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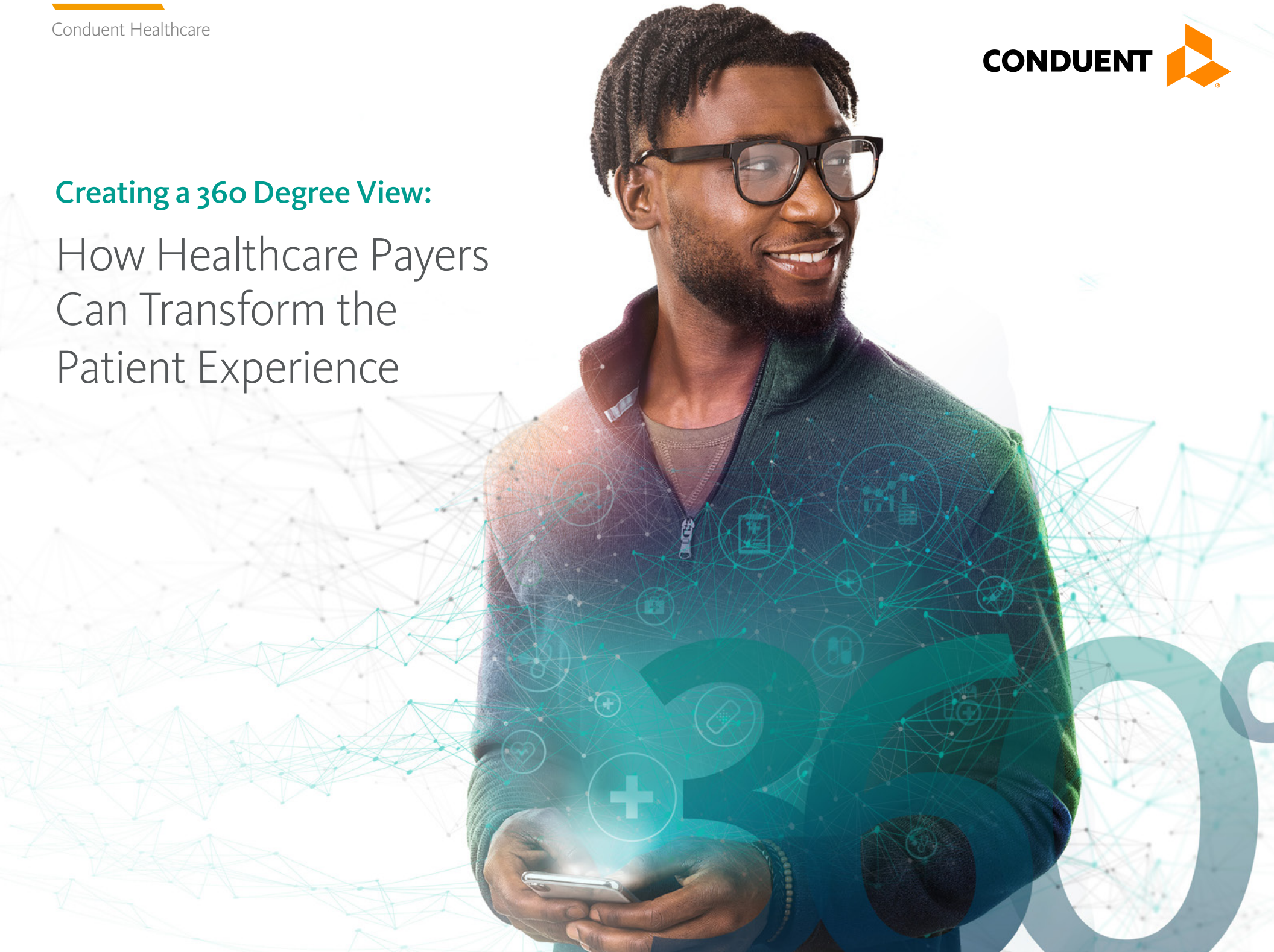
## Creating a 360 Degree View:

# How Healthcare Payers Can Transform the Patient Experience



# Introduction

Today's payer ecosystems are ripe with the promise of **transforming** the **healthcare landscape** — empowering members with a **360 degree view** that puts the patient squarely in the driver's seat.

It's no secret that **healthcare delivery models** are changing. While numerous studies have shown a significant link between patient engagement and clinical outcomes, there is no instruction manual for connecting the myriad building blocks that comprise what we call "healthcare" and churning out positive results.

