BECKER'S **PAYER ISSUES**

How consumer engagement strategies can improve care management and member retention

In collaboration with Medecision

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The healthcare sector often struggles with consumer engagement.

Research suggests that as much as 90 percent of the value available to payers is left on the table due to ineffective member engagement. More work needs to be done to drive better outcomes and improve the bottom line.

At a session sponsored by Medecision at the Payer Issues Roundtable hosted by *Becker's Payer Review*, senior healthcare leaders discussed their member and patient engagement challenges with two experts:

- Jacob Jesson, EVP, Chief Revenue & Experience Officer, Medecision
- Ken Young, CEO, Medecision

Five key takeaways were:

1. Do healthcare buying and consumption patterns affect consumer engagement?

"Consumers typically make purchasing decisions about their health plans once a year, and it's often plagued with confusing language which leads to a lack of understanding of benefits and insurance terms to properly utilize the benefits," Mr. Young said. In addition, the person receiving healthcare services is completely different from the party purchasing the services. "On the provider side, it's been a fairly recent development to acknowledge that employers are purchasers of healthcare services. That influences decisions made about consumerism and who we market to," one participant said. For many members, their health benefits are a black box. "How can we work with consumer groups and other organizations to promote education? Consumers become more engaged when they understand things," one participant said.

2. Misaligned industry incentives and poor data sharing also lead to a disjointed healthcare consumer experience.

After patients are discharged from the hospital, three or four organizations typically reach out to them. "They are all incentivized to focus on transitions of care, and they want their fair share of the compensation, so they all reach out in duplicative ways," Mr. Young said. "No matter what technology you put in place, you won't have a seamless consumer experience because the incentives aren't designed properly." Another problem is that the myriad point solutions don't share data with different stakeholders. "This compounds the problem of multiple parties wanting to go after financial incentives. If you can get parties to agree jointly, you will be able to deliver a better consumer experience," one participant said.



3. Member engagement strategies must be customized to the needs of different consumer segments.

One size doesn't fit all — engagement must be tailored to address members by different lines of business, demographic groups, disease states and more. One participant's organization has developed software tools to identify members' social determinants of health. "This gives us a better idea of how to conduct outreach," she said. Digital interactions may not be ideal for every segment, however. Many Medicare members, for example, rely on advocates, adult children or family members to interact with technology platforms for them. "In the Medicaid population, people often don't have access to Wi-Fi, tablets or a phone. If you rely on digital engagement, you end up missing a large swath of the population which includes some of the sickest people," another participant explained.

4. Effective engagement drives members to the right care at the right time.

Sometimes when payers implement member engagement strategies, they see increased utilization that fails to improve health outcomes. To ensure that engagement leads to the next best action for members, one payer is focusing on closing specific care gaps. "Rather than sending a generic text message saying that the doctor wants to see you, we send members a secure email explaining that their doctor wants to see them to manage a specific condition. This benefits the member's clinical outcomes and it benefits physicians by increasing their quality scores. We are working with the provider groups on the narrative used in the emails, because that differs by patient population," the participant said.

5. Data is critical for member engagement, but many obstacles must be overcome.

For a West Coast health plan, its technology stack and data infrastructure are the most problematic aspects of the member experience. "The data we serve to members and providers increasingly defines their experience, but it's complex and very disjointed," the participant said. Disparate data sets add to the fragmentation. "Healthcare interactions occur in different places, and each has its own systems that aren't interconnected. Integration costs are so astronomical that most healthcare organizations can't deal with it," another participant added. Despite the challenges associated with data, sometimes the quest for perfection can become the enemy of "good enough." As one session participant said, "There's no perfect data. It just needs to be actionable, so members understand their care path. The amount of time we spend on perfect data means that we lose time helping people make actionable decisions."

Effective member engagement strategies target the right segment with the right information at the right time for the right disease state. Focusing solely on technology or solely on data isn't the answer. A multi-faceted approach to data, technology and process is essential.

"Data integration isn't the hard part," Mr. Young said. "The hard part is identifying the outcomes and benefits you want to drive." A session participant agreed. "Sometimes we assume that technology alone will drive outcomes, but if it's not focused on the right call to action, it will drive garbage. What we really want to do is bend the cost curve and manage our populations." Another participated stated, "It's part art and part science to get this right."