

**Pushing the Envelope:
Cutting Edge Models of Patient-Centered
Care Delivery**

Alexandra Drane
June 2011



OUR MISSION

To make people happier, healthier and more productive



OUR MISSION

To make people happier, healthier and more productive

And, oh by the way, often at a fraction of the cost of traditional approaches



OUR APPROACH

ANALYTICS

Who to touch to optimize population engagement and health outcomes

CHANNELS

The right mix of phone, email, SMS, mail to connect with people authentically

AGENCY SKILLS AND SERVICES

The most compelling experience to break through the noise

RESOURCE NEUTRALITY

We recognize the investments you've made and leverage those resources



ELEVEN YEARS. 400 MILLION INTERACTIONS. ALLEGIANCE TO HUMANITY





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HEALTH CARE REFORM, WE LOVE YOU

(WELL, AT LEAST SOME PARTS OF YOU)

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AS AN INDUSTRY, WE ARE BEING OUT SPENT...



Tobacco Industry



Food & Bev. Industry



\$24.4 billion annual promotional spend

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The tobacco, food and beverage industries together spend **\$80** for every person in the US promoting their products. We compete against that with **33¢**.



Health & Wellness Industry



\$100 million annual promotional spend

...OUT MARKETED...

The Methodist Hospital Weight Management Center
www.methodist.com | Volume 3, Issue 2 | 2009

Methodist The Methodist Hospital

Weight Matters



Obesity Health Risks Include World's Leading Killers

Living with too much weight is more than a cosmetic problem. Obesity can lead to some of the world's scariest diseases. The long list of health problems associated with overweight and obese people includes heart disease and stroke, some cancers, Type 2 diabetes, gallbladder disease, osteoarthritis, sleep apnea and breathing problems, hypertension and others.

Knowing these health risks and taking action to resist them can save lives. Losing just 5 to 10 percent of body weight — as little as 10 pounds — can reduce many of these health risks.

- Because obese and overweight people are likely to have high blood pressure, high levels of bad cholesterol and low levels of good cholesterol, they are at risk for heart disease and stroke.
- Cancers of the colon, kidney, esophagus, uterus and breast have been linked to obesity and being overweight. Doctors don't know exactly how extra weight increases cancer risks, but they believe fat cells produce hormones that may affect cell growth, which in turn, can lead to certain types of cancer.
- Type 2 diabetes is the most common type of diabetes in the United States. Formerly called adult-onset diabetes, many patients refer to the condition as having high blood sugar. Most Type 2 diabetes patients — more than 80 percent — are overweight.
- High cholesterol is a risk factor for gallstones, painful clusters of solid material that grow in the gallbladder and can lead to gallbladder disease.
- Osteoarthritis occurs when joints and cartilage wear away, and extra weight puts additional pressure on both. Extra body fat also produces inflammation-causing substances that damage the joints and raise the osteoarthritis risk.
- Sleep apnea stops breathing for short periods. Stored neck fat can actually make airways smaller and limit breathing, especially at night. Too much stored body fat can also lead to inflammation, another risk factor for this disease.

Losing weight, even minimal amounts, reduces the risk factors for all of the above diseases.

Success

Charles Scott

Charles Scott is a true success story. For more than 25 years, he was 350 pounds or more overweight and suffered from a series of medical conditions including diabetes, high blood pressure, lower leg edema and arthritis. "My family doctor told me that if I did not get the weight off, I was going to die in the near future," he said.

At 683 pounds, Scott wanted to get healthy using diet and exercise. In April of 2004, he joined the Medical Weight Management Program at The Methodist Hospital. Through the medically-supervised program, he learned how to lose weight with nutrition, behavior modification and exercise, and he received encouragement by participating in support group meetings. He lost over 300 pounds, and two years later, he has kept the weight off.

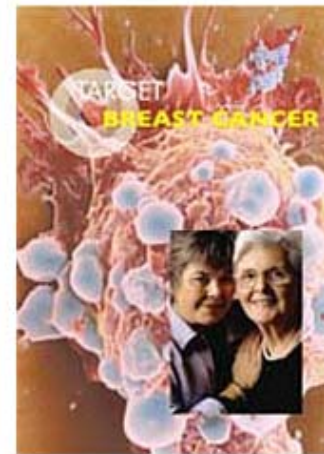
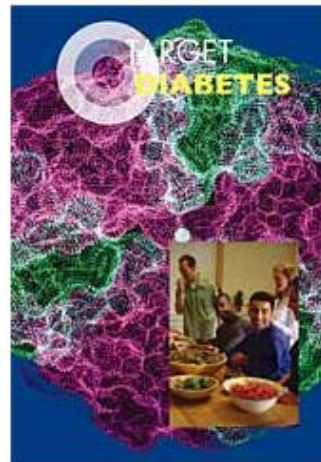
His health has improved as well. He is off of all of his medications, his blood pressure is normal, his lower leg edema is gone, and he has more energy and is able to enjoy physical activities with his daughter.

His advice for others considering weight loss: "No matter what your situation, no matter what your history — you can be successful and improve your health and physical fitness. I hope that my story can help inspire others."

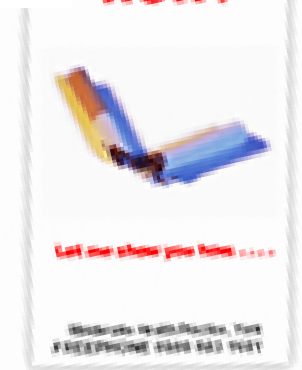
FREE Orientation Sessions

To learn more about the Methodist Weight Management Center, sign up to attend a FREE upcoming orientation session. To register, please call (832) 667-LOSE or visit www.methodistweightmanagement.com.

new direction

Do YOU Want to
STOP
SMOKING
NOW?



