

## LHCC Discovery Lab Findings 2021: Engagement & Education

### Executive Summary

The Louisville Healthcare CEO Council (LHCC) represents healthcare CEOs from across the entire continuum of care. Through our “Discovery Labs” with Council company “subject matter experts,” we uncovered business challenges and gaps in current solutions relative to engagement and education. This report summarizes hours of interviews with LHCC experts and informs our global call for innovations that enable a systems-approach to addressing barriers associated with consumer engagement.

**LHCC requested proposals for innovations that enable and promote a systems-level approach to addressing barriers related to engagement and education for older adults.** Eight finalists were selected and will present at CareTech Pitch during OPTIMIZE in September 2021. Winners are guaranteed a spot in LHCC’s 2022 pilot program.

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#### Key Observations:

- Building trust with patients and stakeholders through transparent communication provided in an understandable way is critical to all LHCC companies, ranging from benefit navigation to health literacy.
- Patient, member, and consumer engagement is directly linked to employee engagement. The ability to flow information to frontline staff impacts the quality of care and can be especially difficult with a distributed workforce.
- Using data in a contextually relevant way and leveraging unstructured consumer information beyond encounters with our health system will give a complete picture of consumer health and allow engagement with consumers at the “right time.” The advanced data processing capabilities needed, both hardware and software, are still maturing.

#### Important Opportunities for Innovation:

- Build trust and awareness between consumers, providers, and payors
- Streamline the consumer experience across transitions of care
- Create more individually tailored engagement experiences leveraging contextual data
- Understand a consumer’s engagement preferences
- Foster intrinsic motivation to drive better health decisions

#### Criteria for Evaluating Proposals:

- Clarity around mechanisms for evaluating outcomes.
- Ability to promote and enable a systems approach through shared responsibility and aligning incentives.

## LHCC Innovation Engine

LHCC’s approach to innovation is designed to uncover complex industry pain points at the systems level. Identifying and understanding these gaps equips us to meaningfully engage the innovator community, deploy capital strategically, and convene a gathering of thought leaders and experts for substantive conversations about world-changing approaches to healthcare at OPTIMIZE.

Within this framework, LHCC CEOs collectively identified five pressing healthcare challenges to create a roadmap for organizing LHCC innovation activities, represented in figure 1 below.



Figure 1: LHCC CEO Innovation Roadmap

**Engagement and Education (Patient and Consumer Engagement)** is LHCC’s priority area of focus for our innovation activities in 2021 and the subject of this call for innovations. This report and accompanying call for innovations is for a broader range of solutions addressing engagement and education. The timeline for our global innovation search can be seen below in figure 2.