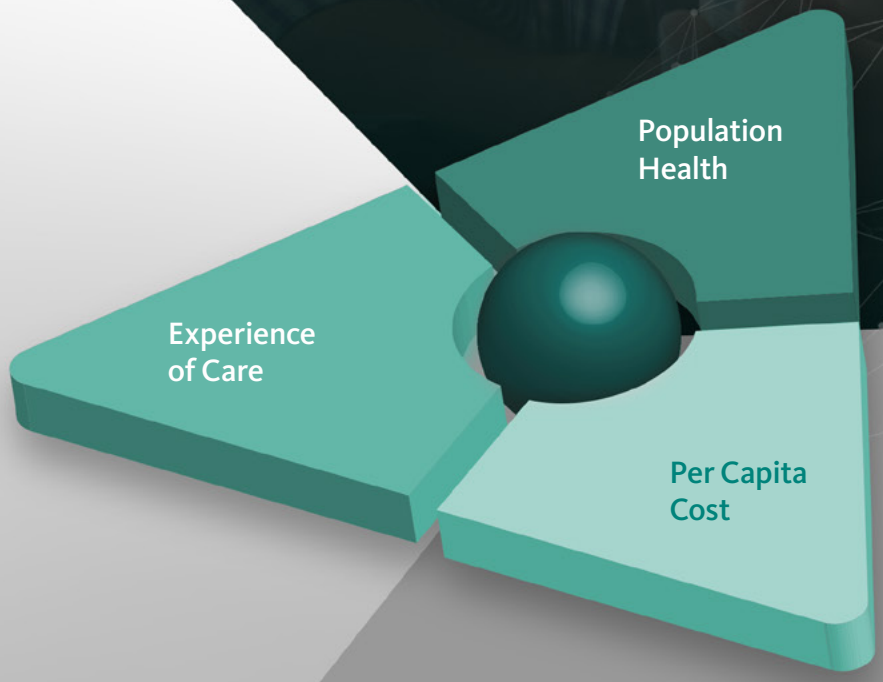
Through access to knowledge and data, payers will be a catalyst for driving member engagement and health — and finally bringing the decade-old **Triple Aim** of healthcare within arm's reach.

# Healthcare **delivery models** are changing

Way back in October 2007, the Institute for Healthcare Improvement (IHI) launched the Triple Aim initiative, designed to help health care organizations improve population health and the patients' experience of care (including quality, access, and reliability) while lowering or at least reducing the rate of increase in the per capita cost of care. The idea was that pursuing these three objectives at once would allow healthcare organizations to identify and fix problems such as poor coordination of care and overuse of medical services. In theory, it would also help them focus attention on direct resources to activities that have the greatest impact on health.

## Triple Aim

Since the Triple Aim was introduced, the U.S. healthcare ecosystem has continued to evolve in response to significant financial constraints in healthcare, an aging population and the increasing burden of chronic disease. Still the Triple Aim remains the guiding framework for optimizing health system performance by aligning payers, providers and patients around this set of common goals.



# Significant link between **patient engagement** and **clinical outcomes**

Over the past decade, the importance of patient engagement has intensified — due to both the emergence of enhanced, always-on communication channels and a new set of expectations for those "consumer-like" experiences to carry through every area of the patient's life. Numerous studies have shown significant evidence of the link between **patient experience** and **clinical outcomes**, however; true transformation can only occur when we unleash the full power of the patient. But how?

To be successful in the new era of health reform, organizations will have to take engagement to a new level and consider the patient not just as a recipient of care — but as a central component in his or her own care team. This requires a mind shift by healthcare payers, providers and the patients themselves.

An important aspect of that mind shift has to do with the **personalized nature** of healthcare — moving from a culture and approach that might have formerly asked the patient, "what's the matter" instead of "what matters to you?"[1] This question transforms the interaction from a conversation about clinical symptoms, problems and prescriptions to a partnered discussion on getting to the most important goals in a person's life, using all the knowledge of the health care professionals and all of the assets of the patient and family.

Expanding and improving the continuum of care for the patient, when applied again and again among all the patients who comprise the population, by definition improves population health.

Instead of asking a patient, "what's the matter?"... it's time to start asking, "what matters to you?"

# Systems and tools are lacking

If patient engagement is crucial to better outcomes and a high-performing healthcare ecosystem, efforts to support it often focus too narrowly on the role of physicians and other care providers. For example, we know that as of 2016, patient portal adoption had reached 92% among healthcare providers — but only about 30% of patients were active users.[2] What's more; the patient experience for those who do engage with these tools is often disjointed and riddled with conflicting or incomplete information.

There are many different applications, portals and mobile devices that address part of the patient's continuum but few have been adopted to encompass the entire continuum of care. Such efforts fail to capture the payers' unique capabilities to help patients achieve better health.

