

Personalized Advocacy

Compassion, Expertise and Technology
Working Together to Engage and Influence
Employees to Better Health at Lower Cost

Personalized advocacy is a new approach for a new employee health and benefits experience. Unlike digital navigation platforms, concierge or other healthcare advocacy solutions, personalized advocacy combines three elements — compassionate human interaction, clinical expertise and intelligent technologies — to create trusted relationships and deep insight about the unique needs of each member at every stage of health. It’s an innovative solution that engages people in their health and well-being — often before they have entered the healthcare system. It influences them to make better healthcare decisions and connects them to the precise health-related resources they need at the optimal time. Engaging with individuals before they have a health need — rather than following a claims or utilization management trigger — is foundational to a personalized advocacy approach. The results of applying personalized advocacy are nearly perfect employee satisfaction, improved health outcomes, and up to 15% lower healthcare costs for employers.

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Complex Challenges for HR Benefits Leaders

Pressure is mounting on HR Benefits Leaders at organizations of all sizes and across all industries. As the U.S. labor market continues to tighten, acquiring and retaining top talent has become a top objective — even rising to the number-one concern shared by CEOs in 2018.¹ As the country faces a growing substance abuse crisis and new sources of stress, taking care of the mental health and well-being of employees has become just as important as tending to their physical health. And as employee healthcare costs continue to rise, with an expected growth of 6.5% this year,² bending the healthcare cost trend remains critical.

All at once, HR Benefits Leaders must find a way to deliver a health and benefits experience that:


- builds a valued employer-to-employee relationship;
- improves the health, well-being and productivity of the entire workforce, and
- stems the growing employee healthcare expense — a cost, now reaching an average of \$13,000 per employee per year,³ that is often deemed “uncontrollable” by CFOs.


It’s a complex set of challenges — one that requires deep engagement and influence to overcome. Only by fully engaging employees in their health well-being, and influencing them to make the best healthcare decisions, will organizations achieve all three goals at the same time.


Compounding The Challenge: Lack of Employee Engagement

Unfortunately, employer efforts to engage and influence employees through health and benefits programs have fallen short, with 43% of employees saying they have never once used the health-related programs put in place by their employers.⁴ The use of nurse lines, long a staple of employer benefits, is less than 1% at many large companies. And one in three HR representatives say they have difficulty generating employee engagement in employee health and benefit point solutions, according to a BCBS survey of NBGH employers.⁵

Top-rated healthcare-related hassles, according to Americans surveyed:⁶


55%
Coordinating various aspects of care


53%
Understanding what healthcare will cost


50%
Understanding healthcare benefits

Employee adoption and use of health benefit programs and tools are poor for a variety of reasons:

- Employees often aren't aware that the solutions are available to them in the first place.
- They have difficulty understanding their health benefits and solutions.
- They experience hassle and discomfort when dealing with multiple disconnected health-related resources.
- They don't understand how and when specific solutions can help them personally.

"People expect personalization in every aspect of their lives," writes Paris Wallace, CEO of Ovia Health, the leader in personalized maternity benefits for women. "You wouldn't log into Facebook and look at a feed that wasn't yours, searching through hundreds of updates to find the one update that was from someone you know. This is exactly what un-personalized benefits programs ask employees to do."⁷

More digital solutions, more nurse lines, and more disease management programs are not the answer.

A New Approach: Personalized Advocacy

Achieving new results demands a new approach to employee health and benefits, one that fits into each individual's life in a way that makes sense to them personally. It must inspire them to be more actively involved in their health and well-being, and to use the health-related programs that address their unique needs. Personalized advocacy is that approach.

Personalized advocacy is built on three pillars: person-centric support, partnership and guidance, and a unified experience.

1. Person-centric Support. As healthcare reform focuses on putting the *patient* at the center of care, personalized advocacy puts the *person* at the center of health and benefits support, even before they are a "patient" or seeking healthcare. This means a few things:

- **A person's total life context matters**, not just their physical health, diagnosed condition and demographics. An individual's behavioral health issues, financial challenges, workplace pressures, social environment, cultural beliefs and other life factors play a significant role in a person's healthcare decisions and ability to engage in their health.
- **A person is engaged early and often**, not just when they have been diagnosed with a disease or condition, but at every stage of health and well-being. Engaging an individual before they have a health need opens the door to influencing better decisions and better health outcomes.
- **A person can engage the way they want**, which helps increase engagement by using the communication channel or mode of their choice, whether mobile device, online or by phone.

- 2. Pre-care Partnership and Guidance.** Personalized advocacy recognizes that individuals must have the opportunity to be in partnership with highly skilled, compassionate people dedicated to helping them, perhaps before they even enter the healthcare system. They need the opportunity to share their personal situation and stories — and express their unique health and healthcare needs — with a skilled and compassionate person. This trusted relationship is in place when a health need occurs — when they need expert guidance to help them evaluate their options, navigate the complexity of the healthcare system, and make the best choices for their personal situation.
- 3. Unified Experience.** Personalized advocacy pulls together the fragmented world of healthcare for each member, making it simpler for individuals to find, access and use all of the health-related resources they need when they need them. Because personal health data is shared across programs and resources, members enjoy a personalized experience as they seek support from distinct but connected solutions, programs and institutions. The unified experience also makes it easier for HR Benefits Leaders to analyze and report on the use of health and benefits programs.