...AND OUR DATA'S NOT REALLY THE BEST

OLD NEWS

I HAVE DIABETES

The class of 1992 arrived on Thursday, August 24. They were greeted by upperclassmen who, in the words of one sophomore, "smiled too wide," and were perhaps a bit overzealous in peddling their wares to sophomore-sophomore. The Class of 1992 Club, Student Council, and the New York Times were represented selling everything from Yale-shirts to official IMSA t-shirts. Thursday was more of an orientation for the parents than for the students. Parents were herded into meetings with Stephanie Marshall, Director of IMSA, John Court, principal, and Dean Deborah Guffy, Dean of Student Services, as well as representatives of the Parents' Council, College Counselling and Career Development staff, residential life staff, and Health Services staff. Most parents were gone by 4:30, and the newcomers were left to their own devices. In the evening, the Ice Cream Social and Dance was held for the sophomores. Dawn Assistant Jordan Martin observed, "The sophomores are extremely social and

we didn't even need to be there to break the ice."

On Friday, Chief of Security James Bondi began the orientation schedule with the traditional IMSA Security Seminar, complete with the air raid demonstration. All one sophomore can remember is being "bored out of my mind." After that, the class was split into groups for the IRC Seminar, the "Policies and Procedures" Seminar, and school identification pictures. Also on Friday were several other activities including a lunch with faculty and a scavenger hunt. One student said, "Some teachers didn't show. [The activities were] not too organized. Many [teachers] blew it off."

On Saturday, the Class of 1992 was shuttled away on the Social Science Department's annual concourse trip, lest they be trampled by the hordes of IMSA veterans. One student commented, "[It was] the usual brouhaha of moving in." That evening an all-school dance was held outside the Student Union.

On Sunday the entire IMSA

community was invited to a picnic outside the main academic building. Virtually everyone attended at one time or another, but very few students stayed very long. The event was the first official "get-together" for the entire community. Most students spent the entire day reacquainting themselves with old friends and the campus.

On Monday, orientation was begun in earnest. The student body was divided by class, and shipped off to meetings with Bondi, David Barr, Director of the Informational Resource Center, CC/CD representatives, Dean Guffy, and IMSA's very own Ogden Spruill. Bondi added a bit of color to his traditional security lecture, interspersing clips from movies with the usual rhetoric. As usual the "Fire Safety" film was the most popular portion of the lecture, with many upperclassmen cheering when the room used for demonstration purposes reached "flashover." In his allotted time Dr. Barr presented the IRC mission statement and future plans, and briefly discussed

see MONDAY page 2.

INSIDE

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NO MAMMOGRAM THIS YEAR

Alyssa Bennett

On Saturday, June 10, IMSA held commencement exercises for the 168 members of the Charter Class at the Paramount Arts Center in Aurora. The occasion was marked with speeches by Illinois Governor James Thompson, Dr. Leon Lederman, then-Director of Fermi National Accelerator Laboratory, and Dr. Stephanie Marshall, Director of IMSA. Also speaking at the ceremony were then-Student Council President David Kung and graduating senior Terri Willard.

Governor Thompson addressed one of the main differences between the

Academy and most other high schools, observing that "for too many high school graduates, today's world is as big as it's going to get." Dr. Lederman, the "father of IMSA," argued that "if one kid in the next ten or twenty years becomes a Jonas Salk, you pay for the school for a hundred years." Both Thompson and Lederman stressed the importance of becoming active in the support of democracy, and Dr. Lederman charged the Charter Class to "immerse themselves in youth" so that their minds would remain active for many years to

see GRADS, pg. 5

MISSING WHAT MATTERS

Engagement

Whole Person Wellbeing

Health Motivation

Health Approach

Self-efficacy

Priority of Health

Non-Traditional

Birth Order

Caregiver

Pet Ownership

Source of Health Information

HEALTH = LIFE, FOR GOOD OR FOR BAD

Life impacts how people behave in the hospital

The New York Times

Well

Tara Parker-Pope on Health

Leaving the Hospital Early

March 10, 2011

More patients are checking themselves out of the hospital against their doctors' advice, new government data shows.

The Agency for Healthcare Research and Quality reports a 40 percent increase in the number of patients who left the hospital against medical advice over a recent 12-year period.

...the increase in early discharges is most likely an indicator of the intense pressures patients may face when they become ill.

“What discharge against medical advice really indicates is the sort of economic and social issues patients face, but that hospitals aren't able to help with,” Ms. Elixhauser [senior research for The Agency for Healthcare Research and Quality] said.

Even in controlled environments (i.e. the hospital) life can feel so overwhelming for people that they disregard recommended treatment.

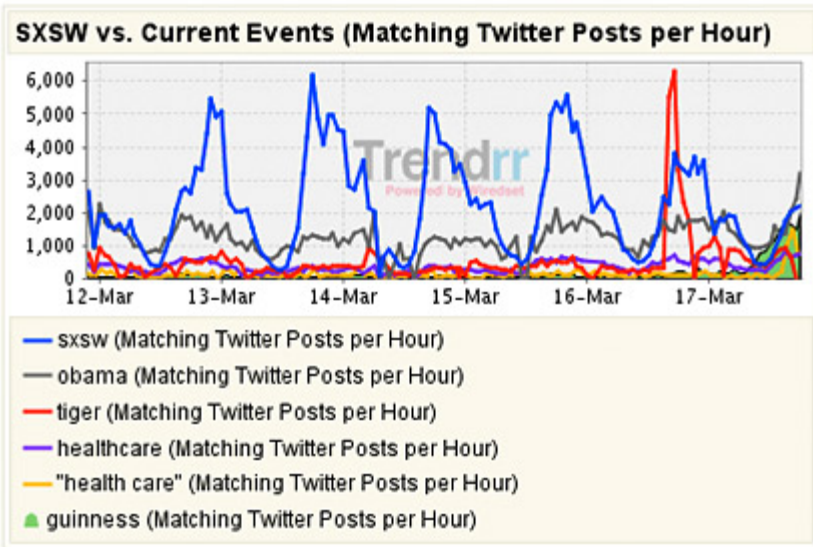
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PEOPLE ARE PAYING ATTENTION TO OTHER THINGS

What are people talking about?