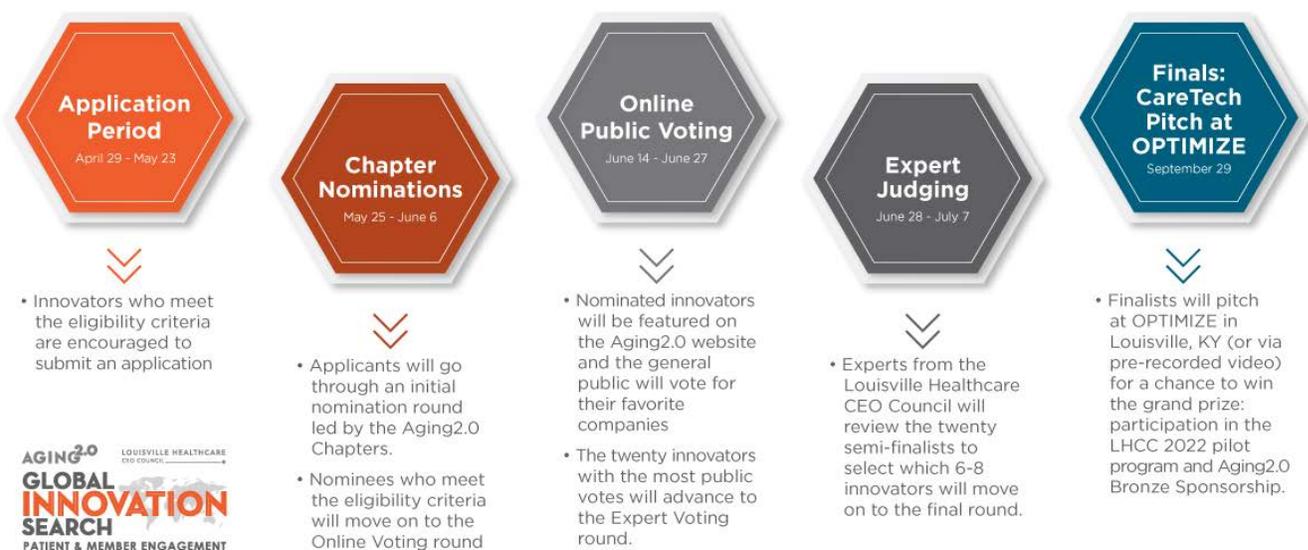


Figure 2: Global Innovation Search Timeline

## LHCC Perspective: Patient Engagement and Education Defined

Evidence demonstrates that actively involved patients experience better health outcomes and incur lower costs.<sup>1</sup> Patient engagement combines patient activation, a patient's willingness to manage his or her own health and care, with interventions designed to increase activation and promote positive patient behavior. Obtaining preventive care or exercising regularly are two examples of positive behavior that patient engagement can achieve. Effective patient engagement can help achieve the triple aim of improved health outcomes, better patient care, and lower costs.<sup>2</sup> Patient engagement is best achieved by providers, payors, and patients working together to improve health.

We worked with subject matter experts from LHCC companies who represent the entire continuum of care. The overwhelming consensus was that there is a need for system-wide solutions that empowers patients to be engaged.

## Our Process

To better understand LHCC member challenges around Engagement and Education **as it relates to integrated care delivery across the continuum of care**, we launched **Discovery Labs**, a tool designed to help identify each LHCC member's priorities and challenges patient and member engagement by interviewing their own internal experts. Our [Innovation Committee](#) identified key Subject Matter Experts (SMEs) from LHCC member companies to participate in hours of interviews in group settings and individually, to discuss individual Council company business challenges, barriers to innovation, pain points, and gaps in current solutions relative to Consumer Engagement. Through **Discovery Labs**, we uncovered important information that, when viewed collectively from across LHCC and continuum of care, yielded insights into

<sup>1</sup> "Patient Engagement," Health Affairs Health Policy Brief, February 14, 2013. DOI: 10.1377/hpb20130214.898775

<sup>2</sup> Id.

system-wide challenges related to “engagement and education.”

## Key observations from LHCC *Discovery Labs*:

To make them consumable at a glance and to support better alignment between innovators and real market needs, we’ve distilled the collective findings from across LHCC member companies into a short list of tools that will address the challenges identified during discovery labs. The list can be seen below in figure 3.



Figure 3: LHCC Discovery Lab Findings Challenges

Details behind each of the eight collective findings of the discovery labs can be seen below:

### 1. Create more individually tailored engagement experiences

Engagement and education is a complex challenge and depends on the service line and the health literacy of the consumer. It is critical to communicate with the patient or member on a level that they can connect with and understand, as well as create individually-tailored engagement experiences. Some patients or members have more pressing needs that make a conversation about a care plan or benefits ineffective. While telemedicine and digital channels have provided opportunities for new ways to connect with consumers, providers have not been able to replicate the benefits of in-person interaction through phone or digital channels, making engaging consumers beyond the most severely ill difficult.

Because of this, proactively educating various stakeholder audiences, including referral sources, volunteers, donors, and the community about capabilities and services can reduce misperception surrounding offerings. Some other opportunities for engagement are:

- Home visit timing to meet informal caregivers
- Care Plan Meetings
- Nursing Home Compare
- Day-to-day clinical opportunities

- Onboarding (including advanced care planning)
- Discharge

Through necessity, COVID provided the impetus for creating new ways of engaging consumers. Although not a universal remedy, many of these new opportunities will remain post-COVID, along with an expansion of telehealth opportunities.

## **2. Reduce burnout among professional caregivers**

The importance of staffing and the impact of staffing on continuity of care is clear. Employee engagement is critical with the largest challenges being delivering information across an organization, especially to a dispersed unlicensed workforce who may not see supervisors daily.

With this in mind, there is a need for innovation in staffing, onboarding, career development, and communication with frontline staff. The link between the ability to get messages to frontline staff and quality of care is clear, with improvements needed in the processes and technologies deployed for getting employees the messages and tools they need to provide quality care and stay engaged.

## **3. Understand a consumer's engagement preferences**

A consumer's digital acumen is one example of a factor that will impact engagement preferences. Given the overload of email and digital messaging, more is not always better, and innovation may not come from online engagement. Many senior customers are not yet comfortable and lack capability to engage digitally. Creating touchpoints for consumers and employees who do not access email or the internet regularly is important.

## **4. Create more meaningful non-clinical interactions between caregivers and patients**

Challenges fall into several interrelated categories, including regulatory (checklists overwhelm efforts to listen/engage), environmental (example: lack of space), and "human" (staff turnover/burnout, cognitive challenges). Throughout all those barriers, one common theme is time: caregivers don't always have the time they need to create meaningful interactions with residents and families. Providers spend a significant amount of time on paperwork and charting. There are some real opportunities around alleviating the paper burden and making charting more relevant to a patient's care. Another barrier is the transactional nature of healthcare. Finding ways to reduce administrative burden and increase non-clinical interactions will improve patient engagement and health outcomes.