How Personalized Advocacy Works: Compassion + Expertise + Technology

Technology alone is not enough to fulfill the promise of personalized advocacy. Neither is a traditional health plan call center or nurse line. Delivering person-centric support, pre-care partnership and guidance and a unified healthcare experience requires three things — human compassion, clinical expertise, and intelligent technology — working together seamlessly.

Person-centric Support

Supporting a person, not just their diagnosed condition, and getting them on the best path to health and well-being, starts with understanding who they are and what matters to them. This can't be done with claims data that looks back at what's already happened, the method used by traditional disease management and case management programs. Getting a complete picture of a person also can't be accomplished by simply adding biometric and health risk assessment data to claims data, the approach used by some digital navigation solutions.

Personalized advocacy, in contrast, generates a deep level of insight about each member using a combination of technology and compassionate human interaction. An open technology platform pulls in a wide range of personal health data — monthly, or even daily, claims data; lab results; biometric data and risk scores; utilization management feeds; and personal health data from telemedicine visits, maternity benefits applications and any other connected digital health solutions. Important data is also gathered on life factors, such as family dynamics, financial challenges, anxiety and sources of stress, community issues and other factors.

Applying intelligence and predictive analytics to this data, a clearer picture of a particular member emerges. Predictive analytics finds value in all data to identify patterns and make assumptions about future behavior with statistical accuracy, saying, in effect, "Based on everything we know about you and your family, here's what needs to happen."

An independent third party study showed that Accolade care plans address 82% of contextual factors compared to physician plans that address less than 60% of contextual issues.

Source: Institute for Practice and Provider Performance Improvement, Inc. (2014). 4C Coding Interim Report for Accolade. Unpublished raw data.



The combination of people and technology enables Accolade to build a whole-person profile for each member. We identify people with specific risks and reach out to them with highly personalized support.

What completes the picture, however, is information and insight gathered from every personal interaction between the member and a compassionate health and benefits advisor. Because they know what to look for, personal health advisors can identify issues from seemingly unrelated questions like “is this doctor in network?” or “what is my benefit for a mammogram?” People, not retrospective claims data, are the best predictors of future healthcare needs. And technology and data alone won’t reveal a person’s growing anxiety about recurring headaches, why someone isn’t taking their insulin, or that their weekly ride to the support group fell through. Compassionate listening from a trained health advisor plays a vital role in identifying health issues, discovering contextual or behavioral barriers to care, increasing engagement, and optimizing the use of healthcare resources.

Predictive analytics delivers recommendations, but trained, compassionate expert determines which choices are best matched to the member’s needs. Over time, the technology learns from the human-made choice and applies that learning to future recommendations, getting smarter with every input.



At Accolade we realize that even the smartest technology has its limits. Our Health Assistants and Nurses learn about member preferences, culture, feelings, and barriers to care, whether medical, financial, logistical, or emotional. We apply behavioral science to listen and validate their feelings to foster trust. We can influence their choices by having a true understanding of how to encourage each person to take the next appropriate step for them.

Partnership and Guidance

Just as data and technology alone can't uncover contextual or behavioral barriers to care, digital solutions alone also can't build a trusted relationship — a critical part of navigating healthcare options and making decisions.

A common experience is a member who needs to find a doctor. In this case, a factory worker needs to use her 15-minute morning break to find an affordable ophthalmologist. She gets out her mobile device and launches a price transparency tool provided by her employer but realizes she doesn't have the knowledge or time to understand and navigate the choices presented to her — such as why one provider is more expensive than the other for the same treatment. Not only is she confused about what's covered by her benefits plan, but she also doesn't know enough about pricing to make a decision. She selects the more expensive provider under the assumption that the care will be superior, or she gives up and puts off the decision.

Instead, with access to a personalized advocacy solution from her employer, she uses her 15-minute break to send a mobile message to her health assistant to get a recommendation. Knowing the member has a history of glaucoma, the health assistant gently probes for information and discovers she has been seeing intermittent rainbows and halos. He suggests they talk via phone and brings a nurse into the discussion who recommends expediting the doctor visit and finds an in-network ophthalmologist minutes from her job. The nurse also discovers that the woman had run out of eye drops months earlier and arranges for a pharmacy to deliver her eye drops to her home, emphasizing the need to use them as prescribed. When the woman visits her new doctor, she's told she would have gone blind if she had waited another month.



Using data intelligence and expertise, Accolade Health Assistants and Nurses identify members who can benefit from clinical support, e.g., a newly pregnant woman or someone with signs of depression. They reach out to provide personalized support and guidance.