March 2010

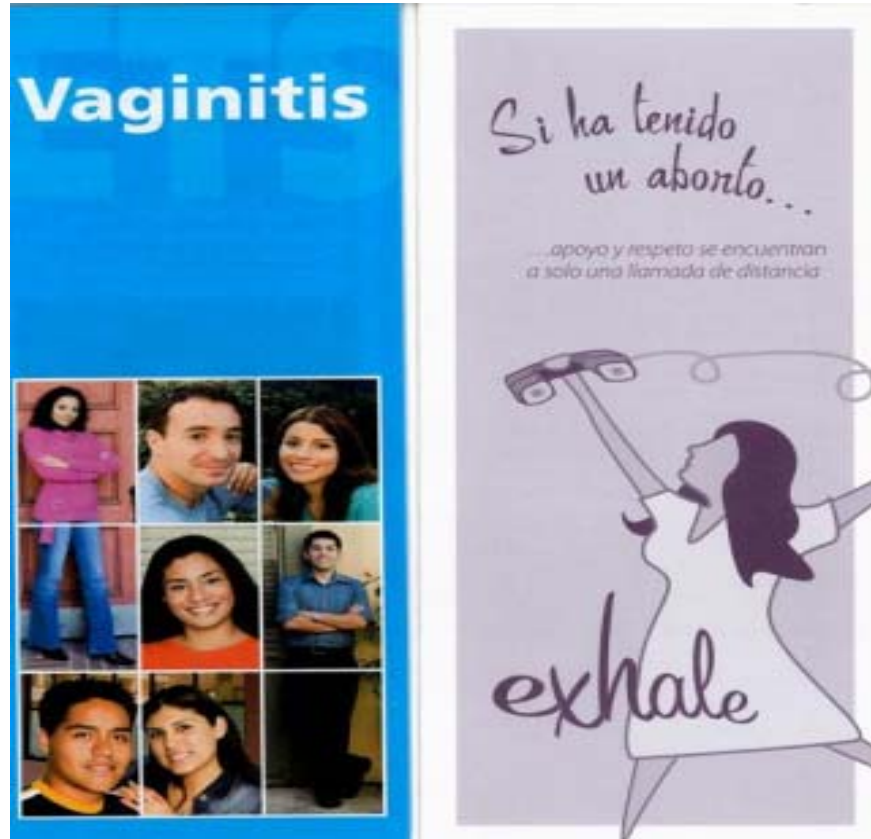


NOT HEALTHCARE

Even as healthcare reform was being voted on SXSW was generating much more chatter on Twitter



SO WE NEED TO WORK TO BE RELEVANT



SO WE NEED TO WORK TO BE RELEVANT

SEDUCE HEALTH | Real Talk About Sex

Making sure the message gets heard – and not ignored.

Indie Band Flyer Approach

Dusty Textbook Approach

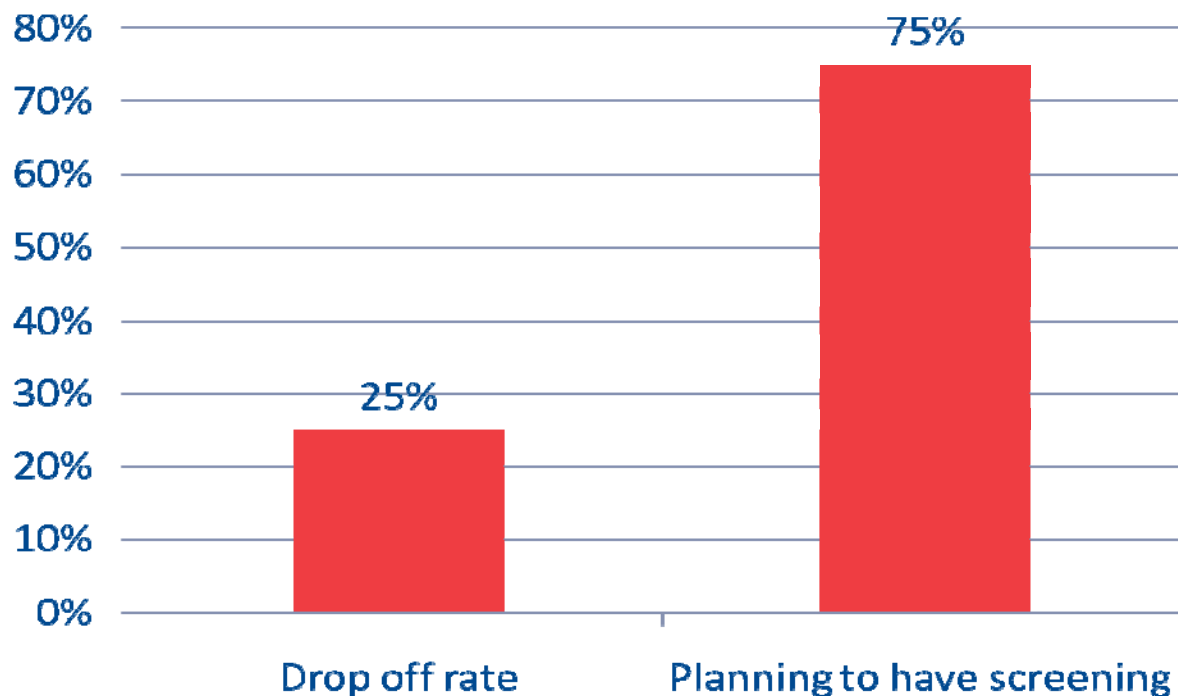


Key Communication Tenets

- Prototype the right tone of voice.
- Weed out industry jargon.
- Meet people where they are.

