Helping Clients Overcome Healthcare Challenges:
Five Steps To An Optimal Solution

Many of your clients are overwhelmed and frustrated by the multiple challenges of managing their health benefit plan. That doesn't mean, however, that you have to endure the same sentiments when leading them to a viable solution. Consider using these five suggestions to ensure you and your clients are successful at building a sustainable healthcare benefit plan that delivers value and results.

That's the hopeful message delivered in a recent Employee Benefit Adviser-produced web seminar by Anne Stowell, VP of Member Experience for Teladoc, a global leader in the burgeoning field of virtual healthcare delivery. The company has relationships with 50,000 medical experts worldwide that span 450 medical specialties. Its clinical services cover an array of conditions, from primary care to critical care and complex case consultation.

FIVE TIPS TO AN OPTIMAL SOLUTION
"While many of the five tips are intuitive, when strategically positioned together they produce powerful results," Stowell said.

1. Learn your clients' hot buttons

2. Develop an actionable strategy to address clients' needs

3. Fight vendor fatigue with a comprehensive virtual solution

4. Ensure maximum engagement

5. Recognize the valuable circle of employee confidence and empowerment

1. LEARN FROM YOUR CLIENTS
It's easy to make assumptions based on routine conversations that turn out to be wrong, or that fail to reflect the hierarchy of clients' pain points. However, actively listening and engaging your clients in productive conversations can help advisers build lasting relationships.

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Develop an actionable strategy to address clients' key needs.

In addition, advisers can provide clarity to clients who may not understand key underlying drivers of those issues, such as the rising cost of health benefits. To illustrate that top-ranking hot-button for most employers, Stowell noted the following:

· Specialty drugs account for nearly **40% of total drug spending**, while used by only 2% of patients;

· Chronic physical and mental health conditions account for **86% of healthcare costs**;

· **$210 billion is wasted** each year for unnecessary healthcare services; and

· The annual cost of preventable medical errors is between **$17 billion and $29 billion**.

2. ADDRESSING CLIENTS' NEEDS
These numbers help to lay the foundation for the second of Stowell's five-element program: Develop an actionable strategy to address clients' key needs. This step begins with zeroing in on your clients' costliest claims, both in absolute dollars and as they compare to benchmarks.

For example, the average cost of an emergency room (ER) visit is $2,500, the average visit to a primary care physician is $200, and the average fee for a trip to a walk-in urgent care (UC) center is $100. Many medical issues that drive people to ERs can be handled much less expensively, so the question is how to move the needle from $2,500 to $200 or $100.

What if common medical scenarios that today prompt patients to seek economical care could be addressed by a virtual care solution at less than half the cost of a UC center? That would be an actionable strategy worth exploring, Stowell suggested.

Telehealth, a basic building block of virtual care, is exploding. In 2012, only 7 percent of employers incorporated telehealth into their health benefit plan design to some degree. But today, Stowell told webinar attendees, that number has climbed to 96 percent.

Along similar lines, the percentage of employers offering expert review services, including expert medical opinions, grew from 46 percent in 2016 to 66 percent today.

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But the true bottom line in healthcare delivery models is medical outcomes; how economical is an inexpensive strategy if the quality of care is compromised? Patient access, or the lack thereof, affects outcomes. For example, timeliness of the rendering of medical services can be a significant determinant of outcomes—both in purely medical terms and in the level of emotional distress experienced by patients and those supervising their care.

While not all medical conditions can be addressed remotely, it is estimated that 70 percent of non-urgent care can be triaged without an in-person visit. In addition, when care is delivered virtually, the incidence of infections through exposure to other patients is eliminated. Indeed, during the 2017-18 flu outbreak, the CDC recommended that patients call their doctor rather than go to the ER.

3. FIGHTING VENDOR FATIGUE—A COMPREHENSIVE SOLUTION

"The health services vendor landscape is complex and companies face a dizzying array of single-point solutions," Stowell said. In addition to the basic provision of health services, a complete solution features health information and decision support, tools employees can use to track their own health, and a simple means of accessing the appropriate kind of care.

A solid virtual care delivery solution pulls those together into a solution through a single point of access. "Virtual care delivery is changing the way people access and experience quality care at its core," according to Stowell. "You want one point of access where someone comes in and they get guidance as to what is the best solution."

4. MAXIMIZE ENGAGEMENT

The cost of absenteeism and presenteeism to employers is staggering, amounting to the equivalent of three months of non-productivity per employee per year.

1. Absenteeism—when someone is absent due to illness.
2. Presenteeism—a phenomenon where employees show up for work but don't perform at full capacity because of a health issue.

A 2016 Insights Report by the Virgin Pulse Global Challenge estimates that the cost of presenteeism to businesses was about 10 times higher than absenteeism.

It's also essential to keep employees engaged and aware of their access to the resources that can help to assure their health and that of their dependents.

"Making sure that people don't miss work to deal with healthcare challenges is crucial," Stowell said. "Everybody should have access to the type of care they need so they don't have to take an afternoon or a day off to go to the doctor for themselves or to take the kids to the doctor or stay at home with them."

It's not merely a matter of being able to access care more conveniently from work. A superior comprehensive health delivery model also leads to healthier employees (and their dependents), so the need to seek healthcare services is also reduced.

In order to minimize employee disengagement due to health issues, it's also essential to keep employees engaged and aware of their access to the resources available to them and their dependents. That requires a surround-sound communication strategy beyond traditional emails and printed materials that includes "all of the media's advertising channels to remind people they have this benefit." There is no single communication vehicle that is going be as effective as the combination of multiple touch points through different, distinct channels.

Equally important is word of mouth. Seize every opportunity to amplify messages of positive experiences that employees have had with the virtual health benefit, because their credibility with coworkers is high.

5. RECOGNIZE EMPLOYEE CONFIDENCE AND EMPOWERMENT
"We empower employees to make smart healthcare choices when we give them reason to have confidence in the solutions we are providing them," said Stowell. Telemedicine services, although now widely available, are "still a relatively new thing," she noted.

That requires the removal of potential roadblocks to employee acceptance of a new resource. Word-of-mouth recommendations are critical in this regard. But it's also crucial to put your best foot forward with a virtual care solution that "consistently delivers an excellent and even delightful user experience," Stowell said.

Following these five tips will help advisers meet the needs of their clients and build a lasting, trusting relationship.