Independent clinical expertise, combined with in-depth knowledge of member benefits, creates trust, influence and impact — and a valued employee-employer relationship — that technology alone cannot. “Anyone who’s had to interact with the healthcare system knows how stressful and frustrating it can be to figure out what to do, where to go and how to coordinate all of the moving pieces,” said Alan Spiro, MD, Accolade founder and Senior VP of Strategy and Growth and Chief Medical Officer at Blue Health Intelligence. “Despite all of the great technology advances, there’s no app or tool that can guide an individual consumer through everything, especially when they’re facing complicated, emotional healthcare issues. For that, you need real, human support.”



As part of Accolade clinical programs we engage directly with providers to align care plans and coordinate member needs. We act on verification of benefits or utilization management triggers while care options are still being evaluated and work with providers to ensure members get optimal care to meet their needs. We also prepare members to better partner with their providers.

It’s not surprising that access to digital price transparency tools have not led to lower healthcare spending but precisely the opposite. According to an editorial by Kevin G. Volpp, MD, PhD, in the Journal of the American Medical Association, price transparency tools have not only failed to lower healthcare spending but in fact were associated with a slight increase in spending by those offered the tools compared to those who were not.⁸

Unified Experience

“It’s more than just personalizing,” says Paris Wallace, CEO of Ovia Health. “That personalized program needs to be integrated with all of the other health programs so that everything works together, seamlessly. You have to provide benefits in the way that people want to consume them. This doesn’t happen today.”⁹

For example, when a pregnant woman calls a telehealth provider with a concern about numbness in her feet, she can rest assured the doctor has full access to her health history through her connected maternity benefit app. Or when a father, hurt on the job, needs help finding care, understanding his disability benefits, and getting financial assistance, he can turn to a single resource for both health and disability answers.

Personalized advocacy delivers a far simpler and more compelling member experience — one place to go, one password, one health profile. It’s solutions and data unified by technology — like cloud computing, web services, and open APIs — that connects solutions around the member, securely and efficiently. It’s a unified experience that comes to life through the compassion and expertise of nurses, clinical specialists, and benefits specialists. And it’s a solution that uses artificial intelligence to learn through every interaction and outcome, driving greater efficiency in the entire process.

Personalized Advocacy Drives Better Outcomes

Employers turning to personalized advocacy from Accolade are achieving breakthroughs across the board — increased member engagement, more efficient use of healthcare, higher employee satisfaction and significant cost savings that grow over time.

Engagement

90%

of high cost claimants

70%

of all claims spending

85%

of all families consuming healthcare

67%

of the time, we engage while a care decision is being made

2-10x

increase in utilization of third-party resources

Member Satisfaction

98%

satisfaction

73 NPS

Net Promoter Score

Outcomes

Medical admits reduced by an average of **6.4%** per year

Annual reduction in medical days is **5.7%**

Annual reduction in 30-day readmits is **17.9%**

5.7% decrease in medical inpatient days

ER visits are down an average of **2.7%** per year over the last 5 years

Cost Savings

Minimum **2:1** return on investment

Up to **15%** cost savings by year five

Less than **1%** medical cost trend

Accolade is a personalized health and benefits solution that dramatically improves the experience, outcomes and cost of healthcare.

“

I had a call today concerning my benefits, and your Accolade associate was extremely helpful in walking me through things and guiding me. She was allowing me to ask the right questions, and guided me through what the right questions were to ask my providers and my physicians. She made a truly stressful situation much less stressful.”

- C&S GROCERS EMPLOYEE

“

I'd like to just say that we've have worked with a number of different behavioral health people at Accolade, and every single time I've worked with someone they have been wonderful. I appreciate that HP has taken time and effort to work with Accolade to help us work through these issues. It takes so much off our plate that we worry about, and now we don't have to. You're wonderful Accolade, and I can't say enough. Thank you very much.”

- HP ENTERPRISE EMPLOYEE

“

My Health Assistant was persistent in finding an answer to my question and seeing that I could use my insurance for my particular needs. I appreciate how she kept digging for me.”

- INTUIT EMPLOYEE

“

Accolade has been very, very helpful. My contact is absolutely wonderful. She's called me, and she's helped me through this. I am dealing with breast cancer, and she has been wonderful. She's been God's gift, and I appreciate this service. It has been very helpful. Thank you.”

- AMERIGAS EMPLOYEE

“

I have been using Accolade for probably 13 or 14 months now through my husband's company. It has been a godsend in my life. I don't know what I would have done without it. The one person that I dealt with has been wonderful about recommending doctors, and figuring out how much insurance is paying for what medicines. He has just been great, and I hope I can continue to use Accolade. Thank you.”

- LOWE'S EMPLOYEE

“

I want to let you know that our health assistant helped us tremendously with getting our prescription straightened out. He was very kind, helpful, and he's a great person. Thank you.”

- IBC MEMBER

Better Decisions. Better Health. Better Business.

It's time to give your employees a better health and benefits experience with personalized advocacy, a uniquely high-touch, high-tech approach.

[Learn more](#) by visiting accolade.com

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