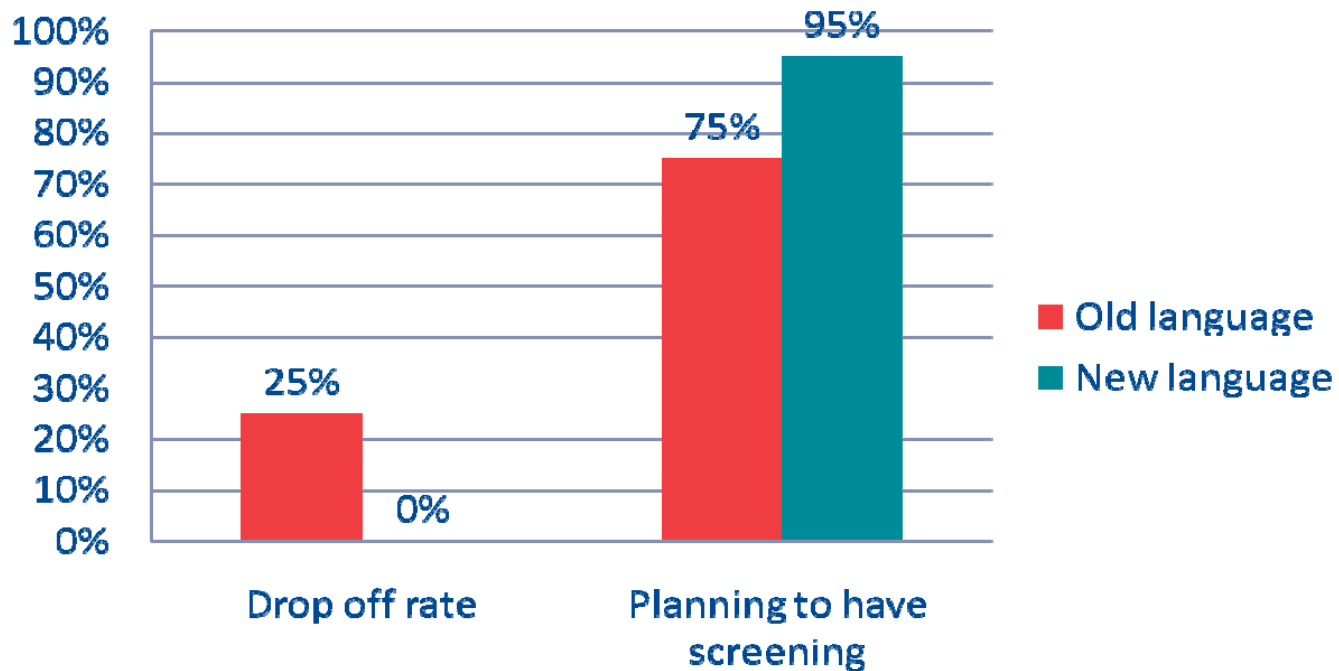
EXAMPLE: MAMMOGRAPHY OUTREACH, THEN...

“Our records indicate that it is time for you to get your mammogram, and we want to make sure you know that your coverage does include this preventive health screening. Do you think you’ll follow-up with your doctor about a mammogram?”



...AND NOW

“Believe it or not, there’s a mammography machine out there that really misses you. You don’t call, you don’t write and we think now’s the time to get back in touch. After all – it has your best interests in its heart. Do you think you’ll visit soon?”



REDEFINING MEDICAL DEFINITIONS

Preventive Care

Get this!! The U.S. Government thinks preventive care is so important they've assigned a Special Task Force to it! Don't worry, nobody will break down your door but they DID issue some guidelines for preventive care so if you haven't picked a program yet, our default Preventive Care program will give you great suggestions specific for your gender and age group!

Hypertension

If only we could ask our blood why it's feeling so much pressure. Big exam coming up? Tax season for blood cells? Whatever it is, find relief here with helpful tips and guidelines on managing hypertension and high blood pressure.

Diabetes

Whether you're surfing for the best sugar-free brownie recipe or looking for tips on foot care - the Diabetes program has got you covered. Find out all there is to know about diabetes and how to enjoy your life to the fullest while you're managing it at the same time!

MESSAGING CONSIDERATIONS: GENDER

FEMALE	MALE
Value authenticity, cooperative and collaborative spirit. Exploratory dialogue (not flatly declarative) such as “this might be right for you”.	Value competitive, aggressive, and direct communications. Make it concrete and procedural - how does it work? What is the process involved? Must make males feel competent to make their own decision in a traditionally female domain (healthcare consumer).
Timing not important. Could re-ask on different occasion and through different channels. Related information welcome (she will decide what is worthwhile).	Timing is important - why is this important to do now? Give only that information which is critical to the decision. Push for a decision!
Prefer narratives rich in social and psychological complexity.	Prefer narratives about a competition or an external threat that must be overcome.
Soft sell.	Hard sell.

MESSAGING CONSIDERATIONS: LIFESTAGE

	YOUNG ADULT 18-34	ADULT 35-49	PRE-SENIOR 50-64	SENIOR 65+
Living Situation	1/2 live alone or with non-family	Less than 1/3 live alone or with non-family	1/2 live alone or with non-family - big life change!	1/2 live alone or with non family
Married?	1 out of 2 (first marriage M 28 and F 26)	1 out of 2	< 1 out of 2	1 out of 2
Presence of Minor Children	2/3 of YA led households	3/4 of Adult led households	1/5 of PreSenior led households	
Employment	10-25% are unemployed	8-9% are unemployed	6-8% are unemployed	
Enjoy...	Prefer hyperbolic language, fantasy fiction and far-out themes; and technology.	Often opt for "child appropriate" entertainment	Prefer narratives that recognize their worth and importance (don't compromise, don't settle)	Testimonials from reputable seniors.
Don't...	Don't sell. Don't tell them what to do.	Don't waste their time.	Don't call them old! Don't assume they are "sticks in the mud" - life has up-rooted them.	Don't patronize. Don't over-sell or hype.
Do...	Entertain. Entice. Treat difficulties with scathing sarcastic wit and intellectual humor.	Provide recipe for success with strong value propositions critical for conserving scarce resources: time, money, complexity!	Play on vanity and a "new age of exploration" (death, divorce introduce life changes)	Build trust - gentle long term sell while building relationship. State "small print" clearly (e.g "no cost"). Be respectful.

