

BlueCross BlueShield Association

An Association of Independent Blue Cross and Blue Shield Plans

LABORMATTERS

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BlueCross BlueShield of Western New York and BlueShield of Northeastern New York Step Up Chronic Condition Management With Health Integrated

REALITY CHECK

- Are we getting a satisfactory return on our Disease Management (DM) investment?
- Does DM really have an impact on our high-utilization members, and is it effective for members with behavioral conditions like depression?
- Are we targeting the highest-opportunity members to improve clinical outcomes and reduce costs?

Upstate New York Plans Take Action

Two years ago, BlueCross BlueShield of Western New York (BCBSWNY) and BlueShield of Northeastern New York (BSNENY) asked questions like those above. With DM programs in place, the plans needed to know if a critical subset of their populations was being reached — the clinically complex, chronically ill who struggled with psychosocial challenges that aggravated medical conditions and led to unnecessary utilization, but who were difficult to reach and motivate.

These members disproportionately impacted cost drivers, including emergency room (ER) visits and inpatient admissions, and the plans realized that if they could be reached through a biopsychosocial approach, there could be tremendous opportunity to improve quality of life and health while reducing medical costs.

Primary Care Physicians Need Support to Extend Their Capabilities

While a majority of these members sought help

through primary care physicians, these physicians often had limited training and experience in managing psychosocial aspects of health (including medication and treatment plan adherence, emotional support, or specific behavioral conditions like depression or anxiety).

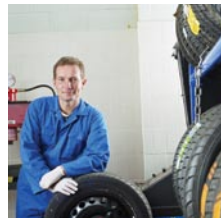
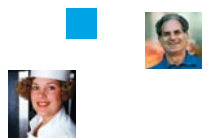
A Proven Partner to Bridge the Gap

BCBSWNY/BSNENY sought a partner to bridge the disease management gap, and chose Health Integrated, Inc. (Tampa, FL) — a targeted population health management company whose chronic condition management strategy is based on understanding and addressing the critical interplay between medical and psychosocial factors. Health Integrated's program, called Synergy Personal Health Management®, was uniquely positioned to address this critical subset of the BCBSWNY/BSNENY populations.

Synergy Personal Health Management®

Health Integrated's innovative Synergy program results in fewer and shorter hospitalizations, less frequent emergency room visits and better adherence to care plans. Its success is attributed to:

- **Accurate Identification of the Targeted Population** — The program employs sophisticated analytics, proprietary algorithms, and predictive modeling as well as co-developed strategic inclusions to define the population that provides the greatest opportunity for change and impact.
- **Direct-to-Consumer Engagement** — Essential to delivering results, the program uses proven direct-to-consumer marketing principles to



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establish ongoing dialogue with targeted members. The engagement model is deployed in a way that uniquely resonates with each member, drives action and ultimately leads to greater impact.

- **Delivery of Real Interventions** — Synergy delivers real interventions that seamlessly address medical, psychological, behavioral and social issues that affect utilization and health status. The program includes dedicated “Care Coaches” — clinicians with expertise in the interplay between physical and psychosocial health — who assess, teach, support and motivate healthy change in members, yielding improved clinical outcomes and reduced utilization.

Tangible Results

Within the targeted population, the plans have experienced significant utilization and medical cost reductions, and ER visits and in-patient admissions have both declined dramatically. To date, BCBSWNY and BSNENY have seen a 3-to-1 return on investment, and the plans recently expanded the targeted population to drive benefits to more members and employers while further reducing costs.

Seamless Implementation and Care Coordination

Health Integrated’s experience enabled seamless implementation including important care coordination, and involved relatively few BCBSWNY/BSNENY resources. In addition, this initiative coexists with and complements other BCBSWNY/BSNENY initiatives such as traditional disease management.

Synergy Personal Health Management:

- **Improved outcomes**
- **Reduced ER visits**
- **Reduced inpatient admissions**
- **Seamless care coordination and implementation**



Delivered by a team of clinical experts experienced in behavior modification and chronic condition management, Synergy PHM is enabled by a powerful, proprietary technology platform that is flexible and manages all participant data analytics, personalized interventions and outcomes reporting.

To learn more about Health Integrated and how they work with BCBSWNY / BSNENY plans, please contact Andy Pitler at apitler@healthintegrated.com or 773.680-6868. (Richard Clopper is the BCBSWNY / BSNENY contact at 716-887-6957.)