Preventing fraud and abuse requires intensive labor and time. Even with AI, these human resources will be needed. But AI does have an extraordinary capability to review enormous amounts of data and identify fraud and abuse much faster than human review.
- // **Early Intervention:** AI can transform healthcare from practicing reactive medicine, where sickness precedes care, to a more proactive approach in which data is analyzed to predict disease as well as provide more personalized early interventions.

In addition, researchers are exploring the use of AI to match patients with providers who have a high success rate in treating a particular medical condition. Development of this “matchmaking technology” is still in its early stages, but initial findings are promising. One study found that 60 percent of providers have a success rate in the upper 10 percent for at least one medical condition.



OPPORTUNITY #4

Operationalize Social Determinants of Health

Social Determinants of Health (SDoH), the socio-economic conditions and physical environment of the communities where people live, learn, work and play, drive as much as 80 percent of health outcomes. Health plans can significantly improve population health by reaching out beyond the walls of the hospital and doctor's office and addressing SDoH factors in the homes, schools, workplaces and neighborhoods of members.

TAKING ACTION

- // Include SDoH questions on any health assessment to better understand each member's non-clinical needs, social support system and physical environment.

- // Partner with community-based social-service delivery organizations that deliver healthy meals, for example, or free rides to medical appointments.
- // Leverage additional resources, such as Onlife's SDoH Community-Based Index, the first and only mapping tool that identifies and analyzes SDoH vulnerabilities for each of the more than 84,000 census tracts in the United States.

OPPORTUNITY #5

Telehealth and Home Health

Today, almost two-thirds (62 percent) of consumers say they are willing to use telehealth, offering a new opportunity to reinvent how healthcare is delivered.⁴ Regulatory changes that enable greater access and reimbursement for telehealth services are also being made to improve access, outcomes and affordability. Likewise, home health is one of the fastest-growing healthcare sectors. Up to \$265 billion worth of care services for Medicare fee-for-service and Medicare Advantage beneficiaries could shift to the home by 2025.⁵

TAKING ACTION

- // Expand coverage for telehealth and home health visits and make them more accessible and convenient for your members.
- // Consider offering a 'virtual-first' plan in which members first meet a physician online before making a visit in-person.
- // Carefully study the health benefits and economic sustainability of shifting certain care services from a hospital, specialty clinic or doctor's office to home care.
- // Redesign benefits and reimbursement policies to support home care.
- // Consider partnering with companies that specialize in home care as well community organizations that provide services in the home.

Onlife Health 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.

1 2021 annual consumer sentiment benchmark study. (n.d.). Retrieved September 19, 2022, from https://go.healthsparq.com/hubfs/White%20Papers/2021_HealthSparq_Consumer_Benchmark_Report.pdf

2 Ibid.

3 Ibid.

4 PricewaterhouseCoopers. (n.d.). Consumer health behavior and the COVID-19 pandemic. PwC. Retrieved September 18, 2022, from <https://www.pwc.com/us/en/industries/health-industries/library/hri-insight-consumer-health-behavior-and-covid-19-pandemic.html>

5 Bestsenny, O., Chmielewski, M., Koffel, A., & Shah, A. (2022, August 1). From facility to Home: How Healthcare could shift by 2025. McKinsey & Company. Retrieved September 18, 2022, from <https://www.mckinsey.com/industries/healthcare-systems-and-services/our-insights/from-facility-to-home-how-healthcare-could-shift-by-2025>