APPLYING LIFESTAGE TAILORING: YOUNG MEN (AGES 18-34)

BEFORE

[Incorporates social norming and hyperbolic discounting with an authoritarian tone]

“You have an important decision to make today. By now, most of our members are getting immediate access to their benefit through our website, <CLIENTWEBSITE>.”

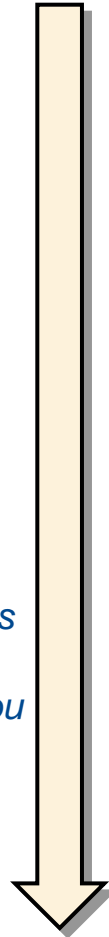
According to our records, you’re missing out because you haven’t registered yet – but don’t worry, registering takes only a couple of seconds and by doing it today, you can start saving time immediately by ordering prescriptions online. You may even find some ways to spend less money right away. [Go to Email Gather]

AFTER

[Incorporates a direct, authoritarian tone as well as loss aversion and hyperbolic discounting]

“You have an important decision to make today – to spend less money and get your prescriptions quicker or... To not do anything.”

Use our website <CLIENTWEBSITE> to get immediate access to the benefits you’re already paying for. It’s a no brainer. We don’t want you to miss out. [Go to Email Gather]



APPLYING BEHAVIORAL ECONOMICS: HYPERBOLIC DISCOUNTING

Now. Nower. Nowest....

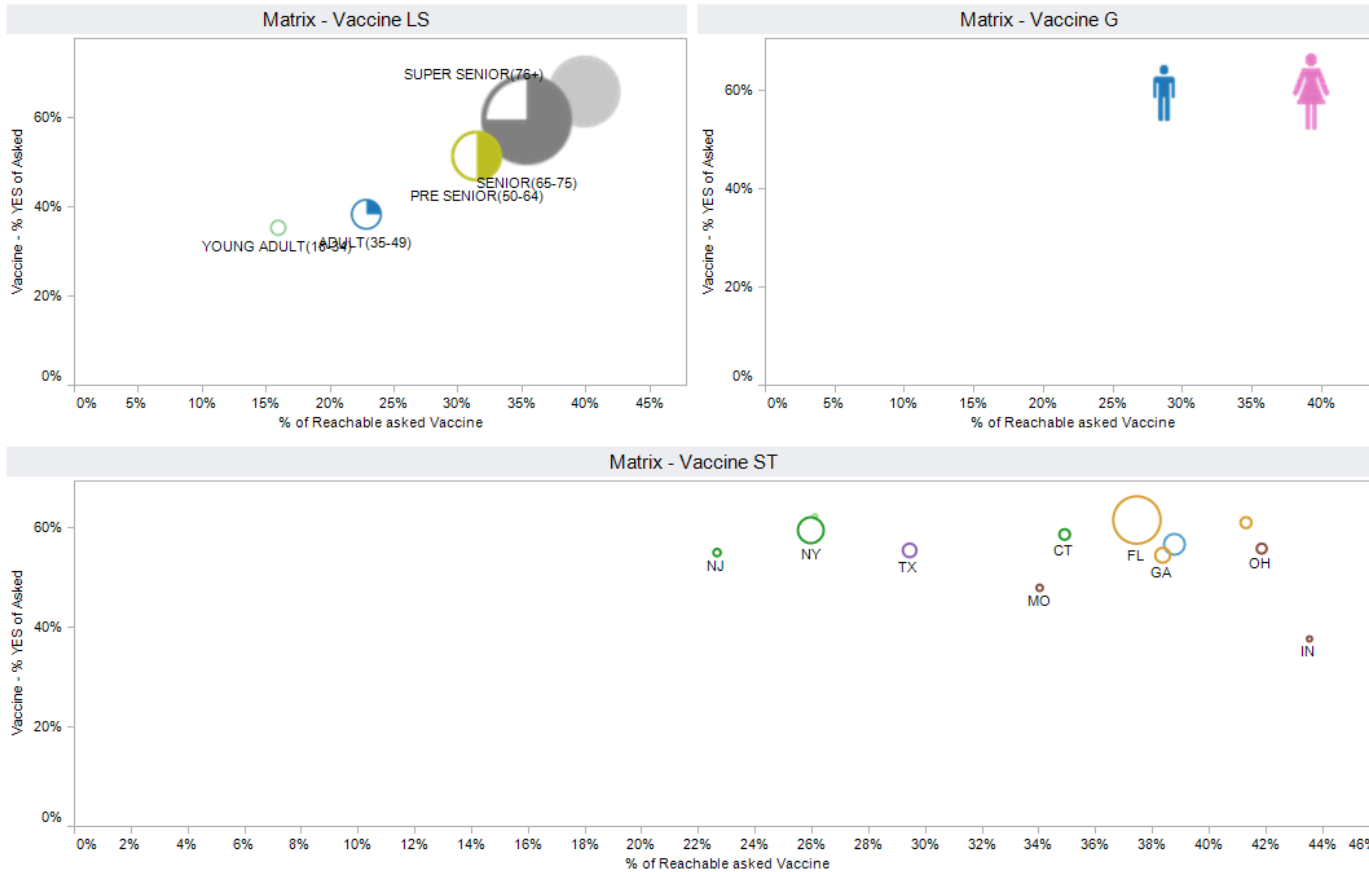
As in, you don't have to spend another second
NOT getting a better price for your prescriptions.

If you want to continue missing out – DON'T click this button.