## **5. Foster intrinsic motivation to drive better health decisions**

Most consumers have never talked to their providers about the cost of a visit and just as many have never discussed the price of a procedure. Even when they bring up the subject or try and use cost estimate tools, consumers often cannot get trustworthy information about the cost, quality, and level of satisfaction with health care services. There is an overall lack of price transparency.

In addition to a lack of price transparency, benefit navigation can be overwhelming for consumers. New benefits arrangements can be challenging to understand and use effectively. Employers, for example, have started by moving to consumer-directed, high-deductible plans. Some have taken it a step further to defined contribution plans. In these plans, employers allot a certain budget to employees and give them more freedom and responsibility for how to spend these health care dollars. Most do not understand until they get a rather large bill at home in the mail and are forced to dig into the reasons why. This creates hesitancy to engage providers and the health care system.

## **6. Deliver real-time data about a consumer's experience**

We need a complete picture of consumer health beyond encounters with our health system. Clean and actionable data along the entire consumer journey could help provide a more personalized, relevant experience. However, data is still maturing and providers do not always have the information they need to engage patients at the right time. The system is shifting to more trigger-based engagement, but access to timely data can make this a challenge. Related to this, EMRs need to talk to EMRs from other health systems and payors allowing for analysis of longitudinal data in concert with real time data.

Understanding this, the quality of consumer information being collected needs to improve, and a tool that allows the use of machine learning and AI does not yet exist. This can only be done if the longitudinal quantitative member data is contextualized with information that captures all parts of what a person actually “means” more accurately. Before this can happen, additional technical processing capabilities, both hardware and software infrastructure, is needed to use quantitative data in a contextually relevant way. For example, by leveraging unstructured consumer research information to improve getting relevant information to the right person at the right time in the right way. This will allow case management staff to understand the value proposition for individual members.

Finally, data and analytics literacy within large organizations can be challenging slowing adoption of emerging tools.

## **7. Build trust between consumers, providers, and payors**

Earning a consumer's trust is something that can be extremely difficult. Building trust with patients and members by listening to and understanding how they prefer to receive information is critical. Patients and members need to receive information in the way they prefer, making sure that patients are in control of how they receive engagement. While COVID-19 caused a significant drop off in home care services, it provided an opportunity to build trust by consistently communicating safety procedures with clients, demonstrating why actions are taken and how they ensure safety.

Additionally, utilizing data in a compliant and thoughtful way is important to gaining trust. Patients and members may not understand that intentions are to use data to help optimize health outcomes and benefit utilization. Wellness is one way to potentially create or expand the permission space around engagement in other areas where patients and members might generally see their interactions as simply transactional.

## 8. Streamline the consumer experience across transitions of care

Transitional care can be a challenge. Discharge instructions are often difficult to convey in the stress following a significant health event. Patients often go home with new medicine, and no idea how to integrate that with the medication they already have at home. It is critical that patients, providers, and payors understand the services and benefits available during transitional care. To improve this, there is a need for streamlining the experience across the continuum of care, so that patients and their families' experiences are closer to seamless. Additionally, the referral process includes some inefficiencies, both minor (duplicate referrals, for example), and relatively major (referral sources waiting too late for the patient to be able to access services) that need to be addressed.

### Criteria for evaluating proposals

**Idea/Product:** Quality of overall concept, viability of product or service

**Implementation:** How innovators present their idea, including diversity and strength of team, and clarity of stage and strategic plan.

**Impact on Education and Engagement in relation to Healthcare Aging Innovation:** Potential to address effective education and engagement for patients, caregivers (informal and formal), workforce and other stakeholders.

**Integration:** How well the innovation integrates into potential workflow and/or lives of older adults.

### About LHCC

The Louisville Healthcare CEO Council (LHCC) was formed in 2017 to leverage the strengths and assets of its members to address important challenges, particularly those related to an increasing older adult population, that extend beyond the scope of any one single member company. LHCC board members include CEOs from Kindred Healthcare, Humana, Trilogy Health Services, Atria Senior Living, Norton Healthcare, Hosparus Health, Anthem Blue Cross and Blue Shield of Kentucky, Apellis Pharmaceuticals, Signature HealthCARE, Galen College of Nursing, Baptist Health System, and BrightSpring Health Services. These companies are the titans in the industry, collectively representing over 300,000 employees and \$100 billion in revenue.

#### LHCC COUNCIL COMPANIES

