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Evaluating Engagement in the Populytics Chronic Condition Management Health Coaching Program

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Evaluating Engagement in the Populytics Chronic Condition Management Health Coaching Program



Background

- As the United States' leading causes of death have shifted from primarily infectious diseases to chronic diseases, some organizations have found disease management programs effective in reducing hospitalizations, length hospital stays, and emergency room utilization (Afifi, Morisky, Kominski, & Kotlorman, 2007) Kotlerman, 2007).
- Studies also suggest that the development of information technology supports self-management of chronic conditions by increasing knowledge and self-efficacy among individuals dealing with these illnesses (Solomon, 2008).
- Populytics Care Management a Chronic Condition Management Health Coaching Program (HCP) is a free service to eligible LVHN Choice Plus members, giving engaged members an additional resource to help them set goals to improve their health. RN coaches also encourage them to visit their primary care providers regularly and follow their care plans. Better self-management leads to lower costs for the member and the Network.
- Unfortunately, member engagement in the program is low.
- Two great opportunities for improvement are online informative resources and an effective health coaching program.

Methodology

- This project began with observation to understand the processes, strengths, and weaknesses of the HCP.
- An opportunity for improvement was observed in the letters used as a secondary mode of communication with members in the HCP. Each form of a letter was updated, redrafted, and submitted for approval for implementation.
- Content answering frequently asked questions about the HCP was developed and submitted for approval to display on the MyPopulytics member intranet portal.
- A list of questions was created based on speculation about why members decline the free program. Approval was obtained to initiate telephone surveys with moderate and high risk members who had completed or declined the HCP in the 2014 calendar year.
- A total of 207 calls were made to members who declined, and 16 calls were made to members who completed the program. Responses to each open-ended question were recorded and commonly reported answers among members were tracked in a simplified form for the purpose of reporting data.

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Results

- Of the 207 total calls made to members who had declined the program, the caller reached 47 members, 23 of which agreed to the phone survey and 24 of which declined.
- 16 total calls were made to members who had completed the program, and the caller reached 3 members, all of which agreed to participate in the phone survey.
- The three members surveyed who completed the program gave some common answers:

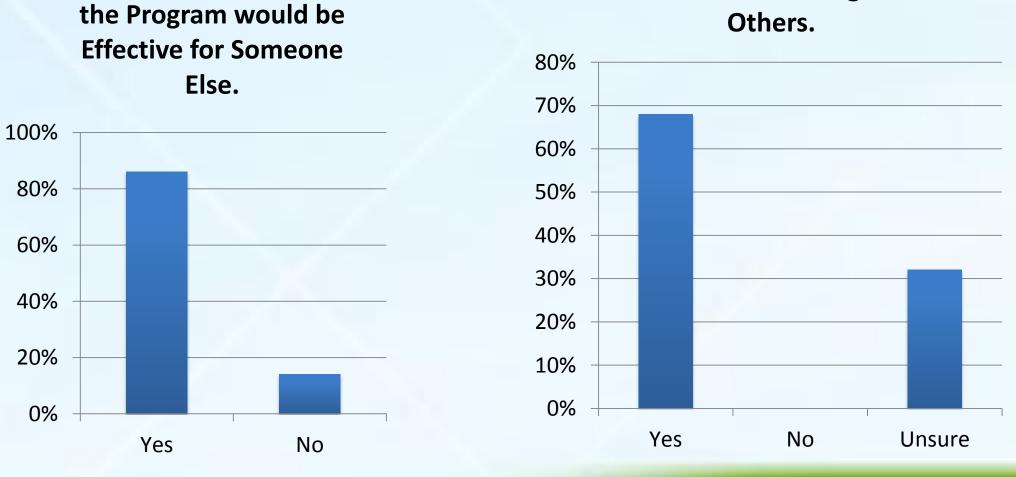
longer than one year, as chronic illness lasts a lifetime for many. -All three members would recommend the program to a colleague, reported they worked on their goals between phone calls with nurse coaches, and felt the program was explained fully to them. All three members reported the program was "userfriendly," however one also made some suggestions for improvement based on an experience with a new nurse coach the member felt was inexperienced.

-Only one member mentioned the reduced copay plan for diabetic members who engage in the program. He stated that it was the reason he agreed to the program, but it was also an inconvenience when the program ended to have to begin to pay full price again.

Table 1. Common Responses of Members who Declined the Program.

	·							
	Member indicated the program was good but not necessarily for him/her at the time.	Member mentioned he/she or a family member was a clinician.	Member mentioned another wellness program he/she was involved in.	Was the program fully explained to you?	Could the program be more "user friendly?"	Would you be more inclined to participate in the program if the materials and the nurse coaches were available online?	Do you think LVHN colleagues are aware this program is available to all eligible Choice Plus members for free?	Would you recommend the program to others?
% Answered Yes	87%	14%	50%	89%	32%	44%	21%	68%
% Answered No	13%	86%	50%	11%	68%	56%	5%	0%
% Answered Unsure	n/a	n/a	n/a	n/a	n/a	n/a	58%	32%
% Answered not LVHN Colleague	n/a	n/a	n/a	n/a	n/a	n/a	3%	n/a

Graph 1. Percent of **Members who Declined** and Responded they Felt



- -Two out of three members felt the program should be

Graph 2. Percent of Members who Declined and would **Recommend the Program to** Others.

- beneficial to them?"
- members' concerns about privacy.
- communication.
- considered.
- through members' benefits.

REFERENCES -Afifi, A.A., Morisky, D.E., Kominski, G.F., & Kotlerman, J.B. (2007). Impact of disease management on health care utilization: Evidence from the "Florida: A Healthy State (FAHS)" Medicaid Program. *Health Education and Behavior, 505 (36)*. Retrieved from: http://heb.sagepub.com.proxy-um.researchport.umd.edu/content/36/3/505.full.pdf+html. -(1999). Achievements in Public Health, 1900-1999: Control of Infectious Diseases. *MMWR Weekly, 48(29);621-629*. Retrieved from: http://www.cdc.gov/mmwr/preview/mmwrhtml/mm4829a1.htm. -(2014). Chronic Disease Prevention and Health Promotion. *Centers for Disease Control and Prevention*. Retrieved from: <u>http://www.cdc.gov/chronicdisease/overview/index.htm.</u> -Solomon, M. R. (2008). Information technology to support self-management in chronic care: A systematic review. *Disease Management & Health Outcomes, 16*(6), 391-401. Retrieved from http://search.proquest.com/docview/221168879?accountid=14696

Discussion

It was found that among those surveyed who declined the program, most implied that the program was probably useful to others; they just did not need it at the time it was offered.

The important question is no longer "what is wrong with the how the program is designed," but now "how can the program be better communicated so members understand that it will be

Further efforts should be focused on helping reluctant members to understand that any amount of help and guidance could have a positive impact on their health, regardless of their clinical background, as well as clarifying explanations to

Updated letters and new intranet portal materials may be a way to connect with members who prefer a different mode of

 The program should be extended for more than a year if members feel it is still benefitting them after that time period.

If chronic conditions continue to increase as a financial burden for the Network's self-insured plan, incentives and penalties for completing or declining the program, respectively, should be

Conclusion

 At LVHN, Populytics could reduce negative health and care utilization outcomes by carefully executing adjustments to its HCP that focus on comprehensive education about Choice Plus insurance and the Care Management services available

• As part of the health care infrastructure, colleagues could also benefit from an understanding of the challenges businesses in the United States face today in managing escalating health care costs and sustaining their business model.

Any improvement in self-management by a covered member contributes to the well being of the population of LVHN employees and to the financial viability of the network.

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