- Catch the eye with a unique set play on 'Now'.
- Use strong pain avoidance technique – double negative description of what people ought to avoid.
- Research shows that people will be more inclined to make a 'Now' decision when posed with a negatively framed benefit

ADULT VACCINATIONS: OPPORTUNITIES TO DRIVE BEHAVIOR

Variation in rates and % asked by lifestage and state



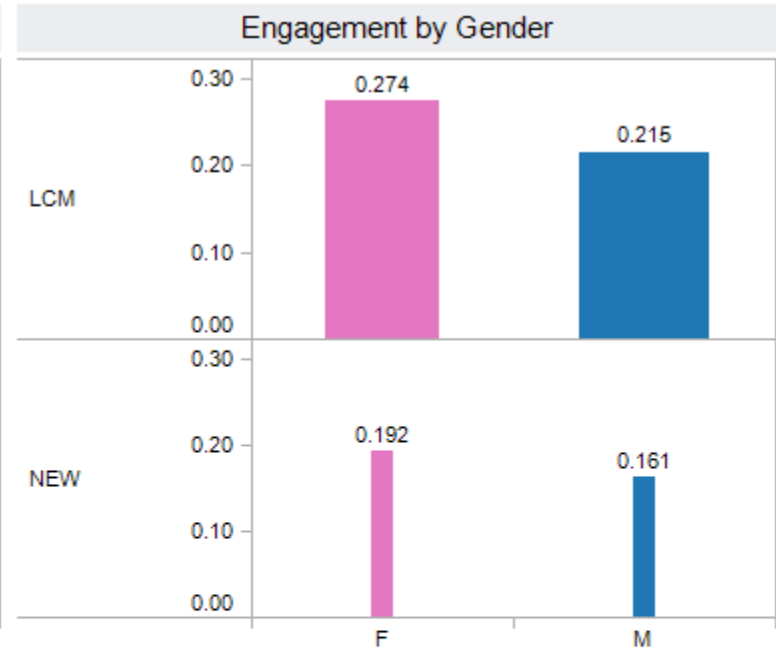
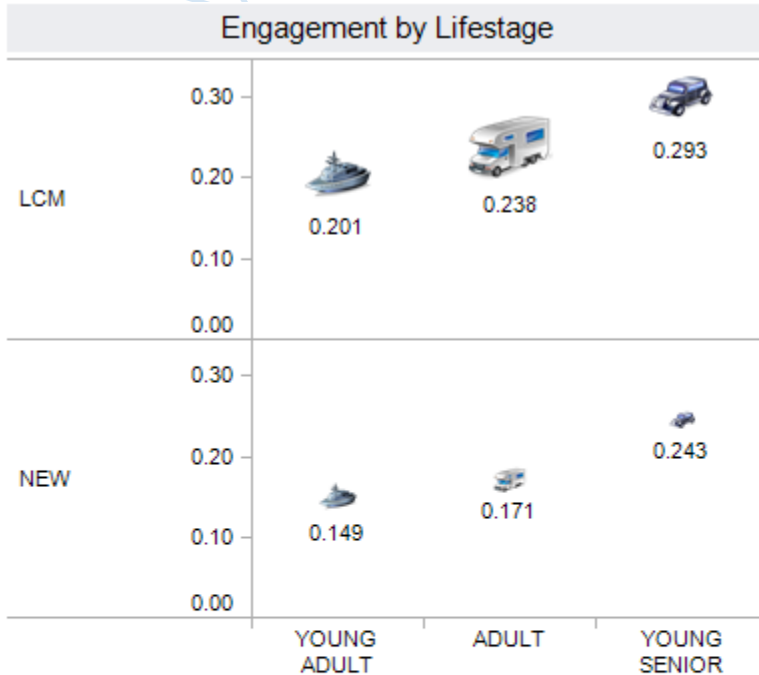
Q: Have you had a chance to get your flu shot yet this year?

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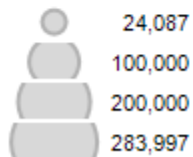
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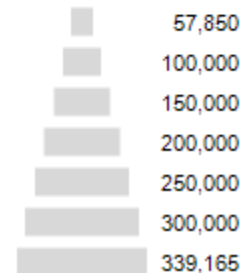
POPULATION ENGAGEMENT BY LIFESTAGE AND GENDER