Patient portals have not been designed or implemented to focus on patient engagement. Portals are much more focused on information sharing than on facilitating information exchange. Personalizing information for patients has not been widely developed — but it's an area in which payers often hold many of the keys to integration. Who better has data-driven access to all these factors that make up the patient's personal experience of healthcare?

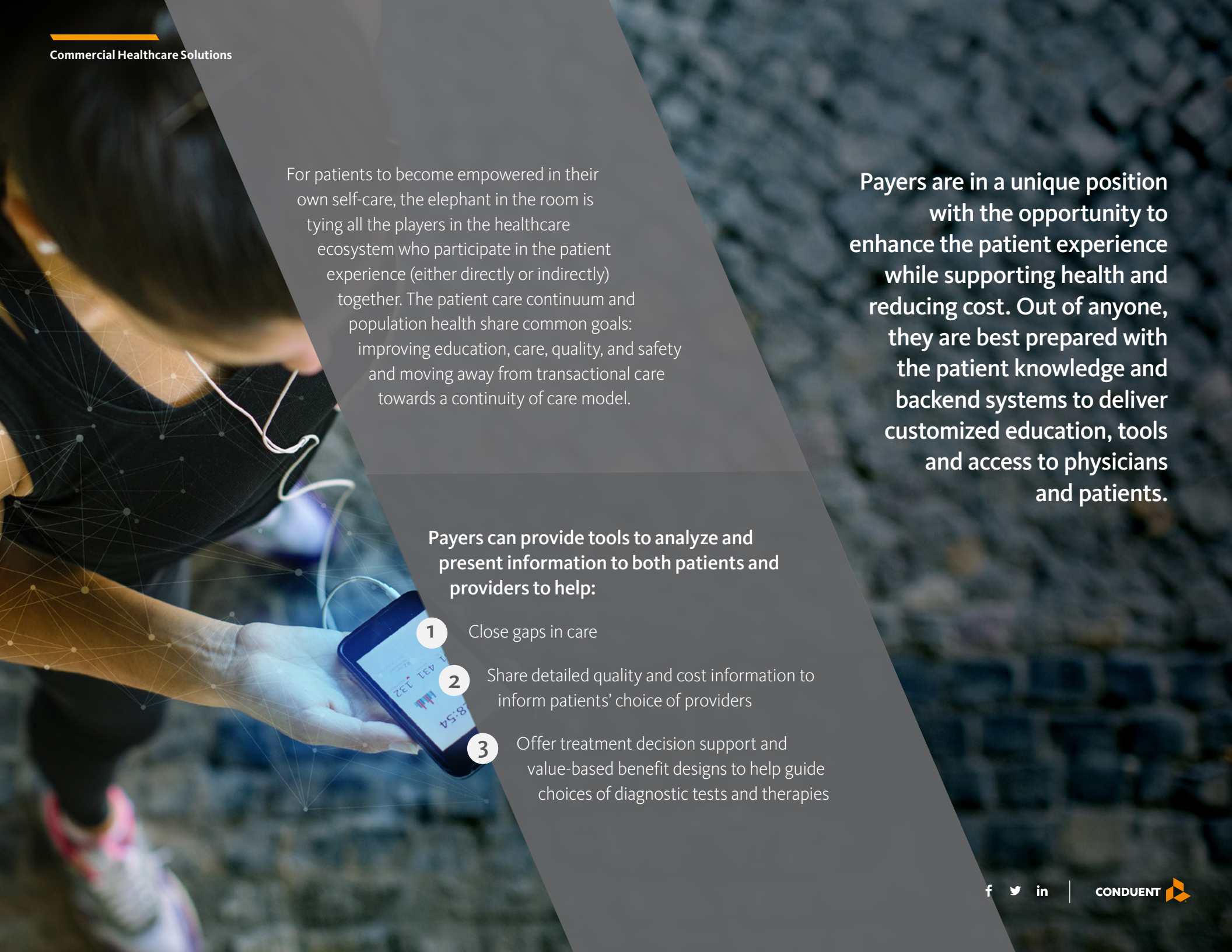
To that end, solving this puzzle represents a tremendous opportunity for healthcare payers to help patients better manage their own care through access to knowledge and data. However, the process to get there won't be simple.

# The Payer Opportunity

Achieving the Triple Aim will be crucial to the success of healthcare organizations that are **moving toward value-based delivery models**. Healthcare payers can help healthcare systems achieve the Triple Aim by providing quality improvement support as they pivot to a new model — but in some cases, it also requires a new mindset and possibly different pathways to growth.