DistinctMembers

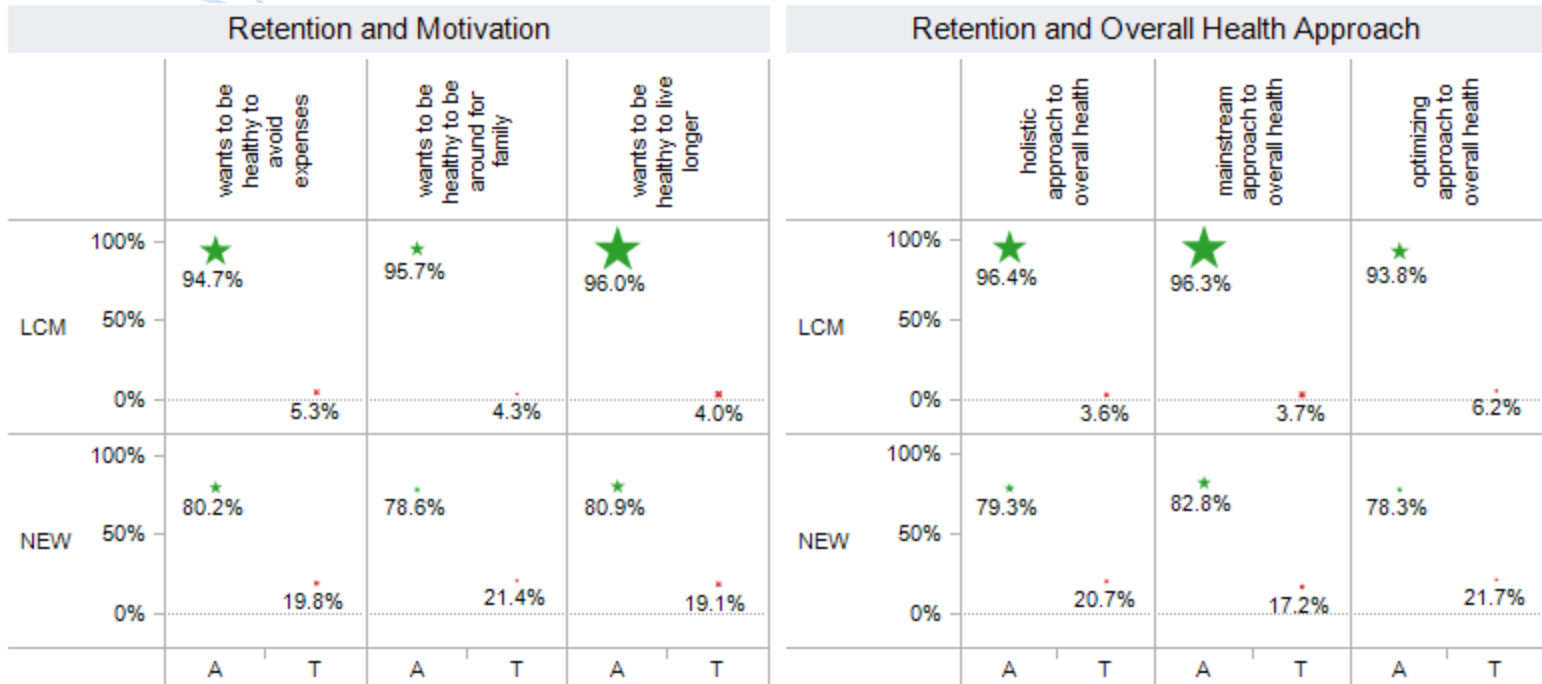


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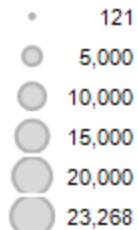


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RETENTION BY MOTIVATION & OVERALL HEALTH APPROACH



DistinctMembers

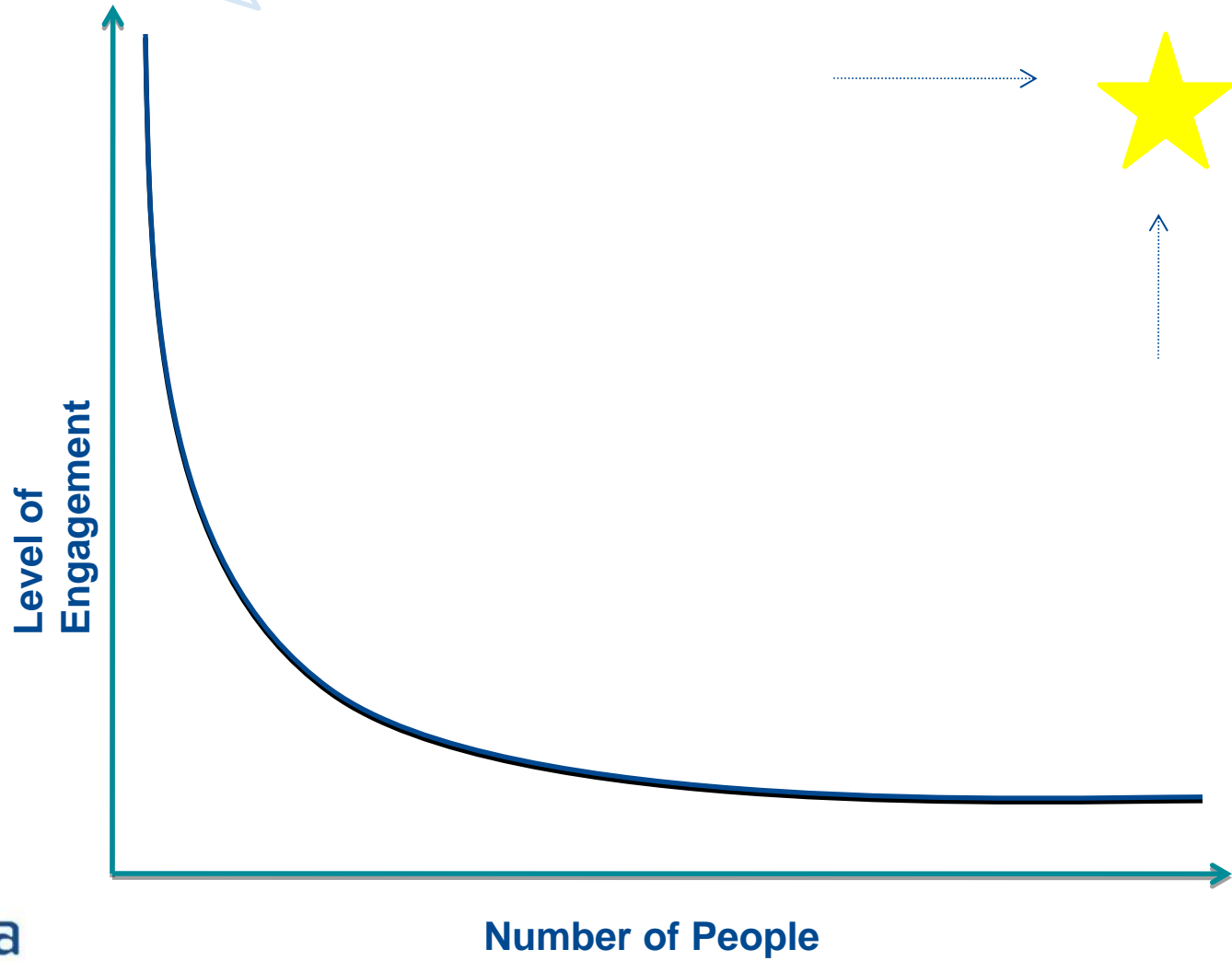


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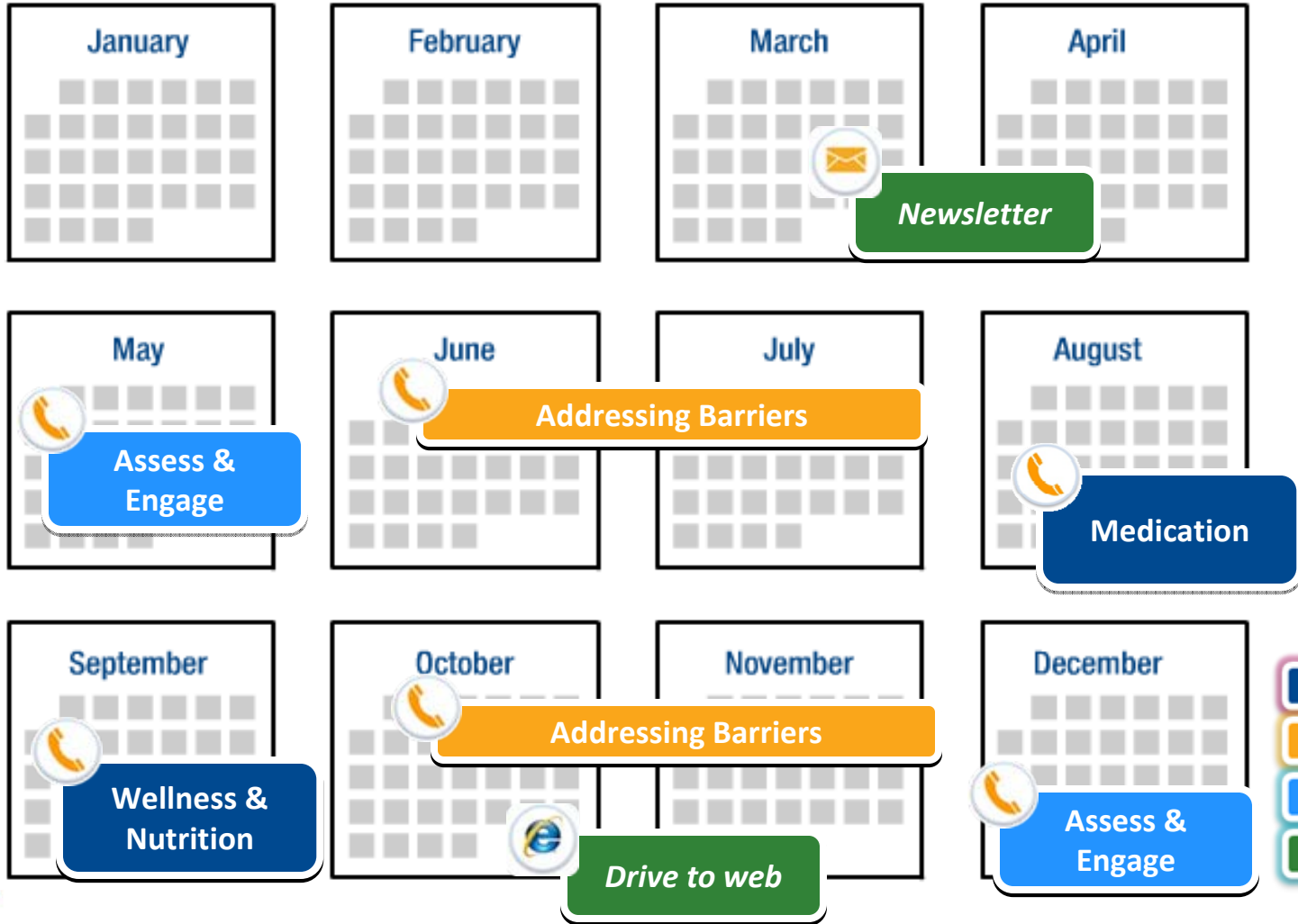


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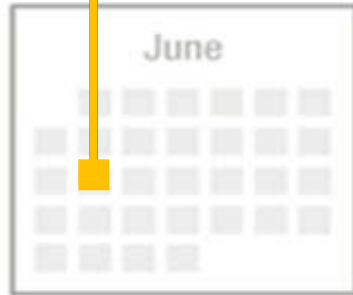
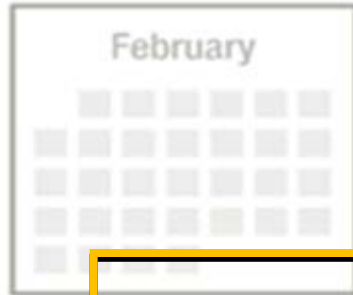
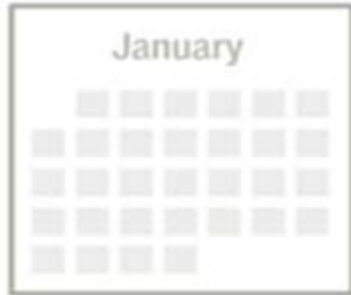
OUR CHALLENGE...SUSTAINING ENGAGEMENT OVER TIME



"YEAR IN THE LIFE" strategy: Hypertension



“YEAR IN THE LIFE” STRATEGY: HYPERTENSION



June - July: Barriers

- Theme: **We're in this together**
- Target population based on self-reported data from Assessment call as well as claims
- Re-assess whether member feels their BP is in control from first call
- Strategies for Success Modules (**MD, Rx, Stress, Diet, Alcohol, Smoking, Obesity**)
- Promote appropriate supportive resources the client offers
- Tips: The **relationship between dehydration and high BP** and tips to avoid dehydration (drink water / limit alcohol)

PATIENT ADVOCACY YOU JUST CAN'T IGNORE

Regina Holliday *The Walking Gallery*