If healthcare payers subscribe to the notion that population health management will improve health and reduce cost, then opportunities emerge to focus greater resources on member engagement — in addition to providing financial incentives and restructuring payment models based on quality. We've seen this with the emergence of "payviders" and health plans such as Kaiser Permanente, structured to stack those building blocks together for expert coordination of care and better patient outcomes over time.

**If health plans are to embrace the challenge of population health management, it will be imperative to address not only the technical and regulatory challenges of the consolidation of quality data, but also the relationships between the health plans and the members themselves.**



For patients to become empowered in their own self-care, the elephant in the room is tying all the players in the healthcare ecosystem who participate in the patient experience (either directly or indirectly) together. The patient care continuum and population health share common goals: improving education, care, quality, and safety and moving away from transactional care towards a continuity of care model.

**Payers are in a unique position with the opportunity to enhance the patient experience while supporting health and reducing cost. Out of anyone, they are best prepared with the patient knowledge and backend systems to deliver customized education, tools and access to physicians and patients.**

**Payers can provide tools to analyze and present information to both patients and providers to help:**

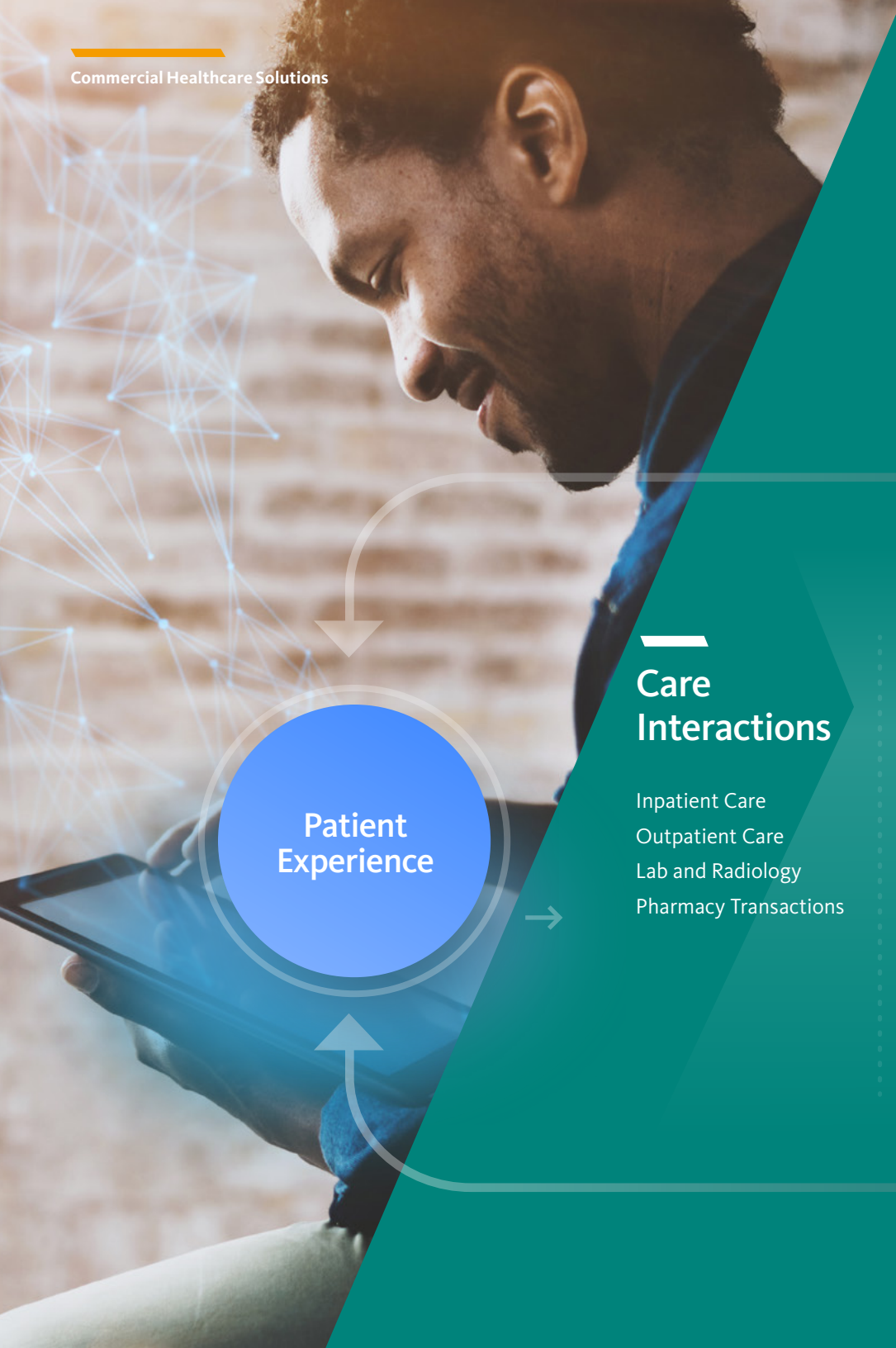
1. Close gaps in care
2. Share detailed quality and cost information to inform patients' choice of providers
3. Offer treatment decision support and value-based benefit designs to help guide choices of diagnostic tests and therapies

# Payer ecosystems must evolve

It's a fact that enabling the 360 degree patient view is not 100% possible today. Payer ecosystems must evolve in order to meet this challenge and embrace the opportunities it presents. **A more comprehensive, organization-wide approach, fundamentally linked to overall organizational success, is required.**

Payers have made progress and they do already have a significant portion of the 360 view through the management of claims, customer service, utilization and care management data. However, they must have a strategy for gaining access to clinical and patient experience data. Progress at an ecosystem level has seen payers increasingly aligned with PCPs as well as integrated delivery systems; however, there is often a lack of trust when it comes to information sharing that can stand in the way of delivering the best quality outcomes and experiences for patients.

Payers need to focus on leveraging a **platform aggregator** *(see chart on page 10)* that can align and normalize the siloed data from hospitals, providers, pharmacies, labs, and other sources and present an understandable patient-centric view. In addition to the work needed to integrate various systems, there is also the opportunity to leverage key technologies such as blockchain to provide a fabric for creating a single source of truth and delivering access to accurate information across the healthcare ecosystem. Then they have the best chance of positively impacting the overall patient experience.



# Key Focus Areas for Integration Success

Working through regulatory barriers ←
Eliminating data silos ←
Implementing new technology ←

**Patient Experience**

## Care Interactions

Inpatient Care
Outpatient Care
Lab and Radiology
Pharmacy Transactions

## Patient Data

MRI Results
Surgeries
Hospitalization

Prescriptions
Immunizations
Allergies

X-rays
Lab Results
Medical History

## Platform Aggregator

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**Health Plans**

# Toward a 360 degree patient engagement view

Achieving a 360 degree patient view requires many pieces to come together and a great deal of collaboration. The **Conduent HSP platform**, with its enterprise database, is a good starting point. By using the platform, payer portals can expand their current role to encompass a larger view, including clinical data.

With all this information easily accessible in one place, it will be easier for patients to manage their own care and influence their own best outcomes. Payers can build partnerships with provider organizations to create new functionality such as click-through access to clinical records and details. Billing will be streamlined and payments automated. Instead of patient touch points living in silos, every interaction opportunity can deliver a positive and integrated experience — at a lower cost and with greater outcomes for the patient and overall population health.

**Payers can give patients access to a complete dashboard view of their healthcare, including:**

- **Health history**
- **Prior services**
- **Prescriptions**
- **Immunizations**
- **Services**
- **Upcoming wellness opportunities** (flu shots, mammograms, colonoscopies, etc.)

That's the Triple Aim, and health plans have the greatest opportunity to get us there. The last mile may seem like the longest, but the finish line is finally coming into view.

**Conduent can help you get there.**

**Talk to us today.**

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Conduent delivers mission-critical administration, clinical support and medical management solutions across the health ecosystem to reduce costs, increase compliance and enhance utilization, while improving health outcomes and experience for members and patients.

**About Conduent**

Conduent delivers mission-critical services and solutions on behalf of businesses and governments – creating exceptional outcomes for its clients and the millions of people who count on them. Through people, process and technology, Conduent solutions and services automate workflows, improve efficiencies, reduce costs and enable revenue growth. It's why most Fortune 100 companies and over 500 government entities depend on Conduent every day to manage their essential interactions and move their operations forward.

Conduent's differentiated services and solutions improve experiences for millions of people every day, including two-thirds of all insured patients in the U.S., 11 million employees who use its HR Services, and nearly nine million people who travel through toll systems daily. Conduent's solutions deliver exceptional outcomes for its clients including $17 billion in savings from medical bill review of workers compensation claims, up to 40% efficiency increase in HR operations, and up to 40% improvement in processing costs, while driving higher end-user satisfaction.

Learn more at **www.conduent.com**

1 Michael J. Barry, M.D., and Susan Edgman-Levitan, P.A.. Shared Decision Making – The Pinnacle of Patient-Centered Care. New England Journal of Medicine, March 1, 2012.

2 American Hospital Association. Trend Watch Report 2016.



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